Medical Assistance in Dying
Respecting the Patients Wishes
October 2018
Spectrum Health Care is Ontario's leading provider of innovative home health care services. We offer a range of client-centred health care solutions which include: nursing, personal and home support, physiotherapy, foot care and corporate wellness. Our motto at Spectrum Health Care is “Always with you”, it’s a testament to our dedication to provide clients with exceptional health services that are personalized, flexible, accountable and reliable.

Canadian owned and operated since 1977
Home Care Division

- Service 5 LHINs in the GTA
- Care for approximately 15000 patients quarterly at home and in our ambulatory clinics
- Employ: 275 Nurses
  1600 Personal Support Workers
- Branches: Toronto, Peel and York
Internal Palliative Team

- 12 R.N. and 2 R.P.N.
- Program Manager
- Home Support Supervisor
- PSW
- Client Service Coordinator
• 2017 – 700 patients
• 2018 to date 570 patients
Federal Legislation

• Changes to Criminal Code came into effect June 17, 2016
• MAID available to capable adults who have a grievous and irremediable medical condition
• Independent review initiated in December 2016 to consider:
  ➢ Minors
  ➢ Advance directives
  ➢ Mental health
Provincial Legislation

- Ontario covers the full costs of MAID drugs for all eligible patients
- Clinician Referral Service (CRS) was launched on June 6, 2016
- Public web page, non-mandatory clinician documentation tools and other resources made available

- Dec 7th 2016: Bill 84 introduced - Medical Assistance in Dying Statute Law Amendment Act, 2016 to amend:
  - The Coroners Act
  - The Excellent Care for All Act (ECFAA)
  - The Freedom of Information and Protection of Privacy Act (FIPPA)
  - The Municipal Freedom of Information and Protection of Privacy Act (MFIPPA)
  - The Vital Statistics Act (VSA)
  - The Workplace Safety and Insurance Act (WSIA)
SHC Response

• Policy developed with consultation from legal
• Education for nurses and management
• Open discussion between Ethicist and palliative team
“Conscientious collaboration” – participation and abstention – talk with your manager; remember this might be unpredictable

Be aware of your own scope of comfort and competence at all times; seek the available supports at any time – e.g. manager, ethics

Where a formal request is made or wished, notify manager and refer to MAID policy – work with colleagues who know the process – e.g. the Palliative Team
Role of the Nurse

• Support the patient and family
• Initiate IV/ Patient must sign new consent for IV insertion
• Support physician during MAID process
• Document all care/support provided
Spectrum Provides

- Supportive Management
- Acceptance and understanding of “conscientious objection”
- Debrief with nurse after MAID has been provided when necessary
- Participated in 84 cases in Toronto Branch
- Peel Branch 10 cases
- TC LHIN has a very seamless process and policy related to MAID for their patients
- Other LHINs have many variations in their process
TC LHIN Process

• Seamless Care with MAID
• Checklist developed in collaboration
• Supply form specific for MAID
Expansion of Program

- First year only palliative patients requesting MAiD
- Now patients who have chronic illnesses are requesting MAiD (these people may not have been receiving home care prior to the request)
Patient Care

Each patient is unique and manages their death, the way they want:

- Having that last cigarette or drink
- Surrounded by family or on their own
- Time to make that last phone call
- Connected via Internet to family abroad for their final goodbye
Patient Care

- Listening to what our patients say allows for their wishes to be heard
- The procedure may be planned weeks or days in advance
- Planned dates can change due to a deterioration in condition or patient choice
Nurse’s Thoughts

“The biggest concern that people have is having a painful death. Some people would say I would just like to fall asleep and not wake up. This is exactly what MAiD does”

“Clients chose how they live and get to choose how and when they die.”

“I feel privileged to be able to live in a country and have the right to make this decision.”

“What is so great is that family and the patient get to say good-bye when the person is alert and able to respond.”
“Just a note to say we cannot let another day go by without acknowledging our most deep appreciation for all you did for our dear sister, who passed away on Oct. 1st.

Words cannot express our gratitude for all the expert care, professionalism and heart that you and the palliative team provided.

In particular we also wish to thank you for your patience and guidance that you provided to our family during those most difficult moments in our sister’s journey.”  

Family Member
“Thank you so much for your help and support today - to me, but most of all to the family. Your warmth and compassion - for all of them - was so evident. I am very grateful.”  

Physician
“I just wanted to let you know I spoke to the family from the MAID event that occurred yesterday, and they had so much praise and appreciation for Yuri. The client felt so comfortable and really connected so well with Yuri- the family was just so thankful as he made such a positive and significant impact and I wanted to pass on the compliments to you.”

LHIN Care Coordinator
“you assisted my father last Monday. With everything going on I did not get the opportunity to Thank you. You showed such compassion towards my father and our family. It was a beautiful moment He was at peace. Though I miss him terribly I know this is what he wanted”  

Patient’s daughter
Thank You

Questions

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