Voluntary Assisted Dying in South Australia

Quarterly Report | 31 January to 30 April 2023

Message from the Presiding Member of the Voluntary Assisted Dying Review Board

The Voluntary Assisted Dying Act 2021 (the Act) came into effect in South Australia on 31 January 2023 making South Australia the fifth jurisdiction in Australia after Victoria, Western Australia, Queensland, and Tasmania to provide access to voluntary assisted dying as an end of life choice for eligible people with a life limiting condition.

The Voluntary Assisted Dying Review Board was appointed on 1 September 2022 by the Minister for Health and Wellbeing to oversee voluntary assisted dying in South Australia commencing in their formal role on 31 January 2023. One of the key responsibilities of the Review Board is to collect statistics about voluntary assisted dying and to make these statistics publicly available.

This report provides a snapshot of the first three months of the operation of voluntary assisted dying in South Australia, including information about people who have applied for a voluntary assisted dying permit, people who have died from voluntary assisted dying and medical practitioners who are supporting people to access the voluntary assisted dying pathway.

This information will be updated quarterly and will be published on the SA Health website, noting that the second report will cover the period 1 May – 30 June 2023 to bring reporting into alignment with the standard quarterly calendar. In addition, the Review Board will provide an annual report to the Minister for Health and Wellbeing on, or before, 31 October each year on the performance of the Review Board’s functions during the preceding financial year. Each annual report will be laid before both houses of Parliament.

While this report outlines statistics regarding voluntary assisted dying, the Voluntary Assisted Dying Review Board acknowledges these statistics are not the only measures of the successful operation of the Act. I would personally like to recognise the work of the many staff and clinicians involved in supporting patients and families through the voluntary assisted dying pathway.

Most importantly, the members of the Review Board recognise the grief and bereavement experienced by the family, friends and loved ones of those who have died and extend sincere condolences. The heartfelt personal reflections that have been provided to the Review Board by patients and family members have clearly articulated the importance of voluntary assisted dying as an end of life option in providing both relief from suffering for patients and comfort and reassurance for the bereaved.

ASSOCIATE PROFESSOR MELANIE TURNER
Presiding Member
On behalf of the Voluntary Assisted Dying Review Board
What we have learned from the first three months of Voluntary Assisted Dying in South Australia

The process of implementing voluntary assisted dying in South Australia over the past three months has provided valuable learnings that are already helping us to improve the process for patients, families, and clinicians.

Patient and family support

Medical practitioners, Care Navigators and Voluntary Assisted Dying Liaison Officers are providing essential support to patients and families every day, ensuring that people have access to all the information and support they need to make informed decisions about their end of life care. Feedback received from patients and families clearly demonstrates the quality of service provision and support being provided:

• "The whole process was carried out with the utmost care and compassion, everyone involved was absolutely wonderful and made things as easy as possible for us"  
• "We were given time to ask questions and were told that we could contact a member of the team at any time should there be something we wanted clarification about"  
• "The doctor's visit was more than we could have hoped for, she was kind and compassionate as well as being professional and respectful of my husband's wishes. At each visit it was stipulated that my husband was in control of this process and could stop it at any time if he chose"  
• "The VAD Liaison listened twice as much as she spoke, and always made the time for XX to articulate his concerns, desires and hopes in his own words. We were all on this journey in a partnership, the primary person was always XX. His concerns were at the very core of every decision, and every response at every moment of the VAD process, and his end of life journey."  
• "I wish to express my sincere appreciation for the many women and men who have worked so hard to establish this wonderful service. This provision has offered me considerable peace of mind"  
• "When I had looked at the VAD application process online, it was a bit overwhelming. But XX just guided us through and made it seem simple and straightforward. I was surprised that it only took three weeks"
Community awareness and understanding

Raising awareness and understanding of voluntary assisted dying continues to be an important step in ensuring that eligible individuals are aware of their rights and can make timely, informed decisions about their end of life care. This includes building community and workforce understanding that accessing voluntary assisted dying is not an emergency procedure. It requires a planned approach to ensure it can be conducted safely, ethically, and in compliance with legal requirements.

We will continue to work alongside Voluntary Assisted Dying South Australia (VADSA) to raise awareness and build understanding across our community through public education campaigns, engagement with community groups and the use of media and storytelling. We will also continue to provide training, education and support for healthcare professionals. By taking a comprehensive approach to raising awareness, we can help ensure that eligible individuals are aware of their rights and can make informed decisions about their end of life care.

Ensuring equitable access

Ensuring access to voluntary assisted dying across South Australia remains a focus and will require ongoing efforts to raise awareness; address any systemic barriers arising; provide training and education; develop appropriate referral pathways; and monitor and evaluate access to care. For example, SA Health is working in partnership with the Aboriginal Community Controlled Health Sector to develop culturally appropriate and safe pathways to access voluntary assisted dying for the Aboriginal community.

To improve access for regional South Australians, the Voluntary Assisted Dying Review Board supports the need to remove the exclusion of telehealth and other online channels in relation to voluntary assisted dying. The Commonwealth Criminal Code Act, sections 474.29A and 474.29B; prohibit the use of a carriage service to discuss or send ‘suicide-related’ material. This has been interpreted to impact on discussions relating to voluntary assisted dying, including the provision of medication, the undertaking of online training and the distribution of information to patients and doctors. While assessments for eligibility for voluntary assisted dying can already be conducted via telehealth in South Australia, removing further legislative barriers will allow for better education for patients, their families and medical practitioners when seeking advice and support for the administration of voluntary assisted dying medication.

By taking these steps, we can help ensure that voluntary assisted dying is available to all eligible individuals who may choose it, regardless of their background or circumstances.

Data and statistics

The number of voluntary assisted dying deaths has been lower than modelled during implementation. Modelling was based on the experience of Victoria and Western Australia –both of which experienced a gradual but sustained increase in people accessing voluntary assisted dying over time. This will continue to be monitored over the coming months to help us better understand what to expect and plan for.

The number of medical practitioners who have undertaken the mandatory practitioner training to enable them to deliver voluntary assisted dying has been tremendous, however, we remain keen to increase the number of practitioners who are actively supporting patients through the pathway. The recent establishment of a Community of Practice for medical practitioners participating in voluntary assisted dying will help to build a peer support network to underpin this new area of practice.
Systems and processes

Our clinical, technical, and administrative systems and processes are running smoothly, although there is continual learning as all patients and permits are different. This is a credit to all of those who have been and continue to be involved in their implementation and day to day operation. Several system improvements to the VAD Clinical Portal have already been made based on learnings that will support greater ease of use for medical practitioners and greater assurance regarding how we monitor compliance with the Act.

Voluntary Assisted Dying Permits issued

During the first three months of voluntary assisted dying in South Australia:

- A total of 28 people were issued with a voluntary assisted dying permit by the Chief Executive of the Department for Health and Wellbeing. Of these, 20 permits were for self-administration of the voluntary assisted dying substance and 8 were for practitioner administration of the voluntary assisted dying substance.
- The average number of days elapsed between a person making a first request to access voluntary assisted dying and receiving an outcome regarding an application for a voluntary assisted dying permit was 25 days.
- 100% of permit applications to the Chief Executive of the Department for Health and Wellbeing were reviewed and a decision regarding the application provided within the 3 business days required by regulation. During this timeframe work is undertaken to ensure the permit application meets all the requirements of the voluntary assisted dying legislation.
Deaths

During the first three months of voluntary assisted dying in South Australia, a total of 12 people who were the subject of a voluntary assisted dying permit died. Of these:

- 8 people died as a result of self-administration of the voluntary assisted dying substance
- 3 people died as a result of practitioner administration of the voluntary assisted dying substance
- 1 person died without taking the substance.

Of the 12 people who died who were the subject of a voluntary assisted dying permit between 31 January and 30 April 2023:

- 7 people had cancer as the disease illness or medical condition for which they were eligible for voluntary assisted dying.
- 5 people had a neurodegenerative disease as the disease illness or medical condition for which they were eligible for voluntary assisted dying.
Demographics

Of the 12 people who died between 31 January and 30 April 2023:

- 7 were aged between 70 and 79 years at the time of their death
- 7 were male and 5 were female
- 10 lived in metropolitan Adelaide and 2 lived in regional South Australia
- 9 people died at home and 3 people died in a hospital
- 9 were receiving a palliative care service while accessing voluntary assisted dying.
Medical practitioners

In the first three months of voluntary assisted dying in South Australia a total of 105 medical practitioners registered to undertake the mandatory practitioner training to be able to deliver voluntary assisted dying. Of these, 71 percent reside in metropolitan Adelaide with the remaining 29 percent in regional South Australia.

Of the 105 practitioners who registered to undertake the mandatory training, 57 percent have completed the training and are eligible to deliver voluntary assisted dying in South Australia. Of these 73 percent reside in metropolitan Adelaide and 27 percent reside in regional South Australia.

The representation of medical practitioners across metropolitan and regional areas closely reflects South Australia’s population distribution with approximately 30 percent of people residing in a regional area.

In order to access voluntary assisted dying in South Australia, a person must have their eligibility for voluntary assisted dying verified by two independent medical practitioners who have both undertaken the mandatory training.

The medical practitioner who accepts a person’s first request for voluntary assisted dying is called the Coordinating Practitioner, the medical practitioner who accepts a referral from the Coordinating Practitioner is called the Consulting Practitioner.

A medical practitioner who has undertaken the mandatory training is eligible to undertake either role. In addition, not all registered medical practitioners are actively engaged in delivering voluntary assisted dying services.
In the first three months of voluntary assisted dying in South Australia:

- 20 of the 60 trained medical practitioners accepted a first request from a person seeking access to voluntary assisted dying becoming the Coordinating Practitioner for that person.
- 14 of the 60 trained medical practitioners accepted a referral from a Coordinating Practitioner to be a Consulting Practitioner.

Of the 105 medical practitioners who registered to complete the mandatory training to deliver voluntary assisted dying in South Australia, 61 are General Practitioners with the remaining 44 from a range of medical specialties including Oncology, General medicine, Neurology, Palliative medicine, Emergency medicine, Anaesthesia, Psychiatry and Surgery.

The high representation of General Practitioners reflects the important role that GPs play in end of life care planning for patients living with a life limiting illness.
Feedback

If you would like to provide feedback to the Voluntary Assisted Dying Review Board, please email us at: Health.VADReviewBoard@sa.gov.au.

For more information

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