

Dr Girish Vaidya MBBS, MD, MRCPsych Consultant Child and Adolescent Psychiatrist

GMC: 4540117

Professional Summary

Areas of Clinical Experience and expertise: ADHD, Attachment disorders, Conduct Disorder / Oppositional Defiant Disorder, Autism Spectrum Disorder, Self-harm in Looked After Children (LAC) and Young offenders, Placement breakdowns in Looked After Children, Compensation claims arising out of personal injury or medical negligence, Gaming and technology addiction

Specialist Areas of Expertise

PERSONAL INJURY CLINICAL NEGLIGENCE ADHD AUTISM YOUNG OFFENDERS CHILD AND ADOLESCENT SELF HARM AUTISM SPECTRUM DISORDER ATTACHMENT DISORDERS CHILD LOOKED AFTER CHILDREN CONDUCT DISORDER COMPENSATION CLAIMS LAC PLACEMENT BREAKDOWNS OPPOSITIONAL DEFIANT DISORDER

Professional Education and Qualifications

MBBS MD (Psychological Medicine) MRCPsych M.E.W.I. (Member of Expert Witness Institute) MSc (Healthcare Leadership)

Professional Employment

2003 – 2005:	Consultant in Child and Adolescent Psychiatrist at Chesterfield CAMHS
2000 – 2003:	Senior Registrar in Child and Adolescent Psychiatry
1996 – 2000:	North Trent Psychiatric rotation

Areas of Medico-legal Expertise:

Criminal Matters:

Psychiatric Reports and assessments in criminal cases for Crown, Youth and Magistrates' Courts.
Assessment for ADHD (Attention Deficit Hyperactivity Disorder), particularly for repeat offenders
Assessment for Learning Disability in the context of offending
Psychiatric Assessments for Fitness to Plead cases
Assessment where defendant is charged with murder
Pre-sentencing Assessments
Criminal Responsibility and Learning Disability
Assessment of Dangerousness / Risk Assessment
Sexual Crimes including sexual harassment
Arson
Violent Criminal Assessments including Murder
Violence /Self Harm/Suicide
Risk assessment for planning release from custody.
Abnormal Behaviour

Care Proceedings / Public Law Outline (PLO) cases: Single expert report for submission to court in care proceedings Determining appropriateness of placement for children in care

Risk assessment to determine placement Advice on therapeutic input required for success of placement Assessment in cases of contact disputes

Private Family Law:

Assessment of children in disputed divorce proceedings. Assessment in cases of contact disputes

Parenting Assessment:

Assessment of parenting in the context of an assessment of an infant / child. My parenting assessment specifically looks at the 'goodness of fit' between the child (with its difficulties) and the parent(s) (with their difficulties). Parenting assessment of teenage parent(s).

Asylum Applications:

- Assessment of trauma prior to becoming a refugee / asylum seeker
- Assessment of trauma in relation to repatriation 6. Systemic Operant Solutions (SOS): Systemic Operant Solutions is a method
 of finding solutions for vexing problems in the Care System. It is commonly deployed in the following circumstances:
 - 1. Multiple placement breakdowns
 - 2. Difficulties in contact between parent and child who is in care
 - 3. Social Workers (and the wider care system) feeling 'stuck' and unable to find a way out

4. Conflict between Local Authorities and Birth Family having direct impact on the child in care (CIC) SOS combines two well-known approaches in the field of psychology and family therapy – Systemic Thinking and Operant Conditioning. It aims to find solutions by implementing change through the systems around a young person and using a person's innate motivation to achieve positive change. These reports are usually commissioned by Local Authorities to find the most widely acceptable way forward for all parties concerned.

Personal Injury / Medical Negligence:

Compensation claims arising out of personal injury leading to mental health problems Compensation claims arising out of institutional negligence (Local Authorities or other statutory and non-sta

Compensation claims arising out of institutional negligence (Local Authorities or other statutory and non-statutory bodies) or medical negligence.

Gaming and Technology addiction:

Gaming and technology addiction is increasingly being acknowledged to lead to or arise from pre-existing mental health difficulties. Gaming and technology addiction can have similar behavioural outcomes as seen with other substances of dependence. In the medico-legal field, Gaming and technology addiction is likely to be increasingly recognised in the fields of criminal law and civil law. The former when there is a blurring of boundaries between fantasy and reality (e.g. in Autism Spectrum Disorder cases) and the latter in allegations of neglect and abuse.