

FITNESS TO PRACTISE/STUDY PROCEDURE

Approved by Senate in June 2024

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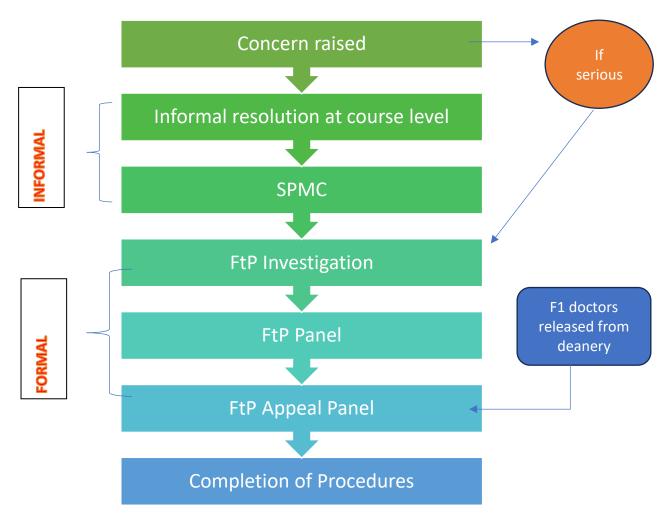


Figure 1. Fitness to Practise/Study Procedure





1. Introduction and scope

- 1.1 St George's, University of London (SGUL) has a particular responsibility in respect of students who will graduate with academic awards which also confer the right to apply for professional qualifications and registration with a professional body. Because of their responsibilities to the general public, students following such programmes should demonstrate high standards of conduct and behaviour and must be physically and mentally fit to undertake the demands of their profession.
- 1.2 The scope of this procedure is limited to students enrolled on programmes of studies that require them to undertake a period of clinical and/or professional experience and which lead to eligibility to apply for Registration with a Registration Body. Such programmes of study will either require Registration with a Registration Body or will lead to eligibility to apply for Registration with a Registration Body.
- 1.3 The University will be guided by the professional standards and guidance on health matters provided by relevant professional bodies and by its statutory duties under the Equality Act 2010, Human Rights Act 1998, Health and Safety at Work Act 1974 and the Data Protection Act 2018.
- 1.4 The University may determine, following advice from the Governance, Legal, and Assurance Services (GLAS) team, to take on the role of "reporting party" and lodge a complaint with a Registration Body regarding a student who is already a full Registrant with a Registration Body.
- 1.5 Under the Medical Act (1983), SGUL is responsible for the education and training of doctors up to full registration, including both the undergraduate and foundation stages of education and training (F1 and F2). The Act also places a duty upon medical schools to ensure that those who graduate from undergraduate programmes and who subsequently complete their F1 training are fit to practise. https://www.gmc-uk.org/-/media/documents/medical-act-1983 pdf-73285575.pdf
- 1.6 In this procedure, any named officer may delegate their responsibilities to another member of SGUL staff; similarly, the procedure shall not be invalidated by an officer of SGUL acting in the place of another named in these regulations where circumstances make this expedient.
- 1.7 This procedure is prescribed by Council and Senate in accordance with paragraph 4.15 of the General Regulations for Students and Programmes of Study.

Guidance documents from relevant Professional Bodies

1.8 The General Medical Council (GMC) issued guidance, 'Achieving good medical practice: guidance for medical students') and 'Professional behaviour and fitness to practise: guidance for medical schools and their students'. The guidance for students sets out how the principles and values of



the GMC's core guidance for doctors, 'Good Medical Practice' apply to medical students and should be read in conjunction with the guidance for medical schools and their students, which details the expected standards of professional behaviour.

https://www.gmc-uk.org/education/standards-guidance-and-curricula/guidance/student-professionalism-and-ftp/achieving-good-medical-practice
Student professionalism and FTP - GMC (gmc-uk.org)

- 1.9 For professions regulated by the Health and Care Professions Council (HCPC) and the Nursing and Midwifery Council (NMC), St. George's will consider the guidance of the HCPC and NMC when advising students and making decisions about how issues of conduct and/or changes in the health of a student will be addressed during their studies. The HCPC guidance "Guidance on Conduct and Ethics for Students" and "Guidance on Heath and Character" can be accessed at: Standards of conduct, performance and ethics | (hcpc-uk.org) The NMC "The Code for Nurses and Midwives" can be accessed at: http://www.nmc.org.uk/standards/code/
- 1.10 For Occupational Therapy students, the Professional standards for occupational therapy practise and the code of ethics and professional conduct published by the Royal College of Occupational Therapists (RCOT) applies. These publications can be accessed at:

https://www.rcot.co.uk/practice-resources/rcot-publications/downloads/rcot-standards-and-ethics

- 1.11 For Physiotherapy students, the Standards of proficiency and 'Code of members professional values and behaviour' can be found here: Physiotherapists | (hcpc-uk.org)
- 1.12 For Healthcare Science (Physiological Sciences) students, please visit the Academy for Healthcare Science: Home-The Academy For Healthcare Science (ahcs.ac.uk)
- 1.13 For students on Masters' in Physician Associate Studies, please visit the Royal College of Physicians website: Faculty of Physician Associates quality health care across the NHS (fparcp.co.uk)

The Office of the Independent Adjudicator

1.14 The Office of the Independent Adjudicator for Higher Education (OIA) runs an independent scheme to review student complaints. SGUL is a member of this scheme. Students who are unhappy with the outcome may be able to ask the OIA to review their case. Students can find more information about making a complaint to the OIA, what it can and cannot look at and what it can do to put things right here: https://www.oiahe.org.uk/students. Normally, students need to follow the process set out in this procedure before they complain to the OIA. SGUL will send a letter called a "Completion of Procedures (COP) Letter" when students have reached the end of the fitness to practise processes and there are no further steps they can take internally. Students can find more information about COP Letters and when they should the complete of the students of the fitness to practise processes.



expect to receive one here: https://www.oiahe.org.uk/providers/completion-of-procedures-letters. It is expected that students, their representatives and staff act reasonably and fairly towards each other and treat this process with respect. A failure to respect this process may result in a separate disciplinary/fitness to practise investigation.

Support Services

- 1.15 Support is available from a variety of services on campus. These include:
 - > StudyPlus appointments (the Academic Success Centre): https://www.sgul.ac.uk/for-students/your-academic-life/learning-development-and-studyplus
 - Students' Union: https://www.sgul.ac.uk/for-students/students-union
 Students subject to this procedure may wish to obtain guidance and support from the President or Vice-President (Education and Welfare) of the Students' Union
 - Personal tutor(s)
 - Disability Service: https://www.sgul.ac.uk/for-students/student-support/disability-service
 - University's Counselling Service: https://www.sgul.ac.uk/for-students/student-support/health-and-wellbeing/mental-health/counselling-service. who can provide comprehensive and confidential support to anyone experiencing difficult circumstances (counselling@sgul.ac.uk):
 - Occupational Health: https://www.sgul.ac.uk/for-students/student-support/health-and-wellbeing/occupational-health

Third Party requests

1.16 Students are advised to respond to all communication from the University (verbal and written) directly and not normally through a third party except in exceptional circumstances where diagnosed disability reasonably prevents them from being able to do so.

Reasonable adjustments

1.17 Reasonable adjustments to the processes within these procedures, including the extending of deadlines for student responses, may be made upon the production of relevant third-party evidence by the student which demonstrates the need for those adjustments. Students who believe they may require reasonable adjustments due to disability/long-term condition/accessibility needs should also contact the <u>Disability Service</u> for additional support.

Procedural exemptions

1.18 In exceptional circumstances it may be appropriate to amend this procedure, for example, where strict application of this would result in substantial unfairness to the student, or the student is in



some way at risk because of health or disability. Such cases will be rare, and each will be treated on their own merits. The decision will need approval from SPMC.

2 Confidentiality and General Data Protection Regulations

- 2.1 In fitness to practise matters, the University limits access to sensitive personal information to those who require it to enable the student's professional behaviour to be established and/or who need it to support the student. The University collects and processes a variety of personal data in order to fulfil relevant student regulations and policies (see the Regulations web page for a list of all Student Regulations). This personal data may be provided by the student or collected from other departments within the University or taken from publicly available sources such as social media. The University processes personal data for this purpose in its legitimate interests. Some Regulations will require the sharing of sensitive personal data (defined as "special category" data by data protection legislation). The University processes and shares special category data in the substantial public interest and only where it is necessary to enable the University to fulfil its duties of care to the student, other students, or to safeguard third parties. More detail on the types of data collected and how it is used to meet this need can be found in the Student Privacy Notice.
- 2.2 For students who are undertaking Regulated Activity¹ within the health and social care sector (including with charitable organisations), either because they are employed to do so, or because they are undertaking a placement, the University will share essential personal and sensitive data with the employing organisation or placement provider when required.

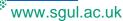
3 Burden of proof

3.1 In fitness to practise matters, it is for the University to show that the student breached SGUL's requirements for professional behaviour. The burden of proof switches to the student at the appeal stage.

4 Standard of proof

- 4.1 The standard of proof applied is that of the balance of probability; that on the evidence put forward, it is more likely than not that something was or was not the case.
- 4.2 The standard of proof remains constant; it does not operate on a sliding scale.

¹ In the context of work with children and vulnerable adults, Regulated Activity is 'work that a barred person must not do'. See "Regulated Activity in relation to Children: scope. Factual note by HM Government Safeguarding"



4.3 The standard of proof does not change based on the seriousness of the allegation/s, potential consequences, or mitigating/aggravating circumstances.

5 Reconsideration of allegations

- 5.1 It may be appropriate for the University to reconsider an allegation if new evidence emerges which, for good reason, could not have been obtained at the time. In deciding whether it is appropriate to consider an allegation for a second time, the University will consider:
 - (i) whether the outcome of the first process has been called into question, and if so why;
 - (ii) the strength and reliability of the evidence;
 - (iii) the length of time that has elapsed and the effect of this on the reliability of any evidence to be considered;
 - (iv) the severity of the alleged offence;
 - (v) the impact on the student;
 - (vi) whether leaving the matter unaddressed would impact on matters of fitness to practise, or on any obligations to professional or regulatory bodies in respect of the student's character.
- 5.2 The decision to reconsider an allegation would be taken as soon as possible after the emergence of the new evidence, and no later than 15 University working days from the emergence of this new evidence.
- 5.3 Reconsideration of an allegation will only take place in exceptional circumstances and following approval from the University President/Vice-Chancellor.

6 Referrals from other processes

6.1 If allegations of academic misconduct or disciplinary offences are raised during consideration under SGUL's relevant procedure and/or, information or evidence raises questions about students' fitness to practise, those issues may be referred for consideration under this procedure.

7 Criminal Convictions

- 7.1 If during their studies at SGUL, students are accused of, charged or convicted with an offence or become the subject of a police investigation, they must declare this immediately to the university by emailing the SCC Team, scc@sgul.ac.uk.
- 7.2 The case will be considered by a DBS Panel, in accordance with the <u>PROCESS FOR CHECKING</u> CRIMINAL RECORDS AND DISCLOSURE & BARRING STATUS OF APPLICANTS AND STUDENTS
- 7.3 Failure to promptly declare this to the University will likely result in formal fitness to practise proceedings.

www.sgul.ac.uk

8 Aim of this procedure

8.1 The primary objective of this procedure is to ensure the safety of students, their peers, and the public. It also aims to uphold the public's trust in the relevant profession and the University. Throughout the process, the University acknowledges the importance of providing support to students, even if the conclusion determines that they cannot proceed with their studies. The primary objective is not to penalise students.

9 Definition of professional behaviour

- 9.1 The University requires that students on programmes which include a placement in a clinical or professional setting and either require or lead to eligibility to apply for Registration by a Registration body, always behave in a manner that:
 - (i) conforms to the relevant code of professional conduct or practise, including the Registration Body's requirements with respect to the use of social media, including social media forums that are not public; and
 - (ii) is consistent with the behaviour required by the relevant profession and by the employers of such professional staff; and
 - (iii) does not jeopardise or put at risk the welfare, wellbeing, or safety of either themselves and/or others.

Together, items (i), (ii) and (iii) above constitute the University's definition of professional behaviour for the purpose of this procedure. Concerns in relation to a student's professional behaviour (refer to Appendix 1) will likely trigger the fitness to practise process.

9.2 Fitness to practise is generally accepted to mean that a registrant has the skills, knowledge, character and health to practise safely and effectively. Impaired fitness to practise means more than a suggestion that a registrant has done something wrong. It means a concern about their conduct, competence, health or character which is serious enough to suggest that the registrant is unfit to practise without restriction, or at all.

10 Initial (informal) stage

Consideration of fitness to study or practise concerns

- 10.1 A report of any concern regarding a student's fitness to study or practise shall be made to the relevant Course Director and/or the Student Conduct and Compliance Team (SCC). Reports which are raised anonymously would not normally be considered.
- 10.2 Unless the concern is serious, the Course Director or relevant staff member may first seek to resolve the matter informally and shall normally speak to the student and may also request the



student (where appropriate) seeks the advice of the Occupational Health (OH) Department. The matter may also be considered by the informal fitness to practise committee, the Student Progress Monitoring Committee (SPMC)

- 10.3 Informal resolution of the matter shall include actions agreed with the student such as:
 - (i) provision of additional support, assistance, or advice (internal and/or external to SGUL)
 - (ii) referral to OH
 - (iii) undertaking further training/educational activities
 - (iv) interrupting studies
 - (v) a formal undertaking by the student

The student should be informed in writing of the agreed outcome of the informal stage of this procedure, and they will be requested to confirm in writing within 10 days of the date of the letter that they have agreed with this outcome. The letter should state who within or outside the institution will be informed of the case. If written confirmation is not received from the student within 10 days of the date of the letter detailing the agreed outcome, then it is deemed that the matter has not been resolved informally and secondary (formal) stage procedures will normally be initiated by the SCC Team.

10.4 If the relevant Course Director/staff reports that the matter has not been resolved informally by agreement with the student and/or is sufficiently serious to warrant the initiation of formal procedures, the SCC Team shall initiate the formal procedures set out in paragraph 12 below.

Monitoring and advice: The Student Progress Monitoring Committee (SPMC)

- 10.5 SPMC meets termly or when necessary for the following purpose:
 - (i) to monitor the progress and status of students with academic progress or conduct or health concerns, and
 - (ii) to advise Course Director on appropriate next steps for individual cases, and
 - (iii) oversee the progress of any remediation plan as detailed under section 12.5 and 13.13.
- 10.6 Outcomes available to the SPMC:
 - (i) that the matter should be dealt with informally at programme level, including advice on additional steps to be taken by the Course team, or
 - (ii) that the matter shall be referred to a formal Fitness to practise investigation as per section 12.
- 10.7 SPMC can also recommend that precautionary measures be imposed as detailed in section 11.
- 10.8 SPMC shall consist of:



- (i) The Dean of Student Conduct and Compliance (Chair).
- (ii) The Head of Student Conduct and Compliance
- (iii) The Dean for Student Welfare and Support
- (iv) The relevant Programme Lead* for the student under active consideration (only present for discussion of student/s under their oversight)
- (v) A staff member with no prior involvement with the case

Optional members that may be called if relevant:

- A Psychiatrist
- A representative from Occupational Health
- Any other relevant member as deemed appropriate by the Chair.
- 10.9 The SCC team will maintain a Confidential Register of students and Foundation Year 1 doctors with academic progress, conduct or health concerns, and this shall normally be reviewed at each SPMC meeting.
 - * Programme Lead include any relevant academic staff member from the student's course such as Course Director, Associate Dean, Responsible Examiner, Head/Deputy Head of the Graduate School. Multiple Programme leads will typically be present at any individual SPMC meeting reflecting the cases for discussion.

11 Precautionary measures (including suspension of study)

- 11.1 If serious concerns/allegations arise about a student's behaviour, following a risk assessment, the student may be provisionally suspended and/or be withdrawn from placement pending investigation. Suspension is a neutral act and not a disciplinary measure. It is a precautionary measure that allows for an investigation to be carried out without the student being present in the University. Circumstances where a student may be provisionally suspended may include but are not limited to:
 - (i) When the presence of the student is not in the best interest of patients, the University or other students or staff employed by SGUL. Alternatively, it may not be in the best interest of the student concerned;
 - (ii) Criminal charges have been brought against the student or there is evidence of suspected criminal activity which may affect the student's performance or suitability for continued enrolment on a programme of study;
 - (iii) When a student is subject to a fitness to practise or disciplinary investigation by a third party;
 - (iv) When a student's health is impacting their judgement and ability to study effectively or their interactions with patients, colleagues, or fellow students.

The suspension will be reviewed at regular intervals.



- 11.2 The university reserves the right to impose other precautionary measures, such as no contact orders, service restrictions or restriction of access to certain parts of the campus. Decisions on which measures to impose will be taken based on the need to manage risk and protect the integrity of any subsequent investigation.
- 11.3 The student has the right to make representations in relation to the imposition of precautionary measures within 5 University working days of being notified of the measures. This must be done in writing to the Academic Registrar by emailing scc@sgul.ac.uk.
- 11.4 A student may appeal against the imposition of precautionary measures by writing to the Chief Operating Officer via scc@sgul.ac.uk, providing evidence that one or more of the following grounds applies in their case:
 - (i) that in imposing the precautionary measures the University failed to follow its regulations and/or procedures or failed to follow them with due care;
 - (ii) that the University has shown bias or prejudice towards the student in the way that it has sought to impose the measures;
 - (iii) that the measures are excessive;
 - (iv) that the student does not pose a risk to themselves and/or third parties and/or University property;
 - (v) that relevant new evidence has become available that should be considered;
 - (vi) that the decision of the University was unreasonable and/or not proportionate in the circumstances.
- 11.5 Guidance for students on a suspension can be found here.
- 11.6 Staff guidance on implementation of suspensions can be found here.

12 Second (formal) stage

Investigation

- 12.1 Serious concerns regarding a student's progress, conduct, or health shall be formally reported to the SCC Team who will appoint an independent Investigating Officer/s (IO) to investigate the case under these procedures. When conducting the investigation, the IOs shall refer to the IO protocol.
- 12.2 The IO must act in a proportionate way by weighing the interests of patients and/or public against those of the student.

Information provided to students



- 12. 3 When formal fitness to practise proceedings are initiated, the student must be informed of the following:
 - (i) Specific nature of the allegation/s considered;
 - (ii) Clear link to any potential policy/procedure breach, including potential breaches of the relevant professional body guidance;
 - (iii) Invitation to attend a meeting with the IO and/or provide a written statement and any supporting evidence;
 - (iv) the procedure to be followed in the consideration of their case, including any potential outcomes:
 - (v) support available;
 - (vi) that they can be accompanied by a friend, family member, or an official of the Students' Union during any related meetings;
 - (vii) if additional allegations are made during the investigation process the student is informed of these and given the opportunity to respond before a finding is made.

Outcomes available

- 12.4 The investigation shall normally be concluded within 30 University working days, except in complex cases where it may take longer. The student will be kept updated about any delays to the investigation.
- 12.5 The IO has the authority to reach the following outcomes:
 - (i) Outcome 1: That there is no case to answer and thus, no further action necessary.
 - (ii) Outcome 2: That there is a case to answer, but it can be resolved by remediation (refer to Appendix 2) and/or provision of additional support. Outcomes that are open to the IO include but are not limited to:
 - a. That the student receives a warning
 - b. That the student submits a reflection
 - c. That the student is required to complete an educational activity
 - d. That the student is required to offer an apology
 - e. That the student is required not to contact other individuals either directly or indirectly.
 - f. Any other remediating action deemed appropriate.

When determining any remediating action, the IO should follow the guidance provided in Appendix 2.

- (iii) **Outcome 3:** That there is a case to answer and that the case should be referred to a Fitness to Practise Panel because the matter is serious and/or the behaviour is persistent.
- 12.6 If the IO established, on the balance of probabilities that there is a case to answer, the following considerations will be made prior to determining the appropriate outcome (under sections 2 and 3 above):



- (i) Whether the student demonstrated insight. Consider the extent to which the student:
 - a. Accepts that their behaviour fell below professional standards, understands how and why it occurred and its consequences for those affected and potential consequences of this in practise; and
 - b. Can demonstrate that they have taken action to address the failure in a manner which remedies any past harm (where possible) and avoids any future repetition.
- (ii) Whether the student has shown remorse
- (iii) Whether the student demonstrated honesty and integrity during the FtP investigation process
- (iv) Whether the student cooperated and engaged with the process
- (v) Whether this is a first offence or whether there is a previous finding of FtP concerns
- (vi) Whether the student responded positively to any reasonable warnings or concerns about their behaviour prior to the investigation commencing.
- (vii) Whether the conduct was, to any extent, intended or premeditated
- (viii) Any mitigating factors
- (ix) Any aggravating factors
- 12.7 If a student is issued with an Outcome 2 (such as those described in Section 12.4), they have the right to request a review of the IO decision, as per section 14 of this procedure.

13. Fitness to Practise (FtP) Panels

- 13.1 FtP Panels are convened following any of the below:
 - (i) an FtP IO Outcome 3 above (section 12.5)
 - (ii) an investigation under the Academic Integrity Procedure
 - (iii) an investigation under the Student Disciplinary Procedure
- 13.2 FtP Panels are normally convened by the SCC Team on behalf of the Vice-Chancellor/ President and shall act with the authority of Senate and Council.

Membership of a Fitness to Practise Panel

- 13.3 The Panel shall consist of members who have not previously been concerned in the case or have provided pastoral care for the student. All Panel members should receive appropriate training for the role:
 - (i) a member of staff from the pool of trained Chair persons
 - (ii) a member of university staff
 - (iii) a student (from SGUL or another Higher Education Institution)
 - (iv) a registrant of the relevant Registration Body (from St George's or external to the University)
 - 13.4 A member of the SCC Team attends as Facilitator to support the Panel.



13.5 The IO may be invited to present the findings to the Panel as Presenting Officer

Procedure

- 13.6 No less than five University working days before a proposed Fitness to Practise Panel hearing, the SCC Team should write to the student to:
 - (i) confirm the date, time, and place for the meeting;
 - (ii) invite the student to attend the hearing;
 - (iii) provide a copy of the documentation that will be considered by the Panel and of the procedures to be followed by the Panel;
 - (iv) ask the student if they wish to provide any further information/evidence and/or invite witnesses to attend the hearing
 - (v) remind the student that they can seek advice from the Students' Union and that they may be accompanied at the Panel by a friend/supporter/family member;
 - (vi) remind the student of the possible outcomes.

If the student or the Panel require a longer timeframe to prepare, they can request this by emailing scc@sgul.ac.uk.

Attendance of the student at a Fitness to Practise Panel

- 13.7 Where a student notifies the SCC Team in advance of the panel hearing that they will not be able to attend the hearing, and that there are valid reasons, plus supporting evidence, to explain their non-attendance, the SCC Team will endeavour to reschedule the panel hearing. If there are no valid reasons for the student's non-attendance, the panel hearing will proceed in the student's absence.
- 13.8 Where a student has not notified the SCC team that they will not attend the panel hearing and does not attend the panel hearing, it may proceed in the student's absence.

Representation of students in Fitness to Practise hearings, including legal representation

- 13.9 In any Fitness to Practise Panel hearing, a student's friend/family member/supporter may accompany them in a supportive role. They may speak to the student during the hearing and may speak for the student (with their permission) to the Panel. However, it is the normal expectation that the student will answer any questions from the Panel for themselves. The supporting person may also ask questions of the Panel and provide advice or evidence with the permission of the Chair.
- 13.10 The student must inform the University if they intend to be accompanied or bring any witnesses (including the name and role of the individuals) at least 3 working days in advance of the hearing.



13.11 The University's Fitness to Practise procedure <u>is not a legal process</u>. Where a student insists on legal representation in a hearing, the University reserves the right to bring its own legal representation. In these circumstances it may take longer to convene the Panel.

Outcomes of a Fitness to Practise Panel

13.12 The Panel will follow the Hearings by Panel Procedure to make its decisions. It must first determine whether the allegation/s against the student should be dismissed, upheld, or partially upheld.

13.13 After completing the stage described under 13.12, a Fitness to Practise Panel may come to one of three findings:

- (i) that the student has not breached the University's requirements for professional behaviour, that no further action is required and that the matter is concluded;
- (ii) that the student has breached the University's requirements for professional behaviour, but having considered the matter, and taken such advice as the relevant Registration Body has been able to offer, the Panel is satisfied that the breach has already been repaired or can be repaired via completion of a Remediation Action Plan (see Appendix and that once remedied, the breach is unlikely to compromise the student's eligibility to apply for Registration (see paragraph 13.15 below);
- (iii) that the student has breached the University's requirements for professional behaviour and that their programme of study will be terminated as the student cannot continue on a programme that leads to eligibility to apply for Registration.
- 13.14 The findings of a Fitness to Practise Panel take immediate effect.
- 13.15 For outcome (ii), the Panel will produce a Remediation Action Plan which will specify what the student needs to do to repair/resolve the breach and how the completion of the repair/resolve is to be monitored and confirmed. If a Remediation Action Plan to repair/resolve the breach cannot be identified, the student's programme of study will be terminated, as the student cannot continue on a programme that leads to eligibility to apply for Registration.
- 13.16 In determining outcomes (ii) and (iii), the Panel will consider the aspects listed under 12.5.
- 13.17 Formal FtP investigation outcomes and Panel outcomes will be reported to the relevant Registration Body at the time of application for provisional registration or registration.
- 13.18 In the interests of patient and public safety, and to prevent fraudulent applications to courses which lead to entry to a registered profession in the UK, information about medical students who have been through a fitness to study and practise hearing and been found unfit to practise



will be recorded on the GMC/MSC's Excluded Students Database and may be shared between Higher Education institutions. This includes cases where fitness to practise hearings have been held in the student's absence.

- 13.19 The SCC Team will write to the student to inform them of the outcome of the Panel within 5 University working days of the hearing. When writing to the student the Facilitator will emphasise that subsequent decisions by Registration Bodies are made by them independently, and that the Panel's findings in this matter have been made under the University's Regulations, not those of the relevant Registration Body, which may take a different view.
- 13.20 Course Teams are responsible for monitoring students' compliance with any outcomes and satisfactory completion of any action plans set by the Panels/IOs and reporting them into SPMC if required.

14. Grounds for making an appeal

14.1 A student may appeal a fitness to practise finding if one or more of the following can be shown to apply:

- (i) that staff or bodies have failed to follow regulations and/or procedures or have failed to follow them with due care;
- (ii) that staff or bodies have shown bias or prejudice towards the student in the way they have made the relevant decision;
- (iii) that relevant new evidence has become available that should be considered and there are valid reasons why it was not provided earlier;
- (iv) that the decision was unreasonable and/or the outcome was not proportionate in the circumstances.
- 14.2 A student wishing to appeal must do so within 10 days from being informed of the decision. Appeals must be submitted via email to scc@sgul.ac.uk. They should write a short, focused statement setting out the grounds for the appeal (listed in 15.1) and should only include any new evidence that has not been previously presented which supports the written statement.

Review of decisions

14.3 Fitness to Practise Appeal Panels are convened by the SCC Team and conduct their business in accordance with the Procedure for Hearings by Panels which detail how Panels work including, where relevant, the right of a student to attend a hearing and to be accompanied. It is expected that those asked to attend a hearing will acquaint themselves with this procedure.



Membership of a Fitness to Practise Appeal Panel

14.4 The membership of a Fitness to Practise Appeal Panel is the same as detailed under 13.3, but with members that had no prior involvement with the case.

A member of the SCC Team will attend as Facilitator to the Appeal Panel.

Outcomes of a Fitness to Practise Appeal Panel

- 14.5 A Fitness to Practise Appeal Panel may come to one or more of 5 outcomes:
 - (i) that the findings of the Fitness to Practise Panel/IO should be confirmed and the appeal dismissed;
 - (ii) that there has been a failure to follow the University's regulations and/or procedures or to follow them with due care;
 - (iii) that there was bias or prejudice towards the student in the way the Fitness to Practise Panel/ IO reached its findings or in other aspects of the fitness to practise procedure;
 - (iv) that relevant new evidence that was not available to the Fitness to Practise Panel/IO at the time for valid reasons should be considered;
 - (v) that the decision of the Fitness to Practise Panel/IO was unreasonable and/or that the outcome was not proportionate with the evidence presented in the circumstances.

Where the finding is (ii), (iii), (iv) and/or (v), the Fitness to Practise Appeal Panel may:

- substitute the outcome of the IO/FtP panel with its own;
- if necessary direct the matter be reinvestigated by a different IO or heard anew by a differently constituted FtP Panel;
- or, where the unfairness to the student is extreme, nullify the outcome of the previous stage, end the process and, if relevant, reinstate the student.

The Fitness to Practise Appeal Panel will also consider whether there has been any unfair adverse impact on the student and whether the University should provide a remedy.

14.6 Following a hearing by a Fitness to Practise Appeal Panel, the Facilitator conveys the outcome as detailed under 13.19. The Facilitator's letter also states that it constitutes the completion of the University's procedures, and that the student can request a review of the University's decision by the Office of the Independent Adjudicator.

Appeal Stage for F1 doctors.

14.7 A small number of doctors experience significant difficulties during the first year of Foundation Programme training (F1), serious enough to require them to have additional targeted training measures and/or support. A smaller sub-group of doctors experience more fundamental difficulties. This normally necessitates a repeat of the F1 year, or an element thereof which may include additional educational support, supervision, and assessment. Such extensions to F1 training are for a maximum of 12 months. Appeals with respect to a decision to extend the F1 year of training



are not eligible to be considered under this procedure. Such appeals will be heard by the Postgraduate Deanery.

- 14.8 F1 doctors who do not benefit from additional training and whose level of knowledge, skills or professional behaviour continues to preclude full registration with the GMC and consequent confirmation of a licence to practise, may appeal the decision not to award a Certificate of Experience to the University. Such appeals will only be heard after the initial period of F1 training (12 months) has been previously extended by the appointing Postgraduate Deanery.
- An F1 doctor who has been denied a Certificate of Experience, may request to have a Fitness to Practise Appeal Panel be convened, on one or more of the grounds specified in paragraph 14.1 above. The appeal must be submitted via email to scc@sgul.ac.uk within 10 days from being informed of the decision.

Please note that if a Fitness to Practise Appeal Panel is convened to review a Postgraduate Deanery decision, it does **NOT** have the authority to:

- substitute the outcome of the Postgraduate Deanery with its own;
- nullify the outcome of the previous stage

14.10 The F1 doctor is informed of the outcome in writing as per paragraph 14.6.





Appendix 1 Areas of concern

The procedure applies to any behaviours/actions that take place on university premises, during placement, and outside of St George's. The following types of concern could lead to a fitness to practise process (list is not exhaustive):

a. Any criminal conviction, caution or reprimand

(except parking or speeding offences which are subject to fixed penalties)

· Failure to promptly declare any conviction/ caution/ reprimand or to notify us that you became the subject of a police investigation.

b. Drug or alcohol misuse

- · Drunk driving
- · Alcohol consumption that affects clinical work or the work environment
- · Dealing, possessing or misusing drugs even if there are no legal proceedings

c. Aggressive, violent, intimidating, or threatening behaviour

- · Assault
- · Physical violence
- ·Bullying
- · Abuse

d. Persistent inappropriate attitude or behaviour

- · Uncommitted to work
- · Neglect of administrative tasks
- · Poor time management
- · Non-attendance
- · Poor communications skills
- · Failure to accept and follow educational advice

e. Academic misconduct (please refer to the Academic Integrity Procedure)

g. Unprofessional behaviour or attitudes

- · Breach of confidentiality
- · Misleading patients about their care or treatment





- · Culpable involvement in a failure to obtain proper consent from a patient
- · Sexual, racial or other forms of harassment
- · failure to keep appropriate boundaries in

behaviour

- · Persistent rudeness to patients, staff, students or others
- · Unlawful discrimination
- ·Conduct/behaviour which has undermined, or may undermine, public confidence in the profession;

h. Health concerns and insight or management of these concerns

- · Failure to seek medical treatment or other support
- · Refusal to follow medical advice or care plans, including monitoring and reviews, in relation to maintaining fitness to practise.
- · Failure to recognise limits and abilities or lack of insight into health concerns, including refusal to attend an Occupational Health appointment

i. Other concerns

- where repeated concerns of a similar nature have been raised against the student;
- ·the student has demonstrated a lack of insight into their behaviour;
- •the student has failed to engage with an application of either this procedure or any other University regulation, code, policy and/or procedure.
- □ Failing to demonstrate good professional practice;
- · Failure to adhere to a warning, reasonable instruction, or Remediation Action Plan (as set out in <u>Appendix 2</u>)





Appendix 2 Action Plan Checklist

Remediation Plan Checklist for IOs/FtP Panels

*The writing in red is applicable to Panels. The writing in blue is applicable to IOs

1) Has the student breached the University's requirements for professional behaviour? 2) Are you satisfied that the breach(es) can be repaired via completion of a	Yes – Go to Q2 Yes – See below	No – No further action required. Case concluded. No – Refer to Hearing Committee (for IOs) –The student cannot continue. The student's programme of study should be
Remediating Action Plan?		terminated. (For Panels)
3) What corrective action(s)	Provide specific action	ons:
will repair the breach(es)?	Provide specific actions: Examples: Reflection- A sufficiently detailed and balanced perspective of the events that lead to concerns being raised and a reasonable explanation of how the student has used this experience (including relevant measures) to prevent a recurrence Conditions — A condition is imposed when the Panel have significant concern about the student but feel that she or he may respond positively to remedial tuition, health intervention or increased supervision. Conditions should be proportionate, workable and measurable. Conditions may require the student to re-sit a specified part or parts of the course or any other action considered appropriate by the Committee to enable the student's successful completion of the remainder of the course. The student may continue with their course under the supervision of the Student Progress Monitoring Committee. Please see Appendix 3 for examples. Suspension (only available at Panel stage) — This prevents a student from continuing on their programme for a specified time and stops them from graduating at the expected time. This is applied to behaviour that is serious but not serious enough to require expulsion. After the suspension has expired the student may return under the supervision of the Student Progress Monitoring Committee.	
4) Is it feasible for the student to complete the remediating action above? (Consider any factors that could inhibit completion and consider checking with the programme team)	Yes – See below	No – consider alternative remedial action. In the absence of alternative remedial action, return to question 2.

5) How will the remediating action listed repair the breach(es) identified?	
6) How will the effectiveness	
of the completed	
remediating action be	
measured?	
(This should be communicated to	
the student)	
7) Who will be responsible	
for monitoring and	
confirming the completion	
of the remediation action?	
8) What is the deadline for	
-	
completion of the remedial	
action?	
(Please provide multiple deadlines	
where the plan involves multiple	
corrective actions which require chronological completion)	
cinonological completion;	





Appendix 3 Examples of Conditions (list is not exhaustive)

For cases involving drugs and alcohol

Testing

To comply with arrangements made by, or on behalf of, SGUL for the announced or unannounced testing of breath / blood / urine / saliva / hair / nails to test for the recent and long-term ingestion of alcohol and/or other drugs.

For cases related to competence

Personal development plan

To design a personal development plan (PDP), with specific aims to address the deficiencies in the following areas.

• [List areas]

To get my PDP approved by [insert appropriate staff member]

To provide SCC (scc@sgul.ac.uk) a copy of the approved PDP within 10 University working days of the date it is approved and signed by the student and appropriate staff member.

To meet with [appropriate staff member], as required, to discuss my achievements against the aims of my PDP

For cases related to health concerns

Health monitoring and support

To undertake OH referrals as deemed appropriate.

To take an interruption of studies for a defined period

To undertake a psychiatric health assessment if appropriate

To engage with treatment plan/therapy/support services



