

FAX NO

Annette M Williams

19th October 2017

The Principal Research Officer
 Joint Select Committee on End of Life Choices
 Legislative Assembly of Western Australia
 4 Harvest Terrace
 WEST PERTH WA 6004



Dear Sir/Madam

I am a trained Nurse and Midwife UK (1954 and 1960) Fremantle general training. UK for midwifery Part 1 and 2; (now retired)

I support voluntary assisted dying in Western Australia. In my nursing experience while palliative care is necessary for some patients there are some patients because of their condition their pain is not relieved by the usual 3-4 hourly administration of drugs they need stronger pain relief and more often. No patient should have to suffer unbearable pain because the 3-4 hours are not up or they require stronger medications.

Many years ago I was working in a Premature baby unit in a big hospital outside London in the 1960s. In a nearby baby ward a baby was screaming it went on for some hours I went over to the ward to find out why the baby was screaming. I was told they did not know what was wrong with the baby it was a few weeks old I saw the baby and it was obvious that the baby was in a great deal of pain.

I returned to my ward of premature babies. The screams from the baby could still be heard. It was about 2am, although the ward was out of my jurisdiction I spoke to the head nurse who told me that the baby had been seen by a doctor but did not know what was wrong. I then suggested that the baby should be transferred to Great Ormond Street Childrens Hospital for treatment and a diagnosis. The head nurse called the doctor who said it was not the hospitals policy to transfer patients (baby still screaming) that they were quite capable. I argued that the child was obviously in great pain and something must be done and a transfer to the childrens hospital should be considered immediately. Something was done I was fired. I learnt later that the baby died that day still in the same hospital.

Many years ago I was working in a Premature baby unit in a big hospital outside London in the 1960s. In a nearby baby ward a baby was screaming it went on for some hours I went over to the ward to find out why the baby was screaming. I was told they did not know what was wrong with the baby it was a few weeks old I saw the baby and it was obvious that the baby was in a great deal of pain.

abies. The screams from the baby could still be heard. It was about 2am, although the ward was out of my jurisdiction I spoke to the head nurse who told me that the baby had been seen by a doctor but did not know what was wrong. I then suggested that the baby should be transferred to Great Ormond Street Childrens Hospital for treatment and a diagnosis. The head nurse called the doctor who said it was not the hospitals policy to transfer patients (baby still screaming) that they were quite capable. I argued that the child was obviously in great pain and something must