

**ABUSE IN CARE ROYAL COMMISSION OF INQUIRY
LAKE ALICE CHILD AND ADOLESCENT UNIT INQUIRY HEARING**

Under The Inquiries Act 2013

In the matter of The Royal Commission of Inquiry into Historical Abuse in State Care and in the Care of Faith-based Institutions

Royal Commission: Judge Coral Shaw (Chair)
Ali'imua Sandra Alofivae
Mr Paul Gibson

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Mr Michael Heron QC for Dr Janice Wilson
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Mr Scott Brickell for Denis Hesseltine
Ms Anita Miller for the Medical Council

Venue: Level 2
Abuse in Care Royal Commission of Inquiry
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AUCKLAND

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1 evidence has been extremely useful, so thank you very much for taking the time and no
2 doubt the stress of coming along to do this.

3 A. To me it was most important to do.

4 Q. We're very grateful to you, thank you so much.

5 A. Thank you.

6 Q. We'll take an adjournment before the next witness?

7 **MS FINLAYSON-DAVIS:** Yes, thank you.

8 **Adjournment from 3.17 pm to 3.42 pm**

9 **CHAIR:** Good afternoon Ms Maltby.

10 **MS MALTBY:** Good afternoon. The next witness this afternoon is Michael Patrick Doolan.

11 **MICHAEL PATRICK DOOLAN**

12 **CHAIR:** Thank you. Good afternoon Mr Doolan, thank you for waiting patiently, you're the last
13 customer of the day. Can I just ask you to take the affirmation please.

14 A. Certainly.

15 Q. Do you solemnly, sincerely and truly declare and affirm that the evidence you give to the
16 Commission today will be the truth, the whole truth and nothing but the truth?

17 A. I do.

18 Q. Thank you very much. I'll just leave with you Ms Maltby.

19 **QUESTIONING BY MS MALTBY:** To confirm, your name is Michael Patrick Doolan?

20 A. Correct.

21 Q. What is your profession?

22 A. Well, I'm a social worker by profession, but I'm currently retired, I'm a registered social
23 worker, non-practising.

24 Q. Have you provided a written statement to the Royal Commission dated 27 May 2021?

25 A. Yes, I have.

26 Q. And you have that in front of you?

27 A. I do.

28 Q. Commissioners, I'm going to ask Mr Doolan to read or speak to parts of his statement and
29 take other parties as read.

30 **CHAIR:** Yes, thank you.

31 **QUESTIONING BY MS MALTBY CONTINUED:** Mr Doolan, turning to paragraphs 4 and 5,
32 could you please summarise your professional background and qualifications.

33 A. Certainly. I am a qualified social worker and my practices embrace field practice in both
34 Child Welfare services and in Māori and Island Affairs Services, in my early days, and also

1 the probation service. In DSW, I had a first appointment in DSW as assistant principal,
2 Hokio Beach School, for two years in 1972 and 1973. At the end of 1973, I was appointed
3 principal of Holdsworth School and I remained there until 1979 when I transferred as
4 principal, Kingslea School in Christchurch.

5 In 1984, I was appointed Director of Residential Services in the Department of
6 Social Welfare Head Office, and had oversight of residential services and practices and
7 policies, involving some 25 residential campuses and more than 150 community family
8 homes.

9 Following a restructure of the department, I was appointed Director of Youth and
10 Community Services in the mid 80s, a position which incorporated my current
11 responsibilities and added a lot more.

12 In that role, though, I had the distinct privilege really of being the lead policy
13 manager for the Youth Justice Provisions of the Children and Young Persons and Their
14 Families Act 1989. I retired from the position of chief social worker in the year 2001,
15 having had six years in that role, and following my retirement I've had 20 years of
16 contracting with various organisations to provide services, including extensive teaching
17 contracts overseas in a number of countries.

18 The interest in our family-centred decision-making approach is what generated
19 requests for me to work with authorities in other countries.

20 Q. In paragraph 6 and 7 you explain that your statement responds to a number of requests from
21 the Commission to answer questions or provide information and you set out what those
22 requests were and the documents that were or were not available to you. Could you please
23 summarise the requests and what your statement covers?

24 A. So in a letter dated 3 March, the Commission requested a statement from me regarding my
25 time as principal of Holdsworth school and the relationship between Holdsworth School
26 and the Lake Alice Child and Adolescent Unit. On 15 March 2021, I received a further
27 request to comment on several matters in the 1972 and '75 annual reports of the Lake Alice
28 Adolescent Unit.

29 On 19 March 2021, I received a further e-mail from the Royal Commission
30 requesting comment on matters arising and correspondence between the director of Social
31 Welfare Christchurch and the former principal of Holdsworth School, Mr Powierza.

32 On 15 April, I received an e-mail from the Royal Commission requesting
33 comment on a 1977 Commission of Inquiry and an Ombudsman's investigation in relation
34 to the admission of young persons to Lake Alice.

1 Q. Now if you can please turn to paragraph 8 and continue reading?

2 A. I'm attempting to recall events which occurred between 42 and 48 years ago and I'm
3 grateful for the Royal Commission's confirmation that they appreciate there will be limits to
4 my recall.

5 Q. Mr Doolan, just if I could ask you to speak slowly for the sign language interpreters?

6 A. Sorry, I'm an Irishman and I speak rather fast.

7 **CHAIR:** We all do. It's terrible discipline, I'm afraid.

8 A. So turning first to the Royal Commission's letter of 3 March, the Royal Commission asked
9 for my comments on 11 aspects of Holdsworth School and Lake Alice Unit operations and
10 I address each of these in turn under the headings that I will give. Firstly, they asked me to
11 spell out my responsibilities as principal of Holdsworth School.

12 Holdsworth School is one of five national residences maintained by DSW in the
13 1970s. Each national residence's principal reported directly to the department's Head
14 Office. The term "national" was used to distinguish these establishments created for
15 longer-term work with Children and Young Persons from district residences, such as boys
16 and girls homes, and reception centres, which were controlled through local District
17 Directors of Social Welfare.

18 National residence principals had controlling officer status within the Department
19 of Social Welfare alongside Directors of Social Welfare. Core responsibilities of the
20 principal were about ensuring a safe and purposeful environment for staff and residents,
21 monitoring the care and activity programmes of the institution, getting the right sort of staff
22 and ensuring that they were trained and supported, being a good employer generally,
23 maintaining higher-level relationships with partner services such as education, health,
24 psychological services, and Police, and overseeing the case work planning and reporting
25 process, and there were also lots of administrative requirements in relation to Head Office,
26 as you can imagine.

27 But finally, I was also acting as the face of the school externally in the community
28 and nationally.

29 The referral process for how State wards got to Holdsworth, or in fact any of the
30 national institutions.

31 Social workers who wished to place a child in a national institution submitted a
32 proposal to the department's Head Office. This was assessed by Head Office by specialised
33 case workers who were employed for this purpose. Such referrals did not come to the
34 residence first, nor did they require the residence's approval. The authority to approve

1 entry to a national institution rested with the director of social work in Head Office while,
2 interestingly, the authority to discharge a child rested with the principal of each residence.

3 I'm asked about consent requirements for State wards receiving psychiatric
4 treatment. I do not have any recall of the actual process for achieving admission of
5 Holdsworth boys to Lake Alice. You understand that all of those admissions to Lake Alice
6 took place before I took up my role as principal of Holdsworth.

7 I have no recall -- I do recall one admission in my time at Holdsworth which I'll
8 speak to later.

9 The referring social worker from the boy's home district would have been advised
10 of any proposals to seek psychiatric care and a social worker is responsible for
11 communicating this with the boy's family. There was no formal family or individual
12 consent process that I can recall.

13 Do I know anything about the use of electroconvulsive therapy as a form of
14 behavioural control? I had no clinical knowledge of electroconvulsive or ECT,
15 electroconvulsive therapy or proof that it was used at Lake Alice a form of behavioural
16 control, but I did have misgivings about the use of ECT at Lake Alice which I describe
17 below.

18 In addition to those misgivings, which I'll specify in a minute, I had reservations
19 anyway about the use of ECT with children.

20 Madam Chair, I have to say that I had at that time positive experiences of ECT
21 with adults, two adults of my own family, who are now deceased but who were rescued
22 from a life of severe depression through the use -- the proper use of ECT and that during
23 my own training as a social worker I spent time at the Department of Psychological
24 Medicine in Dunedin and witnessed the use of ECT with adult patients and I would have to
25 say that my experience of the process used and the recoveries that occurred are universally
26 positive. So I had no reason to be suspicious about ECT per se. My concerns were about
27 the age of the children to whom it was being administered.

28 The primary responsibility for monitoring the welfare of State wards and residents
29 rested with the principal, that was me. Referring social workers did visit from time to time,
30 as did family members. There were quite regular liaison and monitoring visits from Head
31 Office personnel, including the inspector responsible for Holdsworth, Mr Robin Wilson,
32 and the psychiatrist employed at Head Office in 1975, Dr Alan Frazer.

33 Holdsworth was an "open" residence with no locked spaces permitted. It was
34 open too to the community and locals did visit it on occasion, to suss us out in a sense,

1 because we were a novelty as far as they were concerned, they didn't really understand
2 what we were doing up there on the hill in St John's, and they were always made welcome.

3 Local Māori visited and on occasion helped to run programmes for boys in the
4 residence school, including kapa haka but also Māori history and Māori tikanga processes.

5 At some point at a date which I can't recall, but probably around 1977, official
6 visitors were appointed for all residences and visiting committees reported annually to the
7 Director-General of Social Welfare.

8 Just a few organisational issues. The assistant principal was responsible for the
9 daily programme and for case work management, while the actual work programme
10 delivery rested in the hands of housemasters and attendants, later known as residential and
11 assistant residential social workers.

12 In addition to their whole group duties, as Mr Watson has explained, each
13 housemaster and attendant had case work responsibilities for a small number of boys, no
14 more than five or six. Their responsibility was to form a close relationship with each of
15 their charges, to counsel and work with them, usually during school hours, on their areas of
16 behavioural and social difficulty; to liaise with the residence of school, we had a full
17 five-teacher, five-classroom school on the property; to maintain contact with the referring
18 social worker; and to manage the reporting processes about each boy to his home district
19 and to Head Office.

20 I'm asked whether I knew what the monitoring arrangements were in place by
21 Holdsworth when boys were placed at Lake Alice and I do not know.

22 **QUESTIONING BY MS MALTBY CONTINUED:** Just to clarify, were you asked in relation
23 to events happening before you arrived at Holdsworth?

24 A. Yes, yes.

25 Q. Please continue from paragraph 22.

26 A. Any child admitted to Holdsworth School, indeed any national institution either had to be
27 in the care and custody under the guardianship of the Director-General of Social Welfare by
28 orders of the Children and Young Persons Court or by way of a legal agreement with their
29 parents. In my experience, the vast majority of young people or children were under the
30 legal guardianship of the Director-General with two or three at any one time by way of
31 agreement.

32 Day-to-day reporting relating to the boys and the functioning of the residence was
33 recorded in the residence's day and night logbooks and in weekly reports from the residence
34 school, all of which were discussed at weekly staff meetings.

1 Formal reports in relation to each boy included his home district's approved
2 admission proposal, proposals for external or specialist services for any boy, six-monthly
3 progress reports by the residence to the home district and to Head Office, and a discharge
4 report which had been approved by the principal.

5 And finally, in relation to reports, I as the principal made a yearend report on the
6 operations of the residence to the Director-General of Social Welfare.

7 Q. From paragraph 26 you discuss whether you were aware of any complaints during the
8 1970s about young patients at the unit, and you referred to this earlier, and the Chair has
9 also asked the previous witness, Mr Watson, about this. So just in the light of that, if you
10 can continue reading from paragraph 26.

11 A. Well, while principal at Hokio Beach School in 1972 to '73, some boys were inpatients at
12 Lake Alice Adolescent Unit during that time and they told me what they experienced there,
13 although not in such graphic terms as I would consider constitute a complaint. I think the
14 boys told me that they felt sick and nauseous at times when they were treated and that they
15 definitely told me they received painful injections. But I do not recall precisely anything
16 much about ECT and I do not recall anything striking me as extraordinary, such as
17 treatment being used as a punishment.

18 On taking up my appointment at Holdsworth, however, I became aware of
19 concerns about Lake Alice Adolescent Unit from some Holdsworth staff members. The
20 concerns were mostly, as I recall, about sending boys there being a waste of time as the
21 treatment made no observable improvements to their function, was thought to be harsh and
22 seen to be counter-productive. Some felt ECT was used too readily and that an injection
23 given to boys to regulate their behaviour was painful for them. But I do note that there was
24 no consensus about this and some staff considered treatment at Lake Alice was helpful.

25 No-one in Holdsworth, including myself, had the clinical background on which to
26 judge the appropriateness of the treatment. However, I accepted that the raising of these
27 matters by staff was an indication of their concern for the boys and as set out later in this
28 statement, Holdsworth School ceased to rely on Lake Alice Hospital as a component of our
29 approach to behaviour management.

30 Q. When was it that Holdsworth stopped referring boys to Holdsworth -- to Lake Alice as a
31 form of behavioural management?

32 A. Well, there was no referrals made from the time I took up my appointment at the end of
33 1973. There's one exception, which I want to talk about later, in 1976, but that was for an
34 entirely different matter. The key point here is that I had no -- I could not accept that

1 psychiatric treatment was an appropriate response to behavioural management issues and so
2 I would never have brought that argument and so the use of a psychiatric facility as part of
3 our behaviour management approach struck me as being counter-intuitive.

4 Q. After the end of 1973, why might boys have been referred to Lake Alice?

5 A. I only know of one and I made the referral not to Lake Alice but to Dr Alan Frazer, the
6 psychiatrist who guided us in these matters from Head Office. It was in 1976, a young boy
7 who clearly not only had behavioural management issues but I thought had clinical issues
8 as well, even though I'm not qualified to diagnose those, I felt that they needed to be
9 diagnosed and I asked Dr Frazer for what the best arrangement, what best arrangement
10 could be made. It was two months later that he reported to me that he'd arranged the boy's
11 admission to Lake Alice Hospital. The boy went to Lake Alice Hospital for a reason quite
12 different or certainly not comparable to the reasons used in the earlier use of Lake Alice in
13 1972 and '73. The boy didn't return to Holdsworth School, I believe he went off to some
14 other placement after that.

15 Q. So if the boys weren't going for behavioural reasons, what was the reason, and if I can
16 direct you to the start of paragraph 28.

17 A. Well, any admission from 1974 would have been for medical as opposed to behavioural
18 management reasons and they would have to be recommended by a medical specialist not
19 connected with Lake Alice in any way, and I am certain that I would have been involved in
20 the decision-making process around such a case. As I say, the only case I'm aware of
21 occurred after I made submissions to Dr Frazer.

22 Q. In paragraph 29 you note that there are some statistics in the annual reports --

23 A. Yes.

24 Q. -- for Holdsworth School?

25 A. Sure.

26 Q. Could you please explain what those annual reports were and what they said about referrals
27 to Lake Alice?

28 A. Yes. I don't want this to sound self-serving. These statistics reflect a change of orientation
29 at the institution rather than any great heroic act, if I put it that way. So I note in the
30 statistical appendix to my annual report for 1973 that 13 boys were admitted to Lake Alice
31 Hospital during the course of that year with an average stay of 11.3 weeks and a range of
32 stay between 4 and 23 weeks. The same statistical reports for the years 1974 and '75 show
33 that there were no admissions to Lake Alice during those two years. The 1975 report stated
34 that this statistic would not be reported in further years indicating, I believe, that

1 Holdsworth's association with Lake Alice Adolescent Unit had effectively ceased.

2 Q. Turning to paragraph 30, in addition to speaking to the staff and speaking to the boys at
3 Hokio, were there any other reasons that you had misgivings about Lake Alice?

4 A. Well, apart from -- I suppose in response to the concerns that a number of staff brought to
5 my attention -- when you take up a new role in any establishment like that, you are
6 approached by people who want to put the thing right, and there were plenty at Holdsworth
7 who wanted to put things right. So it was in response to my own misgivings and the
8 uneasiness of some staff about the unit that I visited Lake Alice Hospital at some point
9 reasonably early in my tenure and I spoke with Dr Leeks.

10 I didn't make any judgments about the unit's treatment approach, that might sound
11 a bit cowardly, but I was only 30 years old at this point and this was an experienced
12 medical practitioner and I'm afraid to say that I wasn't prepared to tackle his treatment and
13 philosophy, I just didn't have the wherewithal and the grounds to do so.

14 He described his approach at some length and much of which I don't recall now,
15 and I think probably I don't recall them because I really wasn't interested in it. I did tell
16 him, I believe, that some boys had returned upset and frightened about the unit and that
17 overall staff did not rate the unit highly in relation to its effectiveness in bringing about
18 functional change or enhancing well-being.

19 I don't know whether I told Dr Leeks that I was myself concerned about the
20 treatment or practice orientation of Lake Alice or that I was considering not using the
21 service in the future. As principal I had control over referrals of boys to any external
22 services for which they were proposed by case workers or psychologists. And so the visit
23 was in part to ensure that I was informed before making the decision I did to cease the
24 routine use of Lake Alice as any aspect of our practice at Holdsworth.

25 Q. At paragraph 32 you talk about the change in practice approach at Holdsworth, which you
26 briefly mentioned in discussion a few moments ago. Could you please confirm what other
27 changes were made at Holdsworth at this time?

28 A. Sure. Holdsworth when I arrived, I took up my position focused on behaviour modification
29 as its principal method, particularly through its use of a Token Economy, which even --
30 I just learned today was the work of John Watson, I didn't know that. But in my view it
31 was a system that was managed by the assistant principal, Mr Drake. While Token
32 Economies are not inherently harmful, in my view they tend to result in a sort of coerced
33 short-term change to achieve reward and not any real insight or commitment to long-term
34 change in the way one functions.

1 This Token Economy approach was not part of my practice orientation. I believe
2 then as I do now that people only change when they consent to do so and that consent is
3 best fostered in the context of supporting, helping relationships.

4 I intended to move away from behaviour modification over time but I needed to
5 work for staff support and consent for that also. The Adolescent Unit, as I had experienced
6 it while at Hokio Beach School and as I understood Holdsworth had been using it, would
7 not have had a role in the way I wanted Holdsworth to operate.

8 The Token Economy was abandoned sometime in 1976 by which time staff were
9 equipped and ready to work the way I wanted them to -- behaviour management and
10 personal growth within the context of warm and supportive relationships and not by the
11 application of a system of rewards and punishments.

12 The 1977 annual report from Holdsworth records that over that year significant
13 changes took place, all of which led to the development of an atmosphere favourable to
14 children. This year was completely free of absconding, 27 having occurred in 1975 and 15
15 in 1976. And most of the time the institution operated in a purposeful but relaxed way with
16 staff and children interacting freely and with children engaging with staff in problem
17 resolution.

18 The report further noted that a stable and experienced staff team is developing
19 many skills in helping disturbed and difficult boys and in ways which do not require
20 repressive, regimented techniques.

21 Q. Mr Doolan, you've described what seems to be a fairly significant change in approach.
22 Was there much resistance from the staff when Holdsworth stopped referring boys to Lake
23 Alice?

24 A. None at all that I recall. Mr Drake had returned to Holdsworth School after a short absence
25 about the investigation that Mr Watson talked about, and remained until 1976 and he
26 embraced the change at that point too, he didn't insist on his way. So social workers, in
27 particular residential social workers, were very pleased to get away from the housemaster
28 image and the training centre image, and to work more on a relationship therapy basis. So
29 no, I didn't experience any kickback. I can remember that our planning sessions for the
30 new approach in 1976 were full of enthusiasm and hope.

31 **CHAIR:** Yes, I can see there is an issue of time. What's the allocation, Mr Molloy?

32 **MR MOLLOY:** I think probably another 10 minutes.

33 **CHAIR:** Another 10 minutes, okay.

34 **MS MALTBY:** If I can foreshadow here, a lot of the statement then goes on to answer questions

1 about Mr Watson's evidence and if it would suit the Commissioners we can take those parts
2 as read and speak again about matters directly within Mr Doolan's knowledge.

3 **CHAIR:** Yes, I think so. Mr Doolan, for your, I hope, relief, we have read this brief of evidence
4 carefully already so we are very familiar with what's in it. If you'd just like to highlight the
5 matters, Ms Maltby, that you feel you would like to in the next 10 minutes that would be
6 appreciated.

7 **QUESTIONING BY MS MALTBY CONTINUED:** Mr Doolan, if we can jump forward to
8 paragraph 64. Here the Royal Commission has asked you about the manner in which --
9 sorry, provisions under the Children and Young Persons Act that applied while you were
10 the principal. They asked: As head of several DSW residences in the 1970s, can you recall
11 whether the issue of psychiatric hospitals being excluded as places of residence for State
12 wards under the CYP Act was ever discussed?

13 A. I recall that there was a legislative amendment about that time to make it clear that
14 psychiatric hospitals were not included as a place of residence for a child under the
15 provisions of the Children, Young Persons and Their Families Act. And I don't think any
16 of us who were ever in practice ever thought they were. But that doesn't say that
17 psychiatric hospitals weren't appropriate places for treatment for psychiatric issues. I think
18 the clarification of the law was to ensure that social workers or anybody else in the
19 department did not assume that they had the authority of using the power of the Children,
20 Young Persons and Their Families Act that they had the authority to admit to such a place.
21 Does that answer your question?

22 Q. It does thank you. One final point that I might raise is we've discussed your annual reports
23 a few times today, and the Chair asked the previous witness about the proportion of Māori
24 in Holdsworth compared to Pākehā and perhaps other ethnicities. Would you like to
25 explain what your annual reports contained and whether they contain that information?

26 A. Yes, they do and I think the Commission has copies of those. There is a break-down of
27 Māori, Pasifika and Pākehā. I think Mr Watson's memory's not quite right, I think the
28 proportions of Māori were higher and when combined with Pasifika they were a majority
29 pretty much all through that time, but I'd need to go back to the reports themselves to be
30 clear about that. But there was certainly significant subpopulations of Pasifika and Māori
31 children.

32 Q. Thank you. If you could remain seated while Mr Molloy asks some questions.

33 **CHAIR:** Yes, Mr Molloy.

34 **QUESTIONING BY MR MOLLOY:** Mr Doolan, good afternoon, my name's Andrew Molloy

1 and I'm counsel with the Inquiry. If you'd been here yesterday you'd have heard me say a
2 couple of things. First is that we are immensely grateful to people who have contributed
3 for the fact that they have contributed. And the second is that we understand that it's not
4 easy for anyone to speak to a Commission like this, so I just wish to start on that note.

5 A. Thank you.

6 Q. The second thing is that I note that Mr Watson in his evidence indicated that in his view
7 anyway you had changed the culture at Holdsworth while you were there, so just to
8 acknowledge that and certainly the inference I drew from that, and I think that he intended,
9 was in a positive way.

10 A. Sure.

11 Q. I do have some questions for you, it's not a cross-examination, it's an examination, so I have
12 some questions not aiming to undermine or enhance anything you've said, but really just to
13 understand, if that's okay, if that makes sense. Some of it, I think is probably simply taking
14 you through some of the things that you've mentioned in your report.

15 The first is, I think, if we have a look at paragraph 8, and again, it's another
16 acknowledgment that these are events that took place a long time ago, so we're asking
17 questions in that understanding. You mention at 10 that as principal of a residence you
18 would have been expected to report directly to the department's Head Office?

19 A. I was not expected, I did report.

20 Q. Indeed, and on an annual basis or were there ad hoc reports?

21 A. No, no, Head Office was my controlling officer and Head Office had a number of divisions
22 that had some -- that had some right to be involved in relation to Holdsworth operations, so
23 we had social workers inspectors, we had obviously administrative and building staff and
24 so on who I would relate with.

25 Q. So it was an ongoing --

26 A. Yes.

27 Q. -- rolling reporting?

28 A. Yes.

29 Q. As well, presumably, as an annual report of some sort?

30 A. The annual report was really my summary of the year, and something that I would negotiate
31 with staff as well, I wouldn't report to Head Office without staff input on a matter like that,
32 but I had direct relationships with maybe a dozen managers in National Office about a
33 whole range of issues.

34 Q. Just moving on to paragraph 11, you outline a principal's core responsibilities. Would they

- 1 have been underpinned by the paramountcy principle that Mr Watson talked about?
- 2 A. Of course, all of our work was.
- 3 Q. Indeed. And of any Social Welfare department?
- 4 A. Yes, that's right. The paramountcy principle related to interventions, so any intervention
5 had to be consistent with best interests and welfare of the child.
- 6 Q. And at 13 to 15, I think you say you can't recall any formal family or individual consent
7 processes. So is it possible that children who had been admitted to a psychiatric unit from
8 the residence could have had treatment administered without parental knowledge or consent
9 potentially?
- 10 A. I think it's entirely probable. Unlike -- can I just mention that Mr Watson didn't seem to
11 know that there was a psychiatric nurse basically based at Holdsworth School, a nurse from
12 Lake Alice Hospital and that was the way that the referrals were made through Mr Drake
13 and the nurse who was -- he wasn't actually resident there but visited each week, it was a
14 practice I stopped, I just could not -- I couldn't accept that an institution like ours, a school
15 like ours should ally itself in such a way with a psychiatric hospital. We had appropriate
16 ways of achieving admission for psychiatric needs that didn't involve having somebody on
17 our property.
- 18 Q. Can I take you forward right to the end, it's something you mentioned a moment ago but it's
19 probably a good time to come back to it, it's at paragraph 65 of your statement.
- 20 A. Yes.
- 21 Q. So I think you might have directly alluded to it, it's the second sentence of that paragraph.
22 The specific exclusion of psychiatric hospitals as coming within the meaning of residences
23 under the Act, the change to that may have been made to make it clear that social workers
24 could not authorise admissions to such facilities --
- 25 A. Correct.
- 26 Q. -- acting under the authority of the CYF Act?
- 27 A. Correct.
- 28 Q. You say, "I would have regarded admissions to general hospitals in the same light"?
- 29 A. Correct.
- 30 Q. That's pretty much what the Ombudsman's report in 1977 was addressing. Do you
31 remember that, the Powles report, it was certainly one of the issues he was addressing?
- 32 A. It astonishes me that I was not involved in any of that reporting around 1977. I didn't know
33 until after they were finished that there was an Ombudsman investigation, and that there
34 was an inquiry into Lake Alice Hospital. Nobody thought to consult with us or even ask

1 our input.

2 Q. So thank you for that. Just come on then to paragraph 27 of your statement. And you're
3 talking there about a memorandum that you sent to Head Office in February, just take a
4 moment to orientate yourself again?

5 **CHAIR:** Sorry, which paragraph is that?

6 **QUESTIONING BY MR MOLLOY CONTINUED:** Paragraph 27, ma'am.

7 A. Yes.

8 Q. At the top of page 9 of your statement, I think you're quoting from the memorandum that
9 you sent?

10 A. Yes, I am.

11 Q. Look, I don't think we read it. Would you mind reading from everything within the
12 inverted commas, so from the top of the page down to the end of that paragraph?

13 A. May I give some context for this.

14 Q. Absolutely, please do.

15 A. I'm going to be somewhat embarrassed at this point, because in 1977 I recorded having
16 awarenesses about what was happening at Lake Alice that I do not recall having had when
17 I took up my responsibilities. But this particular document that you've referred to actually
18 speaks as though I did, so I'm going to read it to you in full and I can talk more about how
19 that context -- how that might have arisen.

20 In a memorandum to Head Office dated 8 February 1977 regarding a child who
21 was at Holdsworth before I took up my time there, I was asked to comment on a parents'
22 report to the National Office that their child had been subjected to ECT while at Lake
23 Alice. I was asked to comment on a matter that happened before I went there and I didn't
24 know the boy, but in -- five years later, this is what I had to say.

25 Q. Just before, I don't think you've named the boy in the letter, but just -- I just ask you not to
26 name the boy if that was a possibility.

27 A. "I have no doubts that the boy in question did receive ECT while at Lake Alice -- this
28 seemed to be routine at the time. I have no doubt that he perceived the administration of
29 ECT as a form of punishment. I had the same perception. As the assistant principal of
30 Hokio Beach School, I had a lot of contact with Lake Alice Unit. It was my clear
31 perception that ECT was administered to children held at the point of consciousness,
32 thought to be very effective with those children exhibiting explosive character disorders.
33 Nursing staff at the unit used the threat of ECT as a method of behavioural control and
34 Paraldehyde injections were used for similar reasons. It was because of these and other

- 1 misgivings that I had, that Holdsworth ceased the practice of referring lads to the Lake
2 Alice Hospital Adolescent Unit at the end of 1973.
- 3 Q. At (iii) you say Paraldehyde injections were used as a method of behavioural control. I just
4 want to flip you over to -- back to paragraph 26. You can take a moment to orientate
5 yourself. You're talking about previous experience while at Hokio as assistant principal,
6 and I'm looking around about halfway down that paragraph. And I think you say there -- I
7 think you've mentioned to us that you do recall boys expressing concern but not in the
8 context of a complaint?
- 9 A. Yes, that's right.
- 10 Q. They were just sort of -- it came up in passing for some reason.
- 11 A. I would say that by 1977 I realised enough of what had been going on there that I should
12 have taken it as a complaint.
- 13 Q. We'll just look at the extract in 26 and we'll come back to that in a moment. So you say,
14 "I do not recall anything striking me as extraordinary --
- 15 A. No.
- 16 Q. -- such as the treatment" -- and the treatment being talked about was receiving painful
17 injections?
- 18 A. Yes.
- 19 Q. "I don't recall anything striking me as extraordinary, such as receiving painful injections
20 being used as a punishment." So your clear view would be that receiving painful injections
21 as a punishment would certainly be extraordinary?
- 22 A. Definitely.
- 23 Q. So we're just coming back now to the memorandum that you wrote in February 1977.
24 Coming to (i) of your memo, "Children held at the point of consciousness"?
- 25 A. Can you tell me the number.
- 26 Q. Sorry, yes, we're back now to paragraph 27.
- 27 A. 27.
- 28 Q. We're at the top of page 9 of your statement, 8 it might be, not sure, there are two different
29 numbers. Top of the next page anyway.
- 30 A. Sure, I've got it.
- 31 Q. So it's part of your quote, this is part of the body of your memorandum.
- 32 A. Yes.
- 33 Q. The first subparagraph, which I think is (i).
- 34 A. Yes.

- 1 Q. "ECT was administered to children held at the point of consciousness." What do you mean
2 by that? What do you think you meant by that?
- 3 A. I think I meant by that the difference between modified and unmodified ECT treatment.
- 4 Q. Again, what do you mean by that?
- 5 A. Well, unmodified ECT treatment would involve a sedative or an anaesthetic, I believe, I'm
6 not a clinical person. Modified ECT would not involve that. So children would be
7 conscious while, or any patient would be conscious while it was administered.
- 8 Q. I think you say you've got some experience in a personal capacity of ECT. The impact
9 whether it's modified or unmodified. The impact of ECT is generally to render the patient
10 unconscious, isn't it?
- 11 A. It does, but if they're relaxed and helped to be relaxed before the treatment -- I think you've
12 had some graphic explanations of that this morning -- that there's less risk of bodily
13 damage.
- 14 Q. Nonetheless -- and we're coming back up to the paragraph above this now.
- 15 A. I'd have say in any ECT I was aware of, I never saw it in an unmodified form, I never ever
16 witnessed it.
- 17 Q. Just coming back to the paragraph above the subparagraph, so the substantive paragraph.
18 You've no doubt that the boy in question did receive ECT, seemed to be routine, you've no
19 doubt that he perceived the administration as a form of punishment, and you say you had
20 the same perception?
- 21 A. Yes.
- 22 Q. Help us with that.
- 23 A. Well, I was surprised to read in 2021 what I'd written in 1977. I'd always been told,
24 Madam Chair, I should be careful what I write because I might have a judge looking over
25 my shoulder.
- 26 **CHAIR:** It's come to pass.
- 27 A. It has come to pass. About my clear perception, I don't recall having such a clear
28 perception while at Hokio Beach and when I took up my position at Holdsworth I don't
29 believe I had a clear perception of those things. The context of the comments made over
30 four years later were, as I've explained, parents wanting some information about what the
31 boy was saying happened to him at Lake Alice, the Director-General asking me to
32 comment -- I didn't know this boy, this is a boy who'd been at Lake Alice prior to my time
33 there. Yes, that's right. I reflected on his claims in the light of everything I'd heard since
34 about the adolescent unit. I reported my reflections to the Director-General, perhaps more

1 forthrightly than I had a right to do. In looking back over it in the last couple of months as
2 I've been thinking about this, hoping that my motivations were that I wanted the boy's
3 experiences to be taken seriously and not dismissed as fantasy. That's the only possible
4 explanation I can give, I'm afraid.

5 **QUESTIONING BY MR MOLLOY CONTINUED:** So yesterday we heard from Hake Halo
6 and as I said before, I don't want you to name the boy referred to in this -- that you're
7 referring to here, but are you able to confirm that it was not Hake Halo?

8 A. I definitely can confirm that.

9 Q. So we're talking about another child?

10 A. We are.

11 Q. I'll explain the reason for my question. Yesterday, we also heard of a Commission of
12 Inquiry and also in 1977, like the Ombudsman report, by a Magistrate in Auckland?

13 A. Yes.

14 Q. And it was to do with Hake's case. Do you recall that inquiry?

15 A. No.

16 Q. So what I can tell you is that that inquiry was set in train at the end of January 1977.
17 Evidence was heard from about mid-February for a couple of weeks and a decision -- the
18 decision or the report of the Commissioner was published in about mid March. So I guess
19 my interest in the timing of this memorandum is the extent to which it matches up with the
20 timing of that inquiry.

21 A. I have no awareness of whether it did or not, certainly the inquiry you're talking about was
22 not on my radar at all.

23 Q. Is it likely that an inquiry of that nature --

24 A. I asked myself that same question, how did I miss it, why wasn't I involved? One would
25 have thought that -- is the man you're talking about a former Holdsworth --

26 Q. We'll come to that if we need to. I guess my interest is more in the department, I suppose.

27 A. Sure.

28 Q. So your Head Office, the Director-General in fact, is at the very top of the tree, I guess --

29 A. Sure.

30 Q. -- in the department, and he had written to you and solicited the memorandum that you
31 provided?

32 A. Sure.

33 Q. Out of concern about reports that a child previously in the care of your home --

34 A. No, in response to a parent's request for information.

- 1 Q. Indeed, okay. And so you provided that information --
- 2 A. Yes.
- 3 Q. -- to the best of your ability, and the impressions that you had at that time --
- 4 A. Yes.
- 5 Q. -- about what had been going on four years earlier?
- 6 A. The impressions that had grown on me by that time, yes.
- 7 Q. So the department, the head of the department was asking you for information about this?
- 8 A. Yes.
- 9 Q. Relevant to a complaint that a child had been admitted to Lake Alice and had received ECT
10 as punishment or electric shocks as punishment?
- 11 A. Mmm. I'm not sure -- "I had no doubt", yeah, okay. I'm not sure that the parents were
12 asking that so much as had he had ECT, I don't have the final papers, but they were
13 reporting his -- the boy's comments about what happened to him there, and they asked for
14 information about it.
- 15 Q. I guess the point is, you're then telling the Director-General --
- 16 A. Sure.
- 17 Q. -- of Social Welfare on 8 February 1977 that this boy did receive ECT while at Lake Alice?
- 18 A. I said I had no doubt that he did, I don't know that I confirmed that he did.
- 19 Q. Indeed -- I think -- yes, indeed.
- 20 A. I'm assuming that he would have had it, if he said he had it, and that had been happening to
21 boys who had been admitted there during that period.
- 22 Q. And that he perceived it as a form of punishment and at that time you had the same
23 impression?
- 24 A. You understand I never talked with the boy about this, this wasn't things that I had
25 discussed with him. They were positions that I'd arrived at some five years later about the
26 nature of the treatment of all of those kids that went through that regime.
- 27 Q. So when you provided that information to the Director-General, in your memorandum, did
28 you get any feedback?
- 29 A. No.
- 30 Q. One of the points that occurs to me is that -- and I'm not expecting you to know this, but in
31 his report the judge who was the Commissioner or at least the Commissioner, the
32 Magistrate who was the Commissioner, made a finding in connection with the boy he was
33 concerned about: "I am certain that ECT was not used at Lake Alice Hospital as a
34 punishment." And he made that finding on the basis of evidence that was placed before

- 1 him and that finding was in a report about six weeks after your memorandum to the
2 Director-General of Social Welfare.
- 3 A. **[Nods].**
- 4 Q. Now this is entirely conjecture and there's no way you can answer from your own
5 knowledge, but can I put as a proposition to you, is it reasonable to expect that if your
6 report had been made available to that Magistrate he might have had difficulty making that
7 kind of finding or at least he would have been put on notice that there might have been
8 other evidence to take into account?
- 9 A. So are you suggesting that DSW had this information before the inquiry and it wasn't made
10 available?
- 11 Q. Well, from the timing --
- 12 A. The timing?
- 13 Q. You've dated it 8 February?
- 14 A. I think it might have made a difference.
- 15 Q. And I think the judge or, sorry, the Magistrate, he became a judge, expressly said: "I do
16 believe that" -- he effectively said he didn't believe that the boy was making a genuine
17 complaint. And again, I suppose it's a question of conjecture, but is it reasonable to think
18 that if the judge had had your memorandum placed in front of him, it might have made him
19 pause before making that finding?
- 20 A. I think that had he been exposed to the numbers of reports that we became aware of
21 children who had had ECT at Lake Alice, that would be a difficult conclusion for him to
22 arrive at.
- 23 Q. But even more specific than that, the Director-General has solicited information from the
24 principal of one of his residences?
- 25 A. True.
- 26 Q. And you in your capacity as principal provided a very direct report?
- 27 A. He probably thought I was a prat to say something like that because -- and I think probably
28 I was, that's why I'm saying here I was probably more forthright than I had a right to be, but
29 nonetheless, I did it and I think by then I had arrived at the position that the boys had been
30 telling such a consistently same story that in all probability it was true.
- 31 Q. If the Director-General thought you were a prat, it doesn't seem to have had any impact
32 upon your subsequent career, does it? You seem to have -- it's a serious point, I mean, you
33 went on to do other things?
- 34 A. I did, I mean, it wasn't a career-changing event, but I could see it from their point of view.

1 Here is the youngest of the young Turks, if you like, the youngest principal that they had
2 really laying this on the line and maybe they had to make a judgment about how they saw
3 that in the context of other information they had. I don't know, I can't explain it nor can
4 I account for the way that they managed that.

5 Q. Had you ever made your views, those misgivings that you do express in that memo, did you
6 ever make them apparent to the principals of other institutions, other residential institutions
7 that may have sent boys to Lake Alice?

8 A. I don't think there would be -- apart from Kohitere and Hokio, I honestly can't remember.
9 But we did meet regularly, so the chances are that I did.

10 Q. Look, yesterday, I think, as might have been put to a previous witness, we had evidence
11 from a youth justice officer from the '70s, and you won't be in the hearing room when it
12 was mentioned, Tony Sutherland, who talked about visiting the school occasionally and he
13 used a word "inmates" about the boys. Looking back, can you understand the use of that
14 kind of word?

15 A. Yeah, it was a word in reasonably common use before that time. I don't think we at
16 Holdsworth referred to the boys as inmates, but the context here is that these national
17 institutions arose out of a long history that goes back to the industrial schools of the 1800s
18 and were called, right up to the time of the Children and Young Persons Act, I think in
19 1974, they were called training centres. So that tells you something about the sort of
20 philosophical understanding of why these places were there, they were there to train and in
21 that context words like "inmate" and so on are likely to arise. And -- but it's certainly not a
22 term that I would have associated with Holdsworth and I don't -- and I think -- I don't think
23 I met that man and I don't think that he was involved in Holdsworth School when I was
24 there. And if he did, he certainly didn't raise any matters with me.

25 Q. I just want to move on to a different subject now. I think if you want to have a look at your
26 statement at approximately paragraph 38, I think.

27 A. Yes.

28 Q. It's referring to the allegations about Mr Drake.

29 A. Yes.

30 Q. And I think you were informed at some point that an allegation had been made?

31 A. Yes.

32 Q. And came to the conclusion that clearly it had been resolved in Mr Drake's favour?

33 A. Sure.

34 Q. The allegation was of a sexual nature?

- 1 A. I understood so, yes.
- 2 Q. We've heard from Tyrone Marks today that he's had offers of compensation --
- 3 A. Sure.
- 4 Q. -- in respect of sexual offending against him by Mr Drake. Did that surprise you?
- 5 A. I hadn't heard it.
- 6 Q. Did it surprise you?
- 7 A. Not necessarily, no, I don't think so.
- 8 Q. Can you help me with that, what do you mean by that?
- 9 A. Well, I had -- I suppose I'm talking 40 years later, it doesn't surprise me because of what
- 10 I now know. But I didn't know that then.
- 11 Q. So what have you heard since then and how?
- 12 A. Well, what I've read in the Cooper Legal submission to this Inquiry for example. I learned
- 13 for the first time that there'd been other occasions of sexual misconduct charges against
- 14 Mr Drake -- other than the one that I did know of. Yeah, so by that time I was certainly
- 15 able to make that comment.
- 16 Q. Just bear with me one moment while I check my very scribbled notes because I don't want
- 17 to keep you here any longer than necessary. Mr Doolan, thank you, I have no further
- 18 questions for you.
- 19 A. Thank you.
- 20 **COMMISSIONER ALOFIVAE:** Mr Doolan, good afternoon.
- 21 A. Afternoon.
- 22 Q. Thank you, so in a similar vein, just a point of clarification, please. So Holdsworth was one
- 23 of five national residences but then out of the regions there were -- your district directors of
- 24 Social Welfare were responsible for the group homes.
- 25 A. And for the boys and girls homes, yeah.
- 26 Q. I'm really just after, please, some clarification, if you can. So there's a regional approach
- 27 and there's a national approach, so you're meeting with your counterparts of the other four
- 28 national residences?
- 29 A. Yes, we did, but no, we met as all principals together, all 26.
- 30 Q. So is it safe to assume that you'd be talking about common themes and practice standards?
- 31 A. Yes.
- 32 Q. And what comes out of those meetings just from your recall?
- 33 A. Well, really good things to be honest. If I can report one around the middle '70s, 1975,
- 34 1976, we took substantial steps to protect privacy of children by no longer censoring their

1 mail, incoming or outgoing mail, ensuring that they had unrestricted telephone access to
2 their families and on so on, things that we might today take for granted but they weren't
3 taken for granted in those days. So it was the meeting of the -- institution heads or
4 residence heads that we would look at our practice across all residences and try and arrive
5 at some point of standardisation if you like. That wasn't always possible because the
6 district institutions were much, much shorter term and were used for remand and short-term
7 care purposes, so quite different arrangements. But the philosophical basis or the practice
8 basis to residential care should have been the same across that whole complex, and in the
9 1980s we were able to achieve that after the Human Rights Commission report through the
10 development of practice standards and a code of conduct.

11 Q. Thank you. And so given what you've shared this afternoon in your evidence around Lake
12 Alice, could we assume also that there'd be discussions that would come up around referrals
13 to Lake Alice and the different practices perhaps across the residences?

14 A. I think there would only be three residences involved, and that would be Holdsworth,
15 before I went there, Hokio Beach School and Kohitere which are all in a very tight nucleus
16 of about 25 miles, radius really. And those three institutions had regular contacts with one
17 another. The principals would talk regularly and meet regularly.

18 Q. Would you then understand each other's referral processes to Lake Alice?

19 A. I wasn't a principal at that point so I don't know what those meetings involved. But I wasn't
20 supportive of the use of Lake Alice as an assistant principal, I didn't like seeing the boys
21 being sent there.

22 Q. You were supportive, sorry?

23 A. I was not. And I used to -- wherever I could, I would try to get the job of the escorter who
24 will drive them there and chat with them on the way, and I also liked to be the one who
25 brought them back. But it was the principal's authority, his role. But my going to
26 Holdsworth created a difference that I was going where I could influence practice and
27 I tried to do that.

28 Q. Just as a result of the memorandum that you wrote in February 1977, did it give you cause
29 to then go back and review perhaps the file of referrals that had been made to Lake Alice?

30 A. No, I didn't do that. There had been no referrals to Lake Alice during my time there.

31 Q. That's correct, but prior to that?

32 A. All those files were in National Office. In those days a personal file travelled, because
33 there was no computer systems, personal files travelled with the child, so when the child
34 left the institution, the personal file went back to wherever they were placed. But there was

1 a duplicate record of all personal files held in National Office, but there was none held at
2 the residences.

3 Q. Thank you very much for that.

4 **CHAIR:** Mr Doolan, much has been made by survivors, naturally, about accountability and that's
5 a very important aspect that I'd like to raise with you in terms of process as you've referred
6 to it. If I could just clarify and bring to light your evidence relating to admissions to
7 psychiatric hospitals --

8 A. Mmm-hmm.

9 Q. -- sought by social workers. And you've referred to it in two or three different parts. So,
10 first of all, there's paragraph 62, where you talk about the provisions of part J of the Social
11 Worker's Manual 1970 to 1984?

12 A. Yes.

13 Q. So that was the manual that was in force during this time that we're concerned about with
14 Lake Alice?

15 A. That's right.

16 Q. So in that you have the principal having the authority to seek informal admission?

17 A. That's right.

18 Q. Then there was a procedure?

19 A. Yes.

20 Q. Which looks to be reasonably thorough. So one, preparation of a case history, a
21 psychological examination, a psychiatric examination, and then consultation with a medical
22 superintendent?

23 A. Correct.

24 Q. Then you say that the arrangement the principal and the medical superintendent set in place
25 for Holdsworth may have been intended to smooth this process and make it less time
26 intensive.

27 A. I'm absolutely certain that was the purpose of it.

28 Q. You mean they didn't follow the policy?

29 A. Well, if they followed the policy they followed it in a different way than I would have
30 expected others to. The placement of a psychiatric nurse at Holdsworth was intended to, I
31 think, speed up that process set out in the manual, and would be a reason why it was an
32 unsupportable practice really.

33 Q. Yes. So, sorry, what did you call -- the placement of a psychiatric nurse, did you say?

34 A. There was a psychiatric nurse from Lake Alice --

- 1 Q. From Lake Alice.
- 2 A. -- who visited weekly.
- 3 Q. That person wasn't a psychologist.
- 4 A. No.
- 5 Q. And wasn't a psychiatrist, nor was that person a medical superintendent.
- 6 A. No, but they had access to all of those three.
- 7 Q. Do you know --
- 8 A. In ways that we perhaps didn't.
- 9 Q. Yes. Do you have any evidence, do you know, have you found out subsequently if in
10 relation to the admission of people like Tyrone and Rangı and Hake, whether or not that
11 process was followed, in terms of getting the examinations done and the consultations done
12 in a formal way, including the preparation of a case history?
- 13 A. Sure. That's a standard -- that should be standard practice. What I'm suggesting to you
14 here is that at Holdsworth School that was -- how would I put it?
- 15 Q. You've said smoothed out?
- 16 A. It was an attempt, I think, to do all of those things but in a much shorter timeframe and I
17 don't think that's safe practice.
- 18 Q. Yes, that's right. So when we then go back, there's also a reference to a Department of
19 Social Welfare controlling officer who I believe in this case would have been the principal,
20 is that right?
- 21 A. Whereabouts is that? In relation to the regulations or the manual?
- 22 Q. In paragraph 52 you say "The principal would not necessarily have sought DSW Head
23 Office approval to refer a child for psychiatric treatment, in my experience. He would have
24 had the authority, as a departmental controlling officer".
- 25 A. Yes. I think I was responding there to whether or not the principal had the authority to
26 arrive at this arrangement and I'm saying yes, he did, there would have been no reason for
27 that to be put to Head Office. It was an operational matter and I clearly think it was a
28 mistake, but that was certainly within his powers to do that. In relation to psych -- in
29 relation to proposals for admission to psychiatric hospital for treatment for psychiatric
30 disorders, that would be done on a case-by-case basis and should follow that process laid
31 out there.
- 32 Q. Yes. So is it the case that we have in this situation of these, at least these three who have
33 given evidence and more to come, is that because they weren't being admitted for medical
34 treatment, somehow there was no policy to cover?

- 1 A. I thought I tried to -- I'm not able to say I have first-hand experience of this, but my
2 understanding is that in 1971 and in 1972 the Holdsworth School management saw Lake
3 Alice as an integral part of their behavioural management process. Now that is not
4 psychiatric illness response.
- 5 Q. And, therefore, if we follow the manual as good public servants we ought, it wasn't an
6 informal admission for psychiatric treatment, therefore probably not covered by the
7 manual?
- 8 A. It probably wasn't, but it was certainly the expression given to that definition by Dr Leeks
9 and by the management at Holdsworth at the time that this did come within the context of
10 psychiatric treatment. I sharply diverge from that.
- 11 Q. Yes, thank you for that. And then in terms of who was involved with this, of course we
12 have Dr Leeks at the medical end, but we have two principals involved here, don't we? The
13 first one is Mr, I can't say his name very well.
- 14 A. Mr Powierza.
- 15 Q. Yes, he was the principal before Mr Drake became acting principal, is that right?
- 16 A. Correct.
- 17 Q. And I gather from your evidence that he was making referrals?
- 18 A. Mr Powierza? No, I don't think he did. I think that the operational concerns of the
19 residence, I had a very strong impression when I arrived there, were firmly and always had
20 been firmly in the hands of Mr Drake. That Mr Powierza, a very nice guy, affable,
21 everybody loved him, had a hands-off approach to much of the operational day-to-day
22 stuff.
- 23 Q. Okay. So let's be clear. What was his role in the school at this time? He was the principal?
- 24 A. He was the principal.
- 25 Q. And he handed -- and Mr Drake was the acting and therefore doing all this referral stuff?
- 26 A. No, no, Mr Drake was his assistant principal who had responsibility for the day-to-day
27 programme and the case work management, so that was a function assigned to him,
28 delegated to him.
- 29 Q. Yes, I see.
- 30 A. In my case, when I went as principal, with an assistant principal, I wouldn't delegate those
31 sorts of decisions. That's the difference.
- 32 Q. That's really where I'm going, yes.
- 33 A. That's a judgment call and it's a judgment for me that was based on qualification,
34 experience, and remember that in those days we were largely an untrained workforce. I

- 1 think when I went to Holdsworth School I was the only qualified practitioner on the
2 property. I think Mr Powierza might have been as well, but qualifications for residential
3 workers were very, very slow. So those sorts of things could happen by untrained people,
4 unqualified people making those sorts of decisions.
- 5 Q. And in hindsight it's obvious that delegation of that very important and serious matter to an
6 untrained person was probably not the best delegation.
- 7 A. Yes, whether it was a formal delegation or whether it was just the way that things
8 happened, I don't know. Residences were different, they're not like a social work office,
9 they're a total 24-hour living environment, and so things were managed by arrangement.
- 10 Q. By arrangement.
- 11 A. When it was best to do certain things.
- 12 Q. And just finally, and slightly related, it's the question of consent, and I know that you've
13 expressed your views about that. But you have said in paragraph 14 that the referring
14 social worker from the boy's home district would have been advised of any proposals to
15 seek psychiatric care and the social worker was responsible for communicating with the
16 boy's family?
- 17 A. Sure, that's correct. Does the Commission know that Holdsworth School took boys from
18 all around the country, so it was the only residence for that age group that we had. So
19 children came from the far north to the far south, and there was no way that social workers
20 could visit us or we visit them basically. Social workers came at times when boys were
21 being admitted and often brought them back from holiday, so we got to chat with them.
22 But the primary relationship between the family and the department was with the field
23 social worker not with the residential social worker. We did get involved of course,
24 families would write to us or they would ring us or they would even visit from time to time.
25 But the formal relationship was principal to district and district to family.
- 26 Q. So whilst you've said in para 14 what should have happened, it sounds from the evidence
27 that it wasn't happening, that referrals to psychiatric care --
- 28 A. Yes, probably -- you see, I think this streamlined process or whatever one might like to call
29 a streamlined process, it's quite probable that field social workers were only advised of the
30 admission rather than the proposal.
- 31 Q. So after the event?
- 32 A. After the event. So basically it then becomes an information report to the parents rather
33 than a consent arrangement. That would not be tolerable, acceptable practice today.
- 34 Q. Do you think it was acceptable practice in the '70s?

- 1 A. It reflected the nature of the terrain if you like, how do we do this when children and
2 families are scattered throughout the whole country and there was just a small group of us
3 in Whanganui.
- 4 Q. Mr -- this is really the end of my questions -- Mr Watson raised an interesting question,
5 because he was asked also about consent and he said that he had a question which he
6 couldn't answer and maybe you can. That was that once a child isn't under the guardianship
7 of the Director of Social Welfare, etc, then there's no need to ask, it may be there is no need
8 to ask consent of the parents. Do you have a view or knowledge of this?
- 9 A. I think that's probably -- that's probably taking the legal status to a wrong conclusion.
- 10 Q. In fairness to him he was just musing on the topic, he didn't have a view, he just raised it as
11 an issue.
- 12 A. I'm not talking about Mr Watson. I think in those days that might have been quite a
13 pervasive view that the Director-General has guardianship, we are the Director-General's
14 agents and we will make those decisions and simply inform. And that's, as I say, would not
15 be tolerable today but in the context of 50 years ago, I'm not able to say whether it was
16 tolerable or not. It seems to have been largely accepted, I'd have to say. If the same
17 operation was running today and the same things were happening, I cannot imagine for the
18 life of me that families would put up with just being informed.
- 19 Q. If at all.
- 20 A. If at all. Well, and finding out from their child --
- 21 Q. There's no question that at that time, anyway, the parents were not involved with any
22 decisions about --
- 23 A. I can't say that. In some cases a social worker may well have done a really good job in that
24 area, in others it might have been an ex-post facto advice, I can't tell you. I generally think
25 that social workers did do a good job in liaising with families and keeping us informed
26 about family issues and we kept them informed about issues with the child in residence.
27 So, generally, I think that practice was okay. But if it was to -- if I was to be asked, did it
28 contain a formal consent process, then the answer would be no, it did not.
- 29 Q. Which is a good note for me to end on. Did you wish to ask anything arising, Mr Molloy?
- 30 **MR MOLLOY:** No, I'm just reminded Ms Joychild did seek leave and was granted leave to ask a
31 couple of questions. And then I do have one housekeeping matter.
- 32 **CHAIR:** Ms Joychild, do you have any questions?
- 33 **QUESTIONING BY MS JOYCHILD:** I do, just a couple, Mr Doolan. At paragraph 38, when
34 you got to Holdsworth as principal, you were told that there'd been an investigation into

- 1 Mr Drake and that he'd been exonerated, I think were the words you used.
- 2 A. Not sustained.
- 3 Q. Sorry?
- 4 A. I didn't use exonerated, I used the complaint against him was not sustained.
- 5 Q. Yes. So what do you think was the nature of the investigation? Did you know?
- 6 A. I have no idea.
- 7 Q. So have you any idea what might have been the nature of the investigation?
- 8 A. None at all.
- 9 Q. So how did you, once you were principal, weed out people, who were coming to be
10 employed to work with boys, who may have been paedophiles? Was there a process for
11 that?
- 12 A. My goodness, what a question. Generally when one's interviewing for staff you're looking
13 for the right values and the right sorts of understandings, the right concepts. I don't think
14 I would have ever asked a person whether they were a paedophile and I don't think, if I did,
15 they would have answered me truthfully, and probably that wouldn't have been very useful.
16 So I just don't have a way of answering that really, sensibly.
- 17 Q. So did the department not have a record or a list of housemasters --
- 18 A. We did police checks, police checks were part of the appointment process, and it was
19 police -- it was a police intelligence as well as police records of convictions, so it was a bit
20 wider than just is there a conviction here.
- 21 Q. So when complaints were made against Mr Drake, so I realise you don't know quite what
22 happened, but the Police were presumably involved, would you have expected them to be
23 involved?
- 24 A. As I understand it, the matter was taken over by the Director of Residential Services,
25 National Office. What his process was I have absolutely no knowledge of. Personally, if it
26 was me, I would venture yes, this is a criminal offence so the Police would be involved. I
27 don't know that they weren't. There was some -- was there not some report back from the
28 Police I heard this morning that they may have been involved?
- 29 Q. Right, I don't know about in this particular instance that you're talking about.
- 30 A. If there's any question of, as happened at Hokio Beach School, a boy there complained, the
31 Police were notified immediately. There's no question that we would cover up anything
32 like that or want to.
- 33 Q. Right. Well, given that Mr Drake was a sexual offender who offended against a lot of boys,
34 what do you think about the quality of the Police and the Department investigation?

- 1 A. Well, I'm not sure the fact that he had offended was known at that time. I didn't know
2 about it. Mr Watson didn't seem to know that Mr Drake returned to the institution and took
3 up his position as assistant principal shortly after I took up mine as principal and remained
4 for a further three years. So that couldn't have been allowed had it -- had events been
5 investigated and not sustained as I said, in my view.
- 6 Q. Not an attack on you personally at all, but surely it was an extremely shonky investigation?
- 7 A. I don't know.
- 8 Q. Well, it didn't flush him out.
- 9 A. Well, how am I supposed to respond to that? I was a young controlling officer taking up
10 my first controlling position, my Head Office controller had told me that the matter had
11 been investigated and determined that I was not to concern myself about it further.
- 12 Q. I understand that Mr -- Mr ...
- 13 A. Doolan.
- 14 Q. Yeah, it's nothing about you, it's just looking back now 50 years later.
- 15 A. Of course.
- 16 Q. I mean, how do you feel about the fact that there's been so much sexual abuse from
17 housemasters and others that had been reported and the department seemingly doing
18 nothing about it?
- 19 A. Yeah.
- 20 Q. I'm asking for your personal view now.
- 21 A. I think -- I don't -- I think that sexual abuse in those circumstances in departmental
22 institutions and schools and other settings certainly wasn't large on the radar in those years.
23 In fact, as a field worker I don't think field workers at that time were trained to recognise
24 signs of disturbance and so on as originating from sexual abuse within their families, for
25 example. So it wasn't until later in the 1970s and the 1980s that the department developed
26 a policy about actually every referral -- the possibility of sexual offending being examined.
27 In other words, you don't avoid it, you don't not talk about it, but you actually just
28 fundamentally see it as one of the options that you need to discount. So that's much later
29 practice, '80s and '90s really.
- 30 Q. So in the '70s we've had this catastrophic destruction of young men's psyches and life
31 potential, when in the care of the department. What do you think the department should be
32 doing about that now?
- 33 A. Well, I think they are doing things about it now. As I tried to explain, we have a, what's
34 called a SATCAT policy with the Police, for example, developed during the 1990s.

1 Q. What about the boys in the '70s?

2 **CHAIR:** The question being, what are you doing about the survivors from the '70s?

3 **QUESTIONING BY MS JOYCHILD CONTINUED:** Yes, really.

4 A. Well, I don't know, I'm not a departmental employee, I haven't been for 20 years.

5 Q. No, I just thought with your expertise, which is quite considerable, you might be able to
6 give us some ideas about what could happen now for these men whose lives have been
7 destroyed by this tremendous under --

8 A. Well, I'm seriously hoping that's something the Royal Commission is going to turn its mind
9 to, I think that's the purpose of having a Royal Commission, how is this to be put right 50
10 years after the event.

11 Q. Thank you. That's all I've got to say.

12 **CHAIR:** Thank you for landing it squarely back with us. Mr Molloy, you had a housekeeping
13 matter?

14 **MR MOLLOY:** Ma'am, thank you, just to remind you tomorrow we have an early start, 9.30.

15 **CHAIR:** Before we finish I'm going to ask Mr Gibson.

16 **COMMISSIONER GIBSON:** Thanks, Mr Doolan, Mike, for coming here around speaking and
17 sharing your evidence, your truth from many years back. We know it's a lot of time and
18 energy and work getting to this point and also thanks for your many years of public service
19 as well, kia ora thanks for coming today.

20 **CHAIR:** On that note we will end and we will invite our kaikarakia, kaiwaiata.

21 **Hearing closes with waiata and karakia mutunga by Ngāti Whātua Ōrākei**

22 **Hearing adjourned at 5.11 pm to Wednesday, 16 June 2021 at 9.30 am**

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