**NEWCASTLE UNIVERSITY**  
**FACULTY OF MEDICAL SCIENCES**  
**FITNESS TO PRACTISE PROCEDURE**

The University is under a duty in the public interest to ensure that students following degrees leading to professional health care qualification meet relevant professional standards for fitness to practise. The University is also under a duty to ensure that no member of the public is harmed as a consequence of participating in the training of health care professionals. In discharging these duties, the welfare and safety of actual or potential patients is the University's chief concern.

In addition, the University has a duty of care to its students, and must ensure that any decisions are made with the best interests of the student at heart, as part of its support and welfare strategy. This includes being sure, as far as possible, that a student is fit to undertake the rigours of a demanding programme of study and a demanding profession.

### 1. Guiding Principles

1.1. This procedure has drawn on the guidance provided by appropriate health care professional bodies. The key documents informing this process are listed in Appendix 1 and shall be taken into account when considering a student’s fitness to practise.

1.2. The professional reference documents in Appendix 1 set out some examples of areas of concern that may call into question a student's fitness to practise; however they do not provide an exhaustive list. Further examples are listed in 2.3 below.

### 2. Interface with Academic Progress and Disciplinary Procedures

2.1. Students on professional programmes are subject to the usual University procedures regarding academic progress and discipline, in addition to fitness to practise procedures.

2.2. Concerns about a student’s fitness to practise arise in a variety of ways and each case is considered on an individual basis. In all cases, concerns will be brought to the attention of the relevant Director of Studies, Degree Programme Director or Professional Standards Review Committee for a decision on the most appropriate way to proceed.

2.3. A student’s fitness to practise may be considered despite the fact that other University processes have been invoked. Examples of such University processes may include:

- failure to make satisfactory progress in academic studies or in assessed clinical work (dealt with under the appropriate Progress Regulations);
- failure to maintain required standards expected under programme Professionalism Monitoring processes;
- misconduct as normally defined in the University (dealt with under the University’s Student Disciplinary Procedure);
- assessment irregularity as normally defined in the University (dealt with under the University’s Assessment Irregularity Procedure);
- Where a student has taken a Leave of Absence in circumstances that initially or subsequently raise fitness to practise issues, the procedure outlined below will not normally apply. Instead, a report from the student’s healthcare practitioner will be required in order to assist in determining whether the student is ready to resume his/her studies.
• where conduct creates serious concerns about the student’s welfare such that normal adjustments are not sufficient (dealt with under the University’s Fitness to Study procedure)

3. Fitness to Practise Procedure

3.1. A student may be referred to the University’s fitness to practise procedure by the University Disciplinary Committee or directly by following the appropriate procedure below. The Foundation Dean Director or nominee may refer a first year Medical Foundation Programme doctor (F1 doctor).

3.2. A referral or an allegation of concern about health or conduct raising a question of fitness to practise must be made in writing, signed by the maker and submitted to the appropriate Director of Studies/Degree Programme Director or nominee. Where appropriate, the Director of Studies/Degree Programme Director or nominee may issue the student with a Level 1 Fitness to Practise warning. This warning would be held on the student record until the end of their studies. Should no further issues arise, this Level 1 warning would not be declared to employing Trusts or Regulators as part of a Transfer of Information process. Should further issues arise leading to formal consideration of Fitness to Practise, the Level 1 warning would form part of the student record for consideration at investigation and potential subsequent panel.

3.3. Where a Level 1 warning is deemed insufficient (by the Degree Programme Director) to address the concerns raised, a request for a formal referral to the Fitness to Practise procedure should be made. The request must be made in writing, signed by the maker and submitted to the Pro-Vice Chancellor for consideration.

3.4. In exceptional circumstances, and consistent with the principles of natural justice, the Pro-Vice-Chancellor has the right to withhold the identity of the individual making the allegation if maintenance of confidentiality is considered appropriate.

3.5. The Pro-Vice-Chancellor shall designate a pool of investigators from amongst senior academic/clinical staff members and shall appoint one member of that pool to investigate.

3.6. The investigating member of staff shall interview the student concerned and the person making the allegation. In any such interview with a student, the student may choose to be accompanied by a friend or supporter. Notes of the interview shall be taken by an administrator from the Faculty. The administrator may also accompany the investigator when interviewing any witness.

3.7. The investigator may consult the relevant Director of Studies or Degree Programme Director and other senior staff as appropriate. If the allegation has been made by the Director of Studies, the investigator shall consult another appropriate member of senior staff.

3.8. The investigator shall have access to the student’s file in order to view evidence of previous behaviour.

3.9. When there are concerns about a student’s suitability for professional practice on grounds of either health or conduct or both, the investigator may require the student to consult an appropriate healthcare practitioner who shall be asked to submit independent advice on the student’s state of health. This healthcare practitioner shall be independent of any professional responsible for treatment of the student. The referral to an appropriate health practitioner shall be made in accordance with prevailing arrangements for Occupational Health. Should a student refuse to engage with such a process, section 4.3 may apply.

3.10. If the investigator advises the Pro-Vice-Chancellor that there is no case to answer, the Pro-Vice-Chancellor shall confirm in writing to the student that no further action in terms of the Fitness to Practise procedure shall be taken.
3.11. If the investigator advises the Pro-Vice-Chancellor that the allegation does not constitute a fitness to practise issue but does constitute misconduct under the University’s Disciplinary Procedure, the Pro-Vice-Chancellor shall inform the student that the matter has been referred to the Academic Registrar or appointed officer.

3.12. If the investigator advises the Pro-Vice-Chancellor that there is an issue of fitness to practise which the student has acknowledged and agreed to address, the Pro-Vice-Chancellor may, in consultation with the relevant Director of Studies or Degree Programme Director and Academic Registrar or appointed officer, permit the student to continue studies with or without sanctions. These sanctions may be communicated to appropriate University (including Student Wellbeing), Deanery or Trust staff should it be found that the sharing of such information is necessary for the purposes of either the fitness to practise process or in order to allow a student to receive appropriate support.

3.13. Sanctions shall include as appropriate: A Level 2 warning; undertakings; conditions; suspension from the programme and expulsion from the programme. A Level 2 warning would be declarable to a Regulatory Body on registration.

3.14. If the investigator advises the Pro-Vice-Chancellor that there is an issue of fitness to practise which the student does not recognise or is unwilling or unable to address, the Pro-Vice-Chancellor shall convene a Fitness to Practise Panel. The decision to convene a Fitness to Practise Panel shall be taken in consultation with the Academic Registrar or nominee and, where appropriate, Health Trust staff.

3.15. No student shall be allowed to graduate while a fitness to practise case is pending.

4. Suspension of Studies

4.1. The Pro-Vice-Chancellor of the Faculty may suspend the student from the programme pending the outcome of the investigation, providing there are reasonable grounds for believing that there may be serious or undesirable consequences if the student is permitted to remain on the programme. The Pro-Vice-Chancellor may only exercise this authority after consulting the Academic Registrar or nominee and, where appropriate, Health Trust staff.

4.2. The period of suspension from the programme must be specified and shall not normally exceed twenty-eight days. In the event that the period of suspension is extended beyond twenty-eight days, the Pro-Vice-Chancellor shall review the suspension every twenty-eight days. The period of suspension may be extended until the Panel hearing, if the investigation determines that there may be serious or undesirable consequences if the student is permitted to return to the programme. The Pro-Vice Chancellor has the authority to revoke any suspension at any time should new evidence be deemed to suggest this course of action.

4.3. Any student who is deemed by the Pro-Vice-Chancellor not to be engaging with the procedure may risk having his/her studies suspended in order to ensure his/her own health and safety and that of his/her patients.

5. Purpose of Fitness to Practise Panel

5.1. The Panel shall consider any student on a professional programme whose health, behaviour, or professional conduct give rise to serious concern that he or she is not or will not be fit to practise. Guidance on health or behavioural problems which may make students unsuitable for professional practice is given in the professional documents listed in Appendix 1.

5.2. The Panel shall consider a graduate of the undergraduate medical degree programme in his or her F1 year whose health or behaviour pattern or professional
conduct gives rise to serious concern that he or she will not be fit to practise. The University is responsible under the 1983 Medical Act for certifying to the GMC that each F1 doctor is fit to be fully registered. Further provision is made in Appendix 2.

6. Membership of Fitness to Practise Panel

6.1. The Pro-Vice-Chancellor of the Faculty shall designate staff and external members from whom membership of the Fitness to Practise Panel shall be drawn. These shall include senior members of University staff in and beyond the Faculty, NHS staff who are honorary members of the University, appropriately experienced individuals external to the University, individuals who have specialist expertise in matters relating to student health and the designated officer of the Postgraduate Northern Deanery or nominee.

6.2. The Pro-Vice Chancellor, in consultation with the Academic Registrar or appointed officer, shall determine the membership of each Panel. The Panel shall normally have five members.

6.3. Each Fitness to Practise Panel shall be constituted as follows:

Dean of Clinical Medicine or Faculty Lead for Governance or nominee (Chair)

Up to four other members to include*:

- two senior members of the Faculty. At least one of these should normally come from the same profession as the case being considered.
- at least one person external to the Faculty
- at least one individual external to the University of Newcastle, for example, a member of NHS staff, a member of another University, or a healthcare practitioner

*One individual may fulfil more than one of the listed criteria for the constitution of the Committee.

The Academic Registrar or appointed officer shall appoint a Secretary to the Panel.

6.4. Every Panel convened to consider a F1 doctor shall include the designated officer of Health Education North East or his or her nominee.

6.5. The person who has conducted the initial investigation shall not serve as a member of the Panel.

6.6. Wherever possible, the Panel shall not include any member of staff directly involved in teaching the student within one year of the referral to the Panel.

6.7. The Panel shall not include anyone directly connected with the case under consideration.

7. Powers of the Fitness to Practise Panel

7.1. The Panel has the power to decide:

a) That the student is fit to practise and is permitted to continue with the programme;

b) That the student’s fitness to practise is currently impaired and is

i) permitted to continue with the programme under supervision as defined/required by the Panel;

ii) permitted to continue with the programme with a variation in the pattern of study;

iii) permitted to continue with the programme but that a formal reprimand or Level 3 warning be placed on his or her file (a Level 3 warning would be declarable to a Regulatory Body on registration);
iv) to be subject to any other action or sanction considered appropriate by
the Panel to enable the student's successful completion of the
remainder of the programme.

c) That the student is not fit to practise and
i) is required to suspend his or her studies for a specified period of time,
following which the Panel shall review the situation and decide
whether to re-admit the student to the programme. The Panel may
take into account any external reports or evidence available in making
this decision;
ii) is required to suspend his or her studies until such time as any
undertakings, recommendations or conditions imposed by the Panel
have been fully met;
iii) the student's studies on his or her current programme of study be
terminated, but that the student be permitted to seek admission,
possibly with advanced standing, to an alternative programme within
the University.
iv) the student’s studies be terminated and the
student be required to
withdraw from the University. Subject to the recommendation of a
Board of Examiners, the student may be eligible to receive any exit
award to which he or she is entitled.

7.2. Where a student is allowed to continue with the programme, or when the studies
have been temporarily suspended, he or she may be required to meet with the Chair
or Chair’s nominee (drawn from the original panel) on further occasions in order that
progress can be monitored.

7.3. The Panel has the discretion to report the outcome of any case to the Foundation
Dean Director of the appropriate Foundation School in order that the student can be
provided with appropriate support during his/her on-going training.

7.4. In the case of a F1 doctor, the Panel may:
   a) decide that the evidence presented is insufficient and therefore that the case
      be referred back to the Foundation Dean Director for further investigation;
   b) confirm the recommendation that the pre-registration period be extended or
certification be refused.

8. General Provisions for Hearings of the Fitness to Practise Panel

8.1. Further details of the procedure for considering F1 doctors are given in Appendix 2.

8.2. The Secretary to the Panel shall be responsible for arranging the hearing. This will
include:
   i) notifying the student that a case has been referred to the Panel, of the
      substance of the case, of the procedure to be followed, of the membership
      of the Panel; and of the date of the hearing;
   ii) identifying members of the Panel, in consultation with the Pro-Vice-
      Chancellor, or his or her nominee;
   iii) convening the hearing;
   iv) providing documentation to all parties at least 10 working days before the
      hearing;
   v) making a written account of the proceedings.

8.3. The Panel shall take evidence and receive submissions, either in writing or in person
and consider the allegation and all other circumstances which appear to them to be
relevant. The Panel may take evidence from such other persons as they think fit in
order to reach a decision. The student shall, in all cases, have the right to attend and
present their case, and to be present and be heard during the hearing phase of the
panel. The student may be accompanied by a friend or supporter and shall have the
right to be informed of all of the evidence. In all other respects, the conduct of the
Panel shall be a matter for the Chair to determine. The student and any other persons present, shall withdraw whilst the decision is reached. The Panel will first consider all the evidence when making its determination. It will consider if the evidence supports a finding of impaired fitness to practise. If impairment is found, mitigating factors will then be considered in determining what sanction is proportionate. When considering sanctions, the panel will first consider the least restrictive moving up to the most severe in a stepwise fashion if required. The panel will bear in mind its function is not to punish students, but to protect patients and any restrictions must be proportionate, workable, measurable and fair. Reasons for all decisions made must be clear and explicit in the panel’s determination. The Secretary to the Panel shall be in attendance during and may advise the panel on points of process and/or regulation.

8.4. The Secretary shall inform the student of the outcome of the Panel consideration within 24 hours of the hearing, and subsequently in writing.

8.5. The outcome of the Panel hearing shall be communicated in writing to the originator of the referral and a copy placed on the student file.

8.6.1 The facts found by a Panel as well as any subsequent sanctions resulting from this may be communicated to appropriate University (including Student Wellbeing), Deanery or Trust staff should it be found that the sharing of such information is necessary for the purposes of either the fitness to practise process or in order to allow a student to receive appropriate support.

8.6.2 For the purposes of registration with a regulatory body, details of specific Fitness to Practise cases may be required by the regulatory body. In such cases the facts found by the Panel and the outcome will be disclosed to the regulatory body.

8.7 Fitness to Practise hearing papers relating to a Fitness to Practise allegation shall be retained securely and separately from the student's file for the duration of the student’s registration in the Medical School and their Foundation Programme. Access shall only be permitted, other than to the data subject under the terms of the Data Protection Act, should another Fitness to Practise issue arise in relation to the same student and then only for the purpose of informing the investigator and any Panel as to any relevant prior history. Fitness to Practise case material shall subsequently be destroyed in accordance with the University policy on document retention.

9. Appeals

9.1. A student wishing to appeal against the decision of the Fitness to Practise Panel may submit an appeal to Student Progress Service if any of the following grounds apply:

   a) there is new evidence available which could not reasonably have been brought to the attention of the Fitness to Practise Panel; or
   b) there has been a procedural irregularity; or
   c) the decision of the Fitness to Practise Panel was one which no reasonable body could have reached.

9.2. Students may discuss the appeals procedure with the Student Progress Service, King’s Gate. Students are also strongly advised to seek impartial advice on appealing from their Tutor, or the Medical Student Office in the Faculty. General advice on submissions may also be sought from the appropriate Officers of the Students' Union or from the Student Advice Centre (Students' Union).

9.3. Notification of intent to appeal should be lodged with the Head of Student Progress Service or appointed officer within 7 calendar days of the Fitness to Practise Panel hearing.
9.4. All documentation as part of an appeal submission must be submitted to the Head of Student Progress Service or appointed officer within 14 calendar days of the Fitness to Practise Panel hearing.

9.5. All appeals must be made in writing and accompanied by a completed “Appeals Application Form”, available from the Assistant Registrar (Assessment), Medical School.

9.6. Students shall provide a detailed written statement identifying the precise grounds relied on for the appeal. Where new evidence is presented, the appeal must state why this evidence was not brought to the attention of the Fitness to Practise Panel. The case presented to the Fitness to Practise Panel should also be rehearsed in the documentation submitted.

9.7. Any late appeal shall only be accepted with the exceptional agreement of the Head of Student Progress Service, and where s/he is satisfied that circumstances exist which make it reasonable for the student not to have applied within the period specified above.

9.8. Once an appeal has been accepted, a Faculty of Medical Sciences Appeals Committee shall be appointed. The Head of Student Progress Service shall appoint two members of the Academic Appeals Panel (with one to act as Chair) to form a Committee with two members of the Faculty of Medical Sciences Appeals Panel.

9.9. The appointed Appeals Committee shall normally consider applications within 28 calendar days of receipt of a Fitness to Practise appeal.

In advance of the Appeals Committee hearing

9.10. Upon acceptance of an appeal, the Secretary shall invite the Director of Studies, or other appropriate curriculum officer, to provide a report for consideration by the Appeals Committee. The Director of Studies or other appropriate curriculum officer, shall be copied the student’s appeal statement and also invited to respond to any claims made therein. As part of his/her report, the Director of Studies, or other appropriate curriculum officer, may also rehearse the case presented to the Fitness to Practise Panel.

9.11. The Secretary shall provide the student as soon as reasonably practicable, and not later than 24 hours in advance of the hearing, with all the case papers made available to the Appeals Committee (in accordance with the requirements of the Data Protection Act 1998), together with a covering note confirming the arrangements for the hearing.

9.12. Case papers for each student shall include:
   i) The student’s written appeal submission and any supporting documents.
   ii) A copy of all documentation considered by the Fitness to Practise Panel.
   iii) Minutes of the Fitness to Practise Panel hearing.
   iv) A statement from the Director of Studies, or other appropriate curriculum officer (if submitted).

Conduct and Nature of the hearing

9.13. The Committee shall take evidence and receive submissions, either in writing or in person and consider the allegation and all other circumstances which appear to them to be relevant. The Committee may take evidence from such other persons as they think fit in order to reach a decision. The student shall, in all cases, have the right to attend and present their case, and to be present and be heard during the hearing. The student may be accompanied by a friend or supporter and shall have the right to be informed of all of the evidence. In all other respects, the conduct of the
Committee shall be a matter for the Chair to determine. The Committee must refer to the code of professional practice for the relevant profession in reaching its decision. The student and any other persons present, except, where appropriate, the Secretary to the Committee, shall withdraw whilst the decision is reached. A written but not verbatim record of the hearing shall be made by the Secretary.

9.14. Failure to attend, without good cause (as determined by the Chair of the Committee), shall result in the consideration of the appeal in the student’s absence.

Outcome of the hearing
9.15. The Chair shall verbally inform the student of the outcome of the appeal hearing following deliberations unless for some good reason the hearing is adjourned; the student shall be informed by the Chair if this is necessary. Following the hearing, written confirmation of the outcome shall be sent to the student. Full reasons for the Committee’s decision will follow.

9.16. The Appeal Committee may uphold the decision of the Fitness to Practise Panel or uphold the appeal and refer the case back to the relevant Pro-Vice-Chancellor in order for a way forward for the student to be identified.

Review of the decision of the Appeals Committee
9.17. There is no further review within the University. Provision for independent external review is made through the existence of the Office of the Independent Adjudicator. The Independent Adjudicator’s role is to review the application by the University of its own internal procedures. Further information about the Adjudicator’s role is available from http://www.oiahe.org.uk/.

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Guidance for Fitness to Practise Panel

Health or conduct problems which make students unsuitable for professional practice

These notes are intended for guidance only. It is not possible to draw up a definitive statement of instances of ill health or conduct that make a student unsuitable for professional practice, and in each case the Panel shall have regard to the degree of ill health or unsuitable behaviour. It should be noted that inappropriate behaviour can raise concerns about a student’s health and, therefore, these two issues cannot be considered to be mutually exclusive.

The procedures concerning suitability of students for professional practice apply to all undergraduate and postgraduate students on programmes of study which have involvement with patients or members of the public, eg MBBS, BDS, Clinical Psychology. In all cases, the welfare and safety of actual or potential patients must be the Panel’s chief concern.

Health

When students are referred to the fitness to practise procedure on health grounds a referral to the Occupational Health Service used by the Faculty should be made and specific questions asked in relation to potential impact of health on fitness to practise.

The investigator may require the Occupational Health Service to ask the student to see a health care practitioner (for example, a psychiatrist or a counsellor), who would be asked to submit an independent report to Occupational Health. A summary of this report would then subsequently be made available to the Panel.

The Occupational Health Service should be asked to advise on the nature of the student’s illness, the prognosis, response to treatment and willingness to undergo treatment, how the illness affects the student’s ability to communicate with patients, and whether there is a possibility of the student being at risk themselves, being a risk to patient safety or a risk to public perception of the profession.

The Occupational Health Service should be asked whether the conditions may be considered as covered by the Disability provision of the Equality Act 2010 and whether there are any adjustments possible to mitigate the risks. The Occupational Health Service should also be asked whether the conditions are likely to impact on the student’s ability to practise professionally.

The Panel should take account of the requirements pertaining to that particular profession, the student’s response to treatment, and their willingness to co-operate with a required or recommended course of action.

While patient care is paramount, there is a need for a non-judgmental approach in instances of student ill health which places substantial weight on the therapeutic needs of the student. It is necessary also to distinguish between temporary conditions, which may be resolved, and those which may last twelve months or more and amount to disabilities under the Equality Act 2010.

Problems with Conduct

Students on these programmes should be familiar with and act with due regard to the Code of Professional Conduct for their profession, and are expected to behave in a professional, ethical, and moral manner at all times.
The nature of their programme of study means that these students have contact with patients, sometimes referred to as clients, in a hospital or community setting, and will have responsibility for patients once qualified. Any behaviour therefore which places a patient at risk or gives rise to concern about the student’s future commitment to the protection and safety of patients, should be considered by the Panel.

The Panel should take account of the degree of unsuitable behaviour. Depending upon the degree of the unsuitable behaviour, the Panel might take account of whether the student has previously received a warning about his or her conduct, and, where appropriate, whether the student has been offered or has received treatment.

As stated in 1.1 this procedure has drawn on the guidance provided by appropriate health care professional bodies. They key documents informing this process are listed below and shall be taken into account when considering a student’s fitness to practise:

General Medical Council: Medical students: professional values and fitness to practise
http://www.gmc-uk.org/education/undergraduate/undergraduate_policy/professional_behaviour.asp

General Medical Council: Good Medical Practice
http://www.gmc-uk.org/guidance/good_medical_practice.asp

General Medical Council: Tomorrow’s Doctors

General Dental Council: Student Fitness to Practise
http://www.gdc-uk.org/Newsandpublications/Publications/Publications/StudentFtPApril10web_260310[1].pdf

General Dental Council: First Five Years
http://www.gdc-uk.org/Dentalprofessionals/Education/Pages/default.aspx

General Dental Council: Standards for Dental Professionals
http://www.gdc-uk.org/Dentalprofessionals/Standards/Pages/standards.aspx

The British Psychological Society: Professional Practice Guidelines – Division of Clinical Psychology
http://www.bps.org.uk/what-we-do/ethics-standards/ethics-standards

Academy for Healthcare Sciences
http://www.academyforhealthcarescience.co.uk/
Suitability of Students for Professional Practice (Health and Behavioural Issues)

**Foundation Programme F1 Year for Medical Graduates**

1. The University is legally responsible for the quality of the pre-registration year and for the calibre of first year Medical Foundation Programme doctors (F1 doctors) progressing to full registration on its completion. (The New Doctor, GMC, 1997). This responsibility is delegated by the Pro-Vice-Chancellor of the Faculty of Medical Sciences to a designated officer in Health Education North East.

2. The NHS Trusts where the F1 doctors are employed are required to notify the Postgraduate Dean of any health or conduct problems involving a F1 doctor. The procedure for managing a F1 doctor with problems will be that set out in the document published by Health Education North East – “Doctors with Differing Needs”.

3. If a F1 doctor continues to have difficulty, either through health problems which cannot be resolved, or under performance/conduct issues which give rise to serious concern that he or she will not be fit to practise, the Postgraduate Dean (Health Education North East), shall notify the Pro-Vice-Chancellor and request for the case to be considered by the Fitness to Practise Panel. The Postgraduate Dean (Health Education North East) shall act as the Director of Studies and prepare the case, including all documentation and evidence as to remedial action already undertaken.

4. In these instances, the Panel shall include a designated officer in Health Education North East, or his or her nominee, drawn from the pool of previously identified staff.

5. The procedures outlined in the document Fitness to Practise Procedures shall apply.

6. The Panel may:
   a) decide that the evidence presented is insufficient and therefore that the case be referred back to the Postgraduate Dean for further investigation.
   b) confirm the recommendation that the pre-registration period be extended or certification be refused.

7. Where there is an alleged disciplinary offence by a F1 doctor this shall be investigated by the usual procedures of the NHS Trust. However, the report of the investigation shall be forwarded to the Postgraduate Dean (Health Education North East), who shall notify the Pro-Vice-Chancellor of the Faculty. The Pro-Vice-Chancellor of the Faculty, in consultation with the designated officer in Health Education North East and with reference to the Professional Standards Review Committee, shall determine whether the offence is sufficiently serious to warrant the convening of the Panel to consider whether a recommendation should be made to the GMC that the F1 doctor should not proceed to full registration.
Remit of the Fitness to Practise Procedure

The Procedure applies to students following degrees leading to professional health care qualifications including those listed below. This list is not exhaustive and it should be noted that in addition to being subject to this procedure, students’ fitness to practise may also be considered through the appropriate regulatory body procedure.

1. Students registered on the 5 year MBBS programme at Newcastle University (including any intercalated years of study on other programmes)

2. Students registered on the NUMed Malaysia 5 year programme, whether studying in Newcastle or Malaysia (including any intercalated years of study on other programmes)

3. Students registered on the 4 year MBBS programme at Newcastle University (Graduate and Professional Entry ‘Accelerated’ Programme)

4. Students registered on Phase I of the MBBS programme at Durham University (Queen's Campus)

5. Doctors who have graduated from the MBBS programme at Newcastle University who are in Year 1 of their Foundation Programme based within any of the Deaneries in England, Scotland, Ireland or Wales

6. Doctors who have graduated with the Newcastle University degrees MBBS from NUMed Malaysia who are in Year 1 of their House Officer posts outwith any of the Deaneries in England, Scotland, Ireland or Wales

7. Students registered on the 5 year BDS programme at Newcastle University (including any intercalated years of study on other programmes)

8. Students registered on the 2 year Diploma in Dental Hygiene and Therapy programme at Newcastle University

9. International students registered on the 3 year MSc/Integrated PhD in Orthodontics programme (Fitness to practise of home students would fall under the remit of the GDC)

10. International students registered on the 2 year MSc in Restorative Dentistry programme (Fitness to practise of home students would fall under the remit of the GDC)

11. Students registered on the 3 year Doctorate in Clinical Psychology programme
12. Students registered on the Masters in Clinical Sciences programmes

13. Students registered on the Postgraduate Certificate in Low Intensity Psychological Therapies

14. Students registered on the Postgraduate Diploma in High Intensity Psychological Therapies

15. Students registered on the Postgraduate Diploma in Cognitive Behavioural Therapy