CONSIDERING OUR CURRENT CONTEXT
11th February 2019
This could be a good news story for our services...
A national and international tradition of care...
A vision of human dignity and a commitment to excellence and equity...
“As you go out to serve the sick today, remember this...”
A beautiful and courageous ethic of care...
The *telos* of which sets clear parameters for us: some things just don’t belong to this ethic of care...
A carefully considered approach to this new legislative environment...
Legislation for who, and at what cost?
A distraction?
A locked box
And some unknown drugs
A ‘navigator’ service and a state-funded system
CHA Taskforce Process

Advocacy Work
- Political engagement
- Public communications
- Internal communications

Establishment of CHA Response taskforce
- Cross-sector membership
- Intended to cultivate consistent response;

Guidelines
- Scenario testing
- Internal and external communications

Implementation and communication
- Public engagement
- Internal comms
- Ongoing education
- Monitoring
CHA Taskforce Governance Framework
Doctors need to be 

1. Fellowship of a specialist medical college 
   OR 
2. Vocationally registered General Practitioner

Documents to be provided:

1. First Assessment Report Form
2. Consulting Assessment Report Form
3. Written Declaration Form
4. Application Form

Self Administration Permit:

- No supervision required
- Does NOT require witness
- Doctor or family may be present

Practitioner Administration Permit:

- if lose capability of self administration
- DHHS Informs the VAD Review Board

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Primary ‘Protective’ Mechanism:

- Need to be at least 9 days after the day of the request
- Has now made three separate witnessed requests to undergo process

Pharmacist to dispense, label and instruct regarding drug:

- Instruct on how to self-administer the VAD drug
- Store VAD drug in a locked box
- Under no obligation to administer the drug
- Must return all medications if not used
- Labels
  - Purpose
  - Dangers
  - Stored in locked box
  - Returns unused drug

Doctor Not to Initiate Discussion:

- Must NOT be initiated by doctor in substance
- Must NOT be recommended by doctor in substance

Doctor Satisfied the Request is Voluntary:

“I am satisfied that... is acting voluntarily and without coercion, and.... request... is enduring”