

Chair
Cabinet

Establishing the Government Inquiry into Mental Health and Addiction

Proposal

1. This paper seeks agreement to the key establishment details for an inquiry into Mental Health and Addiction (the Inquiry). It includes the Inquiry's final terms of reference (ToR) and seeks agreement to an increase of \$6.521 million to Vote Internal Affairs appropriations to cover the costs of the Inquiry.
2. This is a joint Ministers' paper reflecting the Minister of Health's interest as the 'appointing Minister' for the Inquiry, and the Minister of Internal Affairs' interest as the 'appropriate Minister' responsible for the administering department, the Department of Internal Affairs (the Department).

Executive Summary

3. Cabinet recently agreed in principle to establish a government inquiry into mental health and addiction in New Zealand, under the Inquiries Act 2013 (the Act) [CBC-17-MIN-0029 and CAB-17-MIN-0520 refers]. This is a coalition commitment under the Government's 100-Day Plan [CAB-17-Min-0486 refers].
4. The Minister of Health, as appointing Minister, and the Minister of Internal Affairs, as Minister responsible for the administering department, were invited to report back to Cabinet on the final ToR, the Inquiry membership, members' fees, and the overall Inquiry budget.
5. The draft ToR (see Appendix A) sets out the purpose, objectives and scope of the Inquiry. The Inquiry will commence following notification in the *New Zealand Gazette* (Gazette), and report back to the appointing Minister by 31 October 2018.
6. Up to six members are proposed for appointment to the Inquiry, comprising: Professor Ron Paterson as Chair; and Dr Barbara Disley, Sir Mason Durie, Dr Jemaima Tiatia-Seath, Josiah Tualamali'i and Dean Rangihuna as members.
7. Collectively the intended members hold the requisite expertise and attributes to conduct the Inquiry. We can confirm that appropriate enquiries concerning conflicts of interest have been carried out for the proposed appointments to the Inquiry in accordance with the Act, and the Cabinet Office and State Services Commission's *Board Appointment and Induction Guidelines*.
8. The Chair's fee will be \$1,400 per day and Members' fees will be \$975 per day. The Minister of State Services has been consulted and agrees to these fees.
9. The Inquiry budget is estimated at \$6.521 million based on the final ToR, membership and expected operating requirements.

10. The Department has no baseline funding to cover the costs of the Inquiry, and cannot absorb inquiry-related costs. Fiscal pressures, including cost pressures of \$150 million over the next four years, and risks to the delivery of existing priorities in Vote Internal Affairs will arise, should the cost of the Inquiry not be fully funded. An increase is therefore sought to the Vote Internal Affairs appropriations for 2017/18 and 2018/19 to cover:
 - 10.1 \$0.789 million in fees for the Inquiry Chair and up to five members (up to six members in total); and
 - 10.2 \$5.732 million to cover the Inquiry staff, travel and accommodation, professional fees and other operating costs associated with the Inquiry.

Background

11. The Government has committed to setting up an inquiry into mental health and addiction as part of its coalition programme of work for the first 100 days. The key drivers for the Inquiry are:
 - 11.1 addressing inequalities in mental health and addiction outcomes;
 - 11.2 underfunding of mental health and addiction services; and
 - 11.3 stubbornly high suicide rates.
12. In this context, the Inquiry will help to produce an accurate picture of how well New Zealand's current mental health and addiction services are working, and to create a baseline from which a proposed pathway for improvements can be outlined. The Inquiry will inform the Government's decisions on future arrangements for mental health and addiction and future investment priorities.
13. There is strong support from consumers, providers, experts and the wider public for changing New Zealand's approach to mental health and addiction. This Inquiry is an opportunity to build consensus on the specific changes needed to enable improved and equitable outcomes for those with mental health and addiction needs. We know that there are particular inequalities for Māori, Pacific peoples, people with disabilities, refugees and youth.
14. The Inquiry will acknowledge and take into account the good work and efforts that have already been made and will consider previous reviews, reports and recent consultation relating to mental health, addiction and suicide prevention.
15. On 29 November 2017, the Cabinet Business Committee [CBC-17-MIN-0029 refers] made the following key decisions:
 - 15.1 agreed in principle to establish a government inquiry into mental health and addiction in New Zealand, under the Inquiries Act 2013;
 - 15.2 agreed that the inquiry will report back on these matters in October 2018;
 - 15.3 agreed that the Minister of Health will be the 'appointing' Minister for the inquiry, responsible for establishing the inquiry and receiving its report;
 - 15.4 agreed that the administering agency for the inquiry will be the Department of Internal Affairs;
 - 15.5 noted that the Minister of Internal Affairs will be the 'appropriate' Minister for the inquiry, responsible for the funding to support the inquiry; and

- 15.6 invited the Minister of Health and the Minister of Internal Affairs to report to Cabinet in December 2017 on the final terms of reference, inquiry membership, members' fees, inquiry budget and appropriations, and any other matters that may be required.

Key steps in establishing a government inquiry

16. The Act provides for the establishment of both public and government inquiries to inquire into matters of public importance. The drivers for the Inquiry (as set out in paragraphs 11 to 13 above) meet the threshold of "a matter of public importance".
17. Under the Act, a government inquiry is established by the publication of a *New Zealand Gazette* notice by the appointing Minister. The terms of reference for an inquiry must be included in the Gazette notice establishing the inquiry, or published in the Gazette as soon as reasonably possible afterwards. An inquiry must not begin considering evidence until the terms of reference have been published in the Gazette.
18. The appointing Minister intends to publish a Gazette notice establishing the Inquiry as soon as practicable after Cabinet consideration.

Terms of Reference

19. An updated draft ToR is attached for the Inquiry (Appendix A) which outlines:
 - 19.1 its purpose and objectives, which are to:
 - 19.1.1 hear the voices of the community, people with lived experience of mental health and addiction problems, people affected by suicide, and people involved in preventing and responding to mental health and addiction problems, on New Zealand's current approach to mental health and addiction, and what needs to change;
 - 19.1.2 report on how New Zealand is preventing mental health and addiction problems and responding to the needs of people with those problems; and
 - 19.1.3 recommend specific changes to improve New Zealand's approach to mental health, with a particular focus on equity of access, community confidence in the mental health system and better outcomes, particularly for Māori and other groups with disproportionately poorer outcomes;
 - 19.2 its scope, which is to consider:
 - 19.2.1 mental health problems across the full spectrum from mental distress to enduring psychiatric illness;
 - 19.2.2 mental health and addiction needs from the perspective of both:
 - a. identifying and responding to people with mental health and addiction problems; and
 - b. preventing mental health problems and promoting mental well-being;
 - 19.2.3 prevention of suicide;
 - 19.2.4 activities directly related to mental health and addiction undertaken within the broader health and disability sector (in community, primary and secondary care), as well as the education, justice and social sectors and through the accident compensation and wider workplace relations and safety systems; and

19.2.5 opportunities to build on the efforts of whānau, communities, employers, people working in mental health and others to promote mental health.

20. The proposed Chair has been provided with the opportunity to review the ToR. The Inquiry will be expected to report to the appointing Minister by 31 October 2018, an effective inquiry period of nine months once established.

Inquiry membership

Expertise, skills and attributes sought

21. Given the anticipated workload of the Inquiry, and the range of required expertise, it is proposed that up to six members be appointed to the Inquiry. The key skills and experience sought from the Inquiry members collectively include:
- 21.1 in depth understanding of wider mental health and addiction services including Māori mental health services and providers beyond the health sector;
 - 21.2 lived experience of mental health issues and national leadership experience within the mental health system;
 - 21.3 clinical expertise;
 - 21.4 Māori cultural expertise, including knowledge of tikanga Māori and the principles of the Treaty of Waitangi; and
 - 21.5 Pasifika cultural expertise.
22. The following are key skills and experience for the Chair of this Inquiry:
- 22.1 proven ability to lead complex, system-level reviews drawing on a wide range of perspectives;
 - 22.2 experience in transforming services;
 - 22.3 governance experience; and
 - 22.4 familiarity with machinery of government and government processes.
23. Inquiry members should have:
- 23.1 experience in analysing complex issues, including clearly defining problems and their root causes;
 - 23.2 the ability to assess evidence dispassionately, with no predetermined view of the outcome;
 - 23.3 high personal integrity and no irreconcilable conflicts of interest;
 - 23.4 the ability to commit to the task;
 - 23.5 a focus on delivery and the ability to work to a tight reporting timeframe; and
 - 23.6 experience working in the public eye without being unduly influenced by public comment.

Proposed members of the Inquiry

24. The proposed members of the Inquiry are:
- 24.1 Professor Ron Paterson, ONZM (Chair);

- 24.2 Dr Barbara Disley, ONZM;
- 24.3 Sir Mason Durie, KNZM, CNZM;
- 24.4 Dr Jemaima Tiatia-Seath;
- 24.5 Josiah Tualamali'i; and
- 24.6 Dean Rangihuna.
25. **Professor Ron Paterson** is a professor of law at the University of Auckland and Chair of the New Zealand Centre for Human Rights Law, Policy & Practice Advisory Board. He was Parliamentary Ombudsman (2013–2016), Health and Disability Commissioner (2000–2010) and Deputy Director-General, Safety and Regulation, Ministry of Health (1999–2000). Professor Paterson is recognised internationally for his expertise in patients' rights, regulation of health practitioners and healthcare quality improvement. He has chaired several major health system reviews in Australia, including the Review of National Aged Care Quality Regulatory Processes (2017). He chaired the Counties Manukau Maternity Care Review (2012) and is currently reviewing the Veterans' Support Act for the Chief of the Defence Force. He was Chair of the New Zealand Banking Ombudsman Scheme and a member of the Board of the Royal Australasian College of Physicians (2010–2013). Professor Paterson was appointed an Officer of the New Zealand Order of Merit, for services to health, in 2011.
26. **Dr Barbara Disley** has been the Chief Executive of Emerge Aotearoa since 2015. Emerge Aotearoa provides a wide range of community-based mental health, addiction, disability support and social housing services nationwide. She served as the Executive Chair of the Mental Health Commission from 1996 to 2002. In 2005, she was awarded the Australian and New Zealand Mental Health Services Award for Individual contribution to Mental Health. Dr Disley was appointed an Officer of the New Zealand Order of Merit in 2011, for services to health.
27. **Sir Mason Durie** is a psychiatrist and professor of Māori Studies at Massey University. He was Deputy Vice Chancellor at the University from 2009 to 2012, and previously held the roles of Head of School of Māori Studies (1988 – 2002, and Assistant Vice Chancellor (Māori) (2002 – 2009). Sir Mason was a Commissioner for the New Zealand Families Commission. He is a Fellow of the Royal Australian and New Zealand College of Psychiatrists, a Fellow of the Royal Society of New Zealand, and a Fellow of the Humanities Council of New Zealand Academy. Sir Mason was appointed Companion of the New Zealand Order of Merit for services to Māori in 2001, and promoted to Knight Companion in 2010, also for services to Māori health, in particular for public health services.
28. **Dr Jemaima Tiatia-Seath** is currently the Acting Co-Head of Pacific Studies at the University of Auckland. Her substantive role is Senior Lecturer for Pacific Health at the School of Population Health, University of Auckland and has been in the role since 2015. Dr Tiatia-Seath is of Samoan descent and has a community and public health background. Her research focus areas include: mental health, Pacific suicide prevention and postvention, youth development, Pacific health and wellbeing, and inequities and inequalities in health. Dr Tiatia-Seath has extensive research experience and has published a number of papers and presentations on the topics of Pacific mental health, specifically on youth suicide. She is also on a number of governance boards, including the Health Research Council of NZ, and the Public Health Research Committee.

29. **Mr Josiah Tualamali'i** is currently Chairperson of the Pacific Youth Leadership And Transformation Charitable Trust (PYLAT), Director of Pacific Inc. (trading as Le Va) and member of the Ministry of Youth Development Youth Advisory Group. He sits on a number of boards to support Pasifika youth engagement and youth participation. In 2016, Mr Tualamali'i received the Prime Minister's Pacific Youth Award for Leadership and Inspiration and a Civic Award for Youth Advocacy from Christchurch City Council. In 2017 he was awarded the Sunpix and Ministry for Pacific Peoples Pacific Emerging Leadership award. Mr Tualamali'i is currently a semi-finalist for Kiwibank Young New Zealander of the Year (2018).
30. **Dean Rangihuna** is currently a Māori Consumer Advisor (Te Kaihāpai) at Canterbury District Health Board (DHB). Mr Rangihuna has contributed to a range of Te Rau Matatini workforce programmes and has presented on consumer care, with particular focus on Canterbury DHB's mental health services. Mr Rangihuna has consumer/lived experience and clear knowledge of Māori mental health models.

Representativeness of the appointments

31. Consideration was given to the desirability of the Inquiry membership having an appropriate gender, age and ethnic and geographical balance (for example North Island/South Island), as far as the need for specialist skills and experience permitted.

Term of appointment

32. It is proposed that all Inquiry members be appointed for a period commencing on the date notified in the Gazette, and expiring on 31 October 2018. This provides an effective inquiry period of nine months.

Remuneration

33. Fees for the Chair and members of the Inquiry are covered by the Cabinet Fees Framework (the Fees Framework [CO (12) 6 refers]). The Fees Framework does not outline fee ranges for Government Inquiries. Instead, fees for inquiries are referred to the Minister of State Services for consideration as an exception.
34. The Fees Framework provides that if the proposed fees do not exceed the daily fee payable to a High Court Judge (currently \$1,942.60), and the rationale for fees at this level is strong, the Minister of State Services may recommend to the responsible Minister(s) that the fees can be decided between them without referral to Cabinet Appointments and Honours Committee and Cabinet.
35. The appointing Minister has proposed fees of \$1,400 per day for the Inquiry Chair, and \$975 for Inquiry members. The Minister of State Services has been consulted and agrees to these fees.
36. The arrangements for any Inquiry members who are public servants will be in accordance with the Fees Framework guidelines. Public servants must not receive both fees as a member and remuneration from their employer for the same period. Employers must be informed and agree to the arrangements put in place to handle these matters.

Groups the Inquiry should engage with

37. The Ministry of Health, on our behalf, convened and engaged with a group of Māori mental health experts on the draft ToR for the Inquiry. This group has offered to act as a Māori advisory group to the Inquiry panel throughout its deliberations. The Inquiry panel may wish to seek the Māori advisory group's guidance on the most effective way to engage more broadly with Māori communities, hapū and iwi. Members of the prospective advisory group are available to meet the Chair or the panel at any stage.
38. Other priority populations it would be useful for the panel to engage with are youth and mental health consumers. There are a number of already established youth and lived experience/consumer advisory groups that the Inquiry panel could approach.

Consultation on appointments

39. The Minister of Health has consulted appropriate Ministerial colleagues on proposed appointees to the Inquiry.

Conflicts of interest and probity

40. Appropriate enquiries concerning conflicts of interest and probity for the proposed Chair and members have been undertaken by the Department and no issues or concerns were identified.

Organisation form and CV summaries

41. An organisation form and CV summaries for the proposed Chair and members are attached as Appendix B.

Financial implications

Budget for the Inquiry

42. An Inquiry budget has been prepared by the Department, and the estimated costs are set out in Table 1 below. As a government inquiry, the Chair and members will decide independently how to conduct the Inquiry within the ToR set by the Government.
43. The budget was prepared on the basis of the Department's experience with previous government inquiries, including the Havelock North Drinking Water Inquiry. The budget is based on the following assumptions:
 - 43.1 the Inquiry will operate between January 2018 and October 2018;
 - 43.2 the Inquiry will comprise a Chair and up to five members;
 - 43.3 the Chair will work an average of four days per week and the remaining five members will work an average of three days per week for the duration of the Inquiry;
 - 43.4 the members will not be Wellington based;
 - 43.5 the Inquiry's office will be located in Wellington;
 - 43.6 the Inquiry will have up to 16 full-time equivalent staff for the duration;
 - 43.7 the Chair, members and several staff will be required to travel around New Zealand to conduct the Inquiry, including holding meetings or hearings in various locations;

- 43.8 public and sector engagement will be undertaken using a variety of methods including digital channels;
- 43.9 funding will be available to support participants engagement with the Inquiry, including counselling, contribution to travel costs, and legal support – the Inquiry will determine what degree of support will be provided;
- 43.10 the inquiry will draw on local and international experts from a variety of fields; and
- 43.11 the report back date will be 31 October 2018.

Table 1: Estimated costs of the Inquiry

Fees for Inquiry members (non-departmental other expense)	0.425	0.364
Government Inquiry operating (departmental output expense)		
Inquiry staff	0.831	0.739
Professional fees (assisting counsel, experts)	0.510	0.428
Travel, accommodation and associated costs	0.586	0.248
Participant support	0.300	0.300
Operating costs (IT set-up and support, office rental and occupancy costs, website development, public engagement)	1.284	0.506
Operating Total	3.511	2.221
Summary		
Total non-departmental other expense	0.425	0.364
Total departmental output expense	3.511	2.221
Total	3.959	2.605

Financial implications for Vote Internal Affairs

44. The Department has no standing baseline funding to support inquiries and cannot absorb Inquiry-related costs. Accordingly, significant fiscal pressures and risks to the delivery of services in Vote Internal Affairs arise if the cost of an inquiry is not fully funded.
45. The Department has reviewed options for reprioritising funding from within Vote Internal Affairs 2017/18 baseline to fund the Inquiry. The Department is facing significant cost pressures in 2017/18 and currently forecasts approximately \$150 million in cost pressures over the next four years.
46. Approval of funding cannot be deferred to Budget 2018 because the funding is required immediately to ensure that the Government's expectations for the Inquiry can be met.
47. Accordingly, we seek approval for a \$6.521 million increase to the Vote Internal Affairs appropriations for 2017/18 and 2018/19 to cover the costs of the Inquiry, consisting of:

- 47.1 \$0.789 million in fees for the Inquiry Chair and up to five members (up to six members in total); and
- 47.2 \$5.732 million to cover the Inquiry staff, travel and accommodation, professional fees, support for participants and other operating costs associated with the Inquiry.
48. If additional funding is not approved, the Department would need to reprioritise its existing resources and work programmes which will lead to a reduction in the provision of goods and services or rescinding commitments that have been entered into.
49. Funding for previous inquiries has been agreed by Cabinet on a case-by-case basis. It is important to note that the costs of the Inquiry are driven by the decisions of the independent Chair of the Inquiry, and the Department has no direct control over expenditure.
50. If additional funding is required during the Inquiry, the Minister of Internal Affairs, in consultation with the Minister of Health, will report back to Cabinet to seek agreement to additional funding.

Consultation

51. This paper was prepared by the Department of Internal Affairs, the administering department for the Inquiry. The Ministry of Health, the Crown Law Office, the Department of Prime Minister and Cabinet (Policy Advisory Group), the State Services Commission and the Treasury were consulted during the preparation of this paper.

Human rights implications

52. The proposals in this paper are consistent with the New Zealand Bill of Rights Act 1990 and the Human Rights Act 1993.

Gender implications

53. The Inquiry will, as part of its purpose, support the rights of all New Zealanders and aim to improve the experience of all New Zealanders in relation to poor mental health and mental wellbeing. Gender balance has been considered in the composition of the Inquiry membership.

Disability perspective

54. The Inquiry will, as part of its purpose, support the rights and aim to improve the experience of people living with disabilities and who need to manage poor mental health. Disability perspectives have been considered in the composition of the Inquiry membership.

Legislative implications

55. There are no legislative implications from this paper. However, it is possible that the Inquiry may signal changes to be considered in subsequent regulatory reviews.

Regulatory Impact Analysis

56. A Regulatory Impact Statement is not required.

Timing and publicity

57. A communications approach and supporting materials are being developed. An initial announcement of the Inquiry Chair and membership will be made as soon as practicable after Cabinet approval. The announcement will acknowledge the efforts of, and pressures faced by, the mental health workforce.
58. The communications approach will be updated over the course of the Inquiry, to ensure the public are aware of the key stages and developments. As the Inquiry prepares its report, due consideration will be given to how best to communicate the findings.

Recommendations

59. We recommend that Cabinet:
 1. **agree** to establish a Government Inquiry into Mental Health and Addiction;
 2. **note** the appointing Minister's intention to establish the Inquiry on by a notice in the *New Zealand Gazette*, as soon as practicable, that notifies the terms of reference for the Inquiry (Appendix A), names the Chair and members of the Inquiry, and sets an Inquiry reporting date of 31 October 2018;
 3. **agree** that the draft terms of reference for the Inquiry into Mental Health and Addiction (Appendix A) reflect the following purposes and objectives:
 - 3.1 hear the voices of the community, people with lived experience of mental health and addiction problems, people affected by suicide, and people involved in preventing and responding to mental health and addiction problems, on New Zealand's current approach to mental health and addiction, and what needs to change;
 - 3.2 report on how New Zealand is preventing mental health and addiction problems and responding to the needs of people with those problems; and
 - 3.3 recommend specific changes to improve New Zealand's approach to mental health, with a particular focus on equity of access, community confidence in the mental health system and better outcomes, particularly for Māori and other groups with disproportionately poorer outcomes;
 4. **agree** that the draft terms of reference for the Inquiry into Mental Health and Addiction (Appendix A) reflect the following scope:
 - 4.1 mental health problems across the full spectrum from mental distress to enduring psychiatric illness;
 - 4.2 mental health and addiction needs from the perspective of both:
 - 4.2.1 identifying and responding to people with mental health and addiction problems; and
 - 4.2.2 preventing mental health problems and promoting mental well-being;
 - 4.3 prevention of suicide;
 - 4.4 activities directly related to mental health and addiction undertaken within the broader health and disability sector (in community, primary and secondary care), as well as the education, justice and social sectors and through the accident compensation and wider workplace relations and safety systems; and

- 4.5 opportunities to build on the efforts of whānau, communities, employers, people working in mental health and others to promote mental health;
5. **agree** for the appointing Minister to appoint the following members to the Government Inquiry into Mental Health and Addiction:
 - 5.1 Professor Ron Paterson as Chair of the Inquiry for a period commencing on the date of the *New Zealand Gazette* notice and expiring on 31 October 2018;
 - 5.2 Dr Barbara Disley as a member of the Inquiry for a period commencing on the date of the *New Zealand Gazette* notice and expiring on 31 October 2018;
 - 5.3 Sir Mason Durie as a member of the Inquiry for a period commencing on the date of the *New Zealand Gazette* notice and expiring on 31 October 2018;
 - 5.4 Dr Jemaima Tiatia-Seath as a member of the Inquiry for a period commencing on the date of the *New Zealand Gazette* notice and expiring on 31 October 2018;
 - 5.5 Josiah Tualamali'i as a member of the Inquiry for a period commencing on the date of the *New Zealand Gazette* notice and expiring on 31 October 2018; and
 - 5.6 Dean Rangihuna as a member of the Inquiry for a period commencing on the date of the *New Zealand Gazette* notice and expiring on 31 October 2018;
6. **note** the attached organisation form and CV summaries for the proposed Chair and members (Appendix B);
7. **note** that, consistent with the Cabinet Fees Framework [CO (12) 6 refers] the fees for the Inquiry Chair will be \$1,400 per day and Members' fees will be \$975 per day;
8. **note** the Department of Internal Affairs has no standing baseline funding to support government inquiries, and that in the absence of new funding for the Inquiry, would therefore face fiscal pressures and risks to the delivery of services;
9. **note** the forecast cost of the Inquiry is \$6.521 million comprising: \$0.789 million in fees for the Inquiry Chair and five members, and \$5.732 million to cover the Inquiry staff, travel and accommodation, professional fees, support for participants and other operating costs associated with the Inquiry;
10. **note** the costs of the Inquiry are driven by the independent Chair of the Inquiry, and the Department of Internal Affairs has no direct control over the Inquiry's expenditure;
11. **agree** to increase funding in 2017/18 and 2018/19 to meet the costs of the Inquiry into Mental Health and Addiction;

12. **approve** the following changes to appropriations to meet the costs of the Inquiry, with a corresponding impact on the operating balance:

	\$million – increase/(decrease)				
Vote Internal Affairs Minister of Internal Affairs	2017/18	2018/19	2019/20	2020/21	2021/22 & Outyears
Multi-Category Expenses and Capital Expenditure: Support for Statutory and Other Bodies MCA Departmental Output Expense: Commissions of Inquiry and Similar Bodies (funded by revenue Crown)	3.511	2.221	-	-	-
Non-Departmental Other Expense: Public Inquiries	0.425	0.364	-	-	-
Total Operating	3.936	2.585	-	-	-

13. **agree** that the proposed changes to appropriations for 2017/18 above be included in the 2017/18 Supplementary Estimates and that, in the interim, the increases be met from Imprest Supply;
14. **agree** that the expenses incurred under recommendation 12 above be a charge against the between-Budget contingency, established as part of Budget 2017;
15. **note** that the Department has no standing baseline funding to support government inquiries and accordingly, requires any under expenditure that may arise in 2017/18 to be transferred to 2018/19;
16. **agree in principle** to transfer from 2017/18 to 2018/19 any underspend in the above appropriations, with the final amounts to be transferred to be confirmed as part of the 2018 October Baseline Update, once audited accounts for 2017/18 are available; and

17. **note** that should additional funding be required during the Inquiry, the Minister of Internal Affairs, in consultation with the Minister of Health, will report back to Cabinet to seek agreement to additional funding.

Authorised for lodgement

Hon Dr David Clark

Minister of Health

Hon Tracey Martin

Minister of Internal Affairs