MAINTAINING HIGH PROFESSIONAL STANDARDS CONDUCT AND CAPABILITY POLICY FOR MEDICAL AND DENTAL STAFF

POLICY SUMMARY
This policy and allied procedure covers all medical and dental staff employed by the Trust in matters relating to personal and/or professional conduct and/or capability and will be adhered to at all times. This policy and procedure is not applicable to agency workers.

The Trust monitors the implementation of and compliance with this policy in the following ways;
This policy is subject to the monitoring and review in accordance with the agreed review schedule of Trust HR policies and as agreed by the Trust’s Joint Local Negotiating Committee.

The Director responsible for monitoring and reviewing this policy is Executive Director of Corporate Governance & Strategy
MAINTAINING HIGH PROFESSIONAL STANDARDS CONDUCT AND
CAPABILITY POLICY

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MAINTAINING HIGH PROFESSIONAL STANDARDS CONDUCT AND CAPABILITY POLICY

Assurance Statement

This policy supports and implements the national framework set out in the 'Maintaining High Professional Standards in the Modern NHS' and is designed to ensure that processes are fair, transparent and applied consistently and objectively. The Trust undertakes to ensure that through any investigation be it formal or informal, full account will always be taken of considerations of the health of the practitioner, system failure and working environment.

It will seek where possible to tackle performance issues through training or other remedial action rather than solely through disciplinary action. It will continue to support medical and dental staff in their professional development in particular through appraisal.

1.0 INTRODUCTION

1.1 This policy and procedure follows the arrangements contained in the Department of Health document, Maintaining High Professional Standards in the Modern NHS, which has been agreed by the Department of Health, the NHS Confederation, the British Medical Association and British Dental Association.

1.2 This policy and procedure has been agreed with the Local Negotiating Committee (LNC) and ratified by the Joint Local Negotiating Committee (JLNC).

1.3 In the event of any conflict/dispute in the interpretation or application of the contents of this policy and/or procedure, then the BMA model disciplinary procedure for medical staff shall take precedence.

2.0 DUTIES

2.1 Managers’ will ensure that EPUT employees have the best possible opportunity to perform their duties effectively.

2.2 In line with Regulation 18 and 19 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 managers will need to ensure persons employed are fit and proper (namely of good character, have the requisite qualifications, be able by reason of their health (after reasonable adjustments) to carry out tasks intrinsic to their work).
2.3 The Organisation is required to report details of proven professional misconduct to the relevant Regulatory Body.

2.4 Where the Organisation confirms a referral is justified, the employee will be notified accordingly.

### 3.0 DEFINITIONS

3.1 For the purposes of this policy and procedure the following definitions are as follows;

3.2 Follows the framework that has been developed at national level by the Department of Health, the NHS Confederation, the British Medical Association and the British Dental Association and applies to the NHS in England.

3.3 This procedure may be amended to reflect any future national advice or guidance but only by agreement with the LNC. Where there is any conflict or lack of clarity the existing national agreed guidance will take precedence. The operation of the procedure in practice will be reviewed as indicated in this document.

3.4 This is a policy and procedure is to ensure transparent processes are implemented in accordance with the Department of Health Framework for ‘Maintaining High Professional Standards in the Modern NHS’ with regard to concerns regarding the conduct and/or capability of medical and dental staff.

### 4.0 PRINCIPLES

4.1 The purpose of this policy is to establish a clear, consistent, fair and co-ordinated process for handling concerns relating to the safety of patients posed by the conduct and/or capability/performance of medical and/or dental staff, which come to the attention of the Trust.

4.2 Whatever the source of the information received, the response will be to:

- Ascertain promptly and factually what has happened and why;
- Determine whether there is a continuing risk;
- Decide whether immediate action is required to address the source of the risk;
- Establish agreed and reasonable actions to address any underlying problem.

4.3 The framework comprises of the following sections which are followed in the allied procedure:

- Action when a concern arises
- Restriction of practice and exclusion from work
- Procedures for dealing with issues of misconduct
- Procedures for dealing with issues of capability
- Appeal Procedure in capability and conduct cases
- Handling concerns about a practitioners health
5.0 MONITORING OF IMPLEMENTATION AND COMPLIANCE

5.1 Compliance with this policy will be against the Trust’s agreed minimum requirements / as detailed within the Auditable Standards and Monitoring Arrangements.

5.2 The Executive Medical Director is responsible for ensuring there is a system in place to monitor, record and report on outcomes from disciplinary investigations, hearings and / or appeals that are conducted by the Trust.

5.3 This policy is subject to review in accordance with the Trust HR policy review schedule and as agreed by the Trust’s Joint Local Negotiating Committee.

6.0 POLICY REFERENCES / ASSOCIATED DOCUMENTATION

- Maintain High Professional Standards in the Modern NHS
- British Medical Association Model Policy
- NCAS Guidance
- NHS Constitution
- Duty of Candour
- Fit and Proper Persons Test
- Public Interest Disclosure Act 1998
- Equality Act 2010
- Bribery Act 2010
- Professional Bodies code of conduct
- Health and Social Care Act 2008 (Regulated Activities) Regulations 2014

7.0 REFERENCE TO OTHER TRUST POLICIES/PROCEDURES

- Standards of Conduct outlined in the Disciplinary Policy and Procedure
- Grievance Policy
- Equality, Diversity and Human Rights Policy

END