Mr. Denis Griffin  
Secretary to the Expert Group  
The Irish Prisons Service  
St. Stephen’s Green House  
Earlsfort Terrace  
Dublin 2  

23rd March 2000.

Dear Mr. Griffin

Thank you for your letter of 10th February inviting Comhairle na nOspidéal to forward a submission to the Group reviewing the structure and organisation of prison healthcare services. The matter was considered at the by Comhairle na nOspidéal at its meeting yesterday.

Functions of Comhairle na nOspidéal

Under Section 41(i) b of the Health Act 1970, it is the statutory function of Comhairle na nOspidéal to regulate the number and type of appointments of consultant medical staffs and such other officers and staffs as may be prescribed in public hospitals; to specify qualifications for these appointments and; to advise the Minister or any body established under this Act on matters relating to the organisation and operation of hospital services.

General Policy

Comhairle na nOspidéal is of the view that ideally, appropriate health care services including consultant medical and psychiatric services should be provided to prisoners by the health boards / voluntary hospitals via interagency agreements with the relevant prison authorities. Where specialist services are not available locally, alternative arrangements are required. Its recommendations, polices and structuring of consultant posts have, to date, reflected this view.

In relation to the organisation of prison health care services, the role of Comhairle in the regulation of appointments of consultant medical staff is of particular relevance – its remit does not extend to primary care or public health. In the exercise of its statutory function in the regulation and structuring of consultant posts Comhairle requires formal applications from employing authorities to enable its recommendations and policies regarding posts to be acted on.

In the context of its statutory role, Comhairle has - over the past decade - made recommendations regarding sessional commitments to prisons for consultant forensic psychiatrists, consultants in infectious diseases and consultants in genito-urinary medicine. Its recommendations regarding specific consultant posts in these specialties are set out below:
Forensic Psychiatry
In 1999, Comhairle’s consideration of the structuring of an additional post of consultant forensic psychiatrist was guided by a submission entitled "The Future of Psychiatry in Ireland" from the Royal College of Psychiatrists (Irish Division). This submission recommended a "more comprehensive forensic psychiatry service to provide suitable treatment in prisons and special units." It was subsequently decided by Comhairle na nOspidéal in February 1999 to approve the appointment of an additional Consultant Forensic Psychiatrist under the Eastern Health Board to be based at the Central Mental Hospital, Dundrum, (five sessions per week), with four sessions to the Prison Service, initially Mountjoy and two sessions for risk assessment evaluations in the general psychiatric services.

Infectious Diseases and Genito-urinary Medicine
In 1992, Comhairle na nOspidéal produced a report entitled "Aids at Consultant Level" which was central to the recommendations of the National AIDs Strategy Committee (NASC) regarding consultant appointments. Earlier this year, in response to a request from the Committee to evaluate the continuing relevance of its 1992 recommendations, Comhairle, inter alia, made specific recommendations regarding the prison services.

As the Minister for Justice, Equality and Law Reform had recently established an expert group to review the structure and organisation of prison healthcare services, Comhairle made recommendations only in relation to Mountjoy Prison as distinct from the prison services generally.

Noting that there was a concentration of a wide range of infectious diseases in one location - Mountjoy Prison, which is in close proximity to the Mater Hospital - and that a significant proportion of those prisoners in Mountjoy who suffer from any of the range of infectious diseases - including HIV/AIDS, hepatitis and STDs - are from South-West Dublin, Comhairle na nOspidéal considered it appropriate that sessional inputs from consultants in infectious diseases and genito-urinary medicine to the prison reflect these factors. The 1992 Report "Aids at Consultant Level" had stated that consultants in infectious diseases should have a sessional commitment to Mountjoy Prison and our recent response to NASC emphasised this policy. We recommended that consultants in infectious diseases based at the Mater Hospital and at St. James's Hospital should have formal sessional commitments to Mountjoy Prison. We also recommended that a post of consultant in genito-urinary medicine to be based at the Mater Hospital should have a sessional commitment to the prison.

Conclusion
Comhairle welcomes this opportunity to make a submission to the Expert Group regarding prison health care services. We hope our views will inform your deliberations and recommendations. The expert Group's recommendations will be taken into account in the operation and formulation of future Comhairle policy regarding such services.

Yours sincerely

Tommie Martin
Chief Officer