



WRHA MAID Transfer Protocol

Step #	Description of Event	Key Points and Purpose	Who is Involved in Collaboration
1.	<p>Individual¹ located at a facility operated by an Abstaining Facility Operator² intends to pursue MAID.</p> <p>Includes individuals within the community who have expressed an interest in MAID but identified they do not wish to receive the service at their residence.</p>	<p>Individual is identified as potentially requiring transfer.</p>	<p>MAID Team</p> <p><i>As applicable:</i> Attending Physician</p> <p>Site Medical Director (Hospital) and Chief Medical Officer and Chief Nursing Officer (Hospital)</p> <p>Executive Director (PCH) and/or Director of Care (PCH)</p> <p>Palliative Care Program Medical Director, Program Director and Team Manager (“Palliative Care Program Leaders”) (Community)</p>
2.	<p>The MAID Team informs Abstaining Facility Operator (Hospital or PCH) or Palliative Care Coordinator (Community) in advance of the date of first discussion with Individual.</p>	<p>Communication ensures all stakeholders are aware of the timing of the process and the potential to establish a transfer plan to transfer Individual.</p> <p>Assists in coordination with the Individual’s health care team.</p>	<p>Same as above.</p>

¹ WRHA Medical Assistance In Dying policy 110.000.400, December 2017 (“MAID Policy”)

² MAID Policy

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3.	The MAID Team informs the Abstaining Facility Operator (Hospital or PCH) or Palliative Care Program Leaders (Community) of the results of the first meeting, i.e., whether the Individual meets MAID Criteria. ³	Communication ensures all stakeholders are notified whether an Individual meets the MAID Criteria.	Same as above.
4.	Individual informs MAID Team of intent to move forward with the process; Individual expresses desire to proceed with a second meeting with the MAID Team.	<p>This is an indicator that Individual desires to proceed with the MAID process.</p> <p>The MAID Team informs stakeholders that the Individual intends to proceed with a second discussion.</p> <p>Establishing a transfer plan to transfer the Individual may commence.</p>	<p>MAID Team</p> <p><i>As applicable:</i> Chief Medical Officer and Chief Nursing Officer of Abstaining Facility Operator (Hospital)</p> <p>Executive Director (PCH) and/or Director of Care (PCH)</p> <p>Palliative Care Program Leaders (Community)</p>
5.	Following the second meeting, where the Individual expresses a desire to proceed with MAID, then a transfer plan is developed between the Abstaining Facility Operator (or the Palliative Care Program if the Individual is in the community) and the receiving facility to support the Individual's transfer and to ensure the receiving facility is able to meet the Individual's health care needs.	<p>The transfer plan will provide detailed information about the Individual's plan of care and includes a determination of the required resources to safely transport the patient to a receiving facility.</p> <p>The transfer plan will include a determination of whether the receiving facility is able to meet the level of care required to support the Individual during admission, through and until the provision of MAID.</p>	<p>Program Team Manager of receiving facility (Hospital)</p> <p>Unit Nurse / Clinical Resource Nurse / Clinical Nurse Specialist and Admitting Physician of receiving facility (Hospital)</p> <p><i>As applicable:</i> Attending Physician</p> <p>Program Team Manager of Abstaining Facility</p>

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	<p>Consults are obtained if necessary.</p> <p>The transfer plan is shared between the Abstaining Facility Operator (or Palliative Care Program if the Individual is in the community) and the receiving facility.</p> <p>The Individual may only be transferred if medically stable as determined by the medical team of the Abstaining Facility Operator (or Palliative Care Program if the Individual is in the community) and the receiving facility.</p>	<p>Early establishment of the transfer plan will assist in planning the transfer and supply of adequate time to align resources to meet the Individual's needs through the entire process.</p>	<p>Operator (Hospital) and Unit Nurse/CRN of Abstaining Facility Operator (Hospital)</p> <p>Director of Care (PCH)</p> <p>Palliative Care Program Leaders (Community)</p>
6.	<p>Individual is informed of the transfer plan and the alternate location.</p>	<p>The determination of an alternate location for the provision of MAID is case specific and will depend on the particular care needs of the Individual.</p> <p>The consideration is largely based on the specifics within the detailed transfer plan that outlines the interventions, supports and symptoms the Individual is experiencing. This information is used to determine safety and to minimize discomfort during transfer and while at the receiving facility.</p>	<p>Individual</p> <p><i>As applicable:</i> Program Team Managers (Hospital)</p> <p>Director of Care (PCH)</p> <p>Palliative Care Team Manager (Community)</p>
7.	<p>The MAID Team informs Abstaining Facility Operator (Hospital or PCH) or Palliative Care Program Leaders (Community) in advance of the date of second discussion with the Individual at the site.</p>	<p>Communication ensures all stakeholders are aware of the timing of the process and the potential to implement the transfer plan to transfer Individual.</p>	<p>MAID Team</p> <p><i>As applicable:</i> Attending Physician</p> <p>Program Medical Directors (Hospital) and</p>

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	Transfer planning may be modified as necessary.	Assists in coordination with the Individual's health care team.	<p>Chief Medical Officers and Chief Nursing Officers (Hospital)</p> <p>Executive Director (PCH) and/or Director of Care (PCH)</p> <p>Palliative Care Program Leaders (Community)</p>
8.	The MAID Team informs the Abstaining Facility Operator (Hospital or PCH) or Palliative Care Program Leaders (Community) of the results of the second meeting.	Communication ensures all stakeholders are notified whether or not the Individual continues to meet the MAID Criteria and, in the event the Individual continues to meet criteria, that implementing the transfer plan to transfer the Individual is impending.	Same as above.
9.	The transfer plan is finalized.	See step 5 above.	See Step 5 above.
10.	The finalized transfer plan is shared with all stakeholders along with any relevant personal health information such as reports and consultations.	<p>Communication ensures all stakeholders are notified of the transfer plan.</p> <p>Discussion occurs and determination is made whether the receiving facility is able to meet the level of care required to support the Individual during admission, through and until the provision of MAID.</p>	<p><u>As applicable:</u></p> <p>Attending Physician</p> <p>Program Medical Directors (Hospital) and Chief Medical Officers and Chief Nursing Officers (Hospital)</p> <p>Executive Director (PCH) and/or Director of Care (PCH)</p> <p>Palliative Care Program Medical Director, Program Director and Program Team Manager (Community)</p>

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11.	The MAID Team, in coordination with Individual and receiving facility, identifies the date for the provision of MAID and notifies Abstaining Facility Operator (Hospital or PCH) or Palliative Care Program Leaders (Community).	The health care team of the Abstaining Facility Operator (Hospital or PCH) or Palliative Care Program Leadership (Community) performs a final assessment of care needs and transfer plan is updated.	MAID Team Individual <i>As applicable:</i> Program Medical Directors (Hospital) and Chief Medical Officers and Chief Nursing Officers (Hospital) Executive Director (PCH) and/or Director of Care (PCH) Palliative Care Program Leaders (Community)
12.	Communication between sending and receiving facilities occurs to ensure access to receiving facility proceeds as planned.	Final step before making the arrangements to effect transfer. Ensures communication between sites around transfer logistics. Additional supports are identified and notified on a case-by-case basis.	Chief Nursing Officer of receiving facility <i>As applicable:</i> Chief Nursing Officer of Abstaining Facility Operator (Hospital) Executive Director (PCH) and/or Director of Care (PCH) Palliative Care Team Manager (Community)
13.	Abstaining Facility Operator and receiving facility make a final determination of medical stability and identification of the level of care needed during transfer occurs prior to transfer, including whether EMS or stretcher services are required. MAID team will send documentation of MAID	Appropriate supports as identified in the transfer plan accompany the Individual for ongoing care needs, such as medication administration or other symptom management.	Clinical Resource Nurse(s) Transport Nurse(s) +/- Transport Physician MAID Team <i>As applicable:</i> Program Team Manager of the Abstaining Facility Operator (Hospital)

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	eligibility after provision and transfer have been confirmed.		Director of Care (PCH) Palliative Care Team Manager (Community)
14.	<p>Transport to receiving facility with appropriate support persons.</p> <p>Transfer of care to receiving facility with appropriate support persons of the receiving facility meeting the Individual upon arrival.</p>	<p>Effects transfer of patient.</p> <p>Provides face-to-face hand-off to the receiving team at the receiving facility.</p>	<p>Transport Nurse(s)</p> <p>+/- Transport Physician</p> <p>Program Team Manager of the receiving facility</p> <p>+/- Clinical Nurse Specialist(s) at the receiving facility</p> <p>+/- Unit Nurse/Clinical Resource Nurse at the receiving facility</p>
15.	<p>Notification to Abstaining Facility Operator of death.</p> <p>or</p> <p>The Individual is required to return to the Abstaining Facility Operator in the event the Individual no longer meets MAID Criteria, has decided not to proceed, or for any other reason MAID does not proceed.</p>	<p>Communication ensures all stakeholders are notified as to the status of the Individual.</p> <p>Allows Abstaining Facility Operator to either prepare to accept the return of the Individual or release their bed.⁴</p>	<p>Program Team Manager of the receiving facility</p> <p>+/- Clinical Nurse Specialist at the receiving facility</p> <p><i>As applicable:</i> Program Medical Director of Abstaining Facility Operator (Hospital) and Chief Medical Officer and Chief Nursing Officer of Abstaining Facility Operator (Hospital)</p> <p>Executive Director (PCH) and/or Director of Care (PCH)</p> <p>Palliative Care Program Leaders (Community)</p>

⁴ MAID Policy s. 3.8

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16.	<p>If required, Individual is transferred back to the Abstaining Facility Operator or community, or another appropriate facility with appropriate support persons.</p> <p>Appropriate support persons from the Abstaining Facility Operator to meet the Individual upon arrival, if applicable.</p>	<p>Effects return of patient.</p> <p>Ensures a face-to-face hand-off.</p>	<p>Program Team Manager of the receiving facility</p> <p>+/- Clinical Nurse Specialist at the receiving facility</p> <p><i>As applicable:</i></p> <p>Program Medical Director of the Abstaining Facility Operator (Hospital) and Chief Medical Officer and Chief Nursing Officer Abstaining Facility Operator (Hospital)</p> <p>Executive Director (PCH) and/or Director of Care (PCH)</p> <p>Palliative Care Program Leaders (Community)</p>