



Professionalism in Action

**A Guide for Education Providers on Students Fitness to Practise**

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## Introduction

This guidance sets out the broad principles of good practice in relation to student fitness to practise so that chiropractic education providers can apply these principles within their own institutional structures and have appropriate mechanisms in place. We are aiming for a consistency of approach to student fitness to practise across all of our recognised chiropractic degrees and providers.

Whilst the guidance is advisory rather than mandatory, we expect to confirm that these principles are being followed when we approve chiropractic degrees and undertake annual monitoring.

Education providers are expected to:

- actively develop student fitness to practise during the course of the programme, and
- have measures in place to react quickly and fairly to any concerns about a student's fitness to practise.

The accompanying guidance for students sets out in more detail the professional behaviour expected of students and the behaviour that would give cause for concern. Patients and the public trust that health professionals will practise competently and behave appropriately towards them. For this trust to be developed and maintained, it is important that chiropractic students behave in a way that promotes the best care of patients and upholds the reputation of the profession. It would be highly unusual for an education provider to award a recognised chiropractic qualification to an individual and us, the GCC, to then stop them registering as a chiropractor.

This guidance, and the accompanying guidance for students, has been informed by the work of the other healthcare professional regulators.

## The General Chiropractic Council

The General Chiropractic Council (GCC) regulates the profession and practice of chiropractic in the UK with the overall purpose of protecting patients and the public.

We do this by:

- 1 registering chiropractors – it is illegal in the UK for anyone to describe themselves as a chiropractor, or to imply that they are a chiropractor, if they are not registered with us
- 2 setting standards of chiropractic education for individuals who are training to become chiropractors – these standards are set out in our *Education Standards* <http://www.gcc-uk.org/education/education-standards/>
- 3 setting standards of professional conduct and practice for those who are practising as chiropractors – these standards are described in our *Code* <http://www.gcc-uk.org/good-practice/> We also investigate any serious allegations about any chiropractor whose behaviour or conduct has been questioned. Where necessary we place restrictions on how that individual practises or, in very rare cases, remove them from the register so they can no longer practise as a chiropractor in the UK.

Our standards for chiropractic education include:

- the broad content required of chiropractic degree programmes and the areas against which individuals will be assessed in order to graduate from the degree
- criteria that the institutions offering the degree have to meet.

When a chiropractic education provider awards a recognised chiropractic qualification to an individual this is a public statement that the holder is capable of practising chiropractic without supervision to the standards expected in *The Code*. The individual is then eligible to apply for registration with us subject to satisfying health and character requirements, having professional indemnity insurance and paying the required fee. We would not refuse an application from a graduate of a recognised chiropractic programme unless additional information is forthcoming at that point in time.

## What is student fitness to practise?

Student fitness to practise has three constituent parts:

- clinical and academic work
- professional behaviour
- health.

The outcomes of students' education and training programme – what they should learn and be assessed on - are set in our *Education Standards*. The third element, health, can affect an individual's ability to concentrate and perform and may have an effect on their behaviour. Education providers need to consider the reasonable adjustments they can make to help individuals manage any disability and health condition they have.

The second aspect, professional behaviour or student professionalism, is the main aspect considered in this guidance note (and the accompanying one for students) as it forms a key component of fitness to practise. Professional behaviour is behaviour which happens within the education and training institution as well as that outside of the education environment or when an individual is online and/or using social media.



Student fitness to practise relates to matters that may affect patient safety and the trust that the public places in the profession.

Chiropractic students, although supervised, are often acting in the position of a healthcare professional and are taking decisions that can affect an individual's health

and wellbeing. Patients may also see student chiropractors as knowledgeable and patients usually expect students to behave as would a qualified practitioner. Whilst there are differences between the standards expected of chiropractic students and those expected of chiropractors, as students are the chiropractors of tomorrow there are similarities between the behaviour expected of them during their training and those expected of registered practitioners, particularly during their clinic periods.

Education providers are responsible for determining the fitness to practise of the students on their programmes. We, as the regulator, do not have a direct role in dealing with individual cases of student fitness to practise and we do not intervene if students are disciplined because of fitness to practise concerns. Our role is to seek to establish consistency of approach across the education providers by producing guidance such as this.

Every education provider is expected to have their own student fitness to practise policy and procedure covering matters that affect patient safety and the trust that the public places in the profession.

Student fitness to practise includes students at all stages of their degree programme – pre-clinical and clinical – and behaviour in their professional and personal lives. Student fitness to practise procedures, process and outcomes should:

- be used appropriately with the outcomes focused on patient safety and the trust that the public places in the profession
- not be designed to punish particular behaviours but to ensure patient safety and uphold trust.

All universities will also have their own disciplinary policies and procedures as well as student fitness to practise policies for chiropractic degree programmes. We expect education providers to:

- continue to use their disciplinary policies for normal disciplinary issues (eg infrequent / poor lecture attendance, late submission of coursework, or inability to meet a particular learning outcome)
- use student fitness to practise policies and procedures for any behaviour or issue which is linked to patient care and patient safety.

## Student professionalism

Student professionalism, or developing professional behaviour, is a significant part of fulfilling student fitness to practise requirements. It is about the way that students respond to the standards that are required of them and the issues that they face. It includes developing and demonstrating appropriate attitudes and behaviour with patients, other students, education staff and others. It also includes developing the ability to know when to seek advice and support and the response that is made when feedback, advice and support is received. Our related guidance – *Student Fitness to Practise: guidance for students* – provides more detail on the professional behaviours expected of students.

There are some aspects of professionalism on which we have published specific guidance.

### Social media

Our guidance on the use of social media - <http://www.gcc-uk.org/UserFiles/Docs/Guidance/GCC-Guidance-%20The%20Use%20of%20Social-Media-FINAL.pdf> - should be brought to the attention of students from the start of their programmes and be reinforced throughout as students have a responsibility to behave professionally both online and offline. The standards expected of students are no different when they are communicating using social media as compared to communicating face-to-face or in writing. Online images can impact on an individual's professional life and it would be possible for a member of the public to identify an individual even if they do not represent themselves as linked to chiropractic. Students should assume that everything that they share online will be there permanently, could be seen by anyone and could be copied and redistributed without their knowledge.

### Boundaries

Our guidance on sexual boundaries - <http://www.gcc-uk.org/UserFiles/Docs/Guidance/Guidance%20on%20maintaining%20Sexual%20Boundaries-final.pdf> - emphasises that a breach can seriously damage the reputation of, and confidence in, the chiropractic profession. A chiropractor who displays sexualised behaviour towards a patient undermines the profession, breaches trust, exploits a power imbalance, acts unprofessionally and may additionally be committing a criminal act and be the subject of fitness to practise proceedings. Students should be taught at the earliest opportunity about the dynamics of the therapeutic relationship and the vulnerability of patients.

As our related guidance for student sets out, there are also issues in the education environment regarding relationships with staff and with other students where boundaries may be breached. Each education provider should have their own guidance on the appropriateness of personal relationships between staff and students and the potential issues that may arise if such relationships develop. As with healthcare professionals and patients, staff are in a power relationship to students. Boundary issues might arise in relation to friendships and social

relationships as well as with sexual relationships. Behaviours that may give cause for concern include:

- socialising with students
- holding study groups or arranging meetings with students in the staff member's home
- sharing unnecessary or inappropriate personal information
- social media contact for non-educational purposes.

Students should also be made aware of the importance of maintaining appropriate boundaries with other students on their programme. This is because chiropractic education and training often involves a high degree of physical contact with other students during skills-based classroom activities. This can sometimes inadvertently lead to boundaries being crossed. Students should be offered guidance about this, and about practising chiropractic techniques, particularly when they are not in the supervised setting of the educational environment as this is where boundary issues are more likely to occur and misunderstandings to arise.

#### **Duty of candour**

The duty of candour refers to the professional responsibility of openness and honesty required of chiropractors with patients when something goes wrong with their care which causes, or has the potential to cause, harm or distress. Education providers should be clear about how the duty of candour applies to students and they should ensure that students are aware of our additional guidance on this topic <http://www.gcc-uk.org/UserFiles/Docs/Guidance/GCC-Guidance-Candour-FINAL.pdf> Providers should encourage students to be honest and open with staff, patients and other students when something goes wrong.



## Developing student fitness to practise

### General approach

Every chiropractic education provider should:

- 1 give students a copy of our publication *Student Fitness to Practise: Guidance for Students* and encourage them to read it
- 2 make students aware of the need to act professionally, enable them to develop their professionalism and assess this during the chiropractic degree programme
- 3 have clear, transparent and published student fitness-to-practise policies and procedures that are separate from academic disciplinary procedures. These should:
  - a. clearly explain how the institution makes sure that processes are fair and do not unfairly discriminate on the basis of lifestyle, culture or social or economic status<sup>1</sup>
  - b. be appropriate to the purpose of the degree programme, which is to develop future members of the chiropractic profession. They should focus on patient safety and maintaining the public's trust in the profession
  - c. be communicated clearly to students at the start of their programme and reinforced regularly
  - d. take into account how students' understanding of professionalism, and their ability to behave professionally, develops alongside their knowledge and skills about chiropractic
  - e. clearly describe how anyone can raise concerns about a student's behaviour
  - f. be applied on a case-by-case basis
- 4 tell us about any student who has been dismissed from the course due to the findings of a student fitness to practise panel
- 5 only award a recognised chiropractic degree to individuals who are capable of practising to all of the standards set out in *The Code*. If the required standards cannot be demonstrated, it may be appropriate for an education provider to consider the award of an alternative qualification that does not have the same status as a recognised degree and so does not lead to registration as a chiropractor.

### Recruitment and selection

Before making an application to a chiropractic degree programme, individuals may seek information about the nature of the programme and their likelihood of successfully completing it and becoming a registered chiropractor afterwards. As

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<sup>1</sup> Equality Act 2010

well as signposting potential applicants to the learning outcomes to be achieved as set out in the *Education Standards* and *The Code*, it would be advisable for providers to explain:

- the nature of the teaching and learning activities that takes place during the programme, specifically skill-based classroom exercises through which students usually develop and practise their technique based skills in relatively large numbers in their underwear
- the requirements that will be placed on their behaviour in their personal as well as professional life due to the fact that they are training to become a registered healthcare professional
- the potential difficulties of registering if the individual has any issues in their past which may preclude them from becoming a registered chiropractor (eg previous convictions or conduct cases might call an applicant's fitness to practise into question). Applicants are unlikely to be suitable to become a primary healthcare profession student if they have been convicted of, for example, serious sexual or violent offences which led to a custodial sentence or if they have been barred from working with children or other vulnerable groups. Where there have been convictions for less serious offences (eg fraud, drug or alcohol dependency, unlawful discrimination), the institution will need to weigh up a number of factors such as: the circumstances which led to the conviction, how long ago it was, the insight shown by the individual concerned, and any indications of risk.

When considering applications, chiropractic education providers should consider that they are aiming to produce graduates who are able to demonstrate achievement of standards of behaviour that are consistent with the eight principles set out in *The Code* and who are able to become reflective, self-critical and effective primary healthcare practitioners.

In the interests of public protection, chiropractic education institutions will need to:

- ensure that enhanced Disclosure and Barring Scheme (DBS) checks (or their equivalents in the other UK countries) are carried out for each applicant prior to admission to the course
- have in place criteria that are effective in dealing with any issues revealed by the DBS checks or supporting documentation
- ensure that regular self-declarations are made.

Education providers might find the resources available from Health Education England's project on values based recruitment to be useful in their recruitment and selection programmes (recognising this was initially developed for the NHS)<sup>2</sup>.

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<sup>2</sup> See <https://www.hee.nhs.uk/our-work/attracting-recruiting/values-based-recruitment>

### Developing and assessing professionalism

When communicating with applicants and students, education providers should make it clear that chiropractic is a regulated profession in the UK and that professional behaviour is a requirement during the education and training programme and throughout their working lives. Education providers should explain that we, the GCC, are responsible for decisions on registration but that we do this by placing reliance on our education providers to act effectively and consistently in relation to student fitness to practise.

Chiropractic education and training gives students the opportunity to learn and develop appropriate behaviour in a supervised setting. It is also an opportunity for education providers to identify behaviour that might put patients, the public, other students or staff at risk, or that is otherwise inappropriate for a healthcare professional. When this type of behaviour happens, providers should give immediate feedback so that the students can understand the issue and learn from it. They should be more stringent if such behaviour happens again. It is important that this learning and development takes place from day one across the whole of the programme and is not only seen to apply to clinical settings.

All staff should act as role models of good professional practice as students develop their understanding about, and values of, professionalism and professional behaviour from their informal interactions during their education and training as much as they do from any formal inputs. This means that education providers need to consider how all aspects of the educational environment, including all staff members, are enabling students to develop their professionalism. For senior management, this might mean making sure that all members of staff understand and adopt high values of professionalism in everything they do and that this is confirmed through everyday interactions and in appraisals.

Education providers should:

- engage students in formal and informal discussions about professionalism throughout their education and training programme so that they develop an insight into the nature of professional behaviour and attitudes
- build professionalism into the curriculum across the programme
- seek to develop an environment and culture where speaking up is encouraged and supported
- support students to develop professional behaviour and attitudes through a variety of different means, such as discussing ethical situations as well as exploring with more experienced practitioners the tensions that exist in real practice and how such tensions can be managed
- assess a student's professional behaviour to ensure it is appropriate for their level of study so that students understand its importance in their overall development and gain a rounded view of all of the components that make up fitness to practise

- develop students' ability to assess and monitor their own knowledge, skills and practice as this lies at the heart of professional regulation
- take action to deal with any concerns about a student's fitness to practise as soon as they arise
- make final summative assessments on whether a student satisfies all the programme outcomes and is awarded a chiropractic degree stating that in the judgment of the education provider the individual is capable of practising in accordance with the standards set out in *The Code* <https://www.gcc-uk.org/good-practice/> If an education provider has any concerns, they should.

### **Pastoral care and student support**

Education providers should put in place different forms of support for chiropractic students who are struggling on any matter. Such forms of support might include: personal tutors, student health services, disability advisers, counselling and student groups. This will enable students to be helped in a supportive environment and confidentially think through implications for themselves and others before it becomes a fitness-to-practise concern.

If fitness-to-practise concerns arise, students should be offered support alongside, but separate from, the fitness-to-practise procedures. It is for this reason that personal tutors (and any other support provider) should not play a role in either investigating or adjudicating on the fitness-to-practise cases of any of their individual students. However, personal tutors may identify behaviour that causes concern and bring this to the attention of the student. When necessary, they should report their concerns for consideration under student fitness-to-practise processes. Chiropractic students should be made aware that anyone who is giving them support has a duty to raise fitness-to-practise concerns through the necessary channels if their behaviour or health may put patients, the public or colleagues at risk.

Students should be informed that although education providers will generally keep their personal information confidential, there are certain situations where the need to protect the public overrides the need to maintain confidentiality. In these cases, information may be shared with others, such as us as the regulator and other chiropractic education providers. This will be the case when, for example, a student is dismissed from a programme because of impaired fitness to practise. Providers should have clear guidelines for students on when there is a need to disclose information for public protection purposes.

## Student fitness to practise policies and procedures

### Considering fitness to practise on the grounds of health

Student fitness to practise procedures may apply to a student with a health condition in the following circumstances:

- where there are significant concerns about patient safety such as when a student's ill health appears to be out of control or where there is evidence that the student is not following treatment or advice so that there is a significant risk of relapse or a significant loss of insight into the condition (eg as a result of the condition itself such as addiction or for certain mental health conditions).
- where the student is failing to comply with measures and adjustments which have been specifically designed to enable them to complete the course (eg from occupational health or similar processes).
- where a health condition has a detrimental effect on a student's ability to engage with the course even after agreed adjustments have been made.
- where there are significant misconduct issues linked with a health condition (eg when a student has been convicted of a drug or alcohol offence).

Education providers should consider the following factors to decide if a student fitness to practise intervention is required:

- Is there a risk to patients, staff or other students now or in the future?
- Is there a risk to public confidence in the profession?
- Does the student have insight into their condition?
- Is the student seeking and acting on treatment advice and support and adjusting their activities accordingly?

### The threshold of student fitness to practise

*The Code* sets out standards for conduct, performance and ethics for chiropractors to ensure the competent and safe practice of chiropractic. The Code has two purposes:

- 1 to help chiropractors uphold the highest standards of care and conduct
- 2 to make clear the quality and care that patients should reasonably expect from registered chiropractors.

Students are expected to:

- behave in a professional and responsible manner to the standards set out in this document and the accompanying student guidance

- be guided by *The Code* and to behave according to it at a standard appropriate to the level at which they are at in their training.

Education providers will need to make a judgment as to whether any issues relating to a student's behaviour, or management of a health condition, can be dealt with as:

- part of normal feedback or remediation during the course
- through university disciplinary procedures
- through formal student fitness to practise procedures.

This consideration should take into account:

- 1 How serious is the incident? Did it put patients, the public, other students or staff at risk? Is it likely to have an impact on trust in the profession?
- 2 Is this a one-off incident or is it related to a pattern of behaviour?
- 3 What level of maturity or insight does the student possess in relation to the incident?
- 4 What is the likelihood of it happening again?
- 5 How well is the student likely to respond to support and remediation?
- 6 Does the incident have implications as to whether the student should be able to graduate with a recognised chiropractic qualification? If yes, then the formal student fitness to practise procedures should be used.

If a student's behaviour or issue is managed through remediation, you should keep a record to make sure that any patterns of behaviour can be identified and dealt with appropriately if they occur again.

Any student behaviour or health issue that raises a serious or persistent cause for concern about the individual's ability to continue on their chiropractic degree course, or to practise as a chiropractor after graduation, should be considered through formal student fitness to practise procedures. Once the procedures are set in train in relation to any particular case, they should be followed through so that there is consistency of approach in managing fitness to practise issues.

### **Interim suspension**

At the start of an investigation, education providers need to give active consideration as to whether there is a need to suspend the student from the course, or part of the course (such as patient contact), until the investigation is completed.

The purpose of such interim suspension is to protect patients, staff or the student themselves. Such an action should only be taken if it is a proportionate and fair response to the issue in question. The decision should be reviewed regularly to check that interim suspension remains appropriate. If interim suspension has been thought

to be necessary, it should be brought to the attention of the student fitness to practise panel and other relevant authorities as soon as possible.

### **The investigation process**

There should be a clear distinction between the investigation and adjudication stages of the fitness-to-practise procedures and this should be communicated to those involved.

The investigator should be independent of the fitness to practise panel that will make the decisions. They should not be the personal tutor of the student nor have ongoing contact with them.

The role of investigators is to collect, collate, present and record the evidence to inform a decision as to whether a student's fitness to practise is impaired.

The questions and accompanying guidance below are designed to inform the investigation process.

#### ***Questions to consider when establishing if there are fitness to practise concerns***

- |   |   |   |
|---|---|---|
| 1 | Has the student's behaviour harmed patients, students or staff, or put them at risk of harm?  | Harm or risk of harm might be demonstrated by one incident, or a series of incidents, which gives cause for concern (eg failing to complete patient records). A series of incidents could indicate persistent failings that are not being safely managed or resolved through developmental support.   |
| 2 | Has the student shown a deliberate or reckless disregard of professional and clinical responsibilities towards patients, other students or staff? | An isolated lapse from normally high standards of conduct would not necessarily call a student's fitness to practise into question. But persistent misconduct that could indicate a student's lack of integrity, an unwillingness to behave responsibly or a serious lack of insight, and a lack of willingness to respond to staff who raise an issue, would call a student's fitness to practise into question. |
| 3 | Has the student abused a patient's trust or violated their autonomy or other fundamental rights?  | Behaviour that shows a student has acted with little or no regard for another person's feelings or rights, and has therefore abused their professional position, would usually give rise to concerns about their fitness to practise.   |
| 4 | Has the student's behaviour undermined public confidence in chiropractors or healthcare professionals generally if no action is taken?            | Patients must be able to trust healthcare practitioners with their health and wellbeing. The behaviours that might be relevant here include: identifying patients on social media, receiving a criminal conviction or caution.  |
| 5 | Has a student behaved dishonestly, fraudulently or  | If a student behaves in a way that might undermine the profession or bring it into disrepute, then this should be   |

in a way designed to mislead or harm others?

considered a fitness-to-practise issue. This includes: dishonesty, forgery (for example, of a supervisor's signature in the clinic), or failing to keep to regulations.

6 Is a student's health or disability or their management of this compromising patient safety?

A student's health or disability does not in itself bring their fitness to practise into question. A fitness-to-practise issue may arise if a student shows a lack of insight into their condition or does not follow medical advice on how to manage it so that others are put at risk.

The investigator:

1. should obtain evidence from relevant people in the form of statements or other evidence (eg student records)
2. should keep a full record of:
  - a. the evidence they obtain
  - b. any decisions they take
  - c. the reasons for reaching decisions
3. should consider issues on a case-by-case basis taking into account the circumstances of the case
4. must act in a proportionate way by weighing the interests of patients and the public against those of the student
5. should establish whether the behaviour is serious enough for a fitness to practise panel to be convened to consider the concerns, or whether the behaviour would be better dealt with through student support and remedial tuition
6. should consider if:
  - a. and when the student has shown insight into their behaviour
  - b. there are mitigating circumstances that contributed to the behaviour
7. should produce a written report of the investigation detailing:
  - a. all of the evidence collected
  - b. records of complaints, as well as notes of meetings, interviews and statements
8. should present their final written report to an individual or committee consistent with the institution's procedures.

At the end of an investigation, the investigator and the person / committee who agrees the next stage needs to decide on one of the following outcomes:

1. there is no / insufficient evidence to call the student's fitness to practise into question so the case can be concluded either with no action or with support



offered to the student to help to ensure that concerns are unlikely to be raised in the future

2. issue a warning to the student about the behaviour
3. agree an undertaking with the student in which they explicitly acknowledge that their fitness to practise may have been impaired
4. refer the case to a student fitness to practise panel for it to consider one of a possible number of sanctions.

These different categories are considered further below.

### **The fitness to practise panel – the adjudication stage**

#### *Constitution*

Fitness-to-practise panels should be made up of a mixture of professional, educational and lay people so that educational, professional and public interests are considered. At least one member of the panel should be a registered UK chiropractor. There would also be benefits in involving a registered healthcare practitioner from another education provider to improve objectivity<sup>3</sup>.

Panel members should be open-minded individuals who are able to suspend their judgments until they have heard all of the facts of the case. The panel should be unbiased with no perceived conflicts of interest between the individuals acting as members of the panel, between panel members and the investigator, or with the student. The panel must not include the investigator.

All students should have the right of appeal so it is advisable to think carefully about involving senior managers in the panel as it might be necessary to involve them at a later appeal stage.

#### *Preparation*

All panel members should be thoroughly briefed on their role and be provided with appropriate documents. Preparation should involve:

- 1 understanding the education provider's fitness to practise policies and procedures and how these relate to the handling of other concerns (such as academic discipline)
- 2 reading about, and discussing as a panel and with other members of staff, the professional behaviour expected of students, concerns about students and how these relate to *The Code* <https://www.gcc-uk.org/good-practice/>
- 3 confirming that panel members are open minded and willing to hear the full facts of the case before reaching a decision

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<sup>3</sup> Education providers will wish to consider here the particular solution that works for them depending on the size of the institution and the range of people available to them in the organisation who can be independent.

- 4 ensuring that panel members understand:
  - a the importance of making the proceedings fair and proportionate, and how to achieve this
  - b the legal requirements and practice in promoting equality and diversity
  - c the limits of their knowledge and expertise and when expert advice and opinion should be sought (eg on health matters).

*Role*

The role of the fitness to practise panel is to consider any concerns on a case-by-case basis, acting proportionately and weighing up the interests of patients and the public, the interests of the student, and the need to maintain trust in the profession. The student fitness-to-practise panel should follow the process of:

- 1 considering the evidence presented by the investigator
- 2 considering the evidence presented by the student
- 3 deciding if the student's fitness to practise is impaired on the balance of probabilities and by weighing up patient and public safety, the interests of the student and the need to maintain trust in the profession<sup>4</sup>
- 4 considering any mitigating circumstances presented by the student
- 5 deciding on an appropriate sanction if the student's fitness to practise is found to be impaired.

All deliberations of the panel should be recorded.

*Convening the panel*

A student fitness-to-practise panel should be convened in as short a timescale as possible but at a time when all panellists can be present and are able to give the case proper consideration.

The student concerned should:

- 1 be given information on the date, time and location of the hearing
- 2 be told how the proceedings will be run
- 3 receive an outline of the concerns and any evidence to be presented
- 4 be given the opportunity to prepare for the hearing, for example by collecting any necessary evidence (including medical evidence)
- 5 be told they are able to bring an independent and knowledgeable person along with them to support them in the process<sup>5</sup>

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<sup>4</sup> Decision making by the panel should be informed by: the guidance we issue and be consistent with the regulations and procedures of the higher education provider.

<sup>5</sup> This is not intended to be a lawyer.

- 6 have the opportunity to present mitigating factors that they wish to be taken into account, if their fitness to practise is found to be impaired.

### Outcomes of student fitness-to-practise cases

Student fitness-to-practise hearings, like the fitness-to-practise hearings for registered chiropractors, should focus on patient safety, the wellbeing of the public and maintaining the trust that the public places in the profession.

Their purpose is not to punish the student or seek retribution.

Chiropractic graduates are asked to disclose any sanctions they have received to us when they apply for registration. Students must also consent to disclosure of fitness to practise sanctions imposed by chiropractic education providers to other individuals or organisations when this is required for patient safety.

The possible outcomes of a student fitness to practise hearing are:

- 1 fitness to practise is not impaired and there is no case to answer
- 2 evidence of misconduct but fitness to practise is not currently impaired
- 3 the student's fitness to practise is judged to be impaired and a sanction is imposed. Panels should consider which sanction to impose, starting with the most lenient first, and decide on the most appropriate and proportionate response in relation to the issue. The sanctions may be:
  - a formal warning
  - b undertaking
  - c conditions
  - d suspension from all or part of the chiropractic course
  - e dismissal from the chiropractic course.

If the panel decides to impose a sanction, in making the decision to and in recording its outcomes, it should:

- make clear in its final determination that it has considered all of the options
- explain why it considers the sanction to be an appropriate and proportionate response
- give clear reasons for imposing a particular sanction, including any mitigating or aggravating factors that influenced the decision
- include, when relevant, a separate explanation as to why a specific length of sanction has been imposed.

Education providers should tell students about their duty to disclose any sanction given by a student fitness-to-practise panel to us when they apply for registration. We generally do not take any further action if a potential registrant discloses a

sanction they have been given as a student. This is because we assume that, if an individual has successfully graduated from a chiropractic programme with a recognised qualification, the education provider considers them as being fit for registration. However, if it later comes to light that an individual has failed to disclose such information, it may raise concerns about their honesty and ability to learn from their mistakes.

### Warnings

A warning is a formal response that focuses on professional values and behaviours and emphasises patient safety and public trust. Its purpose is to show the student that the behaviour is inappropriate for a professional and should not be repeated.

Students should be given appropriate support to deal with the behaviour or any underlying problems that may have led to it occurring.

Warnings might be appropriate:

- a at the early stages of a student's education and training
- b if the student shows insight into their behaviour and its impact
- c if there is no evidence that the student posed a risk to the safety of patients or others
- d if it is a one-off instance of poor behaviour.

Warnings should be:

- formally recorded so that any repeat behaviour or patterns of behaviour can be identified
- remain on the student's record.

If a warning has been given and is later breached, this should also be recorded so that it may be taken into account in any future panel hearing. Any repeat behaviour or otherwise failing to comply with warnings should lead to the consideration of more severe sanctions.

### Undertakings

An undertaking:

- is an explicit agreement between a student and an education provider that:
  - the student's fitness to practise may have been impaired
  - how it will be addressed to protect patients and the public
- there is evidence to show that the student will comply with the undertaking because they have, for example:
  - shown genuine insight into their behaviour
  - a wish to address to it

- already made changes to their actions or tried to put things right.

The ways of addressing the behaviour might include: restrictions on the student's practice or behaviour or a commitment to increased supervision or additional teaching. Undertakings are useful when a student acknowledges they have behaved inappropriately, either before the panel has sat, or during the proceedings but before the decision.

Before it is agreed, the fitness to practise panel needs to be confident that an undertaking will offer sufficient protection for patients, the public, other students and staff.

### Conditions

Conditions are appropriate when there is significant concern about the behaviour or health of a student following a finding that their fitness to practise is impaired.

Conditions should:

- be appropriate, proportionate, workable and measurable
- have clear objectives so:
  - the student knows what they are expected to do to keep to it
  - a future panel can decide whether the condition has been met and the original shortcomings addressed
- set a specific time for a review of progress.

To impose this sanction, the panel must be satisfied that:

- a the student has shown sufficient insight into the problem and has agreed to keep to the conditions
- b there is no evidence that the student is inherently incapable of practising professionally and of upholding professional values
- c there is no evidence of harmful, deep-seated personality or attitudinal problems
- d the student is capable of responding positively to remedial teaching, support and increased supervision
- e the student is willing to be honest with patients, colleagues and supervisors if things go wrong
- f patients, other students or staff will not be put in danger either directly or indirectly as a result of the student being allowed to continue to practise albeit with conditions
- g it is possible to formulate appropriate and practical conditions (including resource use) which can be verified and monitored to protect patients while the conditions are in force.

### **Suspension from the course**

Suspension prevents a student from continuing with their course for a set period and from graduating at the expected time. The purpose of suspension is to put in place remediation measures with a student to address patient safety concerns. Suspension should be imposed where it is not possible to find workable conditions and where the opportunity to remediate deficiencies or recover from ill health is best achieved outside of the learning environment.

Suspension may be appropriate when some or all of the following apply:

- a there has been a serious breach of professional values but one that is not fundamentally incompatible with the student continuing on the course (ie remediation is possible but suspension is required in the interim for patient safety reasons)
- b there is the possibility of remediation although the student needs to be suspended for patient-safety reasons
- c the student's judgment may be impaired and there is a risk to patient safety if the student remains on the course even whilst subject to conditions
- d there is no evidence that the student is inherently incapable of practising professionally and of upholding professional values
- e the student has shown sufficient insight into their behaviour and is not likely to repeat it
- f appropriate support can be put in place when the student returns to the course.

When students return from suspension, there should be a review of progress taking into account the remedial actions that the student has taken and their reflections on what has happened. It might also be appropriate to gain medical or therapeutic reports. Depending on the issue and the progress that has been made, it may be necessary to require the student to abide by further conditions.

### **Dismissal from the course**

Dismissal from the course is the most extreme sanction and should be used when the student's behaviour is fundamentally incompatible with their continuing on the programme or practising as a chiropractor in the future, as that is the only way that patients, the public, students and staff members can be protected. If appropriate, and if there are other suitable educational programmes available, the student can be supported to transfer to another course. However, proper consideration should be given as to whether this should be in the field of health and social care which leads to some form of professional recognition.

The factors that might lead to a student being dismissed include:

- a seriously departing from the standards of behaviour set out in our student fitness to practise guidance and *The Code*
- b behaving in a way that is fundamentally incompatible with being a chiropractor and a registered healthcare professional
- c behaving with a reckless disregard for the safety of patients or others
- d behaving in a way that has caused serious harm to others either deliberately or through incompetence, and particularly when there is a continuing risk to patients or others
- e having abused a position of trust and acted dishonestly, including covering up their actions and when the dishonesty has been persistent
- f having violated a patient's rights or exploited a vulnerable person
- g having committed offences of a sexual nature, including involvement in child pornography
- h having acted violently
- i having put their own interests before the interests of patients or others
- j having persistently shown a lack of insight into their actions, behaviour or their consequences
- k showing no potential for remediation.

Discontinuation on health grounds may be necessary where no reasonable adjustments can be made that would enable the student to meet the competence standards. This would only be undertaken following consultation with the student and once all reasonable adjustments had been considered.

### Appeals

There should be a clear formal appeals process for student fitness to practise decisions. Chiropractic education providers should make students aware of their right of appeal against decisions of the fitness to practise panel, how to do this and the timescales.

Appeals policies should include:

- the exact remit of the appeals panel
- whether appeals can re-examine the facts of the case or are limited to looking at whether due process has been followed
- the composition of appeals panels.

## Registering with the GCC on qualification

When an education provider awards a recognised chiropractic degree, this is a formal statement from that education provider that the student has met all the programme outcomes specified in the *Education Standards* and has the capability to be a registered chiropractor by acting consistently with *The Code*.

If an education provider has concerns about the fitness to practise of an individual student they should have taken the appropriate actions to address these concerns before the award of a chiropractic degree.

## Good health and good character

Under The Chiropractors Act 1994 and associated rules all applicants for registration must show that they are of good character and have sound physical and mental health.

In the context of registration, 'sound physical and mental health' means that the applicant is able to practise in keeping with the standards set out in *The Code*. It does not mean that a registrant has to be 100% physically and mentally fit. Currently this requirement means that applicants need to provide a medical report from their GP.

As part of the registration process, and so that 'good character' can be considered, applicants must:

- a declare any sanctions they received in relation to their fitness to practise while a chiropractic student
- b provide a character reference. This must be written, dated and signed by someone of professional standing, acceptable to the Registrar, who has known the applicant for four or more years and is not a patient, relative or employee. For new graduates, the GCC expects this character reference to come from a senior manager of the chiropractic education institution
- c declare all criminal charges or convictions (except speeding offences), no matter when or where the offences were committed (registration is exempt from the Rehabilitation of Offenders Acts)
- d give details of registration with other regulatory bodies or associations in the UK or elsewhere, and disclose any disciplinary action taken against them by such a body
- e give information about any allegations of professional negligence considered by a civil court
- f provide proof of professional indemnity insurance
- g provide a birth certificate and proof of any change of name since then (for example, a marriage certificate).

The Registrar has a duty to make sure that all applicants for registration are fit to practise in line with the requirements of *The Code*. If necessary, the Registrar may ask for more evidence on health or character to ensure that they meet the standard.



## **The data we collect on student fitness to practise from education providers**

We collect two forms of data about student fitness to practise from education providers:

1. collated data – this is collected during our annual monitoring of chiropractic programmes and asks for the number of allegations, a short summary of any sanctions imposed plus lessons learnt or changes made as a result of the cases. This data does not include individual student identifiers. Its purpose is to ensure that student fitness to practise is being considered by education providers and informing their work.
2. information on any individual student who has been removed from a course for serious fitness to practise issues (ie the student's behaviour is fundamentally incompatible with their continuing on the programme or practising as a chiropractor in the future). We make the assumption that any students who has received sanctions from a fitness to practise panel but then gone on to successfully graduate from the programme have learned from that experience and has become, in the eyes of the education provider, fit to practise to the standards set out in The Code.

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May 2018