Introduction

This syllabus supports the completion of the RCPCH Progress curriculum, and should be used in conjunction with the curriculum document.

The purpose of the curriculum is to train doctors to acquire a detailed knowledge and understanding of health and illness in babies, children and young people. The curriculum provides a framework for training, articulating the standard required to work at Consultant level, and at key progression points during their training, as well as encouraging the pursuit of excellence in all aspects of clinical and wider practice.

The curriculum comprises of Learning Outcomes which specify the standard that trainees must demonstrate as they progress through training and ultimately attain a Certificate of Completion of Training (CCT). The syllabi support the curriculum by providing further instructions and guidance as to how the Learning Outcomes can be achieved and demonstrated.

Using the Syllabus

Paediatric trainees are required to demonstrate achievement of generic and sub-specialty or General Paediatric Learning Outcomes throughout their training period.

For all level 1 and level 2 trainees, there are 11 generic paediatric Learning Outcomes for each level. At level 3, there are a further 11 generic paediatric Learning Outcomes for all trainees, and several additional Learning Outcomes in either General Paediatrics or the GRID sub-specialty the trainee has been appointed into.

This syllabus contains 5 interlinked elements, as outlined in figure 1 which illustrates how each element elaborates on the previous one.
**Elements of the Syllabus**

The **Introductory Statement** sets the scene for what makes a General Paediatrician.

The **Learning Outcomes** are stated at the beginning of each section. These are the outcomes which the trainee must demonstrate they have met to be awarded their Certificate of Completion of Training (CCT) in Paediatrics. Progress towards achievement of the Learning Outcomes is reviewed annually at the Annual Review of Competence Progression (ARCP).

Each Learning Outcome is mapped to the General Medical Council (GMC) Generic Professional Capabilities framework. Each trainee must achieve all the Generic Professional Capabilities to meet the minimum regulatory standards for satisfactory completion of training.

The **Key Capabilities** are mandatory capabilities which must be evidenced by the trainee, in their ePortfolio, to meet the Learning Outcome. Key Capabilities are therefore also mapped to the GMC Generic Professional Capabilities framework.

The **Illustrations** are examples of evidence and give the range of clinical contexts that the trainee may use to support their achievement of the Key Capabilities. These are intended to provide a prompt to the trainee and trainer as to how the overall outcomes might be achieved. They are not intended to be exhaustive, and excellent trainees may produce a broader portfolio or include evidence that demonstrates deeper learning. It is not expected that trainees provide ePortfolio evidence against every individual illustration (or a set quota); the aim of assessment is to provide evidence against every Key Capability.

The **Assessment Grid** indicates suggested assessment methods, which may be used to demonstrate the Key Capabilities. Trainees may use differing assessment methods to demonstrate each capability (as indicated in each Assessment Grid), but there must be evidence of the trainee having achieved all Key Capabilities.

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**Using the Syllabus with ePortfolio**

Recording evidence in the ePortfolio to demonstrate progression against the learning outcomes and key capabilities can be done from any assessment or event in the ePortfolio.

At the end of any event or assessment, there is an opportunity to add tags, documents and comments. Expanding this by clicking “show more” will enable you to link your assessment to the curriculum items, where you will find the learning outcomes for each domain, key capabilities and example illustrations.

Trainees will therefore be able to track their progress in fulfilling the mandatory learning outcomes and key capabilities.
General Paediatrics

Introductory Statement

A General Paediatrician is a doctor with the knowledge and skills to manage a wide range of health problems and concerns in children. General Paediatricians are not bound by age group or organ. They manage children from birth to late adolescence with problems ranging from acute, life-threatening illnesses to chronic diseases, and focus on health promotion from newborn to late adolescence.

General Paediatricians are experts in the investigation and diagnosis of children with nonspecific symptoms and signs. They initiate treatment which may be delivered and continued by themselves or by another person or team according to the needs of the child. General Paediatricians also collaborate with other professionals and agencies in order to deliver optimal care. They step in and oversee individual, tailored care whenever appropriate.

As a result, General Paediatricians develop a wide variety of skills allowing them to provide holistic, child-centred care across the full range of paediatric subspecialties.

They may develop significant expertise in specialised paediatric areas, but they maintain their knowledge and skills across the full breadth of child health.

Specialty Learning Outcomes

<table>
<thead>
<tr>
<th>Specialty Learning Outcomes</th>
<th>GMC Generic Professional Capabilities</th>
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<tbody>
<tr>
<td>1. Resuscitates, stabilises, and treats acutely unwell children and young people, liaising with specialist and primary care teams as necessary.</td>
<td>GPC 1, 3, 6</td>
</tr>
<tr>
<td>2. Assumes the role of Acute Paediatric Team Leader and liaises with the primary care and other hospital and community specialist teams to effectively manage and coordinate patient flow, staffing, safety and quality in the paediatric acute assessment and inpatient units.</td>
<td>GPC 3, 5, 7</td>
</tr>
<tr>
<td>3. Recognises, investigates, initiates and continues the management of the full range of acute and chronic health problems presenting to paediatric outpatient clinics, drawing upon the expertise of other specialists as necessary.</td>
<td>GPC 3, 5, 7</td>
</tr>
<tr>
<td>4. Recognises, investigates and manages safeguarding issues, including providing advice to general practitioners, other healthcare professionals and social care providers.</td>
<td>GPC 5, 7</td>
</tr>
<tr>
<td>5. Co-ordinates and leads the care of children and young people with complex conditions, liaising with primary care and other hospital and community specialist teams.</td>
<td>GPC 5, 7</td>
</tr>
<tr>
<td>6. Supports and communicates effectively with families when their child is extremely unwell, dying or has died.</td>
<td>GPC 1, 3</td>
</tr>
</tbody>
</table>
Specialty Learning Outcome 1

Resuscitates, stabilises, and treats acutely unwell children and young people, liaising with specialist and primary care teams as necessary.  GPC 1, 3, 6

Key Capabilities

Leads a team in the resuscitation of acutely unwell children or young people.  GPC 1, 3, 5, 7

Assesses, investigates and manages acutely unwell children or young people.  GPC 3, 5

Supports children or young people and their families in the event of a death.  GPC 3, 5

Illustrations

1. Recognises, investigates and manages children and young people (including discharge or onward referral as appropriate) with the following:
   - brief resolved unexplained event (previously acute life-threatening event)
   - coma
   - dehydration
   - head injury
   - pain
   - poisoning
   - sepsis
   - shock
   - sudden unexpected death

2. Newborn resuscitation and stabilisation (term and preterm).

Specialty Learning Outcome 2

Assumes the role of Acute Paediatric Team Leader and liaises with the primary care and other hospital and community specialist teams to effectively manage and coordinate patient flow, staffing, safety and quality in the paediatric acute assessment and inpatient units.  GPC 3, 5, 7

Key Capabilities

Manages and co-ordinates patient flow and allocates resources in the acute and emergency paediatric assessment unit and inpatient ward.  GPC 3, 5, 6

Illustrations

1. Leads a clinical network in the management of a young person who self-harms.

2. Leads in the transition of young people with chronic conditions and disabilities from paediatric to adult care, and contributes to transitional care services within paediatric services.
Specialty Learning Outcome 3

Recognises, investigates, initiates and continues the management of the full range of acute and chronic health problems presenting to paediatric outpatient clinics, drawing upon the expertise of other specialists as necessary.

Key Capabilities

Assesses, investigates and manages children and young people referred to outpatient care clinics with a full range of nonspecific and specific symptoms and signs.

Illustrations

Manages a general paediatric outpatients clinic.

Specialty Learning Outcome 4

Recognises, investigates and manages safeguarding issues, including providing advice to general practitioners, other healthcare professionals and social care providers.

Key Capabilities

Assesses, investigates and manages children referred or identified with safeguarding concerns.

Illustrations

Manages a child or young person suffering from or at risk of physical, emotional and sexual abuse or neglect.
Specialty Learning Outcome 5

Co-ordinates and leads the care of children and young people with complex conditions, liaising with primary care and other hospital and community specialist teams.

Key Capabilities

- Oversees and co-ordinates the care of children and young people with complex health conditions.
- Provides advice and guidance across a broad range of health issues for children and young people, their families and healthcare and other professionals.
- Recognises when specialist advice or review is required for the further assessment, investigation and management of children and young people.
- Advocates and promotes good health for children and young people.
- Recognises and delivers initial management for psychological issues in young people presenting with physical symptoms.

Illustrations

1. Neurology and Neurodisability:
   - Seizures and abnormal movements
   - Headache
   - Abnormal behaviour
   - Reduced/ altered consciousness
   - Delayed/disordered development
   - Muscle weakness

2. Respiratory and sleep:
   - Acute and chronic cough
   - Acute and chronic wheeze
   - Acute and chronic airway obstruction
   - Respiratory failure
   - Recurrent chest infections
   - Cystic fibrosis
   - Upper respiratory tract symptoms (including ear symptoms)
   - Sleep problems

3. Diabetes and Endocrine:
   - Diabetic ketoacidosis
   - Diabetes mellitus in an otherwise healthy child
   - Adrenal failure
   - Thyroid problems
   - Abnormal growth
   - Abnormal pubertal progression

4. Nephrology:
   - Blood electrolyte abnormalities
   - Urinary tract infection
   - Haematuria and proteinuria
   - Nephrotic syndrome
   - Acute nephritis
   - Acute kidney injury
   - Chronic kidney disease
   - Hypertension
   - Enuresis
5. **Cardiology**
   - Cardiac failure
   - Heart murmurs
   - Syncope
   - Palpitations and arrhythmias
   - Chest pain

6. **Rheumatology**
   - Joint pain
   - Back and neck pain
   - Joint swelling
   - Hypermobility
   - Fatigue (acute and chronic)

7. **Metabolic**
   - Hypoglycaemia
   - Hyperammonaemia
   - Metabolic acidosis

8. **Haematology and Oncology**
   - Anaemia
   - Polycythaemia
   - Lymphadenopathy
   - Lumps, bumps and “masses”
   - Abnormalities of white cells
   - Abnormalities of platelets
   - Abnormalities of coagulation

9. **Allergy, immunology & infectious disease**
   - Allergy (IgE- and non-IgE-mediated)
   - Acute infection
   - Recurrent infection
   - Urticaria and angioedema
   - Kawasaki disease
   - Pyrexia of unknown origin

10. **Gastroenterology, hepatology and nutrition**
    - Abdominal pain
    - Nausea and vomiting
    - Diarrhoea
    - Constipation and soiling
    - Faltering growth and/or weight loss
    - Obesity
    - Jaundice
    - Hepatitis
    - Gastrointestinal bleeding
    - Liver failure

11. **Dermatology**
    - Eczema (and its complications)
    - Infectious and infective rashes
    - Genodermatoses

12. **Neonatal Medicine**
    - Respiratory distress
    - Neonatal sepsis
    - Feeding and nutrition
    - Counselling of expecting parents regarding premature delivery

13. **Mental health**
    - Eating disorders
    - Anxiety
    - Low mood
    - Somatisation
    - Deliberate self-harm

14. **Young people’s health**
    - Understands and recognises somatisation disorders, carrying out initial management and referral.
    - Understands the particular needs of young people with regard to independence and autonomy, education and work, body image and sexual identity, concordance with medication and risk-taking behaviours, and how these factors may be affected by chronic conditions.
**Specialty Learning Outcome 6**

Supports and communicates effectively with families when their child is extremely unwell, dying or has died.

**Key Capabilities**

Manages the family of a child who is extremely unwell, dying or has died.

**Illustrations**

Supports children and young people at the end of life, particularly in relation to pain management and other clinical problems commonly seen at the end of life in children and young people.

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**Assessment Grid**

This table suggests assessment tools which may be used to assess the Key Capabilities for these Learning Outcomes. This is not an exhaustive list, and trainees are permitted to use other methods within the RCPCH Assessment Strategy to demonstrate achievement of the Learning Outcome, where they can demonstrate these are suitable.

<table>
<thead>
<tr>
<th>Key Capabilities</th>
<th>Assessment / Supervised Learning Event suggestions</th>
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<tr>
<td>Supports children and young people at the end of life, particularly in relation to pain management and other clinical problems commonly seen at the end of life in children and young people.</td>
<td>Paediatric Mini Clinical Evaluation (ePaed Mini-CEX)</td>
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<td>Manages the family of a child who is extremely unwell, dying or has died.</td>
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