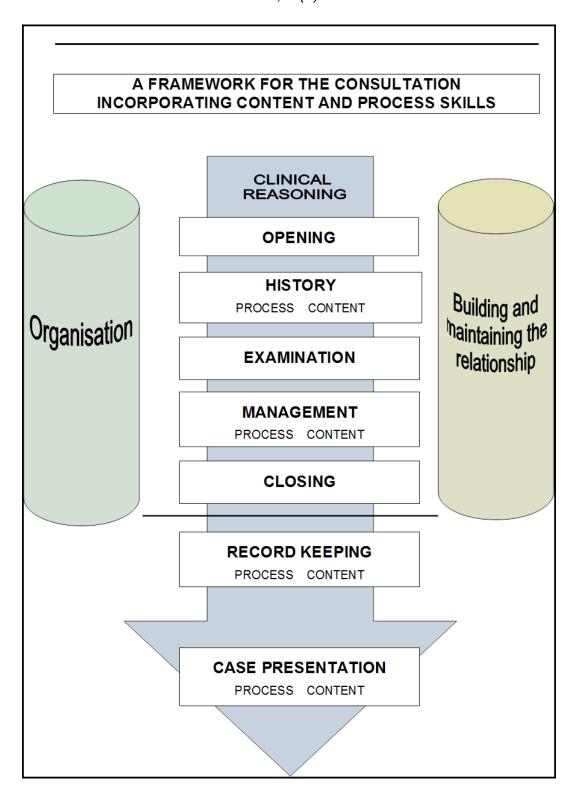
Generic Consultation Skills (GeCoS)

Lefroy J, Gay SP, Gibson S, Williams S, McKinley RK. Keele University School of Medicine. Development and face validation of an instrument to assess and improve clinical consultation skills. Int J Clinical Skills. 2011; 5 (2): 115-125



Generic Consultation Skills (GeCoS) - overview of skills to be assessed Keele University School of Medicine

OPENING

- Introduces self
- Establishes identities of patient and third parties and preferred forms of address
- Establishes agendas

HISTORY

PROCESS

- Enables patient to fully elaborate presenting problem(s)
- Listens attentively
- Skilled use of questioning including open and closed questions
- Clarifies words used and/or symptoms presented by patient as appropriate
- Recognises and responds appropriately to verbal and non-verbal cues

CONTENT- obtains the following:

- Sequence of events
- Details of symptoms
- Effect on the patient's life
- Patient's ideas, concerns and expectations
- Relevant background information including: Past Medical, Drug, Family and Social History; Systems review; Factors influencing health

EXAMINATION

- · Obtains and maintains consent
- Displays competent practice of infection control
- Displays sensitivity to patient's needs and dignity; offers chaperone if appropriate
- Gives clear instructions and explanations of process
- Performs examination competently
- Elicits normal and abnormal findings

MANAGEMENT

PROCESS

- Relates explanations to patient's perspective
- Gives clear information in small chunks
- Negotiates a mutually acceptable plan with patient and/or third parties
- Reassures appropriately
- Checks understanding

CONTENT

- Gives key evidence-based information
- Explores available options, risks and benefits
- Investigates appropriately
- Prescribes rationally and accurately
- Refers appropriately
- Makes appropriate use of opportunities for health promotion
- Agrees appropriate follow-up

CLINICAL REASONING

- Seeks relevant and specific information from patient's record or third parties
- Generates appropriate working diagnoses or problem list
- Seeks discriminating information from history, examination and investigations to help confirm or refute working diagnoses
- Correctly interprets information obtained
- Applies basic, behavioural and clinical sciences to solution of patient's problem
- Recognises limits of competence and acts accordingly

BUILDING AND MAINTAINING THE RELATIONSHIP

- Develops and maintains a professional relationship with patient
- Respects the patient's ideas, beliefs and autonomy
- Responds empathically
- Fosters collaboration

ORGANISATION

- · Considers and optimises the setting
- Involves third parties appropriately
- Exhibits a well-organised approach to gathering and sharing of information
- Makes organisation of consultation overt to patient
- Prioritises agendas appropriately
- · Summarises appropriately
- Uses time appropriately
- Closes consultation appropriately

RECORD KEEPING PROCESS

 Makes concise and accurate notes without interfering with dialogue or rapport MINIMUM CONTENT includes:

- Diagnoses/problems
- Relevant history and examination
- Outline of management plan; therapy, investigations, referral and follow up
- Information, instructions and special precautions given to the patient
- Identification of the author and date of record

CASE PRESENTATION

- Engages and orientates colleague
- Delivers clear and relevant detail in a logical order
- Communicates interpretation of data transparently
- Draws purposeful conclusion

Adapted from: the Calgary Cambridge Framework for the Medical Interview with the kind permission of Dr. Jonathan Silverman, University of Cambridge; Fraser RC. Clinical Method: a general practice approach. Third ed. Oxford Butterworth-Heinmann, 1999 and material provided by AM Hastings, Department of Medical and Social Care Education, University of Leicester.