



I34 Pathways to Readmission: Investigating Patient Perspectives in a Forensic Psychiatric Setting

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Learning Overview: The goals of this presentation, in addition to adding to the literature of this understudied population, are to provide a theoretical framework through which readmission issues may be viewed, provide a methodology for other facilities to follow in order to identify patterns to readmission, and present any results from this site that may be applicable and useful to other facilities.

Impact on the Forensic Science Community: This presentation will impact the forensic science community by providing a theoretical and practical framework by which to identify and address patterns in forensic hospital readmission rates so that attendees may apply this information in their individual settings.

The average rate of readmission following discharge from a secure forensic psychiatric hospital is high, both in the United States and abroad.¹ This trend is associated with significant financial costs to involved systems, as well as substantial economic, social, and emotional ramifications for readmitted psychiatric patients and their caregivers, such that there is a critical need to better understand and respond to contributing factors. However, the circumstances of readmission to forensic hospitals have received relatively limited scholarly attention, particularly in comparison with the vast body of literature on violence risk. This is concerning given that rates of readmission are much higher than rates of violent offending among discharged forensic psychiatric patients.² Furthermore, existing research has largely focused on individual difference variables, and additional investigation is needed to identify potential environmental and systemic factors that may explain pathways to readmission and identify areas for intervention.³ Prior research suggests that high-risk psychiatric patients are able to prospectively estimate their risk for future violence with a level of accuracy comparable to the leading violence risk assessment instruments.⁴ Given that patient self-perceptions are a promising method of improving violence risk assessment, they are likely also a rich source of meaningful information on a broad range of factors relevant to risk of readmission. The purpose of the proposed study is to collect and analyze data from a pilot sample of forensic psychiatric inpatients in order to identify themes regarding the actual and perceived distal and proximal reasons for their readmission to a New England state hospital. The study aims to replicate previous research on individual characteristics of patients at risk for readmission and expand our understanding of the different trajectories and outcomes of forensic inpatients by investigating potential environmental and systemic risk factors.

Data will be obtained from qualitative analysis of in-person interviews of male inpatients from a strict security, New England state hospital. Data collection will likely be ongoing at the time of presentation. Interview questions were designed to capture individual factors that are theoretically and empirically linked to risk for readmission (e.g., substance use, symptom severity), as well as potentially relevant systemic and environmental factors (e.g., access to mental health resources, financial/housing issues, family discord). Data from the subject interviews will be analyzed using one or more qualitative approaches, including a thematic content analysis. This involves reviewing subject responses to define and name common patterns and to identify implicit as well as explicit themes. Results (as available) will be discussed in the context of practical applications for attendees, including how this methodology and any findings may be applicable to other sites for replication or for guidance in how to maximize community reintegration upon discharge. Limitations and future directions also will be presented.

Reference(s):

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2. Hayes, Heather, Richard I. Kemp, Matthew M. Large, and Olav B. Nielssen. A 21-Year Retrospective Outcome Study of New South Wales Forensic Patients Granted Conditional and Unconditional Release. *Australian and New Zealand Journal of Psychiatry* 48, no. 3 (March 2014): 259–282. <https://doi.org/10.1177/0004867413507610>.
3. Penney, Stephanie R., Lisa Marshall, and Alexander I.F. Simpson. A Prospective Study of Pathways to Hospital Readmission in Canadian Forensic Psychiatric Patients. *The Journal of Forensic Psychiatry & Psychology* 29, no. 3 (2018): 368–386. <https://doi.org/10.1080/14789949.2017.1395061>.
4. Skeem, Jennifer L., Sarah M. Manchak, Charles W. Lidz, and Edward P. Mulvey. The Utility of Patients' Self-perceptions of Violence Risk: Consider Asking the Person Who May Know Best. *Psychiatric Services* 64, no. 5 (May 2013): 410–415. <https://doi.org/10.1176/appi.ps.001312012>.

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