

Consultation Observation Tool (COT) - Guidance.

Clinical Supervisors use the Consultation Observation Tool (COT) to support holistic judgements about the ACP level of practice in primary care. COT is one of the tools used to collect evidence for the ACP (Primary Care Nurse) Portfolio of evidence of capability, as a Workplace Based Assessment.

Person consent

The presenting person must give consent. [A consent form can be found here.](#)

Selecting consultations for COT

Either record a number of consultations on video and select one for assessment and discussion or arrange for your clinical supervisor to observe a consultation. Complex consultations are likely to generate more evidence.

Consultations should be drawn from a range of people presentation that reflect the scope of the ACP (Primary Care Nurse) role. E.g. children, older adults, mental health, etc.

The ACP (Primary Care Nurse) can include consultations in different contexts – for example, a home visit.

An audio COT can also be evidenced e.g. to assess telephone consultation skills.

It's inadvisable for a consultation to be more than 15 minutes in duration, as the effective use of time is one of the performance criteria.

When the ACP (Primary Care Nurse) is selecting a recorded consultation, it's natural to choose one where they feel they've performed well. This isn't a problem; the ability to discriminate between good and poor consultations indicates professional development.

But don't spend a lot of time recording different consultations. COT isn't a pass/fail exercise; it's part of a wider picture of Advanced Clinical Practice.

Collecting evidence from the consultation

The ACP (Primary Care Nurse) will have time to review the consultation with their clinical supervisor, who will relate their observations to the ACP (Primary Care Nurse) capability framework as identified on the COT form. The Clinical Supervisor then makes an overall judgement and provides formal feedback, with recommendations for further development.