# PRIOR TO DECLARATION – AGENCY CHECKLIST

The purpose of this form is to assist agencies observe the consultation and notification obligations as outlined in the *South Australian Public Sector Wages Parity Enterprise Agreement: Weekly Paid 2022.*It is intended to be used as a guide on the level of detail required prior to declaration. This checklist can also form a high level summary of the process leading to declaration.

## SECTION 1 – GENERAL INFORMATION

|  |  |
| --- | --- |
| **Agency:** | [Insert Agency Name] |
| **Business unit:** | [Insert Buisness Unit Name] |
| **Employee name:** | [Insert Excess Employee Name] |
| **Government start date:** | Click here to enter a date. |
| **Substantive role:** | [Insert Title] |
| **Substantive classification:** | [Insert Level] |
| **\*\*Substantive remuneration:** | [Insert details] |
| **\*\*Substantive hours of work:** | [Insert details] |
| **MANAGER’S DETAILS** |  |
| **Name:** | [Insert Name] |
| **Title:** | [Insert Title] |
| **Phone:** | [Insert Phone] |
| **Email address:** | [Insert Email Address] |
| **CASE MANAGER’S DETAILS** |  |
| **Name:** | [Insert Name] |
| **Title:** | [Insert Title] |
| **Phone:** | [Insert Phone] |
| **Email Address** | [Insert Email Address] |
|  |  |

\*\* Clause 5.2, Appendix 1 of the Enterprise Agreement states:

“5.2.1 To ensure that no employee is disadvantaged as a result of becoming a redeployee, a redeployment work placement or an ongoing permanent role in an agency in the Public Sector will only be considered suitable (unless the employee otherwise agrees) if the following criteria is met:

a) The hours of work remain the same or similar, which means:

I. the shift pattern and average hours worked over the previous 12-month period prior to becoming a redeployee (averaging will not include periods of paid and unpaid leave); or

II. the employees contracted hours;

Whichever is the greater.

b) The level of remuneration is not less than what the employee was earning prior to becoming a redeployee, including but not limited to penalty rates, shift rates, overtime and allowances.

c) If an employee’s pay fluctuates from fortnight to fortnight, the employee will be paid no less than the average of what they were paid (including penalty rates, shift rates, overtime and allowances) in the 12 months prior to becoming a redeployee (for the purposes of this calculation paid and unpaid leave will be excluded).

d) It is a reasonable distance/location from the employee’s residence to the new place of employment.

e) The classification is not lower than the employee was previously engaged as.

f) The nature of the work is such that it is reasonable to perform, taking into account the employee’s skill and experience.

g) There are no extenuating factors specific to the employee/worksite that would make it unreasonable for the employee to perform the ongoing permanent role.

5.2.2 The above criteria do not limit further discussions and agreements between the employee and their case manager.”

## SECTION 2

***Manager/executive of business unit to complete.***
Evidence of organisational change and alternatives to redeployment. If supporting evidence is too voluminous to attach to this form, refer to 4.4 of this form).

|  |
| --- |
| **2.1** What is the organisational change affecting the employee? |
| [Insert details here or attach supporting documentation] |
| **2.2** Access to a computer and internet confirmed? |
| [Insert details here or attach supporting documentation] |
| **2.3** What alternatives to formally declaring the employee excess have been considered, including any details of suitable alternative employment within the agency that is available or likely to become available within a reasonable time has been considered for the employee? |
| [Insert details here or attach supporting documentation] |
| **2.4** Is the organisational change a result of a decision to privatise, outsource, contract out or the closure/part closure of a service/s?  | [ ]  Yes | [ ]  No |
| [Insert details here or attach supporting documentation] |
| Note: Clause 4.4, Appendix 1 of the Enterprise Agreement requires that the notification to the employee will include *“The reason for the determination, including whether it was the result of the agency’s decision to privatise, outsource, contract out or the closure/pert closure of a service(s).”* |

## SECTION 3

***Human resources to complete.***
Evidence of consultation process. If supporting evidence is too voluminous to attach to this form, refer to 4.4 of this form).

|  |  |  |
| --- | --- | --- |
| **3.1** Has the agency undertaken a written consultation process with the employee as per Clause 3 of Appendix 1 of the Enterprise Agreement?  | [ ]  Yes | [ ]  No |
| [Insert details here or attach supporting documentation] |
| **3.2** Has the agency undertaken a written consultation process with the applicable union(s) as per Clause 3 of Appendix 1 of the Enterprise Agreement? | [ ]  Yes | [ ]  No |
| [Insert details here or attach supporting documentation] |
| **3.3** Has the agency called for Expressions of Interest for a Voluntary Separation Package in accordance with Clause 3.2.3 of Appendix 1 of the Enterprise Agreement?  | [ ]  Yes | [ ]  No |
| [Insert details here or attach supporting documentation] |
| **3.4** Has the agency identified the number of excess employees and notified employees and their representatives in accordance with Clauses 4.1 and 4.2 of Appendix 1 of the Enterprise Agreement? | [ ]  Yes | [ ]  No |
| [Insert details here or attach supporting documentation] |

## SECTION 4

***Manager, executive and human resources director sign off.***

|  |  |  |
| --- | --- | --- |
| **4.1** [Insert Name] is a bona fide excess employee  | [ ]  Yes | [ ]  No |
| **4.2** [Insert Name] has participated in a documented performance and management development discussion and the date of this discussion occurred on Click here to enter a date. |
| [Insert details here or attach supporting documentation] |
| *Note: The Premier’s Direction issued under Section 10 of the Public Sector Act 2009 is available on the Office of the Commissioner for Public Sector Employment website* |
| **4.3** If [Insert Name] is declared, are there any issues preventing active participation in the redeployment process (e.g. parental leave, workers compensation, unresolved performance issues)? | [ ]  Yes | [ ]  No |
| **4.4** If supporting documentation is not attached, relevant evidence is retained in agency file(s) |
| [Insert details here of location of file(s) and records management system file reference] |
| [Insert Manager Name] | [Insert HR Director Name] |
| [Insert Title] | [Insert Title] |
| Signature: |  | Signature: |  |
| Date: | Click here to enter a date. | Date: | Click here to enter a date. |

## SECTION 5

***Chief executive, agency head or delegate approval.***

|  |
| --- |
| [ ]  Approved |
| [ ]  Not Approved |
| [Comments] |
| [Insert Name] |  |
| [Insert Title] |  |
| Signature: |  |  |
| Date: | Click here to enter a date. |  |