



Intern recruitment manual selection guidelines

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1. Overview

The processes described below apply to all medical graduates of Queensland universities who are Australian citizens, Australian permanent residents or New Zealand citizens. This group are categorised as Priority 1 applicants.

Priority 1 applicants are divided into four groups:

1. Queensland Health Rural Scholarship Holders;
2. Non-Scholarship Holders who have made a preference for a Rural Generalist Position (Rural Generalist Trainees);
3. Queensland Health Bonded Medical Scholarship Holders; and
4. General Interns (Non-Scholarship Holders)

2. Rural Health Connections management

Rural Health Connections is responsible for the recruitment and management of Queensland Health Rural Scholarship Holders and Rural Generalist Trainees. Following recruitment to these positions, and in the event that there are vacancies arising, these positions will be transferred to the pool of general intern positions in the intern campaign.

With regards to the management of Queensland Health Bonded Medical Scholarship Holders (QHBMSHs) through the campaign, Rural Health Connections in collaboration with the Medical Workforce Advice and Coordination Unit have agreed to the following:

“In the event that QHBM Scholarship Recipients choose one of the specified Area of Priority Service (APS) restricted hospitals as their first preference and that hospital is again oversubscribed in the Intern Allocation campaign, the respective Scholarship Recipients will be balloted out first and placed in the next available undersubscribed hospital (according to their nominated preferences).”

The APS Restricted Hospitals for the 2012 Intern campaign, which have been oversubscribed at least twice in the last four intern campaigns (2008 – 2011), include:

- Gold Coast Hospital (GC),
- Mater Health Services (MTR),
- Nambour Hospital (NMB)
- Princess Alexandra Hospital (PAH),
- Royal Brisbane and Women’s Hospital (RBH), and
- The Prince Charles Hospital (TPCH)

3. Intern campaign main ballot

Within the intern recruitment campaign, the main ballot will be performed.

4. Ballot placement process

4.1 General ballot rules

- Hospitals where the number of positions available is equal to the number of P1 applicants that have first preferenced those hospitals are referred to as **equal in numbers**. Applicants who fall within this category will be locked in to these hospitals and no further movement will occur.
- Hospitals where the number of positions available is greater than the number of P1 applicants that have first preferenced those hospitals are referred to as **undersubscribed**. Applicants who fall within this category will be locked in to these hospitals and only inward movement will occur, through other applicants being allocated to these hospitals.
- Where a hospital has more P1 applicants, who have first preferenced that hospital, in comparison to the number of positions available are referred to as **oversubscribed**. Applicants who fall within this category will proceed to be allocated as per the ballot process detailed herein. Individuals who have first preferenced an oversubscribed hospital will participate in the ballot processes and will be allocated in accordance with the rules that apply.

5. The Main Ballot

5.1 Main ballot procedure

- Figure 1 demonstrates the pathways through the main ballot.
- Prior to the main ballot commencing, any applicant that has an approved exemption or special consideration to an oversubscribed 'Individual Hospital' (Cairns Base, Mackay Base, Nambour, Rockhampton Base, Toowoomba or Townsville Hospitals) only is removed from the random draw and is locked in to that hospital. This is because the exemption to that hospital only permits the applicant to remain at the oversubscribed individual hospital.
- This does not apply to applicants who have an approved exemption or special consideration to the South East Corner Group (Caboolture, Gold Coast, Ipswich, Logan, Mater Health Services, Princess Alexandra, Redcliffe, Royal Brisbane and Women's or The Prince Charles Hospitals). They will be included in the main ballot, and in the event that they are balloted, these individuals will be placed at their next available preference within the South East Corner Group.

The main ballot proceeds as follows:

- (a) An oversubscribed hospital is randomly selected and an applicant from within the randomly selected oversubscribed hospital is randomly selected. The process is as follows:
 - (1) Random draw from oversubscribed hospital pool;
 - (2) Random draw from applicant pool within selected oversubscribed hospital.
 - (3) The applicant randomly drawn is moved to their next available preference.
 - (4) The processes detailed in steps (1) to (3) continue until the appropriate numbers of applicants are removed from the oversubscribed hospitals.
- (b) If at step (1) the selected hospital is identified as an APS "restricted" hospital, in the first instance, proceed to randomly draw from the QHBMSH applicant pool within that selected oversubscribed hospital. The QHBMSH applicant randomly drawn is moved to their next available preference.
- (c) If at step (2) the selected applicant has an approved exemption or special consideration to the South East Corner Group (Caboolture, Gold Coast, Ipswich, Logan, Mater Health Services, Princess Alexandra, Redcliffe, Royal Brisbane and Women's or The Prince Charles Hospitals), the applicant is considered for their next available preference within the South East Corner Group. If there is a position available, they are then allocated accordingly. If there are no vacancies available then the applicant will be locked into their first preferred facility.
- (d) If at step (2) the selected applicant is an approved joint ticket holder, the partner is also removed and they are placed at their next available preferred hospital where two positions remain vacant. To be an approved 'joint ticket' holder, preferences must match for both applicants.

If this process causes the oversubscribed hospital to become undersubscribed and other applicants have previously been balloted out of this hospital, then a random draw of those previously balloted applicants is to take place to determine who will return to this hospital. If no other applicants have been previously balloted out of this hospital, then that hospital becomes undersubscribed until such time as it is filled by another applicant's lower preference or by a P2 applicant.

Figure 1: Basic diagram of the main ballot process

