Learning outcomes

**Please read these carefully and remember that you may be examined on any of these outcomes**

**Community perspective**

Describe and assess the complex interplay of physical, social and psychological factors in the presentation and management of illness in the community.

Assess the impact of family/personal relationships on the presentation, course and management of disease in a primary care setting

Explain the impact of local demography on disease prevalence, patient’s use of services, the General Practice workload, and the primary health care team structure.

Describe, in broad terms, the responsibilities of a Primary Care Trust (PCT) and its relationship with an individual general practice.

Explain the general practitioner’s joint responsibilities to both the individual patient and the community as a whole and describe possible tensions between these roles

**Chronic disease management and Evidence Based Medicine (EBM)**

Describe and apply up to date evidence based guidelines in the management of common chronic medical conditions seen in the community (e.g. Coronary heart disease, Diabetes, Hypertension, Asthma, COPD, Depression, Atrial fibrillation and others), including both pharmacological and non pharmacological interventions

List the prevalence of the major chronic medical illnesses seen and managed in the community

Describe the division of responsibilities for chronic disease management within the primary health care team as a whole.

**Consultation skills**

Perform a number of GP surgeries (from start to finish) under supervision , applying a patient centred approach which respects the patient’s right to be involved in decisions about their care.

Demonstrate an ability to take a focused history, assess and manage a variety of patients in a variety of clinical settings (including both surgery attendances and home visits) using appropriate language and communication skills to seek patients understanding and engagement

Demonstrate ability to take a relevant dietary history.

Demonstrate skills in listening, the use of open, closed, reflective questions and summarising to achieve a shared understanding and partnership with patients when consulting.

Clearly explain your examination findings, the working diagnosis and management plan to the patient

Clearly explain any medication prescribed for patients (how to take it and what it is for)

Demonstrate an understanding of the impact of psychosocial, cultural, behavioural and familial factors in the presentation of, and choices made by, patients in health care

Describe the terms “doctor’s agenda and patient’s agenda”. Outline possible tensions between these two and explain how these might be overcome.

**Clinical skills**

Confidently perform a clinical examination appropriate to the clinical presentation

Recognise the acutely unwell patient and commence initial management

Distinguish between benign self limiting illness and potentially more serious presentations

Establish the availability of in-house services (investigative and therapeutic) and use the appropriately when consulting

Demonstrate an ability to take blood, check inhaler technique, give injections (s/c, IM)

Demonstrate the use of common primary care diagnostic tools (e.g. PHQ9, cardiovascular 10yr risk assessments)

**Teams and team working**

List the members of the primary health-care team, describing their training, roles, responsibilities and management structure (including GP, practice nurse, district nurse, Health Visitor, Social worker, Practice manager, Health Care assistants and others)

Describe the constituent elements of good team work and critique the effectiveness of teamwork in a specific General Practice.

Attend and contribute to a PHCT meeting

Evaluate the effectiveness of communication between primary and secondary care,

Explain obstructions to more effective communication between primary and secondary care and outline strategies to overcome these.

**Audit and clinical governance**

Define the term “clinical governance”

Describe briefly the agencies involved in the setting, monitoring and evaluation of standards in the NHS.

Describe the audit cycle process and how audit differs from research

Define what is meant by an audit criterion and audit standard

Design, perform and write up an audit on an aspect of the Primary Health Care Team’s work, demonstrating an understanding of the process and its contribution towards clinical governance

Evaluate the audit’s findings, making appropriate proposals for systematic improvements   
(if necessary)

Present the findings to the teacher or a practice meeting

**Prescribing**

Demonstrate a familiarity with each of the major drug groups in the BNF

Apply this knowledge when consulting by being able to prescribe (under supervision) at least one drug at the correct dose from the following groups: antibiotics, antihypertensives (ACE, calcium channel anatagonist, B blocker, Alpha blocker, thiazides) NSAIDS, SSRI antidepressants, analgesics, oral diabetes medication.

**Professionalism**

Recognise a doctor’s professional obligations to patients, society and self, paying particular attention to their impact on clinical governance

Evaluate strategies to offset the various stressors encountered in the day to day work of a general practitioner

**Health Promotion and Screening**

Describe the impact of culture, diet and lifestyle on the health of a general practice population

List the various national and local health promotion and screening programmes

Define the difference between screening and case finding

Explain the “inverse care law”.