

AHS SUMMARY of BILL C7 changes to MEDICAL ASSISTANCE IN DYING

For Full Legal details go to: <https://www.parl.ca/DocumentViewer/en/43-2/bill/C-7/royal-assent>

PATIENTS AFFECTED	LEGISLATIVE CHANGE	LEGISLATIVE CATEGORY
ALL	<p>REASONABLY FORESEEABLE NATURAL DEATH NO LONGER AN ELIGIBILITY CRITERIA</p> <ul style="list-style-type: none"> Once a patient is found eligible there are now two streams for the remainder of the MAID assessment process, including: (1) Patients whose natural death is reasonably foreseeable; and (2) Patients whose natural death is NOT reasonably foreseeable. Assessment must determine which of these two streams will apply for any individual patient 	Eligibility
	<p>MENTAL HEALTH EXPLICITLY EXCLUDED as CONDITION for ELIGIBILITY CRITERIA¹</p> <ul style="list-style-type: none"> Over the next year, an expert panel review will take place to recommend protocols, guidance, and safeguards to apply to requests for MAID by persons whose sole underlying condition is a mental illness This report is due on March 17, 2022 Mental Health Exclusion will be repealed on March 17, 2023 	Eligibility
	<p>Only ONE WITNESS is needed to sign patient request</p> <ul style="list-style-type: none"> Can now include those directly providing health care services or personal care services to the patient making a request, EXCEPT for the MAID Assessor/Provider (MD or NP) 	Safeguard
Those whose natural death IS Reasonably Foreseeable	10 DAY REFLECTION PERIOD REMOVED ²	Safeguard
	<p>FINAL CONSENT WAIVER OPTION</p> <ul style="list-style-type: none"> Strict criteria for this to apply³ A written agreement needs to be signed by the patient and providing practitioner before patient loses capacity (<i>Waiver of Final Consent</i> form) 	Safeguard
Those whose natural death IS NOT Reasonably Foreseeable	<p>At least ONE ASSESSOR must HAVE <i>EXPERTISE</i>⁴ in the CONDITION CAUSING PATIENT'S SUFFERING</p> <ul style="list-style-type: none"> If neither do, then consult a MD or NP that does have that expertise The consultant does not need to be a <i>certified specialist</i> The consultant's report must be shared with both assessors 	Safeguard
	<p>PATIENT <i>INFORMED</i> OF MEANS available to relieve their suffering, including:</p> <ul style="list-style-type: none"> Counselling, mental health/disability support services, community services, Palliative Care Depends on what's appropriate for patients condition <p>PATIENT <i>OFFERED CONSULTATIONS</i> with relevant professionals who provide above services</p> <p>PATIENT and Assessor HAD <i>DISCUSSION</i> AND gave <i>SERIOUS CONSIDERATION</i> to those relevant and available means and both agree the patient has given serious consideration to those means</p> <ul style="list-style-type: none"> Both assessors need to have done this 	Safeguard
	<p>90 day minimum assessment period</p> <ul style="list-style-type: none"> Begins on day on which first assessor begins his/her assessment⁵ Can be shortened if both assessors agree patient is at imminent risk of losing capacity to consent 	Safeguard

- Persons whose SOLE underlying medical condition is a mental illness are not eligible for MAID. If however, the mental illness exists in a person who has another medical condition that satisfies all eligibility criteria, and the mental illness is not the reason the person is seeking MAID, the person could be eligible for MAID.
- The removal of 10day reflection period DOES NOT imply an obligation to urgently provide MAID; Each case will vary how quickly it can proceed depending on multiple factors (i.e. complexity of patient, need for special consultations, availability of practitioners)
- Waiver of Final Consent Criteria are:
 - Before losing capacity to consent to receiving MAID, the patient
 - natural death is reasonably foreseeable
 - meets all of the eligibility criteria and related safeguards for MAID
 - entered into a written agreement with providing practitioner who would administer a substance to cause their death on a specified day
 - has been informed by the providing practitioner that they are at risk of losing their capacity to consent to receive MAID
 - in the written agreement they consented to receive MAID prior to the day specified in the agreement if they lost capacity to consent prior to that day
 - The Patient has lost the capacity to consent to receiving MAID
 - The Patient does not demonstrate, by words, sounds, or gestures, refusal to have the substance administered or resistance to its administration
 - The substance is administered to the person in accordance with the terms of the agreement.
- Expertise could be obtained through special training OR previous experience with patients with a similar condition. The expertise should be in the condition that is causing suffering, not just the condition that is the serious and incurable illness/disease/disability (unless this is what is causing the greatest suffering)
- The start date of the assessment will be identified in writing by the 1st assessor and shared with the CCS team. This date selected will depend on the assessor's view point of when they began their assessment (i.e. could begin with reviewing the patient's file, when meets with the patient, or any other reflection or consideration of info that forms part of MAID assessment)