

BRIDGE C-14

Core Concepts: Foundations of MAiD

Day 1:
The Evolution of MAiD in Canada

WITH LAUREN CLARK AND CHELSEA PEDDLE,
AND SPECIAL GUESTS MEGAN SHELDON & DR. STEFANIE GREEN



Land Acknowledgement



It's So Great to Have You Here

Many of you joining are in professional or volunteer roles dedicated to helping others. You are in good company with others from across Canada and beyond!

We acknowledge that individuals in these roles, with minimal clinical or hands-on experience and understanding of the complexities related to the assisted dying process, may feel unprepared and anxious about providing assistance and empathy to individuals and their support systems during the MAiD journey. We recognize that a lack of knowledge about MAiD can contribute to stigma and affect the clinical relationship. That's why it's so great to have you be a part of this special week-long learning experience centred around MAiD.



What Makes the Conference Unique?

- Professionals and volunteers need a platform for learning about MAiD and the complex psychosocial aspects that impact the experience for all involved.
- There is currently no other formalized MAiD-specific and psychosocial-focused curriculum or virtual (or in-person) week-long learning opportunities like this offered in Canada (and beyond) to individuals outside of assessors and providers.
- Integrating experiential voices is what makes Bridge C-14's approach to education stand out and ensures that it is valuable and relevant to all learners. This is why it was so important for us to put together this one-of-a-kind, week-long MAiD-specific learning opportunity!

Conference Housekeeping Notes

- How to access sessions: the Meeting ID for Zoom can be found in your conference registration email.
 - *Note: There are different Zoom Meeting IDs depending on what you have registered for (i.e., Core Concepts: Foundations of MAiD (days 1&2) and Special Topics (Days 3,4,5)).*
- Please log in at least 5 minutes before each session as we will be starting promptly.
- Engage actively through chat, sharing your experience and questions. We also encourage you to have your camera on - this helps build energy and engagement, especially for our presenters who will be working hard for us.
 - *Note: sessions are being recorded and by attending a session you agree to be recorded. If you do not wish to be shown on the recording please turn your camera off. The recordings will only be shared with conference registrants then destroyed after the viewing period. You will have 3 weeks after the conference to view the recorded sessions.*
- We will be sharing a brief evaluation survey after each session and we are very grateful for your feedback.

Introductions - Megan Sheldon

- Co-founder and CEO of Be Ceremonial, the world's first guided ritual and ceremony app
- Cultural mythologist, humanist celebrant, and end-of-life doula living and working in North Vancouver, BC.
- Passionate about shifting the narratives that surround death, dying and grief and recently hosted The Death Talk with 3 other deathcare professionals.
- Offers virtual workshops and seasonal retreats on Bowen Island and in Whistler, BC.

BECEREMONIAL



Opening Ceremony



Foundations of MAiD - Overall Learning Outcomes

- Professionals and volunteers will feel prepared to engage in conversations about MAiD and to offer psychosocial support for those involved in the MAiD journey.
- Participants will be versed in diverse experiences of those touched by MAiD, have tools and resources to offer psychosocial support and guidance throughout the MAiD process and grief bereavement.
- Participants will have an opportunity to connect with resources and other stakeholders in the MAiD community.

Foundations of MAiD - Day 1 Learning Outcomes

- Explain the history of MAiD legislation in Canada, eligibility, and application process and how it operationalized in different jurisdictions.
- Identify ethical considerations for professionals supporting people pursuing MAiD.
- Identify ways to engage clients in conversations about MAiD that support non-coercion and responsibilities of care.
- Identify psychosocial aspects of the MAiD experience including emotional, mental/cognitive, social, cultural and existential aspects.
- Explain MAiD assessment process and delivery.

Mindfulness Moment

Important Lingo

- Medical Assistance in Dying = MAiD = Assisted Death/Dying
- Assessor = Physician or Nurse Practitioner*
- Provider = Physician or Nurse Practitioner*
- Practitioner = Physician or Nurse Practitioner
- Procedure = Provision = MAiD Event = Delivery = Assisted Death
- Patient = Client = Individual
- Support Network = Loved Ones = Family or Friends = Caregivers

**Where permitted*

Medical Assistance in Dying is ...

- Often referred to as **MAiD** or assisted dying/death
- **Administration of medications** to intentionally and safely end the life of an adult patient who meets **strict legal criteria**, at the **request of the individual**
- More than strictly a medical procedure - the non-medical (psychosocial) side of MAiD needs to be addressed as well

MAiD Legislation in Canada

- On June 17, 2016, the federal government passed **Bill C-14** which established the legalization of MAiD in Canada
- **Bill C-7** received Royal Assent on March 17, 2021
 - Dual track system (reasonably foreseeable | not reasonably foreseeable)

Timeline of MAiD in Canada

1992:
Sue Rodriguez begins her fight to overturn assisted dying laws in Canada

June 2012:
Supreme Court Justice declares Canada's laws against physician-assisted suicide unconstitutional

June 17, 2016:
Parliament of Canada passes Bill C-14

September 12, 2019:
Justice Baudouin struck down "reasonably foreseeable" and "end of life"

March 17, 2021:
Bill C-7 receives Royal Assent

September 1993:
Supreme Court of Canada dismisses Rodriguez's appeal

February 6, 2015:
Supreme Court of Canada rules in Carter v. Canada

June 13, 2017:
Truchon and Gladu challenge Quebec's and Canada's MAiD laws

October 5, 2020:
Introduction of Bill C-7 in Parliament

Sue Rodriguez

*"If I cannot give consent
to my own death,
whose body is it?
Who owns my life?"*



Kay Carter and Gloria Taylor



"Audrey's Amendment"

- Named after Audrey Parker who received MAiD earlier than she wanted because the law required patients to give final consent just before the procedure and she was concerned that she would lose capacity
- Under Bill C-7, the waiver of the requirement to provide final consent immediately before receiving MAiD for patients whose natural death is reasonably foreseeable is allowed (*called the "Waiver of Final Consent"*)

Jean Truchon and Nicole Gladu *v. Canada (Attorney General) and Quebec (Attorney General)*

- Neither met the 'end of life/reasonable foreseeability of death' requirement
- Launched their court challenge in June, one year after Bill C-14 was passed in Parliament
- Challenged criteria in Quebec's assisted dying law, which limits MAiD access to patients who are terminally ill
- Took aim at unconstitutional rules in Bill C-14
- Justice Baudouin found both provisions violated the right to life, liberty and security, and discriminated against people with disabilities who are not near death

Nicole Gladu and Jean Truchon

"Now, it's really a matter of personal decision. It's up to me or it's up to Mr. Truchon or other people like us to decide if we prefer the quality of life to the quantity of life."

- Nicole Gladu,
following decision of
Justice Baudouin



Bill C-14 Explained

- Passed in Parliament on June 17, 2016
- Allows individuals, who meet strict legal criteria, the right to request assistance to die from a physician or Nurse Practitioner
- Medical practitioners and Nurse Practitioners, along with others who are involved in the MAiD process, are exempt from criminal charges for their involvement in assisted dying
- Those who are involved are required to report all MAiD deaths
- New offences in place for those who do not comply or contravene the regulations

Eligibility Requirements Under Bill C-14

Individuals were required to:

- Have coverage under a provincial health insurance plan
- Be 18 years of age or older and capable of making decisions about their health; aware of risks, alternatives and palliative care
- Have a grievous and irremediable medical condition
- Natural death must be reasonably foreseeable (*clarified with AB case*)
- Make a voluntary request for MAiD in writing, with two* independent witnesses
- Have two independent medical assessments
- Minimum 10 day waiting period* between written request and MAiD procedure

Changes Under Bill C-7

- As of March 17, 2021, persons who wish to receive MAiD must meet specific eligibility criteria much the same as under Bill C-14
- Criteria related to age, capacity, residency, voluntariness, and informed consent remain unchanged
- Nature of the underlying grievous and irremediable condition required to access MAiD has changed:
 - Have a serious and incurable illness, disease or disability (*excluding a mental illness until March 17, 2023*)
 - Be in an advanced state of irreversible decline in capability
 - Have enduring and intolerable physical or psychological suffering that cannot be alleviated under conditions the person considers acceptable

Exclusions

- Mental health as a sole diagnosis (*until March 17, 2027*)
- Advanced directives
- Mature minors (*under 18 years of age*)

Break

Dual Track System

- Bill C-7 differentiates between those whose death is:
 - Reasonably Foreseeable ("Track 1")
 - Not Reasonably Foreseeable ("Track 2")
- Different sets of safeguards for each

Reasonably Foreseeable

- Eligible for publicly funded health care services
- Be >18 years of age and capable of making decisions about their health; aware of means available to them to relieve suffering
- Have a serious and incurable illness, disease or disability
- Be in an advanced state of irreversible decline in capability
- Have enduring physical and psychological suffering that is intolerable to them and cannot be relieved under conditions that they find acceptable
- Make a voluntary request for MAiD in writing, with one independent witnesses
- Have two independent medical assessments to ensure that they meet eligibility requirements
- No reflection period
- Final consent can be waived if waiver of final consent has been signed

Not Reasonably Foreseeable

- Same criteria as "Reasonably Foreseeable"
- Additional safeguards:
 - 90 clear days (minimum) between the day of eligibility and the day of the provision
 - Ensure that the assessors consult with a medical or nurse practitioner with expertise in the condition the person is suffering from, and share the results with the assessors
 - Need to be informed of and offered available supports and community services
 - Individual and practitioners must agree that reasonable and available means of alleviating suffering have been discussed and considered
 - individuals must be given an opportunity to withdraw consent immediately before MAiD is delivered
 - Individuals must be able to provide consent immediately before MAiD is delivered

Informed Consent

- Individuals must provide informed consent to their practitioner. This means they have consented (*or given permission*) to proceed with MAiD after receiving all of the information they need to make their decision
- Individuals must be able to give informed consent both:
 - at the time of their request
 - immediately before MAiD is provided unless special circumstances apply (*Waiver of Final Consent*)
- Individuals can withdraw their consent at any time and in any manner

Waiver of Final Consent

Often referred to as "Audrey's Amendment", individuals are now able to waive the requirement for giving final consent just before MAiD is provided only if:

- the individual's natural death is reasonably foreseeable and
- while they had decision-making capacity:
 - they were assessed and approved to receive MAiD
 - the practitioner advised that the individual is at risk of losing capacity to provide final consent
 - the individual made a written arrangement with their practitioner in which they consent in advance to receive MAiD on the chosen date even if they no longer have capacity to consent on that date



Breakout Rooms - Discussion Questions

- How do you feel about MAiD eligibility criteria, inclusions and exclusions?
- What concerns you about MAiD in Canada?
- What supports your confidence in the system/process?
- What questions do you have?



Conscientious Objection

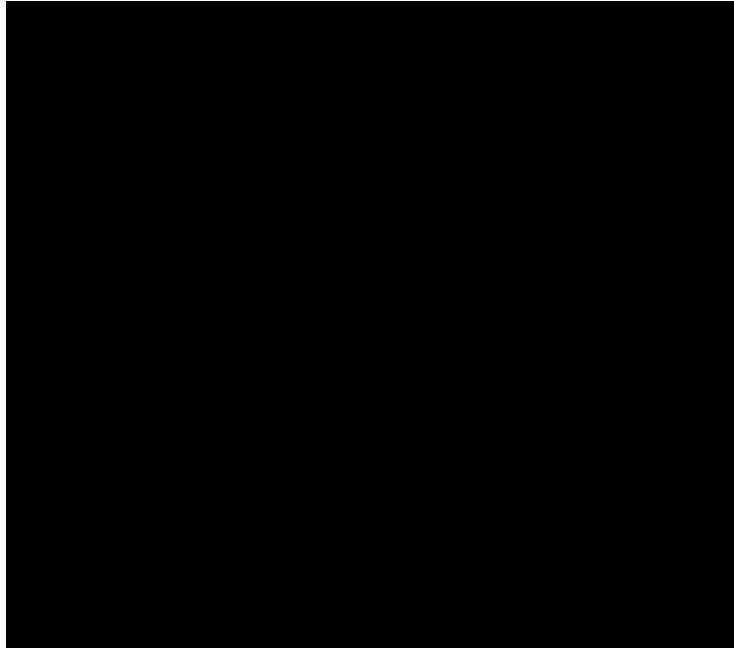
- Health care professionals have the right to conscientiously refuse to participate in MAiD based on moral or religious beliefs
- However, they must:
 - Respect the patient's decision
 - Discuss all treatment options
 - Not impede access
 - Communicate directly to patient
 - Provide an effective referral

Why Do People Request MAiD?

Health Canada Annual Report on MAiD, 2022

- Control over death
- Loss of autonomy
- Loss of ability to enjoy activities
- Fear of future suffering
- Existential suffering
- Expression of values





Who Brings Up MAiD?

- Many individuals are not aware of the full name nor the acronym, rather bring up the idea of Medical Assistance in Dying through phrases such as, "I'm done suffering - I want this to end" or "I want someone to help me die".
- People we support may also feel unsure about whom they should approach about it. They often experience worry and fear, or concern about judgement or pushback from care providers. This can cause people to stay silent.
 - Unless the practitioner brings up MAiD, these people remain woefully unaware of their right to information about and access to a medically assisted death.
- Individuals may hear about MAiD through family, friends, media and, occasionally, from their healthcare team.
- People are not permitted to counsel someone to choose MAiD.

What is Our Role When Someone Brings Up MAiD?

At its core, our role involves:

- guiding individuals towards resources on MAiD,
- providing unbiased support and a compassionate presence.

Depending on your professional responsibilities, you may play a key role in:

- assisting individuals in exploring their values and preferences,
- aiding in decision-making processes, and
- facilitating discussions with healthcare providers and family members.

As a starting point, we recommend:

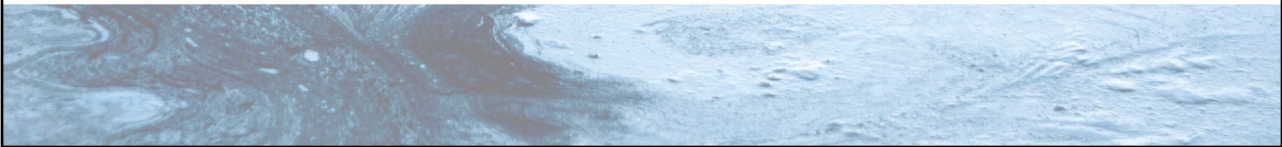
- directing individuals to their primary care provider, a specialist, or a MAiD Coordination office for comprehensive information on MAiD.

How is MAiD Different Than Suicide?

- Psychiatrist Dr. Derryck Smith clarifies that death by suicide typically stems from untreated mental illness, whereas Medical Assistance in Dying (MAiD) is a deliberate choice regulated by laws and administered by healthcare professionals.
- MAiD serves as an option for Canadians enduring unbearable suffering without the prospect of improvement.
- Suicide is often driven by despair, while MAiD is motivated by hope and self-determination.
- The provision of MAiD is methodical and peaceful, often involving family and friends in the process for farewells.
- Suicide involves ending one's life, often linked to mental health issues, hopelessness, substance abuse, trauma, or significant loss. It usually happens in solitude, through a violent act, leaving loved ones grieving over the unexpected loss.



Breakout Rooms - Discussion Questions

- What do you think your initial reaction would be if someone were to ask you about MAiD?
 - How would you respond?
 - If this has happened to you, can you recall what you said and what happened from there? How did you feel in the moment?
- 

How Can You Talk About MAiD in Early Conversations?

- Explore their client's interest in learning about MAiD through goals of care or goal setting conversations.
- Prompt reflection and movement towards identifying client goals by asking questions like:
 - What do you understand about your illness/disease/condition?
 - What do you want for yourself when you become sicker?
 - What is most important to you during this time?
 - What are your hopes for the time you have remaining?
 - What are you willing to live with or without as your health changes?
 - What worries or scares you?
 - What helps you during this time?
- Advise that there are many options to consider about their care
 - "I can offer information about all your options, if you wish, including information about palliative care, hospice, and MAiD."

How Can We Communicate Non-Coercion?


- Express to clients that:
 - They have a range of options and the right to all information
 - Clients are in the driver seat, they choose, no one else
 - People pursuing MAiD can change their minds at any time
- For professionals:
 - You have a responsibility to share information about all options, including MAiD
 - Take the time to listen, be present with your client
 - Invite questions
 - Acknowledge emotions - don't offer silver linings
 - Ask if they would like family members involved in the conversation or other sources of support (e.g., cultural or spiritual advisers)

Professionals and Volunteers Can Also ...

- *Build trust and confidentiality with clients.*
- *Check in regularly and offer continued support.*
- *Use visual aids and written materials for clarity.*
- *Validate client experiences and affirm autonomy.*
- *Engage in ongoing training and reflection to maintain awareness and respect for client autonomy.*



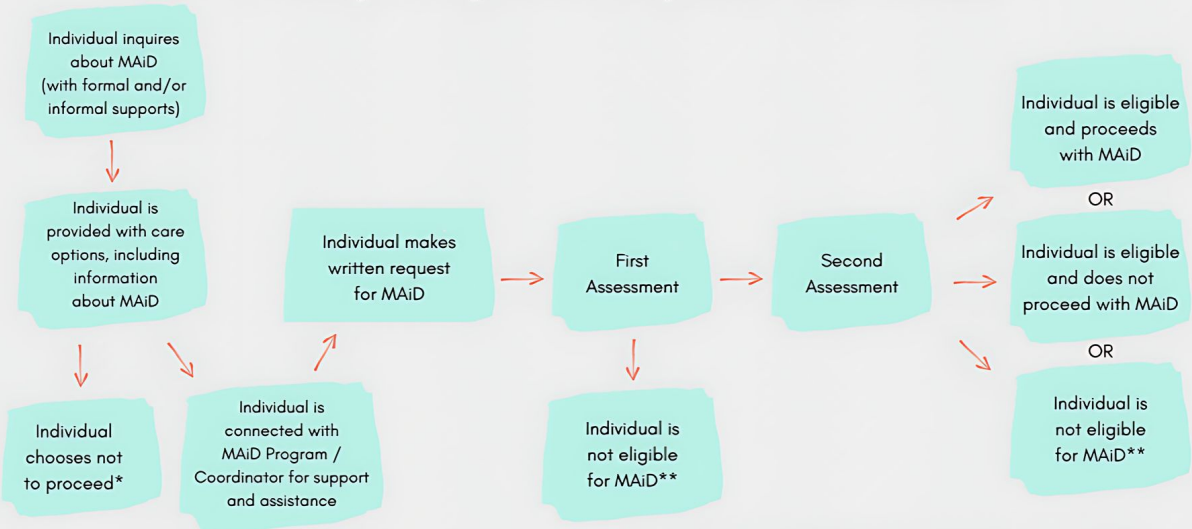
Discussion Question

- In what other ways can you support non-coercion/person-centred approach to sharing information about MAiD?
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Lunch Break

Navigating the MAiD Process



*Note: an individual can choose to withdraw their request at any time

**Note: an individual can request another assessment if one assessor finds ineligible

Insights From a MAiD Assessor and Provider

Introducing Dr. Stefanie Green

*But it doesn't end there.
Once someone has been found eligible they need to ...*

Choose a date for MAiD

Decide who they want to inform about their decision and if/how they want to tell others

Process the reality of the impending death

Choose a location for MAiD

Consider who they want to have with them on the day of MAiD

Continue to manage their care needs ahead of MAiD

Think about how they will say goodbye to those they care for

Manage affairs

... plus many other tasks

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Breakout Rooms - Discussion Questions

Pick one or two of the following areas to discuss in your breakout room and prepare to share highlights with the group:

- What **emotions** might an individual pursuing MAiD experience? What emotions might a person supporting a loved one experience? How might emotions influence the body or physical symptoms?
- How might MAiD impact **social** relationships, belonging, or standing? What social/relational needs do people pursuing MAiD and their loved ones have?
- How might **culture** influence a person's experience of MAiD? Consider individual, family, community, and systems contexts.
- How might **spirituality or religion** influence a person's experience of MAiD or their loved one's experience of their person's MAiD?
- What **existential questions** might a person pursuing MAiD be grappling with? What about their loved ones?



Now That We Are Done Part #1 ...

1. Any questions?
2. What was the most valuable thing you got out of today?



Foundations of MAiD - Day 2 Learning Outcomes

- Identify psychosocial aspects of the MAiD experience for people pursuing MAiD, their supporters, and people grieving a MAiD death.
- Identify opportunities and activities to help individuals and families prepare for MAiD and navigate grief bereavement using a person-centred approach.
- Complete a MAiD psychosocial assessment using a practice support tool.
- Use coping strategies and rituals for self-care to support clients, and practitioner self-care for professionals and volunteers experiencing grief from client death.
- Identify sources for MAiD information and resources for clients, including Bridge C-14 supports.

Homework

- Review the Pre-MAiD Psychosocial Assessment tool in the resources provided to you in the Pre-Participant Email.
- Identify a question that interests you the most, reflect on why that is, and the unique skills/perspective you can bring to exploring that question with clients.
- Identify a question that worries you the most, reflect on why, and what you can do to solve those worries.
- Prepare to discuss your reflections in a small group at the beginning of day tomorrow.



Closing Remarks

Insights From Dr. Stefanie Green



Closing Ceremony



See you tomorrow!