



# *Understanding Medical Assistance in Dying (MAiD)*

For individuals and families



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*This document is part of a larger collection of online resources which includes articles, infographics, learning modules, and videos of healthcare providers, individuals and families.*

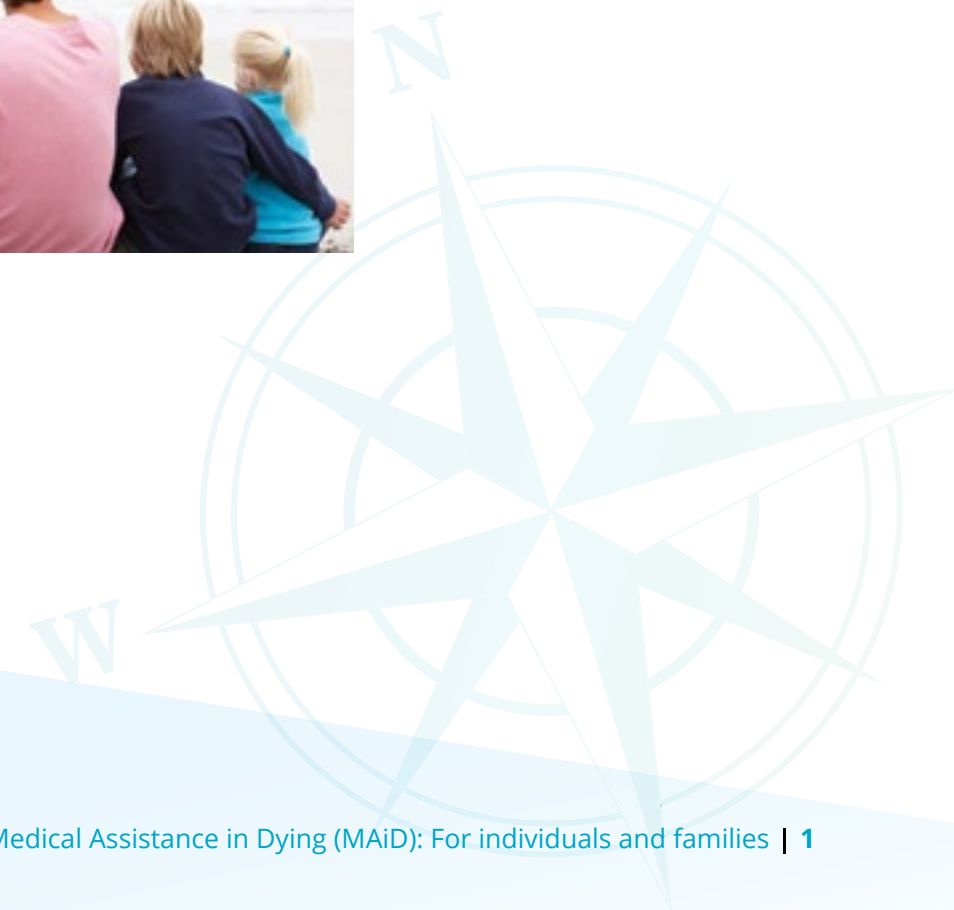
*Visit: [Virtualhospice.ca/MAiD](https://Virtualhospice.ca/MAiD)*

## Introduction

*In June 2016, the Government of Canada passed legislation that legalized Medical Assistance in Dying (MAiD) for competent adults. Amendments to the law were made in March 2021. The law sets out processes to access a medically assisted death, as well as criteria individuals must meet to be eligible.*

*This document outlines information about MAiD in Canada and provides answers to some common questions. It is intended to help people understand MAiD and navigate the processes involved. There may be changes in law, process, or practices after its publication. The most up-to-date information can be found on the Government of Canada website. Although every effort will be made to update this document as new information becomes available, we encourage you to check with your local MAiD office (see: Provincial and territorial contact information, page 12).*

*[Government of Canada MAiD website](#)*



## Understanding MAiD

### What is medical assistance in dying (MAiD)?

MAiD is a legal option in Canada for adults who meet specific criteria set out in law. If these conditions are met, a doctor or nurse practitioner can provide medications that then cause the death of the person, at that person's request. MAiD is available in Canada to anyone eligible for government funded health services. There is no cost to the person or family.

### Why do people consider MAiD?

MAiD is relatively new in Canada and data around why people choose MAiD is emerging. Early reports in Canada list the most common reasons individuals requested MAiD as follows:

- Loss of ability to engage in meaningful life activities.
- Loss of ability to perform activities of daily living.
- Inadequate control of pain or other symptoms.
- Concern that symptoms won't be well controlled.
- Loss of dignity.



### Definitions:

**MAiD practitioner** – a medical doctor or nurse practitioner who is either a MAiD assessor or MAiD provider or both.

**MAiD assessor** – a medical doctor or nurse practitioner who does assessments, sometimes called eligibility reviews, to determine if an individual meets the requirements set out in law to have MAiD.

**MAiD provider** – a medical doctor or nurse practitioner who prescribes and/or administers medications to an individual who meets the criteria for MAiD. Not all provinces allow nurse practitioners to be MAiD providers.

**Family** – includes immediate, biological, adopted, and chosen families and is meant to be inclusive of the important people in the person's life.

**Intravenous (IV)** – a small needle that is inserted into a vein, usually in the arm, wrist, or hand to give medications directly into the bloodstream.

### Is MAiD available in my community?

MAiD is legal in every province and territory but there may be differences in availability and specific processes across the country. A local contact person or telephone service will help individuals connect with MAiD providers/teams (see: Provincial and territorial contact information, page 12).

### Is MAiD different from palliative care?

Yes. MAiD is when a doctor or nurse practitioner provides medications that cause death. This can only be done if a person has asked for an assisted death and meets all eligibility criteria. The death is planned for a specific day, time, and place.

Palliative care focuses on providing comfort, symptom management, support (emotional, spiritual, cultural) and achieving the best quality of life possible. Palliative care provides support and healthcare throughout advanced illness until death, as well as grief support.

### Do I need to make a choice between MAiD and palliative care?

No, you do not need to make a choice. If a person is planning to have MAiD, they can continue to receive palliative care. Likewise, if they are receiving palliative care, they are entitled to explore the idea of an assisted death or request MAiD.

### Is MAiD different from suicide?

Yes, MAiD is different from suicide. Suicide is a self-inflicted death by a person who is in crisis, most often carried out alone. Reasons people die of suicide are complex and involve many factors, including mental illness. It is usually unexpected and is often a shock to the person's family and friends.

MAiD is a legal option in Canada for adults to have medical help to die if they meet strict criteria set out by law. There are specific processes that must be followed (see: Eligibility, page 4; Application process, page 5; Capacity and consent, pages 6-9). In most cases, those closest to the person are aware of their decision to have a medically assisted death.

### What if my healthcare provider objects to MAiD?

If a healthcare provider is not comfortable with MAiD, or does not agree with it, they are not required to participate. Legally, medical doctors and nurse practitioners are required to ensure anyone asking about MAiD has access to information and MAiD providers. You can always make the call yourself to the MAiD contact in your province or territory (see: Provincial and territorial contact information, page 12) or ask a family member or friend to call on your behalf.

In some provinces/territories, medical doctors and nurse practitioners have a "duty to refer", and in others they have a "duty to transfer care" to another provider if they personally object to MAiD. Regardless of a person's desire to consider or have MAiD, healthcare providers must continue to provide ongoing care, including palliative care.

## Eligibility

### What are the eligibility requirements for MAiD?

MAiD has specific requirements that must all be met for a person to be eligible. A person must:

- Be eligible for government-funded health services in Canada (or would be eligible following a minimum period of residence or waiting period).
- Be at least 18 years of age and capable of making their own healthcare decisions.
- Have a grievous and irremediable medical condition\*.
- Make a voluntary request for MAiD, free of outside pressure or influence.
- Provide informed consent to receive MAiD (see: Capacity and consent, pages 6 and 7).

### Is it possible for someone with dementia to have MAiD?

Yes. If a person with dementia meets all the eligibility criteria, including being able to make their own healthcare decisions, that person can have MAiD.

### Is it possible for a person with an intellectual disability to have MAiD?

Yes. If someone has an intellectual disability, they can have MAiD if they meet all the eligibility criteria. This includes being able to provide informed consent (see: Capacity and consent, pages 6 and 7). Whether or not a person is able to consent to MAiD depends in part on the nature and severity of the intellectual disability.

### Is it possible for a person with a mental illness to have MAiD?

If someone has a mental illness as their **only** medical condition, they are **not** currently eligible to seek medical assistance in dying. This will change in March of 2023. At that time a person whose sole medical condition is a mental illness may become eligible for MAiD but may be subject to additional procedural safeguards.

If a person with a mental illness has another serious and incurable (non psychiatric) illness, disease or disability and they meet all the eligibility requirements, including being able to make their own healthcare decisions, they could have MAiD.

## Application process

### How does someone apply for MAiD?

If a person is considering MAiD, the first step is to speak to their healthcare provider or their local MAiD office (see: Provincial and territorial contact information, page 12). The MAiD office will explain and assist with the application process.

The person must complete a MAiD request form. If the person is unable to write, another adult, can sign the request form under the person's direction. This person must be at least 18 years of age, understand what it means to have MAiD, and not knowingly benefit from the person's death.

The request form must be signed and dated in front of a witness\*. The witness also signs and dates the form.

Two independent MAiD practitioners must each complete an assessment for eligibility. Although it is not required, it can be very helpful, with the person's consent, to have family present at the assessments. Other MAiD team members such as a nurse or social worker may also be present. At some point during the assessments, the MAiD practitioner will also meet with the person alone to help ensure their request is voluntary.

#### \* The witness

- Must be at least 18 years of age and understand what it means to request MAiD.
- **Cannot** knowingly benefit from the person's death.
- **Cannot** be an owner or operator of a healthcare facility where the individual lives or is receiving care.
- **Cannot** be an unpaid caregiver.
- **Can** be a paid health or personal care worker.

*“A person's request for MAiD must be free of outside pressure or influence.”*

#### \* What is a grievous and irremediable medical condition?

According to the law, a “grievous and irremediable” medical condition exists if a person has ALL of the following:

- A serious and incurable illness, disease, or disability.
- Is in an advanced state of decline that cannot be reversed.
- Has unbearable physical or mental suffering from the illness, disease, disability, or decline, that cannot be relieved in a way the person finds acceptable.

The incurable illness, disease or disability does not need to be fatal or terminal, but there are different processes that must be followed depending if natural death is reasonably foreseeable, or not.

## Capacity and consent

### What is capacity?

The ability to understand and appreciate the information needed to make a decision is known as **capacity**. A person can have the capacity to make a medical decision for themselves, like MAiD, but may not be able to balance their cheque book.

### What is informed consent for MAiD?

The person requesting MAiD must have capacity to give permission or agree to an assisted death after receiving all the information needed to make this decision. The person must have the ability to understand:

- Their medical diagnosis.
- All treatment options.
- Options to relieve suffering, including palliative care.
- The information they have been given about having MAiD.
- That MAiD will cause their death.

### Does the person have to be able to speak or write to request or consent to MAiD?

No. The MAiD practitioners must take reasonable steps to assist the person to communicate such as pointing, blinking, or tapping.

If the person is unable to write, another adult, can sign the written request and the consent forms under the person's direction. This person must be at least 18 years old, understand what MAiD is, and not knowingly benefit from the person's death.

### Should medications be stopped that might impact the ability to consent?

In general, people are encouraged to keep taking their medications to stay as comfortable as possible. If there is concern about how medications may impact capacity, this should be discussed with the MAiD practitioners.

### Does consent have to be provided immediately before having MAiD?

There are differences when the person's natural death is reasonably foreseeable, and when it is not.

#### If natural death is reasonably foreseeable:

Just before MAiD is provided, the person must be given the opportunity to withdraw their request and they must give consent to have MAiD. An exception to this requirement is possible (see: Waiver of Final Consent).\*

#### If natural death is not reasonably foreseeable:

Just before MAiD is provided, the person must be given the opportunity to withdraw their request and they must give consent to have MAiD. A Waiver of Final Consent is not allowed if death is not reasonably foreseeable.

One other exception exists to providing consent immediately prior to MAiD and that is with a self-administered assisted death (via an oral medication provided). Prior to self-administration, the person can give an 'advanced consent' to 'IV rescue'. The MAiD provider is given permission to give medications through IV if the oral administration did not work as anticipated. Self-administration is not an option in Quebec and is very rare in Canada.



*... a person can have the capacity to make a medical decision such as a request for an assisted death, while they may not have the capacity to balance their cheque book.*

#### \* Waiver of Final Consent

The requirement for giving final consent just before MAiD is provided may be waived, **only if:**

- The person's natural death is reasonably foreseeable.

#### And

While the person was able to make healthcare decisions the following occurred:

- The person requested, was assessed, approved to receive MAiD, and has chosen the date to have MAiD.
- One or both of the MAiD practitioners indicated that the person is at risk of losing capacity to provide final consent.
- The person completed a Waiver of Final Consent form with their MAiD practitioner. This form gives consent in advance to have MAiD on or before a chosen date if capacity is lost.

### What else is different in the application process when natural death is not reasonably foreseeable?

- One of the two MAiD practitioners who complete the assessments must have expertise in the condition that is causing the person to suffer, or they must consult with a practitioner who has that expertise. Expertise is not necessarily determined by specialty designation or certification but can be obtained through education, special interest, training, or clinical experience.
- The eligibility assessments must take a minimum of 90 days.\*
- The person must be informed of the available ways to relieve their suffering, including counselling services, mental health and disability support services, community services, and palliative care, and they must be offered consultations with relevant professionals and services.
- The MAiD practitioners must agree that the person has given serious consideration to the means available to relieve their suffering.

The federal government has outlined the above processes for requesting MAiD. Provinces and territories will also have their own specific practices and mandatory guidelines.

\* In some situations, if both assessors agree that the person is at risk of imminent loss of capacity, the person may be able to have an assisted death in less than 90 days. Regardless, if the person's natural death is not reasonably foreseeable, they must be able to give consent immediately prior to receiving MAiD.

### What are the alternatives if the person isn't eligible for MAiD?

If one of the MAiD assessors concludes that the person does not meet the eligibility criteria, the person can:

- Request another opinion.
- Continue with their ongoing treatment to manage the disease.
- Continue with palliative care.
- Stop any or all treatment.



### Do family members need to be consulted or agree with the choice to have MAiD?

No, family does not need to agree with the person's decision, nor be involved. It is up to the person whether to consult or inform family or friends. This is the same as other healthcare decisions.

MAiD practitioners may explore the reasons a person is choosing not to tell family or friends. They may be able to help talk through issues with family or friends or refer to counselling or other resources.

### Can a person who has been approved for MAiD change their mind? Can they cancel it?

Yes, they can change the date or cancel the request at any time, including right before the life-ending medications are given.

### If someone is approved for MAiD, how soon will it happen?

It is important to have conversations early on with the MAiD providers about wishes for when and where the person would like to have MAiD. Scheduling and planning may take some time.

How soon someone can have MAiD depends on whether their death is expected. It also depends on whether they may be at risk of losing capacity to consent (See: Capacity and consent, pages 6 to 8).

If their natural death is in the foreseeable future, they can have MAiD any time after they are approved.

If their natural death is **not** in the foreseeable future, they can set a date with the MAiD providers once the assessments are completed and it has been determined that they are eligible to have MAiD. Keep in mind that these assessments must take a minimum of 90 days from when the assessment by one of the MAiD practitioners begins.

Even if approved, a person never has to have MAiD. Some people find it comforting to know that they have the option available to them if they want it, even if they never choose MAiD.

## A medically assisted death

### How is MAiD carried out?

Once approved for an assisted death, the MAiD provider will work with the person to arrange the date, time, and location.

Although it is legal in Canada to have a self-administered medically assisted death (where the person takes prescribed medication by mouth themselves), this is still rare in Canada. In many provinces and territories, the only type of assisted death that is readily available is where the MAiD provider gives the medications through a needle in a vein (IV). Self-administered MAiD is not available in Quebec.

There are three main medications that are given by IV:

1. The first drug relaxes the person and makes them fall asleep. Sometimes the person will mumble something that can't be understood. Some people snore or yawn or take one or two big breaths.
2. The second drug puts them into a deep coma. Often the mouth will fall open as the jaw muscles relax.
3. The third drug stops their breathing and heart, and results in death. Because they are in a coma, they are not aware of their heart and lungs stopping. The person does not lose control of their bowel or bladder.

Although MAiD providers explain to those present what to expect, some people have said they were surprised by how quickly the person died. Medically assisted deaths have been described by many families and others who have been present as peaceful, but sad.

## Setting

### Where can a medically assisted death occur?

A person can have MAiD at home or in a healthcare facility such as a hospital or long-term care home. MAiD can be provided at an alternate location agreed to by the MAiD provider. As much as possible, the location where MAiD takes place is the person's decision. In some cases, individuals must transfer to another facility to have MAiD.

### Can music be played, or can there be special readings?

Typically, there is a lot of flexibility around special wishes like music, pictures, smudging, readings, or prayers at the time of the medically assisted death. Talk to the MAiD provider about what is possible.

## Other considerations

### Does having MAiD affect life insurance policies?

No. The Canadian Life and Health Insurance Association has stated that insurers will pay out policies for people who have MAiD, as long as the legal conditions for the medically assisted death are fulfilled.

You may want to contact your pension or life insurance provider for specific information.



### Can a person who has MAiD be an organ donor?

Yes, if they meet the eligibility criteria for organ donation. As with all death, the ability to donate depends on a number of factors, especially the underlying illness. Some people are able to donate their tissue and/or organs after MAiD, although organ donation may impact the location and timing of MAiD. Tissue donation is possible in many settings. For more information, contact the local organ and tissue donation team.

## Provincial and territorial contact information

Province/Territory	Contact Information															
<b>British Columbia</b>	<p><b>Provincial Health Services Authority MAiD Office</b> <a href="#">↗</a></p> <ul style="list-style-type: none"> <li>Phone: 1 844-851-MAID (6243)</li> <li>Email: <a href="mailto:maidcco@phsa.ca">maidcco@phsa.ca</a></li> </ul> <p><b>Regional Contacts</b></p> <table border="0"> <tr> <td>• Fraser Health</td> <td>Phone: 604 587-7878</td> <td>Email: <a href="mailto:mccc@fraserhealth.ca">mccc@fraserhealth.ca</a></td> </tr> <tr> <td>• Interior Health</td> <td>Phone: 1 844 469-7073</td> <td>Email: <a href="mailto:maid@interiorhealth.ca">maid@interiorhealth.ca</a></td> </tr> <tr> <td>• Island Health</td> <td>Phone: 1 877 370-8699</td> <td>Email: <a href="mailto:maid@viha.ca">maid@viha.ca</a></td> </tr> <tr> <td>• Northern Health</td> <td>Phone: 250 645-8549</td> <td>Email: <a href="mailto:maid@northernhealth.ca">maid@northernhealth.ca</a></td> </tr> <tr> <td>• Vancouver Coastal Health</td> <td>Phone: 1 844 550-5556</td> <td>Email: <a href="mailto:assisteddying@vch.ca">assisteddying@vch.ca</a></td> </tr> </table>	• Fraser Health	Phone: 604 587-7878	Email: <a href="mailto:mccc@fraserhealth.ca">mccc@fraserhealth.ca</a>	• Interior Health	Phone: 1 844 469-7073	Email: <a href="mailto:maid@interiorhealth.ca">maid@interiorhealth.ca</a>	• Island Health	Phone: 1 877 370-8699	Email: <a href="mailto:maid@viha.ca">maid@viha.ca</a>	• Northern Health	Phone: 250 645-8549	Email: <a href="mailto:maid@northernhealth.ca">maid@northernhealth.ca</a>	• Vancouver Coastal Health	Phone: 1 844 550-5556	Email: <a href="mailto:assisteddying@vch.ca">assisteddying@vch.ca</a>
• Fraser Health	Phone: 604 587-7878	Email: <a href="mailto:mccc@fraserhealth.ca">mccc@fraserhealth.ca</a>														
• Interior Health	Phone: 1 844 469-7073	Email: <a href="mailto:maid@interiorhealth.ca">maid@interiorhealth.ca</a>														
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• Northern Health	Phone: 250 645-8549	Email: <a href="mailto:maid@northernhealth.ca">maid@northernhealth.ca</a>														
• Vancouver Coastal Health	Phone: 1 844 550-5556	Email: <a href="mailto:assisteddying@vch.ca">assisteddying@vch.ca</a>														
<b>Alberta</b>	<p><b>Alberta Health Services: Medical assistance in dying</b> <a href="#">↗</a></p> <ul style="list-style-type: none"> <li>Phone: 811 (Health Link)</li> <li>Email: <a href="mailto:maid.careteam@ahs.ca">maid.careteam@ahs.ca</a></li> </ul>															
<b>Saskatchewan</b>	<p><b>Saskatchewan Ministry of Health: Medical assistance in dying</b> <a href="#">↗</a></p> <ul style="list-style-type: none"> <li>Phone: 800 667-7766 (toll-free) in Saskatchewan</li> <li>Email: <a href="mailto:info@health.gov.sk.ca">info@health.gov.sk.ca</a> (for general inquiries)</li> </ul>															
<b>Manitoba</b>	<p><b>Shared Health Manitoba MAiD Services</b> <a href="#">↗</a></p> <ul style="list-style-type: none"> <li>Phone: 204 926-1380</li> <li>Email: <a href="mailto:maid@sharedhealthmb.ca">maid@sharedhealthmb.ca</a></li> </ul>															
<b>Ontario</b>	<p><b>Ontario Ministry of Health Care Coordination Service: Medical assistance in dying</b> <a href="#">↗</a></p> <ul style="list-style-type: none"> <li>Phone: 1 866 286-4023</li> <li>TTY: 1 844 953-3350</li> </ul>															
<b>Quebec</b>	<p><b>Government of Quebec: Medical aid in dying</b> <a href="#">↗</a></p> <ul style="list-style-type: none"> <li>Phone: 418 644-4545 for the Québec City region</li> <li>Phone: 514 644-4545 for the Montreal region</li> <li>Phone: 877 644-4545 (toll-free) for the rest of Quebec</li> </ul>															
<b>New Brunswick</b>	<p><b>Horizon Health Network: Medical assistance in dying</b> <a href="#">↗</a></p> <p><b>Vitalité Health Network: Medical assistance in dying</b> <a href="#">↗</a></p> <ul style="list-style-type: none"> <li>Phone: 506 457-4800</li> <li>Email: <a href="#">Department of Health Inquiries</a> (from a web browser only) <a href="#">↗</a></li> </ul>															
<b>Nova Scotia</b>	<p><b>Nova Scotia Health Authority MAiD Care Coordination Office</b> <a href="#">↗</a></p> <ul style="list-style-type: none"> <li>Phone: 902 491-5892</li> <li>Email: <a href="mailto:maid@nshealth.ca">maid@nshealth.ca</a></li> </ul>															
<b>Prince Edward Island</b>	<p><b>Health PEI: Medical assistance in dying</b> <a href="#">↗</a></p> <ul style="list-style-type: none"> <li>Phone: 902 368-6130</li> <li>Email: <a href="mailto:healthpei@gov.pe.ca">healthpei@gov.pe.ca</a></li> </ul>															
<b>Newfoundland and Labrador</b>	<p><b>Government of Newfoundland and Labrador</b> <a href="#">↗</a></p> <table border="0"> <tr> <td>• Labrador-Grenfell Health</td> <td>Phone: 709 897-2350,</td> <td>Email: <a href="mailto:maid@lghealth.ca">maid@lghealth.ca</a></td> </tr> <tr> <td>• Western Health</td> <td>Phone: 709 637-5000 ext. 5168</td> <td>Email: <a href="mailto:maid@westernhealth.nl.ca">maid@westernhealth.nl.ca</a></td> </tr> <tr> <td>• Central Health</td> <td>Phone: 709 235-1412</td> <td>Email: <a href="mailto:maid@centralhealth.nl.ca">maid@centralhealth.nl.ca</a></td> </tr> <tr> <td>• Eastern Health</td> <td>Phone: 709 777-2250</td> <td>Email: <a href="mailto:maid@easternhealth.ca">maid@easternhealth.ca</a></td> </tr> </table>	• Labrador-Grenfell Health	Phone: 709 897-2350,	Email: <a href="mailto:maid@lghealth.ca">maid@lghealth.ca</a>	• Western Health	Phone: 709 637-5000 ext. 5168	Email: <a href="mailto:maid@westernhealth.nl.ca">maid@westernhealth.nl.ca</a>	• Central Health	Phone: 709 235-1412	Email: <a href="mailto:maid@centralhealth.nl.ca">maid@centralhealth.nl.ca</a>	• Eastern Health	Phone: 709 777-2250	Email: <a href="mailto:maid@easternhealth.ca">maid@easternhealth.ca</a>			
• Labrador-Grenfell Health	Phone: 709 897-2350,	Email: <a href="mailto:maid@lghealth.ca">maid@lghealth.ca</a>														
• Western Health	Phone: 709 637-5000 ext. 5168	Email: <a href="mailto:maid@westernhealth.nl.ca">maid@westernhealth.nl.ca</a>														
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<b>Yukon</b>	<p><b>Yukon Health and Social Services: Medical assistance in dying</b> <a href="#">↗</a></p> <ul style="list-style-type: none"> <li>Phone: 867 667-5695</li> <li>Toll Free: 1 800 661-0408 ext. 5695 (Yukon, Nunavut and NWT)</li> <li>Email: <a href="mailto:hss@gov.yk.ca">hss@gov.yk.ca</a></li> </ul>															
<b>Northwest Territories</b>	<p><b>Northwest Territories Central Coordinating Services: Medical assistance in dying</b> <a href="#">↗</a></p> <ul style="list-style-type: none"> <li>Phone: 855 846-9601 (toll-free) or 867 767-9050, extension 49008</li> <li>Email: <a href="mailto:PAD@gov.nt.ca">PAD@gov.nt.ca</a></li> </ul>															
<b>Nunavut</b>	<p><b>Nunavut Department of Health</b> <a href="#">↗</a></p> <ul style="list-style-type: none"> <li>Phone: 867 975-5700</li> <li>Email: <a href="mailto:info.maid@gov.nu.ca">info.maid@gov.nu.ca</a></li> </ul>															

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<b>Stephanie Connidis, MD, CCFP (PC) (COE), RACGP</b>	Family Medicine, Palliative Care Consultant, Medical Director Hospice Halifax
<b>James Downar, MDCM, MHSc</b>	Head and Associate Professor, Division of Palliative Care, University of Ottawa
<b>Jocelyn Downie, CM, FRSC, FCAHS, SJD</b>	Professor, Faculty of Law, Dalhousie University
<b>Ceilidh Eaton-Russell, MSc, CCLS</b>	Certified Child Life Specialist
<b>Andrea Frolic</b>	Director, Program for Ethics and Care Ecologies (PEaCE and MAiD), Hamilton Health Sciences, Assistant Professor, McMaster University
<b>Stefanie Green, MDCM, CCFP</b>	President, Canadian Association of MAiD Assessors and Providers (CAMAP)
<b>Shanaaz Gokool</b>	Former Chief Executive Officer, Dying With Dignity Canada
<b>Mike Harlos, MD, CCFP (PC), FCFP</b>	Former Professor and Palliative Medicine Section Head, Max Rady College of Medicine, University of Manitoba; Medical Director, Adult and Pediatric Palliative Care Program, Winnipeg Regional Health Authority; Clinical Team Lead Canadian Virtual Hospice
<b>Helen Long</b>	Chief Executive Officer, Dying With Dignity Canada
<b>Tara Noble, MSW, RSW</b>	Grief & Palliative Care Counsellor, Dr. Jay's Children's Grief Centre
<b>Victoria Pileggi, PhD</b>	Research and Evaluation Coordinator, Dr. Jay's Children's Grief Centre
<b>Adam Rapoport, MD, FRCP (C), MHSc</b>	Medical Director, Paediatric Advanced Care Team (PACT) at The Hospital for Sick Children (Toronto) and Medical Director, Emily's House Children's Hospice (Toronto)
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