



# Pa a N a

Sub-specialty Syllabus

**V 3**  
Approved by the GMC for implementation from 1 August 2023

This document outlines the syllabus to be used by doctors completing Paediatric Neurodisability training in the United Kingdom (UK). It accompanies the RCPCH Progress+ curriculum and Assessment Strategy.

This is Version 3. As the document is updated, version numbers will be changed and content changes noted in the table below.

Version number	Date issued	Summary of changes
Version 2	September 2021	Document reviewed as part of the Shape of Paediatrics TrgesPaediatrics TrgesPaediatrics Tr30P Kang (e



This syllabus supports the completion of the RCPCH Progress+ curriculum and should be used with the curriculum document and Assessment Strategy.

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

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sets the scene for what makes a Neurodisability Paediatrician.

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# U S a P



The ePortfolio is used to demonstrate a trainee's progression using assessments, development logs and reflections. Events should be linked to the Progress+ curriculum specifically against the key capabilities at the appropriate level.

Further guidance on using the ePortfolio is available on our website: \_\_\_\_\_

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# Pa a N a I S a

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A Neurodisability Paediatrician is a doctor who has specialist expertise in the management of children and young people with disabilities, resulting from congenital or acquired long-term conditions. These problems are generally due to impairment in the nervous or musculoskeletal systems and can be static or progressive in nature.

Although they are involved in the diagnosing, the Neurodisability Paediatrician's emphasis is in managing the complex comorbidities seen, targeting the patients' rehabilitation and enablement. While working closely with local teams in the hospital and community (such as Genetics, Neurology, Community Paediatrics, surgical specialties and Palliative Care, as well as NGOs and education and social services), they often provide specialist regional advice in a model of shared care.

At a tertiary level, Neurodisability Paediatricians have developed specialist skills within the neurosciences. This includes in the assessment of motor and neurobehavioural disorders (eg attention deficit hyperactivity disorder [ADHD] and autism) and neurorehabilitation and they often sub-specialise in one or more of these areas.



# S - a L a O L 1



Demonstrates specialist expertise in the management of children and young people with disabilities, resulting from congenital or acquired long-term conditions.	GPC 2, 3, 6, 7
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## K C a a

Demonstrates how to assess neurological or neurobehavioural impairments.	GPC 1, 3
Identifies clinical and developmental red flags for potentially progressive neurological disorders and clearly understands the pathways for further assessment.	GPC 1, 3

## I a

Concerning the management of children and young people with congenital or acquired long-term conditions:	
1.	Uses evidence-based practice to decide on appropriate interventions and formulate child or young person and family-centred care plans, with identified functional goals to improve function, participation and quality of life.
2.	Recognises the appropriate investigations for children and young people suspected of having one or more physical or behavioural neurodisabling conditions and interprets results and use neurodiagnostic tools, including neuroimaging, neurophysiology, genetics and metabolic biochemistry.
3.	Identifies indicators of potentially progressive disorders and arranges timely expert assessment and management.
4.	Formulates clear differential diagnoses, investigations and management plans for children and young people with a range of motor disorders, such as cerebral palsy, neuromuscular disorders and spina bifida.
5.	Demonstrates the ability to perform detailed assessment of posture, mobility and function, including gait analysis and upper limb motor control.
6.	Explains to parents and families the aetiology and natural history of a wide variety of physical and behavioural neurodisabling conditions, including autism, ADHD, developmental coordination disorder and cerebral palsy.



# S - a L a O 2



Effectively manages comorbidities and focuses on rehabilitation and enablement.	GPC 3, 5, 7
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## K Ca a

Identifies the criteria by which clinical and developmental progress is evaluated following an acute neurological impairment, including setting goals and specific intervention strategies.	GPC 3, 5
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## I a

1.	Recognises the problems associated with bulbar coordination, swallowing and nutrition in children and young people with physical disability across all age ranges and degrees of functional difficulty, including the knowledge of appropriate assessments and effective management pathways.
2.	Formulates a differential diagnosis and plan of assessment, investigation and management for children and young people with a range of movement disorders, such as cerebral palsy, neuromuscular disorders and spina bifida.
3.	Establishes levels of cognitive, motor and behavioural ability, both in children and young people with complex disability and the wider paediatric population, especially in the context of acute medical illness.
4.	Identifies the criteria by which progress is evaluated and formulates programme goals and specific interventions. <small>(en-G) BMCID 220 DC 110 0 0 10 96.3779 291.s g 306.6</small>

# S - a L a O 3



Demonstrates the ability to act as a resource across both, hospital and community teams to provide specialist regional advice in a model of shared care.	GPC 5, 8
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## K Ca a

Assesses and manages common neurodevelopmental disorders, including ADHD, autistic spectrum disorder and developmental coordination disorder.	GPC 1, 3
Recognises in all aspects of their practice the vulnerability of a child or young person with learning, behavioural or physical disabilities and the need to advocate for these children, young people and families.	GPC 1, 3, 5, 7
Works effectively as part of a multidisciplinary team (MDT) and demonstrates clear leadership skills in the assessment and management of a variety of behavioural, developmental and functional neurodisabilities.	GPC 5

## I a

1.	Recognises all mental health needs and the mental states of any child or young person, taking into account their age, stage of development and functional ability and refers on for expert assessment, when needed.
2.	Prescribes or offers advice to children, young people, families and other health professionals on the appropriate use of medications used in behavioural and physical neurodisability, highlighting their off-label use (eg botulinum toxin A injections) and advises on neurosurgical techniques, such as intrathecal baclofen pumps and selective dorsal rhizotomy.





