

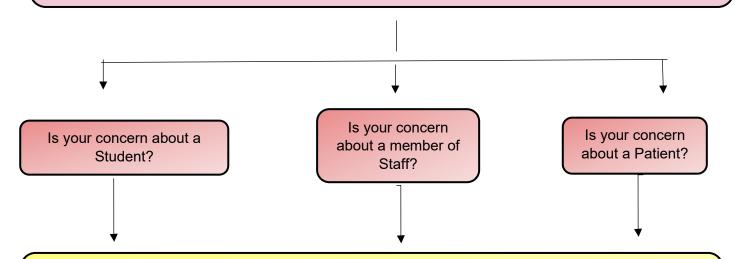
## Raising A Concern Flow Chart 2025

Policy Name	Raising a Concern Flow Chart
Version	1
Date reviewed	May 2025
Next review due	May 2026
Date uploaded	June 2026



## Introduction

The College is committed to investigating any Cause for Concern, including incidents involving unsafe procedures or practice in the College environment whether this be in the teaching clinic or during



Any cause for concern needs to be raised by completing the Cause for Concern Form, which is available from either the College website or by emailing the Senior Admin and Quality Controller (r.gold@collegeofosteopaths.ac.uk)

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## Examples of issues include:

- Health concerns including failure to seek or adhere to medical treatment or support; failure to recognise limits and abilities and lack of insight into health concerns; where mental health, emotional or inter-personal issues pose a risk to the student's own safety, health and wellbeing or that of others or the proper operation of the profession or work based setting; or where the student cannot be expected to attain the competency standards of the course notwithstanding reasonable adjustments made in relation to a disability.
- Sexual misconduct or any form of harassment, as per Equality Act 2010
- Unsafe practice, incompetence or requiring too much supervision
- Concerns around the Prevent Duty (see the Prevent Duty Policy 2023)
- Unprofessional behaviour including:
  - Lack of respect, poor attitude, laziness, aggression and bullying
  - o Indiscipline, failure to follow dress code, inappropriate use of mobile phone, poor time keeping, poor attendance
  - o Failure to self-reflect, lack of insight
  - o Failure to engage with investigations into unprofessional behaviour
  - o Poor self-management, lack of personal accountability
  - Sexual impropriety
  - Serious or repeated dishonesty

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## **Cause for Concern Form**

**Background Information** 

The College is committed to investigating any Cause for Concern, including incidents involving unsafe procedures or practice in the College environment whether this be in the teaching clinic or during teaching weekends.

Location of Event:	
Date (of Event):	
Time (of Event):	
Name of Participants	s:
Signature(s):	
Summary: What hap	pened?
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Date of 'Cause for Concern Form' completion:	
Signature (College of Osteopaths):	
Signature (Student(s):	
Action taken:	
Referral to the Fitness to Practice Process – P	reliminary Stage
Referral to the Fitness to Practice Process – F	ormal Hearing
Referral to the Student Conduct & Student Dis	ciplinary Procedure
Referral to the Safeguarding Policy and or Pre	vent Policy

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Outcome:		
Resolved:	Yes/No	Date:
Head of Education Signature:		
Not Resolved – referral to SENIOR LEADERSHIPTEAM		
Date 'Cause for Concern Form' passed to Senior Leadership Team:		

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Action taken:			
Outcome:			
Resolved:	Yes/No	Date:	
SENIOR LEADERSHIP TEAM Signature:			
Not Resolved – referral to Chair, Board of Governors			
Date 'Cause for Concern Form' passed to Chair, Board of Governors:			

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