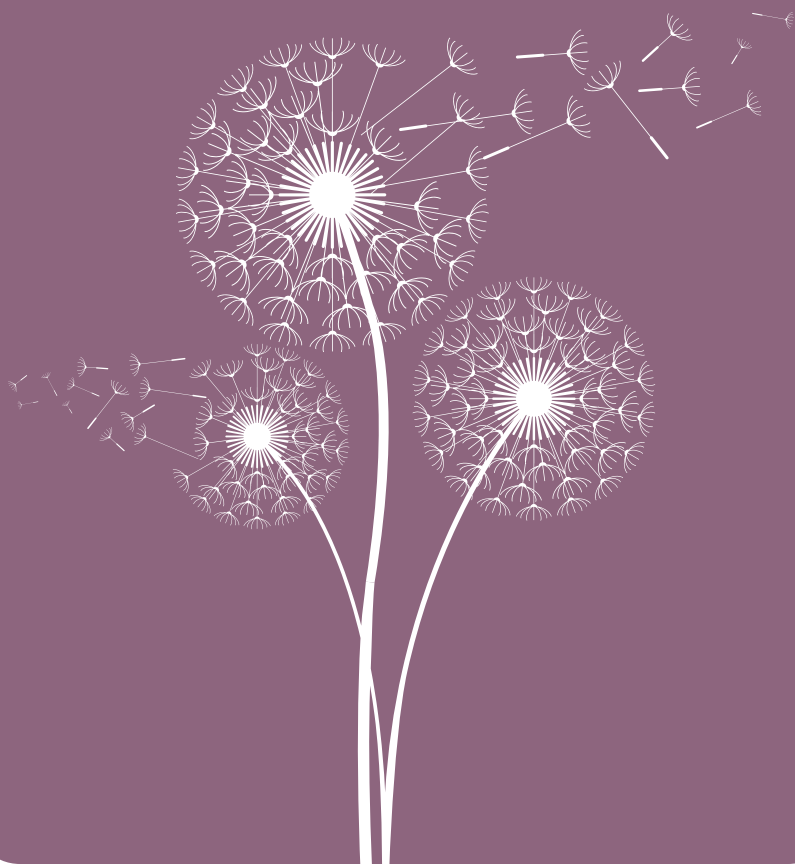




# Medical Assistance in Dying

and other end-of-life options



For more information  
[MAID.CareTeam@ahs.ca](mailto:MAID.CareTeam@ahs.ca)  
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Seniors Health &  
Continuing Care





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## SECTION 1

# Purpose of this booklet

Speaking with your family, loved ones, and healthcare team is important when thinking about your end-of-life options. You might want to talk about your end-of-life needs, wishes, and values and what options are available for you. This will help you make choices that fit into your healthcare goals and end-of-life wishes.

Alberta Health Services (AHS) respects your right to make choices about your care options which reflect your values and wishes. This includes the right to consent to, withdraw from, and decline some healthcare options.

The purpose of this booklet is to provide information on advance care planning, end-of-life options, including medical assistance in dying (or commonly known as MAID), and the phases that you would expect if you choose to have a medically assisted death. You can also find references for planning for MAID, grief and tips for having conversations with family about your end-of-life choices.

## End-of-life options

### What is advance care planning/goals of care designation?

Advance care planning helps you think about, talk about and document your future healthcare wishes. It can be used to guide your medical care if you get sick or as you approach end-of-life.

Three forms can be included in advance care planning:

### Goals of care designation (GCD) order

A GCD is a medical order that lets the healthcare team know your wishes to direct your care and guide medically indicated interventions.

### Tracking record

Your tracking record lists all of your advance care planning discussions.

### Personal directive

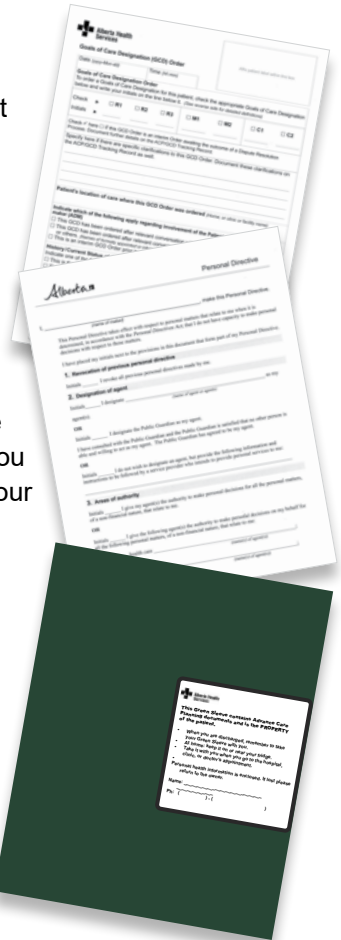
Your personal directive allows you to name someone you trust to make decisions for you if you can't speak for yourself, and make your wishes known to help direct your care.

These forms are kept in a plastic pocket called a **Green Sleeve**. You can update these forms if your wishes change.

**Currently, the law will not permit you to ask for medical assistance in dying in a personal directive or have someone ask for it on your behalf.**

**To learn more about advance care planning:**

[www.conversationsmatter.ca](http://www.conversationsmatter.ca)



## What is palliative care?

Palliative and end-of-life care is the set of programs and services that help people who are diagnosed with a progressive life-limiting illness to live their lives the best way possible. You can start palliative care at the time you are diagnosed with a life-limiting illness and continue accessing it until you die. A palliative and end-of-life care team can help you with your needs and concerns regarding end-of-life care. They can support you and your family with the physical, emotional, psychological and spiritual concerns related to the end-of-life. Palliative care may also include grief and bereavement support for your family and loved ones. You have many choices when it comes to palliative and end-of-life care. Options may include support in your home, a hospital, continuing care centre, or hospice.

Palliative and/or home care can continue during the MAID process.

### **For more information:**

Call 811 or [MyHealth.Alberta.ca/palliative-care](https://myhealth.alberta.ca/palliative-care)

## What is medical assistance in dying (MAID)?

Medical assistance in dying is a healthcare option available to Albertans at the end-of-life. It allows a capable adult suffering from a grievous and irremediable medical condition to voluntarily request medicine that will bring about their death.

There are five phases of medical assistance in dying:

- Pre-contemplation (looking at and thinking about end-of-life care options)
- Contemplation (getting information about end-of-life care options)
- Determination (assessment of eligibility and formal request for medical assistance in dying)
- Action (confirming the request and including death)
- Care after death (grief support)

You might move back and forth between the phases or choose not to proceed at any point.

### Note:

MAID is a legislated and regulated service with specific legal requirements under Canadian Law. MAID is not an urgent service and the process can take varying lengths of time depending on your circumstance. To qualify for this service, you must meet all the eligibility criteria set out by federal law.



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## The Care Coordination Service

The AHS Care Coordination Service is a single point of contact for you and your family to learn more about choices available at end-of-life. You can contact the Care Coordination Service at [MAID.CareTeam@ahs.ca](mailto:MAID.CareTeam@ahs.ca) or by calling Health Link at 811. If you and your family want to learn more about medical assistance in dying, you can also talk with your doctor or nurse practitioner. You can find helpful tips for this conversation at [ahs.ca/maid](https://ahs.ca/maid).

The Care Coordination Service will answer your questions about medical assistance in dying. The team can also give you information on other end-of-life choices. This team has access to and can connect you with other special teams who focus on palliative care, pain control and symptom management, and cancer care. AHS knows end-of-life choices are different for each person, and we will respect your decisions. You can change your mind at any time.





## SECTION 2

# Am I eligible for MAID?

The law states you must meet all of the mandatory conditions listed below to be eligible for medical assistance in dying.

1. You are at least 18 years of age and have the capacity to provide informed consent.
2. You are eligible for public health services in Canada (existing waiting periods or minimum residency requirements do not apply).
3. You have a grievous and irremediable medical condition. All of the following criteria are required:
  - you have a serious and incurable illness, disease or disability;
  - you are in an advanced state of irreversible decline in capability;
  - that illness, disease, disability or state of decline causes enduring physical or psychological suffering that:
    - is intolerable to you; and
    - cannot be relieved under conditions or with treatment that you consider acceptable;
4. Your request for medical assistance in dying is voluntary and made using the required form; and
5. You provide informed consent for medical assistance in dying after being informed of the means available to relieve your suffering.

**Note:** You must be able to give informed consent both:

1. at the time of your request AND
2. immediately before MAID is provided unless special circumstances apply (see Waiver of Final Consent below on p.13)

**Those whose sole underlying medical condition is a mental illness are NOT currently eligible for MAID.**

Seeing if you are eligible is an important first step. Your doctor, nurse practitioner, or the [Care Coordination Service](#) can give you more information about whether or not you are eligible.

You can still access palliative care and other end-of-life services while you are being assessed for eligibility.





### SECTION 3:

## Deciding to move forward

If you have explored information about medical assistance in dying and you feel it may be the right choice for you, you can move to the determination phase.

In this phase, you will:

- make the formal request for medical assistance in dying;
- have two assessments of your medical condition completed.

You'll also have the option of talking about changes to your current treatment plan to make sure any pain or other symptoms are being managed. You can change your mind about medical assistance in dying at any time.

## Formal request

If you believe you are eligible for medical assistance in dying, you can complete the [Record of Request](#) for medical assistance in dying. One witness will be required to co-sign the Record of Request form (further details regarding this are included on the form itself).

## Assessments for eligibility

Once the Record of Request for medical assistance in dying is completed, you will need to be assessed by two doctors or nurse practitioners to see whether you are eligible for medical assistance in dying. Your family doctor may complete the first assessment. If your family doctor does not take part in this service, the [Care Coordination Service](#) can arrange for a doctor or nurse practitioner to meet with you in your community and complete the required assessments.

You can include your family and loved ones in either assessment meeting. They might have questions for you and the healthcare team. If you choose not to include them, AHS will respect this decision.

## How is my eligibility determined?

The two physicians or nurse practitioners will meet with you at different times and review your medical history to determine whether you meet all the eligibility criteria and safeguards as set out in federal legislation.

As of March 17, 2021 federal legislation was changed to include two sets of safeguards. One set is for individuals whose natural death is reasonably foreseeable and one set is for individuals whose death is NOT reasonably foreseeable. Reasonably foreseeable natural death is determined on a case by case basis and takes all your unique medical circumstances into consideration.

## What happens if I am eligible and my natural death is reasonably foreseeable?

If both assessments show you are eligible and determine your natural death is reasonably foreseeable, the MAID team will notify you of your eligibility for MAID. You can decide whether to move to the action phase. Your health care providers will continue to provide care as per your wishes and preferences. You or your family or health care team may contact the MAID team if you would like to move forward with arranging MAID.

The MAID team will not contact you after informing you of your eligibility, as it is your choice if you would like to move forward with medical assistance in dying.

Note: if you are determined to be eligible for MAID AND your natural death is reasonably foreseeable you MAY also be eligible for the Final Consent Waiver IF you are at risk of losing capacity to consent

- This would waive the need to provide final consent immediately prior to receiving MAID
- There is strict criteria for this to apply
- A written agreement needs to be signed by the patient and providing practitioner before patient loses capacity (Waiver of Final Consent form)

## What happens if I am eligible and my natural death is NOT reasonably foreseeable?

If both assessments show you are eligible and determine that your natural death is NOT reasonably foreseeable, the following safeguards will also need to be in place:

- One of the two physicians and/or nurse practitioners must have expertise or consult another independent physician or nurse practitioner who has expertise in the medical condition causing your suffering;
- You must be informed of available and appropriate means to relieve your suffering, including, where appropriate, counselling services, mental health and disability support services, community services, and palliative care, and you must be offered consultations with professionals who provide those services;
- both assessors have discussed with you the reasonable and available means to relieve your suffering, and both agree that you have seriously considered those means;



- assessment period must take a minimum of 90 days, unless the assessments have been completed sooner and you are at imminent risk of losing your capacity to consent (as determined by both physicians or nurse practitioners); and
- immediately before providing MAID, the practitioner must give you an opportunity to withdraw your request and ensure you give express consent to receive MAID

## What happens if I am not eligible?

If the doctors or nurse practitioners who completed the assessments find you are not eligible, you won't move to the action phase. You will continue to be supported with any other health care services you are using or need. If you don't agree with the results of the assessment, you are free to seek another opinion.





## SECTION 4

# Planning for MAID

Planning for your death can be overwhelming. But it can help ease an emotional and stressful time for you, your family and your friends. Talking about and documenting your healthcare wishes are important, as outlined in Section One, but financial planning is just as important for those you are leaving behind, including funeral arrangements, taxes and any benefits you may be receiving.

## Canada Pension Plan Benefits

Your request for medical assistance in dying does not affect your Canada Pension Plan (CPP) death benefit. The eligibility for the CPP death benefit is based on contributions made to the CPP by the deceased contributor. If the contributory requirements are met, the benefit will be paid to the estate of the contributor.

To learn more, visit the Government of Canada website [www.canada.ca](http://www.canada.ca) and search “[Pension and Insurance Benefits Statement](#)”.

## Life Insurance Benefits

The Canadian Life and Health Insurance Association stated if a medical assistance in dying procedure follows the legislation, then the possible exclusion regarding suicide may not be applied, which means your life insurance will not be affected.

**Note:** It is recommended all policy holders contact their insurance broker to confirm this information.

As part of later life planning, there are documents that can be put in place that make it easier for family and loved ones to make decisions if the person loses the ability to make their own decisions. One of these is the Power of Attorney and the other is the personal directive.

## Power of attorney

Enduring power of attorney is an agreement between you and a person you trust that allows them to make financial decisions on your behalf, if you are no longer capable of making these decisions.

The agreement:

- is written when you're capable of making your own decisions
- states when the person you trust will have authority
- can start immediately and continue if/when you lose capacity
- can start when you lose capacity

If you lose your capacity and do not have an agreement and do not have an enduring power of attorney agreement in place, one of your friends or family members might have to go to court to become your trustee. This takes time and money.

If you have an agreement in place, you don't need a trustee. You should contact a lawyer to get this agreement. A lawyer can explain all your agreement options.

Your agreement can include:

- specific decisions
- specific dates
- specific limits
- identification of a person you trust to be your Attorney

## Personal directive

A personal directive is a legal document you make in case you cannot make your own personal decisions in the future.

A personal directive:

- is optional, voluntary and highly recommended
- names the person or people you have picked to make personal decisions for you – the person you name on the personal directive is called an agent
- ensures your written instructions are known in case something happens to you
- only comes into effect if you are found to lack capacity – that means you are not able to make your own decisions

The personal directive can include your instructions about any or all personal matters that are not financial, such as:

- medical treatments you would or would not want
- where and with whom you would like to live
- choices about other personal activities (recreation, employment, education)
- any other personal or legal decisions

Any instructions related to MAID CAN NOT be included in the personal directive as advanced directives for MAID are not permitted as per the Federal Legislation.

In addition, if a patient's personal directive has been enacted and they have lost capacity to make their own health care decisions, they would not be eligible for MAID.

## Family conversations

You may find it challenging to prepare and have conversations with loved ones about your decision to have a medically assisted death. Experience has shown that while difficult, these are very important conversations to have so that your family and others important to you understand your choice and are better able to deal with their own emotions. Everyone may have a different process. Sometimes loved ones would rather speak about their feelings with a healthcare provider. Whichever approach you and your loved ones are most comfortable with, there are resources available to assist.

## Support services

Your health team is made up of various different professionals that may be able to assist you through MAID process. These include social workers, psychologists and spiritual health practitioners. More information on these professionals is available at [Your Health Team](#).

## Grief

Depending on where in the province you live, there may be different resources available for grief support. There are also national services available. Speak with the Care Coordination Service and they can assist your family with services to support them after your death.

Below are AHS and Alberta government web page resources:

- Grief and Bereavement visit [myhealth.alberta.ca](https://myhealth.alberta.ca) and search “grief and bereavement”
- Saying Farewell Dying Process Guide visit [myhealth.alberta.ca](https://myhealth.alberta.ca) & search “saying farewell dying process guide”
- Saying Farewell/Dire adieu (French) visit [myhealth.alberta.ca](https://myhealth.alberta.ca) and search “saying farewell/dire adieu”

## Survey for family

Medical assistance in dying services are delivered through the Care Coordination Service and healthcare professionals. After a medically assisted death has taken place, your family member(s) will be asked to take part in a survey about their experience with the process. Completion of the survey is voluntary, but the information gathered will be used to identify strengths of Alberta's program and help improve processes of the program for other families.

## You are protected

The law protects you if you are thinking about medical assistance in dying. AHS supports you and the law by:

- making sure you complete a written, signed, and witnessed [Record of Request](#) form for medical assistance in dying;
- having two independent doctors or nurse practitioners agree that all of the mandatory eligibility criteria are met;
- letting you know that you can change your mind at any time;
- having a waiting period before continuing with medical assistance in dying for individuals whose natural death is not reasonably foreseeable;
- telling you that you can withdraw the formal request any time before the medicine that will cause your death is given to you. If you don't withdraw the request, you must give express consent one more time right before the medicine is given;
- having the doctor or nurse practitioner make sure that you are still able to make healthcare decisions right before the final steps of medical assistance in dying are provided.

## Respect and dignity

You can change your mind about your end-of-life choices including medical assistance in dying at any time. AHS is committed to supporting your informed healthcare decisions. This means your right to consent to, withdraw from, and decline healthcare will be respected. AHS is also committed to ensuring your dignity is maintained regardless of your choices, and providing you with our support through your journey.







## SECTION 5

# Resources

**Advance Care Planning:** [www.conversationsmatter.ca](http://www.conversationsmatter.ca)

## Alberta Health Services

### MAID Care Coordination Service

MAID website: [www.ahs.ca/maid](http://www.ahs.ca/maid)

Email: [MAID.CareTeam@ahs.ca](mailto:MAID.CareTeam@ahs.ca)

Phone: Health Link – 811

Continuing care: [www.ahs.ca/continuingcare](http://www.ahs.ca/continuingcare)

Palliative and end-of-life: [www.ahs.ca/info/Page14559.aspx](http://www.ahs.ca/info/Page14559.aspx)

## Body Donation for Scientific Research

### Department of Anatomy at the University of Alberta Anatomical Gift Program

Phone: 780-492-2203

Email: [jpapirny@ulaberta.ca](mailto:jpapirny@ulaberta.ca)

### University of Calgary Body Donation Program

Phone: 403-220-6895

Email: [anatomy@ucalgary.ca](mailto:anatomy@ucalgary.ca)

**MyHealth.Alberta:** [my.health.alberta.ca](http://my.health.alberta.ca)

## Canada Pension Plan:

[www.canada.ca/en/treasury-board-secretariat/services/pension-plan/pension-publications/guides-pension-insurance-benefits-statement/your-online-pension-insurance-benefits-statement-guide-2015.html](http://www.canada.ca/en/treasury-board-secretariat/services/pension-plan/pension-publications/guides-pension-insurance-benefits-statement/your-online-pension-insurance-benefits-statement-guide-2015.html)

## Grief Resources:

- Grief and Bereavement ([myhealth.alberta.ca/HealthTopics/Palliative-Care/Pages/Grief-and-Bereavement.aspx](https://myhealth.alberta.ca/HealthTopics/Palliative-Care/Pages/Grief-and-Bereavement.aspx))
- Saying Farewell Dying Process Guide ([seniors-housing.alberta.ca/documents/Saying-Farewell-Dying-Process-Guide.pdf](https://seniors-housing.alberta.ca/documents/Saying-Farewell-Dying-Process-Guide.pdf))
- Saying Farewell/Dire adieu (French) ([open.alberta.ca/dataset/19e52919-db75-40af-97cf-c761979d0c63/resource/73edfd56-f9cd-4440-8bb1-2632d9073c71/download/saying-farewell-fr-dire-adieu.pdf](https://open.alberta.ca/dataset/19e52919-db75-40af-97cf-c761979d0c63/resource/73edfd56-f9cd-4440-8bb1-2632d9073c71/download/saying-farewell-fr-dire-adieu.pdf))



