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Kent and Medway Medical School

Addressing Low Level Concerns, Fitness to Study and Fitness to Practise Policy

1. Introduction

1.1. The arrangements in this policy apply to all students undertaking a programme leading to eligibility to apply for provisional entry to the General Medical Council (GMC) register. The procedural arrangements are set out in Annex 1 to this Policy.

1.2. Whilst undertaking a programme of study, students must adhere to the professional conduct guidance of the General Medical Council (GMC) and Medical Schools Council (MSC) – Professional behaviour and fitness to practise: guidance for medical schools and their students (2016) and Achieving good medical practice: guidance for medical students (2016).

1.3. The Kent and Medway Medical School (KMMS) undergraduate programme ensures that graduates can display the competence, care and conduct expected of doctors as described in Achieving good medical practice: guidance for medical students.

1.4. Those who are ‘fit to practise’ have the skills, knowledge, character, values, behaviour and health to practise their profession safely and effectively. Statutory and Regulatory bodies are responsible for safeguarding the health and wellbeing of the public. One way to achieve this is through ensuring registrants are fit to practise and by dealing swiftly and fairly with those who are not. Canterbury Christ Church University and the University of Kent (‘the Universities’) jointly undertake the monitoring of students’ fitness to practise on behalf of the Statutory and Regulatory bodies that approve our programmes.

1.5. The purpose of this Policy, and associated procedures, is to ensure that all KMMS students whose behaviours raise concerns are supported and managed equitably. The intention is to provide processes that are transparent and consistent regardless of how the concerns are raised and how serious they appear to be initially. The Policy includes matters relating to a student’s health, circumstances and conduct, all of which may have an impact on their fitness to practise.

1.6. KMMS students are subject to the requirements of the Policy from the point of initial registration as a student until graduation.

1.7. The Policy takes account of the perspective of multiple stakeholders. It is intended to ensure that students, the School, both Universities and the general public are reassured that KMMS students and graduates are fit to practise through appropriate implementation of the associated procedures.

1.8. The procedures of this Policy should be considered alongside the following:
1.8.1. KMMS Student Health and Wellbeing Strategy; 
1.8.2. KMMS Student Code of Conduct; and 
1.8.3. KMMS Non-Academic Disciplinary Procedure. 
1.8.4. KMMS Academic Misconduct Procedures

The process for identification and addressing of low-level concerns will utilise these procedures in assessing concerns. KMMS and its staff have professional responsibilities to protect the public, student(s) and uphold public confidence in the profession, so the outcomes of this Policy will take precedence over these. All concerns raised via Non-Academic Disciplinary Procedures can be addressed under this policy where appropriate.

1.9. As much as is feasibly possible, individuals with a conflict of interest will be excluded from fitness to practise decisions. Where this is not possible, it should be declared. A conflict of interest is a set of circumstances by which a reasonable person would consider that an individual’s ability to apply judgement or act, in the context of fitness to practise, is, or could be, impaired or influenced by another interest that they hold. The Programme Director (PD) should be the member of staff with current responsibility for the student’s programme of study.

1.10. Issues raised in this Policy will be divided into those regarding health and those regarding good character and conduct. In this way, the processes can be suitably tailored to meet specific needs e.g., appropriate Panel advisors for issues related to a student's health. It is acknowledged that there may be an overlap of health and conduct issues in some cases.

1.11. In line with any regulatory requirements, the Dean of KMMS or their nominee, will report concerns that have breached the threshold of professional standards to the relevant Statutory Regulatory Body. If the student fails to meet the threshold of professional standards and is expelled from the relevant programme because they have been found unfit to practise, their name and personal data will be transferred to the Excluded Students Database. This Database is maintained by the Dental Schools Council, Medical Schools Council, Pharmacy Schools Council, Veterinary Schools Council.

2. Health

2.1. A student’s fitness to study or practise may be impaired for reasons of adverse physical or mental health

2.2. Adverse physical or mental health alone is not usually sufficient to conclude impairment. However, a student’s failure to seek the appropriate help or engage in the process to manage any condition may call into question their fitness to practise (GMC and MSC 2016).

2.3. Whilst undertaking the programme, students are required to disclose any relevant changes in relation to their health and seek the appropriate help or engage in the process to manage any condition.
3. Professional Conduct

3.1. A student’s fitness to practise may be impaired by reasons of misconduct including cautions and convictions and/or deficiencies in professional performance including conduct.

3.2. The Statutory and Regulatory guidance outlined below establishes the importance of good character, and that health and social care practitioners must be honest and trustworthy. A judgement regarding good character is based on an individual’s conduct and takes account of any relevant criminal convictions i.e., those which are not ‘protected’ as defined by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (as amended in 2013). The safeguarding of vulnerable individuals is an underpinning principle during the selection of potential students, continuous monitoring during a programme of preparation and progression onto the Statutory and Regulatory registers.

3.3. The GMC helps to protect patients by setting standards for Students and Doctors. The Medical Act 1983 (as amended) makes public protection the overarching duty of the GMC. This duty includes protecting, promoting and maintaining the health, safety and wellbeing of the public, public confidence and proper professional standards and conduct for members of that profession.

3.4. These standards as set out by the GMC and MSC, will be used as a measure of a student’s conduct.

3.5. Applicants are required to disclose relevant issues in relation to their good character and conduct at the point of application. If it is later shown that the student had not disclosed any relevant issues then the offer of a place may be withdrawn or formal investigation commenced, as described in Annex 1.

4. Student Obligations

4.1. While undertaking a programme, students must disclose promptly and fully to the Programme Director, or nominee, relevant issues relating to their good character and conduct which occur at any time during their programme.

4.2. Students are subject to a satisfactory Enhanced Disclosure and Barring Service (DBS) and Occupational Health (OH) clearance. Students are required to provide full and accurate information. Any relevant information that subsequently comes to light may lead to the Universities withdrawing the offer of a place or commencing a formal investigation.

4.3. Students must disclose any relevant information that may impact upon their ability to be on the programme. This is not limited to their health and character but includes any other material information. In addition, students must keep the Programme Director informed of any material changes that have the potential to affect their registration.

4.4. A student must consult with the Programme Director if the student becomes subject to any criminal proceedings promptly.
4.5. A student must seek the appropriate help or engage in processes to manage any condition that may impact on the safety of service users, themselves or colleagues.

4.6. Students must complete an annual declaration of their health and character.

4.7. Failure by a student to adhere to professional obligations may result in the instigation of student fitness to practise procedures.
Annex 1

Procedures for the Management of Addressing Low-Level Concerns and Student Fitness to Practise

1. Introduction

1.1. These procedures set out the arrangements for addressing and applying this Policy.

1.2. Throughout the process, a student is encouraged to seek advice and support as described in the KMMS Student Life and Wellbeing Strategy.

2. Stages in Dealing with Concerns

2.1. The process follows the stages described below. Any stage may be separated into conduct or health related concerns, or there may be cases where there is overlap. Where there is an overlap, KMMS will identify the means of addressing the concerns.

• Stage 0 is the identification or notification of a potential issue or student behaviour which has raised concerns.

• Stage 1 is the process for establishing and addressing individual low-level concerns with a view to early resolution at this stage.

• Stage 2 is the identification and resolution of repeated low-level concerns.

• Stage 3 is the referral to a formal Student Fitness to Practise Panel.

2.2. Students can be supported at any meetings by a member of staff, member of a Students’ Union (Kent Union Advice Centre or CCSU Advice) or another student of either University. It is a student’s responsibility to arrange for a supporter to attend. The meeting organiser must be made aware of any additional attendee at least 2 days before the meeting unless the student has been provided with less than 7 days’ notice of the meeting date. In such instances of short notice meetings, the student must make the meeting organiser aware of additional attendees at least 24 hours before the meeting.

2.3. Information from any previous concern or case may be introduced, provided that there was not a previous decision that there was no case to answer and the case closed without any record made of a concern or case.

2.4. The student must be informed in writing if previous findings and outcomes are being introduced and any notification must be provided within the specified time limit.

2.5. A student’s case can be referred directly to Stage 3 following consideration at an earlier Stage.
2.6. If a student does not accept the outcome at Stages 1 and 2, the student can either request for the case to be referred directly to Stage 3 or make an appeal under the University of Kent Appeals Procedure.

2.7. If a case is at Stage 0, 1 or 2 a student will normally be able to continue to be enrolled on the programme. If a case progresses to Stage 3 the Academic Lead for Student Life and Wellbeing will recommend to the KMMS Dean and the Programme Director if the student may remain on the programme or if the student needs to be neutrally withdrawn because of a potential risk to patients, the public, other students, staff or the student themselves.

2.8. Where a case is referred directly to Stage 3, the student will normally be neutrally withdrawn pending further investigation or required to attend a Stage 2 Student Support Panel while the investigation is ongoing if not withdrawn.

2.9. At the completion of meetings undertaken at any Stage, the student will be told in writing within 5 working days of the outcome or how the matter will proceed next.

2.10. If the student is unable to attend a scheduled meeting for good cause, and not because of an attempt to delay unnecessarily the proceedings, the Universities may halt the proceedings until the student can attend. This will be at the discretion of the Chair of the scheduled meeting. The student will be informed of the terms under which there is a halting of the proceedings and the arrangements for the progressing of case. The proceedings will commence when the student can attend or there is a change in the student’s circumstances such as self-withdrawal from the programme. Students will be encouraged to seek appropriate advice and support prior to making a decision of this nature.

2.11. As described in the KMMS Supporting Attendance Policy, if a student has unacceptable levels of attendance/engagement in a module, they cannot pass the module. If a student is unable to engage and participate in the programme due to their personal circumstances or is neutrally withdrawn from the programme and this threshold is passed, the student will have to interrupt their enrolment until the following academic year and restart the current academic year.

2.12. Once a student self-withdraws, is neutrally withdrawn or interrupts their enrolment, the student will not be permitted to re-join the programme until the case is resolved.

2.13. The intention is to complete the procedures as quickly as possible. It is aimed to undertake Stage 2 within twenty working days of the referral being made. The general exception to this is where notification is received outside the published term dates for the programme, when the aim is to undertake Stage 2 early resolution within forty working days. Should referral to a Stage 3 formal investigation be required following the conclusion of Stage 2, the twenty or forty-day time period will commence again. Should there be any delays in the investigation (for example awaiting receipt of an Occupational Health report or outcome of a court case) the student will be kept informed.

2.14. At all Stages within the procedures, there is an expectation that the appropriate redacted evidence held in relation to alleged issue(s) will be shared with the student concerned.
calendar days in advance of any meeting they are invited to attend. Where there are high levels of concern, the student may be provided with less than 7 calendar days’ notice of a meeting, in which case the appropriate redacted evidence should be shared with the student as soon as practicable. This may include within the meeting itself in some cases.

3. Stage 0 – Identifying the Concern

3.1. A potential concern relating to a student’s health or professional conduct may be brought to the attention of the Academic Lead for Student Life and Wellbeing, through the School’s raising concerns process, from one or more of several sources, including:

- self-referral by the student, for example the declaration of a criminal matter;
- members of KMMS staff, or the staff of either University;
- staff who work in placement provider organisations;
- fellow students;
- the police;
- members of the public;
- anonymous complaints, through a raising concerns process and ALERT forms or through the media.

3.2. If there is already a formal investigation by an outside agency of the fitness to practise issue, the referral may be paused at Stage 0 until this investigation is complete. The student will normally be neutrally withdrawn if this is the case.

3.3. Following a review of the notification and with the available evidence, the Academic Lead for Student Life and Wellbeing, or nominee, can decide on the following:

a. there is no impact on fitness to study or practise or any other breach of academic conduct or discipline and it can be resolved in line with the KMMS Student Life and Wellbeing Strategy. The case will be considered closed, and no detail will be added to the student record;

b. there is no impact on fitness to study or practise but there is a breach of academic conduct or discipline. The matter will be addressed in line with the School’s procedures, and a record made of the resolution, which will not be considered under any further proceedings under this Policy;

c. the matter is considered minor and singular and may be resolved at Stage 1. This may occur via a conduct or health route or overlap of both. There will be a record made of the resolution, which will be considered under any further proceedings under this Policy;

d. the issue does not indicate a breach of student threshold for professional standards that requires escalation to Stage 3, but it does demonstrate sustained or specific low-level concerns that require intervention under Stage 2. There will be a record made of
the resolution, which will be considered under any further proceedings under this Policy;

e. The issue does not indicate a breach of student threshold for professional standards that requires an escalation to Stage 3 but does raise concern of non-academic misconduct and is therefore referred to the KMMS Non-Academic Disciplinary Procedures, with a recording made of the referral and the nature of the concern

f. that the issue breaches the student threshold for professional standards but requires the convening of a Stage 2 Student Support Panel concurrent with an investigation at Stage 3.

g. that the issue breaches the student threshold for professional standards and/or concerns final year students with no time for remediation and following agreement from the Dean of KMMS, the student will be referred directly to Stage 3.

4. Stage 1 – Establishing and Addressing Minor or Singular Low-Level Concerns with a View to Early Resolution

4.1. If the Academic Lead for Student Life and Wellbeing determines, based on the evidence and in consultation with colleagues, that the issue does not indicate a breach of professional standards or a repetition of student behaviours that require the matter to proceed to a higher stage, there will be a discussion between the Academic Lead for Student Life and Wellbeing and the student with the opportunity for support mechanisms to be put in place. This may include an assessment by Occupational Health Services. An agreed record of the decision will be maintained. The record will form part of the student file and can be considered in conjunction with any future concerns.

4.2. The Academic Lead for Student Life and Wellbeing will proceed the case to Stage 2 (see below) if, based on the evidence, the issue is not capable of early resolution.

5. Stage 2 – Addressing Sustained, Repeated or Particular Low-Level Concerns Indicating Additional Support

5.1. If the issue does not indicate a breach of the student threshold for professional standards requiring escalation to Stage 3, but it does demonstrate sustained, repeated or particular low-level concerns that indicate the need for additional support, then the Academic Lead for Student Life and Wellbeing refers the student to the Student Support Panel.

5.2. The Academic Lead for Student Life and Wellbeing will convene, within 14 days, a Student Support Panel and provide a report for the Panel.

5.3. The Academic Lead for Student Life and Wellbeing will notify the student’s Personal Academic Tutor of the referral to the Student Support Panel.

5.4. The Student Support Panel comprises of:
• the Programme Director (Chair);
• the Year Lead (or nominee);
• the Student.

5.5. The student can ask Student Support Health and Wellbeing (including any support worker) or the Students’ Union for support in preparing for the Panel.

5.6. Students can be supported at any meetings by a member of staff, member of a Students’ Union (Kent Union Advice Centre or CCSU Advice) or another student of either University. It is a student’s responsibility to arrange for a supporter to attend. The meeting organiser must be made aware of any additional attendee at least 2 days before the meeting unless the student has been provided with less than 7 days’ notice of the meeting date. In such instances of short notice meetings, the student must make the meeting organiser aware of additional attendees at least 24 hours before the meeting.

5.7. If a student declines to attend the Panel, the Panel continues its work based on the evidence collected.

5.8. The purpose of the Student Support Panel is to be supportive in enabling the student to respond to low-level concerns and to accept remediation before progress is impaired or escalation to Stage 3 is required.

5.9. The Chair of the Student Support Panel or the Year Lead will write to the student within 7 days of referral to Stage 2 setting out the nature of the low-level concerns.

5.10. The Panel will have support from a Panel secretary appointed by the KMMS Quality Manager, who will be in attendance throughout the meeting and maintain a record.

5.11. The Academic Lead for Student Life and Wellbeing may attend the meeting to present the report and answer questions before withdrawing from discussions.

5.12. Following the meeting, the Chair or the Year Lead will write to the student within 5 working days to confirm the outcome of the meeting. This includes setting out how the outcome will be considered in any future proceedings under this Policy.

5.13. Potential outcomes for professional conduct include one or more of the following:

a) requiring the student to produce a written reflection on the issue(s), setting out the professional learning from the experience;

b) requiring the student to make a learning agreement to address the issues in practice, and to provide evidence of improvement and reflection;

c) requiring the student to take specified remedial action;

d) the issue of a warning, including a statement on the implications of repeating the behaviour;
5.14. Potential outcomes for health include one or more of the following:

a) no further action needs to be taken. It is considered the student will be able to maintain practice competence without reasonable adjustments. The case is closed by the Academic Lead for Student Life and Wellbeing and this is confirmed to the student in writing;

b) a further referral to OH for review of fitness to study and reasonable adjustments relating to the learning, teaching and assessment environment including practice;

c) reasonable adjustments can be considered without further consultation. This may be within the university environment and/or a requirement for adjustments in practice. The Academic Lead for Student Life and Wellbeing will meet with the student and any other relevant person (e.g., Student Support and Wellbeing Staff, Programme Director, Personal Academic Tutor or Educational Supervisor) to compile an Independent Learning Plan (ILP). The plan should be developed in a timely fashion following receipt of the OH recommendations and prior to the student’s next practice placement. At this meeting issues regarding their right to confidentiality should be discussed with the student. The student will be supported to advise appropriate colleagues of the OH recommendations to facilitate the implementation of any reasonable adjustments. The Academic Lead for Student Life and Wellbeing writes to the students to inform them of this outcome;

d) reasonable adjustments are proposed and require further consultation. Although the student has been cleared by OH, it may be necessary to make reasonable adjustments for a given learning, teaching and assessment environment including placement. The Academic Lead for Student Life and Wellbeing, a member of Student Support and Wellbeing associated with the case and from either university, and relevant Module Lead will determine whether such reasonable adjustments can be agreed and implemented. If this is not possible then the Academic Lead for Student Life and Wellbeing will decide in discussion with the Programme Director or nominee whether to refer the case to Stage 3;

e) student is not cleared by OH. The Academic Lead for Student Life and Wellbeing, relevant PD and relevant colleagues will discuss interruption of studies/ withdrawal options with the student. If this is mutually agreed, the PD will process the interruption/ withdrawal and notify the relevant parties. If an interruption or withdrawal cannot be mutually agreed with the student, the PD will report the matter to the Academic Lead for Student Life and Wellbeing, who together will decide whether to refer the case to Stage 3.

5.15. When the Stage is complete, the Academic Lead for Student Life and Wellbeing enters the outcome on the student record. The outcome, together with the Student Support Panel
papers, remains on file for one year after the last registered date. Information relating to the concern and outcome may be included on the student’s Panel form when they apply for posts on the UK Foundation Programme (UKFP), or in a School Reference if they apply for a non-UKFP post. Information relating to the concern may need to be transferred to Brighton and Sussex Medical School as part of contingency arrangements. The outcome will be considered in any subsequent proceedings under this Policy.

5.16. The Head of Year will monitor any action required by this outcome and provide the Panel with report(s) outlining whether the student is meeting requirements until the Panel agree there are no ongoing concerns. The Panel may continue to meet with the student until there are no ongoing concerns or the case is escalated to Stage 3.

5.17. If the student fails to engage with the recommendations or requirements without accepted mitigations for doing so, they will be referred to Stage 3 processes.

5.18. Before the final outcome of Stage 2 is confirmed there is a quality assurance check at the end of Stage 2. The purpose is to check the procedures have been followed and the recommendations are compatible with the relevant school and university regulations.

5.19. The person undertaking the quality assurance role will usually be the KMMS Quality Manager. The person undertaking the quality assurance role will not be the decision maker nor have the authority to influence decision-makers. Where there is a deviation from the procedures, this will be reported to the Chair for a revision to be made.

5.20. Once the quality assurance check is completed the Chair will write to the student to inform them of the outcome and at the conclusion of the Stage 2.

5.21. The outcome of the Panel will be attached to the student record. Any subsequent incidents may be considered in light of earlier warnings. The outcome will be kept on the student record for six years after the end of the student’s registration.

6. Stage 3 - Student Fitness to Practise Procedures

6.1. Where it is determined at any prior Stage that there are potential breaches by the student of the threshold for professional standards, Stage 3 procedures will begin with a formal investigation.

6.2. A Formal Investigating Officer (FIO) will be appointed from a group of members of academic staff designated by the Canterbury Christ Church University (CCCU) Faculty of Medicine, Health and Social Care Faculty Director of Quality. This is to provide consistency of approach and outcomes on matters related to low-level concerns, fitness to study and fitness to practise issues. The FIO will be appropriate to professional requirements and will not normally be drawn from KMMS staff but may be drawn from a member of the Faculty staff. The FIO will not be the student’s Programme Director, Personal Academic Tutor, or Educational Supervisor, or anyone else deemed to have a conflict of interest in acting as the FIO.

6.3. The FIO gathers evidence to decide on the following:
a) there is no case to answer and to close the case without any record made of the issue;

b) the issue has not breached the student threshold for professional standards and should be addressed under Stage 1;

c) the issue has not breached the student threshold for professional standards and should be addressed under the student academic conduct and disciplinary procedures alone;

d) the issue has not breached the student threshold for professional standards and should be addressed under Stage 2;

e) the issue has likely breached the student threshold for professional standards and should be referred to a student Fitness to Practise Panel.

KMMS may retain a response to the FIO investigation within the professionalism record except if the decision is as point a) above.

7. Terms of Reference of the Student Fitness to Practise Panel

7.1. To hear the case from the FIO and the student's response regarding the health or professional conduct matter that has been referred.

7.2. To determine if the evidence is found proven or not proven.

7.3. To determine whether any proven evidence indicates the student has breached required professional standards.

7.4. To determine any sanctions as appropriate.

7.5. To clearly document the decision-making process and the rationale for the determination taken.

7.6. To communicate the outcome to relevant parties indicating explicit reasons for the determination as appropriate.

8. Membership of the Student Fitness to Practise Panel

8.1. All Panels will be assigned a Chair and a Secretary by the CCCU Faculty of Medicine, Health and Social Care Faculty Director of Quality.

8.2. The Panel Secretary is provided by Canterbury Christ Church University (CCCU) Faculty of Medicine, Health and Social Care, and must be present during the meeting but they are not part of the decision-making process. The SFTP Secretary will minute the meeting and maintain the records.
8.3. None of the decision-making Panel will have any conflict of interest with the case or the student concerned.

8.4. The Secretary will convene a decision-making Panel that is appropriate to the programme of the student and the nature of the case under discussion.

8.5. In the case of a Fitness to Practise Panel concerning health issues, additional people with relevant expertise on the health issues being considered may be invited to the meeting. Their role is to advise the Panel only. They are not part of the decision-making process.

8.6. The composition of the Panel shall be as follows:

- a senior member of staff from within the Faculty of Medicine, Health and Social Care not directly connected with the School, who will act as Chair;
- for cases concerning a student on a programme accredited by a Professional, Statutory and Regulatory Body (PSRB) the Panel will include a senior member of academic faculty from another UK school accredited by the same PSRB who is recognised as a qualified professional by that PSRB and who holds a current licence to practise with that PSRB (or equivalent authority to practise);
- a student representative from the Faculty who does not know the student being investigated, and does not necessarily have to be a KMMS student.

8.7. Any external registered practitioners on the Panel must not be employed by the Universities or have any links to the student (for example through a previous practice placement experience) or have any other potential conflict of interest in being a member of the Panel.

8.8. There will be inductions and refreshers for Panel members who will be instructed in Equality and Diversity and Unconscious Bias, this Policy and procedures and other relevant statutory regulations and Codes in order to meet the expectations and requirements of the relevant Professional, Statutory and Regulatory Bodies.

8.9. All Panel meeting attendees will sign a confidentiality agreement.

9. Process for Convening and Hearing a Student Fitness to Practise Panel

9.1. Once Stage 3 has been invoked, the FIO will hand the case over to the Secretary.

9.2. The Panel will normally meet within 20 working days of the FIO handing over the case to the Secretary or keep the student informed if this is not possible.

9.3. The Panel meeting will normally take place on KMMS premises at either University.

9.4. The FIO will be responsible for presenting the student case to the Panel. Where the FIO is unable to make the presentation, the Canterbury Christ Church University (CCCU) Faculty of Medicine, Health and Social Care Fitness to Practise Lead will appoint an alternate to make the presentation. A written report, which includes a timeline of events
and pertinent evidence will be circulated to the Panel and the student in advance of the Panel meeting.

9.5. The documents and invitation to attend the Panel meeting will normally be sent at least ten working days before the meeting date. In exceptional cases, the Chair may permit the later submission or circulation of papers.

9.6. The student will be advised of their right to submit a written statement and any other relevant evidence before the Panel meeting; this must be sent to the Secretary at least three working days before the meeting date.

9.7. The student, their representative (see below) and the FIO are required to attend the Panel meeting and speak about the concerns raised. In exceptional circumstances and following approval by the Chair of the Panel, the student may attend by alternative means e.g., video conference.

9.8. Students can be supported at any meetings by a member of staff, member of a Students’ Union (Kent Union Advice Centre or CCSU Advice) or another student of either University. It is a student’s responsibility to arrange for a supporter to attend. The meeting organiser must be made aware of any additional attendee at least 2 days before the meeting.

9.9. In the case of the non-attendance of the student, the Panel will proceed in the student’s absence. If the student or other witness is unable to attend for a good reason, the Chair of the Panel should be notified. The Chair of the Panel will consider whether the reason for non-attendance is sufficient to require rescheduling the Panel.

9.10. Additional information should normally be provided a minimum of one full working day in advance of the Panel. This may be permitted to be tabled at meeting at the discretion of the Chair, or in certain cases the Panel may need to be reconvened at a later date for the information to be properly considered.

9.11. Members of the Panel may ask questions of the student and the FIO.

9.12. The student and FIO may also ask questions of each other to clarify factual matters only.

9.13. The Chair may adjourn proceedings if necessary and inform the student in writing of the arrangements for the reconvening of the Panel.

9.14. When all presented evidence has been heard the Panel will discuss the case in private and decide the outcome.

10. Decision Making by the Student Fitness to Practise Panel

10.1. Evidence associated with any case referred to the Panel will be thoroughly considered. The resultant outcome must be based on all the evidence presented. In order to apply sanctions, the Panel must be satisfied by the presented evidence that the student is not
fit to practise. The standard of proof is the same applicable to civil proceedings, that of the balance of probability. The burden of proof is on the Universities.

10.2. Panel members must exercise their professional judgement in reaching a conclusion regarding the outcome and sanction. They must ensure that if they require a sanction, it is proportionate to the breach of professional standards that initiated the procedure, and that it will deal justly and fairly with the fitness to practise issue(s). Sanctions must give primacy to the protection of the public and upholding public confidence in the profession.

10.3. If the student has a criminal conviction, the relevance i.e., those which are not ‘protected’ as defined by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (as amended), seriousness and circumstances in which the offence was committed must be taken into account. For example:

- the degree of risk posed to patients/ service users/ public;
- whether the conviction or caution was disclosed;
- the relevance of the offence to the chosen profession;
- the circumstances surrounding the offence;
- the student’s explanation of the offence;
- the student’s commitment to work safely and effectively, upholding the trust and confidence of patients/ service users.

10.4. The possible outcomes of the Panel hearing are as follows:

a) following consideration of the evidence the case is not proven. In this case the student receives no warning or sanction. However, the student should be supported to reflect on their situation and experience by a mutually agreed member of staff from either university;

b) following consideration of the evidence the case is proven (in part or in full). In this case the Panel will determine whether the facts as deemed proved constitute misconduct and impairment of fitness to practise, along with reviewing any mitigating or aggravating factors.

10.5. If the case is proven and the Panel determine that the student’s fitness to practise is impaired the Panel will decide a sanction or agreement of undertakings, beginning with the least severe, and proportionate to the risk to patients, service users and the public. The Panel may:

- agree undertakings;
- apply conditions;
- suspend the student from the programme;
- expel the student from the programme.

10.6. If the student is expelled from a relevant programme because they have been found unfit to practise, their name and personal data will be transferred to the Excluded Students
Database, maintained by the Dental Schools Council, Medical Schools Council, Pharmacy Schools Council, Veterinary Schools Council.

10.7. The list of sanctions is indicative; alternative sanctions may be made as appropriate to individual cases.

10.8. Where a sanction is applied the student will be offered support from a mutually agreed member of staff from either university.

10.9. The Panel may also recommend that the student is offered pastoral support as appropriate.

10.10. Where the sanction applied involves the student undertaking remedial action (e.g. through a formal learning agreement), the Panel should specify how compliance with the conditions will be measured and who will be responsible for monitoring. It should also make clear to the student the consequences of breaching any conditions.

10.11. If the Panel comes to a view that wider public interests may be involved, the Panel may recommend to the Universities that case should be referred to other agencies, such as the Disclosure and Barring Service.

10.12. The outcome of the Panel will be recorded, and then communicated by the Chair, to the student, and other relevant parties within five working days. The determination letter should also make clear the requirements for disclosure to the GMC when the student applies for provisional registration and when they complete a STEP form.

10.13. The outcome of the Panel will be attached to the student’s file. Any subsequent incidents may be considered in light of earlier warnings. The outcome will be kept on the student’s file for six years after the end of the student’s registration.

10.14. If something comes to light during the Panel proceedings that raises concerns and/or highlights risk to the student, service users or others and requires disclosure to an external agency, a decision will be taken by the Panel and actioned by the Chair and will be recorded in the minutes.

10.15. Within five working days, the Secretary informs the student in writing of the Panel’s decision, and the right to appeal within twenty working days of the date of the Panel’s decision. Appeals relating to Fitness to Practise are made to the Student Procedure Office at Canterbury Christ Church University.

10.16. The student must make their appeal within twenty working days of the date of the written notice.

10.17. In exceptional circumstances, the Student Procedures Office may extend the time allowed for submission of an appeal for good cause. Such circumstances might include, but are not limited to, the student being ill or having other pressing reasons for delay.

10.18. The grounds for the appeal are:
10.19. If the Case Officer decides there are no grounds for appeal, the reasons will be set out in writing. The student can request a review, which needs to include explaining the reasons for contesting the decision. A Reviewer will undertake a review of the decision. The Reviewer is a member of the Senior Management Team of either University from outside the Canterbury Christ Church University (CCCU) Faculty of Medicine, Health and Social Care and KMMS.

10.20. If the Reviewer decides there are grounds for appeal, the case will be considered following the procedures set out below.

10.21. If the Reviewer decides there are no grounds for appeal, the decision represents the completion of the internal procedures. The student may complain to the Office of the Independent Adjudicator for Higher Education (OIA). Canterbury Christ Church University (CCCU) Assistant University Secretary issues a Completion of Procedures Letter within twenty working days of the date of the Reviewer’s decision.

11. Appeal Arrangements if the Decision Leads to Exclusion or Expulsion

11.1. A Case Officer appointed by the Student Procedures Office at Canterbury Christ Church University constitutes an Appeals Panel, which consists of three members. The Panel will include:

- a senior member of staff from outside the Faculty;
- for cases concerning a student on a programme accredited by a Professional, Statutory and Regulatory Body (PSRB) the Panel will include a senior member of the profession accredited by the same PSRB who is recognised as a qualified professional by that PSRB and who holds a current licence to practise with that PSRB (or equivalent authority to practise);
- a senior member of Academic Faculty outside KMMS.

11.2. The Case Officer explains to the student in writing the arrangements for the hearing.
11.3. The Case Officer convenes a meeting with the student not later than ten working days after notification of this procedure to the student.

11.4. The purpose of the meeting is to determine whether the decision-making process followed the procedures and any new material facts that have become known after the meeting of the original SFTP Panel met. This will include a review of the facts of the case.

11.5. The purpose of the meeting is not to reverse or amend the decision made by the original SFTP Panel, it may only recommend that a fresh SFTP Panel should be convened if it judges that a matter within its remit requires this to happen.

11.6. When attending in person, the right for a friend to accompany the student to any meeting. In all cases, the friend may speak on behalf of the student at the student’s request/instruction.

11.7. If the student declines the offer of the meeting, the basis for the review will be the evidence collected and provided to the Appeals Panel.

11.8. If the Appeals Panel considers the decision-making process of low-level concerns or fitness to practise concerns followed the procedures, this represents the completion of the internal procedures.

11.9. If the Appeals Panel does not consider that the decision-making process followed the procedures, the Appeals Panel will determine that there should be a fresh SFTP Panel to hear the case.

11.10. The final decision is to be sent to the student in writing within seven days of the meeting unless there is a need to collect further information. Notification of the need to collect further information is also sent to the student within seven days of the meeting.

11.11. On completion of the internal procedures, the student may complain to the Office of the Independent Adjudicator for Higher Education (OIA). Canterbury Christ Church University (CCCU) Assistant University Secretary issues a Completion of Procedures Letter within twenty working days of the date of the letter.

11.12. The KMMS Academic Lead for Student Life and Wellbeing enters the outcome on the student’s course file. Any subsequent incidents may take account of earlier warnings. The outcome, together with the Panel papers, remains on file for six years after the last registered date.

12. Appeal Arrangements if the penalty does not lead to exclusion or expulsion

12.1. If the penalty does not lead to exclusion or expulsion, the student may appeal against the Panel’s decision. Appeals are made to the Student Procedures Office at Canterbury Christ Church University.

12.2. The student is to make the appeal within ten working days of the date of the written notice.
12.3. In exceptional circumstances, the Student Procedures Office may extend the time allowed for submission of an appeal for good cause. Such circumstances might include, but are not limited to, the student being ill or having other pressing reasons for delay.

12.4. A Case Officer appointed by the Student Procedures Office at Canterbury Christ Church University identifies a Reviewer for the matter.

12.5. The Reviewer is a member of the Senior Management Team of either University from outside the Canterbury Christ Church University (CCCU) Faculty of Medicine, Health and Social Care and KMMS.

12.6. The purpose of the review is to determine whether the decision-making process followed the procedures. This will include a review of the facts of the case.

12.7. If the Reviewer decides that procedures were followed and/or that any new material facts that have become known after the meeting of the original SFTP Panel met should not affect the decision made by the SFTP Panel then no further action should take place and this represents the completion of the internal procedures.

12.8. If the Reviewer does not consider that procedures were followed and/or that any new material facts that have become known after the meeting of the original SFTP Panel met should affect the decision made by the SFTP Panel then they will determine that there should be a fresh SFTP Panel to hear the case.

12.9. The aim is to complete the review within twenty working days of acknowledgment of receipt. The general exception is if the acknowledgment is outside the published term dates. In these circumstances, the aim is to complete the investigation within forty working days of the acknowledgement.

12.10. On completion of the internal procedures, the student may complain to the Office of the Independent Adjudicator for Higher Education (OIA). Canterbury Christ Church University (CCCU) Assistant University Secretary issues a Completion of Procedures Letter within twenty working days of the date of the letter.

12.11. The KMMS Academic Lead for Student Life and Wellbeing enters the outcome on the student record. Any subsequent incidents may take account of earlier warnings. The outcome, together with the Panel papers, remains on file for one year after the last registered date.
Appendix A: Procedure Flow Chart

STAGE 0
Alert Form Received

STAGE 0
Review by Academic Lead SLW

STAGE 1
Early Resolution by Academic Lead SLW

STAGE 2
Student Support Panel

STAGE 3
FIO Investigation

STAGE 3
Fitness to Practise Panel

Ongoing Monitoring by Academic Lead SLW

No Additional Action (Case Closed)

Referred to Non-Academic Discipline