

Assisted Suicide (Scotland) Bill

Humanist Society Scotland

Humanist Society Scotland welcomes the opportunity to respond to the Health and Sport Committee's call for written evidence on the Assisted Suicide (Scotland) Bill.

1. Do you agree with the general purpose of the Bill to make it permissible, in the circumstances provided for, to assist another to commit suicide?

Yes.

Committing suicide in Scotland, or attempting to do so, is not a crime. It is a human right. The Bill guarantees that right for those who qualify under its terms but who, on account of illness and suffering, may require assistance. This is the essential ethical argument for the Bill.

2. Do you have any views on how the provisions in this Bill compare with those from the previous End of Life Assistance (Scotland) Bill?

The measures to enhance the protection of the vulnerable are welcome, as is the clarification that euthanasia will remain a crime. The new role of licensed facilitator is an improvement, in that it provides comfort and reassurance.

3. The Bill precludes any criminal and civil liability for those providing assistance, providing the processes and requirements set out in the Bill have been adhered to.

Do you wish to make any comment on this?

These are vital components of the Bill, which are necessary to allow it to operate properly. Removing the risk of prosecution from those who provide assistance is a welcome development. The Bill clearly defines the assistance to be provided, and the people authorised to provide it.

4. The Bill outlines a three stage declaration and request process that would be required to be followed by an individual seeking assisted suicide. Do you have any comment on the process being proposed?

The fact that an individual would need to "opt in" to the process should reassure those who would never seek assisted suicide, no matter the circumstances. The mechanism for allowing assistance to be provided; the "cooling off" periods, plus the opportunity for an individual to halt the process at any time, should comfort those who wish to remain in control of what they are experiencing near the end of their lives, whether or not they ultimately avail themselves of such assistance.

5. Do you have any comment on the provisions requiring that the person seeking assisted suicide must have a terminal or life-shortening illness, or a progressive condition which is either terminal or life-shortening?

These terms, which may have arisen from disagreements amongst doctors advising those who were drafting the Bill, are confusing. While the aim in the Memorandum "...to capture those diagnoses which involve an on-going deterioration in the person's ability to live a normal life..." is laudable, this section of the Bill should be reworded.

6. Are you satisfied with the eligibility requirements as regards age, capacity, and connection with Scotland as set out in the Bill?

Yes.

The Explanatory Notes make clear that it is open to a doctor, dealing with a first or second request for assistance, to seek any specialist input necessary to form an assessment of an individual's mental capacity.

7. Do you have any comment on the roles of medical practitioners and pharmacists as provided for in the Bill?

During the preliminary consultation stage in 2012, the Royal College of General Practitioners in Scotland concluded that it would be inappropriate to take a stance either for or against the Bill. This position was adopted after a national survey of its members showed a wide range of views. This is likely to mean that some doctors would co-operate with the process and others would not be willing to do so. The Royal Pharmaceutical Society in Scotland and Community Pharmacy Scotland take a similar view.

The Policy Memorandum states that the General Medical Council and the Royal Pharmaceutical Society will require to alter their guidance to members, should the Bill pass into law. These will probably make it clear that doctors who are unwilling to engage with the requirements of the Bill will not be compelled to do so, but must refer an individual seeking assistance to another medical practitioner, who is likely to cooperate with such a request.

8. Do you have any comment on the means by which a person would be permitted to end his/her life under the Bill?

Based on the evidence from elsewhere, swallowing a liquid preparation of a barbiturate would appear to be the most appropriate means to be used, although the Bill does not exclude other methods. Those may be required in highly unusual circumstances where, for example, an individual with an obstruction in their gullet is unable to swallow, but is able to inject a barbiturate by themselves into a intravenous drip or PEG tube directly into their stomach.

9. Do you have any comment on the role of licensed facilitators a provided for in the Bill?

This is a welcome measure. It provides an additional protection for the vulnerable. It may be worthwhile enhancing the role of the facilitator beyond what the Bill proposes. For example, they could be given authority to check that all the necessary steps had been correctly followed and that appropriate records were kept and centrally recorded.

Provision for those could come under Section 23 (1) of the Bill, where Scottish Ministers may issue directions about how licensed facilitators are to act.

It would be important to keep and publish a statistical account of the process. That could include a record of the numbers of individuals obtaining a prescription; the numbers who ultimately consumed the drug; the underlying diagnoses; their ages and gender. Licensed facilitators could be responsible for gathering this data and the licensing body could collate the information and publish it as an annual report.

10. Do you have any comment on the role of the police as provided for in the Bill?

No.

11. Do you have any comment to make about the Bill not already covered in your answers to the questions above?

The Bill answers a need in Scotland that is not currently being met. A small, but significant, number of individuals look to it as a means of offering them relief from intolerable suffering. It is regrettable that, at present, those who might wish to obtain the assistance the Bill would authorise are required to either travel to Switzerland or make attempts on their own lives in an uncertain and possibly violent manner.

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