

# **Curriculum for Paediatric Training General Paediatrics**

Level 1, 2 and 3 Training

Sept 2010

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Royal College of Paediatrics and Child Health

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#### Quick Start to the Curriculum

#### 1. What does the curriculum tell us?

The curriculum includes

- Competences that need to be achieved by trainees through their stages of training in becoming a paediatrician
- Assessment strategy through the whole of their training to successful completion and the award of a CCT (Certificate of Completion of Training)

#### 2. Who does the curriculum benefit?

- **Trainees** will be able to develop their personal development plans and chart their progress through training, ensuring they are gaining the appropriate experiences and continuing to develop towards being a consultant. This contributes to appraisal, self-assessment, self-directed learning and educational meetings.
- **Trainers** will be able to ensure their trainees are developing in the correct areas and ensure their teaching covers the right areas. It will also help them complete their end of post review.
- **Tutors** will be able to ensure local teaching programmes map to the curriculum.
- Lay people will be able to see what their paediatricians are working towards in their training. A summary is contained within <u>Progression in the Professional Development of a Paediatrician</u>

#### 3. How can we use the curriculum and its layout?

The curriculum lists the competences to be gained at each level of training. It is not a checklist to be completed by the trainee against every competence. The assessment strategy ensures that the curriculum is sampled adequately.

Level 1 training / ST1-3 – previously SHOs, this stage is in the first (green) column
 Level 2 training / ST4-5 – middle grade is the middle (blue) column
 Level 3 training / ST6-8 – (at which stage some trainees will enter national grid training to train in a sub-specialty) this level is the final (purple) column.

The Contents Page contains hyperlinks to the relevant sections of the document.

#### *i)* For those training towards being a General Paediatrician

- Section 1 details how to use the document
- Section 2 gives the competences for a Level 1, Level 2 and General Level 3 trainee paediatrician in the overarching knowledge and skills required e.g. communication skills, teaching and training skills, research and audit, managing a consultation etc. The competences are listed under the most relevant assessment standard, e.g. the overall learning outcome. The progression of these competences can be followed through the levels of training
- Section 3 details the condition-specific knowledge and skills as a list. The level at which they are achieved is highlighted by a tick in the appropriate box and again the progression can be followed as the levels rise.
- Section 4 explains the assessments and the assessment system with the minimum assessment requirements for each year and at each level of training. See <u>About Assessments</u>

#### *ii)* For those training towards a sub-specialty

- Section 1 details how to use the document.
- Section 2 gives the competences for a Level 1, Level 2 and Level 3 sub-specialty trainee paediatrician in the overarching knowledge and skills required e.g. communication skills, teaching and training skills, research and audit, managing a consultation etc.
  - The competences are listed under the most relevant assessment standard, e.g. the overall learning outcome. The progression of these competences can be followed through the levels of training.
- Section 3 contains the new knowledge and skills required for the sub-specialty conditions.
- Section 4 details the condition specific knowledge and skills for all the other specialties that need to be maintained throughout a trainee's final level of training.
- Section 5 explains the assessments and the assessment system.

#### **General Paediatrics or Subspecialty Training at Level 3**

By the end of level 3 training all successful trainees will be awarded a CCT in the specialty 'Paediatrics'. The initial core five years (ST1-5) is common to all trainees. In Level 3 training, trainees either continue in General Paediatric training or complete a subspecialty training programme. Following either route will require you to achieve a set of common generic competences to acquire at this stage of training as well as subspecialty specific competences. As a general paediatric trainee you will consolidate your training through a series of general posts. As a subspecialty trainee, whilst acquiring new knowledge and skills in a chosen sub-specialty you will also consolidate your general training and management of the patient with complex multisystem disease. For further information on entry to sub-specialty training http://www.rcpch.ac.uk/Training/NTN-Grid-Scheme

#### 4. How will the curriculum competences be achieved?

Learning will take place in a variety of settings with a range of approaches:

- Acute settings
- Community settings
- Handover
- Ward rounds
- Multi-disciplinary meetings
- Audits and research
- E-learning
- Seminars
- Lecture
- External training courses
- Reflective practice
- Self-directed learning

Most events in the workplace will contribute to the learning process. Trainees are encouraged to utilise all these opportunities as well as managing their study leave to work towards to completing their personal development plan.

#### 5. How often should it be used?

#### By Trainees:

The document is for reference and should be used to guide a trainee and trainer through the training programme. Some trainees may find it useful to use as a resource during reflection, helping them to assess what has been achieved and what still needs to be developed. The e-portfolio assists in this process by allowing the trainee to record comments on competences, attach evidence of achievement and highlight confidence in the areas.

By Local Education Providers (usually a hospital trust)/School:

LEPs and schools may use the curriculum to design the structured learning programme throughout the year.

#### 6. Is this the definitive guide?

Yes – this is a comprehensive document detailing the fundamental knowledge skills and behaviours expected from a trained paediatrician working in the UK. Of course as paediatricians develop, they will gain greater knowledge and expertise and build on the elements within this programme.

#### 7. What can't I find?

You won't find any specific details about individual training posts or programmes, formal educational courses or training opportunities – these will be provided by the Deanery, School of Paediatrics or Local Education Provider.

#### 8. Where to go with further questions?

e-mail: <u>training@rcpch.ac.uk</u> telephone 020 7092 6000

#### Introduction

The curriculum is for doctors in training in Paediatrics, their tutors, educational supervisors and other stakeholders (internal and external) with an interest in postgraduate medical education

The curriculum gives the doctor in training and their tutors' guidance about the areas that need to be covered. It gives a clear picture of what has to be achieved by the end of each stage of training.

The curriculum can be used to help identify areas of practice that need to be improved and those in which the trainee has confidence.

The competences that are gained during Level 1 training form the basis for progression into Level 2 and Level 3 training and onto consultant posts. The way in which the statements are written is intended to reflect this. The framework of competences reflects a spiral curriculum in that it asks the trainee to demonstrate continual development as their training progresses i.e. basic competences become more complex and sophisticated as the paediatrician in training works towards expertise.

The competencies are expressed as learning objectives. These are the focus of training and at the end of each level of training the ARCP panel will want to know how well these objectives have been achieved. This document is to SUPPORT training and is not intended as an assessment document

#### What is a Paediatrician?

Paediatricians have a detailed knowledge and understanding of diseases in children. They are skilled in looking at health and ill-health in babies, children and adolescents, and at specific health issues, diseases and disorders related to these stages of growth and development. They develop expertise in practical procedures specifically related to the good clinical care of small babies and children. Paediatricians work in multi-disciplinary teams and with colleagues from a wide range of professional groups in hospitals, general practice and in the community, in social services and schools and with the voluntary sector. They have strong communication and interpersonal skills and take on a variety of roles within their different communities of practice. They share expertise effectively and assume the responsibilities of teaching, leadership and management roles where appropriate. They work with colleagues to ensure consistency and continuity in the treatment and care of children and young people in all aspects of their well-being. They are committed to a policy of advocacy for a healthy lifestyle in children and young people and for the protection of their rights.

Paediatricians are doctors who have a particular compassion and respect for children, young people and their families and enjoy working with them. They have an expert understanding of the ways in which illness affects the child, the parents and the rest of the family and are skilled in the management of emotionally complex family situations. They show patience and sensitivity in their communications with children and their families and a particular ability to explore each individual's perspectives of a problem. They are aware of religious and cultural beliefs that parents might hold about the treatment of their children. They know how to respond in these cases, when to seek support and where to find legal and ethical guidelines to support their practice.

Paediatricians ensure that they are up-to-date in their practice and endeavour to promote evidence-based medicine where possible. They are keen to develop innovative approaches to teaching in paediatrics and to research. They are committed to the highest standards of care and of ethical and professional behaviour within their specialty and within the medical profession as a whole. Central to their work is the principle that all decisions should be made in the best interests of the child or young person in their care.

#### Progression in the Professional Development of a Paediatrician

During Level 1	During Level 2 and 3	Continuing development as a consultant
Acquires fundamental knowledge base	Applies knowledge base to provide appropriate clinical care	Evaluates knowledge and modifies clinical care pathways to enhance patient care.
Acquires clinical examination and assessment skills and applies these in clinical practice	Analyses clinical findings to derive appropriate differential diagnosis and management plans.	Evaluates assessment findings; refines and modifies management plans.
Acquires all basic technical skills and basic life support	Proficient at all basic technical procedures, some complex procedures and provides advanced life support.	May relinquish some skills in these areas dependent on area of clinical practice. May acquire specialty specific skills.
Performs allocated tasks and begins to plan tasks	Plans and prioritises tasks appropriately.	Increasing expertise with evaluation of priorities and appropriate delegation across a wide range of professionals.
Performs allotted teaching tasks	Plans and delivers teaching to trainees and other professionals. Develops peer mentoring skills.	Plans and modifies curricula. Performs assessment and appraisal. Able to provide mentorship.
Aware of management issues	Develops management skills and able to take responsibility for a defined project. Contributes to Committees.	Can negotiate and deal with conflict. Can contribute to and lead committees. Evaluates and modifies management structures.
Performs allocated audit projects and understands the audit cycle	Designs audit project and understands risk management. Able to write appropriate clinical guidelines. Understands the Clinical Governance implications	Facilitates audit, and evaluates results. Evaluates guidelines and ensures implementation of appropriate changes
Understands the principles of critical appraisal and research methodology	Able to appraise the literature critically and apply to clinical practice	Able to evaluate critical appraisal performed by others. Able to lead research projects and support others in research.
Works in multi-professional teams	Able to take the lead and accept leadership from other members of the multi-disciplinary team	Evaluates and modifies multi-professional team- working

**SECTION 1** 

HOW TO USE THE CURRICULUM

#### Trainee

First of all ensure you have read the Introduction to understand the purpose and key principles of Paediatric Training.

You should then read the sections on Learning and Support for Learning which will enable to understand the system of workplace based learning and other educational opportunities that will be made available to you.

Then you should browse the competencies sections. The headings (assessment standards) are applied to a group of competencies will give you an idea of what you should be aiming to achieve throughout each level of training. The curriculum is separated out into Level 1, Level 2 and Level 3 competencies. However it is important you are aware of progression and achievement of higher level competencies.

The curriculum has the following structure

- Generic competences and generic clinical competences (e.g. history taking, consulting, clinical management, communication skills, teaching, management, law and ethics)
- Specialty-specific competences (e.g. cardiology, endocrinology etc.)

The competencies should be used at appraisals, for self assessment and self-directed learning to check your progression against the range that you are expected to achieve. Your educational meetings will support this process.

Following on from the competency framework is the assessment system which charts your progress through the training programme. You are expected to take the initiative with this; so you will need to read and familiarise yourself with this section too (<u>Section 4</u>). Each year you will be expected to produce evidence of progressing through the competencies at a suitable pace and achieving the appropriate assessments for the <u>Annual Review of Competency Progression (ARCP)</u> <u>Panel.</u> This will be supported by educational supervision and e-portfolio.

There will be a local induction at the start of your programme which will further introduce how the programme will be delivered and assessed by your education provider. You will also be allocated an educational supervisor who will be responsible for your educational agreement, during your working hours you should be appropriately supervised and this may be your educational supervisor, clinical supervisor, a more senior trainee or another senior clinician.

Within paediatrics all consultants will have a role as trainer and the majority will have a role both as educational supervisor and clinical supervisor. Many specialty grade doctors (SASG) will undertake the role of clinical supervisor but few will take on the role of educational supervisor. All trainers will be required to have clinical credibility and the ability to teach within their chosen subject and demonstrate both an interest in their specialty and in trainee education and development.

#### Trainers/Educational Supervisors/Clinical Supervisors

Please read the Introduction and 'How to use the curriculum - Trainees' sections above.

Your roles will vary and may involve providing learning in the workplace, contributing to other forms of learning, providing workplace based assessments and clinical supervision, providing educational supervision and ensuring patient safety within the learning environment.

You should be supported in your role by the Local Education Provider and the Paediatric School and should receive training in all your different roles which contribute to postgraduate education. There should be adequate time within your job plan to carry out your agreed postgraduate training roles to a high standard.

As a **Clinical Supervisor** you will be required to be trained in assessment tools that you are using and will have responsibility for supervising the trainees' day to day clinical practice.

As a **Educational Supervisor** you will be required to have received training in and be familiar with all elements of the curriculum and assessment strategy. You will be required to provide formative developmental support for trainees e.g. acting as facilitator, mentor, supporting the development of the trainee's professionalism and ensure educational objectives are being achieved. You must fully understand the objectives of the period of training for which you are responsible.

For more detailed information please consult your LEP and Deanery for local procedures and the Gold Guide (http://www.mmc.nhs.uk/pdf/Gold%20Guide%202009%20-%20Third%20edition%20v1.pdf).

#### Learning

Learning will take place in a variety of settings with a range of approaches:

- Acute settings
- Out patient Clinics
- Community setting
- Handover
- Ward rounds
- Multi-disciplinary meetings
- Audits and research
- e-learning
- Seminars
- Lectures
- External training courses
- Reflective practice
- Self-directed learning

Trainees are encouraged to utilise the opportunities that arise at anytime within the workplace, as well as managing their study leave to work towards the achievement of their personal development plan.

#### **Support for Learning**

During the Local Education Providers' induction the trainee will be allocated an education supervisor and informed of the local processes for learning support.

The trainee has responsibility as an adult learner to set their own individual learning objectives for each training post/training programme with the support of their Educational Supervisor. The objectives should then be reviewed at regular intervals utilising the e-portfolio and by demonstrating improvement through the use of work-place based assessments.

There will be deanery processes in place to support any doctor in training who may need additional support. Examples where additional support will suggested may include (and not limited too)

- doctors who have a learning need
- a requirement for reasonable adjustment for the achievement of the competencies
- involvement in a serious incident
- disengagement with the educational process

**SECTION 2** 

**GENERAL COMPETENCES** 

#### Duties of a Doctor

Knowledge, Skills and Performance

This section details the competences that reflect the overall role of the paediatrician and the behaviours that demonstrate the principle that all decisions should be made in the best interest of the child.

For more information on assessment please see the assessment blueprint

Level 1 (ST1-3)

1 an understanding of the roles and responsibilities of paediatricians

Level 2 (ST4-5) a commitment in their practice to the roles and responsibilities of paediatricians Level 3 (ST6-8) a commitment to advocate for the individual child in her/his particular context

**Assessment Standard 1** 

## Duties of a Doctor

Knowledge, Skills and Performance

Standard 1	Level 1 (ST1-3) an understanding of the roles and responsibilities of paediatricians	Level 2 (ST4-5) a commitment in their practice to the roles and responsibilities of paediatricians	Level 3 (ST6-8) a commitment to advocate for the individual child in her/his particular context	Assessments
	Trainees will:			
	understand the duties and responsibilities of a paediatrician in the safeguarding of babies, children and young people		understand the duty of all professionals working with children to report concerns about child protection issues to Social Services	
	understand the duties and responsibilities of a paediatrician to support and enable parents and carers to be effective in caring for their children			olio
cies	understand the limitations of their competence at this stage of their training and know where and when to ask for help, support or supervision - particularly in relation to safe recognition and management of seriously ill children and young	understand the limitations of their competence, in relation to safe clinical practice and in their relationships with patients and know where and when to ask for help, support and supervision		ADER, ePortfolio
Competencies	people begin to understand their role in the management of chronic illness in children and young people	understand their role in managing the consequences of chronic illness for a child and family	be able to manage and know how to obtain support for the consequences of chronic illness for a child, young person and their family	Multisource Feedback, LEADER,
	understand and follow the principle that all decisions are to be made in the best interests of the child or young person in their care			Iltisource
	develop an understanding of the concept of advocacy for a healthy lifestyle in children and young people and for the protection of their rights	take on an advocacy role with regard to the best interests of the patient; to ensure appropriate care for patients	be committed to a policy of advocacy for a healthy lifestyle in children and young people and for the protection of their rights	Mu
	understand the responsibility of paediatricians to consider all aspects of a child's well-being including biological, psychological and social factors	show that they consider all aspects of a child's well- being including biological, psychological and social factors		

#### **Good Clinical Care**

 $\label{eq:constraint} \textbf{Knowledge, Skills and Performance. Communication , partnership and teamwork}$ 

This section describes the generic competencies (knowledge, skills and behaviour) that relate to clinical practice and the importance of the child's needs e.g. APLS, history taking, clinical examination (assessment standards 2-8), promotion of patient safety and therapeutics and prescribing (standards 9-12) and safeguarding children (assessment standard 13).

For more information on assessment please see the assessment blueprint

	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
2	Effective responses to challenge,	increasing credibility and independence in	responsibility for an effective response
	complexity and stress in paediatrics	response to challenge and stress in	to complex challenges and stress in
		paediatrics	paediatrics
3	advanced neonatal and paediatric life	leadership skills in advanced neonatal	effective responses to life-threatening
	support skills	paediatric life support	situations and to unpredictability in
			paediatric clinical situations
_	<u> </u>		
4	effective skills in three-way consultation	responsibility for conducting effective	commitment to focussed and analytic
	and examination	paediatric assessments and interpreting	assessments of common and complex
		findings appropriately	clinical problems in paediatrics
5	effective skills in paediatric assessment	responsibility for conducting effective	commitment to focussed and analytic
		paediatric assessments and interpreting	assessments of common and complex
		findings appropriately	clinical problems in paediatrics
6	skills in formulating an appropriate	improving skills in formulating an	effective skills in making safe decision
	differential diagnosis in paediatrics	appropriate differential diagnosis in	about the most likely diagnosis in
		paediatrics	paediatrics
7	effective initial management of ill-health	responsibility for the effective	leadership skills in the management of
	and clinical conditions in paediatrics	management of common acute and	common and complex conditions in
	seeking additional advice and opinion as	chronic conditions in paediatrics seeking	general paediatrics and paediatric sub-
	appropriate	additional advice and opinion as	specialties seeking additional advice
		appropriate	and opinion as appropriate

### Assessment Standards 2-13

Currice	ium for Paeulatric fraining General Paeulatrics		
8	knowledge, understanding and	effective skills in recognising and	effective skills in ensuring the
	recognition of common, behavioural,	responding to behavioural, emotional and	management of behavioural,
	emotional and psychosocial aspects of	psychosocial aspects of illness in children	emotional and psychosocial aspects of
	illness in children and families	and families	illness in children and families
9	safe practical skills in paediatrics	effective skills in performing and	expertise in a range of practical
		supervising common practical procedures	procedures in paediatrics specific to
		in paediatrics ensuring patient safety	general and sub-specialist training
10	clear record-keeping and report-writing	improving skills in written communication	effective skills in written
		for a range of audiences	communications for a range of
			audiences, for children and their
			families, colleagues and other
			organisations
11	reliable responses to investigations in	effective leadership skills in undertaking	effective collaboration with other
	paediatrics	initial investigations in children, based on	specialists in using and interpreting
		an understanding of the risks and benefits	complex investigations undertaken in
		in each case	children
12	knowledge and skills in safe prescribing	improving safe prescribing in paediatrics	responsibility for safe prescribing in
	of common drugs in paediatrics	and in advising others appropriately	common and complex situations and
			for the supervision of others
13	an understanding of safeguarding and	effective skills in the assessment of cases	effective skills in advising other
	vulnerability in paediatrics	of safeguarding and in contributing to	agencies in safeguarding cases
		their management	

# Good Clinical Care

Knowledge, Skills and Performance

Standard 2	Level 1 (ST1-3) Effective responses to challenge, complexity and stress in paediatrics	Level 2 (ST4-5) increasing credibility and independence in response to challenge and stress in paediatrics	Level 3 (ST6-8) responsibility for an effective response to complex challenges and stress in paediatrics	Assessment
Trair etencies	nees will: in complex difficult communication situations with children and families show awareness and have begun to develop strategies to respond	have developed skills and strategies to manage their personal emotional reactions effectively to allow effective communication on response to distress from others		ALL
Compe	begin to develop skills in the management of emotionally complex family situations	develop the confidence to be firm and diplomatic in difficult situations, e.g. when dealing with anger	have developed effective skills in the management and communication of emotionally complex family situations	

# **Good Clinical Care**

Knowledge, Skills and Performance

Standard 3	Level 1 (ST1-3) advanced neonatal and paediatric life support skills	Level 2 (ST4-5) leadership skills in advanced neonatal paediatric life support	Level 3 (ST6-8) effective responses to life-threatening situations and to unpredictability in paediatric clinical situations	Assessments
Trair	nees will: be able to respond appropriately to cardiac arrest			<u> </u>
cies	be able to provide advanced neonatal and acute life support as demonstrated by successful completion of and assessment by recognised course	be able to provide advanced neonatal and acute paediatric life support and lead the team at a cardiac arrest		MSF. DOPS, CbD.
Competencies	be able to carry out resuscitation using bag, mask ventilation and cardiac compressions			equivalent,
Соп	be able to intubate term babies and have had supervised experience of intubating pre-term babies	be able to intubate newborn infants of most gestations without direct supervision		or
		be able to teach basic life support to junior healthcare professionals	be able to advise the team providing ALS and to liaise effectively with anaesthetic and PICU staff	APLS/NLS

# **Good Clinical Care**

Knowledge, Skills and Performance

Standard 4	Level 1 (ST1-3) effective skills in three-way consultation and examination	Level 2 (ST4-5) responsibility for conducting effective paediatric assessments and interpreting findings appropriately	Level 3 (ST6-8) commitment to focussed and analytic assessments of common and complex clinical problems in paediatrics	Assessments
Trair	nees will:			
Tan	the need to anticipate and respond sensitively to children and young people who are suggesting unease or unwillingness about a physical examination and begin to develop appropriate strategies to reassure	have developed strategies to anticipate and respond sensitively to children and young people who are suggesting unease or unwillingness about a physical examination		
	be able to take a history accurately and sensitively that routinely includes biological, psychological, educational and social factors in the child and family	be able to take responsibility for an effective consultation that routinely includes biological, psychological, educational and social factors in the child and family	be able to take a history from a child or young person and parent of the presenting difficulties to acquire information in sufficient breadth and depth in a range of possible symptom areas to allow accurate formulation of the problem	АТ
cies	have begun to develop skills and strategies to manage consultations effectively with babies, young children, adolescents and their families	have developed effective consultation skills and strategies with babies, young children, adolescents and their families	L1	Н, НАТ, АС
Competencies	be able to examine children and young people accurately and sensitively in appropriate settings			MRCPCI
Com	understand the need to conduct a consultation in such a way that a child or young person and their family may feel able to talk about difficult or emotional issues	the ability to conduct a consultation in such a way that a child or young person and their family feel able to talk about difficult or emotional issues		CbD, MiniCeX, MRCPCH, HAT, ACAT
	have begun to develop skills to involve both the child and parents or carers when both are present in consultations			cp
		have developed skills in recording consultations accurately and sensitively whilst maintaining rapport		
	know about and begin to develop skills to prevent disruptive or antisocial behaviour in children, families and adolescents in clinical settings and to respond to them if they occur	have developed skills to help prevent disruptive or antisocial behaviour in children, families and adolescents in clinical settings and to respond to them if they occur		

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**Assessment Standard 4** 

#### Good Clinical Care Knowledge, Skills and Performance

#### **Assessment Standard 5**

Assessments

MRCPCH, CbD, MiniCeX, HAT, ACAT, START and ePortfolio

Standard 5	Level 1 (ST1-3) effective skills in paediatric assessment	Level 2 (ST4-5) responsibility for conducting effective paediatric assessments and interpreting findings appropriately	Level 3 (ST6-8) commitment to focussed and analytic assessments of common and complex clinical problems in paediatrics
Trai	nees will:		
	recognise case histories which suggest serious or unusual pathology in children	recognise features of undifferentiated illness which suggest serious or unusual pathology and initiate the appropriate clinical response with appropriate urgency	be able to re-examine undifferentiated illness for erious and unusual illness and recognise potential nisdiagnoses
	recognise the diseases and host characteristics which make certain presentations life-threatening in children and know when to ask for help	recognise the diseases and host characteristics which make certain presentations life-threatening and manage these situations with vigilance and appropriate urgency	have developed the self knowledge, confidence and personal high standards to acknowledge where an assessment might not be comprehensive and to go back to the child, young person and their family for further information
encies	Recognise presentations of common disorders in children		recognise the breadth of different presentations of common disorders
Competencies	assess symptoms and signs accurately	assess signs and symptoms accurately and interpret findings appropriately	be able to assess and manage co-morbidities associated with the range of paediatric presentations
J		Know about the use of standardised questionnaires in assessing behaviour	Supplement clinical assessment with standardised instruments or questionnaires know when to gather information from other professionals e.g. those working in education, social work or from others who see the child in a variety of settings

be able to assess patterns of relationships and functioning within a family and how these might impact on a child's or young person's illness, seeking professional advice where appropriate

#### Good Clinical Care Knowledge, Skills and Performance

Assessments

MRCPCH, MSF, CbD, MiniceX\_ACAT START

Standard 6	Level 1 (ST1-3) skills in formulating an appropriate differential diagnosis in paediatrics	Level 2 (ST4-5) improving skills in formulating an appropriate differential diagnosis in paediatrics	Level 3 (ST6-8) effective skills in making safe decision about the most likely diagnosis in paediatrics
Train cies	nees will: begin to develop analytic and informed clinical reasoning skills	show regular use of analytic and informed clinical reasoning	be able to approach new situations which require good clinical judgement with an analytical and
Competencie	be able to formulate a differential diagnosis	be able to make a decision on the most likely diagnosis and discuss this effectively with children and young people and their parents or carer and with other colleagues	informed choice be able to make a decision on the most likely diagnosis and discuss this effectively with children and young people and their parents of carer and with other colleagues in the context of investigation and management

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Level 1 (ST1-3)

effective initial management of ill-health

seeking additional advice and opinion as

and clinical conditions in paediatrics

# Good Clinical Care

andard 7

Knowledge, Skills and Performance

appropriate

}			and opinion as appropriate	Δςο
air	nees will:			
un	understand the importance of effective strategies for the management of pain		be able to appropriately manage chronic pain syndromes and know when to refer for expert opinion	
	be able to assess and initiate management of patients appropriately	be able to take responsibility for the longer term management of patients with common acute and long term conditions	to be able to take responsibility for the longer term management of common acute and chronic cases leading or working with teams, sub-specs or other services	
	understand the importance of negotiated management plans for individual patients and families, including self-care strategies	show that they understand and take into account when agreeing management plans, factors that influence children, young people and parents and carers in their approach to following prescribed management and treatment plans	be able to review and modify a management plan as appropriate and know when to request help from a senior colleague or other services	
	Understand and have the ability to recognise Acute Kidney Injury in acutely ill children and young people	Be able to recognise and initially manage Acute Kidney injury in acutely ill children and young people with senior support	Be able to recognise and safely manage Acute kidney Injury and its complications in acutely ill children with support from specialist paediatric nephrology services	
		be able to initiate appropriate investigations and management plans appropriate to the case	assess and manage co-morbidities associated with the range of paediatric presentations	
	begin to make common decisions in the care of patients	show increasing confidence and independence in decision making in the care of general paediatric patients	show confidence and independence in the decision-making in the care of patients	
	<u></u>	be able to formulate an initial management plan for complex cases including the need for specialist advice	be able to formulate a management plan for complex cases	

Level 2 (ST4-5) responsibility for the effective management of common acute and chronic conditions in paediatrics seeking additional advice and

opinion as appropriate

Itleadership skills in the management of<br/>common and complex conditions in<br/>general paediatrics and paediatric sub-<br/>specialties seeking additional advice

Level 3 (ST6-8)

Assessments

25

understand the factors which influence children, young people and parents or carers in their approach to following prescribed management and treatment plans

begin to develop strategies to help children, young people and their families to follow management/treatment plans

show that they are developing strategies to help
children, young people and their families to follow
management plans

Begin to understand the process of bereavement in children and families

be able to seek the views of children and young people whatever their illness, regarding individual care and service planning, using expert resources appropriately to help them follow management plans

be able to develop and work within care pathways understand the process of bereavement in children and families and recognise abnormal grieving patterns MRCPCH, MSF, CbD, MiniCeX, HAT, IEADER START and ePortfolio

### Good Clinical Care

Knowledge, Skills and Performance

### **Assessment Standard 8**

Standard 8	Level 1 (ST1-3) knowledge, understanding and recognition of common, behavioural, emotional and psychosocial aspects of illness in children and families	Level 2 (ST4-5) effective skills in recognising and responding to behavioural, emotional and psychosocial aspects of illness in children and families	Level 3 (ST6-8) effective skills in ensuring the management of behavioural, emotional and psychosocial aspects of illness in children and families	Assessments
Trair	nees will: know about normal emotional and behavioural development and how it may affect the child and family at different stages		Understand the impact of illness on mental functioning, for both children, young people and their parents and the effect of each upon behaviour and functioning of the other	
	be able to look at behaviour as a form of communication and to take this into account when interviewing, examining and assessing children	be able to recognise when behaviour features may indicate an underlying cause and to be able to refer appropriately for further assessment		
	has begun to develop an approach to the assessment of behaviour problems that uses observation as well as history-taking	have developed an approach to the assessment of behaviour problems that uses observation and information from other sources, such as school as well as history taking		RT
encies	have begun to develop strategies and skills to support and engage parents of children with emotional or mental health difficulties	have developed some strategies and skills to support and engage parents of children with emotional or mental health difficulties	Understand the impact of relations and mental health upon a child or young person's current and past emotions and behaviour	MRCPCH, MSF, CbD, START
Competencies	know about the effects of developmental difficulties and physical diseases on behaviour and vice versa	know about the effects of developmental difficulties and physical diseases on behaviour and vice versa and be able to recognise when this occurs		CPCH, MSF
	know about the multi-disciplinary nature of the Child and Adolescent Mental Health Services	know about the multi-disciplinary nature of the Child and Adolescent Mental Health Service and be able to apply this knowledge in discussion of cases		MR
	Recognise the effects of school and other social setting s on childhood illness and vice versa			
	know the principles of managing common behaviour problems such as temper tantrums, sleep problems, the crying baby, feeding difficulties, oppositional behaviour, enuresis and encopresis, school refusal	are able to manage common behaviour problems such as temper tantrums, sleep problems, the crying baby, feeding difficulties, oppositional behaviour, enuresis and encopresis, school refusal	be able to manage and contribute as part of a team to ongoing management of common behaviour problems such as temper tantrums, sleep problems, the crying baby, feeding difficulties, oppositional behaviour, enuresis and encopresis, school refusal	

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um for Paediatric Training General Paediatrics know about the initial assessment and management of common causes of admission to hospital due to psychological distress such as self- harm, somatic symptoms of distress	are able to undertake the initial assessment and management of common causes of admission to hospital due to psychological distress such as self- harm, somatic symptoms of distress and to refer on when appropriate	initiate management and effectively engage an contribute to ongoing multi-disciplinary care
know about the signs and symptoms that indicate serious conditions such as ADHD, autistic spectrum disorders, depression, psychosis	be able to recognise signs and symptoms that could indicate serious conditions such as attention deficit hyperactivity disorder, autistic spectrum disorders, depression, psychosis	
know about the effects of substance abuse		
	know about the use of standardised questionnaires in assessing behaviour	
Recognise the mental health components of paediatric illness		understand the ways in which children's or you people's mental health difficulties may present infancy, childhood and adolescence
Be able to assess the mental state of children and young people		Be able to undertake an assessment of the mental state of children and young people taki into account their age and stage of developme and know whether they have the skills to help them and when to seek more expert paediatric mental health or psychiatric assessment
		understand the impact of biological factors, including genetic and cognitive factors on the mental health of children and young people
	know how to manage common behavioural problems	
	Understand the possible medical and psychosocial reasons which might lie behind a patient's difficult behaviour	
		understand the emotional dimensions of eating disorders and recognise and initiate treatment
		recognise the need for specialised input in the case of serious emotional distress or mental illness and ensure their needs are met within local health provision

#### Good Clinical Care Knowledge, Skills and Performance

L				
Standard 9	Level 1 (ST1-3) safe practical skills in paediatrics	Level 2 (ST4-5) effective skills in performing and supervising common practical procedures in paediatrics ensuring patient safety	Level 3 (ST6-8) expertise in a range of practical procedures in paediatrics specific to general and sub-specialist training	Assessments
Trair	nees will:			
	to recognise the importance of universal precautions as well as the discarding of sharps within the department			
	know the contraindications and complications of procedures	recognise complications of procedures and be able to respond appropriately		
	know the local guidelines for providing sedation and pain relief for practical procedures			×
	know the relevant markers for invasive procedures			gboc
	know and practise aseptic techniques			ol pu
encies	know the appropriate indications, local and national guidelines for undertaking investigations or procedures			CAT, CbD a
Competencies	be able to use all equipment required to undertake common procedures and investigations			folio, AC
Ŭ	perform independently or under supervision where appropriate the range of diagnostic and therapeutic procedures expected at this stage of training	have developed confidence in independent performance of practical procedures	have developed expertise in practical procedures specifically related to the clinical care of small babies, children and young people	MSF, DOPs, Portfolio, ACAT, CbD and logbook
	be aware of safety issues for patients and staff in relation to investigations of bodily fluids and radiation	know about processes for critical incident reporting		W
	be aware of the factors that are likely to influence the anxiety of the child and how to enlist the help of play leaders			
	know the local and national guidelines for obtaining informed consent	obtain informed consent appropriately		

Curriculum for Paediatric Training General P	aediatrics
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understand and follow the local guidelines for the prevention and management of needle stick injuries

develop expertise in practical procedures

have experience of speaking to parents when complications have occurred

specifically related to the clinical care of small babies , children and young people			
TRAINEES WILL BE ABLE TO PERFORM INDEPENDENTLY (* may need supervision):	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Collection of blood from central lines	$\checkmark$		
Electrocardiogram	✓		
Lumbar puncture	✓		
Non invasive blood pressure measurement	✓		
Umbilical artery and venous cannulation and sampling	✓		
Suprapubic aspiration of urine	✓		
Urethral catheterisation, venesection, cannulation, and capillary blood sampling	✓		
Peripheral arterial cannulation	*	✓	
Routine testing of urine		✓	
Perform basic lung function tests		$\checkmark$	
TRAINEES WILL BE ABLE TO PERFORM INDEPENDENTLY (* may need supervision):			
Bag, valve and mask ventilation	✓		
External chest compression	✓		
Tracheal intubation of term newborn babies	✓		
Tracheal intubation of pre-term and older child	*		
Administer intradermal, subcutaneous, intramuscular and intravenous injections	*	$\checkmark$	
Percutaneous long line insertion	*	~	
Administration of surfactant	*	✓	
Intubation of newborn infants of most gestations		$\checkmark$	
Needle thoracocentesis for pleural effusion or pneumothorax		$\checkmark$	
Insertion of intraosseous needle	*	✓	
Perform needle thoracocentesis	*	✓	
Intubation of extremely immature babies or those with congenital malformation		*	
Draining a pneumothorax in babies and older children		*	
Neonatal chest drain insertion		*	
Exchange transfusion (full and partial)		*	
Cranial ultrasound scanning		*	
Cerebral ventricular tap		*	
Abdominal paracentesis		*	

# Good Clinical Care

Knowledge, Skills and Performance

Standard 10	Level 1 (ST1-3) clear record-keeping and report-writing	Level 2 (ST4-5) improving skills in written communication for a range of audiences	Level 3 (ST6-8) effective skills in written communications for a range of audiences, for children and their families, colleagues and other organisations	Assessments
Traiı	nees will:			
	have understood the need for careful record- keeping and report-writing	Be thorough in making accurate records and reports that will subsequently withstand scrutiny in a Court of Law or a complaints tribunal, and encourage others to do the same	be able to prepare a court report as a professional witness and develop the skills to present such material in court	
		be able to write reports that explain the condition of a child or young person to non-health personnel working in the Courts, social services or education making use of more experienced colleagues when necessary	write reports that explain the condition of a child or young person to non-health personnel working in the Courts, social services or education	ePortfolio
	keep accurate, legible and relevant medical records			C, el
Competencies	begun to develop effective written communications with patients and their families, with colleagues and with other professional organisations	Have developed skills for effective written communications with patients and their families, with colleagues and with other professional organisations	have effective skills in written communications for a range of audiences, for patients and their families, colleagues and other professional organisations	LEADER, DOC,
Cor	be able to use information technology effectively in clinical practice and audit		be able to use electronic communication media, taking into account the principles of confidentiality outlined in the Data Protection Act	MSF, CbD, ACAT, LEADER,
		be able to write reports on medical or developmental conditions for parents and non-clinical staff in education and elsewhere that are easily understood by the lay person and that explains the implications of the condition and how it may impact on her or his carers in non-clinical settings	ensure that spoken and written communications with patients and families are presented in clear straightforward English, avoiding jargon whenever possible	MSF, C

ensure that written information in the form of booklets, leaflets information sheets and websites support verbal communications wherever possible

ensure that written communications summarise accurately discussions with young people and parents or carers, and, to avoid confusion and anxiety, do not include info that was not part of the original discussion

> have developed skills in the presentation of information relevant to their clinical practice for a range of audiences including spoken presentations at meetings, written information for children and families and training materials for different groups of colleagues

#### Good Clinical Care Knowledge, Skills and Performance

Standard 11	Level 1 (ST1-3) reliable responses to investigations in paediatrics	Level 2 (ST4-5) effective leadership skills in undertaking initial investigations in children, based on an understanding of the risks and benefits in each case	Level 3 (ST6-8) effective collaboration with other specialists in using and interpreting complex investigations undertaken in children
Trair	nees will:		
	be able to explain the investigation results to parents and/or the child		
	demonstrate safe practice in the timely and appropriate requests for investigations		
	be able to initiate appropriate investigations	be able to initiate appropriate investigations and management plans appropriate to the case	
	be able to interpret results of investigations requested and respond appropriately	recognise when results of commonly used radiological investigations are abnormal	
cies	be able to record results and document procedures legibly and accurately		
Competencies	be able to give appropriate medical information when requesting investigations		
Com	know that results should be requested clearly and retrieved promptly		
	understand common age appropriate normal ranges and appearances		
	be receptive to feedback form patients and parents/carers on the effects of medication/treatment		
	be aware of the role of complex investigations e.g. CT and MRI scans and their diagnostic potential and complications	know about the role of complex investigations e.g. CT and MRI scans and their diagnostic potential and complications	

### Level 2 (ST4-5)

### Level 3 (ST6-8)

Assessments

know when to seek advice regarding further investigations of a child or interpretation of an abnormal result participate in discussions of abnormal results with services, radiologists, staff and formulate approach to management and follow up of uncommon/abnormal results

be aware of the multi-disciplinary investigation of sudden unexpected death in infancy and childhood ability to safely and effectively manage results of all investigations in the interest of the child, seeking expert advice appropriately

#### **Good Clinical Care** Knowledge, Skills and Performance

Assessments

MRCPCH. CbD and START

Knowledge	Skills and Performance		
Standard 12	Level 1 (ST1-3) knowledge and skills in safe prescribing of common drugs in paediatrics	Level 2 (ST4-5) improving safe prescribing in paediatrics and in advising others appropriately	Level 3 (ST6-8) responsibility for safe prescribing in common and complex situations and for the supervision of others
Trainees	will:		
	Know and understand the pharmacological basis for treatments		
	Be able to prescribe safely for the newborn and for children of all ages		Be able to prescribe safely and supervise the prescription for the newborn and for children of all ages
	Know the approved indications and justification for prescribing drugs in common paediatric problems		
	Know the pharmacokinetics and pharmodynamics of commonly prescribed drugs		
ies	Know about the drug interactions of commonly used drugs		
Competencies	Be aware of possible drug interactions of commonly used drugs where more than one drug is prescribed	know about drug interactions of commonly used drugs	be aware of different patterns of drug reaction and of the common precipitants of cutaneous drug reactions
S	Know how to report adverse affects	Respond appropriately to errors of prescription or administration and be able to talk to parents about this	be aware of how to appropriately investigate an adverse drug effect or prescription error
	recognise serious drug reactions for example Stevens-Johnson Syndrome		
	Know the risks of prescribing in the child-bearing years, in pregnancy and breast feeding mothers		
	understand the principles of prescribing for newborn babies and breast feeding mothers	be able to prescribe for newborn babies and breast- feeding mothers	
	Understand the principles of prescribing in children with renal function	be able to prescribe for children with reduced renal function using the BNF for children and understand when more experienced advice may be necessary	

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or Paediatric Training General Paediatrics		
Know about the roles of the regulatory agencies involved in drug use, monitoring and licensing		
Know about the licensing of medicines for paediatric patients and unlicensed and off-label use		know about the licensing of medicines for paediatric patients and unlicensed and off-label use and the implications of extemporaneous products
Be able to calculate drugs accurately according to specific does for weight or age/weight range or on a specific dose/specific area basis	Have a good working knowledge of the use of formularies	
know how to find out information necessary for safe prescribing through the use of paediatric formularies and pharmacy liaison	Be able to find out information necessary for prescribing through use of paediatric formularies and pharmacy liaison	
know how to use the local and national guidelines for the relief of pain in children	Be able to use the local and national guidelines for the relief of pain in children	
be aware of procedures for obtaining consent in children and young people for the administration of drugs	know about procedures for obtaining consent in children and young people for the administration of drugs	know how to explain relevant adverse side effects
be aware of and follow local policies for intrathecal cytotoxic therapy	know and follow local policies for intrathecal cytotoxic therapy	
understand the rationale for prescribing common antimicrobials		
know the indications for antimicrobial prophylaxis		
understand the mechanism of drug resistance		
know the complications and management of paracetamol poisoning		
be able to apply the national and local guidelines on prescribing paediatric intravenous fluid	to be able to advise and supervise safe prescription of intravenous fluids to medical and surgical patients	to be able to advise and supervise safe prescription of intravenous fluids to complex medical and surgical patients
		be able to prescribe in a manner that enhances adherence and provide information and explanation that enhances concordance

be able to assess mucosal involvement in cutaneous drug reactions

recognise when to consult dermatology, ophthalmology and ENT specialists in the cases of cutaneous drug reactions

be able to make reliable and accurate mathematical calculations required in clinical practice e.g. drug and fluid prescriptions		
be able to prescribe safely and write legible prescriptions, using appropriate medications in correct doses		
	Know about common complementary and alternative therapies and where to find out about them so an informed and safe choice about treatment can be made	understand the different potencies of topical steroids and their side effects

MRCPCH. CbD and START

	d Clinical Care - SAFEGUARDING ledge, Skills and Performance. Safety and Quality		Assessment Standar	d 13
Standard 13	Level 1 (ST1-3) an understanding of safeguarding and vulnerability in paediatrics	Level 2 (ST4-5) effective skills in the assessment of cases of safeguarding and in contributing to their management	Level 3 (ST6-8) effective skills in advising other agencies in safeguarding cases	Assessments
Traiı	nees will:			
	understand the effects of family composition, socio-economic factors and poverty on child health			
	be aware of the effect of the media on public perception of health care issues			
	be aware of the effect of non health policies on child health			AT .
	be aware of child health exploitation issues including child prostitution, child labour and children in combat			and START
ncies	be aware of the effects of armed conflict on child health			ePortfolio
Competencies	Know the principles of the UN Convention on the Rights of the Child, apply these in their own practice and work for the protection of these rights			DOC,
Ŭ	be aware of the World Health Organisation and UNICEF	understand the work of the World Health Organisation and UNICEF		H, CbD,
	be aware of the implications of sustainable development in low income countries			MRCPCH,
	be able to recognise increased needs in children who are fostered, adopted or in residential care	be able to recognise and assess increased need in children who are fostered, adopted or in residential care		2
		be able to undertake and document a comprehensive medical assessment of a child looked after by the local authority		

culum for Paediatric Training General Paediatrics	
be able to recognise and outline the management of children in need of protection	know where help with management of children in need of protection can be obtained and understand the pathways to ensure follow up
know about the resources that may be available from health and other agencies, including the voluntary sector and the roles of allied health professionals to support children and their families	
have a basic understanding of local interagency structures for joint planning of services	understand the role of named and designated professionals
have an understanding of how different disciplines and agencies collaborate locally with respect to looked after children, children with disabilities and over child protection issues	be aware of the role of medical adviser on adoption of the local adoption panel and know how adoption medical reports are compiled
understand concepts and factors underpinning child protection work	understand the difference between civil and criminal proceedings
	understand the difference between a medical report and a witness statement for the police and be able to produce either
	be able to assess and initiate the management of the child in need of protection
recognise features in presentation, where child protection may be in an issue for example where there are patterns of injury, delay in presentation, inconsistencies in the history	Know how to act upon cases of suspected child abuse
recognise where families are distressed and need help to prevent child abuse	
be familiar with the different categories of abuse and recognise that they may occur together: physical, emotional, sexual, neglect, fabrication or falsification/induction of illness in a child	be alert to the diversity of physical signs and symptoms that might indicate child abuse
understand the emotional impact of abuse on the child, family and on professionals	

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know the local guidelines and national guidance and follow the procedures for cases where child abuse is suspected		
keep accurate records of all findings and communications with the child, family members and all other professionals		
to be able to record clearly the results of an examination of a baby, child or adolescent using body charts	be able to conduct an assessment for physical abuse, recording findings and come to a conclusion about the nature of injuries under supervision	
recognise the importance of noting all observations of the child's demeanour and interactions with parents and carers	be able to recognise important features in a child's demeanour and interactions with parents and carers and record observations'	
understand the need to initiate a safe response where abuse is suspected, whilst treating the family with respect and courtesy at all times	know what to do if a child discloses allegations of abuse	
begin to understand the ways in which their own beliefs, experience and attitudes might influence professional involvement in child protection work	understand and be able to manage the ways in which their own beliefs, experience and attitudes might influence professional involvement in child protection work	
begin to understand the principles and practice of common legal processes and legislation relating to safeguarding children and the vulnerable	understand the principles and practice of common legal processes and legislation relating to safeguarding children and the vulnerable	have an up to date working knowledge of the legal processes relating to safeguarding children, including the role if the family court, recent national reports and recommendations (e.g. Lord Laming's Review 2009)
know how to access the Child Protection Register	know how to access the child protection register and understand its role and limitations	
be able to contribute under supervision to written reports for the police or social services	be able to compile and write under supervision the range of reports required in Child Protection Work including police statements, medical reports for social services and court reports	
Understand what is required when asked to give oral or written reports in strategy meetings and case conferences	be able to contribute to case conferences, strategy meetings or court hearings under supervision	

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have attended child protection awareness train	ng	have attended an advanced child protection course for professionals	maintain skills in recognition, assessment and reporting of child protection/safeguarding	DOC, TART
Understand what is required when asked to give evidence in court as a witness of fact	9	be able to appear as a professional witness in civil or criminal proceedings		CbD, and S
			be able to assess safe parenting skills and recognise and respond to indications of unsatisfactory or unsafe parenting	MRCPCH, ePortfolio

For detailed competences on specific knowledge and skills in acute clinical presentations please follow link to <u>Sub-specialty Conditions</u>

Maintaining Good Medical Practice

Knowledge, Skills and Performance

This section details the overall competences for the knowledge base of the paediatrician (assessment standards 14 -15). Each specific specialty has detailed competences for a range of conditions which can be found towards the end of this section. Addressed in this section is also the specific competences for stages of growth and development e.g. emotional, educational, social and nutrition (assessment standard 16) and health promotion activities (assessment standard 17)

In addition to a detailed knowledge and understanding of diseases in children and young people, paediatricians must ensure they are up-to-date, conform with highest standards of practice, aim to promote evidence-based medicine were possible and audit practice (assessment standards 18-20).

To enhance safe practice then medical ethics and the legislation in relation to paediatrics must be understood and demonstrated (assessment standards 21-22)

For more information on assessment please see the assessment blueprint

	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
14	knowledge of the science-base for	sound knowledge of the science-base for	detailed up-to-date knowledge of the
	paediatrics	paediatrics	science base for general paediatrics or
			a paediatric sub-specialty
15	knowledge of common and serious	extended knowledge of common and	detailed knowledge of common and
	paediatric conditions and their	serious paediatric conditions and their	serious paediatric conditions and their
	management	management	management in General Paediatrics or
			in a paediatric sub-specialty
16	an understanding of growth,	effective skills in the assessment and	effective skills in recognising and
	development, health and well-being in	management of children and young	responding effectively to disordered
	paediatrics	people with normal and abnormal growth	growth and development of any kind
		and development	in paediatrics
17	an understanding of health promotion	a commitment to health promotion	involvement in health promotion
	and public health issues in paediatrics	activities for children and their families	activities specific to general paediatrics
_			or a paediatric sub-specialty

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18	an understanding of an evidence-based approach to paediatric practice	development and refinement of evidence- based clinical paediatrics	independent thinking to enable them to challenge guidelines and procedures in paediatrics where appropriate
19	an understanding of clinical governance activities and audit in paediatric practice	participation in clinical governance activities and audit in paediatric practice	an application of risk assessment strategies through involvement in the development, evaluation and implementation of policy and clinical governance activities in paediatric practice
20	a reflective approach to improvement of professional practice as a paediatrician	a commitment to reflective practice and continuing improvement of practice as a paediatrician	effective skills to maintain and develop knowledge and clinical skills required of a specialist in paediatrics
21	an understanding of equality and diversity in paediatric practice	a commitment to an open-minded approach to equality and diversity in their role as a paediatrician	responsibility for ensuring an open- minded approach to equality and diversity in the paediatric team
22	knowledge of the law regarding paediatric practice	knowledge of the law regarding death, data protection, confidentiality and consent in paediatrics	detailed knowledge of the law regarding death, data protection, confidentiality and consent in paediatrics

## Maintaining Good Medical Practice

Knowledge, Skills and Performance

Standard 14	Level 1 (ST1-3) knowledge of the science-base for paediatrics	Level 2 (ST4-5) sound knowledge of the science-base for paediatrics	Level 3 (ST6-8) detailed up-to-date knowledge of the science base for general paediatrics or a paediatric sub-specialty		Assessments
Competencies Competencies	nees will: Know and be able to apply the scientific base relevant to clinical practice in paediatrics		Be able to apply effectively to their practice the knowledge and understanding acquired during training	CPCH,	MRCPCH, The start
	Know the aetiology and pathophysiology of common and serious childhood conditions				MR

See the sub-specialty sections for detailed competencies:

**Cardiology** Dermatology Diabetes and Endocrinology Gastroenterology and Hepatology Genetics and Dysmorphology Haematology and Oncology Infection, Immunology and Allergy Metabolic Medicine Musculo-Skeletal medicine <u>Neonatology</u> Nephro-urology Neurology and Neurodisability **Ophthalmology** Palliative Care Respiratory Medicine with Ear, Nose and Throat Safeguarding

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MRCPCH, CbD, START

#### **Maintaining Good Medical Practice Knowledge, Skills and Performance**

## Level 1 (ST1-3)

knowledge of common and serious paediatric conditions and their

15

Competencies

## management

Standard

#### Trainees will:

Understand the promotion of health and the management of ill-health in babies children and adolescents
Understand the specific health issues, diseases and disorders related to the stages of growth and development
Recognise the mental health components of all paediatric illness
Recognise the effects that school and other social settings may have on childhood illness and vice

versa See the sub-specialty sections for detailed competencies:

Cardiology Dermatology **Diabetes and Endocrinology** Gastroenterology and Hepatology Genetics and Dysmorphology Haematology and Oncology Infection, Immunology and Allergy Metabolic Medicine Musculo-Skeletal medicine Neonatology Nephro-urology Neurology and Neurodisability Ophthalmology Palliative Care Respiratory Medicine with Ear, Nose and Throat Safeguarding

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## Level 2 (ST4-5) extended knowledge of common and

serious paediatric conditions and their management

## Level 3 (ST6-8)

detailed knowledge of common and serious paediatric conditions and their management in General Paediatrics or in a paediatric sub-specialty

Assessments

Be able to recognise when both physical and psychological problems are present and when more than one condition may be present

Be able to undertake an assessment of the mental state of children and young people, taking into account their age and stage of development and know whether they have the skills to help them and when to seek more expert paediatric, mental health or psychiatric assessment

#### Maintaining Good Medical Practice Knowledge, Skills and Performance

KIIOW	Knowledge, Skills and Performance				
Standard 16	Level 1 (ST1-3) an understanding of growth, development, health and well-being in paediatrics	Level 2 (ST4-5) effective skills in the assessment and management of children and young people with normal and abnormal growth and development	Level 3 (ST6-8) effective skills in recognising and responding effectively to disordered growth and development of any kind in paediatrics	Assessments	
Train	ees will:				
		DEVELOPMENT			
ş	understand the variations in relationship between physical, emotional, intellectual and social factors and their influence on development and health		be able to assess the effects of recurrent or chronic illness and its treatment on growth, psycho-social, emotional, physical and sexual development and have strategies to minimise adverse effects		
	be familiar with the patterns of normal development from birth to adulthood	understand the patterns of normal development from birth to adulthood	understand the severity of the presentation of any abnormality in development, taking into account normal development in appropriate domains		
	understand the need for further assessment and investigation of delayed development and how to access this	know how to institute further assessment, investigation and initial management of delayed development		START	
Competencies	know and understand the principles of screening and monitoring		know about different modes of screening and health promotion strategies	cbD and	
Сотре	Understand the specific health issues, diseases and disorders related to the stages of growth and development		,	MRCPCH, CbD and START	
	be able to assess and monitor development using appropriate tools			2	
	know the causes of neurodisability, how disability might affect clinical examination and assessment and understand the need for a multi-disciplinary approach to management	know the causes of neurodisability, how disability might affect clinical examination and assessment and participate in a multi-disciplinary approach to management	be able to lead a multi-disciplinary approach to management of a child with illness and disability		
	recognise deviations from normal patterns of development		know and understand the range of children's or young people's psychological and social development, including normal range and what is outside it		

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recognise that child neglect or abuse might affect a child's development

be able to identify abnormal patterns of development

be able to participate in a multi-disciplinary approach to management

#### **EMOTIONAL DEVELOPMENT**

understand the impact of other environmental factors on a child's development, mental health and functioning

be able to identify when patterns of development are abnormal and where there may be a risk of abnormality which may only become apparent with time

understand the emotional impact of illness and hospitalisation on children young people and their families and take action to minimise this impact

know how to access help in cases where children or young people of different ages might be deprived of opportunities to play and learn

understand and recognise somatisation disorders and know how to provide initial management and how to access appropriate support

recognise pointers to fabricated and induced illness and know how to provide initial management and how to access appropriate support
understand how a family's, child's or young person's attitude to the emotional issues and services may have a significant impact on the presentation and its management

know the factors which influence healthy emotional development

understand the emotional impact of illness and hospitalisation on children and their families

understand a child's need for opportunities to play and learn at different ages

understand the emotional dimensions of eating disorders

understand and recognise somatisation disorders

be able to assess parenting skills and recognise indications of unsatisfactory or unsafe parenting

recognise and know the principles of managing common behavioural problems

recognise the need for specialised input in cases of serious emotional distress or mental illness

recognise pointers to fabricated and induced illnesses and know how to seek help

#### SOCIAL DEVELOPMENT

know the factors that influence social development		
understand the impact of autistic spectrum		be able to recognise and understand the impact
disorders on social development		of autistic spectrum disorders and other organic
		disorders on social development
	EDUCATIONAL DEVELOPMENT	
know the factors which influence intellectual development		
understand the vulnerability of a child with learning difficulties		demonstrate in all aspects of their practice, an understanding of the vulnerability of a child or young person with learning disabilities
understand the impact of learning difficulties on social and emotional behaviour		Know, understand and be able to compare and contrast medical and social models of disability
know about the process of formal statutory assessment of children with possible special educational needs and other educational strategies to support learning and development	contribute to the processes of formal statutory assessment of children with possible special educational needs and other educational strategies to support learning and development	
	GROWTH AND NUTRITION	
understand the effects of fetal growth restriction on long-term health		
I	know about the principles and methods of alternative methods of feeding e.g. gastrostomy, nagogastric tube and common problems that may arise	know about the principles and methods and indications for nutritional support and common problems that may arise from invasive methods or refeeding
understand the importance of emotional factors in feeding and nutrition, in particular in non-organic failure to thrive		know the reasons for faltering growth, including emotional factors and how to investigate appropriately
be able to monitor growth using appropriate tools	be able to monitor growth using appropriate tools, including in disabled children	
understand the basic physiology of breast feeding		
recognise common breast feeding problems and refer appropriately		
Be able to advise a mother about the benefits and risks associated with infant feeding	—	

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culum for Paediatric Training General Paediatrics		
be able to advise a mother about appropriate complementary feeding		
understand the role of nutritional support team, specialist nurses, dieticians, psychologists, pharmacists, speech and language therapists in managing feeding and nutrition in paediatrics		
be able to describe a child's nutritional status in terms of balance, body composition and function		
understand the relevance of nutritional requirements for healthy and sick children	understand the differing nutritional requirements for healthy and sick children and advise on nutritional needs	be able to identify nutritional deficiencies and growth failure which may occur in children and young people who undergo unsupervised dietary modification
understand the relationship between nutritional status and disease		
know about the principles and methods of dietary supplementation	apply the principles of dietary supplementation	
recognise cultural and religious issues related to nutrition		
understand the effects of obesity on long term health	understand environmental factors contributing to obesity and how these might be altered	understand the environmental factors contributing to obesity and how these might be altered
understand interventional strategies involved in weight reduction	be able to advise on interventional strategies involved in weight reduction	be able to advise and manage issues relating to obesity in children and secondary health issues related to obesity
understand the range of factors, biological, psychological and social which influence normal growth and puberty		understand and assess normal and abnormal pubertal development and its relationship to growth
be able to indentify a family needing nutritional support or advice		be able to recognise feeding problems and work with parents directly to offer simple advice and to treat co-morbid conditions
understand the effects of malnutrition on clinical outcomes	describe the effects of malnutrition on clinical outcomes and be able to refer appropriately to the nutritional support team	

#### ADOLESCENCE

	be able to engage effectively with adolescents	
understand the variations in relationship between physical, emotional, intellectual and social factors and their influence on adolescent development		understand what the specific needs of young people are in terms of their emotional, mental and physical health and how these are different from those of children
understand the different specific and changing health needs of adolescents as inpatients and outpatients		know the epidemiology of the main causes of morbidity and mortality in young people
understand normal and abnormal pubertal development and its relationship to growth	understand and assess, under supervision, normal and abnormal pubertal development	
understand and respond appropriately to episodes of self-harm in adolescents		understand the consequences of self-harm and be able to work as part of a clinical network in the management of the young person who self-harms
know about national policies for reduction of teenage pregnancy		know about national policies concerning the health care of young people, including those which help to reduce teenage pregnancy
know about contraceptive and sexual health issues and where appropriate advice might be sought		be able to discuss sexual health issues including basic contraceptive advice and know how to help the young person access appropriate sexual health or genetic advice
know about the issues around transition from paediatric to adult care in adolescents with chronic conditions	understand issues around transition from paediatric to adult care in adolescents with chronic conditions and disabilities	understand issues around transition from paediatric to adult care in adolescents with chronic conditions and disabilities and be able to contribute to transitional care services
be aware of issues relating to gender and sexual identity		
recognise risk-taking behaviours, particularly those which pose a threat to chronic disease management		understand the process of adolescence including experimental behaviours, learning by experience, achieving independence from the family and the consequences of these on health and illness in young people

understand the particular people of adelessants	
understand the particular needs of adolescents with regard to their independence and autonom education and work, body image and sexual identity, concordance with medication and risk- taking and understand how these factors may be affected in young people with chronic conditions	5
understand and value the roles of members of the multi-disciplinary team in the delivery of a transitional care programme	ne
ensure that young people have access to in- patient and outpatient and other medical service that best meet their needs	es
be able to discuss comfortably with young people important health behaviours such as the use of tobacco, alcohol or recreational drugs and intimacy and sexual activities together with the promotion of appropriate strategies for these in relation to specific conditions such as asthma, diabetes, cystic fibrosis, physical disability	e
be able to support young people in self- management of both chronic and acute disease where they want to, and have an understanding as to how to best help when the young person cannot or does not want to manage this	
be able to discuss the implications of chronic illness or disability for career options	
where appropriate and at a negotiated time, be able to raise and agree management of end-of-li issues with young people and their families and	fe

#### **Maintaining Good Medical Practice** Knowledge, Skills and Performance. Quality and Safety

## **Assessment Standard 17**

Level 1 (ST1-3)

an understanding of health promotion and public health issues in paediatrics

Level 2 (ST4-5) a commitment to health promotion activities for children and their families

Level 3 (ST6-8) involvement in health promotion activities specific to general paediatrics or a paediatric sub-specialty

Assessments

Standard 17	an understanding of health promotion and public health issues in paediatrics	a commitment to health promotion activities for children and their families	involvement in health promotion activities specific to general paediatrics or a paediatric sub-specialty
Trai	nees will:		
	be aware of the key determinants of child health and well-being	understand the key determinants of child health and well being	
	be aware of available outcome measures which are used to monitor the health of a child population	know about available outcome measures which are used to monitor the health of a child population and how they might be used to guide and monitor service delivery	
	be aware of the indices of social deprivation	understand the indices of social deprivation	
	know about the organisation of NHS management structures and service networks		
Competencies	know how healthcare services relate to national and local education and social services	show that they understand, in their practice, how healthcare services relate to education and social services	
Com	Have awareness of current government policies which relate to <b>children</b>	Be familiar with current government policies which relate to <b>children</b>	
	be aware of the principles of health promotion and health education and of current health promotion activities carried out in the community	understand and be able to contribute to health promotion and health education and be aware of current health promotion activities carried out in the community	
	understand the cause of outbreaks of infection, its investigation and control	show that they understand in their practice the causes of outbreaks of infection, its investigation and control	be able to lead within paediatrics on responding to outbreaks of infection and control
	understand the principles of public health needs assessment		

iculum for Paediatric Training General Paediatrics		
	know the local, national and international structures	
	for healthcare	
	understand how healthcare services relate to	
	education and social services	
	understand the principles of immunisation	
	programmes, national and local structures that deliver	
	immunisation programme, and how they might be	
	monitored and audited	
	be aware of patient safety issues and the importance	
	of prevention of nosocomial infection	
	of prevention of hosocomarimection	
	SCREENING AND SURVEILLANCE	
Know about screening and surveillance	Know about screening and surveillance programmes,	
programmes	including their implementation and evaluation	
Know about the conditions currently screened for		
Understand the ethical dilemmas posted by		
screening		
Be able to explain specific screening to parents	Be able to explain specific screening to parents and	Be able to explain positive and false positive
Be able to explain specific screening to parents		
	organise these tests as necessary	results to parents and respond appropriately to
De able te conduct developmental eveminations at	Be able to refer appropriately when required	their concerns
Be able to conduct developmental examinations at	Be able to refer appropriately when required	
different ages		
	HEALTH PROMOTION	
Understand the importance of evidence to support	Be able to incorporate health promotion activities in	
health promotion activities	their practice	
	Include health promotion messages during the	
	consultation where appropriate	
Know the role of health promotion programmes for	Be able to contribute to health promotion	

programmes

MRCPCH, Portfolio and CbD

children

example to prevent dental decay, smoking,

Be able to advise parents of avoiding risks for

accidents, obesity, sudden infant death

#### PUBLIC HEALTH AND EPIDEMIOLOGY

Know about population statistics and know how they might be used in service development	understand about population statistics and know how they might be used in service development
Understand the role of public health doctors in commissioning NHS services	
Understand good study design	
Know the principles of how to conduct population studies	
Be able to evaluate evidence	Be able to evaluate evidence and critique clinical research papers

#### INJURY PREVENTION

Understand the epidemiology of injuries in children and young people	Know about effective injury prevention initiatives
Know about the sequelae of injury	
Know about rehabilitation	
Be able to recognise when injury may be non- accidental	Be able to recognise when injury may be non- accidental and to assess that injury
Be able to recognise and treat accidental ingestion and deliberate self-poisoning	
Be able to advise parents on injury prevention	Be able to advise parents on injury prevention and contribute to local injury prevention programmes

IMMUNISATION

Understand passive and active immunisation	
Understand the principles and the rationale behind the national immunisation policy for children in Britain	Know about immunisation programmes and schedules in the UK and elsewhere
	understand the principles of immunisation programmes, national and local structures that deliver immunisation programme, and how they might be monitored and audited
	Be able to contribute to immunisation programmes by contributing to training and auditing outcomes

Know the indications, contraindications and complications of routine and specific childhood immunisations

Be able to advise parents

Know where and from whom to seek advice for the most complex histories about immunisations

Be able to advise parents and professionals about commonly referred immunisation problems

Understand the reasons for immunisation failures

	Level 1 (ST1-3) an understanding of an evidence-based approach to paediatric practice	Level 2 (ST4-5) development and refinement of evidence- based clinical paediatrics	Level 3 (ST6-8) independent thinking to enable them to challenge guidelines and procedures in paediatrics where appropriate	
ir	nees will:			
	know how Cochrane systematic reviews are developed and the principles of meta analysis		demonstrate an understanding of how to perform and interpret systematic reviews and how they differ form narrative reviews and understand the principles of meta-analysis	
	ensure that they are up to date in their practice and endeavour to promote evidence-based medicine where possible	have an understanding of common treatments for clinical conditions and the evidence-base for these	be able to practice evidence based medicine and understand and analyse critically its limits	
	be able to give an evidence based presentation	be able to give an evidence based presentation and be able to analyse critically those given by others	· · · · · · · · · · · · · · · · · · ·	
	L	J	ensure they are up-to-date in their practice and promote evidence-based medicine where possible	
			be able to understand the limitations of guidelines, how to use guidelines effectively and when it is appropriate to work outside	

guidelines

#### Maintaining Good Medical Practice Knowledge, Skills and Performance. Quality and Safety

Assessment Standard 19

J				
Standard 19	Level 1 (ST1-3) An understanding of clinical governance activities and audit in paediatric practice	Level 2 (ST4-5) participation in clinical governance activities and audit in paediatric practice	Level 3 (ST6-8) an application of risk assessment strategies through involvement in the development, evaluation and implementation of policy and clinical governance activities in paediatric practice	Assessments
	nees will:		practice	
	know how clinical guidelines are produced and how they might be used appropriately within the context of clinical practice	demonstrate an understanding of how guidelines are produced and how these might be used in their own practice	be able to develop clinical guidelines, understand how they are produced nationally and how these should be used to guide their own practice	
	familiar with and follow the local and national clinical guidelines and protocols	begin to evaluate and generate local and national clinical guidelines and protocols in paediatric practice and recognise the individual patient's needs when using them	Be able to generate local and evaluate national clinical guidelines and protocols in paediatric practice and public health and recognise the individual patient's needs when using them	MRCPCH, MSF, CbD, Leader, START and ePortfolio
es	understand the principles of evaluation, audit, research, development and standard setting in improving quality	begin to use the principles of evaluation, audit, research, development and standard setting in improving quality	use principles of evaluation, audit, research and development in standard setting in improving quality	-ART and
Competencies	participate in clinical governance activities, risk management and audit	participate in clinical governance activities and support colleagues in their participation	participate and take responsibility for clinical governance activities and encourage and support colleagues in their participation	eader, Sl
Com	be able to use ICT effectively in clinical practice and audit			CbD, L
	know how to access clinical databases and where to find web-based information	show that they are regularly using clinical databases and know where to find web-based information		H, MSF,
		be aware of local processes for dealing with and learning from clinical errors	be aware of local processes for dealing with and learning from clinical errors and to be able to work within them	MRCPC
		J	understand and take account of their practice of risk issues to themselves and others, including those related to personal interactions and bio	

hazards

	able to conduct an audit of screening, health promotion or service delivery under supervision		and
be aware of complaints protocols in hospitals	be able to advise families about complaints procedure	be able to handle a complaint	START
		have a working knowledge of risk assessment and its application to personal, professional, clinical and organisational practice	der,
		understand and take account in their practice of measures to reduce clinical risk	CbD, ePortf
		be able to carry out audit in a range of settings in partnership with all stakeholders in order to identify best practice	PCH, MSF,
		be able to contribute to the implementation of national and local health policy initiatives	MRCPCH,

# Maintaining Good Medical Practice Knowledge, Skills and Performance. Quality and Safety

Standard 20	Level 1 (ST1-3) a reflective approach to improvement of professional practice as a paediatrician	Level 2 (ST4-5) a commitment to reflective practice and continuing improvement of practice as a paediatrician	Level 3 (ST6-8) effective skills to maintain and develop knowledge and clinical skills required of a specialist in paediatrics	Assessments
Traiı	nees will:			
	begun to develop a reflective approach to their practice and a commitment to learning and improving their practice through reflection	developed a reflective approach to their practice with an awareness of their developing expertise and an ability to learn from previous good practice and clinical errors	have developed a reflective approach to their practice, with an awareness of their level of expertise and limitations and their developmental needs	
		have developed a keen self-awareness so that they know when they are ready to take on new challenges such as breaking bad news to a family and when they continue to need support and guidance	evaluate their own performance critically	olio
encies		developed a reflective approach about their experience of being a trainee in order to ensure positive experiences for trainees now under their supervision	be willing to accept mentoring as a positive contribution to their own professional development	D and ePortfolio
Competencies			have a willingness to acknowledge and reflect on the way in which they may be influenced by their earlier life experiences, have an impact on perceptions of and interactions with young people, their families and professionals	MSF, LEADER, CbD
		show a commitment to continuing professional development which would involve not only seeking appropriate training opportunities but also responding to complaints and enquiries as useful learning tools	be willing to learn from others to discuss cases openly and seek advice as appropriate and necessary	Σ
			know how to find, review and maintain relevant knowledge in their speciality in order to maintain their fitness to practice	

## Maintaining Good Medical Practice

Knowledge, Skills and Performance. Communication, partnership and teamwork. Maintaining Trust

Standard 21	Level 1 (ST1-3) an understanding of equality and diversity in paediatric practice	Level 2 (ST4-5) a commitment to an open-minded approach to equality and diversity in their role as a paediatrician	Level 3 (ST6-8) responsibility for ensuring an open- minded approach to equality and diversity in the paediatric team	
Trai	nees will:			-
	understand the importance of cultural diversity and the difficulties where religious and cultural beliefs that parents might hold about the treatment of their children are in conflict with good medical practice ( and know where to find legal and ethical guidelines to support their work)	Be aware of the different cultural and religious beliefs held by the local population which impact on attitudes to health and sickness in children and begin to develop strategies to manage relationships where these beliefs might cause conflict	understand the importance of cultural diversity and the difficulties where religious and cultural beliefs that parents might hold about the treatment of their children are in conflict with good medical practice and know when legal and ethical guidelines will support your management or view of the situation	
encies	begin to understand that young people may have or may develop health care beliefs which are in conflict with those of parents or professionals,( and know where to find legal and ethical guidelines to support their work)	understand that young people may have or may develop health care beliefs which are in conflict with those of parents or professionals, when to seek support and where to find legal and ethical guidelines to support their work	have developed strategies to manage relationships where health care beliefs might cause conflict	
Competencies	when to seek support and where to find legal and ethical guidelines to support their w		know the legal and ethical guidelines to support their work and where to find more information when required	
	have an open minded approach to equality and diversity	understand the importance of an open minded approach to equality and diversity and follow this in their practice	adopt an open-minded approach to equality and diversity in their practice and recognise these issues with complex clinical situations	
			awareness of religious and cultural diversity and beliefs in counselling children and families regarding end of life care	

understand the national and contribute to local initiatives aimed at reducing inequalities in child health and well-being Assessments

	Maintaining Good Medical Practice       Assessment Standard         Knowledge, Skills and Performance       Assessment Standard				
Standard 22	Level 1 (ST1-3) knowledge of the law regarding paediatric practice	Level 2 (ST4-5) knowledge of the law regarding death, data protection, confidentiality and consent in paediatrics	Level 3 (ST6-8) detailed knowledge of the law regarding death, data protection, confidentiality and consent in paediatrics	Assessments	
3Competencies	ees will: know the law with regard to consent and confidentiality, in children, young people and adolescents and follow the relevant legal principles in practice	know the law with regard to consent to treatment and the right to refuse treatment, and be aware of variability in Scotland, Wales and Northern Ireland, continuing changes in the law and its interpretation.	<ul> <li>know and follow key legal and ethical guidelines relating to consent to treatment and the right to refuse treatment, confidentiality, and be aware of variability in Scotland, Wales and Northern Ireland, continuing changes in the law and its interpretation.</li> <li>the legal and ethical guidelines to support their work and where to find more information when required</li> <li>awareness of employment legislation and where to seek further advice on employment matters for various groups of healthcare professionals</li> <li>be able to discuss an assessment of the psychosocial health of a child or young person with the multi disciplinary team while respecting patient confidentiality</li> <li>know when in the interest of the child it may be necessary to break confidentiality</li> </ul>	MRCPCH, CbD, LEADER, START and ePortfolio	
	understand the importance of post-mortem investigations		understand the purpose of post-mortem examinations and know about procedures		

aspects of consent and confidentiality

		be able to prepare and discuss with parents, carers and other professionals "Do not attempt resuscitation" policies as appropriate, taking due account of the Human Rights Act (1998), ensuring that the best interests of the child are held paramount at all times be able to seek consent for post-mortem examinations and communicate effectively with the Coroner
	know about the role of the Caldicott guardian and follow the principles of the data protection act and confidentiality	
understand and follow the principles and legal		

MRCPCH, CbD, LEADER, START and

Teaching, Training, Assessing, Appraising

Communication, partnership and teamwork. Knowledge, skills and performance. Safety and Quality

This section details the competences to be gained in the areas of teaching and research methodology, purpose of assessment and feedback and contributing to appraisal systems.

For more information on assessment please see the assessment blueprint

23	Level 1 (ST1-3) an understanding of effective teaching in paediatrics	Level 2 (ST4-5) skills in effective teaching in paediatrics	Level 3 (ST6-8) a commitment to effective teaching and training of colleagues working in different contexts in the care of children and young people
24	a positive approach to receiving mentoring and educational supervision	a commitment to providing positive experiences of mentoring and educational supervision	effective skills in the training, supervision and assessment of a wide range of colleagues working in the care of children and young people
25	an understanding of the need for an ethical and rigorous approach to research in paediatrics	an understanding of research methods and methodology and an involvement in research activities and publications	understanding and application of complex methodological approaches in research in paediatrics

#### Teaching, Training, Assessing, Appraising Knowledge, Skills and Performance. Quality and Safety

ard 23	Level 1 (ST1-3) an understanding of effective teaching in paediatrics	Level 2 (ST4-5) skills in effective teaching in paediatrics	Level 3 (ST6-8) a commitment to effective teaching and training of colleagues who are working in different contexts in the
Standa			care of children and young people

Trainees will:

Competencies

begin to develop a sound understanding and a commitment to the principles and practice of effective teaching and learning in clinical contexts	have developed some effective teaching and learning skills in a range of clinical contexts	Demonstrate a range of effective teaching and learning skills in a range of clinical contexts
	participate in departmental teaching programmes	to be organise and lead a range of learning sessions
	be able to supervise and teach the relevance of appropriate investigations and the safe conduct of practical procedures	to be able to demonstrate and explain to trainees strategies used to conduct effective consultations with babies, young children , adolescents and their families
		be able to elicit and act upon feedback on content and presentation of teaching
		Be able to participate in teaching and research topics within their specialty and in related areas

Assessments

#### Teaching, Training, Assessing, Appraising Communication, partnership and teamwork. Knowledge, Skills and Performance. Quality and Safety

Standard 24	Level 1 (ST1-3) a positive approach to receiving mentoring and educational supervision	Level 2 (ST4-5) a commitment to providing positive experiences of mentoring and supervision	Level 3 (ST6-8) effective skills in the training, supervision and assessment of a wide range of colleagues working in the care of children and young people	Assessments
Trair	nees will:			
	understand the importance of a positive and constructive approach to mentoring and supervision	understand the importance of a positive and constructive approach to mentoring when giving guidance, support, feedback to trainees under their supervision		
	show a commitment to their continuing professional development and respond positively to requests for enquiries or critical incident reports and to outcomes of reviews, assessments and appraisals of their performance			olio
Competencies		have developed a reflective approach of their experiences of being a trainee in the past and ensure positive experiences for trainees under their clinical supervision		XT and ePortfolio
Com		be able to assess accurately the levels of support and supervision required by different members of the team they clinically supervise	be able to identify learning needs in a wide range of professionals and build on this in their teaching	MSF, START
		contribute to the training of medical students and post graduate trainees and other professionals such as nurses, physiotherapists, dieticians and others outside their specialty such as teachers and social workers	take responsibility for the training, supervision and assessment of medical students and trainees and other professionals such as nurses, physiotherapists, dieticians and others outside their specialty such as teachers and social workers	
	show honesty and integrity when contributing to			

peer reviews of colleagues in teaching and research

## Teaching, Training, Assessing, Appraising Knowledge, Skills and Performance

## Assessment Standard 25

Standard 25

Level 2 (ST4-5) an understanding of research methods and methodology and an involvement in research activities and publications

Level 3 (ST6-8) understanding and application of complex methodological approaches in research in paediatrics

Trainees will:

IIdi	nees will:		
	an understanding of the need for an ethical and rigorous approach to research in paediatrics	an understanding of research methods and methodology	understanding and application statistical methods and presentation for peer review and publication
Competencies	understand their responsibilities to conduct research with honesty and integrity, seeking ethical approval where appropriate and safeguarding the interests of patients	Understand the process of the Ethical Committee approval for research studies	conduct research with honesty and integrity, seeking ethical approval where appropriate and safeguarding the interests of patients
	begin to understand basic concepts in research design and methodology including the difference types of research studies	show that they have understood the basic approach to study design	understand the techniques used in epidemiological studies
	understand the difference between research and audit		understand the difference between population assessments and unit-based studies and be able to evaluate outcomes for both
	understand the steps involved in planning a research project	be able to plan a research project effectively under supervision	know about and participate in clinical and research special interest groups relevant to their speciality
	understand when to use simple statistical tests and their interpretation	demonstrate an understanding of when to use more complex statistical tests and how to interpret significance	know how relative and absolute risks are derived and the meaning of the terms predictive value, sensitively and specificity in relation to diagnostic tests
	begin to develop critical appraisal skills and to apply to their reading of the literature, including systematic reviews of their own teaching and the teaching of others	have developed critical appraisal skills and can show how to apply these to their reading of the literature, including systematic reviews, reviews of their own teaching and the teaching of others	demonstrate an understanding of Good Clinical Practice for all aspects of the conduct of clinical trials

MRCPCH, MSF, START and ePortfolio

Assessments

to be able to write a critical account of clinical practice showing that they can deal with complex issues systematically and creatively and that when necessary they can write in line with conventions for academic papers	demonstrate an understanding of how to perform and interpret systematic reviews how they differ from narrative reviews and understand the principles of meta-analysis
demonstrate an understanding of how bias and confounding variables may affect the conclusions of clinical research studies	
	demonstrate an understanding of the role of the ethics committees for clinical studies and the process of ethics applications

Relationships with Patients

Communication , partnership and teamwork

This section covers the promotion of effective communication with children, young people and their families/carers.

For more information on assessment please see the  $\underline{\mbox{assessment blueprint}}$ 

26	Level 1 (ST1-3) an understanding of effective communication and interpersonal skills with children of all ages	Level 2 (ST4-5) a commitment to effective communication and interpersonal skills with children of all ages	Level 3 (ST6-8) effective strategies to engage children in consultations and in the management of their care
27	empathy and sensitivity and skills in engaging the trust of and consent from children and their families	improving skills in building relationships of trust with children and their families	effective skills in conveying and discussing difficult information, including death, bereavement, with young people and their families
28	understanding of listening skills and basic skills in giving information and advice to young people and their families	increasing confidence in giving advice to young people and their families	effective skills in giving information and advice to young people and their families in common and complex cases

## Assessment Standards 26-28

## Relationships with Patients Communication, partnership and teamwork. Maintaining Trust

Communication, partnership and teamwork. Maintaining Trust			
Standard 26	Level 1 (ST1-3) an understanding of effective communication and interpersonal skills with children of all ages	Level 2 (ST4-5) a commitment to effective communication and interpersonal skills with children of all ages	Level 3 (ST6-8) effective strategies to engage children in consultations and in the management of their care
Trai	nees will:		
	have understood the need for and begun to develop effective communication skills specific to their work with babies, children, young people and their families'	continuing to develop a wide range of effective communication skills specific to their work with children, young people and their families	understand the importance of directing communications to the baby, child or young person as well as to parents and carers
			have developed a wide range of effective age- appropriate communication skills specific to their work with babies, children, young people and their families
ies	know where to find assistance in the case where a child or family member may not speak English	have developed strategies to respond appropriately and where to find assistance in the cases where a child or family member may not speak English or where there is an impairment such as hearing loss that may affect understanding	be able to respond appropriately and know cases where to find assistance in cases where a child or family member may mot speak English or where there is a sensory impairment that may affect understanding
Competencies	have understood the need to respond to babies, disabled children or young people who may not be able to express themselves verbally and who might be in pain or distress	demonstrate an ability to respond to babies, disabled children or young people who may not be able to express themselves verbally, including those who maybe in pain or distress	able to respond to babies, disabled children or young people who may not be able to express themselves verbally, including those who might be in pain or distress
	understand the need to develop strategies for careful and appropriate use of language in difficult and challenging circumstances	begin to develop strategies for careful and appropriate use of language in difficult and challenging circumstances	have effective strategies for careful and appropriate use of language in difficult and challenging circumstances
	have strong communication and interpersonal skills to enable them to work effectively with patients and their families, and colleagues in multi- professional and multi-discipline teams		have developed skills to establish a child's or young person's and family's understanding of a situation, clarifying this as appropriate and to build on this effectively in discussion about the condition and its management
	be able to demonstrate courtesy to families, colleagues and members of the multi-disciplinary team at all times	have begun to develop the confidence to be firm and diplomatic in difficult situations, dealing with emotional parents	have the confidence to be firm and diplomatic in difficult situations, for example when dealing with emotional parents

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MRCPCH, MSF, MiniCeX, LEADER, CbD, ACAT, PaedCCF

Assessments

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rriculum for Paediatric Training General Paediatrics		
experience of how to communicate diagnosis and prognosis effectively to children , where appropriate, young people and their families		have developed a range of approaches to communicating the breadth of diagnostic possibilities and other clinical information to children, young people and their families so that consent is always informed and the plan and progress of treatment is understood
have begun to develop appropriate responses and empathy for children, young people and their families experiencing difficulty and distress, for example, in the case of a child who is dying	have developed appropriate responses and empathy for children, young people and their families experiencing difficulty and distress, for example, in the case of an angry or dissatisfied relatives	
	know the procedures and guidelines to support the management of conflict in relationships with children, young people and their families	to be able to work effectively with young people who may have or may develop health care beliefs that are in conflict with those of parents or professionals
		understand the importance of seeking the views of young people to inform decisions about their individual care and to encourage their participation in their care
		encourage children and young people to participate in their individual care and in development of services using expert resources appropriately
		effective skills in working with children, young people and families to achieve concordance in planning management and treatment, enabling children and young people to maximise control over their illness and its management
		be able to recognise, interpret correctly and respond to verbal and non-verbal cues from children, young people and parents
		have developed observation skills to support interpretation of developmental levels and possible signs when they are unable to cooperate with formal assessments
		be able to counsel parents about serious conditions and abnormalities within their area of expertise

be able to discuss the indications, benefits and adverse events of a procedure to patients, relatives and carers that will allow informed consent for procedure which the doctor is competent themselves to perform

have experience of how to communicate a diagnosis and prognosis effectively to children, where appropriate, young people and their families have developed a range of language strategies such as the use of metaphor or images which relate to everyday life, to explain clearly to a child or young person and their family , their symptoms, condition or treatments and their feelings behaviour

be able to explain the role of other professionals and agencies to children, young people and their families

to be able to demonstrate to trainees how to communicate a diagnosis and prognosis effectively to children, young people, and their families

Relationships with Patients ommunication, partnership and teamwork. Maintaining Trust		Assessment Standard 27
Level 1 (ST1-3) empathy and sensitivity and skills in engaging the trust of and consent from children and their families	Level 2 (ST4-5) improving skills in building relationships of trust with children and their families	Level 3 (ST6-8) effective skills in conveying and discussing difficult information, including death, bereavement, with young people and their families
rainees will:		
Understand the need for compassion, empathy and respect for children, young people and their families	Show compassion and respect for children, young people and their families	Practise with compassion and respect for children, young people and their families and act as a role model to others
know the national and local guidance for obtaining consent for post-mortem		
understand the different factors that have an influence on the patient's journey		
		have developed credibility in their relationships with children, young people and their families and with colleagues through their knowledge and skills and experience in clinical practice and in their ability to work independently
	keep an open mind with regard to health-care beliefs, such as complementary and alternative therapies, and to respect the patient, if not the therapy, as long as it is not harmful to the patient	
understand the factors that affect a child's level of anxiety about illness, treatment or examination	· · · · · · · · · · · · · · · · · · ·	
have begun to develop strategies to manage a child's anxieties and personal anxieties		have developed strategies to manage a child's or young person's anxiety and personal anxieties
recognise the impact on parents and the rest of the family of acute or chronic illness, hospitalisation or the death of a child		
		Be able to recognise, acknowledge and manage different levels of parental anxiety
		be sensitive to the effects of stigma on children

Assessments

and families in relation to medical conditions

### **Relationships with Patients**

Communication, partnership and teamwork. Maintaining trust

28	Level 1 (ST1-3) understanding of listening skills and basic	Level 2 (ST4-5) increasing confidence in giving advice to	Level 3 (ST6-8) effective skills in giving information	ents
Standard 28	skills in giving information and advice to young people and their families	young people and their families	and advice to young people and their families in common and complex cases	Assessments
Trai	nees will:			
	have begun to develop active listening skills with children and young people and understood the need to respect their views	have developed active listening skills with children and young people and understood the need to respect their views in accordance with their age and maturity and to respond appropriately, where, for example, a child is felt to be vulnerable	have effective active listening skills in consultations with children and young people and understand the need to respect their views in accordance with their age and maturity and to respond appropriately where for example a child or young person is felt to be vulnerable	PaedCCF
ıcies	show patience and sensitivity in their communications with children and their families and a particular ability to explore their individual perspectives of a problem		be able to convey and share effectively difficult or bad news, including end of life issues, with children, young people, parents or cares and help them to understand any choices they have or decisions to be made about ongoing management	MRCPCH, MSF, MiniCeX. LEADER, CbD and Pae
Competencies		have developed a keen self awareness so that they know when they are ready to take on new challenges such as breaking news to a family		niCeX. LEA
0			be able to recognise indicators of stress or mental health problems in family members and communicate appropriately with relevant professionals	CH, MSF, Mir
			be able to liaise with parent support and self- help groups when necessary	MRCP
	know about agencies both statutory and voluntary that can provide support to children and their families in coping with.	know how to access such national resources as the Contact a Family (CAF) directory and the internet as well as local sources to provide information to children and families about support groups		

Communication, partnership and teamwork. Safety and Quality. Knowledge, Skills and Performance

This section details the appropriate attitudes and behaviours that help deal with complex situations and to work effectively in team work and as a leader within a healthcare team. Much of the medical leadership framework is addressed within this section looking at the practice of leadership.

For more information on assessment please see the assessment blueprint

	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
29	Effective Communication and	Skills in ensuring effective relationships	Positive and constructive relationships
	interpersonal skills with colleagues	with between colleagues	from a wide range of professional
			contexts
30	Professional respect for the contribution	Increasing confidence in team-work and	A commitment to effective multi-
	of colleagues in a range of roles in	the ability to collaborate with a range of	agency and multi-disciplinary team
	paediatric practice	external agencies about the needs of	working for the care of children
		children	
31	Effective time management skills	Effective leadership and management	Effective managerial skills in taking on
		skills in clinical and non-clinical settings	a positive managerial role to support
			effective service provision
32	Effective handover, referral and	Effective skills in ensuring handover,	Effective leadership skills in the
	discharge procedures in paediatrics	referral and discharge procedures in	organisation of paediatric team-
		paediatrics	working and effective handover
33	An understanding of the effects of local,	Experience and understanding of working	Effective skills in promoting clinical
	national and international policies on	within international, national and local	practice through engagement with
	their work and on the health of children	legal structures and organisations	local, national and international
		involved in the care of children	organisations involved in the care of
			children

Communication , partnership and teamwork

Standard 29	Level 1 (ST1-3) Effective Communication and interpersonal skills with colleagues	Level 2 (ST4-5) Skills in ensuring effective relationships with between colleagues	Level 3 (ST6-8) Positive and constructive relationships from a wide range of professional contexts
<b>Competencies</b>	Dees will: Understand the need to engage effectively with professionals in other disciplines and agencies from the voluntary sector Understand the need for open and non- discriminatory professional working relationships with colleagues Recognise the needs for timely senior support in serious clinical situations and be effective in requesting this	Ensure open and non-discriminatory professional working relationships with colleagues and be aware of the need to prevent bullying and harassment Be able to liaise effectively with consultants and senior doctors from a range of specialties to optimise management of a child with acute serious illness	Have developed effective professional networks to support clinical practice and other activities, including research, education and management

Assessments

Communication , partnership and teamwork

Standard 30		Level 1 (ST1-3) Professional respect for the contribution of colleagues in a range of roles in paediatric practice	Level 2 (ST4-5) Increasing confidence in team-work and the ability to collaborate with a range of external agencies about the needs of children	Level 3 (ST6-8) A commitment to effective multi- agency and multi-disciplinary team working for the care of children	Assessments
Trai	<b>nees v</b> Demo	<b>will:</b> onstrate the ability to work effectively in multi-	have experience of working with multi-agency teams	be able to work effectively in multi-agency	
	•	plinary teams and with colleagues from a wide e of groups	for example with social workers and teachers and have developed an awareness of their own role within the team and of the skills and expertise of others	teams, for example, with social workers and teachers and have developed an awareness of their role within the team and of the skills and expertise of others	
ncies	comp comn hospi	the ability to take on differing and olementary roles within the different nunities of practice within which they work, in itals, general practice and in the community, in I services and schools	Be able to liaise effectively with colleagues in multi- agency teams such as education and social services	be able to interact effectively with professionals in other disciplines and agencies and from the voluntary sector	d CCF)
Competencies	with consi	erstand the importance of effective team work colleagues in multi-disciplinary teams to ensure stency and continuity and a holistic approach e treatment and care of children and young le		be able to work effectively in multi- disciplinary teams and with colleagues from a wide range of professional groups	ALL (exc Aped
			recognise their own working preference and how these may impact on team working	recognise their own working preferences and accept different approaches of colleagues be aware of their role in the team and the impact in the team	
				work with stakeholders so that a client/ patient-centred service is created and	

sustained

Communication , partnership and teamwork

	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)	s
Standard 31	Effective time management skills	Effective leadership and management skills in clinical and non-clinical settings	Effective managerial skills in taking on a positive managerial role to support effective service provision	Assessments
Tra	inees will:			
	Have effective time management skills in their professional roles	have developed effective organisational skills for themselves and for others in prioritisation and delegation	demonstrate effective leadership skills in clinical situations, through their ability to organise, prioritise and delegate and be able to help others develop these skills	
	be able to prioritise tasks in personal and professional contexts for example in medical emergencies	be able to think clearly and to prioritise in clinical decision making and practice	·	
		be able to delegate duties appropriately to colleagues whom they supervise	demonstrate safe and effective leadership through organisation of team work and prioritising appropriately	
ncies		have developed confidence to make decisions within a team	be confident to make decisions within a team and be aware of their on other team members	dccF)
Competencies		be able to take on a leadership role in multi- disciplinary teams when appropriate, for example at a discharge meeting and know when it may be inappropriate to do so	take on a leadership role in multi-disciplinary teams by representing the health needs of a child, young person and their family at a discharge meeting and know when it maybe inappropriate to do so	ALL (exc PaedCCF)
		have developed some leadership skills for example in communicating the urgency of action in an emergency while enabling teams to remain calm		
		Communicate effectively in the face of clinical uncertainty	Communicate effectively in the face of clinical uncertainty in acute, serious or complex illness	
		have developed effective problem solving strategies in clinical and management contexts, for example where there is a shortage of beds or medical staff or other resource		

be able to recognise the effective qualities of management of meetings, such as having clear action points and achievable and recognisable outcomes

be able to provide specialist support to hospital and community based paediatric services including primary care	CCF)
Have awareness of non-clinical managerial skills important to effective running and change in a paediatric dept e.g. direction setting, influencing key people, communication strategies and resource management	ALL (exc PaedCCF
Demonstrate safe and effective leadership through organisation of team work and prioritisation	

Communication, partnership and teamwork. Knowledge, Skills and Performance. Safety and Quality

### Level 1 (ST1-3) Level 2 (ST4-5) Level 3 (ST6-8) Assessments Effective handover, referral and discharge Effective skills in ensuring handover, Effective leadership skills in the procedures in paediatrics referral and discharge procedures in organisation of paediatric teamworking and effective handover paediatrics Trainees will: Ensure effective hand-over procedures and clear Manage effective hand-over procedures and clear be able to lead handover effectively and in a communications with colleagues to ensure the communications with colleagues to ensure the timely way in difficult circumstances continuing good medical care of patients continuing good medical care of patients DOC, HAT, ACAT, START and ePortfolio Ensure the effective discharge procedures to their Be able to take on a leadership role in al multifamily, community, social and primary care services disciplinary team when appropriate for example representing the health needs if a child, young person and their family at a discharge meeting and know when it maybe inappropriate to do so Supervise handover of results that still need to be obtained at the end of shifts

know the objectives of a paediatric follow up

Competencies

32

Standard

Royal College of Paediatrics and Child Health

### **Assessment Standard 32**

be able to plan transitional care and referral of the young person to clinical genetics at an

know how to refer appropriately to community services before discharge and begin to participate in the follow up of those

appropriate time

at risk

	king with Colleagues		Assessment Standard 33
Standard 33	Level 1 (ST1-3) An understanding of the effects of local, national and international policies on their work and on the health of children	Level 2 (ST4-5) Experience and understanding of working within international, national and local legal structures and organisations involved in the care of children	Level 3 (ST6-8) Effective skills in promoting clinical practice through engagement with local, national and international organisations involved in the care of children
Trair	nees will: understand how national and local policy initiatives impact on medical practice and social health and well being		how to respond appropriately to health service targets and be a able to participate in the development of services
	begin to develop an understanding of national service frameworks and managed clinical networks within paediatrics, the role if NICE, the role of RCPCH, PMETB and the GMC in professional life and professional regulation	the structure of large NHS organisations including management structures, governance, policy and procedures relevant to the care of children	know about agencies both statutory and voluntary that can provide general and conditional specific support to children, adolescents and their families in coping with their health problems
ies		some experience of working within an organisation attending different committees and meeting	develop personal skills to be able to participate effectively in local management meetings
Competencies			knowledge and understanding of systems of management and decision making in health care organisations
Comp			have gained an understanding of national and local regulatory bodies particularly those involved in standards of professional behaviour, clinical practice and education, training and assessment
			understand the relationship between local health, educational and social service provision
	be aware of shared care protocols and the role of outreach clinics	begin to work in managed clinical networks and in outreach clinics	be able to work effectively in managed clinical networks

participate and contribute to organisational decision making process

MRCPCH, , MSF, CbD, LEADER, START and ePortfolio

Assessments

have some familiarity with the roles of allied health professionals and other agencies in the support of children and families

be aware of the impact of the European Union on child health and healthcare systems know how to access and understand the roles of allied health professionals and other agencies in the support of children and families

well-being

### Probity

Maintaining Trust. Safety and Quality

This section details the high standards of care and professional behaviour within paediatrics and the medical profession as a whole.

For more information on assessment please see the assessment blueprint

Level 1 (ST1-3) Level 2 (ST4-5) Level 3 (ST6-8) Ethical personal and professional Sound ethical personal and professional **Exemplary professional conduct so as** 34 practice in providing safe clinical care practice in providing safe clinical care to act as a role model to others in providing safe clinical care Reliability and responsibility in ensuring **Continued responsibility and accessibility** Responsibility for ensuring their own 35 their accessibility to colleagues and to colleagues, patients and their families reliability and accessibility and that of patients and their families others in their team An understanding of the importance of A consistent approach to personal health, Effective skill s in ensuring their own 36 self-awareness and a responsible stress and well-being responsible approach to personal approach to personal health, stress and health, stress and well being and that

of others

Maintaining Trust. Safety and Quality

Probity

Standard 34	Level 1 (ST1-3) Ethical personal and professional practice in providing safe clinical care	Level 2 (ST4-5) Sound ethical personal and professional practice in providing safe clinical care	Level 3 (ST6-8) Exemplary professional conduct so as to act as a role model to others in providing safe clinical care
Fraii	nees will:		
	understand the limitations of their competence, in their clinical practice and in their relationships with patients and know where and when to ask for help, support and supervision	understand the limitations of their competence at their stage of training and be willing to seek help in managing sensitive and complex situations	understand the limits of their competence, particularly in stressful situations and be willing to seek help in managing sensitive and complex situations
ncies	Understand the need for honesty and know the procedures to follow where there is concern about the professional conduct of a colleague who might be putting the health of a patient at risk	act with honesty and know the procedures to follow where there is concern about the professional conduct of a colleague who might be putting the health of a patient at risk	
Competencies	demonstrate probity in personal and professional life		be open about sharing and reviewing their practice with others

be aware of the ways in which their personal experiences, values and attitudes might affect their professional practice and know when to refer to another doctor

be able to handle enquiries from the press and other media effectively

# Assessments

**Assessment Standard 34** 

# MRCPCH, MSF, MiniCeX, LEADER and ePortfolio

### 83

Pro			Assessment Standard 35
Standard 35	Level 1 (ST1-3) Reliability and responsibility in ensuring their accessibility to colleagues and patients and their families	Level 2 (ST4-5) Continued responsibility and accessibility to colleagues, patients and their families	Level 3 (ST6-8) Responsibility for ensuring their own reliability and accessibility and that of others in their team
Competencies	nees will: demonstrate a commitment to the highest standards of care and ethical and professional behaviour within their speciality and with the medical profession as a whole	recognise and support colleagues who may be under pressure	demonstrate responsibility for ensuring reliability and accessibility of both themselves and others in the team

Assessments

MSF, Portfolio

Level 1 (ST1-3)

An understanding of the importance of

approach to personal health, stress and

self-awareness and a responsible

# Maintaining Trust. Safety and Quality

### Level 2 (ST4-5) A consistent approach to personal health, stress and well-being

### **Assessment Standard 36**

Level 3 (ST6-8) Effective skill s in ensuring their own responsible approach to personal health, stress and well being and that

MSF, Portfolio

effective skills in ensuring others in their team approach their health, stress and well-being responsibly

of others

# Probity

well-being

Standard 36

Trair	ees will:	
	take responsibility for their own obligation for health and well-being, safety and welfare issues	
Competencies	show an understanding of the importance of ensuring the healthy balance between professional and domestic priorities	
Co	demonstrate a responsibility for their own health in so far as it might affect the welfare of safety of patients	

Section 3

SUB-SPECIALTY CONDITIONS

### Cardiology

### **GENERAL COMPETENCES**

	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Have the knowledge and skills to be able to assess and initiate management of babies and children presenting with cardiological disorders	✓		
Know the genetic and environmental factors in the aetiology of congenital heart disease	✓		
Be able to formulate a differential diagnosis	✓		
Be able to respond appropriately to cardiac arrest	✓		
Be able to select and interpret appropriate cardiological investigations and know the indications for echocardiography	√		
Understand the life threatening nature of some of these conditions and when to call for help	✓		
Know the possible cardiac complications of other system disorders	✓		
Know when referral for specialist paediatric cardiology assessment for further management is appropriate	✓		
Be able to provide advanced life support and lead the team at a cardiac arrest		$\checkmark$	
Be able to identify common ECG abnormalities		$\checkmark$	
Be able to identify ECG abnormalities			✓
Be able to contribute to the local provision of long term care working with specialty services and networks of cardiac services			✓
Be able to lead long term management of the child's overall health and developmental needs working effectively with the family and other professionals involved			✓

### **ACUTE PRESENTATIONS**

### Cyanosis

10515	
Know the normal fetal circulation and transitional changes after birth	
Know the anatomy of the common causes of cyanotic heart disease	
Be able to differentiate between cardiac and non-cardiac causes of cyanosis	
Recognise when treatment is urgent	
Be able to initiate emergency management	
Be able to describe clinical signs and investigations accurately and effectively with a cardiologist	

Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
$\checkmark$		
	$\checkmark$	
	$\checkmark$	

Heart Failure, including cardiac conditions which present with shock	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Understand the causes of heart failure	$\checkmark$		
Be able to initiate appropriate investigations and treatment	✓		

### Arrhy

nythmia	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Know the causes of arrhythmias	✓		
Be able to recognise common dysrhythmias on ECG	√		
Be able to initiate emergency treatment in arrhythmias such as tachycardia	√		
Be able to initiate emergency treatment in arrhythmias such as paroxysmal superventricular tachycardia		$\checkmark$	

### Infective Endocarditie

ective Endocarditis		Level 2 (ST4-5)	Level 3 (ST6-8)
Know when prophylaxis against endocarditis is indicated	√		
Know the causes of endocarditis	√		
Be able to advise parents about prophylaxis against endocarditis	√		
Be able to initiate appropriate investigations and treatment	✓		
Be able to recognise the possibility of endocarditis		$\checkmark$	

### **OUTPATIENT PRESENTATIONS**

### Hear

art murmur	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Know the causes of common heart murmurs and the haemodynamic reasons for them	$\checkmark$		
Know about the effects of heart disease at school		$\checkmark$	
Be able to interpret correctly heart sounds and added sounds	$\checkmark$		
Be able to identify an innocent cardiac murmur	$\checkmark$		
Be able to advise families appropriately about the effects of heart disease at school		$\checkmark$	

Level 1 (ST1-3)

 $\checkmark$  $\checkmark$  $\checkmark$ 

Level 2 (ST4-5)

### Hypertension

Know and understand the causes of hypertension
Be able to measure and interpret correctly blood pressure measurements at different ages
Recognise the importance of examining femoral pulses in all children

### Palpitations

lpi	pitations			Level 2 (ST4-5)
	Know the cardiac and non cardiac causes of palpitations		$\checkmark$	
	Be able to initiate appropriate investigations		$\checkmark$	

Syncope		Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
K	Know the cardiac causes of syncope	$\checkmark$		
E	Be able to initiate appropriate investigations including appropriate ECG analysis	$\checkmark$		
E	Be able to differentiate syncope from seizures		$\checkmark$	

Level 3 (ST6-8)

Level 3 (ST6-8)

### Dermatology

**General competences** 

### **GENERAL COMPETENCES**

	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Be able to describe accurately any rash	✓		
Recognise and known when to refer common birth marks and haemangiomas	$\checkmark$		
Have the knowledge and skills to be able to recognise, investigate and manage common skin complaints	✓		
Know about the cutaneous and mucosal manifestations of systemic disease	$\checkmark$		
Recognise the serious nature of some skin disorders or their associated conditions and know when to ask for	✓		
help			
Understand the principles of therapy for skin complaints	✓		
Be aware of the different potencies of topical steroids and of their side effects	✓		
Understand the impact of severe dermatological problems on children	✓		
Be aware of the common causes of hair loss and hypertrichosis	✓		
Know when consultation with other specialties is appropriate	$\checkmark$		
Know the indications for and the procedure involved in skin biopsy	✓		
Know when to consult dermatology, ophthalmology and ENT specialists	✓		
Understand the different potencies of topical steroids and of their side effects		$\checkmark$	
Know the common causes of hair loss and hypertrichosis		$\checkmark$	
Be able to contribute to the overall care of a child with skin disease and understand the difficulties of			✓
adhering to different regimes			

### ACUTE PRESENTATIONS

Skin Failure e. g toxic epidermal necrolysis, staphylococcal scalded skin syndrome and epidermolysis bullosa		
	Know the features and management of staphylococcal scalded skin syndrome	
	Be aware of the rarer causes of skin failure	
	Be aware of careful handling in blistered neonates in case of inherited skin fragility	
	Be able to assess and to start initial treatment promptly	1
	Recognise when to consult dermatology and ophthalmology specialists	

### **Skin Infections**

Know the causal bacteria, features, complications and management of cellulitis including periorbital cellulitis		
Know the features and management of infected eczema and eczema herpeticum		
Recognise and be able to treat scabies, pediculoses, and common viral and fungal skin infections		
Recognise the features of and manage infected eczema and eczema herpeticum		
Recognise when to consult ophthalmology and ENT specialists		

Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
$\checkmark$		
	$\checkmark$	

Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
✓		
$\checkmark$		
✓		
	$\checkmark$	
	$\checkmark$	

Cutaneous drug reactions	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Be aware of the different patterns of drug reaction and of the common precipitants	✓		
Be able to assess mucosal involvement	$\checkmark$		
Recognise serious drug reactions e.g. Stevens-Johnson syndrome	✓		
Know when to consult dermatology and ophthalmology specialists			$\checkmark$

### Erythematous rash and fever

Know the causes of fever and an erythematous rash	
Be aware of rare but serious causes e.g. toxic shock syndrome	
Be able to recognise Kawasaki syndrome and to institute appropriate treatment	
Be aware of complications and know when to refer, for example, to a cardiologist	
Recognise and initiate management of rare but serious causes, e.g. toxic shock syndrome	

_	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
	✓		
	✓		
	✓		
		$\checkmark$	
1		✓	

## OUTPATIENT PRESENTATIONS

Eczema and seborrheic dermatitis	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Know the principles of treating eczema	$\checkmark$		
Be able to manage mild eczema and sebhorreic dermatitis	$\checkmark$		
Be able to advise parents about these conditions including	$\checkmark$		
Be able to advise parents about common problems such as cradle cap and nappy rash	$\checkmark$		

### GENERAL COMPETENCES

	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Have the knowledge and skills to be able to assess and initiate management of patients presenting with	✓		
diabetes, growth or endocrine presentations in inpatient or outpatient settings			
Be able to measure children accurately and to assess their growth using appropriate growth charts and	$\checkmark$		
taking into account parental stature and pubertal status			
Be able to assess accurately pubertal stages of development	$\checkmark$		
Know about changes to insulin and steroid therapy in children with diabetes and hypoadrenalism during	$\checkmark$		
acute illness or perioperatively			
Understand the endocrine complications of other diseases	✓		
Have the knowledge and skills to be able to assess and initiate management of patients presenting with			✓
diabetes, growth or endocrine presentations in inpatient and outpatient settings and provide continuing care			
in association with specialists or as part of networks as appropriate			

### ACUTE PRESENTATIONS

A child presents 'well' with diabetes mellitus	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Know the pathophysiology of diabetes mellitus	$\checkmark$		
Recognise the early features of this presentation	$\checkmark$		
Know the principles of diabetes management including commonly used insulin regimens	✓		
Know about the long term complications of diabetes and about ways to reduce the risks of these occurring	$\checkmark$		
Be able to explain this condition to parents	✓		
Be able to liaise with the children's diabetes team	$\checkmark$		
Be able to give basic advice about diet and exercise	✓		
Be able to explain this condition to parents and initiate treatment			$\checkmark$

### Diabetic ketoacidosis

,		_	
	Understand the pathophysiology of diabetic ketoacidosis		
	Be aware of potential complications including cerebral oedema		
	Know how to treat and monitor progress		
	Be able to recognise the clinical features of this condition		
	Be able to lead the team when initiating resuscitation and early treatment		
	Be able to manage ongoing treatment safely with guidance		
	Recognise potential complications including cerebral oedema		
	Be able to manage ongoing treatment safely within guidelines		

Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
✓		
✓		
✓		
√		
✓		
$\checkmark$		
	$\checkmark$	
		✓

### Hypoglycaemia

oglycaemia	Level 1 (ST1-3)
Know the causes, complications and treatment in the neonatal period and beyond	✓
Know that blood glucose is an urgent investigation in patients with impaired conscious level	✓
Be aware of the clinical features which would suggest hypopituitarism or adrenal insufficiency	✓
Know when to consider rare causes of hypoglycaemia and what investigations to perform during the	
hypoglycaemic episode	
Be able to take relevant investigations required for the confirmation of cause	✓
Be able to assess whether any change to insulin treatment is needed to prevent recurrence in diabetic	✓
patients	
Recognise the need to inform the diabetes team of serious hypoglycaemia in their patients	$\checkmark$
Be able to treat hypoglycaemia safely and effectively with intravenous glucose or glucagon where	
appropriate	

Neonatal	thyroto	oxico	sis
nconatai	11191010		313

inatal thyrotoxicosis	 Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Know the cause of this condition and its natural history	$\checkmark$		
Recognise this presentation and the need for urgent treatment	$\checkmark$		

### Ambiguous genitalia

Be aware of the causes of this presentation
Understand the features of congenital adrenal hyperplasia and its early management
Recognise the extreme sensitivity of this presentation and of the need to seek urgent help from senior
colleagues with regards to management and counselling parents
Be able to give appropriate information to parents whilst awaiting help from senior colleagues

<b>OUTPATIENT PRESENTATIONS</b>
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### Abnormal rates of growth

Know the causes of short stature or slow growth and the characteristics of these conditions					
Know when short stature needs to be investigated					
Understand and know the rationale behind the baseline and subsequent investigations					
Be aware of treatments that are suitable for pathological short stature					
Know about the causes of tall stature					
Be able to explain to parents and patients the non serious causes of short stature e.g. genetic short stature,					
constitutional delay and hypothyroidism					
Recognise the need to rule out Turner's syndrome as a cause of short stature in girls					

	~		
	$\checkmark$		
	$\checkmark$		
	$\checkmark$		
	$\checkmark$		
	o   1 / (CT1 2)	o   o   2 (CT   C)	1  ovel  2  (STC  9)

Level 2 (ST4-5)

 $\checkmark$ 

 $\checkmark$ 

Level 2 (ST4-5)

 $\checkmark$ 

Level 2 (ST4-5)

Level 1 (ST1-3)

 $\checkmark$  $\checkmark$  $\checkmark$ 

Level 1 (ST1-3)

 $\checkmark$  $\checkmark$  Level 3 (ST6-8)

Level 3 (ST6-8)

Level 3 (ST6-8)

	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
te puberty	✓		
nvestigation of early and late puberty		$\checkmark$	
be pathological rather than physiological	√		

Delay	ed and early puberty
	Know the causes of early and late

Know the causes and possible inv

Recognise when the cause may b

itre and thyroid disorders		Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Know the causes of congenital and acquired hypothyroidism		$\checkmark$		
Know about the national screening programme for hypothyroidism		$\checkmark$		
Understand the need for precise treatment and monitoring during infancy and early childhood		$\checkmark$		
Know the associations of auto-immune diseases and of trisomy 21			$\checkmark$	
Be able to access thyroid status		$\checkmark$		
Be able to recognise thyrotoxicosis		$\checkmark$		
Be able to interpret thyroid function tests on and off treatment			✓	

### Polyuria and Polydipsia

lyuria and Polydipsia		Level 2 (ST4-5)	Level 3 (ST6-8)
Know the causes of this presentation including diabetes mellitus and insipidus	$\checkmark$		
Know the dangers of water deprivation		✓	
Be able to select patients who may require investigation	$\checkmark$		
Be able to advise parents about habit drinking	✓		
Be able to select patients who may require investigation and initiate this		√	

### Obesity

ity	Level 1 (ST1-3)	Level 2 (ST4-5)
Understand the causes of obesity	√	
Understand the long term complications	✓	
Understand interventional strategies that are involved in weight reduction	✓	
Be aware of the presentation of type 2 diabetes during childhood	✓	
Be aware that body mass index charts may be a helpful therapeutic tool		✓
Know about the presentation of type 2 diabetes during childhood		✓
Recognise features in the presentation which suggest serious pathology	✓	
Be able to explain the long term complications to parents	✓	
Be able to use body mass index charts to diagnose obesity		✓

Level 3 (ST6-8)

### **GENERAL COMPETENCES**

	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Have the knowledge and skills to be able to assess and initiate management of patients presenting with	$\checkmark$		
gastroenterological problems in acute and outpatient settings			
Understand the role of interventional procedures e.g. endoscopy or colonoscopy in the investigation of	√		
gastroenterological disorders			
Recognise when a surgical opinion is required	$\checkmark$		

### **ACUTE PRESENTATIONS**

Acute abdominal pain	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Know the causes of acute abdominal pain	$\checkmark$		
recognise conditions which require urgent intervention e.g. intussusception	$\checkmark$		
Recognise the need to consider acute appendicitis in very young children		$\checkmark$	
Recognise signs of pain in an infant or small child		$\checkmark$	

### Acute diarrhoea and/or vomiting

ute diarrhoea and/or vomiting		Level 1 (ST1-3)	Level 2 (ST4-5)
Know the causes of the symptoms of acute diarrhoea and/or vomiting		$\checkmark$	
Be familiar with local isolation policies		$\checkmark$	
Know about oral and intravenous fluid therapy		√	
Understand the scientific principles for oral and intravenous fluid therapy			✓
Recognise features in the presentation which suggest serious pathology e.g. haemolytic uraemic syndron	ne,	√	
appendicitis, intestinal obstruction			
Implement local isolation policies			$\checkmark$

### Jaundice

aun	lice	Level 1 (ST1-3)	Level 2 (ST4-5)
	Know the causes of neonatal and childhood jaundice	$\checkmark$	
	investigate appropriately and know when to refer to specialist services		$\checkmark$

### Upper and lower gastrointestinal bleeding

Know the causes of upper and lower gastrointestinal bleeding
Understand the potentially life threatening nature of this condition
Assess the severity of the condition
Institute appropriate emergency treatment
Recognise features in the presentation which suggest serious pathology
Be able to assess the severity of the condition, institute appropriate emergency treatment and lead
continuing care until appropriate transfer occurs

Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
✓		
√		
✓		
$\checkmark$		
	$\checkmark$	
		$\checkmark$

Level 3 (ST6-8)

Level 3 (ST6-8)

### Abdominal distension

Know the causes of abdominal distension

Initiate investigation and seek surgical opinion when required

Be	e familiar with the causes of acute liver failure		
Be	e familiar with the complications of acute liver failure		
Know the management of paracetamol poisoning			
Know the causes of acute liver failure			
Re	ecognise the need to discuss the case with the liver unit early		
Be	e able to assess the severity and complications of this condition		
Be	e able to initiate appropriate resuscitation and liaise early with the paediatric liver unit		
	e able to initiate appropriate resuscitation and liaise early with the paediatric liver unit and continue care ntil transfer occurs		

### **Congenital abnormalities**

Know the presenting features of congenital abnormalities including tracheo-oesophageal fistula, malrotation,
bowel atresias, Hirschsprungs disease, abdominal wall defects, diaphragmatic hernia
Be familiar with potential associated abnormalities
Know when antenatal transfer to a Neonatal Surgical Centre should be considered
Institute appropriate emergency treatment
Recognise the need to liaise with surgeons
Institute appropriate emergency treatment and be able to assess the fitness of the baby and the need to
transfer to a specialist centre
Recognise when the bowel might be compromised
Recognise the need to liaise with surgeons and when this is urgent

nalrotation,	$\checkmark$		
	✓		
	√		
	$\checkmark$		
	√		
eed to		$\checkmark$	
		$\checkmark$	
		1	

Level 1 (ST1-3)

√

Level 1 (ST1-3)

 $\checkmark$  $\checkmark$ ~

ro-oesophageal reflux and oesophagitis	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Know the range of presentations of gastro-oesophageal reflux and oesophagitis in otherwise well infants and	$\checkmark$		
children and also in disabled children			
Recognise the range of signs and symptoms associated with gastro-oesophageal reflux and oesophagitis	✓		
Manage mild and moderate gastro-oesophageal reflux and recognise when to refer		$\checkmark$	

### $\checkmark$ Level 2 (ST4-5) Level 3 (ST6-8)

Level 3 (ST6-8)

$\checkmark$		
	$\checkmark$	
	$\checkmark$	
		✓
Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
✓		
✓		
✓		
$\checkmark$		
$\checkmark$		
	$\checkmark$	
	$\checkmark$	
	$\checkmark$	

Level 2 (ST4-5)

 $\checkmark$ 

Gastro-oesophageal reflux and oesophagitis

Chronic or recurrent abdominal pain	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Know the possible biological, psychological and social contributing factors in chronic or recurrent abdominal	$\checkmark$		
pain			
Know which features suggest that reassurance rather than investigation is needed		✓	
Recognise features in the presentation that suggest the importance of different aetiologies	$\checkmark$		
Be able to refer appropriately to Psychology when required		✓	
Consider when there might be child protection issues		✓	
Be able to manage most cases			✓

Chronic diarrhoea and/or vomiting	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Know the causes of Chronic diarrhoea and/or vomiting	$\checkmark$		
Be aware of the characteristics of bulimia	$\checkmark$		
Be able to instigate investigations		$\checkmark$	
Be able to initiate investigations and manage most cases			✓

<b>Constipation</b>	with	or without	soiling
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Be familiar with local and national guidelines for management
Know about predisposing conditions e.g. hypothyroidism, neurodisability, psychosocial problems
Understand the relevance of predisposing conditions e.g. hypothyroidism, neurodisability, psychosocial problems
Manage simple constipation with and without soiling
Recognise when to liaise with more senior paediatricians or with specialist nurses, psychologists or psychiatrists
Be able to follow local and national guidelines for management
Recognise when to liaise with specialist paediatricians, specialist nurses, psychologists and psychiatrists

	✓		
nologists or	√		
		✓	
nd psychiatrists			$\checkmark$

Level 1 (ST1-3)

✓ ✓

Dysphagia	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Know the causes of dysphagia	✓		
Be able to distinguish between organic and functional dysphagia	✓		

### Malabsorption

Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
$\checkmark$		
$\checkmark$		
$\checkmark$		
	$\checkmark$	
		$\checkmark$

Level 2 (ST4-5)

 $\checkmark$ 

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Level 3 (ST6-8)

Know the causes of malnutrition including organic and non-organic causes	$\checkmark$
Be familiar with the consequences of malnutrition	$\checkmark$
Know the principles of enteral and parenteral nutrition support	$\checkmark$
Be able to assess nutritional status	$\checkmark$
Be able to initiate investigations to establish the diagnosis and to detect nutritional deficiencies	$\checkmark$
Be able to initiate investigations to establish the diagnosis and detect nutritional deficiencies and initiate	
management with dietetic support	

Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
$\checkmark$		
✓		
✓		
✓		
✓		
		✓

### Iron deficiency anaemia

Know the causes of iron deficiency anaemia including poor diet, bleeding and malabsorption
Understand factors which predispose to dietary iron deficiency anaemia
Be aware of the consequences of this condition
Be able to manage iron deficiency anaemia

Be able to counsel parents about preventing dietary iron deficiency

Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
$\checkmark$		
	$\checkmark$	

### Genetics and Dysmorphology

### **GENERAL COMPETENCES**

	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Understand the scientific basis of chromosomal disorders and inheritance	√		
Be able to construct a family tree and interpret patterns of inheritance	√		
Understand the basis of molecular genetics	√		
Know about the features of some common chromosome disorders	✓		
Know the basis of prenatal screening and diagnosis, the conditions for which they are used and the ethical dilemmas they pose.	$\checkmark$		
Be able to describe the features of a baby or child associated with common malformation or deformation syndromes	✓		
Have an awareness of the use and non directive nature of genetic counselling	✓		
Understand the risks of and cultural issues posed by consanguinity	✓		
Have an understanding of the ethical dilemmas and the implications of pre-symptomatic or carrier testing in children	$\checkmark$		
Have experience of how geneticists work with fetal medicine specialists, neonatologists and paediatric surgeons	$\checkmark$		
Be able to recognise features suggesting dysmorphic or genetic syndromes and to identify associated anomalies	$\checkmark$		
Know the processes involved in establishing and presenting the diagnosis to parents	✓		
Have experience of interviews where diagnoses of serious conditions are communicated to parents	✓		
Know what to do when the diagnosis of Down's syndrome is suspected at delivery or on the postnatal wards	✓		
Be aware of environmental factors which may affect pre-natal development, e.g. alcohol and drugs	✓		
Recognise the features of common chromosome disorders		✓	
Be able to recognise and investigate common malformation or deformation syndromes and to identify associated anomalies		✓	
Begin to participate in establishing and presenting the diagnosis to parents		✓	
Be able to give appropriate information to parents while awaiting help from senior colleagues		✓	
Be able to respond appropriately when the diagnosis of Down's syndrome is suspected at delivery or on the post-natal wards		✓	
Be able to follow local and national protocols for the management of genetic disorders		✓	
Take the lead in establishing and presenting the diagnosis to parents			√
Be able to give appropriate information to parents while awaiting investigations and opinions from colleagues			✓
Be able to respond appropriately when the diagnosis of Down's syndrome is suspected at delivery or on the postnatal wards and take responsibility for breaking the news to parents			~
Be able to plan transitional care and referral of the young person to clinical genetics service at an appropriate time			✓

### Haematology and Oncology

### **GENERAL COMPETENCES**

	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Have the knowledge and skills to be able to assess patients presenting with haematological or oncological	$\checkmark$		
presentations in inpatient and outpatient settings			
Be able to initiate management in common presentations of non-malignant disorders	$\checkmark$		
Be aware of the role of specialist nurses and other members of palliative care teams	$\checkmark$		
	$\checkmark$		
Be aware of the short and long term side effects of chemotherapy and radiotherapy	✓		
Be familiar with the indications and complications of bone marrow transplantation	$\checkmark$		
8 Know about national and local blood transfusion policies and procedures	$\checkmark$		
Have the knowledge and skills to be able to assess and initiate investigation of patients presenting with		✓	
Have the knowledge and skills to be able to assess and initiate investigation of patients presenting with haematological or oncological presentations in inpatient and outpatient settings			
<ul> <li>Work effectively with specialist nurses and members of palliative care teams</li> </ul>		$\checkmark$	
Know the short and long term side effects of chemotherapy and radiotherapy and be able to explain the		$\checkmark$	
common ones			
Know about local policies for intrathecal cytotoxic therapy		$\checkmark$	

### **ACUTE AND OUTPATIENT PRESENTATIONS**

### Anaemia

naemia	Level 1 (ST1-3)
Know and understand the causes of anaemia	$\checkmark$
Understand the investigations which may clarify the diagnosis	$\checkmark$
Know how to counsel parents about hereditary anaemias	$\checkmark$
Understand the predisposing factors and consequences of iron deficiency anaemia	$\checkmark$
Understand the hereditary basis and clinical features of sickle cell anaemia and the thalassaemias	$\checkmark$
Understand the long term implications for families	$\checkmark$
Know about the potential consequences of haemolytic anaemia	$\checkmark$
Be able to manage iron deficiency anaemia	$\checkmark$
Be able to explain screening for the thalassaemia or sickle cell trait	$\checkmark$
Be able to recognise and initiate management of sickle cell crisis	$\checkmark$
Be able to investigate anaemia and recognise serious underlying pathology	
Be able to manage sickle cell crisis, including safe administration of fluid and analgesia	

### Polycythaemia

Know the causes and treatment of polycythaemia in the newborn period	
Understand why children with cyanotic congenital heart disease are vulnerable to polycythaemia	
Be able to describe the process of partial plasma exchange transfusion in a new born infant	
Be able to undertake partial plasma exchange transfusion in a new born infant	

Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
$\checkmark$		
$\checkmark$		
$\checkmark$		
✓		
$\checkmark$		
$\checkmark$		
✓		
$\checkmark$		
$\checkmark$		
$\checkmark$		
	$\checkmark$	
	$\checkmark$	

Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
$\checkmark$		
$\checkmark$		
√		
	$\checkmark$	

### Neutropaenia

Understand the significance of fever in a neutropaenic patient	
Understand the differing risks of neutropaenia in different conditions and treatment regimens	
Be able to manage febrile neutropaenia with guidance	
Be able to manage febrile neutropaenia, following local network guidelines and recognising when to liaise	ć
with specialist services	

	Level 1 (ST1-3)		
Purpura and bruising		Level 2 (ST4-5)	Level 3 (S
Know the causes of purpura and bruising	$\checkmark$		
Recognise features in the presentation which suggest serious pathology or child abuse	$\checkmark$		
Understand immune mechanisms in vasculitis and in allo- and auto- immune thrombocytopaenia		$\checkmark$	
Be able to explain Henoch-Schonlein purpura to parents	$\checkmark$		
Know how to explain idiopathic thrombocytopaenic purpura to parents	$\checkmark$		
Be able to explain idiopathic thrombocytopaenia (ITP) to parents including when precautions and treatment		$\checkmark$	
are necessary			
Be able to manage acute bleeding in haemophilia and Von Willibrands disease		$\checkmark$	
Use genetic counselling services appropriately		$\checkmark$	
Be able to explain Henoch-Schonlein purpura to parents and manage patients			✓
Be able to explain idiopathic thrombocytopaenia (ITP) to parents including when precautions and treatment			✓
are necessary and manage continuing care			

Oth	er haemorrhage due to coagulopathy	Le
	Know the causes and presentations of haemorrhagic disease of the newborn	
	Understand the hereditary basis of haemophilia and other coagulation disorders	
	Be able to discuss the need for prophylactic vitamin K with parents	
	Be able to recognise and treat haemoarthrosis in a patient with haemophilia	
	Be able to recognise and treat haemoarthrosis in a patient with haemophilia and be aware of the need to	
	treat urgently, with appropriate advice	

Leuka	emia

Be aware of the different types of leukaemia and of their prognoses	
Recognise and understand the clinical manifestations of leukaemia	
Know the different types of leukaemia and of their prognoses	
Be able to recognise the immediate dangers of leukaemia to the newly presenting child	
Be aware of national trials and protocols	
Be able to recognise and initiate investigations to diagnose leukaemia	
Be able to follow local and national protocols in treating leukaemia and associate infections	

Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
✓		
	$\checkmark$	
✓		
	$\checkmark$	

-	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
	$\checkmark$		
	✓		
		$\checkmark$	
	$\checkmark$		
	✓		
		$\checkmark$	
	-	✓	
		$\checkmark$	
			$\checkmark$
			$\checkmark$

Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
✓		
$\checkmark$		
$\checkmark$		
$\checkmark$		
	✓	

Le	evel 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
	$\checkmark$		
	$\checkmark$		
		$\checkmark$	
	$\checkmark$		
	$\checkmark$		
		$\checkmark$	
		$\checkmark$	

Be able to recognise the presenting features of these tumours

Other solid tumours

Lymphomas		Level 2 (ST4-5)	Level 3 (ST6-8)
Know the clinical features of Hodgkin's disease and non-Hodgkin's lymphoma	√		
Know the features which suggest lymphadenopathy may be malignant and how it may be investigated		$\checkmark$	
Be aware of staging and protocols for treatment	$\checkmark$		

er solid tumours		3) Level 2 (ST4-5)	Level 3 (ST6-8)
Know about the clinical presentation, treatment and prognosis of nephroblastoma and neuroblastoma	$\checkmark$		
Be aware of the clinical features and investigation findings of other solid tumours	$\checkmark$		
Be aware of staging and protocols for treatment	✓		
Be able to recognise the presenting features of these tumours	✓		

ansfusion		Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Understand the risks of administering blood products			$\checkmark$	
Know the indications for irradiated blood products			$\checkmark$	
Recognise the concerns of some groups in society in relation to blood products			$\checkmark$	
Follow transfusion procedures correctly			$\checkmark$	
Explain the risks and benefits			$\checkmark$	
Order blood products			$\checkmark$	
Appropriately manage transfusion reaction			$\checkmark$	
Respond to objections to transfusion appropriately				✓

### Royal College of Paediatrics and Child Health

### Infection, Immunology and Allergy

	GENERAL COMPETENCES	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
	Have the knowledge and skills to be able to assess and initiate management of patients	✓		
	Know and understand host defence mechanisms and their pattern of development	✓		
	Know the causes of vulnerability to infection	✓		
	Know and understand the classification of infectious agents	✓		
	Know the mechanisms of maternal to fetal transmission of infection and the clinical manifestations of these infections	$\checkmark$		
	Know the epidemiology, pathology and natural history of common infections of the foetus, newborn, and	✓		
	children in Britain and important worldwide infections, e.g. TB, HIV, hepatitis, B, malaria, Polio			
	Be able to follow agreed local and national guidelines on notification of infectious diseases	$\checkmark$		
ces	Understand the rationale for prescribing common antimicrobials	$\checkmark$		
General competences	Know the indications for antimicrobial prophylaxis	$\checkmark$		
mpe	Understand the mechanisms of drug resistance	$\checkmark$		
Ō	Understand nosocomial infections and the basic principles of infection control	$\checkmark$		
Jera	Be aware of the policies for notifying communicable diseases	✓		
Ger	Understand the pathophysiology and the principles of treatment of allergic and autoimmune disorders	$\checkmark$		
	Understand the classification of immunodeficiencies	✓		
	Know the clinical manifestations of the different types of immunodeficiencies	✓		
	Know the conditions and treatments which results in secondary immunodeficiencies	✓		
	Recognise indications for and be able to prescribe appropriate first line common anti-microbials		✓	
	Be able to prescribe antimicrobial prophylaxis appropriately		✓	
	Apply principles of infection control		$\checkmark$	
	Take responsibility for notifying communicable diseases		$\checkmark$	
	Be able to use the antibiotic policies and understand the development of resistant organisms		✓	
	Be able to assess and institute appropriate management of infection in an immuno-compromised child		$\checkmark$	

### **ACUTE PRESENTATIONS**

### Septic shock

Understand the pathophysiology of septic shock and its complications		
Know local and nationally agreed guidelines for the management of septic shock including meningococcal		
disease		
Be aware of the differential diagnosis of septic shock		
Be able to recognise the early features of septic shock		
Be able to lead the team when initiating resuscitation and treatment		
Be able to liaise with anaesthetic and PICU staff		
Be able to initiate and lead immediate management of early and advanced features of septic shock		
Be able to liaise effectively with anaesthetic and PICU staff and manage patient until transfer team takes over		

Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)			
✓					
✓					
✓					
✓					
✓					
✓					
	$\checkmark$				
	✓				

Fever of unknown origin	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Know the possible causes of fever of unknown origin	√		
Understand aspects of social history that are relevant to explore		$\checkmark$	
Recognise features in the presentation which suggest serious or unusual pathology	$\checkmark$		
be able to initiate investigations to establish cause		$\checkmark$	

### Anaphylaxis

Know the management of anaphylaxis guidelines
Be able to lead the team when initiating resuscitation and treatment
Be able to liaise with anaesthetic and PICU staff
Be able to lead the team to provide advanced life support
Be able to advise on the future risk of anaphylaxis and facilitate an appropriate anaphylaxis management
plan by liaising with community teams

Level 1 (ST1-3)	Level 2 (S14-5)	Level 3 (S16-8)
$\checkmark$		
	$\checkmark$	
$\checkmark$		
	$\checkmark$	

Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
✓		
✓		
✓		
	✓	
	√	

### **OUTPATIENT PRESENTATIONS**

### **Recurrent infections**

-		
	Understand why children suffer recurrent infections	
	Be aware of conditions which predispose to infection	
	Understand why children suffer recurrent infections and know which conditions predispose to infection	
	Recognise features in the presentation which suggest serious underlying pathology	
	Recognise and investigate appropriately features in the presentation which suggest underlying pathology	

Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
✓		
✓		
	✓	
✓		
	√	

### Food intolerance and other allergies

### Immunisation

Understand passive and active immunisation
Understand the principles and the rationale behind the national immunisation policy for children in Britain
Know the indications, contraindications and complications of routine childhood immunisations
Be able to advise parents about immunisations

Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
✓		
✓		
$\checkmark$		
	$\checkmark$	
		$\checkmark$

Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
$\checkmark$		
✓		
✓		
✓		

### Metabolic Medicine

### **GENERAL COMPETENCES**

		Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
	Recognise the clinical and biochemical features of electrolyte and acid base disturbances	$\checkmark$		
-	Know the common clinical presentations of metabolic disease including encephalopathy, neurodevelopmental	$\checkmark$		
	regression, muscle weakness, visceromegaly and failure to thrive			
	Know when it is appropriate to perform metabolic investigations in neonates and children	√		
	Know the appropriate screening investigations that should be performed when a metabolic disorder is	✓		
	suspected			
	Know further investigations that should be performed in order to establish a diagnosis of a metabolic disorder	✓ ✓		
	Be able to interpret commonly used investigations and understand how these differentiate between metabolic disorders including those that result in cot death	v		
	Know about the common biochemical findings in an acutely ill newborn or child presenting with metabolic disease including hypoglycaemia, hyperammonaemia or metabolic acidosis	~		
General competences	Understand when it is appropriate to investigate, and which investigations to perform, in a neonate or child with visceromegaly	✓		
ete	Know the causes of metabolic bone disease and investigations to differentiate between the causes	✓		
a D	Know when it is appropriate to consider porphyria in a child presenting with abdominal pain	✓		
8	Understand the principles of dietary, vitamin and pharmacological treatment of metabolic disorders	✓		
eral	Be aware of those metabolic disorders which are vitamin responsive or responsive to pharmacological	$\checkmark$		
ene	treatment			
G	Know about the metabolic disorders which may respond to enzyme therapy or bone marrow transplantation	✓		
	Know the routine screening tests for metabolic disease and be able to explain them to parents	✓		
	Know the inheritance patterns of common genetically determined metabolic disorders	✓		
	Know about the educational and social implications of metabolic disorders and the importance of organising	$\checkmark$		
	support in the community for special diets and other risks			
	Recognise and be able to manage the clinical and biochemical features of electrolyte and acid base disturbances		$\checkmark$	
	Know the common clinical presentations and principles of management of metabolic disease including encephalopathy, neurodevelopmental regression, muscle weakness, visceromegaly and faltering growth		~	
	Be able to initiate metabolic investigations in neonates and children and in urgent situations		✓	
-	Know what samples must be taken in metabolic investigations at the time of presentation and the importance		✓	
	of liaison with laboratories to ensure use of the appropriate container, handling and storage			
	Know which metabolic disorders are associated with learning difficulties and manage timely referral for those at risk		✓	
	Be able to lead / contribute to the overall care of the child, liaising with specialty services, the dietician and other services as necessary			~

### Musculo-Skeletal medicine

GENERAL COMPETENCES	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
know the differential diagnosis of musculoskeletal presentations including inflammatory, non-inflammatory	✓		
and idiopathic causes			
Take an appropriate history, musculoskeletal examination and assessment	✓		
Recognise when to request the opinion of paediatric rheumatologists or orthopaedic surgeons	$\checkmark$		
Recognise features in the clinical presentation or investigation findings which suggest serious pathology, e.g.	√		
inflammation, malignancy, infection and vasculitis			
Recognise features in the clinical presentation or investigation findings which suggest physical abuse,	✓		
emotional abuse and neglect			
Understand the role of the multi-disciplinary team and other professionals involved in the care of children	✓		
with musculoskeletal conditions			
Be aware of the complications of immunosuppressive treatment	✓		
Understand the disease associations of rheumatological conditions, in particular juvenile arthritis and eye	✓		
disease			
Understand the association of musculoskeletal presentations and common chronic diseases (such as psoriasis,	✓		
inflammatory bowel disease)			
Understand the initial investigations to establish a diagnosis	✓		
Understand the indication for and complications of immunosuppressive treatment		✓	
Be aware of congenital bone, inherited or metabolic conditions and their musculoskeletal presentations		✓	
Interpret investigations that are helpful in establishing a differential diagnosis		✓	
Know and recognise the presentations of both chronic fatigue syndrome generalised idiopathic pain			✓
syndromes and complex regional pain syndromes and be aware of their musculoskeletal presentations			

### **ACUTE PRESENTATIONS**

### Joint swelling

Know the causes of joint swelling at single and multiple sites
Know when to refer for a specialist opinion
Be able to identify joint swelling and abnormal range of joint movement on clinical examination
Be able to perform a musculoskeletal assessment including a screening examination and an approach to more
detailed examination

### Musculoskeletal pain

Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
$\checkmark$		
√		
✓		
	✓	

Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
✓		
✓		
✓		
	$\checkmark$	
✓		
	✓	

Royal College of Paediatrics and Child Health

el 1 (ST1-3)	Level 2 (ST4-5) ✓ ✓ Level 2 (ST4-5)	✓ Level 3 (ST6-8)
✓ ✓ ✓	✓ ✓ ✓	Level 3 (ST6-8)
✓ ✓ ✓	✓ ✓ ✓	
✓ ✓ ✓	×	
✓	×	
	×	
el 1 (ST1-3)	×	
el 1 (ST1-3)	✓ Level 2 (ST4-5)	
el 1 (ST1-3)	Level 2 (ST4-5)	
1		Level 3 (ST6-8)
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el 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
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el 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
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	✓ ✓ el 1 (ST1-3) ✓	✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓

### **GENERAL COMPETENCES**

		Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
	Be able to examine the newborn baby appropriately and with sensitivity	$\checkmark$		
	Be able to perform an accurate assessment of the baby at birth	$\checkmark$		
	Have the knowledge and skills to be able to assess and initiate management of babies presenting in the	✓		
	neonatal period with problems (in acute, postnatal ward and outpatient settings)			
	Be able to initiate appropriate resuscitation when required	$\checkmark$		
	Know and understand the effects of antenatal and perinatal events on outcome	$\checkmark$		
	Know and understand the pathophysiology of the effects of prematurity	$\checkmark$		
	Be able to recognise and outline the management of some common disorders	$\checkmark$		
	Be able to initiate diagnostic tests for common disorders	$\checkmark$		
	Understand the principles of mechanical ventilation and resuscitation	✓		
	Be able to perform a reliable assessment of fluid status and initiate appropriate fluid management	✓		
	Understand the principles of parenteral nutrition	✓		
	Understand the principles and important of nutrition in the neonatal period	✓		
	Have experience of basic practical procedures and tests and be able to understand the results	$\checkmark$		
General competences	Understand the principles of prescribing for newborn babies and breastfeeding mothers	✓		
ten	Understand the life-threatening nature of some of these situations and when to call for help or look for	$\checkmark$		
edu	personal support			
mo	Know when and how babies are transferred for specialist levels of intensive care	$\checkmark$		
al c	Understand the implications for families of babies with neonatal problems	$\checkmark$		
ner	Begin to develop strategies to communicate sympathetically with parents	$\checkmark$		
Ge	Understand the long-term sequelae of prematurity and begin to recognise those at risk	$\checkmark$		
	Know about the retinopathy of prematurity and its prevention and treatment	$\checkmark$		
	Be able to recognise and manage common disorders		$\checkmark$	
	Have the knowledge and skills to be able to assess and manage babies presenting in the neonatal period with		✓	
	problems (in acute, postnatal ward and outpatient settings)			
	Know and be able to describe the effects of antenatal and perinatal events on outcome		$\checkmark$	
	Know and be able to describe the pathophysiology of the effects of prematurity		$\checkmark$	
	Be able to initiate diagnostic tests for common disorders and to interpret and explain results to parents		$\checkmark$	
	Understand the principles of and initiate mechanical ventilation and resuscitation		$\checkmark$	
	Be able to perform a reliable assessment of fluid status and adjust fluid management		$\checkmark$	
	Understand the principles of parenteral nutrition and be able to prescribe safely		✓	
	Be skilled in practising and be able to teach basic practical procedures		$\checkmark$	
	Be able to prescribe safely for newborn babies and breastfeeding mothers		✓	
	Recognise the life-threatening nature of some of these situations and the need to call for help or look for		$\checkmark$	
	personal support			

Understand the implications for families of babies with neonatal problems and begin to support them	✓	
Be able to develop strategies to communicate sympathetically with parents and have experience of	✓	
strategies for dealing with their distress or anger		
Be able to describe the long-term sequelae of prematurity and recognise those at risk	✓	
Be able to initiate and lead advanced resuscitation when required	✓	
Have successfully completed a neonatal life support course	✓	
Usually be able to obtain appropriate arterial and venous access	✓	
Understand the principles and importance of nutrition in the neonatal period including assessment of nutritional status, the steps needed to establish breast feeding, and nutritional supplementation	√	
Be able to apply clinical reasoning when selecting tests and be able to understand the results sufficiently well to be able to explain them to parents and members of the multi-disciplinary team	√	
Be able to decide on appropriate referrals for transfer to other units, communicate effectively with all involved and maintain care as safely as possible until transfer team takes over	√	
Know how to interpret radiological investigations including the basic features of cranial ultrasound and discuss basic findings with parents	√	
Know how to refer appropriately to community services before discharge and begin to participate in the follow up of those at risk	√	
Know about follow-up programmes for those at risk	✓	
Be able to describe the ethical issues relating to neonatal intensive care	✓	
Understand the principles of mechanical ventilation and be able to initiate and maintain ventilatory support		✓
Recognise the life-threatening nature of some of these situations, be able to lead the management and recognise when additional support is needed		✓
Know and follow legal and ethical guidelines and be able to discuss ethical issues with the family and multi- disciplinary team		✓

### Birth depression

	Know the causes and possible outcomes			
	Understand the principles of resuscitation			
	Know the criteria necessary before perinatal asphyxia can be diagnosed			
Ī	Understand the physiological effects of a hypoxic-ischaemic insult			
Ī	Know the statistics of the outcomes of birth depression			
Ī	Understand the physiology of resuscitation and the responses to it			
Ī	Understand the long term implications of hypoxic-ischaemic damage			
Ī	Be able to initiate resuscitation using bag and mask ventilation and cardiac compressions			
	Can intubate term babies and have had supervised experience of intubating preterm babies			
	Recognise features which suggest significant consequences			
Ī	Be able to provide and lead basic and advanced resuscitation, including intubation			
Ī	Be able to intubate pre-term babies without direct supervision			
	Be able to recognise and initiate management to prevent secondary damage			

Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
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	$\checkmark$	

ratory Distress (acute and chronic)	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Understand the common causes of respiratory distress	$\checkmark$		
Know the relevant investigations, understand the principles and complications of ventilation	√		
Know the guidelines for surfactant therapy	$\checkmark$		
Understand the pathophysiology and management of chronic lung disease	√		
Understand the contribution of patent ductus arteriosus to respiratory compromise	$\checkmark$		
Understand the principles and complications of differing ventilation techniques		$\checkmark$	
Be aware of the indications for ECMO and nitric oxide therapies		$\checkmark$	
Know the images needed and safe positions for arterial and venous lines		$\checkmark$	
Have seen echocardiography where patent ductus arteriosus is diagnosed		$\checkmark$	
Be able to interpret chest radiographs	$\checkmark$		
Be able to administer surfactant	√		
Be able to initiate respiratory support	$\checkmark$		
Be able to suspect and diagnose pneumothorax	$\checkmark$		
Recognise when to request help from a medical or nursing colleague	$\checkmark$		
Obtain, interpret and act appropriately on blood gas results	$\checkmark$		
Be able to insert umbilical arterial and venous lines	✓		
Be able to identify signs suggestive of patency of the duct and describe management options	$\checkmark$		
Be able to interpret chest radiographs and act on results		$\checkmark$	
Be able to identify signs of patent ductus arteriosus and initiate management		$\checkmark$	
Be able to initiate and continue to manage respiratory support on a ventilator		$\checkmark$	
Be able to diagnose pneumothorax and known when chest drainage is indicated		$\checkmark$	
Recognise when response to management is not optimal and request help from senior colleagues or other services		√	
Know the steps that need to be taken to discharge a baby on long term oxygen into the community		✓	
Be able to teach and supervise the insertion of umbilical, arterial and venous lines		✓	

# Cyanosis not of respiratory origin

Understand the anatomy and implications of cyanotic congenital heart disease			
Understand the pathophysiology of persistent pulmonary hypertension and know about treatment			
Be able to suspect the diagnosis and initiate appropriate investigations			
Be able to make a likely diagnosis and initiate appropriate investigations and treatment			

#### Hypotension

Understand the causes and effects			
Understand the rationale for different treatment options			
Be able to interpret and act on blood pressure measurements			

✓		
	$\checkmark$	
Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
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$\checkmark$		

Level 2 (ST4-5)

Level 1 (ST1-3)

✓ ✓

 $\checkmark$ 

Level 3 (ST6-8)

Intra-uterine growth restriction and other nutrition problems	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Understand the importance of breastfeeding	√		
Know the causes of intra-uterine and postnatal growth failure	✓		
Understand the principles of parenteral nutrition	✓		
Know about risk factors for necrotising enterocolitis	✓		
Understand the importance of nutrition in sick babies		$\checkmark$	
Know about the signs, symptoms and complications of necrotising enterocolitis		$\checkmark$	
Be able to keep and interpret accurate growth records	✓		
Be able to prescribe appropriate nutrition supplements	√		
Be able to insert a percutaneous long line	✓		
Be able to recognise early signs of necrotising enterocolitis and initiate treatment	✓		
Be able to assess appropriate position of percutaneous long line from imaging		$\checkmark$	
Be able to recognise and begin to address poor growth		$\checkmark$	
Fluid and blood product therapy	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Know the fluid requirements of preterm and sick babies	√		
Know the causes of abnormal coagulation	✓		
Know the indications for therapy with blood products	✓		
Know the fluid requirements of pre-term, sick and growth-restricted babies		✓	
Know when irradiated blood products are indicated		✓	
Be able to assess fluid balance	✓		
Recognise the need for blood product transfusions	✓		
Be able to test for and recognise bleeding disorders	✓		
Be able to act to correct fluid balance abnormalities		✓	
Be able to prescribe blood product transfusions		✓	
Be able to initiate treatment for bleeding disorders		✓	
neonatal seizures or abnormal neurological status including the floppy baby	Level 1 (ST1-3) ✓	Level 2 (ST4-5)	Level 3 (ST6-8)
Understand the aetiology and prognosis of abnormal neurological status	✓ ✓		
Know about periventricular haemorrhage and leucomalacia	✓ ✓		
Know about the management of post-haemorrhagic hydrocephalus	v	✓	
Know the possible causes and effects of seizures		V	
Know the possible causes of abnormal tone	✓	•	
Be able to perform a neurological assessment	✓ ✓		
Be able to recognise the basic features of cranial ultrasound scans	✓ ✓		
Be able to recognise and initiate management of seizures	v	✓	
Have had some experience of performing cranial ultra-sound		✓ ✓	
Be able to make a likely diagnosis and initiate management of seizures		✓ ✓	
Have experience of how bad news is communicated to parents		v	

serious congenital abnormalities
Understand the underlying pathology
Understand the use of antenatal diagnosis and the role of fetal medicine
Be aware of surgical interventions
Understand the impact on parents of the birth of a baby with serious congenital abnormalities or potential disabilities and the ensuing grief due to loss of the expected normal child
Understand the role of fetal medicine and interventions that are available
Be able to recognise serious abnormalities
Be able to initiate appropriate tests
Be able to respond to parents' immediate questions
Be able to diagnose common syndromes
Be able to refer appropriately to parent support groups and to community services before discharge
Be able to break bad news to parents

Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
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✓		
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		✓

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# S**epsis**

21	5		
	Know the likely pathogens		
	Understand the important of timely treatment		
	Know about nosocomial infection		
	Understand the importance of timely treatment, know the range of treatments and the likely pathogens		
	Recognise early signs of sepsis and initiate therapy appropriately		
	Practise effective infection control		
	Anticipate early signs of sepsis and initiate appropriate anti-microbial therapy and supportive management		

Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
$\checkmark$		
✓		
√		
	✓	
√		
√		
	✓	

|--|

Understand the ethical principles involved		
Know about terminal care and bereavement counselling		
Understand the ethical principles in withdrawing or withholding care from an infant		
Be able to communicate sympathetically with parents		
Begin to develop strategies to deal with personal stress and know when to look for support		
Be able to communicate sympathetically with staff		
Be able to deal with personal stress and know when to look for support		
Be able to communicate sympathetically with parents and staff		
Be able to lead management of withdrawal of withholding care from an infant		

 Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
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#### POSTNATAL WARD AND OUTPATIENT PRESENTATIONS

ndice	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Understand the investigations that will differentiate between the causes of conjugated and unconjugated	✓		
hyperbilirubinaemia			
Know the appropriate management	✓		
Know how an exchange transfusion is performed	✓		
Know the investigations that will diagnose the causes of conjugated and unconjugated hyperbilirubinaemia		√	
Know how and when to undertake an exchange transfusion		√	
Be able to diagnose haemolytic jaundice	✓		
Be able to prescribe phototherapy appropriately	✓		
Recognise features which suggest serious pathology	✓		
Be able to manage haemolytic jaundice		√	
Anticipate the need for an exchange transfusion appropriately		$\checkmark$	
Be able to undertake a full exchange transfusion without supervision		✓	
Be able to investigate and manage prolonged neonatal jaundice appropriately		✓	
Be able to undertake a full exchange transfusion under supervision or refer in a timely manner if unable to			✓
do so			

ding	
Understand the importance of breastfeeding	
know the causes of feeding problems	
Know the local policies on feeding	
Be able to support and advise breastfeeding mothers	
Be able to identify underlying pathology or failure to thrive	
Be able to make appropriate recommendations to address feeding problems and faltering growth (failure to	
thrive)	

Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
$\checkmark$		
✓		
	✓	
$\checkmark$		
$\checkmark$		
	✓	

## Infants of diabetic mothers

Understand the physiology	]	
Know the likely complications		
Know when admission to a neonatal unit is indicated		
Be able to interpret blood glucose estimations		
Be able to initiate appropriate management		
Be able to anticipate problems early and manage appropriately		

Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
$\checkmark$		
✓		
	$\checkmark$	
✓		
$\checkmark$		
	$\checkmark$	

# minor congenital abnormalities

Know the common diagnoses and the likely prognosis of minor congenital abnormalities	$\checkmark$	
Know about common presentations of congenital cardiac disease	✓	
Know about common presentations of congenital cardiac disease and which need urgent action		
Be able to advise parents appropriately	$\checkmark$	
Recognise when referral to an appropriate specialist is needed	✓	
Be able to ensure that referral to an appropriate specialist or service occurs		

#### Disordered development

Know the causes and natural history of conditions causing disordered development	
Understand current theories about the pathophysiology of cerebral palsy	
Understand the common complications of cerebral palsy and disordered development and how to access expert assessment and management	
Understand current theories about retinopathy of prematurity and sensori-neural hearing loss and how	
these conditions may be prevented	
Be able to perform a developmental assessment	
Be aware of the need for involvement of the multidisciplinary team	
Understand the impact of developmental delay on families	
Be able to perform a neurological assessment	
Be able to make a timely and appropriate referral to the multidisciplinary team	
Have seen examples of the effect of developmental difficulties on families	

Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
✓		
✓		
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	✓	

_	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
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#### Screening

eening		
Know the range of screening tests used including the newborn examination		
Know about the universal Newborn Hearing Screening Programme		
Understand the difference between a screening and a diagnostic test		
Understand the investigations that will follow		
Know about developmental dysplasia of the hip		
Know about retinopathy and cataract screening		
Know the management of developmental dysplasia of the hip		
Be able to explain the implications of a screening test to parents		
Order such tests appropriately		
Be able to perform a newborn examination effectively (including heart, pulses, hips, palate and eyes for red reflex)		
Be able to perform clinical screening tests		
Be able to explain the difference between a screening test and a diagnostic test to parents		
Be able to explain false positive and positive tests to parents and respond to their concerns		

_	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
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	✓		
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# Nephro-urology

lephro-urology			
GENERAL COMPETENCES	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Have the knowledge and skills to be able to assess and initiate management of patients presenting with nephro-urology problems in acute and outpatient settings	√		
Be able to perform a reliable and accurate assessment of fluid status and initiate appropriate fluid management	√		
Have the knowledge and understanding of fluid and electrolyte imbalance and blood pressure in children with kidney problems	√		
Understand the principles of prescribing in children with renal disease	$\checkmark$		
Recognise features in the presentation which suggest serious or significant pathology	✓		
Understand the role of different renal imaging techniques including ultrasound, static and dynamic isotope scans in the investigation of urinary tract disorders	√		
Understand the role of different renal imaging techniques including ultrasound, static and dynamic isotope scans in the investigation of urinary tract disorders and recognise common abnormalities		~	
Be able to interpret blood bio-chemistry in relation to age and body size			✓
ephrotic syndrome	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Understand the complications of the nephrotic state	✓ ✓		
Understand the principles of the pharmacological, dietary and fluid management	✓		
Understand the investigations including the indication for renal biopsy	✓		
Be able to advise parents on the complications of steroid therapy	✓		
Assess features in the presentation which suggest serious or significant pathology		✓	
Be able to advise parents on long term management and complications of treatment		✓	
ute nephritis	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Know the aetiology, pathophysiology and immunological basis of glomerulonephritides and vasculitides	$\checkmark$		
Understand the investigations that will differentiate between the causes	$\checkmark$		
Be aware of the range of immunosuppressive therapies that may be used in these conditions	✓		
Know the features that are prognostically significant		✓	
Know the range of immunosuppressive therapies that may be used in these conditions		✓	
Recognise features in the presentation that may suggest serious or unusual pathology			✓
ute renal failure	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Know the causes of acute renal failure	✓ ×		,
Understand the investigations that may differentiate between these causes	✓		
Know the features of haemolytic uraemic syndrome	✓		
	/		

 $\checkmark$ 

 $\checkmark$ 

 $\checkmark$ 

Understand the methods to correct fluid and biochemical abnormalities seen in renal failure

Know the indications for dialysis

Be able to assess and initiate management of life-threatening events e.g. hyperkalaemia

Hypertension	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Know the techniques of blood pressure measurement	$\checkmark$		
Know the causes of hypertension and the principles of treatment	$\checkmark$		
Be able to interpret blood pressure measurements	✓		
Be able to identify complications		$\checkmark$	
Be able to initiate management under supervision		$\checkmark$	
Be able to liaise with specialists effectively		$\checkmark$	
Acute scrotal pain	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Know the differential diagnosis of this symptom	✓		
Be able to recognise the important causes of acute scrotal pain	✓		
Be able to identify children who require urgent surgical referral	✓		
Neonate with history of abnormal antenatal ultrasound of the renal tract	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Understand the causes and management of antenatal hydronephrosis	✓		
Know about the causes of echogenic or cystic kidneys	✓		
Know about the inheritance patterns of renal abnormalities detected in fetal life	✓		
Be able to recognise when to refer to a nephrologist or urologist	✓		
Be able to give basic explanation of the problem, management and prognosis to parents ante- or post-natally		$\checkmark$	
Stones	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Know the causes of stone formation	✓		
Be able to recognise presenting features		$\checkmark$	
Be able to initiate management under supervision		$\checkmark$	
			·

# **OUTPATIENT PRESENTATIONS**

ng disorders including enuresis, dysuria, frequency and polyuria	Level 1 (ST1-3)
Know both the physical and psychological causes of voiding disorders	$\checkmark$
Understand the principles of investigation of urinary tract infection and management of vesico-ureteric reflux	✓
Understand the principles of managing enuresis	✓
Be aware of the association of genito-urinary symptoms with child sexual abuse	
Be able to take a detailed voiding history	$\checkmark$
Be able to interpret common urine microscopic and culture findings	$\checkmark$
Be able to identify relevant neurological problems	
Be able to investigate and manage within guidelines	
Be able to investigate and provide long term management within guidelines	

Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
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✓		
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	✓	
	$\checkmark$	
		$\checkmark$

#### Haematuria and proteinuria

Know the causes of these signs	
Understand the investigations that will differentiate between the causes	
Know the indications for renal biopsy	
Recognise features in the presentation which suggest serious or unusual pathology	

 Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
√		
√		
√		
		$\checkmark$

Level 1 (ST1-3)

#### Urogenital abnormalities

Know when surgical referral is required for circumcision, impalpable testes, hypospadias or suspected urinary tract obstruction Be able to examine the genitalia appropriately and with sensitivity

Recognise inflammatory or traumatic lesions

v		
✓		
	✓	
100011(ST12)	1  ovel  2  (ST4  5)	100012 (ST6 8)

Level 2 (ST4-5)

Level 3 (ST6-8)

# Chronic renal failure

onic renai tallure	Level 1 (ST1-3)	Level 2 (S14-5)	Level 3 (S16-8)
Know the causes and natural history of conditions causing chronic renal failure	✓		
Understand the pathophysiology of bone disease, anaemia and growth failure	✓		
Know about dialysis and transplantation	√		
Appreciate the impact of chronic renal failure in childhood and later adult life	√		
Identify growth and nutritional problems and use dietetic support effectively		$\checkmark$	

#### Tubular disorders

Know the range of presentations suggestive of an underlying renal tubular disorder
Know about the inheritance patterns of different tubular disorders
Be able to recognise and interpret electrolyte abnormalities in blood and urine

_	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
	$\checkmark$		
	✓		
			$\checkmark$

Neurology and	l Neurodisability	
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managed at school		
Have had experience of working in special schools	$\checkmark$	
Be aware of the role of the Designated Medical Officer to the Local Education Authority	$\checkmark$	
Be aware of the statutory requirement to notify children who may have special educational needs to the LEA	$\checkmark$	
and know how to do so		
Be able to write SEN medical reports on simple cases	$\checkmark$	
Have experience of the local Special Educational Needs (SEN) panel	√	
Have experience of SEN annual reviews and transition planning	√	
Be able to distinguish simple developmental delay from developmental disorders and to manage simple cases	√	
Be able to recognise and come to a likely diagnosis of common developmental disorders such as cerebral	✓	
palsy, dyspraxia, ADHD, specific learning difficulties and arrange timely and appropriate specialist assessment		
Know how equipment can be used to lessen the effects of disability and how to refer	✓	
Know about and be prepared to find out about self-help and support groups for children and their families	✓	
with conditions in their specialist area and be aware of the requirement to tell parents about these groups		
Be able to write reports on medical or developmental conditions for parents and non-clinical staff in	✓	
education and elsewhere that are easily understood by the lay person, and that explain the implications of the		
condition and how it may impact on the child and his or her carers in non clinical settings		
Know about what benefits may be payable to the disabled child and/or carers and how they may be accessed	√	
Know about local respite facilities and how they may be accessed	✓	
Be able to work effectively with education services		✓
Be able to distinguish simple developmental delay from developmental disorders and be aware of the cases		✓
which require specific or multi-disciplinary input and refer appropriately		
Know about and be prepared to find out about self help and support groups for children and their families		√
with conditions in their specialist area and be able to direct parents to appropriate groups		
Recognise features of life-threatening neurological disorders including raised intercranial pressure, CNS		✓
tumours and initiate the appropriate clinical response with apposite urgency		
Make appropriate use of neurodiagnostic tools, seeking expert advice appropriately about proceeding with		✓
testing or not, including in the emergency setting, and about interpretation of results		
Be able to prescribe and monitor therapy for the breadth of neurological and developmental disorders,		✓
recognising the limits of their own expertise, showing awareness of guidelines and seeking expert advice		
appropriately		
Be able to manage straightforward cases of common neurological and developmental disorders, recognising		✓
the limits of own expertise, showing awareness of guidelines and seeking advice appropriately		
Be able to contribute to or lead local care, working within networks or teams when appropriate		✓
Obtain equipment appropriately to maximise participation for individual children		✓
Access support and help with benefits advice, support and self help groups, respite and short breaks		✓
appropriately on behalf of individual children and their families		

Seizures	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Know the common causes of seizures in newborn babies and children	✓		
Be aware of common epileptic syndromes	✓		
Understand the principles of initial and continuing anticonvulsant therapy in babies and children	✓		
Begin to understand the links between epilepsy and behaviour problems	✓		
Understand the place and principles of the EEG and neuro-imaging in investigation	✓		
Know about the long term implications of epilepsy	✓		
Know about common epileptic syndromes		✓	
Understand the links between epilepsy and behaviour problems		✓	
Know about the long term implications of epilepsy, including different epilepsy syndromes and the risk of		✓	
learning difficulties, accident or sudden death			
Be able to initiate treatment for acute continuing seizures	$\checkmark$		
Be able to form a differential diagnosis	✓		
Work effectively with the multidisciplinary team	$\checkmark$		
Be able to refer to intensive care teams appropriately and maintain patient safety until that team takes over		✓	
Be able to decide initial and continuing anticonvulsant therapy in babies and children		$\checkmark$	
Be able to advise parents about education and safety		$\checkmark$	
Work effectively with the multidisciplinary team and lead the care maintaining patient safety until that team			✓
takes over			
Faints and 'funny turns'	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Be able to form a differential diagnosis for faints and 'funny turns'	$\checkmark$		
Understand the investigations that may differentiate between these causes	$\checkmark$		
Be able to initiate the investigations that may differentiate between these causes		$\checkmark$	
Be able to make a likely diagnosis	$\checkmark$		
Be able to explain likely diagnoses to parents	$\checkmark$		
Acute focal neurological signs	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Understand the implications of acute focal neurological signs	$\checkmark$		
Understand the principles of investigation	✓		
Be able to demonstrate the signs	$\checkmark$		
Begin to gain experience of interpretation of CT and MRI scans	$\checkmark$		
Have experience of how diagnoses are given to parents	$\checkmark$		
Be able to interpret the signs		✓	
Have experience of interpretation of CT and MRI scans		✓	
Be able to initiate consultation to give diagnoses to parents		✓	
Be able to give diagnoses to parents, and be able to share difficult information effectively and compassionately			✓

Curriculum fo	r Paediatric Traini	ng General Paediatrics
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Ataxia, clumsiness and abnormal movement patterns	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Know the common possible causes of ataxia, clumsiness and abnormal movement patterns	✓		
Know the indications for investigations	✓		
Be able to recognise the signs	$\checkmark$		
Recognise which urgent investigations are needed	√		
Hypotonia, neuropathies and myopathies	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Know the common possible causes of hypotonia, neuropathies and myopathies	✓		
Know about the relevant neurophysiological and metabolic investigations	✓		
Be able to demonstrate the signs	✓		
Be able to form a likely differential diagnosis	✓		
Be able to elicit and interpret the signs		✓	
Be able to initiate appropriate tests		$\checkmark$	
Be able to initiate and interpret appropriate tests, seeking expert advice as appropriate			$\checkmark$
Meningism and altered consciousness	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Know the likely causes or pathogens of meningism and altered consciousness	✓		
Understand the principles of treatment	✓		
Know about prophylactic therapy for contacts of meningitis	✓		
Know when it is safe to perform a lumbar puncture	✓		
Be aware that organic brain conditions can lead to psychotic symptoms	✓		
Know the principles of establishing brain stem death	✓		
Recognise early signs of meningitis and encephalitis	✓		
Use a validated coma score	✓		
Recognise signs and implications of raised intra-cranial pressure	✓		
Initiate therapy appropriately	✓		
Call for help promptly	✓		
Recognise the need for urgent referral to audiology specialists after bacterial meningitis	✓		
Assess and manage early presentations of meningitis and encephalitis		$\checkmark$	
Ensure prophylactic therapy for contacts of meningitis		$\checkmark$	
Assess and initiate management of raised intra-cranial pressure		$\checkmark$	
Know about the presentation of partially treated and tuberculous meningitis and atypical presentations in			√
immuno-deficient states			
Know about the long-term sequelae of meningsitis and how they might be managed			✓
Be able to decide which children should be followed up to monitor their progress after meningitis			✓

Curriculum for Paediatric Training General Paediatrics			
Neural tube defects and other congenital abnormalities	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Know about antenatal diagnosis of neural tube defects and other congenital abnormalities	✓		
Know about the ethical principles involved in management decisions	$\checkmark$		
Know about antenatal diagnosis of neural tube defects, other congenital abnormalities and their prevention		✓	
Be able to recognise syndromes	$\checkmark$		
Be able to communicate sympathetically with parents	$\checkmark$		
Be able to recognise the signs and symptoms of blocked shunts		✓	
Understand the multi-disciplinary management needed in this condition, including orthopaedic, urinary and			✓
bowel management, learning difficulties and the social implications of these conditions			
Be able to recognise the signs and symptoms of acute and chronic blocked shunts			✓
Frauma to central and peripheral nervous systems	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Be aware of the implications of severe head injury and the possibilities for rehabilitation	✓		
Know about other neurological trauma such as brachial plexus injury	✓		
Be aware of acute management and need to transfer appropriately	✓		
Recognise the place of occupational and physiotherapy	✓		
Be able to lead initial acute management and transfer appropriately		✓	
Work effectively with the multidisciplinary team to manage the medium and longer term applications and		✓	
rehabilitation			
Fever or illness in a child with complex disabilities	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)

Be aware of range of diagnostic possibilities, including chest infection, aspiration, gastro-oesophageal reflux, oesophagitis, constipation, hip and joint problems, dental problems etc
Know when and where to get help
Be able to assess child with complex disabilities who is unwell
Be able to recognise important indicators of specific conditions

#### COMMUNITY AND OUTPATIENT PRESENTATIONS

#### Neuro-developmental regression

Be familiar with the main investigations that will differentiate between the causes of neuro-developmental
regression and how to access further expert help
Understand the implications
Be able to assess development
Be able to recognise regression of developmental skills and refer appropriately for investigation

Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
✓		
✓		
✓		
	$\checkmark$	

 $\checkmark$ 

 $\checkmark$ 

✓ ✓

# Disordered development

Understand the common causes of disability, disordered development, and learning difficulties
Know about the current theories on the pathophysiology of cerebral palsy
Know about common secondary disabilities
Understand the complications of cerebral palsy and disordered development
Know about common secondary disabilities and co-morbidities
Be aware of the work of the child development team or centre
Have experience of working with the child development team or centre
Recognise common causes of disordered development, manage simple problems and refer complex
difficulties appropriately for specialist investigation and assessment
Recognise common causes of disordered development, manage problems appropriate to the skills and
services locally

Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
✓		
$\checkmark$		
✓		
✓		
	✓	
✓		
	✓	
	✓	
		$\checkmark$

eech and language delay including hearing loss	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Know the common causes	✓		
Be aware of the support available for hearing impaired children	✓		
Be aware of the importance of hearing assessment in children	✓		
Know about multi disciplinary investigation and therapy for those with more complex disorders		✓	
Know the risk factors for sensineural hearing impairment		✓	
Know the principles of hearing testing at all ages		✓	
Know the support available for hearing impaired children		✓	
Know how to communicate with a hearing impaired child or language disordered child including the child with		✓	
autism			
Understand the importance of hearing assessment in children with speech and language problems and		✓	
autistic spectrum disorders			
Recognise when referral to a specialist is needed	$\checkmark$		
Recognise the need for referral to audiology specialists or to an ENT surgeon	✓		
Be able to distinguish simple phonological delay from more significant disorders		✓	
Be able to recognise abnormal speech and language patterns		✓	
Recognise the need for referral to audiology specialists or to an ENT surgeon		✓	
Recognise autistic features in disordered developmental assessments and know how to refer appropriately		$\checkmark$	
iductive hearing loss	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Know the common causes	✓		
Be aware of the principles of hearing tests at various ages	✓		
Know the principles of hearing testing at various ages and of management of hearing impairment		✓	
Begin to have experience of hearing tests at various ages	✓		
Be able to recognise when further assessment is required and how to assess it		✓	

Curriculum for Paediatric Training General Paediatrics			
Sensorineural hearing loss	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Know about the common causes	✓		
Be able to recognise when further assessment is required and how to access it, including investigations that		✓	
may be appropriate			
Be aware of the principles of management, including cochlear implantation and educational approaches to		✓	
sensorineural hearing loss			
Experience how to communicate with a child with sensorineural hearing loss	✓		
Be able to recognise syndromes and situations where sensorineural hearing loss is likely to occur		✓	
Be aware of the assessment of sensorineural hearing loss		$\checkmark$	
Be able to communicate with the child with sensorineural hearing loss		$\checkmark$	
Weakness	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Know the possible causes	✓		
Know the possible causes of weakness and patterns of presentation		✓	
Be able to take a relevant history		✓	
Be able to elicit and interpret appropriate signs		✓	
Abnormal head size and shape	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Be aware of the common causes of hydrocephalus, macrocephaly and microcephaly	$\checkmark$		
Know how to recognise abnormal head shapes and to differentiate between serious and non serious causes		✓	
Know the common causes of hydrocephalus, macrocephaly and microcephaly		✓	
Be able to plot and interpret a head growth chart		✓	
Be ale to reach a likely diagnosis and initiate investigations for abnormal head growth		✓	
Know about the insertion and ongoing management of ventricular-peritoneal shunts		✓	
Headache	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Be aware of the possible biological, psychological and social factors that can contribute to headache	$\checkmark$		
Know the possible biological, psychological and social factors that can contribute to headache		✓	
Be able to recognise when headache may indicate serious illness	✓		
Be able to recognise when headache may indicate serious illness and arrange prompt investigations		✓	
Be able to initiate appropriate investigations and treatment		✓	
Be able to recognise and manage common causes of recurrent headache including non-organic causes,			✓
tension headache and migraine			
Be able to recognise when headache may indicate serious illness and arrange prompt investigations, interpret			✓
results arrange ongoing treatment and management approrpriately			
Be able to initiate appropriate investigations and treatment and manage ongoing cases			$\checkmark$

Problems of language, vision and hearing	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Be aware of the principles of testing	$\checkmark$		
Know about the principles of testing		✓	
Understand the common causes of sensory impairment, the various tests available and when they are appropriate		$\checkmark$	
Recognise when to refer for further assessment	$\checkmark$		
Be able to identify infants and children at risk of language, hearing or visual impairment		✓	
Be able to recognise when sensory impairment may contribute to developmental difficulties and to refer appropriately for further assessment		$\checkmark$	
Specific learning difficulties	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Be aware how specific learning difficulties present at school	✓		
Understand how specific learning difficulties present at school		✓	
Recognise when to refer for further assessment	✓		
Be able to identify when specific learning difficulties might be present and how to refer appropriately for self- assessment		✓	

# Curriculum for Paediatric Training General Paediatrics **Ophthalmology**

#### Sinthannology

GENERAL COMPETENCES	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Be able to examine the eye and recognise those abnormalities which require urgent referral or treatment	✓		
Be able to take a relevant history for a child with suspected visual impairment			
Be able to use an ophthalmoscope to recognise an abnormal fundus and lens opacity			
Know the principles of visual acuity testing at various ages	✓		
Be able to test for colour vision	✓		
Understand the microbiology and treatments for common eye infections including orbital cellulitis	✓		
Know about the eye manifestations of common genetic and systemic diseases	✓		
Recognise and interpret abnormal eye movements	✓		
Know about support at school and other resources for children with visual impairments	✓		
Be able to undertake visual acuity testing at various ages		$\checkmark$	
Patient presenting with a red eye	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Know the common causes of red eye	✓ ×		
Be able to identify children who need referral	✓		
Be able to initiate investigations and manage appropriately	✓		
Patient presenting with a possible squint	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Know the causes of acute onset and the congenital causes of a squint	$\checkmark$		
Be able to recognise abnormal alignment of the eyes and examine corneal reflexes	√		
Know how to refer appropriately	-	✓	
Ptosis	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Know about the congenital and acquired causes of ptosis	$\checkmark$	( /	
Know about the Tensilon test	√		
Know how to undertake the Tensilon test		✓	
Proptosis	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Know the common causes of proptosis	✓		
Be able to initiate appropriate investigations	✓		
Be able to examines for signs of relevant systemic disease	~		
Abnormal movement	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Know the ocular and neurological causes of benign abnormal eye movements	↓		
Know about the implications of nystagmus and refer appropriately for further visual assessment			✓
Be able to interpret clinical findings correctly	✓		
Be able to undertake a full neurological examination where appropriate	~		

# Abnormal fundus

Know the normal appearance of the retina	$\checkmark$
Know the value of fundal examination in suspected child abuse cases and certain developmental syndromes	
Be able to identify papilloedema, abnormal vessels and pigmentation	$\checkmark$
Be able to identify haemorrhage	√

	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
	~		
		$\checkmark$	
	~		
	$\checkmark$		

# Visual impairment

Know the common and preventable causes of visual impairment
Know about the investigations that might be used to find a cause
Know about the specific developmental patterns that occur in the child with visual impairment
Know about educational approaches to the child with visual impairment
Be able to recognise congenital cataract and refer urgently for further management
Have experience of assessment of the child with suspected visual impairment

 Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
	$\checkmark$	
	$\checkmark$	
	✓	
	✓	
	✓	
	✓	

GENERAL COMPETENCES	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Be familiar with local and national guidelines on withdrawing and withholding treatment	✓		
Be familiar with guidelines on the management of sudden infant death	$\checkmark$		
Be aware of legal and ethical issues relating to withdrawing life support	$\checkmark$		
Recognise factors which determine when care of a patient becomes palliative	$\checkmark$		
Know when the importance of seeking advice when treatment may not be in the best interests of a child	$\checkmark$		
Know about appropriate therapeutic intervention in symptom control	$\checkmark$		
Be aware of the ethical issues in therapeutic intervention in children with life-limiting conditions	$\checkmark$		
Know about local opportunities for respite care, including hospice availability	√		
Know the tests for brain stem death	√		
Recognise loss and grief and their effects on the health and well-being of children, families and professionals	$\checkmark$		
Be aware of local bereavement support services	$\checkmark$		
Recognise the skills and experience of other professionals, acknowledge personal needs for support and the	$\checkmark$		
needs of other professionals involved in the care of the dying child for support networks			
Understand the need for respect of the wishes of the child or your person particularly when these are	$\checkmark$		
different from those of the family and health professionals			
Know about guidelines on the management of sudden infant death, including the RCPCH Kennedy report		✓	
Know about the broad definition of palliative care in childhood		✓	
Recognise factors which determine when care of a patient becomes palliative		$\checkmark$	
Be able to lead the management of acute presentations of sudden unexpected deaths in infancy and			$\checkmark$
childhood and be able to put local procedures into action			

# Respiratory Medicine with Ear, Nose and Throat

GENERAL COMPETENCES	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Have the knowledge and skills to be able to assess and initiate management of patients presenting with		$\checkmark$	
respiratory problems in acute and outpatient settings			
Have the knowledge and understanding of factors relating to long term management of chronic respiratory		$\checkmark$	
problems			
Understand the life threatening nature of some of these conditions and when to call for help		$\checkmark$	
Recognise factors which suggest underlying or serious pathology		$\checkmark$	

#### **ACUTE PRESENTATIONS**

Sore throat and/or mouth		Level 2 (ST4-5)	Level 3 (ST6-8)
Know the causes of these complaints	✓		
Know appropriate therapies	✓		
Be able to manage these conditions		$\checkmark$	
Recognise features in the presentation which suggest serious pathology		$\checkmark$	

## Nose bleeds

ose bleeds		Level 2 (ST4-5)	Level 3 (ST6-8)
Know the common causes of nose bleeds	√		
Recognise those with underlying pathology		√	

#### Snoring and obstructive sleep apnoea

Know the causes of snoring	
Be aware of complications of this presentation	
Understand the indications for sleep studies	
Recognise when referral to an ENT surgeon is appropriate	
Be able to refer appropriately to an ENT surgeon	

#### Earache

Know the common causes and complications
Know the risk factors for otitis media with effusion
Understand the vulnerability of children with cleft palate
Recognise an abnormal ear drum
Recognise when to treat with antibiotics
Recognise when to refer to audiology specialists or an ENT surgeon
Be able to manage this condition
Be able to treat with antibiotics where appropriate

	$\checkmark$	
Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
✓		
✓		
✓		
✓		
✓		
✓		
	✓	
	$\checkmark$	

Level 2 (ST4-5)

Level 1 (ST1-3)

 $\checkmark$  $\checkmark$  $\checkmark$  $\checkmark$  Level 3 (ST6-8)

# Acute strido

ute stridor	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Understand the potentially life-threatening nature of this condition	✓		
Know about allergic and infective causes e.g. epiglottis, laryngotracheitis, retropharyngeal abscess, and foreign body	~		
Recognise when to request help from a senior colleague	√		
Recognise children with existing chronic upper airway problems	√		
Be able to manage this condition		$\checkmark$	

#### Acute severe asthma

Be familiar with the British Thoracic Society guidelines for management
Be able to assess the severity of an asthma attack
Be able to institute appropriate emergency treatment
Recognise when more senior help is needed
Be able to lead treatment of severe asthma and review ongoing treatment before discharge

Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
$\checkmark$		
✓		
✓		
$\checkmark$		
	$\checkmark$	

Lower respiratory tract infection (including pneumonia and bronchiolitis)	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Be familiar with the causes of respiratory tract infections	✓		
Know appropriate therapies	√		
Be familiar with indicators of severity	√		
Know the causes of respiratory tract infections		✓	
Know indicators of severity		✓	
Be able to initiate appropriate therapies	$\checkmark$		
Be able to recognise patients requiring intensive care	$\checkmark$		
Be able to recognise complications e.g. empyema	√		
Be able to manage these infections		√	
Be able to recognise complications e.g. empyema and manage appropriately		✓	

Respiratory failure	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Know the indications for ventilation		$\checkmark$	
Be aware of the agreed resuscitation plans for individual patients		$\checkmark$	
Initiate urgent assessment and treatment including assisted ventilation		$\checkmark$	
Liaise with more senior paediatricians, anaesthetists and intensivists when appropriate		✓	

#### **OUTPATIENT PRESENTATIONS**

Cervical lymphadenopathy		Level 2 (ST4-5)	Level 3 (ST6-8)
Know the causes of cervical lymphadenopathy	✓		
Recognise when investigation and surgical intervention is needed	$\checkmark$		

#### Chronic stridor

Know the causes of chronic stridor	
Recognise when and how to investigate	

#### Asthma

Be familiar with the British Thoracic Society guidelines for management of asthma
Know about the patterns of asthma and contributing factors
Know about the complications of long-term use of medications for asthma
Institute age-appropriate individualised management plan for asthma
Teach children how to use a peak flow meter and diary
Teach and assess inhaler technique
Be able to modify an asthma management plan appropriately
Be aware of what needs to be done to ensure the child has access to emergency treatment at school and
other settings

	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
	✓		
	$\checkmark$		
	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
	$\checkmark$		
		$\checkmark$	
1		$\checkmark$	

Level 2 (ST4-5)

Level 1 (ST1-3)

#### Recurrent or chronic chestiness

Know the respiratory and non-respiratory causes, including chronic aspiration, of recurrent or chronic chestiness	✓		
Know about predisposing conditions such as neuromuscular and skeletal disorders	✓		
Know about predisposing conditions such as neuromuscular and skeletal disorders and immunodeficiency		✓	
Be aware of the role of bronchoscopy, pH studies and video-fluoroscopy	✓		
Know about the role of bronchoscopy, pH studies and video-fluoroscopy		✓	
Recognise features in the presentation which suggest serious or unusual pathology e.g. atypical presentations		✓	
of cystic fibrosis			
Know how to perform and interpret basic lung function tests		✓	
tic fibrosis	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Know and understand the pathophysiology and natural history of cystic fibrosis	✓		
Understand the principles of treatment	✓		
Understand the diagnostic tests available		$\checkmark$	
Work with a multi-disciplinary team, particularly physiotherapy and dieticians	✓		
		•	

Level 3 (ST6-8)

# **ACUTE PRESENTATIONS**

ACOTE PRESENTATIONS			
Physical Injury	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Know how to assess in relation to history, developmental stage and ability		$\checkmark$	
Know appropriate investigations when child abuse is a possibility e.g. skeletal survey when appropriate		$\checkmark$	
Be aware of the impossibility of dating bruising		$\checkmark$	
Be able to initiate appropriate investigations		✓	
Be able to recognise new and old fractures on an X-ray		✓	
Be able to initiate a multi-disciplinary investigation with a more experienced colleague		✓	
Head Injury	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Know about acute and chronic presentations of subdural haemorrhage		$\checkmark$	
Know that his may cause symptoms mistaken as having a metabolic or infective cause in an infant		✓	
Know the appropriate investigations and involvement of other disciplines e.g. ophthalmology, radiology		✓	
Know that retinal haemorrhages may be difficult to detect		✓	
Know that, when there is suspicion of non-accidental head injury, an ophthalmologist should be involved		✓	
Be able to perform fundoscopy and recognise retinal haemorrhage		✓	
Be able to initiate emergency management and urgent investigations		✓	
Be able to co-operate in multi-disciplinary and multi-agency working		$\checkmark$	
Vaginal or Rectal Bleeding	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Know that sexual abuse forms part of the differential diagnosis		✓	
Know when an expert genital examination is needed and the role of colposcopy as part of that		✓	
Know about the risk of acquired sexually transmitted infections		✓	
Be able to refer to a colleague experienced in examination for sexual abuse		$\checkmark$	
Self -harm	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Recognise this as an expression of distress, acute or long-term		✓	
Recognise repeated self-harm as indicating serious emotional distress		✓	
Be able to refer to the CAMHS team		✓	
Apnoeic episodes as an infant	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Be aware of this as a possible presentation of imposed airway obstruction and know the indicators that this		$\checkmark$	
maybe the case			
Understand the life-threatening nature of imposed airway obstruction		$\checkmark$	
Refer promptly to an experienced colleague for help		$\checkmark$	

#### Curriculum for Paediatric Training General Paediatrics OUTPATIENT PRESENTATIONS

of the Atlent The Sent Atlens			
Faltering growth	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Be aware of the high incidence of a non-organic cause		✓	
Be able to instigate appropriate investigations		√	
Be able to institute multi-agency involvement with the help of an experienced colleague		✓	
Soiling/Wetting	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Know that this can be a presentation of emotional abuse or neglect sometimes in association with other		✓	
forms of abuse, including sexual abuse			
Know the other physical, psychological or maturational problems leading to soiling and wetting		✓	
Be able, with appropriate history and observations, to elucidate factors within the child's life that may be causing these problems		✓	
Vaginal Discharge	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Know that this may be a presentation of sexual abuse		✓	
Know when an expert genital examination is needed and the role of colposcopy as part of that		✓	
Know about the many other causes of vaginal discharge		✓	
Know when to consult with a senior colleague experienced in sexual abuse when there is any question of this		✓	
Be able to manage common causes of vulvitis and vaginal discharge			✓
Behavioural Change	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Know the association of this with abuse, including emotional abuse, neglect and sexual abuse		✓	
Be able to take a history to elucidate social and emotional factors that maybe involved		✓	
Be able to seek the help of a senior colleague		✓	
Know about behavioural change due to progressive CNS disease			✓
Repeated or bizarre physical symptoms	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Know the possible signs of factitious and induced illness		✓	
Know how to recognise the over-anxious parent		✓	
Know the pathways to gather medical, educational and social information on the child		✓	
Be able to refer to a senior experiences colleague		$\checkmark$	

# Curriculum for Paediatric Training General Paediatrics **Patient Safety**

Patient safety is embedded throughout the competency framework and included within assessments. Patient safety is an inherent part of the role of the paediatrician in ensuring the health and well-being of children, their parents, families and cares, to themselves and the healthcare team around them. Patient safety can be found more explicitly under the sections on; safeguarding, procedures, prescribing, carrying out audits and standard setting as well as probity.

#### **Medical Leadership Framework**

The Medical Leadership Framework is embedded throughout the competency framework and its associated assessment system. The assessment strategy allows for the elements of Medical Leadership Framework to be assessed by using the existing tools. Whilst many of the competences can be found under the assessment standards 29-33, competences can be found within other assessment standard. The mapping document is available on the college website. The Medical Leadership Framework can be addressed within many learning opportunities e.g. involvement in rota management, involvement in departmental inductions, guideline development, audits that lead to implementation and the evaluation of change, supervision and supporting of colleagues, attending and contributing to meetings.

SECTION 4 ASSESSMENTS

#### **About Assessments**

Reassuring the individual, the profession and the public, as well as employers and regulatory bodies that a trainee is fit to practise.

The educational purposes for the assessment system are:

To support learning and progression across the curriculum and To assess the level of competence achieved at different stages in that progression

The content of the assessment system grew from the curriculum and the learning objectives it set out. These can be generic, specialty-specific and/or specific to sub-specialties. For example all trainees will be expected to engage their patients effectively in consultations, whilst paediatric trainees have a particular responsibility to be able to work effectively in triadic consultations. The assessment system therefore consists of a range of instruments designed to support learning and assessment in these different areas of work in paediatrics, which, in turn were mapped to Good Medical Practice and then the GMC domains.

The table of categories of assessments developed by the AoMRC, PMETB and MMC (developing and maintaining an assessment system – A PMETB guide to good practice January 2007 Appendix 3 p.42) proved useful in informing the thinking about the initial development of a range of standards and instruments derived from and reflecting the different areas of content in the curriculum.

The introduction of workplace based assessments in 2007 following the selection of assessment methods to meet the blueprint devised in 2005 provided a structured support system for paediatric trainees. Although well established in training, workplace based assessments (WPBAs) are often perceived as lacking real value by trainees and trainers alike. Their role is often characterised as time-intensive tick box exercises. Evaluation of over 14000 WBAs undertaken in paediatric training in 2010 confirmed that WPBAs are non-discriminatory in terms of performance. The minimum numbers possible were undertaken by most trainees and they tended to cluster in the month or so before ARCP documentation was due. The RCPCH Assessment Methodology Working Group (AMWG) was set up in April 2011 to review and report on practice and function of WPBAs offered by the College and make recommendations for development where applicable. The working group took into account the GMC advisory document "Learning and Assessing in the Clinical Environment" (http://www.gmc-uk.org/Learning and assessment in the clinical environment.pdf 45877621.pdf).

The outcome of the review proposed that the majority of WPBA's should be undertaken as Supervised Learning Events (SLE). These are largely formative in nature, where judgements about performance will lead to constructive feedback. Trainees and educational supervisors will be expected to actively address learning outcomes identified and actions taken as a result should be recorded in the ePortfolio.

Of the current tools, only DOPS would be used as a summative Assessment of Performance (AoP). Trainees are expected to have a single DOPS for each of a list of obligatory procedures. In order that trainees are able to demonstrate on-going competence in these procedures, the ePortfolio skills log is to be used to allow for logging of procedures carried out.

The assessment system should be used to reassure the trainee and provide the trainee with feedback about their own knowledge, skills and attitudes and the opportunity to show progression and development through their training programme. In order to achieve this, all areas of the training curriculum need to be sampled and assessed in the most appropriate ways, according to the nature of the knowledge or skill being assessed. The purpose of the individual assessment instruments within the system will therefore vary.
Royal College of Paediatrics and Child Health

# **Table of Assessments August 2015**

	LEVEL 1			LEVEL 2		LEVEL 3		
	ST1	ST2	(ST3)	ST4	(ST5)	ST6	ST7	(ST8)
Supervised Learning Events (SLE) – Aim for 20 SLEs per training year (FTE); MINIMUM MANDATORY requirements are as follows:								
Mini CEX & CbD Including:	Minimum 12 /year Ratio of mini CEX to CbD 2:1			Minimum 12/year Ratio of mini CEX to CbD 1:1		Minimum 12 /year Ratio of mini CEX to CbD 1:2		
ACAT (CEX/CbD)	Optional			1* Optional				
HAT (CEX)	1			1*	1*	Optional		
LEADER (CbD)	Optional			1*	1*	1*	1*	1*
Safeguarding CbD	1	1	1	1	1	1	1	1
DOC	Optional			5*		5*		
Assessment of Performance (AoP)								
DOPS	A minimum of 1 satisfactory AoP for the compulsory procedures**			1 satisfactory AoP for the compulsory procedures outstanding**		A minimum of 1 satisfactory AoP for the compulsory procedures within the relevant sub-specialty curriculum**		
Paed CCF				1***		1***		
ePaed MSF	1	1	(1)	1	(1)	1	1	(1)
Other assessments that contribute to ARCP								
START						1		
MRCPCH Examinations								
MRCPCH CBT exams	1-2 CBT exams (desirable)	2 out of 3 CBT exams (essential)	All CBT exams (essential)					
MRCPCH Clinical Exam			Essential					
Trainers Report (inc. ePortfolio)	1	1	(1)	1	(1)	1	1	(1)

# See notes below for asterisked items

# SUPERVISED LEARNING EVENTS (SLE)

- The purpose of SLEs is as a means of engaging in formative learning; therefore a trainee who presents evidence of SLEs that cover only a restricted area of the curriculum runs the risk of being judged as having poor strategic learning skills. All trainees are therefore advised to plan how they will demonstrate coverage of their relevant curriculum in partnership with their Educational Supervisor.
- Trainees should aim for 20 SLEs per training year (20 per year for full time, pro-rata for LTFT trainees).
- The ratios given for the balance of mini CEX to CbD assessments are for guidance only and the exact ratio should not be used as a criterion for determining satisfactory progression.
- Trainees are also encouraged to undertake the assessments indicated as optional.
- The numbers of SLEs given for ACAT, HAT, LEADER and Safeguarding CbD are minimum requirements; senior trainees in particular should bear in mind that each of the SLEs is designed for formative assessment of different aspects of the curriculum and more than this minimum number of some types of SLE might be required, depending upon the specific requirements and clinical context of a subspecialty. Trainees are therefore advised to consult their relevant subspecialty CSAC curriculum, in case there are additional specified assessment requirements.
- At least one of each of those SLEs marked with a single asterisk\* must be assessed by a senior supervisory clinician (e.g. Consultant or senior SASG/Specialty Doctor) – i.e. ACAT and HAT during level 2 training, LEADER during level 2 and level 3 training and at least one of the five DOC during level 2 and level 3 training.

# ASSESSMENT OF PERFORMANCE (AoP)

- The compulsory procedural skills are listed on the RCPCH website: <u>http://www.rcpch.ac.uk/training-examinations-professional-development/quality-training/work-based-assessments-asset/assess-0</u>
- The ePortfolio skills log\*\* should be used to demonstrate development and continued competence.

# ADDITIONAL REQUIREMENTS

- Trainees must also complete accredited neonatal and paediatric life support training during Level 1 training.
- Trainees must achieve the level 1 and 2 Intercollegiate Safeguarding Competences by the end of ST3, the majority of Level 3 competences by the end of ST5 and all Level 3 competences along with the additional paediatrician competences by the end of ST8.
- The Paed CCF\*\*\* can be used as an additional tool if required.

- i) MRCPCH examination
  - The MRCPCH consists of 3 computer based testing (CBT) examinations and a clinical examination. Completion of all parts will be essential for the award of MRCPCH and profession in training beyond Level 1
  - The MRCPCH CBT examination has 3 parts
    - Foundation of Practice
    - o Theory and Science
    - Applied Knowledge and Practice
  - Foundation of practice focuses on the knowledge, understanding and clinical decision making ability of trainee with 6 months paediatric experience. The format of the exam has extended matching questions, best of five and multiple true/false questions.
  - Theory and Science has an emphasis on the basic scientific physiological and pharmacological principles upon which clinical practice is based. The format of the exam has extended matching questions, best of five and multiple true/false questions.
  - Applied and Knowledge and Practice consists of 2 exams that assess the knowledge, understanding, clinical decision making and principles of evidence based practice in all areas of paediatrics and child health. Both exams consist of extended matching questions, best of five and n from many.
  - MRCPCH Clinical Examination is a 10 stations circuit that includes a history taking station, 2 communication stations, 6 clinical examination stations and 1 video station. This clinical examination aims to assess the trainee's skills and ability in:
    - History taking and management planning
    - o Clinical examination and detection of the presence of physical signs
    - o Diagnosis and prioritisation of problems
    - o Emergency management
    - o Child development
    - o Communication with child and parent in consultations
    - o Clinical practice in an ethical framework
- ii) Supervised Learning Events
  - a. MiniCex (Mini Clinical Evaluation Exercise)

The instrument initially developed for use in Foundation was modified to map to paediatric assessment standards. This instrument enables us to assess trainees in real patient encounters

b. CbD (Case Based Discussion)

The instrument initially developed for use in Foundation was modified to map to paediatric assessment standards. This instrument is particularly valuable for the assessment it offers to a trainee's clinical reasoning skills and the ability to bring an analytical approach to diagnosis and management of paediatric conditions.

c. ACAT (Acute Care Assessment Tool)

This tool has been used in adult medical care settings, and the tool has been adapted for paediatric use. Professional competence depends on the integration of multiple skills in a complex and challenging environment. These complexities of practice are currently assessed only as part of the overall subjective global judgements made about trainees by clinical and educational supervisors. These judgements contribute to the annual trainers report but rarely contribute to decisions about training progression and are rarely the subject of formal feedback, although MSF may provide some feedback. The ACAT is designed to assess and facilitate feedback on a doctor's performance during their practice on acute admissions, and should be conducted as a SLE and will count towards your Mini-CEX and CbD target numbers.

d. HAT (Handover Assessment Tool)

Handover is a core skill that has been identified as not easily assessed by current tools. This tool has been developed specifically for this purpose. The trainee will be assessed on the presentation of up to 3 patients, giving the working diagnosis and headlining the current problem/issues, the relevant background in relation to current illness and outlines other major or significant co-morbidities, a succinct assessment of the problem and clearly outlining what needs to be done and the time frame in which it should be done. HAT should be considered a SLE and will count towards your Mini-CEX and CbD target numbers

## e. LEADER

The leader case based discussion (CBD) is based on the competencies described in this Medical Leadership Framework and provides a structure for the discussion. It encourages trainees to demonstrate a practical, work-based understanding of the principles and practice of medical leadership

# f. DOC (Discussion of Correspondence )

DOC replaced SAIL (Sheffield Assessment Instrument for Letters). This instrument assesses a trainee's competence in written communication in everyday practice over time.

# g. ePaed MSF (multisource feedback)

The Sheffield Peer Review Assessment Tool, originally validated for use in paediatrics (Archer 2005), has been adapted to each level of training and is now available electronically (ePaed MSF). This instrument is invaluable for assessing a trainee's performance over time, in everyday practice.

## h. Paed CCF

(Originally SHEFFPAT) has been developed and validated for paediatrics and seeks the views of parents and guardians about the care of their child.

# iii) Assessment of Performance

## a. DOPs

Specific instruments had not been developed for paediatrics but those developed for Foundation were considered appropriate to assess most practical procedures and a range of practical procedures have been identified for assessment

iv) START

START (previously ST7A) is an innovation in assessment for the trainee approaching transition to consultant. Approved by the GMC, START is an assessment of clinical decision making on the basis of knowledge and the ability to communicate with teams and family members. The multi-station circuit assessment assesses competencies acquired in level 3 training (ST6 - ST8). START is designed for trainees in general paediatrics, community paediatrics and our specialties. Trainees have feedback that START has allowed them to focus on learning objectives for consultant status.

# v) Portfolio Review

Trainees are expected to maintain evidence of their progression in a portfolio. This will be reviewed by their educational supervisor prior to the completion of a structured report and will contribute to the overall assessment. The portfolio, although not an assessment instrument itself will underpin learning from the curriculum and act as a platform for trainers and trainees to manage various elements of professional development, demonstrate curriculum coverage and assessments required. The portfolio will contain

- Educational supervision documentation
- Professional development plan
- Reflective entries
- Skills log
- Record of training events
- Assessment reports
- Examination outcomes
- Trainer reports
- Teaching resources
- Audits
- Clinical governance
- Presentations

# Trainer's Report

The trainer's report is a compulsory requirement for the trainee's submission to the Annual Review of Competencies Panel (ARCP) to inform the annual appraisal. All supervisors will be required to complete a trainer's report annually and/or at the end of a training placement. This is viewed as a component of supreme importance that should triangulate observations of the trainee in practice, workplace-based assessments, portfolio review, feedback from the START Assessment and progress with examinations. It will facilitate feedback on progress and assist with defining further development goals. Where a training year is split between placements, and there are 2 trainer reports, then evidence from workplace assessments should be spread across the 2 placements.

#### Purpose

The ARCP is a formal process that looks at the evidence gathered by the trainee that relates to their achievement of the competencies laid out in the curriculum and their progression. It will allow all stakeholders to be assured that the curriculum is being covered and its assessment strategy is being achieved at a suitable rate of progression and that the experiences of the trainee have allowed for the acquisition of the competences. It also allows for a formal summary of the trainee's progression to be recorded leading to the final ARCP that confirms the attainment of the complete curriculum and assessments, supporting the PG Dean in recommending to the RCPCH the award of CCT.

# **Role of Trainee**

The trainee must ensure that all relevant paperwork is provided on time and that their e-portfolio is kept up to date with relevant records of training, reflective notes, workplace-based assessments, exam results and their own teaching and training resources.

## **Role of Educational Supervisor**

The educational supervisor must supply a trainer's report that details how the trainee has progressed over the year and areas of the curriculum and assessment that has been achieved, relating it to the development plan of the trainee and the college guidance of suitable evidence of progression by triangulating all the evidence provided by the trainee e.g. completion of MRCPCH, workplace based assessments, e-portfolio contributions (teaching, reflection, audits, quality improvement) and the START Assessment feedback.

# Role of the ARCP panel

The ARCP panel reviews all the evidence provided to ensure the trainee is ready to progress. If the trainee is successful i.e. Outcome 1 then the Panel must complete the relevant documents to ensure records of training are held to support the trainees' final CCT application.

The panel will discuss any additional training needs of an individual trainee with the Postgraduate Dean to allow for successful progression, feedback to the educational supervisor on the quality of the trainer's report and gain feedback on the training that is being delivered.

# **Role of External Advisor**

To sample a number of ARCP decisions to ensure consistency in approach and decision-making and provide a report to the Head of School and the College. To highlight to the panel and discrepancies and be a source of advice if there are concerns or clarification needed.

# Appeals

Appeals against assessments and ARCPs must follow local procedures within the School and the Deanery. For further advice see the current edition of the Gold Guide <u>http://www.copmed.org.uk/publications/the-gold-guide.html</u> Detail of assessments at each level of training

#### **Assessing Level 1 competences**

Throughout Level 1 training, trainees will need to acquire the basic scientific knowledge associated with paediatrics and child health. Application of this knowledge will be tested in many of the workplace assessments but the full breadth of this knowledge will be tested in the MRCPCH examination, particularly in the written examinations.

Although trainees leaving Foundation training will have a wide range of generic skills related to the care of adults, few will have skills related to the care of children. This means that trainees entering paediatric training may have had little or no experience of caring for children or of the specialty. Basic skills, which are well developed in adult specialties at the same stage, are absent. For example, trainees would not be able to undertake a clinical examination and interpret the findings, taking into consideration what would be appropriate for the child's age and development. Assessment of these competences will begin in the workplace with MiniCeX. These competences will also be tested in the clinical MRCPCH examination.

The ability to undertake even basic practical procedures in children will be extremely limited, even where trainees are competent to undertake technical procedures in adults. These will be assessed in the workplace using DOPS.

They will need to learn how to undertake three-way consultations, which are fundamental to paediatric practice. This will be assessed in the workplace using Paed MiniCeX. These competences will also be tested in the clinical MRCPCH examination.

They will have rudimentary or no knowledge of normal laboratory values and drug dosages for children. These are competences that are taken for granted in adult practice at this stage of training, but will need to be developed for paediatric practice. These will be tested in MRCPCH, particularly in the written part of MRCPCH Part 2.

Although trainees will be competent at acute resuscitation in adults, they will need to acquire these skills for paediatric practice. These skills will be tested in the formal assessment processes associated with a recognised life support or approved simulation course, such as the Acute Paediatric Life Support and Neonatal Life Support courses.

For safeguarding completed a level 2 (ICD) safeguarding training and completed a safeguarding specific CbD that satisfies achievement of the General Paediatric curriculum competences and the level 1 and 2 intercollegiate safeguarding competences.

## Satisfactory completion of level 1 training requires

- MRCPCH. Trainees cannot progress from beyond Level 1 (ST3) without passing all MRCPCH CBT examinations and the MRCPCH clinical. Trainees cannot progress from ST2 ST3 without passing 2 of the 3 CBT examinations
- 12-20 SLEs covering:
  - A minimum of the 6 "core acute conditions" to be covered using miniCEX and CbD assessments (respiratory, gastroenteritis, convulsions, fever, rash, abdominal pain)
  - o A minimum of one safeguarding CbD per training year
- 1 x satisfactory DOPS assessment to cover each compulsory procedure (bag, valve and mask ventilation, capillary blood sampling, venesection, peripheral venous cannulation, lumbar puncture, non-invasive blood pressure measurement, tracheal intubation of the newborn and preterm (28-34 weeks) babies and umbilical venous cannulation) and skills log completed for the remaining practical procedures in the level 1 framework
- Accredited paediatric and neonatal life support training
- Minimum of 1 satisfactory ePaed MSF per year to cover neonatal and general paediatric practice within level 1
- A portfolio which is kept up to date
- An annual trainers report supporting the evidence presented to the ARCP that satisfactory progress has been made for the trainee to progress

Failure to meet any one of these criteria will raise serious concerns about the trainee's ability to proceed to the next level of training. Where additional training is required, the content of such training and overall duration of the extension to training will be decided at the ARCP and will be at the discretion of the Postgraduate Dean (see Gold Guide).

#### Curriculum for Paediatric Training General Paediatrics Assessing Level 2 competences

At this stage, trainees are expected to apply the knowledge they have acquired and will need to have opportunities to take on responsibility. They will be expected to develop clinical reasoning and decision-making. Case- based Discussion is particularly suitable for assessing these skills hence the emphasis on this form of assessment at this stage of training. Trainees will learn further skills by taking on a more senior clinical role and by being involved in wider professional roles , including teaching, clinical governance and multi-professional working. DOC (and Paed CCF, if used) will guide feedback and reflection as the trainee develops their communication skills with a range of stakeholders and their longer term management of conditions in outpatient clinics. Trainees at this stage should be learning through feedback and reflection, learning through teaching others and learning through assessment itself. The use of the portfolio will become particularly important for recording reflection on clinical governance activities, critical incident reporting, report-writing and teaching activities.

# Completion of level 2 training requires

- 12-20 SLEs covering:
  - MiniCEX and CbD assessments to cover work in general, neonatal and community paediatrics, on wards and in clinic settings (6-10 of each) that include
    - A minimum of one Safeguarding CbD per training year
    - A minimum of one HAT per training year
    - A minimum of one ACAT across Level 2 training
    - A minimum of one LEADER per training year
- Minimum of 5 satisfactory DOC assessments across Level 2 training
- Minimum of 1 satisfactory ePaed MSF per year to cover feedback from neonatal, community and general paediatric posts
- Achievement of the General Paediatric curriculum safeguarding competences and the majority of the Level 3 Intercollegiate safeguarding competences
- A portfolio which is kept up to date
- An annual trainers report supporting the evidence presented to the ARCP that satisfactory progress has been made for the trainee to progress
- Where it is felt necessary, a satisfactory Paed CCF

Failure to meet any one of these criteria will raise serious concerns about the trainee's ability to proceed to the next level of training. Where additional training is required, the content of such training and overall duration of the extension to training will be decided at the ARCP and will be at the discretion of the Postgraduate Dean (see Gold Guide).

#### **Assessing Level 3 competences**

At this stage, the trainee is learning to work independently within a team and developing further many of the non-clinical competences which will, as at level 2, be assessed through use of the portfolio and LEADER. They will also be developing expert clinical reasoning, which again makes CbD particularly valuable as an assessment method at this stage. Throughout training, communication skills are emphasised and, at this stage, these can be assessed, from the perspective of parents, through the use of Paed CCF, if thought necessary. The START assessment, approved in 2012 is an assessment of clinical decision making on the basis of knowledge and the ability to communicate with team and family. The multi-station circuit assessment assesses competencies acquired in level 3 training (ST6 - ST8) and focuses on learning objectives for consultant status.

### *Completion of level 3 training requires*

- 12-20 SLEs covering:
- 4 6 MiniCEX and 8 12 CbD assessments to include core conditions required by specialty/subspecialty and
  - A minimum of one Safeguarding CbD per training year
  - A minimum of one LEADER CbD per training year
- Minimum of 5 satisfactory DOC assessments across Level 3 training
- Minimum of 1 satisfactory ePaed MSF per year to cover feedback from a range of posts
- Satisfactory DOPS to cover each practical procedure in the level 3 framework if relevant for subspecialty
- Achievement of the Intercollegiate Level 3 safeguarding competences and the additional competences for paediatricians
- Completion of START Assessment and where necessary evidence of implementing targeted feedback
- A portfolio which is kept up to date
- Where it is felt necessary, a satisfactory Paed CCF
- An annual trainers report supporting the evidence presented to the ARCP that satisfactory progress has been made for the trainee to progress

Failure to meet any one of these criteria will raise serious concerns about the award of a CCT. Where additional training is required, the content of such training and overall duration of the extension to training will be decided at the ARCP and will be at the discretion of the Postgraduate Dean (see Gold Guide).

# Assessment Standards for Levels 1, 2 and 3

The trainee will demonstrate:

GMC Framework	Standard	Level 1	Level 2	Level 3
Knowledge, skill and performance	1	an understanding of the roles and responsibilities of paediatricians	a commitment in their practice to the roles and responsibilities of paediatricians	a commitment to advocate for the individual child in her/his particular context
Knowledge, skill and performance	2	effective responses to challenge, complexity and stress in paediatrics	increasing credibility and independence in response to challenge and stress in paediatrics	responsibility for an effective response to complex challenges and stress in paediatrics
Knowledge, skill and performance	3	advanced neonatal and paediatric life support skills	leadership skills in advanced neonatal and paediatric life support	effective responses to life-threatening situations and to unpredictability in paediatric clinical situations
Knowledge, skill and performance	4	effective skills in three-way consultation and examination	responsibility for an effective three-way consultation and examination	responsibility for an analytic and focused three-way consultation and examination
Knowledge, skill and performance	5	effective skills in paediatric assessment	responsibility for conducting effective paediatric assessments and interpreting findings appropriately	commitment to focussed and analytic assessments of common and complex clinical problems in paediatrics
Knowledge, skill and performance	6	skills in formulating an appropriate differential diagnosis in paediatrics	improving skills in formulating an appropriate differential diagnosis in paediatrics	effective skills in making a safe decision about the 'most likely' diagnosis in paediatrics
Knowledge, skill and performance	7	effective initial management of ill-health and clinical conditions in paediatrics seeking additional advice and opinion as appropriate (as outlined in the Framework of Competences for Level 1 in Paediatrics)	responsibility for the effective management of common acute and chronic conditions in paediatrics seeking additional advice and opinion as appropriate (as outlined in the Framework of Competences for Level 2 in Paediatrics)	leadership skills in the management of common and complex conditions in general paediatrics and paediatric sub-specialities seeking additional advice and opinion as appropriate (as outlined in the Framework of Competences for Level 3 in General Paediatrics and the Paediatric sub- specialties)
Knowledge, skill and performance	8	knowledge, understanding and recognition of common behavioural, emotional and psychosocial aspects of illness in children and families	effective skills in recognising and responding to behavioural, emotional and psychosocial aspects of illness in children and families	effective skills in ensuring the management of behavioural, emotional and psychosocial aspects of illness in children and families
Knowledge, skill and performance	9	Safe practical skills in paediatrics	effective skills in performing and supervising common practical procedures in paediatrics, ensuring patient safety	expertise in a range of practical procedures in paediatrics specific to general and sub- specialist training
Knowledge, skill and performance	10	clear record-keeping and report-writing	improving skills in written communications	effective skills in written communications for

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			for a range of audiences	a range of audiences, for children and their families, colleagues and other organisations
Knowledge, skill and performance	11	reliable responses to investigations in paediatrics	effective leadership skills in undertaking initial investigations in children, based on an understanding of the risks and benefits in each case	effective collaboration with other specialists in using and interpreting complex investigations undertaken in children
Knowledge, skill and performance	12	knowledge and skills in safe prescribing of common drugs in paediatrics	improving skills in safe prescribing in paediatrics and in advising others appropriately	responsibility for safe prescribing in paediatrics in common and complex situations and for the supervision of others
Knowledge, skill and berformance Safety and Quality	13	an understanding of safeguarding and vulnerability in paediatrics	effective skills in the assessment of cases of suspected safeguarding issues and in contributing to their management	effective skills in advising other agencies in safeguarding cases
Knowledge, skill and performance	14	knowledge of the science- base for paediatrics (as outlined in the Framework of Competences for Level 1 in Paediatrics)	sound knowledge of the science- base for paediatrics (as outlined in the Framework of Competences for Level 2 in Paediatrics)	detailed, up-to-date knowledge of the science-base for general paediatrics or a paediatric sub-specialty (as outlined in the Framework of Competences for Level 3 in General Paediatrics and the sub-specialties)
Knowledge, skill and performance	15	knowledge of common and serious paediatric conditions and their management	extended knowledge of common and serious paediatric conditions and their management	detailed knowledge of common and serious paediatric conditions and their management in General Paediatrics or in a Paediatric sub speciality
Knowledge, skill and performance	16	an understanding of growth, development, health and well-being in paediatrics	effective skills in the assessment and management of children and young people with normal and abnormal growth and development	effective skills in recognising and respondin effectively to disordered growth and development of any kind in paediatrics
Knowledge, skill and verformance Safety and Quality	17	an understanding of health promotion and public health issues in paediatrics	a commitment to health promotion activities for children and their families	involvement in health promotion activities specific to general paediatrics or a paediatric sub-specialty
Knowledge, skill and performance Safety and Quality	18	an understanding of an evidence-based approach to paediatric practice	development and refinement of evidence- based clinical guidelines in paediatrics	independent thinking to enable them to challenge guidelines and procedures in paediatrics where appropriate
Knowledge, skill and performance Safety and Quality	19	an understanding of clinical governance activities and audit in paediatric practice	participation in clinical governance activities and audit in paediatric practise	an application of risk assessment strategies through involvement in the development, evaluation and implementation of policy and clinical governance activities in paediatric practice
Knowledge, skill and performance Safety and Quality	20	a reflective approach to improvement of professional practice as a paediatrician	a commitment to reflective practice and continuing improvement of practice as a paediatrician	effective skills to maintain and develop knowledge and clinical skills required of a specialist in paediatrics

Curriculum for Paediatric Training Ge	eneral Paediatric	S		
Knowledge, skill and performance Communication, partnership and teamwork Maintaining trust	21	an understanding of equality and diversity in paediatric practice	a commitment to an open-minded approach to equality and diversity in their role as a paediatrician	responsibility for ensuring an open-minded approach to equality and diversity in the paediatric team
Knowledge, skill and performance	22	knowledge of the law regarding paediatric practice	knowledge of the law regarding death, data protection, confidentiality and consent in paediatrics	detailed knowledge of the law regarding death, data protection, confidentiality and consent in paediatrics
Knowledge, skill and performance Safety and Quality	23	an understanding of effective teaching in paediatrics	skills in effective teaching in paediatrics	a commitment to effective teaching and training of colleagues working in different contexts in the care of children and young people
Knowledge, skill and performance Communication, partnership and teamwork Safety and Quality	24	a positive approach to receiving mentoring and educational supervision	a commitment to providing positive experiences of mentoring and educational supervision	effective skills in the training, supervision and assessment of a wide range of colleagues working in the care of children and young people
Knowledge, skill and performance	25	an understanding of the need for an ethical and rigorous approach to research in paediatrics	an understanding of research methods and methodology and an involvement in research activities and publications	understanding and application of complex methodological approaches in research in paediatrics
Communication, partnership and teamwork Maintaining trust	26	an understanding of effective communication and interpersonal skills with children of all ages	a commitment to effective communication and interpersonal skills with children of all ages	effective strategies to engage children in consultations and in the management of their care
Communication, partnership and teamwork Maintaining trust	27	empathy and sensitivity and skills in engaging the trust of and consent from children and their families	improving skills in building relationships of trust with children and their families	effective skills in conveying and discussing difficult information, including death and bereavement, with young people and their families
Communication, partnership and teamwork Maintaining trust	28	understanding of listening skills and basic skills in giving information and advice to young people and their families	increasing confidence in giving advice to young people and their families	effective skills in giving information and advice to young people and their families in common and complex cases
Communication, partnership and teamwork	29	effective communication and interpersonal skills with colleagues	skills in ensuring effective relationships with and between colleagues	positive and constructive relationships within teams of colleagues from a wide range of professional contexts
Communication, partnership and teamwork	30	professional respect for the contribution of colleagues in a range of roles in paediatric practice	increasing confidence in team-work and the ability to collaborate with a range of external agencies about the needs of children	a commitment to effective multi-agency and multi-disciplinary team-working for the care of children
Communication, partnership and teamwork	31	effective time-management skills	effective leadership and management skills in clinical and non-clinical settings	effective managerial skills in taking on a positive managerial role to support effective

				service provision
Knowledge, skill and performance Safety and Quality Communication, partnership and teamwork	32	effective handover, referral and discharge procedures in paediatrics	effective skills in ensuring handover, referral and discharge procedures in paediatrics	effective leadership skills in the organisation of paediatric team-working and effective handover
Communication, partnership and teamwork Safety and Quality	33	an understanding of the effects of local, national and international policies on their work and on the health of children	experience and understanding of working within international, national and local legal and health structures and organisations involved in the care of children	effective skills in promoting clinical practice through engagement with local, national and international organisations involved in the care of children
Maintaining trust Safety and Quality	34	ethical personal and professional practice	sound ethical personal and professional practice	exemplary professional and personal conduct so as to act as a role model to others
Maintaining trust	35	reliability and responsibility in ensuring their accessibility to colleagues and patients and their families	continued responsibility for their reliability and accessibility to colleagues, patients and their families	responsibility for ensuring their own reliability and accessibility and that of others in the team
Maintaining trust, Safety and Quality	36	an understanding of the importance of self- awareness and a responsible approach to personal health, stress and well-being	a consistently responsible approach to personal health, stress and well-being	effective skills in ensuring their own responsible approach to personal health, stress and well- being and that of others

## **Assessment Blueprint**

Assessment Standards: Blueprint Level 1

Asses	By the end of Level 1 Training, trainees will															Comment
	demonstrate:															Johnnent
ds							~		MSF						<b>_</b>	
Standards					Clinical		LEADER	L_	≥ P		MiniCeX			Portfolio	Logbook	
and		٩	S	AKP	inic	НАТ	AD AD	ACAT	Epaed	CbD	niC	DOC	DOPs	f	db	
Š		FoP	TAS	Ą	Ū	Ħ	1 "	¥	Щ	ц С	Σ	ă	ă	Ъ	Ľ	
THE	DUTIES OF A DOCTOR												Kno	wledg	e, Ski	lls and Performance
1	An understanding of the roles and responsibilities of				✓		✓		✓	✓				$\checkmark$		
	paediatricians															
GOO	D CLINICAL CARE		•	•		•	•									
2	Effective responses to challenge, complexity and stress in				~	✓	✓		~	✓	~			$\checkmark$		
	paediatrics															
3	Advanced neonatal and paediatric life support skills												✓		✓	APLS/NLS or
4	Effective skills in three way examination				✓	$\checkmark$				<ul> <li>✓</li> </ul>	$\checkmark$					equivalent
	•					-										
5	Effective skills in paediatric assessment				~	~				✓	~					
6	Skills in formulating an appropriate differential diagnosis in			✓	✓	✓			✓	✓	✓					
	paediatrics															
7	Effective initial management of ill-health and clinical			✓	$\checkmark$	$\checkmark$	✓		✓	✓	✓					
	conditions in paediatrics seeking additional advice and															
	opinion as appropriate															
8	Knowledge, understanding and recognition of common,	✓	✓	✓	✓				✓	✓						
	behavioural, emotional and psychosocial aspects of illness in children and families															
														Ļ	Ļ	
9	Safe practical skills in paediatrics								~				~	$\checkmark$	$\checkmark$	
10	Clear record keeping and report writing						~		~	✓		~			~	
11	Reliable responses to investigations in paediatrics	✓	~	✓	~		~		~	✓						
12	Knowledge and skills in safe prescribing of common drugs in	✓	~	✓						✓						
	paediatrics															
13	An understanding of safeguarding and vulnerability in	~	~	~						~				~	~	Complete ICD
	paediatrics															Level 2 training

Curric	Ilum for Paediatric Training General Paediatrics	1		-		r	<u> </u>		1	1	1	r		1	1	·
	By the end of Level 1 Training, trainees will															
	demonstrate:															
Standards		FoP	TAS	АКР	Clinical	НАТ	LEADER	ACAT	Epaed MSF	CbD	MiniCeX	DOC	DOPs	Portfolio	Logbook	
MAI	NTAINING GOOD MEDICAL PRACTICE												Kno	wledg	e, Skil	lls and Performance
14	Knowledge of the science base for paediatrics	~	✓	✓	✓											
15	Knowledge of common and serious paediatric conditions and their management	~	~	~	✓											
16	An understanding of growth, development, health and well- being in paediatrics	~	~	~	~											
								k	Knowle	edge,	Skills	and P	erform	nance.	Safe	ty and Quality
17	An understanding of health promotion and public health issues in paediatrics	~	<b>~</b>	<b>√</b>						<ul> <li>✓</li> </ul>						
18	An understanding of an evidence-based approach to paediatric practice	~	~	~					~	~				~		
19	An understanding of the clinical governance activities and audit in paediatric practice	~	<b>√</b>	~	<b>√</b>		~		~	✓				~		
20	A reflective approach to improvement in professional practice as a paediatrician						~		~	~				~		
21	An understanding of equality and diversity in paediatric practice			~	~		~							~		
22	Knowledge of the law regarding paediatric practice	✓	~	~	~		✓		✓							
TEA	CHING, TRAINING, APPRAISING AND ASSESSING	1	1	1	1	1	1	1	ŀ	Knowle	edge,	Skills	and P	erform	nance.	Safety and Quality
23	An understanding of effective teaching in paediatrics				✓		~		✓					✓		
24	A positive approach to receiving mentoring and educational supervision								~					~		
25	An understanding of the need for an ethical and rigorous approach to research in paediatrics	~	~	~												

Currici	By the end of Level 1 Training, trainees will															Comment
	demonstrate:															Comment
s									MSF							
arc					a		L L L L L L		Σ		Xa			lio	No X	
pu		•	6	۹.	jc	⊢⊢	D	AT	aed		Ö	U	Ps	tfo	bd	
Standards		БоР	TAS	AKP	Clinical	НАТ	LEADER	ACAT	Epaed I	CbD	MiniCeX	DOC	DOPs	Portfolio	Logbook	
	ATIONSHIPS WITH PATIENTS	-			U	-	-									k. Maintaining Trust
			_		_	-			ommu	nicali	л, га	liners	nip an	u rea		k. Maintaining must
26	An understanding of effective communication and				$\checkmark$		$\checkmark$		$\checkmark$	$\checkmark$	$\checkmark$	$\checkmark$	✓	✓		
	interpersonal skills with children of all ages															
27	Empathy and sensitivity and skills in engaging the trust of				✓		✓		✓		$\checkmark$					
	and consent from children and their families															
28	Understanding f listening skills and basic skills in giving				✓		✓		✓	✓	✓					
	advice to young people and their families															
WOR												Comm	unicat	ion P	artnor	ship and Teamwork
		1	-	1	-	1	<b>—</b>	1	<b>1</b> ,	T			unicat			
29	Effective communication and interpersonal skills with					~	$\checkmark$		✓		$\checkmark$	~				
	colleagues															
30	Professional respect for the contribution of colleagues in a					✓	$\checkmark$		✓	✓	✓					
	range of roles in paediatric practice															
31	Effective time-management skills					✓			✓	✓	✓					
		Comr	nunio	ation	Dorto	archin	and	Foomu	lork	Safatu	and	Juglit	( Kno	wloda	o Skil	ls and Performance
		Comin	nunica	alion, i	railie			eann	101K	Salety	anu	zuality	<i>.</i> NIIO	wieug	e, skii	is and Fenomiance
32	Effective handover, referral and discharge procedures in					~						$\checkmark$		✓		
	paediatrics															
33	An understanding of the local, national and international	$\checkmark$	$\checkmark$	✓	$\checkmark$		$\checkmark$		✓							
	policies on their work and on the health of children															
PRO	ВІТҮ	1		I								1	Mainta	aining	Trust.	Safety and Quality
34	Sound ethical personal and professional practice	1	1		<b>√</b>	1	<b>√</b>		✓	✓	$\checkmark$	1				•
					-					-						
35	Reliability and responsibility in ensuring their accessibility to								~							
	colleagues and patients and their families															
HEA	LTH		-	•	-			•			-			•		
36	An understanding of the importance of self-awareness and a								✓					✓		
	responsible approach to personal health, stress and well-															
	being															
		1					1					1		1		

### Assessment Standards: Blueprint Level 2

	By the end of Level 2 Training, trainees will demonstrate:											Comment
Standards		НАТ	LEADER	ACAT	Epaed MSF	CbD	MiniCeX	DOC	DOPs	Portfolio	Logbook	
THE	DUTIES OF A DOCTOR					•			•			Knowledge, Skills and Performance
1	A commitment in their practice to the roles and responsibilities of paediatricians		~		<b>√</b>					✓		
GOC	D CLINICAL CARE										1	
2	Increasing confidence, credibility and independence in response to challenge, complexity and stress in paediatrics	✓	~	~	<b>√</b>	✓	<b>√</b>			<b>√</b>		
3	Leadership skills in advanced neonatal and paediatric life support skills				<b>√</b>				~		~	Up to date APLS or equivalent
4	Responsibility for effective three way consultation and examination	✓		~		~	~					
5	Responsibility for conducting effective paediatric assessments and interpreting their findings			~		~	✓					
6	Improving skills in formulating an appropriate differential diagnosis in paediatrics			~	<b>√</b>	~	~					
7	Responsibility for the effective management of acute and chronic conditions in paediatrics seeking additional advice and opinion as appropriate			✓	~	~	~					
8	Effective skills in recognizing and responding to behavioural, emotional and psychosocial aspects of illness in children and families				~	~						
9	Effective skills in performing and supervising common practical procedures in paediatrics, ensuring patient safety			~	✓				~	<ul> <li>✓</li> </ul>	<b>√</b>	
10	Improving skills in written communication for a range of audiences	~			<b>√</b>	~		~			<b>√</b>	
11	Effective leadership skills in undertaking initial investigations in children, based on an understanding of the risks and benefits in each case				~	~						
Descala	Collage of Pandiatrics and Child Health											150

Royal College of Paediatrics and Child Health

Carrie	Jum for Paediatric Training General Paediatrics						1					Commont
	By the end of Level 2 Training, trainees will demonstrate:											Comment
ds			~		MSF					0	×	
Standards			LEADER	F	⊿ p		MiniCeX		s	Portfolio	Logbook	
an		НАТ	IAI	ACAT	Epaed	CbD	ini	DOC	DOPs	ort	dgc	
S		Ŧ	1	Ă	Щ	ប	Σ	ă	ă	ď	Ľ	
12	Improving skills in safe prescribing in paediatrics and in advising others appropriately					~				~		
13	Effective skills in the assessment of cases of suspected safeguarding issues and in contributing to their management		~			✓				~	~	
MAI	NTAINING GOOD MEDICAL PRACTICE									I		Knowledge, Skills and Performance
14	Sound knowledge of the science base for paediatrics					✓						
15	Extended knowledge of common and serious paediatric conditions and their management				~	~						
16	Effective skills in the assessment and management of					✓	✓					
	children and young people with normal and abnormal growth and development											
									Kno	wledg	e, Skill	s and Performance. Safety and Quality
17	A commitment to health promotion activities for children and their families				~	<b>√</b>				~		
18	Development and refinement of evidence-based clinical guidelines in paediatrics				~	~				~		
19	Participation in clinical governance activities and audit in paediatric practice		~		~	✓				✓		
20	A commitment to reflective practice and continuing improvement of practice as a paediatrician		~		~					~		
21	A commitment to an open-minded approach to equality and diversity in their role as a paediatrician		~			~				~		
22	Knowledge of the law regarding death, data protection, confidentiality an consent in paediatrics		<b>~</b>		~					~		

curric	By the end of Level 2 Training, trainees will demonstrate:											Comment
Standards		НАТ	LEADER	ACAT	Epaed MSF	СЬD	MiniCeX	DOC	DOPs	Portfolio	Logbook	
TEA	CHING, TRAINING, APPRAISING AND ASSESSING								Kno	owled	ge, Sk	ills and Performance. Safety and Quality
23	Skills in effective teaching in paediatrics		~		✓					✓		Presentations with comments from supervisor
24	A commitment to provide positive experiences of mentoring and educational supervision				~					✓		
25	An understanding of research methods and methodology and an involvement in research activities and publications									✓		
REL	ATIONSHIPS WITH PATIENTS							Com	munica	ation,	Partne	rship and Teamwork. Maintaining Trust
26	A commitment to effective communication and interpersonal skills with children of all ages		~	<b>√</b>	<b>√</b>	<b>√</b>	<b>√</b>					
27	Improving skills in building relationships of trust of with children and their families		~	<b>√</b>	~		<b>√</b>					
28	Increasing confidence in giving advice to young people and their families			<b>√</b>	~	✓	✓					
WOF	KING WITH COLLEAGUES										Con	munication, Partnership and Teamwork
29	Skills in ensuring relationships with and between colleagues	✓	✓	$\checkmark$	✓		✓					
30	Increasing confidence in team work and the ability to collaborate with a range of external agencies about the needs of children	~	✓	<b>√</b>	•		<b>√</b>					
31	Effective leadership and management skills in clinical and non-clinical settings	~	~	<b>√</b>	✓		✓					
		Comr	nunica	tion, Pa	artners	hip ar	nd Tea	mwor	k. Sat	ety ar	nd Qua	lity. Knowledge, Skills and Performance
32	Effective skills in ensuring handover, referral and discharge procedures in paediatrics	~		<b>√</b>				<b>√</b>		~		
33	Experience and understanding of working within international, national and local legal and health structures and organizations involved in the care of children		V		~					~		

Standards	By the end of Level 2 Training, trainees will demonstrate:	НАТ	LEADER	ACAT	Epaed MSF	CbD	MiniCeX	DOC	DOPs	Portfolio	Logbook	Comment
PRC	BITY				•		•					Maintaining Trust. Safety and Quality
34	Sound ethical and professional practice		✓		✓	✓	✓			✓		
35	Continued responsibility for their reliability and accessibility to colleagues, patients and families				✓					~		
HEA	LTH			I I								
36	A consistently responsible approach to personal health, stress and well-being				✓					~		

	By the end of Level 3 Training, trainees will demonstrate:													Comment
Standards		НАТ	LEADER	ACAT	Epaed MSF	CbD	MiniCeX	DOC	DOPs	Portfolio	Logbook	START	Paed CCF	
THE	DUTIES OF A DOCTOR					•				Knov	vledge	, Skil	ls and	Performance
1	A commitment to advocate for the individual child in her/his particular context		✓		<b>√</b>	<b>√</b>				✓				
GOO	DD CLINICAL CARE						1	1		1				
2	Responsibility for an effective response to complex challenges and stress in paediatrics	~	<b>√</b>	<b>√</b>	✓	~	<b>√</b>			<b>√</b>		~		
3	Effective responses to life-threatening situations and to unpredictability in paediatric clinical situations				~	~			~		~			
4	Responsibility for an analytical and focused three way consultation and examination	~		<b>√</b>		~	<b>√</b>							
5	Commitment to focused and analytical assessments of common and complex clinical problems in paediatrics	~		<b>√</b>		~	<b>√</b>			<b>√</b>		~		
6	Effective skills in making a safe decision about the 'most likely' diagnosis in paediatrics			<b>√</b>	~	~	~					~		
7	Leadership skills in the management of common and complex conditions in general paediatrics and paediatric sub- specialties seeking additional advice and opinion as appropriate		~	✓ 	✓	~	~			✓ 		~		
8	Effective skills in ensuring the management of behavioural, emotional and psychosocial aspects of illness in children and families				~	•						~		
9	Expertise in a range of practical procedures in paediatrics specific to general and sub-specialist training			<b>√</b>	~				~	~	~			
10	Effective skills in written communication for a range of audiences, for children and their families, colleagues and other organisations			~	✓	~		~		~				

Standards	By the end of Level 3 Training, trainees will demonstrate:		LEADER	E	pé		CeX		Ś	Portfolio	Logbook	RT	I CCF	Comment
Stan		НАТ	LEA	ACAT	Epaed MSF	CbD	MiniCeX	DOC	DOPs	Port	Logt	START	Paed	
11	Effective collaboration with other specialists in using and interpreting complex investigations undertaken in children				~	~								
12	Reliability for safe prescribing in paediatrics in common and complex situations and for the supervision of others					~						~		
13	Effective skills in advising other agencies in safeguarding cases					~		~		✓		~		
MA	NTAINING GOOD MEDICAL PRACTICE									Know	ledge,	, Skill	s and	Performance
14	Detailed, up to date knowledge of the science base for general paediatrics or a paediatrics sub-specialty					~				<b>√</b>		~		
15	Detailed knowledge of common and serious paediatric conditions and their management in General Paediatrics or in a paediatric sub-specialty					~				~		~		
16	Effective skills in recognising and responding effectively to disordered growth and development of any kind in paediatrics					✓						<b>√</b>		
						Kn	owled	lge, S	kills a	nd Pe	erforma	ance.	Safe	ty and Quality
17	Involvement in health promotion activities specific to general paediatrics or a paediatric sub-specialty					✓				~				
18	Independent thinking to enable them to challenge guidelines and procedures in paediatrics where appropriate		~		~	~				✓				
19	An application of risk assessment strategies through active involvement in the development, evaluation and implementation of policy and clinical governance activities in paediatric practice		~		~	✓				~		✓		
20	Effective skills to maintain and develop knowledge and clinical skills required of a specialist in paediatrics		~		~					~				
21	Responsibility for ensuring an open-minded approach to equality and diversity in the paediatric team		~			✓				~		~		
22	Detailed knowledge of the law regarding death, data protection, confidentiality and consent in paediatrics		~		✓					✓		~		

	By the end of Level 3 Training, trainees will demonstrate:													Comment
Standards		НАТ	LEADER	ACAT	Epaed		MiniCeX	DOC	DOPs	Portfolio	Logbook	START	Paed CCF	
TEA	CHING, TRAINING, APPRAISING AND ASSESSING					K	nowle	dge, S	Skills a	and Po	erform	ance	. Safe	ety and Quality
23	A commitment to effective teaching and training of colleagues working in different contexts in the care of children and young people		<b>√</b>		<b>√</b>					~		~		
24	Effective skills in the training, supervision and assessment of a wide range of colleagues working in the care of children and young people				<b>√</b>					~		~		
25	An understanding and application of complex methodological approaches in research in paediatrics									~		✓		
REL	RELATIONSHIPS WITH PATIENTS         Communication, Partnership and Teamwork. Maintaining Trus										intaining Trust			
26	Effective strategies to engage children in consultations and the management of their care		✓	~	•	~							~	
27	Effective skills in conveying and discussing death and bereavement with young people and their families		✓	✓	~	✓							✓	
28	Effective skills in giving information and advice to young people and their families in common and complex cases		~	✓	~	~							~	
WO	RKING WITH COLLEAGUES							Co	ommu	nicati	on, Pa	rtners	ship a	nd Teamwork
29	Positive and constructive relationships within teams of colleagues from a wide range of professional contexts	✓	✓	<b>√</b>	✓	✓						~		
30	A commitment to effective multi-agency and multi-disciplinary team working for the care of children	~	✓	✓	~	~						~		
31	Effective managerial skills in taking on a positive role to support effective service provision		~		✓	~						~		
	Communication, Pa	artner	ship a	nd Tea	amwor	rk. Sa	ifety a	nd Qı	ality.	Know	ledge,	Skill	s and	Performance
32	Effective leadership skills in the organisation of paediatric team working and effective handover	✓		✓				<b>√</b>		<b>√</b>		✓		
33	Effective skills in promoting clinical practice through engagement with local, national and international organisations involved in the care of children		V		✓					~		~		

Standards	By the end of Level 3 Training, trainees will demonstrate:	НАТ	LEADER	АСАТ	Epaed MSF	CbD	MiniCeX	DOC	DOPs	Portfolio	Logbook	START	Paed CCF	Comment
PRC	BITY			•			•		Ма	aintain	ing Tr	ust.	Safet	y and Quality
34	Exemplary professional and personal conduct so as to act as a role model to others		✓		✓		<b>√</b>			√				
35	responsibility for ensuring their own reliability and accessibility and that of others in their team				~					✓				
HEA	LTH								1		1	11		
36	Effective skills in ensuring their own responsibility to personal health, stress and well-being and that of others				~					✓				