

**Form 2 - Consulting Assessment - Referral Acceptance or Refusal Form**

Sections 26 and 28 *Voluntary Assisted Dying Act 2021 (Qld)*

**Instructions for completing this form**

*About this form*

Form 2 must be completed by a medical practitioner who receives a referral for a consulting assessment for voluntary assisted dying. It must not be completed by the coordinating practitioner.

This form is to be given to the Voluntary Assisted Dying Review Board to ensure compliance with the *Voluntary Assisted Dying Act 2021* (the Act).

Under [section 28](#) of the Act, failure to submit the completed form may result in a maximum penalty of 100 penalty units: see <https://www.qld.gov.au/law/fines-and-penalties/types-of-fines/sentencing-fines-and-penalties-for-offences> for current penalty unit value.

*Before completing this form*

To access voluntary assisted dying, a person must be assessed as eligible by two medical practitioners - the coordinating practitioner and the consulting practitioner.

If a medical practitioner receives a referral for a consulting assessment, they must:

- decide whether to accept or refuse the referral; and
- inform the person and the coordinating practitioner of their decision and if the decision is a refusal, the reason.

*Timeframes*

- If a medical practitioner has a conscientious objection to voluntary assisted dying, they must inform the person and coordinating practitioner that they refuse the referral **immediately after the referral is made**.
- In other cases, the medical practitioner must inform the person and the coordinating practitioner of their acceptance or refusal within **two (2) business days** after receiving the referral.

**Note:**

- The medical practitioner may only accept a referral for a consulting assessment if they are eligible to act as a consulting practitioner (see Appendix A). There are general eligibility requirements in addition to requirements for the practitioner to be independent of the person requesting access to voluntary assisted dying.
- The medical practitioner does not need to have completed the [approved training](#) to accept a referral.
- On acceptance of a referral for a consulting assessment, the medical practitioner becomes the consulting practitioner for the person. **The consulting practitioner cannot begin the consulting assessment until their eligibility to act as a consulting practitioner and completion of the approved training has been confirmed by Queensland Health.**

What you need to do

Within **two (2) business days** after deciding whether to accept or refuse the referral for a consulting assessment you must:

1. **Complete** this form
2. **Give** a copy of the completed form to the Voluntary Assisted Dying Review Board.

You must also record the referral and your decision to accept or refuse the referral in the person's [medical record](#).

**Note:** Submitting this form via the [QVAD Review Board IMS](#) is considered giving a copy to the Voluntary Assisted Dying Review Board.

After you have submitted the form, you will be able to download a copy of the submitted form from the IMS.

### 1. Person requesting access

1.1 VCASE Number:	
1.2 Title:	
1.3 Given name:	
1.4 Preferred name(s):	
1.5 Family name:	
1.6 Date of birth:	

### 2. Contact details

2.1 Phone number:	
2.2 Email address:	

### 3. Home address

3.1 Address line 1: Street address	
3.2 Address line 2: Apartment, suite, unit etc.	
3.3 Suburb:	
3.4 State:	
3.5 Postcode:	

#### 4. Mailing address

4.1 Address line 1: Street address, P.O. box etc.	
4.2 Address line 2: Apartment, suite, unit etc.	
4.3 Suburb:	
4.4 State:	
4.5 Postcode:	

#### 5. Medical practitioner who received referral

5.1 VAD practitioner ID (if applicable):	
5.2 Ahpra registration number:	
5.3 Title:	
5.4 Family name:	
5.5 Given name:	
5.6 Practice postcode:	

#### 6. Contact details

6.1 Phone number:	
6.2 Email address:	

## 7. Preferred mailing address

7.1 Address line 1: Street address, P.O. box etc.	Intentionally blank
7.2 Address line 2: Apartment, suite, unit etc.	Intentionally blank
7.3 Suburb:	Intentionally blank
7.4 State:	Intentionally blank
7.5 Postcode:	Intentionally blank

## 8. Details of referral for consulting assessment

8.1 Date referral made:	
8.2 Date referral received:	

## 9. Details of referring practitioner

9.1 VAD Practitioner ID:	
9.2 Title:	
9.3 Family name:	
9.4 Given name:	

## 10. Outcome of referral for consulting assessment

10.1 I have decided to:

- Accept the referral for consulting assessment
- Refuse the referral for consulting assessment

10.2 If you are refusing the referral, what is the reason?

- I am ineligible to act as a consulting practitioner (Refer **Appendix A** for practitioner eligibility criteria)
- I conscientiously object to voluntary assisted dying or am otherwise unwilling to perform the duties of a consulting practitioner
- I am unavailable or unable to perform the duties of a consulting practitioner

**Note:**

- If you have a conscientious objection to voluntary assisted dying, you must inform the person and coordinating practitioner that you refuse the referral **immediately after the referral is made**.
- In other cases, you must inform the person and the coordinating practitioner of your acceptance or refusal within **two (2) business days** after receiving the referral.

10.3 Date person was informed of decision to accept or refuse the referral: \_\_\_\_\_

10.4 Date coordinating practitioner was informed of decision to accept or refuse the referral: \_\_\_\_\_

### **A. Signature of medical practitioner**

Signature: \_\_\_\_\_

Print name: \_\_\_\_\_

Date: DD/MM/YYYY \_\_\_\_\_

## Appendix A: Practitioner eligibility requirements

There are eligibility criteria for a practitioner to act in the role of coordinating or consulting practitioner under [section 82](#) of the *Voluntary Assisted Dying Act 2021*.

A medical practitioner is eligible to act as a coordinating or consulting practitioner if they:

- meet registration requirements:
  - specialist registration and has practised for at least 1 year as the holder of that registration; or
  - general registration and has practised for at least 5 years as the holder of that registration; or
  - specialist registration and has practised for at least 5 years as the holder of general registration; or
  - overseas-trained specialist who holds limited registration or provisional registration; and
- meet the [approved medical practitioner requirements](#).

To be eligible, the medical practitioner must also ensure that in relation to each person requesting access to voluntary assisted dying, the practitioner:

- is not a family member of the person; and
- does not know or believe that they:
  - are a beneficiary under a will of the person; or
  - may otherwise benefit financially or in any other material way from the death of the person, other than by receiving reasonable fees for the provision of services as the coordinating practitioner or consulting practitioner for the person.

## Collection Notice

The Department of Health and Hospital and Health Services (referred collectively as 'Queensland Health') and the Queensland Voluntary Assisted Dying Review Board (the Review Board), as part of the Department of Health, is collecting your information in accordance with the *Voluntary Assisted Dying Act 2021* (VAD Act) section 118 (2) in order for the Review Board to fulfill its functions under the VAD Act. Personal information collected by Queensland Health is handled in accordance with the *Information Privacy Act 2009*.

Queensland Health collects personal information from healthcare workers involved in the provision of voluntary assisted dying services via submission of approved forms to the Review Board, as required under the VAD Act. The personal information provided by you may be given to registered health practitioners authorised under the VAD Act; Queensland Voluntary Assisted Dying Support Service, Queensland Voluntary Assisted Dying Pharmacy Service; other healthcare workers involved in the provision of voluntary assisted dying services; and the person's nominated contact person, to facilitate operations under the VAD Act.

If the personal information is not collected Queensland Health cannot provide this service. Your personal information will not be disclosed to other third parties without consent, unless the disclosure is authorised or required by or under law.

For any questions regarding this collection notice, please contact the Office of the Voluntary Assisted Dying Review Board via email: [VADReviewBoard@Health.qld.gov.au](mailto:VADReviewBoard@Health.qld.gov.au).

For information about how Queensland Health protects your personal information, how to access or correct your own personal information, or how to make a complaint about a breach of the privacy principles and learn how we deal with such a complaint, please refer to:

- The Department of Health's [Privacy Policy](#).
- Each Hospital and Health Service (HHS) has its own Privacy Policy. You can access HHS Privacy Policies by following the links on the [About Hospital and Health Services](#) page.