

Group Interview Process

Centralised recruitment for Nursing & Midwifery roles

Nursing & Midwifery Workforce Unit

Group interviews – what are they?

- Group interviews are a method to assess multiple numbers of candidates for similar jobs
- Candidates undertake a series of activities designed to show employers that they possess
 - the personal and technical skills for the job
 - whether skills, experiences and personal qualities match the organisation's **selection criteria and culture**.
- Assessors rate the candidates who are involved in the same activity / scenario
- Ratings of all activities with a range of measures are combined and indicate the top scoring candidates
- Methods facilitate assessing demonstration of attributes in 'real life' situations e.g. team work, which can only be described, not demonstrated, in a one to one interview

Group interviews – what are the benefits?

- Read this article on why assessment centres are so highly valued by recruiters

[Why-assessments-centres-are-important-when-recruiting-staff.pdf](#)

What are our reasons for introducing this method:

- One of the most reliable methods of assessing candidates. Generally accepted as a fair method of selection, providing equal opportunities for all candidates and selecting on merit
- Reduce time and resources required when compared with those used in one to one interview processes organised by individual managers
- Increase efficiency of recruitment and selection, including facilitating identification of suitable employees who meet criteria for working at Western Health but are not the successful candidate for your position.

What makes it fair and reliable?

Our Group assessments have been designed using best practice principles reduce the risk of unconscious bias – what does unconscious bias mean?

- Watch this youtube video
 - https://www.youtube.com/watch?v=NW5s_-NI3JE
- And then read this article
 - [9-Types-of-Unconscious-Bias-and-the-Shocking-Ways-They-Affect-Your-Recruiting-Efforts.pdf \(wh.org.au\)](#)

Reflect on where you might have experienced seeing a bias in action and an outcome influenced.

Summary of Unconscious Bias types

- **Conformity Bias** – responding to group or peer pressures. E.g. 2 interviewees like the answer Brett gave and thought it was better than Karen's response. The 3rd interviewer doesn't really agree, but finds themselves agreeing.
- **Beauty Bias** – responding to more pleasant looking faces or features, such as height in men, or believing that a person 'looks' like someone who is needed to do that job.
- **Affinity bias** – when we feel the candidate has something in common with the us, e.g. same school, worked at the same health service, knew the same person
- **Halo effect** – when we see one thing great about a person and it outweighs all other things. E.g. socially / politically inept sports stars
- **Horns effect** – opposite to halo. We see something we don't like and it influences everything else we think we see. E.g. unpleasant facial features
- **Similarity bias** – we want to surround ourselves with people like ourselves as that makes us feel comfortable
- **Contrast effect** – this is where we compare one against the other. Seeing many CVs, we tend to compare each CV/interview to the one that came before it. We judge whether or not the person in front of us did as well as the person that came before them. We should be assessing each individual
- **Attribution bias** – seeing achievements as down to an individual's luck and setbacks as down to (in)competence
- **Confirmation bias** – believing that we are always right, trust our guts and then seek to interpret information to support our view, and ignore other signs

Group interviews – best practice principles

How are our Group assessments designed using best practice principles*?

Our Organisational Culture & Leadership Development team utilised their experience and wider research to inform the development of the tools and process – they achieved this through:

- Consultation and review of key competencies and capabilities for the generic role until agreement was reached
- Careful analysis of best assessment methodology, including competencies to be assessed in each scenario / activity, tools available, validity and accuracy of tools, best fit of assessment method in likely environment on the day, experience of others in use of methods
- Review of standards expected and cross referenced rating scales
- Assessed logistics (time, combination of activities, venues, process etc)
- Kit preparation

* https://www1.bps.org.uk/system/files/user-files/Division%20of%20Occupational%20Psychology/public/inf234_assess_centres_final.pdf

Group interviews – specifics

Candidates have already been assessed on:

- Application letter
- Curriculum Vitae

And selected for interview based on selection criteria for the position

In the group interview, they will be assessed on:

- The activities that have been designed to demonstrate performance competence and behavioural criteria important for working in the role applied for at Western Health.
- Each activity has a checklist for assessors to easily record their observations based on the candidates responses.

Group interviews – assessment tools

The assessment tools measure:

- Communication - confidence to share and hold opinion, escalation, advocacy, ability to listen, assertiveness
- Assessment skills & clinical knowledge - rapid assessment, critical thinking, problem solving ability, utilising resources, medication safety
- Teamwork, delegation, conflict resolution, coaching, organisation, planning, flexibility, adaptability, creativity
- Our values - compassion, accountability, respect, excellence, safety

The group activities of team activity and clinical scenario , as well as the written responses have been developed or chosen to measure these criteria

The activities also identifying those behaviours we do not want – rudeness, talking over others, interrupting, aggressiveness, disrespect and those not actively engaged

How does the interview run?

- Candidates arrive – attendance sheet, name tags
- Assemble in one group for introductions and overview of session
- Split into two or three groups (depending on numbers / scenario's being run)
 - individual 'best care' and incident reflection response
 - Team activity
 - Clinical scenario responses
- Each activity runs for approx. 20 mins, allowing 5 mins for rotation to different activity venue
- Assemble as one group at completion - Opportunity for UMs to provide overview of ward, Q&As, 'next steps' provided to candidates
- Candidates leave

- Max. timeline for candidates – 2 hrs

How does the assessment part run?

- Assessors / Unit Managers arrive prior to group sessions commencing
- Assessors participate in the team activity or clinical scenario activity
- After candidates leave, assessors come together to review candidate ratings and select preferred candidates for employment and specific positions
- Opportunity to debrief regarding process and evaluate session
- Max. timeline for assessors – 2 hrs

What is expected of the assessor?

- Focus on the assessment i.e. no interruptions, no answering phone during session
- Set the scene, support initial settling, encouraging interaction
- Hold as little conversation as possible with candidates, no prompting
- Rate each candidate during the activity session in the allocated session time
- Participate in debrief and candidate selection at completion

How does the assessment part run?

- NMWU team will:
 - Co-ordinate and facilitate the sessions
 - Ensure all the required tools are available
 - Be the time keepers
 - Collate the responses

- Further information on the centralised recruitment process with a booklet and FAQa can be found on the N&M microsite

[Centralised Recruitment - Nursing & Midwifery \(wh.org.au\)](http://wh.org.au)

Thankyou

We look forward to seeing you at our group interviews in the future

