**Common Competencies for ACCS Level descriptors (Summary)**

A full description of all specific Knowledge, Skills and Behaviours relating to each Common Competency can be found in the ACCS Curriculum May 2010 pages 26-72

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| 1. 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 |

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| 2 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 |

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| 3) Therapeutics and safe prescribing | |
| 1 | Understands the importance of patient compliance with prescribed medication  Outlines the adverse effects of commonly prescribed medicines  Uses 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 |

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| 4) Time management and 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 tasks  Sometimes 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 urgent  Starting 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 changed  Starting 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 clearly  Automatically responsible for organising the clinical team  Calm leadership in stressful situations |

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| 5)Decision making and 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 plan  Institutes an appropriate therapeutic plan  Seeks appropriate support from others  Takes 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 plan  Institutes an appropriate therapeutic plan  Seeks appropriate support from others  Takes 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 plan  Institutes 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 plan  Institutes an appropriate therapeutic plan  Seeks appropriate support from others  Takes account of the patient’s wishes and records them accurately and succinctly |

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| 6) 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 |

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| 7) Prioritisation of patient safety in clinical practice | |
|  | Discusses risks of treatments with patients and is able to help patients make decisions about their treatment  Does not hurry patients into decisions  Promotes 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 deteriorates  Recognises 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 events  Is fastidious about following safety protocols and encourages junior colleagues to do the same |

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| 8) Team working and 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 |

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| 9) Principles of quality and 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 service  Engages and guides others to embrace governance |

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| 10) 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 |

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| 11) Managing long term conditions and promoting patient self-care | |
| 1 | Describes relevant long term conditions  Understands the meaning of quality of life  Is 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 care  Teaches 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 |

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| 12) 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 |

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| 13) 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 interview  Prepares patient to receive bad news  Responsive to patient reactions |
| 3 | Able to break bad news in unexpected and planned settings  Clear structure to interview  Establishes 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 appropriate  Able to teach others how to break bad news |
| 14) Complaints and 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 confrontation  Recognises 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 |

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| 15) Communication with colleagues and 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 |

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| 16) Health promotion and 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 |

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| 17) Principles of medical ethics and 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 Act  Participate 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 |

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| 18) 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 |

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| 19) 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. |

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| 20) Ethical research | |
| 1 | Defines ethical research and demonstrates awareness of GMC guidelines  Differentiates audit and research  Knows 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 sources  Demonstrates good presentation and writing skills |
| 4 | Provides leadership in research  Promotes research activity  Formulates and develops research pathways |

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| 21) Evidence and 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 club  Undertake 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 literature  Contribute to the development of local or national clinical guidelines |

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| 22) 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 change  Organise 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 |

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| 23) Teaching and 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 procedure  Able 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 colleague  Able 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 |

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| 24) 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 |

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| 25) Management and 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. |