

Media Release

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Victoria's proposed assisted suicide model raises too many risks to proceed

Victoria's proposed assisted suicide model raises too many risks to go ahead, according to Australia's largest not-for-profit provider of health and aged care services, St Vincent's Health Australia.

St Vincent's – which also provides the largest palliative care service in Victoria – said that no assisted suicide model in the world was completely safe.

“There are too many uncertainties around the assisted suicide model for it to proceed. There is also no guarantee that safeguards will work,” said St Vincent's Health Australia's CEO, Toby Hall.

“For example, under the model, Victorians will have up to one year to make a request for assisted suicide with their doctor. Prognostication is not an exact science. Most doctors find it a challenge to diagnose how long someone has to live.

“At one year, the margin for error significantly increases and most clinicians would find it a difficult assessment to make – particularly those who are not formally trained in palliative care – and it is likely to be an ongoing point of disagreement. It's also longer than recommended by the Parliamentary Committee and overseas models.

“We're concerned that patients could end their life when they may in fact still have several years to live; robbing them of the opportunity to reconsider their situation which could have improved over time.

“There's also a real absence of any detail around palliative care's role in the proposed system.

“For example, there is no requirement for a patient to properly engage with a palliative care specialist before requesting assisted suicide. Making sure that a person requesting assisted suicide is provided information on palliative care is not enough.

“The majority of people with advanced illness who may initially desire assisted suicide drop their request when they receive high quality palliative care.

“The deeper you go into the final report, the more and more questions it raises. Many of the challenges with this model will be in its implementation – the detail just isn't there – but by then it will be too late: the legislation will have passed and it will be up to the committee overseeing its implementation to wrestle with.

“Victorians could end up with a model that has not been through any formal review of its application and impact. No other major health care intervention would be introduced in this way.

“High quality palliative care is the best and most appropriate response to supporting people as they approach end of life, but it needs to be properly resourced. Although Victoria has some high quality palliative care services, many people miss out, particularly in rural and regional parts of the state.

“We must avoid a situation where people are able to receive assisted suicide but unable to access palliative care.

“We respect the Victorian Government’s motives in putting forward this legislation, that they do so in an attempt to alleviate suffering.

“We equally recognise that many MPs and members of the community have arrived at a position of support for assisted suicide after the death of a loved one, friend or constituent. We respect and acknowledge how these events are likely to have affected peoples’ views.

“Where we differ is that after 130 years of making it our daily work to provide the best possible care to people who are dying, every bit of that experience tells us that creating high quality and accessible palliative care is where we should be channeling our efforts and resources to address people’s end of life concerns.

“Whatever happens with this legislation, that’s what St Vincent’s will continue to provide for all people approaching end of life,” said Mr Hall.

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