

Canterbury

District Health Board

Te Poari Hauora o Waitaha

Submission on Mental Health (Compulsory Assessment and Treatment) Amendment Bill

To: Committee Secretariat
Health Committee
Parliament Buildings
Wellington

Submitter: Canterbury District Health Board

Attn: Emma Kenagy
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C/- Canterbury District Health Board
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Proposal: The Health Committee is calling for public submissions on the Mental Health (Compulsory Assessment and Treatment) Amendment Bill. The bill seeks to improve the protection of individual rights and the safety of patients and the public. It also aims to enable the Mental Health (Compulsory Assessment and Treatment) Act 1992 to be applied more effectively.

SUBMISSION ON MENTAL HEALTH (COMPULSORY ASSESSMENT AND TREATMENT) AMENDMENT BILL

Details of submitter

1. Canterbury District Health Board (CDHB).
2. The submitter is responsible for promoting the reduction of adverse environmental effects on the health of people and communities and to improve, promote and protect their health pursuant to the New Zealand Public Health and Disability Act 2000 and the Health Act 1956. These statutory obligations are the responsibility of the Ministry of Health and, in the Canterbury District, are carried out under contract by Community and Public Health under Crown funding agreements on behalf of the Canterbury District Health Board.

Details of submission

3. Thank you for the opportunity to comment on the Mental Health (Compulsory Assessment and Treatment) Amendment Bill (the Bill).
4. The CDHB welcomes the amendments proposed and agrees with the explanatory note of the Bill. The changes are consistent with the protection of individual rights under the principal Act and will improve this process for many.
5. The CDHB supports the proposal and has provided a number of specific comments for consideration below.

Specific comments

6. The elimination of indefinite treatment orders carries an increase in clinical, administration and judicial input. To put this in context, there are close to 300 cases in the CDHB which fall into this category. The CDHB recommends that adequate administration and clinician funding is provided by the Ministry of Health for District Health Boards to meet these additional requirements.
7. The amendments do allow for some flexibility by *dispensing with examination and hearing* when consent from an individual is provided in writing with advice from an

independent party, such as a solicitor, but this might well be the case in a limited number only.

8. The CDHB supports the amendment that provides the opportunity for family or caregiver to be present via audio or visual link at the section 9 explanation to proposed patient. This is a difficult process for individuals and having support from family or caregivers, when they cannot be physically present due to geographical or other issues, will be of added benefit.
9. The CDHB support the changes with regards to transport of special patients, as this provides for safe movement to different settings of care. This is an improvement to an issue that has been the subject of great concern for services and clinicians.
10. The CDHB supports the measures and safeguards put in place by requiring prior approval from the Director of Mental Health. This is a sound process, that follows on from others for patients under part 4 of the principal Act.
11. Amendments related to the COVID-19 Response are a prudent solution to the sunset clauses. The deadline for the changes is October 2021 and it is therefore important to have these imbedded before they expire.

Conclusion

12. The CDHB does not wish to be heard in support of this submission.
13. Thank you for the opportunity to submit on Mental Health (Compulsory Assessment and Treatment) Amendment Bill.

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