

## **Assisted Suicide (Scotland) Bill**

### **Stirling Council**

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?

We consider that if such a Bill were enacted there should be additional safeguards, particularly for people who are not immediately at end of life.

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?

No views.

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?

No comment

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?

There should be an assessment stage and a decision making process which involves independent scrutiny. This stage should involve professionals who are able to provide information to the adult on how care and/or treatment services could improve quality of life and assess whether the person is able to weigh up these options and make an informed decision.

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?

Assistance with suicide would potentially be open to people who have recently received a diagnosis or prognosis. People who are upset, in shock and have not yet been given and allowed to digest information around their condition are not in the best position to make a decision but might opt for assisted suicide as a "knee jerk reaction". Therefore the Bill should be amended to require provision of information around care and treatment. Particularly for people who are not immediately at end of life there should be a longer "cooling off" period.

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

An adult may have capacity but may be under pressure or open to suggestibility to apply for assistance to end their life. They may also have internal pressures such as worry of being an emotional or financial burden on their family.

An assessment of their social circumstances and life history would contextualise their decision and help to protect the person from undue influence.

Before an application can be processed it should be a requirement that all adults have the information about possible treatments and end of life care available to them which may potentially make life more tolerable. This should involve the person's multi-agency network.

The age of 16 is considered to be too young to make such a decision and would suggest the age limit to be at least 18, possibly 25. This would be consistent with recent children's legislation and sexual offences legislation that recognises that vulnerability can extend beyond the age of 16. It also seems anomalous that a young person at 16 does not have full voting rights, cannot make a will, buy alcohol or smoke but can decide to die. It is questionable that a 16 year old has the maturity to weigh up the alternative options.

A two week "cooling off" period appears short and it is suggested that the process is prolonged to allow for assessment and provision of information. This is particularly relevant to people who are not at end of life.

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

There is concern that the only assessors for assisted suicide are medical professionals. Free choice does not just include the absence of mental disorder or that they had the capacity to make, understand, communicate and remember their decision. Free choice also involves having sufficient information, ability to weigh up the options and an absence of undue internal or external pressure. The interpretation of free choice is also heavily predicated on an individual's social and cultural family context. The person's multi-agency network should be involved in the assessment as to whether a person is making a free and informed decision as they may have greater understanding of the context of that decision.

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

No comment

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

No comment

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

No comment

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

Legislation which gives power to decide and/or act on behalf of another person (i.e. mental health legislation) has built in safeguards which includes an independent scrutiny and decision making process even where those actions have a temporary effect. Although the Assisted Suicide Bill does not make provision for acting on behalf of another person and is therefore not directly comparable, the provision of assistance and irrevocability of suicide would make it essential to ensure that appropriate safeguards are in place.

The Adult Support and Protection Scotland Act 2007 makes it a requirement that anyone who is an officer of an agency named in the Act who knows or believes that an adult is at risk of harm must report those circumstances to the council. Adults who apply for assisted dying could meet the three point criteria set out in the 2007 Act. The council would then have a duty to inquire. The Assisted Suicide Bill needs to make clear and unambiguous links to adult support and protection legislation to avoid legislative confusion or conflict.

Whatever additional safeguards that are put in place it should be a clause in the Act that anyone with a conscientious objection to assisted suicide is absolved from being involved with any of the processes that take place around assisted dying.

**Stirling Council**