



Feidhmeannacht na Seirbhíse Sláinte  
Health Service Executive

**HSE HR Circular 014/2009**

**7<sup>th</sup> May 2009.**

**To: Each Member of Management Team, HSE;  
Each Hospital Network Manager, NHO, HSE;  
Each Assistant National Director, PCCC, HSE;  
Each Assistant National Director, HR, HSE;  
Each Medical Manpower Manager, HSE.**

**Re: Revised Procedural Arrangements for Appointment of Medical Consultants.**

Dear Colleagues,

A detailed review of the procedural arrangements relating to the appointment of Medical Consultants on a temporary or locum basis has been completed.

It has been decided to introduce revised procedural arrangements with immediate effect. Full details of the arrangements which now fall to be implemented are set out in the attached document.

You will be aware of certain issues which have arisen in the past in relation to both the recruitment and the practice of a small number of individuals. In some instances these have been the subject of comment in reports undertaken by HIQA and others.

The HSE is determined that any risks arising from the process of recruitment of Medical Consultants, be it to permanent, temporary or locum posts are mitigated and eliminated to the maximum extent.

The revised procedures are intended to ensure that:

- Persons employed as Consultants in the public health service are appropriately qualified and competent to provide services as Consultants.
- The HSE complies with the terms of its Recruitment Licence in the appointments of locum and temporary Consultants
- Those accountable and responsible for the recruitment of temporary and locum Consultants are aware of their responsibilities.
- The recruitment and selection process is monitored and audited and
- The HSE complies with its statutory obligations in relation to these matters.

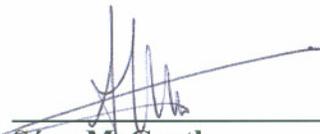
Your attention is drawn particularly to (i) the provision that an individual applicant who is not qualified for appointment as a Medical Consultant on a permanent basis may not be appointed to a temporary or locum position. New appointments to temporary or locum Consultant posts require that the appointee be registered on the Specialist division of the register of Medical Practitioners maintained by the Medical Council, (ii) the provisions relating to end of contract assessments of

locum and temporary appointments and (iii) the availability of references to Interview Board members.

Finally, it remains the position that the creation and filling of a Consultant level post of any nature requires compliance with the steps outlined in the attached procedure and the provisions of the HSE Employment Control Framework, as communicated from time to time.

Any enquiries regarding qualifications or procedures for creation of Consultant level posts should be addressed to the Consultant Appointments Unit, [consultant.applications@hse.ie](mailto:consultant.applications@hse.ie) and in relation to the recruitment policies and standards enquiries to Mr. Paddy Duggan, Recruitment Manager Policies and Standards, HR Directorate, Health Service Executive, Oak House, Millennium Park, Naas; e-mail: [paddy.duggan2@hse.ie](mailto:paddy.duggan2@hse.ie) or telephone 045 882541.

Yours sincerely,



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**Séan McGrath,**  
**National Director of Human Resources.**

**Encl.**



Feidhmeannacht na Seirbhíse Sláinte  
Health Service Executive

**PROCEDURE**

**FOR**

**RECRUITMENT AND SELECTION**

**OF**

**Locum and Temporary Consultants**

7<sup>th</sup> May 2009

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## **Introduction**

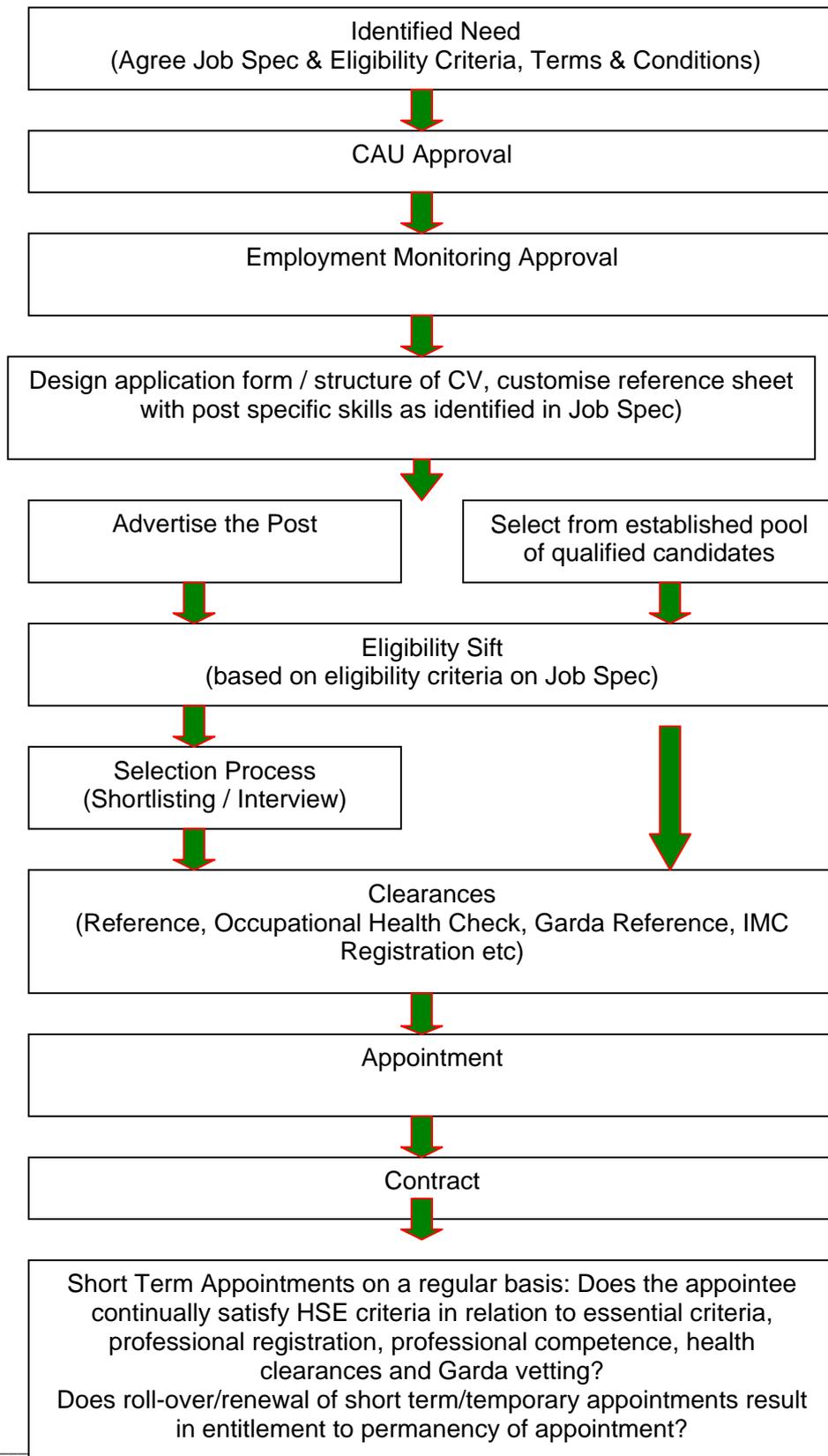
This document sets out the procedures to be followed by Network Managers, LHO Managers, designated accountable individuals in Hospital Networks and LHO's and Recruitment / HR Units in the HSE in the recruitment and appointment of locum and temporary Consultants.

The purpose of this document is to ensure that:

- persons employed as Consultants in the public health service are appropriately qualified and competent to provide services as Consultants
- the HSE complies with the terms of its Recruitment Licence in the appointments of locum and temporary Consultants
- those accountable and responsible for the recruitment of temporary and locum Consultants are aware of their responsibilities
- the recruitment and selection process is monitored and audited and
- the HSE complies with its statutory obligations in relation to these matters

This guidebook has been developed to assist you in ensuring best practice recruitment and selection in accordance with best practice and the HSE Recruitment Licence and Codes of Practice. It should be read in conjunction with the Locum and Temporary Consultants Interview Guide (see Appendix 6) which outlines the salient provisions of relevant employment legislation and also gives advice on interviewing skills e.g. approach to questioning, note-taking, scoring etc.

## Recruitment & Selection of Locum & Temporary Consultants Overview of the Key Steps in the Process



## **SECTION 1: THE REGULATION OF CONSULTANT APPOINTMENTS**

### **1.1 Role Of The HSE Regarding The Regulation Of Consultant Appointments**

Section 57 of the Health Act, 2004<sup>1</sup> transferred a number of statutory functions previously performed by Comhairle na nOspidéal to the HSE with effect from 1<sup>st</sup> January 2005. These included regulating the number and type of appointments of Consultant medical staff.

This regulatory function covers all Consultant appointments in the HSE, voluntary hospitals and other agencies whether additional, replacement, temporary or locum and irrespective of the extent of the commitment involved or source of funding of the appointment.

The regulation of Consultant appointments by the HSE includes:

- a. new and replacement permanent Consultant posts;
- b. locum and temporary Consultant posts;
- c. structuring / restructuring of Consultant posts;
- d. determination of the Type of Contract / Category of Contract to apply to Consultant posts and various functions relating to changes in Type of Contract / Category of Contract;
- e. determination of the qualifications to apply to Consultant posts;
- f. determination of the title of Consultant posts.

### **1.2 The Public Services Management (Recruitment and Selection) Act 2004<sup>2</sup>**

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<sup>1</sup> Health Act 2004. For more information see <http://www.oireachtas.ie/documents/bills28/acts/2004/a4204.pdf>

<sup>2</sup> Public Services Management Act 2004. For more information see <http://www.oireachtas.ie/documents/bills28/acts/2004/a3304.pdf>

With effect from the 1<sup>st</sup> April 2005 recruitment for appointments to positions in the HSE is subject to the provisions of the Public Service Management (Recruitment and Appointments) Act 2004 (the Act) and is regulated by the Commission for Public Service Appointments (CPSA). Appointments to positions in the HSE are subject to the conditions of the HSE Recruitment Licence and the Codes of Practice published by the CPSA<sup>3</sup>.

The CPSA has a statutory role in ensuring that appointments in the organisations subject to its remit are made on merit and as a result of fair and transparent appointment processes.

### **1.2.1 Appointments under HSE Recruitment Licences**

The HSE Recruitment Licences and Codes of Practice facilitate appointments on a planned and emergency basis.

Planned appointments include, for example, cover for maternity leave, leave of absence, notified long term sick leave or other leave, or the filling of a vacant post while awaiting formal approval to fill on a permanent basis.

The standard process for filling such positions will be in compliance with the *Code of Practice for Appointments to Positions in the Civil Service and Public Bodies*. This Code will be employed when there is sufficient time to allow for the use of the formal advertising and selection process. This process includes advertising the vacancy, issuing a job specification, interviewing and formally appointing the successful candidate following receipt of appropriate clearances.

The *Code of Practice for Emergency Short-term Appointments to the Health Service Executive* applies to the recruitment and selection process for appointments to positions in the HSE where it is necessary to make an emergency short-term appointment to a specific position to meet critical needs. In making such appointments the HSE must ensure that the selection process is built:

- on the skills and qualities relevant to the post
- around job and person specifications / competency profiles that are reflected consistently throughout the selection process
- on criteria based on the essential requirements of the post, promoting the principle of equality of opportunity

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<sup>3</sup> Commission for Public Service Appointments Codes of Practice. For more information visit [www.cpsa-online.ie](http://www.cpsa-online.ie)

### **1.3 The Submission and Processing of Applications for Permanent and Non-Permanent Consultant Posts**

Taking account of the functions of the HSE described at 1.1 above:

- a. The Unit Manager must seek the prior approval of the HSE before making a Consultant appointment, whether of a permanent or non-permanent nature.
- b. The Unit Manager must comply with the HSE 'Letter of Approval' in making the appointment.

### **1.4 Breaches of HSE Regulatory Requirements**

Breaches by an employer of HSE regulatory requirements have significant implications for the organised and safe delivery of Consultant services. Individuals represented to the public as Consultants in the public health system must be appropriately qualified and competent to perform the duties and functions of a Consultant. Such individuals must be employed in regulated posts – where the HSE has assessed the viability of and need for the post with regard to the safe delivery of Consultant services.

Where an application for a permanent, temporary or locum Consultant post is refused or deferred, it would be beyond the scope of legislation governing such matters to proceed with the appointment. Any service proceeding to create a post which has not been approved by the HSE leaves itself open to legal risks arising from claims involving holders of unregulated posts.

Should the HSE become aware of a breach of regulatory requirements the HSE will take such action as is necessary to address the breach, including financial sanction.

## **1.5 Applications for Temporary Consultant Posts In Lieu Of a Permanent Appointee**

The procedure to be followed by employers making application for a temporary Consultant post during the interval between a permanent post becoming vacant and it being filled on a permanent basis, or in the interval between a permanent post having been approved by the HSE and it being filled on a permanent basis, is as follows:

A letter / email is submitted to the HSE Consultant Appointments Unit (CAU) seeking approval for a non-permanent Consultant appointment in advance of the commencement of any recruitment process. This should set out the circumstances giving rise to the need for such an appointment, including the specific purpose and likely duration. The HSE will not grant retrospective approval to temporary posts.

All correspondence / queries should be directed to the:

HSE Consultant Appointments Unit

Room 1.32

1<sup>st</sup> Floor

Dr. Steeven's Hospital

Dublin 8.

email: [consultant.applications@hse.ie](mailto:consultant.applications@hse.ie),

fax: 01 6352508,

tel: 01 6352535 / 6352524 / 6352887

## **1.6 Applications for Temporary Consultant Posts Additional to the Approved Complement**

The procedure to be followed by employers when making an application for a temporary Consultant post which is additional to the complement of Consultant posts approved by the HSE is as follows:

- a. The application must be submitted using the Application Form of 1<sup>st</sup> April 2008 for Consultant appointments (available to download from the HSE website at HSE Central/Human Resources/Consultants).
- b. A single Application Form should be drawn up by the employer with the sole or major interest in the post and agreed with the appropriate HSE Hospital Network Manager, in the case of Consultant posts funded by the National Hospitals Office (NHO), or with the appropriate Assistant National Director, Primary Community and Continuing Care (PCCC), in the case of Consultant posts funded by PCCC.
- c. The Hospital Network Manager / Assistant National Director must confirm that funding is available for the post and the extent to which the post is aligned with the Service Plan.
- d. The Hospital Network Manager / Assistant National Director must sign the Application Form and forward it to HSE Consultant Appointments Unit (CAU).
- e. While applications are made by email, a hard copy of the relevant page (indicating to which application the page refers) with the signature of the Hospital Network Manager / Assistant National Director should be sent by post or fax to the HSE Consultant Appointments Unit (CAU).

## **1.7 Applications for Locum Consultant Posts**

The essence of a locum appointment is that a post or office is occupied in a non-permanent capacity by someone other than the legal post holder. The locum acts in place of the post holder. Such circumstances can arise where the holder of the permanent appointment is absent due to holiday, sick leave, study leave, career break etc.

A letter / email is submitted to the HSE Consultant Appointments Unit (CAU) seeking approval for a non-permanent Consultant appointment in advance of the commencement of any recruitment

process. Letters / emails must be received two weeks prior to the proposed date of commencement other than in circumstances where the post-holder has taken sick leave, force majeure leave or is otherwise unavoidably absent from work at short notice. The letter / email should set out the circumstances giving rise to the need for such appointment, including the specific purpose and likely duration.

Should it be necessary to extend the employment of a locum consultant in excess of a 4 week period then the employing Service must seek the approval of the CAU.

**The HSE will not grant retrospective approval to locum posts.**

### **1.8 Issuing of HSE Approval for Consultant Posts**

- a. When a decision is made to approve a post, a 'Letter of Approval' is issued to the Hospital Network Manager NHO / Assistant National Director PCCC and in the case of temporary and locum posts, the employer.
- b. The 'Letter of Approval' includes details relating to the post, such as the title, sub-specialty (if any), location of sessions, and the requisite professional qualifications. The 'Letter of Approval' letter forms the basis of the Job Specification and forms part of the Consultant's contract to be signed by the Consultant appointed to the post.
- c. Once the 'Letter of Approval' has been issued, the recruitment process may commence. In the case of:
  - i. permanent, temporary or locum Consultant posts in HSE funded hospitals / agencies; this process is undertaken by the HSE or the HSE funded hospital / agency itself;
  - ii. permanent Consultant posts within the HSE; All HSE employers are required to attach the 'Letter of Approval' to the 'Form A: Request to Hire Form' and submit it to the National Employment Monitoring Unit, Human Resources, for sanctioning. Once sanction is received the authorisation will be forwarded by the requesting service to National Recruitment Services (Human Resources) who in turn will liaise with the Public Appointments Service with regard to the advertisement and recruitment of the post.
  - iii. temporary or locum Consultant posts within the HSE; the recruitment process may begin once the application is approved by the HSE CAU;

d. Where an application for an permanent, temporary or locum Consultant post is refused or deferred, it would be illegal to proceed with the appointment and any employer proceeding to create a post which has not been approved by the HSE leaves itself open to legal risks arising from claims involving holders of unregulated posts.

### **1.9 Contract Types**

All appointees both locum and temporary will be issued with the appropriate contract. Such contracts will either be "fixed term", "specific purpose" or "if and when required" contracts.

Contract renewal, if approved, will be in compliance with the relevant requirements of the Protection of Employees (Fixed Term) Act 2003

### **1.10 Employment Control**

The employment of locum and temporary consultants will be in accordance with to the relevant employment control circulars and guidelines.

## **SECTION 2**

### **2.1 Qualifications for Consultant Appointments**

The qualifications required for appointment to the various consultant specialities are available on the HSE intranet at HSE Central/Human Resources / Consultants.

**These qualifications apply to all permanent, temporary and locum Consultant appointments**

## **SECTION 3: PROCEDURE PRIOR TO ADVERTISING**

Based on section 1.2.1 'Appointments under the HSE Recruitment Licence' the HSE will manage the recruitment and selection process for locum and temporary Consultants either under the *Code of Practice for Appointments to Positions in the Civil Service and Public Bodies* or *Code of Practice for Emergency Short-term Appoints to the Health Service Executive* depending on the feasibility to employ the formal recruitment and selection procedures. The following sections outline HSE requirements under both these Codes.

### **3.1 Job Specification**

The national 'Job Specification, Terms and Conditions' template (see 2) must be completed for both locum and temporary posts. The key areas of the Job Specification that influence the assessment process are;

- Details of Service - to reflect the service provided by the speciality in the location or in the application to the HSE Consultants Appointment Unit
- Principal Duties and Responsibilities
- Eligibility Criteria - as detailed in 2.1 or 2.2
- Post Specific Requirements - include special interest requirements or specialist clinical experience required for each individual post
- Skills, Competencies and Knowledge

### **3.2 Terms and Conditions**

The content of the Terms and Conditions document must be fully agreed in advance of advertising as its contents has a direct bearing on the contractual arrangement to be entered into by the HSE with the successful candidate.

### **3.3 Application Form**

The Application Form (see Appendix 2) should be amended to reflect the eligibility criteria and any area of competence that is critical to the post and experience / skills / competencies that may form the basis of a shortlisting exercise.

### **3.4 Composition of Interview Boards**

Interview Boards should generally consist of three people; an independent Chair (this refers to an appropriate person with no direct interest in the post being filled who may be from within or external to the HSE); and a number of other members including, usually two persons, with expert knowledge in the relevant field. Interview boards should have gender mix where possible.

Prior to interviewing it is imperative that all Interview Board Members nominated have read or are briefed on the Locum and Temporary Consultants Interview Guide and are fully aware of their obligations under the recruitment Licence and relevant Code of Practice.

Interview Board Members should have proven experience at interviewing or have completed an competency based interview skills training course.

### **3.5 Reference**

The Reference Form should, if required, be edited to reflect the clinical experience or specialist interest required in the job specification. A copy of the Reference Form is available in Appendix 4.

A minimum of three references are required and these references must cover the following:

- A minimum of 5 years recent work history or all work history if less than five years worked.
- A reference from current employer or most recent employer if doctor is not currently employed.
- If the three original references do not meet the criteria above further references must be sought.

In the case of the appointment of a regular locum, (see 3.9) references must be updated on regular intervals for doctors engaged in short term locum assignments.

### **3.6 Shortlisting Criteria**

Shortlisting may be necessary for some competitions and appropriate shortlisting should reduce instances of calling unsuitable candidates for interview.

Shortlisting criteria should be identified prior to advertising or if this is not possible prior to the applicants' application forms being reviewed. Shortlisting criteria must be job related and applied consistently across all candidates.

Shortlisting on application forms is undertaken by at least two members of the Interview Board.

### **3.7 Medical Clearance Required**

The national standard Occupational Health documentation is to be used. The requirements of HSE HR Circular No.19-2008: 'Implementation of Recommendations of Report on the Prevention of Transmission of Blood Borne Diseases in the Health Care Setting' must be observed.

### **3.8 Request for Advertising/Filling of Post Form**

All requests for advertising, internal and external, temporary and permanent posts must be formally approved by the designated Manager, Hospital Manager or LHM. The following documents must accompany the 'Request for Advertising / Filling of Post' form;

- Finalised Job Specification, Terms and Conditions
- Projected dates for interview
- Interview Board nominations

### **3.9 Use of regular Locums -The Use of Established Candidate Pools**

Services filling locum and temporary posts on a regular basis from an established pool of pre-qualified candidates to cover for annual holidays, short-term sickness or unplanned or unexpected absence of the substantive post holder must ensure that the selection process is documented and that the appointee meets the established criteria and is subject to the standard clearances.

### **3.9.1 Selection Criteria for Candidates Drawn from Established Candidate Pools**

The short term appointment of these locums on a regular basis is dependent on their continually satisfying HSE criteria in relation to essential criteria, professional registration, professional competence, health clearances, and Garda Vetting.

### **3.9.2 Authorisation of Hire of Locum from Established Candidate Pools**

The Hospital Manager / LHM is responsible for ensuring that these checks are in place and for documenting their approval to employ the selected candidate.

## **SECTION 4: TREATMENT OF APPLICATIONS**

### **4.1 Application Form**

The Application Form must be checked for completeness and any gaps in employment history should be explored with the applicant at interview. The General Declaration must be signed on the Application Form or signed at interview if the application is made via e-mail. The Application Form must contain the required information relating to referees.

### **4.2 Eligibility**

The eligibility assessment will be formally recorded and signed off by the individuals conducting the assessment (See Appendix 5).

Eligibility checking is to be conducted on all Application Forms received using the essential qualifications, experience and skills outlined in the Job Specification. Only those candidates who possess the required essential criteria will be deemed eligible for inclusion in the competition.

The competent authority to determine 'eligibility' to be included on a specific division of the Register of Medical Specialists maintained by the Medical Council is the Irish Medical Council. Candidates must therefore present evidence from the IMC to prove that they are eligible for inclusion in the relevant Medical Specialist Register if they are not already so registered. This must be confirmed by the hiring service / recruitment service with the IMC prior to appointment.

Application of the regulations governing the employment of non-EEA nationals must be evidenced in the decisions made. Evidence of GNIB card/ visa/ permit should accompany the candidates application form, where applicable.

### **4.3 Shortlisting**

Shortlisting, if required should be carried out as outlined in 3.6.

### **4.4 References required on being called to interview**

References for all candidates will be requested when they are being called for interview. This early call for references is to ensure that the references are available to the interview board members around the same time as the interviews are being run. It will be important that Recruitment section satisfy itself about the contact details of the institution provided by the candidate, for example by independently obtaining the main phone number of the institution and asking to be put through to the named referee

The references received will not be made available to the interview board until they have interviewed all candidates. The process for managing the references is described in 6.2

### **4.5 Garda Vetting Process on Being Called for Interview**

HSE HR Circular No. 11-2007 Garda Clearance of HSE Employees (Recruitment And Selection Procedure) establishes the Garda Vetting policy for the HSE. The Garda Vetting process will be managed as described in the *"A Guide to the HSE Garda Vetting Process for Employment Purposes"* issued by the HSE Garda Vetting Liaison Office (Manorhamilton) and available on the *HSE Intranet at HSE Central/ HR/Garda Vetting Form Do's and Don't's*.

All candidates, on being called for interview, will be required to complete the Garda Vetting form. A completed form in respect of successful candidates will be send to the Garda Vetting Liaison Office (GVLO) on formation of the panel.

#### **4.5.1 Addresses outside Ireland**

Hiring Managers\* should request candidates to provide Police Clearance for any address (es) where he/she has resided overseas for a period of 6 months or more in addition to the candidate completing the Garda Vetting form. This clearance must be from the State police and to the standard of the Garda Síochána certification.

\* This may be a line manager or a recruitment manager.

#### **4.5.2 Existing Garda Clearances**

If a person has worked in another HSE area it may be possible to obtain a certified copy of their Garda Clearance from the Garda Vetting Liaison Office (GVLO) in Manorhamilton, which maintains a database in this regard.

#### **4.5.3 Application of Policy To Agency Staff**

The requirement for Garda Vetting is applicable to all employment agency staff that provides a direct on site service. The relevant Hiring Manager\* is responsible for ensuring that the selected agency certifies that the staff supplied have satisfactory Garda Vetting and provides the Garda Vetting Report as evidence prior to any staff coming on site. This requirement will form part of the contract with the agency and an inspection of these documents will form part of audits carried out on such agencies.

\* This may be a line manager or a recruitment manager.

## **SECTION 5: INTERVIEW**

### **5.1 Pre Interview Meeting**

It is important that the Interview Board members meet in advance of the interview to ensure that they have a common understanding of their roles and how they will function as a team. At this meeting you will be required to:

- Identify and sign off the selection criteria which must reflect the essential skills, knowledge and competencies outlined in the Job Specification. Communication Skills is always included as a heading.
- Draw up and agree questions and desired behavioural indicators based on the headings outlined in the agreed selection criteria.

### **5.2 The Interview**

**Questioning:** Good questioning is the key to successful interviewing. Interview Board Members should refer to the Interview Guide for Locum and Temporary Consultants (see Appendix 6) for advice on questioning techniques. Questions must reflect the heading / skills areas identified in the Selection Criteria.

The Interview Board Members will be required to question and probe the candidate regarding the relevance, depth and quality of the experience and allocate marks under the relevant skill/competency area. Similarly, a candidate will be probed regarding their qualifications to determine if they have benefited from courses / studies undertaken, if they have applied their learning etc. and marks allocated under the relevant skill / competency area.

**Note-taking:** In compliance with the Codes of Practice, note-taking is essential. Interview notes provide the documentation to prove that an appointment was made on the merit of the candidate and that all candidates were treated in a consistent and transparent manner. An Interview Note Taking Sheet (See Appendix 6) must be completed for each candidate in respect of each heading / skill area being assessed. Interview Note Taking Sheets should record a key word from the questions asked and as much detail as possible of the candidates response.

The Interview Board should specially note any responses given by the candidate that they may wish to verify with referees subsequently.

Interview Boards can decide themselves how they wish to record notes at interview but the advice from Recruitment is that, in-keeping with best practice, the person asking questions would not also be expected to scribe at the same time. Interview Boards can agree on whatever method of note-taking that suits them best but they **must** complete the Interview Note Taking Sheet for each candidate.

For additional advice on note-taking please refer to the Interview Guide (Appendix 6).

**Marking Sheet:** The agreed selection criteria are transferred to the marking sheet (See Appendix 6)

An individual marking sheet must be completed on each candidate. Each marking sheet should be dated and signed by all Interview Board Members.

Included in the Marking Sheet is a 'constructive comment' section. This section **must** be completed for successful and unsuccessful candidates for each skill area. The Interview Board Member comments should provide the candidate with a constructive comment based on his/her performance at interview and outline why the Interview Board arrived at their overall decision. Always include Communication Skills as a heading with a supporting constructive comment to underpin the marks awarded.

For additional advice on marking, please refer to the Interview Guide (Appendix 6).

### **5.3 Merit Sheet**

Each candidate should be assessed directly after his/her interview. A Merit Sheet should be drawn up on completion of the interviews. Only the names of candidate(s) who have reached the required cut-off points in all categories should appear on the Merit Sheet. This sheet shows the panelled candidate(s) in strict order of merit.

The selection criteria, Marking Sheets and Merit Sheet must be signed by all members of the Interview Board.

## **5.4 Exceptional Report Form**

An Exceptional Report Form (Appendix 6) is to be used to record anything exceptional that occurs during the interview, e.g. inappropriate questions / interruptions, any information volunteered by the candidate referring to any of the nine grounds for discrimination i.e. Gender, Marital Status, Family Status, Age, Disability, Race, Sexual Orientation, Religious Belief, Membership of the Traveller Community.

## **SECTION 6: POST INTERVIEW RESULTS AND CLEARANCES**

### **6.1 Issuing of Results**

It is essential to ensure that all results (i.e. successful-offer, successful-panel place and unsuccessful) are issued promptly and at the same time. A copy of the candidates Marking Sheet, along with signed off selection criteria must be issued with their results letter.

An Interview Board file, containing all information / correspondence in relation to the interview must be kept locally the relevant Manager.

### **6.2 References**

Following the interview a member of the Recruitment / HR unit responsible for the management of the competition will issue and ensure the references received in respect of the successful candidates to the interview board. One of the Interview Board Members will then validate the contents of the reference form with the referee, and will use this opportunity to clarify / verify, for example, the candidate's experience in relation to certain procedures, techniques, areas of clinical knowledge, clinical experience etc. as discussed at interview. The Interview Board Member making the phone call will make notes during this conversation and will discuss the outcome of the call with the other Interview Members.

As a Board, they will review the outcome of the three reference checks completed on the candidate, and based on the information from the interview and the reference checks, make a decision on whether to recommend the candidate for appointment or not. A copy of the Board's decision should be retained on the candidate's file.

### **6.3 Final Decision of the Interview Board**

Once the interview is completed, and a member of the interview board has had the opportunity to follow-up with the Referee (as necessary), all the Interview Board Members need to review the totality of information now available on the candidate and make a judgment call as to whether they recommend the candidate for appointment or not.

Interview Board Members should agree on the recommendation and sign 'Final Decision of the Interview Board' sheet (see Appendix 7).

### **6.4 Pre-Employment Health Assessment**

The pre-employment health assessment should be carried out in line with the national standard Occupational Health requirements and HSE HR Circular 19-2008.

### **6.5 Qualifications Professional Registration**

The successful candidate must furnish the HSE with their Irish Medical Council (IMC) registration certificate and proof of registration in the relevant register of Medical Specialists where relevant.

The hiring Service will also verify registration with the IMC by checking (for example, by downloading from the IMC website) the candidate's information. The attachment of any restrictions attached to the candidate's registration will be assessed by HR / recruitment unit in conjunction with the Interview Board and details of the assessment of restrictions should be retained on the candidate's file.

### **6.5 Garda Clearance**

The Garda Vetting process will be managed as described in "A Guide to the HSE Garda Vetting Process for Employment Purposes" issued by the GVLO (Manorhamilton) and available on the HSE Intranet at HR/recruitment/Garda Vetting.

In exceptional circumstances where a candidate is urgently required to take up duty the hiring service should request that the Garda Vetting process is prioritised by the GVLO. In all instances evidence of Garda Clearance should be retained on the candidate's file

## **6.6 Appeals on the Outcome or Conduct of a Recruitment, Selection or Appointment Process**

All appeals will be dealt with in line with Section 7 or Section 8 of the relevant CPSA Code of Practice.

## **SECTION 7: CONTRACTS**

- 7.1 All appointees both locum and temporary will be issued with the Consultants Contract 2008 with the duration and purpose amended accordingly, i.e. Fixed Term, Specified Purpose or on an 'If and When Required' basis.

A copy of the signed contract should be returned to HR/Recruitment and retained on the candidate's file. A signed copy of the contract should also be sent to HSE Consultant Appointments' Unit".

- 7.2 A copy of the Job Specification and Terms and Conditions must be issued to the new temporary / locum with the employment contract prior to, or on the first day of employment. and a copy retained on the candidate's file.

## **SECTION 8: INDUCTION**

- 8.1 The arrival of a locum or temporary consultant must be formally notified to the specific unit, (e.g. surgery) to which the appointee is being assigned and generally notified to hospital/service.

The Consultant will be introduced to key staff in the area of assignment on arrival by designated hospital staff. This will also be done when Consultant is covering weekends.

On commencement of duty, an induction process must take place, conducted by the relevant Manager / other designated employee. The 'Staff Induction Checklist' in conjunction with the 'Employee Handbook' should be used as the basis of this induction process. On completion of induction, the relevant Manager and new employee must sign the 'Staff Induction Checklist' certifying that he / she has received local induction and a copy of it must be kept on the employee's file.

- 8.2 Locum and temporary consultants will be issued with HSE photographic ID for the duration of their contract. This ID will be worn by the consultant at all times and should be returned to HR at the end of the contract.

## **SECTION 9: ASSESSMENT**

- 9.1 On completion of a locum or temporary consultant's employment the Hospital Manager / LHM will ensure that an assessment of the employment is recorded. This record will cover the position employed in, duration of employment, and a general observation on employment period with any patient safety issues being noted (8) and a copy retained on the candidate's file.

## Appendix 1 Job Specification, Terms and Conditions Template



### Job Specification and Terms and Conditions prompt questions (Ref appendix 1 of R2002) Format Revised 16<sup>th</sup> December 2008

<b>Job Title and Grade</b>	<input type="checkbox"/> <i>What is the job title?</i> <input type="checkbox"/> <i>At what grade is the job positioned?</i>
<b>Competition Reference</b>	<input type="checkbox"/> <i>To be completed by HR Department</i>
<b>Closing Date</b>	<input type="checkbox"/> <i>To be completed by HR Department</i>
<b>Proposed Interview date(s)</b>	<input type="checkbox"/> <i>Insert proposed date of interviews</i>
<b>Taking up Appointment</b>	<input type="checkbox"/> <i>The successful candidate will be required to take up duty no later than.....</i>
<b>Location of Post</b>	<input type="checkbox"/> <i>What is the name of the Department?</i> <input type="checkbox"/> <i>Where is the job located?</i> <input type="checkbox"/> <i>Which hospital/ service?</i> <input type="checkbox"/> <i>Which geographical area?</i>
<b>Organisational Area</b>	<input type="checkbox"/> <i>Which Health Service Executive Area? e.g. HSE Southern Area etc</i>
<b>Details of Service</b>	<input type="checkbox"/> What service does the unit provide <input type="checkbox"/> What client group is served by the unit <input type="checkbox"/> What are the possible future developments for the service <input type="checkbox"/> What is the team structure? <input type="checkbox"/> What area is covered by this service?  <i>There is no limit to the text that can be inserted here. Please use this section to highlight the service and generate interest in the service and job being recruited for.</i>
<b>Reporting Relationship</b>	<i>Please outline reporting relationships associated with the post:</i> <input type="checkbox"/> <i>To whom will the job holder report?</i> <input type="checkbox"/> <i>Outline Reporting Relationships associated with the post</i>
<b>Purpose of the Post</b>	<input type="checkbox"/> <i>What is the overall high level purpose of the job?</i>
<b>Principal Duties and Responsibilities</b>	<i>Please outline operational, strategic, developmental, clinical, administrative and other duties that will apply to the post:</i>  <input type="checkbox"/> <i>What are the key responsibilities of the job?</i> <input type="checkbox"/> <i>What is entailed in doing the job?</i>

	<ul style="list-style-type: none"> <li>❑ <i>What are the key tasks of the job?</i></li> <li>❑ <i>What are the most important aspects of the job?</i></li> <li>❑ <i>What will the job holder spend the most time doing?</i></li> <li>❑ <i>What will the job holder be responsible for doing?</i></li> <li>❑ <i>What will the job holder have accountability for?</i></li> <li>❑ <i>Will the job holder have managerial responsibilities?</i></li> <li>❑ <i>Will the job holder have budgetary responsibilities?</i></li> </ul> <p><i>It may be useful to represent them under relevant headings such as Clinical Practice, Risk Management, Health and Safety, Financial, Administration, HR Ideally you should have approximately 10/15 main duties and responsibilities.</i></p> <p><b><i>The above Job Description is not intended to be a comprehensive list of all duties involved and consequently, the post holder may be required to perform other duties as appropriate to the post which may be assigned to him/her from time to time and to contribute to the development of the post while in office.</i></b></p>
<p><b>Eligibility Criteria</b></p> <p><b>Qualifications and/or experience</b></p>	<p><b><i>This section requires the specific HSE/DoHC qualifications only for the grade.</i></b></p> <p><b><i>Including the declared health, character and age requirements.</i></b></p> <p><b>Health</b> A candidate for and any person holding the office must be fully competent and capable of undertaking the duties attached to the office and be in a state of health such as would indicate a reasonable prospect of ability to render regular and efficient service.</p> <p><b>Character</b> Each candidate for and any person holding the office must be of good character</p> <p><b>Age</b> Age restrictions shall only apply to a candidate where he/she is not classified as a new entrant (within the meaning of the Public Service Superannuation Act, 2004). A candidate who is not classified as a new entrant must be under 65 years of age.</p> <p><i>Eligibility criteria should promote the principles of equality of opportunity, inclusiveness and diversity.</i></p>
<p><b>Post Specific Requirements, additional qualifications and/or experience required</b></p>	<ul style="list-style-type: none"> <li>❑ <i>This section may be used to include educational or experience requirements that are deemed necessary for a specific post in a specific location. For example:</i></li> <li>❑ <i>in the case of a staff nurse for an ICU unit the requirement may be that applicants must have an ICU course completed or have x months/years experience in ICU.</i></li> <li>❑ <i>Fluency in Irish where it is established that this is an essential requirement in delivering the service.</i></li> </ul>

<p><b>Skills, competencies and/or knowledge</b></p>	<p>Please consider what skills or knowledge is essential to carry out the post i.e. the job cannot be carried out without the use of these skills or knowledge.</p> <ul style="list-style-type: none"> <li>❑ It may be useful to examine the duties of the post and consider what specific skills a candidate would need to carry out those duties e.g. if a duty is to “Develop and maintain close links with the services users, family/guardian ensuring a partnership approach”- the skills a candidate would need to execute this element of the job might be communication skills with regard to building relationships, empathising and focusing on the service user.</li> <li>❑ It is important to be specific about what exactly you are looking for i.e. rather than writing a generic “good communication skills” be exact in what skills are required e.g. “demonstrate good communication skills especially with regard to presentation skills and delivering complex information in understandable terms”</li> </ul> <p><b>In this section you can list technical skills that are needed e.g.</b>  <i>Demonstrate evidence of computer skills including the use of power point and the internet as a research tool</i>  <i>e.g. Display evidence based clinical knowledge in making decisions regarding client care</i></p> <p><i>Below are some examples of skills, competencies or knowledge that can be used:</i></p> <ul style="list-style-type: none"> <li>❑ <i>Demonstrate evidence of effective planning and organising skills including awareness of resource management and importance of value for money</i></li> <li>❑ <i>Demonstrate ability to manage deadlines and effectively handle multiple tasks</i></li> <li>❑ <i>Demonstrate effective communication skills including: the ability to present information in a clear and concise manner; the ability to facilitate and manage groups through the learning process; the ability to give constructive feedback to encourage learning</i></li> <li>❑ <i>Demonstrate awareness and appreciation of the service user</i></li> <li>❑ <i>Demonstrate leadership and team management skills including the ability to work with multi disciplinary team members</i></li> <li>❑ <i>Demonstrate evidence of ability to empathise with and treat patients, relatives and colleagues with dignity and respect.</i></li> <li>❑ <i>Demonstrate understanding and/ or experience of dental services</i></li> <li>❑ <i>Demonstrate evidence of computer skills including use of Microsoft Word, Excel, email, and Smartstream systems</i></li> <li>❑ <i>Demonstrate a working knowledge of the hospital I. T system</i></li> </ul> <p><i>It is important to use the word “demonstrate” as the main part of the interview will be based on the examining the requirements of the post as laid out in this section and candidates must demonstrate their competence in the chosen areas.</i></p>
<p><b>Other requirements specific to the post</b></p>	<p>Please outline the specific criteria that are specific to the post, e.g. access to transport as post will involve frequent travel,</p>

<b>Competition Specific Selection process</b>	<p><i>Insert here essential competition specific requirements e.g. competency based application form, keyboard test, psychometric testing, completion of a presentation at the interview, job simulation exercise etc.</i></p> <p><i>These can be discussed and agreed with your HR Department</i></p>
<b>Shortlisting</b>	<p>Applicants may be shortlisted for interview based on information supplied in the application form at the closing date or in other specified assessment documentation</p> <p>Criteria for short listing are based on the requirements of the post as outlined in the post specific requirements, duties, skills, competencies and/ or knowledge section of this job specification and the information supplied in the competency based application form if used.</p>
<b>Code of Practice</b>	<p>Appointments to positions in the Health Service Executive are subject to the Codes of Practice published by the Commission for Public Service Appointments (CPSA). Details of the Code of Practice are available on line at <a href="http://www.cpsa-online.ie">www.cpsa-online.ie</a>. The Code of Practice sets out how the core principles of probity, merit, equity and fairness might be applied on a principle basis.</p> <p>The Code of Practice</p> <ul style="list-style-type: none"> <li>• specifies the responsibilities placed on candidates who participate in recruitment campaigns.</li> <li>• Facilitates feedback to applicants on matters relating to their application when requested,</li> <li>• outlines procedures in relation to a) requests for a review. of the recruitment and selection process and b) review in relation to allegations of a breach of the Code of Practice.</li> </ul> <p>Additional information on the HSE's review process is available in the document posted with each vacancy entitled "Code of Practice, information for candidates or on <a href="http://www.cpsa-online.ie">www.cpsa-online.ie</a></p>
<b>Protection of Persons Reporting Child Abuse Act 1998</b>	<p>As this post is one of those designated under the Protection of Persons Reporting Child Abuse Act 1998, appointment to this post appoints one as a designated officer in accordance with Section 2 of the Act. You will remain a designated officer for the duration of your appointment to your current post or for the duration of your appointment to such other post as is included in the categories specified in the Ministerial Direction. You will receive full information on your responsibilities under the Act on appointment.</p>



Feidhmeannacht na Seirbhíse Sláinte  
Health Service Executive

## HEALTH SERVICES EXECUTIVE

### Terms and Conditions of Employment Title of Post INSERT

<p><b>Tenure</b></p>	<p>The appointment is whole-time, permanent and pensionable. <b>Change as appropriate.</b></p> <p>Appointment as an employee of the Health Service Executive is governed by the Health Act 2004 and the Public Service Management (Recruitment and Appointment) Act 2004.</p>
<p><b>Remuneration</b></p>	<p>The Salary scale for the post is:</p>
<p><b>Working Week</b></p>	<p>The standard working week applying to the post is:</p>
<p><b>Annual Leave</b></p>	<p>The annual leave associated with the post is:</p>
<p><b>Superannuation</b></p>	<p>All pensionable staff become members of the pension scheme.</p> <p>Applicants for posts in the Mental Health service are advised that Section 65 of the Mental Treatment Act, 1945, <u>does not</u> apply to new entrants to the Mental Health Services as defined by the Public Service Superannuation(Miscellaneous Provisions) Act, 2004 (Section 12 of that Act) New entrants</p>
<p><b>Probation</b></p>	<p>Every appointment of a person who is not already a permanent officer of the Health Service Executive or of a Local Authority shall be subject to a probationary period of 12 months.</p>
<p><b>Delete either A or B as appropriate</b></p> <p><b>A</b> <b>Positions remunerated at or above €173,217 as at 1<sup>st</sup> March 2008</b></p>	<p>Positions remunerated at or above €173,217 as at 1<sup>st</sup> March 2008 are designated positions under the Ethics in Public Office Acts 1995 and 2001.</p> <p>In accordance with Section 18 of the Ethics in Public Office Act 1995, a person holding such a post is required to prepare and furnish an annual statement of any interests which could materially influence the performance of the official functions of the post. This annual statement of interest should be submitted to the Chief Executive Officer not later than 31<sup>st</sup> January in the following year.</p> <p>In addition to the annual statement, a person holding such a post is required, whenever they are performing a function as an employee of the HSE and have actual knowledge, or a connected person, has a material interest in a matter to which the function relates, provide at the time a statement of the facts of that interest. A person holding such a post should provide such statement to the Chief Executive Officer. The function in question cannot be performed unless</p>

	<p>there are compelling reasons to do so and, if this is the case, those compelling reasons must be stated in writing and must be provided to the Chief Executive Officer.</p> <p>Under the Standards in Public Office Act 2001, the post holder must within nine months of the date of appointment provide the following documents to the Standards in Public Office Commission at 18 Lower Lesson Street, Dublin 2:</p> <ol style="list-style-type: none"> <li>1. <i>A Statutory Declaration, which has been made by the post holder not more than one month before or after the date of the appointment, attesting to compliance with the tax obligations set out in section 25(1) of the Standards in Public Office Act and declaring that nothing in section 25(2) prevents the issue to the post holder of a tax clearance certificate</i></li> <li>2. <i>and either</i> <ol style="list-style-type: none"> <li>(a) <i>a Tax Clearance Certificate issued by the Collector-General not more than 9 months before or after the date of the appointment or</i></li> <li>(b) <i>an Application Statement issued by the Collector-General not more than 9 months before or after the date of the appointment.</i></li> </ol> </li> </ol> <p>A person holding such a post is required under the Ethics in Public Office Acts 1995 and 2001 to act in accordance with any guidelines or advice published or given by the Standards in Public Office Commission. Guidelines for public servants on compliance with the provisions of the Ethics in Public Office Acts 1995 and 2001 are available on the Standards Commission's website <a href="http://www.sipo.gov.ie">http://www.sipo.gov.ie</a></p>
<p><b>B</b></p> <p><b>Ethics in Public Office 1995 and 2001</b></p> <p><b>Positions remunerated at or above the minimum point of the Grade VIII salary scale (€ 67,567 as at 01.03.2008)</b></p>	<p>Positions remunerated at or above the minimum point of the Grade VIII salary scale (€ 67,567 as at 01.03.2008) are designated positions under Section 18 of the Ethics in Public Office Act 1995. Any person appointed to a designated position must comply with the requirements of the Ethics in Public Office Acts 1995 and 2001 as outlined below;</p> <p>A) In accordance with Section 18 of the Ethics in Public Office Act 1995, a person holding such a post is required to prepare and furnish an annual statement of any interests which could materially influence the performance of the official functions of the post. This annual statement of interest should be submitted to the Chief Executive Officer not later than 31<sup>st</sup> January in the following year.</p> <p>B) In addition to the annual statement, a person holding such a post is required, whenever they are performing a function as an employee of the HSE and have actual knowledge, or a connected person, has a material interest in a matter to which the function relates, provide at the time a statement of the facts of that interest. A person holding such a post should provide such statement to the Chief Executive Officer. The function in question cannot be performed unless there are compelling reasons to do so and, if this is the case, those compelling reasons must be stated in writing and must be provided to the Chief Executive Officer.</p> <p>C) A person holding such a post is required under the Ethics in Public Office Acts 1995 and 2001 to act in accordance with any guidelines or advice published or given by the Standards in Public Office Commission. Guidelines for</p>

	public servants on compliance with the provisions of the Ethics in Public Office Acts 1995 and 2001 are available on the Standards Commission's website <a href="http://www.sipo.gov.ie/">http://www.sipo.gov.ie/</a>
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**Application Form – Consultant**

Closing Dates: \_\_\_\_\_

**Competition Details**

<b>SECTION A – Personal Details (as used on Medical Council Documents)</b> <b>The completion of all fields in this section is mandatory.</b>	
<i>Surname:</i>	
<i>First name:</i>	
<i>Address for correspondence:</i>	
<i>Home telephone number:</i>	
<i>Work telephone number:</i>	
<i>Mobile telephone number:</i>	
<i>E-mail Address:</i>	
<i>PPS Number: ( If issued in Ireland)</i>	
<i>Do you require a work permit to work in Ireland?</i>	
<i>Do you hold a Garda National Immigration Bureau card?</i> <i>If yes please state the stamp number on your Garda National Immigration Bureau card and expiry date.</i> <i>Please attach a copy of GNIB card or visa/permit</i>	Yes <input type="checkbox"/> No <input type="checkbox"/> Garda National Immigration Bureau stamp number:  Expiry date of Garda National Immigration Bureau card:
<i>Please state start and end date of permit/visa:</i>	Start:                      End:

## SECTION B – Irish Medical Council Registration

The completion of this section is mandatory.

Name in which you are registered	
Irish Medical Registration or Reference Number:	
Type of Registration:	Temporary: Full: Register of Medical Specialists
Expiry Date: (if relevant)	

## SECTION C – Education

Medical School/University: City/Country Primary Medical Qualification: Honours Degree: (Yes/No)	Date of Graduation: (only list exams passed)	
Higher Qualification/ Degree/Diploma Completed	Awarding Body	Date of Qualification (DD/MM/YY)
Postgraduate Exams		
Exam Undertaken	Grade achieved	Date(DD/MM/YY)



**SECTION E - Experience relevant to the Role**

*Please detail aspects of your career to date which you consider make you suitable for this post, giving examples of professional achievement, clinical experience and personal abilities. Please note that information may be used when short listing for interview.*

--

**SECTION H – CV**

**Use the space below to attach your CV**

--

**SECTION I – References**

- *We require names and contact details of **three referees** from recent clinical appointments*
- *One reference must be from your current or most recent employer*
- *Any offer of a post is subject to satisfactory references*

Full Name	Job Title	Hospital and Address	Phone Number/ Email Address
<i>Referee from Current or Most Recent Employment:</i>			
<i>Referees' from Previous Employment (provide 2):</i>			

## SECTION J – General Declaration

It is important that you read this Declaration carefully and then sign:

Name: \_\_\_\_\_

Post applied for: \_\_\_\_\_

### **PART 1 Obligations Placed on Candidates who Participate in The Recruitment Process**

The Public Services Management (Recruitment and Selection) Act 2004 makes very specific provisions in relation to the responsibilities placed on candidates who participate in recruitment campaigns and these are detailed in Section 5 of the Code of Practice issued under the Act.

These obligations are as follows:

- Candidates must not:
  - knowingly or recklessly provide false information
  - canvass any person with or without inducements
  - personate a candidate at any stage of the process
  - interfere with or compromise the process in any way

Candidates should note that canvassing will disqualify them and result in their exclusion from the appointment process.

Any person who contravenes the above provisions, or who assists another person in contravening the above provisions, shall be guilty of an offence.

It is the policy of the HSE to report any such above contraventions to An Garda Síochána.

In addition, where a person found guilty of an offence was or is a candidate at a recruitment / selection process, then, in accordance with the Public Services Management (Recruitment and Selection) Act 2004:

- where he / she has not been appointed to a post, he / she shall be disqualified as a candidate; and
- where he / she has been appointed as a result of that process, he / she shall forfeit that appointment

### **Part 2 Declaration**

"I declare that to the best of my knowledge and belief there is nothing in relation to my conduct, character or **personal clinical practice** or background of any nature that would adversely affect the position of trust in which I would be placed by virtue of my appointment to this position. I hereby confirm my irrevocable consent to the Health Service Executive to the making of such enquiries, as the Health Service Executive deems necessary in respect of my suitability for the post in respect of which this application is made.

I hereby accept and confirm the entitlement of the Health Service Executive to reject my application or terminate my employment (in the event of a contract of employment having been entered into) if I have omitted to furnish the Health Service Executive with any information relevant to my application or to my continued employment with the Health Service Executive or where I have made any false statement or misrepresentation relevant to this application or my continuing employment with the Health Service Executive.

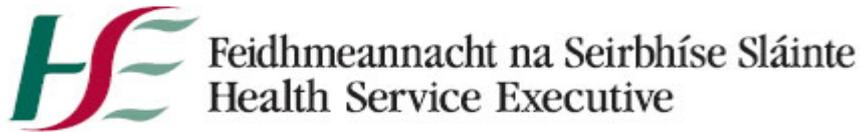
Furthermore, I hereby declare that all the particulars furnished in connection with this application are true, and that I am aware of the qualifications and particulars for this position. I understand that I may be required to submit documentary evidence in support of any particulars given by me on my Application Form. I understand that any false or misleading information submitted by me will render me liable to automatic disqualification or render me liable to dismissal, if employed."

**I hereby confirm that I am not subject now nor have been subject to any investigation by a medical council or police in this or another jurisdiction.**

**Failure to sign application will render it invalid \*(applications sent by e-mail must be signed at interview stage)**

SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_



## Guidelines for Shortlisting for the (insert post name) in the HSE

Date

### Important Notice

This shortlisting guide provides support to Shortlisting Boards at the shortlisting stage of the **(insert post name)** in the Health Service Executive selection process, and will help to ensure a consistency of approach across all candidates. It provides clear outlines of the areas to be explored and guidelines for scoring.

This documentation is confidential and for restricted circulation only. The information contained in the guide is **CONFIDENTIAL** and for use of **Board Members ONLY**. It should not be disclosed to **ANY** third parties and must **NOT** be reproduced in any way. This confidentiality requirement applies before, during and after this shortlisting process.

On completion of the shortlisting process, please immediately return this guide to the HR staff member dealing with the competition (include it with shortlisting results etc.)

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## 1. Introduction<sup>4</sup>

To assist in the shortlisting of candidates for these vacancies, we have introduced a 'Supplementary Questions Section' on the Application Form, to be used in conjunction with the other information provided in the application form. This document presents a summary of the rationale underpinning this approach, the features of the 'Section' and benefits of the approach. Notes are also provided on how the scoring system is intended to assist the short listing process.

The approach, commonly known as *Accomplishment / Achievement Record* approach, involves listing the summary definitions for a range of key skill / quality areas associated with effective performance in the role of (insert post name) and asking candidates to note their achievements in these areas. The provision of this information and the request to provide evidence is expected to result in a number of positive outcomes for the selection procedure.

These include:

- The provision of a realistic preview of the role.
- The self-selection out of less motivated candidates.
- Information directly relating to the skills / qualities that could be used to provide a framework for a more systematic approach to the short listing of applications.
- Information directly relating to the competencies that could be probed at structured interview.

It is important that any reduction in the applicant pool is effective and fair. This type of application form helps by providing a framework for a more systematic approach to short listing.

This document provides you with guidelines on how to make an initial interpretation of the information provided by candidates. Along with the essential qualifications for the post, there is specific information relating to the behavioural indicators associated with effective performance in the role and guidelines on how to rate the information presented.

It is recommended that the evidence gathered from the Supplementary Questions Section of the application form should be considered, along with evidence from other sources e.g. experience etc. in determining whether or not a candidate should be called forward for interview.

### **Accomplishment/Achievement Records**

This method involves inviting applicants to write about their past experiences as they relate to key skills and qualities required for effective performance in a job. For example, in the area of 'Planning and Organising', applicants would be asked for examples of their successes in planning and organising from previous or current experience, at home, during college, at work etc.

An account of accomplishments and achievements requires significant effort on the part of the applicant. By providing an applicant with information about what the job entails and asking them to think about it and provide evidence of the required skills / qualities, it can serve as a valuable self-selecting tool. It is very likely to reduce applications from unsuitable or unmotivated applicants.

This approach first came to prominence in the mid 1980's when Hough (1984) developed the accomplishment record method to assist selection and promotion decisions affecting professionals. It has been used successfully in selecting legal professionals, physicians, librarians, public sector professionals and managers (Von Bergen & Soper, Society for Advancement of Management Journal, 1995) and on a number of Professional and Technical posts within the Public Appointments Service.

## 2. Candidate Perceptions of Skill / Quality (Competency) Based Approach to Short listing

For your information, summary results from recent surveys conducted by the Public Appointments Service on how candidates perceived the relevance, fairness and effectiveness of using a competency based application form to assist shortlisting are presented below.

Candidates attending for interview for recent professional Senior Civil Service appointments, responding to Public Appointments Service feedback questionnaires indicated that:

- the approach was *very good* in terms of giving them an opportunity to demonstrate evidence of their ability in a particular area
- it was *fair*, to use the information to assist in making a decision to shortlist
- the approach was *more relevant* to the post, than the approach used with a more traditional Application Form;
- it was a *fairer* method for assessing abilities/behaviours, than the approach used with a more traditional Application Form;

## 3. Purpose of the Supplementary Questions Section

The questions in this section and the scoring guidelines for interpretation of the information provided represent a systematic approach to the short listing of applicants by clearly focusing on some of the key skills and qualities required for effective performance in the post. This information will also be available to the Board to help structure the interview and provide a platform for questioning.

This approach invites the applicant to write about their past experiences as they relate to, and demonstrate, some of the key skills and qualities required for effective performance in the post.

On the basis of a review of the role the key skill / quality areas necessary for effective performance in the post were agreed. An overview of these skill areas and where they are assessed during the selection process is presented below.

In the table below you should list the skill areas appropriate to the role and place a tick '✓' in the relevant boxes to the right of the skill area column to indicate which areas are assessed where over the course of the selection process.

<u>Skill area</u>	<u>Application Form</u>	<u>Shortlisting</u>	<u>Interview</u>

*As the table suggests the following areas are appropriate for assessment at the short listing stage for this post:*

- **List the criteria being assessed during the shortlisting stage**

#### **4. Features of the Section**

To ensure the effectiveness and manageability of this section as an aid to selection, the following features were incorporated into the design of the application form:

- Clear instructions and guidance for completion of the section are provided;
- Individual questions relating to specific key skill/quality areas identified as necessary for the job;
- Each question sets out a brief description of the skill/quality area for which evidence is being sought. This description is set out in terms of a readily identifiable set of behaviours;
- Applicants have clear guidelines on how to set out their responses. This sets out the length of response required and the structure of the response. The structure is as follows:
  - a brief description of the background/ nature of the task, problem or objective
  - what the applicant actually did and how they demonstrated the skill/ quality
  - the outcome or result of the situation

#### **5. Benefits of the Approach**

The benefits of this approach are as follows:

- The questions focus on clearly job-related information, and are seen as more relevant as selection criteria by both the employer and by the applicant;
- In addition to the essential requirements, it offers an approach to shortlisting that is clearly focused on some of the key skills and qualities required for effective performance in the post;
- Job-related information is conveyed to the applicant in the form of the questions themselves, and in setting out the skills and qualities required - this can aid the applicant in their own decision as to whether to continue with their application;
- The applicant's responses to this section provide job relevant skills/qualities information about the applicant that can be used later in the process, i.e. as information for the interviewers.

## 6. Introduction to the Scoring Guidelines

Each candidate should be assessed based on his/her work experience relevant for the role and based on the eligibility criteria as laid out in the Job Specification for the role. A number of broad indicators are provided for this area (see page 8). In addition, the scoring guidelines for the skill / quality areas for short-listing are presented on the following pages.

To assist you in your initial interpretation of the skill/ quality areas to be used in shortlisting you are provided with:

- a description of the skill/ quality areas as they appear on the application form;
- highlighted, in bold, the key elements of each skill area that are related to effective performance, and of which evidence is sought;
- indicators of what evidence is deemed suitable;
- a *Suitability of Evidence Scale* (see below) for assessing the information provided by candidates **to consider calling forward for interview**. The 'Insufficient Evidence / Sufficient Evidence' scale is further broken down as an aid to board members in making an assessment decision. Please note that Board Members are only required to indicate if a candidate is suitable to call forward to interview or not (i.e. whether they provided 'insufficient' or 'sufficient' evidence across the skill / competency areas)
- an Assessment & Summary Record Sheet for recording candidate assessments on each skill / quality area is provided.

### Suitability of Evidence Scale

<b>Insufficient Evidence</b>	<b>Sufficient Evidence</b>	
<b><i>Not Very Suitable</i></b> <i>evidence of this key skill area presented</i>	<b><i>Adequate</i></b> <i>evidence of this skill area presented</i>	<b><i>Very Suitable</i></b> <i>evidence of this key skill area presented</i>

## 7. Your Task prior to the Shortlisting Board

The purpose of providing you with these guidelines is to assist you in making an initial interpretation and assessment of the information put forward by candidates in the application form.

In order to maximise the use of time during the shortlisting board, it is strongly advised that each board member complete an initial review the application forms in advance, and make preliminary decisions as to which candidates are 'suitable', and 'unsuitable' to be called forward to interview.

In reviewing the responses provided by candidates please keep the following points in mind:

- The areas for shortlisting should be reviewed and assessed using the guidelines provided.
- You should assess the information provided under each question area in isolation. You should avoid allowing the candidates career history to date influence your assessment on the competency areas.
- It is recommended that you assess one skill / quality area at a time. This will allow you to become more familiar with each area being assessed and the criteria associated with effective performance in this area. It should also allow for greater consistency in your own assessments.
- It should be pointed out that, at this stage, you are not comparing candidates against each other. Your assessments are made with regard to how the evidence presented compares against the criteria for the role and the suitability of this evidence to consider calling the candidate forward for interview.
- The evidence gathered from the Supplementary Questions Section should be considered, along with the evidence from other sources i.e. experience etc., in determining whether or not a candidate should be called forward for interview.
- During your initial review, you may find it useful to sift through the application forms and divide them in to 3 candidate categories:
  - Highly likely to be called to interview (probably in)
  - Highly unlikely to be called to interview (probably out)
  - Somewhere in between (maybe)

These can then be discussed in detail during the shortlisting board.

## 8. Your task during the Shortlisting Board

- During the shortlisting board itself, board members will review each candidate's application form, one at a time, and make an agreed final decision as to whether that candidate demonstrated sufficient evidence to be called forward to interview or not.
- This decision is to be made again taking into consideration the guidelines and criteria for scoring.
- Remember, if a candidate is awarded an 'insufficient' mark in one (or more!) areas they will not be deemed suitable overall and will not be called forward to interview.
- One of the board members must take responsibility for ensuring that a final (agreed) **Assessment and Summary Comment Sheet** is completed for **each candidate**. This sheet records the assessment awarded on each of the skill / competency areas and an overall summary comment (of 3-4 lines) justifying the decision made. It is important that the comment composed and recorded is descriptive and accurate and clearly relates to the evidence the candidate presented on the application form. Comments should be clearly reflective of the shortlisting criteria and should represent the consensus view of the board. When writing summary comments for candidates who have failed to qualify, it is recommended that reference be made to areas in which they may need to provide additional evidence of a particular behaviour rather than that they did not provide enough information.
- This information is sent to candidates as feedback.

**Eligibility Criteria / Relevant Work Experience – Scoring Guidelines**

**Eligibility Criteria / Work Experience**

The eligibility criteria for these posts are detailed in the Job Specification for each.

As the experts taking part in the short-listing process you will play a central role in defining the range, breadth and depth of experience required for this post, but a number of high-level indicators are provided below.

Please remember that it is the quality of experience that should be considered as opposed to the quantity (length of experience).

**Behavioural Statements:**

- [Detail here the criteria as specific to the role](#)

**Suitability of Evidence Scale**

<b>Insufficient Evidence</b>	<b>Sufficient Evidence</b>	
<i>Not Very Suitable evidence of this key skill area presented</i>	<i>Adequate evidence of this skill area presented</i>	<i>Very Suitable evidence of this key skill area presented</i>

**Scoring Guidelines (Cont'd)**

Detail here the competency title, summary description and behavioural indicators for each competency area being assessed at the shortlisting stage of the selection process.

It is useful for Board Members if you repeat the rating scale underneath the competencies on each page.

**Suitability of Evidence Scale**

<b>Insufficient Evidence</b>	<b>Sufficient Evidence</b>	
<i>Not Very Suitable</i> <i>evidence of this key skill area presented</i>	<i>Adequate</i> <i>evidence of this skill area presented</i>	<i>Very Suitable</i> <i>evidence of this key skill area presented</i>

**(Post Title)**

**Shortlisting Assessment & Summary Comments Sheet**

<b>Candidate Name:</b>	<b>Candidate Number:</b>
------------------------	--------------------------

SELECTION CRITERIA: Skills/ Competencies/ Knowledge*	In Sufficient Evidence	Sufficient Evidence
<a href="#">List here the areas being assessed during the shortlisting process</a>		

*Summary Comment*

**Overall Assessment: Call to Interview (please write yes/ no in appropriate box below)**

Yes  No

Interview Board - Please sign and date below:

---

Competition Name		Competition Date	
Advert Reference No.		HSE Area	

**Appendix 4 Reference Template**



**LOCUM & TEMPORARY CONSULTANTS  
EMPLOYMENT REFERENCE FORM**

*Note: Text appearing in blue italics is intended to be a prompt for the HR department and should be deleted from the form before it issues to the Referee.*

*To be Completed by HR Department*

<p><b>Referee Details</b></p> <p>Name &amp; Title of Referee:</p> <p>Employer / Service Name &amp; Address:</p> <p>Date:</p>
--

**Dear Referee,**

\_\_\_\_\_ of \_\_\_\_\_ has applied for a post with the Health Service Executive (HSE) *<Area>* and states that he / she was employed by you from \_\_\_\_\_ to \_\_\_\_\_ as a \_\_\_\_\_.

I would greatly appreciate if you would complete Section A of this form (section A1-A26 only) and return it duly completed, by return post. Please indicate your response by placing a tick (✓) in the relevant box.

You will note that, as part of the wider selection process, Interview Board Members may wish to follow –up with you, post interview, on the information you provide on this form / in relation to the candidate’s stated skills / experience as discussed during the interview. The Board Members may wish to verify, for example, the candidates experience in relation to certain procedures, techniques, areas of clinical knowledge, clinical experience etc. Section B of this form allows for them to record any additional queries they may have and your response to those queries.

I wish to advise you that all personnel records, including references, are subject to the terms laid down in the Freedom of Information Acts 1997 & 2003, and may be available to the candidate at their request. You will be informed, as a matter of courtesy, of the release or disclosure of references. Whilst every effort will be made to protect disclosure of this reference, there may be occasions when this will not be possible.

If you have any queries please contact me at telephone *<insert number>*.

Yours faithfully,

\_\_\_\_\_  
For Appointments Officer

**Section A This section is to be completed by the Referee**

To aid us in our interpretation of your responses to the remainder of the Reference Form we would like to have a sense for the level of direct involvement you have had with the Candidate. Please complete A1 – A5 below.

<p>A1. What was your connection to this applicant?</p>	<input type="checkbox"/> Supervisor <input type="checkbox"/> Supervising Consultant <input type="checkbox"/> Colleague <input type="checkbox"/> Peer <input type="checkbox"/> Professor / lecturer	<input type="checkbox"/> Other: <i>(please specify)</i> <hr/>																													
<p>A2. At what level is / was the candidate employed?</p>	<input type="checkbox"/> SHO <input type="checkbox"/> Registrar <input type="checkbox"/> Specialist Registrar <input type="checkbox"/> Consultant <input type="checkbox"/> Other <i>(please specify)</i> <hr/>	<table border="1"> <thead> <tr> <th colspan="2">Corresponding Dates</th> <th colspan="2">Capacity</th> </tr> <tr> <th>From</th> <th>To</th> <th>Permanent / Full Time</th> <th>Temporary / Part Time</th> </tr> </thead> <tbody> <tr> <td><hr/></td> <td><hr/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </tbody> </table>	Corresponding Dates		Capacity		From	To	Permanent / Full Time	Temporary / Part Time	<hr/>	<hr/>	<input type="checkbox"/>	<input type="checkbox"/>	<hr/>	<hr/>	<input type="checkbox"/>	<input type="checkbox"/>	<hr/>	<hr/>	<input type="checkbox"/>	<input type="checkbox"/>	<hr/>	<hr/>	<input type="checkbox"/>	<input type="checkbox"/>	<hr/>	<hr/>	<input type="checkbox"/>	<input type="checkbox"/>	
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<p>A3. How current is your working relationship with this applicant?</p>	<input type="checkbox"/> Currently work or interact together <input type="checkbox"/> Worked or interacted together in the last 2 years <input type="checkbox"/> Worked or interacted together 2-5 years ago <input type="checkbox"/> Worked or interacted together 5+years ago																														
<p>A4. How long did you work / interact together?</p>	<input type="checkbox"/> Less than 6 months <input type="checkbox"/> Between 6 and 18 months <input type="checkbox"/> Between 18 months and 3 years <input type="checkbox"/> More than 3 years																														
<p>A5. Did you work:</p>	<input type="checkbox"/> In direct contact <input type="checkbox"/> Sometimes on the same projects <input type="checkbox"/> Rarely on the same projects <input type="checkbox"/> Other: <i>(please specify)</i> : _____																														

**Professional Conduct**

Please complete section A6-A14 below based on your personal experience of the applicant and any other knowledge you may have about the applicant.

A6. Why did he/she leave their employment?	Reason:
--	---------

If you respond 'Yes' to any of the questions below please provide additional information under the 'Please Comment' column.

	Yes	No	Please comment:
A7. Was his/her service in all respects satisfactory? (e.g. was any disciplinary action taken?)	<input type="checkbox"/>	<input type="checkbox"/>	
A8. Do you have any evidence to suggest that the applicant has or had a problem with alcohol or substance abuse?	<input type="checkbox"/>	<input type="checkbox"/>	
A9. Do you have any concerns relating to the candidate's professional performance, clinical skills, or mental and physical status, or any impairment related to chemical dependency?	<input type="checkbox"/>	<input type="checkbox"/>	
A10. To your knowledge does this candidate suffer from any health issues that would effect their judgement or performance as a Locum/ Temporary Consultant?	<input type="checkbox"/>	<input type="checkbox"/>	
A11. To your knowledge, does the applicant have any criminal offences against them or any proceedings pending?	<input type="checkbox"/>	<input type="checkbox"/>	
A12. Are you aware of any information that might affect this applicant's suitability for employment in a position where s/he would come into direct contact with children, the elderly, or clients in a state institution; or in a position that might involve work with confidential records or state funds?	<input type="checkbox"/>	<input type="checkbox"/>	
A13. To your knowledge has this candidate ever been the subject of an investigation by a Registration Body or other body?	<input type="checkbox"/>	<input type="checkbox"/>	
A14. To your knowledge has this candidate ever been the subject of a complaints process/ investigation relating to a patient incident?	<input type="checkbox"/>	<input type="checkbox"/>	

**Evaluation of the Applicants Skills & Abilities**

Based on your personal experience of the applicant and any other knowledge you may have about the applicant, how would you rate him / her on the following:

	Excellent	Above Average	Average	Below Average	Unsatisfactory
A15. Professional & Work Related Skills					
➤ Theoretical Knowledge	<input type="checkbox"/>				
➤ Standard of Clinical Work	<input type="checkbox"/>				
➤ Clinical Judgment	<input type="checkbox"/>				
➤ Willingness to Teach Others	<input type="checkbox"/>				
A16. Communication & Interpersonal Skills (e.g. with service users, families, colleagues, managers etc)	<input type="checkbox"/>				
A17. Organisational Skills (e.g. time / caseload / resource management)	<input type="checkbox"/>				
A18. Ability to work as part of a team	<input type="checkbox"/>				
A19. Leadership skills	<input type="checkbox"/>				
A20. Motivation & Commitment (e.g. receptiveness to training / up-skilling)	<input type="checkbox"/>				
A21. Receptiveness to changes in the workplace	<input type="checkbox"/>				
A22. Reliability / Dependability	<input type="checkbox"/>				
A23. Time Keeping	<input type="checkbox"/>				
A24. Overall Quality Of His/Her Job Performance	<input type="checkbox"/>				
<i>Additional comments on the above:</i>					

**Attendance Record** Please complete the following information in conjunction with your HR department.

A25. Was his/her overall attendance pattern satisfactory? Please provide specific details below:			Yes <input type="checkbox"/>	No <input type="checkbox"/>
Absence on Sick Leave Under 14 Days:	No of Days		No. of Occurrences	
Absence on Sick Leave Over 14 Days:	No of Days		No. of Occurrences	
Unauthorised Leave:	No of Days		No. of Occurrences	

**A26. Specific clinical competencies / experience relevant to this post**

The following skills / abilities have been identified as being important for effective performance in the role for which the applicant is applying. From your knowledge of and/or experience of the applicant, can you rate his/her performance in these areas:

Skill Areas <sup>5</sup>	Satisfactory	Unsatisfactory	Cannot Say
•	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
•	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
•	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
•	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
•	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

A27. Are you prepared to say without qualification:

(a) That you would re-employ the Applicant if the need arose? Yes  No

(b) That you would recommend him/her to the HSE as a person suitable for this post? Yes  No

Additional Comments:

*To be completed and signed by Referee*

**I hereby confirm that details contained in the above reference are correct.**

Signed:

Print Name:

Title:

Date:

Location:

**Thank you for taking the time to complete this Form. Please sign it and return it completed to:**

*<Include here details as to whom & where the completed form should be returned to>*

<sup>5</sup> The skill areas / abilities identified here are to be based on the requirements of the post (as detailed in the Job Specification) and should be entered on the Reference Form before it issues to the Referee. They skill areas are to be identified by the Recruitment Department in conjunction with the hiring manager / Consultant.



**Appendix 5**

**Eligibility Assessment Form**



Competition No.:      Position Title: \_\_\_\_\_ Number of Applicants: \_\_\_\_\_

Attached please find a copy of the Job description and Person Specification / Selection Criteria.

**Note regarding completion of the Eligibility Assessment Form**

Please note that the Eligibility Assessment Form is required to establish if candidates are eligible or ineligible to attend for interview. This process is not shortlisting. You are requested to determine the eligibility of each candidate in accordance with the details listed on the Job description under the heading; Essential Qualifications and Experience. A copy of the Job description and Person Specification has been attached in order to assist you in the completion of this form.

In the column marked Assessment / Comment you should complete the reasons why each candidate is deemed eligible or ineligible, as this will enable the Recruitment / HR Section staff inform the ineligible candidates of the reasons as to why there were deemed ineligible.

**Eligibility Assessment**

Candidate Name	Essential Requirements	Assessment/ Comment	Eligible Y or N
	Copy from Essential criteria section of the job specification		

**Eligibility Assessment carried out on \_\_\_\_\_ by:**

Name \_\_\_\_\_ Position: \_\_\_\_\_

Name \_\_\_\_\_ Position \_\_\_\_\_

Name \_\_\_\_\_ Position: \_\_\_\_\_

**Checked by Recruitment/HR:** \_\_\_\_\_ Date: \_\_\_\_\_

Name \_\_\_\_\_ Position: \_\_\_\_\_



## Locum & Temporary Consultant Interview Guide

### Important Notice

**This guide will provide support to Interview Boards at the interview stage of Locum & Temporary Consultant selection processes, and will help to ensure consistency in approach across all candidates. It provides clear outlines of the areas to be explored and guidelines for scoring. This documentation is confidential and for restricted circulation only. The information contained in the guide is CONFIDENTIAL and for use of Board Members ONLY. It should not be disclosed to ANY third parties and must NOT be reproduced in any way. This confidentiality requirement applies before, during and after this interview process.**

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## 1. Introduction

This document relates to the interview for the role of Locum & Temporary Consultant in the Health Service Executive (HSE). It presents a recommended structure and approach to questioning during the interview.

## 2. Format and Timing of the Interview

The time allowed for interview needs to be decided in advance in conjunction with the HR / Recruitment Unit. It is recommended that the time allocated to interview be no shorter than 15 minutes as Board Members will need at least this amount of time to get a true picture of the candidate's skills and abilities.

Once the time allowed for interview has been decided, the question areas and associated behavioural indicators need to be identified and agreed amongst the Interview Board Members (see page 7 for more information), and the interview structure recorded as per the example below.

### Sample: Structure & Format of the Interview

Skill Area	Time (minutes)
Introduction & brief overview of current role	3
Career to date (including clinical, medical and diagnostic skills)	15
Other skill areas	15
Communication & Interpersonal Skills (observable)	-
Wrap Up & Close	2
<b>Total time for interview</b>	<b>35</b>
<b>Time allowed for assessment post interview</b>	<b>10mins</b>

After the interview sufficient time must be allowed between candidates for the scoring of interviewees against the assessment criteria.

Before the interviews commence, Board Members must also decide on the rating scale to be used in assessing candidates, and the weighting to be applied to each area (see page 6 for a sample scoring breakdown template).

### 3. The Interview – Recommended Approach to Questioning on the Different Areas

#### ***Introduction & brief overview of current role***

It is recommended that the Chairperson commence the interview by introducing the Board Members to the candidate and providing the candidate with an overview of the format that the interview will take. The emphasis during the first few minutes will be on putting the candidate at ease. It may help to remind candidates of the following points:

- that the Board will be using the information supplied in the application form
- *the roles of the different Board Members*
- *some time will be spent going through the candidates' career to date*
- the importance of putting forward his / her own personal contribution at all stages
- there will be an opportunity to add information at the end of the interview

Once the initial introductions are complete, the Chairperson should invite the candidate to provide an overview of his / her current role. The Board Member questioning may find it useful to ask the candidate what:

- his / her motivations are for applying for this post at this time?
- his/ her personal career objectives are at this time?
- how would this role 'fit in' with their overall career aspiration(s)?

#### ***Career to Date (including Clinical, Medical and Diagnostic skills)***

THE INTERVIEW MIGHT THEN PROGRESS WITH A REVIEW OF THE CANDIDATE'S CAREER TO DATE, WITH PARTICULAR EMPHASIS ON AREAS OF EXPERIENCE THAT ARE PARTICULARLY SUITED TO THIS ROLE. THEMES THAT MAY BE ADDRESSED AT THIS STAGE OF THE INTERVIEW MAY COMPRISE:

- Range of experiences, at what level?
- Roles / responsibilities that they have had / scale of their role / who worked with / who reported to?
- Career highlights / key achievements to date / professional development achievements that they are particularly proud of / that are particularly relevant to this role?
- Key learning / challenges from each job / role / period?
- What aspects of his / her previous experience does s/he think will be most helpful to him / her in this role? Is there any unique experience? Please outline this?
- What makes them particularly suited to this role?
- What does s/he consider to be his / her biggest strengths? Areas for development?

*The board member questioning on this area may wish to delve into a particular experience in the candidate's career and explore that in more detail. Board Member questions' should draw out the relevant skills, abilities, experience and knowledge of the candidate. The key objective is to gain as rounded a picture of the candidate as possible, by seeking evidence from his/her past experience that will demonstrate his/her ability to meet the challenges of the role.*

### Questioning on Clinical, Medical and Diagnostic skills.....

<b>Previous situations where s/he demonstrated the clinical / medical / diagnostic skills required for this role</b>	Ask the candidate to describe clinical / medical / diagnostic situations (relevant to the role in question) that s/he was involved in his/her career to date.
<b>Action taken</b>	Probe the candidate on what exactly s/he did, what were his/her rationale behind decisions taken, how s/he solved problems that arose, dilemma's s/he faced etc. Ask him/her to describe the <b>action s/he took</b> – keeping the focus on his/her own contribution.
<b>Results Achieved</b>	What happened? How did the event end? What did s/he accomplish? What did s/he learn?

#### 4. Approach to Questioning

*You may find the following approach to questioning useful during the interview. It captures the best of interviewing and allows for maximum flexibility in determining the breadth and depth of what the candidate has actually done and how they may deal with the challenges associated with operating at the required level. For this to be effective, we are dependent on you to question and challenge the candidate from a number of angles. Using the structure below as a broad guide may help to provide a consistent approach to investigating the depth and appropriateness of candidate skills.*

You may find the following prompts on questioning of some use:

Systematically **probe** their experience and understand the context/ background through using 'what' / 'where' / 'when' type questions;

- the challenges / level of complexity
- the key players i.e. who else involved
- the actual responsibility of the candidate/ involvement of others

Don't take what a candidate says on face value. **Probe** and use plenty of what / how / why type questions. Explore the actual personal contribution of the candidate, the obstacles that had to be overcome and the outcome/ feedback received. Don't allow the candidate to theorise, or give you the text-book answer and establish learning and application of this to other situations i.e. added value.

Candidates should be able to talk comfortably about the relevance of their experience to other problems / situations in a wider context – What parallels would they draw?

For all experiences put forward, they should be linked to their relevance to the role – what is the relevance / how is it relevant / how does it prepare you for what you may be presented with / what will you bring to the table / situation (e.g. strengths / skills). What have you learned that will help you in the role ... How will you deal with x situation ...

Find out what they think are the:

- Core issues?
- Interdependencies?
- Consequences?
- Your contribution / value added to the role?

## 5. Note Taking & Summary Comments

Notes need to be taken during the interview, capturing the questions asked by the Board Member(s) and as much of what the candidate says as possible. The notes are a useful aid memoir for Board Members when its comes to scoring candidates. These notes are also an objective record of the interview and may be used as evidence and justification for any decisions made, should the decision of the board be open to appeal. The Code of Practice which forms part of the HSE's Recruitment Licence requires interviews to complete adequate documentation in relation to the selection process. Board Members are also required to provide a summary comment for each candidate at the end of the evaluation. This comment will be provided as feedback to candidates, and is particularly important in situations where the individual has been unsuccessful at interview.

In a recent labour Court hearing on a selection interview the Labour Court found "*that the absence of any contemporaneous notes of the interview, and the manner in which the marking credited to candidates was arrived at, makes it difficult for the respondent to rebut the presumption for unlawful discrimination*" and upheld the Equality Officer's finding of discrimination.

## 6. Scoring the Interview

Following the interview, the board will be invited to reflect on the candidate's performance at interview and to commit to a score on each assessment area (see sample below). Board Members are encouraged to note down their own impressions on each candidate under each of the headings, setting out both areas of particular strength and areas that you did not feel the candidates came up to the mark. These ratings should be based on the evidence gathered during the course of the interview. See Appendix A for a more detailed breakdown in the rating scale.

### Sample Scoring Breakdown

<b>Assessment Areas</b>	<b>Max. Mark Available</b>	<b>Min. Pass Mark</b>
Career to Date (including clinical, medical and diagnostic skills)	100	40
Other skill areas	100	40
Other skill areas	100	40
Communication and Interpersonal skills <i>(Global assessment from evidence provided across the interview)</i>	100	40
<b>Total marks available</b>	<b>400</b>	<b>N/A</b>

Following interviews the board will discuss all the candidates speaking first about the strengths of their favoured candidates. The chair will only invite board members to discuss potential shortcomings or reservations of a candidate once they have heard each board member set out the candidate's strengths.

## 7. Scoring Guidelines

The following pages provide an overview of the types of indicators against which candidates may be assessed. These are broad level indicators - the specific context of individual posts will influence the indicators to be included. It is important to agree these indicators in advance of the interview so that there is a common understanding across the board as to what is being looked for. By agreeing the indicators in advance you are also ensuring more fairness and consistency across candidates, ensuring that they are being assessed against the same criteria.

The list provided is not exhaustive and does not restrictive questioning to the items listed.

### a) Career to date (including Clinical, Medical and Diagnostic Skills)

*What we might expect to see:*

- Has considered his / her career path and has taken steps to see this through
- Demonstrates a track record of setting ambitious personal goals and tracking his / her performance against these goals
- Is genuinely motivated and committed to a career in this area
- Demonstrates personal awareness i.e. an awareness of his / her strengths and development needs
- Has an insight into the types of challenges likely to be faced in this role (and ideas as to how she/he might overcome these challenges)
- Demonstrates effective time and caseload management skills
- Is innovative, leads by example
- Demonstrates commitment to providing a quality service and a strong commitment to patient care
- Demonstrates the capacity to provide safe, efficient and effective service in the area of practice

*In relation to clinical, medical and diagnostic skills:*

- Demonstrates sufficient clinical and medical knowledge and experience to perform effectively in the role / step up to the role at this level / position
- Demonstrates sufficient analytical, clinical reasoning and diagnostic skills to perform effectively / maximise performance in the role
- Demonstrates sufficient decision making skills and expert judgement to carry out the duties and responsibilities of the role, including the management of ambiguity
- Demonstrates a knowledge of the theoretical models and approaches that apply in current medical practice (and relevant to the role)
- Demonstrates an ability to apply evidence based practice and to learn from experience
- Demonstrates an awareness of / having applied a range of appropriate interventions relevant to the service user group
- Demonstrates an appreciation of policies and procedures relevant to the specialist service user group
- Demonstrates a willingness to inform self and to adhere to legislative requirements or other requirements specific to practice area

## **b) Communication and Interpersonal skills**

*What we might expect to see:*

- Demonstrates the ability to communicate effectively with others
- Demonstrates sensitivity, composure, resilience and persuasiveness
- Maintains a professional relationship in all communications, treating others with dignity and respect
- Demonstrates the ability to be empathetic with others
- Works collaboratively with others to understand and establish expectations and desired outcomes
- Demonstrates diplomacy and tact when dealing with others
- Is patient and tolerant when dealing with conflict or negative attitudes from others
- Demonstrates positive teamwork skills and the ability to work as part of a multidisciplinary team
- Demonstrates the ability to build and maintain positive working relationships with patients, colleagues
- Excellent interpersonal and communication skills, an attitude of respect towards all staff and patients and a degree of personal integrity

## Appendix A: Rating Scale

This rating scale is intended for guidance only in classifying candidates with a view to awarding marks that reflect the relative differences between them.

Score	Label	Description
100 99, 98, 97 96, 95, 94, 93, 92, 91, 90,	Exceptional/ Excellent	<b>Difficult to see how it could be improved upon.</b>  <i>Summary comment might lead in with '&lt;Candidate name&gt; demonstrated excellent evidence of his/ her ability to &lt;refer to the skill area&gt;.....in the example /discussion area where she / he...&lt;refer to what the candidate actually said s/he did&gt;.'</i>
89, 88, 87, 86, 85, 84, 83, 82, 81, 80, 79, 78, 77, 76, 75, 74, 73, 72, 71, 70	Good	<b>An area of distinctive strength.</b>  <i>Summary comment might lead in with '&lt;Candidate name&gt; demonstrated good or very good evidence of his/ her ability to &lt;refer to the skill area&gt;.....in the example /discussion area where she / he...&lt;refer to what the candidate actually said s/he did&gt;.'</i>
69, 68, 67, 66, 65, 64, 63, 62, 61, 60, 59, 58, 57, 56, 55, 54, 53, 52, 51, 50, 49, 48, 47, 46, 45, 44 43, 42, 41, 40	Acceptable	<b>Achieves a sufficient standard to work at the required level</b>  <i>Summary comment might lead in with '&lt;Candidate name&gt; demonstrated adequate / satisfactory /sufficient evidence of his/ her ability to &lt;refer to the skill area&gt;.....in the example /discussion area where she / he...&lt;refer to what the candidate actually said s/he did&gt;.'</i>
39, 38, 37, 36, 35, 34, 33, 32, 31, 30, 29, 28, 27, 26, 25, 24, 23, 22, 21, 20, 19, 18, 17, 16, 15, 14,  13, 12, 11, 10, 9, 8, 7, 6, 5, 4, 3, 2 ,1, 0	Not acceptable	<b>Patchy. Significant weak areas or uneven aspects to performance</b>  <b>Little or no evidence of competency.</b>  <i>Summary comment might lead in with '&lt;Candidate name&gt; demonstrated insufficient evidence of his / her ability to...&lt;refer to the skill area&gt;.....in the example(s) / discussion area where she / he.....&lt;refer to what the candidate actually said s/he did&gt;.'</i>



**Appendix B**

**SAMPLE INTERVIEW MARKING SHEET**

Candidate Name:	Candidate Number:
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SELECTION CRITERIA	MAX POSSIBLE MARK	MIN PASS MARK	CANDIDATE'S MARKS
Career to Date (including Clinical, Medical & Diagnostic Skills)	100	40	
Communication and Interpersonal Skills ( <i>Observable at interview</i> )	100	40	
Total Marks	200	Must qualify in each criteria	

**Interpretation of marks awarded:**

- 90-100 Excellent/Exceptional**      Difficult how to see how it could be improved upon
- 70-89 Good**                              An area of strength
- 40-69 Acceptable**                      **Achieves a sufficient standard to work at the required level**
- 0-39 Not acceptable**                 Patchy; Significant weak areas or uneven aspects to performance. Little or no evidence of competency.

*Interview Board - please sign below:*

Chairperson Name & Date	Board Member Name & Date	Board Member Name & Date	Board Member Name & Date

Competition Name / Reference Number:		Location of Post:		Interview Date:	
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Appendix C

STRICTLY CONFIDENTIAL

INTERVIEW NOTE TAKING SHEET

Competition Name		Interview Date	
Candidate Name		Candidate Number	
Start Time		Board Member Questioning	<i>(initials only)</i>
Finish Time		Board Member Taking Notes	

Key word from the question	Candidate's Response

*Continue note taking overleaf*

**Appendix D** Exceptional Incident Report

<p style="text-align: center;"><b>EXCEPTIONAL INCIDENT REPORT FORM</b></p>
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**TITLE OF COMPETITION:** \_\_\_\_\_

**INTERVIEW DATE:** \_\_\_\_\_

**CANDIDATE'S NAME:** \_\_\_\_\_

**CANDIDATE'S NUMBER:** \_\_\_\_\_

**Please give details of Incident:**

**SIGNED:** \_\_\_\_\_

**SIGNED:** \_\_\_\_\_

**SIGNED:** \_\_\_\_\_

## Appendix E: The Employment Equality Acts 1998 and 2004

The Employment Equality Acts 1998 and 2004 outlaws discrimination in employment, vocational training, advertising, collective agreements, the provision of goods and services and other opportunities to which the public generally have access on nine grounds. These are:

- gender
- marital status
- family status
- age
- disability
- race
- sexual orientation
- religious belief
- membership of the Traveller Community

This act was originally titled the Employment Equality Act 1998. The most significant changes to the Act (2004) include the expansion of the scope of the Act to include self-employed people and partners in partnerships and the inclusion of people in domestic employment. Also the definition of discrimination in the new version of the Act includes discrimination by association or where discrimination is imputed to the person concerned. The legislation also requires that an employer take appropriate measures to facilitate a person with a disability to enable them to have access to employment, participate or advance in employment or undergo training, unless, it imposes a 'disproportionate burden' on the employer. Appropriate measures may include the adaptation of premises and equipment, patterns of working time, distribution of tasks or the provision of training.

Discrimination is described in the Act as the treatment of a person in a less favourable way than another person is, has been, or would be treated.

This legislation applies to:

- public and private sector employment
- employment agencies
- vocational training bodies
- the publication of advertisements
- trade unions and professional bodies
- full-time and part-time workers and
- collective agreements

Equal Opportunities in access to employment

Both direct and indirect discrimination is prohibited under the Employment Equality Act. It is also unlawful to classify a post by reference to sex. (Some exceptions are permitted, such as where the sex of the person is an occupational qualification for the job).

### **Direct discrimination**

Direct discrimination is where one person is treated less favourably than another is, has been or would be treated because of their position in relation to any of the nine grounds. Direct discrimination is comparative i.e. women being treated less favourably at interview than men are.

### **Indirect discrimination**

Indirect discrimination occurs when practices or policies which do not appear to discriminate against one group more than another actually have a discriminatory impact or where a requirement, which may appear non-discriminatory, adversely affects a particular group or class of persons. For example requiring a driving license for a job for which driving is not a key requirement may discriminate against people with a visual impairment.

### ***Implications of the Employment Equality Acts on recruitment and selection***

The following guidelines should be adhered to by interviewers to ensure that their practices are in line with the Employment Equality Act:

#### ***The requirements of the job must be carefully defined***

The employer should examine the job requirements and include only those which are essential for the job. This is necessary to guard against indirect discrimination as unnecessary job requirements may prevent suitable candidates from applying.

#### ***Questions must relate to the requirements of the job***

Questions should relate to the requirements of the job as specified in the Job Specification.

#### ***Avoid questions relating to personal/family circumstances***

Candidates should not be asked questions about their personal or family background or any questions in relation to the nine grounds on which discrimination is prohibited. A candidates' personal background is irrelevant to the ability to perform a particular job and candidates may perceive personal questions as being an indication of discrimination on the part of the interviewer.

#### ***Marks should be awarded to candidates in relation to the relevant criteria.***

Candidates should be scored only in relation to the evidence they put forward during the interview. A clearly defined marking scheme helps ensure that candidates are assessed objectively and that other factors such as 'gut feeling' do not influence the assessment. It is important to remember that feedback may be given to candidates.

#### ***Stereotyping/making assumptions***

Interviewers must be vigilant and guard against discrimination in recruitment which might arise as a result of prejudice, misconception, assumptions and stereotyping. When we stereotype an individual we attribute to him/her a number of traits based on those associated with the group of which he/she is a member.

Stereotyping involves basically two processes.

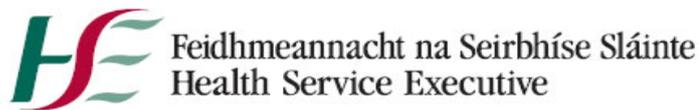
- (a) The formation of impressions and trait descriptions of particular groups, and
- (b) The assignment of these traits to a particular individual from that group.

*An example of stereotyping is males being seen as more aggressive and females being seen as more gentle and nurturing.*

Stereotypes can be useful in that they provide us with ways in which to order our lives and give a sense of predictability to the world. However within a selection context stereotyping can cause interviewers to inaccurately assign certain traits/abilities to candidates and can therefore lead to poor selection decisions being made.

Stereotypes may operate not only to influence the **initial reactions** of interviewers and shape their **expectations** of candidates during the interview. Although the interviewer will be forming impressions and making tentative assessments throughout the interview process, the final assessment and judgement should not be made until all available information about the interviewee has been gathered.

- It is important to ensure that equal treatment is afforded to all applicants;
- *Discrimination narrows the field of good candidates available;*
- *Interviewers must be vigilant in guarding against discrimination in recruitment which might arise as a result of prejudice, misconception, assumptions and stereotyping.*



**Final Decision of the Interview Board**

Candidate Name: \_\_\_\_\_

Candidate Number: \_\_\_\_\_

*Once the interview is completed, and a member of the interview board has had the opportunity to follow-up with the Referee (as necessary), all the Interview Board Members need to review the totality of information now available on the Reference Forms and make a judgment call as to whether they recommend the candidate for appointment or not.*

*Interview Board Members should agree on the recommendation and sign below.*

**Based on the candidates performance at interview, and on the information captured during Reference Checking, we hereby**

**Recommend**

**Do not Recommend**

**this candidate for appointment.**

In the case of a candidate not being recommended, please detail the rational behind that decision here. This information will be made available to candidates by means of feedback.

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Signed: \_\_\_\_\_  
Board Member

Date: \_\_\_\_\_

## Appendix 8 End of employment report



### LOCUM & TEMPORARY CONSULTANT EMPLOYMENT ASSESSMENT FORM

<b>Employee Name &amp; Title:</b>		
<b>Position employed in:</b>		
<b>Dates of Employment:</b>	<b>From:</b>	<b>To:</b>
<b>Reason for the employment<sup>6</sup>:</b>		
	<i>Name</i>	<i>Date Reference Received</i>
<b>Names of his / her Referees:</b>	1.	
	2.	
	3.	
	4.	
	5.	
	6.	
<b>IMC Registration:</b>	<b>Valid From:</b>	<b>To:</b>
<b>Medical Specialist Register:</b>	<b>Valid From:</b>	<b>To:</b>

#### End of Employment Evaluation of the Applicants Skills & Abilities

Based on your personal experience of the locum/temporary consultant and any other knowledge you may have gleaned about his/her performance from colleagues the consultant worked with over the period of his/her employment, how would you rate him / her on the following?

<sup>6</sup> For example, sick leave absence, force majeure

	Excellent	Above Average	Average	Below Average	Unsatisfactory
<b>1. Professional &amp; Work Related Skills</b>					
➤ Theoretical Knowledge	<input type="checkbox"/>				
➤ Standard of Clinical Work	<input type="checkbox"/>				
➤ Clinical Judgment	<input type="checkbox"/>				
<b>2. Communication &amp; Interpersonal Skills</b> (e.g. with service users, families, colleagues, managers etc)	<input type="checkbox"/>				
<b>3. Organisational Skills</b> (e.g. time / caseload / resource management)	<input type="checkbox"/>				
<b>4. Ability to work as part of a team</b>	<input type="checkbox"/>				
<b>5. Reliability / Dependability</b>	<input type="checkbox"/>				
<b>6. Time Keeping</b>	<input type="checkbox"/>				
<b>7. Overall Quality Of His/Her Job Performance</b>	<input type="checkbox"/>				
<i>Additional comments on the above:</i>					

### Patient Safety Record

8. Was the Consultant's work subject to any patient safety investigations during the course of his/ her employment?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<i>Additional Comments:</i>		

### Attendance Record

9. Was his/her overall attendance pattern satisfactory?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<i>Additional Comments:</i>		

### Overall Assessment Outcome

10. Are you prepared to say without qualification:		
(a) That you would re-employ the Consultant if the need arose?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
(b) That you would recommend him/her to the HSE as a person suitable for this post?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<i>Additional Comments:</i>		

***I hereby confirm that details contained in the above reference are correct.***

Signed:	Print Name:
Title & Location:	Date: