



## A Day in the Life of a Consultant Forensic Psychiatrist/Professor of Medical Jurisprudence by Prof Keith Rix, Hon FFLM

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### Exercise and Current Affairs

My day usually begins with an hour on my exercise bike reading the newspaper. I need the exercise to remain healthy enough to continue as an expert for as long as my intellectual faculties last.

I no more want to be accused of being out of touch with 'real life' than judges do and although there is more to real life than current affairs, it helps to keep up to date with the

context in which my expert evidence is given, not least to be aware of public attitudes towards crime and experts (remember what Michael Gove said about experts?) and the criticisms of our justice system.

### No More Pub Lunches

Unless it is a report on papers, I am likely to spend nearly two hours consulting with the defendant or complainant in a criminal case or a claimant in a personal injury case. I no longer have a consulting room and some of my assessments are now done remotely over a video link. I miss discovering a quaint country pub on my way back from a distant prison but I do not miss the stark rooms in 'legal visits' where nowadays medical assessments have to take place.

I begin by getting a full history from the subject, which includes their family history, birth, childhood and development, education, employment, relationships, leisure pursuits, alcohol and substance use and personality as well as their medical history. How much of it is going to be relevant to the issues I have to address may not be clear to me until I prepare the report. It can be a harrowing experience especially for example in a 'nervous shock' or 'secondary victim' case when I have to ask a claimant to describe the last minutes and seconds of a loved one's life or when taking a history from an accused person charged with the sexual abuse of infants the same age as my grandchildren.

Then, although psychiatrists can and do conduct physical examinations, as a psychiatrist I apply the skill which others do not have; I examine the subject's mental state.

The history I have obtained is subjective so it may or may not be reliable and I will have to assist the court as to the subject's clinical plausibility. But my examination of the mental state is objective and, when supporting a diagnosis, the objective can carry more weight than the subjective.

This I noted from the reactions of a jury to my description of an accused's hypervigilance and increased startle response. In the course of a consultation in which she sat with her back to a glass door that opened onto a corridor down which people walked backwards and forwards I noted her hypervigilance. She visibly jumped with an exaggerated

startle response when the electronic fob I used to unlock the door into the public area of her solicitor's offices made the door jolt noisily. My diagnosis of post-traumatic stress disorder was not challenged.

### Forensic Fulfilment

At some time during the day I may sit down at the computer and work on a report. My work station looks out on a meadow and with the tranquillity of rural life and some jazz playing in the background I am in the right frame of mind to start to turn the notes of my consultation, already typed into a report template, into a report.

But more exciting is a coronial or psychiatric negligence case where, having set out the substance of my instructions and the issues in the report template, I then start to construct my chronology of the case going page by page through numerous electronic files of medical records and haphazardly scanned documents. Until I have incorporated facts from the last page, I will not be in a position to start my analysis of the case identifying what, if anything, went wrong and at whose hands.

In another life I would have been a spook or sleuth and if you paraphrase this quotation from a *London Review of Books* review of Jefferson Morley's *The Ghost: The Secret Life of CIA Spymaster James Jesus Angleton*, you will appreciate the attraction for me of negligence cases: 'A chronology is one of the basic tools of intelligence analysis, a listing of facts [...] in chronological order. A serial is basically a file containing every bit of information on a given subject in the order it was received. Rigour is achieved in two ways: there is no scanting of detail and no quarrelling with the evidence. If the report says X showed up in place Y on day Z, in it goes, even if you know subject X had been buried in a distant city a month before. That report, as given, means something and you can never know what, for sure, until the end of time, if then.'

### The Retirement Deception

As I am supposedly semi-retired (which my wife disputes), I'm not working on reports every day as I used to do. I have always wanted to share lessons I have learned as an expert so I may spend some time working on a paper or a book chapter, reading judgments in order to distil the lessons for expert witnesses, or setting aside material for the third edition of what is now *Rix's Expert Psychiatric Evidence* and which is now on an edited and multi-author basis. With a medically qualified barrister, I am editing *Expert Musculoskeletal and Orthopaedic Evidence* and making plans for a volume on expert evidence in the Family Court and Court of Protection.

And then there's organising The Annual Grange Conference which started in 2001 as an inhouse CPD event for psychiatrists and psychologists doing medicolegal work and is now the leading medicolegal conference for mental health professionals.

Last but not least there will be emails from the Faculty and pieces of work, some large, some small, arising out of my role as the Faculty's Expert Witness Lead (previously I was also the Faculty's Mental Health and Intellectual Disability Lead).



## Having My Day In Court

Every now and again I get to dress like a proper doctor, or how they used to dress before the requirement for 'scrubs' or 'shirt sleeves', because I am going to court.

I get great satisfaction out of explaining my subject to the ordinary men and women on the jury. The prospect of cross-examination always fills me with apprehension and sometimes an appropriate and helpful level of anxiety.

I always try hard to write my cross-examination into my opinion, which 'the range of opinion' requirement encourages, but the clever solicitor or barrister will usually come up with something I have not anticipated. With luck I will get to discuss some aspect of psychiatry with a judge I first encountered when he or she was newly called to the Bar and I was a newly appointed consultant. But the ultimate satisfaction is going home in the belief that I have contributed to the delivery of justice.

## And So To Bed?

It's not 'all work and no play' but I am a night owl who likes to work late and after switching off the PC I may not have been in bed long when the phone rings and I've a psychiatric emergency to attend.

I've always enjoyed working at the coalface so whether it's someone with dementia who has run off from their care home, a suicidal person detained by the police under section 136 of the Mental Health Act or someone with delirium tremens causing havoc in a surgical ward, I am in my element. It's a good way of keeping my hand in and it exposes me to a cross-section of psychiatry from adolescence to old age.

Then when counsel asks, 'And when did you last see a case like this in your clinical practice', I can answer, 'At 3 a.m. this morning, My Lord'.