

ROBERT SHERRILL, JR., Ph.D.

PRESCRIBING PSYCHOLOGIST
NEUROPSYCHOLOGICAL ASSESSMENT

Hon. Deb Matthews, MPP
Ministry of Health and Long-Term Care
10th Floor, Hepburn Block
80 Grosvenor Street
Toronto, Ontario M7A 2C4

Dear Ms. Matthews:

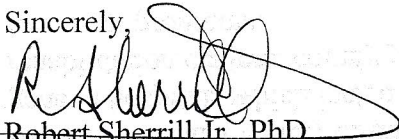
I have been asked by Dr. Marie Greenspan to describe to you our state's experience with prescribing psychologists, who have been licensed in New Mexico since 2005. I have been the chair of the state Board of Psychologist Examiners since November 2006.

When the New Mexico Legislature was considering the bill to permit psychologists to qualify for prescribing privileges, opponents made grim predictions of harm to the public. One legislator, a physician, was quoted as saying, "patients will die". This has not occurred. Over the past six years there have been no complaints at all to the Board of Psychologist Examiners of patients having been harmed by prescribing psychologists. None.

Prescribing psychologists have improved access to the full range of mental health care in New Mexico in a variety of underserved locations and settings. These include: small general hospitals which lack a staff psychiatrist; the state psychiatric hospital; rehabilitation centers; county jails; small mental health clinics; and substance-abuse treatment programs.

Because Ontario's population is dispersed over a very wide geographic area, like New Mexico's, prescribing psychologists can be especially valuable in providing services to persons with chronic, serious mental illnesses who otherwise would have to travel long distances to receive appropriate specialized care. For example, I work in a small city on the edge of the vast Navajo reservation. When I consulted at our county jail, I frequently saw Native Americans with schizophrenia or bipolar disorder who had "fallen through the cracks" because of the long distances they needed to travel in order to see a provider. I also saw many other persons who had difficulty gaining access to treatment (it takes about two months for an initial appointment with a psychiatrist here), who were arrested in the meantime for offenses related to their dual diagnoses of substance abuse and serious emotional disorder. With stabilization of their condition, they could be referred to a substance abuse program or Treatment Court, rather than remaining in jail, or being sent to prison.

Sincerely,



Robert Sherrill Jr., PhD