

#188

**COMPLETE**

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## PAGE 2: Proposed Organ and Tissue Donation (Scotland) Bill Consultation

**Q1: The overarching purpose of my proposal is to move from the current opt-in system to a soft opt-out system of organ donation. Do you support this move? Please indicate "yes/no/undecided" and explain the reasons for your response.**

No,

Please give your reasons for your response:  
I am aware of strong objections from my other ICU colleagues Could potentially lead to difficulties dealing with families in a very emotionally charged situation In principle, I disagree with any move in which a central authority feels that they own a dead body to do with it what they wish

**Q2: How essential is it to change the law (from an opt-in to a soft opt-out system) in order to achieve the intended benefits (increased transplant rates, reduced waiting lists)? Are there other (non-legislative) measures that could achieve similar outcomes without the need for legislation?**

Improved education with a comprehensive educational programme including schools, colleges, TV programmes, You tube videos etc

The programmes need to deal with the concept of brain stem death, non heart beating donation and the practicalities and difficulties of donation in these situations

**Q3: I believe the role of the family should be limited to being consulted on whether they are aware of any (unregistered) objection by the deceased rather than asking for their consent. Do you agree? Please indicate "yes/no/undecided" and explain the reasons for your response.**

Undecided,

Please give reasons for your response:  
[REDACTED] it is a very difficult situation when they are adamant against donation, even when their relative was on the organ donor register, and these organs are usually lost rather than go to court. It would be even more difficult to continue to take organs if there was presumed consent and the relatives strongly objected

**Q4: Do you think an individual should be able to appoint a proxy to the make the final decision regarding transplantation on their behalf? Please indicate "yes/no/undecided" and explain the reasons for your response.**

Yes,

Please give reasons for your response:  
I think this would help, as often it is difficult to get all members of a family to agree and a proxy who has consent on behalf of the patient (and aware of their wishes) would help. A Proxy may also help in success of harvesting organs in someone who has not put their name of the register, but the proxy knows that they would wish to donate.

**Q5: My proposal is that only adults should be automatically opted-in to be a donor. Younger persons would have to register to be a donor, by themselves or with parental consent as they currently do. This approach is I believe the best way to safeguard children and young people. Do you agree? Please indicate "yes/no/undecided" and explain the reasons for your response.**

Yes

**Q6: Do you agree the age limit for an adult should be set at 16 years old? Please indicate "yes/no/undecided" and explain the reasons for your response.**

No,

If you answered no, what would you consider a more appropriate age?  
I think 18 would be better

**Q7: Do you agree the soft opt-out system should apply to people who have been resident in Scotland for a minimum period of 1 year prior to their death? Please indicate "yes/no/undecided" and explain the reasons for your response.**

No,

Please give reasons for your response:  
Don't agree with soft opt-out at all, and don't think that Scotland should be any different to England so it should not matter where they live and how long for

**Q8: If you answered no to the above how long, if any, should this period of residency last before they become subject to the soft opt-out system? Would this residency need to be for a continuous period?**

As above

**Q9: Do you think 6 months is a long enough period to run a campaign prior to change over?**

No, longer

**Q10: What is your assessment of the likely financial implications (if any) of the proposed Bill to you or your organisation? What (if any) other significant financial implications are likely to arise?**

Perhaps a longer duration in ICU for donors if the numbers increase

**Q11: Is the proposed Bill likely to have any substantial positive or negative implications for equality? If it is likely to have a substantial negative implication, how might this be minimised or avoided?**

If organs could automatically be taken from those with mental health problems or learning difficulties/disabilities, then these people may not have understood the concept of opting out and thus not had the chance to do so. This inequality exists

**Q12: Do you have any other comments on or suggestions relevant to the proposal?**

Sounds a good idea for those who want to increase the number of organs harvested, but this is a step too far and would create a whole host of new problems in those who deal with the situation of requesting organs in ICU patients. Potentially would destroy their relationship with families at this time

**Q13: If you wish your response, or any part of it, to be treated as anonymous and/or confidential, please check the appropriate box. If not, then please go to question 14.**

Anonymous

**Q14: Thank you for completing this survey. Please provide your name and contact details below.**

Name

Company

Address

Address 2

City/Town

State/Province

ZIP/Postal Code

Country

Email Address

