

**STATEMENT TO BE MADE BY THE
MINISTER FOR HEALTH AND SOCIAL SERVICES
ON TUESDAY 2ND MAY 2017**

Advice received from Jersey's Misuse of Drugs Advisory Council

I am making this statement to ensure clarity and avoid misunderstanding about some changes I am intending to introduce, which will remove the legal barrier currently preventing the medicinal use of specific cannabis-based products.

To avoid any potential confusion or misinterpretation, there is no consideration being given to legalising cannabis, legalising 'self-medication' or allowing recreational use. Cannabis will remain a controlled substance as now.

Last month, Jersey's Misuse of Drugs Advisory Council (MDAC) discussed the issue of cannabis for medicinal use. This was in response to the publication in 2016 of the first authoritative scientific review of the subject. The authors of 'Cannabis: the Evidence for medical use' were Professor Michael and Dr Jennifer Barnes, and it has become known as the 'Barnes Report.'

A principal conclusion of the Barnes Report was that:

"It is clear from this review that cannabis does have medicinal value and continuing placement of cannabis under Schedule 1 of the (U.K.) Misuse of Drugs Act, which thus states it is of no medicinal value, is inaccurate and misleading."

The Report stated that certain cannabis-based medicinal products may have more potential for medicinal benefit, in certain medical conditions, than was previously believed to be the case.

In light of this report, Jersey's Misuse of Drugs Advisory Council recommended to me that I may wish to consider reclassifying some defined cannabis-based products as they are identified, so that where doctors consider it clinically appropriate they can legally prescribe them to patients. I intend to act on this advice, which represents a measured and proportionate change to the current arrangements.

At present, doctors cannot prescribe such products because cannabis is included in both Schedule 1 of the General Provisions Order of the Misuse of Drugs Law, and the Designation Order of the Misuse of Drugs Law along with other substances with no recognised medical use.

Reclassifying specified cannabis-based products would allow medical practitioners to prescribe these appropriate, quality assured products. The products could only be prescribed by an authorised prescriber, and only supplied from a pharmacy.

One has to remember that certain controlled drugs such as morphine, diamorphine (heroin) and Fentanyl – in Schedule 2 – are currently legally prescribed by medical practitioners and other, authorised, qualified prescribers. The change I am proposing would, in effect, apply the same rules for these cannabis-based products, which would be treated as prescription-only medicines.

It is not yet clear what specific products might be of the appropriate quality to reclassify, or which prescribers should be authorised to prescribe, and I have asked for further clarification on these issues from the M.D.A.C. I have also asked for further advice regarding the arrangements for

sourcing and importing these products. Once I have all this information, which I hope to receive by the autumn, and I am content that it is appropriate to proceed, I will look to progress legislation accordingly.

While a number of countries have legalised the use of cannabis-based products for medicinal purposes, the U.K. and France have yet to do so and it would remain an offence to bring such products into these jurisdictions if travelling from Jersey.

The move I am making is a small cautious step and in no way heralds the liberalisation of Jersey's drugs laws. This is only about legalising specific cannabis-based medicines for clinical use. Therefore it is not about permitting the smoking of cannabis.

The Barnes Report states that "*the medical recommendation would be that cannabis should not be taken as a smoked product*" and therefore does not include the use of smoked cannabis or any form of 'street' cannabis. Such activity would remain illegal here in Jersey.

I must stress again that reclassifying certain cannabis-based products in this way would not make herbal cannabis legal. Cannabis and cannabis resin would remain class B controlled drugs and cannabidiol and its derivatives would remain class A controlled drugs. Unauthorised production, manufacture, importation, possession and supply would remain offences with the same penalties as currently.

This means it would still be illegal for individuals to use cannabis for recreational purposes, to grow cannabis, or to import cannabis or cannabis-derived products themselves, or to self-medicate. Any use which had not been authorised/prescribed by a medical practitioner and supplied by a pharmacy would still be unlawful.