Objective
To investigate whether staff from a large regional health service (RHS) support the legalisation of Voluntary Assisted Dying (VAD) and the implementation of VAD at their workplace.

Methods
Staff were invited to complete an anonymous online survey comprising both closed and open-ended questions.

80% of staff supported the administration of VAD within the health service. 88% of staff supported the provision of eligibility assessment and VAD.

71% of participants agreed that if the health service was to offer VAD services, a special unit or facility should be available.

The majority of respondents were nurses (44%), followed by non-clinical (20%), other health practitioners (12%) and specialist doctors (7%). This is reflective of the organisation, as was the distribution of gender (80% female, 20% male).

Approximately half of the respondents expressed concern about monitoring (49%) or implementation (53%) of VAD.

There were negligible differences in support for VAD by role, however, specialist doctors were significantly less supportive (65%).

Discussion
In 2015 an international survey, undertaken by the Economist and Ipsos MORI, reported that more than 70% of Australians believe that assisted dying should be legal. Consistent with the views of the general public, our findings suggest that the majority of Barwon Health staff are supportive of the legalisation of VAD. The finding that specialist doctors were less supportive of VAD is also consistent with an earlier study conducted by the Australian Medical Association prior to the new law. However, when compared to the broader literature, our data suggest a greater level of support among specialist doctors. This trend may be the result of increased community support for VAD in recent times.

Our findings suggest that health service staff with roles potentially closest to the ‘coal face’ may be less supportive of the VAD law, which has significant implications on the feasibility of implementing or providing different aspects of the service. Staff also raised some concerns about education and training, voluntariness and stigma; all issues to address for health services implementing VAD.

References: