c2021-205B *--Other (Mr Coure)

LEGISLATIVE ASSEMBLY

Voluntary Assisted Dying Bill 2021

First print

Proposed amendments

No. 1 Ineligibility for access to voluntary assisted dying—dementia

Page 7, clause 16(1)(d)(ii)(A). Insert after line 39-

Note— See subsection (2)(aa) which provides that a person is not eligible for access to voluntary assisted dying merely because the person has dementia.

No. 2 Ineligibility for access to voluntary assisted dying—dementia

Page 8, clause 16(2). Insert after line 6-

(aa) dementia, or

No. 3 Decision-making capacity

Page 8, clause 16. Insert after line 8—

(3) To avoid doubt, if a person permanently loses decision-making capacity in relation to voluntary assisted dying at any time during the request and assessment process the person ceases to be eligible for access to voluntary assisted dying under subsection (1)(e).

(4) For subsection (3)—

permanently, for a loss of decision-making capacity in relation to voluntary assisted dying by a person, means the person has lost the capacity to make decisions in relation to voluntary assisted dying forever.

No. 4 Referral to other medical practitioners—guidelines

Page 11, clause 26(2). Insert after line 34—

Note— See section 186A(2)(a) about guidelines that apply to the referral.

No. 5 **Referral—guidelines**

Page 12, clause 27(2). Insert after line 32—

Note— See section 186A(2)(b) about guidelines that apply to the referral.

No. 6 **Recording and notification of outcome of first assessment**

Page 15, clause 30(4). Insert before line 22-

(lc) a statement confirming the coordinating practitioner has acted in accordance with guidelines under section 186A in relation to the following matters—

- (i) deciding whether to refer the patient to a specialist under section 26,
- (ii) deciding whether to refer the patient to a psychiatrist, another registered health practitioner or another person under section 27,

No. 7 **Referral to other medical practitioners—guidelines**

Page 17, clause 37(2). Insert after line 7—

Note— See section 186A(2)(a) about guidelines that apply to the referral.

No. 8 Referral—guidelines

Page 18, clause 38(2). Insert after line 2—

Note— See section 186A(2)(b) about guidelines that apply to the referral.

No. 9 **Recording and notification of outcome of consulting assessment**

Page 19, clause 41(4). Insert before line 19-

- (lc) a statement confirming the consulting practitioner has acted in accordance with guidelines under section 186A in relation to the following matters—
 - (i) deciding whether to refer the patient to a medical practitioner under section 26,
 - (ii) deciding whether to refer the patient to a psychiatrist, another registered health practitioner or another person under section 27,

No. 10 Contact persons

Page 31, clause 67(1)(e), line 9. Omit all words on that line. Insert instead—

Act, including-

- (i) that the contact person agrees to comply with guidelines issued by the Health Secretary under section 186A(2)(c), and
- (ii) the requirements under section 129 and the penalties for contravening the requirements,

No. 11 Guidelines

Page 75. Insert after line 30-

186A Guidelines

- (1) The Health Secretary may issue guidelines to provide guidance about the request and assessment process.
- (2) Without limiting subsection (1), the Health Secretary must issue guidelines about—
 - (a) the referral by coordinating practitioners and consulting practitioners of patients to medical practitioners under sections 26 and 37, and
 - (b) the referral by coordinating practitioners and consulting practitioners of patients to psychiatrists, other registered health practitioners and other persons under sections 27 and 38, and
 - (c) the functions and conduct of contact persons.