

SCOTGEM STUDENT CONTRACT
2021 /22 VERSION

This contract is for students of all 4 years of the ScotGEM programme and will be hosted in the ScotGEM handbook. The student contract is based on these 4 domains of professionalism outlined in the GMC / Medical Schools Council publication; [‘Achieving good medical practice: guidance for medical students’](#). This forms the basis of expected behaviour for medical students.

It is important that the choice to enter medicine is made in the full awareness of the duties and expectations that studying for a degree in medicine entails. Medical studies will include work in professional environments and involves interaction with members of the public and patients. Students must develop appropriate professional attitudes and standards of behaviour with regards to confidentiality, attendance, and behaviour towards patients and colleagues.

Development of an individual’s *professional behaviour* and ultimately *fitness to practise*, is a learning process. The Schools will monitor behaviour and attitudes and will also provide information, advice and support relating to these issues. Medical students must fulfil the professionalism requirements described by the General Medical Council.

As a guide, we have drawn up a series of statements that form this agreement. Please read this document carefully and consider its implications. We have added explanatory text in italics to some of the statements, but if you have a problem with any element of this agreement, we will work with you to see how best to resolve it. You are asked to confirm, in writing, that you accept these statements and you will be asked to reconfirm this declaration annually.

By signing I agree to abide with all the statements in this agreement:

Student Name:	Staff Counter Signatory:
Student Signature:	Staff Counter Signature:
Date:	Date:
After signing the student and counter signatory should initial the bottom of each page.	

Domain 1 - Knowledge Skills and Performance

1. **Attending Classes.** I will attend classes as required by the regulations of the course, and I will work diligently to complete my degree. This includes compulsory attendance and active participation in tutorials, workshops, practicals, and clinical attachments. I acknowledge that it is my responsibility to make sure I am registered as present at compulsory activities. I will inform the medical school of factors that might affect my performance so that appropriate action can be taken.

Regular attendance is expected of all students. Appropriate engagement and conduct in any activity either within or outside the School is expected and will be monitored.

2. **Learning.** I will take responsibility for my own learning and reflect on feedback about my performance and achievements. I will respect the knowledge and skills of those involved in my education. I will complete and submit course work and assignments on time. I will be conscientious in my approach to self-directed learning and will endeavour to contribute effectively to any learning group of which I am a part. I will respond positively to reasonable feedback on performance and achievements.

These are important aspects of professionalism and appropriate conduct laid down in GMC guidelines.

3. **Seeking help.** I will recognise the limits of my professional competence. I will seek help and advice when needed.

4. **Provide feedback.** I will complete evaluation tools to assist the Schools review of their programmes

The medical schools make every effort to ensure that the course is of the highest quality by a process of continuous quality enhancement. If this is to be effective, the medical school needs timely and honest feedback on the course highlighting what worked well and what needs to be changed.

5. **Clinical Examination.** I confirm that I will participate in practising clinical examination on other medical students and physically examining patients or simulated patients, when they have given informed consent. I will make use of opportunities to learn even if feeling uncomfortable (for example carrying out supervised intimate examinations) I will also be willing to allow other medical students and medical staff tutors to examine me for the purpose of learning clinical examination skills and procedures (with the exception of intimate examinations). I will read and comply with the policy on incidental findings.

Students will learn how to perform clinical examination by practising on other medical students, and allowing others to practise on them. Where students are expected to remove their clothing to practise clinical examination, they will always be fore-warned and given the opportunity to discuss this with staff. In order for a medical practitioner to be able to make a diagnosis it is essential that the practitioner is able to examine every patient fully. Measures should be undertaken to avoid transfer of infection from or to the patient where appropriate and by recognised measures, such as hand washing, wearing gloves or masks. A student or practitioner cannot refuse to examine a patient because of their gender, gender identity, ethnicity, culture, beliefs, disability, or disease.

Domain 2 - Safety and Quality

6. **Status as a student.** During my student placements I confirm that I will always make clear to patients that I am a medical student and not a qualified doctor or practising health professional irrespective of any previous qualifications or experience.

7. **Respect for patients.** I acknowledge that patients have the right to expect that all health care workers and students should both appear professional and behave as a professional. I will make sure the patient has agreed to my presence and involvement and not continue interaction if the patient indicates they do not wish to continue. This also applies to online consultations. I will listen to patients and respect their views whilst not having to tolerate discriminatory, bigoted or offensive comments. I understand the process by which I can raise a concern.

During training students will come into contact with many patients from a variety of backgrounds. Patient contact is often for the student's benefit, not theirs. It is important that students approach each patient with respect and with their consent. As a minimum, this means that students should make sure that patients understand that you are a student and that they have agreed to your presence and involvement with them. Be sensitive to their reactions and do not continue your interaction with them if they indicate that they do not wish to continue. Students as well as doctors must be prepared to respond to a patient's individual needs and take steps to anticipate and overcome any barriers to communication. In some situations this may require you to set aside your personal and cultural preferences in order to provide effective patient care.

8. **The Student's own health.** I confirm that I will follow the [GMC's advice](#) and register with a GP, and seek appropriate medical advice and care as required.

9. **Dress Code.** In a clinical setting, both real and simulated, I will conform to the NHS Scotland or local NHS Board standards for clinical dress.

Consideration for your patients affects how you choose to appear. The appearance of a student doctor or medical practitioner should not be such as to potentially affect a patient's trust in that person's medical judgement or standing. Fashion changes but patients have the right to expect that all health care workers and students appear professional. Dress which is too informal or revealing, or is at the extremes of fashion may offend some patients. Good personal hygiene and grooming is essential.

10. **Identification.** I will wear an appropriate identification badge in a clinical setting and confirm that my face will be fully exposed during my interaction with patients, teachers and colleagues.

All students must wear an identification badge and show their face¹ for the purposes of recognition by patients, teachers, and other staff. Patients and teachers must be able to identify students to verify that they are genuine. Showing one's face also makes it easier for patients who are hard of hearing to hear you and/or lip-read, and an important part of communication is by using facial expression. Head dress routinely worn as part of religious observance must not cover the face.

¹ During the period of COVID-19 adjustments students will wear face masks and other PPE in accordance with the location of study regulations.

11. **Raising Concerns.** I accept the obligation that I have a responsibility to make my concerns known to appropriate staff about anybody who has contact with patients in a professional or training capacity and who falls short of the standards expected on them as outlined by their regulatory body in terms of meeting the expectations detailed in the GMC's 'Medical students: professional behaviour and fitness to practice.' I will report any concerns about patient safety promptly and through the appropriate channels.

You may see a health professional or a fellow student behaving in a way that is likely to lead to harm to patients. You should discuss this immediately with a senior person such as a tutor whom you trust. It is uncomfortable to be a "whistle-blower" but it is important and your professional duty not to ignore behaviour if you know it to be dangerous or reckless. You can discuss a concern with the GMC or with medical indemnity providers, but the first point of contact should be an appropriate member of university or local staff. Student Voice should be used to notify the university.

12. **Data and confidentiality.** I will protect confidential information. I will not knowingly divulge information concerning a patient to anyone not directly involved in the patient's care or discuss patients in a public place.

As a medical student you will have access to information about patients, which they will expect to be kept confidential. Some of this you will obtain directly from patients or their relatives when you take histories. Other information will be available to you because you are given access to the patient's medical records as part of your training. This information should not be divulged to anyone not directly involved in the patient's care. You should also take care not to inadvertently pass on information about a patient. Think about who else may see your report or hear your conversations. You should not discuss your patients in a public place. When taking part in remote consultations (for example online GP or outpatient clinic appointments with patients) students should ensure that no-one can see or hear what is taking place. Students must not access these consultations in a public place or shared space, or record content.

13. **Video data.** I confirm that I am willing for my performances in clinical and communication skills to be recorded and stored for teaching and assessment purposes. I agree that I will not use any private video or audio recording equipment in a clinical setting; either real or simulated². I am aware of the data information for applicants and will comply with the requirements that are set out.

Capturing, storing and analysis of clinical skills scenarios is standard practice for assessing medical practitioners in interactions with patients. This procedure is also valuable in providing feedback to student doctors.

14. **Recorded lectures.** I will only download lectures via the secure Panopto App, or University of Dundee approved systems, to maintain appropriate security and integrity of potentially sensitive information.

*Students may **not** download lectures directly via the St Andrews Panopto site, or University of Dundee approved systems, even though the option may be enabled. Use of the Panopto app to download lectures ensures that the downloaded file is held securely thus preventing their loss or misuse.*

² Personal audio capture of lectures is permitted

15. **Personal data.** I confirm that I am willing to allow my personal data to be shared with approved organisations who are carrying out work on behalf of the Universities of St Andrews and Dundee. This is usually limited to Occupational Health, Medical Schools Council and GMC.

16. **Social Media.** I will only use social media in a way fitting with a medical professional, see the [policy on student use of social media](#).

The use of social media has blurred the boundaries between public and private life, and online information can be easily accessed by others. When considering use of social media you should consider the following. Social media sites cannot guarantee confidentiality whatever privacy settings are in place. Patients, your medical school and potential employers may be able to access your personal information. When you make a statement using social media it can be almost impossible to delete it as other users may have distributed it further or made comment. Medical students should treat everyone fairly and with respect. This also applies to communications using social media. You must not bully, harass or make gratuitous, unsubstantiated or unsustainable comments about individuals online.

17. I will read and abide by guidance relating to dissecting room and pathological specimens. Links to St Andrews Dissecting Room code of practice.

Domain 3 - Communication, Partnership and Teamwork

18. I will make sure that I can be contacted, always respond to messages and attend meetings with staff when requested. To do this I will monitor my ScotGEM email account at least once every 48 hours (excluding holidays) and respond to messages within 3 working days. I will provide a current local address and 'phone number to SOLAS, SITS and iSaint.

Both universities needs to be able to communicate with you in case of short-notice changes to the teaching or placement programme or to discuss your progress.

19. I will familiarise myself and comply with the regulations of the Medical Schools and the Universities of St Andrews and Dundee as detailed in the School Handbook and University Student Handbook.

Comprehension of School and University policies is achieved in partnership; both universities will publish and advertise regulations, the student should find the regulations that apply to them and seek advice if unsure.

20. I will treat other healthcare professionals, staff and other members of the university and fellow students with respect.

Health care is dependent on effective co-operation between all members of the team. Even as a student you must ensure that you maintain good relationships with the other health professionals caring for the patient.

Domain 4 - Maintaining Trust

21. I confirm that I have been truthful in my application to the medical school, and that I did not omit important information relevant to my application.

If the universities discovers that an applicant has been untruthful in his or her application, it may withdraw the offer or terminate the course of study.

22. I will adhere to both Medical Schools Absence Policies. I will complete any sign in sheets or absence self-certificate truthfully and accurately and I accept that lying in such submissions will be viewed as dishonest and fraudulent.

Absences from any compulsory classes, or failure to accept advice and guidance from people involved in my education will be reviewed.

23. I will be honest in submitting course work for assessment and will never plagiarise material and submit it as my own work.

The definition of - and penalties for - Plagiarism/Academic Misconduct are outlined in more detail in both School's Handbooks.

24. I confirm that I will be honest and not abuse a patient's trust in me. For example, I will not establish improper personal relationships with patients or their close relatives.

25. I will tell the Schools if I am charged with or convicted of a criminal offence, warned or cautioned by the police in any country or been subject to any University or Student Association disciplinary procedure during my time as a student and in the period between applying and matriculating.

Although student doctors are required to join the 'Protecting Vulnerable Groups' scheme the student should report new convictions or cautions promptly, especially if there is a possibility that this will affect fitness to practise.

26. I acknowledge that my name will be added to the Medical Schools Council's 'Excluded Student Database' should I be excluded from this course by a Fitness to Practise Panel.

During your studies if your fitness to practise is found to be impaired by the school, leading to your exclusion from the course, certain information will be shared with other schools, via a secure national database, in the interests of public safety, and to prevent future fraudulent applications to courses that lead to entry to a registered to profession in the UK. You have a right of access to any information held about you on the database and a right to correct any errors.

Policy Links

Joint:

[ScotGEM Programme Regulations](#)

Years 1 & 2:

[Incidental findings](#)

[patient safety](#)

[data information for students](#)

[Dissecting Room code of practice](#)

[School Handbook](#)

[University Student Handbook](#)

[Absence policy](#)

Years 3 & 4:

Relevant Dundee documents