

MAiD: Medical Assistance in Dying—An Introduction

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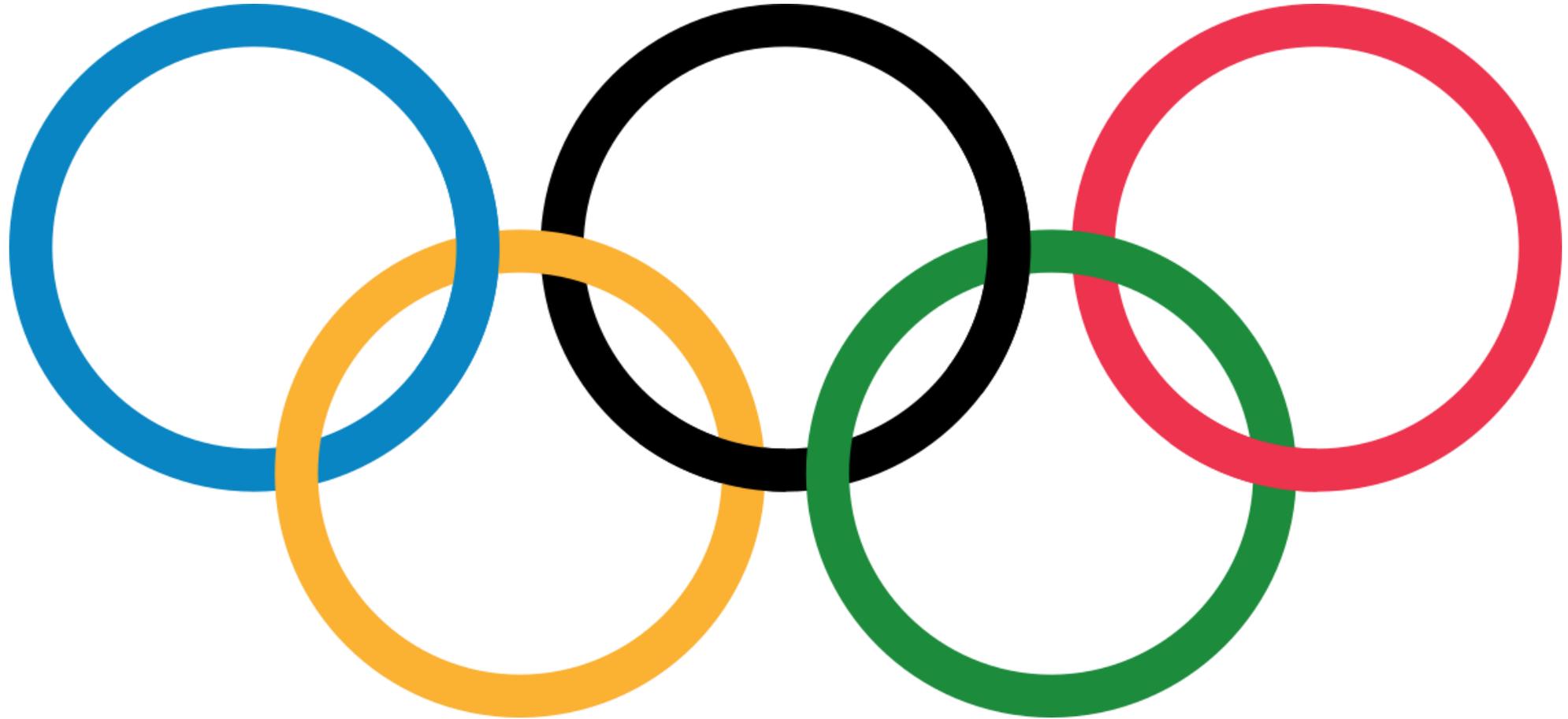
Palliative Care and MAiD: A Comparison

- Palliative Care is a philosophy of care aimed at providing comfort and symptom relief during the course of life-threatening illness
- MAiD is a regulated procedure which may be used in some cases in order to address a particular need. It may be part of a care plan, but is never the whole story
- Palliative Care by original definition neither hastens nor slows down the process of death, whereas MAiD has as its stated purpose to hasten death
- Some palliative care practitioners are uncomfortable or reject being associated with MAiD. Others in palliative care, however, feel comfortable offering MAiD as an intervention.

Where does MAiD happen?

- Can be at home, in some hospitals, or in some hospital-based palliative care units
- Most residential hospices and some hospitals tell patients who ask about MAiD that they will need to go elsewhere in order to be assessed or to receive medical assistance in dying
- Waterloo region has an active MAiD team in the community (under LHIN Home and Community Care), at Grand River Hospital, and at Cambridge Memorial Hospital
- Family doctors often respond to MAiD requests as well

How is MAiD like the Olympics?



MAiD is a five-step process (at a minimum):

- Initial Inquiry
- Written Request
- First Assessment
- Second Assessment
- Procedure

Initial Inquiry:

- Who asks first?
- Professionals are sometimes hesitant to start the conversation about MAiD, for fear of being seen as coercive
- Others argue that they have a professional obligation to bring up the topic of MAiD if they feel it's clinically relevant to a patient's care
- Patients often feel hesitant to bring it up ("if the doctor hasn't mentioned it, I don't want to rock the boat")
- You can ask anyone working in healthcare about MAiD. If they don't feel comfortable answering or don't know, they need to at least contact someone else who can follow up effectively
- There is also a toll free number, 1-866-286-4023, to access the Ontario MAiD Care Coordination Service

Written Request

- The official, legal start of a MAiD request
- In Ontario, often called Clinician Aid A
- Requires two witnesses (cannot be recipients of a will, nor providers of healthcare) It's often complicated to find two eligible witnesses **[this provision currently being debated]**
- Simply a statement of a person's wish to access MAiD as a possibility for their care
- Does not commit a person to MAiD
- Begins a 10 day waiting period

First Assessment

- By physician or nurse practitioner
- Focused on three main things:
 - Does the person have the capacity to understand and appreciate what this request means for them?
 - Is the person suffering from a “grievous and irremediable” condition?
 - Is their death “reasonably foreseeable”? **[this provision currently being debated]**

Second Assessment:

- By another physician or nurse practitioner, independent of the first
- Covers the same ground again:
 - Capacity?
 - Suffering?
 - Near End of Life?

Procedure:

- Provided by one of the two MAiD assessors
- Almost always done by injection of IV medication
- Person must provide capable consent once again (i.e., “Do you understand what we’re going to do, and do you agree to it?”)
- Family and friends can be present, all depending on the person’s wishes
- The procedure takes about 15 min, though people fall asleep almost immediately when they receive the injection and death follows very quickly

Changes to MAiD are proposed:

- Reduction in number of witnesses from two to one. Witness could be a healthcare professional
- People could receive MAiD even if their death is not “reasonably foreseeable.” There would be more stringent safeguards in this case (one assessor would have to be expert in person’s health condition; there would be a 90 day waiting period)
- People with only mental health conditions may become eligible in two years’ time
- Proposal to allow Advance Directives for MAiD has been set aside for now

Is MAiD the right choice?

- A difficult question to answer, but an important one to at least ask
- For some, touches on ideas of “the good death,” moral responsibility, religious belief, and the meaning of life
- For others, it’s simply another medical procedure, one of many life and death procedures that healthcare deals with each day
- One of the main dangers is that one person’s beliefs (either for or against MAiD) become imposed on another person’s life
- Because we’re all interrelated, though, it’s impossible for MAiD not to affect us all in some way

Maybe this is a better question:

How do we respect and care for each other while seeking the best outcomes in difficult situations?

To learn more:

- Government of Canada Department of Justice website
- Province of Ontario Ministry of Health and Long Term Care website
- Ministry of Health websites for other provinces

- Dying with Dignity Canada website
- CAMAP (Canadian Association of MAiD Assessors and Providers) website
- Bridge C-14 website (on-line MAiD support group)