STAFFING TRANSACTIONS AUDIT

**National Headquarters
and
Ontario Region**

**Performance Assurance Sector
Correctional Service of Canada**

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In accordance with the Performance Assurance Internal Audit Plan for 2004-2005, an audit of staffing transactions was conducted in February and March 2005.

This audit focused on the following objectives:

Objective 1: To assess the extent to which staffing processes/procedures are in compliance with the Public Service Employment Act, Regulations, Orders, PSC Staffing Delegation, and PSC policies, Principle of Merit as well as values of fairness, equity of access and transparency.

Objective 2: To assess the extent to which staffing information and opportunities are shared with employees and reporting mechanisms are used following staffing transactions.

The scope of the audit was developed in consultation with the Human Resources Management Sector (NHQ) and included a small but focussed examination of CSC's staffing processes and transactions to ensure they were in compliance with Public Service Employment Act, Regulations, PSC Policies as well as PSC values and principles. Two sites were selected for the audit; namely National Headquarters and the Ontario Region.

The results of the audit can be summarized as follows:

National Headquarters

Based on a review of staffing files at NHQ, the audit team found:

- Compliance with legislative, regulatory and Central Agency policy authorities.
- Very well organized and documented staffing files.
- Mandatory documents were found on most staffing files. Only a few documents were missing and this was brought to the attention of the responsible Human Resources manager for corrective action.
- Indications that information on staffing opportunities is being disseminated effectively and that staff know where to find such information.
- Indications that individual staffing actions are conducted not only in accordance with governing authorities but also respect PSC values and principles.
- Staffing transaction information is being appropriately updated and maintained in HRMS (PeopleSoft) as a reliable source of HR management information.

The overall conclusion of the audit team was that NHQ HR manages an effective staffing program. The physical environment was neat, clean and orderly. Discussions with NHQ HR staff revealed a highly motivated and knowledgeable group who possess a sense of professional commitment towards their work. Various monitoring and quality control mechanisms have been instituted to ensure program adherence. Monthly meeting are conducted with HR managers to ensure that HR staff has an opportunity to share information and discuss challenges, etc. Moreover, a significant effort has been dedicated at NHQ towards recruitment and training of HR staff.

Ontario Region

Review of staffing transactions for the Ontario Region indicated a number of deficiencies:

- Overall file organization and maintenance is inconsistent, inadequate and in some cases confusion exists about file ownership and responsibility.
- The adequacy and appropriateness of storage space for staffing files is problematic. Notations were found on the inside of a few folders that files had been re-created because they had been inadvertently destroyed prior to their expiry date.
- One or more mandatory documents could not be found on most staffing files. The extent of the problem was such that, in some cases, the audit team was unable to audit the staffing transaction files.
- No indication that staffing files are subject to any quality control reviews.
- Initial requests and/or justifications to proceed with staffing actions did not address, for the most part, staffing considerations or options, human resource strategies or other PSEA expectations or values.
- Little documentation was found on staffing files that linked staffing decisions for actings, term extensions and casual employment with the PSEA and PSC values and principles. Although the PSEA and PSC values and principles may be considered and/or documented in electronic correspondence, hard copy documentation is not maintained on staffing files.
- A lack of justification/rationale against a Statement of Qualifications as to why employees are being placed in and/or extended in various types of short term staffing opportunities.
- An over-reliance on the use of temporary staffing measures to manage vacancies.
- Managers are not consistently posting temporary staffing opportunities (i.e., actings, assignments) on the local staffing opportunities website.
- Issues identified with regard to employee access to electronic information about employment opportunities which may be on the federal government's Publiservice website or on the local staffing opportunities website.
- Staffing data not being entered in a consistent and timely manner into the Human Resources Management System (*PeopleSoft*),

The overall conclusion of the audit team was that the Ontario Region has insufficient management controls and mechanisms in place to ensure effective management of the staffing function. The most significant problems are centered on temporary staffing measures (actings, term extensions, casual employment) which are managed by Chiefs of Human Resource Management who are located in various operational sites across the region. Although the problems identified in the audit report relate to individual staffing transactions, the extent to which the Ontario Region's staffing program is experiencing problems extends past specific staff or managers and will require significant corporate intervention.

The Correctional Service of Canada (CSC) is a large decentralized organization. In terms of its Human Resource capacity, NHQ performs overall planning, policy development, monitoring and reporting of results. At the regional level, there is considerable variation in terms of organizational structures from centralized to decentralized which is in keeping with geography and regional needs.

Background

As of November 2004, CSC had a workforce of approximately 16,000 employees. Of those employees, 97.24% were indeterminate while 2.76% occupied determinate positions for a period greater than 3 months.

There are two major operational groups that comprise more than half of CSC's staffing population. Correctional Officers who are part of the Custody business line and Parole and Program Officers who are part of the Reintegration business line represent 53% of CSC's workforce.

In various Public Service Commission reports, effective departmental human resource programs consist of elements such as;

1. Human Resources Plans, Programs and Strategies:

CSC has Human Resources plans, programs and strategies which are managed by Corporate Staffing and Programs at National Headquarters. The Branch provides advice, interpretation and guidance to Human Resources Advisors and senior management on a broad range of staffing issues. They are also responsible for developing CSC staffing policies and programs which supports and promotes effective human resource practices.

2. Communication Strategies:

The most commonly used method within CSC to communicate various types of staffing information at both the national and regional level is via the Intranet site which provides access to policies, regulations and other documentation such as HR reports and activities. The Intranet site also makes available information about advancement and developmental opportunities across the CSC.

3. Reporting Mechanisms:

A third important element of the human resource infrastructure involves having information gathering and reporting mechanisms in place to obtain reliable human resource data so that CSC can measure and analyze its performance and report its findings to various central agencies.

4. Staffing based on Values and Principles:

CSC's human resources strategy is comprised of processes and procedures which are based upon specific Public Service values and principles. Specifically, there are "results" and "process" driven values which include competence, representativeness and non-partisanship, fairness, equity of access and transparency. Important management considerations in staffing processes and procedures include affordability/efficiency and flexibility.

Audit Objectives

The following objectives were established for the audit of Staffing Transactions at NHQ and the Ontario Region.

Objective 1: To assess the extent to which staffing processes/procedures are in compliance with the Public Service Employment Act, Regulation, Orders, PSC Staffing Delegation, and PSC policies, Principle of Merit as well as values of fairness, equity of access and transparency.

  (i) a variety of staffing activities exist which include indeterminate appointments (open, closed, etc.), term assignments, actings (under/over four months), deployments, secondments, reclassifications as well as the hiring of casuals;

  (ii) individual staffing transactions are in compliance with central agency Acts and Regulations as well as underlying staffing values; and

  (iii) monitoring and quality control mechanisms exist to ensure that the staffing transactions are not only technically correct but also consistent with PSC staffing values which include the Merit Principle as well as fairness, equity of access and transparency.

Objective 2: To assess the extent to which staffing information and opportunities are shared with employees and reporting mechanisms are used following staffing transactions.

  (i) employees are aware that staffing policies and procedures exist and how to access that information;

  (ii) staffing opportunities and decisions are communicated to employees within specified timeframes; and

  (iii) staffing decisions data is entered in the Human Resources Management System (*i.e., PeopleSoft*)

Scope, Exclusions and Limitations

The audit was conducted at National Headquarters (NHQ) in Ottawa and in the Ontario Region in Kingston. A sample of 132 files was selected for NHQ and a sample size of 123 files was selected for the Ontario Region. The sample selected included eight different types of staffing transactions across various groups and classifications and covered the period of March 31, 2004 to January 31, 2005. The work was carried out in February and March 2005.

Eight different types of staffing transactions were examined which included: Open Competitions, Closed Competitions, Appointments without Competition, Causal Employment, Terms, Acting Appointments, Secondments and Deployments.

The audit did not include a review of the corporate human resource management infrastructure nor did it include a review of the "management of the staffing function" from an overall corporate perspective. This phase of the audit was limited to the examination of individual staffing transactions at NHQ and the Ontario Region; however the audit did verify the extent to which, at the local level, staffing opportunities and decisions are shared in a timely manner with employees and individual staffing data are recorded in the Human Resources Management System (*PeopleSoft*).

Audit Methodology

The Correctional Service of Canada entered into a Memorandum of Understanding with Consulting and Audit Canada (CAC) a Special Operating Agency of Public Works and Government Services Canada. CAC worked jointly with CSC to form an audit team, supply the staffing audit tools, assist with the file review and draft an initial audit report.

The methodology used in conducting the Staffing Audit consisted of four main parts:

1) An historical review of staffing transactions over a twelve month timeframe to confirm that a variety of staffing transactions are being utilized;
2) An examination of selected staffing transactions (file review) to measure not only compliance against PSC acts and regulations, but also staffing values;
3) Interviews with delegated staffing managers, human resource specialists and locally situated employees to determine the extent to which staffing information and opportunities are communicated; and
4) Verification that staffing decisions are being recorded in the Human Resources Management System *(PeopleSoft)*.

Legislative and Policy Authority

Staffing in CSC is carried out under the authority delegated to the Commissioner by the Public Service Commission (PSC), as provided for in Section 6. (1) of the Public Service Employment Act (PSEA) and the authorized sub-delegation by the Commissioner to subordinate managers as provided for in Section 6. (5):

> 6. (1) The Commission may authorize a deputy head to exercise and perform, in such manner and subject to such terms and conditions as the Commission directs, any of the powers, functions and duties of the Commission under this Act, other than the powers, functions and duties of the Commission under sections 7.1, 21, 34, 34.4 and 34.5.

> (5) Subject to subsection (6), a deputy head may authorize one or more persons under the jurisdiction of the deputy head or any other person to exercise and perform any of the powers, functions or duties of the deputy head under this Act including, subject to the approval of the Commission and in accordance with the authority granted by it under this section, any of the powers, functions and duties

that the Commission has authorized the deputy head to exercise and perform.
Amended 1996, c. 18, s. 14.

Correctional Service of Canada's Commissioner's Directive (CD) 068, entitled, "Delegations of Authorities in Human Resource Management" delegates power related to Human Resource Management functions as closely as possible to the point of impact of the decisions being made. Specific delegation and responsibilities are outlined in paragraphs 2 and 3 of CD-068 as well as the Annex "A" (pages 35 to 39) of the Directive.

Delegated management levels (levels 1, 2 and 3) include the Commissioner, Senior Deputy Commissioner, Deputy Commissioner for Women, Assistant Commissioners, the CEO of CORCAN and Directors General, Regional Deputy Commissioners, Regional Assistant Deputy Commissioner, Warden, Executive Director, RPC (Health Services), District Directors, and the Director of Operations CORCAN.

Values-Based Staffing Framework

The Public Service Employment Act (PSEA) governs staffing. It requires appointments to be based on merit, which means that people are hired based on their qualifications. The PSC applies merit by striking a balance between the *results values* of competency, representativeness and non-partisanship; the *process values* of transparency, equity and fairness; and the *management principles* of flexibility, affordability and efficiency.

In addition to the staffing values articulated by the Public Service Commission, Core Value 3 of the Correctional Service of Canada's Mission Document states that:

> We believe that our strength and our major resource in achieving our objectives is our staff and those human relationships are the cornerstone of our endeavour.

In support of Core Value 3 and the staffing process is Strategic Objective 3.7 which states that the Service is committed:

> To ensure that our staffing practices are based on the merit principle and reflect the importance of hiring and promoting individuals who possess values and abilities consistent with our objectives, and who demonstrate a variety of attributes and skills, with emphasis on maturity, good judgment, effective communication and teamwork.

Policy Framework

The policy framework for staffing is outlined in the PSC Staffing Manual. The key chapters referred to in developing the various staffing audit tools were: Area of Selection; Priorities; Recruitment; Appointments from within the Public Services; Deployments; Assignments; Secondments; and Assessment, Selection and Appointment.

The Corporate Staffing and Programs Branch at NHQ is responsible for developing CSC staffing policies and programs that support and promote effective human resource practices as well as

monitoring of the application. With respect to this audit, Corporate Resourcing and Programs has published three staffing bulletins relating to Acting Appointments, Terms Appointments and Area of Selection and one Commissioner's Directive on Standardized Selection Process.

Audit Results and Conclusion

> Objective #1: To verify that staffing transactions are in compliance with the PSEA, PSC and CSC Policies as well as the results and process values and management principles.

The methodology used to assess this objective involved the audit team reviewing specific TBS policies, the PSEA and Regulations as well as the PSC Policy Manual relating to Area of Selection; Priorities; Recruitment; Appointments from within the Public Services; Deployments; Assignments; Secondments; and Assessment, Selection and Appointment. In addition, the audit team reviewed CSC staffing policies as well as relevant supporting CSC reports such as the Departmental Staffing Accountability Reports for 2003 and 2004.

Staffing audit tools were developed by Consulting and Audit Canada and reviewed by the Public Service Commission for concurrence. The sample selected from HRMS included eight different types of staffing transactions across various groups and classifications. The staffing transactions examined included: Open Competitions, Closed Competitions, Appointments without Competition, Causal Employment, Terms, Acting Appointments, Secondments and Deployments. The review cover the period of March 31, 2004 to January 31, 2005 and the audit work was carried out in February and March 2005.

> *Finding #1: With respect to National Headquarters, the audit team found that individual staffing transactions were in compliance with central agency acts, regulations, policies and values.*

From the HRMS data, the audit team selected a total of 132 transactions for review at NHQ: Open Competitions – 18 files; Closed Competitions – 17 files; Appointed Without Competition – 12 files; Casuals – 17 files; Terms – 16 files; Acting – 11 files; Secondments – 20 files; Deployments – 21 files.

Based upon the methodology cited above, the audit team found that NHQ staffing files were neat and well organized and there was an effective use of checklists and dividers to ensure that mandatory staffing documents were on file. There were a few cases where mandatory documents were missing from the staffing file and this was brought to the attention of the responsible HR manager for corrective action.

Rationales/justifications for staffing transactions, especially for Open and Closed Competitions were strong. This information was found on staffing forms such as the Request for Personnel Services as well as in e-mails between the delegated/responsible managers and the Human Resources Advisors. For detailed information on the specific results of the audit by transaction type, please refer to Annex "A".

The audit team noted that appropriate monitoring and quality control mechanisms were in place to ensure that staffing transactions were not only technically correct, but also respected the underlying PSC values and principles. The audit team did have two observations to make relating to Deployments and Appointments without Competition which are noted below.

The file review of Deployments showed that information on NHQ staffing files met minimum requirements for scope of justifications. The minimum PSC requirement is that managers prove that the proposed candidate meets occupational certification, education, security, medical, and language requirements of the position. Although it is recognized that deployments are not appointments and that deployed employees need not meet all job qualifications nor be the best qualified, in the interest of openness and transparency the audit team suggests that managers also include a short explanation showing that the proposed candidate meets (at least in part) some other elements of the Statement of Qualifications.

With respect to Appointments without Competition (AWOC), the audit team found all transactions to be "technically" correct. The majority of AWOC transactions were part of special recruitment programs i.e., "Bridging Program", "Ford Program", and "PE Development Program". In some cases, managers did not explain why special recruitment programs were being accessed (i.e., lack of skilled or trained candidates, organizational mentoring program, etc.) The audit team suggests that managers include a clear justification or discussion of why these types of programs, which allow for appointments without competition, are employed to ensure that the issue of fairness and accessibility is addressed.

With respect to Objective #1, the audit team concluded that NHQ Human Resources is managing its staffing transactions in compliance with Treasury Board policy as well as Public Service Commission Acts, Regulations and Policy Manual. Apart from noting that a few mandatory documents were missing from a few files, the audit team is of the opinion that efforts should be made by NHQ to surpass basic requirements with respect to justifications and rationales for Deployments and Appointments without Competition.

> *Finding #2: With respect to the Ontario Region, the audit team found examples of non-compliance with central agency acts, regulations, policies and values.*

From the HRMS data, the audit team selected a sample of 123 transaction types. The breakdown for the Ontario Region was as follows: Open Competitions – 21 files; Closed Competitions – 16 files; Appointed Without Competition – 18 files; Casuals – 19 files; Terms – 3 files; Acting – 19 files; Secondments – 1 files; Deployments – 26 files.

The methodology for the file review used for NHQ was also followed in the Ontario Region.

The file review identified numerous problems with respect to individual staffing transactions. As well, it became evident to the audit team that systemic problems existed with respect to how staffing transactions were being managed regionally in Ontario.

As a result, the findings for this objective in the Ontario Region are grouped into two categories. The first group is a brief summary of findings by transaction type. The second group of findings identifies five general issues affecting staffing transactions in the Ontario Region.

Summary of Findings by Type of Staffing Transactions:

- Open and Closed competition files were generally found to be in compliance with PSC policies and values. The transaction files were neat and consistently organized and dividers were used to identify key mandatory documents. The one observation by the audit team was that a few mandatory documents were missing and/or could not be located in this group of staffing file.

- Deployments files were relatively well organized and neat. However, justifications for selection rationales did not provide a clear link between the candidate's experience and the Statement of Qualifications. One or more mandatory documents were missing from all deployment files.

- The audit team observed that Acting transactions were not well managed. Significant and relevant information was missing from numerous files and in some cases, so little information was available, that the audit team could not assess the acting transaction. Relevant and/or missing information may be available in electronic format to support the Acting transactions, however, that information was, for the most part, not available for the audit teams' review.

- A small number of Term files were reviewed. Generally the files were found to be in compliance with respect to justifying the need for temporary employment, however, one or more mandatory documents were missing from the files.

- With respect to Appointments Without Competition, 12 of the 18 files were situations of "three year terms" being converted to indeterminate status. It was the audit team's opinion that the group/classification of most "three year terms" being converted to indeterminate status were sufficiently generic and in operational demand to have merited competitive processes being held prior to the three year cut-off (i.e., WP-04 – 6; CR-03 – 2; PS-02 – 2; GL-MAN-07 – 1; GL-MDO-05 – 1).

- With respect to Secondments, one file was reviewed and no problems were identified.

- Casual employment files were not consistently well managed and in many cases supporting documentation was limited. Operational sites submitted a variety of information ranging from file folders that contained that year's letters of offer for casual employment to somewhat more detailed individual file documentation. The lack of file documentation in numerous cases limits the level of assurance that the audit team can provide that sites are not re-hiring casual employees (i.e., 6 months casual employment and 6 months via placement agencies).

General Issues Affecting Staffing Transactions:

Apart from problems noted with the individual staffing transactions, the audit team identified five general issues relating to the manner in which staffing transactions are managed in the

Ontario Region; namely: Rationales / Justifications; Temporary Staffing Measures; Quality Control; Mandatory Documents; and File Management.

Rationales / Justifications:

The audit team noted that at the beginning of the staffing process, initial requests and justifications to proceed with various staffing activities did not address staffing options or considerations, human resource strategies or any other PSEA expectations and values. Particularly in the case of temporary staffing measures, the audit team noted that there was virtually no information on file with respect to the history or current status of the position being staffed. Neither was there any discussion of how these vacancies were to be managed in the future from a local, regional, operational or strategic perspective.

The lack of appropriate rationales and justifications proved to be problematic especially when the audit team found numerous examples of mandatory documents missing from staffing files. Staffing rationales and justifications in combination with mandatory supporting documentation helps to trace how the staffing process and decisions are managed. Without this information it is difficult to assess whether or not a staffing transaction should proceed in a certain manner and if the staffing decisions being made are in accordance with governing authorities.

By way of example, the audit team reviewed a number of acting appointment and term extension files. Little was found in the way of initial justifications and mandatory documentation that linked staffing decisions with the PSEA and PSC values and principles. It is important to note that although the PSEA and PSC values may have been considered and/or documented in electronic correspondence, that supporting information was not found on staffing files.

Temporary Staffing Measures:

It was evident to the audit team that based upon an overall assessment the 123 staffing transactions; there is an over-reliance on the use of temporary staffing measures within the Ontario Region.

The CSC Acting Policy states that: "Long acting situations may create a real or potential unfair advantage which gives rise to frustration on the part of employees who are not provided similar opportunities. This has a detrimental effect on the merit principle as well the Public Service core staffing values." The policy goes on to establish that "Acting appointments are to be used only in situations where a need clearly exists for a temporary duration and not as long term solutions to meet indeterminate staffing needs".

The file review of Acting Extensions revealed a number of inadequate and inconsistent files. Of the 19 Acting transactions requested, 5 files could not be assessed due to insufficient documentation on file. Of the 14 remaining transactions, 7 files (50%) revealed acting extensions dating back several years (i.e., 1 case – 1998; 2 cases – 2001; 2 cases – 2002; 2 cases – 2003). The remaining 7 Acting transactions reviewed by the audit team were in compliance. Given the sample of acting extensions reviewed by the audit team, a significant percentage were not in compliance with CSC policy requirements.

Another example of the over-reliance of temporary staffing measures in the Ontario Region was evident in the review of Appointments without Competition (AWOC). Of the 18 AWOC transactions audited, 12 were situations of "three year terms" being converted to indeterminate status. The breakdown of the three-year term conversions by group/level is as follows: WP-04 – 6; CR-03 – 2; PS-02 – 2; GL-MAN-07 – 1; GL-MDO-05 – 1.

The CSC's Term Policy states that: "Term employment should not be used as a substitute probationary period for indeterminate staffing. Rather, it should be used in situations, such as backfilling temporary vacancies resulting from indeterminate employees on leave and acting/developmental assignments, short-term projects and fluctuating workloads". The policy goes on to state that: "Merit remains the fundamental principle of hiring all term employees into the Public Service." And finally, that: "Term employment should form part of the longer-term internal staffing, recruitment and retention strategies that are integrated with departmental business planning at the corporate, regional and local levels."

The number of three year term employees converted to indeterminate status raises questions with respect to how the Ontario Region is applying CSC's Term Policy. In addition, the audit team is of the opinion that the groups/classifications of most AWOC transactions were sufficiently generic and in operational demand to have merited competitive processes being held prior to the three year cut-off.

Quality Control:

The audit team observed issues with respect to quality control. In the Ontario Region Actings, Term Extensions and Casual Employment are managed in the institutions and districts by the Chiefs of Human Resources Management (CHRMs) who are located in operational units across the Ontario Region. During interviews with regional HR managers and advisors, it was explained that there are situations where the CHRMs do not have HR backgrounds nor have they been "formally" trained by CSC.

Given the fact that CHRMs are not necessarily subject-matter experts and that temporary staffing measures within the Ontario Region are highly decentralized, it would be expected that well-defined regional processes, procedures and other quality control or monitoring mechanisms would be in place to ensure consistency, fairness and transparency. However, the audit team noted that none of these mechanisms had been established by the region.

The audit team did observe that Staffing Checklists were appended to the inside cover of most staffing files. The lists were thorough and focused primarily on "technical" staffing requirements. However the audit team noted that the Checklists were rarely used or completed properly for quality control and monitoring purposes. There were numerous examples which, if the lists had been used appropriately; the types of errors identified in Annex "B" could have been caught and corrected.

<u>Mandatory Documents</u>:

As previous indicated, the audit team identified that mandatory documents were frequently missing from staffing files. In some cases, there were one or more documents missing. In other situations, so many required documents were missing that the audit team was unable to assess the staffing file.

One of the mandatory documents required on a staffing file is a signed/accepted letter of offer. It is the Ontario Region's protocol that signed/accepted letters of offer are not required on staffing files. Rather, signed/accepted letters of offer are retained in Compensation on the employee's compensation file. The rationale for this situation is to cut back on paper usage. However, the audit team found that signed/accepted letters of offer were, in fact, often on the staffing files, but not consistently. Additionally, numerous staffing files contained several duplicates of unsigned amended letters of offer.

Apart from the inconsistent application of the Ontario Region's own protocol with respect to letters of offer, this regional practise contradicts Chapter 8.9 of the PSC Staffing Manual which deals with staffing documentation and specifies that:

> *In accordance with Privacy Regulations, staffing information, whether recorded on paper or electronically, must be retained for a period of two years from the last administrative use.*

> *In addition, the retention period for competitions should be two years following the expiry date of the eligibility list or last administrative action. For other selection processes (e.g. without competition, term re-appointment, deployment, acting appointment)* **the information should be retained for two years from the date of acceptance of an offer or last administrative action.**

If signed/accepted letters of offer are not consistently maintained on staffing files, it is not possible to know when the "…two years from the date of acceptance of an offer…" actually occurred. In other words, the date placed on a letter of offer when it is prepared is not necessarily the date it is signed and accepted by an employee. For any number of reasons, several days, weeks or possibly months could elapse between the time a letter of offer is generated and the date it is signed/accepted by an employee.

<u>File Management</u>:

During the course of the audit, the team came across notations inside a few folders indicating that staffing files had been re-created because they had been inadvertently destroyed prior to the expiry date. The explanation provided by regional HR management was that insufficient storage space existed for staffing files. When shelf space is full, staffing files that have past the required retention date are vetted. Unfortunately, some staffing files had been accidentally destroyed prior to their expiry date.

With respect to Objective #1, the audit team concluded that the Ontario Region is not managing its staffing transactions in compliance with the PSEA, Regulations and Policy Manual. Part of this problem is due to deficiencies that exist in terms of regional direction, monitoring and quality control. The lack of strong support by regional management in the staffing function has resulted in an array of unacceptable practises in the current operation. Due to the problems outlined above, the audit team is unable to attest that all staffing transactions have been managed in accordance with governing authorities which includes the merit principle.

Objective #2: To provide an assurance that staffing opportunities and decisions are being communicated to employees and that staffing data are being recorded in the Human Resources Management System (PeopleSoft).

The methodology used by the audit team to assess Objective #2 included conducting interviews with delegated staffing managers, human resources specialists and assistants, as well as the union and locally situated employees to determine the extent to which staffing information and opportunities are communicated. The audit team also enlisted the assistance of a locally recognized "specialist" to help verify that staffing data are being accurately recorded and updated in the HRMS.

Finding #3: With respect to the National Headquarters, the audit team found that staffing opportunities and decisions are being communicated to employees and that staffing data is recorded and updated in the Human Resources Management System.

As outlined in the methodology above, and based upon interviews conducted at NHQ, the audit team is confident that employees are aware that staffing policies and procedures exist and how to access that information.

During interviews with NHQ Human Resources specialists, it was confirmed that the Publiservice is used to communicate all staffing opportunities and there is no local staffing opportunities website.

The audit team randomly selected staffing transactions from each of the eight categories to verify that this information had been entered and updated in the Human Resources Management System. Our verification of the data entry indicated that the selected transactions had all been accurately entered into the system. Moreover, the audit team noted that NHQ conducts an additional quality control process to verify accuracy of data entry.

With respect to Objective #2, the audit team is of the opinion that NHQ is meeting expectations in terms of communicating information about staffing policies and procedures to staff. Staffing data are input in a consistent and timely manner into HRMS and mechanisms are in place to ensure data reliability.

Finding #4: With respect to the Ontario Region, the audit team found that problems exist for staffing opportunities and decisions being communicated to employees and that staffing data are not consistently recorded and updated in the Human Resources Management System.

The same methodology used for NHQ was followed in the Ontario Region. The audit team's review indicated that for the most part, regional employees have access to the local Infonet Staffing Opportunities website. However, as explained during interviews with Regional Human Resources specialists not all employees are aware of, nor have they been instructed on how to access the federal government's Publiservice website. Some employees, especially those who do not hold "desk" jobs, may not have access to computers or know where/when they may obtain access.

Within the Ontario Region, the local website (Regional Employment Opportunities) is used to post information about Open and Closed Competitions, Appointments Without Competition, Notice of Deployment, Rights of Appeal, etc. However, it was revealed during interviews with Regional Human Resources specialists that there is no regional protocol specifying when or how institutions and districts are to share short-term staffing opportunities and information.

For example, as noted earlier in this audit report, short term staffing measures such as acting assignments, term extension and casual employment are managed at operational sites by the CHRMs. How and when opportunities are communicated to employees appears to be left to the discretion of the individual institutions and district offices. The audit team, therefore, cannot provide an assurance that information on short term staffing opportunities is shared with the appropriate employees.

The key corporate reporting mechanism used to track staffing transactions is the Human Resource Management System (HRMS). The audit team found that data entry is not being done in a consistent or timely manner and the accuracy and consistency of data is questionable.

For example, the audit team used "Acting Appointments" to verify that HRMS was being entered and updated in a timely and consistent manner. Of the 19 files reviewed, six transactions had not been updated in HRMS. The effective dates on these acting appointments had commenced in May 2004, July 2004, September 2004 and two in October 2004. For the sixth transaction, there was insufficient information available to confirm the start date.

The audit team was informed that some regional staff randomly monitors for accuracy of HRMS data and keep track of "users" who frequently make mistakes. Assistance is offered by telephone and if the problem persists, then the "user" is provided with a re-training session. Based upon random monitoring and retraining efforts, regional staff believe that some degree of reliability exist for the HRMS data that is input into the system. However, when the audit team pointed out that 6 out of 19 acting appointments (30%) had not been updated in HRMS dating back a lengthy period of time (May-October 2004), the audit team was advised that RHQ can only quality control information that is actually input into the database. The extent of inaccurate and missing data in HRMS is unknown.

During the course of interviews with Regional Human Resources specialists, it was noted that there has been a frequent turnover in the Ontario Region of HR staff and assistants. New HR staff and assistants have been trained to use HRMS; however, before developing sufficient competency with the program, many of these employees have left. A number of staff and

managers at RHQ indicated that HR staff retention problems have seriously impacted the accuracy of HRMS data.

The audit team observed that Selection Process Numbers or Codes used to track casual employment in HRMS are not consistent. Some sites use the word(s) "Casual" or "Casual Employment". Other sites used Selection Process numbers or the position number the casual may be backfilling to identify the transaction.

The audit team was advised that HRMS reports are not commonly requested or used. Moreover, the team was advised that RHQ HR has developed and maintains stand-alone reports that they use to track certain types of HR information and that these reports are not part of HRMS.

With respect to Objective #2, the audit team concluded that, to a limited extent, problems exist with respect to certain groups of employees not having access to staffing information as well as job opportunities on the Regional Employment Opportunities and Publiservice websites. As well, due to the lack of direction or protocol, no consistent approach exists to ensure that opportunities for temporary staffing measures are shared on a regional basis. There is evidence that staffing transaction data is not being consistently entered and/or updated in PeopleSoft which leads to the conclusion that the reliability of HRMS data is very questionable.

Recommendations

With respect to NHQ Staffing and the two audit objectives, there were no audit findings or issues warranting senior management attention. The few matters that the audit team identified were process related and have been referred to appropriate levels of management for corrective action. Indications were that staffing information and opportunities are being disseminated effectively via the Infonet and PubliService and that staff, generally, know where to find such information. Indications were that HRMS is appropriately updated and maintained so as to ensure it is a reliable source of management information.

As a consequence of the above findings, there are no recommendations in relation to NHQ.

With respect to the Ontario Region a number of deficiencies were identified by the audit team which will require senior management action and follow up. Consequently, the following recommendation is made:

Recommendation #1: That the Regional Deputy Commissioner seek the advice and ongoing assistance of the Assistant Commissioner, Human Resources Management to formulate and implement a detailed action plan to bring the staffing operations of the Ontario Region into line with current requirements and to help them prepare for the announced changes that are to become effective later this year with the Public Service Modernization Act.

Action by: RDC and ACHRM

Management Action Plans - Ontario Region

RESULT:	Strong Organizational posture; clear expectations and confidence that results can be achieved in staffing.

Staffing Transactions Audit Report
This audit focused on the following objectives:

Objective 1: To assess the extent to which staffing processes/procedures are in compliance with the Public Service Employment Act, Regulations, Orders, PSC Staffing Delegation, and PSC policies, Principle of Merit as well as values of fairness, equity of access and transparency.

Objective 2: To assess the extent to which staffing information and opportunities are shared with employees and reporting mechanisms are used following staffing transactions.

The content of the draft Audit Report was reviewed and after discussion and considerations, we agree with the findings and recommendations. In analysing the regional context and the causes of such practices, we have come to the conclusion that the management of resources and workload in the staffing area over the last years has not been conducive to instil standard practices that would ensure full compliance.

With the strong commitment to correct the situation, concerted efforts will be put forward jointly between the corporate and regional levels to achieve compliance with respect to the mandatory documentation and diligent and timely processes in staffing that will properly reflect the staffing principle and values.

The management plan that has been prepared is comprised of 7 elements as it was determined that implementing measures exclusive to each recommendation would not be sufficient to change the culture and rebuild the team's capacity to conduct staffing activities in the required manner. Therefore, a more comprehensive and integrated approach addressing all aspects surrounding staffing activities would be best at this time in the Ontario region.
These elements include:

1. File documentation
2. HR Organizational Structure
3. Delegation
4. Workload Management
5. Staffing Planning
6. Staffing Processes Management
7. Building HR Capacity

These 7 elements all contribute to the modernization of staffing activities in the Ontario region. They will provide for the application of the staffing values and the demonstration on file of full compliance with the Public Service Employment Act, Regulations and policies overall.

The HR resources located in sites that were performing temporary staffing measures and those at region performing the other staffing activities will be realigned under the same umbrella. Consequently, the centralization of resources involved in all types of staffing activities will ensure a better control of the standard application of procedures. At the same time, the coaching and training of Managers, HR Advisors and Assistants will be required to enhance the knowledge and level of expertise of all with respect to staffing. Such an approach is also necessary considering the imminent changes with the new Modernization Act and the new PSEA and the common requirement to renew the expertise and the entire HR capacity.

It is also recognized that the roles and responsibilities of all parties involved in staffing, Managers and HR Advisors, must be reiterated to ensure the proper completion of each step of the process including the documentation that reflects the decisions taken.

In order to be more effective, the Ontario region must review how it identifies the staffing needs and relevant activities and subsequently distribute the workload in such a way to build an intelligence of the demography, movement and vacancy rate of each job family and sites and apply the adequate staffing strategy in a timely fashion. The region can no longer afford to conduct staffing processes in a reactive manner.

In order to ensure a sustainable capacity for conducting staffing activities in the spirit of the staffing values and principle, the capacity must be enhanced in Ontario with the assistance of the corporate level. With proper learning activities towards certification of HR Advisors and the availability of better and timely tools for managers, the staffing activities in a correctional environment will be improved and the compliance better assured for the immediate and longer term.

In conclusion, this endeavour is one of significant change management in addition to the day to day operations already in a backlog situation. Not only is the compliance at risk but also the HR support service to clients within the region ultimately impacting on having the right people to do the job in our multiple occupational groups and sites and the ability of achieving correctional results. The implementation of such an action plan requires the strong leadership and expertise of resources assigned to each task which is critical to its success within the proposed timelines.

RESULT:	Strong Organizational posture; clear expectations and confidence that results can be achieved in staffing.

ACTION	RESP.	Completed/ Revised Date	Comment/Action Plan
1 – FILE DOCUMENTATION			
1) Move and maintain file storage as per Archive policy	RAHR	Completed	
2) Implement use of checklist for file documentation for all staffing actions	CHRM	Completed	
3) Provide training for HR Advisors and assistants	RAHR	Completed	
4) Implement monitoring process for file	RAHR		In process of being

ACTION	RESP.	Completed/ Revised Date	Comment/Action Plan
review a) For hard cover files b) For HRMS files			developed a) spot checks being completed b) position will be staffed later in this fiscal year
2 – HR ORGANIZATIONAL STRUCTURE			
1) Develop model	ADCCS	Completed	
2) Obtain RMC approval	ADCCS	Completed	
3) Obtain ORB approval	ADCCS	Completed	
4) Design Organizational Chart in line with budget	ADCCS	Completed	
5) Classify work descriptions	ACHRM	05-12-31	In process, one key PE04 position still unclassified.
6) Remove training functions from CHRM / create training coordinator positions	ACHRM	Completed	
7) Reassign CHRM incumbents to other HR disciplines	ADCCS	05-12-31	In process, 4 grievances are being resolved prior to deployment to new structure.
8) Conduct selection process for positions as needed	ACHRM	06-04-30	In process.
9) Develop training plan for new appointees / all employees	ACHRM/ RAHR	05-12-31	In process. Employees are receiving technical training, while training plan is being finalized (i.e. RTW, PSMA, LR Symposium)
10) Review workload distribution	RAHR	Completed	
11) Review / define work flow and procedures	RAHR	Completed	
12) Establish Service Delivery Model in consultation with stakeholders	ACHRM/ RAHR	Completed	Consultation about the change in service delivery occurred at various phases with management, employees directly affected and union. Fine tuning still occurring.
3 – DELEGATION			
1) Define roles and responsibilities of a) RPC	ADCCS	Completed	Role further reviewed at

ACTION	RESP.	Completed/ Revised Date	Comment/Action Plan
b) Sub-delegated Managers	ACHRM	Completed	September RPC and will no longer include individual staffing transactions, rather will focus on strategic issues. Roles and responsibilities covered in the 1 day EDS session. Officers have reviewed these at the 3 day course in November.
c) HR Advisors	ACHRM	05-12-31	
2) Set requirements to maintain sub-delegation	ACHRM	06-01-15	
3) Provide training to a) Managers	ACHRM	06-03-31	
b) HR Advisors	ACHRM		Level 2 and 3 delegated managers will have 1 day training at November EDS, followed by an additional more in-depth training in 4th quarter. Ongoing training for PSMA and PSC validation exam will be written by Staffing Officers in December.
4 – WORKLOAD MANAGEMENT 1) Track staffing actions by site, type	RAHR	05-10-01	System in place since October. Monitoring system revamped to allow tracking by site. This will be useful in determining the timing of the return of sub-delegation by site.
2) Review ratio HR Advisor/client demand	RAHR	On-going	This is being monitored and adjustments have been made.
3) Set throughput time where possible	RAHR		Premature. Employees are adapting to their new portfolios/clients and still catching up with backlog caused by removing CHRMs from individual sites and establishing longer term staffing strategies
4) Define reporting requirements and monitor results.	RAHR	On-going	Extensive monitoring being conducted since delegation was withdrawn on July 7,

ACTION	RESP.	Completed/ Revised Date	Comment/Action Plan
			2005.
5 – STAFFING PLANNING 1) Track / analyse vacancy rate by job family / site 2) Analyse needs for indeterminate vs term vs acting actions 3) Analyse potential pool of candidates for each job family 4) Define regional factors having impact on staffing	RAHR RAHR RAHR RAHR/ ACHRM	Completed November RPC	Considerable analysis went into the Ontario Regional Staffing Plan presented and approved at the November RPC. Positions were identified for staffing priority based on Immediate, Continuous and Impending organizational needs. Demographics from HRMS were used to determine Impending needs. Nine recommendations were also accepted to assist in making strategic HR Management decisions instead of being vacancy generated.
6 – STAFFING PROCESSES MANAGEMENT 1) Identify issues 2) Develop and implement action plan 3) Review each process and adjust accordingly	RAHR RAHR RAHR	Completed	Items 2 & 3 – New procedures developed at various intervals starting in July 2005.
7 – BUILDING HR CAPACITY REGIONAL HR MANAGEMENT 1) Appoint HR expert REGIONAL HR ADVISORS 1) Implement program towards staffing certification 2) Identify coach for non-certified Advisors 3) Identify training needs (technical + abilities) 4) Deliver training	ACHRM ACHRM RAHR RAHR ACHRM	Completed 06-03-31 05-09-26 On-going On-going	All uncertified advisors have been matched with either a certified advisor or a more experienced advisor. In Process. Staffing Officers have attended a training session on PSMA in Toronto early November and a further

ACTION	RESP.	Completed/ Revised Date	Comment/Action Plan
			training session at the end of November in Kingston. More focused training will also be given on-site with the arrival of a special resource at the end of November.
SUB-DELEGATED MANAGERS AND SELECTION BOARD MEMBERS 1) Identify training needs 2) Deliver training	ADCCS ACHRM	Completed 06-03-31	One day of training will be provided at EDS, which will be followed by more in-depth training in the 4th quarter. The in-depth training will also be given to Level 4 managers and possibly Level 5 managers as they are the selection board members.
Implement Task Force for transition to new PSEA	ACHRM	completed	Bi-weekly teleconferences since Nov. 05

Management Action Plan - NHQ

I am pleased to provide my response to audit recommendation 1:

Recommendation 1: That the Regional Deputy Commissioner seek the advice and ongoing assistance of the Assistant Commissioner, Human Resources Management to formulate and implement a detailed action plan to bring the staffing operations of the Ontario Region into line with current requirements and to help them prepare for the announced changes that are to become effective later this year with the Public Service Modernization Act.

Action by: RDC and ACHRM

The ACHRM and A/DG, ODR have worked closely with the RDC and ADC-CS, Ontario Region to develop the management action plan. The Region has demonstrated a strong commitment to correcting the deficiencies identified in the audit report. The management plan not only responds to the shortcomings identified, but will ensure a strengthened HR organizational structure which will better serve the region and foster the building of HR capacity.

Critical to the Region's success in response to the audit is the recruitment of strong regional HR leadership. The ACHRM and Region have developed and initiated a staffing strategy that is designed to put strong leadership in place quickly at the RA-HR and PE-05 levels.

An integral part of the regional centralization of staffing services on a national basis has been the development of generic regional HR work descriptions. These will be used in the creation of the new Ontario structure.

In line with the coming into force of the new PSEA, the HR instrument of delegation will be reviewed in view of increased delegation of authorities, training will be offered to sub-delegated managers and HR advisors (along with representatives of our bargaining agents). A new CSC staffing certification program will be developed in line with the new Act.

With the increased delegation and authorities the new PSEA brings, the ACHRM is committed to the development of a strengthened accountability and monitoring framework. We are currently in the development phase of a new accountability agreement between the PSC and the Commissioner. The governance model will be based on five key areas, each with performance indicators: Planning, Policy, Communication and Control. Monitoring of staffing activities will be conducted at the national level and regions.

In closing, the HRM Sector will work closely with the Ontario Region to implement the management action plan and report on progress.

NHQ Summary of Audit Findings by Transaction Type

Open Competitions – 18 Files Reviewed

- Analysis of Pool of Candidates – No problems identified
- Evaluation of Candidates – No problems identified
- Justification for Appointments – No problems identified
- Relative Merit Versus Individual Merit – No problems identified
- Mandatory Documents – A few mandatory documents missing such as: Signed Statement of Persons Present at Board and a Copy of a Notice
- Checklists – On file but not always used/completed

Audit Team Comments/Observations:

Open Competitions files reviewed were found to be in compliance with PSC policies and values. All files were neat and consistently organized. The use of dividers and labels to identify key mandatory documents was well done. A couple mandatory documents were missing, and this matter is to be corrected by the NHQ Senior Advisor, Human Resources.

Closed Competitions – 17 Files Reviewed

- Analysis of Pool of Candidates – No problems identified
- Use of Reduced Area of Selection – No problems identified
- Evaluation of Candidates – No problems identified
- Justification for Appointments – No problems identified
- Mandatory Documents – One file had a number of mandatory documents missing.
- Checklists – On file but not always used/completed

Audit Team Comments/Observations:

Closed Competitions were neat and consistently organized. The use of dividers and labels to identify key mandatory documents was well done. One file had a number of mandatory documents missing. Possibly those documents are on a separate file that had not been provided to the audit team. The NHQ Senior Advisor, Human Resources will correct this situation.

Deployments – 21 Files Reviewed

- Justification for Deployment – No problems identified
- Selection Rationales – Deployments were technically correct. However, a clear rationale that assesses the selected candidate against the Statement of Qualifications would help demonstrate that PSC and CSC values are respected
- Mandatory Documents – No problems identified
- Checklists – On file but not always used/completed

Audit Team Comments/Observations:

Deployments files were neat and consistently organized. All mandatory documents were found on file. Deployment criteria were met. The audit team suggests that in the interest of openness and transparency managers be asked to include a short rationale showing that the proposed candidate meets (at least in part) elements of the Statement of Qualifications other than occupational certification, education, security, medical and language requirements.

Actings – 11 Files Reviewed

- Analysis of Pool of Candidates – No problems identified
- Evaluation of Candidates – No problems identified
- Justification for Appointments – No problems identified
- Mandatory Documents – No problems identified
- Checklists – On file but not always used/completed

Audit Team Comments/Observations:

Acting files were neat and consistently organized and found to be in compliance with PSC Policies and values. All mandatory documents were found on file.

Terms – 16 Files Reviewed

- Compliance with Policy (*i.e., Need for Temporary Employment*) – No problems identified
- Employee's Career History – No problems identified
- Mandatory Documents – Documents missing from four files.

Audit Team Comments / Observations:

Term Competition files reviewed were found to be in compliance with PSC policies and values. All files were neat and consistently organized. Mandatory documents were missing from four files. This matter was brought to the attention of the NHQ Senior Advisor, Human Resources for corrective action.

Appointments Without Competition – 12 Files Reviewed

- Analysis of Pool of Candidates – No problems identified
- Evaluation of Candidates – No problems identified
- Justification for Appointments – Technically correct -- the majority of transactions were part of special recruitment programs i.e., "Bridging Program", "Ford Program", and "PE Development Program". In some cases, managers did not explain why these special recruitment programs were being accessed. Without clear justifications, the issue of fairness and accessibility could be questioned.
- Mandatory Documents – No problems identified

Audit Team Comments/Observations:

- *Appointment Without Competition files reviewed were found to be in compliance with PSC policies and values. All files were neat and consistently organized. The audit team noted that the majority of transactions were part of special recruitment programs i.e., "Bridging Program", "Ford Program", and "PE Development Program". There was only one case of a three-year term conversion to indeterminate status. On some files, managers did not explain why these special recruitment measures were being accessed. The audit team suggests that managers be asked to include justifications explaining why these special programs are being used. This will help to ensure that issues of fairness and accessibility have been considered.*

Secondment – 20 Files Reviewed

- Secondment Assignment – No problems identified
- Mandatory Documents (written/signed/dated agreements) – No problems identified

Audit Team Comments/Observations:

Secondment were found to be in compliance with PSC policies and values. No concerns identified.

Casuals – 17 Files Reviewed

- Compliance with Policy – No problems identified (All files reviewed complied with the 90 and 125 day requirements).

Audit Team Comments / Observation:

The NHQ Senior Advisor, Human Resources indicated that senior management has sent a strong message to managers that they are not to circumvent the Casual Employment Program by re-hiring casual employees once their 125 day have lapsed. (i.e., 6 months casual employment and 6 months via placement agency). The audit team noted that there are no declaratory statements on casual employment files indicating that managers are aware of and observe this rule. This may be something that NHQ HR may wish to consider.

NHQ HR uses HRMS data to obtain special reports about staffing trends and other relevant data.

With respect to data entry into HRMS, the Senior Advisor has an Assistant that monitors and quality controls all letters of offer generated at NHQ to ensure the information has been input and that the data are correct.

Ontario Region Summary of Audit Findings by Transaction Type

Open Competitions – 21 Files Reviewed

- Analysis of Pool of Candidates – No problems identified
- Evaluation of Candidates – No problems identified
- Justification for Appointments – No problems identified
- Relative Merit Versus Individual Merit – No problems identified
- Mandatory Documents – A few cases where mandatory documents where missing from the staffing file such as: Copy of Notice, Signed Statement of Persons Present at Board Screening and Security Clearances.
- Checklists – On file but not always used/completed

Audit Team Comments/Observations:

Open Competitions files reviewed were found to be in compliance with PSC policies and values. Files were neat and consistently organized. Dividers were used to identify key mandatory documents.

Closed Competitions – 16 Files Reviewed

- Analysis of Pool of Candidates – 8 cases – no analysis
- Use of Reduced Area of Selection – 6 cases – no analysis
- Evaluation of Candidates – No problems identified
- Justification for Appointments – No problems identified
- Mandatory Documents – 6 files – one or more mandatory documents missing
- Checklists – On file but not always used/completed

Audit Team Comments/Observations:

Closed Competition files were neat and consistently organized. Several files had a number of mandatory documents missing.

Deployments – 26 Files Reviewed

- Justification for Deployment – Justifications weak or not on file
- Selection Rationales – No clear link between the candidates' experience and the Statement of Qualifications
- Mandatory Documents – One or more mandatory documents missing from all deployment files
- Checklists – On file but not always used/completed

Audit Teams Comments/Observations:

Deployments files were relatively well organized and neat. However, justifications for deployment were not well done. As well, selection rationales did not provide a clear link between the candidate's experience and the Statement of Qualifications. One or more mandatory documents were missing from all deployment files. Relevant and/or missing information may be available in electronic format to support the deployment transactions; however, that information was not consistently on file for the audit teams' review.

Actings – 19 Files Reviewed

- Analysis of Pool of Candidates – 9 cases - Analysis not on file
- Evaluation of Candidates – 13 cases - Evaluations not on file
- Justification for Appointments – 4 cases – No justification on file
- Mandatory Documents – 14 cases – One or more mandatory documents missing from file
- Checklists – 18 cases – No checklist used

Audit Team Comments/Observations:

Acting transactions are not well managed. Significant and relevant information was missing from numerous files and in some cases, so little information was available, that the audit team could not assess the acting transaction. Relevant and/or missing information may be available in electronic format to support the Acting transactions, however, that information was, for the most part, not available for the audit teams' review.

The audit team used "Acting Appointments" to verify that HRMS (PeopleSoft) was being used in a timely and consistent manner. Of the 19 files reviewed, six transactions had not been recorded in HRMS. Signed and accepted Letters of Offer for these staffing transactions were located in Regional Compensation for five of the six acting transactions. The acting dates on these transactions had commenced in May 2004, July 2004, September 2004, two in October 2004. There was insufficient information to confirm the start date on the sixth transaction.

Terms – 3 Files Reviewed

- Compliance with Policy (i.e., Need for Temporary Employment) – No problems identified
- Employee's Career History – No documentation on file to track Term History (Observation)
- Mandatory Documents – Of the 3 files reviewed – One or more mandatory documents were missing

Audit Team Comments/Observations:

Based upon the HRMS data, the audit team thought it had selected a larger sample of Terms for review. As it turned out, a number of the Terms were in fact, Appointments Without Competition (see comments below). Of the three Term Competition files that were reviewed, the files were generally found to be in compliance with respect to justifying the need for temporary employment. However, one or more mandatory document were missing from the three term files.

It was observed by the audit team that the Ontario Region does not track employee term history on file (i.e., no indication when a term assignment or extension is completed that the employee has returned to a base position).

Appointments Without Competition – 18 Files Reviewed

- Analysis of Pool of Candidates – 16 cases – no analysis conducted
- Evaluation of Candidates – 3 cases – no evaluation conducted
- Justification for Appointments – 2 cases – no justification on file.
- Mandatory Documents – 2 cases – mandatory documents missing from file

Audit Team Comments/Observations:

12 of the 18 files were situations of "three year terms" being converted to indeterminate status. Four cases were of PSC Priorities. One file was a "competition" and not an AWOC" as noted in the HRMS data. In another case, insufficient documentation was provided, so the audit team was unable to assess the file. It was the audit team's opinion that the group/classification of the "three year terms" being converted to indeterminate status were sufficiently generic to have merited competitive processes being held prior to the three year cut-off. (Note: at NHQ – 12 AWOCs were reviewed during the same timeframe and only 1 was a "three year term" converted to indeterminate status.)

Secondment – 1 File Reviewed

- 1 file reviewed – No problems identified.

Audit Team Comments/Observations:

No problems identified with the Secondment.

Casuals – 19 Files Reviewed

- Compliance with Policy – All files reviewed complied with the 90 and 125 day requirements.

Audit Team Observations:

Supporting documentation with respect to hiring and management of casuals was limited. Sites submitted a variety of different types of information relating to casual employment.

Although interviewees indicated that regional managers are aware they are not to re-hire casual employees (i.e., 6 months casual employment and 6 months via placement agency); the lack of file documentation in numerous cases limits the level of assurance that sites are not re-hiring casual employees. HR Management in the Ontario Region may wish review this matter with the aim to establishing some monitoring / control mechanisms.

Selection Process Numbers or Codes (HRMS) used to track casual employment are not consistent. Some sites use the word(s) "Casual" or "Casual Employment". Other sites used Selection Process numbers or the position number the casual may be backfilling to identify the transaction.

Document Retention Requirements

Chapter 8.9 of the PSC Staffing Manual which deals with staffing documentation specifies that:

> In accordance with Privacy Regulations, staffing information, whether recorded on paper or electronically, *must be retained for a period of two years from the last administrative use*.

> In addition*, the retention period for competitions should be two years following the expiry date of the eligibility list or last administrative action.* For other selection processes (e.g. without competition, term re-appointment, deployment, acting appointment) *the information should be retained for two years from the date of acceptance of an offer or last administrative action.*

Section 8.9.1 entitled, Document Retention Requirements for Staffing Files of the PSC Staffing Manual states that minimally, departments must maintain the following documents on their staffing files:

> *For collection of information and for monitoring and evaluation purposes, the following documentation must be kept:*

> - *statement of qualifications;*
> - *justification for non-imperative staffing, as appropriate;*
> - *priority clearance number;*
> - *notice of the selection process;*
> - *applications received in a competition by notice or list of candidates drawn from an inventory search;*
> - *Signed Statement of Persons Present at Boards form;*
> - *Statement of Agreement to Become Bilingual, signed by the employee and the manager;*
> - *language, diagnostic, medical, reliability and/or security check results;*
> - *the assessment information, e.g. methods used, written responses given by candidates, written notes taken by selection board members during the interview, role play or interactive exercise; the rating of candidates and the selection board's report;*
> - *signed eligibility list, if appropriate;*
> - *appeal notification, if appropriate;*
> - *letter of offer/instrument of appointment; and*
> - *any other document/information specific to the action (e.g. correspondence with candidates, union consultation, indication that candidates in a competition were actively offered feedback, decision to bypass a name on an eligibility list) should also be kept.*

Audit Objectives and Criteria

Objectives	Criteria
Objective 1: To assess the extent to which staffing processes/procedures are in compliance with the Public Service Employment Act, Regulation, Orders, PSC Staffing Delegation, and PSC policies, Principle of Merit as well as values of fairness, equity of access and transparency.	The audit will verify that: (i) a variety of staffing activities exist which include indeterminate appointments (open, closed, etc.), term assignments, actings (under/over four months), deployments, secondments, reclassifications as well as the hiring of casuals; (ii) individual staffing transactions are in compliance with central agency Acts and Regulations as well as underlying staffing values; and (iii) monitoring and quality control mechanisms exist to ensure that the staffing transactions are not only technically correct but also consistent with PSC staffing values which include the Merit Principle as well as fairness, equity of access and transparency.
Objective 2: To assess the extent to which staffing information and opportunities are shared with employees and reporting mechanisms are used following staffing transactions.	The audit will verify that: (i) employees are aware that staffing policies and procedures exist and how to access that information; (ii) staffing opportunities and decisions are communicated to employees within specified timeframes; and (iii) staffing decisions data is entered in the Human Resources Management System (i.e., PeopleSoft).