

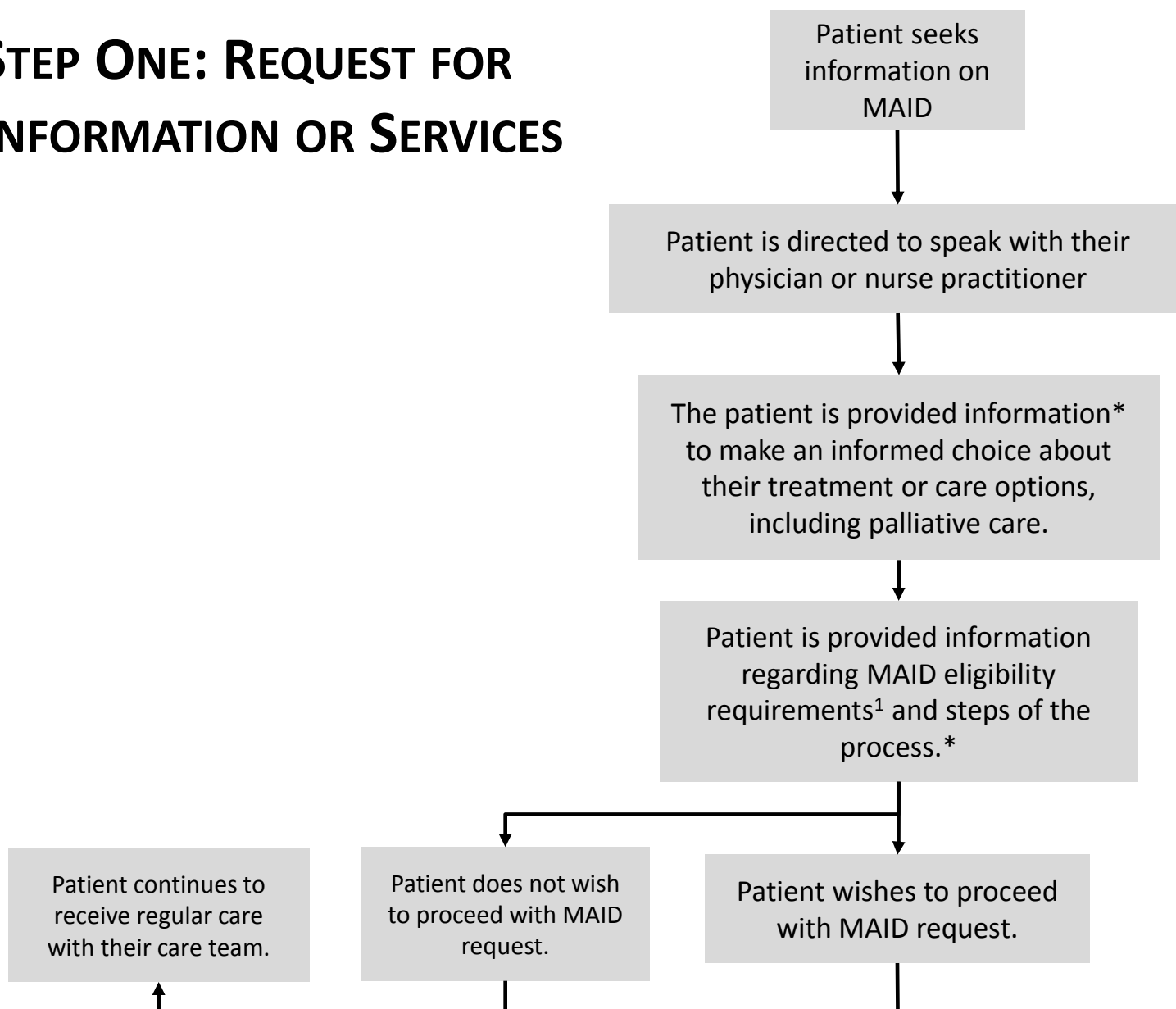
# Medical Assistance in Dying (MAID) in Saskatchewan

## Process Guide



This process map is a condensed guide intended to provide information on the requirements to be met and the process applicable to the provision of MAID. While it is intended to reflect legislative requirements, it does not replace or override the requirements of legislation, regulation, professional regulatory requirements or applicable health authority policies applicable to practitioners. Practitioners are required to comply with all such requirements in providing MAID.

### STEP ONE: REQUEST FOR INFORMATION OR SERVICES



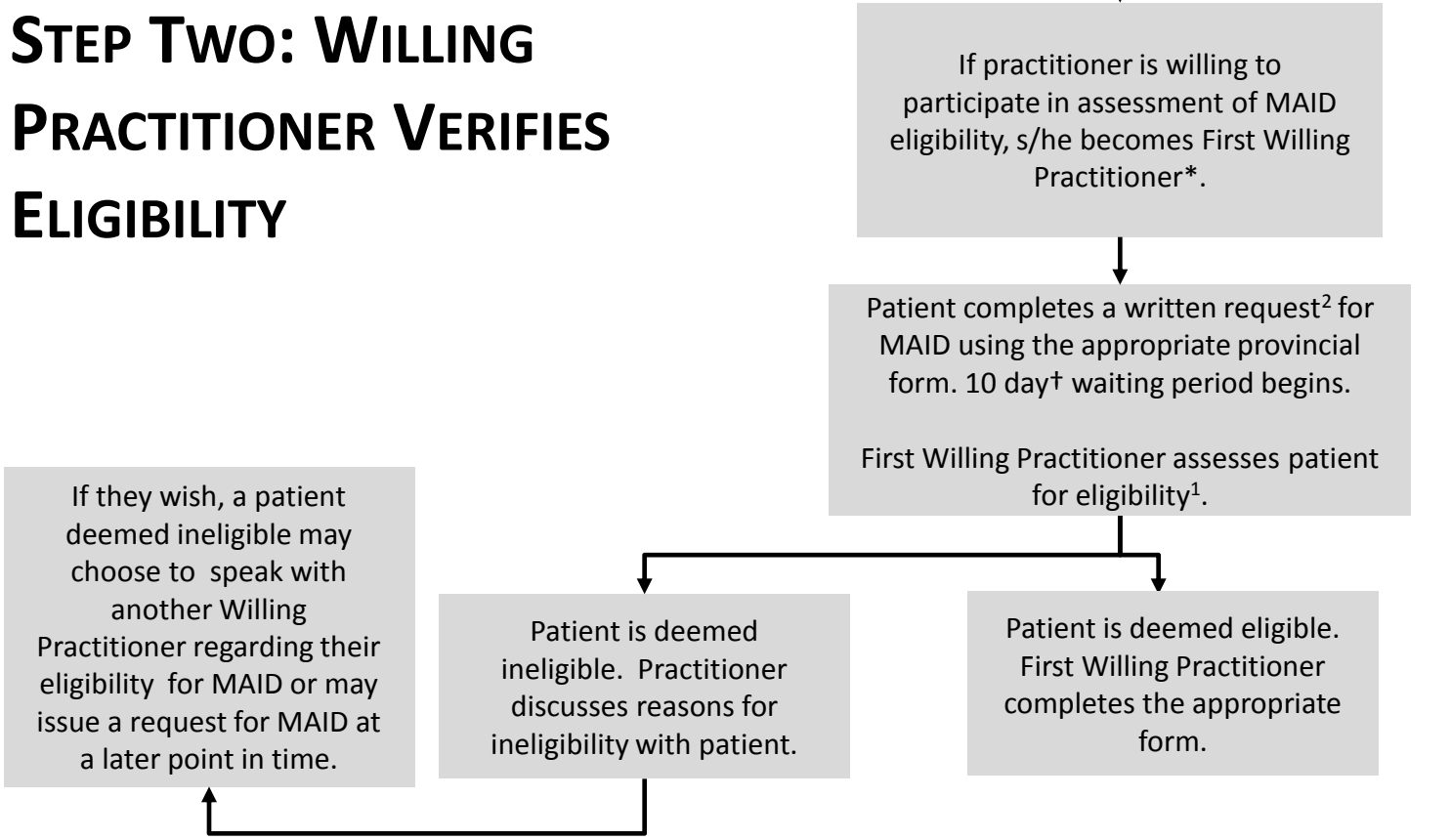
**i** Note: a MAID representative in each health region is available to provide assistance related to MAID requests and cases in Saskatchewan.

The regional MAID representative's role includes providing information on MAID and MAID processes to interested patients and healthcare providers as well as providing assistance in cases of practitioner conscientious objection.

**i** \*Specific requirements of practitioners are determined by their respective regulatory bodies. Practitioners with questions or concerns about MAID, including conscientious objection, should contact their regulatory body.

**i** †Federal legislation requires at least 10 clear days between the day on which the request was signed and the day on which the medical assistance in dying is provided. However, this waiting period may be shortened if both practitioners who assess the patient's eligibility and approve the request determine the patient's death or loss of capacity is imminent.

### STEP TWO: WILLING PRACTITIONER VERIFIES ELIGIBILITY



<sup>1</sup> Under federal legislation, a person may receive medical assistance in dying only if they meet all of the following criteria:

- a) They are eligible – or, but for any applicable minimum period of residence or waiting period, would be eligible — for health services funded by a government in Canada;
- b) They are at least 18 years of age and capable of making decisions with respect to their health;
- c) They have a grievous and irremediable medical condition;
- d) They have made a voluntary request for medical assistance in dying that, in particular, was not made as a result of external pressure; and
- a) They give informed consent to receive medical assistance in dying after having been informed of the means that are available to relieve their suffering, including palliative care.

A person has a grievous and irremediable medical condition only if they meet all of the following criteria:

- a) They have a serious and incurable illness, disease or disability;
- b) They are in an advanced state of irreversible decline in capability;
- c) That illness, disease or disability or that state of decline causes them enduring physical or psychological suffering that is intolerable to them and that cannot be relieved under conditions that they consider acceptable; and
- d) Their natural death has become reasonably foreseeable, taking into account all of their medical circumstances, without a prognosis necessarily having been made as to the specific length of time that they have remaining.

<sup>2</sup>As per federal legislation, if a patient is unable to sign and date the written request, another person – who is at least 18 years of age, who understands the nature of the request for medical assistance in dying and who does not know or believe that they are a beneficiary under the will of the person making the request, or a recipient, in any other way, of a financial or other material benefit resulting from that person's death – may do so in the person's presence, on the person's behalf and under the person's express direction. The request must be signed and dated before two independent witnesses who must also sign and date the request. A witness must either know the person or be provided with identification to establish that the person is who they claim to be. A proxy cannot also act as a witness.

As per federal legislation, any person who is at least 18 years of age and who understands the nature of the request for medical assistance in dying may act as an independent witness, except if they:

- a) Know or believe that they are a beneficiary under the will of the person making the request, or a recipient, in any other way, of a financial or other material benefit resulting from that person's death;
- b) Are an owner or operator of any health care facility at which the person making the request is being treated or any facility in which that person resides;
- c) Are directly involved in providing health care services to the person making the request; or
- d) Directly provide personal care to the person making the request.

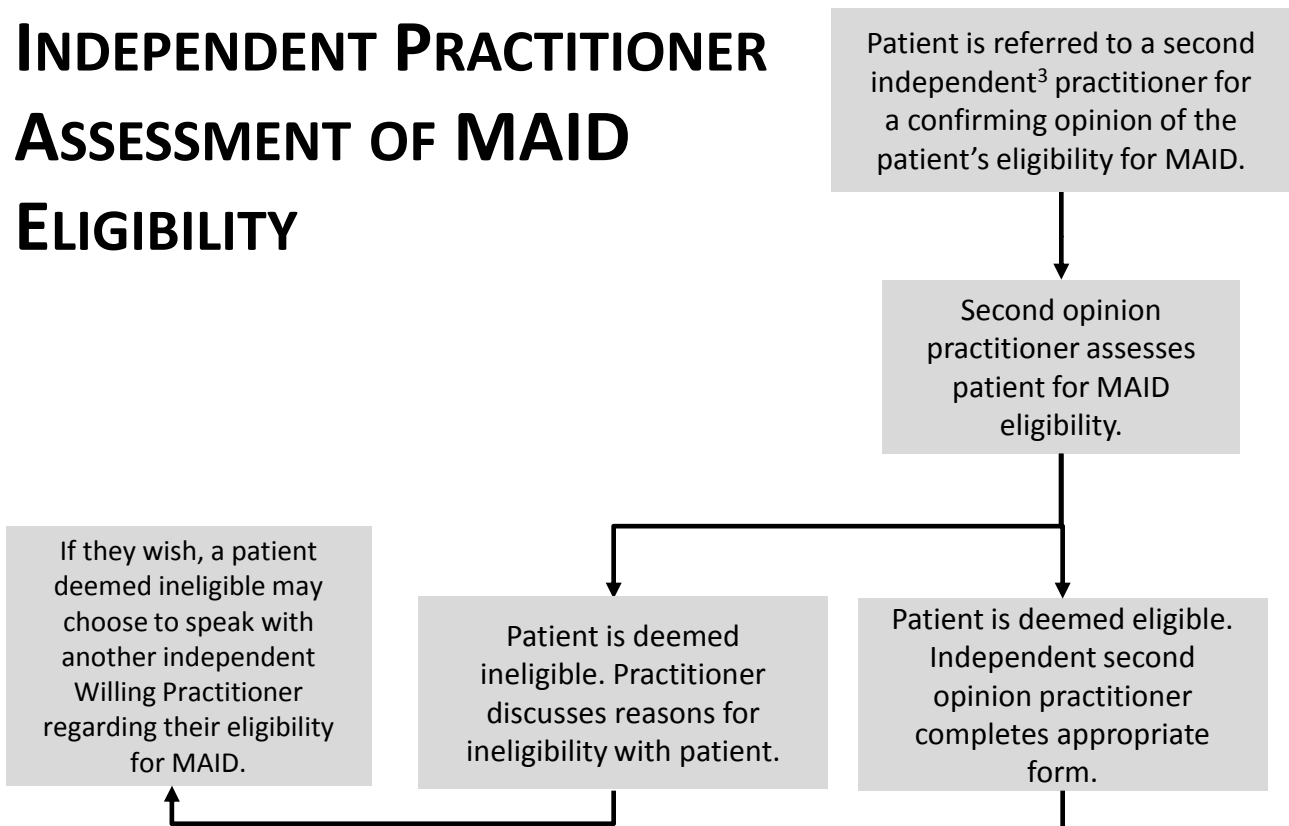
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### STEP THREE: SECOND INDEPENDENT PRACTITIONER ASSESSMENT OF MAID ELIGIBILITY

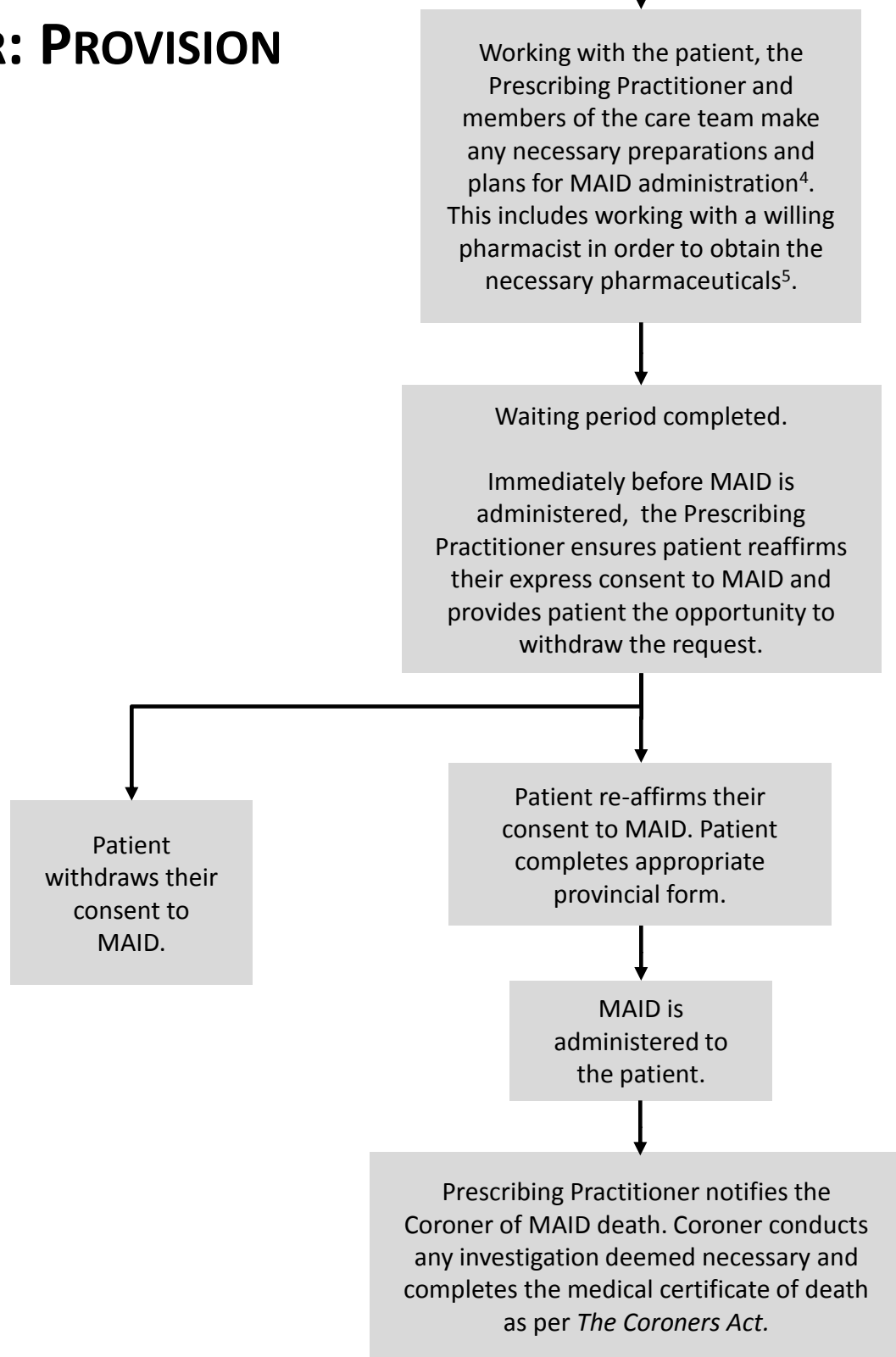


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<sup>3</sup>Federal legislation defines a practitioner as independent if they:

- (a) are not a mentor to the other practitioner or responsible for supervising their work; and
- (b) do not know or believe that they are a beneficiary under the will of the person making the request, or a recipient, in any other way, of a financial or other material benefit resulting from that person's death, other than standard compensation for their services relating to the request; and
- (c) do not know or believe that they are connected to the other practitioner or to the person making the request in any other way that would affect their objectivity.

### STEP FOUR: PROVISION OF MAID



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<sup>4</sup>Federal legislation defines medical assistance in dying as:

- (a) the administering by a medical practitioner or nurse practitioner of a substance to a person, at their request, that causes their death; or
- (b) the prescribing or providing by a medical practitioner or nurse practitioner of a substance to a person, at their request, so that they may self-administer the substance and in doing so cause their own death.

Patients should speak with their Prescribing Practitioner regarding their preferences and available options for MAID administration.

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<sup>5</sup>Under federal legislation, the medical practitioner or nurse practitioner who prescribes or obtains a substance for medical assistance in dying must inform the pharmacist that the substance is intended for that purpose before it is dispensed.