## Routine Risk Assessment and Care Evaluation (RACE) in outpatient forensic psychiatry

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Routine risk assessment and care evaluation reduces the frequency of violent behaviour (primary outcome) in outpatient forensic psychiatric clients, and increases the quality of life, psychiatric and social functioning, and satisfaction with care of...

**Ethische beoordeling** Positief advies **Status** Werving gestart

Type aandoening

Onderzoekstype Interventie onderzoek

## Samenvatting

#### ID

NL-OMON23339

**Bron** 

NTR

Verkorte titel

**RACE** 

**Aandoening** 

Mental and behavioural disorders

#### **Ondersteuning**

**Primaire sponsor:** Initiator Division of Forensic Psychiatry Mental Health Organization Drenthe

Performer Rob Giel Research Center for Mental Health Services Research Department of Psychiatry University Medical Center Groningen

**Overige ondersteuning:** Netherlands Organisation for Health Research and Development

(ZonMw)

Mental Health Organization Drenthe

Mental Health Organization Lentis

Mental Health Organization Friesland

Rob Giel Research Center for Mental Health Services Research Department of Psychiatry University Medical Center Groningen

#### Onderzoeksproduct en/of interventie

#### **Uitkomstmaten**

#### Primaire uitkomstmaten

The proportion of clients showing 'violent behaviour' (including criminal behaviour, physical violence, and verbal aggression) in the six months prior to follow-up (at 18 months or end or treatment). Information on violent behaviour is gathered in two ways. First, by continuous registration of violent incidents by the case manager, as part of the medical record of clients in both research conditions. And second, by self-report in a follow-up interview. Any reports of a violent incident is judged by a panel of forensic psychiatric experts, who will be blind about the research condition of the client, as will be the interviewers.

## **Toelichting onderzoek**

#### Achtergrond van het onderzoek

Violence risk assessment for forensic psychiatric patients has been dominated by the problem of violence prediction for release decisions. What has been neglected is the problem of ongoing risk monitoring and management for clients who receive (after)care in the community. This setting calls for a different approach; one that focuses on dynamic factors within the individual and situation, that determine the short term risk for violence and identify needs for risk management measures.

We developed a risk assessment procedure for outpatient forensic psychiatry, that is integrated with routine care evaluation by the case manager and client. In a pilot study we tested its feasibility and predictive validity for violent behaviour. In the present RCT we test whether routine Risk Assessment and Care Evaluation (RACE) actually prevents violence.

#### Doel van het onderzoek

Routine risk assessment and care evaluation reduces the frequency of violent behaviour (primary outcome) in outpatient forensic psychiatric clients, and increases the quality of life, psychiatric and social functioning, and satisfaction with care of the clients

#### Onderzoeksproduct en/of interventie

In the experimental group routine risk assessment and care evaluation is carried out at every formal evaluation of the care plan, but at least once every six months. It consists of (1) an assessment of the violence risk of the client by the case manager using the START (Short-Term Assessment of Risk and Treatability), and (2) a standardized evaluation by the case manager and client of the client's needs for care and satisfaction with care (covering a.o. the view of the client, the view of the case manager or care team, and discussion of adjustments to care). In the control condition no formal method of risk assessment or care evaluation is used, and Care-As-Usual is offered.

## Contactpersonen

#### **Publiek**

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#### Wetenschappelijk

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### **Deelname** eisen

# Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

Included are clients of outpatient forensic psychiatric services.

## Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

- 1. Seen less than once a month on average by their case manager;
- 2. Whose treatment is expected to end within three months.

## **Onderzoeksopzet**

#### **Opzet**

Type: Interventie onderzoek

Onderzoeksmodel: Parallel

Blindering: Enkelblind

Controle: Geneesmiddel

#### **Deelname**

Nederland

Status: Werving gestart

(Verwachte) startdatum: 01-09-2007

Aantal proefpersonen: 680

Type: Verwachte startdatum

## **Ethische beoordeling**

Positief advies

Datum: 27-08-2007

## Registraties

### Opgevolgd door onderstaande (mogelijk meer actuele) registratie

Geen registraties gevonden.

#### Andere (mogelijk minder actuele) registraties in dit register

Geen registraties gevonden.

#### In overige registers

Register ID

NTR-new NL1013 NTR-old NTR1042

Ander register : ZonMw 100-003-023

ISRCTN wordt niet meer aangevraagd

### Resultaten