

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

**ATTACHMENT "C"**

**PSYCHOLOGICAL / PSYCHIATRIC EVALUATION GUIDANCE  
MEMO (UPDATED- June 9, 2023)**

**JAIL INTERVIEWS:**

- Interviews may be conducted any time of the day or evening prior to 9:00 p.m.
- Interviews may also be conducted on the weekends.
- In order to facilitate your interview, you must contact the Watch Commander the day prior to your jail visit.
- You must FAX a request letter along with a copy of the court order appointing you, to the Watch Commander at (559) 488-3982, indicating the date and time you plan to visit, and the inmate(s) you need to see.
- Once the Watch Commander has received your request they will send you a confirmation via FAX. Please take your confirmation with you on your visit to the jail.
- 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) 600-8440.

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) 600-8725, so that you can understand where individuals are housed, and the procedures for conducting interviews within the jail.

**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 jail medical records. Requests to review jail medical records must be made 24 hours in advance (559) 600-9360.
- Review of jail medical records can be done from 7:00 a.m. to 2:00 p.m. (review of jail medical records must be completed no later than 3:00 p.m.), Monday thru Friday, except for holidays. If the examiners come to the jail outside that time frame, staff will not be available to assist them.
- Requests for review of jail medical records outside the day shift working hours must be made in advance to the Jail Medical Records Manager so suitable arrangements can be made (559) 600-9360 fax (559) 488-3298. These lines are monitored daily for information.
- 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.

**NEED FOR AN INTERPRETER:**

There should be a notation on the court order if you will need the assistance of 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.

**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)), 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 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 requested 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 APPOINTED EVALUATION:**

- Testimony provided by a court appointed Psychologist or Psychiatrist for a PC 1368 competency hearing (not a trial on the merits of the case), W&I 5008(h)(1)(A), W&I 5303.1, or EC 460 evaluations are the only testimonies that are funded by the Court.
- Testimony provided by a court appointed Psychologist or Psychiatrist for PC 1026/1027 or W&I 6600 evaluations are paid by the County Administrative Office.
- Testimony provided by a court appointed Psychologist or Psychiatrist for EC 1017 and PC 288.1 evaluations must be billed to the agency that issued the subpoena.
- In order for the Court to be consistent in payment practices, maximum rates have been established:
  - \$350.00 (1 hour at \$350.00 per hour) for Trial Preparation.
  - \$350.00 per hour for Actual Testimony.
    - 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.

**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.

**ATTORNEY REQUESTS ASSISTANCE:**

If an attorney requests that you review additional records you must obtain pre-authorization prior to the review in order to be compensated.

Written requests must outline the following:

- Doctor's explanation for the need of additional monies.
- Detailed Table of Contents showing documents produced for review.
- Name of party requesting the review of submitted documents.

If the Court finds that documents which were produced are not part of the Court's original evaluation order, you must bill the party who requested the additional review and obtain any necessary authorizations from his/her employing agency.

Consultation time with an attorney is not a court expense.

I have read and agree to these terms.

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Print name

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Signature

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Date