Dermatology capabilities in practice (CiPs) – mapping to 2010 curriculum competencies

Capability in practice (CiP)	Mapping to 2010 curriculum competencies
1. Outpatient dermatology: managing dermatology patients in the outpatient setting	Mapping to 2010 curriculum competenciesKnowledge of core medical dermatology presentations-pruritus, eczema, viral warts, common bacterial and fungal infections, psoriasis, immunobullous disease, acne and rosacea, cutaneous lupus, connective tissue disease, urticaria/angioedema, vasculitis, leg ulcers, cutaneous lymphoma, systemic disease presenting in the skin, drug reactions, emergency presentations (appears after section B on eportfolio)Section A (i)1 History taking Section A (i)2 Clinical examination
	Section A (i)3 Time management and decision making
	Section A (i)4 Decision making and clinical reasoning
	Section A (i)5 The patient as central focus of care
	Section A (i)6 Prioritisation of patient safety in Clinical Practice
	Section A (i)7 Team working and patient safety
	Section A (i)8 Principles of Quality and safety improvement
	Section A (i)9 Infection control
	Section A (i)10 Relationships with patients and communication within a consultation
	Section A (i)11 Complaints and medical error
	Section A (i)12 Communication with colleagues and co-operation
	Section A (i)13 Health Promotion and Public health
	Section A (i)14 Legal framework for practice
	Section A (i)15 Personal behaviour
	Section A (ii)1 Basic science of the skin To be able to describe the structure and function of normal skin To be able to explain the pathophysiological consequences of skin diseases and the mechanisms by which treatment may be effective
	Section A(ii) 2 Medical dermatology







Capability in practice (CiP)	Mapping to 2010 curriculum competencies
	To be able to carry out specialist assessment, investigation and management of a patient presenting with skin disease, or with a skin manifestation of an internal or systemic disease
	Section A(ii) 3 Management of chronic disease dermatology To be able to work with patients and use their expertise to manage their condition collaboratively and in partnership, with mutual benefit
	Section A(ii) 3a Dermatological pharmacology and therapeutics To be able to safely prescribe and monitor systemic therapy for skin disease, including the use of systemic immunomodulatory and biologic agents To be able to appropriately prescribe topical therapy
	Section A(ii) 4 Infectious diseases and infestations of the skin To be able to diagnose and manage viral, bacterial, fungal and parasitic infections of the skin
	Section A (ii) 6 Dermatopathology To be able to recognise the microscopic features of diseases of the skin
	To be able to correctly interpret a written dermatopathology report and to offer discussion and differential diagnosis of the described distinguishing histological features
	To be able to choose a range of laboratory techniques to optimise diagnostic accuracy
	To combine clinical assessment with pathological correlation to accurately diagnose skin disease
	Section A (ii) 10 Dressings and wound care To be able to diagnose and manage ulceration of the skin and post surgical skin wounds
	Section B 10 Leadership
2. Acute and emergency dermatology: managing dermatological emergencies in all environments and managing	Knowledge of core medical dermatology presentations-pruritus, eczema, viral warts, common bacterial and fungal infections,







Capability in practice (CiP)	Mapping to 2010 curriculum competencies
an acute dermatology service including on-call	psoriasis, immunobullous disease, acne and rosacea, cutaneous lupus, connective tissue disease, urticaria/angioedema, vasculitis, leg ulcers, cutaneous lymphoma, systemic disease presenting in the skin, drug reactions, emergency presentations (appears after section B on eportfolio)
	Section A (i)1 History taking Section A (i)2 Clinical examination Section A (i)3 Time management and decision making Section A (i)4 Decision making and clinical reasoning Section A (i)5 The patient as central focus of care Section A (i)6 Prioritisation of patient safety in Clinical Practice Section A (i)7 Team working and patient safety Section A (i)8 Principles of Quality and safety improvement Section A (i)9 Infection control
	Section A (i)10 Relationships with patients and communication within a consultation Section A (i)11 Complaints and medical error Section A (i)12 Communication with colleagues and co-operation Section A (i)13 Health Promotion and Public health Section A (i)14 Legal framework for practice Section A (i)15 Personal behaviour
	 Section A(ii) 2 Medical dermatology To be able to carry out specialist assessment, investigation and management of a patient presenting with skin disease, or with a skin manifestation of an internal or systemic disease Also sections A(ii) 3a, 4, 6, 10 relevant to this capability, which are described for CiP 1 and not repeated here. Section B 10 Leadership
3. Liaison and community dermatology: working in partnership with primary care and promoting skin health	Section A (i)3 Time management and decision making Section A (i)4 Decision making and clinical reasoning Section A (i)5 The patient as central focus of care Section A (i)6 Prioritisation of patient safety in Clinical Practice







Capability in practice (CiP)	Mapping to 2010 curriculum competencies
	Section A (i)7 Team working and patient safety
	Section A (i)8 Principles of Quality and safety improvement
	Section A (i)10 Relationships with patients and communication
	within a consultation
	Section A (i)11 Complaints and medical error
	Section A (i)12 Communication with colleagues and co-operation
	Section A (i)13 Health Promotion and Public health
	Section A (i)14 Legal framework for practice
	Section A (i)15 Personal behaviour
	Section A(ii) 3a Dermatological pharmacology and therapeutics To be able to safely prescribe and monitor systemic therapy for skin disease, including the use of systemic immunomodulatory and biologic agents To be able to appropriately prescribe topical therapy
	Section A(ii) 5 Psychocutaneous medicine
	To be able to diagnose serious or incidental psychiatric morbidity
	in patients presenting with or being followed up for skin disease
	To be able to diagnose serious or incidental psychiatric morbidity
	in patients presenting with or being followed up for skin disease
	Section B 8 Dermatology & Primary Health care
	To be able to communicate appropriately with Primary Health Care
	Physicians for the benefit of both patient and General Practitioner
	Section B 10 Leadership
4.	
4. Skin tumours and skin cancer:	Section A (i)1 History taking
managing a comprehensive skin cancer and benign skin	Section A (i)2 Clinical examination
lesion service	Section A (i)3 Time management and decision making
	Section A (i)4 Decision making and clinical reasoning
	Section A (i)5 The patient as central focus of care
	Section A (i)6 Prioritisation of patient safety in Clinical Practice
	Section A (i)7 Team working and patient safety
	Section A (i)8 Principles of Quality and safety improvement







Capability in practice (CiP)	Mapping to 2010 curriculum competencies
	Section A (i)10 Relationships with patients and communication
	within a consultation
	Section A (i)12 Communication with colleagues and co-operation
	Section A (i)13 Health Promotion and Public health
	Section A (i)14 Legal framework for practice
	Section A (i)15 Personal behaviour
	Section A (ii) 8 Skin oncology, radiotherapy and skin cancer To have the knowledge, skills, experience and confidence to diagnose and to stage all primary malignant disease of the skin To be able to surgically treat T1 BCC's, T1 SCC's, and T1a/b melanomas Section A (ii) 9 Breaking bad news To recognise the fundamental importance of breaking bad news
	Section B 10 Leadership
5. Procedural dermatology: performing skin surgery and other dermatological procedures	Section A (i)3 Time management and decision making Section A (i)4 Decision making and clinical reasoning Section A (i)5 The patient as central focus of care Section A (i)6 Prioritisation of patient safety in Clinical Practice Section A (i)7 Team working and patient safety Section A (i)8 Principles of Quality and safety improvement Section A (i)9 Infection control Section A (i)10 Relationships with patients and communication within a consultation Section A (i)11 Complaints and medical error Section A (i)12 Communication with colleagues and co-operation Section A (i)13 Health Promotion and Public health Section A (i)14 Legal framework for practice Section A (i)15 Personal behaviour Section A (ii) 7 Dermatological surgery To be able to surgically treat benign and malignant skin disease safely and effectively Section A (ii) 7a Valid consent







Capability in practice (CiP)	Mapping to 2010 curriculum competencies
	To understand the necessity of obtaining valid consent from the patient and how to obtain it
	Section A (ii) 10 Dressings and wound care
	To be able to diagnose and manage ulceration of the skin and post surgical skin wounds
	Section B 4 Cutaneous laser surgery
	To be able to refer patients appropriately for laser surgery
	Section B 5 Cosmetic dermatology
	To be able to advise patients considering cosmetic treatment
	To be able to diagnose and manage patients with complications of cosmetic therapy
	Section B 10 Leadership
6. Paediatric dermatology:	Section A (i)1 History taking
managing paediatric dermatology patients in all	Section A (i)2 Clinical examination
settings	Section A (i)3 Time management and decision making
	Section A (i)4 Decision making and clinical reasoning
	Section A (i)5 The patient as central focus of care
	Section A (i)6 Prioritisation of patient safety in Clinical Practice
	Section A (i)7 Team working and patient safety
	Section A (i)8 Principles of Quality and safety improvement
	Section A (i)10 Relationships with patients and communication within a consultation
	Section A (i)11 Complaints and medical error
	Section A (i)12 Communication with colleagues and co-operation
	Section A (i)13 Health Promotion and Public health
	Section A (i)14 Legal framework for practice
	Section A (i)15 Personal behaviour
	Section B 2 Paediatric dermatology
	To be able to investigate, diagnose and treat neonates, children and adolescents with skin disease
	Section B 3 Genetics
	To be able to diagnose and treat genetic skin disease and
	appreciate importance of genetic counselling







Capability in practice (CiP)	Mapping to 2010 curriculum competencies
	To be able to identify individuals at risk of inherited disease and at risk of having affected children
 7. Other specialist aspects of a comprehensive dermatological service including: 7A) cutaneous allergy 7B) photobiology and phototherapy 7C) genital and mucosal disease 7D) hair and nail disease 	 Section B 1a Cutaneous allergy, contact dermatitis and occupational dermatitis To be able to investigate, diagnose and manage patients with skin allergy, including presentations of contact dermatitis and contact urticaria To be able to investigate, diagnose and manage patients with common occupational dermatoses Section B 1b Preparation of medicolegal reports To be able to assess patients for medico legal claims and discuss writing appropriate reports Section B 1c Prick testing To be able to evaluate patients for contact urticaria and type I hypersensitivity and perform prick testing safely Section B 6a Photosenstivity and photodiagnosis To be able to appropriately refer patients for monochromator light testing and photoprovocation testing Section B 6b Phototherapy and photochemotherapy To be able to deliver and supervise phototherapy and photochemotherapy To be able to deliver and supervise phototherapy and photochemotherapy To be able to deliver and supervise phototherapy and photochemotherapy
	service for patients with low risk lesions/conditions, and to refer patients appropriately to specialist PDT services. Section B 7a GUM To be able to detect sexually transmitted infection (STI) in patients presenting to dermatology, and refer appropriately to a Genitourinary Clinic







Capability in practice (CiP)	Mapping to 2010 curriculum competencies
	Section B 7b Vulval dermatology To be able to competently diagnose and manage common vulval disorders in patients presenting to dermatology
	Section B 7c Male genital disease To be able to diagnose and manage common penile disorders in patients presenting to dermatology
	Section B 7d Oral Medicine To be able to diagnose and manage oral disorders and oral manifestations of systemic disease in patients presenting to dermatology





