

## Progression point descriptors – Fitness to practise

Fitness to practise				
Professionalism and protecting self and others from harm, including awareness of when an individual's performance, conduct or health, or that of others, might put patients, themselves or their colleagues at risk.				
GPC: professional values MRCGP: WPBA: CATs, COTs, MiniCEX, QIP, Leadership MSF, PSQ, CSR				
Learning outcomes	Indicators of potential underperformance	Needs further development (expected by end of ST2)	Competent for licensing (required by CCT)	Excellent
Demonstrating the attitudes and behaviours expected of a good doctor	<p>Does not comply with accepted codes of professional practice.</p> <p>Fails to respect the requirements of organisations, such as meeting deadlines, producing documentation and observing contractual obligations.</p> <p>Does not recognise limits of own ability and experience.</p>	<p>Understands and follows the GMC's 'duties of a doctor' guidance<sup>10</sup>.</p> <p>Complies with accepted codes of professional practice, showing awareness of their own values and attitudes.</p> <p>Applies relevant ethical, financial, legal and regulatory frameworks within the care provided.</p> <p>Evaluates their clinical care and is able to justify actions to patients, colleagues and professional bodies.</p>	<p>Demonstrates the accepted codes of practice to promote patient safety and effective team working.</p> <p>Reacts promptly, respectfully and impartially when there are concerns about self or colleagues.</p> <p>Works within the limits of their own ability and expertise as a GP.</p> <p>Adopts a self-directed approach to learning, engaging with assessment.</p> <p>Encourages scrutiny of professional behaviour, is open to feedback and</p>	Encourages an organisational culture in which the health and wellbeing of all members is valued and supported, especially in the workplace.

<sup>10</sup> As found in "Good medical practice" <https://www.gmc-uk.org/professional-standards/the-professional-standards/good-medical-practice/the-duties-of-medical-professionals-registered-with-the-gmc>

			demonstrates a willingness to change.	
Managing the factors that influence your performance	<p>Is the subject of multiple complaints.</p> <p>Repeatedly fails to cope effectively with the demands of the job, such as dealing with stress or managing time.</p>	<p>Demonstrates insight into any personal physical or mental illness or habits that might interfere with the competent delivery of patient care.</p> <p>Identifies and notifies an appropriate person when their own or a colleague's performance, conduct or health might be putting others at risk.</p> <p>Responds to complaints or performance issues appropriately.</p>	<p>Takes advice from appropriate people and, if necessary, engages in a referral procedure or remediation.</p> <p>Uses mechanisms to reflect on and learn from complaints or performance issues to improve patient care.</p> <p>Takes effective steps to address any personal health issue or behaviour that is impacting on their performance as a doctor.</p>	<p>Anticipates system or practice areas requiring improvement, and proactively rectifies them to improve patient care.</p> <p>Anticipates situations that might impact on their work-life balance and seeks to minimise any adverse effects on themselves or their patients.</p> <p>Fosters a supportive environment where colleagues are able to share difficulties and reflect on their performance.</p>
Promoting health and wellbeing in yourself and colleagues	Has repeated unexplained or unplanned absence from professional commitments.	<p>Monitors performance and demonstrates insight into their personal needs.</p> <p>Demonstrates awareness of the</p>	Achieves a balance between professional and personal demands, enabling work commitments to be met and maintaining their own health.	Promotes the wellbeing and health of all colleagues and staff, both individually and collectively.

		needs of colleagues.	Adopts a proactive approach in ensuring their personal health and wellbeing.	
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## Progression point descriptors – An ethical approach

An ethical approach				
Practising ethically with integrity and a respect for equality and diversity.				
GPC: professional values MRCGP: SCA; WPBA: CATs, COTs, MiniCEX, QIP, Leadership MSF, PSQ, CSR				
Learning outcomes	Indicators of potential underperformance	Needs further development (expected by end of ST2)	Competent for licensing (required by CCT)	Excellent
Treating others fairly and with respect, acting without discrimination or prejudice	<p>Does not consider ethical principles, such as benefits versus harms, or use ethics to make balanced decisions.</p> <p>Shows prejudice in working with particular types of people.</p>	<p>Shows awareness of the professional codes of practice as described by the GMC in <i>Good medical practice</i>.</p> <p>Demonstrates a non-judgemental approach in dealing with patients, carers and colleagues, respecting the rights and personal dignity of others.</p> <p>Contributes to an environment where fairness, respect and participation are valued,</p> <p>Recognises and takes action to address prejudice, oppression and unfair discrimination in themselves and others within teams.</p>	<p>Applies <i>Good medical practice</i> in their own clinical practice.</p> <p>Reflects on how their values, attitudes and ethics might influence professional behaviour.</p> <p>Identifies and discusses ethical conflicts arising within their roles as a clinician, patient advocate and leader in the health service.</p> <p>Actively promotes equality of opportunity for patients to access healthcare, ensuring fairness and respect in their</p>	<p>Anticipates the potential for conflicts of interest and takes appropriate action to avoid these.</p> <p>Anticipates and takes appropriate action in situations where discrimination or bullying might occur.</p>



			day-to-day practice.	
Providing care with compassion and kindness	Demonstrates a judgemental approach in dealing with patients, carers or colleagues, not respecting the rights or personal dignity of others.	<p>Takes steps to enhance patient understanding when there are communication or cultural barriers that may be limiting a patient's ability to make an informed decision.</p> <p>Records, shares and receives information in an open, honest, sensitive and unbiased manner.</p>	<p>Responds to complaints in a timely and appropriate manner, recognising their duty of candour.</p> <p>Relates to people as individuals and challenges attitudes that dehumanise or stereotype others.</p>	Recognises that their duty of care for their patients extends beyond the immediate team and spans the NHS and other services.
Promoting an environment of inclusivity, safety, cultural humility and freedom to speak up	<p>Demonstrates cultural insensitivity.</p> <p>Does not demonstrate changed behaviour after receiving feedback on attitudinal issues.</p> <p>Is rigid and inappropriately vocal in attitudes.</p> <p>Stops others speaking up about issues that should be questioned.</p>	<p>Provides culturally sensitive healthcare, conscious of their own perspectives towards others.</p> <p>Considers new cultural ideas and their implications for health provision and behaviours.</p>	Actively promotes a culture of inclusion where everyone is welcome in general practice, regardless of background or any protected characteristics.	Actively supports and harnesses differences between people for the benefit of the organisation and patients alike.

## Progression point descriptors – Communicating and consulting

Communicating and consulting				
Communicating with patients, the use of recognised consultation techniques, establishing and maintaining patient partnerships, managing challenging consultations, third-party consulting, the use of interpreters and consulting modalities across the range of in-person and remote				
GPC: professional skills MRCGP: SCA; WPBA: CATs, COTs, MiniCEX, MSF, PSQ, CSR				
Learning outcomes	Indicators of potential underperformance	Needs further development (expected by end of ST2)	Competent for licensing (required by CCT)	Excellent
Establishing an effective partnership with the patient through a range of in-person and remote consulting modalities	<p>Does not establish rapport with the patient.</p> <p>Misses or ignores significant cues.</p> <p>Is unable to consult within timescales that are appropriate to the stage of training.</p>	<p>Consults to an acceptable standard but lacks focus and requires longer consultation times.</p> <p>Adopts a basic personalised approach to care.</p> <p>Communicates in a way that seeks to establish a shared understanding and patient involvement.</p> <p>Adapts communication to the mode of consultation.</p> <p>Uses knowledge of a range of consultation</p>	<p>Uses the most appropriate mode of consultation, including in-person and remote, taking account of individual patient needs, preferences and safety.</p> <p>Explores the patient's understanding of what has taken place.</p> <p>Uses the patient's understanding to help improve the explanation offered.</p> <p>Works in partnership with the patient, agreeing a shared plan that respects the patient's priorities and</p>	<p>Uses advanced consultation skills, such as confrontation or catharsis, to achieve better patient outcomes.</p> <p>Consults effectively in a focused manner, moving beyond the essential to take a holistic view of the patient's needs within the time frame of a normal consultation.</p>

		models or theories.	<p>preference for involvement.</p> <p>Consults in an organised and structured way, achieving the main tasks of the consultation in a timely manner.</p>	
Managing the additional challenge of consultations with patients who have particular communication needs or who have different languages, cultures, beliefs and educational backgrounds to your own	<p>Makes inappropriate assumptions about the patient's agenda.</p> <p>Has a blinkered approach and is unable to adapt the consultation, despite cues or new information.</p> <p>Uses stock phrases or inappropriate medical jargon rather than tailoring the language to the patient's needs and context.</p>	<p>Uses language and explanations that are technically correct but not consistently tailored to the needs and characteristics of the patient.</p> <p>Understands the need for effective consulting and developing an awareness of the wide range of consultation models that might be used.</p> <p>Takes steps to address barriers to communication, including use of interpreters.</p>	<p>Explores the patient's agenda, health beliefs and preferences.</p> <p>Uses language that considers the needs and characteristics of the patient, for instance when talking to children or patients with learning disabilities.</p> <p>Manages consultations effectively with patients who have communication needs, different languages, cultures, beliefs or educational backgrounds.</p>	Uses a variety of advanced or innovative communication techniques and resources adapted to the needs of the patient, respecting individual characteristics and differences.
Maintaining continuing relationships with patients, carers and families	Does not give space and time to the patient when this is needed.	Develops a relationship with the patient that is effective but focused on the	Demonstrates a constructive and flexible approach to consulting.	Whenever possible, adopts plans that respect the patient's autonomy.

	Repeatedly ignores the input of carers or families within consultations	<p>problem rather than the patient.</p> <p>Elicits psychological and social information to place the patient's problem in context.</p>	Facilitates and encourages a trusted long-term relationship with 'their' doctor, using the consultation to improve access to care and enhance continuity of care.	When there is a difference of opinion the patient's autonomy is respected and a positive relationship is maintained.
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## Progression point descriptors – Data gathering and interpretation

Data gathering and interpretation				
Gathering, interpretation and use of data for clinical judgement, including information gathered from the history, clinical records, examination and investigations				
GPC: professional skills MRCGP: AKT; SCA; WPBA: CATs, COTs, MiniCEX, QIP, CSR				
Learning outcomes	Indicators of potential underperformance	Needs further development (expected by end of ST2)	Competent for licensing (required by CCT)	Excellent
Applying an organised approach to data gathering and investigation	<p>Has an approach that is disorganised, inflexible or inefficient.</p> <p>Does not use significant data as a prompt to gather further information.</p> <p>Does not look for appropriate red flags.</p>	<p>Accumulates information in a formulaic way or gathers more than is required.</p> <p>Selects examinations and investigations that are broadly in line with the patient's problems.</p> <p>Demonstrates a limited range of data gathering styles and methods.</p>	<p>Gathers information systematically using questions appropriately targeted to the problem.</p> <p>Understands the importance of, and makes appropriate use of, existing information about the problem and the patient's context.</p> <p>Demonstrates different styles of data gathering and adapts these to a wide range of patients and situations.</p>	<p>Identifies expertly the nature and scope of enquiry needed to investigate the problem, or multiple problems, within a short time frame.</p> <p>Prioritises problems in a way that enhances patient satisfaction.</p> <p>Gathers information in a wide range of circumstances and across all patient groups (including their family and representatives) in a sensitive, empathic and ethical manner.</p>
Interpreting findings accurately and appropriately	<p>Fails to identify normality.</p> <p>Examination technique is poor.</p> <p>Fails to identify significant physical</p>	<p>Identifies abnormal findings and results.</p> <p>Displays an appropriate level of knowledge of clinical norms, measurements and</p>	<p>Chooses examinations and targets investigations appropriately and efficiently.</p>	<p>Uses the predictive value of symptoms, signs and investigations according to the features of the WPBA work and local population and applies</p>

	or psychological signs.	investigations and is aware of how these relate to the patient's condition.	<p>Understands the significance and implications of findings and results and takes appropriate action.</p> <p>Uses a stepwise approach, basing further enquiries, examinations and tests on what is already known and what is later discovered.</p>	this knowledge to their decision-making.
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## Progression point descriptors – Clinical examination and procedural skills

Clinical examination and procedural skills				
Demonstrating competence in general and systemic examinations of all the clinical curriculum areas, including the five mandatory examinations and a range of skills relevant to general practice				
GPC: professional skills MRCGP: SCA; WPBA: CEPS, COTs, MiniCEX, QIP, CSR				
Learning outcomes	Indicators of potential underperformance	Needs further development (expected by end of ST2)	Competent for licensing (required by CCT)	Excellent
Demonstrating a proficient approach to clinical examination and procedural skills	<p>Fails to explain the purpose of the examination.</p> <p>Fails to examine when the history suggests conditions that might be confirmed or excluded by examination.</p> <p>Performs inappropriate overexamination.</p> <p>Fails to obtain informed consent for the procedure.</p> <p>Causes undue upset or distress by the examination.</p>	<p>Undertakes examination when appropriate and demonstrates all the basic examination skills needed as a GP.</p> <p>Elicits relevant clinical signs, both normal and abnormal.</p> <p>Suggests appropriate examinations and procedures related to the patient's problem(s).</p> <p>Conducts examination sensitively and without causing the patient harm.</p> <p>Shows awareness of personal limitations and boundaries in clinical examination.</p>	<p>Conducts examinations targeted to the patient's problems.</p> <p>Interprets physical signs accurately.</p> <p>Varies procedure options according to circumstances and the preferences of the patient.</p> <p>Identifies and reflects on ethical issues with regard to examination and procedural skills.</p> <p>Recognises and acknowledges the patient's concerns before and during the examination and puts them at ease.</p> <p>Shows awareness of the medico-legal background, informed consent,</p>	<p>Demonstrates a range of procedural skills to a high standard, such as joint injections, minor surgery and fitting contraceptive devices.</p> <p>Engages with quality improvement initiatives with regard to examination and procedural skills.</p> <p>Contributes to the development of systems that reduce risk in clinical examination and procedural skills.</p>

		<p>Performs examinations and procedures with the patient's consent and with a clinically justifiable reason to do so.</p> <p>Arranges the place of the examination to give the patient privacy and respect their dignity.</p> <p>Observes the professional codes of practice, including the use of chaperones.</p>	<p>mental capacity and the best interests of the patient.</p> <p>Recognises the verbal and non-verbal clues that the patient is not comfortable with an intrusion into their personal space, especially the prospect or conduct of intimate examinations.</p>	
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## Progression point descriptors – Decision-making and diagnosis

Decision-making and diagnosis				
Adopting a conscious, organised approach to making diagnosis and decisions that are tailored to the particular circumstances in which they are required				
GPC: professional skills MRCGP: AKT; SCA; WPBA: CATs, COTs, MiniCEX, QIP, Leadership MSF, Prescribing, CSR				
Learning outcomes	Indicators of potential underperformance	Needs further development (expected by end of ST2)	Competent for licensing (required by CCT)	Excellent
Adopting appropriate decision-making principles based on a shared understanding	Is indecisive, illogical, or incorrect in decision-making.  Is dogmatic or closed to other ideas.  Too frequently has late or missed diagnoses.  Fails to consider serious possibilities.	Generates differential diagnoses that may be too narrow or broad.  Generates and tests appropriate hypotheses.  Develops independent skills in decision-making and uses the support of others to confirm these are correct.  Uses decision aids (such as algorithms and risk calculators) for straightforward clinical decisions.	Makes diagnoses in a structured way using a problem-solving method.  Thinks flexibly around problems, generating functional solutions.  Demonstrates confidence in, and takes ownership of, own decisions while being aware of own limitations.  Demonstrates rapid and safe decision-making when managing urgent clinical situations and when it is appropriate to defer an action.  Uses pattern recognition to identify diagnoses quickly, safely and reliably.	Understands the benefits and limitations of pattern recognition and an analytical approach, and knows how to use them concurrently.  Reflects appropriately on complex decisions and develops mechanisms to be comfortable with these choices.

			<p>Keeps an open mind and is able to adjust and revise decisions and diagnoses when considering new relevant information.</p> <p>Addresses problems that present early and/or in an undifferentiated way by integrating all the available information to help generate a differential diagnosis.</p>	
Using best available, current, valid and relevant evidence	Ignores relevant guidelines.	<p>Justifies chosen options with evidence.</p> <p>Is aware of personal limitations in knowledge and experience.</p>	Uses an understanding of probability, based on prevalence, incidence and natural history of illness, to aid decision-making.	Justifies discretionary judgement, no longer relying on rules and protocols in situations of uncertainty or complexity, for example in patients with multiple problems.

## Progression point descriptors – Clinical management

Clinical management				
The recognition and a generalist's management of patients' problems				
GPC: professional knowledge; professional skills MRCGP: AKT; SCA; WPBA: CATs, COTs, MiniCEX, QIP, Leadership MSF, CSR				
Learning outcomes	Indicators of potential underperformance	Needs further development (expected by end of ST2)	Competent for licensing (required by CCT)	Excellent
Providing collaborative clinical care to patients that supports their autonomy	<p>Ignores and overrides the wishes of the patient.</p> <p>Adopts a 'doctor knows best' approach.</p>	Develops knowledge and skills to provide care to patients of all backgrounds, ages and life stages.	<p>Adapts the clinical approach to provide comprehensive care to patients who have individual perspectives and health and care needs.</p> <p>Coordinates care for patients of all backgrounds, ages and life stages.</p>	<p>Identifies and develops strategies to improve co-ordination and collaborative care for individual patients of all backgrounds, ages and life stages.</p> <p>Designs or improves services for identified groups of patients.</p>
Using a reasoned approach to clinical management that includes supported self-care	<p>Fails to follow up appropriately.</p> <p>Fails to safety net.</p> <p>Multiple incidences of unsafe prescribing.</p>	<p>Facilitates continuity of care for the patient's problem, for example through effective record-keeping.</p> <p>Uses safe management plans, taking into account the</p>	<p>Provides comprehensive continuity of care, taking into account the patient's problems and their social situation.</p> <p>Varies management options responsively</p>	<p>Empowers the patient with confidence to manage problems independently, together with knowledge of when to seek further help.</p> <p>Challenges unrealistic patient</p>

		<p>preference of the patient.</p> <p>Shows knowledge of available interventions.</p> <p>Considers and arranges follow-up based on patient need.</p> <p>Prescribes safely, including routinely checking on drug interactions and side effects.</p> <p>Gives appropriate and specific safety-netting advice.</p>	<p>according to the circumstances, priorities and preferences of those involved.</p> <p>Considers a 'wait and see' approach where appropriate.</p> <p>Uses effective prioritisation of problems when the patient presents with multiple issues.</p> <p>Offers a variety of follow-up arrangements that are safe and appropriate.</p> <p>Prescribes safely and applies local and national guidelines, including drug and non-drug therapies.</p> <p>Reviews the patient's medication in terms of evidence-based prescribing, cost-effectiveness and patient understanding.</p>	<p>expectations and consulting patterns with regard to follow-up of current and future problems.</p> <p>Develops systems for drug monitoring and safety alerts.</p>
Making appropriate use of other	Asks for help inappropriately, either too much or too little.	Understands and makes referrals, considering alternative	Refers appropriately, taking into account all	Identifies areas for improvement in referral

professionals and services		pathways where appropriate.	<p>available resources.</p> <p>Advocates for the patient and their carers as they navigate the health and care system.</p> <p>Organises follow-up of patients through multiprofessional, team-based and structured approaches.</p>	processes and pathways and contributes to quality improvement.
Providing urgent care when needed	Lacks skills and knowledge in emergency care or is unwilling to respond in such situations.	Recognises acute care as part of the wider continuum of patient care.	<p>Responds rapidly and skilfully to emergencies, with appropriate follow- up for the patient and their family.</p> <p>Coordinates care both within the practice team and with other services.</p>	Contributes to reflection on emergencies as significant events and how these can be used to improve patient care in the future.

## Progression point descriptors – Medical complexity

Medical complexity				
Care extending beyond the acute problem, including the management of comorbidity, uncertainty, risk and health promotion				
GPC: professional skills MRCGP: SCA; WPBA: CATs, COTs, MiniCEX, QIP, Leadership MSF, CSR				
Learning outcomes	Indicators of potential underperformance	Needs further development (expected by end of ST2)	Competent for licensing (required by CCT)	Excellent
Enabling people with long-term conditions to optimise their health	Focuses only on immediate problems, without considering their long-term implications.	Recognises the impact of the patient's lifestyle, circumstances and environment on their health.	<p>Encourages the patient to participate in appropriate health promotion and disease prevention strategies.</p> <p>Supports the patient in addressing social and environmental factors.</p> <p>Continually encourages improvement and rehabilitation and, where appropriate, recovery.</p> <p>Actively facilitates continuity of care for patients with complex needs.</p>	Coordinates a team-based approach to health promotion in its widest sense, including using non-NHS resources.

Using a personalised approach to manage and monitor concurrent health problems for individual patients	Fails to suggest ways to move forward in uncertain or complex circumstances and defaults to medical models of care.	Identifies and recognises multiple health issues in individuals.  Encourages a person-centred approach to consider the issues that matter to an individual with multiple problems.	Demonstrates a reasoned approach to simultaneously managing multiple health problems.  Establishes partnerships that enable a patient-centred approach to optimise care.	Adopts a personalised care approach to monitoring, adjusting and managing concurrent health problems.
Managing risk and uncertainty while adopting safe and effective approaches for patients with complex needs	Inappropriately burdens the patient with uncertainty.	Identifies and tolerates clinical risks and uncertainties in the consultation.  Attempts to prioritise management options based on an assessment of patient risk.  Manages patients with multiple problems with reference to appropriate guidelines for each condition.	Manages uncertainty and communicates risk effectively.  Recognises the limitations of protocols in making decisions and explores ways of dealing with these situations with the patient and carers, consulting with colleagues when appropriate.	Anticipates and employs a variety of strategies for managing uncertainty.  Moves comfortably beyond single condition guidelines and protocols in situations of multimorbidity and polypharmacy, while maintaining the patient's trust.  Uses the patient's perception of risk to enhance the management plan.
Co-ordinating and overseeing patient care across health systems	Is easily discouraged or frustrated, for example by slow progress or lack of patient engagement.	Demonstrates awareness of the importance of continuity of care for patients with complex needs.	Actively facilitates continuity of care for patients with complex needs, either personally or across teams.	Supports individuals in 'navigating' clinical pathways and continually coordinates their care.

## Progression point descriptors – Team working

Team working				
Working effectively with others to ensure good patient care, including the sharing of information with colleagues and using the skills of a multiprofessional team				
GPC: professional values; leadership MRCGP: WPBA: CATs, COTs, MiniCEX, Leadership MSF, CSR				
Learning outcomes	Indicators of potential underperformance	Needs further development (expected by end of ST2)	Competent for licensing (required by CCT)	Excellent
Working as an effective member of multiprofessional and diverse teams	Works principally in isolation.	Understands and respects the roles, skills and responsibilities of other team members.	Is an effective team member, working flexibly with the various teams involved in day-to-day primary care.	Leads a team-based approach to enhance patient care.
	Gives little support to other team members.			Approaches team development positively and creatively.
	Does not appreciate the value of the team.	Responds to communications from other team members in a timely and constructive manner.	Understands the context within which different team members are working.	Uses the strengths and weaknesses of each team member to improve the effectiveness of the whole team.
	Inappropriately leaves their work for others to pick up.	Engages with, and is accessible to, other members of the team.	Appreciates the increased efficacy in delivering patient care when teams work collaboratively rather than as individuals.	Understands group dynamics and uses these to effect change.
	Feedback (formal or informal) from colleagues raises concerns.	Understands the importance of integrating themselves into the various teams in which they participate.	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
		Shows awareness of the diversity within the team and the potential this offers.	Contributes positively to teams	



			<p>and reflects on how they work and the members interact.</p> <p>Fosters a positive attitude to the opportunity and potential of a diverse team.</p>	<p>range of skills including active listening.</p>
<p>Leading and co-ordinating a team-based approach to patient care</p>	<p>Works in isolation and does not interact with other members of the team.</p>	<p>Shows awareness of the GP's role as a leader and coordinator of a team-based approach to patient care.</p> <p>Uses medical records to communicate with other professionals and services to facilitate effective transfer of clinical information.</p> <p>Seeks advice from other professionals and team members where appropriate.</p>	<p>Anticipates and manages the problems that arise at the interfaces between different healthcare professionals, services and organisations.</p> <p>Supports the transition of patient care between professionals and teams.</p> <p>Uses the skills of the wider team to enhance patient care.</p>	<p>Demonstrates the ability to work across professional, service and organisational boundaries, such as participation in multi-agency review.</p>

## Progression point descriptors – Performance, learning and teaching

Performance, learning and teaching				
Maintaining the performance and effective continuing professional development (CPD) of yourself and others, sharing the evidence for these activities in a timely manner in the portfolio				
GPC: education MRCGP: WPBA: CATs, QIP, Leadership, MSF, CSR				
Learning outcome	Indicators of potential underperformance	Needs further development (expected by end of ST2)	Competent for licensing (required by CCT)	Excellent
Continuously evaluating and improving the care you provide	<p>Fails to engage with the portfolio, for example entries are scant, reflection is poor, the PDP is not used or required assessments are not completed.</p> <p>Reacts with resistance to feedback.</p> <p>Fails to make adequate educational progress.</p> <p>Fails to address identified learning needs.</p>	<p>Demonstrates clinical curiosity and reflective practice, engaging in learning identified through clinical learning needs.</p> <p>Provides evidence of identifying and addressing learning needs using PDPs.</p> <p>Obtains and acts on feedback from patients and colleagues regarding practitioner performance.</p> <p>Adapts behaviour positively in response to the clinical governance activities of the organisation, including quality improvement activities and</p>	<p>Judges the weight of evidence, using critical appraisal skills to inform decision-making.</p> <p>Shows a commitment to professional development through reflection on performance and the identification of personal learning needs.</p> <p>Addresses learning needs using targeted PDPs and demonstrates integration into future professional practice.</p> <p>Systematically evaluates performance and learning against external standards, using this information to inform their learning.</p> <p>Engages in learning event reviews in a</p>	<p>Moves beyond the use of existing evidence toward initiating and collaborating in research that addresses unanswered questions.</p> <p>Encourages and facilitates participation and application of clinical governance activities by involving the practice, the wider primary care team and other organisations.</p>

		learning event analyses.	timely and effective manner and promotes learning from these as a team-based exercise.	
Adopting a safe and evidence-informed approach to improve quality of care	<p>Does not follow infection-control protocols.</p> <p>Recklessly overlooks established safety protocols and disregards patient wellbeing in care.</p>	<p>Recognises situations where patient safety could be compromised and takes action to address this.</p> <p>Knows how to access the available evidence, including the medical literature, clinical performance standards and guidelines for patient care.</p> <p>Uses equipment safely and complies with safety protocols.</p> <p>Identifies the potential for spread of infection and takes measures to reduce the risk.</p>	<p>Participates in quality improvement activities and uses these to evaluate and suggest improvements in personal and practice performance, sharing their learning.</p> <p>Measures and monitors the outcomes of care to ensure the safety and effectiveness of the services provided.</p>	Uses professional judgement to decide when to initiate and develop protocols and when to challenge their use.
Supporting the education and professional development of colleagues	Does not show interest in or engage with developing the learning of colleagues or other team members.	<p>Contributes to the education of others.</p> <p>Participates in wider learning activities.</p>	<p>Identifies learning objectives and preferences, using appropriate methods to teach others.</p> <p>Participates in the evaluation and personal development of other team</p>	<p>Engages in the supervision of students and colleagues.</p> <p>Constructs teaching plans, evaluates the outcome of teaching sessions and seeks</p>

			members, including providing feedback.	feedback to enable reflection on performance.
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## Progression point descriptors – Organisation, management and leadership

Organisation, management and leadership				
Understanding how primary care is organised within the NHS, how teams are managed and the development of clinical leadership skills				
GPC: leadership MRCGP: AKT, SCA, WPBA: CATs, COTs, MiniCEX, QIP, Leadership MSF, Prescribing, PSQ, CSR				
Learning outcomes	Indicators of potential underperformance	Needs further development (expected by end of ST2)	Competent for licensing (required by CCT)	Excellent
Advocating for medical generalism in healthcare	<p>Fails to apply a generalist approach in consultations.</p> <p>Demonstrates an overreliance on specialist referrals.</p>	<p>Understands the overarching structure of the UK healthcare system and shows awareness of the range of services available.</p> <p>Recognises the importance of generalism in co-ordinating patient care to provide a point of contact bridging all parts of the NHS.</p>	<p>Applies the principles of generalism, including providing patient-centred care that considers external influences such as population health, environmental factors and health inequalities.</p> <p>Understands the impact of broader organisational influences and pressures.</p>	Manages a high degree of uncertainty and accepts and balances risk at individual, community and systems levels.
Applying leadership skills to help improve your organisation's performance	<p>Fails to provide direction or guidance to teams or works in isolation.</p> <p>Leaves work without finishing</p>	Demonstrates personal organisational, leadership and time management skills so that patients and colleagues are not	Organises self effectively with due consideration for patients and colleagues.	<p>Actively facilitates and evaluates change in the organisation.</p> <p>Takes a lead role in supporting the organisation to</p>

	<p>tasks or handing over.</p> <p>Resistant or obstructive to change.</p> <p>Regularly late or fails to turn up for shifts without notice.</p>	<p>unreasonably inconvenienced or come to any harm.</p> <p>Demonstrates awareness of and responds positively to change in the organisation.</p> <p>Manages own workload responsibly.</p>	<p>Demonstrates effective time management, handover skills, prioritisation, delegation and leadership.</p> <p>Leads and supports change in the organisation, involving and working with the team to deliver defined outcomes.</p> <p>Responds proactively and supportively when services are under pressure in a responsible and considered way.</p> <p>Reports, records and shares safety incidents effectively.</p> <p>Recognises responsibility in advocating for self and colleagues through Freedom to Speak Up.</p>	<p>respond to exceptional pressures.</p>
Developing the financial and business skills required for your role		Shows awareness of the basics of organisational, financial and regulatory	Understands the organisational financial and regulatory frameworks	Understands the role and responsibilities of the partnership

		frameworks within primary care.	within primary care.	model and/or service delivery.
Making effective use of data, technology and communication systems to provide better patient care	<p>Focuses on the computer rather than the patient.</p> <p>Records show poor entries, for example too short, too long or unfocused, failing to code properly, respond to prompts or to write contemporaneous accurate records.</p>	Uses the clinical computer systems during patient contacts, routinely recording each clinical contact in a timely manner following the record-keeping standards of the organisation.	<p>Uses the primary care organisational and IT systems routinely and effectively in patient care.</p> <p>Uses the IT system during consultations while maintaining rapport with the patient.</p> <p>Produces records that are accurate, comprehensive, concise, appropriately coded and understandable.</p>	Uses and modifies organisational and IT systems to facilitate clinical care and governance.

## Progression point descriptors – Holistic practice, health promotion and safeguarding

Holistic practice, health promotion and safeguarding				
Operating in physical, psychological, socio-economic and cultural dimensions. Taking into account patient's feelings and opinions, encouraging health improvement, self-management, preventative medicine and shared care planning with patients and their carers. The skills and knowledge to consider and take appropriate safeguarding actions				
GPC: professional values; health promotion; safeguarding MRCGP: SCA; WPBA: CATs, COTs, QIP, PSQ, CSR				
Learning outcomes	Indicators of potential underperformance	Needs further development (expected by end of ST2)	Competent for licensing (required by CCT)	Excellent
Demonstrating the holistic mindset of a generalist medical practitioner	Treats the disease, not the patient.	<p>Understands that health is a state of physical, mental and social wellbeing and not merely the absence of disease or infirmity.</p> <p>Enquires into physical, psychological and social aspects of the patient's problem.</p> <p>Recognises the impact of the problem on the patient's life.</p> <p>Offers treatment and support for the physical, psychological and social aspects of the patient's problem.</p>	<p>Understands the patient in relation to their socio-economic and cultural background, using this to inform a non-judgemental discussion and enable practical suggestions for managing the patient's problem and putting them at ease.</p> <p>Recognises the impact of the problem on the patient, their family and/or carers.</p> <p>Recognises what matters to the patient and works collaboratively to enhance patient care.</p>	Recognises and shows understanding of the limits of the doctor's ability to intervene in every aspect of holistic patient care.
Supporting people through their	Consistently fails to offer support to the patient and/or	Understands the role of the GP to provide a	Uses appropriate support agencies tailored to the needs	Facilitates appropriate long-term support for



<p>experiences of health, illness and recovery with a personalised approach</p>	<p>their family and carers.</p> <p>Is judgemental, challenges patients without due respect or is rigid or paternal in their approach to patients.</p>	<p>personalised approach to each patient to help promote recovery and a healthy lifestyle, ensuring every contact counts.</p> <p>Recognises that every person has a unique set of values and experiences of health and illness that may affect their use of the healthcare system.</p>	<p>of the patient and/or their family and carers.</p> <p>Demonstrates the skills and assertiveness to challenge unhelpful health beliefs or behaviours, while remaining compassionate and non-judgemental, and maintaining a continuing and productive relationship.</p> <p>Facilitates health improvement and supports self-management during illness and recovery.</p>	<p>patients, their families and carers that is realistic and limits doctor dependence.</p> <p>Makes effective use of tools in health promotion, such as decision aids, to improve health understanding.</p>
<p>Safeguarding individuals, families and local populations</p>	<p>Does not recognise possible signs of adult and child abuse, neglect and other forms of harm.</p> <p>Does not engage with safeguarding processes.</p>	<p>Understands and demonstrates principles of adult and child safeguarding, recognising potential indicators of abuse, neglect or other forms of harm, taking appropriate action.</p>	<p>Seeks to identify those who are vulnerable and reduce the risk of abuse, neglect or other forms of harm.</p> <p>Demonstrates appropriate responses to adult and child safeguarding concerns, including ensuring information is shared and referrals made appropriately.</p>	<p>Demonstrates skills and knowledge to contribute effectively to safeguarding processes and systems within the practice or locality.</p> <p>Contributes to formulating policy documents and communicating effective safeguarding plans for adults or children at risk of abuse, neglect and other forms</p>

				of harm with wider agencies.
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## Progression point descriptors – Community health and environmental sustainability

Community health and environmental sustainability				
Managing the health and social care of the practice population and local community. It incorporates an understanding of the interconnectedness of health of populations and the planet.				
GPC: professional knowledge; health promotion; safeguarding MRCGP: WPBA: CATs, COTs, QIP, MSF, PSQ, CSR				
Learning outcomes	Indicators of potential underperformance	Needs further development (expected by end of ST2)	Competent for licensing (required by CCT)	Excellent
Understanding the health service and your role within it	<p>Has a narrow view of healthcare.</p> <p>Exhibits indifference toward the ecological footprint of various NHS components and their environmental consequences.</p> <p>Consistently disregards eco-friendly practices and exhibits a pattern of unsustainable behaviour in their medical practice.</p>	<p>Understands the current structure of the local healthcare system, including the organisations within it.</p> <p>Recognises how the limitation of resources affects healthcare.</p> <p>Accesses local services where appropriate.</p> <p>Appreciates the environmental impact of different parts of the NHS.</p>	<p>Demonstrates the breadth of GP roles across the healthcare system, such as patient advocate, family practitioner, generalist and 'gatekeeper'.</p> <p>Balances the needs of the individual patient, the health needs of local communities and available resources when making referral(s).</p> <p>Undertakes safe and cost-effective prescribing.</p> <p>Follows protocols with appropriate flexibility, incorporating the patient's preference.</p> <p>Makes efforts to practise healthcare in an</p>	<p>Actively participates in helping to develop services that are relevant to local communities and reduce inequalities and/or improve environmental sustainability to improve healthcare.</p>

			environmentally sustainable way.	
Building relationships with the communities in which you work	Shows no interest in understanding the local community.	<p>Identifies the health characteristics of the populations with whom the team works, including their cultural, occupational, epidemiological, environmental, economic and social factors.</p> <p>Identifies groups who may find accessing services harder and the greater health burden associated with this.</p> <p>Understands their professional duty to help tackle health inequalities and resource issues.</p>	<p>Applies an understanding of how the characteristics of the local population shape the provision of care.</p> <p>Takes proactive steps to tackle health inequalities and improve local resource equity.</p> <p>Offers patients non-pharmacological options to treat common issues that are suited to the patient's environment.</p>	<p>Balances the needs of individual patients with the health needs of the local community, available resources, and environmental sustainability, managing any conflicts of interest.</p> <p>Engages with organisations involved in determining and/or providing local community or health services.</p> <p>Develops an understanding of the availability of natural resources (such as parks, green spaces and water) that local communities can access for health.</p>
Promoting population and planetary health	Is wasteful in their use of resources.	<p>Recognises the health of an individual is interconnected with the health of local populations and the planet.</p> <p>Uses an awareness of local resources to enhance patient care while minimising</p>	<p>Considers the environmental, social and economic sustainability of the health service, for example changes to prescribing and considering the carbon footprint.</p> <p>Uses an awareness of the changing</p>	<p>Advocates for improving the health of populations and the planet as well as individuals.</p> <p>Uses planetary health models in day-to-day practice.</p>

		<p>inequalities and harm to the planet.</p> <p>Adopts environmentally sustainable practices by adapting their prescribing or referral behaviours some of the time.</p>	<p>epidemiology caused by planetary health to inform diagnoses and discussions with patients.</p>	<p>Actively identifies overprescribing and overdiagnosis to improve patient safety and practice sustainability.</p>
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