

Pages 1 through 6 redacted for the following reasons:

S. 13, 14, 16

**FEDERAL/PROVINCIAL/TERRITORIAL (FPT) MEETING OF
MINISTERS RESPONSIBLE FOR JUSTICE**

**Regina, Saskatchewan
October 31 – November 1, 2012**

AGENDA TOPIC: Medical Marijuana

ISSUE: Risks associated with medical marijuana grow operations were raised as a major issue at the 2012 UBCM Conference and the Minister noted that she would convey these concerns to Health Canada during FPT meetings.

MINISTRY'S SUGGESTED RESPONSE:

s.13, s.14, s.16

BACKGROUND:

Health Canada's Marihuana Medical Access Regulations (MMAR) grants access to medical marijuana through a licensing program. There are three types of medical marijuana licences currently available to individuals: (1) authorization to possess; (2) personal-use production; and (3) designated person production licence.

Currently there are more than 15,000 people are licensed to grow medical marijuana in Canada, and, in BC, there are 4,986 personal use production licences and 1,598 designated person production licences. The vast majority of these medical MGOs are situated within residential homes.

Medical MGOs contain the same potential for health and safety risks associated with other MGOs. Dangers include: a significant increase in property fires; electrical bypasses and jury-rigged electrical wiring; natural gas by-passes; heating and ventilation modifications with an inherent risk of carbon monoxide poisoning; contamination of drinking water and sewer systems through the illegal disposal of hazardous chemicals; contamination of household surfaces; damage to structural walls and supports; damage to foundations; and mould and fungus build-up. Drug production properties including medical MGOs, are also associated with residual crimes, home invasions, break and enters, robberies, counterfeiting, money laundering, and weapons and firearms offences.

Compounding these risks are the following issues:

- Medicinal MGOs are not adequately regulated by Health Canada to ensure growers do not produce above their license limits for the number of plants or that the MGOs are in adherence with local bylaws and/or building or electrical code.
- Health Canada does not conduct a criminal record check on applicants for production licenses and better screening procedures are needed to reduce risk of these licences being approved for individuals with links to organized crime.
- Despite the fact that medical MGOs pose many of the same health and safety risks as illegal MGOs, medical MGOs are not regularly inspected by Health Canada, in part, due to minimal staff resources (there are only five Health Canada inspectors for all of Western Canada).
- Citing privacy reasons, Health Canada does not disclose address or other information about production licenses to law enforcement agencies or public bodies (unless police request specific addresses for deconfliction with an investigation). This means that medical MGOs are also not inspected by local government or safety officials.

To address some of these issues, Health Canada is working to reform the MMAR, and is reportedly

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According to the "Proposed Improvements to Health Canada's Marihuana Medical Access Program", Health Canada is proposing the following changes to the MMAR:

- Individual users would no longer be required to submit information to Health Canada and Health Canada would no longer be licensing individuals to possess marijuana. Instead, a new document would be provided by physicians to the individual and, in turn, they would submit this document directly to a licensed commercial producer.
- The only legal source of dried marijuana would be commercial producers. These commercial producers would be licensed by Health Canada.
- Commercial producers would be required to demonstrate fulfillment of Health Canada requirements (e.g. pre-qualification and pre-licence inspections, personnel with specific qualifications, record keeping and reporting, product quality, product packaging and labelling standards, security of premises, and proper disposal of excess product).
- The existing production licenses in homes and communities would be phased out over time (whether producing for oneself or others).
- The price of medical marijuana would be determined by the commercial producers and licensed producers could supply program participants with marijuana by registered mail or by bonded courier.

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Pages 10 through 150 redacted for the following reasons:

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Drugs and Health Products

Consultation on Proposed Improvements to the Marihuana Medical Access Program

The Marihuana Medical Access Program (the Program) provides seriously ill Canadians with reasonable and legal access to marihuana for medical purposes.

In response to concerns heard from Canadians, the Government of Canada announced on June 17, 2011 that it is considering improvements to the Program. The proposed improvements would reduce the risk of abuse and exploitation by criminal elements and keep our children and communities safe.

The news release announcing the proposed improvements to the Program is available at: [Government of Canada Considers Improvements to the Marihuana Medical Access Program to Reduce the Risk of Abuse and Keep our Children and Communities Safe](#).

Health Canada would like to hear from Canadians about the improvements under consideration. Interested Canadians will have an opportunity to comment on the proposed improvements starting June 17, 2011. The comment period will close on July 31, 2011.

How to Get Involved

Interested Canadians are invited to provide feedback on a short discussion document by clicking on the link below titled "Consultation Document". Comments may be submitted, in English or French, by using the Feedback Form below, or by email, fax, or mail.

Email: consultations-marihuana@hc-sc.gc.ca

Fax: 613-946-4224

Mail:

Marihuana Consultations
Controlled Substances and Tobacco Directorate
Health Canada
Mail Room, Federal Records Centre - Bldg 18
1st Floor, 161 Goldenrod Driveway, Tunney's Pasture
Ottawa ON K1A 0K9

Please note, during the Canada Post strike, Health Canada would like to remind its clients to use alternative means, such as a licensed courier, email, or fax to submit comments to the Department.

[Consultation Document](#)

Comments received during this consultation process will be considered carefully as Health Canada moves forward with this initiative. Comments will only be accepted until July 31, 2011.

Feedback Form

This information is being collected for the purpose of obtaining your views on possible improvements to the Program. Any personal information that you provide is protected under the provisions of the [Privacy Act](#). The Act includes a right of access to and correction of personal information. To further safeguard privacy, you should ensure that any written comments you provide are sufficiently general that you cannot be identified as the author and that individual identities are not disclosed. This collection is described in the [Standard Personal Information Bank on Outreach Activities \(PSU 938\)](#). Should you require clarification about this Statement, contact our [Access to Information and Privacy Coordinator](#).

The transmission of this information is not secure and so sensitive personal information, for example, your Social Insurance Number, should not be included in your message.

Your message :

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Supporting Information

For more information on the proposed improvements to the Marihuana Medical Access Program, please see [Frequently Asked Questions and Answers](#).

For more information go to [Canada's Marihuana Medical Access Program](#) or the [Marihuana Medical Access Regulations](#).

Reporting to Canadians

Health Canada will publish a summary of input received during this consultation process.

If you have any questions, contact us at consultations-marihuana@hc-sc.gc.ca.

Date Modified: 2011-06-17



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About Health Canada

Government of Canada Considers Improvements to the Marihuana Medical Access Program to Reduce the Risk of Abuse and Keep our Children and Communities Safe

News Release

2011-80

June 17, 2011

For immediate release

Backgrounder: Marihuana Medical Access Program

OTTAWA - To reduce the risk of abuse and exploitation by criminal elements and keep our children and communities safe, the Honourable Leona Aglukkaq, Minister of Health, today announced that the Government of Canada is considering improvements to the Marihuana Medical Access Program.

"Our Government is very concerned that the current Marihuana Medical Access Program is open to abuse and exploitation by criminal elements," said Minister Aglukkaq. "That is why we are proposing improvements to the program that will reduce the risk of abuse and keep our children and communities safe, while significantly improving the way program participants access marihuana for medical purposes."

The Government is launching public consultations today with Canadians on the proposed improvements. A consultation document has been posted on the Health Canada website which contains the proposed improvements. Interested Canadians are invited to provide comments until July 31, 2011. Input from these consultations will be considered in the development of new regulations, which Canadians will again have an opportunity to comment on when the proposed regulations appear in *Canada Gazette*, Part I, in 2012.

"These proposed improvements reflect concerns we have heard from all kinds of Canadians including law enforcement, fire officials, municipalities, program participants and the medical profession," said Minister Aglukkaq.

It is important to note that the legalization or decriminalization of marihuana is not a part of these improvements. Marihuana will continue to be regulated as a controlled substance under the *Controlled Drugs and Substances Act*.

Until improvements to the program are in place, the process for applying for an authorization to possess and/or a license to produce marihuana for medical purposes under the *Marihuana Medical Access Regulations* will remain the same.

Canadian Courts have established that individuals who have demonstrated a medical need for marihuana have a right under the *Canadian Charter of Rights and Freedoms* to possess and access a legal supply of marihuana. In recognition of a need for a process to provide seriously ill Canadians with access to marihuana for medical purposes, the Government introduced the *Marihuana Medical Access Regulations* in 2001. Activities including possession, production and trafficking of marihuana other than as authorized under the regulations remain illegal.

The consultation document, "[Proposed Improvements to Health Canada's Marihuana Medical Access Program](#)", is available online.

A summary of the proposed changes can be found in the attached backgrounder.

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Media Enquiries:

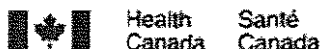
Health Canada
(613) 957-2983

Cailin Rodgers
Office of the Honourable Leona Aglukkaq
Federal Minister of Health
(613) 957-0200

Public Enquiries:

(613) 957-2991
1-866 225-0709

Date Modified: 2011-06-17



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About Health Canada

Marihuana Medical Access Program

News Release: Government of Canada considers improvements to the Marihuana Medical Access Program to Reduce the Risk of Abuse and Keep our Children and Communities Safe

June 2011

The Government of Canada is considering changes to the Marihuana Medical Access Program to reduce the risk of abuse and exploitation by criminal elements and keep our children and communities safe.

Health Canada would like to hear from Canadians on the proposed improvements. A consultation document has been posted on our website, and Canadians are invited to submit their comments by July 31, 2011.

How the Current Marihuana Medical Access Program Works

Under the current Program, individuals wishing to use marihuana for medical purposes must first obtain a declaration from a licensed medical practitioner who confirms that dried marihuana is going to be used to alleviate a specific symptom associated with an identified medical condition.

The individual then applies to Health Canada to be authorized to possess dried marihuana. Once authorized to possess, an individual has three options for accessing a legal supply of marihuana:

- purchase marihuana from Health Canada;
- produce marihuana for themselves by applying for a personal-use production licence; or,
- designate someone to produce marihuana for them under a designated-person production licence.

The application process is rigorous, and requires personal information to be submitted to Health Canada, not only about individuals seeking access to marihuana for medical purposes, but also about those applying for a designated-person production licence. The application process can take up to 10 weeks.

Authorizations to possess marihuana for medical purposes and associated production licences are valid for a maximum of 12 months and must be renewed upon expiry. Program participants must also apply to amend their authorisations and/or licences, if certain key details change for themselves or for anyone else named on the application.

Individuals applying for a production licence must disclose to Health Canada the measures that they intend to put in place in order to ensure the security of the marihuana at the production and storage sites.

Proposed Changes to the Marihuana Medical Access Program

In recent years, a wide range of stakeholders, including police and law enforcement, fire officials, physicians, municipalities, and program participants and groups representing their interests, have identified concerns with the current program.

Some of the key concerns include:

- The risk of abuse and exploitation by criminal elements;
- the complexity and length of the application process for individuals who wish to obtain an authorization to possess and/or a licence to produce marihuana;
- the need for more current medical information for physicians pertaining to the risks and benefits associated with the use of marihuana for medical purposes;
- public health and safety risks associated with the cultivation of marihuana plants in homes, including electrical and fire hazards and the presence of excess mould and poor air quality.

Health Canada's proposed improvements to the program are intended to address these concerns in the following ways:

Streamlining the Process for Program Participants

Program participants would no longer have to submit application forms or personal medical information to Health Canada in order to obtain an authorization to possess marihuana. Instead, they would submit a document they obtain from their physician directly to a licensed commercial producer. Furthermore, marihuana produced by licensed commercial producers would be subject to quality standards, unlike marihuana that is produced by individuals under the current program.

Making the Program Less Complicated for Seriously Ill Canadians

Health Canada is proposing to eliminate the administrative categories of conditions or symptoms for which an individual may possess marihuana for medical purposes under the MMAR. The determination as to whether the use of marihuana for medical purposes is appropriate for a particular individual would still be made through a discussion between a physician and a patient.

Improving Physician Access to Comprehensive, Accurate and Up-to-Date Information

Health Canada will establish an expert advisory committee to improve physician access to comprehensive and up-to-date information on the potential risks and benefits of using marihuana for medical purposes. This will facilitate informed decision-making between individuals and their physicians with respect to the use of marihuana to treat particular symptoms and/or conditions.

Making Communities Safer

To reduce potential risks of abuse by criminal elements and keep our children and communities safe, a new supply and distribution system for dried marihuana would be established that uses only licensed commercial producers. Personal-use and designated-person production licenses would be phased out and individuals would no longer be able to grow marihuana for medical purposes in their homes and communities.

The Government would no longer contract for the production and distribution of dried marihuana or marihuana seeds for medical purposes. Licensed commercial producers would be regulated by Health Canada and be the only legal source of dried marihuana for medical purposes. Health Canada would regularly inspect and audit these licensed commercial producers to ensure they

comply with all applicable regulations.

Regulation of Marihuana in Canada

Legalization or decriminalization of marihuana is not part of these changes.

Marihuana continues to be regulated as a controlled substance in Canada under the *Controlled Drugs and Substances Act*. This means that all activities, e.g., possession, possession for the purposes of trafficking, production, importation, exportation, trafficking, and possession for the purposes of exporting, are illegal except as authorized by regulation. Illegal activities associated with marihuana are considered to be criminal offences and may be subject to the penalties set out in the *Controlled Drugs and Substances Act*.

Canadian Courts have established that individuals who have demonstrated a medical need for marihuana have a right under the *Canadian Charter of Rights and Freedoms* to possess and access a legal supply of marihuana. In recognition of a need for a process to provide seriously ill Canadians with access to marihuana for medical purposes, the Government introduced the *Marihuana Medical Access Regulations* in 2001.

Date Modified: 2011-06-17



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Drugs and Health Products

Proposed Improvements to Health Canada's Marihuana Medical Access Program

Consultation Document

June 17, 2011

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1. Introduction

The Marihuana Medical Access Program (the Program) provides seriously ill Canadians with access to marihuana for medical purposes¹. In recent years, a wide range of stakeholders including police and law enforcement, fire officials, physicians, municipalities, and program participants and groups representing their interests, have identified concerns with the current program.

Some of the key concerns raised include:

- the potential for diversion of marihuana produced for medical purposes to the illicit market;
- the risk of home invasion due to the presence of large quantities of dried marihuana or marihuana plants;
- public safety risks, including electrical and fire hazards, stemming from the cultivation of marihuana in homes;
- public health risks due to the presence of excess mould and poor air quality associated with the cultivation of marihuana plants in homes;
- the complexity and length of the application process for individuals who wish to obtain an authorization to possess and/or a licence to produce marihuana;
- the impact of increasing participation in the Program on the efficiency and timeliness of the application and review process;

- the fact that Health Canada only supplies one strain of dried marihuana; and,
- the need for more current medical information pertaining to the risks and benefits associated with the use of marihuana for medical purposes, as a means of supporting discussions between physicians and their patients as to whether such treatment is appropriate.

To address these concerns, Health Canada is considering improvements to the Program. The proposed improvements would reduce the risk of abuse and exploitation by criminal elements and keep our children and communities safe.

In this regard, Health Canada would like to hear from Canadians about the improvements under consideration. You are invited to provide comments on this document.

The legalization or decriminalization of marihuana is not part of these changes. Marihuana will continue to be regulated as a controlled substance under the *Controlled Drugs and Substances Act* (CDSA).

Until any of the proposed improvements to the Program are in place, the process for applying for an authorization to possess and/or a licence to produce marihuana for medical purposes under the *Marihuana Medical Access Regulations* (MMAR) will remain the same.

2. How to Comment on this Document

The proposed improvements outlined in Sections 3 to 7 of this document represent the foundation of a redesigned program that addresses many of the concerns the Government of Canada has heard about the current program.

If you are interested in providing comments on this document, please do so by July 31, 2011.

By Email: consultations-marihuana@hc-sc.gc.ca

By Fax: 613-946-4224

By Mail:

Marihuana Consultations
Controlled Substances and Tobacco Directorate
Health Canada
Mail Room, Federal Records Centre - Bldg 18
1st Floor, 161 Goldenrod Driveway, Tunney's Pasture
Ottawa ON K1A 0K9

Please note that Health Canada is committed to reviewing and considering all comments received by July 31, 2011.

3. The Improvements under Consideration

The improvements being considered would not alter the Program's intent to provide seriously ill Canadians with reasonable access to a legal source of marihuana for medical purposes, where conventional treatments are not appropriate and/or have failed to provide necessary relief.

The core of the redesigned Program would be a new, simplified process in which Health Canada no longer receives applications from program participants. A new supply and distribution system for dried marihuana that relies on licensed commercial producers would be established. These licensed commercial producers, who would be inspected and audited by Health Canada so as to ensure that they comply with all applicable regulatory requirements, would be able to cultivate any strain(s) of marihuana they choose. Finally, the production of marihuana for medical purposes by individuals in homes and communities would be phased out.

Individuals wishing to use marihuana for medical purposes would still be required to consult a physician who is licensed to practice medicine in Canada.

4. How the Proposed Redesigned Program Would Work

4.1 Physician-Patient Interaction

- Health Canada maintains that the determination as to whether the use of marihuana for medical purposes is appropriate for a particular individual is best made through a discussion with their physician. In this regard, Health Canada is proposing to eliminate the categories of conditions or symptoms for which an individual may possess marihuana for medical purposes under the MMAR.
- Individuals would continue to be required to consult a physician to obtain access to marihuana for medical purposes. Since categories would be eliminated, there would no longer be a requirement for some individuals to obtain the support of a specialist in addition to their primary care physician in order to access marihuana for medical purposes.
- The existing medical declaration would be replaced by a new document provided by the physician to the individual. Health Canada will consult the medical community on the form this document will take.
- Individuals would no longer be required to submit information to Health Canada to be authorized to possess dried marihuana. Instead, they would submit their physician's document directly to a licensed commercial producer.
- Health Canada will establish an Expert Advisory Committee to improve physician access to comprehensive, accurate and up-to-date information on the use of marihuana for medical purposes, thereby facilitating informed decision-making with respect to the use of marihuana for medical purposes.
- Health Canada would work with the medical community, their provincial/territorial licensing authorities and their associations on the proposed improvements to the program.

4.2 Dried Marihuana Production and Distribution

- Under the proposed redesigned program, Health Canada would no longer enter into a contract with a commercial entity to supply and distribute dried marihuana and marihuana seeds.
- The only legal source of dried marihuana would be commercial producers, who would be licensed by Health Canada to produce and distribute dried marihuana. Individuals would purchase their supply of dried marihuana from one of these licensed commercial producers.
- Personal and designated production would be phased out.
- In order to be licensed by Health Canada, licensed commercial producers would have to demonstrate compliance with requirements related to, for example, product quality, personnel, record-keeping, safety and security, disposal and reporting, as set out in new proposed regulations. These controls would aim to ensure the quality of the product being purchased by program participants, as well as the security of production sites.
- Health Canada would establish a comprehensive compliance and enforcement regime for licensed commercial producers, centered on regular audits and inspections.
- Licensed commercial producers would be required to comply with specific product labelling and packaging requirements. The label and/or the package itself could be one way by which

a program participant could demonstrate that their supply of marihuana is legal.

- Licensed commercial producers would only be permitted to produce marihuana indoors.
- Licensed commercial producers would be able to produce any strain(s) of marihuana, thus giving individuals greater choice as to which strain(s) they wish to use.
- Licensed commercial producers would set the price for marihuana for medical purpose.
- Licensed commercial producers would only be able to send the dried marihuana they cultivate to individuals by registered mail or bonded courier.

5. Impact on Current Program Participants Holding an Authorization to Possess Marihuana for Medical Purposes

With the proposed redesigned Program, there would be no change to the important first step of an individual consulting with their physician in order to obtain access to marihuana for medical purposes. In response to concerns raised by the medical community regarding the clinical use of marihuana, Health Canada is committed to working with the medical community on the identification of reference information that supports appropriate physician-patient consultation on this issue.

Once it has been determined that the use of marihuana for medical purposes is appropriate, the physician would provide the individual with a document.

Individuals would then send the physician's document directly to a licensed commercial producer of their choice. The licensed producer would validate the document from the physician by confirming that the physician is licensed to practice medicine in Canada. The licensed producer would register the individual as a customer and would process the order for a specific amount of dried marihuana. Health Canada would maintain an up-to-date list of licensed producers on its website, and work with the medical community to disseminate this information as widely as possible. *how?*

The distribution of dried marihuana by licensed commercial producers to program participants would be by registered mail or bonded courier only.

Participants would no longer receive an authorization to possess or an identification card from Health Canada. Health Canada will consult on how best to establish that an individual is in lawful possession of a legal source of dried marihuana.

6. Impact on Current Program Participants Who Hold a Personal-Use or Designated-Person Production Licence

Within the proposed redesigned Program, only licensed commercial producers will be legally allowed to supply individuals with marihuana for medical purposes. Personal and designated production would be phased out.

That said, as the Government of Canada is committed to ensuring access to an uninterrupted legal source of dried marihuana, it will notify all holders of personal-use and designated-person production licences well in advance of the coming-into-effect of any improvements to the Program. A detailed transition plan will be shared with stakeholders when proposed regulations are pre-published in *Canada Gazette*, Part I.

7. Opportunity for Those Interested in Becoming a Licensed Commercial Producer

Health Canada is aware that transition to the proposed redesigned Program requires access to an adequate supply of dried marihuana to meet the needs of current and future Program participants. In this regard, Health Canada has identified compliance with requirements relating to the following aspects of production and distribution as being key to obtaining a commercial producer licence:

Dried Marihuana Production, Distribution and Disposition

- indoor production in a non-residential area;
- physical security standards;
- product quality standards;
- packaging and labelling standards; and
- requirements for the disposal of excess plant material, excess dried marihuana and/or expired dried marihuana.

Personnel

- designation of an individual responsible for managing the production and distribution of dried marihuana; and
- specific qualifications for all personnel involved in production and distribution.

Record-keeping and Reporting

- requirements to keep records relating to all on-site activities for a set period of time, and the ability to provide set records to Health Canada on request; and
- requirements for reporting on activities associated with the cultivation of marihuana and the distribution of dried marihuana.

Compliance and Enforcement

- pre-qualification audits and pre-licence inspections; and
- inspections and/or audits on an ongoing basis.

Annex: The Current Marihuana Medical Access Program

1. Regulation of Marihuana in Canada

Marihuana is included in Schedule II to the *Controlled Drugs and Substances Act* (CDSA), and as such, is regulated as a controlled substance in Canada. This means that all activities, e.g., possession, possession for the purposes of trafficking, production, importation, exportation, trafficking, and possession for the purposes of exporting, are illegal except as authorized by regulation. Illegal activities associated with marihuana are considered to be criminal offences and are subject to the penalties set out in the CDSA.

2. Program History

In 1999, Health Canada established the Marihuana Medical Access Program (the Program) so as to provide seriously ill Canadians suffering from grave and debilitating illnesses with access to a legal source of dried marihuana for medical purposes. In the original Program, Health Canada authorized individuals to possess marihuana and/or to produce a limited number of plants for medical use through exemptions issued under section 56 of the CDSA.

In July 2000, the Ontario Court of Appeal found fault with the discretionary way in which Health Canada was using Section 56 of the CDSA as the means of granting authorization to possess and/or produce dried marihuana for medical purposes. In response, Health Canada established the *Marihuana Medical Access Regulations* (MMAR).

The MMAR set out a scheme by which any seriously ill Canadian can, with a declaration from a physician, obtain an authorization to possess and/or a licence to produce dried marihuana for their own personal medical use. The MMAR also provide for an authorized person to designate someone to grow marihuana on their behalf. In 2003, the MMAR were amended to provide for the option for authorized persons to obtain dried marihuana or marihuana seeds for medical purposes by Health Canada. This supply is currently provided under contract by Prairie Plant Systems Inc.

Since 2003, the MMAR have been amended on a number of occasions, so as to streamline the Program, respond to stakeholder concerns and/or address additional court decisions.

3. How the Program Works Now

Eligibility

Under the current Program, individuals suffering from life-threatening or chronic medical conditions must first obtain the support of a licensed medical practitioner who completes a medical declaration stating that dried marihuana is going to be used to alleviate a specific symptom associated with an identified medical condition. The individual then includes this medical declaration in their application for an authorization to possess. To be authorized to possess marihuana, an individual's symptoms and conditions must fall within one of two possible categories:

Category 1: any symptom treated as part of compassionate end-of-life care or for symptoms related to specific medical conditions, namely:

- o Severe pain and/or persistent muscle spasms from multiple sclerosis, a spinal cord injury;
- o Severe pain, cachexia, anorexia, weight loss, and/or severe nausea from cancer or HIV/AIDS infection;
- o Severe pain from severe forms of arthritis; or,
- o Seizures from epilepsy.

Category 2: a debilitating symptom that is associated with a medical condition or with the medical treatment of that condition, other than those described in Category 1.

Authorization to Possess

If an individual's application meets all of the requirements set out in the MMAR, Health Canada must issue an authorization to possess marihuana for medical purposes to the applicant. The applicant's physician is always notified when an authorization to possess is issued.

Authorized individuals then have three options to obtain a supply of dried marihuana for medical purposes. They can:

1. Apply for a personal-use production licence authorizing them to grow their own supply of marihuana; or,
2. Designate someone to produce on their behalf under a designated-person production licence.
3. Purchase dried marihuana from Health Canada

Licensed Production

As set out above, there are two different types of licences to produce marihuana for medical purposes: personal-use production licences and designated-person production licences. All licences

set out specific terms and conditions applicable to the licence, including the maximum amount of marihuana a licence holder may possess at any one time, and the maximum number of plants that are allowed to be in cultivation at any one time.

¹ For more information about the existing Program and its history, please see the [Annex](#).

Date Modified: 2011-06-17

**MINISTRY OF PUBLIC SAFETY AND SOLICITOR GENERAL
POLICING AND SECURITY PROGRAMS BRANCH
BRIEFING NOTE**

PREPARED FOR: Clayton Pecknold, Assistant Deputy Minister
Policing and Security Programs Branch
FOR INFORMATION

ISSUE: Marihuana Medical Access Program

SUGGESTED RESPONSE

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BACKGROUND:

- Health Canada's Marihuana Medical Access Program provides access to marihuana for individuals suffering from grave or debilitating illnesses where conventional treatment are inappropriate or are not providing adequate relief. The program was established in 1999 through exemptions issues under section 56 of the CDSA. In July 2000, the Ontario Court of Appeal found the discretionary manner of issuing section 56 exemptions to be faulty and in response, Health Canada established the Marihuana Medical Access Regulations (MMAR).
- The MMAR set out a scheme whereby seriously ill individuals can, with a declaration from a physician, obtain an authorization to possess and/or a license to produce dried marihuana for their own personal use or have a person authorized to produce marihuana on their behalf.
- Health Canada is also contemplating changes to the physician-patient interaction as well to address access issues highlighted in an April 11, 2011, Ontario Superior Court ruling that declared the MMAR and sections 4 and 7 of the Controlled Drugs and Substances Act as constitutionally invalid and of no force and effect. Subsequently, on June 17, 2011, Health Canada announced an online consultation over proposed

changes to the MMAR that include a new supply and distribution system that would rely on licensed commercial producers who would be inspected and audited by Health Canada. The proposal would phase out the production of marihuana for medical purposes by individuals in homes and communities.

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STATUS:

- Provincial/Territorial consultation on Health Canada's proposed changes to the MMAR are to take place this fall. A teleconference with representatives from Health Canada, New Brunswick, Saskatchewan, and British Columbia is scheduled for September 19th, 2011. Policing and Security Programs Branch will work to coordinate a ministry response to the issue and will liaise with the Ministry of Health Services to ensure the broader provincial response is reflective of the concerns and priorities of this Ministry.

Prepared by:

Kjerstine Holmes
Director
Policing & Security Programs
Phone Number (250) 387-2170

Approved by:

Sam MacLeod
Executive Director
Policing, Security & Law Enforcement
Operations
Phone Number (250) 356-1504

Pages 167 through 183 redacted for the following reasons:

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