

Medical Assistance in Dying (MAID)

Provincial MAID Clinical Team

May 2018

OVERVIEW

WHAT, WHO, WHEN, WHERE, WHY & HOW

WHAT - two types of MAID

- **Self-administered** medical assistance in dying
 - Physician who approved request prescribes medication
 - Patient (self) administers medication
 - Oral medication
 - **Clinician-assisted** medical assistance in dying
 - Physician who approved request prescribes medication
 - Physician administers medication
 - IV medication
- ONLY OPTION in MB at present**

WHO can provide MAID?

- **Federal law = physicians + nurse practitioners can provide MAID**
 - **All other HCPs + family/friends legally covered to participate in process**
- **MB = physicians only for now (NPs can't complete death certificates in MB)**

Conscience-based Objection

= an objection to participate in a legally available medical treatment or procedure based on an individual's personal values or beliefs

- No health care provider required to participate in MAID
- ALL health care providers have professional responsibility to:
 - Respond to a patient's request
 - Continue to provide non-MAID related medical care (non-abandonment)
 - MDs → ensure timely access to a resource that will provide accurate information (+ provide medical records)

WHO can have MAID?

Eligibility Criteria

- Eligible govt funded health services (no tourists)
- Adult (18 years) + capable making medical decisions
- Grievous + Irremediable medical condition
- Voluntary request not result external pressure
- Informed consent after review all options including *palliative care*

Grievous + Irremediable Medical Condition

MUST HAVE ALL THE FOLLOWING:

- **Have a serious + incurable illness, disease or disability**
- **Be in an advanced state of irreversible decline in capability**
- **Have enduring suffering that is intolerable**
- **Natural death reasonably foreseeable**

MAID not permitted

- **Minors**
- **Advance directive/Living will**
- **Mental illness sole medical condition**

WHEN can MAID occur?

- Law requires minimum 10 clear days from written request to MAID
 - Can shorten time if patient at imminent risk of:
 - Death OR
 - Loss capacity to provide consent
- Law requires immediately before MAID patient:
 - Given opportunity to withdraw their request
 - Provides consent → need to have capacity

WHERE can MAID occur?

- Home
- Hospital/PCH/LTC
 - Abstaining facilities → process vs provision
- Dedicated place (DLC)

WHY - Common Themes

- **Rarely uncontrolled physical symptoms**
- **Autonomy / Desire for control**
- **Loss of independence / identity**
 - “I am done”

HOW – Overview of MAID Process

- Initial inquiry/request
 - Contact with MAID team
 - 2 independent reviews (MD or NP)
 - Multidisciplinary
 - Eligibility criteria
 - Unmet needs
 - Written request
 - 10 day reflection period
- NOT AN EMERGENCY SERVICE (takes minimum 2 weeks)**

HOW - MAID Team

- **MDs + RNs + SWs + pharmacists + 2 SLP + 2 Admin**
- **Provincial service situated in WRHA**
 - **Unique to MB (single team + multidisciplinary)**
 - **Provide don't Promote MAID**
- **Team set up to provide all parts of MAID but welcome participation from other Health Care Providers**

HOW – Description of Provision

- **3 IV medications over 10-15 minutes**
 - Sedative → Anesthetic → Muscle relaxant
- **Very peaceful**
 - Fall asleep in 2-3 minutes
 - Stop breathing in 5-6 minutes
 - Heart stops in 8-10 minutes
 - No incontinence or movement

HOW – Death Certificate

- Cause of death = underlying illness
- Manner of death = natural
 - MAID info shared only with Vital Stats
- Funeral home does not need to know about MAID
 - IVs removed by team

HOW - Other Points

- **Not MAID vs Palliative Care**
 - Can + should have both
- **No cost**
- **Insurance remains valid**
- **Do not require family involvement**

HOW - To Communicate

- **Exploring a desire to die**
 - “Sit Down & *Lean In*” → www.virtualhospice.ca
 - Clarify b/w ready to die vs help to die
- **Providing Info (vs Recommending)**
 - Ok to let patients know MAID is legal + available
 - Ok to help connect them

MB MAID Stats as of May 14/18

- 598 contacts
- 266 written requests
 - 42 in 2016
 - 142 in 2017
 - 82 in 2018
- 136 died assisted
 - 24 in 2016
 - 63 in 2017
 - 49 in 2018
 - Majority cancer
- > 177 died unassisted
 - 56 approved for MAID
- 115 requests declined
 - Lacked capacity (55)
 - Death not foreseeable (60)
- 172 inquiries for information only
- **20% all contacts**

FINAL POINTS

- Option of MAID is *new*
- Desire to die *not new*
 - End-of-Life conversations don't need to change
- People will want MAID *despite* optimal care
- Request for MAID *does not = failure*

MAID Contact Info

- Tel: 204-926-1380 or 1-844-891-1825
- Fax: 204-940-8524
- maid@wrha.mb.ca
- www.wrha.mb.ca/maid

THE END