Repeated low-level concerns - case study

Yanmei is a first year medical student living away from home for the first time. She is finding the change from school to university challenging. She is missing her family and does not think she has many things in common with people from her course.

Yanmei was used to a structured day with a regular schedule back home, so she found it hard to organise her time and keep up with the demands of her course. All this is worrying her so focusing on her studies is difficult, even though she tries hard to do so.

A few weeks into second semester, Yanmei started arriving late for her tutorials and missed some mandatory sessions.

Yanmei received an invitation from her personal tutor to discuss her absences. But she worried the tutor would reprimand her, so she decided not to attend. She lied to her tutor by saying she was ill on the day.

One of Yanmei's friends from her tutorial group, Gavin, also noticed her absences and asked her if anything was wrong. Yanmei said everything was fine, but asked Gavin to sign her into the next taught session as a favour. Yanmei did this because she felt under a lot of pressure and worried she would not make it to the next session. She was also scared the medical school would put her through disciplinary proceedings if they knew. Gavin declined to sign Yanmei in, but didn't mention this to anyone else.

Later Yanmei handed in two assignments late, and had marks deducted as a penalty. She received feedback on this from her year lead. The year lead asked about the assignments and her absences during taught sessions.

Yanmei became uncomfortable and refused to discuss details. She said she'd just been busy over the last few weeks, and that it wouldn't happen again. The year lead tried to reassure Yanmei and to understand the reasons for her behaviour. They spoke to Yanmei about the support available to her, and encouraged her to use the university's services.

But Yanmei continued to miss lectures[6] and was referred to the professional concerns committee, which is the body that looks at minor lapses in professionalism[2].
How was Yanmei supported?

Yanmei met again with her year lead after she heard she had been referred to the professional concerns committee. She was upset and told the year lead she had been struggling with attending lectures. She found managing her time and study workload difficult. She also said she felt alone and was struggling to understand and adjust to the new expectations on her at university. It was different to her time at school and how her parents supported her at home.

The year lead thanked Yanmei for her openness and said he would share this information with the committee. The medical school's student support team arranged a meeting with Yanmei before her visit to the professional concerns committee to help her prepare.

They discussed why her tactics for coping were not appropriate, in particular misleading the tutor about her absences. They outlined what practical support might be available to her to help overcome the challenges she was facing.

What did the professional concerns committee do?

The committee took into consideration she had been honest\textsuperscript{[11]} and had sought help to address her situation, along with the other facts of the case. Due Yanmei's openness and she was now attending sessions and managing her workload much better, they decided the case had not reached the threshold for a student fitness to practise (SFTP) investigation\textsuperscript{[3]}.

The committee issued a written warning to Yanmei, detailing the concerns about her attendance. The warning explained if there were any further misconduct concerns, Yanmei might face SFTP proceedings in future. The concerns were documented and a copy of the written warning was added to Yanmei's student record.

The committee were sympathetic to Yanmei's situation and appreciated starting university can be challenging. They directed Yanmei to the student support services.

A member of the support staff met with Yanmei every two weeks, and provided resources to help her study more effectively. Yanmei also met with her personal tutor often for help and encouragement. The medical school assigned Yanmei a 'buddy' from the second year, so they could share their experiences of adjusting to medical school.

With this support in place, Yanmei completed her first year of medical school successfully.
What could Yanmei and Gavin have done?

Where could Yanmei go for support?

Yanmei's medical school understands how difficult it can be to adjust to university life, and a new method of teaching and learning. The school and the university have many systems in place to offer support. These include study skills and help with other academic issues such as stress and anxiety. Yanmei could reach out to:

- Her personal tutor. They are there to help students and can provide information on the medical school's support services and other support available through the university
- The university's support services through the student union. They can help on many things, and they may provide peer support
- The university's student health services. To get support on stress or anxiety
- Confidential counselling services offered by the university.

What could Gavin do to help Yanmei?

Try to find out more from Yanmei and encourage her to seek help.

This is a good option and having a supportive friend can encourage people to look for help. But Gavin has to make sure that he provides support and not medical advice. He should also be ready to talk to the medical school if he is concerned Yanmei is not getting the support she needs.

Ask for advice from student support or a tutor without naming Yanmei.

This is also a good option as Gavin may want some advice on how to help Yanmei deal with her situation. Gavin needs to understand if he has serious concerns about Yanmei's wellbeing he will need to raise those. Medical schools find it difficult to deal with anonymous concerns, but there is advice in our guidance about raising concerns about peers[8].

Raise his concerns about Yanmei to her personal tutor.

Gavin should do this if he has concerns about Yanmei's wellbeing. Medical schools can support those who raise concerns.
What to take away

- Medical students are likely to experience situations that will have an emotional impact on them, both on study and on placement. At times, they may experience stress and anxiety. This is completely normal and the medical school will support them with safe ways to share, reflect on and get help with difficult experiences.

- Openness is important. Students must behave honestly from the point when they apply to medical school, during their studies and when working as a doctor. Honesty is a fundamental ethical principle and a core professional behaviour which is central to maintaining trust in doctors. Students have a responsibility to be open and truthful about any problems - this will enable the school to support them to develop. They must also be honest about their work and experience - including the teaching sessions students have attended and the work they have submitted.

- Monitoring low level concerns isn't about finding students and punishing them. It is about identifying students who may be struggling or need extra support, as well as identifying students who are at risk of developing more serious SFTP concerns.

- It is important for medical schools to have a system to identify low-level professionalism concerns. Medical schools should also tell their students how to raise concerns about their peers. Whether the SFTP threshold has been crossed should be determined on a case-by-case basis. Medical schools should have a governing set of rules for handling of low level concerns and be consistent in their assessment.
References to the guidance

*Professional behaviour and fitness to practise: guidance for medical schools and their students*

1. [When should students be given pastoral care and student support?](#) (paragraphs 23-26)
2. [How should medical schools deal with low-level professionalism concerns?](#) (paragraphs 62-73)
3. [The threshold of student fitness to practise](#) (paragraphs 79-80)
4. [Referring a student to fitness to practise procedures](#) (paragraphs 86-88)
5. [Table 1 - Reasons for impaired fitness to practise in medical students](#)

*Achieving good medical practice: guidance for medical students*

**Domain 1: Knowledge, skills and performance**

6. [Develop and maintain your professional performance](#) (paragraphs 1-5)
7. [Practical tip #1: What is reflection?](#)

**Domain 2: Safety and quality**

8. [Practical tip #5: What if my concern is about my friends or peers?](#)
9. [Protect patients and colleagues from any risks posed by your health](#) (paragraph 32)
10. [Getting independent medical advice](#) (paragraph 37)

**Domain 4: Maintaining trust**

11. [Act with honesty and integrity](#) (paragraphs 72-73)
12. [Practical tip #11: How can I demonstrate honesty?](#)
13. [Professionalism - key areas of concern](#) (paragraph 81)
14. [Annex: Professionalism and fitness to practise processes in medical schools and universities](#)