

## Procedure to reduce risk WPBA Benchmark Sheet

|  | Concerns   | Good practice   | Trainer Comments |
|--|--|---|------------------|
| <b>Identifies area risk appropriately</b>                    | No or poor review of evidence risk, minimal discussion with clinical governance lead or review of other processes      | Identified appropriate area by review risk register, discussion clinical governance lead or other appropriate process eg audit, trust or national guidance      |                  |
| <b>Draws up draft protocol for new procedure</b>             | Uses standard protocol, not relevant or adapted for local department   | Appropriate protocol, thought about how fit within local department, local and national guidance.   |                  |
| <b>Tests procedure for validity and feasibility</b>          | No evidence of stakeholder engagement, poor understanding of implementation processes within ED                        | Engaged with local stakeholders, fits well within department working, realistic expectations of staff or process  |                  |
| <b>Pilots and ensures compliance for appropriate period</b>  | Doesn't pilot or ensure staff awareness of procedure. No or poor understanding of how to monitor uptake or compliance  | Runs pilot study after staff education, awareness. Has thought about appropriate compliance measures and analyses after suitable period. Adjusts appropriately. |                  |
| <b>Monitors results accurately</b>                           | No evidence of monitoring, or monitoring superficial, wrong parameters, ineffective. Too short a time frame applied    | Appropriate compliance tool and analysis of results after appropriate period. Makes changes as needed.  |                  |
| <b>Produces report for department</b>                        | No report or superficial, does not address issues  | Useful report on indication, protocol, implementation results and next steps for the ED where appropriate   |                  |
| <b>Produces evidence of reduce risk or robust monitoring</b> | Inadequate evidence of risk reduction or robust monitoring   | Demonstrates evidence of risk reduction or robust monitoring.   |                  |
| <b>Reflection</b>  | Does not understand risk management processes. Has not thought through or demonstrated required learning from process. | Demonstrates understanding of risk management and implementing a process change. Identified learning points and reflected well on the process.                  |                  |

*The assessor is asked to consider the learner's performance in all of the domains listed in completing this statement:*

**“Based on this WPBA, I would be satisfied that this learner could take on a risk management procedure as a newly appointed consultant”**

|           |  |
|-----------|--|
| Yes       |  |
| No        |  |
| Signature |  |
| GMC       |  |
| Date      |  |

**If no, these are the reasons and my recommendations for further work:**