

Inter-specialty Cancer Training Programme Curriculum

Entrustable Professional Activities, Competencies and Enabling Competencies

Clinical Expert

- Work constructively with other professions and specialties to develop a management plan for patients with a cancer diagnosis
- 2) Work constructively with other professions and specialties to implement a treatment strategy
- 3) Work constructively with other professions and specialties to develop and implement a management plan for survivorship

| Contribute effectively to tumour board discussions | Explain the value of pathological factors and biomarkers in determining treatment decisions |
|--|---|
| | Describe indications, contraindications and radiation burden of imaging modalities and the optimal imaging strategy for staging and response assessment based on the imaging anatomy and pathways of spread for the common cancer types |
| | Describe the role of imaging in treatment planning e.g., surgery, radiotherapy |
| | Describe the wide range of interventional techniques used in oncological radiology and their potential risks and complications |
| | Apply national or international guidelines and research evidence to the management of an individual patients |
| | Analyse clinical reasoning processes demonstrating understanding of cognitive bias, human factors and diagnostic error |
| | Discuss the implications of hereditary gene mutations on guiding the care of patients and their families |



| Discuss paraneoplastic syndromes and their management |
|---|
| Describe the different types of radiotherapy, their mechanisms of action, dosing and administration |
| Describe the role of radiotherapy and therapeutic isotopes in the treatment of cancer either offering a significant improvement in local recurrence thereby impacting on disease free survival and overall survival or improving symptoms |
| Discuss the scheduling of systemic anti-cancer therapy, radiotherapy and surgery in patients whose cancers are treated with combined modality therapy |
| Discuss the role of surgery either as a primary modality in cure or palliation or in enabling other treatment modalities (e.g., placement of clips, spacers or omentum) to enable optimal radiation treatment, outline common operations for cancer and the role of adequate margins following surgery |
| Outline the interpretation of pathological response found at surgery following neoadjuvant therapies and how this may impact on the surgical outcome or the adjuvant treatment strategy |
| Outline the mechanism of action of commonly used systemic therapies including chemotherapy, monoclonal antibodies, hormonal therapies, tyrosine kinase inhibitors and immune therapies |
| Discuss the role of commonly used systemic therapies including chemotherapy, monoclonal antibodies, hormonal therapies, tyrosine kinase inhibitors and immune therapies in the neoadjuvant, adjuvant, curative and palliative settings |
| Explain the criteria used to assess response to systemic therapy e.g., the RECIST criteria |
| Discuss the management of a patient when there is therapeutic uncertainty, complexity and ambiguity |
| Identify when a patient should be offered the opportunity to enter a research trial |
| Justify a decision that radiotherapy, systemic therapy or surgery are not indicated due to cancer stage, performance status or comorbidities |
| Discuss the role of palliative care in the management of the patient |
| Structure the consultation effectively taking a focused history, undertaking a careful clinical examination and ordering relevant investigations to accurately diagnose conditions that may require curative, adjuvant, neoadjuvant or palliative radiotherapy, chemotherapy or surgical intervention including emergency treatment |
| |



| verbal information about the development of cancer with a view to addressing their informational and supportive care needs Support people affected by cancer through the diagnosis and staging process. Undertake initial and comprehensive assessments (using validated tools where appropriate) to identify people affected by cancers' informational, physical, emotional and social care needs (where relevant) during the diagnostic and staging process Evaluate and discuss with the patient the possible management strategies taking into account the factors related to the cancer, the patient's goals, their comorbidities and frailty and the adverse effects of possible options Modify approach to address pregnancy Explain the implications of hereditary genetic abnormalities and refer appropriately for genetic counseilling Discuss the influence of pre-existent psychological/psychiatric illness and how to support and treat the patient Encourage people affected by cancer to utilise appropriate local, national and/or international cancer organisations for further information, psychosocial, spiritual and/or financial support Understand the role of optimisation of nutrition before surgery, radiotherapy, chemotherapy and chemoradiotherapy and be aware of the importance of nutritional support if malnutrition is present in patients who may require these therapies Discuss assessment and management of pain throughout the cancer journey including in vulnerable populations such as the frail elderly, adults with learning disabilities and those at risk of substance abuse disorders Discuss the possible interactions between systemic anti-cancer therapies, radiotherapy and surgery in patients whose cancers are treated with combined modality therapy Take a focused history, undertake a careful clinical examination and order relevant investigations to accurately diagnose the acute side effects of systemic therapies including chemotherapy, monoclonal antibodies, hormonal therapies and tyrosine kinase inhibitors Discuss side effects of co | | recognise when referral to another specialty or the Intensive Care |
|--|---|---|
| staging process. Undertake initial and comprehensive assessments (using validated tools where appropriate) to identify people affected by cancers informational, physical, emotional and social care needs (where relevant) during the diagnostic and staging process Evaluate and discuss with the patient the possible management strategies taking into account the factors related to the cancer, the patient's goals, their comorbidities and frailty and the adverse effects of possible options Modify approach to address pregnancy Explain the implications of hereditary genetic abnormalities and refer appropriately for genetic counselling Discuss the influence of pre-existent psychological/psychiatric illness and how to support and treat the patient Encourage people affected by cancer to utilise appropriate local, national and/or international cancer organisations for further information, psychosocial, spiritual and/or financial support Support the patient prior to and during treatment Understand the role of optimisation of nutrition before surgery, radiotherapy, chemotherapy and chemoradiotherapy and be aware of the importance of nutritional support if mainutrition is present in patients who may require these therapies Discuss assessment and management of pain throughout the cancer journey including in vulnerable populations such as the frail elderly, adults with learning disabilities and those at risk of substance abuse disorders Discuss the possible interactions between systemic anti-cancer therapies, radiotherapy and surgery in patients whose cancers are treated with combined modality therapy Take a focused history, undertake a careful clinical examination and order relevant investigations to accurately diagnose the acute side effects of systemic therapies including chemotherapy, monoclonal antibodies, hormonal therapies and tyrosine kinase inhibitors Discuss side effects of commonly used drugs including complementary therapies and their interactions with each other and with radiotherapy and systemic anti-canc | | verbal information about the development of cancer with a view to |
| strategies taking into account the factors related to the cancer, the patient's goals, their comorbidities and frailty and the adverse effects of possible options Modify approach to address pregnancy Explain the implications of hereditary genetic abnormalities and refer appropriately for genetic counseilling Discuss the influence of pre-existent psychological/psychiatric illness and how to support and treat the patient Encourage people affected by cancer to utilise appropriate local, national and/or international cancer organisations for further information, psychosocial, spiritual and/or financial support Support the patient prior to and during treatment Understand the role of optimisation of nutrition before surgery, radiotherapy, chemotherapy and chemoradiotherapy and be aware of the importance of nutritional support if malnutrition is present in patients who may require these therapies Discuss assessment and management of pain throughout the cancer journey including in vulnerable populations such as the frail elderly, adults with learning disabilities and those at risk of substance abuse disorders Discuss the possible interactions between systemic anti-cancer therapies, radiotherapy and surgery in patients whose cancers are treated with combined modality therapy Take a focused history, undertake a careful clinical examination and order relevant investigations to accurately diagnose the acute side effects of systemic therapies including chemotherapy, monoclonal antibodies, hormonal therapies and tyrosine kinase inhibitors Discuss side effects of commonly used drugs including complementary therapies and their interactions with each other and with radiotherapy and systemic anti-cancer therapies Discuss interactions between food and systemic anti-cancer | | staging process. Undertake initial and comprehensive assessments (using validated tools where appropriate) to identify people affected by cancers' informational, physical, emotional and social care |
| Explain the implications of hereditary genetic abnormalities and refer appropriately for genetic counselling Discuss the influence of pre-existent psychological/psychiatric illness and how to support and treat the patient Encourage people affected by cancer to utilise appropriate local, national and/or international cancer organisations for further information, psychosocial, spiritual and/or financial support Support the patient prior to and during treatment Understand the role of optimisation of nutrition before surgery, radiotherapy, chemotherapy and chemoradiotherapy and be aware of the importance of nutritional support if malnutrition is present in patients who may require these therapies Discuss assessment and management of pain throughout the cancer journey including in vulnerable populations such as the frail elderly, adults with learning disabilities and those at risk of substance abuse disorders Discuss the possible interactions between systemic anti-cancer therapies, radiotherapy and surgery in patients whose cancers are treated with combined modality therapy Take a focused history, undertake a careful clinical examination and order relevant investigations to accurately diagnose the acute side effects of systemic therapies including chemotherapy, monoclonal antibodies, hormonal therapies and tyrosine kinase inhibitors Discuss side effects of commonly used drugs including complementary therapies and their interactions with each other and with radiotherapy and systemic anti-cancer therapies Discuss interactions between food and systemic anti-cancer | | strategies taking into account the factors related to the cancer, the patient's goals, their comorbidities and frailty and the adverse |
| refer appropriately for genetic counseiling Discuss the influence of pre-existent psychological/psychiatric illness and how to support and treat the patient Encourage people affected by cancer to utilise appropriate local, national and/or international cancer organisations for further information, psychosocial, spiritual and/or financial support Support the patient prior to and during treatment Understand the role of optimisation of nutrition before surgery, radiotherapy, chemotherapy and chemoradiotherapy and be aware of the importance of nutritional support if malnutrition is present in patients who may require these therapies Discuss assessment and management of pain throughout the cancer journey including in vulnerable populations such as the frail elderly, adults with learning disabilities and those at risk of substance abuse disorders Discuss the possible interactions between systemic anti-cancer therapies, radiotherapy and surgery in patients whose cancers are treated with combined modality therapy Take a focused history, undertake a careful clinical examination and order relevant investigations to accurately diagnose the acute side effects of systemic therapies including chemotherapy, monoclonal antibodies, hormonal therapies and tyrosine kinase inhibitors Discuss side effects of commonly used drugs including complementary therapies and their interactions with each other and with radiotherapy and systemic anti-cancer therapies Discuss interactions between food and systemic anti-cancer | | Modify approach to address pregnancy |
| illness and how to support and treat the patient Encourage people affected by cancer to utilise appropriate local, national and/or international cancer organisations for further information, psychosocial, spiritual and/or financial support Understand the role of optimisation of nutrition before surgery, radiotherapy, chemotherapy and chemoradiotherapy and be aware of the importance of nutritional support if malnutrition is present in patients who may require these therapies Discuss assessment and management of pain throughout the cancer journey including in vulnerable populations such as the frail elderly, adults with learning disabilities and those at risk of substance abuse disorders Discuss the possible interactions between systemic anti-cancer therapies, radiotherapy and surgery in patients whose cancers are treated with combined modality therapy Take a focused history, undertake a careful clinical examination and order relevant investigations to accurately diagnose the acute side effects of systemic therapies including chemotherapy, monoclonal antibodies, hormonal therapies and tyrosine kinase inhibitors Discuss side effects of commonly used drugs including complementary therapies and their interactions with each other and with radiotherapy and systemic anti-cancer therapies Discuss interactions between food and systemic anti-cancer | | |
| national and/or international cancer organisations for further information, psychosocial, spiritual and/or financial support Understand the role of optimisation of nutrition before surgery, radiotherapy, chemotherapy and chemoradiotherapy and be aware of the importance of nutritional support if malnutrition is present in patients who may require these therapies Discuss assessment and management of pain throughout the cancer journey including in vulnerable populations such as the frail elderly, adults with learning disabilities and those at risk of substance abuse disorders Discuss the possible interactions between systemic anti-cancer therapies, radiotherapy and surgery in patients whose cancers are treated with combined modality therapy Take a focused history, undertake a careful clinical examination and order relevant investigations to accurately diagnose the acute side effects of systemic therapies including chemotherapy, monoclonal antibodies, hormonal therapies and tyrosine kinase inhibitors Discuss side effects of commonly used drugs including complementary therapies and their interactions with each other and with radiotherapy and systemic anti-cancer therapies Discuss interactions between food and systemic anti-cancer | | |
| radiotherapy, chemotherapy and chemoradiotherapy and be aware of the importance of nutritional support if malnutrition is present in patients who may require these therapies Discuss assessment and management of pain throughout the cancer journey including in vulnerable populations such as the frail elderly, adults with learning disabilities and those at risk of substance abuse disorders Discuss the possible interactions between systemic anti-cancer therapies, radiotherapy and surgery in patients whose cancers are treated with combined modality therapy Take a focused history, undertake a careful clinical examination and order relevant investigations to accurately diagnose the acute side effects of systemic therapies including chemotherapy, monoclonal antibodies, hormonal therapies and tyrosine kinase inhibitors Discuss side effects of commonly used drugs including complementary therapies and their interactions with each other and with radiotherapy and systemic anti-cancer therapies Discuss interactions between food and systemic anti-cancer | | national and/or international cancer organisations for further |
| cancer journey including in vulnerable populations such as the frail elderly, adults with learning disabilities and those at risk of substance abuse disorders Discuss the possible interactions between systemic anti-cancer therapies, radiotherapy and surgery in patients whose cancers are treated with combined modality therapy Take a focused history, undertake a careful clinical examination and order relevant investigations to accurately diagnose the acute side effects of systemic therapies including chemotherapy, monoclonal antibodies, hormonal therapies and tyrosine kinase inhibitors Discuss side effects of commonly used drugs including complementary therapies and their interactions with each other and with radiotherapy and systemic anti-cancer therapies Discuss interactions between food and systemic anti-cancer | Support the patient prior to and during treatment | radiotherapy, chemotherapy and chemoradiotherapy and be aware of the importance of nutritional support if malnutrition is present in |
| therapies, radiotherapy and surgery in patients whose cancers are treated with combined modality therapy Take a focused history, undertake a careful clinical examination and order relevant investigations to accurately diagnose the acute side effects of systemic therapies including chemotherapy, monoclonal antibodies, hormonal therapies and tyrosine kinase inhibitors Discuss side effects of commonly used drugs including complementary therapies and their interactions with each other and with radiotherapy and systemic anti-cancer therapies Discuss interactions between food and systemic anti-cancer | | cancer journey including in vulnerable populations such as the frail elderly, adults with learning disabilities and those at risk of |
| and order relevant investigations to accurately diagnose the acute side effects of systemic therapies including chemotherapy, monoclonal antibodies, hormonal therapies and tyrosine kinase inhibitors Discuss side effects of commonly used drugs including complementary therapies and their interactions with each other and with radiotherapy and systemic anti-cancer therapies Discuss interactions between food and systemic anti-cancer | | therapies, radiotherapy and surgery in patients whose cancers are |
| complementary therapies and their interactions with each other and with radiotherapy and systemic anti-cancer therapies Discuss interactions between food and systemic anti-cancer | | and order relevant investigations to accurately diagnose the acute side effects of systemic therapies including chemotherapy, monoclonal antibodies, hormonal therapies and tyrosine kinase |
| | | complementary therapies and their interactions with each other and with radiotherapy and systemic anti-cancer therapies |
| | | |



| | Describe prophylactic strategies that can reduce and minimise the frequency and/or severity of complications/toxicities with systemic anti-cancer therapies |
|---------------------|--|
| | Outline appropriate treatment for patients experiencing toxicities from systemic anti-cancer therapies in the acute setting |
| | Describe the adverse events reporting system |
| | Take a focused history, undertake a careful clinical examination and order relevant investigations to accurately diagnose acute toxicities from radiotherapy or chemoradiotherapy and outline appropriate treatment |
| Manage survivorship | Develop a long term strategy for follow up of the patient following treatment for cancer including a plan for patient specific rehabilitation and surveillance imaging |
| | Provide information to people affected by cancer to promote and support self-care including the role of exercise, diet, smoking cessation or alcohol as appropriate |
| | Know who to refer to for issues such as employment, rights/benefits; f financial matters such as insurance and mortgages, and challenges such as the logistics of international travel and holidays |
| | Recognise the importance of smooth transitions such as between acute health care settings and home care, from active treatment to survival programmes, or from paediatric to adult cancer services |
| | Demonstrate knowledge and understanding of how cancer and therapies for this can affect teenagers and young adult including short and long term fertility, emotional implications, education and employment |
| | Educate people affected by cancer to monitor for and report signs of acute, chronic and late toxicities of cancer treatments |
| | Demonstrate awareness of the range of services and professionals including statutory, voluntary and charitable organisations, available to support people affected by cancer and refer appropriately to meet the individual need of people affected by cancer |
| | Consider the needs of younger and older patients who may not have capacity to make decisions tor themselves |
| | Take a focused history to diagnose the common psychological sequelae following a cancer diagnosis and treatment for cancer, manage them or refer appropriately to other specialties |
| | Discuss Patient Related Outcome Measures (PROMS) |
| | Take a focused history, undertake a careful clinical examination and order relevant investigations to accurately diagnose the late side effects of radiotherapy, systemic anti-cancer therapies, radiochemotherapy and surgery for cancer. Discuss options for managing these and implement them or refer appropriately to other specialties |



| Manage patients with relapsed disease | Describe the patterns of recurrence in common cancers |
|---------------------------------------|--|
| | Take a careful history, perform a careful clinical examination and request relevant investigations to diagnose relapsed disease |
| | Take a focused history, undertake a careful clinical examination and order relevant investigations to evaluate the possible management strategies taking into account the factors related to the cancer including whether there is a possibility of curative treatment, the patient's goals, their comorbidities and frailty and the adverse effects of the possible options |
| | Recognise when radiotherapy, systemic therapy and surgery are not indicated |
| | Discuss the role of palliative care in the management of the patient. Implement treatment to control symptoms or refer appropriately to other specialties |
| | Recognise the final phase of life |
| | Inform, support and educated people affected by cancer about palliative and end of life care where appropriate and to elicit their preferences with respect to goals of care and the transition between care aimed at cure and end of life care including appropriate discussions regarding Do not resuscitate orders or DNR |
| | Demonstrate awareness of the legal importance of living wills and advance directives and how these may be arranged by patients |
| | Undertake a holistic assessment of the needs, concerns and symptoms commonly experienced by people affected by cancer receiving palliative and/or end of life care, recognising and supporting vulnerable patients e.g., the elderly, cognitively impaired and responding to different cultural and religious perspectives |
| | Support and counsel bereaved families and carers. Discuss the impact of loss, grief and bereavement including the long term effects |



Communicator

4) Communicate appropriately and effectively with patients, their relatives and carers

| Build a therapeutic relationship with patients and their relatives | Discuss the theory underpinning communication skills |
|--|--|
| | Effectively utilise verbal, written and digital modes of communication to provide information, education and support in an emphatic, clear, understandable and caring manner while maintaining confidentiality |
| | Assess for and address any patient-related, health care professional-related or environmental barriers to effective communication |
| Elicit and synthesise accurate and relevant information from patients | Select and adopt an appropriate communications approach, from a range of core communication and consultation skills, to effectively assess the informational, educational and supportive care needs of people affected by cancer throughout the cancer trajectory, reacting to body language and verbal cues with relevant observations and questions and demonstrating active listening |
| | Communicate clearly with patients respecting their social, political, cultural, religious and sexual standpoint |
| Develop management plans with patients and their families that reflect their health care needs and goals | Give clear objective information about standard treatments, clinical trials and experimental treatments including the process, side effects and risks |
| | Discuss the results of the investigations clearly and empathetically with the patient and their carers |
| | Ascertain if the patient and their families have understood the information and take effective measures is this is not the case and to assist them to access reliable sources of information including trusted websites and patient organisations |
| | Explain to the patient that their care is being discussed by an MDT and the nature of the decision making process |
| | Discuss the beliefs of people affected by cancer regarding alternative and complementary therapies |
| | Take informed consent from patients and know the legal position if the patient lacks capacity |
| Manage emotionally charged conversations | Elicit the patient's wishes about the information they wish to receive at various stages of their journey and break bad news in an appropriate way including communicating sensitively, truthfully and without ambiguity about, for example, life with cancer, sexual issues and the dying process. |
| | Disclose errors and adverse safety events appropriately |



| Document accurately and share appropriately information about the consultation | Detail in a timely and accurate manner details of the consultation and management plan, either in a written or digital form, complying with national legislation communicating this information clearly to the health care team |
|--|---|
| | Maintain patient confidentiality |

Collaborator

5) Work effectively with other health care professionals to provide safe care and to optimise the quality of treatment

| Work effectively across disciplinary and professional boundaries with other members of the health care professions | Contribute to effective discussions in multidisciplinary teams (MDT). Understand and value the roles of all health care professionals and encourage team working to optimise treatment. Willing to compromise to reach a consensus. Respect the views of others and the conclusions of the MDT |
|--|--|
| | Negotiate overlapping responsibilities for shared care of patients |
| Transfer care safely to another health care professional | Determine when care should be transferred to another physician or health care professional and facilitate continuity of care by timely, effective communication. This may include supporting patient's request for further opinions. |
| Support colleagues | Identify when colleagues are under pressure and offer help |



Leader

- 6) Discuss the context in which they work and apply the principles of change management including quality improvement methodology in this context
- 7) Use resources appropriately
- 8) Demonstrate the ability to work in, build and lead teams

| Contribute to the improvement of cancer care delivery in teams and the wider health care system | Identify where quality improvements may be initiated in the work environment and demonstrate knowledge of the steps and tools that may be applied to quality improvement processes including the use of data to drive change |
|---|--|
| | Describe key quality indicators for monitoring service performance in oncology |
| | Assess risk and implement appropriate risk management strategies in order to promote patient well-being and safety in practice and participate in the development and implementation of patient safety initiatives |
| | Discuss current major challenges in health care and provide leadership in the contribution to and implementation and evaluation of policies and standards relevant to cancer care |
| Engage in stewardship of cancer care resources | Discuss factors involved with resource stewardship including financial and other costs of cancer patient care. This should include the concepts of efficiency and cost effectiveness |
| | Discuss prioritisation of patients on waiting lists |
| | Appreciate the conflict sometimes inherent between access to gold standard equitable healthcare opportunities advocate and available resources |
| Demonstrate elements of leadership in practice | Discuss how your leadership style may impact team working |
| | Prioritise tasks including patient assessment and treatment |
| | Engage in developing self-awareness: strengths, weaknesses, values, behavior drivers and impact on others |
| | Run effective and efficient meetings |
| | Take responsibility for effective communication around the vision for, and purpose of, change with multidisciplinary team members, patients and other stakeholders |
| | Demonstrate the ability to negotiate and problem-solve with other team members |
| | Demonstrate awareness of the roles and organisational structures of relevant professional societies |



Health Advocate

9) Advocate for cancer patient

| Advise the patient on behaviour and lifestyle | Understand the principles of screening, including the main advantages and drawbacks of a screening programme, and the organisation of screening using breast, lung and colorectal cancer as core examples and outline national and international guidelines in this field |
|--|---|
| | Provide appropriate and individualised evidence-based verbal and written information regarding the benefits and risks of screening for cancer to people affected by cancer |
| | Undertake a comprehensive history to identify the individual, familial, genetic, sociocultural, economic and environmental factors which may increase the risk for developing cancer and provide information and psychological and emotional support on strategies to reduce risk |
| | Advise the patient on relevant changes in behaviour and lifestyle prior to treatment to increase the chance of tumour response and to cope with acute toxicities e.g., smoking cessation and diet |
| | Advise the patient on relevant changes in behaviour and lifestyle to enable them to cope optimally with late toxicities due to previous treatment and the side effects of present medication |
| Support patients to navigate the healthcare system | Enable patients to access the available resources, to obtain treatment in a timely, efficient manner |
| | Advocate for and promote shared decision-making between people affected by cancer and their health care team regarding al stages treatment, care and management |



Scholar

- 10) Plan personal and professional learning experiences and use them to enhance patient care
- 11) Contribute to the knowledge base that underpins patient care

| Develop and follow a continuing personal and professional development plan | Assess gaps in knowledge and identify resources to meet these |
|--|---|
| | Retrieve high quality research articles and evidence-based guidelines relevant to cancer care by formulating effective research questions and utilising effective search strategies for sourcing relevant electronic and print material and critically review medical information |
| | Develop or revise local evidence based guidelines integrating evidence into personal practice |
| Participate in research and scholarly activities | Discuss trial design |
| | Provide safe and effective care to patients on clinical trials in accordance with study protocols with a view to ensuring optimal outcomes and experiences for patients |
| | Discuss challenges to recruiting teenagers and young adults to research trials, ensuring that patient choice is considered and appropriate advice in complex and challenging situations is delivered |
| | Describe and contribute to health service research and clinical audit in their clinical area |
| | Discuss the organisations that design and run trials nationally and internationally and how to access information regarding thei trials |
| | Show awareness of rules for writing scientific papers and how to submit them for publication |



Professional

- 12) Demonstrate that the care of their patients is their first concern
- 13) Manage their work-life balance to maintain their own wellbeing

| Adherence to high ethical standards | Discuss ethical principles and be able to apply them when caring for patients |
|-------------------------------------|--|
| | Respect diversity. Do not disadvantage a patient on grounds of their gender, race, culture, philosophical or religious beliefs. Show understanding for patients' ethical concerns and divergent viewpoints |
| | Demonstrate respect for patients and caregivers |
| | Maintain appropriate boundaries with patients |
| | Maintain patient confidentiality and be able to inform patients on the legal situation regarding information held on them in medical notes |
| | Apply codes of research ethics including the Good Clinical Practice Guidelines |
| | Provide the patient with all relevant information when taking consent |
| | Manage conflicts of interest appropriately |
| | Exhibit appropriate behaviour in the use of communication on the internet |
| Aspire to excellence | Work according to professional codes and laws |
| | Keep knowledge and skills up to date, recognise own competency limits and refer appropriately |
| | Take responsibility for actions and respond appropriately to negative feedback |
| | Work collaboratively with other health care professionals to optimise patient care and to encourage shared decision-making between health professional and patient |
| | Recognise and respond to unethical behaviour in other health care professionals |
| Maintain own wellbeing | Exhibit self-awareness and manage personal and professional demands to reduce the risk of burn out |



Seek emotional and developmental support when required