Queensland Government
Mental Health Review Tribunal

Notice of Appeal against Chief Psychiatrist's Decision to suspend or extend suspension of Limited Community Treatment

Mental Health Act 2016 Queensland
Sections 313, 314, 315, 532, 533
Form-12-v2

- A patient who is dissatisfied with the decision of the Chief Psychiatrist to suspend their limited community treatment or extend a period of suspension of their limited community treatment may appeal the decision to the Mental Health Review Tribunal (**Tribunal**).
- The notice of appeal must be given to the Tribunal within 28 days after the person making the appeal (**Appellant**) receives notice of the Chief Psychiatrist's decision.
- The Tribunal may, at any time, extend the time for giving the notice of appeal.

Appellant's details

Given name/s	Family name	
Address		
Town / Suburb	State	Postcode
Phone No.		

Notice

I am dissatisfied with the decision of the Chief Psychiatrist to suspend my Limited Community Treatment or to extend the period of suspension of my Limited Community Treatment.

Name of Authorised Mental Health Service:
Date of Chief Psychiatrist's decision:
Date the decision was received:

I am appealing to the Tribunal against this decision. Reasons why I am appealing

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Signature	Date / /

Thank you for completing this Notice of Appeal. Please return it to the Tribunal by one of the following methods:

Post to: MHRT, PO Box 15818, City East, Brisbane, QLD, 4002
Fax to: (07) 3234 1540
Email to: enquiry@mhrt.qld.gov.au

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Reasons *continued*

To be completed if a stay is granted

Stay of decision

I have decided to stay the decision of the Chief Psychiatrist dated [*insert date*] to suspend the Appellant's limited community treatment or extend a period of suspension of their limited community treatment.

The stay is to be operative until the appeal is decided, withdrawn or until / / , whichever is sooner.

Conditions for this stay include:

I may revoke or amend this decision.

Presiding member's signature	Print Name
	Date / /

To: Appellant
Chief Psychiatrist

Office Level 16, 53 Albert St Brisbane 4000
Postal PO Box 15818 Brisbane City East
Phone 07 3235 9059
Fax 07 3234 1540
Free Call 1800 00 6478