



LEGISLATIVE ASSEMBLY
FOR THE AUSTRALIAN CAPITAL TERRITORY

SELECT COMMITTEE ON VOLUNTARY ASSISTED DYING BILL

Ms Suzanne Orr MLA (Chair), Ms Leanne Castley (Deputy Chair),

Mr Andrew Braddock MLA, Mr Ed Cocks MLA, Dr Marisa Paterson MLA

Submission Cover Sheet

Inquiry into the Voluntary Assisted Dying Bill 2023

Submission Number: 024

Date Authorised for Publication: 07 December 2023



**The Pharmacy
Guild of Australia**
ACT Branch

6 December 2023

Ms Suzanne Orr MLA

Chair

Select Committee on the Voluntary Assisted Dying (VAD) Bill 2023

Office of the Legislative Assembly for the ACT

LACommitteeVAD@parliament.act.gov.au

Dear Ms Orr

Inquiry into the Voluntary Assisted Dying Bill 2023

The ACT Branch of The Pharmacy Guild of Australia welcomes the opportunity to provide input to the ACT Legislative Assembly's Select Committee Inquiry into the [Voluntary Assisted Dying \(VAD\) Bill 2023](#).

The Bill sets out the government's model to provide eligible Canberrans with the right to make informed end-of-life choices that align with their preferences and values. We note the [Summary of the Proposed framework for Voluntary Assisted Dying in the ACT](#).

The Pharmacy Guild of Australia is a national employers' organisation registered under the federal *Fair Work Act 2009*, with almost 100 years of experience in representing and promoting the value of community pharmacy in the Australian health care system.

The ACT Branch of The Pharmacy Guild of Australia (the Guild) represents the vast majority of 81 community pharmacies in the ACT. Community pharmacy is one of the most accessible and trusted health services in the ACT. The Guild supports policies and practice principles that are patient and family-centred; are provided with dignity, respect, and compassion; and are aligned, as far as possible, with the values, needs and wishes of the individual, and their family or carers. Community pharmacists are increasingly involved in the responsible and compassionate provision of end-of-life care.

End of Life Care

End-of-life care is the healthcare that people receive in the last years, months, and weeks of their lives. It includes palliative care and care provided in the last days of life, including voluntary assisted dying.

Greater involvement of pharmacists in palliative care teams can improve the quality of care and quality of life of patients who require palliative care and allow patients to remain in their homes for longer. Terminal care is healthcare provided to patients who are anticipated to die within a matter of hours, days, or occasionally weeks. During this phase, management of the patient's symptoms is paramount and the timely and appropriate management of medicines can allow patients to remain at home with their families through the dying process. Community pharmacies provide vital access to medicines during terminal care, particularly with people preferring to remain at their own home for as long as possible.

ACT Branch

Level 2, 15 National Circuit, Barton, ACT 2600 Australia
PO Box 13, Deakin West, ACT 2600 Australia
Telephone: + 61 2 6270 8900 · Facsimile: + 61 2 6270 8910
Email: guild.act@guild.org.au · Internet: www.guild.org.au

Following the legislation's implementation, voluntary assisted dying will become a legal end-of-life care option for eligible Canberrans.

Community pharmacists must be recognised as part of a person's end-of-life care arrangements. Communications between all health providers and the patient and their carer and/or family must be optimised, including any transition to voluntary assisted dying which may involve new health providers.

Voluntary Assisted Dying

We participated in [the Voluntary Assisted Dying Stakeholder Roundtables-Health Professionals \(16 March 2023\)](#) that raised issues such as the conscientious objection of health professionals to voluntary assisted dying. The Guild respects and supports the rights of pharmacists who conscientiously object to voluntary assisted dying to refuse to participate in requests for, or processes of, a VAD service.

We note that the Summary of the ACT's Framework for Voluntary Assisted Dying states that a health practitioner or health service provider who conscientiously objects to VAD or is unable to assist with a VAD request for any reason must provide the person requesting VAD with information directing them to the Care Navigator Service.

Conversations about VAD

Clause 152 of the Bill defines the health professionals who can initiate conversations about voluntary assisted dying as a doctor or nurse practitioner, or a 'relevant health professional'. The latter is defined as a counsellor, social worker, or a health practitioner other than a doctor or nurse practitioner.

The Summary of the ACT's Framework for Voluntary Assisted Dying states, "All other registered health practitioners (including medical practitioners and nurse practitioners who do not consider that they have the expertise to appropriately discuss treatment and palliative care options), social workers and counsellors may only initiate a discussion about VAD if they ensure that the individual knows:

- That they have palliative care and treatment options available; and
- That the person should discuss the palliative care and treatment options with their treating doctor.

Our interpretation of this is that a pharmacist could initiate a conversation about voluntary assisted dying consistent with clause 52 (2). It needs to be made clear whether or not pharmacists can initiate a conversation about voluntary assisted dying. If permitted, there will need to be information readily available to guide pharmacists with such discussions, including to understand their obligations under the law.

VAD Pharmacy Service

We note that the ACT Government will establish a VAD Pharmacy Service within Canberra Health Services to perform the following functions:

- Provide information about the substance for people accessing VAD, their families and carers, and medical practitioners, including information on collection, preparation, administration, and disposal of the substance

- Deliver the VAD substance within the ACT to people who have elected self-administration and are unable to travel, and collect any unused VAD substance, and
- Attract, recruit, and retain the right pharmacists with the blend of technical and relational people skills which will be critical to success. The details of this engagement strategy, including provision of out-of-hours and weekend support as needed would be developed as part of the implementation process.

The establishment of the VAD Pharmacy Service within Canberra Health Services is a measured step forward. Over time, and following review, there may be opportunity for community pharmacies to be able to provide VAD services. The competence of community pharmacists to dispense VAD medicines professionally and compassionately for their patients should be recognised in the design, implementation, or review of VAD healthcare services.

It is common for family members to return all of a person's unused medicines to a local community pharmacy after a person dies for disposal by the Federal Government's Return of Unwanted Medicines (RUM) Program. We wish to highlight that there might be potential for unused VAD medicines to be returned to a community pharmacy for disposal as part of the general collection of unused medicines. Is the family/carer liable for the unused end-of-life medication? Guidance would need to be developed for community pharmacy in this regard as it is unreasonable to request community pharmacies to undertake the onerous administrative functions associated with return of unused VAD medicines without reasonable subsidisation.

VAD Resources and Information

We recognise that there will be a period of 18 months for the law to come into effect which will also allow for the development of information resources. The *Summary of the ACT's Framework for Voluntary Assisted Dying* indicates that clinical guidelines will be developed during implementation to support health professionals to engage in considered end-of-life discussions, including providing information on palliative care and treatment options as well as VAD.

These resources would need to include the role of community pharmacists as part of interdisciplinary health care teams within the health system providing end-of-life care, including palliative care and last days of life.

We would be pleased to provide any further information and appear before the Committee. Please contact our Branch Director Liz Lang in the first instance.

Yours sincerely

Simon Blacker
ACT Branch President
The Pharmacy Guild of Australia