

From: [REDACTED]
To: [LA VAD](#)
Subject: Support for VAD in the NT
Date: Thursday, 14 August 2025 7:24:01 PM

Hi Committee

I support the legislation to allow VAD in the Territory, I am an aged care advocate and believe in choice and dignity.

1. Eligibility criteria for Voluntary Assisted Dying (VAD)

To access VAD, a person would usually need to meet criteria similar to those in other Australian jurisdictions, adapted for the NT's legal and cultural context. Key eligibility points could include:

- **Age:** Must be an adult (18+).
- **Decision-making capacity:** Must be able to make and communicate an informed decision about VAD without coercion.
- **Residency:** Must be an Australian citizen or permanent resident, and have lived in the NT for a minimum specified period (e.g., 12 months).
- **Medical condition:**
 - Have an incurable, advanced, and progressive medical condition causing intolerable suffering.
 - Death expected within a set timeframe (e.g., 6–12 months), though this timeframe can vary by jurisdiction.
- **Voluntary request:** Request must be initiated voluntarily and repeatedly confirmed over time.
- **Assessment process:** Must be assessed by at least two independent, qualified medical practitioners.

2. Ensuring safe and effective access for all, including remote areas and Aboriginal and Torres Strait Islander peoples

The NT could ensure safe, equitable access by:

a. Clinical access

- **Telehealth provisions:** Enable remote assessments and consultations using secure video links to reduce travel barriers.

- **Mobile VAD teams:** Specialist outreach clinicians travel to remote communities when in-person care is needed.
- **Regional coordination hubs:** Base VAD-trained staff in major regional centres (e.g., Alice Springs, Katherine, Nhulunbuy) to support local providers.

b. Cultural safety

- **Aboriginal health workers involvement:** Include trusted Aboriginal health practitioners, interpreters, and liaison officers to explain VAD in culturally appropriate ways.
- **Community consultation:** Work with Elders and local councils before rollout to ensure cultural perspectives are respected.
- **Language access:** Provide information in relevant Aboriginal languages and plain English.

c. Support for vulnerable groups

- **Protection from coercion:** Mandatory private conversations with the person requesting VAD (without family present) to confirm voluntariness.
- **Mental health safeguards:** Screening for depression or other treatable mental health conditions before proceeding.

3. Monitoring to ensure safe and effective delivery

The NT could monitor VAD through:

- **Independent oversight body:** Establish a VAD Review Board to review all cases before and after provision, ensuring legal compliance.
- **Mandatory reporting:** Doctors and nurses involved in VAD must submit documentation of every step in the process.
- **Annual public reporting:** Publish de-identified statistics on number of requests, completions, refusals, and reasons for refusal.
- **Auditing:** Random audits of case files to confirm proper consent, eligibility, and procedural steps.
- **Feedback mechanisms:** Confidential complaints channel for patients, families, and health workers.
- **Training accreditation:** Only allow VAD-trained health practitioners to participate.

Yours sincerely
Loretta Muratore
Aged Care Advocate
