
Report Stage: Tuesday 22 April 2025

Terminally Ill Adults (End of Life) Bill, As Amended

(Amendment Paper)

This document lists all amendments tabled to the Terminally Ill Adults (End of Life) Bill. Any withdrawn amendments are listed at the end of the document. The amendments are arranged in the order in which it is expected they will be decided.

★ New Amendments.

New Amendments: 28 and 29 and NC4

Dame Meg Hillier

NC1

Naz Shah
Antonia Bance
Jess Asato
Kirsteen Sullivan
John Grady

Patricia Ferguson
Simon Hoare
Adam Jogee
Mary Kelly Foy
Wera Hobhouse
Melanie Ward
Barry Gardiner
Tim Farron
Rachael Maskell

John Lamont
Lillian Jones
Ms Marie Rimmer
Margaret Mullane
Derek Twigg
Marsha De Cordova
Monica Harding
Juliet Campbell

Bradley Thomas
Sir Desmond Swayne
John Glen
Dame Harriett Baldwin
Gill Furniss
Neil Coyle
Rosie Duffield
Sir Julian Smith

To move the following Clause—

“No health professional shall raise assisted dying first

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 it.”

Dame Meg Hillier

NC2

Naz Shah
 Antonia Bance
 Jess Asato
 Kirsteen Sullivan
 Sojan Joseph

John Grady
 Bradley Thomas
 Sir Desmond Swayne
 Ms Marie Rimmer
 Margaret Mullane
 Derek Twigg
 Marsha De Cordova
 Monica Harding
 Tim Farron

Patricia Ferguson
 Simon Hoare
 Adam Jogee
 John Glen
 Dame Harriett Baldwin
 Gill Furniss
 Neil Coyle
 Daisy Cooper
 Juliet Campbell

John Lamont
 Lillian Jones
 Sean Woodcock
 Mary Kelly Foy
 Wera Hobhouse
 Melanie Ward
 Barry Gardiner
 Rosie Duffield
 Rachael Maskell

To move the following Clause—

“No health professional shall raise assisted dying with a person under 18

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 under the age of 18.”

Sir Edward Leigh

NC3

To move the following Clause—

“Guidance: administration of pain relief to people who are terminally ill

- (1) Within six months of the passing of this Act, the Secretary of State must issue guidance to—
 - (a) chief officers of police, and
 - (b) healthcare professionals about the application of the criminal law in respect of the administration of pain relief by healthcare professionals to people who are terminally ill.
- (2) The guidance must in particular include guidance about the application of the criminal law in cases where a healthcare professional administers pain relief to a person who is terminally ill shortly before the end of their life.
- (3) In preparing guidance under subsection (1), the Secretary of State must consult—
 - (a) people who are terminally ill and their families;
 - (b) healthcare professionals;
 - (c) the Director of Public Prosecutions;
 - (d) the Attorney General;
 - (e) the Welsh Ministers; and
 - (f) such other persons as the Secretary of State considers relevant.
- (4) The Secretary of State may revise guidance issued under this section.

- (5) The Secretary of State must arrange for guidance issued under this section to be published.”

Member's explanatory statement

This new clause would require the Secretary of State to issue guidance on the administration of pain relief to people who are terminally ill, including on the application of the criminal law in cases where a healthcare professional administers such pain relief.

Andrew Pakes

NC4

★ To move the following Clause—

“Monitoring by Chief Medical Officer

- (1) The relevant Chief Medical Officer must—
- (a) monitor the operation of the Act, including compliance with its provisions and any regulations or code of practice made under it,
 - (b) investigate, and report to the appropriate national authority on, any matter connected with the operation of the Act which the relevant national authority refers to the relevant Chief Medical Officer, and
 - (c) submit an annual report to the appropriate national authority on the operation of the Act.
- (2) The relevant Chief Medical Officer’s 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 9(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 10(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 17(6).
- (3) 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.
- (4) When preparing an annual report, the relevant Chief Medical Officer must consult—
- (a) The Commissioner, and
 - (b) such persons appearing to the relevant Chief Medical Officer to represent the interests of persons who have protected characteristics as the relevant Chief Medical Officer considers appropriate.
- (5) 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.
- (6) In this section “appropriate national authority” means the Secretary of State or the Welsh Ministers.
- (7) In this section “protected characteristics” has the same meaning as in Part 2 of the Equality Act 2010 (see section 4 of that Act).
- (8) In this section “relevant Chief Medical Officer” has the meaning given by section 37(5).”

Member's explanatory statement

This new clause would require the monitoring, investigation and reporting functions set out in the Bill to be carried out by the Chief Medical Officer instead of the Voluntary Assisted Dying Commissioner.

Dr Ben Spencer

18

Clause 2, page 2, line 6, leave out from “expected” to end

Member's explanatory statement

This amendment would remove the six-month time limit for a person to be eligible for an assisted death.

Tom Gordon

4

Vikki Slade
Neil Duncan-Jordan

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

- “(i) in the case of a neurodegenerative illness or disease, within 12 months; or
- (ii) in the case of any other illness or disease, within 6 months.”

Naz Shah

14

Dame Meg Hillier
Rachael Maskell
Melanie Ward
Neil Coyle

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

- “(1A) 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 voluntarily stopping eating or drinking.”

Member's explanatory statement

This amendment means that someone who is not terminally ill within the meaning of subsection (1) cannot bring themselves within that definition by voluntarily stopping eating or drinking or both.

Daniel Francis

24

Melanie Ward
Neil Coyle

Clause 3, page 2, line 18, at end insert "except that section 1(2) of that Act shall not apply"

Member's explanatory statement

This amendment would disapply the presumption that a person has capacity unless the opposite is established.

Dr Ben Spencer

17

Clause 3, page 2, line 18, at end insert—

- "(2) For the purposes of the assessment of a person's capacity under this Act the information relevant to the decision as specified under section 3(1)(a) of the Mental Capacity Act 2005 must include, but is not limited to—
- (a) 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 care and treatment,
 - (b) 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) a decision to proceed under this Act does not prevent or make unavailable any care and treatment provision that would normally be provided,
 - (d) 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) 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) a decision to proceed under this Act is a decision to self-administer a substance to end their own life,
 - (g) 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) relevant legal consequences from proceeding with a request for assistance to end their own life, including life insurance and categorisation of death certification.”

Patricia Ferguson

13

Dame Meg Hillier
 Rachael Maskell
 Melanie Ward
 Neil Coyle

Clause 4, page 2, line 22, at end insert—

“(2A) A person may not be appointed under subsection (2) unless the appointment has the consent of the Health and Social Care Select Committee of the House of Commons.

- (2B) 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 exercisable.”

Dame Meg Hillier

2

Naz Shah
 Antonia Bance
 Jess Asato
 John Grady
 Patricia Ferguson

John Lamont
 Lillian Jones
 Ms Marie Rimmer
 Dame Harriett Baldwin
 Gill Furniss
 Rosie Duffield
 Rachael Maskell

Bradley Thomas
 Sir Desmond Swayne
 Mary Kelly Foy
 Wera Hobhouse
 Melanie Ward
 Tim Farron

Simon Hoare
 Adam Jogee
 Margaret Mullane
 Derek Twigg
 Marsha De Cordova
 Juliet Campbell

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

Member's explanatory statement

This amendment is consequential to NC1.

Rachael Maskell

26

Sir Desmond Swayne
 Graham Stringer
 Margaret Mullane

Clause 5, page 3, line 20, leave out “, hospice or”

Member's explanatory statement

This amendment leaves out reference to a hospice, since this is a setting for the provision of palliative care.

Rachael Maskell

25

Sir Desmond Swayne
Graham Stringer
Margaret Mullane

Clause 9, page 6, line 3, leave out from “person” to the second “the” in line 5 and insert “convene a panel to carry out the first assessment.

“(1A) The clinical panel should consist of—

- (a) a social worker,
- (b) a psychiatrist,
- (c) a palliative care consultant, who is on the GMC Specialist Register,
- (d) the patient’s consultant if the co-ordinating doctor is a GP or the patient’s GP if the Co-ordinating doctor is a consultant, and
- (e) the co-ordinating doctor.

(1B) The clinical panel must first establish why a person wants to end their life through an assisted death.

(1C) The clinical panel must provide the person with information on the support available to the patient for the duration of their life.

(2) “The first assessment” is an assessment to ascertain whether, in the opinion of the clinical panel,”

Member's explanatory statement

This amendment would establish a clinical panel to conduct the first assessment. The panel would be required to establish why the person wants to end their life through an assisted death and provide the person with information on the support available to the person for the duration of their life.

Jess Asato

9

Dame Meg Hillier
Rachael Maskell
Melanie Ward
Neil Coyle

Clause 11, page 9, line 25, leave out paragraph (g) and insert—

- “(g) 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.”

Anna Dixon

22

Jess Asato
Tom Morrison
Sarah Olney

Clause 11, page 9, line 28, leave out from “must” to end of line 33 and insert “consult such other health and social care professionals with qualifications in, or experience of, a matter relevant to the person being assessed, including but not limited to clinical, psychological and social matters.”

Member's explanatory statement

This amendment would require the assessing doctor to consult other health professions and other persons as the assessing doctor sees fit on clinical, psychological and social matters relevant to the person.

Sojan Joseph

5

Rachael Maskell

Clause 15, page 12, line 29, at end insert—

“(j) that there are no psychological, social or environmental factors influencing the person to make the decision.”

Member's explanatory statement

This amendment ensures that the panel must be satisfied that no psychological, social or environmental factors are influencing the decision of a person to seek assisted dying.

Catherine Atkinson

6

Dame Meg Hillier
Rachael Maskell
Melanie Ward
Neil Coyle

Clause 15, page 12, line 33, leave out “may” and insert “must”

Member's explanatory statement

This amendment would require the panel to question the coordinating doctor or the independent doctor.

Catherine Atkinson

7

Dame Meg Hillier
Rachael Maskell
Melanie Ward
Neil Coyle

Clause 15, page 12, line 35, leave out “may” and insert “must”

Member's explanatory statement

This amendment would require the panel to question the person seeking an assisted death.

Jess Asato**10**

Dame Meg Hillier
Rachael Maskell
Melanie Ward
Neil Coyle

Clause 15, page 12, line 36, 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;”

Catherine Atkinson**8**

Dame Meg Hillier
Rachael Maskell
Melanie Ward
Neil Coyle

Clause 15, page 12, line 38, at end insert—

“(ca) must consider hearing from and questioning—
(i) persons properly interested in the welfare 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;”

Member's explanatory statement

This amendment would require the panel to consider hearing from those with an interest in the welfare of the person and those who have provided treatment to them.

Jess Asato**11**

Dame Meg Hillier
Melanie Ward
Neil Coyle

Clause 15, page 13, line 4, 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.”

Juliet Campbell

23

Melanie Ward
Neil Coyle

Clause 15, page 13, line 14, at end insert—

“(ca) where the person to whom the referral relates is under the age of 25, their next of kin;”

Rachael Maskell

27

Sir Desmond Swayne
Graham Stringer
Margaret Mullane

Clause 25, page 21, line 7, at end insert—

“(2A) The doses and types of lethal drugs specified in any regulations made under subsection (1) must be licensed by the Medicines and Healthcare products Regulatory Agency.

(2B) The doses and types of lethal drugs to bring about the person’s death must be recommended by the guidelines of either—

(a) the National Institute of Clinical Excellence, or

(b) the All Wales Medicines Strategy Group in Wales, as appropriate, prior to licensing.”

Member's explanatory statement

This amendment will require the doses and types of lethal drugs to be licensed by the Medicines and Healthcare products Regulatory Agency and to be recommended by either the National Institute of Clinical Excellence or the All Wales Medicines Strategy Group in Wales as appropriate prior to licensing.

Florence Eshalomi

16

Dame Meg Hillier
Rachael Maskell
Melanie Ward
Neil Coyle

Clause 28, page 22, line 35, insert—

“(3) There is no obligation on any care home or hospice regulated by the Care Quality Commission or the Care Inspectorate Wales to permit the provision of assistance under this Act on their premises.”

Member's explanatory statement

This amendment prevents there being any obligation on a care home or hospice which is regulated in England or Wales to permit the provision of assistance under the Act on their premises.

Dr Ben Spencer

19

Clause 36, page 27, line 17, an end insert—

- “(ba) how the provisions of this Act relate to the operation of—
- (i) the Government’s strategy on suicide prevention,
 - (ii) the duties on clinicians and others to secure the right to life, including of those at risk of suicide, under paragraphs 1 and 2 of Article 2 (Right to Life) set out in Schedule 1 of the Human Rights Act 1998,
 - (iii) the Mental Health Act 1983,
 - (iv) deprivation of liberty safeguards as set out in Schedule A1 to the Mental Capacity Act 2005, and
 - (v) liberty protection safeguards as set out in Schedule AA1 to the Mental Capacity Act 2005.”

Dr Ben Spencer

20

Clause 36, page 28, line 5, leave out subsection (8) and insert—

- “(8) 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.”

Dame Siobhain McDonagh

12

Dame Meg Hillier
Rachael Maskell
Melanie Ward
Neil Coyle

Clause 38, page 28, line 36, leave out subsections (4) and (5) and insert—

- “(4A) Regulations under subsection (1) may not amend, modify or repeal section 1 of the National Health Service Act 2006.”

Blair McDougall

15

Dame Meg Hillier
Rachael Maskell
Melanie Ward
Neil Coyle

Clause 38, page 29, line 5, 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 to persons whom the body has assessed under section 9(1);
 - (c) the number of persons whom the body has assessed under section 10(1);
 - (d) the number of persons to whom assistance has been provided under section 23(2);
 - (e) the cost and revenue associated with providing such assistance; and
 - (f) any other matter that the Secretary of State may specify.”

Member's explanatory statement

This amendment would require private providers of the services permitted under the Act to publish annual statements of the numbers of people to whom they have provided those services. It would also require them to disclose their associated costs and revenue.

Andrew Pakes

29

★ Clause 40, page 30, line 5, at end insert—

- “(5) Any notification to the Commissioner made pursuant to regulations under this section must be forwarded by the Commissioner to the relevant Chief Medical Officer.
- (6) The relevant Chief Medical Officer may exercise any power granted to the Commissioner under subsection (2).
- (7) In this section “relevant Chief Medical Officer” has the meaning given by section 37(5).”

Munira Wilson

21

Paulette Hamilton
Jess Asato

Clause 43, page 31, line 15, at end insert—

- “(4) For the first reporting period referred to under subsection (2) (a) the report must set out an assessment of the state of health services to persons with palliative and end of life care needs and the implications of this Act on those services.
- (5) The report (4) must, in particular, include an assessment of the availability, quality and distribution of appropriate health 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;
- (c) information about palliative care and how to access it."

Member's explanatory statement

This amendment would require the Secretary of State for Health and Social Care to prepare and publish an assessment of the availability, quality and distribution of palliative and end of life care services as part of the first report on implementation of the Act (to be undertaken within 1 year of the Act being passed). This would mirror the assessment already required as part of the 5 year review of the act.

Andrew Pakes 28

★ Page 31, line 32, leave out Clause 45

Member's explanatory statement

This amendment is linked to NC4.

Tom Gordon 3

Vikki Slade
Neil Duncan-Jordan

Clause 54, page 36, line 22, leave out "four" and insert "three"

Withdrawn Amendments

The following amendments were withdrawn on 31 March 2025:

1