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 Royal Australasian College of Surgeons Board of Otolaryngology Head and Neck Surgery (Board of OHNS).

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

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

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

1.1.7. **Training Region** means a state of Australia where a trainee is allocated and will most likely remain in for the duration of their training. In exceptional circumstances a trainee can be allocated to New Zealand but this will only occur on agreement between the trainee and relevant Regional Training Committees.

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 2020 intake.

1.3. 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 and accountable process.

2.1.2. The selection process will be documented 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 selection process will conform to the requirements agreed by the RACS Board of Surgical Education and Training (BSET) and will meet RACS’ generic eligibility requirements.

2.1.5. The number of trainees selected in any year will depend on the number of accredited hospital training posts available in the following year that allow for progression without interruption.
3. GENERIC ELIGIBILITY FOR APPLICATION TO THE SET PROGRAM IN OHNS

Prior to applying to the SET program in OHNS, applicants must first register with RACS via its website. The Registration period is 4 January - 1 February 2019.

The generic eligibility requirements are included in the Registration for Selection into SET and Selection to Surgical Education and Training policies. Applicants not registered cannot lodge an application for the SET Program.

Applicants must meet the generic eligibility criteria requirements for the SET Program.

Applications can only be submitted online via the RACS website between 27 February - 27 March 2019 (refer 4.1.6).

4. OHNS SPECIFIC ELIGIBILITY REQUIREMENTS FOR APPLICATION

4.1. Eligibility Assessment

4.1.1. For the purposes of these Regulations, a SET Trainee is defined as being registered with RACS as a trainee in another SET program at the time of application.

4.1.2. For the purposes of these Regulations, full-time research is defined as two (2) or more years in full-time research and study towards a higher degree (Masters by research or PhD) in the two years immediately preceding application.

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

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

If future rotations are used to meet minimum eligibility and the applicant is successful, evidence must be provided upon completion of each requirement. Requirements must be completed by the 31 December 2019 without exception.

4.1.5. Documentary evidence for all requirements must be provided at the time of application or the entry will not be considered. No late documentation will be accepted.

4.1.6. Applications must be submitted via the RACS online application system at www.surgeons.org. Applications close on 27 March 2019 (12:00pm AEDT).

a. By submitting an application, an applicant certifies 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.

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.

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. By submitting an application, the applicant is consenting to references being collected, and to the named surgical consultants and non-surgical referees within the application providing the information requested as part of the Reference Report process.
4.1.9. By submitting an application, the applicant is consenting to members of the Board and other persons appointed by the Board Chair, in accordance with these Regulations, conducting the selection process and making decisions relating to their application and selection despite having made decisions previously that may be adverse to the applicant. This includes decisions made during the current and previous selection processes and other training and assessment matters.

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

4.2. Applicants who are not SET trainees and not in full-time research, must complete:

4.2.1. The RACS Generic Surgical Sciences Examination (with a pass grade) by close of applications.

4.2.2. A Selection Eligibility Form completed by a supervising Otolaryngology, Head and Neck Consultant and attached to your online application form.

4.2.3. A minimum of 10 consecutive weeks in an Otolaryngology Head and Neck Unit completed since 1 January 2017 and before close of applications.
   a. The unit must be staffed by Consultants with a FRACS in OHNS.
   b. At least one supervising Consultant from this rotation must be provided as a referee on the application form.
   c. Consideration will be given to the rotation being undertaken at the time of application if it is at least over eight (8) weeks complete.

4.2.4. A minimum 20 weeks of surgical experience. This is in addition to 4.2.3 and must have been completed since 1 January 2017 and before 31 December 2019.
   a. Rotations must be at least 10 continuous weeks each to be included.
   b. Surgical rotations are defined as rotations in one of the nine specialties of RACS.
   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.

4.2.5. Minimum 8 consecutive weeks in a dedicated Emergency Department completed since beginning of intern year and before close of applications.

4.2.6. Minimum 8 consecutive weeks in a dedicated Intensive Care Unit completed since beginning of intern year and before 31 December 2019.

4.3. SET trainees must complete:

4.3.1. The RACS Generic Surgical Sciences Examination (with a pass grade) by close of applications.

4.3.2. A Selection Eligibility Form completed by a supervising Otolaryngology, Head and Neck Consultant and attached to your online application form.

4.3.3. A minimum of 10 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 a FRACS in OHNS.
   b. At least one supervising Consultant from this rotation must be provided as a referee on the application form.
4.3.4. A minimum 20 weeks of surgical experience. This is in addition to 4.3.3 and must have been completed since 1 January 2017 and before 31 December 2019.
   a. Rotations must be at least 10 continuous weeks each to be included
   b. Surgical rotations are defined as rotations in one of the nine specialties of RACS.
   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.

4.3.5. 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. The RACS Generic Surgical Sciences Examination (with a pass grade) by the close of applications.

4.4.2. A Selection Eligibility Form completed by a supervising Otolaryngology, Head and Neck Consultant and attached to your online application form.

4.4.3. A minimum of 10 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 a FRACS in OHNS.
   c. At least one supervising Consultant from this rotation must be provided as a referee on the application form.

4.4.4. A minimum 20 weeks of surgical experience. This is in addition to 4.4.3 and must have been completed in the three (3) years prior to commencing full-time research and before 31 December 2019.
   a. Rotations must be at least 10 continuous weeks each to be included.
   b. Surgical rotations are defined as rotations in one of the nine specialties of RACS.
   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.

4.4.5. Minimum 8 consecutive weeks in a dedicated Emergency Department completed since beginning of intern year and before close of applications.

4.4.6. Minimum 8 consecutive weeks in a dedicated Intensive Care Unit completed since beginning of intern year and before 31 December 2019.
5. SELECTION PROCESS OVERVIEW

5.1. Applicants who satisfy the generic and specialty specific eligibility and application requirements will be considered in open competition for selection to the SET program. Applicants who do not satisfy the generic and specialty specific eligibility requirements will be considered ineligible and informed of the criterion not met no later than 10 business days after the close of applications.

5.2. The selection process uses three selection tools, each contributing the following weightings to the overall selection score out of 100:
   a. Structured Curriculum Vitae 20%
   b. Reference Reports 40%
   c. Semi-Structured Interview 40%

5.3. Applicants must score a minimum of 50% for the Structured Curriculum Vitae to be deemed suitable for selection. This will be scored in accordance with Section 6 of these Regulations.

5.4. Applicants who satisfy the standards in Regulation 5.3 will proceed to the preparation of a Reference Report. Applicants who do not satisfy the standards in Regulation 5.3 will be considered ineligible and not proceed further in the selection process.

5.5. Applicants must score a minimum of 50% for the Reference Report to be deemed suitable for Selection. This will be scored in accordance with Section 7 of these Regulations.

5.6. Applicants who satisfy the standard in Regulation 5.5 will be ranked according to their combined score for the Structured Curriculum Vitae and Reference Report.

5.7. Only top ranked suitable applicants following Regulation 5.6 will proceed to the Semi-Structured Interview. The number of applicants interviewed will be based on the estimated number of positions available in 2020. All other applicants will be deemed unsuccessful and will not proceed further in the selection process.

5.8. Applicants will be informed of their performance in the Reference Report and shortlisting for the Interview no later than 10 business days prior to the Interview date.

5.9. The interview will be scored in accordance with Section 8 of these Regulations.

5.10. Applicants who attend the Semi-Structured Otolaryngology Head and Neck Surgery Panel Interview must achieve a weighted interview score of 25/40 or greater to meet the minimum standard for selection. Applicants who attend the Semi-Structured Otolaryngology Head and Neck Surgery Panel Interview and achieve a weighted interview score of less than 25/40 will be considered ineligible and will not proceed further in the selection process.

5.11. On completion of the Interviews applicants who meet the minimum standard for selection will be ranked according to their combined score for the Structured Curriculum Vitae, Reference Report and Interview, which equates to a score out of 100 selection points.

5.12. The entry point into the SET Program for the 2019 intake is SET1 or Novice level. Allocation to available positions anywhere in Australia will be determined by the Board taking into consideration requirements of the training program, an applicant’s final ranking in the selection process, region of preference and any extenuating circumstances.

5.13. Applicants who attend the Interview will be notified of the outcome of their application on 23 July 2019.

5.14. Aboriginal and Torres Strait Islander Selection Initiative

5.14.1. RACS Council has approved the Aboriginal and Torres Strait Selection Initiative policy and the Board of OHNS will implement this initiative in the 2018 process for the 2019 Intake.
5.14.2. Under this initiative, it is expected that there will be one (1) post available for the 2019 intake.

5.14.3. An Applicant will be considered for the initiative post if the following conditions apply:
   a. They have identified as Aboriginal or Torres Strait Islander in the registration process, and
   b. They have met the eligibility requirements for membership of Australian Indigenous Doctors’ Association, and
   c. They have met the eligibility requirements of 5.2 – 5.4, and
   d. They have met the minimum standard for selection as per 5.5.1.

5.14.4. In the circumstance of more than one applicant meeting the above criteria, the post will be allocated to the highest ranking applicant.

5.14.5. An applicant’s status as Aboriginal or Torres Strait Islander will only be known to RACS staff and Board members directly involved in the Selection process, for the purposes of implementing the Selection Initiative.

6. STRUCTURED CURRICULUM VITAE

The Structured Curriculum Vitae (CV), included in the online application form, captures an applicant’s surgical experience, other qualifications, publication and presentation history and skills courses.

6.1. Scoring

6.1.1. The CV will be scored by a Board member and the RACS Executive Officer using the structured scoring system outlined in 6.2-6.6.

6.1.2. If the scoring Board member and RACS Executive Officer are unable to determine a CV component score or an applicant requests a reconsideration of a score, it will be referred to the Board Chair.

6.1.3. Any entry without documentation that clearly supports and verifies it will not be considered and/or scored. No further documentation can be provided after submission of application.

6.2. The CV will be scored out of a maximum 20 points.

6.2.1. Surgical Experiences (maximum 6 points)
6.2.2. Skills Courses (maximum 1 points)
6.2.3. Qualifications (maximum 5 points)
6.2.4. Presentations (maximum 3 points)
6.2.5. Publications (maximum 5 points)

6.3. Surgical Experience (maximum 6 points)

6.3.1. Rotations less than 10 continuous weeks duration by the close of applications will not be scored.
6.3.2. Rotations longer than 20 weeks will be scored up to the maximum allowable points per rotation.
6.3.3. Rotations used in Regulation 4.1 will not be scored.
6.3.4. Only surgical rotations of the RACS specialties will be scored.
6.3.5. Mixed rotations will be scored as surgery in general rotations.
6.3.6. Surgical nights rotations will not be scored.
6.3.7. Surgical relief rotations will not be scored unless at least 10 weeks is spent in one unit and documentation explicitly states this.
6.3.8. Private assisting will not be scored.
6.3.9. Rotations that were not full-time will be scored pro-rata on presentation of detailed evidence of hours worked.

6.3.10. Rotations commenced after the closing date of applications will not be scored.

6.3.11. Rotations 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, letter of offer or roster is not adequate documentation and will not be scored.

6.3.12. Scoring
   a. A 10 week rotation in Otolaryngology, Head and Neck Surgery is scored 2 points.
   b. A six month or longer appointment in Otolaryngology, Head and Neck Surgery is scored 4 points
   c. A 10 week rotation in another surgical discipline (as defined in 4.4.3) is scored 1 point.
   d. A six month or longer appointment in another surgical discipline (as defined in 4.4.3) is scored 2 points.

6.4. Skills Courses (maximum 1 point)
   6.4.1. Only EMST, CLEAR, ASSET, CCReSP, NOTSS and TiPS (or international equivalents) will be scored.
   6.4.2. Courses must be completed and all assessments passed prior to the close of applications.
   6.4.3. Certificate of attendance or letter of completion must be provided. Entries without adequate documentation will not be scored.
   6.4.4. Each course will be scored 0.5 point to a maximum of 1 point.

6.5. Qualifications (maximum 5 points)
   6.5.1. 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.
      c. A Master of Surgery completed outside of Australia or New Zealand is considered equivalent if the candidate completed a minimum 1 year of full time study and a thesis. A letter from the supervisor outlining these criteria must be provided. A clinically based MS degree is not accepted.
   6.5.2. A Bachelor of Dental Surgery awarded by the close of applications will be scored.
   6.5.3. SET trainees who have satisfactorily completed at least one full training year prior to the closing date of application will be scored.
   6.5.4. A Fellowship of the Royal Australasian College Of Surgeons will be scored.
   6.5.5. Scoring does not include:
      a. primary medical degrees (MBBS or equivalent)
      b. Bachelor Degrees with or without Honours (with the exception of a 6.5.2)
      c. Post-graduate and/or Graduate diplomas or certificates
      d. Masters of Surgery that required less than one year full-time study (or equivalent) or was clinically-based
      e. Qualifications not completed by the close of applications.
      f. Entries without adequate documentation.
6.5.6. Scoring
   a. A PhD relevant to medicine is scored 4 points.
   b. A PhD not relevant to medicine is scored 2 points.
   c. A Master’s degree by thesis, relevant to medicine is scored 2 points.
      ● Evidentiary documentation must clearly demonstrate relevance to medicine
   d. A Master’s degree by course work, relevant to medicine is scored 0.5 point.
      ● This includes Masters obtained with the completion of a thesis or dissertation in addition to course work.
      ● Evidentiary documentation must clearly demonstrate relevance to medicine.
   e. A Bachelor of Dental Surgery is scored 1 point.
   f. Satisfactory completion of at least one (1) full year of SET in one of the other RACS surgical specialties is scored 2 points for current SET trainees.
   g. FRACS is scored 5 points.

6.6. Presentations (maximum 3 points)
   6.6.1. Scoring only includes medically-relevant presentations within five (5) years prior to the close of applications.
   6.6.2. 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.
   6.6.3. Scoring only includes presentations made at a scientific meeting or conference subject to peer reviewed abstract selection.
   6.6.4. Scientific meetings and conferences are classified by their intended audience, not title. For example, the Queensland RACS ASM is a regional meeting.
   6.6.5. Presentations of a similar topic presented at one or more meetings or listed in the Publications section will only be scored once. The higher scoring entry will take precedence.
   6.6.6. Entries without documentation that states paper title, meeting date and author will not be scored.
   6.6.7. Entries that include full conference programs without easily identifiable reference to presentation will not be scored.
   6.6.8. Scoring
      a. Each poster presentation is scored 0.25 point.
      b. Each oral presentation at a regional meeting is scored 0.5 point.
      c. Each oral presentation at a national or international meeting is scored 1 point.

6.7. Publications (maximum 5 points)
   6.7.1. Scoring only includes publications relevant to medicine in a peer-reviewed publication listed on Medline or the Australian Journal of Otolaryngology.
   6.7.2. Publications must be published or accepted for publication within five (5) years prior to the close of applications.
   6.7.3. Must provide adequate proof that the article has been accepted for publication.
6.7.4. Publications of a similar nature published or listed in the Presentations section will be scored once. The higher scoring entry will take precedence.

6.7.5. Publications that may be scored include case reports, original research or review journal articles and book chapters.

6.7.6. Letters to the Editor will not be scored.

6.7.7. Presentation Abstracts will not be scored.

6.7.8. Multiple chapters in the one book will be scored only once.

6.7.9. Entries without adequate proof of publication will not be scored.
   a. first page of article that lists journal title, article, publication date and authors is acceptable, or
   b. Letter from editor accepting article for publication following final edits

6.7.10. Scoring
   a. A case report where the applicant is first author is scored 0.25 point.
   b. An article or book chapter where the applicant is the first author is scored 3 points.
   c. An article or book chapter where the applicant is not the first author is scored 1 point.

7. STRUCTURED REFEREE REPORTS

The referee collection period is from 19 April – 31 May 2019.

7.1. Surgical Referees

Applicants must contact surgical consultants prior to application only to obtain permission to provide contact details and advise that they may be contacted to provide a reference.

The applicant must provide the following:

7.1.1. A minimum of eight (8) surgical consultants including all OHNS consultants who have worked with the applicant since 1 January 2017 and prior to the closing date of applications.

7.1.2. Referees must be surgical consultants at the time of supervision and able to comment on all aspects of the applicant's work-place performance.
   a. Referees cannot be a RACS SET trainee at the time of the rotation,
   b. Referees cannot be an IMG under assessment of RACS at the time of the rotation.

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

7.1.4. SET Trainees (as per 4.1.1)
   a. All surgical consultants from an OHNS rotation must be included even if the rotation was prior to 1 January 2017.

7.1.5. Applicants in Full-time Research (as per 4.1.2)
   a. Surgical referees may be provided from part-time clinical work if all other criteria are met.
   b. All surgical consultants from an OHNS rotation must be included even if the rotation was prior to 1 January 2017.
   c. Applicants may provide referees from the two clinical years prior to commencing full-time research.
7.2. **Non-Surgical Referees**

Applicants must contact referees prior to application only to obtain permission to provide contact and advise that they may be contacted to provide a reference. The applicant must nominate the following:

7.2.1. Four (4) non-surgical senior staff members they have worked with from 1 January 2015 and prior to closing date of applications including at least one Nursing Unit Manager.

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

7.2.2. Referees provided must be:

a. Medical Consultants (AHPRA recognised medical Specialists), or
b. Nursing Unit Managers or equivalent, or
c. Research Supervisors or senior Laboratory Administrators (if in full-time research only)

7.3. **Process**

7.3.1. Applicants who satisfy the standards in Regulation 5.3 (the Structured Curriculum Vitae) will proceed to the preparation of a Reference Report.

7.3.2. To ensure confidentiality of the reference report process the names of the referees contacted will not be released to applicants.

7.3.3. The preparation of the Reference Report for each applicant will be the responsibility of two people approved by the Board Chair, with at least one being a member of the Board (the Assessors). The Assessors will ordinarily be OHN surgeons.

7.3.4. The Assessors together (via teleconference or in person) will personally speak with three surgical consultants and one non-surgical referee with whom the applicant has worked to assist them in preparing a Reference Report.

7.3.5. In selecting the surgical consultants and non-surgical staff for the Reference Report, the Assessors may contact any consultant or non-surgical staff member the applicant has worked with in Australia or New Zealand in the two years prior to application.

7.4. **Referee Report Content**

7.4.1. A pro forma Reference Report will be used. The Reference Report will have questions focused on the following areas:

a. Technical expertise
b. Medical expertise
c. Judgement- clinical decision making
d. Professionalism and ethics
e. Communication
f. Collaboration and teamwork
g. Management and Leadership
h. Health Advocacy
i. Scholarship and Teaching
j. Professionalism

7.4.2. Advanced notification may be sent to all referees to be contacted.
7.4.3. Having considered the responses from all interviews, the Assessors must arrive at a consensus score using the scoring guidelines and scales shown in the Reference Report. Notes justifying the score given must be recorded in the Reference Report.

7.4.4. Applicants must score a minimum of 50% for the Reference Report to be deemed suitable for selection.

7.4.5. For applicants satisfying the minimum standard in Regulation 7.4.4, the Reference Report score will be recorded as a percentage. The selection tool weighting will then be applied which is 40%. As such, the applicant will receive a selection score for the Reference Report out of a maximum of 40 points.

8. SEMI-STRUCTURED OHNS PANEL INTERVIEW

8.1. Invitations for Interview

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

8.1.2. All interviews will be held at the Park Royal Airport Hotel in Melbourne on Saturday 15 June 2019. It is an applicant's responsibility to make the appropriate travel arrangements and to meet costs incurred in attending the interview.

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

8.1.4. Applicants who do not present for the interview at the scheduled time will be considered ineligible and not considered further in the selection process.

8.2. Interview Structure

8.2.1. The interview is comprised of three (3) stations. The three (3) interview panels each consist of two (2) interviewers.

a. An observer may attend some interview stations. Observers have no input to candidates’ scores for the station.

b. The role of the observer is to witness but not participate.

c. An observer may attend an interview station for education, training or interviewer assessment.

d. If an observer is present, the applicant will be notified prior to the commencement of the interview.

8.2.2. Each interview panel will present two (2) scenarios with associated questions. There will be 5 minutes reading time before each panel.

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

8.2.4. 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.

8.2.5. The interview may assess any of the following attributes:

a. Collaboration and Teamwork
b. Communication
c. Health advocacy
d. Judgement - clinical decision making
e. Management and Leadership
f. Professionalism and Ethics
g. The ability to interact effectively with peers, mentors, members of the health care team, patients and their families
h. Effective spoken communication / Preparedness for OHNS training / Overall impression.

8.3. Interview Scoring

8.3.1. The Interview will be scored out of a total of 300 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 (excluding any observer) will score the applicant independently and all scores will be added to give the final interview score.
8.3.4. Each scenario will be worth 25 points.

9. FEEDBACK TO APPLICANTS

9.1. Applicants who are considered ineligible
Applicants considered ineligible in the selection process will be informed in writing of the following:
9.1.1. the criterion not met and that they will not progress further in the selection process;
9.1.2. scores and comparable performance of any component completed.

9.2. Applicants who are considered unsuccessful
Applicants considered unsuccessful in the selection process will be informed in writing of the following:
9.2.1. That they have met the minimum standard for selection but have not ranked high enough to be offered a position.
9.2.2. Information on their position in the wait list should a position become available.
9.2.3. Scores and comparable performance of all components.

9.3. Applicants who are successful in the selection process
Applicants who are successful in the selection process will be informed in writing of the following:
9.3.1. That they have been successful in the selection process and are being offered a position on the SET Program.
9.3.2. Scores of all components
9.3.3. That allocation of training region will occur in accordance with 5.12 at the next scheduled Board meeting (usually August).
9.3.4. Allocation to hospital posts within Training Regions will occur at the completion of the Selection process and be conducted by the relevant Regional Training Committee of the Board.
9.3.5. Acceptance of the offer to the SET Program will be conditional on the following:
   a. Applicants must be prepared to be assigned to any training region by the Board throughout their SET Program.
   b. RACS is not the employing body and applicants must also satisfy the employment requirements of the institution in which the allocated training position is located.
   c. Agreement to abide by the RACS policies and regulations at all times.
   d. Submission of the signed SET Trainee Agreement prior to the communicated offer expiry due date.
9.3.6. Applicants who do not satisfy any of the above conditions, or who decline the offer, will automatically forfeit the offer.

10. **GARNETT PASSE AND RODNEY WILLIAMS MEMORIAL FOUNDATION (GP&RWMF) SCHOLARSHIP/SURGEON SCIENTIST PROGRAM**

10.1.1. Each year the GP&RWMF offer Academic Surgeon Scientist Research scholarships for selected research projects to successful applicants to the OHNS SET program.

10.1.2. At the time of application, applicants wishing to apply for a scholarship will be requested to indicate their interest and permission for contact details to be given to the GP&RWMF.

10.1.3. GP&RWMF will be responsible for the publicising of available research projects and the process for contacting relevant Professors.

10.1.4. Applicants wishing to apply for a scholarship must contact the supervising Professor directly indicating their interest.

10.1.5. Selection into the SET in OHNS program as a Surgeon Scientist will occur if all the following conditions are met:
   a. The applicant is successful.
   b. The supervising Professor has selected the applicant as suitable for the research project (independently of the RACS SET selection process and these Regulations).
   c. The applicant meets the criteria in the GP&RWMF Conditions of Award.

10.1.6. 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.