

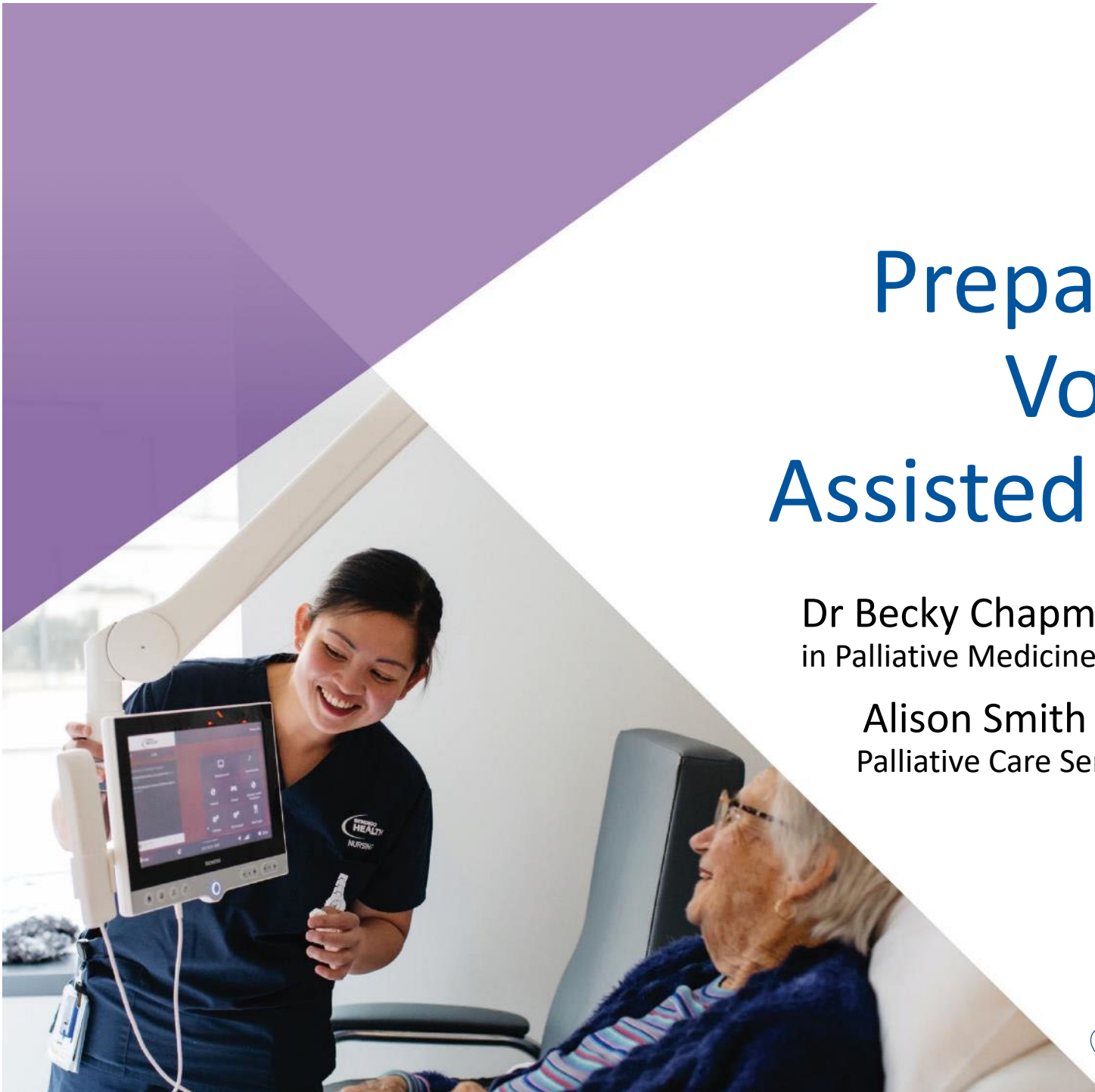
Preparing for Voluntary Assisted Dying -

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Navigator.



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About us

Bendigo Health is a leading regional health service, with around 4000 staff and a catchment area covering a quarter of the size of Victoria.

In addition to operating a large 724-bed acute hospital, we offer subacute services including inpatient and outpatient rehabilitation, a regional psychiatric service, inpatient, community and regional specialist palliative care, residential care, specialist clinics, dialysis and a range of outreach services such as hospital in the home.

Bendigo Health Specialist Palliative Care Service has three streams:

- Inpatient (10 bed) unit (SPCEU)
- Community Specialist Palliative Care (BCSPCS)
- Loddon Mallee Regional Specialist Palliative Care Consultancy Service (LMRSPCCS)

How BH approached the implementation of voluntary assisted dying

- **July 2018** -DHHS requested nominations from regional health services to participate in VHA VAD Model of Care project.
 - Consultative Group & Development group (model of care & quality)
- **Oct 2018** - Bendigo Health (BH) commenced Working group and project officer.
 - Held regional forum
 - Confidential Survey to staff – Medical staff separated and data available only to CMO.
 - Education program delivered including - Online module.
- **Dec 2019** – BH received fix term funding for Regional VAD Navigator position.

What worked well?

- BH Working group – information dissemination.
- Positive and Enquiring Organisational approach as End of Life Choice.
- Specialist Palliative Care participation in VHA consultative groups.
- Navigator based on site.
- State COP share experiences/ models/ resources.
- Project Leads relationship and knowledge of the geographical area.

What would you do differently?

what are other
words for
with hindsight?



in retrospect, looking back,
on reflection, retrospectively,
from experience,
with the benefit of hindsight



Thesaurus.plus

- Hindsight is a wonderful thing
- Prepare for Initial hype - Overthought things – is that a bad thing though
- More support for Patient who were ineligible and not known to Palliative care

Describe how the introduction of voluntary assisted dying has impacted palliative care?

- Choice and Control
- Improved discussion of death & dying/ Preferred Place of Care & Preferred Place of Death
- Collaboration of services
- Disappointment for ineligible patients and families
- Bereavement/ counselling demands.
- Some clinicians have given up on patients.

And finally.....

Work that we're still undertaking:

- Ongoing policy review
- Organisational GAP analysis of End of Life & Palliative Care (Governance)
- Sharing experiences and learning



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