

**Policy Advisory Committee** 13 October 2016 Student fitness to practise guidance review update

Classification **Public** 

**Purpose** For decision

**Issue** An update on the review of guidance on student fitness

to practise

**Recommendations** To agree to publish the Guidance on Student Fitness to

Practise subject to any further comments received from

Osteopathic Educational Institutions.

implications

**Financial and resourcing** There will be a small cost incurred in designing the documents for publication which is contained within the

Professional Standards/Communications budgets.

**Equality and diversity** 

implications

An equality impact assessment will be published

alongside the revised guidance documents.

**Communications implications** 

Contained within the report.

**Annexes** 

Α. Student Fitness to Practise: Guidance about professional behaviours and fitness to practise for

osteopathic students

Student Fitness to Practise: Guidance for B. Osteopathic Educational Institution

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# **Background**

- 1. The GOsC issues guidance on Student Fitness to Practise and on Student Health and Disability, in the following documents:
  - a. Student Fitness to Practise: Guidance about professional behaviours and fitness to practise for osteopathic students
  - b. Student Fitness to Practise: Guidance for Osteopathic Educational Institution<sup>1</sup>
- 2. These documents originally date from 2012. The fitness to practise guidance was written before the publication of the Francis Report and issues such as the duty of candour became prominent within healthcare.
- 3. The guidelines have therefore been reviewed in the light of developments within osteopathy, osteopathic education, and healthcare regulation generally over the last five years.
- 4. The aim of the guidance is to provide guidance to applicants, students and Osteopathic Educational Institutions (OEIs) on issues relating to professional behaviours and fitness to practise, including processes for managing these within OEIs. This will help students, and those considering becoming students of osteopathy, understand the expectations of them regarding professional behaviours, and issues which might lead to concern. Detailed guidance regarding the management of professional behaviour and Fitness to Practise issues is provided to aid OEIs, and to enhance the understanding of students in this respect.
- 5. A review was conducted of similar guidance on fitness to practise and professional behaviours, issued by other healthcare regulators, to gauge current developments and activity within the sector.
- 6. As part of the initial review process, each of the osteopathic educational institutions (OEIs) were contacted with a set of questions regarding their experience in utilising the guidance documentation. Where practicable, face-to-face meetings were held with representatives of OEIs to explore their views and experiences in more depth.

### 7. Initial revisions included:

 The provision of more detailed guidance to students on professional behaviours, and the expectations on them, giving specific examples of the types of activities or behaviours which might call their fitness to practise into question. Case examples were developed to aid with this.

<sup>&</sup>lt;sup>1</sup> Both available at <a href="http://www.osteopathy.org.uk/news-and-resources/publications/student-fitness-to-practise-guidance/">http://www.osteopathy.org.uk/news-and-resources/publications/student-fitness-to-practise-guidance/</a>

- Enhanced reference to the duty of candour and 'whistleblowing/'speaking up'.
- Guidance regarding boundaries. This includes boundaries between students in the context of practicing osteopathic techniques on each other, and on the question of relationship boundaries between teaching staff and students.
- 8. A three month consultation process took place until June 2016.
- 9. This report details the outcomes of the consultation process, and of the subsequent changes that have been made to the guidance documents.

# **Consultation process**

- 10. The draft documents were publicised on the GOsC website. Details of this were specifically sent to stakeholders, including osteopathic educational institutions, other regulators, the Institute of Osteopathy, The Department of Health, The Professional Standards Authority and patient groups.
- 11. Feedback via the website was limited, with just two responses. Extensive feedback was, however received from the Professional Standards Authority. We also raised the draft guidance as a discussion point at an inter-regulatory education group meeting, and as a result, also received feedback from the GMC.
- 12. Key issues raised in feedback can be summarised as follows:
  - Some context setting required as to whether case examples represent 'gold standard' practice, or are 'food for thought'.
  - Some clarification suggested as to when an investigation might lead to a full panel hearing, and to whom the investigator would report.
  - Clarification suggested that overall timeframes and process should be communicated to students, and that they should be kept up to date on progress of their case.
  - Suggestion that boundaries guidance be broadened to refer to friendships and social contact between students and educators, rather than just focussing on sexual relationships.
  - Suggestion that clarification be made between fitness to practise issues related to students as opposed to registrants.
  - Suggestion to include reference to candour and raising concerns to the OEI quidance, as well as the student quidance.
  - Suggestion to emphasise the effect that a breach of boundaries can have on the public's trust in health professions at large.

Further details can be provided on request from Steven Bettles (<a href="mailto:sbettles@osteopathy.org.uk">sbettles@osteopathy.org.uk</a>)

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# Summary of post consultation revisions

13. Following the consultation process, the guidance documents were revised to take into account some of the responses received. These changes can be summarised as follows:

#### Both documents

 A statement has been added to both documents, explaining the context of the case examples offered. This clarifies that these are not provided as a 'gold standard' approach, but illustrate the types of issues which might arise, and how these might be managed.

## Student guidance

- As there is reference to students treating patients, we have clarified the circumstances under which this takes place, by explaining in more detail the typical clinical aspects of RQ courses.
- In relation to health concerns, we have added a paragraph to confirm that
  whilst these are not usually sufficient to call a student's fitness to practise
  into question, a lack of awareness about these might impact on patient care
  and raise concerns. This might include failure to seek appropriate medical
  support, or to engage with treatment or medical care.
- We have added some wording within the introduction to clarify the meaning of 'fitness to practise', and that while there are different expectations of students as opposed to registered osteopaths, there are many similarities too, and that osteopathic students are the registered osteopaths of tomorrow.
- Under the section 'what is the role of osteopathic educational institutions in relation to student fitness to practise?', we have emphasised that whilst there is a difference between students and registered osteopaths, the ultimate aim is to ensure that only those with the appropriate knowledge, behaviours and values are able to join the profession and register as osteopaths.
- We have enhanced the section on boundaries to specify the effect that a
  breach of boundaries with patients can have on the public's trust in health
  professionals. We have also made it clear that a breach of professional
  boundaries might lead to a student's fitness to practise being called into
  question, which might affect their ability to remain on the course.
- We have expanded the section on candour to provide some more detail on why this is important.

### Osteopathic educational institution guidance

- We have revised the guidance to clarify the role of the investigator, and circumstances when an investigation should lead to a full panel hearing.
- We have clarified that once proceedings have been instigated, a fair, transparent and published procedure should be followed to ensure

- consistency for all and a common approach to exploring fitness to practise issues. This procedure and timeframes should be clear to both the student and those involved in the fitness to practise proceedings, and students should be kept up to date on the progress of their case.
- We have added a section on the duty of candour and raising concerns to the OEI guidance, as well as the student one.
- We have expanded the section on 'boundaries' to refer to examples of friendships and other behaviours between staff and students which might not be sexual in nature, but which might be inappropriate.

# **Next steps**

- 14. Further consideration will need to be given to the format for publication of these documents in conjunction with the communications team to ensure that they are as accessible as possible. This will take place over the next few weeks.
- 15. As no specific feedback was received from osteopathic educational institutions in response to the consultation, we would like to give OEIs a chance to comment on the final documents before publication. This will be tabled at our planned meeting with the OEIs in January 2017.
- 16. Current versions of the revised guidance documents are provided at annexes A and B.

**Recommendations:** to agree to publish the Guidance on Student Fitness to Practise subject to any further comments received from Osteopathic Educational Institutions.