

 <p>MISERICORDIA Health Centre <i>The future of care</i></p> <p>POLICY</p>	Policy Name: Responding to Requests for Medical Assistance in Dying	MHC Policy Number: 200.030.041	Page 1 of 4
	Approval Signature: <i>Board of Directors President & CEO</i>	Section: Treatment/Therapy/Protocol	
	Date: January 2018	Supercedes: New	

1.0 PURPOSE:

- 1.1 To adopt and publish the official position of Misericordia Health Centre (MHC), including Misericordia Place as an Abstaining Facility Operator as defined in the WRHA Medical Assistance in Dying Policy 110.000.400 dated December 19, 2017.
- 1.2 To provide a consistent ethical and compassionate approach, reflective of Catholic moral teaching, the tradition of the Misericordia Sisters and the *Health Ethics Guide* when responding to expressed requests for Medical Assistance in Dying (MAID) within MHC.
- 1.3 To ensure respectful response to patient's expressed inquiries, requests and decisions relative to MAID.

2.0 DEFINITIONS:

- 2.1 **Abstaining Facility Operator:** The operator of a faith-based facility that is funded, but not owned or operated by the WRHA, that provides publically funded health services to Individuals in a manner which is consistent with the fundamental religious principles of the religion or faith to which it adheres, and which adopts and publishes an official policy or position that it will not allow MAID, or certain aspects of processes associated with MAID.
- 2.2 **Assessment Process:** The process for examination of the medical condition of a Patient so that all appropriate and available therapeutic options for the Patient can be identified, and the resulting consultation with a Patient on those therapeutic options available to the Patient to address the Patient's health and medical needs, including the assessment of the Patient by an Authorized Practitioner in accordance with the MAID Clinical Guide to determine whether the Patient meets the MAID Criteria.
- 2.3 **Attending Physician:** Member of the facility medical staff, practices independently (without a supervisor) and is responsible for the medical care of patients admitted under him or her.
- 2.4 **Exploration Phase:**
 - a) Explore what has prompted the request (pain and symptom management, psychological, social and/or spiritual concerns).

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- b) Explore person's current understanding of options available to address current and anticipated concerns.
- c) Explore the kind or breadth of discussion about the options available to them with people who are important to them.
- d) Explore the person's sense of resolve about requesting MAID rather than other options.

- 2.5 **MAID or Medical Assistance in Dying:** The administering by a Medical Practitioner or Nurse Practitioner of a substance to a person, at that person's request, that causes death; or the prescribing or providing by a Medical Practitioner or Nurse Practitioner of a substance to a person, at that person's request, so that they may self-administer the substance and in doing so cause their own death.
- 2.6 **Medical Practitioner:** A person who is entitled to practise medicine under the laws of Manitoba.
- 2.7 **Nurse Practitioner:** A registered nurse who, under the laws of Manitoba, is entitled to practise as a nurse practitioner – or under an equivalent designation – and to autonomously make diagnoses, order and interpret diagnostic tests, prescribe substances and treat patients.
- 2.8 **Palliative Care:** is an approach that improves the quality of life of residents and their families facing the problems associated with life-threatening illness, through the prevention and relief of suffering by means of early identification, assessment and treatment of pain and other symptoms, physical, psychosocial and spiritual.
- 2.9 **Patient:** Any individual who expresses an interest in having MAID provided to that individual, including without limitation an individual who may be a patient, resident or client of a WRHA Facility or WRHA program.
- 2.10 **Retaliation:** Where a Patient, or a member of the family of the Patient, expresses an interest in the provision of MAID, requests information on MAID, or otherwise pursues the Assessment Process and/or the provision of MAID, Staff and WRHA Facilities, including Abstaining Facility Operators, shall not:
- a) take or threaten any discriminatory or retaliatory action against the Patient;
 - b) take or fail to take any action which may or does result in the reduced availability or diminution of the level of healthcare services provided to the Patient; or
 - c) cause the Patient to be discharged or transferred to another healthcare facility, except in accordance with a documented treatment plan approved for the Patient or for the purposes of the provision of MAID.
- 2.11 **Staff:** All persons employed or engaged by the WRHA or by a WRHA Facility, including members of the medical staff, physicians, volunteers, board members, students, and other individuals associated through legal contracts, while acting in that capacity, or on behalf of the WRHA or in a WRHA Facility.

3.0 **POLICY:**

- 3.1 MHC as an Abstaining Facility Operator will not allow (a) an Assessment Process and (b) MAID (or certain aspects of MAID), to be provided within its Facility.

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- 3.2 As a Catholic health care organization, MHC is committed to the inherent dignity of every human being throughout the entire continuum of life from conception to natural death. MHC's ethical and moral opposition to MAID shall be recognized, respected and honoured by all persons served by, or working within Misericordia Health Centre, including management, employees, physicians, volunteers, students and to any other persons acting on their behalf (collectively "Staff").
- 3.3 MHC is committed to providing quality end of life and palliative care, as well as compassionate support for all Patients/residents and their loved ones through all stages of life.
- 3.4 MHC is an Abstaining Facility Operator; however, this does not relieve the Staff from obligations to comply with the requirements of their applicable professional college or regulatory authority and to provide to the Patient or family member timely access to a resource that will provide accurate information about MAID.
- 3.5 Expressed requests from persons in our care for MAID should be respectfully acknowledged without judgment, coercion or retaliation.

4.0 PROCEDURE:

- 4.1 Prior to admission, all individuals seeking admission to MHC will be informed of this policy, and will be asked to acknowledge in a prescribed form their understanding that neither MAID intervention nor the MAID Assessment Process will be provided within the facility. MHC will provide information to all individuals requesting information on its policy related to MAID.
- 4.2 When a person expresses a wish for MAID the care provider will respond to Patient needs and notify the MHC Attending Physician and Resident Care Manager of circumstance and request for MAID.
- 4.3 The Attending Physician and the Resident Care Manager must review the person's medical status and decision making capacity and seek to understand the person's reasons for the request and work with the patient and the interprofessional team to promptly assess and attend to unaddressed patient needs.
- 4.4 The Attending Physician will promptly review the patient's medical status and engage in a conversation with the Patient seeking to understand the reasons for the request. As part of the exploration phase, the Attending Physician will take a whole person centred approach to care and will refer to additional services from the interprofessional health care team. The health care team will then discuss the full range of treatment options with the person. The health care team will also advise the person of the MAID policy and specifically that this service is not provided at MHC, but that the provision will be made for them to explore and access MAID services through the WRHA, together with the Provincial MAID Team.
- 4.5 At MHC, the Attending Physician and other health care providers who are approached by Patients or their families about proceeding with MAID shall advise the Chief Medical Officer (CMO) or the Chief Nursing Officer (CNO) of MHC.
- 4.6 Persons in our care who may be contemplating the decision of Medical Assistance in Dying, and who without having decided to proceed, ask for an assessment by an external third party (MAID team), will receive a timely, compassionate and

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appropriate response. The assessment process will not take place within the Misericordia Health Centre facility.

- 4.7 According to the prudent guidelines of Catholic moral teaching, of the degree of permissible limited cooperation, exceptional circumstances under which the MAID team might be allowed to conduct an assessment would be: the person in care is extremely medically fragile and unable to endure offsite assessment involving multiple transfers without risk of serious harm, even the potential of inadvertently hastening their death.
- 4.8 The WRHA Medical Assistance in Dying policy requires Abstaining Facility Operators to include the following provisions in their MAID policies:
- a. Staff including Conscientious Objectors are required to disclose and provide personal health information about an individual in accordance with the *Personal Health Information Act*, as well as access to the individual's health record, to the MAID Team when requested by the Individual or the MAID Team.
 - b. Individuals shall receive timely and accurate responses when an Individual requests MAID or information relating to MAID. For greater certainty, timely and accurate information relating to MAID means, at a minimum, that the Individual is provided with the contact information for the MAID Team and/or Health Links-Info Sante as set out in section 4.1 of the WRHA Policy within 24 hours of the inquiry.
 - c. Individuals may not be able to access MAID if the Individual is too ill or frail to be transferred to another WRHA facility that permits MAID, or if the Individual declines to be transferred from an Abstaining Facility Operator to another WRHA facility that permits MAID.

5.0 REFERENCES:

- 5.1 Catholic Health Corporation (CHCM) Board of Directors Statement of Position and Commitments.
- 5.2 WRHA Policy 110.000.400. Medical Assistance in Dying. Dated December 19, 2017.
- 5.3 Criminal Code of Canada.
- 5.4 College of Physicians and Surgeons of Manitoba, By-Law No. 11, Schedule M
- 5.5 Statement on Medical Assistance in Dying by the College of Registered Nurses of Manitoba, the College of Licensed Practical Nurses of Manitoba, and the College of Registered Psychiatric Nurses of Manitoba.
- 5.6 Health Ethics Guide. Third edition (2012). Catholic Health Alliance of Canada.

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