



Association canadienne de soins palliatifs

Canadian Hospice Palliative Care Association

Hospice Palliative Care and Medical Assistance in Dying (MAiD)

About CHPCA:

The CHPCA is the national voice for hospice palliative care in Canada. Advancing and advocating for quality of life/hospice palliative care in Canada, its work includes public policy, public education and awareness. Established in 1991, its volunteer Board of Directors is composed of hospice palliative care workers and volunteers from Canadian provinces and territories as well as members-at-large.

Preamble:

In June 2016, the Federal Government enacted Bill C-14 legalizing assisted death under certain circumstances and adopted the term ‘medical assistance in dying’. As implemented in Bill C-14 (2018) medical assistance in dying includes both euthanasia (“the administering by a physician or nurse practitioner of a substance to a person, at their request, that causes their death”) and assisted suicide (“the prescribing or providing by a physician or nurse practitioner of a substance to a person at their request, so that they may self-administer the substance and in doing so cause their own death”) (s. 241.2 -241.4 of the Criminal Code).

Position Statement:

Within the Hospice Palliative Care sector, the role that hospice palliative care plays in relation to MAiD has not been defined and is therefore unclear. This position statement is designed to clarify the role of hospice palliative care, in MAiD, within a legal framework across Canada. Adopting the World Health Organization (WHO) definition of palliative care, the CHPCA strongly advocates for universal access to high quality hospice palliative care to address the suffering experienced by patients with life-threatening illness and their families. This statement is broad-based and encompasses all service providers including volunteers and caregivers. This varies depending on where you live in Canada; consult your provincial legislation for more information.

Definition of Palliative Care

The WHO defines Palliative Care (including pediatric palliative care) as “an approach that improves the quality of life of patients and their families facing the problem associated with life-threatening illness, through the prevention and relief of suffering by means of early identification and impeccable assessment and treatment of pain and other problems, physical, psychosocial and spiritual. Palliative care:

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- Provides relief from pain and other distressing symptoms;
- Affirms life and regards dying as a normal process;
- Intends neither to hasten or postpone death;
- Integrates the psychological and spiritual aspects of patient care;
- Offers a support system to help patients live as actively as possible until death;
- Offers a support system to help the family cope during the patients illness and in their own bereavement;
- Uses a team approach to address the needs of patients and their families, including bereavement counselling, if indicated;
- Enhances quality of life and may also positively influence the course of illness;
- Begins early in the course of illness, in conjunction with other therapies that are intended to prolong life, such as chemotherapy or radiation therapy, and includes those investigations needed to better understand and manage distressing clinical complications” (WHO, 2019).

CHPCA Key Messages

1. CHPCA adopts the WHO definition of palliative care. Hospice palliative care strives to reduce suffering, not to intentionally end life; therefore CHPCA believes that no patient should choose MAiD because of lack of access to hospice palliative care.
2. Hospice palliative care must remain focused on effective symptom management and psychological, social, and spiritual interventions, while meeting individual cultural needs to help people live as well as they can until their death.
3. Patients with life threatening conditions have a right to high quality hospice palliative care regardless of their end of life choice, including MAiD.
4. Provision of MAiD is a practice separate and distinct from hospice palliative care.
5. Individuals working in hospice palliative care who do not wish to participate directly or indirectly in MAiD should have their integrity and fundamental freedoms, including freedom of conscience, protected.

References

- Bill C-14, An Act to amend the Criminal Code and to make related amendments to other Acts (medical assistance in dying), s.241.2=241.4 (2018). Retrieved from <https://lop.parl.ca/staticfiles/PublicWebsite/Home/ResearchPublications/LegislativeSummaries/PDF/42-1/c14-e.pdf>
- Canadian Hospice Palliative Care Association. A Model to Guide Hospice Palliative Care. Ottawa, ON: Canadian Hospice Palliative Care Association, 2013.
- World Health Organization (WHO). *WHO Definition of Palliative Care*, 2019, www.who.int/cancer/palliative/definition/en/.