

An Equitable Access Scan of Medical Assistance in Dying Across Canada

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DRAFT - DRAFT

INTRODUCTION

Medical Assistance in Dying (MAiD) was introduced into Canadian Federal Law on June 16, 2016. MAiD refers to a procedure where eligible Canadians can request to intentionally and safely end their life due to a grievous and irremediable medical condition (The Ottawa Hospital; Health Canada a). On October 5, 2020, the Canadian Criminal Code was amended by introducing Bill C-7 which stated the changes to the Criminal Code to legalize MAiD. This paper establishes the need for a greater national policy review to ensure equitable access to MAiD regardless of where the individual resides and language(s) they speak.

Preliminary research for this study was conducted to determine demographic characteristics of individuals accessing MAiD. Specifically, information regarding ethnicity, race, socioeconomic status, primary language spoken and literacy levels. This demographic data was sought out to determine if their skillset is combatable with the written and communication standards set out in the MAiD guidelines. The demographic information of interest to this study was not located, it is unclear whether demographic information is collected, is unavailable to the public, or whether other confidentiality policies are set in place to keep this information secure. Alternatively, underlying medical conditions of those receiving MAiD, gender, average age and age range are stated within The First Annual Report on Medical Assistance in Dying in Canada (Health Canada b). The report identified cancer as the most common underlying medical condition for those receiving MAiD, with other underlying medical conditions being respiratory, neurological, cardiovascular, and other conditions, or multiple comorbidities (Health Canada b). The average age of the patients across Canada who received MAiD was 75.2 with ages ranging from 18 to 91+ years (Health Canada b). Finally, males represented 50.9% of the patient population receiving MAiD and females represented 49.1% (Health Canada b).

The World Health Organization (WHO) defines health equity as “the absence of unfair and avoidable or remediable differences in health among population groups defined socially, economically, demographically or geographically”. To uphold the WHO’s definition of health equity language barriers must be reduced as it is an unfair and avoidable circumstance that only impacts certain demographics. Achieving health equity includes ensuring health information is available and accessible to all, including accessibility by language (Applebaum and Robbins). Provinces and territories, as well as regulatory bodies, should be actively implementing measures to ensure that health information is accessible in a variety of languages to meet the needs of the patients in their jurisdiction, this ensures health equity for all Canadians.

At the time of these assessments, five years have passed since legislation to decriminalize MAiD has come in place, therefore, actions or steps to reduce language and literacy inequities should be addressed to ensure that this new area of care is accessible to all Canadians, regardless of where they live or which language they speak. In order to ensure health equity is being upheld in Canada concerning MAiD and language barriers, first, an assessment of provincial and territorial MAiD specific webpages will be evaluated to determine accessibility. Second, every province and territory will be asked if it is possible to translate a MAiD specific information sheet into Tagalog as it is a top ten language in every province and territory with exception of Québec.

BACKGROUND

The Provincial-Territorial Expert Advisory Group (2015) on Physician-Assisted Dying issued a report in which they called for a “harmonized system across the country” and identified 43 recommendations on the need to “provide public education about physician-assisted dying”.

This report outlined the rationale for the foundation of this assessment, as it identified that Canadians require more equitable access to information regarding MAiD (Provincial Territorial Expert Advisory Group [PTEAG]). The federal, provincial and territorial governments as well as the health professional regulatory bodies needed better communication with the public (PTEAG).

As of March 17, 2021, the MAiD legislation has been revised. The revised legislation has kept the original eligibility criteria for MAiD, however the clause of ‘reasonably foreseeable death’ has been removed with new revisions in place to protect Canadians who do not have reasonably foreseeable death but have unbearable suffering and wish to access MAiD. The revisions also include the requirement of only one witness compared to two, which was originally required, and advanced consent for MAiD is now accepted. At this time those with mental illness wishing to access MAiD will have to wait for March 17, 2023, as the federal government needs more time to create and implement new safeguards to protect them (Department of Justice Government of Canada, [DOJGOC]). The new revisions address medical inequities Canadians faced while accessing MAiD, however, they do not address inequities that arise from language, communication and literacy barriers experienced by many Canadians for whom English or French is not a first language (DOJGOC).

The following recommendations are from the Provincial-Territorial Expert Advisory Group on Physician-Assisted Dying, published on November 30, 2015. These recommendations, in part, form the basis of the methodology of this study (Provincial-Territorial Expert Advisory Group on Physician-Assisted Dying).

Recommendation 1: Provinces and territories, preferably in collaboration with the federal government, should develop and implement a pan-Canadian strategy for palliative and end-of-life care, including physician-assisted dying. (PTEAG 5).

Recommendation 2: Provinces and territories should collaborate and coordinate with all relevant organizations and institutions as soon as possible to ensure the smooth and timely implementation of physician-assisted dying in Canada (PTEAG 5).

Recommendation 39: Provincial and territorial governments should establish a Review Committee system to review all cases of physician-assisted dying after the provision of the service to ensure compliance with relevant federal/provincial/territorial legislation and health professional regulatory standards, transparency and accountability (PTEAG 10).

Recommendation 8 stipulates that all Canadians should have equal accessibility to MAiD services regardless of which province or territory they reside in.

Recommendation 8: Provinces and territories should request that the federal government amend the Criminal Code to allow the provision of physician-assisted dying by a regulated health care professional (registered nurse or, if applicable, physician assistant) acting under the direction of a physician, or a nurse practitioner. Provinces and territories should in turn ensure that no regulatory barriers exist that would prevent these health care professionals from providing physician-assisted dying. (PTEAG 6)

The report also identified three levels of governing bodies critical to the regulation of MAiD;

We believe that there are three critical actors in the regulatory system for physician-assisted dying: the federal government, the provincial/territorial governments, and the health professional regulatory bodies (PTEAG 18).

These recommendations frame support for analyzing the regulatory bodies for each of the provinces and territories in the scan. The health professional regulatory bodies mentioned by the federal government are physicians, nurse practitioners, and pharmacists (Health Canada a). The pharmaceutical regulatory bodies have been replaced by the social worker regulatory bodies in this study as social workers are responsible for aiding families and individuals when they are facing a difficult situation such as unbearable health conditions.

Recommendation 43: Provinces and territories should provide public education about physician-assisted dying and apply best practices for public engagement to inform the continued development of end-of-life care laws, policies, and practices (PTEAG 11).

This recommendation illustrates the need to apply best practices for the public which would include health equity which incorporates language accessibility for all. Therefore, increasing practices around language translation and interpretation would be the best practice for the public and provinces and territories should ensure that such practices are implemented.

The report also stated,

Some stakeholders raised the possibility that cultural factors may affect access to physician-assisted dying in some settings and fear of social stigma in small communities may dissuade health care professionals from participating in the procedure. Other impediments to access may include language barriers, concerns about professional liability insurance or life insurance policies, and the costs of physician-assisted dying services (PTEAG 23).

Since some patients may not feel comfortable talking to their family or a healthcare provider about MAiD right away, the provincial and territorial websites can be a starting point for this information. As such, it is important to determine how freely and effectively the information regarding MAiD is made available.

Recommendation 15: Provinces and territories should create a patient information form that gathers demographic data on those requesting physician-assisted dying and the reasons for the request (PTEAG 7).

Following the quote above and recommendation 15, it is important to capture demographic data as it outlines any potential barriers faced by subpopulation groups. As language and literacy barriers often leave minority populations vulnerable, it is imperative that language accessibility is addressed when patients are requesting or accessing MAiD. This is of particular importance as seeking MAiD as a treatment option, like any other, requires great consideration. Additionally, MAiD requires the patient's consent and a written request which is most often done by filling out a form. The following assessment intends to identify whether disparities exist for Canadians whose first language is not English, or French.

METHODOLOGY

The objective of this research is to identify factors of language accessibility for non-English or French speakers or readers for accessing information on MAiD services within the province and territories across Canada. The following methods were developed and based on the recommendations introduced above as written in the Provincial-Territorial Expert Advisory Group's 2015 report and thereby we will assess the implementation of these recommendations by the provincial and territorial governments as well as the regulatory bodies. This methodology

was intentionally left broad to mitigate any differences as each province and territory is different and has developed healthcare practices and systems that best suit their needs and resources.

1. *Assessment of the provinces and territories.* For each province and territory, the search for the following information will start at Health Canada webpage called, *Provincial and territorial contact information for end-of-life care services*, (<https://www.canada.ca/en/health-canada/services/provincial-territorial-contact-information-links-end-life-care.html>). Each province and territory will be assessed by the following questions:
 - i. Is the experience of navigating information from the Health Canada page the same for each province?
 - a. How many clicks from the federal website did it take to get to the Provincial or Territorial information webpage on MAiD? A click is defined by how many times the mouse or trackpad is pushed to select an item.
 - b. Is the use of a search function required to find MAiD information? If the search function was used, then clicks will not be counted.
 - ii. After navigating from Health Canada's webpage to the provinces and territories webpages using the links provided by Health Canada, a screenshot will be taken of the first page that appears once the link has been clicked. This is to illustrate how accessible MAiD information was, if the federal webpage directly linked MAiD specific information of that province or territory, then the first screenshotted page would illustrate that which would result in greater accessibility. If the first page was a link to the home page of the province's or territorial's website, then this would illustrate that it was less

accessible than those provinces and territories that were directly linked on the federal site.

See Appendix A for the screenshots.

- iii. Is there mention of what a patient can do in the event that they are not able to communicate with the healthcare provider thus requiring interpretation or translation services?
- iv. Is contact information to the province or territory or regulatory body present on the MAiD information page?
- v. Does the webpage provide information about how a patient can request MAiD?
 - a. To what extent does the page provide MAiD information, including but not limited to information on required forms, written requests, witnesses, and is there any mention of what to do when language or other communication, or literacy barriers arise when the patient is attempting to fill out any forms or write requests?
- vi. What types of medical professionals are named in regard to MAiD?
- vii. What is the word count of the page dedicated to MAiD?
- viii. Is there mention of eligibility criteria for MAiD?

The webpages of the physicians', nurses' and social workers' regulatory bodies will be also assessed following the criteria laid out above (steps 1, 3-6, and 8). The screenshot of the first page and word count will not be addressed when looking at the pages of regulatory bodies as the regulatory bodies' webpages are intended for regulated health professionals rather than the public therefore this would be seen as a secondary point of information. Links to the physicians' and nurses' colleges will be found through the links that are posted on the federal government's

webpage. Links to the social worker's colleges will be found by using the Google search engine for the following terms the Provinces' name and "social workers college".

If the search function was used on any provincial or territorial or regulatory body's webpage the first term search will be "MAiD" and if there are no results, then "Medical Assistance in Dying" will be searched. These terms will be used as they are the ones listed on the federal government's website.

This assessment was conducted from February 21st, 2021 to March 16th, 2021, therefore federal, provincial, territorial, and webpages of the regulatory bodies could have been updated after this date. This assessment does not reflect those updates.

2. *Email Assessment.* An email assessment was conducted to determine if provinces and territories were able to state if they could provide a translated document in Tagalog if a patient was to request it. This assessment intended to the speed of response one would receive and determine if the provinces and territories had the ability to provide translated documents for patients who are not fluent in English or French. It is to be noted that there is a limitation to this scan as it was completed in February of 2021 during the novel Coronavirus pandemic. Many provinces and territories were in lockdown during this time which could have potentially delayed the response time from usual or expected durations. To determine the email address to write to the provincial and territorial MAiD webpages were used to determine if there was a MAiD specific email listed. If there was not a MAiD specific email listed on their webpage then the generic provincial and territorial email was used, which was found in the header or the footers of the webpage. In the event that a general email was not listed, then an online inquiry submission field was used.

The emails were sent out Thursday, February 25, 2021. All provinces and territories received the same email request. See appendix B for the email addressed used.

The following is the email template sent to the provinces and territories aside from New Brunswick:

Subject line: MAiD Information Request

Hi There,

I am hoping to find information about Medical Assistance in Dying in Tagalog. Either an FAQ for patients and families or the information that is on this webpage [*link to the respective provincial or territorial website that states information about MAiD*]. Is this something that you can make available in Tagalog?

If not, do you have any suggestions for who can assist me in translating this page?

Thank you for your time and help.

The following email was sent to New Brunswick due to character limitations of the online submission page:

I am hoping to find information about Medical Assistance in Dying in Tagalog. Either an FAQ for patients and families or the information that is on this webpage [*link to the provincial or territorial website that states information about MAiD*].

The provinces and territories' emails will be assessed by the following criteria.

- Do they send out automated confirmation emails?
- Length of time it took for a response
 - This will be measured by two factors:
 - The initial length of time taken to respond (not including automated responses)
 - The length of time taken to for the province or territory to state that they are able to produce the translated documents or provide referrals
- Identification that the province or territory can produce materials regarding MAiD to the selected language to support the needs of patients, including but not limited to providing

a formal request process for translation, or stating a timeline in which the patient should expect the translated documents.

- Ability to provide suggestions as to where to get translation help (information to another department, or information about local community centers or agencies that could aid in translation).

Successful communication criteria between the provinces and territories with a patient would include an automated response email stating that the request has gone through with an approximate timeline of when the patient can expect a response. A fast response rate would include an initial response email sent within 5 business days, however, since this assessment was done during a global pandemic, 10 business days is also considered acceptable. The last component of successful communication and interaction would include the province and territory stating that they could provide the translated documents.

RESULTS

British Columbia. It took two clicks from the federal webpage to land on British Columbia's (BC) provincial page with MAiD information. The webpage did not indicate steps to take for patients that require language interpretation or translation (Ministry of Health). The provincial webpage listed links to different health authorities, the webpage stated that these health authorities are equipped to help patients find a doctor or nurse practitioners to discuss the MAiD process (Ministry of Health). The webpage provides some information on the items or tasks related to receiving MAiD services as it stated patients need to fill out a form in order to request MAiD and has a link to the form itself (Ministry of Health). The webpage also lists that witnesses are needed in order to request MAiD and eligibility criteria were listed on the webpage

(Ministry of Health). The medical professionals named are physicians, nurse practitioners, pharmacists, and the webpage has a word count of 1975 words (Ministry of Health).

Service BC was contacted and a request for MAiD information in Tagalog was made. Service BC did not have an automated response that confirmed they received the request; however, their final response was sent on February 26th, 2021, one day later. Service BC replied “I recommend contacting your Health Authority to see if they have a translation service available or if they can send you information in Tagalog” the email also included a link that had the contact information of the Regional Health Authorities however, provided website link, once opened, stated, “The page you are looking for cannot be found. The page you’re looking for might have been removed, moved, or is temporarily unavailable”.

The regulatory bodies in British Columbia consist of the College of Physicians and Surgeons of British Columbia, the British Columbia College of Nurses and Midwives and the British Columbia College of Social Workers’. The link to the home page of the College of Physicians and Surgeons of British Columbia was provided on the federal webpage and the search function was used to find MAiD specific information. Search results for “MAiD” generated several links however, the webpage created in April 2020 called “MAiD practice standard temporarily amended” was used in this research as it was the latest page (College of Physicians and Surgeons of British Columbia [CPSBC]). This page listed BC’s updated response and safety measures that physicians should take when assessing and delivering care to MAiD patients during the novel Coronavirus pandemic such as using telemedicine to assess patients (CPSBC). The webpage did not indicate steps to take for patients that require language interpretation or translation (CPSBC). There was no contact information or procedural information provided for patients who wish to seek MAiD, however, the page did mention that

due to the pandemic there was no need for a witness when conducting a telemedicine assessment. The medical professionals named were: physician, nurse practitioner, licensed practical nurse, registered nurse, registered psychiatric nurse and pharmacist (CPSBC).

The link to the home page of the British Columbia College of Nurses and Midwives was found on the federal webpage and the search function was used to find MAiD specific information. The webpage labelled *Medical Assistance in Dying* was selected and it did not indicate steps to take for patients that require language interpretation or translation (British Columbia College of Nurses and Midwives [BCCNM]). There was no contact information or procedural information provided for patients who wish to seek MAiD (BCCNM). The medical professionals named were registered nurses, nurse practitioners and medical practitioners (BCCNM).

Finally, the social workers college was found by conducting a Google search and the term “MAiD” was searched. The webpage did not indicate steps to take for patients that require language interpretation or translation (British Columbia College of Social Workers [BCCSW]). There was no contact information or procedural information provided for patients who wish to seek MAiD (BCCSW). The medical professionals named were physicians, registered nurses and nurse practitioners (BCCSW).

Alberta. Two clicks were needed to get from the federal webpage to Alberta’s provincial webpage discussing MAiD. The webpage did not indicate steps to take for patients that require language interpretation or translation (Alberta Health Services [AHS]). The webpage did list an email for MAiD specific inquiries and questions (AHS). The webpage did not provide information about the requirement of forms, witnesses, and it did not list the medical professionals involved in the MAiD process (AHS). The webpage did not list eligibility criteria

that patients need to meet to access MAiD (AHS). The word count for this webpage was 82 words (AHS).

The Care Coordination Service was contacted in Alberta, and they sent a same day automated response stating that they received the request. The automated email stated, “If you are making a request for medical assistance in dying, the Care Coordination Service will attempt to respond to you within 2 – 5 business days”, all other requests will be forwarded to experts who attempt to respond in 5 business days. At the time of writing this report approximately five months after the initial request, a final response has not been received.

The regulatory bodies in Alberta consist of the College of Physicians and Surgeons of Alberta, the College and Association of Registered Nurses of Alberta and the Alberta College of Social Workers. The federal website did have a link to a webpage on the College of Physicians and Surgeons of Alberta’s that was called “Standard of Practice: Medical Assistance in Dying” under the physician’s section (College of Physicians and Surgeons of Alberta [CPSA]). The webpage did not indicate steps to take for patients that require language interpretation or translation (CPSA). There was no contact information or procedural information provided for patients who wish to seek MAiD and no medical professionals named, rather the webpage used the term “regulated member” regarding the MAiD process (CPSA). The link to the home page of the College and Association of Registered Nurses of Alberta was found on the federal government’s webpage and the search function was used to find MAiD specific data. The webpage did not indicate steps patients could take if they require language interpretation or translation (College and Association of Registered Nurses of Alberta [CARNA]). The webpage did provide an email for questions; however, it did not provide information on the items or tasks

related to receiving MAiD services (CARNA). The medical professionals named were registered nurses and nurse practitioners and there was also no mention of eligibility criteria (CARNA).

The link to the home page of the Alberta College of Social Workers' website was found via Google search, and the term "MAiD" was searched on the college's website however, it did not provide specific MAiD information from the College, rather it brought up a generic Google search.

Saskatchewan. Saskatchewan's provincial website was directly linked on the Federal Government's website making it only two clicks away. The webpage did not indicate steps to take for patients that require language interpretation or translation (Saskatchewan health authority [SHA]). A toll-free phone number was listed in case anyone had questions regarding MAiD (SHA). There is a section on the website called "How to request Medical Assistance in Dying" which outlines steps patients can take which mentioned that a patient must provide written consent, however, there was no mention of the requirement of witnesses (SHA). The medical professionals named were physicians and nurse practitioners and there is also a section that lists the criteria needed to access MAiD (SHA). The webpage had a word count of 518 words (SHA).

The online contact form on Saskatchewan's Healthy Authority website was filled out and there was no automated response or final response from the province. At the time of writing this report approximately five months after the initial request, a response has not been received.

The link to the home page of the College of Physicians and Surgeons of Saskatchewan's website was listed on the federal website. The term "MAiD" was searched to find MAiD specific data. Many results were produced, the first two results were PDFs that stated upcoming changes to MAiD, and these documents appear to be catered towards physicians. The following two

results were webpages stating procedures to follow when the patient's death was and was not reasonably foreseeable. However, the webpages did not appear to be aimed towards patients wishing to access MAiD information, rather it was information for doctors. When navigating this regulatory bodies' website, a section called "Overcoming Language and Cultural Barriers" was found. There is a subsection labelled "What if the patient does not speak English?" and "Help your doctor understand how you express yourself", this section directs answers part iii of the provincial and territorial assessment (College of Physicians and Surgeons of Saskatchewan [CPSS]). It outlines what steps patients can take if they require interpretation or translation help (CPSS).

The link to the home page of the nurses' association was found on the federal website and the social workers association website link was found by conducting a Google search. Both the Saskatchewan Registered Nurses Association and the Saskatchewan Association of Social Workers do not provide any MAiD information.

Manitoba. Manitoba's provincial website regarding MAiD was found via a direct link on the Federal Government's website, this process took two clicks. The webpage did not indicate steps to take for patients that require language interpretation or translation (Province of Manitoba [PM]). The website did have a section called "How do I Access MAiD" which informed the reader to talk to their healthcare professionals, there is also a phone number and email listed which connects the patient to the provincial service team (PM). The webpage states that patients need to request MAiD but does not provide information on the items or tasks related to receiving MAiD services such as the forms needed, or witnesses (PM). There were no medical

professionals named, the webpage only used the term “health care provider” however, the webpage did state eligibility criteria (PM). The webpage had a word count of 584 words (PM).

The MAiD specific email that was presented on the federal website was used in order to contact the province of Manitoba. The province did not send out an automated response, however, a final response was emailed on March 1st, 2021, approximately two business days later than the original request. The province stated the following, “We received your request for MAiD information and FAQ in Tagalog. Sorry for the delayed response. I reached out to my team regarding your request and it appears that at the moment we do not have any material in Tagalog. I am awaiting response from my manager regarding making something like this available, however at the moment, if there is a patient wishing to have some information on the subject, I believe the best we can do is go through interpreter services”.

The link to the home page of the College of Physicians and Surgeons of Manitoba and College of Registered Nurses of Manitoba was found on the federal website, however, to find MAiD specific criteria the search function was needed. The term “MAiD” was searched on both websites. The college of physicians stated that no results were found. However, the college of nurses’ webpage with MAiD specific content was found. The nurses’ college’s webpage did not indicate steps to take for patients that require language interpretation or translation (College of Registered Nurses of Manitoba [CRNM]). There was a phone number and email listed for MAiD specific questions, however, there was no mention of how to request MAiD, forms required, or information around witnesses (CRNM). The health professionals named were physicians and nurse practitioners (CRNM). Finally, the link to the home page of the Manitoba College of Social Workers was found via Google search, however, the website did not have a search function.

Ontario. Ontario's MAiD specific website link was found through the Federal website, this process took two clicks. This webpage did state that an interpreter can be brought in for patients that require language interpretation or translation (Service Ontario). Ontario's webpage listed a phone number that could be called to find more information on MAiD or to help the patient connect with a doctor or nurse practitioner to access MAiD (Service Ontario). The webpage provided some information on the items or tasks related to receiving MAiD such as the need for a written request for MAiD but does not mention the need for witnesses (Service Ontario). Doctors and nurse practitioners were the medical professionals named and the webpage did state the eligibility criteria needed in order to access MAiD (Service Ontario). This webpage had a word count of 590 words (Service Ontario).

The online form under the "Contact Us" section on the Ontario Government's website was used to contact Service Ontario. Ontario did send out an automated email the same day the original request was sent. The automated email stated that a reply should be sent out within 15 business days. The final response was emailed on March 8th, 2021, approximately 7 business days after the original request. The email stated the following, "The webpage you have referenced in your email is only available in English and French. We did find the following FAQs in the College of Physicians and Surgeons of Ontario (CPSO) website". However, the documents mentioned were in English and the email stated to make a request to the College of Physicians and Surgeons of Ontario to translate their documents. Contact information to the College of Physicians and Surgeons of Ontario was provided.

The link to the home page of the College of Physicians and Surgeons of Ontario was found on the federal website, the term "MAiD" was searched to find MAiD specific information. The webpage did not indicate steps to take for patients that require language interpretation or

translation (College of Physicians and Surgeons of Ontario [CPSO]). The webpage did not have any contact links for patients wishing to seek MAiD (CPSO). The webpage provides some information on the items or tasks related to receiving MAiD services such as the need for a written request and states the need for witnesses (CPSO). The medical professionals named were physicians, nurse practitioners, medical practitioners, pharmacists and pharmacist technicians (CPSO).

The link to the home page of the College of Nurses Ontario was found on the federal website, the term “MAiD” was searched on the website to find MAiD specific information. The webpage did not indicate steps to take for patients that require language interpretation or translation (College of Nurses Ontario [CNO]. The webpage did not have any contact information to start the MAiD process (CNO). The webpage provides some information on the items or tasks related to receiving MAiD services such as the need for forms that patients can use to request forms, however, the webpage made no mention of the need for witnesses (CNO). Physicians and nurse practitioners were named as the medical professionals (CNO). Finally, the link to the home page of the Ontario College of Social Workers and Social Service Workers was found by conducting a Google search and the term “MAiD” was searched on the webpage to find MAiD specific content. The webpage did not indicate steps to take for patients that require language interpretation or translation (Ontario College of Social Workers and Social Service Workers [OCSWSSW]). There was no contact information on the page that patients could use to ask questions or receive MAiD, and there was no mention of how to make a request, forms, or witnesses (OCSWSSW). Doctors and nurse practitioners were the medical professionals named in regard to MAiD (OCSWSSW).

Québec. The federal website provided a link to the provincial website; however, the link was to a page called “Family and support for individuals”, there was no MAiD information on that webpage (Gouvernement du Québec). The search function was used to find MAiD specific data. The term “MAiD” was searched, and no search results appeared (Gouvernement du Québec). When “Medical Assistance in Dying” was searched, a new term appeared, the new term was “Medical Aid in Dying” (Gouvernement du Québec). The webpage did not indicate steps to take for patients that require language interpretation or translation (Gouvernement du Québec). The webpage page did not have any contact information that could be used to help request MAiD (Gouvernement du Québec). The webpage provides some information on the items or tasks related to receiving MAiD services such as the need for forms and witnesses (Gouvernement du Québec). The medical professionals named were doctors, along with the term ‘health professional’ and eligibility criteria were listed on the webpage (Gouvernement du Québec). The webpage had a word count of 1402 words (Gouvernement du Québec).

The online inquiries submission on the Government of Québec’s website was used to request MAiD information in Tagalog. An automated email was sent out the same day stating the following, “We have received your email and will reply as quickly as possible”. At the time of writing this report approximately five months after the initial request, a response has not been received.

The link to the home page of the Collège des médecins du Québec (Physician’s College) was found on the federal website and the term “MAiD” was searched to find MAiD specific information which was in the form of a PDF, no webpage. The PDF was called, “Brief Bill C-7/ An Act to amend the Criminal Code (medical assistance in dying)”, it appears to be for the use of physicians to further their understanding of MAiD and the law (Collège des médecins du

Québec). The link to the home page of the Ordre des infirmières et infirmiers du Québec (Nurses College) webpage was found on the federal website, the terms “MAiD” and “Medical Assistance in Dying” were searched to find MAiD specific information, however, no results were found. Finally, the webpage for Ordre des travailleurs sociaux et des thérapeutes conjugaux et familiaux du Québec (College of social workers, family and marriage therapists of Québec) was found using a Google search. The search function on the webpage was used to find MAiD specific data, however, when the terms “MAiD” and “Medical Assistance in Dying” were searched the website stated that there were no results.

New Brunswick. The federal website provided a direct link to New Brunswick’s provincial website where it outlines MAiD, making it only two clicks away. The webpage did not indicate steps to take for patients that require language interpretation or translation (Government of New Brunswick [GNB]). There was no contact information listed. The webpage provides some information on the items or tasks related to receiving MAiD services such as the need for the voluntary request of MAiD by the patient, however, it does not identify requirements of forms or witnesses (GNB). The health professions named were physicians and nurse practitioners and eligibility criteria were listed (GNB). There is a word count of 518 words (GNB).

The online forum on the Department of Health’s website was used, the forum only allowed for 300 characters and the message had to be condensed. The province had an automated response email sent out which stated they received the request. The final email was sent out on February 26th, 2021, and it stated that the following, “I’m afraid that the Province of New Brunswick doesn’t produce communications materials in Tagalog or Filipino. You may find it useful to translate the webpage with [translate.google.com] translate.google.com or another

similar service. However, you should note that there are likely to be errors in any automatic translation which could change some of the meaning of the text. Please do not rely on such a translation for legal or medical purposes” Finally, the email stated that the Parliament of Canada is considering revisions to the law regarding MAiD, these revisions will take time to come into effect but should increase access to MAiD.

The link to the homepage of the College of Physicians and Surgeons of New Brunswick was found on the federal website. Both terms, “MAiD” and “Medical Assistance in Dying” were searched to find MAiD specific information however no results appeared (College of Physicians and Surgeons of New Brunswick).

The link to the homepage of the Nurses Association of New Brunswick was found on the federal website, the term “MAiD” was searched, and a result called “New Health Canada Pages Live- Guidance for MAID Reporting” appeared however once the link was clicked it redirected the user to the federal website (Nurses Association of New Brunswick). The link to the homepage of the New Brunswick Association of Social Workers website was found via Google and the terms “MAiD” and “Medical Assistance in Dying” were searched however, no results appeared (New Brunswick Association of Social Workers).

Nova Scotia. Nova Scotia’s provincial website with MAiD specific information was found on the federal government’s website MAiD information this process took two clicks. The webpage did not indicate steps to take for patients that require language interpretation or translation (Nova Scotia Health Authority [NSHA]). The webpage stated that if patients wished to access MAiD they should speak to their primary health care providers (NSHA). The webpage provides some information on the items or tasks related to receiving MAiD services such as a link that provides

patients with the forms needed to request MAiD, however the need for witnesses was not mentioned (NSHA). Doctors and nurse practitioners were the medical professionals named and eligibility criteria were mentioned (NSHA). The webpage had a word count of 457 words (NSHA).

The Halifax Regional Municipality, Eastern Shore and West Hants areas health authority were contacted for information regarding MAiD in Tagalog. This health authority was contacted as the province did not provide a general provincial email or a MAiD specific email. The “Contact Us” section of Nova Scotia’s provincial webpage stated several local health authorities and the first authority was used to conduct this assessment. The health authority sent an automated message which thanked the patient for the request. The final email was sent out on March 1st, 2021, approximately 2 business days later. The email stated the following, “Currently, MAiD information is available only in English, and we will eventually provide a translation in French. However, there is no plan in place to translate the content into Tagalog, unfortunately.” The province did share a phone number and email that patients can use if they needed support to access MAiD.

The direct link College of Physicians and Surgeons of Nova Scotia MAiD specific webpage was found through the federal government’s website, making it this process took two clicks. The webpage did not indicate steps to take for patients that require language interpretation or translation (College of Physicians and Surgeons of Nova Scotia, [CPSNS]). There was no contact information or information regarding requests for MAiD, forms or witnesses (CPSNS). The medical professionals named were physicians, nurses and pharmacists (CPSNS). The direct link to MAiD specific information by the Nova Scotia College of Nursing was found on the federal website. The webpage did not indicate steps to take for patients that require language

interpretation or translation, contact information, or information about relevant forms or witnesses (Nova Scotia College of Nursing, [NSCN]). Nurse practitioners and physicians were the medical professionals named (NSCN).

The Nova Scotia College of Social Workers website was found via Google and the term “MAiD” was searched to find MAiD specific data the college had produced. The webpage did not indicate steps to take for patients that require language interpretation or translation (Nova Scotia College of Social Workers [NSCSW]). The webpage had a general email address listed for questions and mentioned the need for written consent, but witnesses and forms were not explicitly mentioned (NSCSW). The medical professionals named were medical practitioners and nurse practitioners (NSCSW).

Prince Edward Island. Prince Edward Island’s (PEI) provincial website with MAiD specific information can be found on the federal government’s website, making it this process took two clicks. The webpage did not indicate steps to take for patients that require language interpretation or translation (Government of Prince Edward Island [GPEI]). The webpage stated that patients wishing to seek MAiD should speak to their family physician or nurse’s practitioner to access MAiD (GPEI). If one does not wish to speak to their family physicians or nurse practitioner, or they do not have a family physician or nurse practitioner they can call 8-1-1 which will connect them to a registered nurse who can refer them to a healthcare provider (GPEI). The webpage provides some information on the items or tasks related to receiving MAiD services such as the steps needed in order to request MAiD which included forms but did not mention the need for witnesses (GPEI). The medical professionals named were physicians

and nurse practitioners and MAiD eligibility criteria were listed on the webpage (GPEI). The webpage had a word count of 1081 words (GPEI).

Health PEI was contacted for the email assessment, an automated email was sent stating the following, “Your question, comment or concern is important to us. Due to the COVID-19 outbreak, we are experiencing higher than normal e-mail volumes. We are doing our best to respond to all inquiries in a timely manner”. At the time of writing this report approximately five months have passed, and a final response has not been received.

The federal webpage had a link called *Policy on Medical assistance in dying* (revised June 2019) under the Physicians section. *Policy on Medical assistance in dying* (revised June 2019) was housed on the College of Physicians and Surgeons of PEI website and this page included multiple policies that physicians and surgeons should be familiar with, from the list, “Medical Assistance in Dying, Revised” was selected, however, this did not lead to a webpage rather it was a link to a document created by the college (The College of Physicians and Surgeons of Prince Edward Island [CPSPEI]). This document is meant for physicians to familiarize themselves with the legalities of MAiD (CPSPEI).

The federal webpage had a link to the College of Registered Nurses of PEI website that listed Practice Directives and from this list, MAiD specific information was found. The website link referencing MAiD information appeared to be no longer active. There were two PDFs labelled *Practice Directive Medical Assistance in Dying Roles & Responsibilities for the Registered Nurse* and *Practice Directive Medical Assistance in Dying Roles & Responsibilities for the Nurse Practitioner*, these documents outlined the roles and responsibilities of registered nurses and nurse practitioners, this information did not appear to be for the public (College of Registered Nurses of Prince Edward Island a, College of Registered Nurses of Prince Edward

Island b). Finally, the PEI Social Workers Registration Board's website was found via Google search. Both search terms, "MAiD" and "Medical Assistance in Dying", were referenced in the websites' search but did not return any results.

Newfoundland and Labrador. The federal website had a link to the homepage of Newfoundland and Labrador's provincial website. The search function was used to find MAiD specific information, there was no webpage with MAiD information, however, the search results did show a Frequently Asked Questions (FAQ) document and a link to access forms for MAiD (Health and Community Services [HCS]). The FAQ document addressed communication challenges and indicated that speech-language pathologists are available to help if the patient was not able to effectively communicate with the healthcare provider (HCS). The document did not indicate steps to take for patients that require language interpretation or translation (HCS).

The Department of Health and Community Services of the province was contacted as this was the listed contact information on the provincial website. There was no automated response, however, the final response was emailed 30 minutes after the original request on the same day, February 25th, 2021. The response stated the following, "Unfortunately, we wouldn't have any suggestions for translation services".

The federal webpage had a link called *Standard of Practice – Medical Assistance in Dying* under the Physician's section. This link was not a webpage regarding MAiD rather it housed a document link called *Standard of Practice Medical Assistance in Dying* and the document outlined the minimum standards that the college expects and behavioural and ethical codes of conduct that should be followed by physicians (College of Physicians and Surgeons of Newfoundland and Labrador). The federal website provided a direct link to the College of

Registered Nurses of Newfoundland and Labrador's MAiD information webpage, making this process two clicks. However, the link returned an error, therefore, the information could not be accessed. Finally, the Newfoundland and Labrador College of Social Workers website was found by conducting a Google search. Within the site search engine, the term "MAiD" did not bring forth any results, however, the term "Medical Assistance in Dying" produced a link for "Practice Documents" (Newfoundland and Labrador College of Social Workers [NLCSW]). This link opened to a page with several documents related to the role of Social Workers (NLCSW). Available on this page was the document labelled "Medical Assistance in Dying (2016)" (NLCSW). This document was intended for the use of social workers and it contained information regarding their role and MAiD services (NLCSW).

Yukon. Yukon's provincial government page regarding MAiD was directly linked on the federal governments' website, making this process two clicks. The webpage did not indicate steps to take for patients that require language interpretation or translation (Government of Yukon). The webpage states that patients wishing to seek MAiD should talk to their family doctor or nurse practitioner, if the patient needs a referral they can go to their local community health centre nurse (Government of Yukon). The webpage provides some information on the items or tasks related to receiving MAiD services such as the process needed in order to receive MAiD and states the need for forms and witnesses (Government of Yukon). The medical professionals named are doctors and nurse practitioners and eligibility criteria for accessing MAiD were listed (Government of Yukon). The webpage has a word count of 939 words (Government of Yukon).

Yukon's Health and Social Services email was used to request MAiD information. There was no automated email, however, the final response was provided on, February 25th, 2021,

about an hour later than the original request. The email stated the following, “We do not have any information on Medical Assistance in Dying in Tagalog at this time”.

The Yukon Medical Council (Physicians College) was found on the federal website and there was a link to a document under the bulletin section label Medical Assistance in Dying Standard of Practice (Yukon Medical Council). This document was intended for physicians and discussed their obligations in the MAiD process (Yukon Medical Council). There appeared to be no webpage with MAiD information registered in Yukon. The link to the home page of the Yukon Registered Nurses Association webpage was found on the federal page, however, on the there was no search function to search for MAiD specific information. Finally, the Association of Social Workers in Northern Canada, which represents social workers in both Yukon and Northwest Territories, was found via Google however the webpage had no search function.

Northwest Territories. The federal website has a direct link to the Northwest Territories’ provincial website regarding MAiD, making this process two clicks. The webpage did not indicate steps to take for patients that require language interpretation or translation (Health and Social Services). The webpage states that patients should talk to their practitioner or call Telehealth. If the patient needs help accessing a practitioner, they can call the Central Coordinating Service number which is listed on the webpage (Health and Social Services). The webpage does not provide information on the items or tasks related to receiving MAiD services such as the required forms or witness information (Health and Social Services). The medical professionals named were ‘medical practitioners’ and ‘nurse practitioners’, there were MAiD eligibility criteria listed (Health and Social Services). There was a word count of 374 words (Health and Social Services).

Northwest Territories' online forum was used to request MAiD information in Tagalog. There was no automated response, however, an email was sent out on March 4th, 2021, 5 business days after the initial email, which stated the following, "I am working on getting the FAQ for patients and families translated in Tagalog. I will get back to you as soon as I get the translation". A reply was sent to the province expressing gratitude and to inform them the translation was not necessary due to ethical reasons around utilizing the province's resources and time. No response was received to this email, until March 9th, 2021 where the translated document was provided.

The federal webpage listed a link to the home page of the Northwest Territories Health and Social Services as a resource for physicians, however, a physician's college was not explicitly mentioned on the federal webpage or the Northwest Territories Health and Social Services webpage (Health Canada a; Health and social services). There was a MAiD specific link listed under the Nurses section on the federal webpage, however, this link returned a message, "This page doesn't seem to exist". The link to the homepage of the Registered Nurses Association of the Northwest Territories and Nunavut website was found on the federal website and was used as an alternative measure to assess this regulatory body. The search term "MAiD" was searched. The webpage did not indicate steps to take for patients that require language interpretation or translation (The Registered Nurses of the Northwest Territories and Nunavut [RNNTN]). Contact information for any resources or the MAiD request process was not identified on this webpage (RNNTN). Nurse practitioners, physicians, and registered nurses were the medical professionals named (RNNTN). Finally, the website for the Association of Social Workers in Northern Canada was found via Google however the webpage had no search function available. Thus, no information was found from this body.

Nunavut. The federal governments' website provides a link to Nunavut's general health website. The search terms were input into the search bar of the webpage and no returned no results. The federal website did provide a phone number and email address to access information regarding MAiD (Government of Nunavut).

The MAiD specific email address listed on the federal government's website was used in order to receive MAiD information from Nunavut. A return email notification was received indicating the domain was not listed. As such, the researchers were unable to assess this criterion for Nunavut.

The federal government provided a link to the home page of the Physicians in Nunavut's website however there was a privacy error that made the webpage inaccessible to the researchers. There was a link to the homepage of the Registered Nurses Association of the Northwest Territories and Nunavut and the term "MAiD" was used. The returned webpage did not indicate steps to take for patients that require language interpretation or translation (RNNTN). There was no contact information listed or information on requesting these services (RNNTN). Nurse practitioners, physicians, and registered nurses were the medical professionals named (RNNTN). Finally, the Association of Social Workers in Northern Canada was found via Google however the webpage had no search function and the researchers were unable to assess this body.

DISCUSSION

There is a need for a more robust national policy review on language accessibility for individuals searching information or accessing MAiD, regardless of where the individual resides and the language they speak. This assessment has found that MAiD information is not as equally

accessible in every province and territory across Canada. Every province and territory except for Québec, Newfoundland and Labrador and Nunavut had their MAiD specific provincial and territorial webpage linked directly on the federal webpage which is more accessible.

Newfoundland and Labrador and Nunavut did not appear to host any provincial or territorial webpage discussing MAiD, therefore, accessing MAiD information in these provinces and territories is less accessible than compared to other provinces and territories. Québec did have information regarding MAiD, however, alternate terminology was used; “Medical Aid in Dying”. In Canada it is federally known as Medical Assistance in Dying or MAiD therefore this difference in terminology can potentially be a barrier as a patient researching MAiD information may run into some confusion when comparing Québec’s information with the federal webpage’s information (Health Canada a).

Apart from Ontario no other province or territory mentioned steps to take or information on what to do in the instance when a patient cannot effectively communicate with the healthcare provider due to language differences. Ontario’s provincial webpage mentioned that an interpreter can be brought into the discussion with the healthcare provider to ensure that the patient can understand their options and effectively communicate with the healthcare provider. The webpage does not state whether the province will provide an interpreter. Studies have shown that those who do not speak the same language as the healthcare provider face many difficulties when accessing healthcare services and have worse health outcomes than those that do speak the same language (Al Shamsi, Hilal, et al). Furthermore, when stressful situations arise when bilingual patients may only be capable of speaking their native language as communication skills may decline under pressure (Schaafsma, Evelyn S., et al). To provide better healthcare and ensure that

all patients feel accepted and cared for, more interpreter services are necessary (Al Shamsi, Hilal, et al).

Québec, New Brunswick, Prince Edward Island, Newfoundland and Labrador, Yukon and Nunavut did not state any contact information for which a patient could use to request more information or ask questions. Manitoba, Prince Edward Island, Yukon, and the Northwest Territories did state on their MAiD specific webpages that patients should speak directly to their primary care doctor or nurse practitioners. To create more equitable accessible phone numbers, emails and helplines should be clearly stated, even if it's just a general helpline to the province. Such discrepancies between the provinces illustrate that accessing MAiD across Canada is not equal and language barriers are not addressed, with the exception of Ontario.

The physicians', nurses', and social workers' regulatory bodies' respective webpages on MAiD did not offer or much information on steps patients can take if they are not able to communicate with their healthcare provider due to language barriers. The College of Physicians and Surgeons of Saskatchewan's general webpage did have a section that addressed what patients could do if they did not speak the same language as their physicians, *Overcoming Language and Cultural Barriers* (CPSS). Adding this section is a step in the right direction as language barriers often result in unequal access to healthcare and unequal health outcomes (Al Shamsi, Hilal, et al). This section should be visible on the relevant MAiD webpages to ensure that it can be highly accessible. Furthermore, patients who do not speak the same language as their healthcare provider may experience increased stress and could lead to miscommunication, therefore it is crucial to ensure that translation and interpretation services and resources are easily accessible as well (Meuter, Renata F. I., et al). MAiD is a permanent and irreversible procedure

that results in death, as such, communication must be provided at the highest level to ensure that patients can comfortably ask questions and be confident in their choice.

The Northwest Territories was the only territory of provinces and territories that was able to provide a translated document in Tagalog. Provinces such as British Columbia, Manitoba, and Ontario were able to provide the contact information to other entities to receive translated documents. Provinces such as Alberta, Saskatchewan, Québec and Prince Edward Island did not respond to the email asking for MAiD information to be made available in Tagalog. New Brunswick suggested using an online translator but mentioned that there could be potential errors in the translation. Nova Scotia, Newfoundland and Labrador and Yukon did not state that they could translate the document or provide any suggestions for interpretation or translation services. The email provided by Nunavut was deemed an inactive email by Microsoft outlook and therefore this assessment was not able to reach or capture Nunavut's response. These results effectively illustrate the language barrier to accessing MAiD as the province's inability to get back to patients or inability to support language accessibility illustrates a lack of effort to address the language needs of residents.

Provinces and territories should take immediate steps to ensure equitable access to MAiD by language. Documents containing MAiD information should be translated into the top ten languages in each province and territory as a start or provide appropriate accommodation services such as interpretation or translation services that are easily accessible. Literacy levels of residents may vary; therefore, the materials must be presented in an easily understood format (Schaafsma, Evelyn S., et al). Schaafsma, Raynor, and de Jong-van den Berg provide the following to consider when preparing materials to accommodate for literacy level; use simple language, translate the jargon, use positive messages and short sentences, write in a

conversational manner, only write one message per sentence, use practical and specific advice, and rationalize ‘why’ certain steps are needed.

CONCLUSIONS

Within the scope of this scan, the above findings suggest that there are significant language accessibility barriers for non-English or French speakers or readers who search for information on MAiD within their respective provinces. This scan illustrates that there is a need for provincial governments and health professional regulatory bodies to provide accessible communications in various languages regarding MAiD as well as support to health care providers who serve clients with language accessibility requirements. Aside from Ontario, no other province or territories’ webpage mentioned that language interpreters can be brought in to discuss MAiD with the healthcare providers. Although this study was asking about the ability to produce documents in Tagalog, the Northwest Territories was the only territory that actively replied and produced MAiD information in Tagalog. In conclusion, provinces and territories must implement factors to support language accessibility in regard to MAiD to ensure that all Canadians, regardless of where they live or what language they speak have equal access to MAiD.

LIMITATIONS

Limitations for this assessment are as follows. Regarding the provincial and territorial webpage scan, this scan did not consider digital and virtual literacy. This study used the federal webpage as a starting point, however, the clicks needed to get to that webpage were not considered when assessing accessibility as search engines and strategies used by the general population may vary. Furthermore, Google was used as the primary search engine and it is possible that MAiD patients

may use other search engines. A limitation in the email assessment is related to the timing of the scan. This scan was conducted during the novel coronavirus global pandemic, during which many provinces and territories may have been in lockdown putting strain on available resources impacting response times and ability to readily support requests putting strain on available resources impacting response times and ability to readily support requests.

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DRAFT

Appendix A

BRITISH COLUMBIA



Figure 1. British Columbia. (n.d.). *Medical Assistance in Dying*. © 2021, Province of British Columbia. Retrieved March 31, 2021. from <https://www2.gov.bc.ca/gov/content/health/accessing-health-care/home-community-care/care-options-and-cost/end-of-life-care/medical-assistance-in-dying>. Screenshot by author.

ALBERTA

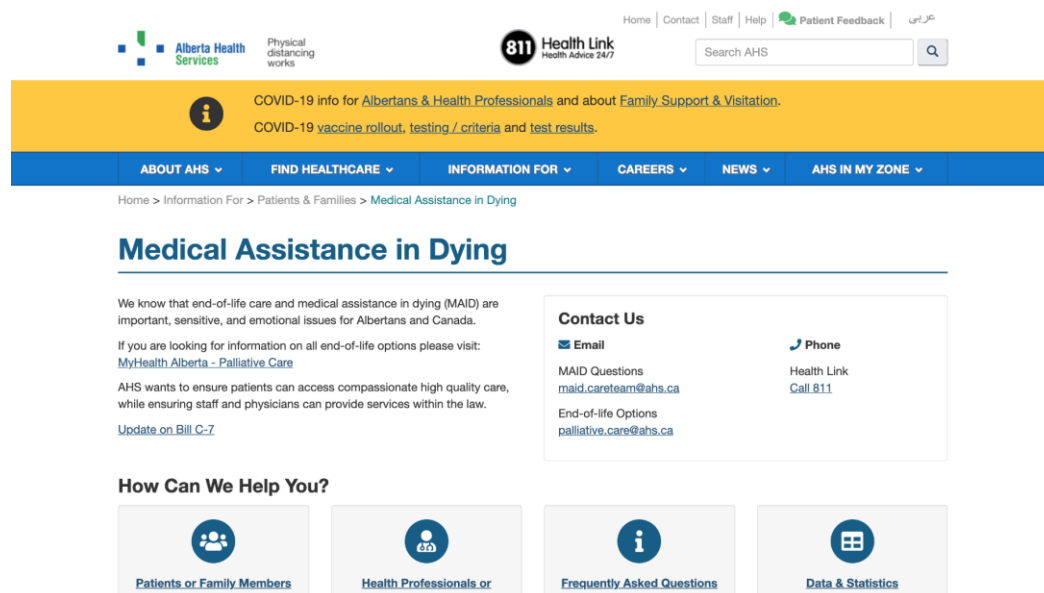


Figure 2. Alberta. *Medical Assistance in Dying*. © 2021 Alberta Health Services. Retrieved March 31, 2021. from <https://www.albertahealthservices.ca/info/page13497.aspx>. Screenshot by author.

SASKATCHEWAN

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Home > Facilities & Services > Medical Assistance in Dying (MAID) > Home

Medical Assistance in Dying (MAID)

On June 17, 2016, the Federal government introduced legislation that allows eligible adults to request medical assistance in dying (MAID).

In Canada, there are two types of medical assistance in dying, where a physician or nurse practitioner:

- Directly administers a medication that causes death, such as an injection of a drug
- Gives a medication that is self-administered to cause death.

Medical assistance in dying can be legally provided by licensed physicians and nurse practitioners, at the direction of an adult who meets all the criteria.

Who is eligible for medical assistance in dying?

Under federal legislation, an individual must meet all of the following criteria to be considered eligible for medical assistance in dying.

Individuals must:

- Be eligible for health services funded by the federal government or a province or territory. Generally, visitors to Canada are not eligible for medical assistance in dying.
- Be at least 18 years old and mentally competent (this means capable of making healthcare decisions for yourself).
- Have a grievous and irremediable medical condition. This means you must meet all of the following conditions:
 - Have a serious illness, disease or disability.
 - Be in an advanced state of decline that cannot be reversed.
 - Be suffering unbearably from an illness, disease, disability or state of decline.
 - Be at a point where your natural death has become reasonably foreseeable, which takes into account all of your medical circumstances.
- Make a request for medical assistance in dying which is not the result of outside pressure or influence.
- Give informed consent to receive medical assistance in dying. This means you have consented to medical assistance in dying after being given all the information needed to make your decision. This includes information about:

Figure 3. Saskatchewan. *Medical Assistance in Dying (MAID)*. © 2021 Saskatchewan Health Authority. Retrieved March 31, 2021. from <https://www.saskhealthauthority.ca/Services-Locations/MAID/Pages/Home.aspx>. Screenshot by author.

MANITOBA

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RESIDENT AND ONLINE SERVICES BUSINESS GOVERNMENT VISITORS

Health, Seniors and Active Living

Manitoba.ca > Health, Seniors and Active Living

Medical Assistance in Dying

Following a Supreme Court of Canada decision, medical assistance in dying (MAID) became legal on June 6, 2016. On June 17, 2016, Bill C-14, federal legislation on medical assistance in dying, received royal assent.

In Manitoba, the intent is to provide access to this care in a manner that is respectful of the informed choices of individuals and provides appropriate safeguards to protect vulnerable people in the community while remaining respectful of the view of health care providers. Manitoba Health, Seniors and Active Living has worked closely with regional health authorities, CancerCare Manitoba and with provincial regulatory colleges to ensure a compassionate approach is available to Manitobans.

Questions and Answers About Medical Assistance in Dying

What is medical assistance in dying?

Medical assistance in dying takes place when an authorized health care provider provides or administers medication that intentionally brings about the patient's death, at the request of the patient. This procedure is available only where a patient meets the criteria set out in the federal legislation on MAID.

There are 2 types of medical assistance in dying available to Canadians. They include where an authorized health care provider:

1. directly administers a substance that causes death, such as an injection of a drug (this is commonly called voluntary euthanasia).
2. gives or prescribes a drug that is self-administered to cause death (this is commonly known as medically-assisted suicide).

Figure 4. Manitoba. *Medical Assistance in Dying*. OpenMB. Retrieved March 31, 2021. from <https://www.gov.mb.ca/health/maid.html>. Screenshot by author.

ONTARIO

Stay at home except for essential travel and follow the [restrictions and public health measures](#).

Ontario   français  MENU

[Home](#) > [Health and wellness](#)

Medical assistance in dying and end-of-life decisions

Doctors and nurse practitioners in Ontario can provide medical assistance in dying. Learn who is eligible for this option and how and where they can receive it.

On this page

- [1. Finding someone to help](#)
- [2. Eligibility](#)
- [3. Where you can receive assistance](#)
- [4. How you can receive assistance](#)
- [5. You have time to think about your decision](#)

Related

- [Palliative and end-of-life care](#)
- [Medical Assistance in Dying – Information for Patients \(PDF\)](#)
- [Medical assistance in dying information from the federal government](#)
- [Medical assistance in dying information from the provincial government](#)
- [Full list of eligibility requirements in the federal Criminal Code](#)

If you're suffering from a grievous (very serious) and irremediable (impossible to recover from) medical condition, you can talk to your doctor or nurse practitioner about your options for treatment and care. These may include palliative care (care to maintain or improve your quality of life), psychological support, spiritual care and medical assistance in dying.

Finding someone to help

Figure 5. Ontario. *Medical Assistance in Dying and end-of-life decisions*. © 2012-21 Queen's Printer for Ontario. Retrieved March 31, 2021. from <https://www.ontario.ca/page/medical-assistance-dying-and-end-life-decisions>. Screenshot by author.

QUÉBEC

Québec   Français [Contact us](#)

 Different alert levels are in force in Québec. [Consult the health measures that apply in your region](#) for more details. You can also [consult all the information on COVID-19](#).

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Information and services

- Culture
- Education
- Employment
- Businesses and self-employed workers
- Agriculture, environment and natural resources
- Family and support for individuals**
- Finance, income and other taxes
- Homes and housing
- Immigration
- Justice and civil status
- Health
- Public safety and Emergencies

Family and support for individuals

- Educational childcare services in the context of COVID-19 pandemic
- Adoption
- Assistance and Support
- Financial Assistance
- Pregnancy and Parenthood
- Child Development
- Separation and Divorce
- Coping with a Loss of Independence
- Programs and Services for Seniors
- Death

Figure 6. Québec. *Information and services*. © 2021Gouvernement du Québec. Retrieved March 31, 2021. from <https://www.quebec.ca/en/family-and-support-for-individuals/>. Screenshot by author.

NEW BRUNSWICK

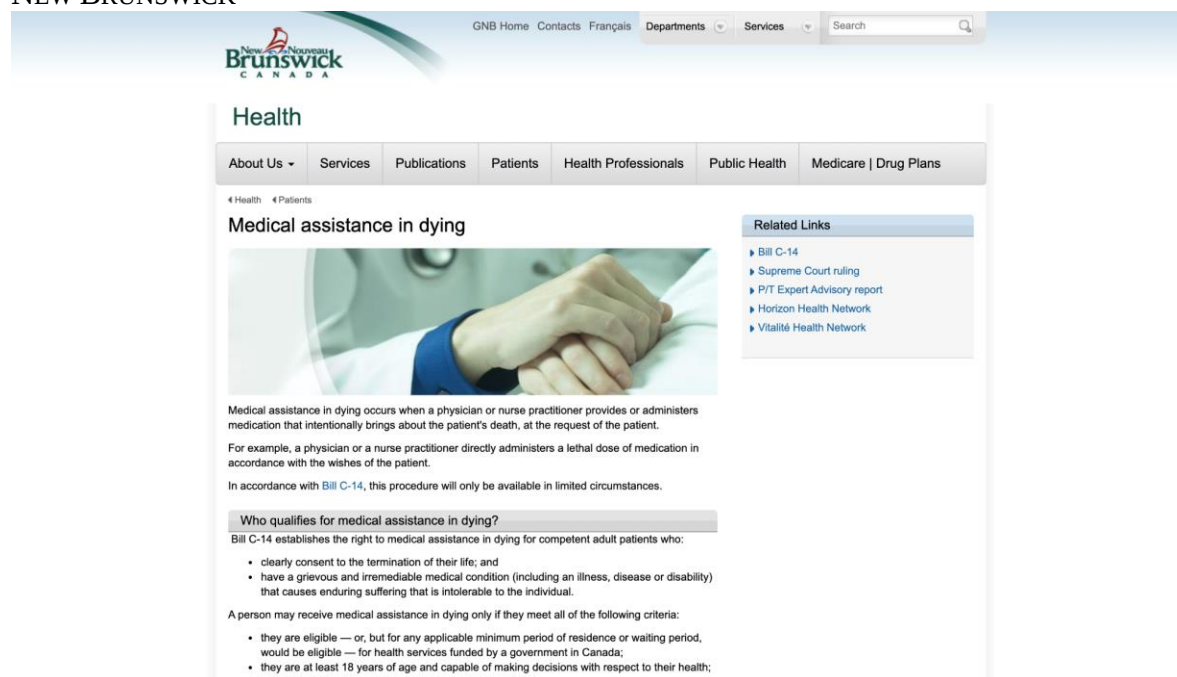


Figure 7. New Brunswick. *Medical assistance in dying*. © (n.d) Government of New Brunswick. Retrieved March 31, 2021.

from <https://www2.gnb.ca/content/gnb/en/departments/health/patientinformation/content/MedicalAssistanceInDying.html>. Screenshot by author.

NOVA SCOTIA

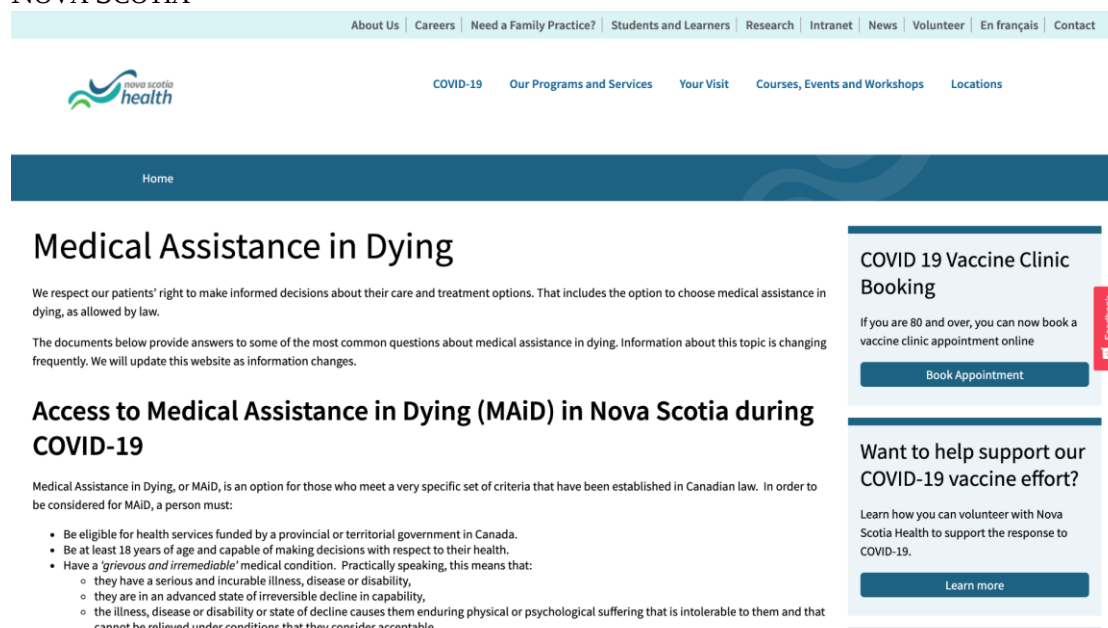


Figure 8. Nova Scotia. *Medical Assistance in Dying*. © 2020 Nova Scotia Health Authority. Retrieved March 31, 2021. from <http://www.nshealth.ca/about-us/medical-assistance-dying>. Screenshot by author.

PRINCE EDWARD ISLAND

Medical Assistance in Dying

Information for Patients, Clients and Residents

Deciding whether medical assistance in dying is right for you is a very personal choice. Everyone is different, and has different wishes. Regardless, it is normal to ask questions about medical assistance in dying if you are considering it. It is important to understand that not every person who inquires about medical assistance in dying will be eligible. Whatever you decide, your health care team is here to give you the care you need, while respecting your wishes. The decision is always yours to determine if you would like to proceed with medical assistance in dying, or explore other options.

What is medical assistance in dying?

In Canada, medical assistance in dying refers to procedures in which a physician or nurse practitioner assists a patient, client, or resident ("patient") who wishes to voluntarily and intentionally end their life, either by administering a lethal dose of a medication or providing the patient a prescription so they may end their life through self-medication.

Is medical assistance in dying legal?

On June 17, 2016, medical assistance in dying became law (Bill-C-14) in Canada and Prince Edward Island.

What are the criteria to receive medical assistance in dying?

In order for you to receive medical assistance in dying you must:

- be at least 18 years old and capable of making decisions about your health;
- be eligible for health services funded by a government of Canada;
- have a grievous and irremediable medical condition (including an illness, disease or disability);
- have made a voluntary request that was not influenced by external pressure; and

Additional Links

- Walk-in Clinics
- PEI Health Card
- 811 Telehealth
- Obstetrics and Gynecology...
- Laboratory Services
- Home Care Program

Figure 9. Prince Edward Island. *Medical Assistance in Dying*. © 2021 Government of Prince Edward Island. Retrieved March 31, 2021. from https://www.princeedwardisland.ca/en/information/health-pei/medical-assistance-dying?utm_source=redirect&utm_medium=url&utm_campaign=medical-assistance-in-dying. Screenshot by author.

NEWFOUNDLAND AND LABRADOR

Health and Community Services

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Get your flu shot!

Welcome to Health and Community Services

The Department of Health and Community Services provides a leadership role in health and community services programs and policy development for the province. This involves working in partnership with a number of key stakeholders including regional health authorities, community organizations, professional associations, post-secondary educational institutions, unions, consumers and other government departments.

Find out more about what we do...

Features

A year ago, we didn't stand

Figure 10. Newfoundland and Labrador. *Welcome to Health and Community Services*. © (n.d) Government of Newfoundland Labrador. Retrieved March 31, 2021. from <https://www.gov.nl.ca/hcs/>. Screenshot by author.

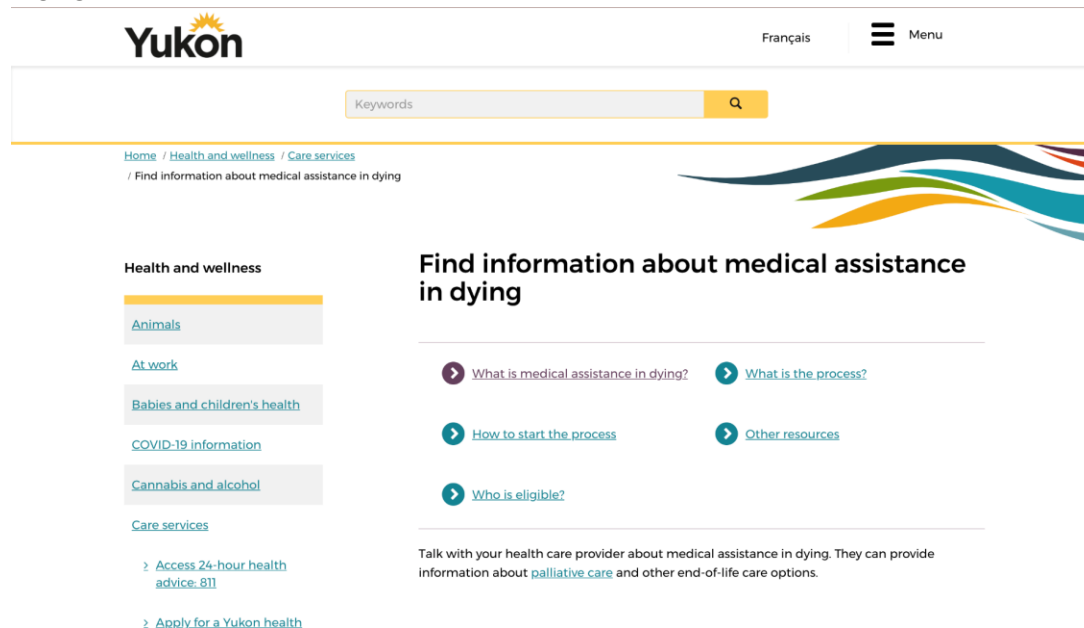


Figure 11. Yukon. *Find information about medical assistance in dying*. © 2021 Government of Yukon. Retrieved March 31, 2021. from <https://yukon.ca/en/health-and-wellness/find-information-about-medical-assistance-dying#what-is-medical-assistance-in-dying>. Screenshot by author.

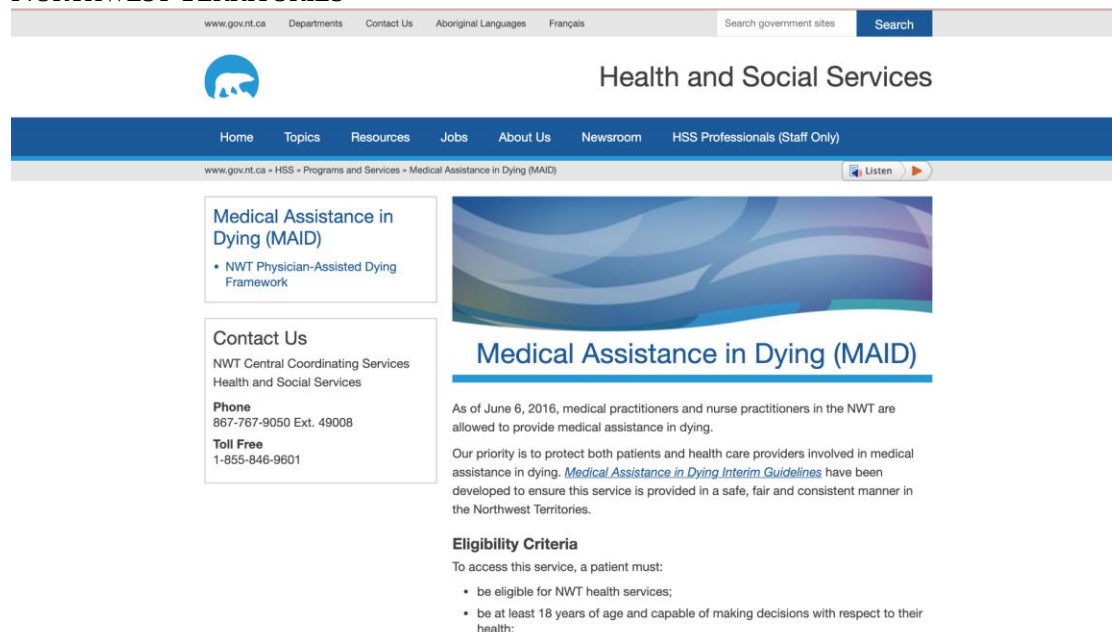


Figure 12. Northwest Territories. *Medical Assistance in Dying (MAID)*. © (n.d) Government of Northwest Territories. Retrieved March 31, 2021. from <https://www.hss.gov.nt.ca/en/services/medical-assistance-dying-maid>. Screenshot by author.

NUNAVUT

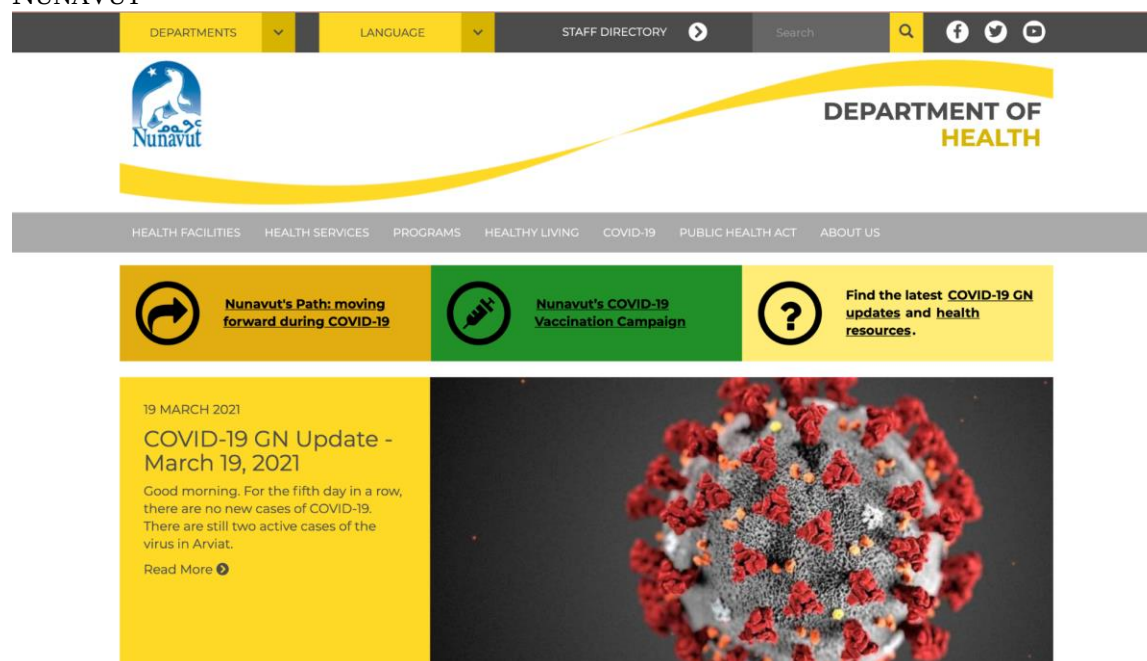


Figure 13. Saskatchewan. *Medical Assistance in Dying (MAID)*. © (n.d) Government of Nunavut. Retrieved March 31, 2021. from <https://www.gov.nu.ca/health/>. Screenshot by author.

Appendix B

Province/ Territory	Emails Contacted for Assessment
British Columbia	servicebc@gov.bc.ca
Alberta	maid.careteam@ahs.ca
Saskatchewan	Online Contact Form: https://apps.saskhealthauthority.ca/shafeedback/
Manitoba	maid@wrha.mb.ca
Ontario	Online Contact Form: https://www.ontario.ca/feedback/contact-us?id=25811&nid=73561
Québec	Online Contact Form: https://www.quebec.ca/en/how-to-reach-us/email/
New Brunswick	Online Contact Form: https://www.gnb.ca/0051/inquiry-e.asp
Nova Scotia	healthcareexperience@nshealth.ca
Prince Edward Island	healthpei@gov.pe.ca
Newfoundland and Labrador	healthinfo@gov.nl.ca
Yukon	hss@gov.yk.ca
Northwest Territories	Online Contact Form: https://www.hss.gov.nt.ca/en/content/contact-us
Nunavut	info.maid@gov.nu.ca

Appendix C

Province/ Territory	Number of Clicks	Website Address
British Columbia	2	https://www2.gov.bc.ca/gov/content/health/accessing-health-care/home-community-care/care-options-and-cost/end-of-life-care/medical-assistance-in-dying
Alberta	2	https://www.albertahealthservices.ca/info/page13497.aspx
Saskatchewan	2	https://www.saskhealthauthority.ca/Services-Locations/MAID/Pages/Home.aspx
Manitoba	2	https://www.gov.mb.ca/health/maid.html
Ontario	2	https://www.ontario.ca/page/medical-assistance-dying-and-end-life-decisions
Québec	N/A	https://www.quebec.ca/en/health/health-system-and-services/end-of-life-care/medical-aid-in-dying/
New Brunswick	2	https://www2.gnb.ca/content/gnb/en/departments/health/patientinformation/content/MedicalAssistanceInDying.html
Nova Scotia	2	http://www.nshealth.ca/about-us/medical-assistance-dying
Prince Edward Island	2	https://www.princeedwardisland.ca/en/information/health-pe/medical-assistance-dying?utm_source=redirect&utm_medium=url&utm_campaign=medical-assistance-in-dying
Newfoundland and Labrador	N/A	https://www.gov.nl.ca/hcs/
Yukon	2	https://yukon.ca/en/health-and-wellness/find-information-about-medical-assistance-dying#what-is-medical-assistance-in-dying
Northwest Territories	2	https://www.hss.gov.nt.ca/en/services/medical-assistance-dying-maid
Nunavut	N/A	https://www.gov.nu.ca/health/