

Submission into the Voluntary Assisted Dying Bill 2021

Submission No.: 49
Submitted by: Jacqui Possingham
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Position: I/We support the Voluntary Assisted Dying Bill
Comments in relation to: Other
Attachments: See attachment
Submitter Comments:

Dear Queensland Parliament

I would like to submit my **support for Voluntary Assisted Dying Legislation to be implemented in Queensland.**

I support VAD after having experienced traumatic passing of both parents in 2015 and 2020, and the suicide of a terminally ill friend in March 2021.

In 2015, I lost my father in a traumatic death to lung/prostate cancer. A farmer of 60 years, a strong and proud man. He deteriorated into a skeleton wearing a nappy - without any dignity. If he could have the strength to load a gun and pull a trigger at his head – he would have. He was unable to, so he died disgustingly, in a cancer toxin ridden body, starved/dehydrated to death in a palliative care medically induced coma. The service he was provided by palliative care nurses was beyond angelic. However, what the cancer did to him and his family will be forever traumatically etched in our memory. How inhumane it was.

In 2019, my mother was diagnosed with inoperable pancreatic cancer and passed in March 2020 at a local palliative care hospital room. She was at the mercy of medicines and again, another disgusting death to cancer that starves and malnourishes the body until death. My mother was the most loving and generous person. She worked long and hard alongside my father as a farmers wife, and as a mum to my sister and I. She worked ██████ hard all her life, a committed volunteer and community member – she deserved better than to be taken inhumanely. Her trauma was exacerbated by knowing in heart of her childrens sadness, and what her children have to bear witness to in a death from cancer. This was the beautiful Mother she was, selfless to the core and thinking of others always first. I cried a thousand tears, and will cry thousands more. She deserved a better passing.

Having NO CHOICE bears so heavily on the patient, increasing stress and anxiety. If we had a choice, my mother and father would be shown the dignity that they deserved by a voluntary assisted death.

In March 2020, my friend George B, shot himself in the heart with a gun. He was terminally ill and the deterioration was horrendously and excruciatingly slow. His last independence was taken from him, when he could no longer get from his chair to his gopher to get the daily paper. This was the only activity left in his life. The continuous supply of oxygen through tubes was keeping him alive. The last time I saw him for a cuppa he called himself “a dead man walking”. His loving wife by his side, her life had stopped completely to care for her beloved. There was no connection to community anymore, no quality of life to be enjoyed. **Just awaiting for more medical issues to belittle his life until death.** George had to plan his death in secrecy. He was unable to say goodbye. Wife, children and grandchildren did not get to say goodbye. Imagine the immeasurable pain in his heart when he knew he was saying goodbye to them for the last time – but he couldn't say anything. This is a death he did not deserve. This is a death the family will be haunted by forever. This is a death that the local police and ambulance staff should not have had to manage.

This enquiry will not help these families now, but I **MOST STRONGLY SUPPORT** its implementation for future generations to reduce suffering and trauma.

I strongly support:

- Voluntary assisted dying by means of administering a medication for the purpose of causing death in accordance with the steps and process set out in law.
- Voluntary assisted dying that is voluntary and initiated by the person themselves, and it will usually be self-administered. Only those who are already dying from an incurable, advanced and progressive disease, illness or medical condition will be able to access voluntary assisted dying.
- Voluntary assisted dying is only for those who face an inevitable, imminent death as a result of an incurable disease, illness or medical condition.

I agree with the key points of the Victorian passed law, as it was passed are:

- The person must be 18 years or over; and
- Be a resident of Queensland for at least 12 months and an Australian citizen or permanent resident; and
- Have decision-making capacity in relation to voluntary assisted dying; and
- Be diagnosed with an incurable disease, illness or medical condition that:
 - is advanced, progressive and will cause death; and
 - is expected to cause death within 6 months to 12 months
 - is causing suffering that cannot be relieved in a manner the person deems tolerable; and
- Doctors and other healthcare workers are not permitted to raise assisted dying — only to respond to formal patient requests.
- The person must make three formal requests, the second of which must be written and witnessed by two independent people.
- The person must make the request themselves. **Nobody else** is authorised to make the request, and the request cannot be made via an advance care directive.
- Ordinarily, the minimum timeframe between first request and opportunity to take the medication is ten days.
- The person must maintain decisional capacity at all three requests.
- Two doctors must reach independent assessments that the person qualifies.
- Only doctors who have completed specialist training for voluntary assisted dying may participate.
- Any healthcare worker may decline to participate for any reason, without penalty.
- A prescription dispensed for the purpose of voluntary assisted dying must be kept in a locked box and any unused portion returned to the pharmacy after death.
- The person must self-administer the medication; except if the person is unable to, a doctor may administer. An independent witness is required if the doctor administers.
- Establishment of an authority to receive assisted dying reports, to assess reports, and to refer unacceptable cases to disciplinary or prosecutorial authorities.
- For Parliament to review summary reports; twice in the first two years and annually thereafter; a formal review at five years.

TELEHEALTH

I strongly support the introduction of telehealth to support patients connect with medical appointments due to the remoteness of the State. This lack of access in Victoria has impeded the legislation and access by the terminally ill.

If there is any other way I can support VAD in Queensland, Please let me know.

Thankyou for your consideration of my submission.

Regards
Jacqui Possingham

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