



Temporary Modifications to MAiD Requirements GUIDANCE DOCUMENT

Given the current COVID-19 related restrictions and recommendations for physical distancing, CRNPEI is providing the following modifications to the practice of medical assistance in dying (MAiD) if desired. These modifications will ensure the safety of clinicians and the patients/families they serve while still preserving the integrity of the process for MAiD.

1. Staff witnessing of patient request forms for MAiD

While federal law does not allow clinical staff providing direct care to patients to be witnesses, there are often other staff members (in offices, in facilities) not directly involved in patient care. These staff members can be asked to act as witnesses for patients requesting MAiD. Persons requesting MAiD and living in facilities where a variety of staff are present should be aware of this option and encouraged to do so rather than relying on visitors to come in person and witness.

2. Explicit permission to allow virtual witnessing if needed

To reduce the health risks to patients, their families and volunteer witnesses, and in respect of the government plea to practice safe, social distancing, virtual witnessing of MAiD request forms is allowed and encouraged whenever possible. Witnesses can watch virtually (through a variety of videoconferencing software such as Facetime, Skype or Zoom) while a patient reads and signs the required forms. Witnesses may then fill out and sign their own copy of the form to then be collected (all 3 parts – 1 patient and 2 witnesses) by the prescriber/provider. This fulfills the essence of the witnessing requirement – to help safeguard against the possibility of coercion – while still ensuring the health and safety of all involved.

3. Allowing and/or encouraging both assessments of eligibility for MAiD to be completed virtually when possible

To reduce the health risks to health care practitioners posed by direct in-person contact with patients, and yet respect the legislation for two independent assessments, we are allowing the assessor-provider assessments to be done virtually. The provision of MAiD requires, by federal and provincial/territorial legislation, that one of the assessors confirm capacity and the explicit uncoerced request for assistance immediately prior to provision. Therefore, the clinician who provides MAiD will always have the requirement and the ability for in-person consultation and verification.