

The Honourable Adrian Dix
Minister of Health
PO Box 9050, STN PROV GOVT
Victoria, BC
V8W 9E2

September 7, 2017

Dear Minister,

In the Comox Valley, our legal right to Medical Assistance in Dying (MAiD) in publicly funded residential care is severely limited because of the policy of a faith-based service provider. For exploratory discussion, for assessment of eligibility and for actually receiving medical assistance in dying, the Roman Catholic Church insists that the suffering resident transfers to a non-objecting institution. Currently, this inhumane policy affects those in 31% of our long-term residential care beds and this could rise to 58% if the Minister permits the amalgamation of secular Glacier View Lodge and The Views, our two largest facilities, under Providence Health Care which is a large Roman Catholic service provider.

This is not acceptable.

Therefore, we (the 2,869 signatories) petition the Minister of Health and the Vancouver Island Health Authority to ensure that:

1. Residential and hospice care be available from secular institutions as is the case everywhere else on Vancouver Island. It is imperative that Valley citizens who desire access to Medical Assistance in Dying (MAiD) be able to do so without encountering faith-based restrictions or transfers imposed by the institution providing the care.
2. The Minister of Health prevents the impending transfer of the assets/and or operations of the Glacier View Lodge to a faith-based organization.
3. Any new residential care beds created in the Comox Valley be granted to a secular institution.
4. All six community hospice beds are located together on a secular site.

The attached Addendum provides additional background information and expands fully the following arguments supporting the above requests.

1. **Roman Catholic (RC) MAiD policy breaches our Charter Rights and our rights given under the Carter decision and Bill C-14.** There is incontrovertible evidence from physicians and patients that RC MAiD policy presents a threat to individual security (a Charter right) and places an undue burden on access to medical assistance in dying (a Constitutional right).
2. **We have the right to accessible and universal service delivery under the Canadian Health Act and the BC Medicare Protection Act.** Only 69% of residents have access to MAiD in Comox Valley publicly-funded residential care facilities. This compares to 94% in the Greater Victoria Area and to 100% everywhere else on Vancouver Island. It is unconscionable that a person in one facility has full access to MAiD while another, less than a mile down the road, does not.

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3. **There is no federal or provincial legislation that permits institutional conscientious objection.** The Charter and Bill C14 protect only individual religious freedom. The “1995 Master Agreement” is cited as giving legality to the RC Church’s refusal to allow MAiD; we do not believe that it would withstand a legal challenge.
4. **RC MAiD policy is impractical and places an additional burden and expense on public health care.** Timely transfer to another facility is unlikely in an over-loaded system. Alternate Level of Care (ALC) is 28% which is 17% above Island Health’s target of 11% and is one of the worst in the province. The average wait time for a residential care bed is 62 days (target is 30 days). Acute care occupancy is 104%. Facility choice is an illusion. The cost burden of catering to RC MAiD policy should not be borne by the taxpayer.
5. **Future expansion of MAiD eligibility criteria will only exacerbate the problem.** The Federal Government is currently studying three additional eligibility types - advance requests, mental illness and mature minors. Quebec is actively considering advance consent for Alzheimer patients. Other cases are proceeding through the courts that will likely also expand eligibility.
6. **Services should reflect community demographics and current public policy.** Census data shows that 52% of our community has no religious affiliation and that only 12% identify themselves as Roman Catholic. Physician assisted dying is supported by 85% of Canadians and by 83% of Roman Catholics. The Roman Catholic Church morally opposes contemporary Canadian public policy related to assisted-dying, to same sex marriage and to transgender rights. Minority religious dogma should not dictate the provision of publicly funded health care services.
7. **Glacier View Lodge (GVL) should remain a community asset.** Valley citizens have demonstrated their support for GVL remaining a community asset. GVL, St. Joseph’s and Providence should not dictate the future of 58% of publicly funded long-term residential care or of the assets gifted to us for seniors care -- the community’s voice should be paramount.
8. **Seniors’ dignity and quality care is a provincial government priority.** The new BC Government, as stated in the Minister of Health’s Mandate Letter, has as a priority to “...improve and strengthen services to ensure seniors receive dignified and quality care”. Delivery of secular residential care services would represent an important step forward.

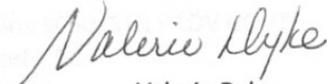
The time is right for the Minister and Island Health to remedy this situation in our community:

- An RFP for 70 new residential care beds allows Island Health to select service providers fully supportive of contemporary Canadian values and public policy.
- The RC Views facility is old and requires complete reconstruction to meet modern residential care standards.
- GVL, with investment, could become a wonderful Community of Care – there is ample room for expansion and the site is close to the new Comox Valley Hospital.

We hope that your plans to rectify this situation are made public by year end. If not, then we will pursue this issue through other avenues. Please give our citizens their right to medical assistance in dying, prevent inhumane suffering and allow all our citizens to die with dignity according to their choice.

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Respectfully Submitted on behalf of petitioners by the Equal Access Comox Valley Executive Committee:



Valerie Dyke



Jenny Steel



Brian Dolan

Please direct all correspondence or queries regarding this submission to:

Brian Dolan
Secretary, Equal Access Comox Valley
495 Curtis Road
Comox, BC, V9M 3W1
Tel: 250-702-1158
Email: bd_dolan@me.com

Website: Equal Access Comox Valley: www.equalaccesscomoxvalley.ca
General Email: infoequalaccesscomoxvalley@gmail.com

The petition, covering letter and the addendum have been formally submitted to the Island Health Board of Directors.

This letter and addendum have also been sent by Email to:

The Honourable Stephen Dix	Minister of Health	HLTH.Minister@gov.bc.ca
Anne Kang	Parliamentary Secretary for Seniors	Anne.Kang.MLA@leg.bc.ca
Stephen Brown	Deputy Minister, Ministry of Health	hlth.dmoffice@gov.bc.ca
Isobel Mackenzie	Seniors Advocate	Info@seniorsadvocatebc.ca
Ronna-Rae Leonard	MLA Courtenay Comox	Ronna-Rae.Leonard.MLA@leg.bc.ca

Attachments: Petition for Secular Long-term Care in the Comox Valley – Background and Arguments
Petition Signature Sheets: Hardcopy – 2 volumes. Contact the secretary to arrange for access to originals.