



Date: 8 June, 2026

Te Ao Māramatanga – New Zealand College of Mental Health Nurses Inc.

Fellow **Anthony O'Brien**, has provided this statement on behalf of the college

Concern about reduced police presence in Emergency departments

I'm concerned that a proposed blanket 15 minute time limit on police presence with people who they bring in to ED will result in inadequate care and inappropriate police referrals to ED.

The reasons police bring people to ED are highly variable and can be quite complex. What might present as an acute mental health issue might be related to a physical illness, substance use, acute situational distress, or some combination of these factors. It takes a skilled clinician more than 15 minutes to arrive at a diagnosis of the most likely cause of the presenting problem. That is why the current legislation requires police to remain with a person they have in custody, under the Mental Health Act, for up to six hours.

We have a new Mental Health Bill, due to be adopted in this parliamentary term, that is likely to change the criteria for compulsory treatment. The new legislation will require supported decision making rather than the substituted decision making that prevails under the current legislation. The Ministry of Health has already indicated that we should be moving towards supported decision making and not waiting for a change in legislation. A blanket 15 minute limit on police presence would severely compromise attempts to engage in supported decision making.

Police need to engage in meaningful dialogue with clinicians providing mental health responses in the ED setting, including nurses. Decision making should, as with all clinical decisions, be carefully reasoned and based on clear criteria. The safety and care of consumers and staff should be central considerations. Decisions should not be a race against the clock.

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