Book review

Filling the gap between neuropsychological assessment and therapy: The collaborative therapeutic neuropsychological assessment model


Following the work of Finn (1996) in the area of Therapeutic Assessment, and Miller and Rollnick (2002) in the area of Motivational Interviewing, a text that outlined a more collaborative and patient-centered approach to neuropsychological assessment was greatly needed. Collaborative Therapeutic Neuropsychological Assessment by Tad T. Gorske and Steven R. Smith details such a patient-centered method for conducting a neuropsychological assessment interview and feedback session that is in keeping with assessment and intervention approaches found in other, more traditional areas of the mental health. This method integrates components of Gorske’s (2008) Therapeutic Neuropsychological Assessment (TNA) with Smith’s Collaborative Neuropsychological Assessment (CNA) to optimally engage the patient in a collaborative process throughout all aspects of neuropsychological assessment and feedback. While a collaborative style is certainly not a novel concept to practicing psychologists of any subspecialty, this textbook serves as a useful reminder of the essential tenets of proper psychological care and communicates a detailed method and style of interacting for neuropsychologists that is well worth the read for trainees and practicing clinicians alike. This book will be appreciated by early trainees in neuropsychology, as they grapple with finding a syntonic clinical style while working with diagnostically challenging patient populations, and also by practicing neuropsychologists as a vehicle to deliver therapeutic intervention. The authors then discuss TNA (Gorske, 2008), the specific focus on the neuropsychological feedback session, and share pilot study data supporting patients’ positive response to this approach. Then, Smith’s approach of CNA, which is focused on the entire process of neuropsychological interview, assessment, and feedback of results, is presented. Chapter 3 discusses the combining of Gorske’s TNA and Smith’s CNA to produce a Collaborative Therapeutic Neuropsychological Assessment model.

Chapter 4 concretizes learning in Chapters 1–3 by translating theory into practice through case illustrations. The collaborative therapeutic neuropsychological assessment (CTNA) model forms the theoretical backdrop as a mock dialogue occurs between an examiner and a patient. This chapter is further subdivided into ways of gathering information in a CTNA-consistent way for key parts of the interview, including (1) understanding the problem, (2) understanding the emotional experience of the problem, the (3) determining the central cognitive–emotional complaint, and (4) understanding the patient’s wishes for the assessment, results, and outcomes. Dividing the chapter this way allows the reader to conceptualize using the CTNA model in his or her own practice. The end of the chapter provides a concise summary of the author’s major points.

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Chapter 5 is the longest and most information-saturated chapter; it focuses on using CTNA during the feedback session, which includes the preparation of a feedback report. The authors begin by discussing the conceptual basis of providing feedback using this approach, which draws very heavily from the literature on motivational interviewing (MI) and its format for providing information of “Elicit–Provide–Elicit.” This format involves the practitioner adopting a “curious” interview style that encourages patients to discuss their difficulties (elicit), providing clear and nonjudgmental information (provide), and giving the patient a chance to absorb and reflect upon this information (elicit). They then provide a literature review detailing the evidence for the effectiveness of this approach and go on to show the format of the CTNA feedback session. Mock dialogue is again used to illustrate the model, with summaries provided at the end of each section. The sections include setting the agenda and introducing a feedback report, developing life implication questions, determining a personal skill profile, providing feedback about personal strengths and weaknesses, and then developing a change plan and providing recommendations. Chapter 6 provides two case examples illustrating how CTNA can be used from the beginning to the end of a case. These case studies are very useful, as they allow the reader to gain applied knowledge of CTNA. Chapter 7 discusses the application of CTNA methods to different clinical settings. These settings include general clinical practices, rehabilitation settings, teaching, working with children, adolescents, and families, and working with the elderly and their families. The authors also discuss future research needed with CTNA methods as well as cultural issues. Chapter 8 briefly discusses the authors’ final thoughts on CTNA and provides recommendations for how individuals may learn the skills necessary to provide assessment and feedback consistent with this model.

The appendices of this book are invaluable to anyone who wishes to use CTNA in their practice. The first appendix provides a sample of an abbreviated CTNA feedback report that gives readers a great sample to work with and modify for their own needs. The second appendix provide samples of patient feedback form that helps allow the examiner to know how the session is perceived by the patient. The final assessment provides a CTNA adherence scale to allow researchers or clinicians to determine how closely the CTNA model is being followed. All tools provided would greatly help anyone hoping to integrate this approach into their practice.

There are very few shortcomings about this book. The one major shortcoming is the lack of data to support this particular clinical approach—however it is recognized that this is not the intended aim of the book. It draws on several other theoretical applications including Finn’s (1996) therapeutic assessment approach and Miller and Rollnick’s (2002) Motivational Interviewing approach that both have efficacy data. The authors do a wonderful job of proposing a model and outlining the future research that needs to occur to test this model’s effectiveness. The way the book itself is organized could be improved as well. Chapter 7 specifically could be organized more clearly and the section on CTNA and Cultural Issues should be expanded.

Overall, Collaborative Therapeutic Neuropsychological Assessment clearly fulfills the authors’ goal to provide a model that “fills the gap” (p. 21) in neuropsychological assessment methods wherein patients are active collaborators in the assessment process. This process is neither fast nor easy, and it requires the neuropsychologist to actively consider the patient as a whole person. This text reminds the professional audience that the neuropsychological feedback process is indeed a process, and one that doubles as an intervention component that can have a transformational effect on the lives of consumers. As with many process considerations in more traditional mental health arenas, the timing and nature of the delivery of feedback can either open or close communication channels, and it can be either positively or negatively transformative. Neuropsychologist providers are encouraged to focus as much on the quality of their feedback process as they focus on the feedback content. Let us not forget that as neuropsychologists we are still clinical psychologists, and process interventions can occur irrespective of clinical subspeciality. As such, this book is strongly recommended for all those providing neuropsychological assessment.

Thomas A. Campbell and Treven C. Pickett
H.H. McGuire VA Medical Center, Richmond, VA, USA

REFERENCES


