

# RCGP Curriculum

## Supercondensed Curriculum Guide

### NEURODEVELOPMENTAL CONDITIONS AND NEURODIVERSITY

#### Role of the GP

- Recognise potential neurodisability and neurodivergence to facilitate early intervention, with access to support and treatment
- Be aware a neurodivergent individual may have been mislabelled as having other conditions such as bipolar disorder or personality disorder
- Understand the local services available to diagnose, assess and support neurodivergent patients
- Use consultation skills to match the needs of service users (such as adapting language and consultation techniques, using advocates or carers with communication expertise, and other communication aids)
- Make reasonable adjustments to accommodate neurodiversity in primary care (such as recognising communication differences or sensitivities in sensory processing)
- Take a holistic approach, working with patients, their families, other health professionals and specialist services to support personalised, evidence-based treatment plans and support. This may include a combination of behavioural interventions, psychoeducation, counselling, and medication
- Suggest appropriate behavioural strategies and lifestyle recommendations (eg, sleep hygiene, healthy diet and exercise)
- Manage comorbidities, including mental health problems such as anxiety and/ or depression, which may present differently from the general population
- Understand the role of schools especially the role of the special educational needs coordinator (SENCO) (additional learning needs coordinator (ALNCO) in Wales).

#### Knowledge and Skills Self-Assessment Guide

##### Symptoms and Signs



- Behavioural problems as an indication of underlying difficulties (eg, neurodivergence with struggles with executive function)
- Delayed or altered development in children
- Difficulties with communication, social relationships or managing daily affairs, such as chaotic organisation, missed or multiple non-attendance at appointments, or poor compliance with medication
- Difficulties processing sensory information, including the perception of pain, interoception and proprioception
- Persistent restricted, repetitive and inflexible patterns of behaviour, interests or activities
- Difficulties with processing emotions and with emotional regulation, such as hyperreactivity and anger
- Physical symptoms related to connective tissue disorders, such as hypermobility, Ehlers-Danlos syndrome and dysautonomia, as well as chronic fatigue, pain and fibromyalgia, may be an indicator of underlying neurodivergence
- Atypical presentation of psychiatric or physical illness because of sensory, communication and cognitive difficulties and poor response to treatment
- Substance misuse, homelessness, sexual abuse, trauma and prison incarceration are all higher in patients with neurodivergence
- Presentation of patients may occur when strategies for compensation fail, such as during transitions.

Knowledge and Skills Self-Assessment Guide

Common and Important Conditions



- Conditions under the neurodivergent umbrella include:
- ADHD
  - Autism
  - Developmental co-ordination disorder
  - Developmental language disorder
  - Tic disorders and Tourette’s syndrome
  - Learning disability (*see separate Learning Disability topic guide*)
  - Specific learning difficulties, including dyslexia and dyscalculia.

Knowledge and Skills Self-Assessment Guide

Examinations and Procedures



- Tailored physical and mental state assessments in neurodivergent patients, recognising that they may be unable to verbalise or describe symptoms typically
- Screening tools and questionnaires for neurodevelopmental conditions.

Knowledge and Skills Self-Assessment Guide

Investigations



- Physical health checks such as blood pressure
- Appropriate blood tests to rule out an alternative underlying cause
- Electrocardiogram (ECG) interpretation.

How this might be tested in MRCGP

AKT



- Diagnostic overshadowing in autism or ADHD and other neurodivergent conditions
- Sex differences in assessment and diagnosis
- Medication for ADHD or tic disorders
- Statutory legislation for vulnerable adults.

SCA

- Phone call: a carer wants to discuss diagnosis and management for a young autistic man who has recently developed sudden jerky movements
- Phone call: a mother wishes to discuss concerns her young son is not progressing well at school due to possible ADHD
- Role player who wishes to discuss work issues due to his concerns about possible autism spectrum disorder (ASD).



WPBA



- Consultation Observation Tool (COT) on teaching a patient with dyspraxia how to use an inhaler
- Log entry about an autistic child and liaison with the child health team to get a statutory statement for school
- Case discussion about the difficulties of shared care in ADHD, especially diagnoses obtained privately.

# LEARNING OPPORTUNITIES (Examples)

## Core Content

- **Communication and Consultation**
  - Reasonable adjustments (eg, for sensitivities in sensory processing)
  - Language and consultation techniques tailored to individuals, using advocates, carers with communication expertise and other communication aids as required
- **Prescribing**
  - Concordance and compliance
- **Co-morbidity**
  - Diagnostic overshadowing
  - Impact of comorbid learning disability
  - Associated mental health problems which may present differently from the general population
  - Associated physical health problems (eg, chronic pain, hypermobility)
- **Team Working**
  - Multidisciplinary team support tailored to individuals
- **Holistic Care**
  - Impact of diagnosis on daily activities (eg, work, diet, exercise)
- **Medico-legal/ Ethics**
  - Capacity, consent and confidentiality
  - Patient autonomy
  - Equality Act
- **Safeguarding**
  - Abuse and vulnerable groups.

## Other Specialties

- Paediatrics
- Speech and language therapy
- Psychiatry
- Psychology
- Dietician.



## Primary care



- Recognition of potential neurodisability and neurodivergence and referral to to facilitate diagnosis and support
- GP with extended role in ADHD clinic
- Reasonable adjustments to support care
- Diagnosis and management of comorbidities
- Carer support
- Social prescriber
- Diagnosis and management of comorbidities.

## Community



- Third sector organisations
- Local council
- Special educational needs coordinator (SENCO) (additional learning needs coordinator (ALNCO) in Wales).