1. **INTRODUCTION**

1.1. **Definition of terms for the purpose of these Regulations**

1.1.1. **OHNS** refers to the surgical specialty of Otolaryngology, Head and Neck Surgery.

1.1.2. **Applicant** means a person who has applied for the Surgical Education and Training (SET) Program in Otolaryngology, Head and Neck Surgery of the Royal Australasian College of Surgeons (RACS).

1.1.3. **Board** means the RACS Board of Otolaryngology Head, and Neck Surgery (Board of OHNS).

1.1.4. **Working Days** means Monday to Friday excluding Public Holidays.

1.1.5. **ASOHNS** means the Australian Society of Otolaryngology, Head and Neck Surgery.

1.1.6. **NZSOHNS** means the New Zealand Society of Otolaryngology, Head and Neck Surgery.

1.1.7. **College** or **RACS** means the Royal Australasian College of Surgeons.

1.1.8. **SET Program** means the Surgical Education and Training program in OHNS as approved by the Board of OHNS.

1.1.9. **Training Hospital** means an accredited Hospital in New Zealand where a trainee is allocated for a portion of their training.

1.2. **Purpose of these Regulations**

These Regulations describe the principles, terms and conditions of the selection process for the Royal Australasian College of Surgeons (SET) Program in Otolaryngology Head and Neck Surgery for the 2017 intake. This document is a public document.

1.3. **Administration and Ownership**

The College is the principal organisation accredited to conduct surgical education and training in Australia and New Zealand. The ASOHNS undertakes the development, delivery and administration of the SET Program as an agent of the College. The Board of OHNS is responsible for communicating with the College, ASOHNS and NZSOHNS regarding training and education. The Training, Education and Accreditation Committee of the NZSOHNS is responsible for the SET Program in New Zealand. This committee reports directly to the Board of OHNS.

1.4. **Objective of the SET Program**

The overall objective of the SET Program is to produce competent independent specialist 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

2.1.1. 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.

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

2.1.3. The selection process will be subject to ongoing review to ensure its continued validity and objectiveness.

2.1.4. The SET Program will be widely advertised to eligible applicants.

2.1.5. The selection process will conform to the requirements agreed by the College Board of Surgical Education and Training (BSET) and will meet the College’s generic eligibility requirements.

2.1.6. The number of trainees selected in any year will depend on the number of accredited hospital training posts available in the following year.
3. GENERIC ELIGIBILITY FOR APPLICATION TO THE SET PROGRAM IN OHNS

To apply to the SET Program in OHNS, applicants must adhere to the College’s Registration for Selection into SET and Selection to Surgical Education and Training policies and:

3.1.1. Have registered for application with the College by 4 February 2016.

3.1.2. Have satisfactorily completed the internship/house surgeon year and be in postgraduate year two (PGY2) or later.

3.1.3. Have current and valid medical registration from the applicable Medical Board or Council in Australia or New Zealand at the time of application. All Australian applicants must have general (unconditional) registration at the time of submitting their registration. New Zealand applicants must have general scope registration.

3.1.4. Have permanent residency status or have been granted citizenship at the time of registration for selection in Australia or New Zealand.


3.1.6. 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.

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.
4. **OHNS SPECIFIC ELIGIBILITY REQUIREMENTS FOR APPLICATION**

4.1. **Eligibility Assessment**

4.1.1. A current SET Trainee is defined as being registered with the College as a trainee.

4.1.2. Full-time research is defined as two (2) or more years research and study towards a higher degree (Masters by research or PhD).

4.1.3. Eligibility timeframes may be extended to account for parental leave upon receipt of verifying documentation from the employer.

4.1.4. Minimum eligibility requirements for ICU and surgery in general will be taken from terms completed in the first instance. If the minimum eligibility cannot be met with completed terms, future ICU and surgery in general terms will be used.

a. If future terms are used to meet minimum eligibility and the applicant is successful in being made an offer, evidence must be provided upon completion of each requirement. Requirements must be completed by the 31 December 2016 without exception.

4.1.5. Documentary evidence must be provided at the time of application for each requirement listed above. No late documentation will be accepted.

4.1.6. Applications must be submitted via the College online application system at www.surgeons.org. Applications will close on **1 April 2016** (12:00pm AEDT).

a. By submitting an application, applicants certify that the information provided is correct and in accordance with these Regulations. If it is discovered that the applicant has provided incorrect or misleading information the applicant may be withdrawn from the selection process and their application will not be considered further. This may occur at any stage during the selection process. If incorrect or misleading information of a serious nature is discovered, the applicant may be contacted and asked to submit a written explanation to the Board within 10 working days.

b. Misleading or incorrect information can include but is not limited to:
   - Prior attendance at examinations or courses without a pass/certified completion of all assessments
   - past rotations allocated but not completed (with the exception of future rotations)

4.1.7. The Board may verify the information provided within the application with external institutions or individuals and by submitting an application the applicant is consenting to the collection, use, disclosure and storage of the information by the Board or its agent.

4.1.8. Applicants who do not meet generic eligibility requirements and specific Otolaryngology, Head and Neck Surgery eligibility requirements will not progress to the next stage of selection and will be advised accordingly.

4.2. **Applicants who are not current SET trainees, or not in fulltime research, must complete:**

4.2.1. A minimum of 20 consecutive weeks in an Otolaryngology, Head and Neck Unit completed since 1 January 2013 and before the close of applications.

a. The unit must be staffed by Consultants with Vocational Registration in OHNS.

b. The supervisor must be one of the nominated referees on the application form.

4.2.2. A minimum of 20 weeks of surgical experience. This is in addition to the 20 weeks of OHNS experience and must have been completed since 1
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January 2013 and before 31 December 2016. This experience can be obtained by using multiple rotations, however:

a. Rotations must be at least 10 continuous weeks to be included.
b. Surgical rotations are defined as one of the nine specialties of the Royal Australasian College of Surgeons.
c. Surgical night rotations will not be eligible.
d. Surgical relief rotations will not be eligible unless at least 10 weeks is spent in one unit.

4.2.3. Minimum 8 consecutive weeks in a dedicated Emergency Department completed since beginning of intern year and before date of application.

4.2.4. Minimum 8 consecutive weeks in a dedicated Intensive Care Unit or High Dependency Unit in the five (5) years prior to application. The ICU/HDU experience may be obtained as part of a surgical rotation that regularly has patients in these settings e.g. Neurosurgery or Cardiothoracic surgery. All applicants must submit a letter from the Clinical Director of the ICU/HDU outlining the duties performed during that rotation. It is expected that applicants will have had significant ‘Hands on’ Clinical duties in this unit rather than being attached as an observer or performing mainly clerical duties.

4.3. Current SET trainees must complete:

4.3.1. A minimum of 20 consecutive weeks in an Otolaryngology, Head and Neck Unit completed in the two years prior to first application to SET

a. The unit must be staffed by Consultants with Vocational Registration in OHNS.
b. The supervisor must be one of the nominated referees on the application form.

4.3.2. A minimum 20 weeks of surgical experience. This is in addition to the 20 weeks of OHNS experience and must have been completed since 1 January 2013 and before 31 December 2016. This experience can be obtained by using multiple rotations, however:

a. Rotations must be at least 10 continuous weeks to be included.
b. Surgical rotations are defined as one of the nine specialties of the Royal Australasian College of Surgeons.
c. Surgical night rotations will not be eligible.
d. Surgical relief rotations will not be eligible unless at least 10 weeks is spent in one unit.

4.3.3. Current SET trainees will be exempt from the Emergency Department and Intensive Care Unit rotations

4.4. Applicants in full-time research for a Higher Degree must complete:

4.4.1. A minimum of 20 consecutive weeks in an Otolaryngology, Head and Neck Unit completed in the Three (3) years prior to commencing full-time research and before the close of applications.

a. Part-time rotations undertaken during the research period may be considered and will be calculated pro-rata. Evidence of hours worked per month must be provided.
b. The unit must be staffed by Consultants with Vocational Registration in OHNS.
c. The supervisor must be one of the nominated referees on the application form.
4.4.2. A minimum 20 weeks of surgical experience. This is in addition to the 20 weeks of OHNS experience and must have been completed in the three (3) years prior to commencing full-time research and before 31 December 2016. This experience can be obtained by using multiple rotations, however:

a. Rotations must be at least 10 continuous weeks to be included.
b. Surgical rotations are defined as one of the nine specialties of the Royal Australasian College of Surgeons.
c. Surgical night rotations will not be eligible.
d. Surgical relief rotations will not be eligible unless at least 10 weeks is spent in one unit.
e. Rotations can be on an ongoing and part-time basis and will be calculated pro-rata with documentary evidence of hours worked per month/in total.

4.4.3. Minimum 8 consecutive weeks in a dedicated Emergency Department completed since beginning of intern year and before date of application.

4.4.4. Minimum 8 consecutive weeks in a dedicated Intensive Care Unit or High Dependency Unit in the five (5) years prior to application. All applicants must submit a letter from the Clinical Director of the ICU/HDU outlining the duties performed during that rotation. The ICU/HDU experience may be obtained as part of a surgical rotation that regularly has patients in these settings e.g. Neurosurgery or Cardiothoracic surgery. It is expected that applicants will have had significant ‘Hands on’ Clinical duties in this unit rather than being attached as an observer or performing mainly clerical duties.
5. **SELECTION PROCESS OVERVIEW**

5.1. **Eligibility**

5.1.1. Applicants who satisfy the generic and specialty specific eligibility requirements will have their CV scored in accordance with Regulation 6 and;

5.1.2. Referee reports will be collected in accordance with Regulation 7.

5.1.3. Applicants who do not satisfy the eligibility requirements will be classified as unsuitable and informed in writing by 3 June 2016.

5.2. **Invitation to Interview**

5.2.1. Applicants who satisfy the eligibility requirements will be ranked on the basis of the following selection tools, providing an overall score out of 60;

a. Structured Curriculum Vitae out of 35

b. Structured Referee Reports out of 25

5.2.2. Applicants will be invited for interview in accordance with Regulation 8.

5.2.3. Applicants who do not meet the cut-off for interview will be classified as unsuitable and will be informed no later than 10 working days prior to the Interview date.

5.3. **Ranking and Offers**

5.3.1. The process of banding is an acknowledgement that there is no justifiable, statistical, or significant difference between scores within the same range. This is due to the fact that an applicant's total score is a collation of information about a variety of attributes (or competencies) from a variety of sources (referees, interviewers). The Training, Education and Accreditation Committee will band scores to 2% above and below. Other factors will be considered where candidates have no statistical difference in their scores. These factors may include referee and interview scores.

5.3.2. Applicants who attend the Semi-Structured Otolaryngology Head and Neck Surgery Panel Interview will be ranked on the basis of the following selection tools, providing an overall score out of 100;

a. Structured Curriculum Vitae out of 35

b. Structured Referee Reports out of 25

c. Semi-Structured Otolaryngology Head and Neck Surgery Panel Interview out of 40

5.3.3. On completion of the relevant components of the selection process applicants will be classified as either:

a. Successful - being an applicant who ranked high enough to be made an offer of a position in the training program.

b. Unsuccessful - being an applicant who does not rank high enough to be made an offer of a position due to unavailability of posts.

5.3.4. The entry point into the SET Program for the 2017 intake is SET1.

5.3.5. Applicants who attend the Interview will be notified of the outcome of their application on 4 July 2016.
6. STRUCTURED CURRICULUM VITAE

The Structured CV (online application form) captures applicants’ information on experience, other qualifications, publications, presentations and skills courses.

Each CV will be scored using a structured scoring system by two scorers, without reference to the opinions of the other. Where any discrepancy occurs in the scores provided by the two scorers the Training, Education and Accreditation Committee Chair will review discrepancies and provide a consensus score.

6.1 The CV will be scored out of a maximum 100 points. The components scored are:

6.1.1 Surgical Experiences (maximum 46 points).
6.1.2 Skills Courses and Conferences (maximum 16 points).
6.1.3 Qualifications (maximum 18 points).
6.1.4 Research and Academic Achievements (maximum 20 points).

6.2 Surgical Experience (maximum 46 points)

6.2.1 Terms less than 12 continuous weeks duration by the close of applications will not be scored.
6.2.2 Terms longer than 26 weeks will be scored up to the maximum allowable points per rotation.
6.2.3 Only surgical terms will be scored. Surgical terms must be one of the nine specialties of the College.
6.2.4 Private assisting terms will not be scored.
6.2.5 Terms that were not full-time will be scored pro-rata.
6.2.6 Terms commenced after the closing date of applications will not be scored.
6.2.7 Terms will only be considered for scoring if accompanied by documentary evidence in the form of a letter of confirmation from the appointing hospital or Health Service. An employment contract or roster is not adequate documentation and will not be scored.

6.2.8 Scoring:
   a) A term in Otolaryngology, Head and Neck Surgery is scored 4 points per 12 weeks (max of 16 points).
   b) A term in the surgical disciplines of Neurosurgery, Plastic & Reconstructive Surgery and General Surgery is scored 4 points per 12 weeks (max of 8 points each).
   c) A term in any other surgical discipline is scored 4 points per 12 weeks (max 4 points each).

6.3 Skills Courses (maximum 16 points)

6.3.1 Courses such as EMST, CLEAR, ASSET, CCrISP, NOTSS and TiPS (or international equivalents) will be scored.
6.3.2 Other courses such as Temporal bone dissection, FESS, Rhinoplasty and Head and Neck Dissection courses will be scored. Each course will be scored 1 point.
6.3.3 Conferences attended such as ASOHNS ASM, NZSOHNS ASM, RACS ASM or equivalent international conferences will be scored.
6.3.4 Conferences will be scored at 0.5 points each.
6.3.5 Certificate of attendance must be provided. Entries without adequate documentation will not be scored.
6.3.6 Courses and conferences must be completed prior to the close of applications.
6.4 Qualifications (maximum 18 points)

6.4.1 Higher degrees awarded by the close of applications will be scored;
   a) Higher degrees are defined as a Masters or PhD,
   b) A higher degree should be equivalent in syllabus and assessment to one conferred by an Australian or New Zealand University.

6.4.2 A Bachelor of Dental Surgery awarded by the close of applications will be scored.

6.4.3 A successful pass in the RACS Surgical Sciences Examination – generic component will be scored.

6.4.4 A Fellowship of the Royal Australasian College Of Surgeons will be scored.

6.4.5 Scoring does not include:
   a) primary medical degrees (MBBS or equivalent)
   b) Bachelor Degrees with or without Honours (with the exception of a 6.4.2)
   c) Post-graduate or Graduate diplomas or certificates

6.4.6 Qualifications must be complete by the close of applications.

6.4.7 Entries without adequate documentation will not be scored.

6.4.8 Scoring:
   a) FRACS or equivalent is scored 9 points.
   b) A PhD relevant to medicine is scored 6 points.
   c) A Masters degree by thesis, relevant to medicine is scored 3 points.
   d) A Bachelor of Dental Surgery is scored 3 points.
   e) A PhD not relevant to medicine is scored 2 points.
   f) RACS Surgical Sciences Exam (generic component only) is scored 1 point.
   g) A Masters degree by course work, relevant to medicine is scored 1 point.

6.5 Research and Academic Achievements (maximum 20 points)

6.5.1 Scoring only includes medically-relevant presentations within five (5) years prior to the closing date of application.

6.5.2 In the case of oral presentations, scoring only includes those made personally by the applicant. Documentary evidence must be explicit on this point or the presentation will not be scored.

6.5.3 Scoring only includes presentations made at a scientific meeting or conference subject to abstract selection.

6.5.4 Scientific meetings and conferences are classified by their intended audience, not title.

6.5.5 Entries without adequate documentation will not be scored.

6.5.6 Scoring:
   a) Each oral presentation at an international meeting is scored 4 points.
   b) Each oral presentation at a national meeting is scored 2 points.
   c) Each poster presentation is scored 1 point.
6.5.7 Scoring only includes publications relevant to medicine in a peer-reviewed publication listed on Medline.

6.5.8 Publications must be published within five (5) years prior to the close of applications.

6.5.9 Publications of a similar nature will be scored once. The higher scoring entry will take precedence.

6.5.10 Scoring includes case reports, journal articles and book chapters.

6.5.11 Scoring does not include letters to the Editor.

6.5.12 Entries without proof of publication will not be scored.

6.5.13 Scoring:

a) An article in an international journal where the applicant is the first author is scored 4 points.

b) An article in a national journal where the applicant is the first author is scored 2 points.

c) A case report where the applicant is first author or a publication as a sub-author is scored 1 point.
7. **STRUCTURED REFEREE REPORTS**

Confidential references are collected by an external agency on behalf of the Board using an online system to obtain information about the clinical aptitude, workplace behaviour and personal attributes of the applicant.

The referee collection period is from 27 April – 23 May 2016. As reports are collected online, please ensure your referees will have access to the internet during this time and are willing to access the reports electronically.

### 7.1. Surgical Referees

Applicants are advised to contact supervisors prior to nominating them as referees.

The applicant must provide contact details including a valid email address for the following:

7.1.1. A minimum of eight (8) and maximum of (12) surgical consultants who have worked with the applicant since 1 January 2014 and prior to the closing date for applications.

7.1.2. At least two (2) referees must come from OHNS rotation/s

7.1.3. Referees must be Surgical Consultants at the time of supervision and able to comment on all aspects of the applicant’s training.

   a. Referees cannot be a SET trainee of the College at the time of the rotation,

   b. Referees cannot be an IMG under assessment of the College at the time of the rotation.

7.1.4. Referees must have worked with the applicant for a minimum of eight (8) weeks (or full-time equivalent)

7.1.5. Current SET Trainees

   a. If OHNS rotation was prior to 1 January 2014, two referees from this rotation must still be included.

7.1.6. Applicants in Full-time Research (as defined in 4.1.2)

   a. Surgical referees may be nominated from part-time clinical work if all other criteria are met.

   b. Two referees from an OHNS rotation must be included even if rotation prior to 1 January 2014.

   c. Applicants may nominate referees from the two clinical years prior to commencing full-time research.

### 7.2. Non-Surgical Referees

Applicants are advised to contact referees prior to nominating them.

The applicant must provide contact details including a valid email address for the following:

7.2.1. Five (5) non-surgical senior staff members they have worked with from 1 January 2014 and prior to closing date for applications.

   a. No more than two (2) non-surgical referees from any one rotation (or academic department if in full-time research).

   b. At least one Nursing Unit Manager must be included.

7.2.2. Nominated referees must be:

   a. Medical Consultants (must be NZMC recognised medical Specialists)

   b. Nursing Unit Managers (unit nurse with most seniority)

   c. Research Supervisors or senior Laboratory Administrators (if in full-time research only)
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7.3. Process

7.3.1. The names of the referees selected to submit reports will not be released to applicants.

7.3.2. The Board will select six (6) supervising surgical consultants to be contacted to provide a referee report with consideration given to the duration and type of term.
   
   a. Prior to the distribution of referee reports to the referees, the Board will nominate four (4) primary and two (2) reserve surgical referees from those selected to provide the applicant with the best opportunity to receive an adequate number of valid reports.
   
   b. To ensure confidentiality of the referee report process, the applicant will not be informed of which referees have been selected or are primary or reserve.

7.3.3. The Board will select four (4) non-surgical staff to be contacted as part of the selection process.
   
   a. Prior to the distribution of referee reports to the referees, the Board will nominate two (2) primary and two (2) reserve non-surgical referees from those selected to provide the applicant with the best opportunity to receive an adequate number of valid reports.
   
   b. To ensure confidentiality of the referee report process, the applicant will not be informed of which referees have been selected or are primary or reserve.

7.3.4. The applicant must receive four (4) valid reports from surgical consultants and two (2) valid reports from non-surgical staff to be eligible to proceed in the selection process.
   
   a. The Board will not contact more than the initial 10 referees for completion of reports. While effort is made by College administrative staff to ensure referees return reports, if invalid reports are returned, or selected referees do not wish to complete the report, unselected referees will not be contacted once the collection period has commenced.

7.3.5. If an applicant does not receive the minimum number of valid referee reports prior to the close of the referee report collection period, they will be notified and not considered further in the selection process.

7.3.6. If an applicant elects not to provide the details for supervising consultants and non-surgical staff in accordance with these Regulations, the applicant may be withdrawn from the selection process and their application will not be considered further in the selection process.

7.3.7. Applicants are advised to nominate people who are most likely to be able to give a complete report.

7.4. Referee Report Content

7.4.1. On the report the surgical referees will be asked to select one (1) of four (4) options for each of the twenty (20) assessment areas which they believe best describes the applicant. The assessment areas which will be scored within the reports can be generally categorised as:

   a. Medical expertise
   b. Judgement- clinical decision making
   c. Communication
   d. Collaboration
   e. Management and Leadership
   f. Health Advocacy
g. Scholar and teacher
h. Professionalism
i. Technical Expertise

7.4.2. If a surgical referee has provided a response for less than 85% (17 out of 20 assessment areas) of the report, the report will be invalid and will not be used as part of the selection process and a reserve’s report will be used.

7.4.3. On the report the non-surgical referees will be asked to select one (1) of four (4) options for each of the fifteen (15) assessment areas which they believe best describes the applicant. The assessment areas which will be scored within the reports can be generally categorised as:

a. Judgement- clinical decision making
b. Communication
c. Collaboration
d. Management and Leadership
e. Health Advocacy
f. Scholar and teacher
g. Professionalism

7.4.4. If a non-surgical referee has provided a response for less than 80% (12 out of 15 assessment areas) of the report, the report will be invalid and will not be used as part of the selection process and a reserve’s report will be used.
8. SEMI-STRUCTURED OHNS PANEL INTERVIEW

8.1. Invitations for Interview

8.1.1. Applicants will be ranked by the combined score of the CV and referee reports according to Regulation 5.2.1.

8.1.2. The Board will determine in March of the selection year, the number of interviews to be conducted based on the approximate number of vacant training positions expected to be available the following year. Interviews will be offered based on a ratio of three (3) applicants to one (1) post (i.e. a ratio of 3:1).

8.1.3. Applicants will be invited to interview based on ranked order. Applicants with identical scores at the cut off mark will be invited to interview.

8.1.4. All applicants invited for interview will be given at least ten (10) working days’ notice of the interview.

8.1.5. All applicants not invited for interview will be notified at least ten (10) working days prior to the interviews. See Regulation 9.2 for feedback provided at this time.

8.1.6. All interviews will be held at the Wellington Airport Conference Centre on Saturday, 18 June 2016. It is the applicants’ responsibility to make the appropriate travel arrangements and to meet costs incurred in attending the interview. Information about the interview process will be included in the letter inviting applicants to interview.

8.1.7. Applicants must make themselves available at the scheduled interview time. Applicants who contact the RACS Executive Officer before the interview invitations are sent to request a specific time will be considered. Times will not be changed after invitations have gone out.

8.1.8. Applicants who do not present for the interview at the scheduled time will not be considered further in the selection process and their applications will be withdrawn.

8.2. Interview Structure

8.2.1. The interview will be conducted by three (3) interview panels, each consisting of two (2) or more interviewers. An NZSOHNS Member may act as an observer during the interviews. Each interview panel will present two (2) scenarios with associated questions. There will be 5 minutes reading time before each panel.

8.2.2. Each interview panel will take 15 minutes and the total interview time will be approximately 60 minutes.

8.2.3. Applicants will be asked the same initial questions. The follow-up probing questions will explore the breadth and depth of each applicant’s experience and insight.

8.2.4. The interview will seek information on the following attributes:

- a. Ability to perform realistic self-assessment
- b. Ability to contribute effectively as a member of a health care team
- c. Ability to act ethically, responsibly and with honesty
- d. Capacity for caring, concern and sensitivity to the needs of others
- e. The ability to interact effectively with peers, mentors, members of the health care team, patients and their families
- f. Effective spoken communication/Preparation for OHNS training/Overall impression
8.3. Interview Scoring

8.3.1. The Interview will be scored out of a total of 150 marks and is weighted at 40% of the applicant’s overall combined score.

8.3.2. The applicant will answer questions relating to six scenarios.

8.3.3. Each panel member will score the applicant independently following which a consensus among the panel members will be reached.

8.3.4. Each scenario will be worth 25 points and consist of

   a. four (4) attributes with a maximum of 5 points each and,
   b. an overall impression score with a maximum of 5 points

8.3.5. If more than one applicant has the same total and interview score, the applicant with the higher Online Referee Report score will receive the higher ranking.
9. FEEDBACK TO APPLICANTS

9.1. Applicants who do not meet the minimum eligibility criteria

9.1.1. Will be advised in writing by 3 June 2016. Applicants will not progress further in the selection process.

9.2. Applicants who are not ranked highly enough for Interview

9.2.1. Will be provided with their CV score
9.2.2. Will be provided with their referee report score
9.2.3. Approximate number of posts available in the following year

9.3. Applicants who are invited for Interview

9.3.1. Will be provided with their CV score
9.3.2. Will be provided with their referee report score
9.3.3. Approximate number of posts available in the following year
9.3.4. Will be given the time of their interview

9.4. Applicants who are successful in the selection process will be notified in writing of the following:

9.4.1. That they have been successful in the selection process and are being offered a position on the SET Program in New Zealand.
9.4.2. A Royal Australasian College of Surgeons SET Program Trainee Agreement which must be signed and returned to the Royal Australasian College of Surgeons New Zealand National Office, P.O. Box 7451, Wellington 6242, New Zealand.
9.4.3. Allocation to hospital posts will occur at the completion of the Selection process and be conducted by the NZSOHNS Training, Education and Accreditation Committee.
9.4.4. Acceptance of the offer to the SET Program will be conditional on the following:
   a. Applicants must be prepared to be assigned to a training position anywhere in New Zealand throughout their SET Program.
   b. 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.
   c. Agreement to abide by the SET Program and College policies and regulations at all times.
   d. Submission of the SET Trainee Agreement prior to the communicated offer expiry due date.
9.4.5. Applicants who do not satisfy any of the above conditions, or who decline the offer, will automatically forfeit the offer.

9.5. Applicants who are unsuccessful in the selection process will be notified in writing of the following:

9.5.1. CV, Referee Report and Interview and overall score and ranking.
9.5.2. That they have been deemed suitable for selection but have not ranked high enough to be offered a current position.
9.5.3. Information on their position in the wait list should a position become available at a later date. The last date for SET offers is 11 November 2016.
9.5.4. Information on the process available to seek more detailed feedback.
10. GARNETT PASSE AND RODNEY WILLIAMS MEMORIAL FOUNDATION (GP&RWMF) SCHOLARSHIP/SURGEON SCIENTIST PROGRAM

10.1.1. Each year the GP&RWMF offer Category A scholarships for selected research projects in conjunction with the OHNS SET program.

10.1.2. Details of the selected research projects will be made available to those that have registered their interest in applying for both Selection in OHNS and the scholarship.

10.1.3. Applicants wishing to apply for a scholarship must:
   a. Contact the supervising Professor directly indicating their interest.
   b. If invited, interview for the research project with the relevant Professor.

10.1.4. Selection into the SET in OHNS program as a Surgeon Scientist will occur if all the following conditions are met:
   a. The applicant ranks highly enough in the selection process to receive an offer.
   b. The supervising Professor has selected the applicant as suitable for the research project.
   c. The applicant meets the criteria in the GP&RWMF Conditions of Award circulated prior to application.

10.1.5. Applying for the GP&RWMF/Surgeon Scientist program does not increase an applicant’s chance of being successful in selection to the SET in OHNS program.