

**Submission into the Voluntary Assisted Dying Bill 2021**

**Submission No.:** 930  
**Submitted by:** Renee Finnigan  
**Publication:** Making the submission and your name public  
**Position:** I/We support the Voluntary Assisted Dying Bill  
**Comments in relation to:** The request and assessment process, Conscientious objection by either individuals or entities  
**Attachments:** No attachment

**Submitter Comments:**

I am a specialist doctor working at a tertiary hospital in South East Queensland. As a consultant radiation oncologist, I am actively involved in end-of-life care for patients with terminal cancer. I strongly support the QLRC Draft Bill being adopted in its entirety.

I have witnessed the suffering of many patients with poorly controlled symptoms (eg severe pain, intractable nausea, neurological deficits) despite high quality palliative care services (which are readily accessible in my location). There is definitely a subset of patients for whom palliative care is either ineffective or unwanted; VAD should be available as an option for these unfortunate people.

My medical colleagues in Victoria have expressed their concern about the difficulties some patients from regional and remote locations are having accessing the option of VAD. I have worked as a doctor in Far North Queensland and the Torres Strait, and expect this issue will be amplified due to the geography of our state. The inclusion of provisions for telehealth consultations is essential to ensure equity of access for residents across Queensland. Telehealth is currently a widely utilised and accepted practice in medical practice in Australia.

I support legislation that protects the rights of individual health practitioners to conscientiously object to providing VAD. However, the right of patients being cared for by objecting practitioners or health providers to be counselled regarding the option of VAD and have provision of VAD available to them is of utmost importance, and onward referral must be mandated. If terminally ill patients who are being cared for at an objecting hospital or nursing home are too unwell to be transferred without furthering their suffering, then the objecting facility must be mandated to allow VAD practitioners to provide services on their premises.

The QLRC Draft Bill in its current form includes appropriate safeguards to protect vulnerable patients whilst improving access for suffering patients. It will provide hope and relief for Queenslanders currently suffering with terminal illness, and should be instituted as soon as possible.