

## Guidance to educators in support of trainees with a neurodiverse condition

Trainees with a new diagnosis of a neurodiverse condition will need your support and understanding as a trainer. Neurodiversity can impact on many areas of educational performance and hence your trainee will need a supportive environment particularly at this time. The PSW team will implement any reasonable support such as specific neurodiversity coaching/ exam support which may be recommended in the psychology report. The PSW team will ask the trainee to share their report (or at least the summary) at the earliest opportunity with their ES and TPD.

Each trainees' situation is different and there may well be adjustments that are recommended in the neurodiversity report, often supplemented by those arising from an Access to Work assessment which employers will need to consider. HEE will also need to consider reasonable adjustments in relation to the Gold Guide. These include considerations around LTFT, training placements, pausing training and/or discounting a period of training time, exceptional additional training time etc.

There are some actions that you as trainers need to consider or take action on:

1. Please read the trainee's 'Diagnostic and Cognitive assessment report' from Genius Within (our PSW's neurodiversity specialist psychology service provider) once this has been shared with you by your trainee. This may run to 30-40 pages but there will be a helpful 'Summary of results and key recommendations' on page 2 and more details of recommendations will be laid out later in the report. [Here](#) is some supporting information from Genius Within and further information can be accessed on our [PSW webpage](#).

It is crucial that the ES and TPD read the recommendations carefully since these can be regarded as adjustments. It rests with the ES, CS, TPD and an APD to assess whether they can be implemented (as a reasonable adjustment).

2. We would strongly suggest that as an ES you arrange a meeting with your trainee as soon as you are able in order to check on their wellbeing and understand how they may be feeling about the report and its recommendations. Explain that while there will be opportunities to discuss the details of any support further, in the short term it may be helpful for the ES and TPD to have an initial discussion around what support might be appropriate from a training programme perspective in order for your trainee to meet the requirements of the curriculum and progress satisfactorily towards completion of their training programme. The PSW Case Manager and if needed the APD aligned to the PSW will be available to support discussions.
3. The psychology report may recommend an Access to Work assessment. This is a government funded scheme which may pay to the employer a proportion of the costs of any specialist learning equipment that might be needed. Your trainee should be guided that an Access to Work assessment (available at <https://www.gov.uk/access-to-work>) is **their** responsibility to action after informing the employer's HR department since this may require access to the workplace. Without it the employer may not be best placed to understand what support your trainee needs.

4. With the permission of the trainee, the PSW Case Manager will act as the 'key contact' in line with the ['Working together in HEE Midlands to support trainees with a disability'](#). The ES and TPD would usually be a part of the 'support network' and you may be needed to attend occasional (usually remote) educational case conference meetings which are held with the trainee in order explore the action plan to support your trainee is developed. This agreed action plan should be documented in their PDP and made available on e-portfolio. As your trainee progresses through the training programme the action plan is likely to evolve.

Trainees, quite understandably may not consider themselves as being disabled but the reason we refer to disability in our guidance not only reflects the terminology in the [GMC's 'Welcomed and Valued' publication](#) but there are statutory obligations that arise in relation to the Equality Act 2010 both for the employer and HEE (as described above).

5. We work closely with our specialist medical training Occupational Health (OH) consultants to seek advice on how to best support training for trainees with a neurodiverse condition. Where applicable, trainees with a new finding of neurodiversity may be referred to the PSW OH consultant<sup>1</sup> for their view on the potential impact on their training and advice on any adjustments to their training. This will usually be done by the PSW Case Manager who will confirm to the ES that this has been actioned.
6. a) The programme should consider whether the trainee's neurodiversity diagnosis may have impacted significantly on their training progress to date. Where supported by a specialist medical training OH report, a period of training time may warrant discounting (GG 4.115). This may for instance be justified where the trainee is at a more advanced level of training at the time of their diagnosis and/or has encountered significant issues with ARCP progress to date. This consideration and any recommendations may arise at the time of an ARCP panel or otherwise and should be discussed with an APD but any recommendations will need to be discussed and confirmed with the Primary or Secondary Care Dean as appropriate. Where training time is discounted this will be formally confirmed to the trainee by the Assessments team and copied to the Programmes team.  
  
b) It is also important that the training programme consider whether a Pause in training would be appropriate until all reasonable adjustments are in place and any training to use specialist equipment has been completed (Gold Guide 4.113/4.114). This effectively means that their training timeline is put on hold and the anticipated end of programme/CCT date is adjusted according to the length of the Pause. A Pause may not necessarily be justified, particularly in longer training programmes where the trainee is in the early years and has not to date encountered significant issues with ARCP progression. A decision to Pause does not require specific guidance from specialist medical training OH but will require discussion and agreement from the ES, TPD, an APD and a conversation with your trainee. On occasions this may need a wider discussion with the HOS and/or Primary or Secondary care Dean. Any Pause in training should be **reviewed 3 monthly** in order to monitor progress with any adjustments and

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<sup>1</sup> A specialist medical training OH opinion from an accredited specialist with practitioner health expertise commissioned through the East Midlands office of HEE Midlands

to consider when the training clock should be restarted (which might be up to 6 months after adjustments have been put in place depending on the individual circumstances). Where a Pause in training is agreed this will be formally confirmed to the trainee by the Assessments team and copied to Programmes team. Please update the Assessments team on any further decisions as to whether to continue or terminate a Pause in training.

NB Trainees who on the basis of a Genius Within report, may have Attention deficit disorder (ADD) or Autistic spectrum disorder (ASD) may require referral to specialist NHS services for confirmation. In this situation the OH physician will, where relevant, advise the trainee's GP to refer to their local service provider. Any significant delays in accessing that service may require consideration of a Pause in training while a report is awaited but this should be discussed with the APD for PSW in the first instance.

7. Please communicate the outcome of your initial meeting with the TPD.

### **Additional information**

Educational progress (assuming the training timeline is active) will be assessed through the ARCP process as usual and the panel should be aware of supportive actions that are in place.

Regular educational meetings with the ES should continue in order to monitor progress and the TPD should be kept informed.

Trainers and trainees should be aware that if support (e.g. coaching or other supportive action) is paused during periods of statutory leave then this should be resumed as soon as possible on return to training. However there would be an expectation that the process for sourcing suitable equipment in collaboration with the employer would proceed during statutory leave in order to ensure as far as possible that there is no delay on return.

### **Checklist of actions for an ES**

- Read the trainee's neurodiversity report
- Arrange a meeting with your trainee as soon as you are able

At the meeting:

- Check on their wellbeing and their initial thoughts on the report
- Check that neurodiversity coaching is being arranged/underway through the PSW
- Guide your trainee to request an Access to Work assessment if recommended in the report
- Raise the possibility of a pause in training to allow any adjustments to be put in place but that this will need further discussions with the training programme
- Where possible upload a supportive summary of your discussions to e-portfolio
- Communicate the outcome of your initial meeting with the TPD.
- Arrange further meetings to monitor progress as needed
- In collaboration with an APD, communicate any decisions on discounting a period of training time or a pause/review of a pause in training to the Assessments team at [assessments.em@hee.nhs.uk](mailto:assessments.em@hee.nhs.uk)

**Roger Kunkler, Associate Postgraduate Dean, October 2021**