Voluntary Assisted Dying Safety and Quality Guidance for WA Health Services

Contents

1.0 Introduction

The Voluntary Assisted Dying Act 2019 (the Act) will commence in full on 1 July 2021. The Act allows an eligible person to legally access medication that will cause their death. This medication is known as the voluntary assisted dying substance. Voluntary assisted dying is a choice available to an eligible patient who is approaching the end of their life. This is in addition to several other choices that patients may make about their end-of-life care, particularly involving advance care planning and palliative care services.

Although the law allows health care workers to refuse to participate in voluntary assisted dying, all health care workers and their employing organisations must be aware of specific obligations and restrictions imposed by the Act.

For this reason, organisations should develop a position statement, policies and procedures to manage enquiries even if they will not be offering voluntary assisted dying services.

The principles of the Act outlined in section 4 of the Act provided below may assist to inform policy development:

(1) A person exercising a power or performing a function under this Act must have regard to the following principles —

(a) every human life has equal value;

(b) a person's autonomy, including autonomy in respect of end of life choices, should be respected;

(c) a person has the right to be supported in making informed decisions about the person's medical treatment, and should be given, in a manner the person understands, information about medical treatment options including comfort and palliative care and treatment;

(d) a person approaching the end of life should be provided with high quality care and treatment, including palliative care and treatment, to minimise the person's suffering and maximise the person's quality of life;

(e) a therapeutic relationship between a person and the person's health practitioner should, wherever possible, be supported and maintained;

(f) a person should be encouraged to openly discuss death and dying, and the person's preferences and values regarding their care, treatment and end of life should be encouraged and promoted;

(g) a person should be supported in conversations with the person's health practitioners, family and carers and community about treatment and care preferences;

(h) a person is entitled to genuine choices about the person's care, treatment and end of life, irrespective of where the person lives in Western Australia and having regard to the person's culture and language;

(i) a person who is a regional resident is entitled to the same level of access to voluntary assisted dying as a person who lives in the metropolitan region;

(j) there is a need to protect persons who may be subject to abuse or coercion;

(k) all persons, including health practitioners, have the right to be shown respect for their culture, religion, beliefs, values and personal characteristics.

2.0   Purpose

This Voluntary Assisted Dying - Safety and Quality Guidance for WA Health Services (the Guidance) provides support for WA Health and private organisations developing policies and procedures for the implementation of their voluntary assisted dying services that are consistent with good clinical principles. As such, the Guidance is a point-in-time document aimed at facilitating organisational preparations in the lead up to 1 July 2021, when the Act commences in full.

Sections 5.1-5.3 of the Guidance provide links to a variety of resources to assist with policy development, including related legislation, standards, guidelines, information sheets, presentations and webinars. Additional resources will progressively be made available in the lead up to commencement of the Act in full. These resources will cover:

- The Western Australian Voluntary Assisted Dying Statewide Care Navigator Service (SWCNS) which will be available from 1 July 2021 to directly support patients, families and health practitioners needing information or assistance.
- The Western Australian Voluntary Assisted Dying Statewide Pharmacy Service (SWPS) which will be available from 1 July 2021 to provide advice on the prescription, supply and disposal of the voluntary assisted dying substance.

3.0   Governance

This Guidance aligns with the Western Australian Department of Health (the Department) Managing Voluntary Assisted Dying Policy that in turn aligns with the Clinical Governance, Safety & Quality Mandatory Policy Framework. WA Health entities are required to comply with these policies, however, organisations external to WA Health may find the policies a valuable reference.

3.1   Managing Voluntary Assisted Dying Policy

The Managing Voluntary Assisted Dying Policy requires WA Health Department organisations/ entities to have local policies and processes to ensure compliance with the following aspects of the Act:

- *The restrictions on certain health care workers initiating a discussion about voluntary assisted dying.
- The obligations on medical practitioners and nurse practitioners who initiate a   discussion about voluntary assisted dying.
- *Managing requests for information about voluntary assisted dying.
- *Managing requests for access to voluntary assisted dying.
- *The obligations on medical practitioners receiving a First Request for access to voluntary assisted dying.
- Managing requests for self-administration or practitioner administration of the voluntary assisted dying substance.
- Managing the voluntary assisted dying processes.
- Managing health care worker conscientious objection or refusal.
- *Managing complaints related to voluntary assisted dying.
- *The safe management and disposal of the voluntary assisted dying substance.
- To ensure staff understand that specific information on the preparation and administration of the voluntary assisted dying substance has been provided to the Administrating Practitioner and the person who has been assessed as eligible to access voluntary assisted dying.

Note * Organisations that only provide information and support to people wishing to access voluntary assisted dying should have processes to manage these aspects of the Act.

WA Health Department organisations must ensure practitioners participating in the provision of voluntary assisted dying:

- Have been confirmed as eligible to complete the mandatory WA Voluntary Assisted Dying Approved Training by the Department of Health.
- Have completed the mandatory WA Voluntary Assisted Dying Approved Training (valid for three years).
- Have received and confirmed their understanding of the material in the Voluntary Assisted Dying - Prescription and Administration Information document.
- Have been confirmed as eligible to participate for the patient to whom they are providing voluntary assisted dying services.
- Are credentialed to deliver voluntary assisted dying services at Health Service Provider site(s) and have voluntary assisted dying as part of their defined scope of clinical practice to deliver voluntary assisted dying services at Health Service Provider site(s).

3.2   Clinical Governance Safety and Quality Mandatory Policy Framework

The Guidance is designed to support consistency with the following four key principles that underpin the *Clinical Governance, Safety and Quality Mandatory Policy Framework* to deliver safe, effective, and timely treatment that is appropriate for a person's needs to all Western Australians:

- Care is consumer and carer centred
- Care is driven by information
- Led for high performance
- Organised for safety.

This document applies these principles to voluntary assisted dying by suggesting questions that organisations may wish to consider in preparation for implementation of voluntary assisted dying.

4.0   How to use this safety and quality guidance

The Guidance provides several resources to assist organisations in planning for and implementing necessary policy and practice changes to address the legalisation of voluntary assisted dying in Western Australia.

Section 4.1 provides a series of tables that cover the four core principles of the WA Clinical Governance Safety and Quality Mandatory Policy Framework. The questions contained within each table correspond to suggested actions and activities organisations can undertake to ensure voluntary assisted dying responsibilities are incorporated into existing policies, procedures and guidelines in a way that is consistent with the Framework.

Section 4.2 recognises the value of data collection and performance indicators in providing evidence that organisations can use to monitor the implementation and provision of voluntary assisted dying services in line with good principles.

Section 4.3 includes a Safety and Quality Implementation Checklist to assist organisations in reviewing their safety and quality policies and processes and clinical governance in preparation for the commencement of the Act. This checklist can assist in the development and completion of an implementation plan.

Collectively, working through the questions, examples and checklist provided in sections 4.1 through 4.3 will support organisations in the development of local policies, procedures and practices related to voluntary assisted dying that are most suitable for the organisation. In addition, the information provided in the resources listed in section 4.4 can assist organisations to further tailor their approach to voluntary assisted dying while maintaining consistency with the Act.

4.1 Considerations and actions consistent with the WA Clinical Governance Safety and Quality Mandatory Policy Framework

Tables 1 to 4 outline how organisations may implement voluntary assisted dying services using the framework's four core principles to deliver healthcare that is consumer and carer centred, driven by information, led for high performance and organised for safety.

Table 1: Application of the WA Clinical Governance Safety and Quality Mandatory Policy Framework principles for the implementation of voluntary assisted dying services

Principal 1: Care is consumer and carer centred
Outcome: Consumer partnership is evident at all levels of the organisation

	Questions relevant to voluntary assisted dying implementation	Suggested actions to ensure voluntary assisted dying responsibilities are incorporated into existing policies, procedures and guidelines
1.1	How will requests for information from consumers/ carers and staff about voluntary assisted dying be handled consistently across your organisation?	Organisations should have information about voluntary assisted dying available and on hand for people who request it. Information is available on the Department's website: https://ww2.health.wa.gov.au/voluntaryassisteddying
1.2	Does information need to be adapted to suit your local organisation setting or is additional material required?	
1.3	How will your staff be informed of the care pathway to ensure a consistent approach to patients requesting information about, or access to, voluntary assisted dying?	Consider forming a voluntary assisted dying steering committee/implementation group. Review policies, procedures and guidelines relating to; • dissemination of information to staff • service access • staff meetings

Table 1: Application of the WA Clinical Governance Safety and Quality Mandatory Policy Framework principles for the implementation of voluntary assisted dying services

Principal 1: Care is consumer and carer centred
Outcome: Consumer partnership is evident at all levels of the organisation

	Questions relevant to voluntary assisted dying implementation	Suggested actions to ensure voluntary assisted dying responsibilities are incorporated into existing policies, procedures and guidelines
1.4	What processes are needed for the provision of information, referrals, and communication?	Review policies, procedures and guidelines relating to; • consumer information • information sharing and confidentiality • informed consent
1.5	How will a person be supported if they are assessed as not meeting the eligibility criteria for voluntary assisted dying?	Review policies, procedures and guidelines relating to counselling and pastoral care. Provide information on the WA VAD Statewide Care Navigator Service.
1.6	What existing supports are in place for the person (also their carers, family and friends) that support conversations about what matters to them at end of life?	Review policies, procedures and guidelines relating to; • advance care planning • clinical care • consumer engagement and community participation • end of life • medical treatment planning and decision making
1.7	Are there clear policies for health practitioners about how patients are included in medical treatment decision-making?	

Table 1: Application of the WA Clinical Governance Safety and Quality Mandatory Policy Framework principles for the implementation of voluntary assisted dying services

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	Questions relevant to voluntary assisted dying implementation	Suggested actions to ensure voluntary assisted dying responsibilities are incorporated into existing policies, procedures and guidelines
1.8	How will people from different cultural backgrounds be supported when accessing voluntary assisted dying, including in circumstances where they are assessed as not meeting the eligibility criteria?	Review policies, procedures and guidelines relating to; • cultural and linguistically diverse communities • cultural competence • education for staff • engagement with the National Accreditation Authority for Translators and Interpreters (NAATI) • privacy and confidentiality Information (including translated material) will be available from 1 July 2021 on the Department's website: https://ww2.health.wa.gov.au/voluntaryassisteddying
1.9	How will interpreters be briefed prior to, and after, any discussions about voluntary assisted dying?	Review policies, procedures and guidelines relating to; • cultural and linguistically diverse communities • cultural competence • education for staff • engagement with the National Accreditation Authority for Translators and Interpreters (NAATI) • engagement of speech pathologists • privacy and confidentiality

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	Questions relevant to voluntary assisted dying implementation	Suggested actions to ensure voluntary assisted dying responsibilities are incorporated into existing policies, procedures and guidelines
1.10	How will the person requesting voluntary assisted dying and carers be engaged to contribute to the safety and quality of the person's voluntary assisted dying experience?	Review policies, procedures and guidelines relating to consumer engagement and community participation feedback (including complaints and compliments) and continuous improvement. Involve consumer and carer representatives in your health service's voluntary assisted dying steering committee/implementation group.
1.11	How will voluntary assisted dying be integrated into existing services, care and support?	Review policies, procedures and guidelines relating to; • bereavement support • carer assessment • clinical care • consumer engagement and community participation • handover • interdisciplinary care meetings • suicide risk and assessment • transfer of clinical information when a person is transferred within or between health services
1.12	How will people be supported throughout the assessment process, whether in the home or within the service?	
1.13	How will your organisation co-ordinate with other organisations to identify appropriately skilled medical practitioners and accommodate a person's wishes?	Review the Western Australian Statewide Care Navigator Service information sheet.

Table 1: Application of the WA Clinical Governance Safety and Quality Mandatory Policy Framework principles for the implementation of voluntary assisted dying services

Principal 1: Care is consumer and carer centred
Outcome: Consumer partnership is evident at all levels of the organisation

	Questions relevant to voluntary assisted dying implementation	Suggested actions to ensure voluntary assisted dying responsibilities are incorporated into existing policies, procedures and guidelines
1.14	How will families be supported following a voluntary assisted death?	
1.15	How will consent be sought from a person requesting voluntary assisted dying to share relevant information about their care with relevant staff?	
1.16	How will relevant staff know that a person is accessing voluntary assisted dying?	
1.17	How will people know their healthcare rights in relation to accessing voluntary assisted dying?	Review policies, procedures and guidelines related to patient rights and responsibilities and review the eligibility, substance administration options and privacy components of the voluntary assisted dying information sheets.

Table 2: Application of the WA Clinical Governance Safety and Quality Mandatory Policy Framework principles for the implementation of voluntary assisted dying services

Principal 2: Care is driven by information
Outcome: Relevant, accurate information is evident at all levels of the organisation to guide quality improvement activities

	Questions relevant to voluntary assisted dying implementation	Suggested actions to ensure voluntary assisted dying responsibilities are incorporated into existing policies, procedures and guidelines
2.1	How will your organisation ensure that medical and other health practitioners participating in voluntary assisted dying access and apply the WA Voluntary Assisted Dying Guidelines?	Review the Western Australian Voluntary Assisted Dying Guidelines to develop a pathway that incorporates a service access policy, including your health service's response and expected level of involvement. Review • What every medical practitioner needs to know • What every nurse-practitioner-needs-to-know.pdf • What every health practitioner and healthcare worker needs to know • Health professional participation
2.2.	What documentation processes are required and how will they be incorporated into existing documentation processes?	Review policies, procedures and guidelines relating to; • patient deterioration • limitations of treatment and • goals of care. Points to consider include; • assessment of decision-making capacity • care of the deceased • code of conduct • confidentiality and privacy • death certification requirements • death verification • end of life care • goals of patient care • initial needs assessment • initial needs identification

Table 2: Application of the WA Clinical Governance Safety and Quality Mandatory Policy Framework principles for the implementation of voluntary assisted dying services

Principal 2: Care is driven by information
Outcome: Relevant, accurate information is evident at all levels of the organisation to guide quality improvement activities

	Questions relevant to voluntary assisted dying implementation	Suggested actions to ensure voluntary assisted dying responsibilities are incorporated into existing policies, procedures and guidelines
2.2.		• notification to the Coroner • palliative care • recognising a deteriorating patient • transfer of clinical information when patient is transferred within or between health services Review the Western Australian Voluntary Assisted Dying Guidelines
2.3	Will your organisation record requests for information about voluntary assisted dying, in addition to requests for access?	Review policies, procedures and guidelines relating to; • audit and risk, including incident, reporting • benchmarking reports • clinical governance
2.4	Who in your organisation will be responsible for monitoring voluntary assisted dying activity?	• clinical services capability guidelines • communication of new or revised policy documents to the workforce • compliance with legislative requirements and relevant industry standards
2.5	How will safe and effective participation in voluntary assisted dying be measured?	• complaints register • consumer feedback, inclusive of evaluation of consumer information • safety and quality inclusive of quality improvement plan • mortality and morbidity case reviews • safety and quality indicators
2.6	How will your organisation monitor the forms to be reported to the Voluntary Assisted Dying Board?	Review the Western Australian Voluntary Assisted Dying Guidelines for required forms and timeframes for submission.

Table 2: Application of the WA Clinical Governance Safety and Quality Mandatory Policy Framework principles for the implementation of voluntary assisted dying services

Principal 2: Care is driven by information
Outcome: Relevant, accurate information is evident at all levels of the organisation to guide quality improvement activities

	Questions relevant to voluntary assisted dying implementation	Suggested actions to ensure voluntary assisted dying responsibilities are incorporated into existing policies, procedures and guidelines
2.7	How will voluntary assisted dying be incorporated into your organisation's patient and carer experience surveys?	Review policies, procedures and guidelines relating to; ■ consumer engagement ■ feedback (including compliments and complaints) and continuous improvement
2.8	How will your organisation seek feedback from people requesting voluntary assisted dying and carers in a sensitive and timely way?	
2.9	What review mechanisms will be in place to ensure ongoing improvement and best practice?	Review policies, procedures and guidelines relating to; ■ adverse events/ incidents ■ complaints ■ quality improvement
2.10	What principles will need to be developed by your organisation to guide research into voluntary assisted dying?	Review policies, procedures and guidelines relating to ethics for research activities
2.11	How will your organisation stay abreast of any research and quality improvement recommendations made by the Voluntary Assisted Dying Board?	Review the Voluntary Assisted Dying Board Annual Report and other relevant communications from the Board.
2.12	How will your organisation consider findings, and implement any recommendations, of the Voluntary Assisted Dying Board?	Review policies, procedures and guidelines relating to; ■ audit and risk including incident reporting ■ clinical governance ■ collecting and reviewing performance data ■ compliance with legislative requirements and relevant industry standards

Table 2: Application of the WA Clinical Governance Safety and Quality Mandatory Policy Framework principles for the implementation of voluntary assisted dying services

Principal 2: Care is driven by information
Outcome: Relevant, accurate information is evident at all levels of the organisation to guide quality improvement activities

	Questions relevant to voluntary assisted dying implementation	Suggested actions to ensure voluntary assisted dying responsibilities are incorporated into existing policies, procedures and guidelines
2.12		 - communication of new or revised policy documents to the workforce - escalation of care concerns - innovation and development - instructions on how to call for assistance if something unexpected occurs - mortality and morbidity case reviews - risk management - risk scoring matrix - safety and quality inclusive of quality improvement plan
2.13	How will your organisation collect information to support planning for workforce requirements?	Review policies, procedures and guidelines relating to; - clinical services capability guideline - contracts for locum and agency workforce - finances and funding models - strategic direction and business plans

Table 3: Application of the WA Clinical Governance Safety and Quality Mandatory Policy Framework principles for the implementation of voluntary assisted dying services

Principal 3: Led for high performance
Outcome: Executive and clinical staff have the right qualifications and skills to provide safe, high quality health care; and to foster a culture of openness, collaboration and continuous improvement.

	Questions relevant to voluntary assisted dying implementation	Suggested actions to ensure voluntary assisted dying responsibilities are incorporated into existing policies, procedures and guidelines
3.1	How will your organisation identify eligible Coordinating, Consulting and Administering Practitioners?	Review policies, procedures and guidelines relating to credentialing. Liaise with the WA VAD Statewide Care Navigator Service.
3.2	How will your organisation incorporate voluntary assisted dying into the education schedule?	Develop an education schedule for staff and volunteers which may include; ■ circulation of Department of Health Communiques/information related to VAD ■ intranet, internet, social media ■ newsletters ■ staff education sessions ■ staff email
3.3	How will voluntary assisted dying be incorporated into your organisation's e-health processes?	Review policies, procedures and guidelines relating to; ■ health records ■ documentation ■ e-health
3.4	What review mechanisms will need to be in place to ensure ongoing improvement and best practice in relation to e-health?	

Table 4: Application of the WA Clinical Governance Safety and Quality Mandatory Policy Framework principles for the implementation of voluntary assisted dying services

Principal 4: Organised for safety
Outcome: Minimisation of clinical risks and incidents and a systems approach to harm minimisation

	Questions relevant to voluntary assisted dying implementation	Suggested actions to ensure voluntary assisted dying responsibilities are incorporated into existing policies, procedures and guidelines
4.1	How will requests for information or access to voluntary assisted dying be handled by non-clinical staff and volunteers?	Review policies, procedures and guidelines relating to; • education strategy – learning and development • position descriptions • volunteers, administration and hospitality staff
4.2	How will staff caring for a person be supported throughout the process?	Review policies, procedures and guidelines relating to; • counselling and pastoral care • employee assistance program (EAP) • the WA VAD Statewide Care Navigator Service.
4.3	How will the involvement of interdisciplinary care teams be supported?	Consider establishing a voluntary assisted dying implementation steering committee that includes managers, clinical leads and quality assurance staff
4.4	What supports and processes will be put in place when a person wants to self-administer the voluntary assisted dying substance at home or in another facility?	Review policies, procedures and guidelines relating to; • advance care planning • clinical handover • consumer care • contracts for locum and agency workforce • debriefing • education strategy – learning and development position descriptions (management of external service providers) • employee assistance program (EAP) • escalation of care concerns • induction/orientation packages

Table 4: Application of the WA Clinical Governance Safety and Quality Mandatory Policy Framework principles for the implementation of voluntary assisted dying services

Principal 4: Organised for safety
Outcome: Minimisation of clinical risks and incidents and a systems approach to harm minimisation

	Questions relevant to voluntary assisted dying implementation	Suggested actions to ensure voluntary assisted dying responsibilities are incorporated into existing policies, procedures and guidelines
4.4		• instructions on how to call for assistance if something unexpected occurs • escalation of care concerns • induction/orientation packages • instructions on how to call for assistance if something unexpected occurs • medication charts • medical treatment decision-making • mentoring or peer review reports • position descriptions • witnessing documents • medication administration and handling Refer to the information sheets related to Coordinating Practitioner; 'Accessing VAD in WA-Choosing the contact person'; and 'Accessing VAD in WA Being the contact person'.
4.5	What physical environment changes may be required (for example, place of care, including for administration, and storage of the voluntary assisted dying substance)?	Consider discussion at management meetings.

Table 4: Application of the WA Clinical Governance Safety and Quality Mandatory Policy Framework principles for the implementation of voluntary assisted dying services

Principal 4: Organised for safety
Outcome: Minimisation of clinical risks and incidents and a systems approach to harm minimisation

	Questions relevant to voluntary assisted dying implementation	Suggested actions to ensure voluntary assisted dying responsibilities are incorporated into existing policies, procedures and guidelines
4.6	How will your organisation ensure it has accurate up-to-date information from the Government about voluntary assisted dying, both before and after the Act commences in full on 1 July 2021	Check the Department of Health Voluntary assisted dying website for information and updates https://ww2.health.wa.gov.au/voluntaryassisteddying Check the Voluntary Assisted Dying Board website for information and updates Maintain access to current copies of the • *Voluntary Assisted Dying Act 2019*
4.7	How will an adverse event be communicated to a person accessing voluntary assisted dying and/or their carers, family and friends (as appropriate)?	Review policies, procedures and guidelines relating to; ▪ complaints ▪ incident reporting ▪ open disclosure/protected disclosure
4.8	How will an adverse event be communicated to the person's treating team?	
4.9	How will an adverse event be reviewed and documented?	
4.10	How will an adverse event be communicated to Voluntary Assisted Dying Board?	Incorporate submission of the Practitioner Administration form to the Voluntary Assisted Dying Board into policy. Consider inclusion of awareness of the functions and powers of the Voluntary Assisted Dying Board as well as the provisions for referral for investigation/ enforcement under Parts 9 and 7 respectively of the *Voluntary Assisted Dying Act 2019*

Table 4: Application of the WA Clinical Governance Safety and Quality Mandatory Policy Framework principles for the implementation of voluntary assisted dying services

Principal 4: Organised for safety
Outcome: Minimisation of clinical risks and incidents and a systems approach to harm minimisation

	Questions relevant to voluntary assisted dying implementation	Suggested actions to ensure voluntary assisted dying responsibilities are incorporated into existing policies, procedures and guidelines
4.11	Where will your health service store voluntary assisted dying documentation in a person's medical record?	Review policies, procedures and guidelines relating to; • confidentiality and privacy • information and technology • medical records • medication storage and handling
4.12	What needs to be incorporated into your organisation's operational systems in relation to voluntary assisted dying?	Review policies, procedures and guidelines relating to; • credentialing and certification • environmental risk • human resources • information and technology • medical records • medication storage and handling • occupational health and safety • procurement guideline
4.13	What IT systems, records management and other organisational protocols need to be developed or revised to facilitate the voluntary assisted dying processes?	

4.2   Data collection and performance indicators

The Voluntary Assisted Dying Board (the Board) is an independent statutory body responsible for monitoring the Act. The Board will regularly review the voluntary assisted dying process in WA to ensure compliance with the Act and to recommend safety and quality improvements. As part of this responsibility the Board will collect a range of data and information.

Organisations can decide what data and information they collect in relation to voluntary assisted dying. The collection of performance indicators, may provide valuable information to identify areas that may benefit from improvement and inform policy direction and reform, ensuring that the management of voluntary assisted dying care remains safe and appropriate.

4.3   Safety and quality implementation checklist

Below is a checklist that may assist organisations intending to participate in voluntary assisted dying in the development and completion of an implementation plan. It is important for health services to engage with key stakeholders, staff, volunteers, health consumers and the wider community about the implementation of voluntary assisted dying.

The implementation plan must clearly identify the outcomes and give everyone the opportunity to be involved in the consultative process and to be informed and updated regularly, ensuring the Act is clearly understood in readiness for 1 July 2021.

Measure safety and quality of clinical services and have mechanisms to: (Indicate stage of completion with a tick)	Planned ✓	Partly implemented ✓	Established ✓	N/A ✓	Review date
1.0 Update the health service's strategic direction and business plans inclusive of:					
1.1 environmental risk					
1.2 finances and funding models					
1.3 human resources					
1.4 infection control					
1.5 information and technology					
1.5 information and technology					
1.6 procurement framework					
1.7 workplace health and safety					

Measure safety and quality of clinical services and have mechanisms to: (Indicate stage of completion with a tick)	Planned ✓	Partly implemented ✓	Established ✓	N/A ✓	Review date
2.0 Update clinical governance policy framework and tools to support voluntary assisted dying process inclusive of:					
2.1 audit and risk including risk matrix and incident reporting					
2.2 clinical services capability frameworks					
2.3 compliance with legislative requirements					
2.4 ethics for research					
2.5 reporting requirements					
3.0 Establish a multidisciplinary working group to support implementation in your organisation					
4.0 Develop core safety and quality voluntary assisted dying indicators and update the following					
4.1 benchmarking					
4.2 collection and review of performance data					
4.3 complaints register					
4.4 quality improvement plan					
5.0 Update or develop any policies, procedures, protocols or systems to incorporate voluntary assisted dying that may include:					
5.1 admissions procedures					
5.2 advance care planning					
5.3 clinical care including care of the deceased					
5.4 clinical handover					
5.4 codes of conduct					
5.5 conscientious objection					
5.6 consumer complaints					
5.7 consumer experience of care feedback					

Measure safety and quality of clinical services and have mechanisms to: (Indicate stage of completion with a tick)	Planned ✓	Partly implemented ✓	Established ✓	N/A ✓	Review date
5.8 coercion					
5.9 consent					
5.10 cultural competence					
5.11 decision-making					
5.12 end of life care					
5.13 escalation of care concerns					
5.14 Information sharing – privacy and confidentiality					
5.15 management of the voluntary assisted dying substance					
5.16 medical records documentation and IT infrastructure					
5.17 mortality and morbidity case reviews					
5.18 notification to the coroner					
5.19 open disclosure/ protected disclosure					
5.20 referral					
5.21 service access/service coordination					
5.22 telehealth					
5.23 use of interpreters					
5.24 witnessing documents					

5.0   Resources

5.1   Legislation

Criminal Code Act 1995 (C'th)

Medicines and Poisons Act (WA)

Voluntary Assisted Dying Act 2019 (WA)

5.2   Standards and Guidelines

Aged Care Quality and Safety Commission (2019), "Quality Standards | Aged Care Quality and Safety Commission", online only. ACQSC.

Aged Care Quality and Safety Commission (2019), "Charter of Aged Care Rights", online only. ASQSC

Aged Care Quality and Safety Commission (2019), "Guidance and Resources for Providers to support Aged Care Quality Standards", online only. ACQSC.

Australian Commission on Safety and Quality in Health Care (2010), "Australian Safety and Quality Framework for Health Care", Sydney New South Wales. ACSQHC.

Australian Commission on Safety and Quality in Healthcare (2017), "National Safety and Quality Health Service Standards Second edition", Sydney New South Wales. ACSQHC.

Australian Commission on Safety and Quality in Healthcare (2017),"National Safety and Quality Health Service Standards – Guide for Hospitals", Sydney New South Wales.

Australian Commission on Safety and Quality in Healthcare (2012), "Australian Safety and Quality Guideline for Health Care – Putting the Guideline into Action: Getting Started for Health Service Executives and Boards .pdf" Sydney Australia. ACSQHC.

Australian Commission on Safety and Quality in Healthcare (2012), "Australian Safety and Quality Framework for Health Care-Putting the Guideline into Action: Getting Started for the Healthcare-Team," Sydney Australia. ACSQHC.

Australian Commission on Safety and Quality in Healthcare (2019), "National Safety and Quality Health Care Standards User Guide for Governing Bodies", Sydney New South Wales. ACSQHC.

Australian Commission on Safety and Quality in Healthcare (2015),"National Consensus Statement: Essential Elements for Safe and High Quality End-of-Life Care", Sydney New South Wales. ACSQHC.

Australian Commission on Safety and Quality in Healthcare (2017),"National-Model-Clinical-Governance-Framework", Sydney New South Wales. ACSQHC.

Australian Council on Healthcare Standards (2017), "Equip6 information pack", Ultimo New South Wales. ACHS.

Australian Council on Healthcare Standards (2018) "What is accreditation?", Ultimo New South Wales. ACHS.

Australian Government Department of Health and Aging (2011), "A National Framework for Advance Care Directives", Canberra Australia. Department of Health and Aging.

National Disability Insurance Scheme Quality and Safeguards Commission (2020), "NDIS Practice Standard – NDIS Practice Standards and Quality Indicators January 2020 Version 3", Sydney New South Wales. NDISQSC.

Palliate Care Australia (2018), "National Palliative Care Standards (Edition 5 updated November 2018) ", Canberra Australia. PCA.

Royal Australian College of General Practitioners (2017), "RACGP-Standards-for-general-practices-5th-edition", East Melbourne, Victoria. RACGP.

Western Australian Government Department of Health (2018) "Clinical Governance, Safety and Quality Mandatory Policy Framework", Perth Western Australia. Department of Health.

Western Australian Government Department of Health (2019), "Clinical Governance Framework", Perth Western Australia. Department of Health.

Western Australian Government Department of Health (2021), "Managing Voluntary Assisted Dying Policy" , Perth Western Australia. Department of Health.

5.3 Information available on the Department website for the community, practitioners and health professionals https://ww2.health.wa.gov.au/voluntaryassisteddying

5.3.1 Information for the community

- Who is eligible (PDF 884KB)
- Overview of the process (PDF 922KB)
- Frequently Asked Questions (PDF 900KB)
- Glossary of terms (PDF 884KB)
- Statewide Voluntary Assisted Dying Care Navigator Service (PDF 881KB)
- WA Statewide Voluntary Assisted Dying Pharmacy Service (PDF 881KB)
- Making the first request (PDF 883KB)
- Assistance with communication (PDF 881KB)
- Review of certain decisions (PDF 882KB)
- Completing the written declaration (PDF 884KB)
- Choosing the Contact Person (PDF 881KB)
- Considerations at end-of-life (894KB)
- Being the Contact Person (PDF 884 KB)
- Supporting someone through the process (PDF 888KB)
- Considerations for an assisted death (PDF 890KB)

5.3.2 Information for Health professionals

- What every medical practitioner needs to know (PDF 929KB)
- What every nurse-practitioner-needs-to-know.pdf
- What every health practitioner and healthcare worker needs to know (PDF 914KB)
- Health professional participation (PDF 890KB)
- FAQs for health professionals (PDF 895KB)
- WA Voluntary Assisted Dying Guidelines (PDF 11MB)
- Statewide Voluntary Assisted Dying Care Navigator Service (PDF 881KB)

- [WA Statewide Voluntary Assisted Dying Pharmacy Service (PDF 881KB)](#)

- [Voluntary Assisted Dying Act 2019 Access Standard (PDF 893KB)](#)

- [Practitioner pre-registration for access to WA VAD Approved Training (PDF 2MB)](#)

- [Approved information for a person making a First Request for Voluntary Assisted Dying (PDF 942KB)](#)

5.3.3 Information for other professionals

- [Information for interpreters (PDF 885KB)](#)

- [Information for first responders (PDF 884KB)](#)

Note links accessed 11 June 2021
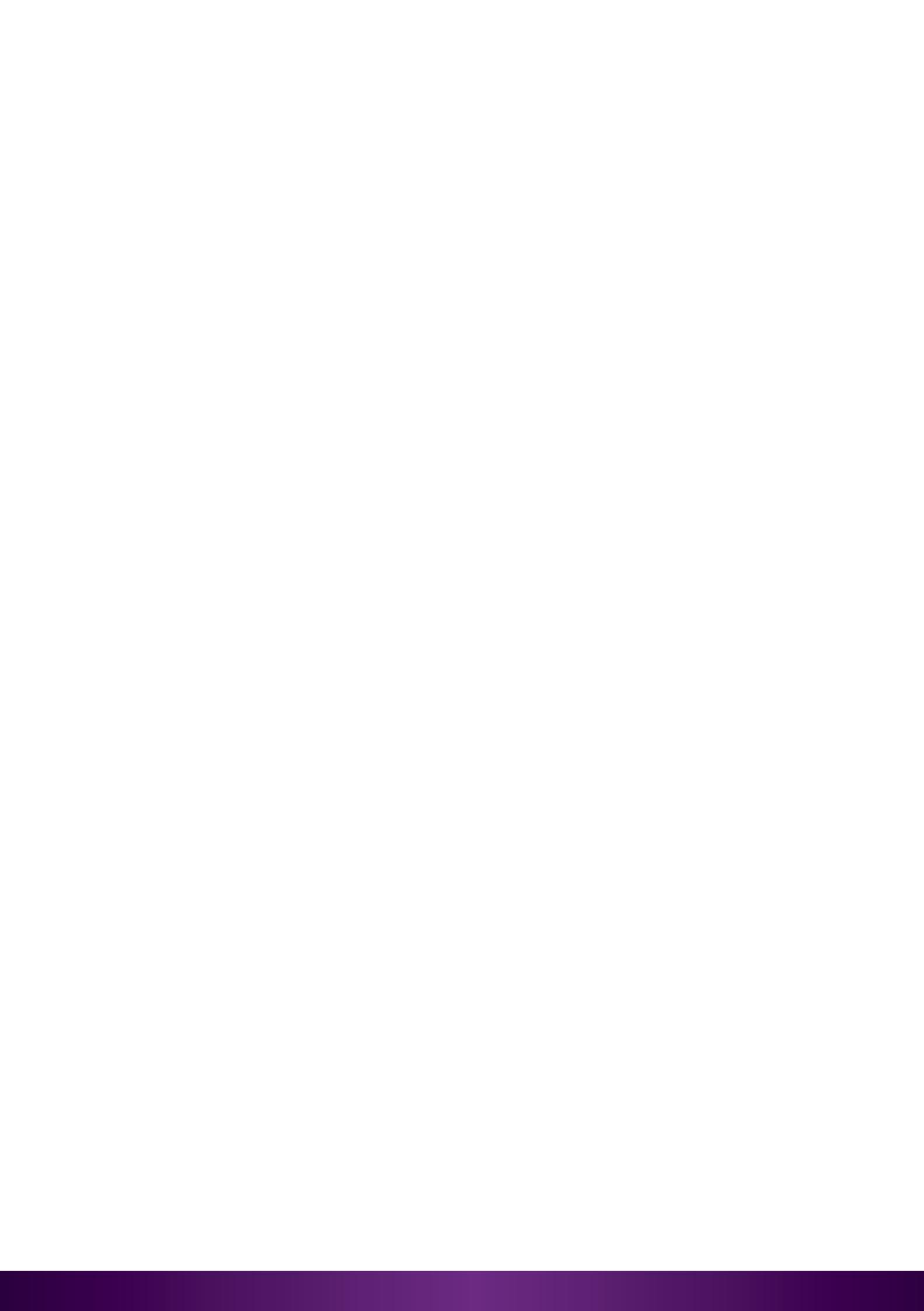
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