



Sent by: Jenny Hawes/MOH

12/07/2016 09:59 a.m.

To: Grant Cooper [REDACTED] s 9(2)(a),  
cc:  
bcc:

Subject: RE: Invitation to Participate in a Reference Group

Thanks Grant.

It is a one day meeting and we will aim for 4 August, although I have yet to hear from others. Once I get a more complete picture of people's availability I will confirm the date. I may have to look at the following week but I will get back on that asap.

kind regards  
Jenny

Jenny Hawes  
Principal Advisor  
Office of the Director of Mental Health  
Protection, Regulation and Assurance  
Ministry of Health  
DDI: 04 816 2981

<http://www.health.govt.nz>  
[mailto:Jenny\\_Hawes@moh.govt.nz](mailto:Jenny_Hawes@moh.govt.nz)

Grant Cooper      Hi Jenny Thanks for the email. I would...      12/07/2016 09:04:54 a.m.

From: Grant Cooper [REDACTED] s 9(2)(a)  
To: Jenny\_Hawes@moh.govt.nz,  
Date: 12/07/2016 09:04 a.m.  
Subject: RE: Invitation to Participate in a Reference Group

Hi Jenny

Thanks for the email. I would prefer Thursday 4<sup>th</sup> August if possible as I have an important meeting on Friday 5<sup>th</sup> August. And just to confirm it is a one day meeting?

Thanks

Grant Cooper  
Team Manager

OTAGO MENTAL HEALTH SUPPORT TRUST  
3rd Floor Queens Building  
109 Princes Street  
P O Box 5021  
Dunedin 9058

NEW ZEALAND

Ph: + 64 3 477-2598

Fax: +64 3 477-6657

Web site: [www.bipolarotago.co.nz](http://www.bipolarotago.co.nz)

**From:** [Jenny Hawes@moh.govt.nz](mailto:Jenny_Hawes@moh.govt.nz) [mailto:[Jenny\\_Hawes@moh.govt.nz](mailto:Jenny_Hawes@moh.govt.nz)]

**Sent:** Monday, July 11, 2016 3:35 PM

**To:** Victoria Roberts <[REDACTED] s 9(2)(a)>

**Cc:** Grant Cooper <[REDACTED] s 9(2)(a)>; Guy Baker <[REDACTED] s 9(2)(a)>; Jak Wild <

<[REDACTED] s 9(2)(a)>; Julie <[REDACTED] s 9(2)(a)>; Kieran <[REDACTED] s 9(2)(a)>; Tui

Taurua-Peihopa <[REDACTED] s 9(2)(a)>

**Subject:** Re: Invitation to Participate in a Reference Group

Kia ora Victoria,

And thank you, that is much appreciated.

Grant - I will be in touch once we are able to confirm a date. At the moment it is looking like Thursday 4th or Friday 5th August is the date that suits most people but I haven't heard back from everyone.

I have sent an invitation to the National Youth Consumer Advisory Support Network, via Joyce Leeward McDonald at the Werry Centre - for either her or someone in the network to be part of the Reference Group. Kieran may wish to approach Joyce if he is interested in being part of it.

Nga mihi nui

Jenny

Jenny Hawes  
Principal Advisor  
Office of the Director of Mental Health  
Protection, Regulation and Assurance  
Ministry of Health  
DDI: 04 816 2981

<http://www.health.govt.nz>

[mailto:Jenny\\_Hawes@moh.govt.nz](mailto:Jenny_Hawes@moh.govt.nz)

Jenny Hawes  
Principal Advisor  
Office of the Director of Mental Health  
Protection, Regulation and Assurance  
Ministry of Health  
DDI: 04 816 2981

<http://www.health.govt.nz>

[mailto:Jenny\\_Hawes@moh.govt.nz](mailto:Jenny_Hawes@moh.govt.nz)

From: Victoria Roberts [redacted] s 9(2)(a)  
To: [Jenny\\_Hawes@moh.govt.nz](mailto:Jenny_Hawes@moh.govt.nz)  
Cc: Grant Cooper [redacted] s 9(2)(a) >, Julie [redacted] s 9(2)(a) >, Kieran [redacted] s 9(2)(a) >, Guy Baker <[redacted] s 9(2)(a)>, Tui Taurua-Peihopa [redacted] s 9(2)(a) >, Jak Wild [redacted] s 9(2)(a) >  
Date: 11/07/2016 02:49 p.m.  
Subject: Re: Invitation to Participate in a Reference Group

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Kia ora Jenny

Thank you for your message inviting Nga Hau e Wha to to be part of the Ministry Reference Group advising on the Disability Action Plan.

We are pleased to recommend Grant Cooper for this role. His contact details are:

[redacted] s 9(2)(a)

We have a question from Kieran Moorhead - our Auckland member, which is: In the Terms of Reference it mentions that the reference group will have the perspective of 'tangata whaiora - young persons', do we know if the national youth consumer network has been approached to take part at all? Are you able to advise us with regard to Kierans query. Kieran is part of the National Youth Consumer Advisors Network (NYCAN)

Nāku noa nā

Victoria

Victoria Roberts  
Chairperson  
Nga Hau e Wha  
[www.nhew.org.nz](http://www.nhew.org.nz)

[redacted] s 9(2)(a)

A national voice for people with lived experience of mental distress and addictions

On 08/07/2016, [Jenny\\_Hawes@moh.govt.nz](mailto:Jenny_Hawes@moh.govt.nz) <[Jenny\\_Hawes@moh.govt.nz](mailto:Jenny_Hawes@moh.govt.nz)> wrote:  
> Tēnā koe Victoria,  
>  
> Please find attached a letter of invitation for someone from Nga Hau E Wha  
> to be part of a Reference Group advising on Disability Action Plan (DAP)  
> Action (9)(d), which relates to mental health. Also attached are the Terms  
> of Reference for the Reference Group and the project scope. (Note the  
> timeframes in the scoping document have slipped slightly).  
>  
> Please contact me if you have any questions.

>  
>  
>  
> Nāku noa nā  
>  
> Jenny Hawes  
> Principal Advisor  
> Office of the Director of Mental Health  
> Protection, Regulation and Assurance  
> Ministry of Health  
> DDI: 04 816 2981  
>  
> <http://www.health.govt.nz>  
> [mailto:Jenny\\_Hawes@moh.govt.nz](mailto:Jenny_Hawes@moh.govt.nz)  
>  
> 2016 Te Wiki o te Reo Māori  
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Victoria Roberts  
Chairperson  
Nga Hau e Wha  
[www.nhew.org.nz](http://www.nhew.org.nz)

s 9(2)(a)

A national voice for people with lived experience of mental distress and  
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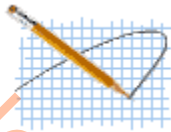
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Sent by: @xxx  
27/07/2016 01:37 p.m.

To: "zz Crawshaw, John" <John\_@xxx>  
cc:  
bcc:

Subject: Action Required: Purchase Requisition 102912 for Wong, Helen (675.00 NZD) requires approval

From **Wong, Helen** Description **Victoria Roberts invoice Mental health Review Tribunal Panel interview 13 July Christchurch**  
m  
To **zz Crawshaw, John** Requisition **675.00 NZD**  
Total  
Sent **27/07/2016 13:34:57**  
Due **03/08/2016 13:34:57**  
ID **3279534**

Requisition Lines



Line	Item Description	Supplier	Cost Centre	UOM	Quantity	Price (NZD)	Line Amount (NZD)
1	Victoria Roberts invoice Mental health Review Tribunal Panel interview 13 July Christchurch	Roberts Victoria	452000	Each	1	675.00	675.00

[View Requisition Details](#) | [Edit Requisition](#)

Approval Sequence



	Who	Action	Date	Note
3	zz Crawshaw, John	Pending		
2	Wong, Helen	Forwarded	27/07/2016	
1	Wong, Helen	Submitted	27/07/2016	

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Sent by: Jenny  
Hawes/MOH

23/03/2017 02:18 p.m.

To: "Victoria Roberts" <[REDACTED] s 9(2)(a)> >,

cc:

bcc:

Subject: Acknowledging your submission

Dear Victoria,

Thank you for taking the time to make a submission on the discussion document, *The Mental Health Act and Human Rights*. Your submission will now be considered by the Ministry of Health, Balance Aotearoa and the project's Expert Advisory Group. The findings will be presented to the Ministerial Committee on Disability Issues around mid 2017. Please contact me if you have any further questions about the process.

Kind regards  
Jenny

Jenny Hawes  
Principal Advisor  
Office of the Director of Mental Health  
Protection, Regulation and Assurance  
Ministry of Health  
DDI: 04 816 2981

<http://www.health.govt.nz>  
[mailto:Jenny\\_Hawes@moh.govt.nz](mailto:Jenny_Hawes@moh.govt.nz)

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Sent by: John  
Crawshaw/MOH

08/03/2017 04:51 p.m.

To: Jenny Hawes/MOH@MOH,  
cc:  
bcc:

Subject: Fw: Submission final (13)

---

John Crawshaw  
Director of Mental Health & Chief Advisor  
Office of the Director of Mental Health  
Protection Regulation & Assurance  
Ministry of Health

DD: 04 496 2304  
Fax: 04 496 2559  
<http://www.moh.govt.nz>  
mailto: John\_Crawshaw@moh.govt.nz

----- Forwarded by John Crawshaw/MOH on 08/03/2017 04:51 p.m. -----

From: Victoria Roberts <[REDACTED] s 9(2)(a)>  
To: "John Crawshaw/MOH" <John\_Crawshaw@moh.govt.nz>,  
Date: 08/03/2017 04:24 p.m.  
Subject: Fwd: Submission final (13)

Kia ora John

First my apologies for the lateness of this submission: Mental Health Act and human rights.

We did a major consultation around our networks and a large number of people contributed to the final document.

As you can see from the message below the final was sent to me and it was my responsibility to send it to you. Unfortunately that day I was quite unwell and I dropped the ball, not forwarding it as requested by my colleagues.

Please will you accept it now in spite of it's lateness.

Nga mihi nui

Victoria

**Victoria Roberts | BA (Psychology), PGDipRehab | Chair | Nga Hau e Wha**

[www.nhew.org.nz](http://www.nhew.org.nz) | [REDACTED] s 9(2)(a)

**The national voice of people with lived experience of mental distress and addictions**



----- Forwarded message -----

From: **Jak Wild** <[REDACTED] s 9(2)(a)>

Date: 27 February 2017 at 18:01

Subject: re: Submission final (13)

To: Victoria Roberts <[REDACTED] s 9(2)(a)>, Heather Barnett <[REDACTED] s 9(2)(a)>

>

Here it is - the final. Just your last read over Victoria

Well done to all - and thanks Hee!



Mental Health and Human Rights NHEW Submission (13).docx

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## Mental Health and Human Rights

### Submission form

Please take the time to make a submission. The final pages of this consultation document explain how to make a submission and how to make sure it reaches the Ministry in time. There are also questions that might help you to write your submission.

Your feedback is important: it will contribute to a shared understanding of the relationship between the Mental Health (Compulsory Assessment and Treatment) Act 1992 and the Convention on the Rights of Persons with Disabilities (UNCRC) and the New Zealand Bill of Rights Act 1990 (NZBORA). Your feedback will also shape recommendations to the Ministerial Committee on Disability Issues on the alignment of the Mental Health Act with UNCRC and NZBORA.

All submissions are due with the Ministry by 5 pm on Friday, 24 February.

The Ministry of Health must have your submission by this date and time. Any submissions received after this time will not be included in the analysis of submissions. In making your submission, please include or cite relevant supporting evidence if you are able to do so.

There are two ways you can make a submission:

fill out this submission form and email it to:

MentalHealthAdmin@moh.govt.nz

or

mail your comments to:

Mental Health Act and Human Rights Feedback

Office of the Director of Mental Health

Ministry of Health

PO Box 5013

WELLINGTON 6145

The following questions are intended to help you to focus your submission. It will help us analyse the feedback we receive on the plan if you can use this format. You are welcome to answer some or all of the questions, and you can tell us about other ideas or concerns you may have as well.

You do not have to answer all the questions or provide personal information if you do not want to.

This submission was completed by: (names)

Ngā Hau E Whā Representatives:  
Victoria Roberts (Chair/Central Rep South),  
Tui Taurua-Peihopa (Northern/South Rep)  
Keiran Moorhead (Northern/Northland Rep)  
Guy Baker (Midland/East Rep)  
Jak Wild (Central/North Rep)  
Julie Whitla (Southern/North Rep)  
Grant Cooper (Southern/South Rep)

Ngā Hau E Whā expert advisor:  
Dr Heather Barnett

Address: (street/box number) 4/171 Queens Drive Lyall Bay  
(town/city) Wellington  
Email: [REDACTED] s 9(2)(a)  
Organisation (if applicable): Nga Hau e Wha  
Position (if applicable): Nga Hau E Wha Chair

If you are an individual or individuals, the Ministry of Health will remove your personal details from your submission and your name(s) will not be listed in the published summary of submissions,

Please indicate which sector(s) your submission reflects (you may tick more than one box in this section):

- Consumers/
- Families/whānau
- On behalf of a group/organisations

## Questions

These questions relate to the Mental Health Act and its administration.

Part One: Overview of the Mental Health Act, UNCRPD and NZBORA

How well do you think the Mental Health Act does in promoting and protecting human rights?

*Responses in this submission that use the words "person" or "people" refer to people with psychosocial disability as per the UNCRPD definition*

### **A. Mental Health Act:**

The Mental Health Act breaches the UNCRPD and results in significant human rights violations. The Mental Health Act also breaches the UN Declaration on the Rights of Indigenous Peoples (UNDRIP). The rights of most significance to Nga Hau E Wha relate to the following:

#### **1. Right to information about human rights during MH Act application process, while subject to MH Act including treatment and review**

1.1 People are typically not informed of:

1.1.1 their human rights

1.1.2 their legal status

1.1.3 their right to a lawyer or advocate

1.1.4 their right to access friends, family (\*supporters)

1.1.5 their right to access whānau, \*hapū and kaumātua (\*supporters)

1.1.6 their right to an interpreter

#### **Recommend:**

1.1. DHBs and their agents need to provide people, and their supporters, with comprehensive written information, in an accessible format, about key human rights during the MH Act application process and during each key legal change under the MH Act

1.2. DHBs and their agents also need to verbally inform people, and their supporters, of these rights as routine practice (irrespective of staff judgements about 'capacity').

1.3. Information about rights needs to be provided at multiple key points during the MH Act application process, while under the MH Act, during decisions about treatment and review, and while detained - as long recommended in NZ research

1.4. The drafting and publication of a national set of standardised rights information documents, for use by all DHBs and their agents, that affirm people's human rights while in contact with the MH Act

#### **2. Right to be free from arbitrary detention and coercion**

2.1 The right to be free from arbitrary detention is inconsistent with the way the MH Act is currently used and the way compulsory treatment is applied

2.2 People are effectively, arbitrarily placed under the MH Act

2.3 People are arbitrarily transitioned from voluntary status to compulsory status

2.4 Coercion (by way of the threat of compulsory treatment) is often used by clinicians during the transition to voluntary status and while under voluntary status

**Recommend:**

2.1.1 The MH Act needs to be significantly amended to ensure that it is *only* deployed in situations of *extreme danger* so that it is not as part of routine practice

2.2.2 The MH Act needs to be specific about what constitutes 'extreme danger' and to provide practice and policy standards to this effect

2.2.3 The MH Act needs to align with other legislation about what constitutes 'extreme danger' to others

2.2.4 National benchmarks need to be established to reduce the use of the MH Act and to achieve a new norm of practice

2.2.5 Where benchmarks are not achieved, and the use of the MH Act remains high or where it increases, DHBs need to be held to account by the Ministry of Health and sanctioned accordingly

2.2.6 Mental health services need to be available to meet the increase in demand for services so that practitioners no longer have to use the MH Act as a mechanism to ensure access to treatment

**3. Right to treatment information**

3.1 The provision of full information about treatment is the exception rather than the norm.

3.2 Full information is not available when it is needed most, is not accessible, and not promoted either to the person or their supporters, or in communities and places of detention.

**Recommend:**

1. Information about treatment, treatment options, and rights in relation to treatment, are:

1.1 visible

1.2 accessible

1.3 promoted to people and their supporters

1.4 promoted in communities

1.5 promoted in places of detention

1.6 information about treatment options

**4. Right to information about District Inspectors**

4.1 Information about the purpose, availability, person specification and contact details of District Inspectors is poorly provided for.

**Recommend:**

1. Information about 4.1 is promoted and accessible in all places of detention

2. Right to utilise 4.1 is effectively implemented

**5. Right to independent psychiatric evaluation**

5.1 The right to independent psychiatric evaluation, by way of a 'second opinion', is rarely promoted, routinely denied and not provided for through the current system.

5.2 The process for deciding whether a second opinion can be provided, or who will undertake an independent assessment, is problematic as these decisions are usually

made by a person's delegated psychiatrist. When second opinions are obtained, delegated psychiatrists typically utilise their colleagues, or instruct a less senior staff member to provide an opinion. This practice does not constitute an independent review.

5.3 In the rare instances where second opinion decisions are made, it is rare for treatment alternatives to be implemented.

5.4 There is a lack of independent assessment (undertaken at successive intervals) of treatment for people who are subject to the MH Act over many years

5.5 Statistics are not maintained about requests for second opinions, or the outcomes of second opinions, which limits the provision of evidence based outcomes.

**Recommend:**

1. Implement a system of independent assessment by a practitioner who is not working in the mental health service where a person is receiving treatment
2. Establish an independent assessment body (such as the Independent Police Conduct Authority) for 1.

**6. Treatment**

6.1 People have a right to treatment options that are not funded or routinely available in NZ

6.2 While subject to the MH Act people are typically forced to take medication, (often multiple medications in high doses) irrespective of the medication being of any benefit to the person and irrespective of significant adverse outcomes

6.3 There is a lack of independent assessment about the benefits to the person of medication while subject to forced treatment

**Recommend:**

1. Meaningful treatment options are provided as routine practice
2. Non-medication treatment options are provided as routine practice consistent with a burgeoning body of international research and as occurs in Scandinavian countries.

**7. Medical model and 'Responsible Clinician'**

7.1 The MH Act implicitly sanctions the medical model of practice which is a reductionist approach that focuses predominantly on 'symptoms' and medication. This approach marginalises and minimises kaupapa Māori approaches and other approaches that have a growing evidence base, such as social and psychological approaches to treatment.

7.2 The MH Act legally elevates the role of psychiatrists above other professional disciplines. This approach effectively reinforces a medical model and denies the role of other practitioners.

**Recommend:**

1. Meaningful treatment options are provided as routine practice
2. Kaupapa Māori services are established throughout Aotearoa NZ
3. Social and psychological approaches are provided as routine practice

## **B. United Nations Convention on the Rights of Persons with Disabilities (UNCRPD)**

1. There are significant changes required to the Mental Health Act, and within the mental health system, to achieve compliance with the UNCRPD and its Optional Protocol, the New Zealand Bill of Rights (NZBORA) and the UNDRIP

### **1. Legal recourse**

Recourse to the law for breaches of the UNCRPD are extremely difficult to pursue and need to be integral to the implementation of UNCRPD

### **2. Stigma and discrimination / Articles 1 and 5**

High levels of stigma and discrimination in the mental health workforce, in education, employment and housing, and the wider community.

### **3. Lack of awareness-raising / Article 8**

The lack of government funding and provision of effective awareness-raising and education about psychosocial disability and human rights

### **4. Legal protection / Articles 5, 12, 13**

4.1 People are excluded from the fundamental right to receive equal and effective legal protection against discrimination on the grounds of disability

4.2 The right to equal recognition before the law is not protected when people using services are:

- a) not informed of their rights;
- b) not informed about how the MH Act is being applied; and
- c) when the MH Act is used arbitrarily rather than in situations of *extreme danger*

### **5. Liberty and security of person / Articles 3, 12 and 15**

5.1 The high (by international standards) and increasing use of the MH Act (as reported in successive Office of the Director of Mental Health reports) breaches the right to liberty and security of persons

5.2 The disproportionately high use of the MH Act in relation to Māori breaches the right to liberty and security amongst New Zealand's indigenous population, as well as indigenous rights specific to UNDRIP

5.3 The MH Act breaches the right not to be detained because of disability

5.4 As the rights afforded people under NZBORA are not absolute this leads to the right of clinicians to undermine these rights as they see fit. There is no questioning of compulsory treatment decisions or routine consideration as to whether less restrictive treatment options could have been considered. These breaches of fundamental human rights are impacted further by stigma and discrimination within the mental health workforce.

5.4 Our understanding is that the government is unable to provide an official reason for 5.1 or 5.2, does not deem there to be any urgency to remedy this situation, nor to research causes or solutions to this practice.



## **6. Right to the integrity of the person / Article 17**

The right to the integrity of the person is frequently disregarded when people are subject to the MH Act. This is especially so in places of psychiatric detention. The treatments and practices in these circumstances is often demeaning, humiliating, coercive and sometimes aggressive.

## **7. Right to freedom from torture or cruel, inhuman or degrading treatment or punishment / Article 15**

7.1 The use of physical, chemical, psychological, environmental and social restraint is the primary intervention used in places of psychiatric detention. While this practice is currently viewed as normative it breaches Article 15

7.2 Routine practices and treatments in the mental health system, that constitute cruel, degrading and inhuman treatment, are sanctioned by the State

7.3 The practice of seclusion (effectively solitary confinement) and more severe forms of restraint (e.g. bed/chair restraints, spit hoods, tasers), constitute torture and cruel, inhuman and degrading practices for people in crisis and distress

7.4 The right to refuse any treatment is clearly abrogated by the MH Act giving clinicians the means to impose compulsory treatment on a person. A lack of equity also exists. For example, people refuse blood transfusions in New Zealand and may and do die from their personal decisions.

## **8. Right to health / Article 25**

The right to health is not protected. New Zealand's 'Equally Well' initiative provides evidence that people with a mental health diagnosis die prematurely, on average between 15-25 years younger than people in the general population (Te Pou o te Whakaaro Nui).

## **9. Supported Decision Making / Article**

When subject to the MH Act the right to supported decision making is not routine practice. Rather, substituted decision making is currently normative.

The low number of advocates (peers and others), and the limits placed on people to access advocacy when subjected to the MH Act, restricts the right to supported decision making.

## **10. Service provision and staffing issues**

In places of psychiatric detention, understaffing, limited restrictions to double and even triple shift rostering, inadequate staff training, and poorly regulated staff competencies all lead to fundamental breaches of the UNCRPD.

What changes do you think are needed in order to make the Mental Health Act and its administration more aligned with our obligations under NZBORA and the UNCRPD?

### **C. The legal framework**

Various UN working groups, special rapporteurs and other expert advisors have repeatedly informed NZ State parties that the Mental Health Act is discriminatory towards people with psychosocial disability and breaches the UNCRPD.

1. Immediate action is required to ensure that the MH Act (and all other domestic legislation such as the PPPR Act, Public Health and Disability Act, Substance Addiction Act) is amended so that they comply with both the UNCRPD, UNDRIP, and the NZBORA. Amendments should ensure that all services to people with psychosocial disability are provided with free and informed consent.
2. Discussion, review, action and ring-fenced funding is required to promote and resource alternatives to compulsory assessment and treatment.
3. The government urgently needs to acknowledge the full extent to which the MH Act breaches New Zealander's rights protected under the UNCRPD, UNDRIP and NZBORA. A sector-wide work plan is required to address these issues in the interim period up until the MH Act is amended or disestablished.
4. There is a need to ensure that all persons receiving or providing services directly or indirectly related to mental health are always, and in all settings, cognizant of their rights and responsibilities under domestic law and international obligations (e.g. UNCRPD; UNDRIP). This requires a robust systemic process for promoting rights across diverse services. It also requires repeat provision and explanation of information by individual staff and services.
5. All signage regarding information on legal services including District Inspectors need to be prominent and promoted wherever people receive services directly or indirectly related to mental health. Auditing of this information requirement needs to be better regulated, both within services and on services online promotions. Active measures are required to ensure people are aware of this information and for services to rectify immediately any failed audits.
6. Interpreters are required to be readily available, for all languages (including te reo Māori and NZ Sign language).

### **D. The workforce**

1. Promotion and increased resourcing of the networks that formally represent people with lived experience of psychosocial disability are required. These forms of representation are the most reliable, independent and quality conduit of sector intelligence between persons with lived experience and the services and government agencies that serve us.

2. Pro-active recognition, assertive promotion, and increased resourcing is required by State Parties of DPO's and others that represent the interest of people with lived experience of psychosocial disability, to enable the flow of information and sector development.
3. The established democratic networks of people with lived experience are the regional networks (North, MidCentral, Central, South) and the national network (Ngā Hau E Whā). Other disabled persons organisations, such as Balance Aotearoa and NAMHSCA, also play an important role.
4. The Independent Monitoring Mechanism that includes DPO's as part of the Convention Coalition Monitoring Group requires particular attention to ensure it is truly independent and protected from State party 'oversight' or 'political interference'.
5. Urgent assessment of the current human rights skill base within the sector's workforce is required. This should be followed by a program of remediation to address all the issues identified including training, competency regulation, and assessment
6. Staff need to be trained and competent to identify their own internal stigma and discrimination to actively challenge their own internal assumptions and beliefs
7. The workforce requires increased access to supervision, with all supervisors assessed around competency in all human rights legislation and the human rights framework.
8. Staff should only be retained and recruited where there is a demonstrated human rights skill base and a standard of cultural competency relevant to New Zealand.
9. The workforce should be well trained in the legal requirements afforded the people in their care and are able and willing to use these skills to enhance the welfare of those people.
10. In recognition of the need to eliminate seclusion (solitary confinement) forthwith, the MOH should direct all services to immediately comply with, and be regularly audited against, the Te Pou 6 core strategies to reduce seclusion and restraint.
11. Immediate and serious consideration should be given to address the high and escalating numbers of Māori who are subjected to compulsory treatment. The eurocentric nature of the status quo needs to be addressed. Regular Tiriti o Waitangi workshops of varying degrees of intensity and depth are required to be mandatory for the workforce to enable a more cultural competent focused sector to evolve. Such competencies should not be optional, with trainings being mandatory, including psychiatrists and other senior clinicians.
12. Health Practitioners who are recruited from overseas or other new arrivals who are applying to work in the mental health sector should be required to complete cultural competencies PRIOR to commencing practice.
13. People should have assistance to access any social services and government agencies as and when they need them with the workforce upskilled to assist this.
14. Interpreters are required to be easily and readily accessible.

## Part Two: Mental Health Act – the Issues

### 5. Individual autonomy/consent

Do you think the views and preferences of tangata whaiora / service users are considered sufficiently in decisions about their treatment? What is your experience?

5.1 Removing freedom and forcing people against their will is distressing, disempowering, creates further trauma and is antithetical to a recovery approach. Forced treatment clearly breaches basic human rights and is not life affirming.

5.2 The promotion of the “Open Dialogue” approach successfully used in several international contexts provides an alternative to forced treatment, to pharmaceutical treatment and would be a further step forward for New Zealand’s mental health system.

5.3 There is a need for greater understanding of a person’s capacity, intelligence, rights, socioeconomic status, ethnicity and access to competent advocates and support people

5.4 There is a need for the workforce to be trained in and to competently uphold human rights, and to understand relationships (especially between clinicians and the person, and personal ideologies, cultural frameworks and sets of beliefs).

5.5. Consent to treatment is not taken as seriously as people expect. It is prevalently reported that compulsory treatment via the MH Act is threatened when a person refuses pharmacological treatment. Negotiation or compromise is rarely possible where there are divergent views and when there is a power differential between parties.

5.6. People regularly report that their views, preferences and decisions are not sufficiently considered and are the least relevant to any assessment or decisions made by services and service providers.

5.7 While there is a lot of talk about moves towards involvement of the person in treatment plans and collaborative note writing, this is typically not occurring at ground level practice across the country.

5.8 People are rarely included in key treatment planning forums. A clear example of this is the lack of involvement of service users in multi-disciplinary team (MDT) meetings where the team meets most often in the absence of the person they are reviewing. This is a human rights breach and infringes the Code of Health and Disability Rights. It also infringes the fundamental recovery and peer leadership approach of “Nothing about us without us”. For MDTs to discuss a person without them present, the team should be required to have that person formally ‘opt out’ rather than for the person to attempt to ‘opt in’.

5.9 The take up, acceptance and success rates of reviews of compulsory treatment and Mental Health Review Tribunal hearings are extremely low. A national action plan is required to improve the take up and acceptance of hearings and to improve the success rates of challenges to compulsory treatment.

5.10 The marked overrepresentation of Māori in compulsory treatment order statistics is indicative of systemic racism that perpetuates psychosocial disability and associated trauma.

A national action plan is required to significantly reduce the number of compulsory treatment orders, especially for Māori.

What is your experience of consultation with the families and whānau of both adults and young people subject to the Mental Health Act, including in relation to treatment options? Is it culturally appropriate? How could it be improved?

## **6. Treatment options**

6.1 The evidence is that in most mental health services people are not listened to regarding preferences for treatment options, with threats of the MH Act being used to enforce treatment, preferred medications being withheld, and unwanted medications being imposed. Some experience a minority of staff who listen, observe, respect and try hard to work in ways that will lead to recovery. Peers are seen to do this best.

6.2 The option of working with a peer should be available to all persons within the mental health system.

6.3 People report generally positively on 'talking therapies' when this is an option and provided. The system requires greater attention to the importance of high quality talking therapists, and the training, employment and retention of persons who can provide talking therapies. Given the statistics regarding trauma as a precursor to distress, talking therapies should be readily available to all persons in the mental health system including in 'acute' or 'crisis' services.

6.4. The workforce needs to commit to respectful engagement and collaboration with family and whānau where this is agreed to by the person, and for this to be documented as part of the person's assessment and review processes. Family and whānau should include whoever the person defines as this.

6.5 More family and whānau spaces are required in all settings. These spaces need to be warm, inviting and readily accessible.

6.6 In places of psychiatric detention, a family and whānau area should be provided. This should be located within the ward rather than external to it (as occurs at many facilities).

6.7 There is a need for equity between inpatient psychiatric services and other general inpatient services re availability of overnight family and whānau beds.

6.8 The 'Open Dialogue' approach should be promoted across New Zealand mental health services as this prioritises the involvement of family and whānau.

6.9 Family and whānau are generally not informed of MDTs, changes to medications, and other major decisions made in relation to people. This can lead to distrust and acrimony. Families and whānau who are welcomed by the person they want to support should be encouraged to be as involved as they want to be. If socio economic reasons limit their access to the system, resources should be provided such as travel and other necessities.

6.10 Family, whānau and service user funding does not take into account the many hours and hard work that is required from families and whānau to support effective outcomes.

6.11 Inclusion of family and whānau needs to be the norm rather than the exception.

## **Advocacy and support**

How might tangata whaiora/service user decisions be better supported?

What supports are needed by seriously ill mental health patients to make decisions?

What about those persons with mental illness who do not have support networks?

What is the role of peer support, independent advocates and advance directives in supporting decision-making?



## **7. Advocacy and Support**

7.1 The right to well-qualified advocates, particularly those with peer experience, is required for all persons, especially those under compulsory treatment orders. A well-functioning national peer run advocacy service is required. There is a severe limit of such services throughout New Zealand. The lack of advocacy services infringes the Health and Disability Standard 8 re Support.

7.2 Advocates should be competent in all human rights legislation.

7.3 The advocacy and support workforce should be recovery focussed and less reliant on medication as the focus of treatment.

7.4 Advance Directives should be actively promoted and provide legal status. It should become standard practice that all service users have an Advance Directive and that this is respected and acted upon.

7.5 All psychiatric assessment should include assessment of Advance Directive obligations and promote the take up of Advance Directives. All services should be required to ensure an Advance Directive is completed prior to discharging any person from their service.

7.6 Peer support is very limited nationally with a lack of country-wide consistency of peer support services, especially in places of psychiatric detention, with peer support non-existent in many DHBs.

7.7 Despite the efficacy of peer run acute and respite services, this type of service provision is limited. The establishment of peer run services requires urgent investment.

### Checks and balances in the system

Does the current system of protections under the Mental Health Act adequately meet the needs of people under the MH Act. What are the gaps and where do you think improvements could be made, including for: Māori tangata whaiora /service users? Pasifika tangata whaiora / service users? People from other cultural/ethnic backgrounds? Young people? People with learning disabilities and cognitive impairments (including older people with dementia)?

## **8. Gaps**

8.1 The population groups listed above are added on to a largely Eurocentric 'mainstream' mental health system. There is ample evidence that one size does not fit all. There is an urgent need to develop kaupapa Māori services that are self-determining, embedded in Te Ao Māori, use te reo and tikanga, and are culturally relevant to tangata whenua.

8.2 Initiatives to develop leadership roles for the population groups noted above are required throughout the mental health system. This requires significant funding to support people to develop these roles.

8.3 Addressing the inequity issues that currently exist for Māori should be given urgent attention and be prioritised above all initiatives.

8.4 There is an insufficient number of and lack of resourcing for kaupapa Māori services, Māori clinicians and Kaupapa Māori modalities. There is a lack of commitment for Māori to head services.

8.5 Urgent priority is required to increase the size and capacity of the Māori workforce, with increased training and retention initiatives across all services.

- 8.6 Increased resources are required for Māori peer support and kaupapa Māori peer services
- 8.7 A consistent decision-making model is required so that people are central to the decision-making process of service provision.
- 8.8 Improvements are needed in family and whānau engagement
- 8.9 Peer advocates should have official status in all mental health court processes and be recognised by the courts on par with any other professional.
- 8e. There is a need for a comprehensive review of all legislation so that it is compliant with human rights legislation both nationally and internationally (UNCPRD; UNDRIP; NZBORA)

#### Respect for cultural identity and personal beliefs

What is your experience of cultural competency in the services provided under the Mental Health Act? When should cultural assessment be used?

What do you think constitutes 'proper recognition' of whānau, hapū and iwi in terms of use of the Mental Health Act? (This is set out in the Mental Health Act guidelines: it is not defined, but it is described).

What changes would you like to see?

### **9. Cultural identity rights**

In general health services, do not take a whole of organisation responsibility for ensuring cultural competency. Often cultural competency, in working with Māori, are left to Māori, thereby limiting the responsibility of this obligation.

9.1 Cultural competency varies enormously between services and areas. Cultural competence requires increased funding, resourcing and commitment from services. It is essential that all services have cultural competency programmes and leaders to provide these.

9.2 To develop robust structures, Māori need to be represented in decision-making at all levels and to determine the nature and provision of mental health services for tangata whenua.

9.3 It is important at every stage of a person's journey towards and within mental health services that family/whānau are engaged and respected. Clinicians should be responsible to engage a person's family/whānau about aspects of the person's illness if they are expected to be a part of their support group

9.4 Hapū, whānau, and iwi affiliations should be incorporated into the assessment and treatment plan to ensure that cultural assessment is a key component of service delivery.

9.5 More resource for Māori to establish Māori peer support and kaupapa Māori peer services will enable people to receive care in the community.

#### Compulsory treatment orders

Do you think the threshold for initiating, extending and moving people onto a compulsory treatment order is too low? Please comment.

What is the impact on individuals of being placed under a compulsory treatment order (inpatient or community) and on the therapeutic relationship between the individual and their clinician/clinical team?

Can the process of moving from voluntary treatment to compulsory assessment and treatment be improved? If so, how?

What role does access / lack of access to timely and appropriate services (inpatient and in the community), including early intervention and crisis resolution, play in people being placed under compulsory assessment and treatment?

## **10. Compulsory treatment orders (CTOs)**

10.1 Over the last 10 years there has been an overall increase in the use of CTOs in New Zealand. There is no credible justification for this increase. This practice is contrary to the UNCRPD and New Zealand's obligations as a signatory to the UNCRPD and at odds with international best practice

10.2 Free and informed consent is a basic human right and integral to hope and lasting positive outcomes. There is a substantial and longstanding international body of research evidence that demonstrates coerced treatment does not produce lasting positive outcomes.

10.3 Compulsory treatment is often the measure of first resort even though other practices are known to support people effectively through recovery and to produce sustained positive outcomes. The mental health system is currently overly risk averse and risk 'management' is routinely a priority for services rather than practices conducive to recovery, hope and lasting change.

10.4 Compulsory treatment orders are by and large used as a strategy to control, contain and coerce people to comply with medication regimes. This approach allows the government to not fund and ensure provision of other treatment options (e.g. access to te reo; access to Te Ao knowledge and kaupapa Māori services; peer support services; high quality and affordable talking therapies; high quality and therapeutic art and music therapies). It also means that the government as a whole is not required to work collaboratively to address and fund the core social conditions that contribute to and exacerbate psychosocial disability (e.g. adequate, affordable, safe and secure housing; a living wage or universal living income; multiple forms of violence and abuse in families and whānau; bullying in schools and workplaces). This practice undermines meaningful recovery and lasting positive outcomes for people with psychosocial disability.

10.5 'Danger' needs to be defined and located in the broader context of society. At the present time 'danger' has a very low threshold and is applied in a discriminatory manner to people with psychosocial disability. This disparity needs urgent attention.

10.6 The training and competency frameworks for mental health workers from community support workers through to nurses and psychiatrists needs an overhaul as the predominant bio-medical model is not working.

10.7 A relationship based approach such as Intentional Peer Support promotes much more inclusive support where power and expertise are in balance.

10.8 The court space should be flexible and honour the treaty, i.e. be held in culturally appropriate places such as Marae and away from places of psychiatric detention.

10.9 It is hard for a person to establish a therapeutic relationship or a feeling of trust with a clinician or service that has instigated compulsory treatment. All therapeutic relationships are compromised by the imposition of compulsory treatment including when it is instigated by family/whānau hence the need to respect the right to free and informed consent.

10.11 The effect of using uniformed police to 'apprehend' any distressed person is therapeutically disastrous. The use of spit hoods, ankle and wrist restraints and tasers should not be used on any person experiencing acute mental health distress as the



interventions further traumatise a person in crisis.

10.12 All police require training in mental health awareness and this should be delivered by the peer workforce

10.13 People experiencing mental distress should be well supported by people of their own choosing.

10.14 The offer of and contact with peer supports and advocates should be required whenever someone presents with mental distress. The process should not be rushed – it should take as long as it takes. People need answers about what is happening. They may need to go back again and again for the same answers.

10.15 The entrance and exit of people into psychiatric detention facilities should always be via the designated front entrance.

10.16 Māori should be given karanga as per standard kaupapa protocol when entering services, particularly inpatient services.

10.17 Most crisis services are understaffed. This results in long waits and delays – even when people have reached the emergency department. This untimely wait period exacerbates symptoms and distress. The sooner a person is seen the sooner interventions and options can be considered which reduces any crises. A maximum wait time for people presenting in any setting in crises should be implemented with the standard regularly audited for compliance.

### Seclusion and restraint

What is your experience of seclusion and restraint? What do you think are the key changes needed to further reduce (and eventually eliminate) seclusion?

#### **11. Seclusion (seclusion)**

There is no therapeutic value to seclusion or the restraint that so often accompanies it. Rather it is a behaviour management tool and punishment due to treatment failure.

The right to 'company', the right to liberty, and the right to freedom from torture, cruel and inhuman treatment is denied to people in seclusion. Family, whānau and other visitors, including advocates, are frequently denied access to people in seclusion without valid reason. Statutory debriefs after seclusion are not always undertaken and almost never include the person and or their family, whānau or other support persons.

11.1 Seclusion needs to be eliminated in places of psychiatric detention forthwith.

11.2 The Ministry of Health should direct DHBs to eliminate seclusion.

11.3 The 6 core strategies to reduce seclusion and restraint offered by Te Pou o te Whakaaro Nui should be a mandatory competency for all working in places of psychiatric detention. This needs to include everyone within any detention setting and by everyone in the service hierarchy.

11.4 In recognition of the need to eliminate seclusion forthwith, the Ministry of Health should implement an urgent national strategy for the immediate elimination of seclusion, rather than individual DHBs (such as Tairāwhiti, Taranaki, Southern) setting elimination timeframes in isolation. The timeframe for elimination of seclusion should be a Ministry of Health directive and not left to individual DHBs to decide.

11.5 Immediate and serious consideration should be given to address the racism that exists, evidenced in the disproportionately higher use of seclusion for Māori.

Indefinite form of compulsory treatment order

What is your experience of and view on indefinite treatment orders?

### **Compulsory treatment orders**

12.1 Indefinite compulsory treatment orders are a management tool for people with the highest need who do not wish to accept the current pharmaceutical treatment regime.

12.2 These orders annihilate the right to freedom and liberty, the right to a quality of life, and to recovery, and lead people to suicide and/or risk of 'capture' by forensic services.

12.3 The statistics for compulsory treatment vary widely across DHBs. There is evidence that institutional racism is prevalent in the way these orders are used especially for Māori.

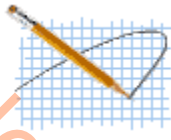
12.4 The right to justice is denied, with evidence of huge disparity between those serving sentences under compulsory treatment orders and those in non-forensic services.

Final comments

Is there anything else you want to tell us? If so, feel free to make any further comments here.

There is concern with the submission process.

- The promotion of the review was extremely limited, with the dissemination of the submission form limited in both peer and non-peer networks.
- The submission template was not accessible or user friendly, with formatting issues such as tables and checkboxes not correctly formatted.
- There was a lack of neutrality in the referencing of the discussion document with divergent views not fully provided.
- The discussion document was not reviewed or agreed on by the working group.
- There are concerns about the exclusion during the submission process to represent the views of people who transition to and from forensic services or those who remain in such services long term. Everyone impacted by the Mental Health Act should have had the ability to be represented in submissions.
- There are serious concerns about the limited "partnership relationship" between the Ministry of Health and networks that represent people with lived experience of psychosocial disability.
- In partnering only with Balance Aotearoa the voices of people with lived experience has been seriously eroded. Having only one organization that effectively only represents Whānganui, and only one person's views, has seriously eroded the accountability and representation of people with lived experience of psychosocial disability across the country. Ngā Hau E Whā represents all regions of Aotearoa New Zealand, is comprised of Māori and non-Māori, and is led by a diverse group of leaders who experience psychosocial disability. Ngā Hau E Whā recommends that future partnerships include our organization as integral to the partnership structure.



Sent by:  
@xzn  
z

17/03/2017 02:00 p.m.

To: Crawshaw/John Mr <john\_crawshaw@moh.govt.nz>,  
cc:  
bcc:

Subject: Online Travel Request for Victoria Roberts (Ministry of Health) - Authorisation Required - Depart 21 Mar 2017

**Tandem Travel**  
**Authorisation Request**      **0800-247-020**

As an authoriser you will need to either:

- Approve the travel.
- Request modification to the itinerary.
- Deny the request.

Airlines reserve the right to change terminals for their flights. Please confirm the terminal details for your trip prior to departure.

Select Booking # [2469048](#) to Authorise travel of **Ministry of Health** for: **Victoria Roberts**

**Please note that the booking must be approved prior to 17 Mar 2017 23:29 NZ**

**Itinerary**

Vendor Ref.	From	Date	To	Date	Provider (Operated by)	Details
4KAIHH	Wellington (WLG)	21 Mar 2017 0630	Hamilton (HLZ)	21 Mar 2017 0740	AIR NEW ZEALAND (MT COOK AIRLINES TRADING AS AIRNZ LINK)	NZ 5810 Fare: TB Booking
4KAIHH	Hamilton (HLZ)	22 Mar 2017 1720	Wellington (WLG)	22 Mar 2017 1830	AIR NEW ZEALAND (MT COOK AIRLINES TRADING AS AIRNZ LINK)	NZ 5021 Fare: QB Booking

**Costing**

Type	Pay Direct	Chargeable	Base	Taxes & Fees <sup>†</sup>
Air	-	-	359.85	61.98
Service Fee	-	-	-	-
<b>Total in NZD</b>			<b>359.85</b>	<b>61.98</b>

<sup>†</sup> For Air New Zealand flights the Air New Zealand card payment fee will be included under Taxes and Fees. The fee is per person per one way journey and if paying by Air New Zealand Travelcard, the amount of the Air New Zealand card payment fee pertaining to any Air New Zealand flights will be rebated.

**References**

Cost Centre **4-455000**  
project code **0000**  
object code **6434**  
PNR Ref **EHLEJG**

**Best Fare Offered Information**

Provider	From	Depart	To	Arrive	Flight	Fare (per person)	Reason
NZ	Wellington (WLG)	21Mar 0630	Hamilton (HLZ)	21Mar 0740	NZ5810	NZD 171.32	BAG
NZ	Hamilton (HLZ)	22Mar 1720	Wellington (WLG)	22Mar 1830	NZ5021	NZD 230.72	BAG

**Reason for Travel**

OTH - DI Interviews - Hamilton

**Special Request Remarks**

Please book one nights accommodation at the Ibis in Hamilton

Type:TP, Number:1086\*\*\*\*\*0013, Name on Card:MOH TRAVELCARD, Expiry:2018-03, Security Code:null. (GDS Air Segments)

**Contact****Consultant**

Verity Gemmell

[verity.gemmell@tandemtravel.co.nz](mailto:verity.gemmell@tandemtravel.co.nz)

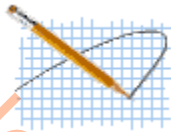
**Arranger**

Nina Klauke

[nina.klauke@moh.govt.nz](mailto:nina.klauke@moh.govt.nz)



Released under the Official Information Act 1982



Sent by: @xxx  
01/06/2017 08:46 a.m.

To: "zz Crawshaw, John" <John\_@xxx>  
cc:  
bcc:

Subject: Action Required: Purchase Requisition 111872 for Wong, Helen (1,575.00 NZD) requires approval

From **Wong, Helen** Description **Victoria Roberts invoice 29/May District Inspector interviews March and April**  
m  
To **zz Crawshaw, John** Requisition **1,575.00 NZD**  
Total  
Sent **01/06/2017 08:44:43**  
Due **08/06/2017 08:44:43**  
ID **3562427**

Requisition Lines



Line	Item Description	Supplier	Cost Centre	UOM	Quantity	Price (NZD)	Line Amount (NZD)
1	Victoria Roberts invoice 29/May District Inspector interviews March and April		455000	Each	1	1,575.00	1,575.00

[View Requisition Details](#) | [Edit Requisition](#)

Approval Sequence



	Who	Action	Date	Note
3	zz Crawshaw, John	Pending		
2	Wong, Helen	Forwarded	01/06/2017	
1	Wong, Helen	Submitted	01/06/2017	

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[Please click here to Respond](#) Notification Detail.html

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Sent by:  
@xn  
z

To: "nina\_klauke@moh.govt.nz" <nina\_klauke@moh.govt.nz>,  
cc:  
bcc:

17/03/2017 02:51 p.m.

Subject: Client Statement for ROBERTS/VICTORIA MS booking 2469048 - Hamilton 21  
Mar 17

Thank you for booking with Tandem Travel

Please find client statement attached

Tandem Travel



Client\_Statement\_BKG2469048\_0378.pdf

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**Tandem Travel Contact Details**

Tandem Travel Phone: 0800 707 102  
Fax: 04 382 2183  
Email: xxxxxx@xxxxxxxxxxxxx.xx.xx

**Customer Details**

Wellington Offices Booking #: 2469048  
PO BOX 5013 Date: 17-Mar-2017  
Wellington Central 6011 Consultant: Verity Gemmell  
New Zealand Email: xxxxxx.xxxxxx@xxxxxxxxxxxxx.xx.xx  
Ordered by: Klauke/Nina Ms

**Booking Reference: EHLEJG Cost Centre: 4-455000**  
**Project Code: 0000**  
**Object Code: 6434**

**ITINERARY PREPARED FOR: MS VICTORIA ROBERTS**

**Domestic Check-in**

If you have bags to check in, you are required to be checked in and bags dropped off at least 30 minutes before the scheduled departure of your flight. If you are connecting to an international flight you are required to be checked in 60 minutes prior to the departure of your domestic flight. You will need to carry your proof of identity with you, as you may be required to present this at check-in. Further check-in information can be found on your airline's website.

**Tuesday 21 March 2017 - FLIGHT**

06:30 Depart **WELLINGTON** on AIR NEW ZEALAND flight NZ 5810 Economy Class ( T ) Confirmed  
Service operated by /MT COOK AIRLINES TRADI  
Aircraft: ATR TURBOPROP  
Flying time: 1 hours and 10 minutes  
Distance: 242 miles  
Airline Reference: 4KAIHH  
**Check-in at the /MT COOK AIRLINES TRADI counter**

07:40 Arrive: **HAMILTON** Tuesday 21 March

SEAT+BAG FARE: Changes permitted prior to the day of departure with payment of a change fee per person. Fare difference and service fee may apply. Fare is NON REFUNDABLE. One piece of checked baggage (maximum 23kg). Airpoints Gold/Gold Elite and Koru may check in one additional piece. Advance seating requests require prepayment (unless Airpoints Gold/Gold Elite and Koru). Upgrading to FlexiTime or FlexiPlus is not permitted.



**Wednesday 22 March 2017 - FLIGHT**

17:20 Depart **HAMILTON** on AIR NEW ZEALAND flight NZ 5021 Economy Class ( Q ) Confirmed  
Service operated by /MT COOK AIRLINES TRADI  
Aircraft: ATR TURBOPROP  
Flying time: 1 hours and 10 minutes  
Distance: 242 miles  
Airline Reference: 4KAIHH  
**Check-in at the /MT COOK AIRLINES TRADI counter**

18:30 Arrive: **WELLINGTON** Wednesday 22 March

SEAT+BAG FARE: Changes permitted prior to the day of departure with payment of a change fee per person. Fare difference and service fee may apply. Fare is NON REFUNDABLE. One piece of checked baggage (maximum 23kg). Airpoints Gold/Gold Elite and Koru may check in one additional piece. Advance seating requests require prepayment (unless Airpoints Gold/Gold Elite and Koru). Upgrading to FlexiTime or FlexiPlus is not permitted.

**Ticket Numbers:**

ROBERTS/VICTORIA MS 086 1242562488 Air New Zealand WLG/HLZ/WLG

**Costs**

Service	Fare	Taxes & Fees*	Due	GST Content
<b>Airfare:</b>				
Air New Zealand WLG/HLZ/WLG	\$414.87	\$6.96	\$421.83	\$55.02
<b>Other Services:</b>				
BKF Ref: Booking Fee	\$13.80	\$0.00	\$13.80	\$1.80
<b>Total costs</b>				<b>\$435.63</b>
<b>Less amount received</b>				<b>\$435.63</b>
<b>Balance</b>				<b>\$0.00</b>

**SPECIAL REQUEST REMARK**

If you have entered a special request in your booking, the information may not reflect on the initial Client Statement you receive. Your request will be actioned accordingly by a consultant and an updated Client Statement will be sent to you.

**PROOF OF IDENTIFICATION (DOMESTIC FLIGHTS)** - May be required when you check-in for your domestic flight. Suitable forms of identification include Drivers Licence, Passport, major credit card, Airpoints/Koru card, Community Services or Student ID Card.

**CHECK IN & REPORTING TIME**

Travellers must check-in with the operating carrier. It is important that you observe the recommended check in times. Late reporting for your flight may mean your pre-assigned seats have been re-allocated, or you may be required to transfer to the next available flight which may incur additional costs.

**SEATING**

We will do our best to ensure you receive the requested seat(s). However circumstances on the day of travel may result in a different seat being allocated. Seats cannot be guaranteed.

**\*CARD PAYMENT FEE**

For Air New Zealand flights the Air New Zealand card payment fee (NZCPF) will be included under Taxes & Fees. The fee is per person, per one way journey and differs between domestic, short-haul international and long-haul international journeys.

If paying by Air New Zealand Travelcard, the amount of the NZ CPF pertaining to any Air New Zealand flights will be rebated in full and shown on your Air New Zealand Travelcard Invoice Summary.

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Sent by: Nina Klauke/MOH  
24/07/2017 09:57 a.m.

To: Victoria Roberts <[REDACTED] s 9(2)(a)>,  
cc:  
bcc:

Subject: Re: Nga Hau e Wha

Hello Victoria

Thank you for your email. Before I can confirm Dr Crawshaw's availability on those dates, can you please advise if Nga Hau e Wha will be held in Wellington?

I look forward to hearing from you.

Cheers

Nina Klauke  
Executive Assistant  
Office of the Director of Mental Health  
Protection Regulation and Assurance  
Level 2 133 Molesworth Street, Thorndon, Wellington 6011  
DDI: 04 496 2213

Victoria Roberts    Morena Nina I hope this finds you wa...    24/07/2017 07:31:17 a.m.

From: Victoria Roberts <[REDACTED] s 9(2)(a)>  
To: nina\_klauke@moh.govt.nz,  
Date: 24/07/2017 07:31 a.m.  
Subject: Nga Hau e Wha

Morena Nina

I hope this finds you warm and well.

The next meeting of Nga Hau e Wha is on the 24/25 August.

I am just doing the agenda.

Does Dr Crawshaw have any space in his diary for either of those days?

Nga mihi nui

Victoria

**Victoria Roberts BA(Psych),PGDipRehab | Chair | Nga Hau e Wha**

[www.nhew.org.nz](http://www.nhew.org.nz) | [REDACTED] s 9(2)(a)

**The national voice of people with lived experience of mental distress and addictions**



Nga Hau E Wha  
*"Champion many voices"*

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Sent by: Merrin Webster/MOH

11/01/2018 03:24 p.m.

To: Victoria Roberts [REDACTED] s 9(2)(a)

cc:

bcc:

Subject: Re: Nga Hau e Wha dates for 2018

Thanks for sending this through Victoria and a very Happy New Year to you too. I'll pop these in John's diary now.

I am assuming you will let me know where and when closer to the time?

Kind regards, Merrin

Merrin Webster  
Executive Assistant  
Office of the Director of Mental Health and Addiction Services  
Protection Regulation and Assurance  
Ministry of Health  
DDI: 04 496 2213

<http://www.health.govt.nz>

[mailto:Merrin\\_Webster@moh.govt.nz](mailto:Merrin_Webster@moh.govt.nz)

Victoria Roberts

Kia ora Merrin I hope you had a great...

11/01/2018 03:03:56 p.m.

From: Victoria Roberts [REDACTED] s 9(2)(a) >  
To: merrin\_webster@moh.govt.nz, "John Crawshaw/MOH" <John\_Crawshaw@moh.govt.nz>,  
Cc: Kai In The City <[REDACTED] s 9(2)(a)>  
Date: 11/01/2018 03:03 p.m.  
Subject: Nga Hau e Wha dates for 2018

Kia ora Merrin

I hope you had a great Christmas and that 2018 is spectacular for you!

I am writing to update you on the 2018 dates for Nga Hau e Wha's meetings. Please will you add these into Dr Crawshaws diary

1/2 March; 24/25 May; 23/24 August and 1/2 November.

For this year we will be putting our guests into the agenda on the second day after getting all the group business completed on the first day.

Thanks for your assistance with all of this.

Nga mihi nui

Victoria

**Victoria Roberts BA(Psych);PGDipRehab I Chair I Nga Hau e Wha**

[www.nhew.org.nz](http://www.nhew.org.nz) | [REDACTED] s 9(2)(a)

**The national voice of people with lived experience of mental distress and addictions**



Sent by: Sophia  
Farrington-Pech/MOH

23/01/2018 02:17 p.m.

To: John Crawshaw/MOH@MOH,

cc:

bcc:

Subject: Suggested stakeholders for message

Hi John

Here are the suggested stakeholders for you to send the message out to. Is there anyone else you think needs to be informed? I'll come up and have a chat to Merrin.

DHB CEs - DHB - CEOs (in external contacts) - also need to add Dale Oliff is Acting as CEO for Hutt Valley: [dale.oliff@huttvalleydhb.org.nz](mailto:dale.oliff@huttvalleydhb.org.nz)

GMs Funding and Planning - p-group DHB - Funding and Planning Managers

P-group Mental Health - DAMHS  
P-group Mental Health - DAMHS/Clinical Directors

Co chairs of NAMHSCA [louise.windleborne@huttvalleydhb.org](mailto:louise.windleborne@huttvalleydhb.org) and [John.Kavermann@cdhb.health.nz](mailto:John.Kavermann@cdhb.health.nz)

Chair of Nga Hau e Wha, Victoria Roberts s 9(2)(a)

Platform Trust, Marion Blake [ceo@platform.org.nz](mailto:ceo@platform.org.nz)

Regards

Sophia

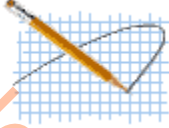
Sophia Farrington-Pech  
Senior Advisor  
Internal and Stakeholder Communications  
Communications  
Office of the Director-General  
Ministry of Health  
Mobile: s 9(2)(a)

[www.health.govt.nz](http://www.health.govt.nz)

[Sophia\\_Farrington-Pech@moh.govt.nz](mailto:Sophia_Farrington-Pech@moh.govt.nz)

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Sent by: [Redacted] s 9(2)(a)  
19/05/2016 09:54 a.m.

To: Janice\_Reeves@moh.govt.nz,  
cc: Hingatu\_@xxxSarah, \_Paterson@moh.govt.nz,  
John\_@xxx  
bcc:

Subject: Re: Mental Health Review Tribunal Interviews

Morena Janice

I am available on the 8 June at 11-12. On the 14 June I would prefer 11-12 as well but can rearrange things if necessary.

Nga mihi

Victoria Roberts

On 19/05/2016 9:39 am, <[Janice\\_Reeves@moh.govt.nz](mailto:Janice_Reeves@moh.govt.nz)> wrote:

Good Morning

Two applicants are unavailable for interview on 9 and 10 June.

Can you please confirm your availability by return email as follows:

**8 June**

11:00 - 12:00 - Interview [Redacted] s 6(c)

**14 June**

9:00 - 10:00 or 11:00 - 12:00 - Interview [Redacted] s 9(2)(a)

Thank you

Kind Regards

**Janice Reeves | Executive Assistant to Dr John Crawshaw |  
Director of Mental Health**  
Office of the Director of Mental Health  
Protection, Regulation and Assurance  
Ministry of Health  
DDI: 04 496 2213

<http://www.health.govt.nz>  
[mailto:Janice\\_Reeves@moh.govt.nz](mailto:Janice_Reeves@moh.govt.nz)



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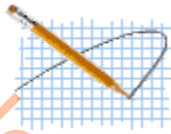
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Sent by: [REDACTED] s 9(2)(a)  
17/01/2017 03:37 p.m.

To: "John Crawshaw/MOH" <John\_XXXXXXX@xxx.xxxx.xx>,  
cc:  
bcc:

Subject: Re: February Meeting

Hi again  
23/24 February  
Nga mihi  
Victoria

**Victoria Roberts | Chair | Nga Hau e Wha**

[www.nhew.org.nz](http://www.nhew.org.nz) | [REDACTED] s 9(2)(a)

The national voice of people with lived experience of mental distress and addictions



On 17 January 2017 at 15:27, <[John\\_Crawshaw@moh.govt.nz](mailto:John_Crawshaw@moh.govt.nz)> wrote:  
Happy New Year Victoria

Nina Klauke is my current temporary EA. What is the date for the February meeting?

John

-----  
John Crawshaw  
Director of Mental Health & Chief Advisor  
Office of the Director of Mental Health  
Protection Regulation & Assurance  
Ministry of Health

DD: 04 496 2304

Fax: 04 496 2559

<http://www.moh.govt.nz>

mailto: [John\\_Crawshaw@moh.govt.nz](mailto:John_Crawshaw@moh.govt.nz)

From: Victoria Roberts [REDACTED] s 9(2)(a)  
To: "John Crawshaw/MOH" <[John.Crawshaw@moh.govt.nz](mailto:John.Crawshaw@moh.govt.nz)>,  
Date: 17/01/2017 03:26 p.m.  
Subject: February Meeting

Kia ora John

I am just sorting out the agenda for the February meeting of Nga Hau e Wha.

Can you please send the email address of your EA so I can arrange the times you are available?

Have a very happy 2017.

Nga mihi nui

Victoria

**Victoria Roberts | Chair | Nga Hau e Wha**

[www.nhew.org.nz](http://www.nhew.org.nz) | [REDACTED] s 9(2)(a)

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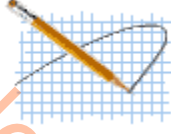
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Sent by: [REDACTED] s 9(2)(a)  
31/01/2017 10:19 a.m.

To: "John Crawshaw/MOH" <John\_XXXXXXXX@xxx.xxxx.xx>, nina\_klauke@moh.govt.nz,  
cc:  
bcc:

Subject: Fwd: Booking for Nga Hau e Wha

Morena John

I was hoping you would be able to attend our meeting on the 23rd or 24th February.

I have been in touch with Nina Klauke as you advised me to but have not heard back from her about any suitable times for you.

Would you like for us the flag the February meeting and make a time now for the May meeting?

Nga mihi nui

Victoria

**Victoria Roberts | Chair | Nga Hau e Wha**

[www.nhew.org.nz](http://www.nhew.org.nz) | [REDACTED] s 9(2)(a)

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Kia ora Nina

Just another request to see if there is any other times on the 23/24 th.

Maybe we should just flag it and aim for the May meeting.

Nga mihi

Victoria Roberts.

----- Forwarded message -----

From: **Victoria Roberts** [REDACTED] s 9(2)(a)

Date: 24 January 2017 at 21:33

Subject: Re: Booking for Nga Hau e Wha

To: [Nina\\_Klauke@moh.govt.nz](mailto:Nina_Klauke@moh.govt.nz)

Cc: John Crawshaw/MOH <[John\\_Crawshaw@moh.govt.nz](mailto:John_Crawshaw@moh.govt.nz)>

Kia ora Nina

Thank you for your email.

Unfortunately Nga Hau e What is only meeting on the 23/24 February so we need to arrange for Dr. Crawshaw to speak to us on one of those days. Failing that we need to arrange times for our May meeting which are a bit further down the track.

At this time I don't have others booked for other times on either of those days (23/24 Feb) so hopefully we can find a time that Dr. Crawshaw can fit us in.

Look forward to hearing from you again.

Nga mihi

Victoria Roberts  
Chair Nga Hau e Wha

On 24/01/2017 4:20 pm, <[Nina\\_Klauke@moh.govt.nz](mailto:Nina_Klauke@moh.govt.nz)> wrote:

Hello Victoria

Thank you for your email, I have been on leave and have just seen your email. Unfortunately Dr Crawshaw is attending another meeting on that date, could I suggest Monday 27 February between 2pm and 3pm or 11am to 12 am on Wednesday 1 March 2017.

I look forward to hearing back from you.

Kind regards

Nina Klauke  
Executive Assistant  
Office of the Director of Mental Health  
Protection Regulation and Assurance  
Level 2 133 Molesworth Street, Thorndon, Wellington 6011  
DDI: 04 496 2213

From: Victoria Roberts [REDACTED] s 9(2)(a)  
To: [nina\\_klauke@moh.govt.nz](mailto:nina_klauke@moh.govt.nz)  
Cc: "John Crawshaw/MOH" <[John\\_Crawshaw@moh.govt.nz](mailto:John_Crawshaw@moh.govt.nz)>  
Date: 17/01/2017 05:18 p.m.  
Subject: Booking for Nga Hau e Wha

---

Kia ora Nina

Please could you fit the next meeting of Nga Hau e Wha into Dr Crawshaw's diary.

Is he available between 10-11am on Feb 23rd?

I have other times available if that doesn't suit - please get back to me.

Many thanks

Nga mihi nui

Victoria

Victoria Roberts | Chair | Nga Hau e Wha

[www.nhew.org.nz](http://www.nhew.org.nz) |

s 9(2)(a)

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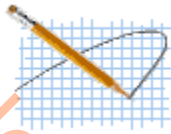
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Sent by: [REDACTED] s 9(2)(a)  
23/02/2017 09:40 p.m.

To: "John Crawshaw/MOH" <John\_XXXXXXX@xxx.xxxx.xx>,  
cc:  
bcc:

Subject: Re: Extension for submission

Kia ora John

Thank you very much. That's much appreciated.

Nga mihi nui

Victoria

On 23/02/2017 8:54 pm, <[John\\_Crawshaw@moh.govt.nz](mailto:John_Crawshaw@moh.govt.nz)> wrote:

Happy to extend it until Monday of next week.

---

John Crawshaw  
Director of Mental Health & Chief Advisor  
Office of the Director of Mental Health  
Protection Regulation & Assurance  
Ministry of Health

DD: 04 496 2304

Fax: 04 496 2559

<http://www.moh.govt.nz>

mailto: [John\\_Crawshaw@moh.govt.nz](mailto:John_Crawshaw@moh.govt.nz)

---

From: Victoria Roberts [REDACTED] s 9(2)(a)  
To: "John Crawshaw/MOH" <[John\\_Crawshaw@moh.govt.nz](mailto:John_Crawshaw@moh.govt.nz)>,  
Date: 23/02/2017 01:22 p.m.  
Subject: Extension for submission

Kia ora John

I am compiling the Nga Hau e Wha submission for the MHA and Human Rights and I am requesting an extension to the date it is due.

Can I please send it to your office by Monday?

Nga mihi nui

Victoria

\*\*\*\*\*

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Sent by: Sarah Paterson/MOH

20/02/2018 02:37 p.m.

To: Stephen Enright/MOH@MOH,  
cc: Rangi Johnson/MOH@MOH, Jenny Hawes/MOH@MOH,  
bcc:

Subject: Re: Min C1800250 (Rberts) - Mental Health Sector

Hi Rangi

Looks good to me. I notice that one of the instances of Inquiry into mental health and addiction has an s on the end of addictions in paragraph 3.

In paragraph 5 I would replace you with Nga Hau E Wha  
I encourage you Nga Hau E Wha to take any opportunity to participate when the Inquiry calls for it, as your views are important.

My understanding is that Nga Hau E Wha had a representative take part in the Director of Mental Health's review into the consistency of mental health laws work so that sentence is ok to keep in this ministerial :)

I note this reply does not address the point on how to best advocate to other ministers however this may not be appropriate to address.

Kind regards  
Sarah

**Sarah Paterson**

Advisor | Office of the Director of Mental Health & Addiction Services |  
Ministry of Health | Manatū Hauora | [www.health.govt.nz](http://www.health.govt.nz)

DDI: 04 816 2489 |

My usual hours of work are Monday , Tuesday and Wednesday (morning)



Stephen Enright

Hi Sarah, Could you please PR the at...

20/02/2018 12:42:27 p.m.

From: Stephen Enright/MOH  
To: Sarah Paterson/MOH@MOH,  
Cc: Rangi Johnson/MOH@MOH, Jenny Hawes/MOH@MOH, John Crawshaw/MOH@MOH  
Date: 20/02/2018 12:42 p.m.  
Subject: Re: Min C1800250 (Rberts) - Mental Health Sector

Hi Sarah,

Could you please PR the attached response from Rangi.

Kind regards

Stephen Enright

Manager  
Office of the Director of Mental Health and Addiction Services  
Ministry of Health  
DDI: 04 496 2080

<http://www.moh.govt.nz>  
[mailto:Stephen\\_Enright@moh.govt.nz](mailto:Stephen_Enright@moh.govt.nz)

Jenny Hawes      Kia ora Rangi, I am sure it is somethin...      20/02/2018 10:36:19 a.m.

From: Jenny Hawes/MOH  
To: Rangi Johnson/MOH@MOH,  
Cc: Stephen Enright/MOH@MOH  
Date: 20/02/2018 10:36 a.m.  
Subject: Re: Min C1800250 (Rberts) - Mental Health Sector

Kia ora Rangi,

I am sure it is something we could help with. However, I will forward to Stephen Enright who is the Manager in ODMH and who distributes the Ministerials amongst we advisors.

Did you have any luck with the other Mental Health Inquiry related letters. I think you were going to get some advice from Oliver on the standard response. I contacted Amanda but she is in Palmerston North this week and referred me back to Oliver. Happy to help.

Cheers  
Jenny

Jenny Hawes  
Principal Advisor  
Office of the Director of Mental Health  
Protection, Regulation and Assurance  
Ministry of Health  
DDI: 04 816 2981

<http://www.health.govt.nz>  
[mailto:Jenny\\_Hawes@moh.govt.nz](mailto:Jenny_Hawes@moh.govt.nz)

Rangi Johnson      Kia ora Jenny I have another "mental...      19/02/2018 01:33:03 p.m.

From: Rangi Johnson/MOH  
To: Jenny Hawes/MOH@MOH,  
Date: 19/02/2018 01:33 p.m.  
Subject: Min C1800250 (Rberts) - Mental Health Sector


Kia ora Jenny

I have another "mental health" ministerial, this one from "Nga Hau E Wha" a group working in the mental health sector, requesting a meeting with the PM.

Is this something your team can assist with? As a starting point, I have drafted a response declining a meeting and providing standard information about the Inquiry.

Any further information and guidance would be much appreciated.

Cheers, Rangi

				Ref Number	Writer	Subject	Dt Due	Status
				C1800250	Victoria Roberts	MINS: Mental Health sector	16/03/2018	With Analy

Rangi Johnson  
Ministerial Advisor  
Government Services  
Office of the Director-General  
Ministry of Health  
DDI:

<http://www.moh.govt.nz>  
[mailto:Rangi\\_Johnson@moh.govt.nz](mailto:Rangi_Johnson@moh.govt.nz)

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Sent by: [REDACTED] s 9(2)(a)  
21/02/2018 08:39 a.m.

To: Merrin\_Webster@moh.govt.nz,  
cc:  
bcc:

Subject: Re: Nga Hau e Wha

It's at the Ministry but not sure which room it's in. Will let you know when I know.

On 21/02/2018 8:33 AM, <[Merrin\\_Webster@moh.govt.nz](mailto:Merrin_Webster@moh.govt.nz)> wrote:

Yes, I have him concreted in the diary for you. Would you mind re-confirming the address for the meeting please?

With thanks, Merrin

Merrin Webster  
Executive Assistant  
Office of the Director of Mental Health and Addiction Services  
Protection Regulation and Assurance  
Ministry of Health  
DDI: 04 496 2213

<http://www.health.govt.nz>  
[mailto:Merrin\\_Webster@moh.govt.nz](mailto:Merrin_Webster@moh.govt.nz)

From: Victoria Roberts [REDACTED] s 9(2)(a)  
To: [merrin\\_webster@moh.govt.nz](mailto:merrin_webster@moh.govt.nz),  
Date: 21/02/2018 08:23 a.m.  
Subject: Nga Hau e Wha

---

Morena Merrin

I am just wanting to confirm that John will be attending our meeting Friday next week from 9.30-10.30.

Nga mihi nui

Victoria

**Victoria Roberts BA(Psych);PGDipRehab I Chair I Nga Hau e Wha**

[www.nhew.org.nz](http://www.nhew.org.nz) | [REDACTED] s 9(2)(a)

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Sent by: [REDACTED]  
s 9(2)(a)  
06/03/2018 12:52 p.m.

To: "John Crawshaw/MOH" <John\_@\*\*\*, TeHuia Bill Hamilton  
[REDACTED] s 9(2)(a) >,  
cc:  
bcc:

Subject: Nga Hau e Wha meeting

Kia ora John

Just a message to thank you for your attendance at our meeting last week.

We always appreciate your input to our meetings.

Nga mihi nui

Victoria

**Victoria Roberts BA(Psych);PGDipRehab I Chair I Nga Hau e Wha**

[www.nhew.org.nz](http://www.nhew.org.nz) | [REDACTED] s 9(2)(a)

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Sent by: John  
Crawshaw/MOH  
22/02/2017 10:39 a.m.

To:  
cc:  
bcc:  
Subject:

Bella Ansell/MOH@moh,  
Re: District inspector appointment round

Last time we used a consumer from the region where the interview took place so I do not have a clear preference so long as the rest of the panel is reasonably constant. Happy with Victoria.

Bella Ansell --- Fw: District inspector appointment round ---

From: "Bella Ansell" <Bella\_Ansell@moh.govt.nz>  
To: "John Crawshaw" <John\_Crawshaw@moh.govt.nz>  
Cc: "Stephen Enright" <Stephen\_Enright@moh.govt.nz>  
Date: Wed, 22/02/2017 6:49 AM  
Subject: Fw: District inspector appointment round

FYI - please advise as to whether you would like the same person as consumer advisor rep at all interviews and would you be happy with Victoria to fulfil that role?

Cheers,

Bella Ansell  
Advisor  
Mental Health Protection  
Office of the Director of Mental Health  
Protection Regulation and Assurance  
Ministry of Health  
DDI: 04 816 4369

<http://www.health.govt.nz>  
[mailto:Bella\\_Ansell@moh.govt.nz](mailto:Bella_Ansell@moh.govt.nz)

----- Forwarded by Bella Ansell/MOH on 22/02/2017 08:48 a.m. -----

From: Victoria Roberts [REDACTED] s.9(2)(a)  
To: Bella\_Ansell@moh.govt.nz,  
Date: 21/02/2017 05:26 p.m.  
Subject: Re: District inspector appointment round

Afternoon Bella

We have members in all of those venues who you might like to use.

I notice you say that you would prefer the same person in each location and I am available for these as well.

Can you please check with Dr Crawshaw whether or not he is happy to have me or if he would prefer we recommend another person for them all? I am okay if he wants another member.

Nga mihi nui

Victoria

Victoria Roberts | BA (Psychology), PGDipRehab | Chair | Nga Hau e Wha

[www.nhew.org.nz](http://www.nhew.org.nz) | [REDACTED] s 9(2)(a)

The national voice of people with lived experience of mental distress and addictions

On 21 February 2017 at 15:27, <[Bella\\_Ansell@moh.govt.nz](mailto:Bella_Ansell@moh.govt.nz)> wrote:

Hi Victoria,

I am facilitating the reappointment round for district inspectors for mental health this year. We are in the process of short listing applications and expect to be holding interviews in April. As in previous years we would like to have a Consumer Advisor sit on the interview panel. At this stage there is likely to be 6-7 days of interviews held in Auckland, Hamilton, Wellington, Dunedin and possibly Christchurch. Ideally we would have the same person sit on all the interviews but due to the number of interviews and the need to travel we understand that this may not be possible.

We have yet to finalise details of dates and locations so this email is just to flag with you that this is coming up and check whether you think there will be advisors available during this time, we can further discuss availability once these details are finalised. Happy to chat to you about this further.

Thanks for your help!

Kind regards,

Bella Ansell  
Advisor  
Mental Health Protection  
Office of the Director of Mental Health  
Protection Regulation and Assurance  
Ministry of Health  
DDI: 04 816 4369

<http://www.health.govt.nz>  
[mailto:Bella\\_Ansell@moh.govt.nz](mailto:Bella_Ansell@moh.govt.nz)

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Sent by: Bella Ansell/MOH  
23/02/2017 08:48 a.m.

To:  
cc:  
bcc:

Victoria Roberts <[REDACTED] s 9(2)(a)>

Subject:

Re: District inspector appointment round

Thanks Victoria.

The short listing of applicants will be complete on Monday and after then we should have dates sorted at which point I will be in touch again.

Kind regards,

Bella Ansell  
Advisor  
Mental Health Protection  
Office of the Director of Mental Health  
Protection Regulation and Assurance  
Ministry of Health  
DDI: 04 816 4369

<http://www.health.govt.nz>  
[mailto:Bella\\_Ansell@moh.govt.nz](mailto:Bella_Ansell@moh.govt.nz)

From: Victoria Roberts <[REDACTED] s 9(2)(a)>  
To: Bella\_Ansell@moh.govt.nz,  
Date: 22/02/2017 11:07 p.m.  
Subject: Re: District inspector appointment round

Kia ora Bella.

I am happy to get people from those regions to sit on the panels.

In Christchurch we have Julie Whitla and in Auckland we have Kieran Moorheed

Just let me know if you want me to approach them.

Nga mihi nui

Victoria

**Victoria Roberts | BA (Psychology), PGDipRehab | Chair | Nga Hau e Wha**

[www.nhew.org.nz](http://www.nhew.org.nz) | [REDACTED] s 9(2)(a)

**The national voice of people with lived experience of mental distress and addictions**

On 22 February 2017 at 10:55, <[Bella\\_Ansell@moh.govt.nz](mailto:Bella_Ansell@moh.govt.nz)> wrote:

Hi Victoria,

Thank you for your reply.

John has advised that he does not have a preference for the consistency of panel members after all - although he is happy for you to be present at all interviews if that would be the most convenient option.

My thoughts are that it would be quite good to have a representative from the region in which the interview was being held as they may have a more informed understanding of the issues relevant to that specific region.

Let me know your thoughts.

Kind regards,

Bella Ansell  
Advisor  
Mental Health Protection  
Office of the Director of Mental Health  
Protection Regulation and Assurance  
Ministry of Health  
DDI: 04 816 4369

<http://www.health.govt.nz>  
[mailto:Bella\\_Ansell@moh.govt.nz](mailto:Bella_Ansell@moh.govt.nz)

From: Victoria Roberts <[REDACTED] s.9(2)(a)>  
To: [Bella\\_Ansell@moh.govt.nz](mailto:Bella_Ansell@moh.govt.nz),  
Date: 21/02/2017 05:26 p.m.  
Subject: Re: District inspector appointment round

Afternoon Bella

We have members in all of those venues who you might like to use.

I notice you say that you would prefer the same person in each location and I am available for these as well.

Can you please check with Dr Crawshaw whether or not he is happy to have me or if he would prefer we recommend another person for them all? I am okay if he wants another member.

Nga mihi nui

Victoria

Victoria Roberts | BA (Psychology), PGDipRehab | Chair | Nga Hau e Wha

[www.nhew.org.nz](http://www.nhew.org.nz) | [REDACTED] s 9(2)(a)

The national voice of people with lived experience of mental distress and addictions

On 21 February 2017 at 15:27, <[Bella\\_Ansell@moh.govt.nz](mailto:Bella_Ansell@moh.govt.nz)> wrote:  
Hi Victoria,

I am facilitating the reappointment round for district inspectors for mental health this year. We are in the process of short listing applications and expect to be holding interviews in April. As in previous years we would like to have a Consumer Advisor sit on the interview panel. At this stage there is likely to be 6-7 days of interviews held in Auckland, Hamilton, Wellington, Dunedin and possibly Christchurch. Ideally we would have the same person sit on all the interviews but due to the number of interviews and the need to travel we understand that this may not be possible.

We have yet to finalise details of dates and locations so this email is just to flag with you that this is coming up and check whether you think there will be advisors available during this time, we can further discuss availability once these details are finalised. Happy to chat to you about this further.

Thanks for your help!

Kind regards,

Bella Ansell  
Advisor  
Mental Health Protection  
Office of the Director of Mental Health  
Protection Regulation and Assurance  
Ministry of Health  
DDI: 04 816 4369

<http://www.health.govt.nz>  
[mailto:Bella\\_Ansell@moh.govt.nz](mailto:Bella_Ansell@moh.govt.nz)

\*\*\*\*\*  
\*\*\*

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Sent by:  
[REDACTED] s 9(2)(a)  
08/03/2017 04:17 p.m.

To:  
cc:  
bcc:  
Subject:

Bella\_Ansell@moh.govt.nz,  
Jak Wild [REDACTED] s 9(2)(a)  
Re: District inspector appointment round

Hello Bella

I am sorry that I am now not able to do the Auckland interviews.

I have asked the second Central Region rep to take my place in Auckland. He also lives in Wellington.

His name is Jak Wild and his email address is [REDACTED] s 9(2)(a). I have cc'd him into this email.

Thanks for your last email with the details for next Monday. Look forward to seeing you then.

Nga mihi nui

Victoria

**Victoria Roberts | BA (Psychology), PGDipRehab | Chair | Nga Hau e Wha**

[www.nhew.org.nz](http://www.nhew.org.nz) | [REDACTED] s 9(2)(a)

**The national voice of people with lived experience of mental distress and addictions**

On 8 March 2017 at 12:03, <[Bella\\_Ansell@moh.govt.nz](mailto:Bella_Ansell@moh.govt.nz)> wrote:  
Thanks Victoria.

You can say to reception that you are here for district inspector interviews and the room is GC.5

Kind regards,

Bella Ansell  
Advisor  
Mental Health Protection  
Office of the Director of Mental Health  
Protection Regulation and Assurance  
Ministry of Health  
DDI: 04 816 4369

<http://www.health.govt.nz>  
[mailto:Bella\\_Ansell@moh.govt.nz](mailto:Bella_Ansell@moh.govt.nz)

From: Victoria Roberts [REDACTED] s 9(2)(a)  
To: [Bella\\_Ansell@moh.govt.nz](mailto:Bella_Ansell@moh.govt.nz),  
Date: 08/03/2017 11:16 a.m.  
Subject: Re: District inspector appointment round

Thanks Bella

My address is

[REDACTED] s 9(2)(a)  
[REDACTED]  
[REDACTED]

Look forward to meeting you next week.

Who do I say I am visiting when I sign in?

Nga mihi

Victoria

On 8/03/2017 10:54 am, <[Bella\\_Ansell@moh.govt.nz](mailto:Bella_Ansell@moh.govt.nz)> wrote:  
Great, thanks Victoria.

As a reminder our first interview day is this coming Monday in Wellington, the interviews will be held at the Ministry of Health building on Molesworth Street. I am currently in the process of finalising the agenda for the day. I will need to send you an information pack with all the documents relating to the interviewees. Could you please provide me a postal address for me to courier these documents to you?

Kind regards,

Bella Ansell  
Advisor  
Mental Health Protection  
Office of the Director of Mental Health  
Protection Regulation and Assurance  
Ministry of Health  
DDI: 04 816 4369

<http://www.health.govt.nz>  
[mailto:Bella\\_Ansell@moh.govt.nz](mailto:Bella_Ansell@moh.govt.nz)

From: Victoria Roberts [REDACTED] s 9(2)(a)  
To: [Bella\\_Ansell@moh.govt.nz](mailto:Bella_Ansell@moh.govt.nz),  
Cc: Grant Cooper <[grant@omhst.org.nz](mailto:grant@omhst.org.nz)>  
Date: 08/03/2017 10:40 a.m.  
Subject: Re: District inspector appointment round

Morena Bella

Grant Cooper from Dunedin will be available for the interviews there.

His email is [REDACTED] s 9(2)(a) I have cc'd him into this message.

Nga mihi nui

Victoria

**Victoria Roberts | BA (Psychology), PGDipRehab | Chair | Nga Hau e Wha**

[www.nhew.org.nz](http://www.nhew.org.nz) | [REDACTED] s 9(2)(a)

**The national voice of people with lived experience of mental distress and addictions**

On 7 March 2017 at 16:24, Victoria Roberts [REDACTED] s 9(2)(a) > wrote:  
Tena koe Bella

I have heard from our Christchurch member Julie Whitla and she is available for the interviews down there.

Her email is: [REDACTED] s 9(2)(a). I am cc'ing this to her.

So far no response from Dunedin. Will be in touch when I hear.

Nga mihi nui

Victoria

**Victoria Roberts | BA (Psychology), PGDipRehab | Chair | Nga Hau e Wha**

[www.nhew.org.nz](http://www.nhew.org.nz) | [REDACTED] s 9(2)(a)

**The national voice of people with lived experience of mental distress and addictions**

On 7 March 2017 at 12:15, <[Bella\\_Ansell@moh.govt.nz](mailto:Bella_Ansell@moh.govt.nz)> wrote:  
Hi Victoria,

That'd be great, thanks.

Kind regards,

Bella Ansell  
Advisor  
Mental Health Protection  
Office of the Director of Mental Health  
Protection Regulation and Assurance  
Ministry of Health  
DDI: 04 816 4369

<http://www.health.govt.nz>  
[mailto:Bella\\_Ansell@moh.govt.nz](mailto:Bella_Ansell@moh.govt.nz)

From: Victoria Roberts [redacted] s 9(2)(a)  
To: [Bella\\_Ansell@moh.govt.nz](mailto:Bella_Ansell@moh.govt.nz)  
Date: 07/03/2017 11:42 a.m.  
Subject: Re: District inspector appointment round

Morena Bella

Just to let you know: I am happy to do the Hamilton interviews. Also our Auckland rep is not able to do the interviews on the date specified. He is studying at that time. If you need me for those I am available.

I am yet to get confirmation from the Christchurch and Dunedin reps.

Nga mihi

Victoria

**Victoria Roberts | BA (Psychology), PGDipRehab | Chair | Nga Hau e Wha**

**[www.nhew.org.nz](http://www.nhew.org.nz) | [redacted] s 9(2)(a)**

**The national voice of people with lived experience of mental distress and addictions**

On 7 March 2017 at 08:56, <[Bella\\_Ansell@moh.govt.nz](mailto:Bella_Ansell@moh.govt.nz)> wrote:  
Thanks Victoria, much appreciated.



Would you (or another representative) be available to travel to Hamilton for those interviews?

Kind regards,

Bella Ansell  
Advisor  
Mental Health Protection  
Office of the Director of Mental Health  
Protection Regulation and Assurance  
Ministry of Health  
DDI: 04 816 4369

<http://www.health.govt.nz>  
[mailto:Bella\\_Ansell@moh.govt.nz](mailto:Bella_Ansell@moh.govt.nz)

From: Victoria Roberts [redacted] s 9(2)(a)  
To: [Bella\\_Ansell@moh.govt.nz](mailto:Bella_Ansell@moh.govt.nz),  
Date: 06/03/2017 04:44 p.m.  
Subject: Re: District inspector appointment round

Kia ora Bella

I have written to our members in Dunedin, Christchurch and Auckland to ascertain their availability. I will pass you their email addresses as soon as I hear from them.

We don't have a rep in Hamilton.

I am available to do the Wellington interviews.

Nga mihi

Victoria

**Victoria Roberts | BA (Psychology), PGDipRehab | Chair | Nga Hau e Wha**

**[www.nhew.org.nz](http://www.nhew.org.nz) | [redacted] s 9(2)(a)**

**The national voice of people with lived experience of mental distress and addictions**

On 6 March 2017 at 16:08, <[Bella\\_Ansell@moh.govt.nz](mailto:Bella_Ansell@moh.govt.nz)> wrote:  
Hi Victoria,

These are the proposed dates for DI interviews (possibly subject to change):

**Wellington**

Monday 13 March

**Hamilton**

Tuesday 21 and Wednesday 22 March

**Christchurch**

Tuesday 28 March

**Dunedin**

Friday 7 April

**Auckland**

Monday 10 and Tuesday 11 April

There will be 5-7 interviews held per day, exact locations are yet to be finalised but I will update as soon as I can.

Kind regards,

Bella Ansell  
Advisor  
Mental Health Protection  
Office of the Director of Mental Health  
Protection Regulation and Assurance  
Ministry of Health  
DDI: 04 816 4369

<http://www.health.govt.nz>  
[mailto:Bella\\_Ansell@moh.govt.nz](mailto:Bella_Ansell@moh.govt.nz)

From: Victoria Roberts <[REDACTED] s 9(2)(a)>  
To: [Bella\\_Ansell@moh.govt.nz](mailto:Bella_Ansell@moh.govt.nz),  
Date: 21/02/2017 05:26 p.m.  
Subject: Re: District inspector appointment round

Afternoon Bella

We have members in all of those venues who you might like to use.

I notice you say that you would prefer the same person in each location and I am available for these as well.

Can you please check with Dr Crawshaw whether or not he is happy to have me or if he would prefer we recommend another person for them all? I am okay if he wants another member.

Nga mihi nui

Victoria

Victoria Roberts | BA (Psychology), PGDipRehab | Chair | Nga Hau e Wha

[www.nhew.org.nz](http://www.nhew.org.nz) | [REDACTED] s 9(2)(a)

The national voice of people with lived experience of mental distress and addictions

On 21 February 2017 at 15:27, <[Bella\\_Ansell@moh.govt.nz](mailto:Bella_Ansell@moh.govt.nz)> wrote:  
Hi Victoria,

I am facilitating the reappointment round for district inspectors for mental health this year. We are in the process of short listing applications and expect to be holding interviews in April. As in previous years we would like to have a Consumer Advisor sit on the interview panel. At this stage there is likely to be 6-7 days of interviews held in Auckland, Hamilton, Wellington, Dunedin and possibly Christchurch. Ideally we would have the same person sit on all the interviews but due to the number of interviews and the need to travel we understand that this may not be possible.

We have yet to finalise details of dates and locations so this email is just to flag with you that this is coming up and check whether you think there will be advisors available during this time, we can further discuss availability once these details are finalised. Happy to chat to you about this further.

Thanks for your help!

Kind regards,

Bella Ansell  
Advisor  
Mental Health Protection  
Office of the Director of Mental Health  
Protection Regulation and Assurance  
Ministry of Health  
DDI: 04 816 4369

<http://www.health.govt.nz>  
[mailto:Bella\\_Ansell@moh.govt.nz](mailto:Bella_Ansell@moh.govt.nz)

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Sent by: Stephen  
Enright/MOH  
10/03/2017 08:41 a.m.

To:  
cc:  
bcc:  
Subject:

John Crawshaw/MOH@MOH,  
Bella Ansell/MOH@MOH,

Fw: Wellington DI interviews 13 March

Hi John,

I don't think this is a conflict. Any person can come and sit in the High Court and watch legal proceedings if they are open to the public.

Kind regards

Stephen Enright  
Team Leader  
Mental Health Protection  
Office of the Director of Mental Health  
Ministry of Health  
DDI: 04 496 2080

<http://www.moh.govt.nz>

[mailto:Stephen\\_Enright@moh.govt.nz](mailto:Stephen_Enright@moh.govt.nz)

----- Forwarded by Stephen Enright/MOH on 10/03/2017 08:38 a.m. -----

From: Bella Ansell/MOH  
To: Stephen Enright/MOH@MOH,  
Date: 10/03/2017 08:36 a.m.  
Subject: Fw: Wellington DI interviews 13 March

Thoughts?

Bella Ansell  
Advisor  
Mental Health Protection  
Office of the Director of Mental Health  
Protection Regulation and Assurance  
Ministry of Health  
DDI: 04 816 4369

<http://www.health.govt.nz>

[mailto:Bella\\_Ansell@moh.govt.nz](mailto:Bella_Ansell@moh.govt.nz)

----- Forwarded by Bella Ansell/MOH on 10/03/2017 08:36 a.m. -----

From: Victoria Roberts [REDACTED] s 9(2)(a)  
To: Bella\_Ansell@moh.govt.nz,  
Date: 10/03/2017 08:17 a.m.  
Subject: Re: Wellington DI interviews 13 March

Morena Bella

I got the couriered information you sent. Thank you.

I began reading last night and I realised that I may have a conflict of interest with s 9(2) I hope you can tell me if it is in fact a conflict and what to do about it if it is a conflict.

s 9(2)(a)

I have been following that case closely and was in court for the majority of the sitting days when that was being held late last year.

Nga mihi nui

Victoria

**Victoria Roberts | BA (Psychology), PGDipRehab | Chair | Nga Hau e Wha**

[www.nhew.org.nz](http://www.nhew.org.nz) | s 9(2)(a)

**The national voice of people with lived experience of mental distress and addictions**

On 8 March 2017 at 16:02, <[Bella\\_Ansell@moh.govt.nz](mailto:Bella_Ansell@moh.govt.nz)> wrote:

Hi all -

First off - thank you to everyone for assisting in scheduling these interviews.

Our first interview day is in Wellington this coming Monday (13th March).

The schedule is as follows:

Location	Date	Applicant	Time	Panel
WELLINGTON	13-Mar	s 9(2)(a)	8:30-9:30	John Crawshaw
Room GC.5			9:45-10:45	Amanda Smith
8am - 12pm			11:00-12:00	Chas McCarthy
		LUNCH	12:00-13:00	Jane Hubbard
Room GC.6		s 9(2)(a)	13:00-13:45	Victoria Roberts
1pm - 5pm			14:00-14:45	
			15:00-15:45	
			16:00-16:45	

The yellow names denotes new applicants and the green those that are current DIs. I have notified all interviewees and they have confirmed their attendance.

I am in the process of putting all the documentation together that I will distribute to you tomorrow.

Let me know if you would like to discuss any of this.

Kind regards,

Bella Ansell  
Advisor  
Mental Health Protection  
Office of the Director of Mental Health  
Protection Regulation and Assurance  
Ministry of Health  
DDI: 04 816 4369

<http://www.health.govt.nz>  
[mailto:Bella\\_Ansell@moh.govt.nz](mailto:Bella_Ansell@moh.govt.nz)

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Sent by: Bella Ansell/MOH  
13/03/2017 09:15 a.m.

To:  
cc:  
bcc:

"Victoria Roberts" <[REDACTED] s 9(2)(a) >

Subject:

DI interviews schedule

Hi Victoria,

Here are the details for the Hamilton DI interviews you will be assisting with:

<b>HAMILTON</b>	21-Mar	[REDACTED] s 9(2)(a)	10:45-11:45	John Crawshaw
Hamilton MOH			12:00-13:00	Liz O'Callaghan
Room TBA			13:00-13:30	Hingatu Thompson
			13:30-14:30	Jane Hubbard
			14:45-15:45	Victoria Roberts
			16:00-17:00	
"	22-Mar	[REDACTED]	9:00-10:00	"
"			10:15-11:00	"
			11:15-12:00	"
			12:00-13:00	"
			13:00-13:45	"
			14:00-14:45	

I will courier you the required documents when available.

Kind regards,

Bella Ansell  
Advisor  
Mental Health Protection  
Office of the Director of Mental Health  
Protection Regulation and Assurance  
Ministry of Health  
DDI: 04 816 4369

<http://www.health.govt.nz>  
[mailto:Bella\\_Ansell@moh.govt.nz](mailto:Bella_Ansell@moh.govt.nz)

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Sent by: Bella Ansell/MOH  
13/03/2017 12:58 p.m.

To:  
cc:  
bcc:

Nina Klauke/MOH@MOH,

Subject:

DI interview travel

Hi Nina,

The details of the Consumer Advisor members of the panel that you will need to organise travel/accom for are as follows:

Hamilton - Victoria Roberts, victoria.works@gmail.com

Auckland - Jak Wild, jak.wild@icloud.com

Cheers,

Bella Ansell  
Advisor  
Mental Health Protection  
Office of the Director of Mental Health  
Protection Regulation and Assurance  
Ministry of Health  
DDI: 04 816 4369

<http://www.health.govt.nz>  
[mailto:Bella\\_Ansell@moh.govt.nz](mailto:Bella_Ansell@moh.govt.nz)

---

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Sent by: Sarah Paterson/MOH  
06/05/2016 04:50 p.m.

To:  
cc:  
bcc:  
Subject:

Victoria Roberts <[REDACTED] s 9(2)(a)>,  
Re: Consumer representation on MHRT panel

Good afternoon Victoria,

Apologies for all the the emails. Monday 23 May and Tuesday 24 May are no longer proposed interview dates due to other panel members availability. Thus currently the only proposed dates are Thursday 9 June and Friday 10 June. I hope to confirm later in the month following shortlisting when Dr Crawshaw is back from leave in a couple of weeks.

Thanks again.

Best regards  
Sarah

Sarah Paterson  
Advisor | Mental Health Protection |  
Office of the Director of Mental Health |  
Ministry of Health | Po Box 5013 | Wellington 6145

DDI: 04 816 2489 |  
<http://www.health.govt.nz> |  
[Sarah\\_Paterson@moh.govt.nz](mailto:Sarah_Paterson@moh.govt.nz) |

**My usual hours of work are Monday, Tuesday and Wednesday (morning)**



From: Victoria Roberts <[REDACTED] s 9(2)(a)>  
To: Sarah\_Paterson@moh.govt.nz,  
Date: 14/04/2016 09:34 a.m.  
Subject: Re: Consumer representation on MHRT panel

Tena koe Sarah

Thanks for the dates which are now in my diary.

Nga mihi

Victoria Roberts  
Nga Hau e Wha

On 12/04/2016 1:12 pm, <[Sarah\\_Paterson@moh.govt.nz](mailto:Sarah_Paterson@moh.govt.nz)> wrote:  
Kia ora Victoria,

Sorry for multiple emails. I have had confirmation from one of the other panel members that they are unavailable on Thursday 2 June, Friday 3 June. Thus the correct proposed dates are:

Monday 23 May, Tuesday, 24 May, Thursday 9 June and Friday 10 June.

Thanks for your patience

Best regards  
Sarah

Sarah Paterson  
Advisor | Mental Health Protection |  
Office of the Director of Mental Health |  
Ministry of Health | Po Box 5013 | Wellington 6145

DDI: 04 816 2489 |  
<http://www.health.govt.nz> |  
[Sarah\\_Paterson@moh.govt.nz](mailto:Sarah_Paterson@moh.govt.nz) |

**My usual hours of work are Monday, Tuesday and Wednesday (morning)**



----- Document: Re: Consumer representation on MHRT panel, forwarded by Sarah Paterson on 12/04/2016 01:10 pm -----

Sent By: Sarah Paterson/MOH on 12/04/2016 9:10:08 a.m.  
To: Victoria Roberts [REDACTED] s 9(2)(a) >  
Copy To:  
Subject: Re: Consumer representation on MHRT panel

Good morning Victoria,

Apologies, I realised I put the wrong dates in the below email. They all should be a month later, so Monday 23 May, Tuesday, 24 May, Thursday 2 June, Friday 3 June, Thursday 9 June and Friday 10 June.

Best regards  
Sarah

Sarah Paterson  
Advisor | Mental Health Protection |  
Office of the Director of Mental Health |  
Ministry of Health | Po Box 5013 | Wellington 6145

DDI: 04 816 2489 |  
<http://www.health.govt.nz> |  
[Sarah\\_Paterson@moh.govt.nz](mailto:Sarah_Paterson@moh.govt.nz) |

**My usual hours of work are Monday, Tuesday and Wednesday (morning)**



----- Document: Re: Consumer representation on MHRT panel, forwarded by Sarah Paterson on 12/04/2016 09:08 am -----

Sent By: Sarah Paterson/MOH on 11/04/2016 4:20:44 p.m.  
To: Victoria Roberts [REDACTED] s 9(2)(a)  
Copy To:  
Subject: Re: Consumer representation on MHRT panel

Good afternoon Victoria,

Thank you for confirming that Nga Hau e Wha would be interested in participating in the panel this year, wonderful news. I have tentatively booked Monday 23 April, Tuesday, 24 April, Thursday 2 May, Friday 3 May, Thursday 9 May and Friday 10 May as possible dates for for John Crawshaw to attend the interviews. I anticipate we will only need two of those dates and that we would endeavour to conduct the interviews in Wellington unless we have a significant number of applicants in another location. What is your availability on the dates above? Apologies for the advanced notice, I am heading on holiday on Wednesday until the beginning of May so am trying to get organised beforehand.

Thanks again

Best regards  
Sarah

Sarah Paterson  
Advisor | Mental Health Protection |  
Office of the Director of Mental Health |  
Ministry of Health | Po Box 5013 | Wellington 6145

DDI: 04 816 2489 |  
<http://www.health.govt.nz> |  
[Sarah\\_Paterson@moh.govt.nz](mailto:Sarah_Paterson@moh.govt.nz) |

**My usual hours of work are Monday, Tuesday and Wednesday (morning)**



From: Victoria Roberts [REDACTED] s 9(2)(a)  
To: [Sarah\\_Paterson@moh.govt.nz](mailto:Sarah_Paterson@moh.govt.nz),  
Date: 07/04/2016 09:52 a.m.  
Subject: Re: Consumer representation on MHRT panel

Tena koe Sarah

Thank you for your message.

Nga Hau e Wha has in the past assisted with the Mental Health Review Tribunal panel interviews as consumer representatives and would be very happy to participate with these again. In the past our members from Gisborne, Christchurch and Wellington (myself) have attended at the interviews but we also have members in Northland, Auckland and Dunedin.

I look forward to hearing from you again in due course.

Nga mihi

Victoria

**Victoria Roberts**  
**Chairperson**

**Nga Hau E Wha**  
[www.nhew.org.nz](http://www.nhew.org.nz)

s 9(2)(a)

**A national voice for people with lived experience of mental distress and addictions**

On 6 April 2016 at 14:32, <[Sarah\\_Paterson@moh.govt.nz](mailto:Sarah_Paterson@moh.govt.nz)> wrote:  
Kia ora Victoria,

Due to the resignation of the current Mental Health Review Tribunal convener Thomas Gilbert an advertisement for a new lawyer member will be placed this week.  
<http://www.health.govt.nz/mhrtvac> We anticipate shortlisting less than 10 applicants and plan on conducting the interviews over a couple of days in May or June. We would be keen to have consumer representation on the panel. I understand yourself and a couple of other Nga Hau E Wha members were panel members last year. Is this something that you and/or other members would be interested in participating in this year? If you have any questions please do not hesitate to be in touch.

Thanks in anticipation.

Kind regards

Sarah

Sarah Paterson  
Advisor | Mental Health Protection |  
Office of the Director of Mental Health |  
Ministry of Health | Po Box 5013 | Wellington 6145

DDI: 04 816 2489 |  
<http://www.health.govt.nz> |  
[Sarah\\_Paterson@moh.govt.nz](mailto:Sarah_Paterson@moh.govt.nz) |

**My usual hours of work are Monday, Tuesday and Wednesday (morning)**



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Sent by:  
[REDACTED] s 9(2)(a)  
19/05/2016 09:54 a.m.

To:  
cc:  
bcc:  
Subject:

Janice\_Reeves@moh.govt.nz,  
Hingatu\_Thompson@moh.govt.nz, Sarah\_Paterson  
Re: Mental Health Review Tribunal Interviews

Morena Janice

I am available on the 8 June at 11-12. On the 14 June I would prefer 11-12 as well but can rearrange things if necessary.

Nga mihi

Victoria Roberts

On 19/05/2016 9:39 am, <[Janice\\_Reeves@moh.govt.nz](mailto:Janice_Reeves@moh.govt.nz)> wrote:  
Good Morning

Two applicants are unavailable for interview on 9 and 10 June.

Can you please confirm your availability by return email as follows:

**8 June**  
11:00 - 12:00 - Interview [REDACTED] s 9(2)(a)

**14 June**  
9:00 - 10:00 or 11:00 - 12:00 - Interview [REDACTED] s 9(2)(a)

Thank you

Kind Regards

**Janice Reeves | Executive Assistant to Dr John Crawshaw |  
Director of Mental Health**  
Office of the Director of Mental Health  
Protection, Regulation and Assurance  
Ministry of Health  
DDI: 04 496 2213

<http://www.health.govt.nz>  
[mailto:Janice\\_Reeves@moh.govt.nz](mailto:Janice_Reeves@moh.govt.nz)



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Sent by:  
[REDACTED] s 9(2)(a)  
10/03/2017 01:35 p.m.

To:  
cc:  
bcc:  
Subject:

Bella\_Ansell@moh.govt.nz,  
Julie [REDACTED] s 9(2)(a) >, Grant Cooper <grant@>  
Re: Wellington DI interviews 13 March

Hi Bella

I have cc'd Julie and Grant into this reply.

If you don't get them please let me know.

Thanks for your assistance.

Nga mihi

Victoria

On 10/03/2017 11:54 am, <[Bella\\_Ansell@moh.govt.nz](mailto:Bella_Ansell@moh.govt.nz)> wrote:

Hi Victoria,

I have raised this with my manager and he is going to get back to me this afternoon, he doesn't think it should be a problem.

On a side note - could you please check the email addresses you provided for Julie and Grant as correspondence has bounced back.

Kind regards,

Bella Ansell  
Advisor  
Mental Health Protection  
Office of the Director of Mental Health  
Protection Regulation and Assurance  
Ministry of Health  
DDI: 04 816 4369

<http://www.health.govt.nz>  
[mailto:Bella\\_Ansell@moh.govt.nz](mailto:Bella_Ansell@moh.govt.nz)

From: Victoria Roberts [REDACTED] s 9(2)(a)  
To: [Bella\\_Ansell@moh.govt.nz](mailto:Bella_Ansell@moh.govt.nz),  
Date: 10/03/2017 08:17 a.m.  
Subject: Re: Wellington DI interviews 13 March

Morena Bella

I got the couriered information you sent. Thank you.

I began reading last night and I realised that I may have a conflict of interest with s 9(2)(a) [REDACTED]. I hope you can tell me if it is in fact a conflict and what to do about it if it is a conflict.

s 9(2)(a)

[REDACTED]. I have been following that case closely and was in court for the majority of the sitting days when that was being held late last year.

Nga mihi nui

Victoria

**Victoria Roberts | BA (Psychology), PGDipRehab | Chair | Nga Hau e Wha**

[www.nhew.org.nz](http://www.nhew.org.nz) | s 9(2)(a)

**The national voice of people with lived experience of mental distress and addictions**

On 8 March 2017 at 16:02, <[Bella\\_Ansell@moh.govt.nz](mailto:Bella_Ansell@moh.govt.nz)> wrote:  
Hi all -

First off - thank you to everyone for assisting in scheduling these interviews.

Our first interview day is in Wellington this coming Monday (13th March).

The schedule is as follows:

Location	Date	Applicant	Time	Panel
WELLINGTON	13-Mar	s 9(2)(a)	8:30-9:30	John Crawshaw
Room GC.5			9:45-10:45	Amanda Smith
8am - 12pm			11:00-12:00	Chas McCarthy
			12:00-13:00	Jane Hubbard
Room GC.6			13:00-13:45	Victoria Roberts
1pm - 5pm			14:00-14:45	
			15:00-15:45	
			16:00-16:45	

The yellow names denotes new applicants and the green those that are current DIs. I have notified all interviewees and they have confirmed their attendance.

I am in the process of putting all the documentation together that I will distribute to you tomorrow.

Let me know if you would like to discuss any of this.

Kind regards,

Bella Ansell  
Advisor  
Mental Health Protection  
Office of the Director of Mental Health  
Protection Regulation and Assurance  
Ministry of Health  
DDI: 04 816 4369

<http://www.health.govt.nz>  
[mailto:Bella\\_Ansell@moh.govt.nz](mailto:Bella_Ansell@moh.govt.nz)

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Ngā mihi,

Stephen Enright  
Manager  
Office of the Director of Mental Health and Addiction Services  
Ministry of Health  
DDI: 04 496 2080

<http://www.moh.govt.nz>  
[mailto:Stephen\\_Enright@moh.govt.nz](mailto:Stephen_Enright@moh.govt.nz)

----- Forwarded by Stephen Enright/MOH on 08/05/2019 12:34 p.m. -----

Sent by:  
[REDACTED] s 9(2)(a)  
12/04/2017 04:10 p.m.

To:  
cc:  
bcc:

Bella\_Ansell@moh.govt.nz,

Subject:

Re: Fw: Additional DI Interviews

Kia ora Bella

That will be just fine for me. I also have blocked out 26/27 as per a previous email on 31/3/17

Nga mihi nui

Victoria

**Victoria Roberts | BA (Psych), PGDipRehab | Chair | Central Region South | Nga Hau e Wha**

[www.nhew.org.nz](http://www.nhew.org.nz) | [REDACTED] s 9(2)(a)

**The national voice of people with lived experience of mental distress and addictions**

On 12 April 2017 at 13:44, <[Bella\\_Ansell@moh.govt.nz](mailto:Bella_Ansell@moh.govt.nz)> wrote:  
Hi Victoria,

I hope I find you well!

Are you able to confirm your availability (or one of your colleagues) for a make up DI interview by video conference to be held at MoH Wellington office on the 20th of April at 10AM?

We are also in the process of scheduling a second make up interview that will also be held in

Wellington.

Kind regards,

Bella Ansell  
Advisor  
Mental Health Protection  
Office of the Director of Mental Health  
Protection Regulation and Assurance  
Ministry of Health  
DDI: 04 816 4369

<http://www.health.govt.nz>  
[mailto:Bella\\_Ansell@moh.govt.nz](mailto:Bella_Ansell@moh.govt.nz)

----- Forwarded by Bella Ansell/MOH on 12/04/2017 01:41 p.m. -----

From: Nina Klauke/MOH  
To: Jane Hubbard/MOH@MOH, Amanda Smith/MOH@MOH, Chas McCarthy/MOH@MOH, s.9(2)(a)  
Cc: Bella Ansell/MOH@MOH  
Date: 31/03/2017 11:40 a.m.  
Subject: Additional DI Interviews

Hi Everyone

As you know we have two more interviews to arrange (for the candidates that were unable to travel to Christchurch last week). These will be held in Wellington, one via VC and the other in person at our offices.

Please advise if you could be available for the follows dates/times:

20/4 3pm - 4pm

26/4 9 and 10am  
10 to 11am  
11 to 12pm

27/4 10am to 11am  
11am to 12pm

**Victoria**, if you are not available for any of these meetings can you advise if there is someone else who could attend.

Please get back to me with your availability by Tuesday 4 April.

Many thanks and kind regards

Nina Klauke  
Executive Assistant  
Office of the Director of Mental Health  
Protection Regulation and Assurance  
Level 2 133 Molesworth Street, Thorndon, Wellington 6011  
DDI: 04 496 2213

\*\*\*\*\*

\*\*\*

Sent by:  
s 9(2)(a)  
07/04/2017 10:02 a.m.

To:  
cc:  
bcc:  
Subject:

Bella\_Ansell@moh.govt.nz,  
Victoria Roberts s 9(2)(a)  
Fwd: Auckland district inspector interviews

Hi Bella

I'm concerned I have still not received any details about my accommodation, taxi chits and flights Wellington/Auckland for the DI interviews next week Monday and Tuesday.

Can you please confirm with me today given it is the last working day.

I have received the documentation you sent on Wednesday. However, the documents were left in my letterbox on the road, and due to the unusually heavy rain were quite wet.

I recommend that in future interview documents are signed delivery, especially given the personal nature of the documents.

Kind regards  
Jak

Jak Wild | Central Representative (North) | Nga Hau e Wha

[www.nhew.org.nz](http://www.nhew.org.nz) | s 9(2)(a)

Begin forwarded message:

**From:** Jak Wild s 9(2)(a) >  
**Subject:** Re: Auckland district inspector interviews  
**Date:** March 13, 2017 at 10:54:44 GMT+13  
**To:** [Bella\\_Ansell@moh.govt.nz](mailto:Bella_Ansell@moh.govt.nz)

Hi Bella

My home address is best for documents to be sent to:

s 9(2)(a)  
[Redacted]  
[Redacted]

Have you the details on flights and accomodation yet?

Kind regards

Jak Wild | Central Representative (North) | Nga Hau e Wha

[www.nhew.org.nz](http://www.nhew.org.nz) | s 9(2)(a)

On 13/03/2017, at 9:25 AM, [Bella\\_Ansell@moh.govt.nz](mailto:Bella_Ansell@moh.govt.nz) wrote:

Hi Jak,

Thank you for agreeing to sit on the panel for the district inspector interviews in Auckland.

The details are as follows:

Monday 10th - Tuesday 11th of April  
Day one: 10:00 AM - 5:00 PM  
Day two: 9:00 AM - 4:00 PM  
Room TBA, Ministry of Health  
650 Great South Road, Auckland

Could you please provide me with an address to which I can courier required documents to?

Kind regards,

Bella Ansell  
Advisor  
Mental Health Protection  
Office of the Director of Mental Health  
Protection Regulation and Assurance  
Ministry of Health  
DDI: 04 816 4369

<http://www.health.govt.nz>  
[mailto:Bella\\_Ansell@moh.govt.nz](mailto:Bella_Ansell@moh.govt.nz)

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Sent by: Bella Ansell/MOH  
24/05/2017 02:58 p.m.

To:  
cc:  
bcc:

"Victoria Roberts" [REDACTED] s 9(2)(a)  
Nina Klauke/MOH@MOH,

Subject:

Re: Fw: DI interviews

Hi Victoria,

The agenda for the Wellington interviews is attached - let me know if you also need the one for Hamilton.

This doesn't include the two make up interviews that you helped with which were on the 20th (10 - 11am) and 27th (2 - 3pm) of April.



Interview Agenda Monday 13 March.docx

Cheers,

Bella Ansell  
Advisor  
Mental Health Protection  
Office of the Director of Mental Health  
Protection Regulation and Assurance  
Ministry of Health  
DDI: 04 816 4369

<http://www.health.govt.nz>  
[mailto:Bella\\_Ansell@moh.govt.nz](mailto:Bella_Ansell@moh.govt.nz)

From: Nina Klauke/MOH  
To: Bella Ansell/MOH@MOH,  
Date: 24/05/2017 02:53 p.m.  
Subject: Fw: DI interviews

Nina Klauke  
Executive Assistant  
Office of the Director of Mental Health  
Protection Regulation and Assurance  
Level 2 133 Molesworth Street, Thorndon, Wellington 6011  
DDI: 04 496 2213

----- Forwarded by Nina Klauke/MOH on 24/05/2017 02:53 p.m. -----

From: Victoria Roberts [REDACTED] s 9(2)(a)  
To: nina\_klauke@moh.govt.nz,  
Date: 18/05/2017 01:46 p.m.  
Subject: DI interviews

Kia ora Nina

I have accidentally deleted the hours I worked on the DI interviews in Wellington and I wonder if you would mind sending me the agenda for the Wellington interviews. I don't need names but the times would be good if you can.

Many thanks.

Nga mihi nui

Victoria

Victoria Roberts | BA (Psych), PGDipRehab | Chair | Central Region South | Nga Hau e Wha

[www.nhew.org.nz](http://www.nhew.org.nz) | [REDACTED] s 9(2)(a)

The national voice of people with lived experience of mental distress and addictions

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Sent by: Natasha  
Herron/MOH  
23/10/2018 10:50 a.m.

To:  
cc:  
bcc:  
Subject:

Mental Health Admin/MOH@MOH,  
Fw: June invoice MHRT

Natasha Herron  
Assistant Advisor  
Mental Health Protection  
Office of the Director of Mental Health and Addiction Services  
Mental Health and Addiction  
Ministry of Health  
DDI: 04 816 3438

<http://www.health.govt.nz>  
[mailto:Natasha\\_Herron@moh.govt.nz](mailto:Natasha_Herron@moh.govt.nz)

----- Forwarded by Natasha Herron/MOH on 23/10/2018 10:50 a.m. -----

From: Giles Bollinger/MOH  
To: Natasha Herron/MOH@MOH,  
Cc: Stephen Enright/MOH@MOH  
Date: 23/10/2018 10:29 a.m.  
Subject: Fw: June invoice MHRT

Hello Natasha,

Please see attached :)

Kind regards

Giles Bollinger  
Advisor | Office of the Director of Mental Health and Addiction Services | Ministry of Health | Po Box  
5013 | Wellington 6145 | DDI: +64 4 816 3991



----- Forwarded by Giles Bollinger/MOH on 23/10/2018 10:28 a.m. -----

From: Victoria Roberts [REDACTED] s 9(2)(a)  
To: Giles\_Bollinger@moh.govt.nz,  
Date: 23/10/2018 07:55 a.m.  
Subject: June invoice MHRT

Kia ora Giles

I apologise for the late issuing of my invoice for the MHRT interviews in June.

Please find it attached.

Victoria

"You seriously don't know what load someone is carrying today - so just be kind"

Victoria Roberts | Co- Chair | Nga Hau e Wha

[www.nhew.org.nz](http://www.nhew.org.nz) | [REDACTED] s 9(2)(a)

The national voice of people with lived experience of mental distress and addictions



2018\_6MHRT Invoice.xls

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Invoice

Address: Victoria Roberts  
s 9(2)(a)

Wellington  
Invoice to: Ministry of Health

1 The Terrace

Address: Wellington

Attn: Dr John Crawshaw

Director Mental Health Directorate

Invoice date: 14-Jun-18

Invoice no.: \_\_\_\_\_

Qty	Description	Price	Total
4	Mental Health Review Tribunal Interviews	\$75	\$ 300.00
	Preparation x4		\$150

**Total Due** \$ 450.00

Please submit payment via Direct Credit to:

s 9(2)(a)

*Please detach and return with your payment*

**Remittance**

Director Mental Health Directorate

Invoice No: \_\_\_\_\_

Total Due: \_\_\_\_\_

Payment Method: (Please Tick)

Amt Enclosed: \_\_\_\_\_

Direct Credit

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Sent by:  
Natasha\_Herron@moh.govt.nz  
vt.nz

24/10/2018 11:40 a.m.

To:  
cc:  
bcc:

Subject:

Natasha\_Herron@moh.govt.nz,

Scan Data from MFD-WLG-2C-2

Sent by: nherron [redacted]  
Number of Images: 2  
Attachment File Type: PDF

Device Name: MFD-WLG-2C-2  
Device Location:



24102018114028-0001.pdf

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BATCH NAME:

# PAYMENT INFORMATION

## CROWN OUTPUT CLASS

Provider Name:	Roberts, Victoria		
Mailing Address:			
Address Book No:	815902	Site:	
Invoice No:	2018/6MHRT		
Invoice Date:	14/06/2018		
Due Date:		G/L Date:	

Remittance Advice (30 digits) - Cheque Remark

MHRT Interviews: June

### ACCOUNTING DISTRIBUTION

Co	Grp	Res	Account Code	Type Code	Output	Amount (NZ \$)	Explanation	GST
2	- 86	- 80	- 8781	- 200	575	300.00	Interviews	
2	- 86	- 80	- 8781	- 200	575	150.00	Preparation	
2	-	-	-	-	-			
2	-	-	-	-	-			
2	-	-	-	-	-			
2	-	-	-	-	-			
2	-	-	-	-	-			
2	-	-	-	-	-			
2	-	-	-	-	-			
2	-	-	-	-	-			
2	-	-	-	-	-			
2	- 95	- 80	- 9989	- 000	- 000		Goods & Services Tax	
2	- 95	- 80	- 9421	- 000	- 000		Withholding Tax	

Please show the GST content of each line in the GST Column

TOTAL AMOUNT TO BE PAID: 450.00

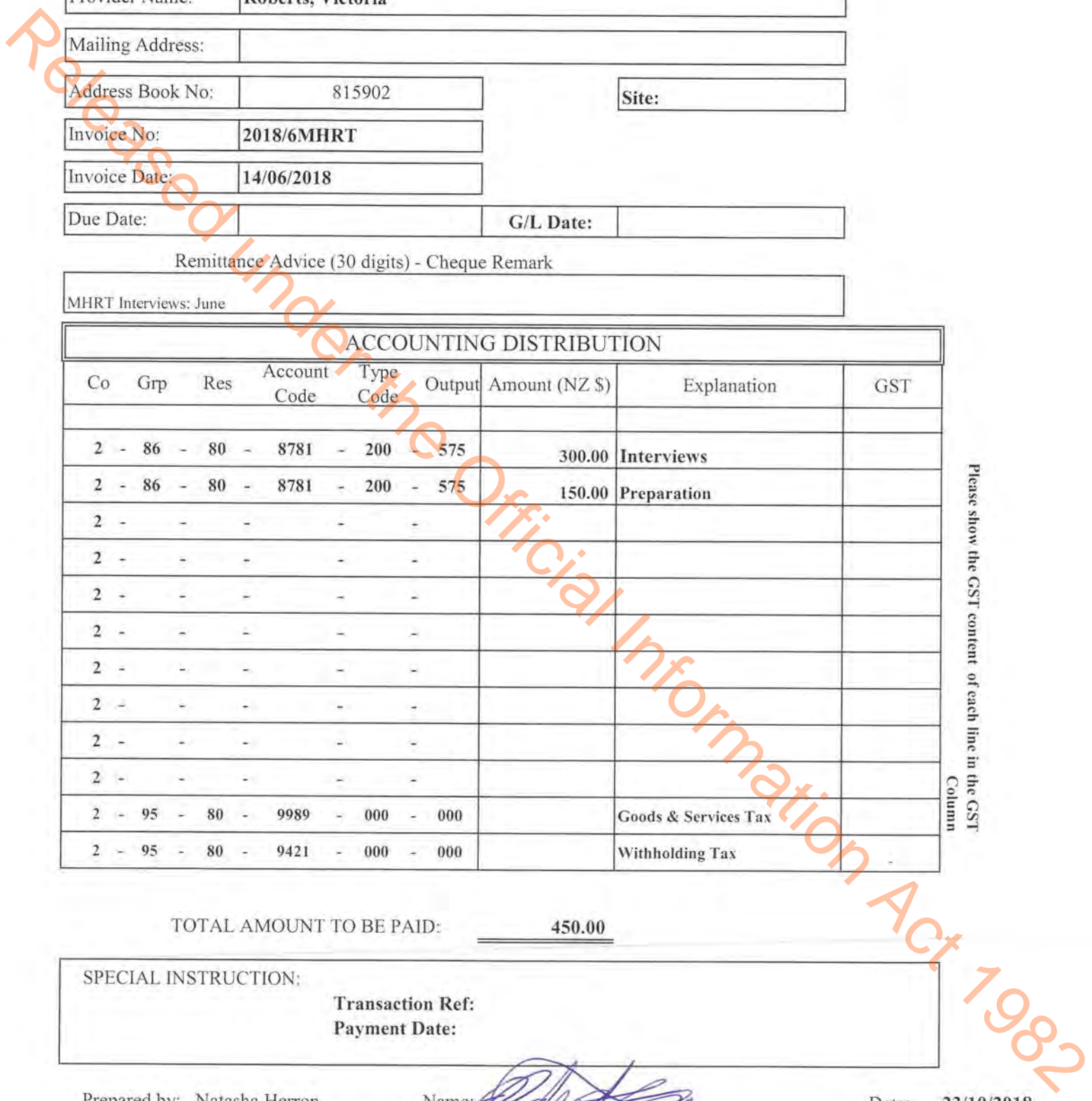
SPECIAL INSTRUCTION:

**Transaction Ref:**  
**Payment Date:**

Prepared by: Natasha Herron Name:  Date: 23/10/2018

Authorised by Stephen Enright Name:  Date: 23/10/2018

Finance Use Only	Entered by:	Date:
	Reviewed by:	Date:



**Invoice**

Address: Victoria Roberts  
s 9(2)(a)

Wellington  
Invoice to: Ministry of Health  
1 The Terrace

Address: Wellington  
Attn: Dr John Crawshaw  
Director Mental Health Directorate

Invoice date: 14-Jun-18

Invoice no.: 2018/6MHRT

Qty	Description	Price	Total
4	Mental Health Review Tribunal Interviews Preparation x4	\$75	\$ 300.00 \$150
<i>Total Due</i>			<b>\$ 450.00</b>

Please submit payment via Direct Credit to:  
s 9(2)(a)

*Please detach and return with your payment*

**Remittance**

Director Mental Health Directorate

Invoice No: \_\_\_\_\_

Total Due: \_\_\_\_\_

**Payment Method:** (Please Tick)

Amt Enclosed: \_\_\_\_\_

Direct Credit

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