

Implementation of Voluntary Assisted Dying in Residential Aged Care Facilities

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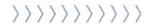


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Who seeks VAD



- Its not for everyone, or even most
- All walks of life, backgrounds, gender
- Common feature
 - Strong self-belief
 - Control of own life
 - Control of own actions



Eligibility

- $\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle$
 - At least one condition that is advanced, progressive and will cause death
 - On the balance of probabilities will cause death within
 - 12 months neurodegenerative
 - 6 months others
 - Must have decision making capacity
 - Cognition
 - Mood
 - Voluntary and without coercion
 - Enduring request



Eligibility

- $\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle$
 - In RACF
 - Movement disorders
 - Terminal cancer



Assessments

- $\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle$
 - Two medical practitioners minimum
 - Multiple requests = multiple visits
 - Witnessing written request
 - Telehealth forbidden (federal legislation)
 - May require more specialists if eligibility in doubt



Medication



- Dispensed and instructions given by visiting pharmacist
- Storage
- Preparation
- Disposal



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Dying by VAD in RACF

- Visitors
- Confirmation and certification
- Which staff will be on shift?



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Suggestions

- Inform and survey staff and medical practitioners
- Who will be involved?
- Who definitely does not want to be involved?



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