

Terminally Ill Adults (End of Life) Bill

AMENDMENTS

TO BE MOVED

IN COMMITTEE OF THE WHOLE HOUSE

[Supplementary to the Marshalled List]

Amendment
No.

Clause 2

LORD POLAK
BARONESS GREY-THOMPSON

- 83A★** Clause 2, page 2, line 6, at end insert “as determined by clinical judgement in accordance with peer-reviewed palliative care standards”

Member's explanatory statement

This amendment intends to ensure that the assessment that death is expected within six months is determined by clinical judgement in accordance with peer-reviewed palliative care standards, rather than general prognostic estimation.

Clause 4

LORD MORROW

- 146A★** Clause 4, page 2, line 39, at end insert —
- “(4A) In carrying out their functions, the Commissioner must have particular regard to the importance of the right to life as reflected in Article 2 of the European Convention on Human Rights.”

Clause 5

BARONESS MACLEAN OF REDDITCH

- 200A★** 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 in order to conduct the preliminary discussion in subsection (3).”

- (8) The regulations must provide that the practitioner must have had training about the following –
- (a) assessing capacity;
 - (b) assessing whether a person has been coerced or pressured by any other person;
 - (c) reasonable adjustments and safeguards for autistic people and people with a learning disability;
 - (d) domestic abuse.
- Subject to that, 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) Regulations under subsection (7) must specify that training in respect of domestic abuse, including coercive control and financial abuse, is mandatory.
- (10) The conduct of preliminary discussions under subsection (3) by a medical practitioner lacking the qualifications and experience prescribed under subsection (7) must be treated as misconduct for the purposes of section 35C(2)(a) of the Medical Act 1983, and the registrar of the General Medical Council may accordingly refer the matter to the Investigation Committee under section 35C(4) of the Medical Act 1983.”

Member's explanatory statement

This amendment, recognising the unique context of the preliminary discussions, protects the public by requiring registered medical practitioners who engage in them have appropriate training and experience (as is required for the coordinating doctor and independent doctor). It also ensures that the failure to comply with these regulations is appropriately treated as misconduct and subject to existing disciplinary procedures.

Clause 7

BARONESS GREY-THOMPSON

214A★ Clause 7, page 4, line 6, at end insert –

- “(2A) The preliminary discussion under subsection (1) must be attended by an additional medical practitioner as witness to record the discussion or write minutes and notes of the discussion including the individual’s mental state and demeanour.”

Clause 8

LORD HAMILTON OF EPSOM

238A★ Clause 8, page 4, line 24, at end insert –

- “(2A) Both the coordinating doctor and the other person under subsection (2)(c)(ii) must at the time of taking receipt of the first declaration be employed by or contracted to the National Health Service.

- (2B) If, after receiving the first declaration and while the patient is still alive, the co-ordinating doctor ceases to be so employed or contracted, they must cease forthwith to be the coordinating doctor for that patient.”

Clause 10

BARONESS GREY-THOMPSON

- 322A★** Clause 10, page 6, line 36, at end insert “in the format of their choice,”

Clause 11

BARONESS GREY-THOMPSON

- 362A★** Clause 11, page 9, line 12, at end insert —

- “(d) reasonable adjustments and safeguards for autistic people and people with a learning disability;
- (e) the needs of disabled people, disability equality and discrimination against disabled people;
- (f) the effect of terminal illness relating to the brain on decision making capabilities and the possible deterioration of such abilities.”

Clause 31

BARONESS GREY-THOMPSON

- 673A★** Clause 31, page 25, line 28, at end insert —

- “(6A) A medical practitioner who has opted in to the process may in writing can withdraw consent to be a witness of the process at any point.”

Member's explanatory statement

This amendment would ensure that a coordinating doctor involved in the act would be able to give clear and consistent consent throughout the process and withdraw at any time without professional or other repercussions.

Clause 40

BARONESS SMITH OF LLANFAES
LORD THOMAS OF CWMGIEDD

- 743A★** Clause 40, page 32, line 13, leave out paragraph (b)

Member's explanatory statement

This amendment, together with other amendments in the name of Baroness Smith of Llanfaes, deletes the requirement for the Welsh Ministers to make guidance “about matters which are within devolved competence”

Clause 41

LORD HAMILTON OF EPSOM

- 752A★** Clause 41, page 33, line 4, leave out subsection (4) and insert –
- “(4) Regulations under this section must prohibit any organisation other than the National Health Service from providing voluntary assisted dying services (whether or not the services are commissioned VAD services).”

After Clause 42

LORD HAMILTON OF EPSOM

- 771A★** After Clause 42, insert the following new Clause –
- “NHS: exclusive provider of assisted dying services**
- NHS England and NHS Wales are the only organisations that may provide medical services under or in connection with this Act.”

Clause 48

BARONESS GREY-THOMPSON

- 789A★** Clause 48, page 36, line 28, at end insert –
- “(2A) The Board must have co-chairs.
- (2B) One of the co-chairs must be a deaf or disabled person with relevant lived experience.
- (2C) The co-chair for the purposes of subsection (2B) must be recruited by the Office for the Commissioner of Public Appointments.”

BARONESS GREY-THOMPSON

- 789B★** Clause 48, page 36, line 28, at end insert –
- “(2A) A majority of the members of the Board must be deaf or disabled people with relevant personal or professional lived experience of terminal illness.”

BARONESS GREY-THOMPSON

- 789C★** Clause 48, page 36, line 28, at end insert –
- “(2A) The Secretary of State must arrange for members of the board to be remunerated for their time.”

Clause 58

BARONESS FINLAY OF LLANDAFF

892A★ Clause 58, page 42, line 3, at end insert —

“(1A) Section (*Access to specialist palliative and end-of-life care*) 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 laid before Parliament —

- (a) the report required by that section, and
- (b) a response to that report detailing how the Government will respond to the recommendations in the report in order to increase access to specialist palliative and end-of-life care to levels of universal access for persons seeking assistance to end their life under this Act.”

Terminally Ill Adults (End of Life) Bill

AMENDMENTS
TO BE MOVED
IN COMMITTEE OF THE WHOLE HOUSE

[Supplementary to the Marshalled List]

13 November 2025
