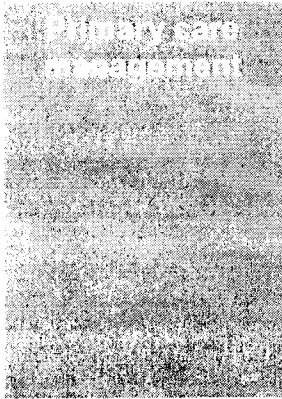
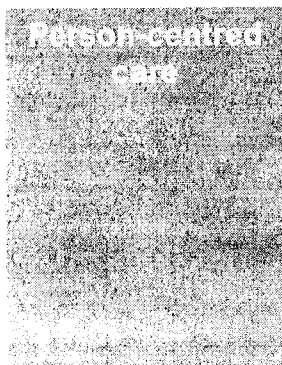


GP Core Competencies

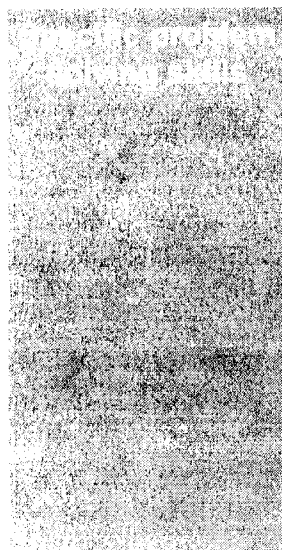
(derived by WONCA)
based on European statement.



- to manage primary contact with patients, dealing with unselected problems;
- to cover the full range of health conditions;
- to co-ordinate care with other professionals in primary care and with other specialists;
- to master effective and appropriate care provision and health service utilisation;
- to make available to the patient the appropriate services within the health care system;
- to act as advocate for the patient



- to adopt a person-centred approach in dealing with patients and problems in the context of patient's circumstances;
- to apply the general practice consultation to bring about an effective doctor-patient relationship, with respect for the patient's autonomy;
- to communicate, set priorities and act in partnership;
- to provide longitudinal continuity of care as determined by the needs of the patient, referring to continuing and co-ordinated care management.



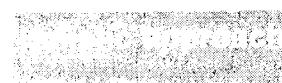
- to relate specific decision making processes to the prevalence and incidence of illness in the community;
- to selectively gather and interpret information from history-taking, physical examination, and investigations and apply it to an appropriate management plan in collaboration with the patient;
- to adopt appropriate working principles. e.g. incremental investigation, using time as a tool and to tolerate uncertainty;
- to intervene urgently when necessary;
- to manage conditions which may present early and in an undifferentiated way;
- to make effective and efficient use of diagnostic and therapeutic interventions;



- to manage simultaneously multiple complaints and pathologies, both acute and chronic health problems in the individual
- to promote health and well being by applying health promotion and disease prevention strategies appropriately
- to manage and co-ordinate health promotion, prevention, cure, care and palliation and rehabilitation.



- to reconcile the health needs of individual patients and the health needs of the community in which they live in balance with available resources.



- to use a bio-psycho-social model taking into account cultural and existential dimensions.

Three areas of implementation

To practice the specialty the competent practitioner implements these competencies in three important areas:

a. Clinical tasks

- the ability to manage the broad field of complaints, problems and diseases as they are presented;
- to master long-term management and follow-up

b. Communication with patients

- the ability to structure the consultation;
- to provide information that is easily understood and to explain procedures and findings
- to understand deal adequately with different emotions

c. Practice management

- to provide appropriate accessibility and availability to the patients;
- to effectively organise, equip and financially manage the practice, and collaborate with the practice team;
- to cooperate with other primary care staff and with other specialists.

Background features of the discipline

Three features are essential for a person-centred scientific discipline:

- context,
- attitude and
- science.

The interrelation of core competencies, implementation areas and fundamental features characterises the discipline and underlines the complexity of the specialty.

Contextual Aspects

- Use contextual aspects of the patient, his history, his situation and social background in diagnosis, decision making and management planning.
- show personal interest in the patient and his environment and be aware of the possible consequences of disease for family members and the wider environment (including working environment) of the patient.

Attitudinal aspects

- Being aware of one's own capabilities and values
- identifying ethical aspects of clinical practice (prevention/ diagnostics/ therapy/ factors influencing lifestyles).
- justifying and clarifying personal ethics.
- being aware of the mutual interaction of work and private life and striving for a good balance between them.

Scientific aspects

- being familiar with the general principles, methods, concepts of scientific research, and the fundamentals of statistics (incidence, prevalence, predicted value etc.);
- having a thorough knowledge of the scientific backgrounds of pathology, symptoms and diagnosis, therapy and prognosis, epidemiology, decision theory, theories of the forming of hypotheses and problem-solving, preventive health care;
- being able to access, read and assess medical literature critically; - develop and maintain continuing learning and quality improvement.
- to balance evidence and experience in an effective way.