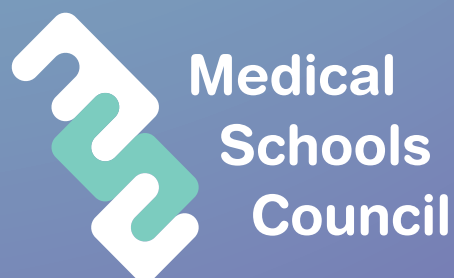


**Guidance for medical
students and medical schools
on professional values and
fitness to practise:**
a public consultation on
our draft guidance



General
Medical
Council

About this consultation

The General Medical Council (GMC) and the Medical Schools Council (MSC) are consulting on two guidance documents, which we have written following the review of our guidance *Medical students: professional values and fitness to practise*.

This existing guidance covers the standards of professional behaviour we expect of medical students and gives guidance to medical schools on how to manage medical students whose fitness to practise is a cause for concern.

Following feedback from medical schools and medical students, we have reviewed the existing guidance and produced two separate, revised draft documents for consultation.

- ***Medical students: professional values*** – this draft guidance sets out the standards of professional behaviour we expect from medical students.
- ***Medical students: professionalism and fitness to practise*** – this draft guidance provides a framework for medical schools on how to support and manage students whose professionalism and fitness to practise is a cause for concern.

Producing two separate guidance documents allows us to tailor the information to different audiences. *Medical students: professional values* is aimed primarily at medical students. *Medical students: professionalism and fitness to practise* is aimed mainly at medical school and university staff who are involved in the process of identifying, managing and supporting medical students whose conduct or health is a cause for concern.

We welcome responses from anyone who has a view about these draft guidance documents and are particularly keen to hear from individuals or organisations that are affected by the issues they raise.

This is your chance to have your say.

Why is this guidance important?

Medical students are working towards joining a trusted and regulated profession. Their studies will put them in contact with patients and members of the public, who may often be vulnerable. Because of this, we expect medical students to display standards of professional behaviour that are different from those expected of students who are not working towards joining a regulated profession.

The GMC helps to protect patients by setting standards of professional behaviour for registered doctors in *Good medical practice*. Our new draft guidance, *Medical students: professional values*, outlines what *Good medical practice* means for medical students and sets out – in the same format and domains as *Good medical practice* – the standards of professional behaviour expected of them.

It is important that medical students with serious fitness to practise problems do not put the safety of patients or members of the public, or public trust in the medical profession, at risk. If a student's behaviour is a cause for concern and their ability to continue on a medical course or to practise as a doctor after graduation is in doubt, then schools and universities must have formal procedures in place to address these issues.

Our draft guidance *Medical students: professionalism and fitness to practise* provides a framework for dealing with medical students' behaviour and health issues. It also gives guidance to medical schools and universities on processes for low-level health and conduct concerns and more serious fitness to practise issues.

How have we developed these draft guidance documents?

As mentioned above, both documents are a product of our review of our existing guidance, *Medical students: professional values and fitness to practise*.

As part of this review, we sought views from users of the guidance at events in all four UK countries. We asked them what works well and what it would be useful to include in revised guidance. We also conducted a [survey of medical students to find out their views on professional values](#) and received 2,500 responses.

Responses to the events and the survey have helped us draft the new guidance documents, both of which have been reviewed by a group of medical school staff and students. Finally, we've received expert opinion from occupational health specialists to inform the health sections of the guidance.

How will your responses help?

Your responses will help us to make sure that the guidance:

- is clear and unambiguous – we do not want it to be difficult to use and interpret
- covers everything that it should – please tell us if we have missed anything out, or included irrelevant or unhelpful information.

We would also welcome your views about developing additional resource materials, such as case studies, answers to frequently asked questions or template occupational health reports that would help you to put the guidance into practice.

How do I take part?

There are 31 questions in this consultation document. The first section asks about our overall approach. There are then questions about *Medical students: professional values*, followed by questions about *Medical students: professionalism and fitness to practise*. These questions relate to the scope, detail and style of the draft guidance. You do not have to answer all questions and can focus on one document or on specific areas if you prefer.

The consultation is open until **11 November 2015**.

You can answer the questions online on our consultation website: <https://gmc.e-consultation.net/econsult/default.aspx>.

Alternatively, you can answer the questions using the text boxes in this consultation document and either email your completed response to us at studentftp@gmc-uk.org or post it to us at:

Education Policy team
(student professionalism and fitness to practise)
General Medical Council
350 Euston Road
London
NW1 3JN

What will happen next?

We will analyse the responses to the consultation and consider how we should adapt the guidance documents to take account of the comments we receive. We also intend to develop case studies and other learning materials to help illustrate particular areas of the guidance and show how the guidance can be put into practice.

We hope to publish the final version of both guidance documents in the spring of 2016, along with the learning materials and links to other guidance documents. The implementation date for both documents will be September 2016, to allow medical schools to make any appropriate changes to procedures in light of the revised guidance.

Separating the guidance

By producing two guidance documents, we will be able to target information at different primary audiences.

- **Medical students: professional values** will be aimed at students, to give them guidance on the standards of professional behaviour we expect of them.
- **Medical students: professionalism and fitness to practise** will be aimed at medical schools, to guide them on managing concerns about the professionalism and fitness to practise of their students.

1 Do you agree with the approach to separate the guidance and produce two documents?

Yes No Not sure

Do you have any comments?

2 Do you think the titles of the documents are appropriate and reflect the content of the guidance?

Yes No Not sure

Do you have any comments?

Specific questions about *Medical students: professional values*

We have structured our guidance for medical students under the same four domains that we use in the GMC's core guidance for registered doctors, *Good medical practice*.

In *Medical students: professional values*, we refer to the professional standards expected of registered doctors. We do this in a deliberate attempt to add context to the standards of professional behaviour that we expect of medical students, and to make clear how the standards will be relevant to them when they are doctors.

3 Do you think it is helpful to have the guidance ordered under the four domains of *Good medical practice*?

Yes No Not sure

Please give reasons for your response.

4 Does domain 1 of the draft guidance *Medical students: professional values – Knowledge, skills and performance* – give relevant advice and guidance that will be useful for medical students?

Yes No Not sure

If no, please say why not.

5 Does domain 2 of *Medical students: professional values – Safety and quality* – give relevant advice and guidance that will be useful for medical students?

Yes No Not sure

If no, please say why not.

6 Does domain 3 of *Medical students: professional values – Communication, partnership and teamwork* – give relevant advice and guidance that will be useful for medical students?

Yes No Not sure

If no, please say why not.

7 Does domain 4 of *Medical students: professional values – Maintaining trust* – give relevant advice and guidance that will be useful for medical students?

Yes No Not sure

If no, please say why not.

We've included a section called *Professional misconduct: key areas of concern* (paragraph 73). This gives medical students a list of examples of behaviour that would be regarded as unacceptable and likely to cause their medical school to take action in relation to their fitness to practise.

8 Do you think having examples of unprofessional behaviour for medical students is helpful?

Yes No Not sure

If no, please say why not.

The annex to *Medical students: professional values* gives a short overview of student fitness to practise procedures, based on our draft guidance for medical schools, *Medical students: professionalism and fitness to practise*. The annex is intended to give medical students an outline of the potential consequences of unprofessional behaviour.

9 Do you think it's useful for the guidance to contain an annex that gives an overview of student fitness to practise procedures?

Yes No Not sure

If no, please say why not.

Throughout the guidance, we've added text boxes that contain practical advice for students on how to make sure they behave professionally in different contexts and in relation to the different requirements set out in the guidance.

10 Do you think the text boxes within the guidance will help students to understand what is expected of them in terms of professional behaviour?

Yes No Not sure

Please give reasons for your response.

Specific questions about *Medical students: professionalism and fitness to practise*

We have produced this guidance to update the information we give to medical schools and universities on processes to manage professionalism concerns and fitness to practise issues in medical students. We have:

- aligned the process and language, where possible, with the GMC's fitness to practise processes for registered doctors and the test of fitness to practise at provisional registration
- included new sections on dealing with and monitoring low-level concerns
- restructured the guidance to follow the process through chronologically, stage by stage
- included a reference table to help with decision making on the potential outcomes of an investigation and a fitness to practise committee or panel hearing.

11 How clear is the guidance?

- Very clear Fairly clear Not very clear Not clear at all Not sure

Please give reasons for your response.

12 Is there anything missing from the guidance?

- Yes No Not sure

If yes, please tell us what you think is missing.

13 Is there anything in the guidance that you do not think we should include?

Yes No Not sure

If yes, please tell us what you think should be removed.

We begin the guidance by defining the reasons for impaired fitness to practise for doctors on the medical register as listed in the *Medical Act 1983*. We also include information about the requirements for provisional registration with the GMC to put into context why fitness to practise processes for medical students are important.

14 Is it helpful to include this information at the beginning of the guidance?

Yes No Not sure

Do you have any comments?

We have aligned the language and process, where possible, with the GMC’s test of fitness to practise at provisional registration and standards and guidance for registered doctors, to make the process continuous between undergraduate medical education, registration and beyond. We recognise that there are some fundamental differences between medical students and registered doctors and have also captured these differences in the guidance.

15 Do you agree that it is useful to have the guidance aligned with the GMC’s test of fitness to practise at provisional registration?

Yes No Not sure

Do you have any comments?

In the section of the document on GMC provisional registration ([paragraphs 22–27](#)), we say medical students should declare any disciplinary action taken against them by their medical school or university.

We have not described specific issues that should be declared, because we intend to provide resources to aid with this process. This will let us update the information without having to change the guidance itself.

16 Do you think we have included enough information on provisional registration declarations in the guidance itself?

Yes No Not sure

If no, what kind of information would be useful?

We have reviewed the sections on pastoral care and student support (paragraphs 28–36) and health and disability (paragraphs 37–52), with expert input from occupational health specialists.

17 Is the section on pastoral care and student support (paragraphs 28–36) helpful?

Yes No Not sure

Do you have any comments?

We have provided more advice to medical schools on dealing with fitness to practise cases that involve concerns around health and disability. This builds on the work we have done in recent years on these issues and the guidance *Supporting medical students with mental health conditions*.

18 Does the section on health and disability (paragraphs 37–52) give clear and helpful guidance to medical schools about dealing with fitness to practise cases that involve health and disability concerns?

Yes No Not sure

If no, please give further details.

The guidance now contains a section on excluding students on health grounds ([page 35](#)). The GMC does not exclude doctors from the register for purely health reasons, but this section recognises that training to join a profession and being a member of a profession are fundamentally different and therefore different rules apply. The guidance acknowledges this difference and provides advice to medical schools on how they should deal with the rare instances where a student's health raises questions about their fitness to practise. This is a new addition to the guidance that we would welcome comments on.

19 Is the section on excluding students on health grounds reasonable?

Yes No Not sure

Do you have any comments?

We have included a section about how medical schools should deal with concerns about a student's health or behaviour ([paragraphs 59–63](#)), to explain where allegations about student fitness to practise might come from and how schools might deal with complaints from different sources.

20 Is the section about dealing with concerns from different sources helpful?

Yes No Not sure

Do you have any comments?

Medical schools all have a process in place to monitor and manage low-level professionalism concerns. We have included advice about managing low-level concerns in [paragraphs 64–74](#).

21 Do you agree that it's helpful to provide information about monitoring and managing low-level concerns?

Yes No Not sure

If no, please say why not.

The guidance includes a series of questions to help establish the thresholds of fitness to practise for behaviour and health ([paragraph 82](#)).

22 Are these questions useful?

Yes No Not sure

If no, please tell us what questions would be more useful to include.

Table 1 (pages 20–21) outlines the reasons for impaired fitness to practise in medical students. It has been informed by GMC data collected from medical schools and universities and by comments from medical school staff and students following a review of an early draft of the guidance.

23 Do you agree that the information provided in table 1 is useful?

Yes No Not sure

If no, please tell us why not.

We have included a new section on referring a student to fitness to practise procedures and outlined the role of the investigator and outcomes of an investigation (paragraphs 88–151).

24 Is it useful to include this section, which has more detail about the investigation process and outcomes?

Yes No Not sure

If no, please tell us why not.

Other comments about the guidance documents

- 25 Do you have any further comments about *Medical students: professional values* that are not covered by the above questions?

- 26 Do you have any further comments about *Medical students: professionalism and fitness to practise* that are not covered by the above questions?

To clarify how the guidance might work in practice, we will develop case studies that will illustrate:

- the different thresholds of the process (eg referral to a low-level concerns committee

or equivalent, referral to fitness to practise investigation, or referral to a fitness to practise committee or panel)

- when various different sanctions are appropriate.

27 Are there any issues or situations that you think it might be useful to have a case study on?

Yes No Not sure

If yes, please give details of these issues or situations.

In addition to the case studies, we plan to develop a series of frequently asked questions and template reports for occupational health assessments.

We are interested in collecting examples of issues that are frequent or difficult to manage.

28 Are there any issues that you think it would be useful to include in a series of frequently asked questions?

Yes No Not sure

If yes, please give details of these issues.

29 Do you have any other ideas about resources we could provide to support use of the guidance documents in practice?

Yes

No

Not sure

If yes, please give details of these resources.

Equality and diversity considerations of *Medical students: professional values and Medical students: professionalism and fitness to practise*

30 Are there any particular groups who would be helped by our revised guidance?

Yes No Not sure

If yes, please tell us which groups you think would be helped and in what way.

31 Are there any particular groups who would be disadvantaged by our revised guidance?

Yes No Not sure

If yes, please tell us which groups you think would be disadvantaged and in what way.

**Thank you for taking the time to give us your comments – we're grateful for your input.
There is just one more section to complete.**

About you

Finally, we'd appreciate it if you could give some information about yourself to help us analyse the consultation responses.

Your details

Name _____

Organisation (if responding as an organisation) _____

Address _____

Email _____

Contact telephone (optional) _____

Would you like to be contacted about the GMC's future consultations?

Yes

No

If you would like to know about the GMC's upcoming consultations, please let us know which of the areas of our work interest you:

Education

Standards and ethics

Fitness to practise

Registration

Licensing and revalidation

Data protection

The information you supply will be stored and processed by the GMC in accordance with the *Data Protection Act 1998* and will be used to analyse the consultation responses, check the analysis is fair and accurate, and help us to consult more effectively in the future. Any reports published using this information will not contain any personally identifiable information. We may provide anonymised responses to the consultation to third parties for quality assurance or approved research projects on request.

The information you provide in your response may be subject to disclosure under the *Freedom of Information Act 2000*, which allows public access to information held by the GMC. This does not necessarily mean that your response will be made available to the public as there are exemptions relating to information provided in confidence and information to which the *Data Protection Act 1998* applies. Please tick the box if you want us to treat your response as confidential.

Responding as an individual

Are you responding as an individual?

- Yes No

If yes, please complete the following questions. **If not, please complete the 'responding as an organisation' section on page 24.**

Which of the following categories best describes you?

- Doctor Medical educator (teaching, delivering or administering)
 Medical student Member of the public
 Other healthcare professional
 Other (please give details) _____

Doctors

For the purposes of analysis, it would be helpful for us to know a bit more about the doctors who respond to the consultation. If you are responding as an individual doctor, could you please tick the box below that most closely reflects your role?

- General practitioner Consultant
 Other hospital doctor Doctor in training
 Medical director Other medical manager
 Staff and associate specialist (SAS) doctor
 Sessional or locum doctor Medical student
 Other (please give details) _____

What is your current practice setting? (Please tick all that apply)

- NHS Independent or voluntary Other

What is your country of residence?

- England Northern Ireland Scotland Wales
 Other – European Economic Area
 Other – rest of the world (please say where) _____

To help make sure the GMC's consultations reflect the views of the diverse UK population, it aims to monitor the types of response it receives to each consultation and over a series of consultations. Although the GMC will use this information in the analysis of the consultation response, it will not be linked to your response in the reporting process.

What is your age?

- 0–18 19–24 25–34 35–44
 45–54 55–64 65 or over

What is your gender?

- Female Male

Do you have a disability, long-term illness or health condition?

- Yes No Prefer not to say

The *Equality Act 2010* defines a person as disabled if they have a physical or mental impairment that has a substantial and long-term (ie has lasted or is expected to last at least 12 months) adverse effect on the person's ability to carry out normal day-to-day activities.

What is your ethnic group? (Please tick one)

Asian or Asian British

- Bangladeshi Chinese Indian Pakistani
- Any other Asian background (please specify) _____

Black, African, Caribbean, black British

- African Caribbean
- Any other black, African or Caribbean background (please specify) _____

Mixed or multiple ethnic groups

- White and Asian White and black African White and black Caribbean
- Any other mixed or multiple ethnic background (please specify) _____

Other ethnic group

- Arab
- Any other ethnic group (please specify) _____

White

- British, English, Northern Irish, Scottish or Welsh
- Irish Gypsy or Irish traveller
- Any other white background (please specify) _____

Responding as an organisation

Are you responding on behalf of an organisation?

Yes No

If yes, please complete the following questions. **If not, please complete the 'responding as an individual' section on page 21.**

Which of the following categories best describes your organisation?

- | | |
|--|---|
| <input type="checkbox"/> Body representing doctors | <input type="checkbox"/> Body representing patients or the public |
| <input type="checkbox"/> Government department | <input type="checkbox"/> Independent healthcare provider |
| <input type="checkbox"/> Medical school (undergraduate) | <input type="checkbox"/> Postgraduate medical institution |
| <input type="checkbox"/> NHS or HSC organisation | <input type="checkbox"/> Regulatory body |
| <input type="checkbox"/> Other (please give details) _____ | |

In which country is your organisation based?

- | | | |
|---|----------------------------------|---|
| <input type="checkbox"/> UK wide | <input type="checkbox"/> England | <input type="checkbox"/> Northern Ireland |
| <input type="checkbox"/> Scotland | <input type="checkbox"/> Wales | |
| <input type="checkbox"/> Other – European Economic Area | | |
| <input type="checkbox"/> Other – rest of the world (please say where) _____ | | |

General Medical Council

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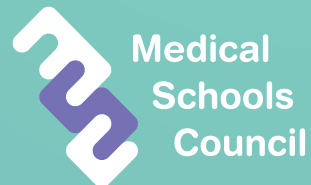
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