

FACULTY OF FORENSIC & LEGAL MEDICINE

of the Royal College of Physicians of London



Registered Charity No 1119599

PRESIDENT'S REPORT FOR THE ANNUAL GENERAL MEETING 6TH MAY 2022

I can hardly, believe that I have been in office for a year and in another year's time, I shall demit from office! During my first year, we have seen a slow but steady emergence from lockdown and all the associated difficulties and restrictions. Nevertheless, one swallow doesn't make a spring and as Neils Bohr famously said, *prediction is very difficult, especially if it's about the future*, I will not enter into speculation about when the pandemic will end, but I am cautiously optimistic about a progressive return to "normality", notwithstanding the present uncertainty about the Ukraine.

The FFLM cannot and should not remain static and I believe that one of the most important areas in which this should occur, lies with encouraging medical and dental students, as well as recently qualified practitioners, to consider careers within forensic and legal medicine in its broadest sense.

Since becoming President, I have tried to address this in a number of ways. Firstly, I have co-opted Dr Carl Gray, Consultant Histopathologist and former Medical Director of the Harrogate NHS Foundation Trust to the Board, as he has a wealth of experience inspiring students and doctors alike, to consider such careers. I will be liaising regularly with him and reporting back to the Board on progress.

Secondly, in my own medical school (HYMS), I am accepting elective students to spend time with me and have set up a well-structured programme that includes attending inquests, seeing routine and Home Office post-mortem examinations, observing the work of medical examiners and participating in a research project, which will hopefully result in the production of a paper suitable for publication. The fact of the matter is that I received more applications than my office could cope with, and entry to the programme needed to be competitive; the interest in forensic and legal medicine is there, but what is the best way to develop this and provide appropriate opportunities?

I have recently circulated all the undergraduate medical schools in the UK and Ireland informing them about the FFLM and asked the Deans of these institutions to consider informing their undergraduates about us and student membership. I also propose to share with them our experiences of undergraduate electives, in the hope that some institutions who do not have such a programme, might consider developing one.

Thirdly, Dr Paul Johnson, a forensic pathologist has very generously endowed an undergraduate prize and medal, in memory of his late brother. I have circulated details of this to all medical schools and details have appeared in the FFLM's bulletin. Hopefully, there will be a good response and the winner will present a paper at next year's conference and receive the prize and medal.

Our membership across all categories currently stands at 774. In the first few weeks of my Presidency, I took steps to increase our membership by contacting various colleges and institutions whose members might be interested in joining us. Given the national shortage of pathologists willing to do routine coronial autopsies, I had a number of meetings with the Royal College of Radiologists in the hope that radiologists with an interest in cross-sectional imaging who report on virtual post-mortem examination, might wish to join the FFLM, but to date, the

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response has been disappointing. I propose to continue with this membership drive and as you will all appreciate, our members are the FFLM's most important and valued asset.

One of the things that has most impressed me is the adaptability of our membership and how many of you have portfolio careers. Recent changes, particularly in London, have altered the dynamic between the police and FMEs; many have had to find alternate streams of income, such as becoming medical examiners. I suspect this particular trend will continue, as more police forces adopt Healthcare Professionals other than FMEs to do the work traditionally carried out by FMEs.

At the beginning of the year, we had a very successful Strategic Planning Day and one of the key points that delegates highlighted repeatedly was the need for us to have specialty status. Our first unsuccessful application for this, was obviously a great disappointment and obtaining information about why we were unsuccessful continues to be problematic. Such information is essential for us to plan our second application. Prof Carol Seymour has made a freedom of information request to determine the reasons for our initial failure, but as of yesterday, which was the deadline for disclosure, nothing has been heard. I am frustrated as are the senior officers and membership about this glacial if not tectonic progress, but I hope by the time of the AGM, Carol will have obtained some clarity, which I can then report to you. Notwithstanding this, the goodwill which we are being shown in respect of our quest for specialty status by our own College, as well as by partner organisations is most encouraging.

Another matter which arose following the Strategic Planning Day was the enthusiasm from our overseas members to become more involved in the FFLM. A number of delegates suggested that an overseas members' representative should be co-opted to the Board, and I believe this would be an excellent idea and will endeavour to put this in place.

The profile of the FFLM needs to be raised. I am reliably informed that the Royal College of Anaesthetists used to have an *Anaesthetic Awareness Day*, as it was the public's perception that anaesthetists were not doctors but technicians! The FFLM welcomes practitioners from a range of disciplines and one suggestion made at the Planning Day, was to have a series of a *day in the life of* articles, showing the public what for example a FME, MLA, Custody Medicine practitioner, forensic pathologist or coroner, to name but a few do. The Royal College of Pathologists for example, has a very "catchy" slogan – *the science behind the cure*. They host an event to this effect. I looked at their website and saw the template for this. It had a target audience of students of 16 – 18 years old, all members of the Trust in which the event would take place (Countess of Chester Hospital NHS Foundation Trust) and also the public. Its objectives were stated as raising awareness of the central role pathology plays in the diagnosis and treatment of disease and to encourage students to consider pathology as a career.

We need to be doing something analogous. I will be suggesting that an ad hoc committee is formed of those interested in this venture. If other colleges can do so, can we!

I hope you all have an enjoyable time at the conference and as you know, next year's conference will take place in York, and I will again look forward to welcoming you there.

Professor Paul Marks, BA, PFFLM