

SUPERIOR COURT OF CALIFORNIA  
COUNTY OF FRESNO  
1100 VAN NESS  
FRESNO, CALIFORNIA 93724-0002

(Attachment C)

**PSYCHOLOGICAL/PSYCHIATRIC EVALUATION GUIDANCE MEMO  
(EFFECTIVE - MAY 1, 2011)**

**FOR IN-CUSTODY INTERVIEWS, THE JAIL INTERVIEW AND REVIEW OF MEDICAL RECORDS MUST BE  
ARRANGED TWO DAYS PRIOR TO THE ACTUAL INTERVIEW.**

**JAIL INTERVIEWS:**

Interviews may be conducted any time of the day or evening prior to 9:00 pm. Interviews may also be conducted on the weekends.

In order to facilitate your interview, the Watch Commander can be notified two days prior to your jail visit. You may FAX a letter to the Jail Watch Commander at (559) 488-3982, indicating the date and time you plan to visit, and the inmate(s) you need to see. This is especially helpful if you need to have a private room in which to conduct the interview. Questions can be directed to the Watch Commander at (559) 488-2590.

The main jail is located at 1225 M Street. Arrangements for a brief tour of the jail can be made through a Sergeant at (559) 488-2898, so that you can understand where individuals are housed, and the procedures for conducting interviews.

**REVIEW OF MEDICAL RECORDS:**

When the court orders outside examiners to perform evaluations for competency or other issues, the doctors are often given access to review medical records. This can be done from 7:00 AM to 3:30 PM, Monday thru Friday, except for holidays. If examiners come to the jail outside that time frame, staff may not be available to assist them. Requests for record reviews outside day shift working hours must be made in advance to the Division Manager of Jail Psychiatric and Medical Services so suitable arrangements can be made (559) 442-2404, fax (559) 442-5277.

It is not possible to have the jail FAX or mail medical records to you due to confidentiality issues, in addition to other personnel issues.

Phone contact is the best way to communicate. The office line is (559) 442-2404, which will roll over from the secretary to the Head Nurse to Medical Records so you should always be able to reach someone. In the event that line is not operational for some reason, there is a message phone line available at (559) 488-2866 which is monitored daily for information.

**NEED FOR AN INTERPRETER**

There should be a notation on the court order if you need an interpreter. If so, contact the Court Interpreter Coordinator, at (559) 457-4910 to make arrangements for an interpreter.

**EVALUATION TO BE PAID BY DEFENSE COUNSEL:**

Sometimes there might be a request for an EC 1017 evaluation, which is a confidential evaluation made at the request of defense counsel. Thus, only defense counsel should receive a copy of the report. The Court does not get a copy and therefore it is not for the Court's use, so those evaluations must be paid for by the defense. (NOTE: For court-appointed private attorneys, these claims would be processed as would any other expert expense.)

**PROCEDURE FOR DECLARING INABILITY TO COMPLETE EVALUATION AT STANDARD RATE:**

If you cannot complete an evaluation at the standard rate, you must contact Court Claims Processing in writing by e-mail ([claimsprocessing@fresno.courts.ca.gov](mailto:claimsprocessing@fresno.courts.ca.gov)) or mail Claims Processing, Fresno Superior Court, 1100 Van Ness, Room 503, Fresno, Ca. 93724-0002 setting forth the reasons for the request for additional compensation. Your request will be forwarded to the judge assigned to review these matters. You will be notified of the decision in writing. Please do not proceed with the evaluation until you are notified by the Court. If you proceed with the evaluation without a preauthorization for a higher compensation rate, the standard rate will be paid. If a higher compensation rate is preauthorized, you must submit a copy of the authorization along with your claim for payment.

**IF DEFENDANT REFUSES TO BE INTERVIEWED OR FAILS TO APPEAR FOR INTERVIEW.**

You will be paid the standard rate if the defendant refuses to be interviewed, or fails to appear for a scheduled interview, *and* if you have rendered an opinion based on the documents you had previously received and reviewed. If you are unable to provide a report and opinion for any reason, but still wish to be compensated, you must submit a written explanation for the Court's consideration to determine if a payment of \$300 can be paid.

**SUPPLEMENTAL REPORT/REREFERRAL**

If you are requested to provide a supplemental report or the matter is re-referred to you, the reimbursement for this subsequent report will be \$300 unless preauthorized at a different rate.

**IF TESTIMONY IS REQUIRED AFTER A COURT-APPOINTED EVALUATION:**

Testimony by a court-appointed psychologist or psychiatrist for a PC 1368 competency hearing (not a trial on the merits) is the only testimony that is funded by the Court. Any testimony costs not associated with a PC 1368 competency hearing must be billed to the agency that issued the subpoena, and not to the Court.

In order for the Court to be consistent in payment practices in PC 1368 competency hearings, maximum rates have been established: for testimony preparation the Court will pay \$200 (1 hour at \$200 per hour), and for the actual testimony the Court will pay another \$200 per hour. Payment for testimony shall commence at the ordered appearance time. (If the doctor is subpoenaed or called to appear at 10:00 a.m., and appears at that time, but then does not go on the stand until 11:00 a.m., the doctor will be paid from the subpoenaed time of 10:00 a.m. If the parties are able to notify the doctor in advance of a time change, the doctor will be paid starting at the revised appearance time.) Travel time is not a reimbursable expense.

**ATTORNEY REQUESTS/ASSISTANCE**

If attorneys request that you review additional records that were not a part of the Court's original evaluation order, you must bill the attorney who requested the additional review and obtain any necessary authorizations from his/her employing agency. Likewise, consultation time with an attorney is not a court expense.

**PRE-AUTHORIZATION IS ESSENTIAL**

The Court understands there are cases that may call for a greater time allocation in order to review records, or to use a particular diagnostic instrument, or there are extenuating circumstances which justify payment. On such occasions; the doctor must receive pre-authorization by the Court based on a written request.

I have read and agree to these terms.

\_\_\_\_\_  
Print name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date