

# Recruiting for values using Multiple Mini Interviews in healthcare student selection

## Project background

To fulfil the requirements of Health Education England's (HEE) national values based recruitment (VBR) programme the University of Surrey has moved to using multiple mini interviews (MMIs) to inform final selection decisions in their healthcare student selection. MMIs represent a transparent approach where pre-defined personal values and attributes can be assessed.

Candidates are asked to respond to questions relating to a scenario at a 'station' and then move onto the next station in a timed circuit. Each scenario is designed to assess generic and station specific values or attributes for example: communication skills, kindness, compassion and empathy, respect for the individual, privacy and dignity, advocacy, decision-making, team working and integrity. Scenarios are not clinically based as they are not designed to measure clinical knowledge. A standardised interviewer assessment score sheet accompanies each station. Interviewers have no prior knowledge of candidates before they meet them at each station. It is proposed that this dilutes the potential effects of examiner bias and chance. Advocates also argue that the aggregate of multiple observations generated represents a more generalizable assessment of an individual's personal attributes (Eva et al, 2009). Reliability, validity (Eva et al, 2009, O'Brien et al, 2011, Husbands and Dowell, 2013, Burkhardt, 2015) and acceptability (Perkins et al, 2013, Callwood et al, 2014, Oyler et al, 2014) have been primarily explored in medical student selection to date.

## Project aims

To develop and evaluate MMIs in the context of pre-registration healthcare student selection (adult, child and mental health nursing; paramedic and operation departmental practice; and midwifery).

## Process

Building on the extensive pilot work conducted by the author, a seven-station, four-minute model was employed with one minute between stations and one interviewer at each station. This format took into consideration research evidence as well as practical, resourcing and logistical factors.

## Key challenges

Replacing the one-to-one interview with MMIs represented a significant change with its associated complexities and challenges. The author focusing on an inclusive and evolving approach which actively encouraged feedback and initiated refinements accordingly. Academic staff and practice colleagues were trained in MMI administration prior to interviewing. Practitioners comprise 50% of interviewers at the University of Surrey and their inclusion in this initiative was essential. Time was invested in visiting key practice managers in the University's partnership Trusts to engage them from an early stage. This helped generate 'ownership' of the change and made for a smooth transition.

## Impact

The reliability (internal consistency) of the University of Surrey model was found to be 'excellent' with Cronbach's alpha scores of 0.9 and above for each station.

As the students commenced their programme in October 2015, predictive validity data is unavailable to date.

Interviewers' views were explored in a focus group where MMIs were positively evaluated.

- *"I think it gives you a much better idea ... whether they are able to rationalise, analyse, synthesise ...you can see those students who have very concrete thinking and those who are able to look at both sides of the argument."*
- *"I think it does demonstrate caring, certainly in my scenario with the alcoholic, it came over very clearly... I found the compassion came out much clearer..."*
- *"What's quite nice about this is that... they come in and sit down and they are the person they are and we are not biased by anything on their application forms."*

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Candidates' views were captured in a questionnaire survey:

- *“The questions are challenging but this is what interviews are supposed to be about, pushing yourself to show your true personality and nature not rehearsed answers.”*
- *“You can move from a bad station in the MMI and not let it impact on other stations.”*
- *“In the traditional interview I felt I could relax more, in the MMI it felt like I was starting all over again at each station.”*
- *“It doesn't allow you to get a feel for staff like the personal interview...we are picking the University as well as the University picking us.”*

## Examples of material produced

### MMI scenario

You have been training for over a year to enter a race to ascend Mount Kilimanjaro. You begin the climb with your fellow competitors, all focused on being the first to reach the summit. Part way up one of the climbers falls critically ill with altitude sickness whilst two others develop diarrhoea and vomiting.

Concerns are raised about the rest of the climbers becoming ill, however one of your party decides he has trained for so long to achieve his dream that he goes on ahead alone. You and two others are the only members of the party feeling fit and well.

How would you respond to this situation?

## Next steps and sustainability

New scenarios have been developed and piloted for the forthcoming 2015-16 recruitment cycle. The intention is to develop a bank of scenarios which can be used inter-changeably. A longitudinal study is being conducted by the author examining predictive validity i.e. associations between student's MMI score at interview and how well they go on to perform in clinical practice.

### Key Tips

- Pilot scenarios and scoring pro forma.
- Train all interviewers in MMI administration prior to interview days.
- Timely engagement and preparation of practice colleagues.
- Importance of preparatory information on University website to manage applicant expectations.

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