

JMP - Student Support for Professional Practice Procedure

Section 1 - Application of Procedure

(1) This procedure applies to all students enrolled in MEDI Course/Units offered by the School of Medicine and Public Health (University of Newcastle (UON)) and the School of Rural Medicine (University of New England (UNE)) in the delivery of the Joint Medical Program (JMP).

(2) This procedure is to be read in conjunction with the following:

a. at UON:

- i. JMP Student Support for Professional Practice Guideline;
- ii. JMP Schedule;
- iii. JMP Student Placement Policy;
- iv. JMP Review of Progress Rules;
- v. JMP School Assessment Responsibilities Guidelines;
- vi. JMP Student Academic Misconduct Rule;
- vii. [Academic Integrity and Ethical Academic Conduct Policy](#);
- viii. [Student Conduct Rule](#);
- ix. [Students with a Disability Policy](#);

b. at UNE:

- i. JMP Student Support for Professional Practice Guideline;
- ii. JMP Schedule;
- iii. JMP Student Placement Policy;
- iv. JMP Review of Progress rules;
- v. JMP School Assessment Responsibilities Guidelines;
- vi. JMP Student Academic Misconduct Rule;
- vii. Student Coursework Academic Misconduct Rule;
- viii. Student Behavioural Misconduct Rules.

Section 2 - Definitions

(3) In the context of this document:

- a. JMP means the Bachelor of Medicine – Joint Medical Program and the Bachelor of Medical Science and Doctor of Medicine – Joint Medical Program offered by the University of Newcastle and the University of New England in partnership;
- b. Case Manager means the academic member of staff nominated to lead a Case Management Team of the SSPP;
- c. Clinical Dean means the clinician academic officer in charge of the clinical sites for the delivery of the JMP, i.e.,

Central Coast Clinical School, Hunter Clinical School, Manning Clinical School, Maitland Clinical School, Peel Clinical School, Tablelands Clinical School;

- d. Clinical School site means any of the sites used for clinical teaching and learning in delivery of the JMP including GP practices, public and private hospitals and/or community health and mental health facilities;
- e. Course/Unit Coordinator means the (academic) officer/s responsible for the delivery of a Course/Unit and for ensuring its appropriate content and assessment as approved by the JMP Teaching and Learning Committee. The Coordinators assigned to a Course/Unit at UON and UNE will consult with the Program Convenor and the Heads of School as appropriate. Final responsibility for delivery of the Course/Unit rests with the Dean of Medicine - Joint Medical Program (JMP);
- f. Dean means the Dean of Medicine - Joint Medical Program (JMP);
- g. ERG means the Executive Review Group of the SSPP Committee;
- h. Faculty means the Faculty of Health and Medicine at the University of Newcastle;
- i. Head of School means the Head of the School of Medicine and Public Health (UON) and/or the Head of the School of Rural Medicine (UNE), or their respective nominee;
- j. Mandatory notification means notification to the Medical Board of Australia as required in the Board's guidelines;
- k. Medical Board's Impaired Practitioner Program means the program detailed in information of the [Medical Board's website](#);
- l. National professional code means the suite of codes, guidelines and policies of the Medical Board of Australia as detailed on their website, ([Medical Board of Australia - Codes Guidelines and Policies](#))
- m. PBL Tutor means a tutor delivering tutorial sessions for the Problem Based Learning components of the JMP;
- n. School/s means the School of Medicine and Public Health at the University of Newcastle, and the School of Rural Medicine at the University of New England;
- o. SSPP Committee means the JMP Student Support for Professional Practice Committee;
- p. University means the University of Newcastle and/or The University of New England;
- q. Universities means the University of Newcastle and the University of New England;
- r. Year Assessment Decision Committees means the five committees (one for each year of the JMP) responsible for recommending final grades to the Heads of School and for reviewing the assessment of courses/units in accordance with the Universities' quality assurance principles;
- s. Year Chair means the academic staff member responsible for the overview of each of the Years 1-5 in the JMP;

Section 3 - JMP SSPP Principles and Procedure

(4) The SSPP Procedure aims to ensure that the Universities:

- a. identify and provide early support to students who may be experiencing major personal difficulties in their progress through the JMP. Relevant matters are distinct from academic progression issues or behavioural misconduct which are dealt with by the relevant school and policy;
- b. identify students who are not progressing as expected and required in their training to become ready for professional practice as medical practitioners, whether or not the student demonstrates behaviours which require mandatory notification;
- c. fulfill statutory obligations with respect to reporting students where they display notifiable behaviour.

Section 4 - Governance

(5) There are four governance elements to the Student Support for Professional Practice procedure:

- a. Dean of Medicine - Joint Medical Program (JMP);
- b. The SSPP Committee;
- c. The Executive Review Group;
- d. Case Management Team.

Dean of Medicine - JMP

(6) The Dean of Medicine - Joint Medical Program (JMP) has ultimate responsibility for all matters considered as part of the SSPP procedure.

(7) Any correspondence with external agencies is over the signature of the Dean of Medicine - Joint Medical Program (JMP).

(8) Any action taken by the Dean of Medicine - Joint Medical Program (JMP) will be in consultation with the Pro Vice-Chancellor of the relevant Faculty / University.

The SSPP Committee

(9) Joint Medical Program Student Support for Professional Practice Committee (SSPP Committee) is an advisory committee providing advice and information to the Dean of Medicine - Joint Medical Program (JMP) on matters of significant concern related to the Student Support for Professional Practice process.

(10) SSPP Committee has oversight of the Student Support for Professional Practice process, including the application of principles and the procedure, development of best practice responses and application of these in a consistent way across both schools.

(11) Membership includes experts internal and external to the JMP, and student and community representation.

(12) At no time are details of individual students in the process to be disclosed or discussed in the SSPP Committee in a way that identifies any student.

(13) Experts who are members of the SSPP Committee can be consulted on particular matters as required, maintaining confidentiality at all times.

The SSPP Executive Review Group

(14) The Executive Review Group comprises the Heads of the two Schools, or their delegate, and a representative or representatives of the Clinical Deans. The Office of the Dean provides secretariat functions to the Executive Review Group and the SSPP process.

(15) The Chair of the Executive Review Group is appointed by the Dean of Medicine - Joint Medical Program (JMP).

(16) Any matter considered by the Executive Review Group remains strictly confidential between the Executive Review Group and the Case Management Team managing that matter.

(17) Members of the Executive Review Group can refer a matter for investigation at any time to a trained member of academic staff (part of a Case Management Team) to investigate the concern and to determine if the matter requires to be referred to another specific university process.

(18) The Executive Review Group member who has referred a matter for investigation to the Case Management Team remains responsible for oversight of the processes of the Case Management Team, and must be familiar enough with the progress of the matter to report its status at Executive Review Group meetings as required.

(19) The Executive Review Group considers recommendations of the Case Management Team and provides

recommendations to the Dean of Medicine - Joint Medical Program (JMP) about conclusion of or further management of the matter.

(20) The Executive Review Group monitors and maintains a record of referred students, their progress through the process, and their ongoing welfare including the management and monitoring for any conditions which might be imposed upon that student's registration by the Medical Council of NSW, or the Australian Health Practitioner's Regulation Authority, until they conclude their studies in the JMP or leave the JMP through graduation or some other route.

Case Management Team

(21) The SSPP Case Management Team:

- a. comprises at least two investigators, with at least one being an academic staff member (drawn from a panel of academic case managers trained in the Student Support for Professional Practice process), and the other being an appropriately trained academic or professional staff member (who may be a member of the Office of the Dean);
- b. is convened on a needs basis according to the nature of the concern;
- c. is convened as soon as needed by the Dean of Medicine - Joint Medical Program (JMP), a Head of School, a Clinical Dean, or other member of the Executive Review Group;
- d. is able to interview stakeholders to the matter and seek other relevant information about the matter or triggering event, ensuring all aspects of confidentiality, and where necessary, consent, are met;
- e. evaluates concerns, and makes recommendations to the Executive Review Group (and in this way to the Dean of Medicine - Joint Medical Program (JMP)) regarding management or interventions required;
- f. concludes its role once the management plan has been enacted by others designated responsible for the ongoing support of the student (monitored by the Executive Review Group).

Section 5 - Scope of the Procedure

Areas Covered

(22) A student's well-being in relation to preparedness for professional practice will be considered in any or all of the following domains as determined by the Case Management Team (as each has the potential to impact on the quality of the service delivered to patients).

Area 1: Health or Personal Issues

(23) Issues that may affect the student's future ability to practice medicine and are likely to affect a student's studies, progression and/or career pathways; expose the student, patients or staff members to potential risk; and/or expose the JMP and thereby the Universities to potential risk.

Area 2: Professional Attitudes

(24) Whether a student's actions indicate the required level of respect and sensitivity towards patients and colleagues, in keeping with professional standards.

Area 3: Issues External to the Program

(25) Issues regarding the actions of the student occurring outside the program, such as any offence which is potentially punishable by three or more months in gaol (e.g., drug/alcohol related convictions, pornography convictions).

Unprofessional Conduct and Professional Misconduct

(26) As identified in the national professional code, matters which fall under Unprofessional and Professional Misconduct and may require referral by the Case Management Team include these areas:

- a. Unprofessional Conduct – includes:
 - i. breach of the National Law;
 - ii. breach of a registration condition or undertaking;
 - iii. conviction for an offence that may affect suitability to continue practice;
 - iv. influencing, or attempting to influence, the conduct of another registered health practitioner that may compromise patient care;
 - v. accepting a benefit as inducement, consideration or reward, for referrals or recommendations to use a health service provider;
 - vi. offering or giving a person a benefit, consideration or reward, in return for providing referrals or recommendations to use a health service provider;
 - vii. referring a person to, or recommending, another health service provider, health service or health product, if there is a financial interest, unless the interest is disclosed.
- b. Professional misconduct – includes:
 - i. conduct that is substantially below the standard reasonably expected of a registered health practitioner of an equivalent level of training or experience;
 - ii. more than one instance of unprofessional conduct;
 - iii. conduct that is not consistent with being a fit and proper person to hold registration in the profession.

Matters Outside the Scope of SSPP (in the first instance)

- a. Issues of plagiarism and academic probity.
- b. Issues that require referral to the university disciplinary process.
- c. Academic failure with no identified student welfare issues.
- d. Issues which can be dealt with via the other processes of the University.

(27) Note, where an issue is dealt with through a University investigation or disciplinary process, the outcome of that process may have implications concerning an individual's fitness to practice.

Section 6 - Advice to Students of SSPP Procedure

(28) Students will receive advice of the SSPP procedure that applies to their enrolment in the JMP:

- a. Prior to entry:
 - i. at time of application students will be informed that the SSPP guideline prevails in the JMP to assist students to deal with stresses and strains on physical and mental well-being which students can experience whilst studying medicine.
- b. On enrolment:
 - i. at the time of enrolment in the JMP, students will:
 - be informed of the existence of the JMP obligations in relation to 'Student Support for Professional Practice' procedures and the Medical Board's Impaired Practitioners Program;
 - be provided with a copy of the procedure document and asked to declare their acceptance to study within the framework at the commencement of their studies in the program. The role of the

Year Chair and Clinical Deans in assisting with issues and the importance in terms of registration with the Medical Board will also be explained.

- c. At the start of each year:
 - i. at the commencement of each year, students will be:
 - reminded of their duties and responsibilities; and
 - encouraged to self-identify for assistance as required.

Section 7 - Identification and Referral of Students of Concern

Identification

(29) Students of concern in need of support can be identified through a number of processes.

(30) The processes within each course/unit of the JMP which assess professional skills and behaviour of students at the conclusion of a clinical attachment may identify acute concerns about a student.

(31) Other indications for referral to the SSPP process can include (but are not limited to):

- a. persistent 'below expected level' of performance that has previously been addressed through the school;
- b. repeated notifications of concerns about well-being in relation to preparedness for professional practice on supervisor's report forms;
- c. significant concerns about an aspect of well-being in relation to preparedness for professional practice on a supervisor's report;
- d. persistent poor academic performance where an issue of compromised student wellbeing is identified as a contributory cause;
- e. concerns about student behaviour reported that have not been resolved by a Clinical Dean or Head of School;
- f. concerns about health that have not been resolved by a Clinical Dean or Head of School;
- g. as an outcome of University disciplinary process;
- h. recurrent (e.g., in consecutive semesters) applications for special consideration;
- i. at the request of the Dean of Medicine - Joint Medical Program (JMP) to provide advice on an issue of well-being in relation to preparedness for professional practice;
- j. self-identifying by individual students who may identify a need for structured assistance.

Referral

(32) Students in need of support can be entered into the case management / support process by members of the Executive Review Group (ERG) only.

(33) Participation in case management is designed to assist the student to achieve their individual potential. Participation in the case management process is voluntary on the part of the student. In the absence of participation the concern or complaint will be investigated and the student informed of the Case Management Team's recommendations.

(34) Matters can be brought to the attention of members of the Executive Review Group by anyone, but would usually be brought to the ERG's attention by:

- a. The Dean of Medicine- JMP

- b. Heads of School;
- c. Clinical Deans;
- d. Program Convenor;
- e. Year Chairs;
- f. Year Assessment Decision Committees;
- g. University disciplinary Committees
- h. Course/unit co-ordinators;
- i. Clinical or PBL tutors;
- j. Complaints received from members of the public or other health professionals.

(35) A student's peers can informally bring their concerns about the wellbeing or fitness to practice of a student to the attention of a Head of School or Clinical Dean or any other academic or other members of staff, who may then inform members of the ERG as necessary.

(36) A student can refer themselves if they feel their wellbeing is at risk and they are having difficulty getting the help they need.

Informing the Student

Required Information

(37) Students are to be informed and kept informed about:

- a. being referred to the SSPP process;
- b. what to expect from the SSP procedure;
- c. the progress of any investigation about them;
- d. who their contact person is during the investigation (this would usually be the Case Manager managing the matter);
- e. what the referral to the SSPP Procedure might mean for them, and
- f. how to seek emotional support during the process.

Timing for Providing Information

(38) The student is informed once a Case Management Team has been convened. This should occur as soon as practical once a concern is identified and determined to warrant management according to this SSPP Procedure.

Support Persons

(39) In any meetings involving the student, the student may select a support person to be present and observe the proceedings. This support person would not act as a 'representative' in terms of speaking for the student, as the student's own responses are required for adequate assessment of the matter.

Section 8 - Outcomes

(40) For a student referred to the SSPP Procedure, the possible outcomes are:

- a. no problem identified – that is, after investigation the Case Management Team believes there is no issue and no further action is required;
- b. problem or potential problem identified.

(41) Where a problem is identified, outcomes may include any or all of:

- a. observation and monitoring of conduct with set time frames for review specified and clear advice for the student about what will happen if concerns remain or further concerns are raised;
- b. remediation planned (with goals, timeline and mentor identified). This could include (for example) specific sessions on interpersonal communication with a tutor experienced in this area, or online modules dealing with aspects of professional behaviour;
- c. referral to other services – services could include (for example) university counselling services or careers advisors;
- d. referral to other University processes – this could involve (for example) disciplinary procedures;
- e. advice to the relevant School to ensure the case management plan is supported in its delivery. Such support would require ensuring that all relevant parties at Clinical School sites had capacity or support to assess and manage the case.

(42) Where the problem identified is significant and may place the public at substantial risk of harm, the outcome may be:

- a. notification by senior officers of the University to pre-registration authorities or other agencies as per statutory obligations; and/or
- b. a recommendation to the Dean of Medicine - Joint Medical Program (JMP) for suspension / exclusion from studies.

(43) To preserve confidentiality, the Executive Review Group of the SSPP Committee will make a recommendation directly to the Dean of Medicine - Joint Medical Program (JMP) concerning the outcome for the student.

(44) The student is kept informed and notified of outcomes as soon as possible and practical.

Further Action

(45) Where necessary a management plan is agreed between the student and the Dean's representative responsible for the student's ongoing support for professional practice (this may be the Year Chair); and milestones and outcomes of that plan are reported to the Executive Review Group (which then monitors the student's wellbeing until the student concludes their studies in the JMP).

Section 9 - Referral Monitoring

(46) Referral numbers, newly referred matters and status of each matter in progress will be reported monthly to the Executive Review Group.

(47) The progress of any referred student will be reported monthly at the Executive Review Group meeting until the Executive Review Group is satisfied that the student no longer has concerns, or until the student has left the JMP through graduate or some other route.

(48) The number of students in the process and their status and case outcomes are reported as de-identified data to the SSPP Committee twice per year.

Section 10 - Timeframe Guidelines

(49) Any student wellbeing matter should, where possible, be finalised by the Case Management Team and recommendations made back to the Executive Review Group within 30 days of having been referred to the Executive

Review Group or an ERG member. Particularly complex matters may take longer than 30 days to finalise and have recommendations formulated, but this should be noted to the ERG within the 30 day timeframe, with an estimated time of completion.

(50) The need to report back to the Executive Review Group does not mean that a management plan cannot commence earlier, in consultation with the person who is going to be responsible for the student's ongoing wellbeing.

Section 11 - Appeal

(51) A student will have access to avenues of appeal consistent with appeal policies and procedures specified by each University.

(52) Any decision or action taken by the ERG will be communicated directly to the student, referencing the policy under which that action is authorised.

(53) The appeal process for action taken will be according to the identified jurisdiction.

Section 12 - Essential Supporting Documents

(54) JMP Student Support for Professional Practice Guideline.

Status and Details

Status	Historic
Effective Date	23rd October 2019
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Responsible Executive	Belinda Tynan Senior Deputy Vice-Chancellor (Academic)
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