

VOLUNTARY ASSISTED DYING BILL 2021

Legislative Assembly Second Reading Debate – copied from Hansard 25 November 2021

Mr ADAM CROUCH (Terrigal) (13:49): I stand in the Chamber of the New South Wales Legislative Assembly to represent my community and their views regarding the Voluntary Assisted Dying Bill 2021. I acknowledge the contributions of all members of Parliament on this very important piece of legislation. I acknowledge the member for Sydney, who is in the Chamber, and all of those who have put extensive work into this legislation. These debates and contributions often show the very best of the New South Wales Parliament. From the outset I make it very clear that this conscience vote—or free vote, as it has been described—is not a vote of my conscience, but of that of the community of the electorate of Terrigal, which I have the honour and privilege to represent. I often reflect on the enormous responsibility that has been entrusted to me as the member for Terrigal.

In many of the contributions regarding the Voluntary Assisted Dying Bill 2021 there has been lengthy commentary regarding palliative care. From the outset I acknowledge that the bill must work alongside palliative care. The two are not, cannot and should not be mutually exclusive. Palliative care services on the Central Coast are outstanding and I acknowledge the team at the Central Coast Local Health District. Last year I was proud to announce that for the first time in the history of the Central Coast our region would have its own palliative care unit. On Thursday 16 July 2020 I stood side by side with the hardworking Elsie's Retreat committee, Judy Maudsley, Margaret Pearce, Oana McBride and Peter Hurley, and the rest of the orange army, to make that announcement.

The committee had spent close to 10 years working tirelessly to improve palliative care options on the Central Coast. In April this year I was able to attend the opening of the 10-bed palliative care unit at Gosford Hospital. The new facility provides a high level of care that could not be provided at home for patients who would benefit from a caring team in homely comforts. The unit is staffed with a 20-strong team within the Gosford Hospital campus so that patients have access to specialist medical, nursing and allied health services. Since the opening of the palliative care unit the retreat has provided a sanctuary for hundreds of people who have been cared for as inpatients. Across our community on the Central Coast every year more than 1,500 people receive high-quality end-of-life care. I acknowledge Central Coast Local Health District director of palliative care Dr Sally Carr. Dr Carr leads truly outstanding palliative care services on the Central Coast. Her knowledge, practical experience and compassion for patients is nothing short of amazing. I can attest to this as Dr Carr is my wife's palliative care doctor. I also acknowledge the work of Brooke Leadbetter, the nursing unit manager, as well as the rest of the fantastic team in the palliative care unit.

The New South Wales Government has committed millions of dollars in recurrent funding for those 20 additional full-time equivalent staff to work in the unit as part of the growing palliative care workforce right across New South Wales. The unit is located in the hospital's former maternity ward, which has undergone an amazing transformation. It is very fitting that the former maternity ward is now a dedicated palliative care unit. I also note that the 2020-21 budget includes a further \$56 million over four years to enhance palliative care across New South Wales, including additional end-of-life support packages; 35 specialist allied health professionals; education and training; and improved bereavement and psychosocial support. As all members know, it takes a very special person to work in a palliative care unit, for so many obvious reasons. I also welcome the commitment by the Premier to continue to improve the Government's support for palliative care, which I know will be greatly welcomed.

Palliative care is not all about the funding; it is also about the need for a better understanding and early discussions with GPs, specialists, patients and their families about those services. Palliative care is about management and quality of life. Unfortunately, I can speak with some authority on this issue. In 2013 my wife, Jill, was diagnosed with stage 4 metastatic breast cancer. She had a 25 per cent chance of surviving those first five years. Eight years on she receives amazing support, which has allowed her to work and, of course, live as normal a life as possible. The support is incredible and covers many aspects. Many members have spoken in this place about advance care directives, but when you sit down with your best friend and the person you love the most and work through an advance care directive, you become acutely aware of their personal wishes, including, of course, end of life.

I have had many people across our community contact me to share their deep and very personal circumstances, which have led to their support of the bill. It has been extremely heartening to speak to many people from my electorate and spend time listening to them. I acknowledge everyone who has taken the time to contact me, including Jim and Christine Gorman, who have been tireless advocates on this issue. These discussions in many cases do not actually reflect or relate to an experience with a loved one, but to their own end-of-life expectations that they and their families are working through. These are often common circumstances where people are obviously experiencing illnesses in themselves as well. Of course, others have experienced the trauma of nursing a loved one through extreme illness and suffering until their final days. I have spoken also to a number of health experts in my community, and I thank them for their invaluable feedback and acknowledge their concerns.

Based on this I will also be supporting a number of the proposed amendments that improve safeguards. It is incumbent on us as legislators and representatives of our communities to listen to them and not to shy away from tough or uncomfortable decisions. Death, of course, is incredibly confronting for all of us, regardless of its inevitability. We have made incredible advancements in medical technology and we have found innovative ways to extend life, providing many people with longer and more fulfilling lives. But we all have to accept that this extension of life, which is valuable to all of us, must not and cannot come at the cost of the equally valuable quality of life. It is often only when we are placed in the position of experiencing a life-limiting or life-ending illness that the emotional enormity of our own mortality becomes a reality.

Since the announcement of the bill I have made it very publicly known that I would reflect the wishes of my wonderful electorate and I have sought feedback from our community. In response to the Voluntary Assisted Dying Bill 2021 I asked the constituents of the Terrigal electorate their thoughts and, of course, their opinions. I thank those who sent the 3,781 individual responses that I received, 83 per cent of which indicated that they support the bill; 17 per cent indicated that they did not. Given the clear position of my community, I support the bill and welcome the amendments that will help strengthen and address concerns that have been raised. I thank all members who have contributed so far to the respectful and sensitive debate on the issue. I commend the bill to the House.