



MEDIA STATEMENT

12 February 2024

Private Member's Bill introduced to protect VAD doctors from prosecution

Kate Chaney MP, Federal Member for Curtin, has today introduced a Private Member's Bill to the House of Representatives to ensure all Australians have equal access to end-of-life services.

Voluntary assisted dying is now lawful in all Australian states. But due to a decades-old amendment, the Commonwealth Criminal Code prevents people from promoting suicide using a carriage service.

Late last year the Federal Court found that this included online VAD consultations. This means doctors are at risk of being prosecuted if they use telehealth to discuss VAD with patients.

Dr Monique Ryan MP, Member for Kooyong, has seconded the Bill, which makes a simple change to the Criminal Code, by making it clear that VAD is not suicide. It will not negatively impact the intent of the original amendment.

Comments attributable to Kate Chaney MP:

"In recent years, telehealth has helped vastly improve access to health services, especially in regional and remote Australia. It is now considered an integral part of our health care delivery, except when it comes to end of life care.

"Decades ago, this section was inserted to prevent a person from causing another to take their own life. As an unintended and unfortunate consequence, it is now preventing eligible patients from accessing legal end-of-life options, simply because of where they live.

"I have heard heartbreaking stories of terminally ill people travelling long distances in agony to see a doctor in person, or both doctor and patient travelling for hours to have a consultation halfway in a carpark. VAD practitioners are being forced to choose between compassionate and convenient care for their patients and the risk of being prosecuted.

"There is broad support for the legislative amendment outlined in my PMB – from medical practitioners, patient support groups, and State Attorneys-General across Australia. I'm now calling on the Federal Government to show compassion to people who can't access treatment options that are easily available to those living in major centres.

"The Commonwealth Criminal Code in its current form is neither fair nor equitable. But that can be easily set right if the Parliament passes this Bill."

Comments attributable to Dr Monique Ryan MP:

"The legislation must be updated to that ensure access to Voluntary Assisted Dying is fair.

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Kate Chaney MP

FEDERAL MEMBER FOR CURTIN

“Australia should not be a country in which people living in rural and regional settings receive worse end of life care than those living in the cities.

“Suicide is the act of deciding to take one's life. Voluntary assisted dying is the act of assuming control over one's inevitable and imminent death. They are not the same thing, and their conflation by the existing legislation is wrong.

“Terminally ill people should not be required to travel long distances for a 10-minute in-person appointment, or to pick up a prescription, because of outdated legislation. Doctors should be supported in providing the best care possible to their dying patients.

“With support from the state Attorneys-General, doctors, and patient support groups, there is broad community support to amending this law. The only thing standing in the way is the Federal Government. This law must be amended.”

Comments attributable to Dr Cameron McLaren, Voluntary Assisted Dying Australia & New Zealand:

“Telehealth assessments for VAD eligibility continue to be conducted in New Zealand, and other jurisdictions around the world with no evidence to suggest that this jeopardises patient safety. Every Voluntary Assisted Dying Review Board in the country has recommended allowing Telehealth assessments for VAD eligibility. Legislators should listen to these experts whose primary purpose is to ensure the safe operation of VAD legislation.”

Comments attributable to Dr Linda Swan, Go Gentle Australia CEO:

“We should not be forcing terminally ill people to travel long distances to appointments when an alternative exists in the form of telehealth. It particularly disadvantages rural and regional Australians who depend on telehealth for their medical care, and those who are too sick to travel to an in-person appointment. The ban on telehealth is not a safeguard, it's an impediment to high-quality care.”

Comments attributable to Professor Ben White, Professor of End-of Life Law and Regulation, Australian Centre for Health Law Research at Queensland University of Technology:

“Our research has shown this Commonwealth law is unfair and cannot be justified. It causes harm and suffering to terminally ill patients, their families and the health professionals supporting them. This law was not intended to apply to VAD and we support the very simple change to the law so patients do not experience unfair barriers.”

Comments attributable to Tom Simpson, The Society of Hospital Pharmacists of Australia President:

“As a VAD-credentialed pharmacist myself, I know first-hand the challenges faced not just by patients, but by practitioners who want certainty that they are practicing within the law. If a doctor phones a pharmacist for advice on administering a VAD medication, the answer currently is ‘I can't tell you that over the phone’ – an answer that puts the focus on not breaching the Code, rather than recognising that there's a doctor and a patient at the other end of the line.”

Comments attributable to Dr Nick Carr, VAD medical specialist:

“This week a dying man came from regional Victoria to discuss VAD with me. Because we could not use telehealth,

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he spent over 8 hours on the round trip. That's eight of his last previous hours, on a glorious day when he should have been down by the river with his dog.”

[ENDS]

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