

Dietetics MAiD Q&A

Updated April 23, 2024

Q1: What is MAiD?

MAiD stands for Medical Assistance in Dying and is enforced by federal legislation for eligible Canadians.

Q2: Do dietitians have a role in discussing MAiD with clients?

*“Not all health care providers are comfortable with medical assistance in dying. Participating in MAiD may not be consistent with a provider’s beliefs and values. The federal legislation does not force **any person** to provide or help to provide medical assistance in dying”¹ .*

A patient’s request for MAiD may be verbal or written and may take any form (a discussion, an email, a text message, etc.)². However, to create a reporting requirement for physicians, nurse practitioners, and pharmacists, **a request for MAiD must be an intentional or explicit request seeking MAiD.**

Discussions about general information, eligibility for assessment, the MAiD process (including administration of the procedure) do NOT constitute an intentional request and can be communicated to the healthcare team in the same manner as any interdisciplinary communication would be done in your area.

Having said that, any conversation you have with a patient, whereby MAiD is discussed, should be documented per CDBC Standards of Record Keeping³. Refer to Q3 to further understand the gravity of appropriate documentation such that your conversation is not misinterpreted upon potential review. Standards that apply in this situation:

- 3k: *“The recommendations or orders made by the RD (including via medical directives as per facility requirements) for diet orders, nutrition supplements, tests and consultations requested to be performed by any other person.”*
- 3n: *“Particulars about discharge planning, including the referral of the client to another health professional, as applicable.”*
- 3r: *“Any relevant coordination of care and services to enable client-centered care”*

Documentation **should** include the course of conversation, the lack of “counselling” (see Q3), including the patient’s desire and impetus to request a MAiD assessment.

1. Government of Canada. Medical Assistance in Dying. <https://www.canada.ca/en/health-canada/services/medical-assistance-dying.html>, accessed January 17, 2023.
2. Government of Canada. Medical Assistance in Dying – Information for Health-Care Providers. <https://alpha.gov.bc.ca/gov/content/health/accessing->

[health-care/home-community-care/care-options-and-cost/end-of-life-care/medical-assistance-in-dying/information-for-providers](#), accessed on January 17, 2023.

3. CDBC Standards of Record Keeping.

Q3: Am I allowed to provide information to a patient at end-of-life (EOL) about all their care options, including MAiD?

Yes, even when a patient doesn't ask directly but expresses a lack of information, all members of a multi-disciplinary health care team are legally permitted to provide information on MAiD¹ (refer to Health Authority specific links within). This occurs in context of the situation and based on the Health Care Professional's (HCP) **assessment of a patient's knowledge and information needs** (i.e., what the patient in that situation is asking, expressing and needing.)

An HCP is listening to determine a patient's understanding of the situation and their understanding of what care options are available. As appropriate to the situation, an HCP provides information with empathy and non-judgement. That ability for HCPs to provide information is emphasized in an Act to amend the Criminal Code and to make related amendments to other Acts (medical assistance in dying) – Parliament of Canada, section 5.1²:

- *"no... health care professional commits an offence if they provide information to a person on the lawful provision of medical assistance in dying."*
- *"Counselling a person to commit suicide is a criminal offence. Per [section 22\(3\) of the Canadian Criminal Code](#)³ "counsel" means encourage, solicit or incite. Due to the criminal significance of the word "counsel," you need to be mindful in your work with clients not to encourage, counsel, advise, recommend or in any way seek to influence a client to end their life (i.e., an HCP does not promote MAiD, or try to convince a client to choose MAiD as an EOL option)."*
- *"The Criminal Code permits HCP, to provide information about the lawful provision of medical assistance in dying to a client. Clinicians can provide information, engage in discussions and educate their clients about medical assistance in dying."*

1. Government of BC. Medical Assistance in Dying. How can eligible people receive medical assistance in dying in B.C.? Health Authority specific links. <https://alpha.gov.bc.ca/gov/content/health/accessing-health->

[care/home-community-care/care-options-and-cost/end-of-life-care/medical-assistance-in-dying](#), accessed January 18, 2023.

2. Government of Canada. An Act to amend the Criminal Code and to make related amendments to other Acts (medical assistance in dying). <https://www.parl.ca/DocumentViewer/en/42-1/bill/C-14/royal-assent>, accessed January 17, 2023.
3. Government of Canada. Justice Laws Website. Criminal Code. <https://laws-lois.justice.gc.ca/eng/acts/C-46/>, accessed on January 17, 2023.

Q4: My patient has asked me for a MAiD assessment. How do I know that my patient is eligible to request this? How do I proceed?

It is not within your scope to determine the eligibility of a patient to receive MAiD. The request and following process, must be completed by a physician or nurse practitioner. The only form that dietitians (and other staff who are not physicians or nurse practitioners) should access and provide patients is [Form 1632](#): "Request for Medical Assistance in Dying".

Q5: If my patient cannot complete the Form 1632 "Request for Medical Assistance in Dying" independently, or requests that I help, can I offer this support?

You are able to help complete (be a proxy for) Form 1632: [Request for Medical Assistance in Dying \(gov.bc.ca\)](#). Alternatively, if your patient completes the form (or another person is the proxy), you can serve as the witness on that same document. You cannot be both the proxy AND the witness.

Q6: My patient has been assessed for and been approved (or declined) for MAiD. What impact does this have on my nutrition care plan?

The status of a MAiD application has no impact on your nutrition care plan. Care should not be compromised or stop because a patient has requested MAiD; rather it should continue to be adjusted based on best practice¹.

1. VCH Ethics Education Forum. November 16, 2022: Medical Assistance in Dying and Mental Health. <https://one.vch.ca/dept-project/ethics/Pages/ethics-education.aspx>, accessed November 16, 2022. Requires log in

Q7: What resources would aid my additional learning needs?

Government of Canada – [Mental Health and MAiD](#).

Government of BC – [Forms associated with the MAiD process](#) (including Form 1632)

Government of BC – [Medical Assistance in Dying](#) – General information

- Who is eligible to be assessed?
- Who can be a witness?
- Links to each Health Authority resources
- [Specific to BC health care professionals](#)

PHSA – [PHSA – Medical Assistance in Dying](#)

VCH/PHC [Serious Illness Conversation Guide](#)