

# Patients with Firearms

If a health practitioner becomes aware that a patient is a firearm licence holder and that they have a health condition that may make them unfit to use or possess a firearm, a notification may need to be made to the New Zealand Police. This factsheet provides an overview of the circumstances which might trigger the obligation to consider making such a notification, and the process that follows.

Section 92 of the Arms Act 1983 sets out two criteria that, if present, will trigger a health practitioner's obligation to **consider** making a notification to the Police about a patient:

1. The health practitioner knows or has reason to believe that their patient has a firearms licence; and
2. The health practitioner considers that the health condition of the patient is such that, in the interests of individual or public safety, the patient:
  - a. Should not be permitted to use or possess a firearm; or
  - a. Should be permitted to do so subject to limitations.

Ultimately whether a notification is made is a matter of discretion for the health practitioner.

## Criterion 1: knows or has reason to believe that a patient has a firearms licence

When a person is issued with a firearms licence, or their licence is renewed, the Firearms Safety Authority is required to notify the person's health practitioner. Should the person transfer to the care of a new health practitioner, they will similarly be informed. The health practitioner should record this information in the patient's clinical records.

However, it is important to be aware that who a person nominates as their health practitioner may not necessarily be, for example, their registered GP. It should not be assumed then that a patient is not a firearms licence holder, simply because a notification to that effect has not been received.

The health practitioner may have no more than "reason to believe" that a patient is a firearms licence holder, but this is sufficient for the purposes of criterion 1. The term "reason to believe" means that there must be some reasonable factual foundation for the practitioner's belief; speculation or conjecture is not sufficient.

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Examples of circumstances which may constitute “reason to believe” include where a notification to that effect has been provided by a third party such as the patient’s spouse, or where the patient is involved in an activity or has an occupation that involves the use of a gun, such as being a member of a pistol club, or working in animal pest control. Where the practitioner has “reason to believe” but no more, if it is reasonable to do so the practitioner should inquire of the patient whether they are in fact a firearms licence holder.

## Criterion 2: Health condition and the interests of safety

The Firearms Safety Authority provides the following **non-exhaustive** list of health conditions which may affect a patient’s safe use of a firearm:

- Mental health issues of any kind, including depression, stress, anxiety, bipolar disorder, personality disorder, or psychosis, especially if poorly controlled or escalating in severity;
- Development of suicidal thoughts or feelings;
- Serious head injury or neurological conditions such as dementia, Parkinson’s Disease, Huntington’s Disease, epilepsy, multiple sclerosis, Amyotrophic Lateral Sclerosis or Multi System Atrophy;
- Seizures, dizziness, blackouts;
- Alcohol or other drug (illegal or illegal) misuse or dependence to an extent that detrimentally affects the person’s judgement or behaviour;

- Decline in functioning of memory, thinking, understanding, and judgment;
- Exhibiting or reporting behaviour suggesting anger or violence (including previous or current family harm);
- Drowsiness or problems with cognition, secondary to a health condition or medication;
- Any physical condition that would make handling firearms unsafe, for example, visual or hearing impairment, poor mobility, increased risk of falls.

The key consideration here is whether the health condition is **developing or manifesting itself**, or **likely to manifest itself**, in such a way that, in the interests of individual or public safety, the person should not continue to use or possess firearms (or should only be permitted to do so subject to limitations). So, for example, if the condition is well managed and there are no current concerns for the safety of the patient or of others, there should be no need to notify. Ultimately, whether a health condition fits the criteria is a matter of clinical judgment.

If it is considered that a patient’s health condition does not meet criterion 2 and the decision is made not to notify, careful consideration should be given to what advice may still need to be provided to the patient in relation to their clinical condition, to ensure their safe use of firearms.

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## What next?

If criteria 1 and 2 are met, the health practitioner must **consider** notifying Police. It should be noted that by making such a notification, a health practitioner is not liable to criminal, civil, or disciplinary proceedings for disclosing the patient's personal information, as long as the health practitioner acts in good faith.

If the decision is made to notify the Police, the notification should include:

- a. The health practitioner's opinion;
- b. The grounds on which their opinion is based; and
- c. Whether the health practitioner believes the licence holder (the patient) poses an immediate or imminent risk of self-harm or of harm to others.

If the answer to (c) is 'no', a notification can be made by either calling the non-emergency Police number (105), or by filling out the **online form**.

If the answer to (c) is 'yes', a notification should be made immediately to the Police by calling 111.

If there are concerns about the health practitioner's own safety, care will need to be taken in terms of how the notification is made and who needs to be informed of this, for example the Police, and/or the health practitioner's colleagues or other's involved in the patient's care. If the Police are informed of a health practitioner's concerns for their own safety, they have the ability to withhold from the licence holder information about who made the notification.

Upon receiving a notification, the Police may suspend or revoke the patient's licence, or impose conditions on their licence, or they may require the patient to undergo a further medical assessment by an independent practitioner first.

Any decision to notify the Police and the reasons for that decision, or any advice given to a patient regarding their use of firearms, should be carefully and accurately recorded in the patient's clinical records.

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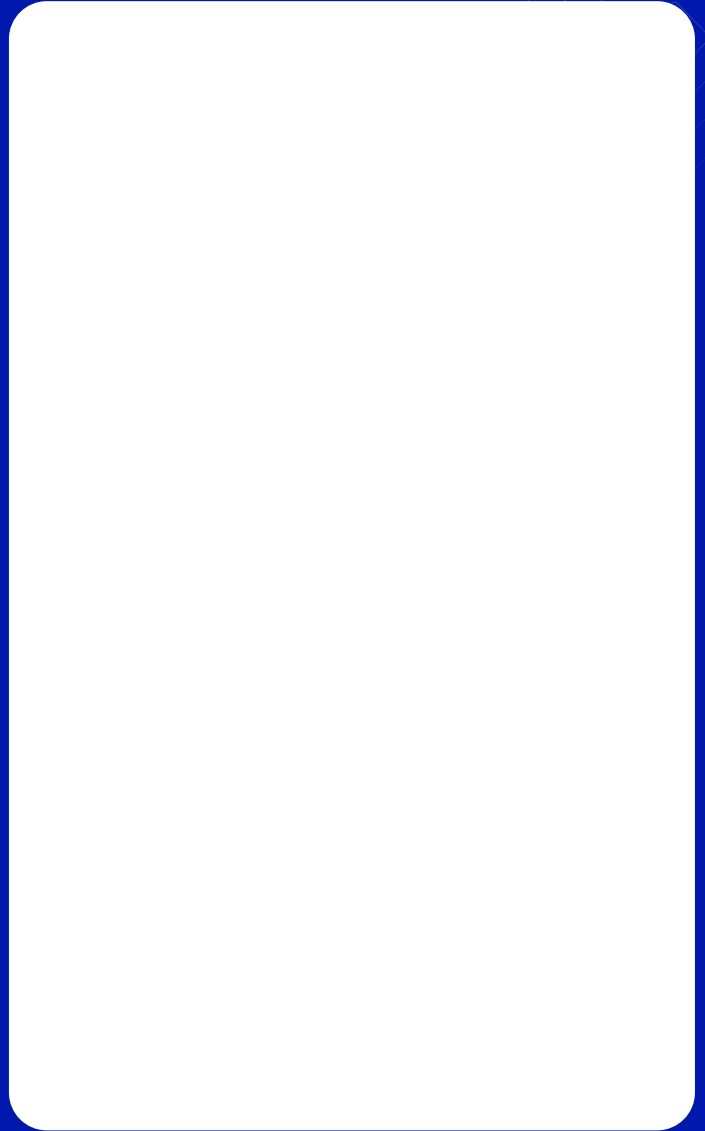
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