



VADANZ statement on Victorian Government's reforms to the Voluntary Assisted Dying Act (2017)

5 November, 2025

Voluntary Assisted Dying Australia & New Zealand (VADANZ) welcomes the Victorian Government's Bill proposing 13 amendments to the *Voluntary Assisted Dying Act 2017*.

The Bill emerged from the five-year review of the *Act*, which confirmed that while the Victorian VAD framework has operated safely, administrative complexity and restrictive provisions have impeded timely access and patient-centred care.

VADANZ President, Dr Andrea Bendrups, applauded the proposed changes.

"These changes mark the ongoing evolution of the Victorian VAD model from its cautious beginnings to a more balanced, humane and accessible system.

"The reforms are sensible, considered, and reflect the collective experience of VADANZ's Victorian members working in VAD.

"They also reflect a deeper national perspective – what is working well in other jurisdictions and what delivers the best quality VAD care.

"VADANZ congratulates the Victorian Government for listening to both feedback and evidence gathered from experience in other states and for taking the steps to create a more person-centred, compassionate, and practical VAD system."

Dr Bendrups said VADANZ was particularly pleased to see key reforms, including:

- 1. Removal of the so-called 'gag clause'**

Under the current law, medical practitioners are prohibited from initiating discussion about VAD unless the patient first raises it. Removing this restriction will enable clinicians to have open, compassionate conversations about all end-of-life options. It ensures patients are fully informed and able to make decisions that align with their values and circumstances.

- 2. Extension of the prognosis eligibility criterion to 12 months**

The extension of the eligibility timeframe from six to twelve months (for all conditions, not just neurodegenerative diseases) means more people living with a grievous and incurable illness can consider VAD earlier, plan ahead, and experience greater certainty during a difficult time.

- 3. Simplification of the VAD permit system**

Streamlining administrative processes, such as simplifying assessments and reducing delays, will help people and families navigate the system with less stress and confusion.

4. **Creation of a new *Administering Practitioner* role**

VADANZ particularly welcomes the establishment of this new category of practitioner, which will broaden the pool of trained professionals who can participate in the delivery of VAD. This reform will help to distribute workload more evenly across practitioners, reducing pressure on the Coordinating Practitioner and making the system more sustainable and accessible, especially in regional and rural areas where practitioner capacity can be limited.

Dr Bendrups said the changes would make for a stronger and more compassionate system for all involved.

“For individuals nearing the end of life, the reforms will mean earlier conversations, better information, and a smoother path to accessing care.

“For families, they bring reassurance that the law now aligns more closely with clinical reality and compassion.

“For health practitioners, they create a clearer, fairer framework – reducing bottlenecks, improving workforce sustainability, and ensuring that VAD can be safely and equitably offered across the state.”

Looking ahead

VADANZ will continue to encourage the Victorian Government and all stakeholders to progress best practice in end-of-life care by:

- Strengthening navigation and counselling supports that are culturally safe and inclusive.
- Monitoring the impact of these reforms to maintain both access and safeguards.
- Supporting education and workforce development to ensure sufficient trained practitioners.
- Continuing to integrate VAD within the broader spectrum of palliative and end-of-life care.
- Advocating for reform of the Commonwealth Criminal Code to allow the use of Telehealth in VAD assessments
- Sharing lessons nationally and across the Tasman to foster consistent, compassionate practice.