

To: Research Director,

Health, Communities, Disability Services and Domestic and Family Violence Prevention  
Committee,

Parliament House, George Street, Brisbane Qld 4000.

From: Frank Jordan

Submission on the "Public Health (Medicinal Cannabis) Bill 2016 "

1. The majority of the people who responded to the Queensland Government *Get Involved* website "supported the availability of treatment with medicinal cannabis. 1,052 people completed the *Get involved* online survey, and of these, over 96% were in favour of treatment with medicinal cannabis."

"Many submitters strongly expressed a view that patients should have expanded treatment options."

When a person with an illness or medical condition goes to their doctor they can get a prompt diagnosis and treatment is prescribed, often within the same day. This is the standard of care that the act should be measured against. The needs of the patient should be of paramount importance. The act fails to provide this.

2. Opiates are a class of drugs with proven deleterious outcomes. They are managed within the current system. The only justification for a separate act would be if cannabis was of a significantly higher order of danger and there were proven defects in the current system. Since no evidence has been presented that this is the case in relation to this act there is clearly no need for it.

3. There are many penalties peppered throughout the act and I would question the advisability of subjecting an ill person to this level of extra stress. However I would add an extra clause prescribing the application of 200 penalty units to the minister of health for every case where a patient is denied timely and appropriate medical treatment with cannabis. Frankly the Health Department has been treating cannabis patients with contempt and there needs to be some accountability for their derelict behavior. Sick people and their carers have been forced to demonstrate in the street in order to shame the department into doing their job.

4. Patients always come last under this act. I know that the Health department did not actively seek the input of patient groups. They are missing from the official list.

“Targeted consultation was also conducted with key health industry stakeholders, particularly medical professionals in speciality areas for which medicinal cannabis treatment may be sought, and health care workers likely to be involved in delivering treatment. This consultation included one-on-one meetings with representatives from the Australian Medical Association Queensland and the Royal Australasian College of Physicians, and forums with executives from Queensland Hospital and Health Services and with clinicians. Peak industry bodies also provide detailed written submissions.”

There is funding for a board of advisors. There should be provision in the act for the funding of patient groups and their concerns should be given priority over all others.

5. The expert advisory panel is unnecessary, redundant and an insult to medical specialists. Medical specialists are highly trained professionals whose job it is to keep up to date on all treatments for the illnesses they cover. They talk to each other, go to conferences, read professional journals. They will be aware of any and all advances in their area of expertise and these will include any scientific papers relating to treatment with cannabis. That this panel is an example of featherbedding for a select few is made obvious by the special pleading to the premier to provide funding and lucrative employment.

“A new provision was inserted to clarify that a member of the expert advisory panel is entitled to be paid any remuneration and allowances decided by the chief executive. Originally, the Bill was silent on the issue of whether the terms and conditions upon which a member holds office could include remuneration.

This clause was inserted in response to an issue raised by the Department of the Premier and Cabinet during intra-government consultation processes.”

6. In the past many people who used cannabis for their medical conditions were charged and criminalized. There is no provision in the act to have their convictions reviewed and quashed so that they are no longer considered to be criminals. This should be a simple process. A letter from a doctor stating that a medical condition treatable with cannabis existed at the time could be presented to an appropriate body and the conviction annulled. The absence of any provision for this in the act proves that it is unjust.

7. And on the theme of injustice there is a section that states that if you have been accused but never convicted of a criminal offence you could be denied treatment.

“208(b) every **charge** made against the individual for an offence, in Queensland or elsewhere, whether before or after the commencement of this Act.”

To be treated as guilty when you have been falsely charged but found innocent is blatant discrimination. It clearly shows that the intent of those who drafted the bill is to treat anyone requesting medical cannabis as a criminal.

8. Most puzzling is the provision for the health dept to have its own police force. It will be able to search premises with a warrant, stop and search cars without a warrant and confiscate all sorts of material. Duplicating the functions of the existing police force would seem unnecessary and quite expensive. Its sole purpose seems to be to provide an avenue for future corruption.

9. “At present, no medicinal cannabis products are available in Australia, meaning that even with the necessary Commonwealth and state approvals to access and use medicinal cannabis, suitable products must still be imported from overseas pursuant to a customs licence.” Amazing isn’t it. Even after a patient jumps through all the hoops there are actually no cannabis medicines available. There should be something in the act to guarantee that

cannabis medicines are available, otherwise why even bother with the act. This proves that the act is not designed to benefit patients.

10. "The cost of implementing the regulatory framework in the Bill will be met within existing budget allocations."

This is quite chilling. It means that the new act will be financed by cutting an existing health dept program. Where the cuts will come from should be disclosed beforehand. The LNP made quite dramatic cuts to public service numbers so it can be assumed that some essential service is earmarked to disappear.

There is no cost given for implementing the new act. It is likely to be substantial. There are the new compliance officers, the new advisory panel, maintaining the register and the sheer volume of approvals and then the inevitable appeals. Take the number of people undergoing chemotherapy for example who will be seeking treatment for their nausea. Just this one group is already a significant administrative burden. On just a very basic analysis I estimate at least 8 million dollars a year. All this to complicate what should be a medical decision between a doctor and her patient.

11. The bill is unlikely to be passed and any politician who supports it will experience a backlash at the upcoming state polls. The community wants simple safe access to cannabis medicines but this bill will not deliver that outcome. There are many political parties who have this as their policy. They range from the Greens, Drug Law Reform, HEMP, Secular, Sex and even One Nation parties. They were not targeted in the consultation process. They can be expected to take advantage of any perceived failures by the government to deliver positive outcomes. High profile individuals like Deryn Hinch and Pauline Hanson are also on the side of medical cannabis. The health food industry and the farming industry are lobbying to make cannabis derived foods legal. It will be a minefield for the unwary.

12. I might share a personal view. When my father got cancer and underwent chemotherapy he asked me to provide him with cannabis to ease his symptoms. I had to refuse because I had a young family and couldn't risk a criminal conviction. Similarly in the last years of my mother's life she developed painful medical conditions which would have benefited from cannabis use. They endured unnecessary suffering. I consider that those who are responsible for the current cannabis laws to be cruel heartless sadists. I know I am not alone in this.