From: lan Patterson

Sent: Wednesday, 9 June 2021 4:48 PM **To:** Health and Environment Committee

Subject: Submission re Voluntary Assisted Dying Bill 2021

Categories: Submission

Dear Sir/Madam,

The Queensland Government's Health and Environment Committee is currently seeking public feedback in relation to the proposed legislating of assisted suicide/euthanasia in the State via enacting the Voluntary Assisted Dying Bill 2021.

Whilst I acknowledge and empathise with the physical and emotional pain and distress of persons suffering in the end stages of a terminal illness, I declare my opposition to the concept of State sanctioned, assisted killing of human beings, particularly considering that the State Government can muster adequate human and financial resources to provide individual palliative care as an alternative for persons suffering from a terminal illness.

I contend that the taking of a human life should not be treated as a procedural matter irrespective of any sincere desire from supporters to end an individual's emotional or physical suffering; and that the higher value and sanctity of human life should be enshrined in Health legislation. Further, apart from my conscientious objection to State sanctioned euthanasia, I consider the following parts of the *Voluntary Assisted Dying Bill 2021* objectionable:

The Bill does not appear to require a patient to consult a health professional who specialises in treating their area of suffering prior to requesting voluntary assisted dying.

Whilst it purports to prohibit a "health care worker" from initiating discussions about euthanasia with a patient (Division 4, Other provisions Section 7 clauses (1) (a) and (b), clause 2, in fact, does permit a "medical practitioner or nurse practitioner" to do so, provided they also inform the person about available treatment options and palliative care options and their likely outcomes at the same time. Notably, the Bill's definition (at 4 in the section) of "health care worker" includes a "registered health practitioner" or "another person who provides a health service or personal care service". I contend that any initiated discussion on euthanasia must be the sole prerogative of the patient.

Whilst the Bill provides for a medical practitioner, who possesses a conscientious objection, to refuse a person's request for voluntary assisted dying (e.g., Section 16, clause 4), its provisions require the practitioner in that situation to inform the person about, and provide information pertaining to, other registered health practitioners, health service providers or services that may be able to assist the person with their request. I contend that a medical practitioner who is a conscious objector should not be compelled to provide any information about persons or organisations that may be prepared to facilitate voluntary assisted dying.

The Bill does not make any provision for religious/faith-based owned or administrated health care facilities or hospitals to conscientiously refuse to allow voluntary assisted dying consultations, processes, or procedures to take place at their health care facilities.

The Bill does not appear to protect anyone who conscientiously and respectfully endeavours to talk a person out of engaging in assisted suicide from the possibility of enforced punishment, including substantial financial penalties or imprisonment for doing so.

Sections 8 and 81 require a death certificate to state that the cause of death was the medical condition the person was suffering from and not include any reference to voluntary assisted dying. I contend that mandating a falsified death certificate in such circumstances is inappropriate and fraudulent.

I offer my email submission for your consideration.

Sincerely,

Ian Patterson, Qld