

Responding to Requests for Medical Assistance in Dying (MAID)

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PART 1:

Replaces Policy: n/a

Scope of Policy:

- [1] Long Term Care Homes Act, 2007, Section: 3, 13
- [2] Long Term Care Homes Act 2007- O. Reg. 79/10 Sections: n/a
- [3] Bill C-14, 2016: *An Act to Amend the Criminal Code and to make related amendments to other Acts (medical assistance in dying)*
- [4] The College of Physicians and Surgeons of Ontario, *Medical Assistance in Dying*, Policy Statement #4-16

Applies to:

- Medical Director, Attending Physician(s), Nurse Practitioner(s) (collectively referred to as *the practitioner* throughout this policy)
- All staff
- All residents

End of Life Care Policy Statement: As a Christian organization, foundational to our work is the conviction that human life is a gift from God from the beginning of life until natural death. This belief grounds Shalom’s commitment to provide the best end-of-life and palliative care possible in our organization. This is also why we reject any medical procedure that intentionally terminates a human life; it is contrary to Holy Scripture and thus incompatible with the Mission, Vision and Values of our organization. In keeping with our Mission, Vision and Values we pledge to support each dying person to:

- Make informed decisions about their end of life care.
- Receive effective pain and symptom management to lessen pain and suffering
- Access high-quality palliative care that encompasses support for the physical, spiritual, emotional and psychological dimensions of end-of-life for the dying person and their loved ones

PART 2:

Education & Training:

- The practitioners are trained in this policy upon its enactment and with changes to the policy.
- Staff will be trained with respect to this policy upon hiring during the corporate orientation process and in the “pain and palliation” annual in-service thereafter
- The Home’s policy statement on MAID is published in the Resident/Family Information Brochure that is distributed during tours
- The Home’s policy statement on MAID is included in the Resident Handbook which is given to every resident upon admission

Procedure:*Role of All Staff:*

1. When a resident verbalizes a request for MAID, the staff member receiving the request will notify the resident's doctor through the Home's referral process. As per the College of Nurses of Ontario, RNs and RPNs are not permitted to counsel or assess residents with respect to MAID. All staff are therefore requested not to have further discussion with the resident about MAID.
2. The staff member receiving the request for MAID should also consider if the resident and/or family might benefit from additional referrals, such as pastoral care or social work services and refer accordingly.
3. Staff are not permitted to impede a resident's access to MAID or express moral judgments about the beliefs, lifestyle, identity or characteristics of the resident.
4. If a resident chooses to transfer to another facility to proceed with MAID, all staff are expected to continue to provide care to the resident as per the Home's Mission, Vision and Values statements, regardless of their own conscience or religious beliefs. Care and treatment will continue to be provided until the resident is discharged from the home.

Role of the Medical Practitioner or Nurse Practitioner:

1. The Home has a conscientious objection to providing MAID. This means that MAID will not be provided on the premises of Shalom Manor and Gardens. Any medical practitioner or nurse practitioner working within the Home is expected to comply with the College of Physicians and Surgeons of Ontario's expectations for conscientious objections.
2. When a resident makes a request for MAID, the practitioner will explore the reason(s) for the request and provide the resident with information about all options for care that may be available or appropriate to meet the resident's clinical needs, concerns and/or wishes.
3. If the resident wishes to proceed with MAID, the practitioner must decline to provide MAID at Shalom. The objection must be communicated directly to the resident and in a way that respects resident dignity. The practitioner must inform the resident that the objection is due to personal and not clinical reasons.

Further, in order to uphold resident autonomy and facilitate the decision-making process, practitioners must ensure they do not impede a resident access to MAID, even if it conflicts with their conscience or religious beliefs; must not express moral judgments about the beliefs, lifestyle, identity or characteristics of the resident; and must not withhold information about the existence of any procedure or treatment even if it conflicts with their conscience or religious beliefs.

4. Even though MAID will not be provided in the Home, the practitioner must not abandon the resident; an effective referral must be provided. An effective referral means a referral made in good faith, to a non-objecting, available and accessible physician, nurse practitioner or agency. The referral must be made in a timely manner in order to ensure

the resident can access MAID. Residents must not be exposed to adverse clinical outcomes due to delayed referrals.

Resource: Clinical Referral Service – maidregistration@ontario.ca or 1-844-243-5880

The objecting practitioner must document the following in the resident's chart in Point Click Care:

- The date on which the request was made;
- The date on which the effective referral was made;
- The name of the physician, nurse practitioner and/or agency to which the referral was directed.

5. Care and treatment will continue to be provided by the practitioner until an external provider indicates they are assuming total care of the resident, the resident is transferred to a non-objecting institution or the resident is discharged home.

Monitoring (Risk Management):

- Every effort will be made to minimize any negative impact to residents requesting MAID who require a transfer to a non-objecting facility. The staff of the Home will do everything possible to ensure a seamless transition.

Evaluation (Quality Improvement):

- The Administrator, Director of Resident Care and Medical Director will remain abreast of changes in legislation and trends with MAID and enact changes to the Home's policy as necessary.

Definitions:

Effective Referral – when a medical practitioner takes positive action to ensure the patient is connected in a timely manner to another physician, health care provider, or agency who is non-objecting, accessible and available to the patient. (CPSO)

Medical Assistance in Dying (MAID) – includes circumstances where a medical practitioner or nurse practitioner, at an individual's request: a) administers a substance that causes an individual's death; or b) prescribes a substance for an individual to self-administer to cause their own death. (CPSO)

Medical Practitioner – a physician who is entitled to practice medicine in Ontario. (CPSO)

Nurse Practitioner – a registered nurse who, under the laws of Ontario, is entitled to practice as a nurse practitioner, and autonomously makes diagnoses, order and interpret diagnostic tests, prescribes substances, and treat patients. (CPSO)

APPENDICES: n/a