RN Voice in National Discussion Regarding End-of-Life Care
Submitted by: RNAO Board of Directors

WHEREAS a national discussion is underway regarding end-of-life care with specific emphasis on ‘dying with dignity’ which involves a review of assisted suicide and/or euthanasia; and

WHEREAS the final decision on permitting assisted suicide and/or euthanasia rests with the public; and

WHEREAS there is support from all three provincial political parties to engage in a discussion regarding end-of-life care; and

WHEREAS RNAO is being asked by stakeholders and media to comment on this issue;

THEREFORE BE IT RESOLVED THAT RNAO urge the provincial and federal governments to engage in formal public dialogue on end of life issues and dying with dignity, including discussions, related to assisted suicide and/or euthanasia; and

THEREFORE BE IT FURTHER RESOLVED THAT the following principles be considered when discussing assisted suicide and/or euthanasia:

- Personal autonomy and justice are fundamental principles
- Ensuring timely access to evidence-based palliative care must remain a top priority
- The government must reject calls for involuntary euthanasia
- Assisted suicide and/or euthanasia must never be considered within the context of cost-savings
- Procedural safeguards must be enacted, including:
  - Restricting assisted suicide and/or euthanasia to competent adults with terminal illness;
  - Requiring that requests for assisted suicide and/or euthanasia be initiated by the person seeking the service and would subject to a thorough review process that includes: independent confirmation on terminal illness; determination of capacity by a mental health-care professional (with appeal to the Consent and Capacity Board); providing access to all reasonable alternatives and establishing a waiting period.
- The practice of assisted suicide and/or voluntary active euthanasia must be restricted to professionals who have sought designated education and training.
- No health professional or organization should be required to participate in assisted suicide and/or voluntary active euthanasia.
- A provincial monitoring and reporting system must be developed, including a process for responding to complaints.
Resolution: RN Voice in National Discussion Regarding End-of-Life Care
Submitted by: RNAO Board of Directors

As the national discussion continues to evolve regarding end-of-life care, RNAO's Board of Directors (BOD) believes that nurses and the public must have an engaged voice.

These discussions are permeating into public policy institutions and the court system. Increasingly the conversation is shifting towards ‘dying with dignity,’ and tackle tough questions surrounding assisted suicide and euthanasia. For example, the Supreme Court of Canada will hear an appeal (see Carter et al v. Canada) later in 2014 to consider whether Canada’s criminal prohibitions against assisted suicide are consistent with the Charter of Rights and Freedoms. The implications of this case are significant and could be far-reaching.

The resolution being submitted by RNAO’s Board of Directors to the 2014 Annual General Meeting is not proposing that RNAO and its members take a position on assisted suicide and/or euthanasia, but rather that we encourage the public dialogue on end of life care and dying with dignity -- a journey that involves autonomy and universal access to comprehensive palliative care.

RNAO's BOD believes that the decision to legalize assisted suicide and/or euthanasia rests with the public, and RNs have an opportunity to:

a) Ensure that the voice of the public, including all diversity of opinion, is adequately engaged and reflected in the conversation regarding ‘dying with dignity’; and

b) Ensure that if discussions regarding assisted suicide and/or euthanasia are being raised, that procedural safeguards are simultaneously included in the discussion from the outset, to offer protection for those most vulnerable.

The aim of this resolution is to apply a principled approach to advance public dialogue on these matters in a way that is inclusive of diverse voices, and that if discussions regarding assisted suicide and/or euthanasia are being raised -- procedural safeguards are included in the discussion from the outset to offer protection for those most vulnerable.

This resolution was prepared after considerable deliberation of RNAO’s Board of Directors and is based on a consultation of approximately 150 RNAO leaders (Chapter and Interest Group Presidents/Political Action Executive Network Officers) that took place on February 28, 2014. RNAO’s member-driven leadership conveyed that there is a need to continue the dialogue regarding end of life care.
The issues associated with end of life care will not disappear if left untouched. If the public is not directly enabled to lead a response, the answers will continue to be left to a judiciary whose decisions will directly impact Canadians and health professionals.

There is tremendous risk if RNAO remains silent at this critical juncture. The voice of RNs in serious policy matters could be diminished and/or the government could make policy decisions that are not reflective of the best interest of the people, families and populations that nurses care for, and indeed of nurses themselves.