

# Proposed Assisted Dying for Terminally Ill Adults (Scotland) Bill

## Introduction

A proposal for a Bill to enable competent adults who are terminally ill to be provided at their request with assistance to end their life.

The consultation runs from 23 September 2021 to 22 December 2021.

All those wishing to respond to the consultation are strongly encouraged to enter their responses electronically through this survey. This makes collation of responses much simpler and quicker. However, the option also exists of sending in a separate response (in hard copy or by other electronic means such as e-mail), and details of how to do so are included in the member's consultation document.

Questions marked with an asterisk (\*) require an answer.

All responses must include a name and contact details. Names will only be published if you give us permission, and contact details are never published – but we may use them to contact you if there is a query about your response. If you do not include a name and/or contact details, we may have to disregard your response.

Please note that you must complete the survey in order for your response to be accepted. If you don't wish to complete the survey in a single session, you can choose "Save and Continue later" at any point. Whilst you have the option to skip particular questions, you must continue to the end of the survey and press "Submit" to have your response fully recorded.

Please ensure you have read the consultation document before responding to any of the questions that follow. In particular, you should read the information contained in the document about how your response will be handled. The consultation document is available here:

[Consultation Document](#)

[Privacy Notice](#)

I confirm that I have read and understood the Privacy Notice attached to this consultation which explains how my personal data will be used.

On the previous page we asked you if you are UNDER 12 YEARS old, and you responded Yes to this question.

If this is the case, we will have to contact your parent or guardian for consent.

If you are under 12 years of age, please put your contact details into the textbox. This can be your email address or phone number. We will then contact you and your parents to receive consent.

Otherwise please confirm that you are or are not under 12 years old.

*No Response*

## About you

Please choose whether you are responding as an individual or on behalf of an organisation.  
Note: If you choose "individual" and consent to have the response published, it will appear under your own name. If you choose "on behalf of an organisation" and consent to have the response published, it will be published under the organisation's name.

on behalf of an organisation

Which of the following best describes you? (If you are a professional or academic, but not in a subject relevant to the consultation, please choose "Member of the public".)

*No Response*

Please select the category which best describes your organisation

Representative organisation (trade union, professional association)

Please choose one of the following:

I am content for this response to be published and attributed to me or my organisation

Please provide your Full Name or the name of your organisation. (Note: the name will not be published if you have asked for the response to be anonymous or "not for publication". Otherwise this is the name that will be published with your response).

The Company Chemists' Association

Please provide details of a way in which we can contact you if there are queries regarding your response. Email is preferred but you can also provide a postal address or phone number.

We will not publish these details.

## **Aim and Approach - Note: All answers to the questions in this section may be published (unless your response is "not for publication").**

Q1. Which of the following best expresses your view of the proposed Bill?

Partially supportive

### **Please explain the reasons for your response.**

We have several areas of concern.

Moral and Ethical Concerns: We are worried that a pharmacist may feel coerced into participating in the scheme. The Conscientious Objection (CO) Clause in the bill, is welcome although this must be aligned to the regulator's (General Pharmaceutical Council) standards on ethical, personal and faith beliefs.

Workforce/Continuity of Care Concerns: The current workforce crisis across healthcare, and in community

Q1. Which of the following best expresses your view of the proposed Bill?

pharmacy, may result in a lack of continuity of pharmacist results in a lack of knowledge of the patient and or their treatment plan.

Legislative Concerns: There is a legal duty on pharmacists to provide medication prescribed on an NHS prescription with 'reasonable promptness'. The Conscientious Objection clause could conflict with this legal position.

Q2. Do you think legislation is required, or are there other ways in which the Bill's aims could be achieved more effectively? Please explain the reasons for your response.

It is our view that legislation is the only correct approach.

Q3. Which of the following best expresses your view of the proposed process for assisted dying as set out at section 3.1 in the consultation document (Step 1 - Declaration, Step 2 - Reflection period, Step 3 - Prescribing/delivering)?

Partially supportive

**Please explain the reasons for your response, including if you think there should be any additional measures, or if any of the existing proposed measures should be removed. In particular, we are keen to hear views on Step 2 - Reflection period, and the length of time that is most appropriate.**

We support the proposal of a reflection period of 14 day, or shorter if required. Only once this period is complete should a pharmacist be engaged, and the next steps start to put the necessary arrangements in place. We would like to see a clearly defined list of healthcare professionals who can legally collect the medicines for patients. There should also be a robust process and audit put in place to ensure sufficient rigor and governance of the hand-over procedure. Consideration must also be given to a returns process for medication not used.

Q4. Which of the following best expresses your views of the safeguards proposed in section 1.1 of the consultation document?

Unsure

**Please explain the reasons for your response.**

More detail is required on the role the pharmacist plays in the supply of medicines needed. Currently a pharmacist carries a 50:50 share of the responsibility, and liability, for the appropriateness and safety of medicines supplied, along with the prescriber. The pharmacist will need to be made fully aware of all relevant facts surrounding each individual case if they are to sanction the supply.

Data would need to be captured on whether the medicines have been taken. It is likely that both the prescriber and supplier would want/need to be satisfied that the medicines had been taken correctly or returned. It would not be sufficient simply to have a returns process for accepting unused medicines, reliant upon the patient arranging for return.

Q5. Which of the following best expresses your view of a body being responsible for reporting and collecting data?

Fully supportive

**Please explain the reasons for your response, including whether you think this should be a new or existing body (and if so, which body) and what data you think should be collected.**

Q5. Which of the following best expresses your view of a body being responsible for reporting and collecting data?

We would like to see the creation of a new body, constituted from all parties involved in the process, including representatives of the healthcare professionals, the patient, their family/carers along with representatives from NHS Scotland and the Scottish Judiciary.  
We recognise that there will need to be a robust capture of data for each case, but it is important that the patient is made fully aware of how their information will be used.  
Data would need to be captured on whether the medicines have been taken. Data would need to be captured on whether the medicines have been taken. It is likely that both the prescriber and supplier would want/need to be satisfied that the medicines had been taken correctly or returned. It would not be sufficient simply to have a returns process for accepting unused medicines, reliant upon the patient arranging for return.

Q6. Please provide comment on how a conscientious objection (or other avenue to ensure voluntary participation by healthcare professionals) might best be facilitated.

The regulatory bodies of all healthcare professionals must be involved in the development of this legislation to ensure there are no unintended consequences of involvement, or abstention. Our own regulator (GPhC) is clear that no pharmacist must impose their own beliefs onto others.  
We do recognise however that the requests to supply medicines in assisted dying cases will not be 'walk in' situations and therefore it is probable that a list\* of pharmacists and pharmacies that can and will make the supply can be maintained. An 'opt-in' model, rather than an 'opt-out' model should reduce the risk of delay or refusal of supply due to beliefs. We recognise that individual pharmacists may have differing levels of comfort with the separate tasks of supply and delivery/observation, and this will need to be considered when designing the conscientious objection clause.  
\*There is a risk that if any list was made public individual practitioners could be targeted by campaigners, and this will need to be taken into consideration as any process is designed.

## Financial Implications

Q7. Taking into account all those likely to be affected (including public sector bodies, businesses and individuals etc), is the proposed Bill likely to lead to:

some increase in costs

**Please indicate where you would expect the impact identified to fall (including public sector bodies, businesses and individuals etc). You may also wish to suggest ways in which the aims of the Bill could be delivered more cost-effectively.**

Until a process is mapped out and agreed it is very difficult to establish exact costs. It is likely that to provide such service would require enhanced professional indemnity insurance for healthcare professionals.

Other additional costs would result from the development of a new service and the training requirements needed for the pharmacist and pharmacy team. Alongside this, there would need to be resources available to inform patients on how this could work for them. Given the likely infrequent nature of this type of supply there will be considerable ongoing training costs incurred in order to keep healthcare professionals current, confident and capable.

Costs would be needed to be considered for data collection, the delivery of the service and the support of other governing bodies to embed the legislation changes.

## Equalities

Q8. What overall impact is the proposed Bill likely to have on equality, taking account of the following protected characteristics (under the Equality Act 2010): age, disability, gender re-assignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex, sexual orientation?

Neutral (neither positive nor negative)

**Please explain the reasons for your response. Where any negative impacts are identified, you may also wish to suggest ways in which these could be minimised or avoided.**

Age. There is no negative impact based on age. The bill is proposed to cover all citizens aged 16 and over.

Disability. No negative impact. An individual must have a terminal illness. Disability is not a qualifying criterion.

Gender Re-Assignment. Nothing to add.

Race. Nothing to add

Others. Nothing to add.

Sustainability. Nothing to add.

## Sustainability

Q9. In terms of assessing the proposed Bill's potential impact on sustainable development, you may wish to consider how it relates to the following principles:

- living within environmental limits
- ensuring a strong, healthy and just society
- achieving a sustainable economy
- promoting effective, participative systems of governance
- ensuring policy is developed on the basis of strong scientific evidence.

With these principles in mind, do you consider that the Bill can be delivered sustainably?

Unsure

## General

Q10. Do you have any other additional comments or suggestions on the proposed Bill (which have not already been covered in any of your responses to earlier questions)?

No.