### Bioethics, Medicine and the Criminal Law

In recent years, debates have arisen concerning the encroachment of the criminal process in regulating fatal medical error, the implementation of the Corporate Manslaughter and Corporate Homicide Act 2007 and the recent release of the Director of Public Prosecution's assisted suicide policy. Consequently, questions have been raised regarding the extent to which such intervention helps, or if it in fact hinders, the sustained development of medical practice. In this collection, Danielle Griffiths and Andrew Sanders explore the operation of the criminal process in healthcare in the UK as well as in other jurisdictions, including the USA, Australia, New Zealand, France and the Netherlands. Using evidence from previous cases alongside empirical data, each essay engages the reader with the debate surrounding what the appropriate role of the criminal process in healthcare should be, and aims to clarify and shape policy and legislation in this under-researched area.

DANIELLE GRIFFITHS is a research fellow at the University of Manchester.

ANDREW SANDERS is Professor of Criminal Law and Criminology at the University of Birmingham.

Cambridge Bioethics and Law

This series of books was founded by Cambridge University Press with Alexander McCall Smith as its first editor in 2003. It focuses on the law's complex and troubled relationship with medicine across both the developed and the developing worlds. Since the early 1990s, we have seen in many countries increasing resort to the courts by dissatisfied patients and a growing use of the courts to attempt to resolve intractable ethical dilemmas. At the same time, legislatures across the world have struggled to address the questions posed by both the successes and the failures of modern medicine, while international organisations such as the WHO and UNESCO now regularly address issues of medical law.

It follows that we would expect ethical and policy questions to be integral to the analysis of the legal issues discussed in this series. The series responds to the high profile of medical law in universities, in legal and medical practice, as well as in public and political affairs. We seek to reflect the evidence that many major health-related policy debates in the UK, Europe and the international community involve a strong medical law dimension. With that in mind, we seek to address how legal analysis might have a trans-jurisdictional and international relevance. Organ retention, embryonic stem cell research, physician-assisted suicide and the allocation of resources to fund healthcare are but a few examples among many. The emphasis of this series is thus on matters of public concern and/or practical significance. We look for books that could make a difference to the development of medical law and enhance the role of medico-legal debate in policy circles. That is not to say that we lack interest in the important theoretical dimensions of the subject, but we aim to ensure that theoretical debate is grounded in the realities of how the law does and should interact with medicine and healthcare.

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# Bioethics, Medicine and the Criminal Law Volume II

Medicine, Crime and Society

*Edited by* Danielle Griffiths and Andrew Sanders



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This book is dedicated to the memory of Peter Gooderham

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## Foreword

Peter Skegg

Law and medicine have long intersected. It is only in recent decades, however, that the relationship of law to medical practice has received the sustained attention of more than a very few legal scholars.

The first British academic lawyer to develop a major interest in the relationship of law and medicine was also the greatest criminal law scholar of the twentieth century. Glanville Williams' *Sanctity of Life and the Criminal Law* was based on lectures he delivered in 1956 at Columbia University. It remains the best known of his contributions to what came to be known as medical law. However, it is his writings about the general principles of criminal law (and particularly the issue of criminal liability based on negligence) that have greatest relevance to some of the matters discussed in this volume.

The recent charging, trial and conviction of the late Michael Jackson's personal physician, Dr Conrad Murray, probably resulted in greater worldwide publicity about a case of 'medical manslaughter' than all previous cases combined. There is much in this fascinating volume that bears on such liability and the criminal liability of health professionals generally.

An especially welcome dimension of this volume is the way in which it draws upon the expertise of a wide range of academic disciplines and contributors. Although the experience and law of the UK (and especially England and Wales) are at the heart of much of this book, its approach is anything but insular. Information and perspectives from a range of other jurisdictions are provided. This adds to the value of this book, both within and beyond the UK.

It is a strength of this book that the contributors do not adhere to one party line: some favour less reliance on the criminal law in the regulation of medical practice, others are not opposed to the criminal law having a more extensive role; at least in some contexts. The issue of criminal liability based on negligence extends far beyond the realm of medical practice. So, too, does the associated issue of whether the claim, 'I never gave the least thought to the risk', should, if believed, always result in the

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acquittal of a cosmetic surgeon (or hunter) whose gross negligence results in another's death.

This book provides a wealth of information and insights about the relationship of criminal justice systems to the provision of healthcare. Even for those with a long-standing interest in such matters, there is much in this volume that informs, challenges and stimulates. It will be a valuable resource for all who grapple with these difficult and important issues.

### Acknowledgements

This edited collection is, along with its two companion volumes, one of the core outputs of an AHRC-funded project 'The Impact of the Criminal Process on Health Care Ethics and Practice'. We gratefully acknowledge the AHRC's support.

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This book has benefited from Dominic de Cogan's excellent assistance in copy-editing many of the chapters.

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Finally, Peter Gooderham commented on early versions of some of the chapters included in the collection and as a colleague and a friend was a great source of knowledge and support. Peter tragically died in the course of completing the collection and is greatly missed by us all.

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# Abbreviations

ACC ACPO AHN CDS CEMACH CEMD	Accident Compensation Corporation (New Zealand) Association of Chief Police Officers artificial hydration and nutrition continuous deep sedation Confidential Enquiry into Maternal and Child Health Confidential Enquiries into Maternal Deaths
CID	Criminal Investigation Department
CMACE	Centre for Maternal and Child Enquiries
CMCH Act	Corporate Manslaughter and Corporate Homicide Act
CNST	Clinical Negligence Scheme for Trusts
CPB	Center for Practical Bioethics
CPS	Crown Prosecution Service
CQC	Care Quality Commission
CSA	Controlled Substances Act
DEA	Drug Enforcement Agency
DGS	Direction-Générale de la santé
DPP	Director of Public Prosecutions
ECHR	European Convention on Human Rights
ECtHR	European Court of Human Rights
GMC	General Medical Council
GNM	gross negligence manslaughter
HCP	healthcare professional
HDC	Health and Disability Commissioner (New Zealand)
HMO	Health Maintenance Organization
HRRT	Human Rights Review Tribunal (New Zealand)
HSE	Health and Safety Executive
HSWA	Health and Safety at Work Act 1974
LAG	Legal Action Group
LHB	Local Health Board
LNS	Laboratoire national de la santé
MCA	Mental Capacity Act 2005
MHA	Mental Health Act 1983

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MM	medical manslaughter
MPA	Medical Practice Act
NHSLA	National Health Service Litigation Authority
NPSA	National Patient Safety Agency
NZMLRG	New Zealand Medical Law Reform Group
ONDCP	Office of National Drug Control Policy
PAD	physician-assisted dying
PAS	physician-assisted suicide
PCT	Primary Care Trust
PWH	people with haemophilia
RJ	restorative justice
SCCTD	Special Crime and Counter Terrorism Division
SCD	Special Crime Division
SHOT	Serious Hazards of Transfusion
VNRBD	voluntary, non-remunerated blood donation