ANNUAL EXPERT WITNESS SURVEY REPORT 2019

8 November 2019

Annual Expert Witness Survey in collaboration with The Times
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“The Times and Bond Solon Annual Expert Witness Survey 2019 was conducted online from 13th September 2019 to 30th September 2019. 569 experts completed the survey making it one of the largest expert witness surveys conducted in the UK. The report provides the analysis of the results from the survey. I hope you will find it interesting and useful.

I would like to thanks The Times newspaper for their collaboration with us. Thank you also to the expert witnesses who completed this survey.”

Mark Solon
**Question 1: What is your area of expertise?**
Please select the option which is closest to your area of expertise. Please only select one.

<table>
<thead>
<tr>
<th>Medical - List of areas of expertise</th>
<th>Number of respondents</th>
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</thead>
<tbody>
<tr>
<td>Chiropody and Podiatry</td>
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<tr>
<td>Cosmetic, Dermatology, Hair</td>
<td>7</td>
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<tr>
<td>Ear, Nose, Throat</td>
<td>3</td>
</tr>
<tr>
<td>Emergency Medicine and Anaesthesia</td>
<td>19</td>
</tr>
<tr>
<td>Eyes</td>
<td>8</td>
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<tr>
<td>Forensic Medical Examiner / Police Surgeon</td>
<td>7</td>
</tr>
<tr>
<td>Gastrointestinal and Urinary</td>
<td>4</td>
</tr>
<tr>
<td>General Medicine / Surgery</td>
<td>15</td>
</tr>
<tr>
<td>GP</td>
<td>31</td>
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<td>Heart and Lungs (cardiothoracic)</td>
<td>8</td>
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<td>Musculoskeletal and Prosthetics</td>
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<td>Neurology</td>
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<td>Occupational Health / Therapy</td>
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<td>Oncology and Treatment</td>
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<td>Oral / Dental</td>
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<td>Orthopaedics / Trauma</td>
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<th>Non-Medical - List of areas of expertise</th>
<th>Number of respondents</th>
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<tbody>
<tr>
<td>Accountancy</td>
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<td>Agricultural / Environmental / Animals</td>
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<tr>
<td>Architectural</td>
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<tr>
<td>Computing / Technology</td>
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<td>Engineering</td>
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<td>Financial</td>
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<td>Fire</td>
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<tr>
<td>Fraud / Theft</td>
<td>3</td>
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<td>Health / Safety / Occupational / Use of Force</td>
<td>13</td>
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<td>Marine</td>
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<td>Other</td>
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<td>Science / Forensics</td>
<td>16</td>
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<td>Social Care</td>
<td>3</td>
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Total number of respondents: 569
Question 2: Over the past 12 months there have been several cases that have exposed a number of expert witnesses who have not understood the basic requirements of the role of an expert witness. Should judges have the power to permanently disqualify such experts who do not understand their role?

Experts clearly want all experts to understand their role and agree that those who do not have the necessary understanding should not continue. Nearly 60% agree that judges should permanently disqualify such experts.

It is so basic that an expert’s duty is to the court and not the instructing party that it seems incredible that some experts still do not understand the principle. However, some experts do not and continue to be “hired guns” as Lord Woolf memorably described them in his report, Access to Justice.

Instructing solicitors also need to be cognisant of the principle as we can see from the answers to Question 11 that experts continue to be asked or feel pressurised to change their report by an instructing party in a way that damages impartiality.

Also see Question 12. 44% of respondents said they had come across experts who profess expertise in an area in which either they are not qualified or does not warrant expertise.

Please see Appendix 1 on page 22 for comments given in response to this question.
Question 3: In May 2019 a multi-million pound fraud trial collapsed when the witness Andrew Ager was found not to be properly qualified to give expert evidence. Should instructing solicitors be liable for costs when they fail to exercise due diligence in the selection and instruction of an expert witness?

Following on from the attitude to experts who do not understand their role, experts are also concerned about those who are not properly qualified. Again around 70% of experts consider the instructing solicitor should be liable for costs if they fail to exercise due diligence in the selection and instruction of an expert witness.

In Question 11, some 25% of experts reported that they had experienced pressure from solicitors on their impartiality. Solicitors need to be careful in the way they treat experts as well as in the way they find them in the first place.

Costs can be considerable, and solicitors need to be very careful at the pre-instruction stage to make sure an expert is properly qualified and experienced in the field relevant to the issues in dispute.

An out of date or unsuitable expert witness is a dangerous expert witness and can create considerable risks for the instructing party. So, what should a solicitor look for in terms of currency before instructing a potential expert?
Expert witnesses obviously need to be up to date in their professional field (see Question 4 dealing with retired experts), but they also need to be up to date in their role as an expert witness. Clearly instructing solicitors will want to know that the expert they choose is current in their professional field. Experts do have a sell by date and so those that have retired will have a limited time to act as an expert witness. Solicitors should look for current practice and credibility. In civil matters, the time of the events in dispute will be relevant in the choice of expert.

A good place to start is with the expert’s professional body if they work in a field that has one. The due diligence process solicitors go through before formally instructing an expert should include checking that the expert is registered with their professional body and this by implication will confirm that the expert is up to date with continuing professional development.

Also look for consistency in the way the expert’s details are presented to the public. Experts need to regularly review their websites, LinkedIn profiles, CVs, directory entries, lecturing profiles on university sites, expert witness organisations etc to ensure they are consistent and accurate. Any inconsistencies may be picked up by the other side to show incompetence and potentially discredit the expert. Experts should make sure areas such as attending training courses, attending and speaking at conferences, writing articles and publishing papers, research work and other activities are current. Solicitors should go through what is in the public domain to make sure there is consistency before the other side does.

In terms of their work as an expert witness, the expert will need to ensure that their reports are consistent with current court rules, practice and protocols. If reports are not court compliant, then the instructing solicitor will need to guide experts but this could have the unfortunate consequence of a suggestion of influencing the opinion. Better that the expert knows what is needed and gets things right first time. So, ask about current training if this is not set out in the CV.

Experts need to keep up to date with the law relevant to experts and this is best done through regular training either online or by attending specialist courses. Experts also need to hone their courtroom skills. Most civil cases settle, so actual court appearances can be infrequent and challenging and although lessons in presentation are learnt the hard way, solicitors do not want their expert to learn that way on the case in hand. Practice in a training session can be very valuable, less damaging and will give comfort to the solicitor that their witness will not collapse under real pressure. Again, ask about courtroom training if the matter is likely to involve the expert giving oral evidence and even suggest that the expert gets trained.

Please see Appendix 2 on page 27 for comments given in response to this question.
Question 4: Should professionals who have retired not be allowed to continue to act as expert witnesses?

Many experts ask this question of themselves as they may have had a long and a distinguished professional life and would like to continue after retirement acting as an expert witness. Clearly there are cases when the issues in dispute in a matter require expert help on best practice at a point in time and retired experts may then be acceptable. Unfortunately, professional practice and the law itself change so quickly these days that retired professionals have a limited shelf life. Some 20% of respondents said that retired professionals should not continue to act as expert witnesses.

The same principles as summarised in the commentary to question 3 apply to instructing solicitors in the due diligence phase of finding the right expert. The longer the potential expert has not been in day by day practice in a field, the greater the hurdle to jump to instruct that expert.

Please see Appendix 3 on page 30 for comments given in response to this question.

Total number of respondents: 569
In May 2019, the Academy of Medical Royal Colleges published a guidance for healthcare professionals who act as expert witnesses. This guidance has been endorsed by the majority of healthcare professional organisations/bodies and their regulators. The guidance sets out the minimum standards and conduct expected of all healthcare professionals acting as expert witnesses in the UK. Should all professional bodies/regulators provide clear guidance to their members who act as expert witnesses?

In May 2019, the Academy of Medical Royal Colleges published *Acting as an expert or professional witness: Guidance for healthcare professionals*. This guidance sets out how healthcare professionals should be trained to be expert witnesses to ensure more consistency and better standards in the evidence provided by medical expert witnesses.


The respondents to the survey were overwhelmingly in support (90%) of the idea that such guidance should be given to all experts by professional bodies and regulators even for non-medical experts. The guidance clearly states what healthcare professional bodies expect of their members in terms of standards, training and behaviour when acting as a witness. The guidance reflects good practice set out by other bodies and highlights the legal requirements of witnesses.

All healthcare practitioners should read the review and guidance if they are expert witnesses or are considering becoming an expert and instruction solicitors need to make sure any expert instructed is compliant. It is essential that experts follow the guidance as if they are in breach, there could be serious consequences. Professional training as an expert witness is at the heart of the guidance.

Please see Appendix 4 on page 38 for comments given in response to this question.
Question 6: Within the new guidance “Acting as an expert or professional witness – Guidance for healthcare professionals”, it prescribes that all healthcare professionals who act as expert witnesses should now be required to attend specific expert witness training (relevant law and procedure, expert report writing and court training) and to keep up to date on an annual basis. Furthermore, this specific expert witness training should form part of their CPD, annual appraisals and revalidation. Should expert witness training form part of the annual appraisal of all professionals acting as expert witnesses?

Following on from the previous question, some 70% of respondents agreed that annual appraisals should include reference to specific expert witness training. This would clearly improve standards and hopefully reduce the number of experts who do not understand their role and do not have the requisite skills needed to conduct expert witness work.

Please see Appendix 5 on page 40 for comments given in response to this question.
Question 7: Do you act as an expert in personal injury cases?

Our survey shows that 61% of all the experts surveyed act as an expert in personal injury cases. Personal Injury cases are still a major area of work for expert witnesses.

Total number of respondents: 569
51% of expert witnesses surveyed act in legal cases. This year marks the seventeenth anniversary of legal aid, introduced in July 1949 to help pay for legal fees for those who cannot afford to pay for legal advice or proceedings. Richard Miller, head of the Justice Team at the Law Society, said provision of legal advice across England and Wales was disappearing, creating “legal aid deserts”.

Experts are not obliged to accept legal aid cases. One must remember that expert work is for most experts a secondary source of income. If the expert’s fees are too low, experts have to decide whether the case is worth their time and worth coping with the stress of respecting the tight deadlines set by the Court. Also, since the judgment in Jones v Kaney, experts are now facing the risks of being sued in contract or negligence. In facing such risks, experts may prefer not to work for low rates of pay.

However, for those funded by legal aid cases, the lack of willing expert witnesses means a restricted choice of experts to support those cases, which could affect fair access to justice.
Question 9: Would you continue to work in legal aid cases if expert witness fees were further reduced?

73% of the experts surveyed indicated that they would not continue working in legal aid cases if expert witness fees were further reduced. The danger is that if rates are reduced yet again, expert evidence might not be available anymore for legal aid cases.
As in last year’s survey, 41% of experts surveyed indicated that they have come across an expert they consider to be a “hired gun”. The question now is what leads an expert witness to be a hired gun. Pressure from instructing parties will be one of the reasons although Lord Woolf made clear in the Civil Procedure Rules 1999 that an expert’s duty is to the court, not the paying party.

Please see Appendix 6 on page 45 for comments given in response to this question.
As in last year’s survey, 25% of the experts surveyed said they had been asked or felt pressurised to change their report in a way that damages their impartiality by an instructing party. This can only be explained by the inherent contradiction that although one party pays for the expert, the duty of the expert is to the court and not to the paying party. We have an adversarial system that is based on winners and losers. Experts already have recourse to the courts under procedure rules, but the concern must be that if that recourse is taken, the solicitor would not use that expert again.

One expert reported that a “lawyer completely changed my report, put in extra paragraphs and deleted great chunks in order to make my opinion suit his client. We have historically been sending reports as Word documents, But now we will send everything as PDF files which cannot be altered.”

Interestingly, of the experts who act in personal injury cases, just under 1 in 3 of the experts surveyed (31%) said they had been asked or felt pressurised to change their report in a way that damages their impartiality by an instructing party over the past 12 months. This is higher compared to experts who do not act in personal injury cases, where only 14% said they had been asked or felt pressurised to change their report in a way that damages their impartiality by an instructing party.

Please see Appendix 7 on page 48 for comments given in response to this question.

Total number of respondents: 557.
Question 12: Have you come across experts who profess expertise in an area in which either they are not qualified or does not warrant expertise?

As in last year’s survey, almost half of the experts surveyed have come across experts who profess expertise in an area in which they are not qualified or does not warrant expertise. Hopefully this was pointed out to the instructing solicitors at the time so it could be raised as part of the litigation process.

However, it is concerning that such experts still put themselves forward and are then instructed. This also reflects on the adequacy of due diligence necessary from instructing solicitors.

Please see Appendix 8 on page 50 for comments given in response to this question.

Total number of respondents: 557.
Question 13: Which type of cases are you instructed in the most?

82% of the experts surveyed are mainly instructed in civil cases. 10% of the experts surveyed said they are mainly instructed in criminal cases and 9% of the experts surveyed are mainly instructed in family cases.

Total number of respondents: 557.
Question 14: Over the last 12 months, have the number of your instructions gone up, gone down or stayed the same?

Almost 40% of the experts surveyed indicated that the number of instructions received have gone up whereas 36% said the number stayed the same.
Question 15: What is your average hourly rate for report writing?

Total number of respondents: 557

Please see Appendix 9 & 10 on pages 53 & 54 for a full list of hourly rates by area of expertise.
Question 16: What is your average hourly rate for court?

Total number of respondents: 557

Please see Appendix 11 & 12 on pages 55 & 56 for a full list of hourly rates by area of expertise.
Question 17: How does this relate to your hourly rate in 2018?

As in last year’s survey, the majority of the experts surveyed (70%) indicated that their rates remain the same as last year.

Total number of respondents: 557
Appendix 1

Question 2: Over the past 12 months there have been several cases that have exposed a number of expert witnesses who have not understood the basic requirements of the role of an expert witness. Should judges have the power to permanently disqualify such experts who do not understand their role?

- In these cases training, supervision and mentorship should be mandatory.
- This may be a case of lack of training in being an expert witness. This should be ascertained prior to being instructed and clearly the expert should have training.
- Not automatic permanent disqualification, case by case and appropriate measures - further training, for example.
- Witness may have been catapulted into the role without advice or training. There should be an opportunity for future training. An ignorant witness has been let down by their instructing solicitors.
- I believe a less punitive approach should be adopted, perhaps with a series of warnings. The role is stressful, undervalued and underpaid and human compassion and understanding would hope that a warning would prevent an expert from again being ill informed of their basic role!
- Maybe after one previous warning to allow for learning.
- Experts should have the opportunity to train and become accredited rather than face permanent disqualification.
- But they should be barred from the role until they have undertaken approved expert witness training and qualified.
- Conditions can be put on those experts. If they fulfill those conditions then they should be able to act as an expert again.
- I am not sure - was this willful or was there a misunderstanding? I do believe in the expert’s responsibility to maintain that they are up to date and complete CPD as they are required to do in any other professional capacity.
- There is always a scope for improvement.
- But they should be suspended until appropriately trained.
- Judges could refer to the regulatory bodies such as the GMC.
- They should be “suspended” as experts and then required to undertake regulated training with certification to regain their status as “experts”.
- Yes, if they have not understood the basic requirements.
- Judges should be able to disqualify experts who have been dishonest but inexperienced experts should have the opportunity to gain more training rather than be permanently disqualified.
- Do judges have a say in expert witness training? If not why not?
- Not sure about permanently disqualifying but maybe for a time period.
- I think a severe caution and withdrawal of report best for first instance; permanent disqualification seems very severe, without allowing option to retrain/revalidate.
- Expert witnesses should complete a ratified qualification.
- Give them a strike and then out rule.
- Expert witness work is seen as glamorous, which attracts many so called ‘Experts’ who see it as lucrative, but without adequate training.
- It is draconian to permanently disqualify an expert - they could be suspended and advised to attend a course on Part 35 and other aspects of giving evidence.
- Permanent is too harsh - should allow opportunity for training.
- Consideration should be given to circumstances and training advised as required.
- Not permanently, as long as the expert agrees to undergo the necessary training.
- This is a rather sweeping statement. I think it depends on what they do not understand about their role. Sometimes the answer will be yes and sometimes no.
- or order that they undergo appropriate training if they wish to work as an expert witness.

• They should have the power to permanently disqualify such experts who do not understand their role.

Judges could refer to the regulatory bodies such as the GMC.
• Not part of a judge’s job.
• They should know their area of expertise depends on degree of lack of understanding.
• Giving expert opinion is a professional activity and as such experts should be clear about their role and the requirements.
• There should be a requirement for training however, which judges could require experts to undertake if they are deemed not to understand their role.
• Seems appropriate to require them to obtain and show evidence of training in the problem areas.
• I think this is a little extreme - understanding can be learnt, sometimes through getting it wrong!
• The fact that there are no sanctions allows some experts to repeatedly disregard the rules without sanction.
• No, training should be offered.
• Instructing solicitors should check the training undertaken & ensure experts are up to date.
• I say yes to the basic requirements although some of the requirements are less basic and are not as clear to new experts starting out.
• Otherwise bona fide experts get a bad name.
• Maybe not permanent disqualification: just temporary until the person has received adequate training.
• Temporary disqualification with compulsory training before being allowed to return would be more appropriate.
• There should be some other process of sanction and remediation.
• Not necessarily for first offence. Two strikes and you’re out?
• Yes, disqualify but not permanently, should be minimum standard for court in first place.
• They should have been informed properly of their role.
• Perhaps a recommendation to receive further training and disclosure of the failing with regard to past cases.
• They may learn to understand the role in future.
• Every effort should be made to ensure that an expert witness gives the evidence they are able to give in the required and appropriate way.
• The role is too important not be taken this seriously.
• Not sure a grumpy old judge should be able to stop an expert entirely; perhaps recommend training, but not cut them off entirely.
• They should enforce training.
• In my opinion it is up to the instructing solicitors to ensure that their expert witness meets the requisite criteria.
• If fraudulent, yes, but not if an individual is just inexperienced.
• I think the Judge should have the power to disqualify them from being expert witnesses if they are not qualified.
• Not permanently.
• A blanket ban should not be the standard. In many cases the fault lies with instructing parties not being clear with their expert.
• It is never black and white, experience helps.
• An individual should not profess to be an expert in a certain field unless they have the qualifications to do so.
• They should have the chance to retrain and prove their credentials.
• Not necessarily permanently....should be like driving. Should send for retraining.
• Yes, until they gain some sort of acceptable certification to ensure that they do have these basic requirements.
• Depends on nature of issue...if a technical matter, could be readily brought up to speed.
• Subject to a suitable threshold test of course.
• But re-training should be a requirement to allow them to continue.
• Would it be better to aim to train and educate expert witnesses to widen the pool of experts rather than seek to exclude.
• These experts should be properly trained before they are involved in a case.
• Should disqualify temporarily.
• They could have the power to insist on further training before continuing as an expert witness with, say, a 12 month time frame.
• If it can be demonstrated that they have not received training and do not meet the GMC standards of practice and AoMRC standards.
• The solicitor who appointed the expert should be sanctioned as well, as they should have ensured that the expert had read and understood the relevant procedure rules and guidance.
A person can be an expert in their field but report will only be as good as instructions given to expert by law firm.

They should be temporarily disqualified with option of re-training.

Further training should be offered prior to any permanent disqualification.

People should be given the opportunity to learn the requirements of the role of an expert witness.

It is the expert’s responsibility to know the requirements of the court - their expertise in a given subject matter is not sufficient.

There should be a ‘retraining’ requirement with suspension until the required standard is achieved.

I think persistent offenders should be disqualified.

Yes, however, they should also have the power to disqualify advocates. For example, where a financial adviser has acted as advocate and been grossly negligent in representing their client in court.

With caveat, it depends if the failure of understanding is minor or major, the impact and if it can be readily solved by further training.

There should be an enforced retraining scheme.

This can arise from instructions received.

Perhaps if staged e.g. first time, training, second time final warning or something similar.

Permanent disqualification is not appropriate unless there are repeated failings to maintain expert witness competence.

Each instance must be judged on its merits: the individual who claimed expertise in carbon trading must have known that he had no such expertise and requires severe censure; others may simply not have realised the level of expertise required.

Should be disqualified until they have done an expert witness accreditation course.

Obviously those who elect to be properly trained should not lose out to those who do not bother.

They should be given warnings and advice to get properly trained.

A mistake should not bar someone for life.

Are we a zero tolerance society now? People including experts make mistakes but repeat offences should be dealt with harshly.

I believe that some expert witnesses produce what their instructing solicitor is looking for, rather than presenting their unbiased opinions for the judge.

Not on first occasion but maybe compulsory training.

Most expert reports fail to comply fully with CPR35. Experts should receive appropriate feedback. At present solicitors rarely raise these issues, MROs occasionally do. 1% of all expert reports should be subjected to high level audit with feedback.

Very dependent on the gravity of the issue.

An expert witness must be properly acquainted with their vitally important responsibilities.

I was a ‘victim’ of a systematic dismantling of my evidence by a conscientious barrister that attracted such severe criticism from the judge that I felt moved to ‘self refer’ the case to the GMC. I recognise that I was completely naive about the course process for in 20 years of medico-legal practice alongside a full time neurosurgical career I had never had a case go to court. It is my observation that the ‘Woolfe’ reforms are losing their bite and more cases are going to court. In this circumstance it is essential that clinicians are trained in the court process, possibly with formal accreditation. If that were the case then ignorance could not be a defence and disqualification a perfectly reasonable outcome. Having said that the ‘down side’ is that clinicians like me who have never had the intention to become a professional medicolegal doctor (or ‘hired gun’!) will no longer expose themselves to the court process. I don’t know what the answer is but I do know that the issue must be addressed.

But they should have the power to insist on training.

But it must depend on the individual circumstances.

In the first instance, such ‘experts’ should be mandated to produce evidence of attending recognised training.

Professional bodies and such companies as Bond Solon provide more than ample advice on the role of the expert so there is no excuse for not understanding the role of an expert (the instructing lawyers should also be assisting the expert with what the role is).

Should be a process that allows witness to improve their practice to resolve disqualification.

The experts should be given some training.

The instructing solicitor must give clear instructions with circumstances of incident and injuries sustained.

Perhaps they need to be educated.

Not permanently. People should have the chance to correct poor performance.
• The discretionary power should be available for repeat “offenders”.
• I have done several cases where experts have ‘got away with it’. There has been no punishment and they satisfy their instructing team and live to offer opinion again. It is extremely frustrating.
• Only if repeated
• They should refer them for appropriate training
• Depends upon the degree of ignorance of the role
• Training in medico-legal should be compulsory
• If role of expert witness is part of jurisdiction and its protocol, then more likely that judge should have power to disqualify the witness. On the other hand the witness, though is responsible to the Court, should also have independent status.
• I think it will be harsh. Sometimes there can be ignorance which may appear to be lack of knowledge
• They should be warned and have to attend training before serving again.
• As an expert there is a requirement to keep up to date with our obligations to the Cory process
• Unless evidence of repeated offence, should be made to attend suitable training
• No to permanent but temporary with retraining
• Permanent is such a long time. I think public exposure is sufficient and the judgement ought to be sent to the professional body of the expert.
• These experts will need training
• Should compel retraining
• This is important work and has great impact on claimsants & defence when the expert has not bothered to learn the basic requirements.
• Bit harsh, unless repeat offenders
• If training would help this should be advised
• This is a matter for the GMC/FTP mechanisms
• We should be able to get clarification if we do not understand or give poor reporting
• Yes, because it could affect a person’s future
• Experts should undergo mandatory training as to their duty. Moreover, the instructing lawyer is likely to be just as much to blame. Many lawyers are not impartial in their instructions and are not slow to ‘recruit’ the expert.
• But for exceptional circumstances.
• To make it permanent initially is excessive. Instructions and warnings should be given re assessment
• It’s quite easy to fall foul of the ‘basic requirements’ with a clever barrister.
• Discipline should be tightened up?
• But would adopt the policy of two strokes and you’re out
• If severe and persistent
• The lack of knowledge is easily remediable
• I suggest that judges should have powers to ban experts from presenting in cases in a more flexible manner, e.g. from a temporary ban, with the option for permanent bans for egregious behaviour.
• If they are experts in their field, then provided they undertake suitable training to understand the role of an expert they should be able to practise in future.
• Permanent disqualification is a bit harsh; especially as their reputation would be so tarnished that they would be unlikely to get any more work anyway. A better approach would be to mandate some sort of additional training or supervision so that such expert witnesses have the opportunity to learn from their mistakes.
• But should require evidence of remedial training+
• Many experts in their field are approached for their opinion. However, they are not always explicitly informed about the basic requirements. To penalise them permanently would be to the detriment of the system.
• In clear cases such as this, that would be appropriate, in my view.
• Unless the law is changed to make training and registration compulsory
• This should be clear to all expert witnesses & they should undergo relevant training
• Or caution after one error and insist training
• Retraining issue - if persistent offender then disqualify
• Discipline should be tightened up?
• but not on the first occasion
• The best experts are generally those who are fully engaged in the discipline that they are instructed upon. It is their instructing solicitors obligation and duty to spell out their role and ensure that they understand the requirements stated in CPR 35. If they have ignored or willfully disobeyed those requirements then their instructing solicitors can pursue them for the unrecoverable costs, including any wasted costs caused by their behaviour. If the solicitors have been at fault by their failure to inform
the experts, it is they who should receive the criticism and sanction.

- But require them to train/retrain
- Not permanent, only for that case and barred until completed further training
- Should include experts who have knowingly lied under oath
- Provide more training - MOJ should provide this for free
- I don't think that would be the answer, especially as misunderstandings and the way evidence is presented could make it appear that someone doesn't understand their role when they actually do. BUT compulsory expert witness training and CPD should be a pre-requisite.
- Legal processes should ensure that only qualified expert witnesses are appointed: this is in the best interests of the people seeking justice and settlements, the court and the legal professionals involved.
- But they could require evidence of training before resuming ML work
- If the expert was untrained then training should be ordered.
- Or a revaluation questionnaire/exam
- Provided that the problem was significant
- Yes, until they can show competency and can be judged to understand role
- The role of the expert should not be taken frivolously or simply to earn a fee. With that comes a responsibility to understand the details of your role.
- They should disqualify from that case and possibly stipulate that the expert must undertake training before attempting to act as an expert again.
- Being a bad expert does not make you bad at your job. It should be possible to bar someone from expert work though.
- Suspend until they can objectively verify that they do understand their role, but not necessarily permanently disqualify
- Experts should undergo compulsory training.
- No, if this is the first occurrence. However, if the expert witness has repeatedly misunderstood their role in court then the judiciary should have the power to ask the expert witness's professional body to intervene.
- Temporary suspension for re-education
- Judges could be given the power but firstly, those failing in their role should be educated on how to conduct themselves and should be directed to further learning if required
- Maybe enforced training?
Appendix 2

Question 3: In May 2019 a multi-million pound fraud trial collapsed when the witness Andrew Ager was found not to be properly qualified to give expert evidence.

Should instructing solicitors be liable for costs when they fail to exercise due diligence in the selection and instruction of an expert witness?

- I do think solicitors should check and I am surprised they don’t do this more often. I always send information to them
- There should be a threshold of due diligence that is enforced through compensation but how/what and where is this established?
- This perpetuates the cycle of blame on what could arguably be an innocent mistake from instructing solicitors.
- A client has appointed a solicitor looking at his expertise. Similarly solicitors must check eligibility of experts to give witness.
- I am of the opinion that there is an obligation on the expert to ensure that they are diligent in what they accept instructions on in addition to the appointing solicitors
- There should certainly be some form of remedy but not sure I am best placed to decide what that should be
- A matter for the court
- Medical professionals are bound by professional codes of conduct, including clear guidelines regarding continuing professional development and right to practise. It should be the professional’s responsibility to maintain this, not the solicitor’s responsibility to check it.
- In addition, solicitors should be able to apply to the Court for guidance when there are potential specific difficulties in finding a suitable expert
- Perhaps both the solicitor and the expert should be apportioned costs liability
- It would have to depend on the specific circumstances
- All expert witnesses should complete recognised expert witness training - level playing field!
- I think it is the expert witness’s responsibility to ensure they are properly qualified
- Solicitors instruct experts on trust that their CV is, and qualifications are, truthful - the fraudulent expert should suffer the sanction of wasted costs
- Although consideration should be given to circumstances, some areas of expertise have very few experts
- This is a matter of law, not my expertise
- ‘Due diligence’ are the key words
- Depends on the information provided by the expert witness to some extent
- Solicitors should check witness CVs
- I believe this to be a joint responsibility between the solicitor to exercise due diligence and the expert to check out with the solicitor what area of expertise is needed for cases on which they are asked to accept instruction and to satisfy themselves they are in fact appropriately qualified to provide expert opinion in that field.
- Although the expert has liability also if they are not appropriately qualified in terms of their own expertise
- Absolutely. Unfortunately it is an all too common experience
- Instructing solicitors should be able to demonstrate how they checked the adequacy of an expert witness - is it by word of mouth from a known respected expert witness in the same field? Is it by their publications/qualifications? Is it their performance in court in previous cases?
- I would say yes but if an expert misrepresents themselves, again there should standard of expertise should be subject to more scrutiny before the court case can commence
- I feel it partly depends on how deceitful the witness was in ‘advertising’ their qualifications.
- They need to take care when selecting an expert
• I suppose they should be able to recover costs from the expert’s indemnity firm
• They should ensure that at engagement they have criteria against which they vet any potential expert witness
• Yes, possibly some penalty as they should ensure the expert witness is qualified
• The lawyers and counsel are the experts when it comes to deciding the suitability of the expert. If they get it wrong then they should shoulder some of the blame. However, the expert should also be well aware, particularly in high profile cases, of the need to be honest and decline a case if they have concerns about their own suitability. It does add to the call for all criminal cases for the expert to show suitability and experience in their field and the skills required to be an EW, including certification and experience
• Solicitors should be aware of their expert’s qualifications
• They should be fined perhaps, rather than responsible for all costs. Then they might check the qualifications of their ‘experts’ somewhat better... The expert witness is not usually the sole reason for a collapse in a case (although they sometimes are...)
• Qualifications should be checked prior to case starting
• Solicitors should ensure all experts are qualified in both expert witness and their field of practice
• It will be very difficult for the instructing parties to verify the expert’s qualification. The EW must be held responsible for him/herself
• In this case it was the CPS which took the case to court, but Andrew Ager had successfully given expert opinion in other trials. The expert was not selected by CPS but by the relevant police authority
• There is no system for a solicitor to assess the suitability of an expert; in the case of Andrew Ager, it seems experts in previous cases were unable to determine the fact he was not properly qualified
• Responsibility should be with both... what is needed is just as important as what is produced - all the information is required in order to produce a good factual report
• The expert also has a responsibility to ensure the case meets their skills
• Solicitors have a responsibility to scrutinise experts’ suitability and should take some of the criticism if this is not adequately done. But not sure that fining them is a viable option as a consequence
• Expert witnesses should also be held accountable
• Yes, this would go some way in preventing solicitors from finding “hired guns” to act as experts when they are not actually properly qualified
• It depends how easy it is to agree what constitutes an expert in the different areas of law and whether the expert has falsified qualifications etc or solicitors have just been lax.
• It is feasible that solicitors can be duped by a dishonest but impressive CV. The solicitors should carry out background checks but who would pay for the time required and how would solicitors with no science assess the results of such checks?
• This is a very contentious issue as it is difficult to quantify an expert
• Absolutely, they made a serious error in not challenging his veracity
• Yes, but if the expert has misrepresented themselves, they should be liable
• I feel it should be left for the court to decide
• But surely a mutual responsibility with the expert
• I believe that there will always be solicitors who look for expert opinions that reinforce their case arguments.
• Within limits yes, some solicitors choose hired guns rather than independent experts. If the solicitors are aware (or should be aware) of issues such as long prognoses or over favourable opinions then they should be liable. If the expert has been selected for them by a MRO or from a list or a fixed fee case then it would not be proportionate. Insuring against this possibility would not be practical
• The solicitors should have exercised due diligence but then the expert should have made it clear it was outside his expertise
• Again, I don’t know. In my case the judgement laid the ‘blame’ fairly and squarely at my feet but there were extenuating circumstances that involved the solicitors, in my view. There should be recognition of shared responsibility
• ...providing that it can be shown that they should have picked up any problems
• Instructing solicitors should carry out sufficient checks of the proposed expert
• They should confirm witness qualifications and experience before appointing one
• I think in such cases, solicitors should really pay for another qualified expert’s report
• This is a controversial question. There is a joint responsibility on experts and the legal team
• There should be a form of due diligence when instructing an expert
• You don’t want the pool of experts to be too narrow and they would just use the same ones all the time if this was imposed.
• I am a medical expert, not a solicitor. This is outside my expertise
• Yes, because solicitors get embroiled in the heat of litigation (‘the exigencies of litigation’) and fail to spend enough time on really assessing the expert and his/her evidence
• If they failed to exercise due diligence. Difficult if the expert has provided inaccurate information
• It should be for the judge to decide
• They are at the mercy of what the expert claims about themselves
• In my experience some solicitors are lax
• Instructing parties are equally liable if the expert is not suitable for the role, unless the expert has set out to deceive
• I think that should certainly be an option for the adjudicator in some cases. It might not be in the interests of justice to stifle things too much, but the option should exist
• Should be expert’s responsibility
• However, the expert also has a duty to advise the solicitor where his qualification and experience is not compatible with his instruction. For example, as a chartered quantity surveyor I had to advise my instructing solicitor that it was wrong for me to be critical of an insurance claim adjuster’s settlement as we are of two completely different disciplines
• They have primary responsibility for screening/scrutineering
• They must choose and know their experts
• Depends on what information was disclosed to them by the expert
• This question calls for careful consideration of the details, rather than a general yes or no response
• The jurisdiction was not within my experience. No comment
• I often have to explain why I am not right for the case when refusing. Solicitors then seem annoyed that I won’t simply do the report anyway! Surely getting the right expert is essential. I have recently, as an expert physiotherapist instructed by the defence, had to deal with a medical doctor in what was very clearly a physio case. It made discussion impossible as we are two different professions and I am sure was primarily the reason why the case dragged on as far as 3 days out of Court before they pulled out
• I think the solicitors instructing an expert need to take responsibility here. If the expert is not honest in providing the solicitors with accurate information about his expertise then the solicitors should not be penalised
Appendix 3

Question 4: Should professionals who have retired not be allowed to continue to act as expert witnesses?

- There should be a minimal requirement for maintaining skills and knowledge and activities should be recorded
- But should only provide evidence from the time periods that they were in practice
- Yes, if fully retired. Many practitioners work part time as they move towards retirement. If still registered and in part time practice with adequate CPD working as an expert seems reasonable
- Providing their knowledge of the case remains current
- This is a tricky area. If someone is retired it is much more difficult to keep up with latest advances and research so there must be a system of ensuring this happens
- Allowed only if they can demonstrate CPD, i.e. keeping their knowledge up-to-date.
- Again case by case, can they demonstrate through CPD or other means that their expertise and opinion is still relevant and correct?
- They may still have relevant expertise to offer. Instructing solicitors can determine whether it is sufficiently up to date.
- Some areas of expertise do not diminish after retirement. Others, such as expertise in current practice, do tend to diminish over time
- If they are retired, they likely have years of valued experience and could be instructed as professionals see fit.
- They should be allowed to continue as long as they can demonstrate ongoing CPD/accreditation.
- As long as they can show that they are up to date with CPD
- If they maintain registration which means keeping up with CPD and usually having an annual appraisal, they have more time available than when employed and can do better reports.
- Retired professionals should be allowed to act as experts for about 5 years from retirement. If they fulfil necessary CME they may continue as experts renewed yearly
- Dependent on their keeping professionally updated
- If they can evidence CPD
- Yes, but perhaps with limitations
- There may be a length of time following retirement but it is likely that this should not exceed say 3 years as cases are often time focussed and even as a retired person their opinion/expertise may be valid
- They present the most valuable lifetime experience particularly for complex and historical cases
- Not as a blanket ban, I suspect it will be different in different disciplines. I guess in medical if you don't see patients any more it is much more relevant than if you are an expert relying only on basic laws of physics that do not change
- But stop after 5 years have passed as no longer regarded as current
- The wording here confused me. I think they should not be allowed to. An expert is either retired or still practising, even if solely in independent practice. Still practising means that an expert is registered with a professional body and required to maintain continuing professional development
- Continuing experience as a treating practitioner is essential to keep knowledge and skills up to date
- The legal process allows for sufficient scrutiny of expert witnesses, for example, during cross examination and questioning on the CV
- There is a window after retirement when medical people have the time to act as experts properly. I took the cut-off point as 5 years after I retired from full-time NHS. Then there is the tricky period after this when cases drag on
- There should be a period of, say, 3-4 years where they are still considered to be suitably qualified to act as an expert
- There has to be a time limit how long a retired professional can continue to act as expert witness
- They should continue to work as long as they are keeping up to date with appropriate training
- Provided that they meet the CPD requirements, I do not see any reason why retired experts should not be allowed to act as expert witnesses
- Someone who has retired recently with an expert knowledge should not be precluded. It will be up to
the court to determine the validity of any specific evidence

- Consideration for some time after retirement perhaps a year or two, considering whether they were in practice at the relevant time and also the speed with which cases reach Court
- They should keep up to date
- I think that it’s fair for them to act as experts for a maximum of 5 years after retirement; after that, in my speciality, they are almost always out of touch with contemporaneous best practice and guidance.
- Expert witnesses, not involved directly within their stated field for a predetermined length of time (say three years), are no longer aware of current practice
- Whilst their experience continues to be relevant, then why shouldn’t they be appointed?
- For a limited period - to allow completion of cases. Realistically this is probably a fixed term - perhaps 2 years post-retirement?
- I think they should be allowed - they have a wealth of experience. But it may be wise to limit the number of years after retiring that they can be expert witness for as things in professions change
- Unless it is a historical case and they were practising at the material time
- Retirement is a complex concept in psychology practice. Many psychologists retire from specific roles (often leadership) roles in the NHS in order to focus on expert witness work
- Retired professionals should demonstrate proof of continuing professional development/keeping up to date
- Depends on when they retired
- There should be a 5 - 7 year limit
- Gravy train but isn’t that the point, they’ve done the field work now they get the rewards? Actually, no, they are a bit out of the loop.
- Within 2 years of retiring is acceptable
- Once a professional always a professional and experience comes with age!
- They generally have more time to give measured opinions
- As long as they are reasonably current it’s ok
- Retirement does not indicate that an expert is unreliable - on the contrary they often have a wider experience in their field of expertise
- Yes, if the issues before the Court relate to historical practices
- Only able to do reports for a set period post retirement e.g. 5 years and ideally only for cases during the period they were practising
- As long as they keep updated, retirees can be a font of knowledge and should not be dismissed. It takes some years to mature into this role and such individuals can be useful mentors.
- As long as the matters at hand dated from a time when they were active in the field
- But should show evidence of continuing CPD in their field
- This is a little black and white. I would suggest that a person should retire from expert witness work within a certain period from retirement. Retirement looks very different for different people so we may need to define that first.
- Provided they have the relevant expertise to carry out their instructions
- If a person is retired then I can see them becoming out of date very quickly
- I should allow a few years of post retirement practice coupled with up to date further training
- After a period of time possibly not, unless they can prove that they have remained current
- For a period of 3 years post-retirement provided annual appraisal is performed
- I am not sure how a retired professional in a clinical/practice related field would maintain their clinical/practice expertise for any length of time after retirement.
- I feel a period up to 3 years following retirement from clinical practice is not unreasonable, especially if proof is given about ongoing professional development
- Should show evidence of continuing competence, which is obtainable in a variety of ways.
- Should be able to give opinion on cases that occurred for a reasonable time after retirement - 2 years seems reasonable in my view.
- This would eliminate a bank of knowledge that brings many things to the world of expert witness
- This is fact dependent. In my area we are dealing with cases of exposure of 5 - 40 years ago. In such cases it is better to have experience from those times. Consequently, retired persons can make an effective contribution. For avoidance of doubt, I am not retired.
Some experts have left the NHS in their 50's and they are more than able to provide expert reports.

Depends on whether they’re still registered with HCPC, DBS, ICO & have insurance.

So long as they are able to demonstrate that they have kept up to date regarding their knowledge. However, I think there comes a time when if you have not been in clinical practice that you can no longer call yourself an expert in the field.

As long as they can demonstrate that they retain current knowledge.

But only so far as they are still aware of latest developments, standards, technology etc. Maybe a time limit post non practice should be set.

For a certain amount of time.

If they have fully retired and are not doing any kind of CPD activity then their credibility should be questioned. If they have (or are forced to) partly retired (due to stupid pensions tax) and are keeping abreast of regulations and clinical/technological advancements in their field, then their professional experience is likely to be invaluable for expert witness work.

Expertise will dwindle over time. A lag of cases from pre-retirement might be expected but continuing to appear as an expert 3/4 times a year 10 years after retirement is unprofessional.

Maybe for up to 3 years after retirement.

It depends on their experience and how long since retired.

It depends upon the area of expertise being opined on. If it is on a practice area the expert has no experience of, then yes.

‘No’ as in, they should be allowed.

Such people have a lot of expertise to offer and should not be excluded.

Depends. If they are up to date with CPD and in practice, this shouldn’t cause the courts problems.

Perhaps there is a tapering off period, depending on the specialism - retired professionals will still have a wealth of expertise.

I think this is dependent on the expertise and again if the expert has to pass a minimum test or standard to give evidence, the onus will be on the expert to maintain their status.

These people may have a lot of relevant experience.

As long as their CPD is in place they should be allowed.

These people may have a lot of relevant experience.

It would depend on if they could demonstrate a required level of competency/knowledge about techniques currently in use.

Depends what you mean by retired. With medicine, it’s simple - if you revalidate and keep on with satisfactory appraisal, no reason to stop giving an opinion. Up to the instructing lawyer to decide whether they want an expert who sees 10 patients a year or 1000....

If their knowledge is up to date.

My experience suggests that retirees might often be better placed to comment either because of greater experience of relevant practices/circumstances.

They should be allowed to practise as long as they have an interest in the field e.g. publishing, research.

Retired professionals still have knowledge and a level of expertise. Perhaps there needs to be a time limit after retirement, e.g. 2 or 5 years.

However, there should be a limit to how long they can do this.

It all depends on area of expertise and maintaining up to date practice.

Provided they are still knowledgeable and experienced within their specific area they can offer the appropriate service.

I think once you retire you rapidly lose sight of the real world that we work in. You can start to hold doctors to unreasonably high standards because you look back at your career with rose-tinted glasses.

I feel a short period after retiral or if they are maintaining appraisals and revalidation should be sufficient.

In my opinion they may be allowed up to 5 years after retirement.

I think the expert witness must be continuing to work professionally to act as an expert witness and this includes continuing professional development.

They should make it clear that they are retired but it shouldn’t disqualify them automatically.

Retired doctors have more time to do the best possible job as an expert.

There perhaps should be a time limit for breach of duty reporting, although this will depend on the procedure involved.
In my field, cases are often presented to me on events that happened 10+ years previous. A time when I was working in my field. However, some areas of expertise do require up to date knowledge and hands on experience, so should be chosen accordingly.

Expertise does not disappear the day you retire, but there may be reasonable limits of time when one can continue to work as an expert, providing evidence of CPD continues to be relevant.

But only for a defined time period if they are not maintaining competence.

Experts who have retired should be allowed to continue as long as they have sufficient CPD hours and evidence to support this.

After a period of time where they would have lost their expertise by not practising in the field.

Many find they have the time to do expert work and are not linked with the company they work for.

In my view they should be allowed to continue as long as their knowledge is up to date.

They should be able to demonstrate CPD.

Depends what ‘retired’ means...is that synonymous with no longer being on the GMC register?

Recently retired (within say 5-8 years) is fine, and these individuals have a wealth of experience and wisdom, and crucially the time to provide reports. After a period of time however, their utility wanes, but there may be exceptional cases of specific areas of very specialist knowledge where a long retired expert may still be useful.

But they should be able to demonstrate why they are fit to continue.

But they should demonstrate that they are maintaining their levels of knowledge.

Depending on length of retirement and proof of relevant ongoing interest in the field.

Potential that they no longer keep up to date with recent research.

Retired professionals should have to demonstrate that they are up to date with NEW and CURRENT practices. Essentially in medicine research moves so quickly so they would need to show their updating methods to qualify.

Depends on whether they have suitable and current expertise and maintain CPD.

They should be assessed for current knowledge.

Maybe a 5 year period post retirement would be ok, but beyond that I think expertise becomes outdated.

It would depend on the field of expertise and whether this was an area of change and new innovation in which someone who had retired would no longer be up to date or whether it was a field in which key issues did not change.

Only if they can demonstrate that they are still involved in their profession and knowledgeable in the subject.

I think each case should be assessed on its own merits. In certain circumstances, the most up to date knowledge may not be required and the experience of a retired expert may be more suited.

Expert witnesses need to be in practice so as to remain up to date and informed.

They must demonstrate current awareness of their specialty and up to date knowledge.

If they maintain currency in their expertise and the relevant expert law. Perhaps to a limit of 5 years.

They often deal with matters taking place during the time when they were in active employment.

In some cases such as brain damage caused by a difficult delivery, the case may be held back until the child is an adult to allow the effect of the injury to be assessed fully. The expert clinician needs to have known what custom and practice was in the profession more than 20 years before, so it is probable that he/she will be retired from medical practice.

I feel only those in active practice should be instructed.

From personal experience, I know a relatively young consultant who was demonstrated to be biased in Court. The retired expert in the same case was sensible, unbiased and knowledgeable. Many experts who retire from the NHS obtain Honorary positions to improve the appeal of their CVs.

An expert must be up to date and practising.

In surgical specialities, for medical negligence, their knowledge will be good for 5 years. For personal injury they should be good for 15 to 20 years as skill in interview and examination will be maintained with suitable CPD. Iso Anatomy does not change!

If they can show continued updating of knowledge.

 unless they are still working in some way in the capacity they have been selected for.

As long as those individuals have maintained their professional registration and do the appropriate
levels of CPD and are considered suitable then there shouldn't be an issue per se

• There is expertise in those who have retired. I have just given evidence in a case where I saw the claimant in 2013: I cannot stop assessing claimants 6 years ahead of my intended retirement
• Providing they have maintained their competencies and can prove that they are up to date (CPD evidence)
• I think that if they state within the report how long it is since they have worked in clinical practice it is then the solicitor’s decision as to whether or not their evidence would be sufficiently current.
• It depends on how long ago they retired and how much that topic has changed since they retired
• Professionals who have retired should not be allowed to continue to act as expert witnesses because their knowledge and expertise may well be out of date.
• Depends upon their field of expertise
• If NHS retired, provided they are still active privately clinically and /or supervisory in their field
• Providing their knowledge and skills are current and/or relevant to the case in question there is no reason they should not be able to act
• But depends on how specialist/rare their knowledge is and how long they have not been in practice
• In the insurance sector most employers will not permit employees to act as professional witnesses
• They should be allowed to continue for a finite period e.g. 5 years +/- or if evidence of CPD
• Those in work are not necessarily better. CPD will be important
• But evidence of remaining updated in their field would be mandatory.
• Any properly qualified forensic scientist who has retired from full-time work can maintain expertise in semi-retirement with a smaller quantity of work
• Depends what is meant by retirement
• Possibly 3 years on would be ok.
• Accountancy does not change but medical practice does
• They should comment only on matters occurring during the period when still in practice
• Some very able and skilled individuals have more time to work as expert witnesses after retiring from their primary employment.

• Retired professionals in practice at the time of the case are obviously appropriate experts. There should probably be a cut off, say, 10 years after retiring. Needs more scrutiny. There are some eminent experts making a valid contribution well beyond the 10 year mark
• Obviously unless they can prove they are keeping up with updates through training
• There should be a limit of time post retirement when someone can act as an expert witness
• Age can equate to wisdom - sometimes!
• Ridiculous to ignore experience. At least 5 years is reasonable
• In the case of public sector cases (military, fire service, civil servants, etc.) you need retired experts as serving experts (should) have loyalty to the crown. This is evident in serving personnel’s witness statements.
• Should be allowed so long as they can show that they stay up to date with research and practice
• Allowed to act for cases while they were still practising
• In low value claims retired professionals represent good value for money. In moderate value claims some retired experts add value to the claim when their opposite number is in current practice (diversity). In high value/stakes claims issues of proportionality do not apply. I would recommend that their role is limited to advising the solicitors about issues such as quality of the reports, where the instructing experts have missed material issues and in rare circumstances (historic cases).
• This would be an ageist action and the pool of experts would be the worse for loss of expertise and experience
• Providing they keep up with developments in the related laws.
• Retired professionals are not up to date with current practice
• Should only be recently retired, say 3 years maximum
• Conditionally: If they have been expert witnesses (actively) prior to retirement they deserve to continue. If, however, they are treating it as a new profession, I do not support their appointment as expert witnesses. After ‘complete and final’ retirement from the field of actual work, it is not proper for them to continue working as an expert witness for more than 3-5 years after said retirement. Depending on the field of expertise
• I am against the concept of a clinician retiring from clinical practice to follow a medico-legal career
alone - the hired gun. The feedback I have had is that retired clinicians have the expertise to understand how things were in the past and are therefore, in many ways better suited to providing an expert opinion than someone in current practice

- There may be cases where their opinion may not be trustworthy if they are not in practice and in those cases they should not be instructed
- But a competent and current expert is the key not their current work or employment status
- Retirement does not delete their knowledge nor the added benefit of extensive experience.
- Within 5 years of retirement to remain current
- As long as they keep up to date with their CPD for expert work and their industry
- Expertise is not always about being in active practice... lifelong experience matters
- Need to be up to date and current
- The expert may be up to date
- Double negative question
- However, if they have only retired recently, they could probably provide witness, perhaps within 3 years of retirement
- As long as they keep up-to-date with CPD etc and make all efforts to remain connected with those who are in practice in their field so as to remain up-to-date about service developments, people can work effectively beyond retirement from their “day job”
- Proviso - should have a licence to practise, a RO for revalidation and up to date with CPD in relevant area.
- If they have retired within 2 years of their expert report.
- But no longer than, say, 3 years from full retirement
- As they can demonstrate they are competent and current then they should be allowed to practice
- Not all experts are required to assess clinical negligence e.g. life expectancy without the negligence/when would the client have required a care home. This does not require up to date clinical knowledge - experts can also show that they have kept up to date by showing that they have maintained their College's CPD requirements. If a requirement is put in place, I would suggest 5 years post retirement but only for clinical negligence in certain specialties where it is necessary to have continued actually practising - in addition there may well be insufficient experts in some specialties who are still practising
- I still practice and am employed part time although retired
- While they remain current, perhaps for a further 3 years
- Not infrequently I come across so-called experts who haven't practised medicine in over 10 years giving opinions about things they have never come across!
- But for a limited period of time post retirement
- As long as keep up to date in their field of expertise
- Professionals who retired have long experience in specialty and usually more balanced views. Young witness may lack experience in his professional field, it comes with time and practice.
- Provided they maintain CPD
- Retired professionals can be an asset in this field. However, they can often be ignorant of the current practice within the NHS. It should be a careful selection by the solicitor depending on the case.
- They often have more experience than younger colleagues - but this will fade with time
- Depends on the definition of retirement
- Ok if within 3 - 5 years of retirement
- They must keep up to date, have regular appraisals and revalidation
- There should be a time limit/cut off of 5 years. Pending experience and proof of ongoing professional development
- Should be a tail off period e.g. 5 years
- As long as they maintain CPD I don't see the problem
- Depends on how long retired
- They make better expert witnesses
- They can carry on with the experience and continuing professional education
- Not sure as they are needed for historic cases for when they are in practice. I think this is fine as long as they do not put themselves forward for cases as an expert that happened after they retired
- I think they could continue for another 5 if they do not do any clinical work, for longer if they do occasional clinical work
- There certainly needs to be a time limit but being retired makes court attendance easier
- I am retired, and do not accept breach of duty work, but I can use my experience to advise on causation, and condition and prognosis
- I would say there should be a gap of no more than 5 years since retiring
• Just because they have retired doesn’t mean their expertise is invalid
• But they should demonstrate evidence of CPD and limit their scope to cases falling within their working life. Perhaps 5 years post retirement limit
• What, throw away decades of experience? If they are keeping up to date with their specialism they should be allowed to continue
• Should need to show ongoing CPD to keep up to date
• I think that if they show themselves to keep up with the appropriate CPD then they should be able to continue practising as expert witnesses. Look at the age of some of our judges!
• Once a certain period of time has elapsed they will not be up to date if not in the workplace
• A requirement to keep up to date is needed, otherwise a waste of talent and expertise will follow
• But probably time limited and definitely not in negligence cases
• Permissible for say 3-5 years post retirement, otherwise out of date?
• What does retired mean? I have retired from clinical practice but highly active in medico-legal practice
• Allowed to continue but only where relevant CPD is undertaken
• I am semi-retired, so my answer is biased. Seriously, I am not planning on working as an expert witness indefinitely.
• Many of the current working doctors do not have the forensic skills to prepare medical reports. With the new appraisal and revalidation, doctors will be aware of their skill base and the need to only work where they have the appropriate skill sets. A key issue is that doctors need to turn down work Where they do not have the skill set. With the appraisal system there is the opportunity for the appraiser to guide doctors in this area.
• As long as they keep up with current consensus and practices
• A time limit would be reasonable
• There should however be a requirement to keep up to date and show CPD
• It depends on whether the person is returning to work part-time after retirement and whether or not they keep up to date with CPD
• This could be unclear if a person semi-retires but remains active. I consider that an expert should be weighed on their CPD and experience, the former allowing for those who have long retired and might not be suitable to give evidence
• It depends on the case and whether their experience has direct relevance or not.
• Once retired you lose credibility and/or ability to stay up to date.
• Depends on advances in the sector - accountancy is fairly static, whereas medicine is not
• Retired individuals have a wealth of experience and knowledge. However, their opinion should be judged against any recent advances
• The negative in the question isn’t helpful here. I don’t think experience should be a bar. We welcome that of our judges of advanced years
• Provided they can demonstrate continuing expertise
• Within 5 years of retirement - you may lose a lot of expert witnesses who have the skills but don’t have time to commit when actively working
• Provided they are maintaining expertise they should be competent and professional experts
• Can give expert witness for the practice that occurred when they were practising
• Permissible for say 3 - 5 years post retirement, otherwise out of date?
• Should be time-limited and have to retain professional registration (e.g. GMC) with evidence of CPD
• Only as long as they keep skills/knowledge up to date - 1 - 3 years
• With the proviso that they only continue to work within their competence
• Yes, but not for more than 3 years. After that they may not be at the front of where their discipline is at
• Although they should be able to prove that they have continued to keep up to date with current practice etc.
• But there may be PII issues given experts’ exposure to negligence risks
• Retired professionals who keep up to date can be very useful witnesses
• Many experts would disappear resulting in a shortage of experienced experts
• As long as they undertake CPD and training
• There should be ongoing oversight of their CPD
• But they should be given some training
• As long as CPD is ongoing retirement shouldn’t stop someone being an expert witness.
• I’m retired! But as an old academic do keep up to date and psychiatry (despite what it says in papers) does not change that quickly.
• Depends on the area of expertise and other factors. Need guidance about criteria to be met or similar: e.g. someone might be retired but far more experienced than someone ‘in work’ newly qualified and lacking experience
• Expertise does not evaporate overnight, and recently retired professionals often have the time for very complex cases
• Recently retired professionals can still offer valid opinion.
• There must be a clear distinction between criminal and civil work. One size does not fit all categories and those who believe otherwise should be ashamed of themselves.
• But should not continue for ever, either
• Probably only for about 5 years post retirement
• To do so would exclude many very experienced clinicians who may not have had time to do much expert witness work when working
• There is a period following retirement (maybe 2 - 3 years) when experts are in a good position to act as experts
• As long as they demonstrate adequate continual professional development
• Provided that they continue to demonstrate appropriate expertise
• As long as they are up to date with changes/advances in their field
• For clinical skills perhaps 2 - 3 years post retirement. Non-clinical up to 5 years.
• There should be a limitation of say 5 - 7 years or a method of showing that the professional is keeping in touch with current practices
• They should still be completing CPD and maintaining registration in order to continue as an expert but not necessarily be employed in a practice
• It depends on if and how their knowledge and competency is kept relevantly refreshed
• Depends - if they have regular training/supervision and possibly competency assessments they should be allowed to practise
• As long as they attend regular training to update their knowledge about CPR rules
• Provided they maintain their membership of their professional body, undertake CPD and continue to have the necessary professional indemnity insurance.
• They have years of expertise and the time to sort major cases
• Retired professionals retain a wealth of experience that they do not lose when they leave practice
• Definitely. They have considerable knowledge and experience and often have more time to put into doing the job thoroughly (N.B. I have not retired!)
Appendix 4

Question 5: In May 2019, the Academy of Medical Royal Colleges published a guidance for healthcare professionals who act as expert witnesses. This guidance has been endorsed by the majority of healthcare professional organisations/bodies and their regulators. The guidance sets out the minimum standards and conduct expected of all healthcare professionals acting as expert witnesses in the UK.

Should all professional bodies/regulators provide clear guidance to their members who act as expert witnesses?

- Academy guidance is sufficient medical expert witnesses
- But it is a very crowded market so who decides which one professional body or regulator issues it?
- In principle, yes, but we should avoid a proliferation of different sets of advice. Professional bodies should be communicating the quite clear requirements already in existence
- The General Medical Council already does
- It may risk misinterpreting what’s required. The relevant procedure rules should be the ‘go to’ publication
- Bodies such as Bond Solon and the Academy of Experts have adequate guidance
- The Court selects experts, & areas of expertise, many of which operate beyond any regulatory body (e.g. the trial which depended on the testimony of an expert in string)
- All guidance is helpful especially if directed at your area of expertise
- Guidance is always needed
- However, the individual healthcare professionals have a duty to keep abreast of the requirements, conduct and minimum standards to act as an expert witness
- Categorically, yes
- Yes, this would help everybody, the witness, the solicitors, the judges, the claimants/defendants
- Yes but very disappointing that the Academy of Medical Royal Colleges did not refer to the Royal College of Occupational Therapists, who has produced standards for their members who work as expert witnesses
- Absolutely
- It would ensure that bodies care about the quality of their professionals
- It would be worth it. Doing some courses is always helpful
- However, the professional bodies will need to be brought up to speed first as many have no idea of what is required of an expert witness and in cases can bias the expert away from what the MoJ rules require.
- Nurses have to revalidate every 3 years to ensure they meet the required CPD hours etc. but they do not provided guidelines for expert witnesses
- But in my discipline I am not required to be a member of a professional body
- Healthcare experts are a large proportion of the total and there are some specific aspects of healthcare experts that are relevant, so this guidance was appropriate. It isn’t feasible for all organisations to do the same (some are small), and much of the guidance for experts is generic and not area-specific
- This aligns the giving of expert witness evidence to a regulatory body - such as GMC/NMC PIN number holders - having this arm of their work connected to a valid PIN membership to ensure accountability
- Not qualified to comment on how other professional groups work
- They should also encourage senior members of their profession to play an active role in giving evidence in court. Some professions actively discourage those who wish to act as an expert witness in their profession
- The problem is that different bodies are likely to set out different standards and they will see this as an opportunity to make money out of licensing requirements. The number of experts are likely to decline and costs of reports increase; alternatively, we will see increasing numbers of experts simply agree on a one-report-fits-all approach making the process of hiring experts pointless.
• The professional bodies are inappropriate bodies in Surgery and General Medicine. The appropriate guidance should come from legal bodies and EW organisations such as EWI and the Academy of Experts with training from such organisations as Bond Solon and others.
• The BPS have done this with the Family Justice Council for psychologists in family proceedings - equivalents should be done across the different courts and professionals
• Could be difficult, I work in the risk assessment industry, matters of law can be very subjective and be legally interpreted differently with both outcomes being right
• Yes, however professional bodies should not also suggest that those acting as advocates (for example, in the negotiation of a client’s case before litigation) must comply with the guidance intended for experts like the CAAV and RICS is beginning to
• If all colleges can agree there is no need for individual college statements
• No need for such an array of duplicated guidelines
• And follow up with CPD records up to date
• They should stick to clinical issues rather than endlessly offering guidance which is often to justify their existence in my view
• I suppose it depends upon the limits/standards imposed. Guidelines are very useful providing they do not over-restrict the experts’ duty to the Court. Perhaps opinion that falls outside the guidance limitations should be noted as such
• The current laws are not being followed, even the much tougher but similar CrimPR. We do not need more guidance, we need audits on expert reports and compliance on the current rules. I have written about the issues with the Paediatrician guidance ‘no controversial views’. The AMRC report has little substance and is one-size-fits-all i.e. wrong
• Ideally, however for some rare cases there may not be any ‘body’
• I hope that there are clear regulations for solicitors too - not devolving case management to paralegals solely for example
• As well as general guidance for all sectors
• The RICS publish the same for their members
• Not unless they understand the complexities of medico-legal work which I suspect they don’t
• Not all professions have professional bodies and even if they do there is no requirement for membership. Membership of a body such TAE is more relevant to experts
• Being an expert witness is also about being professional and understanding that when in Court you are representing that profession
• The May 2019 report is flawed in that it is stating that guidelines are the standard of care. This is wrong. If it was the standard of care you wouldn’t have to issue guidelines. Guidelines are aspirational, take time to become resourced and embedded in practice, are liable to change and are not necessarily applicable to all patients. See SIGN waiver in front of all their guidelines
• Seems a reasonable minimum standard
• Not all fields have a professional body. There should be general guidance to all experts, and the instructing solicitor should check that the expert understands that guidance.
• They live in cloud cuckoo land…more specialist advice required
• It will help to identify situations specific to the discipline concerned which may have been missed.
• The guidance was excellent.
• RICS already does
• Most do
• Not all professional bodies get involved with expert activities of their members. Not all professional bodies have experience in this area. It is an individual who is responsible for their activities. This is where the Academy of Experts or EWI can be useful
• In an ideal world. However, it might be that not all are well placed to offer this advice. Bond Solon could fill in any shortfalls, perhaps?
• RICS already does
• The RICS does and so should all Professional Institutions where their members are considered to be Chartered in their field of expertise.
• However... just guidance. Experts should be able to function independent of bodies which have vested interests in the outcome of cases.
• Guidance useful but not mandatory. The big mistake was to assume that experts covered all jurisdictions. I stick only to civil injury, for example
• The expert has an obligation to self-inform
• Providing high quality expert opinion for the courts is equally as important as providing high quality clinical care. Guidance and standards are just as essential in medico-legal practice as they are clinical practice
Appendix 5

Question 6: Within the new guidance “Acting as an expert or it prescribes that all healthcare professionals who act as expert witnesses should now be required to attend specific expert witness training (relevant law and procedure, expert report writing and court training) and to keep up to date on an annual basis. Furthermore, this specific expert witness training should form part of their CPD, annual appraisals and revalidation.

Should expert witness training form part of the annual appraisal of all professionals acting as expert witnesses?

- Expert witness work is usually done outside of NHS roles and should be kept separate from this. There are limited options for appraisals within private practice
- Probably would be a good thing, though difficult to make compulsory
- I think so - we have to think about the potential consequences of opinion we provide and it shouldn’t matter what profession that is, the highest quality should be our aim
- Need to be careful. Apparently some jurisdictions consider (eg Bond Solon) training to be coaching
- This depends on the degree of experience particularly if the expert has retired. Otherwise the lawyers will not be able to access surgeons who have a great deal of experience
- Provided attending Bond Solon conference counts
- This does seem desirable. However, there are many aspects to many roles that also could require the same level of evidence of CPD and the ability to appraise sub expertise can become complex
- Some experts may provide training for others
- but requirements must be sufficiently flexible to apply across different disciplines, some much less regulated than others, and different employment situations (Public/private sectors, large/small organisations and self employed)
- This would be part of appraisal and governance
- Practitioners in independent practice don’t have annual appraisals, although are professionally required to undertake regular supervision and keep a contemporaneous record of CPD.
- The appraisal process for doctors already includes a review of the training they undertake relevant to maintaining their skills. Expert witness forms part of this but other aspects of maintaining your skills are equally valid, such as peer review of your work and case-based discussions
- The Bond Solon expert witness training was possibly the best training I have undertaken in 34 years in this profession.
- Yes, since appraisal is meant to cover the full range of the doctor’s work
- I qualified Cardiff University Bond Solon (CUBS) Expert Witness Certificate in 2002
- The lawyers should appoint according to the requirements of the dispute, not a catch-all generalist training course
- I don’t think it should be mandatory but a good idea to make it readily available and part of validation processes
- Keeps up standards to a high level
- They should have training but not necessarily updated every year - who would carry out appraisals?
- Not annual but frequent
- Training is essential in my opinion. Ongoing updates are also important and therefore revalidation has a role
- Not necessarily annual, but regular updates would be desirable
- If they are subject to annual appraisals
- In theory but I am not happy with appraisals in the first place
• Biannual maximum, things don’t change so rapidly to require annual update
• Not all experts are employees where there is an annual appraisal system. Many are self employed. In such cases robust independent clinical/professional supervision could provide the same benefits as annual appraisal
• Experts should be able to demonstrate that they have been keeping up to date
• This is a complex issue, and your choice of question wording illustrates some of the problems. For example, for a clinically retired doctor, there are no processes or accreditation bodies available to provide ‘appraisals and revalidation’, at least in terms of those words as meant in clinical medicine. n.b. the Medical Protection Society does not require experts to be clinically revalidated and to have a licence to practise in order to do records-based reports and to act as an expert in that way. So, appropriate training, yes, but ‘annual appraisal and revalidation’ is demonstrably not appropriate for all medical experts
• No, all professional experts should undergo training. Professional experts should have training, which should be updated regularly but not on an annual basis. I would suggest updates every 3 to 5 years.
• You’ve put psychology under medical: I’m an educational psychologist, self employed so this could be difficult but BPS do offer guidance
• Absolutely 100%
• Yes, relevant training is absolutely necessary. However, duration and frequency is a matter for discussion and negotiation. Whether the training (after an initial full course) needs to be annual is also debatable. Perhaps stipulate a certain number of hours (e.g. 15) when being trained for first time, and thereafter a lesser number of hours (e.g. 2 hours per year or 10 hours in 5 years).
• Annual training is too onerous if it requires a large time input
• Not sure that this would be possible
• Training should be mandatory but not on an annual basis
• Yes, but this training is very rare (apart from Bond Solon courses)
• Not annual but perhaps per 5 years, it would be more relevant for their annual appraisal to be on their area of specialism
• To the best of my knowledge expert witnesses are relevant because of their knowledge and experience in their field of expertise, which is not necessarily being an expert witness
• It has to be proportionate
• Should be a requirement but updating on an annual basis would prove very costly. Perhaps biannually or Bond Solon (and other similar organisations) could provide lower-cost refresher courses
• Not annually but periodically
• There is too much appraisal and tick box certification. The court wants an honest and un-fashioned opinion
• The role has many facets and requires structured training to avoid mistakes or misunderstandings by professionals
• Not a bad idea
• In my opinion it should be renewed every 3 years
• All experts must take part in assessment and appraisal of their work
• The reasons for my saying ‘no’ to this question is that many experts work for themselves and not large companies that can carry out annual appraisals. Also, the cost of training is quite expensive and can take up quite a bit of time of an expert’s time
• Annually may be a bit excessive. Every three years should be the mandatory period with additional reviews as and when needed.
• This is expensive to attend. Organisations don’t generally fund. Self employed people would struggle to make it viable to pay for training in relation to the income associated with providing the services
• But not necessarily annually
• I am not sure who would appraise me if I am not required to be a member of a professional body
• It should be discussed when relevant, but the design of appraisals is poor, and often becomes a tick box process. Training is not required every year, but it should be included in the appraisal particularly at the start and any ongoing training included (I do this with my appraiser). The issue is that most appraisers have no idea what is required for expert witnesses, and so are not in a position to determine if the training is appropriate/sufficient, nor to act on it if not.
• Appraisal should cover the whole range of a professional’s practice
• It could prevent a ‘specialist’ who seldom gives evidence being available to the Courts
• The role and potential impact of expert witness statements should be policed
• Again it depends on the field of expertise and whether or not there is the availability of training
• Annually seems excessive. I believe every 2 - 3 years would suffice.
• The law, like any other professional field continues to change. An expert witness is in effect working in both professions and so should undertake CPD in both
• I include all my expert witness training/CPD in my appraisal
• Expert witness work is separate from the day to day professional work and therefore not part of an annual appraisal
• Appraisal is intended to encompass your whole practice. Not all medical appraisers understand the role of an expert witness, though.
• Absolutely
• No, I think this crosses the line towards encouraging the creation of a league of “professional experts”.
• Experts don’t need ANNUAL training but they do need initial training followed by ongoing CPD
• I’m worried this will just be a gravy train for providers with no guarantee of the quality of training provided and attendance on such a course does not equal competence
• Some professionals will appear as expert witnesses very occasionally and will need to take steps to maintain and update their knowledge; for others working as an expert to the justice system is their main activity and that will maintain their expertise.
• Formal annual training seems excessive. However, experts should be expected to be able to provide evidence of appropriate CPD.
• I agree with the need for expert witnesses to regularly have expert witness training but I don’t think this is necessary every 12 months
• No, clearly not. Experts can undertake their own continuing professional development and keep up to date with relevant developments without attending costly and time-consuming training courses in this area. Their ‘CPD’ time is likely to be better spent focusing upon their area of primary expertise
• But don’t set the minimum annual (or across 2 years) CPD too high. Once an expert has learnt the rules they are not going to forget those after 12 months.
• No need to be too proscriptive

• I think that experts whose expert role is not their main career need to be trained by their employing authority. For some experts, such as myself, all my documents/reports are subject to peer and quality review. I attend annual briefings on the relevant law, procedure and court practices. Concerning the question, should healthcare professional receive added training and guidance? Yes. Should ALL professionals? Not so sure. Not everyone receives an annual appraisal or is otherwise employed.
• But needs to cover all jurisdictions e.g Scotland where for example CPR do not apply
• If it is included as a response to detailed audits on reports. The training should tackle problems, not be general. I recommend 1% of reports have detailed audit looking at compliance with CPR35, the quality of detail and recommendations. Minimum three reports audited a year
• Without a shadow of doubt, essential
• This should be a 5 yearly activity as is revalidation in the medical field. Indeed there are few expert witnesses who are able to comfortably and confidently do such appraisal. Making it yearly can render the function prohibitively expensive.
• I am certain for this now. Had I attended a court familiarisation course before my disastrous court appearance I would have avoided much of the criticism that was directed at me
• There needs to be clarity around what the above statements actually mean, especially for those who have been practising in this field for a long time
• Physicians who have retired from active clinical practice don’t require annual clinical appraisal.
• Appraisal is said to encompass one’s "whole practice"
• Who will do the appraisal? Keep up to date - yes
• Or it should be demonstrated through portfolio learning with reflection?
• Not all professionals do anything apart from medico-legal work and are not involved in any appraisal process.
• And there should be organisations or expert to appraise the experts
• I can no longer get an annual appraisal as I have retired from clinical practice - perhaps there should be an appraisal for retired clinicians to check that they have kept up with both their clincal as well as their medico-legal knowledge
• But should not be too prescriptive
• See earlier comment. This is largely irrelevant
• Annual updating is unnecessarily frequent - 5 yearly is ok
• This is second tier activity and should not be related to professional activities and developments.
• The word ‘training’ has wide connotations and could include observing, supervision etc
• It depends. If the professionals regularly act as experts (e.g. damage assessment) then annual training is not needed. If the professional only acts as an expert occasionally, then regular training would be useful.
• But fees should be tax deductible
• Attendance on a course is no proof of learning. Appraisal is a flawed approach to supporting development. The comments made above about professional bodies apply here as well. A professional in any discipline as part of being a professional should engage in self reflection and continuously take action to improve their practice.
• A feedback form from solicitors would be more useful. We are already over regulated and adding another chore to the appraisal would not be welcome
• Appraisal by all means, but training is often a misnomer and the available training often poor
• Annually is too frequent. About every five years would do.
• There are many new options to maintain skills and would not like having only specific training
• A money making non exercise
• Annual training as an expert witness may not be necessary but keeping up to date is important and can be done via expert witness institutions and registers
• Shouldn’t need annual training. Should do CPD each year though
• “Required to attend ... and keep up to date on an annual basis” is ambiguous. Certainly should be required to keep up to date, less sure that annual attendance should be mandated
• It will help to raise the standard of reports and oral evidence
• But it doesn’t have to be from scratch and can be ‘update’ courses, and just as important are clinical courses.
• Most definitely
• Depends how expert the expert is. Not learned a great deal from the conferences I have attended but more junior experts no doubt felt different
• I am aware of some experts who act entirely appropriately in their role but have not attended any expert witness training. However, such a requirement could form part of the experts CPD
• This is simply a charter for training organisations to charge money for training whether appropriate of not
• Not all professionals have annual revalidation appraisals
• Most reliable way is to ensure the basic requirements are met
• Would Professor Sir Roy Meadows’ evidence have been any different if he had? I suspect not
• Annual seems a little unnecessary - would every 3 years be more appropriate - these courses are expensive
• Most definitely
• I specifically discuss my medico-legal practice as part of my annual appraisal
• Such a move will create “Professional Experts” and discourage those actively undertaking their field of expertise on a daily basis from becoming expert witnesses.
• Mandatory CPD
• If you give evidence regularly and get relevant CPD and keep up to date you do not necessarily need this training every year
• It should be already and it is the responsibility of the doctor’s appraiser to ensure that the appraisee has done sufficient CPD to cover all roles requiring GMC registration
• Depends on experience, volume of expert work, number of court appearances and size of company
• I think annual training would be excessive, but CPD related to the role is appropriate
• Yes, in that it raises awareness of the need for professional conduct generally and that can affect how professionals behave as their norm, also how organisations develop best practice
• Within Doctors’ appraisals, the individual has to declare their ‘scope of work’ and then be appraised against it
• Not necessarily annual but regular
• In stating yes, I mean in principle. Medico-legal training should not detract from maintaining essential clinical knowledge and skills and there is only a limited amount of study leave allowed in the NHS. I would suggest that it is important to have included a programme of medico-legal training/ update within (say) any three-year or five-year
period. If a specific type of full training course were to be required, it would be essential to condense it down to a couple of days. Report writing courses are interesting first time around and rather dull to say the least thereafter. Many experts never (or very rarely) seem to get near the courtroom so why would they want to do a training course every X years. I think there is much that needs to be worked out if some form of mandatory training is to be introduced.
Appendix 6

Question 10: Since the introduction of the Civil Procedures Rules in 1999, many experts are still being criticised for being advocates rather than independent experts – acting as a “hired gun”. In the last 12 months, have you come across an expert that you consider to be a “hired gun”?

- Report then testimony that doesn’t make scientific sense, but is taken as credible because of their status.
- An expert witness was found to have misled the Court in a trial involving tachograph route tracing evidence. He was both incompetent as well as prepared to manipulate the evidence to suit his and the defendant’s cause.
- A psychiatrist in one case who seemed to ignore the evidence and a psychologist in another who it seemed had been hired simply to tear my report apart.
- I have come across reports where large sections are clearly ‘cut and paste’ from a tried and tested formula, rather than being specific to each individual case.
- My own experience is that this seems less common that one or two decades ago.
- Experts averring that a claimant (in his thirties) who lifted a heavy object and who has no objective evidence of any physical injury became incontinent and impotent.
- In criminal fitness to plead cases.
- Not been to Court or read an expert report in the last 12 months.
- I’ve found that it’s common to be faced with an expert report which is obviously biased; I feel that some experts include only findings beneficial to their client and don’t place them in the proper and fair context, thus acting a bit like a ‘hired gun’.
- Physiotherapy expert when doing joint statement refused to move from the line that the physiotherapist had done nothing wrong and was not willing to discuss it.
- Omission of highly influential lifestyle factors that severely affected oral health ignored in a report of a claimant suing a dentist.
- Where data does not show brain injury writing a report trying to explain that away when instructed by the claimant solicitors and vice versa when instructed by the defendant. I have seen both in the last 12 months.
- Providing a report which is clearly biased towards the party instructing.
- He was obviously biased to the motor group and has represented them numerous times with other experts I know having the same opinion of him.
- Frequently. In the last 3 months, I have experienced this 1 - 2 times a month.
- His opinion seemed to change between 1st discussion of experts & second later after review & looked as if it had come from a conference with counsel.
- One doctor in my field who is recognised for this and bends the data and science - a nightmare.
- We have seen several cases for plaintiffs who have had previous accidents within 12 months of the subject incident. We have been provided with the “experts” prognosis on the first incident, which is 14 - 18 months after the subject incident. When the plaintiffs were seen they indicated that all their symptoms have cleared in 4 to 5 months and therefore they had no pain 4 to 5 months before the second incident. There is an obvious ethical problem involving both the doctors concerned and the instructing solicitor.
- To some degree, yes.
- Not in the last 12 months but I have come across these.
- A couple of psychiatrists I have come across only seem to work for defence. In my experience about 95% of instructions in PI come from claimant.
- I cannot provide an example here but it is in the public domain if you would like further information.
- Elderly, clubbable, gent who found favour with the judge, who was spouting complete nonsense!
- An expert who was instructed by my own regulatory body was in my opinion acting in a highly partial way.
- Very rarely but one ‘dyslexia’ expert springs to mind. Supported a family’s choice of school but had not visited/liaised with the school and had no tangible evidence to support.
• Those who act ‘generically’ for instance within the UOF the expertise does not always transfer between agencies, police - prison for instance.

• A GP expert who only does claimant work and tends to hold the doctors to an unreasonably high standard

• In my speciality, one expert who reports mainly for claimants, and appears to be far from neutral

• The gentleman is quite well known in the profession and advertises widely. He issued his report and when we met at an expert’s meeting he agreed with every point I made even though it effectively ‘rubbed’ his own report. We signed the joint statement agreeing with my findings but a month later he wished to retract his statement, at which point the case against my client was thrown out by the court.

• I have been accused of being ‘advocatorial’ on a previous past case, when I felt I was being considered in my opinion. However, the defense counsel, in my opinion, lead the judge to consider my evidence as advocatorial and despite my request to the claimant’s counsel went unchallenged. Yet there was little said in the cross examination that was not in my report. This went unchallenged by the defence pre trial and was promoted by the claimant’s Counsel. So again is it an interpretation by judges or a promotion, by one side or the other, to debunk an expert’s report and opinion?

• The expert appointed by the defence was clearly an advocate for the defence and was extremely defensive in regard to likely scenarios that could potentially occurred i.e. not impartial

• Not done enough cases yet

• They are even more prevalent in criminal ‘fitness for trial’ cases than civil ones. My recent experience included a well known consultant in my specialty in a high profile case stating on oath why the defendant would not be fit for trial, when it is inconceivable that he genuinely believed this, or else his high profile career has been a sham and his medical knowledge was appalling (I suspect he was simply lying to order...)

• A forensic dentist who gave biased evidence without understanding the dangers of bite mark evidence. The jury rejected her evidence

• Some routinely used by defendant insurers who over-interprets past medical history and who is selective in the evidence they report on

• There is a renowned toxicologist who will write unbalanced reports in favour of whoever is paying (for one thousand euros). He relies on his name having greater sway than actual findings

• The expert does not need to act as an advocate to be a hired gun. Many experts are selected on the basis of evidence they have given in other trials which will be helpful to the party who wishes to hire him/her.

• Aggressive defendant misquoting published paper

• Drug charities are the worst!!

• Reinforcing the claim of their solicitor

• This can occur when each of 2 experts in a dispute are given different briefs and differing papers

• Selective citing of medical literature

• Complete disregard of the highly probable natural progression of pre-existing pathology with attribution of symptoms and pathology to a minor and trivial accident.

• Opposing surveyor would not agree a schedule of findings of fact and tried all the time to alter the wording to reduce the text and therefore minimise the liability of his client

• Hired guns should go on a black list. In civil litigation I have sometimes been shocked that the expert truly believes his own report. A pity I am not allowed to say so in court

• I regularly am on opposing side of a company who formulate many of their reports to support those instructing them

• There are plenty of non objective experts. To name them in this survey would not be ethical

• Not in England

• There are two aspects to this problem, the solicitor who manipulates the expert (by failing to give material evidence) and those who pride themselves on giving long prognoses. The first are unwitting and in general struggle to stand up to their instructing party, the second have unusual views but do not offer ranges of opinion and justify their approach by selective reading of poor quality evidence.

• Dr Chris Jenner case

• The expert in my case ‘performed’ as the court expected. They had been out of clinical practice for over a decade and made statements under oath about clinical matters that I considered to be inaccurate. In my case the judge preferred evidence based on ‘I remember a case once’ rather that clinical audit. Something is wrong here

• My opposite expert accepted the values claimed in a construction arbitration without carrying out the required checks and was found out during cross examination
• A non stroke physician giving expert opinion on a stroke patient
• One particular example springs to mind. His own barrister referred to him as a ‘bloody lunatic’
• Prefer not to say. However, at joint discussion there was considerable attempts to coerce me to change my opinions
• One clear example of a psychologist, paid for by a family, whose opinion was an insult to common sense
• In the case of NHS employees where they represent their service rather than their own clinical decisions
• This expert was not understanding of their role as they were new to the role and seemed not to have any training
• Biased opinion
• One case - an expert who inflated the joint discussion and report to such an extent that the claimant dropped a reasonable case
• Perhaps it was simply a difference of opinion though
• My opposite number admitted he was being led by his instructing solicitor in one case...he was oblivious of the wrong!
• One persistent offender
• In my experience it has involved NMC and CQC related cases and have been blatantly obvious that the expert witness was biased toward the regulators involved
• An expert effectively questioned the credibility of a witness account, to which the judge took great exception as this was well outside the expert’s remit
• Although in the last two years, I have
• I have come across experts with very rigid and partisan opinions
• Small number of experts who I can predict what their care regimes and costs will be. Always maximum costs regardless of the claimant’s disability
• Several
• Opposing engineer introducing irrelevant statistics in an attempt to support his client’s position.
• A excessively long prognosis in personal injury cases and attributing symptoms due to an accident after onset of unreasonably long time
• Expert clearly ‘led by the nose’ by solicitors/litigant clearly against their own evidence
• Creation of a biased employment and earnings report

• Not so much “hired gun” but too partial in favour of their client
• I have come across experts who have deliberately misrepresented facts and deliberately lied under oath
• An expert - not registered with their industry governing body - the HCPC - giving an opinion that is not based on any scientific or research evidence
• The CPS regularly instruct an expert in my field who invariably concurs with the prosecution case
• A psychology report where PTSD was diagnosed without much evidence/consideration of the whole case
• Less and less. However, there are still some dinosaurs out there.
Appendix 7

**Question 11:** In the last 12 months, have you been asked or felt pressurised to change your report, by an instructing party, in a way that damages your impartiality?

- There have been requests for change with which I was uncomfortable, but no pressure to include them
- By a solicitor who gave me specific phrases they wanted me to use in my report to support their case. Of course I refused
- But I advised that I was not prepared to change the original report as I was confident the contents were accurate
- I was asked to reconsider my diagnosis in a PI case months and months after submitting the report. The claimant had apparently done some reading about PTSD and decided that she had this. I refused to reconsider my diagnosis.
- Asked to remove comment on causation
- I refused and wrote back to articulate my disappointment in the request to amend my report
- I have been asked to include facts which were not discussed with client at assessment
- Claimant case and I did not feel comfortable with the legal arguments
- Omission of facts I thought relevant to avoid impartiality
- Not exactly this - but I was asked to discontinue a report I was writing because it became clear that my opinion was not in support of the instructing solicitors client. They went to another expert
- I am adamant about this and have refused to defer to another professional over an issue where I have expertise, also refused to add in comment on area where I do not consider I have expertise. I was trained to be independent and impartial long ago before I did expert work.
- Currently I am doing a case for lawyers in Far East who have asked for a refund if I don’t change my view - and who have actually rewritten my opinion section!! I have threatened to report them to their regulator
- I have absolutely refused. With 2 major companies they stopped instructing me for a short period of time but then returned and know better than to ask again!
- In the last 24 months - instructing party were not happy to accept my recommendations
- Actually not in the last 12 months but I have been so pressurised
- IP telling me that they might not be able to recover my costs if I did not amend my report to make it more helpful to their client
- Need to stick to your guns on the basis that you have to believe what is in your report. I’m open to discussion but if I don’t agree I say so and have on several occasions
- Stopped receiving instructions as I refused
- I have been asked to say things that I am uncomfortable with, but I don’t agree or comply and I am very confident about establishing clear boundaries with instructing counsel. I think they get it when explained clearly
- Not by a legal representative, but by a parent
- But I have in the past and the fees agreed have not been paid. The agencies controlling medico-legal practice often pay a pittance and that detracts from provision of quality reports. Missing information is an ongoing problem in case histories
- I’ve never been pressured to change my view by the solicitor
- Solicitors wanting to ‘strengthen’ my opinion when it would be to a claimant’s advantage, by changing/adding to the wording
- A well-known barrister asked me to change my report on the basis that it made his client look silly. I pointed out that I was not prepared to do so as in my opinion the client had lied. The net result was that my services were no longer required and my last invoice was not paid.
- Not that uncommon
- I was asked to change it by an instructing solicitor but I refused on the grounds that I would not be impartial.
- I have been asked to but did not amend the report
- Only in a mild way - several subsequent questions along the lines of “wouldn’t it be negligent if...” or “what about” when my initial report has not supported the claimant’s case they would have liked
to bring. They receive a straightforward response
to the questions, and my opinion/report has yet to
be altered
• Mostly just light pressure that can be rebuffed
• I have attended the training to “qualify” as an expert
  witness and have not/will not be undertaking any
  expert witness work/reports advisory capacity
  until I am adequately qualified and hold the Cardiff
  Certificate in Expert Witness. I have one final day to
  attend and await results before I work in this field
• I refused to change the report, this behaviour is
  fairly common
• I would not change it anyway. My duty is to the court
• Not so much asked but asked to consider certain
  aspects of a dispute
• Amendment of report requested, to “cover up” an
  initially inaccurate history
• I would never allow this - I do sometimes allow a
  change of format, when no impartiality is affected
• It’s rare though.
• Frequently - it is getting worse and the solicitors
  are happy to refuse requests for directions under
  CPR35.14. MedCo has made the situation worse as
  they side with the solicitor. After the Dr Zafar case I
  was sent a ‘claimant statement’ that said the claimant
  was injured for 8 months not 2. I did not amend the
  report. Mainly solicitors ask for previous accidents to
  be included which the claimant had forgotten
• Litigants in person are the biggest culprit
• Dr Chris Jenner case
• Interestingly by the same firm that successfully
  defended the case I was criticised in. But, as soon as
  I have I steered away from their pressure they have
  back down and accepted my view/opinion
• Patient stated they were getting better and were
  happy with function. Email from solicitor saying
  claimant wasn’t in a position to say they were getting
  better and had been in pain ever since. The opposite
to what the claimant had told me.
• to change life expectancy calculation from period
  to cohort life expectancy in order to give a longer
  life expectancy
• Police keen to see my conclusions more certain than
  they were
• Barrister implied that I wouldn’t be paid for the report
  as I didn’t offer a diagnosis
• But only once
• A solicitor requested I misquote a member of
  school staff
• Not currently applicable
• Asked more than once, but consistently refused…
  pressure?
• If I am asked to take a partial view I refuse, and that
  has always been respected
• In my experience, the request usually reflects lack of
  understanding of the case. It’s my job to explain it
• I have found solicitors often grateful for adverse
  reports, particularly when they knew their case
  would be lost
• Instructions to limit scope of report to avoid criticism
• And I would not be influenced, never have
• In an alleged clinical negligence case I had written
  a report finding no causative breach of duty. The
  instructing solicitor (for the claimant) wrote back
  eventually saying that she had discussed the case
  with an in-house medical adviser and set out several
  points to which a response was required. I felt that
  there was some pressure to identify breach of duty
• Reasonably often
• Never
• I would not be influenced, never have.
• Especially on work-related injuries: I have been
  essentially blackballed by one solicitor or failing to
  agree with one of their claimants
• Include symptoms not described at assessment, give
  longer prognosis
• I make it clear from inception that I will not permit or
  succumb to such pressure
• Asked to alter the duration period I gave - I was told
  the claimant had not understood the question. When I
  altered the report to add the new information and gave
  the correspondence details of where the info came
  from, I was asked to remove reference to the solicitor’s
  request; so basically make it look like the claimant
  had given me this different information at the time of
  assessment. I refused. Solicitor was very unhappy
• Too little time to re-examine a claimant before a legal
  pre-settlement meeting.
• I have been asked, but not pressured. They accepted
  my response.
• Asked to add or remove information
Appendix 8

Question 12: Have you come across experts who profess expertise in an area in which either they are not qualified or does not warrant expertise?

- An expert in tachograph route trace evidence
- An anaesthetist who had never spent a single day working in either prehospital care or an emergency department feeling they had the expertise to comment on both.
- Not all GPs are experts in muscle-skeletal disorders such as those suffered in RTA
- I have come across an expert who described discussion with a peer group about what constituted being an expert in a particular specialism within collision reconstruction who states that the group concluded it was simply having done lots of expert witness reports in cases of that type. There did not appear to be consideration of the need to be an expert in case number 1 or of the fact that you could do lots of cases and have them all wrong if you had no other expertise outside of such cases.
- Usually older generalist out of date, and more academic.
- Not personally, but I keep hearing about this happening.
- Usually it is that qualifications / experience is out of date / historic and has not been kept up to date with recent practice
- Specialist surgeons, e.g. breast surgeons, giving expert opinion on acute general surgical cases
- In some specialised areas of nursing practice; the area of practice may form part of everyday nursing practice and hence nurses will have a basic understanding but as an expert witness I would expect a greater depth of knowledge and experience than expected from standard nursing practice
- Acting outside their area of expertise as described in their CV.
- I have been challenged on issues concerning a client’s mental health by a medical doctor who does not have expertise in this matter
- A consultant specialising in glaucoma who gave an opinion about a complex periocular tumour case
- Food expert commenting on medical symptoms of gastroenteritis illness in adults and child
- Psychiatrists who give opinions outside of their medical training relating to psychological sciences
- Common in my area of expertise
- Young experts not long qualified in the profession and/or not sufficiently familiar with the area of expertise
- Psychiatrists stating people have no cognitive impairment when they haven’t formally tested or referred to neuropsychologist
- Writing reports about individuals with a disorder of consciousness and clearly never having worked in this field. Dismissing a recommendation in another expert’s report because they had not heard of that profession… because they had no experience in the area.
- 10 years post retirement from clinical practice and giving opinions of surgical technique, which the “expert” never practised.
- I had to redo a report after a so-called expert had completed
- Speech and Language Therapist instructed as a care expert
- I have come across engineers acting as “occupational hygiene” and “noise exposure” experts without having any real world expertise, but only expertise of it from expert witness work
- There are psychologists professing to be “educational” when they are only registered as “clinical”
- A cardiologist who opines on depression and on other fields other than his own
- Many surgeons think they know about X-rays without acknowledging the expertise that a radiologist provides
- An archaeologist who professed to be a forensic archaeologist, the weight of evidence is significantly different in civil and criminal case, a fundamental fact not understood and abused by a ‘hired gun’
- Experts giving opinions in rape cases’ genital findings when they do not examine sexual assault victims
- Nurses providing opinion from a different area of practice of their own registration
- ‘Experts’ with no knowledge of working within the prison estate
• An expert who is an academic doctor reporting on front-line treatment i.e. A&E when the expert does not have up-to-date experience on the front line, and the Court did not pick up on this.
• Recommending software inappropriately
• In 15 years as acting as an EW, it was inevitable.
• Complex ankle case done by knee surgeon who had not done trauma for 20 years
• A doctor who goes outside of their field of experience
• Many medical experts concluding exposure to excessive noise levels without assessing engineering evidence or calculating noise levels and long term exposure.
• As above. Not done enough yet
• Nurses within wound healing who may have worked within the area or in education within the field but do not hold any qualifications specific to the field
• Trichologist proclaiming detailed toxicology knowledge
• General orthopaedic surgeons claiming expert knowledge in a sub specialty
• It makes life difficult when trying to get agreement on narrowing the issues, because they have often taken positions which are not supported by the evidence
• A turf expert who professed expertise in a sport related accident
• R v Delton Galloway due for trial at Ventral Crown Court beginning 1st October 2019
• Sometimes as a case develops, the necessary expertise shifts and one finds oneself discussing rare conditions rather than the common condition that your expertise covers
• It is not uncommon in the risk assessment sector
• Yes, I come across solicitors on a weekly basis who risk hundreds of thousands of pounds of their client's money by professing to have the expertise to act in instances where they are woefully out of their depth.
• Mainly in risk assessment by experts who haven't worked in the forensic field and may be less rigorous in how they assess risk
• Physiotherapists who give psychological opinion
• A large number of people claim to be forensic handwriting experts when their only training is based on graphology which is not a sound basis for forensic handwriting comparison.
• Not in the last twelve months.
• A surveyor advancing a legal opinion
• Lots of pathologists appear willing to give evidence in clinical medicine.
• Pain experts straying in to psychiatry
• Main issue in my experience is orthopaedics and physios documenting psychological injuries, performing psychological examinations, assessing psychological records and making psychological recommendations rather than either declining the instruction or suggesting that a GP expert reviews the medical records
• Dr Chris Jenner case
• Orthopaedic surgeon(hip) being expert for spine surgery
• Physiotherapist giving opinion on prognosis based on MRI spine
• Many orthopaedic surgeons are happy to express views on sub-specialities in which they do not practice
• There are many people who claim to be experts without the sufficient training or experience or even having assisted an expert. An opposing expert had never worked (or trained) as a quantity surveyor yet attempted to carry out the duties of a QS (final account, measurement) during his role as the expert
• People who are not disabled who claim to understand disability and the needs of disabled people without consulting with them
• General orthopaedic surgeons giving a subspecialist opinion
• Frequently
• An orthopaedic surgeon opining on emergency medicine
• Gynaecologists who haven't had any role in intrapartum obstetrics for many years, giving expert opinion on things they haven't come across for many years
• General orthopods in sub-speciality work
• Partial qualification in specific fields rather than completing an entire degree with evidence of qualification
• Especially in the area of autism assessment
• Reports written critiquing EHCPs/ social care reports without a professional standpoint
• Psychologists drifting into more medical areas
• Consultants giving opinion on general practice
• A doctor discussing a coil case when he was very unlikely to have put one in for many years
• Typically it is an orthopaedic surgeon opining in the field of Emergency Medicine
• But I have been aware of reports including other people’s work, which has not been declared in the report.
• Some surveyors are very much like a GP.....without specialisation.
• Often psychologists profess expertise in diagnosis of mental illness
• Used by MPS
• I work as an independent social worker and have been required to redo assessments done by other ISW that have not been good enough
• Relating to regulatory cases
• I have met experts who are exceptionally experienced in their field, but have over-extended their expertise to provide scientifically questionable information to a court.
• A psychologist who professed expertise with children, when in fact her area of expertise was with adults
• A vascular surgeon profressing expertise in stroke and epilepsy
• Urogynaecologist giving expert witness for intrapartum care
• Many examples e.g. orthopaedic experts who have not performed trauma surgery for many years; surgeons who do not work at a regional Major Trauma Centre giving an opinion on polytraumatised patients; hip and knee specialists giving an opinion on complex upper limb cases
• Orthopaedic surgeons providing MedCo GP reports
• The dispute was concerning the installation of 12 metre long plastic drains to take surface water from a major road being constructed and my opposite number had only ever installed 3 metre long concrete pipes. Therefore, his production data he relied upon was an irrelevance to the subject matter in dispute
• Care experts who are nurses recommending and costing for future occupational therapy input.
• Not possible to provide an example without breaking confidentiality. Some ‘experts’ have spent decades creating myths about their expertise which can deter people from questioning their competency. Much depends on ‘reputation’, ‘contacts’, or cultivated mystique which does not stand up to objective scrutiny
• Usually at the borderline, rather than a blatantly different area
• Specialist dental practitioners offering opinion on general dental practitioners’ cases
• General dental practitioners with relatively little experience
• A medical doctor professing expertise in a physiotherapy case. Like an orthopaedic surgeon profession expertise in a brain surgery case. Or a chartered surveyor acting in an architectural case.
• More on social media rather than writing reports for the courts.
• Many times I have met ‘experts’ who only have a basic knowledge of a subject and have learnt their expertise ‘parrot fashion’ or by copying a similar report
• Experts in physical health matters, commenting on psychiatric issues
• Some consultant psychiatrists are not up to date with the expertise even though they are employed by the NHS/Private sector in a substantive role. Risk of direct and potential conflict of interest is likely to compromise the veracity of the report especially if the consultant is giving honest evidence against the NHS Trust and the expert witness has direct or indirect relations with the relevant Trust and Royal College.
• Amputation of foot in diabetic, report from surgeon who just does trauma
# Appendix 9

## Medical – Average hourly rate (£) for report writing

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## Appendix 10

### Non-Medical – Average hourly rate (£) for report writing

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## Appendix 11
### Medical – Average hourly rate (£) for court

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# Appendix 12

## Non-Medical – Average hourly rate (£) for court

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About Bond Solon

Bond Solon is the UK’s leading Expert Witness Training Company and since 1992 have trained tens of thousands of expert witnesses. In this time we have been at the forefront of improving the standards of expert witnesses in the UK through the provision of knowledge and skills based learning and qualifications.

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**Expert Witness Training Consultant**

**Contact Details**

Jennifer Wilcox

Email: jennifer.wilcox@bondsolon.com

Phone: 020 7549 2549

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**PR**

**Contact Details**

Mark Solon

Email: mark.solon@bondsolon.com

Phone: 020 7549 2549

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Twitter: @bondsolon

LinkedIn: /company/bond-solon-training/