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The Secretary, Legal & Social Issues Committee Parliament house, Spring street,



Dear Madam,

This submission is a request to the Committee to examine how the medical profession can assist patients & their loved ones to manage the end of life care of the terminally ill .

I believe legislative change is necessary to give Doctors legal protection in the case of terminally patients at the end stage of life as well as easing end of life for the patient.

.I believe change is necessary due to my unenviable position when my father William Lucas was dying in November 1999. He was 94 years old with multiple medical conditions such as prostate cancer & heart failure, he was deaf & legally blind.

Dad was very restless & in great discomfort & when seen by the nursing homes Doctor was ordered panadol which had little effect. As Dad's advocate & a former nurse I asked his Doctor for a stronger medication such as a low dose of morphine to ease his condition. The Doctor"s response was "We wouldn't want the Coroner involved in your father's death". I was appalled by his attitude & stated that I was insisting that more palliation should be given as I was certain this was the humane thing to do & I insisted that I would not leave his bedside until such a arrangements could be made.

After the Doctor had gone I was advised by the staff that the Doctor had reluctantly agreed to ordering a low dose of morphine. I remained at the bedside & was relieved when the dose was finally administered & although it had been ordered to be given "as necessary" after sitting there for the rest of the day the palliation then became "4 hourly." I was immensely relieved at the change in my Father's condition, he was able to relax & state that he was very comfortable.

My Father died peacefully few days later on November 27th. In retrospect I understand that the Doctor felt legally constrained when asked to ease my father's condition, however the threat of the Coroner being involved I felt was an extreme overreaction.

After Dad died I decided to join The Euthenasia Society which later changed the name to Dying with Dignity as I felt so strongly that change could only come through a change in the law. Many people do not have an advocate to speak out for them in their last phase of a terminal illness. I am 85 & my husband is 87 & hope that we have better end of life experiences without the need of an advocate.

June Roberts (Mrs)