I am asking that consideration be given to a review of current legislation pertaining to home deaths in the case of a planned home death by a terminally ill patient to prevent or negate the unnecessary involvement of police.

I would like the Committee to undertake a review of the requirements for the issue of a Death Certificate for those patients who are terminally ill and under care of a Palliative Care Service who have elected to spend their remaining days in the familiar surroundings of their own home and to die at home

An increasing number of terminally ill patients, with the support of family and friends and health care providers, are choosing this option.

Unfortunately, in the rural setting an inability to secure the services of the attending GP after hours has made what should be a dignified experience into an unduly distressing experience for family and friends.

My understanding of current requirements is that the Funeral Director is not able to take the deceased person until a Death Certificate is completed. As an expected home death has a high chance of occurring out of normal GP hours, considerable delays in obtaining the Certificate are often experienced and this seems to be when the police become involved.

In my brief career as a Palliative Care Nurse in rural NSW, I am aware of a number of instances where the unavailability of the attending GP, for a variety of reasons, has resulted in either the ambulance officer or Funeral Director contacting the police to attend the home.

In one case of an expected home death, a daughter reported police baring her from her mother's room whilst they took photos and removed medication.

In another case of expected home death, a wife reports police barring a grieving daughter from saying goodbye to her father – she was barred from his room.

Whilst the police are carrying out their duty as sensitively as possible, the fact that they are required to attend and follow a set protocol for report of a deceased person there is little they can do to ease the impact of their presence on family. The sad thing is that this will be the overriding memory for family members and friends. The final indignity for themselves and for the person they had willing cared for at home.

The additional workload for police officers and the costs involved could also be negated by changes to these procedures

Perhaps the GP could sign a form of intent as the patient became terminal and with having an Advanced Care Directive – stating allow natural cause of death to occur at home if able so that ambulance could be contacted (as a 24 hour service) when family were ready for the deceased to leave the home, to pronounce Life Extinct and remove the deceased person to

the hospital holding facility or to enable the Funeral Director to remove the deceased person to their holding facility. The attending GP could then attend to the death certificate within a 24 or 48 hour period of if the attending GP was not available, patient notes could be reviewed and death certificate completed by 'on-call' GP for that practice or hospital. Perhaps it would be appropriate for Palliative Care nurse or a GP to inform the local ambulance service and police service that there is a person with a terminal disease who wishes a home death and that that is an expected event in the near future.

I am aware that this is perhaps a very simplistic view, but surely there has to be a way to allow common sense to prevail in such situations.