-----Original Message-----

From: Ian Davidson <[REDACTED]

Sent: 14 April 2024 12:37

To: [REDACTED]

Subject: Re: Palliative Care Bill/In support

CAUTION: This e-mail originated from outside of The Scottish Parliament. Do not click links or open attachments unless you recognise the sender and know the content is safe.

Hi Alex

The formatted document defeated me, as do most things of this century/millenium! Here are my responses to Q in same order:

You can take as agreed all privacy etc declarations; quite happy for my views to be published by name. I don't represent any group; previous informal connections to hospice movement; elderly family bereavements, previous role as welfare rights adviser, now retired.

Hope this is helpful in the journey to progress this worthy cause.

Ian Davidson

[REDACTED]

Renfrewshire South/West of Scotland.

1. Strongly agree.

Should be self evident. Current legal distinctions between clinical, palliative, public health and social care = bureaucratic obstacle to delivering what most folks would expect from a NHS? The current funding structure for palliative care is nonsensical, with only 1/3 core health funding?

2. WHO definition is basic and wider definition quoted better? Forthcoming legislation on NCS, Assisted Dying also of relevance to definition? Health/care should be seamless? Wider cultural/societal issue of dying/death taboo? Younger health professionals don't fully understand?

3. Strongly Agree.

Essential to consult widely with all social groups to identify any equalities/rights issues in advance. Religious/cultural views of dying variable. Hard to think of any groups which may be disadvantaged by proposals, but modern society is so fragmented and sensitive to grievance, that only sure method is to consult widely?

4. Frankly, I don't have much faith in current IJB structure which lacks transparency yet that is the logical planning/funding body? Inevitably, rural areas and islands will have different needs/ways of delivering services?

5. Passing new laws is fine but unless funding and other resources are provided consistently then = unsatisfactory implementation? Needs to be part of wider reform to current health/care provision. Essential pre-requisite to any Assisted Dying laws; we should have excellent and integrated health/care system to meet all needs from "womb to tomb" before we start legalizing assisted dying?

End response//14.4.24.

On 11 April 2024, at 13:18, "[REDACTED] wrote:

Thank you Ian. Best, Alex

-----Original Message-----

From: Ian Davidson <[REDACTED]

Sent: 31 March 2024 17:19

To: Briggs M (Miles), MSP <Miles.Briggs.msp@parliament.scot>

Subject: Palliative Care Bill

CAUTION: This e-mail originated from outside of The Scottish Parliament. Do not click links or open attachments unless you recognise the sender and know the content is safe.

Hi Miles

Have signed Marie Curie/pall care petition. I have never understood why hospices have to raise most of their funds via charity.

Would be much happier with discussion of Assisted Dying Bill if health/palliative/social care services were fully funded and run effectively; we are a long way from that!

Regards

Ian Davidson

[REDACTED]