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| Categories | ‘I’ button | Text box |
| Volume of work | Describe your working practice over the last 12 months including number of sessions. |  |
| Spread of work | Is your work evenly spaced work or are there significant breaks? How does this impact on your confidence/skill level? |  |
| Experience | What was your previous experience? What stage are you in your career? |  |
| Overlap with other roles | How do your other roles overlap with general practice? |  |
| Duration of low volume work | How long have you had the same level of commitment? |  |
| Scope of Practice | What does your role in general practice entail? Are you exposed to full complement of GMS – Chronic Disease Management / visits / etc |  |
| Benchmarking, integration and support | How do you ensure that your practice is what is acceptable and up to date? Do you meet regularly with peers? |  |
| Personal approach to risk | What arrangements do you have to stay within boundaries of competence? What do you do if you don’t know how to manage a case? |  |
| CPD | How do you keep up to date, identify your training needs and demonstrate quality in what you do? |  |
| Actions | What action do you take to maintain competencies across scope of your work? How would you approach perceived weaknesses? |  |