



To: All staff and physicians, Executive Medical Directors, Chiefs of Staff, Community Medical Directors, Vice Presidents and Chief Executive Officer

From: Dr. Jeremy Etherington, Vice President Medicine & Quality

Date: February 19, 2016

RE: Physician-Assisted Dying: Guidance for staff and/or physicians approached by patients, residents, and clients seeking assistance and advice

Summary:

Staff and/or physicians may be approached by patients, residents, and clients with questions about Physician-Assisted Dying. The following (in bold) is provided by Interior Health Medicine & Quality as elements of a response to deal sensitively with the question yet avoid the concerns that staff members would be viewed as commenting in contravention of the Criminal Code:

- **The criminal prohibition against assistance in dying remains in effect until June 6, 2016**
- **Please let's discuss concerns with your care plan and explore alternatives and additional supports; however, I am not able to provide any advice on assistance in dying**
- **However, if your (i.e. the client's) concerns are urgent you may wish to consult with legal counsel. (As of February 6, 2016, an exemption from criminal liability may possibly be granted on application on to the BC Supreme Court.)**
- **IH will be working with other agencies and government on a system to address clients' requests once Physician Assisted Dying (PAD) becomes legal on June 6 or if an exemption is granted before that time**

If you consider that a patient / resident / client may be considering an application to the Court please advise your Manager and contact Patty Garrett, Director Risk Management (250 870-4666) so that we can prepare for the request if the exemption is granted. Dr. Harsh Hundal, Medical Director Community and Residential has been appointed as the health authority lead on this issue and will be working with the Ministry of Health (MoH) and other health authority leads as required by the MoH. The MoH has indicated that a provincial working group will be struck to "facilitate a provincial approach to policy development and to further our understanding of the range of issues and barriers that must be addressed throughout the implementation process." The MoH has suggested the working group will report to the Standing Committee on Health Services and Population Health.

Background:

On February 6, 2015, the Supreme Court of Canada (SCC) in *Carter v. Canada* struck down the provisions in the Criminal Code prohibiting physician-assisted dying (PAD). However, the SCC suspended the decision for a period of 12 months. On January 15, 2016 the SCC extended the suspension for an additional four months from February 6, 2016 to June 6, 2016.

The SCC decision clarifies that PAD will become legal concerning "a competent adult person who clearly consents to the termination of life and has a grievous and irremediable medical condition (including an illness,

disease or disability) that causes suffering that is intolerable to the individual.” The decision allows both assisted suicide, where the patient is provided assistance in intentionally ending his or her own life, and voluntary euthanasia, where a physician directly administers a lethal dose of medication in accordance with the wishes of the patient. The SCC also stated that “nothing in the declaration of invalidity which we propose to issue would compel physicians to provide assistance in dying.”

The SCC, in its decision to extend the suspension to June 6, 2016 also granted an exemption to the suspension. The exemption permits individuals who wish to seek PAD in accordance with the criteria established by the SCC in *Carter* to apply to the Supreme Court of British Columbia for approval relief during the four-month extension.

Further guidance is available from the College of Physicians and Surgeons of British Columbia and the College of Registered Nurses of British Columbia. Links are provided:

https://www.crnbc.ca/crnbc/Announcements/2016/Pages/Physician_assisted_dying.aspx

<https://www.cpsbc.ca/files/pdf/IG-Physician-assisted-Dying.pdf>

Further updates will be provided and work is beginning on a central communications hub via the InsideNet. Please distribute this memo widely.