



Recommendations

Medical Care of Persons Detained Under the Terrorism Act 2000

The medico-legal guidelines and recommendations published by the Faculty are for general information only. Appropriate specific advice should be sought from your medical defence organisation or professional association. The Faculty has one or more senior representatives of the MDOs on its Board, but for the avoidance of doubt, endorsement of the medico-legal guidelines or recommendations published by the Faculty has not been sought from any of the medical defence organisations.

The Terrorism Act 2000

The power to detain is under Section 41 of the Terrorism Act and not PACE. The power applies to any part of the UK. The new Code of Practice came into force on 24 July 2006. The detention clock starts at the time of arrest and unlike PACE it does not stop whilst the detained person is in hospital. The first review should occur as soon as possible after arrest, second and subsequent reviews every 12 hours from arrest up to a maximum 48 hours. After 24 hours the review must be by a Superintendent. A warrant for further detention must be issued by a Magistrates Court for periods after 48 hours. From 25/01/11 the maximum period of detention has reverted from 28 to 14 days. Once a warrant has been issued, reviews cease.

Medical implications and care

These different powers for detention, therefore, have implications for the medical care of detained persons who may be detained for longer periods and where allegations of ill treatment are likely to be greater. The Forensic Physician should consult with the custody officer to assess risks to their own personal safety. All persons detained under the Terrorism Act 2000 should:

- Have an automatic medical examination on detention to assess fitness to detain and interview and additionally, a complete body surface examination to note any injuries. In view of the potential for hunger strikes, the detained person's weight should be measured. This assessment should identify any mental health and medical issues relevant to detention in custody and a care pathway and management plan agreed.

- Have a medical examination before release and also before and after being removed from the premises, again including a complete body surface examination to note any injuries.
- Be offered a daily medical and welfare assessment by a Forensic Physician.
- Have a careful assessment of welfare needs during their detention, including the need for special dietary requirements, hygiene needs, exercise, privacy, sleep and religious needs.

In view of the security implications of transferring patients to hospital, consideration should be given to arranging for specialist medical assessments to occur at the place of detention.

Assessments in this regard, particularly on initial reception, can be complex and time consuming and demand meticulous documentation. This work is challenging and can raise difficult ethical and human rights issues. It is recommended that in those areas where such detainees are regularly seen, a cadre of experienced doctors with Faculty Membership is identified who are willing to undertake this work.

Suitable healthcare professionals of both genders should be available and may contribute task specific skills as part of a fully trained multidisciplinary team led by the supervising forensic physician whose responsibility it is to manage the care pathway for a given individual. Any doctor or healthcare professional who suspects or is aware of ill treatment of a detainee must report this to the appropriate authorities.

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