

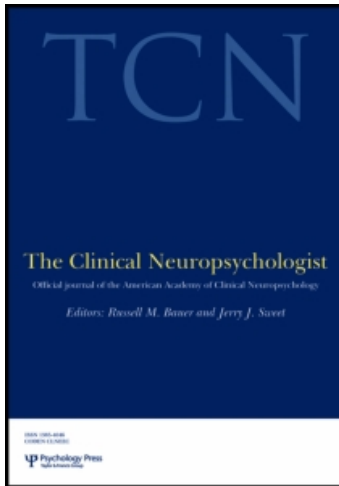
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President's Annual State of the Academy Report

Greg J. Lamberty^a

^a Noran Neurological Clinic, Minneapolis, MN, USA

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PRESIDENT'S ANNUAL STATE OF THE ACADEMY REPORT

Greg J. Lamberty

Noran Neurological Clinic, Minneapolis, MN, USA

In the President's Annual State of the Academy Report last year, I highlighted the value inherent in AACN membership and affiliate membership. The past year was a challenging one for many of us as we juggled the exigencies of an increasingly complex practice environment and typically weaker reimbursement for our services. While I believe strongly that board certification through ABCN is among a neuropsychologist's best hedges against trying economic circumstances, I also believe that broader involvement from those in our profession will be essential for neuropsychology to remain a strong and viable career choice. I will discuss this more below.

Among the more interesting and rewarding aspects of being an AACN Board member has been the opportunity to see the organizational history of a group unfold. Only eight or so years ago, AACN had little in the way of a formal budget, no clear plan of what to offer the membership, no annual meeting, no practice guidelines, and none of the extensive resources that now exist for members and the neuropsychology community. In the past decade, we have seen ideas about what AACN *could be* blossom into *what is* a vibrant and consequential organization. Much of *who* and *what* we are is regularly on display and has been the focus of previous President's Annual State of the Academy Reports (<http://www.theaacn.org/news/reports.php>). Rest assured that our many projects involving book series, our official journal, and other activities continue to forge ahead very successfully. But, in this report, I would like to focus instead on the individuals who have guided AACN and ABCN to their current enviable positions in the field of clinical neuropsychology practice, and encourage the next generation of leaders to step forth.

AACN BOARD OF DIRECTORS

Many people are responsible for the Academy's continued success and it is always difficult to create a list that doesn't leave out important contributors.

Address correspondence to: Greg J. Lamberty, PhD, Neuropsychology Department, Noran Neurological Clinic, 2828 Chicago Ave. S., Suite 200, Minneapolis, MN 55407, USA. E-mail: glamberty@noranclinic.com

Therefore, I would like to focus on the AACN Board of Directors and those who have served us in this very important and very volunteer role. The current Board of directors consists of Kira Armstrong, Robert Bilder, Kyle Boone, Robert Heilbronner, Paul Kaufmann, Michael Kirkwood, Kevin Krull, Greg Lamberty, Mark Mahone, Mike McCrea, Susan McPherson, Paul Moberg, Richard Naugle, Aaron Nelson, Leslie Rosenstein, and Karen Wills. In most years, we have three Board members rotate off, which this year includes Robert Heilbronner, Kyle Boone, and Mike McCrea who have all contributed substantially, not only as Board members and officers, but also as members of various committees, annual meeting workshop presenters, and contributors to official Academy statements and publications. This year, Mike McCrea will stay on as our newly elected Board President, and I will rotate off after having served the last two years as President, and since 2002 as a Board member. Dr. McCrea will be joined by Dr. Armstrong/Nelson as President Elect, Dr. Rosenstein as Secretary, and Dr. McPherson as Treasurer, all serving two year terms (2010–2012). Finally, we would like to welcome our three newest Board members, Dean Beebe, Kevin Greve, and Joseph Ricker. As always, the group from which we had to draw was superlative and the new members are representative of the best the field has to offer. We expect that our new Board members will fit in seamlessly and begin to contribute immediately.

I cannot emphasize how vital the Board members' efforts are to our organization and how much they give of their time in service of their profession. The two yearly meetings that Board members attend are the tip of the iceberg in terms of time committed to the Academy and its membership. Typically, Board members can be summoned nearly instantaneously for feedback and online voting on important Academy business and the response is usually swift and helpful. In my tenure as an AACN officer, I have felt very fortunate to serve with the cross section of professionals that comprise our Board. The opportunity to work with well known scholars, committed practitioners, and those who fit on every point of that spectrum has been a privilege and a pleasure. The efforts, insights, and commitment of the AACN Board deserve our praise and appreciation.

ABCN BOARD OF DIRECTORS AND EXAMINERS

The working relationship between our Academy and examining board in Clinical Neuropsychology is without question *the* prototype for ABPP specialties. As time has passed, both groups have become mature and extremely efficient in dispatching their duties. The ABCN Board is charged with knowing and understanding the evolving standards in Clinical Neuropsychology. In reality, they set and monitor these standards through nearly constant revision of the written exam, extensive training of examiner cadres, evaluation of their own process, and responding to feedback from those who have gone through the process. The efforts that go into maintaining the exam process are considerable, and ably managed by a very committed Board. The current ABCN Board includes Debra Koltai Attix, Julie Bobholz, Mark Bondi, Manfred Greiffenstein, Jennifer Haut, David Kareken, Gregory Lee, John Lucas, Joel Morgan, Celiane Rey-Casserly, Brenda Spiegler, Anthony Stringer, Frederick Unverzagt, Rodney Vanderploeg, Michael Westerveld, and Tony Wong. John Lucas, Celiane Rey-Casserly and Brenda Spiegler will be

rotating off the ABCN Board, though Dr. Lucas will be replacing himself after being re-elected by his peers. He will be joined by Corwin Boake and Laura Flashman as new Board members.

I was recently able to observe the activities that comprise the oral examination that is orchestrated twice yearly in Chicago at Rush University Medical Center. Former AACN Board member Chris Grote has been our gracious host for these exams for many years. The oral exam has been operating at maximum capacity for several years now and there is some consideration of adding a third examination. This is an indication of the success of both the Board and the Academy at drawing clinical neuropsychologists to the process and demonstrating the benefits for those who do. I must say that what I observed simultaneously reminded me of my own exam many years ago and impressed me with how much has changed. I was impressed to see how the cadre of examiners ushered examinees through this potentially very stressful process and in the modal case made it a positive and collegial experience, despite the unavoidable trepidation of examinees. The current examiners are Kira Armstrong, Rus Bauer, Mark Bondi, Greg Lee, John Lucas, Joel Morgan, Nancy Nussbaum, Margaret O'Connor, Joe Ricker, Sara Swanson, Jacobus Donders, Marc Norman, Julie Bobholz, Jennifer Haut, and Brenda Spiegler. Again, the effort expended over the course of two very demanding days is impressive, not to mention the amount of time spent preparing for the exams and doing necessary training. The ABCN examiners are the face of the organization, along with Linas Bieliauskas who has been at the organizational helm of both the Board and the Academy from their beginnings. Pass or fail, examinees' experience with the organization is often linked to how they are treated in this process. I am confident that ABCN has fine-tuned the examination to be an experience that is respectful, challenging, and affirming for the examinees.

THE FUTURE

AACN has enjoyed great success as an organization over the past ten years, but for many of us there is a sense that maintaining the momentum will be our greatest challenge. Last year, as I wrote this report, we were in the midst of the most stunning financial upheaval the United States had seen since the Great Depression. Economic events have arguably taken a turn for the better—though one need not be an economist to know that the future is filled with uncertainty, and possibly opportunity. This year, the specter of health care reform looms and what it portends for neuropsychology is about as clear as the debate on what health care reform should be (i.e., not clear).

For a decade or so, there has been a sense that neuropsychologists need to focus efforts on demonstrating the economic value of our services if we are to remain competitive. George Prigatano and Neil Pliskin (2003) (and their numerous contributors) thoroughly examined this pressing issue in their edited volume *Clinical Neuropsychology and Cost Outcome Research: A Beginning*. At that time, it was clear that health care economics would be shaping our future and that while there was tremendous promise for neuropsychology to enter into the study of health care economics, this was not yet being done to a degree that would be needed to have significant impact. Since the publication of that volume there has been little in the

way of economic outcome research in neuropsychology, though there have been notable contributions in terms of functional outcomes (e.g., Fleischer et al., 2008; Hanks et al., 2008; Hart et al., 2003). Making the leap from functional to economic outcomes is the next logical step in this process.

It is clear that clinical neuropsychologists collectively possess the skill and knowledge to answer these questions. At the 2009 AACN Annual Meeting in San Diego, Gordon Chelune chaired a lunchtime program entitled “Saving Neuropsychology from Extinction: Demonstrating Cost-Utility through Outcomes Research.” Rus Bauer and David Williamson contributed to this forum which was presented as a wake-up call to the field. The basic message is simple—we cannot continue to assume that the worth of neuropsychological evaluation services is self-evident. Neuropsychologists need to provide evidence for the worth of their services, and the answers do not lie solely in the databases of large grant-funded projects. The 2010 Annual Meeting in Chicago will offer two workshops in conducting and participating in outcomes research. Conceptualizing what we do in such a different way will doubtless seem jarring initially, but the clarion call of evidence based medicine was sounded many years ago. There is a need for an obvious shift in terms of how we view research and outcomes, but our traditional goals of diagnostic accuracy, recommendations for efficacious treatments, and statements about prognosis need not be mutually exclusive or antagonistic.

Health care is now in the crosshairs of sweeping reform efforts and “value” is the buzzword on the lips of reformers. We have reason to be confident that the value of our services can be demonstrated and we certainly should feel compelled to be the ones to bring this message to the public, policymakers, and the health care field at large. So what can we do?

THE AACN FOUNDATION

A couple of years ago, AACN determined that the establishment of a grants program for outcome oriented research would be a good way to serve the needs of our field. Our goals were lofty in terms of how this might benefit the field, but modest in terms of what we were seeking to raise. We did not anticipate the amount of effort that would be required to establish a program of substance. Over the course of the past two years it was determined that a separate charitable (501(c)(3)) organization would need to be established, as AACN was organized as professional or guild (501(c)(6)) organization. Nuances of the federal tax code aside, the American Academy of Clinical Neuropsychology Foundation (AACNF) is now an established charitable foundation. We were granted that status in the fall of 2009, retroactive to the date of incorporation in the State of Minnesota in late December, 2008. In practical terms this means that AACNF can solicit funds, accept proposals, and fund projects. It also means that donations are tax deductible as a charitable contribution (as opposed to a business expense). I was pleased to announce this fact at the AACN meeting in San Diego, and we began our fundraising efforts modestly by offering “Neuroanatomy World Tour” t-shirts in commemoration of Rus Bauer’s popular neuroanatomy workshop series. Sales were brisk, though there may be some units left! I expect that the Foundation will be announcing a number of

different giving opportunities and events over the course of the upcoming year. Information about AACNF can be found at the Foundation's website, www.aacnf.org.

The AACNF Board of Directors also met in San Diego to establish priorities and proceed with various initiatives. The Foundation Board consists of a number of AACN members who are interested in and committed to the goal of funding outcomes research, along with a number of voting ex officio members from the AACN Board. As a "supporting organization" of the Academy, AACNF exists to support initiatives that are of interest and import to AACN and its membership, namely, outcomes research. The Foundation Board members include Kira Armstrong, Mark Barisa, Bill Barr, Bob Bilder, Michael Cirillo, Lauren Dawson, Sandi Koffler, Greg Lamberty, Mike McCrea, Otto Pedraza, Neil Pliskin, and Leslie Rosenstein. The officers include President Greta Wilkening, Vice President Ted Peck, Treasurer Laura Flashman, and Secretary David Williamson. The Board consists of individuals in all areas of practice and all manner of expertise. We are hopeful that their efforts will result in the establishment of important research efforts that will serve the field of clinical neuropsychology. We ask you to consider supporting the foundation financially and with your volunteer efforts. Please contact and AACNF board member and let them know of your interest.

A VERY FOND FAREWELL

I presume that for many of us who have served on the AACN Board the notion of saying goodbye seems a little abstract. When you spend so much of your time working on issues and projects that are important to your profession, making a determination that it is simply "time to go" is unlikely. I have enjoyed tremendously the time that I have spent being involved with the Academy and have appreciated the opportunity to participate in activities that have advanced our field. The prospect of making a notable contribution to a group that has included so many imposing figures was certainly daunting for me. That is why my best memories of AACN involve the absolute inclusiveness and encouragement that I experienced in interacting with people that I regarded as true role models and legends. It has been a blast!

Finally, I want to encourage all Academy members to give serious consideration to stepping forward and volunteering your effort and expertise to your professional organizations, particularly AACN. You don't need a big vita, an impressive grant, a hugely profitable practice, or a pretty face to contribute, and to enjoy the camaraderie. I look forward to seeing you all at what for me will be a slightly more relaxed AACN meeting in Chicago in June, 2010!

REFERENCES

- Fleisher, A. S., Sun, S., Taylor, C., Ward, C. P., Gamst, A. C., Petersen, R. C., et al. (2008). Volumetric MRI vs. clinical predictors of Alzheimer disease in mild cognitive impairment. *Neurology*, *70*, 191–199.
- Hanks, R. A., Millis, S. R., Ricker, J. H., Giacino, J. T., Nakese-Richardson, R., Frol, A. B., et al. (2008). The predictive validity of a brief inpatient neuropsychologic battery for

- persons with traumatic brain injury. *Archives of Physical Medicine and Rehabilitation*, *89*, 950–957.
- Hart, T., Millis, S., Novack, T., Englander, J., Fidler-Sheppard, R., & Bell, K. R. (2003). The relationship between neuropsychologic function and level of caregiver supervision at 1 year after traumatic brain injury. *Archives of Physical Medicine & Rehabilitation*, *84*, 221–230.
- Prigatano, G., & Pliskin, N. H. (Eds.). (2003). *Clinical neuropsychology and cost outcome research: A beginning*. New York: Psychology Press.