Collaboration
Submitted by Barts and The London School of Medicine and Dentistry

We developed a staff training resource on fitness to practise for colleagues serving on panels dealing with low level professionalism concerns.

At Barts and the London, our Professional Capability (PCC) and Fitness to Practise (FTP) Regulations provide the opportunity to consider casework at two levels:

- matters that might be remediated or managed in a formative way are heard by a panel from the School’s PCC, or through PCC Chair's action
- matters that are considered to cross the student fitness to practise threshold are reviewed by the Queen Mary University of London (QMUL) FTP group.

Our regulations outline the composition, remit and procedures of each committee.

Who sits on the panels

Nine registered doctors and dentists, engaged in teaching undergraduate students, are appointed to the PCC by Senate - three senior academics designated as Chairs, plus six members.

From this pool, four-person panels are established to hear casework:

- one Chair
- one member
- the president of the Barts and the London Student Association
- another individual from the School of Medicine and Dentistry actively involved in undergraduate teaching.

The Universities regulations emphasise the importance of ongoing training in fitness to practise developments for potential PCC or FTP panellists. Here we describe the development of training at school level.

What happened before

Pre-2012, training at school level was drawn from the annual Medical Schools Council/GMC conference.
In 2013 we developed our training plan to include student support colleagues, as we realised that provision of appropriate pastoral support for students attending PCC panels required detailed knowledge of the process.

In 2014 we established a termly cycle of business meetings, reflecting on various aspects of governance practice and initiated a termly bulletin to inform staff and students about governance matters. Alongside this, we started an annual training meeting.

In 2015, under the Patient and Parent Initiative (PPI), we invited a lay member to join the business and training meetings. For our most recent training meeting we reviewed:

- medical school governance
- the key monitoring and review roles of the PCC
- the professional, vocational and regulatory context of the work of the PCC as related to GMC and GDC guidance

**How we plan to increase awareness**

A regular topic of discussion is the limited awareness among clinical and teaching colleagues of the PCC remit and sphere of influence. So our focus is:

- uniformity of approach and an awareness of changes in the wider student context across panel members
- transparency of PCC process and remit for staff and students who rarely interact with the PCC until a concern is raised.

We have begun to extend the recent training to colleagues not directly involved with the PCC process, in order to highlight the formative aspects of PCC in undergraduate learning.

The outline proposals include:

- use of PCC training materials with Central Medical Education Leads and Heads of Year
- linking the training package with GMC [Case studies: medical students - professionalism and fitness to practise](#)
- evaluating the responses to the training and development of an online training package which could be shared with colleagues in Trusts and General and Community Practice
- development of an induction package for new staff, in the UK and in our new Medical School in Malta.
We have set up a Student Health Support service for students with a chronic health condition who may need an advocate or enhanced monitoring in times of difficulty.

About the support service

Student Health Support (SHS) is an enhancement of the pastoral student support service at Keele. This is for students who have a chronic health condition who would benefit from an advocate in times of difficulty and who might benefit also from enhanced monitoring. This enhancement was introduced to safeguard student welfare, to ensure students had access to the support they needed, and to provide a route for accessing a period of leave for treatment (if appropriate).

What support is offered

Students included in this service will have been seen by the University Occupational Health service to ensure fitness for the course and to suggest what help and support might be required. The OHS will send this service confidential report, and this service ensures their recommendations are actioned.

These students then see the welfare lead for the school to:

- establish whether they wish to have this support
- put any help in place
- offer direct access to the welfare lead if there are issues in the future.

The student is made aware that they will be supported by regular discussion between the welfare lead, the pastoral support team and, when needed, other staff.

This occurs every semester, so three formal checks are in place to ensure the student is well supported (in addition to any informal conversations). If there have been no apparent issues, the student is sent an email to enquire whether all is well.
Benefits of support

The benefits include:

- transparent, formalised support is provided to students
- the student being able to access support (leave, adjustments or simply advice) more readily
- the student receives an additional external prompt that someone is looking after their welfare, which can also encourage them to stay well
- the school can have more confidence that a student is not left isolated to manage health problems by themselves.

The first few months of the scheme have seen approximately 3% of the student body enter the scheme, although at steady state this may be nearer 5%. The conditions are equally distributed between mental and physical diagnoses.

Formal evaluation has not occurred to date. However, the service has been able to assist with expediting treatment and leave requests and the pastoral team have found the regular reviews supportive in managing these students.
Collaboration
Submitted by the University of Glasgow

Organising a multi professional training day on student fitness to practise as a national event for Scottish universities.

History and purpose of the event

The Scottish medical schools have been working together on student fitness to practise (SFTP) from 2003 when the Scottish Deans FTP Group met for the first time. The Group has been very valuable in sharing good practice, offering externality on panel hearings and working towards achieving as much consistency as possible across the schools.

The group meets annually and, in 2012 held the first national training event. This focused on GMC/MSC SFTP guidance, a multi-professional approach to SFTP and the value of partnering with the postgraduate deaneries. This event is now established and happens every two years so in 2014 the second event was held focussing on Professionalism and FTP with a session included on the role of occupational health departments.

This event was the third in the series and looked at the legal framework and good practice in SFTP investigations and panel hearings. The events are open to all SFTP committee members in the Scottish medical schools and our colleagues in areas such as dentistry, nursing and clinical psychology and are funded by the host school.

Schedule for the event

The day was led by Brent Heywood, a Solicitor-Advocate and partner at Lindsays, a large law firm based in Edinburgh. It was a highly interactive day and included group work with case studies. The topics covered were:

- Session 1 - Common law, regulatory law and university fitness to practise regulations; guidance from the regulators; case law; right of appeal.
- Session 2 - Case discussion in groups.
- Session 3 - Fitness to practise investigations; the role of the investigating officer; the report - what it should and shouldn’t contain.
- Session 4 - The fitness to practise committee - the hearing; the role of witnesses; writing the determination; requirements.
Multi-disciplinary collaboration

There were approximately 75 people attending in the course of the day. The five Scottish medical schools and three Scottish dental schools were represented along with two of the nursing schools and the Glasgow clinical psychology programme.

We also had representatives from central University Services such as Academic Policy Offices and Senate Offices to facilitate a partnership approach to managing SFTP. The multi-disciplinary approach has consistently been found to be valuable in sharing ideas and good practice. This is reflected in the Glasgow fitness to practise committee - there are representatives from these four areas on the committee, giving a multi-disciplinary approach to panel hearings.

Good feedback

There was excellent feedback from participants. There was in-depth input and discussion on:

- the development of fitness to practise policies
- how they are put into practise in different ways across the various professional groupings and institutions.

We intend this to lead to change and a better understanding of how to achieve good practice and consistency.

The value of collaboration

This event demonstrated the value of working together on fitness to practise. In Scotland this is relatively easy to achieve and the benefit is significant. There would be value in considering how this could be achieved across the rest of the UK.