Cannabis for medical purposes: Legal implications for nurses

By The Canadian Nurses Protective Society

January / February 2017

In recent years, the lawful use of marijuana for medical purposes (also known as cannabis for medical purposes) in Canada has been perpetually evolving. The most recent change in the landscape has been the coming into force of the Access to Cannabis for Medical Purposes Regulations (ACMPR) on Aug. 24, 2016; it replaced the Marihuana for Medical Purposes Regulations. This legislative change arose as a result of a federal court ruling in February 2016 allowing for reasonable and expanded access to cannabis for medical purposes for Canadians who have been authorized to use the substance by their health-care professional.

For nurses to be able to determine their roles in authorizing the use of or administering cannabis, they must understand the federal legislation that governs its use and the provincial/territorial legislation that regulates the relevant aspects of nursing practice, as well as any restrictions, guidelines and standards imposed on them by their regulatory bodies and their employers.

Issuing of medical documents

The use of cannabis for medical purposes is governed by the ACMPR. It authorizes health care practitioners — a defined term under the regulation — to provide a medical document to a patient that permits the lawful use of cannabis. These practitioners are also authorized to transfer or administer the substance to the patient. Furthermore, the ACMPR permits them to possess fresh or dried marijuana or cannabis oil for that purpose.

Under the ACMPR, health care practitioner is defined as a medical practitioner (physician) or a nurse practitioner who is “permitted to prescribe dried marihuana in the province in which they practise.” Accordingly, only physicians or NPs have the authority under federal legislation to issue medical documents for cannabis and to administer the substance.

Despite the authorizations set out in the ACMPR, each province or territory and its regulatory body has the ability to restrict its NPs’ involvement in these activities. For example, the regulatory bodies in British Columbia, Alberta and Saskatchewan have taken the position that NPs should not be involved in the issuing of medical documents pertaining to cannabis at this time. NPs must act in accordance with their
Registered nurses are not permitted to issue medical documents authorizing the use of cannabis for medical purposes.

**Administering cannabis**

To ensure they fall within the ACMPR’s definition of health-care professionals who are permitted to administer cannabis to a patient, NPs must confirm that their regulatory body permits them to issue an authorization for medical marijuana in their province or territory. They must also confirm that they are not expressly restricted from administering cannabis, even when they are provided with a medical document issued by a physician.

The ACMPR indicates that if a person other than a physician or an NP is “providing assistance in the administration” of the substance to someone who is authorized to use it, that person (such as an RN) may possess a limited quantity of the authorized user’s substance for the purpose of providing the assistance, while in the authorized user’s presence.

Given that the ACMPR is recent, there has been little opportunity for its clauses to be tested or interpreted in the courtroom. In light of the explicit authorization given to physicians and NPs to administer the substance, the corresponding lack of legislative authorization given to RNs to do so and the use of the phrase “providing assistance in the administration” of cannabis, it is recommended that RNs do not directly administer cannabis to patients at this time, even when they are provided with a valid medical document issued by an NP or a physician.

**Risk-management considerations**

As they would with the administration of any other substances and medications, NPs who contemplate authorizing the use of or administering cannabis will first consider whether they have sufficient knowledge and competency to do so. This includes having a proper understanding of the substance in its various forms, knowing how the form of the substance (e.g., dried or oil) may have an impact on the dosage, evaluating its effectiveness, and identifying and managing any adverse effects. They should also be familiar with their employer’s policies on the administration of cannabis, if such policies exist.

RN may receive requests from patients to assist in the administration of cannabis or they may consider whether to intervene if a patient admitted in a health-care facility seeks to self-administer cannabis. In such cases, the different forms of the substance add to the considerations for RNs:

- Is cannabis contraindicated with the existing treatment plan? A consultation with the most responsible health-care professional may be required.
- Is there a reliable means of authenticating the substance and determining the dosage? Patients who receive cannabis from a licensed producer will be able to present the substance in a container that will have the description of the content, the dry cannabis equivalent, the name of the authorizing professional and the expiry date.
- Will the health-care facility allow patients to smoke or vaporize dried medical marijuana? If so, how will this practice be facilitated in light of any no-smoking bylaws and to ensure that other patients,
staff and visitors are not inadvertently exposed to the substance during the course of administration?

With the legislation changing, case law continuing to evolve and the prospect of the legalization of cannabis on the horizon, nurses will need to ensure they continue to stay up to date on the laws affecting their scope of practice and any permissions or restrictions their regulatory body or employer may implement.

CNPS beneficiaries are encouraged to call 1-844-4MY-CNPS (1-844-469-2677) to obtain legal advice and guidance on this issue. They are also invited to register for an upcoming webinar on the topic. More information and a complete listing of webinars are available at cnps.ca.

DISCLAIMER: This article is for information purposes only. Nothing in it should be construed as legal advice from any lawyer, contributor or the CNPS. Readers should consult legal counsel for specific advice.

The Canadian Nurses Protective Society

The Canadian Nurses Protective Society is a not-for-profit society that offers legal advice, risk-management services, legal assistance and professional liability protection related to nursing practice in Canada to over 100,000 eligible registered nurses and nurse practitioners.