



An Coimisiún
um Cheapacháin
Seirbhíse Poiblí
Commission
for Public Service
Appointments

**Audit of Appointments to Consultant positions in the Health Service
Executive (HSE) conducted by the
Public Appointment Service**

AUDIT REPORT
April 2017

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1. Executive Summary:-

The Commission for Public Service Appointments (the Commission) reviewed the processes employed by the Public Appointments Service (PAS) for recruiting and selecting candidates for appointment to Consultant positions in the HSE. The Commission examined the suite of safeguards used by PAS in the evaluation of candidates to determine whether they were sufficiently robust to protect the integrity of these key appointments. It also wanted to establish whether the appointments processes were compliant with best recruitment practice as set out in the Code of Practice.

In the course of its audit, the Commission examined the recruitment files relating to the following appointment processes:-

- Consultant Cardiologist – **University Hospital Limerick**
- Consultant in Emergency Medicine - **Dublin North East**
- Consultant Anaesthetist - **Midlands Regional Hospital**
- Consultant Psychiatrist - **Galway/Roscommon**
- Consultant General Surgeon – **University Hospital Waterford**
- Associate Professor/Consultant Physician Endocrinology - **Portiuncula Hospital**
- Consultant Radiologist **Sligo Regional Hospital**

It met with staff in the Public Appointment Service responsible for the management of these appointment processes. It also held telephone interviews with 12 members of the selection boards to seek their views on the conduct of the shortlisting and interviews for these positions and to discuss the approach adopted by the selection boards with whom they had worked.

It noted that the appointment processes for all seven processes involved the following stages or events:-

- The HSE provides PAS with the Letter of Approval from National Doctor's Training and Planning Unit for the filling of the position along with a detailed job and person specification, names of suggested interview board members, material for including in the job advertisement and the name of a contact person familiar with the clinical setting who is available to provide further information on the post to potential candidates;
- PAS usually advertise each position individually on www.publicjobs.ie and is open to exploring other channels such as the British Medical Journal; However if there is more than one vacancy in a particular specialty, PAS is open to running one appointment process to fill more than one vacancy
- Candidates apply on-line to PAS. The application includes a detailed structured application form, CV and the names of three referees;
- If there are more than 7 candidates for a position, PAS will generally include a shortlisting stage;
- The shortlisting stage – where deployed – is normally conducted by telephone conference;

- Interviews are scheduled to last for 45 minutes and follow a consistent pattern:-
 - Introduction by the Chair
 - Exploration of the Candidate's CV/Career Achievements
 - Questioning the candidates' knowledge of/suitability for the specific challenges of this role
 - Questioning on Management/Leadership and Interpersonal skills
 - Conclusion/Wrap up
- Appointment processes for academic/teaching positions also include a presentation in advance of the Interview. Candidates are generally asked to outline in their presentation the specific challenges of the role and how the candidate proposes addressing these challenges. The Selection Board may question the candidates on the contents of their presentation;
- PAS generally has 4 people on the interview boards with an additional professional/academic person included for positions involving academic/teaching duties. The structure of the selection board is as follows:-
 - An Independent Chairperson
 - A Clinical/Professional Nominee from the Service
 - An External Clinical/Professional Expert
 - A Management Nominee
- Selection Board members are asked to declare any possible conflicts of interest and sign a declaration confirming that they will respect the confidentiality of all information in relation to the appointment process;
- PAS also supply a representative to act as secretary to the Board and to support the chairperson on briefing and guiding the board members;
- A detailed shortlisting/interview guide is circulated to all members of the selection Board. The guide sets out in detail the manner in which the Shortlisting/Interview will be conducted, the selection criteria to be employed; the manner in which candidates will be scored and suggested question areas the board may use in the course of the interview, how the board will manage connections between candidates and board members;
- After each candidates' interview, the selection boards carry out an initial evaluation and award provisional scores before they are provided with copies of the References procured by PAS;
- At the conclusion of the Interviews, the secretary of the Board prepares an Order of Merit which is signed by all board members along with a report which details the conclusions reached by the selection board;
- The successful candidate qualifications and experience is validated by PAS to ensure that they are eligible and suitable for appointment;
- Only one of the 7 processes reviewed attracted more than 4 candidates but all resulted in recommendations for appointment.

Broadly speaking, the Commission is satisfied that the processes incorporate adequate safeguards that protect the integrity of the selection processes and offer the necessary assurance that candidates are appointed on the basis of their suitability for the role as demonstrated over the course of the selection process.

However the Commission considers that there are a number of elements of the appointment process that warrant consideration by PAS and the HSE.

Timescales.

While noting that PAS generally completes its element of the selection process in an efficient manner (between 4 and 10 months in the sample examined by the Commission), some of the HSE's nominees on the selection board commented that the HSE is often very slow to initiate an appointment process and also in finalising the appointment of the successful candidates. These Board Members reported that the HSE can sometimes wait until the incumbent has or is about to retire before it initiates the process. They also remarked that considerable leeway is afforded to the successful candidate to take up the position leaving these key positions vacant for lengthy periods.

The Code of Practice sets out that "appointment processes are not subject to undue delays".

Recommendation 1

The Commission recommends that the PAS impresses upon the HSE the importance of proper succession planning measures highlighting the pressures delays in filling a position place on the selection board to make an assignment.

While the "contracting/on-boarding" of the successful candidate is outside of the its remit, the Commission considers that the HSE should explore, with PAS's support where appropriate, how it might introduce greater controls to ensure those assigned take up duty more promptly.

Risks of making an unsuitable appointment.

The Commission noted that the Consultants positions have very broad responsibilities encompassing clinical, strategic, leadership, managerial and interpersonal skills.

The selection board members spoken to referred to the testing and highly structured clinical training pathway pursued by candidates to reach the point in their careers where they could apply for consultant positions. They also spoke about the limited numbers of candidates applying for positions making the role of the selection board in identifying the strongest candidate somewhat more straightforward. While some of the selection board members said that they would favour obtaining a broader insight into the candidate than the 45 minute interview permits to ensure that they are suitable for appointment, most considered that the interview was sufficient to enable the Board to differentiate between the candidates.

Some selection board members reported that pressures to make appointments can, on occasions, lead to some pragmatic calls with regard to the suitability of the candidates presenting for interview. Some of the selection board members spoken to noted that candidates may be recommended for appointment despite some slight misgivings on the part of members of the selection board on their capacity to perform all of the duties of the role prescribed in the job and person specification. They commented that this is more likely to occur to positions outside of the main clinical centres where the vacancies tend to attract smaller numbers of candidates.

The Commission also reflected on the length of time the Consultant will be in the position (many will remain in the Health Services from the time of their appointment in their mid-thirties until their retirement), their capacity to shape the service (for better or worse) and the expectation that they will deliver the quality of clinical care required of them.

The Commission considers that appointments should only be made where those involved are satisfied that the candidate meets the requirements of the role. While it is broadly satisfied that the post interview candidate clearance stage will verify that the successful candidate has the necessary clinical skills to safely perform the duties of the role, it considers that evaluation of candidate's strategic, leadership, managerial and interpersonal skills could be explored in greater depth.

Recommendation 2

The Commission considers that PAS should explore how it might incorporate an additional assessment step(s) to provide a greater level of assurance on the suitability of those appointed. In making this observation, it is conscious that appointments to senior roles in other sectors are supported by a wider range of selection tools. It notes that candidates for teaching/academic Consultant posts are generally asked to make a presentation on how they will address the challenges of the specific role and recommends that PAS also include this step in the appointment processes for general service consultant positions.

Recommendation 3

The Commission recommends that PAS set out explicitly to Board Members that where they have doubts about the calibre of the candidate, it is better that they do not make a recommendation for an appointment. In these cases it is preferable that the HSE review the job and person specification and advertise the post again rather than making a wrong appointment.

Anchoring the selection criteria to the job and person specification.

Following its conversations with PAS Recruitment Team and the members of the selection board, the Commission understands how the selection criteria used at the shortlisting and interview stages reflect key elements of the job and person specifications. However it is not sufficiently apparent to candidates how the job and person specifications for the posts they are applying for are they will be reflected in the selection criteria or how the interview stage will be structured.

Recommendation 4

The Commission recommends that PAS reviews how the selection criteria and interview format is conveyed in the Candidate Information Booklet so that candidates can prepare better for interview and align their presentations to the areas against which they will ultimately be evaluated.

Training of Selection Board Members.

While the Chairpersons spoken to all considered that the interview board members are of an extremely high calibre and very quickly adopt good questioning and evaluation techniques, some of the clinical/professional selection board members

spoken to advised that they had never received formal interview training before they were first asked to sit on an interview board for a Consultant position.

Recommendation 5

The Commission recommends that PAS check with board members that they have received formal interview skills training and that it provides training to those who have either not worked on a PAS selection Board in the past 12 months or have not previously received training.

Embargo on post related conversations between members of the interview board and potential candidates.

The Commission noted that the HSE generally provides the name of a person with a knowledge of the role so that candidates can make the necessary preparations in advance of interview. While broadly satisfied that PAS has effective measures in place to identify and mitigate the risks associated with the connections between candidates and board members, it noted with concern that some of the selection board members advised that they had met with, spoken to and begun forming opinions on candidates in advance of an interview. In these circumstances, the Commission does not consider that it is sufficient for the Chairperson of the Interview Board to instruct Board Members to disregard previous knowledge of candidates and focus on the evidence presented over the course of the appointment process.

Recommendation 6 The Commission recommends that PAS advises all Board Members explicitly that they must not discuss the vacancy with any potential candidates as this may compromise the impartiality of the selection process.

2 - Introduction and Background

2.1 Introduction

The Commission for Public Service Appointments strives to safeguard the integrity of the recruitment, selection and appointment of people to publicly funded positions and to engender widespread confidence in the ability of those appointed to contribute to the delivery of first-rate public services.

It oversees recruitment and selection to positions across a wide range of Public Bodies, including Consultant level positions in the HSE. In carrying out this oversight function the Commission seeks to ensure that those appointment processes exemplify the principles of probity, merit, transparency, impartiality, consistency and fairness. The Commission is firmly of the view that these core principles are not mere ends in themselves but the means to achieving the greater goal of attracting and selecting the strongest possible candidates for positions thus facilitating the delivery of efficient and effective services.

The Commission publishes Codes of Practice which prescribe recruitment and selection standards that Public Bodies within its remit are required to meet. It examines complaints from individuals who believe that a public body has failed to adhere to the standards prescribed in the Codes. As part of its oversight function the Commission also carries out audits of appointment process conducted by those Public Bodies to determine whether the public body has adequate safeguards in place to ensure that candidates are recruited and selected in a fair and objective fashion and that there is no scope for patronage.

This report has been prepared under Section 43(5) and Section 13 of the Public Service Management (Recruitment and Appointments) Act 2004.

The report provides an account of the audit of the appointment processes conducted by the Public Appointments Service (PAS) in 2015 on behalf of the Health Service Executive (HSE) for positions at Consultant level. The appointment processes were carried out by the PAS under their Recruitment Licence and are therefore subject to the Commission's Codes of Practice.

The Commission is committed to undertaking audits in a spirit of improvement and with the goal of sharing knowledge and best practice rather than focusing solely on compliance. Details of the Commission's audit procedures are set out at Appendix 1.

2.2 The Public Service Management (Recruitment and Appointments) Act 2004

Appointment processes to all positions within the remit of the Public Service Management (Recruitment and Appointments) Act 2004 are subject to Codes of Practice published by the Commission. The Codes set out the regulatory framework for such appointment processes and centre on five recruitment principles. Through its audit function, the Commission safeguards the standards established in the Codes of

Practice and ensures compliance by the Licence Holder with the terms and conditions of its Recruitment Licence.

2.3 Purpose of the Audit

The purpose of this audit is to confirm compliance with the terms and conditions of the Recruitment Licence held by the Chief Executive of the Public Appointments Service in the conduct of appointment processes for positions at Consultant level in the HSE in accordance with the Code of Practice.

2.4 Details of Work Undertaken and Areas Reviewed

The audit focused on the period from Consultant Recruitment process commenced between January 2015 and March 2016. The audit reviewed the following appointment processes, conducted during the period covered by the audit, for appointment to positions as:

- Consultant Cardiologist - **UH Limerick**
- Consultant in Emergency Medicine - **Dublin North East**
- Consultant Anaesthetist - **Midlands Regional**
- Consultant Psychiatrist - **Galway/Roscommon**
- Consultant General Surgeon - **UH Waterford**
- Associate Professor/Consultant Physician Endocrinology - **Portiuncula**
- Consultant Radiologist **Sligo Regional**

The audit entailed:-

- an examination of the competition file for each of the above processes including
 - the approval letter for the positions,
 - the job and person specification,
 - records on the advertising/marketing of the vacancy,
 - the information booklet available to candidates,
 - the description of the appointment process,
 - information on the selection of shortlisting/interview board members, the selection criteria,
 - the briefing provided to the selection boards,
 - the scoring key used by the selection boards,
 - the records of individual interviews including the summary comment provided on candidates' performances,
 - the reports from the selection boards and
 - the reference checking.

Individual recruitment files were examined to verify that measures were in place to protect the integrity of the different stages of the appointment processes.

- discussions with staff members working in the Senior Professional Recruitment Unit in PAS
- Interviews were held with a total of twelve Interview Board Members from across the seven processes who had participated in the processes. Interviews were undertaken using a semi-structured approach and generally lasted over

30 minutes. The Board Members interviews represented a selection of the professional and management nominees on the selection board as well as the independent chairpersons.

The broad themes covered in these interviews included:-

- general impressions of the selection process
- overall impression of the calibre of candidates presenting
- training of both Interviewers and Interviewees
- make up of Interview Boards
- manner and level of preparation by members of the selection board
- management of connections between candidates and selection board members
- suggested areas for improvement

2.5 Acknowledgements

The Commission would like to thank the staff of the Senior Professional Recruitment Unit in the Public Appointments Service and the members of the selection board for the time, cooperation and support provided during this audit.

3 - Audit Findings

3.1 Introduction

The administration of recruitment and selection for Consultant positions in the HSE is conducted by the Senior Professional Recruitment Unit in the PAS. The Recruitment Manager in the Unit is responsible for managing all stages of the appointments process from planning the campaign through to making the recommendation of a candidate for appointment.

PAS initiated selection processes for 213 Consultant posts in the HSE during 2015. For the purposes of this audit, seven processes were selected by the Commission for detailed examination:

- Consultant Cardiologist - **UH Limerick**
- Consultant in Emergency Medicine - **Dublin North East**
- Consultant Anaesthetist - **Midlands Regional**
- Consultant Psychiatrist - **Galway/Roscommon**
- Consultant General Surgeon - **UH Waterford**
- Associate Professor/Consultant Physician Endocrinology - **Portiuncula**
- Consultant Radiologist **Sligo Regional**

3.2.1 Overview of the Appointment Process

While the selection processes for these seven Consultant posts follow a prescribed format, there are some differences in the format of the interview and the membership of the selection board based on whether the position is a designated training/teaching or academic position as prescribed by Section 62 of the Health Act 1953 or a service delivery position. Also the decision to deploy a shortlisting stage is determined by the numbers of applicants. The information provided below outlines the general processes and procedures for filling of such posts.

PAS generally arrange a separate selection process for each Consultant position. However, more than one position may be filled from the same competition if there are additional vacancies within the same specialism.

3.2.2 Sanction and Advertising

In advance of the selection process, the relevant Hospital Group must receive approval from the Consultant Appointments Committee within the HSE to fill a Consultant post. The Consultant Appointments Committee is responsible, amongst other things, for approving out the duties and requirements of the role as well as the qualifications that apply to the appointment.

PAS's Recruitment files showed that the HSE provides PAS with a draft advertisement, job specification, the names of nominees for the selection board and the name of a person potential candidates can contact for further information of the position. The

Commission understand that this contact person will have no involvement with the selection board.

PAS subsequently advertises the position on www.publicjobs.ie. It advised that some posts are also be advertised internationally or in relevant medical Journals particularly if the informed view is that these avenues are necessary to increase the likelihood of generating a viable pool of candidates for difficult to fill positions. PAS also understands that medical professionals within the clinical service will also use their own networks and contacts to bring the vacancy to the attention of potential candidates.

Candidates must apply on-line for the position through www.publicjobs.ie. Candidates generally have 4 weeks to apply for a position but more time is generally allowed where a position is advertised over a holiday period.

PAS makes a detailed Candidate Information Booklet (the booklet) available to candidates. The booklet includes most of the information on the specifics of the role provided to PAS by the HSE including:-

- The location
- The reporting relationships
- The purpose of the post
- The eligibility criteria and
- The Job description

Many of the of the job descriptions set out the duties and responsibilities of the position under the following headings:-

Duties and Responsibilities

- Standard Duties and Responsibilities including Clinic Responsibilities
- Operational Responsibilities
- Strategic Responsibilities
- Educational/Training Responsibilities
- Academic Responsibilities
- Administrative & Other Responsibilities

The Booklet also prescribes the skills, competencies and/or knowledge required for the post. Whilst the description of the skills, competencies and knowledge varied from processes to process, generally candidate information booklets included the following:

Skills/Competencies or Knowledge:

- Evidence of effective planning and organising skills
- Ability to Manage deadlines and handle multiple tasks
- Effective Communication skills
- Awareness and Appreciation or the service user
- Leadership and Team Management Skills
- Evidence of ability to empathise with and treat patients
- Demonstrate a Working Knowledge of the Hospital

3.2.3 Application

Candidates are required to submit an on-line application through the publicjobs.ie website in advance of a prescribed closing date. They are required to complete a structured application form and include an up to date Curriculum Vitae. The format of the application form allows PAS ascertain the candidate's eligibility and ensures the candidate presents the qualifications, experience and skills required for the position in a structured manner. The candidates must also include contact details for three referees.

3.2.4 Candidate Selection

The timescale for completion of the selection process is usually within six months but some selection processes can exceed 12 months. Delays may arise as PAS seeks to co-ordinate the availability of the different Board Member.

The format for the selection process is set out in the booklet. This generally provides for:-

- Shortlisting of candidates on the basis of information contained in their application
- An initial/preliminary interview, which may include a questionnaire of presentation by the candidate
- A competitive interview for those selected following preliminary interview, which may include a presentation or exercise as deemed appropriate

PAS advised that the preliminary interview stage is very rarely deployed. It also advised that the presentation exercise is generally only used when filling Academic and Teaching positions and not the regular service delivery positions.

The booklet provides that feedback is available on request. It also provides information on how candidates may appeal a decision or request for review under the Code of Practice. It explains that the provisions of the Data Protection and FOI legislation apply to these processes. It also sets out the candidates' obligations under Exposure Prone Procedures and provides for Garda/Security clearance.

3.2.5 Membership of the Selection Boards

Typically the interview board is made up as follows:-

- An independent Chairperson selected by PAS (while the Minister for Health has legislative responsibility for selecting the Chairperson, PAS assumes responsibility for deciding on the chair the interview board)
- three Board members nominated by the relevant hospital group and
- one board member nominated by PAS.

Interview Boards are generally comprised of five Board Members and a PAS representative. The composition generally follows a prescribed format:

Board Member	Nominated
Independent Chairperson	PAS
Consultant in Speciality	PAS
Clinical Director/Consultant	HSE
Hospital Group COE/Senior Management Nominee	HSE
Academic Nominee	HSE/University

PAS also provides a “PAS Rep” whose role includes briefing the selection board on their duties and responsibilities and preparing a record of proceedings. This record includes:-

- the report of the selection board
- the score sheets for candidates
- the record of each candidate’s interview and
- a summary comment on each candidate

Interview Boards Members are supplied with the following documents one week in advance of interviews:

- Interview Timetable
- Candidate Information Booklet
- A detailed Interview Guidance Document including guidance on the role of Chairperson and PAS Representative
- List of Board Members
- Marking Scheme/Scoring Sheet
- Candidate Application Forms/CVs

PAS’s communication with Board Members outlines their obligations under Freedom of Information, guidance for dealing with potential conflicts of interest/connections between members of the board and any of the candidates and the need to treat all aspects of the selection process in confidence.

The Interview Guidance Document sets out guidelines on:

- Structure and Format of Interviews
- Guidance on the role of Chairperson, PAS Representative
- Competency Areas for Assessment
- Assessment Indicators for Competency Areas
- Exploration of Professional Experience
- Questioning Approach including sample questions
- Note Taking
- Marking Scheme and Scoring

3.2.6 Shortlisting

PAS advised that the decision to include a shortlisting stage is made on a case by case basis adding that shortlisting is generally completed for selection processes where more than seven applications are received.

Of the seven appointment processes examined for the purpose of this audit, only one included a shortlisting stage.

Shortlisting is usually conducted by the entire Interview Board and generally involves a number of the board members joining the meeting via teleconference.

One week before the shortlisting meeting, the selection board members are issued with Job Specifications, the Candidate Information Booklet, the application forms and Curriculum Vitae. They are also issued with draft assessment criteria against which candidates should be assessed and PAS guidelines on conducting the shortlisting process.

On the day of shortlisting, the selection board is briefed by the PAS representative on its expectations of them and the process they are required to follow. The draft criteria are considered and agreed by the Board in advance of assessment of the candidates having regard to the specific requirements of the role. The criteria may be amended by the board following a discussion on their appropriateness in light of the specific requirements of the role. PAS advised that any significant amendments to the assessment criteria, will be reported to the Recruitment Manager, for consideration and approval.

The key steps identified in the shortlisting process are as follows:

- Discuss Job Descriptions and Person Specifications
- Agree pre-determined criteria for assessment
- Review Applications Forms/CVs and examine career history
- Assess each candidates application against the agreed criteria and determine whether the candidate is likely to reach the required standard at interview
- Agree summary comment and indicate whether candidate should progressed to next stage

The PAS representative maintains a record of the shortlisting process including detail on the grounds the board are using for assessment of candidates. S/he presents a report to the Recruitment Manager detailing the deliberations and decisions of the shortlisting board.

3.2.7 Interviews

On the day of interview, Board Members meet 30 minutes before interviews begin (or longer if they have not already convened for a shortlisting exercise), to endorse the draft criteria. Generally, Board Members will each agree which questioning area they will take and outline to their colleagues the specific questions they intend asking of all candidates. The PAS representative will provide a briefing to Board Members which

includes an outline of a candidates right to review and the Code of Practice, procedures in relation to potential conflicts of interest, the rules governing confidentiality and the administrative procedures to be adhered to throughout the course of the interview process. Board Members are required to sign declaration outlining any conflicts of interest including relevant relationships to any of the candidates and consenting to respect the confidentiality of the process.

Interviews are scheduled to last 45 minutes.

Candidates are requested to bring to interview their original birth certificate, evidence of Registration with the Irish Medical Council and evidence of all qualifications listed on their application pertinent to the role. Candidates are also asked to provide three references at least one week in advance of main interview.

PAS retains a copy of this documentation and returns the originals to the candidate. Garda clearance and procedures under Exposure Prone Procedures will be carried out post interview in respect of the successful candidate.

The format of Interviews and areas for assessment differ with regard to Section 62 and Non Section 62 post and Academic posts. Further to this, in addition to attendance at interview, candidates applying for Academic posts are required to give a presentation to the Board in advance of interview. Candidates receive a topic for presentation in advance and the presentation lasts approximately 20 minutes. Following this, the Board will have 10 minutes for questioning the candidate.

The format and structure of interviews for Section 62 and Non Section 62 posts and Academic posts and associated marking scheme is outlined below:

Section 62 and Non Section 62 Posts

Area	Time	Marks Available	Qualifying Mark
Introduction	3		
Detailed Exploration of CV	7	Pass/Fail	Pass
Professional and Related Skills	8	300	150
Interpersonal and Influencing Skills	8	100	50
Management Skills	7	100	50
Leadership Capabilities	7	100	50
Questions and Wrap Up	5		
Total	5	600	Pass

Academic Posts

Area	Time	Marks Available	Qualifying Mark
Introduction	3		
Detailed Exploration of CV	7	Pass/Fail	Pass
Professional and Related Skills	8	200	100
Academic and Research Skills	8	200	100
Administrative, Management and Leadership Capacity	7	100	50
Interpersonal and Influencing	7	100	50
Questions and Wrap Up	5		
Total	5	600	Pass

Following interview and the initial evaluation of candidates including the awarding of provisional marks, the Board Members are provided with the references submitted by Candidates. The references are considered by Board Members with a view to confirming the markings awarded decisions and exploring any areas requiring further clarification.

3.2.8 Post-interviews

PAS undertake a pre-assignment reference checks on candidates so that it is satisfied that the candidate meets the eligibility criteria and that they are satisfactory for the position on grounds of general suitability. PAS advised that it also verifies the successful candidates' registration with the Irish Medical Council as part of these checks.

PAS advised that it can experience delays at the end of the selection process in securing confirmation of the successful candidate's candidate clearance, health and pre-employment checks. This is more prevalent where candidates are not registered with the Irish Medical Council. PAS believes that some candidates interested in prolonging their stay with their current employer may engineer delays in the candidate clearance process.

Any successful candidates will be required to complete, a general declaration and self-health declaration. A letter will subsequently issue from PS to the HSE recommending a candidate(s) for appointment.

3.2.9 The Table below sets out key details on the 7 appointment processes examined.

Post	Advertised	No. of Posts	Applied	Shortlisting	Interview	Successful	Candidate recommended to HSE
Emergency Medicine (Dublin North East)	Feb 2015	1	2	No	2	2	June 2015
Anaesthetist (Midlands Regional)	Mar 2015	2	12	Yes	9	3	Aug 2015
General Surgeon (UH Waterford)	May 2015	1	3	No	3	1	Mar 2016
Cardiologist (UH Limerick)	Jan 2015	2	4	No	3	3	Apr 2016
Assoc. Professor Consultant Psychiatrist Endocrinology (Portiuncula)	Apr 2015	1	4	No	2	2	Sep 2015
Psychiatrist (Galway/Roscommon)	Apr 2015	1	4	No	2	2	Aug 2015
Radiologist (Sligo Regional)	-	1	4	No	4	3	Oct 2015

4 Interviews with Board Members

In the course of this audit, telephone interviews were held with 12 Interview Board Members from across the seven selection processes. Commission staff interviewed Chairpersons, Management Nominees and the Clinical Professionals. The telephone interviews were held with a view to determining the preparation the selection board members made in advance of their participation in the appointment process; the approach they adopted in the course of the appointment process and their personal views on conduct of the appointment process. Commission staff were also seeking the necessary level of assurance that the conduct of the shortlisting and interviews was consistent with the description of the process in the Recruitment Files.

The majority of those interviewed advised that they had an appreciable amount of experience working on selection boards for Consultant positions. Furthermore a number of Chairpersons and Management Representatives reported that they had significant experience of senior level selection process in other areas of the public sector while some of the clinical professionals said that they had interviewed for consultant level positions in this and other jurisdictions.

4.1 Preparation for work on the selection board/Documentation provided to the board

The board members interviewed by Commission staff spoke about the substantial amount of preparation work required in advance of the shortlisting and interview stages. They all mentioned the need to study the job description so that they could have an appreciation of the post specific features of role. Many were particularly interested in whether the post has a strong academic/teaching element, the governance and reporting structures in place for the position, the linkages with other services and the level of resources that is at the disposal of the person appointed. They were generally very complimentary about the quality of the selection guide provided by PAS and in particular found that the suggested areas of questioning contained in the guide was very helpful.

It was evident that Board Members make significant efforts to obtain background information on the requirements of the role based on the resources that will be at the disposal of the successful candidate, structures in place to support them in their work and the key service delivery challenges they will face. Some advised that they contact key personnel in the hospital seeking clarification on how the post fits with the HSE's national structures and programmes.

The professional member on the Board with firsthand knowledge of the role is generally encouraged to detail the specifics of the role to other members to ensure a more rounded understanding of the ideal person required.

For the most part, members consider the documentation provided to them in advance was of a very high quality and very detailed. They also reported that this documentation is provided with sufficient time allowing for further exploration or clarification of any issues of concern before the selection process commenced.

However, a number of selection board members commented that the level of detail in job specifications can vary significantly from process to process, ranging from highly detailed and specific to more of a pro-forma approach. It was considered that this can

make it more challenging in certain cases to determine the specific skills, knowledge and experience required essential for selecting the ideal candidate.

4.2 Training

The Clinical Professionals on the selection board advised that they had little if any formal interview training. They advised that when they first worked on these interview boards they relied on the suggested questions set out by PAS in the supporting documentation as well as guidance from their more experienced colleagues. The Chairpersons and Management Representative on the Boards commented on the high quality of the clinical representative secured by PAS/HSE for these selection boards, on how much preparation the clinical professionals put into researching the roles and the candidate's CVs and generally how seriously they took their role on the selection board. However some of the chairpersons commented that they had, on occasions, worked with clinical professionals who did not seem to fully appreciate the importance of adhering to the tried and tested structure of the PAS selection process. Two of the clinical professionals advised that they had not received interview training and that they would welcome formal support in this area.

Some board members noted that, notwithstanding the high level of commitment and experience of those on the selection boards, they had a degree of concern in relation to the questioning and listening skills on the part of some of the board members. The Board Members who made these observations said that PAS ought to consider providing greater guidance with regard to best practice as well as some tips on avoiding interviewing pitfalls such as the halo effect, unconscious bias. It was thought that members could, where necessary, be provided with direct training in interviewing skills, framing questions, listening for key evidence, the effective assessment of candidates against predefined criteria.

Whilst guidance documentations are provided to Boards Members in advance of both the shortlisting and interview stages, and briefing is provided by the PAS representative in advance of both, there is an absence of formal, practical interview training. One board member noted that, on sitting on the selection process for the first time, it would have been beneficial to have been provided in advance with training in interviewing technique, each Board Members individual role on the board, the approach that should be adopted, and tips on question and listening.

4.3 Candidate Assessment Process

All Board Members reported that the assessment of candidates followed a consistent pattern. They mentioned that the Job and Person Specifications are considered at the outset of their meetings before the selection criteria are agreed. Candidates' CVs and applications forms are reviewed and Board Members have an opportunity to highlight any outstanding achievements or potential shortcomings. The general format for assessment sees individual Board Members question candidates on areas in line with their expertise. Following introductory remarks by and questions from the Chairperson one of the Clinical Professionals questions candidates on their career pathway. Next, another of the Clinical Professionals questions the candidate to test him/her on readiness to meet the demands of the role as well as their vision for the delivering the service. The management nominees focus on the managerial and interpersonal aspects of the role. .

It was noted that the consideration of references at such a late stage in the process i.e. post interview, does not allow for questioning candidates on a potentially valuable source of information

Given the highly professional and technical nature of roles in such selection processes, interview board members considered that the professional aspects and knowledge and experience of the candidate formed the primary concern of the panel. The Board Members also noted that candidates, in certain cases may not fully grasp the strategic and governance challenges of the role, its links to national clinical programmers, leadership and change management skills and the interpersonal skills that may be required to effectively carry out the role.

4.4 Timeframes for interview

A number of the interview board members contacted by the Commission reported that they would like more than the 45 minutes allocated to the interview to explore the candidates suitability for the role. They considered that given the seniority of the role, the high level of responsibility associated with the position, the range of skills required to perform the role successfully and the risks involved in making a bad appointment, they would favour either more time for the interview or the application of an additional selection stage.

Other selection board members felt that the 45 minutes was plenty of time to determine which candidate was best demonstrated the requirements for the role. They noted in particular that many of selection processes involved small pools of candidates.

Also, board members commented that, in certain cases, a stronger emphasis on the development of clear, well-structured job descriptions and role criteria, would facilitate more effective use of time at shortlisting and interview and subsequent decision making.

Some board members also noted that, while they believed the process to be for the most part a fair and merit based, it might benefit from the inclusion of a wider spectrum of mechanisms for assessment.

4.5 Conflicts of Interest

It was acknowledged by all board members interviewed that, given the specialised nature of roles and the relatively small numbers working within specialties, it was often difficult to avoid situations where some of the panel members had no prior knowledge of some of the candidate. Notwithstanding this, there was a general perception that processes were very fair and that experienced board members brought a high level of objectivity to the assessment of candidates.

It was also considered that there were good safeguards in place to address potential conflicts of interest. Members are asked in advance of the process to identify any prior knowledge of relationships with candidates in advance, to apply a consistent approach in their questioning of candidates and to apply pre-determined objective criteria in the assessment of the candidates. In addition any board member with a prior knowledge of a candidate is asked to allow others lead on the evaluation of the candidate in question and that they are the last to offer their view.

The important role played by an expert and well briefed Chairperson was also noted.

The Chairpersons all commented that members of the selection board declare that they have worked with some of the candidates. They also reported that they are careful not to let outside knowledge of the candidate affect the decision making and that they strive to ensure that the evaluation of the candidates is based on the information presented at interview.

It was evident that the generally Chairperson takes an active role in balancing the contributions and opinions of board members fairly, with members with a prior knowledge of candidates last to offer opinion. There was a general opinion that the Chairperson was effective in ensuring consistency in questioning and reminding members to evaluate candidates on the basis of the information presented.

It was noted that , in preparing for their interview candidates often contact the hospital or clinical setting to seek further information on the specifics of the role and duties and responsibilities it would entail. In some cases these contacts have resulted in a candidate engaging directly with selection Board Members in advance of selection process.

Notwithstanding this, the view of all members interviewed was that there were no overt efforts to influence the selection process and that sufficient safeguards are in place for the fair treatment of candidates.

4.6 General

It is worth noting that board members interviewed had a high regard for the selection processes administered by PAS and reported that they compared very favorably with processes they had worked on in other settings in Ireland and in other jurisdictions. The processes were generally considered to be carried out with a high level of professionalism and based on the ethos of fair, merit based appointment.

However, it was noted in discussions that the general environment for filling consultant posts has been somewhat difficult over the period in question with demand for candidates often outstripping supply. While the calibre of the candidate pools for the major centres remain strong, some Board Members noted that, in some limited circumstances, pragmatic calls have to be made to appoint individual who may not otherwise be appointed.

Further to this it was noted by several members that the duration of the process can often feature lengthy delays. The Selection Boards noted that the timeframes from advertising posts to the recommendation of a successful candidate by PAS was general 4 or 5 months (one of the 7 processes reviewed involved a 10 month timeframe). The Selection Board Members attributed the lengthy timeframes however to delays in initiating the requests for sanction and approval of posts saying that the approval process for the position sometimes does not commence until the incumbent is nearing retirement or has already retired. They also advised that there can be lengthy delays in the successful candidate taking up the position. They advised that these delays sometimes resulted in lengthy Locum Consultant assignments. While they said that the Locums can and do provide perform an invaluable service delivery duties, the temporary nature of their contracts make it very difficult for them to play a

substantial role in service development. The delays in making assignments also means that a cross-over training period for the new recruit with his/her predecessor is highly unusual.

Some Board Members reported that the expectation that a failure to make an appointment will greatly extend timeframe for securing an appointment increases the chances of pragmatic calls being made in relation to a candidate the Board may otherwise decide not to recommend for appointment.

5. Conclusions and Recommendations

The following conclusions are based on the in-depth examination of the seven selection processes outlined above conducted by the HSE in 2015, along with discussions held with Interview Board Members at Consultant level.

The Commission is satisfied, in the main, that the recruitment and selection processes conducted by the PAS to recommend persons for appointment to Consultant positions were managed in a fair and impartial manner. The selection processes examined were designed and managed to ensure that candidates were assessed against clear, transparent and relevant criteria, which is the core foundation of a values-based process.

However the Commission considers that there are a number of elements of the appointment process that warrant consideration by PAS and the HSE.

Timescales.

While noting that PAS generally completes its element of the selection process in an efficient manner (between 4 and 10 months in the sample examined by the Commission), some of the HSE's nominees on the selection board commented that the HSE is often very slow to initiate an appointment process and also in finalising the appointment of the successful candidates. These Board Members reported that the HSE can sometimes wait until the incumbent has or is about to retire before it initiates the process. They also remarked that considerable leeway is afforded to the successful candidate to take up the position leaving these key positions vacant for lengthy periods.

The Code of Practice sets out that "appointment processes are not subject to undue delays".

Recommendation 1

The Commission recommends that the PAS impresses upon the HSE the importance of proper succession planning measures highlighting the pressures delays in filling a position place on the selection board to make an assignment.

While the "contracting/on-boarding" of the successful candidate is outside of the its remit, the Commission considers that the HSE should explore, with PAS's support where appropriate, how it might introduce greater controls to ensure those assigned take up duty more promptly.

Risks of making an unsuitable appointment.

The Commission noted that the Consultants positions have very broad responsibilities encompassing clinical, strategic, leadership, managerial and interpersonal skills.

The selection board members spoken to referred to the testing and highly structured clinical training pathway pursued by candidates to reach the point in their careers where they could apply for consultant positions. They also spoke about the limited numbers of candidates applying for positions making the role of the selection board

in identifying the strongest candidate somewhat more straightforward. While some of the selection board members said that they would favour obtaining a broader insight into the candidate than the 45 minute interview permits to ensure that they are suitable for appointment, most considered that the interview was sufficient to enable the Board to differentiate between the candidates.

Some selection board members reported that pressures to make appointments can, on occasions, lead to some pragmatic calls with regard to the suitability of the candidates presenting for interview. Some of the selection board members spoken to noted that candidates may be recommended for appointment despite some slight misgivings on the part of members of the selection board on their capacity to perform all of the duties of the role prescribed in the job and person specification. They commented that this is more likely to occur to positions outside of the main clinical centres where the vacancies tend to attract smaller numbers of candidates.

The Commission also reflected on the length of time the Consultant will be in the position (many will remain in the Health Services from the time of their appointment in their mid-thirties until their retirement), their capacity to shape the service (for better or worse) and the expectation that they will deliver the quality of clinical care required of them.

The Commission considers that appointments should only be made where those involved are satisfied that the candidate meets the requirements of the role. While it is broadly satisfied that the post interview candidate clearance stage will verify that the successful candidate has the necessary clinical skills to safely perform the duties of the role, it considers that evaluation of candidate's strategic, leadership, managerial and interpersonal skills could be explored in greater depth.

Recommendation 2

The Commission considers that PAS should explore how it might incorporate an additional assessment step(s) to provide a greater level of assurance on the suitability of those appointed. In making this observation, it is conscious that appointments to senior roles in other sectors are supported by a wider range of selection tools. It notes that candidates for teaching/academic Consultant posts are generally asked to make a presentation on how they will address the challenges of the specific role and recommends that PAS also include this step in the appointment processes for general service consultant positions.

Recommendation 3

The Commission recommends that PAS set out explicitly to Board Members that where they have doubts about the calibre of the candidate, it is better that they do not to make a recommendation for an appointment. In these cases it is preferable that the HSE review the job and person specification and advertise the post again rather than making a wrong appointment.

Anchoring the selection criteria to the job and person specification.

Following its conversations with PAS Recruitment Team and the members of the selection board, the Commission understands how the selection criteria used at the shortlisting and interview stages reflect key elements of the job and person specifications. However it is not sufficiently apparent to candidates how the job and

person specifications for the posts they are applying for are they will be reflected in the selection criteria or how the interview stage will be structured.

Recommendation 4

The Commission recommends that PAS reviews how the selection criteria and interview format is conveyed in the Candidate Information Booklet so that candidates can prepare better for interview and align their presentations to the areas against which they will ultimately be evaluated.

Training of Selection Board Members.

While the Chairpersons spoken to all considered that the interview board members are of an extremely high calibre and very quickly adopt good questioning and evaluation techniques, some of the clinical/professional selection board members spoken to advised that they had never received formal interview training before they were first asked to sit on an interview board for a Consultant position.

Recommendation 5

The Commission recommends that PAS check with board members that they have received formal interview skills training and that it provides training to those who have either not worked on a PAS selection Board in the past 12 months or have not previously received training.

Embargo on post related conversations between members of the interview board and potential candidates.

The Commission noted that the HSE generally provides the name of a person with a knowledge of the role so that candidates can make the necessary preparations in advance of interview. While broadly satisfied that PAS has effective measures in place to identify and mitigate the risks associated with the connections between candidates and board members, it noted with concern that some of the selection board members advised that they had met with, spoken to and begun forming opinions on candidates in advance of an interview. In these circumstances, the Commission does not consider that it is sufficient for the Chairperson of the Interview Board to instruct Board Members to disregard previous knowledge of candidates and focus on the evidence presented over the course of the appointment process.

Recommendation 6 The Commission recommends that PAS advises all Board Members explicitly that they must not discuss the vacancy with any potential candidates as this may compromise the impartiality of the selection process.

Appendix 1 - Audit Procedures

Advance notice is given of the intention to carry out an audit. This not only provides sufficient time to prepare all necessary documentation and statistics, but also permits the review to take place with the minimum of disruption.

At the conclusion of an audit, the findings of the audit are always discussed with the body audited before a report is submitted to the Commission. Those subject to audit also have the opportunity to comment on audit reports in respect of matters of factual accuracy, before such reports are finalised. Where shortcomings in a particular area of recruitment, recruitment policy, or recruitment practice have been identified, recommendations to address them will be made. While the principal emphasis is on providing assistance and support, the focus will be to ensure that:

- There is no scope for patronage.
- Licence holders' instructions and guidance, including guidance on the use of listed recruitment agencies, are consistent with the spirit and letter of the Commission's Code of Practice.
- All those with responsibility for organising recruitment processes understand the Commission's requirements.
- Those serving on selection boards undergo training delivered on a timely basis and appropriate to the specific assessment process being deployed or have sufficient interviewing experience at an appropriate level
- Those administering selection techniques are appropriately qualified individuals who have received proper training.
- Action has been taken to correct any instances uncovered by internal monitoring where the Code of Practice has not been followed, and that any new developments in recruitment policy or practice such as new selection procedures are consistent with the Code.

