

Briefing from the Royal College of Psychiatrists

The Terminally Ill Adults (End of Life) Bill for England and Wales
House of Commons | September 2026



Introduction

The Royal College of Psychiatrists does not take a position on the principle of assisted dying / assisted suicide. The central question for Parliament is not simply whether assisted dying should be available, but whether the safeguards are robust enough to protect people whose decisions may be influenced by treatable mental health conditions or unmet care needs.

Whatever view MPs take on the principle of assisted dying, **there should be broad agreement that legislation of this significance must be supported by clear, effective and workable safeguards.** The Royal College of Psychiatrists has identified key areas where the Bill could be strengthened to improve safeguards and ensure psychiatrists are only asked to undertake roles within their professional expertise.

If passed, assisted dying legislation should include:

1. A mandatory holistic multidisciplinary assessment, including assessment of mental health needs, for every applicant.
2. A clear and legally coherent role definition for psychiatrists that is limited to areas of professional expertise.

1. Identifying and addressing unmet need before an assisted death

A request for assisted dying when a person is terminally ill may be influenced by factors, including depression, psychological distress, social isolation, financial pressures, fears about being a burden, and unmet symptom control, care and support needs. Many of these factors are also recognised risk factors for suicide among people living with terminal illness. With appropriate treatment, care and support, they may change over time, making it essential that they are identified before irreversible decisions are made.

The Bill currently requires discussion of available support, but it does not require a formal assessment of unmet mental health need or guarantee that support will be available where need is identified. As a result, a person could progress through the assisted dying process without receiving interventions that might alter their circumstances, wellbeing or outlook.

Recommendation: Amend the Bill to require a mandatory holistic multidisciplinary assessment from the outset, including assessment of mental health needs. Where unmet need is identified, applicants should be offered appropriate treatment and support before an application progresses further.

2. The role of psychiatrists must be clear and within their professional expertise

Psychiatrists are experts in the assessment and treatment of mental disorders. Their role within any assisted dying framework should be confined to those areas of professional expertise and responsibility.

The Bill envisages psychiatrists supporting capacity assessments and playing a role in determining eligibility for assisted dying. However, significant questions remain about whether the legal framework is sufficient to support these responsibilities. The Mental Capacity Act 2005 was not designed specifically to assess a person's capacity to decide to end their own life, and it remains unclear how the Bill would interact with the Mental Health Act.

Some functions assigned to the proposed eligibility panel fall outside psychiatrists' core expertise. Psychiatrists should not be expected to undertake responsibilities for which they are not specifically trained or professionally equipped.

Recommendation: Strengthen the Bill by ensuring psychiatrists are only required to undertake functions that fall within their professional expertise, and by providing greater clarity on the legal framework governing their role, including consent, capacity and the interaction with existing mental health legislation.

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