2017 SELECTION REGULATIONS FOR SELECTION (2018 INTAKE)

1. INTRODUCTION

1.1. DEFINITION OF TERMS FOR THE PURPOSE OF THESE REGULATIONS

1.1.1. Applicant means a person who has applied for selection into the Paediatric Surgery Training Program.

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

1.1.3. Board means the Board of Paediatric Surgery.

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

1.1.5. Interview means the Board of Paediatric Surgery Semi-Structured Paediatric Surgery Panel Interview conducted as part of the short listed selection process.

1.2. PURPOSE OF THESE REGULATIONS

These Regulations establish the principles, terms and conditions for the selection process for the RACS Surgical Education and Training Program in Paediatric Surgery. These selection regulations in combination with the RACS Selection to Surgical Education and Training Policy are the final authority and policy governing the Paediatric Surgery Selection Process. This is a public document.

1.3. ADMINISTRATION AND OWNERSHIP

The responsibility for the administration, regulation and assessment of the applicants for the SET Program in Paediatric Surgery rests with the Board of Paediatric surgery.

1.4. OBJECTIVE OF THE SET PROGRAM

The aim of the SET Program is to produce competent Paediatric Surgeons with the skills, experience and knowledge necessary to provide their communities and health systems with the highest standards of ethical professional care and leadership.

2. PRINCIPLES UNDERPINNING THE SELECTION PROCESS

2.1. The object of the process is to select individuals for the Training Program on the basis of merit and aptitude through a fair, open and accountable process.

2.2. The selection process will conform to the requirements agreed by the RACS Board of Surgical Education and Training.

2.3. The selection process will be subject to continuous review to ensure continued validity and objectivity.

2.4. The selection process is well documented, transparent and objective. Applicants have access to eligibility criteria, selection process information and an appropriate appeals process.

2.5. The selection process and training program is conducted on a bi-national basis in Australia and New Zealand.

2.6. The number of trainees selected in any year will depend on the number of eligible candidates who meet the minimum standard interview score; together with the number of accredited hospital training posts available. The Board endeavours to fill all available training posts.

3. ELIGIBILITY FOR APPLICATION TO THE SET PROGRAM IN PAEDIATRIC SURGERY

3.1. Registration and Generic Eligibility

To apply to the SET Program, applicants must:

3.1.1. Have registered for application with the College by 5:00pm AEDT on 3 February 2017.
3.1.2. Have satisfactorily completed the internship/house surgeon year and be in postgraduate year two (PGY2) or later.

3.1.3. All Australian applicants must have general (unconditional) registration at the time of submitting their registration. New Zealand applicants must have general scope registration or written assurance from the Medical Council of New Zealand that general scope registration will be approved by the start of the training year.

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

3.1.5. Consent to a full criminal history check and agree to submit the relevant documentation on request from the Board to enable a full criminal history check to be undertaken in accordance with the Selection Process.


3.2. Specialty Specific Eligibility Requirements

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

3.2.1. All applicants to Paediatric Surgery must have satisfactorily completed a total of six (6) months supervised postgraduate clinical work in surgery in an Australian or New Zealand unit comprised of terms no shorter than ten (10) weeks. This experience must have been completed within the last three (3) years before the closing date for applications (since 1 January 2014).

3.2.2. All applicants to Paediatric Surgery must complete a minimum ten (10) week term in a clinical postgraduate post in an Australian or New Zealand paediatric surgical unit with at least one Paediatric Surgical SET training post. This experience must have been completed within the last five (5) years before the closing date for applications (since 1 January 2012).

A letter of verification from a FRACS paediatric surgeon must verify this experience and be submitted with the application.

3.2.3. Applicants who have been awarded Fellowship of the Royal Australasian College of Surgeons through the successful completion of a RACS SET program in the last three (3) years may be exempt from the time limits for completion of 3.2.1 and 3.2.2 at the discretion of the Board of Paediatric Surgery.

3.2.4. All applicants to Paediatric Surgery must have successfully completed the Generic Surgical Sciences Examination (GSSE) at the time of application.

3.3. Applications must be submitted via the College online application system at www.surgeons.org

Applications will close on 31 March 2017 at 12:00pm AEDT.

3.4. 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 point during the selection process.

3.5. 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.

3.6. Applicants who do not meet generic eligibility requirements as set out in Regulation 3.1 and specific Paediatric 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 requirements will be ranked on the basis of the following selection tools, providing an overall adjusted score out of 55%.

4.1.1. Structured Curriculum Vitae 30%
4.1.2. Structured Referee Reports 25%

4.2. Following the process in Regulation 4.1, applicants will be invited for interview according to the process set out in section 7 of these regulations.

4.3. Applicants must score a minimum of 35 or more out of 55 for the combined Structured Curriculum Vitae and Online Referee Report to be invited to attend an interview. Applicants who fail to achieve the minimum standard score of 35 will not be considered further in the selection process.

4.4. Applicants who attend the Paediatric Surgery interview will be ranked on the basis of the following selection tools providing an overall percentage mark out of 100%;

4.4.1. Structured Curriculum Vitae out of 30%
4.4.2. Structured Referee Report out of 25%
4.4.3. Panel Interview out of 45%

4.5. The minimum standard score needed to be appointed to Paediatric Surgery training is 72%. Applicants who do not achieve a score of 72% or above will be deemed unsuitable for training and therefore unsuccessful in the selection process.

4.6. On completion of the relevant component of the selection process applicants will be classified as either:

4.6.1. **Successful** – being an applicant who ranked high enough to be made an offer of a position in the training program
4.6.2. **Unsuccessful** – being an applicant who does not rank high enough in comparison to the number of available training positions but achieves a score of 72% or above
4.6.3. **Unsuitable** – being an applicant who failed to meet an eligibility requirement

4.7. Where two or more candidates are considered statistically equal in ranking the responses provided in the Regional Training Preference section of the Online Application Form; may be used by the e Board of Paediatric Surgery to appoint a candidate to the Training Program.

4.8. If more than one applicant has the same total score, the applicant with the higher interview score will receive the higher ranking.

4.9. 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.

4.10. After the interview a ranked listing of eligible applicants will be produced from which applicants will be selected in order until all available posts are filled or until suitable applicants have been appointed.

4.11. SET Placements are determined by the Board based on a combination of applicant rank, preference and experience. The Board endeavours to give all applicants their first preference of training location but cannot guarantee this. The Board’s decision on trainee placement is final.

4.12. Fluctuations in the number of available clinical training posts occur for a number of reasons, including trainees pursuing a research program, completing the program or undertaking an approved overseas posting. The Board’s ability to appoint trainees will be limited by the number of training places available in the next and subsequent years for trainees to advance through the program. Positions may be limited to ensure at least two (2) positions are available for subsequent years.

4.13. Assessments by interview panels that include two (2) unsuitable assessments, or one unsuitable assessment plus one borderline assessment will be considered unsuitable for selection.

5. STRUCTURED CURRICULUM VITAE (CV) SCORING

The CV scoring process is designed to capture information on some aspects of the applicant’s clinical experience, educational qualifications, courses, presentations, and publications. It also provides the applicant with the opportunity to attest to their skills and achievements outside of medicine which demonstrate leadership and management, including health advocacy.

The CV will be scored by two members of the Board of Paediatric Surgery. In the instance of a discrepancy between scorers, the Board Chair will make the final scoring decision.
5.1. The CV will be scored out of a maximum of 60 marks (30% of overall selection mark) using a structured scoring system with ceiling limits placed on specific areas. The components are:

- Surgical and Medical Experience (maximum 25 points)
- Skills Courses (maximum 7 points)
- Qualifications (maximum 14 points)
- Publications and Presentations (maximum 14 points)

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

5.2. Medical and Surgical Experience

5.2.1. No score will be given for surgical experience acquired after the application closing date or for Private Assisting terms.

5.2.2. Scores will be awarded for surgical experience in Paediatric Surgery and paediatric medicine, PICU, NICU acquired within five (5) years prior to the closing date for applications (since 1 January 2012).

5.2.3. Scores will be given for other surgical experience acquired within three (3) years prior to the closing date for applications (since 1 January 2014).

5.2.4. Documentary evidence of surgical experience must be submitted. A letter signed by the Head of Unit or Human Resources Department from the employing institution confirming completion of the relevant surgical rotation/s, work history, position held, including commencement and end dates.

5.2.5. See CV Scoresheet for more information.

5.3. Skills Courses

5.3.1. Scoring will consider courses completed in the last five (5) years prior to the closing date for applications (since 1 January 2012).

5.3.2. Courses must be delivered by a recognised training provider as determined by the Board and must be of at least eight (8) hours in duration.

5.3.3. Courses must be complete at the time of application and must be accompanied by documentation of evidence of attendance/completion.

5.3.4. See CV Scoresheet for more information.

5.4. Qualifications

5.4.1. Scoring only includes higher degrees successfully completed at the time of application at a recognised institution.

5.4.2. Documentary evidence in the form of a certificate of completion from the institution must be submitted.

5.4.3. Scoring does not include primary medical qualifications (MBBS or overseas equivalent) unless Honours are obtained.

5.4.4. See CV Scoresheet for more information.

5.5. Publications

5.5.1. Scoring will consider publications undertaken in the past five years prior to the closing date of applications (since 1 January 2012).

5.5.2. Publications that have been accepted for publication in a peer reviewed journal listed in the National Center for Biotechnology Information (NCBI) will be scored.

5.5.3. Published abstracts and letters to the editor will not be scored.

5.5.4. Documentary evidence must be submitted. Acceptable documentary evidence of publication includes copy of publication or official letter from the editor clearly stating the publication date.

5.5.5. Multiple publications with duplicate or similar topics or content will only be scored once.

5.5.6. Where the same article has been used as a journal article and also as a presentation it will be awarded points once only either as a journal article or presentation.

5.5.7. Scoring only includes publications relevant to medicine.

5.5.8. See CV Scoresheet for more information.
5.6. Presentations

5.6.1. Presentations must be directly relevant to medicine for scores to be granted.

5.6.2. Presentations must be delivered at a National and International Scientific Meetings or conferences subject to abstract selection in the last five (5) years; prior to the closing date for applications (since 1 January 2012).

5.6.3. No points will be awarded for presentations at in-house hospital meetings or Hospital Grand Rounds.

5.6.4. The applicant must personally deliver the presentation.

5.6.5. Multiple presentations with duplicate or similar topics will be awarded marks for one (1) presentation only.

5.6.6. Presentations which have been accepted for presentation at a meeting will be scored as if they have been presented, only if written proof of acceptance for presentation is provided.

5.6.7. Documentary evidence must be submitted. Acceptable documentary evidence of presentations includes official meeting program or letter from convenor or conference organiser.

5.6.8. See CV Scoresheet for more information.

5.7. Scientific Meetings

5.7.1. Scientific Meetings and Conferences are classified for scoring purposes by their target audience and not the geographical location.

5.7.2. Acceptable documentary evidence required; a letter specifically stating dates of involvement on official organisation letter head. Email endorsements are not acceptable.

5.7.3. See CV Scoresheet for more information.

6. ONLINE STRUCTURE REFEREE REPORT

6.1. The online referee report is a confidential online process conducted between 27 April 2017 AEST and 24 May 2017 (5:00pm AEST) and will contribute to a total of 25% of the overall selection mark.

6.2. The Online Structured Referee Report will cover the following criteria: Medical Expertise, Technical Expertise (Clinical experience) Judgement, Communication, Collaboration, Management and Leadership and Professionalism.

6.3. Applicants must provide the name, email address and telephone details of all of their supervising surgical consultants with whom they have worked with in a clinical rotation during the last two (2) years (since 1 January 2015).

6.4. All referees must be a FRACS (or a Vocationally Registered Paediatric Surgeon in New Zealand) and have had a supervisory role over the applicant.

6.5. All referees will be asked to comment on the clinical performance of the applicant.

6.6. An online referee report will be sent to the six (6) of the identified consultants (see 6.4) with whom the applicant has worked in a clinical capacity.

6.7. An applicant must receive a minimum of five (5) valid reports to continue in the selection process. Of the five (5) reports received at least one must be obtained from a FRACS Paediatric Surgeon (or a Vocationally Registered Paediatric Surgeon in New Zealand) (see 6.11). The names of the referees will not be released to applicants.

6.8. If a referee has provided a response for less than 85% of the report (17 out of 20 questions answered), the report will be deemed invalid and will not be used as part of the selection process.

6.9. Where an applicant has received an invalid report another referee will be selected and contacted.

6.10. An applicant who has received four (4) or less reports at the closing date of the referee reporting process will be considered ineligible and not progress to the next stage of the selection process.

6.11. The Board will consider an application ineligible where no FRACS Paediatric Surgical Consultant (or a Vocationally Registered Paediatric Surgeon in New Zealand) referee report has been obtained.

6.12. The referee report is an online process only and can only be submitted via the link provided.

6.13. Applicants will be required to complete a self-assessment. Information collected will not be used in the selection process, but may be used by the Board at a later date in research to investigate its efficacy as a selection or training tool.

An email will be sent to each applicant with instructions on how to complete the self-assessment. The
self-assessments will be conducted during the referee reporting period of 27 April 2017 AEST and 24 May 2017 (5:00pm AEST)

6.14. The Board will consider an application ineligible where no self-assessment has been obtained.

6.15. Applicants who cannot provide referees according to these regulations due to exceptional circumstances must apply to the Board of Paediatric Surgery for consideration of these circumstances by 5:00pm AEDT 27 January 2017 (e.g. applicant has been in a non-clinical environment for the past two (2) years).

7. SEMI-STRUCTURED PANEL INTERVIEW

7.1. The interview is designed to identify factors deemed important to the practice of paediatric surgery. The interview is also designed to enable an interview panel to evaluate non-technical professional skills and to provide the applicant with an opportunity to demonstrate his or her professional behaviours.

7.2. The interview will contribute to 45% of the overall selection mark.

7.3. Interview notifications will be sent out at least ten (10) business days prior to the interview date. Applicants may be required to travel interstate/international for a selection interview. Applicants are responsible for all travel costs incurred when attending interviews.

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. It is the applicant’s responsibility to be aware of the interview date and make any requests for a specific time no later 5 May 2017. Applicants must be aware that requests for specific times may not be able to be accommodated.

7.5. The interviews will be conducted by a series of four (4) interview panels comprised of two (2) members of the Board of Paediatric Surgery or Paediatric Supervisors of Training with applicants rotating between panels. Each panel will be for no more than fifteen (15) minutes in duration.

7.6. Each panel forms an assessment both on the panel question and separately makes an assessment of the candidates communication skills demonstrated during the interview. The communication scores of each of the four panels are averaged to provide a fifth component contributing to the overall mark achieved in the interview.

7.7. Applicants will be asked the same 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 criteria particularly as they correlate to the nine college training competencies.

7.8. It is the responsibility of the applicant to arrive forty (40) minutes prior to the interview to prepare for panel one (1).

7.9. All applicants will be provided with the same set of papers or articles 30 minutes before their interview starting time to prepare for panel one (1). All applicants will deliver a five (5) minute presentation based on the papers/articles in panel one (1). Questions from the panel members will relate to the critical appraisal process or problem solving methods used by the applicant to answer the set question/s.

7.10. Applicants will not be permitted to take any notes or papers into the interview panels.

7.11. Applicants will be scored using a structured scoring system and criterion statements. Each panel member will score each applicant individually on a specific form with a consensus score for the interview panel arrived at following the interview. The consensus score sheet will be used in the final ranking of suitable applicants.

7.12. Candidates will be scored against the following marking criteria:
- 1 – Unsuitable
- 2 – Borderline
- 3 - Suitable
- 4 - Good
- 5 – Very good
7.13. Applicants must score a minimum of 15 marks out of a maximum of 25 of the total interview score to be eligible to progress to the final stage of the selection process and be ranked with an overall score.

7.14. The minimum standard score needed to be appointed to Paediatric Surgery training is 72%. Applicants who do not achieve a score of 72% or above will be deemed unsuitable for training and therefore unsuccessful in the selection process.

8. FEEDBACK

8.1. FEEDBACK TO UNSUITABLE AND UNSUCCESSFUL APPLICANTS

8.1.1. Applicants who do not meet a minimum requirement or short listing condition will be deemed unsuitable for selection and their application will not be considered further in the selection process.

8.1.2. Applicants who do not rank high enough in the selection process will be deemed unsuccessful for selection and their application not considered further in the selection process.

8.1.3. All unsuitable applicants will be notified in writing as soon as is practical of the following:

   a. Information on the overall percentage scores for the Structured Curriculum Vitae, Online Structured Referee Report or Semi-Structured Interview as applicable.
   b. Notification of the selection condition(s) which the applicant failed to satisfy.

8.1.4. Applicants who satisfy the selection condition but who do not rank high enough in comparison to the available number of training positions will be deemed unsuccessful in the selection process. These applicants will be notified in writing as soon as is practical of the following:

   a. That they have not ranked high enough to secure a training position and have therefore been unsuccessful.
   b. Information on the overall percentage scores for the Structured Curriculum Vitae, Online Structured Referee Report, and Semi-Structured Interview as applicable.

8.1.5. All feedback requests must be submitted by email. All feedback to applicants will be provided by email, no verbal feedback will be provided.

8.2. FEEDBACK TO SUCCESSFUL APPLICANTS

8.2.1. Applicants who satisfy the selection conditions and who rank high enough in comparison to the available training positions will be deemed successful in the selection process. These applicants will be notified in writing on 24 July 2017 with the following documents:

   a. Correspondence that they have been successful in the selection process and are being offered a position on the Training Program.
   b. A copy of the regulations for the Training Program.
   c. An acceptance form and Training Agreement for the Training Program.

8.2.2. Acceptance of the offer to the Training Program is provisional on the following conditions:

   a. Acceptance to take up the training position identified in the letter of offer, which may be changed at the discretion of the Board. Applicants must be prepared to be assigned to a training position anywhere in Australia or New Zealand. Given that RACS is not the employing body, applicants must also satisfy the employment requirements of the institution in which the allocated training position is located or the offer of training.
   b. Agreement to abide by the RACS policies and Training Program regulations at all times.
   c. Submission of the acceptance form for the Training Program and Trainee Declaration Form, in accordance with instructions given, prior to the communicated due date.
   d. Applicants who do not satisfy any of the acceptance conditions outlined these regulations or who decline the offer to the Training Program will automatically forfeit their offer of a position on the Training Program.
9. **SELECTION PROCESS REVIEW**

9.1. The Board will review the selection process on an annual basis.

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