

## NEWS TOPICS

Please use the contact page to send me any comments.

### ***Litigants in person***

Litigants in person pose problems to experts on two levels, firstly they look to the expert to explain the procedure including advice as to what reports would be appropriate and second that they will ask the expert to produce follow up reports which are inappropriate.

I am particularly interested in the experiences that other experts or lawyers have had with dealing with Litigants in person and the strategies they have used to overcome the problems.

### ***Metrics in the service of lawyers***

Measuring things allows managers to create targets which can be used to reward or punish the worker.

Managers prefer quantitative measures rather than qualitative measures.

I feel that in medical expert witness work the key areas are organisation, skills and reliability.

If any readers have ideas of what should be measured or should not be measured I would like to hear your reasoning.

### ***Standard of care***

The law states that a Bolam breach is doing something that a reasonable body of opinion would not do or not doing something they would do.

This does not help when considering mistakes, as all people make mistakes it might be argued that making a mistake is something that a reasonable body of opinion would do and should be accepted.

Although the law does not consider the issue of intention it seems to me that if the usual practice is in error then the intention was to perform an error and the practitioner was in breach.

On the other hand to consider an ordinary mistake with best intentions as a breach would appear to be against public interest and it would create defensive medicine.

### ***CAFCAS assessment***

The CAFCAS assessments I have seen are complicated, repetitive and appear subjective in their opinions.

It may be that assessing children's needs in family law is fundamentally too complex to be possible with our current knowledge.

I feel that CAFCAS could be simplified by removing medical and educational problems from CAFCAS and having separate medical and educational reports.

I feel that doctors and social workers and teachers often use different languages and there should be a single language to describe the features that each of these professionals is aware of.

Such a common language should allow the development of simple measurable attainable realistic timely (SMART) goals both with respect to the writing the assessment and to the management of the child's case.

### ***Preventing clinical negligence***

My main motivation for working in clinical negligence is an interest in how to prevent it from occurring.

I have developed a questionnaire that a patient completes prior to attending their GP with all the relevant information.

The GP can then scan the questionnaire looking at for instance the red flags section much more rapidly than it would be possible to ask and record answers to the questions.

I am looking for GPs to trial and help me improve the system.

### ***Use of InfoPath***

InfoPath comes bundled with the Office software and its purpose is allow information to be entered via an online and to turn that information into a report.

I am keen to work with an IT skilled person who can help me turn my questionnaires into on line report writing systems.

### ***What the expert needs to know about quantum***

Most experts try to keep well away from issues of quantum but they are the best placed to say whether a particular loss is reasonable or not.

There is a peculiar language used by lawyers for instance exacerbation and acceleration which have particular legal meanings to trap the unwary expert.

I hope to work with a legal person to write an article to answer the question What does the expert need to know about quantum?

### ***How to write a psychological report***

It is forgotten that most psychological reports are written by GPs and good practice from psychologists and psychiatrists rarely gets disseminated to the personal injury expert.

I have written an article how to choose a psychological expert which is on this website.

I would like to write an article developing my themes and how to lay out the information in a logical way, follow chains of logic, deal with the material issues without producing an excessively lengthy report.

### ***What are psychological treatments leaflet.***

I have previously written a 'what are physical treatments leaflet' which has helped me explain the complexity of physical injury in an objective language.

I would like to collaborate on a 'What are psychological treatments leaflet' to do the same for psychological injuries such as situational anxiety and depressive symptoms and perhaps to PTSD.

**If any of these subjects interests you please feel free to contact me through the comments page.**