

Curriculum for Paediatric Training Paediatric Diabetes and Endocrinology

Level 1, 2 and 3 Training

Sept 2010

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Curriculum for Paediatric Training General Paediatrics

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Quick Start to the Curriculum

1. What does the curriculum tell us?

The curriculum includes

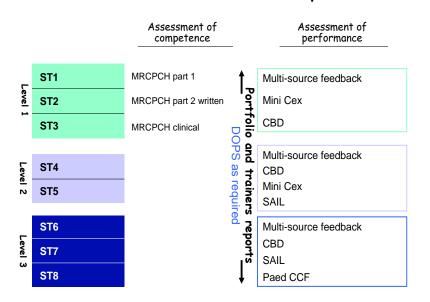
- Competences that need to be achieved by trainees through their stages of training in becoming a paediatrician
- Assessment strategy through the whole of their training to successful completion and the award of a CCT (Certificate of Completion of Training)

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

Progression in the Professional Development of a Paediatrician

Royal College of Paediatrics and Child Health



RCPCH assessment road map

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 <u>http://www.rcpch.ac.uk/Training/NTN-Grid-Scheme</u>

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. Table 1 illustrates this progression through training.

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	Evaluates knowledge and modifies clinical care
	clinical care	pathways to enhance patient care.
Acquires clinical examination and assessment skills	Analyses clinical findings to derive appropriate	Evaluates assessment findings; refines and
and applies these in clinical practice	differential diagnosis and management plans.	modifies management plans.
Acquires all basic technical skills and basic life	Proficient at all basic technical procedures, some	May relinquish some skills in these areas

support	complex procedures and provides advanced life support.	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.	<i>Plans and modifies curricula. Performs assessment and appraisal. Able to provide mentorship.</i>
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

Curriculum for Paediatric Training General Paediatrics

SECTION 1 – HOW TO USE THE COMPETENCY FRAMEWORK

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 (<u>http://www.mmc.nhs.uk/pdf/Gold%20Guide%202009%20-%20Third%20edition%20v1.pdf</u>).

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

Acting up as a consultant (AUC)

"Acting up" provides doctors in training coming towards the end of their training with the experience of navigating the transition from junior doctor to consultant while maintaining an element of supervision.

Although acting up often fulfills a genuine service requirement, it is not the same as being a locum consultant. Doctors in training acting up will be carrying out a consultant's tasks but with the understanding that they will have a named supervisor at the hosting hospital and that the designated supervisor will always be available for support, including out of hours or during on-call work. Doctors in training will need to follow the rules laid down by the Deanery / LETB within which they work and also follow the RCPCH rules which can be found at http://www.rcpch.ac.uk/training-examinations-professional-development/postgraduate-training/resources-trainees-training-s-4

SECTION 2 – THE COMPETENCY FRAMEWORK – 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

	ies of a Doctor ledge, Skills and Performance		Assessment Stand	lard 1
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
Competences	Trainees will: understand the duties and responsibilities of a paediatrician in the safeguarding of babies, children and young people understand the duties and responsibilities of a paediatrician to support and enable parents and carers to be effective in caring for their children 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 people begin to understand their role in the management of chronic illness in children and young people	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 understand their role in managing the consequences of chronic illness for a child and family	understand the duty of all professionals working with children to report concerns about child protection issues to Social Services	Multisource Feedback , LEADER and ePortfolio
	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 develop an understanding of the concept of advocacy for a healthy lifestyle in children and young people and for the protection of their rights understand the responsibility of paediatricians to consider all aspects of a child's well-being including biological, psychological and social factors	take on an advocacy role with regard to the best interests of the patient; to ensure appropriate care for patients show that they consider all aspects of a child's well- being including biological, psychological and social factors	be committed to a policy of advocacy for a healthy lifestyle in children and young people and for the protection of their rights	Multisource F

Assessment Standards 2-13

Good Clinical Care Knowledge, Skills and Performance. Communication , partnership and teamwork

This section describes the generic competences (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
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

Curriculum for Paediatric Training General 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
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	

paediatric	b challenge and stress in to complex challenges and stress in paediatrics
children and families show awareness and have personal em	ed skills and strategies to manage their itional reactions effectively to allow munication on response to distress from

	d Clinical Care edge, Skills and Performance		Assessment Stan	dard
	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
1 	ees will: be able to respond appropriately to cardiac arrest			
	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
	be able to carry out resuscitation using bag, mask ventilation and cardiac compressions			equivalent,
	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		NLS 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/

	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
e	ees will:		
	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	
	examine children and young people accurately and sensitively in appropriate settings	take responsibility for an effective consultation that routinely includes biological, psychological, educational and social factors in the child and family	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
	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	
	examine children and young people accurately and sensitively in appropriate settings		Be able to measure children accurately and to assess their growth using appropriate growth

		charts and taking into account parental stature and pubertal status
		Be aware of inter and intra-observer error in measuring children
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	
have begun to develop skills to involve both the child and parents or carers when both are present in consultations		
	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	Has 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	

	d Clinical Care ledge, Skills and Performance		Assessment Standa	ard 5
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	Assessments
	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 serious and unusual illness and recognise potential misdiagnoses	, MiniCex, TART and
Competences	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	MRCPCH, CbD, HAT, ACAT, S1

Recognise presentations of common disorders in children		recognise the breadth of different presentations of common disorders	
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	
recognise the diseases and host characteristics which make certain presentations life-threatening in children and know when to ask for help			
		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	Cex, HAT, Portfolio
		Be ale to assess accurately stages of pubertal development and recognise normal and abnormal patterns	MRCPCH, CbD, MiniCex, HAT ACAT, START and ePortfolio

	d Clinical Care ledge, Skills and Performance		Assessment Stan	dard 6
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	Assessments
Trair	nees will:			
Comp	begin to develop analytic, clinical reasoning skills	show regular use of analytic, clinical reasoning	be able to approach new situations which require good clinical judgement with an analytical and informed choice	MiniCe

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	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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	od Clinical Care ledge, Skills and Performance		Assessment Stan	dard 7
Standard 7	Level 1 (ST1-3) effective initial management of ill-health and clinical conditions in paediatrics seeking additional advice and opinion as appropriate	Level 2 (ST4-5) responsibility for the effective management of common acute and chronic conditions in paediatrics seeking additional advice and opinion as appropriate	Level 3 (ST6-8) leadership skills in the management of common and complex conditions in general paediatrics and paediatric sub- specialties seeking additional advice and opinion as appropriate	Assessments
Trai 8	nees will: 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	ΣS

		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	
	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	
understand the factors which influence children, young people and parents or carers in their approach to following prescribed management and treatment plans		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	
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		MiniCeX, HAT. LEADER.
	·	be able to develop and work within care pathways	Min HAT. L

Begin to understand the process of bereavement in children and families	understand the process of bereavement in children and families and recognise abnormal grieving patterns

Good Clinical Care Assessment Standa Knowledge, Skills and Performance				
Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)	A N	

Standard 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	
Traii	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		TART
inces	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 and START
Competences	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		MRG
	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	
	know about the initial assessment and management of common causes of admission to	are able to undertake the initial assessment and management of common causes of admission to	initiate management and effectively engage and contribute to ongoing multi-disciplinary care	ΣS

hospital due to psychological distress such as self- harm, somatic symptoms of distress	hospital due to psychological distress such as self- harm, somatic symptoms of distress and to refer on when appropriate	
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 young people's mental health difficulties may present in 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 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
		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	Supplement clinical assessment with standardised instruments of questionnaires
	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

	d Clinical Care edge, Skills and Performance		Assessment Stand	dard 9
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	ees 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			CbD and logbook
	know the relevant markers for invasive procedures) and
ces	know and practise aseptic techniques			, Cbl
Competences	know the appropriate indications, local and national guidelines for undertaking investigations or procedures			ePortfolio. ACAT.
Ŭ	be able to use all equipment required to undertake common procedures and investigations			s, ePort
	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.
	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		

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			CbD and
understand and follow the local guidelines for the prevention and management of needle stick injuries				ortfolio, ACAT, logbook
	have experience of speaking to parents when complications have occurred			Port
develop expertise in practical procedures specifically related to the clinical care of small babies , children and young people				MSF, DOPs, ePortfolio, ACAT, logbook
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		✓		
Electrocardiogram		✓		
Lumbar puncture		\checkmark		
Non invasive blood pressure measurement		\checkmark		
Umbilical artery and venous cannulation and sampling		\checkmark		
Suprapubic aspiration of urine		✓		
Urethral catheterisation, venesection, cannulation, and	capillary blood sampling	✓		
Peripheral arterial cannulation		*	✓	
Routine testing of urine			✓	
Perform basic lung function tests			✓	
TRAINEES WILL BE ABLE TO PERFORM INDEPENDENTL	Y (* 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	 *	✓	
Percutaneous long line insertion		*	✓	
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Administration of surfactant	*	✓	
Intubation of newborn infants of most gestations		✓	
Needle thoracocentesis for pleural effusion or pneumothorax		✓	
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 communications 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
Trair	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	ortfolio
Competences		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	ER, DOC and ePortfolio
Compe	keep accurate, legible and relevant medical records			D, ACAT, LEADER,
	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	MSF, CbD,

	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
ensure that written communications summarise accurately discussions with young people and parents or carers, and, to avoid confusion and	ensure that written information in the form of booklets, leaflets information sheets and websites support verbal communications wherever possible	
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

MSF, CbD, ACAT, LEADER, DOC and ePortfolio

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	ees will:		
	be able to explain the investigation results to parents and/or the child		
es	demonstrate safe practice in the timely and appropriate requests for investigations		
Competences	be able to initiate appropriate investigations	be able to initiate appropriate investigations and management plans appropriate to the case	
Comp	be able to interpret results of investigations requested and respond appropriately	recognise when results of commonly used radiological investigations are abnormal	
	be able to record results and document procedures legibly and accurately		
	be able to give appropriate medical information		

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when requesting investigations			
know that results should be requested clearly and retrieved promptly			
understand common age appropriate normal ranges and appearances			
be receptive to feedback from 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		
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	ability to safely and effectively manage results of all investigations in the interest of the child, seeking expert advice appropriately	F, CbD and
	be aware of the multi-disciplinary investigation of sudden unexpected death in infancy and childhood		MRCPCH, MSF, LEADEF

	od Clinical Care ledge, Skills and Performance		Assessment Standa	ard 12
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	Assessments
Trai	nees will:			
	Know and understand the pharmacological basis for treatments			
nces	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	and START
Competences	Know the approved indications and justification for prescribing drugs in common paediatric problems Know the pharmacokinetics and pharmodynamics of commonly prescribed drugs			МКСРСН. СЪD а
	Know about the drug interactions of commonly used drugs			ž

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	
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		
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	
Understand the importance of effective strategies for the management of pain			TART
Be able to calculate drugs accurately according to specific dose for weight or age/weight range or on a specific dose/specific area basis	Have a good working knowledge of the use of formularies		MRCPCH. CbD and START
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		MRCPCH.
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	know about procedures for obtaining consent in children and young people for the administration of	know how to explain relevant adverse side effects	

druge		
drugs	drugs	
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
		Know the pharmacology of insulin and physiology of its action

Good Clinical Care - SAFEGUARDING Knowledge, Skills and Performance. Safety and Quality

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	effective skil agencies in s
Trair	nees will:		
pete	understand the effects of family composition, socio-economic factors and poverty on child health		
Compete	be aware of the effect of the media on public perception of health care issues		

Level 3 (ST6-8) cills in advising other safeguarding cases

Assessment Standard 13

MRCPCH, ChD. DOC.

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be aware of the effect of non health policies on child health	
be aware of child health exploitation issues including child prostitution, child labour and children in combat	
be aware of the effects of armed conflict on child health	
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	
be aware of the World Health Organisation and UNICEF	understand the work of the World Health Organisation and UNICEF
be aware of the implications of sustainable development in low income countries	
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
	be able to undertake and document a comprehensive medical assessment of a child looked after by the local authority
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	be aware of the role of medical adviser on adoption of the local adoption panel and know how adoption

MRCPCH, CbD, DOC, ePortfolio and START

looked after children, children with disabilities and over child protection issues	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	
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 of 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	
have attended child protection awareness training	have attended an advanced child protection course for professionals	
Understand what is required when asked to give evidence in court as a witness of fact	be able to appear as a professional witness in civil or criminal proceedings	
understand the need to initiate a safe response where abuse is suspected while treating the family with respect and courtesy at all times		
know the local guidelines and follow up procedures for cases where child abuse is suspected		

MRCPCH, CbD, DOC, ePortfolio and START For detailed competences on specific knowledge and skills in acute clinical presentations please follow link to Section 4

	Assessment Standards
Maintaining Good Medical Practice	14-22
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 also are 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 where 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
	and public health issues in paediatrics

- 18 an understanding of an evidence-based approach to paediatric practice
- 19 an understanding of clinical governance activities and audit in paediatric practice

20 a reflective approach to improvement of professional practice as a paediatrician

- 21 an understanding of equality and diversity in paediatric practice
- 22 knowledge of the law regarding paediatric practice

a commitment to health promotion activities for children and their families

development and refinement of evidencebased clinical paediatrics

participation in clinical governance activities and audit in paediatric practice

a commitment to reflective practice and continuing improvement of practice as a paediatrician

a commitment to an open-minded approach to equality and diversity in their role as a paediatrician

knowledge of the law regarding death, data protection, confidentiality and consent in paediatrics involvement in health promotion activities specific to general paediatrics or a paediatric sub-specialty independent thinking to enable them to challenge guidelines and procedures in paediatrics where appropriate

an application of risk assessment strategies through involvement in the development, evaluation and implementation of policy and clinical governance activities in paediatric practice

effective skills to maintain and develop knowledge and clinical skills required of a specialist in paediatrics

responsibility for ensuring an openminded approach to equality and diversity in the paediatric team

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	
Trair	nees will:				
nces	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	CbD and	
Competer	Know the aetiology and pathophysiology of common and serious childhood conditions			MRCPCH, C	UHIC

See the sub-specialty sections for detailed competences:

<u>Cardiology</u>

Dermatology 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

Royal College of Paediatrics and Child Health

Assessment Standard 14

Safeguarding

	Level 1 (ST1-3) knowledge of common and serious paediatric conditions and their management	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	
n	ees 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		Be able to recognise when both physical and psychological problems are present and when more than one condition may be present	
	Recognise the mental health components of all paediatric illness		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	
	Recognise the effects that school and other social settings may have on childhood illness and vice versa			
			Know about motivational and cognitive behavioural therapies relevant to the treatment of diabetes and endocrine disorders	

See the sub-specialty sections for detailed competences: Cardiology

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Dermatology 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

	intaining Good Medical Practice /ledge, Skills and Performance		Assessment Stand	ard 16
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
Trai	nees will:			
	understand the variations in relationship between physical, emotional, intellectual and social factors and their influence on development and health	DEVELOPMENT	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	KT
Competences	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	CbD and START
Comp	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		MRCPCH, C
	know and understand the principles of screening and monitoring		know about different modes of screening and health promotion strategies	
	Understand the specific health issues, diseases and disorders related to the stages of growth and			

development		
be able to assess and monitor development using appropriate tools		
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
recognise that child neglect or abuse might affect a child's development		understand the impact of other environmental factors on a child's development, mental health and functioning
be able to identify abnormal patterns of development		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
	be able to participate in a multi-disciplinary approach to management	
	EMOTIONAL DEVELOPMENT	
know the factors which influence healthy emotional development		
understand the emotional impact of illness and hospitalisation on children and their families		understand the emotional impact of illness and hospitalisation on children young people and their families and take action to minimise this impact
understand a child's need for opportunities to play		know how to access help in cases where children

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

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 the emotional dimensions of eating disorders	
understand and recognise somatisation disorders	Understand and recognise somatisation disorders and know how to provide initial management and how to access appropriate support
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	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

SOCIAL DEVELOPMENT

know the factors that influence social development

MRCPCH, CbD and START

understand the impact of autistic spectrum disorders on social development		Be able to recognise and understand the impact of autistic spectrum disorders and other organic disorders on social development	
	EDUCATIONAL DEVELOPMENT		
know the factors which influence intellectual development		Demonstrate in all aspects of their practice, an understanding of the vulnerability of a child or young person with learning disabilities	
understand the vulnerability of a child with learning difficulties		Know, understand and be able to compare and contrast medical and social models of disability	
understand the impact of learning difficulties on social and emotional behaviour			and START
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		MRCPCH, CbD and START
	GROWTH AND NUTRITION		
understand the effects of fetal growth restriction on long-term health			

understand the importance of emotional factors in feeding and nutrition, in particular in non-organic failure to thrive	know about the principles and methods of alternative methods of feeding e.g. gastrostomy, nasogastric 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 refeedingknow 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			nd START
Be able to advise a mother about the benefits and risks associated with infant feeding			MRCPCH, CbD and START
be able to advise a mother about appropriate complementary feeding			Σ
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			and START
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	MRCPCH, CbD and START
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	START
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	CbD and
understand normal and abnormal pubertal development and its relationship to growth	understand and assess, under supervision, normal and abnormal pubertal development		MRCPCH,
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 needs of adolescents with regard to their independence and autonomy, 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
		understand and value the roles of members of the multi-disciplinary team in the delivery of a transitional care programme

ensure that young people have access to in- patient and outpatient and other medical services that best meet their needsbe 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 disabilitybe 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 thisbe able to discuss the implications of chronic illness or disability for career optionswhere appropriate and at a negotiated time, be able to raise and agree management of end-of- life issues with young people and their families and record conclusions in medical notesBe able to talk to adolescents effectively about the management of their condition and about sensitive issues such as infertility			
 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 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-life issues with young people and their families and record conclusions in medical notes Be able to talk to adolescents effectively about the management of their condition and about 	patie	ent and outpatient and other medical	
 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- life issues with young people and their families and record conclusions in medical notes Be able to talk to adolescents effectively about the management of their condition and about 	impo toba intim pron relat	ortant health behaviours such as the use of acco, alcohol or recreational drugs and hacy and sexual activities together with the notion of appropriate strategies for these in tion to specific conditions such as asthma,	
 illness or disability for career options where appropriate and at a negotiated time, be able to raise and agree management of end-of- life issues with young people and their families and record conclusions in medical notes Be able to talk to adolescents effectively about the management of their condition and about 	man whei as to	agement of both chronic and acute disease re they want to, and have an understanding b how to best help when the young person	
			H
	able life is	to raise and agree management of end-of- ssues with young people and their families	
	the r	nanagement of their condition and about	

key determinants of child health
ailable outcome measures which nitor the health of a child how they might be used to guide rvice delivery
va pr

know about the organisation of NHS management structures and service networks	
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
Have awareness of current government policies which relate to children	Be familiar with current government policies which relate to children
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
understand the principles of public health needs assessment	
	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
	SCREENING AND SURVEILLANCE

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 organise these tests as necessary
Be able to conduct developmental examinations at different ages	Be able to refer appropriately when required
	HEALTH PROMOTION
Understand the importance of evidence to support health promotion activities	Be able to incorporate health promotion activities in their practice
	Include health promotion messages during the consultation where appropriate
Know the role of health promotion programmes for example to prevent dental decay, smoking, accidents, obesity, sudden infant death	Be able to contribute to health promotion programmes
Be able to advise parents of avoiding risks for children	

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	

MRCPCH, ePortfolio and CbD

Curriculum for Paediatric Training General Paediatrics

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

MRCPCH, ePortfolio and CbD

Be able to advise parents	Be able to advise parents and professionals about commonly referred immunisation problems
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	ntaining Good Medical Practice ledge, Skills and Performance. Quality and Safety		Assessment Stand	lard 18
Standard 18	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	Assessments
Traii	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 from 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	
		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 Stan	Standard 19	
Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)	A N	

Standard 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
Trai	nees will:		
	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
ences	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
Competences	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
	be able to use ICT effectively in clinical practice and audit		
	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	
		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

		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	
be aware of complaints protocols in hospitals	be able to advise families about complaints procedure	be able to handle a complaint
		have a working knowledge of risk assessment and its application to personal, professional, clinical and organisational practice
		understand and take account in their practice of measures to reduce clinical risk
		be able to carry out audit in a range of settings in partnership with all stakeholders in order to identify best practice
		be able to contribute to the implementation of national and local health policy initiatives

	ntaining Good Medical Practice ledge, Skills and Performance. Quality and Safety		Assessment Stand	ard 20
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
Trair	hees will: begun to develop a reflective approach to their	developed a reflective approach to their practice with	have developed a reflective approach to their	
	practice and a commitment to learning and improving their practice through reflection	an awareness of their developing expertise and an ability to learn from previous good practice and clinical errors	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	folio
Competences		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	CbD and ePortfolio
Compe			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, C
		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	
			know how to find, review and maintain relevant knowledge in their speciality in order to	

maintain their fitness to practice

	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
air	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)[22]	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 [22]	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
•	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) [22]	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
	when to seek support and where to find legal and ethical guidelines to support their work [22]		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

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
nees 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.	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.
		the legal and ethical guidelines to support their work and where to find more information when required
		awareness of employment legislation and where to seek further advice on employment matters for various groups of healthcare professionals
		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
		know when in the interest of the child it may be necessary to break confidentiality

understand the importance of post-mortem investigations		understand the purpose of post-mortem examinations and know about procedures
		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 aspects of consent and confidentiality		

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

Assessment Standards 23-25

Teaching, Training, Assessing, Appraising Knowledge, Skills and Performance. Quality and Safety	Assessment Standard 23

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

Trainees will:

ces	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
mpeten		participate in departmental teaching programmes	to be organise and lead a range of learning sessions
Co		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,

MRCPCH, MSF, LEADER, START and ePortfolio

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

Comm	ching, Training, Assessing, Appraising nunication, partnership and teamwork. Knowledge, Skills and mance. Quality and Safety		Assessment Standard 24	
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
Competences Competences	nees will: understand the importance of a positive and constructive approach to mentoring and supervision show a commitment to their continuing professional development and respond positively to requests for enquiries or critical incident reports	understand the importance of a positive and constructive approach to mentoring when giving guidance, support, feedback to trainees under their supervision		MSF, START and ePortfolio

	and to outcomes of reviews, assessments and appraisals of their performance		
		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	
		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
		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	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
Г		workers	workers
acl	show honesty and integrity when contributing to peer reviews of colleagues in teaching and research hing, Training, Assessing, Appraising	workers	
acl	peer reviews of colleagues in teaching and research hing, Training, Assessing, Appraising edge, Skills and Performance		workers Assessment Standard 25
acl	peer reviews of colleagues in teaching and research hing, Training, Assessing, Appraising	Level 2 (ST4-5) an understanding of research methods and methodology and an involvement in research activities and publications	workers
acl	peer reviews of colleagues in teaching and research hing, Training, Assessing, Appraising edge, Skills and Performance Level 1 (ST1-3) an understanding of the need for an ethical and rigorous approach to research	Level 2 (ST4-5) an understanding of research methods and methodology and an involvement in	workers Assessment Standard 25 Level 3 (ST6-8) understanding and application of complex methodological approaches

Assessments

MRCPCH, MSE.

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
	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	

MRCPCH, MSF, START and ePortfolio

demonstrate an understanding of the role of the ethics committees for clinical studies and the process of ethics applications

 Relationships with Patients
 Assessment Standards 26-28

 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 assessment blueprint on page XX

Level 1 (ST1-3)

Level 2 (ST4-5)

Level 3 (ST6-8)

- 26 an understanding of effective communication and interpersonal skills with children of all ages
- 27 empathy and sensitivity and skills in engaging the trust of and consent from children and their families
- 28 understanding of listening skills and basic skills in giving information and advice to young people and their families

a commitment to effective communication and interpersonal skills with children of all ages

improving skills in building relationships of trust with children and their families

increasing confidence in giving advice to young people and their families

effective strategies to engage children in consultations and in the management of their care

effective skills in conveying and discussing difficult information, including death, bereavement, with young people and their families

effective skills in giving information and advice to young people and their families in common and complex cases

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

Level 1 (ST1-3) an understanding of effective a communication and interpersonal skills and with children of all ages age Level 2 (ST4-5)

a commitment to effective communication and interpersonal skills with children of all ages Assessment Standard 26

Level 3 (ST6-8)

effective strategies to engage children in consultations and in the management of their care

	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	
L			have developed a wide range of effective age- appropriate communication skills specific to their work with babies, children, young people and their families	d Paed CCF
	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	MRCPCH, MSF, MiniCeXLEADER, CbD, ACAT and Paed CCF
•	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	MiniCeXLEAU
	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	RCPCH, MSF,
	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	L	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	Σ
	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	MRCPCH,

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 relative	
	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

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 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

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

	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
	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
air	nees will:		,
	know the local and national guidelines for obtaining informed consent	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		
L			Be able to recognise, acknowledge and manage

MRCPCH, MSF, MiniCeX, LEADER, CbD, ACAT and paed CCF

	tionships with Patients unication, partnership and teamwork. Maintaining trust		different level of parental anxiety be sensitive to the effects of stigma on children and families in relation to medical conditions Assessment Stand	ard
	Level 1 (ST1-3) understanding of listening skills and basic skills in giving information and advice to young people and their families	Level 2 (ST4-5) increasing confidence in giving advice to young people and their families	Level 3 (ST6-8) effective skills in giving information and advice to young people and their families in common and complex cases	
in	ees 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	
	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	4
-		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	be able to recognise indicators of stress or mental health problems in family members and communicate appropriately with relevant professionals be able to liaise with parent support and self- help groups when necessary	MAPCPCH MASE Mimicay LEADEP

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		
		Be able to teach children and parents about basic carbohydrate counting and insulin adjustments	Paed CCF
		Be able to give advice about diet and exercise to the child, family and other health professionals	CbD and
		Be able to give advice on the management of hypo- and hyperglycaemia	X, LEADER,
		Be able to advise child and family about hypo- unawareness	, MiniCeX,
		be able to advise the family and the team on diabetes monitoring	MRCPCH, MSF,

Working with Colleagues

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

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Assessment Standards 29 - 33

Curriculum for Paediatric Training General Paediatrics

	children

	king with Colleagues unication , partnership and teamwork		Assessment Standa	rd 29
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	Assessments
Competences	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	ALL (exc Paed CCF)

Working with Colleagues	Assessment Standard 30
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
Trai	inees will:		
ences	Demonstrate the ability to work effectively in multi- disciplinary teams and with colleagues from a wide range of groups	have experience of working with multi-agency teams 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	be able to work effectively in multi-agency 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
Compete	Have the ability to take on differing and complementary roles within the different communities of practice within which they work, in hospitals, general practice and in the community, in social 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
	Understand the importance of effective team work with colleagues in multi-disciplinary teams to ensure		be able to work effectively in multi- disciplinary teams and with colleagues from a

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ALL (exc Paed CCF)

consistency and continuity and a holistic approach to the treatment and care of children and young		wide range of professional groups
people		Be able to work with and within the multi- disciplinary children's diabetes team
	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
		sustained Assessment Standard 31
munication , partnership and teamwork Level 1 (ST1-3)	Level 2 (ST4-5)	Assessment Standard 31 Level 3 (ST6-8)
Drking with Colleagues Imunication , partnership and teamwork Level 1 (ST1-3) Effective time management skills	Level 2 (ST4-5) Effective leadership and management skills in clinical and non-clinical settings	Assessment Standard 31
munication , partnership and teamwork Level 1 (ST1-3)	Effective leadership and management skills	Assessment Standard 31 Level 3 (ST6-8) Effective managerial skills in taking on positive managerial role to support

Competences

be able to prioritise tasks in personal and professional contexts for example in medical emergencies

themselves and for others in prioritisation and delegation

be able to think clearly and to prioritise in clinical decision making and practice

ALL (exc Paed CCF)

organise, prioritise and delegate and be able

to help others develop these skills

be able to delegate duties appropriately to colleagues whom they supervise	demonstrate safe and effective leadership through organisation of team work and prioritising appropriately
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
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
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 clinica 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

ALL (exc Paed 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

Demonstrate safe and effective leadership through organisation of team work and prioritisation

omn	rking with Colleagues nunication, partnership and teamwork. Knowledge, Skills and rmance. Safety and Quality		Assessment Standard 3
Stallual u 32	Level 1 (ST1-3) Effective handover, referral and discharge procedures in paediatrics	Level 2 (ST4-5) Effective skills in ensuring handover, referral and discharge procedures in paediatrics	Level 3 (ST6-8) Effective leadership skills in the organisation of paediatric team- working and effective handover
ai	nees will:		
competen	Ensure effective hand-over procedures and clear communications with colleagues to ensure the continuing good medical care of patients	Manage effective hand-over procedures and clear communications with colleagues to ensure the continuing good medical care of patients	be able to lead handover effectively and in a timely way in difficult circumstances
	Ensure the effective discharge procedures to their family, community, social and primary care services		Be able to take on a leadership role in a multi disciplinary team when appropriate for example representing the health needs if a

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DOC, HAT,

	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	
have developed confidence to make decisions within a team	be able to plan transitional care and referral of the young person to clinical genetics at an appropriate time
know the objectives of a paediatric follow up	
	know how to refer appropriately to

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

W	orking with Colleagues	Assessment Standard 33
Con	munication, partnership and teamwork. Safety and Quality	

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

Trainees 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 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 of 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		l ePortfolio
		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		R, START and
ompetences			knowledge and understanding of systems of management and decision making in health care organisations		MRCPCH, , MSF, CbD, LEADER, START and ePortfolio
			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		MRCPCH, , MS
			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	-	MRCPCH, ,

	participate and contribute to organisational decision making process
have some familiarity with the roles of allied health professionals and other agencies in the support of children and families	know how to access and understand 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	

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)

34 Ethical personal and professional practice in providing safe clinical care

- 35 Reliability and responsibility in ensuring their accessibility to colleagues and patients and their families
- 36 An understanding of the importance of self-awareness and a responsible approach to personal health, stress and well-being

Level 2 (ST4-5) Sound ethical personal and professional practice in providing safe clinical care

Continued responsibility and accessibility to colleagues, patients and their families

A consistent approach to personal health, stress and well-being

Level 3 (ST6-8) Exemplary professional conduct so as to act as a role model to others in providing safe clinical care Responsibility for ensuring their own reliability and accessibility and that of others in their team

Effective skills in ensuring their own responsible approach to personal health, stress and well being and that of others

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Assessment Standards 34 - 36

Prok Maint	Dity aining Trust. Safety and Quality		Assessment Standard 34
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
Trair	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
	know when and where to ask for help, support and supervision		
Competences	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	
Comp	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		<u></u>

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

Probity Aaintaining Trust		Assessment Standard 3
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
Trainees 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

MSF and ePortfolio

Pro Maint	Dity aining Trust. Safety and Quality		Assessment Standard 36
Standard 36	Level 1 (ST1-3) An understanding of the importance of self-awareness and a responsible approach to personal health, stress and well-being	Level 2 (ST4-5) A consistent approach to personal health, stress and well-being	Level 3 (ST6-8) Effective skills in ensuring their own responsible approach to personal health, stress and well being and that of others
Traiı	nees will:		
es	show a commitment to continuing professional practice and to respond positively to requests for enquiries and incident reports and to outcomes of reviews, assessments and appraisals of their performance		
Competences	take responsibility for their own obligation for health and well-being, safety and welfare issues		
Com	show an understanding of the importance of ensuring the healthy balance between professional and domestic priorities		
	demonstrate a responsibility for their own health in so far as it might affect the welfare of safety of patients		effective skills in ensuring others in their team approach their health, stress and well-being responsibly

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SECTION 3 – SUB-SPECIALTY SPECIFIC COMPETENCES IN PAEDIATRIC DIABETES AND ENDOCRINOLOGY

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 taking into	✓		
account parental stature and pubertal status			
Be able to assess accurately pubertal stages of development	✓		
Know about changes to insulin and steroid therapy in children with diabetes and hypoadrenalism during acute illness or	\checkmark		
perioperatively			
Understand the endocrine complications of other diseases	✓		
Know about the embryology of the endocrine system			✓
Know about the embryology of the genital and molecular basis for sexual differentiation			✓
Know about carbohydrate, fat and amino acid metabolism and their enzymatic and endocrine regulation			✓
Know about the molecular aspects of hormonal regulation			✓
Know about the measurement of circulating hormones			✓
Know about the genetic control of hormone formation			✓
Know about the mechanism of action of hormones that act as transcription regulatory factors			✓
Know about the mechanism of action of hormones that act at the cell surface			✓
Know about the pathogenesis of endocrine tumours			✓
Know about autoimmunity and the endocrine system			✓
Be familiar with the work of the specialist endocrine and genetics lab and the principles of good laboratory practice			✓
Have practical experience in the performance of hormone assays and/or molecular biological techniques			✓
Be aware of the significant limitations of any assay			✓
Be familiar with the use of hormone reference ranges at different ages and appreciate their diagnostic implications			✓
Be familiar with the importance of sample collection and the limitations of commonly used endocrine tests			✓
Be able to evaluate biochemical, radiological and other tests used in endocrine practice			✓
Be able to administer safely and interpret investigations for endocrine disorders particularly anterior and posterior			✓
pituitary function tests			
Be familiar with adult endocrine diseases that can present in childhood, for example Multiple Endocrine Neoplasia			✓
syndromes			
Know how to monitor, investigate and manage the late effects of oncological therapies			✓

abetes mellitus	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Know the genetics, immunology, epidemiology and aetiology of type 1 diabetes mellitus			✓
Know the predictors of type 1 diabetes mellitus and about intervention studies			✓
Know the principles and practice of carbohydrate counting			✓
Understand the psychological effects of insulin and insulin deficiency			✓
Be able to adjust insulin in children with diabetes during acute illness or perioperatively			✓
Know the association between type 1 diabetes and other disease for example polyendocrine syndromes			✓
Know about lipid disorders associated with diabetes			✓
Know about glycated protein analysis and understand its significance in evaluating diabetes control			✓
Be able to detect early signs of complications in cases of type 1 diabetes			✓
Be able to interpret tests to detect complications in type 1 diabetes			✓
Understand the association of insulin resistance, obesity and type 2 diabetes			✓
Know about diabetes associated with other diseases, for example cystic fibrosis and mitochondrial disorders			✓
Know about investigation and treatment of maturity onset diabetes of the young			\checkmark
Know about the treatment of transient neonatal diabetes			\checkmark
Be able to manage type 2 diabetes and diabetes associated with cystic fibrosis			✓

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		✓		
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		✓		
Be able to explain this condition to parents		✓		
Be able to liaise with the children's diabetes team		✓		
Be able to give basic advice about diet and exercise		✓		

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	✓	

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

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 diabetic ketoacidosis according to guidelines that have been agreed nationally and internationally

Know about he evidence base supporting the ketoacidosis management guidelines

Be able to manage potential complications in cases of diabetic ketoacidosis, including cerebral oedema

✓		
\checkmark		
	\checkmark	
		✓
		✓
		✓

oglycaemia	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Know the causes, complications and treatment in the neonatal period and beyond	\checkmark		
Know that blood glucose is an urgent investigation in patients with impaired conscious level	\checkmark		
Be aware of the clinical features which would suggest hypopituitarism or adrenal insufficiency	\checkmark		
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	\checkmark		
Be able to assess whether any change to insulin treatment is needed to prevent recurrence in diabetic patients	\checkmark		
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		✓	
Know about counter-regulatory hormone response to hypoglycaemia			✓

Neonatal thyrotoxicosic

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

Ambiguous genitalia

mbiguous genitalia	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Be aware of the causes of this presentation	\checkmark		
Understand the features of congenital adrenal hyperplasia and its early management	\checkmark		
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		✓	
Be familiar with the endocrine and radiological diagnostic tests used			✓
Be familiar with the role of antenatal diagnosis and treatment of CYP21 deficiency			✓
Be able to counsel parents about the differential diagnosis of ambiguous genitalia and the management plan			✓
Be able to recognise which cases require referral			✓

Adolescent Gynaecomastia

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

Know the causes of gynaecomastia		✓
Know how and when to investigate		✓

Adrenal Disorders

Be able to recognise Cushings syndrome, initiate diagnostic tests and outline management and referral criteria	
Be able to recognise, initiate diagnostic tests and outline management and referral criteria where required for hypo- and hyper-adrenalism	
Be able to adjust steroid therapy in children with hypoadrenalism during acute illness or peri-operatively and explain	
this to families	

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po-						✓	
olain						√	
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		1 4 10	=4 -01	1 - 1 -	\		~ `

Level 2 (ST4-5)

Level 3 (ST6-8)

Level 1 (ST1-3)

ayed and early puberty	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Know the causes of early and late puberty	✓		
Know the causes and possible investigation of early and late puberty		✓	
Recognise when the cause may be pathological rather than physiological	✓		
Know the central and peripheral causes and the investigation of premature sexual maturation			✓
Know the causes and investigation of delayed or absent pubertal development			✓
Be able to recognise te condition, initiate appropriate diagnostic tests and outline management and referral criteria			✓
Be able to monitor and treat delayed puberty to full maturity			✓
the and the world discussion	Lovel 1 (ST1 2)		$ a_{1}a_{2}\rangle$

Goitre and thyroid disorders

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			\checkmark	
Be able to diagnose and manage thyrotoxicosis				✓
Know how to investigate thyroid nodules				✓

Hirsutism, Polycystic ovarian disease and Adrenarche	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Know the differential diagnosis of hirsutism in adolescent girls and how to investigate it			✓
Be able to recognise premature adrenarche, initiate diagnostic tests and outline management			✓
Be familiar with the relationship between adrenarche and polycystic ovarian disease (PCOS)			✓
Be able to diagnose and manage PCOS			✓

Metabolic Bone Disease and Calcium disorders

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

Recognise, initiate diagnostic tests and outline management and referral criteria			✓
esity	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
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		✓	

Polyuria and polydipsia	Level 1 (ST1-3)	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		\checkmark	
Be able to select patients who may require investigation	\checkmark		
Be able to advise parents about habit drinking	\checkmark		
Be able to select patients who may require investigation and initiate this		\checkmark	
Be able to manage diabetes insipidus			✓
Post-operative neuro-surgical patients	Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
Know about the occurrence of diabetes insipidus and cerebral salt wasting in patients			✓
Know how to manage pituitary disease pre- and post-operatively			✓
Be able to recognise and initiate management of fluid imbalance			✓

Short & tall stature	 Level 1 (ST1-3)	Level 2 (ST4-5)	Level 3 (ST6-8)
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	✓		
Be familiar with the common syndromic causes of short stature			✓

Know the guidelines on the use of growth hormone, including the reinvestigation of those who have reached final		✓
height, and the use of growth hormone in the adult		
Be able to diagnose, screen and manage the care of girls with Turner's syndrome		✓
Be able to score a bone age		✓

Curriculum for Paediatric Training General Paediatrics

SECTION 4 - MAINTENANCE

Cardiology

GENERAL COMPETENCES

	Level 1 (ST1-3)	Level 2 (ST4-5)
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		✓
Be able to identify common ECG abnormalities		✓

ACUTE PRESENTATIONS

Cyanosis

inosis	Level 1 (ST1-3)	Level 2 (ST4-5)
Know the normal fetal circulation and transitional changes after birth	\checkmark	
Know the anatomy of the common causes of cyanotic heart disease	\checkmark	
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		✓

Heart Failure, including cardiac conditions which present with shock	Level 1 (ST1-3)	Level 2 (ST4-5)
Understand the causes of heart failure	✓	
Be able to initiate appropriate investigations and treatment	✓	
Arrhythmia		Level 2 (ST4-5)
Know the causes of arrhythmias	\checkmark	
Be able to recognise common dysrhythmias on ECG	\checkmark	
Be able to initiate emergency treatment in arrhythmias such as tachycardia	\checkmark	
Infective Endocarditis	Level 1 (ST1-3)	Level 2 (ST4-5)

mee			
	Know when prophylaxis against endocarditis is indicated	\checkmark	
	Know the causes of endocarditis	\checkmark	

Be able to advise parents about prophylaxis against endocarditis	\checkmark	
Be able to initiate appropriate investigations and treatment	\checkmark	
Be able to recognise the possibility of endocarditis		\checkmark

OUTPATIENT PRESENTATIONS

Heart murmur

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

Hypertension

ertension	Level 1 (ST1-3)	Level 2 (ST4-5)
Know and understand the causes of hypertension	\checkmark	
Be able to measure and interpret correctly blood pressure measurements at different ages	\checkmark	
Recognise the importance of examining femoral pulses in all children	\checkmark	

Palpitations

lpi	tations	Level 1 (ST1-3)	Level 2 (ST4-5)
	Know the cardiac and non cardiac causes of palpitations	\checkmark	
	Be able to initiate appropriate investigations	\checkmark	

Syncope

iic	ope	Level I (JII-J)	Lever 2 (314-3)
	Know the cardiac causes of syncope	✓	
	Be able to initiate appropriate investigations including appropriate ECG analysis	✓	
	Be able to differentiate syncope from seizures		\checkmark

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

Dermatology

GENERAL COMPETENCES

	Level 1 (ST1-3)	Level 2 (ST4-5)
Be able to describe accurately any rash	✓	
Recognise and known when to refer common birth marks and haemangiomas	✓	
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	✓	
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	✓	
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		✓
Know the common causes of hair loss and hypertrichosis		✓

ACUTE PRESENTATIONS

Skin Failure e. g toxic epidermal necrolysis, staphylococcal scalded skin syndrome and epidermolysis bullosa		Level 1 (ST1-3)	Level 2 (ST4-5)
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		\checkmark	
Recognise when to consult dermatology and ophthalmology specialists			\checkmark

Skin Infections	Level 1 (ST1-3)	Level 2 (ST4-5)
Know the causal bacteria, features, complications and management of cellulitis including periorbital cellulitis	\checkmark	
Know the features and management of infected eczema and eczema herpeticum	\checkmark	
Recognise and be able to treat scabies, pediculoses, and common viral and fungal skin infections	\checkmark	
Recognise the features of and manage infected eczema and eczema herpeticum		\checkmark
Recognise when to consult ophthalmology and ENT specialists		✓

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

Erythematous rash and fever

ythematous rash and fever	Level 1 (ST1-3)	Level 2 (ST4-5)
Know the causes of fever and an erythematous rash	√	
Be aware of rare but serious causes e.g. toxic shock syndrome	\checkmark	
Be able to recognise Kawasaki syndrome and to institute appropriate treatment	\checkmark	
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		√

OUTPATIENT PRESENTATIONS

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

Gastroenterology and Hepatology

GENERAL COMPETENCES

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

ACUTE PRESENTATIONS

Acute abdominal pain

Acute		Level 1 (ST1-S)	Level 2 (314-3)	
	Know the causes of acute abdominal pain	\checkmark		
	recognise conditions which require urgent intervention e.g. intussusception	✓		
	Recognise the need to consider acute appendicitis in very young children		\checkmark	
	Recognise signs of pain in an infant or small child		\checkmark	
Acute	e diarrhoea and/or vomiting	Level 1 (ST1-3)	Level 2 (ST4-5)	

Acute diarrhoea and/or vomiting

Know the causes the symptoms of acute diarrhoea and/or vomiting	\checkmark	
Be familiar with local isolation policies	\checkmark	
Know about oral and intravenous fluid therapy	\checkmark	
Understand the scientific principles for oral and intravenous fluid therapy		
Recognise features in the presentation which suggest serious pathology e.g. haemolytic uraemic syndrome, appendicitis, intestinal	\checkmark	
obstruction		
Implement local isolation policies		

Jaundice 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 Upper and lower gastrointestinal bleeding Level 1 (ST1-3) Level 2 (ST4-5) Know the causes of upper and lower gastrointestinal bleeding \checkmark ✓

Understand the potentially life threatening nature of this condition

 \checkmark

✓

Level 2 (ST4-5)

 $100011(ST1_3)$ $100012(ST1_5)$

Assess the severity of the condition	✓	
Institute appropriate emergency treatment	✓	
Recognise features in the presentation which suggest serious pathology		\checkmark
Abdominal distension		Level 2 (ST4-5)
Know the causes of abdominal distension	✓	
Initiate investigation and seek surgical opinion when required		

Acute liver failure	Level 1 (ST1-3)	Level 2 (ST4-5)
Be familiar with the causes of acute liver failure	\checkmark	
Be familiar with the complications of acute liver failure	\checkmark	
Know the management of paracetamol poisoning	\checkmark	
Know the causes of acute liver failure		√
Recognise the need to discuss the case with the liver unit early	\checkmark	
Be able to assess the severity and complications of this condition		\checkmark
Be able to initiate appropriate resuscitation and liaise early with the paediatric liver unit		\checkmark

ngenital abnormalities	Level 1 (ST1-3)	Level 2 (ST4-5)
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	\checkmark	
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		✓

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

OUTPATIENT PRESENTATIONS

Level 2 (ST4-5)

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

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

Constipation w	ith or wit	hout soilin	g

nstipation with or without soiling	Level 1 (ST1-3)	Level 2 (ST4-5)
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		\checkmark
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		\checkmark

Dysphagi

Dysp	hagia	Level 1 (ST1-3)	Level 2 (ST4-5)	
	Know the causes of dysphagia	\checkmark		
	Be able to distinguish between organic and functional dysphagia	\checkmark		

Malabsorption

Know the causes of malabsorption including celiac disease and cystic fibrosis and its consequences		\checkmark	
Understand the principles of treatment of the different types of malabsorption		\checkmark	
Recognise the role of the dietician and to liaise appropriately		\checkmark	
Be able to explain and initiate investigations, nutritional assessment, dietary principles and liaise appropriately with the dietician			

Malnutrition	Level 1 (ST1-3)	Level 2 (ST4-5)
Know the causes of malnutrition including organic and non-organic causes	√	
Be familiar with the consequences of malnutrition	√	
Know the principles of enteral and parenteral nutrition support	√	
Be able to assess nutritional status	√	
Be able to initiate investigations to establish the diagnosis and to detect nutritional deficiencies	√	

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

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

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

Level 2 (ST4-5)

Iron deficiency anaemia	Level 1 (ST1-3)	Level 2 (ST4-5)
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	\checkmark	
Be able to counsel parents about preventing dietary iron deficiency		\checkmark

Genetics and Dysmorphology

GENERAL COMPETENCES

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

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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

\checkmark
\checkmark

Haematology and Oncology

GENERAL COMPETENCES

	Level 1 (ST1-3)	Level 2 (ST4-5)
Have the knowledge and skills to be able to assess patients presenting with haematological or oncological 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	
Know the principles of cancer treatment	✓	
Be aware of the short and long term side effects of chemotherapy and radiotherapy	\checkmark	
Be familiar with the indications and complications of bone marrow transplantation	✓	
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 haematological or oncological		✓
presentations in inpatient and outpatient settings		
Work effectively with specialist nurses and members of palliative care teams		√
Know the short and long term side effects of chemotherapy and radiotherapy and be able to explain the common ones		\checkmark
Know about local policies for intrathecal cytotoxic therapy		✓

ACUTE AND OUTPATIENT PRESENTATIONS

Anaemia

Know and understand the causes of anaemia

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Level 2 (ST4-5)

Level 1 (ST1-3)

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		\checkmark
Be able to manage sickle cell crisis, including safe administration of fluid and analgesia		\checkmark
ycythaemia	Level 1 (ST1-3)	Level 2 (ST4-5)
Know the causes and treatment of polycythaemia in the newborn period	\checkmark	

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 2 (ST4-5)
\checkmark

Neutropaenia		Level 2 (ST4-5)
Understand the significance of fever in a neutropaenic patient	\checkmark	
Understand the differing risks of neutropaenia in different conditions and treatment regimens		\checkmark
Be able to manage febrile neutropaenia with guidance	✓	
Be able to manage febrile neutropaenia, following local network guidelines and recognising when to liaise with specialist services		\checkmark

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

Other haemorrhage due to coagulopathy

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Level 2 (ST4-5)

Level 1 (ST1-3)

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

Leukaemia

kaemia	Level 1 (ST1-3)	Level 2 (ST4-5)
Be aware of the different types of leukaemia and of their prognoses	\checkmark	
Recognise and understand the clinical manifestations of leukaemia	✓	
Know the different types of leukaemia and of their prognoses		\checkmark
Be able to recognise the immediate dangers of leukaemia to the newly presenting child	✓	
Be aware of national trials and protocols	\checkmark	
Be able to recognise and initiate investigations to diagnose leukaemia		\checkmark
Be able to follow local and national protocols in treating leukaemia and associate infections		\checkmark

Lym	phomas	Level 1 (ST1-3)	Level 2 (ST4-5)
	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		✓
	Be aware of staging and protocols for treatment	✓	

Other solid tumours		Level 2 (ST4-5)
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	\checkmark	

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

Infection, Immunology and Allergy

GENERAL COMPETENCES

	Level 1 (ST1-3)	Level 2 (ST4-5)
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	
Understand the rationale for prescribing common antimicrobials	✓	
Know the indications for antimicrobial prophylaxis	\checkmark	
Understand the mechanisms of drug resistance	\checkmark	

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Understand nosocomial infections and the basic principles of infection control	✓	
Be aware of the policies for notifying communicable diseases	✓ <i>✓</i>	
Understand the pathophysiology and the principles of treatment of allergic and autoimmune disorders	✓	
Understand the classification of immunodeficiencies	✓ <i>✓</i>	
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		√
Take responsibility for notifying communicable diseases		√
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		✓

ACUTE PRESENTATIONS

Septic shock	Level 1 (ST1-3)	Level 2 (ST4-5)
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	\checkmark	
Be able to initiate and lead immediate management of early and advanced features of septic shock		\checkmark
Be able to liaise effectively with anaesthetic and PICU staff and manage patient until transfer team takes over		\checkmark

Fever of unknown origin	Level 1 (ST1-3)	Level 2 (ST4-5)
Know the possible causes of fever of unknown origin	\checkmark	
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		Level 2 (ST4-5)

a	phylaxis	
	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	

	v
\checkmark	
	\checkmark
Level 1 (ST1-3)	Level 2 (ST4-5)
\checkmark	
\checkmark	
\checkmark	

 \checkmark \checkmark

community teams

OUTPATIENT PRESENTATIONS

Recurrent infections

		Lever 2 (314-3)
Understand why children suffer recurrent infections	\checkmark	
Be aware of conditions which predispose to infection	\checkmark	
Understand why children suffer recurrent infections and know which conditions predispose to infection		\checkmark
Recognise features in the presentation which suggest serious underlying pathology	\checkmark	
Recognise and investigate appropriately features in the presentation which suggest underlying pathology		\checkmark

Food intolerance and other allergies

	Know the common offending foods	\checkmark	
	Be aware of the investigations that are available and of their limitations	\checkmark	
	Know the features of cows' milk protein intolerance and its management	\checkmark	
	Know the foods that can trigger IgE – mediated reactions		✓
	Understand the investigations that are available and of their limitations		✓
	Know the features of cows' milk protein intolerance and its management		✓
	Understand the mechanisms of IgE and non IgE food allergy, food intolerance due to pharmacological effects of food and food		\checkmark
	intolerance due to enzyme deficiencies		
	Recognise the potential serious nature of food allergy		✓
	Advise on the appropriate use of adrenalin		✓
	Be able to distinguish allergy from intolerance and be able to explain to parents		✓
Imn	nunisation	Level 1 (ST1-3)	Level 2 (ST4-5)
		Level 1 (311-3)	Level 2 (314-3)
	Understand passive and active immunisation	\checkmark	
	Understand the principles and the rationale behind the national immunisation policy for children in Britain	\checkmark	

Be able to advise parents about immunisations

Know the indications, contraindications and complications of routine childhood immunisations

Metabolic Medicine

GENERAL COMPETENCES

	Level 1 (ST1-3)	Level 2 (ST4-5)
Recognise the clinical and biochemical features of electrolyte and acid base disturbances	√	
Know the common clinical presentations of metabolic disease including encephalopathy, neurodevelopmental regression, muscle	√	
weakness, visceromegaly and failure to thrive		
Know when it is appropriate to perform metabolic investigations in neonates and children	\checkmark	
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	\checkmark	

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Level 1 (ST1-3) Level 2 (ST4-5)

Level 2 (ST4-5)

Level 1 (ST1-3)

 \checkmark

Be able to interpret commonly used investigations and understand how these differentiate between metabolic disorders including those that result in cot death	✓	
Know about the common biochemical findings in an acutely ill newborn or child presenting with metabolic disease including hypoglycaemia, hyperammonaemia or metabolic acidosis	✓	
Understand when it is appropriate to investigate, and which investigations to perform, in a neonate or child with visceromegaly	\checkmark	
Know the causes of metabolic bone disease and investigations to differentiate between the causes	\checkmark	
Know when it is appropriate to consider porphyria in a child presenting with abdominal pain	✓	
Understand the principles of dietary, vitamin and pharmacological treatment of metabolic disorders	✓	
Be aware of those metabolic disorders which are vitamin responsive or responsive to pharmacological treatment	✓	
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 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		✓
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		✓

Musculo-Skeletal medicine

GENERAL COMPETENCES

	Level 1 (ST1-3)	Level 2 (ST4-5)
know the differential diagnosis of musculoskeletal presentations including inflammatory, non-inflammatory and idiopathic causes	✓	
Take an appropriate history, musculoskeletal examination and assessment	\checkmark	
Recognise when to request the opinion of paediatric rheumatologists or orthopaedic surgeons	✓	
Recognise features in the clinical presentation or investigation findings which suggest serious pathology, e.g. inflammation,	~	
malignancy, infection and vasculitis		

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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

ACUTE PRESENTATIONS

Joint swelling

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

Musculoskeletal nain

nusculoskeletal palli	Level I (SII-S)	Level 2 (314-3)
Know the varied causes of musculoskeletal pain	\checkmark	
Be aware of referred pain	✓	
Know when to refer for a specialist opinion	\checkmark	
Know the varied causes of musculoskeletal pain including referred pain and features that suggest different causes		\checkmark
Perform a musculoskeletal examination	\checkmark	
Perform a musculoskeletal examination including a screening and appropriate regional examination		✓

Limp		Level 1 (ST1-3)	Level 2 (ST4-5)
	Know the differential diagnosis of a limp at different ages and clinical presentations	\checkmark	

Limb pain		Level 2 (ST4-5)
Know the differential diagnosis of limb pains	\checkmark	
Be aware of the clinical features of benign hypermobility and non-benign hypermobility (e.g. Marfans syndrome)	\checkmark	
Be able to distinguish between inflammatory and non-inflammatory conditions	\checkmark	
Be able to assess joint laxity		\checkmark

\checkmark	
\checkmark	
\checkmark	
\checkmark	
✓	
\checkmark	
	\checkmark
	\checkmark
	\checkmark

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

Level 1 (ST1-3) Level 2 (ST4-5)

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

Be able to distinguish between inflammatory and non-inflammatory conditions and recognise features that suggest serious pathology

Back pain and neck pain

Back pain and neck pain	Level I (SII-S)	Level 2 (314-3)
Know the varied causes of musculoskeletal pain	✓	
Be aware of referred pain	\checkmark	
Know when to refer for a specialist opinion	✓	
Know the causes of back/neck pain		\checkmark
Know the common causes of Torticollis		✓
Be able to recognise scoliosis		\checkmark
Leg alignment (normal variants)	Level 1 (ST1-3)	Level 2 (ST4-5)
eg angriment (normal variants)		Level 2 (314-5)

Be aware of normal patterns of leg alignment and foot posture (bow legs, knock knees, in-toeing and flat feet) at different ages	\checkmark	
Be aware of indications for investigation and when specialist opinion is required	\checkmark	
Know the predisposing factors and presentation of rickets	\checkmark	
Know normal patterns of leg alignment and foot posture (bow legs, knock knees, in-toeing and flat feet) at different ages		√
Be able to recognise the clinical presentation and radiological features of rickets		\checkmark
lti-system disease	Level 1 (ST1-3)	Level 2 (ST4-5)

Be able to distinguish between inflammatory and non-inflammatory conditions

Neonatology

GENERAL COMPETENCES

Be able to examine the newborn baby appropriately and with sensitivity

~

Be able to perform an accurate assessment of the baby at birth	✓	
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	✓	
Know and understand the effects of antenatal and perinatal events on outcome	✓	
Know and understand the pathophysiology of the effects of prematurity	✓	
Be able to recognise and outline the management of some common disorders	✓	
Be able to initiate diagnostic tests for common disorders	✓	
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	✓	
Understand the principles of prescribing for newborn babies and breastfeeding mothers	✓	
Understand the life-threatening nature of some of these situations and when to call for help or look for personal support	✓	
Know when and how babies are transferred for specialist levels of intensive care	✓	
Understand the implications for families of babies with neonatal problems	✓	
Begin to develop strategies to communicate sympathetically with parents	✓	
Understand the long-term sequelae of prematurity and begin to recognise those at risk	✓	
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,		\checkmark
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		\checkmark
Be skilled in practising and be able to teach basic practical procedures		\checkmark
Be able to prescribe safely for newborn babies and breastfeeding mothers		\checkmark
Recognise the life-threatening nature of some of these situations and the need to call for help or look for 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	\checkmark
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	\checkmark

Birth depression

th depression	Level 1	(ST1-3)	Level 2 (ST4-5)
Know the causes and possible outcomes	· · ·		
Understand the principles of resuscitation	``	(
Know the criteria necessary before perinatal asphyxia can be diagnosed	``	(
Understand the physiological effects of a hypoxic-ischaemic insult	١	(
Know the statistics of the outcomes of birth depression			✓
Understand the physiology of resuscitation and the responses to it			✓
Understand the long term implications of hypoxic-ischaemic damage			\checkmark
Be able to initiate resuscitation using bag and mask ventilation and cardiac compressions	١		
Can intubate term babies and have had supervised experience of intubating preterm babies	۰	(
Recognise features which suggest significant consequences	١		
Be able to provide and lead basic and advanced resuscitation, including intubation			✓
Be able to intubate pre-term babies without direct supervision			\checkmark
Be able to recognise and initiate management to prevent secondary damage			✓

ratory Distress (acute and chronic)	Level 1 (ST1-3)	Level 2 (ST4-5)
Understand the common causes of respiratory distress	✓	
Know the relevant investigations, understand the principles and complications of ventilation	✓	
Know the guidelines for surfactant therapy	✓	
Understand the pathophysiology and management of chronic lung disease	✓	
Understand the contribution of patent ductus arteriosus to respiratory compromise	✓	
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		✓
Have seen echocardiography where patent ductus arteriosus is diagnosed		\checkmark
Be able to interpret chest radiographs	✓	
Be able to administer surfactant	√	
Be able to initiate respiratory support	✓	
Be able to suspect and diagnose pneumothorax	✓	
Recognise when to request help from a medical or nursing colleague	✓	
Obtain, interpret and act appropriately on blood gas results	✓	
Be able to insert umbilical arterial and venous lines	✓	
Be able to identify signs suggestive of patency of the duct and describe management options	✓	
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		Level 2 (ST4-5)
Understand the anatomy and implications of cyanotic congenital heart disease	\checkmark	
Understand the pathophysiology of persistent pulmonary hypertension and know about treatment	✓	
Be able to suspect the diagnosis and initiate appropriate investigations	\checkmark	
Be able to make a likely diagnosis and initiate appropriate investigations and treatment		\checkmark

Hypotension	Le	evel 1 (ST1-3)	Level 2 (ST4-5)
Understand the causes and effects		\checkmark	
Understand the rationale for different treatment options		\checkmark	
Be able to interpret and act on blood pressure measurements		\checkmark	

-uterine growth restriction and other nutrition problems	Level 1 (ST1-3)	Level 2 (ST4-5)
Understand the importance of breastfeeding	\checkmark	
Know the causes of intra-uterine and postnatal growth failure	\checkmark	
Understand the principles of parenteral nutrition	\checkmark	
Know about risk factors for necrotising enterocolitis	\checkmark	
Understand the importance of nutrition in sick babies		✓
Know about the signs, symptoms and complications of necrotising enterocolitis		√
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		✓
Be able to recognise and begin to address poor growth		✓
and blood product therapy	Level 1 (ST1-3	Level 2 (ST4-5)
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		✓
atal seizures or abnormal neurological status including the floppy baby	Level 1 (ST1-3)	Level 2 (ST4-5)
Understand the aetiology and prognosis of abnormal neurological status	√	
Know about periventricular haemorrhage and leucomalacia	✓	
Know about the management of post-haemorrhagic hydrocephalus	✓	
Know the possible causes and effects of seizures		✓
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	· · · · · · · · · · · · · · · · ·	
De able to recognise the basic reatures of clainal ultrasound stails		

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Have had some experience of performing cranial ultra-sound	\checkmark
Be able to make a likely diagnosis and initiate management of seizures	\checkmark
Have experience of how bad news is communicated to parents	\checkmark

erious congenital abnormalities	Level 1 (ST1-3)	Level 2 (ST4-5)
Understand the underlying pathology	✓	
Understand the use of antenatal diagnosis and the role of fetal medicine	\checkmark	
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	\checkmark	
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		✓

Sepsis	Level 1 (ST1-3)	Level 2 (ST4-5)
Know the likely pathogens	✓	
Understand the important of timely treatment	\checkmark	
Know about nosocomial infection	✓	
Understand the importance of timely treatment, know the range of treatments and the likely pathogens		\checkmark
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		\checkmark

The dying baby	Level 1 (ST1-3)	Level 2 (ST4-5)
Understand the ethical principles involved	\checkmark	
Know about terminal care and bereavement counselling	\checkmark	
Understand the ethical principles in withdrawing or withholding care from an infant		\checkmark
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		\checkmark
Be able to deal with personal stress and know when to look for support		\checkmark

POSTNATAL WARD AND OUTPATIENT PRESENTATIONS

Jaundice	Level 1 (ST1-3)	Level 2 (ST4-5)
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		\checkmark
Know how and when to undertake an exchange transfusion		\checkmark
Be able to diagnose haemolytic jaundice	✓	
Be able to prescribe phototherapy appropriately	\checkmark	
Recognise features which suggest serious pathology	✓	
Be able to manage haemolytic jaundice		\checkmark
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		\checkmark
Feeding	Level 1 (ST1-3)	Level 2 (ST4-5)
Understand the importance of breastfeeding	\checkmark	
know the causes of feeding problems	\checkmark	
Know the local policies on feeding		✓
Be able to support and advise breastfeeding mothers	\checkmark	
Be able to identify underlying pathology or failure to thrive	\checkmark	
Be able to make appropriate recommendations to address feeding problems and faltering growth (failure to thrive)		✓
nfants of diabetic mothers	Level 1 (ST1-3)	Level 2 (ST4-5)
Understand the physiology	\checkmark	
Know the likely complications	\checkmark	
Know when admission to a neonatal unit is indicated		✓
Be able to interpret blood glucose estimations	✓	
Be able to initiate appropriate management	\checkmark	

Be able to initiate appropriate management

Be able to anticipate problems early and manage appropriately

Minor congenital abnormalities	Level 1 (ST1-3)	Level 2 (ST4-5)
Know the common diagnoses and the likely prognosis of minor congenital abnormalities	✓	
Know about common presentations of congenital cardiac disease	✓	
Know about common presentations of congenital cardiac disease and which need urgent action		\checkmark
Be able to advise parents appropriately	✓	
Recognise when referral to an appropriate specialist is needed	✓	
Be able to ensure that referral to an appropriate specialist or service occurs		\checkmark

dered development	Level 1 (ST1-3)	Level 2 (ST4-5)
Know the causes and natural history of conditions causing disordered development	√	
Understand current theories about the pathophysiology of cerebral palsy	\checkmark	
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	\checkmark	
Be aware of the need for involvement of the multidisciplinary team	\checkmark	
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		\checkmark
Have seen examples of the effect of developmental difficulties on families		✓

eening	Level 1 (ST1-3)	Level 2 (ST4-5)
Know the range of screening tests used	✓	
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		\checkmark
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 examine newborn hips effectively	✓	
Be able to perform clinical screening tests		\checkmark
Be able to explain the difference between a screening test and a diagnostic test to parents		\checkmark

Nephro-urology

GENERAL COMPETENCES

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

ACUTE PRESENTATIONS

Nephrotic syndrome

ephrotic syndrome	Level 1 (ST1-3)	Level 2 (ST4-5)
Understand the complications of the nephrotic state	\checkmark	
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		✓

Acute	e nephritis	Level 1 (ST1-3)	Level 2 (ST4-5)
	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		\checkmark
Know the range of immunosuppressive therapies that may be used in these conditions		\checkmark

Acute renal failure Level 1 (ST1-3) Level 2 (ST4-5) Know the causes of acute renal failure ✓ ✓ Understand the investigations that may differentiate between these causes ✓ ✓ Know the features of haemolytic uraemic syndrome ✓ ✓ 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)
Know the techniques of blood pressure measurement	\checkmark	
Know the causes of hypertension and the principles of treatment	✓	
Be able to interpret blood pressure measurements	\checkmark	
Be able to identify complications		\checkmark
Be able to initiate management under supervision		✓
Be able to liaise with specialists effectively		\checkmark
Acute scrotal pain	Level 1 (ST1-3)	Level 2 (ST4-5)
Know the differential diagnosis of this symptom	\checkmark	
Be able to recognise the important causes of acute scrotal pain	\checkmark	

Neonate with history of abnormal antenatal ultrasound of the renal tract	Level 1 (ST1-3)	Level 2 (ST4-5)
Understand the causes and management of antenatal hydronephrosis	√	
Know about the causes of echogenic or cystic kidneys	\checkmark	
Know about the inheritance patterns of renal abnormalities detected in fetal life	\checkmark	
Be able to recognise when to refer to a nephrologist or urologist	\checkmark	
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)
	Know the causes of stone formation	\checkmark	
	Be able to recognise presenting features		\checkmark
	Be able to initiate management under supervision		\checkmark

OUTPATIENT PRESENTATIONS

Be able to identify children who require urgent surgical referral

✓

Urogenital abnormalities

piding disorders including enuresis, dysuria, frequency and polyuria	Level 1 (ST1-3)	Level 2 (ST4-5)
Know both the physical and psychological causes of voiding disorders	 Image: A start of the start of	
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	~	
Be able to interpret common urine microscopic and culture findings	~	
Be able to identify relevant neurological problems		✓
Be able to investigate and manage within guidelines		✓
aematuria and proteinuria	Level 1 (ST1-3)	Level 2 (ST4-5)
Know the causes of these signs	✓	

naturia and proteinuria	Level 1 (ST1-3)	Level 2 (ST4-5)
Know the causes of these signs	\checkmark	
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		
enital abnormalities	Level 1 (ST1-3)	Level 2 (ST4-5)
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		\checkmark

Chronic renal failure	Level 1 (ST1-3)	Level 2 (ST4-5)
Know the causes and natural history of conditions causing chronic renal failure	\checkmark	
Understand the pathophysiology of bone disease, anaemia and growth failure	\checkmark	
Know about dialysis and transplantation	\checkmark	
Appreciate the impact of chronic renal failure in childhood and later adult life	\checkmark	
Identify growth and nutritional problems and use dietetic support effectively		✓

Tubular disorders	Level 1 (ST1-3)	Level 2 (ST4-5)
Know the range of presentations suggestive of an underlying renal tubular disorder	✓	
Know about the inheritance patterns of different tubular disorders	✓	

Neurology and Neurodisability

GENERAL COMPETENCES

	Level 1 (ST1-3)	Level 2 (ST4-5)
Have knowledge and understanding of the pathophysiology of common disorders affecting the nervous system	\checkmark	
Know and understand the common causes of disability	✓	
Understand concepts of disability and what this means for the child and family	\checkmark	
Be able to take an accurate neurological and neuro-developmental history	\checkmark	
Be able to examine the nervous system of a newborn baby, child and young person	\checkmark	
Know and understand the pathophysiology of the effects of prematurity	✓	
Be able to perform a reliable assessment of neuro-developmental status at key stages, including the newborn period, the first year of	✓	
life, nursery age, school entry and late primary education		
Be able to recognise a disabled child	\checkmark	
Have the knowledge and skills to be able to initiate management of children with neurological and neurodisabling conditions in acute	✓	
settings and know when and whom to call for help		
Understand the life-threatening nature of acute neurological deterioration and when to call for help	\checkmark	
Be able to recognise, initiate diagnostic tests and outline the management of common disorders	✓	
Understand the principles and use of neuro-radiological imaging	\checkmark	
Have a basic understanding and experience of neuro-physiological tests	\checkmark	
Understand the principles of prescribing and monitoring therapy	\checkmark	
Have experience of working with multi-disciplinary teams	\checkmark	

Understand the implications for families of children with neurological and neurodisabling conditions	✓	
Understand the impact of developmental disorders on the life of child and family at different developmental stages	✓	
Understand the need for a range of communication skills with disabled children, their families and other professionals	✓	
Be able to work with families and professionals in the care of disabled children	\checkmark	
Be aware of local services	✓	
Understand the need to work with other services outside neurology and neurodisability such as child protection, education, services for looked after children and adult services	✓	
Develop a commitment to advocacy on behalf of disabled children and their families	✓	
Be aware of how agencies work together to address how children with health and medical needs are managed at school	✓	
Have worked on specific cases with multidisciplinary teams		✓
Have experience of a range of communication skills with disabled children, their families and other professionals		✓
Be aware of local services and how to access them		✓
Have experience of working with other services outside neurology and neurodisability such as child protection, education, services for looked after children and adult services		~
Have experience of how agencies work together to address how children with health and medical needs are managed at school		✓
Have had experience of working in special schools		✓
Be aware of the role of the Designated Medical Officer to the Local Education Authority		✓
Be aware of the statutory requirement to notify children who may have special educational needs to the LEA and know how to do so		\checkmark
Be able to write SEN medical reports on simple cases		✓
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		\checkmark
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		\checkmark
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		\checkmark
Know about local respite facilities and how they may be accessed		\checkmark

Seizures

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

Level 2 (ST4-5)

Level 1 (ST1-3)

✓ ✓

✓

Begin to understand the links between epilepsy and behaviour problems	\checkmark	
Understand the place and principles of the EEG and neuro-imaging in investigation	\checkmark	
Know about the long term implications of epilepsy	\checkmark	
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	✓	
Be able to form a differential diagnosis	√	
Work effectively with the multidisciplinary team	✓	
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		✓
Be able to advise parents about education and safety		✓

Faints and	d 'funn	v turns'
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nts and Tunny turns	Level 1 (ST1-3)	Level 2 (514-5)
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	✓	
Be able to explain likely diagnoses to parents	\checkmark	

Acute focal neurological signs

ute local neurological signs	Level I (STI-S)	Level 2 (314-5)
Understand the implications of acute focal neurological signs	\checkmark	
Understand the principles of investigation	\checkmark	
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	√	
Be able to interpret the signs		\checkmark
Have experience of interpretation of CT and MRI scans		\checkmark
Be able to initiate consultation to give diagnoses to parents		✓
Be able to initiate consultation to give diagnoses to parents		

Ataxia, clumsiness and abnormal movement patterns Level 1 (ST1-3) Level 2 (ST4-5) Know the common possible causes of ataxia, clumsiness and abnormal movement patterns ✓ ✓ Know the indications for investigations ✓ ✓ Be able to recognise the signs ✓ ✓ Recognise which urgent investigations are needed ✓ ✓

Hypotonia, neuropathies and myopathies

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

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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	\checkmark	
Be able to elicit and interpret the signs		\checkmark
Be able to initiate appropriate tests		\checkmark

Meningism and altered consciousness

ningism and altered consciousness	Level 1 (ST1-3)	Level 2 (ST4-5)
Know the likely causes or pathogens of meningism and altered consciousness	\checkmark	
Understand the principles of treatment	\checkmark	
Know about prophylactic therapy for contacts of meningitis	\checkmark	
Know when it is safe to perform a lumbar puncture	\checkmark	
Know the principles of brain stem death	✓	
Recognise early signs of meningitis and encephalitis	\checkmark	
Use a validated coma score	✓	
Recognise signs and implications of raised intra-cranial pressure	\checkmark	
Initiate therapy appropriately	✓	
Call for help promptly	\checkmark	
Recognise the need for urgent referral to audiology specialists after bacterial meningitis	\checkmark	
Assess and manage early presentations of meningitis and encephalitis		✓
Use a validated coma score		✓
Assess and initiate management of raised intra-cranial pressure		✓

Neural tube defects and other congenital abnormalities	Level 1 (ST1-3)	Level 2 (ST4-5)
Know about antenatal diagnosis of neural tube defects and other congenital abnormalities	\checkmark	
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		\checkmark
Trauma to central and peripheral nervous systems	Level 1 (ST1-3)	Level 2 (ST4-5)

Trauma to central and peripheral nervous systems	Level 1 (311-5)	Level 2 (314-3
Be aware of the implications of severe head injury and the possibilities for rehabilitation	\checkmark	
Know about other neurological trauma such as brachial plexus injury	\checkmark	
Be aware of acute management and need to transfer appropriately	\checkmark	
Recognise the place of occupational and physiotherapy	\checkmark	
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		✓

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r or illness in a child with complex disabilities	Level 1 (ST1-3)	Level 2 (ST4-5)
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

euro-developmental regression	Level 1 (ST1-3)	l
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	\checkmark	
Be able to recognise regression of developmental skills and refer appropriately for investigation		

Conductive hearing loss	Level 1 (ST1-3)	Level 2 (ST4-5)
Know the common causes	✓	
Be aware of the principles of hearing tests at various ages	\checkmark	
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	\checkmark	
Be able to recognise when further assessment is required and how to assess it		\checkmark

Disordered development	Level 1 (ST1-3)	Level 2 (ST4-5)
Understand the common causes of disability, disordered development, and learning difficulties	✓	
Know about the current theories on the pathophysiology of cerebral palsy	\checkmark	
Know about common secondary disabilities	✓	
Understand the complications of cerebral palsy and disordered development	\checkmark	
Know about common secondary disabilities and co-morbidities		\checkmark
Be aware of the work of the child development team or centre	✓	
Have experience of working with the child development team or centre		\checkmark
Recognise common causes of disordered development, manage simple problems and refer complex difficulties appropriately for		\checkmark
specialist investigation and treatment		
Speech and language delay including hearing loss	Level 1 (ST1-3)	Level 2 (ST4-5)

Know the common causes

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 \checkmark

Level 2 (ST4-5)

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		\checkmark
Know the risk factors for sensineural hearing impairment		\checkmark
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	✓	
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		✓
sorineural hearing loss	Level 1 (ST1-3)	Level 2 (ST4-5)
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		✓

Be able to communicate with the child with sensorineural	hearing loss
be usie to communicate with the cinia with sensormearar	incuring 1000

Neakness	Level 1 (ST1-3)	Level 2 (ST4-5)
Know the possible causes	\checkmark	
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		✓
normal head size and shape		Level 2 (ST4-5)
Be aware of the common causes of hydrocephalus, macrocephaly and microcephaly	✓	
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		✓

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Be ale to reach a likely diagnosis and initiate investigations for abnormal head growth		\checkmark
Know about the insertion and ongoing management of ventricular-peritoneal shunts	-	✓
eadache	Level 1 (ST1-3)	Level 2 (ST4-5)
Be aware of the possible biological, psychological and social factors that can contribute to headache	√	
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		✓
roblems of language, vision and hearing	Level 1 (ST1-3)	Level 2 (ST4-5)
Be aware of the principles of testing	√	
Know about the principles of testing		✓
Understand the common causes of sensory impairment, the various tests available and when they are appropriate		✓
Recognise when to refer for further assessment	✓	
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		\checkmark
assessment		
pecific learning difficulties	Level 1 (ST1-3)	Level 2 (ST4-5)
Be aware how specific learning difficulties present at school	✓	
Understand how specific learning difficulties present at school		\checkmark
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

Ophthalmology

GENERAL COMPETENCES

	Level 1 (ST1-3)	Level 2 (ST4-5)
Be able to examine the eye and recognise those abnormalities which require urgent referral or treatment	\checkmark	
Be able to take a relevant history for a child with suspected visual impairment	\checkmark	
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	\checkmark	

✓

Know about the eye manifestations of common genetic and systemic diseases	\checkmark	
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

Know the common causes of red eyeImage: Common causes of red eyeBe able to identify children who need referralImage: Common causes of red eyeBe able to initiate investigations and manage appropriatelyImage: Common causes of red eye

Patient presenting with a possible squint

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	\checkmark	
Know how to refer appropriately		\checkmark

Ptosis

 •		
Know about the congenital and acquired causes of ptosis	✓	
Know about the Tensilon test	✓	
Know how to undertake the Tensilon test		\checkmark

Proptosis

Know the common causes of proptosis	\checkmark	
Be able to initiate appropriate investigations	\checkmark	
Be able to examines for signs of relevant systemic disease	\checkmark	

Abnormal movement Level 1 (ST1-3) Level 2 (ST4-5) 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	Level 1 (ST1-3)	Level 2 (ST4-5)
Know the normal appearance of the retina	✓	
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	\checkmark	

Visual impairment

Level 1 (ST1-3)	Level 2 (ST4-5)
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Level 2 (ST4-5)

Level 1 (ST1-3)

Level 1 (ST1-3) Level 2 (ST4-5)

Level 1 (ST1-3) Level 2 (ST4-5)

Level 1 (ST1-3) Level 2 (ST4-5)

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

Palliative Care

GENERAL COMPETENCES

	Level 1 (ST1-3)	Level 2 (ST4-5)
Be familiar with local and national guidelines on withdrawing and withholding treatment	\checkmark	
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	✓	
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	\checkmark	
Know the tests for brain stem death	\checkmark	
Recognise loss and grief and their effects on the health and well-being of children, families and professionals	✓	
Be aware of local bereavement support services	✓	
Recognise the skills and experience of other professionals, acknowledge personal needs for support and the needs of other	\checkmark	
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 different from those of the	✓	
family and health professionals		
Know about guidelines on the management of sudden infant death, including the RCPCH Kennedy report		\checkmark
Know about the broad definition of palliative care in childhood		\checkmark
Recognise factors which determine when care of a patient becomes palliative		\checkmark

Respiratory Medicine with Ear, Nose and Throat GENERAL COMPETENCES

Level 1 (ST1-3) Level 2 (ST4-5)

	-	
Have the knowledge and skills to be able to assess and initiate management of patients presenting with respiratory problems in acute	l	
and outpatient settings		
Have the knowledge and understanding of factors relating to long term management of chronic respiratory problems	l	
Understand the life threatening nature of some of these conditions and when to call for help	l	
Recognise factors which suggest underlying or serious pathology	l	

✓
✓
\checkmark
\checkmark

ACUTE PRESENTATIONS

Sore throat and/or mouth	Level 1 (ST1-3)	Level 2 (ST4-5)
Know the causes of these complaints	\checkmark	
Know appropriate therapies	\checkmark	
Be able to manage these conditions		\checkmark
Recognise features in the presentation which suggest serious pathology		\checkmark

Nose bleeds

lose ble	eds	Level 1 (ST1-3)	Level 2 (ST4-5)
Kno	ow the common causes of nose bleeds	\checkmark	
Rec	cognise those with underlying pathology		\checkmark

Snoring and obstructive sleep apnoea Level 1 (ST1-3) Level 2 (ST4-5) Know the causes of snoring \checkmark Be aware of complications of this presentation \checkmark Understand the indications for sleep studies \checkmark \checkmark Recognise when referral to an ENT surgeon is appropriate Be able to refer appropriately to an ENT surgeon √

irache		Level 2 (ST4-5)
Know the common causes and complications	\checkmark	
Know the risk factors for otitis media with effusion	\checkmark	
Understand the vulnerability of children with cleft palate	\checkmark	
Recognise an abnormal ear drum	\checkmark	
Recognise when to treat with antibiotics	✓	
Recognise when to refer to audiology specialists or an ENT surgeon	✓	
Be able to manage this condition		\checkmark
Be able to treat with antibiotics where appropriate		\checkmark

Level 1 (ST1-3)	Level 2 (ST4-5)
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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

ute severe asthma	Level 1 (ST1-3)	Level 2 (ST4-5)
Be familiar with the British Thoracic Society guidelines for management	\checkmark	
Be able to assess the severity of an asthma attack	\checkmark	
Be able to institute appropriate emergency treatment	\checkmark	
Recognise when more senior help is needed	\checkmark	
Be able to lead treatment of severe asthma and review ongoing treatment before discharge		\checkmark

Lower respiratory tract infection (including pneumonia and bronchiolitis)

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

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

OUTPATIENT PRESENTATIONS

Cervical lymphadenopathy	Level 1 (ST1-3)	Level 2 (ST4-5)
Know the causes of cervical lymphadenopathy	\checkmark	
Recognise when investigation and surgical intervention is needed	✓	

Chronic stridor

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

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

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

Ast	ima	Level 1 (ST1-3)	Level 2 (ST4-5)
	Be familiar with the British Thoracic Society guidelines for management of asthma	\checkmark	
	Know about the patterns of asthma and contributing factors	✓	
	Know about the complications of long-term use of medications for asthma	\checkmark	
	Institute age-appropriate individualised management plan for asthma	✓	
	Teach children how to use a peak flow meter and diary	\checkmark	
	Teach and assess inhaler technique	\checkmark	
	Be able to modify an asthma management plan appropriately		\checkmark
	Be aware of what needs to be done to ensure the child has access to emergency treatment at school and other settings		\checkmark
Rec	urrent or chronic chestiness	Level 1 (ST1-3)	Level 2 (ST4-5)
	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		\checkmark
	Be aware of the role of bronchoscopy, pH studies and video-fluoroscopy	\checkmark	
	Know about the role of bronchoscopy, pH studies and video-fluoroscopy		\checkmark
	Recognise features in the presentation which suggest serious or unusual pathology e.g. atypical presentations of cystic fibrosis		\checkmark
	Know how to perform and interpret basic lung function tests		\checkmark
Cys	ic fibrosis	Level 1 (ST1-3)	Level 2 (ST4-5)
-	Know and understand the pathophysiology and natural history of cystic fibrosis	\checkmark	
	Understand the principles of treatment	✓	
	Understand the diagnostic tests available		\checkmark

Work with a multi-disciplinary team, particularly physiotherapy and dieticians

✓

Safeguarding

ACUTE PRESENTATIONS

Physical Injury	Level 1 (ST1-3)	Level 2 (ST4-5)
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		\checkmark
Be able to recognise new and old fractures on an X-ray		\checkmark
Be able to initiate a multi-disciplinary investigation with a more experienced colleague		\checkmark
Head Injury	Level 1 (ST1-3)	Level 2 (ST4-5)
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		\checkmark

Know that his may cause symptoms mistaken as having a metabolic or infective cause in an infant	\checkmark
Know the appropriate investigations and involvement of other disciplines e.g. ophthalmology, radiology	\checkmark
Know that retinal haemorrhages may be difficult to detect	\checkmark
Know that, when there is suspicion of non-accidental head injury, an ophthalmologist should be involved	\checkmark
Be able to perform fundoscopy and recognise retinal haemorrhage	\checkmark
Be able to initiate emergency management and urgent investigations	\checkmark
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)
Know that sexual abuse forms part of the differential diagnosis		\checkmark
Know when an expert genital examination is needed and the role of colposcopy as part of that		\checkmark
Know about the risk of acquired sexually transmitted infections		\checkmark
Be able to refer to a colleague experienced in examination for sexual abuse		\checkmark

Self	-harm	Level 1 (ST1-3)	Level 2 (ST4-5)
	Recognise this as an expression of distress, acute or long-term		\checkmark
	Recognise repeated self-harm as indicating serious emotional distress		\checkmark
	Be able to refer to the CAMHS team		\checkmark

Apnoeic episodes as an infant	Level 1 (ST1-3)	Level 2 (ST4-5)
Be aware of this as a possible presentation of imposed airway obstruction and know the indicators that this maybe the case		\checkmark
Understand the life-threatening nature of imposed airway obstruction		\checkmark
Refer promptly to an experienced colleague for help		\checkmark

OUTPATIENT PRESENTATIONS

Faltering growth

Be aware of the high incidence	e of a non-organi	c cause		
Be able to instigate appropriat	te investigations			
				1

Be able to institute multi-agency involvement with the help of an experienced colleague

Soiling/Wetting

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

ginal Discharge	Level I (SII-S)	Level 2 (314-5)
Know that this may be a presentation of sexual abuse		\checkmark
Know when an expert genital examination is needed and the role of colposcopy as part of that		\checkmark
Know about the many other causes of vaginal discharge		\checkmark
Know when to consult with a senior colleague experienced in sexual abuse when there is any question of this		\checkmark

Behavioural Change

ehavioural Change	Level 1 (ST1-3)	Level 2 (ST4-5)
Know the association of this with abuse, including emotional abuse, neglect and sexual abuse		\checkmark
Be able to take a history to elucidate social and emotional factors that maybe involved		\checkmark
Be able to seek the help of a senior colleague		\checkmark

Repeated or bizarre physical symptoms	Level 1 (ST1-3)	Level 2 (ST4-5)
Know the possible signs of factitious and induced illness		\checkmark
Know how to recognise the over-anxious parent		\checkmark
Know the pathways to gather medical, educational and social information on the child		\checkmark
Be able to refer to a senior experienced colleague		\checkmark

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

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

 $\log \left(1 \left(ST1_{2} \right) \right)$

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.

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SECTION 5 - 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" (<u>http://www.gmc-uk.org/Learning and assessment in the clinical environment.pdf 45877621.pdf</u>).

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 Royal College of Paediatrics and Child Health

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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.

Table of Assessments August 2015

		LEVEL 1		LEV	/EL 2		LEVEL 3					
	ST1	ST2	(ST3)	ST4	(ST5)	ST6	ST7	(ST8)				
Supervised	Learning Events	(SLE) – Aim for	20 SLEs per trai	ning year (FTE);	; MINIMUM MA	NDATORY requ	irements are as	follows:				
Mini CEX & CbD Including:		/linimum 12 /ye			n 12/year CEX to CbD 1:1	Minimum 12 /year Ratio of mini CEX to CbD 1:2						
ACAT (CEX/CbD)		Optional		1	L*		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*					
			Assessmen	t of Performand	ce (AoP)							
DOPS	A minimum of 1 satisfactory AoP for the compulsory procedures**				y AoP for the / procedures nding**	compulsory p	of 1 satisfactory procedures within pecialty curricu	n the relevant				
Paed CCF				1*	***	1***						
ePaed MSF	1	1	(1)	1	(1)	1	1	(1)				
			Other assessme	nts that contrib	oute to ARCP							
START							1					
			MRCF	PCH Examinatio	ns							
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.

The assessment system consists of

- 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
 - Diagnosis and prioritisation of problems
 - Emergency management
 - o Child development
 - \circ $\;$ Communication with child and parent in consultations
 - 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 fedback 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.

Annual Review of Competency Progression (ARCP)

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).

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 for a range of audiences	effective skills in written communications for 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 performance 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	sound knowledge of the science- base for paediatrics (as outlined in the Framework of	detailed, up-to-date knowledge of the science-base for general paediatrics or a paediatric sub-specialty				
		Competences for Level 1 in Paediatrics)	Competences for Level 2 in Paediatrics)	(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 responding effectively to disordered growth and development of any kind in paediatrics				
Knowledge, skill and performance 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	20	a reflective approach to improvement of professional practice as a paediatrician	a commitment to reflective practice and continuing improvement of practice as a	effective skills to maintain and develop knowledge and clinical skills required of a				

Safety and Quality			paediatrician	specialist in paediatrics
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	increasing confidence in team-work and the ability to collaborate with a range of external agencies about the needs of	a commitment to effective multi-agency and multi-disciplinary team-working for the care

		paediatric practice	children	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

sb	By the end of Level 1 Training, trainees will demonstrate:						~		MSF					•	×	Comment
Standards		БоР	TAS	АКР	Clinical	НАТ	LEADER	ACAT	Epaed N	CbD	MiniCeX	DOC	DOPs	Portfolio	Logbook	
THE	DUTIES OF A DOCTOR						1		1		I		Kno	wledg	e, Ski	lls and Performance
1	An understanding of the roles and responsibilities of paediatricians				✓		√		√	√				✓		
GOO	D CLINICAL CARE	L					1									
2	Effective responses to challenge, complexity and stress in paediatrics				~	√	√		√	✓	~			~		
3	Advanced neonatal and paediatric life support skills												~		~	APLS/NLS or equivalent
4	Effective skills in three way examination				~	~				~	~					
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 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	~	~	~	~				~	~						
9	Safe practical skills in paediatrics								~				~	✓	~	
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	~	~	~						~						

Curriculum for Paediatric Training General Paediatrics

An understanding of safeguarding and vulnerability in paediatrics	~	√	√						 ✓ 				√	✓	Complete ICD Level 2 training
By the end of Level 1 Training, trainees will demonstrate:								щ							
	FoP	TAS	АКР	Clinical	НАТ	LEADER	ACAT	Epaed MS	CbD	MiniCeX	DOC	DOPs	Portfolio	Logbook	
TAINING GOOD MEDICAL PRACTICE	1			- I			1		- I			Kno	wledg	e, Ski	lls and Performance
Knowledge of the science base for paediatrics	✓	~	✓	 ✓ 											
Knowledge of common and serious paediatric conditions and their management	~	~	~	~											
An understanding of growth, development, health and well- being in paediatrics	~	✓	~	√											
				•	L		k	knowle	edge,	Skills	and P	erform	hance.	Safe	ty and Quality
An understanding of health promotion and public health issues in paediatrics	~	✓	~						√						
An understanding of an evidence-based approach to paediatric practice	~	~	~					~	√				~		
An understanding of the clinical governance activities and audit in paediatric practice	~	~	~	√		√		~	√				~		
A reflective approach to improvement in professional practice as a paediatrician						✓		~	~				~		
An understanding of equality and diversity in paediatric practice			~	√		~							~		
Knowledge of the law regarding paediatric practice	~	~	~	~		~	1	~	1					1	
CHING, TRAINING, APPRAISING AND ASSESSING	1	1	1	I	1	1	1	ŀ	Knowle	edge,	Skills	and P	erforn	nance.	Safety and Quality
An understanding of effective teaching in paediatrics				✓		✓		✓					✓		
A positive approach to receiving mentoring and educational supervision								~					~		
	paediatrics By the end of Level 1 Training, trainees will demonstrate: Intervention Intervention	paediatrics By the end of Level 1 Training, trainees will demonstrate: Quite the end of Level 1 Training, trainees will demonstrate: Page 1 VTAINING GOOD MEDICAL PRACTICE Knowledge of the science base for paediatrics Knowledge of common and serious paediatric conditions and their management An understanding of growth, development, health and wellbeing in paediatrics An understanding of health promotion and public health issues in paediatrics An understanding of an evidence-based approach to paediatric practice An understanding of the clinical governance activities and audit in paediatric practice An efflective approach to improvement in professional practice as a paediatrician An understanding of equality and diversity in paediatric practice Knowledge of the law regarding paediatric practice An understanding of equality and diversity in paediatric practice An understanding of equality and 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in pa	paediatrics Image: Second	paediatrics Image: Second	paediatrics Image: Second	paediatrics Image: Second

25	An understanding of the need for an ethical and rigorous approach to research in paediatrics	√	√	~												
Standards	By the end of Level 1 Training, trainees will demonstrate:	FoP	TAS	AKP	Clinical	НАТ	LEADER	ACAT	Epaed MSF	CbD	MiniCeX	DOC	DOPs	Portfolio	Logbook	Comment
REL	ATIONSHIPS WITH PATIENTS							Co	ommu	nicatio	on, Pa	rtners	hip an	d Tea	mwori	k. Maintaining Trust
26	An understanding of effective communication and interpersonal skills with children of all ages				✓		✓		~	√	~	√	~	~		
27	Empathy and sensitivity and skills in engaging the trust of 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	KING WITH COLLEAGUES										C	Comm	unicat	ion, P	artner	ship and Teamwork
29	Effective communication and interpersonal skills with colleagues					~	~		✓		~	√				
30	Professional respect for the contribution of colleagues in a range of roles in paediatric practice					~	~		~	~	~					
31	Effective time-management skills					✓			✓	~	✓					
		Comr	nunica	ation,	Partne	ership	and T	eamw	ork.	Safety	and (Quality	. Kno	wledg	e, Skil	ls and Performance
32	Effective handover, referral and discharge procedures in paediatrics					√						✓		•		
33	An understanding of the local, national and international policies on their work and on the health of children	√	~	√	~		~		~							
PRO	ВІТҮ	I	I	1	1	ı	1	1	L	1	1	1	Mainta	aining	Trust.	Safety and Quality
34	Sound ethical personal and professional practice				✓		✓		✓	✓	✓					
35	Reliability and responsibility in ensuring their accessibility to colleagues and patients and their families								~							
HEA	LTH	1	1	1	1	<u>I</u>	1	1	1	1	1	1	1	1	1	L

36	An understanding of the importance of self-awareness and a				\checkmark			\checkmark	
	responsible approach to personal health, stress and well-								
	being								

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		√		√					~		
GOC	D CLINICAL CARE			•						•	•	•
2	Increasing confidence, credibility and independence in response to challenge, complexity and stress in paediatrics	√	√	✓	√	√	✓			~		
3	Leadership skills in advanced neonatal and paediatric life support skills				√				~		~	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			~	✓	~	✓					
7	Responsibility for the effective management of acute and chronic conditions in paediatrics seeking additional advice and opinion as appropriate			~	~	~	V					
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			\checkmark	\checkmark				\checkmark	\checkmark	\checkmark	

	practical procedures in paediatrics, ensuring patient safety											
10	Improving skills in written communication for a range of audiences	~			~	~		~			~	
11	Effective leadership skills in undertaking initial investigations in children, based on an understanding of the risks and benefits in each case				•	√						
	By the end of Level 2 Training, trainees will demonstrate:											Comment
Standards		НАТ	LEADER	ACAT	Epaed MSF	CbD	MiniCeX	DOC	DOPs	Portfolio	Logbook	
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											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, Skil	Is and Performance. Safety and Quality
17	A commitment to health promotion activities for children and their families				~	√				√		
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	✓	~			~	

	By the end of Level 2 Training, trainees will demonstrate:											Comment
Standards		НАТ	LEADER	ACAT	Epaed MSF	CbD	MiniCeX	DOC	DOPs	Portfolio	Logbook	
TEA	CHING, TRAINING, APPRAISING AND ASSESSING								Kn	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	1					1	Com	munic	ation,	Partne	rship and Teamwork. Maintaining Trust
26	A commitment to effective communication and interpersonal skills with children of all ages		~	~	~	√	~					
27	Improving skills in building relationships of trust of with children and their families		~	~	~		~					
28	Increasing confidence in giving advice to young people and their families			~	√	√	~					
WO					1					1	Con	munication, Partnership and Teamwork
29	Skills in ensuring relationships with and between colleagues	✓	✓	✓	✓		✓					
30	Increasing confidence in team work and the ability to collaborate with a range of external agencies about the needs of children	~	v	v	√		v					
31	Effective leadership and management skills in clinical and	\checkmark	\checkmark	\checkmark	\checkmark		\checkmark					

Curriculum for Paediatric Training General Paediatrics

	non-clinical settings											
	·	Comn	nunicat	ion, P	artners	hip an	d Tear	nwork.	Safet	ty and	l Qual	ity. Knowledge, Skills and Performance
32	Effective skills in ensuring handover, referral and discharge procedures in paediatrics	✓		✓				~	,	~		
33	Experience and understanding of working within international, national and local legal and health structures and organizations involved in the care of children		~		~				,	~		

Standards	By the end of Level 2 Training, trainees will demonstrate:	НАТ	EADER	ACAT	Epaed MSF	CbD	MiniCeX	DOC	DOPs	Portfolio	ogbook	Comment
		-		4	ш	U	E					Material Trade October 10 alt
PRO	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	•						•		•		·
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	1	1			1		L		Knov	vledge	, Skil	ls and	l Performance
1	A commitment to advocate for the individual child in her/his particular context		✓		√	√				√				
GOO	D CLINICAL CARE	1				1		I						
2	Responsibility for an effective response to complex challenges and stress in paediatrics	✓	✓	√	√	√	√			√		~		
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	✓		✓		√	~							
5	Commitment to focused and analytical assessments of common and complex clinical problems in paediatrics	✓		✓		✓	~			~		~		
6	Effective skills in making a safe decision about the 'most likely' diagnosis in paediatrics			✓	~	√	~					~		
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			√	~				~	 ✓ 	~			
10	Effective skills in written communication for a range of audiences, for children and their families, colleagues and other organisations			v	~	~		~		~				

	By the end of Level 3 Training, trainees will demonstrate:													Comment
Standards	by the chu of Lever o Huming, trainees will demonstrate.	НАТ	LEADER	ACAT	Epaed MSF	CbD	MiniCeX	DOC	DOPs	Portfolio	Logbook	START	Paed CCF	ooninient
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					~		~		~		~		
MAI	NTAINING GOOD MEDICAL PRACTICE		1				1		1	Know	ledge,	Skill	s and	Performance
14	Detailed, up to date knowledge of the science base for general paediatrics or a paediatrics sub-specialty					✓				v		~		
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					~						~		
						Kn	owlea	lge, S	kills a	nd Pe	rforma	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 College of Paediatrics and Child Health		~		~					~		~		

Standards		НАТ	LEADER	ACAT	Epaed	CbD	MiniCeX	DOC	DOPs	Portfolio	Logbook	START	Paed CCF	Comment
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		√		√					√		~		
24	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 and application of complex methodological approaches in research in paediatrics									~		~		
REL	ATIONSHIPS WITH PATIENTS	-			Con	nmun	ication	, Part	nersh	nip and	d Tean	nworl	. Ma	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						1		Сс	ommu	inicatio	on, Pa	rtners	ship a	nd Teamwork
29	Positive and constructive relationships within teams of colleagues from a wide range of professional contexts	~	√	√	~	~						~		
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	k. Sa	fety a	nd Qu	ality.	Know	ledge,	Skills	s and	Performance
32	Effective leadership skills in the organisation of paediatric team working and effective handover	√		√				✓		√		✓		
33	Effective skills in promoting clinical practice through engagement with local, national and international organisations involved in the care of children		~		~					~		~		

Standards	By the end of Level 3 Training, trainees will demonstrate:	НАТ	LEADER	ACAT	Epaed MSF	CbD	MiniCeX	DOC	DOPs	Portfolio	Logbook	START	Paed CCF	Comment
PRC	DBITY								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		✓		✓		~			√				
35	responsibility for ensuring their own reliability and accessibility and that of others in their team				~					✓				
HEA	LTH													
36	Effective skills in ensuring their own responsibility to personal health, stress and well-being and that of others				✓					✓				