Comments on Developmental and Behavioural Paediatrics by Dr Dorothy Chan/PWH

Additional to current suggested curriculum, I would like to add on some points as follows:

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| Topics | Basic Training | Higher training |
| Normal child development | * Master the basic knowledge of childhood development is an interaction of nature and nurture
* Understand the environmental, social, psychological factors will affect childhood development
* Adverse childhood experiences influencing the development
* Understand the dynamic clinical criterion assessment Vs Standardize normative assessment
* Can conduct clinical assessment accurately
* Knowing the developmental facilitating skill for normal children
* Understand the parenting technique to facilitating realistic expectation and attachment
* Identify high risk psychosocial conditions that will affect the normal adoption of development
 | * Intervention to high risk children even not go into developmental delay (proactive)
* Multidisciplinary professional joint approach to intervene for the high risk psychosocial conditions.
* Early notifications to related authorities for child protection action if needed
* Identify psychological abuse cases
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| Developmental assessment for formulate rehabilitation plan | * Master the key clinical presentations of different developmental disorder e.g. isolated language delay Vs Autism Spectrum Disorder (ASD)
* Early sign of dyslexia
* Investigations for underlying pathological causes of developmental problems like genetics, metabolic and neurological cause.
* Understanding environmental factors and psychometric parameters like executive function in developing ADHD
* Understanding which specific diagnostics assessment tools are available
* Early developmental facilitation skills even formal diagnostics assessment has not been conducted as interim support
* Knowing the technique in breaking bad news
* Counselling technique in diagnosis and formulate initial interim rehabilitation plan
* Sort out any reversible psychosocial factors
* Get use and familiarize community resources and interim support with early intervention.
 | * Formal specific developmental assessment like Griffiths, ADOS, ADRI, ADHD Swan etc
* Able to make a definitely diagnosis for simple developmental problems like global delay, language delay or social deficit and refers to appropriate professionals
* Understand some of the specific assessments are under different professionals like IQ test needs to be conducted by psychologist
* Understands limitations on specific normative developmental assessment
* Master community and private assessment services
* Delineate the needs of these kinds of specific assessment
* Can interpret and integrate all the reports of formal assessment
* Formulate individualized specific rehabilitation plan including individual training, parental training, school accommodation and social adjustment if needed
* Knowing some specific training technique for different specific developmental disorder e.g. visual clues for ASD, simple rules and contracting for ADHD, how to build up executive function etc
* Issued recommendation documents to relevant professionals for interim support
* Issue DA for appropriate candidates
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| Community rehabilitation service | * Should know the existing rehabilitation and education supporting system like preschool ages service is provided by SWD, school age service is under Education Department
* Understand the existing funding system for subsidy on rehabilitation service in HK
* Understand the logistics in referring system
 | * Familiar for what specific training is provided by different kinds of rehabilitation service like OPRS, EETC, ICCC and SCCC
* Understand how children with SEN be admitted to primary school
* Understand how to issue the recommendation accommodation at schools
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| Public advocacy and interdisciplinary sharing | * Understand most of the developmental problems prognosis is governed by environmental factors like parenting, acceptancy and availability of rehabilitation service
* Attending Parental and public education and interdisciplinary sharing is highly recommended
* Attending multidisciplinary meeting for rehabilitation progress
* Attending welfare plan meeting if psychosocial factors are significant
 | * Conduct some of the public and parenting education workshops, seminars
* Share the experiences or cases presentation in professional conference or meeting like grand round
* Can conduct family support counselling
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| Personal development like research  | * Exposure to difference specific intervention like alternative medicine in SEN
 | * Able to conduct some research on validating the different kinds of treatment that children of SEN are using like EEG, acupuncture etc
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