



**American Cannabis
Nurses Association**

Our mission is to advance excellence in cannabis nursing practice through advocacy, collaboration, education, research, and policy development.

The Cannabis Nurse's Guide to Advocacy

Presented by the Policy & Government Affairs Committee



ACNA Policy & Government Affairs Committee



Our committee objectives:

- To support ACNA with cannabis policy endeavors. i.e. Position Statements and white papers.
- To review ACNA policy materials related to government affairs.
- To develop ACNA policy coalitions and strategic alliances with agencies, industry, and nonprofits.
- To advocate for nurses and patients through policy development.
- To assist membership in fighting the “cannabigotry” stigma and discrimination in the workplace.
- To support and encourage members to actively participate in legislation that supports a person's right to safe and legal access to medical cannabis at their local, State and Federal levels.

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Our 2021 Goals Included:

- Finalize a Position Statement Review Process to guide our committee in creating policy, white papers, and position statements.
- Develop policy, white papers and position statements in line with ACNA's mission and values.
- Prepare members to respond to legislation at federal, state and local levels.
- Complete the Resolution Regarding Workplace Drug Testing of Nurses for Cannabis.



Release Date: May 5, 2021

Resolution Regarding Workplace Drug-testing of Nurses for Cannabis

Effective Date: May 5, 2021

Status: New Position Statement

Written by: ACNA Policy and Government Affairs Committee

Adopted by: ACNA Board of Directors

Purpose:

The purpose of this statement is to establish the American Cannabis Nurses Association's position regarding pre-employment, random drug-testing, and suspicion of intoxication practices. It outlines the rationale for eliminating drug-testing for cannabis in nurses, and proposes a more reliable method to test impairment before drug-testing.

Background

Cannabis, as an herbal medicine, has been documented at least 2700 years ago in Asia and subsequently documented in other parts of the world (Russo et al., 2008). Cannabis was recognized as a botanical drug and added to the United States Pharmacopoeia in 1850 and removed in 1942 (Brinckmann et al., 2020). Removal came because of multiple regulations and state laws that prohibited cannabis beginning in 1906 with the Pure Food and Drug Act and culminating in 1970 with the passage of the Comprehensive Drug Abuse Prevention and Control Act, making cannabis a schedule 1 drug (Siff, 2014).

Cannabis research continues to demonstrate the effectiveness of cannabis in the treatment of a multitude of medical conditions including, but not limited to, chronic pain, migraines, anorexia, nausea/vomiting, Post Traumatic Stress Syndrome (PTSD), Alzheimer's disease, sleep disorders, and opioid withdrawal (Choudry & Bhatt, 2017). Nurses experience these same medical conditions yet are denied the use of cannabis to treat their conditions due to employer workplace drug use and testing policies.

Nursing as a profession has an inherent risk of injuries and stress (American Nurses Association, 2010). Nurses experience work-related injuries at a higher rate than any other occupation. Most injuries are the result of bodily reactions/overexertion and falls/slips (American Nurses Association, 2010b). These types of injuries can result in chronic pain and muscle spasms for which cannabis has



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Objectives : The attendee will

- Be able to identify the difference between lobbying and advocacy
- Explain the basic steps regarding how a bill becomes a law
- Be able to access Congress.gov to find their federal legislator, bills and actions taken on bills.
- Apply the FIRST method to assessing a bill for fit.

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Presented by April Hatch MSN, RN

Lobbying vs. Advocacy: What's the difference?





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Lobbying

Defined: Is the attempt to influence the decisions of government by private interest groups or an individual.

Is regulated by the Federal Regulation of Lobbying Act (1946)

May be conducted by non-profit organizations including the ACNA

However, the IRS has specific non-profit rules and the legal and accounting council should always be consulted.

Lobbying activity may not exceed a certain amount of the non-profit organization's total time and expenses.





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Examples of Lobbying

A “Call to action” campaign urging members to contact congress to request activity on introduced legislation or pending regulations.

Preparing materials or organizing events in support of specific lobbying activities.

You can lobby on your own time and represent yourself, Not the ACNA.

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Advocacy

Why advocate?

- **Improve Policy** at local, state, and federal levels
- **Share information** about programs/services that have benefited your patients
- **Educate** those with decision making authority on how a certain bill or policy affects those you work with
- Nurses have personal/professional experiences:
 - Telling others about your experiences can enlighten those that have legislative authority
 - Add credibility to your position by offering information, scientific articles or medical articles that support your point of view.
 - **Educating** others will help you achieve your goals
- **Forbes has listed Nurses as one of the most trusted professions**

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Examples of Advocacy

Meeting with your congress member and sharing how a federal grant has improved the lives of your fellow constituents.

Emailing or calling your elected officials.

Educating a legislator about the effects of a policy on your community.

Advocacy through social media, blogs, and conversations position you to be a trusted voice.





Public Policy Shaped by the ACNA

What the ACNA & it's members can do:

- Conduct **educational** meetings on the legislative process
- Prepare and distribute **educational** material on how to **contact** your representatives
- **Share** how a set of rules or policy affects those you serve

What the ACNA & it's members cannot do:

- Contact legislatures for the purposes of supporting or opposing legislation as a **representative of the ACNA**
- Conduct **extensive activities** that threaten risk it's 501 (c)(3) status

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How a Bill Becomes Law



Presented by:

Jen Fraser, MSN, APRN, ACNS-BC, Chair of the
Policy and Gov. Affairs Committee

Kait Boettcher,

Barb Shey,

Conflict of Interest Disclosure: None



INSERT VIDEO HERE BEFORE PRESENTING



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Finding your Federal Legislative Representatives, Current and Past Legislation, and Congressional Activity

<https://www.congress.gov/>



Steps to using Congress.gov

Find Your Legislator(s)

1. Select “MEMBER” in the Top Tool Bar.
2. Enter you home state in the search “FIND YOUR MEMBER BY ADDRESS”.
3. Use map to click over the area you live in your state.
4. The right side of the screen will display your legislator(s).

Find Legislation

1. Select “Legislation” in the Top Tool Bar.
2. Enter keywords related to the topic you interested in (Examples: Cannabis, Hemp, Marijuana).
3. Select a bill by hovering over the bill # (it will be in blue lettering) and click.
4. Use tabs to navigate to different information on the bill: Summary, Text, Actions, Co-sponsors...etc.



Presented by Mary Rose Hoff BSN, RN, CCM



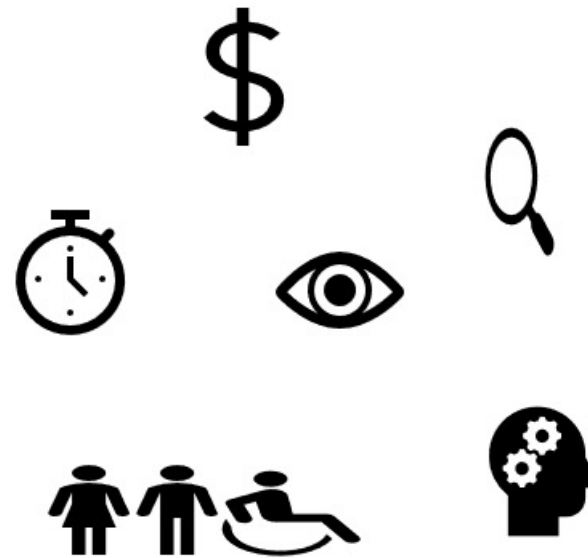
How to Critically Analyze a Bill

The F-I-R-S-T Method



FIRST Method

- **F**-Funding/Financial
- **I**-Issue Addressed by Bill
- **R**-Relevance/Ethical Fit
- **S**-Stakeholders
- **T**-Time



F-Funding/Financial Impact



- Taxpayer Funded
- Appropriations
- Fees



Issue

Summary of **Issue** addressed by Bill:

- Title/Caption



Relevance/Ethical Fit



- Professional Interests
- Personal Interests
- Ethical Fit



Stakeholders



- Patients
- Providers
- Industry Leaders
- Special Interest



Time



- 90 Day
- Emergency
- Immediate
- Sunset
- Stagnation



REMEMBER!

Think **F-I-R-S-T** !

Funding

Issue

Relevance

Stakeholders

Time





Thank You!

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