

Forensic Network Inpatient Census: 2024 Analysis

1. Introduction

The Forensic Network (FN) data collection through the annual census began in 2013. The census was designed as a Point Prevalence exercise, collating data on all Forensic Inpatients in FN sites on the 26th of November each year. The initial census in 2013 gathered a very wide range of data which have been used to inform a number of research studies and form the basis for the ongoing development of the FN Inpatient database. Subsequent iterations of the census have gathered a more limited data set including site, level of security, gender, age, primary diagnostic category, date of admission and source of admission, however the 2024 Census has also included data on patient primary and secondary ICD11 diagnosis for the first time. The criteria for inclusion within the FN Census have been very clearly defined from the outset and are provided below.

2. Method

The FN census is managed through the Forensic Network office. In advance of the 26th of November Census day, a list of identified and agreed contacts for each of the inpatient sites across the Forensic Network is generated. These contacts are emailed an excel file specific to their site, that includes a list of the patients identified as being a Forensic inpatient (meeting the FN Census Inclusion Criteria as provided below) at that site during the previous year's census. The site contacts are asked to identify all patients from the previous year's list who are no longer inpatients, having been either discharged to an alternative site or form of care, or having died. For these patients, further details are requested which include discharge date, and the site or alternative form of care to which the patient has been transferred on discharge. Site contacts are asked to update the previous year's information and to provide details for all patients detained within their site on the 26th of November. This provides an accurate record of all Forensic inpatients at each site on the 26th of November each year. These returns are collated and an annual FN Census report written to support internal monitoring.

FN Census Inclusion Criteria

The Forensic Network Inpatient census includes **all** patients from high and medium security establishments. For other establishments which employ lower levels of security provision, the following definition has been provided in order for clinicians to identify which of their patients are defined as mentally disordered offenders and will therefore be included in the census.

The Scottish Office policy on *Health, Social Work and Related Services for Mentally Disordered Offenders in Scotland* describes mentally disordered offenders as those who are: **“Considered to suffer from a mental disorder as defined in the Mental Health (Care and Treatment) (Scotland) Act 2003, whether or not they are, or may be, managed under its provisions and come to the attention of the criminal justice system or whose behaviour poses a risk of such contact”** (Scottish Office, 1999 – with update for 2003 Act)

This includes **everyone** currently being treated and detained under a criminal section of mental health legislation, namely:

- Assessment Orders
- Treatment Orders
- Compulsion Orders
- Interim-Compulsion Orders
- Restriction Orders

- Hospital Directions
- Transferred Prisoners
- Temporary Hospital Orders

Patients should also be included if, in this episode of care, they:

- a) have been directly transferred from high or medium security services,
- b) are detained under compulsory treatment orders and were previously subject to criminal section under the mental health legislation
- c) are on suspension of detention from one of the above orders or conditions

3. Census Results

Census returns in 2024 were received from all current forensic mental health inpatient sites. Census returns include all patients who meet the inclusion criteria as outlined above. This relates to patients being cared for under High, Medium and Low security levels, but those within the Low Secure category can include patients being detained within Intensive Psychiatric Care Units (IPCU), Locked enhanced rehabilitation wards or Open forensic rehabilitation services by meeting one or more of the inclusion criteria listed above. Those patients reported within the Census who are being provided care within an IPCU or other alternative form of low secure care are noted in table 2.2, however, for the purposes of the rest of the report all of those patients will be included within the Low Secure category.

The 463 patients recorded within the 2024 Census is the same as the 463 patients recorded within the 2023 Census. 131 of the 463 patients (28.3%) were admitted to their current site within the 12 months between 26/11/2023 to 25/11/2024. Of those 131 patients, 59 patients (12.7%) were admitted to their current site from other Forensic Network inpatient services and 72 patients (15.6%) were new admissions to the FN Census population. This relates solely to the patients' current admission and is not to say that those patients, or indeed those admitted from out with Forensic Network inpatient sites, may not have been previously admitted to forensic inpatient services. Section 3.5 provides further details on the source of all 463 patients' admission to their current site.

The list of units from which population data were received is given below in Table 1, along with details of the number of patients identified at each site in 2023 Census, and the bed capacity of each site based on the Forensic Network Bed report. Table 1 also includes data from the FN Weekly Bed report on 27/11/2023 and 25/11/2024 to support Quality Assurance of the 2023 and 2024 Census returns. The FN Bed report is generated by the FN office on a weekly basis to support monitoring of forensic service capacity and bed usage, however it should be noted that these additional data are not collected on the basis of the same inclusion criteria as the FN Census and only report bed usage of defined Forensic Low Secure beds, so do not include all IPCU or locked services that may have patients who meet the Census criteria.

This difference results in some disparities between the reported number of patients in some of the Low Secure sites noted below in Table 1. For some sites; the Ayr Clinic (-32), Surehaven (-12) and Hope House (-3), this is reflected in a lower number of patients being reported in the census than the bed report due to defined Forensic Low Secure beds included in the bed capacity being occupied by patients who do not meet the Census inclusion criteria, but still require the level of secure care provided within forensic low secure services as discussed further in section 4.

For other sites, Stratheden (+7) and Woodland View (+7), the Census data shows a higher number of patients as it includes patients who meet the Census inclusion criteria but who are being provided care within that services' IPCU or Forensic Rehabilitation ward, so are not included in the Bed report data as they do not occupy a defined Low Secure bed. The Census also includes patients from three sites;

Midpark (+6), New Craigs (+3) and the Royal Edinburgh Hospitals William Fraser Centre (+5), who do not currently provide data to the FN Weekly Bed report.

Table 1: List of Forensic Census sites and No of Patients 2023/2024

FN Census Sites	MI/ID/ Mixed	Site Bed Capacity* 2024	Census No of Patients 2023		Bed Report 2023**	Census No of Patients 2024		Bed Report 2024****
Low Secure								
Ayr Clinic (Independent)	MI	56 Mixed gender	19	7 Female, 12 Male	55	24	5 Female 19 Male	22 Female 34 Male
Beckford Lodge (NHS Lanarkshire)	MI	15 Male (Iona), 12 bed Mixed Gender (Gigha)*	27	1 Female 26 Male	15	27	1 Female 26 Male	15 Male 12 Mixed
Bellsdyke (NHS Forth Valley)	MI	12 Male	10 Male		10	9 Male		9 Male
Bellsdyke, Hope House (NHS Forth Valley)	MI	6 Female	1 Female		6	1 Female		4 Female
Kirklands (NHS Lanarkshire)	ID	3 Mixed	2	1 Female, 1 Male		1 Male		1
Leverndale (NHS GG&C)	MI	43	5 Female, 38 Male	35	2 Female 33 Male	39	41	4 Female 37 Male 4 Female 37 Male
Leverndale (NHS GG&C)	ID	10 Male	8 Male		9	9 Male		9 Male
Lynebank ID (NHS Fife)	ID	10 Male	11	1 Female 10 Male	9***	10	1 Female 9 Male	9 Male
Midpark (NHS D&G)	MI/ID	14 Mixed gender (IPCU/Locked Ward)*	6	1 Female 5 Male		6 Male		
New Craigs Hospital (NHS Highland)	MI	18 Mixed gender (3 Forensic beds)	7	1 Female, 6 Male		3	1 Female 2 Male	
Rohallion LSU (NHS Tayside))	MI	24 Male	14 Male		15	18 Male		19 Male
Royal Cornhill (NHS Grampian)	MI	32 Male: 8 Forensic Acute, 16 Forensic Rehab, 8 GW Lodge. 2 Female. 8 bed IPCU*	34	3 Female 31 Male	39***	36	4 Female 32 Male	2 Female 33 Male
Royal Edinburgh, William Fraser Centre (NHS Lothian)	ID	12 Mixed gender	5	2 Female, 3 Male		5	2 Female 3 Male	

Stratheden (NHS Fife)	MI	12 Male (Radernie), 8 Bed Hollyview (IPCU)*		21 Male		12***	17	9 Male Radernie, 3 Female 5 Male IPCU		10 Male
Strathmartine (NHS Tayside)	ID	8 Male		9 Male			8 Male		8 Male	
Surehaven (Independent)	MI/ID	21	6 Female 15 Male	7	1 Female 6 Male	21	8	1 Female 7 Male	6 Female 14 Male	
Woodland View (NHS A&A)	MI/ID	8 Male, 10 Bed Forensic Rehab (Open) *		21 Male		7	13 Male		6 Male	
Low Secure Total				237		237	236		254	
Medium Secure										
Orchard Clinic (NHS Lothian)	MI	32	2 Female 30 Male	30	2 Female 28 Male	31	33	2 Female 31 Male	2 Female 30 Male	
Rohallion (NHS Tayside)	MI	30 Male		28 Male		29	29 Male		29 Male	
Rowanbank (NHS GG&C)	MI	62	6 Female 56 Male	54	4 Female 50 Male	54	53	4 Female 49 Male	4 Female 51 Male	
Rowanbank National ID (NHS GG&C)	ID	12	4 Female 8 Male	10	2 Female 8 Male	11	9	1 Female 8 Male	1 Female 7 Male	
Medium Secure Total				122		125	124		124	
High Secure										
The State Hospital	MI	108 Male		89 Male		88	88 Male		88 Male	
The State Hospital	ID	12 Male		15 Male		15	15 Male		15 Male	
High Secure Total				104		103	103		103	
Total		600		463	29 Female 434 Male	465	463	30 Female 433 Male	481	

*Site bed capacity is taken from the FN Weekly Forensic Bed report (November 2024) where available. Where this is not available, bed capacity has been reported from the local Health Board ward descriptions. Further updates to the site bed capacity have also been included: Beckford Lodge; 12 Bed mixed gender Gigha ward added to FN Bed report figures in 2024. Royal Cornhill Ward details provided. Stratheden: Only 12 bed Radernie Low Secure ward included in FN Bed report, however patients within 8 bed Hollyview IPCU also meet Census inclusion criteria. Woodland View: Only 8 Bed Forensic Low Secure ward included in FN Bed report, but patients in 10 bed Open Forensic rehab unit can also meet FN Census inclusion criteria. Midpark is not a Low secure service but provides care to forensic patients within IPCU and enhanced Rehabilitation locked ward.

** Bed report data taken from the FN Weekly Bed report 27/11/23 where available. The numbers in the Bed Report column refer to the number of Forensic Beds that were occupied by patients during the week of the report. Not all units included within the Census are included within the weekly bed report. The Bed report only includes sites formally defined as High, Medium or Low Secure Services, and some of the low secure sites reporting patients who meet the Census inclusion criteria are not formal Low Secure Services.

*** Bed report figures from 20/11/23

****2024 Bed report data taken from FN Weekly Bed report 25/11/2024

3.1 Gender

The total FN inpatient population on 26th November 2023 as based on Census returns was 463 patients. The gender proportions of the total were 433 male patients (93.5%) and 30 female patients (6.5%). The number and proportion of female patients is consistent with the 2023 Census (29 Female patients; 6.3%). Table 1 above provides further details of the number of male and female patients recorded within each of the units. Table 2.1 shows the distribution of Gender across the hierarchical levels of security within the Networks inpatient services. As shown below the gender distribution varies across the different levels of security, although the High secure State Hospital currently only treats male patients.

Table 2.1: Gender Distribution by current level of Security

Current Level of Security	Female	Male	Total
High	*	103	103
Medium	7 (5.6%)	117	124
Low	23 (9.7%)	213	236
Total	30 (6.5%)	433	463

*There are no high secure services for women in Scotland. On 26/11/24 there were 4 women from Scotland in Rampton Hospital high secure female service.

3.2 Security

Of the 463 patients, 103 (22.2%) were in high secure care, 124 (26.8%) medium security, and 236 (51.0%) in conditions of low security. As noted in Table 2.2 below, of the 236 patients in lower security, 209 were within designated Low Secure forensic beds with 19 being provided care within IPCUs, 5 within an open forensic rehabilitation ward at Woodland View, and 3 within a locked enhanced rehabilitation ward at Midpark hospital. Ward 7c at Woodland View is an open forensic rehabilitation unit, providing care and treatment to support patients to work towards a return to living in the community.

The patients meeting the census inclusion criteria but reported as being provided care within IPCU conditions are from the Midpark (3), New Craigs (1), Royal Cornhill (3), Stratheden (8) and Woodland View (4) services. Further details are provided below, however for the purposes of the rest of this report patients will only be referred to as being within either High, Medium or Low secure care.

The majority of IPCUs listed above are directly linked to defined Forensic Low secure sites, and use their IPCUs to provide increased bed capacity for forensic patients. Midpark and New Craigs, while not defined Forensic Low secure services, provide local forensic patient provision through their IPCU or locked wards. The remaining 10 of the 15 IPCUs in Scotland were not included in the Network census. The last survey of all IPCUs in Scotland (*Mitchell, 1992*) found that 10% of IPCU patients were on a forensic order as listed above. This does not mean that their placement in an IPCU was in anyway inappropriate, and the FN is conducting further work to assess the current level of forensic patient care within Scottish IPCUs.

Table 2.2: Patient population by Current level of Security

	Total	New admissions in previous 12 months	Admitted from outside FN
High	103 (22.2%)	28 (27.2%)	18
Medium	124 (26.8%)	39 (31.5%)	21
Low	209 (45.1%)	48 (23.0%)	24
IPCU	19 (4.1%)	14 (73.7%)	9
Open Forensic Unit	5 (1.1%)	0	0
Locked Ward	3 (0.7%)	2 (66.7%)	0
Total	463 (100%)	131 (28.3%)	72

3.3 Diagnostic Category

The census provides data on patient type of diagnosis or diagnostic category. This is limited to the Mental Health (Care and Treatment) (Scotland) Act 2003 categories of Mental Illness (MI), Intellectual Disability (ID) or Personality Disorder (PD) patient. Table 2.3 shows a total of 463 patients, of which 393 (84.9%) were noted as MI patients, 60 (13.0%) ID, and 10 (2.1%) noted to be in the diagnostic category of Personality Disorder.

Table 2.3: Patient Diagnostic Category

Diagnostic Category	No. Patients	Female	Male
ID	60 (13.0%)	5	55
MI	393 (84.9%)	22	371
PD	10 (2.1%)	3	7
Total	463	30	433

Table 2.4 below provides details of the number of patients currently at each level of security, broken down by diagnostic category. The largest portion of the ID patient group, 36 (60.0%), are being provided care within Low secure services. Low secure services also see the highest proportion of their Forensic inpatients coming from the Intellectual Disability diagnostic category at 15.3% when compared to the proportion within the overall FN inpatient population of 13.0%. Medium secure services provide care to

the lowest number of ID patients, and those 9 patients represent only 7.3% of those cared for under condition of medium security. Of those patients identified as being with the diagnostic category of Personality Disorder, the majority (8) were being provided care within Low secure services, and no patients within the Personality Disorder category were reported under High secure care.

Table 2.4: Current level of Security by Diagnostic category

Current Level of Security	ID	MI	PD	Total
High	15	88	0	103
Medium	9	113	2	124
Low	36	192	8	236
Total	60	393	10	463

3.4 Primary and Secondary Diagnosis

The 2024 Census also asked sites to provide data on patient primary and secondary diagnosis using ICD11 diagnostic codes where possible. Table 2.5 below shows the primary diagnosis of all 463 patients within the 2024 Census. 272 (58.7%) patients were noted as having a primary diagnosis of 6A20 Schizophrenia, with a further 39 patients (8.4%) 6A21 Schizoaffective Disorder. 52 patients (11.2%) were noted as having a primary diagnosis of 6A00 ID disorders, and 19 patients (4.1%) as having a primary diagnosis of 6D10 Personality disorder. Only 188 patients (40.6%) were noted as having a secondary diagnosis with the most common secondary diagnosis being Personality disorder in 62 patients (13.4%) with 24 of those with a secondary diagnosis of PD being defined as 6D11.2 Dissocial Personality Disorder.

Table 2.5: Primary Diagnosis (ICD11)

Primary Diagnosis	Number of patients	%	High Secure	Medium Secure	Low Secure	Female Patients
6A20 Schizophrenia	272	58.7%	66	75	131	9
6A00 ID Disorders	52	11.2%	16	8	28	4
6A21 Schizoaffective Disorder	39	8.4%	7	14	18	4
6A6Z Bipolar unspecified	23	5.0%	5	8	10	4
6D10 Personality Disorder	19	4.1%	0	3	16	3
6A24 Delusional Disorder	17	3.7%	4	6	7	1
6A25 Psychotic Disorder	8	1.7%	2	4	2	1
6A02 Autistic Spectrum Disorder	6	1.3%	0	0	6	1
No Primary Diagnosis provided	4	0.9%	0	1	3	1
Other	23	5.0%	3	5	15	2
Total	463		103	124	236	30

Table 2.6: Secondary Diagnosis (ICD11)

Secondary Diagnosis	Number of patients	%	High Secure	Medium Secure	Low Secure	Female Patients
6D10 Personality Disorder	38	8.2%	14	8	16	3
6D11.2 Dissocial Personality Disorder	24	5.2%	11	4	9	0
6A02 Autistic Spectrum Disorder	18	3.9%	5	5	8	2
6C4E.1 Other Psychoactive Harmful use	16	3.5%	6	2	8	0
6A20 Schizophrenia	15	3.2%	2	4	9	0
6A00 ID Disorders	9	1.9%	0	0	9	1
6C40.0 Harmful Alcohol use episode	7	1.5%	5	1	1	0
6C40.2 Alcohol Dependence	6	1.3%	4	0	2	0
6A05 ADHD	6	1.3%	2	0	4	1
6C4E.2 Psychoactive substance dependence	5	1.1%	3	0	2	0
No secondary diagnosis provided	275	59.4%	36	86	153	19
Other	44	9.5%	15	14	15	4
Total	463		103	124	236	30

3.5 Source of Admission

Table 2.7 below shows the source of each patient’s admission to their current site. This includes the level of security for those patients who were admitted from another inpatient site, and the source of admission for those patients who were admitted through an alternative route and not directly from another inpatient

service. The table shows that 60.7% of current admissions were directly from another form of inpatient care, with 51.8% of the total being admitted from other forensic inpatient services.

Table 2.7: Source of Patients’ Admission and Current Location

Source of Admission	Number of patients	%	Current Location			Female Patients
			High Secure	Medium Secure	Low Secure	
High Secure	60	13.0	0	45	15	0
Medium Secure	110	23.8	20	5	85	3
Low Secure	70	15.1	9	18	43	10
IPCU	24	5.2	1	9	14	2
General Adult	12	2.6	1	2	9	1
Open	5	1.1	0	0	5	0
Prison	89	19.2	30	35	24	8
Court	63	13.6	40	3	20	0
Community	26	5.6	1	4	21	6
Unknown	1	0.2	0	1	0	0
Police Custody	3	0.6	1	2	0	0
Total	463		103	124	236	30

3.6 Age and Length of Stay

The average age of patients in 2024 has remained stable at 43.9 years (Median 42, Range 18-82) the same as the 43.9 years old (Median 42, Range 18-85) reported for 2023. The mean current length of stay of 1557 days or 4.3 years (Median 846 days, Range 0-13599) is also consistent with the 2023 average of 1547 days (Median 943, Range 4-13193). Table 2.8, shows the data broken down by gender with details of mean age and current length of stay. Female patients show a higher mean age of 44.6 years (Median 43.5, Range 18-78) as compared to male patients with 43.9 (Median 42, Range 18-82). Female patients also have a shorter mean current length of stay with 1300 days (3.6yrs)(Median 746, Range 24-5529) than their male counterparts who average 1575 days (4.3yrs)(Median 847, Range 0-13599).

Table 2.8: Mean Age and Current Length of Stay, by Gender

Gender	Mean Age (Years)	Median	Range	Mean Length of Admission (Days)	Median	Range
Female	44.6	43.5	18-78	1300	746	24-5529
Male	43.9	42	18-82	1575	847	0-13599
All	43.9	42	18-82	1557	846	0-13599

Table 2.9, below shows the mean age and length of stay of all patients, disaggregated down to their current level of security. The table shows that this varies between a mean age of 39.0 years in High Secure, up to 46.9 years in Low Secure. The table also includes details on the variation in the mean length of stay across different levels of security with a range from 1076 days (2.9yrs) in Medium Secure to 1795 days (4.9 years) in High Secure. Appendix 1 provides further details on mean age and length of stay by individual site, across each level of security.

Table 2.9: Age and Length of Stay, by current level of Security

Current Level of Security	Mean Age (Years)	Median	Range	Mean Length Admission (Days)	Median	Range
High	39.0	38.0	18-65	1795	950	3-13599
Medium	42.3	40.0	21-72	1076	728	0-8716
Low	46.9	47.0	18-82	1706	979.5	0-12859
Total	43.9	42.0	18-82	1557	846	0-13599

Table 2.10 shows the mean age and mean current length of stay for all of our patients by diagnostic category. The table shows the patients with the highest mean current length of stay at 2841 days (7.8yrs) are those with an ID diagnosis. The MI patients show a lower current length of stay than their ID counterparts at 1363 days (3.7yrs). Those patients with a primary diagnosis of PD show a mean length of stay at 1350 (3.7yrs) however the number of PD patients is very low (n=10). The PD patient group show the highest average age at 48.7yrs, when compared to MI patients at 43.8yrs and the ID group whose mean age was 44.1yrs.

Table 2.10: Mean Age and Mean Length of Stay by Diagnostic Category

Diagnostic Category	Mean Age (Years)	Median	Range	Mean Length Admission (Days)	Median	Range
ID	44.1	42.0	21-69	2841	1539	103-10703
MI	43.8	41.0	18-82	1363	786	0-13599
PD	48.7	49.5	18-73	1350	759	24-4080
Total	43.9	42.0	18-82	1557	846	0-13599

4. Discussion

As discussed in section 3 the FN inpatient population as reported through the Census shows relatively substantial change on a year by year basis with 131 patients (28.3%) being admitted to their current location within the last 12 months, including 72 patients (15.6%) newly admitted to their current location in forensic inpatient care within the last 12 months from sources out with forensic inpatient services. While the forensic inpatient population is subject to this level of annual change as noted above, the 2024 Census population showed a lot of consistency with the population reported in the 2023 Census. The 463 patients reported in the 2024 Census is the same as the 463 within the 2023 Census. 332 (71.7%) patients were common to both cohorts.

The detailed comparison of the census returns against the FN Weekly Bed report figures as noted in Table 1 provides assurance of the quality of data returned by FN sites. The differences seen within Low secure sites relate to the differing inclusion criteria for the Census and Bed report. Low secure forensic beds may be occupied by patients who require that degree of therapeutic security with patients being provided the safe secure care that they require, under the minimum level of environmental, relational and procedural security restrictions, but not meeting the inclusion criteria for the Census as provided above in Section 2. This is not the case for Medium or High secure services, as the Census inclusion criteria make clear that all patients detained within condition of High or Medium security should be included within the Census. The small difference in numbers between the Census and Bed report seen in the returns for the Orchard Clinic and Rowanbank Medium secure services relate to patients who were admitted after the Bed report figures were submitted, but on or before the Census date of 26th of November 2024.

The gender breakdown of the 2024 FN Inpatient population is also consistent with that reported in the 2023 Census. See table 2.1. The 30 female patients recorded in the Census represent 6.5% of the population compared to 29 (6.3%) in the 2023 Census. Hope House, a female only forensic service, continues to provide care to 4 female patients within designated forensic beds, although only one of these patients meet the inclusion criteria for the Census. So, while the remaining Hope House patients included within the bed report may no longer meet forensic inclusion criteria, due to the level of risk that the patients may pose they continue to be provided care within a defined Low secure forensic site on the basis of therapeutic security as outlined above.

The 60 patients (13.0%) identified as within the ID category is a slight reduction on the 65 (14%) noted in the 2023 Census. The addition of Primary Diagnosis data also provides further detail with 50 of the 60 ID

Category patients being noted as having a primary diagnosis of ID Disorder, a further 5 of Autistic Spectrum Disorder and 1 of an unidentified Mental Disorder. The remaining 4 ID category patients are identified as having a primary diagnosis of Personality Disorder (2), Schizophrenia (1), and Schizoaffective Disorder (1) more commonly associated with the diagnostic categories of Personality Disorder or Major Mental Illness. Only 5 of the 10 patients from the ID category who did not have a primary diagnosis of ID Disorder, were noted to have a secondary diagnosis of ID Disorder, with one having a secondary diagnosis of Personality Disorder and the remaining four having no secondary diagnosis noted. In contrast to this, 2 patients within the MMI category were noted as having a primary diagnosis of ID Disorder, and 8 MMI patients a primary diagnosis of Personality Disorder or Dissocial Personality Disorder. Of these 10 MMI category patients without an MMI specific primary diagnosis, only three had a secondary diagnosis of Schizophrenia, 3 of Personality Disorder and 4 with no secondary diagnosis noted. This shows the benefit of the additional diagnostic data and may suggest that a better understanding is required of which factors directly affect decisions on patient diagnostic categorisation within the Census process.

The 2024 Census has also seen an increase in the number of patients within the legal PD category, doubling from 5 in 2023 to 10 (2.2%) in 2024. This number of PD category patients is still lower than the 19 patients (4.1%) identified as having a primary diagnosis of Personality Disorder or Dissocial Personality Disorder. The diagnosis data also identifies a further 62 patients with a secondary diagnosis of Personality Disorder or Dissocial Personality Disorder. This represents a much larger 13.4% of the FN inpatient population, and shows the importance of recent research into the management of patients with Personality Disorder within a High Secure forensic setting, with 25 of those 62 patients with a secondary diagnosis of PD being provided care within the High secure service, which represents 24.3% of all High Secure patients.

As noted in section 3.2 there are some differences in the way that patients who meet the census criteria, but are being cared for under IPCU conditions are reported within the census. At present patients are reported as being cared for under the level of security of IPCU at Midpark (3), New Craigs (1), Royal Cornhill (3), Stratheden (8) and Woodland View (4). However, patients are also identified as being provided care within the IPCU at Royal Cornhill Hospital, but reported as being provided this care under conditions of Low security. This is because the IPCU at the Royal Cornhill is part of the low secure forensic Blair Unit. As stated, these patients are included on the basis of meeting the census inclusion criteria. Previous research (Mitchell, 1992) has identified that IPCUs within Scotland do provide care to patients under Forensic orders. It is likely that other IPCUs in Scotland also provide care for patients who would meet the Census inclusion criteria, but these other sites are not included within the Census process as they are not directly linked to existing Forensic units that receive data requests for the annual census. The Mental Welfare Commission 2015 report on Intensive Psychiatric Care in Scotland lists 15 IPCU sites, 8 of which are directly linked to the current census reporting sites. A further 7 IPCU sites are not linked to Forensic sites, and are not directly approached as part of the Census process. In collaboration with the Scottish IPCU Network, the FN is conducting a census of patients within Scottish IPCUs meeting the Forensic Census inclusion criteria in June 2025.

The overall mean age of patients has remained the same as in 2023 at 43.9 years old, and shown a slight reduction in the male group from 44.0 years in 2023 to 43.9 years old in 2024. However female patients have seen a significant change with mean age increasing from 42.0 (Median 41) in 2023 to 44.6 years old (Median 43.5) in 2024. The female population is considerably smaller so changes in population can affect overall means more easily. The female group have also seen considerable change in their mean length of stay reducing from 1469 days (4.0 years) in 2023 to 1300 days (3.6 years) in 2024. These changes reflect the greater level of change within the female population overall, with 14 (46.7%) of the 30 female patients admitted to their current site within the year since the last Census, and 11 of those 14 being new admissions to the FN Census population.

The mean age of patients across the levels of security has remained fairly consistent with 2023, with the mean age of High Secure patients reducing from 39.9 years old to 39.0 in 2024, and the change in high secure population that has reduced mean age also reducing mean length of stay from 1839 days (5.0 years) in 2023 to 1795 days (4.9 years). Patients under medium secure care have remained stable with a mean age of 42.3 years and mean length of stay of 1076 days, compared to 42.2 years old and 1072 days mean length of stay in 2023. Patients in Low secure services have seen a small increase in both mean age from 46.5 years and mean length of stay of 1663 days in 2023 to 46.9 years and 1692 days in 2024. In relation to Diagnostic Category the larger MMI category has remained very stable at the same mean age of 43.8 years old as in 2023, and a mean length of stay of 1363 days compared to 1361 in 2023, However the ID group have seen an increase in mean age, from 43.5 to 44.1 years old, and also an increase in mean length of stay from 2633 days to 2841 days and now stay on average more than twice as long as their MMI counterparts.

5. Summary points

- There are 463 patients currently within the Forensic Network who are designated as a forensic patient (definition above).
- 30 (6.5%) are women, 76.7% of women are in low security compared to 49.5% of men.
- The rate of change is considerably higher within the female population than within the male group with 46.7% of female patients being admitted to their current site within the last 12 months, and 26.7% of female patients being new admissions to forensic inpatient services. This compares to 27.3% and 15.1% in the male census population.
- The average age is 43.9 years range 18-82 years; median 42 years.
- 103 patients (22.2%) are in high security, 124 (26.8%) in medium security and 236 (51.0%) in low security. This demonstrates that the pyramid of care is correctly in operation.
- 60 (13.0%) have a legal diagnostic category of intellectual disability, 393 (84.9%) of major mental illness and 10 (2.1%) of personality disorder.
- The average length of stay is 1557 days or 4.3 years (range 0-13599; median 846), Patients within the diagnostic category of intellectual disability stay longer (7.8yrs) with an average length of stay more than double that of their MMI counterparts (3.7yrs). Current length of stay is shorter in medium secure units possibly reflecting their role.
- 60 Patients were identified as being within the ID Diagnostic Category. However, of the 60 patients only 50 were identified as having a Primary Diagnosis of 6A00 ID Disorders, with 5 having a primary diagnosis of 6A02 Autistic Spectrum Disorder, two 6D10 Personality Disorder, one 6A20 Schizophrenia, one 6A21 Schizoaffective Disorder, and one further patient an unidentified Mental Disorder. Of the 10 ID category patients with no primary diagnosis of ID Disorder, only 5 were noted as having a secondary diagnosis of ID Disorder.
- High and Medium Secure services see the highest proportion of patients being admitted from prison at 29% of High secure patients and 28% in Medium. Whereas only 10% of patients in Low secure services are directly admitted from Prison reflecting the security needs of patients under a Transfer for Treatment Direction. 42% of patients within Low secure services were admitted from High or Medium secure sources, supporting patient flow down the Forensic Network pyramid of care.
- In collaboration with the Scottish IPCU Network, the FN will conduct a census of patients within Scottish IPCUs meeting the Forensic Census inclusion criteria in June 2025.

High Secure

- The High Secure Service reported 103 male patients, with a mean age of 39.0 years old and a mean length of stay of 1795 days (4.9 years).

- 88 (85.4%) Patients were reported in the MI legal diagnostic category and 15 (14.6%) for ID.
- 28 of the 103 patients (27.2%) were admitted within the previous 12 months
- 30 patients (29%) were admitted to High Secure care from Prison. 40 patients (38.8%) were admitted to High Secure care from Court.
- 66 patients (64.1%) were noted to have a primary diagnosis of Schizophrenia with 84 patients (81.6%) in total having a primary diagnosis of a form of psychosis. 25 patients (24.3%) were noted to have a secondary diagnosis of Personality Disorder.

Medium Secure

- Medium Secure services reported 124 patients with a mean age of 42.3 years old and a mean length of stay of 1076 days (2.9 years).
- 7 (5.6%) patients were female and 117 (84.4%) male.
- 113 (91.1%) patients were reported as within the MI legal diagnostic category, 9 (7.3%) as ID and 2 (1.6%) PD.
- 39 patients (31.5%) were admitted within the previous 12 months and 68 patients (54.8%) had been admitted from other FN inpatient services.
- 45 Patients (36.3%) were admitted directly from High secure care.
- 80% of all patients in medium secure care were noted as having a primary diagnosis of a form of psychotic disorder, with 75 patients (60.5%) having a primary diagnosis of Schizophrenia.

Low Secure

- Low Secure services reported 236 patients with 19 of those patients being provided care within IPCU, 5 within an open forensic rehabilitation ward, and 3 in a locked enhanced rehabilitation ward.
- Low secure patients had a mean age of 46.9 years old and a mean length of current stay of 1706 days (4.7 years).
- 23 (9.7%) patients were female and 213 (90.3%) male.
- 192 patients identified within the MI legal diagnostic category, 36 as ID, and 8 PD.
- 64 low secure patients representing 27.1% of those within Low Secure care were admitted to their current stay within the previous 12 months. However the 14 IPCU patients admitted within the previous 12 months represent 73.7% of those forensic patients reported within IPCU care. This reflects the intended short-term nature of IPCU care which is further emphasised by the far shorter mean length of stay of 200 days for the 19 IPCU patients reported.
- While 8 Low secure patients were noted as within the PD diagnostic category, 16 (6.8%) were noted as having a primary diagnosis of Personality disorder, and a further 25 (10.6%) a secondary diagnosis of PD.

To discuss any aspect of the report above, please contact tsh.forensicnetwork@nhs.scot and a member of the team will be in touch.

Appendix 1: Mean Length of Stay and Mean Age, by site.

FN Census Sites	Number of patients in Census	Mean (Median) Length of Stay in days	Mean (Median) Age in years
Low Secure			
Ayr Clinic (Independent)	24	1408 (1028)	49.3 (47)
Beckford Lodge (NHS Lanarkshire)	27	671 (411)	44.8 (39)
Bellsdyke (NHS Forth Valley)	9	2529 (1294)	50.7 (48)
Bellsdyke, Hope House (NHS Forth Valley)	<5	1119 (1119)	28.0 (28)
Kirklands (NHS Lanarkshire)	<5	1009 (1009)	29.0 (29)
Leverndale MI (NHS GG&C)	42	2076 (1577)	51.5 (54)
Leverndale ID (NHS GG&C)	8	2500 (1508)	50.5 (58)
Lynebank ID (NHS Fife)	10	1942 (1965)	42.7 (37)
Midpark (NHS D&G)	6	392 (183)	43.2 (39)
New Craigs Hospital (NHS Highland)	3	375 (467)	50.0 (49)
Rohallion LSU (NHS Tayside))	18	1968 (2047)	46.9 (47)
Royal Cornhill (NHS Grampian)	36	1442 (443)	44.0 (41)
Royal Edinburgh, William Fraser Centre (NHS Lothian)	5	4080 (2608)	48.6 (51)
Stratheden (NHS Fife)	17	544 (295)	43.6 (44)
Strathmartine (NHS Tayside)	8	5706 (6483)	47.1 (48)
Surehaven (Independent)	8	2184 (1778)	54.8 (54)
Woodland View (NHS A&A)	13	1198 (637)	41.2 (38)
Low Secure Total	236	1706 (980)	46.9 (47)
Medium Secure			
Orchard Clinic (NHS Lothian)	33	1374 (883)	42.6 (39)
Rohallion MSU (NHS Tayside)	29	1006 (734)	40.0 (38)
Rowanbank MI (NHS GG&C)	53	1011 (673)	43.3 (43)
Rowanbank National ID (NHS GG&C)	9	590 (715)	42.0 (38)
Medium Secure Total	124	1076 (728)	42.3 (40)
High Secure			
The State Hospital MI	88	1548 (853)	39.0 (38)
The State Hospital ID	15	3243 (2616)	38.7 (38)
High Secure Total	103	1795 (950)	39.0 (38)
Total	463	1557 (846)	43.9 (42)