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## **Pursuing a career in Forensic Psychiatry**

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**Abstract:**

Forensic psychiatry is a fascinating field, but one which the majority of medical students will have very little knowledge or experience in. This contribution sets out to describe the experience of two 4<sup>th</sup> year medical students at Nottingham University who undertook a speciality placement during their general psychiatry attachment on a low secure forensic unit in Nottingham.

## **Pursuing a career in Forensic Psychiatry**

Forensic psychiatry is a fascinating sub-speciality of psychiatry, which is continually evolving across the world in line with growing public concern about the risks posed by mentally disordered individuals who show antisocial or violent behaviour, but one in which most medical students and junior doctors have little experience in. This contribution sets out to describe forensic psychiatry, the nature of forensic inpatients; our experience of shadowing a forensic psychiatrist, his role and caseload; qualities required to make a good forensic psychiatrist; the multidisciplinary approach to patients' care; a career pathway in forensic psychiatry; and opportunities to gain earlier experience in the field as an undergraduate.

### **What is forensic psychiatry?**

Forensic psychiatry is a sub-speciality of psychiatry, involving the assessment, treatment and rehabilitation of people with mental disorder who show antisocial or violent behaviour.<sup>1</sup> The overlap between the law and psychiatry forms a key element of the speciality, which is heavily influenced by evolving social and political reforms which vary worldwide.<sup>2</sup>

Over the past 50 years forensic psychiatry has been influenced by many key developments<sup>3</sup> ; ideologically, there has been an increased understanding and acceptance of the relationship between mental disorder and violent offending. Legally, there has been an improvement and wider acceptance in the legal tests and definitions to psychiatric defences. Socially, attitudes and perception of people with mental health problems have started changing, although stigma still exists. Alongside these developments, there has been a major improvement in treatment, biologically and psychosocially, providing effective alternatives to custodial care, particularly in the western world.

The increased acceptance of the link between mental disorder and crime has led to greater utilisation of the expertise of forensic psychiatrists in criminal proceedings; to give evidence in civil and criminal courts, and to assess and treat mentally disordered offenders and patients with similar needs, for example, those who have not committed any offences, but have the propensity to become violent.<sup>4</sup>

On entering the legal system, there are four major psychiatric defences within court; fitness to plead, insanity, diminished responsibility and automatism. Fitness to plead concerns the defendant's mental state at the time of the trial; where a defendant is found to be unfit to plead, they are sent to psychiatric facilities. The other psychiatric defences concern the defendant's state of mind at the time of committing the crime. Insanity

denotes a complete absence of criminal responsibility and a successful defence leads to an acquittal. In practice, the criminal responsibility of offenders with mental disorder is reduced rather than completely absent.<sup>3</sup> Hence, the defence of diminished responsibility, which only applies to cases of murder, is argued more successfully than insanity, leading to a reduced charge of manslaughter. Automatism is where the mind does not have the potential to control physical acts. This may occur in a variety of contexts including epilepsy, narcolepsy and dissociative states. This defence may lead to acquittal.

The role of the forensic psychiatrists involves management of mentally disordered offenders in a variety of settings, including secure hospitals, community settings and prisons, and the assessment of the suitability of transfer of patients with mental disorder from the criminal justice system to mental health facilities, whether hospital or community based, at any stage of the criminal justice process. Due to their unique expertise of the overlap between law and psychiatry, forensic psychiatrists play a key role in the drafting of legal and mental health legislation, particularly with regards to changes in the Mental Health Act, which allows involuntary detention, assessment, treatment and transfer of mentally disordered offenders.

### **Information box 1**

## **An evolving speciality**

For much of the 20<sup>th</sup> Century, mentally ill individuals were placed in large mental 'asylums'. Separate provisions were also available for a small minority of patients who showed serious antisocial or violent behaviour. Until the 1970's, the sole providers of secure hospital care in England and Wales were Broadmoor in Berkshire, Ashworth in Merseyside, and Rampton in Nottinghamshire. However, there has been a general trend to close the old asylums and place patients into short stay psychiatric admission units or treat them in the community with follow up outpatient clinics, with increased emphasis on psychosocial rehabilitation, such as the provision of alternative housing and other community mental health services.

Nowadays, across most of the western world, offenders with mental disorder are managed in a variety of settings including secure hospitals, general psychiatric hospitals and prisons and in the community. Forensic services within the UK, and increasingly worldwide, are now stratified according to the level of security they provide into three levels of security – high, medium and low, and the level of risk posed by the patient determines the level of security required. The speciality also has an increasingly large private sector, providing up to 40% of secure psychiatric beds in the UK.<sup>5</sup>

## **Our experience of Forensic Psychiatry**

The low secure ward on which we were placed had a stimulating environment, with a variety of inpatients suffering from psychosis, affective, anxiety and personality disorders, all of whom were detained under the 1983 Mental Health Act.

Referrals ranged from major offenders, including violent offenders, sex offenders, arsonists, rarely even homicide perpetrators, who stepped down from medium secure hospitals, to non-offenders, but all of whom posed a risk of harm to others. These referrals came from a range of agencies including prison, probation, other forensic mental health services, general psychiatric services and sometimes the Ministry of Justice.

Many patients had a history of childhood adversity, socio-economic deprivation, criminality and substance misuse. A multi-disciplinary approach to patients' care was therefore invaluable; educating patients in carrying out activities of daily living, skills for employment and how to structure their day was just as crucial as medical management in ensuring that patients maintained their mental health and social wellbeing.

Care packages were individually tailored and patients were typically more challenging to manage than those we encountered in general adult psychiatric settings. The nature of the setting entailed an average length

of stay of around 18 months, allowing members of the multidisciplinary team (MDT) to build up a good therapeutic relationship.

### **Information box 2**

Within the MDT, the forensic psychiatrist takes a leadership role; this includes coordination of the care provided, formulation of management plans, chairing ward rounds, assessment and treatment of mental disorders, and liaising with patients' carers and a range of external agencies. In addition to their inpatient commitments, forensic psychiatrists provide psychiatric input to local prisons and community mental health teams.

### **Information box 3**

#### **Personal qualities of a forensic psychiatrist**

Forensic psychiatry incorporates an intriguing mixture of law and psychiatry, and therefore requires a sound knowledge of sociology, criminal justice and law as well as psychiatric care. The nature of this speciality means that the cases are always stimulating; a sense of justice as well as a tolerance of patients who have committed disturbing crimes is invaluable.<sup>6</sup>

Forensic psychiatry is not suited to everyone; occasionally it can be difficult to deal with such patients without becoming emotionally involved in the cases. It is important that you act impartially and can cope with cross-examination in court, which can be daunting. It is a difficult role to play, as you must be able to tolerate some uncertainty; you will face many ethical dilemmas and in some cases may be required to act in the best interests of the public rather than the patient.

#### **Information box 4**

##### **Why should I pursue a career in Forensic Psychiatry?**

The prison population in the UK is rising dramatically; between 1997 and 2007 the number of prisoners increased by 30% to 83000, making the UK imprisonment rate the highest amongst countries in the European Union.<sup>7</sup> This figure is projected to rise to 95800 by June 2015 and has mainly been attributed to increased custody rates and sentence length.<sup>8,9</sup> This trend is a worldwide problem, with 68% of countries showing a growing prison population.<sup>10</sup>

The link between mental disorder and violent behaviour is now widely accepted, with up to 90% of sentenced prisoners suffering from a psychiatric disorder.<sup>11</sup> Consequently, the demand for forensic psychiatrists and their involvement continues to grow. Growing public concerns about the risks posed by mentally disordered offenders has played a major role

in the evolution of this speciality and paved the way for major expansions in forensic mental health care provisions. While the trend towards deinstitutionalisation resulted in a substantial decline in the numbers of general psychiatric beds, there has been a steady increase in the number of forensic beds in England, Germany and Austria over the last decade.<sup>12</sup>

The continual expansion of this field means that worldwide recruitment of trainees with an interest in forensic psychiatry is high, and this is the perfect time to get involved. The speciality offers a challenging, stimulating and highly rewarding career, dealing with some of the most disturbed patients within psychiatric practice.

### **Information box 5**

#### **How could I pursue a career in Forensic Psychiatry?**

In the past, post-graduate training in forensic psychiatry was gained by general psychiatrists who developed an interest in medico-legal issues, via self-education and clinical experience through working with mentally disordered offenders. Forensic psychiatry is not a recognised subspeciality in many countries. In many developing countries, particularly within Asia and Africa, there are very few general psychiatrists and those that practice forensic psychiatry continue to gain their skills in this way. There is a need to develop an internationally recognised curriculum for

this field; even within Europe, Britain, Ireland, Sweden and Germany are the only countries to have a certificate of specialist training in forensic psychiatry.<sup>4</sup>

The training programme introduced in the UK in the early 1990's is recognised worldwide as one of the few valuable qualifications in this subspeciality. The Postgraduate Medical Education and Training Board (PMETB) oversees changes implemented by Modernising Medical Careers, under which medical graduates complete the broad based foundation training programme (FY1 and FY2). Speciality training years 1 to 3 follow the same structure as general psychiatric training, with three one-year general psychiatric placements, during which you must complete the Royal College of Psychiatrists' membership examinations (MRCPsych). In order to gain a Certificate of Completion of Training (CCT) and be able to apply for a forensic psychiatry consultancy post you must undertake a further 3 years of specialist training in forensic psychiatry, in a range of secure settings and in the community, certified by the PMETB. The final year of this is aimed at preparation to become a consultant.<sup>13,14</sup>

### **Information box 6**

**How can I improve my CV/career prospects in forensic psychiatry?**

You can gain early insight into a career in forensic psychiatry by undertaking a speciality placement within your undergraduate general psychiatric attachment, or arranging a student- selected module or elective period at a secure unit within your deanery or internationally. During your foundation years, it would be beneficial to select a rotation in psychiatry, although this is not mandatory. During this time you may also gain experience by attending 'Inreach' psychiatric sessions within prison services. Attendance at voluntary courses and conferences is also helpful in demonstrating an interest in this field.

Find out more at:

- Royal College of Psychiatrists Forensic Faculty ([www.rcpsych.ac.uk/college/faculties/forensic.aspx](http://www.rcpsych.ac.uk/college/faculties/forensic.aspx))
- Forensic Research Psychiatry Society ([www.fprs.org](http://www.fprs.org))
- NHS Careers ([www.nhscareers.nhs.uk](http://www.nhscareers.nhs.uk))

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Information box 1: Role of a forensic psychiatrist

- Assessment of offenders in different settings
- Treatment of mentally disordered offenders
- Provision of psychiatric reports, relating to risk assessment, treatability and medicolegal defence
- Advice on risk management for local general psychiatrists and other local professional agencies
- Liaising with local agencies to provide appropriate care;
  - Social Services
  - Magistrates and Crown Courts
  - Drug and Alcohol Services
  - Local Multi-agency Public Protection Panel

Information box 2: The MDT is extensive, comprising;

1. Forensic psychiatrists
2. Clinical Psychologists
3. Mental Health Nurses
4. Occupational Therapists
5. Psychotherapists
6. Speech and language therapists
7. Pharmacists
8. Social Worker

Information box 3: a typical working week of a forensic psychiatrist

|           | AM   | PM   |
|-----------|--|--|
| Monday    | Community case discussion, meetings, teaching        | Outpatient clinic  |
| Tuesday   | Inpatient Ward Round                                 | Care Programme Approach meetings with community patients |
| Wednesday | Care Programme Approach meetings with inpatients     | Directorate level management                             |
| Thursday  | Administration, seeing inpatients                    | Medico-legal prison/court                                |
| Friday    | Referrals/bed management meetings, academic meetings | Administration, supervision of trainees                  |

Information box 4: Personal Qualities of a forensic psychiatrist <sup>1,6</sup>

- Good psychiatric clinical skills
- Tolerance of difficult patients and the ability to maintain a balanced and objective approach
- Natural curiosity about unusual behaviour
- Ability to approach patient care holistically
- Clarity of thought and of expression, both written and oral
- Ability to perform under pressure
- Thoroughness and attention to detail
- Capacity to lead and engage within a team
- Willingness to respond to emergencies and see patients at short notice

Information box 5: Advantages and disadvantages of a career in forensic psychiatry

Advantages

- Variety of career options
- Fascinating patients, interesting psychopathology and presentation
- Combination of medicine and law
- Opportunities to boost your income by doing medicolegal work
- Well resourced forensic units
- Working closely with a range of medical and non-medical professionals

Disadvantages

- A lot of time dedicated to paperwork due to stringent legal documentation
- Subjective enquiry
- Long distances to travel
- Slow patient turnover due to complex patient needs
- Can become political; subject to close inspection by the Mental Health Act Commission, the criminal justice system and the Home Office
- Under scrutiny of the public, particularly in high profile cases

Information box 6: Career Pathway <sup>6</sup>

F1/F2- Psychiatry rotation



ST1-3 Core Psychiatric training (3 x 1  
year placements)  
Completion of MRCPsych parts 1&2



ST4-6 Forensic Speciality Training



Certificate of Completion of Training

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