Learning Needs Analysis Form: Paramedic Roadmap

An LNA is an iterative process which you start by providing details about yourself, your education, experience, and relevant education including a self-assessment mapping exercise against a series of questions – based on the Knowledge, Skills and Attributes specific to the FCP roadmap for your profession. The process uses a series of questions drawn from the KSAs to allow you to summarise the key pieces of evidence you can use to create your FCP portfolio.

One this form is completed, please email it to FCP@aecc.ac.uk. You will need to include your professional degree, e-learning module certificates, and evidence of linking documents to the roadmap for stage 1 (if appropriate) i.e. case studies, and other evidence. The FCP team will analyse the responses and advice you on a pathway to achieving the FCP roadmap. For further details on the route, please visit our website. As required, we will organise a meeting with one of our team to go through your LNA and appraise options on a 1:1 basis. The meeting will identify any gaps your learning/preparation for working as an FCP and how these can be met either through the taught or portfolio route to FCP.

The outcomes from the LNA process are as follows:

1. Taught route to FCP The PGCert First Contact Practice is the taught route to becoming a recognised First Contact Practitioner (FCP) and made up of 2 academic units of study mapped against the Knowledge, Skills and Attributes required to meet the roadmaps for each profession (HEE, 2021).
2. Supported portfolio route you may be directed towards the supervised portfolio route to FCP rather than the taught route. This may be because you have already completed academic study which is relevant to the roadmap stage 1 and need to build your portfolio to evidence experiential learning at Stage 2. This is supported by a 20 credit masters level unit.

Stage of Learning

I am hoping to apply for:	Please tick appropriate box below:	
PGCert FCP **(Unit 1 = stage 1 Roadmap + stage 2 e-portfolio)** **(60 credit module)**		60 M level credit module: Unit 1: 5 month course covering knowledge and skills required as FCP covering all knowledge, skills and attributes required for stage 1 of the Roadmap to Practice. This is followed by Unit 2: 6 month e-portfolio covering stage 2 of the Roadmap to Practice in clinical practice. You will require a clinical supervisor for this part of the course. This is the full PGCert and is designed for those who have recently started(<2 years FCP) or are shortly to start in First Contact Practice.
Stage 2: supported e-portfolio standalone **(20 Credit module)**		20 M level Credit module: 6 month e-portfolio covering the stage 2 of the Roadmap to Practice. The expectation is that you have completed mapping fully to the Knowledge, Skills and Attributes of the Roadmap on paper. Proof of this and cross referencing of the KSAs to your reflective case studies, university module proof, and other sources of evidence will be examined prior to the LNA discussion meeting. If you are unable to provide this evidence it is recommended that you apply for the PGCert FCP as above.) Please note there is minimal academic teaching on this course apart from the overview of course requirements as the course is supported e-portfolio as per NHSE guidance to complete Stage 2 of the relevant Roadmap to Practice.

Section 1: About you

Name:	

Profession	Paramedic
Initial professional registration: (Date)	
Regulatory Body: (NMC/HCPC etc)	HCPC
Visa status: British Citizen/ Visa	Visa type if appropriate and exp date:

Workplace

Current employer: NHS/GP Practice	
Which ICS do you work in?	
Area of Clinical Practice:	
Job / role:	
Time in current post	

Contact details

Preferred Email:		Phone number:	
Address:			

Qualifications

Additional professional qualifications: (Post initial Registration)			

Academic qualifications from completed programmes of study	Award (Level & Title of programme) (e.g., Diploma, BSc)	Date (Year)	University

Detail of modules/courses studied which relate to FCP role:	Module	Date (Year) and Level (e.g., 5, 6, 7)	Education Provider (e.g. NHS trust, Education Provider, Commercial Provider)

Experience

Summary of current role, responsibilities: *To be considered alongside a current job description, job role and other relevant role related documentation.	

Summary of any previous Advanced Practice roles:	Employer	Dates of Employment	Responsibilities

Section 2: Confirmation of Relevant e-learning for FCP

I confirm that I have completed the following e learning modules required as per the FCP roadmap (as relevant) :

Name of module	Date of completion
1	
2	
3	
4	
5	
6	
7	
8	
9 Personalised Care	

Please note you will be provided to provide evidence of completion prior to enrolment

Section 3: Your knowledge, skills and experience

This section is based around the FCP roadmap for your profession. You are asked to rate your level of knowledge/skill and competence, in relation to the given outcomes. We also ask you to consider the experience that you have relevant to each of the domains where possible. If you have ticked you are applying for PGCert FCP in the table above, you do not need to fill in this section.

Please use the following rating scale for your knowledge, skills, and competence:

0.	I have little or no knowledge or skill in relation to this outcome
1.	I have some knowledge and skill in this outcome, but need help and support with applying this to practice
2.	I am competent in this area – have the knowledge and skill to practice in relation to this outcome without supervision
3.	I am competent and confident in this area – I have knowledge, skill, and experience of practicing in relation to this outcome and feel able to begin to develop and supervise others in this area of practice
4.	I have expertise in this area – I have considerable knowledge, skill, and experience of practicing in relation to this outcome and would feel confident in teaching and supervising others in relation to this area of practice.

Domain A: Person-centred Collaborative Working

Capability 1. Communication and consultation skills					
Cross-referenced SPUC Capabilities	Essential knowledge: Specific knowledge underpinning capabilities	ACP (PCN) Capabilities	FCP Capabilities	Your rating (0-4)	Documentary evidence of level 7 learning
	Critically appraise communication strategies and be able to optimise communication approaches appropriately using skills such as active listening e.g. frequent clarifying, paraphrasing and picking up verbal cues such as pace, pauses and voice intonation.	A1(a)	1a		
Critical skills					
A1(a)	Convey information and address issues in ways that avoid jargon and assumptions; respond appropriately to questions and concerns to promote understanding, including use of verbal, written and digital information.	A1(k)	1b		
A1(b)	Adapt verbal and non-verbal communication styles in ways that are empathetic and responsive to people's communication and language needs and preferences, including levels of spoken English and health literacy.	A1(c)	1c		
A1(c)	Communicate effectively with individuals who require additional assistance to ensure an effective interface with a practitioner, including the use of accessible information.	A1(d)	1d		

A1(d)	Evaluate situations, circumstances or places which make it difficult to communicate effectively (e.g. noisy, distressing or emergency environments), and have strategies in place to overcome these barriers. Adapt communication styles to meet the needs of people who have learning disabilities, are neuro-diverse or other disabilities that impair communication.	A1(e)	1e		
A1(e)	Enable effective communication approaches to non-face to face situational environments e.g. phone, video, email or remote consultation.	A1(i)	1f		
	Consult in a highly organised and structured way, with professional curiosity as required, whilst understanding the constraints of the time limited nature of primary/urgent care consultations and ensure communication is safe and effective.	A1(g)	1g		
	Elicit psychosocial history to provide context for peoples' problems or presentations.	A1(h)	1h		
A1(f)	Manage people effectively, respectfully and professionally (including where applicable, carers and families) especially at times of conflicting priorities and opinions.	A1(l)	1i		
A1(j)	Communicate in ways that build and sustain relationships, seeking, gathering and sharing information appropriately, efficiently and effectively to expedite and integrate people's care.	A1(m)	1j		

A1(k)	Recognise that effective consultation skills are a subset of advanced communication skills highlighted in the capability for history taking and consultation skills.	A1(n)	1k		

Capability 2. Practicing holistically to personalise care and promote public and person health					
Cross-ref SPUC Capabilities	Essential knowledge: Specific knowledge underpinning capabilities	ACP (PCN) Capabilities	FCP Capabilities	Your rating (0-4)	Documentary evidence of level 7 learning
	Critically appraise the impact that a range of social, economic, and environmental factors can have on health outcomes for people, and where applicable their family and carers.	A2(a)	2a		
A2(b)	Evaluate how a person's preferences and experience, including their individual cultural and religious background, can offer insight into their priorities and wellbeing.	A2(d)	2b		
A2(f)	Evaluate the implications of, and apply in practice, the relevant legislation for informed consent and shared decision making (e.g. mental capacity legislation, Fraser Guidelines).	A2(m)	2c		
	Explore and act upon day to day interactions with people to encourage and facilitate changes in behaviour such as smoking cessation, reducing alcohol intake and increasing exercise that will have a positive impact on the health and wellbeing of people, communities and populations i.e. 'Making Every Contact Count' and signpost additional resources.	A2(e)	2d		
A2(d)	Engage people in shared decision making about their care by: • supporting them to express their own ideas, concerns and expectations and encouraging them in asking questions • explaining in non-technical language all available options (including watch and wait approaches or	A2(h)	2f		

Cross-ref SPUC Capabilities	Essential knowledge	ACP (PCN) Capabilities	FCP Capabilities	Your rating (0-4)	Documentary evidence of level 7 learning
	doing nothing) • exploring with them the risks and benefits of each available option and discussing any implications • supporting them to make decisions on their preferred way forward.				
	Recognise and respond appropriately to the impact of psychosocial factors on the presenting problem, condition or general health such as housing issues, work issues, family/carer issues, lack of support, social isolation and loneliness.	A2(g)	2g		
A2(e)	Evaluate how the vulnerabilities in some areas of a person's life might be overcome by promoting resilience in other areas.	A2(j)	2h		
	Advise on and refer people appropriately to psychological therapies and counselling services, in line with their needs and wishes, taking account of local service provision.		2i		
	Advise on sources of relevant local or national self-help guidance, information and support including coaching and social prescrbing.	A2(o)	2j		

Capability 3. Working with colleagues and in teams					
Cross-ref SPUC Capabilities	**Essential knowledge: Specific knowledge underpinning capabilities**	**ACP (PCN) Capabilities**	**FCP Capabilities**	**Your rating (0-4)**	**Documentary evidence of level 7 learning**
Critical skills					
A4(a)	Ensure own work is within professional and personal scope of practice and access advice when appropriate.	A3(a)	3b		
A4(b)	Advocate and utilise the expertise and contribution to peoples' care of other health and social care professionals,	A3(b)	3c		

	and work collaboratively within the multi-professional team to optimise assessment, diagnosis and integrated management and care for people.				
A1(h)	Communicate effectively with colleagues using a variety of media (e.g. verbal, written and digital) to serve peoples' best interests.	A3(e)	3d		
A4(c)	Engage in effective inter-professional communication and collaboration (with clear documentation) to optimise integrated management and care for people.		3e		
	Make direct referrals in a timely manner as indicated by peoples' needs with regard to referral criteria and organisational policies e.g. 2-week wait cancer pathway, urgent or routine referrals.	A3(f)	3f		
A4(d, e)	Participate in effective multi-disciplinary team activity and understand the importance of effective team dynamics. This may include but is not limited to the following; service delivery processes, research such as audit/ quality improvement, significant event review, shared learning and development.	A3(g)	3g		
	Take responsibility for one's own well- being and promote the well-being of the team escalating any causes for concern appropriately.	A3(i)	3h		

Capability 4. Maintaining an ethical approach and fitness to practice					
Cross-ref SPUC Capabilities	**Essential knowledge: Specific knowledge underpinning capabilities**	**ACP (PCN) Capabilities**	**FCP Capabilities**	**Your rating (0-4)**	**Documentary evidence of level 7 learning**
	Critically reflect on how own values, attitudes and beliefs	A4(b)	4a		

	might influence one's professional behaviour.				
	Critical Skills				
	Demonstrate the application of professional practice in one's own day to day first contact clinical practice.	A4(a)	4b		
A5(d)	Identify and act appropriately to promote positive behaviour around equality, diversity and human rights.	A4(c)	4c		
	Reflect on and address and engage appropriately ethical/moral dilemmas encountered during one's own work which may impact on care. Advocate equality, fairness and respect for people and colleagues in one's day to day practice	A4(d)	4d		
	Keep up to date with mandatory training and CPD requirements, encompassing those requiring evidence for a first contact role.	A4(e)	4e		
	Recognise and ensure a balance between professional and personal life that meets work commitments, maintains one's own health, promotes well-being and builds resilience.	A4(f)	4f		
	Demonstrate insight into the health issues primary care can place on personal health and wellbeing (e.g. workload pressures, lone working etc.) when working as an FCP.	A4(g)	4g		
	Promote mechanisms such as complaints, significant events and performance management processes in order to improve people's care.	A4(i)	4h		
	Promote mechanisms such as compliments and letters of thanks to acknowledge and promote good practice.	A4(j)	4i		

Domain B: Assessment, investigations and diagnosis

Capability 5: Information gathering and interpretation					
Cross-ref SPUC Capabilities	**Essential knowledge: Specific knowledge underpinning capabilities**	**ACP (PCN) Capabilities**	**FCP Capabilities**	**Your rating (0-4)**	**Documentary evidence of level 7 learning**
	Understand and apply a range of consultation models appropriate to the clinical situation and appropriately across physical and mental health presentations.	B5(d)	5a		
(new)	Understand the limits of own clinical knowledge and recognise when presentations are outside own scope of practice. Ensure history taking is detailed to enable advice referral as appropriate.	(new)	5b		
Critical Skills					
(new)	Be able to take a succinct, pertinent history when managing the acutely unwell or time- critical patient, balancing the benefits of a detailed history against the need for immediate treatment to preserve life or prevent deterioration.	(new)	5c		
B6(a)	Structure consultations to encourage the patient and/or their carer to express their ideas, concerns, expectations and understanding, using active listening skills and open questions to effectively engage with people and carers.	B5(a)	5d		
	Be able to undertake general history-taking, and focused history-taking to elicit and assess "red flags". Be aware that "red flags" may differ in a primary/urgent care setting compared to an emergency setting (e.g. symptoms	B5(e)	5e		

	suggestive of cancer).				
B6(c)	Synthesise information, considering of factors which may include the presenting complaint, existing complaints, past medical history, genetic predisposition, medications, allergies, risk factors and other determinants of health to establish differential diagnoses.	B5(f)	5f		
B6(d)	Incorporate information on the nature of the person's needs preferences and priorities from various other appropriate sources e.g. third parties, previous histories and investigations.	B5(g)	5g		
B6(e)	Explore and appraise peoples' ideas, concerns and expectations regarding their symptoms and condition, and whether these may act as a driver or form a barrier.	B5(c)	5h		
B6(f)	Critically appraise complex, incomplete, ambiguous and conflicting information gathered from history-taking and/or examination, distilling and synthesising key factors from the appraisal, and identifying those elements that may need to be pursued further.	B5(h)	5i		
B6(g)	Deliver diagnosis and test/investigation results, (including bad news) sensitively and appropriately in line with local or national guidance, using a range of mediums including spoken word and diagrams for example to ensure the person has understands what has been communicated.	B5(i)	5j		
B6(h)	Record all pertinent information gathered concisely and accurately complying with local guidance, legal and professional requirements for confidentiality, data protection and information governance.	B5(j)	5k		

Capability 6 Clinical examination and procedural skills					
Cross-ref SPUC Capabilities	**Essential knowledge: Specific knowledge underpinning capabilities**	**ACP (PCN) Capabilities**	**FCP Capabilities**	**Your rating (0-4)**	**Documentary evidence of level 7 learning**
B7(c)	Demonstrate the ability to apply a range of physical assessment techniques, being informed by an understanding of such techniques' respective validity, reliability, specificity and sensitivity, and the implications of any limitations within such assessments, to enable an appropriate examination.		6a		
(new)	Understand and have insight into the limits of own knowledge, skills, scope of practice and competence, and practice within these boundaries, recognising when referral to another professional for examination may be more appropriate.	(new)	6b		
Critical Skills					
	Ensure the person understands the purpose of any physical examination (including intimate examinations), and/or mental health assessment, describe what will happen and the role of the chaperone where applicable.	B6(a)	6c		
B7(a)	Obtain appropriate consent and ensure where examinations take place, the person is afforded privacy and their dignity is respected (addressing comfort where practicable and reasonable adjustments made as needed). Ensure examination is appropriate and clinically effective.	B6(b)	6d		
B7(b)	Adapt practice to meet the needs of different groups and individuals, including adults, children and those with particular needs (such as cognitive impairment, sensory	B6(c)	6d		

Cross-ref SPUC Capabilities	Essential knowledge	ACP (PCN) Capabilities	FCP Capabilities	Your rating (0-4)	Documentary evidence of level 7 learning
	impairment or learning disability), working with chaperones, where appropriate.				
B7(c)	Apply a range of physical assessment and clinical examination techniques appropriately, systematically and effectively.	B6(d)	6e		
B7(d)	Perform a mental health assessment appropriate to the needs of the person, their presenting problem and manage any risk factors such as suicidal ideation promptly and appropriately.	B6(d)	6f		
	Use nationally recognised tools where appropriate during assessment.	B6(f)	6g		
B7(e)	Using a systematic approach, identify, analyse and interpret potentially significant information from the physical and mental health assessment (including any ambiguities).		6h		
B7(f)	Demonstrate accurate and concise documentation of examinations or procedures undertaken to support a clinical management plan, and in compliance with local guidance, legal and professional requirements for confidentiality, data protection and information governance.	B6(h)	6i		

Capability 7: Making a Diagnosis					
Paramedics have extensive experience of assessing patients, reaching working diagnoses and providing appropriate treatment. The FC Paramedic can adapt these skills to a primary care setting, where most presentations will not be life threatening, whilst maintaining the ability to recognise serious underlying pathology.					
Cross-ref SPUC Capabilities	Essential knowledge: Specific knowledge underpinning capabilities	ACP (PCN) Capabilities	FCP Capabilities	Your rating (0-4)	Documentary evidence of level 7 learning
B8(g)	Understand how to make a diagnosis in a structured	B7(a)	7a		

	way using a problem-solving method informed by an understanding of probability based on prevalence, incidence and natural history of illness to aid decision making.				
B7(g)	Understand key diagnostic biases and common errors and the issues relating to diagnosis in the face of ambiguity and incomplete data.		7b		
(new)	Critically appraise own decision-making processes by applying underpinning models of complex clinical decision making into practice.	(new)	7c		
(new)	Understand diagnostic uncertainty, sharing uncertainty with patients. Recognise the urgency and necessity of further assessment or investigations required to reach a diagnosis by assessing the relative risks as being immediately life threatening, serious or minor.	(new)	7d		
Critical Skills					
	Target further investigations appropriately and efficiently following due process with an understanding of respective validity, reliability, specificity and sensitivity and the implications of these limitations.	B7(b)	7e		
B8(b)	Understand the importance, and implications, of findings and results and take appropriate action. This may be urgent referral/escalation as in life threatening situations, or further investigation, treatment or referral.	B7(c)	7f		
	Synthesise the expertise of multi- professional teams to aid in diagnosis where needed.	B7(d)	7g		
B8(f)	Focus the objective data gathering and prioritise investigations in the context of the patient presentation and the clinical environment.		7h		
B8(c)	Formulate a differential diagnoses based on subjective and	B7(e)	7i		

Cross-ref	Essential knowledge	ACP (PCN)	FCP	Your rating	Documentary evidence
	where available objective data, identifying where necessary the need for investigations to aid diagnoses.				
B8(a)	Interpret the subjective and objective findings from the consultation. Exercising clinical judgement, determine differential diagnoses and a working diagnosis in relation to all information obtained. This may include the use of time as a diagnostic tool where appropriate.	B7(f)	7j		
	Revise hypotheses in the light of additional information and think flexibly around problems, generating functional and safe solutions.	B7(g)	7k		
B8(f)	Recognise when information/data may be incomplete (e.g. patient personally unable to provide a comprehensive history) and take mitigating actions to manage risk appropriately. Recognise the limitations of collateral information from others.	B7(h)	7l		
B8(h)	Be confident in and take responsibility for own decisions whilst being able to recognise when a clinical situation is beyond own capability or competence and escalate appropriately.	B7(i)	7m		

Domain C: Condition management, treatment and prevention

Capability 8: Clinical Management					
Cross-ref SPUC Capabilities	Essential knowledge: Specific knowledge underpinning capabilities	ACP (PCN) Capabilities	FCP Capabilities	Your rating (0-4)	Documentary evidence of level 7 learning
(new)	Critically reflect on limits of own knowledge, and seek advice, when uncertain about correct clinical management.	(new)	8a		
Critical skills					

C9(a)	Vary the management options responsively according to the circumstances, priorities, needs, preferences, risks and benefits for those involved with an understanding of local service availability and relevant guidelines and resources.	C8(a)	8b		
	Consider a "watch and wait" approach where appropriate.	C8(b)	8c		
	Safely prioritise problems in settings where the person presents with multiple issues. Manage any conflict between patient priorities and clinically urgent problems.	C8(c)	8d		
C9(c)	Implement shared management/ personalised care/support plans in collaboration with people (and where appropriate carers), families and other healthcare professionals.	C8(d)	8e		
C9(b)	Ensure the management plan considers all options that are appropriate for the care pathway.		8f		
C9(d)	Arrange appropriate follow up that is safe and timely to monitor changes in the person's condition in response to treatment and advice, recognising the indications for a changing clinical picture and the need for escalation or alternative treatment as appropriate.	C8(e)	8g		
	Evaluate outcomes of care against existing standards and patient outcomes, managing/ adjusting plans appropriately in line with best available evidence.	C8(f)	8h		
C9(e)	Identify when interventions have been successful and complete episodes of care with the person, offering appropriate follow- on advice to ensure people understand what to do if situations/circumstances change.	C8(g)	8i		
	Promote continuity of care as appropriate to the person and practice setting.	C8(h)	8j		
	Suggest a variety of follow-up arrangements that are safe and appropriate, whilst also upholding the person's	C8(i)	8k		

	autonomy.				
	Ensure safety netting advice is appropriate and the person understands when to seek urgent or routine review.	C8(j)	8l		
	Support people who might be classed as frail and work with them utilising best practice.	C8(k)	8m		
	Recognise, support and proactively manage people who require palliative care and those in their last year of life, extending the support to carers and families as appropriate.	C8(l)	8n		

Capability 9: Prescribing treatment, administering drugs/medication, pharmacology.					
Cross-ref SPUC Capabilities	Essential knowledge: Specific knowledge underpinning capabilities	ACP (PCN) Capabilities	FCP Capabilities	Your rating (0-4)	Documentary evidence of level 7 learning
C10(d)	Demonstrate knowledge of drug legislation including medicines management adhering to legal frameworks and use appropriate source literature where required (e.g. British National Formulary).		9a		
(new)	Understand the legal mechanisms by which drugs may be supplied or administered by paramedics ie. exemptions under the Human Medicine Regulations (2012), Patient Group Directions, Patient Specific Directions and Independent and Supplementary Prescribing, and the advantages and limitations of each. Understand the basis on which you may be supplying and administering medicines in your setting, always adhering to the legal mechanism and frameworks.	(new)	9b		
Critical skills					
	Promote personalised, patient-shared decision-	C10(b)	9c		

	making to support adherence leading to concordance.				
C10(c)	When using PGD's practice in line with the principles of antimicrobial stewardship and antibiotic resistance using available local or national resources.	C10(e)	9d		
	Be able to confidently explain and discuss the risks and benefits of medication with people, using appropriate tools to assist as necessary.	C10(g)	9e		
C10(f)	Recognise adverse drug reactions and manage appropriately, including reporting as required through the correct route.		9f		
C10(g)	Advise people on medicines management, including compliance, the expected benefits and limitations, and inform them impartially on the advantages and disadvantages in the context of other management options.	C10(h)	9g		
C10(h)	Identify sources of further information (e.g. websites or leaflets) and advice (e.g.pharmacists) and signpost appropriately to complement the advice given.		9h		
	Understand a range of options available other than supplying, administering or prescribing (e.g. not prescribing, promoting self-care, advice on over-the-counter medicines).	C10(i)	9i		
	Facilitate and or prescribe non-medicinal therapies such as psychotherapy, lifestyle changes and social prescribing.	C10(j)	9j		
C10(i)	Maintain accurate, legible and contemporaneous records of medication prescribed and/or administered and advice given in relation to medicine.	C10(l)	9k		

Domain D: Leadership and management, education and research

Capability 10: Leadership, management and organisation					
Cross-ref SPUC Capabilities	Essential knowledge: Specific knowledge underpinning capabilities	ACP (PCN) Capabilities	FCP Capabilities	Your rating (0-4)	Documentary evidence of level 7 learning
	Show consideration for people and colleagues, carrying out both clinical and non-clinical aspects of work in a timely manner, demonstrating effective time management within the constraints of the time limited nature of general practice/ primary care.	D11(a)	10a		
Critical skills					
	Respond positively when services are under pressure, acting in a responsible and considered way to ensure safe practice.	D11(b)	10b		
	Role model the values of being an FCP(Paramedic) and their place of work, demonstrating a person-centred approach to service delivery and development.	D11(d)	10c		
	Actively engage in peer review to inform own and other's practice, formulating and implementing strategies to act on learning and make improvements.	D11(g)	10d		
	Actively seek and be positively responsive to feedback and involvement from people, families, carers, communities and colleagues in the co-production of service improvements.	D11(h)	10e		
	Demonstrate receptiveness to challenge and preparedness to constructively challenge others, escalating concerns that affect people, families, carers, communities and colleagues' safety and well-being when necessary.	D11(m)	10f		
	Negotiate an individual scope of practice within legal, ethical, professional and organisational policies,	D11(n)	10g		

	governance and procedures, with a focus on managing risk and upholding safety.				
	Deal with compliments and complaints appropriately, following professional standards and applicable local policy.	D11(o)	10h		
	Actively participate in Significant Event Review and share the learning.	D11(p)	10i		

Capability 11: Education and development					
Cross-ref SPUC Capabilities	Essential knowledge: Specific knowledge underpinning capabilities	ACP (PCN) Capabilities	FCP Capabilities	Your rating (0-4)	Documentary evidence of level 7 learning
13(a)	Critically assess and address own learning needs, negotiating a personal development plan that reflects a breadth of ongoing professional development.	D12(a)	11a		
Critical skills					
13(b)	Engage in self-directed learning, critically reflecting on practice to maximise skills and knowledge.	D12(b)	11b		
	Actively seek and be open to feedback on own practice by colleagues to promote ongoing development.	D12(c)	11c		

Capability 12: Research and evidence based practice					
Cross-ref SPUC Capabilities	Essential knowledge: Specific knowledge underpinning capabilities	ACP (PCN) Capabilities	FCP Capabilities	Your rating (0-4)	Documentary evidence of level 7 learning
Critical skills					
	Understand and utilise the evidence of best practice to inform own practice.	D12(c)	12a		
	Support quality improvement initiatives/ projects – sharing	D12 (e)	12b		

| | outcomes and promoting change. | | | | |