

## **Forensic and Secure Environments Committee (FSEC)**

### **Written report to the ARM 2023**

#### **Overview**

The forensic and secure environments committee has thrived over the last session. This report aims to provide an overview of the challenges and issues encountered by the committee in representing doctors who are delivering forensic and healthcare services within secure settings. These settings themselves present unique challenges due to their restricted nature with diverse inmate and detained populations. The committee continues to deal with effective representation across a multitude of issues affecting secure medicine.

#### **Challenges**

##### **Resource constraints**

One of the major challenges faced in secure settings is the significant cuts to funding and attempts to cut budgets, which in turn strains healthcare resources. The secure population has multiple, complex health needs which puts added pressure on the system. Massive capacity problems in prisons and immigration centres cause limited access to timely and comprehensive healthcare services. This can result in longer waiting times for medical assessments, delayed treatments, and reduced availability of medical personnel, exacerbating the overall healthcare situation in secure settings.

##### **Staffing and private providers**

Secure settings face persistent staffing shortages, particularly in healthcare services. Inadequate numbers of qualified healthcare professionals within these settings hinder the delivery of timely and quality healthcare. Insufficient training for non-medical staff poses additional challenges, as they often have to make medical decisions without appropriate expertise. Training programs should be enhanced to equip healthcare personnel and non-medical staff with the necessary skills to handle healthcare emergencies, chronic conditions, and mental health concerns. The move away from doctors to allied healthcare professionals with less rigorous training requirements is a major concern across secure settings.

##### **Health inequalities and vulnerable populations**

Certain populations, such as ethnic minorities, foreign nationals, individuals with complex health needs, and trans/non-binary individuals face disproportionately high health inequalities within secure settings. Discrimination, language barriers, and limited cultural competence among healthcare providers exacerbate these disparities. Tailored healthcare approaches, cultural sensitivity training for staff, and improved access to interpreters are essential to address the specific healthcare needs of vulnerable populations and reduce health inequities.

##### **Continuity of Care and Transitions**

Smooth transitions of care in all settings which involve secure settings (including between secure settings and community healthcare providers, prison to police custody, immigration detention removal centres, etc.) are essential for effective healthcare delivery. However, numerous challenges arise during the transfer of inmates from secure settings to community healthcare settings, leading to disruptions in care. Limited coordination, inadequate medical records transfer, and lack of communication between healthcare providers hinder the continuity of care and often result in suboptimal health outcomes. Improved information-sharing systems and comprehensive discharge planning are crucial to ensure seamless transitions and adequate post-release care. The committee acknowledges significant challenges and has evidenced multiple shortcomings in this regard, and seeks to lobby to change the current state of affairs. FSEC have published information to improve prescribing across interfaces.

#### **Successes**

## End of Friday releases for vulnerable prisoners

Earlier this year the Government announced an end to releasing vulnerable prisoners on Fridays, therefore allowing time to fill prescriptions and make suitable healthcare arrangements to ensure the released have access to important medical resources. FSEC have called for this for many years, and we hope this leads to more people accessing key services.

## Medical examiners in England and Wales

The roll-out of the medical examiner system in these two nations has caused significant issues in primary care within certain areas of England. While medical examiners and crematoria medical referees (CMRs) are represented on FSEC, the issue is multifaceted and has led to collaborative working between FSEC, PFC, GPC and GPC Wales. The system was put on hiatus for 12 months in England, and while this has contributed to confusion for death certification, we have held meetings with officials to lobby and amend the system before it is brought in through legislation expected to be tabled in Autumn 2023. The committee met with the lead medical examiner for Wales in May 2023 to discuss key issues.

## Clinical prescribing report

This report, which is now on the FSEC website details best practices for prescribing and is the result of outstanding effort from the former co-chair, current chair, the committee, and other committees for feeding into this. The report has gained some positive media attention and we look forward to building on its success.

## Inter-union dialogue

At the direction of FSEC, the BMA has been further involved in discussing with other unions working in prison through the Joint Unions in Prisons Alliance (JUPA). While HMPPS have been difficult to work with at times, JUPA has accomplished much, and post-COVID the BMA is working hard to ensure a medical union perspective is heard. FSEC seeks to improve access to and the timeliness and quality of resuscitation in secure settings.

FSEC have proposed Motion 25 at this ARM, where we decry the current state of affairs in secure medicine in the United Kingdom. We are concerned about the erosion of the medical workforce in police custody and sexual assault referral centres, which is undermining the safe care of victims and those under arrest, as well as the whole criminal justice process. We insist that this appalling situation, which has occurred purely to save money, needs to be reversed.

Only by addressing critical healthcare to the most vulnerable populations within secure settings, including ethnic minorities, foreign nationals, and individuals with complex health needs, will we be able to reduce crime and inequity within our society.

While there are several challenges for providing adequate care to those in secure settings in the United Kingdom, FSEC will continue to lobby and campaign for our members, who in turn can best assist some of the most vulnerable in our society.

FSECs national conference was deferred due to the rail strikes and will now take place in July 2023.

FSEC have met with the lead medical Coroner for England in January 2023 to address the key issue of proportionality and fairness when deaths in secure settings are investigated.

FSEC met with the Prison and Probation Ombudsman in September 2023. The issue of clinical reviews was discussed in detail.

FSEC continue to promote and prioritise equality for staff and patients who are LGBTQ, transitioning/non-binary and the committee has worked closely with BMA representatives and PPG in this area.

**Dr Marcus Bicknell**

**Chair FSEC**

[Forensic and secure environments committee overview](#)