

# COGConnect Consultation Observation Guide

Consulter's name.....

Use this form to provide feedback for a Conluter. Not all aspects will apply, depending on the nature of the consultation.

| Competence task   | Score 0=not done; 1=some done poorly;<br>(Tick 'O') 2=some done well; 3=most done well |   |   |   | Date:   |
|---|--|---|---|---|---|
| <b>Preparing and opening the session</b>  | 0  | 1 | 2 | 3 | Points of strength & Points for improvement     |
| Prepares self and consultation space and accesses medical record prior to direct patient contact.<br>Introduces self, checks correct patient, builds rapport.<br>Identifies the patient's main reason(s) for attending and negotiates this agenda as appropriate.   | 0  | 0 | 0 | 0 |   |
| <b>Gathering a well-rounded impression</b>  | 0  | 1 | 2 | 3 | Points of strength & Points for improvement     |
| Obtains <b>biomedical perspective</b> : presenting problem and relevant medical history including red flags, PC, HPC, PMH, RoS, DH & allergies <i>as appropriate to presentation</i> .  | 0  | 0 | 0 | 0 |   |
| Elicits the <b>patient's perspective</b> : ideas, concerns, expectations, impact and emotions (ICEIE).  | 0  | 0 | 0 | 0 |   |
| Elicits <b>relevant background information</b> : work and family situation, lifestyle factors (eg sleep, diet, physical activity, smoking, drugs and alcohol) and emotional life/state.   | 0  | 0 | 0 | 0 |   |
| Conducts a <b>focused examination</b> of the patient.<br>Gains consent, cleans hands, examines courteously and sensitively.<br>Explains examination findings.   | 0  | 0 | 0 | 0 |   |
| <b>Formulating</b>  | 0  | 1 | 2 | 3 | Points of strength & Points for improvement     |
| Summarises the information gathered so far.<br>Shows evidence of understanding current problems/issues and differential diagnoses with reference to predisposing, precipitating and perpetuating causes.<br>Makes judicious choices regarding investigations, treatments and human factors (eg dealing sensitively with patient concerns).  | 0  | 0 | 0 | 0 |   |
| <b>Explaining</b>   | 0  | 1 | 2 | 3 | Points of strength & Points for improvement     |
| Explains appropriately, taking account of the patient's current understanding and wishes (ICEIE).<br>Provides information in jargon-free language, in suitable amounts and using visual aids and metaphors as appropriate.<br>Checks that the patient understands.  | 0  | 0 | 0 | 0 | Any examples of chunking, checking, clarifying? |
| <b>Activating</b>   | 0  | 1 | 2 | 3 | Points of strength & Points for improvement     |
| Affirms the patient's current self-care.<br>Enables the patient's active part in improving and sustaining health through, for instance, smoking cessation, healthier eating, physical activity, better sleep and emotional wellbeing.<br>Enables the patient to consider self-care, using skills of motivational interviewing, where appropriate.   | 0  | 0 | 0 | 0 |   |
| <b>Planning</b>   | 0  | 1 | 2 | 3 | Points of strength & Points for improvement     |
| Develops a clear management plan with the patient.<br>Shares decision-making appropriately.   | 0  | 0 | 0 | 0 |   |
| <b>Closing and housekeeping</b>   | 0  | 1 | 2 | 3 | Points of strength & Points for improvement     |
| Brings consultation to a timely conclusion, offers succinct summary and checks the patient understands.<br>Gives patient opportunity to gain clarity via questions.   | 0  | 0 | 0 | 0 |   |
| Arranges follow-up and 'safety-nets' the patient with clear instructions for what to do if things do not go as expected.  | 0  | 0 | 0 | 0 |   |
| <b>Integrating</b>  | 0  | 1 | 2 | 3 | Points of strength & Points for improvement     |
| Writes appropriate consultation notes, referrals, etc.<br>Identifies any personal learning needs.<br>Identifies any personal emotional impact of the consultation.  | 0  | 0 | 0 | 0 |   |
| <b>Generic Consulting Skills</b>  | 0  | 1 | 2 | 3 | Points of strength & Points for improvement     |
| <i>Posture.</i><br><i>Voice:</i> pitch, rate, volume.<br><i>Listening skills:</i> silence, active listening, questioning techniques.<br><i>Counselling skills:</i> <b>O</b> pen questions, <b>A</b> ffirmations, <b>R</b> eflections (simple and advanced) and <b>S</b> ummaries.<br><i>Advanced skills:</i> picking up on cues, scan and zoom, giving space to the patient, conveying hope and confidence. | 0  | 0 | 0 | 0 |   |
| <b>Organisation and efficiency</b>  | 0  | 1 | 2 | 3 | Points of strength & Points for improvement     |
| Fluency, coherence, signposting the stages of the consultation.<br>Keeping to time.   | 0  | 0 | 0 | 0 |   |

## The COGConnect Consultation Observation Guide (CC-COG)

The skills of effective consulting are best learned through trying them out and getting feedback on our efforts. Because lots of stuff is going on, even in simple scenarios, it can be difficult for observers to recall their observations. CC-COG has been designed to help observers to structure and communicate their feedback to consulters. COGConnect is a codification of what already happens in practice – so its contents will come as no surprise.

### Preparation

1. The observer needs a copy of this form and something to lean on – a clipboard is ideal
2. Observer and consulter can share in advance any areas they might like to focus on \*
3. The observer should read over CC-COG in advance of observing (not necessary for the consulter to do this)

### During the Consultation

4. Observer pays attention to generic skills and skills specific to particular phases of the consultation
5. Observer should write down snippets of what is said to trigger recall when giving feedback
6. Observer should mainly focus on the **consulter** whilst making frequent notes on the Observation Guide

### After the Consultation

7. The observer should take a minute or so to check over their observations, rather than speaking immediately
8. The consulter should make a few notes on what they noticed about their consultation

### When Sharing Observations

9. Ask initially for the learner's perspective, and when appropriate, that of the patient/actor
10. Affirm the skills that the learner has displayed (there will be many)
11. Correct any factual or procedural errors
12. Share 3-5 "observations as questions" eg "What if you had explored more about home life?"

### After Sharing

13. Observer gives the consulter the Observation Guide with their notes

\* CC-COG is based on the 10 stages of COGConnect. One consultation will not cover all of these and in the same sequence. Often, particularly in the simulation context, the learner may focus her efforts on one particular skill, such as explaining. In real consultations this might not be practical for the consulter, but the observer can choose to focus on a particular aspect – such as body language or use of open questions.