CIP GUIDE

Statement of Expectations and Guidance for CiP 2

CiP 2: The doctor is able to work and communicate effectively as part of a multi-disciplinary team while demonstrating appropriate situational awareness, professional behaviour and professional judgement.

1 What is this CiP about?

This CiP is designed to ensure that trainees in CSRH acquire the skills, knowledge and attributes needed to work within a team and to lead and follow effectively. It is expected that a consultant in CSRH will be able to lead clinical teams both by personal example and by prioritising tasks, delegating to good effect and managing stress, fatigue, and conflict where they occur.

During training, doctors should be exposed to and participate in a wide variety of clinical and non-clinical scenarios as well as attending educational events to support their learning in this area. The ability to reflect on and learn when situations have gone well, or indeed if they have not done so, are all skills that should be developed and consolidated as training progresses. Here are the GMC-approved key skills and descriptors.
<table>
<thead>
<tr>
<th>Key Skills</th>
<th>Descriptors</th>
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| Teamworking                                    | • Understands teamworking in complex, dynamic situations.  
• Demonstrates the ability to adapt to changing teams.  
• Works effectively as part of a multi-professional team in different roles.  
• Communicates effectively within the multiprofessional team and with patients, relatives and members of the public.  
• Understands that multiple methods of communication are required.  
• Understands and applies the techniques to maintain situation awareness taking into account team and individual factors.  
• Demonstrates appropriate assertiveness and challenges constructively.  
• Recognises and reflects on breakdowns in team working and communication.  
• Recognises and celebrates effective multiprofessional team working. |
| Understands human behaviour and demonstrates leadership skills | • Actively contributes to culture of respectful care by role modelling appropriate language and behaviour and challenge when this does not happen.  
• Understands the basic principles and importance of emotional intelligence.  
• Reflects on own leadership style and how this can impact on patient and colleague interactions.  
• Demonstrates the ability to adapt leadership style to different situations.  
• Continues to develop and enhance leadership skills. |
| Understands decision making                    | • Understands the psychological theories behind how decisions are made.  
• Understands the different types of decision making (intuitive, rule based, analytical and creative).  
• Demonstrates insight into their own decision making process.  
• Reviews and analyses the decisions of others.  
• Progresses from analytical to intuitive decision making and is able to articulate this as experience develops.  
• Reflects on unconscious biases which may influence their interaction and behaviour.  
• Is able to demonstrate consideration for different perspectives, the reasons for choices and perceptions of benefit when making decisions. |
| Demonstrates personal insight | • Demonstrates insight into own knowledge and performance.  
• Adapts within the clinical and team environment.  
• Provides evidence that they reflect on practice and demonstrate learning from it. |
|-------------------------------|--------------------------------------------------------------------------------------------------|
| Manages stress and fatigue    | • Understands stress, its impact on personal wellbeing and its potential effect on delivering high quality patient care.  
• Develops personal strategies to maintain mental strength and resilience and demonstrates this as part of their personal development.  
• Recognises the impact of stress and fatigue on their team and offer support or signposts as appropriate |
| Manages conflict              | • Understands the concept of personal and interpersonal conflict in the healthcare setting.  
• Understands the challenges and negative effects of conflict within teams and organisations.  
• Understands and implements the methods used to manage conflict and its resolution. |
| Makes effective use of resources including time management | • Can prioritise effectively.  
• Demonstrates effective time management in clinical and non-clinical settings.  
• Effectively delegates tasks to other members of the multiprofessional team. |

These **Key Skills** also map to a variety of generic professional capabilities developed by the GMC. Evidence supporting progress in this CiP should link to generic capabilities such as dealing with complexity, teamwork and leadership and knowledge of patient safety issues.

To help trainees and trainers assess progress in this CiP, there is a Statement of Expectations for trainees at each stage of training. It offers guidance as to what constitutes acceptable progress in each training year.

**Descriptors** are assigned to each Key Skill. It is important to note that they are given as guidance as to the kinds of activity that will help a trainee self-assess as to their progress with the acquisition of the Key Skill. Other activities that could be said to belong to that Key Skill are not excluded, hence the list is not exhaustive.

**Statement of expectations: CiP 2**

<table>
<thead>
<tr>
<th>ST1–3 Meeting expectation</th>
<th>A trainee who is meeting expectations will begin to understand the importance of teamworking in dynamic situations. They will have an understanding of the complexities of and start to develop skills in decision making within the clinical</th>
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<tbody>
<tr>
<td>ST4–5</td>
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<td>A trainee who is meeting expectations will continue to make good progress in the areas covered in their earlier training programme. They will demonstrate effective decision making skills in a variety of situations and there should be evidence of progression in the complexity of these scenarios, possibly including the management of conflict. The trainee should demonstrate effective team working with evidence of appropriate reflection. The doctor will actively promote a safety culture and demonstrate an understanding of the role of human factors in adverse clinical events. They trainee will be able to demonstrate the importance of role modelling and can show development of these skills in action. The trainee will be exploring their own leadership style and understand how it alters their performance. The trainee shows insight into their own clinical performance and has strategies to maintain mental strength and resilience and is starting to develop these skills in others.</td>
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<td>In addition to the earlier levels outlined, the trainee will demonstrate skills in decision making in complex situations. There should be evidence of reflection on these experiences. The trainee will have further developed their team working ability and will have the necessary skills and insight to be the leader of a multiprofessional team. The doctor will understand the importance of and demonstrate strong role modelling within the clinical environment and the impact of this on patient environment. The doctor will demonstrate evidence of effective team working within a multiprofessional clinical environment. The trainee understands the importance of negotiation and managing conflict. The trainee understands the importance of role modelling and the importance of leadership style. The trainee shows insight into own clinical performance and shows evidence of developing resilience.</td>
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They understand their own leadership style and alter their performance as required. The trainee shows insight into their own clinical performance and has strategies to maintain mental strength and resilience, and develop these skills in others. The trainee will be on track to meet all the key skills in this CiP by the end of training.

2 What kind of evidence might be relevant to this CiP?

- TO2
- PSQ
- DOC
- Reflective practice
- Local, regional and national teaching on leadership and related topics such as conflict resolution, decision making etc
- Relevant e-Learning

This list is not exhaustive. Trainees and supervisors can discuss and agree other sources of relevant evidence. They should also refer to the Matrix of Progression which sets out the key overall requirements for progression at each stage of training.

3 What are the Knowledge Requirements for this CiP?

The Knowledge Requirements for all CiPs are contained in a single document, available on the FSRH website. They are not listed here because they also constitute the MFSRH syllabus which needs to be a separate document for all examination candidates, some of whom are not CSRH trainees.

4 When can this CiP be signed off?

A trainee can make a self-assessment of their progress in this CiP at any point in the training year. The first question for a trainee to ask themselves is,

- Do I think I meet the expectations for this year of training?

If the answer is yes, then the next questions to ask are:

- Have I produced evidence and linked that evidence to support my self-assessment?
- Is this evidence at the right level of complexity for my year of training?
- Do I understand the knowledge requirements of this CiP? If not, do I need to look at the knowledge requirements/MFSRH syllabus?
Once the trainee has completed the self-assessment the educational supervisor (ES) needs to review the evidence and ask the same questions:

- Is this sufficient evidence to sign off the CiP?
- Am I happy there is evidence to support the acquisition of key skills?
- Is this the best evidence? Would some of this evidence be more appropriate in other CiPs as evidence?
- Is there other evidence that has been missed?
- Is the level right for this trainee? Are they meeting the standards in the statement of expectations?

When the ES judges that the trainee has met the expectations for that year, they can sign off the CiP. Most crucially, this is a global judgement which does not have to be linked to key skills. One piece of well-presented evidence with some reflection may be enough to sign off the CiP. It is the quality of the evidence, not the quantity, which is key. Remember also that one piece of evidence can be used up to three times across the CiPs.

5 Are there any examples or case studies?

Example 1 – ST4 trainee (ES focus)

You are an ES having a meeting with an ST4 trainee, who asks for sign-off of CiP 2. After considering the questions regarding the evidence, they feel that they meet the statement of expectations. They have submitted the following evidence linked to the CiP from the evidence boxes:

- Deanery teaching session on Time Management
- e-learning on Decision Making theory
- DOC

The statement of expectations for an ST4 trainee who is meeting expectations in CiP 2 is as follows:

- A trainee who is meeting expectations will continue to make good progress in the areas covered in their earlier training programme.
- They will demonstrate effective decision-making skills in a variety of situations and there should be evidence of progression in the complexity of these scenarios, possibly including the management of conflict.
- The trainee should demonstrate effective team working with evidence of appropriate reflection.
- The doctor will actively promote a safety culture and demonstrate an understanding of the role of human factors in adverse clinical events.
- The trainee will be able to demonstrate the importance of role modelling and can show development of these skills in action.
- The trainee will be exploring their own leadership style and understand how it alters their performance. The trainee shows insight into their own clinical performance and
has strategies to maintain mental strength and resilience and is starting to develop these skills in others.

Therefore, based on your meetings with the trainee and the evidence which is linked to the CiP, you feel that some progress has been made with the CiP. There were some actions from the trainee after the DOC but the reflection has not been completed. You feel that the evidence would be strengthened by completing the actions and adding a reflection to consolidate the learning from the DOC. You would also like to see direct evidence of the practical application of the knowledge and skills gained earlier in training and in the current teaching that the trainee has attended. There should be more evidence of leadership styles being developed in practice and examples might include being in charge of the Clinic Rota or chairing the Local Staff Meeting. You agree to wait before signing off this CiP for ST4.

Example 2 – ST2 trainee (trainee focus)

You are an ST2 trainee considering sign-off for CiP 2. You are 7 months into ST2 and have submitted the following evidence linked to the CiP:

- Deanery teaching session on Human Factors
- TO2
- Reflection on TO2

The Statement of Expectations for an ST2 trainee who is meeting expectations in CiP 2 is as follows:

- A trainee who is meeting expectations will begin to understand the importance of teamworking in dynamic situations.
- They will have an understanding of the complexities of and start to develop skills in decision making within the clinical environment.
- The doctor will demonstrate evidence of effective team working within a multiprofessional clinical environment and have an understanding of the complexities involved in decision making in this environment.
- The trainee understands the importance of negotiation and managing conflict.
- The trainee understands the importance of role modelling and the importance of leadership style.
- The trainee shows insight into own clinical performance and shows evidence of developing resilience

You discuss this CiP and your request to be signed off with your ES at your next meeting. The ES considers the key questions:

- Is this sufficient evidence to sign off the CiP?
- Am I happy there is evidence to support the acquisition of key skills?
- Is this the best evidence? Would some of this evidence be more appropriate in other CiPs as evidence?
- Is there other evidence that has been missed?
- Is the level right for this trainee? Are they meeting the standards of expectations?

The ES has a discussion with the trainee, to the effect that the TO2 provides good evidence including comments that the trainee is an effective team member. The reflection demonstrates insight into the trainee’s own experience of the dynamics within a team.

The ES feels that the quality of evidence which is linked to the CiP is good and appropriate to the level of training and is therefore confident to sign off this CiP for ST2.