



# Requests for Voluntary Assisted Dying – State-wide Policy

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# 1. Policy Statement

As a Catholic healthcare service, Mater People will not participate in or facilitate the services provided for under the Voluntary Assisted Dying legislation. Mater adheres to the Code of Ethical Standards for Catholic Health and Aged Care Services in Australia and as such does not promote or facilitate treatments where the primary purpose is to terminate life.

Mater provides compassionate, palliative care to people with life-limiting illnesses. This care includes providing relief from pain and other physical and psychosocial symptoms of illness and frailty. We withdraw life-prolonging treatments when they are medically futile, overly burdensome or requested to end by a patient who provides informed refusal. Mater people support an informed decision process about end of life care. When our patients are dying, we help them to die in comfort and with dignity through palliative care.

Mater people and its facilities and services will not impede access to VAD. Should a patient come to our facility to request information or request to access VAD, Mater people will support navigation to other services in accordance with this policy.

## 2. Scope and purpose

This document applies to all Mater facilities, services, staff and stakeholders across the state. This policy outlines the requirements for responding to patient requests for Voluntary Assisted Dying (VAD) within Mater facilities and across our services. This policy will ensure all Mater people respond in accordance with the legislation and will be read in conjunction with Voluntary Assisted Dying state-wide procedure.

## 3. Risk Statements

The legislation increases Mater's exposure to the following risk areas:

- i. **Mission:** Mater may compromise its value of integrity by inadvertently acting in a manner contrary to the Code of Ethical Standards for Catholic Health in Australia. Mater may also be perceived as acting in a manner contrary to the Code, given the complexity of some of the issues that this legislation gives rise to.
- ii. **Mater People:** Emotional and psychological effects of unintentional witnessing or awareness of VAD in a Mater facility could result in workers compensation claims and other litigation. Mater will mitigate this risk with a staff support framework that includes clear legal and procedural guidelines, education and training, peer support, counselling and clinical supervision.
- iii. **Patient Care:** In some cases, Mater may be unable to provide communication in advance to patients or consumers about the range of services not provided, resulting in unmet patient expectations.
- iv. **Legal and Compliance:** Litigation resulting from failure to meet requirements of new legislation.



- v. **Community Expectations:** Reputational risk from negative media and public exposure in relation to Mater's response to the legislation. Impact on clinical staff applying Mater policies.

## 4. Principles

### 4.1 Provision of VAD at Mater

- a. Mater people and services will not facilitate or participate in VAD assessments undertaken for the purpose of a patient or consumer having access to or making use of the interventions allowed under the legislation.
- b. Mater recognises it has a duty of care to patients in our facilities and who utilise our services. No patient or consumer will be denied medical care or treatment by Mater because of a person's choice to participate in VAD.
- c. Mater will ensure that trained Mater people are available to engage in discussions relating to end-of-life care options, including palliative care, advance care planning and VAD.
- d. If a patient or consumer initiates a discussion regarding VAD. Mater people will engage in open, sensitive and respectful discussions and, where required, provide information for the Queensland Government VAD support service.
- e. Mater will be a non-participating VAD institution whereby Mater people will not administer a VAD substance or participate in steps or actions related to administration.
- f. Mater acknowledges that patients and consumers may wish to explore the option of VAD from another provider or institution or may already be doing so when they come into our care. Mater people and services will not impede this and will follow normal protocols for transfer, discharge and patient leave to meet a patient's request to seek out these services elsewhere.
- g. VAD substances are scheduled poisons, strictly controlled by law and will be managed accordingly to ensure safety for other persons within Mater facilities.
- h. For further detail for responding to VAD requests refer to **Responding to Voluntary Assisted Dying Requests – State-wide procedure.**

### 4.2 Governance

- a. Mater's response to VAD requests will align to the Clinical Governance Framework and clinical governance reporting processes.
- b. The governance structure for responding to VAD requests is outlined in the figure below. Further detail on the process for responding to VAD requests is outlined in the **Responding to Voluntary Assisted Dying Requests – State-wide procedure.**





## 4.3 Roles and Responsibilities

- a. Response processes will be in place to provide appropriate escalation pathways and support in response to the legislation. This includes:
  - i. Establishment of the Tiered Governance System within each facility including an End of Life Coordinator who will be based in South Brisbane and will provide advice and support to all Mater facilities state-wide;
  - ii. Establishment and management of data collection for VAD requests and responses;
  - iii. Reporting to the state-wide Clinical Systems Committee and other relevant committees on response to VAD.
- b. All Mater people will be provided VAD training and education relevant to their role and responsibility.

## 4.4 Patient Information

- a. Mater will have readily available written information on advance care planning and end of life care services, including clarity about the extent and scope of these services across our facilities.
- b. A statement advising the public that Mater does not facilitate VAD will be included in brochures, on the website, in signage, admission forms and elsewhere across Mater services.
- c. Any patient seeking VAD will be advised that Mater does not provide VAD, but will not hinder a patient's access to information about VAD, and will allow reasonable access to a registered health practitioner or a member or employee of an official VAD care navigator service to provide information to the patient if required.
- d. Contact details for the Queensland Government VAD support service (Q-VAD) will be provided if a patient wishes to seek services outside of those available in Mater facilities.
- e. Compassionate care will continue to be provided to any patients' seeking VAD.

# 5. Compliance

## 5.1 Related legislation

Voluntary Assisted Dying Act 2021 (Qld): [View - Queensland Legislation - Queensland Government](#)



## 5.2 Standards

Australian Commission on Safety and Quality in Health Care. National Safety and Quality Health Service Standards. 2nd ed. Sydney: **ACSQHC**; 2017

## 6. Definitions

For the purpose of this policy the following definitions apply:

Term	Definition
Provide or Facilitate VAD	<p>(in the sense of this policy's statement that "Mater does not provide or facilitate VAD") means to take steps which are part of the formal VAD process (such as providing assessments for VAD or administering the VAD substance) which are inherently related to this process, such as approving VAD-related activities, encouraging patients to undertake VAD, or providing referrals for them to do so.</p> <p>The policy differentiates providing or facilitating VAD from those actions required of Mater by the law (such as the transfer of patients seeking after VAD), and those actions reasonably required by good medical practice (such as informing a patient who is seeking information about VAD of government agencies that can assist with their enquiry).</p>
Mater Facility	means hospital, day procedure centre and Mater at Home services conducted by a Mater entity and in which health services are provided.
Palliative care	means treatment, care and support for people living with a life-limiting disease. This includes physical, emotional, psychological, spiritual and social support for the patient, family and significant others.
Tiered Governance Structure	refers to the establishment of a tiered system comprising All Mater People , Tier 1 and Tier 2 teams (see below) in response to VAD legislation.
Tier 1	refers to a team available at each facility to engage in sensitive end-of-life care discussions with patients or consumers.
Tier 2	refers to a team available at each facility which has the competency and authority to resolve complex issues relating to VAD in a timely manner.
Transfer	means to support the movement of a patient or consumer from one facility to another, including all relevant communication with the receiving provider and transport arrangements.
Voluntary Assisted Dying	(VAD) is the term used in VAD legislation in Queensland to refer to the administration of a VAD substance and includes steps reasonably related to such administration. For the purpose of this policy, the term VAD applies to legislated processes that enable the administration of a poison or controlled substance for the purpose of causing a person's death in any jurisdiction within which Mater operates.
Voluntary Assisted Dying substance	(VAD substance) means a poison or controlled substance or a drug of dependence which has the purpose of causing a person's death under the VAD legislation.



Term	Definition
The legislation	Means the Voluntary Assisted Dying Act 2021 (Qld)
Administration Decision	The decision for self-administration or practitioner administration of a lethal substance.
Mater People	<p>Mater person or people.</p> <p>Anyone who carries out work for Mater and its subsidiaries including employees, contractors, subcontractors, visiting medical officers, employees of labour hire companies (e.g. nursing agency staff), outworkers, apprentices and trainees, students, volunteers, and Person(s) Conducting a Business or Undertaking who are individuals if they perform work for Mater.</p> <p>The term Mater People may refer to one or more individuals. The term 'Mater Person' is the singular of 'Mater People'.</p> <p>Unless explicitly stated otherwise, 'Mater People' and 'Mater Person' have the same meaning as the term 'worker' under the Work Health and Safety Act 2011 (Qld).</p>

(Note: further glossary of terms related to VAD available from Qld Health: [Glossary of terms | Voluntary assisted dying | Queensland Health](#))

## 7. Related documents

### Mater documents

- Responding to Voluntary Assisted Dying Requests – State-wide procedure MPPL-06064
- Mater Health By-Laws for Accredited practitioners (policy) MPPL-03883
- Clinical Governance Framework – state-wide (policy) MPPL-03767
- Comprehensive Care (previously Provision of Care)- state-wide (policy) MPPL-04323
- Whistle-blower Policy MPPL-02153

### External documents

- Catholic Health Australia, [Code of Ethical Standards for Catholic Health and Aged Care Services in Australia. 2001.](#)
- Voluntary Assisted Dying Act 2021 (Qld)
- St Vincent's Health Australia. Responding to requests for Voluntary Assisted Dying. 2019.
- Queensland Health. Voluntary Assisted Dying in Queensland 2022. [Voluntary Assisted Dying in Queensland | Queensland Health](#)
- Queensland Health. Information on voluntary assisted dying substances. [Information on voluntary assisted dying substances | Queensland Health](#)
- Private Entity Guidance – VAD Queensland Government



## 8. Document information

### Earlier revisions

Revision #	Published date	Comment
1.0	See released date	Revision 1.0 will be the initial publication.

### Key contacts

Authors	Kate Kynoch - Knowledge Translation Manager, Clinical Governance Unit Fran Metcalf – Director Communications and Media
Owner	Jane Schmitt – Executive Director External Relations Marketing and Engagement
Approver	Jane Schmitt – Executive Director External Relations Marketing and Engagement

#### Affirmation

This governance document is consistent with [Mater's Mission](#).  
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