NSW Health Form

Procedure to appoint medical referees



Under the Public Health Regulation 2022 (Regulation), there are several procedures in relation to cremation that can only be completed by a medical referee.

Schedule 7 of the regulation defines a medical referee as:

- (a) a public health officer who is a registered medical practitioner, or
- (b) a medical superintendent of a public hospital, within the meaning of the *Health Services Act* 1997. or
- (c) a registered medical practitioner who has been appointed by the Secretary as a medical referee for this Regulation.

The Secretary's authority under Schedule 7 of the Public Health Regulation 2022 appoint a registered medical practitioner as a medical referee for the purposes of Part 8 of the Regulation has been delegated to the Director, South Eastern Sydney Public Health Unit.

Appointments as NSW Medical Referees are conducted within two weeks of application being received.

Application procedure

- An application for appointment as a medical referee should be made on the "APPLICATION FOR APPOINTMENT AS A MEDICAL REFEREE - Public Health Regulation 2022" form.
- The application should be addressed to the Director, South Eastern Sydney Public Health Unit, Locked Bag 88, Randwick NSW 2031 or faxed to 02 9382 8314 or emailed to <u>SESLHD-PublicHealthUnit-AdminTeam@health.nsw.gov.au</u>.
- Applicants are required to be legally qualified and hold General Registration as a medical practitioner with the Australian Health Practitioner Regulation Agency.
- 4. Applicants whose registration includes conditions, a reprimand or an undertaking may not be considered.

- 5. Applicants who have been suspended will not be considered.
- Applicants must satisfy the requirement that they have practised medicine as a fully qualified medical practitioner for at least three of the last five years.
- 7. The applicant will be advised of the appointment in writing via email and post.
- 8. NSW Health maintains a register of medical referees and updates the register quarterly. The list of medical referees is available at www.seslhd.health.nsw.gov.au/services-clinics/directory/public-health/medical-referees
- 9. NSW Health each quarter distributes an up to date register of medical referees in NSW to:
 - Members of Cemeteries and Crematoria Association of NSW
 - Executive Secretary, Australian Funeral Directors Association NSW
 - Funeral Industry Association
 - Funeral and Allied Industries Union NSW
- 10. NSW Health liaises with the Medical Council of NSW and the Australian Health Practitioner Regulation Authority to ensure details supplied in the application are correct and that the applicant complies with the requirements for appointment.
- 11. Appointed medical referees should immediately notify NSW Health of any change of address, retirement, change in registration status or other details. Failure to notify NSW Health may result in withdrawal of appointment.
- 12. Where an appointed medical referee is reported by the Australian Health Practitioner Regulation Authority to have new conditions or undertakings placed on his/her registration, the appointment may be withdrawn if the condition or undertaking is considered likely to interfere with the practitioner's ability to perform the duties of a medical referee.

For further information please contact the SES Public Health Unit on (02) 9382 8333 option 5.

NSW Health Application for appointment as a medical referee

Form

Schedule 7 Public Health Regulation 2022

PLEASE PRINT CLI	EARLY – ALL SECTIO	NS MUST BE COMPLET	IED	
Full Name:(If different to name used for Registration			Date of birth:	
Name of Practice: _				
Addressof Practice	:			
Suburb:			State:	Postcode:
Phone:		Fax:	Mobile:	
Personal Email: (so	we can contact you dir	ectly)		
Medical qualification	ons:			
	_	n the Australian Health s. If not, you are not elig	_	n Agency and have been e a Medical Referee.
Please provide your	r: Registration Num	ber: MED		Status:
Conditions or Undertakings:		No	Registration Valid to (date):	
Please provide det	ails of employment h	istory in medicine for t	he last five years:	
Employer	ı	Position details		Period (From - to)
Reason for app	olying:			
a) I have been r	equested to provide N	Medical Referee's Crema	tion Permits by:	
Funeral Director:	Name:			
	Address:			
	Contact Number:			
Other:	Name:			
	Address:			
	Contact Number:			
b) Other reason:				
	rm as a medical refere			ons 106 and 107 of the Public
	at it is my responsibil			address, to my Medical
Registration St	atus including condit	ions and undertakings)	, or it i retire.	

Completed forms should be sent to: **South Eastern Sydney Public Health Unit, Locked Mail Bag 88, Randwick, NSW, 2031 or faxed to (02) 9382 8314** or emailed to <u>SESLHD-PublicHealthUnit-AdminTeam@health.nsw.gov.au</u>