

# **Experiences of Healthcare Professionals Caring for People from Prison in Acute Hospitals: Systematic Review Findings and Implications for Diagnostic Radiography Practice and Education**

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# Disclosure Statement



- This systematic review forms part of a fully funded PhD project at Birmingham City University (BCU).
- The authors declare no conflicts of interest.
- The views expressed are those of the authors and do not necessarily represent BCU or any participating institution.

# Outline

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- Acknowledgement



# Background

- Presently, more than 87,000 people have been detained in prison in England and Wales <sup>1</sup>.
- People in prison are more likely to be diagnosed with long-term health conditions <sup>2-4</sup>.
- Due to: overcrowding, poor nutrition, intravenous drug use and poor ventilation in prisons <sup>5-8</sup>.
- Long-term conditions may require imaging examinations, which may not be available in prison hospitals.
- Equivalence of care principle and UN Mandela rules support equal healthcare, but often not realised <sup>9,10</sup>.

# Aim

- To synthesise evidence on the experiences of healthcare professionals (HCPs) caring for people from prison in acute hospitals.
- To identify lessons transferrable to diagnostic radiography practice and education.

# Methods

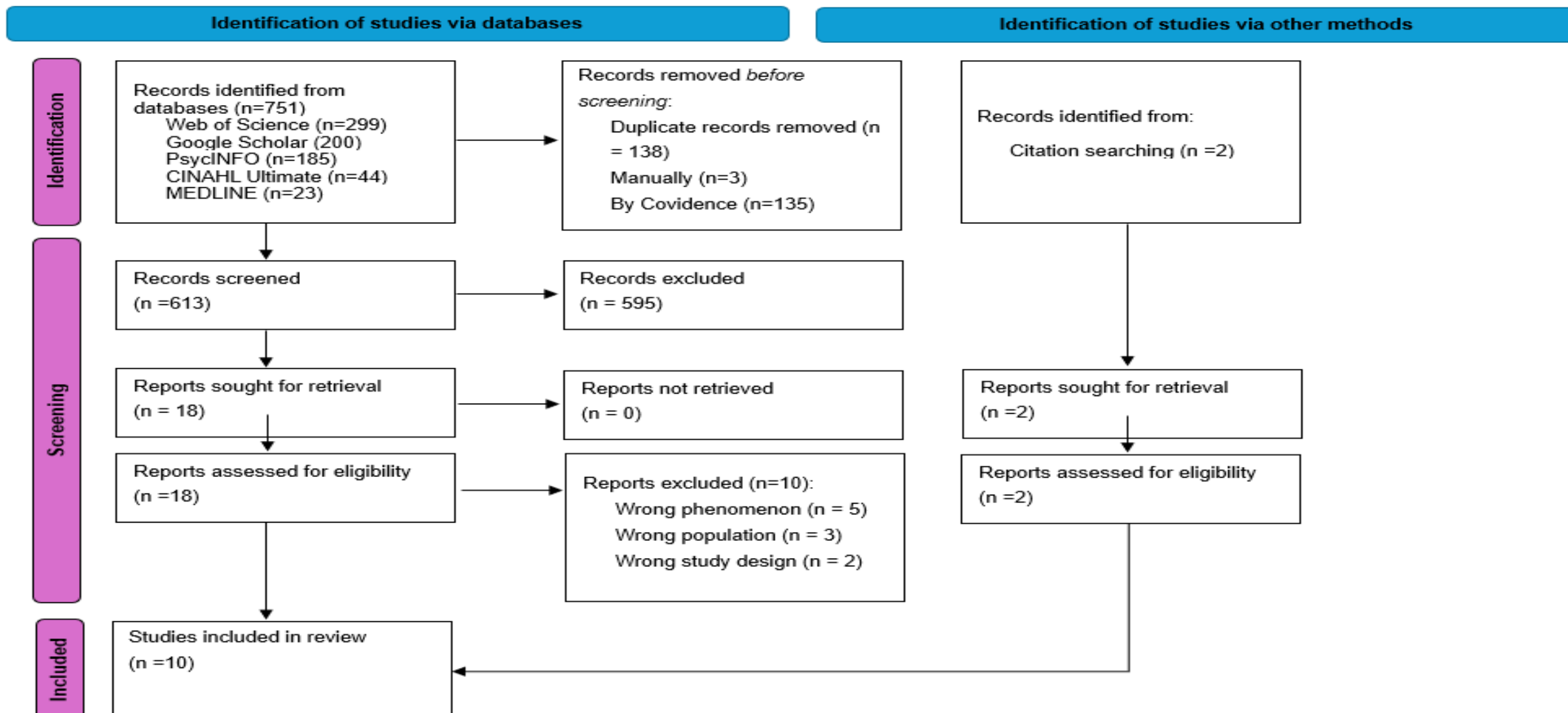
- PRISMA 2020 informed the systematic review
- PROSPERO protocol registration (CRD42025625502)
- Databases: CINAHL, PsycINFO, MEDLINE, Web of Science
- Additional searches in Google Scholar and manual citation searching
- Search range: Jan 2004 – Jan 2025

## Box 1: Search Strategy

Search categories	Search Terms
Population	“nurses” OR “doctors” OR “physicians” OR “clinicians” OR “healthcare professionals” OR “healthcare staffs” OR “Allied Health Professionals” OR “AHPs”
Phenomenon of Interest	“experiences” OR “lived experiences” OR “views” OR “qualitative” OR “phenomenology” “prisoners” OR “detainees” OR “criminals” OR “inmates” OR “incarcerated people” or “convicts” OR “patient-prisoners” OR “prisoner-patients” OR “incarcerated patients” OR “custody patients”
Context	“secondary care” OR hospital OR “acute hospital” OR “acute care” OR “inpatient care” OR “emergency care”

# PRISMA Flow Chart

Figure 1: PRISMA Flow Chart of Search Data



# Overview of Included Studies

- 753 studies were identified, 10 studies met the inclusion criteria
- 6 qualitative, 4 quantitative studies
- 4 countries were involved (USA, Australia, Kenya, Brazil)
- 1, 515 healthcare professionals were involved
- Roles: Nurses, nursing assistants, and nursing technicians, residents, interns, and medical students, physicians and consultants
- A narrative synthesis was completed



# Findings / Themes

- **Four key themes emerged**
  - 1. Emotional & Ethical Distress:** Moral distress, frustration, and emotional strain
  - 2. Disrupted Clinical Roles:** Prison officer interference and unclear protocols
  - 3. Dehumanising Practices & Bias:** Stigma, stereotypes, and physical restraints
  - 4. Advocacy & Empathetic Resilience:** HCPs advocated for dignity, empathy, training and local policy guidance

# Implications for Radiography Practice

- **Embed Inclusion Health:** Apply NHS Inclusion Health Framework (2023) principles <sup>13</sup>.
- **Ethical & Emotional Awareness:** Manage moral distress and tension between patient dignity and security protocols
- **Communication & Consent:** Maintain confidentiality and uphold patient autonomy of regardless prison officer presence.
- **Patient Positioning & Restraints:** Assess how restraints affect positioning, image quality, and radiation safety

# Implications for Radiography Education



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- **Curriculum Integration:** Embed prison healthcare, ethics, and Inclusion Health (Principle 3) into radiography curricula <sup>13</sup>.
- **Simulation-Based Learning:** Use authentic and high-fidelity simulations <sup>14</sup>.
- **Service User Involvement:** Involve people with lived experience in teaching through structured and supported participation <sup>15</sup>.
- **Reflective Practice:** Embed guided reflective activities to develop empathy, ethical awareness, and professional identity <sup>16</sup>.

# Conclusion

- Diagnostic radiographers play a crucial role in delivering equitable care for people from prison in acute hospitals.
- The review identified emotional, ethical, and procedural challenges among HCPs.
- Embedding Inclusion Health principles within radiography education and practice is important to better prepare diagnostic radiographers.
- The **EXPOSE Project** builds on this review to explore the lived experiences of diagnostic radiographers.

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## PHD RESEARCH PARTICIPATION INVITATION

### **EXPLORING THE LIVED EXPERIENCES OF DIAGNOSTIC RADIOGRAPHERS PERFORMING IMAGING EXAMINATIONS FOR PEOPLE FROM PRISONS IN ACUTE HOSPITALS. ( The Expose Project )**

#### Aim of Study

To explore the lived experiences of diagnostic radiographers performing imaging examinations for people from prison in acute hospital in the UK.

#### Who Can Participate

Diagnostic Radiographers who are currently practicing in the UK and have performed imaging examination for people from prison in an acute hospital.

#### What is involved

You will complete an online survey (5-10 minutes) to share your experiences. Participation is entirely voluntary and may choose to withdraw at any point before data analysis.

#### How to participate

***Click on the link or Scan this QR Code to access the participant information and survey***

<https://app.onlinesurveys.jisc.ac.uk/s/bcu/exploring-the-lived-experiences-of-diagnostic-radiographers-per>



#### **Ethics Approval:**

This study has been granted ethics approval by the HELS Faculty Academic Ethics Committee at Birmingham City University.

#### **For questions or more information, please contact:**

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## Join the Conversation

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# Acknowledgements

