

Ethics Behind Bars The Bioethics Committee In The Florida Department of Corrections

by Charles Matthews, MD

For several decades, bioethics committees have existed in the free world, mostly in hospital settings, to address the ethical concerns involved in providing health care to their patients. Concurrently, many universities and other educational facilities established ethics departments. However, when I first became involved with the Florida Department of Corrections in late 1989, I found nobody anywhere in the country, to whom I could turn to address the special ethical dilemmas involving prisoners in this fourth largest prison system in the country.

I had prior experience with bioethics committees, having been a founding member of Sarasota Memorial Hospital's committee in 1983. As was typical of most hospital-based committees, there were monthly meetings, to discuss ethical problems related to that hospital's patients, to consider and recommend policies, and to provide consultations as needed.

The prison system was a stark and massive contrast to the hospital environment. Sarasota Memorial was an 800-bed community hospital, serving a small part of the state. In contrast, the Florida state correctional system prisons held 38,000 prisoners when I became its medical director in late 1989; it has since grown to the current count of 72,000 incarcerated in the major institutions (these numbers do not include federal prisons nor county jails in Florida). These prisons are located all over the state, from the Keys to the remote end of the panhandle.

The inmates of our prison systems are disproportionately from minority groups, from the socioeconomically depressed, the undereducated. These

offenders enter the prisons with higher proportions of health problems than in the free world, both physical health and mental health disorders,

The federal courts had decreed that the incarcerated have a constitutional right to health care, with specific reference to the Florida system. However, it seemed to me the ethical considerations were more important than the courts' mandates. How much health should the state be providing our inmate patients? How to assure the quality of that care?

To assist our health care providers and the Department in identifying and addressing ethical issues, the Corrections Bioethics Committee was organized in 1993, with its initial meeting in 1994. It was the first of its kind in the nation, and is still unique. We were fortunate in having the enthusiastic participation of outstanding ethicists from four of Florida's major universities. By design, a majority of the committee's members are from outside the correctional systems.

The Mission of the Bioethics Committee:

1. Identify and analyze ethical issues and provide practical approaches to resolving those issues
2. Provide educational services to appropriate entities within the Department
3. Review and advise on policies
4. Conduct research on issues affecting correctional health care.

In addition to these functions, the committee provides consultations when requested by health care providers within the system.

With its members scattered throughout the state, monthly meetings in one set location were impractical. The committee meets quarterly, usually in one of the major institutions. It communicates mostly by E-mail, for consultations and other issues.

The Bioethics Committee has been of major help to the Department in many ways, especially by being

available for consultation, by assisting in the development of policies and by participating in educational workshops.

Among the ethical issues addressed by the Committee:

1. Inclusion of prisoners in investigational drug studies.

The Committee developed the policy for inclusion in investigational studies. This policy serves as the basis for all such studies throughout the Department.

2. Institutional Review Board.

The Committee made recommendations on the composition and function of the Department's IRB. Special consideration - any IRB dealing with prisoner subjects, must include a member who is a "prisoner or a prisoner advocate."

3. Executions

There have been lively discussions about the ethics of participation of health care providers in the execution process. The Code of Ethics of the American Medical Association proscribes such participation, but state statutes in Florida and many other states require such involvement.

4. End of Life Care for Prisoners.

With longer sentences and elimination of early release, the prison population is aging and is sicker. More will be dying in prison. The committee made recommendations and also conducted a panel presentation at a statewide workshop addressing this issue.

5. Palliative Care for Prisoners

Assure access for eligible prisoner patients. Monitor appropriateness and adequacy of program.

These are but a few of the issues addressed by the Committee. The committee is active, with spirited discussions. It has been of substantial help to the Department in resolving ethical concerns, and it is hoped that this unique body will continue to provide the correctional system with its perspectives, from both sides of the bars.

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