

## TERMS OF REFERENCE

<b>Title</b>	Assisted Dying Working Group – health and care professionals
<b>Accountable to</b>	Assisted Dying Professional Leads Group
<b>Purpose</b>	The purpose of the working group is to inform and support the development of a draft assisted dying law, and associated workstreams, including input and advice on developing the outline professional guidance. The group will operate in an advisory capacity and is not intended to have a decision-making function.
<b>Objective</b>	The working group will meet with policy officers and provide input and feedback on matters put forward by the policy team and/or professional leads group, in order to give the perspective of health and care professionals working in areas of practice relevant to the development of assisted dying proposals and/or likely to be impacted by the introduction of an assisted dying service.
<b>Responsibilities</b>	<p>The responsibilities of the working group will be to consider, provide input and advise on the following matters:</p> <ul style="list-style-type: none"> <li>• engagement with health and care professionals</li> <li>• ad hoc law drafting matters</li> <li>• assisted dying risk assessment</li> <li>• developing training brief for: <ul style="list-style-type: none"> <li>• assisted dying practitioners mandatory training; and</li> <li>• basic training for all on-island health and care professionals</li> </ul> </li> <li>• the development of draft professional guidance outline</li> <li>• any other matters raised by the working group and/or professional leads group</li> </ul> <p>And to:</p> <ul style="list-style-type: none"> <li>• feedback on matters to professional leads group, as required</li> <li>• cascade information/ feedback to the member’s team/department on key matters, as agreed by the group and/or directed by the Professional Leads group – in particular, the staffing survey</li> </ul>
<b>Membership</b>	<p>Flexible membership model, dependent on agenda items to be discussed– attendance required only for:</p> <ul style="list-style-type: none"> <li>• matters that directly relate to the member’s role; and</li> <li>• whole group issues</li> </ul>
<b>Meeting frequency</b>	Every 6 weeks
<b>Papers</b>	Agenda and any papers will be circulated by the policy team two working days before the meeting.
<b>Notes of meetings</b>	Action notes and decisions will be recorded by policy team and circulated to working group within 7 working days of the meeting.
<b>Confidentiality</b>	Papers are circulation restricted and should be marked “restricted-official sensitive”

## Membership of group

	<b>Area/Dept representation</b>
<b>1</b>	Palliative care [Chair]
<b>2</b>	Oncology
<b>3</b>	Frailty/old age/stroke
<b>4</b>	Old age/general medicine
<b>5</b>	Jersey Hospice
<b>6</b>	Respiratory team
<b>7</b>	FNHC (community nursing)
<b>8</b>	Pharmacy
<b>9</b>	GPs
<b>10</b>	Adult social Care
<b>11</b>	Home Care Agency
<b>12</b>	Care Home
<b>13</b>	Wellbeing/spiritual representative
<b>14</b>	Allied Health Professional
<b>15</b>	Patient Representative
<b>16</b>	Strategic Health Policy

*TOR and membership as agreed November 2024 - both the Terms of Reference and membership of the group are subject to review and update as the work progresses.*