

Prifysgol Aberystwyth University



Fitness to Practise Policy and
Procedure for Healthcare Education
Professional Programmes Handbook

Approved by Academic Board

June 2021

Aims and principles for Fitness to Practise for nursing and midwifery students

This handbook should be read in conjunction with the University's Academic Quality Handbook, section 16 'Fitness to Practise', published at: [Aberystwyth University - Academic Registry: 16. Fitness to Practise](#)

The Nursing and Midwifery Council (NMC) clearly defines their overarching objective as an organisation, as the protection of the public. It's central to everything they do.

Article 3(4) of the Nursing and Midwifery Order 2001 states: 'The over-arching objective of the Council in exercising its functions is the protection of the public.' Article 3(4A) states: 'The pursuit by the Council of its over-arching objective involves the pursuit of the following objectives—

- protect, promote and maintain the health, safety and wellbeing of the public
- promote and maintain public confidence in the nursing and midwifery professions
- promote and maintain proper professional standards and conduct for members of the nursing and midwifery professions.

In short two key factors apply:

- ensuring patient safety to encourage fairness, openness and learning
- enabling professionalism: supporting nursing and midwifery students to address concerns about their practise, so that members of the public can continue to have confidence in the University to promote and uphold high standards.

Our aims for Fitness to Practise

As an AEI (NMC Accredited Education Institution) the University has two clear aims for Fitness to Practise:

- A professional culture that values equality, diversity and inclusion, and prioritises openness and learning in the interests of patient safety
- Student nurses and midwives who are fit to practise safely and professionally.

The NMC have designed a set of principles to help guide universities in delivering these aims:

NMC principles for Fitness to Practise

The Department will follow the NMC principles to make sure it is consistent and transparent in the way it works with students and in the way it makes decisions about student nurses' Fitness to Practise.

Read about each principle below and how the University applies these (see <https://www.nmc.org.uk/ftp-library/understanding-fitness-to-practise/using-fitness-to-practise/>), Note that 'we' is used throughout the MNC principles as stated below; 'we' in this context relates to Aberystwyth University.

1. A person-centred approach to Fitness to Practise.

A person-centred approach helps to put patients, families and the public at the heart of what is being done.

It involves listening to what patients, their families and loved ones say about their experiences so that the University can understand what the regulatory concerns about student nurses and midwives might be and are better placed to act on those concerns. Sometimes, they provide vital information that shows the University needs to scrutinise the conclusions others have reached.

The university wants patients and members of the public to feel supported and listened to in its Fitness to Practise proceedings. Putting patients, families and the public at the centre helps to make sure it is in the best place to protect the public.

2. Fitness to Practise is about managing the risk that a student nurse or midwife poses to patients or members of the public in the future. It isn't about punishing people for past events.

If professional programme students see the University as being punitive, those students are more likely to hide things going wrong or act defensively. This will make it difficult to achieve the kind of open and learning culture that's most likely to keep patients and members of the public safe.

If the university is seen by the people affected by unsafe care, as being there to discipline the student nurses and midwives involved, those people may be distressed if it does not take action against student nurses and midwives who are no longer a risk.

3. The university can best protect patients and members of the public by making Fitness to Practise decisions swiftly and disseminate learning effectively

Transparency is crucial to an effective Fitness to Practise process. All the people involved in a case, including students, patients, members of the public, and nurses and midwives, expect Fitness to Practise processes to be efficient and joined up.

They need to understand clearly and as quickly as possible what has been done about the concerns, and the reasons for the decisions taken. Those reasons may help others in similar situations make decisions that will help keep patients and members of the public safe.

4. The University will act first to deal with concerns about a student nurse or midwife's practice, unless the risk to patients or the public is so serious that it needs to take immediate action and include other agencies in the response.

Universities are closer to the sources of risk to patients and members of the public, and better able to recognise and manage them. If they need to, they can intervene directly and quickly in a student nurse or midwife's practice and do so in a targeted way dealing specifically with the risks.

The university will involve other agencies early on if the student nurse or midwife poses a risk of harm to themselves, university staff, patients or the wider public that it can't manage effectively.

Aberystwyth University's overarching Fitness to Practise procedures are set out in the Academic Quality Handbook section 16: <https://www.aber.ac.uk/en/academic-registry/handbook/fitness-to-practise/> and the processes followed are set out in full in this document.

The University maintains the right to suspend the student nurse or midwife from the programme of study pending further investigation and following the 'Fitness to Practise' process can result in a student being suspended and/or withdrawn from the programme. To

allow for timely investigation and action the student will normally be placed on 'study leave' until the result of the investigation and a panel decision have been reached.

The University wants to support student nurses and midwives in positively engaging with the process and help them to show they have learned from mistakes because this will help with developing their professional duty of candour and help promote, rather than discourage, the kind of professional culture that's been shown to keep people safe

The duty of candour requires student nurses and midwives to be open and honest when things go wrong. It stops them from trying to prevent colleagues or former colleagues from raising concerns.

5. In cases that aren't about clinical practise, taking action to maintain public confidence or uphold standards is only likely to be needed if the concerns raise fundamental questions about the trustworthiness of a student nurse or midwife as a professional.

The University knows that the public take concerns which affect the trustworthiness of nurses and midwives particularly seriously. These cases are likely seen by the public as serious breaches of professional standards. Conduct that could affect trust in student nurses and midwives and require action to uphold standards or public confidence include, professional behaviour and attitude, professional practice, dishonesty, bullying and harassment. Within a student nurse or midwife's private life, convictions that relate to specified offences or result in custodial sentences are also likely to require action for the same reason.

Conduct that calls into question the basics of a student's behaviour and professionalism raises concerns about whether they are a suitable person to join a register of professionals.

Areas normally (but not exclusively) covered in Fitness to Practise:

Misconduct

Misconduct in either academic and practice context, we will usually only need to take action if it's clear that the student nurse or midwife deliberately chose to take an unreasonable risk with the safety of themselves, others, patients or service users in their care.

Examples:

- breaching the professional duty of candour to be open and honest when things go wrong, including covering up, falsifying records, obstructing, victimising or hindering a colleague or member of staff or patient who wants to raise a concern, encouraging others not to tell the truth, or otherwise contributing to a culture which suppresses openness about the safety of care
- sexual assault, relationships with patients in breach of guidance on clear sexual boundaries, and accessing, viewing, or other involvement in child pornography
- deliberately causing harm to others including patients
- deliberately using false information or qualifications or giving a false picture of employment history which hides significant incidents in the past
- exploiting patients or abusing the position of a student nurse or midwife for financial or personal gain
- being directly responsible for exposing patients or service users to harm or neglect, especially where the evidence shows the student nurse or midwife putting their own priorities, or those of the organisation they work for, before their professional duty to ensure patient safety and dignity

Lack of competence

Substandard clinical care that calls into question a student nurse or midwife's competence would usually involve an unacceptably low standard of professional performance, judged on a fair sample of the nurse or midwife's work, which could put patients at risk. For instance, when a student nurse or midwife demonstrates a lack of knowledge, skill or judgement showing they are incapable of safe and effective practise.

Criminal convictions and cautions

Considering criminal conviction or caution declarations

All student nurses or midwives must declare any cautions or convictions, unless these are for a protected caution or conviction, when they apply to join the programme, and to ensure they are eligible to join the NMC register or renew their registration.

All registered nurses also need to let the NMC know if they become involved in criminal offending while they're on our register. Student nurses will be expected to annually declare

any cautions or convictions. Not telling the University about a conviction or caution is a clear breach of the Code and could have serious consequences. This is because the university has a clear expectation, as set out under the Code, that student nurses and midwives should let it know if they are involved in criminal offending as soon as they can.

If there's evidence the student nurse or midwife was dishonest about criminal offending when they applied to join the programme, the university will have to carry out a full investigation into the circumstances to determine if this affects their continuation on the programme leading to registration.

In all these cases the university will consider the possible effect on the student nurse or midwife's continuation on the programme, or their Fitness to Practise, even if the offending itself was not serious.

Specified offences include:

- hate crimes
- sexual offences
- offending previously known as 'serious arrestable offences'

Health

The University will not normally need to intervene in a student nurse or midwife's practise due to ill health unless there is a risk of harm to patients or a related risk to public confidence in the profession. A student nurse or midwife may have a disability or long-term health condition but be able to practise with or without adjustments to support their practise.

Cases of ill-health are likely to be managed with support to safely reduce any risk to patients, and where:

- the student nurse or midwife has demonstrated good insight into the extent and effect of their condition
- the student nurse or midwife is taking appropriate steps to access support and/or treatment and is following any advice from those treating them
- occupational health or other health professional is providing support

- the student nurse or midwife is managing his or her practise appropriately

Issues raised which indicate long-term, untreated (or unsuccessfully treated), or unacknowledged physical or mental health conditions will be of particular concern if they suggest a risk to public protection. Even where a health condition appears to be well managed, the student nurse or midwife may be at risk of relapse, which could affect their ability to practise safely. In such cases some form of restriction or adjustment may be required to make sure there is no risk of harm to patients or others.

When the University assesses whether concern about a nurse or midwife's health is serious enough to become impact their practise, it will consider the nature of the concern and whether there is sufficient evidence to justify seeking further information from third parties, such as the nurse or midwife's GP or occupational health department. The University will balance the student nurse or midwife's right to privacy with its overarching duty as an AEI to help protect the public.

Knowledge of English and patient risk

When there are seriousness of concerns about whether an applicant is suitable to be enrolled onto a programme of study which leads to registration as a nurse or midwife the university will first assess if the applicant has the necessary knowledge of English, the first question will be whether patients are placed at potential or actual risk of harm.

Examples of language concerns that could place the public at risk of harm include:

- poor handover of essential information about patient treatment or care to other health professionals because of an inability to speak English
- serious record keeping errors or patterns of poor record keeping because of an inability to write English
- serious failure(s) to give appropriate care to patients because of an inability to understand verbal or written communications from other health professionals (or patients themselves).
- drug error(s) caused by a failure to understand or inability to read prescriptions.

Applicants for the BSc Nursing programme at Aberystwyth University require a minimum of 104/96 UCAS points, via:

- 3 A Levels BCC/CCC
- BTEC Extended Diploma
- BTEC Diploma
- Access to HE Diploma (guaranteed an interview)

Plus, NMC requirements of:

- GCSE (or equivalent) English and Mathematics Grade C/4 or above.
- Good Health and Good Character assessment.
- Enhanced DBS
- Occupational Health Screen
- International applicants: IELTS with an overall score of at least 7 and at least 6.5 in the writing section and at least 7 in the reading, listening and speaking sections are accepted. They also accept OET certificate minimum of C+ in writing alongside a minimum of B in reading, listening and speaking.

Process and procedures

The process for managing Fitness to Practise issues raised is known as our “**Cause for Concern**” procedure. This sits alongside the normal practice assessment, feedback and ongoing record of achievement processes as set out in the UK Nursing and Midwifery Council (2018) Future nurse: Standards of proficiency for registered nurses. All Wales Practice Assessment Document and Ongoing Record of Achievement.

These processes are not mutually exclusive and may inform decisions and any actions in relation to student progress on the programme.

'CAUSE FOR CONCERN' PROCEDURE

This 'cause for concern' procedure is a guidance process for placement staff, university staff and students/trainees, to be applied where there is concern for a student/trainee's ability to succeed appropriately on the programme.

A 'cause for concern' is intended to be a developmental and supportive process. A cause for concern will be issued when:

- a student/trainee does not make the expected progress;
- a student/trainee struggles professionally or due to personal circumstances to meet expected standards
- a student/trainee fails to demonstrate high standards of personal and professional conduct

A cause for concern will review the evidence, outline the concern and set targets, identify training and actions and agree review points. It will result in increased agreed placement and university-based support and monitoring.

Specifically, a cause for concern:

- can be raised at any stage of the programme;
- will usually relate to specific aspects of the student/trainee's conduct and be characterised by a lack of expected progress

Targets

- Targets for improvement must be explicitly linked to areas of concern in the student/trainee's conduct and engagement.
- Targets will require agreed actions for both the student/trainee and all those supporting and supervising him/her
- The setting and revision of targets must be based on the review of the full range of evidence; there must be clear alignment between the identified issues, the assessment made and the targets set.

A suggested typical cause for concern escalation process for professional concerns is shown below. The cause for concern procedure should include a statement of concern, targets for improvement and related training and actions.

A TYPICAL BUT NOT EXCLUSIVE 'CAUSE FOR CONCERN' PROCESS (NURSING)

STEP 1 – ACADEMIC/PRACTICE MINOR CONCERN

- At the earliest opportunity joint review cause for concern meeting with Programme Lead, Practice Learning Partner (PLPs) nominated person (if appropriate), university tutor and/or academic assessor to take place and discuss the concerns with the student/trainee in a professionally appropriate manner. The student/trainee shall have the right to be accompanied at the meeting by a fellow student or representative from the Students' Union or Trade Union, where relevant.
 - Review issue raised, student progress and any response/mitigation, using the full range of evidence.
 - Agree targets (if appropriate) which are focused explicitly on areas of improvement with agreed actions, timelines/ expectations and explicit success criteria.
- The student/trainee should be informed they are a 'Cause for concern' and that the issues must be addressed, failure to do so could result in escalation and a Fitness to Practise concern being raised.
- If a sufficient response and plan of action and/or progress has been agreed by the student/trainee, normal programme and placement routine can continue. The student must confirm they agree to take ownership of their progress.
- If insufficient response and plan of action and/or progress has been made or significant concern raised which potentially could compromise student and/or patient safety, proceed to STEP 3
- The meeting must be recorded and any continuing concerns, targets and actions for the student/trainee must be shared appropriately with Programme Lead, PLPs

nominated person (if appropriate), university tutor and/or academic assessor. A detailed plan for monitoring and reporting progress and measurable success criteria must be included.

STEP 2 ACADEMIC /PRACTICE PLACEMENT SIGNIFICANT CONCERN

A significant academic/practice placement concern is defined as any issue raised which actually or potentially could compromise staff, student, public or service user safety

- Within 5 working days a joint cause for concern review meeting with Principal Lead, Programme Lead, Practice Learning Partner (PLPs) nominated person (if appropriate), university tutor and/or academic assessor to take place and discuss the concerns raised with the student/trainee in a professionally appropriate manner. The student/trainee shall have the right to be accompanied at the meeting by a fellow student or representative from the Students' Union or Trade Union, where relevant.
- Where staff, student, public and/or patient safety has been actually or potentially compromised, escalation to appropriate internal and external agencies may be appropriate. The student will be informed, and a plan of action and support agreed.
- The student will be suspended immediately and placed on 'study leave' until a full investigation has been conducted, a conclusion reached, and a plan of action agreed.
- The meeting must be recorded and any feedback, continuing concerns, targets and actions regarding the student/trainee must be shared appropriately with student, Programme Lead, PLPs nominated person, university tutor and/or academic assessor. A detailed action plan must be included and action points with responsible person listed. Details of any external agencies involved, with contact details must also be recorded.
- Student/Trainee to be informed of their rights regarding complaint/appeal options.
- Students will be informed about the expected timeline for any ongoing investigation and likely referral to Fitness to Practise Advisory Panel

- Principal lead to inform Head of Faculty and/or academic quality and refer the case to the Academic Registry under the formal university Fitness to Practise process; the Academic Registry would then communicate with the student through the panel secretary.

STEP 3 – REFERRAL TO ‘FITNESS TO PRACTISE PANEL’

Fitness to Practise

Student/Trainee behaviours and attitude in the matters identified in the Nursing and Midwifery (NMC) ‘Code’ Professional standards of practice and behaviour for nurses, midwives and nursing associates

<https://www.nmc.org.uk/globalassets/sitedocuments/nmc-publications/nmc-code.pdf>

The Code presents the professional standards that nurses, midwives and nursing associates must uphold in order to be registered to practise in the UK. It is structured around four themes –

- prioritise people,
- practise effectively,
- preserve safety and
- promote professionalism and trust.

Developed in collaboration with many who care about good nursing and midwifery, the Code can be used by nurses, midwives and nursing associates as a way of reinforcing their professionalism.

The Code should be useful for everyone who cares about good nursing and midwifery.

- Patients and service users, and those who care for them, can use it to provide feedback to nurses, midwives and nursing associates about the care they receive.
- Those on our register can use it to promote safe and effective practise in their place of work.

- Employer organisations should support their staff in upholding the standards in their professional Code as part of providing the quality and safety expected by service users and regulators.
- Educators can use the Code to help students understand what it means to be a registered professional and how keeping to the Code helps to achieve that.

The Code of Professional Conduct identified above may sometimes raise questions regarding the student/trainee's Fitness to Practise.

The intention of the programme team and wider university is to support and ensure the development of the student/trainee, the supportive process is identified above in the 'Cause for Concern' procedure Stage 1 and 2. In exceptional cases, the professional fitness of the student/trainee needs to be formally considered, prior to any action being taken.

If there are concerns regarding the student/trainee's professional 'Fitness to Practise', then the Principal lead or Programme Director will refer to 'Fitness to Practise'. The student will be informed in writing that they have been referred and the Fitness to Practise Advisory Panel will be convened.

For further information please contact: nrsstaff@aber.ac.uk

This guidance will help nursing students, staff, service users and stakeholders understand the basis of our thoughts, decisions and actions. It needs to be read in conjunction with all other student information and Aberystwyth University policies.

Aberystwyth University and its Practice Learning Partners remain committed to ensuring both student and service user safety.

This guidance has been developed from the NMC website <https://www.nmc.org.uk/ftp-library/understanding-fitness-to-practise/using-fitness-to-practise/> (Last Updated 26/11/2018)

Approved Academic Board June 2021

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