
Child and Adolescent Psychiatry

Royal College of Psychiatrists Higher Specialty
Curriculum (ST4 – ST6)

Version 1.0

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Purpose Statement

Child and Adolescent Psychiatrists assess and treat children and young people presenting with a wide range of mental health and developmental disorders.

A Child and Adolescent Psychiatrist recognises the different clinical presentations across the age-span and developmental stages, from infancy to the onset of adulthood, and works with parents/carers for the child as appropriate.¹ The Child and Adolescent Psychiatrist works across age-related transitions, or service transitions with other psychiatric specialties when appropriate, and works within the systems and networks related to the child, which will include general practice and paediatric services. The Child and Adolescent Psychiatrist has the specialist knowledge to recognise the developmental changes in children and young people's competency and capacity to make decisions about their treatment.

It is clear that the need for Child and Adolescent Psychiatrists across the psychiatric specialties is growing throughout the UK.^{2,3,4} The NHS Digital Survey (2018) showed that 1 in 8 children had a mental disorder; an increase from 1 in 10 in 2000.⁵ It is highlighted that 50% of all lifetime cases of mental disorder have origins in childhood or in adolescence.⁶

The survey highlights an overall increase in the prevalence of emotional and behavioural disorders, emphasising a high rate of self-harm in teenage girls (1 in 4 of 17-19-year old females are reported to self-harm⁷). An increased rate of suicide has also been stated.⁸

Higher rates of mental health needs were similarly described in young people who were using social media regularly. In particular, there is growing evidence demonstrating the link between higher mental health needs and morbidity, with increasing amounts of 'on screen' time.⁹

Speciality training in Child and Adolescent Psychiatry usually begins with recruitment to the training programme after successful completion of Core Psychiatry training and the RCPsych examinations (MRCPsych).

¹ [A career in Child and Adolescent Psychiatry. BMJ, 2016](#)

² [Facing the Facts, Shaping the future: Draft health and care workforce strategy 2027. Health Education England, 2017](#)

³ [The Commission to Review the Provision of Acute Inpatient Psychiatry Care for Adults in England, Wales and Northern Ireland: Background briefing paper. The Commission on Acute Adult Psychiatric Care, 2015](#)

⁴ [The state of care in mental health services 2014 to 2017. Care Quality Commission, 2017](#)

⁵ [Number of children and young people accessing NHS funded community mental health services in England, April 2018 to March 2019, Experimental Statistics. NHS Digital, 2019](#)

⁶ [Mental health statistics: children and young people. Mental Health Foundation, 2019](#)

⁷ [Mental Health of Children and Young People in England, 2017 \[PAS\] NHS Digital, 2018](#)

⁸ [One in eight of 5 to 19 year olds had a mental disorder in 2017 major new survey finds. NHS Digital, 2018](#)

⁹ [Social media and young people's mental health. Mental Health Foundation, 2016](#)

It is recommended that Child and Adolescent Psychiatry training is undertaken over an indicative 36 months (Whole Time Equivalent) in order to achieve the required capabilities and gain the necessary experience for entry on to the specialist register.

The purpose of this training curriculum is to enable the Consultant Child and Adolescent Psychiatrist to specialise in the assessment, diagnosis, treatment and management of mental health and developmental disorders in infants, children and young people (0-18 years of age). This includes evidence-based person-centred¹⁰ holistic¹¹ (which includes biological, psychological, and social) interventions, as well as preventative strategies. These include community child and adolescent mental health services (CAMHS), crisis and home treatment, inpatient and other Tier 4 CAMHS, as well as other settings such as acute and community paediatric settings, as well as primary care and local authority services.

The curriculum builds on the clinical capabilities attained in Core Psychiatry training, such as: advanced communication and interpersonal skills, examination skills, diagnosis, and treatment, to a mastery level. It also involves the further development of capabilities such as leadership and management, teaching, research, and quality improvement.

This curriculum provides a framework for training. It enables the achievement of essential specialty-specific clinical and generic professional capabilities through development of the professional values, behaviours, knowledge, and skills required in order to provide high-quality, evidence-based care for children and young people.

Trainees will rotate through a variety of approved Child and Adolescent Psychiatry posts to ensure they get clinical experience and develop the curriculum capabilities in a variety of clinical settings. A Consultant Child and Adolescent Psychiatrist will be able to work with and manage mental health conditions for infants, children, and young people across the 0-18 age range, with acute and long-term illnesses. The long-term conditions include neurodevelopmental disorders such as learning disabilities, Autism Spectrum Disorders (ASD), Attention Deficit Hyperactivity Disorder (ADHD), Tic disorders, and other neurodevelopmental conditions. They would also manage the complex co-morbidity between mental health disorders and neurodevelopmental conditions (e.g. a young person with ASD and an eating disorder/child with ADHD and depression/psychosis). A Consultant may work across settings such as community mental health teams, and in specialised settings, such as CAMHS eating disorder services, CAMHS specific crisis intervention and home treatment services, inpatient units and specialist services for children and young people 'looked after' (i.e. children and young people in the care of the local authority). This work is underpinned by an understanding of how developmental stages and age impact on clinical

¹⁰ **Person-centred** – focuses on the patient as a person, with 'personhood' being its superordinate principle. Takes into account all protected characteristics in doing this.

¹¹ **Holistic model / approach** – understanding and applying the psychological, biological, social, cultural and spiritual context in the delivery of person-centred mental healthcare.

presentations. The Child and Adolescent Psychiatrist evaluates the interaction between the child/young person and their various contexts such as family, education and social care and uses this to inform the formulation and management plan.

Further curricula are available for the following other established psychiatry specialties:

- General Psychiatry
- Forensic Psychiatry
- Psychiatry of Learning Disability
- Medical Psychotherapy
- Old Age Psychiatry.

Child and Adolescent Psychiatry has limited interdependencies with other psychiatric specialities. During training in Child and Adolescent Psychiatry, a trainee develops the knowledge and skills needed to have overall responsibility for clinical care, team leadership, and understanding governance and supporting structures.

The indicative 36 months (WTE) spent in training will provide appropriate development of transferable skills and experience (e.g., advanced leadership, emergency psychiatry and complex decision making) as well as specialised skills and experience in Child and Adolescent Psychiatry. The skills and knowledge trainees develop and demonstrate in their training have not changed in this new curriculum.

Trainees may also undertake dual training with Learning Disability, Forensic Psychiatry and Medical Psychotherapy, building upon skills from training in Child and Adolescent Psychiatry. These GMC approved dual-training programmes include shared capabilities and combinations of skills and experience for diverse service and population needs. Due to these shared capabilities, dual programmes can be undertaken in less than six years, which would be the standard recommended training time for training separately in two psychiatric specialties. Typically, training in the above dual CCT programmes takes an indicative five years.

The Child and Adolescent Psychiatry learning outcomes are mapped to the Generic Professional Capabilities (GPC) Framework, ensuring ease of transfer between medical specialties. Through attainment of the High Level Outcomes (HLOs), this curriculum will enable trainees to become Consultants who work in multidisciplinary and multi-agency teams, provide leadership in formulating person-centred systemic management plans and participate in research, teaching and training in a variety of clinical settings.

This purpose statement has been endorsed by the GMC's Curriculum Oversight Group and confirmed as meeting the needs of the health services of the countries of the UK.

The below tables outline the High Level Outcomes (HLOs) and Key Capabilities (KCs) to be achieved under 16 key themes.

The reference in brackets below each HLO is to the GMC Generic Professional Capabilities. HLOs are mapped to the nine GPCs.

High Level Outcome 1 (GPC 1)	Demonstrate the professional values and behaviours required of a Consultant Psychiatrist with reference to Good Medical Practice, <u>Core Values for Psychiatrists (CR204)</u> and other relevant faculty guidance.
Themes	Key Capabilities (KCs). By the end of ST6, you will be able to:
1.1 Professional Relationships	<p>Work collaboratively with patients, families, carers of all ages and colleagues respecting their autonomy, diversity and valuing their contribution.</p> <p>Recognise, validate and actively address systemic and structural inequalities, intersectionality, and their impact on clinical outcomes for patients and their carers of all ages and on working relationships with colleagues.</p> <p>Consistently demonstrate person-centred holistic clinical approach to children and young people/patients aged 0-18 years and their families and carers, that is honest, empathic, compassionate, and respects their dignity while maintaining therapeutic optimism.</p> <p>Demonstrate flexibility, leadership, use of initiative, prioritisation, and adaptability, effectively managing your time and resources and using new technologies as appropriate.</p>
1.2 Professional Standards	<p>Understand the impact of workload, patient factors, and organisational dynamics on your own well-being and help trainees and other colleagues in doing so too.</p> <p>Use supervision and reflection effectively recognising your skills, limitations, and your duty of candour.</p> <p>Apply strategies to take care of your wellbeing, seeking timely support and guidance, including acknowledging if you have a protected characteristic which might impact on your training or if you are having difficulties adapting to working in the UK.</p> <p>Use the method of receiving, reflecting and responding as a clinical leader within the team and actively promote reflective practice as a means of understanding the emotional impact of the clinical work (including trauma, suicide and homicide) on an individual and systemic level.</p> <p>Consistently demonstrate a positive and conscientious approach to the completion of your work.</p> <p>Make clear, accurate and contemporaneous records.</p>

	Promote CAP as a specialty, including acting as an advocate for patients aged 0-18, and parents, family members and carers of all ages.
	Work with colleagues in a way that demonstrates appropriate professional values and behaviours, in terms of supporting colleagues, respecting difference of opinion, and working as a collaborative member of a team.
	Work autonomously and provide clinical leadership to MDT colleagues within an appropriate supervision structure.
	Demonstrate an understanding of the principles of sustainability and how they underpin sustainable psychiatric practice
High Level Outcome 2.1 (GPC 2)	Demonstrate advanced communication and interpersonal skills when engaging with patients, their families, carers of all ages, their wider community, colleagues and other professionals.
Theme	Key Capabilities (KCs). By the end of ST6, you will be able to:
2.1 Communication	Consistently demonstrate high level skills (independent practice) in effective communication with children and young people across the age range 0-18, adopting developmentally appropriate techniques in assessment, communication and interaction.
	Consistently demonstrate effective communication approaches with patients and relevant others, including those with neurodevelopmental disorders making reasonable adjustments and adaptations where appropriate, including the use of new technologies.
	Consistently use active listening skills and empathic language which respects the individual, removes barriers and inequalities, ensures partnership and shared decision-making and is clear, concise, non-discriminatory and non-judgemental.
	Demonstrate an adaptable approach which considers communication, sensory and cognitive needs, as well as the ethnic, social, cultural, spiritual and religious context of a patient making reasonable adjustments where appropriate.
	Demonstrate skills in supporting those in whom English is not their first language, including the use of interpreters, and providing information in other languages
	Collect, assimilate, formulate and share information effectively with others, systemically, in a timely manner.

	Produce specialist reports that are comprehensive, timely, accurate, appropriate to context, and within the limits of your expertise in CAP.
	Effectively ensure active participation and collaboration with patients, families, carers of all ages, and other relevant persons in a variety of clinical and non-clinical settings.
	Manage the impact of different communication styles on patients and relevant others adapting formats tools and technologies to need.
	Understand the ways in which you, as well as patients and others communicate both verbally and non-verbally (CORE).
High Level Outcome 2.2 (GPC 2)	Demonstrate advanced skills in the psychiatric assessment, formulation, diagnosis and person-centred holistic* management of an appropriate range of presentations in a variety of clinical and non-clinical settings within Child and Adolescent Psychiatry.
Theme	Key Capabilities (KCs). By the end of ST6, you will be able to:
2.2 Clinical Skills	Demonstrate an appropriate understanding of a person-centred holistic approach to mental disorders, including a knowledge of developmental, genetic and epigenetic risks (including resilience and vulnerability factors) and neurobiological influences on mental disorder.
	Apply expert knowledge of the impact of human psychology, including the importance of early relationships, attachment styles, parenting, adverse childhood experiences and traumatic events on the clinical presentation of children and young people across the age range of 0-18 years.
	Apply expert knowledge of learning and behavioural stages of human development across the age range of 0-18 years, including knowledge of normative as well as variations in presentations, for example with neurodevelopmental conditions, and across cultures and apply this knowledge to daily clinical practice.
	Apply expert knowledge of the social determinants of health, and systemic factors including the “lived environment”; environmental factors, technologies and the impact these have on the aetiology and presentation of mental disorder across the 0-18 years age span.
	Receive a full psychiatric history from the patient and collateral history from a range of informants and perform a Mental State Examination (MSE) across the range of mental and neurodevelopmental as well as neuropsychiatric disorders in the 0-18 age group.

	Assess patients from a range of different cultural, spiritual, and religious backgrounds, including asylum seekers and refugees, and demonstrate an understanding of how protected characteristics may impact on clinical presentation.
	Conduct a thorough physical examination and undertake and advise on relevant physical investigations.
	Assess the general health of your patients (including consideration of nutritional, metabolic, endocrine and reproductive factors and disorders and the physical and mental impact of substance use and addiction on clinical presentation), taking into account the impact of their physical health on their mental health needs and vice versa.
	Assess independently patients across the age range of 0-18 and establish management plans across a wide range of clinical settings (including Tier 4 services) and wide range of clinical situations (routine, urgent and emergency).
	Apply relevant classification systems to establish a psychiatric diagnosis and differential and use these in a developmentally and systemically informed manner when communicating with patients and others.
	Establish a formulation based on the clinical presentation using an appropriate framework and share with patients and others in a timely and appropriate manner.
	Construct a management plan to ensure continuity of care which manages the risk of self-harm, suicide, risks to others, as well as other risks, and lead on the formulation and review of a risk management plan in collaboration with the patient, parents, persons with parental responsibility, and other professionals involved in the network around the patient.
	Lead on managing the impact of unconscious processes through the provision of supervision and reflection, to ensure that the patient continues to receive safe and effective clinical care.
	Actively promote and help patients and their families/carers to develop self-management strategies and use help from experts by experience.
	Take into account the impact of other health issues (including feeding and nutrition, substance use, and development) in devising safe and effective medication treatment
	Provide consultation to other professionals regarding the impact of psychotropic medication, psychological and psychotherapeutic interventions for patients in the 0-18 age group in a wide range of situations and settings, and regarding the interaction between physical health and mental health.

	Make independent assessment and seek appropriate consultation regarding other biological treatments for mental disorders.
	Undertake assessment and treatment in two evidence-based psychological or psychotherapeutic modalities.
	Manage the impact of unconscious processes through the provision of supervision and reflection, to ensure that the patient continues to receive safe and effective clinical care. A good way to attain this is via regular attendance at a Balint group or case-based discussion group.
	Assess the suitability of psychotherapeutic interventions and their effectiveness especially when used in conjunction with other treatment modalities such as psychopharmacology and other biological/physical treatments.
	Demonstrate an understanding of how physical treatments can be used for the treatment of mental disorders and apply this under supervision.
	Lead on the timely transition of care for patients to different services actively involving patients, based on their person-centred holistic needs and systemic factors and taking into account relevant transition protocols and guidelines.
High Level Outcome 2.3 (GPC 2)	Apply advanced management skills within Child and Adolescent Psychiatry in situations of uncertainty, conflict and complexity across a wide range of clinical and non-clinical contexts.
Theme	Key Capabilities (KCs). By the end of ST6, you will be able to:
2.3 Complexity & Uncertainty	Recognise and understand unconscious processes, including transference, countertransference, projection and splitting and the impact of these on yourself and others.
	Demonstrate proficiency in recognising and safely managing clinical uncertainty, ambiguity, and complexity in those with mental disorders across the range of clinical contexts.
	Work within the limits of your clinical capabilities, seeking timely support and consultation.
	Demonstrate an understanding of individual variation and the impact of social, cultural, spiritual and religious factors, including effects of deprivation, discrimination and racism.
	Observe, absorb, contain and reflect on complex clinical/non-clinical situations.

	Develop a balanced response as a part of helping other professionals in managing differences of opinion and professional disagreements in complex and uncertain situations.
	Ensure timely review of the formulation and management of the health and care needs of patients when the outcome is not as expected or hoped for.
High Level Outcome 3.1 (GPC 3)	Apply advanced knowledge of relevant legislative frameworks across the UK to safeguard patients and safely manage risk within Child and Adolescent Psychiatry.
Theme	Key Capabilities (KCs). By the end of ST6, you will be able to:
3.1 Knowledge of legal and organisational frameworks in your UK jurisdiction	Apply knowledge of health and care systems, as well as national policies, priorities and national drivers linked with delivery of CAMHS.
	Balance the duty of care to the patient and the protection of others within the framework of human rights when considering the use of legal powers.
	Apply the current legislation governing the care and treatment of children and young people with mental disorders.
	Apply knowledge about the role of parents/ persons with parental responsibilities and the relevant medico-legal frameworks.
	Meet the requirements to apply for relevant statutory approval where appropriate.
High Level Outcome 3.2 (GPC 3)	Work effectively within the structure and organisation of the NHS, and the wider health and social care landscape.
Theme	Key Capabilities (KCs). By the end of ST6, you will be able to:
3.2 Working within NHS and organisational structures	Provide consultation to others on the complex medico-legal frameworks in CAP and policy changes in the delivery of CAMHS.
	Provide clinical leadership and consultation regarding the complex context of the patient's developing competence/ capacity as well as their confidentiality, in terms of seeking their consent, active participation and collaboration in decision making about treatments.

High Level Outcome 4 (GPC 4)	Demonstrate leadership and advocacy in mental and physical health promotion and illness prevention for patients within Child and Adolescent Psychiatry and the wider community.
Theme	Key Capabilities (KCs). By the end of ST6, you will be able to:
4.1 Health promotion and illness prevention in community settings	Apply knowledge of social determinants of mental health (such as societal health inequalities, the social, economic, cultural, spiritual and religious factors and impact of technology) to promote good mental health.
	Identify and challenge stigma and other barriers to accessing child and adolescent mental health services.
	Collaboratively work with the wider community around health promotion and illness prevention with regards to children and young people addressing health inequalities and the social, cultural, spiritual and religious determinants of health.
	Demonstrate understanding of the national health priorities in your UK jurisdiction, including the rationale behind annual health checks and associated health plans.
	Understand the benefits as well as potential harms and risks inherent in health-care interventions and apply this understanding in working with children and young people.
	Apply understanding of the link between good emotional mental health and quality of life for children and young people.
	Advocate for early intervention to promote health.
High Level Outcome 5 (GPC 5)	Demonstrate effective team working and leadership skills to work constructively and collaboratively within the complex health and social care systems that support people with mental disorder.
Themes	Key Capabilities (KCs). By the end of ST6, you will be able to:
5.1 Teamworking	Use your understanding of how individual personal qualities, emotions and behaviours impact on teamworking and the quality of patient care.
	Understand team dynamics and use effective negotiation skills to resolve conflict and dysfunction.
	Model, educate and adapt the service, using conflict resolution skills within and between teams, co-producing improvements with patients and carers.

5.2 Leadership	Demonstrate an understanding of your own leadership skills and behaviours, the impact these have on others, reflect on and explain decisions in a transparent manner.
	Demonstrate the development and application of your own leadership skills in a variety of clinical and non-clinical settings.
	Demonstrate inclusive leadership style and awareness of the impact of hierarchy and power within relationships with patients and colleagues.
	Demonstrate an understanding of how your own leadership style and approach impact on others, adapting your approach to meet the needs of the team.
	Apply an understanding of approaches and techniques of leadership.
	Mentor and support colleagues to enhance their performance and support their development.
	Appraise the performance of colleagues and escalate concerns.
	Demonstrate leadership in the context of team and multiagency working.
High Level Outcome 6 (GPC 6)	Identify, promote and lead activity to improve the safety and quality of patient care and clinical outcomes of a person with mental disorder.
Themes	Key Capabilities (KCs). By the end of ST6, you will be able to:
6.1 Patient safety	Understand and apply the principles of clinical governance and the impact of 'human factors' and team dynamics to assure patient safety and quality of clinical care.
	Advocate for the inclusion of the 'voice' of patients and families/carers as an important part of assuring patient safety and quality of services.
	Raise and address issues of patient safety and quality of care in a timely manner.
6.2 Quality improvement	Understand the role of the voice of the child and young person ('expert by experience') in improving patient care.
	Use quality improvement methodologies to identify and implement improvements within your service.

High Level Outcome 7 (GPC 7)	<p>Lead on the provision of psychiatric assessment and treatment of those who are identified as being vulnerable within Child and Adolescent Psychiatry.</p> <p>Demonstrate advocacy, leadership and collaborative working around vulnerability and safeguarding in patients, their families and their wider community.</p>
Themes	Key Capabilities (KCs). By the end of ST6, you will be able to:
7.1 Safeguarding	<p>Apply knowledge of the developmental stages of children and young people, relevant legislative frameworks, and systemic sociocultural, spiritual and religious issues, to assess safeguarding needs of patients and others.</p> <p>Raise safeguarding concerns in a timely manner, with the relevant professionals and agencies, and actively participate in safeguarding processes.</p> <p>Advocate, educate, support, and supervise colleagues in the recognition of safeguarding concerns, and how to act in a timely manner within relevant local protocols.</p>
High Level Outcome 8.1 (GPC 8)	<p>Promote and lead on the provision of effective education and training in clinical, academic and relevant multi-disciplinary settings.</p>
Theme	Key Capabilities (KCs). By the end of ST6, you will be able to:
8.1 Education & Training	<p>Provide education and training to medical and multi-agency colleagues including effective planning, delivery techniques and the use of feedback.</p> <p>Understand your own training needs and pursue your own continuing professional development.</p> <p>Understand the principles of co-production and have the ability to collaborate with children and young people and families/ carers to deliver education and training.</p>

High Level Outcome 8.2 (GPC 8)	Demonstrate effective supervision and mentoring skills as essential aspects of education to promote safe and effective learning environments.
Theme	Key Capabilities (KCs). By the end of ST6, you will be able to:
8.2 Supervision	Demonstrate the professional qualities of an effective trainer, teaching and guiding individuals and groups, providing safe and effective clinical supervision in emergency and non-emergency situations or settings.
	Provide clinical supervision and mentoring including those in training and within the multi professional team.

High Level Outcome 9 (GPC 9)	Apply an up-to-date advanced knowledge of research methodology, critical appraisal and best practice guidance to clinical practice, following ethical and good governance principles.
Theme	Key Capabilities (KCs). By the end of ST6, you will be able to:
9.1 Undertaking research and critical appraisal	Critically evaluate data, papers, reviews, and meta-analyses and implement findings in daily clinical practice.
	Translate research into local clinical practice and disseminate critical appraisal findings to wider communities.
	Apply knowledge of up to date appropriate statistical methods.
	Demonstrate proficiency in the use of objective evidence-based clinical assessment instruments.
	Work within ethical frameworks when carrying out or appraising research.
	Apply the principles of Research Study Protocols where available.
	Demonstrate practical contribution to an ethically approved research study.
	Undertake research or academic activity, including a literature review at a level suitable for publication in a peer reviewed journal.