1 INTRODUCTION

1.1 Definition of terms for the purpose of these Regulations

1.1.1 Applicant means a person who has submitted an application for the Surgical Education and Training (SET) Program in Cardiothoracic Surgery of the Royal Australasian College of Surgeons.

1.1.2 Board means the Royal Australasian College of Surgeons Board of Cardiothoracic Surgery.

1.1.3 BST means the Royal Australasian College of Surgeons Basic Surgical Training (BST) Program.

1.1.4 Business Days means Monday to Friday excluding public holidays.

1.1.5 College or RACS means the Royal Australasian College of Surgeons.

1.1.6 Interview means the Board of Cardiothoracic Surgery Semi-Structured Interview conducted as part of the selection process.

1.1.7 ANZSCTS or Society means the Australian and New Zealand Society for Cardiac and Thoracic Surgeons.

1.1.8 Police Report means a report on the criminal record of a person.

1.1.9 Referee means a person identified in accordance with these Regulations to evaluate professionally the applicants’ performance.

1.1.10 Relevant Police Force means any or all of Australian Federal Police and the various State and Territory Police Forces and the New Zealand Police Force.

1.1.11 SET Program means the Surgical Education and Training (SET) Program in Cardiothoracic Surgery as approved by the Board of Cardiothoracic Surgery.

1.2 Purpose of these Regulations

The purpose of these Regulations are to set forth and establish the principles, terms and conditions of the selection process for the Royal Australasian College of Surgeons Surgical Education and Training (SET) Program in Cardiothoracic Surgery for the 2012 intake. This is a public document.

1.3 Administration and Ownership

The College is the principal body accredited and authorised to conduct surgical education and training in Australia and New Zealand and in some regions of Asia. The College consults the Society on all matters of quality and standards in Cardiothoracic Surgical education and training and the Society undertakes the development, delivery, selection and administration of the SET Program as an agent of the College. Each surgical education and SET Program conducted under the auspices of the College has an appointed specialty board that are responsible for advising the College and the Society on training and education via the relevant governance structures. These functions are performed by the Board of Cardiothoracic Surgery.

1.4 Objective of the SET Program

The overall objective of the SET Program is to produce competent independent specialist Cardiothoracic Surgeons with the experience, knowledge, skills and attributes necessary to provide the communities, health systems and professions they serve with the highest standard of safe, ethical and comprehensive care and leadership.
2 PRINCIPLES UNDERPINNING THE SELECTION PROCESS

2.1 The aim of the selection process is to select the highest calibre trainees for the SET Program on the basis of merit through a fair, open and accountable process.

2.2 The selection process will be legal and conducted without prejudice.

2.3 The selection process will be well documented, transparent and objective with applicants having access to eligibility criteria, information on the selection process, general selection criteria and an appropriate appeals process.

2.4 The selection process will be subject to continuous review to ensure its continued validity and objectiveness.

2.5 The SET Program will be widely advertised to create national awareness of opportunity for all eligible applicants.

2.6 Any factors influencing the trainee intake will be openly declared with the mechanism by which the quota or limit is arrived at made known.

2.7 All applicants who satisfy the eligibility and application criteria will be considered in open competition and without bias.

2.8 Applicants must be aware that interviews are not automatically granted to all eligible applicants. Only the most competitive applicants who have obtained the minimum standard for the Structured Curriculum Vitae and Structured Referee Reports will be eligible for the interview.

3 ELIGIBILITY FOR APPLICATION TO THE SET PROGRAM

3.1 To be eligible for application to the SET Program, applicants must fulfil the following RACS minimum eligibility criteria:

3.1.1 Register with the College to apply for SET Selection. Registration opens 11th January 2012 and closes 17th February 2012. Applicants must register in accordance with the directions provided by the College.

3.1.2 Be a graduate of a medical school recognised by the Australian Medical Council (AMC) or the Medical Council of New Zealand (MCNZ) or have completed in its entirety the AMC or MCNZ accreditation process at the time of application.

3.1.3 Have current and valid medical registration from the applicable Medical Board or Council in Australia, New Zealand or Singapore at the time of application. Australian applicants must have general (unconditional) registration. New Zealand applicants must have general scope registration or written assurance from the Medical Council of New Zealand that general scope registration will be approved by the start of the training year.

3.1.4 Have permanent residency status or have been granted citizenship at the time of application in Australia, New Zealand.

3.1.5 Consent to a full criminal history check and agree to submit the relevant documentation on request from the Board to enable a full criminal history check to be undertaken in accordance with the Selection Process Regulations.
To be eligible for application to the SET Program in Cardiothoracic Surgery, applicants must fulfil the following specialty specific eligibility criteria:

### 3.2 Rotations

#### 3.2.1 Complete two (2) surgical rotations of a minimum duration of ten (10) continuous weeks. The terms must be undertaken within the last two years and may be completed by the end of 2012 (1\textsuperscript{st} January 2010 – 31\textsuperscript{st} December 2012). The terms must be taken separately irrespective of the cumulative total of the rotation.

#### 3.2.2 The surgical rotations must be undertaken within a hospital unit specialising in one (1) of the nine (9) surgical specialties.

#### 3.2.3 Complete one (1) Cardiothoracic Surgical rotation of a minimum of ten (10) continuous weeks by the time of application.

#### 3.2.4 The Cardiothoracic Surgical rotation must be undertaken within a hospital unit where an approved Cardiothoracic Supervisor of Training is present. A Cardiothoracic rotation must provide both cardiac and thoracic exposure. The rotation must be undertaken in a unit with an approved Cardiothoracic Supervisor of Training.

#### 3.2.5 The Cardiothoracic term can contribute to the minimum number of terms as outlined in item 3.2.1.1.

#### 3.2.6 The minimum duration of a rotation excludes any leave taken during the rotation.

#### 3.2.7 Applicants must provide written evidence from the employing institution confirming completion of the relevant surgical term/s.

### 3.2.2 Referees

#### 3.2.2.1 Applicants must nominate eight (8) referees from the last five (5) years (since 1 January 2007). A maximum of three (3) referees can be nominated per term. Referees will be contacted to provide reports. These will subsequently be scored in accordance with item 10 of these regulations.

### 4 CRIMINAL RECORD CHECKS AND POLICE REPORTS

#### 4.1 Police record checks now form an integral part of the assessment of applicants for suitability for the SET Program. As part of the application and selection process applicants are asked to disclose whether they are the subject of any criminal charge(s) still pending before a Court, or whether they have been subject to criminal conviction(s) or finding(s) of guilt before a Court (criminal history). As part of the selection process the Board may ask applicants to consent in writing to any or all of the New Zealand Police, Australian Federal Police and the various State and Territory Police Forces (Relevant Police Force):

- **4.1.1** disclosing criminal history information from its own records to the Board; and

- **4.1.2** accessing the records of any other New Zealand, State or Territory police and to obtain any criminal history information which in turn would be disclosed the Board.

#### 4.2 Applicants who do not consent to a full criminal history check or submit the relevant documentation on request from the Board to enable a full criminal history check will automatically be deemed ineligible for selection and will not be considered further in the selection process. This may occur at any time during the selection process.
4.3 With the consent of the applicant, the Board may request the Relevant Police Force to conduct a check of the applicant's criminal record and give the Board a report on the applicant's criminal record (if any).

4.4 In considering applications for the SET Program, where a Police Report reveals a criminal record, the Board must take into account:

4.4.1 the nature of the conviction recorded;
4.4.2 the age of the conviction recorded;
4.4.3 the relevance of the conviction on the application for the SET Program; and
4.4.4 any further explanation the applicant may give for the circumstances in which the conviction arose.

4.5 The disclosure or existence of a criminal history or a criminal record does not automatically result in the applicant being deemed unsuitable for selection. Each case will be assessed on its merit. Applicants may be asked to answer questions about any criminal history information disclosed by their application or any criminal record check. Failure by the applicant to make full and frank disclosure on the application form of their criminal history is grounds to automatically deem an applicant unsuitable for selection, unless the matter is a spent conviction under the relevant law.

4.6 Applicants with a relevant criminal conviction (Relevant Conviction) will be deemed unsuitable for selection to the SET Program. A Relevant Conviction includes, but is not limited to:

4.6.1 a conviction of a sexual nature;
4.6.2 a conviction relating to drug usage and or trafficking;
4.6.3 a conviction against liberty, morality and abduction;
4.6.4 a conviction relating to dishonesty, fraud and deception.

The final determination will be made by the Board.

4.7 A member, member of staff or agent of the Board must not, directly or indirectly, disclose to anyone the Police Report or information contained in the Police Report, given to the Board except in the circumstances set out in clause 4.8 of these Regulations.

4.8 A member, member of staff or agent of the Board does not contravene clause 4.7 of these Regulations if the disclosure of the Police Report or its content is authorised by the Board and the disclosure is limited to the extent necessary to perform a function under these Regulations for an application or selection for the SET Program.

5 APPLICATION TO THE SET PROGRAM

5.1 Applications can only be submitted via the College online application system at www.surgeons.org. Applications open on 14th March 2012 and close on 5th April 2012. No other form of application will be accepted and no extensions will be granted.

5.2 In the event of any discrepancy or inconsistency between these Regulations and other information from any source, written, verbal or otherwise, these Regulations shall prevail.

5.3 The information collected as part of the application and selection process will be used by the Board to assess the applicant's application for the SET Program. In order to make that assessment the information may be disclosed by the Board to other parties including, but not limited to, the Society and the College or where required to do so by law. The Board may verify the information provided within the application with external institutions or individuals, and gather additional information in order to process the application. Failure to provide the information requested by the Board will deem the applicant ineligible for selection and their application will be
withdrawn. By submitting an application the applicant is consenting to the collection, use, disclosure and storage of the information by the Board or its agent.

5.4 By submitting an application applicants certify that the information provided is correct and in accordance with these Regulations. If it is subsequently discovered that the applicant has provided incorrect or misleading information either intentionally or by mistake the applicant may be automatically withdrawn from the selection process and their application will not be considered further in the selection process. This may occur at any point during the selection process.

6 SELECTION COMMITTEE

6.1 The selection committee composition has been designed to inspire the confidence of the applicant, the profession and the community. The composition may include:

6.1.1 Members of the Board; and
6.1.2 Members of the Board of the ANZSCTS; and
6.1.3 Cardiothoracic Surgical Supervisors; and
6.1.4 One independent jurisdictional representative; and
6.1.5 Executive Officer, Board of Cardiothoracic Surgery; and
6.1.6 Other persons as deemed appropriate by the Board.

6.2 The selection committee will receive detailed instructions on the selection process, principles, criteria and copies of all the approved application documentation for applicants.

6.3 The selection committee will be bound by these Regulations and be held accountable for their processes and decisions in all forums.

7 SELECTION CRITERIA

7.1 Applicants must demonstrate a genuine interest and commitment to Cardiothoracic Surgery as a potential career with their selection of the specialty based on an accurate perception of the specialty traits. Previous cardiothoracic experience will be highly regarded.

7.2 Applicants must demonstrate sound knowledge of basic sciences and a commitment and motivation to continuous self directed learning including a demonstrated willingness to seek out experiences through active participation in activities such as scientific meetings, conferences, courses and workshops.

7.3 Applicants must demonstrate exposure to varied working environments, work hours and an aptitude to appropriately manage high stress environments in a responsible, efficient and dependable manner, seeking appropriate assistance when needed.

7.4 Applicants must demonstrate suitable experience, dexterity and clinical knowledge to consistently make dependable judgements, master operative techniques and provide comprehensive care from initial examination to post operative management with a willingness to seek advice and modify behaviour based on previous experiences.

7.5 Applicants must demonstrate a history of fostering harmonious highly effective working relationships, having gained the respect of others and exhibiting positive influences on the working environment.

7.6 Applicants must demonstrate a history of being considerate to the views of others at all times, reacting appropriately and diplomatically in all work situations and behaving in a manner which is professional and supportive for all work, ethnic, social and gender groups.
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7.7 Applicants must demonstrate interpersonal skills and a commitment to contribute effectively as a dependable and accountable member of the health care team, displaying cooperation, tact, courtesy, respect and reliability at all times and actively contributing to assessing progress and providing workable solutions.

7.8 Applicant must demonstrate a history of reliability and punctuality, assuming responsibility for completing tasks without prompting in a timely and efficient manner and demonstrating a high level of self motivation and organisation.

7.9 Applicants must demonstrate insight into their own strengths and weaknesses, a willingness to accept positive and negative feedback from others, learn from experiences and from others, and a commitment to actively seek feedback and respond constructively.

7.10 Applicants must demonstrate a willingness at all times to take the initiative and come forward with mistakes and adverse outcomes, displaying absolute honesty and a willingness to seek advice and respond appropriately.

7.11 Applicants must demonstrate highly effective listening and vocabulary skills and timely and highly effective written and verbal communication, keeping all team members up to date without prompting and always providing clear directions and descriptions of situations in an appropriate tone which encourages confidence and understanding.

7.12 Applicant must demonstrate ethical and responsible behaviour at all times with concern and sensitivity to the needs of others, demonstrating aesthetic sensibility, sound judgment and a focus on providing safe, comprehensive surgical care of the highest standard relating to patients, families and members of the health care team in a manner which exhibits honesty, integrity and compassion.

7.13 Applicants must demonstrate a good knowledge of ethical principles and practices and the ability to identify ethical expectations that impact on patient care and the work environment including informed consent, risk minimisation, confidentiality and clinical governance.

7.14 Applicants should demonstrate interests outside their career and a balance in their work and personal life with community involvement considered to be a positive reflection of the character of the applicant.

7.15 Applicants should demonstrate an understanding of the importance of research and its application to clinical practice. Publications, presentations or research experience, resulting in some meaningful and tangible outcome are highly regarded.

7.16 In keeping with the need for the public to have absolute trust and confidence in medical professionals, applicants must demonstrate that they are fit and proper persons of good integrity, honesty and character upholding high service and professionalism standards.

8 SELECTION PROCESS OVERVIEW

8.1 Applicants who satisfy the eligibility and application requirements outlined in sections 3, 4 and 5 of these Regulations will be considered in open competition for selection to the SET Program.

8.2 On completion of the relevant components of the selection process eligible applicants will be classified as one of the following:

8.2.1 **Unsuitable** being an eligible applicant who failed to satisfy a minimum standard for selection.

8.2.2 **Unsuccessful** being an eligible applicant who satisfied the minimum standards for selection deeming them suitable but who did not rank high enough in comparison to the intake to be made an offer of a position.
8.2.3 **Successful** being an eligible applicant who satisfied the minimum standards for selection deeming them suitable and who did rank high enough in comparison to the appropriate intake to be made an offer of a position.

8.3 Applicants **must** obtain an overall percentage adjusted score of at least 65% to be deemed suitable for selection into the SET Program in Cardiothoracic Surgery.

8.4 Failure to achieve the minimum standard for selection will automatically deem an applicant **unsuitable** for selection and their application will not be considered further in the selection process. Unsuitable applicants will be notified in writing as outlined in section 12 of these Regulations.

8.5 Applicants must be aware that interviews are not automatically granted to all eligible applicants. Only the most competitive applicants who have obtained the minimum standard for the Structured Curriculum Vitae and Structured Referee Reports will be eligible for the interview.

8.6 Applicants who satisfy the minimum standard for selection and the eligibility conditions will be deemed suitable for selection and will be ranked. The ranking will be determined by applying the following weightings to the percentage adjusted score out of 100 obtained for each of the three selection tools, providing an overall percentage score, rounded to the nearest two decimal places:

8.6.1 Structured Curriculum Vitae 20%
8.6.2 Structured Referee Reports 35%
8.6.3 Semi-Structured Interview 45%

8.7 In the event that two or more applicants receive a score within 0.05% of each other the score in the interview selection tool will be the differentiating factor. The response provided by referees to the domains and the comments section within the referee report may be used to differentiate such applicants.

8.8 There will be two entry points to the SET Program for 2013 being SET1 or SET2. Suitable applicants who have successfully completed or been granted exemption from the College Basic Surgical Training Examinations at the time of selection may be eligible for the SET1 and SET2 intake.

8.9 The SET2 intake will be determined by the number of available SET2 training positions. These intakes are subject to the availability of suitable applicants.

8.10 Suitable applicants eligible for the SET2 intake, who rank high enough in comparison to the number of SET2 positions available, will be deemed **successful** for SET2 and offered a position in a training unit in which they must undertake SET2. The allocation to the position identified in the offer is determined according to ranking, with preference for placement in specific locations taken into consideration where possible. Successful applicants will be notified in writing as outlined in section 14 of these Regulations.

8.11 Suitable applicants for the SET1 intake, who rank high enough in comparison to the SET1 intake, will be deemed **successful** and offered a position in a training unit, according to their ranking, in a region in which they must undertake SET1. Successful applicants will be notified in writing as outlined in section 14 of these Regulations.

8.12 All other suitable applicants who do not rank high enough in comparison to the intake to be offered a position will be deemed **unsuitable**. Unsuccessful applicants will be notified in writing as outlined in section 13 of these Regulations.
8.13 Applicants who do not meet the minimum as outlined in section 8.3 of these regulations will be deemed unsuitable for selection. Unsuitable applicants will be notified in writing as outlined in section 12 of these Regulations.

9 STRUCTURED CURRICULUM VITAE

9.1 The Structured Curriculum Vitae (online application form) captures information relevant to the eligibility of the applicant and the administration of the selection process, in addition to information on experience, education, research, publications, presentations, development activities and referees. It also provides the applicant with the opportunity to communicate their interest in Cardiothoracic Surgery.

9.2 No additional information will be accepted under any circumstances once the application is submitted to the RACS.

9.3 Each Structured Curriculum Vitae will be scored by 2 members of the Selection Committee without reference to the opinions of others using a structured scoring system. Where any discrepancy occurs a consensus must be reached. This may include consultation with another Board member to identify the anomaly and determine the correct score.

9.4 The Structured Curriculum Vitae will be scored out of a potential 50 points. The components scored are:

9.4.1 Surgical and Medical Experiences (15 points)
9.4.2 Other Medical Awards & Achievements (10 points)
9.4.3 Leadership or Community Contributions (5 points)
9.4.4 Publications (10 points)
9.4.5 Presentations (10 points)

9.5 Scoring for the surgical and medical experiences apply the following guidelines, up to a maximum score of 15 points:

9.5.1 Terms shorter than 10 weeks are not scored; and
9.5.2 Terms which are not undertaken on a full time basis will be adjusted pro rata.

9.6 Scoring for qualifications apply the following guidelines, up to a maximum of 15 points:

9.6.1 Scoring only includes higher degrees successfully completed at the time of application at a recognised institution as determined by the Board; and
9.6.2 Scoring includes Graduate Diplomas in a surgical or medical field at the discretion of the Board; and
9.6.3 Scoring includes Masters Degrees, PhDs and MDs at the discretion of the Board.

9.7 Scoring for medical and other achievements apply the following guidelines, up to a maximum of 10 points:

9.7.1 Scoring only includes medical and other achievements obtained by the applicant.
9.7.2 Only relevant medals and prizes will be scored. The relevance is at the discretion of the Board.
9.7.3 The following College courses are scored, ASSET, CCrISP, EMST, CLEAR and Statistics for Surgeons.

9.7.4 Other professional development courses will be scored at the discretion of the Board.

9.8 Scoring for leadership or community contributions apply the following guidelines, up to a maximum of 5 points:

9.8.1 Leadership positions and cultural or sporting achievements will be scored according to the level represented (i.e. international, national, state) to a maximum of 2 points.

9.8.2 Significant contributions in the medical or community health fields will be scored at the discretion of the Board and received between 1 – 3 points.

9.9 Scoring for publications apply the following guidelines, up to a maximum of 10 points:

9.9.1 Scoring includes publications accepted for publication in a peer and non-peer reviewed publications and excludes published abstracts; and

9.9.2 Each publication can only be scored once; and

9.9.3 Scoring includes articles and book chapters with extra weighing on articles and book chapters where the applicant is the first author.

9.10 Scoring for presentations apply the following guidelines, up to a maximum of 10 points:

9.10.1 Scoring only includes presentations personally given by the applicant; and

9.10.2 Presentations which have been presented at more than one scientific meeting or conference will only be scored once.

10 STRUCTURED REFEREE REPORTS

10.1 References are collected to obtain information, in confidence, about the history of the applicant, as well as assessments regarding a number of areas such personal attributes, quality of work and suitability for the SET Program.

10.2 The applicant must provide contact details, including a valid email address, for eight (8) consultants to act in the capacity of referee for the purposes of application to the SET Program. Referees must have acted in a supervisory capacity for the applicant within the last five (5) years (1st January 2007 – 5th April 2012). At least one referee must be from the Cardiothoracic rotation and at least one referee must be from the current rotation.

10.3 Consultants holding a diploma from an Australian or New Zealand College are eligible to act as a referee. Consultants who have not been awarded a diploma from an Australian or New Zealand College are eligible to act as a referee only after completing two years of continuous work within the area of their diploma at a recognised Australian or New Zealand institution.

10.4 International Medical Graduates (IMG) under assessment at the time of application can not act as a referee. Time spent working whilst under oversight/supervision due to a period of assessment does not count towards the two year minimum outlined in item 10.3.

10.5 A maximum of three (3) referees can be nominated per rotation.
10.6 If an applicant elects not to provide the details for supervising consultants in accordance with these Regulations, or it is subsequently discovered that the applicant has provided incorrect or misleading information either intentionally or by mistake, including listing supervising consultants who do not strictly comply with these Regulations or omitting supervising consultants in preference for others who have had a lesser supervisory role, the applicant may be automatically withdrawn from the selection process and their application will not be considered further in the selection process.

10.7 The units in which the applicant has worked may be contacted as part of the selection process to verify that the supervising consultants listed on the application form complies with these Regulations. The supervising consultants will also be asked to verify compliance with these Regulations.

10.8 The Board will contact the nominated supervisors requesting them to complete the RACS approved referee report. A minimum of six (6) reports, completed in accordance with item 10.9 of these Regulations, must be returned.

10.9 Referees must complete 18 out of 20 questions or 90% or the referee report in order for it to be deemed valid.

10.10 In the instance where an applicant nominates more than eight (8) consultants the Executive Officer, in consultation with the Board Chair, shall select the referees with consideration given to the type of clinical term, length of clinical term and the period in which the clinical of clinical term was undertaken. Referees will also be selected with consideration given to the following ranking:

1) Cardiothoracic Fellow of the College
2) Fellow of the College
3) Fellow of another College.

10.11 The supervising consultants selected to submit reports in accordance with item 10.10 of these Regulations will be at the discretion of the Board and the names will not be released to applicants.

10.12 Where the Board has not obtained at least six (6) valid reports from supervising consultants identified in accordance with section 10.2 and 10.10 of these Regulations prior to 7th May 2012 or it is established that it is highly unlikely that the Board will obtain a minimum of six (6) valid reports at any stage prior to this date the Board will request in writing details for additional supervising consultants in accordance with the following instructions:

10.12.1 The applicant will be contacted and requested to provide the appropriate number of additional referees.

10.12.2 Should the applicant have nominated more than the requested eight (8) referees and an additional reference be required, the Board shall select an additional referee to provide a referee report. The referee will be selected following the ranking as outlined in item 10.10.

10.13 If, having applied 10.2 and 10.12 a minimum of six (6) valid reports are not received by close of business on 21st May 2011 the applicant will be formally withdrawn from the selection process and their application will not be considered further.

10.14 The Board is responsible for the collection of the reports. Applicants will not be provided with updates on the reports collected or involved in the collection process in any way. All supervising consultants contacted as part of the selection process will be advised of the confidential nature of the reports. Harassment of any kind of any individual involved in the completion or collection of the reports is a serious matter and may result in the applicant’s immediate removal from the selection process. Harassment includes repeated requests by the applicant to any supervising consultant for a copy of the report submitted.
10.15 On the report the supervising consultant will be asked to select one of five options for each of the twenty assessment areas which they believe best describes the applicant. The selection criteria which will be scored within the reports can be generally categorised as follows:

10.15.1 Medical expertise
10.15.2 Technical expertise
10.15.3 Judgement - clinical decision making
10.15.4 Communication
10.15.5 Collaboration
10.15.6 Scholar and teacher
10.15.7 Professionalism

10.16 The options given by the referee will be converted to the associated numeric score by the Board using a predetermined structured scoring system as follows:

10.16.1 The first option is categorised as “unsatisfactory” and scores 0 points;
10.16.2 The second option is categorised as “basic” and scores 2 points;
10.16.3 The third option is categorised as “intermediate” and scores 4 points;
10.16.4 The fourth option is categorised as “advanced” and scores 6 points;
10.16.5 The fifth option is categorised as “expert” and scores 8 points.

10.17 The individual report scores will then be used to calculate a percentage score rounded to two decimal places, calculated by the total score for the report divided by the number of questions the referee has provided a response for. By converting scores to percentages, rounded to two decimal places, no applicant will be disadvantaged if a referee is unable to comment on a specific aspect of the applicants performance.

10.18 If a referee has provided a response for less than 90% of the report, the report will be invalid and will not be used as part of the selection process.

10.19 The total score for the referee report selection tool will be determined by averaging the score of all reports received and rounded to two decimal places.

10.20 The final referee report score cannot be revised.

11 SEMI-STRUCTURED INTERVIEW

11.1 The interview has been designed to assess non-cognitive factors and to obtain information relevant to the suitability of the applicant.

11.2 To receive an interview applicants must achieve a combined score of 90/150 (60%) on the Referee Report and Curriculum Vitae. Applicants who achieve this minimum standard will receive an interview. Offers for interview will be sent via mail and email to the addresses listed in their application form at least ten (10) Business Days prior to the interview date. Applicants who do not satisfy these minimum standards will not be eligible to attend an interview.

11.3 All interviews will be held on Saturday 16th June 2012. Interviews will be conducted in Melbourne. It is the applicant’s responsibility to make the appropriate travel arrangements and to meet any costs incurred in attending the interview. The Board or College accepts no responsibility for any costs incurred by applicants in attending the interview or applicants who fail to satisfy the minimum standards or eligibility who are not permitted to attend an interview.
11.4 Applicants must make themselves available at the scheduled interview time. Applicants who do not present for the interview at the scheduled time will not be considered further in the selection process and their application will be withdrawn.

11.5 Each applicant will be interviewed by four panels. Each panel will be presided over by two (2) members of the selection committee. Each interview will be approximately fifteen (15) minutes in duration. The interview format will consist of four sections and may contain some scenario based questions.

11.6 Prior to the interview applicants will be briefed on the process which will take place and provided with an opportunity to ask any process related questions.

11.7 Applicants will be asked the same initiating questions. The follow-up probing questions will be relevant to the individual applicant to explore the breadth and depth of the applicant’s experience and insight.

11.8 All panels will provide a score on communication and professional conduct during the interview.

11.9 The interview may consist of the following sections:

11.9.1 Interest in Cardiothoracic Surgery
11.9.2 Insight & Self Motivation
11.9.3 Ethical Behaviour
11.9.4 Working Relationships & Collaboration
11.9.5 Stress Response
11.9.6 Performance Initiative
11.9.7 Performance Insight
11.9.8 Risk Management
11.9.9 Communication & Professional Conduct
11.9.10 Research & Publications
11.9.11 Knowledge Acquisition & Recognition

11.10 Each interview panel will provide a consensus score for each of the sections of the interview they ask. The selection panel’s official score sheet will include written findings in relation to any adverse particulars, the applicant’s response and refer to all relevant evidence or other material and the reasons for their assessment.

11.11 The score sheet will be the official record of the interview and will be signed by the Interviewers.

11.12 Final interview scores cannot be revised.

11.13 The methodology for the calculation of the minimum standard was determined by aligning the selection criteria assessed in the interview with the scoring guidelines for the interview and the associated scores to determine the level required to be deemed suitable for selection.

12 FEEDBACK TO UNSUITABLE APPLICANTS

12.1 Applicants who have been deemed unsuitable for selection will not be considered further in the selection process. These applicants will be notified in writing of the following:

12.1.1 That they have been deemed unsuitable for selection and will not be considered further in the selection process.
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12.1.2 Information on the overall percentage adjusted scores for each of the selection tools completed. Information on scores for individual structured referee reports will not be released to applicants.

12.1.3 Notification of the minimum standard or selection process Regulation which they failed to satisfy.

12.1.4 Information on the process available to seek more detailed written feedback. Verbal feedback will not be given.

13 FEEDBACK TO UNSUCCESSFUL APPLICANTS

13.1 Applicants who have been deemed unsuccessful in the selection process will be notified in writing of the following:

13.1.1 That they have been deemed suitable for selection but have not ranked high enough to be offered a position in accordance with the intake and have therefore been unsuccessful.

13.1.2 Information on the overall percentage adjusted scores for each of the selection tools completed. Information on scores for individual structured referee reports will not be released to applicants.

13.1.3 Information on their position in the wait list should a position become available, in accordance with the intake and wait listing process.

13.1.4 Information on the process available to seek more detailed written feedback. Verbal feedback will not be given.

14 FEEDBACK TO SUCCESSFUL APPLICANTS

14.1 Applicants who are deemed successful in the selection process will be notified in writing of the following:

14.1.1 That they have been successful in the selection process and are being offered a position on the SET Program, including conditions associated with the offer, the position details to which the offer is subject to, contact details for the position supervisor and hospital and the applicable entry point (SET1 or SET2).

14.1.2 Information on any applicable recognition of prior learning or additional training conditions which form part of the offer.

14.1.3 Access details to the training website so that they may review the curriculum, Regulations and details pertaining to the SET Program prior to acceptance.

14.1.4 A list of the conditions identified in clause 14.2 of these Regulations.

14.2 Acceptance of the offer to the SET Program will be conditional on the following:

14.2.1 Acceptance to take up the training position identified in the letter of offer. Applicants must be prepared to be assigned to a training position anywhere in Australia or New Zealand throughout their SET Program. Given that the College is not the employing body applicants must also satisfy the employment requirements of the institution in which the allocated training position is located.

14.2.2 Agreement to abide by the SET Program and College Regulations at all times which form part of the contract and acceptance of the conditions on which are likely to affect, or be affected by, dismissal.
14.2.3 Submission of the SET Program Contract, in accordance with instructions given, prior to the communicated offer expiry due date.

14.3 Applicants who do not satisfy any of the conditions outlined in clause 14.2 of these Regulations, or who decline the offer, will automatically forfeit the offer.

15 SELECTION PROCESS REVIEW

15.1 The Board will review the selection process following the conclusion of the interviews.

15.2 The Board will review the selection process on an annual basis and consider feedback from applicants, the selection committee and other stakeholders.

15.3 Long term data will be kept and monitored as part of the review process including completion rates, withdrawal rates, performance levels and dismissal rates.