



16 October 2019

Anthony Hill
Health and Disability Commissioner
By email: sue.o'connor@hdc.org.nz

Dear Mr Hill

End of Life Choice Bill – SOP no 259 Consultation

Thank you for your letter dated 25 September 2019 providing further feedback on Supplementary Order Paper 259 on the End of Life Choice Bill. I am pleased to note that my previous letter dated 30 July 2019 addressed many of your concerns which were raised in your letter dated 25 July 2019.

The debate on Parts 1, 2, 3 and 4 of the End of Life Choice Bill has concluded with all amendments set out in SOP 259 agreed to by the Committee of the Whole House. The debate on the assisted dying process set out in the Bill concluded on 21 August. The only remaining debate regards the title of the Bill and its commencement; however, as I have welcomed consultation with you, I do wish to respond to your recommendations.

It is not necessary to expressly state in clauses 14 – 16 that the attending medical practitioner must re-assess an eligible person's competence. Not only is it clear from the word "eligible" used throughout these clauses that a person must remain competent to make an informed decision about assisted dying, but compliance with the requirements necessitate the person having this level of competence. For example:

- Clause 14(2)(b) and (c) require the attending medical practitioner to hold a discussion with the person. If the person was unable to understand, retain, or process the information the medical practitioner would not be able to hold a discussion with the person.
- Clause 15(3)(d) requires the attending medical practitioner to ensure that the person knows they can change their mind. The attending medical practitioner would be unable to ensure this if the person was unable to understand, retain, or process the information (and therefore have this knowledge).

David Seymour MP

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- Clause 16(2) requires the attending medical practitioner or nurse practitioner to ask the person to choose between three options. If the medical or nurse practitioner was not satisfied that the person was able to choose between the three options and communicate their choice (therefore not in fact making a choice) they would not proceed under clause 16(4).

If the attending medical practitioner has any doubts as to the person's ability to make an informed decision at any of these points, they would not be able to comply with the requirements of the legislation and must stop the procedure, being mindful that to do otherwise would risk losing immunity under clause 26.

Kind Regards

A handwritten signature in blue ink, appearing to read 'D Seymour', is written over a horizontal dashed line.

David Seymour
Leader of the ACT Party and MP for Epsom