

Funeral Consumers Advocacy of London and Windsor

(A Memorial Society)

Newsletter 2016

Annual General Meeting

Wednesday April 20, 2016 7:00 pm

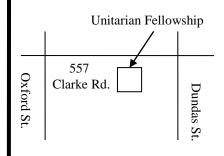
Unitarian Fellowship of London

557 Clarke Road

Speaker is: Shannon Calvert

Topic:
"Death Dialogues:
We Should Talk"

Coffee and refreshments will be provided



Greetings

You should be proud to be a member of this organization which is flourishing while many societies in Ontario have folded. In many locations the attempts to maintain an organization with outdated methods have frustrated and burned out the executive members of other memorial societies.

The London executive has continued to serve our existing membership but has moved forward to embrace modern methods. This newsletter is an example of our communications with our long-time members. As an attempt to reach new people we have had a professional web site produced. (See fcalw.org). More recently, a young volunteer has put up a very attractive Facebook page. We will continue to search out other methods that will present our philosophy of modest and respectful funerals to as many people as possible.

We continue to work for the members that were with the Windsor society. We have had no success in finding a member from there who is willing to be a Windsor representative. Please contact us if you can help.

Plea to Windsor members

We need volunteers to survey funeral establishments in the Windsor area so we can include a price information sheet for next year.

FOOMS-FCA

(Federation of Ontario Memorial Societies-Funeral Consumers Alliance)

The federation continues to exert its influence on funeral practices at the provincial level despite some set backs. The formerly vibrant group in Thunder Bay has decided to fold. On the other side, Kitchener-Waterloo looks like it might be reviving.

The big news in the Ontario funeral industry is the initiation of the new Bereavement Authority of Ontario. It will assume responsibility of policing the ethics in the practices of the funeral homes and cemeteries. It is organized using the provincial plan called DAA (Designated Administrative Authority).

It will investigate consumer complaints and have a code of ethics on which to base its decisions.

Current Executive

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Funeral Consumers Advocacy of London & Windsor Annual Financial Report 2016

Balance from Mar. 20,2015 \$11,651.11

Income

New memberships	\$60.00
LCF through DAYA	\$2380.00
Donations	\$180.00
Total income	\$2620.00

Expenditures

Bell	\$551.35
Supplies	\$166.38
Newsletter supplies	\$368.61
Masonville library room	\$16.95
PO box rental	\$244.08
FOOMS dues	\$117.00
Web page	\$691.42
McLeod mailing (newsletter)	\$383.14
Total expenditures	\$2538.93

Balance \$11,732.18

Sara B. Galsworthy, Treasurer

Privacy Policy

The personal information collected by the Memorial Society of London will not be sold to nor shared with any other organization.

We will treat personal information in ways that will protect it from theft.

The information will be used solely to conduct business within the society.

Home-based Funerals June Pinkney Hunter

The Funeral Consumer Advocacy is all about knowing one's choices in planning for after-death care and disposal. It is in favour of pre-planning, simplicity, dignity and moderate cost. Further than that, it does not recommend specific choices.

In order to pre-plan intelligently, one needs to know what choices are available, from a full funeral home service with visitation, embalming, and cemetery interment with vault, to a direct cremation with or without a service in a location of choice. Another choice about which little is known is holding a simple wake or visitation in the home with the non-embalmed body present. The author's spouse chose this option, a home-based funeral, several years ago and the experience is described below.

The practical aspects:

Preparation includes a decision about the professional helper. We made arrangements with a transfer operator (in the yellow pages listed as a Cremation Director), who helps decide the nature of the container for the body. We chose cardboard, placed appropriate linen in it and after we washed the body (a tender ritual) the transfer director placed the body in the container. The body was then transferred from the place of death, a long term care facility, to the house and we determined the best location in the house, found a solid base for it, (in our case, two saw-horses and a heavy door, covered by a beautiful velvet pall (available from the FCA) around which family members placed precious memorabilia, plants and pictures. If the wake is planned to last more than three days, a source of fresh air and a supply of dry ice would be wise. Otherwise, as in our case, dry ice is not necessary. The family children took part writing messages to their Poppy and making picture-presents on the cardboard container.

From the home the transfer director moved the body to the crematorium, cremation took place, ashes were delivered to the house, and a service was held in a place of worship.

Contact Us

To talk with our telephone contact person phone Amelia Wehlau at 519-649-1014

Or write us

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of London & Windsor
PO Box 1729
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Or
Visit our web site at

Here you will find much information about the organization including aims, services, and people.

www. fcalw.org

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An Update to Doctor-assisted Dying in Canada

Theresa Hamilton

This is a pivotal time in Canadian history. In the ground breaking case Carter vs. Canada, nine Supreme Court judges unanimously struck down the ban on assisted dying. By June a new federal law governing doctor-assisted dying is expected. The federal government was given one year to develop new legislation. It extended this window for six-months to make critical amendments to the Criminal Code. Until it is amended, section 241(b) of the Criminal Code states that "everyone who(b) aids or abets a person to commit suicide, whether suicide ensues or not, is guilty of an indictable offence and is liable to imprisonment for a term not exceeding fourteen years"(1). June will also mark the second anniversary of Quebec's "medical aid in dying" law, the first right-to-die legislation in Canada (passed June 2014). The federal government challenged this Quebec law but the Quebec Court of Appeal confirmed that the "medical aid in dying" law would stand in light of the Carter vs. Canada decision.

Distinguishing between passive and active euthanasia is important. Withholding or withdrawing life-preserving procedures including food and water, or passive euthanasia, has been legal in Canada since 1972. The prohibition of active euthanasia, the act of intentionally causing death to relieve pain was determined to violate section 15 of the Charter of Rights and Freedoms, and is considered unconstitutional. The medical world has struggled with this issue for decades. New laws are now being developed. For the first time, limitations of pain management in palliative care are being discussed on a legal level. Patient cases are now being considered on an independent basis.

Attention to the language regarding doctor assisted dying is critical. For example, the concept of "competency" is a key term being reviewed. The set of rules governing access to assistance will have to be made very clear as well. One issue is whether decisions should be made exclusively by physicians or should also involve a court, tribunal, committee or independent panel. These are fundamental changes in medicine and society. Hopefully this new legislation will properly fuel the discussion surrounding end of life care, instead of upsetting or misleading the public. As a community we ought to use this as an opportunity to educate each other and allow a conversation about dying that focuses on choices rather than fears.

¹ Kluge, Eike-Henner W. (2000), ""Assisted Suicide, Ethics and the Law: The Implication of Autonomy and Respect for Persons, Equality

and Justice, and Beneficence."", in Prado, C.G., Assisted Suicide: Canadian Perspectives, Ottawa, Canada: University of Ottawa Press, p. 83