

Medicine as a Regulated Profession and the Role of the MDU

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Overview

- Medicine as a regulated profession.
- The General Medical Council (GMC).
- Effects of non-work activities on profession (drink, drugs, and social media).
- What does the MDU do?

Medicine as a Regulated Profession



[Credit: Bigstock]

You may think of medicine like this...



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Medicine as a regulated profession

Who is 'looking over your shoulder', as a doctor?

- General medical council (GMC)
- Parliamentary Health Service Ombudsman
- Care Quality Commission (CQC) (not directly regulating doctors)
- HM Coroner
- Your employer (or as a student, your Medical School)
- The Police
- Patients and their families
- Patient's solicitors and the courts
- Your colleagues (GMC duty to raise concerns)
- Media (TV, radio, newspapers)



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The GMC

‘The General Medical Council is the independent regulator for doctors in the UK. Our statutory purpose is to protect, promote and maintain the health and safety of the public by ensuring proper standards in the practice of medicine.’

GMC website 2014, Role of the GMC, Protecting patients

The GMC

‘We have strong and effective legal powers designed to maintain the standards the public have a right to expect of doctors.

We are not here to protect the medical profession - their interests are protected by others. Our job is to protect patients.’

GMC website 2014, Role of the GMC, Protecting patients

Guidance for medical students

- ‘Achieving good medical practice’ published by the GMC and the Medical Schools Council (MSC) in 2016 advises medical students on how the GMC guidance in ‘Good medical practice’ applies to them.

- Online at:

www.gmc-uk.org/education/undergraduate/achieving_good_medical_practice.asp

- Makes it clear that behaviour **‘at all times, both in the clinical environment and outside of your studies, must justify the trust that patients and the public place in you as a future member of the medical profession.’**

GMC, ‘Achieving good medical practice’ (2016).



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Guidance for medical students

- Domain 1: Knowledge, skills & performance
 - Medical students must:
 - Engage
 - Listen
 - Comply with regulations
 - Respond to feedback
 - Reflect.



Guidance for medical students

- Domain 2: Safety & quality
 - Medical students must be open and honest; you have a professional ‘duty of candour’.
 - Raise concerns about patient safety.
 - Talk to your medical school.
 - Talk to us.
 - As students you are not registered with the GMC. But your medical school will have an expectation that you raise concerns.
 - Moral responsibility as a medic.



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Guidance for medical students

- Domain 3: Communication, partnership & teamwork
 - Good communication.
 - Good colleague partnerships.
 - Good team work.



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Guidance for medical students

- Domain 4: Maintaining trust
 - Respect patients.
 - Treat patients and colleagues fairly and with respect.
 - Act honestly and with integrity.

Guidance for medical students

‘Achieving good medical practice’ says:

- **72** Doctors hold a trusted position in society and must make sure their conduct – both professionally and personally – justifies their patients’ trust in them and the public’s trust in the profession.
- **73** As a student aiming to join a trusted profession, you have to meet a higher standard of behaviour than other students, who are on courses that don’t directly lead to joining a profession.

GMC, ‘Achieving good medical practice’ (2016)

Effects of non-work activities on your career

Case 1

- A medical student (A) was upset that another student (B) posted explicit photos of a friend online.
- A posted a (public) threatening response to this post, suggesting that he would kill B. He also sent B a text containing threatening language.
- B complained to the Medical School.

Effects of non-work activities on your career

News > UK > Home News

Man posts Liam Neeson's famous Taken quote on Facebook, ruins medical career

The University of Leicester medical school deemed Ravindu Thilakawardhana 'unfit to practice medicine'

Alexandra Sims | Monday 30 November 2015 | 

   0 shares



Half-cocked: Liam Neeson in the preposterous 'Taken 2' 20th Century Fox

‘I will look for you, I will find you, and I will kill you.’



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Source: The Independent, published 3 December 2015

Effects of non-work activities on your career

- Student was a fourth year medical student.
- University deemed him 'unfit to practice medicine'.
- Student appealed the decision.
- The judge upheld the University's decision ruling that the student's actions were '...fundamentally incompatible with continuing on a medical course or even practicing as a doctor.'



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MDU tips for using social media

- Be professional – always.
- Maintain professional boundaries.
- Respect patient confidentiality.
- Take care what you post.
- Optimise privacy settings.
- Avoid *any* patient dialogue through social media sites.

Effects of non-work activities on your career

Case 2

- A medical student lived with friends in a shared terraced house.
- The family in the house next door planted large trees and bushes alongside the garden fence, blocking out the light. The neighbours refused to trim the hedging when asked, and were abusive to the students.
- One night, after returning home from the pub, the students 'pruned' one of the trees and gently placed the cuttings in the neighbours garden to 'teach them a lesson'.
- The neighbours called the police to the house the next morning.



Effects of non-work activities on your career

Case 2 – what the GMC says:

‘Medical students need to behave professionally outside of work and medical school. This means you should avoid doing things that will undermine the trust patients have in doctors and the public has in the medical profession.’

GMC, ‘Achieving good medical practice’ (2016)

Guidance for medical students

‘You have a duty to cooperate with medical school fitness to practice procedures that involve you or your colleagues. You also have a responsibility to tell your medical school immediately, and the GMC when you apply for provisional registration, if you:

- accept a caution for a criminal offence while you are at medical school
- have been charged with or found guilty of a criminal offence while at medical school
- have any serious concerns about your health.’

GMC, ‘Achieving good medical practice’ (2016)



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Effects of non-work activities on your career

Case 3

- During her psychiatric attachment, a 23-year old female medical student was asked to shadow a 26-year old male patient with depression.
- They got on well, and a few weeks later the medical student saw the ex-patient on the bus and they stopped to chat. The next day, she received a friend request from the patient on Facebook, which she accepted.
- They exchanged banter online, and discovered they both liked the theatre. They went to see a play together, and she stayed the night in his flat. They shared photos of themselves online.
- After going out for a couple of months, the relationship turned sour and they split up acrimoniously. A week later the medical student was called to the Dean's office, as a complaint has been received by the medical school about a student 'taking advantage of a vulnerable patient'.



Effects of non-work activities on your career

Case 3 – what the GMC says in ‘Achieving good medical practice’:

- **‘63** Doctors must not use their professional position to pursue a sexual or improper emotional relationship with patients or those close to them.’
- **‘65** As a medical student, your studies will bring you into contact with patients and members of the public, who can be physically and emotionally vulnerable. Because of this, and the fact that you’ll be joining a trusted profession, you must not use your position to pursue a sexual or improper emotional relationship with them. This includes situations where a patient or someone close to them tries to initiate a relationship with you.’

GMC, ‘Achieving good medical practice’ (2016)

GMC, 'Medical students: professional values and fitness to practise'

Table 1: Most frequent areas of concern relating to student fitness to practise

- **Criminal conviction or caution**
 - Child pornography
 - Theft
 - Financial fraud
 - Possession of illegal substances
 - Child abuse or any other abuse
 - Physical violence
- **Drug or alcohol misuse**
 - Drunk driving
 - Alcohol consumption that affects clinical work or the work environment
 - Dealing, possessing or misusing drugs even if there are no legal proceedings
- **Aggressive, violent or threatening behavior**
 - Assault
 - Physical violence
 - Bullying
 - Abuse
- **Persistent inappropriate attitude or behavior**
 - Uncommitted to work
 - Neglect of administrative tasks
 - Poor time management
 - Non-attendance
 - Poor communication skills
 - Failure to accept and follow educational advice
- **Cheating or plagiarizing**
 - Cheating in examinations, logbooks or portfolios
 - Passing off others' work as one's own
 - Forging a supervisor's name on assessments



GMC 'Medical students: professional values and fitness to practise'

Table 1 (cont.): Most frequent areas of concern relating to student fitness to practise

- **Dishonesty or fraud, including dishonesty outside the professional role**
 - Falsifying research
 - Financial fraud
 - Fraudulent CVs or other documents
 - Misrepresentation of qualifications
- **Unprofessional behaviour of confidentiality or attitudes**
 - Breach of confidentiality
 - Misleading patients about their care or treatment
 - Culpable involvement in a failure to obtain proper consent from a patient
 - Sexual, racial or other forms of harassment
 - Inappropriate examinations or failure to keep appropriate boundaries in behavior
- Persistent rudeness to patients, colleagues or others
- Unlawful discrimination
- **Health concerns and insight or management of these concerns**
 - Failure to seek medical treatment or other support
 - Refusal to follow medical advice or care plans, including monitoring and reviews, in relation to maintaining fitness to practice
 - Failure to recognise limits and abilities or lack of insight into health concerns
 - Treatment-resistant condition.



Guidance for medical students

‘Medical students are not registered with the GMC, but you have similar responsibilities in relation to your medical school. Medical schools must not graduate any student with a primary medical qualification who they don’t consider fit to practice.

This means, even if you meet all the competencies and pass your exams, your medical school can only graduate you if it is satisfied you are fit to practice.

You’ll also need to declare any fitness to practice issues when you apply for provisional registration with the GMC.’

GMC, ‘Achieving good medical practice’ (2016)

Do I have to join a medical defence organisation?

- From 1 August 2015, it became a statutory requirement for registered medical practitioners to hold 'appropriate cover' for liabilities that may arise from their medical practice.
- This adds to the existing ethical duty under GMC's 'Good medical practice':
 - **63.** You must make sure you have adequate insurance or indemnity cover so that your patients will not be disadvantaged if they make a **claim** about the clinical care you have provided in the UK.
- **Claim** here means a claim for financial compensation awarded to a patient who can prove to a court that they have suffered from medical negligence.

‘It won’t happen to me...’

- ‘3,000 patient deaths and 500,000 patients harmed per year due to lapses in safety in the NHS.’
 - Jeremy Hunt, 2013 - The Guardian newspaper
- Errors in 5% of GP prescriptions (0.18% severe)
 - <http://www.gmc-uk.org/about/research/25043.asp>

MDU 2014

- 33,400 calls to the advice line.
- 3.2% increase in medical advisory files.
- 20% increase in medical claims.
- £28.5m MDU indemnity claims and legal costs.
- £24.7m MDU advisory costs.

Won't the NHS Indemnity cover me?

YES, for...

- Claims for compensation arising out of NHS work

NO, for...

- Patient complaints.
- Trust disciplinary hearings.
- GMC investigations.
- Criminal investigations.
- Claims from private patients.
- Coroners' inquests.
- 'Good Samaritan' acts.
- Press enquiries.



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The MDU - here when you need help...

- Help with a medico-legal or ethical issue that has arisen from seeing patients.
- Support with complaints.
- Assistance with medical school fitness to practice procedures.
- Criminal investigations and proceedings arising out of involvement in the care of patients.

When something goes wrong...

- Reflection – discuss/read/learn.
- Apologise, if appropriate.
- Remediation.
- Co-operate with investigations.
- Co-operate with complaints procedure.
- Take advice.
- Call your defence organisation straight away.

Conclusion

- The role of the MDU is to support and advise you in relation to your clinical practice.
- Medical professionalism matters:
 - to your patients
 - to society
 - to your career.
- Ask the MDU **first and early** if things might be going wrong.



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**How to
contact us**

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