Raising concerns about student fitness to practise issues

Raising concerns is an important principle based on *Promoting excellence*, our standards for medical education and training.

It is because of this that medical schools must have clear policies for raising and acting on concerns. This piece is addressed to medical schools and includes advice on what elements these policies could address. We do not say what the policies should specifically look like, but we do have clear expectations that medical schools have processes in place to deal with concerns.

The *guidance on student professionalism and fitness to practise* sets out key considerations for medical schools in developing their raising concerns policies.

What do our standards say?

1. **S1.1** The learning environment is safe for patients and supportive for learners and educators. The culture is caring, compassionate and provides a good standard of care and experience for patients, carers and families.

And among the relevant requirements to meet this standard are:

1. **R1.1** Organisations must demonstrate a culture that allows learners and educators to raise concerns about patient safety, and the standard of care or of education and training, openly and safely without fear of adverse consequences.
2. **R1.2** Organisations must investigate and take appropriate action locally to make sure concerns are properly dealt with. Concerns affecting the safety of patients or learners must be addressed immediately and effectively.

Raising concerns may be difficult - but it's important

Raising concerns may be difficult for medical students, and they may not feel comfortable doing so, especially to supervisors or senior clinicians who may play a part in their assessment and future progression. This difficulty is the first thing for any policy to acknowledge, as well as the support available to students through the process.

It is important to raise concerns because:

- Openness and honesty are key to being a good medical student and a safe and trustworthy doctor.
• Medical students are not registered with the GMC and are not employees of their placement providers. This means that neither the GMC nor placement providers can legally require students to raise concerns. However, students do have a formal relationship with their medical school, which will expect them to raise concerns.
• Medical students also have a moral responsibility to raise concerns about patient safety, dignity and comfort. Professionalism is not about doing the minimum - it is about doing what is necessary to protect patients.

How to communicate your policy to students

_Achieving good medical practice_ gives useful advice to students on raising concerns.

The guidance tells students they must raise any concerns about patient safety, dignity or comfort promptly, and follow the medical school's policy on raising concerns, wherever possible (paragraphs 23-28).

It also offers practical advice to students on how to raise concerns about their peers’ health, and gives examples of behaviours that could cause alarm, for example if their peers are rude to patients or colleagues, do not contribute to academic or clinical work, or are behaving unusually.

Student raising concerns about staff or delivery of care

The policy should encourage students to tell their supervisor when things go wrong and when these problems affect, or could affect, patient care.

• If possible, students should have the name and contact details of a nominated person to speak to about any concerns they have. Further options of who to contact should ideally be provided, for example the student’s personal tutor, in case the primary contact is not available, or the student does not feel comfortable raising their concern with them.
• A policy should take into account that students on clinical placement (especially at different locations) may find it harder to reach out to their school about concerns, and provide an alternative contact at their placement location.
• Another thing to take into account is that the student may wish to raise concerns about how they or their fellow students have been treated by members of staff or patients. A policy should cater for this, and offer advice to students on what to do next. A helpful resource for this is the GMC's raising concerns guidance.
• The medical school should ensure students are made aware of these policies from day one, and receive training on them as soon as possible after joining medical school or a clinical placement provider.
Students raising concerns about their peers

- Students should be encouraged to come forward when they have a genuine concern about their friends’ or peers’ behaviour or health. It’s important for students to understand that this will enable the medical school to give their peers help and support. See our practical tip What if my concern is about my friend or peers?
- A policy should acknowledge it can be even harder to raise concerns about a peer’s health condition, but ask students to bring this to the attention of the medical school if they are worried about someone’s safety or wellbeing.

Students coming forward with concerns about themselves

- Our student professionalism guidance Achieving good medical practice has a list of dos and don’ts about students’ health. Essential points from this, that can be included in a raising concerns policy, are:
  - being open and honest about health conditions; telling the medical school if they have a health condition, or they experience significant changes to a stable health condition
  - raising this in order to get appropriate support, using the systems and resources the medical school has in place (for example student support, university health service, confidential counselling services, occupational health etc.)
  - seeking independent medical advice if they have a health condition or think their health or personal circumstances may be affecting their studies; registering with a GP local to the medical school so they have access to this independent advice
  - students should not diagnose or treat themselves, or seek treatment from friends, family or those close to them.
- Students should be able to self-refer to occupational health. A policy should highlight that anything shared with occupational health remains confidential unless there is a concern for public safety.

Staff and educators raising concerns about students

Our guidance to medical schools (Professional behaviour and fitness to practise) says it’s important for medical schools to give clear guidance to staff on their process for reporting any concerns about students and to make sure this guidance is clearly available to anyone who may wish to use it (paragraphs 62-73).

Having a formal process for reporting and monitoring low-level professionalism concerns - such as lateness, not handing in work on time and missing lectures - will allow medical schools to identify any unprofessional behaviour and to address it before it leads to more-significant fitness to practise issues.
Some medical schools have a card or points system for flagging unprofessional behaviour and such systems have the advantage that they can also be used to recognise and promote exemplary professional behaviour.

Medical schools and universities should make sure their procedures have sufficient flexibility to receive allegations from a number of sources. They should also make sure procedures clearly define how cases are evaluated.

Dealing with concerns from other sources

Anonymous complaints

Medical schools should also consider how they will deal with anonymous complaints and how they can gather evidence in these circumstances. We acknowledge in our guidance that anonymous complaints can limit a medical school's ability to take action, as it will be more difficult to investigate and gather evidence. It may be appropriate to deal with such complaints under the medical school or university’s anonymous complaint or raising concerns policy.

Complaints from patients

Patients seen by medical student on clinical placements may also wish to raise concerns or make a complaint about the quality of their care. This should be done locally and medical schools should consider agreeing a named contact with each placement provider for concerns to be addressed to. This can be shared with staff supporting the clinical placements, so concerns are communicated to the medical school.

Medical students are not regulated by the GMC, so we don't directly receive complaints about students from the public (as opposed to complaints about doctors that can be raised directly with us if appropriate). So concerns raised by patients about medical students should be addressed locally between placement providers and medical school staff.

Useful resources

- Achieving good medical practice: guidance for medical students (2016)
- Professional behaviour and fitness to practise: guidance for medical schools and their students (2016)
- Supporting medical students with mental health conditions (2015)
- Welcomed & valued (2019)
- Raising and acting on concerns about patient safety (2012)
  - FAQs
- What to expect from your doctor: a guide for patients
How the GMC can help

We're happy to support medical schools with any sessions you plan to run with students or staff on our student fitness to practise guidance and professionalism in general.

If you are interested in this or have queries about the guidance, you can contact us at quality@gmc-uk.org.