

The Psychologists Board of Western Australia

APPLICANT'S PROGRAMME - CLINICAL NEUROPSYCHOLOGY Checklist of Specialist Skills and Knowledge

INTRODUCTION

Psychologists entering supervision for registration of the specialist title, Clinical Neuropsychologist, must have completed a Board approved Masters degree in Clinical Neuropsychology, or other or equivalent. A minimum of two years supervised practice, or other as determined by the Board, is required for registration as a Clinical Neuropsychologist. The supervision must be provided by a registered Clinical Neuropsychologist. The following Applicant's Programme details particular requirements of Clinical Neuropsychologist (Registrar) supervisors and supervisees, and the areas of professional and ethical conduct, assessment, intervention, and communication in which the supervisee is expected to be competent at the conclusion of the supervision period. The Programme should be implemented in conjunction with the general Supervision Guidelines For Specialist Title.

REQUIREMENTS OF CLINICAL NEUROPSYCHOLOGY SUPERVISORS DURING THE TWO YEAR SUPERVISION PERIOD

1. It is the supervisor's responsibility to ensure supervisees have adequate knowledge of relevant research, theory and policy before intervention.
2. It is the supervisor's responsibility to ensure supervisees have access to and make use of appropriate intervention instruments in order to ensure that a comprehensive and appropriate examination is undertaken of a client's neuropsychological status.
3. It is the supervisor's responsibility to bring to the supervisee's attention in supervision any limitations of competence, ethical difficulty, personal bias or aspect of personal development in the supervisee which the supervisor perceives to be affecting the supervisee's professional development and/or professional application.
4. Supervisors are expected to offer sufficient supervision opportunities such that the competencies outlined in the following programme (points 2 to 4) can be examined on a regular basis. Supervisors are expected to keep weekly documentation
5. Over the period of supervision it is expected that supervisors will observe either in vivo or by video the supervisee's direct client orientated skills (ie assessment and intervention) as part of the supervision process.
6. Supervisors are expected to intermittently view active files of the supervisee as part of the supervision process.

REQUIREMENTS OF CLINICAL NEUROPSYCHOLOGY SUPERVISEES DURING THE TWO YEAR SUPERVISION PERIOD

Supervisees are expected to develop the capacity for continuing self-appraisal and appropriate consultation over the supervision period. In particular they are expected to:

- (1)
 - (a) Identify the limit of their competence in any given situation and consult with their supervisor regularly with regard to their competence.
 - (b) In consultation with their supervisor arrive at a mutually agreed upon course of action where competence is limited.
 - (c) Implement the agreed upon course of action (which may include seeking other professional opinion).
- (2)
 - (a) Identify broader areas in which they require continuing professional development.
 - (b) In consultation with their supervisor arrive at a plan to develop these areas.
 - (c) In consultation with their supervisor monitor their progress in these areas and readjust the plan as necessary.

INSTRUCTIONS FOR SUPERVISORS

Each standard of practice should be rated as:

C	Competency Attained
S	Satisfactory Progress
U	Unsatisfactory Progress <i>(Needs specific attention)</i>
NA	Not Applicable

SUPERVISOR: _____

SUPERVISEE: _____

PERIOD ASSESSED: _____

Rating			
C	S	U	NA

1. ETHICAL FRAMEWORK AND PROFESSIONAL CONDUCT

1.1 Familiarity with Acts of Parliament relevant to the Applicant's work settings (including):

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- Psychologists Act
- Freedom of Information Act
- Mental Health Act
- Workers Compensation Act
- Public Service Act (where relevant)
- Criminal Injuries Compensation Act
- Children & Community Services Act
- Disability Services Act
- Guardianship Act

1.2 Conduct consistent with relevant professional aspects of working independently as a Clinical Neuropsychologist including:

(a) APS code of professional conduct and other relevant ethical codes

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(b) Understanding how ethical principles are used to guide professional practice

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(c) Commitment to ongoing programme of professional education and development that addresses identified personal and professional limitations

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(d) Clear and consistent use of informed consent procedures

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(e) Knowledge of limits of competence and personal limitations that may affect work with clients

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Rating			
C	S	U	NA

1.3 Competent in the relevant clinical aspects of working independently as a Clinical Neuropsychologist:

(a) Ability to analyse accurately the functions of a Clinical Neuropsychologist in particular settings

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(b) Capacity to work as a scientist practitioner, engaging knowledge in relevant psychological and social areas

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(c) Knowledge of the roles of other professions and the capacity to report to other professionals appropriately and work collaboratively

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2. ASSESSMENT

2.1 Administer, interpret and integrate a range of assessment devices:

(a) clinical interviews

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(b) behavioural observations and assessment

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(c) intellectual assessment

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(d) neurobehavioural assessment

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(e) memory, executive/adaptive, perception, spatial behaviour, language, motor/sensory, attention/concentration, praxis-assessment

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(f) personality, emotional and behavioural assessment

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(g) educational attainment assessment

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2.2 Assessment procedures to include:

(a) Selection of appropriate assessment techniques or instruments with proper consideration of issues of reliability and validity

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(b) Knowledge of and competency with interview and lifespan development

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(c) Knowledge of and competency with psychometrics and test construction

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(d) Behavioural observation and functional analysis (where appropriate)

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Rating			
C	S	U	NA

(e) Knowledge of neuroanatomy, neurology, neuropathology and neuroradiological assessments

(f) Knowledge of neuropsychiatry, psychopathology and understanding and use of diagnostic classification systems (DSM-4 and ICD-9)

(g) Knowledge of pharmacology and neurotoxicology

2.3 Competent in formulation procedures, including information from context of referral, interview, assessment information, diagnosis, and providing the indications for interventions

(Supervisor should have a representative sample of at least 40 formulations)

3. INTERVENTION

3.1 Competent in intervention procedures:

Ability to work as a scientist practitioner to:

• Draw from appropriate knowledge background of research and evaluation

• Review documents of policy and practice relevant to the task and setting

• Skills and knowledge of methods and techniques of rehabilitation for cognitive and behavioural disorders

• Individual and family counselling within the context of neuropsychological impairment

• Skills and knowledge of approaches to environmental and behavioural learning to modify a wide range of behavioural dysfunction associated with brain impairment

• Evaluate outcome appropriately

Rating			
C	S	U	NA

3.2 Demonstrates skilful and appropriate application of intervention processes in context of neuropsychological impairment

(a) Forms a positive working alliance with a variety of clients

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(b) Provide consultative service to other professionals regarding clinical neuropsychological problems

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4. COMMUNICATION

4.1 Competent in oral and written communications:

(a) Ability to communicate adequately with clients, within the profession, with other professionals and with the general public

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(b) Capacity to appear as an expert witness, including knowledge of Court systems, presentation in Court, and relevant policies and practices.

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(c) Ability to write adequate neuropsychological reports for a range of audiences.

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(d) Ability to write competent neuropsychological reports for the legal system

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(e) Ability to keep appropriate records and case notes in accordance with requirements of professional setting

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COMMENTS

Please provide any comments on supervisee's performance, particularly where a rating of "U" or "NA" has been given:

Item No.	Comments

SUPERVISOR

SUPERVISEE

DATE

DATE