



NT Legal and Constitutional Affairs Committee Inquiry into Voluntary Assisted Dying

15 August 2025



HammondCare overview

HammondCare is a not-for-profit aged care provider specialising in dementia, residential, home, and palliative care. We also deliver mental health and homelessness supports for older people. Since 1932 we have been **committed to serving people with complex health or aged care needs, regardless of their circumstances**. In 2024 we provided care and support for:

- 4,795 people requiring health and palliative care in hospitals and homes
- 21,214 people accessing specialist care through Dementia Support Australia (national)
- 2,797 people in 19 residential care homes across 13 sites in South Australia, Victoria and New South Wales
- 9,796 people living in their own home through 626,061 visits.

HammondCare's services are delivered by 5,792 dedicated staff and 861 committed volunteers across 99 locations. Through our relationship-focused approach and embedded philosophy of care, HammondCare teams are **motivated by mission**; we strongly believe in the intrinsic value of every person that we care for.

HammondCare welcomes the opportunity to contribute to the Northern Territory's consultation on Voluntary Assisted Dying (VAD). As an independent Christian charity specialising in palliative and aged care, HammondCare affirms the intrinsic value of every person. Our position is informed by our mission to improve quality of life for people in need and our commitment to compassionate, person-centred care.

Contact

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Response to consultation questions

1. Do you support making VAD legal in the NT?

HammondCare does not support Voluntary Assisted Dying, including physician-assisted suicide. HammondCare does not recognise VAD as a medical treatment. HammondCare acknowledges the NT's legislative authority to enact VAD laws and in that event, we advocate for a model that:

- Respects conscientious objection for individuals and organisations.
- Protects providers, faith-based or otherwise, from being compelled to participate.
- Strengthens palliative care services as the priority end-of-life option.

We believe that legalisation must be accompanied by robust safeguards and a clear separation between VAD services and existing health and aged care services. Further consideration should be given to safeguarding, including:

- Conscientious objection protections for staff and facilities.
- Pastoral care and psychological support for staff and clients affected by VAD.
- Ongoing review of sector trends and alignment with best practice in palliative care.

We urge the NT to ensure that VAD legislation does not compromise the availability or quality of palliative care services, particularly in rural and remote communities. This includes the provision of travel support and telehealth palliative care options for remote residents.

2. What eligibility criteria should a person need to meet before they can access VAD?

Within the jurisdictions that VAD is legal, HammondCare supports strict eligibility criteria consistent with national standards. We strongly advocate for the exclusion of eligibility for VAD being based solely on disability, mental illness, or dementia. These exclusions are essential to safeguard vulnerable individuals and uphold ethical standards in end-of-life care.

3. How could the NT make sure that an eligible person can access VAD in a safe and effective way, including people living in remote areas and Aboriginal and Torres Strait Islander people?

HammondCare does not support or participate in VAD. To ensure safety, we recommend:

- Establishing a centralised VAD service that is separate from mainstream health services.
- Ensuring interpreter accreditation and cultural safety training for VAD practitioners.
- Embedding co-design principles with Aboriginal and Torres Strait Islander communities.
- Creating clear support pathways for staff, including free and ready access to pastoral care and psychological services.



4. How could the NT monitor the process to ensure VAD is delivered safely and effectively?

HammondCare supports transparent oversight and continuous evaluation. We recommend:

- > Conducting annual reviews and publishing findings to ensure compliance and ethical integrity.
 - o Including research on moral injury and emotional impacts on staff.
- > The provision of bereavement services to families and carers as deaths by VAD create additional layers of complex bereavement.
- > Ensuring data-driven analysis of trends and outcomes to inform future policy.
- > Establishing an independent Review Board with diverse representation, including Aboriginal and Torres Strait Islander members and regional practitioners.
- > Implementing mandatory reporting by practitioners and contact persons.

HammondCare has established a VAD Governance Committee to monitor internal impacts, support staff, and advocate for ethical safeguards. We encourage the NT to adopt similar governance structures.

HammondCare appreciates the opportunity to contribute to this important consultation. We remain committed to compassionate care, ethical integrity, and respectful dialogue. We encourage the NT to adopt a model that prioritises high quality palliative care, safety, equity, and the dignity of all people at the end of life.