THE 6 SKILL DIMENSIONS Summary

(Source: The College of Family Physicians of Canada: Defining competence for the purposes of certification by the College of Family Physicians of Canada: the evaluation objectives in family medicine 2011)

Patient-Centered Method

- Actively explores the illness experience by inquiring about patient's feelings, ideas, impact on function, and expectations (FIFE)
- Attempts to acquire a whole person perspective by asking about context (who is in patient's life partner, children, family; social supports; work/finances/education)
 (Context)
- Integrates the patient's context with his or her illness experience in a clear and empathetic way while moving toward a management plan (Context Integration)
- Works with the patient in coming to a shared understanding of the problem and each person's role in addressing it by:
 - Encouraging discussion
 - Providing opportunities to ask questions
 - Inviting feedback
 - Seeking clarification and consensus
 - Addressing disagreements (Finding Common Ground)
- Incorporates relevant health promotion and prevention around the management of a problem.
- Approaches the patient's problems with a realistic and longitudinal view, which respects and appropriately balances the priorities of the patient and physician and considers the resources of individuals and the community.

Clinical Reasoning Skills

- Gathers and discriminates appropriate data from relevant sources (ie. patient history and physical, patient chart, investigation results and the literature)
- Integrates and interprets data, including matching current situation to past situations with this patient or others, to make logical inferences and formulate an initial set of hypotheses about the patient's current condition
- Uses hypothetico-deductive reasoning to prioritize a differential diagnosis and identify a definitive diagnosis of a patient's problem (Diagnostic Reasoning)
- Considers the diagnosis, the therapeutic evidence as well as the individual patient context and values, and recommends a course of action; including the risks and benefits, to address the diagnosis (Therapeutic Reasoning)
- Evaluates the effectiveness of the selected treatment and revises diagnosis and treatment plan, as needed

Professionalism

- Day-to-day behaviour reassures one that the physician is responsible, reliable, and trustworthy.
- Day-to-day behaviour and discussion reassures one that the physician is ethical and honest.
- **Knows his or her limits** of clinical competence and seeks help appropriately.
- Demonstrates a flexible, open-minded approach that is resourceful and deals with uncertainty.
- **Evokes confidence without arrogance**, and does so even when needing to obtain further information or assistance.
- Demonstrates a caring and compassionate manner.
- Demonstrates respect for patients in all ways, maintains appropriate boundaries, and is committed to patient well-being. This includes time management, availability, and a willingness to assess performance.
- Demonstrates respect for colleagues and team members.
- Practices evidence-based medicine skillfully. This implies not only critical appraisal and information-management capabilities, but incorporates appropriate learning from colleagues and patients.
- Displays a commitment to societal and community well-being.
- Displays a **commitment to personal health and** seeks **balance** between personal life and professional responsibilities.
- Demonstrates a mindful approach to practice by maintaining composure/equanimity, even in difficult situations, and by engaging in thoughtful dialogue about values and motives.

Selectivity

- **Sets priorities** and focuses on the most important items
- Knows when to say something and when not to
- Gathers the most useful information without losing time on less contributory data
- Distinguishes the emergent from the elective and intervenes in a timely fashion
- Acts when necessary, even though information may be incomplete
- Determines the likelihoods, pertinence, and priorities in his or her differential diagnoses
- Selects and modifies a treatment to fit the particular needs of a patient and a situation
- Distinguishes the sick from the not sick
- Does something extra when it will likely be helpful
- Uses both general and active listening skills to facilitate effective communication with a patient or colleague.

Communication Skills

- Demonstrates adequate verbal skills to be understood by a patient or colleague, converses at an appropriate level for the patient or colleague's age and educational level, and employs the appropriate tone to ensure good communication and comfort
- Demonstrates adequate skills to communicate clearly with a patient or colleague in a written fashion (e.g. in a letter to a patient, educational materials for the patient, test requisition for colleague, follow-up orders)
- Conscious of the impact of body language on communication with the patient or colleague and adjusts it appropriately when it inhibits communication
- Aware of and responsive to a patient or colleague's body language, particularly feelings not well expressed in a verbal manner (e.g. dissatisfaction, anger, guilt)
- Adapts communication to the individual patient or colleague for reasons such as culture, age, and disability (e.g. a young child or teenage patient, a colleague from a different cultural background, or someone with speech deficits, hearing deficits, or language difficulties)
- Demonstrates the ability to hear, understand, and discuss an opinion, idea, or value that may be different from their own while maintaining respect for the patient's or colleague's right to decide for himself or herself.
- Demonstrates effective charting skills.

Procedural Skills

- **Decides whether or not to do a procedure** after considering:
 - A. The indications and contraindications to the procedure
 - B. Their own skills and readiness to do the procedure (e.g., level of fatigue and any personal distractions)
 - **c.** The context of the procedure, including the patient involved, the complexity of the task, the time needed, the need for assistance, and location
- Before deciding to go ahead with a procedure:
 - A. **Discusses** the procedure with the patient, including a description of the procedure and possible outcomes, both positive and negative, as part of obtaining their consent.
 - **B. Prepares** for the procedure by ensuring the appropriate equipment is ready.
 - c. Mentally **rehearses** the following:
 - The anatomic landmarks necessary for procedure performance.
 - The technical steps necessary in sequential fashion, including any preliminary examination.
 - The potential complications and their management.
- During performance of the procedure, keeps the patient informed to reduce anxiety and always ensures patient comfort and safety
- If a procedure is not going as expected, **re-evaluates the situation** and stops or seeks assistance as required.
- After completion of a procedure, **develops a plan with the patient** for after care and follow.