

This public consultation seeks to widen the debate to all of those who live on our island and your responses will help shape the draft Bill which will then be brought to Tynwald for discussion.

Paper copies of the consultation are available from the Tynwald Reception desk and should be returned to:

Assisted Dying Bill Consultation  
c/o Clerk of Tynwald's Office  
Legislative Buildings  
Finch Road, Douglas  
Isle of Man  
IM1 3PW

## Introduction

### 1 What is your name?

Name

### 2 What is your email address?

Email

### 3 Are you responding on behalf of an organisation?

*(Required)*

*Please select only one item*

- Yes  
 No

### 4 If you answered "yes" to the previous question please state which organisation

Organisation

### 5 Are you responding as an individual or a group?

*(Required)*

*Please select only one item*

- Individual  
 Group

### 6 Are you resident on the Isle of Man?

*(Required)*

*Please select only one item*

- Yes  
 No

## 7 May we publish your response?

Please read our [Privacy Policy](#) for more details and your rights.

### More information

- Publish in full – your first name and surname, organisation name, along with full answers **will** be published on the hub (your email will **not** be published)
- Publish anonymously – only your responses **will** be published on the hub (your name, organisation and email will **not** be published)
- Do not publish – **nothing** will be published publically on the hub (your response will only be part of a larger summary response document)

*(Required)*

Please select only one item

- Yes, you can publish my response in full
- Yes, you may publish my response anonymously
- No, please do not publish my response

## Support for Proposal

We would now like to ask you some questions on your views on assisted dying.

*If you do feel affected by the contents of this consultation and would like to discuss your feelings further CRUSE Bereavement Care can give confidential advice and bereavement support. They can be contacted on 01624 668191.*

## 8 In principal, do you agree or disagree that assisted dying should be permitted for terminally ill adults on the Isle of Man?

- Agree
- Disagree
- Not Sure

Please explain the reasons for your response

## 9 Do you think that there should be a limit on their life expectancy?

- 6 months
- 12 months
- Longer
- Not Sure

## 10 Do you support the provision of assisted dying for someone who has a condition which causes unbearable suffering that cannot be alleviated by other means but which may not give a terminal diagnosis?

- Yes
- No
- Not Sure

11 If they are unable to take oral medication should a health care professionally be permitted to administer medication intravenously to achieve death?

- Yes  
 No  
 Not Sure

### Eligibility

*If you do feel affected by the contents of this consultation and would like to discuss your feelings further CRUSE Bereavement Care can give confidential advice and bereavement support. They can be contacted on 01624 668191.*

12 Do you agree that assisted dying should be available only to people over the age of 18 Years?

- Yes  
 No  
 Not Sure

13 Should they have to be permanent residents of the Isle of Man?

- Yes  
 No  
 Not Sure

14 If you agree they should be permanent residents please state for how long.

- For over 1 year  
 For over 5 years  
 Other

If you have ticked "Other", please provide some details

### Process

*If you do feel affected by the contents of this consultation and would like to discuss your feelings further CRUSE Bereavement Care can give confidential advice and bereavement support. They can be contacted on 01624 668191.*

15 Do you agree with the proposal that two different doctors should meet with the person independently and establish they are mentally competent to make an informed decision without pressure or coercion?

- Yes  
 No  
 Not Sure

**16** Should any health professional be able to conscientiously object to being part of an assisted dying programme?

- Yes  
 No  
 Not Sure

**17** Do you agree that if either doctor is unsure about the person's capacity to request an assisted death, the person should be referred to a psychiatrist for a further capacity assessment?

- Yes  
 No  
 Not Sure

**18** Do you agree that the two doctors should ensure that the person has been fully informed of palliative, hospice and other treatment and care options?

- Yes  
 No  
 Not Sure

**19** Do you support the proposal that the person signs a written declaration of their request, which is witnessed and signed by both doctors?

- Yes  
 No  
 Not Sure

**20** Do you agree that there should be a waiting period of 14 days from this time to the provision of life ending medication to allow the person to reconsider their decision?

- Yes  
 No  
 Not Sure

**21** Do you feel that this period should be shortened to 7 days if the person is expected to die within 30 days?

- Yes  
 No  
 Not Sure

**22** Should the person themselves or a relative be able to collect the relevant medication from a designated pharmacist?

- Yes  
 No  
 Not Sure

**23** Should this be able to be stored securely in the person's home until they decide whether they want to take it or not?

- Yes  
 No  
 Not Sure

**24** If they change their mind should the medication be returned to the pharmacy immediately?

- Yes  
 No  
 Not Sure

**25** Should a health care professional be required to be with the patient once they have taken the medication until they are certified to have died?

- Yes  
 No  
 Not Sure

**26** Should an annual report be produced regarding the number of people who have taken advantage of assisted dying, and be published?

- Yes  
 No  
 Not Sure

**27** Should it be possible to include the provision of assisted dying in a "living will" or advanced directive?

- Yes  
 No  
 Not Sure

**28** Do you have any comments on the process to provide Assisted Dying which will be included in the draft Bill

Any other comments...