



Forensicare

**Improving the Quality, Utility and Expertise of Psychological
and Psychiatric Court Reports**

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ANZAPPL Congress 2024

About Forensicare's Court Report Service

Forensicare is Victoria's leading provider of forensic mental health care. We work to meet the needs of consumers with serious mental illnesses across the justice system, mental health sectors and the community.

Hospital

Prison

CFMHS

About Forensicare's Court Report Service

Pre-Sentence

- Reports under S8B Sentencing Act (1991)
- Magistrates, County & Supreme Courts

CMIA

- Fitness to Stand Trial
- Crimes (MI) Defence
CSO/NCSO (S41)

Adult Parole Board

- Pre-release considerations
- risk & mental health needs

About Forensicare's Court Report Service

Psychiatry

- 34.8 EFT (n=55; For = 35)
- CRU 1.7 EFT (n=4)
- CMIA Roster (all)

Forensic Competencies

Psychology

- 64.4 EFT (n=84; For = 32)
- CRU (1.2 EFT) + PBP
- CMIA Roster (n=10)

Role of FMH Expert Reports to the Court

Forensic Mental Health Assessment (FMHA): “an evaluation that is performed by mental health professionals as part of the legal decision-making process, for the purpose of assisting the decision-maker...” (Heilbrun, 2001)

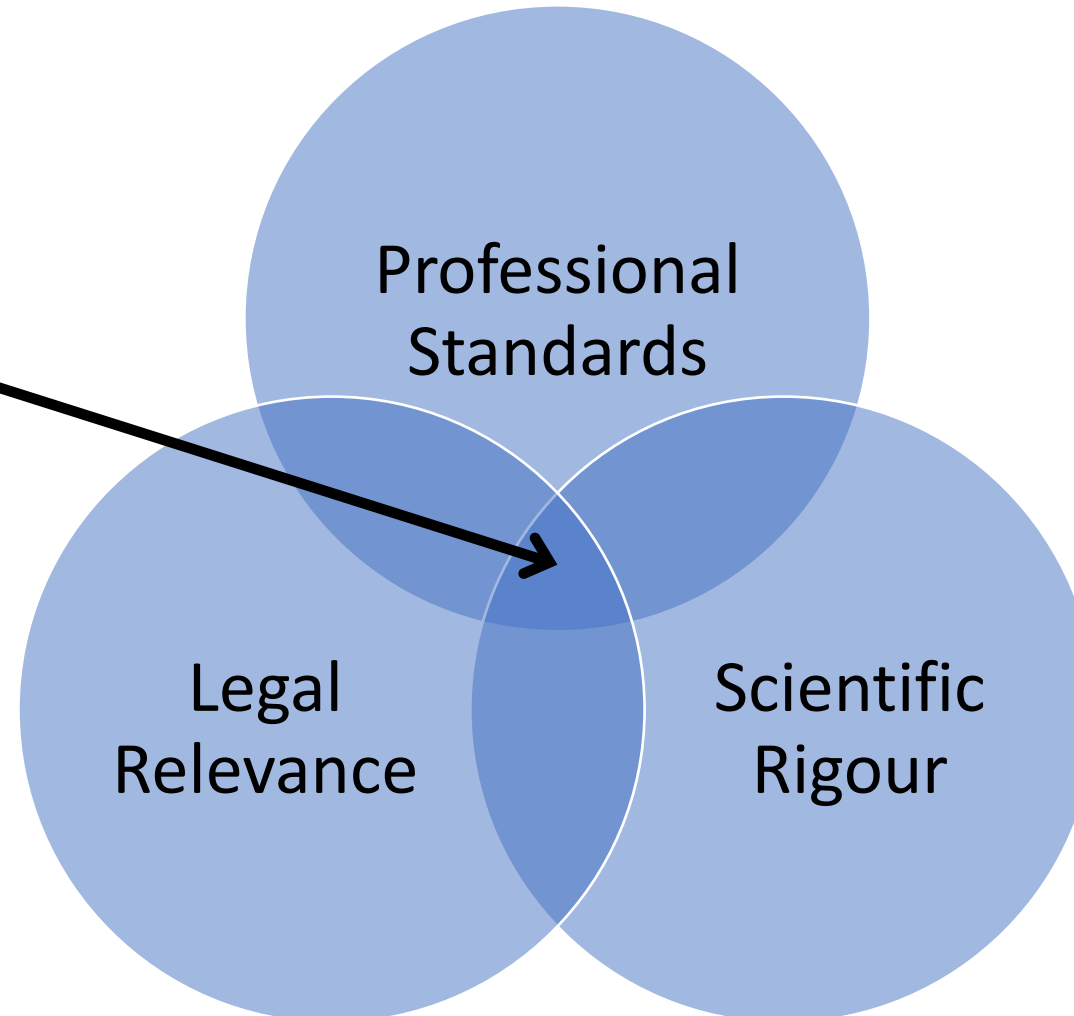
Purpose:

- “to **apply psychological/psychiatric knowledge** and understanding to address a legal question” (Zwartz, 2018).
- to ‘**assist legal decision-makers in decisions** about the application of laws requiring consideration of the individuals’ mental conditions, abilities, and behaviours’ (Heilbrun et al., 2009).
- bridge the gap between the clinical assessment and in-court testimony (Wettstein, 2010).

But what makes a helpful report?

What makes a Good Expert Report?

Expertise



**APS Forensic College
RANZCP
Local Practice Notes**

Melton et al, 2007
Shuman & Zervopoulos, 2010
White et al, 2007

What makes a Good Expert Report?

- Reflects high quality clinical assessment
- Documents adherence to legal and ethical protocols
- Focuses on the relevant legal questions and criteria
- (Psychological testing limited in scope to functional abilities related to the legal enquiry)
- Describes the factual and clinical basis of opinions
- Clear language and format that is comprehensible to non-clinicians
- Uses third-party information (not just evaluatee self-report)
- Unbiased, objective, non-partisan

E.g. Melton et al., 2007; 2018; Nicholson & Norwood; 2000 Gianvanni & Sharman (2017).

What Guidance Exists?

Bycroft et al (2019)

Goodman-Delahunty & Dhami (2013)

Type	Example	Focus	Limits
Ethical Guidelines & Codes of Conduct	APS Code & Forensic Guidelines RANZCP Professional Practice Guideline 11	Ethical conduct, psychologists only Ethical conduct, psychiatrists only Legal obligations	Assessment Methodology/Scope Report Writing Skill
Localised Legal Rules	Legislation: e.g. Sentencing Act, Crimes (Mental Impairment) Act	Set out scope of expert evidence for relevant proceeding	No clinical guidance/methods
	Rules of evidence Practice Directions/Notes Expert Witness Code of Conduct	Boundaries of clinical opinion Relevance Legal obligations	Varied scope/detail No clinical methodology
Best Practice Literature	Textbooks/Best practice Guides: E.g. Heilbrun et al 2009, Melton et al 2018 White, Day & Hackett (2007)	Broad forensic assessment principles, procedure, standards Australian, report structure/style	Focus on US law Too broad – lack clinical detail Not forensic skills focused
	Guidelines E.g. AAPL Manuals (e.g. SPJ tools, FST tools)	Often specific focus Include helpful legal background	Too narrow, not comprehensive Not localised – usually US
Empirical Research	Quality/compliance evaluations Opinion surveys	Useful local data, identified gaps in training/knowledge/skill	Rare, localised, data limitations Opinions subject to bias Often limited recommendations

Studies of Quality

Summary:

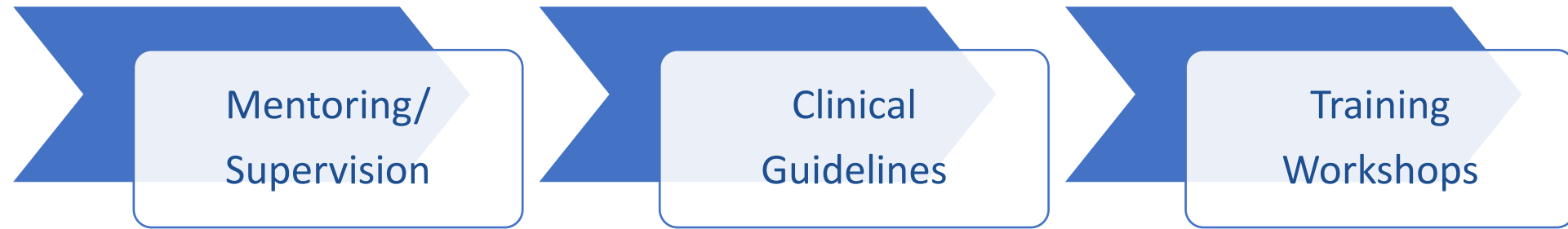
Report Content/Style	Forensic Practice/Skill
Documenting ethical responsibilities	Partiality, bias & advocacy
Poorly detailed - factual basis of opinion	Inappropriate use and scoring errors of tests
Reliance on single-source data (self-report)	Not reporting limitations of findings & opinions
Use of Jargon/poor explanation	Exaggerating expertise/qualifications
Addressing ultimate issue	Forensic training, scope of practice

(Doyle et al 2011; Freckelton et al., 2001; Genis 2008; Haas, 1993; LaFortune & Nicholson, 1995; Large et al., 2009; Leslie, Young, Valentine, & Gudjonsson, 2007; Nicholson & Norwood, 2000; Packer, 2008; Robinson & Acklin, 2010; Skeem and Golding, 1998; Vredeveldt et al 2024; Yuille, 1989)

The Problem:

How can Forensicare ensure psychiatric and psychological staff are trained and experienced in providing expert reports in line with EBP?

“One of the difficulties for psychologists has been that the **demand** for [expert witness] services has at times **outstripped** the **capacity** of the field **to train practitioners** to provide these services in a competent and ethical manner.”
– Packer, 2008, p245.



STEP 1: The 'Mentoring' Model

PHASE 1
Introductory
Training

PHASE 2
Observation
and
Supervision

PHASE 3
Ongoing
Supervision

Advanced
Reports, CMIA



STEP 2: Developing Court Report 'Guidelines'

Collation of existing resources

Drawing from published literature on BP principles

Consultation with local experts at Forensicare and CFBS:

- ✓ Seasoned psychiatrists and psychologists considered experts in the field
- ✓ Senior clinical and leadership roles (Clinical Director, Executive Director, Director of Psychological Services)
- ✓ Senior research roles (e.g. Professor, Adjunct Professor)
- ✓ Input from Legal and Health Information teams

Consultation with judiciary (Magistrate, Judge, APB full-time member) and OPP

The Handbook: 8 Chapters

1. Overview
2. Training, Mentoring, and Quality Assurance Procedures
3. Administrative, Legal, & Health Information Matters
4. Pre-Sentence and APB Reports
5. Assessing Fitness to Stand Trial
6. Assessing Mental Impairment Defence
7. Section 40/41 Reports
8. Giving Evidence in Court
9. Resource Folder

STEP 3: 2-Day Training Workshop

Series of lectures by the “experts”

- Legal and Health Information
- Clinical advice: Addressing Verdins, Fitness, Mental Impairment, Forensic Case Formulation, Court Testimony
- Guest Lectures: Views of the Magistrate, Judge, Parole Board and Prosecution
- Live panel discussion

Consistent with advice from the Handbook: enlivened
Live Broadcast (2022) and recorded for ongoing use

Other CR Training & QI Initiatives

Specialised
CPD Events

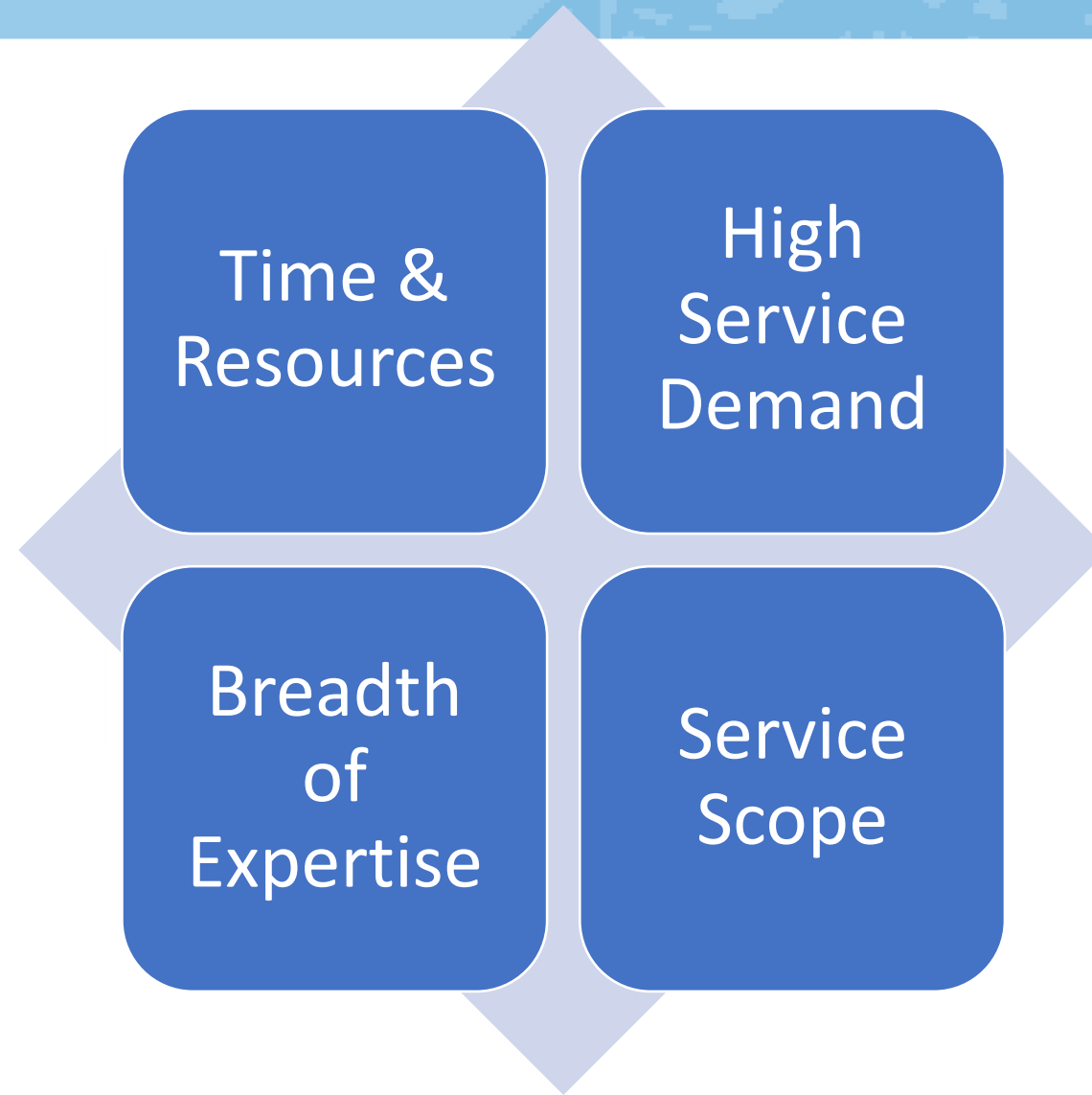
Scope of
Practice

Peer
Reviews

Internal
Audits

Stakeholder
Liaison

Challenges



Where to from Here? Evaluation & QA



➤ Survey/feedback of training and mentoring



➤ Post-training knowledge assessment (FITS test)



➤ Renewed training and specialised CPD needs



➤ Research Projects and Audits



➤ Ramping up' mentoring

Summary and Conclusions

- **Limited comprehensive clinical guidance exists for supporting psychiatrists and psychologists in Australia to conduct FMHA**
- **Research has consistently shown limitations in quality of assessments and reports provided to the courts. Commentators recommend a combined approach to upskilling inexperienced clinicians.**
- **Forensicare has successfully implemented a comprehensive approach to training and quality enhancement, incorporating:**
 - A comprehensive “Handbook” of clinical guidance, legal and administrative procedures
 - Training workshop plus observation/mentoring model
 - Ongoing Supervision & Peer Review, Stakeholder Consultation
- **Pending formal evaluation, anecdotal feedback has been positive**
- **Remains an area of ongoing development and dedication toward QE**

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THANK YOU

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