

### Practising holistically and promoting health

This is about the ability of the doctor to operate in physical, psychological, socio-economic and cultural dimensions. The doctor is able to take into account patient's feelings and opinions. The doctor encourages health improvement, self-management, preventative medicine and shared care planning with patients and their carers

<b>Indicators of Potential Underperformance.</b> Not a level below NFD  Treats the disease, not the patient			
	Needs Further Development	Competent	Excellent
	Enquires into physical, psychological and social aspects of the patient's problem.	Demonstrates understanding of the patient in relation to their socio-economic and cultural background. The doctor uses this understanding to inform discussion and to generate practical suggestions for the management of the patient.	Accesses information about the patient's psycho-social history in a fluent and non-judgemental manner that puts the patient at ease.
	Recognises the impact of the problem on the patient.	Recognises the impact of the problem on the patient, their family and/or carers.	Recognises and shows understanding of the limits of the doctor's ability to intervene in the holistic care of the patient.
	Offers treatment and support for the physical, psychological and social aspects of the patient's problem.	Utilises appropriate support agencies (including primary health care team members) targeted to the needs of the patient and/or their family and carers.	Facilitates appropriate long-term support for patients, their families and carers that is realistic and avoids doctor dependence.
	Recognises the role of the GP in health promotion.	Demonstrates the skills and assertiveness to challenge unhelpful health beliefs or behaviours, whilst maintaining a continuing and productive relationship.	Makes effective use of tools in health promotion, such as decision aids, to improve health understanding.

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Data gathering and interpretation				
This is about the gathering, interpretation, and use of data for clinical judgement, including information gathered from the history, clinical records, examination and investigations.				
<b>Indicators of Potential Underperformance.</b> Not a level below NFD  Has an approach which is disorganised, chaotic, inflexible or inefficient  Does not use significant data as a prompt to gather further information  Does not look for red flags appropriately  Fails to identify normality Examination technique is poor  Fails to identify significant physical or psychological signs		Needs Further Development	Competent	Excellent
		Accumulates information from the patient that is relevant to their problem.  Uses existing information in the patient records.	Systematically gathers information, using questions appropriately targeted to the problem without affecting patient safety.  Understands the importance of, and makes appropriate use of, existing information about the problem and the patient's context.	Expertly identifies the nature and scope of enquiry needed to investigate the problem, or multiple problems, within a short time-frame.  Prioritises problems in a way that enhances patient satisfaction.
		Employs examinations and investigations that are in line with the patient's problems.	Chooses examinations and targets investigations appropriately and efficiently.	Uses a stepwise approach, basing further enquiries, examinations and tests on what is already known and what is later discovered.
		Identifies abnormal findings and results.	Understands the significance and implications of findings and results, and takes appropriate action.	

Making a diagnosis / decisions			
This is about a conscious, structured approach to making diagnoses and decision-making			
Indicators of Potential Underperformance. Not a level below NFD	Needs Further Development	Competent	Excellent
Is indecisive, illogical or incorrect in decision-making	Generates an adequate differential diagnosis based on the information available.	Makes diagnoses in a structured way using a problem-solving method.	Uses pattern recognition to identify diagnoses quickly, safely and reliably.
Fails to consider the serious possibilities		Uses an understanding of probability based on prevalence, incidence and natural history of illness to aid decision-making.	Remains aware of the limitations of pattern recognition and when to revert to an analytical approach.
Is dogmatic/closed to other ideas		Addresses problems that present early and/or in an undifferentiated way by integrating all the available information to help generate a differential diagnosis.	
Too frequently has late or missed diagnoses			
	Generates and tests appropriate hypotheses.	Revises hypotheses in the light of additional information.	No longer relies on rules or protocols but is able to use and justify discretionary judgement in situations of uncertainty or complexity, for example in patients with multiple problems.
	Makes decisions by applying rules, plans or protocols.	Thinks flexibly around problems generating functional solutions.	

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	<p>Is starting to develop independent skills in decision making and uses the support of others to confirm these are correct.</p>	<p>Has confidence in, and takes ownership of own decisions whilst being aware of their own limitations.</p> <p>Keeps an open mind and is able to adjust and revise decisions in the light of relevant new information.</p>	<p>Continues to reflect appropriately on difficult decisions. Develops mechanisms to be comfortable with these choices</p>
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Clinical management			
This is about the recognition and management of patients' problems			
Indicators of Potential Underperformance. Not a level below NFD	Needs Further Development	Competent	Excellent
<p>Asks for help inappropriately: either too much or too little</p> <p>Does not think ahead, safety net appropriately or follow-through adequately</p>	Uses appropriate management options	Varies management options responsively according to the circumstances, priorities and preferences of those involved.	Provides patient-centred management plans whilst taking account of local and national guidelines in a timely manner.
	Suggests possible interventions in all cases.	<p>Considers a "wait and see" approach where appropriate.</p> <p>Uses effective prioritisation of problems when the patient presents with multiple issues.</p>	Empowers the patient with confidence to manage problems independently together with knowledge of when to seek further help.
	Arranges follow up for patients	Suggests a variety of follow-up arrangements that are safe and appropriate, whilst also enhancing patient autonomy.	Able to challenge unrealistic patient expectations and consulting patterns with regard to follow up of current and future problems.
	Makes safe prescribing decisions, routinely checking on drug interactions and side effects.	<p>In addition to prescribing safely is aware of and applies local and national guidelines including drug and non-drug therapies.</p> <p>Maintains awareness of the legal framework for appropriate prescribing.</p>	<p>Regularly reviews all of the patient's medication in terms of evidence-based prescribing, cost-effectiveness and patient understanding.</p> <p>Has confidence in stopping or stepping down medication where this is appropriate.</p>

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	Refers safely, acting within the limits of their competence.	Refers appropriately, taking into account all available resources.	Identifies areas for improvement in referral processes and pathways and contributes to quality improvement.
	Recognises medical emergencies and responds to them safely.	Responds rapidly and skilfully to emergencies, with appropriate follow-up for the patient and their family. Ensures that care is co-ordinated both within the practice team and with other services.	Contributes to reflection on emergencies as significant events and how these can be used to improve patient care in the future.
	Ensures that continuity of care can be provided for the patient's problem, e.g. through adequate record keeping.	Provides comprehensive continuity of care, taking into account all of the patient's problems and their social situation.	Takes active steps within the organisation to improve continuity of care for the patients.

Managing medical complexity				
This is about aspects of care beyond the acute problem, including the management of co-morbidity, uncertainty, risk and health promotion				
Indicators of Potential Underperformance. Not a level below NFD	Needs Further Development	Competent	Excellent	
Inappropriately burdens the patient with uncertainty	Manages health problems separately, without necessarily considering the implications of co-morbidity.	Simultaneously manages the patient's health problems, both acute and chronic.	Accepts responsibility for coordinating the management of the patient's acute and chronic problems over time.	
Finds it difficult to suggest a way forward in unfamiliar circumstances				
Often gives up in complex or uncertain situations	Identifies and tolerates uncertainties in the consultation	Is able to manage uncertainty including that experienced by the patient.	Anticipates and employs a variety of strategies for managing uncertainty.	
Is easily discouraged or frustrated, for example by slow progress or lack of patient engagement				
	Attempts to prioritise management options based on an assessment of patient risk.	Communicates risk effectively to patients and involves them in its management to the appropriate degree.	Uses the patient's perception of risk to enhance the management plan.	
	Manages patients with multiple problems with reference to appropriate guidelines for the individual conditions.	Recognises the inevitable conflicts that arise when managing patients with multiple problems and takes steps to adjust care appropriately.	Comfortable moving beyond single condition guidelines and protocols in situations of multi-morbidity and polypharmacy, whilst maintaining the patient's trust	

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	Considers the impact of the patient's lifestyle on their health.	Consistently encourages improvement and rehabilitation and, where appropriate, recovery.  Encourages the patient to participate in appropriate health promotion and disease prevention strategies.	Coordinates a team based approach to health promotion in its widest sense.  Maintains a positive attitude to the patient's health even when the situation is very challenging.
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**Primary care management and IM&T** in CBD is covered by this:

Organisation, management and leadership				
This is about understanding how primary care is organised within the NHS, how teams are managed and the development of clinical leadership skills				
Indicators of Potential Underperformance. Not a level below NFD	Needs Further Development	Competent	Excellent	
<p>Consults with the computer rather than the patient</p> <p>Records show poor entries e.g. too short, too long, unfocused, failing to code properly or respond to prompts</p>	Demonstrates a basic understanding of the organisation of primary care and the use of clinical computer systems.	Uses the primary care organisational systems routinely and appropriately in patient care for acute problems, chronic disease and health promotion. This includes the use of computerised information management and technology (IM&T).	Uses and modifies organisational and IM&T systems to facilitate: <ul style="list-style-type: none"> <li>• Clinical care to individuals and communities</li> <li>• Clinical governance</li> </ul> Practice administration	
	Uses the patient record and on-line information during patient contacts, routinely recording each clinical contact in a timely manner following the record-keeping standards of the organisation.	Uses the computer during consultations whilst maintaining rapport with the patient to produce records that are succinct, comprehensive, appropriately coded and understandable.	Uses IM&T systems to improve patient care in the consultation, in supportive care planning and communication across all the health care professionals involved with the patient.	
	Personal organisational and time-management skills are sufficient that patients and colleagues are not inconvenienced or come to any harm.	Is consistently well organised with due consideration for colleagues as well as patients. Demonstrates effective: <ul style="list-style-type: none"> <li>• Time-management</li> <li>• Hand-over skills</li> <li>• Prioritisation</li> <li>• Delegation</li> </ul>	Manages own work effectively whilst maintaining awareness of other people's workload. Offers help sensitively but recognises own limitations.	
	Responds positively to change in the organisation.	Helps to support change in the organisation. This may include making constructive suggestions.	Actively facilitates change in the organisation. This will include the evaluation of the effectiveness of any changes implemented.	

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	Manages own workload responsibly.	Responds positively when services are under pressure in a responsible and considered way.	Willing to take a lead role in helping the organisation to respond to exceptional demand.
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### Working with colleagues and in teams

This is about working effectively with other professionals to ensure good patient care and includes the sharing of information with colleagues

Indicators of Potential Underperformance. Not a level below NFD	Needs Further Development	Competent	Excellent
Works in isolation Gives little support to team members	Shows awareness of working within a team rather than in isolation.	Is an effective team member, working flexibly with the various teams involved in day to day primary care.	Helps to coordinate a team-based approach to enhance patient care, with a positive and creative approach to team development.
Doesn't appreciate the value of the team			
Inappropriately leaves their work for others to pick up	Understands the different roles, skills and responsibilities that each member brings to a primary health care team.	Understands the context within which different team members are working, e.g. Health Visitors and their role in safeguarding.	
Feedback (formal or informal) from colleagues raises concerns			Shows awareness of the strengths and weaknesses of each team member and considers how this can be used to improve the effectiveness of a team.
	Respects other team members and their contribution but may not recognise the potential within the team.	Appreciates the increased efficacy in delivering patient care when teams work collaboratively rather than as individuals.	
	Responds to the communications from other team members in a timely and constructive manner.	Communicates proactively with team members so that patient care is enhanced using an appropriate mode of communication for the circumstances.	Encourages the contribution of others employing a range of skills including active listening. Assertive but doesn't insist on own views.

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	Understands the importance of integrating themselves into the various teams in which they participate.	Contributes positively to their various teams and reflects on how the teams work and members interact.	Shows some understanding of how group dynamics work and the theoretical work underpinning this. Has demonstrated this in a practical way, for example in chairing a meeting.
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Community orientation			
This is about the management of the health and social care of the practice population and local community			
Indicators of Potential Underperformance. Not a level below NFD	Needs Further Development	Competent	Excellent
Fails to take responsibility for using resources in line with local and national guidance	Demonstrates understanding of important characteristics of the local population, e.g. patient demography, ethnic minorities, socio-economic differences and disease prevalence, etc.	Demonstrates understanding of how the characteristics of the local population shapes the provision of care in the setting in which the doctor is working.	Takes an active part in helping to develop services in their workplace or locality that are relevant to the local population.
	Demonstrates understanding of the range of available services in their particular locality.	Shows how this understanding has informed referral practices they have utilised for their patients. This could include formal referral to a service or directing patients to other local resources.	Understands the local processes that are used to shape service delivery and how they can influence them, e.g. through Health Boards and CCGs.
	Understands limited resources within the local community, e.g. the availability of certain drugs, counselling, physiotherapy or child support services.	Demonstrates how they have adapted their own clinical practice to take into account the local resources, for example in referrals, cost-effective prescribing and following local protocols.	Reflects on the requirement to balance the needs of individual patients, the health needs of the local community and the available resources. Considers local and national protocols, e.g. SIGN or NICE guidelines.
	Takes steps to understand local resources in the community – e.g. school nurses, pharmacists, funeral directors, district nurses, local hospices, care homes, social services including child protection, patient participation groups, etc.	Demonstrates how local resources have been used to enhance patient care.	Develops and improves local services including collaborating with private and voluntary sectors, e.g. taking part in patient participation groups, improving the communication between practices and care homes, etc.

Maintaining an ethical approach			
This is about practising ethically with integrity and a respect for equality and diversity			
Indicators of Potential Underperformance. Not a level below NFD	Needs Further Development	Competent	Excellent
<p>Does not consider ethical principles, such as good vs harm, and use this to make balanced decisions</p> <p>Fails to show willingness to reflect on own attitudes</p>	Awareness of the professional codes of practice as described in the GMC document "Good Medical Practice".	<p>Demonstrates the application of "Good Medical Practice" in their own clinical practice.</p> <p>Reflects on how their values, attitudes and ethics might influence professional behaviour.</p>	<p>Anticipates the potential for conflicts of interest and takes appropriate action to avoid these.</p>
	Understands the need to treat everyone with respect for their beliefs, preferences, dignity and rights.	Demonstrates equality, fairness and respect in their day-to-day practice.	<p>Anticipates situations where indirect discrimination might occur.</p> <p>Awareness of current legislation as it applies to clinical work and practice management.</p>
	Recognises that people are different and does not discriminate against them because of those differences.	Values and appreciates different cultures and personal attributes, both in patients and colleagues.	Actively supports diversity and harnesses differences between people for the benefit of the organisation and patients alike.
	Understands that "Good Medical Practice" requires reference to ethical principles.	Reflects on and discusses moral dilemmas encountered in the course of their work.	Able to analyse ethical issues with reference to specific ethical theory.



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Fitness to practise			
This is about professionalism and the actions expected to protect people from harm. This includes the awareness of when an individual's performance, conduct or health, or that of others, might put patients, themselves or their colleagues at risk			
Indicators of Potential Underperformance.	Needs Further Development	Competent	Excellent
Fails to respect the requirements of the organisation e.g. meeting deadlines, producing documentation, observing contractual obligations	Understands the GMC document, "Duties of a Doctor".	Demonstrates the accepted codes of practice in order to promote patient safety and effective team-working.	Encourages scrutiny of professional behaviour, is open to feedback and demonstrates a willingness to change.
Has repeated unexplained or unplanned absences from professional commitments	Attends to their professional duties.	Achieves a balance between their professional and personal demands that meets their work commitments and maintains their health.	Anticipates situations that might damage their work-life balance and seeks to minimise any adverse effects on themselves or their patients.
Prioritises his/her own interests above those of the patient			
Fails to cope adequately with pressure e.g. dealing with stress or managing time	Awareness that physical or mental illness, or personal habits, might interfere with the competent delivery of patient care.	Takes effective steps to address any personal health issue or habit that is impacting on their performance as a doctor.  Demonstrates insight into any personal health issues.	Takes a proactive approach to promote personal health.  Encourages an organisational culture in which the health of its members is valued and supported.
Is the subject of multiple complaints			
Fails to respect the requirements of the organisation e.g. meeting deadlines, producing documentation, observing contractual obligations			
Has repeated unexplained or unplanned absences from professional commitments	Identifies and notifies an appropriate person when their own or a colleague's performance, conduct or health might be putting others at risk.	Reacts promptly, discreetly and impartially when there are concerns about self or colleagues.  Takes advice from appropriate people and, if necessary, engages in a referral procedure.	Provides positive support to colleagues who have made mistakes or whose performance gives cause for concern.
Prioritises his/her own interests			

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<p>above those of the patient</p> <p>Fails to cope adequately with pressure e.g. dealing with stress or managing time</p> <p>Is the subject of multiple complaints</p>	<p>Responds to complaints or performance issues appropriately.</p>	<p>Uses mechanisms to reflect on and learn from complaints or performance issues in order to improve patient care.</p>	<p>Actively seeks to anticipate and rectify where systems and practice may require improvement in order to improve patient care.</p>
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