



ACT
Government

First request information

Voluntary Assisted Dying ACT

August 2025

Acknowledgement

ACT Health and Community Services Directorate acknowledges the significant contributions of all stakeholders who have supported the implementation of voluntary assisted dying in the ACT. This includes members of the Voluntary Assisted Dying Clinical Advisory Committee, Clinical Expert Panel, Pharmacy Consultation Group, and Community and Consumer Consultation Group. The Voluntary Assisted Dying Taskforce also acknowledges the personal contribution of many doctors, nurses, pharmacists, allied health professionals, consumers, and content experts from across ACT and Australia. The authors extend their sincere thanks to these contributors for generously providing their advice and feedback.

This information has been adapted with permission from the NSW Health resource 'First request patient information guide': health.nsw.gov.au/vad

Some content has been extracted or adapted with permission from Queensland Health qld.gov.au/health/support/voluntary-assisted-dying

Acknowledgment of Country

ACT Health and Community Services Directorate acknowledges the Ngunnawal people as traditional custodians of the land and recognise any other people or families with connection to the lands of the ACT and region. ACT Health and Community Services Directorate wishes to acknowledge and respect their continuing culture and the contribution they make to the life of this city and this region.

This guide contains information if you have made a first request for voluntary assisted dying in ACT.

Remember, you can pause or stop the voluntary assisted dying process at any time, even after you get the substance. You do not need to continue if you do not want to. You do not need to give a reason.

This guide contains some legal and medical words. If you need help understanding these words, you can speak to your doctor or contact the **ACT Voluntary Assisted Dying Care Navigator Service** on **02 5124 1888**.

You can call the **Translating and Interpreting Service** (TIS National) on **131 450** and ask for the ACT Voluntary Assisted Dying Care Navigator Service if you need language support.

Accessibility

If you have difficulty reading a standard printed document and would like an alternative format, please phone 13 22 81.



If English is not your first language and you need the Translating and Interpreting Service (TIS), please call 13 14 50.

For further accessibility information, visit: www.act.gov.au/accessibility

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Section 1: Accessing voluntary assisted dying in the ACT

Voluntary assisted dying gives eligible people the option to end their life by the administration of an approved substance at a time of their choosing.

This document explains the legal steps you must go through to access voluntary assisted dying in the ACT. It is important to know that you must follow every step in the process within the ACT.

1. Eligibility requirements

To access voluntary assisted dying in the ACT you must meet all the eligibility criteria. This will be assessed by two, independent authorised voluntary assisted dying practitioners.



Eligibility criteria to access voluntary assisted dying in the ACT

- an adult aged 18 years or older
- have lived in the ACT for at least the last 12 months
- have a medical condition that is advanced and progressive and expected to cause death
- experiencing intolerable suffering
- have decision making capacity in relation to voluntary assisted dying, and
- the decision to access voluntary assisted dying is made voluntarily and without coercion.

If you have not lived in the ACT for the past 12 months but you have a substantial connection to the ACT, you may apply for a residency exemption.

Examples of a substantial connection could include:

- you have close family living in the ACT
- you receive medical treatment in the ACT, or
- you wish to die on Country.

Information about residency exemptions can be found on the ACT Government website.

2. Decision-making capacity

You must have decision-making capacity during all steps of the voluntary assisted dying process. Capacity is a legal term referring to your ability to make decisions.

An adult is **assumed to have decision-making capacity** in relation to voluntary assisted dying unless there is reason to suggest otherwise.

Decision-making capacity can change over time. There may be instances where you temporarily lose capacity and regain it again later. If this happens, you should be given the opportunity to consider the information at another time.

All practical steps should be taken to support you to make a decision. This may include:

- giving you information in a way that is tailored to your needs
- assisting you to communicate your decision, e.g. with the assistance of an interpreter, speech pathologist, or occupational therapist
- giving you appropriate time, and
- using technology that alleviates the effects of a disability.

For voluntary assisted dying, **decision-making capacity** means you **must be able to do the following at each step** of the process:

- understand and remember the information or advice given to you about voluntary assisted dying
- understand the process, options of administration and requirements involved for each step
- understand and consider the consequences of each option before deciding to access voluntary assisted dying
- understanding that taking the voluntary assisted dying substance will result in your death, and
- be able to decide and communicate this by talking, using communication tools, or using sign language or gestures.

3. Acting voluntarily and without coercion

Acting voluntarily means it must be your own choice to access voluntary assisted dying. It is against the law for anyone to pressure or force you to start or complete the voluntary assisted dying process. Being made to feel like a burden or being influenced by someone who cares for you are examples of coercion. The decisions you make about voluntary assisted dying need to be made freely by you, without pressure from another person.

Doctors or nurse practitioners providing voluntary assisted dying services receive comprehensive training on identifying signs of coercion.

4. The voluntary assisted dying process in the ACT

There are **10 steps** in the voluntary assisted dying process. You do not need to wait a minimum number of days between each step. **You can stop or pause the process at any stage.**



To be approved for voluntary assisted dying, you must:

- Make 3 requests for voluntary assisted dying. Two of these requests are verbal (steps 1 and 5), and one must be in writing (step 4). If you have difficulty speaking, you can make the requests using any means of communication available to you or by using an interpreter. If you have difficulty writing, another person can sign the request for you in your presence.
- Be found eligible for voluntary assisted dying by two independent authorised practitioners. This takes place during the first and consulting assessments (steps 2 and 3).
- Decide whether you want to take the substance yourself (self-administer) or have it administered to you by an authorised practitioner (practitioner administer). This is called an administration decision (step 7).

Step 1: First request

To start the process, you need to ask a doctor or nurse practitioner who is authorised to help you access voluntary assisted dying. This is called a **first request**. This is the first of 3 requests in the voluntary assisted dying process.

Your request must be clear and made only by you. No one else can make a first request on your behalf. It can be done verbally, in writing, or any other way you can communicate. Your request must be clear and only you can make a first request. No one else can make a first request for you.

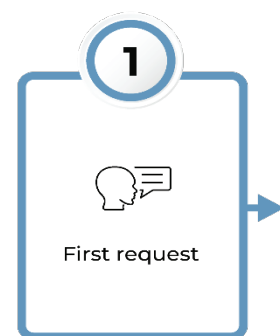
You can communicate your first request in any way, including using an interpreter, sign language or an assisted communication device.

Not all doctors or nurse practitioners provide voluntary assisted dying services. If your health practitioner declines your request, it could be because:

- They have a 'conscientious objection' to voluntary assisted dying. This means they have an objection because of their personal beliefs, values or morals.
- They are not authorised or able to accept your request.

If this happens, the health practitioner must tell you straight away that they refuse your first request and cannot help you access voluntary assisted dying. They must also give you the details of an authorised practitioner, or the Voluntary Assisted Dying Care Navigator Service.

The voluntary assisted dying process starts when an authorised practitioner accepts your first request. This practitioner then becomes your **coordinating practitioner**. Your coordinating practitioner will manage the voluntary assisted dying process with you.



Step 2: First assessment

Your coordinating practitioner will check if you meet the eligibility requirements for accessing voluntary assisted dying in the ACT. This is called the **first assessment**.

Your coordinating practitioner may need to ask for proof of your age and ACT residency (or residency exemption). They will ask questions about your medical history, medical condition and your request to access voluntary assisted dying.

Documents that your coordinating practitioner may ask you to provide include:

- birth certificate
- driver license
- current passport
- utility bills
- rental agreements
- bank statements, and



- documentation about your health and medical conditions.

When your coordinating practitioner has decided you are **eligible** to access voluntary assisted dying, they will talk to you about the treatment and palliative care options available to you. They will also tell you more about the voluntary assisted dying process.

If you don't understand the information discussed, the coordinating practitioner might find you **not eligible** for voluntary assisted dying. If you are not eligible, your coordinating practitioner will explain why and what they can do to support you.

Step 3: Consulting assessment

The coordinating practitioner will ask another authorised practitioner to give their opinion about your eligibility to access voluntary assisted dying.

You do not have to find this practitioner. Your coordinating practitioner can refer you directly to another authorised practitioner or this can be done through the Voluntary Assisted Dying Care Navigator Service.

When a practitioner accepts the referral, they become your **consulting practitioner**.

The consulting practitioner will do another eligibility assessment. This is called the **consulting assessment**. It includes the same steps as the first assessment.

The reason you need another assessment is because two practitioners need to check you are eligible to access voluntary assisted dying. This makes sure that voluntary assisted dying is an appropriate and legal option for you.

If your consulting practitioner decides that you are not eligible, they may refer you to a different consulting practitioner.

Your coordinating or consulting practitioner may ask another health professional for their advice on whether you meet certain eligibility criteria.



Step 4: Second request

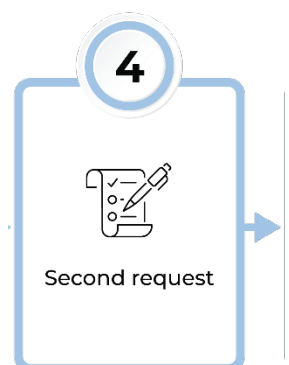
If both your coordinating and consulting practitioners find you eligible and you want to continue the process, the next step is to complete a **second request** form in writing that says you want to access voluntary assisted dying.

The form to complete will be given to you by your coordinating or consulting practitioner. This needs to be completed and **signed in front of two witnesses**.

If you lose the form, you can contact the Voluntary Assisted Dying Care Navigator Service to get another copy.

Anyone can be a witness for your second request if they:

- are 18 years of age or older
- are not a beneficiary under your will, and do not believe they will benefit in any other way from your death or helping you to access to voluntary assisted dying



- do not own or manage a facility where you live or are being treated, and
- are not your coordinating or consulting practitioner.

If you are unable to find 2 witnesses, contact the Voluntary Assisted Dying Care Navigator Service for assistance.

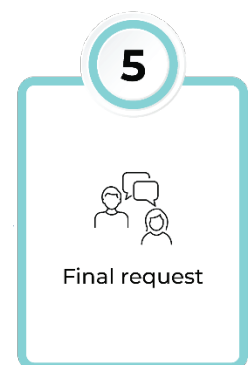
If you cannot sign the form, you can ask another adult to sign for you. To do this, you and your 2 witnesses must be there when the person signs for you. The person you ask to sign the form on your behalf must be an adult, and they cannot be a witness to the signing of the form or your coordinating or consulting practitioner.

You must give the signed and completed form to your coordinating practitioner if you wish to move to the next step in the process.

Step 5: Final request

After you have completed your second request form, you can then make a **final request** to your coordinating practitioner to access voluntary assisted dying.

You need to personally and clearly communicate that you want to access voluntary assisted dying. Your request can be made in writing, verbally or any other way you can communicate.

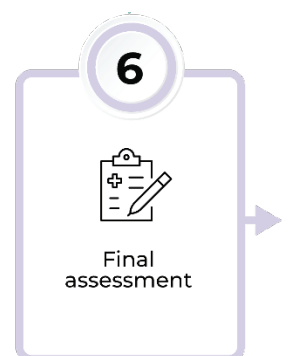


Step 6: Final assessment

The **final assessment** happens after you have made your final request. These steps can happen in the same consultation

During the final assessment, your coordinating practitioner will check that you:

- still have decision-making capacity about voluntary assisted dying, and
- are acting voluntarily and without coercion.



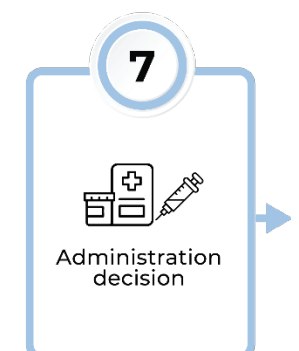
Step 7: Administration decision

If you want to continue the process after the final assessment, you need to choose how you want to take the substance that will end your life.

You can either take the substance yourself (**self-administration**) or have a doctor or nurse administer the substance to you (**practitioner administration**). This is called the **administration decision**.

This step involves talking about the substance with your coordinating practitioner. Legally, this discussion must happen in a face-to-face appointment (e.g. not on the phone or telehealth).

You can change your mind about the administration decision at any time. If you do change your mind, you should talk with your coordinating practitioner.



If you choose self-administration

If you choose this option, you will need to be able to swallow the substance yourself, **without help** from anyone.

If you have a feeding tube like a PEG (percutaneous endoscopic gastrostomy) or NG (nasogastric) tube, you can also take the substance using this. You can talk with your coordinating practitioner about what is best for you.

You must also choose a **contact person** before your coordinating practitioner can prescribe the substance. Your contact person can be any adult including:

- a family member or friend
- your coordinating practitioner or consulting practitioner, or
- another registered health professional.

Your coordinating practitioner will give you a form to complete to appoint your contact person. This is called the *Contact person appointment form*. The form must be completed by you and your contact person. Once it has been completed, you need to give the form to your coordinating practitioner. Your contact person will get more information about their responsibilities from your coordinating practitioner.

You must tell your coordinating practitioner if you want to change your contact person. You must also tell your coordinating practitioner if your contact person wants to stop performing this role. You will need to choose a new contact person as soon as possible.

Your contact person has legal responsibilities. This includes:

- returning any unused or remaining substance to the Voluntary Assisted Dying Pharmacy Service after you die, and
- telling your coordinating practitioner if you die. They will need to do this if you die from taking the substance or if you die from another cause.

Your contact person can:

- hold and store the substance for you, in certain circumstances.

If you choose self-administration, you or your contact person must store the substance securely. If you have the substance and decide you no longer want to take it, you or your contact person must return it to the Voluntary Assisted Dying Pharmacy Service.

If you have the substance and change your mind about taking it by self-administration, you must tell your coordinating practitioner, and the substance must be returned to the Voluntary Assisted Dying Pharmacy Service.

If you choose practitioner administration

If you choose this option, you will be given the substance by an administering practitioner.

You can ask your coordinating practitioner to perform this role. You can also ask another authorised doctor, nurse practitioner or registered nurse to be your administering practitioner.

There will need to be a witness who is an adult present when the substance is administered. You can choose where to have the substance administered. In some cases, it may need to be in a care facility.

Your administering practitioner will usually give you the substance intravenously. This means a needle called a cannula will be put into a vein in your body or they may use an existing cannula (such as a port-a-cath) to give you the substance.

Step 8: Prescription and supply of the substance

The substance can only be supplied by the Voluntary Assisted Dying Pharmacy Service. Your coordinating practitioner will deliver the prescription directly to the pharmacy. You do not need to do anything for this step.

You will be prescribed the substance by your coordinating practitioner when:

- all the previous steps have been followed
- an administration decision has been made, and
- a contact person (for self-administration), or an administering practitioner (for practitioner administration) has been chosen.

Once the Voluntary Assisted Dying Pharmacy Service has the prescription, they will check it meets the legal requirements. The Voluntary Assisted Dying Pharmacy Service will not give out the substance **until you tell them you want it.**

For self-administration

You will need to contact the Voluntary Assisted Dying Pharmacy Service when you are ready to get the substance. The pharmacist will deliver the substance to you. It is best if your contact person can also be there when the substance is delivered to you.

For practitioner administration

You will need to contact your administering practitioner to organise a time for them to administer the substance. The Voluntary Assisted Dying Pharmacy Service will provide the substance directly to your administering practitioner.

Step 9: Administering the substance

The details of this step will differ depending on if you choose self-administration or practitioner administration.

For self-administration

When the Voluntary Assisted Dying Pharmacy Service delivers the substance to you, they will give you support and information about how to store, prepare and take the substance.

You can take the substance at any time, and no one needs to be there when you choose to take it. However, you should let your contact person know your plans.

For practitioner administration

The administering practitioner will prepare, administer and take responsibility for handling the substance. There will need to be a witness present when they administer the substance.

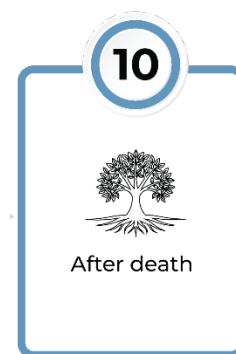


Step 10: After death

After your death, your coordinating practitioner will arrange notifications to ACT Births, Relationships and Deaths. They will issue the final **death certificate**.

The death certificate will not include any information about voluntary assisted dying, and your diagnosed condition will be listed as the cause of death.

Your coordinating practitioner and administering practitioner (if you chose practitioner administration) are also required to notify the Voluntary Assisted Dying Oversight Board of your death.



5. Voluntary assisted dying is one option at the end of your life

There are many options available to you at the end of your life. This includes palliative care and other treatment options. If you ask for voluntary assisted dying, you can still get high-quality palliative care and treatment.

Palliative care can support you to manage your symptoms and quality of life when you have been diagnosed with a terminal illness. It can help you have the best quality of life for as long as possible.

Palliative care can include:

- symptom management
- family support
- end of life care, and
- bereavement support.

More information about palliative care services in the ACT is online at [Palliative Care](#).

6. Advanced care planning

Advance care planning enables people you choose to make important health care decisions on your behalf and communicate these to your health care team. Sharing your wishes and preferences in advance means that if there is a time you can't communicate or make decisions, your healthcare wishes can still be respected and acted on.

Advanced care planning involves stating your wishes in a Statement of Choices, Enduring Power of Attorney and/or Health Direction.

To access voluntary assisted dying, you must maintain decision-making capacity throughout the process. This means that you **cannot make a valid request** for voluntary assisted dying **in an advance care planning document**. Similarly, an enduring power of attorney cannot make a request for voluntary assisted dying on your behalf.

Advance care planning should still occur even if you wish to access voluntary assisted dying. This ensures that other end of life preferences, such as the right to refuse or stop

life sustaining medical treatment, can be respected in the event you lose decision-making capacity.

More information can be found online at [Advance Care Planning](#).

7. Costs

There may be some costs during the process. For example, you may need to pay for appointments with your authorised practitioners. You should discuss any costs you may need to cover with your doctor or nurse practitioner at the start of the process. If you cannot afford the costs, you should contact the Voluntary Assisted Dying Care Navigator Service. There are no costs for the voluntary assisted dying substance or its delivery.

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Section 2: Information and support

There are services available to support you. You are not alone in this process.

Your coordinating practitioner is the best person to answer your questions. You can also contact your healthcare team or the Voluntary Assisted Dying Care Navigator Service.

You have the right to ask questions, change your mind at any time, and request support to help you understand or communicate during the process. Communication support is available at every stage of the voluntary assisted dying process. Authorised practitioners are responsible for ensuring accessible, person-centred communication that meets the needs of the person.

An Easy Read version of this document is also available to support people who prefer information in a simpler format.

1. Using an interpreter

You can use an interpreter at any stage of the voluntary assisted dying process. If you need an interpreter, the service can arrange one for you at no cost. Speak with your practitioner or the Voluntary Assisted Dying Care Navigator Service to organise an interpreter. It is preferable that an interpreter is certified by a professional body such as the National Accreditation Authority for Translators and Interpreters (NAATI).

The interpreter must not:

- be a family member or friend
- know or believe that they are a beneficiary under your will
- know or believe they may benefit financially or in any other material way from your death, other than by receiving reasonable fees for interpreting services
- be an owner or manage a facility where you live or get treatment
- be directly involved in providing a health service, aged care service or personal care service to you.

An exemption may be granted if the ACT Health and Community Services Directorate is satisfied that:

- no other interpreter is reasonably available, and
- there are exceptional circumstances for granting the exemption.

For example, where the language is only spoken by a limited number of interpreters.

2. Voluntary Assisted Dying Care Navigator Service

The Voluntary Assisted Dying Care Navigator Service can give you support and information during the voluntary assisted dying process. The service is available for everyone including you, your carers, family and friends. The people at the service who you will speak to are called care navigators.

The care navigators can:

- give general information about voluntary assisted dying in the ACT
- help people find voluntary assisted dying practitioners, and
- help people access resources and support.

The Voluntary Assisted Dying Care Navigator Service is open from Monday to Friday 8:30am to 5:00pm (excluding public holidays) and can be contacted on (02) 5124 1888.

3. The role of the Voluntary Assisted Dying Oversight Board

The Voluntary Assisted Dying Oversight Board (the Board) oversees, monitors and reports on the operation of voluntary assisted dying in the ACT. Practitioners and pharmacists must give forms to the Board at each stage of your voluntary assisted dying process. This allows the Board to check the law is being followed.

4. Telling others about your request for voluntary assisted dying

You can decide who you tell about your choice to access voluntary assisted dying. You should think about any help you may need from other people during the process. You are encouraged to tell your usual doctor about your request. You should do this even if they are not involved in the process. If you live or are staying in a residential facility, you should also tell the facility manager.

5. Mental health support

Talking about death and voluntary assisted dying may bring up a range of emotions and feelings.

You, your carers, families or friends can call these free services if you need support:

- Lifeline on 13 11 14 – open 24 hours for crisis telephone support. Also online: www.lifeline.org.au
- Beyond Blue on 1300 22 4636 – open 24 hours for crisis telephone support. Also online: www.beyondblue.org.au
- Griefline on 1300 845 745 – open 8am to 8pm, 7 days a week. Also online: www.griefline.org.au
- 13YARN on 13 92 76 – open 24 hours for crisis telephone support. Yarn with an Aboriginal or Torres Strait Islander Crisis Supporter

6. Providing feedback on the voluntary assisted dying process

If you have any feedback about your experience with the voluntary assisted dying process, you can speak with your coordinating practitioner or call the Voluntary Assisted Dying Care Navigator Service.

7. Complaint information

If you are concerned or have a complaint about your experience of the voluntary assisted dying process you should first talk to your coordinating practitioner, if you have one. You can also send an email to the Board at VADOversightBoard@act.gov.au.

If your concern relates to Canberra Health Services, please refer to [Consumer and carer feedback](#).

The ACT Human Rights Commission handles complaints about health services in the ACT and complaints about access to and integrity of health records in the ACT. You can contact them on (02) 6205 2222 or on their website: <https://www.hrc.act.gov.au/health>.

You can also raise concerns about the conduct or performance of a registered health practitioner with the Australian Health Practitioner Regulation Agency (AHPRA). More information is on the AHPRA website: www.ahpra.gov.au.

8. Review process

The ACT Civil and Administrative Tribunal (ACAT) is an independent body that makes and reviews a range of administrative, commercial, and personal matters in the ACT. In relation to voluntary assisted dying, ACAT can only review decisions made by a coordinating or consulting practitioner regarding:

- if you have decision-making capacity in relation to voluntary assisted dying
- if your decision to access voluntary assisted dying is made voluntarily and without coercion
- if you have lived in the ACT for at least the previous 12 months.

These are called reviewable decisions. ACAT cannot review decisions about disease-related eligibility criteria, as they are best decided by a practitioner.

Applying for a review

An application to review a decision may be made by you, or another person who has a sufficient and genuine interest in your rights in relation to voluntary assisted dying.

During the ACAT review

Once an application has been made to ACAT to review a decision, the voluntary assisted dying request and assessment process is put on hold. No further steps may be taken until the matter is resolved or the application for review is withdrawn.

Timing and process

If you want ACAT to review a decision, you must apply to them as soon as possible. Depending on the reviewable decision you will have either 5 or 28 days to apply for a review. When a practitioner makes a reviewable decision in relation to you, they must provide you with a reviewable decision notice. This notice will tell you how long you have to apply for review.

Within 2 days after receiving the application, ACAT must provide a copy of the application to you and any other parties involved.

ACAT hearings about voluntary assisted dying must be held in private. ACAT has the power to keep your details anonymous in ACAT's publicly reported decisions. ACAT can take as long as needed to make its decision. If you die before they complete their review, the ACAT application does not continue.

Effect of a decision

ACAT may decide to support or overturn the decision made by your coordinating or consulting practitioners. If the ACAT decision is different to the decision of your coordinating or consulting practitioner, the decision is overturned, and the ACAT decision takes its place.

If the decision by your coordinating practitioner meant you were ineligible and the ACAT decision means that you are now eligible for voluntary assisted dying, your coordinating practitioner may refuse to continue in the role. If this happens, your coordinating practitioner must transfer their role to another practitioner so you can continue the voluntary assisted dying process.

9. Privacy

In order for a patient to access voluntary assisted dying, it is necessary to collect information about them, and their health in order to assess their eligibility for voluntary assisted dying. Patient information collected includes identifying information such as name and date of birth, contact details, health information such as medical conditions, and demographic information.

Under the *Voluntary Assisted Act 2024* (**the Act**), practitioners are required to provide information to the Voluntary Assisted Dying Board (**the Board**), and the Health and Community Services Directorate that supports the Board, so that the Board can monitor voluntary assisted dying and compliance with the Act. If the required information is not provided, a patient's eligibility cannot be assessed, and the patient will not be able to participate in the Territory Voluntary Assisted Dying Scheme.

The information provided may be shared between government agencies, authorised voluntary assisted dying practitioners, the Voluntary Assisted Dying Care Navigator Service and your nominated contact person.

The information is collected, used, stored and disclosed consistently with the *Information Privacy Act 2014* and the *Health Records (Privacy and Access) Act 1997*. Further details, including how a patient can access their own information or make a complaint can be found in the Voluntary Assisted Dying Privacy Policy [Voluntary Assisted Dying Privacy Policy](#).

