

The ICM National Recruitment ST3 Interview 2014

This report is in two sections from a Candidate and an Interviewer

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The 2014 interviews were held over two days at West Bromwich Albion Football Club, with each of the executive boxes being used as an interview room. The view was very impressive and it was my first experience of being in an executive box! There was an impressive array of 'Baggies' and general football memorabilia on the walls which was a welcome distraction from the inevitable anxiety whilst waiting around.

The interview process consisted of document checking, a series of written assessment and three interview stations.

The application guidance and pre-interview information was not comprehensive with regards to the necessary documentation and so I was missing a few extra copies of required documents at the time of the interview. The West Midlands Deanery were happy to receive copies of extra documentation electronically afterwards but within a 7 day deadline. The time allocated for the interview included document checking so there was no requirement to arrive 'extra-early' as I have had to for other interviews and this was mentioned in the pre-interview information.

The written assessment consisted of four tasks – presentation preparation (10 minutes), reflective practice (30 minutes), a task prioritisation exercise (30 minutes) and a clinical scenario preparation (20 minutes) which would be discussed in one of the interview stations. I felt there was ample time to complete each of the assessments within the allocated time. If you finished an exercise early you were not permitted to start the next task which I felt was fair. There was a healthy amount of 'reflection' required in some of the assessments and so having a few phrases or examples to demonstrate this was essential. Failure to 'show evidence of reflection' would be considered a fail in the reflective practice exercise. The clinical scenario was a reasonable set of circumstances and involved a vignette with some blood results and imaging to interpret. The task prioritisation exercise involved demonstrating one's reasoning for allocating resources to a number of competing demands and ranking a series of simultaneous requests for your involvement.

The Interview

My first station was the presentation station. I had five minutes to present to two consultants on “how can intensivists improve patient outcomes throughout the whole hospital?” and “discuss any barriers to this”. We were given two flipchart sheets and a marker pen during the preparation phase earlier. This was followed by five minutes of questioning on training, competencies, demonstrating commitment to the specialty and leadership.

The second station was the clinical scenario which we had been briefed on earlier. I was expected to summarise the case, present the clinical problems and discuss the management options. It felt quite similar to the long case component of the Final FRCA viva, only with an ICM slant and maybe a bit less formulaic i.e. more of a discussion.

My third station was the portfolio station. This was 20 minutes long and initially involved demonstrating evidence for the self-scoring components of the application form. The portfolio had to be organised into sections according to the instructions on the ICM national recruitment office website (www.icmnro.wm.hee.nhs.uk/Downloads). Once this had been covered we talked about reflective practice and I had to discuss a CBD or reflection I had in my portfolio. I was then asked to further reflect on my workplace based assessments and feedback from MSFs / 360 degree appraisals. Once this station was complete we were free to depart.

I felt that the stations and written assessments were of appropriate duration and the whole process seemed a fair way to assess a number of domains and skills relevant to training in ICM.

Dr Peter Bradley

ICM Consultant and Interviewer at the National Recruitment day

I saw the other side of the table and was allocated to the Portfolio station.

The interviewers were from all over the UK and there were around 60 interviewers per day. All were ICM Consultants with a major role in teaching and training, all had prior training in the interview process (a separate day was held in London in February for this) and all had undergone equality and diversity training. I would guess that over 80% of the interviewers were Faculty Tutors, Educational Supervisors or Regional Advisors in ICM.

The Interviewers were paired so that each pair had at least one person who had interviewed last year and there was a roving independent auditor who sat in on all the stations during the day.

As Dr Samanta has said the setting at West Brom was very pleasant and the organisation good. The timekeeping was kept very strict and the candidates all seemed to know that, when the bell went at the end of each station, they could finish their sentence but basically then had to move on.

The portfolio station was split into two sections the first was a process of going through the documented qualifications and achievements. This was for every area on which the candidates could be awarded points. The areas were Degrees and qualifications, teaching and training, achievements inside medicine, achievements outside medicine, research and audit etc. For each area points were given if, and only if, evidence was provided. For instance in the teaching section we would award points for having documented evidence of a teaching course (egT3) or being an ALS instructor, and more points for having a Postgraduate certificate in medical education.

It was clear that some people had completed something but could not produce any evidence. This was a shame because we could not then award points. The quality of the evidence needed to match the claim (eg if someone claimed to have a PhD, scoring highly for points, then we needed very robust evidence, if someone said they had completed a charity fun run then we accepted less robust evidence). I would make sure that you get something for every item on which you claim points. If you have performed in a national choir, you may not have a certificate but even a printout of an email from the organisers may be sufficient.

This first section took around 10-12mins. The next section of the portfolio station was a series of around 6 questions. This explored the reasons for the person being suitable for ICM training and related the answers to evidence in the portfolio. For instance a question might be on how a problem had been encountered at work and some evidence from the portfolio about clinical governance be explored. This section lasted around 8-10 mins.

It was very helpful for us (and helped the time for the candidates to talk) if the evidence was well organised. A large lever arch file, with paper work in clear plastic pockets, with a front index and colour coded tabs worked well. This meant that when we asked for evidence the well organised candidates quickly found and showed the evidence. This allowed them to remain calm and gave more time to discuss other points. I would advise you to practice finding all the evidence in your portfolio beforehand. Some candidates spent quite

some time flipping through disorganised notes muttering 'I'm sure it's here somewhere!'. Not a great strategy.

Finally at the end of the day all the examiners met and discussed any issues that had arisen. There was also a discussion about some candidates who, while they had scored enough to be offered a place, had, at some point in the day, performed extremely poorly. This was mainly suggesting something dangerous in the clinical station and then refusing to back down or change the plan when prompted by the interviewers. These cases were debated between the whole group of interviewers and a vote held. If the majority of interviewers felt that this was of grave concern then those candidates were failed. I would say that in general the interviewers were not hawkish and most of these cases were given the benefit of the doubt.

I hope that this report is of help and I believe that the East of England has succeeded in filling our training posts from the National recruitment day. I feel the process was fair and robust and we will have appointed great trainees to our program.