Summary

The external datamonitor for forensic psychiatric inpatients
Development of a collaboration

In this report the development of a collaboration between seven (judicial) organizations is described. Each organization has data on their forensic psychiatric inpatients and in the collaboration the data is aggregated and put together to gather as much information on the patient as possible. The goal of the research that may be performed on the complete dataset is to enhance the knowledge and the efficacy of the Dutch tbs-order. This order is composed of mandatory treatment in a forensic psychiatric hospital (disposal at the state due to a mental disorder; art. 37a, b Dutch Criminal Code). The collaboration was inspired by the Parliamentary Committee who published an extensive research study into the Dutch tbs-system in 2006.

The goal of the project is to enhance the knowledge of forensic psychiatric inpatients (tbs-patients) by aggregating the data that is collected by different judicial parties. With this aggregation the knowledge about these tbs-patients that at present lies scattered within different organizations becomes more easily available for research purposes. In the longer term, it is thought that with the results of new research studies it will become possible to reduce recidivism rates.

The collaboration is called the External Monitor Tbs-patients (EMT). The seven Dutch (judicial) organizations that play a part in the EMT are the Custodial Institutions Agency (DJI), the three Rehabilitation Organizations (3RO), the Netherlands Institute of Forensic Psychiatry and Psychology (NIFP), the Research and Documentation Centre of the Dutch Ministry of Security and Justice (WODC), the Advisory Committee for Leave (AVT), the Expertise Centre for Forensic Psychiatry (EFP) and the Researchers Task Force (OTF). This last group is a group of senior researchers working in the Dutch forensic psychiatric clinics. The first five organizations have their own data on forensic psychiatric patients. These organizations have committed to collaborate with each other which among others means that they will make their data available to the other participants in the collaboration for research purposes. Representatives of these organizations together formed a steering committee that held a number of conference meetings to discuss the way the EMT should be set up.

Research questions

The main questions that were addressed in the bringing about of the collaboration were:

1. Which information is to be collected within the EMT?
2. In which manner is it possible to aggregate the data of the different organizations (anonymously)?
3. Which procedures should be followed when research questions are submitted to the EMT?
Results

Localisation of databases, data domains and aggregation possibilities
All EMT-participants have their own databases in which information on tbs-patients is being recorded. Each organization has a specific position in the extramural trajectory that a forensic psychiatric patient normally follows, with information about this part of the trajectory. Four stages may be identified, in brackets the organizations that have information on this part of the trajectory are mentioned:
1 Stage before the tbs-order is enforced (NIFP, 3RO);
2 Trans mural stage until test leave (AVT, 3RO, DJI);
3 Stage of test leave and conditional release until unconditional leave (3RO, AVT, DJI);
4 Stage after discharge (WODC).
The next step was to determine the type of information that would be interesting to collect in the EMT-collaboration. First, some broader categories of data were determined, so-called data domains. These are:
a General background information;
b Information of the length of trajectories;
c Decision making information on moving from one phase to the next;
d (psychological) condition;
e Recidivism rates.
These data domains were used to determine which specific information is available in each database.

Means of aggregation
Next, the question of concrete means of aggregation was asked. For this step an inventory was made of common person variables of the tbs-patients that are collected in all databases. After this inventory, a pilot study was set up. In this study the goal was to locate a group of 18 tbs-patients in all databases. The analyses showed that it was possible to find these 18 patients based on person variables that were shared from one organization to the next.

EMT-procedures
In this developmental phase of the EMT a first set of rules and regulations on EMT-research proposals were set up. A proposal for EMT-research may be submitted at each day of the year. The submission of an EMT-proposal may be done by sending an email or filling out a web-based form and sending this to the EMT-secretary. There will be a research committee set up that looks at the EMT-proposals. The members of the research committee are (senior) researchers or other people with noted experience in the field of scientific research from the organisations that are a member of the EMT.

First experiences with EMT-research
There has been one study in the EMT-collaboration thus far that has been finished and one is on the way. The first study is a study into the trajectory of tbs-patients and the way each patient may be found in the databases of each organization. The second study is currently undertaken and involves a study into the way the nature of the psychopathology relates to treatment outcome measures. Furthermore there are a number of proposals for EMT-research available, one of which is the question how the violations of conditions during the trajectory are related to recidivism.
Conclusion

*With the external monitor for tbs-patients (EMT) it is possible to aggregate available data on tbs-patients within different judicial organizations for research purposes.*

In the first pilot study results showed that the tbs-patients can reliably be found in all databases. The EMT-collaboration thereby seems to be a useful way to aggregate readily available data on tbs-patients, thereby making research into trajectories of tbs-patients possible.