



**DWDV President,
Lesley Vick:**

"DWDV has advocated for these laws since its inception in 1974 and it is extremely gratifying to see the hard work done over the years finally resulting in humane, safe and compassionate legislation"



**Health Minister,
Hon Jill Hennessy:**

"We have landed in a place where Victorians who are confronting terminal illness and are enduring unbearable pain, will have a safe and compassionate option around assisted dying."

HISTORIC VOTE IN LEGISLATIVE COUNCIL

At 4 pm on Wednesday 22nd November, the Victorian Legislative Council passed the Voluntary Assisted Dying Bill 2017 by 22 votes to 18, after a marathon 60 hour debate – reputedly the longest debate on any Bill in its history. That the Bill reached this point was due to the courage and tenacity of Premier Daniel Andrews, Health Minister Jill Hennessy and the Labor Cabinet, and the Government Leader in the Council Gavin Jennings.

That the debate took so long was due to a pointless filibuster by opponents, particularly Bernie Finn, Inga Peulich, Georgie Crozier, Josh Morris and Rachel Carling-Jenkins, who made frequent egregious speeches, and asked the same futile questions, repeatedly.

No praise is too high for Gavin Jennings, who was superbly prepared (magnificent help from Health), who remained at the helm answering these questions with extraordinary calm and patience, explaining detail, and refuting many pointless amendments.

Some reasonable amendments were made to shore up support from a few members, but the structure of the Bill remained essentially intact. The major change was a reduction from 12 months to six in prognosis, in the time-frame for a request. However, an exception was allowed for people with a neuro-degenerative illness. It was primarily for this group that DWDV argues so strongly for 12 months, so not so much was lost in the amendment.

Andrew Denton and others of the GGA team, and Tyrell from DWDV, spent much of the debate in the visitor's gallery. Having watched some of it on my computer, I have to admit I did not have the stomach to listen, or worse, view it all.

This was supposed to be a conscience vote for both Liberal and Labor members. The more I observed, the more it became evident what a mockery the 'conscience' vote description was. It became a contest between Labor and Liberal, with most Labor members supporting a Labor initiative, and most Liberals opposing it. Some Liberals who supported it in the Upper House were apparently subjected to intense pressure to oppose. It is to the enormous credit of Simon Ramsay, Bruce Atkinson, Mary Wooldridge and Ed O'Donohue that they stayed the course with their support. Their votes were critical, as was, of course, the enduring support of the Greens and Fiona Patten (Reason Party).

This victory was due to three main factors. First the hard, long yards put in by DWDV and its members over 25 years in bringing community support to 85%, the fantastic boost from Go Gentle Australia (much of it behind the scenes) over the last two years, and the courage and determination of the Labor Party, the Greens and a handful of compassionate Liberals.



Gavin Jennings MP with DWDV board members, Rodney and Dorothy

-Dr Rodney Syme

THE ESSENTIAL ELEMENTS OF THE VOLUNTARY ASSISTED BILL FOR DWDV MEMBERS

The Voluntary Assisted Dying Act is a tightly written legal document which details the actions of doctors and others after a terminally ill suffering person makes a request for assistance to die. It is unlikely that many lay people will ever read this Act, but they need to have an idea as to how it works, and how to make it work for them.

Of critical importance is that the suffering person themselves (not a relative) must raise the request for assistance with their doctor – the doctor cannot raise it.

It is also essential to realise that the process for obtaining assistance can be detailed, and take some time.

It is therefore important to begin a conversation with your doctor at an early stage of a diagnosis of a terminal illness, or possible terminal illness.

It is important to recognise the difference between a formal request for assistance, and a conversation. A conversation (not mentioned or defined in the legislation) involves discussing your possible attitudes to a terminal illness, and exploring your doctor's views regarding assistance under the law. It is valuable to do this early in the process, because if he is opposed or ambivalent, you may need to engage with another doctor.

To make a formal request for assistance you must have a diagnosed terminal illness (likely to die within 6 months) and have intolerable and unrelievable suffering, or at least significant suffering which has every prospect of becoming intolerable. While the Act indicates that you are properly the arbiter of the nature of your suffering, recognise that most doctors will be conservative, and will be likely to respond positively when your disease is advanced and its stage is consistent with the probability of intolerability. This relates to the earlier point of starting a conversation at an earlier stage, so that the doctor is aware of the progression of your disease and suffering.

It should be clear that it is counterproductive to minimise your suffering, which includes more than just physical symptoms.

Having your request met will be easier with a doctor whom you know well and who knows you, and your condition, well. Good documentation, such as pathology reports, scans, and specialist reports re diagnosis and prognosis, will be critical.

Do not be surprised if this doctor of initial contact ("the coordinating doctor") raises questions regarding further investigation or treatment, possibly psychiatric referral, or palliative care. He has a duty to be careful and to ensure that you are fully informed about all your options. You do not have to follow such information.

Your coordinating doctor has two serious obligations. First, to ensure that you are competent (have mental capacity) – that is, that you fully comprehend the request and all its implications. Second, that you are not making your request under duress – that is, that you are not being pressured or influenced in your decision by any other person. The doctor must be sure that it is your decision, and yours alone.

This legislation will not apply to people with pure psychiatric illness (they are highly unlikely to be terminally ill), nor to people with dementia (who will not have mental capacity when they have less than six months to live).

Having established these matters, your coordinating doctor will then have to refer you to a second consulting doctor who has to independently confirm all of the above. Both doctors must complete certificates and the first doctor make application for permission to prescribe medication which you must self-administer. The good news is that you will decide if you take the medicine, when you take it, where you take it and also determine who can be present with you to say goodbye.

Finding these two doctors might be time-consuming for the following reasons. Any doctor can refuse involvement. The doctors concerned must both be experienced (Fellows of a medical College) and one must have "relevant expertise and experience in the disease expected to cause the death". These criteria may be harder to meet in peripheral areas.

Finally, involve your family in your views, help them understand your suffering and its progress. I believe doctors will be more co-operative if they know there is a supportive family. Your family can be valuable advocates, but must not be seen to be creating any duress.

It will not be easy to obtain assistance because of the bureaucratic nature of the Act. So you need to start a conversation before your suffering is critically intolerable, and establish the basis for a formal request to flow smoothly if the progress of your illness ultimately requires it.

Finally, please inform DWDV of your outcomes of conversations and requests. We will need to develop data about problems in the Act which will need to be addressed, and also information about the attitudes of the medical profession.

DWDV will almost certainly be running workshops to explain the operation of the Act in more detail.

-Dr Rodney Syme

THANK YOU TO OUR HARD-WORKING MEMBERS

The Voluntary Assisted Dying Bill officially passed through Parliament at 12pm on Wednesday November 29th, 2017. We would like to thank all our members who have worked towards securing these laws. Whether you visited your MP or contacted them via letter, phone or email, we are grateful for everyone who took up the call over the last year to voice your support, and call on our Parliamentarians to support Voluntary Assisted Dying legislation.

To all of our members who have been with us for a considerable amount of time, we are very grateful for your prolonged support and efforts in working toward finally legalising an assisted dying law. DWDV members and supporters have played a vital role in getting this law passed. We should all be proud of what we have achieved by securing this law.

MESSAGES OF SUPPORT



To Lesley, Rodney and everyone at DWDV,

Congratulations, my heartfelt thanks to you all for all your efforts in finally achieving what some thought sometimes might be unachievable. When I look back at the hundreds of members that have worked so hard over so many years, so many dedicated people and now we are the lucky ones to be here to see our aims become a reality. It has been my privilege and honor to have played a small part in the process and to be involved with DWD.

Well done!!

Hon Rod Mackenzie



What a sweet result!

My thoughts went back to dear old crusty Tim Saclier, who in the seventies did so much for so long as a one man crusader for the cause with the Voluntary Euthanasia Society with no discernible results. We sit on their shoulders. A fantastic team event over half a century. I find myself tearing up with relief and joy. You must feel the same.

Rev Kenneth Ralph

EDNA GRAY, REST IN PEACE

Edna Gray, born in 1914, was a DWDV Life Member and certainly our oldest member when she died in September, a few months short of her 104th birthday.

Edna was passionately determined in her support of end of life choice, and personal control.

With her extraordinary vitality and imagination, wit and independence, she made her mark wherever she was and impressed whomever she met.

She enthusiastically embraced IT and in an interview article in The Herald Sun to mark her 100th birthday Edna was dubbed "Melbourne's i-Granny".

She used her i-pad every day keeping in touch with grandchildren; she was on Facebook; she continued her horse riding into her 80s.

Edna was a delight. She was unforgettable, and she will be greatly missed.

Our thoughts are with her daughter Margaret and her son Geoff, and her family.

Vale Edna.

MEDIA WATCH VOLUNTEER NEEDED

DWDV stalwart Max Sutherland has been providing not only DWDV but all the DWD organisations within Australia with a very effective media watch (a weekly compendium of all media articles on VAD in Australia).

We are currently looking for a volunteer to assist and ultimately take over this media watch task from Max.

The collation of the weekly media watch requires good computer skills, time (1/2 hour to an hour per week) and preferably an Apple Mac computer.

Max will provide all assistance and help in getting started.

Although the legislation in Victoria has been passed, this is still an essential service for all other DWD organisations and for DWDV in protecting the legislation.

If you are interested or would like more information please contact the DWDV Office on (03) 9874 0503

NSW VOLUNTARY ASSISTED DYING BILL DEFEATED



**NSW Nationals MP,
Trevor Khan:**

"It's clear that there's a lot of community support for this. It really needs that campaign to continue and we'll get over the line in due course."

Debate began on the Assisted Dying Bill in NSW on November 16 in the Upper House, and late that night was defeated in a vote 19-20, reminiscent of the defeated Bill in South Australia a year ago that also lost by the single vote.

Nationals MP, Trevor Khan said he was "obviously disappointed" with the vote but pledged to keep pushing for the legislation, saying that he hoped to put forward another VAD Bill in the next term of Parliament.

DWDNSW president Sarah Edelman was understandably upset with the result. She expressed her disappointment in a statement released after the vote in the NSW Parliament:

"Upon reflection, I think we all could not have done any more than we did. I am very sad for all the terminally-ill people in NSW, including Annie Gabrielides, who may now miss out on having the end-of-life choice they deserve. I hope that Trevor will indeed try again before too long, when the time is right, and that we will have bounced back by that time."

DWDV extends our commiserations on the defeat of the NSW VAD Bill. We agree with Ms Edelman that they ran a fantastic campaign to secure an assisted dying law, and we hope it will not be too long before NSW once again sets its sights on end of life choices for the terminally ill.

DEVELOPMENTS IN OTHER STATES

Western Australia

WA is currently conducting an Inquiry similar to what occurred in Victoria 2 years ago. DWDV have made a submission, and we believe that DWDWA will also be making a submission to the consultation process.

ACT

The ACT & Northern Territory are unable to debate assisted dying laws due to the Euthanasia Laws Act 1997, which prohibits the Parliaments of Australian Territories from being able to pass their own assisted dying laws. On Nov 2, ACT MP Tara Cheyne successfully moved a motion to begin petitioning the Federal Government to overturn the Bill.

NT

Federal NSW Senator, David Leyonhjelm has a Bill tabled in Parliament that will repeal the Euthanasia Laws Act 1997 and enable the Territories to have their own debate. Senator Leyonhjelm has said that "I have not encountered anyone from the ACT or NT who doesn't believe the Commonwealth should stop intruding into their decisions."

MEMBERSHIP RENEWAL – FINAL REMINDER FOR 2017

**Renew online or by
phoning our office on (03)
9874 0503.**



Don't forget to renew your DWDV membership for the 2017-2018 year.

The passing of the Voluntary Assisted Dying law is an historic victory for supporters of end of life choices. DWDV will be continuing our advocacy of these laws as they are implemented to ensure that all Victorians are able to access safe and compassionate assisted dying laws if they wish. We will continue to promote conversations about death, dying and medical treatment preferences, as well as providing resources and information to the public and the health sector.

Keep your membership current - renew before December 31st

We have had a great response from our members who have renewed their membership so far. We hope you will continue with us on our journey to improve end of life experiences so that all Victorians can die with dignity.

DWDV 44TH ANNUAL GENERAL MEETING 2017

Thank you to all of our members who attended the 44th Dying With Dignity Victoria Annual General Meeting on Saturday 4th November at the Unitarian Church in East Melbourne. The DWDV Board was pleased to see so many of our members attend the event.

President Lesley Vick provided a good overview of what has been a very momentous year for DWDV, and discussed the Assisted Dying Bill that was before Parliament.



We were thrilled to have Victorian Upper House MPs Fiona Patten (Reason Party) and Colleen Hartland (Vic Greens) in attendance, where they provided insight into the Voluntary Assisted Dying Bill currently before the Victorian Parliament.



Our members had the opportunity to ask questions, and we thank Fiona and Colleen for their time in answering them.

Rodney Syme Medal 2017

Each year the Rodney Syme medal is awarded to a person who has made an outstanding and distinguished effort in pursuing the Dying With Dignity cause. At the AGM, the 2017 medal was presented to Fiona Patten MP. She has been a long-time supporter of Dying With Dignity Victoria's causes and was instrumental in setting up the Inquiry into End of Life Choices, which went on to recommend to the Victorian Government the need to develop an assisted dying framework. Fiona has been a strong voice in the media and in Parliament, voicing her support for the need for end of life choices, and we are proud to have awarded her with our organisation's medal of recognition.



DWDV Patron, Hon Rod Mackenzie

DWDV Patron, Hon Rod Mackenzie was also in attendance. He has been a brilliant supporter of end of life choices for many years, and he gave a short speech about the importance of the Bill before Parliament.



PRESIDENT'S SUMMARY* REPORT

Following the significant developments in VAD law reform reported at the 2016 AGM, this year has seen us reach a number of crucial milestones towards securing VAD legislation in Victoria.

The Government's response in December 2016 stated that they would table assisted dying legislation in the second half of 2017. The Health Minister appointed a Ministerial Advisory Panel (MAP) to develop the details of a VAD framework for Victoria. The 7 member panel, chaired by immediate past President of the AMA, Professor Brian Owler, included medical, nursing, palliative care, legal, health care quality and safety and disability advocacy experts. These experts consulted extensively with over 300 stakeholders across Victoria, including DWDV. This comprehensively researched and evidence-based process culminated in the Bill put to Parliament.

During the process resulting in the introduction of legislation, DWDV has been very active and many people deserve our appreciation. The Campaign Working Party meets regularly, plans strategy and develops material for use in our campaign. Apart from the formal submissions mentioned above, DWDV has developed media attention with regular articles in major newspapers and we pursue publicity whenever opportunities arise via press releases, interviews and social media. At our request, several of our Ambassadors have written opinion articles for publication. We provide speakers to community groups and we maintain connections with other relevant organisations. Requests for speakers from community groups, students and other activist organisations have increased this year as the issue has attracted more attention. Max Sutherland monitors media coverage of the issue and Janine Truter coordinates our Rapid Response Writers group which has had great success in getting letters published.

DWDV has also maintained its supportive and active collaboration with Go Gentle Australia, the organisation set up by Andrew Denton to promote VAD law reform.

All members of the hardworking DWDV board have made valuable and ongoing contributions to our work during this important time. Responses to the government inquiries, campaign funding, our member advocate campaign, letters to MPs, questionnaires for MPs and all the myriad aspects of our work need to be targeted and appropriate. Our members are vital in these activities and their engagement with their local Members of Parliament – armed with our advocacy and information kits – has been crucial.

Other major achievements include:

Dr Rodney Syme's VCAT case

Earlier in 2016, following a complaint in relation to counselling he was providing to a terminally ill Victorian man, the Medical Board of Australia had placed a condition on Dr Syme's medical licence, and ordered him not to engage in any medical care that had the primary purpose of ending a person's life. Dr Syme challenged this ruling in an appeal to the Victorian Civil and Administrative Tribunal, arguing that he provided Nembutal to people who are suffering intolerably to relieve their suffering and to give them control over their death, not with the primary intention of ending their life. This approach is consistent with the longstanding common law doctrine of double effect. Two palliative care experts supported Dr Syme as well as the dying man. The appeal was successful and the order on Dr Syme's medical registration was overturned. In its ruling, VCAT noted that it is widely accepted in palliative medicine that doses of medicine may be given to patients to relieve their suffering even though it is foreseeable and indeed inevitable that those doses will also have the effect of hastening the patient's death.

Medical Treatment Planning and Decisions Act 2016

The Health Minister, the Hon Jill Hennessy, conducted a review of end of life care and the Medical Treatment Act 1988. DWDV made comment on the Review's Position Paper, emphasising our consistent support for giving statutory recognition to Advance Care Directives. The Medical Treatment Planning and Decisions Act 2016 was passed in November 2016, with a default commencement date of 12 March 2018 to allow health services, health practitioners and the public to prepare for the new laws.



Lesley Vick – DWDV President

***Full report provided at AGM and [now available on DWDV's Website](#)**

TREASURER'S SUMMARY* REPORT for 12 months to 30 June 2017

As an Incorporated Association with annual gross revenue of less than \$250,000, Dying With Dignity Victoria Inc (DWDV) is not required to have its financial statements reviewed or audited by an external auditor. Nonetheless, as a best practice measure, the Board members decided that DWDV's accounts should be subject to an independent external audit.

I am now very pleased to report that the accounts of DWDV for the year ended 30th June 2017 were audited by Collins & Co. The Special Purpose Financial Report for the year ended 30th June 2017 is available on our website and copies were also made available at the Annual General Meeting.

I confirm that all financial activities undertaken by DWDV during the 2016/17 financial year were consistent with and aligned to the organisation's aims and legislative charter.

Further, I confirm that the key responsibilities of the Treasurer, as outlined below, were duly fulfilled and for the 2016/17 financial year, the Board is satisfied that:

- There was adequate oversight of the financial operations undertaken by the organisation, including the integrity and reliability of the systems used to capture and record financial data.
- It was advised and aware of the organisation's financial position, and was well placed to assess inherent risks that were identified.
- Adequate internal controls were in place.
- Expenditure was properly monitored and reported to ensure the DWDV operated within its means.
- Best practice compliance with regard to accounting policies and corporate governance principles were adopted.

For the current reporting period – the year ended 30th June 2017 - DWDV closed with a loss of \$18,433.

The result achieved during the 2017 financial year shows the loss reduced from \$117,298 in the 2016 financial year, to improve to a loss of \$18,433 in 2017 is in the main attributable to the generous donations and bequests received from members.

The table below shows the movement in DWDV's net asset base over the last five financial years.

Movement in Net Asset Base Financial Year Ended 30 th June:					
	2013	2014	2015	2016	2017
	\$	\$	\$	\$	\$
Total Assets	430,870	492,347	479,583	358,882	345,390
Total Liabilities	10,494	1,140	6,972	3,569	7,826
Net Assets	420,376	491,207	472,611	355,313	337,564
Accumulated Funds	420,376	491,207	472,611	355,313	336,880
Unrealised Gain					684
Total Equity	420,376	491,207	472,611	355,313	337,564
Movement	(59,558)	70,530	(18,296)	(117,298)	(17,749)
	Decrease	Increase	Decrease	Decrease	Decrease

Dying With Dignity Victoria Inc. Income & Expenditure Statement - Summary 2015/2016 and 2016/2017 Financial Years			
	2015- 2016	2016- 2017	% Change
INCOME			
Donations	75,511	150,513	
Interest Received	12,307	7,316	
Investment Income Received	-	7,050	
Membership Fees	46,650	50,890	
Sundry Income	1,229	5,680	
Workshop Fees	7,750	7,075	
TOTAL INCOME	143,447	228,524	59% Increase
EXPENDITURE			
Employee Costs	135,472	173,287	
Rent & Utilities	24,811	29,083	
IT & Communications	5,444	8,264	
Printing, Postage & Supplies	9,612	15,331	
Conferences & Meetings	7,781	6,657	
Workshop Expenses	590	451	
Bank Charges	2,123	1,797	
Gifts, Donations & Prizes	497	116	
Depreciation	13,019	7,500	
Fundraising Expenses	1,749	3,299	
Campaign Expenses	55,408	-	
Professional & Copyright Fees	2,118	1,172	
Legislative Council Inquiry Expenses	2,121	-	
TOTAL EXPENDITURE	260,745	246,957	5.5% Decrease
NET PROFIT OR (LOSS)	(117,298)	(18,433)	

The table below shows the 2016/2017 actual loss of \$18,433 against budget

Dying With Dignity Victoria Inc. Income & Expenditure Statement – Against Budget Year Ended 30 th June 2017			
	Actual	Budget	Variance
INCOME			
Donations	150,513	140,000	10,513
Interest Received	7,316	11,500	-4,184
Investment Income Received	7,050		7,050
Membership Fees	50,890	45,000	5,890
Sundry Income	5,680	2,000	3,680
Workshop Fees	7,075	7,500	-425
TOTAL INCOME	228,524	206,000	22,524
EXPENDITURE			
Employee Costs	173,287	175,930	-2,643
Rent & Utilities	29,083	29,700	-617
IT & Communications	8,264	8,700	-436
Printing, Postage & Supplies	15,331	15,800	-469
Conferences & Meetings	6,657	9,000	-2,343
Workshop Expenses	451	700	-249
Bank Charges	1,797	2,200	-403
Gifts, Donations & Prizes	116	600	-484
Depreciation	7,500	3,300	4,200
Fundraising Expenses	3,299	-	3,299
Professional & Copyright Fees	1,172	1,200	-28
TOTAL EXPENDITURE	246,957	247,130	(173)
NET PROFIT OR (LOSS)	(18,433)	(41,130)	(22,697)

Treasurer's Summary Report continued

Statement of Financial Position

The Statement of Financial Position as at 30th June 2017 shows the assets owned and the liabilities payable by DWDV. The net of these assets (defined as assets less liabilities) is represented by the Total Equity. This can be seen at the bottom of the Statement of Financial Position in the Special Purpose Financial Report for the year ended 30th June 2017 prepared by the auditors.

DWDV's assets consist primarily of the cash balances held in various term deposit accounts, an investment in a Balanced Index Fund plus the cash balance in the main trading / operating bank account.

All term deposits are invested in government guaranteed banks. At maturity, each term deposit is reviewed and re-invested to optimise returns.

The investment in the Sandhurst Trustee's – Bendigo Balanced Index Fund was made in November 2016. The distributions received from this investment are reinvested into the fund.

As at the end of the 2016/17 financial year income of \$997 was due to be received. This income related to \$587.75 due from the ATO for withholding tax and \$408.91 for Franked Dividends from the Bendigo Bank Balanced Index Fund investment.

As at the end of the 2016/17 financial year the only liabilities due related to employee accrued annual leave and payment of the World Federation of Right to Die Societies' Membership Fees. All superannuation guarantee and PAYG payments were made prior to the 30th June 2017.

There are no ongoing financial issues that would be likely to impact the organisation in the short to medium term (6 to 12 months) and so the Board is comfortable that DWDV is able to settle its obligations as and when they may fall due.

Furthermore, the Board is confident that DWDV can build on the 2016/17 financial year results to further stabilise the organisation finances while having increased flexibility to deliver on the organisational aims and stated strategies.











Mark Newstead – DWDV Treasurer

***Full report provided at AGM and [now available on DWDV's Website](#)**

DWDV BOARD MEMBERS FOR 2018

The 2017 DWDV Board members all nominated to continue their positions on the 2018 Board. All Board Members were re-elected unopposed at the November 2017 AGM.

The members of the 2018 DWDV Board have all expressed a passion and excitement to continue the work of Dying With Dignity Victoria, as we enter the implementation phase of the Voluntary Assisted Dying law.

									
<i>Lesley Vick, President</i>	<i>Dr Rodney Syme, Vice President</i>	<i>Mark Newstead, Secretary</i>	<i>Carmel McNaught</i>	<i>Meredith Doig</i>	<i>John Hont</i>	<i>Judith Hoy</i>	<i>Dorothy Reading</i>	<i>Hugh Sarjeant</i>	<i>Helga Khuse</i>

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Patrons: Mr Julian Burnside QC, Hon. Rod Mackenzie OAM, Hon. Ian Macphree AO

President: Lesley Vick; Vice-President: Dr Rodney Syme; Secretary/Treasurer: Mark Newstead;

Other Board Members: Meredith Doig, John Hont, Judith Hoy, Helga Kuhse, Carmel McNaught, Dorothy Reading, Hugh Sarjeant. Special Adviser: Lyn Allison