

Procedure Document

# Professional Development Support

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Office of Professional Leadership

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## Acknowledgement of Country

The Health and Community Services Directorate acknowledges the Ngunnawal people as traditional custodians of the ACT and recognise any other people or families with connection to the lands of the ACT and region.

We respect the Aboriginal and Torres Strait Islander people, particularly our Aboriginal and Torres Strait Islander staff, and their continuing culture and contribution they make to the Canberra region and the life of our city.

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## Purpose

The purpose of this procedure is to outline a clear and consistent Professional Development (PD) Support process for eligible employees which aligns with Section N5 of the ACT Public Sector Health Professional Enterprise Agreement 2023-2026 (Enterprise Agreement) and Section O4 of the ACT Public Sector Technical and Other Professional Enterprise Agreement 2023-2026 for Child and Youth Protection Professionals.

PD Support (Section N5) applies to those employees who occupy a position that is classified as:

- Child and Youth Protection Professional
- Dentist
- Health Professional
- Medical Imaging
- Medical Physics
- Perfusionist
- Pharmacist
- Psychologist
- Radiation Therapist

and who

- have a minimum of 12 months continuous service (inclusive of service across the ACT Public Service at any classification); and
- occupy a casual, temporary, or permanent position.

Eligibility for PD Support is also subject to meeting all other eligibility requirements at the time PD Support is applied for. These requirements are outlined in this procedure.

## Note

Current ACT Public Sector (ACTPS) Enterprise Agreements are under negotiation. This procedure will be reviewed and updated to reflect any changes impacting this procedure when negotiations are finalised.

This procedure should be read in conjunction with Section N5 of the Enterprise Agreement. In the event of any inconsistency between this procedure and the Enterprise Agreement the Enterprise Agreement will prevail.

## Scope

This procedure applies to the following Health and Community Services Directorate (HCSD) employees:

- all staff employed under the ACT Public Sector Health Professional Enterprise Agreement 2023-2026; and
- Child and Youth Protection Professionals employed under the ACT Public Sector Technical and Other Professional Enterprise Agreement 2023-2026.

This procedure does not apply where staff are directed to attend an education or training activity, including all mandatory training, or where staff access their Professional Development Leave (Q10) entitlement, as this is inconsistent with the intent of PD Support and the Enterprise Agreement.

## Roles and Responsibilities

| Position             | Responsibility                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|----------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Health Professionals | <ul style="list-style-type: none"><li>• Engaging in the performance planning process, reflecting on areas for development, and ensuring they have a current Performance and Development Plan in place</li><li>• Ensuring that mandatory training is up to date prior to applying for PD Support</li><li>• Considering the variety of training and education supports outlined in Section 4 of this procedure and discussing with their immediate supervisor to determine which option(s) are most relevant to the employee's field of practice each financial year</li><li>• Assessing their own PD Support eligibility; submitting the PD Support Application Form (Attachment 1) to their immediate supervisor or delegate, including all requested information; maintaining a record of their PD Support for each financial year; monitoring expenditure against their annual PD Support entitlement; and assessing their financial year PD Support balance prior to applying for PD Support</li><li>• If agreement cannot be reached between employee and their immediate supervisor regarding the relevance of the PD activity to the applicant's field of practice, seeking advice from a senior Allied Health Professional employee of the same discipline as the applicant, including outside the immediate work area, team, division or directorate, or Executive Branch Manager. Where organisational structures do not provide for this, independent review may be sought from the Chief Allied Health Officer</li><li>• Funding via self-funding or seeking other funding sources (e.g. from the Divisional budget, the <u>Allied Health Scholarship Scheme</u> or <u>Studies Assistance</u>) to meet the gap between the PD Support payment and total cost of activity being funded</li><li>• Communicating promptly with their immediate supervisor or delegate in relation to any requests for payment documentation</li><li>• Providing timely notice to their immediate supervisor or delegate if they are subsequently unable to attend the funded activity</li></ul> |

|                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Immediate Supervisors                                                                                                                                          | <ul style="list-style-type: none"> <li>• Informing eligible employees of their entitlement to PD Support</li> <li>• Supporting eligible employees to be aware of their responsibilities in relation to this procedure</li> <li>• Facilitating performance and development planning for eligible employees in accordance with <u>The ACT Public Service Performance Framework and Guidance Statement</u></li> <li>• Encouraging eligible employees to consider the variety of training and education supports outlined in Section 4 of this procedure</li> <li>• Assessing PD Support applications in accordance with this procedure and responsibilities under the Enterprise Agreement</li> <li>• Approving attendance at professional development (where delegated)</li> <li>• Authorising payment for professional development (where delegated)</li> <li>• Advising applicant of PD Support decision in a timely manner, preferably within 10 business days</li> <li>• Monitoring and tracking PD Support activities of eligible employees within their team on a quarterly basis</li> </ul> |
| Executives                                                                                                                                                     | <ul style="list-style-type: none"> <li>• Supporting eligible employees and their immediate supervisors to be aware of entitlements under the Enterprise Agreement and responsibilities in relation to this procedure</li> <li>• Approving attendance at professional development (where delegated)</li> <li>• Authorising payment for professional development (where delegated)</li> <li>• Facilitating processing, monitoring, tracking, and quarterly reporting to the Office of the Chief Allied Health Officer on PD Support utilisation and activities of eligible employees within their division</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| Senior Allied Health Professional of the same discipline (including outside the immediate work area, team, division or directorate) / Executive Branch Manager | <ul style="list-style-type: none"> <li>• If agreement cannot be reached between employee and their immediate supervisor regarding relevance of the PD activity to the applicant's field of practice, advising the immediate supervisor whether the PD activity is (or is not) considered reasonably relevant to the applicant's field of practice</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| Chief Allied Health Officer                                                                                                                                    | <ul style="list-style-type: none"> <li>• Where an eligible employee seeks independent review (in the absence of a Senior Allied Health Professional of the same discipline (including outside the immediate work area, team, division or directorate) or Executive Branch Manager) advising the immediate supervisor whether the PD activity is (or is not) considered reasonably relevant to the applicant's field of practice</li> <li>• Annual reporting to the Chief Finance Officer and Director General on PD Support utilisation</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |

# Procedure

## Section 1: Background

ACT Government is committed to supporting employees to undertake PD training and education activities through a range of schemes e.g. PD Support (as outlined in this procedure), PD Leave, mandatory training (also known as core training or essential education), Studies Assistance, Study Leave, grants, and scholarships.

Employees should first discuss PD activities with their immediate supervisor to determine which scheme(s) may best suit their individual circumstances. It is expected that discussion and agreement on plans and activities is part of the annual formal Performance and Development Plan.

## Section 2: Presumptions

Staff will not use PD Support funding where they are required by their employer to attend an education or training activity, including mandatory training, core training, essential education, and training to meet operational requirements.

Where there are organisation specific mandatory training requirements, or an individual is directed to attend an identified training activity, it is expected that costs are covered by the organisation.

## Section 3: Eligibility Criteria

In accordance with Section N5 of the Enterprise Agreement, funding support will be granted to an employee with a minimum of 12 months continuous service to undertake professional development training and educational activities subject to meeting the following criteria:

- *“the application is relevant to the employee’s field of practice. Where relevance is disputed, the matter will be referred to the employee’s Profession Lead for the employee’s discipline (where possible) or a senior Allied Health Professional of the same discipline as the applicant\*; and*
- *operational requirements permit the absence of the employee; and*
- *the training or educational activities to be funded are relevant to the employee’s professional development and the achievement of objectives as set out in the employee’s Performance agreement; and*
- *the employee’s mandatory training is up to date or will be at the time the professional development is to be undertaken.”<sup>1</sup>*

\* Where organisational structures do not provide for a relevant Profession Lead for the employee’s discipline or a senior Allied Health Professional employee of the same discipline as the applicant, including outside the immediate work area, team, division or directorate, independent review may be sought from Executive Branch Manager. Where all outlined avenues have been exhausted as a final course of action the employee may seek independent review from the Chief Allied Health Officer.

If an application for PD Support does not meet all the above criteria at the time of application, the application will be deemed ineligible at that point in time. An employee may resubmit their application at a time that will ensure all criteria are met, for example when operational

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<sup>1</sup> p143 ACT Public Sector Health Professional Enterprise Agreement 2023-2026

requirements will support the employee's absence, or mandatory training is completed, or request the immediate supervisor review the decision and explore avenues to seek a resolution.

## Section 4: Eligible Expenditure

For HCSD employees, eligible expenditure for PD Support includes but is not limited to fees and charges incurred and expenses secondary to the employee undertaking the approved PD activity, including:

- online and in-person course / conference registration / enrolment fees (including formal tertiary education and micro-credentialing)
- travel associated with a relevant PD activity
- accommodation associated with a relevant PD activity
- textbooks and professional trade journal subscriptions, including online access
- coaching, mentoring, clinical supervision or profession specific supervision not provided by the employer

PD Support funding is reserved for activities that *directly* contribute to learning and capability development. Items not eligible for PD Support funding include but are not limited to:

- professional registration or professional association membership fees
- professional indemnity insurance
- computers (including laptops), portable electronic devices, mobile phones, and similar information technology equipment
- expenses incurred during travel, for example meals and car parking. Reimbursement of travel related expenses can be claimed in accordance with the organisational travel procedures. These claims are processed separately and do not deduct from the employee's PD Support entitlement.

### Pooling / Sharing PD Support

Eligible employees may agree to pool their individual PD Support funding to support a group PD activity. If funding is to be pooled agreement must be gained from all participating employees and each employee must submit an individual PD Support application form that reflects the amount of funding the individual agrees to use. For example, it may be agreed by a group of eligible employees that they wish to apply to fund an external speaker to present to a whole department, Division, or profession rather than multiple individuals attending a course conducted by that speaker / organisation. Non-eligible employees may also attend the PD activity if the eligible employee(s) agree.

Where staff are directed to attend an education or training activity, including mandatory training, this is not the intent of PD Support and should be funded from operational budgets.

## Section 5: General Considerations

### Leave

PD Support approved under Section N5 of the Enterprise Agreement is considered work related and therefore an application for leave is not required, however organisational travel procedures apply to all HCSD employees undertaking official travel, including for the purposes of training, education, and study.

Professional Development Leave (PDL) is a different and separate entitlement for permanent employees as outlined in Section Q10 of the Health Professional Enterprise Agreement. PDL does not change any PD Support entitlement or eligibility.

Where costs exceed the PD Support entitlement and funding is combined with a financial contribution from the individual and/or another source, employees will utilise PDL on a pro-rata basis for any proportion of time away from the workplace that is not covered by PD Support. Where time away from the workplace exceeds the PDL entitlement at Section Q10 supervisors may then consider using work hours for attendance. Personal and annual leave should not be used for this purpose.

### Considerations for Eligible Employees and Approvers

Eligible employees may not accrue, claim payment or cash-out their unused PD Support entitlement.

Employees are encouraged to share the learnings from PD activities accessed through PD Support with other members of their team and/or profession.

Where there are organisation specific mandatory training or education requirements, or an individual is directed to attend an identified training or education activity, the organisation should provide the necessary supports. PD Support as identified in Section N5 is not intended to be utilised for organisation specific training.

### Considerations for Optimising Access

Line areas and professional groups should consider ways to gain the maximum benefit for eligible employees undertaking PD activities. For example, it may be more cost effective to engage a speaker to deliver a PD activity to a group of staff both within and across Divisions / Directorates, than to fund individual employees to attend a PD activity, particularly where travel is required. PD activities such as webinars and online courses may also be cost effective.

## Section 6: Administrative Process

### Assessing PD Support Applications

The immediate supervisor is responsible for reviewing and supporting applications, consistent with the criteria outlined at Section 3 of this procedure. The head of service will grant funding for PD Support or delegate this function. Delegation to approve funding is outlined in HCSO delegation instruments and delegates may approve expenses for PD Support up to their delegation limit. Where the applicant's immediate supervisor does not have delegation to approve the requested amount approval must be sought from the delegate with appropriate financial delegation.

If the immediate supervisor and employee disagree or are unsure whether the PD activity is relevant to the employee's field of practice, the employee may seek advice from a senior Allied Health Professional employee of the same discipline as the applicant, including those outside the immediate work area, team, division or directorate, or the Executive Branch Manager. Where organisational structures do not provide for this, independent review may be sought from the Chief Allied Health Officer. Based on advice provided, the immediate supervisor must re-assess the relevance of the PD activity to the applicant's field of practice.

Where an immediate supervisor declines an employee's request citing operational reasons, and the employee disagrees, the employee may request the immediate supervisor review the decision and explore avenues to seek a resolution. In attempting to resolve this, steps taken could include seeking review from the Executive Branch Manager.

In instances where there is still disagreement about the application, the provisions at F6 (under "Dispute Avoidance and Settlement Procedures") of the Agreement apply. Where all avenues have been explored for resolving the issue, but the issue remains unresolved, under provisions outlined in Section I3 of the Enterprise Agreement, "Initiating a Review", employees may apply for a review.

Once an application has been reviewed and a decision made regarding approval or otherwise, the immediate supervisor is then responsible for communicating the outcome and the reasoning for the decision to the employee as soon as practicable.

### Processing PD Support Applications

When an application has been approved by the appropriate delegate, the immediate supervisor will contact the employee and confirm that their application is endorsed, preferably within 10 business days.

The immediate supervisor will discuss with the employee how funding support is to be managed and will provide clear communication in writing as to any further information needed to facilitate the required payments.

### Mandatory Training

For the purposes of PD Support, 'mandatory' training is taken to mean 'must complete'. Mandated essential education training or area/profession specific mandatory training activities are not to be funded by eligible employee's PD Support as per Section N5 of the Enterprise Agreement.

## Section 7: Financial Process

PD Support funds are based on a financial year and on a percentage of the employee's 'base rate of pay' for that period. Unless agreed by the head of service, eligible employees are entitled to receive funding equivalent to but not exceeding:

- 2% of their base rate of pay.

Such agreement will not be unreasonably withheld.

Refer to Attachment 2 for calculations against classification levels.

Any PD Support above the entitlement requires head of service approval.

Unused PD Support funding cannot be carried over or accrued. There is no requirement to fully expend the PD Support entitlement. Where agreed, the entitlement may be combined with a contribution from the individual and/or another source to enable the activity to occur.

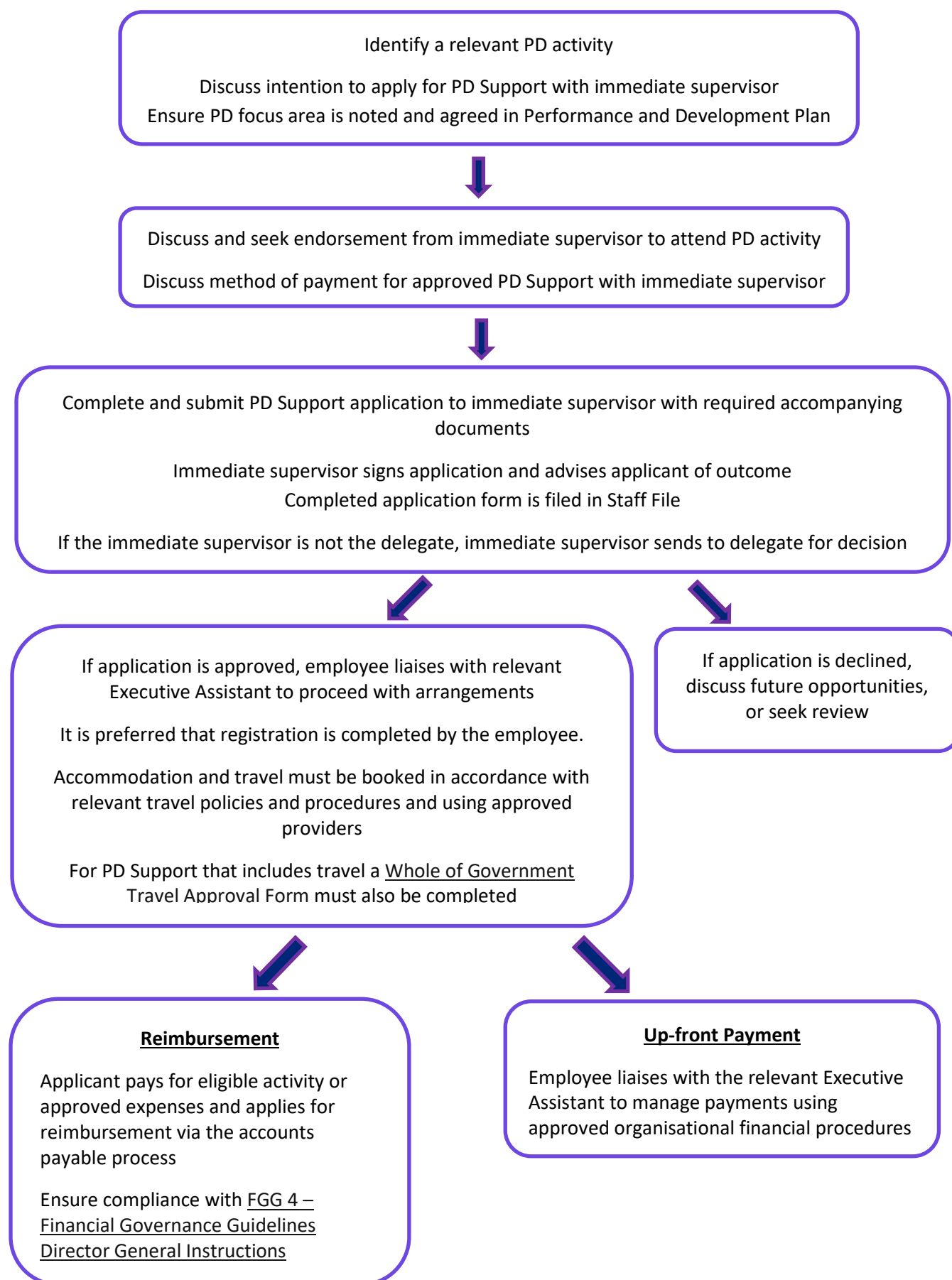
Each Division will have processes to enable processing, payment, monitoring, and reporting so that the Directorate can report on PD Support utilisation.

Payment for PD Support may be made by reimbursement or up-front payment and should be made in accordance with approved Directorate financial processes.

The operational area will be responsible for monitoring and reporting PD Support and associated costs. Executives will be responsible for quarterly reporting on PD Support utilisation to the Office of the Chief Allied Health Officer. The Office of the Chief Allied Health Officer will report annually, at the end of each financial year, to the Chief Financial Officer and the Director-General on PD Support utilisation. Reporting will include the total number of eligible HCSD staff (eligible HCSD staff are those employees identified in the Scope of this procedure, who have been employed in any ACTPS Directorate for 12 months or longer), PD Support funds expended, the number of approved and declined PD Support applications, and reasons applications have been declined.

Individuals have a responsibility to maintain a record of their own PD Support funding and attach this to each application for PD Support.

## PD Support Approval and Claim Flowchart



# Records Management

Divisions are responsible for processing their employees' PD Support applications. Divisions will maintain a record of applications and total payments each quarter, and report to the Office of the Chief Allied Health Officer. Directorate reporting systems will be shared to provide a consistent record of utilisation of the PD Support.

Records will be kept in accordance with the *ACT Territory Records Act 2002 and HCSD policies and procedures*, using an approved ACT Public Service records management system (e.g. Objective, TRIM, Human Resource Information Management System (HRIMS)).

## References and Related Documents

### References

ACT Public Sector Health Professional Enterprise Agreement 2023-2026

ACT Public Sector Technical and Other Professional Enterprise Agreement 2023-2026

### Legislation

- Public Sector Management Act 1994
- Financial Management Act 1996
- Territory Records Act 2002
- Fair Work Act 2009

### Supporting Documents

- Core Learning in the ACT Public Service
- ACT Public Service Learning Strategy
- ACT Public Service Performance Framework
- HCSD template for recording PD Support
- HCSD Delegation instruments
- Public Sector Management Standards 2016, including provisions of part 7.1 (Travel—domestic and international) of the Public Sector Management Standards 2006 (the repealed standards), that continue to apply
- Organisational travel procedures: for example Travel Procedure and <https://actgovernment.sharepoint.com/sites/intranet-CommunityServices/SitePages/Travel---Flights-and-Accommodation.aspx>

## Review Date

The next review of this document is due within 4 weeks of the new Enterprise Agreement coming into effect, or 31 July 2028, whichever is earlier.

## Version Control

| Version | Date          | Comments                                           |
|---------|---------------|----------------------------------------------------|
| 1       | March 2021    | Draft created                                      |
| 1.1     | November 2021 | Minor amendment to indicate reporting requirements |
| 2.0     | May 2023      | Document review                                    |
| 2.1     | December 2023 | Minor amendment to supporting documents required   |
| 3.0     | July 2026     | Document review. Updated to HCSD template          |

# Attachments

## ATTACHMENT 1: HCSD PD Support Application Form

This form must be submitted to immediate supervisors by eligible employees requesting Professional Development (PD) Support, in keeping with Section N5 of the *ACT Public Sector Health Professional Enterprise Agreement 2023-2026* and *O4 of the ACT Public Sector Technical and Other Officer Enterprise Agreement 2023-2026*. This form must be accompanied by the employee's PD Support record (including expenditure against PD Support entitlement) and any other forms required to undertake the requested PD activity.

| Applicant Details                                                                                                                                                                                                                                                                                                                   |                                                                                           |                           |                |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|---------------------------|----------------|
| Name: Full name                                                                                                                                                                                                                                                                                                                     | AGS / Staff ID Number:                                                                    | HP / CYPP Classification: |                |
| Employment Status: select                                                                                                                                                                                                                                                                                                           | If part-time, please specify Full Time Equivalent (FTE) (e.g. 0.6 FTE = 3 standard days): |                           |                |
| Length of Service in ACTPS:                                                                                                                                                                                                                                                                                                         | Contract Type: select                                                                     |                           |                |
| Request for PD Support (Applicant to complete and attach supporting documents)                                                                                                                                                                                                                                                      |                                                                                           |                           |                |
| Activity: Please provide name of course/ conference, location, and date/s. Please also note if you are pooling funding and name other applicants                                                                                                                                                                                    |                                                                                           |                           |                |
| PD Support funding being requested:<br><br>Note: Funding entitlement is based on a financial year, and on a percentage (determined via FTE) of the employee's base rate of pay.                                                                                                                                                     | <b>Funding category</b>                                                                   | <b>Yes/No</b>             | <b>Amount</b>  |
|                                                                                                                                                                                                                                                                                                                                     | COURSE / CONFERENCE REGISTRATION / ENROLMENT FEES                                         | select                    | \$0.00         |
|                                                                                                                                                                                                                                                                                                                                     | ACCOMMODATION                                                                             | select                    | \$0.00         |
|                                                                                                                                                                                                                                                                                                                                     | TRAVEL                                                                                    | select                    | \$0.00         |
|                                                                                                                                                                                                                                                                                                                                     | OTHER:                                                                                    | select                    | \$0.00         |
|                                                                                                                                                                                                                                                                                                                                     | <b>Total proposed cost</b>                                                                |                           | <b>\$ 0.00</b> |
| Within the current financial year, have you received funding as part of your PD Support entitlement?                                                                                                                                                                                                                                |                                                                                           | select                    | \$0.00         |
| Describe how this activity supports your professional development in your field of practice and/or learning objectives in your Performance and Development Plan.                                                                                                                                                                    |                                                                                           |                           |                |
| Declaration by the Applicant: I confirm I meet all PD Support eligibility requirements for the PD activity outlined in the PD Support Procedure. I will ensure funding is available (via self-funding or other sources) to make up any difference between the total costs of the PD activity and the amount provided by PD Support. |                                                                                           |                           |                |
| Applicant name: Full name                                                                                                                                                                                                                                                                                                           |                                                                                           |                           |                |
| Position title:                                                                                                                                                                                                                                                                                                                     |                                                                                           |                           |                |
| Signature:                                                                                                                                                                                                                                                                                                                          |                                                                                           |                           |                |
| Date:                                                                                                                                                                                                                                                                                                                               |                                                                                           |                           |                |

### PD Support Eligibility (Immediate supervisor to complete)

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|
| Applicant occupies a position with an eligible classification                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | select                           |
| Applicant has a minimum of 12 months of continuous service                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | select                           |
| <b>PD activity is relevant to applicant's field of practice*</b><br><small>* If the immediate supervisor is unable to decide whether the PD activity is relevant to the applicant's field of practice, or to the achievement of objectives listed in their Performance and Development Plan, they should discuss the relevance of the PD activity with a Senior Allied Health Professional employee of the same discipline as the applicant, including outside the immediate work area, team, division or directorate or the Executive Branch Manager. Where organisational structures do not provide for this, independent review may be sought from the Chief Allied Health Officer.</small> | select                           |
| Operational requirements permit the applicant's absence                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | select                           |
| The PD activity is relevant to the applicant's professional development and the achievement of objectives as set out in the applicant's Performance and Development Plan                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | select                           |
| Applicant's mandatory training is up to date or will be at the time the PD activity occurs                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | select                           |
| Applicant may be released from work for the duration of the requested training                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | select                           |
| If required, Senior allied health professional / Delegate's name and advice*:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                  |
| Immediate supervisor name:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Immediate supervisor profession: |
| Signature:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Date:                            |

### Recommendation to Provide PD Support (immediate supervisor to complete)

|                                                                                                                          |                  |                |
|--------------------------------------------------------------------------------------------------------------------------|------------------|----------------|
| <b>PD SUPPORT FUNDING APPROVED</b>                                                                                       |                  |                |
| <b>Funding category</b>                                                                                                  | <b>Approved?</b> | <b>Amount</b>  |
| Registration fees                                                                                                        | select           | \$0.00         |
| Travel                                                                                                                   | select           | \$0.00         |
| Accommodation                                                                                                            | select           | \$0.00         |
| Other (please specify):                                                                                                  | select           | \$0.00         |
| <b>TOTAL</b>                                                                                                             |                  | <b>\$ 0.00</b> |
| Maximum remaining PD Support entitlement available for applicant within the current financial year: Please specify       |                  |                |
| Does total funding approved fall within the maximum available to the applicant within the current financial year? select |                  |                |

Declaration by the immediate supervisor

☐ I certify that the applicant meets all required PD Support eligibility criteria for the PD activity outlined above

OR

☒ I do not support the applicant's request for PD Support for the following reason/s:

Immediate supervisor name:

Position title:

Signature:

Date:

**Delegate Approval\***

Delegate name:

Position title:

Signature:

Date:

\* Where the applicant's Immediate supervisor does not have delegation to approve PD Support, delegate approval must be sought. The HCSD delegation instruments identify which delegates can approve PD Support. If the Immediate supervisor is also the relevant delegate, they must complete the "Recommendation to provide PD Support" AND the "Delegate Approval".

## ATTACHMENT 2: PD Support Calculations

**Note:** Support funding should be calculated per financial year on a percentage of the employee's 'base rate of pay'.

| PD Support Calculations                    |                                     |                                        |                                                                 |                                     |                                        |
|--------------------------------------------|-------------------------------------|----------------------------------------|-----------------------------------------------------------------|-------------------------------------|----------------------------------------|
| Health Professional (HP)<br>Classification | Base rate of pay<br>4.12.25 onwards | 2% Base rate of pay<br>4.12.25 onwards | Child Youth Protection<br>Professional (CYPP)<br>Classification | Base rate of pay<br>4.12.25 onwards | 2% Base rate of pay<br>4.12.25 onwards |
| HP 2.1                                     | \$91,026                            | \$1,820.52                             | CYPP 1.1                                                        | \$83,846                            | \$1,676.92                             |
| HP 2.2                                     | \$95,395                            | \$1,907.90                             | CYPP 1.2                                                        | \$88,608                            | \$1,772.16                             |
| HP 2.3                                     | \$99,808                            | \$1,996.16                             | CYPP 1.3                                                        | \$93,530                            | \$1,870.60                             |
| HP 2.4                                     | \$104,222                           | \$2,084.44                             | CYPP 1.4                                                        | \$103,519                           | \$2,070.38                             |
| HP 2.5                                     | \$108,691                           | \$2,173.82                             | CYPP 2.1                                                        | \$88,608                            | \$1,772.16                             |
| HP 3.1                                     | \$111,639                           | \$2,232.78                             | CYPP 2.2                                                        | \$93,530                            | \$1,870.60                             |
| HP 3.2                                     | \$114,159                           | \$2,283.18                             | CYPP 2.3                                                        | \$103,519                           | \$2,070.38                             |
| HP 3.3                                     | \$117,301                           | \$2,346.02                             | CYPP 2.4                                                        | \$108,812                           | \$2,176.24                             |
| HP 3.4                                     | \$120,057                           | \$2,401.14                             | CYPP 2.5                                                        | \$111,346                           | \$2,226.92                             |
| HP 3.5                                     | \$126,060                           | \$2,521.20                             | CYPP 2.6                                                        | \$117,136                           | \$2,342.72                             |
| HP 4.1                                     | \$127,597                           | \$2,551.94                             | CYPP 3.1                                                        | \$120,160                           | \$2,403.20                             |
| HP 4.1A                                    | \$127,597                           | \$2,551.94                             | CYPP 3.2                                                        | \$122,744                           | \$2,454.88                             |
| HP 4.2                                     | \$132,235                           | \$2,644.70                             | CYPP 3.3                                                        | \$125,963                           | \$2,519.26                             |
| HP 4.2A                                    | \$132,235                           | \$2,644.70                             | CYPP 3.4                                                        | \$129,438                           | \$2,588.76                             |
| HP 4.3                                     | \$136,873                           | \$2,737.46                             | CYPP 3.5                                                        | \$131,611                           | \$2,632.22                             |
| HP 4.4                                     | \$141,511                           | \$2,830.22                             | CYPP 4.1                                                        | \$136,517                           | \$2,730.34                             |
| HP 5.1                                     | \$149,172                           | \$2,983.44                             | CYPP 4.2                                                        | \$146,026                           | \$2,920.52                             |
| HP 5.1E                                    | \$149,172                           | \$2,983.44                             | CYPP 5.1                                                        | \$156,291                           | \$3,125.82                             |
| HP 5.2                                     | \$156,563                           | \$3,131.26                             | CYPP 5.2                                                        | \$163,866                           | \$3,277.32                             |
| HP 5.3                                     | \$167,151                           | \$3,343.02                             | CYPP 5.3                                                        | \$174,720                           | \$3,494.40                             |
| HP 6.1                                     | \$172,246                           | \$3,444.92                             | CYPP 6.1                                                        | \$179,945                           | \$3,598.90                             |
| HP 7.1                                     | \$188,850                           | \$3,777.00                             |                                                                 |                                     |                                        |
| HP 8.1                                     | \$196,156                           | \$3,923.12                             |                                                                 |                                     |                                        |