Physician Associate Fact Sheet



North West **Physician Associate** Pilot Programme Reporting Concerns re a Student including Fitness to Practice

If the **sponsoring organisation** (placement provider) or **university** has any concerns re a student **Physician Associate** they should e mail the **Lead Employer** at <u>Lead.Employer@sthk.nhs.uk</u>

giving the students name and a brief description of your concerns.

The **Lead Employer**, working with the **university** or **sponsoring organisation**, will conduct a short initial investigation and make the immediate following decisions;

Does the student need to be suspended whilst an investigation is undertaken?
Who needs to conduct any necessary on-going investigation?

Competence

The **Lead Employer** will refer any concerns re capability to the students **university**.

The **university** under its own internal processes will investigate the issue/s and determine next steps.

The **university** will inform the **Lead Employer** by e mail, <u>Lead.Employer@sthk.nhs.uk</u>, of the outcome of their findings.

If the student is to be removed from the course the **Lead Employer** will terminate their contract of employment.

Health Education England North West office will be informed of the outcome.

Conduct

The **Lead Employer** will support the **university** or **sponsoring organisation** in conducting an investigation into the issues raised.

The **Lead Employer** working with the **university** or **sponsoring organisation** will determine the outcome/next steps

The **Lead Employer** will inform the **university** or **sponsoring organisation** of the outcome of their findings.

If the student is to be removed from the course the **Lead Employer** will terminate their contract of employment and the **university** will remove the student from the course.

Health Education England North West office will be informed of the outcome.

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