



College of Licensed Practical  
Nurses of Manitoba



College of  
Registered Nurses  
of Manitoba



THE COLLEGE OF  
REGISTERED PSYCHIATRIC NURSES of MANITOBA

# **Medical Cannabis: Guidelines for Manitoba Nurses**

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## Purpose

*\*In this document, the word nurse refers to licensed practical nurses (LPNs), registered nurses (RNs) and registered psychiatric nurses (RPNs).*

Nurses must recognize they do have a role when working with clients who use cannabis for medical purposes.

This document was developed by the College of Licensed Practical Nurses of Manitoba (CLPNM), the College of Registered Nurses of Manitoba (CRNM) and the College of Registered Psychiatric Nurses of Manitoba (CRPNM) to help nurses interpret the federal and provincial regulations as they apply to practice in Manitoba.

Professional nursing practice standards, practice expectations and codes of ethics for each of the three nursing professions in Manitoba underpin the guidance provided within this document. All nurses are required to practise within their own level of competence, and in accordance with their education, training and professional scope of practice.

The use of cannabis for medical purposes is an emerging trend in health care. Therefore, this document contains information that is known and available to the three nursing regulators at the time of publication. As this health care trend continues to evolve and more becomes known about this practice, the nursing regulators will continue to communicate additional guidance to Manitoba's nurses.

## Federal Legislation

As of October 2018, the federal *Cannabis Act* is in force, as are the *Cannabis Regulations* which have repealed and replaced the former *Access to Cannabis for Medical Purposes Regulations* (ACMPR).

The *Cannabis Act* and the *Cannabis Regulations* are now the primary law governing cannabis across the country. This legislation has introduced changes in the legal authority to possess and distribute certain amounts of cannabis in Canada, including for medical purposes. These changes have implications for nurses' authority to administer medical cannabis in Manitoba.

In particular, changes from the former legislation now authorize nurses to possess and administer medical cannabis in community settings, as well as in hospitals and personal care homes. This authority is subject to conditions which are discussed further below.

## Administering Cannabis in the Community

The *Cannabis Regulations* authorize:

- an "adult," which is defined broadly enough to include a nurse who is 18 years of age or older (section 264(1)),
- who possesses cannabis:
  - for the purpose of assisting with the administration of medical cannabis,
  - to an individual who is in both in their presence and authorized to use it (section 266(1)(f)),
- to also "administer, give, transfer, provide or otherwise directly make available" a legal amount of cannabis to that individual in a public space (see section 269(2)).

There are no explicit references to nurses and their authority to administer medical cannabis in the legislation, with the exception of RN(NP)s (see more below). However, based on the provisions cited above, Manitoba's three nursing regulatory Colleges interpret that nurses may administer, or assist with the administration of, legally obtained cannabis that has been medically authorized for a client in a community care setting.

The *Cannabis Regulations* set out the maximum amount of cannabis that any adult may possess for the purpose of administration or assisting with administration in a public space. This amount is an amount equivalent to the lesser of:

- the daily quantity of dried cannabis that is indicated for the individual on a registration document, registration certificate, or on a hospital label, or
- 150 grams of dried cannabis (see section 266(6)).

Note 1 gram of dried cannabis = 70 g non-solid containing cannabis or 0.25 grams cannabis concentrate. See section 2(4) and Schedule 3 of the *Cannabis Act*. The sections of the *Cannabis Regulations* cited above refer to possession, administration and assisting in a public place. Note that the definition of public place includes any place to which the public has access by right or by invitation, express or implied (see the *Cannabis Act*, section 2(1)). One of the key features of this definition is access by invitation, which would include a client's home, if the nurse is allowed to enter with either an expressed or implied invitation.

Nurses should also be aware that Manitoba regulations under *The Smoking and Vapour Products Control Act* allow people who use medical cannabis to medicate in some public places. For specific information, see [Cannabis in Manitoba](#) on the Manitoba government website.

### Administering Cannabis in Hospitals and Personal Care Homes (PCH)

Under section 348(2) of the *Cannabis Regulations*, an employee of a hospital, such as a nurse, may administer medical cannabis to a client who is under treatment as an in-patient or out-patient in hospital as long as the following criteria are met:

- this role is authorized for the nurse by the administration of the hospital, for example, in the form of a written policy that supports the practice,
- the client has a valid medical document or written order that authorizes their access to medical cannabis, and
- the medical cannabis is received from either a holder of a license for sale or a holder of a license for processing. (See 348(2) of the *Cannabis Regulations*).

This authority is similar to that which existed prior to the enactment of the *Cannabis Act* and *Cannabis Regulations*.

Although section 348(2) of the *Regulations* refers only to hospitals, the definition of a hospital is broad enough to capture personal care homes designated under provincial legislation in Manitoba.

Before administering medical cannabis in a hospital and personal care home, the nurse should seek to know, understand and follow the policy set by the hospital or personal care home, as long as the policy falls within the legislation.

Nurses should also note that, although the federal legislation authorizes hospital employees to administer legally obtained cannabis that is authorized by a medical document "or" written order, nurses must

continue to practice in accordance with their professional expectations, which include obtaining an order prior to the administration of medication.

## Administering Cannabis in All Settings

Despite the practice setting, before administering cannabis to any client, the nurse must:

- understand and abide by applicable organizational policies and procedures,
- confirm that the client has agreed to use cannabis,
- confirm that the client has a written order that authorizes the client's use of medical cannabis,
- confirm that the nurse has the knowledge, skill and judgment necessary to administer medical cannabis, and
- apply the principles for safe medication practices in the administration of cannabis, including but not limited to the right drug, right dose, right patient, right route, and right time.

This is achieved by reviewing the client's health record, the medical document and written order authorizing the use of cannabis, the label or equivalent document issued by a holder of a license for sale or processing, and the client's identity.

If the nurse has any concerns about the validity of the client's authorizing documentation, the cannabis products, or organizational policies, the nurse should not administer the product. Here, the nurse should report their concerns directly to the authorizing practitioner (e.g. RN(NP) or physician) and/or the employer as appropriate.

## The Role of RN(NP)s

RN(NP)s hold the same authority as RNs to practice, which includes the authority to administer medical cannabis as described above.

In addition, RN(NP)s are authorized to provide a medical document or written order, allowing clients to access cannabis for medical purposes. Under section 272(1) of the *Cannabis Regulations*, only RN(NP)s or physicians have the authority to issue such a document. The RN(NP)'s practice is further supported by a CRNM Practice Direction. Please refer to the Practice Direction *Authorization of Cannabis for Medical Purposes* for more information.

## Every Nurse's Role

Regardless of a nurses' personal stance on cannabis use, they must continue to engage in discussions and be open to having these conversations with their clients. It is the responsibility of all nurses to be well-informed, ask questions and consult with their employer and/or regulatory nursing authority when they are unsure of what to do. Employers are encouraged to develop supportive policies that provide guidance for nurses around administering cannabis.

Nurses who care for clients who use cannabis should continue to:

- provide a thorough nursing assessment,
- evaluate the impact of cannabis,
- have discussions about prescribed, non-prescribed and illicit drug use,
- identify, manage and appropriately communicate potential adverse reactions,

- accurately document assessments, interventions, and outcomes related to cannabis use,
- educate and counsel clients to support independence and informed, autonomous decision-making, and
- store, transport and dispose of cannabis products in accordance with regulation and appropriate organizational policies.

Whether a client's cannabis use is medically authorized or not, nurses must use this information to inform the nursing process and use their knowledge, skill and judgment during nursing care delivery. It is also expected that nurses understand and practise according to federal and provincial regulations, applicable professional regulatory standards, practice directions, guidelines and organizational policies related to all aspects of cannabis for medical purposes.

With cannabis legislation changing, nurses are expected to be informed of the potential impact to their practice.

## Definitions

**Adult:** an individual who is 18 years of age or older.

**Cannabis:** Any raw preparation of the leaves or flowers from the plant genus cannabis. Cannabis includes cannabinoids but does not include approved pharmaceuticals that contain derivatives of or are synthesized from the cannabis plant.

**Distribute:** administering, giving, transferring, transporting, sending, delivering, providing or otherwise making available in any manner, whether directly or indirectly, and offering to distribute.

**Marijuana:** A nickname for cannabis from Mexican origin. The term marijuana is often used in reference as a recreational drug.

**Public place:** Includes any place to which the public has access by right or by invitation, express or implied, and any motor vehicle located in a public place or in any place open to public view.

## Resources

Canadian Centre on Substance Use and Addiction (2024). *What does research say about treating medical conditions with cannabis and cannabinoids?* [Canadian Centre on Substance Use and Addiction \(ccsa.ca\)](https://www.ccsa.ca).

Canadian Nurses Protective Society (2018). [Access to Cannabis for Medical Purposes: What Every Nurse Should Know. www.cnps.ca](https://www.cnps.ca).

Care Inspectorate (2015). [Prompting, assisting and administration of medication in a care setting: guidance for professionals.](#)

Government of Canada (2018). [Cannabis Act S.C. 2018, c.16.](#)

Government of Canada (2018). [Cannabis Regulations SOR/2018-144.](#)

Government of Manitoba (2018). [The Safe and Responsible Retailing of Cannabis Act \(Liquor and Gaming Control Act and Manitoba Liquor and Lotteries Corporation Act Amended\) S.M. c. 9.](#)

Government of Manitoba (2018). [The Smoking and Vapour Products Control Act C.C.S.M. c. S150.](#)

Government of Manitoba (2015). [Health Services Insurance Act C.C.S.M. c. H35.](#)

Health Canada (2018). [Information for Health Care Professionals: Cannabis \(marihuana, marijuana\) Products](#).

Public Health Agency of Canada (2019). *Canada's Lower-Risk Cannabis Use Guidelines*. [Canada's lower-risk cannabis use guidelines - Canada.ca](#).

## Contact Information

If you have questions, you can contact a Practice Consultant at one of Manitoba's nursing colleges:

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