c2021-258A *--Other (Mr Zangari)

LEGISLATIVE ASSEMBLY

Voluntary Assisted Dying Bill 2021

First print

Proposed amendments

No. 1 Membership of Voluntary Assisted Dying Board

Page 65, clause 149(2), lines 30-32. Omit all words on those lines. Insert instead-

- (2) A person may be appointed as a member of the Board if the Minister and the Attorney General are satisfied the person is—
 - (a) an Australian legal practitioner with at least 7 years' legal practice experience, or
 - (b) a Judge or other judicial officer, or a former Judge or other judicial officer, of a superior court of record of the State or of another State or Territory, or of Australia, or
 - (c) qualified to be appointed as a Judge or other judicial officer of a court referred to in paragraph (b), or
 - (d) the State Coroner or a person nominated by the State Coroner, or
 - (e) a representative of the New South Wales Board of the Medical Board of Australia, or
 - (f) a representative of the Australian Medical Association (NSW) Limited or the Royal Australasian college of Physicians, or
 - (g) a representative of the Royal Australian and New Zealand College of Psychiatrists or Australian Clinical Psychology Association Limited, or
 - (h) a representative of Palliative Care New South Wales Incorporated.

No. 2 **Board to record and keep statistical information**

Page 70, clause 176(1). Insert after line 22-

- (ca) the number of death resulting from, or likely to have resulted from, the administration or self-administration of a prescribed substance during each financial year,
- (cb) the number of prescriptions written for prescribed substances during each financial year,
- (cc) the number of cases in each financial year in which the first medical practitioner to whom a patient made a request for voluntary assisted dying wrote a prescription for a prescribed substance for the patient,
- (cd) the number of cases in each financial year in which a medical practitioner was present when a patient took a prescribed substance,

- (ce) for each financial year, the median duration, expressed in weeks, of a professional relationship between a coordinating practitioner and patient before the coordinating practitioner wrote a prescription for a prescribed substance for the patient,
- (cf) for each financial year, the kinds of diseases, illnesses and medical conditions that made a patient eligible for access to voluntary assisted dying during the financial year,
- (cg) for the patients who died during a financial year as a result of, or as a likely result of, the administration or self-administration of a prescribed substance—
 - (i) the median age of the patients, and
 - (ii) the education levels of the patients, and
 - (iii) the percentage of patients who held private health insurance, and
 - (iv) the percentage of patients for whom a psychological assessment was carried out immediately before the administration or self-administration of the prescribed substance, and
 - (v) the reasons patients requested access to voluntary assisted dying, and
 - (vi) any adverse events that occurred as a result of the administration of the prescribed substance, and
 - (vii) the amount of time between the administration or self-administration of the prescribed substance and the death of the patient.

No. 3 Board to record and keep statistical information

Page 71, clause 179(2). Insert after line 10—

- (ba) the number of deaths resulting from, or likely to have resulted from, the administration or self-administration of a prescribed substance during the financial year, and
- (bb) the number of prescriptions written for prescribed substances during the financial year, and
- (bc) the number of cases in the financial year in which the first medical practitioner to whom a patient made a request for voluntary assisted dying wrote a prescription for a prescribed substance for the patient, and
- (bd) the number of cases in the financial year in which a medical practitioner was present when a patient took a prescribed substance, and
- (be) for the financial year, the median duration, expressed in weeks, of a professional relationship between a coordinating practitioner and patient before the coordinating practitioner wrote a prescription for a prescribed substance for the patient, and
- (bf) the kinds of diseases, illnesses and medical conditions that made a patient eligible for access to voluntary assisted dying during the financial year, and
- (bg) for the patients that died during the financial year as a result of, or as a likely result of, the administration or self-administration of a prescribed substance—
 - (i) the median age of the patients, and
 - (ii) the education levels of the patients, and
 - (iii) the percentage of patients who held private health insurance, and
 - (iv) the percentage of patients for whom a psychological assessment was carried out immediately before the administration or self-administration of the prescribed substance, and
 - (v) the reasons patients requested access to voluntary assisted dying, and

- (vi) any adverse events that occurred as a result of the administration of the prescribed substance, and
- (vii) the amount of time between the administration or self-administration of the prescribed substance and the death of the patient.