From:

Correspondence Group, City Clerk's Office

Sent:

Saturday, June 13, 2015 3:00 PM

To:

**Public Hearing** 

Subject:

FW: Dispensary submission

From: Dana Larsen s.22(1) Personal and Confidential

Sent: Saturday, June 13, 2015 11:48 AM To: Correspondence Group, City Clerk's Office

Subject: Fw: Dispensary submission

Hello to the Mayor and Council,

There's some points I wanted to address that I didn't get a chance to cover during my presentation. I hope you will take the time to read my submission.

# DISPENSARY vs COMPASSION CLUB

First, I'd like to clarify that there is no difference between a "dispensary" and a "compassion club." When I opened the Vancouver Dispensary Society at 880 East Hastings in 2008, we modeled ourselves closely after the BC Compassion Club Society. Our bylaws, procedures and services are virtually identical. There was only two other clubs at the time, the BCCCS and one called Green Cross.

We don't offer a "Wellness Centre" like the BCCCS, but we direct our resources into community improvement, donating to local charities and community centres, and supporting our members that need medical care or a discount on their purchases. We also direct resources into supporting political change, campaigns and court cases. We were one of the larger donors to the court case which recently had the Supreme Court recognize the medicinal value of cannabis extracts and edibles.

We chose the term "dispensary" mainly to differentiate from the "compassion club" so that people wouldn't think we were a new branch of their society. But there's no practical difference between our operation and the BCCCS. Different "dispensaries" operate with different standards, but you can't tell anything about their structure or operation by the name.

# I'VE GUIDED THE DISPENSARY MOVEMENT

I am the one largely responsible for the number of dispensaries in the city. After we opened in 2008, and then even moreso after we opened our second location on Thurlow in 2010, I received many inquiries from people asking how to open their own dispensaries.

I have spent many, many hours offering free consultations and advice for people about dispensaries. I have always dtrongly encouraged people to follow the model created by the BCCCS, to mimic our bylaws and

structure, and to stick to our strictly medicinal requirement. Many of them followed our lead and opened up strictly medicinal dispensaries. This would include Med-Pot Now, Eden and some other early adopters.

(Another important aspect is our members Code of Conduct. We make all members read and sign the code, and if they break the code their membership is either temporarily or permanently suspended. Aspects of the code include respect for the neighbourhood and being a responsible user.)

With no action or response from the city however, newer dispensaries began opening up that didn't bother seeking my counsel or following the medical model, and simply used a medical pretense. Some newer clubs just took a patient's word about their medical condition, and others didn't bother with any paperwork at all. Since these clubs didn't get treated any differently than the earlier, strictly medical clubs, there was a trend with newer clubs towards the lowest, and easiest standard.

# CLOSING THE OLDEST, MOST RESPONSIBLE CLUBS

Now we're in a position where the proliferation of medical and non-medical dispensaries has finally compelled council to act. And so far the result of these proposed bylaws seems to be that early leaders with a strict medicinal format, like me and the BCCCS, will be forced to close, while "recreational" clubs who happened to be luckier in choosing where to open will be allowed to continue. This doesn't seem right or wise.

We've been near the Ray Cam community centre for 7 years, and the only communication we've had is thank-you letters for donations we've made. We had a different cannabis club called Jim's Weeds open right next door, and after a few months of their aggressive and disruptive behaviour, plus regular complaints from the community centre, they got raided and closed. I'm confident that if Ray Cam had been concerned about our presence, they could have had us shut down as well.

I have worked hard to try and keep clubs in line, to encourage dispensary operators to follow our strict model, and to respect their neighbourhoods. We have a stack of thank-you letters from local charities, community centres as well as individual patients and members that we have helped. We have made our block better, safer and more family friendly. If there is any "grandfathering" to be done, it should apply to at a minimum to the three oldest clubs: BCCCS, Green Cross and the Vancouver Dispensary Society.

# RECREATIONAL vs MEDICINAL

It seems to me that these bylaws are written for recreational cannabis outlets. And that makes sense, as it's very difficult for the city to be verifying prescriptions and medical need. But this model will also present problems.

If you want to keep dispensaries medicinal, then make membership in the Canadian Association of Medical Cannabis Dispensaries (CAMCD) be mandatory. This doesn't replace civic and police scrutiny, but it adds another level of oversight, and will definitely help keep dispensaries focused on medical access and not recreational access.

If not mandatory, then make lack of CAMCD membership a point in the demerit system. However, the point system also has an important problem...

# THE POINT SYSTEM

The problem with the point system is it only comes into play when two dispensaries overlap their buffer zones. So if there's a location with resident complaints, police complaints and so on, they're still good to go as long as there's no other dispensaries nearby. That doesn't make sense.

I would just make three of the four items mandatory. Any dispensary with police problems, community complaints, or that isn't a non-profit, would be closed. That makes more sense than only using the point system to deal with dispensary conflicts.

# **MEMBERSHIPS**

The original and truly medicinal clubs and dispensaries all process memberships, verify doctors and medical conditions, and issue membership cards. Many of the newer places don't bother with memberships, or issue cards to everyone, or just accept other clubs cards.

If these regulations are for recreational use, then memberships don't matter. But if these regulations are for medical users only, then the city should require dispensaries to retain medical documents, maintain membership lists and issue membership cards.

# **NEW DISPENSARIES**

Under the proposed model, a poorly run dispensary with local complaints, police problems and unsanctioned construction would be licensed as long as they're not in any buffer zone. And once they're licensed, no new dispensary could open in their zone. So a crappy dispensary could be enshrined in an area and stop any new, better dispensary from replacing them. This is a serious issue that I hope you will consider. This would be fixed by making the point system into a set of mandatory minimum requirements.

# WORDING

The proposed bylaws need some language to be clarified. References to "marijuana-related businesses" need to be amended to specify dispensaries. References to "edibles" need to be amended to specify food products, if the intent is to allow capsules, tinctures and drops.

If you only ban baked goods, but allow capsules and other such products, we'll be ok. If you want to ban all non-smokable forms then you're going to have unintended consequences. Note that people can just eat a gram of hash or extracts if they choose to, with the same effect as a cookie, except that it's harder to judge and control the dosage.

# **BUFFER ZONE**

The 300m buffer zones need to be reconsidered. An amendment that places within 250m would be eligible to apply for a variance of some sort would be a minimal change that would save a lot of hassle for the city. Some dispensaries are 295m apart, or 295m from a community centre. Some wiggle-room would make a real difference on the ground. The work to deal with the variance applications will be minimal compared to cost of raiding and closing these dispensaries.

I hope you will take these points into consideration. I have been working for the dispensary movement for 7 years now, and I'm excited for the changes to come. Please do this right, so that we can move forward together, instead of generating conflict by implementing regulations.

Thank you.

Sent from my BlackBerry 10 smartphone on the TELUS network.

From:

Correspondence Group, City Clerk's Office

Sent:

Saturday, June 13, 2015 11:45 AM

To:

**Public Hearing** 

Subject:

FW: Public Hearings - Marijuana - Speaker #60

**Attachments:** 

City Council Vancouver 12june2015.docx

From: Andrew Courtney s.22(1) Personal and Confidential

Sent: Saturday, June 13, 2015 11:32 AM To: Correspondence Group, City Clerk's Office

Subject: Public Hearings - Marijuana - Speaker #60

To the Mayor and Council;

I attach a word document with a few additional points on how a testing lab might work.

Yours truly

**Andrew Courtney** 

June 12, 2015

Andrew Courtney - Speaker #60

To The Mayor and Council:

Some Further Points on a Testing Lab

Yesterday evening I suggested to the Council that some of the funding which will become available through the business licencing of the dispensaries should be used to set up a lab to test and grade relative strengths of various buds and comestibles.

The lab could be set up downtown, or at least within the areas indicated as available to the dispensaries.

The grower brings the product, the sample is taken, and a result or score card given.

With sufficient funding the tests could be offered at no cost. This ends one disincentive to have the test done. At the same time the pride that good growers and bakers take in their product will be a positive incentive to co-operate in the testing programme.

There should be no trouble getting the dispensaries to co-operate with your suggestion that they ultimately provide <u>only</u> bud and comestibles that come with a score card. The dispensaries can retain the score cards as partial evidence of purchases, and for check-backs with the lab, and so the numbered score cards will be taken out of circulation by the (nearly) end user.

This method has a multiple purpose. As above, it will encourage participation and ensure better information for the users. Also it will bring the producers, who will themselves be subject to inspection and licencing eventually, to the surface. It will, I believe, help them to make the transition from the socio-legal shadows and to a more regularized approach to life. Also it will provide a pool of evidence as to the various producers' outputs particularly in the area of edibles.

The same mechanism can be adapted for the producers of oils, extracts, tinctures, etc. They can be required to use only tested bud as stock and to produce score cards to back up the claim. They can then submit their product batches for testing and get a score card.

Over time the test results will be graphed and simple 1 to 10 type score could be put into use for product labelling and customer convenience.

While the test results are being gathered I would suggest a simple and inexpensive method of labelling for edibles which can be put into use (and tested) almost immediately: Mild, Medium, and Strong.

Many of the dispensaries already grade their bud A, AA, and AAA, or some similar scale.

These are both equally useful as a temporary grading system, and as a starting point for our testing programme, since the subjective grading of the dispensaries can be compared to various scores from scientific tests.

So it may be expedient to begin by requiring the dispensaries to install a 3 or 4 point grading system for their products immediately or nearly so, if there isn't one already.

Personnel for the lab should pose little problem. The local colleges will provide the technicians. This will give local graduates valuable work experience.

The Universities have graduate students who can do interpretations of the results. If I remember correctly there aren't any graduate students who aren't looking for a little extra money, or a new research project.

On another issue entirely, one of the difficulties of being an accountant in this area of practice is the woeful lack of documentation. As you can imagine invoices are not the usual procedure in the marijuana industry....just yet. Having only documents produced by the proprietors is better than nothing but not best evidence.

From the viewpoint of Canada Revenue Agency that's a strong reason for the L-P's to take over.

The scorecards would to some degree be the first documentation the independent producers willingly generate.

Consequently, it may be expedient to ensure that the producer provide a sample for every kilo to be graded. "See the whole bagful at one time" as you might say, so we can estimate crop sizes and annual production by producers to some greater or lesser degree.

The score card would report the average values across the submission's total weight. Each producer will be required to provide some identification to open a testing account, although we can give anonymity by using a producer number on the score card. Signatures could be required to ensure that the producer comes personally.

Eventually the access to a testing account for independent producers can be made dependent upon providing evidence of proper financial records keeping, and filing of reports and returns. In short normal business practices.

This would be additional to the agricultural records which will be required for the "Organic" label.

Equally we will want to move towards a point at which only those with MMMA licences, whether or not they are called production licences, are actually producing independently, and a check of that will be added to the testing account requirements eventually.

The details for the participation out-of-town producers will have to be worked out.

From:

Correspondence Group, City Clerk's Office

Sent:

Saturday, June 13, 2015 11:42 AM

To:

**Public Hearing** 

Subject:

FW: Responsible Labeling

Attachments:

Cran-Cookie Label Back NB.jpg

From: Green Penguin 5.22(1) Personal and Confidential

Sent: Saturday, June 13, 2015 11:21 AM To: Correspondence Group, City Clerk's Office

Cc: Tyler Shepherd

Subject: Responsible Labeling

Dear Council,

Please see the attached as suggested label content for regulations in moving forward.

The space is blank next to consume by as we date stamp our products after baking and packaging.

Just in case Tyler Shepard, Speaker #172 and Member of REEP (Responsible Edible and Extract Producers) Association, has not resubmitted the CannaSafe outline here it is. This is just a small example of what our group is capable of putting together. We see the need for regulation and welcome it.

First Draft: Outline

June 12 2015

The way I see this working from here is to review the outline and keep adding and moving modules and individual points until we are sure nothing is missing, go through a review with an expert in medibles and in extracts, and then I am prepared to actually start writing the modules and formulating the other parts of the course right now. Once that is done we can repeat the review including a little bit of a wider audience, seek a couple more partners, and start certifying people on the ground whether regulators want to engage the program or not. I think at that last stage we should not only be shopping this program to VCH and the City, but to Licensed Producers and CAMCD board/officers as well. CannaSafe

A comprehensive certificate of training for front line employees of Cannabis Businesses

This program is intended to equip new and experienced cannabis professionals on the front line and managers of these individuals with the knowledge necessary to observe best practices when handling Medicinal Cannabis and related products, occupying the space of Serving it Right does for liquor and specializing FoodSafe content for the handling of edibles. Certified individuals will be able to confidently comply with City and Coastal Health regulations regarding the operation of Marijuana Businesses and the handling of food products, as well as understand well all predictable risks associated with doing these jobs in the dispensary context. A valid FoodSafe cert is a prerequisite for certification. Modules

# 1. Edibles

- identifying potentially harmful or unreliable products

  - improper or damaged packaging and labeling
  - potential for allergic reaction
  - general production methods and standards, how to spot compliance/noncompliance
- Foodsafe in the dispensary environment
  - creating and maintaining a clean handling space

- transition from food handling to dispensing and back
- barriers to infection
- sanitation beside sensitive product, airflow control
- other links between FoodSafe and the dispensary
- Educating the patient
  - Dosage/titration
  - examples
  - role play
  - signs of over medication
  - how to deal with over medication
  - what is different about the effects of edibles?

### 2. Concentrates

- identifying potentially harmful or unreliable products
  - remaining solvent
  - contaminants
  - bad solvents
  - additives used for visual appeal or smell augmentation
  - improper labeling or testing
- use of extract consumption related equipment and methods
  - dab equipment and use
  - electric wax pens (pros and cons)
  - mixing concentrate and flower
  - fire safety
  - heat control for safe bronchi and lungs!
  - dosage control

### 3. Flowers

- identifying potentially harmful or unreliable products
  - proper timing and methodology for harvest and cure
    - spotting over ripeness
    - spotting immature product
  - fungal contaminants
    - visual inspection for Botritis and powdery mildew
    - microscope inspection for Aspergillus, common molds, and mildews
  - moisture balance
  - over fertelization
  - improper flush
- Flower selection
  - genetics
  - pain
  - sleep
  - potential for anxiogenic effects
  - active spectrum and cannabinoids
  - taste and smell, terpenes, flavonoids
  - entourage effect
  - limits of sativa/indica dichotomy
  - preconceived notions and the placebo effect
- Handling and storage
  - fluid dynamics and your flowers moisture balance
  - humidity
  - temperature
  - changes over time
  - storage containers
  - · transfer, measurement, handling
  - maintaining a clean work space and controlling contaminants in the air
  - Serving flower

# 4. Over Medication

- From smoking
  - potential for momentary lapse in consciousness
  - what does 'green out' mean

- responsible precautions for dab recipients
  - sit down
  - forewarned is forearmed
- From edibles
  - · How to detect oncoming over medication
  - Titration, dose management for minimizing risk
  - How to deal with over medication
  - Talking about negative experiences with patients
- Educating the patient
  - self assessment
  - Do I need medical attention?
  - Vitamin C
  - Avoiding stimulation and giving it time

# 5. Contraindications and potential risks

- Potential for anxiogenic effects
  - Sativa
  - Solvent based extracts
  - High THC secondaries ratio
  - risk for general anxiety vs acute anxiety sufferers
  - potential risks for schizophrenia sufferers
- Low blood pressure
  - high risk for all cannabinoid therapies
- Immune Compromised
  - aspergillus and other fungal contaminants
  - · bacterial infection
  - joint and pipe sharing
  - · how to find safe method/product

--

Cheers, Brina & Andrew

Green Penguin Delights Inc.

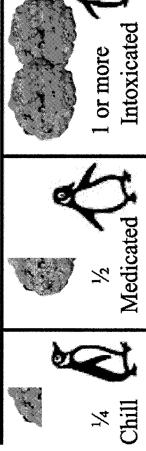
s.22(1) Personal and Confidential

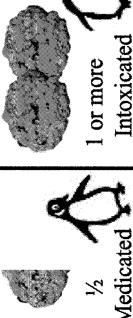


Come chill with us.

# GO LOW AND SLOW

# SUGGESTED DOSAGE CHART





Intended for MMPR Patients 19+ yrs or older. Keep out of reach of children.

Lab tested for accurate dosage. Made with genuine canna butter Our Pengum Promise:

Each Cookie Contains: 125mg THC

# Consume By:

ferently than smoking it. For best results, start with a 1/4 to 1/2 a cookie on an empty stomach. 30 minutes later, eat a fat solub gredients: Flour, Coconut, Craisins, Oats, Canna Butter, Brown Sugar, Sugar, Eggs, Vanilla, Baking Powder, and Baking So orage: Keep cookies in an airtight container in the fridge for up to 3 weeks and in the freezer for up to 3 month sults: Wait 1 - 2 hrs for full effects. PATIENCE. Do not take more before this period until you know how you will be affect rections: Always start with small dose until you know your body's tolerance level. Ingesting cannabis effects your body sages noted in the chart are a guideline only. Expect highs to last from 3 -6 hours. ed (such as cheese or yogurt) or your full meal. Do not microwave to defrost

arnings: Product contains cannabis and has intoxicating effects which may be habit forming. Do not operate heavy machine not mix with alcohol as this will intensify the effects. Keep out of reach from children and pets. If overdose occurs, take citr ce (lemon, orange, or pineapple) 1/4 cup and wait 40+ min. If symptoms worsen, seek medical attention.

inufactured in a facility that also uses tree nuts, peanuts, wheat, soy, and sesame seeds.

# PLEASE ENJOY OUR PRODUCTS RESPONSIBLY

My name is Joshua Rettie, I am 37-years old, and born and raised in Vancouver. I went to school here, in fact, that's where I first tried cannabis, at my high school, *Prince of Wales*, in 1992 with the son of a former Vancouver mayor. In 1997, at age 19, I openly smoked cannabis around Gregor Robertson, and his family, at the inaugural party for the Happy Planet Juice factory on Union Street. In fact, the very first time I was exposed to cannabis, at age 11, a registered physician, medical doctor, and parent smoked a joint, while driving with three kids in his car, one not his own, on the way to dinner in West Point Grey. For the past 20 years, I have consumed cannabis and am fascinated by the relief it provides me, particularly regarding emotional regulation and anger issues.

At age 19, I suffered a brain aneurysm, and made a remarkable recovery while using cannabis as a postsurgery pain medicine that I also believe had the least damaging and potentially beneficial effect on my recovering brain. At that time, I travelled to places like Cortes Island to find the best quality cannabis available.

At age 20, in 1998, I entered the cannabis industry, getting a job at a local hydroponic store, where now stands the Stressed and Depressed clinic on 41<sup>st</sup> and Knight. Those times were very similar to now, we were the sixth hydroponic shop to open in Greater Vancouver (in 1995) and four years later there were over 60 shops (now I believe there are about 35). In fact the city stopped licensing these businesses to deal with the problem, and eventually, due to the low level of profit, the other hydroponic stores thinned out to what the market could bear. Obviously, refusing to license is not an option for this current quandary. I continued to work in the hydroponic industry for six years, eventually starting my own company and wholesaling hydroponic products in eastern Canada. When I returned to Vancouver, I worked with my family's business, an antique furniture store, but also took work in the illegal cannabis industry, mostly producing cannabis clones, which often found their place on dispensary shelves.

In 2006, I was arrested for possession for the purpose of trafficking in North Vancouver, with 230 grams of cannabis and a scale. I told the police and judge that I had bought the cannabis for myself, family, and friends which was entirely the truth, and after 3 years of fighting a crown council that was pressing for jail time, and would not budge, I plead guilty. With the help of Kirk Tousaw, we spoke honestly to the judge and I was granted an absolute discharge. The judge commented that something must be done about adult recreational cannabis use to keep it out of the court system -- it simply does not belong there. I too, feel I do not need to face another judge to explain my cannabis use. They and I both know the total effect on society is benign, if not beneficial.

In 2007, I was able to obtain work helping an MMAR patient grow cannabis of a quality that was not available on the Vancouver market. When he brought the extra to The Vancouver Dispensary, they demanded, or pleaded rather, to buy it, and when they sold it, a lot of beautiful thank you notes for our efforts came back from many patients who never knew, saw, or heard of us, but they thanked us wholeheartedly for showing people what could be done (sold in dispensaries) and how quality can be improved by a competitive market, not a controlled one.

I would like to talk about my own cannabis use. After a lifetime of experimenting and learning what works for me, it is very simple. I smoke or vaporize 1 gram of cannabis concentrate (oil or hashish) per day. It is the equivalent of 10 grams of dried flowers which can sell from anywhere from 5-14 dollars a gram -- but honestly nobody should be smoking the cheap stuff who is physically ill, or even at all.

I use Vancouver dispensaries to competitively source this product and can buy it at <u>very few</u> stores for the price of \$40 to \$50 per gram, which at most dispensaries, especially those who will gladly pay the \$30,000 licensing fee, cost \$70 to \$90 per gram and sometimes more. First of all, realize that the \$50 purchase is the equivalent of \$100 worth of dried flowers, so my choice to use concentrates is simply a financial decision to spend less and a healthy decision smoke less. The math from there is simple, and it's why I need to have access to dispensaries that are <u>not</u> profit oriented. One gram at day at \$50 makes the cost roughly \$18,000 per year to get what I know works for me. I run a business with my brother who can attest to my competency while maintaining this dose of cannabis, as can my former instructors at Douglas College. If I were to be forced to shop at places like Eden Dispensary, my cost for medicine could possibly double to \$36,000 per year. I am currently able, and choose to spend \$18,000 on cannabis per year. I recognize this amount may seem large to some, even me, but after twenty years of experience and recently spending an entire year substance-free, I am entirely sure this is what I need to do.

What I need is 365 grams of cannabis concentrates per year, which currently costs \$18,000. That amount is the equivalent of 3,650 grams of dried cannabis flowers, roughly eight pounds, which sells for \$12,000 - \$20,000 and can be grown for a cost of about \$3000, should I be permitted to grow my own.

Ultimately my goal is to convince this civic, provincial, and federal government that it is in my best interest to be allowed to grow my own cannabis. Knowing that this is not what we are discussing here, the current dispensary situation in Vancouver allows me to access what I need -- we didn't even cover the fact that Health Canada, nor my family doctor, nor the BC Mood Disorder clinic will sign or help in any way whatsoever in allowing me to access cannabis for mental health issues such as anxiety and depression – something I have been trying to do for seven years. Right now in Vancouver, I can buy cannabis concentrates at a yearly cost of \$18,000 -- a number I don't want to go beyond.

I am against any change that this proposal to license dispensaries brings forth; that limits my access to high-quality concentrates, increases my current (very expensive) costs, and further may restrict my ability to reduce costs, such as growing for myself or joining a collective for the purpose of low-cost access to cannabis.

I thank you for your time in hearing my story and welcome any questions that you may have. I have been working with cannabis for over 17 years and have extensive knowledge of both Canadian and US medical cannabis laws. I have also worked with Seattle Hempfest, the largest open-air cannabis festival in North America, for eight years since 2004, speaking publicly five times as an expert in the field.

I will leave you with a question of my own. During the initial proposal framing, was a tax discussed? (I believe the GVRD successfully surtaxes fuel from gas stations) And, is that not a better way to generate elastic funds which could easily exceed your annual budget of 1.4 million?

Thank you for your time councillors, and I applaud you wholeheartedly for your bravery in taking this issue seriously.

From:

Correspondence Group, City Clerk's Office

Sent:

Saturday, June 13, 2015 11:35 AM

To:

**Public Hearing** 

Subject:

FW: Please read this to council

s.22(1) Personal and Confidential

From: bobby hazelton

Sent: Friday, June 12, 2015 10:08 PM

To: Correspondence Group, City Clerk's Office

Subject: Please read this to council

# Mayors and council

If you close or limit despesaries You will limit the access for patients by have to travel further and by limiting strains of cannabis. There is one dispensary that has CBD strains which helps with seziers, dementia, Over 400 MEDICAL. conditions. Very hard to find at other clubs. Green option in Vancouver has helped with low income people, getting people off heroin. Harm reduction that is what it is about. They will work with the city. Research Is needed!!! So we all can help each other. The 30 000 fee hopefully will NOT raise prices, please think about it. Now edibles are extremely the only way some of my patients can take it. Please do not enforce only to smoke. There are smoking bylaws remember. Make a age limit over 25. Have them label the ingredients, potency, etc. For youth NOT allowed until 19. Unless they have a medical condition that can be helped by cannabis, period.

And

Thank yous for your time.

Please let me know if this will be read Thank you.

From:

Correspondence Group, City Clerk's Office

Sent:

Saturday, June 13, 2015 11:29 AM

To:

**Public Hearing** 

Subject:

FW: Edible pot products should come with detailed labels: Doctor - Vancouver Sun

From: Andrew Muir

Sent: Friday, June 12, 2015 4:49 PM

**To:** Correspondence Group, City Clerk's Office

Subject: Edible pot products should come with detailed labels: Doctor - Vancouver Sun

B.C.'s chief medical health officer says edible marijuana products should come with labels listing the strains used and their potency, whether they're being sold at pot dispensaries or during events such as Vancouver's 4/20 rally.

 $\frac{http://www.vancouversun.com/health/Edible+products+should+come+with+detailed+labels+Doctor/11129350/story.html}{}$ 

Andrew Muir s.22(1) Personal and Confidential

From:

Correspondence Group, City Clerk's Office

Sent:

Saturday, June 13, 2015 11:28 AM

To:

**Public Hearing** 

Subject:

FW: Supreme Court of Canada okays pot cookies, other cannabis products - Vancouver

Sun

From: Andrew Muir s.22(1) Personal and Confidential

Sent: Friday, June 12, 2015 4:46 PM

To: Correspondence Group, City Clerk's Office

Subject: Supreme Court of Canada okays pot cookies, other cannabis products - Vancouver Sun

The Supreme Court of Canada has opened Pandora's cookie jar by blessing pot-infused ginger snaps and cannabis derivatives, causing a fuming federal health minister to insist that patients must smoke their bud.

http://www.vancouversun.com/health/Supreme+Court+Canada+okays+medicinal+cookies+other+cannabis+pro ducts/11127703/story.html

Andrew Muir s.22(1) Personal and Confidential

From:

bobby hazelton s.22(1) Personal and Confidential

Sent:

Saturday, June 13, 2015 10:19 AM

To:

**Public Hearing** 

Subject:

Re: Speaker Confirmation - B. Hazelton - TEXT AMENDMENT: Regulation of Retail

Dealers - Medical Marijuana-Related Uses

If you close or limit dispensaries You will exactly limit the access that the courts said patients need access to, and the different strains needed for different elements and health and hopefully saving lives and patients will definitely have to travel further. The dispensary in the downtown east side have been helping the less poverty People and helping people get off herion. Talk about harm reduction. It is not about getting high, but helping pain. If you close so many dispensarys you will also limit the job opportunities that are there now or to come. It is about creating jobs, the economy.

The 30 000 fee will mostly fall onto the patients by cannabis will cost more which is wrong. Edibles. Please understand that my patients can't smoke, while you's have smoking bylaws remember. An edible does not stink. Please understand the supreme court has ruled they are ok on june 11 2015. So you can not over ride a higher court ruling. If you have to set a 25 age limit. My patients have never gotten sick from edibles doctors prefer edibles over smoking. So set a age limit and if they can put ingredients on the label would be great. The green option despenearly is one that have cannabis in different ways to help in different ways which is great, they also have helped people by getting people off heroin. They are very harm reduction. This what it is about harm reduction. While creating jobs and edibles don't stink. Thank you's for your time.

On 2015-06-08 5:03 AM, "Public Hearing" < Public Hearing@vancouver.ca> wrote:

Speaker Confirmation – Public Hearing – TEXT AMENDMENT: Regulation of Retail Dealers – Medical Marijuana-Related Uses

Thank you for your request to speak at the Public Hearing commencing on June 10, 2015, at 6 pm, regarding "TEXT AMENDMENT: Regulation of Retail Dealers – Medical Marijuana-Related Uses". You are speaker no. 84 on the citizens section of the speakers list for this agenda item.

Contingency backup nights are reserved in Council's calendars, should they be required. The Mayor will announce the date and time of the next backup night at the end of each meeting. Any backup information will also be posted on the Public Hearing agenda at <a href="mailto:vancouver.ca/councilmeetings">vancouver.ca/councilmeetings</a>.

Speakers can monitor the progress of the Council meeting via the video link on the City website: <a href="http://civic.neulion.com/cityofvancouver/">http://civic.neulion.com/cityofvancouver/</a>

The public can visit <a href="http://vancouver.ca/speaker-wait-times">http://vancouver.ca/speaker-wait-times</a> for regular updates on the progress of City Council meetings. The same updates will also be available on Twitter at <a href="https://www.example.com/wait-times">@WanCityClerk</a>.

You can communicate your thoughts on this topic to the Mayor and Councillors by emailing mayorandcouncil@vancouver.ca.

For more information regarding Public Hearings, please visit vancouver.ca/publichearings.

City Clerk's Office City of Vancouver Phone: 604-829-4238

Email: publichearing@vancouver.ca Website: vancouver.ca/publichearings

From: bobby hazelton s.22(1) Personal and Confidential Sent: Saturday, June 06, 2015 12:22 PM

To: Public Hearing

Subject:

I would like to have a chance to speak at over public meeting on Wed June 10 at 6 pm about your Vancouver dispensary.

Please let me know.

Thank you

From:

Correspondence Group, City Clerk's Office

Sent:

Saturday, June 13, 2015 10:44 AM

To:

Public Hearing

Subject:

FW: CAMCD Standards

Attachments:

CAMCD-Certification-Standards.pdf

From: Shega A'Mula s.22(1) Personal and Confidential

Sent: Friday, June 12, 2015 3:33 PM

To: Correspondence Group, City Clerk's Office

Subject: CAMCD Standards

Please find attached CAMCD's standards for Medical Cannabis Dispensaries, as requested by City Council.

Best Regards,

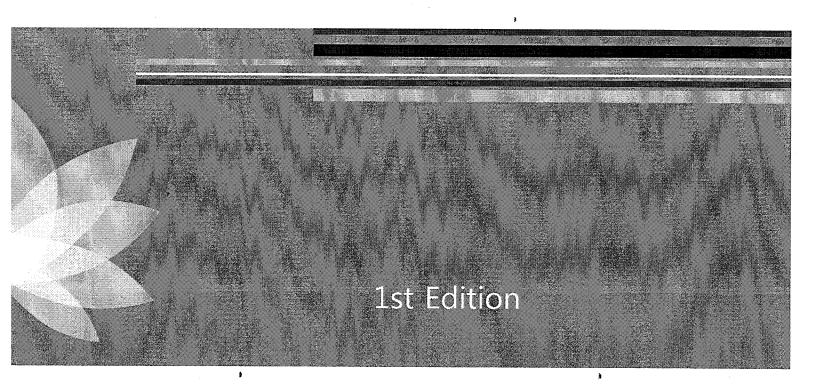
Shega A'Mula Chief Operating Officer **CAMCD** 

<u>LinkedIn</u>

Women Grow Vancouver



# Certification Standards for Medical Cannabis Dispensaries in Canada



# Acknowledgements

CAMCD Board of Directors

Dominic Cramer
Toronto Compassion Centre

Blaine Dowdle MedCannAccess

Adam Greenblatt Medical Cannabis Access Society

Rade Kovacevic Medical Cannabis Centre of Guelph Inc.

> Dana Larsen Vancouver Dispensary Society

Steven Roberts Vancouver Island Compassion Society

> Jamie Shaw BC Compassion Club Society

> Neev Tapiero Cannabis as Living Medicine

> > CAMCD Advisory Board Hilary Black Rielle Capler, MHA Philippe Lucas, MA

Prepared by: Rielle Capler, Erin Prosk and Jeet-Kei Leung



490 York Road Suite A109 The York Business Centre Guelph, ON N1E 6V1 info@camcd-acdcm.ca

©2013 by the Canadian Association of Medical Cannabis Dispensaries • All rights reserved • Published 2013 • Printed in Canada

Any copying, republication, or redistribution of the content by any means is expressly prohibited. Unauthorized use of any content may violate copyright laws, trademark laws, the laws of privacy and publicity, and communications regulations and statutes.

# **Table of Contents**

TABLE OF CONTENTS	1
INTRODUCTION	5
CERTIFICATION STANDARDS	. 5
ORGANIZATION OF THE CERTIFICATION STANDARDS	5
INTRODUCTION TO CAMCD	6
CAMCD MISSION	6
CAMCD VISION	6
CAMCD VALUES	6
CAMCD OBJECTIVES	7
MEDICAL CANNABIS IN CANADA	8
DEVELOPMENT OF THE DISPENSARY CERTIFICATION STANDARDS AND CERTIFICATION PROGRAM	9
SUPPORT AND CONTRIBUTIONS	10
HEALTH CANADA MARIJUANA FOR MEDICAL PURPOSES REGULATIONS (MMPR)	11
ONGOING REVISION TO THE CERTIFICATION STANDARDS AND CERTIFICATION PROGRAM	11
CERTIFICATION PROGRAM OUTLINE	12
CERTIFICATION PROGRAM MATERIALS	12
PROGRAM ELIGIBILITY AND APPLICATION	12
CERTIFICATION PROGRAM STEPS	13
CERTIFICATION DECISIONS	14
CAMCD CERTIFICATES	14
CAMCD CERTIFICATION STANDARDS	15
I. PATIENT ELIGIBILITY	15
1. AGE OF PATIENT	15
2. MEDICAL CONDITIONS AND SYMPTOMS	16
A. DIAGNOSIS AND RECOMMENDATION FOR USE	16
B. SPECIAL CONSIDERATIONS	17
3. DOCUMENTATION	18
A. HEALTHCARE PRACTITIONERS	18
B. REQUIRED INFORMATION	18
C. DATE OF DOCUMENTATION	19
	1 •

# Table of Contents

I. EXPIRY OF DOCUMENTATION		19
II. RENEWAL OF DOCUMENTATION		19
D. DOCUMENT VERIFICATION		20
E. TYPES OF DOCUMENTATION		20
4. INELIGIBLE APPLICATIONS		21
II. PATIENT INTAĶE		22
1. APPLICATIONS	•	22
A. PROCESSING APPLICATIONS	,	22
<b>B. CRITICAL AND TERMINAL STAGE OF ILLNESS</b>		2.2
2. REGISTRATION		23
A. PATIENT INFORMATION AND VERIFICATION		23
B. PATIENT RIGHTS AND RESPONSIBILITIES		24
C. CONSENT		24
D. DISPENSARY IDENTIFICATION	÷	25
3. PATIENT EDUCATION AND INDIVIDUAL PLANS		.26
A. PATIENT EDUCATION		26
B. INDIVIDUAL PLANS AND MONITORING PROTOCOLS		27
III. PRODUCTS AND SERVICES		28
1. ACCESS		28
A. HOURS OF OPERATION		28
B.VISITING PATIENTS		28
C. ACCESSIBLE SERVICES		29
2. CANNABIS STRAINS AND PRODUCTS		30
A. CANNABIS STRAINS		30
B. CANNABIS PRODUCTS		31
C. DEVICES FOR CANNABIS ADMINISTRATION		31
D. OTHER PRODUCTS		32
3. SUPPORT AND MONITORING		32
A. STRAIN AND PRODUCT INFORMATION		32
B. TRACKING EFFICACY AND SIDE-EFFECTS		33
C.INDIVIDUALIZED CONSULTATIONS		33
D.SPECIALIZED SUPPORT AND MONITORING		34
4. ANCILLARY SERVICES		35
A. HEALTH CARE AND COMMUNITY RESOURCES		35
B. ADVOCACY		36
IV. DISPENSING		37
1. OPTIONS AND REQUIREMENTS		37
A. DISPENSING OPTIONS		37
B. VERIFICATION OF IDENTIFICATION		38
2. RESTRICTIONS	•	38
A. QUANTITY RESTRICTIONS		38
B. RIGHT TO REFUSE SERVICE		39

	3. DISPENSING PRACTICES				40
	A. DISPENSING AREA				40
	B. HANDLING				40
	4. ACCURACY AND TRANSPARENCY				41
	A. WEIGHING				41
	B. LABELING				41
	c. Packaging			•	42
	D. SALES RECORDS				43
٧.	SUPPLY				44
	1. PRODUCT QUALITY				44
	A. QUALITY CONTROL				44
	B. PRODUCTION METHODS				45
	C. STORAGE AND PACKAGING				45
	2. INVENTORY MANAGEMENT		•		46
	A. PRODUCT VARIETY AND QUANTITY				46
	B. PRODUCT TRACKING				46
	3. SUPPLY ACCOUNTABILITY			*	47
	A. ELIGIBLE RECIPIENTS				47
	B. CONTRACTS				48
	C. REPORTING RESPONSIBILITIES				48
VI.	SAFETY, SECURITY AND PRIVACY				49
	1. HEALTHY ENVIRONMENT				49
	A. INFECTION CONTROL				49
	B. EMERGENCY PREPAREDNESS				50
	c. Restroom facilities				50
	D. ON-SITE MEDICATION USE				50
	E. HEALTH AND SAFETY REGULATIONS	•			51
	2. SAFE CONDUCT				52
	A. INCIDENT MANAGEMENT				52
	B. CONSEQUENCES FOR INFRACTIONS				52
	3. SECURITY AND PRIVACY MEASURES				53
	A. SECURITY SYSTEMS				53
	B. MANAGEMENT OF SENSITIVE INFORMATION				53
	C. PRIVACY AND CONFIDENTIALITY				54
VII.	. EFFECTIVE ORGANIZATION				55
	1. GOVERNANCE AND MANAGEMENT				55
	A. GOVERNANCE				55
	B. RECORD KEEPING				55
	C. FINANCIAL MANAGEMENT AND REPORTING				56
	D. INSURANCE AND RISK MANAGEMENT				56
	E. PERFORMANCE MANAGEMENT			9	56
	2. LEGAL AND REGULATORY COMPLIANCE				57
					31

# Table of Contents

60 60 61 61 62 63
60 61 61 62
60 61 61
60 61
60
60
59
59
59
58
58
58
57
57

# Introduction

# **Certification Standards**

The CAMCD Certification Standards represent the foundational policies and practices of dispensary operations. CAMCD has released its Certification Standards to the public for review by all stakeholders with the goal of increasing the transparency, awareness and credibility of medical cannabis dispensaries. The complexity and breadth of the Certification Standards affirms the important role dispensaries serve in the provision of medical cannabis.

The Certification Standards comprise the core of the CAMCD Certification Program, which is a rigorous and thorough accreditation program for medical cannabis dispensaries. Patients, caregivers, health care practitioners and other community stakeholders can look for a CAMCD certified dispensary as an assurance of high quality of patient care, accountability and due diligence.

# Organization of the Certification Standards

The Certification Standards are organized into 7 key areas of dispensary operations and practices. Standards relating to each key area are further categorized to facilitate understanding and implementation. Each standard is accompanied by corresponding background information explaining the context and intent of each standard. Those Certification Standards that comprise the mandatory Required Organizational Practices are indicated throughout and are listed in Appendix A for quick reference.

# Introduction to CAMCD

The Canadian Association of Medical Cannabis Dispensaries (CAMCD) is a private, not-for-profit corporation established in 2011. CAMCD is an initiative by medical cannabis dispensaries across Canada to bring together organizations and supporters with similar goals and objectives to support and promote the legitimacy of medical cannabis in Canada. CAMCD's mandate is to promote a regulated community-based approach to medical cannabis access and to support medical cannabis dispensaries to provide the highest quality of patient care.

Other CAMCD campaigns include participating in government-sponsored consultations and hearings, working with health care organizations, engaging in research studies and community outreach, and liaising with law enforcement organizations. Together, these efforts reduce the stigma associated with the medical use of cannabis, and help establish a safer environment for dispensaries, patients, and the community.

# **CAMCD Mission**

Promoting a regulated community-based approach to medical cannabis access and supporting medical cannabis dispensaries to provide the highest quality of patient care.

# **CAMCD Vision**

Legally permitted community-based medical cannabis dispensaries providing access to a wide range of high quality cannabis medicines to those in need and regulated in a manner consistent with the highest standard of patient care.

# **CAMCD Values**

CAMCD values can be found in detail on the CAMCD website:

http://www.camcd-acdcm.ca/mission/

# **CAMCD Objectives**

In support of CAMCD's mission, vision and values, the objectives of CAMCD are:

- To establish and uphold standards for the certification of medical cannabis dispensaries;
- To support medical cannabis dispensaries in providing a high standard of care through education, research and the promotion of best practices;
- To provide clients of medical cannabis dispensaries a mechanism to log and address complaints about dispensaries;
- To conduct, encourage and facilitate research into the medical use of cannabis and methods for its production, distribution and regulation;
- To work with the public, government, educational institutions, health care providers and law enforcement agencies to increase understanding of medical cannabis dispensaries.

# Medical Cannabis in Canada

Medical cannabis is an emerging and still controversial therapy. Medical conditions for which cannabis has been demonstrated to have therapeutic potential include cancer, HIV/AIDS, multiple sclerosis, arthritis, glaucoma, migraines, epilepsy, and others. Approximately one million Canadians report using cannabis for medical purposes<sup>1</sup>.

Despite official recognition by the Canadian courts and government of the rights of patients to access medical cannabis, patients continue to report substantial barriers to Health Canada's Marihuana Medical Access Program (MMAP). Approximately 26 000 patients are currently authorized to posses cannabis under the MMAP. In recognition of this inadequate delivery of health care services, the Canadian judiciary has found the MMMP unconstitutional in eight separate court cases since its implementation over 10 years ago. In response, Health Canada has made minor amendments to the program. Health Canada is currently engaging in another amendment process and the proposed regulations, the Marijuana for Medical Purposes Regulations (MMPR), are expected to be in place by 2014.

Pre-dating Health Canada's program, a parallel system of medical cannabis access has existed in Canada since 1997 through medical cannabis dispensaries. Approximately 50 dispensaries located across Canada currently serve approximately 30,000 patients upon referral by an authorized health care practitioner. Dispensaries provide access to cannabis-based medicines including a variety of strains and routes of administration (e.g. dried cannabis, baked goods, tinctures, salves, vaporizers, etc.). Dispensaries also provide education on safe and effective use of cannabis and offer other forms of patient supports in a community-based environment.

Despite the fact that court decisions across the country have recognized their important role in the provision of medical cannabis access in Canada, medical cannabis dispensaries have not been incorporated into the legal framework for medical cannabis access in Canada. These health care organizations currently operate outside of mainstream health care services and are otherwise unregulated. CAMCD has developed its Dispensary Certification Program in an effort to fill this regulatory gap by assisting dispensaries to improve the quality of services they provide and increase their credibility as models of medical cannabis provision.

<sup>&</sup>lt;sup>1</sup>Canadian Addiction Survey 2004: Highlights. Canadian Centre on Substance Abuse. Ottawa, Ontario.

<sup>&</sup>lt;sup>2</sup> Guidelines for the Distribution of Medical Cannabis in Canada. N. Rielle Capler and Philippe Lucas. Published by BC Compassion Club Society and Vancouver Island Compassion Society.

# Development of the Dispensary Certification Standards and Certification Program

While many medical cannabis dispensaries already operate according to industry best practice guidelines developed in 2006<sup>2</sup>, there is variability in practices between dispensaries. Increasing the reliability, consistency and credibility of community-based dispensaries has been identified by health care providers, policy-makers and patients as key to a successful patient-centred model of medical cannabis access<sup>3</sup>.

The goal of implementing an accreditation or certification of organizations is to assure patients and other stakeholders that the organization is reputable and adheres to stringent protocols. Accreditation is one of the most effective ways for health service organizations to regularly examine and improve the quality of their services<sup>4</sup>.

CAMCD identified that a certification program for medical cannabis dispensaries would require a set of measureable dispensary operational standards, the Certification Standards. During the development of the Certification Standards, CAMCD utilized a Delphi process to identify key areas of dispensary operations and practices through consultations with CAMCD directors, dispensary representatives and community stakeholders.

A series of consultation meetings and key informant interviews was held in Vancouver in June 2012 to ensure that CAMCD's Dispensary Certification Standards would address the needs and concerns of patients and dispensaries, as well as other key stakeholders including policy-makers from the medical community, relevant NGOs, all levels of governments, and law enforcement. The input from these meetings and interviews has been incorporated into the Certification Standards and Certification Program.

The current, 1<sup>st</sup> edition of the CAMCD Certification Standards are implemented as part of the CAMCD Certification Program, launched as a pilot program in early 2013.

<sup>&</sup>lt;sup>2</sup> Guidelines for the Distribution of Medical Cannabis in Canada. N. Rielle Capler and Philippe Lucas. Published by BC Compassion Club Society and Vancouver Island Compassion Society.

<sup>&</sup>lt;sup>3</sup> Community Stakeholders Survey Report. N. Rielle Capler, Megan Hiles, Zach Walsh, and Philippe Lucas. http://www.camcd-acdcm.ca/publications/

<sup>&</sup>lt;sup>4</sup> Accreditation Canada. Retrieved June 1, 2012 from: http://www.accreditation.ca/aboutus/message/

The CAMCD Certification Program is a rigorous external evaluation process comprised of almost 200 checkpoints covering all aspects of dispensary operation, from patient care to business practice. Accreditation takes place over three consecutive program phases: self-assessment against the Certification Standards, followed by two on-site surveys by an external surveyor to achieve Primary Certification (valid 1 year) or Full Certification (valid for 3 years). Dispensary Certification from CAMCD will ensure consistency, accountability, transparency, and superior quality of patient care across the country.

CAMCD therefore serves as a self-regulated, professional order of Canadian medical cannabis dispensaries, promoting legitimacy of dispensaries and supporting ongoing improvement of the medical cannabis industry. Medical cannabis patients, caregivers and health care practitioners across Canada can look to a CAMCD certified dispensary for assurance of quality of patient care and organizational practices.

# **Support and Contributions**

CAMCD is supported by contributions from medical cannabis dispensaries and other public supporters. The current list of CAMCD Board of Directors and Advisory Board members can be found on the CAMCD website. To donate to CAMCD or one of the current campaigns, visit the CAMCD website: www.camcd.ca/campaigns

The development and implementation of the CAMCD Certification Program is supported in part by a grant from the Peter Wall Solutions Initiative awarded to the SEED project<sup>5</sup>; a collaboration between researchers from the University of British Columbia, Canadians for Safe Access and CAMCD. This project supported CAMCD to conduct a series of consultation meetings and key informant interviews with patients, dispensary operators, policy makers, and other key experts and stakeholders to ensure the CAMCD Certification Program addresses their needs and concerns. The SEED Project has supported the dissemination of the CAMCD Certification Program by co-hosting the CAMCD/SEED Dispensary Symposium and launch of the Certification Program in June of 2013.

The Medical Cannabis: Standards, Engagement, Evaluation and Dissemination (SEED) project is funded by the Peter Wall Solutions Initiative, which focuses on practical and innovative solutions to societal problems. The Peter Wall Solutions Initiative (PWSI) enables UBC faculty to team with community organizations in order to address issues of societal importance through innovative, interdisciplinary and academically rigorous research projects. The PWSI is supported by the Peter Wall Endowment to UBC. http://research.ubc.ca/vpri/ubc-peter-wall-solutions-initiative.

# Health Canada Marijuana for Medical Purposes Regulations (MMPR)

The implementation of the CAMCD Dispensary Certification Program coincides with the goals and timeline of Heath Canada's recent proposed legislation, the Marihuana for Medical Purposes Regulations (MMPR). The proposed regulations include the licensing of commercial producers, as well as on-site dispensing through health care practitioners and hospitals and the removal Health Canada from the patient approval process. Dispensaries are well positioned to fill these roles within the national framework to ensure patients have timely access to medical cannabis and related services. Certification with CAMCD will support dispensaries with the tools required to prepare for application for a commercial license under the MMPR.

# Ongoing Revision to the Certification Standards and Certification Program

The development of the CAMCD Certification Program is a starting point in the process of dispensary certification standards development and revision. All recommendations from dispensary participants, health care practitioners, advocacy and patients groups, surveyors and accreditation organizations and any other stakeholders will be consolidated for review on an ongoing basis. This field input will be analyzed carefully during program reviews and evaluations and the results of this process will be reflected in further developments of the CAMCD Certification Program. Program participants are responsible to stay up to date with future versions of the CAMCD Certification Standards.

The CAMCD Certification Program, including the Certification Standards, the survey process and survey conditions, is reviewed regularly by CAMCD and may change periodically. Up-to-date information, clarification and notification of any changes can be obtained by contacting CAMCD and by staying updated via the CAMCD website <a href="www.camcd-acdcm.ca">www.camcd-acdcm.ca</a>.

# **Certification Program Outline**

The objective of dispensaries in the Certification Program is to achieve the level of Full Certification, which requires a dispensary to meet a minimum of 90% of the Certification Standards during the onsite Full Survey. Full Certification is valid for 3 years. Participating dispensaries work up to the Full Survey by first completing a self-assessment phase followed by an on-site Primary Survey.

# **Certification Program Materials**

Dispensaries in the Certification Program receive additional materials to support their development and preparation for the onsite surveys.

These supporting materials include the list of tests for compliance that must be met in order to meet each standards and examples of current practices that meet these tests.

Dispensaries are provided and required to complete accompanying documents throughout the program. These include a Survey Preparation Guide and Patient Surveys to assist dispensaries during the Self Assessment phase as well as several evaluation tools to support further development of the Certification Program.

# Program Eligibility and Application

To be eligible for the CAMCD Certification Program, a dispensary must have a location where patients may visit to access personnel. Medical cannabis may be dispensed onsite at this location, or via home delivery or mail order.

Start-up dispensaries may also apply to the Certification Program, but must be prepared to begin the provision of services and satisfy program eligibility requirements within 3 months of application.

Upon admittance to the Certification Program, operating dispensaries must affirm by self-assessment that their current policies and practices meet the Required Organizational Practices of the Certification Standards.

# **Certification Program Steps**

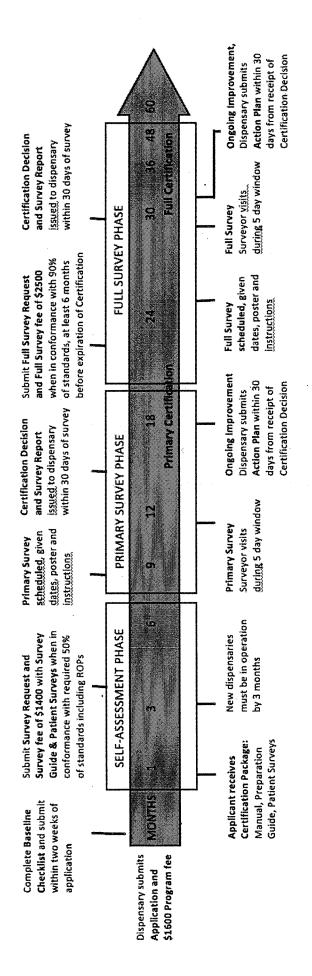


Figure 1: CAMCD Certification Program timeline indicating the three progresive program phases.

# **Certification Decisions**

Following the Primary and Full Surveys, CAMCD undertakes a certification decision process to review the results of the survey report and render a Certification Decision.

Primary Certification: valid for 1 year

A decision of Primary Certification indicates that a dispensary has met at least 50% of the Certification Standards including all Required Organizational Practices.

Full Certification: valid for 3 years

A decision of Full Certification indicates that a dispensary has met at least 90% of the Certification Standards including all Required Organizational Practices.

A dispensary has a total of two Primary Survey attempts and three Full Survey attempts while participating in the Certification Program. Failure to achieve the corresponding certification decision following these surveys results in the dispensary removed from the program.

# **CAMCD Certificates**

A certified dispensary is issued a CAMCD Certificate in both paper and web-based format. CAMCD may from time to time conduct announced or unannounced monitoring visits of CAMCD certified dispensaries. A dispensary may not use or display a CAMCD certificate if certification has expired or has been revoked or in any other manner that is inconsistent with CAMCD objectives. The status of dispensaries participating in the Certification Program will be listed on the CAMCD website: www.camcd.ca/dispensary-certification.

# **CAMCD Certification Standards**

# I. PATIENT ELIGIBILITY

Goal: To ensure eligible patients have access to dispensaries

# 1. Age of Patient

Focus: Addressing requirements related to age of patient

Required Organizational Practice

# Background:

Typically, the parents or legal guardian provide consent to treatment on behalf of patients under the age of majority and must be guided by what is in the best interest of the minor. However, legislation for consent to medical treatment in a number of provinces and territories in Canada is based on the person's capacity to consent to or refuse the treatment regardless of age <sup>6</sup>. Despite the fact that a minor may consent to treatment, dispensaries must balance patient need for medicine with the current legal status of cannabis and public concerns about age. Except for specific instances where the need for medicine outweighs the public concerns, for example palliative care, it is prudent for dispensaries to abide by the legal age of majority in their province or territory for all patients. (Note: this does not apply to emancipated persons).

# Standard:

The dispensary accepts patients who have reached the age of majority in their province/territory and minors who have written consent from a parent or legal guardian.

**15** •

<sup>&</sup>lt;sup>6</sup> For example, <a href="http://www.bclaws.ca/EPLibraries/bclaws\_new/document/ID/freeside/00\_96223\_01">http://www.bclaws.ca/EPLibraries/bclaws\_new/document/ID/freeside/00\_96223\_01</a>

# 2. Medical Conditions and Symptoms

Focus: Addressing requirements related to patient's medical conditions and symptoms

## a. Diagnosis and recommendation for use

Required Organizational Practice

### Background:

Medical cannabis use generally refers to applications that alleviate the suffering related to specific symptoms and medical conditions. Cannabis has well-documented potential medical applications for symptoms including but not limited to pain, muscle spasms, nausea, weight loss, loss of appetite, depression and anxiety associated with the following conditions or medical treatments:

ADHD, arthritis, brain/head Injury, cancer, colitis, chemotherapy, Crohn's disease, epilepsy, fibromyalgia, glaucoma, hepatitis C, HIV/AIDS, irritable bowel syndrome, migraines, multiple sclerosis, muscular dystrophy, nausea (chronic and debilitating), pain (chronic), paraplegia/quadriplegia, Parkinson's disease, PTSD, radiation therapy, seizure disorders (epilepsy), and sleep disorders (chronic and debilitating).

(note: the above list of conditions is not exhaustive and does not account for all patients in all circumstances. This list will be reviewed and modified periodically in light of emerging research.)

Dispensaries provide cannabis for medical purposes only, therefore patients must have a diagnosis and related symptom for which cannabis has well-documented potential medical applications. As a result of barriers to obtaining support of health care practitioner, patients must provide a confirmation of diagnosis for condition/symptoms for which there is sufficient evidence and a specific recommendation for cannabis use for other conditions and related symptoms.

#### Standard:

Before registering a patient, the dispensary requires the patient to present documentation demonstrating a diagnosis and related symptom/s for which cannabis has well-documented potential medical applications (see list above), and an additional recommendation for cannabis use for other conditions and related symptoms.

## b. Special considerations

Required Organizational Practice

### Background:

Research suggests that cannabis can be effective for certain conditions and symptoms, or certain situations, for which there is also concern about potential risks. These include severe mental health conditions, dependency and addictions, and pregnancy. These may be the primary or secondary medical reason for a patient's use of cannabis. A patient may inform the dispensary of such a condition at the time of registration or at a later point.

Some dispensary patients have recommendations for the use of cannabis for mental health conditions such as bi-polar disorder or schizophrenia. Many patients suffering from critical or chronic physical conditions also experience mental health problems such as depression and anxiety. Research suggests that cannabis can be effective in alleviating the symptoms of many mental health conditions. However, in some cases, cannabis can exacerbate symptoms. This may be related to the strain and dosage used.

Research demonstrates that cannabis can be used as a substitute for alcohol, tobacco, prescription and illicit drugs. Cannabis can also mitigate withdrawal symptoms related to these substances. In addition to using cannabis to alleviate symptoms associated with their medical condition, patients may find that cannabis use leads to a reduction in the use of prescribed pharmaceuticals. The use of cannabis to reduce the use of pharmaceuticals or other substances may be their primary medical reason for cannabis use. There is concern about the potential risk for the development of dependence on cannabis for patients with patterns of dependency, addiction or compulsive use of cannabis or other substances

Cannabis use has been found to be effective for severe nausea in pregnancy. Some patients with medical conditions for which cannabis is effective choose to use cannabis during their pregnancy to alleviate their symptoms. Research on cannabis use during pregnancy is inconclusive as to negative effects on newborns and development.

While requiring a recommendation for use can help provide an extra level of support, these populations often face discrimination and therefore may experience additional barriers to access. The dispensary must balance the concern for potential risks of use with reducing barriers to those who could be benefit from use. See Part III. 3. Support and Monitoring

#### Standard:

The dispensary supports patients that face barriers to access due to their medical condition or symptoms to obtain necessary confirmation of diagnosis and recommendation for use.

### 3. Documentation

Focus: Obtaining and maintaining required documentation

## a. Healthcare practitioners

Required Organizational Practice

### Background:

Dispensaries require documentation of their patients' medical conditions and recommendations for the use of medical cannabis. Such documentation and recommendations may be provided by a physician or other health care practitioner that is legally permitted to prescribe medicine (herbal or pharmaceutical) and is a member of a provincial college or other licensing body that has statutory authority to regulate their profession. Besides physicians (MDs), this may differ from province to province and may include doctors of Traditional Chinese Medicine (DTCM), naturopathic doctors (NDs) and nurse practitioners (NPs). A list of health care practitioner's and the associated licensing body can be found in Appendix C.

### Standard:

The dispensary obtains documentation of the patient's medical condition and related symptom(s), and recommendations for use, from an eligible health care provider.

## b. Required information

## Background:

To verify the eligibility of a patient prior to registration, the dispensary will require the following patient information: the patient's full name, date of birth, contact information, diagnosis, condition(s) and related symptoms, other medications, and recommendation for use (if applicable). Additionally, the following health care practitioner's information will be required: full name, professional designation, license number, business address, phone and fax number, as well as their signature and the date on the diagnosis and/or recommendation.

Application documentation includes all necessary information about the patient and the health care practitioner who is providing the diagnosis and/or recommendation for use in order to verify eligibility of patients.

### c. Date of documentation

## i. Expiry of documentation

### Background:

Patients' diagnoses and reasons for medical cannabis use must be relevant at time of registration with a dispensary and ongoing as they access cannabis from the dispensary.

The requirement for up-to-date patient records will enable dispensaries to provide informed patient care, and to maintain credibility and accountability as a medical cannabis provider. Thus, the application documentation, including confirmation of diagnosis and recommendation for use, should be as current as possible. A typical duration for prescription drugs is one year from the date the original prescription is written.<sup>7</sup>

#### Standard:

A dispensary will accept an application with a diagnosis and/or recommendation for use that is dated within the past 1 year.

### ii. Renewal of documentation

## Background:

On the application documentation, the patient's health care practitioner may recommend temporary access, for example in the case of a short-term condition and related symptoms, or may not specify a date in the case of longer-term conditions in order to give discretion to their patient. Requiring regular updates of documentation encourages a scheduled discussion between the patient and their health care practitioners about the patient's experience using medical cannabis products and whether cannabis use is of continued benefit. Typically, a

<sup>&</sup>lt;sup>7</sup> http://library.bcpharmacists.org/D-Legislation\_Standards/D-2\_Provincial\_Legislation/1017-PPP58\_OrientationGuide.pdf

prescription can be renewed for up to one year, and health care practitioners are informed of any renewals. When determining appropriate time-lines for documentation updates, it is important to avoid placing a burden on patients or their health care practitioners and the health care system.

#### Standard:

After a patient is registered, the dispensary will require updated documentation as specified by the health care practitioner or, if there is no specification, at a maximum of every five years.

### d. Document verification

Required Organizational Practice

### Background:

Verifying the authenticity of documentation provided by the patient and their health care practitioner is vital to the functioning of a dispensary as it will ensure the dispensary is providing cannabis for medical purposes only. It will also support dispensaries in providing high quality patient care. Specific content of the application documentation that need to be verified are the required information, date of the documentation, as well as the legitimacy of the health care practitioner.

#### Standard:

The dispensary verifies the authenticity of all application documentation.

## e. Types of documentation

## Background:

Various types of documentation may contain the necessary information about a patient, and the health care practitioner (see 2b above). Dispensaries may create a specialized form for health care practitioners to complete. Documentation that ensures the health care provider is aware of the patient's use of medical cannabis and which brings them into the circle of care - such as a dispensary form or a Health Canada form - is ideal. However experience suggests that some health care practitioners may not feel comfortable completing such forms. In some cases, other options for documentation can be used to support patient access to a dispensary.

The dispensary accepts documentation that includes necessary information about a patient and their health care practitioner.

## 4. Ineligible applications

Focus: Addressing ineligible applications

### Background:

In some cases, a patient's application will be incomplete, unverifiable, or otherwise inadequate. Informing the patient and their health care practitioner, and explaining the reason(s) for the application's ineligibility ensures the transparency and accountability of the registration process and allows individual patients to potentially address any concerns or complete missing information. The timeliness of notifying patients is crucial as delays may impede access.

#### Standard:

The dispensary will notify the patient and their health care practitioner within 1 week of determining an application is ineligible and will explain the reason for ineligibility.

## II. PATIENT INTAKE

**Goal:** To ensure patient intake process is transparent and contributes to high quality care

## 1. Applications

Focus: Timely and transparent processing of applications

## a. Processing Applications

### Background:

After dispensaries verify the information provided on the application forms, each may have unique policies and procedures to process applications and provide access to their products and services. An important aspect of providing effective health care services involves the diligent and timely processing of applications from new patients. Patients who submit applications to a dispensary may have already experienced an extended waiting period for their health care practitioner to complete the necessary forms on their behalf. It is vital that patients are able to access the products and services offered by the dispensary in as timely manner as possible. An efficient and transparent procedure for processing applications will support access and promote accountability to patients.

#### Standard:

The dispensary has a transparent procedure for processing applications.

# b. Critical and Terminal Stage of Illness

## Background:

Dispensaries serve many patients who are in the critical or terminal stage of their illness. Some patients may be undergoing treatments with significant side effects, such as chemotherapy for cancer or interferon treatment for hepatitis C. Timeliness of access in such cases is vital since cannabis may provide effective symptom relief and improved quality of life for such patients. Patients in the palliative stage of illness require special consideration. For some, cannabis is effective in supporting a reduction of opiate use.

Dispensaries are in a position of both great responsibility and privilege to play such a potentially important role in a person's end-of-life care, and it is one of the most profound aspects of the service a dispensary provides.

#### Standard:

The dispensary provides timely access to services to patients in the critical or terminal stages of their illness.

## 2. Registration

Focus: Requirements for patient registration

### a. Patient Information and Verification

Required Organizational Practice

## Background:

In order to provide the highest quality of care possible and verify the identity of the patient, dispensary personnel will require specific information about the patient. Such information, if collected in a systematic manner, supports dispensaries to evaluate the needs of their patients, create relevant products and services, and to participate in collaborative research. Required information includes:

- Personal and demographic information;
- Contact information, including emergency contact information;
- Detailed information regarding conditions, symptoms, and use of other medications;
- Previous use of and experience with cannabis;
- Other relevant information such as pregnancy, eating and sleeping habits, allergies, use of other drugs; and
- Copy of photo ID.

(See Part VI. 3. c. Privacy and confidentiality)

The dispensary obtains information required to effectively provide services and verify patient identity.

## b. Patient Rights and Responsibilities

### Background:

Providing a detailed agreement or contract that outlines expected patient conduct within the dispensary and in the immediate neighbourhood helps to create a safe, secure and welcoming environment for patients and personnel while also encouraging awareness of and respect for local community norms and expectations. It is important for patients to be aware of the consequences for infractions as well as any courses of appeal (See VI. 3 b. consequences for infractions). An agreement or contract can inform patients of their rights and of the process for recourse if they believe their rights have been violated. Review of mutual expectations with each new patient helps to prevent problems and support resolution of any that do arise.

#### Standard:

The dispensary ensures all patients are aware of their rights and responsibilities, including repercussions for infractions, courses of appeal and process for complaints.

#### c. Consent

## Background:

Dispensaries in Canada are operating within a climate of general cannabis prohibition to provide cannabis to those in medical need. In such a legal climate, it is important to make it as explicit as possible that the dispensary is providing cannabis only to patients requiring it for therapeutic purposes. Beyond requiring documentation from health care practitioners to ensure that all patients have medical need, the dispensary can take further steps to clarify their role through explicit patient consent forms designating the dispensary to procure medical cannabis on their behalf and agreeing that the cannabis they obtain from the dispensary is for their own medical use. It is also important for the patient to be made aware of the legal status of cannabis and dispensaries and to accept any related risks. Such a consent form establishes legitimacy for both patients and dispensaries.

The dispensary obtains the patient's consent designating the dispensary to procure medical cannabis on their behalf for their own medical use, and establishing their awareness of the legal status of cannabis and dispensaries and acceptance of any related risks.

## d. Dispensary Identification

## Background:

For security purposes at the dispensary, it is important that dispensary personnel are able to verify their patients' identification in a timely manner upon every visit to the dispensary. For smaller dispensaries, the personnel may be familiar with each patient, however at larger dispensaries with many patients and personnel, a more formal system may be required. For external purposes, there are circumstances where it may be desirable for the patient to be able to identify themselves as a patient whose medical use of cannabis has been verified by a dispensary. For example, law enforcement officers in many municipalities across Canada recognize registration cards from respected dispensaries as evidence of legitimate medical cannabis use. This can save patients from being detained, arrested, charged or having their medicine confiscated.

#### Standard:

The dispensary provides patients with a means to identify that they are registered with the dispensary both for internal and external purposes.

### Patient Education and Individual Plans

Focus: Providing education and individualized care to patients

### a. Patient Education

### Background:

It is important that patients using cannabis as a medicine are equipped with all of the information necessary to use it safely and effectively. Dispensaries are well-positioned to work with patients and other health care providers to ensure all are informed and able to make educated choices about the role of the cannabis within their overall treatment regimen. Dispensaries may be the primary patient resource for information on the use of medical cannabis, and the intake process provides an opportune time to provide patients with preliminary education on the safe and effective use of cannabis. Dispensaries should also be available to provide information to patients upon their request. Unless personnel are qualified to provide medical advice, it is important to make it clear that any information provided in intended to support patients to make informed choices. Efforts should also be made to notify patients of significant scientific, social, regulatory or legal developments.

Essential topics of patient education include:

- Strain selection to target particular symptoms or conditions, 'indica' and 'sativa' effects, etc.
- Safe use, including safe smoking techniques and alternatives to smoking, such as ingestion options and vaporization.
- Dosage, potency and titration.
- Tolerance, dependence and withdrawal.
- Potential adverse reactions, side effects, contraindications and drug interactions.
- Safe behaviour, such as not driving while impaired.
- Social, political and legal context, including legal risks, stigmatization, variance in law enforcement understanding, etc.

## Standard:

The dispensary provides the patient with evidence-based information regarding the safe and effective use of cannabis.

# b. Individual Plans and Monitoring Protocols

## Background:

The role and use of cannabis in a patient's overall treatment may vary greatly from one patient to the next. For example, each individual patient has unique symptoms, medical histories, treatment regimens, and work and living situations. As part of the intake process and ongoing care, the dispensary should work with the patient to develop plans based on individual needs. These plans may include supporting patients to determine appropriate strains, methods of ingestion, and dosages.

The dispensary should also work with patients to develop protocols for monitoring those who might require specialized care and support, such as palliative patients and those with mental health or substance use conditions. Monitoring protocols involve follow-up or checkin with individual patients at regular intervals to ensure this treatment is of continuing benefit. A dispensary may also include the patient's primary health care practitioner in the development of protocols. It is important for dispensaries to develop individual plans and monitoring protocols for patients within a collaborative relationship with the patient's health care providers. See Part III. 3. Support and Monitoring for implementation

#### Standard:

The dispensary works with patients to develop individual plans based on individual patient needs and protocols for patients who may require specific support or monitoring.

## III. PRODUCTS AND SERVICES

**Goal:** Products and services that meet patient needs are consistently accessible.

### 1. Access

Focus: Accessibility of products and services

## a. Hours of operation

### Background:

One of the most important factors determining patient access to services is having consistent hours of operation. In determining the hours of operation, the dispensary should consider the range of times in which patients may be able to access the dispensary services and personnel. Some patients will only be able to visit or call the dispensary in the evening or on weekends, while others may be limited to day-time hours. It is important to ensure that patients are aware of the hours of availability of all services offered with sufficient notice of any changes so that patients can make plans accordingly.

#### Standard:

The dispensary has consistent hours of operation.

## b. Visiting patients

## Background:

By providing services to visiting patients, dispensaries can support medical cannabis patients to travel within Canada without foregoing access to their medicine. Visiting patients must be registered with another CAMCD certified dispensary, or must hold a valid authorization from Health Canada or from an international jurisdiction that has medical cannabis legislation. When determining whether to provide access to visiting patients from a US state, it is important to consider the legal risks of providing services to patients with authorization from outside Canada. In all cases, appropriate paperwork must be obtained and verified to ensure that medical cannabis and cannabis products are dispensed only to valid visiting

patients. A dispensary may choose to offer a limited timeframe for visiting patients to access services before they are required to register.

#### Standard:

Dispensaries may choose to provide services to visiting patients who are registered with another CAMCD certified dispensary, or who possess a valid authorization from Health Canada or from an international jurisdiction that has medical cannabis legislation.

### c. Accessible services

### Background:

Dispensaries share a fundamental aim to ensure that services are equally accessible to all registered patients. An effective accessibility strategy first identifies potential barriers to access, including structural and environmental barriers, and works to create balanced solutions to reduce or eliminate them. The dispensary may serve patients with a range of challenges, for example, physical disabilities, mental health issues, language barriers, and hearing or sight impairments. Considerations about accessibility begin prior to selecting an appropriate location for a dispensary, such as neighbourhood safety, accessibility to public transport and availability of parking. Some structural barriers are modifiable, such as the number of steps, width of doorways and interior layout. Other barriers may be related to policies and practices, such as a non-discrimination or means of communicating important information. Feedback from personnel, patients and their caregivers can help to identify and prioritize barriers to access that need to be addressed.

#### Standard:

The dispensary strives for full accessibility to services.

### 2. Cannabis Strains and Products

**Focus:** Providing strains and products to effectively treat patients' symptoms and conditions

## a. Cannabis Strains

### Background:

The therapeutic use of cannabis has a recorded history dating back thousands of years, during which cannabis has been cross-bred to create hundreds of different strains. Individual cannabis strains contain different quantities of cannabinoids and other active agents, such as terpenoids and flavonoids, giving each strain a unique pharmacological profile. More research is required to clearly establish how these profiles are related to their differential therapeutic effects in relation to different symptom and condition complexes. Although identification of component cannabinoid profiles is possible through laboratory testing, this technology is currently not accessible to most dispensaries. Patients often report specific symptom relief of their symptoms from particular strains and may require a variety of strains to address their symptoms. A variety of methods can be used to identify beneficial strains, such as patient self-reporting and analysis of purchasing records. Dispensaries can work with contracted suppliers to ensure a consistent supply of a variety of beneficial strains.

For quality control and production methods, see (Part V. 1. Product Quality)

#### Standard:

The dispensary provides consistent access to a variety of strains to address patients' symptoms and conditions.

## b. Cannabis products

### Background:

The active constituents of cannabis can be extracted from the plant matter and made into products that can be administered in a variety of, ways to produce different effects. Some patients are referred to dispensaries by their healthcare practitioners in order to access alternative methods of administration. Patients who require larger doses of cannabinoids to alleviate their symptoms may find concentrates to be an effective alternative or supplement to dried raw cannabis. Edible cannabis products have a slower onset of effects but may be longer lasting. Some patients report that alcohol-based extractions such as tinctures or oral-mucosal sprays provide a quick delivery method without the irritation associated with smoked cannabis, in addition to providing a controlled dose. Products that can be applied topically may also confer benefit to some patients. Since cannabis products are typically produced from cannabis plant by-products, they can often be a more cost-effective option for patients. It is important for dispensaries to offer a variety of cannabis products for optimal patient care.

For quality control and production methods, see (Part V. 1. Product Quality)

#### Standard:

The dispensary provides consistent access to a variety of cannabis products and different modes of administration.

### c. Devices for cannabis administration

### Background:

Medical cannabis and some cannabis products may require implements such as pipes, papers or vaporizers for administration. The use of such devices can be reflective of patient preference, characteristics of products (e.g. kif or hashish), or a desire to minimize respiratory irritation. Dispensaries are well-positioned to educate patients about proper use techniques and collect feedback about the benefits and potential drawbacks of the use of different devices. The dispensary may offer purchasing support to patients for more costly devices to encourage patients to adopt safer or more cost-effective methods of cannabis administration.

The dispensary provides access to devices for the administration of cannabis that support patients to use cannabis safely and effectively.

# d. Other products

## Background:

Dispensaries are in a position to provide access to educational materials or nutritional and health products that may be beneficial to medical cannabis patients. Dispensaries that choose to offer such products must have the appropriate retail license and must ensure that the products sold are sanctioned for sale in Canada. It is the responsibility of the dispensary to ensure that natural health products or medicinal herbs are approved by Health Canada. Tobacco, alcohol or illicit substances other than cannabis are not to be sold at a dispensary, nor used on site.

### Standard:

The dispensary may choose to sell other products that are approved for sale in Canada with the appropriate retail license with the exception of alcohol, tobacco or illicit substances other than cannabis.

## 3. Support and Monitoring

Focus: Supporting patients to maximize benefits and minimize harms

## a. Strain and product information

## Background:

It is important for patients to have pertinent information about the cannabis strains and products available to them in order to make selections that will best meet their needs. Full-spectrum chromatographic analysis of cannabinoid profiles remains cost-prohibitive to most dispensaries and the correlation to symptoms requires further research. However dispensaries can support safe and effective use by providing accurate descriptions, including strain or product name, 'indica', 'sativa' or 'hybrid-cross' identification, likely effects, and method of production (organic/non-organic; indoor/outdoor). Because the effects of

cannabis and cannabis products can be very individualized, dispensaries must be cautious about offering specific health claims and focus instead on providing enough information to allow patients to make appropriate selections.

#### Standard:

The dispensary provides information that supports patients to select strains and products most appropriate for their individual needs.

## b. Tracking efficacy and side-effects

### Background:

Dispensaries are often the main point of contact for patients in regards to their medical use of cannabis and are therefore in a good position to monitor their use of cannabis and its effectiveness in their treatment. Such monitoring can be of benefit to all patients and particularly those with identified individual needs or special considerations. Cannabis strains and products have a wide range of effects and may affect patients differently as a result of individual biochemical responses. By tracking efficacy, side effects and any adverse reactions, patients can maximize the effectiveness of medical cannabis in their treatment. Dispensaries can support patients by recording their reported experience regarding the effects and effectiveness of various strains of cannabis or cannabis products. Dispensaries can also provide patients with tools to track the efficacy and side effects of the strains and products they use.

#### Standard:

The dispensary assists patients to track the efficacy and side effects of cannabis strains and products.

### c. Individualized consultations

## Background:

Individualized patient consultations are one of the most valuable services offered by dispensaries. Consultations occur at the time of purchase and may also be scheduled by appointment. During these consultations, dispensary personnel have the opportunity to provide information to each patient about managing their condition and symptoms with available cannabis and cannabis products. This may include information to support the

selection of the most appropriate cannabis strains and products, methods of administration or dosage. Consultations also provides an opportunity to answer questions that the patient may have, identify and mitigate any adverse effects experienced by the patient, discuss changes in the patient's condition and symptoms, and otherwise promote the safe and effective use of cannabis. Additionally, individualized consultations can assist patients with specific challenges such as mental health conditions, dependency or addictions issues, or palliative care. This individualized care and attention can support patients in meeting their unique treatment goals and empower them to take an active role in their own health care. Consultations provide an opportunity to support patients to access ancillary health care services and community resources. Individualized consultations also provide a human and social dimension to receiving support, where patients become recognized as members of a community and experience the dispensary as a welcoming and supportive environment in their lives.

#### Standard:

The dispensary provides individualized consultations to support patients to meet their individual needs.

## d. Specialized support and monitoring

## Background:

Patients with a condition for which there are potential risks for cannabis use may require additional or specialized support and monitoring. While research suggests that cannabis can be an effective treatment option for conditions such as severe mental health conditions, dependency and addiction, there may be cases where cannabis can exacerbate symptoms. Additionally, patients who are pregnant or who are under the age of consent may benefit from specialized support and monitoring. Patients may apply to the dispensary with a diagnosis for such a condition, or may disclose or be diagnosed with such a condition at a later date. It is important that dispensary personnel identify patients for whom specialized support and monitoring is required. Effective support and monitoring may include collaboration with a patient's caregiver(s) or health care practitioner(s) to support and monitor whether cannabis use is of benefit to the patient.

#### Standard:

The dispensary identifies patients for whom cannabis use may poses potential risks and provides specialized support and monitoring for these patients.

## 4. Ancillary Services

Focus: Supporting access to ancillary services

# a. Health care and community resources

### Background:

Some patients are affected by social or personal issues unrelated to their medical use of cannabis, such as poverty, addiction, legal difficulties, and homelessness. Dispensary personnel interact with many patients on a regular basis and may be in a position to make referrals to other kinds of health care and community resources. Referrals may be made to health care providers or agencies, patient support groups, social services, food or housing programs, emergency shelters, drop-in centres, crisis lines, advocacy support, legal aid and other services. Many dispensaries have established relationships with these support services providers. Some dispensaries also employ health care practitioners who are able to provide complementary treatments such as counseling, acupuncture, nutritional counseling, massage therapy, and herbal medicine.

#### Standard:

The dispensary supports patients to access ancillary health care services and community resources.

## b. Advocacy

## Background:

Despite federal and judicial recognition of the legitimacy of medical cannabis, there remains a stigma related to its use that, can negatively impact the well-being of patients. Infringements of the individual rights and freedoms of patients may come to light and dispensaries can at times be in a position to help through education or direct advocacy. The dispensary's advocacy role may include writing letters of support or confirming registration for the patients they serve. Additionally, dispensaries may provide contact information for advocacy and support groups that can defend the human rights of medical cannabis patients. The dispensary may directly assist patients in making contact with an agency of assistance or offer a referral where appropriate. Dispensaries can also engage in education and outreach efforts to increase community understanding and acceptance of medical cannabis to help reduce the stigma faced by patients.

#### Standard:

The dispensary provides access to advocacy related to the patient's use of medical cannabis.

## IV. DISPENSING

Goal: Cannabis and cannabis products are dispensed in a safe, timely and accountable manner.

# 1. Options and Requirements

Focus: Supporting access to registered patients

## a. Dispensing options

### Background:

Dispensary patients have diverse needs for accessing products and services, depending on their condition and other life circumstances. Dispensaries may provide for onsite access, pick-up by a designated caregiver, mail order, or local home delivery or a combination of these. When determining which dispensing options to offer, it is important for a dispensary to consider that different options carry a variety of different benefits as well as potential risks. In all cases, it is the responsibility of the dispensary to take measures to protect the safety and security of patients and personnel and to ensure that medical cannabis and cannabis products are provided strictly to the registered patient. It is important for patients who are accessing the dispensary by any of these options to be able to access information about the available cannabis and cannabis products by phone or via the dispensary website. Offering a variety of different payment options can also serve to improve access and convenience, as well as address concerns about safety and security.

#### Standard:

The dispensary offers at least one dispensing option, including onsite access, pick-up by a designated caregiver, home delivery and mail order.

### b. Verification of identification

Required Organizational Practice

## Background:

As cannabis is a controlled substance, dispensaries must ensure medical cannabis is dispensed only to registered patients. Dispensaries may employ different procedures to identify and verify registered patients. In all cases, including online or over the phone, the patient must consistently present valid identification that supports the verification of their registration and identity. Patient identifiers such as registration numbers, passwords or other patient information may be useful to verify the identity of patients.

#### Standard:

The dispensary verifies the identity of the patient prior to providing services.

### 2. Restrictions

Focus: Maintaining the integrity of the dispensary

## a. Quantity restrictions

### Background:

Research indicates that the daily amount of medical cannabis or cannabis products required by an individual patient to alleviate his or her symptoms is highly variable. The required dosage of cannabis may vary for an individual on a daily, weekly or monthly basis. Irregular or large volume purchases of cannabis or cannabis products may reflect changes in a patient's symptom expression, or may signal over-use, financial considerations, or potentially resale. By creating restrictions for quantities patients may purchase, it is possible for the dispensary to balance patient's needs and personal convenience with concerns regarding the diversion of medicine. General restrictions will apply to most patients. Consultations with a patient and their health care practitioner regarding dosage and method of use are all effective means to gather information that can be used to implement restrictions for individual patients. Consistent tracking of patient purchases by the dispensary is critical to effectively monitor quantity restrictions.

The dispensary limits purchases of cannabis and cannabis products to 5 equivalent dry weight grams of raw cannabis per day up to a maximum purchase of a month's supply at a time.

# b. Right to refuse service

### Background:

Dispensaries retain the right to refuse service to registered patients in certain circumstances. Service might be refused in the moment or as a result of a process determining consequences for a violation of the rights and responsibilities to which patients have agreed to upon registration. The intention for refusing services may include curtailing behaviour that is disruptive to the safety and security of the dispensary or adhering to other dispensary policies that protect the integrity of the dispensaries operations such as quantity restrictions or patient identification. Concerns for the patient's well-being may also result in a refusal to provide service. Service may be refused during home delivery or mail-order service to protect the safety of dispensary personnel. In all cases, it is important to balance these considerations with patient needs to ensure that a refusal to provide services is never arbitrary or biased.

#### Standard:

The dispensary maintains the right to refuse service.

## 3. Dispensing Practices

Focus: Maintaining the quality and safety of dispensed products

## a. Dispensing area

Required Organizational Practice

### Background:

Cleanliness standards are important for any organization responsible for the distribution of medicine. Maintaining a clean environment in areas where product is dispensed is particularly critical for organizations that serve patrons who may have compromised immune systems. In dispensaries, all areas of product contact require regular sanitization maintenance and high traffic areas such as counters and scales demand higher frequency cleaning. Existing guidelines, such as the Food Premises Regulations in British Columbia, outline acceptable protocols to ensure cleanliness of distribution areas and limit contamination of products.

#### Standard:

The dispensary ensures cannabis and cannabis products are dispensed in a clean environment.

## b. Handling

Required Organizational Practice

# Background:

Dispensaries are responsible for maintaining the integrity of the cannabis and cannabis products they dispense to patients. Human contact is recognized to be the most likely source of product contamination. Limiting personnel and patient contact with cannabis can help to prevent instances of contamination. Appropriate precautions include frequent hand or utensil sanitizing, and disposal of used gloves. Due to the fragile nature of cannabis and cannabis products, and the potential loss of quality from rough handling, great care should be taken in handling cannabis at all times. Keeping cannabis and cannabis products in food-safe containers at appropriate temperatures and distributing them in food-safe packaging will also maintain the integrity of the cannabis and cannabis products.

The dispensary ensures cannabis and cannabis products are handled in a sanitary and careful manner when dispensed.

## 4. Accuracy and Transparency

Focus: Accurate and transparent dispensing of products

## a. Weighing

### Background:

Dispensaries may weigh cannabis and cannabis products for individual patient purchases or may pre-weigh specific amounts. In either case, accuracy of measurement is necessary to ensure accountability to patients and maintain accurate product tracking. Using calibrated scales that are regularly maintained and serviced is necessary to ensure measurement accuracy. Accurate and consistent measurement practices by personnel are also equally necessary.

#### Standard:

The dispensary uses accurate scales and consistent measurement practices for dispensing cannabis to patients.

## b. Labeling

## Background:

Dispensaries can support safe and effective use of cannabis and cannabis products by labeling products with pertinent and accurate information. Information about the quantity of dried cannabis or equivalent dried weight and dosing instructions can assist patients with self-titration. Labels may include results from laboratory testing and information about cannabinoid profiles. However, should not make any unsubstantiated health claims. Cannabis products that contain other ingredients require specific listing of all ingredients and notification of priority allergens (e.g. peanuts, nuts, gluten) as per the Canadian Food and Drug Act. Label information also serves to confirm to third parties that the cannabis or

cannabis product was purchased at a dispensary and is intended for medical purposes. Such disclaimers may help to reduce risk of confrontation with law enforcement officials.

#### Standard:

The dispensary ensures that cannabis and cannabis products dispensed to patients are labeled with pertinent and accurate information.

## c. Packaging

### Background:

The packaging of cannabis and cannabis products is an important component to providing safe access to medical cannabis. Considerations for packaging of cannabis and cannabis products that are dispensed to patients by the dispensary include discretion, security, convenience, and environmental impact. As cannabis is a controlled substance, sealed packaging can help indicate it is intended for the patient's personal use. Sealed packaging ensures that the product is not tampered with between the time it is dispensed and opened by the patient. Properly-sealed packaging can also help minimize cannabis odour as the patient transports the cannabis. It may be convenient for patients to receive cannabis in resealable packaging. Patients may requests cannabis and cannabis products that they have purchased to be divided into several packages in order to facilitate their dosing. Such requests must be considered on a case-by-case basis and balanced with concern for redistribution. Packaging options that minimize environmental impact are ideal.

#### Standard:

The dispensary packages cannabis and cannabis products in a manner that ensures discretion, security and convenience.

### d. Sales records

### Background:

Accurate sales records and the collection of detailed purchase information are an essential part of accountability and transparency. Such information includes the date and cost of purchases by individual patients, as well as details such as quantity, strain and batch. Sales records can provide important information about product efficacy, help to monitor patients and develop individualized plans, assist in implementing purchase limits, and can be used to evaluate performance of the organization. The collection of accurate sales records and the long-term storage of purchasing data are necessary for accounting and tax purposes. Patients may require this information for personal purposes. For example some devices used for administering cannabis are recognized as medical equipment for income tax purposes.

#### Standard:

The dispensary collects and stores accurate sales records of individual patient purchases.

## V. SUPPLY

**Goal:** A high quality and accountable supply of medical cannabis is consistently available.

# 1. Product Quality

Focus: Assuring quality of products and production methods

## a. Quality control

Required Organizational Practice

### Background:

Engaging in quality control measures helps dispensaries to ensure that all cannabis and cannabis products meet high standards. Dispensaries can determine quality levels based on known standards for agricultural products or food and herbal preparations. While some laboratories currently test cannabis for dispensaries, the absence of licensing for this work effectively limits the ability of most dispensaries to quantify biological impurities and heavy metals. As such, for most dispensaries, quality and safety testing will be primarily determined through olfactory and visual inspections; which can effectively identify many contaminants. Patient feedback can also help dispensaries determine acceptable quality levels, as ultimately, cannabis and cannabis products must meet patient expectations. It is vital for dispensaries to have a process in place to document and respond to patient reports of poor quality product or adverse effects.

#### Standard:

The dispensary engages in strict quality control measures to assess quality and identify problems regarding raw cannabis and other cannabis products it dispenses.

### b. Production methods

## Background:

Dispensaries are in a position to regulate the methods of production of cannabis and cannabis products. By providing ongoing support and monitoring, dispensaries can ensure that suppliers meet quality control standards and engage in practices that are not harmful to human health or the environment. Dispensaries may require the use of organic and sustainable production methods or establish best practices of non-organic methods of production. Existing cultivation and manufacturing standards (e.g. Good Agricultural Practices, and Good Manufacturing Practices) can be modeled to establish a framework for medical cannabis production that is comprehensive and promotes ongoing improvements. In general, important considerations for production facility standards are the separation of working zones, overall facility cleanliness, safety of cleaning and disinfection agents, control strategies to prevent and/or mitigate contaminants, safe storage procedures, and proper disposal of waste. Cultivation considerations include environmental control of temperature and humidity, nutrients and chemical agents used, contaminant and pest management, as well as manufacturing procedures for harvesting, drying and curing finished products. By requiring suppliers to ensure that cultivators and kitchen personnel obtain relevant horticultural, agricultural or food-safety licenses and maintain up-to-date certifications, dispensaries can ensure adherence to industry standards.

#### Standard:

The dispensary ensures that production methods mitigate harm to human health and the environment.

# c. Storage and packaging

## Background:

Proper storage and packaging are essential to prevent product spoilage and to ensure that quality standards of cannabis and cannabis products are maintained after initial inspection and acquisition. Monitoring moisture levels, light levels and storage temperatures can help prevent product degradation and maintain the safety and quality of the medicine. Proper product packaging serves to keep the contents fresh, clean, sterile and safe for use during the intended shelf life as well as during transport. Food-grade packaging is typically adequate to protect cannabis and cannabis products from oxygenation, water vapor, dust particles and other contaminants. Products that have been damaged or degraded due to insufficient care may no longer be suitable for distribution to patients.

The dispensary ensures cannabis and cannabis products are stored and packaged to preserve quality.

## 2. Inventory Management

Focus: Sufficient variety and quantity, and accountable tracking of products

# a. Product variety and quantity

## Background:

It is vital for dispensaries to maintain a sufficient variety and quantity of cannabis and cannabis products available to meet patient needs. Establishing an effective inventory management system helps ensure that a wide selection of cannabis and cannabis products are consistently available. There are several important factors to consider when developing an inventory management system, including purchasing patterns, carrying costs, economies of scale, supplier schedules, and potential time lags in the supply chain. An effective system must be robust and flexible to accommodate uncertainty in the demand, supply and transfer of cannabis and cannabis products. Security concerns are a consideration for determining overall quantity maintained on-site.

#### Standard:

The dispensary retains a sufficient variety and quantity of cannabis and cannabis products to fulfill patient needs.

## b. Product tracking

## Background:

Product tracking is critical to a dispensary's ability to provide dependable access to patients. Effective product tracking involves implementing systematic methods to account for products at different stages of transfer. This includes products that are received from suppliers, moved within the dispensary, and distributed to patients. Such tracking includes detailed production and sales records, as well as records of all disposed cannabis and

cannabis products. Maintaining accurate records demands regular monitoring of product quantities and reconciling of accounts to include details of any discrepancies.

#### Standard:

The dispensary tracks cannabis and cannabis products at each stage of transfer.

## 3. Supply Accountability

Focus: Due diligence for supply of cannabis and cannabis products

## a. Eligible recipients

### Background:

To ensure a reliable supply of cannabis and cannabis products, some dispensaries may choose to produce their entire supply of cannabis and cannabis products. Other dispensaries may acquire their supply from contracted suppliers external to the dispensary, while others may utilize a combination of supply sources. In all cases, the dispensary is in a position to ensure that the cannabis and cannabis products produced are used for medical purposes. The dispensary, and contracted suppliers, can create a closed-loop of medical cannabis supply by restricting their supply to eligible recipients including CAMCD-certified dispensaries, CAMCD or Health Canada authorized research and development projects and patients that individual cultivators are designated to produce for as per the MMAR.

#### Standard:

The dispensary and contracted suppliers exclusively supply CAMCD-certified dispensaries or other eligible recipients.

#### b. Contracts

### Background:

Entering into contracts with all suppliers of cannabis and cannabis products provides a framework for dispensaries to ensure that production standards and accountability requirements are upheld. By stipulating goals and expectations regarding quantity, quality and safety standards, as well as exclusivity and reporting requirements, the contract clarifies negotiated agreements. A well-planned contract will also address the risk and reward of involvement, as well as conflict resolution strategies. Effective contracts can be relied upon by both parties to protect the relationship, and can provide credibility to 3<sup>rd</sup> parties.

#### Standard:

The dispensary enters into written contracts with suppliers from whom they acquire cannabis or cannabis products.

## c. Reporting responsibilities

## Background:

Regular reporting from contracted supplier is an effective tool to monitor adherence to established standards and assess progress towards mutual goals. Important considerations for reports include records of product tracking, changes to production facility or production methods, and plans or projections for the subsequent period. Dispensaries can use the reported information and any associated feedback from suppliers to evaluate the accountability of the production and supply system. While regular reports can provide valuable information, reporting responsibilities should balance the dispensary's need for transparency and accountability with the potential increase in workload on suppliers.

#### Standard:

The dispensary requires all suppliers to provide reports related to the quantity, quality and safety of cannabis and cannabis products they supply.

# VI. SAFETY, SECURITY AND PRIVACY

**Goal:** Dispensaries maintain adequate safety and security measures to protect the welfare of patients, personnel, and the community

## 1. Healthy Environment

Focus: Establishing and maintaining a healthy environment

### a. Infection control

Required Organizational Practice

### Background:

Infection control is an important concern for all organizations working with patients who may have compromised immune systems or communicable conditions. Various legislation and guidelines have been published outlining precautions to reduce the risk of transmission of infectious diseases. These include specific practices for hand hygiene, precautions for airborne, droplet and contact transmission, exposure to blood-borne infections, safety of the general environment and waste disposal. Adherence to precautionary practices protects the dispensary's personnel, patients and the community.

#### Standard:

The dispensary abides by universal precautions for infection control.

## b. Emergency preparedness

Required Organizational Practice

### Background:

Dispensaries, like other organizations, are at risk from potential emergencies. These include natural disasters, fires, accidents, energy disruptions and sabotage. Emergencies may pose risks to patients and personnel and there may be further particular risks for individuals with disabilities. Additionally, there may be risks to the functioning of the dispensary, which poses a concern since the health of many patients depends on uninterrupted and predictable access to a safe source of medical cannabis. Emergency preparedness includes all activities, such as plans, procedures, contact lists and exercises undertaken in anticipation of an emergency.

#### Standard:

The dispensary is prepared to respond to health, security, fire, natural disasters and other emergencies.

### c. Restroom facilities

## Background:

Generally, it is essential for restroom facilities to be available for both personnel and patients at the dispensary. Some patients may require immediate access to a toilet facility as a result of their medical condition. As a health care organization, it is vital that the restrooms be clean and accessible to all patients and personnel.

#### Standard:

The dispensary ensures access to clean restroom facilities for personnel and patients.

#### d. On-site medication use

### Background:

Some dispensaries may choose to permit patients to use cannabis and cannabis products onsite. There are a variety of reasons for providing this option, including allowing patients to test medication prior to purchase, addressing the need of some patients to have a space to take their medication, or allowing use in the case of timely need to address symptom management. An on-site space for medication use can also be valuable in demonstrating and discussing safe use for inexperienced patients. Designated on-site consumption spaces may create opportunities for community-building through patient interaction. When allowing for on-site medication use it is important to consider other patients, personnel, and the community. Considerations include adequate venting, prevention of second-hand exposure for personnel and patients, applicability of municipal smoking by-laws or other workplace legislation, and legal liability if a patient drives while intoxicated after leaving the dispensary.

#### Standard:

Dispensaries that permit the use of cannabis and cannabis products on-site take measures to ensure individual, dispensary and community health and safety.

## e. Health and safety regulations

Required Organizational Practice

### Background:

Dispensaries strive to provide high-quality medical services, and the continued health and safety of staff and patients is a fundamental goal to be reflected in all relevant policies and procedures. Documented health and safety procedures may also serve to protect individuals, the dispensary and the community who are impacted by the workplace environment. The ideal health and safety approach is a cross-disciplinary one that may include interactions from many different areas, including public health, occupational medicine and hygiene, and safety engineering. Developing an effective health and safety plan requires first identifying all relevant health and safety regulations, which can vary widely between provinces and municipalities within Canada. Regulations may include requirements relating to the reporting of injuries, diseases and dangerous occurrences, as well as first aid regulations, compliance with fire and building codes, and site inspections.

#### Standard:

The dispensary complies with all applicable municipal, provincial/territorial, and federal health and safety requirements.

#### 2. Safe Conduct

Focus: Ensuring a safe environment for all patients and personnel

## a. Incident Management

Required Organizational Practice

## Background:

Conflicts can arise between personnel, between personnel and patients, and between patients in any healthcare organization. Developing well-considered incident management strategies and ensuring that personnel are well-trained in these approaches can proactively reduce potential conflicts in a dispensary and can mitigate potential negative impact on personnel, patients and the dispensary.

#### Standard:

The dispensary is prepared to respond to incidents that have the potential to affect the health and safety of patients, personnel and the community.

## b. Consequences for Infractions

## Background:

Upon registration, patients sign a Rights and Responsibilities agreement and are informed of consequences for infractions. Infractions may directly or indirectly impact safety and security. For example, a patient may engage in behaviour that is disruptive to operations, the safety of other patients or personnel, or threatening to the existence of the dispensary. It is important for dispensaries to implement consequences to maintain the safety and security of the dispensary by stopping the unwanted behaviour, as well as demonstrating their commitment to their policies. Consequences may include loss of access to some or all services, either permanently or temporarily. Consequences must be fair and the process for determining them transparent, and there must be recourse for appeal.

#### Standard:

The dispensary implements fair and transparent consequences for infractions.

## 3. Security and Privacy Measures

Focus: Effective security and privacy of sensitive information

## a. Security systems

Required Organizational Practice

#### Background:

Due to a variety of reasons including the status of cannabis as a controlled substance, the financial value of cannabis, and the presence of sensitive personal medical information and cash at dispensaries, it is important that adequate security measures be in place. The implementation of adequate security systems can minimize the likelihood of theft or robbery and also greatly decrease the impact to patients, the dispensary and the community in such an event.

#### Standard:

The dispensary ensures adequate security measures for all dispensing locations and production facilities.

## b. Management of sensitive information

Required Organizational Practice

## Background:

Effective management and oversight of sensitive information is vital to the safety and security of any organization. The dispensary has a responsibility to its patients, personnel and community to minimize risks to their safety and security, as well as to prevent disruption of services. When developing policies for the management of sensitive information, important considerations are first the identification of the security level of information collected and stored by the dispensary, how different levels of sensitive information will be collected and stored, as well as accessibility to personnel within the dispensary, and whether and with whom information can be shared. By developing procedures that are comprehensive, systematic and reliable, the dispensary can establish an effective framework for information security of all types and at all levels.

CAMCD	Certification	Standards

#### Standard:

The dispensary keeps strict control over information that could affect the safety and security of patients, personnel, the dispensary and the community.

## c. Privacy and confidentiality

Required Organizational Practice

#### Background:

Confidentiality and privacy are extremely important when providing medical services. Patients place great trust in dispensaries when providing documentation of their medical conditions and other personal information. Breaches can drastically impact a patient's life as well as affect the necessary trust required between the patient and the dispensary, and between the dispensary and the community-at-large. Privacy and confidentiality includes the handling and storage of documents, and verbal communication of information. Dispensaries should comply with accepted standards of privacy and confidentiality for health care organizations. Federal privacy legislation called the Personal Information Protection and Electronic Documents Act (PIPEDA) governs the collection, use, and disclosure of personal information by health care providers, unless there is substantially similar provincial or territorial legislation.

#### Standard:

The dispensary keeps all patient information confidential and secure.

## VII. EFFECTIVE ORGANIZATION

**Goal:** To provide effective, efficient and ethical governance and leadership, with a focus on the purpose of the organization and positive outcomes for patients, personnel and the community.

## 1. Governance and Management

**Focus:** Defining governance structure and managing records, finances, risks and performance

#### a. Governance

#### Background:

Depending on the dispensary's organizational model, each dispensary will have a different governance structure. Well-defined roles and decision-making processes are necessary in order to provide accountability to patients, personnel, and the community.

#### Standard:

The dispensary has a clearly-defined governance structure.

## b. Record keeping

## Background:

Dispensaries hold a large volume of medical, accounting and other information that is shared with them by patients, staff and others who engage with them. This information is important to the operations of the dispensary. Precautions must be taken to avoid any loss of information or breaches of confidentiality.

#### Standard:

The dispensary has appropriate safeguards to protect and avoid loss of administrative records.

## c. Financial management and reporting

#### Background:

Financial management practices include an effective system of internal and external controls to ensure proper financial recording and accurate accounting. While these are important for any health care organization, due to the current legal framework for cannabis and current regulatory framework for medical cannabis, well-considered financial practices and financial accountability and transparency are of utmost importance for dispensaries.

#### Standard:

The dispensary engages in financial management and reporting.

## d. Insurance and Risk Management

#### Background:

It is vital for any organization to identify potential risks and liabilities to their operation and to establish strategies to mediate these risks. Risks and liabilities include civil and criminal legal challenges, as well as financial and structural losses.

#### Standard:

The dispensary identifies and manages risk and implements action to reduce risk.

## e. Performance management

## Background:

Performance reviews can effectively aid organizations to measure the effectiveness of their strategies. These reviews are of great benefit to long-term planning and useful to determine the overall cost-effectiveness of past and present strategies. Performance reviews should identify both positive and negative organizational practices.

#### Standard:

The dispensary monitors and measures its performance and adapts its strategies for unforeseen events.

## 2. Legal and Regulatory Compliance

Focus: Compliance with all applicable legal and regulatory requirements

## a. Federal, provincial/territorial and municipal regulations

Required Organizational Practice

## Background:

It is important that certified dispensaries meet all relevant regulatory requirements. This includes requirements for zoning, health and safety, privacy and confidentiality, labour and workplace safety, licensing, contractual agreements, corporate status, and employment practices. Adopting policies and practices that comply with regulations at all levels of government will support the integration of dispensaries into established regulatory frameworks and reduce social stigma surrounding medical cannabis use and access.

#### Standard:

The dispensary is in compliance with all applicable municipal, provincial/territorial and federal regulations.

## b. Applicable taxes

## Background:

An important part of complying with applicable municipal, provincial/territorial and federal regulations is the remittance of all applicable taxes. Paying taxes results in compliance with the law and demonstrates that dispensaries provide financial benefit to Canadian society and the communities that they work within. This is a positive step towards mainstream acceptance.

#### Standard:

The dispensary remits all applicable taxes from the sale of goods and services to the relevant revenue agencies.

## 3. Accountability to Patients

Focus: Ensuring patient-centred care

## a. Rights of patients

#### Background:

Patients have certain rights, such as the right to safety and confidentiality. Some dispensaries may confer additional rights to patients. It is therefore important that patients be made fully aware of their rights so they may have accurate expectations of the dispensary's role in respecting and protecting these rights. The rights of patients comprise a transparent set of guarantees that the dispensary establishes as normative conduct in the dispensary environment and seeks to safeguard as an integral and accountable part of providing high quality care to patients.

#### Standard:

Rights of patients are communicated to them prior to beginning services, and annually, and are available for review and clarification.

## b. Patient Engagement

### Background:

The success of any dispensary is directly related to the organization's ability to understand and meet the needs of the patient population it serves. By engaging patients and ensuring that the voice of patients informs short and long-term policy decisions, the dispensary can stay strategically focused on meeting patient needs and consider the impact of activities, policies and procedures on patients.

#### Standard:

The dispensary seeks and is responsive to input from patients on an on-going basis.

## c. Complaints process

#### Background:

Even in the best-run dispensaries, there is always a chance that a patient will have a complaint. These may be a result of problems with products or services provided by the dispensary, the dispensary environment, personality clashes, disagreements, misunderstandings with dispensary personnel, or other factors. Complaints can be a valuable source of feedback from patients and it is in the best interest of the patient as well as the dispensary to make every attempt to address and resolve complaints. A transparent formal complaints process provides an objective framework to effectively address and resolve complaints.

#### Standard:

The dispensary has a transparent system for hearing and addressing patients' complaints and concerns.

## 4. Personnel and Employment Practices

Focus: Responsible management and training of personnel

## a. Qualifications and training

## Background:

Qualified and well-trained personnel are critical to the quality of care provided to patients and to the overall functioning of the dispensary. Personnel include employees, volunteers and consultants. It is the responsibility of the dispensary to ensure that those providing services are qualified to perform their duties competently and safely, whether they are providing peer-based care or have a background in healthcare. Qualifications include knowledge of products, customer service, skills to deal with potential emergencies, experience with persons with disabilities, and understanding the range of socio-economic contexts in order to provide respectful individualized services. It is important that relevant personnel can engage in dialogue with both patients and health care practitioners about patient care. Necessary knowledge and skills may be a part of the individual's prior education and experience, or may be acquired through training in areas that require specific expertise. Since personnel are working with a controlled substance, it is prudent for

dispensaries to abide by the legal age of majority in their province or territory for all personnel.

#### Standard:

The dispensary ensures that personnel providing services are qualified to perform duties competently and safely and are of the legal age of majority.

## b. Employment practices

### Background:

It is important for dispensaries to have fair employment practices. Formalizing hiring processes, employee reviews and evaluations supports the creation of a transparent and fair employment environment. Implementing clearly-defined personnel grievance and appeal processes can increase the effectiveness of an organization, as well as overall job satisfaction of personnel.

#### Standard:

The dispensary has transparent employment practices that conform to applicable laws and regulations.

## c. Personnel support and engagement

## Background:

Personnel are the backbone of any dispensary. Work in the delivery of health services can be emotionally and physically challenging. Additionally, due to the current legal status of medical cannabis dispensaries, dispensary personnel operate in a grey area and may be undertaking legal risk in order to provide medical cannabis to those in need. The dispensary can help mitigate impacts of this work by supporting personnel, sharing information with them, and engaging them in decisions about their work place. These practices will help create a happier, more effective workplace.

#### Standard:

The dispensary seeks to support and engage personnel in ways that promote well-being and job satisfaction.

## 5. Community Contributions and Relations

Focus: Contributing to the community and creating positive relationships.

## a. Community contribution

#### Background:

The provision of medical cannabis to patients with terminal illnesses and/or chronic disabilities has historically been rooted in a community-based compassionate care service model. In such a model, decisions, policies and practices are patient-centered and community-minded. The dispensary provides a community for patients while at the same time being part of the local community and the larger community of medical cannabis dispensaries, medical cannabis patients, health care services and other relevant stakeholders. Dispensaries are in a position to further the acceptance of both patients who benefit from medical cannabis and the dispensaries who serve them by remaining cognizant of opportunities to contribute to the well-being of their community beyond the dispensing of cannabis. This is particularly appropriate in the currently legal and regulatory frameworks for cannabis and medical cannabis where motivations of dispensaries may come under scrutiny in the courts of justice and public opinion.

#### Standard:

The dispensary contributes to the community beyond the provision of cannabis.

## b. Community and Stakeholder Relations

### Background:

Dispensaries play an important role in the delivery of healthcare services in their community. Given the challenges of stigma and social acceptance present during the transition of medical cannabis from illicit to licit status, dispensaries have an added onus to establish a positive presence and good relations with the community and stakeholders. Maintaining open and respectful lines of communication with neighbours and relevant social service and community organizations can be an effective way to identify and respond to potential concerns. The image of the dispensary, portrayed through its physical appearance and its actions, pacts the community and stakeholders perceptions of the individual dispensary and other dispensaries across Canada.

#### Standard:

The dispensary maintains a positive presence and good relations with community and stakeholders.

## **Appendices**

## Appendix A

## List of Required Organizational Practices (ROPs)

## I. Patient Eligibility

- 1. Age of Patient
- 2. a. Diagnosis and recommendation for use
- 2. b. Special considerations
- 3. a. Healthcare practitioners
- 3. d. Document verification

## II. Registration

2. a. Patient Information and Verification

#### III. Products and Services

No ROPs in this section

Αp	pe	nd	ic	es
----	----	----	----	----

## IV. Dispensing

1.

- b. Verification of identification
- 3. a. Dispensing area
- 3. b. Handling

## V. Supply

1. a. Quality control

## VI. Safety, Security and Privacy

1. a. Infection control

1.

### Appendices

- b. Emergency preparedness
- 1. e. Health and safety regulations
- 2. a. Incident Management
- 3. a. Security systems
- 3. b. Management of sensitive information
- 3. c. Privacy and confidentiality

## VII. Effective Organization

 ${\bf 2. \ a. \ Federal, \ provincial/territorial \ and \ municipal \ regulations}$ 

### Acknowledgements

CAMCD Board of Directors
Dominic Cramer

Toronto Compassion Centre

Blaine Dowdle MedCannAccess

Adam Greenblatt Medical Cannabis Access Society

Rade Kovacevic Medical Cannabis Centre of Guelph Inc.

> Dana Larsen Vancouver Dispensary Society

Steven Roberts Vancouver Island Compassion Society

> Jamie Shaw BC Compassion Club Society

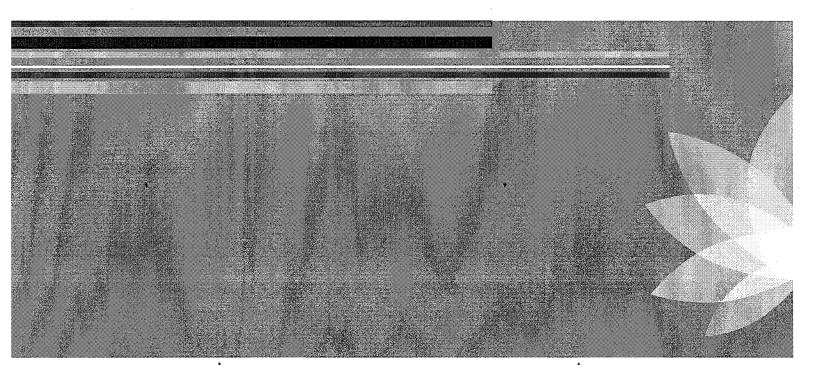
> Neev Tapiero Cannabis as Living Medicine

> > CAMCD Advisory Board Hilary Black Rielle Capler, MHA Philippe Lucas, MA

Prepared by: Rielle Capler, Erin Prosk and Jeet-Kei Leung



# www.camcd-acdcm.ca



From: Correspondence Group, City Clerk"s Office

To: Public Hearing

Subject: FW: Information Regarding Eden Medicinal Society

Date: Saturday, June 13, 2015 1:04:54 PM

From: Casper LeBlanc s.22(1) Personal and Confidential

**Sent:** Saturday, June 13, 2015 12:19 PM **To:** Correspondence Group, City Clerk's Office

Subject: Information Regarding Eden Medicinal Society

Hello, Mayor and Council!

Although I had meant to speak on the benefits of the dispensary I work for, five minutes only saw enough time for me to disclose my own personal story. This is a shame, as Eden Medicinal Society is an amazing place, and we have many healthcare access programs (including free of cost appointments for patients to see a naturopathic doctor! Incredibly important to the poor!), which are mentioned on our website but are also detailed in the speaking points attached below, that I did not even begin to touch on during my short time with you, unfortunately. These speaking points may be used by others from my dispensary who are also registered to speak here, today, so, if you would like to review them, either before these speakers arrive or after, please feel free.

Again, I applaud your efforts in trying to host a difficult conversation as this one, and your dedication to keep medical users, and our future health, in mind. I would love to offer my help to you, should you require any additional information.

Thank you!

Casper LeBlanc

s.22(1) Personal and Confidential

Sent: Sat, Jun 13, 2015 12:00 PM

Subject: Re: Public Hearing Talking Points

Guys, I've just finished speaking and unfortunately, my personal story took longer than I anticipated and I did not get to Katey's amazing framework (or the fact that recreational users are still contributing members of society), and implore someone else to go on and use her framework to save Eden!! Please! And sorry I took so long! :S

Sent from AOL Mobile Mail

----Original Message----

From: Casper LeBlanc < s.22(1) Personal and Confidential

Sent: Sat, Jun 13, 2015 04:17 AM

Subject: Re: Public Hearing Talking Points

Those are a lot of talking points there, lol. But I'll add in what I can! Is Kacia or Britt representing Eden? I can, if they are not and you would like me to. I'd be happy to. (Please let me know before 9 am, as I'm going to be speaking within the first hour, tomorrow, though! On the second day of the hearing, we got to 90 and I'm 115.) They give more time to speakers who are representing an organization, if I remember correctly? That was said on the first day. Wish I remembered it better!

I really wanted to talk about my personal story (and the disorders marijuana has helped me overcome), and as someone who works in a dispensary, as an impoverished medical user and the costs of medicine and methods of consumption for marijuana, and the need for low cost access to cannabis goods, what the impact loss of mail order service would mean, and about the good and necessity of having a lounge (a place where clients -- especially low income, which is why I started coming to Eden! - can consume their medication safely and without fear of being apprehended or persecuted), and I want to talk about the spectrum of recreational and medical use in patients (and how recreational use can be beneficial to relaxation, which can be particularly key to sufferers of depression and stress/anxiety related disorders), and then ask them to be more understanding and to keep an open mind as a good portion of marijuana users are medical users, and even those that are not are often contributing members of society whose marijuana use does not impact their lives negatively in any way, (such as artists, lawyers, business persons, and musicians!) and deserve respect as much as any other person, and etc, etc, etc, but I love your framework and I'll lend what I can of it to what I'm saying. I am forwarding this to the other speakers so they know what I'm planning. Or if they're representing us! I won't do that unless I'm told, lol.

Thanks!:)

Casper

----Original Message----

s.22(1) Personal and Confidential

Sent: Sat, Jun 13, 2015 1:01 am

Subject: Public Hearing Talking Points

Hello Team,

I have been informed by our board that there are some important points to be brought up at the public hearing. Along with your personal stories, please do your best to include some of the points in the attached document. If you are following the hearings, you may have heard that there is a suggestion to not allow dispensaries on pender street for the reason that it is eroding the historic structures of chinatown.

Please do your best to fight for the pender location, and all of Eden!

See you tomorrow,

Katey