

IN THE CORONERS COURT
AT CHRISTCHURCH
(IN-CHAMBERS)

CSU-2019-CCH-000165 to
CSU-2019-CCH 000214;
CSU-2019-CCH-000326

I TE KŌTI KAITIROTIRO MATEWHAWHATI
KI TE ŌTAUTAHI
[I TE TARI]

UNDER

THE CORONERS ACT 2006

AND

IN THE MATTER OF

**Inquiries into the deaths of 51
people in relation to the 15 March
2019 Christchurch Masjid Attacks**

Date of Minute: 8 March 2022

**MINUTE OF CORONER B WINDLEY AS TO
GENERAL INFORMATION DISCLOSURE NO. 1**

Background to information disclosure approach

- [1] Between 22 – 24 February 2022 I heard oral submissions from Interested Parties who had indicated a wish to speak to the written submissions they had filed relating to the scope of the issues for determination in this Inquiry (**Scope Hearing**).
- [2] During the Scope Hearing a number of Interested Parties emphasised concerns that they have not yet been provided with the underlying source documents referred to in reports and information responses that have previously been made available to them. This includes the source documents that underpin the *Police: Compiled Response to Broader Issues – Police Response* document, and the source documents provided to Dr John Hick to complete his expert report.
- [3] The staged approach taken to information disclosure to date in this Inquiry was explained in my Minute of 2 December 2021 (**December Minute**).¹ As set out in the December Minute, the approach to date has been that information disclosure

¹ At paragraphs [22] and [38] – [43].

has been provided in response to *specific* requests from counsel or Interested Parties, rather than on an unsolicited basis. Specificity was needed in an attempt to focus overly broad information requests. The approach also reflected the highly distressing nature of the material and sought to recognise the risk of re-traumatisation for those who did not wish to receive the information disclosure. This has been a particular concern for unrepresented Interested Parties.

- [4] In addition, recognising the stage the Inquiry was at ahead of the Scope Hearing, and the need to progress the issues for inquiry in a timely way, the December Minute also indicated that requests for information would be prioritised on a time sensitive basis. This meant that information disclosure concerning issues already identified as provisionally “In Scope” would be provided to Interested Parties in the next substantive inquiry phase but was not considered to be acutely time sensitive.²
- [5] Despite the intention behind the “information response” category adopted by Judge Marshall in her 28 October 2021 Minute, and the reasons for the approach to information disclosure as set out in the December Minute, a number of Interested Parties have asked me to ‘pause and reset’ the disclosure approach. I have been alerted to concerns that the approach taken has been taken to mean that access to information was being prevented altogether, and that in the context of the limited information made available in the course of the criminal proceedings and the Royal Commission of Inquiry, this has been a source of particular distress to some families. I indicated at the conclusion of the Scope Hearing that it was my intention to revisit and address the information disclosure process as a matter of priority. This Minute is the first step to achieving that.

Information disclosure approach going forward

- [6] As set out from paragraph [20] below the information outlined in this Minute will be provided to all counsel and unrepresented organisations with Interested Party status without the need for a further information request. The same information will be available to people who are *unrepresented* Interested Parties but on request only. People who are unrepresented Interested Parties can request the information outlined in this Minute by directing a request by email to coronial.response@justice.govt.nz.
- [7] Given that the substantive inquiry phase is yet to be embarked upon the information disclosure captured in this Minute necessarily does not comprise all information that is or will ultimately be available. Nor, as I have previously indicated, is it intended as a substitute for an inquest bundle which will be prepared

² At paragraph [22]. This was because the Interested Parties appeared to agree that the issues that had provisionally been designated as “In Scope”, should remain issues In Scope in the Inquiry. This remained the position during the Scope Hearing, subject only to some submissions that the parameters of certain “In Scope” issues could be further refined.

in the usual way in due course in the event I decide to convene an inquest hearing into any of the issues I ultimately decide are within scope.

- [8] As will become evident from the review of the information disclosure associated with this Minute, the vast majority³ relates to issues that are either provisionally In Scope, or an issue which I discussed at the Scope Hearing as being one that could be considered to naturally align with an In Scope issue.

No further submissions on scope are sought

- [9] I now have the benefit of having received extensive written and oral submissions from the Interested Parties on each of the issues listed in Appendix A to Judge Marshall's Minute of 28 October 2021. I fully expect the issues I ultimately decide to inquire into will require further refinement as the substantive inquiry phase is worked through. With that latitude in mind, for present purposes no further written submissions on scope are sought in the absence of leave being granted.⁴

Disclosure now available

- [10] The following disclosure is now available to all Interested Parties:

- [11] **Police disclosure:** *Compiled Response to Broader Issues – Police Response*, dated 15 December 2021 in relation to the following issues:

Issue No.	Issue
11	Did the individual have direct assistance from another person present on 15 March 2019?
12	The Police allegedly reported the involvement of up to 9 other people initially. Did this indicate multiple shooters?
13	Were fingerprints or DNA taken from all firearms located at the scene?
14	Did the individual have a hiding place on standby for after the attack?
15	Did the individual have indirect support from online associates?
16	Did the individual's gaming friend help with gun modifications?

³ For example, information disclosure provided under this Minute about online activity is not responsive to an issue that was proposed to be in-scope in the 28 October 2021 Minute of Judge Marshall.

⁴ Further written submissions have been received from Ms Toohey who was given leave to file written submissions on scope with respect to an additional Interested Party who had very recently instructed her. Similarly, having only been recently instructed Dr Bastani was given leave to file written submissions on scope on behalf of his clients by 3 March 2022. No additional written submissions have been received from Dr Bastani.

17	Where did the individual obtain steroids when preparing for attack?
18	Where did the individual stay overnight on his route back from Christchurch to Dunedin after his final surveillance mission to Masjid an-Nur?
31	Could traffic CCTV have assisted in apprehending the individual before he reached Linwood Islamic Centre?
33	Whether Police “allowed” the individual to escape?
34	Could police have stopped the individual on the way to the Linwood Islamic Centre?
35	Did high activity congestion on the emergency 111 line contribute to early calls from the Linwood Islamic Centre being missed?
36	When and how was Christchurch Hospital notified of the attack?
37	Were there any issues with role and processes of hospital following the attack/during the immediate response?
38	Did CDHB appropriately activate and use emergency polices?
39	Was there coordination in preparing to respond to a terrorist attack and coordination of emergency services?
40	What is the reason for discrepancies between time of death and mobile communications?
41	What is the reason for inconsistencies in the timeline of the shootings?
42	Not all families have been given information such as the DVI post mortem report.
43	Families have made information requests which have been refused or not answered.
55	Have there been any internal reviews of the response to the attack?

[12] Police investigation source documents/material to the above:

- (a) **Issue 11** - Online investigation bundle documents - 6735, 6736, 6737, 6738, 6739, 6740, 6741, 6742, 6743, 6744; Family and friends’ statements (524, 523, 1809, 1811, 0756, & 2670); Document 6153 (Fingerprint analysis); Document 6156 (Fingerprint results schedule); Documents 4763 & 5345 (DNA and blood samples); Document 2710 (exhibits transfer to ESR)
- (b) **Issue 12** - Document 2132 (Radio Transmission summary from Police Radio “Channel 1”), Document 2554 (Transcript for Police Radio “Channel 1”), Online investigation bundle documents: 6735, 6736, 6737, 6738, 6739, 6740, 6741, 6742, 6743, 6744;

- (c) **Issue 13** - Document 6153 (Fingerprint analysis); Document 6156 (Fingerprint results schedule); Documents 4763 & 5345 (DNA and blood samples); Document 2710 (exhibits transfer to ESR);
- (d) **Issue 14** - Online activity documents: 6735, 6736, 6737, 6738, 6739, 6740, 6741, 6742, 6743, 6744, Friends and family statements: 524, 523, 1809, 1811, 0756, & 2670), Document 2003 – email to Parliamentary Services and posts to family prior to the attack, Document 203 – Job sheet from analysis of individual’s phone;
- (e) **Issue 15** - Online investigation bundle documents: 6735, 6736, 6737, 6738, 6739, 6740, 6741, 6742, 6743, 6744;
- (f) **Issue 16** - Documents (524, 523, 1809, 1811, 0756, & 2670), which are statements and/or recorded interviews of family and friends;
- (g) **Issue 18** - Documents 0726, 6739, 3093, 2992, 2718, 2669
- (h) **Issue 31** - First response timeline, Documents 2554 (Transcript for Police Radio “Channel 1”); 2132 (Radio Transmission summary from Police Radio “Channel 1”); and 02918 (Formal statement of police first responder to Masjid an-Nur).
- (i) **Issue 31** - CCTV document 3073 (screen shots from all relevant Canterbury crimes cameras), First Response Timeline, Document 2703 (Formal statement regarding coordination of Armed Offender’s response), Document 2554 (Transcript for Police Radio “Channel 1”), and 2132 (Radio Transmission summary from Police Radio “Channel 1”)
- (j) **Issue 34** - First Response Timeline, Documents 2554 (Transcript for Police Radio “Channel 1”), 2132 (radio transmission from Police Radio “Channel 1) and 02918 (Formal statement from first responder (police));
- (k) **Issue 35** - Document 2236 (CCTV screenshots showing first police arrival at the Linwood Islamic Centre), 02554 (Transcript for Police Radio “Channel 1”), 02633 (formal statement of responding officer approached about Linwood shooting (police)), 02132 (radio transmission from Police Radio “Channel 1), 3066 (formal statement of responding officer (police);
- (l) **Issue 37** - Statement of ED specialist (5637), Statement of Dr John Hick
- (m) **Issue 38** - Statement of ED specialist (5637), Statement of Dr John Hick;

- (n) **Issue 39** - Statement of Christchurch ED specialist, statement of Dr John Hick, Hospital Major Incident Plan, St John Mass Casualty Policy;
- (o) **Issue 40** - Report of Dr Martin Sage (5681) and statement Dr John Hick;
- (p) **Issue 41** - First Response Timeline
- (q) **Issue 55** - Operation Deans – The first 48 hours (police report);

[13] **Canterbury District Health Board (CDHB)** - response to s 120 Coroners Act 2006 notice requesting:

- (a) **Issue 36** – When and how was Christchurch Hospital notified of the attack? Is it correct that Christchurch Hospital’s first knowledge of the shootings was two men arriving on foot from Masjid an-Nur? If so, why was the Hospital not notified sooner?
- (b) **Issue 37** – Were there any issues with role and processes of the Christchurch Hospital following attack/during immediate response? Specifically:
 - i. What information was shared between the CDHB, the Police and the ambulance service after the shootings were notified?
 - ii. Was there any communication with the Christchurch hospital in terms of criteria/tests for deciding death or for trying to save lives?
 - iii. Could any hospital services have been performed at the Mosque to save lives?
 - iv. What happened on the day? Did people know what they were doing? Could lives have been saved?
 - v. Were there any deficiencies in treating survivors that raise questions about how any of the Shaheed were treated?
- (c) **Issue 38** – Did CDHB appropriately activate and use emergency policies? Specifically:
 - i. What is the major incident plan? How does it relate to the Canterbury DHB Health Emergency Plan 2017? Is this best practice from an independent perspective? Was it followed and by whom? What staff training had previously been conducted on such plans? How frequently? At what staff levels?

- ii. Did the CDHB formulate or use any or all of the following on 15 March 2019?
1. EOC: Emergency Operations Centre. An established facility where the operational response to an incident is controlled and provided;
 2. Emergency Coordination Centre: An established facility; the location where the response to any emergency is coordinated, and which operates the EOC;
 3. Coordinated Incidents Management System (CIMS): A structure to systematically manage emergency incidents which allows multiple agencies or units involved in an emergency to work together;
 4. If any of the above was formulated or used, how did this work?
- iii. Were the various Centres established and the various systems and plans implemented in the required attempt to bring order to chaos?

[14] At present the CDHB response comprises a written answer to the questions above. CDHB is in the process of providing underlying source material such as its Major Incident Response Plan. That additional material will be disclosed once received.

[15] **St John** – Internal Review into the St John Response to, and Initial Recovery from, the March 15, 2019 attacks in Christchurch: Final 20 August 2019.⁵

[16] **Dr John Hick** – Additional documents⁶ supplied to Dr John Hick for purposes of providing expert opinion:

- (a) Material on the emergency response that will be available to all Interested Parties. This includes the General Evidential Overview and Assessment of Dr Sage, responses to specific questions from

⁵ This report was prepared by St John for its own internal purposes and was initially provided voluntarily to the coronial inquiry in September 2021. Since then St John has maintained its willingness to make the report available directly to any representatives of the families of the deceased. That offer was again reiterated by counsel for St John in written and oral submissions in the course of the Scope Hearing. However, in the course of the Scope Hearing I directed that disclosure to Interested Parties was instead to be by way of the information disclosure process to be followed in this inquiry, and on the basis of a retrospective s 120 Coroners Act notice which affords limitations on its use outside of this inquiry by operation of s 127. That notice was subsequently issued on 1 March 2022 without the practical need to provide a further copy of the report that had previously been volunteered. The St John report now has status as having been made available pursuant to that notice and is made available to Interested Party subject to the limitations on use provided for under s 127 and prohibition on dissemination to others who are not Interested Parties.

⁶ As noted in Dr Hick's Report, he has had access to the St John internal event review document referred to at paragraph 4.

ambulance personnel, and statements from 19 individuals outlining different aspects of the emergency and medical response (documents 418, 3601, 2918, 5495, 6731, 2667, 3575, 4268, 4267, 3331, 2889, 2895, 2860, 2553, 2550, 2545, 5919, 5566, 6273, 5653, 5652, 5654, 5637, 5676, 6413).

- (b) Individualised information including DVI document, map of location, radiology notes, post mortem documentation, hospital documents (where applicable), pathology images, scene images, and individual evidential views. This will only be available to the relevant Interested Party or their counsel.

- [17] The information listed at paragraph 16(a) above will be made available to all Interested Parties as it is information provided to Dr Hick to assist him to understand the process used in responding to the attacks, and it does not contain any personal medical details of those who lost their lives.
- [18] The information listed at paragraph 16(b) above will only be made available to next of kin of those who lost their lives, as it contains specific personal medical details that for privacy reasons are only available to the next of kin and/or their counsel.
- [19] In addition, Dr Hick was provided post mortem CT imaging for each person who lost their life. The CT imaging cannot be readily viewed or interpreted without specific technology and relevant expertise. Interested Parties may request the relevant CT imaging be provided direct to a suitably qualified expert engaged by relevant Interested Party.

Interested Parties Who Must Request Access to Disclosure

- [20] As noted above, electronic links to the above disclosure will be automatically sent to all counsel and to organisations with Interested Party status.
- [21] Any person who is an unrepresented Interested Parties will need to contact coronial.response@justice.govt.nz to request electronic links to the disclosure associated with this Minute. This is to ensure the disclosure is only sent to those Interested Parties who wish to receive it.

Redactions of personal information

- [22] Police have applied a number of redactions to the online investigation bundle where Police consider it necessary to withhold the information. In light of the concurrent interim non-publication orders made, these redactions, and the grounds relied upon, are in the process of being revisited.
- [23] On review of the disclosure, counsel and unrepresented Interested Parties are asked to advise of any particular redactions which are sought to be revisited.

No further dissemination of disclosure and s 74 interim non-publication order

[24] Interested Parties who receive disclosure as part of the coronial inquiry must not provide a copy of or access to the disclosure to anyone who is not an Interested Party (other than instructed counsel).

[25] Information obtained for the purposes of inquiry pursuant to s 120 of the Coroners Act 2006 is also subject to the express limitations on use afforded under s 127.

[26] 'Interim Non-Publication Order No. 1' has been made pursuant to s 74 of the Coroners Act 2006 and takes effect on the same date as this Minute. That order applies, on an interim basis, to prohibit publication as follows:

1. There are interim orders prohibiting publication of the following (subject to the exceptions set out at 2. below) under section 74 of the Coroners Act 2006:
 - (a) all evidence, including photographs/CCTV images and communications transcripts, which detail the medical and emergency response to the 15 March 2019 masjid attacks or the names and/or identifying particulars of the people involved;
 - (b) all evidence in the Police investigation source materials category of 'online investigation bundle documents';
 - (c) all evidence which details personal information of any of the deceased, the injured and other witnesses, the medical and emergency responders, Mr Tarrant, or his family or friends/associates;
 - (d) the names and/or identifying particulars of Mr Tarrant's family and friends/associates interviewed as part of the Police investigation.
2. The orders at 1. above do not apply to prohibit the publication of some or all of the content of the following publicly available materials:
 - (a) The 'General Evidential Overview'
 - (b) First responder timeline
 - (c) The 'Operation Deans – The first 48 hours, formal Police debrief'
 - (d) Dr Hick's 'Analysis of the Medical Response to the Mass Homicide of 15 March 2019'

[27] That order sets out the legal basis and reasons for the order. That order may be revisited on application by any Interested Party, any person whose personal information is at issue, or any media organisation

A handwritten signature in black ink, appearing to read 'B. Windley'. The signature is written in a cursive style with a large, sweeping flourish at the end.

CORONER B WINDLEY