CHAPTER 98

NEURODIVERSITY AND SPECIFIC LEARNING DIFFERENCES

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CHAPTER 98

NEURODIVERSITY AND SPECIFIC LEARNING DIFFERENCES

SECTION 1

GENERAL

9801. Background

Neurodiversity (ND) refers to differences that exist in the brain. Our brains naturally vary from person to person, our education varies from person to person, and these variations make up our different strengths and abilities. We all think, move, process information, and communicate differently; we are all cognitively abled in different ways. A Force for Inclusion – Defence's Diversity and Inclusion Policy[1] recognises that we are all different, people work better when they are themselves, and our differences can be used to benefit the team. Embracing ND increases our people's ability to achieve their potential and ultimately contributes to the RN successfully achieving its mission.

9802. Terminology

Within Defence, the term **Specific Learning Differences (SpLDs)** refers to conditions such as dyslexia, developmental coordination disorder, dyscalculia and dyspraxia. More widely in the UK, the terms **neurodivergent or neurodistinct** are used to describe people who have conditions such as autism, visual difficulties and attention deficit and hyperactivity disorder (ADHD). **Learning skills** is also a term used within educational settings. We all learn in different ways and many of us have been taught skills that help us learn more effectively such as time management, note-taking and reading efficiently. **Learning skills** help us acquire new knowledge and can be learnt and developed over time. It is worth noting that how well an individual has had their learning skills developed in the past will impact on the way they learn, and work in the present. The RN ND policy covers all recognised SpLDs, learning skills and neurodistinct traits, whether diagnosed or not, within the RN training and workplace environment.

9803. Governance

In order to provide coherence and accountability of the delivery of this RN policy, an ND Steering Group (ND SG) has been established. Championed by the RN ND Advocate[2] and chaired by Head Policy, Strategy and Plans, members include empowered representatives, ND experts, Phase 1 and 2 representatives, as well as representation from the Neurodiversity Working Group.

[1] Ministry of Defence Diversity Plan 2018 to 2030
https://assets.publishing.service.gov.uk/media/5f2d68ee8fa8f57ad042910f/20180806-MOD_DI_Plan_A4_v14_Final-U.pdf
[2] Search 'Introducing the Royal Navy Neurodiversity Advocate' on MODNet.

9804. Policy

To support the diversity of neurodivergence within our workforce, the ND SG aims to:

a. Raise understanding and remove stigma regarding neurodistinct conditions and traits across the Wholeforce RN to contribute to providing all service personnel[3] and civilian staff[4] with a career where their ambitions can be achieved, and they feel valued.

b. Encourage creativity, using appropriate reasonable adjustment allowing everyone to perform to their best and remove barriers within the RN training and workplace environment.

c. Provide consistent specialist learning skills, SpLD and ND advice and support through our Learning and Development (LDO) Hubs to RN Regular and FTRS Full Commitment (FC) personnel and their service and civilian managers. Service Personnel may self-refer if they are struggling to cope with learning or work (regardless of whether they have a diagnosed condition).

d. Provide opportunities for RN Learners[5] (within formal RN training pipelines), RN Regular and FTRS(FC) Personnel[6] to be screened for SpLDs and neurodistinct traits, which may lead to a formal diagnosis and targeted support to be offered.

e. Ensure Civil Servants and their line managers are aware of support available through the Employee Assistance Programme (EAP) and Occupational Health services.

f. Engage with Defence Medical Services to ensure appropriate and coherent pathways are developed for diagnoses and support of neurodistinct conditions for all Regular Service and FTRS(FC) personnel.

9805. Application

Under the Equality Act 2010 the Armed Forces are exempt from disability discrimination legislation; however, this policy document serves as a framework for meeting the spirit of the legislation and goes further by actively promoting equality of opportunity, thus enabling every member of the RN to maximise their talent and contribution. It applies to all full-time personnel (regular and full-time Reserve Service) and RN Learner. Ex-regular personnel with a Reserve liability and volunteer Reservists attending for obligatory training or voluntary duties will be eligible only for support when mobilised into service. For non-mobilised Reservists, responsibility for learning support rests with the individual and is not covered by this policy.

[3] Regular, FTRS and Reserve
[4] Civil Servant (including RFA) and Civilian employees.
[5] Any Service or Civilian Personnel enrolled on a RN course.
[6] Regular or Full Time Commitment FTRS Service Personnel.

9806. The Individual's Responsibilities

Although this policy provides details of specific support provided to RN personnel with learning support needs, individuals are primarily responsible for addressing their own needs. Individuals with a learning support need are encouraged to discuss those needs and share their learning plan with their line managers/Divisional Officers/Instructors/English and Maths Tutors on arrival at a new establishment/Unit prior to commencing duties/training. This handover will enable the provision of any necessary remediation and the updating of their Individual Learning Plan (ILP). Individuals are to employ all reasonable remediation recommended by their ILP, coaching support team, or English and Maths Tutors.

SECTION 2

EDUCATION AND TRAINING

9807. Training Delivery Standards

Training for RN personnel is to be delivered without discriminating against those with learning support needs and, therefore, those individuals delivering training must have an awareness of, and be sensitive to, such issues. Course format and style of delivery should be universally designed and structured to accommodate varied learning needs. Training delivery standards are to be reviewed on a regular basis and modified where necessary to achieve maximum effectiveness.

9808. Responsibilities of Phase 1 and Phase 2 Training Schools

Within initial training establishments (Phases 1 and 2) Team Fisher (via the LDO and Education and Training Organisation) have the following responsibilities:

a. Without compromising the agreed Training Performance Statement (TPS), to provide appropriate support for trainees with suspected ND conditions.

b. All Phase 1 and 2 recruits should receive a Learning and Development brief that covers ND conditions and support.

c. Equip Phase 1 and 2 recruits with learning skills through the delivery of formal training sessions[7] within the first 4 weeks of INT(R)/(O) or Foundation Phase of Initial Training.

d. Ensure that instructors and staff involved in student management are aware of ND conditions and the learning needs of trainees[8].

e. Apply any appropriate exam concessions[9]. These allowances apply only to assessments which are explicitly dependent on information processing, knowledge-based or written examinations. For externally moderated exams, authorisation to grant extra time requires approval by the appropriate examining authority. Removal of training professional warnings (see BRd 3(1) Chapter 57) could be considered if an individual has been assessed as requiring learning support after failing modular written exams. This must not, however, compromise the attainment of Training Performance Statement (TPS) or pass training risk to another part of the training pipeline. SpLDAs and English and Maths Tutors can authorise additional time for internal exams following a screening assessment. For external exams where the completion of a Form 8 is required, the SpLDA will refer the learner for further assessment.

[7] Memory techniques, mind mapping, sequencing, state, and time management.
[8] Poor performance in training should not automatically be attributed to a learning difference but may be due to another problem such as poor basic skills, poor memory, or lack of awareness of revision techniques.

[9] JSP 822 Vol 7 Ch 2 Para 2.1.12

f. Ensure that the learning support needs and details of support provided to individuals are documented within an ILP and, with the agreement of the individual, when trainees leave the training establishments the ILPs are forwarded promptly to the receiving/parent unit English and Maths Tutors/SpLDA (under appropriate protective markings).

g. Universal training design, alternative methodologies and approaches to training delivery should be actively sought and promoted, subject to the individual continuing to meet the conditions and standards set within the Formal Training Statement.

h. Where trainees with a learning support need are, after suitable remediation, unable to achieve the Role Performance Statement (Role PS) for their Profession or Discipline, the Chain of Command may, in the interest of the individual or the Service, seek advice from the Trade/Branch Sponsor on the possible re-allocation of the individual to another Trade Branch (see BRd 3(1) Chapter 51). Where there is evidence that the individual's learning support needs are so unique that they are unlikely to achieve TPS in any other Specialisation or Branch, then a case may be made for discharge from the Service (see BRd 3(1) Chapter 54).

9809. Learning and Development Adviser (LDA), English and Mathematics Tutors and Specific Learning Differences Adviser (SpLDA) Responsibilities

All LDAs and English and Maths Tutors are to have undertaken relevant awareness training[10]. SpLDAs are to be qualified and experienced to support LDAs and English and Maths Tutors, who should be involved in the following:

a. Promoting an understanding of ND conditions within the establishment, including conducting an induction brief on local ND Support processes for all trainers and DOs upon arrival, and at least annually thereafter.

b. Undertaking interviews of the individual and line manager to scope the workplace need.

c. Carrying out an initial assessment and recommending further action based on the results.

d. Interpreting Educational/Occupational Psychologists' reports on behalf of the individual.

e. Creating an ILP with the individual, line manager and or instructor.

f. Reviewing support regularly and updating the ILP with the individual and the line manager or instructor as and when necessary.

g. Liaising closely with both losing and receiving units to ensure that suitable provision is available for the individual to continue training and/or productive service.

[10] JSP822 Vol 7.

9810. Management Responsibilities

The following principles apply to the management of a learning support case:

a. Create a culture of declaration that allows a partnership between the line manager and the individual to be developed to optimise available support.

b. Recognise workplace differences associated with ND conditions and the challengers they may present. Workplace differences include but are not limited to:

(1) Time management.

(2) Organisational Skills.

(3) Prioritising of tasks.

(4) Processing verbal instructions.

(5) Short-term memory.

(6) Note taking or report writing.

c. Reports, ILPs and learning support programmes that are produced on individuals with learning support needs are to be treated as 'OFFICIAL-SENSITIVE' and are to be held by the English and Maths Tutors or SpLDA and the individual.

d. Reports should identify learning and coping strategies (reasonable remediation) that will assist the individual but not compromise the standards required to meet TPS. These strategies should be provided to the individual's line manager or Divisional staff and the individual's instructors; they are to be treated as 'OFFICIAL-SENSITIVE'. The individual's consent is required to share this information.

e. If appropriate, line managers may make reasonable adjustments to tasks and roles, as indicated as beneficial within the strategies developed by the education specialist. Individuals must demonstrate, however, that they have achieved full competence across the entire Role PS.

f. After the individual has been provided with learning or workplace support recorded in an ILP, their case is to be reviewed regularly with the line manager and SpLDA to assess the effectiveness of this support.

g. The needs of an individual in relation to a ND condition are not to be mentioned, whether positive or negative[11], in annual appraisal reports.

[11] JSP 757 Part 1 Para 15 Guidance for reporting Officers, Inappropriate Comments.

9811. Procedures

The RN will provide support to those individuals who have voluntarily come forward or have been identified by their line manager or trainers as possibly having learning support needs in accordance with JSP 822 Vol 7. To ensure consistency, reliability and validity in the process, the following procedures apply:

a. Line managers and Divisional staff become responsible for initial coaching of individuals in line with current RN Coaching policy (see BR 3 Chapter 21). In many situations, a simple discussion will resolve the issue. Where the issue is complex, the line manager should refer the individual to the establishment's Coaching support team, LDA, English and/or Maths Tutor or SpLDA.

b. Where possible, the Coaching support team, LDA, English and Maths Tutors or SpLDA should interview the individual to identify barriers to learning and scope their learning support needs.

c. The nominated personnel carry out assessments using the appropriate diagnostic tool[12.] Screenings can be conducted face-to-face or remotely. From these assessments, the SpLDA will identify the likelihood of the individual being neurodivergent, or having an SpLD, and where appropriate, will work with the individual to develop an Individual Learning Plan (ILP). The ILP will identify strengths areas as well as challenging areas and will highlight coping strategies to support them to successfully continue their learning and career. The ILP will also recommend reasonable adjustments that may assist the individual, such as coloured overlays, text to speak software and, in some cases, additional time for exams. The English and Maths Tutors or SpLDA will work with the line manager, the relevant trainers and the individual to make the changes necessary to support both the individual and their line manager.

d. ILPs will list coping strategies and remediation recognised as reasonable. Only coping strategies and reasonable remediation deliverable within the scope of TPS will be permissible.

e. Extra time for examinations should only be awarded where study skills and coping strategies are not sufficient, and the additional time is appropriate to the individual's needs; it must not be awarded automatically because of a suspected ND condition. The SpLDAs are authorised to award additional time for internal examinations only, where extra time does not bring into question the ability of the individual to conduct time critical tasks. The awarding of additional time must be discussed with the individual's instructor, course manager, or TRA to ensure it does not detract from them achieving Role PS.

[12] L&D Hubs and training establishments have access to several screening tools, for example DAST, LUCID LADS or the Do-IT Profiler

f. For external examinations (such as GCSEs and Functional Skills), the awarding of additional time can only be made by a Level 7 SpLD/ND Specialist, such as an Educational or Occupational Psychologist[13]. Where possible, the assessments by the Level 7 should provide sufficient detail to inform an ILP and details exam access arrangements but should not routinely include a diagnosis. A formal statement of needs is appropriate in most cases. A diagnosis may be requested, but must be cleared with financial approval through NAVY PEOPLE-TMG PACC EDU Del.

9812. Tracking

On identifying an individual with a potential learning support need, clear and concise individual records, marked appropriately (OFFICIAL-SENSITIVE) are to be kept. If appropriate, there must be prompt transfer of individual records when an individual is posted or detached. Records will be sent to the individual. There must also be close liaison between losing and receiving units to ensure that adequate provisions are in place for any learning support requirements.

9813. Funding

a. Public funding for the provision of eligible learning support will be provided by TMG PACC, applications should be made by e-mail to NAVY PEOPLE-TMG PACC EDU Del. The definition of eligible learning support is under review as part of the SELBORNE programme.

b. **Standard Learning Credit (SLC).** RN personnel with a recommendation from an SpLDA in an ILP are eligible (during any phase of training) to claim SLC support for Specialist tuition, recognised SpLD products (such as a reading pen) and computer software support, provided that the following provisions are met:

(1) The learning support resource software has been recommended by the Team Fisher Level 7 SpLD advisor or occupational Psychologist's report.

(2) The learning support resource is bought in direct support of the individual's SpLD. The individual's line manager is also required to provide a report, via the unit SpLDA.

(3) All other requirements for claiming SLC are observed.

c. **Enhanced Learning Credit (ELC).** Financial support for personnel with SpLD may be eligible available under the ELC scheme[14] from a scheme registered provider.

[13] If appropriate, a specialist teacher registered with PATOSS may be utilised.
[14] JSP 822 Vol 9 Para 3.5.9

SECTION 3

WORKPLACE

9814. Guidance for Managing Neurodiversity in the Workplace

a. **Understanding Neurodiversity in the Workplace.** Commanding Officers and line managers should ensure that they all have a basic understanding of neurodiverse conditions[15] and how they can assist their personnel to get the best out of them in their working environments. This information can be sourced from DLE training, the D&I Policy Desk, RNRMC and the RN Neurodiversity booklet.

b. The challenges faced by personnel with neurodivergent conditions varies significantly. Common to most unsupported conditions is that a lack of understanding within the workplace can lead to low self-esteem, anxiety, and depression. However, this can be mitigated through making reasonable adjustments to the working environment.

9815. Reasonable adjustments

a. Commanding Officers and line managers are responsible for the wellbeing of all their personnel and should actively encourage creating a working environment that helps meet the needs of all its personnel where operational capability allows. Small and cost neutral adjustments can have a significant impact, not only on the individual but also on the whole team.

b. There are several factors to consider when thinking about reasonable adjustments for those with neurodiverse conditions. The list below suggests different adjustments that might be considered. Any actions to introduce reasonable adjustments must be decided in discussion with the individual.

(1) **Physical.** Fixed desk location, chair suitable for seating position, identifying quiet spaces or remote space to work if necessary; Physical items worn or used to lower sensory input, this could be in the form or noise-cancelling headphones, noise-reducing ear plugs or focus devices. These items can be paid for utilising SLC's or via a referral from LDO or Occupational Health.

(2) **Environment.** It is not always possible to avoid loud or busy workspaces, however where appropriate quieter working spaces can be used, whether that includes remote working or a designated quiet office within the workplace.

(3) **Mental.** CoC should implement good mental resilience practices within the workplace, allowing times for adequate breaks, where operationally appropriate, and establishing stable routines. Where possible, individuals should be warned of any significant change which allows for preparation time for those that may require extra support during a change period.

[15] DLE training on Neurodiversity can be accessed on DLE: https://dle.ice.mod.gov.uk/mod/page/view.php?id=1323295

(4) **Time.** Requesting for more time for certain tasks, assistance with planning tasks, taking regular breaks, utilising smart working. Arrange to be able to work remotely if the working environment is becoming overwhelming or distracting.

(5) **Communication.** Utilise a range of communication methods that suit the individual's needs, whether this be emails, phone calls or meetings in person. Following up with typed notes after in person discussions to ensure all information was acknowledged and understood. Using different fonts in written work, where appropriate.

(6) **Behaviours.** There are several behaviours that can manifest as a result of neurodiversity. For example, fidgeting for excessive energy and to aid concentration, asking additional questions or procrastinating tasks. CoC should ensure that they question the presentation of specific behaviours and demonstrate curiosity regarding the impact of neurodivergence. Discuss any experiences of emotional overwhelm with the CoC and how to best cope or manage this.

(7) **Tasking and Reviews.** Ensure clear, concise, and non-ambiguous instructions are given to individuals. Aid with setting task priorities to keep in line with deadlines. Discuss areas that are challenging and ways that you can be held accountable, considering the complexity of a task.

(8) **IT Equipment.** Discuss any software needs with CoC, utilising the IT team on board platforms or IHUB ashore to enable access to software that will aid your work output. These can be requested for all MODNet laptops, with programmes such as CalroRead and Dragon. These and other applications can be viewed via the Applications and Peripherals Portal[16]. Microsoft accessibility features provide a guide[17] of how to make accounts more accessible. Requests can be submitted via the Navy Digital Front Door[18], with permission from your line manager and ITSO, quoting your current UIN. Queries should be directed to navydigital-frontdoor@mod.gov.uk.

c. The use of a check list can aid in the understanding of an individual's needs for any reasonable adjustments within the workplace. An example of a checklist can be found at Annex 96Q. This tool should be used in divisional interviews or where there is a requirement. Further guidance on workplace adjustments can be found on the MOD's D&I toolkits, guides and resources webpage[19].

[16] https://modgovuk.sharepoint.com/teams/301301/SitePages/Accessibility-Applications-on-MODNET.aspx
[17] modgovuk.sharepoint.com/sites/Learning_Hub/SiteAssets/Forms/AllItems.aspx?id=%2Fsites%2FLearning_Hub%2FSiteAssets%2FMy MOD Laptop%2FDocuments%2FOver to you%2FMML-OTY-Microsoft-accessibilityfeatures%2Epdf&parent=%2Fsites%2FLearning_Hub%2FSiteAssets%2FMy MOD Laptop%2FDocuments%2FOver to you
[18] 93 ND Front Door - Power Apps (https://apps.powerapps.com/play/e/9c55ffaf-6c84-e378-a7c6-08ed259d6ea3/a/164f7097-0157-475a-8e42-dafad9eb6686?tenantId=be7760ed-5953-484b-ae95-d0a16dfa09e5)
[19] Workplace Adjustments (https://modgovuk.sharepoint.com/sites/IntranetDiversityAndInclusion/SitePages/ReasonableAdjustments-and-Access-to-Work.aspx)

9816. Workplace Adjustment Passport

a. Where there is a requirement for workplace adjustment that requires sourcing of additional or new equipment, then the DES Form 221 Workplace Adjustment Passport should be filled out as appropriate. This form is to be signed by the individual requesting items as well as their line manager.

b. When requesting IT modifications, a display Screen Equipment (DSE) Self-assessment should have been carried out by the individual in the first instance and MOD Form 5016 and 5013 filled out iaw JSP 375[20]. This should be accompanying the DES Form 221 when requesting additional equipment.

9817. Workplace Support Plan (WSP)

a. Personnel are able to obtain a workplace support plan, which is bespoke to the individual and is created by a SpLDA in the Learning and Development Organisation. The support plan will specify the individuals' current struggles with ways of working or learning as well as their strengths and will identify areas where the individual will benefit from some reasonable adjustments in the workplace.

b. The WSP specific section will detail methods of support which where appropriate in the operational environment should be used with the individual, this will ensure the individual is performing effectively, allowing them to succeed at work and not hinder them.

c. Further information about SpLDs (Dyslexia, Dyscalculia, DCD) can be found in JSP 822[21].

d. Further advice and guidance on Neurodiversity policy related matters can be sought from the RN D&I team[22] or on the D&I Portal. The RN's Infinite Network[23] is also a hub of knowledge to support personnel who may be impacted by neurodiversity.

[20] JSP 735 Management of Health and Safety of Defence, Part 2, Vol 1, Ch 12
[21] JSP 822 Vol 7 Specific Learning Difficulties
[22] NAVYPEOPLE-DANDIMailbox@mod.gov.uk
[23] Royal Navy Infinite (https://forms.office.com/pages/responsepage.aspx?id=7WB3vlNZS0iuldChbfoJ5VjpWO0RHEpGniO3YpJZZJUMkNQUklZUEg0OFNKSEhZUFI5UlY3OEtXSiQlQCN0PWcu&route=shorturl)

ANNEX 98A

LINE MANAGER CHECKLIST FOR REASONABLE ADJUSTMENTS

Reasonable adjustment checklist	Confirmation of action taken
Step 1 Is there an indication or a requirement for reasonable adjustments? Ensure you are familiar with the RN's Neurodiversity policy found in BRd 3(1) Ch 96, and what constitutes as a reasonable adjustment.	
Step 2 Does the individual have a learning or workplace plan from an SpLD advisor? Does it require a review or amendment?	
Step 3 Discuss the individuals best working practices. Are there any areas they are concerned with?	
Step 4 Are there any reasonable adjustments that would benefit the individual? Are they reasonable? Will they significantly aid the individual in the workplace? Will it negatively impact others? Are they relevant? Relevant to the adjustment required that does not impact operational capability.	
Step 5 Are you able to assist the individual by putting reasonable adjustments into place. Yes: Implement changes (e.g. new working plan). No: Seek further guidance from RN D&I team and/or refer individual to occupational health or LDO if deemed necessary.	