

Child Mental Health

Sub-specialty Syllabus

Version 3

Approved by the GMC for implementation from 1 August 2023

This document outlines the syllabus to be used by doctors completing Child Mental Health 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 Training review. 'Using the Syllabus with ePortfolio' (page 5) updated. Learning Outcome 3, Key Capability 1 split into two Key Capabilities (page 13). Assessment Grid updated with changes made to the Key Capabilities (page 16-17).
Version 3	August 2023	Updated from Progress to Progress+. Using the syllabus (page 3) updated: reference to Level 1, 2 and 3 removed and replaced with Core and Specialty training.

Introduction



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 provides a framework for training, articulating the standard required to work at Consultant level through 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 Learning Outcomes specifying the standard trainees must demonstrate to progress in training and attain a Certificate of Completion of Training (CCT). The syllabi supports the curriculum by providing further instructions and guidance on how the Learning Outcomes can be achieved and demonstrated.

In the context of clinical training and service the term “babies, children and young people” is a common term used by those working in paediatric and child health areas to mean any of those instances in context with clinical training or service. Therefore, in relation to the assessment, the trainee needs to achieve the capabilities for either a baby, child or young person.

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 core trainees (ST1 – 4), there are 11 generic paediatric Learning Outcomes. For specialty training (ST5 – 7), there are a further 11 generic paediatric Learning Outcomes and several additional Learning Outcomes in either General Paediatrics or the sub-specialty to which the trainee has been appointed.

This syllabus contains five 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 Child Mental Health Paediatrician doctor.

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.

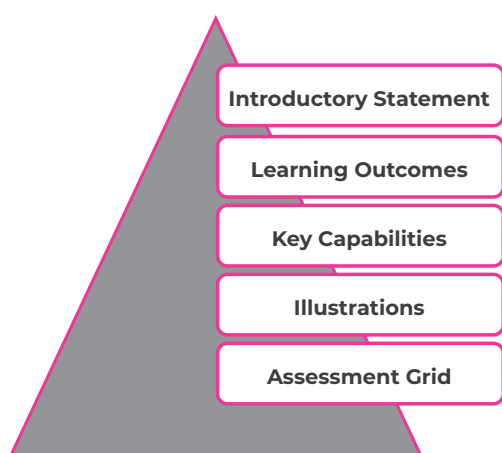


Figure 1: The five elements of the syllabus

Using the Syllabus with ePortfolio

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: <https://www.rcpch.ac.uk/resources/rcpch-eportfolio-guidance-doctors>



Child Mental Health Introductory Statement

A Child Mental Health Paediatrician is a doctor who has expertise in promoting mental wellbeing, “parity of esteem” (the principle by which mental health must be given equal priority to physical health) and working with children, young people and families with mental health difficulties.

This includes children and young people with somatisation and complex presentations, behavioural challenges, neurodevelopmental disorders, eating disorders, mood disorders, anxiety and other mental health presentations.

Child Mental Health Paediatricians have a thorough knowledge of theoretical aspects of mental health, including psychological, social and neurobiological aspects and apply it in a clinical and advisory capacity. They can use the biopsychosocial model and know the range of psychotherapeutic approaches within the multidisciplinary team.

They are involved in developing formulations, managing complex cases and liaising with other mental health specialists, including paediatricians, paediatric sub-specialists and local teams in order to enhance holistic care. They have the ability to provide specialist regional advice in complex cases.

Sub-specialty Learning Outcomes

Sub-specialty Learning Outcomes		GMC Generic Professional Capabilities
1.	Demonstrates a thorough knowledge and application of theoretical frameworks in mental health.	GPC 1, 9
2.	Demonstrates expertise in the diagnosis and management of children and young people with mental and psychological difficulties.	GPC 3, 5, 6
3.	Effectively promotes mental health and resilience among children, young people, families and communities.	GPC 4, 6, 9
4.	Provides specialist advice on complex clinical presentations with a mental health component, including the psychological impact on staff members and colleagues.	GPC 3, 5, 8
5.	Takes a leading role in advocacy for children and young people with mental health difficulties and promotes parity of esteem.	GPC 1, 2, 3, 5, 6, 7

Sub-specialty Learning Outcome 1



Demonstrates a thorough knowledge and application of theoretical frameworks in mental health.	GPC 1, 9
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Key Capabilities

Conducts a comprehensive assessment of the pattern of relationships and functioning within a family, recognising the importance of infant mental health and early parenting and attachment.	GPC 1, 3, 5
Applies working knowledge and experience of a range of social, psychological and biological interventions.	GPC 3, 5
Applies understanding of the social determinants of mental health.	GPC 3, 5
Establishes the importance of parenting and attachment throughout childhood, adolescence and into adulthood, including intergenerational aspects.	GPC 3, 5, 7
Assesses the role of trauma in contributing to mental health difficulties.	GPC 3, 5, 7
Assesses the role of school, peers, professionals and the media in contributing to mental health difficulties and resilience.	GPC 1, 3, 5, 7
Recognises the impact of their own psychological experience and personality on their clinical practice.	GPC 1, 5
Recognises the dynamics involved in professional interactions, including transference and the ways these are employed therapeutically.	GPC 1, 5
Develops a specialist understanding of behavioural and psychological difficulties in the learning disability and neurodevelopmental groups.	GPC 3, 5

Illustrations

1.	Applies knowledge of classification of mental health disorders using an internationally recognised scheme.
2.	Participates in the development of national guidelines and protocols.
3.	Participates in learning activities that contribute to extending knowledge of theoretical frameworks in mental health through a combination of maintaining a reading log, discussing theories with educational supervisors and accessing relevant courses.
4.	Demonstrates the routine application of theoretical frameworks in mental health.
5.	Performs psychological and psychiatric assessments as part of the Child and Adolescent Mental Health Services (CAMHS) team.
6.	Critically assesses where the patient and their family members are on the motivational cycle and devises appropriate management strategies.

Sub-specialty Learning Outcome 2



Demonstrates expertise in the diagnosis and management of children and young people with mental and psychological difficulties.	GPC 3, 5, 6
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Key Capabilities

Diagnoses and manages children and young people with mental and psychological difficulties.	GPC 3, 5
Develops a diagnostic formulation (eg using biopsychosocial model or “4p framework”), which includes: <ul style="list-style-type: none"> • Comorbidities • Mental health issues in parents and family • Normal and abnormal psychological and social development 	GPC 1, 2, 3
Utilises a range of standardised assessment tools.	GPC 3, 9
Undertakes a mental state examination of a child and young person.	GPC 3, 5
Demonstrates expertise in psychological aspects of safeguarding, particularly emotional abuse and fabricated or induced illness.	GPC 5, 7
Manages systemic (family and medical) difficulties and change, including adherence, motivation, conflict and chronic illness.	GPC 5, 7
Applies pharmacotherapy in the context of holistic management and national clinical guidelines.	GPC 6, 9

Illustrations

1.	Uses diagnostic criteria for mental health disorders through an internationally recognised classification scheme, such as DSM-5 or ICD-10.
2.	Uses a diagnostic formulation when seeing patients with a complex biopsychosocial history.
3.	Uses a diagnostic formulation to guide patient management.
4.	Recognises and manages a range of mental health difficulties and disorders, such as: <ul style="list-style-type: none"> • alcohol and substance misuse • anxiety • challenging behaviour • eating disorders • medically unexplained symptoms and somatoform disorders • mood disorders • obsessive-compulsive disorder (OCD) • post-traumatic stress disorder (PTSD) • self-harm • sleep disorders • tics and Tourette's syndrome, including Paediatric Autoimmune Neuropsychiatric Disorders Associated with Streptococcal Infections (PANDAS)
5.	Diagnoses and manages a range of neurodevelopmental disorders, such as: <ul style="list-style-type: none"> • attention deficit hyperactivity disorder (ADHD) • autism spectrum disorder
6.	Recognises both global and specific learning disabilities and competently leads multidisciplinary or multi-professional management thereof.
7.	Recognises comorbid or coexisting mental health disorders in those with a learning disability.
8.	Recognises and addresses mental health difficulties in carers and close relatives of patients, including the impact on the patient's emotional or physical wellbeing.
9.	Demonstrates knowledge and applies behavioural management methods when assessing and managing patients with challenging behaviour.
10.	Uses a range of standardised assessment tools in the assessment of children with neurodevelopmental conditions and mental health difficulties (eg the Autism Diagnostic Observation Schedule, Second Edition [ADOS-2]; the Autism Diagnostic Interview, Revised [ADI-R]; the Diagnostic Interview for Social and Communication Disorders [DISCO]; the Developmental, Dimensional and Diagnostic Interview [3di]; the Strengths and Difficulties Questionnaire [SDQ]; the Special Needs and Autism Project [SNAP]; the Childhood Autism Spectrum Test [CAST]; and the Child and Adolescent Psychiatric Assessment Schedule [ChA-PAS]).

11.	Undertakes a mental state examination of a child and young person.
12.	Manages systemic difficulties, through the use of family, friends and professionals as part of the system around the child and young person and through experience in family therapy sessions and subsequent individual cases.
13.	Demonstrates expertise gained through being involved in the CAMHS multidisciplinary team.

Sub-specialty Learning Outcome 3



Effectively promotes mental health and resilience among children, young people, families and communities.	GPC 4, 6, 9
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Key Capabilities

Effectively promotes mental health and resilience among children, young people, families and communities.	GPC 4, 5
Leads strategic initiatives for the promotion of mental health and prevention of mental health difficulties.	GPC 4, 5, 8
Supports local professional and voluntary or third-sector organisations with their role in promoting mental health through expert advice and advocacy.	GPC 2, 5, 8

Illustrations

1.	Contributes to the delivery of regional training in mental health topics to a variety of audiences.
2.	Organises or contributes to national training events in mental health.
3.	Supports local development of mental health provision in the community.
4.	Contributes to mental health policy planning.

Sub-specialty Learning Outcome 4

Provides specialist advice on complex clinical presentations with a mental health component, including the psychological impact on staff members and colleagues.	GPC 3, 5, 8
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Key Capabilities

Provides specialist advice on complex clinical presentations with a mental health component, including the psychological impact on staff members and colleagues.	GPC 5, 8
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Illustrations

1.	Contributes to or organises Balint-style local staff support groups.
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Sub-specialty Learning Outcome 5



Takes a leading role in advocacy for children and young people with mental health difficulties and promotes parity of esteem.	GPC 1, 2, 3, 5, 6, 7
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Key Capabilities

Takes a leading role in advocacy for children and young people with mental health difficulties and promotes parity of esteem.	GPC 1, 3, 5
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Illustrations

1.	Builds effective working relationships with a wider team of professionals (including those working in CAMHS, community and acute paediatrics, education, the local authority and commissioning) to support the cause of parity of esteem and advocate for children and young people with mental health difficulties.
2.	Demonstrates awareness of and may contribute to, local and national needs assessments.
3.	Leads on local audits and guideline planning in areas of mental health.
4.	Demonstrates involvement in planning local mental health pathways.
5.	Demonstrates involvement of local and national policy planning.

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.

Key Capabilities	Assessment / Supervised Learning Event suggestions										
	Paediatric Mini Clinical Evaluation (Mini-CEX)	Paediatric Case-based Discussion (CbD)	Paediatric Case-based (DOP/AoP)	Directly Observed Procedure / Assessment of Performance	Acute Care Assessment Tool (ACAT)	Discussion of Correspondence (DOC)	Clinical Leadership Assessment Skills (LEADER)	Handover Assessment Tool (HAT)	Paediatric Multi Source Feedback (MSF)	Paediatric Carers for Children Feedback (Paed CCF)	Other
Conducts a comprehensive assessment of the pattern of relationships and functioning within a family, recognising the importance of infant mental health and early parenting and attachment.	✓	✓				✓				✓	
Applies working knowledge and experience of a range of social, psychological and biological interventions.	✓	✓				✓					✓
Applies understanding of the social determinants of mental health.	✓	✓				✓					✓
Establishes the importance of parenting and attachment throughout childhood, adolescence and into adulthood, including intergenerational aspects.	✓	✓				✓					
Assesses the role of trauma in contributing to mental health difficulties.	✓	✓				✓					
Assesses the role of school, peers, professionals and the media in contributing to mental health difficulties and resilience.	✓	✓				✓	✓				
Recognises the impact of their own psychological experience and personality on their clinical practice.		✓				✓					
Recognises the dynamics involved in professional interactions, including transference and the ways these are employed therapeutically.		✓									✓
Develops a specialist understanding of behavioural and psychological difficulties in the learning disability and neurodevelopmental groups.	✓	✓				✓					
Diagnoses and manages children and young people with mental and psychological difficulties.	✓	✓									

Key Capabilities	Assessment / Supervised Learning Event suggestions									
	Paediatric Mini Clinical Evaluation (Mini-CEX)	Paediatric Case-based Discussion (CbD)	Directly Observed Procedure / Assessment of Performance (DOP/AOP)	Acute Care Assessment Tool (ACAT)	Discussion of Correspondence (DOC)	Clinical Leadership Assessment Skills (LEADER)	Handover Assessment Tool (HAT)	Paediatric Multi-Source Feedback (MSF)	Paediatric Carers for Children Feedback (Paed CCF)	Other
Develops a diagnostic formulation (eg using biopsychosocial model or “4p framework”), which includes: <ul style="list-style-type: none"> · Comorbidities · Assessment of mental health issues in parents and family · Normal and abnormal psychological and social development 	✓	✓		✓	✓					
Utilises a range of standardised assessment tools.	✓	✓		✓			✓			
Undertakes a mental state examination of a child and young person.										
Demonstrates expertise in psychological aspects of safeguarding, particularly emotional abuse and fabricated or induced illness.		✓			✓					✓
Manages systemic (family and medical) difficulties and change, including adherence, motivation, conflict and chronic illness.		✓			✓					✓
Applies pharmacotherapy in the context of holistic management and national clinical guidelines.		✓			✓					
Effectively promotes mental health and resilience among children, young people, families and communities.						✓	✓			
Leads strategic initiatives for the promotion of mental health and prevention of mental health difficulties.						✓				
Supports local professional and voluntary or third-sector organisations with their role in promoting mental health through expert advice and advocacy.						✓				
Provides specialist advice on complex clinical presentations with a mental health component, including the psychological impact on staff members and colleagues.						✓	✓			
Takes a leading role in advocacy for children and young people with mental health difficulties and promotes parity of esteem.						✓	✓			✓



