

Mental Health Review &

Lands, Planning & Mining

TRIBUNALS

Northern Territory

Annual Reports 2012 - 2013



The Mental Health Review Tribunal & Lands, Planning and Mining Tribunal

11 October 2013

The Honourable Mr John Elferink MLA Attorney-General GPO Box 3146 Darwin NT 0801

Dear Attorney-General

Re: Mental Health Review Tribunal & Lands, Planning & Mining Tribunal Annual Report

In accordance with section 140 of the *Mental Health and Related Services Act* and section 38 of the *Lands, Planning and Mining Tribunal Act* I have pleasure in providing you with the Annual Report on the operations of both Tribunals for the period 1 July 2012 to 30 June 2013.

Yours faithfully

Mr Greg Cavanagh
President of the Mental Health Review Tribunal
Chairperson of the Lands, Planning & Mining Tribunal

Level 3, Zone A, Nichols Place Cnr Cavenagh & Bennett Streets Darwin NT 0800

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NORTHERN TERRITORY OF AUSTRALIA

MENTAL HEALTH REVIEW TRIBUNAL

ANNUAL REPORT

In accordance with section 140 of the Mental Health and Related Services Act 1998, I Greg Cavanagh, President of the Mental Health Review Tribunal, hereby submit my report on the exercise of the Tribunal's powers and the performance of its functions for the year ended 30 June 2013.

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SECTION A: INTRODUCTION

The Mental Health Review Tribunal (the Tribunal) was established under Part 15 of the Mental Health and Related Services Act 1998 (the Act).

The primary role of the Tribunal is to act as an independent decision making body to protect the interests of persons who cannot do so themselves due to mental illness. The exercise of that primary function largely involves the review of decisions made by Mental Health Services (MHS) relating to the admission, detention and treatment of persons admitted involuntarily to an Approved Treatment Facility (ATF) and determinations in relation to the involuntary treatment of patients in the community. Appendix 1 contains a statement of the Tribunal functions. Appendix 2 contains a more detailed description of selected functions carried out by the Tribunal.

The administration of the Act is shared between the Department of the Attorney-General & Justice and the Department of Health and Families (DoH). The Department of the Attorney-General & Justice has responsibility for the administration of Part 15 of the Act which deals with the Tribunal. The Tribunal does not administer its own budget. Details of expenditure in relation to the Tribunal should be set out in the Annual Report of the Department of the Attorney-General & Justice.

Section F of this Report sets out statistics relating to the Tribunal for the period covered by this Report. In a nutshell the available statistics show that:-

The number of new clients has steadily increased over the last few years. In 2013 the number of new clients increased by 7.35% over the previous year. Total matters scheduled for determination by the Tribunal did not increase over previous years to any significant extent. I do not foresee any need for increased resourcing at the present time.

SECTION B: OFFICEHOLDERS STAFF AND PREMISES

The Act requires the Administrator to appoint a President of the Tribunal from amongst the Legal Members. On 26 June 2012 I was appointed a member of the Mental Health Review Tribunal as well as President.

The President is responsible for ensuring the proper exercise of the powers conferred on the Tribunal and the proper performance of the functions of the Tribunal.

The Act stipulates that a member of the public service is to be appointed as a Registrar and/or Deputy Registrar of the Tribunal. A full time Deputy Registrar has been appointed since the beginning of the new financial year 2013/2014. The Deputy Registrar is Miss Cynthia Thompson; she is the only member of staff of the Tribunal and she concurrently acts as the Deputy Registrar of the Lands Planning and Mining Tribunal ("LPMT"). The functions of the Deputy Registrar are to exercise the powers and perform the functions conferred by the Tribunal. Presently, the Deputy Registrar provides most of the administrative support for the Tribunal.

Previous Annual Reports have commented on the minimal level of administrative staff provided to the Tribunal. The Tribunal has only one permanent member of staff which is the Deputy Registrar. The Deputy Registrar is also the Deputy Registrar of the LPMT and the Tribunal's offices are necessarily co-located with the offices of the LPMT. Until a common Deputy Registrar was appointed, each Tribunal had its own individual Deputy Registrar. However as offices were then also co-located, the practice developed that each Deputy Registrar would cover for the other during leave and other periods of absence. The pooling of resources whereby one person was appointed to concurrently be the Deputy Registrar of both Tribunals was a DoJ initiative and was essentially a cost saving measure. Both the previous Chairperson of LPMT and previous President agreed to that proposal but on the express stipulation that adequate back up arrangements would always be in place to cover for absences.

The offices of the Tribunal, which are shared with the LPMT, are located in floor 3 of Nichols Place. The Tribunal has very limited physical contact with the public or interested parties. All documents lodged with the Tribunal are lodged electronically and the dissemination of documents by the Tribunal to interested parties also occurs electronically. Therefore the current premises remain adequate for Tribunal needs.

SECTION C: MEMBERSHIP OF THE TRIBUNAL

The Act provides that the composition of the Tribunal is to consist of persons appointed by the Administrator and to be one each of three distinct categories.

Members eligible for appointment in the first of those categories, described as the Legal Members, are Magistrates, Judicial Registrars and lawyers who have more than five years experience. Legal members are listed in Appendix 3 hereof, and it is to be noted that six new members were appointed during the year.

Members in the second category, vernacularly referred to as the Medical Members, must be a "medical practitioner" to qualify for appointment. The Interpretation Act defines this as a person registered under the national law to practise in the medical profession. All of the Tribunal's Medical Members satisfy this requirement. They are all interstate based consultant psychiatrists, four of whom reside in New South Wales and one in Victoria. All sit on the equivalent Tribunal in their home State.

As mentioned in previous Annual Reports, this remains an ongoing concern. The new national registration laws do not provide for the category of registration similar to that under the former law which permitted a limited form of registration for retired professionals. The medical members of the Tribunal, as well as those in other jurisdictions, have voiced concerns as to whether they can satisfy the registration requirements while not practising full time. Ongoing professional development is a desirable requirement for obvious reasons but the instances of this recognised by the national law provide few options for retired medical practitioners.

Arrangements have been put in place in other jurisdictions, most notably Victoria, which may equally apply in the NT but there remains uncertainty. As most of the equivalent Tribunals in other jurisdictions also rely heavily on retired medical practitioners as medical members, the issue is one of national concern. It is proposed to discuss this at national level in the near future and hopefully some strategies will be developed which will reduce or eliminate current concerns.

If the concerns become insurmountable, consideration may need to be given to amending the Act in respect of the qualification necessary for appointment as medical member.

The final category of member, referred to as the Community Member, is appointed based on having a special interest or expertise in mental illness or mental disturbance.

Since the 2007 amendments to the Act, the Tribunal has been able to sit with only two members in certain circumstances and as long as one of the members sitting is a Legal Member. This power has been utilised on some occasions, mostly to cover for unexpected unavailability of rostered members.

All members, other than persons employed in the public service, are entitled to be paid sitting fees. The sitting fees are paid in accordance with a determination of the Administrator on the recommendation of the Remuneration Tribunal.

The Tribunal's objective is to maintain membership numbers of each class of member at a level sufficient to meet legislative requirements. As some members rely on the income earnt from sitting fees, a balance needs to be struck when setting the number of members in each category. Too few may adversely affect the Tribunal's ability to meet the legislative requirements. Too many may lead some members to review whether their continuing involvement with the Tribunal is worthwhile. With this qualification and with ongoing monitoring of membership requirements, the Tribunal has sufficient members of each category to ensure that legislative requirements can be met in the foreseeable future.

The Tribunal acknowledges the work of its members and thanks all members for their continued valued expertise and commitment.

A General Meeting of all members was held in Darwin on 23 August 2013. During the day extensive and detailed education was provided in regards to the operation of the Act and procedures during reviews.

Appendix 3 contains a list of persons who are currently members of the Tribunal.

SECTION D: OBJECTIVES OF THE TRIBUNAL

The Tribunal's objectives are:-

- 1. To conduct hearings within legislative time-frames;
- 2. To maximise access to the Tribunal across the Northern Territory;
- 3. To provide quality service to patients and stakeholders by:-

conducting hearings in an informal atmosphere; ensuring patients have legal representation where appropriate; ensuring that patient rights are met in regard to accessing records and reports that are before the Tribunal; ensuring the attendance at hearings of patients the subject of the review wherever practicable; encouraging the attendance of family and other support persons at Tribunal hearings, but only with the patient's consent; ensuring the provision of interpreter services where necessary:

ensuring the provision of interpreter services where necessary; ensuring confidentiality of Tribunal proceedings;

ensuring fair and equitable hearings and compliance with the principles of natural justice;

- 4. To maintain workable procedures with MHS legal representatives and other stakeholders;
- 5. To raise levels of awareness about the Tribunal and its operations.

These objectives have been met as far as is reasonably practicable.

Meetings and other communications, as and when required, occur between the President and appropriate MHS staff, both in Darwin and in Alice Springs, to ensure continuation of workable procedures.

SECTION E: HEARINGS

The Tribunal has continued to convene its hearings at the ATF, both in Darwin and Alice Springs. This is for the convenience of MHS staff and avoids the disruption to a patient's care which would result if the patient were required to travel to and from the ATF for hearing purposes.

Lawyers appearing on behalf of patients provide an invaluable service, primarily to their clients, but also indirectly to the Tribunal by helping to achieve efficiency in the hearing process. The Tribunal thanks all lawyers appearing at Tribunal hearings for their assistance and look forward to their continuing involvement.

Medical Members necessarily continue to sit via an audio visual link up. This is not likely to change in the immediate future. In most cases however, the Legal Member and the Community Member are both present at the hearing location with the patient, MHS staff, legal representatives and other relevant parties.

The exception is with respect to hearings for reviews of CMOs for patients living in remote communities. These are conducted with the patient, and usually the case manager, appearing by telephone link to the relevant community clinic. It would be preferable for the patient to appear in person. That would optimise the effectiveness of legal representation. A telephone link and a video link (for the Medical Member) in the same hearing is not ideal and presents difficulties for communication between the patient and the Medical Member often requiring relaying of questions and answers. However it is accepted that there are practical difficulties and expense in having the patient travel from a remote community to attend in person. Those considerations outweigh the preference of personal attendance.

The Tribunal has managed to meet legislative time frames in all of its cases in this year. In all cases heard by the Tribunal, a decision was delivered at the conclusion of the hearing.

SECTION F: STATISTICAL REPORT

Number of new Clients

	Number of new Tribunal clients by year					
	2009	2010	2011	2012	2013	
TOTAL	191	222	253	272	292	

Case Numbers by Location

Comprising:								
Location		Number of cancelled hearings						
	2009	2010	2011	2012	2013			
Alice Springs	74	95	72	90	122			
Darwin	291	436	421	493	569			
TOTAL	365	530	493	583	691			
Location	Number of determinations made by the Tribunal							
	2009	2010	2011	2012	2013			
Alice Springs	64	44	49	82	96			
Darwin	377	314	523	607	581			
TOTAL	441	358	572	689	677			

Refer to following pages for breakdowns of cases by purpose, outcome and reasons for cancellation. Cancelled hearings relate to matters notified to the Tribunal that do not proceed to hearing.

Applications listed – by Location									
Purpose		201			201			201	3
-	ASP	DRW	Combined	ASP	DRW	Combined	ASP	DRW	Combined
Review long term voluntary admission	2	0	2	0	0	0	0	0	0
Review involuntary admission to mental health facility on the grounds of mental illness	57	423	480	63	443	506	97	417	514
Review involuntary admission to mental health facility on the grounds of mental disturbance	23	84	107	31	97	128	35	126	161
Review Tribunal order for involuntary detention	24	211	235	33	159	192	42	157	199
Review Interim Community Management Order	4	72	76	14	80	94	11	62	73
Review Community Management Order	6	89	95	7	204	211	23	209	232
Review Report	2	35	37	5	70	75	6	100	106
Determine application for specific treatment	2	14	16	1	35	36	2	22	24
Determine application for warrant to apprehend	0	0	0	0	33	33	2	12	14
Review on request (section 123(4))	1	16	17	0	13	13	2	22	24
Total matters scheduled for determination by the Tribunal	121	944	1065	154	1134	1288	220	1127	1347

Hearing Outcomes by Location										
Cancelled	2011 2012						201	3		
hearings	ACD	DDW	C 1: 1				A CD	ACD DDW C 1:		
D' 1 1	ASP	DRW	Combined	ASP	DRW	Combined	ASP	DRW	Combined	
Discharged from facility prior to hearing	25	331	356	37	267	304	60	324	384	
Changed status to voluntary patient prior to hearing	47	87	134	51	190	241	57	226	283	
Persons whereabouts unknown / AWOL	0	0	0	0	14	14	0	0	0	
Person left NT	0	1	1	0	0	0	0	1	1	
CMO revoked by Mental Health Services	0	0	0	0	1	1	0	0	0	
Deceased during term of Order	0	0	0	0	0	0	0	0	0	
CMO Expired	0	0	0	1	1	2	0	0	0	
Other	0	2	0	1	20	20	1	3	4	
Total hearings cancelled	72	421	493	90	493	582	118	554	672	

Determined by Tribunal		2011	2012				2013										
Tribunai	ASP	DRW	Combin	ed ASP	DRW	Combi	ned	ASP	DRW	Combined							
Confirm	7101	DICW	Comoni	7151	DICVI	Comon	iica	7101	DICW	Comonica							
admission as	1	6	7	0	0	0		0	0	0							
voluntary										_							
patient																	
Order for																	
involuntary	28	234	262	48	187	235		49	178	227							
detention																	
mental illness																	
Order for																	
involuntary	2	6	8	3	8	11		2	6	8							
detention																	
mental																	
disturbance																	
Revoke																	
admission &	0	3	3	2	6	8		0	3	3							
order person be																	
discharged																	
from facility																	
Community																	
Management	12	117	129	15	236	251		22	230	252							
Order																	
Review report –																	
further action	1	0	1	0	2	2		0	0	0							
Review report –																	
no further	2	37	39	5	74	79		5	89	94							
action																	
Authorise																	
electro	1	25	26	0	35	35		1	22	23							
convulsive																	
therapy																	
Authorise non-																	
psychiatric	0	10	10	1	3	4		3	3	6							
treatment																	
Authorise			_	_		_											
major medical	0	2	2	0	0	0		0	0	0							
procedure																	
Warrant to			_	_				_	_	_							
apprehend a	2	4	6	0	0	0		2	5	7							
person for																	
assessment	1	2.4	2=	0	5.0			1.2	4.5								
Adjourned	1	34	35	8	56	64		12	45	57							
T	.	F 200		65	<i>(</i> 25)			0.5	F0:								
Total	50	538	588	82	607	689		96	581	677							
determinations																	
made																	

STATISTICS – OTHER

	2009	2010	2011	2012	2013
Percentage of matters scheduled where client was female	33%	37%	43%	40%	37%
Percentage of matters scheduled where client was male	67%	63%	57%	60%	63%
Percentage of matters scheduled where client was of Aboriginal or Torres strait Islander background	46%	51%	53%	68.5%	63%
Percentage of hearings conducted where Tribunal clients were legally represented	92%	98%	98%	100%	100%
Percentage of Tribunal clients under Adult Guardianship Orders	3%	3%	2%	2%	1.5%
Percentage of hearings conducted with an interpreter	25%	21%	5%	10%	14%

APPENDICES

Appendix 1: Tribunal Functions

The functions of the Tribunal are mostly contained in Part 15 of the Act, but with incidental provisions in other parts of the Act. Those functions are:-

- 1. To conduct periodic reviews of:-
 - 1.1 the admission and treatment of voluntary patients;
 - 1.2 the admission and treatment of involuntary patients;
 - 1.3 patients subject to involuntary treatment in the community.
- 2. To determine applications to administer:-
 - 2.1 non-standard treatment (such as ECT);
 - 2.2 non-psychiatric treatment;
 - 2.3 major medical procedures;
- 3. To hear reviews on request in relation to admission and treatment.
- 4. To review decisions regarding the withholding of certain information from patients.
- 5. To determine whether a person has capacity to give informed consent.
- 6. To determine applications for warrants to apprehend persons for assessment purposes.
- 7. To review reports submitted to the Tribunal and to give any necessary directions to the Chief Executive Officer of DoH.
- 9. To make orders with regard to transfers of patients to and from the Northern Territory.

Appendix 2: Operations of the Tribunal

• Continuing admission and treatment of long term voluntary patients (including prisoners).

The Tribunal may confirm the admission where it finds the person is able to give informed consent.

If the Tribunal finds that the person fulfils the criteria for involuntary admission it may determine that the person be detained on those grounds for a period not exceeding 3 months and fixes a date for further review.

If the Tribunal finds that the person meets the criteria for involuntary treatment in the community, it may make a CMO in relation to the person for no longer than six months. Prisoners may be made subject to a CMO whilst serving their sentence in prison.

Where the Tribunal makes an order for involuntary treatment it must authorise the treatment that may be administered under the order.

If the Tribunal is not satisfied that the person will benefit from continuing to be admitted as a voluntary patient, or does not fulfil the criteria for involuntary admission or involuntary treatment in the community, then it must order that the person be discharged. Prisoners will be discharged back to the prison if their sentence has not yet expired.

• Continuing admission and treatment of involuntary patients, and community management orders.

The Tribunal must conduct a review within 14 days from the date that a person is admitted as an involuntary patient on the grounds of mental illness or is placed on an interim CMO. The Tribunal has a timeframe of seven days to conduct a review from the date a person is admitted as an involuntary patient on the grounds of mental disturbance.

Following a review, if the Tribunal is satisfied that the person fulfils the criteria for admission on the grounds of mental illness, it may order that the person be detained as an involuntary patient on that basis for up to three months. It must also authorise the treatment that may be administered to the person during the term of the order.

If the Tribunal is satisfied that the person fulfils the criteria for admission on the grounds of mental disturbance, it may order that the person be detained as an involuntary patient on that basis for up to 14 days. Again, it must authorise the treatment that may be administered to the person during the term of the order.

If the Tribunal is satisfied that the person fulfils the criteria for involuntary treatment in the community, it may make a CMO in relation to the person for up to six months.

Where the Tribunal makes any of the aforesaid orders under any of the abovenamed criteria, it must fix a date for the order to be again reviewed and must then conduct a further review by that time.

If the Tribunal is not satisfied that a person fulfils either the criteria for admission as an involuntary patient or the criteria for involuntary treatment in the community, it must revoke the order admitting the person as an involuntary patient or revoke the interim CMO, as the case may be.

Where the Tribunal revokes an order it must then order that the person be immediately discharged, or discharged within seven days if arrangements need to be made for the patient's care.

Applications to administer non-standard or non-psychiatric treatment.

The Act provides that, except in the case of emergency treatment, the approval of the Tribunal or another specified person or body is required in order to administer any of the following treatments to involuntary patients:

- Non-psychiatric treatment, such as a surgical procedure;
- ➤ Major medical procedure;
- Clinical trials and experimental procedures;
- > Electro-convulsive therapy.

Sterilisation is not allowed to be performed on a person as a treatment for mental illness or mental disturbance.

The Act provides that psychosurgery and coma-therapy are prohibited in the Northern Territory irrespective of whether or not that treatment is intended to treat a mental condition.

Requests for reviews

A request may be made to the Tribunal to review the decisions made under the Act and listed in section 127.

Following such a review the Tribunal may:

- Affirm, vary or set aside the decision or order;
- Make any decision or order that the authorised psychiatric practitioner may have made:
- ➤ Refer the matter back to the authorised psychiatric practitioner for further consideration; or
- Make any other order it thinks fit.

A request may also be made to the Tribunal to review an admission or any order made under the Act, see section 123(4).

• Limitation on further reviews.

After conducting any review, the Tribunal may order that an application for another review in relation to the same matter may not be made before a date determined by the Tribunal.

• Determining capacity for informed consent.

The Tribunal must determine whether a person is capable of giving informed consent on application by an authorised psychiatric practitioner.

Assessment warrants

Following an application by a medical practitioner or an authorised psychiatric practitioner or a designated mental health practitioner or a member of the Police, the Tribunal may issue a warrant to apprehend a person where it is satisfied that:

- The person may be unable to care for himself or herself;
- ➤ The person may meet the criteria for involuntary admission on the grounds of mental illness or mental disturbance; and
- All other reasonable avenues to assess the person have been exhausted.

A warrant authorises the police to apprehend the person named in the warrant and to take them to an ATF for assessment to determine whether they are in need of treatment under the Act.

For the purposes of issuing a warrant to apprehend a person, the Tribunal may be constituted by the President, or by a Legal Member delegated to exercise the powers and perform the functions of the President.

Review of certain decisions of authorised psychiatric practitioners.

The Act provides that an authorised psychiatric practitioner must inform the Tribunal when it is decided that certain information about a patient's admission, treatment or discharge plan is to be withheld from the patient.

The Tribunal must review the decision and may either uphold the decision or substitute its own decision for that of the authorised psychiatric practitioner.

• Review of reports

The Tribunal must review a report forwarded to it under the Act as soon as is practicable.

Following the review, the Tribunal:

> may give a written direction to the Chief Executive Officer of DoH relating to a procedural matter, or an interpretation of the Act, in both cases arising out of the report; and

➤ where it considers that a person may be guilty of professional misconduct, must notify the relevant professional body.

• Interstate mental health orders and interstate transfer orders

The Tribunal has jurisdiction under the Act to make orders in relation to the transfer of persons subject to involuntary orders in and out of the Territory.

The Tribunal can only exercise its powers in these matters where intergovernment agreements exist between the Northern Territory and other jurisdictions. Presently, arrangements are only in place with South Australia.

Appeals

Appeals against decisions made by the Tribunal may be made to the Supreme Court in accordance with section 142 of the Act.

During the year there were two appeals to the Supreme Court by patients not happy with Community Management Orders; both appeals were discontinued after the doctors discharged the patients from care. It is to be noted that her Honour, Justice Judith Kelly opined that (perhaps) the rules of evidence applied at review hearings. This opinion, if correct, would greatly affect hearings. The need for expediency mixed with fairness has resulted in the President requesting the Act be changed to ensure that strict rules of evidence not be applied. An amendment to the Act along these lines is apparently forthcoming.

Appendix 3: Current Tribunal Members

Legal Members	Location	Appointment Term			
Mr David Bamber Mr Hugh Bradley Ms Ruth Brebner Mr Michael Carey Mr Greg Cavanagh Ms Meredith Day Ms Kathryn Ganley Mr Julian Johnson Ms Jodi Mather Mr Alasdair McGregor Ms Sarah McNamara Ms Sally Ozolins Ms Margaret Rischbieth Mr Richard Wallace Ms Anthony Whitelum	(Alice Springs) (Darwin) (Darwin) (Darwin) (Darwin) (Darwin) (Darwin) (Darwin) (Alice Springs) (Darwin) (Alice Springs) (Darwin) (Darwin) (Darwin) (Darwin) (Darwin) (Darwin) (Darwin) (Darwin) (Alice Springs)	27 June 2011 – 26 June 2014 31 January 2012 – 30 January 2015 6 November 2012 – 6 November 2015 27 June 2011 – 26 June 2014 26 June 2012 – 26 June 2015 6 November 2012 – 6 November 2015 6 November 2012 – 6 November 2015 31 January 2011 – 30 January 2014 6 November 2012 – 6 November 2015 31 January 2012 – 30 January 2015 8 April 2012 – 8 April 2015 6 November 2012 – 6 November 2015 22 July 2012 – 22 July 2015 31 January 2012 – 30 January 2015 6 November 2012 – 6 November 2015 6 November 2012 – 6 November 2015			
Medical Members Dr June Donsworth Prof Jim Greenwood Dr Janelle Miller	(Sydney) (Sydney) (Sydney)	7 April 2011 – 6 April 2014 31 January 2012 – 30 January 2015 7 April 2011 – 6 April 2014			
Dr Barbara Taylor Dr John Woodforde 30/6/2013	(Melbourne) (Sydney)	26 August 2013 – 26 August 2016 22 March 2012 – 7 April 2015 – Resigned			
Community Members					
Ms Cherie Castle Ms Barbara Curr Ms Jennie Guinane Ms Jill Huck Ms Suzi Kapetas Ms Patricia Kurnoth Ms Kim Lovatt Mr Paul Rysavy Ms Beth Walker Mr Don Zoellner	(Alice Springs) (Alice Springs) (Darwin) (Darwin) (Darwin) (Darwin) (Alice Springs) (Darwin) (Darwin) (Darwin) (Alice Springs)	23 August 2011 – 7 September 2014 14 December 2012 – 14 December 2015 22 March 2012 – 20 March 2015 31 January 2012 – 30 January 2015 7 April 2011 – 6 April 2014 29 February 2012 – 28 February 2015 31 March 2011 – 30 March 2014 26 August 2013 – 26 August 2016 31 January 2012 – 30 January 2015 27 June 2011 – 26 June 2014			

NORTHERN TERRITORY OF AUSTRALIA

THE LANDS, PLANNING AND MINING TRIBUNAL

ANNUAL REPORT

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FROM THE CHAIRPERSON

This is the thirteenth annual report provided by the Chairperson of the Lands, Planning and Mining Tribunal to the Minister, pursuant to section 38 of the *Lands, Planning and Mining Tribunal Act*.

I was appointed Chairperson of the Lands Planning and Mining Tribunal by the administrator on 3 July 2012. I appreciate the honour of the appointment and look forward to carrying out the duties of the office to the best of my abilities.

Section 38 (1) of the Act provides as follows:

The Chairperson must provide the Minister with a report on the performance of the Tribunal's functions and the exercise of the Tribunal's powers during each financial year not later than 3 months after the financial year.

The Report is divided into seven parts:

- The location and professional staff of the Tribunal
- The independence of the Tribunal
- The Jurisdiction of the Tribunal
- Recent legislative developments
- Financial statements
- The performance of the Tribunal's functions and exercise of its powers during the 2012 2013 financial year.

Mr Greg Cavanagh Chairperson of the Lands, Planning and Mining Tribunal

THE LOCATION AND PROFESSIONAL STAFF OF THE LANDS, PLANNING AND MINING TRIBUNAL

Location: 3rd Floor, Zone A, Nichols Place

Cnr Cavenagh and Bennett Streets Darwin

Postal Address: GPO Box 1281, Darwin NT

General Enquiries: Telephone: (08) 8999 5001

Facsimile: (08) 899 5005

Email: landsmining.tribunal@nt.gov.au

Website: http://www.nt.gov.au/justice/courtsupp/landplantrib/index.shtml

Chairperson: Mr Greg Cavanagh

Registrar: Mrs Susan Ahmat

Tribunal Manager Miss Cynthia Thompson

THE INDEPENDENCE OF THE TRIBUNAL

The Lands, Planning and Mining Tribunal is an independent statutory body established under the *Lands*, *Planning and Mining Tribunal Act*, which commenced on 1 August 1998. Section 8 of the *Lands*, *Planning and Mining Tribunal Act* provides:

In performing a function or exercising a power, the Tribunal is not subject to the direction of the Minister.

THE JURISDICTION OF THE LANDS, PLANNING AND MINING TRIBUNAL

Although the Tribunal has a potentially broad jurisdiction under section 5 of the *Lands, Planning and Mining Act,* the Tribunal has (usually) been exercising jurisdiction in the following areas:

- Hearing and determining planning appeals from decisions of the Development Consent Authority and;
- Hearing and making recommendations about objections to the acquisition of land under the *Lands Acquisition Act* by persons whose interests in land will be divested, modified or affected by acquisition.
- The Tribunal also has jurisdiction under the *Mineral Titles Act 2010*.
- As forecast in the last annual report, jurisdiction has devolved to the tribunal under the *Heritage Act* to review many of the decisions made pursuant to that Act.

RECENT LEGISLATIVE DEVELOPMENTS

Jurisdiction has been extended to the Tribunal in relation to Residential Building Consumer Protection disputes. On 23 November 2011, the Territory Government introduced the *Building Amendment (Registration and other matters) Bill 2011* and the *Building Amendment (Residential Building Consumer Protection) Bill 2011* in the Legislative Assembly. The two Bills were passed and then assented to on 27 April 2012; becoming Acts. They form a package that provides for consumer protection in the residential building market.

Commencement of the Acts was scheduled for 1 January 2013.

FINANCIAL STATEMENTS

Financial statements relevant to the operation and activities of the Tribunal during the last financial year form part of the Department of Attorney General-Justice Annual Report, and therefore there is no requirement to include such financial information in this report.

PERFORMANCE OF THE TRIBUNAL'S FUNCTIONS AND EXERCISE OF ITS POWERS DURING THE FINANCIAL YEAR 2012 - 2013

A. PLANNING ACT APPEALS

(1) The appellate process

The Lands, Planning and Mining Tribunal is established as the Appeals Tribunal for the purposes of hearing and determining appeals under Part 9 of the *Planning Act*.

Briefly stated, the processes involved in hearing and determining such appeals ear as follows.

The Tribunal is empowered to hear and determine the following appeals:

- Appeal against refusal to issue a development permit;
- Appeal if consent authority does not determine a development application;
- Appeal against refusal to extend period of a development application;
- Appeal against determination of a development application;
- Appeal against refusal to refund or remit a contribution;
- Appeal by third parties in respect of a development application.

The appeal process begins with the lodgement of a notice of appeal. As soon as practicable after a notice of appeal has been lodged the Registrar of the Lands, Planning and Mining Tribunal must fix a date, time and place for a conference between the parties. As soon as reasonably practicable after a notice of appeal has been lodged the Registrar must nominate a mediator to mediate and preside at a conference.

The objectives of the conference are to determine the matters in dispute between the parties and enable the parties to discuss their reasons for instigating or resisting the appeal, and where possible to settle or resolve the matters in dispute, without requiring the appeal to be heard and determined by the Tribunal.

If a conference has been held and compromise or settlement has not been reached the appellant may give notice to the Registrar that he or she wishes the matter to be heard by the tribunal.

After the giving of such notice the parties must make written submissions to the Tribunal. Following the receipt of such submissions, the Tribunal may, if it thinks fit, require a party or any person to appear before it and answer questions put to him or her by the Tribunal.

Following that process, the Tribunal must determine the appeal. The Tribunal must give written reasons for, and maintain a record of, its determinations.

(2) Statistical Data

(a) Statistics for the financial year 2010 – 2011						
Planning appeals outstanding as	4	LMT 98 2006 P				
at 30 June 2010		LMT 129 2012 P				
		LMT 130 2012 P				
		LMT 131 2010 P				
Planning appeals lodged	23	LMT 132 2010 P				
		LMT 133 2010 P				
		LMT 134 2010 P				
		LMT 135 2010 P				
		LMT 136 2010 P				
		LMT 137 2010 P				
		LMT 138 2010 P				
		LMT 139 2010 P				
		LMT 140 2010 P				
		LMT 141 2010 P				
		LMT 142 2010 P				
		LMT 143 2010 P				
		LMT 144 2010 P				
		LMT 145 2011 P				
		LMT 146 2011 P				
		LMT 147 2011 P				
		LMT 148 2011 P				
		LMT 149 2011 P				
		LMT 150 2011 P				

		LMT 151 2011 P
		LMT 152 2011 P
		LMT 153 2011 P
		LMT 154 2011 P
Planning appeals settled at	13	LMT 133 2010 P
mediation		LMT 134 2010 P
		LMT 139 2010 P
		LMT 142 2010 P
		LMT 143 2010 P
		LMT 144 2010 P
		LMT 146 2010 P
		LMT 147 2010 P
		LMT 148 2010 P
		LMT 149 2010 P
		LMT 150 2010 P
		LMT 151 2010 P
		LMT 152 2010 P
Planning appeals determined by	3	LMT 130 2010 P
the Tribunal		LMT 140 2010 P
		LMT 141 2010 P
Planning appeals outstanding as	8	LMT 98 2006 P
at 30 June 2011		LMT 132 2010 P
		LMT 135 2010 P
		LMT 136 2010 P
		LMT 137 2010 P
		LMT 138 2010 P
		LMT 145 2011 P
		LMT 153 2011 P
		LMT 154 2011 P

(b) Statistics for the financial year 2011 – 2012							
Planning appeals outstanding as	8	LMT 98 2006 P					
at 30 June 2011		LMT 132 2010 P					
		LMT 135 2010 P					
		LMT 136 2010 P					
		LMT 137 2010 P					
		LMT 138 2010 P					
		LMT 145 2011 P					
		LMT 153 2011 P					
		LMT 154 2011 P					
Planning appeals lodged	6	LMT 155 2011 P					
		LMT 156 2011 P					
		LMT 157 2011 P					
		LMT 158 2011 P					
		LMT 159 2011 P					
		LMT 160 2011 P					
Planning appeals settled at	5	LMT 154 2011 P					
mediation		LMT 155 2011 P					

		LMT 156 2011 P LMT 159 2011 p LMT 160 2011 P
Planning appeals determined by the Tribunal	7	LMT 132 2010 P LMT 135 2010 P LMT 136 2010 P LMT 137 2010 P LMT 138 2010 P LMT 145 2011 P LMT 153 2011 P
Planning appeals outstanding as at 30 June 2012	3	LMT 98 2006 P LMT 157 2011 P LMT 158 2011 P

(c) Statistics for the financial year 2012 – 2013			
Planning appeals outstanding as	3	LMT 98 2006 P	
at 30 June 2012		LMT 157 2011 P	
		LMT 158 2011 P	
Planning appeals lodged	4	LMT 161 2012 P	
		LMT 162 2012 P	
		LMT 163 2012 P	
		LMT 164 2012 P	
Planning appeals settled at	4	LMT 161 2012 P	
mediation		LMT 162 2012 P	
		LMT 163 2012 P	
		LMT 164 2012 P	
Planning appeals determined by	0		
the Tribunal			
Planning appeals outstanding as	0		
at 30 June 2013			

B. LAND ACQUISITION APPLICATIONS

(1) The Tribunal process

Very briefly, the process before the Tribunal is as follows.

Under the *Lands Acquisition Act* either the Minister or the person objecting to an acquisition may apply to the Tribunal to have the objection to the acquisition heard.

The Tribunal is empowered to make a recommendation in relation to the acquisition of land, and in making that recommendation the Tribunal must take into account all matters that it considers relevant. Before making a recommendation the Tribunal must inquire of the parties to the proceeding whether there are any issues, relevant ot its recommendation, in relation to which the parties have reached agreement; and if such

agreement has been reached and the parties consent to the Tribunal doing so, the Tribunal must (if relevant) take the agreement in account.

The Act provides that an objection may be withdrawn at any time by notice in writing to the Minister.

The Lands, Planning and Mining Tribunal Act also makes provision for the withdrawal of objections. Where an objection is withdrawn the Tribunal must not proceed to make a recommendation about the objection and must dismiss the referral of the objection.

The Tribunal also has the power to dismiss an objection to a compulsory acquisition under the *Lands Acquisition Act* by a person if, in the Tribunal's opinion, the objection is, inter alia, not on the ground that the compulsory acquisition would affect the person's interest in the land proposed to be acquired.

The Tribunal is given power under the *Lands, Planning and Mining Tribunal Act* to hear and make a recommendation about an objection ex parte.

(2) Statistical data

(a) Statistics for the financial year 2010 - 2011			
Land acquisition matters	0		
outstanding as at 30 June 2011			
Land acquisition applications	0		
filed			
Applications or objections	0		
withdrawn			
Interlocutory decisions	0		
Decisions after Tribunal hearing	0		
Decisions delivered exparte	0		
Matters settled by the parties	0		
Outstanding matters as at 30 June	1	LMT 58 2001 LA (N)	
2011			

(b) Statistics for the financial year 2011 - 2012			
Land acquisition matters	1		
outstanding as at 30 June 2012			
Land acquisition applications	0		
filed			
Applications or objections	0		
withdrawn			
Interlocutory decisions	0		
Decisions after Tribunal hearing	0		
Decisions delivered exparte	0		
Matters settled by the parties	0		
Outstanding matters as at 30 June	1	LMT 58 2001 LA (N)	
2012			

(c) Statistics for the financial year 2012 - 2013			
Land acquisition matters	0		
outstanding as at 30 June 2013			
Land acquisition applications	0		
filed			
Applications or objections	0		
withdrawn			
Interlocutory decisions	0		
Decisions after Tribunal hearing	0		
Decisions delivered exparte	0		
Matters settled by the parties	0		
Outstanding matters as at 30 June	1	LMT 58 2001 LA (N)	
2013			

For the reasons given in earlier Annual Reports, matter LMT 58 2001 LA (N) remains outstanding. There are ongoing settlement negotiations in relation to the matter, and the parties have continued to request to have the matter adjourned to facilitate those negotiations. It being preferable for the parties to negotiate a settlement, the Tribunal has acceded to the request and intends to adjourn the matter Sini die.

The number of new lodgements in the financial year 2012 - 2013 has not been great, however, I envisage a relatively significant increase in work for the Tribunal in the forthcoming year given the increases in jurisdiction.