Editorial: A Faculty of Forensic and Legal Medicine at the Royal College of Physicians of London

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Readers may recall that in my presidential address to the Society on 14 October 2004, I spoke of the attempts that had been made by doctors working at the criminal medico-legal interface to find a base in academia for the discipline of clinical forensic medicine. These started in the late 1980s with an approach to the Royal College of Physicians (RCP) to establish a Faculty of Clinical Forensic Medicine. It failed, probably because the majority of potential members were general practitioners working part-time as police surgeons. Ambitious but unsuccessful efforts followed to win support for the founding of an independent College of Clinical Forensic Medicine.

Yet there was dogged determination to continue the search, spearheaded by members of the Association of Forensic Physicians (politically corrected from the Association of Police Surgeons). With the advance of focused public accountability and the various causes célèbres that hit the headlines in the next decades, the need for change became self-evident and medical academia became a little more receptive to the idea that forensic and legal medicine are intrinsically important and should be supported, since failures in these areas, so popular with the media, have reflected badly on the public perception of the profession in general, with unwelcome consequences that cannot be ignored.

Last September, the RCP invited specialist doctors, significantly from three groups, to apply for Foundation Fellowship to kick start a new Faculty of Forensic and Legal Medicine. These groups were forensic physicians, a term now coined for police surgeons or those who were police surgeons and now accept instructions from defence lawyers, medically qualified coroners and medically qualified advisers to the medical defence organisations. An article announcing the new faculty in the British Medical Journal’s BMJ Careers supplement – but why did it not appear in the main journal? – was published in late January. It stated that the faculty had been established by the RCP “following representations from these three groups”.

So we see that there had to be more cohesion at the medico-legal interface, encompassing, in particular, those areas which generated the most criticism – think of rape, sudden infant deaths and Shipman for a start. Given this cohesion, it is not surprising that the Home Office felt able to support the project, and this probably was crucial when the RCP made its decision. The title of the new faculty, with the inclusion of “Legal Medicine”, also reflects this train of thought. Clinical forensic medicine has been grossly undervalued as a medical discipline and this has to change. It has to be recognised as being as fundamental to forensic medicine as are forensic pathology and forensic psychiatry.

The BMJ Careers article gives the aims of the new faculty as:

“to promote the advancement of research, education and knowledge in the field of forensic and legal medicine; to develop and maintain the good practice of forensic and legal medicine by ensuring the highest professional standards of competence and ethical integrity; to act as an authoritative body for the purpose of consultation in relevant matters of educational or public interest; and to establish a career pathway in forensic and legal medicine and achieve full recognition of this specialty.”

In short, exactly what is needed and has been needed for far too long.

The needs of the criminal justice system, vis-à-vis the medical profession, are greater than those of its civil counterpart at this time, but the RCP has a responsibility to ensure that the
faculty lives up to its name and supports legal medicine in its widest sense. We now have a great opportunity to ensure that medico-legal matters are gathered together, dynamically reviewed in the light of our evolving 21st century society and that changes are made where changes are needed. There will be no room for professional protectionism and there must be no failure to work hand-in-hand with the legal profession. We have had such cooperation in the Royal Society of Medicine’s Section of Clinical Forensic and Legal Medicine for nearly twenty years, and it works. I had hoped for a national medico-legal organisation encompassing the art of medicine, the wisdom of the law and the evidence-producing abilities of forensic science; we may get there in the end, but the foundation of the RCP’s new faculty is a most significant and important step forward. It merits total support.