



Hull York Medical School

Code of Practice on Student Fitness to Practise

Approval Process:	
Committee	Outcome/Date of approval
Fitness to Practise Committee	29 June 2016
HYMS Board of Studies	8 June 2016
HYMS Joint Senate Committee	14 June 2016
To be implemented from:	11th July 2016
Next due for review:	2017- 18
Responsibility to update:	Head of Quality and Standards

Publication:	
Location	Website
HYMS website	11 July 2016

To obtain this Code of Practice in an alternative format:
Please contact governance@hyms.ac.uk

All students should be aware that unprofessional behaviour during their programme of study, or serious health issues that affect fitness to practise, may result in the General Medical Council (GMC) refusing to grant provisional registration with a license to practise. This is the case even if the circumstance in question occurred before or early in the medical school (GMC, 2016). For all other students this will also be the case for each of their respective regulatory bodies.

The GMC is responsible for all decisions regarding registration of medical students¹

Definitions

Case Management Group: an experienced core group of senior staff responsible for considering all student cases brought to its attention by Phase Leads/Programme Directors and/or HYMS Student Support Office. This group will determine what action and/or escalation is most appropriate for individual students based on all of the information and evidence that is available at that time. If required this group will initiate an investigation into any concerns about a student's health, conduct, progress, issue a Caution or alternatively they may refer directly to the HYMS Student Fitness to Practise Committee.

Caution: A formal recording that a concern is serious enough that if there were a repetition it would be likely to result in referral to the HYMS Student Fitness to Practise Committee

Day: means a calendar day.

Investigating Officer: this can be any member of HYMS staff, including academic, senior administrator, member of Student Fitness to Practise Committee or honorary appointments within the NHS. The investigating officer should not be the student's current tutor, mentor or supervisor. All investigating officers follow the HYMS Guidance Notes for Investigating Officers. Details of this guidance can be found at:

¹ Given the tight timelines for entering the Foundation Programme advice should be sought as early as possible before applying for registration.

<http://www.hyms.ac.uk/about-us/regulations-policies-and-codes-of-practice/codes-of-practice>

Programme:

means any academic activity, and/or clinical placement or experience, undertaken by a student for the purpose of achieving the award of credits, a certificate, diploma or degree, or for the purpose of achieving progression within training and meeting requirements for registration as a doctor with the General Medical Council, as prescribed in the relevant regulations, or any other HYMS approved programme incorporating a practice/clinical placement component.

Supporter:

means a fellow student, Students' Union representative or member of HYMS staff who may assist the student with their case. Legal representation is not permitted.

Abbreviations

GMC	General Medical Council
HJSC	HYMS Joint Senate Committee
HYMS	Hull York Medical School
MB BS	Bachelor of Medicine, Bachelor of Surgery
PA	Physician Associate
QAA	Quality Assurance Agency
SFtP Committee	HYMS Student Fitness to Practise Committee

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1. Scope of the Code of Practice on Fitness to Practise Medicine

- 1.1. This Code applies to both prospective students (applicants) as well as those registered on all HYMS programmes which lead to professional registration. For the purposes of this Code all categories will be referred to throughout as 'students'.
- 1.2. As stated by the General Medical Council (2016), all medical schools are required to have in place robust and consistent mechanisms to ensure that all graduates applying for registration with a license to practice are fit to practise medicine. Similarly, other professional bodies require appropriate governance arrangements to be clear and explicit in relation to the students' fitness to practise.
- 1.3. The support and welfare of all HYMS students is important. However the safety of patients is of paramount importance to the HYMS Student Fitness to Practise (SFtP) Committee.
- 1.4. The (SFtP) Committee is concerned with matters relating to conduct, behaviour, attitudes and values as well as issues relating to the health of students where these may impact on patient care or safety.
- 1.5. HYMS recognises its role in supporting all students to acquire professional standards of behaviour and conduct. Advice and sources of information indicating appropriate conduct for an undergraduate medical student can be found in documents from the General Medical Council and the Medical Schools Council. Advice and guidance for all other programmes is shared with students via their respective Programme Handbooks.
- 1.6. The requirements set out by the General Medical Council for medical students are fulfilled by the HYMS (SFtP) Committee.

2. Critical Incidents

- 2.1. For the purposes of this Code of Practice, a critical incident is defined as an extraordinary and unpredicted event giving rise to, or likely to result in, harm, either involving a HYMS student, or resulting from the action of a HYMS student. The Secretary of the Student Fitness to Practise Committee should be notified immediately of any such critical incident so that it may be recorded accurately.
- 2.2. In the event that such an incident has implications for the safety of patients, staff, or students, power is deputed to the Dean of HYMS, in consultation with the Chair of the Student Fitness to Practise Committee (or their authorised deputies), to order a temporary suspension or limitation placed upon the continuation of studies and/or clinical attachment of the involved student or students.
- 2.3. The power to lift the suspension resides with the Dean of HYMS, in consultation with the Chair of the Student Fitness to Practise Committee (or their authorised deputies). Any suspension so imposed should be for no longer than is necessary to obtain reassurance about the safety of patients, staff, or students. HYMS will seek such reassurance actively.

3. General Principles

- 3.1. The guiding principle underpinning the HYMS approach to Student Fitness to Practise is that the School is explicit to all students and staff that escalation to the HYMS Student Fitness to Practise Committee is for serious and/or persistent concerns and is directly related to the safety of patients, colleagues, peers, and the general public. A student case is normally only escalated to the HYMS Student Fitness to Practise Committee after that student case has been thoroughly scrutinised and investigated. However, for very serious and/or urgent cases, the Case Management Group will have the power to refer a case directly to the Student Fitness to Practise Committee who will then have the responsibility to appoint an Investigating Officer.
- 3.2. Medical and Physician Associate students have certain privileges and responsibilities different from those of other students. Because of this, different standards of professional behaviour are expected of them. HYMS takes seriously its responsibility to ensure that all students on programmes leading to professional registration have opportunities throughout their programme to learn and practise the standards expected of them.
- 3.3. When fitness to practise concerns are identified, HYMS will investigate these as appropriate in accordance with this Code but at the same time offer support via the network of guidance provided from the HYMS Student Support Office and the host Universities.
- 3.4. Students must be aware that their behaviour outside the clinical environment, including in their personal lives may have an impact on their fitness to practise. Their behaviour at all times must justify the trust the public places in their respective professions²
- 3.5. HYMS is mindful of supporting students with disabilities/ impairments/ health conditions balanced with the need to ensure clinical competency and patient safety.

4. Distinction between different levels of concerns

- 4.1. Decisions about the behaviour or health of students must be considered on a case-by-case basis, and should be based on whether the behaviour or health calls into question either the student's ability to continue on a medical programme, or their fitness to practise after graduation.
- 4.2. The distinction between different levels of concerns must also take into account proportionality, severity of the behaviour, pattern of occurrence and potential implications for public and patient safety, and confidence and trust in the profession. It is not practical to produce an exhaustive list of low levels concerns and/or those of a more serious concern and crucially the behaviours of a student must be considered on a case-by-case basis.
- 4.3. The referral process to the HYMS SFtP Committee is designed to ensure that students have the opportunity to obtain support and guidance before a matter becomes a fitness to practise concern, particularly through the active monitoring of the student experience

² Specific examples for medical students are provided in GMC (2016) Professional behaviour and fitness to practise Web : <http://www.gmc-uk.org/education/undergraduate/studentftp.asp>

through a case review approach via the HYMS Case Management Group. In cases where a very serious concern is raised, the Case Management Group has the opportunity for direct referral to the HYMS Student Fitness to Practise Committee for investigation.

- 4.4. The threshold for referral to SFtP Committee is when the behaviour, conduct or health of a student raises a serious or persistent cause for concern. This includes but is not limited to the possibility that the student could put patients or the public at risk, or damage the trust in the profession.
- 4.5. Illustrative examples of threshold of SFtP³:
 - 4.5.1. Behaviour which has harmed patients or puts patients at risk of harm;
 - 4.5.2. Deliberate or reckless disregard of professional and clinical responsibilities towards patients or colleagues;
 - 4.5.3. Student's health or impairment compromising patient safety;
 - 4.5.4. Student abuse of patient's trust or violation of patient autonomy or other fundamental rights;
 - 4.5.5. Behaviour which is dishonest, fraudulent or in any way designed to mislead or harm others.

5. Health Problems and Medical Evidence⁴

- 5.1. It may be necessary for HYMS to use this fitness to practise procedure to consider serious health problems, especially where such conditions have implications for the safety of patients, colleagues and the student themselves.
- 5.2. In the case of a disclosure which points to the possibility of an underlying illness, the student should receive an urgent referral to the Occupational Health Service for initial assessment. Referral should indicate the behaviour or event giving rise to the disclosure. An initial response from the Occupational Health Service (OHS) should normally be received within three working days, and should indicate:
 - 5.2.1. whether the student is suffering from an illness requiring treatment;
 - 5.2.2. whether there is any case for immediate suspension or limitation of studies;
 - 5.2.3. that proper arrangements for further treatment have been made and the student's own doctor has been informed;
 - 5.2.4. any other matters which the Occupational Health Service would wish to bring to the attention of the HYMS Case Management Group.

³ More detailed illustrations are provided in GMC (2016) Professional behaviour and Fitness to Practise and GMC Achieving Good Medical Practice. The outcome in all cases will depend on particular circumstances

⁴ See also GMC Gateways to the Professions: advising medical schools: encouraging disabled students (2014).

- 5.3. In cases where there is prior knowledge of the medical condition, or cases requiring specialist assessment, it may be appropriate to refer the student to a practitioner or service other than the Occupational Health Service.

6. School Procedures to deal with Student Fitness to Practise Medicine

- 6.1. There is a single route for referral to the HYMS Student Fitness to Practise Committee.
- 6.2. Any member of staff or student who has any concerns about any aspect of a HYMS students' profile should ensure that the Phase Lead/Programme Director is notified of any such concerns. These matters will normally where possible be dealt with as part of the on-going business of programme delivery and management.

Where this is not possible:

- 6.2.1. The Phase Lead/Programme Director will bring the details of the case to the attention of the Case Management Group. The matter will then be considered in detail and in the context of the overall student profile.
- 6.2.2. The Case Management Group will have available to it a number of referral routes to consider, including : Occupational Health, Student Support (academic and/or pastoral), an investigation to gather factual information, and thereafter a referral to the Student Fitness to Practise Committee where this is considered necessary or where a concern is considered to be more serious in nature, direct referral to the Student Fitness to Practise Committee
- 6.2.3. The Case Management Group in some circumstances where a student's behaviour or pattern of behaviour departs significantly from the expected standards but does not reach the threshold for referral to fitness to practise procedures, can issue a Caution to the student.
- 6.2.4. Where it is decided that an investigation is required, the Case Management Group/Student Fitness to Practise Committee will appoint an appropriate Investigating Officer from the available pool of trained colleagues. This investigation will be undertaken in a timely manner and in accordance with the HYMS Guidance Notes for Investigating Officers. The completed Investigators report will be submitted to the Case Management Group/Student Fitness to Practise Committee who will carefully consider whether there is a need for further action/escalation.
- 6.3. If and when an Investigating Report has been escalated to the HYMS Student Fitness to Practise Committee, each case will be dealt with on an individual basis by that Committee. Following careful consideration of the Investigating Officer report, the Student Fitness to Practise Committee may make the following recommendations:
- 6.3.1. That no action is required;
- 6.3.2. That remedial support or therapeutic action be implemented;
- 6.3.3. That additional monitoring, supervision or appraisal is arranged;
- 6.3.4. Where there are concerns of a more serious nature, the Committee

will decide that a Fitness to Practise Panel Hearing is required.

7. Formal hearing by a Fitness to Practise Panel

7.1. If the Student Fitness to Practise Committee has decided that there is a case to proceed, the Secretary of the Committee will:

- 7.1.1. Inform the student within 5 working days of the decision to hold a Hearing;
- 7.1.2. Set dates for a Formal Fitness to Practise Hearing of the case by a Fitness to Practise Panel. This must be at least 21 days later, to allow the student at least 15 days to prepare a case, and submit any supporting information for that case in advance of the Hearing for circulation to members of the Panel;
- 7.1.3. Appoint a secretary for the Hearing, who will be responsible for taking formal minutes and ensuring their safe keeping under the terms of clause 9.2;⁵
- 7.1.4. Inform the student of the date, time, place, and conditions surrounding the student's attendance and of their entitlement to bring a supporter to the hearing. The supporter may be a student, member of staff or Students/Graduate Union representative from the University of Hull or the University of York. Legal representation is not permitted. The student should confirm to the Secretary of the Panel the identity of the supporter at least one week before the date of the Hearing;
- 7.1.5. Inform the student of any change to any conditions in relation to suspension or limitation placed at the beginning of the formal investigation;
- 7.1.6. Ensure that all documents circulated to members of the Student Fitness to Practise Panel are also circulated to the student;
- 7.1.7. Ensure that any HYMS staff who may have relevant information to the case, and any other person(s) who may be able to provide expert advice on specific aspects of the case are notified of the Hearing.

8. Fitness to Practise Panel Hearing

8.1. The Chair of the Fitness to Practise Panel (normally the Chair of the HYMS Student Fitness to Practise Committee) bears responsibility to ensure that the proceedings are fair; this includes proceedings where the student is not in attendance. Hearings are normally held in private but the student may request a public Hearing.

The Chair will:

- 8.1.1. Conduct introductions and explain the purpose and functions of the Hearing and any staff present;
- 8.1.2. Confirm that all documents circulated to members of the Student Fitness to Practise Panel have also been circulated to the student;

⁵ This may include an audio recording of the proceedings. If a Panel Hearing is recorded either at the request of the Panel and/or the student, this record will form part of the formal record and is subject to the same safe keeping as outlined in Clause 9.2

- 8.1.3. Invite the student, the investigating officer, and any members of staff who have information relevant to the case, to join the meeting. As noted above in 7.1.4 the student may be accompanied by a supporter of their own choosing, who may speak at the discretion of the Chair of the Fitness to Practise Panel. The supporter may be a student, member of staff or Students/Graduate Union representative from the University of Hull or the University of York. Legal representation is not permitted.
- 8.1.4. Ensure that, if the student is not in attendance, the Panel satisfies itself that all reasonable attempts have been made to inform the student of the Hearing, that the student has been given adequate opportunity to attend and that, as far as can reasonably be ascertained, the student has declined to attend. Once the Panel has been satisfied on these points, the Hearing may proceed in the student's absence.
- 8.1.5. Explain the powers of the Student Fitness to Practise Panel;
- 8.1.6. Invite the investigating officer, and any other staff required to attend, to make statements, allowing members of the Panel to ask questions after each statement;
- 8.1.7. Invite the student, and if applicable, the student's supporter, to make a statement in their own words, and allow members of the Panel to ask questions of the student;
- 8.1.8. Invite any other person(s) who may be able to provide expert advice on specific aspects of the case to make a brief statement, allowing members of the Panel to ask questions after each statement;
- 8.1.9. Once satisfied that all parties have had a full opportunity to make statements and ask questions, invite all but the members of the Student Fitness to Practise Panel to withdraw but remain in waiting;
- 8.1.10. Chair discussion of the case, if necessary seeking clarification by recall of all parties;
- 8.1.11. Advise all parties when they can disperse;
- 8.1.12. Confirm the recommendation of the Fitness to Practise Panel, along with any findings of fact, to the student in writing as soon as reasonably practicable and normally within five working days of the decision being reached;
- 8.1.13. Formally notify the Chair of the Student Fitness to Practise Committee and the Chair of HYMS Board of Studies of the outcome of the Hearing.

9. Composition of the Fitness to Practise Panel

- 9.1. Fitness to Practise Panels shall comprise no fewer than three and no more than five members.
- 9.2. The membership shall be drawn from the membership of the HYMS Student Fitness to Practise Committee and a list of panellists approved by the HYMS Student Fitness to Practise Committee.

- 9.3. No Panel member shall be a current tutor, mentor, or supervisor of the student under consideration.
- 9.4. Panels will normally be chaired by the Chair or Deputy Chair of the HYMS Student Fitness to Practise Committee.
- 9.5. Panels shall include at least one medical professional registered with the GMC, (or other relevant professional body depending on the nature of the HYMS Programme) and normally one lay/independent member.
- 9.6. All panel members must have received appropriate training.

10. Powers of the Fitness to Practise Panel

- 10.1. The Student Fitness to Practise Panel may, following consideration of the case, and in the interest of safeguarding patient safety in the short and long term, recommend to the HYMS Board of Studies:
 - 10.1.1. That the student be permitted to continue the programme of study. Stipulation of any special supervision must accompany such a recommendation.
 - 10.1.2. That a Warning(s) may be issued to the student.
 - 10.1.3. That sanction(s) or condition(s) may be imposed upon the student as part of their programme of studies.
 - 10.1.4. That the student be suspended from the programme for a specified period up to one year. Stipulation of conditions of readmission must accompany such a recommendation.
 - 10.1.5. That the student undertakes a defined piece of academic work, for example a reflective assignment. Stipulation of conditions of outcome to allow progression following such a directed piece of work must accompany such a recommendation.
 - 10.1.6. That the student's programme of study is terminated. Such a recommendation must include the opinion of the Panel on whether any restriction should be placed upon future registration in a health professional programme within either the University of Hull or the University of York. It may also be necessary in exceptional cases to consider notification to the national excluded student database managed by the Medical Schools Council (currently this database is only applicable to medical students).

11. Appeals

- 11.1. When the HYMS Board of Studies has confirmed the outcome of a Student Fitness to Practise hearing, the student concerned may appeal against the decision in accordance with the terms of the HYMS Code of Practice on Academic and Fitness to Practise Appeals: <http://www.hyms.ac.uk/about-us/regulations-policies-and-codes-of-practice>

12. Privacy, Confidentiality and Data Protection

- 12.1. Records created under this Code of Practice will be kept securely at all times. Decisions and a record of the outcome will be held as part of the student record and record of the relevant committee, but supporting case notes and other documentation generated as part of the process will normally only be held for six years from the student's completion of their foundation programme/programme of study
- 12.2. Information created under this Code of Practice will normally be treated as confidential. However, where it is necessary to discharge the processes and procedures of this Code of Practice or the outcomes of its implementation or in the case of appeals, appropriate information may be disclosed to HYMS staff or members of the University of Hull or the University of York or the NHS. Additionally, in the interests of public safety, information pertinent to an individual's fitness to practise may be shared with training providers, employers or professional regulatory organisations.
- 12.3. Any Fitness to Practise Investigation and Hearing will be treated with the highest level of confidentiality that can be maintained. HYMS, the Universities of Hull and York and any other relevant body (e.g. Foundation School) will only disclose confidential information relating to any student to members of staff who are directly involved in the administration and consideration of the concern, and as necessary to allow an open and fair investigation and for the outcome of the investigation to be reported appropriately. This is in order both to protect the privacy of the student and to protect members of staff from unsubstantiated public allegations.
- 12.4. Depending on the nature of the matter, the information gathered may include third party data, opinion and information which was provided in confidence. This information needs to be handled consistently and fairly and in accordance with common data protection principles, making it clear to all parties that the sharing of this information is agreed for the purposes of reaching an informed and fair decision.

Appendix One: Code of Practice on Fitness to Practise Process

This Appendix is part of the HYMS Code of Practice on Student Fitness to Practise . It outlines the process in six stages.

