

98| An Introduction to The Minnesota Update Conference – With Dr. Brad Roper

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Speakers: Brad Roper, Steve Correia, Ryan Van Patten, John Bellone



Intro Music 00:00



Ryan Van Patten 00:17

Welcome, everyone, to Navigating Neuropsychology: A voyage into the depths of the brain and behavior, brought to you by INS. I'm Ryan Van Patten...



John Bellone 00:25

...and I'm John Bellone. Today's episode is a conversation with Dr. Brad Roper about the Minnesota Update Conference. Brad is a board certified clinical neuropsychologist and the director of the neuropsychology fellowship training

program at the Memphis VA Medical Center. He's also an associate professor at the University of Tennessee. Relevant to today's discussion, Brad also has the role of chair of the Executive Committee for the Houston Conference Guidelines Revision Planning Commission and is an expert panel member of the Minnesota 2022 Update Conference.

Ryan Van Patten 01:00



Before getting into the episode with Brad, we have a quick announcement about the conference from Dr. Steve Correia, who is part of the Planning Commission and the Steering Committee for the Minnesota Update Conference. So here's Steve.

Steve Correia 01:12



Thank you, John and Ryan, for letting me take a few minutes to talk with NavNeuro listeners about the upcoming Minnesota 2022 Conference to update education and training guidelines in clinical neuropsychology, referred to as the MNC. The conference is scheduled to be held at the University of Minnesota in September 2022. Almost certainly neuropsychologists and neuropsychology trainees have been touched by the 1997 Houston Conference guidelines. Those guidelines not only helped define the identity of our field, but also set the standard for training. They have served the field well. It is time, however, to update these guidelines to address current and anticipated changes in the world's demographic diversity and advances in computer technology and data science. The primary goal of the conference is to update clinical neuropsychology's training guidelines, developing detailed and measurable competencies, incorporating technological advances, and fully integrating multiracial, multiethnic, and multicultural knowledge, skills, and attitudes within all aspects of clinical neuropsychological competence. Launching a work-intensive and product-driven conference such as this is costly. It involves paying for our venue, accommodations for delegates, meals, logistics, and technical support. The conference organizers have obtained financial commitments from several organizations and allied industries, but more is needed, especially from those who have completed their training and are gainfully engaged in the profession. Your tax deductible donation can be made on the conference website, MinnesotaConference.org and click on the Donate Now button. That's one word, MinnesotaConference.org and click on the Donate Now button. The website allows you to donate in your name or anonymously. You can designate your donation in honor of someone who has been important in your training and career, for example a mentor, colleague, family member, or departed loved one. The Planning Commission and Steering Committee for the conference thank you in advance for your contribution to this important undertaking. Again, please consider contributing at MinnesotaConference.org and thank you.



Ryan Van Patten 03:48

And with that, we now give you our conversation with Dr. Brad Roper.



Transition Music 03:52



Ryan Van Patten 04:01

All right, we're here with Dr. Brad Roper. Brad, thanks for making the time.



Brad Roper 04:04

Sure.

Ryan Van Patten 04:06

So let's start by talking about the Houston Conference Guidelines, or HCG, for a few minutes. In September of 1997 about 40 delegates who are neuropsychologists met at a conference in Houston to discuss creating the HCG. The result of this conference and their deliberations was the presentation and adoption of a competency-based model of integrated education and training in our field, and we've used that model for the last 25 years. Prior to HCG, there was no such widely accepted model in neuropsychology. So, among other things, the HCG policy statement outlines who a neuropsychologist is, the knowledge base such as psychometric theory and psychopathology, and skills like report writing and feedback provision that we should have, the education required to become a neuropsychologist such as grad school, fellowship. So, with all this in mind, in your opinion, Brad, what did the HCG do well? How have the guidelines served our field thus far? And then what aspects of the guidelines are in need of updating?



Brad Roper 05:18

Oh, goodness. That's a...



Ryan Van Patten 05:19

[laughs]



Brad Roper 05:20

I could talk for a long time. [laughs] So I'll try to limit this. Just in a nutshell, if you look back pre Houston Conference, it was kind of the Wild West in terms of how someone became a neuropsychologist. Many neuropsychologists grew out of research centers and got their training in that way, in the context of research. There were also people - there's a widely known neuropsych battery. You could do a five

day workshop and have your certificate. There was this notion when I was going through training of the “weekend warrior”. Someone who got their training via just continuing education and then could hang out their shingle. So there was a big need to develop training guidelines that we all agreed upon. That effort really started in the 1970s with INS forming a task force. Then, as Division 40 of the APA came about and started to get more active, they took over from INS. We did have in 1987 the INS-Division 40 Guidelines, but they were sort of two tiers. It was a little schizophrenic in terms of training. If you had some experience, 50% of an internship experience focused on neuropsych and then some experience at the doctoral level, you could start out. Many people were trained that way without doing a postdoc. At that time, postdoc training was meant for advanced levels of competence. It's kind of like you had the normal sneetches and the star bellied sneetches back then, and it was a bit confusing. If you were at a postdoc [site], they said, “Well, we want you to be in a hospital setting with neurological and/or neurosurgical services.” Part of the impetus of the Houston Conference was to gain some agreement over what is the entry level of practice.

When clinical neuropsychology was formally recognized via APA as a specialty in 1996, we were the first designated modern psychological specialty. What fell from that was that APA might start accrediting in that area. I heard a personal report of someone with the APA accreditation group say, “Well, I guess we can accredit in neuropsychology at this point.” That was surprising. I think a number of people in neuropsychology were worried about our need to develop more consensus before accrediting bodies started to take action based on this designation as a specialty. So that was the goal of the Houston Conference. “Let's agree on what this is going to be.” What was decided essentially was that training occurs at the doctoral internship and postdoctoral level, and that the culmination of training for entry-level practice was a completion of a two year postdoc focused in clinical neuropsychology. So that's what we came up with. We came up with it a little bit precociously, we did it pretty quickly and early. It's been a very long time since those have been updated. I can talk certainly about how the Houston Conference Guidelines are still useful and how they're kind of long in the tooth at this point.



John Bellone 09:18

Yeah, please do.



Brad Roper 09:20

Sure. So Houston, the goal was to have this integrated model. It was explicitly scientist-practitioner based and that was at a time when there was a lot of talk in accreditation circles about what your model is. Eventually it was called, colloquially, the “model model” because there were a bunch of models out there. When it comes

down to it, what is a model really? It was meant to be horizontal in that it was both research and practice training, and vertical in that it spans doctoral internship and postdoctoral levels. They wanted it to be a program and not just on the job training or CE [courses] or anything like that. So the Houston Conference was really successful in coming up with a policy statement that was easily understandable, that was short [and] to the point, and could be implemented. There were quite a number of two year postdoc programs who were already offering training consistent with Houston Conference Guidelines. When we spoke with some of the original members of the Planning Committee for the original Houston Conference, they said, "You really need to have an identified goal." Our north star was developing a policy statement that could be acted on by training programs and could be implemented. That's one of the things that we have decided with the Minnesota Conference as well.

What has not aged as well with Houston Conference Guidelines is that they were put in place before the development of what's been called the "contemporary competencies movement". They talked about competencies but, for example, Houston Conference mentions a competency of functional neuroanatomy. Well, that's a pretty broad term, and it's kind of a Rorschach blot. Some of the entry level competencies have since been developed - so here's an example of one entry level competency that kind of aligns with Houston Conference's: functional neuroanatomy. "The clinical neuropsychologist will have knowledge of neuropsychology of behavior, including information processing theories, cognitive affective neuroscience, social neuroscience, cultural neuroscience, and behavioral neurology." That's a lot more specific. It also holds training programs [accountable] to provide training in that. It holds individuals to account when they're wanting competency based training to be able to call themselves a neuropsychologist. So we have agreed upon competencies that were developed. Glenn Smith published it in 2018, I think, and then the print version in 2019. That was a task force that I led to put together these entry level competencies that then were passed on to APA, but that has not been incorporated into our formal training guidelines. So competencies and modern competencies are a big goal of the Minnesota Conference, and working off things that have happened since Houston and incorporating that into a Houston-type policy statement.

The other two areas that were in the mandate have been things that grew out of this Relevance 2050 project that originated within AACN, the American Academy of Clinical Neuropsychology, but is meant to be much broader than just that organization. Those areas of basically modernizing our field in areas of diversity and technology were part of the mandate of the Planning Commission going into planning the Minnesota Conference. How can we modernize our field related to diversity and technology?



John Bellone 13:52

Thanks for that overview of the history of the Houston Conference Guidelines, the need for them, the purpose that they serve for our field. Now, can you also give us a brief history of the conception of the Minnesota Update Conference, the MNC? How did it come to be?



Brad Roper 14:08

Sure. Well, going back a little bit further, there are seeds planted in different places with competencies. There was a paper that Celiane Rey-Casserly, Russ Bauer, and I wrote in 2012. We were a little bit frustrated, frankly, that our field hadn't moved as other specialty areas in psychology had done to develop consensus-based competencies so we wrote this paper to throw it out there and have people see what they thought. That served as a seed to develop other broader consensus-based initiatives. In the diversity arena, the Hispanic Neuropsychological Society has been very active. They had a one day conference in 2015, that was titled "From Houston to Austin," it was held in Austin. I kind of kicked myself that I didn't go to this conference because it looked like it was a very exciting conference, a lot of things came out of it. They were suggesting enhancements to Houston Conference Guidelines related to cultural neuropsychology, training for cultural competence at all levels, some gaps related to diversity and culture within the Houston Conference Guidelines, cultural neuroscience that interface brain-behavior with our lifelong experiences and culture. That was one of the initiatives. There have been other initiatives. There was an initiative in 2017 again involving the Hispanic Neuropsychological Society and others that was their Cultural Neuropsychology 360 conference. So these things were happening in different places related to diversity and culture that needed to be roped into a larger initiative. And finally, you know, technology. [laughs] You look at neuropsychology and neuroscience research and you see this incredible application of technology. These huge datasets involving diffusion tensor imaging and functional connectivity. There's a lot of data analytic efforts that have been underway. And then also people like one of our experts, Thomas Parsons. He put out a fascinating paper about how we really need to move forward, really growing up and getting past our paper and pencil measures. Not only assessment based measures, but we have smart smartphones with accelerometers in them. There's all sorts of incredible technological applications that we could use in our everyday practice that just haven't happened. One of the ways to bring that about is to include it in the competencies that neuropsychologists in training are expected to meet and the training programs expected to provide.



John Bellone 17:17

I'm also curious who the main players were for organizing the MNC, just out of curiosity.

Brad Roper 17:25

Oh, sure. This is long before my involvement. It was Karen Postal during her presidency of the AACN. She started this broad Relevance 2050 Initiative and essentially it recognizes that our assessment strategies are largely monolingual, monocultural, and there's a lot of lack of access to services. That's going to be increasing as we become more heterolingual, heterocultural. It's present now, and it's only going to continue that way. So this broad initiative was to support new assessment models, training models, continuing education models, clinical strategies to really increase the percentage of patients that we and future neuropsychologists are able to competently serve. So it's really that term, "relevance," that is really key there. We need to be relevant. It's not only a justice issue, it's a practice issue, it's a market issue. We need to be able to serve the patients that are going to be around in the decades to come. Part of that Relevance 2050 Initiative was in 2020, there was a Houston Conference Call to Action Subcommittee that was co-chaired by Karen Postal and Tony Stringer. That was a call for an interorganizational commission to revise Houston Conference Guidelines to address new developments in the field, particularly related to competencies, technology, and diversity. You may have noticed, basically, Tony and Karen went on a whirlwind tour of different organizations - and this was virtual. Largely this was during the pandemic, and they had a slide set, and they went to like 17 neuropsychology organizations at least. I don't know if they visited all of them, but they were really working hard to visit every one of them and just get their ear and talk about this initiative and the need to update these guidelines. So that led to the formation of the Planning Commission, and in June of 2021 we had our first meeting. The Planning Commission was composed of two representatives from each of 17 identified neuropsychology organizations. Sometimes I feel like compared to other specialties in psychology, our field is a little bit balkanized. We've got lots of different organizations, but I also think that diversity of organizations can be our asset. So that's been my goal as the chair of the Executive Committee of the Planning Commission, to really focus on inclusion and involvement. That's when we essentially got our start. We were given the people. I was asked to chair the Executive Committee. The organization of the Planning Commission is that there are three subcommittees each with two co-chairs. We were asked to function as a group to create both the structure of our own development in the Minnesota Conference and then to develop the means by which it's implemented. That effort is going on as we speak.



John Bellone 21:14

Seems like you did a good job at that effort. Well, I want to talk about the selection of delegates in a little bit. You also mentioned a lot of specific goals of the conference, but before we get a little more down that rabbit hole, I wanted to talk



about the overarching goals of the MNC. On the website, it states that the goals are to use the Houston Conference Guidelines as the foundation to create an updated policy statement - I know you mentioned that before - that describes integrated education and training guidelines for the field, to develop a consensus statement on ongoing development activities, to support education and training. I'm curious if you could tell me more about those documents? What are we hoping to achieve with those kinds of overarching deliverables from the conference?

Brad Roper 22:01

Well, I think that one of the things to emphasize with the mandate that the Planning Commission received from the beginning is that our job is to build on Houston Conference Guidelines and not overhaul something that has served our field very well since the late 1990s. We were given a mandate that was framed more in general terms. Basically [that was] the Planning Commission's mandate, and then what we did with that is to develop a more specific value statement and specific goals for the conference itself in terms of deliverables, if you will. Those are on the website. If you go to the website, and you click on "Objectives", there's the value statement and there's the policy statement. I should say the website is [MinnesotaConference.org](https://www.minnesotaconference.org). Very straightforward. In the midst of working as a commission, whenever you want to create something new you struggle with, "Okay, which thing needs to be very immediately implementable?" if that's a word, and then, "What things need to point the way forward that we basically don't have the means to implement at this point?" As we started to review the mandate and the goals for the conference, it occurred to me that we need a clear policy statement, like the original Planning Committee of the Houston Conference advised us, to have something that comes out that's a clear policy statement. But also, there's a lot of needs beyond the policy statement. So that's what became known as the "consensus statement on ongoing development activities". So that allows us to chart the road forward in a way and also develop structures so that we can review things in an interorganizational way. Now, I should say that the delegates and other participants at the Minnesota Conference, their job is to develop the policy statement, the consensus statement of ongoing activities that will be developed, but its implementation will really depend on the field as a whole. I'm happy to talk about either one of these more specifically, but the Planning Commission felt that the delegates and the experts and the Steering Committee, which they'll all be involved in the conference itself, that they should have some more specific guidance related to what the policy statement should include and what this consensus statement of ongoing activities should address for the field.





Ryan Van Patten 25:06

Great. So in terms of revision and update to the HCG, Brad, you have already outlined the three primary focus areas of the MNC. Just to review them for our listeners, one is putting forth a well articulated competency-based approach to training; two is integrating multiracial, multiethnic, multicultural issues into all aspects of training; and three is incorporating new technologies. We don't need to ask you to repeat all the good information you've already given. [laughs] One question about competencies: I imagine some of our listeners are hearing this and may have heard about competency development and models and the word "competency", like being competent in something, having the knowledge and skills to be able to do it well. There's a dictionary definition of it. When we're thinking about delineating competencies for neuropsych training, is it that simple? What do we mean specifically? What's the alternative, if not competencies?



Brad Roper 26:08

You know, your question reminds me of a story that was received by APA, their education directorate. We received a question years and years ago, and if I gave more details on it, I'd probably be wrong. But the essential question many years ago was, somebody from another discipline contacted APA and said, "If you've got a psychologist, what are they competent to do?" [laughs] And there was no easy answer to that. That was an original impetus to APA thinking very carefully about competencies and what a psychologist can do. Of course, in the area of practice, competence is defined in terms of what we now call health service psychology. We used to call it professional psychology - there's different types of clinical, counseling, school [psychology], but the overarching term is health service psychology, of which clinical neuropsychology is a practice specialty. So over the years with what's been called the "competencies movement", they are now the "contemporary competencies approach", there are a number of aspects to that. One is overall competence. It's been conceptualized in a lot of different ways. So, for example, one way to assess competence is via a summative approach. Where, "Okay, this person has arrived. Let's take a look at you in these different ways and see if you can really practice competency." That's often the board certifying credentials, your individual credential for board certification. That's considered one of those kinds of summative steps to achieve overall competence. I know that at least the board certification that I have, ABCN board certification in clinical neuropsych via ABPP, a lot of the emphasis there is on being able to integrate cases, being able to integrate what you do, develop and demonstrate the foundational knowledge base, but integration is really big. So that's that overarching view of competence. It's a bit of a fractal phenomenon, competence itself.

So that's the zoom out. If you zoom way in, you start to think about what specifically does every trainee need to demonstrate? That's when you get into more of the specifics of competence and the different elements within a given competency. So there might be a competence related to professional identity and relationships, for example, and then that might have a number of elements to it. At that level, at the level of a training program, it's important for both the trainee and the supervisor to have a common understanding of what they're talking about. What is the goal here? That's why it's better to have them well specified. As we think about the range of competencies, the different things that a clinical neuropsychologist can do, you want to make sure that all of those are in place. If that's how we're defining a clinical neuropsychologist, we want to make sure those are in place and available for someone going into initial independent or entry level practice. There can be a lot of little small details there and then the notion is that they add up to this more global type of competence. Sometimes I feel like - well, two things. One is talking about competencies is both technical, there's a specific language to competence that if you're not somebody who has put together a training program and you're not thinking about this that much, it can be hard to get sped up on that language. And also, if you're dealing with accreditation, the accreditation bodies like the APA have very specific things they mean when it comes to competence. So it's really easy for it to seem both dry and confusing at the same time. Part of the frustration that I have is trying to translate it so that someone who is not having to write a self study to APA can appreciate it. But it's complicated, I guess you could say. [laughs] Like some people's relationship status, this is definitely complicated.



Ryan Van Patten 31:01

[laughs]

Brad Roper 31:01

People have talked about things like foundational competencies that serve as a bedrock and then functional competencies that have to do with different realms of practice, like assessment, research, intervention, consultation, those types of things. There's even a paper on the competencies cube where they've conceptualized these in three dimensions. So it gets really complicated. But the notion is that, in the end, you want to be able to accurately judge from a credentialing standpoint, "Hey, this person meets criteria for board certification." You also want to be able to accurately discriminate, from the standpoint of a supervisor and trainee, what they need to work on and what they are stellar at. I think the real strength of someone who's a training supervisor is not their ability to train someone who goes on and, you know, they get the Nobel Prize or something. The real strength is to be able to make sure that everybody is rounded out with what they need in order to practice.



Ryan Van Patten 32:17



Yeah, well said. I've noticed what you referenced about the language of competencies, reading the Glenn Smith paper and your work with the Rey-Cassery paper. There's a legalese feel to it that you really have to get into [laughs] and sink your mind into it in order to understand. But thanks for describing how important they are. I agree.

Brad Roper 32:39



Yeah, perfect. What you need is a lot of caffeine going into those kinds of papers for sure.

Ryan Van Patten 32:43



[laughs] Right. Right. I wanted to ask a quick follow up about the technology focus, too. You know, technology is a broad term. There are a lot of ways in which technology could and will be relevant to our field. The MNC website that you mentioned describes data storage and analytics, digital communication, EMR, modern psychometrics. It mentions bias in technology and other topics. I'm wondering what the vision of the MNC Planning Commission and Steering Committee is around technology? How should we change?

Brad Roper 33:17



Well, whereas I can drone on a lot about competencies and I will be one of the competencies experts for the MNC, we have other experts coming in related to technology. I'm always impressed when I hear Dr. Schmitter-Edgecombe, Dr. Russ Bauer, Dr. Bob Bilder, and Dr. Tom Parsons. What I like about hearing these people who are really hip deep in these areas is it's a real learning opportunity. I think that, for me, I'm just fascinated with what is possible. In some ways, when it comes to technology, one of my thoughts is - I remember years and years ago, Don Stuss was doing a talk about assessment methods for executive abilities and he said, "Hopefully, 20 years from now, we won't be assessing executive abilities anything like we do now." Well, unfortunately... [laughs]

Ryan Van Patten 34:25



[laughs]

Brad Roper 34:26



...we're pretty much still using the same measures as we were 20 years ago. So that need is there. We need to be very specific about "This is where we need to go". Now the challenge is technology is always changing. So one of the challenges for the delegates will be how do we frame competencies in a way that will apply to

technologies that we may not even foresee currently? I've got my pretty rudimentary armchair thoughts about what might need to happen with technology, but I am by no means an expert on this. Actually, I look forward to [and] I view the whole conference as this incredible opportunity, that the sum is going to be much greater than the parts. I hope to learn a great deal in the midst of it.



John Bellone 35:28

It's exciting for sure. I want to spend some time talking about the structure of the conference. So maybe to start, what is the Planning Commission? And what is the Steering Committee?



Brad Roper 35:38

Right. So when I look back at the original Houston Conference Guidelines proceedings, it seems like there was a Planning Committee that became a Steering Committee, and then there were delegates and various work groups. But this one has more levels. I think that the reason for that was owing to the need to really be broad and inclusive in bringing in all the different organizations as part of the planning commission. As I said, they were formed back in June of 2021. We have two hour meetings every month. There are subcommittees that may have other meetings outside of that. The Planning Commission members will complete their work with the August meeting, and those are all virtual meetings so they will not be participants in the conference unless they have some other role. The Steering Committee is functioning currently, and it has a large role in setting the specifics of the conference schedule, looking at the budget, and how things are shaking out in that way. The Steering Committee and the Expert Panel is working together currently to plan the conference. There's a subcommittee of the Planning Commission that is contributing to that as well. I guess you could say it's a very large and complex effort. Currently members of the Planning Commission, members of the Expert Panel and the Steering Committee are all working together to plan the conference. The delegates have been selected. There may be a few things to work out in terms of whether someone is going to be able to come or do we need to contact an alternate, but essentially the Steering Committee is seven members, the Expert Panel is four members, each from technology competencies and diversity areas, and there's going to be somewhere in the low to mid 50s in delegates. Out of all of these groups, the delegates are the only ones who will vote on the policy statement and this consensus statement we're looking at. So the notion is that the people putting the most work into it now are not going to be the people who are voting and that was done in a spirit of democracy, if you will. By bringing in this broadly representative group and the experts can't vote, the Steering Committee can't vote, but the delegates can. Like I said, there's somewhere around 50 to 55 delegates who are planned for the conference. At least

one-third of the delegates are from a racial, ethnic, linguistic or cultural group that's underrepresented currently in neuropsychology. Then also looking at things like diverse gender, sexual orientation, and a balance of primary employment practice area, their training level, if you're a doctoral level professor versus a practicum supervisor, internship supervisor, postdoctoral [supervisor]. Whenever you do a conference for training guidelines, you need people to have experience in training, that's one of the constant things. There are also people who are trainees who will be involved as delegates in the conference. We have one trainee, Anny Reyes, who is serving on the Steering Committee.

Ryan Van Patten 39:23



Great, thanks for the overview. So what can you tell us about what the five day conference in September will look like? What will participants be doing with their time? I'm guessing this isn't going to look like your typical INS or NAN or AACN. It's different. So what will it look like?

Brad Roper 39:38



Right. Well, we have a group that's very actively working on that schedule. Leading up to that [when] you go to a normal conference, a lot of that activity is passive. You know, you listen to people, you hopefully learn but it's not work oriented. This will be. There will be work and also pre-work. So the Steering Committee and others are putting together a survey of delegates to understand where they're coming from, what they believe are some of the important things that need to be done at the conference. There will be readings ahead of time. We're going to carefully select readings related to technology, diversity, and competencies so that people will come in prepared. The notion is to really try to minimize the amount of passive listening, but to jump into work groups. The way that the discussions have gotten to this point is that the workgroups will focus on deliverables. We don't want to save everything for the end in terms of writing these statements, but to have some sort of milestones along the way. And also to be able to have some breakout sessions and work groups that are focused on a specific area or topic to address. To have a kind of cross fertilization of delegates and experts in the midst of that. So, at this point, that planning is currently underway. It's really hard. We don't have a nailed down schedule at this point, but we do have a beginning time and an ending time. We're going to begin sometime in the morning on September 12 at the University of Minnesota, and we're going to end at noon on September 16, on that Friday so people can get home if they need to.

John Bellone 39:41



Roughly speaking, when might listeners expect to see the policy statement and the consensus statement? More generally, when is this conference going to potentially

begin to have a tangible impact on training in the field? I know this is really tough to predict, but just a ballpark if you could?

Brad Roper 42:06



Oh, no, it's very easy. I can say right now, I'll commit that the delegates will complete the policy statement and we'll send it out on...Well, let's go for a day early, September 15. What about that?

Ryan Van Patten 42:18



[laughs]

Brad Roper 42:18



Obviously I'm kidding. [laughs]

John Bellone 42:20



[laughs]

Brad Roper 42:21

Obviously there's a lot of things that are out of my control on this. The hope is, though, that the policy statement and the consensus statement will be finalized at the conference. What does finalized mean? There will be a vote on these documents when we're there. Then it's just a matter of that process of dissemination via journal articles [and other] means. That's something that the delegates in the Steering Committee and the Expert Panel will be working on. [What is the plan for dissemination? So, hopefully, within months, the policy statement will be published somewhere. I'm just speculating at this point, but the notion is that we don't want to leave anything [out] that needs to be voted on when everybody's together there. So I think that's the goal. We have named in the objective statement, the primary goal is the policy statement and the secondary goal, which is much more overarching and involves ongoing activities of multiple organizations. That's the consensus statement. So my hope is that we'll get both of those done by the end of the conference, that vote. The way the discussions have been going, the last day of the conference, which is just a half day that is going to end at noon, most of that day will be voting and finalizing things. So we're really looking at the four days before to accomplish the bulk of the work.



John Bellone 44:06



As soon as those documents are published, you would hope that training programs would take notice and incorporate them into their programs. Is that right?



Brad Roper 44:14

Sure. Sure. I know that sometimes people struggle when they come out with new consensus statements, training guidelines, etc. What's the expectation in terms of implementation? There are aspirational aspects to that sometimes, there are targets to meet. There was some informal talk about Houston Conference Guidelines, that a certain number of years after the guidelines were done then training programs would largely be acting consistent with that. I know that first the Guidelines themselves came out in the late 90s. But then it wasn't until ABCN saying you have to have training if you graduated after December of 2003, I believe and maybe I'm totally off about that. But after a certain date, they said, "We want you to have training that's consistent with Houston Conference Guidelines." It takes time, for example, for accreditation bodies to incorporate new competencies when they come out. Then those expectations filter down to the training programs themselves. So it's hard to say. I don't think what's going to come out of the conference is "Everybody's got to have everything in place on this date." But it will be there for the field and for training programs to use and apply to what they're doing every day. Obviously that can take time.



John Bellone 45:58

In terms of the sponsorship for all of this, can you tell us who's making this possible and what the money is used for?



Brad Roper 46:05

Right. We do have sponsorship from the University of Minnesota that agreed to provide space for us. Looking back at the original Houston Conference, it was Julia Hannay, who was at the time the chair of the department of psychology, she was able to rely on a great number of resources at the Houston Conference and they were the primary sponsor. In contrast, we have a broad range of sponsors and most of the money has come from neuropsychology organizations. I encourage people to look at two areas on the website, there's a sponsors tab and if you go to that you see all of these organizations listed there, as well as Pearson assessments and some other institutions have given money to this. Some of these organizations have given very generously, but we still need more donations. We are on track, however, to I believe meet the needs to cover the conference. That's not only the facilities themselves and things like meals, but we're going to try our best to get people there. We don't want the inability to pay to be an obstacle to a delegate attending. So our goal is to cover the delegates and their attendance.

In addition to the organizations you can click on the individual sponsors. You can list your name and you can list who your individual donation is in honor of. I've really encouraged people to reflect on those people that you think "Oh my god, if

they hadn't been there for me in my training, I wouldn't be anywhere where I am today." I looked at some of the people who were deeply involved in the original Houston Conference and I was blessed to have been able to be their trainee. My first practicum supervisor in neuropsychology was Manfred Meier, Mandy Meier, the late Mandy Meier, who was at the University of Minnesota where I went to grad school. People on the Steering Committee - Dr. Bruce Crosson, when he was at University of Florida was one of my internship supervisors; Linas Bieliauskas was my mentor in my postdoc at University of Michigan. And not just them, but many other people who brought about the original Houston Conference. We're sort of standing on the shoulders of giants, I think. I felt moved to really honor them as we are doing this generational update of our training guidelines. And I invite others to do the same thing, if you can. Reflect on who has been important in your training life and your development and honor them as well.

Ryan Van Patten 49:19



In addition to donating money, some of our listeners may be wondering if there's any way that they could contribute and help with the conference if they're not going to directly take part in it. For example, is there a way for anyone to submit ideas or comments for consideration? Or anything else that our listeners may be able to do?

Brad Roper 49:37



Sure. Well, I have to say that a number of people have sent us [messages], "Hey, we'd like you to pay attention to this" or "We're concerned about this." We are very interested in receiving those. People can certainly email me. I can give my University of Tennessee Health Science Center email address, it's broper@uthsc.edu. So send those ideas my way and I can pass them on to the Steering Committee.

Ryan Van Patten 50:19



That's very generous. Thank you for providing your email address. If you get 1000 emails tomorrow, don't fault us. [laughs]

Brad Roper 50:26



Well, no, I won't fault you at all. People know how to find me anyway. [laughs]

John Bellone 50:34



Just before we wrap up, kind of stepping back, can you give us your big picture pitch for the MNC? For what it could do for the field of neuropsychology, for how our field might look different in 10, 20, 30 years from now as a result of this conference?

Brad Roper 50:52



Sure. I see a future where a neuropsychologist - first let's talk about the stereotyped way that it sort of used to be. We've got our neuropsychology laboratory where we have people come in and we give them a bunch of tests and maybe talk to them a little bit. Then we test them all day and send them on their way. It's sort of that "diagnose and adios" approach that people have experienced sometimes and criticized. I'm kind of an assessment nerd and I'm a training nerd, and that's where I'll always live at this point in my career. But I envision a future of neuropsychology, like a generation down the road I want to look back, drinking a craft beer in retirement and look out and see people practicing who are really promoting brain health, broadly speaking. Who are using multidimensional assessments, including some measures like maybe in person measures [and] virtual smartphone apps, that they're getting this dense information, they're able to translate it to somebody's life in a way that makes real meaning to that patient. And then also able to offer the best types of interventions for those who would benefit from those. We just have so much potential in our field. I think that's untapped potential. My hope is that the Minnesota Conference will be a real springboard into that. Not only the results of the conference itself, but the processes that are put in place and the attention that the field pays to the future that will serve us on an ongoing basis as we continue to adjust to an ever changing world.

Ryan Van Patten 52:58



You are preaching to the choir. This is very exciting, Brad. Thanks for talking through all of that. We do have two bonus questions that we ask all of our guests. It's a bit unique today because the bonus questions are actually related to MNC and everything we've been talking about. So just take them where you'd like to go. The first one is: If you can improve one thing about the field of neuropsychology, what would it be?

Brad Roper 53:24



This would be more immediate. I would identify our current immediate need is, particularly in light of the pandemic, we need reliable ability to assess patients and work with patients in their homes, to have valid assessments that go to them. We need the technology to be able to do that.

Ryan Van Patten 53:52



I'm wondering, Brad, how you feel where we're at with that right now? With teleneuropsychology compared to where you'd like to be?

Brad Roper 53:59



Well, of course, many of us or most of us had an experience with our lack of preparation with the pandemic and the opinions are all over the gamut. My take on the current literature - you know, most of my practice is at the VA, in the VA Medical Center and the VA system - our ability to get into the home given the technology available, we have a limited empirical basis for that. Our ability to do clinic-to-clinic [assessment] I'm a lot more hopeful about. I think there's a better empirical standing for when you've got a controlled environment and known technology on either side. I think we've come a lot further with that than trying to assess people where they are, where they're living.

John Bellone 54:50



Great. For the second bonus question, what is one bit of advice that you wish someone had told you when you were training or maybe somebody did tell you? Clearly you got lots of good mentorship over the years, [laughs] but what really made the difference for you? We're looking for an actionable step that trainees can take that they might not have thought of.

Brad Roper 55:09



Right. A couple of things. Seeing your supervisors as people and allowing them to be people. I have an example of where I asked a question of a supervisor when I was on internship and I had that kind of deer in the headlights look. That supervisor said, "Brad, you shouldn't have such thin skin." [laughs] And I was kind of like, "Oh boy, that's hard feedback." It really changed me in the way that I viewed feedback. If you look at medical school, there's a lot of things that need to change, I think, about medical school and medical residency training. But one of the things they're used to is just being put on the spot and being expected to produce things extemporaneously. So I would say to trainees, invite your supervisors to ask you questions and to help put you in that position to speak extemporaneously. Also view training as a luxury in a way because you're going to be out of training and you won't be able to try to say crazy things in your reports. I really started to do that in my second year of fellowship, where I just started to really start to miss it even though it wasn't over yet. I started to really be more risky in what I was saying and that was a great benefit. I want to encourage people to take risks, be willing to take hard feedback, and seek out mentors. Seek out people you can develop mentoring relationships with that will serve you for years to come.

Ryan Van Patten 57:00



Good advice. As a supervisor myself, I think I ask my trainees a lot of questions to your point, Brad. But if somebody doesn't have the right answer or doesn't know the answer on the spot, I think we, for the most part, understand and understand that

these are people in training struggling with the material. Talking through different possibilities, sometimes there's a closed ended right answer, but a lot of the time there isn't. You know, what's this diagnosis? Is it AD, vascular, MCI, dementia? It's not an easy answer and struggling with material, talking it out as a trainee can be really helpful. So I think that's good advice.



Brad Roper 57:38

Absolutely. And too good supervisors are going to give you feedback. "Okay, was this lacuna kind of neuropsych 101? Or was this a really high level question that we just wanted you to chew on to understand your thought process?"



Ryan Van Patten 57:54

Right. Well, this has been great. Thanks for taking the time to talk us through the MNC as we have just a few months until it happens. We've enjoyed having you. Is there anything else about the MNC or anything else that we haven't asked that you'd like to add?



Brad Roper 58:09

You guys have done a great job of covering this. I guess at this point the main message is to support us if you can and stay tuned. I believe the amazing things that are going to come out of the Minnesota Conference.



John Bellone 58:26

Excellent.



Ryan Van Patten 58:27

Great.



John Bellone 58:28

If we can manage it, we'll have to buy you one of those craft beers that you talked about.



Ryan Van Patten 58:32

[laughs]



Brad Roper 58:33

Yeah, I'll buy a round for all.



John Bellone 58:35
[laughs]



Brad Roper 58:36
I owe so many beers at this point.



Ryan Van Patten 58:38
[laughs]



Brad Roper 58:38
You know, with the pandemic, it's like, "Oh, I owe you a beer." We're going to have to do a major cash-in of all these beer debts when we finally all get together.



John Bellone 58:48
[laughs] That's true.



Ryan Van Patten 58:48
We tell [that to] all of our guests because we're so grateful to you for offering your time. You know, we can't offer payment for the podcast interview, so we always tell our guests, "Next time we see you at a conference, we'll buy you a beer." So we have a big beer debt, too. [laughs]



John Bellone 59:03
That's true.



Brad Roper 59:04
[laughs] Yeah, well, if you need to collect some additional donations for that because of your service to the field, I will donate to your beer fund to help out others. [laughs]



Ryan Van Patten 59:15
Thanks. [laughs]



John Bellone 59:16
[laughs] Appreciate it.



Ryan Van Patten 59:17

Yeah. Great.



Brad Roper 59:18

Take care.



John Bellone 59:18

All right. Bye.



Transition Music 59:19



Ryan Van Patten 59:24

Well, that does it for our conversation with Brad. The Minnesota Update Conference is a really big deal in our field, so we might release at least one more episode on it after the conference takes place in September. And, as always, thanks so much for listening, and join us next time as we continue to navigate the brain and behavior.



Exit Music 59:43



John Bellone 1:00:00

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Ryan Van Patten 1:00:19

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