

27 April 2021

'K'

Via Email: fyi-request-14862-1bc42bc5@requests.fyi.org.nz

Response to a request for official information

Dear K

Thank you for your request for official information as a partial transfer of Parts 1 – 8 and 10 from the Department of Internal Affairs and received 11 March 2021 by Nelson Marlborough Health (NMH)¹.

I request all information on what services were put in place to risk assess the Vulnerable Persons List. This template is on the CASA website.

Vulnerable people are what the Waikato dhb, and some members of community boards the police feel that suicide is imminent due to a family member having committed suicide recently or a close friend, or a cluster of suicides in a contained area.

The suggestion that varied services observe these elected 'Vulnerable Persons'. Without contact and without knowledge of such a list.

Casa also goes on to pinpoint specific data that is maintained for some 10years and is to be shared with relevant authorities.

I have already request privately all the information regarding myself and my family members who were told by a slightly honest representative for the crown that my eldest son and myself have been on this list since 2019. To no avail. Nothing has been forthcoming at all.

Casa states that certain managers of each DHB hold the list as well as themselves, and the relevant services have access to this database.

1. What the cost of maintaining this list is for each dhb

NMH response: We do not have a costing system that enables us to track the cost of performing any specific administrative task.

2. What are the observers having to observe and where is the critical point that would be addressed by making contact with a listee in order to assist

NMH response: The attached Clinical Advisory Services Aotearoa (CASA) Guidelines specify suicide prevention as the overarching purpose.

3. I would like to know how many people are on this list. either A: with knowledge and consent or B: completely unaware

NMH response: We do not collect this data and, as such, decline to respond under section 18(g) 'the information requested is not held.'

¹ Nelson Marlborough District Health Board

4. How and who collates the data collected.

NMH response: Not applicable – please see Question 3.

5. How many persons have committed suicide whilst either

A: Being on the list

B: Having family members on this list for extended period with no contact

NMH response: We do not collect this data and, as such, decline to respond under section 18(g) *'the information requested is not held.'*

6. I would like to know who is the administrator and who is responsible for the inadequate and inhumane structure of observing without any contact to the persons being observed, even after a family member may commit suicide.

NMH response: In reference to the accepted definition of official information 'held', agencies are required to provide a fact-based response. There is no obligation to form an opinion and, as such, NMH declines to respond under section 12(2) *'the official information requested shall be specified with due particularity in the request.'*

7. Under what human and legal rights as well as privacy laws does this 'Observing and collating data' use or fail to use

NMH response: The privacy principles of the *Privacy Act 2020*, and the *Health Information Privacy Code 1994* are applied for all personal health information held by NMH.

8. What funding is allocated for this VPL and for the varied govt services that are coerced to perform this

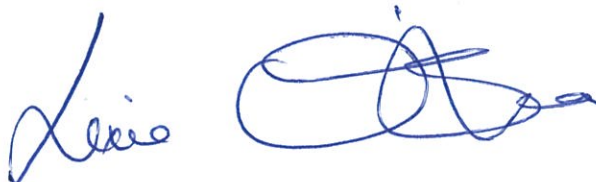
NMH response: We do not allocate specific funding for services, other than those where a contract with an external provider is in place.

10. Have you heard of the cartwright enquiry?

NMH response: Yes.

This response has been provided under the Official Information Act 1982. You have the right to seek an investigation by the Ombudsman of this decision. Information about how to make a complaint is available at www.ombudsman.parliament.nz or free phone 0800 802 602. If you have any questions about this decision please feel free to email our OIA Coordinator OIArequest@nmdhb.govt.nz I trust that this information meets your requirements.

Yours sincerely



Lexie O'Shea
Chief Executive

Encl: *CASA Guidelines for Keeping a Vulnerable Persons Register*

Postvention Community Working Group (PCWG) Guidelines for Keeping a Vulnerable Persons Register

(v3 April 2016)

CPRS acknowledges the complexities around sharing people's personal information. This guideline outlines the validity for doing so in a postvention situation within a PCWG. Sharing minimal personal information of potentially impacted vulnerable community members within a PCWG is believed to help strengthen a community in its suicide prevention actions and is intended to help prevent further deaths and other suicidal behaviours.

Any Postvention Community Working Group (PCWG) keeping a "Vulnerable Persons Register" (VPR) needs to be aware of and adhere to legislation governing the collection, use and storage of personal information. In New Zealand, the relevant legislation in respect of personal information is the Privacy Act (1993) and the Health Information Privacy Code (1994).

A Vulnerable Persons Register (VPR; also known as an "At Risk Register") contains personal information, and therefore becomes an official record; as such it must be managed in accordance with relevant legislation. For example, in New Zealand the Privacy Act (1993) requires that all reasonable steps must be taken to ensure that any personal information collected is for a legitimate purpose, is accurate and up to date, is held securely, and is able to be viewed by the individual concerned should a request be made to do so.

The overarching purpose of keeping a VPR is suicide prevention. Activities which are consistent with this purpose include:

- The identification of individuals who, by virtue of family, friendship, work, social, geographic or other connection may be at increased vulnerability after a suspected suicide. The purpose of identifying these individuals is to assess them for suicide risk and refer to appropriate supports and services as necessary (The CPRS Circles of Vulnerability is a useful model for considering how this might be undertaken).
- The identification of groups in the community whose members' health might be seriously threatened by others' suicidal behaviour(s) and therefore need assessment and follow-up.
- The identification of individuals in the community currently engaging in suicidal behaviours (i.e. suicidal thoughts, planning, preparations, attempts and self-harm) who may be further impacted by suspected suicide(s) and therefore require re-assessment and additional monitoring and support.

- The allocation of individuals placed on the VPR to a particular agency or service for follow-up. This is to ensure that the suicide risk of every individual on the VPR is assessed so that, where necessary, individuals receive further assessment, supports and services. The PCWG does not assume responsibility for the suicide risk assessment or management of any individuals placed on the VPR. Rather, as much as is possible, the PCWG identifies individuals of concern and allocates agencies or services to follow-up these individuals including their suicide risk screening, assessment and subsequent management.
- Highlighting community suicide risk factors for consideration by the PCWG.
- Long term follow-up of individuals on the VPR up to and beyond the 12-month anniversary of a suspected suicide and in the event of an echo cluster in subsequent years.

Key guidelines for keeping a Vulnerable Persons Register:

- Keep only one copy of the VPR and nominate a lead agency from the PCWG which will be responsible solely for updating the VPR and managing it in accordance with relevant legislation (e.g. securely stored in a locked filing cabinet, password protected encrypted electronic copy).
- Keep only that information on the VPR sufficient for postvention purposes.
 - Typically, the information on a VPR would include:
 - Name of the vulnerable person of concern,
 - Date this name was added to the VPR,
 - Reason for concern,
 - Known connections to the deceased,
 - Agency allocated for following up this individual,
 - Outcome of that follow-up and date this occurred,
 - Information on any subsequent review or additional concern for this individual (see CPRS PCWG VPR Template).
- Do not circulate the VPR by unsecure email or any other unsecure means. The single copy of the VPR can be brought to each PCWG meeting for review and updating. At a minimum, any circulation of a VPR should only ever be considered if it can be undertaken securely, such as by using a password protected or encrypted electronic form.
- Each agency on the PCWG collects, uses and stores only that information pertaining to specific individuals on the VPR allocated to it for follow-up.
- Rather than take individuals' names off the VPR when they are no longer considered at acute risk of suicide, signal on the VPR that the individual has been followed-up, by which agency/individual, when, by what means (e.g. phone, text, appointment) this follow-up was undertaken and what the outcome was. This allows for long term follow-

up of all those initially considered to be at increased vulnerability (e.g., at the 12-month anniversary mark or even years later).

- Only use the VPR with other PCWG members and only with those PCWG members who have signed a privacy agreement.
- Each agency on the PCWG keeps its own records of any assessments and interventions undertaken by its staff with any individuals from the VPR allocated to it for follow-up.
- Each agency on the PCWG follows its own established mechanisms for meeting its obligations under relevant privacy legislation for the collection, use and storage of personal information.

Links:

- View the full Privacy Act 1993 at <http://www.legislation.govt.nz/act/public/1993/0028/latest/DLM296639.html>
- View the revised edition 2008 of the Health Information Privacy Code 1994 at <https://www.privacy.org.nz/assets/Files/Codes-of-Practice-materials/HIPC-1994-incl.-amendments-revised-commentary-edit.pdf>
- www.casa.org.nz

See also:

- CPRS PCWG Privacy Guidelines
- CPRS Circles of Vulnerability Model
- CPRS PCWG Guidelines for Mapping Circles of Vulnerability after a suspected suicide
- CPRS PCWG Vulnerable Persons Register template

References:

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