

Specialist grade – template person specification

Capabilities

As all the capabilities are taken from the GMC's Generic Professional Capabilities (GPCs), they are required of all doctors. We expect the majority of capabilities listed to be 'key' for all roles. Some may be less relevant for a particular role because it does not entail active or formal involvement in that aspect.

Employers should therefore indicate whether each capability listed is:

Key for this post: Greater depth or level of expertise is required. **Required but not key**: The same depth or level of expertise may not be needed for this particular post.

Evidence

Some capabilities will be fully required at the time of appointment, while others may be developed by the postholder while in the role.

Those capabilities pre-populated with an x in the final column are those that need to be evidenced at interview for the recruitment panel. They require a higher level of evidence or documentation because they relate to increased clinical responsibility and autonomy.

For those capabilities not checked, evidence of current safe practice should suffice for those already working at the required level, but they may be explored during the interview process. Other capabilities will be key but need not be addressed in the interview itself. Where capabilities are to be developed prospectively, they should be assessed at future appraisals.

Specialty-specific content

In addition to consulting the relevant College/Faculty curriculum, employers drawing up the person specification should refer to the 'Notes on person specification template - Examples of specialty-specific criteria and guidance for reference'. This supporting document provides illustrative examples indicating where specific capabilities may need to be amended or strengthened for particular specialties.



Domain Professional	Capabilities 1.1 Practises with the	Key for this post	Required but not key	Examples of appropriate evidence • Participation in annual	To be evidenced at interview
Values and Behaviours, Skills and Knowledge	professional values and behaviours expected of all doctors as set out in GMC Good Medical Practice and the Generic Professional Capabilities Framework (or equivalent for dentists).			 Participation in annual appraisal Multi-source feedback Patient feedback Mandatory training as set out in UK Core Skills Training Framework Interview 	
	1.2 Demonstrates the underpinning subject-specific competences i.e. knowledge, skills and behaviours relevant to the role setting and scope.			 Work-based evidence using appropriate existing tools e.g., scope of practice & workload as evidenced in job plan, log books, audit of personal practice, references from colleagues, evidence collected for annual appraisal and job planning Knowledge-based evidence e.g., accredited courses, CPD diary, professional or higher qualifications 	X
	1.3 Clinically evaluates and manages a patient, formulating a prioritised differential diagnosis, initiating an appropriate management plan, and reviewing and adjusting this depending on the outcomes of treatment.			 Multi-source feedback Patient feedback Reflective pieces References from colleagues Personal clinical audit Evidence collected for annual appraisal and job planning 	X
	1.4 Manages the difficulties of dealing with complexity and uncertainty in the care of patients; employing expertise and clinical decision-making skills of a senior and independent/ autonomous practitioner. (All senior doctors/dentists			See 1.3 for examples	X



(including consultants and GPs) work independently/autonomously to a level of defined competencies, as agreed within local clinical governance frameworks.)				
1.5 Critically reflects on own competence, understands own limits, and seeks help when required.		•	See 1.3 for examples	х
1.6 Communicates effectively and is able to share decision-making with patients, relatives and carers; treats patients as individuals, promoting a person-centred approach to their care, including self- management.		•	See 1.3 for examples	X
1.7 Respects patients' dignity, ensures confidentiality and appropriate communication where potentially difficult or where barriers exist, e.g. using interpreters and making adjustments for patients with communication difficulties.		•	See 1.3 for examples EDI training Unconscious bias training Interview	X
1.8 Demonstrates key generic clinical skills around the areas of consent; ensuring humane interventions, prescribing medicines safely and using medical devices safely.		•	See 1.3 for examples Relevant courses Interview	
1.9 Adheres to professional requirements, participating in annual appraisal, job planning and reviews of performance and progression.		•	Evidence of appraisal and addressing objectives	X
1.10 Awareness of legal responsibilities relevant to the role, such as around mental capacity and deprivation of liberty; data		•	Interview Evidence of learning/courses/ qualifications in specific specialties	



	protection; equality and diversity. 1.11 Applies basic principles of public health; including population health, promoting health and wellbeing, work, nutrition, exercise, vaccination and illness prevention, as relevant to their specialty.	Job planInterview	
Leadership and Teamworking	2.1 Awareness of their leadership responsibilities as a clinician and demonstrates appropriate leadership behaviour; managing situations that are unfamiliar, complex or unpredictable and seeking to build collaboration with, and confidence in, others.	 Examples of initiatives taken that have effected change Examples of involvement in collaborative leadership work Interview 	X
	2.2 Demonstrates understanding of a range of leadership principles, approaches and techniques so can adapt leadership behaviours to improve engagement and outcomes – appreciates own leadership style and its impact on others.	 Leadership courses Evidence of effective leadership 	
	2.3 Develops effective relationships across teams and contributes to work and success of these teams – promotes and participates in both multidisciplinary and interprofessional team working.	 Evidence of participation in or leading MDT Evidence of teamwork Interview 	X
	2.4 Critically reflects on decision-making processes and explains those decisions to others in an honest and transparent way. 2.5 Critically appraises	 Evidence of reflective practice Interview Examples of successful 	
	performance of self, colleagues or peers and systems to enhance performance and support development.	situations	



	2.6 Demonstrates ability to challenge others, escalating concerns when necessary.	• Interview	
	2.7 Develops practice in response to changing population health need, engaging in horizon scanning for future	Log bookOutcome data/auditInterview	
	developments.		
Patient Safety and Quality Improvement	3.1 Takes prompt action where there is an issue with the safety or quality of patient care, raises and escalates concerns, through clinical governance systems, where necessary.	 Reflective practice with examples Interview 	X
	3.2 Applies basic human factors principles and practice at individual, team, organisation and system levels.	 Multi-source feedback Interview Evidence of attendance at Human Factors course 	
	3.3 Collaborates with multidisciplinary and interprofessional teams to manage risk and issues across organisations and settings, with respect for and recognition of the roles of other health professionals.	 Examples of involvement Multi-source feedback Interview 	X
	3.4 Advocates for, and contributes to, organisational learning.	• Interview	
	3.5 Seeks feedback and involvement from individuals, families, carers, communities and colleagues in safety and quality service improvements reviews.	Multi-source feedbackPatient feedback	
	3.6 Leads new practice and service redesign in response to feedback, evaluation and need, promoting best practice.	Examples of success	
	3.7 Evaluates and audits own and others' clinical practice and acts on the findings.	Examples of successful changeInterview	X
	3.8 Reflects on personal behaviour and practice,	 Examples of reflective practice 	



	responding to learning opportunities.	•	Interview	
	3.9 Implements quality improvement methods and repeats quality improvement cycles to refine practice; designing projects and evaluating their impact.	•	Audits QI projects Attendance at QI training	
	3.10 Critically appraises and synthesises the outcomes of audit, inquiries, critical incidents or complaints and implements appropriate changes.	•	Examples of involvement Interview	
	3.11 Engages with relevant stakeholders to develop and implement robust governance systems and systematic documentation processes.	•	Examples of involvement Multi-source feedback	
Safeguarding Vulnerable Groups	4.1 Recognises and takes responsibility for safeguarding children, young people and adults, using appropriate systems for identifying, sharing information, recording and raising concerns, obtaining advice and taking action.	•	Safeguarding courses Interview	
	4.2 Applies appropriate equality and diversity legislation, including disability discrimination requirements, in the context of patient care.	•	EDI training Interview	
Education and Training	5.1 Critically assesses own learning needs and ensures a personal development plan reflects both clinical practice and the relevant generic capabilities to lead and develop services.	•	Audit Examples of success Interview	X
	5.2 Promotes and participates in individual and team learning; supporting the educational needs of individuals and teams for uni-professional,	•	Evidence of teaching and training of medical/dental students or trainees or allied health professionals. Examples of involvement	



	multidisciplinary and		•	Outcomes / audit	
	interprofessional learning.				
	5.3 Identifies and creates		•	Guideline awareness	
	safe and supportive working			and successful	
	and learning environments.			examples	
	5.4 Can act as a role model,		•	Examples of role	
	educator, supervisor, coach				
	or mentor for medical and				
	non-medical practitioners.				
	5.5 Creates effective		•	Examples of teaching	
	learning opportunities and			successes	
	provides developmental		•	Interview	
	feedback, both verbally and				
	in writing, to learners and				
	doctors/dentists in training,				
	as required by the role.				
	5.6 Plans and provides		 •	Teaching experience	
	effective teaching and			examples	
	training activities as				
	required by the role.				
	5.7 Understands how to		•	Examples of successful	
	raise concerns about the			interventions	
	behaviour or performance of		•	Interview	
	any learner who is under				
	their clinical supervision				
	(leadership).				
	5.8 Takes part in patient		•	Examples	
	education.		•	Patient feedback	
Research	6.1 Keeps up-to-date with		•	Examples of CPD – diary	
and	current research and best			with reflection	
Scholarship	practice in the individual's				
	specific area of practice,				
	through appropriate				
	continuing professional				
	development activities and				
	their own independent study				
	and reflection.				
	6.2 Critically appraises and		•	Participation in research	
	understands the relevance			training courses or	
	of the literature, conducting			recruitment for NIHR	
	literature searches and			research studies	
	reviews; disseminates best		•	Presentation/publication	
	practice including from			of conference abstract	
	quality improvement		•	Reviewer of papers/	
	projects.			conference abstracts	
	'		•	Publications, including	
				guideline development	
			•	Interview	
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	and uses clinical ppropriately.	 Examples in clinical practice Interview knowledge of relevant guidelines 	
in a meaning	esearch evidence gful way for upport shared	 Examples of implementation of evidence-based change 	
6.5 Works to identifying the further rese strengthen to base or whe gaps in known etworking within and o organisation	ne need for arch to he evidence re there are vledge, with teams utside the	 Evidence of research activities and knowledge of current limitations in evidence Interview 	