The Ministry of Social Development
Bowen State Building
Bowen Street or
P.O. Box 1556
Wellington 6011

11 June 2013

Attention: Mr Brendan Boyle - The Chief Executive

Re: Requests under sections 12 and 16 of the Official Information Act 1982 - for specified information to be made available

Dear Mr Brendan Boyle, dear staff at the Ministry for Social Development

Please accept my request for the disclosure of the following specified information - under sections 12 and 16 of the Official Information Act 1982:

1. Information about the total number of referrals made by Work and Income staff (e.g. case managers) of:
   a) invalid’s benefit recipients and/or applicants for that benefit, and
   b) sickness benefit recipients and/or applicants for that benefit -
      to a medical practitioner or psychologist acting as a so-called designated doctor for Work and Income, and
      to be examined under sections 44 (1) and 54B (3) of the Social Security Act 1964 (the Act) – per year from 2005 on, for all administrative regions of the Ministry of Social Development (MSD).
      
      This is meant to be for the total of such referrals for such examinations that were subsequently endorsed by the commissioned designated doctor.

      Further to this I seek information whether the Ministry does, or does not, centrally record data on all referrals made to designated doctors under the above sections of the Social Security Act 1964, which would include those cases that are not subsequently endorsed by a designated doctor. If the Ministry does not centrally record such data, I ask whether it has any plans, or is making any preparations, to introduce such central recording of such data.

2. Information about the total number of appeals made under sections 53A (1) (b) and (ba) of the Act, and received by Work and Income, against any decisions made by Work and Income staff, following medical examinations by designated doctors according to sections 44 (1) and 54B (3) of the Social Security Act 1964, and following any subsequent recommendations acted upon or not.

      This is for appeals made by:
      a) invalid’s benefit recipients and applicants for that benefit, and
      b) sickness benefit recipients and applicants for that benefit,
      per year from April 2010 until now, for all MSD administrative regions.

3. Information about the total number of all appeals made under section 53A sections (1) (a) to (e) of the Act, and received by Work and Income, per year from April 2010 up until now, for all MSD administrative regions.
4. Information about the total number of Medical Appeal Board hearings conducted under section(s) 53A (1) (b) and (ba) of the Act for each MSD administrative region since April 2010 (if possible per month, otherwise per year). If such information is not available for each region, then the total national figure is requested.

5. Information about the total number of Medical Appeal Board hearings conducted under section(s) 53A (1) (a) to (e) of the Act for each MSD administrative region since April 2010 (if possible per month, otherwise per year). If such information is not available for each region, then the total national figure is requested.

6. Information about each of the numbers of decisions by Work and Income staff upheld and/or overturned by Medical Appeal Boards hearing appeals as per request “2” above – per year from April 2010 up until now, again for each MSD administrative region - and also as total for the whole country.

7. Information about each of the numbers of decisions by Work and Income staff upheld and/or overturned by Medical Appeal Boards hearing appeals as per request “3.” above – per year from April 2010 up until now, for each MSD administrative region– and also for the whole country.

8. A complete list (detailing places, regions, times and dates) of all the training sessions held all over New Zealand, for medical practitioners or other health professionals used - or intended to be used - as designated doctors by Work and Income for conducting medical examinations under sections 44 and 54B of the Social Security Act 1964, for the period from 2008 up to the most recent time such training sessions were being held anywhere in the country.

9. A complete list of, and also individual photo-copies or printouts of, the detailed training materials and any presentations used during training of designated doctors (by Dr David Bratt and Dr David Rankin of MSD) for any such time as such training was conducted during 2008 and afterwards. Any work- or training scenarios, any PDF or PowerPoint presentations, display sheets, handed out leaflets, brochures and any other material of relevance should be included. Only a 'Guide for Designated Doctors', an application- and a report form are available on the Work and Income website, but no other materials can be found online.

10. Copies of all reports and memos received and/or issued by the Principal Health Advisor, the Principal Disability Advisor and Dr David Rankin, that were prepared, issued, confirmed and acted upon for the preparation, implementation and anticipated outcomes of “designated doctor training” sessions, from 2006 to the most current date of receipt/issue. Also any official reports or instructions relating to suggested and/or implemented changes and/or the termination of such training should be included.

11. A detailed list stating the individual annual before tax salaries, plus any additional bonuses or the likes, for the following senior and key-role advisory staff of the Ministry of Social Development:

   a) Dr David Bratt, Principal Health Advisor for the Ministry of Social Development;
   b) Anne Hawker, Principal Disability Advisor for the Ministry of Social Development;
   c) Dr David Rankin, Senior Advisor for the Ministry of Social Development.

As I have reason to believe that this information may have been withheld following earlier requests, due to stated privacy concerns under the Privacy Act 1993, I wish to state that I nevertheless insist on these salaries to be made available under the Official Information Act 1982, as I believe that it is in the public interest that such information is made available.

Due to all three professionals being expected to perform their tasks as leading public service employees responsibly and diligently at the highest professional and ethical standards, and also being expected to possess the particular, high quality and appropriate qualifications required to do their work, and for the fact that public accountability is a core requirement for all those professional roles, any rights to withhold this information under the Official Information Act 1982, or the Privacy Act 1993, should be outweighed by the public’s deserved interest. The public has an interest in transparency, simply to receive assurance that remuneration paid does match competency, qualification, responsibility and performance for each role. The public has a right to assess whether remuneration paid is a clear and fair reflection of these three professionals’ abilities to meet the expected high standards of service-delivery and any requirements.

In any case the annual before tax salary - and any possible bonus or similar – paid to Dr David Bratt as Principal Health Advisor should be made available, as the public and clients of MSD truly deserve to have full transparency in this matter, given the fact that his role is that of a very senior advisor and leader in a crucial area of decision-making over sensitive, high risk health and disability issues. The New Zealand
public expects that Dr Bratt leads in his advisory position by applying a high level of responsibility, of ethical standards and professional conduct at all times, as an exemplary manager of any staff working under or with him. He is also entrusted to ensure balanced, objective, reliable, scientifically based and professional standards are applied by his subordinate, oversee staff in their duty of advising on health and disability matters that affect thousands of clients of the Ministry. The trust and respect the public gives such a crucial, senior advisor must surely justify the publication of the before tax salary and other earnings of Dr Bratt.

It is publicly known, and important to note, that Dr David Bratt has since at least 2010 made numerous public and also non public presentations in his role as Principal Health Advisor for the Ministry of Social Development (and Work and Income). It is a concern to some, that he has in doing so drawn comparisons between “benefit dependence” and “drug dependence”, referred to “the benefit” as an “addictive debilitating drug”, used statistical data and supposed “medical” information based on apparently selective, in part quite likely unproved medical or scientific findings. These were apparently largely based on “findings” by a particular school of thought of “experts” that includes professional “specialists” as Professor Mansel Aylward from the ‘Centre for Psychosocial and Disability Research’ at Cardiff University, in the United Kingdom. There are evidently other schools of thought in relation to psychosocial and disability research, which appear to not have been considered and presented by Dr Bratt. This raises concerns about his personal, preferential choices of information. Hence the public deserves to know also, as to how the presentations that Dr Bratt has delivered as basically Work and Income authorised information, can be considered objective, reasonable, fair and balanced, and thus be acceptable to MSD.

The public and Work and Income clients do in view of this have justified reasons to obtain information on Dr Bratt’s annual salary and other income from the public purse, to allow them to assess, whether the remuneration is a good spend for the services Dr Bratt actually delivers for the Ministry to them.

If you may not be familiar with the presentations referred to above, I wish to make you aware of PDF or PowerPoint documents to be found under these following links to websites, which were clearly created by (or for) Dr Bratt, to use for his public and partly not so public presentations to general practitioners, designated doctors, medical trainers and others. These links are:

http://www.gpcme.co.nz/pdf/GP%20CME/Friday/C1%202010%20%20Bratt-Hawker.pdf
(‘Ready, Steady, Crook – Are we killing our patients with kindness?’, Dr Bratt + A. Hawker, MSD, Christchurch 2010, see pages 13, 20, 21 and 35)

http://www.gpcme.co.nz/pdf/2012/Fri_DrVincent_1400_Bratt_Medical%20Certificates%20are%20Clinical %20Instruments%20too%20%20June%202012.pdf
(Medical Certificates are Clinical Instruments Too’, Dr Bratt, MSD, 2012, see pages 3, 16 and 33 for details)

(Pressure / No Pressure – Strategies for Puffy Patients’, a link to a PowerPoint presentation by Dr Bratt and Anne Hawker, where again on page 27 a claim is made the “benefit” is an “addictive debilitating drug”).

There have also been articles written on Dr David Bratt as Principal Health Advisor in the ‘NZ Doctor’ magazine, which clearly state his very one-sided views and interpretations of particular health issues, on the effects of “worklessness”, his intentions of getting sick and disabled into work, and his comments “the benefit” is “addictive” like a “drug”. An article in the online edition on 01 August 2012 was titled ‘Harms lurk for benefit addicts’ and written by Lucy Ratcliffe, (see link: http://www.nzdoctor.co.nz/in-print/2012/august-2012/1-august-2012/harms-lurk-for-benefit-addicts.aspx).

A critical opinion on this one article which was published that magazine’s online edition by Tim Walker Nelson on 29 August 2012, titled “Questioning the direction of MSD policy” (see link: http://www.nzdoctor.co.nz/in-print/2012/august-2012/29-august-2012/questioning-the-direction-of- msd-policy.aspx ). It raised the valid question about what kind of Principal Health Advisor the Ministry of Social Development has employed for such a serious advisory role.

While the public may find it astonishing, that the Ministry of Social Development supports, authorises or at least tolerates such presentations, and these apparently somewhat potentially biased, unprofessional and unscientific comparisons by Dr Bratt, it certainly has a justified interest and a right to be informed about the remuneration for such “work” performed by him.
12. Finally I request a complete list of all Regional Health Advisors and Regional Disability Advisors employed for each administrative region of the Ministry of Social Development, stating clearly their particular medical, rehabilitation or other health related qualifications, that ensure that they are appropriately and sufficiently qualified to perform their specific roles to advise case managers and other Ministry staff on health and disability related matters, including the assessment of medical reports, and the evaluation of recommendations by other health professionals, made on health conditions of sick or disabled clients.

The above requested specified information is sought to be made available in due course within the stipulated time-frame of 20 working days, as set out in the Official Information Act 1982.

I kindly and respectfully ask that the information is made available by way of a sufficiently detailed written response, and by way of good quality, easily readable photo copies of original documents containing the relevant information. Otherwise it can also in part be made available by way of equally good quality computer generated printouts, and if not available in hard copy form, as a standard CD containing the corresponding, relevant documents and information in PDF, or similarly common, readable data format.

It is asked and appreciated that the information is provided as detailed as possible, and as can reasonably be expected, along the aspects of the single requests.

This particular information is sought to deliver to me as the requester - and to the wider public of New Zealand, needed assurances in regards to administrative integrity, legal, financial and ethical accountability, reasonable transparency, and the quality and fairness in service delivery, that is expected from the Ministry of Social Development and its department of Work and Income New Zealand.

Thank you for your acknowledgment and appreciated co-operation.

Yours sincerely

Anonymous