# Neurodiversity Support in Yorkshire and Humber

Operational Guidance

##### Yorkshire and Humber Deanery

##### Workforce Training and Education, North East and Yorkshire, NHS England

##### July 2024



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1. Document Status

This is a controlled document. Whilst this document may be printed, the electronic version posted on the SharePoint site is the controlled copy. Any printed copies of this document are not controlled.

This document is not intended to be interpreted as a policy statement. This is a local guidance document for faculty and staff in the Yorkshire and Humber Deanery to enable consistency of application; it is recognised there may be exceptional circumstances when deviation from this guidance may be required.

1. Purpose of the Guidance

This document outlines the NHSE Yorkshire and Humber Workforce Training and Education (NHSE Y&H WTE) approach to supporting postgraduate doctors and dentists in training (PGDiTs) with neurodiversity. This includes confirmation of the circumstances in which NHSE Y&H WTE may provide financial support to PGDiTs for assessment and support.

This guidance applies to all PGDiTs currently in a training post within the Yorkshire and Humber region. Additional procedures apply to PGDiTs training in General Practice, as outlined in [Appendix I](#_Appendix_I_–).

The guidance has been informed by the work of the Conference of Postgraduate Medical Deans (COPMeD). It aims to provide a supportive pathway for PGDiTs who may be impacted by neurodiversity. As a training provider, we are only able to provide assessment where there is a direct influence on training progression. However, this guidance provides suggestions of appropriate support that can be applied where neurodiversity may be a factor, but a PGDiT’s training is not affected.

This process is managed by NHS Y&H WTE’s central Professional Support Team. If you have any questions about this guidance, please do not hesitate to [contact the Professional Support team](mailto:england.professionalsupport.yh@nhs.net).

1. Roles and responsibilities
   1. Professional Support Team

The Professional Support Team has responsibility for managing and maintaining this guidance. The responsibilities of the team referenced within the guidance include managing the neurodiversity assessment request and referral processes and providing advice and guidance to trainers and PGDiTs.

* 1. Associate Dean for Neurodiversity Support for Trainers

The Associate Dean for Neurodiversity Support for Trainers is responsible for providing clinical oversight for the management and maintenance of this guidance. Within the scope of the guidance, they are also responsible for providing support to trainers to identify whether it is appropriate to request a neurodiversity assessment for a PGDiT.

* 1. Professional Support Group

The Professional Support Group has governance responsibility for overseeing the management and operationalisation of this guidance.

* 1. Training Programme Directors

Within the scope of the guidance, Training Programme Directors have responsibility for submitting a request for a neurodiversity assessment and providing appropriate support to PGDiTs.

* 1. Postgraduate Educators

All postgraduate educators should be aware of this guidance and provide appropriate support for PGDiTs accordingly.

1. Definitions
   1. Neurodiversity/Neurodiverse

Neurodiversity refers to the natural diversity of the way the brain experiences, processes and interacts with the internal and external environment (Baruah, 2024; Brown, Rabenstein and Doherty, 2024; Elgendy, 2024; Bell, 2023; Granger et al., 2023; Taylor, 2021).

We are all neurodiverse: no mind is the same and there is no right or wrong way to experience or interact with the world (Duong and Vogel, 2022).

* 1. Neurodivergence/Neurodivergent

Neurodivergence is a term attributed to individuals whose cognitive function differs from the ‘typical’ or ‘normal’ standard; referred to as neuronormativity and/or neurotypicality (Baruah, 2024; Bell, 2023; Granger et al., 2023; Le-Cunff et al, 2023; Fletcher-Watson et al., 2021).

There are many neurodivergent conditions. The ones referenced within the scope of this guidance are dyslexia, dyspraxia, dyscalculia, ADHD and autism. Neurodivergent is an identity term used to describe people who have a neurodivergence.

1. Identification of potential neurodivergence

Requests for NHSE Y&H WTE funding of a neurodiversity assessment should be driven by a need to support a PGDiT’s progression through training and a request for an assessment should only be considered if a PGDiT is not meeting the requirements of the curriculum or progressing with training in the expected manner. If a PGDiT is progressing well and meeting the requirements of their role, they would not meet the criteria for NHSE Y&H WTE support with an assessment. In these circumstances, please refer to [Section 9: Support for PGDiTs who do not meet the referral criteria](#Section9).

The need for an assessment may be self-identified by the PGDiT. Where this is the case, the PGDiT should arrange to meet with their Training Programme Director, to discuss their training and any difficulties they are experiencing.

The need for an assessment may also be identified by an educator, which may be triggered as result of issues around professional behaviours, disengagement with training or the portfolio, an outcome 2 or 3 at ARCP, or following multiple unsuccessful attempts at an examination. These examples are not exhaustive. Where an educator suspects a PGDiT may need additional support, they should discuss their concerns with the PGDiT’s Training Programme Director, who should arrange to meet with the PGDiT to discuss any difficulties they are experiencing.

The standard criteria for a neurodiversity assessment referral, as advised by COPMED, are:

* Two consecutive outcome 3s at ARCP; **or**
* Two unsuccessful attempts at the same exam.

Where the meeting identifies the standard criteria has been met, the Training Programme Director should ask the PGDiT for their consent to submit a request for a neurodiversity assessment.

Should the PGDiT decline consent, the Training Programme Director should seek advice from the Associate Dean for Neurodiversity Support for Trainers by [contacting the Professional Support Team](mailto:england.professionalsupport.yh@nhs.net), and they should recommend appropriate alternative sources of support. For examples of such recommendations, please refer to [Section 10: Support for PGDiTs who decline an assessment.](#Section10)

Where the PGDiT provides consent, the Training Programme Director should submit a request for a neurodiversity assessment to the Professional Support Team; as per [Section 6: Submitting a request for a neurodiversity assessment](#Section6).

Where the standard criteria are met, and the PGDiT has not previously been assessed for neurodiversity, the request will be approved, and the Professional Support Team will submit a referral for a neurodiversity assessment.

Where the standard criteria have not been met, but the Training Programme Director believes there are other relevant circumstances affecting the PGDiT’s progression (based on which it may be appropriate for an assessment to be organised), they may proceed with submitting a request. For example, the PGDiT may have failed a singular examination or received a singular outcome 3, or outcome 2, at ARCP but experience other challenges such as engagement with the portfolio or issues with professional behaviours. Requests submitted outside of the scope of the standard criteria will be considered on a case-by-case basis.

1. Submitting a request for a neurodiversity assessment

A request for a neurodiversity assessment may **only** be submitted by the Training Programme Director. Where a PGDiT submits the request form it will be declined, and they will be notified that an assessment cannot be arranged until a request is submitted by their Training Programme Director.

A request must only be submitted where the PGDiT is aware of, and has consented to, a referral for an assessment being made.

Training Programme Directors should submit a request for a neurodiversity assessment [using the online request form](https://forms.office.com/e/Fpdfg62Csw). We recommend the form is completed with the PGDiT, as it requires contact information to be provided which will be used for the organisation of the assessment.

The Training Programme Director must provide contextual information for the request, including the impact that the potential neurodivergence is having on the PGDiT’s ability to progress with training, any support which has already been implemented locally, and any additional information about the PGDiT’s circumstances that the Professional Support team should be aware of.

Once the request form has been submitted, it will be reviewed by the Professional Support team to identify if it meets the standard referral criteria.

If the request meets the standard referral criteria (as outlined in [Section 5.4](#Standardcriteria)), it will be accepted by the Professional Support team who will make the arrangements to organise the assessment.

If the request does not meet the standard referral criteria, the Professional Support team may ask the Training Programme Director for further information and/or send the request form to the Associate Dean for Neurodiversity Support for Trainers, so they can arrange to discuss the case in more depth.

If, after meeting with the Associate Dean, the request is not accepted, appropriate sources of alternative support can be sought and provided to the PGDiT. Appropriate recommendations are provided in [Section 9: Support for PGDiTs who do not meet the referral criteria](#Section9).

If, after the meeting with the Associate Dean, the request is accepted, the Associate Dean will notify the Professional Support team who will submit a referral for a neurodiversity assessment.

Please note, a PGDiT can only access a neurodiversity assessment through this pathway once. If a request is received for a PGDiT who has previously been assessed via this route, it will be declined.

**The information provided within the request form will** **not be shared beyond the Professional Support Team** (this may include the Associate Dean for Neurodiversity Support for Trainers, as per [Sections 6.7 - 6.8](#Associatedeansharing)). A copy of the request form and any subsequent correspondence will be saved in our Professional Support files, **which are** **only accessible to the Professional Support Team**. We save a copy of the request form so that we have a reference of past support needs, in case the PGDiT needs to access Professional Support in the future.

1. The neurodiversity assessment process

Once a request has been accepted, the Professional Support team will contact the assessment provider, to provide them with the PGDiT’s contact details (as provided on the request form) and request that an assessment be organised. Both the PGDiT and the Training Programme Director who submitted the request will be copied into this referral email, for their reference.

A copy of this referral email will be saved in the PGDiT’s central trainee file, in line with NHS England’s records management policy. Please note the referral email will **not** contain any contextual information as to the reasons behind the referral (i.e. the detail provided in the assessment request form will remain confidential).

The assessment provider allocate a psychologist who will liaise with the PGDiT directly to organise a suitable date and time for the assessment; usually within 15 working days of referral submission.

In advance of the assessment, the PGDiT will be invited to create an account on the provider’s Client Portal and they will be asked to complete a pre-assessment questionnaire and return it to their psychologist in advance of the appointment. This ensures the psychologist has relevant background information to inform the assessment.

The assessment will be conducted virtually and will usually take three to four hours. There will be opportunities for breaks should this be needed/helpful. The PGDiT should undertake the assessment in an environment where they feel comfortable discussing personal matters, including health conditions and symptoms. For example, a quiet, private space. They will also need good internet connectivity, and a computer. It is not possible to complete the assessment using only a mobile phone.

Once the assessment has taken place, the assessor will produce a detailed client report for the PGDiT, that contains the results of all the individual assessments that were completed.

The assessment can confirm the presence of a neurodiverse cognitive profile. It can provide a diagnosis of dyslexia, dyspraxia, and/or dyscalculia. It can confirm that characteristics are consistent with ADHD and/or autism but cannot provide a medical diagnosis of either condition.

In advance of the assessment, the assessment provider will ask the PGDiT to consent to a range of data collection and sharing statements. This includes whether they agree to an assessment report being shared with their organisation (this being the Professional Support team in NHSE Y&H WTE). It is important to note that this is **not** the same report that the PGDiT receives. It is referred to as a ‘manager’s report’, which is a redacted version of the client report that the PGDiT receives. The manager’s report confirms the existence of neurodiversity (as per [Section 7.6](#Assessmentoutcomes)), if applicable, outlines individual strengths and challenges, and makes recommendations for appropriate support and reasonable adjustments.

Should a PGDiT provide consent for the manager’s report to be shared, **the Professional Support team only will be able to access it**. The Professional Support team will review the report but **will not save a copy and will not share a copy with a third party** (for example, we will not share a copy with the PGDiT’s Training Programme Director). The report will only be reviewed for the purposes of monitoring the assessment referral process and to identify any Professional Support resources we may need to develop. Given this, we encourage PGDiTs, where they feel comfortable doing so, to provide this consent.

As the manager’s report is not shared with the Training Programme Director – by either the assessment provider or the Professional Support team – it is the responsibility of the PGDiT to download and share a copy of their assessment report with their Training Programme Director, their Educational Supervisor and, if appropriate, their employer’s HR department, for the purposes of discussing the outcomes and ensuring appropriate support is organised. In the least, it is expected that the PGDiT will share a copy of the manager’s report with their Training Programme Director.

1. Post-assessment support

After the assessment, the PGDiT should advise their Training Programme Director that the assessment is complete and should arrange to meet with them to discuss the outcomes. It is recommended that the PGDiT sends their Training Programme Director a copy of the manager’s outcome report in advance of the meeting, so they can review the support recommendations beforehand. The meeting may also include the Educational Supervisor and/or other trainers, as appropriate, subject to the PGDiT’s agreement.

The meeting should be used to have a supportive conversation about the strengths that were identified in the assessment and how these can be best harnessed, as well as to identify the specific support needs/reasonable adjustments that the PGDiT may require to their workplace and/or training.

Support that may be applied could include, but is not limited to:

* Recommending the PGDiT access NHSE Y&H WTE’s Neurodiversity and Me module for support with utilising their strengths and developing positive strategies to manage areas of challenge. Guidance for accessing the module is available [on the Professional Support website](https://www.yorksandhumberdeanery.nhs.uk/learner_support/educational-and-supportive-resources).
* Encouraging the PGDiT to submit an [Access to Work application](https://www.yorksandhumberdeanery.nhs.uk/learner_support/reasonable-adjustments-and-practical-support) if they are eligible to and if the assessment has recommended that they would benefit from a Workplace Needs Assessment, neurodiversity coaching, specific adjustments, support, and/or equipment that has an associated cost.
* Suggesting the PGDiT seeks Occupational Health support from their employer, if further advice on the application of reasonable adjustments would be of benefit, particularly in relation to their working environment.
* Guiding the PGDiT through the process of applying for reasonable adjustments to examinations for their specialty and the applicable deadlines. It is important to note, if the PGDiT intends to use one of the assessment reports to support an application for reasonable adjustments, it is usually the detailed client report they will need to submit, as the manager’s report is not usually accepted for these purposes.
* Discussing possible reasonable adjustments that may be made to the PGDiT’s work schedule/working environment and supporting the PGDiT with a subsequent conversation with their employer.
* Identifying practical recommendations of how the Training Programme Director, and other educators, can apply/organise additional support that is appropriate for the specialty and its training requirements.

A combination of these options is likely to be appropriate.

Where the PGDiT has applied for and been successful in securing an Access to Work grant they should request that their lead employer organises and pays for any coaching, equipment purchase or support. It is expected that the lead employer will then reclaim the relevant share of costs from Access to Work.

Where a PGDiT is ineligible to apply for Access to Work or where the Training Programme Director has identified an immediate need for support (for example, a resit examination is imminent and urgent support is needed for developing revision strategies), and where the assessment report has recommended it, NHSE Y&H WTE may be able to provide financial support for neurodiversity coaching. In these circumstances, the NHSE Y&H WTE will fund a maximum of 4 x 2-hour coaching sessions. Should any coaching sessions be required beyond this, the PGDiT will be expected to self-fund them.

If a PGDiT in these circumstances needs to access neurodiversity coaching, they should discuss their needs with their Training Programme Director and the Training Programme Director should [contact the Professional Support team](mailto:england.professionalsupport.yh@nhs.net) to request the coaching and provide the relevant context of urgency. The Professional Support team will refer the PGDiT to the chosen NHSE Y&H WTE-funded coaching provider.

1. Support for PGDiTs who do not meet the referral criteria

A PGDiT with potential neurodivergence may not meet the referral criteria for multiple reasons. Most often, it is likely that neurodiversity is not inhibiting training progression.

Whilst NHSE Y&H WTE is unable to fund a neurodiversity assessment for PGDiTs who do not meet the referral criteria, the Professional Support can provide PGDiTs and their trainers with support and guidance. There are also several recommended mechanisms that the PGDiT’s Training Programme Director and/or Educational Supervisor can put in place to support them.

Recommended support mechanisms include:

* Where it might be valuable for a PGDiT to seek a diagnosis, but they do not meet the required criteria as their training progression is not impacted, we recommend signposting them to their GP to discuss their circumstances to identify whether they can be referred for an appropriate assessment.
  + Suggesting the PGDiT seeks Occupational Health support from their employer, if further advice on the application of reasonable adjustments would be of benefit, particularly in relation to their working environment.
* Signposting the PGDiT to the internal [NHSE Y&H WTE Coaching scheme](https://www.yorksandhumberdeanery.nhs.uk/professional-support/coaching) for support with developing strategies to manage aspects of neurodiversity or other difficulties experienced by PGDiTs that may be causing challenge. Whilst our coaches are not neurodiversity specialists, some of our coaches have an interest in neurodiversity and have been upskilled in coaching neurodiverse PGDiTs, which will be indicated on their coaching profile. We would encourage PGDiTs to consider choosing these individuals as their coach.
  + Encouraging the PGDiT to submit an [Access to Work application](https://www.yorksandhumberdeanery.nhs.uk/learner_support/reasonable-adjustments-and-practical-support), if they are eligible to, where they would benefit from a Workplace Needs Assessment, if they require coaching, specific adjustments, support, and/or equipment that has an associated cost.
* Recommending the PGDiT access NHSE Y&H WTE’s Neurodiversity and Me module to explore whether the content is relevant/helpful to the PGDiT in utilising their strengths and developing positive strategies to manage areas of challenge. Guidance for accessing the module is available [on the Professional Support website](https://www.yorksandhumberdeanery.nhs.uk/learner_support/educational-and-supportive-resources).
* Recommending the PGDiT access the Professional Skills courses on Advanced Communication Skills. The next available courses can be identified by searching for ‘Advanced Communication Skills’ in the search bar [on Maxcourse](https://www.maxcourse.co.uk/heeyhme).
  + Identifying practical recommendations of how the Training Programme Director, and other educators, can apply/organise additional support that is appropriate for the individual PGDiT, their specialty and its training requirements.

A combination of these options is likely to be appropriate.

1. Support for PGDiTs who decline an assessment

A PGDiT may not wish to pursue an assessment for many reasons, and their choice should be respected. The Professional Support can provide PGDiTs and their trainers with support and guidance and there are several recommended mechanisms that the PGDiT’s Training Programme Director and/or Educational Supervisor can put in place to support them.

Recommended support mechanisms include:

* Suggesting the PGDiT seeks Occupational Health support from their employer, if further advice on the application of reasonable adjustments would be of benefit, particularly in relation to their working environment.
* Signposting the PGDiT to the internal [NHSE Y&H WTE Coaching scheme](https://www.yorksandhumberdeanery.nhs.uk/professional-support/coaching) for support with developing strategies to manage aspects of neurodiversity or other difficulties experienced by PGDiTs that may be causing challenge. Whilst our coaches are not neurodiversity specialists, some of our coaches have an interest in neurodiversity and have been upskilled in coaching neurodiverse PGDiTs, which will be indicated on their coaching profile. We would encourage PGDiTs to consider choosing these individuals as their coach.
* Signposting the PGDiT to submit an [Access to Work application](https://www.yorksandhumberdeanery.nhs.uk/learner_support/reasonable-adjustments-and-practical-support), if they are eligible to, where they would benefit from specific adjustments, support or equipment that have an associated cost.
* Recommending the PGDiT access NHSE Y&H WTE’s Neurodiversity and Me module to explore whether the content is relevant/helpful to the PGDiT in utilising their strengths and developing positive strategies to manage areas of challenge. Guidance for accessing the module is available [on the Professional Support website](https://www.yorksandhumberdeanery.nhs.uk/learner_support/educational-and-supportive-resources).
* Recommending the PGDiT access the Professional Skills courses on Advanced Communication Skills. The next available courses can be identified by searching for ‘Advanced Communication Skills’ in the search bar [on Maxcourse](https://www.maxcourse.co.uk/heeyhme).
* Identifying practical recommendations of how the Training Programme Director, and other educators, can apply/organise additional support that is appropriate for the individual PGDiT, their specialty and its training requirements.

A combination of these options is likely to be appropriate.

Where a PGDiT has declined an assessment, we strongly encourage the Educational Supervisor or Training Programme Director to record this in the PGDiT’s portfolio and/or their trainee file.

1. Support for educators

It is important that neurodivergent PGDiTs are supported, but it is equally important to that educators feel supported and well-informed. This includes ensuring there are educational opportunities to increase understanding and familiarisation with neurodiversity, understanding how to best support PGDiTs with their individual circumstances, and having a named contact to seek further advice or guidance.

The Professional Support team has collated a range of supportive resources for educators, and procured appropriate learning materials, all of which can be found on our [Support for Neurodivergence webpages](https://www.yorksandhumberdeanery.nhs.uk/learner_support/support-neurodivergence). We also deliver educational opportunities such as workshops and webinars, focusing on specific aspects of neurodiversity, neurodivergent conditions and neuro-affirmative practices. For more information, please see the [Faculty Development Programme](https://www.yorksandhumberdeanery.nhs.uk/faculty/faculty-development-programme).

Should educators have any questions about neurodiversity support for PGDiTs or about increasing your own understanding of neurodivergent conditions and ways to support PGDiTs, please do not hesitate to [contact the Professional Support team](mailto:england.professionalsupport.yh@nhs.net), who can either provide you with direct assistance or arrange for you to meet with the Associate Dean for Neurodiversity Support for Trainers.

1. Monitoring Compliance and Effectiveness

This Operational Guidance will be reviewed in accordance with updated or new guidance published by COPMeD, or any other organisation as applicable. The Postgraduate Dean’s Senior Team within the Yorkshire and Humber Deanery will ratify new iterations of this guidance.

The Professional Support team will monitor the number and frequency of assessment requests, requests for urgent access to neurodiversity-specialist coaching and post-assessment outcomes and recommendations. This information will only be accessible to the Professional Support Team and will be managed in accordance with the aforementioned principles of confidentiality and information management policies. This information will be used to monitor the efficacy of the process for requesting assessments and to identify any Professional Support resources we may need to develop in response to recurring themes.

The Professional Support team will implement an evaluation process to request feedback from PGDiTs referred for neurodiversity assessments, to ensure we have a mechanism for capturing ways in which we can enhance the process to best meet the needs of neurodiverse PGDiTs.

1. Equality Impact Assessment (EIA)

English Deans are committed to equality, diversity and inclusion (EDI), with a duty to eliminate discrimination, promote equality and ensure inclusive opportunities are available to all with regards to age, disability, gender, ethnicity, sexual orientation, religion or belief in the design and delivery of all our services. English Deans aim to meet and exceed their statutory obligations under the Equality Act 2010 by adopting a continuous improvement approach.

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# Appendix I - Neurodiversity Screening for General Practice Postgraduate Doctors in Training

We do not have capacity to offer Neurodiversity screening for all PGDiTs but will offer this by exception to doctors training in General Practice. In General Practice, the total training time (including permitted extensions) to CCT and entry onto the GP register, is significantly shorter than total training times (including extensions) to achieve CCT and entry to the specialist register in other disciplines. The examination and assessment burden and a short training programme means that PGDiTs in General Practice who are offered neurodiversity assessments for neurodiversity only after two failed examination attempts (for example, the AKT during ST2) may then have insufficient time to benefit from coaching and adaptations adjustments for neurodiversity that would contribute to examination and assessment success by the end of their permitted training time. These PGDiTs would then have no prospect of gaining a CCT in General Practice.

Considering this increased risk to training completion, and subsequent risk to workforce loss in a clinical area of priority, PGDiTs in General Practice are also being offered access to a neurodiversity screening tool from the beginning of their training programme. Guidance on how to access the screening will be provided to General Practice PGDiTs by the General Practice School. Where the screening identifies a high likelihood of neurodiversity, these PGDiTs will be recommended for a neurodiversity assessment. Once referred for an assessment, PGDiTs in General Practice will follow the standard process for all PGDiTs, as outlined in the guidance, from [Section 7.3](#GPProcess) onwards.

We acknowledge there are other short training programmes, such as the core programmes, where there are also mandatory examinations. However, there remains an opportunity to take an examination after a core programme and subsequently enter higher training with the prospect of achieving CCT and entry to the specialist register. These programmes do not therefore pose the same risk of adverse consequences to the PGDiT (such as release from training), as well as to NHSE and patient communities through loss of clinical workforce in a priority area.