



HETI CPD HOME

COMMUNICATION WITH MEMBERS: PROCEDURE

1 INTRODUCTION

HETI CPD Home provides Continuous Professional Development (CPD) content, resources and a tracking platform to help its members meet the CPD requirements of their medical registration.

Good program management requires clear communication between the CPD Home and its members regarding important aspects of the program such as progression, compliance and changes to the program requirements.

2 SCOPE AND PURPOSE

This procedure outlines how and why HETI CPD Homes will contact participants. It does not relate to any other HETI program.

3 WHY HETI CPD HOME WILL CONTACT MEMBERS

3.1 TRACKING

As outlined in the HETI CPD Home Compliance and Audit Policy, member progress against program requirements will be tracked throughout the year. From time to time, members may receive an email reminder about their progress. If records show that a member is at risk of not meeting program requirements, they will be offered assistance and support from HETI staff, clinical advisors or via one of the HETI clinicians and/or educational support officers throughout NSW Health.

3.2 CHANGES TO THE PROGRAM

Material changes to the program will be communicated to CPD Home members as soon as possible, with a lead-in time of at least 6 months. The mode of communication will be via email and may include:

- Notification of any changes to registration requirements
- Any changes to program level requirements such as mandatory training
- Changes to fees or other CPD Home requirements for the next CPD year

- Any other changes deemed significant by HETI CPD Home and which may impact how members engage with or conduct their CPD or interact with the HETI CPD Home

Significant changes will be communicated repeatedly to members through a variety of mediums in the leadup to implementation and will also be visible on the CPD portal. This may include email, website content updates, newsletters and alerts on the CPD portal.

New courses/ resources/ web content or other minor changes will be implemented according to agreed timelines and communicated to CPD Home members when released for use, via email.

3.3 AUDIT

If a member is selected for audit, they will be emailed in the first instance. Repeated failure to respond to an audit notification within timeframes set out in the *HETI CPD Home Audit and Compliance Policy* may result in phone call follow-ups.

3.4 EVALUATION

HETI CPD Home is committed to continuously improving the program. Members may receive invitations to provide feedback via surveys or feedback forms. This could be online or via email invitation. This may include:

- At the end of a learning module
- Surveys about the quality of the HETI CPD Home portal and its functionality
- Member experience dealing with HETI CPD Home staff and educational support
- Evaluation questions about whether the program is fit for purpose

Any feedback received from members will be de-identified and used only when collated with other responses to inform trend analysis, identification of system weaknesses, or other evaluative exercises. HETI CPD Home will not publish any identifiable feedback from individual members unless the member has provided express written consent (i.e. in the case of providing an example of qualitative feedback received during an evaluation report).

4 HOW HETI CPD HOME WILL COMMUNICATE WITH MEMBERS

- The primary mode of communication will be email – either directly or in the form of newsletters or updates.
- At times, HETI CPD home may need to phone members to follow up non-compliance with a request for information (e.g. during an audit or if a CPD activity has been spot-checked for quality/ relevance).
- Survey invitations will generally be sent via email or will be included as web forms at the end of modules/ educational materials.
- A feedback form will be available on the HETI CPD Home website for general enquiries/ feedback.

5 CONTACTING HETI CPD HOME

5.1 CONTACT DETAILS

Telephone: TBC

Email: HETI-CPDHome@health.nsw.gov.au

5.2. HOW HETI WILL MANAGE REQUESTS

HETI CPD Home staff will receive and triage all calls and emails. If an enquiry is administrative, members will be directed to the most appropriate staff member.

If necessary, members may be referred to the HETI Clinical Chair or another clinical expert, in order to assist to the greatest extent possible.

If members require remediation for underperformance, HETI CPD Home may assist in accordance with the *HETI CPD Home Remediation Procedure* (5.3 below).

If a member wishes to make a complaint or a more formal grievance against the program or an individual associated with the program, requests will be treated in confidence. Members will be supported to work through the resolution process according to relevant procedures – i.e., *NSW Health Grievance Policy* or the *HETI CPD Home Reconsideration, Review and Appeal Policy*.

5.3 MEMBERS NEEDING REMEDIAL TRAINING

Members who would like to self-report remediation needs or who seek help from HETI CPD Home about remediation required by regulators or employers can do so using the *HETI CPD Home Remediation Procedure*.

5.4 MEMBERS RETURNING TO PRACTICE AFTER EXTENDED ABSENCE

Many doctors returning to the workforce after extended absence may face challenges such as:

- Identifying changes in the evidence base supporting clinical practice
- Updating their knowledge and skills
- Adopting new technologies, treatments or models of care into their practice

A HETI CPD Home member re-entering the workforce in Australia must adhere to the Medical Board of Australia: Recency of Practice Registration Standard, and complete mandatory Continuing Professional Development (CPD) requirements.

HETI may be able to support members when they resume practice by advising members about appropriate HETI or LHD education activities that may help them meet their obligations.

Members may be referred to an appropriate clinical advisor at their Local Health District to find specific workplace based activities.