

# Medical Students and Fitness to Practice Policy

Updated 2015

**Never Stand Still** 

Medicine

### Background

In order to undertake the rigours of medical practice, the community and the profession require medical practitioners to have a range of physical, psychological and emotional attributes that will enable them to carry out their responsibilities in a professional, competent and safe manner. In other words, medical practitioners are required to 'be fit to practise'. Before entering medical school students need to be aware of the abilities and attributes they will require to study and practise Medicine, that is, the inherent requirements. Moreover, medical students are expected to maintain satisfactory levels of professional behaviour in order to complete the Medicine program.

Staff and students are expected to act in a professional manner through all forms of interaction, including verbal, face to face and phone, written, email and social media with colleagues, peers and the public. All medical students are registered with the Medical Board of Australia and therefore, they should be familiar with the Good Medical Practice: A Code of Conduct for Doctors in Australia<sup>1</sup>.

UNSW Medicine is committed to the early identification of students who are undergoing academic, personal, psychological and health challenges, and supporting the students who need assistance with completing essential elements of the Medicine program.

This Policy outlines the professional responsibilities expected of all medical students and the process to deal with fitness to practise issues for the Medicine program only. This Policy is in addition to satisfactory demonstration of knowledge, skills, performance, communication and teamwork, which are required for a medical student or practitioner to practice competently and safely, competencies which are covered under academic performance.

UNSW Medicine is aware that minor lapses in professional behaviour occur. However, behaviour that is seriously unprofessional or unethical, or repeated minor lapses in professional behaviour, despite remediation and support, will likely constitute a risk to patients, staff and other students. Therefore, serious or repeated lapses in professional behaviour will be considered "Serious Misconduct" according to the UNSW Student Misconduct Procedure<sup>2</sup> and may result in suspension or exclusion from the Medicine program.

Furthermore circumstances that mean that a student is not fit to practice such that the student is unable to complete their academic requirements, for example clinical attachments, is likely to result in a student having to withdraw from the Medicine program.

This policy does not specifically address other behaviours that may constitute student misconduct dealt with under the UNSW Student Conduct Policy<sup>3</sup> or failures in academic integrity such as plagiarism<sup>4</sup>. However, it is recognised that such behaviour may in some cases be a manifestation of unprofessional behaviour or impairment.

<sup>&</sup>lt;sup>1</sup><u>http://www.medicalboard.gov.au/Codes-Guidelines-Policies/Code-of-conduct.aspx</u>

<sup>&</sup>lt;sup>2</sup> https://www.gs.unsw.edu.au/policy/documents/studentmisconductprocedures.pdf

<sup>&</sup>lt;sup>3</sup> https://www.gs.unsw.edu.au/policy/documents/studentcodepolicy.pdf

<sup>&</sup>lt;sup>4</sup> <u>https://student.unsw.edu.au/plagiarism</u>

# Definitions

The Dictionary to the Medical Practice Act 1992 defines impairment as follows:

"A person is considered to suffer from an impairment if the person suffers from any physical or mental impairment, disability, condition or disorder which detrimentally affects or is likely to detrimentally affect the person's physical or mental capacity to practise medicine. Habitual drunkenness or addiction to a deleterious drug is considered to be a physical or mental disorder."

The following are to be used by UNSW Medicine as definitions for the Policy:

**Medical Illness**: This includes conditions sufficiently advanced so as to detrimentally affect or be likely to detrimentally affect the student's capacity to satisfactorily participate in essential elements of the Medicine program, such as a clinical placement or essential assessment, or that the condition poses a risk to patient safety. This includes any condition that prevents activities that are required for acceptable professional behaviour. It also includes a student with a chronic infectious condition which presents or potentially presents a danger to patient safety and public health in particular circumstances. It further includes when a student's capacity to exercise reasonable care and skill in the present and future practice of their health profession is impaired or affected by habitual intoxication or addiction to a deleterious drug.

**Mental Illness**: This includes any uncontrolled or persistent mental or psychological illness or condition or difficulties associated with persistent stress and anxiety, despite treatment and/or reasonable adjustments, which detrimentally affects or is likely to detrimentally affect the person's mental or physical capacity to satisfactorily participate in the essential elements of the Medicine program such as a clinical placement, or which may pose a risk to patient safety.

**Physical Disability:** This includes any physical disability which would detrimentally affect or be likely to detrimentally affect the person's physical capacity to satisfactorily participate in the essential elements of the Medicine program such as a clinical placement, or which may pose a risk to patient safety, when reasonable adjustments are taken into account.

**Professionalism:** Unprofessional behaviour includes dishonesty, unacceptable aggression or abusive or disruptive behaviour, harassment of other students, staff or patients, and unethical or criminal behaviour, and/or refusal to accept feedback on professional behaviour from teaching or academic staff. It also includes unprofessional interactions with patients, families and clinical staff or students behaving beyond their level of training or expertise without adequate supervision, thus falsely representing themselves, or behaving in a manner which would pose a risk to patient safety. The UNSW Student Code Policy and Procedures<sup>5</sup>, and the UNSW Equity and Diversity Policy outline behaviours, which would constitute student misconduct and unprofessional behaviour. The Medical Board of Australia, Good Medical Practice: A Code of Conduct for Doctors in Australia<sup>6</sup>, NSW Health Code of Conduct<sup>7</sup> and the Australian Medical Association's Code of Ethics<sup>8</sup> will cover behaviours which would constitute student misconduct, however behaviours related to student impairment and fitness to practise will also be covered in these Codes, in addition.

Inherent Requirements: Inherent requirements are not outlined in this Policy.

<sup>&</sup>lt;sup>5</sup> <u>https://student.unsw.edu.au/policy</u>

<sup>&</sup>lt;sup>6</sup> http://www.medicalboard.gov.au/Codes-Guidelines-Policies/Code-of-conduct.aspx

<sup>&</sup>lt;sup>7</sup> http://www0.health.nsw.gov.au/policies/pd/2012/PD2012\_018.html

<sup>&</sup>lt;sup>8</sup> <u>https://ama.com.au/media/ama-code-ethics-foundation-doctor-patient-relationship</u>

#### Making students aware of fitness to practise

Throughout the Medicine program professional behaviour and ethics is taught using a variety of methods such as lectures and small group activities. At the beginning of each academic year enrolled medical students will be informed of the Fitness to Practise Policy through the Program Guide, the Medicine program website<sup>9</sup>, and orientation talks. Students will be informed of their duties and responsibilities and they will be encouraged to self-identify for assistance as well. The inclusive ethos of the support supplied by UNSW Medicine, the University Counselling and Psychological Services, the Student Equity and Disabilities Unit (SEADU), and the Medical Board's Impaired Practitioners Program will be emphasised to make clear that these services are fully confidential and not intended to be punitive. Rather these services are a source of assistance and remediation for students with the desired outcome, being the successful completion of the Medicine program and subsequent successful practise of medicine. Students will be made aware of the role of the Student Well-being Advisor and the UNSW Health and Counselling services.

#### Making staff aware of the requirements and their responsibilities

Staff will be made aware of the Fitness to Practise Policy through the UNSW Medicine Website, Program and Course Guides, and through staff orientations and development.

#### Identification and Reporting of students

Students with a mental or physical illness or a physical disability or who are demonstrating serious or persistent lapses in professional behaviour, as defined above, may be identified as "unfit for practise". Identification and reporting maybe through a number of methods as outlined below. All meetings between students and staff are treated fully confidentially unless there are concerns about student well-being or patient safety.

- Serious matters should be escalated to the Deputy Dean Education or the Program Authority
- Students should be encouraged to self-identify
- Due to the nature of working closely with students, administrative staff can identify students in trouble or under stress. All administrative staff who have regular contact with students have undergone the Mental Health First Aid Course,<sup>10</sup> and in some instances training at UNSW Counselling and Psychology Services.
- Students with unsatisfactory academic performance are allocated academic advisors, who will aim to ascertain if there are personal problems affecting a student's progress. Students will be made aware that academic advisors are staff they can approach for advice, support and assistance if they are feeling vulnerable, ill, overstretched, emotionally or physically stressed.
- Clinical supervisors and teachers will also have access to an innovative online module, the BLAST, developed by UNSW Medicine designed to train supervisors in recognising students in having difficulties or in trouble<sup>11</sup>.
- Any teacher or academic who becomes aware that a student has an issue with Fitness to Practise should notify the Course Convenor of the respective course that the student is attending.

<sup>&</sup>lt;sup>9</sup> http://medprogram.med.unsw.edu.au

<sup>&</sup>lt;sup>10</sup> https://www.counselling.unsw.edu.au/en-au/staff/eventsandtrainingworkshops.aspx

<sup>&</sup>lt;sup>11</sup> https://aelp.smartsparrow.com/v/open/j34bsnl2

#### **Student Assistance and Remediation**

Following identification that a student is having difficulties, either by way of self-identification or by a report from a member of staff, the Phase Convenor of the respective phase that the student is enrolled in, should be notified. The Phase Convenor should ensure that reasonable adjustments for the student have been instituted on advice or their health professional or from SEADU, if they are registered with SEADU. The Phase Convenor, in consultation with the Student Wellbeing Advisor and Program Authority, when a personal or health issue is evident, may suggest a program of assistance for the student. This may include suggesting referral to an appropriate medical specialist, health professional or counsellor or other appropriate action such as a set of specialised instructions for the student. All such referrals are handled with due regard to the vulnerability of the student and all interactions will be handled confidentiality.

The program of assistance should be sufficiently clear so as to create a pathway to resolution and ongoing student support. It will depend on the circumstances as to whether the student is interviewed and by whom, however it is expected that in nearly all instances the student will be involved in some of the discussions which inform the design of the program. If the program required students to take leave because of personal or health issues, evidence from their health professional that they were fit to return to medical studies, would need to be supplied to the Student Well-being Advisor before they returned to study. Following return students will need to be compliant with therapy or their reasonable adjustments. Depending on the level of difficulty or illness, the Deputy Dean Education may be informed or involved.

Following identification of a student displaying unprofessional behaviour, as defined above, or manifesting significant health issues, which may impact on fitness to practise or patient safety, the Phase Convenor of the respective phase that the student is enrolled in, should be notified as soon as possible. The Phase Convenor, in consultation with the Student Wellbeing Advisor and Program Authority, should then report the student to the "Fitness to Practise Committee", which would be constituted by the Deputy Dean Education, the Student Well-Being Advisor, the respective Phase Convenor, and another senior academic. The Fitness to Practise Committee may consider notifying the Medical Board (see below) or the Pro-Vice-Chancellor (students).

In some instances the student's impairment may need to be "forward-fed" to a future supervisor for the student's well-being and to ensure support is ongoing. Forwarded feeding for lapses in professional behaviour will enable more targeted supervision and support, whereas forward feeding for health issues will enable reasonable adjustments to be maintained. The student's permission to forward-feed information should be obtained, however in some instances the Deputy Dean Education or the Fitness to Practice Committee may elect to forward-feed information without student consent, if it was deemed to be in the best interest of the student or essential for, e.g. specific supervision of known previous unprofessional behaviour. The student would be informed if this course is taken. In addition, students may be suspended from a clinical placement due to student misconduct on the clinical placement, being unfit for clinical practice or non-compliant with NSW Health requirements for clinical placements. This issue is covered in the Procedure Related to Suspension from a Clinical Placement Document.

#### **Reporting to the Medical Board of Australia**

Practitioners, employers and education providers are all mandated by law to report (mandatory notification) medical students to the Medical Board, when they have **a reasonable belief** that the medical student has an impairment, which may place the public at "substantial risk of harm", while undertaking clinical training.

Students can self-report to the Medical Board or their attending health professional can in-act the notification. However, in some instances it may be necessary to refer the student to the Medical Board's Impaired Registrant Program against the student's request if patient or staff safety were at risk, and this process can only be fulfilled by the Dean in consultation with the Fitness to Practice Committee and Student Central. The student's academic record may form part of the information provided by the Faculty to the Medical Board. Where such a referral is indicated, the matter will be discussed with the student by the Student Wellbeing Advisor, the Deputy Dean Education, and the Senior Associate Dean or the Dean. However, students are advised that the ultimate decision to refer a student to the Medical Board's Impaired Registrant Program rests with the Fitness to Practice Committee and the Dean must be informed and endorse the decision.

Students who are entered into the Medical Board's Impaired Registrant Program are required to comply with the Board's conditions and to attend meetings with their clinical mentor as arranged. The Faculty maintains that continuing enrolment may be contingent upon a student's acceptance of the Board's recommendations. Students should be informed that the Medical Board's Impaired Registrant Program has a supportive and rehabilitative role and that the notification is not punitive. Where a student is attending a health facility affiliated with UNSW Medicine, this facility may need to be notified if an interruption to the clinical placement occurs.

## Keeping the student informed

Whether students have self-identified or otherwise, it is important that the student be supported and not left disempowered by the process. Students must understand what is expected of them and procedural fairness must be followed. However, students must understand that once a referral has been made to the Medical Board, communication is between the Board and the student. In the instance where a student who has not been notified by the Faculty, informs the Faculty of the notification, the Deputy Dean Education can request a copy of any correspondence between the Medical Board and the student about the notification. The Board may also require that the student nominate a clinical mentor who the Board communicates with, however the Faculty is not informed of this process unless either the student or mentor does so.