

INTRODUCTION

A strong foundation in normal child development and behaviour is essential for promoting optimal health in children. At the completion of pediatric residency program, the resident should be able to:

1. Assess and manage common developmental behavioural problems of childhood and adolescence
2. Act as a consultant to family physicians and other agencies with regard to these problems
3. Make appropriate referrals to other subspecialties, professional and community agencies

MEDICAL EXPERT

1. To develop knowledge of the spectra of normal development: gross motor, fine motor, speech-language, person-social, behavioural, play and temperament, including the timing of various milestones in each of these domains.
2. To develop appropriate skills in gathering information from history taking, family interview and from other sources (e.g. school personnel) to assess children with developmental problems. Clinical assessment to be consistent with principles of family-centred care, with special attention to the family's priorities.
3. To develop skills for age appropriate physical examination and neurodevelopmental assessment with special attention to neurological examination and dysmorphic features.
4. To recognize and develop an approach to the assessment and diagnosis of children with the following disorders:
 - Mental retardation syndromes
 - Pervasive developmental disorder / autism
 - Attention deficit disorder
 - Learning disabilities
 - Developmental language disorders
 - Cerebral palsy
 - Spina bifida
 - Neuromuscular disorders
 - Cleft lip and palate
 - Hearing and visual impairment

5. Develops an appropriate knowledge of use of psychopharmacological agents (stimulants, anxiolytics, neuroleptics, antispasticity)
6. Has an understanding of the developmental services for children in the community
7. To understand the types of developmental and psychoeducational tools available to assess children with developmental disorders (e.g. parent-completed questionnaires for emotional and behavioural symptoms, Canadian Pediatric Society Manual of learning and academic skills, measures of language and cognitive development used by speech and language pathologists and psychologists).
8. To understand the indications for specific neuroimaging, genetic, and biochemical tests as part of investigation for children with neurodevelopmental disorders
9. To develop knowledge and skills in the management of the above conditions (Objective 4). This should include the ability to formulate an appropriate management plan, including the components of the plan such as referral to other health disciplines, medical management and followup.

In addition for PGY3: To identify and prioritize an evidence based management plan of the conditions in Objective 4: including counseling, pharmacotherapy (stimulants, anxiolytics, neuroleptics, antispasticity), behavioural therapy, physiotherapy, occupational therapy, speech and language therapy, and educational interventions.

10. To develop skills in assessing children and counseling parents in regard to the management of common behavioural challenges (e.g. sleep problems, tantrums, aggression, oppositional behaviour and anxiety).

COMMUNICATOR

1. To develop the skills required to communicate appropriately with children who have special needs and their families
2. Develops the skills required to communicate feedback to culturally and socially diverse families
3. Develops the ability to report concisely and efficiently (verbally and in writing), the assessment of children with developmental disorders
4. Understands and follows a family centered approach to decision making

COLLABORATOR

1. To understand the role of community agencies and programs providing developmental services
2. To understand the role and expertise of members of an interdisciplinary team who provide support to children with developmental problems (including physiotherapy, occupational therapy, speech pathology, psychology, audiology, early intervention, behavior therapy, public health nurse, etc)
3. To develop the skills to effectively communicate with the members of an interdisciplinary team and collaborate in shared decision-making.

MANAGER

1. Prioritizes and manages multiple simultaneous clinical demands
2. Delegates and supervises effectively
3. Shows an awareness of cost-benefit considerations inpatient care decisions

HEALTH ADVOCATE

1. Recognizes the advocacy needs of children with developmental disabilities and their families
2. Assists children and their caregivers in navigating health care and community systems

SCHOLAR

1. Sets learning objectives based on clinical encounters and identified knowledge gaps, uses various resources (including the scientific literature) to increase knowledge base, critical appraisal or reviewed material
2. Enhances the learning experience of other trainees (medical students, other residents) by sharing knowledge, providing supervision, and constructive feedback
3. Presents in a clear, comprehensive and critical synthesis of a developmental topic at a lunchtime seminar

PROFESSIONAL

1. Prompt and consistent attendance at scheduled clinics, completes reports in a timely fashion, follows up on phone calls and investigations, respects issues of confidentiality, takes initiative in scheduling learning experiences

2. Develops an understanding of bioethical issues involved in developmental care (e.g. implications of genetic testing, the social implication of labeling, controversy regarding alternative therapies).

June 17, 2008