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## POLICY SCAN: THE USE OF MEDICAL CANNABIS IN PERSONAL CARE HOMES

### ABSTRACT

Medical cannabis refers to the prescription of cannabis to a patient by a healthcare provider, including nurse practitioner or physician, primarily aimed at treating chronic pain syndromes, spastic diseases, etc. Cannabidiol, a compound of cannabis, has been shown to have medicinal properties that can eliminate pain from the body. Cannabis and the medicinal properties remain an active area of enquiry and research.

Canada legalized the use of medical cannabis in October 2018, increasing access of cannabis for both recreational and medicinal purposes. Medical cannabis is purchased from a Health Canada licensed producer and must have a certificate indicating its origin. Seniors living in personal care homes tend to suffer from multi-system disease. The purpose of this study was to evaluate the existing policies on the use of medical cannabis in personal care home facilities located in Newfoundland and Labrador, Canada. This study used SurveyMonkey software to obtain responses from administrators of the 81 personal home care facilities in the province. The data were analyzed using statistical data methods, and inferences, conclusions, and recommendations are outlined.

### BACKGROUND

Medical cannabis is marijuana that a qualified medical practitioner prescribes for patients after a comprehensive assessment.<sup>1</sup> It is primarily prescribed to patients suffering from moderate-to-severe pain from chronic diseases such as cancer.<sup>2</sup> The medicinal use of cannabis has not been adequately tested for possible side effects and interactions with other drugs due to government restrictions.<sup>3</sup> In 2018, Canada legalized the use of medical cannabis; however, there is a lack of policies in many areas regarding its usage.<sup>4</sup> Seniors are the most affected

by chronic pain due to various diseases and illnesses that affect their overall health status.

Despite substantial improvements in access to medical cannabis for Canadians, a great part of the elderly population residing in personal care homes continues to experience limited access.<sup>4</sup> Besides, many personal care homes in Canada have not yet adopted policies on its use within their premises. The purpose of this study was, therefore, to assess medical cannabis policies at personal care homes throughout Newfoundland and Labrador, Canada.

### METHODOLOGY

The purpose of this study was to establish whether there are existing policies put in place by personal care homes in the province of Newfoundland and Labrador, Canada, in relation to the use of medical cannabis within their premises. This study used a purposive sampling method to target all personal care homes in the previously mentioned region. The target population was all 81 personal care homes located in the area. The subjects of the study were the administrative heads of these homes who were in charge of policy formulation in their domain of work.

A survey questionnaire was developed and distributed online to all the research participants to give their responses. Respondents were asked to indicate their level of knowledge of the use of medical cannabis and if there existed any facility policy in relation to medical cannabis. The questionnaires were collected for analysis. The results were analyzed using quantitative data analysis methods and SPSS software. Statistical analyses were also carried out to make inferences, conclusions, and recommendations.

## RESULTS AND FINDINGS

This study was carried out using SurveyMonkey, an online cloud-based survey software, for data collection. The survey questionnaires were distributed, via email, to all administrative contacts for the 81 personal care home facilities for the elderly in the Newfoundland and Labrador regions. By a purposive sampling method done through phone conversations, home administrators were identified and targeted for the survey. They were requested to indicate their level of agreement with the questions by completing the survey questionnaires and returning them for data analysis. The response rate for the study was 77%, with 62 out of the targeted 81 personal care home facilities successfully filling the questionnaires and returning them. This percentage is significant enough to make conclusions and generalizations.

### THERE SHOULD BE DESIGNATED CANNABIS USE AREAS WITHIN THE PROPERTY FOR RESIDENTS WHO HAVE BEEN PRESCRIBED CANNABIS BY THEIR HEALTHCARE PROVIDER.<sup>9</sup>

The administrators were asked if they had a policy on the use of medical cannabis by residents living in their facilities, and 100% of the respondents said that they had no such policy. Depending on whether the facility had a policy or not, the research participants were asked to indicate which statement reflected their attitudes on formulating a policy on cannabis use by residents in the facility. Their responses were: 57% agreed that it was quite important for their facilities to adopt a policy on the use of cannabis within their premises by residents, 14% felt that it was somewhat important to have a policy on cannabis use within their premises, while 29% of the respondents felt that it was not important to have a policy on cannabis use within their premises. The respondents were also asked to indicate their knowledge on the medical use of cannabis, where 43% said they were very knowledgeable, 57% had limited knowledge, whereas none had no knowledge on the use of marijuana for medicinal purposes. Amongst the 62 facilities that successfully filled the questionnaire, 14% were located in urban areas, while 86% were located in rural regions with none located in remote areas.

A case study was also carried out to get the first opinion of some of the residents in the personal care facilities. One resident, who will be identified by her initials as VP for privacy reasons, was a 78-year-old female who had been previously diagnosed with chronic pain secondary to fibromyalgia, occasional insomnia, and anxiety. She had been prescribed several medications commonly used for patients suffering from related conditions. However, her condition never improved, but instead, she suffered from multiple severe side effects from drug interactions.<sup>5</sup> Having read online about the medicinal use of cannabis to reduce pain, her daughter suggested that VP should consider a trial of medical cannabis. The daughter then proceeded to the office of the personal care home administrator to enquire how she could obtain a medical document for medical cannabis for her ailing mother. The administrator was categorical that no residents were allowed to use cannabis in the facility. The administrator also doubtfully expressed concern if cannabis had any known medicinal properties that would improve the health condition of her mother.<sup>6</sup> From this response, VP became upset and disillusioned because she felt that her only chance to potentially improve her health condition was compromised and she would never know what could have happened if she was allowed to use cannabis for therapy in the facility.

## CONCLUSIONS

From the findings, it can be concluded that the majority of the personal care homes in Newfoundland and Labrador have not yet developed policies on the use of medical cannabis by the residents within their premises. Personal care home administrative staff do not possess adequate information regarding the benefits of medical cannabis and how it can significantly improve the health of the seniors.<sup>7</sup> As well, staff do not have the right perceptions and attitudes regarding the medical use of cannabis and need to be trained to improve their knowledge on the health benefits of medical cannabis. Seniors living in personal care home facilities are being denied their right to access medical cannabis. This trend should be reversed as the medical use of cannabis is now legalized in Canada and no one should be denied this fundamental right.<sup>8</sup>

## POLICY RECOMMENDATIONS

Personal care homes need to define and adopt a policy on the use and storage of cannabis specific to their premises. There should be a contract clause requiring

residents to produce a purchase certificate, or medical document, from a legal cannabis licensed producer before they can be permitted to use cannabis within the facility. Residents should be responsible for the storage of cannabis in their personal lockers which should be locked at all times, and free from access by any unauthorized person. Administrative staff should be strictly prohibited from assisting any resident in accessing cannabis with adverse consequences. A policy on medical cannabis use is essential to ensure the safety of all residents in the personal care home cannabis.<sup>10</sup> There is a need to grant senior residents residing in personal care homes limited access to medical cannabis without endangering the safety and security of the rest of residents and members of staff.

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