

## Medical Assistance in Dying Catholic Health Response

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The Supreme Court ruling has brought unprecedented and momentous change for health care. This will require everyone to work with openness and humility focussed on a common goal to support those at end of life. The legislation allows medical assistance in dying for competent adults who clearly consent to the termination of life and who have a *“grievous and irremediable medical condition that causes intolerable and enduring suffering.”*

As a Catholic organization, Covenant Health has faithfully fulfilled our mission through 150 years of social, policy and practice changes in Alberta. We are confident we can work with Alberta Health and Alberta Health Services to develop processes that allow us to continue to walk with our patients, respect their choices and coordinate care across providers.

### **Will Catholic organizations provide medical assistance in dying?**

Catholic health organizations will not participate in medical assistance in dying because it is not in keeping with our fundamental values or ethical guidelines.

### **What is the basis for this position?**

Catholic health care has a long-standing moral tradition of compassionate care that neither prolongs dying nor hastens death. Catholic health care is rooted in the belief that all life is sacred and in the dignity of the person.

### **Will Catholic health providers obey the law?**

Catholic health providers across Canada have always and will continue to respect the law and provide assistance to patients at end of life. Catholic health care providers will respond respectfully and compassionately to requests for medical assistance in dying, working as valued partners in health care. In all of our programs and facilities, Catholic health providers will continue to meet legal and service obligations, collaborating with others to co-ordinate care according to the policy and direction set by government.

### **Will Catholic providers respect the rights and expressed requests of patients at end of life?**

We work with all patients as participants in their own care, and will continue to respect and, as service provider in the health system, respond to their needs and requests. We will respond to any patient who requests medical assistance in dying with compassion and without discrimination or coercion, exploring with them their options.

### **From a Catholic provider perspective, what provider rights need to be respected?**

Canadians have the right to have their conscience and religious freedom respected under the Charter. Laws and policies must specifically protect and respect individuals and organizations who decide not to be involved in medical assistance in dying on the basis of conscience or religious convictions.

### **How can Catholic organizations faithfully respond to requests for medical assistance in dying and uphold their moral and ethical traditions?**

Each day, Catholic health providers draw on strong ethics and values to deal effectively with complex conversations and decisions. Remaining engaged to explore the nature of a person's request for medical assistance in dying is completely consistent with our moral and ethical traditions.

### **What will happen if a patient in a Catholic facility wishes to pursue medical assistance in dying?**

Catholic providers have demonstrated the ability to respond with respect to the person in our care while also respecting the values of health professionals and our organizations. This response includes safe and timely transfer of a patient's care to another provider for further assessment. Thousands of safe transfers of care happen between facilities every day in Canada.

### **Shouldn't Catholic organizations be required to provide this service under the law?**

In jurisdictions across Canada, Catholic health care providers operate under local agreements that assert their ability to abide by faith and ethical traditions. There is precedent within our public health care systems in Canada, whereby Catholic health organizations provide complimentary services to those accessible through other service providers.

### **If Catholic organizations receive public funding, shouldn't they provide this service?**

Today, Canada's health care system effectively includes and accommodates many providers who do not provide all services—for a variety of reasons, including quality of care, efficiency, moral grounds. Moral objection to medical assistance in dying is not just a Catholic issue. All providers are grappling with this. Not every service is available at every public facility in Canada. Making this service available, but not in every facility in the system, is consistent with our current health system practice.

### **How can Catholic organizations provide palliative care services if they won't participate in medical assistance in dying?**

Palliative care—focused on achieving the best possible quality of life right up until the end of life—does not include medical assistance in dying. We fully support the right people clearly have to accept, to refuse and/ or discontinue the use of life-sustaining treatment and to allow death to occur. But we believe there is an essential ethical difference between allowing death to occur and intentionally ending a person's life.

### **From a Catholic provider perspective, how should the Canadian health system respond to suffering at end of life?**

As pioneers of palliative care in Canada, we view this development as a symptom of a failure in our health system approach to end of life care. We join many voices across the country to call for more access to palliative care and support for those at the end of life. Catholic health organizations will continue to offer leadership in the development and delivery of effective palliative care across Canada