



HEALTH
EDUCATION
& TRAINING

Prevocational Training Council endorsement of Director of Prevocational Education and Training

INTRODUCTION

Directors of Prevocational Education and Training (DPET) are responsible for providing medical leadership and oversight of the two-year prevocational training program in the facility in which they work.

Through delivery of the program DPETs will ensure that junior doctors in their first and second postgraduate years are appropriately supervised and supported and have a positive learning and work environment in which to develop their skills.

PURPOSE

The purpose of this procedure is to inform prevocational training providers about the Council's endorsement of DPETs to prevocational training networks in NSW.

DISTRIBUTION

This document will be made available to all relevant groups and individuals via the HETI website.

PROCEDURE STATEMENTS

The Role of the Director of Prevocational Education and Training (DPET)

KEY ACCOUNTABILITIES

The role of the DPET is to ensure a high quality, sustainable prevocational training program in the facility. The program must meet the Australian Medical Council's National Standards for prevocational training.

The DPET is responsible for the planning, delivery, and evaluation of the prevocational training program at the facility by delivering the following outcomes:

- Develop, coordinate, and promote a structured, high quality prevocational training program with hospital executive and the General Clinical Training Committee (GCTC) in the facility.
- Support a formal orientation program which is designed and evaluated to ensure the intern is ready to commence safe, supervised practice.
- Ensure and support constructive prevocational training program review, assessment, and feedback processes to inform program improvement and innovation.
- Oversee the policies, procedures and allocation of resources that contribute to the prevocational training program.
- Liaise and attend meetings with relevant groups and individuals to promote and enhance the training and education of prevocational trainees, including:
 - Term Supervisors
 - Network Committee for Prevocational Training (NCPT)

- GCTC
 - The Assessment Review Committee (ARC)
 - Directors of Medical Services (DMS)
 - Visiting Medical Officers
 - JMO Managers and administrative staff
 - Hospital executive
 - Other DPETs within the Network
 - HETI
- Advocate for the professional development of prevocational trainees.
 - Ensure that adequate supervision and support is provided for prevocational trainees.
 - Assist in the provision of fair and transparent term allocations and workload.
 - Supervise the personal and professional welfare of prevocational trainees, particularly those experiencing difficulties.

SELECTION CRITERIA – SKILLS, KNOWLEDGE AND EXPERIENCE

- Medical graduate with clinical postgraduate qualifications.
- A clinical appointment to practice at the hospital.
- Qualifications, appointment and experience at a level sufficient for communicating on authoritative terms with senior consultants acting as Term Supervisors.
- A genuine interest and/or relevant experience in postgraduate medical education, a willingness to develop expertise in this area and a demonstrated understanding of the importance of the continuum of medical education as a lifelong professional commitment.
- A commitment to and confidence in improving the quality of education and training offered by the hospital.
- An understanding of the principles of adult education and professional development.
- A commitment to HETI's vision and purpose and the ability to present and explain HETI's goals.
- A Term Supervisor may be appointed to the role of DPET only in exceptional circumstances. The facility must ensure policies and procedures are in place to avoid a potential conflict of interest.

Notification of Change in Circumstances

The Director of Medical Services (DMS) or equivalent must notify HETI if the DPET is resigning or has resigned.

If the DPET will be absent from the role for more than one month, then the DPET or DMS or equivalent must notify HETI of the upcoming absence. This needs to be communicated by email to the Program Coordinator (Accreditation) for the appropriate hospital.

DPET Selection & Submission to the Prevocational Training Council (PvTC) for Approval

1. The DMS or equivalent will send correspondence to the Chair of the PvTC informing them that the DPET position will be advertised and when interviews will be conducted. A

member of the hospital's General Clinical Training Committee GCTC should be involved in the selection process.

2. The hospital will conduct interviews and select the preferred candidate for the DPET role.
3. The DMS or equivalent will send correspondence to the Chair of the PvTC recommending the preferred candidate for the DPET role for submission to the PvTC for approval.

Please refer to the checklist below outlining the information which needs to be included in the correspondence:

The correspondence must include:	
<input type="checkbox"/>	An outline of why the preferred candidate has been recommended for the DPET position, including evidence of previous experience in medical education.
<input type="checkbox"/>	The Full Time Equivalent hours (FTE) the DPET will be allocated to perform the role and the FTE hours spent in the clinical role at the hospital.
<input type="checkbox"/>	A focused curriculum vitae of the preferred candidate which clearly addresses the relevant experience and skills outlined in the selection criteria
<input type="checkbox"/>	A statement from the candidate as to why they are interested in becoming a DPET including their skills and interest in pursuing the role.

Support available for DPETs

There are several resources that have been put in place to support DPETs within their role:

- The DPET Mentoring Program: This program was established to provide a supportive relationship for the career and personal development of both the mentor and mentee surrounding topics such as: leadership skills, professional development, problem solving skills etc. The program is a confidential process which consists of informal meetings between the mentor and mentee for a 12-month period. The meetings and frequency are arranged and agreed upon by the mentor and mentee.
- The DPET will be added to the Microsoft Teams Group and WhatsApp group. These groups allow DPETs to discuss relevant issues, ask questions, and provide support to each other.
- Virtual monthly DPET meetings are held for DPETs to come together and discuss issues that may be arising within their role/hospitals. These meetings are facilitated by the PvTC Chair.
- DPET Forums are held face to face twice yearly where DPETs can meet and discuss relevant issues in an open forum setting. These forums are facilitated by the PvTC Chair.
- The PvTC Chair - Prof John Vassiliadis, is always available if the DPET feels that they need additional support.

DPET Position Evaluation

The hospital's GCTC and DMS will undertake an annual performance review of the DPET. This performance review will be based on:

- Feedback from prevocational trainees, term supervisors and medical administration.
- Evaluation of activities undertaken by the DPET.
- Performance indicators (to be developed in consultation with the DPET).



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