

Board in General Surgery

Royal Australasian College of Surgeons, New Zealand Association of General Surgeons

Selection Regulations:

2020 New Zealand Selection to Surgical Education and Training in General Surgery for 2021 intake

Last updated: 1 November 2019

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For general instructions and guidelines for selection into the GSET Program, please refer to the **SET: Selection to Surgical Education and Training Policy** located on the [College Website](#).

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1. INTRODUCTION

1.1 Definition and Terminology

- 1.1.1. **Applicant** means a person who has submitted an application for the Surgical Education and Training Program in General Surgery to the Royal Australasian College of Surgeons.
- 1.1.2. **Board** means the Royal Australasian College of Surgeons' New Zealand Board in General Surgery.
- 1.1.3. **Business Days** means Monday to Friday excluding Public Holidays.
- 1.1.4. **College** or **RACS** means the Royal Australasian College of Surgeons.
- 1.1.5. **NZAGS** means New Zealand Association of General Surgeons.
- 1.1.6. **Interview** means the New Zealand Subcommittee of the New Zealand Board in General Surgery semi-structured General Surgery panel interview conducted as part of the selection process.
- 1.1.7. **New Zealand Training Committee** is the New Zealand Subcommittee of the New Zealand Board in General Surgery.
- 1.1.8. **Referee** means a person identified in accordance with these Regulations to evaluate professionally the applicant's performance.
- 1.1.9. **GSET Program** means the General Surgical Education and Training Program as approved by the New Zealand Board in General Surgery.

1.2 Purpose of Regulations

The purpose of these Regulations is 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 (GSET) Program in General Surgery for the 2020 intake in New Zealand. This is a public document.

1.3 Administration and Ownership

- 1.3.1. The College is the body accredited and authorised to conduct surgical education and training in Australia and New Zealand.
- 1.3.2. The New Zealand Board in General Surgery is responsible for the delivery of the Surgical Education and Training Program in General Surgery, the accreditation of hospital posts, and the assessment and supervision of General Surgical Trainees.
- 1.3.3. The New Zealand Board in General Surgery delivers the GSET Program in General Surgery New Zealand.
- 1.3.4. For further information, refer to the New Zealand Board in General Surgery Terms of Reference located on the [College Website](#).

2. REGISTRATION AND APPLICATION

2.1 Registration

- 2.1.1. Applicants wishing to apply to the GSET Program in General Surgery in New Zealand must first submit a completed Registration Form to the College via the College website by the published closing date.
- 2.1.2. Applicants are required to confirm for themselves that they meet the minimum eligibility criteria required by the Board before submitting their completed Registration Form. Only applicants who satisfy the eligibility and application requirements in accordance with College policy will be considered in open competition for selection to the GSET Program in General Surgery.
- 2.1.3. For further information regarding Registration, including fees, please refer to the **SET: Registration for Selection into the Surgical Education and Training (SET) Policy** available on the [College Website](#).
- 2.1.4. Applicants must consent to a full criminal history check including the submission of relevant documentation on request to enable this to be undertaken noting that:

- a. Where consent is not given by the applicant, they will automatically be deemed ineligible for selection and not considered further in the selection process.
 - b. Applicants with a relevant criminal conviction will be deemed unsuitable for selection to the training program. A relevant conviction includes, but is not limited to, a conviction of a sexual nature, a conviction relating to drug usage and/or trafficking, a conviction against liberty, morality and abduction, or a conviction relating to dishonesty, fraud and deception.
 - c. Failure by an applicant to make full and frank disclosure of their criminal history as requested is grounds to automatically deem the applicant unsuitable for selection, unless the matter is a "spent conviction" under the relevant law.
- 2.1.5. Applicants must have current and valid medical registration from the applicable Medical Board or Council at the time of registration. New Zealand applicants must have general scope registration without restriction or general scope registration restricted to general surgery.
- 2.1.6. Applicants must have citizenship or have been granted permanent residency status in New Zealand or Australia at the time of registration.

2.2 Submitting an Application

- 2.2.1. Applications can only be submitted via the NZAGS online application system at www.nzags.co.nz by the due date. No other form of application will be accepted and no extensions will be granted. It is the applicant's responsibility to ensure that they allow enough time to complete the application. This includes completion of the Procedural Skills and Professional Capabilities Form available with the application form on the NZAGS website.
- 2.2.2. Separate applications must be made for the SET Program in General Surgery in New Zealand and the SET Program in General Surgery in Australia. Applicants can not apply for both programs.
- 2.2.3. Applicants must pay the application fee before their application can be considered. Applicants who have not paid the application fee within 10 working days of the invoice will be deemed ineligible for consideration for the current year of Selection.

2.3 Eligibility Requirements –Clinical Rotations

2.3.1 Applicants must note the following General Surgery specific eligibility requirement:

Rotation Type	Minimum Duration	Validity Period	Completed By
<u>General Surgery</u> 26 weeks consecutive from 1 surgical term	1 x 26 week	2 years, extended up to 4 years by a period of full-time study in a medically related discipline, or parental care.	By December 2019
<u>Surgery in critical care</u> (refer to 2.3.4 for Definition of a Critical Care Term)	1 X 12 week		By the end of 2019

- 2.3.2. Surgery in Critical Care rotations must be of a minimum of twelve (12) continuous weeks in duration on the one unit.
- 2.3.3. The validity period will only consider terms undertaken in the last two (2) years except where 2.3.4. applies.
- 2.3.4. Where the applicant has been undertaking full-time research towards a higher degree in a medically related discipline in the two or more consecutive years prior to the application year, scoring and eligibility will consider the last two (2) clinical years prior to entering research. Where the applicant has been on parental leave for at least one year during

the two years prior to the application year, eligibility and scoring will consider the last two clinical years.

2.3.5. A Surgery in Critical Care term is defined as one of the following:

- a. Trauma Unit
- b. ICU
- c. HDU
- d. ED
- e. Cardiothoracic Unit
- f. Vascular Unit
- g. Burns Unit
- h. Anaesthetic Unit
- i. Transplant/HPB
- j. Colorectal Unit

2.3.6. Surgical Terms cannot be considered for more than one eligibility requirement. Applicants will need to stipulate if the term is to be considered as general surgery or critical care.

2.3.7. Applicants must provide proof of past and future rotations in the form of a letter of confirmation from the hospital. A contract will not suffice as documentation.

2.3.8. Documentation not provided on letterhead or signed will not be accepted and the rotation will be discounted.

2.4 Eligibility Requirements - Procedural Skills and Professional Capabilities

2.4.1 Applicants must submit the completed Procedural Skills and Professional Capabilities Form available on the Selection section of the NZAGS website, with each procedural skill and professional capability listed verified by the consultant supervising the rotation(s).

2.4.2 Each Procedural Skill and Professional Capability listed must be verified by the consultant surgeon supervising the rotation(s). A consultant is defined as one of the following:

- a. Fellow of the Royal Australasian College of Surgeons employed as a specialist surgeon; or
- b. A vocationally trained surgeon employed as a specialist surgeon

2.4.3 Each procedure must be verified during rotations taken between 1 December 2017 and the closing date of applications except where 2.3.4 applies.

2.4.4 Applicants who do not have each procedural skill and professional capability verified by a suitable consultant will be deemed ineligible and will not proceed in the selection process.

2.5 Eligibility Requirements – Generic Surgical Sciences Examination

2.5.1 Applicants must have successfully completed the Royal Australasian College of Surgeons Generic Surgical Sciences Examination (GSSE) prior to the Specialty application closing date.

3. SELECTION PROCESS OVERVIEW

3.1 Overview

3.1.1. Applicants who satisfy the eligibility and application requirements in accordance with College policy and these Regulations will be considered in open competition for selection to the SET Program in General Surgery.

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

- a. **Unsuccessful** being an eligible applicant suitable for selection but who did not rank highly enough in comparison to the intake to be made an offer.
- b. **Successful** being an eligible applicant suitable for selection and who has ranked highly enough in comparison to the intake to be made an offer.

3.2 Ranking

- 3.2.1. Applicants suitable for selection 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 (3) selection tools, providing an overall percentage score:
- Structured Curriculum Vitae 25%
 - Structured Referee Reports 35%
 - Semi-Structured General Surgery Panel Interviews 40%

3.3 Offers

- 3.3.1. The minimum score required for Selection is 70.
- 3.3.2. It is expected that due to attrition and requests for interruption / deferral, there will be several rounds of offers to the SET Program in General Surgery.
- 3.3.3. Applicants who do not rank highly enough to receive a first-round offer to the SET Program in General Surgery, will still be considered eligible for subsequent rounds of offers made by the New Zealand Training Committee.
- 3.3.4. Applicants who do not wish to receive a later round offer to the SET Program in General Surgery must advise the New Zealand Training Committee by the stipulated deadline.
- 3.3.5. Once an offer has been accepted, the New Zealand Training Committee will allocate the successful applicant to a Training Rotation according to the following guidelines:
- Allocation will be based on preference and the number of available positions.
 - While every effort will be made to match applicants to their preference, due to the number of posts available this will not always be possible and new trainees are required to accept the rotation allocated to them.
 - In the interests of fairness, allocations to posts may not be made until several rounds of offers have been finalised.
- 3.3.6. Applicants who do not rank highly enough to receive an offer by the final round will be considered **unsuccessful**. Unsuccessful applicants will be notified in writing as outlined in section 7.2 of these Regulations.

4. STRUCTURED CURRICULUM VITAE – ONLINE APPLICATION

4.1 Overview and Purpose

- 4.1.1. The online application form captures information relevant to the eligibility of the applicant, the administration of the selection process, and referees. In addition, it includes the Structured Curriculum Vitae which collects information on experience, education, research, publications, presentations, development activities and referee names and contact details.

4.2 Scoring

- 4.2.1. Each Structured Curriculum Vitae will be scored by three (3) people nominated by the New Zealand Training Committee without reference to the opinions of others using a structured scoring system. Where any discrepancy between any pair of scores occurs provided by the three (3) scorers, the Chair of the New Zealand Training Committee (or his / her delegate) will score the Structured Curriculum Vitae to identify the anomaly and determine the correct score.
- 4.2.2. The Structured Curriculum Vitae has a maximum of 25 points. The components scored are:
- Surgical and Medical Experience (Maximum 7 points)
 - Qualifications/Regional/Rural Exposure (Maximum 3 points for Qualifications and 2 points for Regional/Rural Exposure)
 - Presentations and Publications (Maximum 7 points)
 - Courses (Maximum 2 points)

- e. Prizes/Awards for Excellence (Maximum 2 points)
- f. Leadership/Community Contribution (Maximum 1 point)
- g. Scholar and Teacher (Maximum 3 points)

4.3 Surgical and Medical Experience

- 4.3.1. Scoring will only consider terms undertaken in the last two (2) years, except where 4.3.2 applies.
- 4.3.2. Where the applicant has been undertaking full time research towards a higher degree in a medically related discipline in the two or more consecutive years prior to the application year, scoring will consider terms undertaken in the last two clinical years prior to entering research. Where the applicant has been on parental leave for at least one year during the two years prior to the application year, scoring will consider the last two clinical years.
- 4.3.3. Terms in surgery of less than twelve (12) consecutive weeks will not be scored.
- 4.3.4. Medical terms not of a surgical nature will not be scored.
- 4.3.5. Applicants must provide proof of rotations in the form of a letter of confirmation from the hospital. A contract or roster will not suffice as documentation. Entries where adequate documentation is not provided will not be scored.

4.4 Qualifications/Regional/Rural Exposure

- 4.4.1. Scoring only includes higher degrees successfully completed at the time of application at a recognised institution as determined by the Board. Scoring includes:
 - a. Masters degree/s in a medically related area
 - b. PhD in a surgically related area
- 4.4.2. Higher degrees must be awarded by the time of application to be considered and not be awaiting marking.
- 4.4.3. Scoring does not include primary medical qualifications including the MBChB / MBBS or overseas equivalent, other Bachelor degrees, diplomas, graduate diplomas (including the Graduate Diploma in Anatomy) or certificates.
- 4.4.4. Scoring does not include completion of the RACS Basic Surgical Examination (completed prior to February 2008) Surgical Science (Generic or Specific) or Clinical Examinations.
- 4.4.6. Scoring does not include the MRCS qualification.
- 4.4.7. Documentary evidence of completion must be provided at the time of application. Entries where adequate documentation is not provided will not be scored.
- 4.4.8. Regional Exposure is defined as a General Surgical term at one of the following hospitals – Whangarei, Tauranga, Rotorua, New Plymouth, Hawkes Bay, Palmerston North, Nelson. Applicants will receive 1 point for a full year at one of these centres. A maximum of 1 point will be scored for this work. A term that includes some urology or plastics will also be accepted.
- 4.4.9. Rural Exposure is defined as a General Surgical term at one of the following hospitals – Whakatane, Thames, Gisborne, Whanganui, Masterton, Blenheim, Greymouth, Timaru, Invercargill. Applicants will receive 2 points for a full year and 1 point for six months at one of these centres. A term that includes some urology or plastics will also be accepted.
- 4.4.10. The maximum number of points allocated for regional and/or rural exposure as in 4.4.9 is 2. Rotations undertaken in the previous 3 years will be considered.
- 4.4.11. Applicants must provide proof of rotations in the form of a letter of confirmation from the hospital. A contract or roster will not suffice as documentation. Entries where adequate documentation is not provided will not be scored.
- 4.4.12. Senior House Officer and House Officer posts will be eligible for a maximum of 1 point for work in Rural Hospitals as listed in 4.4.9.

- 4.4.13 House Officer terms will be counted as a minimum term of 3 months, with two three month runs required for one point. Senior House Officer terms and Registrar terms will be counted in 26-week blocks.
- 4.4.14 The total number of points that can be awarded for Regional/Rural Exposure is 2. The total number of points that can be awarded for Qualifications is 3 and the points can be combined for a total of three.

4.5 Presentations and Publications

- 4.5.1. Scoring will consider presentations or publications undertaken in the past five (5) years.
- 4.5.2. Presentations and publications must be complete, that is presented or published, at the time of application closing date. Prospective presentations and publications will not be scored.
- 4.5.3. Scoring only includes presentations relevant to surgery.
- 4.5.4. Scoring only includes presentations personally given by the applicant.
- 4.5.5. Scoring only includes presentations at scientific meetings or conferences subject to abstract selection. Hospital based presentations will not be scored.
- 4.5.6. Poster presentations will be scored only once where the applicant is the first author and the named presenter in the meeting programme.
- 4.5.7. Presentations that have sufficiently similar topics or that have been presented at more than one scientific meeting or conference will be scored only once.
- 4.5.8. Presentations will be scored depending on national, local or international level.
- 4.5.9. Scoring only includes publications relevant to surgery.
- 4.5.10. Scoring only includes publications in a peer reviewed publication including internet journals, and excludes published abstracts.
- 4.5.11. Scoring excludes letters to editors and media releases.
- 4.5.12. Each publication can be scored only once.
- 4.5.13. Scoring includes case reports, articles and book chapters with extra weighting on articles and book chapters where the applicant is the first author.
- 4.5.14. A maximum of one (1) non general surgery or non basic surgical sciences presentations and/or publications will be scored. Further non general surgery or non basic surgical sciences presentations and/or publications will not be taken into consideration.
- 4.5.15. Documentary evidence of acceptance for publication and/or proof of presentation must be provided at the time of application. Entries where adequate documentation is not provided will not be scored.
- 4.5.16. The applicant must demonstrate how the publication or presentation is relevant to general surgery or to the basic surgical sciences.
- 4.5.17. Acceptable evidence does not include a letter from the supervisor.
- 4.5.18. Acceptable documentary evidence of presentations includes official meeting programme or letter from convenor or conference organiser.
- 4.5.19. Acceptable documentary evidence of publication includes copy of publication or official letter from the editor clearly stating publication date.

4.6 Courses

- 4.6.1. Scoring will consider courses undertaken in the past five (5) years.
- 4.6.2. Courses must be complete at the time of application closing date and must be accompanied by documentation as evidence of attendance / completion.
- 4.6.3. Courses must be delivered by a recognised training provider as determined by the Board.
- 4.6.4. Attendance at workshops, seminars and conferences will not be scored.

- 4.6.5. Scoring includes those related to professional development in clinical and technical competencies and does not include ASSET, CCrISP, EMST, CLEAR and Statistics for Surgeons.
- 4.6.6. Scoring excludes professional development skills courses that are less than seven (7) hours in duration.
- 4.6.7. Scoring does not include hospital-based courses or meetings, Morbidity and Mortality meetings, Basic Life Support courses, Intermediate Life Support courses, Postgraduate course in Anatomy and Primary Health Care courses.
- 4.6.8. Scoring includes courses related to the development of professional competencies such as communication, teamwork and leadership.
- 4.6.9. Certificate of attendance must be provided as documentary evidence. Entries where adequate documentation is not provided will not be scored.

4.7 Prizes and Awards

- 4.7.1. Scoring only includes prizes or awards for excellence in a medically related field, including prizes for presentations.
- 4.7.2. Scoring does not include Honors, Deans Honor Roll, Distinctions, CME points, honorary mentions, Letters of Appreciation, commendation and special mentions.
- 4.7.3. Scholarships will not be scored.
- 4.7.4. Documentary evidence of award or prize must be provided at the time of application. Entries where adequate documentation is not provided will not be scored.

4.8 Leadership/Community Contribution

- 4.8.1. Applicants may score for an elected or appointed position of responsibility on a board, committee or other appropriate body in a community service or professional organisation, as determined by the Board.
- 4.8.2. Applicants may score for community and cultural involvement or sporting activities as determined by the Board.
- 4.8.3. Sporting achievements only include those where the applicant has represented at a national or international level.
- 4.8.4. Applicants may score for volunteer work undertaken on a continual basis. One off volunteer activities will not be scored.
- 4.8.5. Scoring does not include providing monetary donations or other types of donations.
- 4.8.6. Evidence of involvement from the relevant institution must be supplied.
- 4.8.7. Entries for which documentation cannot verify the activities and time commitment will not be scored.
- 4.8.8. Scoring only includes activities undertaken in the last ten years.
- 4.8.9. Leadership in cultural groups and events, fluency or extended knowledge in Te Reo Māori and Te Ao Māori will be considered.
- 4.8.10. For leadership as per 4.8.9 a personal statement of no more than 100 words must be provided outlining any significant leadership. Evidence must be included of any voluntary, community work, language level spoken, or leadership role including name of the organisation, the role title, when started and expected completion date, as appropriate.

4.9 Scholar and Teacher

- 4.9.1. Applicants may score for involvement in continued teaching and/or administration of teaching.
- 4.9.2. Scoring only includes teaching relevant to the medical field.
- 4.9.3. Scoring only includes teaching that occurred for a period of six (6) continuous months or more by the time of application.

- 4.9.4. Scoring does not include undertaking presentations at seminars, workshops or hospital meetings including ward rounds and Mortality and Morbidity meetings.
- 4.9.5. Scoring does not include teaching of medical students or interns as part of a normal medical employment.
- 4.9.6. Evidence of involvement including timeframe and hours worked per week from the relevant institution must be supplied.
- 4.9.7. Entries for which documentation cannot verify the activities and time commitment, including dates and hours per week, will not be scored.
- 4.9.8. Scoring only includes teaching undertaken in the last three years.
- 4.10. Points awarded – 1 point for 2-3 hours per week, 2 points for 4-6 hours per week and 3 points for 7 or more hours per week.

5. STRUCTURED REFEREE REPORTS

5.1 Overview and Purpose

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

5.2 Process

- 5.2.1. The applicant must provide the names of supervising consultants (up to a maximum of three (3) consultants per rotation) who had the greatest period of supervision over the applicant for each rotation undertaken in the two (2) clinical years prior to the closing date for applications.
- 5.2.2. Applicants who have been undertaking a period of full-time study in a medically related discipline within the previous two years may extend that period by the period of the full-time study, up to a maximum of four (4) years. Where the applicant has been on parental leave for at least one year during the two years prior to the application year, that period of eligibility of referee reports may be extended for the period of parental leave taken.
- 5.2.3. Applicants must confirm that the nominated consultants have agreed to act as a referee.
- 5.2.4. If an applicant elects not to provide the details for supervising consultants as stipulated by these Regulations, or it is subsequently discovered that the applicant has provided incorrect or misleading information either intentionally or unintentionally, 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.
- 5.2.5. 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 comply with these Regulations. The supervising consultants will also be asked to verify compliance with these Regulations.
- 5.2.6. The New Zealand Training Committee will select at its discretion five (5) primary supervising consultants from the referees named to be contacted as part of the selection process. In selecting supervising consultants, the New Zealand Training Committee will endeavour to obtain **at least** one (1) report from each General Surgery term (where applicable) and the remaining from other terms with consideration given to the duration and type of term.
- 5.2.7. The remaining nominated consultants will be considered alternative referees. Reports completed by alternate supervising consultants will only be used as part of the selection process if one (1) or more of the supervising consultant reports identified in Section 5.2.6. is not received by the final submission date or if a report is deemed invalid (as in clause 5.4.3.). The alternate supervising consultant reports, where required, will be used in order of their submission date.
- 5.2.8. The selected referee names **will not** be released to the applicants.

5.3 Assessment Areas

- 5.3.1 On the report the supervising consultant will be asked to select one (1) of five (5) options for each of the sixteen (16) assessment areas that they believe best describes the applicant. The selection criteria that will be scored within the reports can be generally categorised as follows:
- Medical and Technical Expertise
 - Judgement/Clinical Decision Making
 - Communication
 - Collaboration
 - Scholar and Teacher
 - Professionalism

5.4 Scoring

- 5.4.1. The individual report scores will be converted to a percentage score rounded to two decimal places, calculated by dividing the total score for the report by the total number of questions for which the referee has provided a response.
- 5.4.2. If the referee has provided a response for less than 77% of the report, the report will be deemed invalid and will not be used as part of the selection process. In these circumstances an alternate report will be sought (as in Section 5.2.7).
- 5.4.3. The percentage scores for the five (5) individual reports will be added to provide an overall percentage score, rounded to two decimal places, for the Structured Referee Report selection tool.

5.5 Eligibility to Proceed to Interview

- 5.5.1. If, having applied clause 5.2, the New Zealand Training Committee has not obtained five (5) valid reports prior to the final submission date determined by the New Zealand Training Committee, the applicant will be **formally withdrawn from the selection process and their application will not be considered further**.
- 5.5.2. The New Zealand Training Committee is responsible for contacting referees to request reports. Applicants will not be provided with updates on the reports collected; nor will they be 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 being deemed **unsuitable** for selection and removed from the selection process. Harassment includes repeated requests by the applicant to any supervising consultant for a copy of the report submitted.
- 5.5.3. Applicants **must** score a combined total weighted score from the CV and Referee Reports of 38 or above to be eligible to proceed to the interview stage.

6. INTERVIEWS

6.1 Overview and Purpose

- 6.1.1. The interview has been designed to:
- Identify factors deemed important to the practice of General Surgery.
 - Address the RACS competencies.
 - Assess the suitability of the applicant for training.
- 6.1.2. The interview seeks information on a variety of attributes including:
- The ability to interact effectively and cordially with peers, mentors, members of the health care team, hospital administrators, patients and their families.

- b. The ability to contribute effectively as a member of the health care team.
- c. The ability to act ethically, responsibly and with honesty.
- d. The capacity to care, demonstrate concern and sensitivity to the needs of others.
- e. Effective oral communication.
- f. The ability to assimilate and organise information and to adapt accordingly.
- g. The ability to present concisely within a time frame.
- h. The applicant's commitment to a career in General Surgery.
- i. The ability to recognise and respond appropriately to cultural and/or ethical issues.
- j. The ability to promote health maintenance and respond to the health needs of the community, patients, colleagues and self.

6.2. Notification of Interview

- 6.2.1. Applicants will be notified of the date, time and location of the interview at least ten (10) business days prior.
- 6.2.2. It is the applicant's responsibility to make the appropriate travel arrangements and to meet any costs incurred in attending the interview. The New Zealand Training Committee accepts no responsibility for any costs incurred by applicants in attending the interview or applicants who fail to satisfy the minimum eligibility requirements who are not permitted to attend an interview.
- 6.2.3. Interviews will be held in Wellington.
- 6.2.4. Applicants are required to provide proof of identification at the interview.
- 6.2.5. Interview date(s) will be published on the NZAGS and College websites.
- 6.2.6. Applicants must make themselves available at the scheduled interview time and must attend the interview in person. 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.
- 6.2.7. Applicants will be provided with a brief on the structure of the interview at the time of notification.

6.3 Conduct

- 6.3.1. The interviews will be conducted by a series of four (4) interview panels comprised of two (2) to three (3) members of the selection committee. Each panel will conduct a designated section of the interview for all applicants, with applicants rotating between panels.
- 6.3.2. Applicants will spend approximately 10 minutes with each panel.
- 6.3.3. The semi structured interview will be approximately 50 minutes in total duration.
- 6.3.4. During the semi-structured interview process, applicants will be asked initiating questions by each panel, with follow-up probing questions to explore the breadth and depth of the applicants experience and insight in relation to each selection criterion, particularly as they relate to the nine (9) RACS competencies.

6.4 Composition of Interview Panels

- 6.4.1. The Interview Panel has been designed to ensure a representative balance of male, female, experienced and novice interviewers.
- 6.4.2. The Interview Panel will comprise the members of the New Zealand Training Committee i.e. the Hospital Supervisors in every training hospital in New Zealand, or their approved proxy. An observer may be present at the interviews but their role is to witness and not participate.

6.5 Scoring

- 6.5.1. Applicants will be scored using a structured scoring system and criterion statements relating to topics outlined in Section 6.3.4
- 6.5.2. Each question will be accompanied by a criterion answer.
- 6.5.3. Each panel member will score each applicant individually on a specific form with a consensus score for the interview panel to be arrived at following the interview. The score for each panel will be out of ten (10). The consensus score will be used in the final ranking of suitable applicants.
- 6.5.4. Applicants will be scored using the following structured scoring system and criteria:
 - a. Unsatisfactory (0-2 points): The applicant failed to articulate appropriate responses and did not cover any of the key points related to the scoring criteria and did not demonstrate the potential for appropriate knowledge, skills or abilities **and/or** did not demonstrate some of the personal qualities and behaviours sought.
 - b. Basic (3-4 points): The applicant articulated appropriate responses covering some of the key points related to the scoring criteria and demonstrated the potential for suitable knowledge, skills and abilities with further experience **and** demonstrated the personal qualities and behaviours sought.
 - c. Intermediate (5-6 points): The applicant articulated appropriate responses covering the key points related to the scoring criteria and demonstrated appropriate knowledge, skills and abilities **and** the personal qualities and behaviours sought.
 - d. Advanced (7-8 points): The applicant articulated good responses covering all the key points related to the scoring criteria and demonstrated good knowledge, skills and abilities **and** the personal qualities and behaviours sought.
 - e. Expert (9-10 points): The applicant articulated excellent responses covering all the key points related to the scoring criteria and demonstrated exceptional knowledge, skills and abilities **and** the personal qualities and behaviours sought.

6.6 Pilot of new selection tools

To improve the quality and efficacy of selection into surgical training, RACS conducts research and evaluates the performance of selection instruments and processes. Research and evaluation may include 'pilot' implementation of selection instruments or processes to study their utility in the RACS context. Applicants to SET may be invited to participate in selection research or evaluation.

- 6.6.1. Applicants may be asked to participate in a pilot for additional selection tools during the selection process.
- 6.6.2. Where a selection tool is being piloted, this will be made very clear to the candidate.
- 6.6.3. Candidates are not obliged to participate in any selection tool pilot.
- 6.6.4. Outcomes from any pilot use of selection tool(s) will not be used in determining the result or outcome of selection in the year(s) of trial.
- 6.6.5. Results of any pilot process may be used to inform the New Zealand Committee regarding the tool's validity, reliability, feasibility and acceptability to candidates and other participants.
- 6.6.6. The scores and rank for any piloted tool will not be provided to candidates.
- 6.6.7. Results of research evaluating the efficacy of pilot selection processes and tools may be promulgated at conferences or included in journal articles submitted for publication. Such research must comply with HREC requirements and respect the privacy of the participants.
- 6.6.8. Information regarding a change to selection processes or selection tools will be published at least 6 months prior to the introduction of the new selection process or tool.

7. FEEDBACK

7.1 Unsuitable Applicants

7.1.1. 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:

- a. That they have been deemed unsuitable for selection and will not be considered further in the selection process.
- b. Information on the overall scores and ranking they received for each of the selection tools completed.
- c. Notification of the eligibility requirements or selection process Regulation that they failed to satisfy.

7.2 Unsuccessful Applicants

7.2.1. Applicants who have been deemed unsuccessful will be notified in writing of the following:

- a. That they have been deemed suitable for selection but have not ranked highly enough to be made an offer in accordance with the intake and have therefore been unsuccessful.
- b. Information on the overall scores and ranking they received for each of the selection tools completed, following final rounds of offer have occurred. Should they desire further feedback, they may discuss the information on their overall scores for each of the selection tools with their supervisors.
- c. Information on the waiting list process.

7.3 Successful Applicants

7.3.1. Applicants who have been deemed successful in the selection process will be notified in writing via email of the following:

- a. That they have been successful in the selection process and are being offered a position on the SET Program in General Surgery subject to the conditions outlined in Section 7.3.4.
- b. Information on the process for allocation to a training post.
- c. The due date by which their Offer Form must be returned.

7.3.2. Applicants will not be notified of their overall ranking.

7.3.3. The Offer Form has three (3) options – accept, decline or pending

- a. Accept – the applicant accepts the offer of a position on the General Surgery program
- b. Decline – the applicant declines the offer of a position on the General Surgery program
- c. Pending – the applicant wishes to await the outcome of an application to any other surgical training program before deciding on the General Surgery offer.
- d. An applicant who selects “Pending” must advise the New Zealand Training Committee whether s/he accepts or declines the General Surgery offer by the date stipulated on the Offer Form.

7.3.4. Acceptance of the offer to the SET Program in General Surgery will be conditional on the following:

- a. The applicant having the appropriate medical registration in New Zealand.
- b. The applicant being employed by the relevant District Health Board.
- c. The information submitted in the application form being true and correct.
- d. Satisfactory completion of all minimum eligibility criteria before the start of the training year in New Zealand.
- e. Provision of any outstanding documentation required by the Board.

f. Provision of a signed "Training Agreement".

g. Payment of all monies owed to the College.

7.3.5 Applicants who fail to satisfy any of the conditions outlined in Section 7.3.4. will automatically forfeit the offer.

7.3.6. Applicants who fail to return the acceptance of offer form by the stipulated deadline, or who decline the offer, will automatically forfeit the offer.

7.3.7. Applicants who accept a position on the General Surgery program will be allocated to a training post.

7.4 Deferral

7.4.1. Applicants who wish to defer the commencement of their General Surgical Education and Training must lodge a request to the New Zealand Training Committee at the time of acceptance using the following procedure:

a. Complete the required section on the Acceptance Form.

b. The request will be considered by the New Zealand Board in General Surgery for final decision.

7.4.2. All applications for deferral or interruption are governed by the SET: Trainee Registration and Variation Policy available on the College website at Policies and Procedures. The Board does not have the authority to grant requests that do not comply with RACS Policy.

7.4.3 For applicants to the SET program, requests for deferral must be submitted at the time of acceptance of offer. Requests submitted after this time will only be considered in exceptional circumstances.

7.4.4 The standard period of deferral will be 12 months (one year). In exceptional circumstance, the Board may approve a variation to the standard period of deferral. Approval will only be given where it can be demonstrated that the varied period will not result in another applicant being prohibited from commencing training, and that any resulting vacancy is supported by the training hospital.

7.4.5 Where an extended period of deferral is granted, that is time in excess of one (1) year, the maximum time period of completion will be reduced by the extra time granted for deferral.

7.4. 6 The New Zealand Board in General Surgery does not have the authority to alter College Policy, or approve non-compliant requests.

7.4. 7 Deferrals will not be granted within three (3) months prior to the start of the training year due to logistical considerations.