

Cabinet Secretary for Health and Social Care  
Rùnaire a' Chaibineit airson Slàinte agus Cùram Sòisealta

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Health, Social Care and Sport Committee  
Scottish Parliament  
Edinburgh  
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Dear Clare,

I am writing to follow up on my evidence session, on the Assisted Dying for Terminally Ill Adults (Scotland) Bill, with the Health, Social Care and Sport Committee on 28 January 2025.

During the session, there was discussion around training costs should the Bill be passed. I reiterated what the Scottish Government had already set out in our memorandum to the Committee on 30 September 2024 – that the cost of staff time for training had been omitted from the Financial Memorandum and, as such, the costs could be substantially higher than those laid out.

The Committee asked whether it would be possible to provide estimates of the costs associated with providing initial training to staff, and also of the costs of providing refresher training for all relevant staff. I therefore undertook to provide further information in writing on these points.

During the session I indicated that, based on our initial calculations, we estimated that, if we were to assume that half of all full time equivalent doctors and medical staff (primary care, hospital and community health services) would undergo initial training, and that the training time would be around seven hours – the median suggested in Mr McArthur's Financial Memorandum – there would be a total cost of around £6 million for training time. This estimate included the provision of initial training for trainees and other medical grades.

We have since done further work to drill down, in more detail, on the types of doctors that we believe are most likely to be directly involved in the provision of assisted dying. As a result of this, we would revise our estimate to £3.4 million. This figure is based on providing initial training to half of the headcount of all GPs, hospital and community health service speciality doctors and consultants only.

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In relation to the training of other healthcare professionals – specifically nurses and pharmacists – if we were to make the same assumptions as we have made for doctors (i.e. that their initial training would take 7 hours and that half of them would undergo this training), we estimate that the average cost of their time for initial training would be £385,000 for pharmacists and £9.1 million for nurses.

On your point about refresher training, it is difficult to assess these costs given the uncertainty around how this training might be delivered. For example, as the Committee heard from Professor Ben White from the Australian Centre for Health Law Research, training in Australia varies by state and generally takes around six hours to complete, with an assessment at the end in some cases.

In Queensland, Western Australia and Victoria, it is required to renew the training after three years by undertaking a shorter, more focused renewal training package. It was unclear from the evidence heard how long the renewal training takes, but if we were to assume that this takes three hours then the costs, per staff group, every three years, would be as follows (not taking into account future pay rises):

**Doctors** – £1.4 million

**Nurses** – £3.9 million

**Pharmacists** – £165,000

However, it should not, at present, be assumed that we would take the same approach to training in Scotland, if the Bill were to pass. This is something that would need to be discussed with the relevant medical training organisations.

Furthermore, I am also aware that the Committee have been giving careful consideration to the model of delivery of assisted dying, and that any changes to how the service is to be delivered would also have training implications in terms of the number and type of staff to be trained. As such, I would be keen to reiterate to the Committee that all cost estimates provided at this stage are purely indicative, and that this is something that will need to be kept under careful review if the Bill passes the Stage 1 vote.

I hope that you find this information helpful.

Yours sincerely,

**NEIL GRAY**