Report Writing in the Forensic Context: Recurring Problems and the Use of a Checklist to Address Them

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Report writing remains a core competency of forensic psychologists. The overarching purpose of a forensic psychological report is to apply psychological knowledge and understanding to address a legal question. However, a number of common deficiencies are apparent with regards to forensic psychology reports. This paper does three things. First, it explores the nature of forensic report writing and how it is distinct from clinical report writing; second, it highlights frequently occurring problems associated with forensic reports; and third, it offers a suggestion for reducing problems through the use of a checklist. Checklists have the capacity to reduce errors in a wide range of complex tasks. In the forensic context, checklists can function not as comprehensive ‘how to’ guides, but as quick and simple tools aimed to reinforce the skills of the expert professionals. A checklist documenting key considerations of forensic psychologists with regards to report writing is provided.

Keywords: checklist; forensic; problems with forensic reports; psychology; report writing.

Forensic Report Writing

The field of forensic psychology has grown exponentially over the past three decades to include the various roles of expert witness, psychological assessment, and victim and offender rehabilitation (Burl, Shah, & Dematteo, 2008). However, one of the core competencies of a forensic psychologist remains that of report writing (Australian Psychological Society, 2014; Goodman-Delahunty & Dhimi, 2013), which bridges the gap between psychological assessment and in-court testimony (Wettstein, 2010). The overarching purpose of a forensic psychological report is to apply psychological knowledge and understanding to address a legal question. Besides communicating information, forensic report writing helps the psychologist define and frame the referral question, organise their

thinking, render information otherwise foreign comprehensible to the reader, and convey conclusions or opinions (Demier, 2012). This article explores the nature of forensic report writing and frequently occurring problems with forensic reports, and offers a checklist to guide forensic report writing.

Judges, prosecutors and defence lawyers do not generally possess in-depth knowledge of psychology or psychiatry (Roberts, 1996). However, such knowledge is regularly required in legal decision making. The expert testimony provided in such cases may be critical to the court’s final decision, and researchers have regularly found a great deal of agreement between the opinions of forensic psychologists and the ultimate findings of legal decision-makers (Melton, Petrila, Poythress, & Slobogin, 2007). The scope of

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referral questions put to forensic psychologists is large and can be in relation to criminal cases, civil litigation situations, child custody proceedings or risk assessments (Ackerman, 2006). However, the two broad areas of forensic report writing are civil and criminal. Civil reports deal with civil commitment, civil competencies, and guardianship, compensation for injury and abuse and neglect of children. Criminal reports deal with competency to stand trial, mental state at the time of the crime, mitigating defences and pre-sentencing reports to assist the Court in disposition matters (Allnutt & Chaplow, 2000). The forensic psychological report, which usually follows the assessment of an individual, typically explains a person's behaviour in the context of their psychological state, background and motivation. The report attempts to answer a specific referral question to assist the trier-of-fact in understanding a person's behaviour and level of culpability in criminal matters.

The Importance of Creating High-Quality Forensic Reports

The accuracy and integrity of forensic psychological reports is tantamount to well-informed and appropriate judicial decision making. Testimony given by mental health experts on questions such as a defendant's competence to stand trial, insanity at the time of a crime, malingering and fitness for child custody affects the outcome of an estimated one million legal cases a year (Goleman, 1988). On top of this, expert evaluations are regularly employed in regards to sentencing and parole decisions. A survey of 79 Australian psychologists who regularly prepared forensic reports for the court found that such expert testimony is rarely presented orally (Allan, Martin, & Allan, 2000), emphasising the prominent role of forensic psychological reports. In the United States, forensic evaluations and consequent reports influence decisions as significant as death sentences and indefinite civil confinement (Murrie,

Boccaccini, Guarnera, & Rufino, 2013). Of note, Day et al. (2000) found that psychological recommendations were acted upon in over 75% of cases, and Hecker (2002) noted that judges tend to follow a forensic evaluator's opinion in regards to juvenile dispositions. The consequences of an unprofessional report are not only that the court places little weight on it, but also that the author's career and professional reputation may be at risk (White, Day, & Hackett, 2008). The reputation of forensic psychology itself is also undermined. Most importantly, if the faults of unprofessional reports go undetected then the reports can undermine judicial decision making and lead to ill-informed judgments.

Characteristics Unique to Forensic Report Writing

Forensic psychology reports differ from their clinical counterpart in important ways, some of which mirror the general differences between forensic and clinical psychology. These general differences have been summarised by Greenberg and Shuman (1997, 2007), and include (a) who the client is and the nature of the relationship, (b) the evaluative attitude of the clinician and level of scrutiny applied to information obtained from the client, and (c) the differing areas of competency.

The Nature of the Client

The client in a clinical assessment is usually the person sitting opposite the therapist. They are the person who will benefit from the assessment and any accompanying treatment, and it is to them that the therapist is ultimately answerable. They are typically there of their own volition and are aware that the therapy is intended for their benefit. This client-practitioner relationship is characterised by trust, empathy and benevolence, and the only limits to confidentiality (unless agreed otherwise) involve the client being at risk of harming themselves or someone else (see *Tarasoff v Regents of the University of*

California, 1976, for a landmark case in which the Supreme Court of California held that mental health professionals have a duty to protect individuals who are being threatened with bodily harm by a patient). In contrast, in a forensic context the client may be one of a number of persons or organisations other than the person being assessed. Consider the situation where a defence lawyer requests a forensic assessment of an individual. The client could be perceived as any of the following: the court, the community, the lawyer or the person being assessed. The lawyer pays the examiner, but the expectation of the court is that the examiner will not advocate for the examinee, but remain neutral. This obligation is outlined in point 1.02 of the Specialty Guidelines for Forensic Psychologists (American Psychological Association, APA, 2014). The ambiguity over who the client is heightens the risk of psychologists engaging in dual relationships and other unethical behaviour. Dual relationships can lead to inaccurate judicial decisions due to clinical psychologists being biased and flawed witnesses (Greenberg & Shuman, 1997). Dual relationships might manifest in treating psychologists providing expert evidence in court, or vice versa. That a psychologist can advocate for their client in treatment and become impartial on the stand (or in a report) is unlikely. The existence of such difficulties has led to the creation of ethical guidelines specific to forensic psychological practice (APA, 2014; Bush, Connell, & Denney, 2008). Recognition of the nature of the client is integral to a forensic psychologist's role, as forensic psychologists providing reports to the court are operating as expert witnesses. This allows them to go beyond statements of fact to provide opinion based on 'specialised knowledge' (Supreme Court of Victoria, 2005). The Supreme Court of Victoria sets out the expectations of an expert witness clearly in the Expert Witness Code of Conduct Form 44A. This document explicitly states that an expert has an 'overriding duty to assist the Court impartially' (Rule 44.01.1)

and that an 'expert is not an advocate for a party' (Rule 44.01.3). This requirement for impartiality is a fundamental aspect of forensic psychological practice and pervades all other distinctions between it and its clinical counterpart.

Despite the requirement that forensic psychologists be objective and impartial, research suggests that this is not always the case. Bias can be understood as intentional or unintentional distortion of the report in favour of the requesting party's perspective (Gudjonsson & Hayward, 1998). Recent research has demonstrated the existence of authorship bias in relation to whether the report was requested by the defence or prosecution (Murrie et al., 2013). One-hundred and eight forensic psychologists and psychiatrists were paid to review the same offender case files. Some were deceived into believing that they were consulting for the defence and others that they were consulting for the prosecution. Using well-known risk assessment tools, those who believed that they were working for the prosecution tended to assign higher risk scores to offenders, whereas those who believed they were working for the defence tended to assign lower risk scores to the same offenders (Murrie et al., 2013). The effect sizes (d) ranged up to 0.85, providing strong evidence for an 'allegiance effect' among forensic experts. Such findings can lead to a perception of forensic psychologists as 'guns for hire'.

Judges and magistrates in Australia cite bias among forensic experts as a major problem posed by expert evidence. Freckelton, Reddy, and Selby (1999, 2001) conducted two Australian surveys of members of the judiciary, which required them to state their opinions on expert evidence. The first study involved judges and the second magistrates, with the purpose of identifying common problems presented by expert evidence. Of the 245 respondents, 35% cited bias as one of the most significant problems arising from expert evidence. Many objected to seeing the same experts appearing only for the same side in cases – for example, always appearing only

for the prosecution. Eighty-eight percent of judges ($n = 208$) and 69% of magistrates ($n = 136$) reported having encountered what they perceived as partisanship from expert witnesses. This finding reflects similar observations from America and England (Malsch & Freckelton, 2005). Petherick, Turvey, and Ferguson (2010) note that due to the adversarial nature of the justice system and the manner in which experts are called by either side and not the Court, it is implied that both parties will call only experts who support their case. Furthermore, it is the parties who decide how many experts will be used and on which issues they will provide evidence, which inevitably may result in bias on the part of the experts.

While the need for neutrality and impartiality is one defining aspect of a forensic psychology report, it appears this standard is not always achieved in practice. Anecdotal evidence indicates that forensic psychologists who tailor their reports to the needs of the retaining lawyers receive increased future referrals compared to their more impartial colleagues. This represents a danger for the reputation of forensic psychology. The capacity for objectivity will be aided by greater recognition of who the client is, and of the requirements for acting as an expert witness. While training and specialist knowledge are important, questions of 'who the client is' are not always easy to solve. Other approaches to dealing with the issue of bias include moves toward a single expert system where no one works for a 'side'. In a review of the rules and procedures of the civil courts in England and Wales, Lord Woolf recommended that single experts (appointed jointly by both parties, or by court) should be used where there is a substantially established area of knowledge (Woolf, 1996).

The Evaluative Attitude of the Clinician and Level of Scrutiny Applied to Information Obtained from the Client

Another way in which forensic psychology reports differ from standard clinical reports relates to the evaluative attitude of the

clinician and the level of scrutiny applied to information obtained from the client. Where a clinical relationship is likely to be characterised by trust a forensic interviewer must adopt a more sceptical attitude towards information provided by the examinee. A paper by the University of Oklahoma Health Sciences Center entitled 'Forensic Interviews' suggests that the difference between the client in forensic and clinical interviews is such that the purpose of the interview itself is changed. The former is engaged in *fact finding*, whereas the latter is primarily concerned with *well-being* (Silovsky, 2000). Forensic assessments are often involuntary, meaning that information provided by the examinee cannot be taken at face value. Thus reliance on collateral information, or information sourced externally from the client, is a fundamental aspect of forensic practice (Conroy, 2006). The APA Guidelines for Forensic Psychology recommend that practitioners rely on multiple sources of information and, when relying on data that have not been corroborated, 'seek to make known the uncorroborated status of the data' (APA, 2014, Section 9.02). Collateral information reviewed should be specified in the final report. This entails listing the documents the psychologist relied upon in writing the report. Examples include school reports, criminal history, police summaries, witness statements, victim impact statements, or health records. It would also include documentation and dates of interviews (by phone or in person) with other sources such as friends, family, employers or colleagues.

Another important aspect of applying scrutiny to a person's account includes turning one's mind to, or testing for, impression management. This is the goal-directed, conscious or subconscious effort to influence the perceptions of the interviewer. It might entail exaggerating or minimising symptoms or behaviour, as well as other attempts by the person being assessed to portray themselves in a particular light. Safeguards in the form of specific psychometric tests are available that can be used to assess impression

management. Common examples include the Self-Monitoring Scale (Snyder, 1974), and the Paulhus Deception Scales (Paulhus, 1998). Most personality assessments include validity scales, which measure the degree to which respondents portray themselves in a positive or negative light.

Forensic psychologists must exercise more scrutiny during the assessment process; however, the tendered reports themselves also undergo increased scrutiny in Court. This is manifest in the need for forensic practitioners to separate clearly what are facts and what are opinions in the report. It is also incumbent on them to ensure that the reasoning process underpinning their opinions and conclusions is transparent. Malsch and Freckelton (2005) suggest that Australia and England have undergone reforms in recent years in regards to expert evidence, which have principally taken the form of articulating the principal obligations of expert report writers to state their assumptions in relation to the opinions they form. In accordance with this, the notes that the report author must 'state, specify or provide the facts, matters and assumptions on which each opinion is expressed and the report is based' (Rule 44.01.3d). Both these requirements, that facts be clearly separated from opinions, and that the basis for opinions be clearly articulated, are important in making expert witnesses accountable for their opinions and conclusions. Clear hypotheses are more easily understood as well as more easily tested.

Differing Areas of Competency

A third aspect in which forensic psychology reports are unique relates to the different areas of competency upon which they rely. Forensic psychology is now widely recognised as a specialist area with separate competencies to other forms of psychology. This is evident in the APA's approval in 2001 of forensic psychology as a specialist area requiring specific training. The separate areas

of competency are also evident in the distinct placements, workplaces and education courses completed by forensic psychologists. One such area of competency unique to forensic psychology is the knowledge of the legal system and legal rights of individuals. Forensic practitioners recognise the need to acquire a 'reasonable level of knowledge and understanding of the legal and professional standards, laws, rules, and precedents that govern their participation in legal proceedings and that guide the impact of their series on service recipients' (APA, 2014, Section 2.04). Appropriate training and experience allow the forensic psychologist to properly understand their role in writing reports for the court – to attempt to assist the trier of fact to understand evidence or determine a fact in issue, and provide information that is most relevant to the psycholegal issue (APA, 2014, Section 10.01). Forensic practitioners are able to identify the relevant psycholegal issues and provide information regarding examinees' functional abilities, capacities, knowledge and beliefs (Heilbrun, Marczyk, Dematteo, & Mack-Allen, 2007).

The content of forensic reports also differs from that of clinical reports, which is due to the different forensic questions being asked that require different data to the data required by most clinical reports (Grisso, 2010). Forensic psychologists strive to provide testimony that is 'sufficiently based upon adequate scientific foundation' (APA, 2014, Section 2.05). This entails the training in and comprehension of a range of assessment techniques and test instruments unique to the forensic context. A major component of forensic report writing is the case formulation in which the psychologist attempts to explain a person's past behaviour and/or provide an estimate of the likelihood of a future behaviour occurring. Both require forensic specific training and experience. The former involves acquiring the relevant information through a thorough assessment process and the drawing

on theories of offending behaviour to explain human behaviour. The latter requires the use and interpretation of a range of risk assessment tools. Forensic reports regularly include a prediction of a person's likelihood of reoffending violently or sexually. This can be either to determine eligibility for intervention (increased dosage for higher risk) or to identify risk factors unique to the individual and provide information on methods for managing risk. The identification and management of risk is a core competency of forensic practitioners and relies on psychometric tools, theory and research unique to the forensic context.

Recurring Problems with Forensic Reports

Problems with forensic reports can be identified via two types of empirical studies: either from surveys and feedback from legal professionals on the quality of reports, or by evaluations of the extent to which reports comply with certain principles of appropriate forensic mental health assessment (Goodman-Delahunty & Dhami, 2013). In an example of the latter, Grisso (2010) analysed feedback provided by the American Board of Forensic Psychology (ABFP) in relation to 62 forensic psychology reports. Thirty problems were identified and were reduced to the 10 most frequent faults in report writing (see Table 1).

Table 1. Ten most frequent faults in forensic report writing and the percentage of reports in which they were identified.

1. Opinions without sufficient explanations (56%)

Major interpretations or opinions were stated without sufficiently explaining their basis in data or logic (regardless of whether the report's data could have sustained the opinion)

2. Forensic purpose unclear (53%)

The legal standard, legal question, or forensic purpose was not stated, not clear, inaccurate, or inappropriate

3. Organization problems (36%)

Information was presented in disorganized manner (usually without a reasonable logic for its sequence)

4. Irrelevant data or opinions (31%)

Data and/or some opinions included in the report were not relevant for the forensic or clinical referral questions

5. Failure to consider alternative hypotheses (30%)

Data allowed for alternative interpretations, while report did not offer explanations concerning why they were ruled out (often response style/malingering alternative, sometimes diagnostic)

6. Inadequate data (28%)

The referral question, case circumstances, or final opinion required additional *types* of data that were not obtained or were not reported, and for which absence was not explained in report

7. Data and interpretation mixed (26%)

Data and interpretations frequently appeared together in section that reports data

8. Over-reliance on single source of data (22%)

An important interpretation/opinion relied wholly on one source of data when corroborating information from multiple sources was needed (often over-reliance on examinee's self-report)

9. Language problems (19%)

Multiple instances of jargon, biased phrases, pejorative terms, or gratuitous comments

10. Improper test uses (15%)

Test data were used in inappropriate ways when interpreted and applied to the case, or tests were not appropriate for the case itself

Note: Reprinted from "Guidance for Improving Forensic Reports: A Review of Common Errors, by T. Grisso, 2010, *Open Access Journal of Forensic Psychology*, Volume 2, pages 110–111. Copyright (2010) by Open Access Journal of Forensic Psychology.

This list, which was endorsed by the ABFP, provides useful guidance on factors to avoid in forensic psychology reports. The top two faults that were identified in over half the reports were (a) ‘opinions without sufficient explanations’ and (b) ‘forensic purpose unclear’. Similar faults have also been identified in previous studies (Christy, Douglas, Otto, & Pettila, 2004; Hecker, 2002). According to Grisso, ‘opinions without sufficient explanations’ referred to instances in which important conclusions of the examiner were stated without demonstrating how they were formulated. Formulations involve both data and logic, and these reports either lacked data to support the opinions (e.g. an opinion regarding malingering), or lacked the explicit reasoning process necessary to justify the opinion. Allnutt and Chaplow (2000) suggest that the opinion section is of the most interest to the court and that in order to be credible it must be based on clear reasoning. In spite of its importance, transparent reasoning is often neglected in forensic report writing (Demier, 2012). The second most common fault – ‘forensic purpose unclear’ – indicated a failure to establish at the start of the report the specific referral question. Such an early statement of the referral question is crucial in highlighting the purpose of the report, which serves as a guide for all subsequent sections. Grisso notes that it guides the data collection and interpretations that constitute the basis of the report. In circumstances where the referral question is unclear, this section becomes even more important in providing the author with the opportunity to state the referral question(s) as he/she sees them and to clarify the parameters of the report (Demier, 2012).

A third common problem identified by Grisso (2010) was ‘inadequate data’, which was observed in over a quarter of reports. This described situations where the referral question, case circumstances or final opinion required additional types of data that were either not collected or not reported,

and for which the absence was not explained in the report. A recent Australian study that examined whether reports involving risk assessments conformed to best forensic practice found that some experts applied unreliable methods of risk assessment and incorrectly reported the results of risk assessment tools (Doyle, Ogloff, & Thomas, 2011). The failure to use and interpret the appropriate psychometric tools correctly will clearly undermine any opinions or conclusions based upon them. Furthermore, the danger is that such errors may go undetected by judges, jurors, lawyers and law enforcement agencies that have limited psychological expertise. Given the fact that the readers of forensic psychological reports (or triers of fact) rarely have in-depth psychological knowledge, it is important that the reports be written clearly and simply and explain any necessary technical terms (Goodman-Delahunty & Dhimi, 2013). Grisso included ‘language problems’ on the list of top 10 faults with forensic reports. Language problems were observed in a fifth of the reports, and involved use of jargon, biased phrases, pejorative terms or gratuitous comments. Technical jargon was the major complaint in a study sampling 92 British solicitors regarding court report writing style (Marchevsky, 1998).

‘Failure to consider alternative hypotheses’ was observed in almost a third of the reports in Grisso’s (2010) study. Data included in some reports allowed for alternative explanations that were not explored, and no explanation was offered for why they had been ruled out. Such failure to consider alternative explanations may reflect confirmation bias, which refers to the tendency to selectively search for and interpret information that confirms one’s preconceptions (Bell, 2014). Karson and Nadkarni (2013) note of forensic reports that good writers repeatedly ask themselves, ‘How do I know that?’, and they answer in writing. Kassir, Dror, and Kukucka (2012) described forensic confirmation bias as an

individual's pre-existing beliefs, expectations and motives influencing the collection, perception and interpretation of evidence during the course of criminal case. Failure to consider alternative hypotheses may also be the product of the report author succumbing to the influence of the retaining party. Regardless of who is responsible for the expert's fee, it should be made clear that payment is for time and expertise, and not for any particular opinion (Conroy, 2006).

Allnutt and Chaplow (2000) distinguish between the approach to report writing and the writing itself. Regarding the former, which is strongly related to ethical practice, several aspects are highlighted: (a) the importance of clarifying roles and boundaries in the assessment process, (b) obtaining informed consent, and (c) explaining the limits of confidentiality. Just as psychologists can be tempted to act as advocates, those being assessed may be tempted to view the psychologist as an advocate. The examinee may be under the misapprehension that anything they reveal will result in a positive outcome. For this reason, it is necessary to clarify roles at the beginning. Informed consent requires that the individual be informed of the purpose of the report, the nature of the assessment and any associated risks/benefits. Also important is to consider possible future uses or readers of the report. Clarifying the limits to confidentiality and warning of what kinds of information may be made public and to whom and under what circumstances is also necessary for informed consent. Ackerman (2006) argues that the examinee should be advised if the results of an evaluation are not confidential and will be disseminated to a number of different sources, and that the report should reflect that this information was conveyed to the examinee. Despite them being fundamental to ethical forensic practice, an alarming number of forensic reports fail to document discussions regarding these points with the examinee (Demier, 2012).

Checklists – One Way to Improve the Quality of Forensic Reports

In his (2009) book 'The checklist manifesto: How to get things right', general and endocrine surgeon Atul Gawande claims that simple checklists have the capacity to reduce errors in a wide range of complex tasks. Witt (2010) takes this idea and applies it to the forensic report writing context. Witt describes Gawande's conception of checklists, not as comprehensive 'how to' guides, but quick and simple tools aimed to reinforce the skills of expert professionals. In a complex environment, two types of errors by experts can be expected according to Gawande. The first relates to 'the fallibility of human memory and attention, especially when it comes to mundane, routine matters that are easily overlooked under the strain of more pressing events' (Gawande, 2009, p. 35). The second relates to the tendency of people to 'lull themselves into skipping steps even when they remember them. Checklists seem to provide protection against such failures. They remind us of the necessary steps and make them explicit' (Gawande, 2009, p. 35–36). Witt suggests that given the importance of report writing and the complexity of the task, checklists can be of assistance to forensic psychologists. He suggests that the integration of observations, review of records, information from third-party sources, psychometrics and relevant legislation into a coherent forensic report appears to be exactly the kind of complex task for which checklists are suited. Such checklists can help the psychologist ensure that they have followed the 'minimum steps needed to produce a competent forensic report' (Witt, 2010, p. 234). Witt proceeds to create a 10-point checklist based on the 10 problems common in forensic reports that were identified in Grisso's (2010) study. However, whilst empirically driven, this 10-point checklist is too concise to be of much assistance. Its brevity renders it inadequate as a prompt for authors of forensic reports to consider the full range of their responsibilities.

Table 2. Checklist for forensic psychology report writing.

Clarify your role	
o Is your role clear? (e.g. in relation to the client and other associated parties)	☐
o Is there the potential for a dual relationship or other ethical violation?	☐
o Have you discussed the purpose of the report with the examinee?	☐
o Have you discussed limits to confidentiality with the examinee?	☐
o Have you obtained informed consent?	☐
o Have you documented discussions regarding the above in the report?	☐
o Are you aware of the relevant legislation and case law?	☐
Clearly state the referral question	
o Is the referral question clear?	☐
o If not have attempts to gain further information been made?	☐
o If the above is not feasible, have you stated your understanding of the referral question and the parameters of the report?	☐
Data collection	
o Have you taken a detailed history?	☐
o Has all necessary information to answer the referral question been obtained?	☐
o Have you attempted to obtain collateral information?	☐
o Are the examinee's personal information and dates of evaluation correct?	☐
o Have you relied on multiple sources of data?	☐
o Are all the sources of data relied upon in the report listed?	☐
o Are the sources of information clear in the report?	☐
o Are the psychometric measures used appropriate?	☐
o Have you assessed for risk?	☐
Make the report easy to read and understand	
o Have you avoided the use of jargon, colloquial or prejudicial language?	☐
o Are there any unexplained terms? (e.g. 'moderate risk')	☐
o Have data not relevant to the referral question been excluded?	☐
o Are the facts and opinions kept separate? (e.g. is there an 'Opinion' section?)	☐
o Is the reasoning clear and conclusions transparent?	☐
o Have alternate hypotheses been considered?	☐
o Have you avoided commenting on the ultimate issue?	☐
o Are answers to the referral question(s) clearly set out at the end?	☐
Personal	
o Is there anything about this referral, assessment or report that makes you uncomfortable?	☐
o Would you be happy for the process to be made public?	☐
o Is there potential for personal bias?	☐
o Have you expressed opinions only on matters for which you are qualified and competent?	☐

In light of this, the following checklist was compiled based on characteristics of good forensic psychology or psychiatry reports referred to in the literature (see [Table 2](#): Checklist for forensic psychology report writing). This checklist draws heavily

on, and expands upon, Grisso's (2010) list of the 10 most common faults with forensic psychology reports. While still not exhaustive it provides guidance to ensure that fundamental aspects of quality forensic psychology report writing are met.

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Dr Micaiah Zwartz has declared no conflicts of interest.

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This article does not contain any studies with human participants or animals performed by the author.

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