

30 May 2024

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Tēnā koe Anthony-John

Your request for official information, reference: **HNZ00046878**

Thank you for your email on 9 May 2024, asking Health New Zealand | Te Whatu Ora for the following under the Official Information Act 1982 (the Act):

1. Requirement to Administer Medicine Outdoors and Smoke-Free Regulations: Although I am not a smoker and understand that hospitals adhere to smoke-free regulations without designated smoking areas, I was required to administer my prescribed medical cannabis outdoors during my recovery in Wellington. This requirement, seemingly in contradiction to smoke-free regulations that explicitly exclude medical cannabis, forced me to leave the hospital premises, exposing me to low temperatures and nearby security risks during a police incident involving a machete and firearm

(<https://aus01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.stuff.co.nz%2Fnz-news%2F350264395%2Fpolice-looking-those-involved-machete-and-firearm-altercation-wellington-hospital&data=05%7C02%7Coiagr%40health.govt.nz%7Cc87d3de42346455bca6b08dc6e2e0e07%7C23cec7246d204bd19fe9dc4447edd1fa%7C0%7C0%7C638506391295929107%7CUnknown%7CTWFpbGZsb3d8eyJWlloiMC4wLjAwMDAiLCJQIjoiV2luMzliLjBjBTi6Ikl1haWwiLCJXVCi6Mn0%3D%7C0%7C%7C%7C&sdata=UvPqhWpA1SFzBoUVsMdujuZVAJ6OXRVODGSh6DXmWVs%3D&reserved=0>). I seek clarification on the legal basis for this policy, which appears to breach patient rights.

2. Confiscation and Differential Treatment of Controlled Drugs: Upon my arrival at Wellington, my prescribed medical cannabis was confiscated, cited as standard procedure for controlled substances. Yet, fentanyl, another controlled substance, was administered to another patient within hospital premises without the need for them to go outside. This discrepancy raises significant concerns about potential double standards in the handling of controlled drugs.

I seek clarification on the legality of this confiscation. Please provide a copy of this policy in full for my review so I can better understand how my medication was handled when outside of my possession.

3. Fire Safety Claims and Evacuation Policies: At Hawke's Bay Hospital, the head of security warned that using my medical cannabis vaporiser inside could trigger smoke alarms and necessitate an evacuation, thus I was compelled to use it outside of hospital grounds. I request detailed information on the fire safety regulations and specific evacuation policies that support this claim.

4. Breach of Duty of Care: As a patient officially admitted to the hospital, it is concerning that the hospital's policies required me to leave the premises to use my legally prescribed medication, potentially compromising my safety and recovery. This practice seems to neglect the hospital's duty of care to its patients, especially those recently out of surgery and in a vulnerable

state. I seek explanations on how these policies align with the hospital's responsibilities towards patient safety and care.

Given these points, I respectfully request the following information:

The specific Ministry of Health regulations or policies that require patients to administer certain medications, such as medical cannabis, outside hospital premises, especially considering the exemptions in smoke-free regulations.

Details on the standard procedures for the confiscation and administration of controlled drugs, with specific emphasis on the distinctions between medications such as medical cannabis and fentanyl.

Clarifications regarding fire safety regulations and evacuation policies related to the use of vaporisers and other similar devices within hospital settings.

All training material provided to healthcare staff in regards to Medical Cannabis.

Response

For the sake of clarity, I will address each question in turn:

The specific Ministry of Health regulations or policies that require patients to administer certain medications, such as medical cannabis, outside hospital premises, especially considering the exemptions in smoke-free regulations.

Medicinal cannabis in the prescribed form such as oral liquids, sublingual solutions and dried cannabis to be made into tea can be consumed within a hospital setting as a clinical prescription. Any other cannabis product that is used for vaporising would be required to be administered offsite due to the risk of the vapour triggering the smoke/fire alarm system. There is also the risk of the vapour creating ill effects to other patients and staff. Assessments on whether individual patients are well enough to leave the ward are made by clinical staff in line with appropriate standards of care.

There are no medicinal cannabis products under the medicinal cannabis products minimum quality standard that can be smoked or vaped. You can read more of this at the link below:

[Medicinal cannabis products that meet the minimum quality standard | Ministry of Health NZ](#)

Details on the standard procedures for the confiscation and administration of controlled drugs, with specific emphasis on the distinctions between medications such as medical cannabis and fentanyl.

This depends on the type of product that has been prescribed. As some medicinal cannabis products can range from a Class B to Class C controlled drug. These medications (including medicinal cannabis) fall under the [Misuse of Drugs Act 1975](#) and the [Misuse of Drugs Regulations 1977](#). These acts define the legal requirement for management, recording and storage of controlled drugs. Attached as **Appendix One**, for your reference, are the Capital and Coast Drug Policy and Hutt Valley Medicines Management Policy, which encompasses Controlled Drugs. Both have sections on patients own supply.

Clarifications regarding fire safety regulations and evacuation policies related to the use of vaporisers and other similar devices within hospital settings.

There are no specific policies in regards to the use of a vaporiser and similar devices. Any aerosol creating device such as a vaporiser or nebuliser can trigger the alarms, and no matter the cause of the trigger, once the alarm (smoke or fire) has been activated all processes must

be followed. There have been learned experience from nebulisers and mild smoke from items such as burnt toast creating smoke and fire alarm evacuations which can create unnecessary clinical risk for some patients. We must always act within the law as it is an offence for not complying with Fire and Emergency New Zealand (FENZ) regulations. Attached as **Appendix Two** is the Fire and Hazardous Materials Procedure, in which you will find on page 14 the following statement:

Smoke detectors are fitted in areas where patients sleep; in areas adjoining fire stop doors; and in many corridors, toilet areas and utility rooms. These detectors are connected to the fire alarm system; and will activate when even very small amounts of smoke are detected.

All training material provided to healthcare staff in regards to Medical Cannabis.

As mentioned above medicinal cannabis is classed as a controlled drug and is administered and treated as per the above-mentioned policies which is available to all healthcare staff. There is also information available to health care providers here: [Medicinal Cannabis Agency - Information for health professionals | Ministry of Health NZ](#)

How to get in touch

If you have any questions, you can contact us at hnzOIA@tewhatuora.govt.nz.

If you are not happy with this response, you have the right to make a complaint to the Ombudsman. Information about how to do this is available at www.ombudsman.parliament.nz or by phoning 0800 802 602.

As this information may be of interest to other members of the public, Health NZ may proactively release a copy of this response on our website. All requester data, including your name and contact details, will be removed prior to release.

Nāku iti noa, nā



Jamie Duncan
Group Director Operations
Capital, Coast and Hutt Valley District