

# Voluntary Assisted Dying Board

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Attn: Legal and Constitutional Affairs Committee  
Legislative Assembly of the Northern Territory

By email: [LA.VAD@nt.gov.au](mailto:LA.VAD@nt.gov.au)

## RE: PARLIAMENTARY INQUIRY INTO VOLUNTARY ASSISTED DYING

Thank you for the opportunity to provide a submission to the Northern Territory's Parliamentary Inquiry into Voluntary Assisted Dying.

The Voluntary Assisted Dying Board Western Australia ("the Board") is broadly supportive of the model for voluntary assisted dying in the Northern Territory, as presented in the Consultation Paper dated July 2025. The proposed model is generally consistent with the operation of voluntary assisted dying across Australian jurisdictions, noting some variations between the States and Territories who have already enacted legislation.

To assist the Legal and Constitutional Affairs Committee in evaluating the proposed model, the Board notes the recommendations that have been made for amendments to the *Voluntary Assisted Dying Act 2019* (WA) in their [Annual Reports](#) covering the first three years of operation in WA. The themes of these recommendations include:

### Workforce sustainability

- Development of strategies to increase the number of participating voluntary assisted dying practitioners to meet the greater than expected demand.
- Clinical leadership models, including voluntary assisted dying coordinators and clinical leads, be established and consistently implemented across the WA health system, to undertake practitioner roles under the Act and provide education, stakeholder engagement and strategic leadership regarding voluntary assisted dying across each service.
- Development of strategies to increase nurse practitioner participation in voluntary assisted dying and consider amending the Act to allow nurse practitioners to participate as Coordinating or Consulting Practitioners in the voluntary assisted dying process.
- Implementation of a fee for service practitioner remuneration model for voluntary assisted dying practitioners.
- Review of the Medicare Benefit Schedule to include the addition of appropriate item numbers to address voluntary assisted dying practitioner remuneration inadequacies.

### Public and practitioner awareness

- Development of resources and strategies to improve public awareness of voluntary assisted dying as an end of life choice and improve access to public information on voluntary

assisted dying availability in health service facilities, particularly where voluntary assisted dying is not available as an end-of-life choice.

- Implementation of strategies to increase health practitioner awareness of the requirements of the Act and their obligations when a First Request is received from a patient.

### **Voluntary assisted dying substance**

- Amendment of the Act to permit the Contact Person or other nominated person to be able to assist the patient in the preparation of the prescribed substance for self-administration.

### **Reform of the *Commonwealth Criminal Code Act 1995* (the Criminal Code)**

- Amendments to the Criminal Code to remove the limitations on providing voluntary assisted dying information via a carriage service.
- Amendment of the Criminal Code to support electronic prescribing of the voluntary assisted dying substance

### **Institutional Objection**

- Amendment of the Act to ensure health service facilities, including those with an institutional objection, do not impede access to voluntary assisted dying.

### **Exemptions to citizenship and residency requirements**

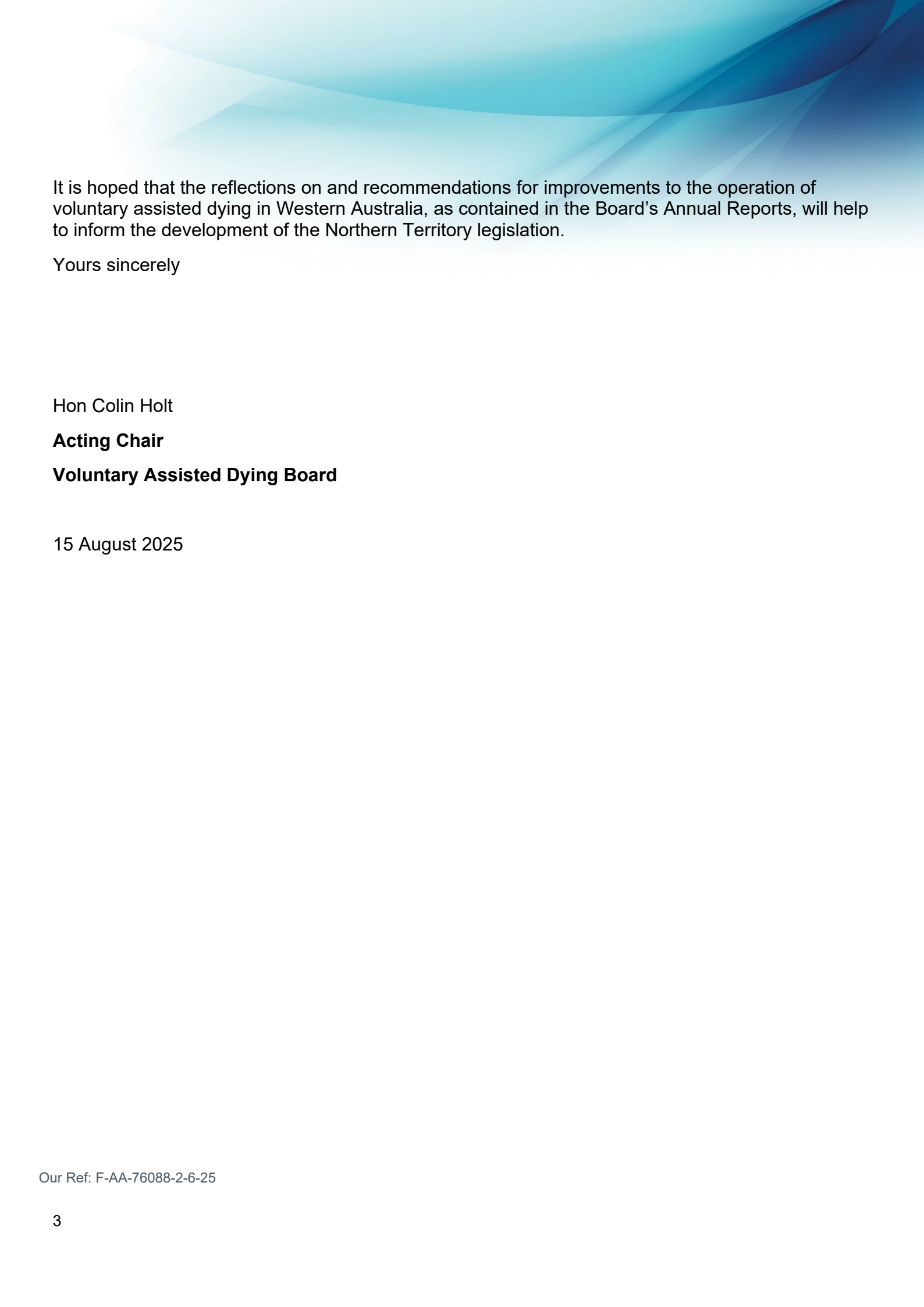
- Amendments to the Act to expand access to voluntary assisted dying for long-term Australian residents who are not an Australian citizen or permanent resident and provide an exemption pathway to the ordinary residency requirements for people who have a substantial connection to Western Australia or have been found eligible in another Australian jurisdiction.

### **Interpreters and translators**

- Amendments to the Act to ensure clarity in relation to the roles of interpreters and translators in the voluntary assisted dying process

The Board has observed that the following elements of the Act have had a positive impact on access to voluntary assisted dying:

- Medical and nurse practitioners can proactively raise voluntary assisted dying with a person as long as, at the same time, they also provide that person with information on their palliative care and treatment options.
- Patients must be assessed by two trained voluntary assisted dying practitioners, however, participating medical practitioners are not required to have specialty expertise in the disease, illness or medical condition expected to cause the patient's death.
- The administration decision (self-administration or practitioner administration) is made by the patient, in consultation with, and on the advice of, the Coordinating Practitioner.

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It is hoped that the reflections on and recommendations for improvements to the operation of voluntary assisted dying in Western Australia, as contained in the Board's Annual Reports, will help to inform the development of the Northern Territory legislation.

Yours sincerely

Hon Colin Holt

**Acting Chair**

**Voluntary Assisted Dying Board**

15 August 2025