Australian Capital Territory

Voluntary Assisted Dying Regulation 2025

SL2025-19

made under the

Voluntary Assisted Dying Act 2024

Republication No 1

Effective: 3 November 2025

Republication date: 3 November 2025

Regulation not amended

About this republication

The republished law

This is a republication of the *Voluntary Assisted Dying Regulation 2025*, made under the *Voluntary Assisted Dying Act 2024* (including any amendment made under the *Legislation Act 2001*, part 11.3 (Editorial changes)) as in force on 3 November 2025. It also includes any commencement, repeal or expiry affecting this republished law to 3 November 2025.

The legislation history and amendment history of the republished law are set out in endnotes 3 and 4.

Kinds of republications

The Parliamentary Counsel's Office prepares 2 kinds of republications of ACT laws (see the ACT legislation register at www.legislation.act.gov.au):

- authorised republications to which the *Legislation Act 2001* applies
- unauthorised republications.

The status of this republication appears on the bottom of each page.

Editorial changes

The *Legislation Act 2001*, part 11.3 authorises the Parliamentary Counsel to make editorial amendments and other changes of a formal nature when preparing a law for republication. Editorial changes do not change the effect of the law, but have effect as if they had been made by an Act commencing on the republication date (see *Legislation Act 2001*, s 115 and s 117). The changes are made if the Parliamentary Counsel considers they are desirable to bring the law into line, or more closely into line, with current legislative drafting practice.

This republication does not include amendments made under part 11.3 (see endnote 1).

Uncommenced provisions and amendments

If a provision of the republished law has not commenced, the symbol **U** appears immediately before the provision heading. Any uncommenced amendments that affect this republished law are accessible on the ACT legislation register (www.legislation.act.gov.au). For more information, see the home page for this law on the register.

Modifications

If a provision of the republished law is affected by a current modification, the symbol **M** appears immediately before the provision heading. The text of the modifying provision appears in the endnotes. For the legal status of modifications, see the *Legislation Act 2001*, section 95.

Penalties

At the republication date, the value of a penalty unit for an offence against this law is $160 for an individual and $810 for a corporation (see *Legislation Act 2001*, s 133).

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Part 1 Preliminary

1 Name of regulation

This regulation is the *Voluntary Assisted Dying Regulation 2025*.

3 Dictionary

The dictionary at the end of this regulation is part of this regulation.

Note 1 The dictionary at the end of this regulation defines certain terms used in this regulation, and includes references (***signpost definitions***) to other terms defined elsewhere.

For example, the signpost definition '***condition***—see the Act, section 11 (2).' means that the term 'condition' is defined in that subsection and the definition applies to this regulation.

Note 2 A definition in the dictionary (including a signpost definition) applies to the entire regulation unless the definition, or another provision of the regulation, provides otherwise or the contrary intention otherwise appears (see Legislation Act, s 155 and s 156 (1)).

4 Notes

A note included in this regulation is explanatory and is not part of this regulation.

Part 2 Request and assessment process for voluntary assisted dying

5 Information to be given to individual after acceptance of first request—Act, s 14 (3) (a)

(1) The following information is prescribed:

(a) information about the request and assessment process, including the requirements that must be met for an individual to be found eligible to access voluntary assisted dying;

(b) information about the process for an individual to access voluntary assisted dying after the request and assessment process for the individual is complete;

(c) a statement that if the request and assessment process is complete for an individual, the individual may choose to self-administer an approved substance or have an approved substance administered to them by a health practitioner;

(d) information about the functions of authorised practitioners and other health practitioners who may be involved in relation to an individual who has decided to access voluntary assisted dying;

(e) information about the functions of an individual's contact person;

(f) a statement about the effect of the Act, section 136 (1) (Making application for review of reviewable decision) and which decisions made under the Act are reviewable decisions;

(g) a statement about how information about an individual who has made a request to access voluntary assisted dying may be used or disclosed;

(h) a statement about the services for support and care available to an individual who has been diagnosed with a relevant condition, including palliative care options;

(i) the likely expenses for an individual who decides to access voluntary assisted dying;

(j) the role of the board.

(2) For this section, a request and assessment process for an individual is ***complete*** if the individual's coordinating practitioner has prepared a final assessment report for the individual under the Act, section 36 (2).

(3) In this section:

relevant condition means a condition that, either on its own or in combination with 1 or more other diagnosed conditions, is expected to cause the death of an individual.

reviewable decision—see the Act, section 134.

6 Information to be given to individual after first assessment and consulting assessment—Act, s 16 (3) and s 23 (3)

(1) The following information is prescribed:

(a) the individual's diagnosis and prognosis;

(b) the treatment options available to the individual;

(c) the likely outcome of the treatment options;

(d) the palliative care options available to the individual;

(e) the likely outcome of the palliative care options;

(f) information about the request and assessment process, including the requirement for an individual's second request to be signed in the presence of 2 eligible witnesses;

(g) a statement that the individual may choose to self-administer an approved substance or have an approved substance administered to them by a health practitioner;

(h) the potential complications of an approved substance being administered by or to the individual;

(i) a statement that death of the individual is the expected outcome of an approved substance being administered by or to the individual;

(j) a statement about the effect of the Act, section 9 (1) (No obligation to continue with request to access voluntary assisted dying);

(k) a statement that the individual may wish to tell their other treating health practitioners that they have made a request to access voluntary assisted dying.

(2) In this section:

eligible witness—see the Act, section 27 (6).

7 Information for first assessment report—Act, s 18 (1) (a) (ii)

(1) The following information is prescribed:

(a) the individual's name;

(b) the individual's date of birth;

(c) the individual's home address;

(d) the individual's gender identity (if known);

(e) if the coordinating practitioner decides the individual meets the eligibility requirement mentioned in the Act, section 11 (1) (b)—the individual's condition or conditions that meet the requirement;

(f) the reasons why the coordinating practitioner decided the individual's condition or conditions are or are not advanced, progressive and expected to cause death;

(g) whether the individual has a disability other than a condition that meets the eligibility requirement mentioned in the Act, section 11 (1) (b) (if known);

(h) whether the individual is an Aboriginal or Torres Strait Islander person (if known);

(i) whether the individual is from a culturally and linguistically diverse background (if known);

(j) the language used by the individual at home (if known);

(k) whether the individual used an interpreter during the first assessment;

(l) the day the individual made the first request;

(m) the day the coordinating practitioner accepted the individual's first request;

(n) the day the coordinating practitioner made their decision on the first assessment.

(2) In this section:

advanced—see the Act, section 11 (3).

gender identity—see the *Discrimination Act 1991*, dictionary.

progressive—see the Act, section 11 (7).

8 Information for consulting assessment report—Act, s 25 (1) (a) (ii)

(1) The following information is prescribed:

(a) the individual's name;

(b) the individual's date of birth;

(c) the individual's home address;

(d) if the consulting practitioner decides the individual meets the eligibility requirement mentioned in the Act, section 11 (1) (b)—the individual's condition or conditions that meet the requirement;

(e) the reasons why the consulting practitioner decided the individual's condition or conditions are or are not advanced, progressive and expected to cause death;

(f) whether the individual has a disability other than a condition that meets the eligibility requirement mentioned in the Act, section 11 (1) (b) (if known);

(g) whether the individual used an interpreter during the consulting assessment;

(h) the day the consulting practitioner made their decision on the consulting assessment.

(2) In this section:

advanced—see the Act, section 11 (3).

progressive—see the Act, section 11 (7).

9 Information for final request report—Act, s 34 (1) (a)

The following information is prescribed:

(a) the individual's name;

(b) the individual's date of birth;

(c) the individual's home address;

(d) the day the individual made the final request;

(e) whether the individual used an interpreter to make the final request;

(f) a statement that the individual's final request met the requirements mentioned in the Act, section 32 (2).

10 Information for final assessment report—Act, s 36 (2) (b)

The following information is prescribed:

(a) the individual's name;

(b) the individual's date of birth;

(c) the individual's home address;

(d) the coordinating practitioner's decision about—

(i) whether the individual has decision-making capacity in relation to voluntary assisted dying; and

(ii) whether the individual's decision to access voluntary assisted dying is made voluntarily and without coercion;

(e) whether the individual used an interpreter during the final assessment;

(f) the day the coordinating practitioner made their decision on the final assessment.

Part 3 Accessing voluntary assisted dying and death

11 Information for contact person appointment—Act, s 51 (4) (c)

The following information is prescribed:

(a) the name and telephone number of the individual;

(b) the name, home address or business address and telephone number of the person being appointed as the individual's contact person (the ***appointee***);

(c) a statement that the appointee—

(i) is an adult; and

(ii) consents to the appointment; and

(iii) acknowledges the functions and obligations of a contact person under the Act, including the obligations under the Act, section 69 (Giving approved substances to approved disposer if individual dies or contact person appointment ends—contact person);

(d) if the contact person appointment is prepared by another person under the Act, section 51 (4) (b) (ii)—

(i) the name of the person who prepared the appointment; and

(ii) a statement that the person is an adult; and

(iii) a statement that the person prepared the appointment; and

(iv) a statement that the individual asked the person to prepare the appointment.

12 Eligibility requirements for approved suppliers and approved disposers—Act, s 57 (2)

The following eligibility requirements are prescribed:

(a) the health practitioner is—

(i) a pharmacist; and

(ii) a public servant working in Canberra Health Services;

(b) the health practitioner has successfully completed any pharmacist training approved by the chief executive officer of Canberra Health Services.

13 Information to be given to individual before first prescription—Act, s 58 (1) (d)

(1) The following information is prescribed:

(a) the medicine that constitutes the approved substance;

(b) a statement that the individual is under no obligation to proceed with the administration of the approved substance;

(c) the business address and telephone number of an approved disposer who is authorised to dispose of the approved substance;

(d) if the individual has a practitioner administration decision in effect—

(i) the method by which the approved substance will be administered to the individual; and

(ii) the expected effects on the individual of the approved substance being administered to the individual; and

(iii) the period in which the individual is likely to die after the approved substance is administered to the individual; and

(iv) the potential complications of the approved substance being administered to the individual;

(e) if the individual has a self-administration decision in effect—

(i) the business address and telephone number of an approved supplier who can supply the approved substance to the individual; and

(ii) a statement about the storage requirements and liability under the Act, section 74 (Storage of approved substances); and

(iii) details about how the individual can prepare and self-administer the approved substance; and

(iv) the period during which a prescription for the approved substance is valid; and

(v) a statement about the effect of the Act, section 68 (Giving approved substances to approved disposer if administration decision revoked—individual or contact person); and

(vi) a statement about the effect of the Act, section 69 (Giving approved substances to approved disposer if individual dies or contact person appointment ends—contact person); and

(vii) the expected effects on the individual of self-administering the approved substance; and

(viii) the period in which the individual is likely to die after self-administering the approved substance; and

(ix) the potential complications of the individual self-administering the approved substance.

(2) The information mentioned in subsection (1) must be given to the individual orally and in writing.

14 Information for prescription—Act, s 58 (3) and s 59 (3)

(1) The following information is prescribed:

(a) the prescriber's name, business address and telephone number;

(b) the day the prescription is issued;

(c) the name, date of birth, home address and telephone number of the individual for whom the approved substance is prescribed;

(d) the approved substance, and the form, strength and quantity of the substance, to be dispensed under the prescription;

(e) a statement that the prescription is for a medicine intended to be used for voluntary assisted dying;

(f) a statement certifying that—

(i) the request and assessment process for the individual is complete; and

(ii) the individual has made an administration decision;

(g) whether the individual has a practitioner administration decision or self-administration decision in effect when the prescription is issued;

(h) a statement, endorsed by the prescriber's signature, acknowledging that the prescription was issued by the prescriber.

(2) For this section, a request and assessment process for an individual is ***complete*** if the individual's coordinating practitioner has prepared a final assessment report for the individual under the Act, section 36 (2).

15 Labelling requirements for approved substances—Act, s 60 (3) (c)

A label that includes the following information must be attached to the container or packaging of an approved substance:

(a) the information mentioned in the *Medicines, Poisons and Therapeutic Goods Regulation 2008*, section 123;

(b) a statement that the purpose of the dose of the substance is to cause death;

(c) a statement about the storage requirements and liability under the Act, section 74 (Storage of approved substances);

(d) a statement that any unused approved substance must be disposed of in accordance with the Act.

16 Other requirements for supplying approved substances—self-administration decision in effect—Act, s 60 (3) (d)

(1) This section applies if, when supplying an approved substance for an individual, an approved supplier is satisfied on reasonable grounds that the individual has a self-administration decision in effect.

(2) The approved supplier must give the information mentioned in section 13 (1) to the person to whom the approved substance is supplied.

(3) The approved supplier must give the information to the person—

(a) orally; and

(b) in writing if the person—

(i) tells the supplier that the individual for whom the substance is supplied does not have the information in writing; or

(ii) asks the supplier to give them the information in writing.

17 Circumstances for using courier to supply approved substance—Act, s 60 (3) (f) (ii)

The circumstances prescribed are—

(a) the individual has a practitioner administration decision in effect; and

(b) the approved supplier keeps a written record that includes—

(i) the name of the courier used to supply the approved substance to the person; and

(ii) the date and time the courier received the approved substance from the supplier; and

(c) the approved supplier ensures that—

(i) the approved substance is contained in a package; and

(ii) the package does not indicate that it contains an approved substance; and

(iii) the package contains a document that includes a statement that the contents of the package include a medicine that is intended to be used for voluntary assisted dying; and

(iv) the package is addressed to the person to whom the substance is being supplied.

18 Requirements for couriers supplying approved substance—Act, s 60 (6)

(1) A courier who delivers a package containing an approved substance under the Act, section 60 (5) (c)—

(a) must not open or otherwise interfere with the package or its contents; and

(b) must, when delivering the substance, obtain written notice from the person to whom the substance is delivered (a ***delivery confirmation***) that—

(i) states the courier gave the substance to the person; and

(ii) is signed and dated by the person to whom the substance was given; and

(c) must give the delivery confirmation to the approved supplier for whom they delivered the substance.

(2) In this section:

interfere with a package or its contents includes—

(a) damaging or destroying the package or its contents; and

(b) spoiling or contaminating the contents of the package.

19 Information for supply record—Act, s 60 (7) (a)

The following information is prescribed:

(a) the name, date of birth, home address and telephone number of the individual for whom the approved substance was prescribed;

(b) the name of the approved supplier;

(c) the day the approved substance was supplied;

(d) a statement that—

(i) the approved supplier was satisfied about the matters mentioned in the Act, section 60 (3) (b); and

(ii) the approved supplier complied with the labelling requirements under section 15 (Labelling requirements for approved substances—Act, s 60 (3) (c)); and

(iii) if the individual for whom the approved substance was supplied had a self-administration decision in effect when the substance was supplied—the approved supplier complied with the supply requirements under section 16 (Other requirements for supplying approved substances—self-administration decision in effect—Act, s 60 (3) (d)); and

(iv) if the Act, section 60 (3) (e) applies—the approved supplier was satisfied of a matter mentioned in the Act, section 60 (3) (e) (i) or (ii).

20 Requirements for couriers—Act, s 60 (10), def *courier*

The person must be—

(a) a health practitioner; and

(b) a public servant working in Canberra Health Services.

21 Information for written notice about original administering practitioner giving approved substance to new administering practitioner—Act, s 65 (6)

The following information is prescribed:

(a) the name, business address and telephone number of the new administering practitioner;

(b) the day the original administering practitioner gave the approved substance to the new administering practitioner.

22 Information for written notice about original contact person giving approved substance to another person—Act, s 67 (6)

The following information is prescribed:

(a) the name, home address or business address and telephone number of the new contact person;

(b) the day the original contact person gave the approved substance to the person mentioned in the Act, section 67 (2).

23 Information for written record of receipt of approved substance received for disposal—Act, s 73 (2) (a)

The following information is prescribed:

(a) the name of the approved disposer;

(b) the name of the person who gave the approved substance to the approved disposer (if known);

(c) a statement that the approved disposer received the approved substance from the person;

(d) the day the approved disposer received the approved substance from the person;

(e) a statement, endorsed by the approved disposer's signature, acknowledging the truth of the information in the written record;

(f) the day the approved disposer signed the written record.

24 Information for written notice about receipt of approved substance received for disposal—Act, s 73 (2) (b)

The following information is prescribed:

(a) the name of the approved disposer;

(b) the name of the person who gave the approved substance to the approved disposer (if known);

(c) the day the approved disposer received the approved substance;

(d) the name, date of birth, home address and telephone number of the individual for whom the approved substance was prescribed;

(e) a statement, endorsed by the approved disposer's signature, acknowledging the truth of the information in the written record;

(f) the day the approved disposer signed the written record.

25 Disposal requirements—Act, s 73 (2) (d)

(1) The following disposal requirements are prescribed:

(a) the approved disposer must personally dispose of the approved substance;

(b) the approved disposer must comply with the requirements for discarding a controlled medicine under the *Medicines, Poisons and Therapeutic Goods Act 2008* when disposing of the approved substance, even if the approved substance is not a controlled medicine.

Note A controlled medicine must be discarded in accordance with any prescribed requirements (see *Medicines, Poisons and Therapeutic Goods Act 2008*, s 34 (1)). The *Medicines, Poisons and Therapeutic Goods Regulation 2008*, s 390 prescribes the requirements for discarding a controlled medicine.

(2) In this section:

controlled medicine—see the *Medicines, Poisons and Therapeutic Goods Act 2008*, section 11 (2).

26 Information for disposal record—Act, s 73 (3) (a)

The following information is prescribed:

(a) the name, home address and telephone number of the individual for whom the approved substance was prescribed;

(b) the name of the person who gave the approved substance to the approved disposer (if known);

(c) the name of the approved disposer;

(d) the day the approved substance was received by the approved disposer;

(e) the day the approved disposer disposed of the approved substance;

(f) a statement, endorsed by the approved disposer's signature, acknowledging the truth of the information in the written record;

(g) the day the approved disposer signed the written record.

27 Storage requirements for approved substances—Act, s 74

(1) This section applies to the following people when in possession of an approved substance:

(a) an individual who has or had a self-administration decision in effect (a ***relevant individual***);

(b) a person who is or was the contact person for a relevant individual (a ***relevant contact person***);

(c) a person who is or was an administering practitioner for an individual who has or had a practitioner administration decision in effect (a ***relevant administering practitioner***).

(2) The person must—

(a) store the substance in a suitable receptacle at all times other than when the substance is being prepared, administered or given to an approved disposer; and

(b) keep the receptacle locked at all times other than when the substance is being prepared, administered or given to an approved disposer.

(3) The relevant individual must—

(a) keep the suitable receptacle in a place and manner that ensures their contact person can access the receptacle; and

(b) tell their contact person the address of the place where the receptacle is kept; and

(c) if the receptacle is unlocked by a combination lock—keep the combination confidential other than to give the combination to their contact person for 1 or more of the following purposes:

(i) the preparation of the substance;

(ii) the administration of the substance;

(iii) giving the substance to an approved disposer; and

(d) if the receptacle is unlocked by a key—

(i) keep personal custody of the key; or

(ii) keep the key in a place that is not the same place as where the receptacle is kept; or

(iii) give the key to their contact person.

(4) If the relevant individual gives their contact person the combination for a purpose mentioned in subsection (3) (c) (i) to (iii), the contact person must keep the combination confidential.

(5) If the relevant individual gives the key to their contact person under subsection (3) (d) (iii), the contact person must—

(a) do 1 of the following:

(i) keep personal custody of the key;

(ii) keep the key in a place that is not the same place as where the receptacle is kept;

(iii) if the individual asks to be given the key—give the key to the individual; and

(b) if the contact person keeps the key in a place under paragraph (a) (ii)—tell the individual the address and location of the place where the key is kept.

(6) The relevant contact person must—

(a) keep the suitable receptacle in a place and manner that ensures the relevant individual can access the receptacle; and

(b) tell the relevant individual the address of the place where the receptacle is kept; and

(c) if the receptacle is unlocked by a combination lock—

(i) give the combination to the relevant individual; and

(ii) otherwise keep the combination confidential; and

(d) if the receptacle is unlocked by a key—

(i) give the key to the relevant individual; or

(ii) if the relevant individual asks the relevant contact person to keep custody of the key—

(A) keep personal custody of the key; or

(B) keep the key in a place that is not the same place as where the receptacle is kept; and

(e) if the receptacle is unlocked by a key and the relevant individual asks the relevant contact person to keep custody of the key—tell the relevant individual the address and location of the place where the key is kept; and

(f) if the relevant individual asks for the receptacle—give the receptacle to the individual; and

(g) if the relevant contact person gives the receptacle to the individual under paragraph (f)—give the key to the relevant individual.

(7) The relevant administering practitioner must—

(a) if the suitable receptacle is unlocked by a combination lock—keep the combination confidential; and

(b) if the receptacle is unlocked by a key—

(i) keep personal custody of the key; or

(ii) keep the key in a place that is not the same place as where the receptacle is kept.

(8) In this section:

suitable receptacle means a receptacle that—

(a) is not easily penetrable; and

(b) is locked with a lock of sturdy construction.

28 Matters to be certified in administration certificate—Act, s 81 (3) (d)

The following information is prescribed:

(a) the name and date of birth of the individual;

(b) the name, business address and telephone number of the administering practitioner;

(c) the date and time the approved substance was administered to the individual;

(d) the address of the place where the administering practitioner administered the approved substance to the individual;

(e) if the administering practitioner was present when the individual died—

(i) the date and time of the individual's death; and

(ii) the time between the substance being administered to the individual and the individual's death;

(f) if the administering practitioner was not present when the individual died—

(i) the estimated time of the individual's death; and

(ii) the estimated time between the substance being administered to the individual and the individual's death;

(g) details of any complications relating to the administration of the approved substance to the individual;

(h) the name, date of birth, home address or business address and telephone number of the witness to the administration of the approved substance;

(i) a statement, endorsed by the administering practitioner's signature, acknowledging the truth of the information in the administering certificate;

(j) the day the administering practitioner signed the administration certificate.

Part 4 Requirements for coordinating practitioners, consulting practitioners and administering practitioners

29 Definitions—pt 4

(1) In this part:

adverse finding, in relation to a health practitioner, means any of the following:

(a) a finding that results in health, conduct or performance action being taken against the practitioner;

(b) a substantiated claim or complaint about, or adverse finding made against, the practitioner by—

(i) a registration authority; or

(ii) any other professional, ethical standards or disciplinary body in Australia or outside Australia;

Example—par (ii)

The Royal Australian College of General Practitioners

(c) a conviction or finding of guilt for an offence whether in Australia or elsewhere.

disqualifying finding, in relation to a health practitioner—see section 30.

health, conduct or performance action—see the *Health Practitioner Regulation National Law (ACT)*, section 5.

registration authority—see the *Health Practitioner Regulation National Law (ACT)*, section 5.

registration number, of a health practitioner, means the registration number or code mentioned in the *Health Practitioner Regulation National Law (ACT)*, section 225 (c).

relevant area of practice, for a nurse or nurse practitioner, means practice in an area requiring skills relevant to voluntary assisted dying.

Examples—relevant area of practice

palliative care, supportive care, anaesthetics, emergency medicine, geriatrics, aged care, general medicine, general practice, primary health care, haematology, intensive care medicine, medical oncology, radiation oncology, neurology, complex chronic care

30 Meaning of *disqualifying finding*—pt 4

(1) For this part, a ***disqualifying finding***, in relation to a health practitioner, means any of the following adverse findings:

(a) a finding that the practitioner unlawfully provided or authorised the medical treatment of a person without consent for the treatment being given;

(b) a finding that the practitioner coerced a person;

(c) a finding in relation to relevant misconduct of the practitioner if—

(i) the finding results in health, conduct or performance action being taken against the practitioner; and

(ii) the health, conduct or performance action results in a condition being placed on the practitioner's registration as a health practitioner;

(d) a finding against the practitioner if—

(i) the finding results in health, conduct or performance action being taken against the practitioner; and

(ii) the health, conduct or performance action results in a condition being placed on the practitioner's registration as a health practitioner; and

(iii) the condition prevents the practitioner from carrying out a function of an authorised coordinating practitioner.

Example—par (d)

As a consequence of health, conduct or performance action taken against a doctor, they have a condition placed on their registration that prevents them from prescribing certain medicines used for voluntary assisted dying. This condition prevents the doctor from being able to carry out all the functions of an authorised coordinating practitioner because they are not able to prescribe all the medicines necessary for an individual accessing voluntary assisted dying.

(2) For subsection (1) (c) and (d), a finding against a health practitioner is a disqualifying finding only while the condition applies to the practitioner's registration as a health practitioner.

(3) In this section:

controlled medicine—see the *Medicines, Poisons and Therapeutic Goods Act 2008*, section 11 (2).

prescription only medicine—see the *Medicines, Poisons and Therapeutic Goods Act 2008*, section 11 (2).

relevant misconduct, of a health practitioner, means any of the following conduct:

(a) the practitioner misappropriating a controlled medicine or prescription only medicine;

(b) the practitioner treating a patient if the practitioner knows or believes that they—

(i) are a beneficiary under the will of the patient; or

(ii) may otherwise benefit financially or in any other material way (other than by receiving reasonable fees for the provision of services) from treating the patient;

(c) the practitioner giving false or misleading information to—

(i) a registration authority; or

(ii) any other professional, ethical standards or disciplinary body in Australia or outside Australia.

Example—par (ii)

The Royal Australian College of General Practitioners

31 Information for application for authorisation—Act, s 88 (2) (b)

(1) The following information is prescribed:

(a) the name, business address and telephone number of the health practitioner;

(b) the health practitioner's registration number;

(c) any adverse finding made against the health practitioner;

(d) any notification made about the health practitioner under the *Health Practitioner Regulation National Law (ACT)*;

(e) details about the health profession the practitioner holds registration in and how long the health practitioner has held the registration;

(f) if the health practitioner has previously been registered in a health profession other than the health profession mentioned in paragraph (e)—details about the previous registration and the period the health practitioner held the registration;

(g) any recent and relevant clinical practice undertaken by the health practitioner;

Examples—recent and relevant clinical practice

providing palliative care, undertaking patient assessment, undertaking clinical decision making

(h) if the health practitioner is a doctor—their area of specialisation;

(i) if the health practitioner is a nurse practitioner or registered nurse—their relevant area of practice.

(2) In this section:

health profession—see the *Health Practitioner Regulation National Law (ACT)*, section 5.

32 Eligibility requirements for authorisation as authorised coordinating practitioner or authorised consulting practitioner—Act, s 89 (1) (b)

(1) The following eligibility requirements are prescribed:

(a) the health practitioner has completed any authorised practitioner training approved by the director-general;

(b) the health practitioner has told the director-general about—

(i) any adverse finding made against the practitioner; and

(ii) any notification made about the health practitioner under the *Health Practitioner Regulation National Law (ACT)*;

(c) the health practitioner has not had a disqualifying finding made against them;

(d) if the health practitioner is a doctor—the doctor—

(i) holds specialist registration and has practised for at least 1 year as the holder of that registration; or

(ii) holds general registration and has practised for at least 5 years as the holder of that registration; or

(iii) holds specialist registration and has practised for at least 5 years as the holder of general registration;

(e) if the health practitioner is a nurse practitioner—they have at least 1 year of experience as a nurse practitioner in a relevant area of practice.

(2) In this section:

specialist registration means specialist registration under the *Health Practitioner Regulation National Law (ACT)* in the medical profession.

33 Eligibility requirements for authorisation as authorised administering practitioner—Act, s 89 (2) (b)

The following eligibility requirements are prescribed:

(a) the health practitioner has completed any authorised practitioner training approved by the director-general;

(b) the health practitioner has told the director-general about—

(i) any adverse finding made against the practitioner; and

(ii) any notification made about the health practitioner under the *Health Practitioner Regulation National Law (ACT)*;

(c) the health practitioner has not had a disqualifying finding made against them;

(d) if the health practitioner is a registered nurse—they have at least 5 years of experience as a registered nurse.

34 Authorisation conditions—Act, s 93 (1) (b)

The following conditions are prescribed:

(a) the authorised practitioner must, every 3 years after the day the practitioner becomes an authorised practitioner, successfully complete any authorised practitioner refresher training approved by the director-general;

(b) the authorised practitioner must tell the director-general, in writing, about the following matters within 7 days after the day the practitioner becomes aware of the matter:

(i) any adverse finding made against the practitioner;

(ii) any change to the practitioner's registration as a health practitioner;

(iii) any notification made about the practitioner under the *Health Practitioner Regulation National Law (ACT)*;

(c) any condition placed on the health practitioner's registration as a health practitioner.

35 Information for register of authorised practitioners—Act, s 96 (2)

The following details about an authorised practitioner are prescribed:

(a) the name, business address and telephone number of the practitioner;

(b) the practitioner's registration number;

(c) the day the director-general authorised the practitioner;

(d) whether the practitioner is authorised as an authorised coordinating practitioner, authorised consulting practitioner or authorised administering practitioner;

(e) if the practitioner is a doctor—their area of specialisation;

(f) if the practitioner is a nurse practitioner or registered nurse—their relevant area of practice;

(g) any conditions on the practitioner's authorisation, other than the conditions mentioned in section 34 (a) and (b).

Part 5 Conscientious objections—health practitioners and health service providers

36 Relevant health service providers—Act, s 100 (4), def *relevant health service provider*

(1) The following are prescribed:

(a) a social worker;

(b) a speech pathologist.

(2) In this section:

social worker means an individual with a qualification that provides eligibility for a practising membership, other than a student membership or retirement membership, with the Australian Association of Social Workers Limited.

speech pathologist means an individual with a qualification that provides eligibility for a practising membership with The Speech Pathology Association of Australia Limited.

Part 6 Obligations of facility operators

37 Requirements for policy—Act, s 108 (1) (b)

(1) The following requirements are prescribed:

(a) the policy must include the contact details for the approved care navigator service;

(b) the policy must state whether the operator of the facility provides residents of the facility with access to a relevant service;

(c) the policy must include a statement about the effect of the Act, section 109 (Facility operator must not withdraw or refuse to provide care service).

(2) In this section:

relevant service—see the Act, section 102 (2).

Part 7 Voluntary assisted dying oversight board

38 Information to be kept by board about requests for, or access to, voluntary assisted dying—Act, s 119 (1) (d)

(1) The following information is prescribed:

(a) the number of individuals who underwent a first assessment;

(b) the number of individuals who were eligible to access voluntary assisted dying after undergoing a first assessment;

(c) the number of individuals who were ineligible to access voluntary assisted dying after undergoing a first assessment;

(d) the number of individuals who underwent a consulting assessment;

(e) the number of individuals who were eligible to access voluntary assisted dying after undergoing a consulting assessment;

(f) the number of individuals who were ineligible to access voluntary assisted dying after undergoing a consulting assessment;

(g) the number of individuals who made a second request;

(h) the number of individuals who made a final request;

(i) the number of individuals who were eligible to access voluntary assisted dying after undergoing a final assessment;

(j) the number of individuals who died as a result of self-administering an approved substance;

(k) the number of individuals who died as a result of an approved substance being administered to them by their administering practitioner;

(l) the number of individuals to whom both of the following apply:

(i) the individual's coordinating practitioner decided the individual was eligible to access voluntary assisted dying after undertaking a first assessment;

(ii) the individual died of a cause other than an approved substance being administered by or to the individual;

(m) the following details about each individual who underwent a first assessment or consulting assessment:

(i) the individual's age;

(ii) the suburb or town of the individual's home address;

(iii) the language used by the individual at home (if known);

(iv) whether the individual used an interpreter during the assessment;

(v) if the individual's coordinating practitioner or consulting practitioner decided the individual met the eligibility requirement mentioned in the Act, section 11 (1) (b)—the individual's condition or conditions that met the requirement;

(vi) the reasons why the coordinating practitioner or consulting practitioner decided the individual's condition or conditions were or were not advanced, progressive and expected to cause death;

(n) the following information about each individual who was eligible to access voluntary assisted dying after undergoing a final assessment:

(i) the individual's age;

(ii) the suburb or town of the individual's home address;

(iii) the language used by the individual at home (if known);

(iv) whether the individual used an interpreter during the final assessment;

(o) any adverse events, clinical errors or unexpected outcomes reported to the board.

(2) In this section:

eligible to access voluntary assisted dying—an individual is ***eligible*** to access voluntary assisted dying if—

(a) for an individual who has undergone a first assessment—the individual's coordinating practitioner has decided the individual—

(i) meets the eligibility requirements; and

(ii) understands the information given to the individual under the Act, section 16 (3); and

(b) for an individual who has undergone a consulting assessment—the individual's consulting practitioner has decided the individual—

(i) meets the eligibility requirements; and

(ii) understands the information given to the individual under the Act, section 16 (3); and

(c) for an individual who has undergone a final assessment—the individual's coordinating practitioner has decided the individual meets the final assessment requirements.

ineligible to access voluntary assisted dying—an individual is ***ineligible*** to access voluntary assisted dying if the individual is not eligible to access voluntary assisted dying.

39 Number of members required for valid vote—Act, s 122 (1) (a)

The number of members that constitutes a majority of the board is prescribed.

40 Number of votes required for valid decision—Act, s 122 (1) (b)

The number of votes that constitutes a majority of the votes cast by the number of members present is prescribed.

Part 8 Review of coordinating practitioner, consulting practitioner and administering practitioner decisions

41 Information for reviewable decision notice—Act, s 135 (1)

The following information is prescribed:

(a) details about the reviewable decision made by the decision-maker;

(b) a statement that an affected person may apply to the ACAT for review of the reviewable decision;

(c) a statement about how an affected person may apply to the ACAT for review of the reviewable decision.

Part 9 Miscellaneous

42 Information for application for residency exemption—Act, s 154 (2) (c)

The following information is prescribed:

(a) the name, date of birth, home address and telephone number of the individual;

(b) the condition the individual intends to rely on in making a request to access voluntary assisted dying;

(c) the date the condition mentioned in paragraph (b) was diagnosed;

(d) 1 of the following:

(i) the name of the health practitioner who diagnosed the condition mentioned in paragraph (b);

(ii) the address of the place where the condition mentioned in paragraph (b) was diagnosed;

(iii) the name and business address of the individual's treating health practitioner;

(e) if the individual has a coordinating practitioner—the name, business address and telephone number of the coordinating practitioner;

(f) if the individual intends to rely on a family member, friend or carer living in the ACT to demonstrate their substantial connection to the ACT—

(i) the name, telephone number and home address of the family member, friend or carer; and

(ii) a statement about whether the individual intends to live with the family member, friend or carer;

(g) a statement about whether the individual intends to make a practitioner administration decision or self-administration decision;

(h) if the individual intends to make a self-administration decision—the address where the individual intends to—

(i) store any approved substance prescribed to the individual before self-administration; and

(ii) self-administer any approved substance prescribed to the individual;

(i) if the individual intends to make a practitioner administration decision—the address of the place where the individual intends to be administered any approved substance prescribed to the individual;

(j) the address in the ACT where the individual intends to receive treatment for the condition mentioned in paragraph (b).

43 Requirements for counsellors—Act, s 155 (3), def *relevant health professional*, par (a)

The counsellor must have a qualification that provides eligibility for registration as a practising counsellor with the Australian Counselling Association Limited.

44 Requirements for social workers—Act, s 155 (3), def *relevant health professional*, par (c)

The social worker must have a qualification that provides eligibility for a practising membership, other than a student membership or retirement membership, with the Australian Association of Social Workers Limited.

45 Requirements for other health professionals—Act, s 155 (3), def *relevant health professional*, par (d)

(1) The health professional must be a speech pathologist.

(2) In this section:

speech pathologist means an individual with a qualification that provides eligibility for a practising membership with The Speech Pathology Association of Australia Limited.

Dictionary

(see s 3)

Note 1 The Legislation Act contains definitions relevant to this regulation. For example:

- adult
- doctor
- health practitioner
- individual
- nurse
- nurse practitioner.

Note 2 Terms used in this regulation have the same meaning that they have in the *Voluntary Assisted Dying Act 2024*. For example, the following terms are defined in the Act, dict:

- administer
- administering practitioner
- administration decision
- approved disposer
- approved substance
- approved supplier
- board
- consulting assessment (see s 23 (1))
- final assessment (see s 35)
- final assessment requirements (see s 31)
- final request (see s 32 (1))
- first assessment (see s 16 (1))
- first request (see s 13 (1))
- practitioner administration decision
- request and assessment process
- second request (see s 27 (2))
- self-administration decision.

adverse finding, in relation to a health practitioner, for part 4 (Requirements for coordinating practitioners, consulting practitioners and administering practitioners)—see section 29 (1).

condition—see the Act, section 11 (7).

disqualifying finding, in relation to a health practitioner, for part 4 (Requirements for coordinating practitioners, consulting practitioners and administering practitioners)—see section 30.

health, conduct or performance action, for part 4 (Requirements for coordinating practitioners, consulting practitioners and administering practitioners)—see the *Health Practitioner Regulation National Law (ACT)*, section 5.

registration authority, for part 4 (Requirements for coordinating practitioners, consulting practitioners and administering practitioners)—see the *Health Practitioner Regulation National Law (ACT)*, section 5.

registration number, of a health practitioner, for part 4 (Requirements for coordinating practitioners, consulting practitioners and administering practitioners)—see section 29 (1).

relevant area of practice, for a nurse or nurse practitioner, for part 4 (Requirements for coordinating practitioners, consulting practitioners and administering practitioners)—see section 29 (1).

Endnotes

1 About the endnotes

Amending and modifying laws are annotated in the legislation history and the amendment history. Current modifications are not included in the republished law but are set out in the endnotes.

Not all editorial amendments made under the *Legislation Act 2001*, part 11.3 are annotated in the amendment history. Full details of any amendments can be obtained from the Parliamentary Counsel's Office.

Uncommenced amending laws are not included in the republished law. The details of these laws are underlined in the legislation history. Uncommenced expiries are underlined in the legislation history and amendment history.

If all the provisions of the law have been renumbered, a table of renumbered provisions gives details of previous and current numbering.

The endnotes also include a table of earlier republications.

2 Abbreviation key

A = Act
AF = Approved form
am = amended
amdt = amendment
AR = Assembly resolution
ch = chapter
CN = Commencement notice
def = definition
DI = Disallowable instrument
dict = dictionary
disallowed = disallowed by the Legislative Assembly
div = division
exp = expires/expired
Gaz = gazette
hdg = heading
IA = Interpretation Act 1967
ins = inserted/added
LA = Legislation Act 2001
LR = legislation register
LRA = Legislation (Republication) Act 1996
mod = modified/modification
NI = Notifiable instrument
o = order
om = omitted/repealed
ord = ordinance
orig = original
par = paragraph/subparagraph
pres = present
prev = previous
(prev...) = previously
pt = part
r = rule/subrule
reloc = relocated
renum = renumbered
R[X] = Republication No
RI = reissue
s = section/subsection
sch = schedule
sdiv = subdivision
SL = Subordinate law
sub = substituted
underlining = whole or part not commenced or to be expired

3 Legislation history

Voluntary Assisted Dying Regulation 2025 SL2025-19
notified LR 11 September 2025
s 1, s 2 commenced 11 September 2025 (LA s 75 (1))
remainder commenced 3 November 2025 (s 2)

4 Amendment history

Commencement

s 2	om LA s 89 (4)