Selection Regulations
Surgical Education & Training Program
Cardiothoracic Surgery 2017 Intake

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

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


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

1.1.9. 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.

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

1.1.11. Term or Rotation means an employment period within a hospital unit/department at post-graduate level. This terminology is interchangeable.

1.1.12. Medal/prize/award refers only to those at an academic, tertiary level.

1.1.13. Indexed means the relevant journal is listed in Index Medicus.

1.2. Purpose of these 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 (SET) Program in Cardiothoracic Surgery for the 2017 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. Each SET Program conducted under the auspices of the College has an appointed specialty board that are responsible for advising the College 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 eligible applicants.

2.6. 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.

2.7. The number of trainees selected in any year will depend on the number of accredited hospital training posts available.

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 - CARDIOTHORACIC SURGERY**

3.1. **REGISTRATION AND GENERIC ELIGIBILITY CRITERIA:**

To apply to the SET Program, applicants must:

3.1.1. Register with the College to apply for SET Selection. Registration opens 6 January 2016 and closes 4 February 2016. Applicants must register in accordance with the directions provided by the College.

3.1.2. Australian applicants must have general (unconditional) registration. New Zealand applicants must have general scope registration from the Medical Council of New Zealand that general scope registration will be approved by the start of the training year.

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

3.1.4. 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.

3.1.5. Police record checks 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 findings(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)
3.1.6. Disclosing criminal history information from its own records to the Board; and

3.1.7. 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 to the Board.

3.1.8. 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.

3.1.9. 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).

3.1.10. In considering applications for the SET Program, where a Police Report reveals a criminal record, the Board must take into account:
   a. The nature of the conviction recorded;
   b. The age of the conviction recorded;
   c. The relevance of the conviction on the application for the SET Program; and
   d. Any further explanation the applicant may give for the circumstances in which the conviction arose.

3.1.11. 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.

3.1.12. 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:
   a. A conviction of a sexual nature;
   b. A conviction relating to drug usage and or trafficking;
   c. A conviction against liberty, morality and abduction;
   d. A conviction relating to dishonesty, fraud and deception.

3.1.13. The final determination will be made by the Board.

3.1.14. 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 item 3.1.15 of these Regulations.

3.1.15. A member, member of staff or agent of the Board does not contravene item 3.1.14 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.

3.2. **CARDIOTHORACIC SURGERY SPECIALTY SPECIFIC ELIGIBILITY CRITERIA:**

In addition to the generic eligibility requirements, applicants to the SET program in Cardiothoracic Surgery must also meet the following specific eligibility requirements:

3.2.1. **Rotations**

3.2.2. Complete two (2) x Surgical Rotations of a Minimum Duration of ten (10) Continuous Weeks each. The rotations must be undertaken within the last five years and must be completed by the end of 2016 (1st January 2011 – 31st December 2016). The rotations must be taken separately irrespective of the cumulative total of the rotation.

3.2.3. PLUS Complete one (1) x Cardiothoracic Surgical rotation of a minimum of ten (10) continuous weeks. The rotation must be undertaken within the last five years and must be completed at the time of application (1st January 2011 – 2nd April 2016).

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.

3.2.5. The Cardiothoracic Surgical rotation must be purely Cardiothoracic and not shared with one of the other eight surgical specialties.

3.2.6. A Cardiac or Thoracic rotation will not be counted as a Cardiothoracic Surgical rotation.

3.2.7. If the hospital’s Cardiac and Thoracic units are separate, an applicant will be deemed as having completed a Cardiothoracic Surgical rotation if they completed at least 10 weeks in both units.

3.2.8. The Cardiothoracic rotation can contribute to the minimum number of rotations as outlined in item 3.2.2. In this circumstance, the Cardiothoracic rotation must meet the criteria outlined in item 3.2.2.

3.2.9. Rotations which are not undertaken on a full time basis will be adjusted pro rata.

3.2.10. The surgical rotations must be undertaken within a hospital unit specialising in one of the College’s nine surgical specialties.

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

3.3. Applicants must provide written evidence in the form of a letter signed by the Head of Unit or HR Department from the employing institution confirming completion of the relevant surgical rotation/s as outlined in 5.5 below.

3.4. **Direct Observation of Procedural Skills in Surgery (DOPS)**

3.4.1. Provide evidence of successful completion of the procedures as outlined in the relevant DOPS forms.

3.4.2. DOPS forms accepted will be:

   a. Conduit Harvest and
   b. Chest drain insertion

3.4.3. Only the Cardiothoracic Eligibility DOPS forms provided to SET applicant will be accepted. No other version of the DOPS form will be accepted.
3.4.4. Eligibility DOPS may be completed outside of a Cardiothoracic rotation.

3.4.5. If the applicant is a current SET trainee in a different specialty, the Cardiothoracic eligibility DOPS must have been completed in the five years prior to FIRST acceptance to the SET program.

3.5. Examinations:

3.5.1. Must have successfully completed the Generic Surgical Sciences Examination (GSSE) at the time of application

3.6. Applications can only be submitted via the College online application system at www.surgeons.org. Applications open on 2 March 2016 and close on 1 April 2016. No other form of application will be accepted and no extensions will be granted.

3.7. 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.

3.8. 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.

3.9. 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 either intentionally or by mistake the applicant may be 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.

3.10. Applicants who do not meet the generic eligibility requirements as set out in Regulation 3.1 and the specific Cardiothoracic Surgery eligibility requirements as set out in Regulation 3.2 will not progress to the next stage of selection and will be advised accordingly.

4. SELECTION PROCESS OVERVIEW

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

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

4.2.1. **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.

4.2.2. **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.

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

4.3. Applicants must obtain an overall percentage adjusted score of at least 65% of the combined three (3) selection tools in order to be deemed suitable for appointment into the SET Program in Cardiothoracic Surgery.
4.4. 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 10 of these Regulations.

4.5. 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:

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

4.6. In the event that two or more applicants receive a score within 0.05% of each other, the score received in the interview selection tool will be the differentiating factor.

4.7. Suitable applicants for the SET 1 intake, who rank high enough in comparison to the SET 1 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 SET 1. Successful applicants will be notified in writing as outlined in section 8 of these Regulations.

4.8. All other suitable applicants who do not rank high enough in comparison to the intake to be offered a position will be deemed unsuccessful. Unsuccessful applicants will be notified in writing as outlined in section 9 of these Regulations.

4.9. Applicants who do not meet the minimum as outlined in item 4.3 of these regulations will be deemed unsuitable for selection. Unsuitable applicants will be notified in writing as outlined in section 10 of these Regulations.

5. STRUCTURED CURRICULUM VITAE

5.1. The Structured Curriculum Vitae (online application form) captures information and evidence on an applicant’s surgical experience, other qualifications, publications, presentations, skills courses and medical achievements, and leadership exposure.

5.2. Each Structured Curriculum Vitae will be scored by 2 members of the Board of Cardiothoracic Surgery without reference to the opinions of each other using a structured scoring system. Where any discrepancy occurs provided by the two scorers, the Board Chair will review discrepancies and provide a final score.

- Any entry without documentation that clearly supports and verifies it will not be scored.

5.3. The Structured Curriculum Vitae is scored out of a potential 47 points. The components scored are:

- Qualifications/Surgical and Medical Experience (15 points)
- Publications (10 points)
- Presentations (10 points)
- Skills Courses/Medical Awards/Achievements (10 points)
- Leadership or Community Contributions (2 points)

5.4. Points will not be awarded in more than 1 component for any single entry.
5.5. **Qualification / Surgical and Medical Experience (maximum 15 points):**

Documentary evidence must be supplied for those rotations considered eligible to be awarded marks, including ICU, Respiratory, Cardiology, Vascular and Cardiothoracic surgery, must detail work history and must include commencement and end dates, position held and hospital.

Documentary evidence must also be supplied for qualifications other than your primary medical qualification. This must be either an academic transcript or certificate of completion from the institution.

5.5.1. Terms shorter than 10 weeks are not scored.

5.5.2. Terms which are not undertaken on a full time basis will be adjusted pro rata.

5.5.3. Terms that are mandatory eligibility requirements are not scored.

5.5.4. Terms planned to commence after the closing date in the year of application are not scored.

5.5.5. Current terms will only be considered for scoring if a minimum of 10 weeks has been completed by the closing date in the year of application.

5.5.6. Qualifications must be complete by the close of applications.

5.5.7. Scoring does not include:
   a. primary medical qualifications (MBBS or equivalent).
   b. Bachelor Degrees with or without Honours.

5.5.8. Graduate Diplomas in a surgical or medical field are scored 1 point.

5.5.9. Successful completion of B. Med Science Degree/Post Graduate Diploma of Anatomy (not as undergraduate for graduate medical course) is scored 1 point.

5.5.10. A Master’s degree is scored 2 points for a surgical qualification.

5.5.11. A PhD, MD or MD by Research is scored 3 points for a medical qualification.

5.5.12. FRACS or recognised surgical specialist registration within Australia or New Zealand is scored 10 points.

5.5.13. Fellowship of a non-surgical medical specialty training program in Australia or New Zealand is scored 5 points.

5.5.14. A rotation in ICU/Respiratory Medicine and Cardiology is scored **5 points for each such specialty rotation, to a maximum of 15.** Each rotation, regardless of length above 10 weeks will be scored as a single rotation.

5.5.15. A cardiothoracic, cardiac or thoracic rotation in addition to the mandatory eligibility requirements is scored 2 points to a maximum of 2 points. Each rotation, regardless of length above 10 weeks will be scored as a single rotation.

5.5.16. Membership of the Royal College of Surgeons (MRCS) is not scored.
5.6. **Publications (maximum 10 points):**

Documentary evidence must be a letter of acceptance from the publishing body (not the supervisor) or the first page of the publication which clearly shows the publication reference. A copy of the entire publication must not be attached.

5.6.1. Scoring only includes medical publications in the 5 years prior to the close of applications.

5.6.2. Scoring includes publications accepted for publication prior to close of application in indexed and non-indexed publications and excludes published abstracts.

5.6.3. Each publication can only be scored once.

5.6.4. Publications listed in the Presentations section will only be scored once. The higher scoring entry will take precedence.

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

5.6.6. A first author indexed publication is scored 3 points for each.

5.6.7. A first author non-indexed publication is scored 2 points for each.

5.6.8. A co-author indexed publication is scored 1 point for each.

5.6.9. A first author indexed case report is scored 1 point to a maximum of 1 point.

5.7. **Presentations (maximum 10 points):**

Documentary evidence includes a letter of acceptance of the abstract from the meeting organisers, a copy of the published abstract or a copy of the applicable program page from the meeting. The documentary evidence must clearly identify the applicant as the presenter. A copy of the actual presentation must not be attached.

5.7.1. Presentations are defined as poster or oral presentations at an international, national, Australasian or state scientific meeting or conference, based on refereed abstracts.

5.7.2. National and state meeting presentations are defined as having an externally run process of a peer-reviewed selection of abstracts or submissions, and these meetings are advertised nationally or State wide, regardless of whether these are held internationally.

5.7.3. Scoring only includes presentations in the 5 years prior to the close of applications.

5.7.4. In the case of oral presentations, scoring only includes those personally given by the applicant.

5.7.5. State meeting presentations are scored 1 point each.

5.7.6. An international, national or Australasian meeting presentation is scored 2 points for each.

5.7.7. Presentations (including posters) which have been presented at more than one scientific meeting or conference will only be scored once.

5.7.8. Presentations listed in the Publications section will only be scored once. The higher scoring entry will take precedence.

5.7.9. Poster presentations, regardless of type of meeting (international, national or state) will only be awarded 1 point each.
5.7.10. Scoring excludes presentations made as part of grand rounds.

5.8. **Academic Skills Courses / Medical Awards / Medical Achievements (maximum 10 points):**

Documentary evidence must show completion of the course/workshop from the awarding body. The evidence must clearly identify the date of the workshop and the applicant.

Documentary evidence of University or other medals, awards or prizes must be provided and clearly state the applicant as the recipient of this award.

5.8.1. The College’s ASSET, CLEAR, CCRiSP, EMST and TIPS courses are scored 1 point each to a maximum of 4 points.

**NOTE:** Overseas equivalent course also accepted are:

For ASSET – Intercollegiate Basic Surgical Skills (BSS) Provider: RCS England and Ireland

For CRiSP – CCRiSP – Provider RCS England and Ireland

For EMST – ATLS – Provider Provider RCS England and Ireland and American College of Surgeons

5.8.2. The Board recognizes the College’s ATLS (Advanced Trauma Life Support) course as equivalent to the EMST course and BSS (Basic Surgical Skills) course as equivalent to the ASSET course and these are scored as per 5.8.1 above.

5.8.3. Other medical professional development courses will be scored 1 point to a maximum of 1 point.

5.8.4. Scoring only includes medical awards and other medical achievements obtained by the applicant from a tertiary education level.

5.8.5. Medals, prizes and awards are scored 2 points each to a maximum of 4 points. Runner-up, finalist, highly commended or similar rankings are not scored.

5.8.6. The Gordon Gordon-Taylor Prize is scored 2 points.

5.9. **Leadership/ Cultural / Sporting Achievements (maximum 2 points):**

Documentary evidence such as a certificate or letter from the professional or awarding body must be attached. Documents prepared by the applicant are not acceptable evidence. Do not attach photographs or newspaper articles under any circumstances.

5.9.1. Leadership positions and cultural or sporting achievements at a senior national or international representative level will be scored 2 points to a maximum of 2 points. Sporting achievements excludes age group level representation.

6. **STRUCTURED REFEREE REPORTS**

6.1. 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.

6.2. The applicant must provide contact details, including a valid email address, for a minimum of eight (8) Consultants:

6.2.1. Referees must have acted in a supervisory capacity for the applicant within a rotation from the last five (5) years (1st January
2011 – 2nd April 2016) or from the last three (3) years of clinical work, whichever is greater.

6.2.2. At least one (1) Consultant must be from the mandatory Cardiothoracic rotation

6.2.3. At least one (1) Consultant must be from the current rotation.

6.2.4. If the applicant’s Cardiothoracic rotation is also their current rotation the applicant must provide at least two (2) referees from that rotation.

6.3. Consultants holding a diploma from an Australian or New Zealand College are eligible to act as a referee.

6.4. 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 (2) years of continuous work within the area of their diploma at a recognised Australian or New Zealand institution.

6.5. International Medical Graduates (IMG) under assessment at the time of application cannot 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 6.4.

6.6. A maximum of three (3) Consultants can be nominated per rotation.

6.7. A maximum of three (3) Research referees can be used.

6.8. 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, the applicant may be withdrawn from the selection process and their application will not be considered further in the selection process.

6.9. The Board will contact the nominated referees requesting them to complete the online referee report.

6.10. The referee must have a valid email address and be available to complete the reference during the allocated period. The referee report is an online application and cannot be filled out manually. It is the applicant’s responsibility to ensure referees are aware of this process.

6.11. On the report the supervising consultant will be asked to select one of four options for each of the twenty (20) 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:

   6.11.1. Medical expertise
   6.11.2. Technical expertise
   6.11.3. Judgement - clinical decision making
   6.11.4. Communication
   6.11.5. Collaboration
   6.11.6. Scholar and teacher
   6.11.7. Professionalism

6.12. Referees must complete a minimum of 17 out of 20 questions or 85% of the referee report in order for it to be deemed valid.

6.13. A minimum of six (6) valid referee reports must be returned in order for the applicant to progress through the selection process.
6.14. Applicants are advised to nominate people who are most likely to be able to give a complete report.

6.15. If a minimum of six (6) valid reports are not received by 5 pm AEST on 23 May 2016 the applicant will be withdrawn from the selection process and their application will not be considered further.

6.16. 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 term was undertaken. Referees will also be selected with consideration given to the following ranking:
   a. Cardiothoracic Fellow of the College
   b. Fellow of the College
   c. Fellow of another College

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

6.18. 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.

6.19. 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.

6.20. The final referee report score cannot be revised.

7. SEMI-STRUCTURED INTERVIEW

7.1. Applicants will be ranked by the combined score of the Curriculum Vitae and Referee Report.

7.2. To receive an interview, applicants must achieve a combined adjusted score of 33/55 (60%) on the Curriculum Vitae and Referee Report. Applicants who achieve this minimum standard will receive an interview. Applicants who do not satisfy these minimum standards will not be eligible to attend an interview and will be advised accordingly.

7.3. Cardiothoracic Selection Interviews will be held on Saturday 18th June 2016 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.

7.4. 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.

7.5. The interview will be conducted by four (4) interview panels, each consisting of two (2) interviewers.

7.6. Each interview panel will be fifteen (15) minutes in duration and the total interview time will be approximately sixty (60) minutes.

7.7. The interview format may contain some scenario based questions.

7.8. 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.
7.9. The interview may consist of the following sections:

7.9.1. Interest in Cardiothoracic Surgery
7.9.2. Insight & Self-Motivation
7.9.3. Ethical Behaviour
7.9.4. Working Relationships & Collaboration
7.9.5. Stress Response
7.9.6. Performance Initiative
7.9.7. Performance Insight
7.9.8. Risk Management
7.9.9. Communication & Professional Conduct
7.9.10. Research & Publications
7.9.11. Knowledge Acquisition & Recognition

7.10. Each interview panel will provide a consensus score for each of the interview questions they ask.

7.11. Final interview scores cannot be revised.

8. FEEDBACK TO SUCCESSFUL APPLICANTS

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

8.1.1. 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.

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

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

8.1.4. A list of the conditions identified in item 8.2 of these Regulations.

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

8.2.1. 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 training. 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.

8.2.2. Agreement to abide by the Cardiothoracic SET Program Regulations and College Policies 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.

8.2.3. Submission of the SET Program Contract, in accordance with instructions given, prior to the communicated offer expiry due date.

8.3. Applicants who do not satisfy any of the conditions outlined in item 8.2 of these Regulations, or who decline the offer, will automatically forfeit their offer.
9. FEEDBACK TO UNSUCCESSFUL APPLICANTS

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

9.1.1. 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.

9.1.2. 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.

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

9.2. Verbal feedback will not be given.

10. FEEDBACK TO UNSUITABLE APPLICANTS

10.1. 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:

10.1.1. That they have been deemed unsuitable for selection and will not be considered further in the selection process.

10.1.2. 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.

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

10.1.4. Verbal feedback will not be given.

11. SELECTION PROCESS REVIEW

11.1. Applicants may be asked to complete evaluation forms during the selection process.

11.2. Completed evaluations will be analysed for potential improvements to the process.