

The Revd Canon Peter Holliday, Group Chief Executive of St Giles Hospice in Lichfield, which cares for more than 6,000 patients a year, and Deputy Chair of Hospice UK, said the Assisted Dying Bill due to be debated in Parliament tomorrow "would put thousands of society's most vulnerable members at risk. It could also put hospices at risk. Some of our local funding streams from the NHS have been chipped away in recent years and those remaining have become more dependent upon doing things in the way the NHS requires. Rue the day when funding becomes dependent upon hospices' willingness to facilitate assisted dying."

In an interview with the Church of England, Canon Holliday said: "If there is no possibility within the final legislation for hospices to opt out of being a part of what is effectively assisted suicide, then there is nervousness about where our funding might be found in the future. Would the public continue to support us and indeed would the NHS continue to give us grants under contract?"

Canon Holliday said the Assisted Dying Bill also contains no opt out for organisations opposed to assisted suicide in spite of high levels of opposition to a change in the law amongst palliative care doctors. Where hospices did permit assisted suicide the potential frictions amongst staff could be 'enormous' with possible difficulties in recruiting doctors willing to participate, he said.

"The National Health Service requires us, in our contracts, to comply with the requirements of the NHS. Now if the NHS is going to be required to offer assisted dying there is of course the possibility that it would require us or an organisation contracting with the NHS also to offer assisted dying. If we as an organisation were able, and at the moment under the terms of the bill there is no indication we would be able, but if we were able to say that assisted dying was not something that would happen on our premises, would that prejudice our funding from the NHS?"

Canon Holliday added that the passing of the law might leave hospices with staff who were unwilling to offer assisted suicide and the implications for hospices in particular had not been thought through: "I think my real concern would be the staff team, and indeed with the team of volunteers that hospices tend to have a higher proportion of people who are against assisted suicide, within their staff and volunteer team than the general public, and if a hospice was required to offer assisted suicide, and you have a staff team where some are dramatically opposed because they really believe in the hospice ethos of giving the best possible care until a natural death, and you have some members of the team who are prepared to be a part of assisted suicide, the potential frictions within the staff team would be enormous; how you keep a staff team together and working together to the same ends when you have that very distinct split; I don't know."

His comments follow those of Kerry Jackson, Chief Executive of St Gemma's Hospice in Leeds who said in July that "a legislative requirement on St Gemma's to offer assisted suicide would be in direct conflict with our objects as a charity; we want to continue to offer compassionate palliative and end of life care together with education and research, the central tenets of our organisational being."

In her article for the ehospice website Kerry Jackson continued "The Assisted Dying Bill, which would licence doctors to supply drugs to terminally ill patients to enable them to die by suicide, has the possibility of profoundly affecting hospice care....St Gemma's Hospice, in providing and

promoting palliative and end of life care, intends neither to hasten nor postpone death. Providing treatment to alleviate symptoms and withdrawing treatment where it is in the best interests of the patient are consistent with this intention. Assisted suicide is not consistent with this intention."

Notes

- Read Peter Holliday's blog and his interview with the Church of England
- Learn more about the Assisted Dying Bill on the Church of England podcast
- Kerry Jackson article from July 2015 can be found here
- Also see the **joint statement on the Assisted Dying No 2 Bill** from the National Council for Palliative Care, Association for Palliative Medicine and National Palliative Care Nurse Consultants Group

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