

Learning Outcomes for GP ST Trainees in Care of the Elderly :

Learning outcomes	Professional competency areas	Suggested learning activities	Demonstrate achievement
13)care of people with mental illness			
Systematic approach to a patient with acute confusion. Good experience in diagnosing and treating multifactorial causes of delirium in the frail elderly.	Data gathering and interpretation. Clinical management, making diagnosis and decision making.	Ward based patients. CAM,MTS and MOCA tools.	Reflective practice-log entries.CBD and MiniCex.
Diagnosing dementia, liaison with old age psychiatry team where needed and good experience in discharge planning for the patients.	Clinical management , diagnosing and decision making. Regular board rounds and MDT for experience in discharge planning.	As above. Regular board rounds and MDT.	As above.
Some experience in judgement of capacity in a confused patient	Clinical management.	Ward based patients	CBD.
Procedure of consent in confused patients.	Clinical management.	Ward based patients.	Practical experience and discussing with Registrar or consultant if needed.
15.3)Drug and alcohol problems			
Alcohol withdrawal	Clinical management	Assessment of both alcohol overdose and acute alcohol withdrawal.	CBD,Mini Cex
Opiate toxicity	Clinical management	How to recognize opiate toxicity	CBD, Mini Cex

7)care of the acutely ill			
Escalation of care and resuscitation decisions	Holistic approach to patient care. Data gathering and interpretation.	Completing DNAR forms under supervision. Watch colleague breaking bad news.	Reflective practice, CBD.
Decisions regarding withdrawal of active treatment and communication with patient and family.	As above.	As above.	As above.
Recognising the dying patient.	Making diagnosis and decisions.	Certification of death on ward patients and filling in death certificate.	
End of life care and implementing the Liverpool care pathway.	Making diagnosis and decisions with senior support.	Filling in LCP under close senior supervision.	
15.8) Respiratory problem			
Examination, investigation and management of pneumonia,COPD,asthma, PE,anaphylaxis etc	Data gathering and interpretation, making diagnosis and clinical decisions.	Review of all new admissions to the ward daily and day to day patient review. Also regular clerking and managing patients while on-call. Performing diagnostic and therapeutic pleural tap under senior supervision.	Mini Cex, CBD,DOPS.
15.7) Neurological Problems			
Examination, investigation and management of	Data gathering and interpretation, making	Ward based patients or during on-calls.	Mini Cex, CBD, DOPS.

meningitis,seizures,collapse and sudden loss of consciousness, spinal cord compression etc.	diagnosis and clinical decisions.	Perform LP.	
Good experience in Parkinson's disease and associated movement disorders including their complications.	Data gathering, interpretation and clinical management.	Daily ward work. Sitting in specialist PD clinics.	Mini Cex, CBD.
How to approach feeding issues eg: peg feeding in PD patients or end stage dementia.	Indications and contraindications of artificial feeding. Discussion of above to patient and family members along with senior member of the team.	Daily ward work.	CBD.
Multifactorial falls assessment.	Data gathering and interpretation, examination, diagnosis and management.	Daily ward work and sitting in the specialist falls clinic.	Mini Cex, CBD.
15.1)Cardiovascular problem			
CVS examination, BP measurement. Perform an ECG.	Data gathering, interpretation, diagnosis and management.	Daily ward work or during on-call.	Mini Cex, CBD, DOPS.