

Medical Program Charter

Medical Program Charter Revised 20 August 2020 Page 1

Table of Contents

The Medical Program Charter 3			
Part 1 – The responsibilities of the Medical Student4			
1.1.	The student will treat every patient politely and considerately 4		
1.2.	The student will respect patients' dignity and privacy5		
1.3.	The student will listen to patients and respect their views 5		
1.4.	The student will respect and protect confidential information 5		
1.5.	Students must not allow their personal beliefs to prejudice their patients' care 5		
1.6.	The student will apply risk minimisation principles and foster patient safety 6		
1.7.	The student will take all opportunities to develop professional knowledge and skills		
1.8.	The student will recognise the limits of his/her professional competence 7		
1.9.	The student will be honest and trustworthy in all matters		
1.10.	The student will work with colleagues in ways that best serve patients' interests.		
1.11.	The student will undertake to ensure his/her own self care, health and well being		
1.12.	The student will comply with professional obligations and responsibilities 8		
1.13.	The student undertakes to provide feedback on the usefulness, significance and effectiveness of all aspects of the course, including teaching		
1.14.	The student will cooperate with any Fitness to Practise procedure in which s/he is involved		
1.15.	The student as teacher and assessor9		
1.16.	The student undertaking research9		
Part 2 – The responsibilities of the Medical Program 10			
2.1.	Education		
2.2.	Privacy and equal opportunity		
2.3.	Administration and support		
	, and support		

The Medical Program Charter

Medical students need to know what will be expected of them as they undertake a degree in medicine to become a doctor. They also need to know what they might reasonably expect of their Medical Program¹ during the delivery of their medical education. One way to achieve this is through a Medical Program Charter which identifies and articulates the responsibilities of both the medical students and the staff involved in their medical education.

Bond University Medical Program Charter has two broad aims:

- To state the expectations and responsibilities for the major parties involved in the Medical Program. The Charter is intended to be useful as a reference and framework for both the medical students and Medical Program staff (academic, professional and affiliated).
- To promote "Good Medical Practice" by incorporating a professional code of conduct for medical students which will remain consistent throughout their medical school education and which students will retain as core knowledge for future medical practice.

As a Bond University medical student, when you sign the final page of this charter you will be accepting the responsibilities within Part 1 of the Medical Program Charter, the Medical Program agrees that it has responsibilities to you, these are outlined in Part 2.

The standards outlined for medical practitioners in the 2014 AMC document: *Good Medical Practice*: A Code of Conduct for Doctors in Australia². Students need to be aware of Good Medical Practice and consider its implications. Some modifications and additions have been made to take account of the different responsibilities of medical students from qualified doctors. In addition to the responsibilities set out in Part 1 of this Charter, students must comply with all other University regulations, requirements and policies including the University student code of conduct³. In certain cases, action may be taken under those regulations and policies instead of, or as well as, under the HSM - Management of Allegations of Student Misconduct procedures.

Bond University Medical Program complies with the standards and expectations stated in Part 2 of the Medical Program Charter. The responsibilities outlined in Part 2 align with the requirements of the AMC which sets out the standards used to judge the quality of the student experience.

Medical Program Charter

¹ The term 'Medical Program' can be substituted by 'university' throughout this document. In some instances, the term medical program includes the Medical Program, Faculty of Health Sciences and Medicine and the university where the student is under the governance of all. ² AMC Good Medical Practice: A Code of Conduct for Doctors in Australia 2014 (Developed by a working Party of the Australian Medical Council on behalf of the medical boards of the Australian states and territories)

Schedule B – Student code of conduct

Part 1 – The responsibilities of the medical student

Medical students undertake the medical program with the aim of becoming medical practitioners. Whilst students do not yet have the full duties and responsibilities that go with being a registered medical practitioner, they are already in a privileged position with regards to patients and those close to them. In recognition of this, students must maintain a good standard of behaviour and show respect for others.

By awarding a medical degree, a university is confirming that the graduate is fit to practise to the high standards that the AMC has set in its guidance to the medical profession, Good Medical Practice. The AMC outlines the standards expected of a qualified doctor in Good Medical Practice. Many of those standards apply to you as a medical student. Those that apply are set outbelow:

1.1 The student will treat every patient politely and considerately.

As a student, you will:

- 1.1.1. Treat each patient with respect.
- 1.1.2. Make sure that the patient understands that you are a student and not a qualified doctor.
- 1.1.3. Make sure the patient has agreed to your presence and involvement.
- 1.1.4. Not continue interaction if the patient indicates a wish to stop.
- 1.1.5. Dress in an appropriate professional manner that enables good communication with your patients.
- 1.1.6. Acknowledge that patients have the right to expect that all health care workers and students should both appear and be professional.

During your training, you will come into contact with many patients from a variety of backgrounds. Usually, your contact with patients will be for your benefit and not theirs. It is important that you approach each patient with respect. As a minimum, this means that you 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 have had enough.

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.

Consideration for your patients affects how you choose to appear. Your dress and appearance should not interfere with your ability to communicate with your patients and their supporters. Fashion changes but patients have the right to expect that all health care workers and students appear professional. Dress which is too informal or is at the extremes of fashion may offend some patients. Good personal hygiene and grooming is essential.

Be aware that you are going to be in very close contact with patients. General appearance, facial expression and other non-verbal signals are important components of good communication in the wider community. Any form of dress which interferes with this (such as covering the face or wearing excessive jewellery, facial piercings) should be avoided. Compliance with hospital policy is required. Please note that you may visit hospitals within New

South Wales and Queensland which adhere to different policies and guidelines.

1.2 The student will respect patients' dignity and privacy.

The student will:

- 1.2.1 Address patients in a professional way.
- 1.2.2 Endeavour to preserve the patient's dignity at all times.
- 1.2.3 Attempt to ensure the patient's privacy at all times.

Remember, patients are human beings. Always ensure that the patient's dignity is preserved in the manner in which you address them. Err on the side of formality rather than familiarity unless the patient gives you specific permission to be more informal. Take care when examining a patient not to embarrass them by over-exposure. The level of acceptable exposure varies from individual to individual. Be aware of the wishes of your patient in this regard.

1.3 The student will listen to patients and respect their views.

It is easy to turn history taking into an interrogation, but a consultation is a two-way process. Do not allow yourself to ignore what the patient has to say.

As a medical student, you will initially have opportunities to practise communication skills with standardised patients. In the clinical years, you will be expected to use your communication skills in a sensitive and respectful way to enhance patient care.

1.4 The student will respect and protect confidential information.

The student will not:

- 1.4.1 Intentionally divulge information concerning a patient to anyone not directly involved in the patient's care.
- 1.4.2 Discuss any patient information in a public place and will take other precautions to ensure not to inadvertently pass on information regarding a patient.

As a medical student, you will have access to information about patients, which they will expect to keep 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 deliberately 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 and you should be aware of the potential risk to confidentiality of sharing emails or social networking sites e.g. Facebook, twitter, msn, etc.

The student will:

1.4.3 Ensure that all patient personal details are de-identified for case presentations and discussions

1.5 Students must not allow their personal beliefs to prejudice their patients' care.

Students will care for patients irrespective of their views about patients' lifestyles, culture, religion and beliefs, race, colour, gender, sexuality, disability, age, nationality, or social or economic status. You are entitled to hold any beliefs that you wish but you must not allow these to interfere with your care of patients.

Medical Program Charter

For more information about Sections 1 – 5, students should refer to <u>Good Medical Practice</u>: *Part 2 - Providing Good Care & Part 3 – Working with Patients*.

1.6 The student will apply risk minimisation principles and foster patient safety

- 1.6.1 The student will strive for high standards in his/her professional life and his/her conduct should demonstrate this.
- 1.6.2 The student will foster patient safety by adhering to the infection control principle of "Clean hands save lives".
- 1.6.3 The student will act quickly to protect patients from risk if he/she has a genuine belief that they or a colleague may not be fit to practise the student will immediately report any concerns to a senior member of staff.

You must see a health professional if a fellow student is behaving in a way that could lead harm to patients. You should discuss this immediately with a senior person such as a tutor whom you trust. This can feel uncomfortable but it is important and your professional duty not to ignore behaviour if you know it to be dangerous or reckless.

For more information, students should refer to Good Medical Practice: Part 6 - Minimising Risk.

1.7 The student will take all opportunities to develop professional knowledge and skills. The student will be expected to:

- 1.7.1 Comply with all faculty building and laboratory rules (e.g. right footwear, etc.).
- 1.7.2 Attend all compulsory teaching sessions.
- 1.7.3 Inform the Medical Program as soon as possible, with a reason, if unable to attend a compulsory session.
- 1.7.4 Complete and submit assignments on time.
- 1.7.5 Be conscientious in his/her approach to self-directed learning.
- 1.7.6 Contribute effectively to any learning group of which they are a part of and share learning and knowledge with peers.
- 1.7.7 Respond positively to reasonable feedback on performance and achievements.
- 1.7.8 Immediately inform the Medical Program of factors that might affect performance so that appropriate action can be taken.
- 1.7.9 Carry out examinations (including intimate examinations where necessary and when a chaperone is present) on patients of both sexes.

Keeping your professional knowledge and skills up to date is essential. At this stage, you are acquiring knowledge and skills rather than maintaining them but the principle is the same. Learning is a professional duty. Reading up on the patients you have seen and practising your clinical skills is an essential part of your life as long as you remain within the medical profession. Failure to attend compulsory teaching sessions is a breach of professional standards.

For more information, students should refer to <u>Good Medical Practice</u>: Part 7 -Maintaining Professional Performance.

1.8 The student will recognise the limits of his/her professional competence.

1.8.1 The student will not hesitate to ask for help and advice when needed.

This may appear obvious to you but there is a temptation to undertake tasks or give advice beyond your level of competence. If in doubt, ask for help.

1.9 The student will be honest and trustworthy in all matters.

All forms of academic misconduct are unacceptable and may result in disciplinary proceedings and encompasses all forms of academic dishonesty, including cheating, or doing anything which may assist a person to cheat, in relation to assessment. Academic integrity is vital to learning, teaching and research at the University.

As a student you will:

- 1.9.1 Familiarise themselves with the principles of academic integrity both generally and for their discipline or program.
- 1.9.2 Act in accordance with the principles of academic integrity in their learning and research. For example, by:
 - not cheating in examinations or other forms of assessment;
 - not helping others to cheat in examinations or other forms of assessment;
 - only submitting work which properly acknowledges the ideas or words of others and which is otherwise their own work;
 - not lending original work to other students for any reason;
 - ensuring that the findings of their research are interpreted and presented appropriately and based on accurate data.
- e.g. Plagiarism The act of misrepresenting as one's own original work:
 - another's ideas, interpretations, words, or creative works; and/or
 - one's own previous ideas, interpretations, words, or creative work without acknowledging that it was used previously (i.e., self-plagiarism).

These ideas, interpretations, words, or works may be found in published and unpublished documents, print and/or electronic media, designs, music, sounds, images, photographs or computer codes, or gained through working in a group.

1.9.3 Seek advice from academic or support staff if they are unsure whether their actions comply with academic integrity principles.

This corresponds to the requirement in Good Medical Practice – Be honest and trustworthy. This applies to your clinical encounters and has wider implications.

If you are not trustworthy in your academic life, it will be difficult to be trustworthy in the clinical setting.

1.9.4. The student will be truthful at all times in the clinical setting.

In the clinical setting, students must be truthful about their involvement with patient care. If you have not seen the patient, it is unprofessional to claim that you have. If you are given a task and have not performed this task, it is unprofessional to claim that you have. ³ Students should refer to Bond

Medical Program Charter

^{4. &}lt;u>University Academic Integrity policy (TLR 4.02)</u> and <u>Bond University's Handbook of Regulations Part 3</u>
<u>Discipline Regulations</u>

1.10 The student will work with colleagues in ways that best serve patients' interests.

The student will:

- 1.10.1 Acknowledge that health care is dependent on effective co-operation between all members of the team.
- 1.10.2 Maintain good professional relationships with the other health professionals caring for the patient.
- 1.10.3 Treat other healthcare professionals and allied healthcare staff with respect.
- 1.10.4 Treat Medical Program/University staff (academic professional, affiliated staff) with respect.
- 1.10.5 Treat fellow students with respect and work cooperatively and collaboratively.

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.

For more information, students should refer to <u>Good Medical Practice</u>: *Part 4 - Working with other Health Care Professionals*.

1.11 The student will undertake to ensure his/her own self care, health and wellbeing. The student will:

- 1.11.1 Recognise the effects of physical and psychological stressors on his/her ability to care for patients and take steps to ensure his/her own self care, health and well-being.
- 1.11.2 aim to seek independent objective healthcare advice, preferably from their own general practitioner, and avoid the risks of self-diagnosis and self-treatment.

For more information students should refer to <u>Good Medical Practice</u>: <u>Part 9 – Ensuring doctors'</u> <u>health</u>.

1.12. The student will comply with professional obligations and responsibilities The student will:

- 1.12.1 Comply with mandatory immunisation requirements and provide documentation of immunisation status.
- 1.12.2 Report infectious, communicable or notifiable diseases to their Medical Program.
- 1.12.3 Report any health condition or impairment which could affect performance or judgement or pose any risk to patients.
- 1.12.4 Maintain appropriate professional boundaries.
- 1.12.5 NOT use the professional relationship to develop any sexual or exploitative relationship with a patient or staff member where a conflict of interest may exist.

For more information students should refer to <u>Good Medical Practice</u>: Part 8 – Professional Behaviour.

1.13 The student undertakes to provide feedback on the usefulness, significance and effectiveness of all aspects of the course, including teaching.

1.13.1 The student will complete such evaluation tools as are agreed between the Medical Program and the student body.

The Medical Program makes every effort to ensure that the program you are undertaking is

of the highest quality by a process of continuous quality enhancement. If this is to be effective, the Medical Program needs timely and honest feedback on the course highlighting what worked well and what needs to be changed. Your opinion is important.

1.14 The student will cooperate with any external allegations of misconduct-related procedures

1.14.1 The student will adhere to Australian Federal and State laws and understand that any breach of these laws may become a criminal matter.

Doctors and medical students are expected to be law-abiding citizens in both their working and private lives. Upon initial medical registration and annually thereafter, doctors are required to make a declaration about any criminal offence, charges or convictions. Doctors with a history of a criminal offense in any jurisdiction are required to declare the matter to their Medical Registration Board. Criminal history checking is an element of "fitness to practice" for medical registration. Failure to disclose a criminal history or make misleading or false information about a criminal history is treated as a very serious matter with heavy penalties.

It is important for medical students to be aware that a criminal record is taken seriously and become familiar with the reporting obligations that are required of them.

1.14.2 The student will comply with the HSM - Management of Allegations of Student Misconduct procedures.

1.15 The student as teacher and assessor

1.15.1 The student may be involved with near-peer teaching and/or peer assessment

It is part of good medical practice to contribute to these activities and provide support, assessment and feedback for colleagues.

The student will:

- 1.15.2 Seek to develop the skills, attitudes and practices of an effective teacher, whenever involved in teaching.
- 1.15.3 Be honest, objective and constructive when assessing the performance of colleagues.

For more information, students should refer to <u>Good Medical Practice</u>: Part 12 – Teaching, supervising and assessing

1.16. The student undertaking research

1.16.1 The student that undertakes research will adhere to guidelines issued in accordance with the National Health and Medical Research Council Act 1992 and the Bond University Code of conduct for research policy (TLR 5.06) when undertaking research involving humans, their tissue samples or their health information.

Research is vital in improving the quality of healthcare and reducing uncertainty for patients now and in the future, and in improving the health of the population as a whole.

1.16.2 The student will adhere to research ethics when involved in the design, organisation, conduct or reporting of health research involving humans as it brings particular responsibilities that include;

- According to participants the respect and protection that is due to them.
- Acting with honesty and integrity.
- Ensuring that any protocol for human research has been approved by the Human Research Ethics Committee.
- Ensuring that human participation is voluntary and based on an adequate understanding of sufficient information about the purpose, methods, demands, risks and potential benefits of the research.
- Ensuring that any dependent relationship between doctors and their patients is taken into account in the recruitment of patients as research participants.
- Adhering to the approved research protocol.
- Respecting the entitlement of research participants to withdraw from any research at any time and without giving reasons.
- Adhering to the guidelines regarding publication of findings, authorship and peer review.

For more information students should refer to <u>Good Medical Practice</u>: Part 11 – Undertaking research and the <u>Bond University Code of conduct for research policy (TLR5.06)</u>

Part 2 – The responsibilities of the Medical Program

In accepting a place in the Medical Program, students are expected to comply with certain responsibilities, which are outlined in Part 1 of the Medical Program Charter. These responsibilities accord with AMC standards and take into consideration the requirement that Medical Programs are expected to graduate students who are fit to practise medicine.

In return, the student can expect that the Medical Program will undertake to fulfil its responsibility to provide education, training and facilities through which the student can reach the necessary outcomes to achieve an undergraduate medical qualification.

2.1 Education

The Medical Program shall:

- 2.1.1.1 Provide high quality teaching and training in clinical and non-clinical settings.
- 2.1.1.2 Provide learning experiences that are challenging and stimulating.
- 2.1.1.3 Ensure that the course is relevant and led by individuals qualified to teach and train undergraduate medical students.
- 2.1.1.4 Provide a level of training whereby, upon an individual's satisfactory completion of the course, the minimum standards attained comply with the professional expectations of the regulatory body (AMC).

Medical Programs are under an obligation to comply with AMC recommendations and this objective requires continuation of providing the good quality education demanded by the AMC. This is assessed via the AMC's quality assurance visiting process but it is also a proactive duty of the Medical Program. When applicable, students should be involved in quality assurance processes in order to aid the provision of consistent and high quality training.

2.1.2 Inform, regularly update and provide access to full information about the course, module contents and course objectives.

Ease of access to information about the course is a necessity. Clear communication of changes and dissemination of information should be a priority of the Medical Program.

2.1.3 Inform the student within a reasonable time period of significant changes to the curriculum or course structure (other than minor timetabling changes) which will affect the student.

Any substantial change made to the course should be made known to the students with reasonable timeframes, following open discussion. Change that would require significant expenditure or inconvenience on the student's behalf must be made known as soon as practically possible.

2.1.4 Give clear and timely information about assessment/submission dates and the preferred or required format of assessments/submissions.

Assessment dates and format should be made clear to all students and a minimum time period of one month prior warning should be afforded to students.

2.1.5 Ensure assessment and examinations are based upon the required learning outcomes.

To ensure continuity and fairness, assessment and examinations will be based upon the standards laid down by the Medical Program syllabus and AMC.

2.1.6 Give impartial, timely and constructive feedback on individual student progress and performance, including explanations for failure.

If a student is failing to meet academic standards at any point of the course they should be given constructive feedback and support. A reasonable time is within 2 weeks of a problem being established.

2.1.7 Where necessary provide access to reasonable extra support and advice from teachers and tutors.

It is important that students who require additional learning support obtain reasonable extra support and advice from the teachers and tutor, aiming to facilitate the successful completion of exams and modules.

2.1.8 Respect the intellectual property rights of the medical student. Any work undertaken by the student remains the property of the student subject to locally agreed arrangements discussed in advance with student representatives and subject to the <u>Intellectual Property</u> Policy.

The intellectual property rights of any individual's work must be respected. Work undertaken by a medical student should not be passed off as somebody else's and there must be clear acknowledgement of the ownership of this work.

- 2.1.9 Provide students with the opportunity to give the Medical Program or university feedback on the usefulness, significance and effectiveness of all aspects of the course, including teaching.
- 2.1.10 Give due consideration to feedback provided in accordance with 1.12 above and inform the student of any positive action that is possible to take with respect to the feedback.

While student feedback is encouraged, there is no undertaking that changes will occur at the request of students. Sometimes change to a course may not be possible for various reasons and wherever possible the student should be given feedback on those reasons.

2.1.11 Ensure that all staff with responsibilities to medical students promote and comply with the Medical Program Charter.

The Charter will be made available to students and staff alike, with all parties expected to meet the content of this Charter.

2.1.12 Ensure that staff and students understand their responsibilities with respect to gaining consent from patients prior to examinations by students.

2.1.13 Make clear the purpose and implications of HSM - Management of Allegations of Student Misconduct procedures.

Professional Responsibility and fitness to practise are essential components of the Medical Program so it is imperative that students and staff are clear about the purpose and implications of HSM - Management of Allegations of Student Misconduct procedures.

2.1.14 Ensure responsible allocation of available resources in order to facilitate delivery of the provisions of Parts 1 and 2 of this Charter.

2.1.15 The Medical Program will in line with the academic integrity policy:

- Cultivate with students a climate of mutual respect for original work.
- Inform all commencing students of appropriate referencing techniques in their fields of study and refer them to relevant resources available on the <u>Student Learning Support</u> iLearn site and <u>Library</u> website.
- Inform students that various means, including <u>plagiarism detection software</u>, are used to identify instances of academic misconduct.

HSM Faculty will:

- Take an equitable and consistent approach to the identification and investigation of possible cases of academic misconduct and actions to address substantiated allegations of academic misconduct.
- Ensure that all academic staff are aware of, and provide advice to students, regarding the available sources of assistance for students.
- Support academic staff to address allegations of academic misconduct in accordance with published policies and guidelines.
- Maintain secure and confidential records relating to the management of allegations of academic misconduct.

2.2 Privacy and equal opportunity

The Medical Program is obliged to:

- 2.2.1 Respect the fundamental Human Rights of students as set out by the Universal Declaration of Human Rights (United Nations 1948) as far as they do not impact on the rights and freedoms of others for whom the Medical Program has an equal duty of care, including patients and the general public.⁴
- 2.2.2 Ensure that learning, both at the Medical Program and on clinical placements, is undertaken in a safe and secure physical environment.

Medical Programs must maintain strict health and safety regulations. The Medical Program is responsible for providing a safe and secure environment for medical students to learn academic skills. Clinical placements will comply with hospital Occupational Health & Safety requirements.

2.2.3 Provide a diverse environment which takes positive action to protect students from bullying, discrimination, victimisation, intimidation or harassment of any kind ⁵ and promote equality and value diversity.

Students and staff alike must be treated respectfully, and not be subject to any form of discrimination. The Medical Program must ensure that they have policies which are compliant with relevant equal opportunities legislation^{6, 7}. Any report of bullying, discrimination,

victimisation, intimidation or harassment will be followed up and investigated.

2.2.4 Provide the student with information and advice on how to lodge a formal complaint⁸. Complaints shall remain confidential to those involved at all times and the complainant shall be protected from any form of victimisation following such a complaint.

The treatment of complaints against either a member of staff or student should be treated in a uniform manner and confidentially.

2.2.5 Those making complaints or disclosures that are proven to be malicious and/or untruthful will be subject to the Medical Program's disciplinary procedures.

⁴ Including lifestyle, culture, religion and beliefs, race, colour, gender, sexuality, disability, age, nationality, or social or economic status.

⁵ This includes (but is not limited to) any form of disability-based, religious, racial, sex, or sexuality discrimination.

⁶ Discrimination Policy (Part 3 – <u>Bond University Discipline Regulations</u>)

⁷. Queensland Anti-discrimination Act 1991

⁸ Bond University appeals and complaints webpage

2.3. Administration and support

The Medical Program shall:

- 2.3.1 In so far as resources allow, ensure that medical students have adequate access to modern IT equipment that is appropriate to the demands of the course.
- 2.3.2 In so far as resources allow, ensure that the student has access to quality facilities, learning and library resources that are required to achieve the academic and professional goals set by the AMC and the Medical Program.

Technical facilities such as anatomical models, professional computer programmes and other resources should be made available to students.

- 2.3.3 Endeavour to facilitate a high standard of teaching facilities whilst on placement.
- 2.3.4 Ensure that academic and administrative staff model respectful communication and a helpful attitude towards students during their medical education.
- 2.3.5 Ensure that all students have access to Medical Program regulations and policy.
- 2.3.6 Ensure that students are advised of expectations regarding (a) maintenance of their own health and (b) appropriate behaviour regarding medical consultation and referral processes.

Ideally students should have a family General Practitioner (GP) for medical care. Students can access the available Medical or Counselling Services service available at Bond University Campus. (i.e. external to the Medical Program).

Medical student health and well-being is very important to the Medical Program and students must not allow their own health or condition to put patients and others at risk. Faculty staff members who happen to be doctors should not provide "corridor consults" and as far as possible to avoid conflicts of interest and maintain confidentiality the Medical Program will promote the use of services external to the Faculty to all medical students.

2.3.7 Provide access to a student-centred support service within the Medical Program and ensure that contact with the student support staff member will be treated in confidence.

Given the personal nature of some problems that students encounter, the Medical Program must be able to direct the student to facilities that offer them suitable support.

- 2.3.8 Ensure that students are given clear information about (a) who their academic teachers and supervising clinicians are and (b) what services are available for student support.
- 2.3.9 Ensure that in order to avoid any potential conflict of interest, staff members with direct academic responsibilities for a student do not undertake student support responsibilities for that student. If dual responsibility does arise, a system must be in place by which the student can seek support from another member of staff who does not carry out this dual function at that time.

Both academic and emotional welfare of medical students is important but a clear distinction needs to be made between provision of medical education and provision of medical student support service. Whenever a 'conflict of interest' 'might exist the student should be referred to alternative services and ideally a pastoral tutor does not have any academic responsibility for the student.

2.3.10 Ensure that issues disclosed to a support service provider remain confidential but also ensure that the student is made aware that in some circumstances the support service provider may be required to disclose information which affects the student's fitness to practise.

The student support service provider relationship should have the same status as the patient-doctor relationship unless the issue being discussed becomes a matter of fitness to practise. This should be made clear to the student at the start of the student support service provider relationship and whenever a matter of fitness to practise is discussed. The support service provider must make the student aware of the potential ramifications of disclosing information relating to his/her fitness to practise.

2.3.11 Ensure that students are made aware of the availability of the career advice facilities and services at Bond University.

Career advice can be very important for some students during the Medical Program. When students are uncertain about their motivation or do not wish to pursue a medical career, the Medical Program should ensure that the student has access to career advice facilities and services provided through the University

2.3.12 Aim to ensure that in conjunction with the relevant postgraduate director, the transition between the Medical Program and the intern year is as seamless as possible. This includes providing information about the process for applying for internship and relevant and timely information as required by any application process.

Any ranking information provided by the Medical Program must be arrived at by means of a transparent process, which will be clearly communicated to the students.

2.4 Student representation

The Medical Program shall:

2.4.1 Ensure that a student can make a complaint if he/she feels that he/she has been treated incorrectly and that any complaint procedure adopted by the Medical Program is open, transparent and fair.

Complaint procedures must be open, fair and transparent. The Medical Program will have processes which allow the anonymous reporting of incidents without fear of comeback.

- 2.4.2 Ensure that fair student representation exists on all decision-making bodies, which directly affect medical students.
- 2.4.3 Facilitate student participation in activities of the Medical Program, and University students' union and external bodies related to medical education.

Student representation is important and is respected by the Medical Program.

Student Agreement

I, the student, agree to the principles outlined above in the Medical Program Charter, and understand that a breach of the expected standards of ethical and professional conduct may result in the cessation of my Medical / Clinical placement, and disciplinary action, which could include exclusion from the Medical Program.

Student Confirmation I have read and understood my resp	oonsibilities as outlined in the Bond	University Medical Program Charter.
Print Student Name and Cohort	 Signature	Date signed
Dean of the Medical Program		Date signed