

## **The VADANZ position on telehealth use in voluntary assisted dying practice**

### **Background**

Voluntary assisted dying (VAD) is legal in every Australian state. This means an eligible terminally ill person can ask for medical help to end their life. The person must be in the late stages of an advanced disease, illness or medical condition and experiencing suffering they find intolerable. Only VAD-qualified health professionals can provide this service to their patients.

Voluntary Assisted Dying Australia New Zealand (VADANZ) is the peak body for VAD professionals in Australia and New Zealand ([VADANZ](#)).

Contemporary evidence supports the value and effectiveness of telehealth-delivered health services and that these consultations can be comparable to those delivered in-person. Telehealth has now become a critical part of Australia's healthcare system and its core benefits include:

- Increased access to healthcare
- Improved continuity of care
- Increased flexibility for patients
- Reduced patient costs and reduced impact of transportation on the patient and more broadly, the environment.

### **Definition**

Telehealth is healthcare delivery or related activities that use any form of technology as an alternative to face-to-face consultations. It includes, but is not restricted to, video or phone (audio-only) consultations, transmitting digital images and/or data, and prescriptions.

It does not refer to the use of technology during an in-person consultation.

### **Position statement**

*It is the position of Voluntary Assisted Dying Australia New Zealand (VADANZ) that people can receive high-quality and effective Voluntary Assisted Dying (VAD) services using telehealth and that telecommunications are important for the timely access and delivery of health information and care.*

*While telehealth is now an essential part of the healthcare landscape, the optimal mode of delivery for some VAD services will be in-person. For example at least one of the assessments of a person requesting VAD should be performed in person. However when needed to deliver timely, person-led care, telehealth is an alternative for VAD practitioners to consider.*

*The same high standards apply to VAD practice, regardless of whether this is providing a health service by telehealth or in-person. VAD practitioners should align with the [AHPRA Telehealth guidance for practitioners](#) which outlines the expectations for all registered health practitioners when using telehealth.*

*Telehealth is utilised in many aspects of healthcare provision and there are no legislative or process restrictions on its use in other sensitive areas of medicine such as mental health, contraception, and consultations regarding termination of pregnancy. Decisions regarding the clinical appropriateness of the use of Telehealth should be at the discretion of the treating medical practitioner and the patient, regardless of the field in which these consultations take place.*

*The successful implementation of telehealth can help to address VAD health service inequity including improving access for people living in rural and remote areas and can help avoid excessive delays in the provision of VAD care.*

*Telecommunications such as phone, email and even text message are routinely used by pharmacy teams and nurses to provide timely information, support and advice to patients. The inability to do this adds complexity, delays and potential risks for patients.*

*In addition, telehealth is valuable and appropriate for communication between health professionals especially between those in rural and remote areas with metropolitan colleagues.*

*VADANZ recommends that policy makers and healthcare funders recognise the value of and need for compassionate, timely patient care for VAD and that telehealth-delivered assessments and services are a reasonable and accepted alternative to traditional in-person delivery.*

## **Further information**

### **What is voluntary assisted dying?**

VAD means an eligible person can ask for medical help to end their life. The person must be in the late stages of an advanced disease, illness or medical condition. They must also be experiencing suffering they find intolerable.

If a person meets all the criteria and the steps set out in the VAD law are followed, they can take or be given a VAD substance to bring about their death at a time they choose. The person must freely consent and have decision-making capacity throughout the process.

### **Who can provide voluntary assisted dying services?**

A range of health professionals may play a role in a person's VAD care. However, only authorised VAD practitioners may assess a person's eligibility, prescribe or administer VAD.

### **Where could telehealth be used in the VAD process?**

The aims of using telehealth and technology-based consultations in VAD practice are to improve access to, and avoid excessive delays in the provision of, VAD care.

The process can be divided into three stages: assessment, prescription and administration.

- **Assessment:** Telehealth could be used to conduct parts of the assessment process, such as a second assessment or receiving the first and final requests from patients
- **Prescription:** Telehealth may be used to communicate information about VAD, such as scripts between VAD practitioners and Statewide Pharmacy Services
- **Administration:** Telehealth may be used to discuss the VAD substance and administration.

Telehealth can also play a crucial role in supporting ongoing communication and support for patients and their families such as the care delivered by care coordinators and navigators.

### **How can a VAD practitioner using telehealth be satisfied a patient is not being coerced?**

A cornerstone of VAD law is that a patient's request for assistance to die be informed, enduring and made without pressure or coercion. When using telehealth, VAD practitioners must satisfy themselves that the patient is acting voluntarily and without influence from others. This may require face-to-face consultations using videoconferencing, or independent confirmation by qualified third parties (such as the person's usual health care providers). If this is not possible, or if any doubts arise about coercion, an in-person consultation must be arranged.

### **What are the expectations of VAD practitioners using telehealth to provide VAD healthcare?**

The same high expectations apply to VAD practitioners when using telehealth to provide patient consultations/patient services as they do when practitioners are delivering services in-person.

When using telehealth or telecommunications in VAD practice, you are expected to:

Practise in accordance with the law in your jurisdiction and your National Board's regulatory standards, codes and guidelines. Specifically, you will:

- act in accordance with the Voluntary Assisted Dying legislation in your jurisdiction
- act in accordance with the standards set out in your profession's Code of conduct or equivalent including expectations about confidentiality and privacy, informed consent, good care, communication, health records and culturally safe practice
- ensure you have appropriate professional indemnity insurance (PII) arrangements in place for all aspects of your practice, including telehealth consultations. Your PII provider can advise you about your PII coverage.

Be aware of and comply with:

- state and territory legislative requirements including (but not limited to) authorities that regulate health records and digital image prescriptions
- privacy legislation and/or any other relevant privacy requirements
- when appropriate, the use of government health and prescription monitoring services such as Prescription Shopping Programme, My Health Record, Healthenet, Real Time Prescription Monitoring platforms and
- any other relevant legislation and/or regulatory requirements.

### **How does the Code of conduct apply to telehealth?**

The Code of conduct for any health profession is a key part of each National Board's regulatory framework to protect the public and support the other objectives of the Health Practitioner Regulation National Law, as in force in each state and territory (the National Law).

A profession's Code of conduct defines the National Board's expectations for the practitioners' professional conduct to support good patient care and promote the safety of the Australian public within an ethical framework. These codes are also intended to let the community know what they can expect from practitioners.

Code of conducts provide guidance on the National Board's expectations of what constitutes good practice and it is the Board's expectation that this guidance would be applicable to practitioners providing telehealth services or traditional in-person services.

All health professionals have a responsibility to be familiar with your profession's Code of conduct and apply it to your practice, including when using telehealth.

### **How can I deliver safe, effective VAD health services via telehealth?**

You can deliver safe, effective health services via telehealth by adhering to the same principles you apply when providing care during an in-person consultation. The list below is not exhaustive but is designed to provide you with some high-level guidance about what you should do to safely and effectively use telehealth.

- Assess whether telehealth is safe and clinically appropriate for the patient, particularly noting the limitations of telehealth, and whether an in-person consultation is necessary to provide good care.
- If, because of the limits of technology, you are unable to provide a service to the same standard as an in-person consultation then you must advise the patient of this, and endeavour to ensure that a follow-up consultation is conducted in a timely manner in order to preserve the standard of assessment and care that the patient receives.

#### At the beginning of a telehealth consultation

- Identify yourself and confirm the identity of your patient.
- Provide an explanation to your patient of what to expect from the telehealth consultation.
- Ensure information is provided to your patient in a way they understand, and that informed consent is obtained in relation to fees, proposed treatment, sharing of information with others in their care team and if you are recording the consultation.
- Use qualified language or cultural interpreters where needed.
- Ensure you protect your patient's privacy and their rights to confidentiality, particularly if you are working from home.

#### During a telehealth consultation

- Ensure you maintain clear and accurate health records of the consultation.
- Make appropriate arrangements to follow the progress of your patient and, where appropriate and with the consent of the patient, inform other relevant health practitioner(s) of the VAD services planned.

- Support your patient to arrange this an in-person consultation where this is required to provide good care.

#### Other factors in deciding if telehealth is suitable for VAD patients

- At least one in-person consultation is preferred for VAD assessments by practitioners, and in the rare case that this is not possible, doctors will require additional due diligence to be satisfied that the applicant meets the already strict conditions of VAD law.
- Your patient's preference
- Harms that may result from delays in accessing VAD care.
- Ancillary information available through discussions with patients' usual General Practitioner, specialist, or other health care provider can be a useful source of information with regards to family dynamics and providing insight into any risk of coercion.

#### **What technology can I use to deliver telehealth?**

No specific equipment is required to provide telehealth services. Services can be provided through telephone and widely available video calling apps and software.

Free versions of applications (i.e. non-commercial versions) may not meet applicable laws for security and privacy. Practitioners must ensure that their chosen telecommunications solution meets their clinical requirements, their patient's or client's needs and satisfies privacy laws.

#### **Do AHPRA and the National Boards have any additional guidance relating to telehealth?**

The Medical Board of Australia has developed Guidelines for technology-based patient consultations to inform medical practitioners and the community about the Medical Board of Australia's expectations of medical practitioners who use telehealth.

#### **Review**

This guidance is designed to support practitioners to use telehealth in the VAD process. It will be reviewed and updated every two years, or more regularly if required.

Last reviewed: February 2024