

Professional Capability & Fitness to Practise Policy

1. Introduction and values

- 1.1. Queen Mary University of London aims to deliver an outstanding, inclusive, world-class education that aligns with our core values: inclusive, proud, ambitious, collegial and ethical.
- 1.2. The General Medical Council and General Dental Council require students on registered healthcare professions to demonstrate high standards of behaviour at all times, which justifies the trust placed in them as members of their future profession.

2. Purpose

- 2.1. This policy outlines the University's procedures for ensuring that students on programmes regulated by the General Medical Council and General Dental Council PSRBs maintain the expected standards of health and behaviour, and addressing concerns raised about the professionalism or fitness. The policy sets out the rights and responsibilities of students and staff during the process, and the principles that guide the University's procedures.

3. Scope

- 3.1. This policy applies to students registered on programmes that lead to professional registration with the General Dental Council or General Medical Council, specifically:
 - a) MBBS
 - b) BDS
 - c) MSc Physician Associate Studies
 - d) Diploma in Dental Hygiene and Dental Therapy
 - e) BSc in Oral Health
 - f) Certificate in Clinical Foundation Studies

- 3.2. This policy applies to all matters that give rise to concerns about a student's professionalism or fitness to practise, regardless of whether they occur on or off campus, or directly involve the Queen Mary community.
- 3.3. Where a student is withdrawn from their programme, either voluntarily or initiated by the University, and there are pending concerns about their fitness to practise, this policy and procedures will continue to apply until the conclusion of the fitness to practise proceedings.

4. Principles

- 4.1. Where concerns are raised about a student's professionalism and/or fitness to practise, the University is responsible for demonstrating that the concern is proven on the balance of probabilities.
- 4.2. If a professionalism or fitness to practise concern is found, when determining any remedial action or sanction, the University will take into account:
 - a) Any action necessary to safeguard patients and the public
 - b) The severity of the concern and implication for the student's fitness to practise
 - c) The student's level of study and experience
 - d) The student's previous conduct; persistent or repeated concerns are likely to result in more serious actions or outcomes
 - e) The insight, reflection and/or contrition displayed by the student
 - f) Any mitigating and/or aggravating factors presented
- 4.3. The principles of natural justice underpin these procedures. This means that a student will have the right to be informed of any concerns about their professionalism and/or fitness to practise, to access support and representation during the process, and to be informed of any evidence taken into account in reaching a decision about them.
- 4.4. Anonymous testimony will not be relied upon as evidence; any action taken arising from anonymous reports about concerns will normally be supported by independent and verifiable evidence that supports the case in its own right.
- 4.5. Where a Committee member has a close professional relationship, personal connection, or other involvement either with the student or concern, they will not participate in any hearing or decision-making.
- 4.6. Queen Mary recognises that misconduct matters can be challenging or distressing for students, and strives to ensure that the procedures are accessible, inclusive, supportive and educational. Students are strongly encouraged to engage with the

procedures in good faith. Should a student decline to engage, or fail to attend any activity required, the process is not invalidated by their absence.

- 4.7. At any time during these procedures, members of the Professional Capability Committee or Fitness to Practise Committee may refer a student to support services and/or occupational health assessment.

5. Roles and responsibilities

- 5.1. The General Medical Council and General Dental Council set standards and expectations for healthcare professionals, and students registered on programmes leading to professional registration.
- 5.2. The University is responsible for confirming that a student is fit to practise in their chosen profession upon graduation.
- 5.3. Students are responsible for familiarising themselves with the professional standards required, engaging proactively with support, and ensuring that their conduct and behaviour meet the expectations of their profession.
- 5.4. The Vice Principal (Health) is responsible for nominating members of the Professional Capability Committee and Fitness to Practise Committee. Senate is responsible for confirming the appointment of nominees.
- 5.5. Queen Mary Students Union is responsible for appointing student representative members of the Professional Capability Committee and Fitness to Practise Committee. For the Professional Capability Committee this is normally the President of BLSA.
- 5.6. Chairs of the Professional Capability Committee and Fitness to Practise Committee hold overall responsibility for the conduct of the Committee and decision-making in line with this policy.
- 5.7. Committee members are responsible for reviewing the documentation in advance of meetings or hearings, participating in decision-making and undertaking all training required of the role.
- 5.8. The Appeals, Complaints & Conduct Office will present an annual report to the Education Quality Standards Board and Senate with statistics about professionalism and fitness to practise cases, and compliance with any relevant training requirements.
- 5.9. The Faculty of Medicine and Dentistry are responsible for reporting findings and information required to the relevant professional bodies.

6. Definitions

- 6.1. **Professionalism** refers to the way a student takes responsibility for, and

demonstrates, the appropriate standards, attitudes and behaviours required by their profession, and their ability to meet the requirements of the programme. Persistent concerns about a student's professionalism may give rise to concerns about their fitness to practise.

- 6.2. **Fitness to Practise** refers to a student's health, behaviour and competence being compatible with the standards expected for practise in their profession, and justifying the trust placed in them by society and patients. Decisions about fitness to practise are based on risks posed to patients and members of the public, or actions that undermine public trust.
- 6.3. **Minor restrictions on activity** refer to selective, specific and limited restrictions on participation in activities or access to locations which do not call into question a student's status and do not unduly affect their access to learning opportunities. Examples include a no contact instruction, timetable change, limited access to extra-curricular activities or facilities, or the requirement to refrain from undertaking certain actions.
- 6.4. **Exclusion** means the selective restriction on attendance at, or access to, Queen Mary premises or activities, as specified by Queen Mary.
- 6.5. **Suspension** means the total prohibition on attendance at, or access to, Queen Mary premises and participation in activities.
- 6.6. **Expulsion** means the immediate termination of a student's registration.
- 6.7. **Witness** refers to any person who has factual knowledge and credible information to provide about an incident being investigated.
- 6.8. **Character Reference** refers to any person who provides commentary on the character of individuals who are party to any investigations.
- 6.9. **Representative** refers to a person who provides professional advice and/or submissions on behalf of a student during the process.
- 6.10. **Support person** refers to someone who accompanies a student during the process to provide pastoral and moral support but is not actively involved in the proceedings.
- 6.11. **Undertakings** are remedial actions that a student voluntarily agrees to complete. Undertakings are normally appropriate where the student has shown genuine insight into the concern and wants to resolve this, or where a student is proactively seeking help or support that would satisfy any conditions that might be set.
- 6.12. **Conditions** are specific actions, restrictions or objectives that a student must comply with. Conditions normally relate to: measures required to protect patients; areas of study or competence where the student needs further development or assessment; treatment and supervision of a health condition. Conditions are

normally appropriate where the student's fitness to practise is impaired, but they have shown insight and there is a realistic prospect of them completing the programme.

7. Precautionary Action

- 7.1. To protect the safety and wellbeing of the community and/or to preserve good order, Queen Mary may take precautionary measures pending fitness to practise proceedings. The purpose of precautionary action is always to mitigate risk and never intended as a penalty, it is a neutral action and is not premised on the assumption of guilt.
- 7.2. Precautionary action will be considered as part of a risk assessment exercise that documents the reasons for any recommended action or detail of why it is not necessary. The starting point for any precautionary action is that the least restrictive step necessary will be considered to mitigate the risks identified, together with any additional supportive measures recommended to support the student(s) involved in the matter. A student will be provided with reasons for any precautionary action, as identified during the risk assessment.
- 7.3. Precautionary action may be authorised by:
 - a) Chair of the Professional Capability Committee or Fitness to Practise Committee for minor restrictions on activity that do not impact the student's status.
 - b) Director of Institute for restrictions or exclusion from campus, clinical or education activities.
 - c) Vice-Principal for suspension from Queen Mary.
- 7.4. Precautionary measures are normally imposed with immediate effect and remain in place until the fitness to practise proceedings have concluded. However, the precautionary measures may be reconsidered in the event of new information which may be made known during the investigation or if the student(s) status changes.
- 7.5. Queen Mary may exercise discretion to permit specific and limited exceptions to any precautionary measure where there is a good reason to do so, and may place appropriate conditions to this exception. For example, to permit a student to access support.
- 7.6. A student subject to precautionary measures will be informed of reasons for the decision, support available to them, and their right to appeal the measures. An appeal against a precautionary measure does not involve a (re)hearing of the matter pending investigation but will consider whether the measures are proportionate and necessary.
- 7.7. Appeals against precautionary measures imposed by the Chair of the Professional Capability Committee or Fitness to Practise Committee will normally be considered by the Director of Institute.

- 7.8. Appeals against precautionary measures imposed by the Director of Institute will normally be considered by the Vice-Principal.
- 7.9. Appeals against precautionary measures imposed by the Vice-Principal will normally be considered by the President & Principal.

8. Professional Capability Committee

- 8.1. The Professional Capability Committee is responsible for reviewing concerns raised about students' health and behaviour, reaching decisions about the appropriate course of action to manage or address concerns, and monitoring progress and completion of remedial actions agreed under this policy.
- 8.2. Regular meetings of the Professional Capability Committee will normally be attended by all appointed members. However, the absence of a member does not invalidate the meeting. The Committee will be considered quorate when there are at least three members in attendance, at least one of whom is a Chair or Deputy Chair of the Committee, and one is a registered doctor or dentist (depending on the programme of the student in question).
- 8.3. A member of professional services staff from the Faculty of Medicine and Dentistry will act as Secretary to the Committee. The Secretary provides procedural and regulatory advice but is not a decision-maker.
- 8.4. On receipt of an initial report about a concern, the Committee will decide on appropriate action:
 - a) That the concern should be dismissed
 - b) That the matter is a minor concern that does not warrant further action under this policy; the matter will be closed but a note may be recorded and/or the student may be referred to support and developmental activities.
 - c) That the matter should be investigated and returned for further consideration on completion of the investigation.
 - d) That the student's fitness to practise may be impaired, and the matter should be referred directly to the Fitness to Practise Committee for consideration.
- 8.5. When reviewing a matter that has been investigated and returned to the Committee for consideration, or where the matter has already been investigated and a finding reached under another procedure, the Committee may decide on appropriate action:
 - a) That the concern should be dismissed
 - b) That the matter is a minor concern that does not warrant further action under this policy; the matter will be closed but a note may be recorded and/or the

student may be referred to support and developmental activities.

- c) That there is a professional capability concern; the Committee may issue a warning or confirm undertakings.
 - d) That the student's fitness to practise may be impaired, and the matter should be referred to the Fitness to Practise Committee for consideration.
- 8.6. Decisions made by the Professional Capability Committee will normally be communicated to students within one week, and reasons for the decision will be provided.
- 8.7. Where the Professional Capability Committee has decided that there is a concern and set any course of action in line with paragraph 8.5 (c), the student will have the right to appeal this decision as set out in section 11.

9. Investigations

- 9.1. Where proportionate and necessary, either the Professional Capability Committee or Fitness to Practise Committee may appoint an investigator to gather evidence and information about a concern. In all cases, the investigator will be an independent person who has not had prior involvement in the matter.
- 9.2. Where the concern relates to a finding made under another procedure (for example, a finding of misconduct or related to fitness to study) or criminal proceedings, this will not normally be reinvestigated. A student may be invited to provide a statement for consideration.
- 9.3. An investigation will normally be completed within 5 weeks, except where a student requests additional time as a reasonable adjustment or for other good reason.
- 9.4. On receipt of a report, the investigator may make preliminary enquiries and gather available evidence about the matter and circumstances to inform their understanding of the specific concern(s) subject to the investigation.
- 9.5. The student will be informed of the concerns to be investigated and provided with information about the investigation process, their rights, and the support available.
- 9.6. The investigator will normally meet with the responding student to hear their account of the incident(s) being investigated, although the student may submit a written statement in place of attending a meeting.
- 9.7. The investigator may meet with other witnesses and/or individuals with knowledge of the matter, as they deem proportionate and necessary.
- 9.8. A member of the Professional Capability Committee may invite the student to meet

with them, should the Committee consider this necessary. The meeting may be in addition to, or as part of, any investigatory meeting.

- 9.9. Notes and/or recordings of all meetings conducted as part of the investigation will be stored securely and included in the investigation casefile.
- 9.10. The investigator will provide the student an opportunity to present any evidence they wish to be considered, together with the names of any witnesses (who will be contacted by the investigator). Evidence may include photographs, screenshots, messages, receipts, recordings, artefacts or independent professional evidence (such as medical certificates). Evidence which contains the personal information of third parties which cannot be verified, or hearsay evidence, will be afforded less evidentiary weight.
- 9.11. Where there are concerns for the health and/or wellbeing of the student, a referral to the occupational health service may be made.
- 9.12. The casefile containing all evidence gathered during the investigation and a summary of the facts will be shared with the student and the relevant Committee at the conclusion of the investigation.

10. Fitness to Practise Committee

- 10.1. The Fitness to Practise Committee is responsible for hearing cases referred to it by the Professional Capability Committee, from another procedure where a finding of misconduct has been made, or arising from a criminal conviction.

Membership

- 10.2. The Fitness to Practise Committee will normally include:
 - a) A senior staff member from the Faculty of Medicine & Dentistry acting as Chair
 - b) One member of staff from the Faculty of Medicine & Dentistry who is registered as a doctor or dentist (depending on the programme of the student)
 - c) An external member who is registered as a doctor or dentist (depending on the programme of the student)
 - d) A student representative, nominated by Queen Mary Students' Union
- 10.3. All Committee members will be independent, having no prior involvement in the matter or any prior relationship with parties involved.
- 10.4. All Committee members must complete training on an annual basis. Where the matter under consideration includes any form of harassment or sexual misconduct, members must have completed an additional component of specialist training.

- 10.5. The Committee will be considered quorate with at least three members, although all reasonable attempts will be made to secure four members; this may include substituting a member with another senior member of staff from the Faculty of Medicine & Dentistry.
- 10.6. The Committee will be accompanied by a non-voting Secretary. The Secretary provides procedural and regulatory advice, and is responsible for recording notes of the proceedings.
- 10.7. The Committee may request independent legal advice, or specialist medical advice if the case relates to health concerns.

Committee hearings

- 10.8. The Secretary will circulate all relevant documentation, including all available evidence and details of the date, time and location/format of the hearing, at least seven days before the date of the hearing.
- 10.9. The Fitness to Practise Committee is a decision-making body and does not normally reinvestigate a case where the concern has arisen following the conclusion of a separate process. Committee members will carefully review all evidence and information contained in the casefile and documentation circulated prior to the hearing.
- 10.10. Any written statement or representation that the student wishes to present to the Panel in writing must be received at least 3 working days before the hearing, so that there is sufficient time for the statement to be circulated and reviewed by all parties.
- 10.11. A Queen Mary representative attends the hearing to present the case on behalf of the University. This will normally be the nominated investigator where the matter has been investigated under this policy.
- 10.12. Where a student decides not to attend the hearing, the Committee will reflect on any evidence or statement they have previously provided and will normally still reach a decision based on the information available.
- 10.13. A reporting student may be accompanied to the hearing by one representative. Additionally, or alternatively, they may be accompanied by a support person, who is not permitted to address the Committee.
- 10.14. The hearing will normally be conducted as soon as reasonably possible. Where a student requests the hearing be postponed or rescheduled, they must provide good reason and evidence to support the request. The Chair has the discretion to accept or decline the request and will consider the potential impact on the student and any risks to members of the public or the professional, when reaching their decision. Personal travel, work commitments or the unavailability of a representative or support person are not normally 'good reason'.

- 10.15. The Chair is responsible for the conduct of the hearing and holds the final decision on all matters of procedure during the hearing. The Chair may adjourn the hearing to seek advice or consult other Committee members.
- 10.16. The student will be invited to address the Committee, and may present any mitigating circumstances that they wish to be considered.

Decision-making

- 10.17. At the conclusion of the hearing, the Committee will deliberate in private and all outcomes will be reported as a decision of the Committee as a whole. If the Committee is divided on any matter, the Chair will have the casting vote.
- 10.18. The Committee will first decide whether or not the student's fitness to practise is impaired. They will take into account the expectations and guidance set by the relevant professional body in reaching this decision.
- 10.19. If the Committee decides that the student's fitness to practise is not currently impaired, the matter will be closed and no further action taken. The Committee may reach this decision either because the student has sufficiently addressed the concerns, or because the Committee does not consider the concern to be sufficiently demonstrated or of sufficient seriousness. The Committee may identify some issues that warrant informal action and may recommend that the student should undertake some supportive or developmental activities. These informal outcomes are not intended to be punitive but are intended to help the student to continue to meet professional expectations in the future.
- 10.20. Where the Committee decides that a student's fitness to practise is impaired, they will take one or more actions as appropriate:
- a) Issue a formal warning
 - b) Agree undertakings, including the objectives, timeframes and criteria that the undertakings are expected to satisfy.
 - c) Set conditions, including the objectives, timeframes and criteria that must be met in order for the conditions to be satisfied.
 - d) Suspension from Queen Mary for a specified time period.
 - e) Exclusion from a specified activity, location or part of a programme, for a specified time period.
 - f) Terminate the student's registration on the programme, but permit the student to either register on an alternative programme or to be considered for an alternative award.
 - g) Terminate the student's registration on the programme and recommend to the

Principal that the student be expelled from Queen Mary. The Principal will either accept the recommendation or apply an alternative outcome.

- 10.21. The student will be notified of the outcome and reasons for the decision, normally in writing within 7 days. As a reasonable adjustment, students may request to be informed of the outcome in person, via an online call, or at a specified time when they are accompanied by a support person.

11. Appeals

- 11.1. Where a concern has been found by either the Professional Capability Committee or the Fitness to Practise Committee, a student may appeal this decision and/or any remedial action or sanction set by the Committee.
- 11.2. Appeals should be submitted within 14 calendar days from the outcome. The Head of the Appeals, Complaints & Conduct Office has discretion to accept late appeals where there is a good reason for the delay.
- 11.3. New evidence or issues will not be considered unless the student can demonstrate good reason why that information was not previously made available.
- 11.4. The appeal will first be considered by a nominated member of the Appeals, Complaints & Conduct Office who has had no prior involvement in the case. They will review the appeal submission and decide whether there is sufficient evidence or reason that either of the following grounds may be met:
- a) that the procedures were not followed appropriately
 - b) that the outcome was not reasonable in light of the available evidence.
- 11.5. A student will normally be informed of the outcome of this decision within 21 calendar days.
- 11.6. If there is sufficient reason and evidence that either of the grounds has been met, the decision-maker will refer the case for rehearing by the relevant Committee. A Fitness to Practise Committee called to rehear a case after appeal will normally have new membership, but align with the same membership composition requirements and be conducted according to the same procedures as set out above. The outcome of the rehearing will replace the previous outcome, and be communicated to the student in a Completion of Procedures letter.
- 11.7. If the decision-maker decides that the appeal submission does not provide evidence or reason that either of the applicable grounds have been met, the original decision will stand and the outcome will be communicated via a Completion of Procedures letter.
- 11.8. Queen Mary subscribes to the Office of the Independent Adjudicator for Higher Education student complaint scheme. Where a student remains dissatisfied at the

completion of Queen Mary's internal procedures, they may submit a complaint for review by the OIA. Information about the OIA and a student's rights to access this scheme will be provided in any Completion of Procedures letter.

12. External reporting

- 12.1. Students and the University are required to make declarations about fitness to practise proceedings or outcomes to their professional body when applying for provisional registration.
- 12.2. Where a student has been deregistered from their programme by the Fitness to Practise Committee, this will be reported to the Medical School's Council or Dental Schools Council for recording on their database of excluded students.

13. Review

- 13.1. This policy will be reviewed at least every five years.
- 13.2. Minor updates to this policy that do not affect the rules, principles or intent of this policy may be approved by the Director of Governance & Legal Services and reported to Senate.

Appendices

Regulatory Context

General Medical Council

The General Medical Council provides guidance on the professionalism and fitness to practise for medical students, physician associate students, and students on a clinical foundation programme.

[Achieving good medical practice: guidance for medical students](#) sets out the expected standards of behaviour for students of these professions, which justifies the trust placed in them by patients and members of the public. The guidance covers expectations with regard to:

- Knowledge, skills and development
- Patients, partnership and communication
- Colleagues, culture and safety
- Trust and professionalism
- Professionalism & behaviour outside of the medical school

The GMC also sets out [guidance for universities](#) about handling professionalism or fitness to practise concerns, which informs the procedures set out in this policy. When implementing this policy, decision-makers will have regard for certain criteria set out in this guidance, including but not limited to:

- [Thresholds for considering that a student's fitness to practise may be impaired](#), paragraph 80-82.
- [Reasons for impairment](#), Table 1.

Consideration of any professionalism or fitness to practise concern related to a student on a programme leading to registration with the GMC will have regard to the expectations, standards and thresholds set out by the GMC in this guidance.

General Dental Council

The General Dental Council provides guidance on the professionalism and fitness to practise for dentistry students and students on oral health, dental hygiene and dental therapy programmes.

The GDC guidance [Student Professionalism and Fitness to Practise: Standards for the dental team guidance for students](#) sets out the expected standards for students of these professions, which justifies the trust placed in them by patients and members of the public. The guidance covers expectations with regard to:

- Student professionalism and fitness to practise
- The standards expected of students
- Professional duty of candour
- Social Media
- Actions and behaviours expected of students preparing to become dental professionals

The GDC also sets out [guidance for universities](#) about handling professionalism of fitness to practise concerns, which informs the procedures set out in this policy. When implementing this policy, decision-makers will have regard for certain criteria set out in this guidance, including but not limited to:

- The nine ethical standards required of the dental team, page 6
- Categories of concern, pp. 9-10
- Applying the threshold for fitness to practise, pp. 19-20
- Sanctions: conditions, undertakings, suspension and expulsion, pp. 24-26

Consideration of any professionalism or fitness to practise concern related to a student on a programme leading to registration with the GDC will have regard to the expectations, standards and thresholds set out by the GDC in this guidance.

Relationship to other procedures

Any finding of misconduct under the Academic Integrity & Misconduct Policy or the Student Disciplinary Policy will be referred to the Fitness to Practise Committee for consideration. Where the misconduct has been upheld, Fitness to Practise Committee does not rehear the case but will decide whether or not the student's fitness to practise is impaired and, if so, consider the appropriate outcome(s).

Where a student registered on a relevant professional programme is expelled from Queen Mary under the Academic Integrity & Misconduct Policy or the Student Disciplinary Policy, they will be added to the applicable excluded student database and/or other external declarations may be made to the relevant PSRB.

Where a breach of any other codes of practise, policy or regulation at Queen Mary or a placement provider has been found to occur, these will be reported to the Professional Capability Committee for consideration.

Students are required to make declarations and disclosures about matters which may give rise to professionalism and/or fitness to practise concerns, including but not limited to the annual declaration and disclosure process. Disclosures will normally be considered by the Professional Capability Committee, except where a student has been convicted of a criminal offence, which will normally be referred directly to the Fitness to Practise Committee.

Where information comes to light through any student support or pastoral care process that may give rise to a concern about a student's professionalism or fitness to practise, the information is referred to the Professional Capability Committee for consideration.

Alcohol and drug testing

As part of an investigation or outcome reached under this policy, a student may be required to undertake alcohol and/or drug testing.

All testing for alcohol and/or drugs will be conducted via referrals to the occupational health service.

The student will be informed of what they will be test for, the method of testing, and the chain of custody procedure for any test samples and results.

The student is expected to comply with requests for alcohol and/or drug testing in support of their continued registration. Should a student decline to be tested or decline to share results, this will be considered by the Professional Capability Committee.

Where a positive result is returned, the student will have the opportunity to provide a response before the Professional Capability or Fitness to Practice Committee decide on any appropriate action.