# Medical Assistance in Dying: What Nurses Need to Know

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#### **Questions?**

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- Subject Heading: Teleconference



#### **Objectives**

To enhance understanding of:

- the legislation
- the nurses role
- NP authority and accountability



#### **CNO Documents**

- Guidance on Nurses' Roles in Medical Assistance in Dying
- CNO <u>Standards and Guidelines</u> can be found on the website



#### **How Did We Get Here?**

- Carter, 2015
- Bill C-14
  - Nurse Practitioner
  - Nursing
  - Pharmacy



#### **Definitions**

Two forms of medical assistance in dying include:

- 1. Clinician-assisted
- 2. Client self-administered



### **Conscientious Objection**

Nurses who conscientiously object:

- must transfer the care of a client to another nurse or provider
- continue to provide nursing care, as per a client's care plan until a replacement caregiver is found



#### RN and RPN Role

- Must understand the eligibility criteria
- Must not administer:
  - medication that is intended to end life
- Can participate by:
  - providing nursing care
  - aiding an NP or Physician



#### **Nurse Practitioner Role**



## **NP Legal Authority**

For clients who have requested medical assistance in dying, the law allows NPs to:

- determine eligibility
- provide a second opinion
- administer a medication that will cause death
- provide a medication for the client to selfadminister



## When is the NP Required to Refer?

- NPs who do not personally provide medical assistance in dying must refer the client to another NP or physician who provides this service
- The NP may not be the appropriate provider if they:
  - conscientiously object
  - may not have the competence
  - are not able to order required controlled substances



## **Eligibility Criteria**

- The law states that the client:
  - must be at least 18 years of age
  - be capable of making decisions about their health
  - voluntarily request medical assistance in dying
  - give informed consent
  - have a grievous and irremediable medical condition
  - be eligible to receive health services funded by government in Canada



### **Consent and Capacity**

- The client must be capable throughout the process
- Advanced directives cannot be used
- Consent can not be provided by a substitute decision maker



## **Ensuring Safeguards are Met**

#### The law requires:

- a written request from the client signed by two independent witnesses
- a second opinion from an independent NP or physician
- mandatory waiting period



### **Providing Medical Assistance in Dying**

- Use evidence to select appropriate medications
- Refer to a physician if controlled substances are required
  - it is illegal for NPs to prescribe controlled substances
- Notify the pharmacist of the prescription's purpose
- Obtain consent from the client immediately before administering or providing the client with medication
- Report all deaths to the chief coroner only the coroner is authorized to complete the medical certificate of death



#### College Resources

- College documents:
  - Medical Assistance in Dying
  - Medication Practice Standard
  - Authorizing Mechanisms
  - Nurse Practitioner
  - Professional Standards
  - Therapeutic Nurse-Client Relationships
- College Website: <u>www.cno.org/tools</u>



#### **Contact Us**

- Practice support line
  - 416-928-0900 x 6397; Toll-free:1-800-387-5526
  - Email: PPD@cnomail.org
- Outreach Consultants: www.cno.org/prac/outreach



## **Questions?**







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