

Tel: 01489 668332 Email: Office@compleat-online.co.uk Website:www.apmonline.org

Dear Members,

Last week saw the Terminally Ill Adults (End of Life) Bill finish its committee stage, with report coming on the 25th April and potentially a third reading vote the same day or later.

At the Palliative Care Congress and APM AGM in Belfast in March 2025, those present discussed the importance of a continued dialogue about this highly important issue. The APM encourages members to engage with their respective MPs, either by meeting in person or direct correspondence and sharing their stories, experiences of caring for people who are dying and views about the Bill.

With Easter and the parliamentary recess starting on the 9th April, it is recommended that members wishing to engage in this way make contact with their constituent office/MP as soon as possible. Resources to aid discussions can be found on our website, and a small selection within this communication.

The APM is disappointed that the committee rejected the amendment which would ensure that there was 'no detriment' to care homes and hospices that did not participate in Assisted Dying. In the session, on the 18th of March, when the committee rejected the proposed amendment to enable care homes and hospices to opt-out of Assisted Dying, the Rt Hon Kit Malthouse MP stated, "Should they still be able to deny what is a legal service, if they are in receipt of public funds?" The APM are sending a response condemning this statement.

The APM's key messages at the current stages of the Leadbeater Terminally Ill Adults (End of Life) Bill are:

- 1. Equitable, high quality palliative care should be available to all who need it. This must be adequately funded and resourced.
- 2. If Assisted Dying is legalised, it must not be at the detriment to the provision of palliative care.
- 3. Funding for assisted dying, if approved, must be completely separate from funding for the provision of palliative and end of life care.



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- 4. The biggest constraint to meaningful choice at the end of life is the inadequate provision of health and social care to those who are dying.
- 5. There must be the option not to participate in Assisted Dying, if it were to be legalised, for individuals, and organisations.
- 6. Multiprofessional and multidisciplinary assessment of the patient is intrinsic to palliative care, and such an approach must be reflected in the assessment for Assisted Dying in any new legislation.

Evidence and supplementary evidence submitted by the APM is available on our current issues section of the APM website.

The APM continues to make the case for better provision of both generalist and specialist palliative care. On 28th March APM submissions were made to the Health and Social Care Committees Expert Panel (HSCC, Palliative Care), and The Independent Palliative and End of Life Care Commission. These will be shared with members via the resources section of the APM website as soon as the embargoes by the HSCC and the Commission to publication are lifted.

We appreciate the considerable effort that APM members are making in engaging with the Assisted Dying debate and proposed legislation, at pace, at a time of considerable service pressures. We welcome ongoing dialogue on how we can best support you and advocate for best possible palliative and end of life care for all.

Sincerely,

Dr Suzanne Kite, Professor Paul Paes, Dr Natasha Wiggins, Dr Matthew Doré & Dr Sarah Cox

And the APM Research and Ethics chair, Dr Rosie Bronnert and committee.



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Resources

Impact of Assisted Dying on Palliative Care

 Evidence of Harm – Assessing the Impact of Assisted Dying: Assisted Suicide on Palliative Care (Prof. David Albert Jones)

Amendments

 A record of the amendments submitted, accepted, rejected and withdrawn are in the Terminally Ill Adults (End of Life) Bill (Amendment Paper) 25th March 2025 terminally ill adults day pbc 0325.pdf

Conscientious Objection

- Assisted Dying in Jersey Ethical Review Report.pdf -led by Richard Huxtable.
 page 61 -68 presents considerations about conscientious objection
- Conscientious objection and physician-assisted suicide: a viable option in the UK? | BMJ Supportive & Palliative Care
- 18.03.25: Rejection of Rebecca Paul's amendment 'No detriment for care home or hospice not providing assistance' In this session, the Rt Hon Kit Malthouse MP twice suggested that hospices non-compliance would impact on funding.
- Terminally Ill Adults (End of Life) Bill (Twenty-fifth Hansard UK Parliament
- Terminally Ill Adults (End of Life) Bill (Twenty-fourt Hansard UK Parliament

Equity

 <u>Terminally Ill Adults (End of Life) Bill (3rd March 2025)</u> supplementary written evidence Jamilla Hussain