



**Queensland
 Government**

Mental Health Act 2016
**Administrator Consent
 (Classified Patient)**

(Affix identification label here)

URN:

Family name:

Given name(s):

Address:

Date of birth:

Sex: M F I

Mental Health Act (MHA) 2016, Sections 69, 74

- An authorised mental health service (AMHS) Administrator may consent to a person in custody subject to a recommendation for assessment or *Transfer Recommendation* being transported to an inpatient unit of the AMHS for assessment or treatment and care as a classified patient.
- Also, an AMHS administrator may consent to a person in an AMHS subject to a *Transfer Recommendation* remaining in the AMHS for treatment and care as a classified patient.
- The Chief Psychiatrist may also consent to a person being transported to an inpatient unit of an AMHS for treatment and care as a classified patient.
- A *Custodian Consent* is also required for the transfer to take place or for the person to remain in the AMHS.

1. Person's details

• Not required if label affixed in top right corner.

Surname:		Given name(s):	
Residential address:			
Town / Suburb:		State:	Postcode:
Date of birth:	Age: or	Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Intersex / Indeterminate <input type="checkbox"/> Not stated / unknown	

2. Name of AMHS

3. For the transfer of a minor to a high security unit

TO: Chief Psychiatrist

- I consent to the minor being transferred
 I do NOT consent to the minor being transferred

Name:	Signature:	Date:
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TO: AMHS Administrator

4. Administrator consent to transport or remain in AMHS

- I consent to the person being transported to, or remaining in, the AMHS for admission as a classified patient
 I do NOT consent to the person being transported to, or remaining in, the AMHS for admission as a classified patient

Reasons for not consenting:

- If the reason is that a bed is not available, the Administrator must advise on the expected timeframe for a bed to be available.
- If it is not clinically appropriate for the person to wait for a bed to become available, the Administrator must outline the efforts made to contact other relevant AMHS to find a bed.

Provide reasons that you have not consented by reference to *MHA 2016, section 69(3)*:

Name:	Signature:	Date:
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DO NOT WRITE IN THIS BINDING MARGIN

V1.00 - 01/2017



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ADMINISTRATOR CONSENT (CLASSIFIED PATIENT)



**Queensland
Government**

Mental Health Act 2016

**Administrator Consent
(Classified Patient)**

(Affix identification label here)

URN:

Family name:

Given name(s):

Address:

Date of birth:

Sex: M F I

**TO: Clinician seeking consent for assessment or transfer
Custodian (not required if Administrator does not consent)**

5. Chief Psychiatrist consent to transport to AMHS

• Chief Psychiatrist consent is not required if the Administrator has provided consent, unless the patient is a minor and the AMHS is a high security unit.

I consent to the person being transported to, or remaining in, the AMHS for admission as a classified patient

Name:	Signature:	Date:
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**TO: AMHS Administrator
Clinician seeking consent for assessment or transfer
Custodian**

DO NOT WRITE IN THIS BINDING MARGIN