

SAFETY, RESPECT AND DIGNITY FOR ALL

LA SÉGURITÉ, LA DIGNITÉ ET LE RESPECT POUR TOUS

# Audit of Staffing Activities

Internal Audit

378-1-266

September 23, 2011







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#### **EXECUTIVE SUMMARY**

#### **BACKGROUND**

The Audit of Staffing Activities has been conducted as part of Correctional Service of Canada's (CSC) Internal Audit Branch 2009-2012 updated Risk-Based Audit Plan. It is linked to a number of important CSC initiatives such as CSC's Transformation Agenda, and takes into consideration the staffing implications of legislative changes including the new *Truth in Sentencing* Act and other crime legislation. As well, the Public Service Renewal Initiative is a consideration for this audit.

Further requirements for CSC come from the *Public Service Employment Act (PSEA)*. The *PSEA* states that the Public Service Commission (PSC) may authorize a deputy head to exercise or perform, in relation to his or her organization, any of the powers (with a few exceptions) and functions of the Commission under the *PSEA*. The Commission may also revise or rescind an authorization granted. To ensure compliance with the sub-delegation instrument, as well as with the *PSEA*, and any other statutory requirements and policies as they pertain to the integrity of appointments, the core appointment values and the guiding values, the instrument states that:

Deputy heads, who have the authority to exercise the delegated power, must actively monitor, through internal audits and other review measures, the application of the delegated authorities

This audit fulfills the *PSEA* requirement to audit as well as requests from senior management and the Audit Committee to address an area identified as one of risk to CSC.

The audit objectives were to:

- Provide reasonable assurance that CSC has a management framework in place to support its staffing activities;
- Assess the extent to which appointments and appointment processes comply with the instruments of delegation signed with the PSC;
- Assess the extent to which appointments and appointment processes comply with the PSEA, PSC's Appointment Framework and other governing authorities and policies; and
- Assess the extent to which CSC is prepared to meet its HR strategic obligations in relation to staffing.

The audit was national in scope and included the processes, practices and information systems in place to support compliance with relevant CSC and PSC staffing policies. The audit included visits to NHQ and all five regions. This audit engagement covered a

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<sup>&</sup>lt;sup>1</sup> Public Service Employment Act, Section 15.(1), 15.(2) & 15.(3)



sample of files from the External Advertised, Internal Advertised, External Non-advertised and Internal Non-advertised appointments for the period between September 1<sup>st</sup>, 2009 and August 31<sup>st</sup>, 2010.

The audit team relied on PSC tools and methodology, as well as its own tools, to meet the four objectives of the audit.

Recommendations have been made in the report to address these areas for improvement. Management has reviewed and agrees with the findings contained in this report and a Management Action Plan has been developed to address the recommendations (see **Annex E**).

#### CONCLUSION

In relation to the first three objectives, the audit team found that policy and procedures are in place as required by the *PSEA* and *PSC* Appointment Framework and other governing authorities and policies. Based on this legislation and on public service values, it is imperative that all staffing action processes respect the core values of merit and non-partisanship and the guiding values of fairness, access, transparency and representativeness. It is also imperative that the documentation on file reflects adherence to these values.

That stated, opportunities for improvement exist for the following areas:

- the role the HR advisor in the staffing process should be better documented in files and then monitored.
- documentation practices in the staffing files should be further strengthened;
- monitoring and reporting practices at a transactional level, as they related to individual appointment files, could be further improved; and

In relation to CSC's state of readiness to meet its human resources (HR) strategic obligations, we found that plans are in place and monitoring practices are underway, but the hiring of appropriate numbers of staff so that CSC can manage its growing offender population is proving to be challenging.



#### STATEMENT OF ASSURANCE

This audit engagement was conducted with an audit level of assurance.

In my professional judgment as Acting Chief Audit Executive, sufficient and appropriate audit procedures have been conducted and evidence gathered to support the accuracy of the opinion provided and contained in this report. The findings and conclusions are based on a comparison of the conditions, as they existed at the time, against pre-established audit criteria that were shared with management. The findings apply only to the area examined.

	Date:	
Sylvie Soucy, CIA		



#### 1.0 INTRODUCTION

#### **OVERALL PERSPECTIVE**

The following section outlines initiatives and actions underway at Correctional Service Canada (CSC) and within the federal government that have a direct impact on staffing activities and were considered in the course of this audit.

Key terminology used throughout this report is defined in *Annex A*.

#### STAFFING IN THE GOVERNMENT OF CANADA

#### PUBLIC SERVICE STAFFING DELEGATION

The *Public Service Employment Act (PSEA)* provides the PSC with the authority to establish policy on the manner of making and revoking appointments and taking corrective action. The PSC has developed a broad appointment policy that is binding for deputy heads in exercising their authorities under the legislation. The Staffing Management Accountability Framework (SMAF) and the Departmental Staffing Accountability Report (DSAR), together with other PSC oversight mechanisms such as monitoring and audit, are used to determine whether deputy heads are exercising their authorities in conformity with legislative requirements, the PSC's appointment policies and the appointment values of the *PSEA*.<sup>2</sup>

The PSC provides guidance to delegated public service organizations that are required to implement and report on the SMAF. The PSC also provides feedback to organizations so they can take action to improve their staffing systems and, ultimately, protect the integrity of the appointment system.<sup>3</sup>

Deputy heads are expected to put in place their own management frameworks, including elements of the SMAF, and to monitor and adjust their organizational staffing performance to meet their staffing objectives. They are to manage risk factors to ensure good management and compliance with the PSC's policy and delegation requirements, the appointment values and other statutes.<sup>4</sup>

By accepting the delegated authorities, deputy heads commit to contributing to the achievement of an inclusive public service that is based on merit and non-partisanship; that reflects the diversity and the linguistic duality of the Canadian population; and that is representative of the people it serves and whose members are drawn from across the country.<sup>5</sup>

<sup>&</sup>lt;sup>2</sup> PSC website/ Appointment Delegation and Accountability Instrument

<sup>&</sup>lt;sup>3</sup> Ibid

<sup>&</sup>lt;sup>4</sup> Ibid

<sup>&</sup>lt;sup>5</sup> Ibid

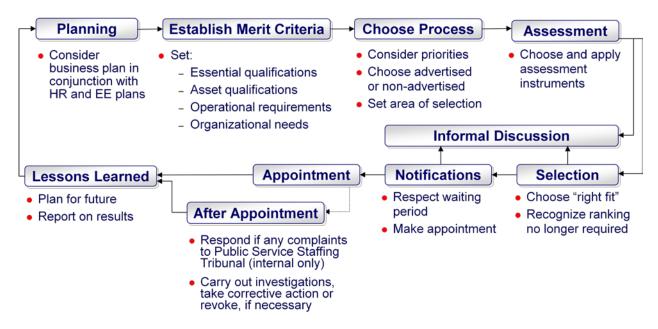


#### **Public Service Renewal**

The 2010-2011 Public Service Renewal Action Plan is a government wide document that lays out the actions required to ensure the federal public service is ready to renew its work force as Canadian demographics change. The latest plan builds on renewal progress to date. It also has a new emphasis: the need to foster efficient, collaborative and innovative workplaces.<sup>6</sup>

The process to staff a position should follow a similar process no matter what position is being filled across the federal government.

#### **Steps in the Staffing Process - General Decision Points**



The above table indicates the general decision points in the staffing process as laid out by the PSC: Strategic Context - CSC Priorities

As identified in the 2010-2011 Report on Plans and Priorities (RPP), CSC has five corporate priorities. These priorities, intended to guide CSC in the management of the changing offender population profile while enhancing CSC's contribution to public safety, supporting the implementation of CSC's mandate and Transformation Agenda, are:

- Safe transition of eligible offenders into the community;
- Safety and security of staff and offenders in our institutions;
- Enhanced capacities to provide effective interventions for First Nations, Métis and Inuit offenders;
- Improved capacities to address mental health needs of offenders; and
- Strengthening management practices.

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<sup>&</sup>lt;sup>6</sup> 2010-11 Public Service Renewal Action Plan <a href="http://www.pco-bcp.gc.ca">http://www.pco-bcp.gc.ca</a>



In order to meet these priorities, CSC must have the resources in place, including staff, as well as the ability to support the human resources requirements of CSC staff. The appropriate and timely placement of staff to meet CSC goals is a key element in the Transformation Agenda, the Infrastructure Renewal Initiative, Public Service Renewal and new legislation pertaining to crime, discussed below.

#### **The Transformation Agenda**

In February 2008, CSC launched a Transformation Agenda with the goal of enhancing public safety for Canadians. CSC is now focusing on integrating the various transformation initiatives into its daily business, in order to be able to support CSC's priorities as listed above. For example, CSC's Strategic Plan for Human Resource Management is linked directly to the business priorities, the Corporate Risk Profile and is mapped against the Transformation Agenda initiatives as well as to the agenda for change under Public Service Renewal and supports the entire organization.<sup>7</sup>

#### Infrastructure Renewal Initiative

An Infrastructure Renewal Steering Committee was formed in March 2010. The mandate of this Committee is to monitor and provide advice to CSC's Executive Committee, EXCOM on the effective implementation of measures in response to legislation, trends and best practices. Accordingly, staffing is included in this committee's mandate and the HR function must position itself to respond to this initiative.

#### **Corporate Risk Profile**

The Corporate Risk Profile (CRP) is a key planning document for CSC and for internal audit, forming the basis for its risk based audit plan; staffing is included in the CRP and in the risk based audit plan.

Germane to this audit is Corporate Risk 10: *CSC will not be able to continue to recruit, develop and retain an effective and representative workforce.* Other sources of staffing risk contained in the CRP were recruitment (integrated HR Planning capacity, challenges in Employment Equity representation for certain classifications and the need for updated assessment and selection tools to meet the organization's future business needs) and HR Service Delivery (HR service delivery and its ability to meet the needs of the new and upcoming legislative changes.)

There were two further risks identified in relation to recruitment, that being: the existing gaps which already exist in certain occupational groups (including nurses, social workers, and psychologists) and the aging workforce.

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<sup>&</sup>lt;sup>7</sup> CSC Strategic Plan for Human Resource Management 2009-10 to 2011-2012



#### **New Crime Legislation**

There have been several pieces of legislation introduced recently that will have impact on CSC services. They include C2 *Tackling Violent Crime Act*, C39 - *An Act to Amend the Corrections and Conditional Release Act* and C25 - *Truth in Sentencing Act*. The latter is already having significant implications for CSC staffing.

#### Truth in Sentencing Act (Bill C-25)

Introduced in the House of Commons on March 27, 2009, Bill C-25 – *Truth in Sentencing Act* – received Royal Assent on October 22, 2009. The major impact of this bill is an increase in the number of inmates in federal institutions across Canada. It is expected that the inmate population will rise by over 3,700 within the next 5 years. This has large implications for CSC, and in particular for the institutional staff, who are directly involved in the care and control of the incarcerated offender group. This includes correctional officers, parole officers, nursing staff and others. CSC needs to ensure that these positions are appropriately staffed in time to respond to the anticipated increase in offenders.

The anticipated influx of new offenders and the consequential requirement for CSC resources to support the increase has implications for staffing processes and its supporting staff, as a significant number of HR staff will need to be hired to accommodate this anticipated demand. This challenge, compounded by the fact that CSC already has a shortage of staff in some areas and also expects a certain number of its staff to retire in the next few years will burden the staffing system with filling both new and vacant positions.

#### STAFFING IN CSC

#### **CSC Staffing**

CSC is a large decentralized organization that manages 57 institutions, 16 Community Correctional Centers, and 84 Parole Offices and sub-offices across the country. As of November 2009, CSC had a workforce of approximately 17,400 employees, of whom 84% work in institutions and communities<sup>8</sup>.

Within CSC, two occupational groups represent over half of all staff employed in operational units. The Correctional Officer group comprises 39% of staff, while another 16% of staff are in the Welfare Programs category, and includes parole and program officers who work in the institutions and in the community.<sup>9</sup>

National Headquarters (NHQ) performs overall planning, policy development, monitoring and reporting for its human resource (HR) management activities. At the

<sup>&</sup>lt;sup>8</sup> CSC Report on Plans and Priorities-FY 2010-2011

<sup>9</sup> Ibid



regional level, most human resource management operations are centralized at the regional headquarters, with the Prairie region being the only decentralized HR operation within CSC.

Staffing in CSC is carried out under the authority delegated to the Commissioner by the PSC, as provided for in Section 15. (1) of the *PSEA*, and the authorized sub-delegation by the Commissioner to subordinate managers as provided for in Section 24. (1). 10

The "Instrument of Delegation of Authorities in the Area of Human Resource Management", dated September 21<sup>st</sup>, 2009, delegates staffing responsibilities to management levels 1 through 7. These levels indicate increasing levels of responsibility in the hiring process.

The current Audit of Staffing Activities is being conducted as part of CSC's Internal Audit Branch (IAB) 2009-2012 Risk-based Audit Plan<sup>11</sup>. Its purpose is to provide senior management with assurance on CSC's ability to meet its responsibilities with regard to the sub-delegation authority.

Thus, this audit fulfills the *PSEA* requirement to audit as well as requests from senior management and the Audit Committee to address an area identified as one of risk to CSC. Further, the audit is responsive to a new area of risk arising from the *Truth in Sentencing Act*.

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<sup>&</sup>lt;sup>10</sup> Public Service Employment Act (2005)

<sup>&</sup>lt;sup>11</sup> CSC Risk-based Internal Audit Plan-FY 2010-2012



#### 2.0 AUDIT OBJECTIVES AND SCOPE

#### 2.1 Audit Objectives

The audit objectives were to:

- Provide reasonable assurance that CSC has a management framework in place to support its staffing activities;
- Assess the extent to which appointments and appointment processes comply with the instruments of delegation signed with the PSC;
- Assess the extent to which appointments and appointment processes comply with the PSEA, PSC's Appointment Framework and other governing authorities and policies; and
- Assess the extent to which CSC will be prepared to meet its HR strategic obligations in relation to staffing.

Specific criteria related to each of the objectives are included in *Annex B*.

#### 2.2 Audit Scope

The audit was national in scope and included the processes, practices and information systems in place to support compliance with relevant CSC and PSC staffing policies. Further, the audit focused on those controls that ensure that recruitment, hiring and promotion are conducted in a manner that is fair and objective; as well as the mechanisms and mitigation strategies being developed and put in place in response to the staffing challenges facing CSC now and in the future.



#### 3.0 AUDIT APPROACH AND METHODOLOGY

In conducting this audit, the audit team relied on PSC tools and methodology, as well as its own tools, to meet the four objectives of the audit. The audit was national in scope and included file reviews and interviews at National Headquarters (NHQ) and in all five regions. To ensure sufficiency of knowledge, skills and competencies needed to perform this engagement, an HR specialist with substantial experience in conducting PSC staffing audits was added to the team complement.

Following a similar approach used by the PSC to perform its own audits and supported by the knowledge and experience of the audit team, audit evidence was gathered through a number of techniques:

**Interviews:** A total of 47 interviews were conducted with Corporate Staffing (NHQ), regional staff in all five regions and institutional (Prairies) staffing employees with Regional Administrators of Human Resources, Staffing Chiefs, Staffing Advisors, Assistant Deputy Commissioner, Corporate Services and Regional Deputy Commissioners. A list of interviewees is found in **Annex D**.

**Review of documentation**: Relevant documentation such as legislation, policies, bulletins, process documentation, procedure manuals and training materials were reviewed. A list of documentation is found in **Annex C**.

**Testing:** Led by a PSC-experienced consultant, a sample of files was pulled from the population of staffing actions to cover External Advertised, Internal Advertised, External Non-advertised and Internal Non-advertised appointments. A description of each of these types of staffing actions is found in *Annex C*. The audit selected actions from the period from September <sup>1st</sup>, 2009 to August 31<sup>st</sup>, 2010. This included at least one file reviewed by the Public Service Staffing Tribunal.

#### Sample Size

In consultation with the PSC, a random sample of 80 files was selected and was analyzed to ensure that the sample included an equal number of files from internal advertised, internal non-advertised, external advertised and external non-advertised staffing processes and met PSC's own audit requirements.

During examination, we combined internal and external processes. Within each of the samples examined, the staffing actions may have had a large variety of individual files depending on the process and the number of candidates. During the audit examination phase, the audit team elected to amend the sample. This did not reduce the validity of the sample in any way as these were replaced with a more varied set of processes. The team removed three staffing files because they were identical (CX selection processes) to two other large processes already in the sample population. As well, the



team added two new processes to the internal advertised sample to bring the sample numbers up.

Further, within each sample, there were circumstances where the audit criteria did not apply to all cases. As a result, the number of total samples against which findings are compared varies as some criteria are only applicable to specific staffing situations. Hence, numbers reported do not always add up to the total population examined in the various areas of examination.

The audit considered the following elements of the Staffing Management Accountability Framework (SMAF) as a guideline in the establishment of the audit criteria. The SMAF elements of importance to this audit were:

**Planning:** There must be a clear indication of the particular staffing activity in the plan or a rationale which ties the staffing activity to the objectives of the organization. These include local/branch/directorate staffing strategies.

**Control:** There is internal monitoring within the organization carrying out minimum monitoring requirements, including evidence of identification of staffing trends.

**Policy:** Policies in place are consistent with legislation and PSC policies.

**Governance:** A clear governance structure must exist and sub-delegated managers must have access to a validated HR Advisor. Managers should provide feedback to determine the type and level of service and support received from HR Advisors.

**Communication:** Staffing files should adhere to policies in terms of job notices and notification

**Compliance:** Appointments are made by delegated managers, including ascertaining that Official Language Exclusion Approval method is respected.



#### 4.0 AUDIT FINDINGS AND RECOMMENDATIONS

#### 4.1 Management Framework for Staffing Activities

We assessed the extent to which CSC had an appropriate management framework in place to manage its appointment activities. This included a review of policies and procedures, roles and responsibilities, training and awareness, human resources planning and monitoring.

As mentioned earlier, the audit team used the PSC audit program and tools, augmented to include examination of the CSC's processes established to deal with impending potential increases in staffing actions due to the impacts of changes in crime legislation.

#### 4.1.1 Policies and Procedures

We expected to find that CSC policies and procedures were established, documented and consistent with the *PSEA* and the *PSC* Appointment Framework. Further we expected to find that these policies were communicated and maintained.

## CSC has established documented policies consistent with the PSEA and the PSC Appointment Framework. Further, they were maintained and communicated.

We found that CSC has formal, written and approved appointment related policy bulletins in place that meet or exceed PSC requirements. We also found that these policy bulletins are accessible to all staff on the Human Resources Services Portal on the departmental intranet site. Communication of the policies and bulletins is evident in the form of general communications to all staff (via GEN-COMM) and regular updates on the HR Services Portal. These policies and bulletins are updated as and when required.

#### 4.1.2 Roles and Responsibilities

We expected to find that roles, responsibilities and accountabilities for appointment related authorities are documented, communicated and maintained. We also expected that sub-delegated managers and HR advisors are informed of their roles and responsibilities.

## Roles, responsibilities and accountabilities were documented, maintained and communicated via CSC's Human Resources Services Portal.

Roles, responsibilities and accountabilities for appointment related authorities are documented in the *Instrument of Delegation of Authority* in the area of human resource management which can be found on the HR Services Portal. In addition, roles, responsibilities and accountabilities are communicated regularly to management, HR professionals and employees through a variety of venues including GEN-COM (email), regular senior management and staffing community meetings. The sub-delegation



instrument clearly defines the roles and responsibilities for staffing and the way in which the delegated authorities are to be exercised. We found that there were processes in place to ensure that all stakeholders (including sub-delegated hiring managers, and HR advisors) were informed of their roles and responsibilities through training and on-going communication. We also found that roles and responsibilities of sub-delegated managers were clearly defined and mandatory training was provided to these individuals to assist them in understanding their roles. Further, sub-delegated staffing responsibility is often only granted at high levels of responsibility; for example, within an institution it is only the warden who is given this authority. Sub-delegation is attached to a position and not to an individual.

HR advisors have a key role in the staffing process. According to the PSC, they are responsible for providing expert and strategic advice to client managers on appointment and appointment related decisions as well as to provide a challenge role with regard to potential staffing outcomes. Of the 19 sub-delegated managers interviewed, 100% confirmed that HR advisors were able to provide expert advice and provide the appropriate challenge function when required.

We found however, there was no clear mechanism in place to document circumstances where HR advisors had provided a challenge function to sub-delegated managers or when a Chief of Staffing had provided a file review. This activity was not documented consistently in individual appointment process files and consequently, the auditors could not substantiate it.

#### 4.1.3 Training and Awareness

We expected to find that sub-delegated managers and HR advisors have the necessary knowledge and skills to carry out their appointment-related responsibilities.

Sub-delegated managers and HR Advisors had knowledge and skills acquired through a combination of training, availability of subject matter experts and information provided on the Human Resources Services Portal.

Sub-delegated managers are provided with mandatory CSC specific staffing training through a course entitled, *Staffing for Managers*, based on the Canada School of Public Service staffing course *P801-Staffing for Staffing Specialists*, before they sign their staffing sub-delegation agreement and are granted their sub-delegation authority. See Section 4.2.1 Sub-delegation instrument for further details.

HR advisors who work in National Headquarters and in the regions, have taken mandatory training following the introduction of the *PSEA* in 2005 with the accompanying PSC Knowledge Test. Additional information and guidelines are also provided on the HR Services Portal.



#### 4.1.4 Planning

We expected to find that Human Resource planning is integrated and identifies future human resource requirements. We also expected to find that staffing strategies address identified staffing risks and are consistent with the HR plan.

At a CSC corporate-wide level, the Service had a regularly updated integrated HR plan in place. This plan, with input from all regions, identified requirements, addressed risks and included staffing strategies to mitigate these risks.

We found that CSC has a regularly updated integrated Strategic Human Resource Plan in place, approved by the Commissioner, with identified human resource requirements. Further, each region also has its own integrated plan identifying future resource requirements and staffing strategies to address risks, present and future. These staffing strategies describe staffing actions that the organization plans to take in order to implement the staffing directions of senior management, as stated in the Strategic HR plan.

We also found that the staffing strategies linked to the CSC Integrated Strategic HR Plan have been established to mitigate identified risks, and established performance indicators, such as those found in the Departmental Accountability Staffing Report (DSAR). These allow CSC to demonstrate through results, the achievement of its HR staffing objectives.

#### 4.1.5 Monitoring

As set out in the PSC delegation instrument, the Deputy Head is required to monitor actual performance and appointment process results against the *PSEA*, PSC mandatory appointment policies and the HR plan.

CSC's Commissioner had a system in place that monitors appointments to ensure that they respected the requirements of the PSEA and other governing authorities, policies and instruments of delegation signed with PSC.

We found that CSC demonstrates to PSC that its staffing system meets the mandatory indicators identified in the Staffing Management Accountability Framework (SMAF). CSC Corporate Staffing completes the annual requirement of reporting to PSC by way of the DSAR.

CSC has mechanisms in place to ensure that appointments and appointment processes are monitored and that appropriate action is taken when deficiencies are identified. We also expected CSC to have mechanisms in place to ensure that appointment files contain sufficient and appropriate documentation to support selection and appointment decisions. Section 4.3 addresses this issue in detail.



In addition to its annual DSAR reporting exercise, CSC has established a self monitoring framework in order to monitor a number of its higher-risk appointment activities, including term to indeterminate position processes, and long-term acting appointments. This regular review of staffing patterns constitutes a good practice which may proactively identify weaknesses in appointment activities and help the department to implement appropriate corrective actions. The responsibility for monitoring resides with Corporate Staffing at NHQ and variances between actual and planned results are documented and discussed with senior management. Please see Section 4.2.3 Compliance/Monitoring for further details.

Further, CSC has a departmental strategy in place to review individual appointment processes in response to specific complaints on a file by file basis, and when necessary, mechanisms in place to ensure that corrective measures are carried out.

#### CONCLUSION:

Overall, we found that CSC had a governance structure in place that respected the PSC legislative requirements.

Further, CSC had mechanisms in place to ensure that appointments and appointment processes were monitored and that appropriate action would be taken should deficiencies be identified.

A lack of means to confirm the advisory and challenge roles of HR advisors was identified.

#### **Recommendation 1**

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The Assistant Commissioner, Human Resource Management should ensure that:

• HR Advisors are held accountable for their respective responsibilities in the staffing actions and that there are means to demonstrate that these roles are being fulfilled.

## 4.2 Compliance of Appointments and Appointment processes with the Appointment Delegation and Accountability Instrument

We assessed the extent to which CSC appointments and appointment processes comply and respect the *Appointment Delegation and Accountability Instrument* signed with PSC. This review of the entity sub-delegation instrument and delegated authorities, included; Individual Staffing Sub-delegation Agreements, the processes in place for continuous learning and change management, and reporting requirements.

<sup>&</sup>lt;sup>12</sup> Recommendation requires management's attention, oversight and monitoring.



#### 4.2.1 Sub-Delegation Instrument

We expected to find that sub-delegation of appointment authorities to be granted only to officials trained to exercise appointment authorities.

Sub-delegation of appointment authorities were granted to officials trained to exercise appointment authorities.

Interview evidence found that sub-delegated managers receive and must sign a Staffing Sub-delegation Agreement; this Staffing Sub-delegation Agreement cannot be entered into until after the required training has been completed. Section 4.1.3 Training and Awareness has more detail. Further, an engagement conducted in 2009-10 by CSC Internal Audit on internal controls indicated that CSC HR staff verify the legitimacy of the sub-delegation signature for each staffing action.

The sub-delegated agreement outlines accountabilities, including:

- respecting the core values (merit, non-partisanship) and guiding values (fairness, access, transparency and representativeness);
- ensuring that all appointment decisions adhere to the *Public Service Employment Act (PSEA)*, the Public Service Employment Regulations (PSER)
   and any other statutory instruments (such as exclusion approval orders, the
   Employment Equity Act, the Official Languages Act the Privacy Act etc); and
- adherence to the PSC and CSC appointment policies.

The instrument also includes a paragraph to the effect that should there be an abuse of sub-delegated authority, the Commissioner will take remedial measures. We did find a number of instances where the merit and non-partisanship were not clearly demonstrated in staffing files. These files have been transferred to HR to determine if remedial measures are required by the Commissioner.

#### **4.2.2 Change Management**

We expected to find that delegated authorities are effectively managed in accordance with the PSC appointment framework including continuous learning and change. Further, we expected to find that CSC takes corrective actions and makes improvements on a timely basis.

A sub-delegation instrument existed and it was in line with PSC policy and the PSEA. Delegated authorities were effectively managed, mandatory training provided and all changes and updates communicated via email and information provided on Human Resources Services Portal.

As detailed above in Section 4.2.1- Sub-delegation Instrument, we found that CSC has an official written sub-delegation instrument and that its sub-delegation authorities are in



accordance with the *Appointment Delegation and Accountability Instrument*. The sub-delegation instrument clearly defines the roles and responsibilities for staffing and the way in which the delegated authorities are to be exercised. In addition to sub-delegated managers' mandatory training, the managers also receive systematic and ongoing learning on staffing through a variety of means, including access to information and staffing tools on the HR Services Portal intranet site. Regular updates are provided electronically to all individuals.

Changes arising from corrective measures are communicated via an email (GEN-COMM) and subsequent changes to policy are updated on the Human Resources Portal.

#### 4.2.3 Compliance/Monitoring

Based on legislative requirements, we expected to find that the deputy head monitors appointments, actual performance and appointment process results against the *PSEA*, PSC mandatory appointment policies and the HR plan.

#### CSC established a mechanism to ensure appointments are monitored.

CSC has established strategies to review individual appointment processes to ensure compliance with the *PSEA*, PSC appointment policies and CSC departmental policies. In addition, CSC has developed and recently updated a national checklist that is consistent with the PSC's requirements and is included and completed in every appointment process file.

If corrective measures were required from staffing processes, they were tracked to ensure they were completed in a timely manner and lessons learned discussed with senior management.

In addition, this current audit is one means by which the Commissioner meets the Instrument's monitoring and auditing requirements.

#### CONCLUSION:

Overall, we found that appointments and appointment processes comply with the *Appointment Delegation and Accountability Instrument*. Policies and procedures, compliant with *PSEA* requirements are in place, roles and responsibilities are established, training is carried out and planning and monitoring mechanisms are in place to meet these obligations.



## 4.3 Compliance of Appointments and Appointment processes with the PSEA, PSC's Appointment Framework, and other governing authorities and policies.

CSC appointments and appointment processes must respect the *PSEA*'s core values of merit and non-partisanship, the guiding values of fairness, access, transparency and representativeness, other *PSEA* requirements, the PSC Appointment Framework and any other governing authorities. As well, CSC appointment files must contain sufficient and appropriate documentation to support selection and appointment decisions. Appointment files are official records of selection and appointment decisions. They are to provide a reliable record of the staffing activities that led to an appointment and contain evidence that the appointment values were respected throughout the process.

#### 4.3.1. Public Service Values

We expected to find that appointments respect the core values of merit and non-partisanship and the guiding values of fairness, access, transparency and representativeness.

## CSC's respect of appointment values was not always clearly demonstrated on staffing files.

The core values of merit and non-partisanship remain the cornerstones of appointments to and within the public service. However, the process of selecting and appointing a person must also respect the guiding values of fairness, access, transparency and representativeness. Appointment files must contain evidence that these values were respected throughout the appointment process.

Further, the PSC Appointment Policy (Choice of Appointment Process) states that non-advertised appointments must be accompanied by a written rationale demonstrating how the process has met the established organizational criteria and the guiding values. CSC's policy bulletin, Criteria for Non-Advertised Appointment Processes (#2007-23) re-iterates this requirement.

Due to missing documentation in many of the files audited, it was impossible to confirm that the public service values had been respected and upheld. However, this finding must be tempered with the fact that the audit team did not find evidence to suggest merit was not met, with the exception of two files from the non-advertised process sample and one from the advertised processes, with one additional file from the non-advertised process file requiring further investigation. These files have been brought to the attention of HR for action.

#### Rationale Found on File to Support Public Service Values

We examined several areas within staffing actions to provide evidence that documentation was in place to confirm respect of the public service values.



First, we found that for 73% (29 of 40) of the non-advertised appointments the written rationales did not contain sufficient information to demonstrate how the non-advertised appointment respected or impacted the guiding values. One file did not contain any written rationale. In most instances, the focus of the rationale was placed on the operational requirements of the position or the qualifications of the appointment to the exclusion of the values.

We found that in 69% (24 of 35) of the advertised processes, documentation was in place to indicate that screening was administered in consideration of public service values where applicable. Furthermore, the assessment was administered in consideration of public service values for 66% (23 of 35) of the advertised files.

Third, in 59% (19 of the 32) of the applicable files for advertised appointment processes, it was clear that right fit selection was based on the Statement of Merit Criteria (SOMC). However, we found that 9% (3 of 32) of the files did not meet the public service values based on right fit criteria. We were unable to conclude on 31% (10 of the 32) advertised appointments, as there was insufficient or missing documentation in this area.

Finally, we found that with regard to documentation on staffing files, 70% (28 of 40) of the files for non-advertised appointments and 84% (31 of 37) of the files of the advertised appointments, documentation on file was sufficient to understand why certain decisions were taken. Where this was not the case, this could lead to the perception of preferential treatment.

Examples of missing documentation for these actions were:

- Change of the education criteria during the process;
- Email or note on the file indicating that the manager had already chosen the candidate or would like to regularize the incumbent into the position;
- Official language or security requirements adjusted during or after the process in favour of a particular candidate; and
- Candidate with priority status was not considered in the process;

Other examples of potentially questionable processes were:

- A 'staged' evolution of the employee (i.e., transformation of status from casual/contract worker to term or indeterminate);
- Work experience used in asset qualification to screen candidates matched casual candidates' work experience; and
- Adjustment of the passing marks after the fact in one of the assessment tools.

#### **Consideration of Priority Clearance**

Among the provisions of the *PSEA* and the Public Service Employment Regulations are exceptional clauses that provide an entitlement for limited periods for certain persons who meet specific conditions to be appointed in priority to others. As a result, sub-



delegated managers must first consider PSC's priority persons' inventory. A priority clearance number is required before proceeding with an appointment process.

We found that in 85% (23 of 27) of the non-advertised files, priority clearance was obtained prior to or on the date of appointment. In addition, in another 85% (23 of 27), the request for priority clearance used the same elements from the SOMC for the appointment decision. Also, 75% (6 of 8) had evidence that the priority referrals from the PSC were considered. For the advertised files, all of the files obtained a priority clearance prior to or on the date of appointment.

#### **Ascertaining Merit**

According to the *PSEA*, merit is met when the person to be appointed meets all of the essential qualifications and if relevant, any other asset qualifications, operational requirements and organizational needs identified in the SOMC. Therefore, merit not met is defined as the person appointed failing to meet one or more of the essential qualifications or other applicable merit criteria identified in the appointment decision. In addition, merit not demonstrated was referenced when the assessment tools or methods contained on file were inadequate, incomplete or not evident and did not demonstrate that the person appointed met the identified requirements.

## Documentation to ascertain that merit was met or demonstrated was not always on the file as required.

In 75% (30 out of 40) of the non-advertised appointments reviewed, the file assessed all the elements in the SOMC, and the file contained sufficient information in the assessment. Comparatively, for the advertised processes, the number where there was sufficient information was 49% (18 of 37).

With regard to the demonstration of merit, through file documentation, the audit found that merit was clearly demonstrated in 43% (17 out of 40) of the non-advertised appointment and 30% (11 of 37) of the advertised processes reviewed. Of the 77 files audited, 42 or 55% contained proof that the appointee met the essential educational qualification as stated on the SOMC. For the files where this was not the case, the audit indicated that education was met, either through a review of the screening documentation or the applicant's resume, where there was no copy of the diploma or an attestation statement on the file. The PSC requirement for proof of education is not clearly delineated in any guiding documentation and the PSC is working to develop guidelines in this area.

We found that merit was not met in 5% (2 out of 40) non-advertised appointments and 3% (1 of 37) advertised appointments. For those appointments where merit was considered not met, in one of the appointments, the appointee did not meet the education listed as a requirement for the position while in another, the appointee did not meet the language requirement at the time of the appointment. For the third file, the



appointee did not meet any of the listed essential experience requirement. The audit team has advised HR of these issues for their action.

#### 4.3.2 Documentation

We expected to find that appointments and appointment related decisions are fully documented and provide complete and accurate information to support staffing decisions.

#### Appointment files do not always include all required documentation

Appointment files are official records of selection and appointment decisions. They are intended to provide a reliable record of the staffing activities that led to an appointment and contain evidence that the appointment values were respected throughout the process. Documentation is used to give feedback to persons during informal discussions, an investigation or a complaint before the Public Service Staffing Tribunal. Finally, as part of the on-going monitoring process, files provide insight into the manner in which information was used in the appointment process and support the selection decision. As such, clear, complete and comprehensive documentation is required.

Although not specifically identified in legislation, documents required in the files were laid out according to the PSC audit requirements. The following table illustrates the areas where this documentation could be improved.

Please note that even though documentation was not always on file, the audit team did not find evidence of inappropriate or questionable staffing with the exception of five files that have been shared with HR for action.

Documentation	Non Advertised Files	Advertised Files
Proof of education included in appointment file 13	43% (17/40)	68% (25/37)
Documentation supporting conditions of employment	93% (37/40)	89% (33/37)
complete		
Documentation for Assessments complete	75% (30/40)	49% (18/37)
Proper documentation included to support the	75% (6/8)	67% (6/9)
elimination of priority candidates from further		
consideration		
Work description or summary of duties on file	30% (12/40)	74% (27/37)
Human Resources Plan on file	22% (8/37)	N/A
Employment Equity Plan on file	50% (3/6)	N/A
Signed statement of persons present	90% (36/40)	49% (18/37)
SOMC on file	98% (39/40)	100% (37/37)
Candidates' resumes on file	70% (28/40)	N/A <sup>14</sup>

<sup>&</sup>lt;sup>13</sup> As noted earlier in this report, the PSC requirement for proof of education is not clearly delineated in any guiding documentation and the PSC is working to develop guidelines in this area.

<sup>&</sup>lt;sup>14</sup> The audit tool for advertised files did not contain the requirement to verify the resumes.



#### **CONCLUSION:**

The audit team found that overall, the staffing processes respected the policies and procedures set out by the PSC via the legislation.

However, the audit found that a lack of documentation on file could impact CSC's ability to demonstrate merit and could lead to the perception that the appointments were not fair and transparent.

#### **Recommendation 2**

1;

The Assistant Commissioner, Human Resources Management should implement an accountability mechanism to ensure that:

- All documentation required for each staffing process is collected and placed on files;
- A monitoring system is in place that verifies the documentation for completeness and accuracy; and systematic corrective action is taken.

#### 4.4 HR strategic obligations in relation to staffing

This section provides information on the extent to which CSC is prepared to meet its HR strategic obligations in relation to staffing, given the impending increases in staffing requirements.

CSC had mechanisms in place or underway to ensure that it has the capacity to meet its HR strategic obligations in relation to staffing.

The team developed audit tools linked to the Corporate Risk Profile (CRP), specifically Corporate Risk # 10: CSC will not be able to continue to recruit, develop and retain an effective and representative workforce.

We reviewed a number of activities derived from the CRP and the related mitigation strategies aimed at the development of an effective and efficient staffing process. This should contribute to streamlining staffing and provide the mechanisms to facilitate and expedite it while ensuring compliance. These activities were:

- Planning;
- Government-wide initiatives;
- Client focused services;
- Resource indicators;
- Common business processes;

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<sup>&</sup>lt;sup>15</sup> Recommendation requires management's attention, oversight and monitoring.



- Generic SOMCs and work descriptions; and
- Official languages and employment equity

Additional interviews focusing on the planning for the effects of the Truth in Sentencing Act, and resultant offender level increases were conducted in all regions with the respective Regional Deputy Commissioner (RDC), Assistant Deputy Commissioner Corporate Services (ADCCS), and Regional Administrator Human Resources (RAHR). Further, documentation was collected from all regions and NHQ and analyzed.

In order to effectively analyze this information, the audit team looked at the following sources of risk contained in the CRP:

- 1. Recruitment i.e. a need for integrated HR Planning capacity, challenges in Employment Equity representation for certain classifications and the need for assessment and selection tools that are up to date to meet the organization's future business needs; and
- 2. HR Service Delivery i.e. HR service delivery and CSC's ability to meet the needs of the new and upcoming legislative changes.

Two other additional sources of staffing risks are identified in the CRP. The first is the significant gaps that currently exist for certain occupational groups, such as social workers and psychologists. Further, as with the rest of the Public Service, CSC is facing an aging work force that is nearing retirement age, taking with it a wealth of experience. These two factors add to the number of positions that will need to be filled over the next few years to fulfill CSC's obligations.

The audit team did not, for the purposes of this audit, focus on learning and development, as the related sources of risk will be considered during the Audit of Training Activities, included in Internal Audit's 2011-2014 Risk Based Audit Plan. Further, retention issues as they relate to grievances, harassment and discrimination (all of which could have an impact on retention) were also excluded as these are also included in the recently approved updated RBAP as the Audit of Grievances.

#### 4.4.1 Planning

We expected to find that CSC has an integrated HR Strategic Plan which includes staffing risks and strategies to address these risks. Further, we expected that planning tools to determine the number of staff required have been developed and updated regularly.

#### CSC had an integrated HR Strategic Plan which was updated regularly.

We found that all five regions have documented, integrated HR Plans, with varying levels of detail. These incorporate individual institutional plans and operational units. These regional plans refer to current and potential future shortfalls including those associated with Bill C-25 and the staffing strategies to mitigate these risks. This would



include the staffing requirements for operational staff, but also the requirements for HR specialists needed to support the staffing of operational vacancies.

Although plans are in place, regions have indicated they are struggling with the staffing of specific occupational groups and levels. The audit team found through interviews and documentation review that CSC is facing challenges in recruiting and retaining HR specialists (PEs) and a gap has already been identified in the CRP for social workers and psychologists. There are also issues associated with staffing specific occupational groups in some of the more remote parts of the country.

CSC, at a national level, has a regularly updated integrated Strategic Human Resource plan in place, approved by the Commissioner, with identified human resource requirements. Staffing strategies have also been developed to mitigate the identified risks found in the HR plan, and performance indicators have been established to allow CSC to demonstrate, through results, the achievement of its HR staffing objectives.

#### Monitoring tools have been developed, and were updated regularly.

During interviews with senior management, the audit team was informed that regions regularly provide updated information to the Infrastructure Renewal Team (IRT) on the progress of the various staffing initiatives that are currently underway. Forecasting spreadsheets, developed by the IRT, were provided to the regions for this update. Once the update is completed, the information is forwarded to IRT, reviewed and approved by the Steering Committee and provided to the Strategic Planning, Reporting and Systems Directorate at NHQ for analysis. This group then produces two reports:

- 1. Quarterly HR planning tools to provide information on the status of staffing of correctional officers (CX) and parole officers (WP). These tools detail requirements for CX per the deployment standards, and WP requirements per current resource indicators. They also show numbers of current substantives, acting positions, and outgoings (long term leave, paid leave etc). This document also encompasses retirements, terminations and promotions over the past 5 years. All of the above is calculated per region and thereafter summarized at a national level. This document also demonstrates the hiring gap (deficit) already in place going into fiscal year 2011-2012.
- **2.** A C-25, *Truth in Sentencing Act* full time equivalent planning document which encompasses all occupational groups and levels required to meet the *Truth in Sentencing Act* needs, on an individual institutional basis and thereafter summarized at a national level.

An HR Dashboard has also been developed and implemented to assist managers to proactively identify workforce gaps and effective planning. A recent audit conducted by CSC's Internal Audit Branch, entitled HR Data Integrity, examined the HR Dashboard and found it to be generally accurate.



#### 4.4.2 Government-wide HR Initiatives

We expected to find the Commissioner and senior management to be involved in committees and government wide initiatives as they relate to staffing.

## CSC's Commissioner and senior management are involved in government wide committees and initiatives.

The Commissioner and CSC senior management sit on the following committees, initiatives and groups:

- OGS sub-committee (Commissioner);
- PSEA five-year review subcommittee (Commissioner);
- PSMAC (Commissioner);
- PS Staffing Modernization Project (Senior Deputy Commissioner);
- Teleconference of Assistant Deputy Ministers of the PSC Advisory Committee;
- HR Council (Assistant Commissioner, Human Resource Management) (ACHRM);
- Heads of HR Public Safety Portfolio (ACHRM);
- GC HRMS Cluster (ACHRM/Director, HR Strategic Planning, Reporting and Systems (SPRS); and
- GC CHRBP Lead-Implementers (ACHRM/Dir. SPRS).

These activities provide senior managers with opportunities to become aware of best practices and leverage other options available to them to meet HR challenges.

#### 4.4.3 Client Focused Service Standards

We expected to find that HR had developed service standards for its HR functions, in order that managers are provided with timelines for specific staffing processes.

#### HR service standards were developed and regularly updated.

Service standards were developed to build a performance measurement model and support HR objectives, as well as to:

- Promote partnerships between client managers and HR;
- Improve communication between HR and client managers;
- Outline timeframes and guide expectations; and
- Ensure equitable and consistent service and support across all regions.

The service standards identified within documentation collected by the audit team represents the target number of working days to complete identified staffing actions under normal circumstances. The documentation showed that in some instances, the delivery time depended on the complexity of the work, any required participation from external organizations, or other external factors beyond the control of CSC HR.



#### 4.4.4 Resource Indicators and Allocations

We expected to find that work had commenced on developing resource indicators to calculate the number of HR specialists that are required to meet staffing requirements and allocations of funds made based on these indicators.

#### Resource indicators, as they relate to the staffing function were being developed.

The audit team was informed during interviews with HR senior management that resource allocations and indicators for various sections of HR including compensation and staffing are being developed. In addition, preliminary documents have been shared with Internal Audit to demonstrate that work has been initiated. Details on the status of the implementation of allocations remained outstanding at the time of this report.

#### 4.4.5 Common Business Processes

We expected to find that HR had commenced work on developing common business processes as they relate to the staffing function.

## Common business processes, specifically process maps, as they relate to the staffing function have been developed.

The audit team was provided with business process maps for staffing functions, including the following:

- 3 year term conversion;
- Acting 4 months and more;
- Appointment of part-time workers;
- Appointment from fully assessed pool external;
- Appointment from fully assessed pool internal;
- Student bridging:
- Reclassifications
- External and Internal Advertised: and
- External and Internal Non-Advertised.

Business processes should help streamline or expedite processes while ensuring compliance.

#### 4.4.6 Generic Work Descriptions and Generic Statement of Merit Criteria

We expected to find that generic work descriptions and generic statements of merit criteria (SOMC) had been developed and implemented where appropriate.

#### HR had developed generic SOMCs for specific occupational groups.



Generic SOMCs together with generic evaluation tools are intended to streamline the staffing process. Senior management informed the audit team that the process to develop these generic job descriptions has commenced, but experience with other classifications has demonstrated that this is a lengthy process.

The audit team was informed that CSC has been using generic SOMCs for CX1 and WP processes, including evaluation tools provided by NHQ. These processes have been initiated by NHQ Staffing. Given its critical importance, enhanced security screening tools in line with RCMP and Canadian Border Services Agency, hiring tools will also be implemented to strengthen CSC's ability to hire people who are suitable to work on the front line within institutions.

Although CSC has developed some generic SOMC's for key classifications, during interviews, CSC staff expressed reservations about the generic SOMC indicating that there may be specific essential criteria within a region which may be unique to that region or institution or may impose limits on their hiring practices. Despite the challenges faced by staff in the regions, to maximize consistency of staffing practices across the country, CSC will continue to encourage the use of generic SOMCs.

#### 4.4.7 Employment Equity and Official Language Obligations

We expected to find that there was a regularly updated Employment Equity Plan in place. Further, we expected to find that CSC regularly monitors its official language obligations.

#### CSC had a regularly updated Employment Equity Plan in place.

The audit team found that there is a strategic Employment Equity (EE) plan in place. NHQ Corporate staffing ensures tracking by region by various occupational levels and groups to ensure that CSC workforce is representative of the Canadian public. Further, CSC has various committees and groups to ensure equity and diversity, as well as specific staffing processes aimed at EE groups. Further, CSC recently launched the second phase of its Executive Leadership Development program aimed specifically at EE groups (not including women).

#### CSC monitored its official language obligations.

CSC is aware of its official language obligations and monitoring is conducted at NHQ by Corporate Staffing. It should be noted that the ability to staff bilingual positions has been identified as a staffing risk to CSC. It was noted by the audit team, through interviews in the Prairies and Pacific regions, that it is very difficult to find bilingual candidates for certain occupational groups and levels.



#### CONCLUSION:

CSC is working towards meeting its HR strategic obligations in relation to staffing. CSC senior management at NHQ and in the Regions report that they are aware of the issues surrounding the *Truth in Sentencing Act* and other legislative changes. Planning and strategies are constantly being updated (quarterly with regard to CX and WP staff) and implemented to ensure that CSC is prepared to meet its staffing obligations.

However, despite planning and monitoring activities, CSC is facing challenges in meeting its current staffing obligations given site dispersion and regional disparities. Some work groups continue to have difficulty in reaching and maintaining a full complement of staff. The concern is that although CSC is tackling issues head on, planning appropriately, identifying risks monitoring results and implementing strategies to mitigate these risks, there are persistent existing gaps in certain groups.

Efforts have been made at the regional level, through HR Plans to anticipate and accommodate the changes, but they too have yet to provide evidence that the planning has produced required results.

#### **Recommendation 3**

16

The Assistant Commissioner, Human Resource Management should:

 Continue to work with the Regional Deputy Commissioners to further analyse unique regional staffing requirements against the national plan to anticipate regional disparities and requirements.

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<sup>&</sup>lt;sup>16</sup>Recommendation requires management's attention, oversight and monitoring.



#### 5.0 OVERALL CONCLUSION

Overall the audit team found that CSC is in compliance with PSC requirements in regard to the Delegation Authority.

A control should be put in place to ensure that HR Advisors are working with subdelegated managers and evidence of this work should be included in files.

Work needs to be considered to rectify the documentation issues found on individual files and more monitoring should be done to ensure compliance.

In relation to CSC's state of readiness to meet its HR strategic obligations, CSC needs to manage its hiring and retention processes.



#### **DEFINITIONS**

The Public Service Commission provides these definitions in its Audit and data Services section of its website:

http://www.psc-cfp.gc.ca/adt-vrf/rprt/2010/ar-rv/10-overview-apercu/index-eng.htm

**Acting appointment** (Nomination intérimaire) – The temporary appointment of an employee to another position, if the appointment on a term or indeterminate basis would have constituted a promotion.

**Advertised appointment process** (Processus de nomination annoncé) – An appointment process where persons in the area of selection are informed of and can apply to an appointment opportunity.

**Appointment** (Nomination) – An action taken to confer a position or set of duties on a person. Appointments to and within the public service made pursuant to the *Public Service Employment Act* are based on merit and non-partisanship.

**Appointment Delegation and Accountability Instrument (ADAI)** (Instrument de délégation et de responsabilisation en matière de nomination – IDRN) – The formal document by which the Public Service Commission delegates its appointment and appointment-related authorities to deputy heads. It identifies authorities, any conditions related to the delegation and sub-delegation of these authorities and how deputy heads will be held accountable for the exercise of their delegated authorities.

**Appointment Framework Knowledge Test (AFKT)** (Examen de connaissances sur le Cadre de nomination – ECCN) – A test developed by the Public Service Commission (PSC) to assess human resources (HR) specialists' knowledge of the PSC Appointment Framework and the related legislation. A condition of delegation is that deputy heads must ensure that those to whom authority is sub-delegated have access to HR specialists whose knowledge of the Appointment Framework has been validated by the PSC.

**Asset qualifications** (Qualifications constituant un atout) – Qualifications, other than official language requirements, that are not essential to perform the work, but that would benefit the organization or enhance the work to be performed currently or in the future.

**Corrective action** (Mesures correctives) – Action taken to correct an error, omission or improper conduct that affected the selection of the person appointed or proposed for appointment; or action taken to address situations in which an employee has engaged in an inappropriate political activity.



**Departmental Staffing Accountability Report (DSAR)** (Rapport ministériel sur l'obligation de rendre compte en dotation – RMORCD) – A periodic report provided by each organization subject to the *Public Service Employment Act* to the *Public Service Commission* (PSC) concerning the management and results of the organization's staffing; provided in response to questions from the PSC, which are based on the Staffing Management Accountability Framework and the appointment values.

**External appointment process** (Processus de nomination externe) – A process for making one or more appointments in which persons may be considered, whether or not they are employed in the public service.

**Indeterminate (permanent) employment** (Emploi pour une période indéterminée – emploi permanent) – Employment of no fixed duration, whether part-time, full-time or seasonal.

**Merit** (Mérite) – One of the core values of the *Public Service Employment Act*. An appointment is made on the basis of merit when a person to be appointed meets the essential qualifications of the work to be performed, as established by the deputy head, including official language proficiency. Any current or future asset qualifications, operational requirements, and organizational needs as identified by the deputy head may also be considered.

**Merit criteria** (Critères de mérite) – For the purpose of determining merit for appointments made pursuant to the *Public Service Employment Act*, the four types of criteria are essential qualifications, asset qualifications, organizational needs and operational requirements.

**Non-advertised appointment process** (Processus de nomination non annoncé) – An appointment process that does not meet the criteria for an advertised appointment process.

**Non-imperative appointment** (Nomination non impérative) — An indeterminate appointment to a bilingual position that the deputy head has identified as not requiring a person who meets the required level of language proficiency at the time of appointment. Individuals appointed as a result of a non-imperative appointment either meet the language requirements at the time of appointment, agree to attain the required level of language proficiency within two years of the date of appointment or are exempted from meeting the language requirements of the position on medical grounds or as a result of their eligibility for an immediate annuity within two years of appointment.

**Staffing Management Accountability Framework (SMAF)** (Cadre de responsabilisation en gestion de la dotation – CRGD) – The SMAF sets out expectations for a well-managed appointment system that enables ongoing monitoring of delegated authorities and reporting to the Public Service Commission. It serves as the basis for measuring key success factors, the achievement of results and respect for the appointment values.



**Sub-delegated manager** (Gestionnaire subdélégué) – A person to whom a deputy head has sub-delegated, in writing, the authority to exercise specific appointment and appointment-related authorities that have been delegated to the deputy head by the Public Service Commission.



#### **AUDIT OBJECTIVES AND CRITERIA**

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OBJECTIVES	CRITERIA			
To provide reasonable assurance that CSC has a management framework in place to support its staffing activities.	<ul> <li>1.1 Policies and procedures – CSC has established, documented, communicated, and maintains appointment related policies consistent with the PSEA and PSC appointment Framework.</li> <li>1.2 Roles and responsibilities – Roles, responsibilities and accountabilities for appointment-related authorities are documented, communicated, and maintained. Sub delegated managers and HR advisors are informed of their roles and</li> </ul>			
	responsibilities.			
	1.3 Training and Awareness – Sub delegated managers and HR advisors have the necessary knowledge and skills to carry out their appointment related responsibilities.			
	1.4 Planning – Human resources planning is Integrated, and identifies future human resource requirements. Staffing strategies address identified staffing risks, and is consistent with HR plan.			
	1.5 Monitoring – The Deputy Head monitors actual performance and appointment process results against the PSEA, PSC mandatory appointment policies and the HR Plan.			
2. To assess the extent to which appointments and appointment processes comply with the instruments of delegation signed with the PSC.	2.1 Sub-delegation Instrument - The entity has established and maintains an official sub-delegation instrument that is aligned with the Appointment Delegation and Accountability Instrument (ADAI).  2.2 Change Management - Delegated authorities are effectively managed in accordance with the PSC appointment			
	framework, including continuous learning and change. CSC takes corrective actions and makes improvements on a timely basis.			



OBJECTIVES	CRITERIA
	2.3 Compliance/Monitoring - The Deputy Head monitors actual performance and appointment process results against the <i>PSEA</i> , PSC mandatory appointment policies and the HR Plan.
3. To assess the extent to which appointments and appointment processes comply with the PSEA, PSC's Appointment Framework, and other governing authorities and policies.	3.1 Public Service Values - Appointments respect the core values of merit and non-partisanship and the guiding values of fairness, access and transparency.  3.2 Documentation - Appointment and appointment-related decisions are fully documented, providing complete and accurate information to support staffing decisions.
4. Assess the extent to which CSC will be prepared to meet its HR strategic obligations in relation to staffing.	<b>4.1 Capacity Building</b> - Mechanisms are in place to ensure that the department has the capacity to staff anticipated upcoming changes in requirements, in particular the <i>Truth in Sentencing</i> Act and a changing CSC staff demographic.

#### ANNEX C

#### LIST OF DOCUMENTS REVIEWED

#### **PSC Documents:**

- Public Service Commission Appointment Policy
- Staffing Management Accountability Framework (SMAF)
- Audit Terms of Reference (provided by PSC on 2010-07-09)
- Matrix of Audit Criteria (provided by PSC on 2010-07-09)
- Compliance Audit Program Template (provided by PSC on 2010-07-09)
- Summary of Audit Criteria by Assessment provided by PSC on 2010-07-09)
- Guidance Series Advertisements in the Appointment Process
- Guidance Series Integrating Employment Equity in the Appointment Process
- Guidance Series Official Languages in the Appointment Process
- Guide to Implementing the Choice of Appointment Process Policy
- Guide to Implementing the Area of Selection Policy
- Guide to Implementing the Policy on Official Languages in the Appointment Process
- Guide on Priority Administration
- PSC Appointment Delegation and Accountability Instrument-Policy Statement
- PSC Appointment Process Suggested Activities at the Different Decision Points
- PSC Assessing Merit

#### **CSC Bulletins:**

- Bulletin on Aboriginal Hiring
   Bulletin on Term Employment Annex A
- Bulletin on Area of Selection
  - Memorandum of Understanding
  - EX and EX minus 1 equivalence
- Bulletin on Acting Appointments
- Bulletin on Notification in Internal Appointments
- Bulletin on Advertising for Appointment Processes
- Bulletin on Criteria for Non-Advertised Appointment Processes
- Bulletin on Corrective Action and Revocation
- Bulletin on Informal Discussion
- Targeting Employment Equity Groups in Staffing Activities
- Assignments/Secondments



#### **CSC Reports:**

- FINAL\_APPROVED\_Jun 2010\_Risk Based Audit Plan\_2010-2012
- CSC Corporate Risk Profile March 2007
- CSC Corporate Risk Profile August 2010
- CSC Instrument of Delegation of Authorities In the Area HRM Sept 2009
- Mapping for the Sub-delegation of HR Authorities-Feb 2010
- CSC SMAF(DRAFT)-April 2007
- CSC Report on Transformation Priorities Mar 2010
- CSC-RPP 2010-2011
- DSAR Final Version 2008-09
- DSAR Final Version 2009-10
- Strategic Plan for HRM-2009-10 to 2011-12
- Summary Assessment of Performance in Staffing Jan 07-Mar 07
- Staffing for Managers: Prairie Region
- Audit of Staffing Transactions-NHQ and ONT Region (CSC, 2006)
- Audit of Staffing Activities (CSC, 2006)
- 2006-2007-2008 Staffing Monitoring Report-NHQ-March 2009
- 2006-2007-2008 Staffing Monitoring Report-ATL Region-March 2009
- 2006-2007-2008 Staffing Monitoring Report-PRA Region-March 2009
- 2006-2007-2008 Staffing Monitoring Report-PAC Region-March 2009



#### ANNEX D

#### **LIST OF INTERVIEWEES**

REGION	POSITION
National Headquarters	<ul> <li>NHQ Director, Corporate Staffing</li> <li>NHQ Manager, Corporate Staffing</li> <li>Regional Administrator HR</li> <li>Chief of Operations HR</li> <li>A/Director General</li> <li>A/Director, reintegration programs</li> <li>Senior Analyst Staffing</li> </ul>
Prairies	<ul> <li>Regional Administrator HR</li> <li>/HR Chief of Staffing</li> <li>MAI, Rockwood</li> <li>Senior Analyst Staffing/Stony Mountain-Rockwood</li> <li>Senior Analyst Staffing</li> <li>A/Chief of Staffing</li> <li>ADCCS</li> <li>A/ADCC</li> <li>Deputy Warden, Stony Mountain</li> <li>Warden, Stony Mountain</li> <li>Deputy Warden, Rockwood</li> <li>Warden, Rockwood</li> <li>ASSISTANT Warden Interventions</li> <li>AWMS</li> <li>Deputy Warden, Edmonton Inst</li> <li>Warden, EIFW</li> </ul>
Pacific	<ul> <li>Regional Administrator HR</li> <li>HR Chief of Staffing, RHQ</li> <li>Warden Pacific Inst</li> <li>Warden, FVI</li> <li>Staffing Advisor</li> <li>Staffing Advisor</li> <li>Regional Deputy Commissioner</li> <li>A/ADCCS</li> </ul>
Ontario	<ul> <li>Regional Administrator HR</li> <li>Regional Deputy Commissioner</li> <li>ADCCS</li> </ul>



REGION	POSITION
Quebec	<ul><li>Directrice générale p.i. en RH</li><li>S-CR</li><li>SCASC</li></ul>
Atlantic	<ul> <li>Directrice Générale p.i. en Ressource Humaine</li> <li>Gestionnaire régionale pour la dotation et le recrutement</li> <li>Senior Advisor, HR-RHQ</li> <li>AWMS</li> <li>Planning Pharmacy and Quality improvement</li> <li>HR Advisor</li> <li>Conseiller RH- Recrutement et dotation</li> <li>Sous-Commissaire Régional - RDC</li> <li>ADCCS</li> <li>A/ADCCS</li> </ul>



#### ANNEX E

## AUDIT OF STAFFING ACTIVITIES MANAGEMENT ACTION PLAN (MAP)

Recommendation:	Recommendation No. 1	
	The Assistant Commissioner, Human Resource Management should ensure that :	
Recommendation.	HR Advisors are held accountable for their respective responsibilities in the staffing actions and that there are means to demonstrate that these roles are being fulfilled.	
Management Response / Position:	Accepted Accepted in Part Rejected	

Action(s)	Deliverable(s)	Approach	Accountability	Timeline for Implementation
What action(s) has / will be taken to address this recommendation?	Expected deliverable(s) / indicator(s) to demonstrate the completion of the action(s)	How does this approach address the recommendation?	Who is responsible for implementing this action(s)?	When will action(s) be completed to fully address the recommendation?
1.1 The Document Control Sheet for Staffing will be updated to include a section which requires confirmation that the HR Advisor has provided and documented their advice to managers within the staffing activity.			Corporate Staffing (CRSP Branch)	July 2011
Renewed communication and training of staffing community regarding requirement to document advice and challenge function.				September 2011
Monitoring of this area will be included as part of all on-going staffing monitoring activities.				<ul> <li>October 2011 –</li> <li>EX Staffing</li> <li>Winter 2011/12 –</li> <li>Prairie Region</li> </ul>



Action(s)	Deliverable(s)	Approach	Accountability	Timeline for Implementation
Responsible to ensure that the staffing file has been reviewed upon completion of the staffing activity and the advice provided by the HR Advisor is appropriate and has been documented. Where discrepancies in this area are identified, follow up action with the responsible HR Advisor will take place.			Regional Chiefs of Staffing	October 2011
Responsible to ensure that their challenge function in staffing activities is active and documented on the staffing file as appropriate.			Regional Staffing Advisors	October 2011 implementation by Chiefs



	Recommendation No. 2
	The Assistant Commissioner, Human Resources Management should implement an accountability mechanism to ensure that:
Recommendation:	<ul> <li>All documentation required for each staffing process is collected and placed on files; and</li> <li>A monitoring system is in place that verifies the documentation for completeness and accuracy; and systematic corrective action is taken.</li> </ul>
Management Response / Position:	✓ Accepted

Action(s)	Deliverable(s)	Approach	Accountability	Timeline for Implementation
What action(s) has / will be taken to address this recommendation?	Expected deliverable(s) / indicator(s) to demonstrate the completion of the action(s)	How does this approach address the recommendation?	Who is responsible for implementing this action(s)?	When will action(s) be completed to fully address the recommendation?
<b>2.1</b> Corporate Staffing will follow up on specific files highlighted by the audit to ensure corrective action taken.	5		Corporate Staffing (CRSP Branch)	August 31, 2011
Responsible to ensure that that all documentation is on file in accordance with the Document Control Sheet for Staffing.			Regional Staffing Advisors	October 2011 implementation by Chiefs
<b>2.2</b> Adjust Corporate Staffing Monitoring Framework to ensure detailed documentation verified as part of CSC staffing monitoring activities.	3		Corporate Staffing (CRSP Branch)	August 31, 2011
Conduct follow up monitoring exercise f documentation completion and accuracy				March 31, 2012
Verify all staffing files upon completion of a staffing activity and that all documentation is on file in accordance with the Document Control Sheet for Staffing. Where documentation is	of		Regional Chiefs of Staffing	Communication and training by September 30, 2011



Action(s)	Deliverable(s)	Approach	Accountability	Timeline for Implementation
missing, follow up with the responsible HR Advisor will take place.				



	Recommendation No. 3			
Recommendation:	Continue to work with the Regional Deputy Commissioners to further analyse unique regional staffing requirements against the national plan to anticipate regional disparities and requirements.			
Management Response / Position:	Accepted Accepted in Part Rejected			

Action(s)	Deliverable(s)	Approach	Accountability	Timeline for Implementation
What action(s) has / will be taken to address this recommendation?	Expected deliverable(s) / indicator(s) to demonstrate the completion of the action(s)	How does this approach address the recommendation?	Who is responsible for implementing this action(s)?	When will action(s) be completed to fully address the recommendation?
Thorough consultation with regional managers, determine any specific recruitment/staffing needs that can not be addressed through the normal national recruitment/staffing venue and determine appropriate course of action as required to ensure unique recruitment/staffing needs are met.			Recruitment and National Initiatives (CRSP Branch)	<ul> <li>July 2011 – PO and CPO</li> <li>April 2011 – Intro of new CX process</li> <li>June 2011 – PW</li> <li>Sept. 2011 – NU</li> </ul>