Diana lejins

RE: DRAFT ORDINANCE - REGULATIONS FOR MEDICAL MARIJUANA COLLECTIVES/COOPERATIVES IN LONG BEACH

Dear Mayor and Council,

I would like to commend the Council and the City Attorney's Office, especially Deputy City Attorney Cristyl Meyer, for their conscientious efforts to craft a more reasonable and compassionate set of regulations for medical marijuana cooperatives (interchangeable with collectives) in Long Beach. On behalf of legitimate patients, I especially appreciate your inclusion of the Americans with Disabilities Act (ADA) requirements.

While the latest draft addresses some patient concerns and neighborhood issues, several matters need to be addressed:

Page 1, paragraph 4

"....unlike all other ingestibles, marijuana is not regulated, inspected, or analyzed...."

All other ingestibles are not necessarily regulated, inspected or analyzed as exemplified by the E.coli contaminations in our food sources that are frequently reported.

Page 3, paragraph 6

"Edible Medical Marijuana.....which contains physician recommended quantities of Medical Marijuana, and is produced on-site at a Collective....."

First of all, due to the unwarranted stringent federal restrictions on scientific studies of this medicine, there is very little information available to either physicians or patients to assist them in quantifying amounts. Therefore, this requirement is both impractical and unrealistic. Additionally, requiring medicinal edibles to be produced on site could prove to costly and unreasonable.

Page 5, paragraph 4

"Property" as used in this Chapter means the location at which the Medical Marijuana Collective members associate to collectively or cooperatively cultivate and distribute Medical Marijuana exclusively for the Collective members."

And Page 19, paragraph 7

"No Medical Marijuana Collective shall possess Marijuana that was not cultivated by its members either at the Property or at its predecessor location....."

The "not so clear" inference here is that all medicine must be grown at the "Property."

I know of no other cities that require this.

The requirement that all medicine be grown (or created in the form of edibles) in the confines of the City of Long Beach and restricted to the "Property" of the coop is unrealistic and overly restrictive (unless Long Beach is willing to provide the land to facilitate this endeavor). Currently, there is very little affordable or suitable land available in Long Beach for this purpose. Indoor grows are also very costly and require considerable amounts of space. Of paramount concern is the cost to legitimate coops. If they are truly patient-oriented, then patients must be able to afford operating them. After all is said and done, isn't it our mission to help the legitimate patients.

I believe that the main thrust of this issue is to protect patients from chemical mold, contaminants and pesticides that could be carcinogenic or harmful. I would like to suggest that for the sake of the patients, any medicine obtained from outside of Long Beach be <u>laboratory certified</u> and periodically inspected for safety by a Health Department official. This would take place in much the same way as restaurant inspections, etc.

An additional unintended consequence in this matter is that growing an adequate amount and variance of medicine to meet the needs of a greater number of patients could trigger the interest of a number of federal agencies.

Also, what about smaller collectives of 10 persons or less who grow the medicine at their homes (in residential areas) and contribute to the whole. Or, you may have a scenario whereby one person has a larger yard and a number of others collectively garden at that location.

Page 12, paragraph 3

"The Medical Marijuana Collective is not located within a1500 radius of a school."

This is excessive and should be reduced to 500-1000 feet at most. Colleges should not be included in this restriction.

Page 12, paragraph 4

".....The Medical Marijuana Collective is not located within a.....1000' radius of a....playground....."

The parks were eliminated from the first draft because it was too restrictive. Most parks have playgrounds. Therefore, this essentially limits most areas near parks.

In having excessive restrictions, the City is defeating its own purpose in considering people with disabilities. If these cooperatives are not allowed where citizens have reasonable access through public transportation, wheel chairs, etc, then they will not be able to access the medicine that they need.

Also consider that pharmacies distributing "legitimate" medicines that kill an average of 100,000 Americans every year are granted far more leniency in their choice of locations. (Please note that there has not been one documented death from medical marijuana.)

Page 14, paragraph 6

"Each applicant manufacturing Edible Medical Marijuana shall manufacture.....in compliance with all applicable <u>federal</u>, state and local laws."

May I remind you that this is still not legal under federal law.

Page 14, paragraph 7

"The Medical Marijuana Collective possesses a valid Los Angeles County Sanitation District Industrial Waste Permit for the Property."

This is truly a case of overkill unless harmful chemicals are being used.

Page 15, paragraph 1

"A Medical Marijuana Collective......Permit....shall become null and void....upon a violation by the Collective or any of its <u>members</u> of a provision of this Chapter."

This is analogous to closing down a liquor store because one of its patrons sells a beer to a minor. There is no way a collective can govern the actions of all of its members!

Page 16, paragraph 5

"An inventory record documenting.....daily amounts of Marijuana stored on the Property."

Again, this is excessive. Weekly or monthly records would be more reasonable.

Page 19, paragraph 1

"No cultivation of Medical Marijuana.....shall be visible with the naked eye from any public or other private property....."

If the Marijuana is required to be grown in Long Beach, then available land may be visible to others. How do we solve this dilemma?

Page 19, paragraph 2

"No manufacture of Concentrated Cannabis in violation of California Health and Safety Code Section 11379.6 is allowed."

In the past, Attorney General Lockyear has issued policy stating that concentrated cannabis (hashish) is not illegal.

*As a side note, the Prosecutor and Police seem to have unwarranted concerns about these cooperatives being connected with crime. The reductions in crime rates over the past few years, coupled with the increase in number of collectives, seems to debunk their suppositions.

The preceding begs the questions:

"Are we facilitating patients and their collectives or overly restricting and hampering them?" "Are we operating in the spirit of Proposition 215 and SB 420 which is the will of the people of California?"

In a recent Press Telegram article (Council to get latest version of pot law, Jan 17), City Attorney Bob Shannon was quoted, "This is an effort to make logically consistent something that's virtually impossible to make logically consistent, thank you Sacramento,"

I agree with Mr. Shannon that this ordinance is logically inconsistent. And, as I have in the pas, and will continue to do so, I implore this Council, Mayor Foster, Bob Shannon and any other officials perplexed by this state of affairs to pressure Sacramento into honoring Proposition 215. According to the will of the people, the State needs to "implement a plan to provide for the <u>safe and affordable</u> distribution of marijuana to all patients in medical need of marijuana."

Thank you again for your consideration of this matter.

Sincerely,

Diana Lejins Advocates for Disability Rights

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Hashish Is Medical Marijuana, Attorney General Says

By KENNETH OFGANG, Staff Writer

Concentrated cannabis, or hashish, is included within the meaning of "marijuana" and may be used for medical purposes under Proposition 215, Attorney General Bill Lockyer said.

In an opinion made public yesterday, Lockyer told Menocino County Sheriff-Coroner Anthony J. Craver that voters must have intended to include all forms of cannabis when they passed the "Compassionate Use Act of 1996."

Lockyer was a staunch backer of the measure, whose implementation has been difficult because federal authorities continue to enforce conflicting federal law that recognizes no legitimate uses for cannabis.

Hashish is distinguished by its high level of tetrahydrocannabinol, or THC, the most active pharmacological ingredient in marijuana. Ordinary marijuana has a THC level of between five and 60 percent, while the concentrated form may have a THC level of as high as 70 percent.

The attorney general noted that under Proposition 215, if a patient or caregiver "possesses or cultivates marijuana for the patient's medical purposes upon the recommendation or approval of a physician," that person is exempt from prosecution under Health and Safety Code Secs. 11357 and 11358.

Sec. 11357 makes possession of hashish a "wobbler," punishable by up to three years in prison, and makes possession of up to 28.5 grams of marijuana, "other than concentrated cannabis," a misdemeanor carrying a fine of no more than \$100. An exception is made for possession of ordinary marijuana on school grounds, which carries a fine of up to \$500 and/or a maximum of 10 days in jail.

Sec. 11358 makes cultivation of marijuana, in any form, a felony punishable by up to three

years in prison.

The statutory definition of marijuana for purposes of Proposition 215 "plainly includes concentrated cannabis," Lockyer wrote. There is no reason to interpret "marijuana" differently in Proposition 215 than in other laws, the attorney general explained, adding that had the authors of the initiative intended to exclude hashish from the definition, they would have used language similar to the "other than concentrated cannabis" phrase in Sec. 11357.

"Of course, if concentrated cannabis were not 'marijuana' in the first instance, there would be no need in section 11357 to employ the phrase 'other than concentrated cannabis,'" the attorney general explained. He added that there was nothing in the ballot materials for the initiative that indicated an intent to treat hashish in a different manner than the less potent forms of the drug.

The opinion, No. 03-411, was prepared for Lockyer by Deputy Attorney General Gregory L. Gonot.

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