Aims
A research project aimed at setting-up a psychiatric case register of the Italian Forensic Hospitals (IFHs) population was launched in March 2012. The project is coordinated by the Italian National Institute of Health (INIH) and founded by the Italian Ministry of Health. The main objective of the project is to activate a forensic mental health information system, based upon reliable and accurate data.

Introduction
The Italian National Parliament has established a program based on a series of actions to be performed by State and Regions with the final aim of closing the 6 IFHs (Law 09/February 2012). Each of the 19 Regions and the 2 Autonomous Provinces of Italy should provide new residential services for patients actually restricted in the local IFHs and for local future mentally ill offenders. IFHs will be replaced by regional 20-bedded secure units, exclusively managed by health personnel of Public Community Mental Health Services (Department of Mental Health, DMHS). The most important change in this process will be a complete shift of the mentally disordered offenders care from the Justice system to the Health system, with the DMHS becoming responsible for offering opportunities for treatment and rehabilitation to these patients at a local basis. The assessment of individual clinical characteristics and needs is a necessary step in planning for the aftercare of about 1000 current inpatients.

Methods
The planned information system will collect data on all the patients within the IFHs on April 2013 the 1st and on the persons subsequently admitted until their definitive closure. The baseline assessment will include: 1) collection of sociodemographic, psychiatric, medical, and forensic data through an ad hoc standardised form; 2) DSM-IV-TR Axis-I psychiatric diagnosis (SCID-I RV); 3) personality disorder diagnosis (SIDP-IV); 4) clinical severity (24-item Brief Psychiatric Rating Scale, BPRS) and psychosocial functioning (Global Assessment of Functioning, GAF) assessment; 5) cognitive evaluation (Mini Mental State Examination and Raven Standard Progressive Matrices); 6) assessment of needs (CANFOR-R). The 6 month follow-up evaluation, to be held in IPH or in the new service succeeded in the patient care, will be based on BPRS, GAF, CANFOR-R and an ad hoc schedule to describe received treatments.

Results and Conclusions
Eighteen clinicians, at least 2 for each IFH, received training on the use of SCID-I, BPRS, GAF and CANFOR-R. A web based software system was created for data entry and immediate transfer from IPHs to the INIH. The pilot phase of the project consisting of the evaluation of at least 4 patients by trained clinicians is ongoing. Preliminary results suggest a good acceptability and feasibility of the project procedures. We hope that the successful achievement of the project’s preliminary phase will be the first step in our effort to provide a valuable resource, able to contribute to planning and monitoring the new Italian health services that will care for mentally disordered offenders in a new context.