



EDITORIAL

Neonatology, the first specific training area of paediatrics in Spain[☆]



La Neonatología, primera Área de Capacitación Específica de la Pediatría en España

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In August 2014 the *Boletín Oficial del Estado* (Spanish Official State Gazette) published Royal Decree 639/2014, of 25 July, regulating core training, respecialisation in core areas and specific training areas (known as “subspecialities” in Europe). Paediatrics retains its own training, separate from other core areas. A specific training area (ACE in Spanish) has been created in Neonatology, access to which is exclusively from the speciality of Paediatrics.¹

ACEs are primarily relevant to the health care context, but they involve an indispensable teaching dimension in order for subspecialists, to be properly trained in our case as neonatologists. Teaching and training in Neonatology are well organised in Australia, the United States and Canada. In Europe, the European Board of Paediatrics recognised the Working Group in Neonatology (WGN) of the European Society for Paediatric Research (ESPR) in 1997. In August 2001, the WGN-ESPR became the European Society for Neonatology (ESN), recognised by the Confederation of

European Specialists in Paediatrics (CESP) as the organisation representing all European neonatologists.² The ESN has formulated a training programme for neonatologists in Europe with the notion of harmonising training programmes between the different European countries and establishing clearly defined levels of knowledge and skills,³ which would make it possible for neonatologists to be exchanged between participating European countries.

Process leading up to the passing of the Royal Decree establishing the specific training areas of Neonatology

The Spanish Neonatology Society (SENeo), which originated from the Perinatal Medicine Section set up in 1973 within the Spanish Association of Paediatrics (AEP), was founded in 1996. From that point the SENeo steadily grew and confirmed its position as the point of reference for all aspects of neonatal health care in Spain. Spanish Neonatology is fully developed in terms of care, teaching and research. There are 50 level III neonatal units in Spain and between 156 and 165 level II units in hospitals in the public network, located in every autonomous community.

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Both the former Perinatal Medicine Section of the AEP and the current SENEo worked jointly with the AEP and the National Specialities Committee to have Neonatology recognised as an ACE. For this purpose, the board of directors of the SENEo compiled a report on the scientific bases, accreditation requirements for teaching units, training programme and guidance needs for physicians subspecialising in Neonatology in Spain and submitted it to the National Council for Medical Specialities as early as 1995. Subsequently, various boards of directors of the SENEo reiterated the request for the ACE to be instituted, which was “just about to be achieved” on several occasions but was hindered by the delay on the part of successive governments in formulating the law. In 2012 our board resubmitted the updated report in an interview with Dr. Javier Castrodeza at the Ministry of Health, and this time it has gone ahead.

Changes in Spanish Neonatology with the passing of this measure

Spanish Neonatology will improve above all in quality, since future neonatologists will receive regulated training in properly authorised centres and it will be possible to fill hospital posts with paediatricians who hold the Neonatology ACE diploma. This worthy aim was set out in two paragraphs of the document on “Levels of care and recommendations on minimum standards for neonatal health care”, formulated in 2012 by the SENEo’s Standards Committee. Specifically, it emphasises that level IIB neonatal units must have two paediatricians with the ACE in Neonatology “once it has been approved by the Ministry of Health”, whereas all doctors in level III neonatal units should have the corresponding ACE qualification in Neonatology.⁴ The law itself states that:

- “ACE training shall be conducted in an authorised teaching unit, through a professional exercise that is programmed, tutored, assessed and specifically directed towards the relevant area. This training shall be carried out under the residence system.
- “The ACE diploma shall be officially recognised and valid throughout the country; it shall be issued by the Ministry of Health, Social Services and Equality, and possession of it shall be required in order to make express use of the title of specialist with specific training in the area in question”.
- “Those *specialists* who, on the date when the ACE is instituted, hold a qualification that entitles them to obtain it, can apply for the corresponding Diploma, on an exclusive and exceptional basis, provided they show evidence of over four years’ professional experience connected with the area of the ACE in question and have passed and received a positive assessment in the theoretical and practical test.”

Next steps for developing the specific training areas in Neonatology

The current priority is for the six neonatologist members of the Area Committee for the ACEs in Neonatology to be appointed by the Ministry of Health, at the proposal of the

AEP and, through it, the SENEo. These six colleagues will be responsible for formulating the training programme and setting the criteria for approving the hospitals that can train neonatologists, naturally taking the European Syllabus into account.³

Recognition of other paediatric specialities/subspecialities as specific training areas

The *Libro blanco de las especialidades de la Pediatría española* (White Paper of Spanish Paediatric Specialities)⁵ lists 24 paediatric specialities, of which only Paediatric Surgery and Neonatology have been recognised in Spain. The other 22 paediatric specialities exist *de facto* but not *de iure*¹ in administrative and legal terms. Out of all these, Paediatric Cardiology will probably be recognised as an ACE in the near future, and Paediatric Neurology later on. For a speciality to be recognised as an ACE it is essential that it should meet the *requirements* included in section 17 of the law itself:

- (a) It must represent a *significant increase in the professional competencies* required by the official programmes of the specialities involved in its creation. This requirement is fulfilled by almost all paediatric subspecialities.
- (b) The area concerned must be of substantial importance in health-care, scientific and organisational terms, either because it requires a significant number of full-time professionals or because it demands a high level of competence related to innovation, development, research or highly specialised health care. Fulfilment of this requirement has to be substantiated in the Report to be presented in order to establish the ACE.
- (c) It must not be possible for the *competencies of the specialists with the specific training diploma to be satisfied* through training in other specialities, other specific training diplomas or other existing accreditation and advanced accreditation diplomas.

This is the crucial point, where there could be a conflict with other adult specialities that treat children and see the prospect of paediatricians being able to obtain a diploma in “their” speciality as being in competition with their professional activity. Fortunately Neonatology has no equivalent speciality in adult Medicine and this has facilitated its recognition as a paediatric ACE.

To obtain *recognition of a new paediatric ACE*, the National Committee for the speciality of Paediatrics has to propose it to the Ministry of Health, submitting the relevant documents. It is essential that these include the report certifying that all the mandatory conditions have been met and it is also highly advisable to add a document showing that the relevant adult speciality approves, agrees to or even supports the creation of the paediatric ACE.

This will make it possible gradually to obtain official recognition of paediatric subspecialities as ACEs in Paediatrics.

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