

## **Greater clarity required for prisoner health**

**10 May 2018**

Corrective services often transfer inmates to NSW hospitals for medical care, but what happens when a prisoner refuses medical treatment?

Dr Shrenik Hegde, a Senior Resident in Surgery based at Westmead Hospital, will today address this question at the Royal Australasian College of Surgeons' Annual Scientific Congress in Sydney, where he hopes to be able to bring clarity to other medical professionals in what can often be a very difficult area.

"When a prisoner is brought in for treatment, but refuses it is often a highly stressful situation and is usually detrimental to the patient's health," Dr Hegde said.

"There are a multitude of reasons why a patient may refuse medical treatment, regardless of whether they are a prisoner or otherwise.

"This may include a range of language communication barriers, the physical illness itself (which may temporarily impact upon judgement and capacity to make informed decisions), and particularly psychiatric disorders.

"It has been observed in Australia there has been increase in the growth of imprisonment of those with mental, cognitive and multiple disabilities<sup>[1]</sup>.

"A NSW survey of prisoners found a 12 month occurrence of any psychiatric disorder of 74% amongst prisoners compared to 22% in the general population<sup>[2]</sup>. This may be one example of a why patient who presents in custody may be averse to receiving treatment in any form."

Dr Hegde has conducted significant research in to this area and the relevant New South Wales legislation. His research has included consulting senior legal sources, which has helped to establish a set of guidelines which he hopes will simplify the process for clinicians.

"For inmates transferred to a NSW hospital for treatment, the standard policy for obtaining consent applies and the right to refusal exists for the competent patient.

"Patients in custody at the correctional facility will be under the jurisdiction of Justice Health however when brought to a NSW hospital in custody, the NSW health policy directive, 'Consent to Medical Treatment' will apply.

"During my process of investigation, I found useful avenues of information which assist medical practitioners who find themselves with similar uncertainties. Practitioners may contact their own medical indemnity insurer and in particular, their relevant appointed solicitor who can provide expedient clarity on a range of medico-legal queries," said Dr Hegde.

The Royal Australasian College of Surgeons (RACS), in partnership with the American College of Surgeons (ACS) is hosting its 87th Annual Scientific Congress (ASC) this year at the Sydney International Convention Centre from 7-11 May for a series of workshops, discussions, plenaries and masterclasses.

For more information about the Annual Scientific Congress please visit: <https://asc.surgeons.org/>

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## About the Royal Australasian College of Surgeons (RACS)

RACS is the leading advocate for surgical standards, professionalism and surgical education in Australia and New Zealand. The College is a not-for-profit organisation that represents more than 7000 surgeons and 1300 surgical trainees and International Medical Graduates. RACS also supports healthcare and surgical education in the Asia-Pacific region and is a substantial funder of surgical research. There are nine surgical specialties in Australasia being: Cardiothoracic surgery, General surgery, Neurosurgery, Orthopaedic surgery, Otolaryngology Head-and-Neck surgery, Paediatric surgery, Plastic and Reconstructive surgery, Urology and Vascular surgery.

[www.surgeons.org](http://www.surgeons.org)

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1. Baldry, Eileen & Russell, Sophie. (2017). The Booming Industry continued: Australian Prisons A 2017 update.
  2. Butler, T., Allnutt, S., 2003 Mental Illness among New South Wales Prisoners. NSW Corrections Health Service, Sydney.
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