

B.C. palliative care hospice loses funding over assisted suicide

Delta Hospice Society president Angelina Ireland is “shocked and outraged” that the B.C. government will pull all funding from the hospice by 2021 because it doesn’t offer assisted suicide.

Delta Hospice is a small 10-bed facility that provides palliative care for seriously ill patients and support groups for families. Earlier this year, the Fraser Health Authority and provincial Health Minister Adrian Dix said the hospice would face unspecified consequences if it did not start allowing legal assisted suicides to happen on site by Feb. 3.

Ireland responded that the hospice would rather give up \$750,000 of its government funding (and put the hospice below the 50 per cent funding threshold set by government) than end the lives of its patients. She offered to do so.

Then, there was silence. The Feb. 3 deadline passed and there was no response from the health minister or Fraser Health Authority until Feb. 25, when Dix announced the government was terminating the contract with Delta Hospice.

“Putting the patient first is what matters most,” said Dix. “No organization can influence this decision or impose it. I respect anyone’s right to disagree and no one has ever required hospice staff to deliver medical assistance in dying, but they must allow eligible residents who want the service to access it.”

He said he made the decision “reluctantly” and after making “every effort to support the board to come into compliance.”

“When the role of the Delta Hospice Society concludes, patients in publicly-funded hospice care will again be able to fully access their medical rights.”

Ireland doesn’t see it that way. In a Feb. 26 statement she said the government cancelled the contract with Delta Hospice “abruptly” and “without even acknowledging or responding” to the hospice’s attempts to negotiate.

“The actions of the ministry reveal that the issue of MAiD (medical assistance in dying) vs. palliative care is an agenda-driven policy rather than one that ensures access to skilled and compassionate palliative care.”

Delta Hospice has been serving the public since 1991. When assisted suicide became legal in 2016, it was made available at the Delta Hospital across the street, which shows accessibility is not the issue, says Ireland.

"If the government wants to open MAiD facilities, that's their option, but they must not be allowed to download it onto the backs of private palliative care facilities."

To ensure hospice care remains available in Delta, Dix said the government would take over management of the current building or open another 10-bed hospice somewhere else in the area.

The hospice was built at a cost of about \$9 million, paid for without government funding, said Ireland. For the ministry to take the site now "is a scandalous appropriation of private assets."

Ian Paton, the MLA for Delta South, told media he sees the situation as "government literally stealing the assets of the people of Delta that worked so hard for many years" building the hospice.

Liberal health critic Norm Letnick criticized Dix's announcement, saying the minister should have agreed to "work with the local association to make sure that all the investment that the local people have put into this building stays in the community under the control of the people who invested the money."

Hospice supporters are planning a rally at the B.C. Legislature on April 4. Meanwhile, Ireland said the Delta Hospice Society is looking at legal and other options to continue serving patients who don't want to end their lives by assisted suicide or die in a facility that offers it.

The debate about whether private non-religious hospices should offer MAiD is also playing out in North Bay, Ont., where the newly-opened Nipissing Serenity Hospice is facing backlash for deciding not to include assisted suicide among its services.

Vivian Papaiz, chair of the board of directors, said the decision is based in part on a recent joint statement from the Canadian Hospice Palliative Care Association and the Canadian Society of Palliative Care Physicians, who agreed ending a patient's life with a lethal injection is not part of the practice of palliative care.

Under current legislation, faith-based institutions are exempt from having to provide MAiD.

Meanwhile, the federal government plans to change assisted dying laws to eliminate the requirement that a person's death must be "reasonably foreseeable."