ABORTION REFORM BILL 2017
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Explanatory Memorandum

1. This Bill is promoted by Dr. Allinson, MHK.

2. Part 1 (clauses 1-3) deals with introductory matters, clause 1 giving the resulting Act its short title, clause 2 providing for its commencement and clause 3 defining terms used in the Bill.

3. Part 2 deals with the provision of abortion services.

4. Clause 4 specifies the women to whom abortion services may be provided. Normally, these will be women ordinarily resident in the Island, although the Bill recognises that in circumstances analogous to those which arose in R. v. Bourne [1939] 1 KB 687 (abortion lawful in order to preserve the life of the mother) in order to meet the Island’s obligations under article 2 of the European Convention on Human Rights which guarantees the right to life.

5. Clause 5 specifies where abortion services may be provided. Except where the services consist of advice about abortion, or of medicinal products to procure an abortion in the first trimester of pregnancy, they must be provided in an NHS hospital maintained by the Department or premises approved by it.

6. Clause 6 specifies the conditions which must be satisfied before an abortion may take place.

7. Clause 7 specifies who may provide abortion services.

8. Clause 8 deals with the circumstances in which a healthcare professional may raise a conscientious objection to providing or participating in the provision of abortion services, and those where such a professional may not do so.

9. Clause 9 deals with the requirement for informed consent either of the pregnant woman or of a person lawfully empowered to give consent on her behalf (for example a parent in the case of a child who is not competent to give consent herself by reference to the tests set out in the decision in Gillick v West Norfolk and Wisbech Area Health Authority [1986] AC 112.

10. Clause 10 deals with the provision of abortion advice and clause 11 with the provision of medicinal products to procure an abortion (for example Mifepristone and Misoprotol).

11. Clause 12 creates a new criminal offence, in place of that under section 71 of the Criminal Code 1872 to deal with “backstreet” abortions.

12. Clause 13 deals with the relationship of the provisions of Part 2 with other enactments.
13. *Clause 14* imposes a duty on the Department of Health and Social Care to make regulations in connection with the provision of abortion services.

14. *Part 3* comprises *clauses 15 and 16*. The former authorises the Department to incur expenditure in connection with the operation of the resulting Act, and the latter repeals provisions which are no longer necessary in the light of the provision which will be made by the Act if the Bill passes.

15. In the opinion of the member moving the Bill its provisions are compatible with the Convention rights within the meaning of the Human Rights Act 2001.
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ABORTION REFORM BILL 2017

A BILL to restate the law relating to abortion with amendments; and for connected purposes.

BE IT ENACTED by the Queen’s Most Excellent Majesty, by and with the advice and consent of the Council and Keys in Tynwald assembled, and by the authority of the same, as follows:—

PART 1 – OPENING PROVISIONS

1 Short title
The short title of this Act is the Abortion Reform Act 2017.

2 Commencement
(1) This Act comes into operation on such day or days as the Council of Ministers may by order appoint.

(2) An order under subsection (1) may include such consequential, incidental, supplemental, transitional and transitory provision as the Council of Ministers considers appropriate.

3 Interpretation
In this Act—

“abortion services” means services (whether surgical or otherwise) whose purpose is to procure the miscarriage of a pregnant woman;

“the Department” means the Department of Health and Social Care;

“gestation period” means the period of pregnancy of a female calculated from the first day of the menstrual period which in relation to the pregnancy, is the last;

“health” means a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity;

“health care professional” has the meaning given in section 3 of the Health Care Professionals Act 2014;
“informed consent” means consent by a woman of her own free will after receiving information on the risks and benefits of termination of pregnancy;

“Isle of Man National Health and Care Service” has the meaning given by section 4 of the National Health and Care Service Act 2016;

“national health service hospital” means a hospital provided by the Department for the purposes of the Isle of Man National Health and Care Service;

“treatment” begins with the administration of a drug or the start of a surgical procedure and ends with the expulsion of the products of conception from the womb.

“woman” means a female of any age;

PART 2 — PROVISION OF ABORTION SERVICES

4 Abortion services — to whom provided
Abortion services shall be provided under this Part only to a woman —
   (a) who is ordinarily resident on the Island; or
   (b) who requires their provision in an emergency, in the opinion formed in good faith, of the medical practitioner treating her.

5 Abortion services — where provided
Abortion services may be provided under this Part only —
   (a) under the Isle of Man National Health and Care Service; and
   (b) in a national health service hospital or in other premises approved for the purpose by the Department.

But this section does not apply in the case of services provided under section 10 or 11

6 Abortion services — conditions for provision
(1) Abortion services may be provided only if such of the conditions in this section as are relevant in the particular case are satisfied.

(2) During the first 14 weeks of the gestation period, abortion services may be provided upon request by or on behalf of a pregnant woman.

(3) During the period commencing with the beginning of 15th week and ending at the end of the 23rd week of the gestation period, such services may be provided, upon request by or on behalf of a pregnant woman if the registered medical practitioner attending her is of the opinion, formed in good faith that one or more of subsections (4) to (8) applies in her case.
(4) This subsection applies if the continuation of the pregnancy would pose a risk of serious injury to the pregnant woman’s life or health.

(5) This subsection applies if there is a risk that the foetus is or will be affected by a physical or mental defect which —
   (a) will have a seriously debilitating effect on the child; or
   (b) will result in the death of the foetus in utero.

(6) This subsection applies if, according to the pregnant woman, the pregnancy resulted from rape, incest or other unlawful intercourse.

(7) This subsection applies if there are serious social grounds justifying the termination of the pregnancy, such as—
   (a) the addiction of the pregnant woman or her partner to alcohol or controlled drugs;
   (b) the death of the pregnant woman’s partner during the pregnancy;
   (c) the imprisonment or detention of the pregnant woman or her partner —
      (i) in an institution (within the meaning of the Custody Act 1995); or
      (ii) in a place outside the Island serving a purpose similar to such an institution; or
   (d) the homelessness of the pregnant woman or a substantial risk of her becoming homeless during the expected term of the pregnancy.

   Here “partner” means the pregnant woman’s spouse, civil partner or cohabitee.

(8) From the start of the 24th week of the gestation period abortion services may be provided upon the request by or on behalf of a pregnant woman if the registered medical practitioner attending her is of the opinion, formed in good faith that —
   (a) the termination is necessary to prevent grave permanent injury to her health;
   (b) the continuance of the pregnancy would involve risk to her life, greater than if the pregnancy were terminated;
   (c) there is a substantial risk that because of its physical or mental condition the child would die before or during labour;
   (d) there is a substantial risk that, were the child born alive —
      (i) it would suffer early neonatal death by virtue of severe foetal abnormality; or
      (ii) it would suffer mental or physical abnormalities that would result in a serious handicap.
(9) Before abortion services are provided to a pregnant woman who requests them she must be offered counselling, if it is practicable to do so without causing undue delay in the provision of those services.

(10) In determining whether the continuation of a pregnancy would involve a risk to the health of the pregnant woman such as is mentioned in subsection (4) or (8)(a) account may be taken of her actual or reasonably foreseeable environment.

(11) In this section “counselling” means counselling provided by a person approved by the Department and in accordance with guidelines so approved.

7 Persons authorized to provide abortion services

(1) A person may participate in the provision of abortion services if, but only if, that person possesses the appropriate skill in relation to the gestation period; and—

(a) in the case of a medical practitioner, is registered by the General Medical Council;

(b) in the case of a nurse or a midwife, is registered by the Nursing and Midwifery Council;

(c) in the case of a person supplying a medicinal product to cause the termination of a pregnancy, is registered with the General Medical Council, the Nursing and Midwifery Council or the General Pharmaceutical Council1.

(2) A person who participates in the provision of abortion services otherwise than in accordance with subsection (1) commits an offence.

Maximum penalty (on information) for subsection (1) — fine and 7 years’ custody.

8 Conscientious objection

P1967/87/4(1) and (2)

(1) Subject to subsections (3) and (4), no health care professional shall be under any legal duty, whether arising by contract or any statutory or other legal requirement, to participate in any treatment authorised by this Act if the health care professional has a conscientious objection to participating in such treatment.

(2) In any legal proceedings the burden of proof of a person’s conscientious objection rests upon the person who claims to rely on it.

(3) Subsection (1) does not affect any duty to participate in a treatment which is necessary —

(a) to save the life of a pregnant woman; or

1 SI 2010/300.
9 Informed consent a condition of provision of abortion services

(1) Subject to subsections (2) and (3), a person must not provide or assist in the provision of abortion services to a woman unless the woman has given her informed consent.

(2) Where the pregnant woman—

(a) is below 16 years of age, and

(b) in the opinion of the registered medical practitioner attending her she does not have sufficient maturity and intelligence to understand the nature and implications of the proposed treatment,

the registered medical practitioner must not provide abortion services unless the practitioner obtains the consent of the parent or guardian of, or another person acting in loco parentis in relation to, the pregnant woman.

(3) Where the pregnant woman is unable to give informed consent due to a mental, medical or physical incapacity, the registered medical practitioner attending her must not provide abortion services unless the practitioner—

(a) obtains the consent of the parent or guardian of the pregnant woman, or another person lawfully empowered to give consent on her behalf; or

(b) is of the view, formed in good faith that, because of the urgency of the situation and the likely delay in obtaining such consent, it is necessary, in order to protect the health or life of the woman, to proceed without such consent.

(4) A person who contravenes subsection (1), (2) or (3) commits an offence.

Maximum penalty (on information) — a fine or 5 years’ custody.

10 Provision of abortion advice

For the avoidance of doubt, a registered medical practitioner, nurse, midwife or pharmacist does not commit an offence —

(b) to prevent grave permanent injury to the health of a pregnant woman.

(4) A health care professional who has a conscientious objection referred to in subsection (1) must inform the woman who requests abortion services of other health care professionals who may be in a position to terminate the pregnancy within a reasonable time.

(5) Any health care professional whose failure to act in accordance with subsection (4) results in injury or loss of life or both commits an offence.  

Maximum penalty (summary): a fine or 2 years’ custody.
(a) by providing a pregnant woman with advice or information about the possibility of abortion (whether in the Island or outside it); or
(b) by referring the pregnant woman to another person (whether in the Island or outside it) for further advice or treatment which may result in a termination.

11 **Provision of medicinal products to procure abortion**

(1) This section applies to a medicinal product designed or intended to procure her miscarriage during the first 14 weeks of the gestation period (“a relevant product”).

(2) A registered medical practitioner may —
   (a) prescribe a relevant product for a pregnant woman, or
   (b) supply a relevant product to a pregnant woman, during the first 14 weeks of the gestation period.

(3) A registered nurse or midwife, or a registered pharmacist may supply a relevant product to a pregnant woman during the first 14 weeks of the gestation period.

(4) A person who supplies a pregnant woman with a relevant product otherwise than in compliance with this section commits an offence.

*Maximum penalty (information) — a fine or 5 years’ custody.*

12 **Offence of procuring termination of a pregnancy**

(1) A person who, by any means, intentionally procures the miscarriage of a woman, otherwise than in accordance with this Part, commits an offence.

But this subsection is subject to subsection (2) and does not apply if the conduct constitutes an offence under subsection 11(4).

*Maximum penalty (on information) — a fine or 14 years’ custody.*

(2) A person is not guilty of an offence under subsection (1) if he or she proves that the act which caused the miscarriage was done in good faith for the purpose only of preserving the health or life of the woman.

13 **Relationship with other provisions**

A person who —

(a) participates in the termination of a pregnancy, or
(b) prescribes a medicinal product for, or supplies such a medicinal product, to a pregnant woman with a view to procuring her miscarriage,

in accordance with this Part does not commit an offence under the *Infanticide and Infant Life (Preservation) Act 1938.*
14 Regulations

(1) The Department must make regulations —
   (a) requiring any registered medical practitioner who terminates a pregnancy to give notice of the termination and such other information relating to the termination as may be so prescribed;
   (b) for prohibiting the disclosure, except to such persons or for such purposes as may be so prescribed, of notices given or information furnished pursuant to the regulations.

Tynwald procedure — approval required.

(2) The information furnished in pursuance of regulations made by virtue of subsection (1)(b) shall be notified solely to the Director of Public Health.

(3) Any person who wilfully contravenes or wilfully fails to comply with the requirements of regulations under subsection (1) commits an offence.

Maximum penalty (summary) — £5,000.

PART 3 – CLOSING PROVISIONS

15 Expenditure

Any expenses of the Department which are attributable to this Act shall be paid out of monies provided by Tynwald.

16 Repeals

The following are repealed —

   (a) sections 71 and 72 of the Criminal Code 1872 (and the cross-heading preceding section 71);
   (b) in section 4 of the Infanticide and Infant Life Preservation Act 1935—
       (i) in subsection (1) the words “or for an offence under section 71 of the Criminal Code 1872” and “, or of an offence under the said section 71”; and
       (ii) subsection (2); and
   (c) the Termination of Pregnancy (Medical Defences) Act 1995.