Voluntary assisted dying in Western Australia

Considerations for an assisted death

Summary

This information sheet is for people who are family members, friends or carers of a person who is considering requesting access to voluntary assisted dying when it becomes a legal option for eligible Western Australians from 1 July 2021. This information sheet covers planning for an assisted death and what to do after the person has died.

Key points include:

- There is no right or wrong way to deal with the approaching death of someone close to you and your responses will be shaped by many factors.
- Talking about and planning for death can be worthwhile activities that allow you to prepare for what is to come and support the wishes of the person accessing voluntary assisted dying.
- If your family member or friend is considering voluntary assisted dying, they are probably thinking about what they want the end of their life to look like. It can be helpful to discuss if they have any plans for their death and if so, what their plans involve.
- After the person dies, arrangements will need to be made depending on where the death has occurred. These are detailed below.
- If you are in the role of Contact Person you will need to return any unused or remaining voluntary assisted dying substance to an Authorised Disposer.
- There are resources available to support you while your friend or family member is going through the voluntary assisted dying process and after they have died.

Approaching the end-of-life

When voluntary assisted dying becomes legal in WA, it will only be an option for an eligible person who is already approaching the end of their life. Accessing voluntary assisted dying means that a person can have more choice over where, how and when they will die.

There is no right or wrong way to deal with the approaching death of someone close to you and your responses will be shaped by many factors – your beliefs, values, culture, personal experiences, current circumstances and your relationship with the person.

There are many decisions around care choices that a person will make towards the end-of-life, and preferably sooner. Ideally, if a person is considering voluntary assisted dying, they will have already done advance care planning with a medical practitioner (doctor) or another health professional involved in their care.

The person may have also appointed an Enduring Guardian to make healthcare decisions for them if they become unable to do so themselves or have an Advance Health Directive consenting to, or refusing, particular medical treatments in anticipation of losing the ability to make their own decisions. They may also be receiving palliative care services to help manage their symptoms and provide support.
Discussing the person’s wishes

Someone considering voluntary assisted dying is probably thinking about what they want the end of their life to look like. It can be helpful to discuss with your family member or friend if they have any plans for their death and if so, what their plans involve. They may have plans for a funeral or remembrance service.

Accessing voluntary assisted dying also means that a person can decide who (if anyone) they would like to have with them when they die. Your family member or friend may ask you to be present when they take the voluntary assisted dying substance that will cause their death. If this is right for you, it is important to consider how being present during their death might affect you. The information sheet Voluntary assisted dying in Western Australia – Supporting someone through the process provides useful information on taking care of yourself as a family member, friend or carer.

There may be several people present for the person’s death or shortly afterwards. If this is likely to be the case, it can be a good idea to talk beforehand about who will be there and if there are any tasks that those present can do before, during or after the person has died.

The process of dying

Just as each person is unique, so too will be each person’s death. The Department of Health has an information booklet called Understanding the dying process that goes through the changes that may occur in the lead up to a person’s death.

Voluntary assisted dying will allow your family member or friend to access a medication that will cause their death. This medication is called the voluntary assisted dying substance. A death that occurs from taking the voluntary assisted dying substance may be a little different to other deaths. The person will have more choice over when and where they will die. They will always be conscious when making the decision to take the substance or have it administered by their medical practitioner or nurse practitioner.

It is known from places where voluntary assisted dying has been available for a while that most people will lose consciousness shortly after taking the voluntary assisted dying substance or having the substance administered. Almost everyone will die very soon after this.

After death occurs

People will approach the death of a family member or friend in different ways. It’s hard to know how you will feel in that moment. If you are with the person when they die, or shortly afterwards, you may want to sit with them for a while and say your goodbyes.

Arrangements will need to be made depending on where the death has occurred.

Death at home

If a medical practitioner is present for the person’s death, they can confirm that the death has occurred and complete the Medical Certificate of Cause of Death. If a nurse practitioner or registered nurse is present for the person’s death, they can certify life extinct, but a medical practitioner will still need to complete the Medical Certificate of Cause of Death as well.

If the person has decided to self-administer the voluntary assisted dying substance (take it themselves) a medical practitioner should visit to confirm that the death has occurred. It can be a good idea to decide beforehand which medical practitioner will be called and who will call them.

If the medical practitioner who confirms the death is not the person’s Coordinating Practitioner (the medical practitioner who organised the voluntary assisted dying process), the Coordinating Practitioner will need to be notified that the person has died.
Take some time for close friends and relatives to say their goodbyes. If you would like, a spiritual advisor can be asked to attend to provide support following the death.

A funeral director will also need to be contacted. They can guide family members through the funeral arrangements, if these have not been organised already. The funeral director will also arrange for the person's body to be taken to the funeral home.

If everything has gone to plan, it is not necessary to call for an ambulance or the police as this will be considered an expected death.

If the person has been receiving palliative care, a nurse from the service can visit to offer support.

**Death in a hospital or care facility**

If death happens in a hospital or care facility, the staff will be able to help and support you through the process.

**Returning any remaining voluntary assisted dying substance**

If the person decides to self-administer the voluntary assisted dying substance it is expected that there should not be any substance remaining. However, if there is, the Contact Person will need to return any remaining voluntary assisted dying substance to an Authorised Disposer.

If you take on the role of the Contact Person, you will receive additional information about your responsibilities from the Voluntary Assisted Dying Board when you are appointed to the role. The Voluntary Assisted Dying Board may contact you after the person's death to check if you were aware of any unused substance remaining and if so, that you have given the remaining substance to an Authorised Disposer.

If a medical practitioner or nurse practitioner has administered the substance, they will take responsibility for disposal of any unused or remaining substance.

**Death certificate**

For people who access voluntary assisted dying the law requires that there be no reference to voluntary assisted dying on the death certificate. This is to protect the privacy of the person (and possibly their family too).

The cause of death listed will be related to their underlying disease, illness or medical condition.

**Bereavement support for family, friends and carers**

After death, family members and friends may experience a range of positive and negative emotions. Supporting each other will be an important factor in progressing through the experience of bereavement. Grief can be very painful, but most people will gradually find ways to live with their loss.

There are several community organisations that offer support and counselling services to help with managing grief.

The Australian Centre for Grief and Bereavement can help carers, family and friends deal with the death of a loved one and put them in touch with appropriate support groups.

- Telephone: 1800 642 066, Monday to Friday (9.00 am to 5.00 pm) or access the website [www.grief.org.au](http://www.grief.org.au)

Palliative Care WA provides the WA community with a palliative care information and support line which can be used to access support for dealing with grief and loss.

- Telephone: 1800 573 299, Monday to Sunday (9.00 am to 4.30 pm) or access the website [www.palliativecarewa.asn.au/information-and-support](http://www.palliativecarewa.asn.au/information-and-support)
Carer's WA can provide counselling support to carers who are going through the experience of grief and loss.

- Telephone: 1800 007 332, Monday to Friday (8.30 am to 4.30 pm) or access the website www.carerswa.asn.au

The person's Coordinating Practitioner, another health professional involved in their care, or a Care Navigator (from 1 July 2021) can also help you to access the right supports, including counselling services.

Glossary of terms

Refer to Accessing voluntary assisted dying in Western Australia - Glossary of terms for explanations of key terms used within this information sheet.

Acknowledgement

Some content in this document is based on the resources of the Victorian Department of Health and Human Services and has been used with permission.