



26 January 2024

Tēnā koe,

Consultation on the draft Guidelines for the Role and Function of District Inspectors

The Ministry of Health (the Ministry) is in the process of updating the Guidelines for the Role and Function of District Inspectors (the guidelines). As part of this process, we are writing to you ask for your feedback, perspectives, and comments on the draft guidelines.

The following information may be helpful for you to understand the context and reasoning why these guidelines exist, what we are trying to achieve by updating them, and how you can provide feedback on them as a person with lived experience or a whānau /family member.

Background

What are district inspectors?

District inspectors are lawyers who are appointed to protect the rights of people receiving assessment, treatment, or care under the following Acts:

- the Mental Health (Compulsory Assessment and Treatment) Act 1992 (the Mental Health Act)
- the Substance Addiction (Compulsory Assessment and Treatment) Act 2017 (the Substance Addiction Act)
- the Intellectual Disability (Compulsory Care and Rehabilitation) Act 2003 (the IDCC&R Act).

District inspectors are independent from the Ministry of Health and from health and disability services. The key responsibility of district inspectors is to make sure that every person who is subject to compulsory assessment, treatment, or care is treated in a way that upholds their rights. District inspectors help patients or care recipients and their whānau/family to understand their rights and can investigate complaints or conduct inquiries if those rights may have been breached. They also check and report on the overall safety and quality of mental health, addiction, and intellectual disability services.

What are the Guidelines for the Role and Function of District Inspectors?

The guidelines are published by the Ministry and are considered 'secondary legislation' under the Mental Health Act and the Intellectual Disability Act. This means that district inspectors must follow the guidance provided in them. The guidelines are an important way of providing key information, guidance, and expectations that may not be explained in the legislation but are necessary for district inspectors to understand how to do their job well. The guidelines also help other health professionals, services, patients, care recipients, or whānau/family members understand the role of a district inspector.

Why are we updating the guidelines?

The current guidelines were published in 2012 and are now outdated. Since then, there have been changes to the legislation, policies, and health and disability services that influence the district inspector role. It is important that the guidelines reflect the meaningful developments that have been made in these areas. The current guidelines also only provide guidance for district inspectors who are appointed under the Mental Health Act.

The aim of updating the guidelines is to make sure that district inspectors have a clear and relevant guide that supports them with their duties across all the Acts they're appointed under. By updating the guidelines, the Ministry can also set expectations that help services and district inspectors to take a more recovery and human rights approach that supports equity of care and least restrictive practice.

What have we changed in the guidelines?

Some of the key differences in the new draft guidelines are:

- including guidance for district inspectors appointed under the Substance Addiction Act and the IDCC&R Act, as well as the Mental Health Act
- prioritising a people-centred recovery approach that supports the promotion of equity of care and least restrictive practice
- emphasising obligations under Te Tiriti O Waitangi and international human rights requirements
- setting up clear ways for district inspectors to monitor the safety and quality of care in health and disability services
- creating a set of principles that help guide district inspectors to do their role well.

Your feedback

The Ministry are conducting a targeted consultation on these draft Guidelines. This means that we are reaching out to specific organisations and people who have a direct interest or interact with district inspectors.

As part of this, it's important that we understand what people and their whānau/family with lived experience of mental health or addiction services think about the changes we have made. Your perspectives on the document help us make sure that the draft guidelines support district inspectors to engage well with patients and do their job to a high standard.

Please know that we are sharing the draft guidelines document with you in-confidence. This means that we are asking you not to share the draft guidelines with others, as they are still in a draft form. When the guidelines have been finalised, they will be published on the Ministry website and shared openly with the public.

The deadline to receive all feedback is the Friday 8 March 2024.

We have included some reflective questions about specific sections of the document that may be helpful for you when providing feedback. These have been attached as an appendix to this letter.

How do you give feedback?

There are 3 ways that you can provide feedback on the draft guidelines:

1. You can draft an email with your feedback or add comments directly into the draft guidelines and send it to mentalhealthadmin@health.govt.nz at the Ministry.

2. You can send your feedback email or a copy of the draft guidelines with your comments directly to the organisation who has reached out to you. They will then forward it on to mentalhealthadmin@health.govt.nz.
3. You can attend a virtual meeting/hui with the Ministry and provide your feedback verbally. These will be held on **Wednesday 21 February** and **Thursday 22 February**. If you wish to attend one of these meetings, please email mentalhealthadmin@health.govt.nz and ask to be sent further details. You are welcome to bring a support person to this meeting.

The Ministry of Health will be putting together all feedback in a way that will uphold people's privacy. However, please know that any feedback or information you provide will be considered official information under the Official Information Act 1982. Your feedback could come within scope of Official Information Act requests and may need to be released unless there are grounds under that Act for withholding any information. Personal information about identifiable individuals will generally be withheld due to the private and sensitive nature of this information.

We acknowledge that the guidelines are a very long and detailed document, and it may be challenging for you to find the time to read through the entire resource. To make it easier for you we have created some reflective questions relating to sections of the guidelines that may feel more relevant to your experience. These have been attached to this letter.

These questions hopefully help you to provide feedback on the most effective and time efficient way. However, it is not mandatory for you to respond to these questions, and you are welcome to provide feedback on any parts of the guidelines. We welcome all comments, perspectives, and thoughts.

What happens after you provide feedback?

Once the cut-off date to provide feedback has been reached (**Friday 8 March 2024**), the Ministry will put all the feedback together and make some changes to the guidelines based on that feedback. The Ministry will then follow a process of reviewing and editing and will then publish the guidelines on their website. If you would like to see the old guidelines that we are replacing you can view them [here](#).

Thank you for your considerations and assistance with this important work/mahi. Your input is a key part of developing this resource and we are grateful for your time.

If you have any questions or would like more information about this project, feel free to reach out to mentalhealthadmin@health.govt.nz.

I wish you all the best.

Nāku noa, nā



Dr John Crawshaw
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Clinical, Community and Mental | Te Pou Whakakaha
The Ministry of Health | Manatū Hauora

Included Draft Guidelines for Role and Function of District Inspectors

Appendix: Reflective feedback questions

The following reflective questions relate to specific sections of the document. They may be helpful for you to think about or answer when providing feedback:

1. What do you think about the changes to the Guidelines that have been summarised above? Is there anything else you would like to see or have as part of these Guidelines?
2. Do the guiding principles outlined in the draft Guidelines reflect what you feel is important for this role?
 - Section 1.1: Guiding Principles, page 10
3. Do you think there are any other important skills or functions district inspectors should have? Do you agree with the skills and functions in the draft Guidelines?
 - Section 1.2: Skills, pages 10-11
4. Is the role of a district inspector clear to you in the below sections? How could it be made clearer?
 - Introduction, pages 7-8
 - Section 1.4: Main Functions, pages 12-15
5. Are there any other things that you think would be important for district inspectors to report to the Director of Mental Health and Addiction Services about? For example, regarding how district inspectors are ensuring patients safety and needs are met.
 - Section 2.3: Visitation and inspection, pages 25-27
 - Section 2.6: Reporting and invoicing, pages 37-38
6. Is there anything you feel could be more helpful or clearer about how district inspectors can respect people's culture when engaging with patients, whānau/family through the complaint or investigation process?
 - Section 2.4: Complaint handling and investigation, pages 30-32
7. Do you feel that the district inspector patient complaint handling and investigation process is clear? For example, do you think that the advice on good communication is explained well, would you feel respected in the process outlined, and do you think the process is culturally respectful?
 - Section 2.4: Complaint handling and investigation, pages 30-32
 - Section 2.5: Conducting complaint investigations and inquiries, pages 32-36

Alongside the above questions, below are some specific questions that may be relevant to whānau/family members.

1. Is it clear that interviewing whānau/family is part of the patient complaint process?
 - Section 2.4: Conducting complaint investigations and inquiries, pages 32-36
2. How much involvement would you like whānau/family members to have in a patient complaint process?
 - Section 2.4: Conducting complaint investigations and inquiries, pages 32-36