

7 Witchwood Close
South Yarra. 3141

20th August 2002

The Secretary of the Parliamentary Inquiry into the long term strategies to address the ageing of Australian population over next the 40 years
Parliament House
Canberra. 2600

Dear Secretary,

I wish to make a submission to your committee concerning the area of aged care and health. I would be happy to make further testimony in person.

My background:

Current appointments:

Senior Research Fellow Melbourne University, Department of Psychiatry
Community Visitor, Office of the Public Advocate (Mental Health Act)

Personal:

Approaching 80 years of age which concentrates my mind marvellously about my coming death.

Concerns:

The use and implementation of the Medical Treatment Act 1988. Vic

The Rights of patients or their legally appointed agent to require doctors to cease treatment or interventions which the patient considers no longer appropriate or beneficial to them.

I have recently become aware of what appears to be a disregard for and poor staff training in some hospitals regarding the rights of patients, either directly or through their legally nominated agent, to refuse treatment. Please refer to the article by Julie-Anne Davies which is attached together with two others.

The issue of the rights of aged patients to refuse treatment will become more important as an ageing population considers its future 'style of dying'. Many may not wish to spend years in a nursing home, doubly incontinent, totally dependent on others for their feeding and toileting, with no physical or mental capacity.

Barbara Carter 'When ignorance is unhealthy bliss', The Age (2) notes that there is a reluctance on the part of hospital administrations to complete a Refusal of Treatment Certificate.

She suggests this maybe a reluctance to move the situation from the realm of medicine to the realm of law.

My knowledge suggests that hospitals have done very little to educate their staff and consultants in their responsibilities under the act. When confronted by a request, as in the case quoted of the 94-year-woman at the Box Hill Hospital, Melbourne they seem to have been flummoxed and retreated into delaying tactics which resulted in the miserable position of this old woman. A situation which she mistakenly thought she had covered by appointing her agent with clear instructions.

It is obvious that the relevant hospital authorities which are responsible for certain requirements under an act should have in place procedures which

1. Serve legitimate and clearly stated wishes of a patient or their agent.
2. Provide guide-lines for their staff for the implementation of the wishes which are provided for by an Act of Parliament.
3. Provide staff training and counselling in such matters.
4. Provide advice to patients of their rights.
5. Keep records so assessments can be made of the working of such acts of parliament.

It may not be appropriate for your committee to investigate the workings of the Victorian Act, except, of course in the way of a general inquiry into the whole subject.

I would request that you inquire and take evidence about the end-of-life wishes of our ageing population(of which I am one) and how these wishes can be guaranteed in law and in practice. I would anticipate recommendations to State Health Ministers to consider your findings.

Yours sincerely,

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