

MEDIA RELEASE

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Regional end-of-life care spend welcome but Andrews Government must still deliver equitable access

Catholic Health Australia's (CHA) CEO Suzanne Greenwood today welcomed Health Minister Jill Hennessy's announcement that the government's *Regional Health Infrastructure Fund* will for the first time be expanded to include publically funded community palliative care services.

"With the Andrews Government committed to introducing its Voluntary Assisted Dying (VAD) Bill in Parliament this year, it is timely that palliative care services in regional and rural Victoria will see some much-needed additional funding," said CHA's CEO, Suzanne Greenwood.

"Whilst promising that the Andrews Government has gone some way to acknowledging how under-resourced Victoria's palliative care sector is, it's CHA's concern that it is far too little to ensure every Victorian in need will have practicable access to high-quality palliative care, this year or the next."

In its [submission](#) to the Ministerial Advisory Panel overseeing the development of the government's Voluntary Assisted Dying Bill, CHA voiced its concern that some Victorians living with advanced terminal disease living outside of metropolitan Melbourne still do not have localised access to high-quality palliative care.

"No Victorian should be considered eligible for assisted suicide when the policies and resources necessary to ensure all Victorians have access to alternatives such as affordable, high-quality and multi-disciplinary palliative care are currently inadequate," said Greenwood.

"It is also CHA's concern that assisted suicide would be made more readily available and accessible to individuals already rendered vulnerable by advanced disease who would have no feasible alternative when in need of end-of-life care," warned Greenwood.

CHA has urged the Andrews Government to [release its financial modelling](#) to demonstrate how the government will resource both end-of-life care and education to ensure all Victorians have equitable access to options other than voluntary assisted suicide if the legislation passes Parliament this year.

"Further end-of-life care investment is welcome, but there remains so few adequately resourced palliative care services available to those who live outside of metropolitan Melbourne."

"Victorians need to know how the government will ensure every Victorian resident, regardless of their means or location, will have equitable access to other end-of-life care services should their government push ahead in its efforts to legalise assisted suicide," said Greenwood.