10 May 2022

Firearms Policy Team
New Zealand Police
WELLINGTON

By email to: consultation@police.govt.nz

Tēnā koutou

Re: Options for implementing reporting of firearm injuries to New Zealand Police by health professionals

On behalf of the Royal Australian and New Zealand College of Psychiatrists (RANZCP), we would like to thank you for the opportunity to provide a submission on the discussion paper, ‘Options for implementing reporting of firearm injuries to New Zealand Police by health professionals’. The RANZCP appreciates the intention of the proposals, to ensure Police are able to assess the risk that may be posed by someone who is not fit and proper having access to firearms.

About the Royal Australian and New Zealand College of Psychiatrists

The RANZCP is a membership organisation that prepares doctors to be medical specialists in the field of psychiatry, supports and enhances clinical practice, advocates for people affected by mental illness and advises the government on mental health care.

This submission has been developed by the New Zealand Faculty of Forensic Psychiatry (FFP) Committee. The FFP Committee is made up of psychiatrists with experience assessing and treating people in forensic settings.

Reporting of firearm injuries by health professionals

The RANZCP would like to provide some brief context, which may assist with answering the following questions in the paper:

- ‘How broadly or narrowly should health workforces be defined? Which specific workforces should be in or out of scope?’
- ‘Are current provisions sufficient to enable sharing relevant firearms injury information with Police?’

Psychiatrists are unlikely to interact with someone who is presenting with a firearm injury. If someone presents to the Emergency Department, for example, they would first be seen by a consulting doctor or registrar. A psychiatrist could become involved at a later stage, but the RANZCP considers any obligation to report the injury should be on the health professional(s) who have first contact with the person.
A rare but possible scenario involving a psychiatrist, would be if a person disclosed to a psychiatrist that they had previously lied about the cause of their firearm injury. In this situation, psychiatrists would be obliged to disclose this information under existing provisions, for example:

- The Health Information Privacy Code – Rule 11 (2) (d) enabling disclosure of health information if “necessary to prevent or lessen a serious threat to public health or public safety; or the life or health of the individual concerned or another individual”.
- The RANZCP Code of Ethics – “4.4 A breach of confidentiality may be justified where there are public-interest considerations, in order to protect the safety of the patient or of other people”.

### Defining firearm injury

Regarding the definition of a firearm injury, ‘an injury expected to have been caused by the discharge of a firearm or airgun’ would seem appropriate given the intent of the policy. ‘Blunt force injury caused by firearm’, for example, could presumably be handled through existing avenues for responding to assault. It also may not be possible for a health professional to easily determine whether a blunt force injury was caused by a firearm or another object.

If you have any questions about this letter, please contact the RANZCP New Zealand National Manager, Jane Renwick. Jane can be contacted by phone at (04) 4830 718 or email jane.renwick@ranzcp.org.

Nāku iti noa, nā

![Signature]

Dr Shailesh Kumar
**Chair, New Zealand Faculty of Forensic Psychiatry Committee**

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Dr Matthew Jenkins
**Acting Chair, Tu Te Akaaka Roa - New Zealand National Committee**