‘DE WOENSELSE POORT’
FORENSIC CLINIC BEYOND THE BORDERS
Client participation in forensic care

**Forensic Care**
De Woenselse Poort
The Netherlands

**E-Health**
Supporting modules and information available any time
Aiding self-observation, development and personal growth.

**Participation**
“For, by and with clients”
Let the client lead and share responsibility!

**Volunteers**
Supplementary and normalizing.
a non-professional approach; “a pauze from treatment and therapy”.

**Additional**
Program modules
Participation
Client Confidant (CC)
Complaints.

**Inform**
Inform client’s family and loved ones/network and involve support systems.

**Recovery-oriented Care**
Utilizing peer support workers for RoC, motivation recognition and acknowledgment, hope, perspective, empowering, support-oriented role model.

Hanneke Geldhof
Toon Walravens
PLANETREE
People first in a healing environment
12 components

1. Respectful and compassionate human interaction
2. Choice and taking responsibility through information and education
3. Excellent (medical) treatment and care
4. Healthy food, drinks and movement
5. Complementary care and purpose/quality of life
6. Humanized technology
7. Architecture and interior support health and healing
8. Friends, family and community have a positive role
9. Client satisfaction and experience
10. Motivated and satisfied employees
11. Healthy financial results
12. Good reputation and relations with stakeholders
DE WOENSELSE POORT

OUR PHILOSOPHY

De Woenselse Poort (DWP) offers high quality forensic and intensive care to adult psychiatric clients. Treating in safety is what DWP is all about. Besides the treatment of the psychiatric disorder, safety is paramount: safety of our clients, our staff and society at large. Our actions and our thoughts are guided by the Planetree philosophy: we offer client-centred care and care for the welfare of our staff. Some facts and figures: DWP comprises clinical care (260 beds) as well as ambulatory care (400 clients). Around 375 care workers support them working in different locations throughout the ‘De Grote Beek’ estate. DWP also facilitates the transition to general mental health care services: clients learn how to manage adverse symptoms over the long term, also after any criminal conviction. To this end, we form a bridge between forensic psychiatry, probation, general mental health care and social services.

The aim of treatment based on our forensic care pathways is to reduce and learn to control risk factors and facilitate a safe and responsible return to everyday life. The basis of our clinical multidisciplinary treatment is socio-therapeutic. This involves offering our clients an environment in which they can recover and learn to deal with their mental illness.

De Woenselse Poort works with 3 different care pathways:

• personality disorders
• psychosis, autism and mental disability
• intensive treatment

A care pathway includes all the activities necessary to properly treat the client from admission to discharge. Clients take a more active role in their treatment. As a result, treatment is better tailored, more effective and shorter. Care workers that treat the client, work within a specific care pathway.

Rehabilitation and reducing relapse: Aim of the treatment is to live an independent life as far as possible without ever running into the law again. During the last part of the treatment, we look at how this can best be achieved and which type of housing best suits the client. We call this part of the treatment the rehabilitation phase. During all the phases of the treatment, we work together with associated partners in different fields, such as healthcare, housing, work, finance, welfare, etc.

Client participation and involving clients is important to De Woenselse Poort clinic. From having a say and active participation to improving treatments and therapies and helping the organisation and personnel develop. Clients assist in the optimization of the HKT-R (risk assessment). This visualizes all the possible risk factors and how individual clients score against these factors. The assessment forms an integral part of the treatment plan. In this way, we can follow the client’s progress during treatment.
**PARTICIPATION LADDER, COPING MATRIX, ETC.**

1. Isolated
2. Social contacts outside the home
3. Participating in organized activities
4. Unpaid work
5. Assisted paid work
6. Paid work

- income
- daytime activities
- housing
- family relations
- mental health
- physical fitness
- addiction
- structuring day to day life
- social network
- social participation
- the law

*For, by and with clients*  
Let the client lead
PARTICIPATING AND CONTRIBUTING

Participation (= discussing issues and voicing ideas regarding the organization) for and by clients. The organization has an obligation to facilitate effective participation. The law states: “The care provider implements a client advisory board in each of its organizations”. DWP has two client advisory boards. One for the maximum security section and one for the minimum security section.

The client advisory boards are made up of representatives from the different wards within the high security section of DWP (including the TBS¹ department).

What do client advisory boards do? Client advisory boards look after/promote the collective interests of clients and discuss and offer ideas. They are legally entitled to advise management about any subject that may be of importance to the clients of De Woenselse Poort. For example about food, accommodation and provision of care. They also discuss and share decision making on developments and plans for the centre. The client advisory boards advise management on all of these issues. Why are client advisory boards important? Clients can react to and suggest improvements on any issue they deem important based on their own experiences. Their input is useful because clients will often address issues that others have not thought of. The board can also be of personal benefit for the client. You can practice skills such as discussing and debating, forming an opinion, cooperating, communicating, chairing, taking minutes, etc. Contributing and participating?

The Central Client Advisory Board meets with the Board of Directors every month.

Facilitating and promoting client advisory boards empowers clients. They become more emancipated, discerning and empowered in their contributions and ideas for improvements for a healthy organization, treatment and therapy program. Clients take responsibility for their own living conditions, treatment and quality of life.

¹ TBS (terbeschikkingstelling), translated literally ‘at the discretion of the state’ is a judicial instrument comprising a hospital order after a prison sentence, whereby the detainee undergoes mandatory treatment in a psychiatric hospital.
FAMILY AND CLOSE FRIENDS

De Woenselse Poort treats the client’s family members and close friends with respect, regard and care. We endeavour to keep those close to the client informed to the best of our ability. If they have questions? We will try to provide a full and accurate answer. Family members, friends or acquaintances can play a positive role in the wellbeing and recovery of our clients. That is why we welcome their involvement in the treatment of the client. We will, for example, inform family and friends about what treatment entails and what they can do to help, effectively establishing a (Patient-Family-Professional) Triad.

Within the care pathways emphasis is given not only to evidence based treatment possibilities but also to the role the family and informal caregivers can play and to their significance to the client, not only during treatment but especially after treatment.

**Significant others**

Because we think the support of the client’s social network is so important, we look closely at the relationships the client has with individuals in his or her social network. Those who wish to visit the client are screened both with a view to protect as well as to determine risks, aimed at optimizing treatment for the client. Relationships that are not supportive can become supportive, depending on how important the relationship is to the client. Oftentimes it is possible to repair relations by means of relationship counseling. In general it is acknowledged that: “the bigger and more supportive the network, the more successful the treatment program”.

Also working within the organization are family coaches and a family confidant who can be called upon. De Woenselse Poort clinic works with a number of family organizations. Family and friends are important in any persons life. That does not change when someone is admitted to a forensic clinic.

During treatment other clients and buddies also form a part of the client’s network.
RECOVERY-ORIENTED CARE PROMOTES PERSONAL GROWTH & DEVELOPMENT

Peer support expertise in De Woenselse Poort forensic clinic
An ex-client knows like no other what it means to have to deal with mental health problems, addiction and criminal acts. One’s life has for a short or mostly longer time been disrupted or turned upside down. Peer support workers have ‘been there’ and have recovered, despite ups-and-downs, set-backs and pitfalls. A peer support worker (PSW) has completed his own process of recovery and recognizes its importance. That experience can be used to help others in the same situation.

Recovery-oriented Care (RoC) is based on three pillars:
• Recovery is not the same as cure, meaning one learns to recognise ones own vulnerabilities as well as talents and learns how to take control of ones life again using the right tools.
• Empowerment is exploring and putting to good use ones own strengths, talents and qualities.
• Peer support expertise is applying the (collective) knowledge that people with mental disabilities have accumulated through experience.

Recovery-oriented Care focuses on:
• aiding individual and group recovery processes;
• promoting social participation;
• helping to improve the quality of care and quality of life by offering one’s experience. Help is offered to clients as well as care workers, health organisations and other interested parties.

Professional deployment of peer support expertise
If a person is able to use their experience to help others? Then there a several options available within De Woenselse Poort, both paid and unpaid opportunities. One of the possibilities is to do on the job training as an employee with a work/study contract combining work and study for a secondary or higher education qualification. The level of pay is in concordance with the job description and statutory rights. De Woenselse Poort offers coaching and intervision to employed or trainee peer support workers. Becoming a peer support worker in De Woenselse Poort is no easy thing. The person must be able to relate his or her experience to the benefit of others in a constructive and professional manner. The personal experience needs to match the needs of the target group. Being able to reflect upon one’s own actions and attitude is a necessity. At the time of writing there are seven peer support workers working within De Woenselse Poort, in the clinic itself or ambulatory. 2016 will see the realization of a special training program for peer support expertise, facilitated by Fontys Hogeschool (Fontys college), Markieza Academy for Recovery and peer support expertise and education department of GGzE (Mental Healthcare organization Eindhoven), unique in forensic care in Europe, creating eight new places for peer support worker trainees.
SPECIALIZED PEER SUPPORT EXPERTISE TARGETING PERSONAL GROWTH AND DEVELOPMENT
(RECOVERY-ORIENTED CARE)

Autonomous TRAINING SECTION: Courses in Recovery, conversation workshops, group meetings, buddy projects, providing information, recreational activities, Dutch Cell Dogs, Recovery for caregivers (family), trainee placements, et cetera.

A forensic peer support worker’s knowledge is characterized by:

- **Insight into his/her own behaviour and actions** relating to psychiatric problems, addiction, crime and nuisance behaviour
- Knowledge about the law, service providers, care workers, family and friends and self-help support systems (impact of processes)
- Work skills necessary to be able to work in a team and work dependably within the organization
- Knowledge of how society reacts to criminal or nuisance behaviour
- Knowing how to help others with similar problems or in similar situations in their process to recovery
- Understanding the language of the detainees/forensic clients
- Understanding of ones own pitfalls and being able to ask for help when it is needed.

A peer support worker with the right knowledge can be a positive force in prevention. They have after all succeeded in getting back on track after a set-back and understand the pitfalls like nobody else. With his ex-client experience he knows which thought processes precede criminal behaviour related to psychiatric problems and addiction.

(Preventative) deployment of peer support workers can take place:

- Before anything happens
- When there is a (heightened) risk
- After a crime has been committed
- During transition of care
- In the follow-up of care
BASIC PRINCIPLES OF E-HEALTH IN DE WOENSELSE POORT

De Woenselse Poort invests in e-Health within forensic care. E-health is primarily used to help clients have more say in their treatment.

In cooperation with the training section for ex-client expertise innovation in care has become one of the spearheads in policy for the coming years in De Woenselse Poort. The knowledge these ex-clients can contribute can be used to develop learning modules suited to the target group.

The approach of De Woenselse Poort is in keeping with the current radical shift/restructuring of healthcare. We strive to provide a tailored treatment program, which should result in better and quicker treatment and the client himself in large part being able to determine the pace and course.

- Clients need to (be able to) make their own choices about when and what to do (and how to do it) and take responsibility for their decisions. With help and advice from ex-client coaches, the multi-disciplinary team and coaches.

- Aimed at maximum self-organization clients and personnel work together to develop E-Health programs, applications and uses.

- E-Health modules are expected to shorten treatment time:
  - as treatment within the care pathway can be better streamlined by letting clients take more control and responsibility
  - E-Health modules are supplementary and in addition to the current treatment program.

In order to let the client take control, he/she will need to use the latest technology. This will demand a different way of thinking and acting from clients, personnel as well as the organization as a whole. Which itself is a huge collective challenge within a forensic setting. Especially finding the balance between management (safety, guidance, control, risk assessment) and letting go, allowing and providing more possibilities for the clients (let the client take charge responsibly).

It is important that the development and application of new initiatives has a positive effect on the client’s Recovery process. The factors of communication, information and treatment support are all of paramount importance in making the difference in treatment outcome and a client’s quality of life.

More and more we are focussing on ways to connect and share. All of our e-Health products aid recovery and the process of Recovery for clients, the organization and care workers. E-Health can help create a sense of normality. Just working together/with someone else person to person.

These are the principles that depict ‘normalization’. A ‘normal manner’ means the client is treated like any other person. No person has to ‘earn’ decent treatment, conduct and care. All people have a right to these things.
CLIENT RIGHTS AND DUTIES

Should a client have queries or complaints, there are a number of official bodies a client can approach and ways to have their opinion heard, that are regulated by law.

What if a client has a complaint?

Any complaints? Voice them! Everyone wants things to run smoothly in De Woenselse Poort. Nonetheless, problems can occur. If that happens, discuss the problem with the person concerned first. Oftentimes a talk will clear things up and lead to a solution.

If you find it difficult to talk to someone, you can ask another person to assist you, such as the professional responsible for your treatment, a manager or a client confidant (CC).

Submitting a complaint: If a problem cannot be solved in a mutually satisfactory manner, a client can submit a written complaint to the complaints committee.

How often can I receive visitors? Can I read what is in my digital medical file? The client confidant can give you independent advice about your rights and duties as a client of De Woenselse Poort.

Rights and duties

As a client of De Woenselse Poort you may have questions about your rights and duties. For example:

• How often can I receive visitors?
• Must I take the medication that is prescribed?
• Can I leave my room or the ward after being admitted to the clinic?
• How can I submit a complaint?
• Can I read what is in my (digital) file?
• How can treatment be stopped [against my will]?
• Et cetera

The client confidant (CC) listens to the client’s questions. Sometimes this can be answered immediately. If more is needed, then client and CC will discuss what to do next. Complaints: The CC can help clients with complaints. Often it helps to discuss the complaint with the attendant assigned to you or person responsible for your treatment. You can ask the CC to help you or ask him/her for tips on how to tackle the issue yourself. If talking doesn’t help solve the problem, then the CC can help you submit a complaint to the complaints committee. Independent advice: The CC is not in the employ of De Woenselse Poort but works for the national Foundation of CCs. This enables the CC to be independent. Confidentiality: Anything a client discusses with the CC remains confidential. The CC has taken a pledge of confidentiality. Unless the client has given his permission to do so, the CC will not discuss the client or the client’s problems with any one else. Getting in touch: If a client wishes to speak with a CC, he/she can call or send an e-mail to set up an appointment, so there are several ways in which you can get in touch with a CC in De Woenselse Poort.

Besides the Client Confidant, clients can also always appeal to their own lawyer, depending on the nature of the request.
VOLUNTEER WORK

Volunteers are indispensable in De Woenselse Poort. With their enthusiasm, commitment and contributions they are important to clients. A volunteer that would like to work in De Woenselse Poort can check out the options listed on the website. A volunteer can mean a lot to clients in De Woenselse Poort. Visits from volunteers help clients keep in touch with the outside world and at the same time, help society keep involved with the client. There are different activities the client and volunteer can undertake together. Such as: chatting with one another, taking a walk in the park, going shopping or cycling.

We already deploy volunteers to help out with the following activities and projects:

- Domestic activities and tasks such as helping out with the coffee-break, doing paperwork and maintenance tasks, helping in locations where clients meet
- **Recreational activities** like bingo, reading (to others), cooking, walking, outings, computer lessons, administration, cycling and sport & games, gardening
- **Buddy project**: a buddy helps a client in a natural way to gain more self-respect and self-confidence. A buddy helps the client feel in touch with themselves as well as with their surroundings. Visits are generally of a social nature, offering a welcome change to the daily grind of being a client. The buddy project is an initiative of the Volunteer Help Service Eindhoven. This external Buddy project is only for clients for whom a TBS (mandatory treatment order) measure applies.

At this time, several volunteers are active within DWP who visit people on a weekly basis or who help clients socially. Lending an ear, offering a shoulder to lean on. Taking a walk together, cooking et cetera. Not every aspect a client puts forward needs to be brought before a professional. Taking a walk together, drinking coffee and talking about everyday activities and life in general are just some of the activities clients value so highly in volunteers.

Volunteers are urged to utilize the expertise and training programs available within De Woenselse Poort. Volunteers follow an introduction course. They are for example trained in such matters as safe contact, important rules, alarm telephones.

Becoming a volunteer in a forensic clinic is not an easy thing to do. Just being committed and being enthusiastic is not enough. To be able to work in De Woenselse Poort every volunteer needs to have a CoC; a Certificate of Conduct. The Judicial Institutions Service (Dienst Justitiële Instellingen) provides partial project funding as well as proper screening, training and supervision. The service also provides competence profiles, contracts for volunteers and information guidelines on quality and safety for these volunteer services. De Woenselse Poort believes volunteers are extremely important and therefore treat them with care and respect.