

Dr Eileen Atchison

Holds office as a Medical Member for 3 panels:

- Medical member Appeal Tribunals 1990
- Medical member Criminal Injuries Compensation Appeals Panel 2014
- Medical member for Mental Health Tribunals 2019

Professional background

Dr Eileen Atchison has been practicing medicine as a General Practitioner since 1985. Dr Atchison has also held roles as a Speciality Doctor in Sexual Health with the Belfast Trust, and GP Trainer - both from 1990. Dr Atchison's qualifications include, MB.BCh. BAO. MRCP, DCH DRCOG, Dip Psychosexual Medicine.

What attracted you to apply for the role?

I was advised by an older GP to develop a professional interest outside General Practice, and this post seemed to provide the opportunity to work alongside other professionals in a different working environment. I was first appointed to the Appeal Tribunals in 1990, sitting on a panel of 3 members, one legally qualified and one with disability experience. As a team, we assess the appellant's physical or mental disability in relation to the benefit they have applied for. This could be PIPs, personal independence payments (previously DLA), ESA - Employment Support Allowance (previously Incapacity) or Attendance Allowance. I enjoyed this role and the perspective from the other members of the panel.

In 2014, a vacancy in Criminal Injury Compensation Appeals Panel (CICAP) was advertised, and seemed to fit with some of my clinical interests. Again, a panel of 3 people assess the Appellant's claim to have been injured as a result of a crime of violence.

More recently, I have been appointed to the Review Tribunal, again this seeming to fit with my areas of clinical interest. This is a developing role as the panel learn how to interpret the changes in the Mental Health Act (2019). The appellant is usually not present, and we rely on medical notes and assessments.

What is a typical day like?

There are some similarities between the three tribunals. A lot of work goes into the preparation for the Tribunal i.e. analysing the paperwork, the general format is the same for all. Typically, the Tribunal Members, including the legal chair, will meet and discuss the case and the papers before the appellant arrives. Depending on the complexity of the case, each appeal could take 2-3 hours. Having heard all the statements and evidence, the panel would then discuss the findings, share knowledge and considerations on the case, and reach a

conclusion. The appellant is then usually informed on the outcome of the hearing before the end of the day.

For all Members there is a great deal of paperwork to read through and prepare beforehand. This consists largely of medical notes and records. The main objective of the Medical Member is to explain medical conditions and side-effects of medications to the Legal and Lay Members, and understand the impact these would have had on the appellant. In the case of the CICAP hearings, alongside having a legal representative present, there may also be police witnesses, and additional paperwork such as witness statements. Because of this, the supporting documentation can be considerable.

CICAP hearings tend to take a full-day, so we could hear 4-6 cases. The Appeal Tribunals tend to be scheduled in half days, so we would hear 2-3 cases.

What are the biggest challenges you face?

For me, the biggest challenge is creating an atmosphere where appellants can express themselves and best relay their conditions or the impact it has on them in a coherent way. The style of questioning in a Tribunal is by nature inquisitorial, and we often get appellants who have difficulty communicating well. This could be individuals who have mild Asperger's Syndrome, chronic depression or have social anxiety. We could also have appellants who are very reluctant to admit they have needs and tend to play things down because they don't want to appear to be dependent. The challenge I have is creating a non-intimidating space where we can allow those people to communicate in a way that we can understand. I sometimes find that to be a challenge.

Which aspects of your professional experience have proven most useful when carrying out duties on CICAP or at Review Tribunals?

As a General Practitioner I have considerable experience of dealing with a wide range of conditions, including those referred to above. As a GP I also appreciate the impact of disability on patients, and witness first-hand how having access to support can be of great benefit to them.

I think the areas I have specialised in throughout my career, such as sexual health, mental health, psychosexual health and Trauma all prepared me very well to be a Medical Member for the Appeal Tribunals and CICAP. I took a particular interest in psycho-sexual medicine, completing a Diploma 1997. This has helped me understand how psychological and physical health can impact one another. I also received training in Eye Movement Desensitisation and Reprocessing (EMDR), which is used for Trauma management, which gave me an insight into how Trauma can impact our lives.

Is the job what you imagined it would be?

I would say the role is largely what I expected it to be. Sometimes I have difficulty taking off my practitioner hat, and have to resist the urge to assess,

diagnose and treat, but I think it has been a good thing for me to do because it has given me a new perspective. Overall has been very rewarding.

The whole panel experience has also been a very positive experience. It is an interesting and intellectually stimulating process to be involved in. I appreciate other Member's interpretations and professional opinions, and each opinion is valued.

Do you have any advice or pearls of wisdom for those considering applying for judicial appointment?

I would encourage younger GPs to apply earlier in their career. I think being appointed earlier in their career would also offer a new perspective when treating patients with a disability in practice. I am pleased that one of my GP Trainees is now a member of the Appeal Tribunals.

Would you recommend a judicial role to others?

I would encourage people to apply. The role of Medical Member allows you to help people in a different context - outside of a clinic or practice. It also allows you to play a slightly different role because you get to see justice in action and be a part of a process where you can impact peoples' lives for the better based on the decisions yourself and the panel have made.