

1. Introduction

- 1.1 Any programme of study which has a practice component, which will lead to a professional registration will be governed by a requirement that students demonstrate their 'Fitness to Practise'. Such programmes depend upon the satisfactory completion of theory and practice assessment and course work, and standards of behaviour, health and professional conduct relevant to future employment in the associated profession.
- 1.2 Behaviour, health and /or professional conduct that adversely affect a student's Fitness to Practise, may result in their Professional, Regulatory and /or Statutory Body (PRSB) refusing to record the student's award and entitlement to practice. Faculties determine standards and criteria for students to ensure their fitness for practise. Standards of Education and Standards of Proficiency are published by PRSBs.
- 1.3 This policy identifies procedures to determine outcomes in situations where a student's Fitness to Practise is a cause for concern. The policy has been developed with regard to equal opportunities legislation which ensures that the rights of students are protected and judgments are free from prejudice on the basis of Race, Disability, Gender, Sexual Orientation, Religion and Belief or Age.
- 1.4 The purpose of this document is to outline the standards that need to be met for a student to demonstrate their 'Fitness to Practise', and the action that is to be taken should there be cause for concern.

2. Definition

- 2.1 A student's Fitness to Practise may be challenged when their behaviour, health and/or professional conduct gives cause for concern. In these circumstances, a student should be considered by Fitness to Practise procedures at Faculty level. The University reserves the right to implement its [disciplinary procedures](#) simultaneously.
- 2.2 In accordance with University procedures for academic progression and professional conduct, professional body requirements, and Faculty procedures the University must endeavour to ensure that the behaviour, health and professional conduct of students does not constitute a risk to themselves or others.

3. Duties of Students in Relation to Health

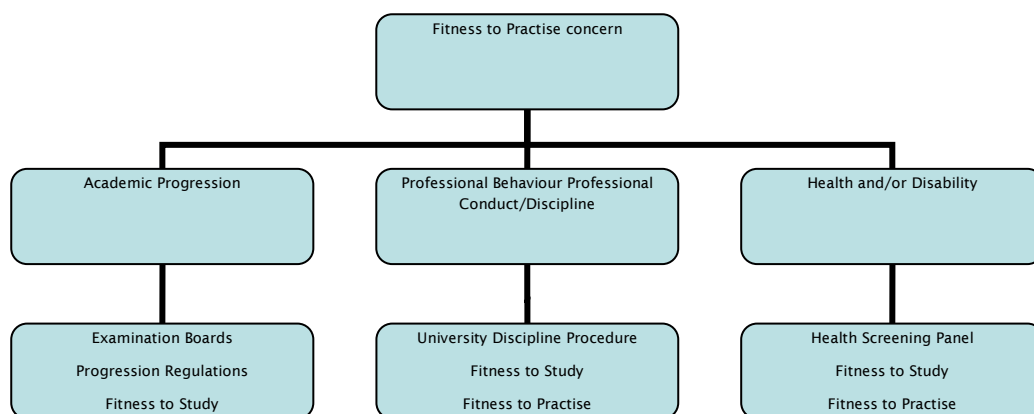
- 3.1 In order to demonstrate that they are fit to practise, students should:
 - a) be aware that their health problem(s) may put themselves or others at risk;
 - b) seek medical or occupational health advice, or both, if there is a concern about their health, including their mental health. Students must register with a GP so that they have access to independent and objective medical care;
 - c) accept that they may not be able to assess their own health accurately, and be willing to be referred for treatment and to engage in any recommended treatment programmes. Students must protect themselves and others by being immunised against common serious communicable diseases if vaccines are available and are recommended by the Department of Health or relevant devolved department;
 - d) not rely on their own or another student's assessment of the risk their health problem(s) poses to themselves or others and should seek advice from a healthcare professional;
 - e) be aware that when they graduate they are responsible for informing their employer or other appropriate person if their health poses a risk to themselves or others and to declare any health problem(s).

For medical students only

- f) be aware that they are not required to perform exposure prone procedures (EPPs) in order to achieve the expectations set out in [Tomorrow's Doctors](#); students with blood-borne viruses (BBVs) can study medicine but they should not perform EPPs; they may have restrictions on their clinical placements; they must complete the recommended health screening before undertaking EPPs; and they must declare their health condition so that their practice is adjusted in light of the declaration made when they graduate.

4. Raising/Reporting Fitness to Practise Concerns

- 4.1 Anyone concerned about the behaviour, health and/or professional conduct of a student has the right to raise their concern. Usually the concern will be taken to the Programme Lead or relevant academic staff member. Faculties will determine the management in accordance with Fitness to Practise procedure.
- 4.2 It is important to investigate all concerns as soon as they arise and to keep clear and accurate records.
- Concerns should be reported, in writing, in the first instance to the relevant academic/personal tutor, relevant Head of Academic Unit/Director of Programmes, Curriculum and Quality Assurance team or directly to the Dean of the Faculty.
 - It is anticipated that external complaints will be routed through the usual placement complaints procedures and the Faculty will be formally notified within 48 hours to enable investigation to commence.
- 4.3 Depending on the nature of the concern, action will be taken using one or more of the three procedures below in accordance with the flow chart in Section 14:



5. Emergency Suspension

- 5.1 The decision to withdraw a student from practice or programme should be determined on a case by case basis, and a risk assessment. This should be a proportionate response to the possible risk to themselves or others.. If the student remains in practice whilst awaiting the outcome of an investigation, conditions of practice may be imposed.
- 5.2 If the identified concern potentially constitutes serious professional misconduct, the student may be suspended from the **programme** by the Dean of Faculty without prejudice and pending further investigation and initiation of the 'Fitness to Practise' procedure.
- 5.3 When a student is withdrawn from practice/programme this will be confirmed to him/her in writing normally within 5 working days. In the case of the former, the Programme Lead will notify the student of the concerns. In the case of the latter, the Dean of Faculty will notify the student of the concerns. The letter will include notification of the allegations against the student/concerns about the student's practice and an outline of the procedures that will be followed by the Faculty.
- 5.4 Whenever the student is withdrawn from practice, the Faculty is required to inform the practice supervisor/educator. The student and the practice supervisors/educator will be advised of this in person or by telephone at the earliest opportunity.

6. Retention of data

- 6.1 All records related to the process, the meeting and any ruling of the Panel will be held on the student's file for a period of 10 years in line with the [Quality Handbook](#) and legal advice.

7. Timescales

- 7.1 The time between initial reporting of the Fitness for Practise concern and the student receiving written details of the outcome will normally be no longer than 30 working days

8. Sharing of outcome

- 8.1 Data Protection Issues

All University staff members are governed by the requirements of the Data Protection Acts 1984 and 1998. Under these acts, all data relating to a person's physical or mental health is regarded as sensitive personal data. The [University's Data Protection Policy](#) contains guidance on the use of sensitive personal data and should be followed in any Fitness to Practise procedures.

8.2 Confidentiality

- a) In all cases where, in the member of staff's judgment, it would be in the student's best interests to disclose sensitive information (e.g. so that appropriate support may be provided) the student's informed consent should be obtained where possible. It will be necessary to inform the student why there might be a need to disclose sensitive information, who will have access to this information and the likely consequences of giving or withholding consent (e.g. additional support strategies such as reasonable adjustments including additional examination arrangements). Once consent has been obtained, it is the responsibility of the person passing on the information to ensure compliance with terms agreed with the student.
- b) If the student chooses to withhold consent, this decision should be respected. In this scenario, the implications of non-disclosure in terms of additional support should be made clear. However, there are occasions when the student's consent is withheld, or it is impracticable to try to obtain it, when confidentiality may be broken, these include;
 - When the student's mental health has deteriorated to the extent of compromising his/her personal safety
 - When the student is at risk of serious abuse or exploitation
 - When the student's behaviour is likely to adversely affect the rights and safety of others
 - Where the member of staff would be liable to civil or criminal procedure if the information were not disclosed

8.3 Patient Safety

Information will be shared with others in circumstances where there may be a risk to others if information were withheld. Unless a case has been dismissed, referral to [Fitness to Practise procedures](#) will be made in all exiting student references.

9. Staff Development

- 9.1 Members of the Fitness to Practise Panel should receive training in their role to ensure competency.

10. Monitoring and Review

- 10.1 Fitness to Practise cases will be monitored in each Faculty by the Faculty Programmes Committee. Panel meetings will be recorded in the Faculty's QME repository.
- 10.2 Where there is an opportunity for the enhancement of care delivery, anonymised feedback will be given to the department, academic unit or external agency concerned.

11. Associated Documentation

Appendix 1	A guide to the areas of concern that may lead to a Fitness to Practise panel
Appendix 2	A guide to determining the severity of a potential Fitness to Practise issue
Appendix 3	Guidance for students with a disability
Appendix 4	Guidance for those who are interviewing staff, complainants or others

12. References and External Documents

12.1 This policy has been developed with reference to the following key documents:

Equality Act 2010, HMSO, London

University of Southampton, Regulations governing Reviews and Appeals by students on taught programmes.
<http://www.calendar.soton.ac.uk/sectionIV/student-appeals.html>

Health Professions Council: standards of conduct, performance and ethics 2008. London SE11 4BU,
www.hpc-uk.org

Nursing and Midwifery Council 2008, Good health and good character guidance. November 2010, NMC, London
<http://www.nmc-uk.org/Documents/Guidance/nmcGood-HealthAndGoodCharacterGuidanceForApprovedEducationInstitutions.PDF>

General Medical Council, Concerns about Doctors, Fitness to Practice Panels (accessed March 2011)
http://www.gmc-uk.org/concerns/hearings_and_decisions/fitness_to_practise_panels.asp

Medical Student: professional values and fitness to practise document (2009) produced by the General Medical Council and the Medical Schools Council.
http://www.gmc-uk.org/education/undergraduate/professional_behaviour.asp

General Social Care Council, Codes of Practice for Social Care Workers, (2010)
<http://www.scie.org.uk/workforce/files/CodesofPracticeforSocialCareWorkers.pdf>

Fitness to Teach
www.education.gov.uk

Code of Conduct and Practice for Registered Teachers (accessed November 2011)
<http://www.gtce.org.uk/teachers/thecode/>

National College for Teaching and Leadership (disciplinary)
<https://www.gov.uk/government/organisations/national-college-for-teaching-and-leadership>

Office of the Independent Adjudicator
<http://www.oiahe.org.uk>

13. Glossary

Others	Any person with whom the student has contact, internal or external to the University and in Public.
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14.

FITNESS TO PRACTISE FLOW DIAGRAM

Overarching Principles: Parity in practice, Transparency and Fairness

