

End of Life Choice Act (2019) Review

Submission via online portal based on recommendations from Jess Young and feedback from Supportive Care Managers.

About you

- Your name [Ellen Fisher](#)
- Who you represent [Nicola Coom](#)
- Are you part of an organisation? [Cancer Society of New Zealand](#)
- Do you live in New Zealand? [Yes](#)
- Do you want your personal details removed from your submission in Official Information Act requests? [No](#)

Access to assisted dying

- Do you think changes are needed to the eligibility requirements for a person to receive assisted dying?
- Do you think that changes to areas other than eligibility are needed to support access to assisted dying?

[Permit health practitioners to raise assisted dying with patients in the context of a discussion about available end-of-life options. This would require provision of focussed training, to ensure health practitioners \(such as ours\) are able to raise assisted dying appropriately with clients.](#)

[Establish rules within the Act, or in policy, regarding institutional objection. We broadly favour the approach to regulating institutional objection in the Queensland VAD Act.](#)

Safeguards

- Do you think the Act provides sufficient safeguards to ensure that people only receive assisted dying if:
 - they are eligible (referenced in clauses 5, 13, 14, 15, 16, and 17 of the Act)
 - they actively seek and consent to it (referenced in clauses 11, 12, 18, 23, 33, and 34 of the Act)
 - they are competent to consent to it (referenced in clauses 5, 6, and 15 of the Act)
 - this consent is provided without pressure from others (referenced in clauses 11 and 24 of the Act).
- Do you think any changes are needed to safeguards provided through the Act?

Improve data collection and reporting processes about ethnicity and other factors.

Provide further mandatory training and optional support and develop cultural guidelines, competency standards and practice assessment processes for all assisted dying providers.

Develop mandatory training for all relevant health professionals regarding assisted dying law and policy including their roles under the Act and assisted dying referral process, and handling assisted dying requests.

Process to receive assisted dying

- Do you think any changes are needed to the process to apply for and receive assisted dying?

Permit health practitioners to raise assisted dying with patients in the context of a discussion about available end-of-life options. This would require provision of focussed training, to ensure health practitioners (such as ours) are able to raise assisted dying appropriately with clients.

Provide follow-up care to families whose relatives sought or as a minimum died by assisted dying and for ineligible applicants.

Improve the communication with the assisted dying service, in particular the accessibility for people with impairments, the clarity of the call-back service, and the usability and discoverability of the website.

Practitioners providing assisted dying

- Do you think changes should be made to the requirements for medical practitioners and nurse practitioners to provide parts of the assisted dying process?

Permit health practitioners to raise assisted dying with patients in the context of a discussion about available end-of-life options. This would require provision of focussed training, to ensure health practitioners (such as ours) are able to raise assisted dying appropriately with clients.

Utilise attending nurse practitioners as an assisted dying provider workforce and as team members for administering assisted dying removing the requirement that NPs work “under the instruction” of an attending medical practitioner in the assisted dying process.

Oversight of assisted dying

- Do you think changes are required to the roles and responsibilities of the entities established under the Act to oversee assisted dying (the SCENZ Group (clause 25), the End of Life
- Review Committee (clause 26), and the Registrar (assisted dying) (clause 27))?

Revise the statutory roles of the Registrar assisted dying, assisted dying Review Committee, and SCENZ Group.

Alignment with the wider health system

- Do you think the assisted dying process aligns with other parts of the health system?
- Is there anything that could be improved?

Create a best practice model that promotes the integration of assisted dying into the health care system.

Other feedback

- Do you have any other feedback related to the Act?

Our recommendations are made in support of the research 'Exploring the early experiences of the AD service in Aotearoa' which was been undertaken by Dr Jessica Young et al. Their recommendations are drawn from the knowledge of several academics, health practitioners and consumers, who the Cancer Society also work closely with.