

Terminally Ill Adults (End of Life) Bill

RUNNING LIST OF ALL AMENDMENTS IN COMMITTEE OF THE WHOLE HOUSE

*Tabled up to and including
11 November 2025*

[Amendments marked ★ are new or have been altered]

Clause 1

BARONESS COFFEY

Clause 1, page 1, line 3, leave out “or Wales”

BARONESS FINLAY OF LLANDAFF

Clause 1, page 1, line 4, leave out “capacity” and insert “ability”

Member's explanatory statement

This links to the change to clause 3.

BARONESS FINLAY OF LLANDAFF

Clause 1, page 1, line 4, leave out “a” and insert “an independent”

Member's explanatory statement

The person's decision must be taken devoid of encouragement to end their life from any other person and is compatible with the current Director of Public prosecution guidelines on prosecution for assisting suicide.

BARONESS BERGER
BARONESS HOLLINS

Clause 1, page 1, line 6, leave out “18” and insert “25”

BARONESS LAWLOR

- ★ Clause 1, page 1, line 6, leave out “18” and insert “21”

Member's explanatory statement

The decision to end one's own life is a decision of great importance, and it should not be taken by someone who has not already had some experience of adult life.

LORD FALCONER OF THOROTON

Clause 1, page 1, line 6, after “person” insert “has a preliminary discussion with a registered medical practitioner (see section 5) and”

Member's explanatory statement

This is a drafting change.

BARONESS COFFEY

As an amendment to the above amendment in the name of Lord Falconer of Thoroton to Clause 1, page 1, line 6.

- ★ Leave out first “a” and insert “their first”

BARONESS GOUDIE

- ★ Clause 1, page 1, line 6, after “person” insert “has a preliminary discussion (see section 5 and 6) or”

LORD MOYLAN
LORD GOODMAN OF WYCOMBE

Clause 1, page 1, line 6, leave out “makes a first declaration (see section 8)” and insert “has the relevant preliminary discussion (see section 5)”

Member's explanatory statement

This brings Clause 1 into line with the declaration required by Clause 8(4)(b)(ii).

BARONESS FINLAY OF LLANDAFF

Clause 1, page 1, line 8, leave out “ordinarily “ and insert “permanently”

Member's explanatory statement

This is to be explicit that the person must be residing in England or Wales.

BARONESS COFFEY

Clause 1, page 1, line 8, leave out “and Wales”

LORD MOYLAN

Clause 1, page 1, line 9, after “declaration,” insert “or is a UK citizen of pensionable age who has moved to live abroad,”

Member's explanatory statement

This is to probe the equity of excluding from the Bill's provisions persons who have retired abroad but wish to return to England or Wales.

BARONESS COFFEY

Clause 1, page 1, line 9, at end insert “has not left the UK in that twelve months,”

Member's explanatory statement

Going beyond ordinarily resident status, this restricts to people living in the UK for the whole previous year.

BARONESS FINLAY OF LLANDAFF
BARONESS BUTLER-SLOSS
BARONESS O'LOAN

Clause 1, page 1, line 10, at end insert —

“(ca) has not, for at least 12 months ending with the date of the first declaration, been deprived of their liberty under section 4A (restriction on deprivation of liberty) or 4B (deprivation of liberty necessary for life-sustaining treatment etc) of the Mental Capacity Act 2005, and”

Member's explanatory statement

This amendment would ensure that someone who so lacks capacity in one area as to be currently or recently deprived of liberty will not be found to have capacity for the decision to seek assistance to end their own life, which is otherwise a legal possibility under the Mental Capacity Act 2005's approach to capacity.

LORD BEITH

Clause 1, page 1, line 11, after “England” insert “, Scotland”

Member's explanatory statement

This is a probing amendment to establish whether it is intended to exclude from the scope of the Bill residents of border areas of England who are registered with a general medical practice in Scotland.

BARONESS COFFEY

Clause 1, page 1, line 12, leave out “or Wales”

LORD ROOK

Clause 1, page 1, line 12, at end insert “and has been so registered for at least 12 months ending with the date of the first declaration, during which time the person has been seen by a general practitioner at said practice (in appointment, consultation, or home visit) at least twice”

Member's explanatory statement

This provides a simple way to check one of the aspects of ordinary residency required in paragraph (c), and ensures the person in question has been receiving medical care within the jurisdiction prior to making the request.

BARONESS O'LOAN

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Clause 1, page 1, line 12, at end insert “and has an established relationship with a General Practitioner who has good knowledge of their personal circumstances, having attended at least four appointments in the last 12 months with at least one home visit made by the General Practitioner who must confirm that they have a good understanding of the individual's personal circumstances,”

BARONESS GREY-THOMPSON
BARONESS O'LOAN
BARONESS BUTLER-SLOSS
THE LORD BISHOP OF GLOUCESTER

Clause 1, page 1, line 12, at end insert —

- “(e) is not a serving prisoner, and
- (f) is not detained by a hospital order,”

LORD FROST
LORD GOODMAN OF WYCOMBE

Clause 1, page 1, line 12, at end insert —

- “(e) at the date of the first declaration, is either —
- (i) a British citizen, or
- (ii) holds indefinite leave to remain,”

Member's explanatory statement

This amendment restricts access to assisted dying support to British citizens or those with indefinite leave to remain to prevent individuals obtaining short-term visas for the purpose of obtaining an assisted death. This amendment is based on section 9(1)(b)(i) of the State of Victoria's Voluntary Assisted Dying Act 2017.

BARONESS GREY-THOMPSON
BARONESS O'LOAN

Clause 1, page 1, line 12, at end insert –

“(e) is not pregnant,”

LORD CARLILE OF BERRIEW
BARONESS HOLLINS

Clause 1, page 1, line 12, at end insert –

“(e) has had their application for assistance under section (*Application for assistance with suicide order*) approved by the Court,”

BARONESS FINLAY OF LLANDAFF
BARONESS O'LOAN

Clause 1, page 1, line 12, at end insert –

“(e) has had their needs fully assessed and appropriate care provided by a multiprofessional specialist palliative care team,”

Member's explanatory statement

The amendment ensures that all terminally ill persons seeking to take up assisted dying support have had their needs assessed and met by a mutiprofessional specialist palliative care team.

BARONESS FINLAY OF LLANDAFF

Clause 1, page 1, line 12, at end insert –

“(e) made independent contact with their local voluntary assisted death service for information,”

Member's explanatory statement

An independent voluntary assisted death service ensures that the person accesses independent information relating to assisted dying support.

BARONESS FINLAY OF LLANDAFF

Clause 1, page 1, line 12, at end insert –

“(e) is eligible for financial support under the special rules criteria (SR1) of the Department for Work and Pensions, and
(f) has received a home visit from their General Practitioner in the six months preceding the request for consideration for an assisted death,”

Member's explanatory statement

The SR1 assessment establishes that the person who is terminally ill may be eligible for fast-track benefits. This amendment is to ensure the person is not pursuing the request because they are in financial difficulty.

BARONESS FINLAY OF LLANDAFF

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Clause 1, page 1, line 12, at end insert –

“(e) has had at least one consultation with their general practitioner who has also undertaken a home visit to the person’s place of residence.”

BARONESS RITCHIE OF DOWNPATRICK
BARONESS O'LOAN
BARONESS FOX OF BUCKLEY

Clause 1, page 1, line 13, after “on” insert “their own”

Member's explanatory statement

This clarifies that lawful assistance to end a person’s life may only be provided if that person has been the one to make the request.

BARONESS FINLAY OF LLANDAFF
BARONESS O'LOAN

Clause 1, page 1, line 13, after “request,” insert “be assessed for eligibility to”

Member's explanatory statement

The process of application does not automatically lead to an assisted death, but triggers a request to be assessed for eligibility for an assisted death.

BARONESS COFFEY

Clause 1, page 1, line 13, leave out “or Wales”

LORD CARLILE OF BERRIEW

Clause 1, page 1, line 14, leave out “sections 8 to 30” and insert “the provisions of this Act”

BARONESS O'LOAN

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Clause 1, page 1, line 14, at end insert –

“(1A) A person shall not be considered eligible for assistance under this Act if they have, at any time, been diagnosed with a mental health condition known to cause

episodic or chronic suicidal ideation, including but not limited to bipolar disorder, borderline personality disorder, major depressive disorder, or schizoaffective disorder.

- (1B) For the avoidance of doubt the existence of a terminal diagnosis shall not override the requirement under subsection (1C).
- (1C) No application for assisted dying shall proceed where the applicant is known to have a current or historical pattern of suicidality or self-harm associated with mental disorder.”

BARONESS LAWLOR

Clause 1, page 1, line 15, leave out from beginning to “that” and insert “Assistance to end a person’s life may not be provided unless it has been established under sections 8 to 30”

Member’s explanatory statement

Consistent with the language in subsection (1), this amendment would ensure that the language in the Bill is operative rather than merely descriptive, providing a further protection against assistance outside the Bill. The change in the wording about establishing facts (from “steps be taken to establish” to “it has been established”) would ensure that (as provided in the sections referenced) the provision of assistance depends on actually establishing the factors.

LORD CARLILE OF BERRIEW
BARONESS HOLLINS

Clause 1, page 1, line 15, leave out “Sections 8 to 30, in particular,” and insert “The provisions of this Act”

BARONESS FINLAY OF LLANDAFF

Clause 1, page 1, line 17, after first “and” insert “fully”

Member’s explanatory statement

This ensures that all aspects are fully explained, in line with good clinical practice.

BARONESS BERGER
LORD CARLILE OF BERRIEW
BARONESS O’LOAN
LORD GOODMAN OF WYCOMBE

Clause 1, page 1, line 17, after “life” insert “because of their terminal illness”

Member’s explanatory statement

This amendment and others in the name of Baroness Berger would mean that someone is only eligible for assistance in ending their own life under this Act if their clear, settled and informed wish to end their life is because of their terminal illness and not for any other reason.

BARONESS FOX OF BUCKLEY
LORD GOODMAN OF WYCOMBE

Clause 1, page 1, line 19, after “coerced” insert “, encouraged”

Member's explanatory statement

This would add a lack of encouragement to the list of requirements for a person to make a decision to request assistance.

BARONESS FINLAY OF LLANDAFF
LORD GOODMAN OF WYCOMBE

Clause 1, page 1, line 19, after “coerced” insert “, influenced, encouraged”

Member's explanatory statement

A person may be subject to undue pressure that is subtle and is not recognised as coercive. This amendment ties to guard against that.

BARONESS COFFEY

Clause 1, page 1, line 19, after “pressured” insert “externally or internally”

Member's explanatory statement

This is an amendment to consider indirect coercion, the feeling of being a burden, which the Royal College of Psychologists also refers to as internal coercion.

BARONESS RITCHIE OF DOWNPATRICK
BARONESS O'LOAN
BARONESS BERRIDGE
LORD GOODMAN OF WYCOMBE

Clause 1, page 1, line 19, leave out “by any other person”

Member's explanatory statement

This amendment clarifies that coercion or pressure would not need to come from another person. For example it could be from an institution or arise from a set of circumstances.

BARONESS COFFEY

Clause 1, page 1, line 19, after “person” insert “, body corporate, institution or organisation”

Member's explanatory statement

This expands the meaning of a person to include a variety of organisations rather than just an individual person.

LORD EVANS OF RAINOW
LORD GOODMAN OF WYCOMBE

Clause 1, page 1, line 19, leave out “into making it”

Member's explanatory statement

The existing language limits the coercion/pressure bar to cases where it causes the person to make a decision, which creates evidential difficulties. This amendment excludes all cases of coercion or pressure, without requiring finding out if it in fact causes the person to make the decision to end their own life.

BARONESS BROWN OF SILVERTOWN
BARONESS O'LOAN

Clause 1, page 1, line 20, at end insert —

- “(c) has discussed with a palliative care specialist all available palliative, hospice, and other end-of-life care options, including but not limited to
- (i) symptom management and pain relief services,
 - (ii) access to specialist palliative care teams, and
 - (iii) home-based or community care provisions.”

Member's explanatory statement

This amendment, along with others in the name of Baroness Brown of Silvertown, would require providers of assisted dying services to ensure that all persons seeking such services have discussed the range of end-of-life options available to them with a palliative care specialist.

BARONESS GREY-THOMPSON
BARONESS CAMPBELL OF SURBITON
BARONESS O'LOAN
LORD GOODMAN OF WYCOMBE

Clause 1, page 1, line 20, at end insert —

- “(c) is not subject to, nor at risk of being subject to, controlling or coercive behaviour within the meaning of section 76 of the Serious Crime Act 2015 (controlling or coercive behaviour in an intimate or family relationship), and that their wish to end their life has not arisen, directly or indirectly, from such a relationship or from the impact of such behaviour.”

BARONESS HOLLINS

Clause 1, page 1, line 20, at end insert —

- “(c) has been referred for a multidisciplinary specialist palliative care assessment under section (*Multidisciplinary palliative care assessment*).”

Member's explanatory statement

This amendment is connected to a proposed new clause in the name of Baroness Hollins (Multidisciplinary palliative care assessment), which makes a referral for a multidisciplinary palliative care assessment a requirement before any assistance under this Act is given.

BARONESS HOLLINS

Clause 1, page 1, line 20, at end insert —

“(c) has been offered specialist palliative care.”

Member's explanatory statement

This amendment, connected to another amendment in the name of Baroness Hollins (Multidisciplinary palliative care assessment), makes clear that the offer of specialist palliative care is an essential requirement before any assistance under the Act can be given.

BARONESS LAWLOR

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Clause 1, page 1, line 20, at end insert —

“(c) has been made to understand fully the physiological effects of the lethal drugs used for assisted suicide and their possible complications.”

BARONESS LAWLOR

Clause 1, page 1, line 21, leave out from beginning to second “taken” and insert “Assistance to end a person’s life shall not be provided unless the steps under sections 8, 10, 11 and 19 are”

Member's explanatory statement

Consistent with the language in subsection (1), this would ensure that the language here is operative rather than merely descriptive, thus providing a further protection against assistance outside the Bill.

BARONESS COFFEY

Clause 1, page 1, line 21, leave out “8, 10, 11 and 19” and insert “5, 7, 8, 9, 10, 11, 12, 13, 15, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 28, 29 and 30”

Member's explanatory statement

This amendment broadens what activities must be done in England.

BARONESS COFFEY

Clause 1, page 1, line 22, leave out “or Wales”

BARONESS FRASER OF CRAIGMADDIE

Clause 1, page 1, line 23, leave out “in the case of the steps under sections 10 and 11,”

Member's explanatory statement

This is a probing amendment to establish why the Bill only requires sections 10 and 11, and not the preliminary discussion, to be undertaken by persons in England or Wales.

BARONESS COFFEY

Clause 1, page 1, line 24, leave out “or Wales”

BARONESS HOLLINS

Clause 1, page 1, line 24, at end insert —

“(c) only after a multidisciplinary palliative care assessment has been carried out under section (*Multidisciplinary palliative care assessment*).”

Member's explanatory statement

*This amendment, connected to another amendment in the name of Baroness Hollins (*Multidisciplinary palliative care assessment*), requires that a multidisciplinary palliative care assessment must have taken place before any declarations or assessments for assisted dying take place.*

BARONESS COFFEY
BARONESS O'LOAN
BARONESS FOX OF BUCKLEY
LORD GOODMAN OF WYCOMBE

Clause 1, page 1, line 24, at end insert —

“(4) The steps under sections 5, 8, 9, 10, 11, 12, 13, 17, 18, 19, 21, 22 must be undertaken face to face with the terminally ill person.”

Member's explanatory statement

This amendment provides for advice, declarations and other matters to only be undertaken face to face with the terminally ill person seeking to take their own life with assistance.

BARONESS COFFEY
BARONESS O'LOAN

Clause 1, page 1, line 24, at end insert —

“(4) Artificial intelligence must not be used to carry out any functions in any section or schedule of this Act.”

Member's explanatory statement

This amendment proposes that AI not to be used in the application of this Act.

After Clause 1

LORD CARLILE OF BERRIEW
BARONESS HOLLINS

After Clause 1, insert the following new Clause –

“Application for assistance with suicide order

- (1) A person (“the applicant”) who has a terminal illness (see section 2) may apply to the Family Division of the High Court (“the Court”) for an assistance with suicide order for the purpose of enabling the applicant to be given assistance in ending his or her life.
- (2) The President of the Court may direct that the application may be heard and directions given by a judge of the Family Division or by a circuit judge who is a designated family judge.
- (3) The applicant must –
 - (a) have capacity for the purposes of this Act (see section 3),
 - (b) have been ordinarily resident in England and Wales for not less than three years immediately prior to the date of the declaration required by subsection (4) of this section, and
 - (c) not have had a request for such an order rejected within the period of six months before the date of that declaration.
- (4) An application to the Court must be –
 - (a) accompanied by a declaration in the form prescribed in sections 8 and 9 (the “first declaration”),
 - (b) accompanied by a statement (“the medical statement”) made by two registered medical practitioners confirming that the applicant has a terminal illness and is more likely than not to live for no more than six months, and
 - (c) in accordance with any Rules of Court prescribed for an application for an assistance with suicide order.
- (5) A medical practitioner signing the medical statement must –
 - (a) have at least three years’ experience in the diagnosis of and prognosis for the terminal illness from which the applicant suffers,
 - (b) not be a relative of the applicant, and
 - (c) not know or believe it likely that he or she is to benefit, directly or indirectly, from the death of the applicant.
- (6) One of the medical practitioners signing the medical statement must –
 - (a) be the medical practitioner with whom the applicant has been registered for the provision of medical care for at least six months, and
 - (b) have met with the applicant in his or her capacity as the applicant’s medical practitioner on at least three occasions.
- (7) The statements and declaration referred to in this section must be prepared following the preliminary discussions required by section 5, and in accordance with the requirements of sections 6 and 7.”

Member's explanatory statement

This amendment and others in the name of Lord Carlile of Berriew seek to establish a court-based system for the approval and scrutiny of applications for assisted suicide, and to provide for suitable court procedures and the appointment of independent persons to ensure that relevant court orders are carried out in compliance with this Act.

LORD AHMAD OF WIMBLEDON

★ After Clause 1, insert the following new Clause—

“Referendum on assisted dying

- (1) A referendum is to be held on whether adults who are terminally ill in England and Wales should be able to request and be provided with assistance to end their own life.
- (2) The Secretary of State must, by regulations, appoint the day on which the referendum is to be held.
- (3) The day appointed must be no later than 31 December 2027.”

Member's explanatory statement

This and another amendment in my name provide for a referendum to provide a stronger mandate for the commencement of the legislation with such significant impacts on society and the NHS.

Clause 2

LORD CARLILE OF BERRIEW
BARONESS HOLLINS

Clause 2, page 2, line 2, leave out from “Act,” to end of line 4 and insert “an applicant has a terminal illness if he or she—

- (a) is diagnosed as having an inevitably progressive disease which cannot be halted or reversed by treatment, and”

LORD HENDY

Clause 2, page 2, line 3, after “disease” insert “or injuries”

Member's explanatory statement

This amendment is intended to include those who suffer unbearable injuries likely to result in death and will be particularly relevant to military personnel and those suffering industrial injuries.

BARONESS FINLAY OF LLANDAFF

Clause 2, page 2, line 4, after “reversed” insert “or slowed”

BARONESS LAWLOR

- ★ Clause 2, page 2, line 4, after “reversed” insert “relieved, controlled or ameliorated”

BARONESS FINLAY OF LLANDAFF

- ★ Clause 2, page 2, line 5, leave out paragraph (b) and insert –
“(b) the rate of progress of the disease, with treatment in line with national NICE guidelines, indicates death can be expected within six months.”

LORD GARNIER

Clause 2, page 2, line 5, after “in” insert “direct”

Member's explanatory statement

This amendment ensures that the Bill links the death of the person to the terminal illness, rather than being “in consequence” with other possible factors.

BARONESS FINLAY OF LLANDAFF

Clause 2, page 2, line 5, after “of” insert “the documented rate of progress of”

LORD HENDY

Clause 2, page 2, line 5, after “disease” insert “or those injuries”

Member's explanatory statement

This amendment is connected to another amendment in the name of Lord Hendy to Clause 2.

BARONESS FINLAY OF LLANDAFF

Clause 2, page 2, line 5, after “disease” insert “after consideration of all potential disease modifying treatments”

BARONESS LAWLOR

- ★ Clause 2, page 2, line 5, leave out “can reasonably be expected within six months” and insert “has an 80 per cent likelihood of occurring within six months, according to the written opinion of two specialist (consultant level) hospital doctors, knowledgeable about and with experience of, treating patients with this progressive illness”

LORD CARLILE OF BERRIEW

Clause 2, page 2, line 6, leave out “reasonably”

LORD POLAK
BARONESS GREY-THOMPSON

- ★ Clause 2, page 2, line 6, leave out “reasonably be expected” and insert “be highly probable and require dual specialist certification by independent consultants to be”

BARONESS MURPHY
BARONESS NOAKES

Clause 2, page 2, line 6, leave out “within six months” and insert “—

- (i) within 12 months in the case of a neurodegenerative illness or disease, or
- (ii) within six months in the case of any other illness or disease.”

LORD FROST

Clause 2, page 2, line 6, at end insert —

- “(c) that illness or disease is causing unbearable suffering to the person which cannot be relieved by treatment.”

Member's explanatory statement

This amendment seeks to align the Bill with safeguards in other jurisdictions that require not merely a terminal illness, but, further, that the illness cause suffering to the person in question. See, for example, Victoria's Voluntary Assisted Dying Act 2017 Part 2, s. 9(1)(d)(iv) and New Zealand's End of Life Choice Act 2019, s. 5(1)(e).

LORD MOYLAN
BARONESS FOX OF BUCKLEY

Clause 2, page 2, line 6, at end insert —

- “(1A) Prior to commencement of section 4 of this Act, and periodically thereafter as seems to them appropriate in the light of scientific and medical advice, the Secretary of State must, by regulation, set out the entire list of illnesses or diseases that count for the purposes of subsection (1).”

Member's explanatory statement

This amendment would ensure that the scope of illnesses or diseases that count for the purposes of subsection (1) does not increase by “creep” but only by a deliberative act of the Secretary of State made by Statutory Instrument.

LORD CARLILE OF BERRIEW

Clause 2, page 2, line 7, leave out subsection (2)

LORD FALCONER OF THOROTON
 LORD CARLILE OF BERRIEW
 BARONESS PARMINTER
 BARONESS HOLLINS

Clause 2, page 2, line 7, leave out subsection (2) and insert—

“(2) Where—

- (a) a person does not eat or drink, or limits their eating or drinking, because of a mental disorder, and
- (b) their not eating or drinking, or limited eating or drinking, causes them to have an illness or disease,

the person is not regarded for the purposes of this Act as terminally ill by virtue of the illness or disease.”

Member's explanatory statement

This amendment clarifies the intended effect of the subsection (namely, excluding from the definition of “terminally ill” any illness or disease caused by the person not eating or drinking, where not eating or drinking occurs as a result of a mental disorder), and expressly provides that the subsection also covers cases of limited eating or drinking.

BARONESS GREY-THOMPSON

Clause 2, page 2, line 8, leave out “solely”

Member's explanatory statement

This amendment seeks to probe (1) the interaction between the word “solely” and the provision in Clause 19(2)(b), and (2) whether this could incentivise an individual to voluntarily stopping eating and drinking so as to (a) accelerate the deterioration of their illness, (b) engage the provision in Clause 19(2)(b) and therefore (c) reduce the length of the second period of reflection from 14 days to 48 hours.

LORD POLAK
 BARONESS GREY-THOMPSON

- ★ Clause 2, page 2, line 9, at end insert “or withdrawing medication, hydration, or life-sustaining devices.”

BARONESS FINLAY OF LLANDAFF

- ★ Clause 2, page 2, line 9, at end insert “nor as a result of the secondary effects of a mental illness or disability”

BARONESS FINLAY OF LLANDAFF

Clause 2, page 2, line 9, at end insert “, or

- (b) where the refusal of nutrition is a result of mental illness.”

BARONESS DEBBONAIRE
LORD CARLILE OF BERRIEW

Clause 2, page 2, line 9, at end insert –

“(2A) A person who would not otherwise meet the requirements of subsection (1) shall not be considered to meet those requirements solely as a result of standard medical treatment being refused or withheld.”

BARONESS FRASER OF CRAIGMADDIE
LORD CARLILE OF BERRIEW

Clause 2, page 2, line 10, leave out subsection (3)

LORD CARLILE OF BERRIEW

Clause 2, page 2, line 10, leave out from “only” to end of line 12 and insert “temporarily relieves the symptoms and does not delay the progression of an inevitably progressive condition is not to be regarded as treatment which can halt or reverse that condition.”

LORD GARNIER
LORD CARLILE OF BERRIEW

Clause 2, page 2, line 13, leave out subsection (4)

Member's explanatory statement

This is a probing amendment to explore the effect of this subsection and what is intended by the sponsor.

BARONESS GREY-THOMPSON

Clause 2, page 2, line 14, after first “a” insert “disabled”

BARONESS GREY-THOMPSON

Clause 2, page 2, line 14, leave out “with a disability or” and insert “or a person with a”

LORD HUNT OF KINGS HEATH
BARONESS BUTLER-SLOSS
BARONESS FOX OF BUCKLEY

Clause 2, page 2, line 14, leave out “(or both)” and insert “or are a person of advanced age (or any combination of these)”

Member's explanatory statement

This amendment would ensure that being elderly does not meet the definition of a terminal illness set out in subsection (1).

LORD MOYLAN

Clause 2, page 2, leave out lines 16 to 18

Member's explanatory statement

This is intended to probe the meaning and effect of the words proposed for deletion.

BARONESS PARMINTER
BARONESS DEBBONAIRE
LORD CARLILE OF BERRIEW
BARONESS O'LOAN

Clause 2, page 2, line 18, at end insert —

“(5) For the avoidance of doubt, the physical effects of a mental disorder, such as an eating disorder, would not alone make a person eligible to meet the conditions in subsection (1)(a) and (1)(b).”

Member's explanatory statement

This amendment seeks to prevent people with physical effects or complications, including severe malnutrition, that result from eating disorders from meeting the eligibility criteria for terminal illness under this Act.

LORD HUNT OF KINGS HEATH
BARONESS O'LOAN
BARONESS FOX OF BUCKLEY

Clause 2, page 2, line 18, at end insert —

“(5) For the purposes of subsection (4), dementia shall be considered to be a disability.”

Member's explanatory statement

This amendment would ensure that having dementia is recognised as a disability and is hence not by itself considered a terminal illness.

BARONESS FOX OF BUCKLEY
BARONESS HOLLINS

Clause 2, page 2, line 18, at end insert —

“(5) Notwithstanding subsection (4), for the purposes of subsection (1) a person shall not be considered terminally ill if that person, as the result or cause or influence of the effects on judgment of a mental disorder, refused lifesaving treatment, which resulted in the conditions in subsection (1) being met.”

Member's explanatory statement

This amendment seeks to ensure that people who have a desire to die as the result of a mental illness are not eligible to receive assistance under the Act if they (1) refuse treatment as a result of mental illness, and therefore (2) develop a terminal condition.

BARONESS GREY-THOMPSON

Clause 2, page 2, line 18, at end insert –

- “(5) Notwithstanding subsection (4), for the purposes of subsection (1) a person shall not be considered terminally ill where their condition is stable, manageable, or compatible with a life expectancy beyond six months.”

LORD HUNT OF KINGS HEATH

Clause 2, page 2, line 18, at end insert –

- “(5) For the avoidance of doubt, a person shall not be considered eligible for assistance under this Act solely by reason of being born with a congenital, genetic, or lifelong condition, including but not limited to muscular dystrophy, spinal muscular atrophy, or cystic fibrosis, where such condition has been present since birth and remains compatible with a sustained quality of life and long-term survival beyond early adulthood.”

Member's explanatory statement

The amendment seeks to clarify and restrict the circumstances under which the provisions of the Act can apply and is designed to safeguard people born with the conditions set out in the amendment.

LORD HUNT OF KINGS HEATH
BARONESS O'LOAN

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Clause 2, page 2, line 18, at end insert –

- “(5) No person shall be deemed eligible to make a declaration for assisted dying where their disability, impairment, or terminal condition has arisen wholly or partly as a consequence of –
- (a) medical negligence, malpractice, or omission by a healthcare professional or institution, whether in the National Health Service or in private practice, or
 - (b) treatment, procedure, or prescription subsequently found to have been delivered in error, or without fully informed consent,
- unless proceedings in subsection 6 have concluded.
- (6) For the purposes of subsection (5), no person shall be eligible to proceed until –
- (a) any applicable investigations, civil proceedings, or complaints processes concerning the origin of that disability or condition have been concluded, and
 - (b) the person has received all forms of financial compensation, insurance payment, statutory benefit, or other remedial support to which they are entitled.

- (7) The Commissioner and the Assisted Dying Review Panel are responsible for verifying compliance with this provision before authorising any further steps in the assisted dying process.”

Member's explanatory statement

The amendment would prevent under assisted dying under the Bill being offered in a situation where medical negligence, malpractice, or omission or error has taken place until all investigations, compensation, and support have concluded.

Clause 3

LORD HUNT OF KINGS HEATH

Clause 3, page 2, line 21, at end insert “, save that section 3(3) of the Mental Capacity Act 2005 (inability to make decisions) shall not apply to assessments of capacity under this Act.”

Member's explanatory statement

As the Bill includes two extended periods for reflection, this amendment would disapply section 3(3) of the Mental Capacity Act 2005, which provides that the fact that a person is able to retain the information relevant to a decision for a short period only does not prevent them from being regarded as able to make the decision.

LORD HUNT OF KINGS HEATH
BARONESS O'LOAN
THE LORD BISHOP OF LINCOLN

Clause 3, page 2, line 21, at end insert “, subject to subsection (2).

- (2) A person shall be regarded conclusively as lacking capacity in relation to assisted dying under this Act if, at the time of the first declaration, they are –
- (a) deprived of liberty under sections 4A (restriction on deprivation of liberty) or 4B (deprivation of liberty necessary for life-sustaining treatment etc) of the Mental Capacity Act 2005,
 - (b) subject to the hospital treatment regime or the guardianship regime or the community treatment regime as defined in Schedule 1A of that Act (persons ineligible to be deprived of liberty under this Act), or
 - (c) the subject of a welfare order under section 16 (powers to make decisions and appoint deputies: general) of that Act.”

Member's explanatory statement

This amendment ensures that a person who has been deprived of liberty under the Mental Capacity Act 2005, or is the subject of a welfare order, or is under one of the other scheduled regimes that mean they lack liberty, will not be regarded as having capacity to decide to end their own life.

LORD ROOK

Clause 3, page 2, line 21, at end insert “except that section 1(2) of that Act shall not apply.”

BARONESS EATON
BARONESS O'LOAN

★ Clause 3, page 2, line 21, at end insert —

“(2) Where the person is a resident of a registered care or nursing home, the attending doctor must ensure that capacity is established to a heightened evidential standard through specialist clinical assessment, having regard to the increased risk of fluctuating or impaired capacity arising from medical vulnerability and the institutional care environment.”

Member's explanatory statement

This amendment recognises the increased vulnerability of care home and nursing home residents to fluctuating capacity. It requires that a heightened evidential standard be applied when establishing capacity among this cohort, and specifies that this must be demonstrated through specialist clinical assessment.

BARONESS EATON
BARONESS O'LOAN

★ Clause 3, page 2, line 21, at end insert —

- “(2) Where the person is a resident of a registered care or nursing home, a specialist clinical assessment must first be carried out by a suitably qualified physician with expertise in geriatric or complex care for the purpose of determining whether fluctuating or impaired capacity may be attributable to a reversible clinical cause, including (but not limited to) delirium, dehydration, infection or the effects of medication.
- (3) Where subsection (2A) applies, the assessment of capacity for the purposes of this section must be carried out by a consultant psychiatrist with expertise in the assessment of complex or fluctuating capacity, and such capacity may not be treated as established solely by an assessment conducted under the Mental Capacity Act 2005.”

Member's explanatory statement

This amendment provides that, for residents of registered care or nursing homes, capacity may only be established following (1) a specialist clinical assessment ruling out reversible causes of fluctuating or impaired capacity, and (2) a capacity determination conducted by a consultant psychiatrist with relevant expertise. It further clarifies that an MCA assessment alone is insufficient given the heightened medical and institutional vulnerability to unstable capacity in care home settings.

LORD GOODMAN OF WYCOMBE

★ Clause 3, page 2, line 21, at end insert –

“(2) In the Mental Capacity Act 2005, after section 43(2), insert –

“(2A) Notwithstanding subsection (2), the Lord Chancellor may not issue a code relating to practice in assessments of capacity to end one's own life under the Terminally Ill Adults (End of Life) Act 2025 unless –

- (a) a draft of the code has been laid by the a Minister of the Crown before both Houses of Parliament, having engaged in public consultation
- (b) that draft has been approved by a resolution of, each House of Parliament.””

Member's explanatory statement

Sections 42 and 43 of the Mental Capacity Act 2005 allow codes of practice to be issued “for the guidance of persons assessing whether a person has capacity in relation to any matter”, but the code only has to be laid before both Houses of Parliament and is subject to negative resolution (s43). This amendment would ensure the code would be debated in Parliament.

BARONESS FINLAY OF LLANDAFF

★ Clause 3, page 2, line 21, at end insert –

“(2) The person is not eligible for an assisted death if, for at least 12 months ending with the date of the first declaration, the person has been deprived of their liberty under Sections 4A or 4B of the Mental Capacity Act 2005.”

Member's explanatory statement

This amendment ensures that someone who so lacks capacity in one area as to be currently or recently deprived of liberty will not be found to have capacity for the decision to seek assistance to end their own life, which is otherwise a legal possibility under the Mental Capacity Act 2005's approach to capacity.

BARONESS FINLAY OF LLANDAFF
BARONESS BUTLER-SLOSS
VISCOUNT COLVILLE OF CULROSS
BARONESS O'LOAN

Leave out Clause 3 and insert the following new Clause –

“Capacity to make a decision by a person to end their own life

- (1) In this Act, a person has capacity to make a decision to end their own life if they do not lack capacity to make that decision, and references to “capacity” are to be read accordingly.
- (2) For the purposes of this Act, a person lacks capacity to make a decision to end their own life if at the material time they are unable to make that decision for

themselves because of an impairment of, or a disturbance in, the functioning of the mind or brain.

- (3) It does not matter whether the impairment or disturbance referenced in subsection (2) is permanent or temporary.
- (4) A lack of capacity cannot be established merely by reference to –
 - (a) a person’s age or appearance, or
 - (b) a condition of theirs, or an aspect of their behaviour, which might lead others to make unjustified assumptions about their capacity.
- (5) For the purposes of subsection (2), a person is unable to make a decision to end their own life for themselves if they are unable –
 - (a) to understand the information relevant to the decision,
 - (b) to retain that information,
 - (c) to use or weigh that information as part of the process of making the decision, or
 - (d) to communicate their decision (whether by talking, using sign language or any other means).
- (6) For the purposes of subsection (5), the information relevant to the decision to end their own life includes, but is not limited to the person’s understanding –
 - (a) of the options for care and treatment of the terminal illness, including –
 - (i) the extent of prognostic certainty of their illness or condition, and
 - (ii) the likely effects on day-to-day functioning, symptom management, and pathway to and experience of death of –
 - (A) relevant and available care and treatment including palliative care, hospice or other care;
 - (B) withdrawal or absence of treatment,
 - (b) of the likely pathway to and experience of death, including relevant risks of complications, following proceeding to self-administer a substance to end their own life under the provisions of this Act,
 - (c) that a decision to proceed under this Act does not prevent or make unavailable any care and treatment provision that would normally be provided,
 - (d) that the person’s decision to proceed under this Act must be theirs alone and not bound or directed by the views or decisions of others,
 - (e) that the person is able to change their mind at any stage of the process for requesting assistance to end their own life under the provisions of this Act, regardless of previous decisions,
 - (f) that a decision to proceed under this Act is a decision to self-administer a substance to end their own life,
 - (g) that the self-administration of such a substance is not a medical treatment for their terminal illness but a personal choice concerning life and death, and
 - (h) of the relevant legal consequences from proceeding with a request for assistance to end their own life, including life insurance and categorisation of death certification.

- (7) For the purposes of this Act –
- (a) there is no presumption that a person has the capacity to decide to end their own life,
 - (b) there is no duty to support a person to have capacity to decide to end their own life, and
 - (c) any question as to whether a person has capacity to decide to end their own life must be decided on the balance of probabilities.”

Member's explanatory statement

This amendment has been suggested by CLADD (Complex Life and Death Decisions group). In the MCA 2005, the principles applying to and the test for capacity apply in a context where a decision can be taken on a 'best interests' basis for the person if they lack capacity. This amendment aims to introduce a more appropriate test for ensuring decision making ability is present for the major decision to end one's life.

LORD CARLILE OF BERRIEW

Leave out Clause 3 and insert the following new Clause –

“Capacity of an applicant

- (1) For the purposes of this Act, an applicant has capacity if he or she –
 - (a) has a clear, settled and informed intention to take his or her life,
 - (b) is not suffering from –
 - (i) an impairment of, or disturbance in, the functioning of the mind or brain, or
 - (ii) a condition which might impair his or her judgment,
 - (c) has not been the subject of undue influence or coercion in deciding to make an application, and
 - (d) is aged 18 years or over.
- (2) In considering whether an applicant has a clear, settled and informed intention to take his or her life, the Court must consider –
 - (a) submissions made by the applicant,
 - (b) evidence in accordance with sections 5 and 6 of the medical practitioners who submitted the medical statement in relation to a diagnosis of and prognosis for the applicant's terminal illness,
 - (c) evidence in accordance with sections 5 and 6 of at least one medical practitioner who is a specialist in the assessment of a person's mental condition,
 - (d) evidence about aspects of the applicant's living conditions which could bear on their intention, including the availability to them of suitable housing and effective palliative and social care,
 - (e) evidence of at least one medical practitioner who is a specialist in the management of terminal illness,
 - (f) evidence of persons who have known the applicant over a reasonable period of time and are familiar with his or her character and personality, and

- (g) evidence of interested parties whose intervention the Court considers likely to be of assistance in reaching a decision, including where relevant evidence relating to possible undue influence or coercion of an applicant.”

Member's explanatory statement

The purpose of this amendment is to provide a courts-based structure and associated protections to ensure the capacity and safety of applicants and to provide for appropriate and proportionate access to the court for interested parties.

BARONESS HOLLINS

Leave out Clause 3 and insert the following new Clause –

“Assisted dying decision-making framework

- (1) The Secretary of State must by regulations establish a framework for the assessment and determination of decision-making capacity for the purposes of requesting assistance to end one’s life under this Act.
- (2) For the avoidance of doubt, references in this Act to a person “having capacity” are to be read in accordance with this framework and not in accordance with the Mental Capacity Act 2005.
- (3) Regulations under subsection (1) must –
 - (a) set out an evidence-based methodology for determining whether an applicant has capacity to make a request under this Act;
 - (b) require that any assessment of capacity be conducted by a practitioner psychologist –
 - (i) who holds specialist registration as a clinical psychologist with the Health and Care Professions Council,
 - (ii) who is entered on the British Psychological Society’s Specialist Register of Clinical Neuropsychologists (SRCN), and
 - (iii) who is entered in the Assisted Dying Specialist Register maintained by the Health and Care Professions Council for the purposes of this Act;
 - (c) require (where appropriate) the use of validated, standardised instruments capable of detecting subtle or partial impairments in cognition, reasoning, or decision-making capacity;
 - (d) include safeguards designed to detect and exclude decision-making that is impaired by the effects of the applicant’s terminal illness, including any effects of medication or physiological deterioration;
 - (e) provide for the development and use of a validated, evidence-based capacity assessment framework specifically designed for individuals with learning disabilities, autistic spectrum disorders, or sensory or communication needs, to ensure equitable and accurate assessment for the purposes of accessing assistance to end one’s life under this Act;
 - (f) provide for the framework to be kept under continued review and revised in the light of emerging evidence.

- (4) The Secretary of State must commission and publish an independent evaluation of the operation of the framework –
 - (a) within 12 months of the day on which this Act is passed, and
 - (b) at intervals of no more than three years thereafter.”

After Clause 3

LORD HUNT OF KINGS HEATH

After Clause 3, insert the following new Clause –

“Risk of financial abuse

- (1) A person shall not be considered eligible for assistance under this Act unless the Voluntary Assisted Dying Commissioner is satisfied that –
 - (a) no person who is a close relative of the applicant has been convicted of, or is currently under investigation for, a financial crime, including fraud, theft, money-laundering, or tax evasion; and
 - (b) the applicant’s financial circumstances and those of their immediate family have been independently reviewed for indicators of coercion or financial pressure.
- (2) For the purposes of subsection (1), “close relative” means a spouse, civil partner, parent, sibling, child, or any person ordinarily resident with the applicant.”

Member's explanatory statement

The amendment introduces an independent financial review and background check on close relatives before eligibility can proceed. It aims to blocks eligibility where there is known financial abuse risk.

Clause 4

BARONESS CASS

Clause 4, page 2, line 24, at end insert “and a Voluntary Assisted Dying Director”

LORD GARNIER

Clause 4, page 2, line 25, leave out subsection (2) and insert –

- “(2) The Commissioner is to be appointed by His Majesty, on the recommendation of the Lord Chancellor.”

Member's explanatory statement

This amendment transfers the formal power to appoint the Voluntary Assisted Dying Commissioner from the Prime Minister to His Majesty, based on the recommendation of the Lord Chancellor.

BARONESS CASS

Clause 4, page 2, line 25, leave out “is” and insert “and Director are”

BARONESS GREY-THOMPSON

Clause 4, page 2, line 25, at end insert “under the public appointments process”

LORD UDNY-LISTER

Clause 4, page 2, line 25, at end insert —

- “(2A) Before making an appointment under subsection (2), the Prime Minister must lay before Parliament a statement which—
- (a) explains why the candidate is considered appropriate for the role, having regard to their qualifications, experience, and ability to perform the functions set out in subsection (4),
 - (b) confirms that the Prime Minister is satisfied, after reasonable inquiries, that the candidate is neutral on the matter of state provision of assistance to an adult to end their own life as set out in this Act, and
 - (c) confirms that the Prime Minister is satisfied, after reasonable inquiries, that the candidate has no prior connection to any organisation that campaigns for state provision of assistance to an adult to end their own life.
- (2B) For the purposes of subsection (2A)(b), “neutral” means that the candidate has not publicly expressed a position in support of or opposition to assisted dying in the ten years preceding the appointment.
- (2C) For the purposes of subsection (2A)(c), “prior connection” includes membership of, employment by, financial contributions to, or public advocacy on behalf of such an organisation in the ten years preceding the appointment.”

Member's explanatory statement

This amendment would mean that the appointment of the Commissioner must be accompanied by a public statement by the Prime Minister attesting to the suitability, independence, and neutrality on state provision of assistance to end the life of those that are terminally ill.

LORD BEITH

Clause 4, page 2, line 25, at end insert —

- “(2A) A person may not be appointed under subsection (2) unless the Health and Social Care Select Committee of the House of Commons (“the Committee”) has published a report stating that it is content for the appointment to be made.
- (2B) The person proposed to be appointed under subsection (2) may only be appointed if they make themselves available for questioning by the Committee in a public meeting before the Committee publishes any such report.

- (2C) In this section, references to the Health and Social Care Committee shall –
- (a) if the name of that Committee is changed, be taken (subject to paragraph (b)) to be references to the Committee by its new name;
 - (b) if the functions of that Committee at the passing of this Act with respect to matters relating to the provision of assistance under this Act become functions of a different committee of the House of Commons, be taken to be references to the committee by whom the functions for the time being are exercisable.”

Member's explanatory statement

This amendment would make the Prime Minister's choice for Commissioner subject to scrutiny and approval by the House of Commons' Health and Social Care Select Committee.

BARONESS FOSTER OF AGHADRUMSEE

Clause 4, page 2, line 25, at end insert –

- “(2A) The Commissioner shall have the following duties –
- (a) ensure compliance with all statutory safeguards, including medical assessments, waiting periods, and referral requirements;
 - (b) identify and mitigate risks to vulnerable persons, including those vulnerable to coercion, pressure, or undue influence;
 - (c) investigate suspected breaches of this Act, including improper conduct by medical practitioners;
 - (d) refer matters to the appropriate authorities for enforcement or disciplinary action where necessary;
 - (e) require practitioners to report adverse events or irregularities in accordance with statutory obligations.”

Member's explanatory statement

Clause 4 only describes the Commissioner's 'principal functions' and not the duties of the Commissioner. Parliament should be clear on what effective oversight covers.

BARONESS CASS

Clause 4, page 2, line 26, after “appointed” insert “as Director”

BARONESS CASS

Clause 4, page 2, line 29, at end insert –

“but for the avoidance of doubt, the Director in discharging any functions under this Act is not discharging a judicial function.”

BARONESS CASS

Clause 4, page 2, line 29, at end insert —

“(3A) The Commissioner’s principal functions are the monitoring of the operation of this Act and reporting annually on it (see section 49).”

BARONESS CASS

Clause 4, page 2, line 30, leave out “Commissioner’s” and insert “Director’s”

LORD MOYLAN

Clause 4, page 2, line 30, leave out “principal” and insert “sole”

Member's explanatory statement

This would bring the definition of the Commissioner’s functions into closer alignment with the powers given to him or her in Schedule 1, paragraph 2 and would prevent any “creep”.

LORD FROST

Clause 4, page 2, line 31, at end insert —

“(aa) ensuring all documents are present, complete and of sufficient standard to be referred to an Assisted Dying Review Panel;”

Member's explanatory statement

This amendment would allow the Commissioner real oversight in cases where the paperwork is faulty or raises concerns.

LORD CARLILE OF BERRIEW

Clause 4, page 2, line 32, leave out paragraphs (b) to (d)

BARONESS FINLAY OF LLANDAFF

Clause 4, page 2, line 38, after “it” insert “to Parliament”

LORD MOYLAN

Clause 4, page 2, line 39, at end insert —

“(f) setting charges payable for the service by those seeking assistance.”

Member's explanatory statement

This amendment would provide a means whereby assistance would not be a charge on the public purse.

BARONESS MACLEAN OF REDDITCH

Clause 4, page 2, line 39, at end insert –

- “(4A) The Cabinet Office must maintain one or more registers of the interests of –
- (a) the Commissioner,
 - (b) the Deputy Commissioner,
 - (c) any appointed panel members, and
 - (d) staff employed to support the Commissioner’s functions.
- (4B) The Cabinet Office must publish the registers maintained under subsection (4A) or make arrangements to ensure that members of the public have access to them on request.
- (4C) The Cabinet Office must make arrangements to ensure –
- (a) that a person mentioned in subsection (4A) declares any conflict or potential conflict of interest in relation to decisions made in the exercise of functions under this Act,
 - (b) that such declarations are made as soon as practicable and, in any event, within 28 days of becoming aware of the conflict or potential conflict, and
 - (c) that any such declaration is recorded in the registers maintained under subsection (4A).
- (4D) The Commissioner must make arrangements for managing conflicts and potential conflicts of interest in such a way as to ensure they do not, and do not appear to, affect the integrity of decision-making processes.
- (4E) The Secretary of State must publish guidance on the discharge of functions under this section.
- (4F) The Commissioner and Deputy Commissioner must have regard to such guidance.”

BARONESS EATON
BARONESS O’LOAN

★

Clause 4, page 2, line 39, at end insert –

- “(4A) In exercising functions under this section, the Commissioner must monitor and identify emerging patterns of risk relating to the operation of assisted dying in respect of residents of, and practice within, registered care or nursing homes, recognising such settings as a distinct safeguarding category, and must take reasonable and proportionate steps to prevent or mitigate such risk.
- (4B) Where the Commissioner considers that such risk indicates a systemic failure or regulatory deficiency, the Commissioner must notify the Secretary of State for Health and Social Care, who must take such steps as the Secretary of State considers reasonable to secure remedial action by the appropriate regulatory body.”

Member's explanatory statement

This amendment imposes a duty on the Commissioner not only to monitor and identify emerging risk in the operation of assisted dying in registered care or nursing homes, but also to take reasonable

and proportionate steps to prevent or mitigate such risk. It further provides that where such risk appears systemic, the Commissioner must notify the Secretary of State for Health and Social Care so that appropriate remedial action can be taken.

BARONESS CASS

Clause 4, page 3, line 2, at end insert, “and

(b) “the Director” means the Voluntary Assisted Dying Director.”

BARONESS CASS

Clause 4, page 3, line 3, at end insert “and the Director”

BARONESS COFFEY

Baroness Coffey gives notice of her intention to oppose the Question that Clause 4 stand part of the Bill.

Clause 5

LORD GOODMAN OF WYCOMBE
LORD CARLILE OF BERRIEW
BARONESS FOX OF BUCKLEY
BARONESS HOLLINS

Clause 5, page 3, line 6, leave out “is under any duty to” and insert “may”

Member's explanatory statement

This amendment, connected to another in the name of Lord Goodman, seeks to prohibit medical professionals from raising assisted dying as an option unless explicitly requested by the person.

LORD MOYLAN
LORD CARLILE OF BERRIEW
BARONESS FOX OF BUCKLEY

Clause 5, page 3, line 6, leave out “is under any duty to” and insert “or other health professional may”

Member's explanatory statement

This amendment prohibits a registered medical practitioner or other health professional from raising the subject of assistance with any person.

BARONESS FOX OF BUCKLEY
BARONESS HOLLINS
BARONESS O'LOAN

Clause 5, page 3, line 6, leave out from “practitioner” to end of line 10 and insert “shall raise or discuss the subject of the provision of assistance in accordance with this Act with a person who has not indicated to that or another registered medical practitioner that they wish to seek assistance to end their own life.”

Member's explanatory statement

The amendment prevents a registered medical practitioner from discussing the provision of assistance under the Act unless that matter is first raised by that person.

LORD ROOK

Clause 5, page 3, line 7, at end insert —

“(1A) No registered medical practitioner or other health professional shall raise the subject of the provision of assistance in accordance with this Act with a person unless that person has first raised the subject.”

BARONESS KEELEY

Clause 5, page 3, line 7, at end insert —

“(1A) A registered medical practitioner may not raise the subject of nor initiate a discussion on the provision of assistance under this Act with a person whose medical records indicate that they have previously cancelled a first or second declaration.”

Member's explanatory statement

This amendment ensures that where a person has previously cancelled the process of obtaining assistance, and therefore has thought about it as an option and on consideration rejected it, can freely discuss their terminal illness with their medical practitioner without being pressed to reconsider assistance to end their life.

LORD GOODMAN OF WYCOMBE
LORD MOYLAN
LORD CARLILE OF BERRIEW
BARONESS O'LOAN

Clause 5, page 3, line 8, leave out subsection (2)

Member's explanatory statement

This amendment, connected to another in the name of Lord Goodman, seeks to prohibit medical professionals from raising assisted dying as an option unless explicitly requested by the person.

BARONESS FINLAY OF LLANDAFF

★ Clause 5, page 3, line 10, leave out “discuss the matter with a person” and insert “respond to a person’s request to discuss natural dying with specialist palliative care support or an assisted death.”

(2A) The requirement that a patient is informed of all options in relation to their condition is disapplied for consideration of potential eligibility for an assisted death.”

Member’s explanatory statement

This ensures that patients who are potentially at risk of dying during their current illness are not routinely offered assisted death by treating clinicians.

BARONESS LAWLOR
BARONESS FOX OF BUCKLEY

Clause 5, page 3, line 10, leave out “the matter” and insert “ending a person’s life”

Member’s explanatory statement

This amendment replaces “the matter” with “ending a person’s life” to avoid euphemisms.

BARONESS STEDMAN-SCOTT

Clause 5, page 3, line 10, leave out “a person” and insert “a patient in their care”

Member’s explanatory statement

This amendment seeks to probe whether it is appropriate for registered medical practitioners to be given blanket legal protection to raise ending any person’s life or whether it should be restricted to those patients in their care.

LORD SHINKWIN

Clause 5, page 3, line 10, at end insert “, unless the person has Down’s syndrome or a learning disability, in which case a registered medical practitioner must not initiate, suggest, or raise the matter of assisted dying with that person.”

LORD EVANS OF RAINOW

Clause 5, page 3, line 10, at end insert —

“(2A) No registered medical practitioner or other health professional shall raise the subject of the provision of assistance in accordance with this Act with a person who is not terminally ill.”

Member’s explanatory statement

Raising assistance to end a patient’s life should only be with terminally ill people. This clause should not give rise to a presumption towards ‘normalising’ discussions of ending patients’ lives and doctors doing so as a part of routine care.

BARONESS COFFEY

Clause 5, page 3, line 11, leave out “or Wales”

LORD MOYLAN
LORD CARLILE OF BERRIEW
BARONESS O’LOAN

Clause 5, page 3, line 11, after “Wales” insert “who has been diagnosed with a terminal illness”

Member's explanatory statement

This would ensure that a “preliminary discussion” as defined in the Bill could only be conducted with a person who had a terminal illness.

BARONESS FRASER OF CRAIGMADDIE

Clause 5, page 3, line 12, leave out “seek assistance to”

LORD FALCONER OF THOROTON
LORD CARLILE OF BERRIEW

Clause 5, page 3, line 17, leave out from “must” to end of line 18 and insert “take all reasonable steps to ensure that there is effective communication between the practitioner and the person (including, where appropriate, using an interpreter).”

Member's explanatory statement

This amendment clarifies the effect of subsection (4).

BARONESS GREY-THOMPSON

Clause 5, page 3, line 18, at end insert “and BSL Level 6, or Makaton or equivalent languages”

LORD MOYLAN
LORD CARLILE OF BERRIEW
BARONESS FOX OF BUCKLEY

Clause 5, page 3, line 21, at end insert —

“(aa) where the prognosis is based on a median life expectancy, the distribution of the data underlying the prognosis;”

Member's explanatory statement

This amendment requires the registered medical practitioner to discuss the underlying data on survival from which the median prognosis has been calculated

BARONESS GREY-THOMPSON

Clause 5, page 3, line 22, at end insert —

“(ba) their wishes in the event of complications arising in connection with the self-administration of an approved substance under section 25;”

LORD CARTER OF HASLEMERE
LORD FARMER

Clause 5, page 3, line 24, leave out from “support,” to end of line 26 and insert “and must refer them to a registered medical practitioner who specialises in such care for the purpose of a full assessment.”

Member's explanatory statement

This amendment and others in the name of Lord Carter of Haslemere require a person wishing to seek assistance to end their life to be referred to a registered medical practitioner who specialises in palliative, hospice and other care, including symptom management and psychological support, for the purpose of a full assessment.

BARONESS FINLAY OF LLANDAFF

★

Clause 5, page 3, line 24, leave out from "support" to the end of line 26

BARONESS GREY-THOMPSON

Clause 5, page 3, line 24, leave out “offer to” and insert “must”

BARONESS GREY-THOMPSON
BARONESS O'LOAN

Clause 5, page 3, line 29, at end insert —

“(5A) The preliminary discussion must include the registered medical practitioner asking a person to confirm the reason for wishing to seek assistance to end their own life in accordance with this Act, and to confirm that they are not doing so under any coercion.”

BARONESS GREY-THOMPSON
LORD FARMER

Clause 5, page 3, line 29, at end insert —

“(5A) Where a terminally ill adult is involved in a preliminary discussion, they must, if they so request —

(a) have their palliative and end of life care needs assessed by an appropriate health or social care professional, and

- (b) be provided with palliative and end of life care in line with their assessed needs.
- (5B) The Secretary of State must, by regulations, make further provision in relation to the provision of palliative and end of life care in England for persons who are involved in a preliminary discussion.
- (5C) The Welsh Ministers must, by regulations, make further provision in relation to the provision of palliative and end of life care in Wales for persons who are involved in a preliminary discussion.”

LORD CURRY OF KIRKHARLE

As an amendment to the above amendment in the name of Baroness Grey-Thompson to Clause 5, page 3, line 29

In subsection (5A) leave out “if they so request” and insert “unless they refuse”

LORD CURRY OF KIRKHARLE

As an amendment to the above amendment in the name of Baroness Grey-Thompson to Clause 5, page 3, line 29

In subsection (5A)(a) leave out “an appropriate health or social care professional” and insert “appropriate health and social care professionals who have been trained in palliative care and holistic needs assessments”

BARONESS GREY-THOMPSON

Clause 5, page 3, line 29, at end insert –

- “(5A) A meeting with the specialist medical practitioner and the individual must take place before the next step can be entered into.”

LORD HUNT OF KINGS HEATH

Clause 5, page 3, line 29, at end insert –

- “(5A) The Secretary of State must, by regulations, make further provision in relation to the provision of specialist palliative care and end of life care to ensure that such full assessment can be given.”

Member's explanatory statement

This amendment is related to Lord Carter's amendment at Clause 5, page 3, line 24, and seeks to ensure that there is adequate provision to be able to provide the full assessment required in his amendment.

BARONESS FINLAY OF LLANDAFF

★ Clause 5, page 3, line 29, at end insert –

“(5A) If a registered medical practitioner conducts such a preliminary discussion with a person, the practitioner must ensure the person is referred for specialist palliative management and psychological support.”

BARONESS FRASER OF CRAIGMADDIE
LORD CARLILE OF BERRIEW

Clause 5, page 3, line 30, leave out subsection (6) and insert –

- “(6) The Secretary of State must by regulations –
- (a) establish a register of registered medical professionals who are willing and able to conduct preliminary discussions under subsection (3);
 - (b) make provision for the process by which this register is updated and publicly available.
- (7) A registered medical practitioner may only conduct the preliminary discussion under subsection (3) if they are entered in the register.
- (8) Registered medical professionals who are unwilling or unable to conduct preliminary discussion are not required to join the register under subsection (6).
- (9) A registered medical practitioner who is unwilling or unable to conduct the preliminary discussion mentioned under subsection (3) must refer the person to the register of medical professionals.”

BARONESS FINLAY OF LLANDAFF

★ Clause 5, page 3, line 30, leave out “conduct the” and insert “respond to a specific request from a patient to undertake a”

LORD FROST

Clause 5, page 3, line 33, leave out “where they can obtain information and have the” and insert “a neutral adviser, from whom they can obtain information and who can refer them for a”

Member's explanatory statement

This is one of six linked amendments in the name of Lord Frost requiring referrals for information to be to designated “neutral advisers”, ensuring provision of impartial guidance and full transparency by those providing the advice. They will be required to report all interactions to the Commissioner and there is a public reporting mechanism to ensure public trust and accountability.

LORD SHINKWIN

Clause 5, page 3, line 34, at end insert –

- “(7) If a registered medical practitioner or other health professional raises the subject of the provision of assistance in accordance with this Act with a person, or if a person raises the subject with a registered medical practitioner or other health professional, it must be considered a preliminary discussion and the discussion must be recorded.”

LORD SHINKWIN

Clause 5, page 3, line 34, at end insert –

- “(7) The Secretary of State must by regulations make provision about the training, qualifications and experience that a registered medical practitioner must have if they are to exercise their professional judgement under subsection (2).”

LORD FROST

Clause 5, page 3, line 34, at end insert –

- “(7) Upon providing advice or information to a person referred to them, a neutral adviser must report a full record of that advice or information to the Commissioner within five days, including the date on which the advice or information was received by the person seeking an assisted death.”

Member's explanatory statement

This is one of six linked amendments in the name of Lord Frost requiring referrals for information to be to designated “neutral advisers”, ensuring provision of impartial guidance and full transparency by those providing the advice. They will be required to report all interactions to the Commissioner and there is a public reporting mechanism to ensure public trust and accountability.

LORD FROST

Clause 5, page 3, line 34, at end insert –

- “(8) For the purposes of subsection (6), a neutral adviser must be an organisation or organisations designated as such by the Secretary of State by regulations, in consultation with the Commissioner.
- (9) To be designated as a neutral adviser an organisation must make the following declarations to the Secretary of State –
- (a) a declaration that it has at no point advocated for assisted dying either in principle or in any particular case;
 - (b) a declaration that it does not and will not employ or hold in voluntary capacity or have on its board any person who has taken part in the provision of assistance for assisted dying as provided for in the Terminally Ill Adults (End of Life) Act 2025;

- (c) a declaration that it is not in receipt of any funding from sources advocating for assisted dying either in principle or in any particular case;
- (d) a declaration detailing all individuals who will be providing advice;
- (e) a declaration that no part of the advice given will involve any further referral to other organisations, resources or individuals;
- (f) a declaration that all advice given to people seeking an assisted death will be strictly neutral and balanced, not advocating or suggesting, overtly or by omission, a particular course of action;
- (g) a declaration of all sources of funding received by the organisation, which shall be updated every six months.”

Member's explanatory statement

This is one of six linked amendments in the name of Lord Frost requiring referrals for information to be to designated “neutral advisers”, ensuring provision of impartial guidance and full transparency by those providing the advice. They will be required to report all interactions to the Commissioner and there is a public reporting mechanism to ensure public trust and accountability.

LORD FROST

Clause 5, page 3, line 34, at end insert –

- “(10) The Commissioner must keep an online public register of all neutral advisers.
- (11) The register kept under subsection (10) will keep such information available in perpetuity and will identify in how many cases a neutral adviser has given advice and what proportion of those cases have resulted in an assisted death.
- (12) The register will also keep an online, publicly accessible record of the advice and information supplied under subsection (7) and all declarations made under subsection (8).”

Member's explanatory statement

This is one of six linked amendments in the name of Lord Frost requiring referrals for information to be to designated “neutral advisers”, ensuring provision of impartial guidance and full transparency by those providing the advice. They will be required to report all interactions to the Commissioner and there is a public reporting mechanism to ensure public trust and accountability.

LORD FROST

Clause 5, page 3, line 34, at end insert –

- “(13) At any time the Commissioner may inform the Secretary of State that a neutral adviser must be struck off the list of designated neutral advisers kept in accordance with subsection (10), and the Secretary of State must immediately strike off the neutral adviser in question.
- (14) The Commissioner must immediately invoke this power if a neutral adviser –
 - (a) fail to report to the Commissioner within the five day period specified in subsection (7);

- (b) fails to supply a full and complete record in accordance with subsection (7), or
 - (c) breaches any of the declarations made in accordance with subsection (8).
- (15) The Commissioner must inform the Secretary of State within five days of any of the conditions set out in subsection (14) being met.
- (16) Any organisation struck off in accordance with subsection (13) may not be redesignated as a neutral adviser in future.”

Member's explanatory statement

This is one of six linked amendments in the name of Lord Frost requiring referrals for information to be to designated “neutral advisers”, ensuring provision of impartial guidance and full transparency by those providing the advice. They will be required to report all interactions to the Commissioner and there is a public reporting mechanism to ensure public trust and accountability.

LORD FROST

Clause 5, page 3, line 34, at end insert –

- “(17) The Commissioner must provide a method by which members of the public accessing the records kept under subsection (10) can report potential breaches to the Commissioner for a determination under subsection (13).
- (18) That determination, which must include reasons for the determination reached, must be made within 28 days and subsequently included in the publicly accessible record for that neutral adviser.”

Member's explanatory statement

This is one of six linked amendments in the name of Lord Frost requiring referrals for information to be to designated “neutral advisers”, ensuring provision of impartial guidance and full transparency by those providing the advice. They will be required to report all interactions to the Commissioner and there is a public reporting mechanism to ensure public trust and accountability.

BARONESS HOLLINS

Baroness Hollins gives notice of her intention to oppose the Question that Clause 5 stand part of the Bill.

Clause 6

BARONESS GOUDIE
BARONESS FOX OF BUCKLEY

Clause 6, page 3, line 36, after “raise” insert “or discuss”

Member's explanatory statement

This would ensure that the registered medical practitioner is prohibited from discussing assisted dying with a child aged under 18, and not only from raising it with them.

BARONESS HOLLINS

Clause 6, page 3, line 38, leave out “18” and insert “25”

Member's explanatory statement

This amendment prevents any health professional from raising assisted dying with anyone under the age of 25.

BARONESS MONCKTON OF DALLINGTON FOREST

LORD CARLILE OF BERRIEW

BARONESS O'LOAN

THE LORD BISHOP OF LINCOLN

Clause 6, page 3, line 38, at end insert “, or

- (b) with a person who has a learning disability or autism unless a family member is present.”

Member's explanatory statement

This amendment seeks to ensure that a health professional cannot raise assisted dying with a person who has a learning disability or autism unless a family member is present.

BARONESS GREY-THOMPSON

As an amendment to the amendment in the name of Baroness Monckton of Dallington Forest to Clause 6, page 3, line 38

Leave out “is” and insert “and independent person are”

BARONESS GOUDIE

BARONESS FOX OF BUCKLEY

Clause 6, page 3, line 38, at end insert —

- “(2) This prohibition applies irrespective of whether the discussion is initiated by the person under the age of 18.”

Member's explanatory statement

This would ensure that the registered medical practitioner is prohibited from discussing assisted dying with a child aged under 18 even where that child raises it.

BARONESS GOUDIE
BARONESS FOX OF BUCKLEY
BARONESS KEELEY

Clause 6, page 3, line 38, at end insert —

- “(2) No adult with a duty of care or responsibility for a person under the age of 18, including but not limited to guardians, social workers, educators, or carers, shall raise the subject of assisted dying with such a person.”

Member's explanatory statement

This would ensure that the prohibition on raising assisted dying with a child aged under 18 extends to others with a duty of care to that child.

LORD ROOK
LORD MURRAY OF BLIDWORTH

Clause 6, page 3, line 38, at end insert —

- “(2) Any healthcare professional found to have breached this section shall be reported to the General Medical Council (GMC) for investigation and potential disciplinary action, which may include suspension or revocation of their professional registration.”

Member's explanatory statement

This amendment sets out what should happen if a medical practitioner or healthcare professional breaches the restriction in Clause 6.

LORD ROOK
LORD MURRAY OF BLIDWORTH

Clause 6, page 3, line 38, at end insert —

- “(2) If a person under the age of 18 raises the subject of the provision of assistance under this Act, the medical practitioner must refuse to discuss the subject and shall inform the person that such assistance is not available to individuals under the age of 18.
- (3) The medical practitioner shall document the interaction, including the refusal to discuss the subject, in the person's medical records as soon as is reasonably practicable.
- (4) The medical practitioner may refer the individual to a qualified mental health professional for a comprehensive mental health assessment and support.”

Member's explanatory statement

This amendment sets out what should happen if someone under 18 asks for assistance to end their life.

LORD MOYLAN

Lord Moylan gives notice of his intention to oppose the Question that Clause 6 stand part of the Bill.

Member's explanatory statement

This is consequential on the amendment to Clause 5(1) in Lord Moylan's name, which renders it redundant.

Clause 7

BARONESS GREY-THOMPSON

Clause 7, page 4, line 5, leave out "as soon as practicable" and insert "within 7 days"

LORD ROOK

LORD MURRAY OF BLIDWORTH

Clause 7, page 4, line 6, at end insert "and give the written record to the Commissioner"

Member's explanatory statement

This amendment would require that a record of the preliminary discussion must be provided to the Commissioner in order to support the Commissioner's role monitoring the operation of the Act, including compliance with its provisions as well as investigating and reporting on matters connected with the operation of the Act.

BARONESS GREY-THOMPSON

Clause 7, page 4, line 8, leave out "as soon as practicable" and insert "within 7 days"

LORD ROOK

LORD MURRAY OF BLIDWORTH

Clause 7, page 4, line 10, after "practice" insert "and the Commissioner"

Member's explanatory statement

This amendment would require that a record of the preliminary discussion must be provided to the Commissioner in order to support the Commissioner's role monitoring the operation of the Act, including compliance with its provisions as well as investigating and reporting on matters connected with the operation of the Act.

BARONESS KEELEY

Clause 7, page 4, line 12, at end insert —

- “(4) The registered medical practitioner with the person's GP practice must disclose to the medical practitioner conducting the preliminary discussion any information

in their possession that may affect the individual's eligibility for assisted dying and such information must be taken into account by the co-ordinating doctor in their assessment under section 10.

- (5) Where a registered medical practitioner with the person's GP practice has reasonable grounds to believe that an individual does not meet the eligibility for provision of assistance in accordance with this Act, they shall formally notify the Commissioner."

Member's explanatory statement

This amendment seeks to strengthen the safeguards for patients by mandating input from the patient's regular GP. This reduces risks of critical information being overlooked and it partially addresses the risks arising from the assessing doctors, having no prior relationship or knowledge of the patient.

BARONESS FOSTER OF AGHADRUMSEE

Clause 7, page 4, line 12, at end insert –

- "(4) Where concerns about an individual's capacity or potential undue influence arise, the General Practice may consult with individuals properly interested in the patient's welfare.
- (5) For the purposes of subsection (4), "individuals properly interested in the patient's welfare" includes (but is not limited to) those who may hold vital information to detect coercion, such as the patient's spouse, partner, sibling, or child, and relevant professional bodies or agencies with access to safeguarding information, including local authority or police records."

Member's explanatory statement

This amendment provides a mechanism to allow GPs to consult with those who have a close interest in the applicant's welfare when there are concerns about safeguarding, capacity and undue influence.

BARONESS HOLLINS

Baroness Hollins gives notice of her intention to oppose the Question that Clause 7 stand part of the Bill.

After Clause 7

BARONESS HOLLINS
BARONESS FRASER OF CRAIGMADDIE
LORD HUNT OF KINGS HEATH
LORD FARMER

After Clause 7, insert the following new Clause—

“Multidisciplinary palliative care assessment

- (1) A registered medical practitioner who diagnoses a person as terminally ill, who has requested assistance to end their lives for the purposes of this Act must, within 72 hours of making that diagnosis—
 - (a) refer that person for a multidisciplinary specialist palliative care assessment,
 - (b) refer that person for a specialist psychological assessment, including a formulation of psychological and social factors relevant to the request, to be shared with the Assisted Dying Review Panel,
 - (c) refer that person for a care needs assessment, and
 - (d) notify the relevant authority and request consideration for fast-track funding for NHS continuing health care.
- (2) A person referred under subsection (1) is entitled to have those assessments carried out within seven days of the receipt of the referral.
- (3) In order to enable an informed decision to request assistance to end their life, the person must be offered access to the relevant palliative or care services within 48 hours of the assessment being completed.
- (4) For the purposes of this section, “fast track funding” means access to NHS funded continuing health care to meet urgent care and support associated with terminal illness.
- (5) A person is not eligible to access the provisions of this Act relating to assistance to end their own life until the assessments under subsection (2) have been completed and any identified palliative and care needs under subsection (3) have been considered and, where appropriate, offered and provided.”

Member's explanatory statement

This amendment seeks to ensure that a person asking for assistance to end their life through the provisions of this Bill, understands their prognosis and the help that is available, prior to applying to make a first legal declaration.

Clause 8

LORD FALCONER OF THOROTON

Clause 8, page 4, line 16, leave out from “must” to end of line 17 and insert “, when aged 18 or over—

- (a) have a preliminary discussion with a registered medical practitioner, and
- (b) after having had such a discussion, make a declaration that they wish to be provided with such assistance (a “first declaration”).”

Member's explanatory statement

This amendment provides that a person must have a preliminary discussion with a practitioner when aged 18 or over before making a first declaration.

BARONESS HOLLINS

As an amendment to the above amendment in the name of Lord Falconer of Thoroton to Clause 8, page 4, line 16

Leave out “18” and insert “25”

Member's explanatory statement

This amendment and others in the name of Baroness Hollins amend that in the name of Lord Falconer of Thoroton to raise the age when a declaration can take place to 25 rather than 18 and to require a multidisciplinary assessment.

BARONESS HOLLINS

As an amendment to the above amendment in the name of Lord Falconer of Thoroton to Clause 8, page 4, line 16

Leave out paragraph (a) and insert—

- “(a) have a multidisciplinary palliative care assessment, and”

Member's explanatory statement

This amendment and others in the name of Baroness Hollins amend that in the name of Lord Falconer of Thoroton to raise the age when a declaration can take place to 25 rather than 18 and to require a multidisciplinary assessment.

BARONESS HOLLINS

As an amendment to the above amendment in the name of Lord Falconer of Thoroton to Clause 8, page 4, line 16

In paragraph (b), leave out “a discussion” and insert “an assessment”

Member's explanatory statement

This amendment and others in the name of Baroness Hollins amend that in the name of Lord Falconer of Thoroton to raise the age when a declaration can take place to 25 rather than 18 and to require a multidisciplinary assessment.

LORD GOODMAN OF WYCOMBE
LORD CARLILE OF BERRIEW
BARONESS O'LOAN

Clause 8, page 4, line 17, at end insert –

- “(1A) A person is only eligible to make a declaration under subsection (1) if they have completed a psychiatric or psychological evaluation no more than one month before making the declaration which states that they are not suffering from depression, anxiety or cognitive impairments.”

Member's explanatory statement

This amendment seeks to ensure that the person must undertake a psychiatric or psychological evaluation before making the first declaration.

LORD GOODMAN OF WYCOMBE
LORD CARLILE OF BERRIEW

Clause 8, page 4, line 17, at end insert –

- “(1A) A person is only eligible to make a declaration under subsection (1) if they have attended a private interview with a trained professional no more than one month before making the declaration and that professional has stated in a report that they are satisfied that the person is making their declaration in the absence of any external pressure.
- (1B) For the purposes of subsection (1A), a “trained professional” is a qualified social worker or a trained independent advocate.”

Member's explanatory statement

This amendment seeks to ensure that, before making the first declaration, the person has met with a social worker who will assess whether they are subject to any coercion or pressure.

LORD GOODMAN OF WYCOMBE
LORD CARLILE OF BERRIEW

Clause 8, page 4, line 17, at end insert –

- “(1A) A person is only eligible to make a declaration under subsection (1) if they have completed a standardised legal and medical competency test no more than one month before making the declaration to assess their cognitive function and decision-making capacity.”

Member's explanatory statement

This amendment seeks to ensure that a person cannot make a first declaration until their capacity has been assessed with a standardised legal and medical competency test.

BARONESS CASS

Clause 8, page 4, line 22, leave out “doctor” and insert “professional”

LORD MOYLAN
BARONESS O'LOAN
THE LORD BISHOP OF LINCOLN
BARONESS HOLLINS

Clause 8, page 4, line 24, at end insert —

- “(2A) A first declaration made, or purported to be made, by a person who —
- (a) has —
 - (i) a learning disability,
 - (ii) a mental disorder under section 1 of the Mental Health Act 1983, or
 - (iii) autism
 - (b) may experience substantial difficulty in understanding the processes or information relevant to those processes or communicating their views, wishes or feelings, or
 - (c) meets criteria that the Secretary of State may specify by regulation,
- is void and has no effect under this Act or otherwise.”

Member's explanatory statement

This excludes those with the conditions specified or otherwise determined by the Secretary of State from access to assisted suicide.

LORD MOYLAN
LORD CARLILE OF BERRIEW
BARONESS O'LOAN

Clause 8, page 4, line 24, at end insert —

- “(2A) Neither the coordinating doctor nor the other person under subsection (2)(c)(ii) may at the time of taking receipt of the first declaration be employed by or contracted to the National Health Service, an NHS Trust or any body or agency holding itself out to be a part of the NHS.
- (2B) If, after receiving the first declaration and while the patient is still alive, the co-ordinating doctor does become so employed or contracted, they must cease forthwith to be the coordinating doctor for that patient.”

Member's explanatory statement

This is one of a number of steps that, taken together, would ensure a complete separation between assistance to end one's life and the National Health Service.

BARONESS GREY-THOMPSON

Clause 8, page 4, line 24, at end insert –

“(2A) A first declaration must include the person’s reason for requesting assistance to die.”

BARONESS EATON
BARONESS O'LOAN

★

Clause 8, page 4, line 24, at end insert –

“(2A) Where the person is a resident of a registered care or nursing home –

- (a) the first declaration under this section must be verified by a continuity witness, being a person who is not a member of staff, but has had regular and sustained contact with the resident for not less than six months immediately preceding the declaration, and who is able to attest to the resident’s voluntariness and stability of intention, and
- (b) unless expressly vetoed by the resident, the attending doctor must take reasonable steps to consult a close family member or, where no such person is reasonably available, another individual with a long-standing personal relationship with the resident (not a member of staff), for the purpose of confirming that the decision appears to be voluntary and uncoerced.”

Member's explanatory statement

This amendment provides that, for residents of registered care or nursing homes, the first declaration of intent to end life must be verified by a continuity witness – someone with regular and sustained contact who can attest to voluntariness – and that, unless vetoed by the resident, a close family member or other long-standing associate should be consulted. It establishes a relational safeguard against isolation, coercion, or manipulation within institutional settings.

BARONESS CASS

Clause 8, page 4, line 25, leave out “doctor” and insert “professional”

BARONESS GREY-THOMPSON

Clause 8, page 4, line 26, leave out “as soon as reasonably practicable” and insert “within 7 days”

BARONESS GREY-THOMPSON

Clause 8, page 4, line 32, at end insert –

- “(iv) proof of ID and the person’s National Insurance number;
- (v) whether the person signing the declaration is disabled under the Equality Act 2010;
- (vi) the person’s employment status;”

BARONESS GREY-THOMPSON

Clause 8, page 4, line 32, at end insert –

- “(iv) whether the person has previously applied for assistance under the terms of this Act and, if so, how many times they have applied.”

BARONESS FINLAY OF LLANDAFF

★

Clause 8, page 4, line 32, at end insert –

- “(iv) contact details of services currently involved in providing clinical and social care to the person;”

LORD MOYLAN

Clause 8, page 4, line 37, after “practitioner” insert “within the preceding 90 days”

Member's explanatory statement

This is to probe why the Bill makes no provision for a maximum time period between the preliminary discussion and the first declaration.

BARONESS BERGER

Clause 8, page 4, line 37, leave out “18” and insert “25”

LORD HUNT OF KINGS HEATH
LORD CARLILE OF BERRIEW

Clause 8, page 4, line 40, at end insert –

- “(ia) a declaration that they have been offered a referral to a registered medical practitioner who specialises in appropriate palliative, hospice or other care, including symptom management and psychological support, for the purpose of further discussion, and that they either did or did not accept that offer;”

Member's explanatory statement

This amendment would ensure that the person seeking assistance informs the assessing doctor that they were offered the referral to a palliative care specialist set out in section 5(5)(c), and whether or not they accepted.

LORD CARTER OF HASLEMERE
LORD FARMER

Clause 8, page 4, line 40, at end insert —

“(iia) and that they have been referred to a registered medical practitioner who specialises in palliative, hospice and other care, including symptom management and psychological support, for the purpose of a full assessment;”

Member's explanatory statement

This amendment and others in the name of Lord Carter of Haslemere require a person wishing to seek assistance to end their life to be referred to a registered medical practitioner who specialises in palliative, hospice and other care, including symptom management and psychological support, for the purpose of a full assessment.

BARONESS FINLAY OF LLANDAFF

★ Clause 8, page 5, line 3, leave out “first”

BARONESS FINLAY OF LLANDAFF

★ Clause 8, page 5, line 4, after “pressured” insert “in any way”

BARONESS FINLAY OF LLANDAFF

★ Clause 8, page 5, line 7, leave out “first”

BARONESS BERGER

Clause 8, page 5, line 10, leave out “18” and insert “25”

BARONESS COFFEY

Clause 8, page 5, line 11, leave out “and Wales”

BARONESS COFFEY

Clause 8, page 5, line 13, leave out “or Wales”

BARONESS RITCHIE OF DOWNPATRICK
LORD FARMER

Clause 8, page 5, line 13, at end insert –

- “(5A) Where a terminally ill adult makes a first declaration, they must, if they so request –
- (a) have their palliative and end of life care needs assessed by an appropriate health or social care professional, and
 - (b) be provided with palliative and end of life care in line with their assessed needs.
- (5B) The Secretary of State must, by regulations, make further provision in relation to the provision of palliative and end of life care in England for persons who have made a first declaration.
- (5C) The Welsh Ministers must, by regulations, make further provision in relation to the provision of palliative and end of life care in Wales for persons who have made a first declaration.”

BARONESS GREY-THOMPSON

As an amendment to the amendment in the name of Baroness Ritchie of Downpatrick to Clause 8, page 5, line 13

In subsection (5A)(a), after “their” insert “specialist”

BARONESS GREY-THOMPSON

As an amendment to the amendment in the name of Baroness Ritchie of Downpatrick to Clause 8, page 5, line 13

In subsection (5A)(b), after first “with” insert “specialist”

LORD HUNT OF KINGS HEATH

As an amendment to the above amendment in the name of Baroness Ritchie of Downpatrick to Clause 8, page 5, line 13.

After subsection (5C) insert –

- “(5D) The Secretary of State must, by regulations, make further provision in relation to the provision of specialist palliative and end of life care to ensure that such assessment can be given.”

Member's explanatory statement

The amendment to Baroness Ritchie's amendment seeks to ensure that there is adequate provision to be able to provide the assessment required in her amendment.

BARONESS HOLLINS
LORD FARMER
BARONESS FINLAY OF LLANDAFF

Clause 8, page 5, line 13, at end insert –

- “(5A) A person is not eligible to make a first declaration to access provisions of this Act relating to assistance to end their own life unless that person has undergone a multidisciplinary specialist palliative care assessment that includes –
- (a) a psychological assessment, and
 - (b) a care needs assessment,
- and has been approved for funding under the Social Security (Special Rules for End of Life) Act 2022.”

Member's explanatory statement

This amendment adds further eligibility requirements before a person may make a first declaration.

BARONESS CASS

Clause 8, page 5, line 14, leave out ““the coordinating doctor” means a registered medical practitioner”” and insert ““the coordinating professional” means a professional”

Member's explanatory statement

This amendment and subsequent consequential amendments in the name of Baroness Cass seeks to reflect the policy of the Bill that multidisciplinary consideration should be embedded throughout the process and allows for professionals of two different disciplines, at least one of which should be a doctor, to undertake the assessments

BARONESS FINLAY OF LLANDAFF
BARONESS O'LOAN
BARONESS BUTLER-SLOSS
BARONESS FOX OF BUCKLEY

Clause 8, page 5, line 14, at end insert –

- “(za) who has explicitly opted to become a “coordinating doctor”,”

Member's explanatory statement

This is to make the “opt-in” for doctors explicit on the face of the Bill – to make clear that there is no expectation on doctors to participate and it is only those who positively choose to do so who would have the training and participate.

BARONESS GREY-THOMPSON

Clause 8, page 5, line 20, after “person” insert “or a connected individual”

BARONESS FRASER OF CRAIGMADDIE

Clause 8, page 5, line 24, at end insert –

- “(6A) Before declaring they are willing and able to carry out the functions of this Act under subsection (6) (b), the coordinating doctor must consult with a doctor who has known the patient in a clinical capacity for at least 12 months and has access to their full primary care record.”

BARONESS FINLAY OF LLANDAFF
BARONESS BUTLER-SLOSS

Clause 8, page 5, line 24, at end insert –

- “(6A) The coordinating doctor must be currently licensed to practice by the General Medical Council and listed on the register of validated providers and assessors of assisted deaths.”

Member's explanatory statement

This, and a related amendment to clause 11, is to ensure that the doctors are currently licensed to practice and subject to revalidation and annual appraisal. A doctor retired from clinical practice but retaining GMC registration cannot act in the roles of coordinating or independent doctor.

BARONESS GREY-THOMPSON

Clause 8, page 5, line 24, at end insert –

- “(6A) No registered medical professional may become the coordinating doctor or the independent doctor under this Act if they have experienced a suicide in their family in the previous 12 months.
- (6B) For the purposes of this section, “family” includes –
- (a) parents,
 - (b) children,
 - (c) siblings, and
 - (d) spouses.”

BARONESS CASS

Clause 8, page 5, line 26, leave out “registered medical practitioner” and insert “professional”

BARONESS CASS

Clause 8, page 5, line 27, leave out “doctor” and insert “professional”

BARONESS CASS

Clause 8, page 5, line 28, leave out “practitioner” and insert “professional”

BARONESS FINLAY OF LLANDAFF

Clause 8, page 5, line 29, leave out “about” and insert “and been assessed for their competencies in”

Member's explanatory statement

The impact assessment allows only for short, possibly online, training without assessing competencies as a result of that training.

BARONESS FINLAY OF LLANDAFF

★ Clause 8, page 5, line 30, after “capacity” insert “and decision making ability”

BARONESS FINLAY OF LLANDAFF

★ Clause 8, page 5, line 35, leave out “abuse” and insert “and all other types of abuse and undue influence”

LORD HUNT OF KINGS HEATH

Clause 8, page 5, line 35, at end insert —

“(e) financial abuse.”

Member's explanatory statement

The amendment seeks to ensure that in the list of matters that the practitioner must have had training, financial abuse must be included.

BARONESS FINLAY OF LLANDAFF

BARONESS BUTLER-SLOSS

Clause 8, page 5, line 35, at end insert —

“(8A) The regulations must also provide that the practitioner must have passed a competency-based assessment after their training.”

BARONESS BROWNING

Clause 8, page 5, line 35, at end insert —

“(8A) The regulations must provide that the practitioner must demonstrate a recognised training standard in relation to autistic people and people with a learning disability.”

LORD MOYLAN
LORD CARLILE OF BERRIEW

Clause 8, page 5, line 36, leave out subsection (9)

Member's explanatory statement

This amendment seeks to ensure that subsequent provision on the training of coordinating doctors cannot be issued unilaterally by a person specified in an initial regulation. Instead, subsequent provision on training must be made by regulations and would therefore be subject to continuing parliamentary scrutiny.

BARONESS FINLAY OF LLANDAFF

★

Clause 8, page 5, line 37, leave out from “be” to end of line 38 and insert “specified in the regulations by the Secretary of State following consultation with professionals who support victims of abuse or coercion or those with suicidal ideation.”

LORD FALCONER OF THOROTON

Clause 8, page 5, line 39, leave out subsection (10)

Member's explanatory statement

This amendment omits provision that duplicates the effect of subsection (8)(d) (note “domestic abuse” is defined by Clause 56(2) to include controlling or coercive behaviour and economic abuse).

LORD EVANS OF RAINOW

Clause 8, page 5, line 42, at end insert —

“(12) No individual, in any capacity, may witness more than two first declarations within a 12 month period, including any lapsed declarations.”

Member's explanatory statement

A probing amendment to establish whether it is the sponsor’s intent that “witness” schemes should be permitted by groups like Dignity in Dying and what the rules around these should be.

Clause 9

LORD EVANS OF RAINOW
LORD GOODMAN OF WYCOMBE

Clause 9, page 6, line 3, after “identity,” insert “one of which must be a UK passport,”

Member's explanatory statement

This amendment probes whether it is the sponsor’s intent that this regime be open to those that are not British citizens.

LORD JOPLING

Clause 9, page 6, line 15, at end insert –

- “(c) they have not witnessed a declaration more than twice in the previous four years.”

LORD GOODMAN OF WYCOMBE
LORD CARLILE OF BERRIEW

Clause 9, page 6, line 15, at end insert –

- “(6) The witness mentioned in section 8(2)(c)(ii) must append a criminal record disclosure and declaration of financial interests to the declaration.”

Member's explanatory statement

This amendment, connected to others in the name of Lord Goodman, seeks to ensure that the witness or proxy always supplies a criminal record disclosure and declaration of financial interests when undertaking this role.

After Clause 9

BARONESS GREY-THOMPSON

After Clause 9, insert the following new Clause –

“Advocate for disabled people

- (1) Where the person making a first declaration under section 8 is considered a disabled person under the Equality Act 2010, the coordinating doctor must refer the person to an independent advocate trained in disability rights before approving any declaration.
- (2) The independent advocate under subsection (1) must –
 - (a) ensure that the applicant gives informed consent and is free from pressure,
 - (b) confirm that the applicant has been offered all practicable social, medical, and palliative supports which are financially supported, and
 - (c) certify that the decision has not been influenced by lack of support, social isolation, or financial constraint.
- (3) The outcomes of the process in subsection (2) must be recorded and deposited with the Commissioner prior to any decision by the Commissioner under section 16.”

Clause 10

LORD EVANS OF RAINOW

Clause 10, page 6, line 18, at end insert —

“(1A) Before the first assessment the coordinating doctor must ask the patient —

- (a) if they have further considered the alternative treatment options raised in the preliminary discussion, outlined in section 5(5)(b) to (c), and
- (b) if they have informed any next of kin or other persons they are close to of their decision to begin this process.”

Member's explanatory statement

To help ensure the patient is aware of and considering non-lethal options for the treatment of their terminal illness, and to ascertain to what extent the patient has informed family and friends of their decision.

LORD GARNIER

Clause 10, page 6, line 20, after “person” insert “beyond reasonable doubt”

Member's explanatory statement

This is to ensure a high bar of certainty in the assessment process.

BARONESS BERGER

Clause 10, page 6, line 23, leave out “18” and insert “25”

BARONESS COFFEY

Clause 10, page 6, line 24, leave out “and Wales”

BARONESS COFFEY

Clause 10, page 6, line 25, leave out “and Wales”

BARONESS COFFEY

Clause 10, page 6, line 28, leave out “or Wales”

BARONESS GREY-THOMPSON

Clause 10, page 6, line 28, at end insert —

“(fa) has shown proof of ID,”

BARONESS BERGER
LORD CARLILE OF BERRIEW

Clause 10, page 6, line 29, after “life” insert “because of their terminal illness”

Member's explanatory statement

This amendment and others in the name of Baroness Berger would mean that someone is only eligible for assistance in ending their own life under this Act if their clear, settled and informed wish to end their life is because of their terminal illness and not for any other reason.

LORD CARTER OF HASLEMERE
BARONESS FOX OF BUCKLEY

Clause 10, page 6, line 31, at end insert —

- “(i) has been referred to a registered medical practitioner who specialises in palliative, hospice and other care, including symptom management and psychological support, for the purpose of a full assessment.”

Member's explanatory statement

This amendment and others in the name of Lord Carter of Haslemere require a person wishing to seek assistance to end their life to be referred to a registered medical practitioner who specialises in palliative, hospice and other care, including symptom management and psychological support, for the purpose of a full assessment.

LORD CARTER OF HASLEMERE
BARONESS FOX OF BUCKLEY
LORD FARMER

Clause 10, page 6, line 31, at end insert —

- “(i) is not acting out of a temporary feeling of fear, panic, or anxiety in relation to their diagnosis and prognosis.”

Member's explanatory statement

Suicidal ideation for terminally ill patients peaks during a short window after both diagnosis and prognosis. This amendment and three others in the name of Lord Carter of Haslemere seek to eliminate the undue influence of what may be, however understandable, ultimately, a temporary, emotional reaction.

BARONESS GREY-THOMPSON

Clause 10, page 6, line 31, at end insert —

- “(i) has been offered and informed about available social care, assistive technology, home adaptations, and disability support services, and
- (j) has not made their request primarily because of a lack of or the withdrawal of any of the supporting measures in sub-paragraph (i).”

LORD FALCONER OF THOROTON

Clause 10, page 6, line 39, at end insert —

“(iia) the Commissioner, and”

Member's explanatory statement

This amendment requires the coordinating doctor to give a copy of the report about the first assessment to the Voluntary Assisted Dying Commissioner.

LORD MOYLAN

Clause 10, page 7, line 1, after “satisfied” insert “beyond a reasonable doubt”

Member's explanatory statement

This is to probe the meaning of “satisfied”.

LORD MOYLAN

Clause 10, page 7, line 4, at end insert —

“(3A) A co-ordinating doctor may not refer more than five patients to the same independent doctor in any calendar year.”

Member's explanatory statement

This is to contribute to the maintenance of proper professional distance between co-ordinating and independent doctors.

LORD EVANS OF RAINOW

Clause 10, page 7, line 4, at end insert —

“(3A) The coordinating doctor must not act as the coordinating doctor for any more than three patients in any calendar year.”

Member's explanatory statement

This is to prevent doctor shopping.

BARONESS STEDMAN-SCOTT

Clause 10, page 7, line 7, at end insert —

“(za) contain a statement that the coordinating doctor has met physically with the person for the purpose of the assessment;”

Member's explanatory statement

The coordinating doctor's report must include a statement that the doctor has met the patient in person, as opposed to online or over the phone, etc.

LORD MOYLAN
LORD CARLILE OF BERRIEW

Clause 10, page 7, line 9, after “satisfied” insert “beyond a reasonable doubt”

Member's explanatory statement

This is to probe the meaning of “satisfied”.

BARONESS GREY-THOMPSON

Clause 10, page 7, line 9, leave out “(h)” and insert “(j)”

BARONESS LAWLOR

Clause 10, page 7, line 10, leave out “(as the case may be)”

Member's explanatory statement

This amendment would remove a phrase which does not appear to add anything to the Bill, and perhaps has the inadvertent consequence of implying that it would be by default irregular to deny a request.

BARONESS KEELEY

Clause 10, page 7, line 18, at end insert —

“(ca) contain a statement on —

- (i) the location of the nearest relevant and available palliative care service to the person seeking assistance,
- (ii) the distance to it from the person’s home location, and
- (iii) whether the person knew about the palliative care service.”

Member's explanatory statement

The coordinating doctor’s report must include a statement about the availability of palliative care to the person.

LORD FALCONER OF THOROTON

Clause 10, page 7, line 22, leave out “through illness”

Member's explanatory statement

This amendment would mean that the provision in clause 10(6) and (7) about making a further referral to an independent doctor applies in any case in which the independent doctor is unable or unwilling to continue to act (and not only in cases where the inability or unwillingness results from illness).

LORD CARLILE OF BERRIEW
BARONESS FINLAY OF LLANDAFF

Lord Carlile of Berriew gives notice of his intention to oppose the Question that Clause 10 stand part of the Bill.

Clause 11

BARONESS BERGER

Clause 11, page 7, line 38, leave out “18” and insert “25”

BARONESS GREY-THOMPSON

Clause 11, page 7, line 38, at end insert —

“(ca) has shown proof of ID,”

BARONESS BERGER
LORD CARLILE OF BERRIEW

Clause 11, page 7, line 39, after “life” insert “because of their terminal illness”

Member's explanatory statement

This amendment and others in the name of Baroness Berger would mean that someone is only eligible for assistance in ending their own life under this Act if their clear, settled and informed wish to end their life is because of their terminal illness and not for any other reason.

LORD CARTER OF HASLEMERE
BARONESS FOX OF BUCKLEY

Clause 11, page 7, line 41, at end insert —

“(f) has been referred to a registered medical practitioner who specialises in palliative, hospice and other care, including symptom management and psychological support, for the purpose of a full assessment.”

Member's explanatory statement

This amendment and others in the name of Lord Carter of Haslemere require a person wishing to seek assistance to end their life to be referred to a registered medical practitioner who specialises in palliative, hospice and other care, including symptom management and psychological support, for the purpose of a full assessment.

LORD CARTER OF HASLEMERE
BARONESS FOX OF BUCKLEY

Clause 11, page 7, line 41, at end insert —

“(f) is not acting out of a temporary feeling of fear, panic, or anxiety in relation to their diagnosis and prognosis.”

Member's explanatory statement

Suicidal ideation for terminally ill patients peaks during a short window after both diagnosis and prognosis. This amendment and three others in the name of Lord Carter of Haslemere seek to eliminate the undue influence of what may be, however understandable, ultimately, a temporary, emotional reaction.

LORD HUNT OF KINGS HEATH
BARONESS FOX OF BUCKLEY

Clause 11, page 8, line 1, leave out “seven” and insert “14”

Member's explanatory statement

This amendment would extend the period for reflection between the report of the first and the making of the second assessment from one to two weeks.

LORD FALCONER OF THOROTON

Clause 11, page 8, line 5, leave out from “to” to end of line 6 and insert “section 12(4) and (7) (sharing of specialists’ opinions etc).”

Member's explanatory statement

This is a drafting change (consequential on subsection (4) being added to clause 12).

LORD FALCONER OF THOROTON

Clause 11, page 8, line 15, at end insert —

“(iia) the Commissioner, and”

Member's explanatory statement

This amendment requires the independent doctor to give a copy of the report about the second assessment to the Voluntary Assisted Dying Commissioner.

LORD GOODMAN OF WYCOMBE

Clause 11, page 8, line 17, at end insert —

“(c) if satisfied as to all of the matters mentioned in subsection (2)(a) to (e), refer the assessed person to a palliative care physician to carry out the third assessment.”

Member's explanatory statement

This amendment, connected with another in the name of Lord Goodman, seeks to ensure that the second assessment is followed by a subsequent assessment from a palliative care physician.

LORD EVANS OF RAINOW

Clause 11, page 8, line 17, at end insert —

“(5A) The independent doctor must not act as the independent doctor for any more than three patients in any calendar year.”

Member's explanatory statement

This amendment seeks to prevent "doctor shopping".

BARONESS MACLEAN OF REDDITCH
LORD GOODMAN OF WYCOMBE

Clause 11, page 8, line 20, at end insert —

“(za) contain a statement that the independent doctor has physically met with the person for the purpose of the assessment;”

Member's explanatory statement

The independent doctor's report must include a statement that the doctor has physically met with the person.

BARONESS LAWLOR

Clause 11, page 8, line 23, leave out “(as the case may be)”

Member's explanatory statement

This amendment would remove a phrase which does not appear to add anything to the Bill, and perhaps has the inadvertent consequence of implying that it would be by default irregular to deny a request.

BARONESS KEELEY

Clause 11, page 8, line 32, at end insert —

“(ca) contain a statement on the location and how far away the nearest relevant and available palliative care is from the person's home location and whether the person knew about the palliative care;”

Member's explanatory statement

The independent doctor's report must include a statement about the availability of palliative care to the person.

BARONESS FINLAY OF LLANDAFF
BARONESS O'LOAN
BARONESS BUTLER-SLOSS

Clause 11, page 8, line 35, at end insert –

“(za) has explicitly opted to become an independent doctor for the purposes of this section,”

Member's explanatory statement

This is to make the “opt-in” for doctors explicit on the face of the Bill – to make clear that there is no expectation on doctors to participate and it is only those who positively choose to do so who would have the training and participate.

BARONESS FRASER OF CRAIGMADDIE

Clause 11, page 8, line 37, leave out paragraph (b) and insert –

“(b) is a specialist in the disease or condition of the person's terminal illness,”

BARONESS FINLAY OF LLANDAFF
BARONESS BUTLER-SLOSS

Clause 11, page 9, line 3, at end insert –

“(8A) The independent doctor must be currently licensed to practice by the General Medical Council and listed on the register of validated providers and assessors of assisted deaths.”

Member's explanatory statement

This, and a related amendment to Clause 8, is to ensure that the doctors are currently licensed to practice and subject to revalidation and annual appraisal. A doctor retired from clinical practice but retaining GMC registration cannot act in the roles of coordinating or independent doctor.

BARONESS GREY-THOMPSON

Clause 11, page 9, line 3, at end insert –

“(8A) The registered medical practitioner must sign a declaration to confirm that they comply with the terms of subsection (8)(f).”

BARONESS FINLAY OF LLANDAFF
BARONESS BUTLER-SLOSS

Clause 11, page 9, line 12, at end insert –

“(10A) The regulations must also provide that the practitioner must have passed a competency-based assessment after their training.”

LORD MOYLAN

Clause 11, page 9, line 13, leave out subsection (11)

Member's explanatory statement

This amendment seeks to ensure that subsequent provision on the training of independent doctors cannot be issued unilaterally by a person specified in an initial regulation. Instead, subsequent provision on training must be made by regulations and would therefore be subject to continuing parliamentary scrutiny.

LORD FALCONER OF THOROTON

Clause 11, page 9, line 18, leave out subsection (13)

Member's explanatory statement

This amendment omits provision that duplicates the effect of subsection (10)(c) (note “domestic abuse” is defined by Clause 56(2) to include controlling or coercive behaviour and economic abuse).

LORD CARLILE OF BERRIEW
BARONESS HOLLINS
BARONESS FINLAY OF LLANDAFF

The above-named Lords give notice of their intention to oppose the Question that Clause 11 stand part of the Bill.

After Clause 11

LORD GOODMAN OF WYCOMBE

After Clause 11, insert the following new Clause –

“Third doctor’s assessment (palliative care physician)

- (1) Where a referral is made under section 11(5)(c), the palliative care physician must carry out the third assessment of the person as soon as reasonably practicable after the second doctor’s assessment report has been issued.
- (2) “The third assessment” is an assessment to ascertain whether, in the opinion of the palliative care physician, the person who made the first declaration is fully informed about alternatives to alleviate suffering.
- (3) After carrying out the third assessment, the palliative care physician must –
 - (a) make a report about the assessment (which must meet the requirements of regulations under subsection (4)),
 - (b) give a copy of the report to –
 - (i) the person who was assessed,
 - (ii) the coordinating doctor,

- (iii) if neither the palliative care physician nor the coordinating doctor is a practitioner with the person's GP practice, a registered medical practitioner with that practice, and
 - (iv) any other person specified in regulations made by the Secretary of State, and
 - (c) if satisfied as to the matter mentioned in subsection (2), refer the assessed person to a psychiatrist to carry out the fourth assessment.
- (4) The Secretary of State must by regulations make provision about the content and form of the report.
- (5) The regulations must provide that the report must –
 - (a) contain a statement indicating whether the palliative care physician is satisfied as to the matter mentioned in subsection (2);
 - (b) contain an explanation of why the palliative care physician is, or (as the case may be) is not, so satisfied;
 - (c) be signed and dated by the palliative care physician.
- (6) A registered palliative care physician may carry out the functions of the third assessor under this Act only if that physician –
 - (a) meets the requirements specified in regulations under subsection (7),
 - (b) has not provided treatment or care for the person being assessed in relation to that person's terminal illness,
 - (c) is not a relative of the person being assessed,
 - (d) is not a partner or colleague in the same practice or clinical team as the coordinating doctor,
 - (e) does not know or believe that they –
 - (i) are a beneficiary under a will of the person, or
 - (ii) may otherwise benefit financially or in any other material way from the death of the person.
- (7) The Secretary of State must by regulations make provision about the training, qualifications and experience that a registered medical practitioner must have in order to carry out the functions of the palliative care physician.
- (8) The regulations may in particular provide that the required training, qualifications or experience is to be determined by a person specified in the regulations.
- (9) In subsection (6)(b) the reference to “terminal illness” means the illness or disease mentioned in section 2(1)(a).”

Member's explanatory statement

This amendment, connected with another amendment in the name of Lord Goodman, seeks to require a third assessment with a palliative care physician.

LORD GOODMAN OF WYCOMBE

After Clause 11, insert the following new Clause—

“Fourth doctor’s assessment (psychiatrist)

- (1) Where a referral is made under section (*Third doctor’s assessment (palliative care physician)*), the psychiatrist must carry out the fourth assessment of the person as soon as reasonably practicable after the third doctor’s assessment report has been issued.
- (2) “The fourth assessment” is an assessment to ascertain whether, in the opinion of the psychiatrist, the person who made the first declaration is making a free and informed decision and is not being coerced.
- (3) After carrying out the fourth assessment, the psychiatrist must—
 - (a) make a report about the assessment (which must meet the requirements of regulations under subsection (4)),
 - (b) give a copy of the report to—
 - (i) the person who was assessed,
 - (ii) the coordinating doctor,
 - (iii) if neither the psychiatrist nor the coordinating doctor is a practitioner with the person’s GP practice, a registered medical practitioner with that practice, and
 - (iv) any other person specified in regulations made by the Secretary of State, and
 - (c) if satisfied as to the matter mentioned in subsection (2), refer the assessed person to a geriatrician to carry out the fifth assessment.
- (4) The Secretary of State must by regulations make provision about the content and form of the report.
- (5) The regulations must provide that the report must—
 - (a) contain a statement indicating whether the psychiatrist is satisfied as to the matter mentioned in subsection (2);
 - (b) contain an explanation of why the psychiatrist is, or (as the case may be) is not, so satisfied;
 - (c) be signed and dated by the psychiatrist.
- (6) A registered psychiatrist may carry out the functions of the fourth assessor under this Act only if that physician—
 - (a) meets the requirements specified in regulations under subsection (7),
 - (b) has not provided treatment or care for the person being assessed in relation to that person’s terminal illness,
 - (c) is not a relative of the person being assessed,
 - (d) is not a partner or colleague in the same practice or clinical team as the coordinating doctor,
 - (e) does not know or believe that they—
 - (i) are a beneficiary under a will of the person, or

- (ii) may otherwise benefit financially or in any other material way from the death of the person.
- (7) The Secretary of State must by regulations make provision about the training, qualifications and experience that a registered psychiatrist must have in order to carry out the functions of the psychiatrist.
- (8) The regulations may in particular provide that the required training, qualifications or experience is to be determined by a person specified in the regulations.
- (9) In subsection (6)(b) the reference to “terminal illness” means the illness or disease mentioned in section 2(1)(a).”

Member’s explanatory statement

This amendment seeks to ensure that there is a fourth assessment with a psychiatrist.

LORD GOODMAN OF WYCOMBE

After Clause 11, insert the following new Clause –

“Fifth doctor’s assessment (geriatrician)

- (1) Where a referral is made under subsection (3)(c) of section (*Fourth doctor’s assessment (psychiatrist)*), the geriatrician must carry out the fifth assessment of the person as soon as reasonably practicable after the fourth doctor’s assessment report has been issued.
- (2) “The fifth assessment” is an assessment to ascertain whether, in the opinion of the geriatrician, the person who made the first declaration is fully informed about alternatives to alleviate suffering.
- (3) After carrying out the fifth assessment, the geriatrician must –
 - (a) make a report about the assessment (which must meet the requirements of regulations under subsection (4)),
 - (b) give a copy of the report to –
 - (i) the person who was assessed,
 - (ii) the coordinating doctor,
 - (iii) if neither the palliative care physician nor the coordinating doctor is a practitioner with the person’s GP practice, a registered medical practitioner with that practice, and
 - (iv) any other person specified in regulations made by the Secretary of State.
- (4) The Secretary of State must by regulations make provision about the content and form of the report.
- (5) The regulations must provide that the report must –
 - (a) contain a statement indicating whether the geriatrician is satisfied as to the matter mentioned in subsection (2);
 - (b) contain an explanation of why the geriatrician is, or (as the case may be) is not, so satisfied;

- (c) be signed and dated by the geriatrician physician.
- (6) A registered geriatrician may carry out the functions of the fifth assessor under this Act only if that physician—
 - (a) meets the requirements specified in regulations under subsection (7),
 - (b) has not provided treatment or care for the person being assessed in relation to that person’s terminal illness,
 - (c) is not a relative of the person being assessed,
 - (d) is not a partner or colleague in the same practice or clinical team as the coordinating doctor,
 - (e) does not know or believe that they—
 - (i) are a beneficiary under a will of the person, or
 - (ii) may otherwise benefit financially or in any other material way from the death of the person.
- (7) The Secretary of State must by regulations make provision about the training, qualifications and experience that a registered medical practitioner must have in order to carry out the functions of the geriatrician.
- (8) The regulations may in particular provide that the required training, qualifications or experience is to be determined by a person specified in the regulations.
- (9) In subsection (6)(b) the reference to “terminal illness” means the illness or disease mentioned in section 2(1)(a).”

Member’s explanatory statement

This amendment seeks to ensure that there is a fifth assessment with a geriatrician.

Clause 12

BARONESS CASS

Clause 12, page 9, line 21, leave out “doctor” and insert “professional”

BARONESS CASS

Clause 12, page 9, line 22, leave out “doctor” and insert “professional”

BARONESS CASS

Clause 12, page 9, line 23, leave out “doctor” and insert “professional”

BARONESS CASS

Clause 12, page 9, line 23, at end insert—

“(1A) In relation to any person—

- (a) the two assessing professionals must have different specialist training, to be specified in regulations made under section 11(9), and
- (b) one of the assessing professionals may be from a profession other than that of registered medical practitioner, to be specified in regulations made under section 11(9), but one of the assessing professionals must be a registered medical practitioner.”

BARONESS CASS

Clause 12, page 9, line 24, leave out “doctor” and insert “professional”

BARONESS CASS

Clause 12, page 9, line 25, leave out paragraph (a) and insert –

- “(a) examine all relevant medical records pertaining to the person’s diagnosis, prognosis and palliative and psychosocial needs, including the “multidisciplinary palliative care assessment” in section (Multi-disciplinary palliative care assessment);”

Member’s explanatory statement

This amendment and others in the name of Baroness Cass seek to clarify that it is not the role of the assessing professionals to advise on treatment or palliative care options, but to ensure that these assessments have been completed and that the person fully understands them.

LORD EVANS OF RAINOW

Clause 12, page 9, line 25, after “the person” insert “in person”

Member’s explanatory statement

This amendment would stipulate that the assessments must be carried out in person and not remotely.

BARONESS MACLEAN OF REDDITCH

Clause 12, page 9, line 25, leave out “examine such of their medical records as appear to the assessing doctor to be relevant” and insert “review their medical records, paying particular attention to –

- (i) the expected trajectory of the illness or disease under which the person is deemed eligible under section 2,
- (ii) the expected trajectory of any other illness or disease for which the person has received a formal diagnosis,
- (iii) any history of cognitive impairment, including but not limited to dementia, delirium, traumatic brain injury, and adverse medication effects,
- (iv) any psychiatric history, including but not limited to depression, anxiety, psychosis, suicidal ideation, and past suicide attempts,

- (v) any outstanding capacity assessments, including those conducted under the terms of the Mental Capacity Act 2005,
- (vi) any engagement with social care services or any other form of personal care or practical assistance,
- (vii) any personal factors, including but not limited to existing family relationships, friendship and support networks, loneliness, financial pressure, housing pressure or care pressure,
- (viii) any discussions, offers or acceptance of psychological and social support, in particular in relation to the illness or disease under which the person is deemed eligible under section 2,
- (ix) any discussions, offers or acceptance of hospice support, community care or referral to pain specialists, in particular in relation to the illness or disease under which the person is deemed eligible under section 2, and
- (x) any other matter the assessing doctor considers appropriate;”

BARONESS CASS

Clause 12, page 9, line 26, leave out “doctor” and insert “professional”

BARONESS CASS

Clause 12, page 9, line 27, leave out paragraph (b) and insert –

- “(b) take all practicable steps to consult at least one medical professional or social care professional who is providing, or who has recently provided health or social care to the person;
- (ba) make such other enquiries as the assessing professional considers appropriate;”

LORD HUNT OF KINGS HEATH
LORD CARLILE OF BERRIEW
BARONESS O'LOAN

Clause 12, page 9, line 29, after “appropriate,” insert “enquiries of any registered medical practitioner to whom the person has been referred for further discussion under section 5(5)(c),”

Member's explanatory statement

This amendment would require that, where the person has opted to be referred to a palliative care specialist following a preliminary discussion, the assessing doctor must make enquiries of that specialist to inform their assessment.

LORD LANSLEY
LORD GOODMAN OF WYCOMBE

Clause 12, page 9, line 30, at end insert —

“(ba) make such further enquiries as would be necessary to provide the statement
, as required, for the Assisted Dying Review Panel, under section 17(4)(aa);”

Member's explanatory statement

This amendment and others in the name of Lord Lansley seek to strengthen the functions of the Assisted Dying Review Panel, by requiring it, before making a determination, to be satisfied that the applicant has access to nationally-recognised standards of end-of-life care and that the request is not occasioned by remediable deficiencies in care.

BARONESS FINLAY OF LLANDAFF

★

Clause 12, page 9, line 30, at end insert —

“(ba) check local police and local authority records for any reports or evidence
of domestic disturbances at the address of the applicant;”

BARONESS CASS

Clause 12, page 9, line 32, leave out sub-paragraphs (i) to (iii) and insert —

- “(i) the assessment reports regarding their diagnosis and treatment options, and palliative care options, and determine whether the person has understood these reports and options;
- (ii) that the self-administration of such a substance does not represent a treatment for their terminal illness but a personal choice to end their life;”

LORD MOYLAN
BARONESS FOX OF BUCKLEY

Clause 12, page 9, line 32, at end insert —

“(ia) where the prognosis is based on a median life expectancy, the
distribution of the data underlying the prognosis;”

Member's explanatory statement

This amendment requires the registered medical practitioner to discuss the underlying data on survival from which the median prognosis has been calculated.

LORD CARTER OF HASLEMERE
BARONESS FOX OF BUCKLEY

Clause 12, page 9, line 35, at end insert “and must refer them to a registered medical practitioner who specialises in such care for the purpose of a full assessment”

Member's explanatory statement

This amendment and others in the name of Lord Carter of Haslemere require a person wishing to seek assistance to end their life to be referred to a registered medical practitioner who specialises in palliative, hospice and other care, including symptom management and psychological support, for the purpose of a full assessment.

BARONESS GREY-THOMPSON

Clause 12, page 10, line 3, at end insert “and that no action can be taken to hasten death”

BARONESS GRAY OF TOTTENHAM

Clause 12, page 10, line 10, at end insert —

“(fa) ask the person whether they have discussed the request with their next of kin and other persons they are close to and, where they have not done so, discuss their reasons for not doing so;”

Member's explanatory statement

This amendment would require the assessing doctors to ask the person whether they have discussed their request for an assisted death with family and friends, and to discuss their reasons if not.

BARONESS CASS

Clause 12, page 10, line 12, leave out “their next of kin and”

Member's explanatory statement

The term “next of kin” is not a legally defined term.

LORD SANDHURST

Clause 12, page 10, line 12, leave out “next of kin and other persons they are close to” and insert “relatives and other persons who have an interest in their welfare”

Member's explanatory statement

This amendment, which is suggested by the Law Society of England and Wales and which concerns the requirement that an assessing doctor, in so far as they consider appropriate, advise the person to consider discussing their request with others, replaces the term “next of kin” with “relatives” (which is a defined term in the Bill), as well as other persons who have an interest in the person’s welfare.

LORD MOYLAN

Clause 12, page 10, line 13, at end insert —

“(h) advise the person to make a will if they have not already done so.”

Member's explanatory statement

This is to limit the instances of death with intestacy.

LORD MOYLAN

Clause 12, page 10, line 13, at end insert —

- “(h) make such enquiries of the person’s insurance providers as the assessing doctor considers appropriate to ensure that any costs of the person’s assisted death will not be borne by any insurance providers.”

LORD GOODMAN OF WYCOMBE

Clause 12, page 10, line 13, at end insert —

- “(h) arrange and require the person to attend a consultation with a palliative care specialist.”

Member's explanatory statement

This amendment, connected with another in the name of Lord Goodman, seeks to ensure that the assessing doctor arranges for the person to attend a consultation with a palliative care specialist.

BARONESS CASS

Clause 12, page 10, line 14, leave out from “assessment” to “health” in line 15 and insert “and if there is no person satisfying the criteria under subsection 2(b), the assessing professional must take all practicable steps to consult at least one”

BARONESS FINLAY OF LLANDAFF

Clause 12, page 10, line 14, at end insert —

- “(za) consult with health, social care, and criminal justice professionals who have recent experience of the person being assessed;”

BARONESS FRASER OF CRAIGMADDIE

Clause 12, page 10, line 15, leave out “consider whether they should”

BARONESS FRASER OF CRAIGMADDIE

Clause 12, page 10, line 16, leave out from “experience” to end of line 17 and insert “relevant to the person’s terminal condition”

BARONESS FRASER OF CRAIGMADDIE
BARONESS CASS

Clause 12, page 10, line 18, leave out paragraph (b)

BARONESS GREY-THOMPSON
BARONESS BUTLER-SLOSS

Clause 12, page 10, line 19, at end insert –

- “(3A) The coordinating doctor and the independent doctor must have completed appropriate training, as specified in regulations made by the Secretary of State, in identifying and responding to domestic abuse, coercive control, and the abuse of older people, prior to conducting assessments under this Act.”

Member's explanatory statement

The purpose of this amendment is to ensure medical professionals making assessments are trained to recognise abuse and coercion.

BARONESS CASS

Clause 12, page 10, line 19, at end insert –

- “(3A) Where an assessing professional has not consulted a professional or professionals under subsection (2)(b) or subsection (3), the assessing professional must record that fact and give reasons for so doing.”

LORD SANDHURST

Clause 12, page 10, line 22, at end insert “and make that record available to any subsequent decision maker under this Act and to the Commissioner”

Member's explanatory statement

This amendment, which is suggested by the Law Society of England and Wales, would require an assessing doctor who consults a health or social care professional to make the written record of their consultation available to the Panel and the Commissioner.

LORD MOYLAN

Clause 12, page 10, line 22, at end insert –

- “(4A) Where an assessing doctor finds that costs associated with a person’s assisted death will be borne partly or wholly by an insurance provider, they must state that in their report and must not indicate that they are satisfied that the conditions in section 10(2)(h) or section 11(2)(e) have been met.”

LORD FALCONER OF THOROTON

Clause 12, page 10, line 24, leave out from “must” to end of line 25 and insert “take all reasonable steps to ensure that there is effective communication between the assessing doctor and the person being assessed (including, where appropriate, using an interpreter).”

Member's explanatory statement

This amendment clarifies the effect of subsection (5).

BARONESS CASS

Clause 12, page 10, line 26, leave out “doctor” and insert “professional”

BARONESS CASS

Clause 12, page 10, line 30, at end insert —

- “(ba) must consult with any person or persons who the professional reasonably believes —
 - (i) has knowledge of the person being assessed, or of their circumstances, and
 - (ii) who is able to provide information about the person’s capacity;”

Member's explanatory statement

This amendment brings the assessment in line with other mental capacity assessments where ordinarily, in complex decisions, it would be expected that the assessor would use all sources of information possible.

BARONESS BROWN OF SILVERTOWN

Clause 12, page 10, line 32, after “assessed,” insert —

- “(ii) whether the person being assessed has a clear, settled and informed wish to end their own life, or
- (iii) whether the person being assessed made the first declaration voluntarily and has not been coerced or pressured by any other person into making it,”

Member's explanatory statement

This amendment would require the assessing doctor to refer the person for psychiatric assessment not only where they have doubts about the person's capacity, but also where they have doubts about the person's clear, settled and informed wish to end their life, or doubts about whether the person has been coerced or pressured.

BARONESS BROWN OF SILVERTOWN

Clause 12, page 10, line 35, leave out from “Council” to end of line 36

Member's explanatory statement

This amendment would require the assessing doctor to refer the person for assessment by a psychiatrist, and not by a person who otherwise holds qualifications in or has experience of the assessment of capacity.

BARONESS CASS

Clause 12, page 10, line 36, at end insert “, or

- (ii) by a professional with the qualifications in and experiences of the assessment of capacity prescribed by the Secretary of State in regulations;”

LORD SANDHURST

Clause 12, page 10, line 40, at end insert “and made available to any subsequent decision maker under this Act and to the Commissioner”

Member's explanatory statement

This amendment, which is suggested by the Law Society of England and Wales, would require an assessing doctor to make any second opinion they obtain as to whether the person is terminally ill or has capacity available to the Panel and the Commissioner.

LORD FALCONER OF THOROTON

Clause 12, page 10, line 41, leave out subsection (8)

Member's explanatory statement

This amendment removes subsection (8) on the basis that it is not appropriate (subsection (7) requires an opinion to be shared with the independent doctor in any event, so the question is whether the independent doctor has doubt about a matter within subsection (6)(a) or (b) despite having seen the opinion).

LORD SANDHURST
LORD CARLILE OF BERRIEW

Clause 12, page 11, line 2, at end insert —

- “(9) All assessing doctors must, prior to service, register and be approved to serve as assessing doctors with the General Medical Council, which must maintain a public register of all assessing doctors.
- (10) The General Medical Council must approve as assessing doctors only medical practitioners who are —
 - (a) fully registered as doctors with the General Medical Council,
 - (b) in good standing, and

- (c) have been so for a period of at least 10 years prior to registering as assessing doctors.
- (11) For the avoidance of doubt, “fully registered as doctors” in subsection (10)(a) means that the General Medical Council may not approve as assessing doctors anyone who is registered as a physician associate or anaesthesia associate or both, as defined by the Anaesthesia Associates and Physician Associates Order 2024 (S.I. 2024/374).”

Member's explanatory statement

This amendment would ensure that only doctors with ten years' full registration and in good standing with their regulator may serve as assessing doctors and that physician associates and anaesthesia associates may not serve.

LORD EVANS OF RAINOW

Clause 12, page 11, line 2, at end insert —

- “(9) No assessing doctor, whether acting as the coordinating doctor or independent doctor, may act as an assessing doctor for any more than three patients within a single calendar year.”

Member's explanatory statement

This is to prevent doctor shopping.

LORD CARLILE OF BERRIEW
BARONESS HOLLINS
BARONESS FINLAY OF LLANDAFF

The above-named Lords give notice of their intention to oppose the Question that Clause 12 stand part of the Bill.

Clause 13

LORD FALCONER OF THOROTON

Clause 13, page 11, line 13, leave out subsection (3) and insert —

- “(3) Where a referral is made under subsection (2) to a registered medical practitioner (“the new independent doctor”) —
 - (a) the coordinating doctor must provide the new independent doctor with a copy of the report mentioned in subsection (1)(b), and
 - (b) if the new independent doctor is satisfied as to all of the matters mentioned in section 11(2)(a) to (e), their report under section 11 about the second assessment must set out their reasons for disagreeing with the independent doctor referred to in subsection (1) of this section.”

Member's explanatory statement

This amendment clarifies the effect of the subsection and provides for any explanation of a difference in opinion between the independent doctors to be included in the report under clause 11 (which will be given to the people mentioned in subsection (5)(b) of that clause).

LORD FALCONER OF THOROTON

Clause 13, page 11, line 30, leave out “and section 15(6)(a)(ii)”

Member's explanatory statement

This amendment is consequential on my amendment at page 12, line 32.

LORD FALCONER OF THOROTON

Clause 13, page 11, line 33, leave out “through illness”

Member's explanatory statement

This amendment would mean that the provision in clause 13(6) about making a further referral to another independent doctor applies in any case in which the new practitioner is unable or unwilling to act (and not only in cases where the inability or unwillingness results from illness).

LORD CARLILE OF BERRIEW
BARONESS HOLLINS
BARONESS FINLAY OF LLANDAFF

The above-named Lords give notice of their intention to oppose the Question that Clause 13 stand part of the Bill.

Clause 14

LORD FALCONER OF THOROTON

Clause 14, page 11, line 40, leave out “through illness or otherwise”

Member's explanatory statement

This amendment ensures that the drafting of clause 14 is consistent with the drafting of clauses 10(6) and 13(6) as amended by my amendments at page 7, line 22 and page 11, line 33.

BARONESS KEELEY

Clause 14, page 11, line 40, leave out “or otherwise is unable or unwilling” and insert “is unable”

Member's explanatory statement

These provisions should be limited to cases of death or illness. The clause fails to define in which situations it would be acceptable for the state to not be concerned that doctor is “unwilling”.

LORD MOYLAN

Clause 14, page 12, line 2, leave out “appointment, with the agreement of” and insert “selection by”

Member's explanatory statement

This is to avoid the situation in which the Secretary of State, the Commissioner or any other body becomes responsible for appointing a co-ordinating doctor or an independent doctor.

LORD CARLILE OF BERRIEW
BARONESS HOLLINS
BARONESS FINLAY OF LLANDAFF

The above-named Lords give notice of their intention to oppose the Question that Clause 14 stand part of the Bill.

Clause 15

LORD FALCONER OF THOROTON

Clause 15, page 12, line 27, at end insert —

“(2A) The Secretary of State may by regulations make provision about circumstances in which subsection (2) does not apply.”

Member's explanatory statement

This amendment would enable the Secretary of State to make provision about circumstances in which a coordinating or independent doctor who is unable or unwilling continue to carry out their functions is not required under subsection (2) to give notice to that effect. The circumstances that may be specified would include (but would not be limited to) circumstances relating to the illness of the doctor concerned.

LORD FALCONER OF THOROTON

Clause 15, page 12, line 30, leave out from “effect” to “but” and insert “—

- (a) from the time the outgoing doctor complies with subsection (2), or
- (b) where subsection (2) does not apply by virtue of regulations under subsection (2A), from such time as may be specified in, or determined in accordance with, the regulations;”

Member's explanatory statement

This amendment would enable regulations under new subsection (2A) (inserted by my amendment at page 12, line 27) to make provision about when any duty or power of a coordinating or independent doctor ceases to have effect where the doctor is unable or unwilling to continue to carry out their functions but is not required under subsection (2) to give notice to that effect.

LORD FALCONER OF THOROTON

Clause 15, page 12, line 32, leave out subsections (4) to (6).

Member's explanatory statement

This amendment would omit provisions made redundant by my amendments at page 7, line 22, page 11, line 33 and page 11, line 40.

LORD GOODMAN OF WYCOMBE

Clause 15, page 12, line 32, leave out subsections (4) and (5)

Member's explanatory statement

This amendment seeks to remove the power of the Secretary of State to make regulations relating to the replacement of coordinating or independent doctors.

LORD CARLILE OF BERRIEW
BARONESS HOLLINS
BARONESS FINLAY OF LLANDAFF

The above-named Lords give notice of their intention to oppose the Question that Clause 15 stand part of the Bill.

After Clause 15

LORD CARLILE OF BERRIEW

After Clause 15, insert the following new Clause—

“Court proceedings and orders

- (1) Where the Court has received an application for an assistance with suicide order under section (*Application for assistance with suicide order*), a person may apply to the Court for permission to—
 - (a) file evidence, or
 - (b) make representations at the hearing.
- (2) An application under subsection (1) must be made promptly following the submission of an application for an assistance with suicide order.
- (3) In considering whether to allow a person to intervene in Court proceedings, the Court must consider whether the interests of justice are promoted by allowing the intervention.
- (4) Where the Court allows a person to intervene in accordance with subsection (1), it may do so on conditions.
- (5) The Court must appoint an independent medical practitioner as an expert to assist the Court in considering medical evidence in each case.

- (6) The Court may make an assistance with suicide order if it is satisfied beyond reasonable doubt that—
 - (a) the applicant has capacity, and
 - (b) to refuse to make the order would amount to a breach of the relevant human rights law in effect at the time of the application.”

Member's explanatory statement

This proposed new Clause is designed to clarify the role and powers of the court, including consideration of applications to intervene by appropriate third parties, and also sets out the requirement that the court should appoint an independent medical expert in each case.

LORD CARLILE OF BERRIEW

After Clause 15, insert the following new Clause—

“Assistance with suicide order

- (1) An assistance with suicide order must appoint at least two independent persons to carry out the actions set out under provisions in sections (*Assistance with suicide*) and (*Further duties of independent persons*) of this Act.
- (2) An assistance with suicide order must stipulate the form in which the lethal dosage of drugs is to be provided to the applicant.
- (3) The form of the lethal dosage of drugs stipulated must be capable of being ingested by the applicant by the route he or she ordinarily ingests.”

Member's explanatory statement

This proposed new Clause is designed to ensure that the order is carried out by independent persons.

LORD CARLILE OF BERRIEW

After Clause 15, insert the following new Clause—

“Appointment of independent persons

- (1) The Court must appoint the independent persons required under section (*Assistance with suicide order*) from a list of independent persons maintained by the Court.
- (2) Only a registered medical practitioner, a registered nurse, a solicitor of the Supreme Court, a practising barrister or a Justice of the Peace may be appointed to the list of independent persons.
- (3) The Secretary of State must by regulations make provision governing the appointment of and the terms and conditions for independent persons included in the list.
- (4) Any sums required by the Secretary of State for making payments to independent persons must be paid out of money provided by Parliament.”

Member's explanatory statement

This proposed new Clause sets out the categories from which independent persons would be selected.

BARONESS GREY-THOMPSON

After Clause 15, insert the following new Clause—

“Eligibility of doctors for the purposes of sections 10, 11, 12, 13 and 14

- (1) A doctor who has been subject to an investigation by the General Medical Council on grounds of adverse physical or mental health is not eligible to participate at any stage of the assessments in sections 10, 11, 12, 13 and 14.
- (2) If a doctor has been found fit to practice following an investigation by the General Medical Council on grounds of adverse physical or mental health, subsection (1) is disapplied 18 months after the day on which the report containing the findings of the investigation is sent to the doctor.”

Clause 16

LORD FROST

Clause 16, page 13, line 28, at end insert—

- “(1A) The Commissioner must, if not satisfied by the reports mentioned in paragraphs (1)(b) or (c), request a further report or reports to clarify whether the eligibility criteria have been met in any particular.”

Member’s explanatory statement

This amendment would allow the Commissioner real oversight and provide a real power in cases where the paperwork is faulty or raises concerns.

BARONESS MACLEAN OF REDDITCH

Clause 16, page 13, line 31, at end insert—

- “(2A) The Commissioner must give notice of the referral to—
- (a) the person’s next of kin,
 - (b) the person’s GP practice,
 - (c) if the person has been referred to a specialist in accordance with 5(5)(c), that specialist,
 - (d) if the person has been referred to a psychiatrist in accordance with 12(6)(b), that psychiatrist,
 - (e) the care home in which the person is resident, if any, and
 - (f) any other persons who are likely to have an interest in being notified by virtue of being persons properly interested in the welfare of the person to whom the referral relates.
- (2B) Those persons may submit evidence to the panel and may become parties to the proceedings before the panel, at the Panel’s discretion.
- (2C) Notice must be given at least one week before the panel makes its determination.”

Member's explanatory statement

This provides a mechanism for the panel to hear from those with relevant information in good time.

LORD CARLILE OF BERRIEW
BARONESS HOLLINS
BARONESS FINLAY OF LLANDAFF

The above-named Lords give notice of their intention to oppose the Question that Clause 16 stand part of the Bill.

Clause 17

LORD LANSLEY
LORD GOODMAN OF WYCOMBE
THE LORD BISHOP OF SOUTHWARK

Clause 17, page 14, line 9, at end insert—

- “(aa) that the person has, or would be expected to have, access to end-of-life or palliative care services, so far as is reasonably practicable and where they are relevant to the person’s circumstances, that meet the recognised national standards as specified at that time under subsection (4)(aa) and Schedule 2; and that the referral is not occasioned by deficiencies in the care available to the person;”

Member's explanatory statement

This amendment and others in my name would strengthen the functions of the Assisted Dying Review Panel, by requiring it, before making a determination, to be satisfied that the applicant has access to nationally-recognised standards of end-of-life care and that the request is not occasioned by remediable deficiencies in care.

BARONESS MACLEAN OF REDDITCH

Clause 17, page 14, line 11, leave out paragraph (c) and insert—

- “(c) that the person continually had, from the time of their first declaration, and continues to have, capacity to make the decision to end their own life;”

Member's explanatory statement

This amendment requires the panel to independently find that, pursuant to the scheme of the Bill, the person concerned had capacity from the first declaration and during the period of reflection and assessments. The existing language only requires the panel to test the current capacity of the person concerned, which leaves out a crucial element of the process.

BARONESS BERGER

Clause 17, page 14, line 13, leave out “18” and insert “25”

BARONESS BERGER

Clause 17, page 14, line 16, leave out “18” and insert “25”

BARONESS COFFEY

Clause 17, page 14, line 18, leave out “and Wales”

BARONESS COFFEY

Clause 17, page 14, line 22, leave out “or Wales”

BARONESS BERGER
LORD CARLILE OF BERRIEW

Clause 17, page 14, line 24, at end insert “because of their terminal illness;”

Member's explanatory statement

This amendment and others in the name of Baroness Berger would mean that someone is only eligible for assistance in ending their own life under this Act if their clear, settled and informed wish to end their life is because of their terminal illness and not for any other reason.

LORD CARTER OF HASLEMERE
BARONESS FOX OF BUCKLEY

Clause 17, page 14, line 26, at end insert—

- “(j) that the person has been referred to a registered medical practitioner who specialises in palliative, hospice and other care, including symptom management and psychological support, for the purpose of a full assessment.”

Member's explanatory statement

This amendment and others in the name of Lord Carter of Haslemere require a person wishing to seek assistance to end their life to be referred to a registered medical practitioner who specialises in palliative, hospice and other care, including symptom management and psychological support, for the purpose of a full assessment.

LORD MOYLAN

Clause 17, page 14, line 26, at end insert –

- “(j) that the person has registered a decision to opt out of organ and tissue donation.”

Member's explanatory statement

This amendment would require a person seeking an assisted death to opt out of organ and tissue donation, in order to prevent the rise of a coercive or persuasive culture driven by the need for organs for transplant.

LORD MOYLAN

Clause 17, page 14, line 26, at end insert –

- “(j) that the person’s wish to seek assistance to end their own life in accordance with this Act is not influenced by any health insurance arrangements relating to that person.”

LORD CARTER OF HASLEMERE

Clause 17, page 14, line 26, at the end insert –

- “(j) that the person is not acting out of a temporary feeling of fear, panic, or anxiety in relation to their diagnosis and prognosis.”

Member's explanatory statement

Suicidal ideation for terminally ill patients peaks during a short window after both diagnosis and prognosis. This amendment and three others in the name of Lord Carter of Haslemere seek to eliminate the undue influence of what may be, however understandable, ultimately, a temporary, emotional reaction.

BARONESS GREY-THOMPSON

Clause 17, page 14, line 26, at end insert –

- “(j) that the person has provided a negative pregnancy test.”

BARONESS FINLAY OF LLANDAFF

Clause 17, page 14, line 26, at end insert –

- “(j) that the person has informed their children (if any) of their decision to seek assisted death, and if they do not wish to inform their children, that the person has made adequate arrangements for another person to inform the children of the assisted death and provide bereavement support.”

BARONESS FINLAY OF LLANDAFF
BARONESS HOLLINS

Clause 17, page 14, line 26, at end insert —

- “(2A) In determining a request for approval the panel must seek and consider evidence of the person’s psychosocial and safeguarding circumstances, including —
- (a) safeguarding concerns known to other agencies, including police and Local Authority services;
 - (b) inadequate care support and carer fatigue;
 - (c) a history of mental disorder within the meaning of the Mental Health Act 1983;
 - (d) safeguarding concerns relating to the person or to adults or children directly affected by the death;
- and it must satisfy itself that the coordinating doctor and the independent doctor verified that no concerns exist in relation to factors (a) to (d) above.
- (2B) For the purposes of subsection (2A) the panel must, so far as reasonably practicable and having regard to the person’s safety and wishes —
- (a) obtain and consider relevant information from the coordinating doctor and independent doctor, and from the person’s GP practice and any relevant mental health, palliative, social care, or safeguarding services,
 - (b) take account of any information provided by an independent advocate appointed under section 22,
 - (c) offer the person an opportunity to identify others (including carers or family members) who may provide information about matters listed in subsection (2A), unless the panel considers that such contact would give rise to a risk of coercion, pressure or other harm, and
 - (d) in the event of disclosure of abuse, arrange an offer of immediate access to safe housing, financial support, and, if needed, support for other family members.”

Member's explanatory statement

This amendment requires panels, when determining eligibility, to seek and consider evidence about psychosocial and safeguarding factors that may be unknown to the person’s coordinating doctor before deciding whether to grant a certificate of eligibility. It builds on the panel’s existing power to hear from doctors and others and to obtain reports (Clause 17(3)–(5)).

BARONESS FINLAY OF LLANDAFF
LORD HUNT OF KINGS HEATH

Clause 17, page 14, line 26, at end insert —

- “(2A) The panel must determine whether, for any person who wishes to be an organ donor, the person —
- (a) has recorded their decision to donate on the Organ Donor Register;
 - (b) has provided evidence of a full independent assessment according to the Human Tissue Authority guidance as applicable to a live donor to the

- coordinating doctor, the independent doctor, the panel and the organ retrieval team;
- (c) has arranged for their organs or tissues to be fully assessed for suitability for transplantation and agreed a plan for retrieval with NHS Blood and Transplant;
 - (d) has informed their family of the organ retrieval plan;
 - (e) is informed of how organ retrieval will occur in accordance with the Academy of Medical Royal Colleges code of practice on organ donation;
 - (f) is informed that full details of the organ retrieval and transplantation will be entered on the UK Transplant Register with NHS Blood and Transplant;
 - (g) has been offered the choice of total anonymity or of allowing recipients of the retrieved organs to be informed the donor died by assisted death if they request to know the origin of the organs.”

Member's explanatory statement

This amendment would require the panel to determine that the law relating to organ donation will be applied to an applicant for an assisted death with the same rigor as applied to other donation of organs or tissues in accordance with the Human Tissue Act 2004, the Organ Donation (deemed Consent) Act 2019 and the Human Transplantation (Wales) Act 2013.

LORD HUNT OF KINGS HEATH

Clause 17, page 14, line 26, at end insert –

- “(2A) Before approving any application for assistance under this Act, the Commissioner and the Assisted Dying Review Panel must jointly ensure that –
- (a) the applicant and their immediate family have undergone an independent financial assessment under section (*Risk of financial abuse*);
 - (b) relevant authorities, including HM Revenue and Customs, the Financial Conduct Authority, and local safeguarding boards, have been consulted for any records indicating financial misconduct or coercion; and
 - (c) no reasonable grounds exist to suspect that the applicant’s decision has been influenced by financial, familial, or relational coercion.”

Member's explanatory statement

The amendment aims to make coercion/financial abuse checking a shared statutory duty of both the Commissioner and the multidisciplinary Review Panel.

LORD MURRAY OF BLIDWORTH

★

Clause 17, page 14, line 27, leave out subsection (3) and insert –

- “(3) Subject to the following and to Schedule 2, the panel may, providing written reasons for its decisions, adopt, in writing, such procedure as it considers appropriate for the case, provided that all such changes comply with the following principles –

- (a) the decisions on adopting procedure, read with the reasons for doing so, must not be so irrational that no reasonable decision maker would have adopted them,
 - (b) the adopted procedure must adhere to principles of natural justice,
 - (c) the adopted procedure must not deviate from the overriding objective of the panel system, the safeguarding of the lives of vulnerable human beings, and
 - (d) in the case of adopting a more informal procedure, the procedure nevertheless retains a sense of the grave character of the matter at hand and the solemn obligation on the participants and the panel.
- (3A) All reasons for adopting a procedure and the adopted procedure itself under subsection (3) must be sent to the Commissioner as soon as reasonably practical. The Commissioner shall have the obligation to review any such procedures for their conformity with subsection (3) and the following, as well as with Schedule 2 and any guidance on practice and procedure given by the Commissioner under that Schedule. In the event that the adopted procedure or the reasons fail to conform with these requirements, the Commissioner shall have the power and obligation to—
- (a) quash the decision of the panel taken under non-conforming procedure and refer the matter to a newly constituted panel, and
 - (b) remove the panel members who adopted non-conforming procedure from the list of persons eligible to sit on Assisted Dying Review Panels.”

Member's explanatory statement

This amendment modifies the otherwise extensive discretion given to panels on procedure, subject mainly to guidance (to which they need only “have regard” from the Commissioner under Schedule 2), to ensure that the panels provide minimum standards that are to be expected from any tribunal.

LORD MURRAY OF BLIDWORTH

★

Clause 17, page 14, line 28, at end insert—

“(3A) Panels shall have the same powers, privileges, and authority as the High Court.”

Member's explanatory statement

A probing amendment to explore whether the Panel should have the power to require evidence, to summon witnesses or experts, to order the disclosure of documents, including the applicant's will, and powers of compulsion.

BARONESS BERGER

Clause 17, page 14, line 30, leave out “may” and insert “must”

LORD LANSLEY
LORD GOODMAN OF WYCOMBE

Clause 17, page 14, line 31, at end insert —

- “(aa) must secure from the assessing doctor a written statement confirming that the person has access to services consistent with the recognised national standards specified at that time under subsection (4A) and Schedule 2;”

Member's explanatory statement

This amendment and others in my name would strengthen the functions of the Assisted Dying Review Panel, by requiring it, before making a determination, to be satisfied that the applicant has access to nationally-recognised standards of end-of-life care and that the request is not occasioned by remediable deficiencies in care.

BARONESS BERGER

Clause 17, page 14, line 32, leave out “may” and insert “must”

BARONESS GRAY OF TOTTENHAM
LORD GOODMAN OF WYCOMBE

Clause 17, page 14, line 33, at end insert —

- “(ba) must ask the person whether they have discussed the request with their next of kin and other persons they are close to and, where they have not done so, discuss their reasons for not doing so;”

Member's explanatory statement

This amendment would require the panel to ask the person whether they have discussed their request for an assisted death with family and friends, and to discuss their reasons if not.

BARONESS BERGER

Clause 17, page 14, line 35, at end insert —

- “(ca) must consider hearing from and questioning —
- (i) the next of the kin of the person to whom the referral relates and other persons they are close to, and
 - (ii) any other person who has provided treatment or care for the person to whom the referral relates in relation to that person’s terminal illness;”

BARONESS FINLAY OF LLANDAFF

Clause 17, page 14, line 35, at end insert –

- “(ca) must hear from any person who provides information which may be evidence of coercion, pressure or inadequate care and must afford that person the protection of a whistleblower;”

BARONESS FINLAY OF LLANDAFF

Clause 17, page 14, line 37, leave out “may” insert “must”

Member's explanatory statement

This amendment and another in the name of Baroness Finlay of Llandaff allow those such as carers at every level and others who have seen coercive or pressurising behaviours to inform the panel.

BARONESS FINLAY OF LLANDAFF

Clause 17, page 14, line 39, at end insert –

- “(f) must hear from any person wishing to make representations regarding information relevant to the applicant for assisted dying.”

Member's explanatory statement

This amendment and another in the name of Baroness Finlay of Llandaff allow those such as carers at every level and others who have seen coercive or pressurising behaviours to inform the panel.

LORD FALCONER OF THOROTON

Clause 17, page 14, line 41, after “is” insert “(subject to subsection (5))”

Member's explanatory statement

This amendment clarifies that the requirement under subsection (4) to hear from certain people in person or by live video or audio link is subject to the power of the panel under subsection (5) to rely on pre-recorded material.

BARONESS FINLAY OF LLANDAFF

Clause 17, page 14, line 42, at end insert –

- “(4A) For the purposes of subsection (2A), the panel may by notice require any of the following to provide to the panel, within such reasonable period as may be specified, information or documents reasonably required to address the matters in subsection (2A) –
- (a) an NHS body, a GP practice, or a registered health or social care professional involved in the person’s care,
 - (b) a local authority, including adult or children’s social care services and any safeguarding service,

- (c) a mental health service provider,
 - (d) police, and
 - (e) any other person of a description specified in regulations made by the Secretary of State.
- (4B) A notice under subsection (4A) may not require the disclosure of information in contravention of the data protection legislation, but in determining whether a disclosure would contravene that legislation, the requirement imposed by this section is to be taken into account (see section 46)."

Member's explanatory statement

This amendment gives panels a targeted power to require relevant safeguarding and psychosocial information, aligned with the Bill's existing information-sharing framework and data-protection safeguard in section 46.

LORD LANSLEY
LORD GOODMAN OF WYCOMBE

Clause 17, page 14, line 42, at end insert –

- “(4A) In this section, “recognised national standards” means those service standards, clinical guidelines or quality standards as are specified under paragraph 8A of Schedule 2.
- (4B) The Secretary of State may by statutory instrument add to, amend or remove standards specified in paragraph 8A of Schedule 2.”

Member's explanatory statement

This amendment and others in my name would strengthen the functions of the Assisted Dying Review Panel, by requiring it, before making a determination, to be satisfied that the applicant has access to nationally-recognised standards of end-of-life care and that the request is not occasioned by remediable deficiencies in care.

BARONESS KEELEY

Clause 17, page 14, line 42, at end insert –

- “(4A) The use of attending the panel via video link is only permitted when –
- (a) extraordinary circumstances render it wholly impracticable to hear from or question a person in person, and
 - (b) the panel are unanimously satisfied that the use of audio or video will not impede its duties to examine the matters in subsection (2).
- (4B) The use of attending the panel via audio link is only permitted when –
- (a) extraordinary circumstances render it wholly impracticable to hear from or question a person in person,
 - (b) the panel are unanimously satisfied that the use of audio will not impede its duties to examine the matters in subsection (2), and

- (c) the panel are satisfied that there is a justification for the use of audio link alone because the use of a video link is wholly impracticable.”

Member's explanatory statement

This amendment ensures that in person hearings are the default, preferred option and that video link and audio link are only to be used where it is wholly impracticable to have in person hearings. This is done because in person hearings allow the panel to more clearly assess the people before them.

BARONESS GRAY OF TOTTENHAM

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Clause 17, page 15, line 1, leave out subsection (6) and insert –

- “(6) If the panel is of the opinion that there are exceptional circumstances which justify not hearing from the person, then the duties under subsections (4)(b) and (4)(ba) do not apply.”

Member's explanatory statement

This amendment is connected to another in the name of Baroness Gray of Tottenham to Clause 17. It disappplies the duty on the panel to ask about whether the request has been discussed with family in cases where the panel is not hearing from the person owing to exceptional circumstances.

LORD SANDHURST

Clause 17, page 15, line 3, at end insert –

- “(6A) The Secretary of State must, by regulations, make provision for the kinds of circumstances that may be considered exceptional under subsection (6).”

Member's explanatory statement

This amendment, which is suggested by the Law Society of England and Wales, would require the Secretary of State to specify in regulations the kinds of circumstances that may be considered exceptional such as to justify not hearing from the person, to prompt Parliament to consider clarifying this issue.

LORD MOYLAN
LORD CARLILE OF BERRIEW

Clause 17, page 15, line 5, after “satisfied” insert “beyond a reasonable doubt”

Member's explanatory statement

This is to probe the meaning of “satisfied”.

BARONESS GREY-THOMPSON

Clause 17, page 15, line 7, at end insert –

- “(7A) A certificate of eligibility under subsection (7)(a) must include a statement that the person’s eligibility is based on their diagnosis as being terminally ill, and not on disability, dependency or quality of life considerations.”

BARONESS GREY-THOMPSON

Clause 17, page 15, line 7, at end insert –

- “(7A) If any person is not granted a certificate of eligibility by the panel under subsection (7)(b) –
- (a) they must be referred to urgent palliative care and a liaison psychiatrist, and
 - (b) information on the refusal to grant must be added to their medical records and if they subsequently move to a different GP, this information must be carried over to their new GP with their medical records.”

BARONESS FINLAY OF LLANDAFF

Clause 17, page 15, line 15, at end insert –

- “(8A) The certificate shall be valid for a period of six months from the date of granting of the certificate, and may be renewed once following a further panel review of the diagnosis and current treatment.”

LORD CARLILE OF BERRIEW
BARONESS HOLLINS
BARONESS FINLAY OF LLANDAFF

The above-named Lords give notice of their intention to oppose the Question that Clause 17 stand part of the Bill.

Clause 18

BARONESS GREY-THOMPSON

Clause 18, page 15, line 28, leave out paragraph (b)

BARONESS GREY-THOMPSON

Clause 18, page 16, line 2, at end insert –

- “(7) If –
- (a) a person dies by suicide otherwise than under this Act, and

- (b) they had previously sought assistance to die under this Act and this was refused by the first panel,
then this must be recorded by the Commissioner, along with information on their eligibility to receive assistance under this Act.”

Member's explanatory statement

This amendment seeks to ensure that if someone is refused assistance and they choose to end their life, then this is recorded by the Commissioner.

BARONESS GREY-THOMPSON

Clause 18, page 16, line 2, at end insert –

- “(7) A person who has received a decision from the Commissioner (under subsection 4(b)) dismissing their application is not eligible to be referred under section 16 to an Assisted Dying Review Panel.”

LORD CARLILE OF BERRIEW
BARONESS HOLLINS

The above-named Lords give notice of their intention to oppose the Question that Clause 18 stand part of the Bill.

After Clause 18

BARONESS FINLAY OF LLANDAFF

After Clause 18, insert the following new Clause –

“Reconsideration of panel decisions to grant a certificate of eligibility

- (1) This section applies where –
 - (a) a panel has granted a certificate of eligibility, and
 - (b) a person provides substantially material evidence to the panel that includes –
 - (i) information that the applicant may have been subject to domestic abuse,
 - (ii) information that the applicant may have been subject to coercion or pressure,
 - (iii) information that the diagnosis may have been wrong,
 - (iv) information that the applicant had recent emotional or psychological trauma,
 - (v) information that the applicant is subject to depression as a result of the side effect of medication or metabolic disturbance, or
 - (vi) any other information the panel deems relevant.
- (2) The Commissioner must consider the information provided within 48 hours.

- (3) The Commissioner may annul the eligibility and must refer the applicant to the local safeguarding lead and any other clinical service the Commissioner deems appropriate.
- (4) The Commissioner must—
 - (a) give the person reasons, in writing, for their decision,
 - (b) state the minimum time before the person can re-apply for a certificate of eligibility,
 - (c) inform the clinical teams involved in the person’s care and treatment,
 - (d) inform the coordinating doctor and the independent doctor, and
 - (e) record the annulment in an anonymised form in the annual report.”

Clause 19

BARONESS HOLLINS
 BARONESS O'LOAN
 BARONESS BUTLER-SLOSS

Clause 19, page 16, line 9, at end insert —

“(1A) A person is not eligible to make a second declaration until that person has been approved for fast-track NHS Continuing Care Funding by the relevant authority.”

Member's explanatory statement

This amendment requires further evidence that the person’s condition is deteriorating and entering the terminal phase before assisted dying can proceed.

LORD GOODMAN OF WYCOMBE

Clause 19, page 16, line 11, leave out “14” and insert “28”

Member's explanatory statement

This amendment seeks to increase the length of the second period of reflection from two weeks to four.

LORD MOYLAN

Clause 19, page 16, line 42, at end insert —

“(c) a record showing that the person has registered a decision to opt out of organ and tissue donation.”

Member's explanatory statement

This amendment would require a person making the second declaration to opt out of organ and tissue donation, in order to prevent the rise of a coercive or persuasive culture driven by the need for organs for transplant.

BARONESS BERGER

Clause 19, page 17, line 6, after “life” insert “because of their terminal illness”

Member's explanatory statement

This amendment and others in the name of Baroness Berger would mean that someone is only eligible for assistance in ending their own life under this Act if their clear, settled and informed wish to end their life is because of their terminal illness and not for any other reason.

LORD CARTER OF HASLEMERE

Clause 19, page 17, line 8, at the end insert –

“(e) is not acting out of a temporary feeling of fear, panic, or anxiety in relation to their diagnosis and prognosis.”

Member's explanatory statement

Suicidal ideation for terminally ill patients peaks during a short window after both diagnosis and prognosis. This amendment and three others in the name of Lord Carter of Haslemere seek to eliminate the undue influence of what may be, however understandable, ultimately, a temporary, emotional reaction.

BARONESS GREY-THOMPSON

Clause 19, page 17, line 20, at end insert –

- “(ia) proof of ID and the person’s National Insurance number;
- (ib) whether the person signing the declaration is disabled under the Equality Act;
- (ic) the person’s employment status;
- (id) any recent change in the person’s relationship status;”

LORD GOODMAN OF WYCOMBE

Clause 19, page 17, line 37, at end insert –

“(9A) The person witnessing the declaration under subsection 3(c)(ii) must append a criminal record disclosure and declaration of financial interests to the declaration.”

Member's explanatory statement

This amendment, connected to others in the name of Lord Goodman, seeks to ensure that the witness or proxy always supplies a criminal record disclosure and declaration of financial interests when undertaking this role.

LORD CARLILE OF BERRIEW
BARONESS HOLLINS

The above-named Lords give notice of their intention to oppose the Question that Clause 19 stand part of the Bill.

After Clause 19

BARONESS GREY-THOMPSON

After Clause 19, insert the following new Clause —

“Organ donation declarations

- (1) A person who makes a first or second declaration under this Act may, at the same time, make a signed declaration expressing consent to the donation of their organs or tissues after death for the purpose of transplantation, research, or other therapeutic use.
- (2) A declaration under subsection (1) must —
 - (a) be in writing and signed by the application in the presence of two witnesses,
 - (b) specify whether the consent applies to all organs and tissues or to specified organs or tissues only, and
 - (c) satisfy the requirements of the Human Tissue Act 2004.
- (3) A declaration under subsection (1) may also specify that one or more organs or tissues are to be donated for the benefit of a named individual, referred to in this section as a directed donation recipient.
- (4) Where the declaration under subsection (1) includes a directed donation recipient under subsection (3), it must —
 - (a) identify the directed donation recipient by name and sufficient personal particulars to enable identification,
 - (b) be subject to such verification and clinical assessment as may be required by NHS Blood and Transplant, and
 - (c) take effect only where, in the opinion of the relevant medical authority, the donation is medically suitable and ethically appropriate.
- (5) The Secretary of State must by regulations —
 - (a) prescribe the form of the declaration under subsection (1) and the manner in which it is to be recorded to the relevant authority,
 - (b) prescribe the manner in which the declaration under subsection (1) is shared with the relevant organ donation authority (including NHS Blood and Transplant),
 - (c) ensure appropriate safeguards are in place to ensure that the declaration under subsection (1) was given voluntarily and with an adequate level of understanding,

- (d) prescribe the form and manner in which a declaration under subsection (1) including directed donation recipient under subsection (3) is to be completed and verified,
 - (e) prescribe the procedures for notification to NHS Blood and Transplant of the designation of a directed donation recipient under subsection (3), and
 - (f) establish criteria for accepting or declining the designation of a directed donation recipient under subsection (3) in accordance with clinical and ethical guidance issued by the Human Tissue Authority.
- (6) Regulations may not be made under this section unless a draft of the statutory instrument containing them has been laid before and approved by a resolution of each House of Parliament.
- (7) Nothing in this section shall be construed as imposing an obligation on NHS Blood and Transplant or any medical authority to carry out a transplantation that is not clinically appropriate or that contravenes regulations under the Human Tissue Act 2004.”

Clause 20

LORD CARLILE OF BERRIEW
BARONESS HOLLINS

The above-named Lords give notice of their intention to oppose the Question that Clause 20 stand part of the Bill.

Clause 21

BARONESS MACLEAN OF REDDITCH

Clause 21, page 18, line 24, leave out “, being unable to read or for any other reason” and insert “or of being unable to read English or Welsh, as the case may be”

Member's explanatory statement

This amendment removes the universal allowance of proxies by deleting the language “for any other reason” and thus limits the use of proxies to physical impairment or illiteracy, preventing abuse of proxies.

LORD SANDHURST

Clause 21, page 18, line 25, after “reason” insert “the Secretary of State may specify by regulations”

Member's explanatory statement

This amendment, which is suggested by the Law Society of England and Wales, would require “any other reason” for which a person may authorise a proxy to sign a declaration on their behalf to be specified by the Secretary of State in regulations, to prompt Parliament to clarify the scope of reasons for which a proxy may sign.

LORD GOODMAN OF WYCOMBE

Clause 21, page 18, line 25, after “reason” insert “which is documented in their medical records”

Member's explanatory statement

This amendment seeks to ensure that the reason for the use of a proxy signatory is documented in the person's medical records.

LORD MOYLAN

Clause 21, page 18, line 26, after “proxy” insert “, in the presence of a witness,”

Member's explanatory statement

This amendment seeks to reduce the likelihood of a person being coerced or unduly influenced into appointing a proxy. It requires someone to witness the authorisation of the proxy by the person.

BARONESS KEELEY

Clause 21, page 18, line 26, at end insert —

- “(1A) In this section, a person intending to make a first declaration or a second declaration (“the person”) authorises a proxy to sign the declaration on their behalf only if—
- (a) a videorecording is made of the person authorising the proxy by a means of communication, either verbally, in the case of illiteracy in English or Welsh, or, in the case of physical impairment, by a means of communication appropriate to that person's physical condition ,
 - (b) the proxy sends copies of such videorecording to the Commissioner, the assessing doctors, and any other persons specified in regulations made by the Secretary of State.”

Member's explanatory statement

This amendment requires recording the authorisation of the proxy, which otherwise is simply taking the proxies' word for it.

LORD GOODMAN OF WYCOMBE

Clause 21, page 18, line 35, at end insert —

- “(e) a sworn statement affirming that they are acting solely on the person's explicit direction.”

Member's explanatory statement

This amendment seeks to require a proxy to swear that they are acting solely on the person's explicit direction and a statement to this effect is appended to the person's declaration.

LORD GOODMAN OF WYCOMBE

Clause 21, page 18, line 35, at end insert –

- “(e) a criminal record disclosure, and
- (f) a declaration of financial interests.”

Member's explanatory statement

This amendment, connected to others in the name of Lord Goodman, seeks to ensure that the witness or proxy always supplies a criminal record disclosure and declaration of financial interests when undertaking this role.

LORD MOYLAN
LORD CARLILE OF BERRIEW

Clause 21, page 18, line 41, at end insert –

- “(4A) The appointment of a proxy under subsection (1) is not valid unless –
- (a) it is recorded in writing in a form prescribed by the Secretary of State by regulations,
 - (b) the form is signed in the presence of the person seeking assistance by the proxy and by the witness, and
 - (c) the form is provided to the coordinating doctor and, if section 16 is engaged (referral to a multidisciplinary panel), to the Commissioner.”

Member's explanatory statement

This amendment seeks to reduce the likelihood of a person being coerced or unduly influenced into appointing a proxy. It requires someone to witness the authorisation of the proxy by the person.

BARONESS FINLAY OF LLANDAFF

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Clause 21, page 19, line 2, leave out paragraphs (a) and (b) and insert “a person who is the registered appointee of Lasting Power of Attorney for Health and Welfare, including for life and death decisions, or is the Court Appointed Deputy for Health and Welfare decisions, for the person making the declaration.”

LORD SANDHURST

Clause 21, page 19, line 7, at end insert –

- “(7) The Secretary of State must by regulations set out how to assess whether a person understands the nature and effect of the making of the declaration.”

Member's explanatory statement

This amendment, which is suggested by the Law Society of England and Wales, would require the Secretary of State to provide guidance for proxies in assessing whether a person understands the nature and effect of the making of the declaration, to prompt Parliament to clarify this issue.

LORD CARLILE OF BERRIEW
BARONESS HOLLINS

The above-named Lords give notice of their intention to oppose the Question that Clause 21 stand part of the Bill.

Clause 22

BARONESS BROWNING
BARONESS HOLLINS

Clause 22, page 19, line 10, at end insert “, having consulted with disability rights organisations and the Equality and Human Rights Commission”

BARONESS GREY-THOMPSON

Clause 22, page 19, line 21, at end insert “including appropriate communication training”

BARONESS CASS

Clause 22, page 19, line 21, at end insert “including, in particular identifying whether a person has been coerced or pressured by any other person, and in identifying domestic abuse”

LORD SANDHURST

Clause 22, page 19, line 23, at end insert —

- “(2A) The regulations must provide that a person may not act as an independent advocate —
- (a) where that person is engaged in providing care or treatment to the qualifying person in a professional capacity, or for remuneration, or
 - (b) where they fall within a degree of proximity (whether by way of family relationship or otherwise) to the qualifying person which would affect their ability to act with independence.”

Member's explanatory statement

This amendment, which is suggested by the Law Society of England and Wales, would ensure that regulations clarify who is not able to act as an independent advocate.

BARONESS CASS

Clause 22, page 19, line 23, at end insert —

- “(2A) The regulations must provide that a person may not act as an independent advocate where —

- (a) that person is engaged in providing care or treatment to the qualifying person in a professional capacity, or for remuneration, or
- (b) they fall within a degree of proximity (whether by way of family relationship or otherwise) to the qualifying person which would affect their ability to act with independence.”

BARONESS CASS

Clause 22, page 19, line 24, leave out from “to” to end of line 28 and insert “facilitate the effective participation of qualifying persons in relation to the provisions of this Act, where otherwise their communication needs would impede such participation.

(3A) For the avoidance of doubt—

- (a) subsection 3(7)(b) of section (*Capacity to make a decision by a person to end their own life*) applies to independent advocates, and
- (b) an independent advocate does not have a duty to support a person to make a request for assistance to end their own life.”

Member's explanatory statement

This amendment, and others in the name of Baroness Cass to clause 22, are designed to clarify this role, which is not to support a person to have capacity to end their own life, not to advocate for them as in the MCA, but rather to perform a role comparable to a court intermediary in ensuring that matters are communicated to the person such that they can understand them and express their views.

BARONESS GREY-THOMPSON

Clause 22, page 19, line 28, at end insert —

“(3A) The independent advocate must consult with the qualifying person’s parents, carers, and any persons appointed by the court of protection, as the case may be.”

LORD GOODMAN OF WYCOMBE

Clause 22, page 19, line 28, at end insert —

“(3A) In fulfilling their role under subsection (3), independent advocates must ensure that they are present at any meetings between the qualifying person and the practitioner and make themselves available to the qualifying person as necessary.”

Member's explanatory statement

This amendment seeks to ensure that independent advocates are personally present at meetings between the qualifying person and the practitioner.

BARONESS CASS

Clause 22, page 19, line 31, leave out sub-paragraphs (i) to (ii) and insert “a mental disorder”

BARONESS FRASER OF CRAIGMADDIE

Clause 22, page 19, line 34, at end insert –

“(iv) communication or speech difficulties,”

BARONESS GREY-THOMPSON

Clause 22, page 19, line 34, at end insert –

“(iv) Down’s syndrome,”

BARONESS CASS

Clause 22, page 19, line 35, leave out from “in” to end of line 37 and insert “–

- (i) accessing information about decisions they may need to make for purposes of requesting assistance under this Act,
- (ii) communicating relevant matters, or”

LORD GOODMAN OF WYCOMBE

Leave out Clause 22 and insert the following new Clause –

“Independent advocates

- (1) There are to be persons appointed as independent advocates.
- (2) Independent advocates may provide support and advocacy to a qualifying person who is seeking to understand options around end of life care, including the possibility of requesting assistance to end their own life, to enable them to effectively understand and engage with all the provisions of this Act.
- (3) For the purposes of subsection (2) a person is a “qualifying person” if they –
 - (a) have –
 - (i) a learning disability,
 - (ii) a mental disorder under section 1 of the Mental Health Act 1983, or
 - (iii) autism, or
 - (b) they may experience substantial difficulty in understanding the processes or information relevant to those processes or communicating their views, wishes or feelings.
- (4) Independent advocates are to be appointed by local authorities and independent care boards.
- (5) Independent advocates must be qualified adult social workers or have similar experience in supporting vulnerable adults.

- (6) Independent advocates must report any suspected coercion of a qualifying person to the police and relevant safeguarding authorities.
- (7) The Secretary of State may issue guidance on the expected caseload for an independent advocate.
- (8) The Secretary of State may, by regulations made by statutory instrument, make provision for the payment of a salary or expenses to independent advocates.”

Member's explanatory statement

This amendment seeks to ensure that provision relating the appointment and duties of the independent advocate is placed on the face of the Bill, rather than being made by regulations.

LORD MOYLAN
LORD CARLILE OF BERRIEW

The above-named Lords give notice of their intention to oppose the Question that Clause 22 stand part of the Bill.

Member's explanatory statement

This is linked to an amendment to Clause 8 in the name of Lord Moylan, which would prevent people who would qualify for an independent advocate (under the current wording of the Bill) from being eligible to make a first declaration at all. By excluding these people from the Act, it renders the need for an independent advocate - and thus Clause 22 - unnecessary.

After Clause 22

BARONESS GREY-THOMPSON
BARONESS O'LOAN
BARONESS BUTLER-SLOSS

After Clause 22, insert the following new Clause –

“Duty to act where safeguarding concerns arise

- (1) Where the coordinating doctor, the independent doctor, or any other person involved in the assessment process under this Act has reason to believe that the person requesting assistance may be subject to abuse, coercion, or undue influence, they must –
 - (a) pause the assessment process,
 - (b) record the concern in writing,
 - (c) refer the concern to an appropriate adult safeguarding professional or team for investigation, and
 - (d) notify the Assisted Dying Commissioner and the relevant local authority safeguarding adults board.
- (2) The assessment process must not continue until the safeguarding authority has confirmed that no further action is required, or that the concern has been resolved.”

Member's explanatory statement

The purpose of this amendment is to embed a statutory duty to refer safeguarding concerns and pause the assisted dying process until risks are properly addressed.

Clause 23

LORD CARLILE OF BERRIEW

Clause 23, page 20, line 4, leave out “first”

LORD CARLILE OF BERRIEW

Clause 23, page 20, line 5, leave out paragraphs (b) to (g)

BARONESS GREY-THOMPSON

Clause 23, page 20, line 17, leave out “as soon as practicable” and insert “within 7 days”

BARONESS GREY-THOMPSON

Clause 23, page 20, line 20, leave out “as soon as practicable” and insert “within 7 days”

BARONESS GREY-THOMPSON

Clause 23, page 20, line 23, leave out “as soon as practicable” and insert “within 7 days”

Clause 24

LORD CARLILE OF BERRIEW

Clause 24, page 20, line 28, leave out from “declaration” to end of line 29 and insert “under subsection (4)(a) of section (*Application for assistance with suicide order*)”

BARONESS GREY-THOMPSON

Clause 24, page 20, line 31, leave out “as soon as practicable” and insert “within 24 hours”

BARONESS GREY-THOMPSON

Clause 24, page 20, line 35, leave out “as soon as practicable” and insert “within 24 hours”

BARONESS GREY-THOMPSON

Clause 24, page 20, line 37, leave out “as soon as practicable” and insert “within 24 hours”

Clause 25

LORD MOYLAN

Clause 25, page 21, line 9, at end insert —

“(1A) None of the actions described in or authorised by subsections (2) to (13) of this section may be carried out in premises owned, leased, rented or occupied by the National Health Service, an NHS Trust or any body or agency that is part of or is in receipt of funding from the NHS.”

Member's explanatory statement

This is intended to prevent the provision of assistance from being administered in NHS premises.

BARONESS GREY-THOMPSON

Clause 25, page 21, line 12, at end insert “at a time and date of their choosing”

BARONESS GREY-THOMPSON

Clause 25, page 21, line 17, at end insert —

“(4A) The coordinating doctor must discuss any complications which may reasonably occur with the person self-administering the approved substance and the person must explicitly refuse any complications being treated in case such treatment could result in resuscitation.”

BARONESS FINLAY OF LLANDAFF

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Clause 25, page 21, line 18, after “substance” insert “or mixture”

BARONESS BERGER
LORD CARLILE OF BERRIEW

Clause 25, page 21, line 21, after “life” insert “because of their terminal illness”

Member's explanatory statement

This amendment and others in the name of Baroness Berger would mean that someone is only eligible for assistance in ending their own life under this Act if their clear, settled and informed wish to end their life is because of their terminal illness and not for any other reason.

LORD MOYLAN

Clause 25, page 21, line 21, at end insert—

“(ba) has opted out of organ and tissue donation, and”

Member's explanatory statement

This amendment would require the coordinating doctor to confirm that the person being provided with an assisted death has opted out of organ and tissue donation, in order to prevent the rise of a coercive or persuasive culture driven by the need for organs for transplant.

BARONESS GREY-THOMPSON

Clause 25, page 21, line 26, at end insert “with the permission of the applicant, and those persons who the individual wishes to have with them, including children and pets.”

BARONESS FINLAY OF LLANDAFF

- ★ Clause 25, page 21, line 27, after “substance” insert “or mixture”

BARONESS FINLAY OF LLANDAFF

- ★ Clause 25, page 21, line 29, after “device” insert “approved by the Medicines and Healthcare products Regulatory Agency”

BARONESS FINLAY OF LLANDAFF

- ★ Clause 25, page 21, line 30, after “substance” insert “or mixture”

BARONESS FINLAY OF LLANDAFF

- ★ Clause 25, page 21, line 32, after “substance” insert “or mixture”

BARONESS FINLAY OF LLANDAFF

- ★ Clause 25, page 21, line 34, after “substance” insert “or mixture”

BARONESS FINLAY OF LLANDAFF

- ★ Clause 25, page 21, line 36, after “substance” insert “or mixture”

BARONESS FRASER OF CRAIGMADDIE

Clause 25, page 21, line 37, leave out paragraph (b)

BARONESS FINLAY OF LLANDAFF

- ★ Clause 25, page 21, line 38, after “substance” insert “or mixture”

BARONESS FINLAY OF LLANDAFF

- ★ Clause 25, page 22, line 5, after “substance” insert “or mixture”

BARONESS FINLAY OF LLANDAFF

- ★ Clause 25, page 22, line 8, after “failed” insert “to bring about death”

LORD FROST

Clause 25, page 22, line 10, leave out subsection (12) and insert –

- “(12) The coordinating doctor, subject to section 26, must be physically present during the provision of assistance.
- (12A) In the following provisions of this section, “circumstances requiring the provision of lifesaving care” refers to circumstances where the person has self-administered the approved substance, in whole or in part, and either –
- (a) the person has decided, after partial administration, to cease self-administering the approved substance, or
 - (b) the person, having fully administered the approved substance, has expressed, verbally or by any other means, a desire not to die.
- (12B) The coordinating doctor is under a duty of care, identical to that with regard to the welfare of any other patient in circumstances outside the scope of this Act –
- (a) in circumstances requiring the provision of lifesaving care, to make all possible efforts to save the person’s life, including both by personally providing on-the-spot care and, where required, by arranging for the patient to be urgently taken to an appropriate hospital or other institution,
 - (b) to ensure in advance that the place where assistance is provided is an environment where, if circumstances requiring the provision of lifesaving care arise, such care can be provided without hindrance,
 - (c) to bring to the place where assistance is provided all necessary drugs, substances, medical implements, and other items which would be needed to save the life of someone who has partially or wholly taken the approved substance should circumstances requiring the provision of lifesaving care arise,
 - (d) to take all other steps as are necessary in the coordinating doctor’s judgment, or which are required by professional standards for competent medical practitioners to prepare, prior to providing assistance, for the possibility that circumstances requiring the provision of lifesaving care might arise, and

- (e) to fulfill any other duties with regards to lifesaving care as the Secretary of State, by regulations, specifies.
- (12C) Notwithstanding any other provision of this Act, in the event that circumstances requiring the provision of lifesaving care arise, the coordinating doctor and any other involved parties shall, both in regard to actions after the circumstances arise and in regard to any failures in preparation for such circumstances before they arise, be subject to the same framework for civil, criminal, and professional disciplinary liability in cases of incompetence, breach of duty, malpractice, or any other matter as applies to any registered medical practitioner (or other health professional) with regard to any patient under their care requiring lifesaving treatment.
- (12D) The Commissioner shall maintain and regularly publish statistics on the frequency of circumstances requiring the provision of lifesaving care and the outcomes in such cases.”

Member's explanatory statement

This amendment provides for the contingency that a person receiving assistance expresses, either after taking some or all of the approved substance, a desire not to die, or the procedure fails. In such cases, the amendment ensures that the person is entitled to the same standard of care as any other patient, by which a registered medical practitioner is obliged to seek to protect the patient's welfare, and most importantly, their life.

BARONESS FINLAY OF LLANDAFF

★

Clause 25, page 22, line 13, after “substance” insert “or mixture”

BARONESS HOLLINS
BARONESS O'LOAN

Clause 25, page 22, line 15, at end insert –

- “(14) The provision of assistance under this section to a person must be video recorded in its entirety.
- (15) The recording must include the person confirming –
 - (a) their identity and the identity of any person assisting,
 - (b) that they wish to die,
 - (c) that their decision is made of their own free will,
 - (d) that they have capacity to make the decision, and
 - (e) that they are acting without persuasion or coercion.
- (16) A copy of the recording must be provided to the coroner within 72 hours of the person's death.
- (17) The Secretary of State must by regulations make provision about the practical arrangements for recording, storage, transmission and information governance in relation to recordings made under this section.”

Member's explanatory statement

The amendment requires the assisted dying procedure to be video recorded and will allow confidential monitoring and review of the quality of consultations for governance purposes.

LORD CARLILE OF BERRIEW

Leave out Clause 25 and insert the following new Clause –

“Assistance with suicide

- (1) One of the independent persons appointed under section (*Assistance with suicide order*) must collect the lethal dosage of drugs from a registered pharmacy on a date agreed with the applicant.
- (2) The time between the collection of the lethal dosage of drugs by the independent person and the independent person providing the lethal dosage of drugs to the applicant must not exceed 24 hours.
- (3) The place at which the applicant takes receipt of and uses the lethal dosage of drugs must be the applicant's ordinary residence.
- (4) If following the collection of the lethal dosage of drugs the independent person is satisfied that the applicant continues to have a clear, settled and informed intention to take his or her life, the independent person must deliver and arrange as necessary –
 - (a) the lethal dosage of drugs to the applicant in the form specified in the assistance with suicide order, and
 - (b) any equipment to assist the applicant in taking his or her life using that lethal dosage.
- (5) The independent person must not assist the applicant in taking his or her life except in accordance with subsection (4).
- (6) The independent person must not permit any person other than the applicant to administer the lethal dosage of drugs.
- (7) Subject to subsection (8) the independent person must remain in the same room as the applicant until the applicant –
 - (a) has ingested the lethal dosage of drugs and died, or
 - (b) having decided not to ingest the lethal dosage of drugs, has returned the lethal dosage of drugs to the independent person.
- (8) If after a reasonable time following the independent person's arrival at the applicant's ordinary residence the applicant has not ingested the lethal dosage of drugs and is undecided whether to ingest the lethal dosage of drugs, the independent person may leave the applicant provided he or she has regained the lethal dosage of drugs.
- (9) An independent person who has regained possession and control of the lethal dosage of drugs must return it to the registered pharmacy from which it was

procured within such time as may be specified by regulations made by the Secretary of State.”

Member's explanatory statement

This proposed new Clause, and another in the name of Lord Carlile of Berriew, define the duties of the independent persons in relation to the assisted suicide.

After Clause 25

BARONESS GREY-THOMPSON
THE LORD BISHOP OF SOUTHWARK

After Clause 25, insert the following new Clause —

“Premises which may be used for the provision of assistance

- (1) The Secretary of State must, by regulations made by statutory instrument, stipulate on which premises an assisted death can occur, and if this is a public place must provide a certificate that must be renewed annually to be displayed on the premises, unless the premises is the person’s own home.
- (2) A certificate must be provided for hospitals or care homes where assisted deaths occur.
- (3) No hospice may provide assisted death on their premises.”

Clause 26

LORD FALCONER OF THOROTON

Clause 26, page 22, line 19, leave out “section 25” and insert “sections 25 and 28 to 30”

Member's explanatory statement

This amendment, and my amendment to this clause at page 22, line 32, provide that where the coordinating doctor authorises another practitioner to perform the functions under Clause 25, that practitioner also performs the reporting and recording functions relating to clause 25.

BARONESS FINLAY OF LLANDAFF
BARONESS BUTLER-SLOSS
BARONESS FOX OF BUCKLEY

Clause 26, page 22, line 24, at end insert —

“(aa) that practitioner has explicitly opted to undertake the functions under section 25, and”

Member's explanatory statement

This is to make the ‘opt-in’ for doctors explicit on the face of the Bill – to make clear that there is no expectation on doctors to participate and it is only those who positively choose to do so who would have the training and participate.

LORD MOYLAN
LORD CARLILE OF BERRIEW

Clause 26, page 22, line 28, leave out subsection (3)

Member's explanatory statement

This amendment seeks to ensure that subsequent provision on the training of doctors providing assistance cannot be issued unilaterally by a person specified in an initial regulation. Instead, subsequent provision on training must be made by regulations and would therefore be subject to continuing parliamentary scrutiny.

LORD FALCONER OF THOROTON

Clause 26, page 22, line 28, after “subsection (2)(b)” insert “—

- (a) must provide that the practitioner must have had training about the matters mentioned in section 8(8);
- (b) subject to that,”

Member's explanatory statement

This amendment provides that regulations under Clause 26(2)(b) must require a practitioner to have had the training mentioned in clause 8(8) in order to be capable of being authorised under this clause.

BARONESS FINLAY OF LLANDAFF

Clause 26, page 22, line 30, at end insert —

“(3A) Regulations under subsection (2)(b) must also provide that the practitioner must have passed a competency-based assessment after their training.”

LORD FALCONER OF THOROTON

Clause 26, page 22, line 32, leave out “section 25 applies” and insert “sections 25 and 28 to 30 apply”

Member's explanatory statement

See the explanatory statement for my amendment to this Clause at page 22, line 19.

LORD FALCONER OF THOROTON

Clause 26, page 23, line 1, leave out subsection (7)

Member's explanatory statement

This is consequential on my amendment to this Clause at page 22, line 28.

LORD CARLILE OF BERRIEW
BARONESS HOLLINS

The above-named Lords give notice of their intention to oppose the Question that Clause 26 stand part of the Bill.

Clause 27

LORD UDNY-LISTER

Clause 27, page 23, line 5, at end insert “, and in doing so, the Secretary of State must have regard to the purpose of the approved substance set out in subsection (1A).”

Member's explanatory statement

This amendment and another in the name of Lord Udney-Lister would make clear the purpose of the “approved substance”, which otherwise is defined solely by reference to the purpose of the Bill. They provide criteria by which the reasonableness of the decision of the Secretary of State may be assessed.

LORD UDNY-LISTER

Clause 27, page 23, line 5, at end insert —

“(1A) The purpose of the approved substance is to bring about the death of an adult swiftly, painlessly and with little risk of survival.”

Member's explanatory statement

This amendment and another in the name of Lord Udney-Lister would make clear the purpose of the “approved substance”, which otherwise is defined solely by reference to the purpose of the Bill. They provide criteria by which the reasonableness of the decision of the Secretary of State may be assessed.

LORD CARLILE OF BERRIEW

Leave out Clause 27 and insert the following new Clause —

“Lethal dosage of drugs

- (1) The Secretary of State must by regulations specify —
 - (a) the composition of the lethal dosage of drugs,
 - (b) the form and manner in which the lethal dosage of drugs is supplied to the independent person, and
 - (c) the manner and conditions under which the lethal dosage of drugs is dispensed, stored, transported and, in the event it is not used, disposed of for destruction.
- (2) The Secretary of State may by regulations specify more than one composition for the lethal dosage of drugs (together with the associated matters set out in subsections (1)(b) and (c)), and may by regulations remove or add such

compositions (together with those associated matters) specified in accordance with subsection (1).”

Member's explanatory statement

This proposed new Clause requires regulations to specify the drugs to be used in assisted suicide and allows for them to be updated through secondary legislation.

LORD GOODMAN OF WYCOMBE

Lord Goodman of Wycombe gives notice of his intention to oppose the Question that Clause 27 stand part of the Bill.

Member's explanatory statement

Lord Goodman seeks to probe why the term “approved substance” is not defined on the face of the Bill.

Clause 28

LORD CARLILE OF BERRIEW

Clause 28, page 23, line 15, leave out “coordinating doctor” and insert “independent person”

LORD CARLILE OF BERRIEW

Clause 28, page 23, line 19, leave out “coordinating doctor” and insert “independent person”

LORD CARLILE OF BERRIEW

Clause 28, page 23, line 20, leave out “coordinating doctor” and insert “independent person”

BARONESS GREY-THOMPSON

Clause 28, page 23, line 26, leave out “immediately”

LORD FALCONER OF THOROTON

Clause 28, page 23, line 26, leave out from “disability” to “(other” in line 27

Member's explanatory statement

This amendment is consequential on my amendment to Clause 56, page 40, line 39.

BARONESS GREY-THOMPSON

Clause 28, page 23, line 30, at end insert –

“(ca) proof of ID and the person’s National Insurance number;”

LORD CARLILE OF BERRIEW

Clause 28, page 23, line 33, leave out “coordinating doctor’s” and insert “independent person’s”

LORD CARLILE OF BERRIEW

Clause 28, page 23, line 36, leave out sub-paragraphs (ii) to (vi)

LORD CARLILE OF BERRIEW

Clause 28, page 24, line 3, leave out “approved substance” and insert “lethal dosage”

LORD CARLILE OF BERRIEW

Clause 28, page 24, line 5, leave out “approved substance” and insert “lethal dosage”

BARONESS GREY-THOMPSON

Clause 28, page 24, line 5, at end insert –

“(k) any complications or lack of complications.”

LORD CARLILE OF BERRIEW

Clause 28, page 24, line 6, leave out subsections (6) and (7) and insert –

“(6) The independent person must, as soon as practicable, inform a registered medical practitioner from the person’s GP practice of the making of the statement for recording in the person’s medical records.”

Clause 29

LORD CARLILE OF BERRIEW

BARONESS HOLLINS

The above-named Lords give notice of their intention to oppose the Question that Clause 29 stand part of the Bill.

Before Clause 30

BARONESS GREY-THOMPSON
BARONESS O'LOAN

Before Clause 30, insert the following new Clause –

“Record of length of time of death and any complications

- (1) After any assisted death under the provisions of this Act the coordinating doctor must update the person’s medical records with the length of time it took for the person to die after the approved substance was administered.
- (2) The update under subsection (1) in the person’s medical records must include information of any complications which occurred including any reawakening or vomiting.”

Clause 30

LORD CARLILE OF BERRIEW

Clause 30, page 24, line 36, leave out “coordinating doctor” and insert “independent person”

BARONESS GREY-THOMPSON

Clause 30, page 24, line 36, leave out “as soon as practicable” and insert “within 7 days”

LORD CARLILE OF BERRIEW

Clause 30, page 24, line 38, leave out subsections (3) and (4) and insert –

- “(3) The independent person must, as soon as practicable, inform a registered medical practitioner from the person’s GP practice that this has happened, for recording in the person’s medical records.”

BARONESS GREY-THOMPSON

Clause 30, page 24, line 39, leave out “as soon as practicable” and insert “within 7 days”

After Clause 30

BARONESS FOX OF BUCKLEY
BARONESS EATON

After Clause 30, insert the following new Clause —

“Assisted dying not to be regarded as medical treatment

The provision of assistance under this Act is not to be regarded as a medical treatment.”

Clause 31

BARONESS FINLAY OF LLANDAFF

- ★ Clause 31, page 25, line 9, leave out “is under any duty to” and insert “may”

BARONESS FINLAY OF LLANDAFF

Clause 31, page 25, line 9, after “participate in” insert “any aspect of the planning for or in”

Member's explanatory statement

This amendment, connected to another in the name of Baroness Finlay of Llandaff, seeks to clarify that involvement in assistance is wider than only the direct administration of lethal drugs.

BARONESS FINLAY OF LLANDAFF

- ★ Clause 31, page 25, line 9, leave out “assistance” and insert “assisted death”

BARONESS FINLAY OF LLANDAFF

Clause 31, page 25, line 10, at end insert “, or in any part of the post-death management.”

Member's explanatory statement

This amendment, connected to another in the name of Baroness Finlay of Llandaff, seeks to clarify that involvement in assistance is wider than only the direct administration of lethal drugs.

BARONESS FINLAY OF LLANDAFF

- ★ Clause 31, page 25, line 10, at end insert “as part of their health or social care employment”

BARONESS LAWLOR

Clause 31, page 25, line 10, at end insert –

- “(1A) No health professional or social care professional is under any duty to participate in training in relation to this Act.
- (1B) Official guidance on training must be published on the day on which this Act receives Royal Assent.
- (1C) Any health professional or social care professional who wishes to participate in training in relation to this Act, must give written consent in advance stating their desire to participate in such training.
- (1D) Any health professional or social care professional has the right to opt out of involvement in training for any activity involving, or related to, this Act.”

LORD CARLILE OF BERRIEW

Clause 31, page 25, line 11, leave out subsection (2)

BARONESS O'LOAN
LORD ALTON OF LIVERPOOL
LORD BIGGAR
BARONESS RITCHIE OF DOWNPATRICK

Clause 31, page 25, line 14, leave out “registered medical practitioner” and insert “person”

Member's explanatory statement

This amendment (and another in the name of Baroness O'Loan) seeks to provide for a comprehensive conscience protection, allowing any person to opt out of any activity which may facilitate assisted suicide, including any ancillary functions.

LORD CARLILE OF BERRIEW

Clause 31, page 25, line 14, leave out “, other than the coordinating doctor or the independent doctor,”

BARONESS FINLAY OF LLANDAFF

★

Clause 31, page 25, line 14, leave out from “practitioner,” to “is” in line 15

BARONESS O'LOAN
LORD ALTON OF LIVERPOOL
LORD BIGGAR
BARONESS RITCHIE OF DOWNPATRICK

Clause 31, page 25, line 19, at end insert —

- “(3A) For the purposes of subsection (3), a reference to performing any function under or in connection with this Act includes any activity which facilitates any aspect of assisted dying under or in connection with the provisions of this Act, including but not limited to—
- (a) administrative or managerial tasks, such as the allocation of staff to carry out duties under the Act,
 - (b) the supervision of staff as they carry out duties under the Act, and
 - (c) the accompanying and monitoring of a patient as they receive or after they have received the approved substance.”

Member's explanatory statement

This amendment (and another in the name of Baroness O'Loan) seeks to provide for a comprehensive conscience protection, allowing any person to opt out of any activity which may facilitate assisted suicide, including any ancillary functions.

LORD CARLILE OF BERRIEW

Clause 31, page 25, line 20, leave out subsection (4)

LORD CARLILE OF BERRIEW

Clause 31, page 25, line 25, leave out “section 25” and insert “new section (*Assistance with suicide*)”

BARONESS FRASER OF CRAIGMADDIE
LORD CARLILE OF BERRIEW
LORD HUNT OF KINGS HEATH
THE LORD BISHOP OF SOUTHWARK

Clause 31, page 25, line 25, at end insert —

- “(5A) Any health or care worker, regardless of whether they are registered or unregistered, or domestic or ancillary and any other staff in a health or social care facility, may refuse to participate, without penalty, in any aspect of assisted dying under or in connection with the provisions of this Act.”

After Clause 31

BARONESS KEELEY
BARONESS GOUDIE
THE LORD BISHOP OF LONDON
LORD CARLILE OF BERRIEW

After Clause 31, insert the following new Clause—

“No obligation to provide assistance: care homes and hospices

No care home or hospice which is regulated—

- (a) by the Care Quality Commission in England, or
- (b) by Care Inspectorate Wales in Wales,

is under any duty to participate in the provision of any assistance or the performance of any function under or in connection with this Act.”

Member's explanatory statement

This amendment seeks to ensure there is no obligation on a care home or hospice in England or Wales to permit the provision of assistance in accordance with this Act on their premises.

BARONESS FRASER OF CRAIGMADDIE
BARONESS FOX OF BUCKLEY
LORD HUNT OF KINGS HEATH

After Clause 31, insert the following new Clause—

“No obligation to provide assistance: GP services

No GP service registered in England or Wales is under any duty to participate in the provision of any assistance or the performance of any function under or in connection with this Act.”

BARONESS FRASER OF CRAIGMADDIE
BARONESS FOX OF BUCKLEY
LORD HUNT OF KINGS HEATH

After Clause 31, insert the following new Clause—

“No obligation to provide assistance: charity services

No charity registered with the Charity Commission in England or Wales is under any duty to participate in the provision of any assistance or the performance of any function under or in connection with this Act.”

BARONESS FRASER OF CRAIGMADDIE
BARONESS FOX OF BUCKLEY
LORD HUNT OF KINGS HEATH

After Clause 31, insert the following new Clause —

“No obligation to provide assistance: carer organisations or any other third sector or private businesses

No carer organisations or any other third sector or private business involved in supporting adults with long term conditions in England or Wales is under any duty to participate in the provision of any assistance or the performance of any function under or in connection with this Act.”

BARONESS GREY-THOMPSON
BARONESS O'LOAN
BARONESS BUTLER-SLOSS
LORD MOYLAN

After Clause 31, insert the following new Clause —

“Organisational conscientious objection

- (1) No company, charity, or other organisation is under any duty to participate in, facilitate, or permit on its premises the provision of assistance in accordance with this Act.
- (2) No company, charity, or other organisation shall be required, as a condition of receiving funding or any other benefit from any public body, to participate in, facilitate, or permit on its premises the provision of assistance in accordance with this Act.
- (3) This section does not apply to NHS bodies.”

BARONESS HOLLINS

After Clause 31, insert the following new Clause —

“Specialist register for clinical psychologists to participate in the operation of this Act

- (1) No clinical psychologist may at any time be required, whether directly or indirectly, to participate in any aspect of the operation of this Act unless they have formally and voluntarily opted in to do so.
- (2) A clinical psychologist must not carry out any function under this Act unless the psychologist is entered in the Specialist Register for Assisted Dying kept by the Health and Care Professions Council.
- (3) The Secretary of State must by regulations make provision for the Health and Care Professions Council to —

- (a) establish and maintain the Specialist Register for Assisted Dying for clinical psychologists, and
- (b) determine and publish the criteria (including training, qualifications and experience) for entry in the register under (3)(a)."

LORD GOODMAN OF WYCOMBE

After Clause 31, insert the following new Clause —

“Conscientious objection to participation in the provision of assisted dying services

- (1) No person shall be under any duty, whether by contract or by any statutory or other legal requirement, to participate in any service authorised by this Act to which they have a conscientious objection, provided that in any legal proceedings the burden of proof of conscientious objection shall rest on the person claiming to rely on it.
- (2) The Secretary of State must by regulations made by statutory instrument issue detailed protocols for the protection of medical professionals under this section, including ensuring they are not indirectly pressured to participate in the provision of assisted dying services in accordance with this Act.
- (3) The Secretary of State must undertake a consultation before making regulations under subsection (2).”

Member's explanatory statement

Subsection (1) of the new clause inserted by this amendment mirrors the wording of section 4 of the Abortion Act 1967. The amendment seeks to ensure that conscientious objection to this Bill is protected in law and that Secretary of State publishes guidance on how this is to be respected in practice, following a public consultation.

Clause 33

BARONESS GREY-THOMPSON

Clause 33, page 27, line 9, at end insert —

- “(d) providing advice or assistance, or doing any other thing, as a result of which a person decides not to end their own life.”

BARONESS GREY-THOMPSON

Clause 33, page 27, line 17, after “so,” insert “or to decide not to do so,”

After Clause 33

LORD GOODMAN OF WYCOMBE

After Clause 33, insert the following new Clause —

“Support programmes for health professionals involved in providing assistance

- (1) The Secretary of State must provide funding to establish support programmes for health professionals who provided assistance under this Act.
- (2) Support programmes under subsection (1) must include provision of counselling and peer support groups.”

Member's explanatory statement

This amendment seeks to establish a support programme for health professionals involved in providing assistance, ensuring that they have access to counselling and peer support groups.

BARONESS HOLLINS

★

After Clause 33, insert the following new Clause —

“Support for healthcare professionals

Secretary of State must ensure that all healthcare professionals involved, whether directly or indirectly, in the assessment, authorisation, or provision of assistance under this Act —

- (a) have access to appropriate supervision and support, including where necessary personal therapy,
- (b) receive such supervision and support in accordance with the standards determined by their respective professional regulatory bodies, and
- (c) are provided with such supervision and support free of charge, with costs met by the Secretary of State.”

Member's explanatory statement

This amendment ensures that healthcare professionals involved in assisted dying receive appropriate supervision and psychological support, including personal therapy where required.

Clause 34

LORD CARLILE OF BERRIEW

Clause 34, page 27, line 21, leave out “or second”

LORD CARLILE OF BERRIEW

Clause 34, page 27, line 24, leave out “an approved substance” and insert “a lethal dosage”

Clause 35

LORD CARLILE OF BERRIEW

Clause 35, page 27, line 35, leave out “first”

LORD CARLILE OF BERRIEW

Clause 35, page 27, line 36, leave out sub-paragraphs (ii) and (iii)

LORD CARLILE OF BERRIEW

Clause 35, page 27, line 38, leave out “first”

LORD CARLILE OF BERRIEW

Clause 35, page 27, line 38, leave out “or a second declaration”

LORD CARLILE OF BERRIEW

Clause 35, page 28, line 9, leave out paragraph (a)

After Clause 35

BARONESS GREY-THOMPSON

After Clause 35, insert the following new Clause –

“False declaration under subsection 11(9A)

- (1) A person who makes a false declaration under the terms of section 11(9A) commits an offence.
- (2) A person who commits an offence under subsection (1) is liable on conviction on indictment for a term not exceeding five years or a fine or both.”

LORD HUNT OF KINGS HEATH

As an amendment to the amendment in the name of Baroness Grey-Thompson to After Clause 35

In subsection (2) leave out “five” and insert “10”

Clause 36

LORD CARLILE OF BERRIEW

Clause 36, page 28, line 23, leave out “first”

LORD CARLILE OF BERRIEW

Clause 36, page 28, line 24, leave out sub paragraphs (ii) and (iii)

LORD CARLILE OF BERRIEW

Clause 36, page 28, line 28, leave out paragraph (c)

Clause 37

BARONESS FINLAY OF LLANDAFF

★ Clause 37, page 28, line 38, leave out “approved substances.” and insert “substances, and such regulations must be consistent with—

- (a) the requirements of the Medicines and Healthcare products Regulatory Agency (MHRA);
- (b) where applicable, the requirements of the Home Office in relation to the manufacture, possession, supply, and disposal of controlled drugs under the Misuse of Drugs Act 1971 and associated regulations.”

BARONESS HOLLINS

Clause 37, page 28, line 39, at end insert “, and such regulations must be consistent with—

- “(a) the requirements of the Medicines and Healthcare products Regulatory Agency (MHRA);
- (b) where applicable, the requirements of the Home Office in relation to the manufacture, possession, supply, and disposal of controlled drugs under the Misuse of Drugs Act 1971 and associated regulations.”

Member's explanatory statement

This amendment and another in the name of Baroness Hollins aligns regulation of approved substances with MHRA standards and, where relevant, Home Office controlled drugs requirements, ensuring consultation and consistency with existing medicines and controlled substances frameworks.

LORD UDNY-LISTER

Clause 37, page 28, line 39, at end insert—

- “(1A) In doing so, the Secretary of State must have regard to the criteria set out in section 27(1A).
- (1B) Prior to making regulations under this Clause, the Secretary of State must make inquiries of appropriate authorities in—
 - (a) jurisdictions abroad that permit assisted dying, and

- (b) parts of the United States that administer capital punishment by lethal injection,
the purpose of which is to establish which combination of drugs or substances may in practice best meet the criteria in section 27(1A).
- (1C) In making the regulations the Secretary of State must set out in a statement laid before both Houses of Parliament their reasons for believing that the permitted combination meets the criteria and what level of risk they have been willing to accept that it might not do so in all cases.
- (1D) If the Secretary of State approves more than one combination of drugs or substances, they must specify in the regulations in which cases each combination is to be used.
- (1E) If the Secretary of State cannot identify a combination of drugs or substances that meet the criteria in section 27(1A) to their satisfaction, they must not issue regulations under this section.”

Member's explanatory statement

The purpose of these new subsections is to oblige the Secretary of State to take a transparent, evidence-based approach to the selection of the approved substance (or substances) and to be open about the risks of their not being fully effective in all cases.

BARONESS GREY-THOMPSON

Clause 37, page 29, line 1, at end insert –

“(za) the clinical trials required for a drug to be used as an approved substance;”

BARONESS GREY-THOMPSON

Clause 37, page 29, line 6, at end insert –

- “(d) the regulation of the approval process and regulatory body that will administer the approved substances;
- (e) the process for clinical trials that will take place before any substance is approved for use under the provisions of this Act.”

BARONESS FINLAY OF LLANDAFF

- ★ Clause 37, page 29, line 15, at beginning insert “only”

BARONESS FINLAY OF LLANDAFF

- ★ Clause 37, page 29, line 15, leave out from “that” to “the” in line 16 and insert “have received approval in”

BARONESS FINLAY OF LLANDAFF

- ★ Clause 37, page 29, line 20, leave out “also” and insert “not”

BARONESS FINLAY OF LLANDAFF

- ★ Clause 37, page 29, line 21, leave out “may” and insert “must”

BARONESS FINLAY OF LLANDAFF

- ★ Clause 37, page 29, line 23, after “substances” insert “and which have Medicines and Healthcare products Regulatory Agency approval for this purpose”

BARONESS HOLLINS

Clause 37, page 29, line 25, at end insert —

“(6A) The Secretary of State must consult the MHRA and the Home Office where applicable before making any regulations under this section.

(6B) In exercising powers under this section, the Secretary of State must have regard to any guidance issued by the MHRA and the Home Office regarding the safe use, storage, administration and disposal of pharmaceutical substances, including controlled substances.”

Member's explanatory statement

This amendment and another in the name of Baroness Hollins aligns regulation of approved substances with MHRA standards and, where relevant, Home Office controlled drugs requirements, ensuring consultation and consistency with existing medicines and controlled substances frameworks.

BARONESS FINLAY OF LLANDAFF

- ★ Clause 37, page 29, line 26, leave out subsection (7)

LORD CARLILE OF BERRIEW
LORD GOODMAN OF WYCOMBE
BARONESS HOLLINS

The above-named Lords give notice of their intention to oppose the Question that Clause 37 stand part of the Bill.

After Clause 37

BARONESS HOLLINS
BARONESS O'LOAN

After Clause 37, insert the following new Clause –

“List of approved substances maintained by Voluntary Assisted Dying Commissioner

- (1) The Commissioner must, in accordance with their functions under section 4, maintain a list of approved substances authorised for use under this Act.
- (2) The Commissioner must work collaboratively with the Medicines and Healthcare products Regulatory Agency (MHRA) and Home Office to establish the most suitable substance for the purposes of this Act.
- (3) A substance may be included on the list under subsection (1) only if the Commissioner is satisfied that –
 - (a) the substance is supported by sufficient evidence of efficacy and safety, for the purpose of voluntary assisted death, based on contemporary pharmacological evaluation standards,
 - (b) the method of self-administration is reliable and within the capacity of the patient to undertake voluntarily, and
 - (c) appropriate protocols exist for preparation, labelling, handling, storage, and disposal.
- (4) The Commissioner must publish the list of approved substances and review it at least annually, or more frequently as required by emerging evidence or safety concerns.
- (5) All substances used for purposes under this Act will be subject to the MHRA yellow card monitoring pharmacovigilance framework.
- (6) In this Act, “approved substance” means a substance included on the list published by the Commissioner under this section.”

Member's explanatory statement

The amendment requires the Commissioner, in collaboration with MHRA and the Home Office, to establish, maintain and publish a list of approved substances to be used for the purposes of assisted dying under this Act.

BARONESS HOLLINS

After Clause 37, insert the following new Clause –

“Standards for registered medical practitioners prescribing approved substances

- (1) No registered medical practitioner may prescribe a substance under this Act unless it has been –
 - (a) duly licensed and approved by the appropriate regulatory authority, and

- (b) supported by sufficient clinical evidence demonstrating its safety, quality, and efficacy for use in assisted suicide under the standards set out in subsection (3).
- (2) A registered medical practitioner prescribing under this Act must comply with Regulation 12 (safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 (S.I. 2014/2938).
- (3) The Secretary of State must by regulations make provision for the standards and evidential requirements to be applied for the purposes of subsection (1), and such standards must be consistent with relevant guidance issued by the General Medical Council.”

Member's explanatory statement

This amendment requires standards to be in place for doctors prescribing approved substances.

BARONESS HOLLINS

After Clause 37, insert the following new Clause –

“Clinical trials for new approved substances

- (1) The Secretary of State must take such steps as are necessary to enable and support the development of sufficient clinical evidence for any substance intended to be designated as an approved substance under this Act.
- (2) Steps under subsection (1) may include supporting the establishment and funding of clinical trials or other evidence-gathering studies necessary to assess the safety, efficacy, and appropriateness of such substances for use in assisted dying.
- (3) The Secretary of State must by regulations make provision about –
 - (a) the criteria for initiating or funding such studies,
 - (b) the roles of relevant bodies in supporting research, and
 - (c) any ethical and regulatory standards to be met in the design and conduct of such trials and studies.
- (4) No substance may be approved or designated as an approved substance under this Act until such trials have been conducted, the evidence has been evaluated, and it is determined to be consistent with modern pharmacovigilance standards.
- (5) Research and clinical trials conducted for the purposes of this section must be fully funded by the Government.”

Member's explanatory statement

This amendment places a duty on the Government to fund and support clinical trials to establish evidence of safety and efficacy for substances before they can be approved for use under the Act.

Clause 38

BARONESS GREY-THOMPSON

Clause 38, page 29, line 32, leave out subsection (1)

LORD SANDHURST
LORD CARLILE OF BERRIEW
BARONESS O'LOAN
BARONESS FOX OF BUCKLEY

Clause 38, page 29, line 32, leave out subsection (1) and insert —

- “(1) Every death resulting from the provision of assistance under this Act must be notified to both a medical examiner and the relevant senior coroner.
- (1A) The coroner must decide, in accordance with the Coroners and Justice Act 2009, whether to carry out an investigation.
- (1B) For the avoidance of doubt, nothing in this Act excludes a death under its provisions from being treated as an “unnatural death”.”

Member's explanatory statement

This will remove the bar to investigation and involvement on the part of coroners and medical examiners.

BARONESS COFFEY

Clause 38, page 29, line 34, leave out “does not include” and insert “includes”

LORD HENDY

Clause 38, page 29, line 38, at end insert —

- “(7B) In this Chapter a reference to an “unnatural death” includes a death caused by the self-administration by the deceased of an approved substance, within the meaning of the Terminally Ill Adults (End of Life) Act 2025, that was provided to the deceased in accordance with that Act, where the terminal illness within the meaning of that Act is unnatural.”

Member's explanatory statement

This amendment is intended to give Coroners the jurisdiction to investigate assisted deaths under the Act but on a discretionary and not a mandatory basis.

BARONESS GREY-THOMPSON

Clause 38, page 30, line 1, leave out “that Act” and insert “the Coroners and Justice Act 2009”

LORD HENDY

Clause 38, page 30, line 18, leave out from “be” to the end of line 20 and insert “the illness or disease which caused the person to be terminally ill within the meaning of that Act, and —

“(b) contain a record stating that the death was an assisted death.”

LORD MOYLAN

Clause 38, page 30, line 18, leave out the second “death” and insert “suicide”

Member's explanatory statement

This amendment seeks to clarify the distinction between death as a result of this Bill and death under palliative care.

BARONESS FINLAY OF LLANDAFF

Clause 38, page 30, line 20, at end insert “, and any injury or exposure to a potentially harmful substance or radiation or environment that caused that illness or disease”

BARONESS GREY-THOMPSON

★ Clause 38, page 30, line 20, at end insert —

“(c) contain a record of any other impairment at the time of their death.”

LORD GOODMAN OF WYCOMBE

Lord Goodman of Wycombe gives notice of his intention to oppose the Question that Clause 38 stand part of the Bill.

Member's explanatory statement

This amendment, and others in the name of Lord Goodman, seek to give effect to the recommendations set out in the Delegated Powers and Regulatory Reform Committee's report into the Bill.

After Clause 38

BARONESS GREY-THOMPSON

After Clause 38, insert the following new Clause —

“Post-mortems and diagnosis of terminal illness

- (1) Every death resulting from the provision of assistance under this Act must be notified to both a medical examiner and the relevant senior coroner.

- (2) A senior coroner must request a post-mortem is carried out to confirm the diagnosis of terminal illness as defined in section 2.
- (3) The Secretary of State must ensure that data from post-mortems under subsection (2) is collected and made publicly accessible.”

LORD CARLILE OF BERRIEW

After Clause 38, insert the following new Clause –

“Death certification

In the Births and Deaths Registration Act 1953, after section 39A (regulations made by the Minister: further provisions), insert –

“39B Regulations: assisted suicide

- (1) The Minister may make regulations –
 - (a) providing for any provision of this Act relating to the registration of deaths to apply in respect of deaths which occur in accordance with the Terminally Ill Adults (End of Life) Act 2025 with such modifications as may be prescribed in respect of –
 - (i) the information which is to be provided concerning such deaths,
 - (ii) the form and manner in which the cause of such deaths is to be certified, and
 - (iii) the form and manner in which such deaths are to be registered,
 - (b) requiring the Registrar General to prepare a report at least once each year providing a statistical analysis of deaths which have occurred in accordance with the Terminally Ill Adults (End of Life) Act 2025, and
 - (c) containing such incidental, supplemental and transitional provisions as the Minister considers appropriate.
- (3) Any regulations made under subsection (1)(a)(ii) shall provide for the cause of death to be recorded as “assisted suicide by Court order”.
- (4) The power of the Minister to make regulations under this section is exercisable by statutory instrument.
- (5) A statutory instrument containing regulations made under this section is subject to annulment in pursuance of a resolution of either House of Parliament.””

Clause 39

BARONESS EATON
LORD CARLILE OF BERRIEW

Clause 39, page 30, line 35, at end insert —

- “(iii) the circumstances in which it would not be appropriate for a person to be advised to consider discussing the request with their next of kin and other persons they are close to under section 12(2)(g);”

Member's explanatory statement

This amendment would require the Secretary of State to give guidance on when an assessing doctor might not consider it appropriate to advise a person to discuss their request for an assisted death with their loved ones, as part of the Code of Practice on the assessment on whether a person has a clear, settled and informed wish to end their own life.

LORD SANDHURST

Clause 39, page 30, line 35, at end insert —

- “(aa) the assessment of whether a person has made the decision that they wish to end their own life voluntarily and has not been coerced or pressured by any other person into making it, including recognising coercion and pressure by any other person;”

Member's explanatory statement

This amendment, which is suggested by the Law Society of England and Wales, would require the Secretary of State to issue a code of practice in connection with the assessment of whether a person has made the decision that they wish to end their own life voluntarily and has not been coerced or pressured by any other person into making it.

LORD CARLILE OF BERRIEW

Clause 39, page 30, line 36, leave out “as mentioned in sections 5 and 12”

LORD CARLILE OF BERRIEW

Clause 39, page 30, line 38, leave out “under section 12”

LORD CARLILE OF BERRIEW

Clause 39, page 31, line 4, leave out “approved substances” and insert “a lethal dosage”

LORD CARLILE OF BERRIEW

Clause 39, page 31, line 8, leave out “an independent advocate under section 22” and insert “the independent practitioner under subsection (5) of section (*Court proceedings and orders*)”

LORD CARLILE OF BERRIEW

Clause 39, page 31, line 14, leave out “section 9” and insert “this Act”

LORD GOODMAN OF WYCOMBE

Clause 39, page 31, line 15, leave out subsection (2)

Member's explanatory statement

This amendment, and others in the name of Lord Goodman, seek to give effect to the recommendations set out in the Delegated Powers and Regulatory Reform Committee's report into the Bill.

LORD SANDHURST

Clause 39, page 31, line 26, leave out subsection (7) and insert—

- “(7) If it appears to a court or tribunal conducting any criminal or civil proceedings that—
- (a) a provision of a code, or
 - (b) a failure to comply with a code,
- is relevant to a question arising in the proceedings, the provision or failure must be taken into account in deciding the question.”

Member's explanatory statement

This amendment, which is suggested by the Law Society of England and Wales, requires an assessor to take into account any provision of a code of practice or failure to comply with a code of practice during any criminal or civil proceedings, bringing the Bill in line with the like provision in the Mental Capacity Act.

Clause 40

LORD GOODMAN OF WYCOMBE

Clause 40, page 31, line 30, at end insert—

- “(1A) Guidance issued under subsection (1) cannot be published until the Secretary of State by regulations made by statutory instrument so provides.
- (1B) When draft regulations are laid before Parliament in accordance with section 54, the guidance to which they relate must also be laid before Parliament.”

Member's explanatory statement

This amendment seeks to ensure that guidance issued under Clause 40 is subject to the affirmative resolution procedure in Parliament.

LORD GOODMAN OF WYCOMBE

Clause 40, page 31, line 30, at end insert —

“(1A) The guidance must include information on how assisted dying services are to be integrated with existing NHS palliative care services.”

Member's explanatory statement

This amendment seeks to ensure that guidance issued under Clause 40 includes information on how assisted dying services are to be integrated with existing NHS palliative care services.

BARONESS COFFEY

Clause 40, page 31, line 31, leave out subsection (2)

BARONESS COFFEY

Clause 40, page 31, line 36, leave out paragraph (b)

LORD REES OF EASTON

Clause 40, page 31, line 37, after “disabilities” insert “, persons from Black, Asian and Minority Ethnic communities,”

Member's explanatory statement

This amendment would specifically require the Secretary of State to consult people from BAME communities before issuing guidance relating to the operation of the Bill.

BARONESS COFFEY

Clause 40, page 32, line 1, leave out paragraph (e)

BARONESS COFFEY

Clause 40, page 32, line 4, leave out subsections (4) to (6)

LORD REES OF EASTON
LORD GOODMAN OF WYCOMBE

Clause 40, page 32, line 14, after “disabilities” insert “, persons from Black, Asian and Minority Ethnic communities,”

Member's explanatory statement

This amendment would specifically require the Welsh Ministers to consult people from BAME communities before issuing guidance relating to the operation of the Bill.

BARONESS COFFEY

Clause 40, page 32, line 20, leave out “an appropriate national authority” and insert “the Secretary of State”

LORD SANDHURST

Clause 40, page 32, line 25, leave out “next of kin and families of such persons” and insert “relatives of and other persons who have an interest in the welfare of such persons”

Member's explanatory statement

This amendment, suggested by the Law Society of England and Wales, relates to the requirement that the Chief Medical Officers have regard to the need to provide practical and accessible information, advice and guidance. It replaces “next of kin” with “relatives” of persons requesting or considering requesting assistance, a defined term in the Bill, as well as other persons with an interest in the person’s welfare.

BARONESS COFFEY

Clause 40, page 32, line 27, leave out “An appropriate national authority” and insert “The Secretary of State”

BARONESS COFFEY

Clause 40, page 32, leave out lines 30 and 31

Clause 41

LORD GOODMAN OF WYCOMBE

Clause 41, page 32, line 40, at end insert —

“(2A) Before making regulations under this section, the Secretary of State must undertake a public consultation on arrangements for the provision of voluntary assisted dying services in England.”

Member's explanatory statement

This amendment seeks to ensure that the Secretary of State undertakes a public consultation before regulating for the provision of voluntary assisted dying services in England.

LORD GOODMAN OF WYCOMBE

Clause 41, page 32, line 40, at end insert –

“(2A) Within one month of the day on which this Act is passed, the Secretary of State must specify the bodies to provide voluntary assisted dying services in England.”

Member's explanatory statement

This amendment seeks to ensure that the Secretary of State specifies which organisations will provide assisted dying services in England within one month of the Act passing.

BARONESS BROWN OF SILVERTOWN

Clause 41, page 33, line 4, leave out subsections (4) and (5) and insert –

“(4) Regulations under subsection (1) may not amend, modify or repeal section 1 of the National Health Service Act 2006, except in that they may provide that section 1(4) of that Act (services to be provided free of charge except where charging expressly provided for) applies in relation to commissioned VAD services.”

Member's explanatory statement

This amendment would mean that the Secretary of State would not have the power to use regulations to amend section 1 of National Health Service Act 2006 to include assisted dying in the duty to promote a comprehensive health service.

LORD MACKINLAY OF RICHBOROUGH

Clause 41, page 33, line 4, leave out subsection (4) and insert –

“(4) Regulations under this section must prohibit the involvement of the National Health Service in the provision of voluntary assisted dying services in England (whether or not the services are commissioned VAD services).”

Member's explanatory statement

The amendment, linked with others in the name of Lord Mackinlay of Richborough seeks to prohibit any service under the Bill from being provided by the NHS.

BARONESS FINLAY OF LLANDAFF

Clause 41, page 33, line 10 at end insert –

- “(b) provision of assistance under this Act is provided through a distinct administrative process which does not form part of NHS services,
- (c) “commissioned VAD services” cannot form part of, or be classified as, core general medical services provided by general practitioners under section 83 of the National Health Service Act 2006 (primary medical services), and
- (d) any provision of “commissioned VAD services” does not create any contractual or statutory obligations ordinarily applicable to providers of primary, secondary or tertiary medical services.”

Member's explanatory statement

This amendment seeks to ensure that any “commissioned VAD services” established under this Act (1) must be delivered through a distinct pathway, (2) cannot form part of core general medical services provided by general practitioners and (3) does not create any contractual or statutory obligations for providers of medical services.

BARONESS KEELEY
BARONESS GOUDIE
THE LORD BISHOP OF LONDON
LORD CARLILE OF BERRIEW

Clause 41, page 33, line 10, at end insert –

- “(5A) Regulations under this section may not make any provision that would place any duty on a care home or hospice regulated by the Care Quality Commission to perform any function under or in connection with this Act on their premises.”

Member's explanatory statement

This amendment seeks to ensure there is no obligation on a care home or hospice in England to permit the provision of assistance in accordance with this Act on their premises.

BARONESS CASS
LORD HUNT OF KINGS HEATH

Clause 41, page 33, line 10, at end insert –

- “(5A) If regulations under this section provide for the involvement of the National Health Service in the provision of services under this Act, those regulations must also specify that the services must be commissioned through the specialised commissioning process under section 3B of the National Health Service Act 2006 (Secretary of State’s power to require NHS England to commission services).”

Member's explanatory statement

This amendment seeks to ensure that the delivery of any services by the NHS under this Bill is subject to the specialised commissioning governance processes. These include a defined national service specification, oversight, assurance and audit.

BARONESS GREY-THOMPSON

Clause 41, page 33, line 10, at end insert –

- “(5A) Regulations under this section must provide that each NHS region must publish the average cost per death for persons who have died under the provisions of this Act.”

LORD GOODMAN OF WYCOMBE

Clause 41, page 33, line 11, leave out subsection (6)

Member's explanatory statement

This amendment, and others in the name of Lord Goodman, seek to give effect to the recommendations set out in the Delegated Powers and Regulatory Reform Committee's report into the Bill.

BARONESS BROWN OF SILVERTOWN
BARONESS GREY-THOMPSON

Clause 41, page 33, line 12, at end insert—

- “(6A) Regulations under this section must provide that, where a body other than a public authority provides voluntary assisted dying services under subsection (1), that body must publish an annual statement that includes information on the following—
- (a) the number of persons to whom the body has provided a preliminary discussion under section 5(3);
 - (b) the number of persons whom the body has assessed under section 10(1);
 - (c) the number of persons whom the body has assessed under section 11(1);
 - (d) the number of persons to whom assistance has been provided under section 25(2);
 - (e) the cost and revenue associated with providing such assistance;
 - (f) any other matter that the Secretary of State may specify.”

Member's explanatory statement

This amendment would require private providers to publish annual statements of the numbers of people assisted at each stage, and their associated costs and revenue.

LORD CARLILE OF BERRIEW
BARONESS HOLLINS

The above-named Lords give notice of their intention to oppose the Question that Clause 41 stand part of the Bill.

Clause 42

LORD GOODMAN OF WYCOMBE

Clause 42, page 33, line 20, at end insert—

- “(1A) Within one month of the day on which this Act is passed, the Secretary of State must specify the bodies to provide voluntary assisted dying services in Wales.”

Member's explanatory statement

This amendment seeks to ensure that the Secretary of State specifies which organisations will provide assisted dying services in Wales within one month of the Act passing.

LORD MACKINLAY OF RICHBOROUGH

Clause 42, page 33, line 24, at end insert—

“(2A) Regulations under this section must prohibit the involvement of NHS Wales in the provision of voluntary assisted dying services in Wales.”

Member's explanatory statement

The amendment, linked with others in the name of Lord Mackinlay of Richborough seeks to prohibit any service under the Bill from being provided by the NHS.

BARONESS FINLAY OF LLANDAFF

Clause 42, page 33, line 25, leave out subsections (3) and (4)

Member's explanatory statement

This is to ensure decisions by the Senedd, under devolved competencies, are respected and Westminster cannot impose legislative changes without revision of the Government of Wales Act in consultation with the Senedd.

LORD GOODMAN OF WYCOMBE

Clause 42, page 33, line 27, leave out subsection (4)

Member's explanatory statement

This amendment, and others in the name of Lord Goodman, seek to give effect to the recommendations set out in the Delegated Powers and Regulatory Reform Committee's report into the Bill.

BARONESS KEELEY
BARONESS GOUDIE
THE LORD BISHOP OF LONDON
LORD CARLILE OF BERRIEW

Clause 42, page 33, line 30, at end insert—

“(4A) Regulations under this section may not make any provision that would place any duty on a care home or hospice regulated by Care Inspectorate Wales to perform any function under or in connection with this Act on their premises.”

Member's explanatory statement

This amendment seeks to ensure there is no obligation on a care home or hospice in Wales to permit the provision of assistance in accordance with this Act on their premises.

BARONESS COFFEY
LORD CARLILE OF BERRIEW

The above-named Lords give notice of their intention to oppose the Question that Clause 42 stand part of the Bill.

After Clause 42

BARONESS MONCKTON OF DALLINGTON FOREST
LORD CARLILE OF BERRIEW
BARONESS O'LOAN
BARONESS BUTLER-SLOSS

After Clause 42, insert the following new Clause –

“Hospices: ban on participation in assisted dying services

No hospice or care home may perform any function under or in connection with this Act.”

LORD MACKINLAY OF RICHBOROUGH

After Clause 42, insert the following new Clause –

“NHS: ban on participation in assisted dying services

NHS England and NHS Wales may not perform any function under or in connection with this Act.”

Member's explanatory statement

The amendment, linked with others in the name of Lord Mackinlay of Richborough seeks to prohibit any service under the Bill from being provided by the NHS.

LORD GOODMAN OF WYCOMBE

After Clause 42, insert the following new Clause –

“Hospices and care homes: no obligation to provide assistance

No hospice or care home is required to perform any function under or in connection with this Act.”

Member's explanatory statement

This amendment seeks to ensure that no hospice or care home is required to assist in the provision of an assisted death.

Clause 43

LORD GOODMAN OF WYCOMBE

- ★ Clause 43, page 34, line 5, leave out “a voluntary assisted dying service” and insert “voluntary assisted dying”

Member's explanatory statement

The aim of the amendment is to ensure that advertising for voluntary assisted dying itself is prohibited – and not only, as the wording of this part of the clause seems to suggest, voluntary assisted dying services only.

BARONESS RITCHIE OF DOWNPATRICK

BARONESS GOUDIE

LORD CARLILE OF BERRIEW

Clause 43, page 34, line 9, leave out from “exceptions” to end of line 10 and insert “for the following types of advertising –

- (a) communication made in reply to a particular request by an individual for information about a voluntary assisted dying service;
- (b) communication which is –
 - (i) intended for health professionals or providers of voluntary assisted dying services, and
 - (ii) made in a manner and form unlikely to be seen by potential service users.”

Member's explanatory statement

This amendment requires exceptions to the prohibition of advertising to be set out on the face of the Bill.

BARONESS RITCHIE OF DOWNPATRICK

BARONESS GOUDIE

LORD CARLILE OF BERRIEW

BARONESS O'LOAN

Clause 43, page 34, line 14, after “Act” insert “or the Suicide Act 1961”

Member's explanatory statement

This amendment would ensure that the Suicide Act 1961 may not be amended by the power to make regulations under this section.

After Clause 44

LORD GOODMAN OF WYCOMBE

After Clause 44, insert the following new Clause—

“Notifications of refusals to Commissioner

- (1) The Secretary of State must by regulations make provision requiring a registered medical practitioner to notify the Commissioner when a request for assistance has been refused.
- (2) Regulations under this section must—
 - (a) specify that notifications under subsection (1) must include the reason for the refusal;
 - (b) specify the manner in which a notification must be given;
 - (c) make provision about enforcement of the regulations.”

Member's explanatory statement

This amendment seeks to ensure that medical practitioners must notify the Commissioner in instances where they refuse a request for an assisted death.

Clause 45

BARONESS GREY-THOMPSON

Clause 45, page 35, line 17, at end insert—

- “(5) Notwithstanding UK GDPR provisions, all information relevant to carrying out functions under this Act must be retained for no less than 25 years.”

Clause 46

LORD SANDHURST

Clause 46, page 35, line 31, at end insert—

- “(4) The Secretary of State must by regulations make provision for how Assisted Dying Review Panels will deal with the personal information of a person whose eligibility for assistance they are assessing, including sensitive information relating to their health.”

Member's explanatory statement

This amendment, which is suggested by the Law Society of England and Wales, would require the Secretary of State to detail how Assisted Dying Review Panels are to deal with personal information, to prompt Parliament to consider how to address this issue.

After Clause 46

LORD CARLILE OF BERRIEW

After Clause 46, insert the following new Clause —

“Further duties of independent persons

- (1) The independent person who acted in relation to section (*Assistance with suicide*) must report to the Court following the conclusion of his or her duties under this Act within such time as may be specified in regulations made by the Secretary of State, and their report must include —
 - (a) confirmation of the independent person’s compliance with the requirements of this Act, and
 - (b) in the event the applicant has died, confirmation that the applicant had a clear, settled and informed intention to take his or her life immediately before the independent person handed over the lethal dosage of drugs to the applicant.
- (2) If the applicant dies following the ingestion of the lethal dosage of drugs, the independent person must submit the report to —
 - (a) the Chief Coroner,
 - (b) the National Confidential Inquiry into Suicide and Homicide,
 - (c) the medical practitioner with whom the applicant was registered prior to the applicant’s death, and
 - (d) any person specified by the Secretary of State by regulations.”

Member’s explanatory statement

This proposed new Clause sets out notification requirements following assisted suicide, including a requirement to report all such deaths to the Chief Coroner.

Clause 47

BARONESS FINLAY OF LLANDAFF

Clause 47, page 36, line 7, leave out “six months (subject to subsection (3))” and insert “12 months, for a minimum of 20 years”

BARONESS FINLAY OF LLANDAFF

Clause 47, page 36, line 8, leave out subsection (3)

LORD FALCONER OF THOROTON

Clause 47, page 36, line 8, at end insert —

- “(3A) When preparing a report under this section, the Secretary of State must consult the Welsh Ministers.”

Member's explanatory statement

This amendment requires the Secretary of State to consult the Welsh Ministers when preparing a report under Clause 47.

BARONESS FINLAY OF LLANDAFF

Clause 47, page 36, line 9, leave out “the first” and insert “each”

BARONESS RITCHIE OF DOWNPATRICK
LORD HUNT OF KINGS HEATH

Clause 47, page 36, line 12, at end insert “and a strategy to ensure that this Act does not create unmet need or reduce quality of provision.”

After Clause 47

LORD GOODMAN OF WYCOMBE

After Clause 47, insert the following new Clause —

“Reporting by medical practitioners

The coordinating and independent doctors must submit an anonymised report to the Commissioner detailing the justification and decision-making processes for each case in which an individual has been assisted to end their life.”

Member's explanatory statement

This amendment seeks to ensure that every assisted death is reported to the Commissioner, along with information on the justification and decision-making processes.

Clause 48

BARONESS GREY-THOMPSON

Clause 48, page 36, line 26, after “from” insert “deaf and”

LORD FALCONER OF THOROTON

Leave out Clause 48 and insert the following new Clause —

“Disability Advisory Board

- (1) The Commissioner must establish a Disability Advisory Board (“the Board”), within the period of 6 months beginning with the day on which the first appointment under section 4 (appointment of Commissioner) is made.
- (2) The Board is to consist of at least 6, and not more than 10, members appointed by the Commissioner.

- (3) Each member of the Board is to hold and vacate office in accordance with the terms and conditions of the member's appointment.
- (4) The members of the Board must include—
 - (a) at least one person with a disability who lives in England, and at least one person with a disability who lives in Wales, appearing to the Commissioner to have relevant knowledge and expertise;
 - (b) at least one other person appearing to the Commissioner to represent the interests of people with disabilities;
 - (c) at least one person appearing to the Commissioner to have relevant professional expertise (including in particular health professionals and social care professionals).
- (5) The Commissioner may pay such remuneration or allowances to members of the Board as the Commissioner may determine.
- (6) The Board must—
 - (a) within 6 months of being established, produce a report about the implementation of this Act in relation to people with disabilities and give a copy of it to the Commissioner and the Secretary of State;
 - (b) thereafter, produce an annual report about the implementation of this Act in relation to people with disabilities and the operation of this Act in relation to people with disabilities, and give a copy of it to the Commissioner and the Secretary of State.
- (7) The Commissioner may provide staff, premises, facilities or other assistance to the Board.”

Member's explanatory statement

This amendment replaces Clause 48, which requires the Commissioner to establish a Disability Advisory Board and makes provision about the Board, with a new clause that contains substantially similar provision but incorporates various drafting changes.

BARONESS GREY-THOMPSON

As an amendment to the amendment in the name of Lord Falconer of Thoroton to replace Clause 48

In subsection (1), leave out first “Commissioner” and insert “Secretary of State”

BARONESS GREY-THOMPSON

As an amendment to the amendment in the name of Lord Falconer of Thoroton to replace Clause 48

In subsection (4)(a), leave out first “person with a disability” and insert “disabled person”

BARONESS GREY-THOMPSON

As an amendment to the amendment in the name of Lord Falconer of Thoroton to replace Clause 48

In subsection (4)(a), leave out second “person with a disability” and insert “disabled person”

BARONESS GREY-THOMPSON

As an amendment to the above amendment in the name of Lord Falconer of Thoroton to replace Clause 48.

In subsection (4)(a), leave out “Commissioner” and insert “Secretary of State”

BARONESS GREY-THOMPSON

As an amendment to the above amendment in the name of Lord Falconer of Thoroton to replace Clause 48.

In subsection (4)(b), leave out “Commissioner” and insert “Secretary of State”

BARONESS GREY-THOMPSON

As an amendment to the above amendment in the name of Lord Falconer of Thoroton to replace Clause 48.

In subsection (4)(c), leave out “Commissioner” and insert “Secretary of State”

Clause 49

BARONESS COFFEY

Clause 49, page 37, line 1, leave out “an appropriate national authority” and insert “the Secretary of State”

BARONESS COFFEY

Clause 49, page 37, line 2, leave out “appropriate national authority” and insert “Secretary of State”

BARONESS COFFEY

Clause 49, page 37, line 4, leave out “each appropriate national authority” and insert “the Secretary of State”

LORD CARLILE OF BERRIEW

Clause 49, page 37, line 6, leave out subsection (2)

BARONESS GREY-THOMPSON

Clause 49, page 37, line 15, at end insert—

- “(2A) The annual report must include anonymised information and statistics on—
- (a) the point in their clinical diagnosis at which people entered the assisted dying process;
 - (b) the average time from requesting assisted dying to it taking place;

- (c) how many people who had begun the assisted death process died by suicide (and at what point);
 - (d) how many people were refused assisted death and subsequently died by suicide;
 - (e) how many people who died by assisted death had been involved in domestic abuse (either as a victim or perpetrator);
 - (f) the number of times reporting took more than seven days at any point in the assisted dying process;
 - (g) anonymised records of which medical personnel carried out assessments and the assisted dying process;
 - (h) whether there were complications or lack of complications and the average time it took for persons to die once the drugs were administered;
 - (i) how many times the drugs did not work when administered;
 - (j) the average age of people when the conversation about assisted death began and the average length of time it took to go through the process;
 - (k) what approved substances were used in each case and if they changed, and why;
 - (l) whether, and if so, what, services have experienced funding cuts as a result of allocation of resources to fund the implementation of this Act;
 - (m) complaints against doctors carrying out functions under this Act;
 - (n) the reasons given for requesting the assisted death process, broken down by protected characteristic.
- (2B) Where any doctor has five or more complaints made about their conduct in relation to functions under this Act in any calendar year, the Commissioner must launch a formal investigation.”

BARONESS GREY-THOMPSON

Clause 49, page 37, line 18, after “characteristics” insert —

“(aa) where the characteristic under paragraph (a) is disability, what the impairment is,”

LORD FALCONER OF THOROTON

Clause 49, page 37, line 20, at end insert —

“(3A) An annual report must contain the most recent report of the Disability Advisory Board under section (*Disability Advisory Report*) that the Commissioner has received.”

Member’s explanatory statement

This amendment requires the Commissioner’s annual report to contain the most recent report of the Disability Advisory Board, made under the new clause replacing clause 48, that the Commissioner has received.

BARONESS GREY-THOMPSON
BARONESS BUTLER-SLOSS
BARONESS FOX OF BUCKLEY

Clause 49, page 37, line 20, at end insert –

- “(3A) The Commissioner’s report must include anonymised data on –
- (a) the number of cases where safeguarding concerns were identified,
 - (b) the nature of those concerns, and
 - (c) the outcomes of any subsequent investigations or interventions.”

Member's explanatory statement

The purpose of this amendment is to provide transparency and monitoring of safeguarding concerns, allowing continual improvement of protective measures.

BARONESS GREY-THOMPSON

Clause 49, page 37, line 20, at end insert –

- “(3A) An annual report must include –
- (a) a specific assessment of the impact of the Act on disabled persons, including patterns of eligibility applications, socio-economic factors, and reports of coercion or discrimination, and
 - (b) an analysis of any further legislative safeguards which may be necessary to protect disabled persons.”

BARONESS COFFEY

Clause 49, page 37, line 23, leave out paragraph (b)

LORD FALCONER OF THOROTON

Clause 49, page 37, line 24, leave out “such” and insert “the Disability Advisory Board and such other”

Member's explanatory statement

This amendment requires the Commissioner to consult the Disability Advisory Board when preparing an annual report.

BARONESS COFFEY

Clause 49, page 37, line 27, leave out “An appropriate national authority” and insert “The Secretary of State”

BARONESS COFFEY

Clause 49, page 37, line 30, leave out “or Senedd Cymru (as the case may be)”

BARONESS COFFEY

Clause 49, page 37, line 32, leave out subsection (6)

After Clause 49

LORD SANDHURST

After Clause 49, insert the following new Clause –

“Independent monitor

- (1) Within six months of the day on which this Act is passed, the Secretary of State must establish an independent monitor to investigate, monitor and report on the operation of this Act.
- (2) The independent monitor’s functions must include –
 - (a) monitoring the operation of the Act, including compliance with its provisions and any regulations or code of practice made under it,
 - (b) investigating, and reporting to an appropriate national authority on, any matter connected with the operation of the Act which the appropriate national authority refers to the Commissioner, and
 - (c) submitting an annual report to each appropriate national authority on the operation of the Act.
- (3) The annual report must include information about the occasions when –
 - (a) a report about the first assessment of a person does not contain a statement indicating that the coordinating doctor is satisfied as to all of the matters mentioned in section 10(2)(a) to (h);
 - (b) a report about the second assessment of a person does not contain a statement indicating that the independent doctor is satisfied as to all of the matters mentioned in section 11(2)(a) to (e);
 - (c) a panel has refused to grant a certificate of eligibility;
 - (d) the coordinating doctor has refused to make a statement under section 19(6).
- (4) An annual report must include information about the application of the Act in relation to –
 - (a) persons who have protected characteristics, and
 - (b) any other description of persons specified in regulations made by the Secretary of State.
- (5) When preparing an annual report, the independent monitor must consult –
 - (a) the Commissioner,
 - (b) the Chief Medical Officer for England,
 - (c) the Chief Medical Officer for Wales, and
 - (d) such persons appearing to the Commissioner to represent the interests of persons who have protected characteristics as the Commissioner considers appropriate.

- (6) An appropriate national authority must—
 - (a) publish any report received under this section,
 - (b) prepare and publish a response to any such report, and
 - (c) lay before Parliament or Senedd Cymru (as the case may be) a copy of the report and response.
- (7) In this section “appropriate national authority” means the Secretary of State or the Welsh Ministers.
- (8) In this section “protected characteristics” has the same meaning as in Part 2 of the Equality Act 2010 (see section 4 of that Act).”

Member's explanatory statement

This amendment, which is suggested by the Law Society of England and Wales, would require the Secretary of State to establish an independent monitor to investigate, monitor and report on the Act's operation, to prompt Parliament to consider how best to ensure there is independent oversight of the scheme.

Clause 50

LORD GOODMAN OF WYCOMBE

Clause 50, page 37, line 38, leave out “5-year” and insert “3-year”

Member's explanatory statement

This amendment, connected to others in the name of Lord Goodman, seeks to ensure that the review of the Act is published after three years, rather than five.

LORD GOODMAN OF WYCOMBE

Clause 50, page 38, line 1, leave out “five” and insert “three”

Member's explanatory statement

This amendment, connected to others in the name of Lord Goodman, seeks to ensure that the review of the Act is published after three years, rather than five.

LORD REES OF EASTON

Clause 50, page 38, line 14, after “disabilities” insert “, persons from Black, Asian and Minority Ethnic communities, and other persons who have protected characteristics as the Secretary of State considers appropriate,”

Member's explanatory statement

This amendment would require the Secretary of State to assess the impact of the Bill on people from BAME communities, and others with protected characteristics as he or she may decide, as part of the post-implementation review.

BARONESS NOAKES

Clause 50, page 38, line 15, at end insert –

- “(ca) an assessment of the extent to which persons suffering from motor neurone disease and other progressive neurological conditions are able to –
- (i) meet the definition of terminal illness in section 2 (terminal illness), and
 - (ii) be provided with assistance under section 25 (provision of assistance);”

Member's explanatory statement

This amendment would require the Secretary of State to report on the extent to which this Bill enables persons with motor neurone disease (and similar neurological conditions) to benefit from its provisions.

BARONESS FOX OF BUCKLEY

Clause 50, page 38, line 15, at end insert –

- “(ca) an assessment of the impact of this Act on –
- (i) health professionals within the NHS workforce, and
 - (ii) the workforce supporting the regulated Care Home sector;”

Member's explanatory statement

This amendment would ensure the impact of the Act on frontline staff working in medical provision and care, who are affected by the law change, is assessed.

BARONESS FOX OF BUCKLEY

Clause 50, page 38, line 15, at end insert –

- “(ca) an assessment of the impact of this Act on –
- (i) societal attitudes to suicide,
 - (ii) attitudes to suicide among people aged between 14 and 24 years, and
 - (iii) suicide prevention initiatives;”

Member's explanatory statement

This amendment would ensure the impact of the Bill on societal attitudes to suicide and suicide prevention is assessed

LORD GOODMAN OF WYCOMBE

Clause 50, page 38, line 19, at end insert –

- “(f) the effect of the Act on –
- (i) the National Health Service,

- (ii) medical staff within and outside of the National Health Service,
- (iii) palliative care within and outside the National Health Service,
- (iv) disabled people as well as those with learning disabilities,
- (v) people with autism, and
- (vi) people at risk of coercion;
- (g) the extent to which —
 - (i) the system of proxies and advocates under sections 21 and 22 operates effectively;
 - (ii) conscientious objection to the Act by medical professionals is respected;
 - (iii) the regulatory regime for approved substances under section 37 operates effectively;
 - (iv) the role of the Voluntary Assisted Dying Commissioner operates effectively;
 - (v) assisted deaths are effectively monitored and, if necessary, investigated.”

Member's explanatory statement

This amendment seeks to increase the scope of the review of the Act required by Clause 50.

LORD FALCONER OF THOROTON

Clause 50, page 38, line 19, at end insert —

- “(4) The Secretary of State must consult the Welsh Ministers when undertaking the review under subsection (1)(a).”

Member's explanatory statement

This amendment requires the Secretary of State to consult the Welsh Ministers when carrying out the review under this clause of the operation of the Act (resulting from this Bill).

LORD SANDHURST

Clause 50, page 38, line 19, at end insert —

- “(4) The Secretary of State must, during the period of 12 months beginning at the end of the initial 2-year period —
- (a) review each code issued under section 39(1) or 39(2) (codes of practice), and
 - (b) lay a report of the review before Parliament.
- (5) “The initial 2-year period” means the period of two years beginning with the day on which this Act is passed.”

After Clause 50

LORD CARLILE OF BERRIEW
BARONESS O'LOAN
THE LORD BISHOP OF SOUTHWARK

After Clause 50, insert the following new Clause —

“Funding for provisions of this Act: protection for hospice funding

No funding required for the implementation or operation of this Act may be redirected from existing budgets allocated to hospice care.”

LORD MOYLAN

After Clause 50, insert the following new Clause —

“Public expense: limitations

No provision in this Act, other than the investigation and prosecution of offences under sections 34, 35 and 36, may be carried out at public expense.”

Member's explanatory statement

This would ensure that the provision of assistance and the steps leading up to it are not a charge to the public purse, while allowing the offences created by the Bill to be investigated and prosecuted at public expense.

BARONESS FRASER OF CRAIGMADDIE
LORD CARLILE OF BERRIEW

After Clause 50, insert the following new Clause —

“Consultation with Health and Care Professions Council on allied health professionals

- (1) The Secretary of State must within a year of the day on which this Act is passed consult with the Health and Care Professions Council on whether any other health professionals in addition to those defined as doctors or registered health professionals in section 56 should be permitted to participate in the provision of any service under, connected to or in accordance with this Act.
- (2) The Secretary of State must publish the findings of the consultation within three months of its conclusion.”

LORD SANDHURST
LORD CARLILE OF BERRIEW

After Clause 50, insert the following new Clause –

“Victims of occupational diseases

Within one year of the day on which this Act is passed, the Secretary of State must prepare and publish, and lay before Parliament, a report assessing the impact of this Act on the availability of remedies under the Fatal Accidents Act 1976 to dependants of victims of occupational diseases where –

- (a) the victim (A) has been caused an injury within the meaning of section 7(1) of the Damages Act 1996 (interpretation of “personal injury”) as the result of the wrongful act, neglect or default of another person (B),
- (b) as a result of the injury set out at paragraph (a), A becomes terminally ill within the meaning of section 2,
- (c) A dies as a result of the self-administration of an approved substance pursuant to this Act, and
- (d) prior to A’s death, an action would have lain against B pursuant to paragraph (a) above, but can no longer lie because –
 - (i) A’s death was caused by such self-administration of an approved substance in accordance with the provisions of this Act, and
 - (ii) such self-administration broke the chain of causation.”

Member's explanatory statement

As the Bill is currently drafted it is probable that when a victim of an occupational disease such as asbestos cancer opts for an assisted death, their dependants will probably lose their right under the Fatal Accidents Act 1976 to sue the alleged tortfeasor said to have caused the disease, unless the Bill specifically provides otherwise (which currently it does not). This amendment seeks a review to establish the position.

BARONESS RITCHIE OF DOWNPATRICK
LORD HUNT OF KINGS HEATH
LORD FARMER

After Clause 50, insert the following new Clause –

“Impact of this Act on palliative and end of life care

- (1) Within six months of the day on which this Act is passed, the Secretary of State must publish a review of the impact of this Act on palliative and end of life care.
- (2) The review under subsection (1) must include an assessment of the impact of this Act on the current availability, quality and distribution of appropriate health and care services to persons with palliative and end of life care needs, including –
 - (a) pain and symptom management,
 - (b) psychological support for those persons and their families, and
 - (c) information about palliative care and how to access it.”

Member's explanatory statement

This amendment would require the Secretary of State to review the impact of this Act on palliative and end of life care.

BARONESS LAWLOR

After Clause 50, insert the following new Clause —

“Training

- (1) Official guidance on training in relation to this Act must be published on the day on which this Act receives Royal Assent.
- (2) Student courses for medical, pharmacy, social care and other health professionals and for health administrators may not include induction in or training for participation in or involvement in this Act.”

BARONESS HOLLINS
BARONESS O'LOAN

After Clause 50, insert the following new Clause —

“Confirmation before assisted dying

- (1) No person may access provisions under this Act relating to assistance to end their own life unless a consultant in palliative medicine entered on the Specialist Register kept by the General Medical Council has confirmed in writing that all appropriate specialist palliative and end-of-life care options, including psychological, emerging or non-standard treatments, have been discussed and, so far as reasonably practicable, tried or considered.
- (2) A refusal by the person to accept referral to, or participation in, specialist palliative care shall not of itself be sufficient to satisfy the requirement in subsection (1).”

BARONESS HOLLINS
BARONESS O'LOAN

After Clause 50, insert the following new Clause —

“GMC specialist register for functions under this Act

- (1) A registered medical practitioner must not —
 - (a) carry out any function under this Act, or
 - (b) prescribe any substance approved for the purposes of this Act,unless the practitioner is entered in the Specialist Register for Assisted Deaths kept by the General Medical Council.
- (2) The Secretary of State must by regulations make provision for the General Medical Council to —
 - (a) establish and maintain the Specialist Register for Assisted Deaths, and

- (b) determine and publish the criteria (including training, qualifications and experience) for entry in that register.”

Member's explanatory statement

This amendment would require that only doctors entered on a specialist GMC register may perform functions under the Act.

LORD SANDHURST

After Clause 50, insert the following new Clause –

“Supports available for participation in the panel process

The Secretary of State must, within six months of the day on which this Act is passed, lay a report before both Houses of Parliament detailing the supports that will be available to a person seeking the provision of assistance under this Act to participate in the panel process.”

Member's explanatory statement

This amendment, which is suggested by the Law Society of England and Wales, would require the Secretary of State to report to Parliament within six months of the Act passing on the supports that will be available to a person to participate in the panel process, to prompt Parliament to consider what kinds of supports would need to be available.

BARONESS FRASER OF CRAIGMADDIE

After Clause 50, insert the following new Clause –

“Delivery of provisions by privately funded organisations

- (1) No provisions under this Act may be provided directly by the National Health Service, an NHS Trust or any body or agency holding itself out to be a part of the NHS.
- (2) The Secretary of State must, by regulations, establish a framework for the commissioning of privately funded organisations to deliver provisions under this Act.
- (3) Regulations under subsection (2) must provide for –
 - (a) a definition of “privately funded organisations”,
 - (b) the means through which NHS providers can commission privately funded organisations to provide services under this Act,
 - (c) the data sharing arrangements between NHS providers and privately funded organisations to ensure necessary patient records are available for delivery of provisions under this Act, and
 - (d) a system for regulating the provision of services by privately funded organisations.”

BARONESS GREY-THOMPSON

After Clause 50, insert the following new Clause –

“Review of the impact of this Act on disabled people

- (1) The Secretary of State must, within three years of the day on which this Act is passed, appoint an independent person to conduct a review of the impact of the Act on disabled people, including –
 - (a) demographic analysis of people seeking assistance under the Act,
 - (b) the adequacy of safeguards contained in the Act,
 - (c) whether any disability-related inequalities have arisen, and
 - (d) whether there has been any systematic neglect of disabled people.
- (2) The Secretary of State must, within three months of receipt of the report of the review under subsection (1), lay the report before both Houses of Parliament.”

BARONESS GREY-THOMPSON

After Clause 50, insert the following new Clause –

“Impact of this Act on availability of death-in-service benefits

Within six months of the day on which this Act is passed, the Secretary of State must publish a review of the impact on this Act on the availability of death-in-service benefits to the dependants of persons who are diagnosed with a terminal illness (within the meaning of section 2) while in employment.”

LORD GOODMAN OF WYCOMBE

After Clause 50, insert the following new Clause –

“Independent monitoring body

- (1) The Secretary of State must establish an independent monitoring body within two months of the day on which this Act is passed.
- (2) The membership of the monitoring body must include at least one expert in –
 - (a) medicine,
 - (b) law,
 - (c) ethics, and
 - (d) patient advocacy.
- (3) The monitoring body must –
 - (a) oversee the procedure for eligible adults ending their life under this Act;
 - (b) collect data on every case of assisted dying under this Act;
 - (c) conduct regular reviews to ensure compliance with the safeguards under this Act;
 - (d) investigate potential abuses or procedural errors when they arise;
 - (e) monitor the performance of anyone providing training under this Act;

- (f) monitor the impact of this Act on faith-based institutions and on palliative care institutions.”

Member's explanatory statement

This amendment, connected with another in the name of Lord Goodman, seeks to establish an independent monitoring body, which will review the implementation of the Act and receive reports on assisted deaths from doctors.

LORD GOODMAN OF WYCOMBE

After Clause 50, insert the following new Clause —

“Training: palliative care options

Before discharging any functions under this Act, a healthcare professional must have received training on end-of-life care to ensure they are equipped to discuss palliative care options in addition to assisted dying.”

Member's explanatory statement

This amendment seeks to ensure that all healthcare professionals receive training on end-of-care, so they are better equipped to inform patients on the merits of palliative care as an alternative to assisted dying.

LORD GOODMAN OF WYCOMBE

After Clause 50, insert the following new Clause —

“Review: effect on NHS

- (1) Within three months of the day on which this Act is passed, the Secretary of State must appoint a committee to review the impact of assisted dying on the National Health Service.
- (2) The committee must include representatives of—
 - (a) senior NHS professionals,
 - (b) NHS providers from the private, voluntary and independent sectors,
 - (c) patient advocates,
 - (d) ethicists, and
 - (e) legal experts.
- (3) The Committee must report within three years of appointment.”

Member's explanatory statement

This amendment seeks to establish a committee reviewing the impact of the Act on the NHS.

LORD GOODMAN OF WYCOMBE

After Clause 50, insert the following new Clause —

“Review: delegated powers

- (1) Within six months of the day on which this Act is passed, and annually thereafter, the Secretary of State must prepare a report on the use of delegated powers under this Act.
- (2) The report must review, in particular, any regulations which make provision for —
 - (a) the procedure under sections 5 to 22, and
 - (b) the approval of substances under section 27 (meaning of “approved substance”).”

Member's explanatory statement

This amendment seeks to ensure that the Secretary of State publishes an annual review of the use of delegated powers under this Act.

LORD GOODMAN OF WYCOMBE

After Clause 50, insert the following new Clause —

“Review: effect of the Act on palliative care

- (1) Within six months of the day on which this Act is passed, the Secretary of State must commission a review of the effect of this Act on palliative care.
- (2) The review must be undertaken by a committee composed of —
 - (a) senior medical professionals,
 - (b) representatives of the private, voluntary and independent sectors,
 - (c) ethicists,
 - (d) patient advocates, and
 - (e) legal experts.”

Member's explanatory statement

This amendment, connected with another in the name of Lord Goodman, seeks to ensure that the Act cannot come into force until a review of the effect of the Act on palliative care has reported.

Clause 51

BARONESS COFFEY

Baroness Coffey gives notice of her intention to oppose the Question that Clause 51 stand part of the Bill.

Clause 52

LORD SANDHURST

Clause 52, page 39, line 18, at end insert—

“(d) acting as an independent advocate under section 22.”

Member's explanatory statement

This amendment would ensure that certain people are disqualified from acting as an independent advocate where this is inappropriate.

LORD GOODMAN OF WYCOMBE

Clause 52, page 39, line 27, at end insert—

- “(e) anyone who has acted as a domestic carer for the person,
- (f) those with power of attorney or decision-making roles in relation to the person, and
- (g) any health or social care professional who has ever provided care to the person.”

Member's explanatory statement

This amendment seeks to disqualify those who (1) have acted as a domestic carer for, (2) have power of attorney over, or (3) provided health or social care to a person, from acting as their witness or proxy.

BARONESS FINLAY OF LLANDAFF

Clause 52, page 39, line 27, at end insert—

- “(e) any individual who is or has claimed to be the primary provider of unpaid care for the person;
- (f) any individual who is or has recently been co-habiting with the person;
- (g) any individual in a romantic or sexual relationship with the person (or with whom the person believes themselves to be in such a relationship).”

Member's explanatory statement

Evidence from cases of homicide by a carer show that carer-stress is often unrecognised. Also, cuckooing can occur as a method of exploitation but is often unrecognised by professionals.

BARONESS GREY-THOMPSON

Clause 52, page 39, line 27, at end insert—

- “(2A) Anyone acting as a witness or proxy must sign a declaration confirming that they are not disqualified from that role by virtue of being an individual listed in subsection (2).”

LORD CARLILE OF BERRIEW

Clause 52, page 39, line 29, at end insert –

- “(4) For the purposes of this section, a person is a relative of the applicant if that person is the spouse, civil partner, child, step-child, parent, step-parent, sibling, sibling-in-law, child-in-law, parent-in-law, grandparent or step-grandparent of the applicant.”

LORD GOODMAN OF WYCOMBE

Leave out Clause 52 and insert the following new Clause –

“Eligibility for being a witness or proxy

- (1) The individuals specified in subsection (2) are eligible to –
 - (a) witness a first declaration by a person under section 8(2)(c)(ii);
 - (b) witness a second declaration by a person under section 19(3)(c)(ii);
 - (c) be a proxy for a person intending to have a document signed by proxy under section 21.
- (2) Those individuals are healthcare professionals trained in –
 - (a) detecting coercion,
 - (b) domestic abuse, and
 - (c) making reasonable adjustments for disabilities and autism.
- (3) No other individual is eligible to be a witness or proxy.”

Member's explanatory statement

This amendment seeks to reverse the requirements of Clause 52 and describe who is eligible for being a witness or proxy, rather than who is disqualified. Eligibility would be limited to individuals are healthcare professionals trained in detecting coercion, domestic abuse, and making reasonable adjustments for disabilities and autism.

Clause 54

LORD SHINKWIN

Clause 54, page 40, line 5, after “section” insert “5(7),”

Member's explanatory statement

This amendment relates to an amendment in the name of Lord Shinkwin to Clause 5.

BARONESS GREY-THOMPSON

Clause 54, page 40, line 5, after “8(7),” insert “(Organ donation declarations),”

LORD GOODMAN OF WYCOMBE

Clause 54, page 40, line 5, after “11(9)” insert “, 22(1)”

Member's explanatory statement

This amendment seeks to clarify that the regulation-making power in Clause 22 is subject to the affirmative resolution procedure.

LORD GOODMAN OF WYCOMBE

Clause 54, page 40, line 5, after “11(9),” insert “26(2)(b),”

Member's explanatory statement

This amendment seeks to ensure that the regulation-making power in Clause 26 is subject to the affirmative procedure.

LORD FALCONER OF THOROTON

Clause 54, page 40, line 5, at end insert “22,”

Member's explanatory statement

This amendment provides that regulations under Clause 22 (independent advocates) are subject to the draft affirmative procedure.

LORD GOODMAN OF WYCOMBE

Clause 54, page 40, line 5, at end insert “(Independent advocates),”

LORD GOODMAN OF WYCOMBE

Clause 54, page 40, line 5, at end insert “(Conscientious objection to participation in the provision of assisted dying services),”

LORD GOODMAN OF WYCOMBE

Clause 54, page 40, line 6, after “39(4)” insert “, 40”

LORD CAMPBELL-SAVOURS

Clause 54, page 40, line 6, after “43” insert “, or (Expiry and renewal)”

Member's explanatory statement

This amendment is linked to another in the name of Lord Campbell-Savours, which provides that for the three years after assistance to end a person's life is first provided, the Act is subject to three annual renewals. This amendment seeks to ensure that the regulations-making provision for the renewal of the Act is subject to the affirmative resolution procedure.

BARONESS FRASER OF CRAIGMADDIE

Clause 54, page 40, line 6, after “43” insert “, or (*Expiry of this Act*)”

BARONESS FRASER OF CRAIGMADDIE

Clause 54, page 40, line 6, after “43” insert “, or (*Delivery of provisions by privately funded organisations*)”

LORD GOODMAN OF WYCOMBE

Clause 54, page 40, line 6, after “43” insert “, or (*Notifications of refusals to Commissioner*)”

LORD GOODMAN OF WYCOMBE

Clause 54, page 40, line 7, at end insert —

“(3A) If any regulations made under this Act create a criminal or civil offence, then a statutory instrument containing such regulations may not be made unless a draft of the instrument has been laid before and approved by a resolution of each House of Parliament.”

Member's explanatory statement

This amendment seeks to ensure that regulations creating a criminal or civil offence are subject to the affirmative resolution procedure.

BARONESS COFFEY

Clause 54, page 40, line 11, leave out subsection (5)

Clause 55

LORD CARLILE OF BERRIEW

Clause 55, page 40, line 16, leave out “8, 10, 11, 19, 26 or”

LORD LANSLEY

Clause 55, page 40, line 16, after “11,” insert “17,”

LORD SANDHURST

Clause 55, page 40, line 16, after “28,” insert “or issuing one or more codes of practice under section 39,”

Member's explanatory statement

This amendment, which is suggested by the Law Society of England and Wales, would extend the Secretary of State's duty to consult to the issuing of codes of practice.

LORD LANSLEY

Clause 55, page 40, line 18, at end insert —

- “(aa) persons or bodies representative of those professional groups who provide clinical advice, reports or decisions, and”

BARONESS GREY-THOMPSON

Clause 55, page 40, line 24, at end insert “and

- (c) persons appearing to the Secretary of State to have expertise in matters relating to palliative care,”

BARONESS GREY-THOMPSON

Clause 55, page 40, line 27, at end insert —

- “(3) If the Secretary of State does not consult any persons listed under subsection (2), that must be stated in the Commissioner's annual report under section 49 and the Secretary of State must make a statement to Parliament explaining their reasons for not doing so.”

Clause 56

LORD MOYLAN
LORD CARLILE OF BERRIEW
BARONESS O'LOAN

Clause 56, page 40, line 34, at end insert —

““assistance” in this Act refers to aiding, abetting, counselling or procuring the suicide of a person by a registered medical practitioner in accordance with this Act, and to ancillary activities;”

Member's explanatory statement

This amendment seeks to define the meaning of the term “assistance” as used throughout the Bill.

LORD FALCONER OF THOROTON

Clause 56, page 40, line 39, at end insert —

““disability” has the meaning given by section 6 of the Equality Act 2010;”

Member's explanatory statement

This amendment defines “disability” for the purposes of the Bill.

BARONESS FRASER OF CRAIGMADDIE

Clause 56, page 40, line 39, at end insert –

““doctor” means a doctor or care professional whose name is on the General Medical Council's medical register and who holds a full, specialist or GP license to practice medicine, permitting them to provide and supervise medical care to patients and has been continuously registered on the medical register of the General Medical Council for at least ten years;”

BARONESS FINLAY OF LLANDAFF
BARONESS BUTLER-SLOSS

Clause 56, page 41, line 16, at end insert –

““medical practitioner” means a person who is a doctor who is registered on the General Medical Council medical register and holds a valid licence to practice;”

BARONESS FRASER OF CRAIGMADDIE

Clause 56, page 41, line 18, at end insert –

““registered medical practitioner” means –

- (a) a “doctor”, or
- (b) a nurse or care professional who is licenced to practice in the UK and is currently registered by the Nursing and Midwifery Council and has been continuously registered on the register of the Nursing and Midwifery Council for at least ten years;”

BARONESS FINLAY OF LLANDAFF
BARONESS HOLLINS

Clause 56, page 41, line 27, at end insert –

““specialist palliative care” is care delivered by a multi-professional palliative care team consisting of medical, nursing, and allied healthcare professionals who have undergone specialist training, with at least one of the doctors listed on the specialist register for palliative medicine with the General Medical Council; and such teams are able to provide –

- (a) specialist support in every setting, including private homes, care homes, hospitals, hospices and other community settings, working with local clinical teams,
- (b) specialist level in-patient palliative care beds when required, including admission on an urgent basis,

- (c) specialist palliative care advice, available at all times of day every day, to support health and social care professionals who are providing care to the person and their family,
- (d) support to ensure the right, skilled workforce, equipment and medication is available to deliver this care,
- (e) a point of contact, available for people with palliative care needs if their usual source of support is not accessible,
- (f) information about the person's needs with all professionals involved in their care, using local information systems across health care providers, subject to patient consent,
- (g) support to ensure patients and their families are able to have relevant open conversations about what matters to them,
- (h) support for the relevant education and training of the health and social care workforce, and
- (i) support to enable staff to participate in relevant research and disseminate evidence-based innovations in palliative care.”

Member's explanatory statement

This amendment is based on the WHO definition of specialist palliative care.

LORD BANNER

Clause 56, page 41, line 37, at end insert –

- “(5) Section 3 of the Human Rights Act 1998 (interpretation of legislation) does not apply in relation to the interpretation of this Act or in relation to the interpretation of any regulations or other measure (including codes of practice) made pursuant to it.”

Member's explanatory statement

This amendment disapplies section 3 of the Human Rights Act 1998 so as to minimise the risk of the words used in this Bill (or in secondary legislation and other measures that are in future made pursuant to it) being interpreted in an unforeseeable manner.

Clause 57

BARONESS COFFEY

Clause 57, page 41, line 39, leave out “Subject as follows,”

BARONESS COFFEY

Clause 57, page 41, line 40, leave out subsections (2) and (3)

Member's explanatory statement

This removes extra changes to the Bill made to extend certain sections to other parts of the United Kingdom, which were not in the Bill originally presented to the Commons, nor considered in committee stage in the House of Commons.

LORD FALCONER OF THOROTON

Clause 57, page 41, line 42, leave out “31(8)” and insert “31”

Member's explanatory statement

This amendment provides that all of Clause 31 extends to (i.e. forms part of the law of) Scotland (as well as England and Wales).

BARONESS COFFEY

Clause 57, page 41, line 42, at end insert –

“(4) This Act applies to England only.”

Clause 58

LORD MOYLAN

Clause 58, page 42, line 1, at end insert –

“(A1) Section 1 comes into force on such day as the Secretary of State may by regulations appoint, but not before the Secretary of State has issued guidance aimed at preventing any growth of an institutional culture in the medical professions and among hospital managers in favour of assisted death as a means of procuring human organs for transplant.”

Member's explanatory statement

This is to probe the protections the Act might contain to prevent the rise of a coercive or persuasive culture driven by the need for organs for transplant.

LORD GOODMAN OF WYCOMBE

Clause 58, page 42, line 2, leave out subsections (1) and (2) and insert –

- “(1) This section and section (*Review: effect of the Act on palliative care*) come into force on the day on which this Act is passed.
- (2) The other provisions in this Act may not come into force until the review described in section (*Review: effect of the Act on palliative care*) has reported and the Secretary of State has responded to the review.”

Member's explanatory statement

This amendment, connected with another in the name of Lord Goodman, seeks to ensure that the Act cannot come into force until a review of the effect of the Act on palliative care has reported.

BARONESS HOLLINS

Clause 58, page 42, line 3, at end insert —

- “(1A) Section 3 (assisted dying decision-making framework) comes into force on the day on which this Act is passed, and the remaining provisions of this Act come into force as set out in the rest of this section, except that no other provisions may come into force until the Secretary of State has made the regulations required by that section.”

Member's explanatory statement

This amendment is linked to an amendment in the name of Baroness Hollins to replace Clause 3 of the Bill.

LORD SANDHURST
LORD HUNT OF KINGS HEATH

Clause 58, page 42, line 4, leave out subsections (2) to (5) and insert —

- “(2) In relation to England, the provisions of this Act not brought into force by subsection (1) come into force on such day or days as the Secretary of State may by regulations appoint.”

Member's explanatory statement

This amendment, which is suggested by the Law Society of England and Wales, would mean that, except as provided by subsection (1), provisions of the Bill will only commence in England when the Secretary of State makes a commencement order, and not automatically.

LORD MOYLAN
LORD CARLILE OF BERRIEW

Clause 58, page 42, line 4, leave out “, except subsection (4) of that section,”

Member's explanatory statement

This amendment, connected to another in the name of Lord Moylan, would ensure that the scope of illnesses or diseases that count for the purposes of subsection (1) does not increase by “creep” but only by a deliberative act of the Secretary of State made by Statutory Instrument.

LORD FALCONER OF THOROTON

Clause 58, page 42, line 4, after “that section,” insert “section (Disability Advisory Board)”

Member's explanatory statement

This amendment provides that the new Clause replacing Clause 48 (Disability Advisory Board) comes into force one year after Royal Assent.

LORD MOYLAN
BARONESS FOX OF BUCKLEY

Clause 58, page 42, line 6, at end insert “subject to section 2(1A)”

Member's explanatory statement

This amendment, connected to another in the name of Lord Moylan, would ensure that the scope of illnesses or diseases that count for the purposes of subsection (1) does not increase by “creep” but only by a deliberative act of the Secretary of State made by Statutory Instrument.

LORD GOODMAN OF WYCOMBE

Clause 58, page 42, line 7, at beginning insert “Subject to subsection (2)”

Member's explanatory statement

This amendment, connected with another in the name of Lord Goodman, seeks to ensure that most of the Act cannot come into force until a review of the effect of the Act on palliative care has reported.

LORD HUNT OF KINGS HEATH

Clause 58, page 42, line 8, at end insert “, provided that the Secretary of State has published a review on—

- (a) the funding implications of this Act for palliative and end of life care;
- (b) how the long-term funding of palliative and end of life care will be affected as a result of this Act.”

Member's explanatory statement

The amendment would require the Secretary of State to review the likely impact of this Act on palliative and end of life care before the provisions referred to in Clause 58(3) come into force.

LORD AHMAD OF WIMBLEDON

★

Clause 58, page 42, line 8, at end insert “, subject to a majority of electors voting in a referendum as provided by section (*Referendum on assisted dying*) that adults who are terminally ill should be provided with assistance to end their own life”

Member's explanatory statement

This and another amendment in my name provide for a referendum to provide a stronger mandate for the commencement of the legislation with such significant impacts on society and the NHS.

LORD MOYLAN

Clause 58, page 42, line 9, leave out subsection (4)

Member's explanatory statement

This would ensure that no provision of this Bill, apart from the sections referred to in subsections (1) and (2), would come into effect other than by way of subsection (3) (a regulation made by the Secretary of State).

LORD SANDHURST

Clause 58, page 42, line 12, at end insert “, subject to subsection (5A).”

Member's explanatory statement

This amendment is connected to another amendment in the name of Lord Sandhurst to clause 58.

BARONESS COFFEY

Clause 58, page 42, line 13, leave out subsection (5)

LORD SANDHURST

Clause 58, page 42, line 15, at end insert —

- “(5A) The Secretary of State may not make a statutory instrument containing (whether alone or with other provision) regulations which bring sections 25 (provision of assistance), 32 (criminal liability for providing assistance) or 33 (civil liability for providing assistance etc) into force unless —
- (a) the Secretary of State has, by regulations, made provision for all the matters they are required to make provision for under the Act,
 - (b) the Secretary of State has issued one or more codes of practice in connection with all the matters described in section 39(1) (codes of practice), and
 - (c) the Secretary of State after consulting the Chief Medical Officers has published guidance under section 40 (guidance about operation of Act).”

Member's explanatory statement

This amendment, which is suggested by the Law Society of England and Wales, would prevent the Secretary of State from making a commencement order for those provisions relating to the provision of assistance and criminal and civil liability for providing assistance unless all necessary regulations and guidance are in place.

After Clause 58

LORD CAMPBELL-SAVOURS

After Clause 58, insert the following new Clause —

“Expiry and renewal

- (1) This Act is repealed unless renewed under the provisions set out in this section.

- (2) Within three months of the first, second and third anniversary of the day on which assistance to end a person's life is first provided under sections 8 to 30 of this Act, the Secretary of State must, by regulations, make provision for the renewal of this Act.
- (3) If the regulations are not approved within three months of the relevant anniversary, then the Act is repealed.
- (4) If the Act is renewed following each of the three anniversaries then the Act remains permanently in force."

Member's explanatory statement

This amendment seeks to provide that for the three years after assistance to end a person's life is first provided, the Act is subject to three annual renewals. If on one of these occasions the Act is not renewed, it permanently expires. Following three years and three successful renewals, the Act remains permanently in force.

BARONESS FRASER OF CRAIGMADDIE

After Clause 58, insert the following new Clause —

"Expiry of this Act

- (1) The provisions of this Act expire at the end of five years beginning on the day on which this Act is passed.
- (2) The Secretary of State may by statutory instrument, from 12 months before the end of each five year period, make provision that the provisions of the Act are to continue in effect for a further five years.
- (3) In this section, "five year period" means the period of five years beginning with the day that this Act receives Royal Assent and each subsequent five year period thereafter."

BARONESS COFFEY
LORD GOODMAN OF WYCOMBE

After Clause 58, insert the following new Clause —

"Expiry and parliamentary renewal

- (1) This Act is repealed unless renewed under the provisions set out in this section.
- (2) Within three months of the beginning of each new Parliament —
 - (a) in the House of Commons, the Prime Minister, and
 - (b) in the House of Lords, the Leader of the House,
 must table a resolution in their respective House making provision for the renewal of this Act.
- (3) If the resolution is approved in both Houses, then the Act remains in force.
- (4) If the resolution is not approved in both or either House, then the Act is repealed."

Member's explanatory statement

This amendment seeks to ensure that the Act is renewed at the beginning of each Parliament and permanently repealed if this renewal is rejected.

BARONESS COFFEY
LORD GOODMAN OF WYCOMBE

After Clause 58, insert the following new Clause —

“Parliamentary renewal

- (1) Within three months of the beginning of each new Parliament —
 - (a) in the House of Commons, the Prime Minister, and
 - (b) in the House of Lords, the Leader of the House,must table a resolution in their respective House making provision that sections 1 to 30 remain in force.
- (2) If the resolution is approved in both Houses, then sections 1 to 30 remain in force for the rest of that Parliament.
- (3) If the resolution is not approved in both or either House, then sections 1 to 30 cease to remain in force for the rest of that Parliament.”

Member's explanatory statement

This amendment seeks to ensure that the sections of the Act setting out the assisted dying process are subject to re-approval by both Houses at the beginning of each Parliament.

Clause 59

BARONESS FINLAY OF LLANDAFF

Clause 59, page 42, line 22, leave out “End of Life” and insert “Assisted Death”

Schedule 1

LORD MOYLAN

Schedule 1, page 43, line 10, at end insert —

- “(4) No public funds may be paid to the Commissioner for the exercise of their duties or the conduct of their operations, including premises or staff employment costs.”

Member's explanatory statement

This establishes that the costs of the Commissioner will not be a charge on public funds.

BARONESS FINLAY OF LLANDAFF

Schedule 1, page 43, line 10, at end insert—

- “(4) The Commissioner, the Deputy Commissioner and employed or seconded members of the Commissioner’s staff may not be appointed if they are or have been employed by, have or had financial or commercial relationships with, or acted in a voluntary capacity for, any agency promoting or providing assisted deaths.”

LORD MOYLAN

Schedule 1, page 44, line 17, after “may” insert “not”

Member's explanatory statement

This amendment would prevent the Secretary of State from paying remuneration and associated costs to the Commissioner.

BARONESS GREY-THOMPSON

Schedule 1, page 45, line 23, at end insert—

- “(4) The Commissioner must keep records of the numbers of—
- (a) full time,
 - (b) part time, and
 - (c) seconded,
- staff working for them and must include this information in their annual report under section 49.”

LORD MOYLAN

Schedule 1, page 45, line 23, at end insert—

“Fees payable by those seeking assistance

- 8A (1) The Commissioner must, before the start of each financial year, set out fees and charges (which may be staged in line with the procedures established by this Act), payable by those seeking or attaining the provision of assistance.
- (2) Fees and charges must be set so that, taking the year as a whole it is reasonably foreseeable that the costs of providing assistance (including materials, premises, professional fees and the Commissioner’s remuneration, expenses and costs of operation) do not fall as a charge to public funds.
- (3) Such fees and charges are to be collected by the Commissioner and distributed to those with a justified and evidenced claim on them.”

Member's explanatory statement

This amendment provides a mechanism for funding the provision of assistance such that it is not a charge on public funds.

LORD MOYLAN

Schedule 1, page 45, line 25, after “may” insert “not”

Member's explanatory statement

This would prevent the Secretary of State from providing financial assistance to the Commissioner.

LORD MOYLAN

Schedule 1, page 45, line 30, after “may” insert “not”

Member's explanatory statement

This would prevent the Secretary of State from providing staff, premises, facilities or other assistance to the Commissioner.

BARONESS COFFEY

Baroness Coffey gives notice of her intention to oppose the Question that Schedule 1 be the First Schedule to the Bill.

Schedule 2

LORD SANDHURST

Schedule 2, page 47, line 21, after “member”)” insert “meets the requirements specified in regulations under sub-paragraph (4) and”

LORD SANDHURST

Schedule 2, page 47, line 26, at end insert —

“(iv) is a member of another category of persons as may be specified by the Secretary of State in regulations,”

Member's explanatory statement

This amendment, which is suggested by the Law Society of England and Wales, would enable the Secretary of State to specify other categories of people eligible for appointment as the legal member of an Assisted Dying Review Panel, to prompt Parliament to consider the eligibility criteria.

BARONESS COFFEY

Schedule 2, page 47, line 33, leave out “or Social Work Wales”

BARONESS GREY-THOMPSON

Schedule 2, page 47, line 34, at end insert—

- “(2A) Where the person requesting assistance is aged 60 or over, the assisted dying review panel must include at least one member with professional expertise in the abuse of older people, or in safeguarding vulnerable adults.”

Member's explanatory statement

The purpose of this amendment is to ensure review panels for older applicants include a safeguarding professional able to identify and assess risks of abuse or coercion.

LORD SANDHURST

Schedule 2, page 48, line 2, at end insert—

- “(4) The Secretary of State must, by regulations, make provision about the training, qualifications and experience that a person must have in order to act as the legal member.”

Member's explanatory statement

This amendment, together with another in the name of Lord Sandhurst to Schedule 2, which have been suggested by the Law Society of England and Wales, would require the Secretary of State to make regulations providing for the training, qualifications and experience needed for a person to act as the legal member on an Assisted Dying Review Panel.

LORD MOYLAN

Schedule 2, page 48, line 9, at end insert—

- “(4) In considering the re-appointment of a person to the list of panellists for a second term, the Commissioner must pay no regard to the record of a panel member in making decisions or casting votes as a member of a panel.”

Member's explanatory statement

This is to avoid bias in the reappointment of a person to the list of panel members.

BARONESS HOLLINS

Schedule 2, page 48, line 16, at end insert—

- “(d) a safeguarding expert,
 - (e) a physician, and
 - (f) a clinical psychologist.
- (2A) The person (a “psychiatrist member”) required by subsection (2)(b) must—
- (a) be a consultant psychiatrist,
 - (b) be registered in one of the psychiatry specialisms in the Specialist Register kept by the General Medical Council,

- (c) have demonstrable experience of working in palliative care, and
 - (d) be entered in the Assisted Dying Specialist Register maintained by the General Medical Council for the purposes of this Act.
- (2B) The person (a “safeguarding expert”) in required by subsection (2)(d) must be a safeguarding expert with substantial professional experience in identifying and addressing coercion, abuse, or exploitation, and with substantial experience in adult safeguarding or in the police service.
- (2C) The person (a “physician”) required by subsection (2)(e) must be –
- (a) a consultant physician with demonstrable expertise in palliative care and end-of-life care,
 - (b) entered on the Specialist Register kept by the General Medical Council in one of the following specialities –
 - (i) geriatric medicine,
 - (ii) palliative medicine,
 - (iii) medical oncology, or
 - (iv) clinical oncology, and
 - (c) entered in the Assisted Dying Specialist Register maintained by the General Medical Council for the purposes of this Act.
- (2D) The person (a “clinical psychologist member”) required by subsection (2)(f) must be –
- (a) be a practitioner psychologist registered with the Health and Care Professions Council,
 - (b) holds specialist registration as a clinical psychologist, and
 - (c) be entered in the Assisted Dying Specialist Register maintained by the Health and Care Professions Council for the purposes of this Act.”

Member's explanatory statement

This amendment expands the Assisted Dying Review Panel to six members and sets out the required professional qualifications and experience for each.

LORD MOYLAN

Schedule 2, page 48, line 16, at end insert –

- “(2A) In appointing members to a panel, the Commissioner must pay no regard to the record of a member in making decisions or casting votes as a member of a previous panel.”

Member's explanatory statement

This is to avoid bias in the appointment of panel members to panels.

LORD FALCONER OF THOROTON

Schedule 2, page 48, line 18, leave out “, including coercive control and financial abuse”

Member's explanatory statement

This amendment omits provision that duplicates the effect of the definition of “domestic abuse” in Clause 56(2) (which includes controlling or coercive behaviour and economic abuse).

BARONESS FINLAY OF LLANDAFF

Schedule 2, page 48, line 19, at end insert –

- “(4) The Commissioner must ensure there are at least three panels per region in England, and three in Wales.”

BARONESS BUTLER-SLOSS

Schedule 2, page 48, line 32, after “decide” insert “exceptionally”

Member's explanatory statement

This amendment is to require panels to sit in public almost always.

LORD SANDHURST

Schedule 2, page 48, line 32, at end insert –

- “(3) The Secretary of State must, by regulations, make provision for how the chair of a panel is to decide whether to grant the person’s request that the panel sit in private, including the factors to be taken into account and the process they should follow.”

Member's explanatory statement

This amendment, which is suggested by the Law Society of England and Wales, would require the Secretary of State to detail in regulations how Panel chairs are to decide requests to sit in private, to prompt Parliament to consider how this should be addressed.

BARONESS FINLAY OF LLANDAFF

Schedule 2, page 49, line 5, at end insert –

- “(3) Guidance issued by the Commissioner under this paragraph must include provision about the panel’s duties under subsections 17(2A), (4A) and (4B), including –
- (a) when and how the panel should seek safeguarding and psychosocial evidence,
 - (b) the assessment of interconnected, recurrent and cumulative stressors, and
 - (c) the avoidance of contact where there is a risk of coercion, pressure or other harm.”

Member's explanatory statement

This consequential amendment (related to amendments in the name of Baroness Finlay of Llandaff to Clause 17) ensures the Commissioner's practice and procedure guidance addresses how panels seek and evaluate the specified information.

BARONESS FINLAY OF LLANDAFF

Schedule 2, page 49, line 5, at end insert—

- “(3) Guidance issued by the Commissioner under this paragraph must include provision about the panel's duties under section 17(3A)–(4B), including—
- (a) when and how the panel should seek safeguarding and psychosocial evidence,
 - (b) the assessment of interconnected, recurrent and cumulative stressors, and
 - (c) the avoidance of contact where there is a risk of coercion, pressure or other harm.”

Member's explanatory statement

This consequential amendment (relating to Baroness Finlay's other amendments to Clause 17) ensures the Commissioner's practice and procedure guidance addresses how panels seek and evaluate the specified information.

LORD LANSLEY

Schedule 2, page 49, line 5, at end insert—

- “8A The following standards and guidelines are specified for the purposes of section 17—
- (a) The National Institute for Health and Care Excellence (NICE) guideline [NG31] “Care of dying adults in the last days of life 2015”,
 - (b) The NICE guideline [NG142] “End of life care for adults: service delivery 2019”,
 - (c) The NICE quality standard [QS13] “End of life care for adults 2021”,
 - (d) “Palliative and End of Life Care”, Statutory Guidance for Integrated Care Boards (September 2022), and
 - (e) for persons resident in Wales, additionally, “Quality Statement for palliative and end of life care for Wales 2022”.”

Member's explanatory statement

This amendment and others in the name of Lord Lansley seek to strengthen the functions of the Assisted Dying Review Panel, by requiring it, before making a determination, to be satisfied that the applicant has access to nationally-recognised standards of end-of-life care and that the request is not occasioned by remediable deficiencies in care.

LORD CARLILE OF BERRIEW
BARONESS HOLLINS

The above-named Lords give notice of their intention to oppose the Question that Schedule 2 be the Second Schedule to the Bill.

Terminally Ill Adults (End of Life) Bill

RUNNING LIST OF ALL AMENDMENTS IN COMMITTEE OF THE WHOLE HOUSE

Tabled up to and including

11 November 2025

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