

# FORENSIC PSYCHIATRIC ASSESSMENTS

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# OUTLINE



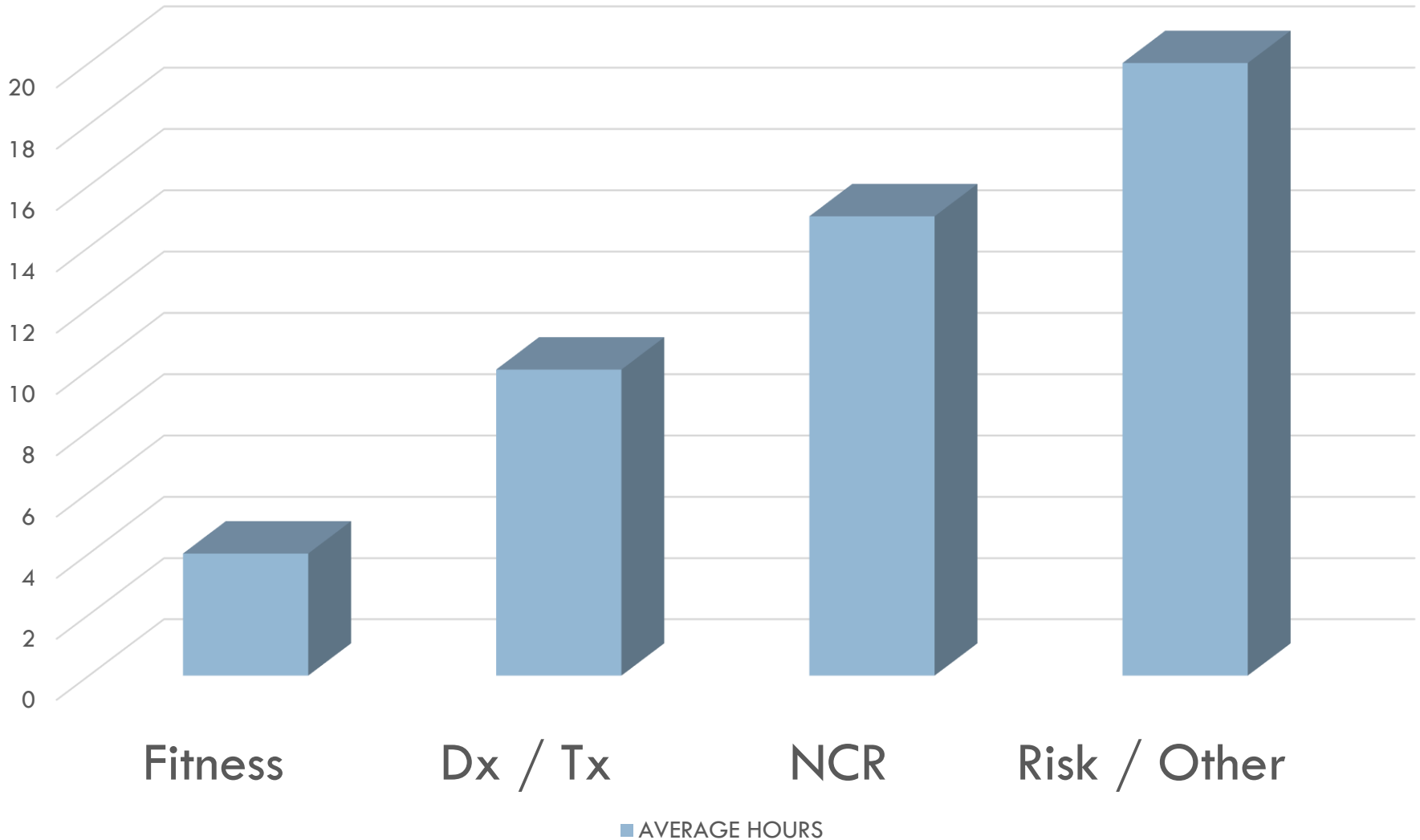
1. Types of Assessments
2. Assessment Process
3. How to get an assessment
4. Questions

# Types of Assessments

1. Typically forensic psychiatrists are conducting third-party assessments. Various names in our profession... IME/IPE/IPA/IMA.
2. Third party = person or organization OTHER than the physician and patient
3. OHIP won't pay for these assessments as they are not "medically necessary"

# Types of Assessments

AVERAGE HOURS



# Types of Assessments

- DO / LTO
- File review
- Second opinions (usually easiest / fastest way to get a preliminary opinion as interview with client not necessary)
- Help with critiquing another report / preparing for cross-examination

# Types of Assessments

- You may wish to retain a forensic psychiatrist to answer any number of questions...
  - ▣ Is this person fit to stand trial? Why am I not able to get instructions from my client?
  - ▣ They seem weird/off... What's wrong with them? Do they need treatment?
  - ▣ Are they dangerous or at risk of re-offending?
    - (violent re-offence, sexual re-offence, general recidivism)
  - ▣ Why would they commit this type of offence?
  - ▣ Do they possibly have a defence available to them? (NCR, automatism, battered spouse, negate specific intent)

# Types of Assessments

- Our job is to assist the trier of fact, and we are to be independent... Accordingly, we can't perform a true IME on a patient that we are treating or where there's another conflict of interest
- Treating docs must provide summary report on request and if fee paid (so says CPSO)
- Forensic psychologists available too... Essential for examining intellectual abilities and malingering and other issues

# Assessment Process

- Typically we “book” a client once formally retained / order issued
- Retainer letter will set out funds authorized, hourly rate, extent of work, questions to be answered
- If Court ordered, this can be by means of Form 48, *Mental Health Act* Forms (Form 6, etc.). Typically court or Crown pays for these assessments



# Assessment Process

- Funds held in trust by lawyer
- Report is privileged if defence-retained
- Defence and psychiatrist can arrange for inpatient admission too, for serious offences / prolonged assessment
  
- So how do you get going on this process??
  - ▣ Email psychiatrists you may know and ask
  - ▣ Forensic Psycholegal Clinic at CAMH
  - ▣ LAO
  - ▣ Ask colleagues / listservs
  - ▣ Ask Crowns

# Assessment Process

- What should you ask the psychiatrist before retaining him/her?
  - Fees
  - Timeline
  - CV / qualifications (forensic psychiatrist a designation now, for example)
  - Area of expertise

# Assessment Process

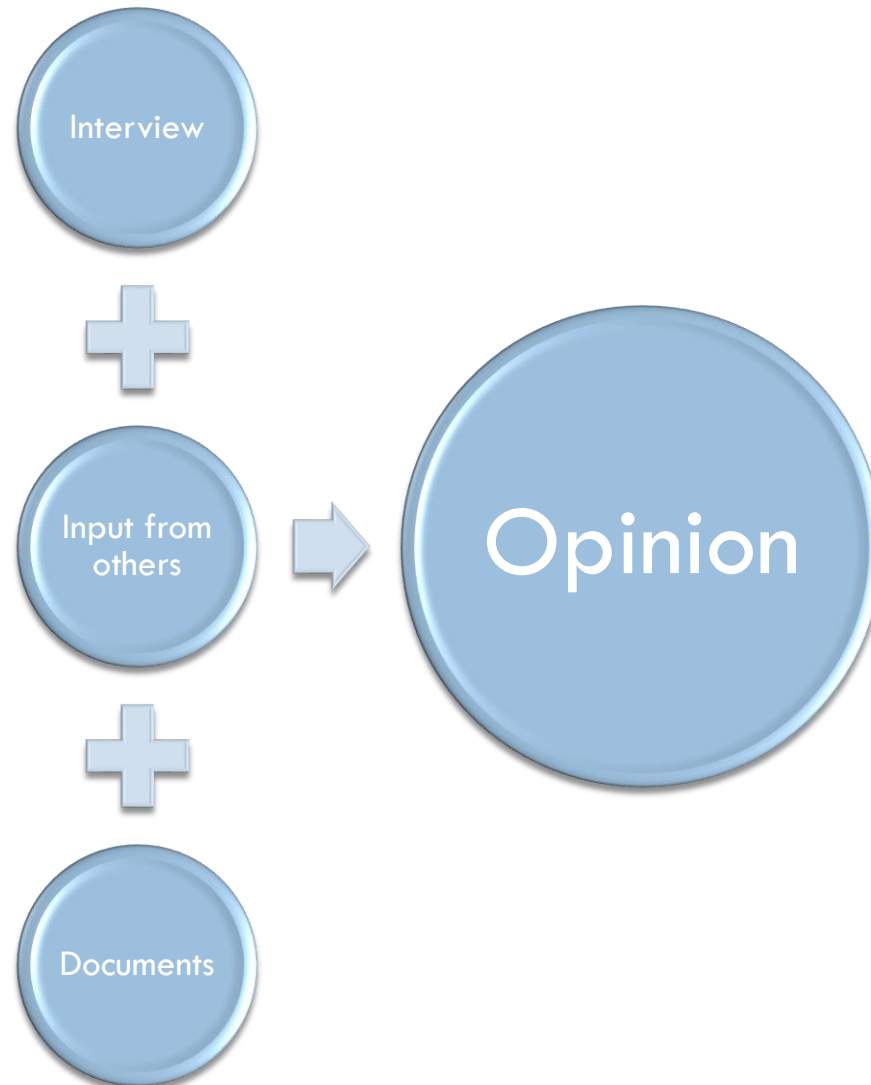
- What will we do?
  - Interview of 2 – 8 hours, sometimes on one day, sometimes multiple days
    - (vs. general psychiatric interview, 50 mins on average)
  - Review disclosure
  - Review criminal record (may need details re: priors, for certain assessments)
  - Consider other tests or consults (phallometrics, urine testing, bloodwork, medical imaging, sleep study)
  - Retrieve medical records and review
  - Talk to family / friends / employers
  - Formulate our opinion
  - Prepare report

# Information We Gather

- Childhood and developmental hx (including asking about personality attributes)
- Educational hx
- Occupational hx
- Relationship history
- Psychiatric hx, Fam Psych hx, Med hx
- Substance Use Hx
- Legal hx
- Detailed functional inquiry

**VERIFY  
EVERYTHING  
VIA  
COLLATERAL**

# Formulation Process



# Timeline

- Earlier contact is always best!
- Most of us book 1 – 3 months out for interviews
- Some don't travel to custodial facilities
- Some don't take Legal Aid
- May need at CAMH only services (like phallometric testing) and that can add time
- Reports typically take 2 months (CPSO Guidelines)
  - ▣ EXCEPT fitness assessments (can often be done in 20 mins plus brief report prep)
- We almost always won't assume treating physician role post-assessment (could lead to bias)

# Other Tips

- Avoid long fitness assessments in most cases
- I encourage you to send all the disclosure to the psychiatrist even if much seems irrelevant.
- May be helpful for you to gather health records / OHIP PCH
- Don't be afraid to ask follow-up questions... So if he is NCR, what does that mean? I don't understand this part of the report? Our job is to educate
- We should talk to any party after report prepared, not just the retaining party

# Questions? Comments?

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