

The role of the inspectorate in suicide prevention

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Aim of presentation

To present (preliminary) results of PhD research into the effectiveness of the Inspectorate in supervising and improving mental health care to suicidal patients.

Message (methods/findings)

A sample of 505 suicide notifications was studied regarding patient and treatment characteristics, as well as the responses made to these notifications by the Dutch Inspectorate over the period 1996-2006. In 2006, the Inspectorate responded with further questions or remarks to 38% of the suicide notifications. The responses most frequently concerned the evaluation of the care provided and the adequate treatment of psychiatric disorders. Inspectors tended to react more frequently when notifications involved patients who had been treated in mental health care settings for less than a year, and when the mental health institution formulated points of improvement in their policies. If a patient had been discharged from inpatient care in the 3 months preceding the suicide, the Inspectorate tended to react less frequently. In recent years, the Health Care Inspectorate has emphasized more frequently the significance of suicide risk assessment in their responses to suicide notifications.

Furthermore, about 40 therapists and medical directors were interviewed about their experiences with the suicide notification procedure. The results generally indicate positive attitudes about the notification procedure in terms of supervision on calamities in mental health care, but respondents were less convinced of its effects on suicide prevention. There also was confusion about the role of the Inspectorate. Therapists reported to be very sensitive to responses and criticism by the inspectorate.

Conclusions (lessons learned)

Opportunities exist for the Inspectorate to improve supervision regarding suicide notifications.