

DRUG AND ALCOHOL DIVERSION

Referral Form

Referral to Illicit Drugs Court Diversion Program (CDP) or Drug and Alcohol Assessment and Referral (DAAR)

Eligibility for CDP requires a plea of guilty to eligible offences you are appearing for.


Eligibility for DAAR requires acknowledging a link between drug/alcohol use and offences you are appearing for.

Section 1 – Defendant’s details and eligibility


Defendant or Representative to complete




Surname: _____ Given name(s): _____


 Gender: Male Female Self-described _____


 Date of birth: ___/___/___  Country of birth: _____

 Phone: _____ @ Email: _____

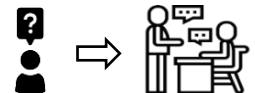
 Address: _____

I identify as: Aboriginal  Torres Strait Islander 
 Both Aboriginal and Torres Strait Islander 
 Neither Aboriginal or Torres Strait Islander
 Other (specify ethnicity/heritage e.g. Dutch, Chinese) _____

 Supports/accessibility you require (language, mobility, communication) Nil

 Yes - advise details of your requirements. If language based, advise dialect

ELIGIBILITY - If you need help completing this part, visit the Registry



Q1 Are you charged with one or more of the following offences (*Drugs Misuse Act 1986*):

- s9: Possess dangerous drugs, with a quantity *less* than the quantity listed in Schedule 1 (see registry for list)
- s10(1): Possess things
- s10(2): Possess utensil
- s10(4A): Fail to dispose
- s10(4): Fail to take reasonable care

Yes
Go to Q2

No Information unavailable
Go to Q4

Q2 Have you been given two diversion sessions before (Court or Police Ordered)?

Yes
Go to Q4

No
Go to Q3

Q3 Do you have pending, or previous convictions for an offence of a sexual nature; or an **indictable** offence involving violence (excluding the following in the *Criminal Code 1899*):

- s335: Common Assault
- s340 Serious Assaults (a)
- s340 Serious Assaults (b) *or*

pending, or previous convictions for an offence in the *Drugs Misuse Act 1986* dealt with on **indictment**:

- s5: Trafficking in dangerous drugs
- s6: Supplying dangerous drugs
- s8: Producing dangerous drugs
- s9: Possessing dangerous drugs

Yes
Go to Q4

No
Eligible for CDP
Take this form to Registry

Q4 Are you 18 years of age or over?

Yes
Go to Q5

No
Not eligible for CDP or DAAR

Q5 Have you been given two DAAR sessions in the last five years?

Yes
Not eligible for CDP or DAAR

No
Eligible for DAAR
Take this form to Registry

Section 2 – Defendant’s disclosure and consent

Defendant to complete

Do you currently have pending, or have you previously been convicted of, an offence of a sexual nature or an offence involving violence (excluding s335, s340(1)(a) or s340(1)(b) of the Criminal Code Act 1899)? If you answer ‘yes’ you may be required to complete your course by telephone. Yes No

I would prefer to attend the session In person By phone – you must phone the session provider

I confirm:

- the referral process has been explained to me and I agree to attend the session arranged on my behalf.
- I understand the Queensland Government is collecting my personal information on this form to assess my eligibility to participate in DAAR or CDP under the *Penalties and Sentences Act 1992* and the *Youth Justice Act (1992)* for people under 18 years of age.
- I understand the Queensland Government will also use the de-identified personal information on this form for statistical purposes to report on and measure the effectiveness of the DAAR and Court Diversion programs.
- I understand information provided in this form will be disclosed to the Diversion Coordination Service to schedule the session, and the health service provider to provide the session.
- I authorise the relevant alcohol and other drug session provider to disclose to Queensland Government information about my participation and completion of the session, or failure to participate in and complete the session.

Defendant’s signature: _____ Date: _____

Section 3 – Program details

Court Officer to complete

The above-named person is eligible for and consents to participate in CDP DAAR

Contact Diversion Coordination Service to schedule an appointment for defendant. Record session details below.

The session will be conducted: in person by phone – defendant must phone the session provider

Session provider: _____

Session address/phone: _____

Day: _____ Date: _____ Time: _____

Diversion reference number: _____ Court Location: _____

If, for any reason beyond your control, you are unable to attend and complete your session, you must contact Referral and Support Services by telephone on (07) 3738 7100 to discuss your options.

Court Officer - Defendant must receive copy, original to court & email copy to Courtdiversion@justice.qld.gov.au
Please scan double-sided