**ACCS CT1**

**Common Competence Rating**

|  |  |  |
| --- | --- | --- |
| **Common Competence & Level Descriptors** | **Trainee Rating** | **ES Rating** |
| **History Taking** |  |  |
| 1 | Obtains, records and presents accurate clinical history relevant to the clinical presentation Elicits most important positive and negative indicators of diagnosis Starts to ignore irrelevant information  |
| 2 | Demonstrates ability to obtain relevant focussed clinical history in the context of limited time e.g. outpatients, ward referral Demonstrates ability to target history to discriminate between likely clinical diagnoses Records information in most informative fashion  |
| 3 | Demonstrates ability to rapidly obtain relevant history in context of severely ill patients Demonstrates ability to obtain history in difficult circumstances e.g. from angry or distressed patient / relatives Demonstrates ability to keep interview focussed on most important clinical issues  |
| 4 | Able to quickly focus questioning to establish working diagnosis and relate to relevant examination, investigation and management plan in most acute and common chronic conditions in almost any environment  |
| **Clinical Examination** |  |  |
| 1 | Performs, accurately records and describes findings from basic physical examination Elicits most important physical signs Uses and interprets findings adjuncts to basic examination e.g. internal examination, blood pressure measurement, pulse oximetry, peak flow  |
| 2 | Performs focussed clinical examination directed to presenting complaint e.g. cardio-respiratory, abdominal pain Actively seeks and elicits relevant positive and negative signs Uses and interprets findings adjuncts to basic examination e.g. electrocardiography, spirometry, ankle brachial pressure index, fundoscopy  |
| 3 | Performs and interprets relevance advanced focussed clinical examination e.g. assessment of less common joints, neurological examination Elicits subtle findings Uses and interprets findings of advanced adjuncts to basic examination e.g. sigmoidoscopy, FAST ultrasound, echocardiography  |
| 4 | Rapidly and accurately performs and interprets focussed clinical examination in challenging circumstances e.g. acute medical or surgical emergency  |
| **Therapeutics & safe prescribing** |  |  |
| 1 | Understands the importance of patient compliance with prescribed medication Outlines the adverse effects of commonly prescribed medicinesUses reference works to ensure accurate, precise prescribing  |
| 2 | Takes advice on the most appropriate medicine in all but the most common situations Makes sure an accurate record of prescribed medication is transmitted promptly to relevant others involved in an individual’s care Knows indications for commonly used drugs that require monitoring to avoid adverse effects Modifies patient’s prescriptions to ensure the most appropriate medicines are used for any specific condition Maximises patient compliance by minimising the number of medicines required that is compatible with optimal patient care Maximises patient compliance by providing full explanations of the need for the medicines prescribed Is aware of the precise indications, dosages, adverse effects and modes of administration of the drugs used commonly within their specialty Uses databases and other reference works to ensure knowledge of new therapies and adverse effects is up to date Knows how to report adverse effects and take part in this mechanism  |
| 3/4 | Is aware of the regulatory bodies relevant to prescribed medicines both locally and nationally Ensures that resources are used in the most effective way for patient benefit  |
| **Time management & decision making** |  |  |
| 1 | Recognises the need to identify work and compiles a list of tasks Works systematically through tasks with little attempt to prioritise Needs direction to identify most important tasksSometimes slow to perform important work Does not use other members of the clinical team Finds high workload very stressful  |
| 2 | Organises work appropriately but does not always respond to or anticipate when priorities should be changed Starting to recognise which tasks are most urgentStarting to utilise other members of the clinical team but not yet able to organise their work Requires some direction to ensure that all tasks completed in a timely fashion  |
| 3 | Recognises the most important tasks and responds appropriately Anticipates when priorities should be changedStarting to lead and direct the clinical team in effective fashion Supports others who are falling behind Requires minimal organisational supervision  |
| 4 | Automatically prioritises and manages workload in most effective fashion Communicates and delegates rapidly and clearlyAutomatically responsible for organising the clinical teamCalm leadership in stressful situations  |
| **Decision making & clinical reasoning** |  |  |
| 1 | In a straightforward clinical case:Develops a provisional diagnosis and a differential diagnosis on the basis of the clinical evidence Institutes an appropriate investigative planInstitutes an appropriate therapeutic planSeeks appropriate support from othersTakes account of the patient’s wishes  |
| 2 | In a difficult clinical case:Develops a provisional diagnosis and a differential diagnosis on the basis of the clinical evidence Institutes an appropriate investigative planInstitutes an appropriate therapeutic planSeeks appropriate support from othersTakes account of the patient’s wishes  |
| 3 | In a complex, non-emergency case:Develops a provisional diagnosis and a differential diagnosis on the basis of the clinical evidence Institutes an appropriate investigative planInstitutes an appropriate therapeutic plan Seeks appropriate support from others Takes account of the patient’s wishes  |
| 4 | In a complex, non-emergency case:Develops a provisional diagnosis and a differential diagnosis on the basis of the clinical evidence Institutes an appropriate investigative planInstitutes an appropriate therapeutic planSeeks appropriate support from othersTakes account of the patient’s wishes and records them accurately and succinctly  |
| **The patient as central focus of care** |  |  |
| 1 | Responds honestly and promptly to patient questions but knows when to refer for senior help Recognises the need for disparate approaches to individual patients  |
| 2 | Recognises more complex situations of communication, accommodates disparate needs and develops strategies to cope  |
| 3 | Deals rapidly with more complex situations, promotes patients self care and ensures all opportunities are outlined  |
| 4 | Is able to deal with all cases to outline patient self care and to promote the provision of this when it is not readily available  |
| **Prioritisation of patient safety in clinical practice** |  |  |
| 1 | Discusses risks of treatments with patients and is able to help patients make decisions about their treatment Does not hurry patients into decisionsPromotes patients safety to more junior colleagues Always ensures the safe use of equipment. Follows guidelines unless there is a clear reason for doing otherwise Acts promptly when a patient’s condition deterioratesRecognises untoward or significant events and always reports these Leads discussion of causes of clinical incidents with staff and enables them to reflect on the causes Able to undertake a root cause analysis  |
| 2 | Demonstrates ability to lead team discussion on risk assessment and risk management and to work with the team to make organisational changes that will reduce risk and improve safety  |
| 3 | Able to assess the risks across the system of care and to work with colleagues from different department or sectors to ensure safety across the health care system  |
| 4 | Shows support for junior colleagues who are involved in untoward eventsIs fastidious about following safety protocols and encourages junior colleagues to do the same  |
| **Team working & patient safety** |  |  |
| 1 | Works well within the multidisciplinary team and recognises when assistance is required from the relevant team member Demonstrates awareness of own contribution to patient safety within a team and is able to outline the roles of other team members Keeps records up-to-date and legible and relevant to the safe progress of the patient Hands over care in a precise, timely and effective manner  |
| 2 | Demonstrates ability to discuss problems within a team to senior colleagues. Provides an analysis and plan for change Demonstrates ability to work with the virtual team to develop the ability to work well in a variety of different teams – for example the ward team and the infection control team - and to contribute to discussion on the team’s role in patient safety To develop the leadership skills necessary to lead teams so that they are more effective and able to deliver better safer care  |
| 3 | Leads multidisciplinary team meetings but promotes contribution from all team members Recognises need for optimal team dynamics and promotes conflict resolution Demonstrates ability to convey to patients after a handover of care that although there is a different team, the care is continuous  |
| 4 | Leads multi-disciplinary team meetings allowing all voices to be heard and considered. Fosters an atmosphere of collaboration Demonstrates ability to work with the virtual team Ensures that team functioning is maintained at all times Promotes rapid conflict resolution  |
| **Principles of quality & safety improvement** |  |  |
| 1 | Understands that clinical governance is the over-arching framework that unites a range of quality improvement activities. This safeguards high standards of care and facilitates the development of improved clinical services Maintains personal portfolio  |
| 2 | Able to define key elements of clinical governance Engages in audit  |
| 3 | Demonstrates personal and service performance Designs audit protocols and completes audit loop  |
| 4 | Leads in review of patient safety issues Implements change to improve serviceEngages and guides others to embrace governance  |
| **Infection control** |  |  |
| 1 | Always follows local infection control protocols. Including washing hands before and after seeing all patients Is able to explain infection control protocols to students and to patients and their relatives. Always defers to the nursing team about matters of ward management Aware of infections of concern – including MRSA and C. difficile Aware of the risks of nosocomial infections Understands the links between antibiotic prescription and the development of nosocomial infections Always discusses antibiotic use with a more senior colleague  |
| 2 | Demonstrate ability to perform simple clinical procedures utilising aseptic technique Manages simple common infections in patients using first-line treatments. Communicating effectively to the patient the need for treatment and any prevention messages to prevent re- infection or spread Liaise with diagnostic departments in relation to appropriate investigations and tests  |
| 3 | Demonstrate an ability to perform more complex clinical procedures whilst maintaining aseptic technique throughout Identify potential for infection amongst high risk patients obtaining appropriate investigations and considering the use of second line therapies Communicate effectively to patients and their relatives with regard to the infection, the need for treatment and any associated risks of therapy Work effectively with diagnostic departments in relation to identifying appropriate investigations and monitoring therapy Working in collaboration with external agencies in relation to reporting common notifiable diseases, and collaborating over any appropriate investigation or management  |
| 4 | Demonstrates an ability to perform most complex clinical procedures whilst maintaining full aseptic precautions, including those procedures which require multiple staff in order to perform the procedure satisfactorily Identify the possibility of unusual and uncommon infections and the potential for atypical presentation of more frequent infections. Managing these cases effectively with potential use of tertiary treatments being undertaken in collaboration with infection control specialists Work in collaboration with diagnostic departments to investigate and manage the most complex types of infection including those potentially requiring isolation facilities Work in collaboration with external agencies to manage the potential for infection control within the wider community including communicating effectively with the general public and liaising with regional and national bodies where appropriate  |
| **Managing long term conditions & promoting patient self-care** |  |  |
| 1 | Describes relevant long term conditionsUnderstands the meaning of quality of lifeIs aware of the need for promotion of patient self care Helps the patient with an understanding of their condition and how they can promote self management  |
| 2 | Demonstrates awareness of management of relevant long term conditions Is aware of the tools and devices that can be used in long term conditions Is aware of external agencies that can improve patient careTeaches the patient and within the team to promote excellent patient care  |
| 3 | Develops management plans in partnership with the patient that are pertinent to the patients long term condition Can use relevant tools and devices in improving patient care Engages with relevant external agencies to promote patient care  |
| 4 | Provides leadership within the multidisciplinary team that is responsible for management of patients with long term conditions Helps the patient networks develop and strengthen  |
| **Relationships with patients and communication within a consultation** |  |  |
| 1 | Conducts simple interviews with due empathy and sensitivity and writes accurate records thereof  |
| 2 | Conducts interviews on complex concepts satisfactorily, confirming that accurate two-way communication has occurred  |
| 3 | Handles communication difficulties appropriately, involving others as necessary; establishes excellent rapport  |
| 4 | Shows mastery of patient communication in all situations, anticipating and managing any difficulties which may occur  |
| **Breaking bad news** |  |  |
| 1 | Recognises when bad news must be imparted Recognises the need to develop specific skills Requires guidance to deal with most cases  |
| 2 | Able to break bad news in planned settings Prepares well for interviewPrepares patient to receive bad news Responsive to patient reactions  |
| 3 | Able to break bad news in unexpected and planned settingsClear structure to interviewEstablishes what patient wants to know and ensures understanding Able to conclude interview  |
| 4 | Skilfully delivers bad news in any circumstance including adverse events Arranges follow up as appropriateAble to teach others how to break bad news  |
| **Complaints & medical error** |  |  |
| 1 | Defines the local complaints procedure Recognises need for honesty in management of complaints Responds promptly to concerns that have been raised Understands the importance of an effective apology Learns from errors  |
| 2 | Manages conflict without confrontationRecognises and responds to the difference between system failure and individual error  |
| 3 | Recognises and manages the effects of any complaint within members of the team  |
| 4 | Provides timely accurate written responses to complaints when required Provides leadership in the management of complaints  |
| **Communication with colleagues & cooperation** |  |  |
| 1 | Accepts his/her role in the healthcare team and communicates appropriately with all relevant members thereof  |
| 2 | Fully recognises the role of, and communicates appropriately with, all relevant potential team members (individual and corporate)  |
| 3 | Able to predict and manage conflict between members of the healthcare team  |
| 4 | Able to take a leadership role as appropriate, fully respecting the skills, responsibilities and viewpoints of all team members  |
| **Health promotion & public health** |  |  |
| 1 | Discuss with patients and others factors which could influence their personal health Maintains own health is aware of own responsibility as a doctor for promoting healthy approach to life  |
| 2 | Communicate to an individual, information about the factors which influence their personal health Support an individual in a simple health promotion activity (e.g. smoking cessation)  |
| 3 | Communicate to an individual and their relatives, information about the factors which influence their personal health Support small groups in a simple health promotion activity (e.g. smoking cessation) Provide information to an individual about a screening programme and offer information about its risks and benefits  |
| 4 | Discuss with small groups the factors that have an influence on their health and describe initiatives they can undertake to address these Provide information to an individual about a screening programme offering specific guidance in relation to their personal health and circumstances concerning the factors that would affect the risks and benefits of screening to them as an individual Engage with local or regional initiatives to improve individual health and reduce inequalities in health between communities  |
| **Principles of medical ethics & confidentiality** |  |  |
| 1 | Use and share information with the highest regard for confidentiality adhering to the Data Protection Act and Freedom of Information Act in addition to guidance given by the GMC Familiarity with the principles of the Mental Capacity ActParticipate in decisions about resuscitation status and withholding or withdrawing treatment  |
| 2 | Counsel patients on the need for information distribution within members of the immediate healthcare team and seek patients’ consent for disclosure of identifiable information  |
| 3 | Define the role of the Caldicott Guardian within an institution, and outline the process of attaining Caldicott approval for audit or research  |
| 4 | Able to assume a full role in making and implementing decisions about resuscitation status and withholding or withdrawing treatment  |
| **Valid consent** |  |  |
| 1 | Obtains consent for straightforward treatments with appropriate regard for patient's autonomy  |
| 2 | Able to explain complex treatments meaningfully in layman's terms and thereby to obtain appropriate consent  |
| 3 | Obtains consent in "grey-area" situations where the best option for the patient is not clear  |
| 4 | Obtains consent in all situations even when there are problems of communication and capacity  |
| **Legal framework for practice** |  |  |
| 1 | Demonstrates knowledge of the legal framework associated with medical qualification and medical practice and the responsibilities of registration with the GMC. Demonstrates knowledge of the limits to professional capabilities - particularly those of pre- registration doctors.  |
| 2 | Identify with Senior Team Members cases which should be reported to external bodies and where appropriate and initiate that report. Identify with Senior Members of the Clinical Team situations where you feel consideration of medical legal matters may be of benefit. Be aware of local Hospital procedures around substance abuse and clinical malpractice.  |
| 3 | Work with external strategy bodies around cases that should be reported to them. Collaborating with them on complex cases preparing brief statements and reports as required. Actively promote discussion on medical legal aspects of cases within the clinical environment. Participate in decision making with regard to resuscitation decisions and around decisions related to driving discussing the issues openly but sensitively with patients and relatives  |
| 4 | Work with external strategy bodies around cases that should be reported to them. Collaborating with them on complex cases providing full medical legal statements as required and present material in Court where necessary Lead the clinical team in ensuring that medical legal factors are considered openly and consistently wherever appropriate in the care of a patient. Ensuring that patients and relatives are involved openly in all such decisions.  |
| **Ethical research** |  |  |
| 1 | Defines ethical research and demonstrates awareness of GMC guidelines Differentiates audit and researchKnows how to use databases  |
| 2 | Demonstrates ability to write a scientific paper Demonstrates critical appraisal skills  |
| 3 | Demonstrates ability to apply for appropriate ethical research approval Demonstrates knowledge of research funding sourcesDemonstrates good presentation and writing skills  |
| 4 | Provides leadership in researchPromotes research activityFormulates and develops research pathways  |
| **Evidence & guidelines** |  |  |
| 1 | Participate in departmental or other local journal club Critically review an article to identify the level of evidence  |
| 2 | Lead in a departmental or other local journal clubUndertake a literature review in relation to a clinical problem or topic  |
| 3 | Produce a review article on a clinical topic, having reviewed and appraised the relevant literature  |
| 4 | Perform a systematic review of the medical literatureContribute to the development of local or national clinical guidelines  |
| **Audit** |  |  |
| 1 | Attendance at departmental audit meetings Contribute data to a local or national audit  |
| 2 | Identify a problem and develop standards for a local audit  |
| 3 | Compare the results of an audit with criteria or standards to reach conclusions Use the findings of an audit to develop and implement changeOrganise or lead a departmental audit meeting  |
| 4 | Lead a complete clinical audit cycle including development of conclusions, implementation of findings and re-audit to assess the effectiveness of the changes Become audit lead for an institution or organisation  |
| **Teaching & training** |  |  |
| 1 | Develops basic PowerPoint presentation to support educational activity Delivers small group teaching to medical students, nurses or colleagues Able to seek and interpret simple feedback following teaching  |
| 2 | Able to supervise a medical student, nurse or colleague through a procedureAble to perform a workplace based assessment including being able to give effective feedback  |
| 3 | Able to devise a variety of different assessments (e.g. multiple choice questions, work place based assessments) Able to appraise a medical student, nurse or colleagueAble to act as a mentor to a medical student, nurses or colleague  |
| 4 | Able to plan, develop and deliver educational activities with clear objectives and outcomes Able to plan, develop and deliver an assessment programme to support educational activities  |
| **Personal behaviour** |  |  |
| 1 | Works work well within the context of multi-professional teams.Listens well to others and takes other viewpoints into consideration.Supports patients and relatives at times of difficulty e.g. after receiving difficult news. Is polite and calm when called or asked to help  |
| 2 | Responds to criticism positively and seeks to understand its origins and works to improve. Praises staff when they have done well and where there are failings in delivery of care provides constructive feedback. To wherever possible involve patients in decision making  |
| 3 | Recognises when other staff are under stress and not performing as expected and provides appropriate support for them. Takes action necessary to ensure that patient safety is not compromised  |
| 4 | Helps patients who show anger or aggression with staff or with their care or situation and works with them to find an approach to manage their problem  |
| 5 | Is able to engender trust so that staff feel confident about sharing difficult problems and feel able to pointing out deficiencies in care at an early stage  |
| **Management & NHS structure** |  |  |
| 1 | Describes in outline the roles of primary care, including general practice, public health, community, mental health, secondary and tertiary care services within healthcare. Describes the roles of members of the clinical team and the relationships between those roles. Participates fully in clinical coding arrangements and other relevant local activities.  |
| 2 | Can describe in outline the roles of primary care, community and secondary care services within healthcare. Can describe the roles of members of the clinical team and the relationships between those roles. Participates fully in clinical coding arrangements and other relevant local activities.  |
| 3 | Can describe the relationship between PCTs/Health Boards, General Practice and Trusts including relationships with local authorities and social services. Participate in team and clinical directorate meetings including discussions around service development. Discuss the most recent guidance from the relevant health regulatory agencies in relation to the specialty.  |
| 4 | Describe the local structure for health services and how they relate to regional or devolved administration structures. Be able to discuss funding allocation processes from central government in outline and how that might impact on the local health organisation. Participate fully in clinical directorate meetings and other appropriate local management structures in planning and delivering healthcare within the specialty. Participate as appropriate in staff recruitment processes in order to deliver an effective clinical team. Within the Directorate collaborate with other stake holders to ensure that their needs and views are considered in managing services.  |

Signed: ……….…………….…….. Trainee: …………………….………….….………..

Date: …../…../……….

Signed: ……….…………….…….. Educational Supervisor: ……………………..

Date: …../…../……….