

TBS-PLAATSEN IN PENITENTIAIRE INRICHTINGEN

Management Summary

MANAGEMENT SUMMARY

Occasion

Since a number of years, the tbs sector¹ has suffered from a lack of capacity. As a result of this deficit, a considerable number of tbs detainees have to wait for tbs treatment after their detention period has ended. While waiting for treatment, these delinquents (also called *passanten*) are detained in a penitentiary institution (pi).

In order to cope with this capacity problem, at the beginning of 2006 six projects have been set up in order to create tbs capacity in the prison system. Together these projects had to provide a capacity increase of 146 places. The (tentative) duration of the projects is seven years, from 1 January 2006 to 1 January 2013.

By order of the Dutch ministry of Justice, Regioplan conducted a research for WODC (Scientific Research and Documentation Centre) on the question to what extent penitentiary institutions can be adapted for (medical) care/treatment of several target groups of tbs detainees.

A subsequent research question was to what extent this (medical) care/treatment could be realised in practice in the penitentiary institutions adapted to this purpose. In addition, the question had to be answered to what extent the capacity increase in the pi has solved the capacity problem.

Regioplan used the following forms of data collection:

1. inventory phase;
2. audit with regard to projects and the relevant tbs clinics;
3. collecting and analysing registration data;
4. in-depth interviews with regard to the projects and the relevant tbs clinics.

Short description of the six projects

The increase of tbs capacity took place in the following projects:

Wolvenplein project

The Wolvenplein project is a cooperation between the Dr Henri van der Hoevenkliniek and PI Utrecht (municipality of Utrecht). The tbs department is located on the premises of the pi. This project accommodates twelve psychotic patients. On the reference date of the research the project's capacity was fully utilised to accommodate the intended target group. The tbs department in PI Utrecht serves as an admission department.

Overmaze project

The Overmaze project is a cooperation between FPC De Rooyse Wissel and PI Limburg-Zuid (municipality of Maastricht). This tbs department is also

¹ Tbs: Dutch penal law procedure for detention under a hospital order of mentally disturbed violent offenders.

located on the premises of the pi. The aim of the project was to have twenty places ready by 1 January 2006 and to subsequently realise 24 more places before 1 January 2007. This objective has been achieved. The places concerned are intended for people with personality disorders. The department is subdivided into an admission ward and a long-stay ward.

Grave project

The Grave project is a cooperation between FPC De Rooyse Wissel and PI Noord-Brabant Noord (municipality of Landerd). In this project twenty tbs places have been created for people with personality disorders. The admission department comprises ten places. The remaining ten places are intended for unmotivated tbs detainees.

Grittenborgh project

This project is a cooperation between FPC Veldzicht and PI Noord (municipality of Hoogeveen). Twenty places have been created, which means that the intended result was achieved. Ten places are intended for unmotivated tbs detainees and the other ten places are meant for undesirable aliens. The tbs department is located within the pi.

Vught project

The Vught project is a cooperation between the Pompe Foundation and PI Vught (municipality of Vught). The intended capacity of the Vught project amounted to 36 tbs places on behalf of both a long-stay department and a treatment department for tbs detainees with a high PCL-R score. During the term of the project the capacity has been increased. At the moment there are 48 long-stay places and 24 treatment/admission places. The tbs departments are located on the premises of PI Vught, but in separate buildings.

Corridor project

The Corridor project is a cooperation between the Pompe Foundation and PI Noord-Brabant Noord (municipality of Landerd). The capacity amounts to forty tbs places and the chosen target group consists of long-stay tbs detainees. The Corridor is detached from the pi building and there are no pi-prisoners on the premises. Expansion within the prison system was never really considered. The Corridor will officially be transferred to the Pompe Foundation.

Suitability pi for tbs (medical) care/treatment

Regioplan concludes that the pi setting can be made suitable for part of the tbs (medical) care/treatment trajectory. The ultimate objective of tbs (medical) care/treatment is to reduce the risk of recidivism. In the process of reaching this goal, two phases can be distinguished, namely: a stabilisation/motivation phase and a resocialisation phase. The first phase is understood to mean adaptation of behaviour to new surroundings, establishing a daily routine, participation in the programme offered, preventing antisocial behaviour, stimulating acknowledgement of problems, participation in diagnostic procedures and taking prescribed medication when this is required. After this

first phase the focus can be shifted to the rehabilitation phase. In this phase tbs detainees are granted more freedom inside the institution and may request permission to go on leave. In this phase tbs detainees are also granted more freedom with regard to participating in (work and other) activities on the secured premises. With regard to the stabilisation/motivation phase pi's offer a suitable treatment environment, because in this phase the focus is on offering structure, setting boundaries, and functioning within a group. In this phase an advantage is gained due to the high degree of security in pi's, and the restricted freedom of movement in pi's. With regard to the treatment purpose 'resocialisation' Regioplan concludes that pi's do not offer a suitable treatment environment. Due to the limited freedom of movement in the pi's and the low number of available facilities, the pi setting offers insufficient opportunities to practice the various stages of leave-granting, and concomitant responsibilities. This conclusion – that it is not possible to make a pi environment suitable for the entire tbs (medical) care/treatment trajectory – implies that the flow-through of tbs detainees is an important precondition: as soon as the treatment starts to focus on resocialisation, tbs detainees should be enabled to flow-through to a clinic.

Suitability target groups

In addition to the conclusion that the pi environment is not suitable for the entire tbs (medical) care/treatment trajectory, Regioplan also concludes that the pi environment is not suitable for all the target groups of tbs detainees. Only target groups such as unmotivated tbs patients, admission patients (both psychotic patients and patients with personality disorders), tbs detainees with addiction problems, tbs detainees with a high PCL-R score, undesirable aliens with tbs, and long-stay patients who require a high degree of security, can be placed in a tbs department in a pi, provided that certain conditions are fulfilled.

Actual realisation of tbs capacity

The research report also focuses on the process of realising tbs capacity in pi's. Summarising we can state that the quality of the tbs places in the pi's complies with the stipulated formal requirements. However, the tbs places in the pi's are not or only partly comparable with tbs places in the main clinics. The differences are partly of a temporary nature and have to do with starting up tbs (medical) care/treatment programmes, additional training of personnel and the realisation of new development. However, there are also structural aspects that influence the quality of tbs places. What are concerned here are the limited freedom of movement and the smaller supply of available (work) activities, caused by the smaller scale and physical characteristics of the premises.

If we consider the extent to which the six projects have solved the capacity problem, it must be concluded that the expansion – by means of the six projects – temporarily solved the inflow problems. However, within the tbs sector the problems of increasing inflow and stagnating outflow persist and this forms the core of the problem. A number of projects already provide a

structural increase of the total tbs capacity, however, more structural expansion continues to be necessary.

REGIOPLAN BELEIDSONDERZOEK

Nieuwezijds Voorburgwal 35
1012 RD Amsterdam

T 020 531 531 5

F 020 626 519 9

E regioplan@regioplan.nl

I www.regioplan.nl

Regioplan Beleidsonderzoek maakt deel uit van Ernst & Young