FACT SHEET

IT'S YOUR LIFE. IT'S YOUR CHOICE.

DYING WITH DIGNITY CANADA

Dementia and medical assistance in dying (MAID)

Medical assistance in dying (MAID) has been a legal option for qualifying people across Canada since 2016. To access MAID, one must be approved by two independent nurse practitioners or physicians, and must meet the eligibility criteria found within the law.

Can someone with dementia access MAID?

YES, in some cases, a person with dementia or another capacity-eroding condition can access MAID. The most important thing to know is that a person must have decision-making capacity during their eligibility assessments. If someone has already lost capacity and is not regaining that capacity, then MAID is no longer an option for them.

What does it mean to "have capacity?"[1]

CAPACITY, in a medical sense, means that a person can do all the following:

- Understand information
- Appreciate the information in relation to potential medical treatments and understand the repercussions and benefits of having or not having those treatments
- Reason through different treatment options
- Communicate their decision regarding treatment

It is important to note that communicating one's decision does not mean that a person must communicate verbally. There are other ways that this could happen, like with the help of communication aids.

Capacity is also task specific. A person who can no longer balance their cheque book may still be able to give medical consent. Clinicians would determine capacity during an assessment.

[1] *camapcanada.ca/wp-content/uploads/2022/02/Capacity-assessment.pdf*

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How is a patient's capacity determined?

Multiple assessments – which may include specific capacity assessments from specialists – may be required due to the fluctuating capacity of some individuals with dementia. It is important to schedule the assessments during a time of day when the patient is in a comfortable, relaxed state, and when they are most lucid. Ensuring the patient's comfort is critical during these assessments.

Some considerations for time of day include:

- Has the person eaten?
- Have they consumed water, or are they dehydrated?
- Have they taken their medication?
  - Some medications may make someone sleepy, while others may help a person to be more aware and interactive
- Are they groggy when they first wake up?
  - If so, an afternoon appointment might be best
- Do they tire as the day goes on?
  - If so, mornings might be better

What if a person with dementia does not have capacity? Can their loved one request MAID for them?

The law requires that you have capacity during your eligibility assessments. This is the case for everyone who accesses MAID.

It is not possible for a loved one to request MAID on behalf of another person, nor is it possible for a request for MAID in a living will or Advance Directive be honoured. If someone has already lost capacity and is not regaining that capacity, then MAID is no longer an option for them.*

Bill C-7 came into effect in March 2021 and brought about some positive changes when it comes to capacity on the day of MAID. Prior to March 2021, anyone accessing MAID was required to give final consent immediately before accessing MAID (i.e. immediately before the medications were given and the person died). With the introduction of Bill C-7, however, people who are considered to have a natural death that is "reasonably foreseeable" and who are at risk of capacity loss now have the option to use a **waiver of final consent**. This allows MAID to proceed in some cases even when a person does not have capacity on the day of their provision.

*On October 30, 2024, Quebec became the first province in Canada to allow advance requests for MAID. Learn more at ***quebec.ca/en/health/health-system-and-services/end-of-life-care/medical-aid-in-dying/advance-request-medical-aid-dying***

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What are the eligibility requirements for MAID?

To be eligible for MAID, several requirements must be met:

- Be eligible for government-funded health insurance in Canada
- Be 18 years of age or older and have decision-making capacity
- Have a grievous and irremediable condition*
- Have made a voluntary request for MAID that was not a result of external pressure
- Give informed consent to receive MAID after having received all information needed to make this decision, including a medical diagnosis, available forms of treatment, and options to relieve suffering (including palliative care)

*To have a "grievous and irremediable medical condition," a person must:

- Have a serious illness, disease, or disability
- Be in an advanced state of decline that cannot be reversed
- Experience unbearable physical or mental suffering from an illness, disease, disability, or state of decline that cannot be relieved under conditions that the person considers acceptable

How does a waiver of final consent work?

The waiver of final consent is a written and signed agreement between the patient and the MAID provider (nurse practitioner or physician), allowing the provider to move forward with MAID should the patient lose capacity on or before the date on which they have chosen to receive MAID. MAID can only happen via a waiver on or before the date that is listed on the form, not after.

Only the specific nurse practitioner or physician who signed the form is able to provide MAID if the person loses capacity.

Is the waiver of final consent the same as an advance request?

NO, these are two different concepts. Waivers of final consent are permitted under the MAID law, while advance requests are not. This table provides more information on the differences:

Waiver of Final Consent	Advance Request
• Only available for those who have gone through the MAID process, including the two (or more) eligibility assessments and the filling out of a request form • Only available for those whose natural deaths are considered reasonably foreseeable and who are at risk of capacity loss • Waivers must include a specific date. MAID can only happen on or before that date	• **NOT** currently available, except in Quebec • A written declaration that MAID may be administered if: – The individual has lost capacity to consent – There are enduring conditions (loss of autonomy; intolerable suffering) related to their serious and incurable illness, disease, or disability – These 'triggers' are clearly identified in the declaration, have been ascertained by a MAID agent, and can be observed by the nurse practitioner or physician

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I have early dementia. What steps should I take if I'm interested in receiving MAID in the future?

It is highly recommended that you speak to your health care providers about your preference for MAID and have conversations documented. Some people may wish to contact their local MAID team early in their diagnosis to discuss their future wishes and see when an assessment might be appropriate, if the patient does wish to go ahead. Applying for – and being assessed for – MAID does not mean that a person must have MAID within a certain timeframe. Some people will go through the process and then decide to have MAID many months, or even years, later. A person can change their mind at any time.

www.**dyingwithdignity**.ca

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HELPFUL RESOURCES

Dying With Dignity Canada's Support team can answer general questions about MAID or provide navigation support.

support@dyingwithdignity.ca

1-844-395-3640

- **MAID navigation and forms by province/ territory**
- **FAQs about MAID**
- **Webinar: Dementia, MAID, and other end-of-life options**
- **Webinar: The future of Alzheimer's and end-of-life care in Canada**
- **Webinar: At the intersection of MAID and dementia**

Download these resources and more at dyingwithdignity.ca

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