

Guidelines for Parish Nurses on Medical Assistance in Dying (MAiD) Canadian Association for Parish Nursing Ministry (CAPNM)

Setting the Context:

Federal legislation allowing Medical Assistance in Dying (MAiD) in Canada does not change the Parish Nurse's commitment to the people he/she cares for. Parish Nurses strive to provide excellence in nursing and spiritual care and to uphold the CAPNM Parish Nursing Standards for Practice.

Parish Nurses are called into a sacred relationship of trust with those we care for – we are called to accompany people throughout all stages of life, wherever they are along the continuum of health, well-being, illness, suffering and dying. We come alongside, as Christ came alongside us, to promote health and wholeness, to comfort, to relieve or mitigate suffering when we can, and to share hope and healing with others. (See 2 Corinthians 2:3-5)

“God has called us to walk through this life together, and this includes journeying with people to the end of their days on earth. Now, more than ever, our world needs to know that we will not leave them to face their dying alone.” (On Living Through our Dying, Roman Catholic Diocese of Saskatoon, March 2017).

“What we can offer as church is our promise to be there; to remain engaged and in relationship; to help create a space where hope can make a home amid lingering fears..... Our role is as one who keeps vigil alongside others in times of joy and sorrow, and stands with humble trust between what is known and the mystery of the unknown.” (Care for the Dying, Roman Catholic Diocese of Saskatoon, March 2017).

“A growing body of work is emerging that examines the effects of spiritual care practices in the easing of suffering. Findings from empirical studies suggest that for many individuals, a relationship exists between spirituality and religion and quality of life in the context of illness and suffering.” (Spirituality, Health and Nursing Practice, CNA, 2010)

“Each parish nurse associates spiritual beliefs and practices with all aspects of an individual's life and health.” (CAPNM Standard 3, Facilitating Spiritual Care, 2015)

Guidelines:

These guidelines direct Parish Nurses toward ethical practice, ethical decision making, and areas for learning and discernment under each of the following eight topics:

1. End of Life Care
2. Spiritual Care
3. Professional Practice
4. Personal Discernment
5. Conscientious Objection
6. Responding to a Request for MAiD
7. Complying with the Criminal Code
8. Nurse Practitioners

End of Life Care:

Nurses continue to have a significant role to play in end-of-life care.

Parish Nurses are frequently in a position to advocate for and to encourage family conversations on planning for end-of-life care. Parish Nurses are urged to provide education and information on Advanced Care Planning and to support families in planning for and expressing their wishes for end-of-life care.

“End-of-life- care with the goal of a peaceful death has always been a nursing role. Nurses and Nurse Practitioners engage in conversations about end-of-life and help clients facilitate and navigate information to assist them in making informed decisions.” (Medical Assistance in Dying: Guidelines for Registered Nurses, CARNA, Alberta, 2017).

“Nurses in all clinical practice settings are responsible for providing and advocating for safe, compassionate, competent, ethical and evidence-informed palliative and end-of-life care.” (The palliative approach to care and the role of the nurse, Joint Position Statement, CNA, June 2015)

- Parish Nurses are urged to advocate for and support the principles and goals of hospice and palliative care.
- Parish Nurses advocate for accessible and timely hospice and palliative care for all Canadians.

Palliative Care (more detailed information is available on the websites referenced below):

- is specialized care for individuals and families who are living with a life-limiting illness, usually at an advanced stage.
- is aimed at relieving suffering and improving the quality of life for persons who are living with, or dying from, advanced illness or are bereaved.
- is holistic care that addresses the person’s spiritual, physical, mental, emotional, psychosocial, and relational aspects of care; individualized care is provided within the context of family systems.
- takes into consideration the unique cultural and spiritual aspects of the person and their family.

“Quality hospice palliative care neither hastens death nor prolongs life.” (<http://www.hpcoco.ca>)

It is our hope that timely access to quality hospice palliative care & spiritual care will provide effective alternatives to MAiD and therefore minimize requests for MAiD in Canada.

(For more information see <http://www.chpca.net> Canadian Hospice Palliative Care Association, and <http://www.hpcoco.ca> Hospice Palliative Care Ontario, www.virtualhospice.ca Virtual Hospice, and other provincial Hospice Palliative Care websites)

Spiritual Care:

Parish Nurses walk closely with people and their families as they experience this latter stage of life. We trust that God is with us throughout the journey of life and does not abandon us in death. We believe that healing and wholeness is possible throughout the process of death and dying.

Parish Nurses are encouraged to advocate for the importance and continuation of excellence in spiritual care within the health care system.

“The Parish Nurse uses specific nursing interventions to provide spiritual care.” (CAPNM Standard 3, Facilitating Spiritual Care, 2015).

The CAPNM Parish Nursing Standards for Practice (www.capnm.ca), and the following quotes from O’Brien, Spirituality in Nursing, Standing on Holy Ground, 4th Edition, 2011, help to inform the Parish Nurse’s role during death and dying:

1. “The dying process is unique to each person.” (Chapter 12, pg. 307)
2. “Young and Koopson (2011) point out that dying is a spiritual event of significant importance.” (Chapter 12, pg. 310)
1. “The assessment of spiritual needs may be complex at end-of-life.” (Chapter 12, pg. 310)
2. “.... three ... spiritual goals of the dying person:
 - a. to identify meaning in one’s life
 - b. to die appropriately, and
 - c. to find hope that extends beyond the grave.” (Chapter 12, pg. 308)
3. “Other spiritual needsidentified in the nursing literature include the needs for forgiveness and love, for self-acceptance and for positive relationships with others, including for some, relationship with God or deity.” (Chapter 12, pg. 308)
4. “Suggested nursing strategies include listening, assuring trust, non-judgement, sensitivity to pain and preparing the dying patient for what to expect...” (Chapter 12, pg. 310)

The Parish Nurse supports the dying person & their family by:

- completing spiritual assessments
- identifying spiritual needs and spiritual distress
- facilitating Spiritual Care consults and visits by spiritual care providers of the person’s choosing
- providing and / or facilitating the provision of culturally appropriate spiritual care
- initiating appropriate interventions to instil hope and find meaning in the midst of suffering and end-of-life, and
- facilitating or accessing grief and bereavement support.

Parish Nurses are encouraged to explore the many excellent resources available on end-of-life care and the spirituality of dying. The bibliography on the CAPNM website is a good resource.

<http://www.capnm.ca/bibliography.htm>

Professional Practice:

Parish Nurses are required to

- maintain a current registration / licence to practice nursing in the appropriate jurisdiction(s)
- adhere to the standards and expectations for practice within those jurisdictions
- maintain continuing competence / fitness to practice, and
- uphold ethical standards and values as stated in the Canadian Nurses Association (CNA) Code of Ethics (Parish Nursing: Standards for Practice, 2015, Standard 1).

There are many documents and publications that guide the Parish Nurse's practice and provide the relevant information needed in relation to MAiD.

It is the professional responsibility of each Parish Nurse to stay current in their jurisdiction of practice, thus meeting the standards for Parish Nursing Practice and their licensing body.

The following documents are of significant importance to professional practice concerns:

- National Nursing Framework on Medical Assistance in Dying in Canada, CNA, 2017 (includes the full text of Bill C-14 in the Appendix) www.cna-aiic.ca
- Code of Ethics for Nurses, CNA, 2008 (covers matters related to Conscientious Objection; watch for a revision of this document in 2017) www.cna-aiic.ca
- Your provincial or territorial nursing guidelines or standards for MAiD
- Medical Assistance in Dying: What Every Nurse Should Know, Canadian Nurses Protective Society, July 2016 @ <http://www.cnps.ca>

Personal Discernment:

The following suggestions and thoughts may assist and support the Parish Nurse to prepare spiritually, morally and professionally to respond to inquiries and conversations about MAiD:

1. Reflect and discern your own values, feelings, and moral stance, on the topic of MAiD.
2. Each Parish Nurse must act according to his/her own discernment and conscience in determining whether to participate or not to participate in requests for MAiD.
3. Care providers choosing and acting either for or against MAiD may each be responding in truth out of the compassion in their hearts for those who are suffering.
4. We believe that the grace of God in the gospel of Jesus Christ offers peace and comfort to those whose conscience is troubled by the ambiguities and difficult decisions required in the care of people requesting medical assistance in dying. If our conscience accuses us, we have an advocate with the Father, who is greater than our conscience.
5. 1 John 3: 19-23 (NRSV) "By this we shall know that we are of the truth, and reassure our hearts before God whenever our hearts condemn us; for God is greater than our hearts, and God knows everything. Beloved, if our hearts do not condemn us, we have confidence before God; and we receive from him whatever we ask, because we keep his commandments and do what pleases him. And this is his commandment, that we should believe in the name of his Son Jesus Christ and love one another, as he has commanded us."
6. Discuss your reflections / discernment on MAiD with a spiritual director or guide, other Parish Nurses, or with an elder or someone you respect and trust within your faith community or denomination.
7. Reflect on and discern how you will respond to a person who requests information on or access to MAiD. (See the section titled "Responding to a request for MAiD" in these guidelines)

8. As Parish Nurses, we do not abandon persons / families in our care; we continue to walk alongside them, providing assessments, comfort, advocacy, encouragement, support, and hope.
9. Determine: Do you wish to take a stand of Conscientious Objection (CO) with respect to MAiD? If yes, comply with guidelines as outlined in the CNA Code of Ethics, any applicable provincial nursing standards, **and** workplace policies and processes.

Conscientious Objection:

The right to Conscientious Objection (CO) on moral grounds is covered by Bill C-14, in the CNA Code of Ethics, and most of the provincial nursing guidelines for MAiD. The National Nursing Framework on MAiD in Canada and the CNA Code of Ethics provide specific direction for Parish Nurses who choose CO.

For some, the protection of CO in the legislation and provincial standards and guidelines may not be strong enough. For those who want to see the right of CO in relation to MAiD strengthened, the Coalition for HealthCARE and Conscience may be of interest.

<http://www.canadiansforconscience.ca/>

For those who choose CO in relation to MAiD, take the time to reflect on the following considerations:

1. How will you maintain professional obligations?
 - a. Some of the issues are: not abandoning the person / family, maintaining a non-judgemental approach in your communications, possible transfer of care, and continuing to provide the needed aspects of care to the person.
 - b. Be sure to understand these concepts and processes as defined in your provincial or territorial guidelines, the CNA Code of Ethics, and the CNA National Nursing Framework on MAiD.
2. Reflect on and understand the position of your faith community or denomination with respect to the topic of MAiD.
3. Reflect on and understand the position of the faith community or denomination that employs you as a Parish Nurse.
4. Determine:
 - a. if the provision of MAiD will be a concern for you in your workplace
 - b. with your employer, the appropriate responses and processes for requests related to MAiD.

Responding to a Request for MAiD:

Parish Nurses should be prepared to respond to people and their families on matters related to end-of-life; Parish Nurses should reflect on how they will respond to a request for MAiD.

A call to personal reflection: Read the statements below and consider how you would respond when a person expresses a wish to die or makes a request for MAiD.

Parish Nurses listen carefully to concerns about death or dying. They explore the meaning behind these expressed concerns and requests. The person may be trying to express unmet needs which are contributing to their suffering.

Nurses can engage the person “in meaningful communication to clearly understand their health needs. Continue your nursing assessments and provide care as you always would with empathy, respect and compassion. Your nursing role is to continue providing safe, competent, compassionate and ethical nursing care.” (Medical Assistance in Dying: Guidelines of Registered Nurses, College and Association of Registered Nurses of Alberta (CARNA))

The following quote is taken directly from the CNA National Nursing Framework on MAiD:

“Nurses have a unique perspective and bring an important contribution to the health-care team in the provision of palliative and end-of-life care that includes MAiD.

If a person in a nurse’s care expresses a wish to die, the nurse should consider it an opportunity to open a dialogue. Such comments might be transient, the result of a temporary distress or an expression of suffering due to unmet needs that could be treated or addressed. The role of the nurse is to identify and alleviate the factors prompting such requests, whether these stem from physical symptoms like pain or are related to anxiety or fear. Nurses have an obligation to try to understand the person’s request and to bring in appropriate resources to address unmet needs. Nurses are accountable and responsible for listening to and acknowledging the suffering of every person in their care since failure to do so can increase suffering unnecessarily.”

“A compassionate response to a person’s comment about wanting to die may include spiritual care, a palliative approach to care, counselling or other services, depending on the reason for the suffering. This would also be an opportune time for the nurse to consult with other members of the health-care team to develop an inter-professional approach to end-of-life care, including relief of distressing symptoms and team support.” (National Nursing Framework on MAiD in Canada, CNA, 2017.)

A call to personal reflection: Consider a case where you are providing care; the person requests MAiD and follows through with this request; the person asks you, their Parish Nurse, as someone they trust, to sit with them and their family following the administration of the drug.

- Reflect and consider your response.
- What are you comfortable with in this situation? What response would honour your own values and be consistent with professional practice standards?
- How do you continue to walk alongside the person and their family, providing assessments, advocacy, comfort, encouragement, support and hope?
- If a transfer of care is necessary, consider how this may be accomplished without abandonment of the person and their family.

Complying with the Criminal Code:

With the June 2016 amendments to the Criminal Code, it remains an offence to advise or counsel a person toward choosing suicide or assisted death – the request for MAiD or to discuss MAiD must be initiated by the person without outside persuasion or coercion.

Parish Nurses are advised to make themselves familiar with Bill C-14 and the implications of discussing MAiD with persons in their care.

“When information on the lawful provision of medical assistance in dying is provided to a patient, health care providers must exercise extreme caution to ensure they do not recommend, incite, or encourage medical assistance in dying. If a patient chooses to make a request for medical assistance in dying, she/he must do so voluntarily and free from any external pressure. Medical assistance in dying must not be promoted or advocated under any circumstances, as this would constitute abetting or counselling suicide, an offence under the Criminal Code.” (Interim Guidelines for Medical Assistance in Dying, NWT, June 2016)

For additional information and questions and answers on legal aspects, see Medical Assistance in Dying: What Every Nurse Should Know @ <http://www.cnps.ca/> (Canadian Nurses Protective Society)

Nurse Practitioners:

Nurse Practitioners have additional responsibilities and expectations under Bill C-14. Parish Nurses who are also Nurse Practitioners are advised to **understand the legislation (both federal and provincial) thoroughly and to discern carefully** their role and responsibilities in MAiD.

Provincial and territorial guidelines specific to the role of the Nurse Practitioner are available in most jurisdictions of practice.

The current legislation for MAiD requires the ongoing consent of the person and confirmation of that consent throughout the process. The consent of the person must be confirmed just prior to receiving MAiD. A person may rescind their consent for MAiD at any time throughout the process.

Nurse Practitioners who have decided to Conscientiously Object should do so in accordance with nursing guidelines and employer policies.

Conclusion:

Provincial and territorial legislation, nursing practice standards and guidelines are the definitive guides to the practice of nursing in your jurisdiction.

Each Parish Nurse must act according to his/her own discernment and conscience in determining whether to participate or not to participate in requests for MAiD. These guidelines point the way toward

- important areas for reflection and discernment, and
- relevant resources to support your practice of Parish Nursing.

As Parish Nurses, we believe that we and those whom we accompany to the end of life, are part of a community of grace in which we are offered peace in the gospel of Jesus Christ. We receive the comfort of Christ's love through one another as we earnestly seek to follow his example and look to the hope of his resurrection.

As we continue to grapple with the issues of our time, which for healthcare providers and Parish Nurses in Canada, now include MAiD, may we remember first and foremost the promises of God in Christ Jesus.

"For none of us lives to ourselves; none of us dies to ourselves. If we live, we live to the Lord, and if we die, we die to the Lord. So then, whether we live or whether we die, we belong to the Lord." (Roman's 14:7-8)

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