

2025 ST3 General Surgery Supplementary Applicant Handbook

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Introduction

The National Recruitment Office for General Surgery ST3 is NHS England – London.

This guide aims to provide applicants with information regarding all aspects of the nationally coordinated General Surgery recruitment in England, Scotland, Wales and Northern Ireland. General information regarding recruitment to all specialty training posts is available on the [Specialty Training website](#)

Please note that all communication with applicants will be via Oriel, or via the contact details you provide as part of your Oriel application. You must ensure that your contact details are correct and kept up to date throughout the recruitment process.

Summary of 2025 recruitment

The Person Specification for ST3 General Surgery remains unchanged.

Candidates will fill in an application form on Oriel which will clearly outline the evidence required for each domain using templates with very clear instructions for additional evidence (where relevant). The evidence upload window (for templates and associated evidence) remains in place to allow candidates to gather evidence and have the templates countersigned.

The candidates' portfolios and associated evidence will be used to shortlist candidates for a 40-minute interview assessing a clinical scenario, a management scenario, and a discussion of their career to date.

Eligible applicants will be invited to book an interview slot via their Oriel account following shortlisting.

The scores from shortlisting will be added to the interview scores and will therefore continue to form part of the overall candidate score. The final total score will be used for ranking and job offers.

Key points in relation to previous recruitment round:

Questions are unchanged from the previous round.

Candidates do not self-assess their portfolio.

The emphasis in scoring the portfolio will be on quality not quantity.

All portfolios will be scored by a panel of consultants.

Each portfolio will be scored by a pair of consultants and discrepancies addressed to provide a robust score.

Applications do not require large volumes of unstructured evidence.

Each question on the application form will be underpinned by a template on which candidates will be asked structured questions about the domain of the question. Applicants must ensure that all sections of the template are completed for each question.

Each completed template must be certified as true and accurate and be countersigned by the candidate's Educational Supervisor (or equivalent) to include the supervisor's name, GMC number (or equivalent) and signature (typed names as signatures will not be accepted). Each template will be uploaded by the candidate during the evidence upload window.

Educational and leadership experience will continue to be assessed in Portfolio interview.

Recruitment programme

Applicants can find the Medical Specialty training guidance for NHS England specialty training ~~at~~ below: <https://medical.hee.nhs.uk/medical-training-recruitment/medical-specialty-training/surgery/higher-surgery/general-surgery>

Applicants must read both this Supplementary Handbook and the medical training guidance before beginning their application.

Timeline and Key Dates

Activity	Date(s)
Advert appears	By 5pm on Wednesday 13 th November 2024
Applications open	At 10am on Thursday 14 th November 2024
Applications close	At 4pm on Thursday 5 th December 2024
Evidence upload window	Monday 16 th December 2024 - Thursday 16 th January 2025
Portfolio Shortlisting Scoring dates	Monday 27 th - Tuesday 28 th January 2025
Portfolio Results Release date	by 5pm Thursday 6 th February 2025
Appeals Window	Thursday 6 th - Tuesday 11 th February 2025
Invites to Interview sent on	Thursday 27 th February 2025
Interview dates	Monday 17 th - Wednesday 19 th March 2025
Interview venue	Remote interview
Preferences Open	Thursday 20 th March 2025
Preferences Close	Monday 7 th April 2025
Initial offers released all regions	By 5pm on Tuesday 15 th April 2025
Hold deadline	At 1pm on Wednesday 23 rd April 2025
Upgrading deadline	At 4pm on Thursday 24 th April 2025
Training start date	August/October 2025 (TBC by employing trust/region)

Please note these dates are subject to change but applicants will be notified in advance if it is necessary to make any amendments to the timeline.

How to apply

General Surgery recruitment to programmes in England, Scotland, Wales and Northern Ireland is managed via a nationally coordinated process hosted by London Recruitment Office on behalf of the General Surgery Specialty Advisory Committee (SAC).

Further programme and rotation information will be available at the point of preferencing at a later date in the process. Information will be sent to applicants' Oriel account and copied to their

registered email inbox with instructions on how to complete preferencing. In addition, indicative post numbers for each NHS England local office/deanery will be made available within the advert. Applications will only be accepted through Oriel between 10am on Thursday 14 November 2024 and 4pm on Thursday 5 December 2024. Please be aware applications received after this time will not be accepted and there will be no exceptions to this. The recruitment timeline is available on Oriel and the [NHS England London website](#).

To register on Oriel, applicants must ensure they have a valid email address. Communication between NHSEngland London Recruitment Office and applicants will be primarily via Oriel. Applicants should check their Oriel and personal email account at least once every 24 hours.

Eligibility and Longlisting

Applicants must meet the entry criteria in order to be considered for specialty training. It is important to note that applications are likely to be rejected prior to the interview stage should applicants fail to provide suitable evidence that they meet all the criteria assessed at longlisting. Please refer to the [person specifications](#) for full details of entry criteria.

Applications will be longlisted against the entry criteria as outlined on the person specification. Please be aware that applicants may still be withdrawn from the application process at any stage if found to be ineligible to apply even if they have been made an offer.

Important information on CREHST

The Certificate of Readiness to Enter Higher Surgical Training is the only acceptable evidence of achievement of all requisite core surgical competences for applications to General Surgery ST3 for applicants who have not completed a recognised UK Core Surgical Training Programme, or who will have completed a UK Core Surgical Training Programme by the post start date. All competences must be signed off in order for a CREHST to be accepted. If necessary, competences can be signed off by multiple supervisors where a single supervisor feels unable to sign off the totality of competences. **The CREHST must be submitted by all applicants who are not on or have not completed a UK Core Surgical Training programme.**

The CREHST can be downloaded from the [Oriel resource bank](#).

Reasonable adjustments and Guaranteed interview scheme

London recruitment will ensure, where possible, that reasonable adjustments are made at interview to meet the needs of applicants with disabilities. Applicants must ensure that they declare this as part of their Oriel application form. All documentation should be uploaded as part of their application form. Failure to provide the required information and documentation could result in adjustments and/or Disability Confident Scheme status not being accommodated. For more information regarding reasonable adjustments and the guaranteed interview scheme, visit the [website](#).

Special circumstances and Fitness to Practise

Applicants should refer to the Specialty Training guidance on [special circumstances](#) and [Fitness to Practise](#) before starting their application.

Any candidate who answers 'yes' to one or more of the questions in the Fitness to Practise section of the application form, must complete the NHS England London Recruitment Office [Fitness to Practise \(FTP\) declaration form](#) providing further details regarding their affirmative/positive answer.

Please refer to the guidance and relevant forms which can be found within our applicant support portal: https://lasepgmdsupport.hee.nhs.uk/support/tickets/new?form_1

Deferred start dates and Less Than Full Time

Further information on how to request a [deferred start date](#) or [training less than full time \(LTFT\)](#) can be found on the Specialty Training Website.

October rotations

Candidates currently in core surgical training posts who are expected to complete core surgical training in October 2025 rather than August 2025 are eligible to apply for the 2025 round of General Surgery ST3 recruitment.

Portfolio shortlisting process

Applicants will be provided with further instructions about how to upload evidence to the evidence portal in due course. Applicants should ensure that they present the evidence in the requested format. Failure to do so will result in their evidence being rejected.

Please refer to Appendix 2 of this document for further information regarding this process.

Please note that this part of the process is mandatory. Failure to submit all evidence by the stated deadline will result in your application form being withdrawn by the recruitment team. The upload window is 16th December 2024 – 16th January 2025.

Recruitment administrators **will not** be able to upload evidence on behalf of applicants and once the deadline for submission has passed, applicant access will be withdrawn.

Interviews

Applicants will need to book an interview slot using their Oriel account. Slots are offered on a first come first served basis subject to availability and will need to be booked by the deadline stated in the invitation to the interview. Further information on how to book an interview slot can be found in the [Oriel Applicant User Guide](#). Applicants can attend only one interview regardless of where they wish to train in the United Kingdom. Interviews will be held remotely.

Interview dates: Monday 17 – Wednesday 19 March 2025

Online interview process

All interviews will be undertaken online. A link to join the interview will be sent via Oriel. It is the applicant's responsibility to ensure that they have tested the link from the device they intend to use, as they may need to secure an alternative device to use for their interviews as they may need to source an alternative device to ensure connectivity. Any applicants unable to connect should contact the recruitment team at the earliest opportunity.

There is an Applicant Declaration which all applicants must agree with and adhere to in order to sit an online interview. The Declaration also contains a list of vital steps they must undertake before the day of the interview. A copy of the Applicant Declaration can be found [here](#)

All interviews will be undertaken online using the virtual interview system Qpercom Recruit. This is a browser-based system. Applicants must join at the time they have booked on the day of the interview. Applicants must ensure that their camera and microphone are turned on and working correctly prior to joining the call. Interviews will be terminated where the panel cannot see the applicant.

Before the interview commences it is very important that applicants have prepared properly. Applicants will be briefed on the interview process and will be required to confirm their identity with the interview administrator. Applicants must have suitable photographic ID available (passport or UK photo driving license). In addition, applicants will be required to move their camera to show the entire room where they are undertaking the interview, to confirm that nobody else is present. Once the identity check has been confirmed, the administrator will advise the interview panel that the interview process can commence.

The interview will assess different areas of skills, knowledge and experience. The stations will have two consultant interviewers. There may be a third person present as an observer who will not be assessing candidates. This may be the Lay Representative who is there in an independent role to assist in the quality assurance of the interview process, or a consultant or senior trainee who is present to observe and assess the interviewers. There will be a maximum of one observer present at any time.

The interview **must not** be recorded by either the applicant, the administrator, or the panel members.

On completion of the interview, the applicant should terminate their connection to the call and the interview process is complete. The interview stations will cover different aspects of the person specification and last approximately 40 minutes.

The interview will be split into the following stations:

Clinical Station

- **Clinical scenario reading time (5 minutes)**

Candidates will be given a scenario and have 5 minutes reading time prior to the interview.

- **Clinical scenario & questions (10 minutes)**

Candidates will have 10 minutes to answer questions about the clinical scenario and other related questions.

Management Station

- **Management scenario reading time (5 minutes)**

Candidates will be given a scenario and have 5 minutes reading time prior to the interview– this scenario will be about a management problem based in the clinical environment.

- **Management scenario & questions (10 minutes)**

Candidates will have 10 minutes to answer questions about the management scenario and other related questions.

Portfolio Station

- **Portfolio questions (10 minutes)**

Candidates will have 10 minutes to answer questions about aspects of their career to date. Candidates do not need to prepare or present a hard copy of any evidence. **Portfolio evidence will not be available to the interviewers to review during the interview.**

Ranking, Outcomes & Preferencing

Eligible applicants will be invited to preference available posts on Oriel prior to offers being made. The sub-preferencing window will be confirmed in an email from the recruitment team. For guidance on how to rank/submit your preferences please refer to the [Oriel Applicant User Guide](#).

Your ranking will be based on your combined interview and portfolio scores. Scores will be collated to generate one national ranking from which offers will be made to all available posts. Following interview and ranking, applicants will either be deemed successful or unsuccessful and will be informed of this via Oriel.

Offers, References and Scoresheet

Offers will be made to those successful applicants that have 'matched' to a post and will be based on the applicant's ranking and preferences. Offers will be made via Oriel by 5pm on Tuesday 15 April 2025.

Following initial offers being released, further offers will be made in subsequent iterations. Applicants have 48 hours from the time of offer (excluding weekends) to confirm via Oriel whether they wish to accept, reject, or hold their offer. Offers made after the hold deadline will only have the option to accept or reject.

Applicants can also choose to opt in or out of 'Upgrading' – by choosing to opt in; if a post becomes available that an applicant has preferenced higher than the one they have chosen to accept they will automatically be upgraded to this new post. Please refer to the timeline for the various deadlines.

References

Reference reports are not used at eligibility checking or at the selection centre but will be reviewed by the prospective employing Trust after offers have been made and prior to confirmation of appointment for successful applicants. This will only be requested electronically via Oriel when an offer has been accepted. Guidance on completing references is available via the Oriel resource bank.

Scoresheets will be released to ALL applicants on a specified date. The recruitment office will communicate this date to applicants; therefore, applicants do not need to request their scoresheets after the interview.

Appeals Procedure:

Please note that applicants may not appeal their portfolio shortlisting score. Applicants can only submit an appeal where they believe the correct published procedure/process has not been followed correctly. Please note that only the evidence you uploaded can be taken into account and any additional evidence to support your appeal will not be considered.

Applicants will be given a 72-hour deadline to appeal where they believe the correct published procedure/process has not been followed correctly. Appeals received after the 72-hour deadline will not be considered. The outcome of the appeal is final and there is no further recourse for dissatisfied applicants.

Allocations

Once offers have been accepted, appointee's details will be passed on to the local training boards/programme director around 14 weeks prior to your start date and to the first Trust you have been appointed to 12 weeks prior to their start date. Therefore, applicants should not expect to receive any communication from the programme or Trust prior to this time.

Useful links

Oriel/Recruitment portal - <https://www.oriel.nhs.uk/web>

Recruitment website - <https://medical.hee.nhs.uk/medical-training-recruitment>

Person Specifications - <https://medical.hee.nhs.uk/medical-training-recruitment/medical-specialty-training/person-specifications/person-specifications-2025>

UK Border Agency website - <https://www.gov.uk/government/organisations/uk-visas-and-immigration>

Appendices

Appendix 1 – Longlisting

At the longlisting stage applications will be reviewed in line with the entry criteria set out in the nationally agreed person specification for General Surgery ST3. It is essential that applicants provide the evidence below in their application form. If applicants fail to follow these instructions, it is highly likely that their application will be withdrawn from the recruitment process.

The following criteria will be assessed at longlisting stage:

Criteria	Action Required
MBBS or equivalent	Please include your MBBS, or equivalent, qualification in the 'Entry Qualifications' section of the application form. Applicants should indicate this as their primary qualification.
Successful completion of MRCS by offer date (by time of offer date)	Applicants must have passed full MRCS (Parts A and B) by the time of the offer date. The last eligible sitting of the MRCS Part B to qualify for this criterion is February 2025. Applicants should list MRCS in the 'Entry Qualifications' section of the application form, in addition to confirming that they have MRCS at time of application where asked "Do you currently have full MRCS?". Alternatively, applicants should confirm that they will be sitting/have sat the MRCS exam by the offer date when asked "Are you sitting an MRCS examination in the February 2025 diet (or earlier) that will lead to full MRCS qualification"
Complete employment history	All applicants must provide details of all posts undertaken following the award of their primary medical qualification. This includes Foundation and Core Surgery posts and work undertaken overseas.
Evidence of achievement of CT1 competences in surgery by time of application and CT2 competences in surgery by time of appointment.	Applicants not currently undertaking Core Surgical Training will be required to submit evidence proving achievement of the requisite competences, of which an ARCP 1 at CT2 level or a signed CREHST are the only acceptable documents. Applicants providing incomplete or unsatisfactory evidence will be provided 48 hours to submit satisfactory evidence.

Appendix 2 – General Surgery Portfolio Questions

Listed below are the 7 questions which appear on the 2025 General Surgery ST3 application form along with the possible responses to each question and details of suitable evidence to substantiate your responses. A guide to the scoring for each question is provided, with descriptions of the quality indicators where appropriate.

Applicants must record their responses to all 7 questions using the provided templates. Applicants can access the 7 templates under the 'document tab' in the advert content section. All 7 templates must be signed where required (typed signature will not be accepted).

Candidates are reminded that the information they provide on the templates will form the basis of their

scores. Therefore, full and detailed descriptions of their involvement in audits, publications and presentations are essential. Any evidence of plagiarism, including the use of AI in the templates will be treated as a matter of probity. Probity concerns will be treated with utmost seriousness and may result in candidates being withdrawn from the application process and referred to the GMC.

After filling out the 7 templates with their responses, applicants must upload their templates, with supporting evidence to the Evidence Upload Portal, which opens on Monday 16th December 2024. Applicants will receive further information on how to access the Evidence Upload Portal nearer to the time.

Portfolio templates and evidence can only be accepted via the dedicated Evidence Upload Portal. Evidence provided to the London Recruitment Team by any other means will not be accepted. Failure to upload any completed template(s) and evidence is likely to result in your application being withdrawn from the process.

For each question a description of the evidence required is given. You will only be awarded marks if the evidence provided matches the description of the evidence required for that domain.

Maintaining trust by being open and honest and acting with integrity is one of the key elements of Duties of a Doctor (GMC). If it is subsequently discovered that any statement made on your application is false or misleading, evidence will be collected, and you may be referred to a Probity Panel.

Question 1

By the end of July 2025, or by the completion of Core Training if this is later, how many months full time (or equivalent if LTFT) will you have spent in total in General Surgery in any post-Foundation job in any country? Eligible posts must include experience in both unselected emergency general surgery and elective general surgery (or a recognised general surgical sub-specialty) Please do not include any other posts.

Maximum points: 6

Responses	Score
• 0 to 3 months	Score ineligible for appointment
• 4 to 12 months	2
• 13 to 24 months	4
• 25 to 36 months	6
• 37 to 48 months	4
• 49 to 60 months	2
• 61 months or more	1

Evidence: Template countersigned by Educational Supervisor (or equivalent) with printed name and GMC number (or equivalent).

In addition

- Please provide evidence of completion of training posts (as described in the longlisting section Appendix 1)
- The responsibility for providing adequate, clear and unequivocal evidence lies with the applicant
- For non-training posts please provide a copy of the front page of your contract of employment, which must include dates and a clear description of the role
- **If the front page of your contract does not include both start and finish dates other evidence will be required to confirm the duration of post e.g. Letter from HR/Head of Service/Supervising Consultant**

Question 2

By the end of July 2025, or the completion of Core Training, will you have spent at least 4 months in T&O, Plastic Surgery, Neurosurgery, ENT Surgery, Cardiac/Thoracic surgery, A&E, ITU, Paediatric Surgery, Urology, Vascular or OMFS posts since completing your Foundation Programme?
Eligible posts must include working for a minimum of 4 months full time (or equivalent if LTFT) in both unselected emergency and elective work within the relevant specialty.

Maximum score: 4

Responses	Score
<ul style="list-style-type: none"> I will not have spent 4 months in any of these specialties 	0
<ul style="list-style-type: none"> I will have spent at least 4 months in a post in 1 of these specialties 	2
<ul style="list-style-type: none"> I will have spent at least 4 months each in posts in 2 or more of these specialties 	4

Evidence: Template countersigned by Educational Supervisor (or equivalent) with printed name and GMC number (or equivalent).

In addition

- Please provide evidence of completion of training posts (as described in the longlisting section Appendix 1)
- The responsibility for providing adequate, clear and unequivocal evidence lies with the applicant
- For non-training posts please provide a copy of the front page of your contract of employment, which must include dates and a clear description of the role.
- If the front page of your contract does not include both start and finish dates other evidence will be required to confirm the duration of post e.g. Letter from HR/Head of Service/Supervising Consultant**

Question 3

Before the time the **evidence upload window closes**, how many appendicectomies (laparoscopic and/or open) have you completed which have been done either STS or STU or P or T? These must be recorded in a validated logbook where each logbook page is countersigned by a consultant.

Maximum score: 4

Responses	Score
• 0 to 5	Score ineligible for appointment
• 6 to 15	1
• 16 to 25	2
• 26 to 35	3
• 36 to 80	4
• 81 or more	1

Evidence: Template countersigned by Educational Supervisor (or equivalent) with printed name and GMC number (or equivalent).

- Logbook evidence must be full and consecutive. Consolidation sheets from a validated logbook are acceptable
- The responsibility for providing adequate, clear and unequivocal evidence lies with the applicant
- Each page of the logbook must be signed by a relevant supervisor, with their name and GMC number (or equivalent) clearly legible
- Please ensure there are no gaps in the logbook evidence. If there are gaps in the logbook evidence you provide, one point will be awarded for this section

Question 4

Publications: Please submit your 2 best publications, published in any PubMed indexed journal. In order to be eligible for this section, publications must have a PubMed ID and journal impact factor, and be published before the evidence upload window closes.

Do not include articles which have not yet been published. Collaborative papers, abstracts, case reports, letters or technical tips are acceptable. Points will be awarded for candidate contribution, level of authorship, quality of study and impact factor of publication.

Maximum score: 10 (5 per publication)

Evidence: Template countersigned by Educational Supervisor (or equivalent) with printed name and GMC number (or equivalent).

In addition

- Please provide a copy of each publication including the authorship list, journal reference, PubMed ID and journal impact factor
- If you are submitting a collaborative paper, please also submit the list of collaborators **with your name highlighted**. Failure to do so will result in no points being given for this section
- The responsibility for providing adequate, clear and unequivocal evidence lies with the applicant

Question 5

Academic presentations: Please submit your 2 best academic presentations. In order to be eligible for this section, the presentation must have been published before the evidence upload window closes.

You may include poster presentations.

Points will be awarded for candidate contribution, being the presenter of the work, quality of study and scope of meeting (regional, national, or international).

Applicants should note that presentations made at departmental/hospital level only will not be accepted.

Applicants should note that presentations made in the course of the applicant delivering teaching/training activity will not be accepted. This category of presentation can be considered during the portfolio interview station.

Maximum score: 10 (5 per presentation)

Evidence: Template countersigned by Educational Supervisor (or equivalent) with printed name and GMC number (or equivalent).

In addition

- Please provide a copy of the relevant page of the meeting programme(s)
- Please provide a copy of the presentation (6 slides per page) or poster
- The responsibility for providing adequate, clear and unequivocal evidence lies with the applicant

Question 6

Audits and QIPs: Please submit your 2 best closed loop audits and your best additional audit/QIP. Please only submit audits/QIPs which have been presented as you will need to provide evidence of presentation. For each loop of the closed loop audits and for the additional audit/QIP you must provide evidence of your involvement in the design, execution and presentation of the audit/QIP.

Points will be awarded for candidate involvement, reference standard, study design, importance of clinical question and impact of work.

Applicants should note that to qualify as a closed-loop audit, there must be clear evidence of applicant involvement in both audit cycles. Submissions where the applicant is deemed by the shortlisters to have only been involved in the initial or re-audit will receive zero points.

Submissions where no template/evidence is submitted for this question will be deemed ineligible.

Maximum score: 21 (8 per closed loop audit and 5 for audit/QIP)

- **Evidence: Template countersigned by Educational Supervisor (or equivalent) with printed name and GMC number (or equivalent).**

In addition:

- Please provide copies of all presentations (6 slides per page).

Please provide a letter from the head of department/clinical lead for audit clearly stating your contribution. **Simple certificates are not sufficient evidence.**

Question 7

Before the **evidence upload window closes**, have you been awarded a stand-alone degree by a UK university (see evidence below)? (NB: This **does not** include intercalated degrees, including intercalated degrees which are part of a standard training programme).

This category has now been broadened to include PG Certs, Diplomas and taught Masters degrees. Points will not be awarded unless evidence is provided that the qualification has been awarded.

Maximum points: 5

Responses	Score
• PG Certificate	1
• Diploma/Masters degree without thesis or dissertation	2
• Masters with thesis or dissertation (e.g. MSc, MMedEd, MS, ChM)	3
• MD	4
• PhD	5

Evidence: Template countersigned by Educational Supervisor (or equivalent) with printed name and GMC number (or equivalent).

In addition:

- Please provide a copy of your degree certificate. (Or written evidence from the university confirming the award pending graduation and issuing your certificate).
- If your degree included a thesis or dissertation, please provide clear evidence of this or marks will not be awarded for this type of degree.
- If your degree was taken outside the UK, you must also provide evidence of its equivalence (e.g. a letter from the university confirming that it was awarded following the production of a research-based thesis and full examination together with a copy of your results transcript).
- If your degree certificate is not in English, you must provide a certified translation
- The responsibility for providing adequate, clear and unequivocal evidence lies with the applicant.
- **We are aware of organisations such as UK NARIC however the Selection Leads will be the final arbitrators.**

FAQs

Why do all questions have templates which need to be countersigned by Educational Supervisors (or equivalent)?

Before COVID all candidates were called for a face-to-face interview at which their portfolio was scored in person and questions asked about the portfolio elements before generating a score. COVID resulted in a virtual process which did not allow portfolio evidence to be scrutinised directly and questions asked of candidates about their portfolios. Instead, following COVID, candidates were asked to upload specific evidence which was assessed remotely. Many candidates failed to submit evidence which was of sufficient quality to allow points to be awarded. Templates will allow selectors to assess more than raw numbers, and the step of asking Educational Supervisors to countersign Templates with their GMC numbers means that there is a step before evidence upload to quality assess the evidence presented to ensure that candidates are scored appropriately because their evidence is clear.

Will my score be reduced if I do not submit exactly the evidence required?

Yes, the descriptions of the required evidence have been carefully considered and drafted to try to reduce uncertainty and ensure standardisation of evidence that the selectors consider in reaching their scores. Attention to detail forms part of the Person Specification for General Surgery ST3. The ability to scrutinise and follow written instructions are key parts of the skills required of surgeons in training. The selection process seeks to standardise evidence in order to ensure fairness. Giving the 'benefit of the doubt' for incomplete or inappropriately presented evidence risks the introduction of bias and unfairness.

Some candidates were withdrawn last year for not submitting a template for one of the questions. Is this really fair?

Some questions (Q1, Q3 and Q6) relate to the Essential Entry Criteria for ST3 in General surgery, whereas other questions relate to desirable criteria. Failure to submit a template or suitable evidence for the Essential Entry Criteria make the application void and therefore those applications were withdrawn from the process. This is made clear in the Person Specification which states "All sections of application form must be completed fully according to written guidelines."

Why can't I appeal my shortlisting or interview score?

The shortlisting and interview scoring is performed by pairs of consultant general surgeons and are subject to a very high degree of training, scrutiny and quality assurance. Every candidate's portfolio and each station of the interview is independently scored by 2 consultants against a standardized scoring matrix. Lay and trainee representatives are involved at all stages to independently ensure that the process is fair. The decisions on scoring are therefore a matter of professional judgement and not subject to appeals. The MDRS complaints procedure is available where the candidate is concerned that the process has not been adhered to or has been applied unfairly.

Re Question 1:

Why does my score reduce to 1 if I have done more than 61 months of General Surgery?

This is a selection process for ST3 General Surgery. If you have undertaken more than 61 months of General Surgery, you are already very experienced in General Surgery and other routes to the Specialist Register are more appropriate for you than commencing an ST3 training programme.

The Person Specification makes clear in the Career Progression section of the Essential Entry Criteria that “Applicants must not already hold, nor be eligible to hold, a CCT/CESR in the specialty they are applying for and/or must not currently be eligible for the specialist register for the specialty to which they are applying”.

Re Question 3:

Why does my score reduce to 1 if I have performed more than 80 appendicectomies?

This is a selection process for ST3 General Surgery. The indicative number of appendicectomies by the end of ST8 is 80. If you have undertaken more than 80 appendicectomies you are already very experienced in General Surgery and other routes to the Specialist Register are more appropriate for you than commencing an ST3 training programme. The Person Specification makes clear in the Career Progression section of the Essential Entry Criteria that "Applicants must not already hold, nor be eligible to hold, a CCT/CESR in the specialty they are applying for and/or must not currently be eligible for the specialist register for the specialty to which they are applying".

Why am I ineligible for selection if I have undertaken <5 appendicectomies?

This is a selection process for ST3 General Surgery. If you have only been able to undertake <5 appendicectomies you would benefit from more time in training before applying for ST3.

Re Question 4:

Why do I need to select my 2 best papers for scoring rather than submitting all of my papers?

The selection process for ST3 General Surgery should be based on quality not quantity of publications. A perverse incentive was developing as a result of self-assessment scoring in the past, which was not conducive to selecting the best candidates for ST3 training. By asking candidates to select and submit their best work we are able to use much more useful judgements about how candidates meet the person specification.

Re Question 5:

Why do I need to select my 2 best presentations for scoring rather than submitting all of my presentations?

The selection process for ST3 General Surgery should be based on quality not quantity of presentations. A perverse incentive was developing as a result of self-assessment scoring in the past, which was not conducive to selecting the best candidates for ST3 training. By asking candidates to select and submit their best work we are able to make much more useful judgements about how candidates meet the person specification.

Re Question 6:

Why do I need to select my 2 best closed loop audits (with option of one further Audit or QIP) for scoring, rather than submitting all of my audits/QIPs?

The selection process for ST3 General Surgery should be based on quality not quantity of audits/QIPs. A perverse incentive was developing as a result of self-assessment scoring in the past which was not conducive to selecting the best candidates for ST3 training. By asking candidates to select and submit their best work we are able to use much more useful judgements about how candidates meet the person specification.

Why do I need to submit 2 closed loop audits?

Completion of 2 closed loop audits is a minimum standard for completion of Core Surgical Training (or CREHST). It is therefore reasonable to expect every candidate for ST3 selection to be able to achieve this standard. However, scores will vary depending on the quality of the audits performed and the contribution of the candidate. Identifying these variations is a key part of a selection process.

Re Question 7:

Why are intercalated degrees not eligible for points in the selection process?

This is a decision made by MDRS and applies to all specialties and grades of medical and dental selection, including ST3 General Surgery.

Why does my degree have to have been awarded by a university?

Universities provide a comparable and quality assured measure of candidate academic achievement

Enquiries & FAQs

Should you have any queries relating to the recruitment process for General Surgery you can contact NHS England London via our online enquiries portal:

https://lasepgmdesupport.hee.nhs.uk/support/tickets/new?form_1