PREAMBLE

1. The College offers several programmes of study that leads to the degree of MBBS which qualifies graduates for provisional registration as doctors. Graduates then undertake a further year as a pre-registration Foundation year 1 doctor (F1) in order to achieve full registration by the General Medical Council (GMC). Under the Medical Act (1983) the College is responsible for the education and training of doctors up to full registration, including both the undergraduate and foundation stages of education and training. The Act also places a duty upon the College to ensure that those who graduate from undergraduate programmes and who subsequently complete their F1 training are fit to practise.

2. Imperial College’s Code of Student Discipline (Ordinance E2) sets out the jurisdictional areas for discipline purposes and details of the summary punishments, procedures and penalties, is prefaced by a note which is addressed specifically to medical students.

3. This Note, in its entirety, states that:

   “Students must note that conduct of a nature which would be inappropriate in a member of some professions could require additional disciplinary action. In particular students of the Faculty of Medicine must note that conduct which would be improper in the case of a member of the medical profession could constitute a disciplinary offence which will be considered under these procedures. Additionally, students whose course of study leads to provisional registration as doctors and whose conduct falls to be considered under these procedures may also fall to be considered under the College’s Procedure for the Assessment of Fitness to Practise Medicine.”

4. The following procedure provides the arrangements for assessing any conduct, behaviour or other matter that could bear on a student’s/ F1’s suitability in respect of fitness to practise medicine. The procedure has three distinct components, details of which are given below. These are:

   a. Procedure for the Initiation of an Assessment of Fitness to Practise Medicine.

   b. Procedure for a meeting of the Fitness to Practise Medicine Panel.

   c. Procedure for making appeals against the decision of the Fitness to Practise Medicine Panel.

5. In the procedure references to “College working days” means days upon which the College administration is open and should not be confused with “term-time”.

1
PROCEDURE FOR THE INITIATION OF AN ASSESSMENT OF FITNESS TO PRACTISE MEDICINE

6. A flow diagram outlining the procedure for the initiation of an assessment of fitness to practise medicine is given in Annex A.

7. All issues relating to the conduct or behaviour of a medical student may amount to misconduct under the College's Code of Student Discipline and will be considered first under those Procedures. Where there is a combination of issues relating to a student's behaviour, the Student Monitoring Group will decide whether it is appropriate to first consider the case under the Code of Student Discipline. Accusations of such misconduct should be submitted to the Responsible Authority, as defined in the College's Code of Student Discipline, in writing, as set out in the Procedures. Anonymous allegations will not be considered, although the accuser has the right to confidentiality. Allegations must be substantiated and, if necessary, action, including disciplinary action, may be taken against individuals who use the system to make false, vexatious or malicious accusations.

8. The student's case will be dealt with by the appropriate disciplinary authority defined in the College's Code of Student Discipline, who will determine whether a disciplinary offence has been committed and, if so, what penalty should be imposed. The disciplinary authority will refer the case, once any appeals procedures have been completed, on to the Faculty of Medicine's Student Monitoring Group in any of the following situations:

   a. All cases where the student is found guilty of a disciplinary offence regardless of whether a penalty is prescribed or not

   b. Where the case raises an issue relating to the student that questions his or her physical or mental health.

9. Allegations against a student that are based solely on that student's physical or mental health will be made directly to the Faculty of Medicine’s Student Monitoring Group. It is inappropriate for such allegations to be considered under the College's Code of Student Discipline.

10. Any disciplinary matter that falls outside the jurisdiction of the College's Code of Student Discipline but which causes concern from a fitness to practise medicine perspective will be dealt with initially by the Student Monitoring Group.

11. The Terms of Reference of the Faculty of Medicine’s Student Monitoring Group are attached at Annex B.

12. When a case is referred to the Student Monitoring Group, that Group will consider whether a prima facie case exists for finding the student unfit to practise medicine. The Group is entitled to consider the student's disciplinary record in making its determination. Should the Group decide that a prima facie case exists, it shall inform the Head of Central Secretariat that a meeting of the Fitness to Practise Medicine Panel should be convened.
13. The decision of the Student Monitoring Group will be informed by guidance published by the GMC and the Medical Schools Council (MSC) entitled “Medical Students: Professional Values and Fitness to Practise” (November 2009) and particularly advice on the professional behaviour expected of medical students in order for them to be fit to practise and areas of misconduct and the sanctions available. Other sources of guidance from the GMC relevant to the decision-making process include “Good Medical Practice” and “Tomorrow's Doctors”. This Procedure will be reviewed and updated upon the release of new or updated guidance from the GMC and the MSC.

14. **Areas of Concern/Misconduct.** The GMC lists the following types of concern that could lead to fitness to practise investigations and procedures:

   a. Criminal conviction or caution
      - Child pornography
      - Theft
      - Financial fraud
      - Possession of illegal substances
      - Child abuse or any other abuse
      - Physical violence

   b. Drug or alcohol misuse
      - Drunk driving
      - Alcohol consumption that affects clinical work or the work environment
      - Dealing, possessing or misusing drugs even if there are no legal proceedings

   c. Aggressive, violent or threatening behaviour
      - Assault
      - Physical violence
      - Bullying
      - Abuse

   d. Persistent inappropriate attitude or behaviour
      - Uncommitted to work
      - Neglect of administrative tasks
      - Poor time management
      - Non-attendance
      - Poor communications skills
      - Failure to accept and follow educational advice

   e. Cheating or plagiarising
      - Cheating in examinations, logbooks or portfolios
      - Passing off others’ work as one’s own
      - Forging a supervisor’s name on assessments
f. Dishonesty or fraud including dishonesty outside the role
   - Falsifying research
   - Financial fraud
   - Fraudulent CVs or other documents
   - Misrepresentation of qualifications

g. Unprofessional behaviour or attitudes
   - Breach of confidentiality
   - Misleading patients about their care or treatment
   - Culpable involvement in a failure to obtain proper consent from a patient
   - Sexual, racial or other forms of harassment
   - Inappropriate examinations or failure to keep appropriate boundaries in behaviour
   - Persistent rudeness to patients, colleagues or others
   - Unlawful discrimination

h. Health concerns and insight or management of these concerns
   - Failure to seek medical treatment or other support
   - Refusal to follow medical advice or care plans, including monitoring and reviews, in relations to maintaining fitness to practise.
   - Failure to recognise limits and abilities or lack of insight into health concerns
   - Treatment-resistant condition

15. The Student Monitoring Group will effectively act as ‘the investigator’ in determining whether a case needs to be considered as a fitness to practise issue; the Student Monitoring Group may appoint an individual member to follow up investigations and make recommendations back to them as necessary.

16. Any investigation must be conducted in a proportionate manner, balancing the interests of patients and the public against those of the student, except that the protection of the public shall be treated as the paramount consideration.

17. The Student Monitoring Group will bear in mind that the above guidance states “a student’s fitness to practise is called into question when their behaviour raises a serious or persistent cause for concern about their ability to continue on a medical course, or to practise as a doctor after graduation. This includes, but is not limited to, the possibility that they could put patients or the public at risk.”

18. Where there is found to be a prima facie case, the Student Monitoring Group may consider that the conduct or health issue is so serious that restrictions should be placed on the student’s activities. The Group may make recommendations to the Dean of the Faculty of Medicine who shall consider the material provided by the Group and invite the student to make representations. (1) Taking the protection of the public as the paramount consideration, the

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1. The Dean of the Faculty of Medicine may delegate his responsibilities under these Procedures to another senior member of staff within the Faculty of Medicine; this will usually be the Director of Education or their designated deputy.
Dean of the Faculty of Medicine shall decide whether, and if so what, restrictions should be placed on the student's activities. Any restrictions imposed shall remain in place until the Fitness to Practise Medicine Panel or the Dean of the Medical Faculty direct otherwise.

19. Upon receipt of notification from the Student Monitoring Group, the Head of Central Secretariat will write to the student and the Dean of the Faculty of Medicine informing them of this decision and advising them what the next stages of the procedure will be.

20. The Student Monitoring Group has the right to initiate action under Regulation 9 of the Regulations for Students to seek a medical examination of a student, if the mental or physical health of that student has had any bearing on the case.

21. Where the Student Monitoring Group decides that there is not a prima facie case in relation to fitness to practise, it will inform the student and the disciplinary authority that referred the matter (if any) of its decision.

22. The student has the right to support from the College's counselling service, which will be confidential except in wholly exceptional circumstances where the counsellor believes that the student is actively a danger to him/herself or to others.

23. The student has the right to support from the Imperial College Union, as well as from the Faculty Senior Tutor in the Faculty of Medicine. Support is also available through the College pastoral care system, which includes Personal Tutors, College Tutors and the College Disabilities Officer.

PROCEDURE FOR A MEETING OF THE FITNESS TO PRACTISE MEDICINE PANEL

TERMS OF REFERENCE AND CONSTITUTION OF THE FITNESS TO PRACTISE MEDICINE PANEL

24. The Terms of Reference of the Fitness to Practise Medicine Panel are to consider cases referred to it by the Student Monitoring Group, where that Group has determined that there is a prima facie case to be heard. Its constitution shall be:

a. A Chair, normally the Faculty of Medicine College Consul (Clinical). Where a conflict of interest may arise, a person of equivalent standing may stand in e.g. previous College Consul or equivalent.

b. One clinical member of the academic staff of the Faculty of Medicine, appointed by the Dean's Advisory Group;

c. A practising consultant psychiatrist;

d. One person who is both a teacher and practitioner of law;
e. A Lay member of the Panel, to be appointed by the College Council or Court;

f. Wherever possible, an occupational physician working for the NHS and not from the College's Occupational Health Service;

g. The Imperial College Union President or his or her nominee from among the other Imperial College Union Sabbatical Officers;

25. No person shall sit as a member of the Fitness to Practise Medicine Panel if he or she is:

a. The subject of a charge;

b. The complainant;

c. A witness or a potential witness (i.e. has personal knowledge of the facts surrounding the case);

d. Successfully challenged for any good cause;

e. Connected with the student being charged, to include the Personal Tutor, or any other person involved with the case;

f. Formed part of a disciplinary authority referring the case to the Panel.

26. The Clerk of the Fitness to Practise Medicine Panel will normally be appointed by the Head of Central Secretariat. The Clerk will be responsible for ensuring that all members of the Panel are familiar, and comply, with the Fitness to Practice Medicine Procedures.

27. No member of the Fitness to Practise Medicine Appeals Panel shall be a member of the Fitness to Practise Medicine Panel.

28. The quorum for a meeting of the Fitness to Practise Medicine Panel shall be five including the Chair and the persons appointed under paragraphs 24 d., e. and g. If a hearing before the Panel is adjourned, only those members who have been present at that meeting shall continue the hearing when it is resumed.

29. Should the Chair, responding to the particular circumstances of a case, feel that the Fitness to Practise Medicine Panel would benefit from specialist advice, then a 'specialist advisor' may be appointed. Such an 'advisor' may only provide advice, which must be given in the presence of all the parties. Specialist advisors are not appointed as members of the Panel and have no voting rights.
PROCEDURE FOR A MEETING OF THE FITNESS TO PRACTISE MEDICINE PANEL

30. Students whose cases are referred to the Fitness to Practise Medicine Panel shall be informed in writing by the Clerk at least twenty College working days before the date of the hearing of:

a. The charges against them;

b. The date, time and venue of the hearing;

c. Their right to have the hearing in public;

d. Their right to be represented (at their own expense) at the hearing by a person of their choice, including a lawyer;

e. Their right to be accompanied by a friend, relative or Student Union representative;

f. Their right to bring witnesses;

g. Any suspension from his/her clinical course or limitations or conditions placed upon the continuance of his/her studies or practise during the period of the investigation;

h. The names of the members of the Panel and of the Clerk and of his/her right to challenge the Panel members for any good cause;

i. The procedure of presenting evidence including the provision of original versions of documentation.

31. The Notice of the hearing shall include a copy of this Procedure.

32. If the student wishes to challenge the inclusion of any member of the Panel he/she should notify the Clerk immediately in writing setting out the reasons for the challenge. Prior to the hearing, the Chair of the Panel shall decide whether to uphold the challenge or not, having heard from the Student or his/ her representative as is necessary. If the challenge is to the Chair of the Panel, the Dean of the Faculty of Medicine shall rule on the challenge.

33. The Fitness to Practice Medicine Panel hearing will normally be held within forty College working days of the referral from the Student Monitoring Group.

34. The Dean of the Faculty of Medicine shall determine who from the Faculty will formulate the charge and present the case. That person will send to the Clerk of the Panel in good time before the hearing, any documents to be submitted, which shall include the record made of any disciplinary hearing under the College Code of Student Discipline, and the name of any witnesses to be called and at least a summary of the evidence each witness is expected to give. The Clerk shall forward the material received to the student with the notice of the hearing.
35. If the student wishes to be represented, to call witnesses or present documents either bearing on the charge or in mitigation of any penalty which may be imposed, he/she shall notify the Clerk to the Panel accordingly no fewer than ten days before the scheduled hearing, providing they have received the material to be presented by the person presenting the case against the student's fitness to practise medicine.

36. All documentary information concerning the case against a student's fitness to practise medicine must be submitted prior to the hearing to the Clerk of the Panel; documents which will be taken into consideration by the Panel during the hearing shall be provided to all parties, including the Panel, within the previously stated timeframes.

37. Any request to extend this timeframe shall be heard and decided by the Chair before the initial deadline. Extensions should only be granted where there are extenuating circumstances and may result in a delaying of the hearing, as determined by the Chair.

38. Documents should not normally be tabled during the hearing; any exception to this is at the Chair's discretion. It is expected that any tabled documents would be either very small in content, such as a certificate. More substantial documents would normally only be accepted where there are extenuating circumstances.

39. Any witness to be presented by either party shall be named in advance as per the above timings; the Chair will have the power to limit the number of witnesses, at his or her discretion.

40. The Panel shall base its decision on the evidence presented and examined in the presence of the person bringing the charge and the student charged. The proceedings of the Panel shall not be invalidated by the failure to appear of the student charged following notification of the proceedings and case against him/her in accordance with the preceding paragraphs. Evidence of earlier misconduct by the student, which has already been the subject of previous disciplinary procedures, may be admitted and considered in deciding on any action.

41. The burden of proof rests with the person presenting the evidence who must prove the facts of the case according to the civil standard of proof. This means that cases will be judged on the balance of probabilities (i.e. that it is more likely than not to have happened). The civil standard of proof will, however, be applied flexibly. This means that the more serious an allegation, and the more serious the implications for the student, the more cogent and compelling the evidence must be before that allegation can be found proven, on the balance of probabilities.

42. Hearings shall normally be in private and confidentiality observed. A written account of the proceedings, prepared by the Clerk, may be released at the discretion of the Chair or Vice Chair acting as Chair. The student charged may request that the hearing is held in public.

43. A full record shall be made and retained for possible use in connection with an appeal. This will usually be by recording electronically the proceedings of the Panel except when the Panel withdraws to consider its decision. A full written report must be provided to the Dean of
the Faculty of Medicine if the student makes an appeal, and to the student and to members of the Appeals Panel if a meeting is convened to consider an appeal by the student.

44. The Panel shall be empowered to call any person before it to clarify evidence. The student or his/her representative will be entitled to cross-examine those individuals called to clarify evidence.

DECISIONS OF THE PANEL

45. All Panels shall reach their decision by a simple majority voting. The Chair may exercise a casting vote. The Clerk, and any specialist advisors, in each case shall not be entitled to vote.

46. The Panel shall deliberate in the absence of all parties. The Clerk will remain present in order to provide procedural advice to the Panel, and to record their reasons.

47. At the conclusion of the hearing the Panel may either find that:

a. The student should receive no warning or sanction; or

b. The student receives a warning as there is evidence of misconduct, but the student’s fitness to practise is not impaired and does not require any of the sanctions listed below; or

c. The student’s fitness to practise is judged to be impaired and they receive a sanction. The purpose of any warning or sanction is to protect patients and the public rather than to be a punishment for the student. Beginning with the least severe, the sanctions are:

   - Conditions or undertakings
   - Suspension from the medical course
   - Expulsion from the medical course

The Panel may take account of the GMC’s guidance when reaching a decision.

d. In cases where the student’s fitness to practise is impaired for health reasons and the decision is to suspend the student from the course until such time as they are fit to continue, the Fitness to Practise Medicine Panel shall set a minimum period of time before the student may seek review of the decision, during which the student shall be granted an interruption of studies. After the expiry of the stated minimum period of time, the student may write to the Head of Central Secretariat and ask that a Fitness to Practise Medicine Panel be convened to review their suspension. The student’s request must be received at the Central Secretariat not less than 25 College working days before the expiry of the time permitted for completion of medical training as set out in the course requirements. A student whose fitness to practise is deemed to be sufficiently impaired to warrant suspension from the course may not continue with their clinical
studies. A suspension would exceed no more than two years as per the College Regulations.

e. In cases where the student's fitness to practise is impaired for health reasons and the decision is to allow them to continue to study with conditions or undertakings, the terms shall relate to adjustments to the course that the Faculty of Medicine agrees to make and shall be conditions upon which the student may continue with his/her clinical studies.

48. In accordance with guidance from the GMC “Any mitigating factors should be considered by the panel members when they are deciding on the appropriate outcome. The panel members should also make sure the warning or sanction they decide upon is proportional to the behaviour and will deal effectively with the fitness to practise concern.” In addition the panel "should keep in mind the balance between patient safety and the interests of the medical student."

49. Notwithstanding the need to consider a student’s behaviour on a case-by-case basis, panel members may wish to refer to "Medical Students: Professional Values and Fitness to Practise" (November 2009) for additional guidance on the appropriateness of any proposed warnings and sanctions. Panel members may also make recommendations on the expected duration will remain on a student’s record.

50. In keeping with the Human Rights Act (1998), should the student wish, the decision of the Fitness to Practise Medicine Panel will be published on an appropriate College notice-board. A record of the reasons for those decisions made in paragraph 47 above will be kept, although these will remain confidential with the exception of possible disclosure to the GMC or other public authority at the discretion of the Dean of the Faculty of Medicine.

51. Upon completion of its deliberations the Clerk to the Panel shall notify its decision in writing giving a summary of its reasons to the Head of Central Secretariat, within seven College working days of the hearing. The Head of Central Secretariat shall then notify the student and other relevant parties, including the Director of Education or their designated deputy, the Academic Registrar and, if appropriate, the GMC, in writing within two College working days of receiving this. This will include notice of the student’s right to appeal, the time within which the appeal must be made and the grounds upon which it may be made.

52. Where a student seeks a review of a Fitness to Practise Medicine Panel’s decision under paragraph 47 d. above and has notified the Head of Central Secretariat, the Head of Central Secretariat shall notify the Student Monitoring Group and the Dean of the Faculty of Medicine, who shall consider and present any case against the student’s fitness to practise. The Head of Central Secretariat shall make arrangements for the convening of a Fitness to Practise Medicine Panel, including the giving of directions as to the delivery and exchange of documents to be relied upon. The student should co-operate with the Student Monitoring Group in the obtaining of such medical reports as are necessary under Regulation 9 of the Regulations for Students.
53. Appeals may be made on the grounds of procedural or other material irregularity, unreasonable conclusions or excessive penalty. All appeals must be made within five College working days in accordance with the guidance as follows:

a. Any student wishing to appeal against the decision of the Fitness to Practise Medicine Panel must do so in writing to the Head of Central Secretariat stating their grounds. The factual basis of the decision shall not be open to appeal unless evidence is produced which the Dean of the Faculty of Medicine regards as both new and significant. Where the allegation relates to the student's conduct, the student should have exhausted the appeals process under the disciplinary procedure before the matter was considered by the Fitness to Practise Medicine Panel, however, the Dean shall retain a discretion to remit a matter to the appropriate disciplinary appeal body. The student will have one month from the date of the Fitness to Practise Medicine Panel's decision to provide all supporting documentary evidence for the appeal.

b. The Clerk to the Panel will prepare a full report of the proceedings before the Fitness to Practise Medicine Panel. The report shall contain a statement of the matters investigated, a summary of the evidence given by each witness and the reasons for the decisions reached. The appellant will be supplied with a copy of the report and may submit comments.

c. The Dean of the Faculty of Medicine shall be supplied with a copy of the Clerk's report and the appellant's comments and grounds of appeal. The Dean shall decide on the evidence available whether or not the appeal should be proceeded with and should only dismiss unmeritorious claims.

d. If it is decided not to proceed with the appeal, the Dean of the Faculty of Medicine shall inform the Clerk to the Panel and the appellant of the decision, normally within seven College working days of having received the documentation.

e. Where it is decided that the appeal shall be proceeded with, the Dean shall inform the Head of Central Secretariat of the College, who shall inform all parties of the decision and make the necessary arrangements for the appeal to be held as early as possible. All parties shall be informed of the date of the appeal in good time.

f. Where an appeal is referred, the student shall be permitted to continue with his/her programme of study at the discretion of the Dean of the Faculty of Medicine, until the Fitness to Practise Medicine Appeals Panel has reached its decision.

g. Students whose cases are referred to the Fitness to Practise Medicine Appeal Panel shall be informed in writing of the date of the appeal and shall be notified of their right to have the hearing in public, and to be represented and/or accompanied at the hearing by a person of their choice (and normally the person who acted in this capacity...
at the Fitness to Practise Medicine Panel hearing). They will also be informed of their right to be represented by a solicitor whom he/she may pay for his/her services.

54. The Terms of Reference of the Fitness to Practise Medicine Appeals Panel are to consider appeals by reviewing the findings of Fitness to Practise Medicine Panels made on the allowable grounds. The Panel shall consist of:

a. A Chair who shall normally be a member of the legal profession, nominated by the Chairman of the Bar Council and appointed by the Dean of the Faculty of Medicine as and when required;

b. Two individuals not being members of the College Council, Staff or Students of the College, one to be a medical professional registered with the GMC and to be appointed by the Chair as and when the Appeals Panel needs to be convened.

55. No person shall sit as a member of the Fitness to Practise Medicine Appeals Panel if he/she is:

a. The subject of a charge;

b. The complainant;

c. A witness or a potential witness (i.e. has personal knowledge of the facts surrounding the case);

d. Successfully challenged for any good cause. The Chairman of the Panel shall decide whether or not to uphold the challenge, including a challenge to his/her own inclusion on the Appeal Panel, prior to the hearing;

e. Connected with the student being charged, to include the Personal Tutor, or any other person involved with the case;

f. A member of the Fitness to Practise Medicine Panel or any other committee or body which heard the original case.

56. The quorum for a Fitness to Practise Medicine Appeals Panel shall be three including the Chair.

57. Should the Chair, responding to the particular circumstances of a case, feel that the Fitness to Practise Medicine Appeals Panel would benefit from a ‘specialist advisor’ then they can be appointed for the particular instance only to provide advice. Such an ‘advisor’ may only provide advice, which must be given in the presence of all the parties. Specialist advisors are not appointed as members of the Panel and have no voting rights.

58. The Clerk to the Appeals Panel shall normally be appointed by the Head of Central Secretariat and may have been the Clerk to the Fitness to Practise Medicine Panel.
59. The Fitness to Practise Medicine Appeals Panel shall be supplied with the report of the proceedings of the Fitness to Practise Medicine Panel prepared by the Clerk to the Fitness to Practise Medicine Panel provided to the Dean of the Faculty of Medicine. Members of the Appeals Panel will also be provided with any comments submitted by the appellant and any new or relevant documentation submitted to the Dean of the Faculty of Medicine.

60. At any hearing before the Fitness to Practise Medicine Appeals Panel, the student whose case is being considered shall be entitled to be present throughout the hearing, except when the Appeals Panel considers its decision.

61. A Fitness to Practise Medicine Appeals Panel shall have power to reverse or modify the decision appealed against, in any way within the permitted findings at 47.c.

62. The decision of a Fitness to Practise Medicine Appeals Panel shall be based on evidence and submissions presented and examined in the presence of the student bringing the appeal. The proceedings of the Appeal Panel shall not be invalidated by the failure to appear of the student charged, following notification of the proceedings in accordance with paragraphs 53.e, and g.

63. The decision of a Fitness to Practise Medicine Appeals Panel shall be reached by a majority vote of the members of the Panel and shall be announced as the decision of the Panel. The Chair shall have a second or casting vote in the event of one member abstaining. The Clerk to the Panel shall not have a vote. The votes of the individual Appeal Panel members shall always be treated as confidential and there shall be no disclosure either of such votes or of information showing whether the decision was reached by a unanimous or a majority vote.

64. A full record of the proceedings shall be made and retained normally by recording electronically the proceedings of the Panel except when the Panel withdraws to consider its decision.

65. The Clerk of the Fitness to Practise Medicine Appeals Panel shall notify the appellant and the Dean of the Faculty of Medicine of the decision of the Appeals Panel, within seven College working days of the decision being made. The Clerk will also provide the appellant and the Dean of the Faculty of Medicine with the reasons for the decision. A report on the proceedings shall be submitted to the next appropriate meeting of the Medical Studies Committee.

66. The decision of the Fitness to Practise Medicine Appeals Panel shall be final as far as internal College Procedures are concerned.

67. Once a student has completed the College’s internal appeals or complaints procedures, the College will issue the student with a Completion of Procedures Letter. If the student is still dissatisfied, the student may direct their complaint to the Office of the Independent Adjudicator within one year of the date on which the Completion of Procedures Letter was issued. Information on the complaints covered by the Office of the Independent Adjudicator and the review procedures is available at [http://www.oiahe.org.uk/](http://www.oiahe.org.uk/)
RELEVANT LINKS

General Medical Council (GMC): www.gmc-uk.org
Imperial College London Registry Forms, Procedures and Regulations: http://www3.imperial.ac.uk/registry/information/formsproceduresandregulations

Approved by the Council – 28 March 2003
Revisions approved by the Council – 11 February 2005
Revisions approved by the Council – 15 February 2013
Revisions approved by the Council – 7 February 2014
DISCIPLINARY ISSUE
Student breaches College Discipline.

Consideration under the College Code of Student Discipline

GUILTY
Student expelled from College

NOT GUILTY
No health issues raised

GUILTY
But not expelled from College

NOT GUILTY
Health issues raised

END

UNPROFESSIONAL BEHAVIOUR ISSUE
1. Repeated non-communication with staff.
2. Repeated non-attendance on the course
3. Failure to disclose information to the School which may impact a student’s fitness to practise

NOT GUILTY
Health issues raised

END

END

END

HEALTH ISSUE

Referred to Dean of Faculty of Medicine

Issue of health and/or conduct involves fitness to practise medicine

No issue involving fitness to practise medicine

To next diagram

END

If a disciplinary issue has not previously been considered by a disciplinary authority, refer back for consideration under the College disciplinary procedures

Consideration by Student Monitoring Group (see Annex B for terms of reference)
- SMG can call for medical reports
- SMG decides on a prima facie basis whether Fitness to Practise Medicine Panel should be convened

To next diagram
STUDENT MONITORING GROUP

Health and/or conduct raises issue of fitness to practise medicine

SMG considers whether issue merits restriction on student’s activity

Yes

Makes recommendation to Dean of Faculty of Medicine

Dean of Faculty of Medicine: Hears from student; Decides what, if any, restriction is required

No

SMG considers whether it requires a health report under Student Regulation 9

SMG Informs Head of Central Secretariat who appoints Clerk

Clerk notifies student of charges, their rights and the membership of the Panel

Student may challenge the membership of the Panel

Chairman of Principal or Dean of Faculty rules on the challenge

Person presenting the case against the student provides information

HEARING

OUTCOMES

• Fit to practise – no warning or sanction (47.a)
• Fitness to practise not impaired, but warned about misconduct (47.b)
• Fitness to practise is impaired with a sanction to be imposed. Sanctions include conditions, suspension or expulsion (47.c)
• (health issue only) fitness to practise impaired, suspension may be reviewed by a Panel at a later date (47.d)
• (health issue only) Fit to practise on certain conditions (47.e)
The Student Monitoring Group (SMG) is responsible to the Dean of the School of Medicine, who may delegate this responsibility to the Vice Dean (Education and Institutional Affairs) for all aspects of undergraduate medical student academic progress.

The Plenary Group meets as required:

1. To review and ratify the recommendations of the Faculty’s Disclosure and Barring Service Panel and process as per the Faculty’s Disclosure and Barring Service Certification Policy and Procedure.
2. To consider all disciplinary findings against medical students and to refer to Disciplinary or Fitness to Practise Medicine Panel as appropriate;
3. To consider any cases against students whose conduct and/or health (physical or mental) may bear on that student’s suitability to practise medicine and refer to a Fitness to Practise Medicine Panel as appropriate;

The Core Group of the SMG meets on a monthly basis and their role involves Senior Tutors, Year Heads and DCS’s presenting cases for discussion and subsequent action:

1. To monitor and agree action relating to students whose attendance and/or performance is below the required standard;
2. To discuss and implement support for students who have health issues affecting their academic performance;
3. To select and pass on, with appropriate confidentiality, information on students who have experienced difficulties to Senior Tutors, Heads of Years, Directors of Clinical Studies, teaching staff and/or tutors to enable them to assist the students in their subsequent studies and to monitor the future performance of these students;
4. To report and review any high priority new cases arising which require academic support, disciplinary and welfare activities by Core Group members and agree subsequent action and/or referral to the Plenary group;
5. To commission and receive health assessments on students where considered appropriate, under Regulations for Students Number 9, and to recommend to the Principal of the School of Medicine, periods of leave of absence on medical or compassionate grounds, and conditions under which students may return or continue their studies, in consultation with the College Health Centre or Occupational Health Service;
6. To select and discuss issues arising within the School and College, including within the college welfare services, that impact on students' academic and broader learning experience.

Frequency of Meetings
The Core Group will meet monthly. Members of the Plenary Group will retain all the meeting dates in their diaries and will be advised one week before the scheduled date if they are required to be in attendance.
Membership  (Bold denotes Core Group)

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<tr>
<th>Chair</th>
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<tr>
<td>Director of Student Tutoring and Support</td>
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<tr>
<td>Senior Tutor (Year 6)</td>
</tr>
<tr>
<td>Senior Tutor (Year 5)</td>
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<tr>
<td>Senior Tutor (Year 4 -BSc)</td>
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<tr>
<td>Senior Tutor (Intercalated BSc’s)</td>
</tr>
<tr>
<td>Senior Tutor (Year 3)</td>
</tr>
<tr>
<td>Senior Tutor (Year 2)*</td>
</tr>
<tr>
<td>Senior Tutor (Year 1)*</td>
</tr>
<tr>
<td>Senior Tutor (BMS/MBS)</td>
</tr>
</tbody>
</table>

| Head of Undergraduate Medicine |
| Deputy Head of Undergraduate Medicine |
| Director of Curriculum and Assessment |

<table>
<thead>
<tr>
<th>Directors of Clinical Studies</th>
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<tbody>
<tr>
<td>St Mary’s</td>
</tr>
<tr>
<td>Chelsea &amp; Westminster</td>
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<tr>
<td>Charing Cross</td>
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<table>
<thead>
<tr>
<th>Heads/Deputy Heads of Year</th>
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</thead>
<tbody>
<tr>
<td>Years 1 &amp; 2</td>
</tr>
<tr>
<td>Year 3</td>
</tr>
<tr>
<td>Year 4 (BSc)</td>
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<tr>
<td>Year 5</td>
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<tr>
<td>Year 6</td>
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<tr>
<td>Head of BMS</td>
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<td>Head of MBS</td>
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<th>Student Services Officer</th>
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<tr>
<td>Programme Manager (Clinical)</td>
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<tr>
<td>Deputy Head of Programme Management</td>
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<tr>
<td>Fitness to Practise Case Manager</td>
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<tr>
<th>Committee Secretary / Student Services Administrator (Student Support)</th>
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<tbody>
<tr>
<td>Imperial College Occupational Health Service</td>
</tr>
<tr>
<td>Vice Dean (Education and Institutional Affairs)</td>
</tr>
<tr>
<td>Director of Admissions, Equality and Diversity</td>
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| DBS Panel Members |

<table>
<thead>
<tr>
<th>College Consul (Non-Clinical)**</th>
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<tbody>
<tr>
<td>Deputy Director, Northwest Thames Foundation School</td>
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<tr>
<td>External Representative (St George’s)</td>
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<tr>
<th>Director of Education Management / Programme Director</th>
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<tr>
<td>A representative from the Imperial College Health Centre</td>
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</table>

*alternating years

** will alternate depending on availability