

12 October 2017

The Hon Mary Wooldridge MP
Leader of the Opposition (Legislative Council)
Shadow Minister for Health
Member for Eastern Metropolitan Region
PO Box 428
BLACKBURN VIC 3130

By email to: mary.wooldridge@parliament.vic.gov.au

Dear Ms Wooldridge

Re: Voluntary Assisted Dying Bill 2017

The Victorian Branch of the Royal Australian and New Zealand College of Psychiatrists (RANZCP Victorian Branch) thanks you for the opportunity to provide feedback on the draft Voluntary Assisted Dying Bill 2017 (the Bill).

The RANZCP Victorian Branch has almost 1500 members, including more than 1000 qualified psychiatrists. The RANZCP Victorian Branch also has close ties with the community, having consumers and carers represented and participating on a number of committees and projects, including the Victorian Branch Committee.

In April 2017, the RANZCP Victorian Branch made a [written submission](#) to the Ministerial Advisory Panel on voluntary assisted dying which noted the need to increase supports to the palliative care sector and to provide training for non-psychiatrically trained medical practitioners to recognise diminished capacity and other risk factors.

Nothing in this letter should be taken as explicit or implied support of the legalisation of voluntary assisted dying by the RANZCP.

The RANZCP Victorian Branch strongly supports the fact that people with mental illness only will not be eligible to access voluntary assisted dying and that this is explicitly detailed in the Bill.

The RANZCP Victorian Branch also supports the minimum requirements for coordinating and consulting medical practitioners to hold either a Fellowship with a specialist medical college, or be a vocationally registered general practitioner. Either the coordinating medical practitioner or each consulting medical practitioner must have practised as a registered medical practitioner for at least 5 years after completing a Fellowship with a specialist medical college or vocational registration (as the case applies). The RANZCP Victorian Branch supports these provisions of the Bill that ensure that only registered medical practitioners with some experience may undertake assessments for access to voluntary assisted dying.

To be eligible to access voluntary assisted dying, a person must have decision-making

capacity in relation to voluntary assisted dying. If either the coordinating or consulting medical practitioner cannot determine whether the person requesting access to voluntary assisted dying has decision-making capacity, they must refer the person to a registered health practitioner who has appropriate skills and training. The RANZCP Victorian Branch supports this provision which mandates further assessment if decision-making capacity is in question.

Medical practitioners who do not have specialist psychiatric training are very poor at recognising depression and delirium in the medically ill population. Depression in particular is under diagnosed with symptoms assumed to be an understandable reaction to a terminal condition (Ryan, 1995).

The RANZCP Victorian Branch notes that the Bill requires coordinating and consulting medical practitioners to complete approved training in:

- assessing whether or not a person meets the eligibility criteria
- identifying and assessing risk factors for abuse and coercion.

The RANZCP Victorian Branch suggests that this training is developed in consultation with psychiatrists with relevant expertise. The RANZCP Victorian Branch would also consider participating in the credentialing process for approved assessment training.

The RANZCP Victorian Branch considers that the primary role of medical practitioners, including psychiatrists, in end-of-life care is to facilitate the provision of high-quality patient-centred care. The RANZCP Victorian Branch notes the need for increased investment in palliative care to improve access to high-quality end-of-life care, including greater integration of services and improved access to home-based palliative care.

The RANZCP Victorian Branch would like to reiterate the need for appropriate support to be provided to everyone involved in voluntary assisted dying including patients, their families/carers and the medical practitioners.

If you would like to discuss any of the issues raised in the submission, please contact Bronwen Evans, Manager, Policy – Branches via bronwen.evans@ranzcp.org or by phone on (03) 9236 9113.

Yours sincerely



Associate Professor Richard Newton
Chair, RANZCP Victorian Branch

cc: Hon Jill Hennessy MP, Minister for Health
Hon Martin Foley MP, Minister for Mental Health
Ms Emma Kealy MP, Shadow Minister for Mental Health

Reference

Ryan CJ (1995) Velcro on the slippery slope: the role of psychiatry in active voluntary euthanasia. *Australian and New Zealand Journal of Psychiatry* 29: 580–5.