An Bille Sláinte (Foirceannadh Toirchis a Rialáil), 2018
Health (Regulation of Termination of Pregnancy) Bill 2018

Mar a tionscnaiodh
As initiated
AN BILLE SLÁINTE (FOIRCEANNADH TOIRCHIS A RIALÁIL), 2018
HEALTH (REGULATION OF TERMINATION OF PREGNANCY) BILL 2018

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Bill

entitled

An Act to provide for and regulate termination of pregnancy; to make provision for reviews at the instigation of a pregnant woman, or a person on her behalf, of certain medical opinions given in respect of pregnancy; to make available without charge certain services to women for the purpose of termination of pregnancy in accordance with this Act and, for that purpose, to amend the Health Act 1970 and certain other enactments; to provide for offences in respect of the intentional ending of the life of a foetus otherwise than in accordance with this Act; to amend the Bail Act 1997; to repeal the Regulation of Information (Services outside the State for Termination of Pregnancies) Act 1995, the Protection of Life During Pregnancy Act 2013 and provisions of certain other enactments; and to provide for matters connected therewith.

Be it enacted by the Oireachtas as follows:

PART 1

PRELIMINARY AND GENERAL

Short title and commencement

1. (1) This Act may be cited as the Health (Regulation of Termination of Pregnancy) Act 2018.

(2) This Act shall come into operation on such day or days as the Minister may appoint by order or orders either generally or with reference to any particular purpose or provision and different days may be so appointed for different purposes or provisions, and for the repeal of different enactments or provisions of enactments effected by section 7.

Definitions

2. In this Act—

“Act of 2007” means the Medical Practitioners Act 2007;

“Act of 2013” means the Protection of Life During Pregnancy Act 2013;
“foetus”, in relation to a pregnancy, means an embryo or a foetus during the period of time commencing after implantation in the uterus of a woman and ending on the complete emergence of the foetus from the body of the woman;

“medical practitioner” means a medical practitioner who is for the time being registered in the register;

“medical procedure” includes the prescribing, by a medical practitioner, of any drug or medical treatment;

“Minister” means the Minister for Health;

“prescribed” means prescribed by regulations made under section 3;

“register” means the register of medical practitioners established under section 43 of the Act of 2007;

“termination of pregnancy”, in relation to a pregnant woman, means a medical procedure which is intended to end the life of a foetus;

“woman” means a female person of any age.

Regulations

3. (1) The Minister may by regulations provide for any matter referred to in this Act as prescribed or to be prescribed.

(2) Without prejudice to any provision of this Act, regulations under this section may contain such incidental, supplementary and consequential provisions as appear to the Minister to be necessary or expedient for the purposes of the regulations.

(3) Every regulation under this Act shall be laid before each House of the Oireachtas as soon as may be after it is made and, if a resolution annulling the regulation is passed by either such House within the next 21 days on which that House sits after the regulation is laid before it, the regulation shall be annulled accordingly, but without prejudice to the validity of anything previously done thereunder.

Expenses

4. The expenses incurred by the Minister in the administration of this Act shall, to such extent as may be sanctioned by the Minister for Public Expenditure and Reform, be paid out of moneys provided by the Oireachtas.

Offences

5. (1) It shall be an offence for a person, by any means whatsoever, to intentionally end the life of a foetus otherwise than in accordance with the provisions of this Act.

(2) It shall be an offence for a person to prescribe, administer, supply or procure any drug, substance, instrument, apparatus or other thing knowing that it is intended to be used or employed with intent to end the life of a foetus, or being reckless as to whether it is intended to be so used or employed, otherwise than in accordance with the provisions of this Act.
(3) Subsections (1) and (2) shall not apply to a pregnant woman in respect of her own pregnancy.

(4) It shall be an offence for a person to aid, abet, counsel or procure a pregnant woman to intentionally end, or attempt to end, the life of the foetus of that pregnant woman otherwise than in accordance with the provisions of this Act.

(5) A person who is guilty of an offence under this section shall be liable on conviction on indictment to a fine or imprisonment for a term not exceeding 14 years, or both.

(6) A prosecution for an offence under this section may be brought only by or with the consent of the Director of Public Prosecutions.

(7) Nothing in subsection (4) shall operate to prevent or restrict access to services lawfully carried out in a place outside the State.

Offence by body corporate

6. (1) Where an offence under this Act is committed by a body corporate and it is proved that the offence was committed with the consent or connivance, or was attributable to any wilful neglect, of a person who was a director, manager, secretary or other officer of the body corporate, or a person purporting to act in that capacity, that person shall, as well as the body corporate, be guilty of an offence and may be proceeded against and punished as if he or she were guilty of the first-mentioned offence.

(2) Where the affairs of a body corporate are managed by its members, subsection (1) applies in relation to the acts and defaults of a member in connection with his or her functions of management as if he or she were a director or manager of the body corporate.

Repeals

7. The following are repealed:

(a) sections 16 and 17(1) of the Censorship of Publications Act 1929;
(b) sections 7(b) and 9(1)(b) of the Censorship of Publications Act 1946;
(c) section 10 of the Health (Family Planning) Act 1979;
(d) the Regulation of Information (Services outside the State for Termination of Pregnancies) Act 1995;
(e) the Act of 2013.

Transitional provisions

8. (1) Notwithstanding the repeal of the Act of 2013 by section 7(e)—

(a) a review committee established under section 12 of that Act before the commencement date which, on that date, has not completed a review of a relevant decision within the meaning of that Act shall continue in operation as if it had been established under section 16 and, for that purpose, sections 17 and 18 shall apply and have effect in relation to the review by the committee, and
(b) the Health Service Executive shall, in accordance with section 15 of that Act, not later than 6 months after the commencement date, prepare and submit to the Minister a final report on the operation of Chapter 2 of Part 2 of that Act in respect of such period as has not already been the subject of a report to the Minister.

(2) In this section, “commencement date” means the date on which section 7(e) comes into operation.

PART 2

TERMINATION OF PREGNANCY

Definitions (Part 2)

9. In this Part—

“appropriate medical practitioner”, in relation to a medical practitioner and his or her assessment of the risk to the life, or of serious harm to the health, of a pregnant woman, means a medical practitioner appropriate to the care or treatment of the woman in respect of the risk;

“Executive” means the Health Service Executive;

“health” means physical or mental health;

“medical specialty” means a medical specialty recognised by the Medical Council under section 89 of the Act of 2007;

“obstetrician” means an obstetrician and gynaecologist;

“obstetrician and gynaecologist” means a medical practitioner who is registered in the Specialist Division of the register under the medical specialty of “Obstetrics and Gynaecology”;

“relevant decision” shall be construed in accordance with section 14;

“relevant specialty”, in relation to a medical practitioner and his or her assessment of the presence of a condition affecting a foetus that is likely to lead to the death of the foetus either before, or within 28 days of, birth, means a medical specialty—

(a) in respect of which the medical practitioner is registered in the Specialist Division of the register, and

(b) relevant to the diagnosis, care or treatment of such a condition;

“review”, in relation to a relevant decision, means a review under section 17;

“review committee”, in relation to a relevant decision, means the committee established under section 16(1) to review that decision;

“review panel” means the panel established under section 15(1);

“section 10 certification” means a certification referred to in section 10(3) or, as the case may be, a certification pursuant to section 17(2) as to the matters referred to in paragraph (a) of that subsection;
“section 11 certification” means a certification referred to in section 11(2);
“section 12 certification” means a certification referred to in section 12(3) or, as the case may be, a certification pursuant to section 17(2) as to the matters referred to in paragraph (b) of that subsection;
“section 13 certification” means a certification referred to in section 13(2)(a);
“viability” means the point in a pregnancy at which, in the reasonable opinion of a medical practitioner, the foetus is capable of survival outside the uterus without extraordinary life-sustaining measures.

Risk to life or health
10. (1) A termination of pregnancy may be carried out in accordance with this section where 2 medical practitioners, having examined the pregnant woman, are of the reasonable opinion formed in good faith that—
   (a) there is a risk to the life, or of serious harm to the health, of the pregnant woman,
   (b) the foetus has not reached viability, and
   (c) it is appropriate to carry out the termination of pregnancy in order to avert the risk referred to in paragraph (a).

(2) Of the 2 medical practitioners referred to in subsection (1)—
   (a) one shall be an obstetrician, and
   (b) the other shall be an appropriate medical practitioner.

(3) A termination of pregnancy shall not be carried out under this section unless each of the medical practitioners referred to in subsection (1) has certified his or her opinion as to the matters referred to in that subsection.

(4) The termination of pregnancy to which the certification referred to in subsection (3) relates shall be carried out—
   (a) by the obstetrician referred to in subsection (2)(a), or
   (b) where the medical practitioner referred to in subsection (2)(b) is also an obstetrician, by that obstetrician or the obstetrician referred to in subsection (2)(a).

Risk to life or health in emergency
11. (1) Notwithstanding the generality of section 10, or any determination made or pending pursuant to section 17 of an application under section 14(2), a termination of pregnancy may be carried out in accordance with this section by a medical practitioner where, having examined the pregnant woman, he or she is of the reasonable opinion formed in good faith that—
   (a) there is an immediate risk to the life, or of serious harm to the health, of the pregnant woman, and
   (b) it is immediately necessary to carry out the termination of pregnancy in order to avert that risk.
(2) Where a medical practitioner proposes to carry out a termination of pregnancy under this section, he or she shall certify his or her opinion as to the matters referred to in subsection (1)—

(a) before carrying out the termination of pregnancy concerned, or
(b) where it is not practicable to do so before carrying out the termination of pregnancy, as soon as may be but, in any event, not later than 3 days after the carrying out of the termination of pregnancy concerned.

### Condition likely to lead to death of foetus

12. (1) A termination of pregnancy may be carried out in accordance with this section where 2 medical practitioners, having examined the pregnant woman, are of the reasonable opinion formed in good faith that there is present a condition affecting the foetus that is likely to lead to the death of the foetus either before, or within 28 days of, birth.

(2) Of the 2 medical practitioners referred to in subsection (1)—

(a) one shall be an obstetrician, and
(b) the other shall be a medical practitioner of a relevant specialty.

(3) A termination of pregnancy shall not be carried out under this section unless each of the medical practitioners referred to in subsection (1) has certified his or her opinion as to the matters referred to in that subsection.

(4) The termination of pregnancy to which the certification referred to in subsection (3) relates shall be carried out—

(a) by the obstetrician referred to in subsection (2)(a), or
(b) where the medical practitioner referred to in subsection (2)(b) is also an obstetrician, by that obstetrician or the obstetrician referred to in subsection (2)(a).

### Early pregnancy

13. (1) A termination of pregnancy may be carried out in accordance with this section by a medical practitioner where, having examined the pregnant woman, he or she is of the reasonable opinion formed in good faith that the pregnancy concerned has not exceeded 12 weeks of pregnancy.

(2) A termination of pregnancy shall not be carried out under this section unless—

(a) the medical practitioner referred to in subsection (1) has certified his or her opinion as to the matter referred to in that subsection, and
(b) a period of not less than 3 days has elapsed from the date of certification referred to in paragraph (a).

(3) The medical practitioner referred to in subsection (1) shall make such arrangements as he or she shall deem to be necessary for the carrying out of the termination of pregnancy as soon as may be after the period referred to in subsection (2)(b) has elapsed but before the pregnancy has exceeded 12 weeks of pregnancy.
(4) For the purposes of this section, “12 weeks of pregnancy” shall be construed in accordance with the medical principle that pregnancy is generally dated from the first day of a woman’s last menstrual period.

Application for review of medical opinion

14. (1) Where a medical practitioner, who has been requested to give an opinion in respect of a pregnant woman in the circumstances referred to in section 10(1) or 12(1)—

(a) does not give an opinion, or

(b) gives an opinion but not such as would be required for the purposes of a section 10 certification or section 12 certification, as the case may be,

(in this Part referred to as a “relevant decision”) he or she shall inform the pregnant woman in writing that an application may be made in accordance with subsection (2) to review the relevant decision.

(2) A pregnant woman, or a person acting on her behalf, may make an application in the prescribed form and manner to the Executive for a review of a relevant decision.

Establishment of review panel, etc.

15. (1) Subject to subsection (2), the Executive shall establish and maintain a panel of medical practitioners, appointed for such term and on such conditions as the Executive determines, for the purposes of the establishment of a review committee in relation to a relevant decision.

(2) The membership of the review panel shall consist of—

(a) medical practitioners who are registered in the Specialist Division of the register, and

(b) medical practitioners of relevant specialties.

(3) The Executive shall revoke the appointment of a member of the panel who ceases to be a medical practitioner referred to in subsection (2)(a) or (b).

Establishment of review committee, etc.

16. (1) As soon as may be but, in any event, not later than 3 days from the date on which it receives an application under section 14(2), the Executive shall establish and convene (or cause to be convened) a committee, the membership of which shall, subject to subsections (2) and (3), be drawn from the review panel to review the relevant decision that is the subject of the application.

(2) A review committee shall consist of—

(a) an obstetrician, and

(b) in the case of—

(i) a review of a relevant decision which relates to the circumstances referred to in section 10(1), an appropriate medical practitioner, or
(ii) a review of a relevant decision which relates to the circumstances referred to in section 12(1), a medical practitioner of a relevant specialty.

(3) A medical practitioner shall be disqualified from sitting on the review committee where he or she has previously been consulted by the pregnant woman in relation to the matter that is the subject of the relevant decision to be reviewed by the committee.

Review of relevant decision
17. (1) The review committee shall complete its review of a relevant decision as soon as may be but, in any event, not later than 7 days from the date on which the review committee was established and convened under section 16(1).

(2) Where the review committee, having examined the pregnant woman, has completed its review of the relevant decision and is of the reasonable opinion formed in good faith that—

(a) (i) there is a risk to the life, or of serious harm to the health, of the pregnant woman,

(ii) the foetus has not reached viability, and

(iii) it is appropriate to carry out a termination of pregnancy in order to avert the risk referred to in subparagraph (i),

or

(b) there is present a condition affecting the foetus that is likely to lead to the death of the foetus either before, or within 28 days of, birth,

the committee shall jointly certify their opinion as to the matters referred to in paragraph (a) or (b), as the case may be, and, as soon as may be, give notice in writing of its determination to the pregnant woman (or, if the application under section 14(2) concerned was made by another person on behalf of the woman, to that other person and the pregnant woman) and the Executive.

(3) Where the review committee makes a certification referred to in subsection (2), it shall make such arrangements as may be necessary for the carrying out of the termination of pregnancy to which that certification relates in accordance with section 10 or 12, as the case may be.

(4) Where the review committee has completed its review of the relevant decision and is not of the opinion referred to in subsection (2)(a) or (b), it shall, as soon as may be, give notice in writing of its determination to the pregnant woman (or, if the application under section 14(2) concerned was made by another person on behalf of the woman, to that other person and the pregnant woman) and the Executive.

(5) In this section, “jointly certify”, in relation to the review committee, means that the members of the committee jointly make the certification concerned.

Procedures of review committee
18. (1) The review committee may, for the purposes of its review of a relevant decision, by direction in writing require a medical practitioner or former medical practitioner at such time and place as may be specified in the direction—
(a) to produce to the committee such documents or other records in his or her possession or control as the committee may reasonably require and as are specified in the direction, or

(b) to attend before the committee and to give to the committee such assistance and answer such questions as it may reasonably require,

or both.

2. The pregnant woman shall be entitled to be heard by the review committee and, where the woman or a person acting on her behalf informs the committee that she wishes to be heard, the committee shall make such arrangements as may be necessary in order to hear the woman or a person acting on her behalf.

3. The review committee may, subject to the provisions of this Act, determine its own procedures.

4. The Executive shall provide, or arrange for the provision of, such administrative facilities as may be necessary to enable the review committee to perform its functions.

5. A member of the review committee shall be paid by the Executive, out of funds at its disposal, such remuneration and such allowances for expenses as the Minister may, with the approval of the Minister for Public Expenditure and Reform, determine.

6. A person who attends the review committee pursuant to a direction under subsection (1) shall be paid by the Executive, out of funds at its disposal, such remuneration and such allowances for expenses as the Minister may, with the approval of the Minister for Public Expenditure and Reform, determine.

7. A person who fails or refuses, without reasonable excuse, to comply with a direction under subsection (1) shall be guilty of an offence and shall be liable on summary conviction to a class C fine.

8. Summary proceedings for an offence under subsection (7) may be brought and prosecuted by the Executive.

Report by Executive on operation of reviews

19. (1) The Executive shall, not later than 30 June in each year, prepare and submit to the Minister a report on the operation of reviews under this Part in the immediately preceding year, and the Minister shall, as soon as may be after receiving the report, cause copies of the report to be laid before each House of the Oireachtas.

(2) Notwithstanding the generality of subsection (1), a report under this section shall, in respect of the year that is the subject of the report, include information on—

(a) the total number of applications for review under section 14(2) received by the Executive,

(b) the number of reviews carried out,

(c) in the case of the reviews carried out, the reason why the review was sought, and

(d) the outcome of the reviews.

(3) In preparing a report under this section, the Executive shall exclude from the report information that identifies, or that could reasonably lead to the identification of—
(a) a woman who has made an application for review under section 14(2), or in respect of whom such an application has been made by a person acting on her behalf,

(b) a person who has made an application for review under section 14(2) on behalf of a pregnant woman, or

c) a medical practitioner who has—

(i) made a relevant decision,

(ii) carried out a review,

(iii) complied with a direction under section 18(1) or otherwise assisted a committee in a review, or

(iv) carried out a termination of pregnancy following a review.

(4) The Executive shall arrange for a report laid before both Houses of the Oireachtas in accordance with subsection (1) to be published in such form and manner as it thinks appropriate as soon as practicable after copies of the report are so laid.

Form of certification etc.

20. (1) A certification shall—

(a) be made in the prescribed form and manner, and

(b) contain the prescribed information which shall include—

(i) confirmation of whether the termination of pregnancy to which the certification relates was the subject of a review, and

(ii) in the case of a section 10 certification, section 11 certification or section 12 certification, the clinical grounds for carrying out the termination of pregnancy to which the certification relates.

(2) In this section, “certification” means a section 10 certification, section 11 certification, section 12 certification or section 13 certification.

Notifications

21. (1) Where a termination of pregnancy is carried out in accordance with section 10, 11, 12 or 13, the medical practitioner who carried out the termination of pregnancy shall—

(a) keep, or cause to be kept, a record, in the prescribed form and manner, of—

(i) the carrying out of the termination of pregnancy, and

(ii) the information specified in subsection (2), and

(b) not later than 28 days after the termination of pregnancy has been carried out, forward, or cause to be forwarded, a copy of that record, or such part of that record as may be prescribed, to the Minister in such manner as may be prescribed.
The following information is specified for the purposes of subsection (1)(a)(ii):

(a) the Medical Council registration number attached to the registration of the medical practitioner who carried out the termination of pregnancy;

(b) whether the termination of pregnancy was carried out pursuant to a section 10 certification, section 11 certification, section 12 certification or section 13 certification and the Medical Council registration number attached to the registration of the medical practitioner, or each of the medical practitioners, who made the certification concerned;

(c) the county of residence, or in the case of a woman who resides outside the State, the place of residence, of the pregnant woman in respect of whom the termination of pregnancy was carried out;

(d) the date on which the termination of pregnancy was carried out.

The Minister shall, not later than 30 June in each year, prepare a report on the notifications received by him or her under this section during the immediately preceding year, and shall, as soon as may be after preparing the report, cause copies of the report to be laid before each House of the Oireachtas.

The Minister shall arrange for a report laid before both Houses of the Oireachtas in accordance with subsection (3) to be published in such form and manner as he or she thinks appropriate as soon as practicable after copies of the report are so laid.

In preparing a report under this section, the Minister shall exclude from the report information that identifies, or that could reasonably lead to the identification of—

(a) a medical practitioner referred to in subsection (2)(a) or (b), and
(b) a woman referred to in subsection (2)(c).

In this section, “notification” means a copy of a record, or a part thereof, that is forwarded or caused to be forwarded to the Minister under subsection (1).

PART 3

MISCELLANEOUS

Consent

22. Nothing in this Act shall operate to affect any enactment or rule of law relating to consent to medical treatment.

Conscientious objection

23. (1) Subject to subsections (2) and (3), nothing in this Act shall be construed as obliging any medical practitioner, nurse or midwife to carry out, or to participate in carrying out, a termination of pregnancy in accordance with section 10, 12 or 13 to which he or she has a conscientious objection.

(2) Subsection (1) shall not be construed to affect any duty to participate in a termination of pregnancy in accordance with section 11.
(3) A person who has a conscientious objection referred to in subsection (1) shall, as soon as may be, make such arrangements for the transfer of care of the pregnant woman concerned as may be necessary to enable the woman to avail of the termination of pregnancy concerned.

(4) In this section—

“Act of 2011” means the Nurses and Midwives Act 2011;

“midwife” means a person whose name is for the time being registered in the midwives division of the register of nurses and midwives established under section 46 of the Act of 2011;

“nurse” means a person whose name is for the time being registered in the nurses division of the register of nurses and midwives established under section 46 of the Act of 2011.

**Prohibition against receiving special benefits or advantages**

24. (1) A relevant person shall not receive or agree to receive, directly or indirectly, in consideration of a termination of pregnancy within or outside the State, or the making of any arrangements in relation to a termination of pregnancy within or outside the State, any special benefit or advantage.

(2) A person who contravenes subsection (1) shall be guilty of an offence.

(3) A person who is guilty of an offence under subsection (2) shall be liable on summary conviction to a class A fine.

(4) In this section—

“relevant person” means a person who engages in or holds himself or herself out as providing information, advice or counselling (howsoever described) to members of the public in relation to termination of pregnancy within or outside the State;

“special benefit or advantage”, in relation to a relevant person, means a financial or other benefit or advantage different in kind or larger in amount, size or quantity than that that would be obtainable by the relevant person in respect of information, advice or counselling in relation to termination of pregnancy provided by the relevant person over and above the reasonable costs of the provision of such information, advice or counselling.

**Amendment of Health Act 1970**

25. The Health Act 1970 is amended—

(a) in section 47A, by the substitution of “58B, 58D or 62A” for “58B or 58D”,

(b) in section 51, in paragraph (b) of the definition of “acute in-patient services”, by the substitution of “(including care and treatment in respect of motherhood or termination of pregnancy)” for “(including care and treatment in respect of motherhood)”;

(c) by the insertion, in section 53C(9), of the following paragraph after paragraph (b):
“(ba) a woman receiving services for the purpose of a termination of pregnancy in accordance with section 10, 11, 12 or 13 of the Health (Regulation of Termination of Pregnancy) Act 2018,”;

(d) by the insertion of the following section after section 62:

“Services for women in accordance with Act of 2018

62A. (1) The Health Service Executive shall make available without charge medical, surgical and midwifery services for the purpose of termination of pregnancy in accordance with section 10, 11, 12 or 13 of the Act of 2018 for women who are ordinarily resident in the State.

(2) The services referred to in subsection (1) shall be provided otherwise than as in-patient services.

(3) A woman entitled to receive services under this section may choose to receive them from any person who has entered into an agreement with the Health Service Executive for the provision of those services and who is willing to accept her as a patient.

(4) Subject to sections 20 and 23 of the Act of 2013, the services referred to in subsection (1) shall include the supply without charge of specified drugs, medicines and medical and surgical appliances for the purpose of a termination of pregnancy in accordance with section 10, 11, 12 or 13 of the Act of 2018 for the time being—

(a) standing approved by the Health Service Executive, or

(b) on the Reimbursement List within the meaning of section 2(1) of the Act of 2013.

(5) In this section—


‘Act of 2018’ means the Health (Regulation of Termination of Pregnancy) Act 2018.”,

and

(e) in section 67C(7), by the insertion of the following paragraph after paragraph (b):

“(ba) a woman receiving services for the purpose of a termination of pregnancy in accordance with section 10, 11, 12 or 13 of the Health (Regulation of Termination of Pregnancy) Act 2018,”.

Amendment of section 33 of Nursing Homes Support Scheme Act 2009

26. Section 33(7) of the Nursing Homes Support Scheme Act 2009 is amended by the insertion of the following paragraph after paragraph (b):

“(ba) a woman in respect of a termination of pregnancy in accordance with section 10, 11, 12 or 13 of the Health (Regulation of Termination of Pregnancy) Act 2018,”.
Amendment of Health (Pricing and Supply of Medical Goods) Act 2013

27. The Health (Pricing and Supply of Medical Goods) Act 2013 is amended—

(a) in section 20—

(i) in subsection (1), by the substitution of “section 59 or 62A” for “section 59”,

(ii) in subsection (2), by the substitution of “section 59 or 62A” for “section 59”, and

(iii) in subsection (3), by the substitution of “section 59 or 62A” for “section 59”, and

(b) in section 23, by the substitution of “section 59 or 62A” for “section 59”.

Amendment of Schedule to Bail Act 1997

28. The Schedule to the Bail Act 1997 is amended by the insertion of the following paragraph after paragraph 40:

“Offences under the Health (Regulation of Termination of Pregnancy) Act 2018

41. Any offence under section 5 of the Health (Regulation of Termination of Pregnancy) Act 2018.”.
Health (Regulation of Termination of Pregnancy) Bill 2018

BILL
(as initiated)
entitled

An Act to provide for and regulate termination of pregnancy; to make provision for reviews at the instigation of a pregnant woman, or a person on her behalf, of certain medical opinions given in respect of pregnancy; to make available without charge certain services to women for the purpose of termination of pregnancy in accordance with this Act and, for that purpose, to amend the Health Act 1970 and certain other enactments; to provide for offences in respect of the intentional ending of the life of a foetus otherwise than in accordance with this Act; to repeal the Regulation of Information (Services outside the State for Termination of Pregnancies) Act 1995, the Protection of Life During Pregnancy Act 2013 and provisions of certain other enactments; and to provide for matters connected therewith.

Presented by the Minister for Health,
27th September, 2018

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