

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

ATTACHMENT “C”

**PSYCHOLOGICAL / PSYCHIATRIC EVALUATION GUIDANCE
MEMO (UPDATED- May 13, 2025)**

JAIL INTERVIEWS:

- Interviews may be conducted any time before 9:00 p.m., Monday through Sunday including holidays.
- You must contact the Watch Commander the day before you wish to conduct an interview at the jail. Please fax a request letter along with a copy of the court order appointing you, to the Watch Commander at (559) 488-3982 specifying the date and time you would like to visit, and the inmate(s) you will be interviewing.
- The Watch Commander will send you a confirmation via fax. Please take your confirmation with you to the jail. You will need the confirmation if you have reserved a private room for conducting the interview(s).
- If you have any questions, please call the Watch Commander at (559) 600-8440.

The main jail is located at 1225 M Street. Upon your arrival, the Sergeant will go over the procedures for conducting interviews within the jail. If you would like to arrange a brief tour of the housing areas of the jail before conducting your interview, please contact the sergeant at (559) 600-8725, at least one to two weeks in advance to schedule a tour.

REVIEW OF MEDICAL RECORDS:

- When the court orders outside examiners to perform evaluations for competency or other issues, jail medical records may be made available for review. If you would like to review jail medical records you must submit a request at least 24 hours in advance of reviewing the records by calling (559) 600-9360. If requesting by fax, written request must include Well Path – Fresno County Jail.
- Review of jail medical records must be initiated between 7:00 a.m. and 2:00 p.m., Monday through Friday, excluding holidays. Review of jail medical records must be completed by 3:00 p.m. Staff is not available to assist with records review outside of this time frame, unless requested and approved at least one week in advance.
- Requests for review of jail medical records outside of the standard days and hours set out above must be made in advance by contacting the Jail Medical Records Manager by fax at (559) 488-3298, or phone at (559) 600-9370. These lines are monitored Monday through Friday including holidays.
- The jail cannot fax or mail medical records to you.

NEED FOR AN INTERPRETER:

- There should be a notation on the court order if you will need the assistance of an interpreter. To make arrangements for an interpreter, please contact the Court Interpreter Coordinator at (559) 457-4910.

EVALUATION TO BE PAID BY DEFENSE COUNSEL:

- If defense counsel has requested an Evidence Code section 1017 evaluation, only defense counsel should receive a copy of the report, as it is confidential. The court does not get a copy, as it is not for the court's use, therefore these evaluations must be paid for by defense counsel.

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 by e-mail (claimsprocessing@fresno.courts.ca.gov), setting forth the reasons for the request for additional compensation.
- Your request for compensation at a non-standard rate will be forwarded to the judicial officer for pre-approval.
- 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 rate is preauthorized, you must submit a copy of the authorization 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 due to the failure to appear, no show, or refusal of the defendant, and wish to be compensated, you must submit a written explanation for the Court's consideration to determine if a payment of 50% of standard rate can be paid.

SUPPLEMENTAL REPORT / REREFERRAL:

- If you are asked to provide a supplemental report or the matter is re-referred to you within a 12-month period, the reimbursement for this subsequent report will be \$500.00 unless preauthorized at a different rate.
- 12-month period is defined as date of appointment by the court on the initial evaluation to date of appointment by the court for supplemental report/re-referral.

IF TESTIMONY IS REQUIRED AFTER A COURT-ORDEREVALUATION:

- The court will pay the testimony expenses only of court-appointed psychologists or psychiatrists who testify in a Penal Code section 1368 competency hearing (not a trial on the merits) a hearing held pursuant to Welfare and Institutions Code sections 709(b) 5008(h)(1)(A), 5303.1; or who conduct an Evidence Code section 460 evaluation.
- Testimony provided by a court-appointed psychologist or psychiatrist for Penal Code sections 1026 or 1027, or Welfare and Institutions Code section 6600, evaluations are to be paid by the County Administrative Office.
- Testimony provided by a court-appointed psychologist or psychiatrist for Evidence Code section 1017 and Penal Code section 288.1 evaluations must be billed to the agency that issued the subpoena.
- Travel time is not a reimbursable expense.
- The court has established maximum rates of pay as follows:
 - \$350.00 per hour for trial preparation;
 - \$350.00 per hour for actual testimony
 - Payment for testimony will be based on the ordered appearance time. For example, if you are subpoenaed or called to appear at 10:00 a.m., but do not take the stand until 11:00 a.m., you will be paid based on a start time of 10:00 a.m.
 - If the parties notify you in advance of a change to your appearance time, you will be paid based on the revised appearance time.

PRE-AUTHORIZATION OF ADDITIONAL FUNDING:

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.

IF ATTORNEY REQUESTS ADDITIONAL ASSISTANCE:

If an attorney requests that you review additional records, you must obtain pre-authorization from the court prior to conducting the review in order to be compensated. Requests must be emailed to claimsprocessing@fresno.courts.ca.gov and include the following:

- an explanation for the need of additional monies;
- a detailed table of contents showing the additional documents you are being asked to review; and
- the name of the party requesting the review.

If the court finds that documents were produced that are not part of the court's original evaluation order, you must bill the party who requested the additional review. You will also need to obtain any necessary pre-authorizations from the requesting attorney's employer/agency.

Consultation time with an attorney is not a court expense, thus should not be billed to the court.

REMOTE COURT-APPOINTED MENTAL HEALTH ASSESSMENT (Adult In-Custody Defendants Only)

- If the appointed doctor opts to conduct an evaluation remotely, they must contact the Criminal Mental Health Desk at (559) 457-1716 to schedule the assessment.
- Remote assessments should be scheduled no less than 2 court days from the date of the requested assessment.
- An active email address must be provided by the doctor's office at the time the assessment is scheduled. The provided email address will be used to send the Zoom link to the doctor.
- Sessions are scheduled in 1 hour increments.
- Three (3) assessments slots will be made available Monday – Friday at the scheduled times listed below:
 - 1:30 PM – 2:30 PM
 - 2:40 PM – 3:40 PM
 - 3:50 PM – 4:50 PM
- Doctor may request longer than the allotted 1-hour time. If you believe additional time will be needed for an assessment, please notify the clerk at the time session is scheduled.
- Judicial Assistant will email Zoom session link and guidelines to the email address provided by doctor.
- Contact Number for Hearings: (559)457-1716
- Please provide the following information when requesting a hearing:
 - Case Number
 - Case Name
 - Email address (this will be used to send Zoom link)
- Each session should end at least 10 minutes prior to the start of the next session. If additional time is needed, please contact the Mental Health Desk to schedule another date.
- Session links will be sent to the email provided at the time session is scheduled.
- Please contact the Mental Health Desk for any cancellations or changes in assessment.

NOTE: Jail medical records for court appointed evaluations may be obtained by contacting Wellpath.

I have read and agree to these terms.

Print Name

/S/
Signature

Date