**Example interview questions for Basic Training position**

This sample document is an example of interview questions for selection of a candidate into a training program.

Questions should focus on the requirements of the job and suitability for training and should be linked to the selection criteria (see appendix 1). This will allow you to assess the skills and abilities of an applicant in relation to the requirements of the role. Be aware of your legal obligations to avoid discrimination. Use of behavioural questions using the SAR (situation, action, resolution) is encouraged. Each applicant must be treated fairly and consistently.

The sample interview questions below are designed to address the selection criteria of: clinical expertise, communication, cultural competence and cultural safety, professional behaviour and teamwork as well as the commitment and capability to pursue a career as a physician or paediatrician.

|  |  |
| --- | --- |
| Candidate’s name |  |
| Interviewer’s name |  |
| Date |  |

Note: If using a scenario question then ensure that the candidate is provided with an appropriate Clinical Scenario to review 10 minutes prior to commencing interview.

**Rating Advice**

* Good answers will demonstrate that the candidate makes sound clinical decisions which would produce optimum clinical outcomes and are effectively communicated with others.
* Excellent answers will show that the candidate can critically reflect on their actions and identify ways they are able to improve.
* Poor answers will fail to address some components of the question and/or selection criteria.

**Question 1**

**You have had time to consider the Clinical Scenario. Could you outline how you would communicate with your team to ensure that the patient in this scenario receives the care they require?**

|  |
| --- |
| Selection Criteria assessed:   * Demonstrates medical expertise by being able to recognise critically unwell patients, initiate management and escalate as appropriate. * Demonstrates communication through collaborative, respectful and empathic communication with juniors, peers, senior colleagues and other health professionals and agencies as well as sound judgement and decision making.   (Clinical expertise, Communication) |

|  |  |
| --- | --- |
| **SITUATION** | *What was the situation?* |
| **ACTION** | *What did the candidate do?* |
| **RESULT** | *What were the outcomes?* |
| **NOTES** |  |

**Score / 5**

**Question 2**

**Could you give the panel an example of a situation from your own experience that is similar to the one you have just discussed? Can you describe what the situation was, what was your role, what did you do, and what was the outcome?**

|  |
| --- |
| Selection Criteria assessed:   * Demonstrates medical expertise by being able to recognise critically unwell patients, initiate management and escalate as appropriate. * Demonstrates communication through collaborative, respectful and empathic communication with juniors, peers, senior colleagues and other health professionals and agencies. * Demonstrates ability to be responsible and participate in team-based care.   (Medical Expertise, Communication and Professional Behaviour) |

|  |  |
| --- | --- |
| **SITUATION** | *What was the situation?* |
| **ACTION** | *What did the candidate do?* |
| **RESULT** | *What were the outcomes?* |
| **NOTES** |  |

**Score / 5**

**Question 3**

**Could you please give us some examples of how you have prepared for Physician Basic Training? What assessment have you made about your strengths and areas for further development?**

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| --- |
| Selection Criteria assessed:   * Demonstrates commitment and capability to pursuing a career as a physician or paediatrician * Demonstrates ability for lifelong learning through self-education and continuing professional development. |

|  |  |
| --- | --- |
| **SITUATION** | *What was the situation?* |
| **ACTION** | *What did the candidate do?* |
| **RESULT** | *What were the outcomes?* |
| **NOTES** |  |

**Score / 5**

**Question 4**

**Could you please give us an example of a time where you had to provide feedback to a junior colleague, peer, senior colleague or other health professional? Can you describe the situation, the problem you were trying to address, how you approached the matter and what the outcomes were?**

|  |
| --- |
| Selection Criteria assessed:   * Demonstrates communication through collaborative, respectful and empathic communication with juniors, peers, senior colleagues and other health professionals and agencies. * Demonstrates approach to teamwork and leadership. |

|  |  |
| --- | --- |
| **SITUATION** | *What was the situation?* |
| **ACTION** | *What did the candidate do?* |
| **RESULT** | *What were the outcomes?* |
| **NOTES** |  |

**Score / 5**

**Question 5**

**What is your understanding of cultural competence and cultural safety? Could you give an example of how you have utilised this understanding in your role(s) to date?**

|  |
| --- |
| Selection Criteria assessed:   * Demonstrates an understanding of cultural competency and safety and how to practise in a culturally competent manner |

|  |  |
| --- | --- |
| **SITUATION** | *What was the situation?* |
| **ACTION** | *What did the candidate do?* |
| **RESULT** | *What were the outcomes?* |
| **NOTES** |  |

**Score / 5**

**RACP Definitions**

**Cultural Competence** refers to an awareness of cultural diversity and the ability to function effectively, and respectfully when working with and treating people of different cultural backgrounds. Cultural competence means a doctor has the attitudes, skills, and knowledge needed to achieve this. A culturally competent doctor will acknowledge:

1. That Australia and New Zealand have culturally diverse populations.
2. That a doctor’s culture and belief systems influence his or her interactions with patients and accept this may impact on the doctor-patient relationship.
3. That a positive patient outcome is achieved when a doctor and patient have mutual respect and understanding

**Cultural Safety** means to recognise and mitigate the impact that our own beliefs, assumptions, and behaviours have on others; and, for health care practitioners, recognising the serious adverse impacts on colleagues, patients and whānau (family) of practising in a culturally unsafe way. Culturally safe practices include actions which recognise and respect the cultural identities of others and safely meet their needs, expectations and rights. Conversely, culturally unsafe practices are those that diminish, demean or disempower the cultural identity and well-being of an individual.

**Final score: \_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_**

|  |  |
| --- | --- |
| **Signature of interviewer** |  |
| **Date** |  |

## 

**Appendix 1:**

## **Selection criteria**

Selection criteria describe the personal qualities, skills, abilities, knowledge and qualifications that a person needs to perform a role effectively. They are used to identify the most appropriate person for the role.

It is advisable that selection criteria for any training position be developed prior to advertising the role.

As the applicant will be fulfilling a vocational role while completing training, the College acknowledges that criteria should primarily assess a candidate’s ability to perform the requirements of this role. However, criteria should also seek to assess the applicant’s competency and commitment to complete the training program and become a successful practising physician.

The RACP has developed the following selection criteria that any prospective trainee for a Basic Training position should demonstrate.

**RACP Selection into Basic Training criteria**

Prospective Basic Trainees should demonstrate:

* The capacity and commitment to pursue a career as a physician or paediatrician.
* The ability to plan and manage their learning.
* The ability and willingness to achieve the Basic Training Competencies, particularly those associated with:
  + Communication
  + Cultural competence
  + Ethics and professional behaviour
  + Leadership, management and teamwork.



For Advanced Training, training providers can develop localised selection criteria based upon requirements of the relevant program and the RACP Professional Practice Framework.

Examples of how training providers can develop localised selection criteria for training positions based upon RACP Frameworks are illustrated in Table 2.The table demonstrates example selection criteria for vocational Basic Training positions, developed in reference to the RACP Basic Training Competencies and potential workplace key result areas (i.e. the outputs and outcomes for which the role is responsible).

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**Table 2: Examples of how RACP Basic Training Curriculum competencies can be translated to work-related selection criteria**

| Basic Training competency | Possible Key Result Area  of Basic Training position | Example selection criterion | |
| --- | --- | --- | --- |
| Medical expertise  Acute management  Recognise critically unwell patients, initiate management, and escalate as appropriate. | Provides competent and efficient clinical management of patients when undertaking clinical duties such as the assessment and management of acute presentations. | Has a proven clinical competence at a level commensurate with a postgraduate year two or above, with ability to effectively identify, assess and manage acute patient presentations. | |
| Communication  Communication with  patients, family and carers: Demonstrate collaborative, effective and empathetic communication with patients, families and carers. | Effectively communicates with patients, their families and other healthcare team members, and includes them in care decisions. | Demonstrates collaborative, respectful and empathetic communication skills by effectively including patients, family members and members of the healthcare team in management decisions. | |
| Quality and safety  Prevention and management of risks and potential harm: Optimise safe working practices. | Effectively manages and prevents potential risks and harms in line with Work Health and Safety (WHS) requirements. | Demonstrates a commitment to Work Health and Safety (WHS) values and to creating a positive patient experience. | |
| Teaching and learning  Teaching and supervising others:  Provide supervision for junior colleagues. | Participates in the supervision, training and professional development of junior medical staff and medical students. | Displays the capacity and willingness to support, supervise and assist junior colleagues. | |
| Cultural competence  Participating in a culturally competent manner:  Recognise how the special status of Māori (New Zealand) and Aboriginal and Torres Strait Islander people (Australia) impacts on their current health status. | Contributes to improving Indigenous health outcomes and workplace cultural safety. | Demonstrates the ability to practise medicine in a culturally informed manner and seeks to improve their knowledge of the needs of Indigenous communities. |