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Faculty of Health and Social Care

Processes for escalating concerns regarding students on practice placement

Introduction
With the support of their mentors and other clinical staff, most students successfully complete placement experiences. However, there are occasions where students are not making expected progress, or there are concerns regarding their wellbeing or conduct. These guidelines provide an overview of the steps to be taken in practice and the Faculty to escalate concerns, address issues and provide necessary support to students and practice.

Scope of the guidance
Though it is not possible to outline every circumstance in which concerns may need to be escalated, there are three broad categories encompassed by this guidance;

- Students who are at risk of not meeting practice learning outcomes (PLOs)
- Students whose behaviour could be construed as misconduct
- Circumstances where practice staff are concerned about a student’s general wellbeing and/or fitness to practice

Key staff
The staff most closely involved in the raising and management of concerns are:

- Mentors and other clinical staff within the placement area
- Practice Support Staff (i.e. Practice Learning Facilitators (PLFs) or Clinical Skills Tutors (CSTs)). In most cases, the practice support staff would be the main organisational point of contact for student issues.
- Link Lecturers (LLs)
- Academic Support Tutors (ASTs)
- Intake leads and field/programme leads (the latter only in the case of Child, Mental Health and Learning Disabilities students)
- Director of pre-registration nurse education (DPNE)

Processes for escalating concerns
The processes for escalating concerns are summarised in the accompanying flowchart. In general, concerns of mentors and other staff from placement areas should first be directed to practice support staff (PLF/CST). The first points of contact within the University are either LLs (who have specific knowledge of the placement area) or ASTs (who have student-specific knowledge). The AST and LL will work together with practice to ensure a joined-up Faculty response to any concerns. Specific processes will vary according to the nature of the concern:
**Students at risk of not meeting learning outcomes:** This may occur for many reasons, including lack of access to necessary learning opportunities (particularly in relation to hard-to-meet outcomes), unprofessional behaviour, or lack of clinical skills and knowledge. Concerns about performance may stem from a single event (e.g. involvement in a medication error). In some cases, practice support staff, working with mentors and students, will be able to develop an action plan to overcome these challenges and support successful completion of outcomes. In these cases, there is no need for formal reporting, though discussions should be recorded in the student’s practice documentation. ASTs and LLs should be made aware of the discussions and outcome (ideally via the PLF/CST).

Where the performance of students continues to fall short, a meeting between student, mentor, practice support staff and Faculty representative (AST and/or LL) will be required. Though meetings such as this can fall at any time in the placement, they would ideally link to the interim interview that takes place at the mid-stage of placement. This provides an opportunity to formatively assess the student’s progress, identify risks to successful completion of learning outcomes, and develop an action plan. Following this, there will be ongoing review of the student’s performance for the remainder of their placement.

**Students whose behaviour could be construed as misconduct:** On occasions, the behaviour of students may be such that it cannot be dealt with purely through the ‘professional standards’ outcomes in practice documentation. Where behaviour goes beyond poor professional practice and could be classed as professional misconduct, concerns need to be raised with the Faculty as soon as possible. Similarly, there may be instances where a student’s clinical performance is so poor (either over a period of time or in relation to a specific incident), that their suitability to be in practice is called into question.

Again, the first step is for the concerned member of placement staff to raise the issue with practice support staff. If the issue can be dealt with informally at this level (to the satisfaction of practice staff), then no further action will be required. However, the issue should be recorded in the student’s practice documentation and the AST/LL informed.

In most cases, allegations of misconduct will need formally investigating within the Faculty. Those concerns that cannot be dealt with informally at a practice level will require escalation to the LL or AST. They will then discuss the allegation with the student’s intake lead. The intake lead will liaise with the field lead (in cases involving child, mental health or learning disabilities students) and the DPNE, before completing
a misconduct reporting form. This form is then sent to the Faculty Quality Office, where a case officer is appointed to lead the investigation.

There are instances where an investigation may need to be completed by an organisation other than the University (usually the placement provider) before informed judgements on misconduct can be made. In these cases, the Faculty will liaise closely with the third party organisation, support their investigation in any way possible, and await the outcome before – where appropriate - moving forward with internal disciplinary procedures.

Where it is considered that the student’s behaviour presents a risk to themselves or others, then practice staff should ask students to leave placement and not return until agreed by the placement provider and faculty. This should be escalated immediately to the faculty. Where necessary, the DPNE will formally suspend the student from placement. This decision will be made collaboratively, with input from appropriate academic and practice-based staff. The student will be asked to meet with the DPNE at the next available opportunity, to ensure that necessary support is in place.

The timescales for investigating allegations of misconduct will vary according to the complexity of the case and whether a student chooses to appeal against any outcome. However, the Faculty will strive to complete the majority of disciplinary processes within 8 weeks (40 working days) of the alleged misconduct. If a student is suspended, then it is possible that the time taken to investigate misconduct will result in substantial placement time being missed. In these cases, intercalation may be required.

Once all investigations have been completed, the outcome will be shared with the placement provider that raised the initial concern. The outcome of an investigation may impact on the willingness of organisations to offer placements to the student in the future – these occurrences will be managed on a case-by-case basis by the DPNE and placement providers.

**Circumstances where practice staff are concerned about a student’s wellbeing and/or fitness to practice:** If a student’s physical or mental health and wellbeing is a cause of concern to clinical staff, then this needs escalating as soon as possible. Often, concerns such as this are the result of pre-existing physical or mental health problems. However, concerns regarding wellbeing may be as a result of specific events on placement (e.g. involvement in a traumatic clinical event). Again, the primary points of contact are the practice support staff working within placement provider organisations. After triaging the concern, the PLF/CST should contact the student’s AST or the relevant link lecturer to discuss the issue. In cases where the student’s
wellbeing, or the wellbeing of others, may be compromised by their presence on placement, they should be advised to go home (if considered safe to do so) and not return to practice until the issue is resolved. The student’s AST and/or a member of the programme management team (e.g. intake lead) will contact the student to ensure that they are safe and have the necessary support in place.

In selected cases, it may be possible for concerns regarding health to be addressed collaboratively by the practice support staff and AST/LL. However, in most cases, the concern will need escalating to the intake/field leads for consideration. At this stage, the intake/field lead and DPNE will make a joint decision on whether the student may be unfit for practice and should be removed temporarily from placement. These considerations should be made in liaison with the student and practice support staff. Evidence from the student’s own GP may be valuable, and a referral to the University’s Occupational Health service may be required (this requires signing off by a Head of Department).

Once all evidence has been gathered, an action plan to support the student in placement will be developed by academic and practice staff. If a decision is made that the student will be unfit to practice for some time, then any action plan may need to incorporate a period of intercalation. In all cases where concerns have been raised regarding a student’s wellbeing, the faculty will provide practice support staff with updates on the outcome of any assessments (within the boundaries of student confidentiality) and the need for any additional student support in subsequent placements.

**Raising urgent concerns**

Rarely, there will be situations related to a student’s wellbeing or conduct that require the University to be made aware urgently and out-of-hours (when the Faculty staff discussed in this document are not available). In these cases, the main reception number for the University is 01482 346311; the emergency number for the University (covered 24/7) is 01482 465555.
Summary of process for escalating concerns about students on placement

Placement staff have concern regarding student

Initial discussion with student (where appropriate)

Concern reviewed by practice support staff (PLF/CST)

What type of concern?

Misconduct

Practice support staff report concern to AST/LL

AST/LL reports to intake/field lead

Student misconduct reporting form sent to Quality Office*

Investigation completed in partnership between practice and FHSC

Outcome of investigation reported to practice

Poor performance

Action plan developed (practice staff and student)

Practice support staff report outcome to AST/LL

Performance improved?

Yes

No

Ongoing review of performance until end of placement

Joint meeting to develop action plan

Ongoing review of performance until end of placement

Action plan for student developed with practice partners

Student wellbeing and/or Fitness to practice (FtP)

Practice support staff report concern to AST/LL

AST/LL reports to intake/field lead*

Intake/field lead meets with student

GP and/or Occupational Health opinion sought

*The need for the student to be suspended/removed from practice will be considered by stakeholders at this stage