The New Subspecialty of Neurodisability

Written by Dr Alison Salt

In September 2003 the STA approved the introduction of the subspecialty of Paediatric Neurodisability. The CSAC is now identifying programmes that will be approved for training in this new subspecialty. Training Grid posts will be available from September 2005 and will be advertised in January. We are aware that there may still be some confusion over the differences between training in this new subspecialty and training in other related subspecialities especially Community Paediatrics. I hope this article will help to make the current situation as clear as possible.

It has been estimated that approximately 2% of the child population will have some level of special educational needs; in an average health district, with a population of 50,000 children, there will be approximately 1,000 children with some level of neurodevelopmental disability. The majority of these children will be referred from primary surveillance and will be managed by Community Paediatricians, with broad competencies in Community Child Health (CCH).

However, neurodisability has become an increasingly complex area of work in which practitioners are expected to be competent in a wide range of skills. In order to deliver a high quality service for children with complex disability the expertise of paediatricians who have had more extensive training in neurodisability will be required.

There are currently 320 Child Development Teams in the United Kingdom. These services generally have a lead Paediatrician who oversees more specialist neurodisability services. For example initial assessment, diagnosis, and on-going management of children with severe learning disability and co-morbidity including epilepsy, moderate to severe cerebral palsy, autistic spectrum disorders, head injury rehabilitation, neurometabolic conditions and children with complex disability. Paediatricians who currently lead these services are often Community Paediatricians or General Paediatricians who have developed their expertise in this area through CPD over many years. In future, those who take lead responsibility for neurodisability in a district will be Paediatricians who have completed subspecialty training in neurodisability. These paediatricians will work in close collaboration with regional Neurology and Neurodisability services. Some paediatricians who undertake subspecialty training in neurodisability and further academic training may also work at tertiary level in the future.

Because of the high prevalence of disability in children, the majority of children with disabilities will continue to be managed by Community Paediatricians. It follows therefore that although a more focused training in Neurodisability will be available, training in CCH will continue to include a significant element of training in neurodisability and community paediatricians will continue to play an important role in managing children with disability. As neurodisability will remain a very important element of training in CCH and many community paediatricians will maintain an interest in neurodisability, it will be essential for the new subspecialty group to maintain its close collaboration with BACCH and the BPNA, both in advising on training and in contributing to their education and scientific meetings.

Trainees who are interested in training in Neurodisability should register their interest with the Neurodisability CSAC by contacting the HST office at the College. Those who have completed core training can then apply for a National Grid training post. A small number of trainees who have already embarked on year 4 or 5 training may wish to seek accreditation of their training in Neurodisability. Most Paediatricians in this position will have been following a training programme in Community or General Paediatrics with an interest in neurodisability. They will be able to apply for Consultant posts described as having an interest in Neurodisability based on their experience and competence. Accreditation in Neurodisability will not be essential, although retrospective accreditation may be possible. To be accredited trainees will need to have their training programme approved and provide evidence that their training meets the requirements of the syllabus as set out in the Neurodisability Training Pack (available on the BACD and BPNA website).

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