

#384

**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.

Undecided,

Please give your reasons for your response:
Whilst I favour opt out I wonder how the law will deal with the issue of adults who lack capacity to consent or to withdraw presumed consent.

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?

I am not aware of any other effective measures. Has any other country achieved similar outcomes without resorting to legislative measures?

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.

Yes,

Please give reasons for your response:
Uncomfortable though they may be with the decision it is the wishes of the deceased that are important. No doubt, if the family have strong grounds for objecting they can simply lie about the deceased's wishes anyway.

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

Undecided,

Please give reasons for your response:
I think this decision is for the individual to make. If they are capable of appointing a proxy then they are capable of making up their own minds about transplantation. If they lack capacity then it would be wrong of the welfare guardian, or anyone else, to presume that they would have consented unless they formerly had capacity and expressed an opinion at that time.

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,

Please give reasons for your response:
I believe that there should be safeguards and this seems a sensible approach.

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?
It should be set at the age of consent, provided that it can be shown that the young person fully comprehends what is being consented to. Presumably anyone can choose to opt out at a later date should they regret their decision or join a religious or other movement that has fundamental objections.

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.

Undecided,

Please give reasons for your response:
There could be problems if this law only applies in Scotland. How does someone newly resident get to know about it? If opt in applies where they have come from, and if a check of the system shows that they did not opt in before moving to Scotland, it should be assumed that they did not wish to opt in, unless a relative knows differently. Perhaps, as they will need to register with a GP, the issue should be raised as a standard question in the initial medical check-up that most GPs offer to new patients - or even part of the actual registration process.

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?

5 years if there is no process to ascertain their feelings on the subject,

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

Probably.

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?

None that I can think of.

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?

As mentioned above, it may have negative implications for people who lack capacity. Where someone is known to lack capacity to consent or withdraw consent, and has not previously had the capacity and expressed a view, it should be presumed that they did not consent.

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

No further comments.

PAGE 3: Contact Details

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.

Respondent skipped this question

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

