

**AMERICAN BOARD OF PROFESSIONAL PSYCHOLOGY
AMERICAN BOARD OF CLINICAL NEUROPSYCHOLOGY**



**The American Board of
Clinical Neuropsychology**

**BOARD CERTIFICATION GUIDELINES AND PROCEDURES
FOR THE
SUBSPECIALTY OF PEDIATRIC CLINICAL
NEUROPSYCHOLOGY**

**CANDIDATE MANUAL
November 2018**

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I. DEFINITION OF A PEDIATRIC CLINICAL NEUROPSYCHOLOGIST

Clinical Neuropsychologists have specialized knowledge and training in the applied science of brain-behavior relationships and use this knowledge in the assessment, diagnosis, treatment, and rehabilitation of patients across the lifespan who have known or suspected developmental, neurological, medical, or psychiatric conditions.

Pediatric neuropsychology is a subspecialty within the field of clinical neuropsychology that is concerned with the study and understanding of brain-behavior relationships in children and adolescents with known or suspected brain injury or disease, neurodevelopmental disorder, learning disorder, or other congenital or acquired disorder affecting brain development and function. It is essential that subspecialists in the field of pediatric clinical neuropsychology demonstrate firm grounding and appropriate working knowledge of the general principles and practices of the specialty field, in addition to more focused knowledge and skill required of the subspecialty. As such, subspecialty certification in Pediatric Clinical Neuropsychology is only conferred to individuals who have also demonstrated competence in the parent specialty of Clinical Neuropsychology.

Pediatric neuropsychologists engage in assessment, intervention, program development, and cross-disciplinary consultation, and also contribute to definitions of standard of care for appropriate clinical practice in the profession. Pediatric neuropsychologists are also often involved in teaching and mentoring, research, supervision, as well as undergraduate, graduate, and resident education and training.

Pediatric neuropsychologists serve a steadily growing and diverse range of populations in various practice settings. The role of a pediatric neuropsychologist has expanded along with advances in medicine. These advances have contributed to increased rates of survival and improved outcome for many children with specific brain insults or diseases that, in prior decades, would have resulted in these children's death or severe disability. Thus, increasing numbers of pediatric neuropsychologists participate in research, theoretical formulation, assessment, intervention (including educational planning), and outcome evaluation. Pediatric neuropsychologists are integral to research and clinical teams applying new and emerging biomedical technologies to brain-behavior relationships in children.

II. COMPETENCIES OF THE SUBSPECIALTY OF PEDIATRIC CLINICAL NEUROPSYCHOLOGY

The following competencies represent constructs currently measured by the ABCN board certification process. These constructs have been adapted to reflect the expectations of a subspecialist in Pediatric Clinical Neuropsychology with the understanding that each candidate for subspecialty certification has already demonstrated these competencies at the more general level assessed by the parent board.

A. Functional Competencies. The ABCN Pediatric Clinical Neuropsychology Subspecialty Examination assesses a candidate's knowledge and skills as they specifically relate to the science and practice of pediatric neuropsychology. As such, it is a test of the candidate's command of clinical and scientific knowledge about infants, children, and adolescents, and of the practitioner's ability to integrate this information to benefit and inform pediatric patient care. Candidates are given opportunities to demonstrate their knowledge, skills, and experience in the subspecialty practice of Pediatric Clinical Neuropsychology through a written examination and practice sample review.

1. **Assessment.** Clinical neuropsychological assessment of infants, children, and adolescents serves as a foundation of pediatric clinical neuropsychology practice, and is evaluated throughout the ABCN subspecialty examination process. Candidates for the pediatric subspecialty should be well versed in the application of appropriate evaluative methods for diverse pediatric patient populations and problems in a variety of contexts. They should be knowledgeable about test construction, standardization, validation, or related psychometric issues as applied to pediatric assessment. Assessment practices, profile interpretation, and use of assessment results are evaluated in the examination process. As well, the candidate is evaluated on the ability to understand and appropriately address individual and cultural diversity factors, ethical issues, and legal issues as they relate to assessment choices, interpretation of results, and outcome evaluation.

2. **Consultation.** Candidates must demonstrate the ability to communicate and apply knowledge in consultation with others such as health care professionals from other disciplines, educators, social service agencies, legal systems, public policy makers, and individuals in other institutions and settings. In addition, pediatric clinical neuropsychologists collaborate

with the above professionals and advocate on behalf of the patient with respect for developmental stage and level of neuropsychological functioning. They also collaborate with other investigators in clinical research and may have a role in other non-evaluative settings as policy consultants.

3. **Intervention**. Candidates must demonstrate knowledge of potential treatments and interventions to address the cognitive and behavioral problems identified in pediatric neuropsychological assessment. Knowledge of evidence-based intervention methods appropriate to address deficits in cognition, attention, learning and memory, problem solving, sensory motor processing, and psychological disorders is expected. In some forms of professional practice, assessment and intervention are integral parts of the same process. In other clinical circumstances, specific recommendations for managing the problem are made through referrals to other appropriate professionals. Candidates should be able to demonstrate informed decision-making regarding choice of therapeutic or environmental interventions to address cognitive, behavioral, or psychosocial deficits.

B. Foundational Competencies. Cutting across all functional competencies are the foundational competencies of scientific knowledge and methods, evidence-based practice, individual and cultural diversity, ethical legal standards and policy, professionalism and interdisciplinary systems as related to assessment, consultation and intervention. Evaluation of additional foundational competencies of Relationships and Reflective Practice/Self-Assessment/Self-Care is not pursued in the subspecialty process as these competencies are assessed through the oral examination of the parent ABCN certification process. The foundational competencies evaluated through the subspecialty certification process are demonstrated primarily through the pediatric subspecialty Practice Sample, with some content also represented on the Written Examination.

1. **Scientific Knowledge & Methods**. Candidates must be knowledgeable about the scientific basis of pediatric neuropsychological practice as defined by the core knowledge base domains described in the [Houston Conference](#) guidelines for education and training in neuropsychology. These include research methodology in pediatric populations, neurodevelopment, childhood psychopathology, functional neuroanatomy, pediatric clinical syndromes, and specialized neuropsychological assessment techniques. The pediatric subspecialist must also be knowledgeable about normal and abnormal brain development within the broader context of childhood development from prenatal stages through young adulthood. Included are influences related to developmental psychology, family systems, childhood psychopathology, genetic

influences, and common childhood disorders and syndromes.

2. **Evidenced Based Practice.** The pediatric clinical neuropsychologist must be knowledgeable about the recent literature on normal and abnormal brain development and function, assessment methods, and intervention strategies for the pediatric population and must be able to apply this knowledge according to evidence-based practice concepts.

3. **Individual and Cultural Diversity.** Awareness of all aspects of individual and cultural diversity and how these issues inform assessment, consultation, intervention, and scientific knowledge must be demonstrated as it applies to the pediatric population. The pediatric subspecialist must recognize the impact of cultural, linguistic, socioenvironmental, and other areas of diversity in childhood and adolescence as they pertain to cognitive development and brain function/dysfunction. The candidate must also be aware of his/her own individual and cultural characteristics as they influence functioning across competency domains and interpersonal interactions.

4. **Ethical Legal Standards and Policy.** A successful subspecialty candidate is aware of: (1) current APA/CPA ethical principles and practice standards; (2) current statutory and regulatory provisions applicable to pediatric practice; and (3) implications of these principles as they relate to children and their families.

5. **Professionalism.** A pediatric subspecialist must understand his or her role in different contexts and systems relevant to children and families. He or she must remain current in knowledge and skills of brain-behavior assessment in children and adolescents and engage in ongoing analysis of their skill set and knowledge base. They should strive to continuously improve their practice and be an effective advocate for their patients, their families, and the profession. They must recognize the limits of their own competence and seek consultation and/or additional training as warranted to meet the needs of their patients.

Demonstration of lifelong learning and maintenance of competence is expected.

6. **Interdisciplinary Systems.** Pediatric candidates must demonstrate knowledge of key issues and concepts in related pediatric disciplines (e.g., neurology, psychiatry, neuroradiology, rehabilitation, education) and the ability to communicate and interact knowledgeably with professionals across these disciplines. Candidates should be able to articulate the roles of other professionals with regard to patient care, integrate the perspectives of related pediatric disciplines into their case conceptualizations, display the ability to work as a member of interdisciplinary teams, and collaborate with other pediatric professionals to contribute neuropsychological information to overall team diagnostic formulation, planning, and intervention.

III. ELIGIBILITY REQUIREMENTS FOR CANDIDACY IN PEDIATRIC CLINICAL NEUROPSYCHOLOGY

To be eligible for certification in any ABPP subspecialty, applicants must first meet all eligibility requirements of the parent Board overarching the subspecialty, as demonstrated by attaining Parent Specialty Board certification.

Applicants who wish to pursue subspecialization in Pediatric Clinical Neuropsychology are required to complete an [application form](#) detailing their specific training and clinical experience in the subspecialty. This form is found on the [ABPP](#) and [ABCN](#) websites.

The following are criteria approved by the ABCN Board of Directors and ABPP Board of Trustees for advancement to candidacy in the subspecialty of Pediatric Clinical Neuropsychology:

A. Attestation of pediatric subspecialty practice within the two years prior to application.

B. Pediatric subspecialty experience as defined below:

1. All applicants must document a minimum of 4000 hours (i.e., 2 years full-time or equivalent on a part-time basis) of post-doctoral experience within pediatric neuropsychology as a trainee or independent professional
2. For applicants who completed doctoral training or re-specialization in clinical neuropsychology on or after January 1, 2005, at least 1000 of the above 4000 hours of postdoctoral clinical practice must be obtained under the supervision of a pediatric neuropsychologist. The qualifications of the supervisor may be requested as part of the application.

C. Reference Letters. All applicants must submit two (2) letters of reference from health professionals verifying that the applicant has practiced pediatric neuropsychology for at least two years prior to application and accrued a minimum of 4000 hours of experience in pediatric neuropsychology over their professional career. It is preferred that at least one of the individuals writing letters have ABPP certification in Clinical Neuropsychology, Fellow status in the APA Society for Clinical Neuropsychology (Division 40), or demonstrated a similar degree of advanced knowledge, education, training, and practice in pediatric neuropsychology.

1. Applicants who earned their doctoral degree or re-specialized in Clinical Neuropsychology prior to January 1, 2005 must provide at least one letter from a pediatric neuropsychologist who is familiar with their work as a pediatric neuropsychologist.
2. Applicants who earned their doctoral degree or re-specialized in Clinical Neuropsychology on or after January 1, 2005 must provide one letter which attests that at least 1000 of the required 4000 hours were obtained under supervision of a neuropsychologist whose practice is primarily devoted to pediatric neuropsychology. Preferably, this letter will be obtained directly from the postdoctoral supervisor.

IV. APPLICATION PROCESS

- A. Exam Overview.** The American Board of Professional Psychology's (ABPP) subspecialty certification in Pediatric Clinical Neuropsychology is a 3-step procedure that includes 1) credential review, 2) written examination, and 3) submission of a practice sample. The credential review assures that the candidate has received appropriate education, training, and supervised clinical experiences. Once credentials are approved, the candidate is eligible to take the Pediatric Clinical Neuropsychology Written Examination. Once the Written Examination is passed, the candidate is eligible to proceed by submitting one (1) Practice Sample for peer review.
- B. Application Process.** Any ABCN applicant, candidate, or Specialist may apply for subspecialty certification in pediatric clinical neuropsychology. The form is completed and submitted electronically to ABPP Central Office, after which it will be forwarded to the ABCN Credentials Committee for review by the Pediatric Subspecialty Credentials Subcommittee. Individuals whose subspecialty credentials are approved may proceed to the subspecialty examination process only after they have been awarded Specialty board certification through the ABCN parent examination process.
- C. Pediatric Subspecialty Credential Review.** The credential review proceeds as described below.
1. Approval of Subspecialty Credentials. The subspecialty application is forwarded from ABPP Central Office to the ABCN subspecialty credential review subcommittee chair who reviews (or assigns for review) the application to ensure subspecialty criteria are met. The review is returned to ABPP Central Office, which in turn notifies applicants of the review decision.
 - a. If the subspecialty application is approved, the applicant becomes a "candidate" for certification in the subspecialty of Pediatric Clinical Neuropsychology.
 - b. If the nature or extent of the applicant's recent clinical practice in pediatric neuropsychology is limited, the credentials committee will take the entire application under advisement, including pediatric clinical practice over time, current pediatric-specific research/scholarly writing, and/or clinical teaching/supervision/training in pediatric neuropsychology. Such applications will require more careful committee review and committee members may seek additional documentation from the applicant before a final review decision can be made.
 - c. If the application is not approved on the basis of lack of clarity or missing supportive information, the subspecialty credential review subcommittee will return the application to ABPP "pending" clarification. ABPP notifies the applicant of the need for specific additional information before a review decision can be made. The

applicant may submit the requested clarification for up to one year after the date of notification by ABPP. The subspecialty credential review subcommittee chair will recommend approval or non-approval of the full application once the additional materials are received.

- d. If an applicant with a “pending” application does not respond to the request for additional information within the allotted one-year window, the subspecialty credential review subcommittee notifies ABPP that the application status should be changed to “not approved”. ABPP notifies the applicant of the final review decision regarding the subspecialty.
- e. If the subspecialty credential review subcommittee does not approve an application, ABPP will notify the applicant of the weakness or non-acceptability of credentials identified by the subcommittee, as well as recommendations for strengthening the subspecialty application, if any.
- f. If an applicant whose subspecialty credentials are “not approved” wishes to later reapply, he/she must resubmit their application materials and demonstrate that the application has been improved.

D. Candidacy Period. The subspecialty certification process must be completed within a three (3) year candidacy window.

1. For candidates who have already been awarded board certification through the ABCN parent process at the time they complete subspecialty credential review, the date on the subspecialty credential review decision letter defines the start of this three-year period.
2. For candidates who have not yet completed ABCN parent board certification, the three-year candidacy window begins on the date of parent board certification, as determined by the date on the notification letter sent by ABPP Central Office.
3. Candidates who do not successfully obtain subspecialty certification within their allotted candidacy period must re-apply and re-start the process from the beginning, with appropriate fees.

V. WRITTEN EXAMINATION

The applicant is eligible to register for the Pediatric Subspecialty Written Examination once admitted to candidacy.

A. Examination Content. The Written Examination (WE) consists of multiple-choice questions covering pediatric neuropsychology content within areas identified by Section VI of the [Houston Conference](#) guidelines and the competencies described in Section II of this manual. Questions may address issues related to neurodevelopment, functional neuroanatomy, pediatric clinical syndromes, childhood psychopathology, specialized

neuropsychological assessment techniques, research methodology in pediatric populations, developmental psychology, family systems, genetics, cultural diversity, ethical and legal issues in pediatric neuropsychological practice, consultation, and intervention strategies. See the Houston Conference Guidelines for further detail.

- B. Examination Administration.** Candidates may take the ABCN Pediatric Neuropsychology Written Examination in June 2015. It will be offered annually, at the AACN meeting. ABPP Central Office will notify eligible candidates about how to access and complete the online Subspecialty WE registration. Candidates will receive confirmation of their registration from the ABCN Executive Assistant along with instructions on how to proceed. Registration and submission of the examination fee must be completed prior to the deadline for the selected examination date.

The pediatric subspecialty WE may be taken no more than three times within a single candidacy window of three years. Candidates who do not pass the WE after three attempts, or prior to the end of their candidacy window, must re-apply and restart the process from the beginning, with associated fees.

- C. Examination Results.** Candidates may take the subspecialty written examination any time after being accepted to candidacy for the subspecialty. Specific procedures are as follows:
1. ABCN specialists will be notified of their score on the pediatric subspecialty written examination once it is processed and recorded.
 - a. If the subspecialty WE is passed, the candidate may proceed to the PS submission stage of the examination process.
 - b. If the subspecialty WE is not passed, the candidate may take the examination up to three times within the constraints of the candidacy window, with submission of appropriate fees.
 - c. Candidates who wish to re-initiate the application process may do so at any time following their third failed attempt taking the subspecialty Written Examination. In such cases, the original candidacy period is terminated and a new candidacy window commences from the date on which the candidate is notified that his/her credentials have been re-approved.

VI. PRACTICE SAMPLE

Once notified of passing the subspecialty Written Examination, the candidate will receive instructions on how to register for the submission of the subspecialty Practice Sample (PS). For specific information regarding the format, content, quality, and review of the PS, please refer to the [Pediatric Subspecialty Practice Sample Guidelines](#) on the ABPP website.

- A. Overview.** The Pediatric Clinical Neuropsychology PS consists of a single pediatric neuropsychological case evaluation of a patient age 16 or under

representing the candidate's original work, a test score summary sheet, copies of raw data, and a mandatory 3-page double spaced Supplement (see [below](#) for details). The case should demonstrate a breadth of clinical knowledge and assessment skill, and should demonstrate clearly that the candidate practices pediatric clinical neuropsychology independently at the subspecialist level of competence. The required additional 3-page double spaced Supplement provides the candidate an opportunity to elaborate on aspects of the case that are not included in the formal clinical report or test materials.

Candidates may choose to submit one of the two cases from their ABCN parent PS review for their subspecialty PS, or they may choose to submit a new case. When choosing a subspecialty case, candidates should keep in mind that decision-making rules for the ABCN parent PS and the subspecialty PS differ in important ways. Whereas the parent PS review is intended to determine whether the candidate's practice of clinical neuropsychology would be defensible at oral examination, the subspecialty review process is intended to determine if the PS itself demonstrates competent practice in the subspecialty. As such, candidates are encouraged to carefully attend to the information provided in the [Pediatric Subspecialty Practice Sample Guidelines](#).

Important: *In selecting a subspecialty PS case, candidates are strongly encouraged to choose a case from **the preceding two years** in order to highlight their current practice and skills. If for some reason this is not possible (e.g., supervised trainees on all cases over the past two years) please provide explanation in the Supplemental document.*

Supplemental Document. A supplemental document (maximum of three (3) pages double spaced, 12 pt type with at least 1" margins) is required. The purpose is to *summarize case specific information not addressed* in the report in order to allow the reviewers to evaluate the candidates' neuropsychological conceptualization. It is not meant to be an academic review of the literature; references are not expected. The supplement is meant to provide the opportunity for the candidate to ensure that the reviewer has all the information he/she needs to fairly review the PS, since there is no opportunity for clarification at an oral exam.

Candidates should review the 'criteria to be used by reviewers' (Section F in the document entitled *Guidelines for Practice Sample submission in Pediatric Clinical Neuropsychology*) and ensure that each criterion is either present in the report, addressed in the supplement, or explained why it does not apply to the case. Questions a reviewer may have about the PS or that might otherwise be asked at the orals should be addressed in the supplement (differential diagnostic thinking, for example).

Candidates may be asked to revise and resubmit any supplement that does not follow the requirements outlined above.

- B. Practice Sample Submission.** The subspecialty PS is submitted via the [ScholarOne portal](#) following Instructions provided upon accessing the portal website. Questions regarding the content of the Practice Sample or the process of uploading documents to the ScholarOne portal should be directed to Annunciata Porterfield (nunce@med.umich.edu) at the ABCN office. Candidates who experience difficulty at the time of uploading files should contact the ScholarOne Help Desk directly at 888-503-1050
- C. Review Decisions.** Once submitted, the subspecialty PS will be reviewed independently by two ABCN-certified subspecialists in pediatric clinical neuropsychology.
1. Subspecialty Practice Samples that are rated as "not acceptable" by both reviewers are returned to the candidate with comments about the sample's strengths and weaknesses, to assist in the submission of a new case.
 2. If the subspecialty Practice Sample is rated as "not acceptable" by one of the two reviewers, it is forwarded to the Practice Sample Committee for a third review. The judgment of the third reviewer to uphold or overturn the "not acceptable" decision will determine the final decision.
 3. If the first and/or second subspecialty Practice Sample submission is not accepted, a third Practice Sample will be accepted upon payment of the current PS fee.
 4. Candidates who do not pass the subspecialty PS review on their third attempt are not eligible to resubmit again within their current candidacy. In this instance a candidate would need to re-initiate the entire application process with appropriate fees if they wish to continue to pursue subspecialty certification.
 5. Candidates who wish to re-initiate the application process may do so at any time following their third failed attempt at the subspecialty PS. In such cases, the original candidacy period is terminated and a new candidacy window commences from the date on which the candidate is notified that his/her credentials have been re-approved.
 6. If two reviewers find the subspecialty PS "acceptable", the candidate qualifies for subspecialty certification.

VII. AWARDING CERTIFICATION IN THE SUBSPECIALTY OF PEDIATRIC CLINICAL NEUROPSYCHOLOGY

Certification in the subspecialty of pediatric clinical neuropsychology is awarded only after the candidate successfully completes the parent certification process and successfully completes all stages of subspecialty examination. The decision to award subspecialty certification is forwarded to ABPP Central Office and, upon final approval, an award notification letter is sent to the candidate from both ABPP and ABCN. Prior to that time, candidates may not use their candidacy or

their participation in the subspecialization process to advertise their competence. To avoid potential confusion to consumers, candidates may not present themselves as being “eligible” or “in process” of subspecialty certification. Infractions should be reported to the ABCN Executive Assistant and ABPP Central Office.

VIII. MAINTENANCE OF CERTIFICATION

Maintenance of Certification (MOC) involves a process of self-examination and documentation of the subspecialist’s professional development since the time of initial board certification or last MOC review. MOC requires subspecialists to survey their professional activities during the two years prior to their MOC submission date and report/describe the means by which they have maintained the functional and foundational competencies initially demonstrated at the time of their subspecialty board certification in Pediatric Clinical Neuropsychology.

The ABCN MOC criteria, submission materials, and review process are described in the [Specialty \(parent\) Candidate Manual](#) and the reader is referred to that document for detailed information. ABCN Subspecialists will complete a single MOC review for both specialty and subspecialty practice, documenting activities that maintain competence.. All professional development activities pertaining to the subspecialty will count towards MOC requirements for the specialty. ABCN MOC materials are designed to allow subspecialists to simply indicate which of their documented MOC activities were related directly to subspecialty competencies, thereby eliminating the need for extra or separate documentation.

A. MOC Participation. Specialists who are awarded subspecialty certification on or after January 1, 2015 will be required to participate in MOC regardless of the date that specialty (parent) board certification was obtained. Those who were awarded ABCN parent board certification prior to January 1, 2015 may choose to submit only those materials required for subspecialty MOC or they may opt in to the full (specialty + subspecialty) MOC process.

For those who choose to only participate in subspecialty MOC, the date of MOC submission will be tied to the date of initial subspecialty certification. Those who also opt in to the specialty (parent) MOC process will have their MOC submissions tied to the date of initial specialty (parent) board certification.

B. Subspecialty MOC Requirements. A minimum of 40 professional activity credits within the two years prior to the MOC submission date is required to meet general ABPP criteria for MOC. ABCN further requires that a minimum of 30 of the 40 credits be specific to the maintenance of competencies in clinical neuropsychology to pass specialty MOC criteria. Subspecialists will be required to accumulate a total of 20 credits in support of subspecialty competencies. All 20 of these credits will count

toward the 30 credits required for specialty MOC and the 40 credit total required for general MOC.

In completing the MOC narrative self-evaluation questions subspecialists should provide sufficient information regarding the subspecialty nature of their clinical practice and means of self-assessment.

XI. DISABILITY ACCOMMODATIONS

ABCN encourages qualified neuropsychologists with disabilities to enter the board certification process and will attempt to provide reasonable accommodations for applicants with verified disabilities consistent with the intent of the Americans with Disabilities Act (ADA).

Applicants who request accommodations because of disability must advise ABCN in writing and provide all documentation and supporting evidence at least 60 days before the written examination is conducted. In its sole discretion, ABCN will either grant or deny the request based on applicable guidelines. In some cases, applicants may be asked to assist the board in developing reasonable accommodations, as necessary.

For more detailed information on ADA accommodations, please review the ABCN [ADA information document and application for testing accommodations](#).

X. GUIDELINES FOR APPEALS

Candidates are entitled to submit a formal appeal of any of the following decisions:

- 1) Denial of meeting subspecialty specific qualifications (credentials review)
- 2) Procedural error at the written examination
- 3) Procedural error in review of the practice sample
- 4) Failure to pass subspecialty Maintenance of Certification review.

Appeals must be filed within 30 days of receipt of written notice of one of the aforementioned appealable decisions. The candidate must specify a substantive basis for the appeal, numbered and explained as to why there was a perceived violation of ABPP/ABCN procedures.

A. Credential Review Appeals. Appeals related to subspecialty-specific requirements for candidacy should be sent to the ABCN Office, which will forward the appeal to the Chairs of the Subspecialty Credentials Review subcommittee and the ABCN Appeals Committee. If further action is required

to seek resolution, the matter may be reviewed by the ABPP Executive Officer and/or ABPP Standards Committee, whose decision shall be final.

B. Written Examination Appeals. Failure on the subspecialty written examination is not itself an appealable decision. However, if a procedural error occurs at the time of examination, a candidate may request information from the ABCN Examinations Chair, President, or Administrative Executive on how to seek a remedy.

C. Practice Sample Appeals. A decision to “not accept” the subspecialty Practice Sample may be appealed under the specific circumstances described below. If a candidate believes there are acceptable grounds to file an appeal, an appeal letter should be addressed to the ABCN President and submitted to the ABCN Office. The ABCN President shall notify the Examinations Chair and refer the appeal to the subspecialty Practice Sample Committee and ABCN Appeals Committee. A review will be completed and decision rendered within 60 days after receipt of the request for appeal.

1. Acceptable grounds for appeal of PS Decision:

- a. Failure on the part of ABCN to comply with stated [procedures for subspecialty Practice Sample review](#).
- b. Review does not pertain to the case submitted.
- c. Processing errors due to technical malfunction of the ScholarOne submission platform.

2. Unacceptable grounds for appeal of PS Decision:

- a. Disagreement by the Candidate with the PS reviewers’ judgment.
- b. Testimony of performance or achievement in professional work not submitted as part of the PS.
- c. Lack of unanimity in the PS review team decision.
- d. Perceived absence of match between the theoretical orientation of the Candidate and a PS reviewer.

D. Maintenance of Certification Appeals. The decision to not award MOC may be appealed under specific circumstances as described below. If a candidate believes there are acceptable grounds to file an appeal, a letter should be addressed to the ABCN President and submitted to the [ABCN Office](#). The ABCN President shall notify the ABCN Appeals Committee Chair, who designates two committee members to assist in the Appeal review.

1. **Acceptable grounds for appeal of MOC Decision:**

- a. Failure on the part of ABCN to comply with stated procedures for MOC.
- b. MOC Review does not pertain to the materials submitted by the Specialist.

2. **Unacceptable grounds for appeal of MOC Decision:**

- a. Disagreement with the MOC Reviewers’ judgment.

- b. Testimony of performance or achievement in professional work not submitted as part of the MOC materials.
- c. Lack of unanimity in the MOC review decision.
- d. Perceived absence of match between the theoretical orientation of the Candidate and a MOC reviewer.

E. Score and Conduct of Appeal. The procedural issues addressed during appeal shall be limited to those stated in the appeal request letter and which meet the requirement of an appealable procedural issue. If legal issues appear to be involved, ABPP legal counsel may be consulted.

The review process is based primarily upon information before the subspecialty and parent oversight committees at the time of the original decision. The committee reviewing appeals may, however, seek further information from ABCN Board members, subspecialty committee and subcommittee members, the candidate, or others as appropriate to the issues being raised. The process is not a *de novo* review, but a review of the challenge to the Subspecialty Board decision.

An appeal decision must be rendered within 60 days of the Pediatric Clinical Neuropsychology Subspecialty Board's receipt of the appeal letter. Failure to complete the review in the 60-day period shall move the appeal to the ABPP Board of Trustees for resolution.

F. Decision and Report of the Appeals Committee. If the Candidate demonstrates by clear and convincing evidence that there was a procedural error that harmed the Candidate in a material way, the Committee shall provide a remedy. The remedy for denial of eligibility will be to advance the applicant to candidacy. The remedy for procedural errors at the practice sample stage will ordinarily be to void a practice sample review, and offer a new practice sample review with no additional fee assessed to the Candidate. Alternatively, the matter may be referred back to the Examination Chair for consideration of other remedies. The Appeals Committee may not, however, overturn a prior decision and "pass" a Candidate.

The committee reviewing the appeal shall address and render a decision on each issue raised by the Candidate and explain the basis for that decision. The ABCN President shall forward the decision to the ABPP Executive Officer, who will review, consult, and edit as necessary before providing feedback to the Candidate under the Executive Officer's signature on the ABPP stationary.

XI. GENERAL COMMENTS

It is the candidate's responsibility to accomplish all tasks required for ABCN Pediatric Clinical Neuropsychology subspecialty certification within the three-year time limit. The applicant or candidate must pay all fees required during the certification process, including those required if steps in the process are repeated.

Candidates who fail to obtain ABPP Pediatric Clinical Neuropsychology subspecialty certification through the procedures specified herein may re-initiate the process without prejudice by re-submitting their updated credentials for review. An applicant should understand that whenever a new application is initiated all previous actions will be regarded as if having never happened and no comparisons will be made between current and past procedures or actions. All candidates will be required to engage in the examination procedures that are current at the time of their re-application and which will incorporate any changes that have taken place since any prior application.

Exceptions to these procedures may only be granted by a majority vote of the ABCN Board of Directors.

XII. CONTACT INFORMATION

For questions regarding the review of generic credentials (doctoral and internship training programs), fee structure/payments, or early entry student option, please contact ABPP Central Office:

ABPP Central Office:
600 Market Street, Suite 300
Chapel Hill, NC 27516
Phone: (919)537-8031
Fax: (919) 537-8034
office@abpp.org

For questions regarding specialty specific credential requirements (neuropsychology didactics, postdoctoral training, ABCN specialty-specific online application), the ABCN Written Examination, submission of Practice Samples, Oral Examination, appeals processes, or administrative issues related to ABCN, please contact :

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