

OPD Contract Counsel Proficiency Determination Information Packet

Contract Attorney Name: _____ Region(s): _____

Regional Deputy Public Defender(s): _____

Areas of Practice (check all that apply): Felony Criminal Misdemeanor Criminal Appellate PCR
 Sentence Review Juvenile DN DI Guardianship Developmentally Disabled

Lexis License: Yes No

A. Comments from RDPD, Regional FTE, or Regional office Personnel, if any:

B. Comments from the Conflict Coordinator, if any:

C. Comments from Client(s), if any:

D. Comments from Judges and/or Court Personnel, if any:

E. Comments from Accounting, if any:

F. Comments from Contract Management Office, if any:

G. Observation information and comments:

ATTACHMENT A – CASE REVIEW

ATTACHMENT B – CURRENT CASE COUNT

ATTACHMENT C – BILLING AUDIT AND COMMENTS

ATTACHMENT D – CLE TRANSCRIPT

ATTACHMENT E – CLIENT COMPLAINTS AND RESOLUTIONS

ATTACHMENT F – PRE-APPROVAL/EXPERT WITNESS INFORMATION

ATTACHMENT G – MOTION/BRIEF SAMPLES FILED WITH COURT

ATTACHMENT H – DISCIPLINARY INFORMATION

Possible questions to Court / Judges/ Office Personnel:

- 1) Is the Attorney on time and prepared for Court
- 2) Is the Attorney respectful and courteous to staff
- 3) Is the Attorney knowledgeable about his cases and his clients
- 4) Does this Attorney file Motions and/or Briefs in excess

Possible questions to the Client:

- 1) Did your Attorney meet with you in a timely manner after you were advised who your public defender was?
- 2) Did your Attorney explain the charges against you and any possible outcomes?
- 3) Did you have regular contact with your attorney prior to any hearings and/or trials?
- 4) Was your Attorney on time for appointments and/or hearings?
- 5) Did you feel that your Attorney represented you fairly and was knowledgeable about your case?