

Go Gentle Australia

Policy priorities for 2023

Introduction

At Go Gentle Australia (GGA), our vision is an Australia where we all have choice at the end of life. We believe all eligible Australians should have the option to access safe, compassionate voluntary assisted dying (VAD) laws, if they choose.

VAD laws have passed in all six Australian states, allowing eligible terminally ill people to access help from their doctor to end their life. VAD is now available in Victoria, Western Australia, Tasmania, Queensland and South Australia, with the law in New South Wales to take effect on 28 November 2023. Only the ACT and Northern Territory are yet to legislate, although the ACT is currently consulting on the issue.

Our priorities for 2023 focus on ensuring that the laws already in place work as well as possible for people, families and health professionals, and ensuring access for eligible Australians no matter where you live.

Our policy priorities

The GGA policy priorities for 2023 are:

- Pass VAD laws in the ACT and Northern Territory
- Clarify Commonwealth law so telehealth can be used for VAD practice
- Minimise out-of-pocket costs for people seeking VAD and ensure VAD practitioners are remunerated for their work
- Secure consistency and improvements for VAD laws nationwide

Further detail is included on the next page.

Pass VAD laws in the ACT and Northern Territory

700,000 citizens in the Northern Territory and Australian Capital Territory still do not have access to VAD laws.

Last year, we successfully campaigned with others to pass the Restoring Territory Rights Act in federal parliament so the Territories could decide for themselves on the issue of VAD. We will campaign for VAD legislation in both jurisdictions, as we have done for every other state.

We will proactively participate in consultation on VAD led by the ACT government.

Clarify Commonwealth law so telehealth can be used for VAD practice

There is ambiguity in the *Criminal Code Act 1995* (Cth) as to whether telecommunications can be used for VAD assessment, including telehealth. This produces legal uncertainty for doctors, who face the threat of a \$222,000 penalty if they contravene the Code, and access barriers for terminally ill people - especially those in regional areas who cannot readily access in-person care.

We will work with political and policy stakeholders to secure urgent clarification of the law to make sure telehealth can be used in VAD provision.

Minimise out-of-pocket costs for people seeking VAD and ensure VAD practitioners are remunerated for their work

There is no item on the Medical Benefits Schedule (MBS) for VAD. This means doctors must either ask their patients for a significant out-of-pocket expense or, as many do, bear the cost themselves. This is unsustainable.

We will work with medical stakeholders and peak bodies to identify alternative funding models for VAD.

Secure improvements and consistency for VAD laws nationwide

Although all state VAD laws broadly follow an 'Australian model', they have small differences which create inequities between people seeking VAD. Consistent state laws will provide clarity and certainty for patients and healthcare professionals.

We will advocate for change based on patient, family and health professional feedback to:

- Create a single approach to timeframes to death for people seeking VAD, with compassionate exemptions available for people whose disease trajectory means they cannot meet timeframe criteria e.g. Huntington's disease
- Develop national 'best practice' guidelines for aged care and residential facilities to ensure minimum standards for people seeking VAD, wherever they live in Australia
- Remove state residency requirements, largely redundant now most jurisdictions have passed VAD laws

Reviews of the Acts are upcoming in Victoria and Western Australia and we will capture feedback from patients, families and health professionals to provide input to these reviews.