

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)

Optional: You may wish to explain briefly what the organisation does, its experience and expertise in the subject-matter of the consultation, and how the view expressed in the response was arrived at (e.g. whether it is the view of particular office-holders or has been approved by the membership as a whole).

I am the California state Chair for the American Association of medical ethics. This is a national group of physicians who are concerned about issues such as respect for life. There are both Christians and non-Christians in this group

Please choose one of the following:

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

If you have requested anonymity or asked for your response not to be published, please give a reason (Note: your reason will not be published):

We hope to actively engage with our medical colleagues and other health professionals as openly and transparently as possible

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).

California State branch of American Association of Medical Ethics

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?

Fully opposed

Please explain the reasons for your response.

Physicians in California have actively opposed physician assisted dying for many years. Unfortunately a few years ago our state medical Association went neutral on this issue, resulting in legalization of PAD several years ago in California. Unfortunately this legislation was written so as to obscure what is really happening to these patients. We have struggled to get information to make sure that abuses are not occurring. We naturally are concerned that frail patients may be pressured by family or others to "stop being a burden" In our context, the possibility exists for discrimination against the poor or marginalized communities, which also cannot be answered with the available data. Generally our physicians prefer that patients have wide access to palliative care and hospice, to keep them comfortable and to reduce burdens on the family. Adequate pain treatment and emotional support can go far to make suicide or euthanasia unnecessary

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.

Largely given in the last answer. Adequate support for the terminally ill and their families should not need to include assisted dying

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)?

Fully opposed

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.

A meaningful reflection of a week or two minimum would be appropriate, engaging not only the patient but also their family and others affected by their decision

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

Fully opposed

Please explain the reasons for your response.

Our experience in California is that once approved, the safeguards are then eroded over time. This recently occurred with a bill entitled SB 380 which attempted to remove most safeguards including the waiting period. In the legislature some safeguards were restored, but this bill as passed still represents an erosion of safeguards despite objections by physicians and others

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

Fully opposed

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.

Very complete and transparent data must be collected to assure that there is no abuse of patient by healthcare providers, by families, by nursing facility managers, by insurers. Will need to ensure a completely independent body with full investigative powers to assure that abuses do not occur

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

It is critical that doctors or other healthcare providers (with ethical objections) not be forced into compliance with assisted death. There have been erosions of this right of the practitioner in California and litigation is needed to reverse this erosion

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:

don't know

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.

There may be some reduced expenditures for healthcare by the state or other insurers, but the impact is speculative. We have not seen significant costs or savings in California, but again much of the data is hidden

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?

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.

One expect that the frail the elderly and people without strong advocacy will be encouraged or pushed into assisted death. The experience in the Netherlands is very clear in this regard. Once assisted suicide became legal, physicians have increasingly given fatal dosage to patients who are unable to consent or understand what is being done to them . This includes patients with dementia, young children with developmental delay, patients of all ages in coma, etc. So far the information in California and other American states has been suppressed

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?

No

Please explain the reasons for your response.

Hey society will be judged by how it cures for the least of its members. This includes the frail and the weak. This results in the failure of sustainability in multiple dimensions

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)?

The best respect for life comes from excellent care kindness and alleviation of suffering. Assisted death only erodes our society's respect for life