




Speech By
Hon. Mark Furner

MEMBER FOR FERNY GROVE

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VOLUNTARY ASSISTED DYING BILL

 **Hon. ML FURNER** (Ferry Grove—ALP) (Minister for Agricultural Industry Development and Fisheries and Minister for Rural Communities) (6.07 pm): I rise to speak on the Voluntary Assisted Dying Bill that is before us. I cannot think of another piece of legislation on which we have received more submissions or a more diverse range of views than has been the case with this bill. Firstly, I want to acknowledge the Premier for the commitment of a further \$171 million in palliative care funding to ensure Queenslanders get the highest quality care at the end of their lives. I do not envy the job that the Health and Environment Committee faced in reviewing this legislation and taking into account all the submissions and feedback it received. It is testament to the committee members that the process has been managed thoroughly and respectfully and as a result public debate around this legislation has largely been respectful and also inclusive.

I acknowledge the comprehensive work of the Queensland Law Reform Commission in establishing proposed measures to provide us as legislators the ability to debate this bill. We spend much time in this place dealing with issues important to Queenslanders and certainly with the COVID-19 pandemic we have become more accustomed than we would like to be in dealing with matters that are literally life and death. However, this issue is different and brings many people to instinctive reactions, to difficult emotional experiences and to recall the very trying personal circumstances they have confronted them as well as those they love.

In a way, I am envious of those who are able to come to a quick decision on this proposed legislation—those who already hold solid views on the issues before us and to an extent have made their decision impulsively. That was not my experience. I have been approached in my electorate office by organisations and individuals that hold a diverse spread of views on these issues. I have listened carefully to all of them and I respect those views that they hold which are different from others. I have reflected on loved ones. I have reflected on my experiences, both as a parent and as the son of a great father and a great mother. I have seen the passing on of relatives and friends in the past.

At its heart, this bill is about easing the suffering of Queenslanders who are facing inevitable death within a relatively short period of time. I expect that there are as many views on exactly how that should be achieved as there are members of this parliament. The bill as written is designed around key principles intended to provide the right balance between the rights of individuals to access voluntary assisted dying and the rights of individuals to be protected from harm including coercion. It dictates that human life is of fundamental importance and that every person has inherent dignity and should be treated equally, with compassion and respect.

People's autonomy in relation to end-of-life and other choices needs to be respected, and people approaching the end of their lives should have access to high-quality care and treatment to minimise suffering and maximise quality of life. Whether it is palliative care or access to voluntary assisted dying as proposed by this bill, it should be available regardless of where in Queensland a person lives. A

person's freedom of thought, conscience, religion and belief, and enjoyment of their culture should be respected. People should be supported in making informed decisions about their end-of-life choices and vulnerable people should be protected from coercion.

The bill provides strict guidelines for eligibility for access to voluntary assisted dying. Firstly, this will be only available to adults—those who have reached the age of 18. To be eligible, the person must have been diagnosed with a disease, illness or medical condition that is advanced, progressive and is expected to cause their death within 12 months. The condition must also be causing the person suffering that they consider to be intolerable. Importantly, the person making a decision to access voluntary assisted dying must have decision-making capacity. They must understand the effect of the decision they are making. They must make their decision freely and voluntarily and must be able to communicate their decisions around voluntary assisted dying in some way. For a request to access voluntary assisted dying to be valid, it must be made voluntarily and without coercion. It will not be valid if there has been pressure to make the choice or any kind of inducement to do so.

The bill contains provisions requiring that people wishing to access voluntary assisted dying must be Australian citizens for at least three years and Queensland residents for at least 12 months before requesting access. While there are provisions for exceptions to be made to these elements, it is important that Queensland laws on this issue do not become a drawcard to people from other states to access this process. The right of citizens from other states to access voluntary assisted dying services is a matter for the parliaments of those states.

The bill outlines the processes that people wanting to access voluntary assisted dying will need to go through. As difficult as it may be to codify how someone must die, this is not an area of law that it would be desirable to leave unclear. The bill prescribes a three-stage request process and a minimum time period of nine days for this to be finalised, unless it is likely the person will not survive for a period of nine days. The person will need to make a clear and unambiguous first request. A coordinating practitioner must assess that the person is eligible for voluntary assisted dying and that they understand the information the practitioner is required to provide. If that doctor accepts the first request and assesses that the person is eligible, they would then refer the person to a second practitioner to make a second assessment. If the second assessment is passed, the person can refer back to the first doctor to access the voluntary assisted dying process. The person may then make a final request to the first doctor and apply to access voluntary assisted dying via self-administration or practitioner administration. The bill contains legal protections for medical practitioners and agents who can act in good faith and without negligence as part of the voluntary assisted dying processes.

The issue of accessing services via telehealth is a real and concerning one. The Commonwealth Criminal Code Act 1995 prohibits the use of a carriage service to publish or distribute material that counsels or incites committing or attempting to commit suicide. It remains a live question whether the provisions of the Queensland bill to declare any death via legally organised assisted dying services as a result of the qualifying illness, rather than suicide, will be sufficient to satisfy Commonwealth law that the resulting deaths are not in fact suicides. The massive size of Queensland, the most decentralised state in the nation, means that telehealth services are a critical part of health service delivery. Without legislative changes from the Commonwealth government, we would face the prospect of people in rural and remote locations being denied the treatment available to other Queenslanders or, worse, the prospect of people acting within the bounds of this law in Queensland facing Commonwealth prosecution.

In 2012, while a member of the Senate standing committee on community affairs inquiring into the Personally Controlled Electronic Health Records Bill 2011, I heard evidence of improvements for access to e-health records for persons in rural or remote areas, thus opening up opportunities for persons living in or travelling through those regions to have access to their health records regardless of where they live. In 2012 the bill was passed by both Commonwealth houses. If the Commonwealth parliament was then able to increase access to people's records, it should not stand in the way of allowing telehealth arrangements for this bill. I call on the Commonwealth government to reconsider its position.

Like the committee that has examined this legislation, I have had constituents come to meet me and tell me the most heartbreaking stories of loved ones who have had to face the end of their lives in the most terrible pain. I have also had submissions and lobbying from people and organisations in my electorate who are passionately against the introduction of this legislation. Concerns have been raised, both to the committee and to me personally as a parliamentarian, about potential unintended consequences if the bill is passed. Some are worried about potential confused messaging with anti-suicide campaigns. There are concerns about whether there would be sufficient protections for medical practitioners involved in the process. Others are worried about whether the protections for vulnerable people are sufficient.

The Queensland parliament does not pass laws by accident. It is beholden on all of us as MPs to make decisions as we see fit to the interests of our constituents. That is doubly true when you are talking about fundamental issues of life and death like the Voluntary Assisted Dying Bill. I thank everyone who has come to see me, talked to me or written to me to put their positions on this bill. I would like to put on the record my respect for the vast range of views that have been expressed. The vast majority of them have been expressed based on firmly held beliefs and genuine experience, and I am grateful that these have been shared with me to help me form a view on this bill. I will never forget the final words of my father before he passed. He said, 'Just let me go.' That is why I will be supporting this bill.