



# Assisted Dying Service

## Information for health professionals

November 2021

Medical or nurse practitioners who are willing to provide assisted dying services should also refer to *Providing assisted dying services – Information for medical and nurse practitioners about the assisted dying funding and delivery model*.

Assisted dying is a sensitive topic and may be difficult for some people. If reading this information raises some distressing feelings for you, support is available. You can call or text **1737** for free to speak to a trained counsellor at any time.

Note: This document contains general information about assisted dying. It is not legal or professional advice of any kind. This document will be reviewed and updated from time to time; please make sure you have the latest version. (Last updated – November 2021)

## About assisted dying

### Assisted dying is an end-of-life care option

Assisted dying means that a person with a terminal illness who meets the eligibility criteria can request medication that will end their life.

Assisted dying has been available in New Zealand Aotearoa since 7 November 2021.

The process for accessing assisted dying is set out in the End of Life Choice Act 2019 (the Act). The Act details the eligibility criteria, assessment process and safeguards for the assisted dying service.

Assisted dying is another option for people who have a terminal illness, and exists within the context of other health services. It is not a replacement for palliative care or health care services more generally.

The Ministry of Health is responsible for overseeing and funding the assisted dying service. This includes monitoring the service and improving it over time.

### **Secretariat and Registrar (Assisted Dying)**

An assisted dying secretariat at the Ministry will support the service. This secretariat will provide advisory and clinical support and oversight.

The Registrar (Assisted Dying) is part of the secretariat. They are a senior doctor, and they will check that the processes required in the Act have been complied with for each eligible person. There are also two clinical advisors in the secretariat. They are senior registered nurses who will provide information and support to the person and their whānau, and the involved health professionals, throughout the process.

### **The SCENZ Group**

The secretariat will also support the Support and Consultation for End of Life in New Zealand (SCENZ) Group, which is a statutory body for the assisted dying service. The SCENZ Group is responsible for maintaining lists of medical practitioners, nurse practitioners and psychiatrists who provide assisted dying services. The secretariat will help identify appropriate practitioners to undertake assessments from the lists held by the SCENZ Group.

You can find more information about the SCENZ Group, including how to register, on the **Ministry of Health's website**.

## **Eligibility for assisted dying**

### **Assisted dying must be the person's choice**

A person's decision to have an assisted death must be a free and informed choice. Whānau, caregivers, health professionals or holders of enduring power of attorney cannot make this decision on a person's behalf.

A person must not be pressured into choosing assisted dying. If pressure is suspected, the process must stop.

The attending medical practitioner must speak to other health professionals who are in regular contact with the person, and the person's whānau (with consent), to help ensure that a person's decision is free from pressure.

As a further safeguard, health professionals are not allowed to suggest assisted dying to the person. The person must raise it with the health professional first.

## **A person must meet strict criteria to be eligible for assisted dying**

The Act gives a person the option to request assisted dying. However, they must go through a formal assessment process and meet strict, specific criteria to be eligible. Not everyone with a terminal illness will be eligible for assisted dying.

A person cannot receive assisted dying solely because they are suffering from a mental disorder or mental illness, have a disability or are of advanced age.

To be eligible, a person must meet all of the following criteria:

- aged 18 years or over
- a citizen or permanent resident of New Zealand
- suffering from a terminal illness that is likely to end their life within six months
- in an advanced state of irreversible decline in physical capability
- experiencing unbearable suffering that cannot be relieved in a manner that the person considers tolerable
- competent to make an informed decision about assisted dying.

## **Being competent to make an informed decision**

Under the Act, a person is not assumed to be competent when accessing assisted dying services. They must be assessed and found able to make an informed choice about assisted dying. This means that the person is able to understand, retain, use, and weigh relevant information about assisted dying, and can communicate their decision in some way.

The person must be considered competent throughout the assessment process and must also be competent at the time of the assisted death. This means if the person is found eligible for assisted dying but then loses competency, they cannot have an assisted death.

Advance directives cannot be used for assisted dying in New Zealand Aotearoa. An advance directive is a statement setting out what treatment the person wants, or does not want, to receive in the future.

## **The assisted dying process**

### **The process for accessing assisted dying is set out in the Act**

In summary, the process is as follows:

- A person wanting to access assisted dying raises it with their doctor, or someone in their health care team.
- The person makes a formal request for assisted dying to an attending medical practitioner.

- The attending medical practitioner assesses whether the person is eligible.
- A second, independent medical practitioner assesses whether the person is eligible.
- If required, a psychiatrist assesses whether the person is competent to make an informed decision.
- Planning for the assisted death begins, including choosing a date and time and the method for the administering the medication.
- The Registrar must check that the correct process has been followed.
- The attending medical practitioner or a nurse practitioner (under the instruction of the attending medical practitioner) administers or helps the person self-administer the medication.

Each step of this process may involve multiple conversations and appointments. The practitioners involved will be able to travel to a person to provide services in their home.

## **The process can stop at any time**

### **If a person changes their mind**

If a person changes their mind about choosing assisted dying, they can stop the process at any time until the point that the medication is administered. The attending medical practitioner must explain this to the person as part of the assessment process.

Before the medication is administered, the attending medical or nurse practitioner will ask the person if they choose to receive the medication. The person can choose to take the medication then, delay taking the medication to a later date (within six months of the date originally chosen), or cancel their request for assisted dying.

If a person in your care is accessing assisted dying and tells you they have changed their mind, you can notify their attending medical practitioner, or the assisted dying secretariat at the Ministry of Health. The secretariat can be contacted by phone on 0800 223 852 or by email at [AssistedDying@health.govt.nz](mailto:AssistedDying@health.govt.nz).

### **If a person is no longer eligible**

If during any stage of the process it is decided that the person is not eligible, the attending medical or nurse practitioner must stop the process and explain the reason. This may happen after the assessment process has been completed if the person's situation changes. For example, if a person loses competence to make an informed decision about assisted dying.

### **If a person is being pressured**

The process must stop if it is suspected that a person is being pressured to choose assisted dying. If you have concerns that someone you are caring for is being pressured into choosing assisted dying, you can notify their attending medical practitioner, or the assisted dying secretariat at the Ministry of

Health. The secretariat can be contacted by phone on 0800 223 852 or by email at [AssistedDying@health.govt.nz](mailto:AssistedDying@health.govt.nz).

Your employer may also have certain policies around coercion you need to follow.

## Responding when a person raises assisted dying

The Act is clear that health professionals are not able to suggest assisted dying as an option or initiate discussion about assisted dying with a person. The person needs to raise it first.

It is important to think about how you may respond if assisted dying is raised with you. This includes how you can respond appropriately, regardless of your personal views.

### Using the conversation guide

The Ministry has created a **conversation guide** that can help support you to respond appropriately and respectfully when a person raises assisted dying. This guide is to support an initial conversation, in which you:

- acknowledge the request
- explore the person's understanding of the Act, and their current and likely future health
- understand what has led the person to ask about assisted dying, including what their priorities are and what they are worried about
- explain the first steps in the process
- make a plan and ensure continuity of care.

The conversation guide is not designed to be used as part of the formal assessment process.

A handbook and e-learning module support and accompany the guide. The handbook also includes guidance on other communication strategies and approaches, such as responding if whānau raise assisted dying, or managing strong emotions in these conversations. Read the handbook and complete the e-learning module before using the conversation guide.

You can find the conversation guide, handbook and e-learning module in **LearnOnline**.

### Obligations for medical practitioners

Medical practitioners have an obligation under the Act to provide assisted dying services to a person in their care who requests this, unless the medical practitioner:

- has a conscientious objection, or
- lacks the skills or experience to do so.

Medical practitioners should consider their willingness and ability to provide the full service before they start the processes required by the Act.

If you have a conscientious objection and are asked by a person in your care about assisted dying, you have certain responsibilities under the Act. You must:

- inform the person of their objection, and
- tell the person that they have the right to ask the SCENZ Group for the name and contact details of a medical practitioner who is willing to participate in assisted dying.

If you do not provide assisted dying because you do not have the right skills or experience, you are responsible for ensuring that the person can access this care. You must connect the person to a medical practitioner who is willing to provide the service, either through a referral or telling them about the SCENZ Group.

A person can contact the SCENZ Group via the Ministry of Health by phone on 0800 223 852 or by email at **AssistedDying@health.govt.nz**. A person will be given a clinical advisor to help them, who will work with the SCENZ Group to find them an attending medical practitioner.

If you do not provide assisted dying services, you must ensure that the person continues to receive continuity of care for their other health needs. When doing so, you should consider Standards for your profession and the **Code of Health and Disability Services Consumers' Rights**.

If you feel comfortable doing so, you may also provide support to the person as they go through the assisted dying process. This could include conversations about assisted dying with the person and their whānau as part of their regular consultations. However, if you are not acting as the attending medical practitioner you will not receive funding for this as it is considered part of the person's general care.

You can read more information about the care pathway for medical practitioners not providing assisted dying services in ***Assisted dying care pathways for health practitioners – Supporting information guide***.

## **Obligations for other health professionals**

Only medical practitioners can formally accept a person's request for assisted dying and start the assessment process as outlined in the Act. Other health professionals may play a role in supporting a person through the process, or in the case of nurse practitioners, in administering the medication.

If you are a health professional, you need to be prepared to respond appropriately in case a person raises assisted dying with you.

You may conscientiously object to helping a person access assisted dying. However, you must understand and meet your legal and professional obligations by ensuring the person's continuity of care is maintained and not inhibiting access to lawful medical treatment. When doing so, you should consider Standards for your profession and the **Code of Health and Disability Services Consumers' Rights**.

Only medical practitioners are legally obliged to disclose their conscientious objection, but you may choose to share this with the person.

You are encouraged to support a person to access assisted dying services by connecting them to an appropriate medical practitioner. This may be through a referral, or telling them about the SCENZ Group.

A person can contact the SCENZ Group via the Ministry of Health by phone on 0800 223 852 or by email at **AssistedDying@health.govt.nz**. A person will be given a clinical advisor to help them, who will work with the SCENZ Group to find them an attending medical practitioner.

You can find more information in *Assisted dying care pathways for health practitioners – Supporting information guide*.

## Being involved in assisted dying services

You can choose to be involved in providing or supporting assisted dying services. You can also choose not to be involved. Your involvement may depend on your willingness, your role and scope of practice, and your experience or skills. The roles in the Act, and some other ways you may be involved, are outlined below.

Even if you choose not to be involved, you may be asked to provide information to support the assessment process if a person in your care wants to access assisted dying. This may include providing medical notes or having conversations with practitioners who are completing the assessments. The Code of Health and Disability Consumer's Rights states that every consumer has the right to cooperation among providers to ensure quality and continuity of services.

There are more details about the roles for medical and nurse practitioners in *Providing assisted dying services – Information for medical and nurse practitioners about the assisted dying funding and delivery model*.

### Medical practitioners

There are three roles for medical practitioners outlined in the Act.

## **Attending medical practitioner**

The attending medical practitioner provides end-to-end care throughout the assisted dying service. This includes carrying out the first eligibility assessment, providing the decision on eligibility, and preparing and administering the medication for assisted dying (or supporting an attending nurse practitioner to do this).

You can be an attending medical practitioner for people already in your care, or for other people who may seek access to assisted dying (such as through the list held by the SCENZ Group).

## **Independent medical practitioner**

The independent medical practitioner provides the second eligibility assessment, if the attending medical practitioner considers the person to be eligible (or that they would be eligible if assessed as competent by a psychiatrist).

The independent medical practitioner is selected from the list held by the SCENZ Group.

## **Psychiatrist**

A psychiatrist may be required to provide an opinion on competency if the attending medical practitioner, the independent medical practitioner or both, have concerns that a person is not competent to make a decision about assisted dying.

The psychiatrist is selected from the list held by the SCENZ Group.

## **Nurse practitioners**

Under the Act, nurse practitioners cannot undertake the assessment part of the process.

Attending nurse practitioners may support a person's planning for their assisted death, and prepare and administer the medication (under the instruction of the attending medical practitioner). An attending nurse practitioner will work with the attending medical practitioner for this part of the process.

Some of the medications used for assisted dying are unapproved in New Zealand. Under the Medicines Act 1981 (section 29) only a medical practitioner is permitted to prescribe unapproved medications. This means that nurse practitioners cannot prescribe medications for assisted dying.

You can be an attending nurse practitioner for people already in your care, or for other people who may seek access to assisted dying (such as through the list held by the SCENZ Group).



## Pharmacists

The Ministry is responsible for procuring and funding medications for the assisted dying service. The Ministry has contracted two district health board pharmacies to supply and distribute medications and equipment to attending medical practitioners.

Pharmacists and other staff working at the contracted pharmacies will have appropriate training and guidance. They may also choose to conscientiously object to being involved in the preparation of assisted dying medications.

Pharmacists working elsewhere, including in community pharmacies, still have important roles to play in supporting people and whānau who may choose this option. For example, pharmacists may be asked about assisted dying and will need to be able to respond appropriately, including providing relevant information.

## Nurses, allied health professionals, and non-registered professionals

The process outlined in the Act does not specify roles for nurses, allied health professionals, or non-registered health and disability professionals (such as support workers or carers). However, they may also play an important part in providing care or support to a person with a terminal illness and their whānau. They may also do this as part of the assisted dying process.

Nurses, allied health professionals, and non-registered professionals may be involved by:

- responding to a person who raises assisted dying
- taking part in conversations with a person and their whānau about assisted dying
- providing expertise if a person would benefit from a specific approach, such as when working with disabled people, Māori or Pacific people
- discussing appointments for assisted dying or making practical arrangements to help prepare for the assisted death
- being present and providing comfort and care to the person, and support to their whānau at the time of the assisted death.

A nurse may also be a supporting practitioner for an attending medical practitioner who is administering assisted dying medication for the first time. This nurse can receive funding under the fee-for-service model. There is more information on **the Ministry's website**.

# Training and guidance for health professionals

## Training and guidance about assisted dying

The Ministry has produced training and guidance resources about assisted dying services, which are available through **the LearnOnline platform**.

You are encouraged to engage with these resources, even if you are not choosing to provide or be involved in assisted dying services. This learning will help you if a person in your care raises assisted dying with you or wants to access this service.

### For all health professionals

Three e-learning modules are available for all health professionals. These can be completed individually or as a group learning tool, such as in a team meeting.

- **End of Life Choice Act 2019: Overview** – provides an overview of the Act, including health professionals' rights and responsibilities.
- **Assisted dying care pathway: Overview** – explains the process for accessing assisted dying, including the roles of different health professionals.
- **Responding when a person raises assisted dying** – supports health professionals to respond respectfully and appropriately when a person raises assisted dying, including best practice communication skills.

You can also access recordings of the assisted dying implementation webinar series in **LearnOnline**. These cover a range of topics related to assisted dying and the implementation of the Act, including overseas experience, patient perspectives, whānau-centred end-of-life care, the role of the wider workforce, and practitioner responsibilities.

### For medical and nurse practitioners providing assisted dying services

Additional training is available for medical and nurse practitioners who plan to provide assisted dying services. For more information see *Providing assisted dying services – Information for medical and nurse practitioners about the assisted dying funding and delivery model*.

## Health and disability service provider procedures and policies

Health and disability service providers will have policies and procedures about how they are involved in assisted dying services. Make sure you are aware of your employer's policies and procedures and take these into account when responding to a person about assisted dying or providing assisted dying services.

If you want to be involved in providing assisted dying services, you may wish to discuss this with your manager. Your employer's policies may affect how you can be involved and whether you can provide these services as part of your contract with them.

It may also be useful to tell your manager if you have a conscientious objection to assisted dying and do not want to be involved. This will help your organisation plan and respond appropriately if a person in its care chooses assisted dying. It is still important you are aware of your professional obligations.

Assisted dying is a sensitive topic and may be difficult for some people. Talking to your colleagues or your employer may be helpful in deciding if and how you may choose to be involved.

You also may want to talk to your employer about support options, such as employee support services like the Employee Assistance Programme (EAP).



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