

Medical Assistance in Dying (MAiD)

End of life in public spaces- lessons learned

Introductions:



- ▶ Dr. Aaron McKim MD, CCFP,
- ▶ Assistant Professor- Ross Family Practice
- ▶ C.A.C. in Care of the Elderly
- ▶ MAiD Assessor/Provider
- ▶ LTC division chief- Eastern Urban Zone
- ▶ Medical Director MAiD Eastern Zones



- ▶ Dr. Mari-Lynne Sinnott MD, CCFP
- ▶ Assistant Professor Dis. Family Med.
- ▶ Family Physician at ProActive Wellness Centre, Ropewalk Lane
- ▶ MAiD Assessor/Provider

Overview

Introduction

- What is Medical Assistance in Dying?
- Eligibility, access, autonomy

Current snapshot- who's accessing MAiD?

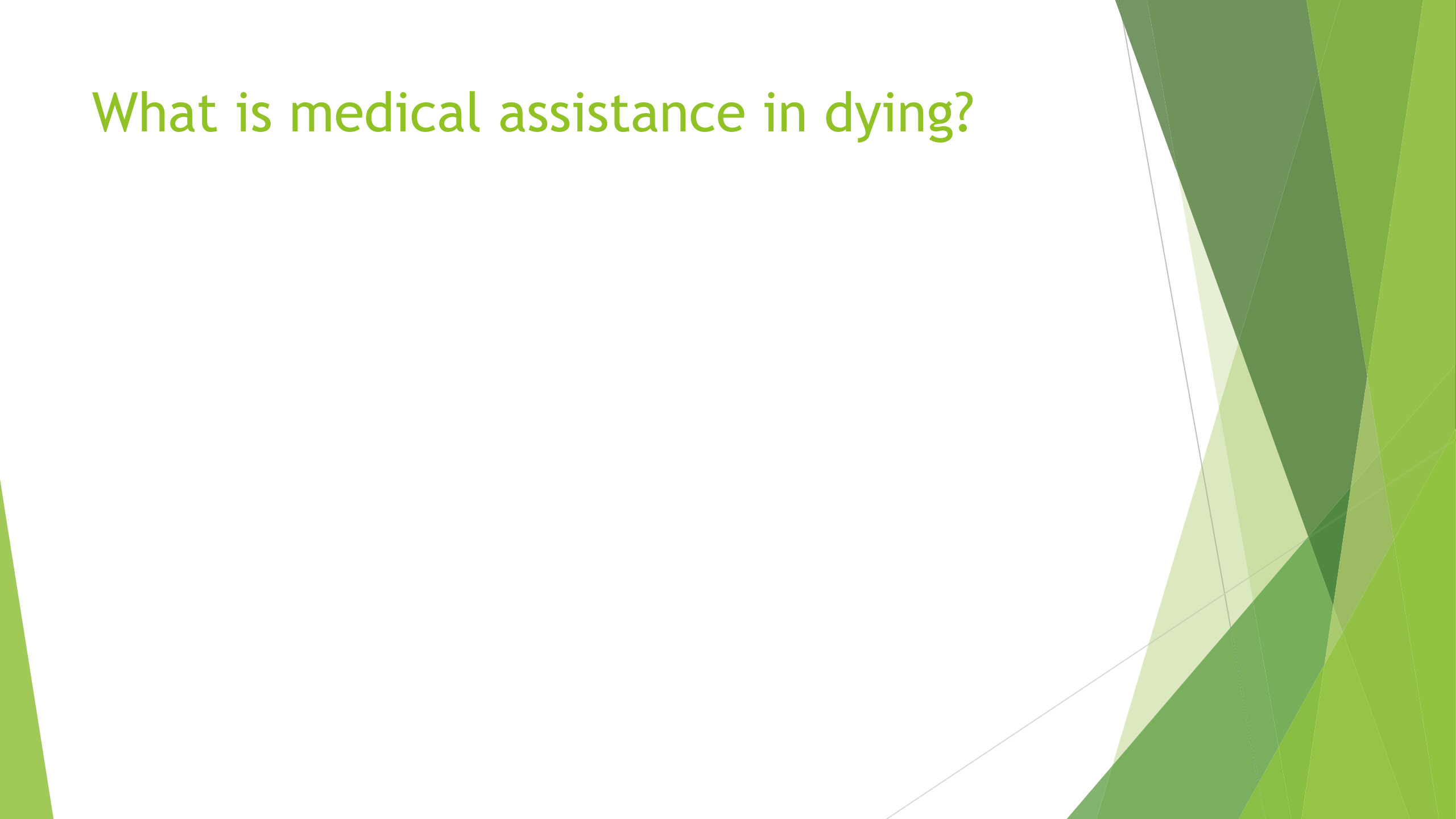
- Front Lines- recent trends in Canada, NL

Personal perspectives

- Lessons Learned
- Going Forward...

Questions and Discussions

What is medical assistance in dying?

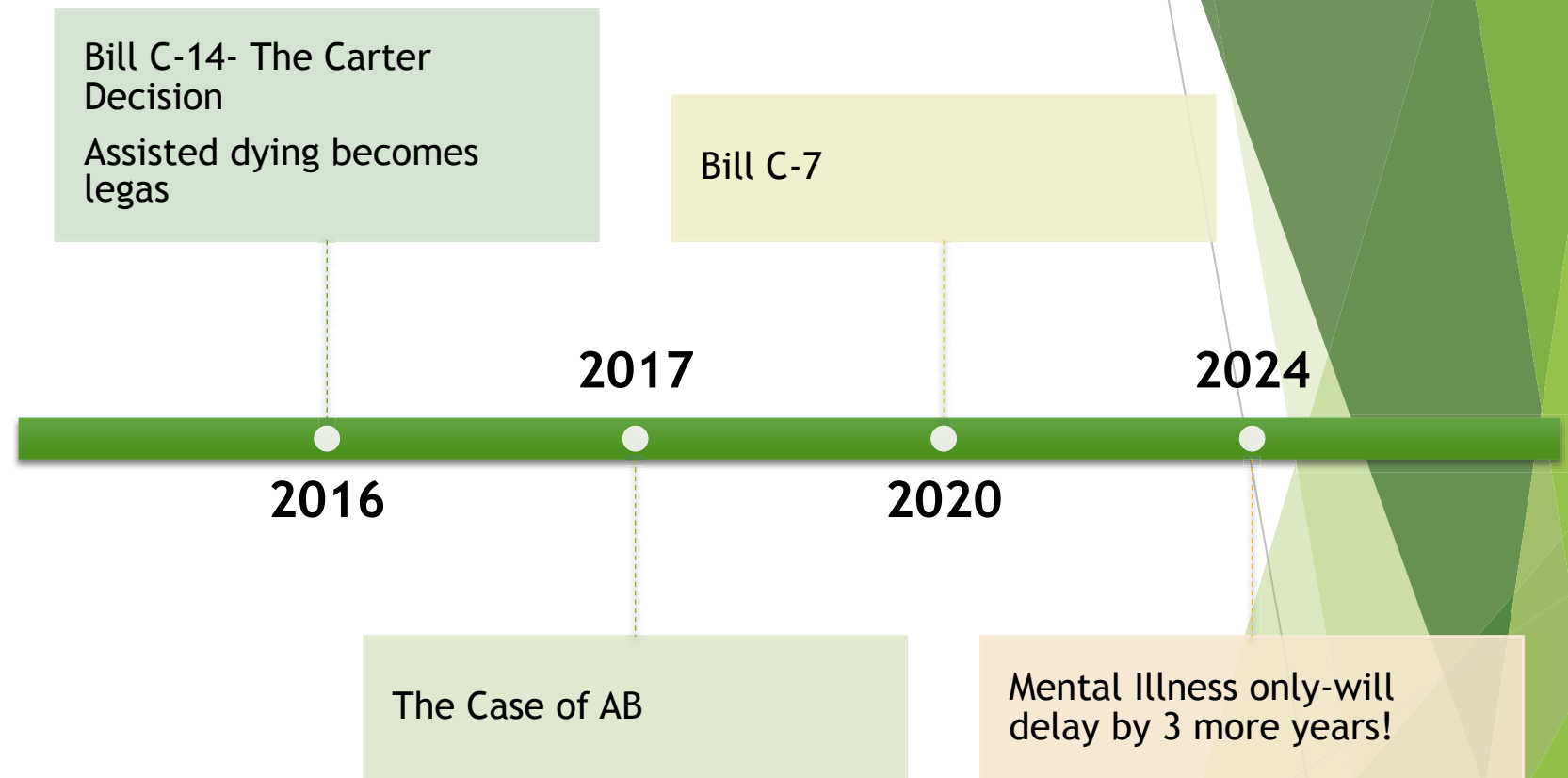


MEDICAL ASSISTANCE IN DYING

(Eastern Zone-End of Life options document)

- ▶ In June 2016, the Parliament of Canada passed federal legislation that allows eligible Canadian adults to request medical assistance in dying, or MAiD.
- ▶ Medical Assistance in Dying is a process in which a medical practitioner (physician or nurse practitioner) administers medications to help a patient who wants to voluntarily and intentionally end their life.
- ▶ Requesting MAiD is a deeply personal decision; however, it is important to discuss your wishes with your family members, your loved ones, your health-care provider(s) and anyone else you feel is appropriate.

Legislative progression



Eligibility criteria

Eligibility criteria

1. Adult (18 years)

Eligibility criteria

1. Adult (18 years)
2. Eligible for Canadian government-funded health services
(no tourists)

Eligibility criteria

1. Adult (18 years)
2. Eligible for Canadian government-funded health services
(no tourists)
3. Voluntary request, not a result of external pressure

Eligibility criteria

1. Adult (18 years)
2. Eligible for Canadian government-funded health services
(no tourists)
3. Voluntary request, not a result of external pressure
4. Grievous and irremediable medical condition*

Eligibility criteria

1. Adult (18 years)
2. Eligible for Canadian government-funded health services
(no tourists)
3. Voluntary request, not a result of external pressure
4. Grievous and irremediable medical condition*
5. Capable of making medical decisions (Capacity)

Eligibility criteria

1. Adult (18 years)
2. Eligible for Canadian government-funded health services
(no tourists)
3. Voluntary request, not a result of external pressure
4. Grievous and irremediable medical condition*
5. Capable of making medical decisions (Capacity)
6. Provide informed consent after reviewing all options including palliative care

*Grievous + irremediable medical condition

MUST HAVE **ALL** THE FOLLOWING:

1. A serious and incurable illness, disease or disability*
2. An advanced state of irreversible decline in capability/function
3. Enduring suffering (physical and/or psychological) that is intolerable and which cannot be relieved *by any means acceptable* to the patient

*mental illness exclusion until March 17, ~~2024~~ 2027 (!)

How does a patient start the process?

Talking with each other:

Friends and Family
RN/Social Work/Primary Care/Specialist
End of life options document
MAiD FAQ

► E.H. Intranet search:

“End Of Life Options”

Advanced Directives
Palliative Care
MAiD
Organ Donation
Grief and Bereavement

SERIOUS ILLNESS AND END-OF-LIFE CARE
Options and decision making

Have you ever thought about how you'd like to be cared for if you were diagnosed with a serious or life-limiting illness?

The reality is, eight in 10 Canadians have given end-of-life care some thought, but less than one in five have an advance care plan (ACP) in place to outline your wishes for future health and personal care.

This information sheet is intended to help you start conversations about serious illness and/or end-of-life care including Advance Care Planning, Palliative Care, Medical Assistance in Dying and Organ Donation. In addition, your health-care provider can respond to your questions or can point you in the right direction to have those questions answered.

ADVANCE CARE PLANNING
Who will speak for you?

Did you know that 75 per cent of us would like to die at home, yet only 15 per cent do so?

Advance Care Planning is the process of thinking about and sharing your wishes for future health and personal care. It can help you tell others what's important to you if you become ill and are unable to communicate.

It's about maximizing your quality of life and being in control of how you live and die. It's about making decisions for your care – while you're still in control.

Getting started:

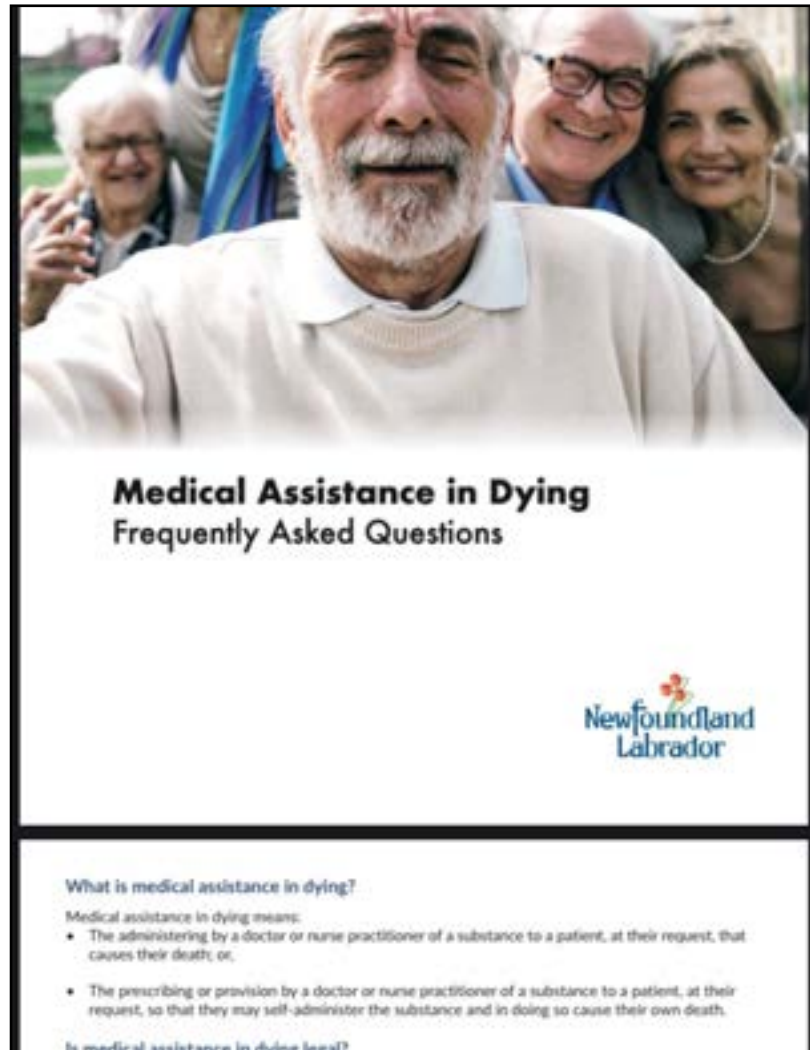
- Reflect on your values and wishes and think about what kind of health and personal care you would want in the future if you are unable to speak for yourself.
- If you're undergoing treatment, talk to your doctor or health-care team about different treatments available to you in a hospital, long-term care home or community care setting - and what you can expect from those treatments.
- Name a Substitute Decision Maker (SDM) who will speak for you when you cannot speak for yourself and discuss your wishes with this person.
- Write down your preferences for care while you're physically and mentally well and are not influenced by an emergency situation. You can create your own document or use an Advance Care Planning booklet available at www.advancecareplanning.ca/resourcemanage-worksheets.

For more information about Advance Care Planning:

- Ask your doctor or health-care provider.
- Visit www.advancecareplanning.ca.
- Visit the Government Newfoundland and Labrador website at: http://www.health.gov.nl.ca/health/advance_care_planning_booklet.pdf.

February 28, 2020 Page 1 of 6

Search “MAiD NL” Provincial FAQ document



NL Regional MAiD Coordination Teams

▶ **Labrador-Grenfell Zone :**

▶ t: 709.897.2350 e:
maid@lghealth.ca

▶ f: 709.896.4032

▶ **Eastern Zones :**

▶ t: 709.777.2250 e:
maid@easternhealth.ca

▶ tf: 833.777.2250

▶ f: 709.777.7774

▶ **Western Zone:**

▶ maid@westernhealth.nl.ca

▶ t: 709.637.5000

▶ f: 709.637.5159

▶ ext. 5168

▶ **Central Zone :**

▶ t: 709.533.2374 e:
maid@centralhealth.nl.ca

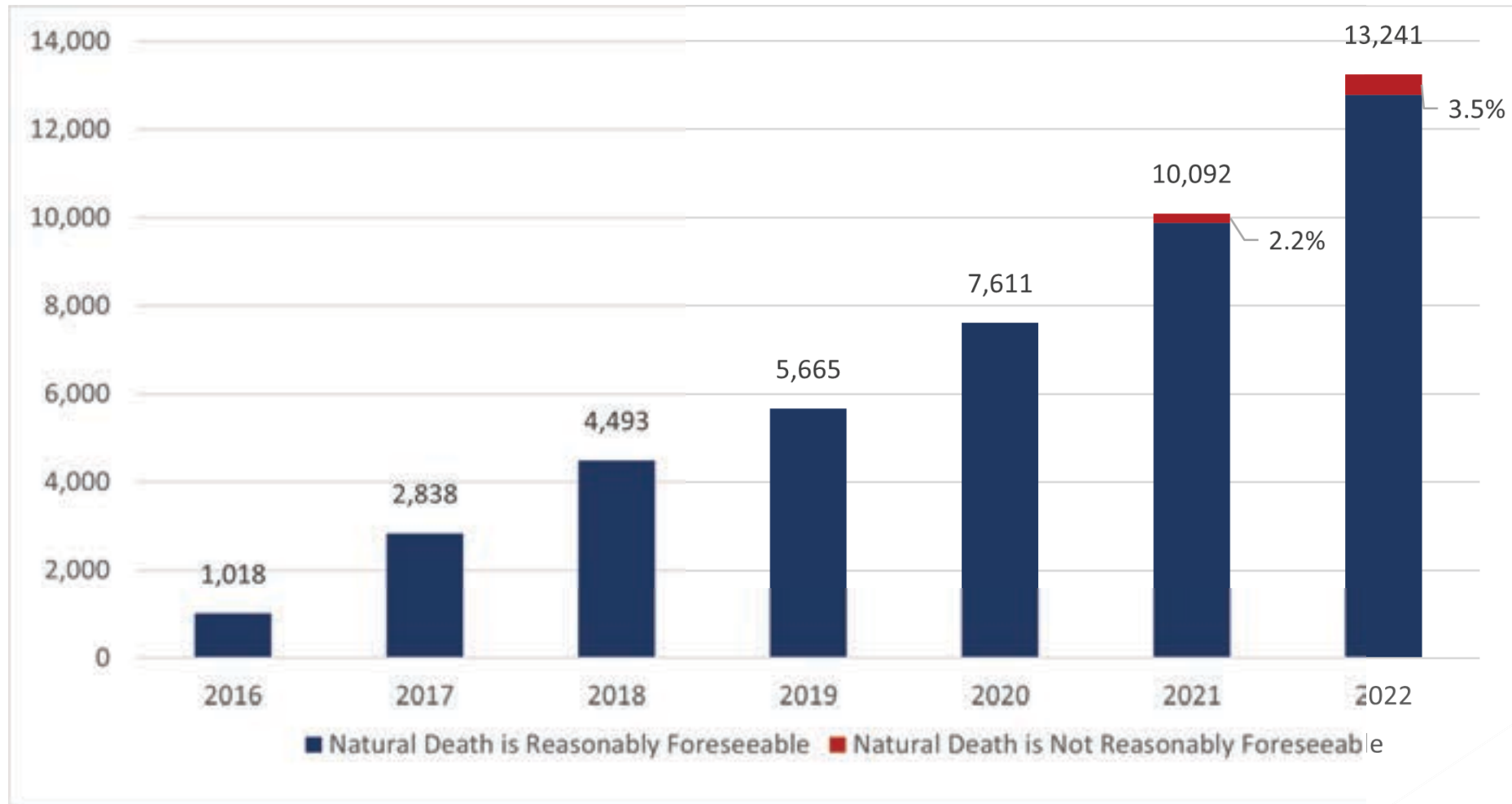
▶ or 709.292.2151

▶ f: 709.292.2249

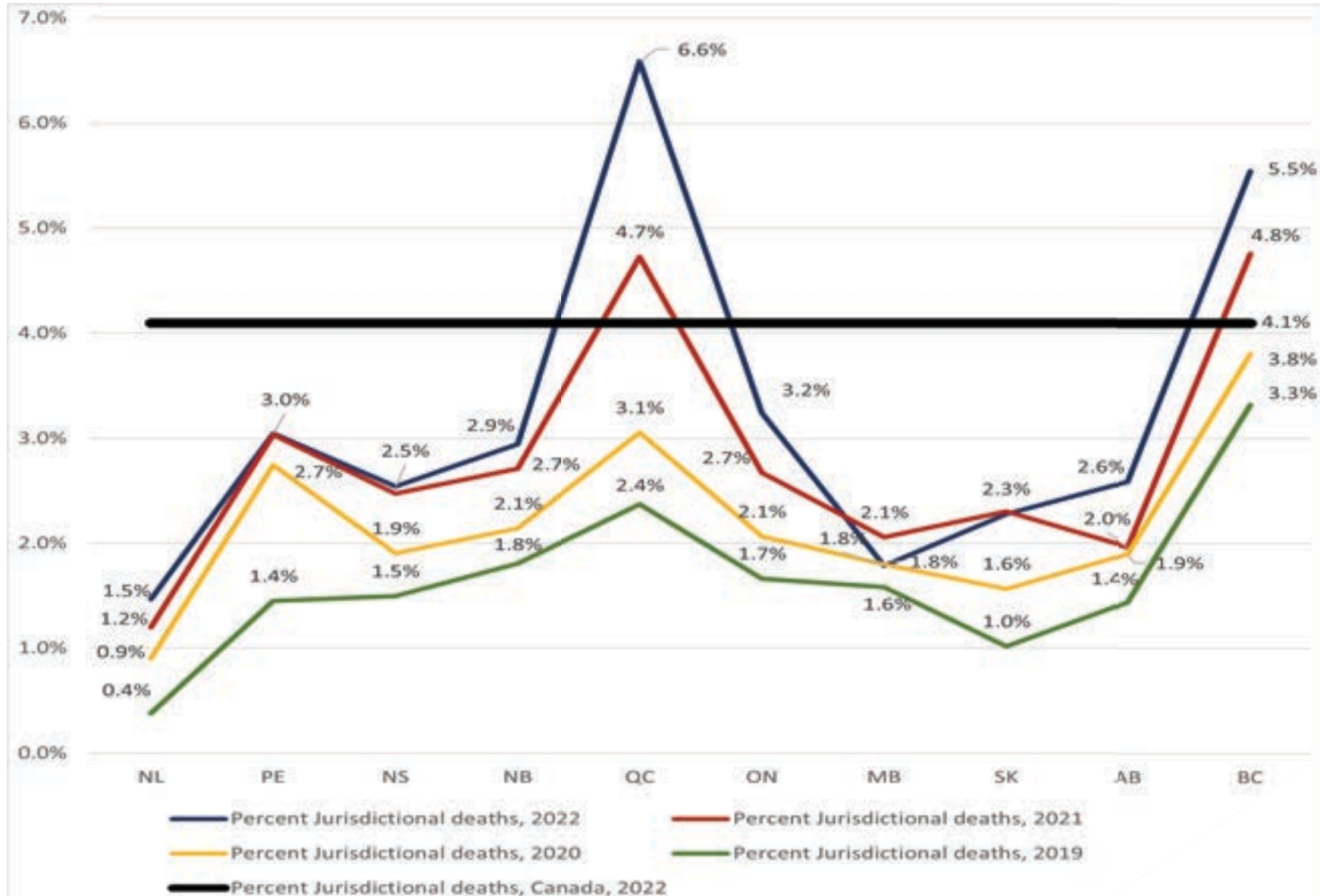
Front Lines

What trends are we seeing?

Total MAiD Deaths in Canada 2016-2022

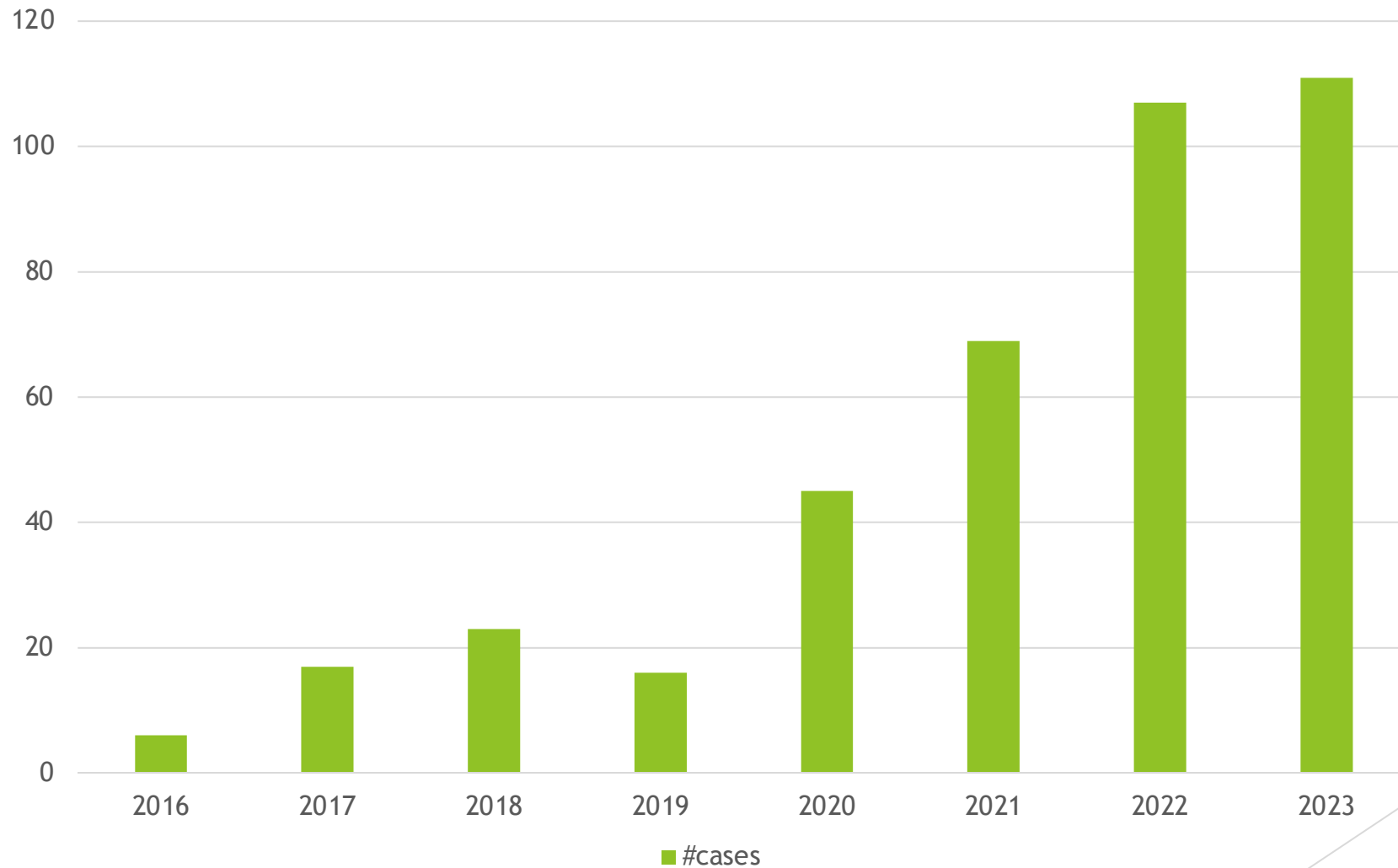


Percentage of Total Deaths Attributed to MAID by Jurisdiction, 2019 - 2022



Eastern Zones MAid cases

#cases



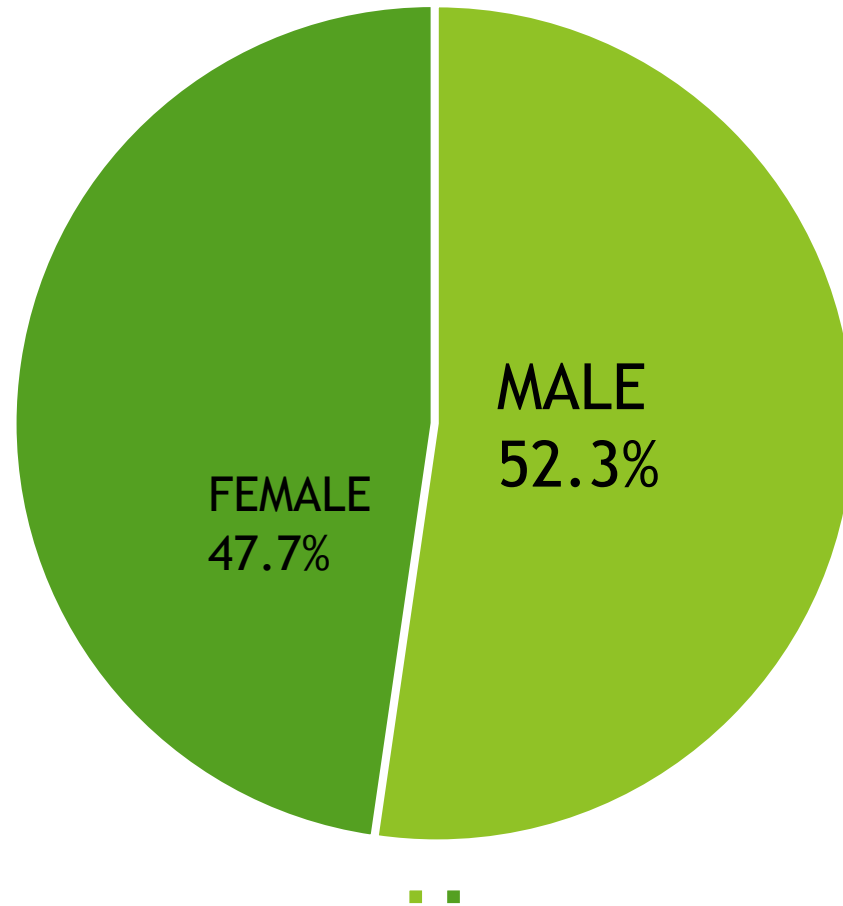
Total MAiD cases (Eastern NL) 2023

MAiD requests 2023		111
MAiD provisions		44 (40%)
Request withdrawn		3
Died naturally		28
Lost capacity(during process)		4
ineligible		2
Assessment complete	Awaiting provision	13
Assessment ongoing		9
On hold		2

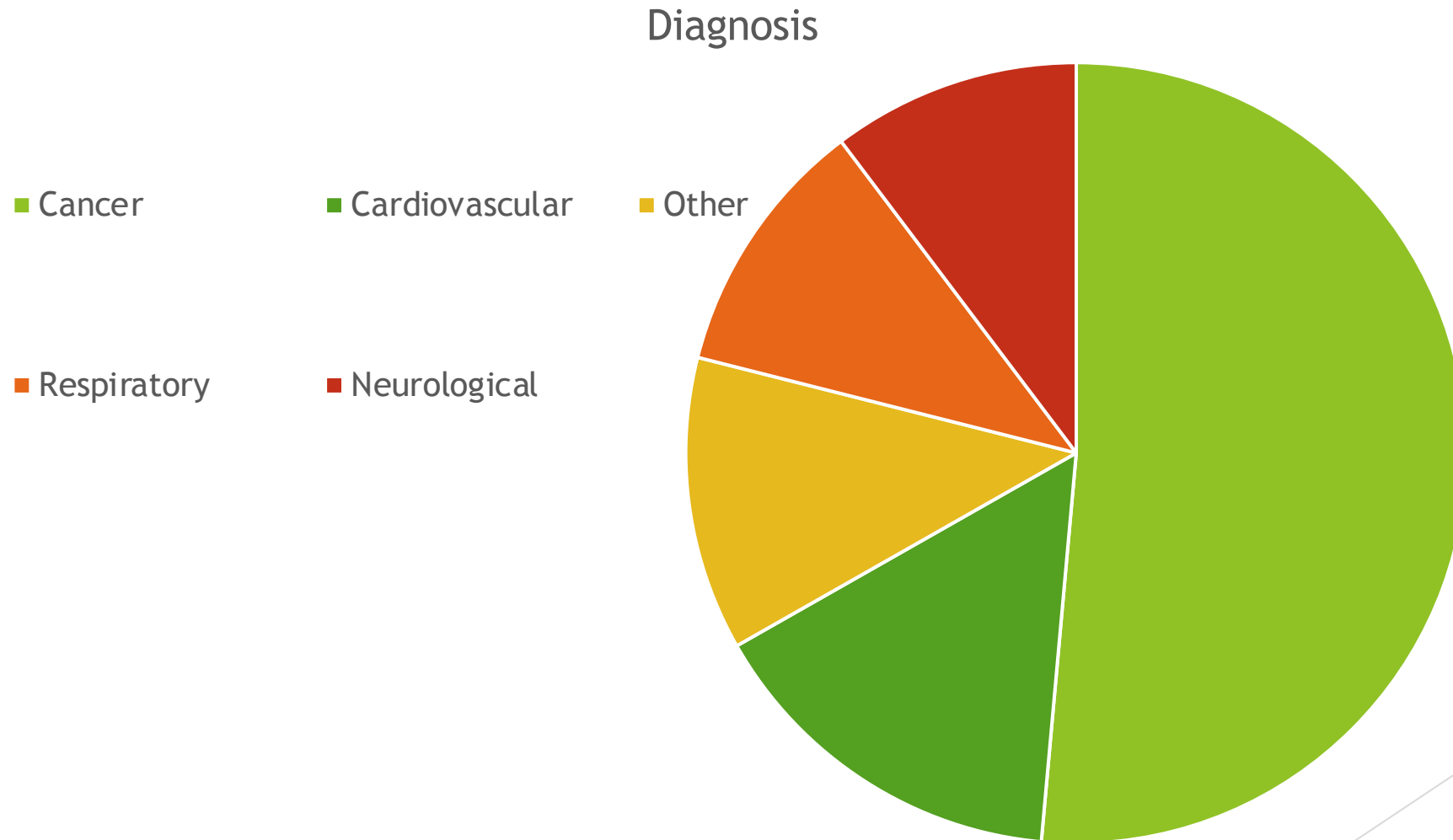
Canadian 2022 stats: Highlights...

- ▶ Average Age- 77 years- trending older
- ▶ In 2022, there were 13,241 MAID provisions reported in Canada, accounting for 4.1% of all deaths in Canada.
- ▶ The number of cases of MAID in 2022 represents a growth rate of 31.2% over 2021. All provinces continue to experience a steady year over year growth (except Yukon and Manitoba)

Gender

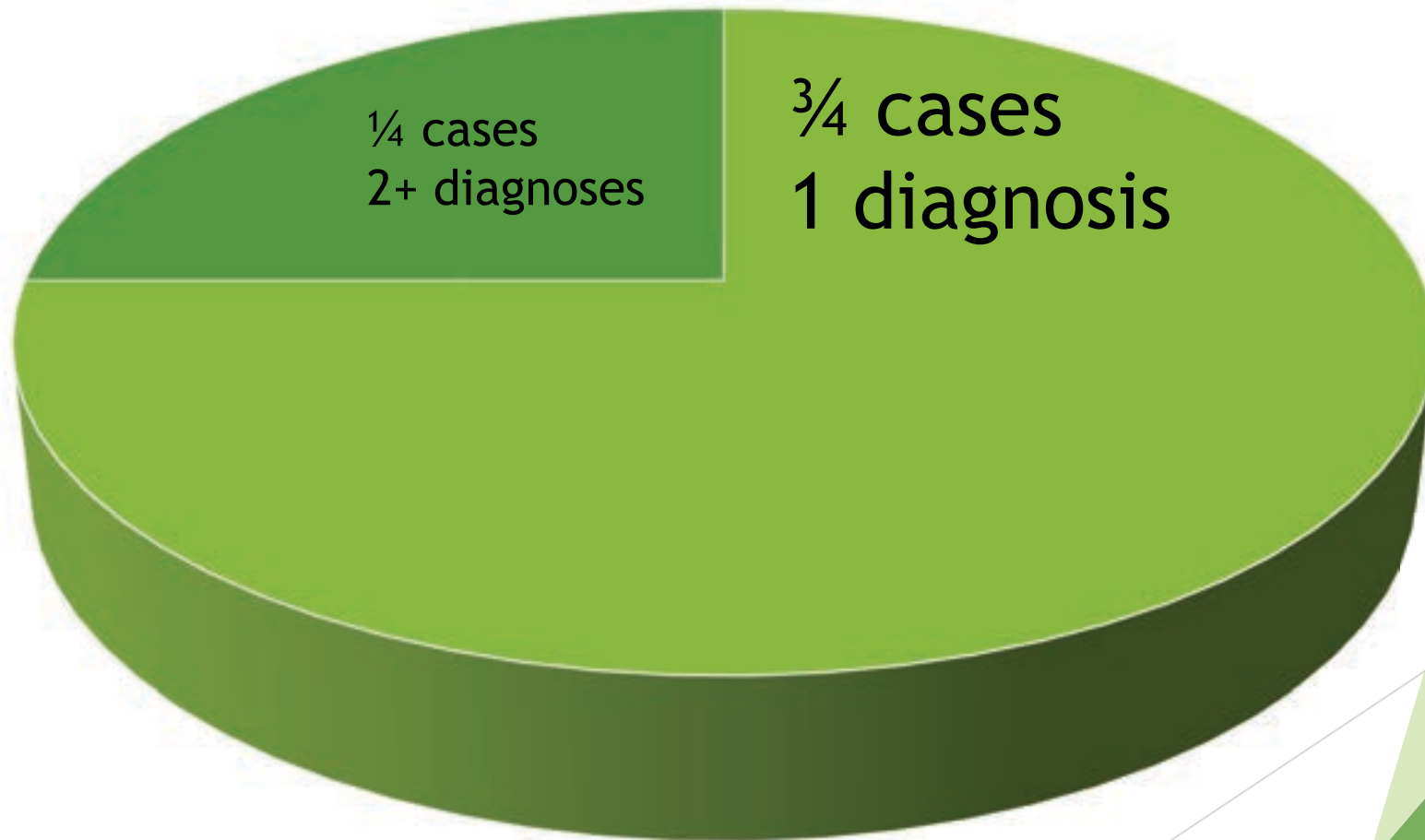


Underlying Diagnosis in MAiD provisions



of main conditions

of diagnoses



■ One condition ■ 2 or more

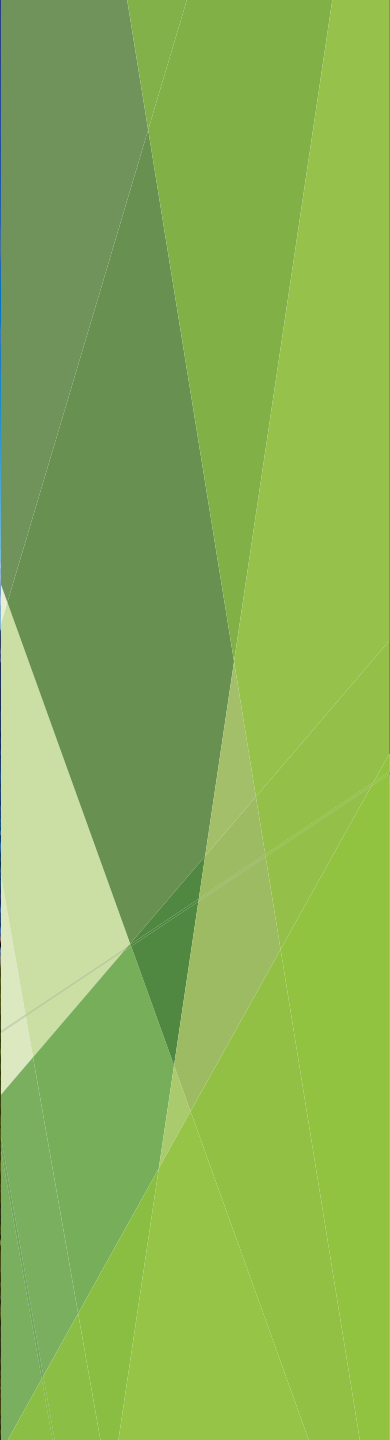
Personal Perspectives: Dr. Mari-Lynne Sinnott...

Lessons Learned...

Going Forward...

Topsail Beach







Conclusions:

- ▶ MAiD is a legal end of life choice
- ▶ It is happening in our communities
- ▶ It can happen in a public spaces with dignity, respect and compassion

- ▶ In public spaces- Preparation is key
- ▶ Tents are a good idea
- ▶ Non-peak time is better

Questions and Discussions...





Thank You!

Dr. Aaron McKim
aaron.mckim@easternhealth.ca