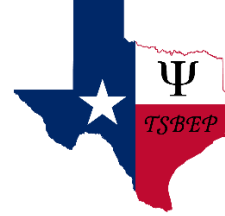




TEXAS STATE BOARD OF EXAMINERS OF PSYCHOLOGISTS

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Guidelines Regarding Competency in Clinical Neuropsychology

The mission of the Texas State Board of Examiners of Psychologists (“Board”) is to protect the public by ensuring that psychological services are provided to the people of Texas by qualified and competent practitioners who adhere to established professional standards. This mission, derived from the Psychologists’ Licensing Act, supersedes the interest of any individual or special interest group. It is with this mission in mind that the Board set out to develop these “safe harbor” guidelines to resolve licensees’ questions and avoid future public confusion about the minimum competencies needed for the safe practice of clinical neuropsychology. When developing these guidelines, the Board relied in-part upon stakeholder input and the prior work of the Competency Standards Advisory Committee.

For purposes of these guidelines, the practice of clinical neuropsychology is defined as a clinical psychological practice broadly involving evaluation and subsequent intervention or recommendations for the purpose of differential diagnosis of possible neurobehavioral and neurocognitive disorders for individuals suspected of being neurologically affected. It does not include however, the screening for or identification of the possible presence of a neuropsychological condition. Additionally, the administration and interpretation of tests that have their roots in the discipline of clinical neuropsychology would not fall within this definition unless the tests are integrated or interpreted by a licensee competent to practice clinical neuropsychology.

The Board considers the practice of clinical neuropsychology an area of advanced practice requiring organized education, training and experience specific to assessment and treatment of neuropsychological conditions for numerous reasons. First, the practice of clinical neuropsychology is recognized as an advanced practice area by doctoral programs, respecialization programs, and specialty certifying boards alike. Second, while many doctoral degree programs may offer courses, training, or experience in clinical neuropsychology, not all programs require graduates to complete such training. As a result, a doctoral degree in psychology, by itself, is not sufficient to demonstrate competency in clinical neuropsychology. Lastly and most importantly, the potential for patient harm can be great if clinical neuropsychology is not performed competently.

Therefore, given the importance of advanced training and the magnitude of potential harm that could result from incompetent practice, the Board has issued these guidelines to assist licensees and the public alike in determining whether a licensee possesses the minimum knowledge and skillset necessary for the safe practice of clinical neuropsychology.

A licensee who can demonstrate advanced training by one of the following methods is presumed competent to practice in the advanced area of clinical neuropsychology and in compliance with Board rule 465.9, absent evidence to the contrary.

- (1) Graduation from a doctoral training program with a designated track in clinical neuropsychology and completion of an internship and post-doctoral fellowship specifically identified as preparatory training for clinical neuropsychological practice;
- (2) Completion of a respecialization program in clinical neuropsychology and a post-doctoral fellowship specifically identified as preparatory training for clinical neuropsychological practice; or
- (3) Specialty board certification in clinical neuropsychology by the American Board of Professional Psychology, the American Board of Clinical Neuropsychology, or the American Board of Professional Neuropsychology.

Licensees who cannot demonstrate advanced education, experience, or training as contemplated within these guidelines may still develop or acquire the advanced level of competence needed to practice clinical neuropsychology. The advanced education, experience, or training may come from a formal or informal training program or a combination thereof. A licensee relying upon this option must however, be able to demonstrate this advanced training before the licensee practices clinical neuropsychology. Failure to do so will constitute a violation of Board rule 465.9.

In the event licensees have questions or concerns regarding whether their training meets the standards for the competent practice of clinical neuropsychology under Board rule 465.9, they are encouraged to contact the director of professional affairs or other similar individual charged with answering questions about legal or ethical matters, at their local, state, regional, or national association (e.g., Texas Psychological Association, American Psychological Association). Licensees may also choose to visit with an attorney or a trusted colleague about the matter.

It is important to note that these guidelines do not have the force and effect of a rule adopted by the Board and the Board will not use them as the basis for a disciplinary proceeding against a licensee. A licensee may however rely upon these guidelines in response to an allegation that the licensee lacks the competency necessary for the safe practice of clinical neuropsychology.