

# The desirable characteristics of a forensic psychiatric report

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Forensic psychiatrists are usually members of the Royal Australian and New Zealand College Of Psychiatrists, members of the Forensic Section of that college and belong to other organisations such as the American Academy of Psychiatry and Law or the Australian and New Zealand Association Of Psychiatry, Psychology and Law.

Professor Philip Resnick from the University of Cleveland, Ohio notes that: *"The purpose of the legal report is to furnish data to help in the legal disposition of a dispute. This differs substantially from the standard psychiatric-medical report, which serves the purpose of therapeutic goals"*.

This raises an important preliminary point. The report of a treating psychiatrist is often of value in assessing suitability of treatment, the subject's response to and compliance with that treatment. It is of limited value in the realm of diagnosis and causation. Frequently, the treating psychiatrist does not have access to important collateral information and others' evaluations of the patient, such as other physicians or family members. This is probably one of the most important sources of discordance between psychiatric experts.

A good forensic report should use empirically validated assessment methods, where possible, but it is not uncommon for the use of such instruments to vary widely between psychiatrists. Indeed, in some cases such instruments do not exist.

For example, Gayre Christie, (criminologist and psychologist) and I wrote a paper which was presented to the 1996 conference of the Australian and New Zealand Association of Psychiatry, Psychology and Law. Lawyers and psychiatrists were questioned regarding the existence of 'valid and reliable scientific tests' to determine mental illness, in that case in defendants following acts of dis-

sociative violence. Of the lawyers, only 33% disagreed or strongly agreed that such tests existed. In contrast, over 75% of psychiatrists disagreed that such tests existed. In contrast to the notion of transportable tests available to both the treating psychiatrist and the independent forensic examiner, this highlights the importance of availability of extrinsic data and observations to the reliability and validity of psychiatric opinion. In many cases, the validity of the opinions received (and hence their likelihood of withstanding effective cross-examination) can be enhanced by the provision of *all* data available at the time of the referral.

A desirable forensic psychiatric report should disclose:

- any prior contact with the evaluatee or the evaluatees' family
- identifying data
- sources of information
- history of presenting complaint
- past personal and family psychiatric history
- medications and past medical history
- substance use history
- criminal and personal history
- mental state
- opinion of presenting problems
- answers to lawyers' questions

Reports should demonstrate clarity, simplicity, brevity and humanity; use headings and sub-headings for ease of reading; summarise data in the report and in any information sources relied upon; clearly separate fact from opinion; provide a diagnosis which makes specific reference to a recognised diagnostic system; contain explicit

reasoning for the psychiatrist's opinion; if the case is not clear, provide reasons for and against the opinion; specify its limitations, including limited or inadequate examination time or setting or limited source material.

I also hold strong views on the nature of expertise and the apparent problems of bias and the adversarial system<sup>1</sup>. It is worthwhile restating that you should ensure that you actually do have an expert opinion and pay attention to such rules of evidence as the 'common knowledge rule' and the 'basis' rule. It should be recalled that opinions are not fact and that disagreement may exist between equally well-informed practitioners.

<sup>1</sup> Alcorn, DA (1996) Independent Expert Evidence in Civil Litigation, *Queensland Lawyer* 16:4, p121.1



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