USE OF TESTING TECHNICIANS IN THE DELIVERY OF PSYCHOLOGICAL AND NEUROPSYCHOLOGICAL SERVICES

Background
Use of the professional/technical model dates back to the 1930s and has been an established standard of practice in the field of clinical neuropsychology for more than three decades.

Relevant Statistics
According to The National Academy of Neuropsychology and the American Psychological Association’s Neuropsychology (Sweet, Peck, Abramowitz and Etzweiler, 2002):

- 51.2% of 1,352 responding neuropsychologists use assistants in their work settings.
- Paid nondoctoral level technicians were the most commonly used testing assistant (68.5%).
- Full-time neuropsychologists who used assistants engaged in significantly more hours of neuropsychological assessment per week

Key Points
The practice of using nondoctoral level technicians is acceptable and common. The technician is responsible for the acquisition of data upon which the licensed doctoral-level professional bases his/her evaluation and opinions.

In all cases, interpretation of test data and rendering of a clinical report is the direct responsibility of the supervising clinical neuropsychologist.

Published Guidelines for Psychologists Using Nondoctoral Level Personnel
There are relevant guidelines that have been published regarding the education and training as well as use of nondoctoral technicians.

- Recommendations for Education and Training of Nondoctoral Personnel (Division 40, 1991)
- Guidelines Regarding the Use of Nondoctoral Personnel (Division 40, 1989)
- Guidelines for Providers of Psychological Services (APA, 1987)
- There is also a section devoted to this issue in the American Psychological Association’s Code of Ethics for Psychologists (APA, 2003):
  - Ethical Code 2.05: Delegation of Work to Others

Position Statements of Professional Organizations
The Division of Clinical Neuropsychology of the American Psychological Association (APA, 1989), the American Academy of Clinical Neuropsychology (AACN, 1999) and the National Academy of Neuropsychology (NAN, 2000) all endorse the appropriate and customary use of technician-based as well as clinician-based testing in the conduct of neuropsychological assessment.

Public Health Implications
The use of technicians allows clinical neuropsychologists to extend professional service to individuals that otherwise would not have been likely to receive such services due to the abnormally low reimbursement rate for testing.

The abolishment of technician use in the delivery of neuropsychological services would severely and adversely impact patient care in the United States. As it is there are very few neuropsychologists available to patients, even in metropolitan areas. Fewer patients would be able to access care from neuropsychologists and this would affect patients in all age groups and in all insurance categories (but especially the elderly and indigent).
Conclusions
The safety net that ensures protection of the consumer is the ultimate responsibility of the licensed doctoral level provider, and using technicians for routine aspects of neuropsychological test administration does not place the public at risk.

Technician-based and clinician-based models of neuropsychological assessment are equally valid and are deemed acceptable and customary in the conduct of competent clinical neuropsychological assessment.

The standard of practice among ethical psychologists and neuropsychologists involves the use of nondoctoral level testing technicians and results in a high quality work product that serves the public safely and competently.

REFERENCES


