



STANDARD 1: ASSESSMENT

Patient assessment occurs initially and at review and may be in person or via telehealth. Initial assessment in person is recommended if possible.

Medicinal cannabis nurses compile comprehensive and relevant assessment data, including the following (where relevant to your scope of practice):

Initial Assessment

- Biopsychosocial history.
- Medications and allergies.
- Previous therapies and medications sampled and outcomes.
- Substance Use History.
- Health team including General Practitioner (GP) and Allied Health providers.
- Relevant screening tools such as: DASS 21 and pain scales.
- Patient goals of care.
- Endocannabinoid system education.
- Recognition of Cannabis Use Disorder (CUD) if indicated.
- Safe Script discussion and checks.
- Assessment of monthly limits with medications and/or substances taken.

Patient education – consider written and verbal options

- Health literacy within diverse Australian sociodemographic groups.
- Patient expectations of medicinal cannabis.
- What to expect from medicinal cannabis.
- Potential side effects and red flags of medicinal cannabis.
- Workplace and driving legislation in Australia.
- TGA and AP and/or SAS B processes for accessing medicinal cannabis.

Review Assessments

- Patient update and any variation in treatments or health status.
- Dosing and frequency of products.
- Effects of the treatments.
- Duration of effect.
- Usage of other medications (prescribed, over the counter, illicit).
- Any potential interactions with medications or alcohol.
- Any relevant events such as new medications, deterioration, illness, fall or change in cognition.

STANDARD 2: CARE PLANNING

Nurses working with medicinal cannabis patients undertake care planning with patients both at initial and review appointments.

Key Actions:

- Prioritise patient-centred goals around the presenting diagnosis.
- Identify gaps within the patient's care team and recommend/refer appropriately.
- Support treatment titration plans prescribed by medical/nurse practitioners.
- Incorporate education on administration routes, potential side effects, cost, driving, workplace testing and the endocannabinoid system.
- Evaluate safety and quality measures.
- Refer on as required.



STANDARD 3: IMPLEMENTATION

Nurses working with medicinal cannabis patients will support and deliver care tailored to individualised patient needs, ensuring safe administration and understanding of cannabinoid medicines.

Key Actions:

- If administering products, ensure that medicinal cannabis products are administered according to the ten medication rights.
- Evaluate patient's understanding, adherence and response to medical cannabis products.
- Evaluate effective routes of administration and document outcomes.
- Educate patients about self-care, potential side effects, adverse effects and community resources.
- Nurse Prescribers to ensure are compliant with relevant state or territory drugs and poisons legislation and Real Time Prescription Monitoring Systems.
- Nurse Prescribers to ensure that they comply with all applicable laws and codes of conduct to provide legal and appropriate prescriptions.
- Nurse Prescribers to ensure that applicable educational content and current research informs practice.

STANDARD 4: EVALUATION

Use validated tools and nursing frameworks to assess progress and therapeutic responses to treatment.

Key Actions:

- Ongoing assessment and reassessment of the patient, via evaluation of response to products, dosage and frequency.
- Monitor outcomes using evidence-based frameworks (e.g., DASS, pain and CUD scores).
- Adjust goals of care and care plans based on ongoing assessments.
- Document adverse effects, cannabis use disorder risks and therapeutic efficacy.

STANDARD 5: ETHICS

Adhere to ethical principles within harm minimisation and health optimisation frameworks.

Key Actions:

- Practice with compassion, respect and acknowledgment of patient choice and previous use of cannabinoids.
- Nurses uphold the nurse-patient professional boundaries.
- Address risks, including cannabis use disorder, cannabinoid hyperemesis and substance use disorders, with appreciation of the potential for harm that cannabis can also cause, such as psychosis and worsening of mood disorders.
- Commit to ongoing professional education and reflection.

STANDARD 6: ADVOCACY

Champion patient rights and informed decision-making regarding access to and use of medicinal cannabis.

Key Actions:

- Identify gaps with the patient's health environment and advocate for coordinated and dignified care within a larger multidisciplinary health team.
- Promote timely access to care and equitable resource allocation.
- Address systemic barriers in medicinal cannabis access and care.
- Empower diverse patient populations across cultural, gender and age spectrums.



GLOSSARY OF RELEVANT DOCUMENTS AND INFORMATION

Nursing & Midwifery Board of Australia (NMBA)

<https://www.nursingmidwiferyboard.gov.au/Codes-Guidelines-Statements/Professional-standards.aspx>

- RN Standards for Practice
- NP Standards for Practice
- Registration standard: Endorsement for scheduled medicines for midwives
- Code of Conduct for Nurses
- Code of conduct for Midwives
- Safety and quality guidelines for nurse practitioners
- Registration standard: Continuing professional development
- Joint statement on professional responsibilities for prescribing and dispensing medicines

National Real Time Prescription Monitoring (RTPM)

<https://www.health.gov.au/our-work/national-real-time-prescription-monitoring-rtpm>

Federal and State based Medicine and Poisons legislation | The Poisons Standard (the SUSMP)

<https://www.tga.gov.au/how-we-regulate/ingredients-and-scheduling-medicines-and-chemicals/poisons-standard-and-scheduling-medicines-and-chemicals/poisons-standard-susmp>

(Each State and Territory has its own laws that determine where consumers can buy a particular medicine or poison, and how it is to be packaged and labelled. However, State and Territory Governments classify the vast majority of medicines and poisons in accordance with the Poisons Standard (also known as the Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP)) to achieve a uniform national approach to the scheduling of substances and uniform labelling and packaging requirements)

Contacts for State/Territory medicines & poisons regulation units <https://www.tga.gov.au/how-we-regulate/ingredients-and-scheduling-medicines-and-chemicals/poisons-standard-and-scheduling-medicines-and-chemicals/scheduling-national-classification-system/contacts-stateterritory-medicines-poisons-regulation-units>

ACNA Practice Guide, 2025.

First Edition

Author: Australian Cannabis Nurses Association.

Reviewed by: Jodie Davis (RN), Simone O'Brien (NP), Jane O'Connell (NP), Deb Ranson (RN)

Review: May 2026. Feedback: info@acna.online