

**From:** [Sunset Advisory Commission](#)  
**To:** [Janet Wood](#)  
**Subject:** FW: 12/8 hearing - One psychologist's plea  
**Date:** Monday, December 05, 2016 3:21:54 PM

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**From:** Jeannette Gordon Reinoso [mailto:jreinoso@momentousinstitute.org]  
**Sent:** Monday, December 05, 2016 3:13 PM  
**To:** Sunset Advisory Commission  
**Subject:** 12/8 hearing - One psychologist's plea

Dear Senate and House members of the Sunset Commission:

As a bilingual counseling psychologist who works at a non-profit community health agency, providing therapy services to inner-city youth and families as well as providing training and supervision to psychologists-in-training, I will be directly impacted by decisions you make at the 12/8 hearing. I am grateful for your taking time to read and consider my perspective and requests.

**I strongly believe that Texas should continue to require (1 full-time or 2 part-time) supervised post-doctoral training year/s prior to licensure.** I cannot overemphasize the value of my post-doctoral experience. As I engaged in providing family therapy and treating individuals with concerns new to me, I was able to get the much needed supervision and weekly trainings which rounded me out, develop my areas of specialty, increase my skill and confidence in providing supervision, and develop better clinical judgment and application of ethical decision-making. Each year, our center trains, supervises, and mentors three doctoral interns and one post-doctoral fellow. I am intimately involved in: the in-depth conversations we have about our trainees and their development; their supervision; and their evaluations. In spite of the tremendous growth we see in our interns over the course of each year, few are ready to embark on independent practice. Our post-doctoral fellow engages in unique higher-level processes, including a co-supervisory role of interns, involvement in the doctoral intern selection process, and further development of their professional identity which facilitates their transition and level of skill in future jobs.

**I also support the continued requirement of passing the oral exam prior to licensure.** In fact, I see greater applicability of this exam to the type of work my psychologist colleagues and I do than the EPPP – as we are engaged daily in providing therapy face to face with our clients, responding to client crises, and ensuring that we and our trainees respond legally and ethically. An oral exam forces future psychologists to think through and prepare for a variety of plausible situations, presenting issues, client dynamics, and ethical/legal dilemmas in a clear and concise way. It is also a gauge as to how well one may interact with his/her clients. We are able to perform in the way we most desire when we practice responding in the ways we prefer and/or are faced with a real-life crisis that requires us to think through how to best act. Preparing for an oral exam requires future psychologists to develop a way of thinking that prioritizes client safety and adherence to laws and ethics, increases consideration of such factors as diversity, and forces one to provide a clear rationale for how s/he will respond to clients and their presenting issues and diverse dilemmas. I believe that I am a better psychologist and a better supervisor as a result of preparing for the oral exam.

While I agree that a new definition of “psychology” may be merited, **I am greatly concerned that a new definition of "psychology" may have unintended, negative consequences and ask that you work closely with TPA and TSBEP in creating a new definition, which includes psychologists’ rights to diagnose.** Psychologists receive extensive training in diagnosis and usage of the DSM-5, which qualifies them to determine whether therapy and assessment clients meet criteria for any diagnoses and provide related therapeutic interventions. I have facilitated hospitalization of clients and had psychiatrists ask for my diagnosis to inform their prescription of medication. Even the federal government recognizes that psychologists diagnose, as reflected in Medicare’s definition of “psychologists”, which includes the word “diagnose”. Furthermore, our practice and title acts PROTECT THE PUBLIC and allow for prosecution of unlicensed practice of psychology. Our clients will be done a gross disservice if any of this were to change.

Lastly, **I desire that TSBEP be kept independent from other agencies and retain its own staff.** I have personally benefited from consultation with the Board, given that psychology is a specialized, doctoral-level profession with unique situations that arise. If TSBEP remains an independent agency, other behavioral health professionals who are seeking licensure could be housed within TSBEP and receive administrative support from the TSBEP staff. If this does not happen, I am concerned that we may not have adequate staff to support our profession, which will have ripple-down effects to the public.

I humbly thank you for your time and consideration of my perspective and my opinions.

Very Sincerely,  
Jeannette E. Gordon Reinoso, Ph.D.  
Licensed Psychologist