Hospice UK briefing on Report Stage of the Terminally Ill Adults (End of Life) Bill – 19 May 2025

On Friday 16th May, the Terminally Ill Adults (End of Life) Bill reached its Report Stage in the House of Commons. This gave MPs the opportunity to debate and vote on specific changes to the Bill, following amendments made by a smaller group of MPs during Committee Stage.

The next stage of the Bill will be the second day of Report Stage, taking place on Friday 13th June, when MPs will debate further proposed changes. This will be followed by Third Reading, likely on Friday 20th June. Third Reading will be a significant stage of the Bill process, representing the final time MPs will get to vote on the Bill as a whole. The outcome of this vote will determine whether the Bill proceeds to the House of Lords for further debate and scrutiny.

Changes made to the Bill

Only one change was made to the Bill which was an amendment from the Bill sponsor, Kim Leadbeater MP, which strengthens conscientious objection protections. These now explicitly cover all health professionals, including pharmacists and pharmacy technicians. This amendment also strengthens employment protections against discrimination and unfair dismissal for anyone who chooses not to take part in the provision of assisted dying if the law changes.

Key issues raised

Improving palliative and end-of-life care

MPs across the spectrum of views on assisted dying emphasised the need to improve palliative and end-of-life care. Some argued that this must happen before any legal change is made on assisted dying, while others suggested improvements can and should take place alongside the Bill's passage through Parliament.

The role of hospices

MPs debated amendments that would allow have allowed hospices and care homes to formally opt out of providing assisted dying. None of these amendments were added to the Bill.

Concerns about the practical implications of these were raised by both the Bill's sponsor, Kim Leadbeater MP, and the Minister for Care, Stephen Kinnock MP. Kim Leadbeater MP warned of unintended consequences for patient care, particularly where clinicians work across multiple organisations or settings. Minister Kinnock highlighted the potential risk of hospices and care homes facing legal challenges under the European Convention of Human Rights. He used the scenario of a long-term care home resident being forced to leave their care home to access assisted dying elsewhere, due to the institution's policy of not providing assistance in accordance with the Bill

Other

There was debate over whether doctors should be allowed to proactively raise assisted dying with patients, including 16-17 year olds transitioning into adult services. The current version of the Bill neither requires nor prohibits such conversations. Amendments to restrict this were debated but did not pass.

Supporters of the amendments were concerned about vulnerable patients feeling pressured. Opponents argued the restrictions would conflict with clinicians' ethical responsibilities and the trust in patient-clinician relationships.

A small number of MPs called for the Bill to be expanded to include people with neurodegenerative conditions. These amendments were not accepted.

Some MPs shared concerns about how the Bill risks exacerbating the inequities minoritised groups, including Black and disabled communities, already experience when accessing healthcare.

Our response

We are continuing to work constructively with the Bill sponsor, Kim Leadbeater MP and to brief all MPs ahead of key debates to ensure the voice of the hospice sector is heard should the law change on assisted dying. Following a recent meeting with our CEO, Toby Porter, Kim Leadbeater MP shared the following in a written follow up: *"one thing I can do is to ensure to the best of my ability that nothing in the Bill damages the sector or adds to the financial pressure it faces."*

There remain important and complex considerations about what should be included directly in the Bill and what could be addressed during the implementation phase, should the Bill become law. If the Bill is passed, we would like to see the government coproduce national policy with the hospice sector that supports hospices to navigate the impact of the introduction of assisted dying, and provides hospices with the agency to make the best decisions for their staff, patients and communities.

Regardless of the Bill's outcome, we are clear that there must be urgent reform of the hospice funding model alongside a commitment to making high-quality palliative care is available to everyone, everywhere.

You can find our public response to the debate **here.**

For more information, please email our Policy team at policy@hospiceuk.org.