Medical Teacher

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3 **Supplementary content**
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6 **Table S1: Original GPR-CAG items (GPT1 and GPT2)**
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Heading/grouping	Item	Item no.	GPT1	GPT2
Introductory	Greets & obtains pts name es	CG1	y	y
	Introduces self & clarifies role	CG2	y	y
	Shows interest & respect, attends to patient's physical comfort	CG3	y	y
Reason for consultation	Identifies patient's problems or issues	CG4	y	y
	Listens attentively to patient's opening, without interrupting	CG5	y	y
	Confirms list & screens for further problems	CG6	y	y
	Negotiates agenda taking patient & doctor's needs into account	CG7		y
Problems	Encourages patient to explain reason for presenting now	CG8	y	y
	Uses open & closed q techniques appropriately	CG9	y	y
	Listens attentively - utilises appropriate listening skills & silence	CG10	y	y
	Facilitates pts responses verbally & non-verbally eg use of encouragement, reflection, paraphrasing, interpretation	CG11		y
	Picks-up verbal and non-verbal cues; appropriately addresses & acknowledges	CG12		y
	Clarifies patient's statements that are unclear; appropriately elicits this info	CG13	y	y
	Periodically summarise to verify own understanding, invites patient to correct interpretation	CG14		y
	Uses concise easily understood questions & comments, avoids jargon	CG15	y	y
	Establishes dates & sequences of events	CG16	y	y
	Actively determines & appropriately explores patients feelings/ ideas, fears/concerns & expectations/effects	CG17		y
	Encourages the patient to express their feelings	CG18		y
Organisation	Summarises periodically to confirm understanding before moving on	CG19		y
	Progresses from one section to another using signposting, transitional statements; includes rationale for next phase of consult	CG20		y

Heading/grouping	Item	Item no.	GPT1	GPT2
Flow	Structures interview in a logical sequence	CG21		y
	Attends to timing & keeping interview to task	CG22		y
Non-Verbal Behaviours	Demonstrates appropriate non-verbal behaviour - eye contact, posture, position & movement, vocal cues, rate volume, tone	CG23	y	y
	Appropriately writes notes, computer use does not interfere with dialogue or rapport	CG24		y
	Demonstrates appropriate confidence	CG25		y
Rapport	Accepts legitimacy of patient's views & is non-judgemental	CG26	y	y
	Uses empathy to communication understanding & appreciation of patient's feelings or predicament; overtly acknowledges pts views & feelings	CG27		y
	Provides support: expresses concern, understanding, willingness to help; acknowledges coping efforts & appropriate self care; offers partnership	CG28		y
	Deals sensitively with embarrassing & disturbing topics & physical pain, including when associated with physical examination	CG29		y
Involving Patient	Explains rationale for questions or physical examination that could appear non-sequiturs	CG30		
	During physical examination explains processes & asks permission	CG31		y
	Checks with the patient if plans have been understood & accepted	CG32		y
	Shares thinking with the patient to encourage patient involvement in care, empowers patient	CG33		y
Physical Examination	Performs an appropriate physical examination; is mindful of patient comfort & privacy throughout the physical examination	CG34	y	y
	Physical examination is accurate & clinical signs correctly elicited	CG35	y	y
Diagnosis & Explanation	Appropriate hypotheses are articulated & problems defined	CG36	y	y
	Clearly explains diagnostic conclusions, justification & check patients understanding	CG37		y
	Appropriately explains causation; seriousness; expected duration, short and long term consequences	CG38		y
Management Planning	Clearly outlines the plan of management for each defined problem; Explains expected outcomes & influence on ongoing management of the problem	CG39	y	y
	Provides clear information on investigations, procedures and explains process for results	CG40	y	y

Heading/grouping	Item	Item no.	GPT1	GPT2
	Relates investigations and procedures to the management plan, explains value and purpose	CG41		y
	Encourages questions about and discussion of potential anxieties and concerns	CG42		y
	Discusses possible options for management if appropriate and relevant and elicits patients viewpoint	CG43		y
	Appropriately identifies & explores preventative health issues as relevant to the patient and presentation	CG44		y
	Demonstrates knowledge and understanding of relevant clinical guidelines and implements appropriately	CG45	y	y
	Demonstrates knowledge of relevant professional and patient resources and uses appropriately	CG46		y
	Appropriately implements health promo & identifies opportunities of behaviour change if applicable	CG47		y
Medications & Prescribing	Prescribes medications and treatments as appropriate to diagnostic conclusions; adopts a quality use of medications framework; prescribes safely	CG48	y	y
	Discusses non-medication options as appropriate and relevant to clinical context	CG49		y
	Explains common & serious side effects of any medications prescribed & implements appropriate follow-up if problems develop with medications	CG50	y	y
Medical Records & Referrals	Medical records accurate & contemporaneous; all key & relevant info for the consultation recorded; management plan and follow-up arrangements clearly recorded	CG51	y	y
	Pt medical summary info & relevant family and preventative health info recorded & regularly updated as required	CG52		y
	Appropriately refers patient for specialist opinion & care; explains the need for referral to patient &outlines expectations from specialist referral	CG53	y	y
	Writes clear referral letters stating reason for referral, expected outcomes & provides all necessary patient info to facilitate the referral	CG54	y	y
	Appropriately refers patient to allied health services; explains the need for the referral & expected outcome of the referral	CG55		y
Patient Factors & Follow-up	Elicits patients reactions and/or concerns about plans and treatments including acceptability and able to negotiate as appropriate	CG56		y
	Takes patient's lifestyle, beliefs, cultural background and abilities into consideration	CG57		
	Encourages patient to be involved in implementing the plans, to take responsibility and be self-reliant	CG58		
	Asks patients about support systems & other support options. Appropriately advocates for patient	CG59		y

Heading/grouping	Item	Item no.	GPT1	GPT2
	Clearly outlines Follow-up plans and implements safety netting	CG60		y

Table S2. GPT1 GPR-CAG factor congruence with existing competency frameworks

Factor[a]	Label	Competency framework link
3	Attention to basic-level clinical professional responsibilities	This factor may be considered a foundation for further development of professionalism-related attributes, as included across multiple domains of competence within existing frameworks, including for example Domains 1 (Communication and the doctor–patient relationship), 2 (Applied professional knowledge and skills) and 5 (Organisational and legal) of the RACGP's Competency Profile of the Australian general practitioner at the point of Fellowship 2016.[1] The distinct items within this factor may reflect specific components of a general practice consultation that best represent attention to basic-level responsibilities within a CTV session.
1	Consultation techniques subserving patient-centeredness 'Caring'	These consultation communication techniques are recognised in Domain 1 of the RACGPs Competency profile: Communication and the doctor patient relationship, Core Skill 1.1 (CS1.1): 'General practitioners communicate effectively and appropriately to provide quality care', with quality care encompassing whole-person care that respectful of context and "collaborative enhancement of health outcomes".[1]
4	Proficiency in physical examination skills	This is a fundamental skill for general practitioners, as reflected within Domain 2 of the RACGPs Competency profile: Applied professional knowledge and skills, Core Skills (CS 2.2.2), "An appropriate and respectful physical examination of the patient is undertaken".[1]
2	Skills in formulating and articulating coherent hypotheses and management plans	Such skills align closely with Domain 2 of the RACGPs Competency profile: Applied professional knowledge and skills, Core Skills (CS 2.2), "General practitioners diagnose and manage the full range of health conditions in a diverse range of patients, across the lifespan through a therapeutic relationship".[1]

[a]Factors have been re-ordered to reflect a typical consultation sequence and/or inherent complexity of the competency trait and are therefore not in numerical order

Table S2. GPT2 GPR-CAG factor congruence with existing competency frameworks

Factor[a]	Label	Competency framework link
6	Attention to minimum standards of professional communication	Conceptually this links closely with Factor 3 for GPT1, but is fine-tuned on inter-professional communication, which aligns with RACGP competency indicators, 'Contributes to effective intra- and interdisciplinary collaboration and chains of care provision' (Domain 2, *Applied professional knowledge and skills)* and 'Organises people, means and information within the general practitioner service so that care can be provided efficiently and effectively' (Domain 5,*Organisational and legal*) of the RACGP's Competency profile.[1]
2	Structural aspects of history-taking	This strongly aligns with competency indicator, 'Provides primary care in a structured manner', within Domain 2 of the RACGP's Competency profile (*Applied professional knowledge and skills*).[1]
4	Minimum-required performance in patient-centred 'Caring'	Aligns with Domain 1 of the RACGPs Competency profile: *Communication and the doctor patient relationship,* Core Skill 1.1 (CS1.1): 'General practitioners communicate effectively and appropriately to provide quality care'.[1]
3	Higher-level 'Caring' Patient-centeredness	This is an extension skill beyond the minimum requirements as per Factor 3 of GPT1. These higher-level skills are consistent with the competency indicator 'Applies communication techniques and the means of communication in a purposeful manner' within Domain 1 of the RACGPs Competency profile (*Communication and the doctor patient relationship).*[1]
1	Patient-centeredness; 'Sharing'	This is aligned with the distinct competency indicator, 'Involves the patient actively in decision-making' within Domain 1 of the RACGPs Competency profile: *Communication and the doctor patient relationship.*[1]
7	High-level, but structured clinical tasks	This factor is aligned with the competency indicator, 'Applies the diagnostic, therapeutic and preventative arsenal of the profession in a purposeful and evidence-based manner, within Domain 2 (*Applied professional knowledge and skills*) of the RACGP's Competence profile[1], where a link can be drawn between the use of structure and guidelines in both diagnostic and therapeutic elements of care-provision.
5	Holistic pro-active approach to patient presentations	This is aligned with competence indicators within Domain 2 (*Applied professional knowledge and skills*) and Domain 3 (*Population health and the context of general practice*) including, 'Applies the diagnostic, therapeutic and preventative arsenal of the profession in a purposeful and evidence-based manner' and 'Promotes the health of both individual patients and groups of patients' the RACGP's Competence profile.[1]

[a]Factors have been re-ordered to reflect a typical consultation sequence and/or inherent complexity of the competency trait and are therefore not in numerical order

References

[1]   Royal Australian College of General Practitioners. Competency profile of the Australian general practitioner at the point of Fellowship. 2015 https://www.racgp.org.au/download/Documents/VocationalTrain/Competency-Profile.pdf (Accessed 4 November 2017).