



1.0 INTRODUCTION

- 1.1 These Regulations establish the principles, terms and conditions for the selection process for the Royal Australasian College of Surgeons (RACS) Surgical Education and Training Program in Neurosurgery (SET Program). These Regulations are applicable for the 2023 intake conducted during 2022 only. These Regulations may be changed from year to year and cannot be relied on for the intakes conducted in future years for the SET Program. Any regulations for the SET Program from any previous years are not applicable and cannot be relied on for meeting the SET Program requirements for the 2023 intake unless specifically stated in these Regulations.
- 1.2 The Board of Neurosurgery has introduced **Substantive Gender Equality** special measures for the purpose of achieving substantive equity between men and women and to give effect to the RACS Diversity and Inclusion Plan which sets targets for increased representation of women in SET across all specialties. The special measures will only be applied after final ranking of suitable applicants and in circumstances where substantive gender equality would otherwise not be met for female applicants based on ranking alone. Applying the special measures, the percentage of successful female applicants will be at least equivalent to their percentage of the total applicants, provide there are suitable female applicants.
- 1.3 The Board of Neurosurgery has introduced **Undersubscribed Regions** special measures for the purpose of correcting geographical imbalances in the neurosurgical workforce by better aligning the selection of trainees to regions with vacancies. The special measures apply preferencing of suitable applicants from Undersubscribed Regions after final ranking as detailed in these Regulations. Undersubscribed Regions are regions identified by the Board of Neurosurgery at the closing date for applications where the total number of existing trainees who identify that region as their Home Region is less than the total number of posts accredited in that Home Region, or there are no posts accredited in that Home Region. Suitable applicants from Undersubscribed Regions are those who have satisfied the standards for all four selection tools as detailed in these Regulations and have a Home Region which is identified as an Undersubscribed Region.
- 1.4 The RACS Council has approved the Aboriginal and Torres Strait Islander Trainee Selection Initiative. The Board of Neurosurgery has introduced the **Australian Indigenous** special measures to implement this initiative. The special measures are introduced for the purpose of addressing the low participation of Aboriginal and Torres Strait Islander in the SET Program. Applicants wishing to be considered for the Australian Indigenous special measures must, at the time of application, identify as a person of Aboriginal and/or Torres Strait Islander descent, applying with a Home Region in Australia and meeting the eligibility requirements for membership of Australian Indigenous Doctors' Association. The special measures apply preferencing of the top ranked Aboriginal and Torres Strait Islander applicant who, after final ranking, has satisfied the eligibility requirements and the standards for all four selection tools as detailed in these Regulations.

2.0 SELECTION CRITERIA

- 2.1 Applicants are expected as a minimum to satisfy the pre-vocational level of competence in each of the RACS competencies available on the RACS website at <u>www.surgeons.org</u>.
- 2.2 Applicants are expected to have adequate insight in neurosurgery to make an informed decision about the specialty as a potential career path.
- 2.3 Applicants are expected to have appropriate basic surgical skills including sterile techniques, suturing, selection and use of instrumentation and the ability to tie both single and double handed surgical knots and appropriate wound opening and closure skills.





- 2.4 Applicants are expected to be able to accurately perform detailed neurological histories and clinical examinations.
- 2.5 Applicants are expected to be able to perform the safe insertion of intracranial pressure monitors and management of the same.
- 2.6 Applicants are expected to be able to independently setup image guidance and registration.
- 2.7 Applicants are expected to be able to competently perform a safe lumbar puncture.
- 2.8 Applicants are expected to be able to independently balance, setup, and drape an operating microscope and understand the use of the controls and functions.
- 2.9 Applicants are expected to be able to perform the assessment and management priorities of a patient with severe head injury.
- 2.10 Applicants are expected to be able to perform the clinical assessment of a multi-trauma patient.
- 2.11 Applicants are expected to be able to perform the safe patient positioning for basic spinal and cranial surgical procedures.
- 2.12 Applicants are expected to be able to conduct the early management and investigation of a patient with a potential spinal injury.
- 2.13 Applicants are expected to be able to manage the post-operative care of a patient following craniotomy.
- 2.14 Applicants are expected to be able to perform ventriculostomy placement and management.
- 2.15 Applicants are expected to be able to perform the drainage of a chronic subdural haematoma.
- 2.16 Applicants are expected to be able to perform all parts of an acute trauma craniotomy or decompressive craniectomy for stroke, with the exception of the evacuation.
- 2.17 Applicants are expected to be able to perform the clinical assessment and interpretation of images relating to neurosurgical presentations commonly seen in an Emergency Department and provide a differential diagnosis and management plan. The presentations include, but are not limited to, degenerative spinal pathology, tumours, haemorrhage, cranial and spinal trauma.
- 2.18 Applicants are expected to demonstrate cultural competence and cultural safety with respect to the healthcare of Aboriginal and Torres Strait Islander and Māori peoples, and culturally and linguistically diverse patients.

3.0 ELIGIBILITY REQUIREMENTS

- 3.1 Applicants intending to apply for selection to the SET Program must register in accordance with the RACS Registration for Selection into Surgical Education and Training Policy available at <u>www.surgeons.org</u>. Applicants not registered cannot lodge an application for the SET Program.
- 3.2 Applicants must satisfy the generic eligibility requirements for the SET Program, being those outlined in the RACS Selection to Surgical Education and Training Policy available at <u>www.surgeons.org</u>.





- 3.3 All applicants will be allowed a maximum of four attempts at selection into the SET Program in Neurosurgery. The number of attempts are counted from the 2022 intake onwards. Applications withdrawn after the sitting of the Neurosurgery Anatomy Examination will be counted as an attempt.
- 3.4 At the time of application, applicants must nominate a **Home Region** where, if selected, they will ordinarily spend the majority of their SET Program. The nominated Home Region cannot be changed in future selection applications unless a written request is made to the Board of Neurosurgery Chair prior to the closing date for applications and approved at the Board of Neurosurgery Chair's discretion on the grounds of exceptional circumstances. The Home Regions available are as follows:
 - a) Aotearoa New Zealand
 - b) Australian Capital Territory
 - c) New South Wales
 - d) Northern Territory
 - e) Queensland
 - f) South Australia
 - g) Tasmania
 - h) Victoria
 - i) Western Australia
- 3.5 In addition to the generic eligibility requirements for application to selection, applicants with a Home Region in Australia must at the time of application:
 - a) have permanent residency or citizenship of Australia;
 - b) have general (unconditional) registration in Australia;
 - c) have completed a minimum 24 weeks' full-time equivalent dedicated neurosurgical experience in their Home Region in the three years immediately prior to application.
- 3.6 In addition to the generic eligibility requirements for application to selection, applicants with a Home Region of Aotearoa New Zealand must:
 - a) have permanent residency or citizenship of Aotearoa New Zealand;
 - b) have general scope registration or restricted general scope registration in neurosurgery in Aotearoa New Zealand;
 - c) have completed a minimum 24 weeks' full-time equivalent dedicated neurosurgical experience in Aotearoa New Zealand in the three years immediately prior to application.
- 3.7 In addition to the generic eligibility requirements, applicants must have satisfactorily completed the RACS Generic Surgical Sciences Examination at the time of application.
- 3.8 On written application prior to the closing date for applications, the Board of Neurosurgery Chair may approve at their discretion revised eligibility requirements for clause 3.5 or 3.6 for applicants who would have satisfied the eligibility requirements in place immediately prior to the introduction of the separate requirements for Australia and Aotearoa New Zealand.

4.0 APPLICATION PROCESS AND REQUIREMENTS

4.1 Applications can only be submitted by registered applicants using the neurosurgery online application form. Applications must be submitted prior to the advertised closing date for applications. No other form of application will be accepted.





- 4.2 Applicants must pay a selection application fee of \$AUD985 prior to the advertised closing date for applications to be considered for selection. This fee is non-refundable and is inclusive of the examination fee. Failure to pay the selection application fee by the communicated due will result in the application being withdrawn.
- 4.3 The information collected as part of the application and during the selection process will be used to assess the applicant's suitability for the SET Program. Information may be disclosed to other parties or where required to do so by law. The Board of Neurosurgery Chair or nominee may verify the information provided within the application with external institutions or individuals and gather additional information to process the application. Failure to provide the information requested in the application or by the Board of Neurosurgery Chair or nominee will deem the applicant ineligible for selection and their application will be withdrawn. By submitting an application, the applicant is consenting to the collection, use, disclosure and storage of the information by the Board of Neurosurgery and its agents.
- 4.4 By submitting an application, the applicant is consenting to confidential references being collected, and to the named neurosurgical consultants within the application disclosing relevant information requested as part of the Reference Report process. The applicant accepts the references are collected in confidence and that a copy of the Reference Report will not be made available to the applicant. The applicant accepts they will not be provided with additional feedback on the Reference Report or provided with the names of the neurosurgical consultants contacted.
- 4.5 By submitting an application, applicants are certifying that the information provided is correct and in accordance with these Regulations and the instructions provided in the application form. If it is subsequently discovered that the applicant has provided incomplete, incorrect or misleading information, either intentionally or by mistake, the applicant may be automatically deemed unsuitable for selection.
- 4.6 By submitting an application, applicants are consenting to members of the Board of Neurosurgery and other persons appointed by the Board of Neurosurgery 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.

5.0 SELECTION PROCESS

- 5.1 Applicants who satisfy the eligibility and application requirements will be considered for selection to the SET Program.
- 5.2 The selection process uses four selection tools, each contributing the following weightings to the overall selection score out of 100:

a)	Structured Curriculum Vitae	10%
b)	Neurosurgery Anatomy Examination	30%
c)	Reference Report	30%
d)	Neurosurgery Semi-Structured Interview	30%

5.3 Applicants must score a minimum of 50.00% (5.5 out of 11 points) for the Structured Curriculum Vitae to be deemed suitable for selection. This will be scored in accordance with Section 6.





- 5.4 Applicants must score a minimum of 70.00% (168 out of 240 marks) for the Neurosurgery Anatomy Examination to be deemed suitable for selection. This will be scored in accordance with Section 7.
- 5.5 Applicants will receive written notification of their performance in the Structured Curriculum Vitae and Neurosurgery Anatomy Examination.
- 5.6 Applicants who satisfy the standards in Regulation 5.3 and 5.4 will be ranked according to their combined score for the Structured Curriculum Vitae and the Neurosurgery Anatomy Examination with the selection tool weightings applied (which equates to a score out of 40 points). All other applicants will be deemed unsuitable, will not be ranked and will not proceed further in the selection process.
- 5.7 Following Regulation 5.6, the top 34 ranked applicants will be shortlisted for the Reference Report. All other applicants will be deemed unsuccessful and will not proceed further in the selection process. In the event two or more applicants are ranked equally at the cut-off point for shortlisting, the number of shortlisted applicants will be increased to include those applicants.
- 5.8 Applicants must score a minimum of 70% (49 out of 70 points) for the Reference Report to be deemed suitable for selection. This will be scored in accordance with Section 8.
- 5.9 Applicants who satisfy the standard in Regulation 5.8 will be ranked according to their combined score for the Structured Curriculum Vitae, Neurosurgery Anatomy Examination and Reference Report with the selection tool weightings applied (which equates to a score out of 70 points). All other applicants will be deemed unsuitable, will not be ranked and will not proceed further in the selection process.
- 5.10 Following Regulation 5.9, a total of 24 applicants will be shortlisted for the Neurosurgery Semi-Structured Interview (shortlisted applicants). The Interview shortlisted spots will be allocated in order of overall ranking of suitable applicants.
- 5.11 For the purposes of Regulation 5.10, in the event two or more applicants are ranked equally at the cut-off point for shortlisting, the Reference Report score will be the differentiating factor. In the event the applicants remain equal, the Neurosurgery Anatomy Examination will be the differentiating factor. In the event the applicants remain equal, the number of shortlisted applicants will be increased to include those applicants.
- 5.12 Applicants will receive written notification of their performance in the Reference Report and shortlisting for the Interview at least two weeks prior to the Interview date. Applicants not shortlisted for the Interview will be deemed unsuccessful and will not proceed further in the selection process.
- 5.13 Shortlisted applicants must score a minimum of 50% (8 out of 16 points) for the Interview to be deemed suitable for selection. The Interview will be scored in accordance with Section 9.
- 5.14 Applicants who satisfy the standard in Regulation 5.13 will be ranked according to their combined score for the Structured Curriculum Vitae, Neurosurgery Anatomy Examination, Reference Report and Interview with the selection tool weightings applied (which equates to a score out of 100 points). All other applicants will be deemed unsuitable, will not be ranked and will not proceed further in the selection process.





- 5.15 Following Regulation 5.14, offers for selection will be made applying the following process:
 - a) the top ranked applicant from each Undersubscribed Home Region (if any) applying the Undersubscribed Regions special measures; and
 - b) the top ranked Aboriginal and Torres Strait Islander applicant (if any) applying the Australian Indigenous special measures; and
 - c) the remaining in order of the overall ranking subject to the application of the Substantive Gender Equality special measures if substantive gender equality would otherwise not be met for female applicants based on ranking alone.
- 5.16 For the purpose of Regulation 5.15, in the event two or more applicants are ranked equally, the Reference Report score will be the differentiating factor. In the event the applicants remain equal, the Interview will be the differentiating factor. In the event the applicants remain equal, the Neurosurgery Anatomy Examination will be the differentiating factor. In the event the applicants remain equal, the source of Neurosurgery will have discretion to make the final decision and in doing so will have regard to the special measures in these Regulations and achieving their objectives.
- 5.17 The intake of applicants with an Australian Home Region combined will ordinarily be not more than the total number of vacancies in Australia for the intake year. The intake of applicants with Aotearoa New Zealand as their Home Region will ordinarily be not more than the total number of vacancies in Aotearoa New Zealand for the intake year. The Board of Neurosurgery may take on additional trainees to fill vacancies at its discretion or limit intakes to Australia or Aotearoa New Zealand based on Government directives.
- 5.18 Applicants will receive written notification of their performance and the outcome of their application within two weeks of the Interview. Suitable applicants not made an offer will be deemed unsuccessful.
- 5.19 Where an applicant is successful, they will receive notification of:
 - a) their Home Region;
 - b) their allocated training post for their first year of training (which may be outside their Home Region even where a position is vacant); and
 - c) associated training documentation.
- 5.20 Applicants must accept the offer in accordance with the instructions from the Board of Neurosurgery Chair within the timeframe specified and provide any documentation requested by the Board of Neurosurgery Chair. Failure to do so will be an automatic decline of the offer.

6.0 STRUCTURED CURRICULUM VITAE

- 6.1 Each Structured Curriculum Vitae will be scored by two people appointed by the Board of Neurosurgery Chair using a structured scoring system. Any discrepancy in the two scores which cannot be reconciled by the scorers will be reviewed by the Board of Neurosurgery Chair or nominee to determine the correct score.
- 6.2 For scoring of experience in clause 6.3 and 6.4 the following rules apply:
 - a) One-week full time will be 38 hours or more. Hours in excess of 38 hours do not attract additional points. Part time will be adjusted on a pro-rata basis according to average hours worked per week. For example, working 19 hours per week for 20 weeks will calculate to 10 full time weeks for scoring.





- b) The duration of the rotation includes any periods of paid leave up to a maximum of 25% of the rotation. Periods of paid leave beyond 25% of the rotation duration will not be scored. For example, a 12 week rotation during which the applicant took 6 weeks paid leave (50% of the rotation) will be scored as 9 weeks as the maximum leave permissible was 3 weeks (25% of the 12 weeks) so the additional 3 weeks of leave are not scored.
- c) The duration of the rotation excludes any periods of unpaid leave.
- d) The duration of the rotation and leave calculations will be rounded to the nearest whole week. For example, 12 weeks and 3 days will calculate to 12 weeks for scoring.
- 6.3 Neurosurgical experience completed at the closing date for applications may be scored 0.03 points for each full time week completed up to a maximum of **4 points** applying the rules in clause 6.2 and the following:
 - a) The neurosurgical experience must be undertaken as part of a dedicated neurosurgical rotation. The term "dedicated" requires the rotation to be solely focused on neurosurgery.
 - b) The neurosurgical rotation must include as a minimum the applicant participation in weekly consultant led neurosurgical educational sessions, monthly multidisciplinary neuroradiology and neuropathology meetings, and quarterly meetings of morbidity/mortality.
 - The neurosurgical rotation must include as a minimum the applicant participation in weekly c) acute/emergency care of neurosurgical patients, neurosurgical clinics or day to day ward management of neurosurgical patients and neurosurgical operating lists.
 - d) The first 24 weeks of full time neurosurgical experience which meets the scoring requirements above will not be scored as this is equivalent to the eligibility requirement completed by all applicants.
- 6.4 Intensive care unit (ICU) experience completed at the closing date for applications as part of a dedicated ICU term may be scored 0.1 points for each full week completed, up to a maximum of 1 **point** applying the rules in clause 6.2 and the following:
 - a) The ICU must be a specially staffed and equipped, separate and self-contained area of a hospital dedicated to the management of patients with life-threatening illnesses, injuries and complications, and monitoring of potentially life-threatening conditions.
 - b) Experience in a High Dependency Unit or a Cardiac or Coronary Care Unit will not be scored as ICU experience.
- 6.5 Journal articles, book chapters and case reports published or accepted for publication at the closing date for applications inclusive on a neurology, neuroscience or neurosurgical topic may be scored up to a maximum of **2 points** as follows provided each publication scored is on a sufficiently different topic and journal and case reports are in a journal indexed for MEDLINE or Scopus. The authorship is determined from the published article only. Published abstracts and letters to the editor are not scored.
 - a) Journal article listed as the 1st or senior author in a refereed journal 2.0 points
 - b) Book chapter listed as the 1st or senior author in a neurosurgical text 2.0 points 1.0 point
 - Journal article listed as the 2nd author in a refereed journal c)
 - d) Book chapter listed as the 2nd author in a neurosurgical text 1.0 point
 - e) Case report listed as the sole 1st author in a text or refereed journal 1.0 point
 - Technique article listed as the sole 1st author in a text or refereed journal f) 1.0 point





6.6 University qualifications completed at the closing date for applications, excluding the primary medical qualification unless otherwise specifically stated, may be scored up to a maximum of **3** points as follows:

a)	Doctor of Philosophy with a relevant thesis	3.0 points
b)	Doctor of Philosophy with a thesis in a related health discipline	2.0 points
c)	Doctor of Philosophy with a thesis in an unrelated discipline	1.0 point
d)	Doctoral degree with a relevant thesis	2.0 points
e)	Doctoral degree with a thesis in a related health discipline	1.0 point
f)	Masters degree in a relevant discipline	1.0 point
g)	Masters degree in a related health discipline	0.5 points
h)	Bachelor degree with honours by a relevant thesis	1.0 point
i)	Bachelor degree with honours by a related health discipline thesis	0.5 points
j)	A primary medical degree with honours by a relevant thesis	1.0 point
k)	Postgraduate diploma in a related health discipline	0.5 points

- 6.7 For clause 6.6, "**relevant**" is defined as one specifically on a neurology, neuroscience or neurosurgical topic. A "**related health discipline**" would be related to the practice of neurosurgery and include but not be limited to epidemiology, surgical education, traumatology, anatomy, critical care, biomedical sciences and engineering, medical imaging and basic sciences. The interpretation is at the discretion of the Board of Neurosurgery Chair or nominee.
- 6.8 Oral presentations or posters presented at the closing date for applications of the applicant's original work on a neurology, neuroscience or neurosurgical topic, selected through a published competitive abstract process and personally presented by the applicant at a national or international scientific meeting of 50 or more delegates may be scored up to a maximum of **1 point** as follows provided each is on a sufficiently different topic:

a)	Poster presentation (including poster side presentations)	0.5 points
b)	Oral presentation (not including poster side presentations)	1.0 point

- 6.9 Evidence of successful completion of any component of the Structured Curriculum Vitae may be requested from applicants at any time during the selection process. Failure to provide the requested evidence within the timeframe given may result in scoring not being allocated.
- 6.10 The scores for the sections within the Structured Curriculum Vitae will be combined to provide an overall score out of a possible 11 points.
- 6.11 Applicants must score a minimum of 50.00% (5.5 out of 11 points) for the Structured Curriculum Vitae to be deemed suitable for selection.
- 6.12 For applicants satisfying the minimum standard in Regulation 6.11, the Structured Curriculum Vitae score will be recorded as a percentage. The selection tool weighting will then be applied which is 10%. As such, the applicant will receive a selection score for the Structured Curriculum Vitae out of a maximum 10 points.





7.0 NEUROSURGERY ANATOMY EXAMINATION

- 7.1 The Examination will be a single paper with 60 multiple choice neurosurgery anatomy questions and scored out of a total of 240 marks. The Examination will run for 100 minutes.
- 7.2 The recommended reading is Last's Anatomy, Regional and Applied, 9th Edition, 1998 (reprinted 2003) McMinn R.M.H., Churchill Livingstone.
- 7.3 Applicants will be advised of the Examination date at least three months prior. Modifications and adjustments may be necessary in response to exceptional circumstances or events beyond the Board of Neurosurgery's control. In such instances, applicants will be advised as soon as is reasonably practical.
- 7.4 There will be no separate fee charged for the Examination. This is included in the selection application fee.
- 7.5 It is the applicant's responsibility to make the appropriate travel arrangements and to meet any costs incurred in attending the Examination.
- 7.6 Applicants must make themselves available at the scheduled Examination time and venue advised by the Board of Neurosurgery. Applicants who do not present for the Examination at the scheduled time and venue will not be considered further in the selection process and their application will be withdrawn. In advance of the scheduled Examination, the Board of Neurosurgery Chair will consider written requests to <u>set.neurosurgery@nsa.org.au</u> to sit the Examination at an alternate time or venue where exceptional circumstances beyond the control of the applicant impact on the applicant's ability to present for the scheduled Examination.
- 7.7 Applicants must score a minimum of 70.00% (168 out of 240 marks) for the Examination to be deemed suitable for selection.
- 7.8 For applicants satisfying the minimum standard in Regulation 7.7, the Examination score will be recorded as a percentage. The selection tool weighting will then be applied which is 30%. As such, the applicant will receive a selection score for the Examination out of a maximum 30 points.
- 7.9 Applicants will be provided with their score for the Examination. Applicants will not be provided with additional feedback or a copy of the Examination paper.

8.0 REFERENCE REPORT

- 8.1 Applicants who satisfy the standards in Regulation 5.3 (the Structured Curriculum Vitae standard) and 5.4 (the Neurosurgery Anatomy Examination standard) and the shortlisting in Regulation 5.7 will be given a score for the Reference Report. The preparation of the Reference Report may commence prior to the shortlisting in Regulation 5.7 and will be discontinued if the applicant is not shortlisted.
- 8.2 The preparation of the Reference Report for each applicant will be the responsibility of two people approved by the Board of Neurosurgery Chair, with at least one being a member of the Board of Neurosurgery (the **Assessors**). The Assessors will ordinarily be neurosurgeons.
- 8.3 The Assessors together via videoconference or teleconference will personally speak with three neurosurgical consultants with whom the applicant has worked to assist them in preparing a Reference Report.





- 8.4 In selecting the neurosurgical consultants to obtain information from to assist in preparing the Reference Report, the Assessors may contact any neurosurgical consultant the applicant has worked with in the three years prior to application, except current Board of Neurosurgery members and those neurosurgical consultants involved as Assessors in the preparation of Reference Reports.
- 8.5 A pro forma Reference Report will be used. The Reference Report will have questions focused on some of the RACS competencies.
- 8.6 Advanced notification may be sent to the neurosurgical consultants to be contacted, including information regarding the areas to be explored during the discussion which informs the Reference Report.
- 8.7 Having considered the responses from all interviews, the Assessors must arrive at a consensus score for each identified area using the scoring guidelines and scales shown in the Reference Report. Notes justifying the score given must be recorded in the Reference Report.
- 8.8 Applicants must score a minimum of 70% (49 out of 70 points) for the Reference Report to be deemed suitable for selection.
- 8.9 For applicants satisfying the minimum standard in Regulation 8.8, the Reference Report score will be recorded as a percentage. The selection tool weighting will then be applied which is 30%. As such, the applicant will receive a selection score for the Reference Report out of a maximum 30 points.
- 8.10 Applicants will be provided with their score for the Reference Report. As references are collected in confidence as part of the Reference Report process, a copy of the Reference Report will not be made available to the applicant. Applicants will not be provided with additional feedback on the Reference Report or provided with the names of the neurosurgical consultants contacted.

9.0 SEMI-STRUCTURED NEUROSURGERY PANEL INTERVIEW

- 9.1 The shortlisted applicants determined in accordance with Regulation 5.10 will be eligible to present for the Neurosurgery Semi-Structured Interview (**Interview**).
- 9.2 Shortlisted applicants will be advised in writing of their Interview date and time at least two weeks prior. Modifications and adjustments may be necessary in response to exceptional circumstances or events beyond the Board of Neurosurgery's control. In such instances, applicants will be advised as soon as is reasonably practical. It is the applicant's responsibility to make the appropriate arrangements and to meet any costs incurred in participating in the Interview.
- 9.3 Applicants must make themselves available at the scheduled Interview time. Applicants who do not participate in the Interview at the scheduled time will not be considered further in the selection process and their application will be withdrawn.
- 9.4 Each Interview will be approximately one hour in duration and consist of four scenario and experience-based sections, each with multiple questions designed to assess the suitability of the applicant.
- 9.5 Applicants will be asked questions by four different Interview panels. Each panel will ask the same designated section of the Interview.





- 9.6 Each panel must arrive at a consensus score for their section of the Interview using the scoring guidelines and scale shown in the Interview score sheet. Notes justifying the score given must be recorded in the Interview score sheet.
- 9.7 The Interview scoring scale is as follows:

a)	Unsatisfactory	0 points
b)	Improvement needed	1 point
c)	Meets expectations	2 points
d)	Exceeds expectations	3 points
e)	Exceptional	4 points

- 9.8 The panel consensus scores for the four sections of the Interview will be combined to provide an overall score out of a possible 16 points.
- 9.9 Applicants must score a minimum of 50% (8 out of 16 points) for the Interview to be deemed suitable for selection.
- 9.10 For applicants satisfying the minimum standard in Regulation 9.9, the Interview score will be recorded as a percentage. The selection tool weighting will then be applied which is 30%. As such, the applicant will receive a selection score for the Interview out of a maximum 30 points.
- 9.11 Applicants will be provided with their score for each of the four sections of the Interview. Applicants will not be provided with additional feedback or a copy of the Interview scoring sheet or questions after the Interview has been conducted.

10.0 RECONSIDERATIONS, REVIEWS AND APPEALS

- 10.1 An applicant dissatisfied with a decision made in relation to these Regulations may apply to the Board of Neurosurgery to have the decision reconsidered (**Reconsideration**). The Reconsideration will be processed in accordance with the RACS Reconsideration, Review and Appeals Policy.
- 10.2 An application to use this process must be received by the Board of Neurosurgery within seven (7) days of the notification of the decision to be Reconsidered.
- 10.3 In the interests of clarity, the release of each score which forms part of the selection process is the notification of a decision. Once the period to apply for Reconsideration of that score expires the score is final and the applicant cannot request a Reconsideration of that score at a later stage in the selection process.