



Akooramak (Warwick Benevolent Society Inc)

Voluntary Assisted Dying Position Description Policy and Procedure





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Voluntary Assisted Dying Position Description

For over 50 years Akooramak Care of the Older Person has provided compassionate, and caring support services to the Warwick community.

Akooramak care of the older person prides itself on the provision of high-quality palliative care, this care and support extends to the resident and their loved ones.

Akooramak Care of the Older Person supports everyone's right to live their life as they choose. This includes the right to plan their end-of-life choices in line with their own beliefs.

Akooramak will with compassion and empathy, support the well-being of those who wish to undertake the Voluntary Assisted Dying process (VAD).

Akooramak will offer support to residents and their loved ones during this time, however, we will not manage, administer, or dispose of any VAD substance.



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Policy And Procedure

VOLUNTARY ASSISTED DYING

Date Developed	[March 2023]- V1
Date Last Scheduled Review	[April 2023]-V2
Date Next Scheduled Review	[March 2025]
Overall Accountability	Board Chair / CEO

Part A: Policy

1 Background

- (a) Akooramak Care of the Older Person provides aged care, accommodation, and related services.
- (b) This policy applies to Akooramak Care of the Older Person's residential services.
- (c) This policy also applies to all employees, volunteers, contractors, and subcontractors engaged by us (**Workers**).

2 What is the purpose of this policy and procedure?

- (a) The *Voluntary Assisted Dying Act 2021* (Qld) (**VAD Act**) was passed on September 2021. Voluntary assisted dying (**VAD**) commenced operation in Queensland on 1 January 2023.
- (b) The VAD Act allows aged care providers to choose whether or not to participate in Queensland's VAD system.
- (c) This policy and procedure set out Akooramak Care of the Older Person's position in relation to VAD.

3 Legislation/compliance obligations

As an approved provider our obligations arise under a range of legislation and regulations, including:

- (a) the *Aged Care Act 1997* (Cth) and the *Aged Care Principles*;
- (b) the *Voluntary Assisted Dying Act 2021* (Qld);
- (c) the *Aged Care Quality Standards*: particularly Standard 2, requirement (3)(b) and Standard 3 requirement (3)(c).



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4 What is VAD?

- (a) In general terms, VAD means assistance provided by an authorised health practitioner to administer, or for a person to self-administer, a poison or controlled substance for the purpose of causing a person's death, and includes steps reasonably related to the administration of that substance.
- (b) Decisions about VAD can only be made by a resident with decision making capacity. Substitute decision makers cannot make decisions about VAD on behalf of a resident who has impaired decision-making capacity.
- (c) For the avoidance of doubt, the following actions are not VAD:
 - (i) a resident with decision making capacity refusing to receive medical treatment, even where that treatment may prolong their life;
 - (ii) a resident with decision making capacity refusing food and/or water, even where this may result in, or hasten, their death;
 - (iii) a medical practitioner refusing to provide treatment to a resident, where the medical practitioner considers the treatment would be futile;
 - (iv) a resident receiving palliative care treatment in accordance with a treatment plan, including receiving prescribed palliative medication which is intended to relieve pain or other symptoms.

5 Disclosure of our position on voluntary assisted dying to residents, representatives, family members and other people

Residents, their families, and members of the public are informed about Akooramak Care of the Older Person's position on VAD via:

- (a) The content of this policy; and
- (b) Our Voluntary Assisted Dying Disclosure Statement which is available on Akooramak Care of the Older Person's website, and available to residents, representatives and family members on request.

6 Our position on voluntary assisted dying

- (a) Akooramak Care of the Older Person will continue to provide care, support and services to residents, family and staff throughout their end of life journey.
- (b) Akooramak Care of the Older Person respects and supports:
 - (i) residents to live the life they choose which includes the right to choose the pathway to an end of life experience;
 - (ii) personal choice including best practice in palliative care and VAD;



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- (iii) our residents receive high quality end of life care, which strives to ensure that pain and suffering is minimised;
 - (iv) the rights of residents to seek information about, or request access to, VAD;
 - (v) the rights of residents to their privacy and confidentiality. Akooramak Care of the Older Person will only disclose personal information in accordance with the VAD legislation in the applicable jurisdiction and with consent of the person to whom the information relates; and
 - (vi) the rights of other persons, including our staff and other residents, including where those persons may have an objection to VAD.
- (c) Whilst health practitioners can refuse to participate in the VAD process under the relevant legislation, health practitioners must not hinder access to VAD and must ensure that the resident continues to receive the treatment and care unrelated to VAD.

7 Our responsibilities and obligations under the VAD Act

- (a) We will comply with the requirements of the VAD Act but we do not provide services associated with VAD at our aged care facility.
- (b) We are committed to responding to any resident who expresses a wish to explore or consider VAD in a sensitive and respectful manner.
- (c) Akooramak Care of the Older Person will not:
 - (i) intentionally take steps to help a person end their own life, nor intentionally assist a resident to take their own life;
 - (ii) hasten a resident's death;
 - (iii) hinder a resident's right to access information or to make a request about VAD; and
 - (iv) hinder access by an authorised VAD practitioner or a VAD navigator service to Akooramak Care of the Older Person to provide information to a resident where the access is requested by a resident or otherwise required under the relevant legislation.
- (d) If information or services are requested that are not available at Akooramak Care of the Older Person, Akooramak Care of the Older Person will:
 - (i) notify the resident that the information or services are not available and give the resident details of a VAD navigator (or similar) service that may assist the resident;
 - (ii) provide support and assistance where a resident wants or needs to transfer to another service to access VAD services.
- (e) Our VAD procedure is set out in Annexure A.



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8 End of life and palliative care

- (a) In relation to palliative care and end of life care generally, Akooramak Care of the Older Person will continue to:
- (i) provide holistic, comprehensive palliative care (including end of life care);
 - (ii) empower a resident (or their substitute decision makers) to actively participate in decision-making regarding their end-of-life treatment and care (including through the use of advance care planning); and
 - (iii) otherwise provide care and support to ensure the resident's palliation is as peaceful as possible.
- (b) What role do staff take in relation to VAD?
- (i) Akooramak Care of the Older Person respects staff members' rights, including where they may have a conscientious objection to VAD. Good clinical practice requires that conscientious objections do not impede a person's access to lawfully clinically appropriate treatments, whilst respecting the person's dignity and autonomy.
 - (ii) Any staff member who receives a request from a resident to access information about or services relating to VAD must notify the Chief Executive Officer and respond in accordance with the VAD procedure.
 - (iii) There is no requirement for staff to inform Akooramak Care of the Older Person or the resident requesting information about VAD of their views or any conscientious objection to VAD they may hold. However, any staff member who would like to discuss their views or any conscientious objection can do so at any time by speaking to Chief Executive Officer.
 - (iv) Akooramak Care of the Older Person staff must not:
 - (A) initiate a discussion about VAD or suggest VAD to any resident;
 - (B) induce a resident to make a request for VAD, or to self-administer a VAD substance;do (or omit to do) anything that would constitute an offence under any VAD legislation, including (but not limited to) those offences outlined in Annexure B.

9 Questions

Please direct any questions about this policy and procedure to the Chief Executive Officer.



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Annexure A

Part B: Procedure

Step and action required	Responsibility	Reference document
<p>1 Inquiries about voluntary assisted dying</p> <p>If a resident or their family member/representative initiates a discussion about voluntary assisted dying with a Worker:</p> <ul style="list-style-type: none"> The Worker must explain that matters pertaining to voluntary assisted dying can only be dealt with by the Director of Care or/Chief Executive Officer and promptly refer the matter to the attention of the Director of Care on site. The Director of Care must refer the matter to the attention of the Chief Executive Officer. The Director of Care and the Chief Executive Officer will make sure that the resident, their family and/or representatives receives appropriate information and support concerning their enquiry about voluntary assisted dying, in a manner consistent with this policy and procedure. <p>Only the Director of Care, Chief Executive Officer or someone authorised by the Chief Executive Officer or Director of Care may participate in discussions regarding voluntary assisted dying with a resident, family member, representative or any other third party (e.g., health practitioners).</p> <p>No other Worker may initiate or participate in any discussion about voluntary assisted dying with a resident, family member or any third party.</p>	<p>Worker</p> <p>Director of Care</p> <p>Chief Executive Officer</p> <p>All Workers</p>	<p>Voluntary assisted dying policy and procedure</p>
<p>2 Requests for access to information</p> <p>If a resident (or representative) makes a request to access information about voluntary assisted dying:</p> <ul style="list-style-type: none"> The Worker must refer the request to the Director of Care and/or Chief Executive Officer. 	<p>All Workers and Director of Care</p>	



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Step and action required	Responsibility	Reference document
<ul style="list-style-type: none"> • The Director of Care and/or Chief Executive Officer must ensure that (insofar as is necessary to respond to the persons request): <ul style="list-style-type: none"> • the person is not hindered from accessing information about voluntary assisted dying; and • medical practitioners or other relevant persons are allowed reasonable access to the facility in relation to requests for information about voluntary assisted dying. 	Director of Care and Chief Executive Officer	
<p>3 First requests and final requests to access voluntary assisted dying</p> <p>If a resident (or representative) makes a first request and final request to access voluntary assisted dying, within the meaning of the VAD Act:</p> <ul style="list-style-type: none"> • The Worker must refer the request to the Director of Care and/or Chief Executive Officer. • The Director of Care and/or Chief Executive Officer must ensure that (insofar as is necessary to respond to the persons request): <ul style="list-style-type: none"> • medical practitioners or other relevant persons are allowed reasonable access to the facility in relation to requests for information about voluntary assisted dying; or • if a medical practitioner is not available to attend the service, the service must facilitate a transfer of the resident to and from the location where the person can access the medical practitioner. 	All Workers Director of Care and/or Chief Executive Officer	Voluntary assisted dying policy and procedure
<p>4 First assessment (initial eligibility assessment)</p> <p>Where a first assessment is required to assess the eligibility of the resident to access voluntary assisted dying:</p> <ul style="list-style-type: none"> • The Worker must refer the request to the Director of Care and/or Chief Executive Officer. 	All Workers	Voluntary assisted dying policy and procedure



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Step and action required	Responsibility	Reference document
<ul style="list-style-type: none"> • We will: <ul style="list-style-type: none"> • if the resident is a permanent resident, allow a practitioner to access the service to conduct a first assessment of the resident (or if the practitioner is not available, transfer the resident to and from a place where the assessment may be carried out); or • if the resident is not a permanent resident, transfer the resident to and from a place where the assessment may be carried out but only if the resident is well enough and can afford to be transferred, or otherwise allow reasonable access by the health practitioner. 	<p>Director of Care and/or Chief Executive Officer</p>	
<p>5 Second requests</p> <p>Where a resident has been assessed as eligible at first instance and wishes to continue with the voluntary assisted dying process and proceed to a second request for an eligibly assessment:</p> <ul style="list-style-type: none"> • The Worker must refer the request to the Director of Care and/or Chief Executive Officer. • We will: <ul style="list-style-type: none"> • allow the coordinating practitioner and two eligible witnesses reasonable access to the facility for access to the second request process; and • if the coordinating practitioner is unable to attend, transfer the resident to and from a place where the second request may be made. 	<p>All Workers</p> <p>Director of Care and/or Chief Executive Officer</p>	<p>Voluntary assisted dying policy and procedure</p>
<p>6 Consulting assessment (eligibility assessment)</p> <p>Where a resident wishes to access a consulting assessment as part of the voluntary assisted dying process:</p> <ul style="list-style-type: none"> • The Worker must refer the request to the Director of Care and/or Chief Executive Officer. 	<p>All Workers</p>	<p>Voluntary assisted dying policy and procedure</p>



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Step and action required	Responsibility	Reference document
<ul style="list-style-type: none"> • We will: <ul style="list-style-type: none"> • if the resident is a permanent resident, allow a practitioner to access the service to conduct the assessment of the resident (or if the practitioner is not available, transfer the resident to and from a place where the assessment may be carried out); or • if the resident is not a permanent resident, transfer the resident to and from a place where the assessment may be carried out but only if the resident is well enough and can afford to be transferred, otherwise we will allow reasonable access by the health practitioner. 	<p>Director of Care and/or Chief Executive Officer</p>	
<p>7 Administration decisions</p> <p>Where a resident wishes to make an administration decision, within the meaning of the VAD Act:</p> <ul style="list-style-type: none"> • The Worker must refer the request to the Director of Care and/or Chief Executive Officer. • We will: <ul style="list-style-type: none"> • if the resident is a permanent resident, allow a practitioner access to the home to enable the person to consult with the practitioner to enable the person to make the administration decision (or if the practitioner is not available, transfer the resident to and from a place where the decision may be made); or • if the resident is not a permanent resident, transfer the resident to and from a place where the decision may be made but only if the resident is well enough and can afford to be transferred, otherwise allow reasonable access by the health practitioner. 	<p>All Workers</p> <p>Director of Care and/or Chief Executive Officer</p>	<p>Voluntary assisted dying policy and procedure</p>



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Step and action required	Responsibility	Reference document
<p>8 Administration of a voluntary assisted dying substance</p> <p>Where a resident decides to proceed to the stage of the VAD process where a voluntary assisted dying substance is to be administered, within the meaning of the VAD Act:</p> <ul style="list-style-type: none"> • The Worker must refer the request to the Director of Care and/or Chief Executive Officer. • If the resident is a permanent resident, we will: <ul style="list-style-type: none"> • allow reasonable access to the resident by the administering practitioner for the person to administer a voluntary assisted dying substance to the person and allow reasonable access for the eligible witness; and • if the person has made a self-administration decision, not hinder access by the person to a voluntary assisted dying substance. • If the resident is not a permanent resident: <ul style="list-style-type: none"> • transfer the resident to a place where the person may be administered a voluntary assisted dying substance or may self-administer a voluntary assisted dying substance; or • if the practitioner decides it would be reasonable to transfer the non-permanent resident they should be treated as a permanent resident and the facility must allow reasonable access to the practitioner for the person to be administered a voluntary assisted dying substance. 	<p>All Workers</p> <p>Director of Care and/or Chief Executive Officer</p> <p>Director of Care and/or Chief Executive Officer</p>	<p>Voluntary Assisted Dying policy and procedure</p>
<p>9 Taking any other action regarding voluntary assisted dying</p> <p>No Worker may take any other action concerning voluntary assisted dying unless directed to do so by the Director of Care or Chief Executive Officer.</p>	<p>All Workers</p>	<p>Voluntary Assisted Dying policy and procedure</p>



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Step and action required	Responsibility	Reference document
For the avoidance of doubt, only the Director of Care or Chief Executive Officer take any other action concerning voluntary assisted dying.		



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Annexure B

Offences to the VAD legislation in Queensland

Offences	<p>There are a number of civil and criminal offences under the VAD Act, including that it is an offence:</p> <ul style="list-style-type: none">• to administer a VAD substance unless the person is authorised to do so under the VAD Act;• to induce another person to request, or revoke a request for, VAD;• to make a false or misleading statement in a forms or other document required to be made under the VAD Act;• to falsify a form or other document required to be made under the VAD Act.
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