

Medical Assistance in Dying (MAID)

Assumptions

Person/Family

- The unit of care is the person and the family.
- The family is defined by the person.
- The person and the client are interchangeable terms.
- The person describes their own quality of life
- The person has the right to request and receive information about the MAID process.
- The person and family members have unique experiences that contribute to their decisions about MAID.
- The person and each family member have intrinsic values as autonomous and unique individuals.
- The person and family members may have varying levels of participation in their care, according to their preferences.
- The person has the right to be informed of all care options to address their suffering.
- The person has the right to be informed and make decisions about all aspects of care.
- The person receiving MAID meets legal eligibility criteria.

Environment

- All care settings must respond and provide information to all MAID inquiries and requests.
- The environment supports a collaborative approach that is respectful regardless of professional beliefs and values.
- Whenever possible, MAID is provided in the setting chosen by the person.
- MAID is provided by an interprofessional team, the members of which work collaboratively and respectfully.

Health

- Health and quality of life are a state of physical, psychosocial and spiritual well-being, as described by the person.
- Current and anticipated changes in health and quality of life may contribute to a request for information about MAID.

Nursing

- Nurses practise according to current legislation, regulatory frameworks, professional standards, and organizational guidelines and policies related to MAID.
- Nurses engage in the assessment and care planning of persons to address physical, spiritual and psychosocial suffering that has contributed to a request for information about MAID and/or a request for MAID.
- Nurses advocate for a person's right to make informed health-care decisions about MAID in the person's preferred setting of choice.
- Nurses engage in reflective practice and self-care strategies to contribute effectively to the overall functioning and well-being of the interprofessional team.
- Nurses recognize when they need to access additional professional resources for support related to any aspect of MAID.
- Nurses in all care settings must ensure access to information in all MAID inquiries, including requests for provision of MAID.

Ethics

- Nurses are self-aware of their personal beliefs and values and how these affect their responses to requests for information about MAID and requests for MAID.
- Nurses understand the concept of conscientious objection and associated professional responsibilities.

Competencies

1. Providing safe, compassionate, competent and ethical care

The nurse:

- 1.1. Identifies current legislation related to MAID.
- 1.2. Identifies the nurse's role and professional responsibilities related to MAID.
- 1.3. Understands the roles of interprofessional team members in the provision of MAID.
- 1.4. Identifies the eligibility criteria for MAID.
- 1.5. Identifies available resources to support inquiries and requests related to MAID.
- 1.6. Provides objective, accurate information on the lawful provision of MAID.
- 1.7. Engages the person in dialogue to better understand the nature and meaning of their request for MAID.
- 1.8. Collaborates with the interprofessional team to explore available treatment options, acceptable to the person, for physical, psychosocial and spiritual symptom management.
- 1.9. Documents MAID conversations and nursing care provided in a timely, factual, complete and confidential manner.
- 1.10. Provides support for the person and family during the process and the family following the death.

2. Promoting and respecting informed decision-making

The nurse:

- 2.1. Understands that nurses must not impose their own views and values about MAID on others nor use their position to influence, judge or discriminate against others whose values are different from their own.
- 2.2. Respects the wishes of persons who request information about MAID.
- 2.3. Understands that a person has the right to withdraw their request for MAID at any time.
- 2.4. Refrains from judging, labelling, demeaning, stigmatizing or humiliating persons who request MAID or interprofessional team members who participate in MAID.

3. Maintaining dignity

The nurse:

- 3.1. Respects the person's values, beliefs and decisions related to MAID even if different than the nurse's own.
- 3.2. Advocates for the person to receive MAID in their setting of choice.

4. Maintaining privacy and confidentiality

The nurse:

- 4.1. Explores with the person who can be included in discussions and decisions about MAID.
- 4.2. Respects the privacy of persons who inquire about or request MAID.
- 4.3. Protects the privacy and confidentiality of sensitive information about MAID as the cause of death.
- 4.4. Adheres to current legislation, professional regulatory standards and employer policies regarding MAID, including IT security safeguards that protect and preserve the privacy of the person.
- 4.5. Respects and protects the privacy of all individuals who are involved in the process or provide MAID.

5. Being accountable

The nurse:

- 5.1. Practises according to their code of ethics, in keeping with the laws, regulations, professional standards and guidelines for MAID in the jurisdiction where they practice.
- 5.2. Defines conscientious objection and its applicability in the context of MAID.
- 5.3. Notifies their employer of a conscientious objection to MAID.
- 5.4. Engages in reflective practice on their own personal values and beliefs regarding MAID.
- 5.5. Understands that when there is conscientious objection to MAID, care unrelated to the activities associated with MAID must continue to be provided.
- 5.6. Understands that MAID may have a personal impact that may affect their practice, and takes steps to seek support as needed.

Bibliography

Legislation: Bill C-14: <http://www.parl.ca/DocumentViewer/en/42-1/bill/C-14/royal-assent>

CNA framework: <https://www.cna-aiic.ca/-/media/cna/page-content/pdf-en/cna-national-nursing-framework-on-maid.pdf?la=en&hash=D03074039821FF4EB98753983B183A4632462B86>

Canadian Nurses Protective Society (MAID): <https://cnps.ca/MAID>

Guidelines from Professional Nursing Colleges and Associations on MAID

- Prince Edward Island: <https://www.arnpei.ca/data/Guidelines%20on%20Medical%20Assistance%20in%20Dying%202017.pdf>
- New Brunswick: <http://www.nanb.nb.ca/media/resource/NANB-MAID-FAQ-November2016-E.pdf>
- Nova Scotia: <https://crnns.ca/wp-content/uploads/2016/06/Medical-Assistance-in-Dying-Guidelines-for-Nurses.pdf>
- Newfoundland/Labrador: https://www.arnnl.ca/sites/default/files/RD_RN_and_NP_Medical_Assistance_in_Dying.pdf
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- British Columbia: https://www.crnbc.ca/Standards/RNScopePractice/MAiD/applying_standards/Pages/assessing_eligibility_provision_MAiD.aspx AND <https://www.crnbc.ca/Standards/RNScopePractice/MAiD/SLC/Pages/Default.aspx>
- Yukon: https://yukonnurses.ca/index.php?option=com_content&view=article&id=322&Itemid=296
- Quebec: <http://www.oiq.org/publications/repertoire/aide-medicale-amourir-0>

Additional resources for patients and professionals:
http://www.wrha.mb.ca/maid/other_resources.html

Compendium

- Bill C-14 stipulates that all nurses have a legal obligation to respond to questions and inquiries about MAID.
- CNA Framework
 - Nurses interact with people at all stages of life, in situations of health, illness, injury and disability, and provide care across the continuum in a myriad of health settings. This includes advocating for persons in their care, providing information, participating in decision-making, supporting them and their families, and collaborating with members of the health-care team to ensure they have the care and information they need.
 - Nurses are the health-care professionals who people talk to and question most often, as they are the most constant care providers attending to people at home or in hospital.
 - Nurses may hear from people who ask that they be allowed to die and who may be seeking advice about how they can end their suffering
 - Nurses make an important contribution to providing end-of-life care that may include providing or aiding in MAID.
- Requests for information about MAID occur across nursing specialties in any setting.
- Any nurse may be approached with a request for more information about MAID.
- Competencies define basic expectations to support all nurses in responding to inquiries and understanding processes around MAID.