

# APPLICATION FOR REVIEW OF A VOLUNTARY ASSISTED DYING DECISION

## ABOUT VOLUNTARY ASSISTED DYING

In Victoria, a person in the late stages of a terminal illness, who meets strict eligibility criteria, can request access to medication that will end their life at a time they choose. This is called voluntary assisted dying.

The request must be approved by a co-ordinating doctor and consulting doctor. They must be satisfied that the person and their circumstances meet legal requirements under the *Voluntary Assisted Dying Act 2017*.

## WHAT VCAT CAN REVIEW

VCAT can review a decision made by a co-ordinating medical practitioner in the first assessment, or a consulting medical practitioner in a consulting assessment, about whether the person:

- was usually resident in Victoria, or
- was usually resident in Victoria for at least 12 months at the time of making a first request, or
- has the capacity to make a decision in relation to voluntary assisted dying.

VCAT can review a decision made by the co-ordinating medical practitioner to refuse, based on their assessment of a person's decision-making capacity, the person's request for a:

- practitioner administration permit, or
- self-administration permit.

VCAT can also review a decision to refuse to accept the person's administration request, based on whether the person who is the subject of the decision has capacity to make a decision about voluntary assisted dying.

## THE PERSON WHO IS THE SUBJECT OF THE DECISION

We refer to the person who is seeking access to voluntary assisted dying as "the person who is the subject of the decision".

This person is always added as a party in the VCAT case, even if they did not apply.

## WHO CAN APPLY FOR A REVIEW?

You can apply for a review of a decision if you are one of the following:

- the person who is the subject of the decision by the co-ordinating medical practitioner or consulting medical practitioner
- an agent of the person who is the subject of the decision
- any other person who VCAT is satisfied has a special interest in the medical treatment and care of the person who is the subject of the decision.

## NEED HELP WITH YOUR APPLICATION?

If you have any questions about completing this form, contact our Customer Service team:

- email [humanrights@vcat.vic.gov.au](mailto:humanrights@vcat.vic.gov.au)
- call 1300 01 8228 (1300 01 VCAT) between 9 am and 5 pm Monday to Friday
- go to 55 King Street, Melbourne VIC 3000. We are open Monday to Friday from 9 am to 4.30 pm.

## WHAT DECISION DO YOU WANT VCAT TO REVIEW?

### 1. I want a review of a decision made by a:

- coordinating medical practitioner
- consulting medical practitioner

### 2. I want VCAT to review the medical practitioner's decision that the person:

- was usually resident or not usually resident in Victoria
- was usually resident or not usually resident in Victoria for at least 12 months at the time of making a first request to access voluntary assisted dying
- has or does not have decision-making capacity about voluntary assisted dying

## WHO IS THE SUBJECT OF THE DECISION?

### 3. Name:

Given names

Family name

### 4. Does this person wish to be identified as someone of Aboriginal or Torres Strait Islander descent?

- Yes  No

### 5. Are you aware if this person is already the subject of an existing VCAT application about voluntary assisted dying?

- Yes  No  Don't know

If yes, what is the VCAT reference number of the existing application (if known)?

### 6. Contact details of the person who is the subject of the decision:

Street address

Suburb

State

Postcode

Phone number

Email

### 7. Preferred contact person

If this person has a preferred contact person, provide their details.

Given names

Family name

Organisation, business or company (if applicable)

Street address

Suburb

State

Postcode

Phone number

Email

## WHO IS APPLYING?

**8. This application can be about you or someone else. Tick which of the following best describes you as the applicant:**

- I am the person who is the subject of the decision – skip to Question 13
- I am the agent of the person who is the subject of the decision
- I have a special interest in the medical treatment and care of the person who is the subject of the decision – skip to Question 10

### Applying as an agent

You must attach documents supporting your claim that you are an agent for the person who is the subject of the decision.

**9. State your relationship with the person who is the subject of the decision:**

Skip to Question 11.

### Applying as a person with a special interest

VCAT must be satisfied you have a special interest in the medical treatment and care of the person who is the subject of the decision.

You must attach documents supporting your claim that you have a special interest.

**10. Explain how you have a special interest in the medical treatment and care of the person who is the subject of the decision:**

### Your details

**11. Your name**

Given names

Family name

**12. Your contact details**

Organisation, business or company (if applicable)

Street address

Suburb

State

Postcode

Phone number

Email

## RESPONDENT'S DETAILS

The respondent is the co-ordinating or consulting medical practitioner whose decision you want reviewed.

### 13. Details of the medical practitioner

Given names

Family name

Practice street address

Suburb

State

Postcode

Practice phone number

Email

## REASONS FOR MAKING AN APPLICATION

### 14. Briefly explain your reasons for making this application:

## ACKNOWLEDGEMENT

By completing this application, I understand and acknowledge that:

- To the best of my knowledge, all information provided in this application is true and correct.
- It is an offence under section 136 of the *Victorian Civil and Administrative Tribunal Act 1998* to knowingly give false or misleading information to VCAT.

Date of acknowledgement (DD/MM/YYYY):

## PRIVACY INFORMATION

Applications for review of a decision under the Voluntary Assisted Dying Act 2017 will be subject to orders under the Open Courts Act 2013. This means that files and hearings will be closed to the public, and personal and sensitive information, including the names of parties, will be kept confidential.

## DOCUMENTS YOU NEED TO PROVIDE

You need to provide enough information and documents to support the claims you make in your application.

This includes documents that support:

- the claims you make about the decision you want reviewed
- your claim to be an agent of the person who is the subject of the decision (if applicable)
- your claim to be a person with a special interest in the medical treatment and care of the person who is the subject of the decision (if applicable).

It is your decision which documents to provide. Choose the documents that best support your application.

## FURTHER STEPS TO TAKE

Ensure you:

- Make a copy of this application for your own records
- Tell the person who is the subject of the decision about your application

## SUBMITTING THIS APPLICATION

You can submit your application to VCAT by email, post or in person.

### By email

Email [humanrights@vcat.vic.gov.au](mailto:humanrights@vcat.vic.gov.au)

### By post

Send to:

The Registrar  
Human Rights List  
Victorian Civil and Administrative Tribunal  
GPO Box 5408 Melbourne VIC 3001

### In person

Go to:

Victorian Civil and Administrative Tribunal  
Ground Floor, 55 King Street, Melbourne VIC 3000

## WHAT HAPPENS NEXT?

We will contact you within two working days of receiving this application.

If you are not the person who is the subject of the decision, we will also contact them or their contact person.

We will provide a copy of this application to relevant parties, including the co-ordinating medical practitioner, consulting medical practitioner and the Voluntary Assisted Dying Review Board.