

# FACULTY OF MEDICINE AND HEALTH- SYDNEY DENTAL SCHOOL STUDENTS AS SUBJECTS OF PRACTICAL CLASSES PROVISIONS 2020

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## 1 Application

These provisions apply to all students in the Sydney Dental School.

## 2 Principles

- (1) Students are encouraged to participate in practical classes as the subjects of activities involving practising clinical techniques and administering substances. Participation in such classes provides valuable insight into the perspectives of patient and clinician.
- (2) Students are reminded of the need for reciprocity for successful peer learning sessions.
- (3) Participation in such activities must be completely voluntary, and any student participant must be able to withdraw from participation for any (or no) reason without prejudice or penalty.
- (4) Clinical activities will be recorded in the student patient file. No other data collected in any such activities may be retained or stored.  
**Note:** See also [Recordkeeping Policy 2017](#), [Recordkeeping Manual](#), [Privacy Policy 2017](#).
- (5) Students' individual cultural and social circumstances should be respected and supported.
- (6) Students must not participate in such activities unless:
  - (a) the School Academic Leader (Education) has approved the activity through curriculum planning;
  - (b) the student has received an approved participant information statement; and
  - (c) the student has provided an approved written consent to the academic responsible for the activity prior to its commencement.
- (7) In order to obtain approval for an activity, the relevant course co-ordinator must submit to the School Academic Leader (Education) a written application which contains the following:
  - (a) a summary description of the activity, in non-technical language;
  - (b) the name and contact details of the academic responsible for the activity;
  - (c) where and when the activity will be conducted;
  - (d) an explanation of the reason for the activity, and the benefit to be obtained from using human subjects;
  - (e) a summary statement of the risks involved in the activity, in non-technical language;

- (f) details of steps to be taken to address or reduce the identified risks;
- (g) details of the supervision to be provided for the activity;
- (h) a copy of the proposed participant information statement; and
- (i) a copy of the proposed participant consent form.

**Note:** If the course involves students from multiple Schools, the relevant course co-ordinator and Academic Leader (Education) may be from another School. The individual responsible for approving the activity will be the Academic Leader (Education) responsible for the course of which it is part.

- (8) The School Academic Leader (Education) may approve the activity provided they are satisfied of:
  - (a) the educational value of the activity; and
  - (b) the appropriateness and adequacy of the proposed:
    - (i) risk management steps;
    - (ii) supervision arrangements;
    - (iii) participation information statement; and
    - (iv) participant consent form.
- (9) The School Academic Leader (Education) will indicate approval by signing and returning the proposal to the course co-ordinator.
- (10) The course co-ordinator is responsible for ensuring that the approval is retained and properly recorded, in accordance with the [University Recordkeeping Policy](#).
- (11) Schedule 1 is a model participant consent form.
- (12) Schedule 2 is a model participant information statement.

## NOTES

### Faculty of Medicine and Health - Sydney Dental School- Students as Subjects of Practical Classes Provisions 2020

Date adopted: 10 December 2014  
Date commenced: 1 January 2015  
Date amended: 16 December 2015 (commencing 23<sup>rd</sup> February 2016)  
1 January 2020

Signature

Approved by: Professor Christopher Peck, Dean.  
Professor Robyn Ward, Executive Dean

Related documents:

*University of Sydney (Student Discipline) Rule 2016*

*Student Charter 2020*

*Coursework Policy 2014*

*Privacy Policy 2017*

*Risk Management Policy 2013*

*Recordkeeping Policy 2017*

*Assessment Procedures 2011*

*Recordkeeping Manual*

## **AMENDMENT HISTORY**

**Provision    Amendment**

**Commencing**

## SCHEDULE ONE

### ELECTRONIC PARTICIPANT CONSENT FORM

<b>Course</b>		
<b>Year</b>		
<b>Unit of study</b>	Title:	Number:
<b>Topic of Practical Class</b>		

Dear Student,

Please read the Participant Information Statement and click the “mark reviewed” button to signify your agreement to points 1 to 5 below.

1. I have been provided with and have read the participant information statement for this class.
2. The procedures required for the practical class and the time involved have been explained to me, including details of any possible inconvenience, discomfort or side effect and their implications.
3. I agree to treat my fellow students professionally and with respect and sensitivity at all times.
4. I agree that I will not disclose or discuss any personal or health information about any fellow student revealed or discovered during the class, except where doing so is necessary for the purposes of my participation in the class or to report a health concern to the class coordinator.
5. I acknowledge that inappropriate behaviours may constitute a breach of the [Student Charter](#) and may be dealt with under the student misconduct provision of the [University of Sydney \(Student Discipline\) Rule 2016](#).

I consent to participation as a patient in the practical class listed below:

CLASS TITLE:           [INSERT DETAILS]

TIME & PLACE:        [INSERT DETAILS]

I do not consent to participation as a patient in the practical class listed below, and have discussed my preference not to participate with my Unit of Study Coordinator.

If you DO NOT consent to this learning activity, please contact your Unit of Study Coordinator prior to the learning session to discuss your options. You must either consent to participation as a patient OR discuss your preference not to participate with your Course Coordinator before classes commence.

*Please click the button “mark reviewed” to submit this form regardless of the consent option you have selected.*

schedule two

## PARTICIPANT INFORMATION STATEMENT

Name of learning session	Information
<b>Description of Learning session(s)</b>	
<b>Reason for the activity, and the benefit to be obtained from students acting as patients</b>	
<b>Where the activity(ies) will take place</b>	
<b>When the activity(ies) will take place: date &amp; time</b>	

Please read the statement below:

Students will be required to read the “Consent to Treatment” document and provide consent in order to participate as a patient in the exercise. Participation as a patient is voluntary, and students who decline to consent will not be penalised in any way. However, it is important that all students understand that participation is a valuable element of the learning process, and failure to consent to this activity may compromise your participation as a clinician.

Students who do not wish to participate as patients must discuss this with the Unit of Study Coordinator. All discussions will be handled sensitively and confidentially.

All clinical work, including examination and procedures carried out on other students, must be undertaken in a professional and respectful manner. Students must not disclose or discuss any information revealed or discovered about other students during these activities, except as needed for the purposes of participating in classes or, where necessary, to report a health concern to the class coordinator. Students must complete an electronic acknowledgement to confirm that they will adhere to these requirements.