

Medical Marijuana Act Oversight Committee Self-Report

151st General Assembly



*Respectfully submitted to the
Joint Legislative Oversight and Sunset Committee
August 2021*

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ABOUT JLOSC AND THE REVIEW PROCESS

The Joint Legislative Oversight and Sunset Committee (“JLOSC” or “Committee”) is a bipartisan body comprised of 5 members of the Senate appointed by the President Pro Tempore and 5 members of the House of Representatives appointed by the Speaker of the House.

JLOSC completes periodic reviews of state supported entities such as agencies, commissions, and boards following statutory criteria under [29 Del. Code, Chapter 102](#). The review’s purpose is to determine the public need for the entity and whether the entity is effectively performing to meet the need. The goal of the review is to provide strength and support to entities that are providing a State recognized need.

JLOSC performs its duties with support provided by the Division of Research’s dedicated and nonpartisan staff. JLOSC staff completes a performance evaluation of the entity under review and submits a Staff Report to JLOSC which includes analysis, key findings, and recommendations. Recommendations are not finalized until reviewed, discussed, and adopted by JLOSC with an affirmative vote of 7 members. In February 2022, JLOSC staff will schedule an in person public hearing for each entity under review to present to the Committee. For additional review information, please visit the Committee’s website at <https://legis.delaware.gov/Committee/Sunset>.

ABOUT THIS SELF-REPORT

The JLOSC statute requires the entity under review to supply information and materials to facilitate a legislative oversight and sunset review. Additionally, the entity under review has the burden of showing, through the statutory review criteria, that there is a genuine public need and that the entity is meeting that need.

JLOSC staff supplies each entity under review with a Self-Report template and instructions. All questions appearing in this Self-Report are from the JLOSC staff created *JLOSC Performance Review Questionnaire* (“questionnaire”) and are the same for each entity under review. All questions appearing in the questionnaire use statutory review criteria. Throughout the questionnaire, the use of the broad term “board” refers to the entity under review, which may be a board, committee, commission, or council. The entity under review supplies review information by completing this Self-Report and is responsible for its contents and for forwarding all updates or corrections to JLOSC staff in a timely manner during the entire review period.

JLOSC staff will not edit or modify the information received in this Self-Report and only check for completeness and adherence to instructions. JLOSC members will receive completed Self-Reports and updates directly from their staff. The Committee’s website will include electronic copies of all Self-Reports and any updates received from entities under review.

JLOSC PERFORMANCE REVIEW QUESTIONNAIRE

SECTION 1: AGENCY HISTORY, PURPOSE, AND FUNCTIONS

Section 1-A. Please provide a summary of your board's history. Highlight any key events.

The Medical Marijuana Act Oversight Committee (MMAOC) was created as part of the Delaware Medical Marijuana Act (SB 17 w/ SA 3, SA 4 + HA 6, HA 7) in 2011 during the 146th General Assembly.

Sponsored by Senator Margaret Rose Henry and Representative Helene Keeley, this piece of legislation created an exception to Delaware's criminal laws to permit the physician-recommended medical use of marijuana by patients with serious medical conditions.

Per the legislation, the Department of Health and Social Services (DHSS) became responsible for administering the program and created the Office of Medical Marijuana (OMM) within the Division of Public Health (DPH).

The legislation also required the creation of a nine-member oversight committee (16 Del. C. §4922A) that meets at least twice a year "for the purpose of evaluating and making recommendations to the legislature and the Department." The Medical Marijuana Act Oversight Committee began meeting in 2013, the first year Delaware's Medical Marijuana Program was operational.

Section 1-B. What are the main functions of this board? Does this board issue any advisory or policy opinions? If so, where can they be found?

The Medical Marijuana Act Oversight Committee was established to evaluate and make recommendations regarding the implementation of Title 16, Chapter 49A of the Delaware Code. Per 16 *Del.C.* §4922A), the Committee shall meet at least twice a year to advise DHSS and the General Assembly regarding:

"a. The ability of qualifying patients in all areas of the state to obtain timely access to high-quality medical marijuana.

b. The effectiveness of the registered compassion centers, individually and together, in serving the needs of qualifying patients, including the provision of educational and support services, the reasonableness of their fees, whether they are generating any complaints of security problems, and the sufficiency of the number operating to serve the registered qualifying patients of Delaware.

c. The effectiveness of the registered safety compliance facility or facilities, including whether a sufficient number are operating.

- d. The sufficiency of the regulatory and security safeguards contained in this chapter and adopted by the Department to ensure that access to and use of marijuana cultivated is provided only to cardholders authorized for such purposes.
- e. Any recommended additions or revisions to the Department regulations or this chapter, including relating to security, safe handling, labeling, and nomenclature.
- f. Any research studies regarding health effects of medical marijuana for patients.”

No board advisory or policy opinions have been issued.

Section 1-C. What condition(s), situation(s), and/or problem(s) existed prior to the creation of this board that directly led to its creation? Please provide specific examples.

This Committee was established by Title 16, Chapter 49A of the Delaware Code which created Delaware’s Medical Marijuana Program. The goal of the Committee was to provide oversight of the program and ensure that patients had access to safe, quality medical marijuana and that compassion centers were operating in an effective and safe manner.

Section 1-D. To what extent has the existence and functioning of this board alleviated each of these condition(s), situation(s), and/or problem(s)? Please provide specific examples.

The Committee has struggled with quorum and member engagement which has made it challenging to coalesce around evidence-based recommendations to the Department and legislature.

Section 1-E. Would the condition(s), situation(s), and/or problem(s) described in question “1-C” above recur or worsen, in the absence of the board?

With the establishment of the Office of Medical Marijuana and their regulatory oversight of Delaware’s compassion centers, Delaware has a thriving medical marijuana industry. This would likely continue in absence of the Committee.

Delaware has expanded from one company operating one compassion center in 2015 to three companies operating six compassion centers across the state. In 2020, OMM issued an RFP that resulted in three additional companies being selected as medical marijuana vendors, which will add six additional compassion centers over the next three years to keep up with increased demand.

Section 1-F. Are there any recent condition(s), situation(s), and/or problem(s) that further justify the need for the board’s existence?

During the beginning of the pandemic, there was a brief shortage of some products due to panic-buying. OMM was able to collaborate with compassion centers to address patient concerns, as well as encourage compassion centers to develop alternative product delivery models, such as home delivery, which allowed patients at high risk of severe outcomes from COVID-19 to safely access their usual products. OMM on its own is addressing many of the Code requirements of the committee.

Section 1-G. Are there any functions of this board that are outdated and no longer needed? If so, please explain and provide examples.

None noted.

SECTION 2: MISSION, GOALS, OBJECTIVES, & AUTHORITY

Section 2-A. What is the mission of this board? Does the enabling legislation accurately reflect the mission?

The mission of the Medical Marijuana Act Oversight Committee is legislated through 16 *Del.C.* §4922A:

“The Oversight Committee shall meet at least 2 times per year for the purpose of evaluating and making recommendations to the Governor, the General Assembly, and the Department regarding the following:

- a. The ability of qualifying patients in all areas of the State to obtain timely access to high-quality medical marijuana.
- b. The effectiveness of the registered compassion centers, individually and together, in serving the needs of qualifying patients, including the provision of educational and support services, the reasonableness of their fees, whether they are generating any complaints or security problems, and the sufficiency of the number operating to serve the registered qualifying patients of Delaware.
- c. The effectiveness of the registered safety compliance facility or facilities, including whether a sufficient number are operating.
- d. The sufficiency of the regulatory and security safeguards contained in this chapter and adopted by the Department to ensure that access to and use of marijuana cultivated is provided only to cardholders authorized for such purposes.
- e. Any recommended additions or revisions to the Department regulations or this chapter, including relating to security, safe handling, labeling, and nomenclature.
- f. Any research studies regarding health effects of medical marijuana for patients.”

While the enabling legislation does reflect the mission, the lack of enforcement capabilities has frustrated the advocacy community.

Section 2-B. Please identify and explain the board’s goals and objectives, in order of priority.

The Oversight Committee’s objectives are outlined in 16 *Del.C.* §4922A.

Section 2-C. Please describe the internal performance evaluation system that the board uses to measure the attainment of its goals and objectives.

The Oversight Committee does not utilize an internal performance evaluation system.

Section 2-D. Does the board collect any data sets? If so, please identify and explain.

The Oversight Committee does not collect any data sets.

Section 2-E. Does the board conduct any research? If so, please explain and provide the location of research reports (if produced).

No. However, the Office of Medical Marijuana has conducted research for inclusion in their annual reports, including a customer service survey in 2020. (Please see attachments to this document)

Section 2-F. Has the State Auditor or any other external organization recently audited and/or evaluated the board or any of its programs? Please identify some of the major conclusions and/or recommendations. Provide links to all reports.

No.

Section 2-G. In general, how do other states carry out similar functions?

Most states that have legalized medical marijuana have a Cannabis Commission with stakeholder representatives.

Section 2-H. Are your board's functions similar or overlapping of other state or federal entities? If so, discuss how the board coordinates its services with other state or federal entities sharing similar objectives. Please explain why the functions are best placed within this board or why you feel they should be placed elsewhere.

No.

SECTION 3: ACCOMPLISHMENTS

Section 3-A. List and briefly explain the board's most significant accomplishments.

The Oversight Committee's meetings are largely used as a forum for public engagement and comments and is another place – besides contacting OMM directly – where patients and advocates can make suggestions and raise concerns.

When the Medical Marijuana Program was first established, the fee for new and renewal patient, caregiver, pediatric, and compassion center employee identification cards was \$125.00 (pediatric responsible party identification cards were issued at no cost), and identification cards for individuals who established a low-income status were issued on a sliding scale. OMM stated that the MMP averaged 40% low-income cards, costing approximately \$162,500 annually in losses.

At the February 2019 Medical Marijuana Act Oversight Committee meeting, the Office of Medical Marijuana presented several proposals to update this fee structure to better serve the cardholder population. After a lengthy discussion among members, the Oversight Committee ultimately took a vote and established the following new payment structure: patient, caregiver, and pediatric applications both new and renewal costing \$50.00 with employees remaining at \$125.00. Patients with income at or below 138% of the poverty level would receive their card for \$25.00. This ensured more accessibility for individuals to apply for new and renewed identification cards.

SECTION 4: CHALLENGES

Section 4-A. List and briefly explain 3 to 4 challenges the board is currently facing.

- Retention of Committee Members:
Some board members have participated for a few meetings then experience unforeseen challenges and withdraw from the board.

- Consistent attendance and engagement of Committee Members:
On several occasions the Committee lacked a quorum to conduct its business.

- Expectations of the Committee from the public not consistent with their authority or OMM's:
Public comment sessions during Committee meetings are frequently lively with requests for home grow, additional compassion centers, and specific strains. Neither the Committee nor OMM has the authority to legalize home grow or require compassion centers, which are private businesses, to produce certain products. Additionally, the time frame for the life cycle and maturity of a marijuana plant often means that it takes time for compassion centers to introduce new strains.

SECTION 5: OPPORTUNITIES FOR IMPROVEMENT

Section 5-A. List and briefly explain several opportunities for improvements. Please prioritize.

Currently, the Oversight Committee solely relies on OMM to present program updates and to bring issues to the Committee's attention, such as updated research, results of patient surveys, and both patient and compassion center concerns. Therefore, the Committee is more passive in its work. Having explicit requirements that the Committee accomplish certain tasks or goals would be helpful in encouraging it to meet its responsibilities.

In addition, having an appointment member from the medical marijuana industry (as long as the individual does not have conflicts of interest within the state), would be helpful in having more engagement among Committee members.

Section 5-B. In the past 5 years, have you recommended any changes to the Legislature, Governor's Office, or other State entity to improve the board's operations? If so, please explain and provide the outcome or current status?

None noted.

SECTION 6: COMPOSITION & STAFFING

Membership:

Section 6-A. How is board membership defined? Please explain and provide the section(s). Examples include statute, regulations, or by-laws.

The Oversight Committee's membership is defined in 16 *Del.C.* § 4922A.

Section 6-B. Are there special qualifications for board membership?

16 *Del.C.* § 4922A details the following membership for the Oversight Committee:

- a. One member, appointed by the President Pro Tempore of the Senate.
- b. One member, appointed by the Speaker of the House.
- c. The Secretary of the Department, or a designee appointed by the Secretary.
- d. Two medical professionals, each licensed in Delaware, with experience in medical marijuana issues, appointed by the Governor.
- e. One member with experience in policy development or implementation in the field of medical marijuana, appointed by the Governor.

f. Three members who each shall be a cardholder, as defined in § 4902A of this title, appointed by the Governor.

Section 6-C. Who has member appointment authority? Where is this defined?

The following individuals have member appointment authority per 16 *Del.C.* § 4922A:

Governor
President Pro Tempore of the Senate
Speaker of the House
Secretary of DHSS

Section 6-D. What is the designated term of office for board members? Where is this defined?

The members of the Oversight Committee shall serve at the pleasure of the appointing authority – there is no time-based term for members. This is defined in 16 *Del.C.* § 4922A.

Section 6-E. How many members currently serve on this board? Are there any vacancies? If so, indicate the length of time each vacancy has existed and the reasons why. Has the board or support staff advised the Governor’s Office or appointing authority of the vacancies?

7 of 9 positions are filled on the Committee. One vacancy is due to the untimely passing of one of the physicians and the second vacancy is due to the board member moving out of state.

Due to some OMM staff responsibilities shifting to the State Health Operations Center during the COVID-19 pandemic response, the OMM has not yet submitted recommendations to the Governor’s office for replacements for these two vacancies.

Section 6-F. Can this board create subcommittees or task forces? If “yes” please address the following questions:

Yes.

- 1. Describe the process and site the board document (statute, regulations, or by-laws) that permits this.**

By-Laws of the Delaware Medical Marijuana Act Oversight Committee

Section 2 Sub-Committees:

- A. The Oversight Committee or the Executive Committee may establish sub-committees as necessary to carry out business, responsibilities or assigned projects.
- B. The Oversight Committee or Executive Committee shall review and decide when a sub-committee is essential and vote to establish such sub-committee.
- C. The Oversight Committee Chair shall designate a Committee member to Chair the assigned sub-committee.

- 2. Provide a brief history on how many have been created in the past 5 years, and indicate where meeting documents can be found.**

None have been required.

3. If final reports were issued, please provide their location.

N/A

4. If there are current subcommittees or task forces currently meeting and conducting business; include information on membership, duties, and where meeting documents can be found.

N/A

Section 6-G. Include a current membership roster with this Self-Report. This is a separate request from the list of supporting documents included in the Self-Report instructions. This current membership roster must indicate the following for each member:

- **First and last name, and their city and state of residence.**
- **Position held (i.e., Chair, President, Co-Chair, Secretary, etc.).**
- **Professional or public member.**
- **Their profession or occupation.**
- **Original appointment date, expiration date, and number of terms served.**

To satisfy this current membership roster request, you may do one of the following:

- **Complete the included table below.**
- **Delete the included table below, build your own table, and place in this section.**
- **Delete the included table below and attach a document to the Self-Report and label in the appendices section.**

Member's Name	City of residence	Position Held	Professional or Public Member	Profession or Occupation	Original Appointment Date	Appointment Expiration Date	Number of Terms Served
Dr. Jason Silversteen	Newark	Chair	Professional	Physician	2015	At the pleasure of Governor	1
Sen Elizabeth Lockman	Wilmington	Vice Chair	Professional	Adjunct Professor	2018	At the pleasure of the Senate Pro Tempore	1
Rep Stephanie T. Bolden	Wilmington	Member	Professional	Retired Educator	2015	At the pleasure of the Speaker of the House	1
Dr. Karyl Rattay	Newark	Member	Professional	Director of Public Health	2015	At the pleasure of the DHSS Secretary	1
Joe Bryant	Dover	Member	Professional	Policy Advisor	2018	At the pleasure of Governor	1
Thomas Shabazz	Dover	Member	Public Member	Retired	2015	At the pleasure of Governor	1
Susan Kelly	Lewes	Member	Public Member	Retired Nurse	2018	At the pleasure of Governor	1
VACANT	-	Member	Professional	Physician	-		
VACANT	-	Member	Public Member	-	-		

Meeting Frequency:

Section 6-H. How frequent are meetings held? Is meeting frequency defined anywhere such as the statute or by-laws? If so, provide document name and section information.

The Committee typically meets twice a year, as required in 16 *Del.C.* §4922A.

Section 6-I. Can the board hold special or emergency meetings? If so, describe the protocol involved in requesting and holding a special or emergency meeting.

Yes, the committee may hold special meetings per the Delaware Medical Marijuana Act Oversight Committee by-laws, Article VI Section 2:

Special Meetings – The Oversight Committee may, upon written request of a majority of the members, upon the request of the Chair or at the request of the Department Secretary or designee shall call special meetings at such times and places as may be determined.

Meeting Order and Quorum:

Section 6-J. For meeting order, does the board follow Mason’s Manual of Legislative Procedure or Roberts’ Rules of Order? Is this defined in statute, regulation, or by-laws?

The Committees by-laws (Article VI Section 7) require that parliamentary procedures at all meetings shall be in accordance with the current version of Robert’s Rules of Order Newly Revised.

Section 6-K. How is meeting quorum defined and where is the definition located?

A quorum shall consist of 51% of the membership of the Oversight Committee, as defined in 16 *Del.C.* § 4922A.

Member Removal:

Section 6-L. Is there a mechanism for member removal? If so, how are members removed and who has the authority to remove a member? Using the process described, has there ever been an instance of member removal, and if so, briefly describe the nature of events that led to the member removal.

Per 16 *Del.C.* § 4922A, the members of the Oversight Committee shall serve at the pleasure of the appointing authority.

Member Compensation:

Section 6-M. Are board members compensated? If so, how are they compensated?

Members of the committee are not compensated.

Member Training and Handling Conflicts of Interest:

Section 6-N. Are board members offered any special training opportunities? Is training required or voluntary?

None required.

Section 6-O. Has a Deputy Attorney General (“DAG”) reviewed the provisions of the Public Integrity Act with board members to ensure that they are complying with the provisions in the law? If so, what is the frequency of this review?

No. The Division of Public Health’s Deputy Attorney General will conduct that briefing in the next meeting cycle.

Section 6-P. Please explain how board members avoid conflicts of interest.

Conflict of interest is covered in Article VI Section 6 of the Committee by-laws:

Conflict of Interest – Members of the Oversight Committee shall comply with the State Employees', Officers' and Officials' Code of Conduct – 29 Del. C. Ch. 58. A member may not participate in the review or disposition of any matter in which the member has a conflict of interest except to respond to questions from another member or any other person with official responsibility with respect to that matter. A member shall declare the conflict of interest at the earliest practicable time after learning of such conflict.

Section 6-Q. Has the Public Integrity Commission (“PIC”) provided training or clarification to board members or issued any advisory opinions on board activities? If so, please explain the details. Provide a link to the information or attach relevant information to this report.

No.

Support Staff:

Section 6-R. Is there dedicated support staff *directly* assisting the board? If so, what state agency or entity supplies the support staff?

- **If this question is applicable answer all questions in this section.**
- **If not applicable, state that no support staff exists for question Section 6-R and explain how board duties are divided among members, skip to questions Section 6-Y and Section 6-Z below.**

Yes, the Division of Public Health’s Office of Medical Marijuana staffs the Committee.

Section 6-S. How many employees are employed by the state agency or entity supplying support staff? (skip if not applicable)

The Office of Medical Marijuana (OMM) is responsible for supporting the Oversight Committee. OMM has four FTEs and three Casual Seasonal Employees

Section 6-T. Does the state agency or entity supplying support staff offer internships? If so, do interns provide support services to the board? (skip if not applicable)

Yes, the Office of Medical Marijuana has supported several interns in the past. However, their work was primarily focused on special projects, such as development of a medical cannabis provider education course. Interns are encouraged to attend Oversight Committee meetings as their schedule permits but are not typically involved in Oversight Committee operations.

Section 6-U. What is the size of the support staff *directly* assisting the board? How many are merit, appointed, exempt, temporary, casual seasonal, or contract employees? For contract employees indicate who holds the employment contract. Highlight support staff responsibilities, indicate who performs each and the percent of staff time spent on each responsibility. (skip if not applicable)

The Office of Medical Marijuana (OMM) is responsible for supporting the Oversight Committee. OMM has four FTEs, three Casual Seasonal Employees and adding a contract employee in FY22.

OMM Director (PG-18) (merit)
OMM Management Analyst (PG-13) (merit)
OMM Investigator (PG-11) (merit)
OMM Administrative Specialist (PG-8) (merit)
Two Administrative Specialists (C/S)
One Investigator (C/S)
A contract employee “Planner I” is joining the office in FY22.

The OMM Director and MA split the administrative functions including agenda, minutes, and board packages (which includes minutes, agenda, bylaws, regulations, and legislation)

Section 6-V. Who supervises the support staff *directly* assisting the board? (skip if not applicable)

All interaction with the Oversight Committee is conducted by the OMM Director.

Section 6-W. How is the support staff *directly* assisting the board recruited and hired? Is there an orientation session for new hires? (skip if not applicable)

N/A

Section 6-X. What training opportunities are available to support staff *directly* assisting the board? (skip if not applicable)

N/A

Section 6-Y. Is the effectiveness of the board hindered by a lack of staff assistance or dedicated support staff? Please explain. What steps, if any, have been taken to address any staffing issues? (all entities under review answer this question)

All OMM staff are operating at full capacity, with the exception of the OMM Director deploying to the State Health Operations Center as required to assist with pandemic response. OMM hopes to receive additional merit positions to increase effectiveness.

Section 6-Z. Please identify, list, and briefly describe any executive orders, interagency agreements, management directives, administrative circulars, or like documents that directly impact the functioning of the board. (all entities under review answer this question)

N/A

SECTION 7: FREEDOM OF INFORMATION ACT (“FOIA”) COMPLIANCE

Section 7-A. How does the board respond to FOIA requests?

All Oversight Committee documents, agendas, and meeting minutes are posted online: <https://dhss.delaware.gov/dph/hsp/medmaroc.html>

Section 7-B. When and where are the meeting agendas posted?

Public Calendar

All future meetings will be posted on the Delaware Public Meeting Calendar. A link to the calendar is below; search for "medical marijuana." Meetings, and their related agenda, will be posted at least seven days prior to the meeting date. Meeting minutes will be attached to the associated meeting posting, as well as on this page, after they are approved by the committee, which typically occurs at the following meeting.

[Delaware State Public Calendar](#)

Section 7-C. Are meeting minutes regularly transcribed? When and where can the public obtain copies of meeting minutes?

Meeting minutes are available on the OMM website, listed by month and year:

<https://dhss.delaware.gov/dph/hsp/medmarocmtg.html>. They are also posted to the public meeting calendar once approved by the Oversight Committee.

Section 7-D. Are meetings recorded? If so, indicate whether it's an audio or video recording and is the recording posted online for the public? If the recordings are not posted online, are instructions provided to the public on how to request recordings?

Meetings were initially recorded to capture information for the minutes; however, the recordings were inaudible due to background noise and deleted.

Section 7-E. Within the past 3 calendar years, has the agency conducted executive sessions or other closed meetings? If yes, please indicate the date of each and the nature of the meeting. Are minutes of executive sessions or other closed meetings available to the public?

No.

Section 7-F. Has the agency ever received any complaints that they were violating FOIA? If so, please list and include the result of the hearing or the review.

No.

SECTION 8: ADMINISTRATIVE PROCEDURES ACT COMPLIANCE

Section 8-A. Does the board promulgate rules or regulations in accordance with the Administrative Procedures Act?

No. OMM staff conducts regulatory reviews and promulgates proposed regulations as needed to conform with legislative updates or other program updates.

Section 8-B. Has a DAG assigned to this board reviewed the current rules and regulations for compliance with the governing statute?

Yes, the Division of Public Health's DAG regularly reviews the Medical Marijuana regulations in consultation with OMM.

Section 8-C. Is the board considering any changes to its current rules and regulations? If "yes" please address the following questions:

1. What is the status and nature of the planned changes? N/A

2. **Have the proposed changes been reviewed and approved by the agency's Deputy Attorney General?** N/A

3. **Have the proposed changes and the public hearing date been published in the Register of Regulations?** N/A

SECTION 9: COMPLAINT AND DISCIPLINARY PROCESS

Section 9-A. Please describe in detail the complaint process utilized to resolve disputes between the board and the public, including how complaints are filed, who investigates complaints, and how long investigations proceed.

There have not been any complaints between the public and the Oversight Committee. However, the public could call the Office of Medical Marijuana and file a complaint with program staff.

Section 9-B. What are some of the most common complaints received by the board? Please identify where the complaints originate (i.e., public, media, Attorney General's Office, consumer groups, etc.).

N/A

Section 9-C. Have any complaints been filed with the Attorney General's Office? If so, have they been resolved?

N/A

Section 9-D. Are there any Delaware Attorney General's Opinions that affect the functioning of the board? If so, please provide the date and number.

None noted.

Section 9-E. Are there any recent judicial decisions (state or federal) that directly affect the functioning of the board?

None noted.

Section 9-F. What specific disciplinary actions were taken by the board as a result of complaint investigations? (i.e., license revocation, license suspension, formal reprimand, penalty, etc.).

N/A

Section 9-G. Please describe in detail the process utilized for determining appropriate disciplinary actions taken against individuals licensed, employed, or monitored by the board. Include the appeals process, if applicable.

N/A

Section 9-H. If applicable, provide the following complaint data for calendar years 2018, 2019, 2020, and 2021 (to date):

	Calendar Year 2018	Calendar Year 2019	Calendar Year 2020	Current Calendar Year 2021
Total Number of Complaints Received by the Board	0	0	0	0
Total Number of Complaints Investigated	0	0	0	0
Total Number of Complaints Found Valid	0	0	0	0
Total Number of Complaints Forwarded to the Attorney General	0	0	0	0
Total Number of Complaints Resulting in Disciplinary Action	0	0	0	0

N/A

SECTION 10: PRIOR JLOSC REVIEW

Section 10-A. Has JLOSC previously reviewed this board? If so, provide the year(s) of review and list all JLOSC final recommendations, indicate whether the board is complying or non-compliant with each recommendation, and explain all areas of non-compliance.

No.

SECTION 11: PUBLIC INFORMATION

Section 11-A. How does your board communicate information with the public? Does your board use a website and/or social media platform(s)? If so, please list each method of communication and supply the applicable web address, handle, or username.

The Oversight Committee holds at least two public meetings per year, in which the public has an opportunity to make comments. OMM also posts Oversight Committee updates on its website: <https://dhss.delaware.gov/dph/hsp/medmaroc.html>

Section 11-B. What information or educational resources are made available to the public relating to the board’s activities? Examples include newsletters, guidelines, rules and regulations, policy briefs, or other similar documents. Please indicate the method and frequency of distribution for each and identify the target group(s).

Committee members names, meeting minutes and agendas, program petitions to add conditions, enabling legislation, regulations, committee by-laws, annual reports by year, and applicable forms are all available on OMM’s website: <https://dhss.delaware.gov/dhss/dph/hsp/medmarhome.html>.

Section 11-C. Does your board actively engage with the public and solicit feedback? If so, please explain. If the board has conducted surveys, please list all surveys conducted within the past 5 years and indicate where the public can find survey results.

Yes, the Oversight Committee reserves time every meeting for public comment. The Office of Medical Marijuana conducted a patient satisfaction survey in 2020 during the pandemic. An overview of the survey results was presented by the OMM Director to the Oversight

Committee during the October 2020 meeting. Once minutes from this meeting are approved (the February 2020 meeting did not have a quorum and therefore could not approve minutes), the survey results will be attached to the minutes and posted on the OMM website and public meeting calendar.

Section 11-D. Does your board have by-laws? If so, are they available for the public (include location) and what was the last date of revision?

Yes. The Oversight Committee has bylaws listed on the OMM website. They were last revised on October 27, 2015. <https://dhss.delaware.gov/dph/hsp/files/mmpbylaws.pdf>

Section 11-E. Please complete the following 3 charts (add or delete cells as needed) with the most current information regarding interest groups, national organizations, and industry or trade publications as described in each chart heading.

Interest Groups (Groups affected by board actions or represent others served by or affected by board actions)		
Group or Association Name/Contact Person	Internet Address	Phone Number
Delaware NORML	https://denorml.org/	
Delaware CAN	https://delawarecannabis.org/	

National Organizations or other State Entities (that serve as an information clearinghouse or regularly interact with the board)		
Group or Association Name/Contact Person	Internet Address	Phone Number
Cannabis Regulators Association (CANNRA)	https://www.cann-ra.org/	

Industry or Trade Publications		
Group or Association Name/Contact Person	Internet Address	Phone Number
Medical Cannabis Brief	https://www.medicalcannabisbrief.com/	

SECTION 12: ENACTED LEGISLATION IMPACTING THE AGENCY

Section 12-A. Did legislation establish the board? If so, what year and by what legislative bill was the agency established?

Yes.

146th General Assembly (2011) SB 17
<https://legis.delaware.gov/SessionLaws/Chapter?id=16444>

148th General Assembly (2015) SB 7
 (<https://legis.delaware.gov/SessionLaws/Chapter?id=15582>)

Section 12-B. Please list all legislative bills and other acts that have made substantive amendments to the board’s enabling legislation. Please indicate the bill number and date of enactment for each.

146th General Assembly (2011) SB 17
 (<https://legis.delaware.gov/SessionLaws/Chapter?id=16444>)

148th General Assembly (2015) SB 7
 (<https://legis.delaware.gov/SessionLaws/Chapter?id=15582>)

Section 12-C. Please identify, list, and briefly describe any federal laws or regulations that guide or otherwise directly affect the functions, responsibilities, and operations of the board.

None noted.

SECTION 13: PENDING & PROPOSED LEGISLATION

Section 13-A. Please list any currently proposed legislation (state and federal) that, if passed, will directly impact the functions or operations of the board. Please indicate any bills that the board is supporting or opposed.

None noted.

SECTION 14: FISCAL INFORMATION

Section 14-A. Complete the following chart to provide the board’s actual revenue for FY19 and FY20 and budgeted revenue for FY21. Also indicate the source of funds (i.e., general fund, federal funds, special funds, etc.).

Revenue:

Fiscal Year	Source of Funds	Amount
FY21 (budgeted)		
	General Funds	\$0.00
	Federal Funds	\$0.00
	Special Funds	\$0.00
	TOTAL:	\$0.00
FY20 (actual)		
	General Funds	\$0.00
	Federal Funds	\$0.00
	Special Funds	\$0.00
	TOTAL:	\$0.00
FY19 (actual)		
	General Funds	\$0.00
	Federal Funds	\$0.00
	Special Funds	\$0.00
	TOTAL:	\$0.00

Section 14-B. If the board receives federal funds, including grants, please indicate the following:

- **Total amount of federal funds.**
- **Type of federal fund.**
- **State/Federal Match Ratio.**
- **State Share of Dollars.**
- **Federal Share of Dollars.**

The Oversight Committee does not receive revenue. All revenue is received through the Office of Medical Marijuana through the Medical Marijuana Program.

Section 14-C. Does the board collect any fees or fines? Provide information on any fines or fees collected by the agency:

No.

Description of Fine or Fee	Current Fine or Fee \$\$	Number of Persons or Entities Paying Fine or Fee	Fine or Fee Revenue \$\$	Where is the Fine or Fee Revenue Deposited? (i.e., general fund, special fund)

Section 14-D. Has the board conducted a financial analysis to determine if the current fees are sufficient to cover the cost of the administrative activity related to each? Do the current fees or fines need to be updated or revised? Please explain, indicating whether the fees or charges can be changed directly by the agency or if legislative approval is required.

N/A

Section 14-E. Complete the following chart to provide the board’s actual expenditures for FY19 and FY20 and budgeted expenditures for FY21. Also indicate the source of expenditures (i.e., general fund, federal fund, special fund, etc.).

Expenditures:

Fiscal Year	Source of Funds	Amount
FY21 (budgeted)		
	General Funds	\$0.00
	Federal Funds	\$0.00
	Special Funds	\$0.00
	TOTAL:	\$0.00
FY20 (actual)		
	General Funds	\$0.00
	Federal Funds	\$0.00
	Special Funds	\$0.00
	TOTAL:	\$0.00
FY19 (actual)		
	General Funds	\$0.00
	Federal Funds	\$0.00

Section 15-B. Please provide the following data for each license, certificate, or approval notice issued by the board during calendar years 2018, 2019, 2020, and 2021 (to date). Include additional charts, if necessary:

Name of license issued by the board: _____

	# of License Applications Received	# of License Applications Approved	# of Licenses Issued	# of Licenses Rejected	# of Licenses Revoked
Calendar Year 2018	0	0	0	0	0
Calendar Year 2019	0	0	0	0	0
Calendar Year 2020	0	0	0	0	0
Current Calendar Year 2021 (to date)					

Name of license issued by the board: _____

	# of License Applications Received	# of License Applications Approved	# of Licenses Issued	# of Licenses Rejected	# of Licenses Revoked
Calendar Year 2018	0	0	0	0	0
Calendar Year 2019	0	0	0	0	0
Calendar Year 2020	0	0	0	0	0
Current Calendar Year 2021 (to date)					

Section 15-C. Do licenses issued by this board have reciprocity or endorsement agreements with Delaware? If so, provide a list of all states and jurisdictions that have licensing reciprocity or endorsement agreements with Delaware. Indicate if the board requires a signed agreement or endorsement from another state or jurisdiction before a Delaware license is issued?

N/A

Application Fees:

Section 15-D. Are any application fees collected by the board? If so, complete the chart below.

Fee Type	Application Fee
Fee Type	\$0
	\$0
	\$0
	\$0
	\$0

No, application fees are not collected by the Oversight Committee.

Section 15-E. If application fees are collected, when are fees due? Where are fees deposited? What happens if the fee is not paid? Are there any reduced fee options?

N/A

Section 15-F. If application fees are collected, has the board conducted a financial analysis to determine if the current application fees are sufficient to cover the cost of processing applications? Do the current application fees need to be updated or revised? Please explain, indicating whether the application fees can be changed directly by the agency or if legislative approval is required.

N/A

Application Process:

Section 15-G: Describe the application review process. Include where applications are obtained. Who reviews applications? How are applicants informed of decisions?

The Medical Marijuana Act Oversight Committee does not review applications. The Office of Medical Marijuana reviews program applications.

Examinations:

Section 15-H. If there is an examination requirement to obtain a license, address the following questions:

1. Is the examination written, oral, or both?
2. Is a standardized national examination used?
3. Who develops and scores the exam?
4. Are all aspects of the examination validated?

5. Who administers the exam, where is it administered, and how often is the exam given?
6. During each of the previous three calendar years, how many persons sat for an exam, and of those, how many successfully passed?

N/A

SECTION 16: RECONSIDERATION, APPEAL, SANCTIONS, REVOCATION

Reconsideration:

Section 16-A: Is there a process for application or board decision reconsideration (a process prior to a formal appeal, sometimes referred to as an administrative reconsideration)? This could also apply to reconsidering budget decisions made by the board. If so, please explain.

None. The Oversight Committee receives public comment at meetings.

Appeal:

Section 16-B: Can an applicant, group, or individual appeal a board decision? If so, explain the process for appeal.

No process is in place other than request to re-address an issue.

Sanctions:

Section 16-C: Can the board issue sanctions? If so, explain the sanction process.

No.

Revocation:

Section 16-D: Does the board have a revocation process? If so, explain the process.

No.

SECTION 17: SELF-REPORT AUTHOR(S)

Section 17-A: Include all Self-Report author(s) and contact information below.

- **All Self-Report author(s) listed below certify the information supplied in this Self-Report is correct to the best of their ability.**
 - **Reminder to entity under review: Any updates or corrections to Self-Report contents and entity information must be submitted to JLOSC staff in a timely manner during the entire period of review.**

Paul R. Hyland
Director, Office of Medical Marijuana
Jesse Cooper Building , 417 Federal St, Dover, DE 19901
Office: 302-744-4758, FAX: 302-744-5366
paul.hyland@delaware.gov

Section 17-B: This Self-Report was submitted to JLOSC staff on: August 18, 2021

APPENDICES

Appendix A: Medical Marijuana Act Oversight Committee Bylaws

Appendix A: Medical Marijuana Act Oversight Committee Bylaws

BY-LAWS OF

THE DELAWARE MEDICAL MARIJUANA ACT OVERSIGHT COMMITTEE

ARTICLE I. NAME AND LOCATION.

Section 1. Name – The name shall be the Medical Marijuana Act Oversight Committee, hereinafter referred to as “the Oversight Committee”.

Section 2. Location – The place of normal business of the Oversight Committee shall be within the state of Delaware.

ARTICLE II. PURPOSE, DUTIES AND RESPONSIBILITIES.

Section 1. Purpose – The purpose of the Oversight Committee, as established in 16 Delaware Code, Ch. 49A, is to evaluate and make recommendations regarding the implementation of this chapter.

Section 2. Duties and Responsibilities – The duty and responsibility of the Oversight Committee, as set forth in 16 Delaware Code, Section 4922A is to meet at least two times per year for the purpose of evaluating and making recommendations to the Governor, the General Assembly, and the Department of Health and Social Services (DHSS) regarding:

a. the ability of qualifying patients in all areas of the state to obtain timely access to high-quality medical marijuana;

b. the effectiveness of the registered compassion center(s), individually and

Issued Date: October 12, 2015

Revised Date: October 27, 2015

20 together, in serving the needs of qualifying patients, including the provision of
21 educational and support services, the reasonableness of their fees, whether
22 they are generating any complaints or security problems, and the sufficiency

- 23 of the number operating to serve the registered qualifying patients of
24 Delaware;
- 25 c. the effectiveness of the registered safety compliance facility or facilities,
26 including whether a sufficient number are operating;
- 27 d. the sufficiency of the regulatory and security safeguards contained in 16 Del.
28 C. Ch. 49A and 16 DE Admin. C. 4470 adopted by DHSS to ensure that
29 access to and use of marijuana cultivated is provided only to cardholders
30 authorized for such purposes;
- 31 e. any recommended additions or revisions to 16 Del. C. Ch. 49A and 16 DE
32 Admin. C. 4470, including but not limited to, additions or revisions relating to
33 security, safe handling, labeling, and nomenclature of medical marijuana; and
- 34 f. any research studies involving health effects of medical marijuana for
35 patients.

36 ARTICLE III. MEMBERS AND COMPENSATION.

37 Section 1. Members – The Oversight Committee shall consist of nine members, as
38 follows, who possess the qualifications and are appointed in accordance with 29 Del. C. §
39 4922A:

- 40 a. one member, appointed by the President Pro Tempore of the Senate;
- 41 b. one member, appointed by the Speaker of the House;
- 42 c. the Secretary of DHSS, or a designee appointed by the Secretary;
- 43 d. two medical professionals, each licensed in Delaware, with experience in
44 medical marijuana issues, appointed by the Governor;

- 45 e. one member with experience in policy development or implementation in the
- 46 field of medical marijuana, appointed by the Governor; and
- 47 f. three members who each shall be a cardholder, as defined in 16 Del. C.
- 48 §4902A , appointed by the Governor.

49 Section 2. Compensation – No member of the Oversight Committee shall receive any
50 salary, compensation, or emolument for his or her services on behalf of the Oversight
51 Committee.

52 Section 3. Removal of Member from Committee – The members of the Oversight
53 Committee shall serve at the pleasure of the appointing authority.

54 Section 4. Resignation – A member of the Oversight Committee may resign by
55 submitting either verbal or written notice of resignation to the Chair or Appointing
56 Authority. If a member misses two consecutive meetings without just cause, that
57 member shall be presumed to have resigned. In order to have just cause considered the
58 member:

- 59 i. must contact the Chair or Vice Chair prior to the day of the second
- 60 scheduled meeting which will be missed;
- 61 ii. must inform the Chair or Vice Chair they are unable to attend the second
- 62 scheduled meeting; and
- 63 iii. must request to be excused

64

65 ARTICLE IV. ADMINISTRATOR OF THE OFFICE OF MEDICAL
66 MARIJUANA.

67 The Administrator of the Office of Medical Marijuana shall have the following duties and
68 responsibilities as it pertains to the Oversight Committee:

- 69 (1) issue meeting notices and agendas;
- 70 (2) direct minutes of all meetings of the Oversight Committee, ensure those
71 minutes are maintained as a history of the meetings of the Oversight
72 Committee, and distribute the minutes to members of the Oversight
73 Committee prior to the next meeting;
- 74 (3) assist the Chairperson in the preparation of the agenda for meetings;
- 75 (4) keep a current roster of members of the Oversight Committee and any other
76 records related to the history or duties of the Oversight Committee;
- 77 (5) report on medical marijuana program activities and answer questions;
- 78 (6) conduct the general correspondence of the Oversight Committee;
- 79 (7) prepare position papers, regulatory amendment documents, or other official
80 documents generated by the Oversight Committee; and
- 81 (8) perform any other duties delegated by the Secretary of DHSS.

82 ARTICLE V. OFFICERS.

83 Section 1. Chair and Vice-Chair – The officers of the Oversight Committee shall be a
84 Chair and a Vice-Chair.

85 Section 2. Duties and Responsibilities – The duties and responsibilities of the Chair
86 and Vice-Chair shall be as follows:

- 87 (1) Chair – The Chair shall preside at all meetings of the Oversight Committee,
88 except the Chair may designate another member to preside at a particular

89 meeting or at a certain part of a meeting. The Chair may lead periodic review
90 of the Oversight Committee by-laws. The Chair shall perform such other
91 duties as the Oversight Committee, from time to time, shall designate.

92 (2) Vice-Chair – In the absence of the Chair, the Vice-Chair shall have all of the
93 duties and responsibilities of the Chair. The Vice-Chair shall perform such
94 other duties as the Oversight Committee, from time to time, shall designate.

95 Section 3. Term – The term of office of the Chair and Vice-Chair shall be two years
96 and shall begin at the close of the Oversight Committee meeting at which they are
97 elected.

98 Section 4. The Oversight Committee shall hold election of Officers – the Chair and
99 Vice-Chair – on a semi-annual basis with elections occurring at either the meeting
100 preceding the end of an officer’s term if within 90 days of the term completion, or the
101 first meeting after a two-year term has elapsed.

102 Section 5. Vacancies – A vacancy in the office of Chair shall be filled by the
103 advancement of the Vice-Chair, until the Oversight Committee can convene to elect a
104 new Chair. A vacancy in the office of the Vice-Chair shall be filled temporarily by a
105 selection of the Chair, until the Oversight Committee can convene to elect a new Vice-
106 Chair.

107 Section 6. Removal from Office – The Chair or Vice-Chair may be removed from
Page 5 of 10

108 office for cause by a two-thirds vote of the members present at any meeting of the
109 Oversight Committee, after notice of the meeting and agenda has been distributed to the
110 membership.

111 ARTICLE VI. MEETINGS.

112 Section 1. Regular Meetings – The Oversight Committee shall hold two regular
113 meetings each calendar year and will hold its election of officers at the last meeting of the
114 year.

115 Section 2. Special Meetings – The Oversight Committee may, upon written request
116 of a majority of the members, upon the request of the Chair or at the request of the
117 Department Secretary or designee shall call special meetings at such times and places as
118 may be determined.

119 Section 3. Notice – Notices of meetings of the Oversight Committee shall be
120 distributed to the membership prior to the meeting and shall be posted to the State Public
121 Meetings webpage at least ten days prior to the meeting date. In addition, in response to
122 29 Del. C. § 10004(e)(2), the Oversight Committee shall pre-announce or pre-publish the
123 agenda for all Executive Sessions; however, such agenda shall be subject to include
124 additional items which arise at the time of the Oversight Committee’s regular meeting.

125 Section 4. Quorum – A quorum shall consist of 51% of the membership of the

126 Oversight Committee. If at any meeting there is less than a quorum present, official
127 business cannot be performed.

128 Section 5. Voting – Each member of the Oversight Committee shall have one vote on
129 matters brought before the Oversight Committee except when the member has a conflict
130 of interest. The disqualification of a member from voting shall not affect the quorum.

131 All matters shall be decided by a majority of the members present and voting.

132 Section 6. Conflict of Interest – Members of the Oversight Committee shall comply
133 with the State Employees', Officers' and Officials' Code of Conduct – 29 Del. C. Ch. 58.
134 A member may not participate in the review or disposition of any matter in which the
135 member has a conflict of interest except to respond to questions from another member or
136 any other person with official responsibility with respect to that matter. A member shall
137 declare the conflict of interest at the earliest practicable time after learning of such
138 conflict.

139 Section 7. Parliamentary procedure – Parliamentary procedures at all meetings of the
140 Oversight Committee shall be in accordance with the current version of Robert’s Rules of
141 Order Newly Revised.

142 ARTICLE VII. COMMITTEES.

143 Section 1 Executive Committee:

- 144 A. The Executive Committee shall be a continuing Committee and:
- 145 a. shall consist of all Oversight Committee officers;
 - 146 b. shall have general supervision of the affairs of the Oversight Committee

147 between meetings;

148 c. may, as emergencies arise and immediate action is required, act on behalf of
149 the Oversight Committee, and shall report any such interim actions at the next
150 scheduled Oversight Committee meeting, such action may be ratified by the full
151 Committee;

152 d. shall be subject to the orders of the Oversight Committee and none of its
153 acts shall conflict with action taken by the Oversight Committee;

- 154 e. may recommend to the Oversight Committee additions and deletions to the
155 Roster, and monitor member performance and attendance at meetings;
- 156 f. shall oversee expenditures and funds, and make recommendations to the
157 Oversight Committee for changes;
- 158 g. may recommend to the Oversight Committee changes for policies and
159 procedures;
- 160 h. must approve all major changes to the projected or approved annual budget.
- 161 B. The Oversight Committee Chair shall preside over the Executive Committee
- 162 Section 2 Sub-Committees:
- 163 A. The Oversight Committee or the Executive Committee may establish sub-
164 committees as necessary to carry out business, responsibilities or assigned projects.
- 165 B. The Oversight Committee or Executive Committee shall review and decide when a
166 sub-committee is essential and vote to establish such sub-committee.
- 167 C. The Oversight Committee Chair shall designate a Committee member to Chair the
168 assigned sub-committee.

- 169 D. The sub-committee Chair shall:
- 170 a. assign all sub-committee meeting dates;
- 171 b. ensure the meeting agendas and minutes are posted pursuant to statutory
- 172 requirements;
- 173 c. ensure all sub-committee progress is presented to the Oversight Committee
- 174 members, at each scheduled Oversight Committee meeting through the duration
- 175 of a project

- 176 E. Non Oversight Committee members may participate in sub-committee meetings
177 and work.
- 178 a. The sub-committee members may reach out for assistance as needed to
179 accomplish the assigned project.
- 180 b. Sub-committee members selected from the community at large will serve on
181 a voluntary basis and will not have voting privileges on matters before the
182 Oversight Committee.
- 183 c. Upon selection of a sub-committee member who is not a member of the
184 Oversight Committee, the Chairperson shall notify the Secretary of DHSS or the
185 Secretary's designated representative.
- 186 d. The Oversight Committee Chair shall be an ex-officio member of all sub-
187 committee and shall be responsible for their task completions.
- 188 i. Sub-committee chairpersons shall be appointed by the Chair of the
189 Oversight Committee, and the tasks and products of any such committee
190 shall be defined by the Chair of the Oversight Committee with specific

191 dates established for reports to the full Oversight Committee membership.

192 F. All established sub-committee members shall be responsible for accomplishing
193 assigned projects in a timely manner.

194 G. Sub-committee critical decisions should be addressed at scheduled Oversight
195 Committee meetings for a vote, prior to the sub-committee taking action. If the sub-
196 committee is working with a deadline and needs sudden action, and there is not a
197 scheduled Oversight Committee meeting to address the need in a timely manner, the

198 Chair of the sub-committee shall address the Executive Committee for a decision.

199 ARTICLE VIII. AMENDMENT OF BYLAWS.

200 These bylaws may be altered, amended, or repealed, and new bylaws may be adopted by
201 a majority (quorum) of the Oversight Committee members present at any regular or
202 special meeting, provided that no such action in any way conflicts with the statutory
203 obligations of the Oversight Committee, as stated in 16 Del. C. Ch. 49A and provided
204 that written notice shall have been sent to each member. Such notice shall describe, at
205 least in general terms, the alterations, amendments, or changes that are proposed to be
206 made to the Bylaws. Whenever these Bylaws, or a provision of these Bylaws, is found to
207 conflict with Delaware law, such provision shall be deemed invalid without affecting the
208 remainder of the Bylaws.

Appendix B: Links to MMAOC Minutes, Reports, By-laws, and MMP Regulations

Appendix B: Links to MMAOC Minutes, Reports, By-laws, and MMP Regulations

BY-LAWS OF THE DELAWARE MEDICAL MARIJUANA ACT OVERSIGHT COMMITTEE

<https://dhss.delaware.gov/dph/hsp/files/mmpbylaws.pdf>

Meeting Minutes and Agendas:

Feb 2021	https://publicmeetings.delaware.gov/#/meeting/68334
Oct 2020	https://publicmeetings.delaware.gov/#/meeting/66977
Feb 2020	https://publicmeetings.delaware.gov/#/meeting/64139
Oct 2019	https://publicmeetings.delaware.gov/#/meeting/63540
Feb 2019	https://publicmeetings.delaware.gov/#/meeting/61450
Dec 2018	https://dhss.delaware.gov/dph/hsp/files/mtgmins12062018.pdf
Oct 2018	https://publicmeetings.delaware.gov/#/meeting/59985 (cancelled lack of quorum)
Feb 2018	https://publicmeetings.delaware.gov/#/meeting/57053
Oct 2017	https://publicmeetings.delaware.gov/#/meeting/51227
Feb 2017	https://publicmeetings.delaware.gov/#/meeting/50525
Oct 2016	https://publicmeetings.delaware.gov/#/meeting/50525
Feb 2016	https://publicmeetings.delaware.gov/#/meeting/34356

Medical Marijuana Code (Regulations): Posted November 2020

<https://dhss.delaware.gov/dph/hsp/files/mmpdelcode.pdf>

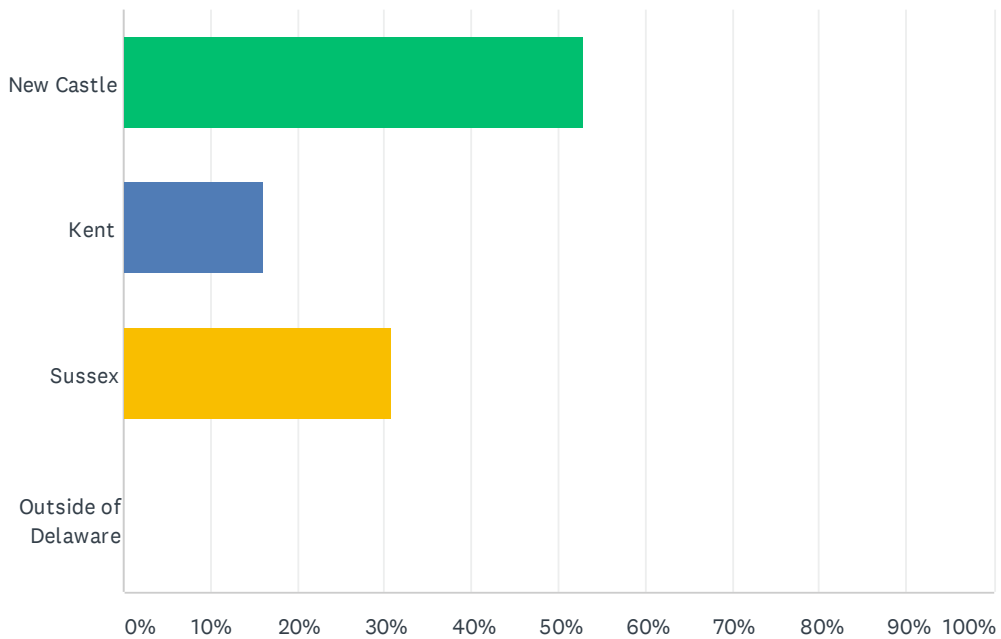
Annual Reports: (By State Fiscal Year)

2020	https://dhss.delaware.gov/dph/hsp/files/mmpannrpt2020.pdf
2019	https://dhss.delaware.gov/dph/hsp/files/mmpannrpt2019.pdf
2018	https://dhss.delaware.gov/dph/hsp/files/mmpannrpt2018.pdf
2017	https://dhss.delaware.gov/dph/hsp/files/mmpannrpt2017.pdf
2016	https://dhss.delaware.gov/dph/hsp/files/mmpannrpt2016.pdf

Appendix C: Medical Marijuana Program 2020 Customer Service Survey Results

Q1 What county do you reside in?

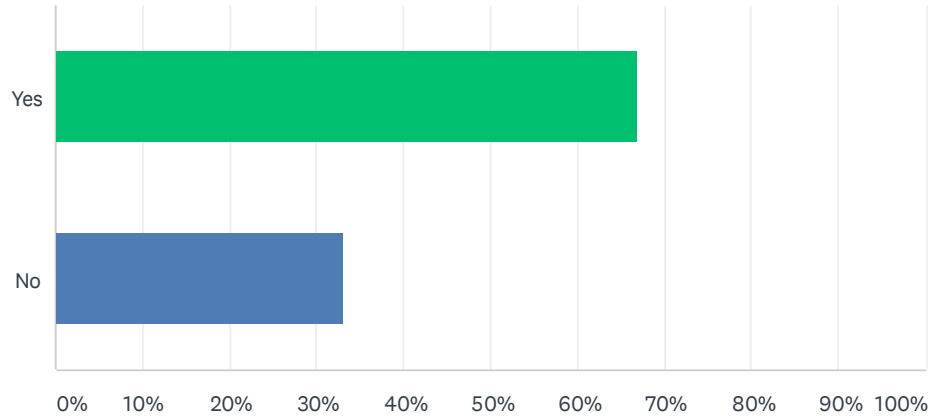
Answered: 1,131 Skipped: 3



ANSWER CHOICES	RESPONSES	
New Castle	52.87%	598
Kent	16.18%	183
Sussex	30.86%	349
Outside of Delaware	0.09%	1
TOTAL		1,131

Q2 Delaware has three (3) providers who grow and process medical marijuana with six (6) locations/dispensaries that patients can visit to make purchases in all three (3) counties. Did you know that before today?

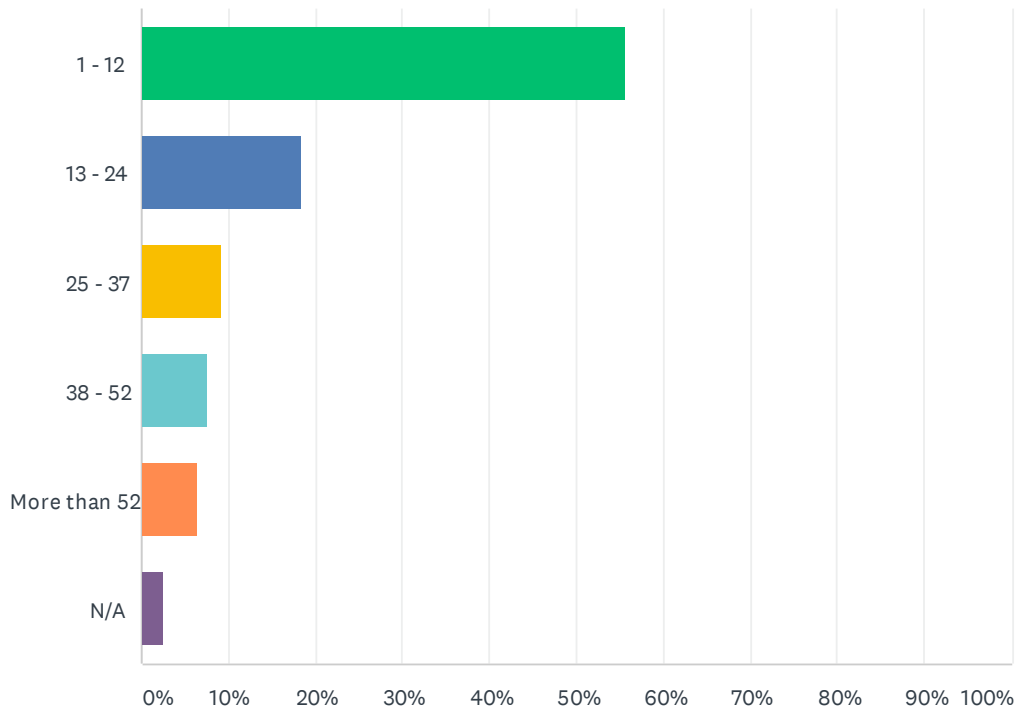
Answered: 1,127 Skipped: 7



ANSWER CHOICES	RESPONSES	
Yes	66.99%	755
No	33.01%	372
TOTAL		1,127

Q3 In the past 12 months, how many times have you visited a dispensary?

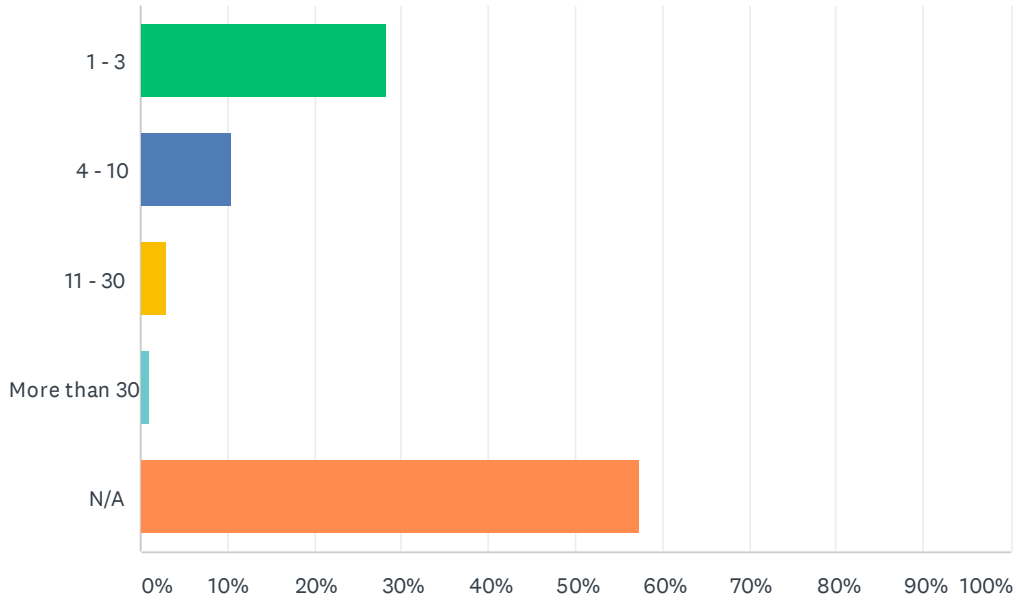
Answered: 1,131 Skipped: 3



ANSWER CHOICES	RESPONSES	
1 - 12	55.70%	630
13 - 24	18.48%	209
25 - 37	9.11%	103
38 - 52	7.60%	86
More than 52	6.54%	74
N/A	2.56%	29
TOTAL		1,131

Q4 How many times in the past 12 months did you visit a dispensary and not make any purchase from the dispensary?

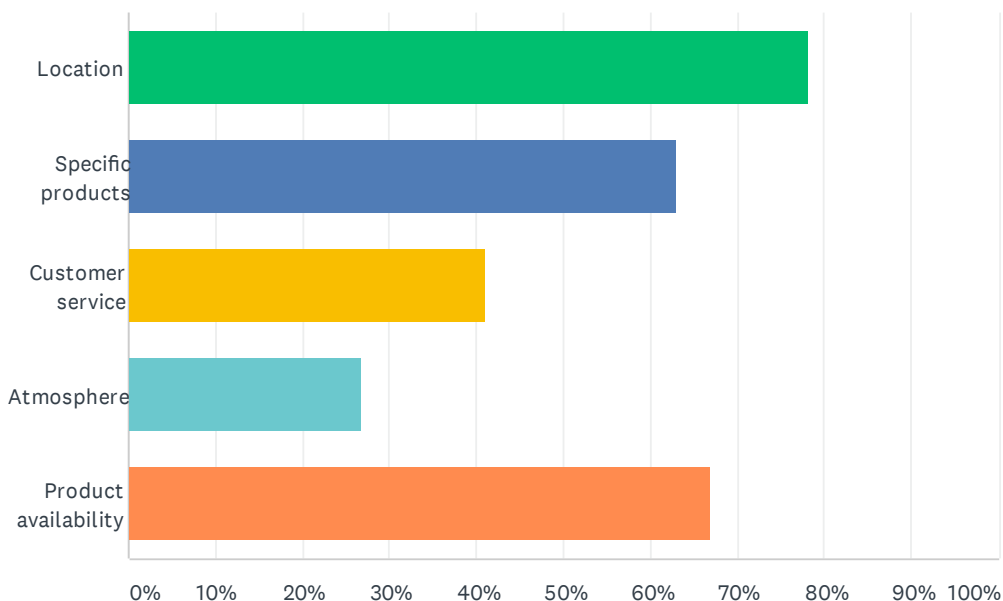
Answered: 1,133 Skipped: 1



ANSWER CHOICES	RESPONSES	
1 - 3	28.24%	320
4 - 10	10.41%	118
11 - 30	2.82%	32
More than 30	1.15%	13
N/A	57.37%	650
TOTAL		1,133

Q5 What factors go into you choosing to visit a dispensary? (choose all that apply)

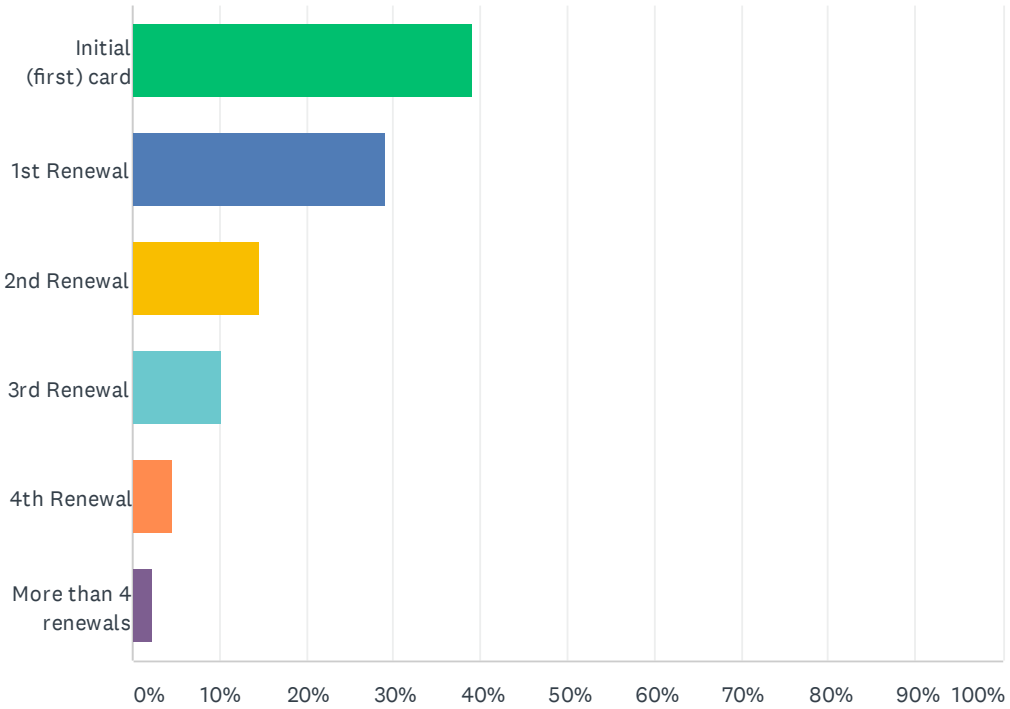
Answered: 1,132 Skipped: 2



ANSWER CHOICES	RESPONSES
Location	78.18% 885
Specific products	62.99% 713
Customer service	40.90% 463
Atmosphere	26.77% 303
Product availability	67.05% 759
Total Respondents: 1,132	

Q6 Is your current Delaware Medical Marijuana your initial (first) card or a renewal card?

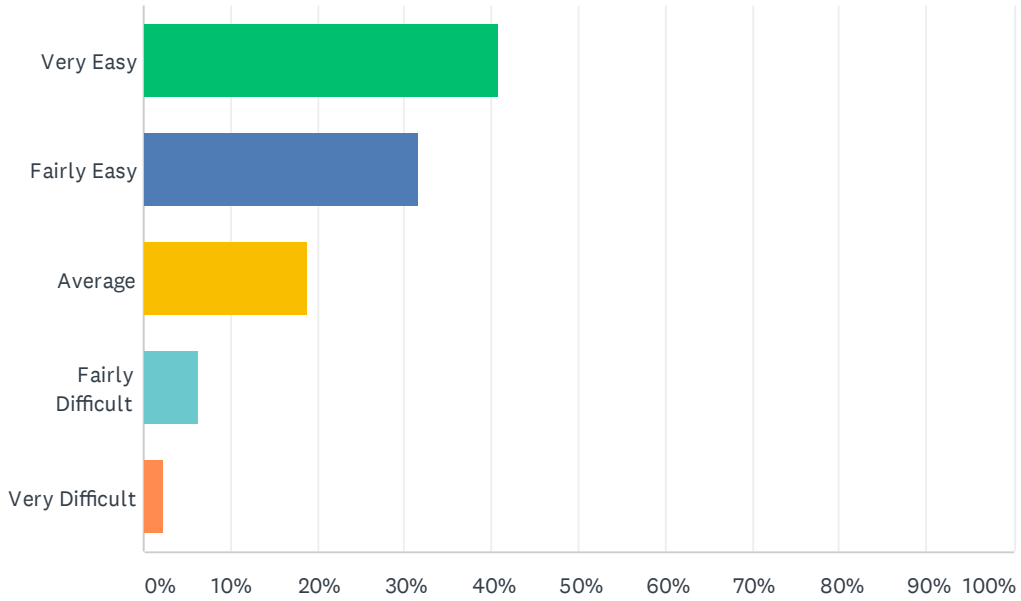
Answered: 1,127 Skipped: 7



ANSWER CHOICES	RESPONSES	
Initial (first) card	39.22%	442
1st Renewal	29.02%	327
2nd Renewal	14.55%	164
3rd Renewal	10.29%	116
4th Renewal	4.61%	52
More than 4 renewals	2.31%	26
TOTAL		1,127

Q7 Thinking about your last application to the Medical Marijuana Program, describe the difficulty in applying for the card:

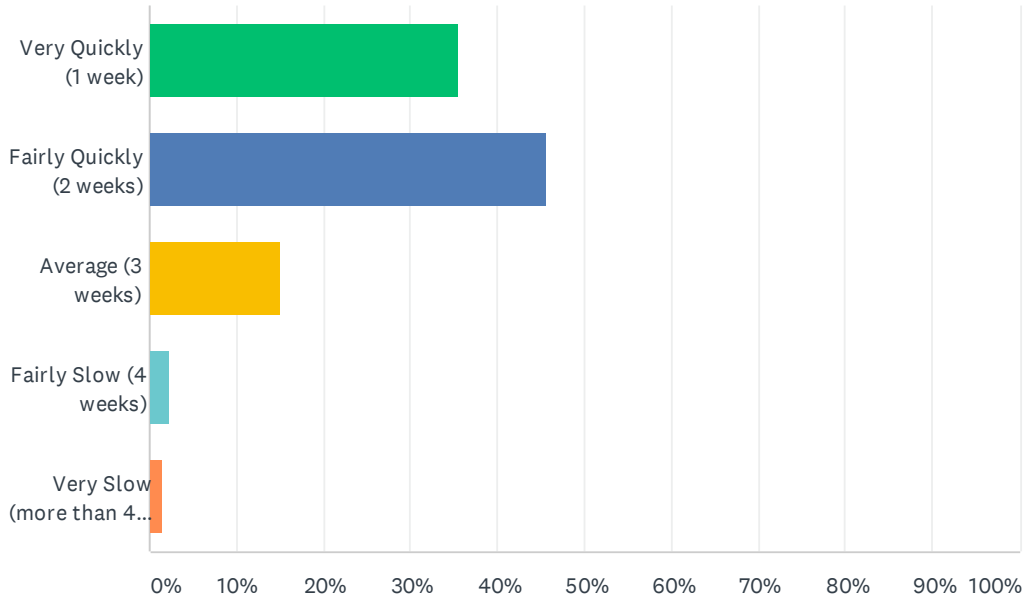
Answered: 1,129 Skipped: 5



ANSWER CHOICES	RESPONSES	
Very Easy	40.74%	460
Fairly Easy	31.53%	356
Average	18.87%	213
Fairly Difficult	6.29%	71
Very Difficult	2.39%	27
TOTAL		1,129

Q8 Thinking about your last application to the Medical Marijuana Program, describe the amount of time it took to receive the card after submitting the application:

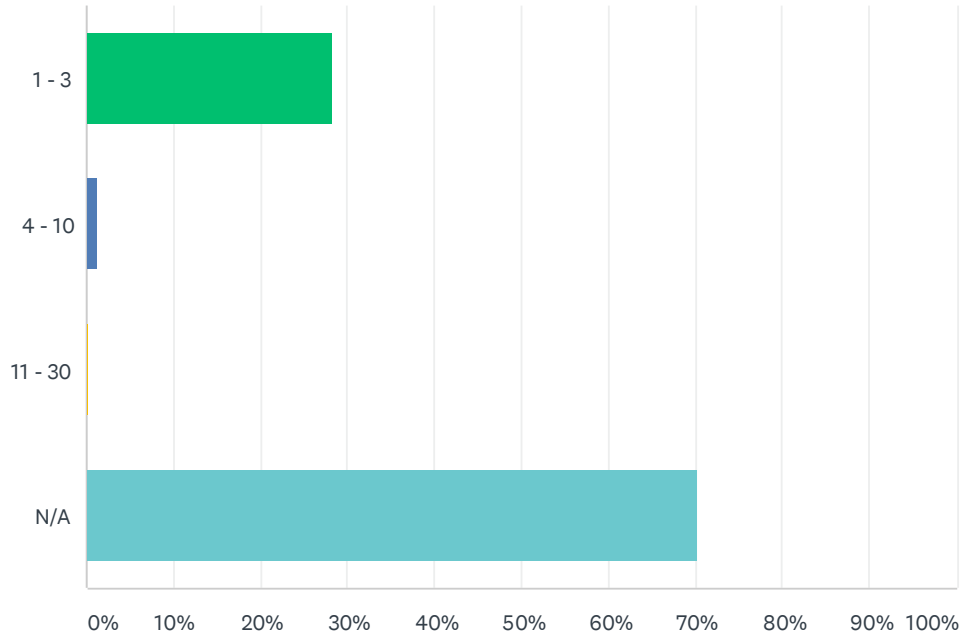
Answered: 1,125 Skipped: 9



ANSWER CHOICES	RESPONSES	
Very Quickly (1 week)	35.56%	400
Fairly Quickly (2 weeks)	45.51%	512
Average (3 weeks)	15.11%	170
Fairly Slow (4 weeks)	2.31%	26
Very Slow (more than 4 weeks)	1.51%	17
TOTAL		1,125

Q9 How many times have you contacted the Office of Medical Marijuana (OMM) for assistance with your application?

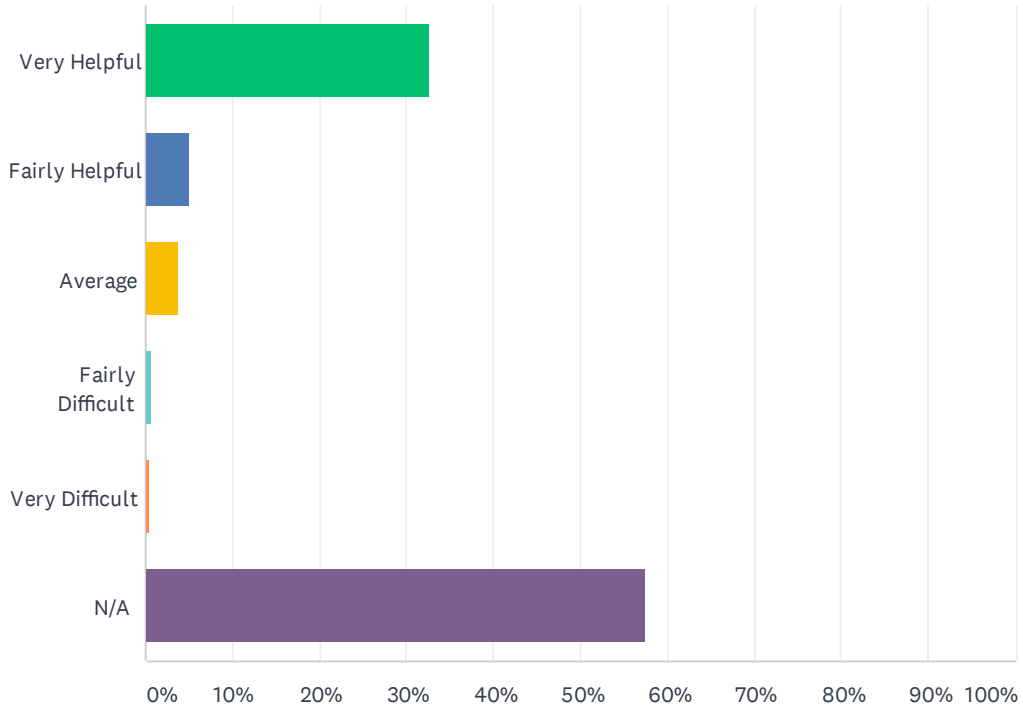
Answered: 1,129 Skipped: 5



ANSWER CHOICES	RESPONSES	
1 - 3	28.17%	318
4 - 10	1.24%	14
11 - 30	0.27%	3
N/A	70.33%	794
TOTAL		1,129

Q10 When contacting the OMM, how well did the program answer your question(s)?

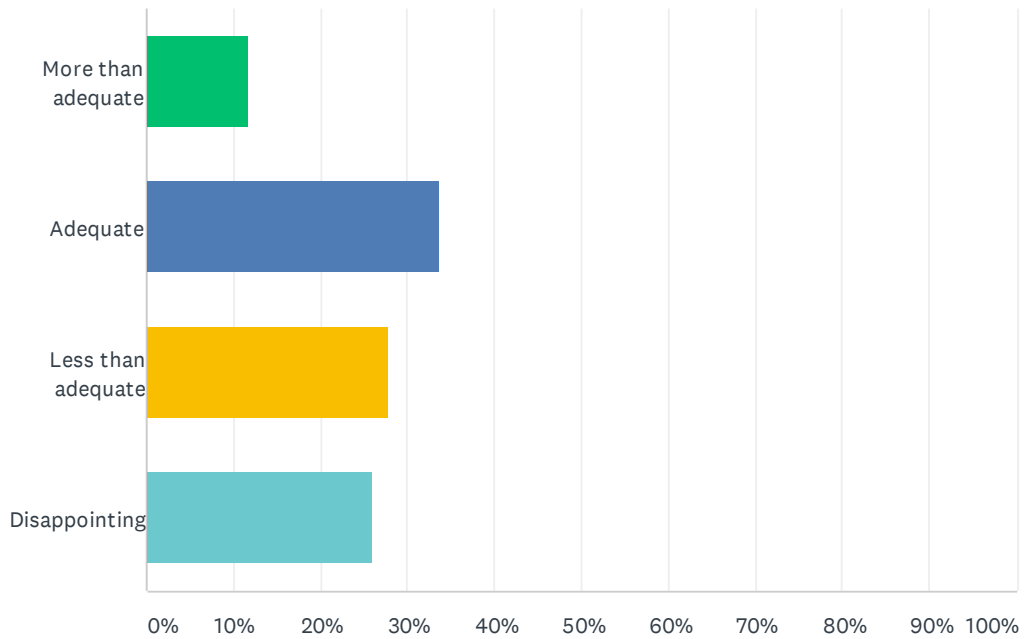
Answered: 1,128 Skipped: 6



ANSWER CHOICES	RESPONSES	
Very Helpful	32.54%	367
Fairly Helpful	4.96%	56
Average	3.81%	43
Fairly Difficult	0.71%	8
Very Difficult	0.44%	5
N/A	57.54%	649
TOTAL		1,128

Q11 When visiting the medical marijuana dispensaries, you find product variety to be:

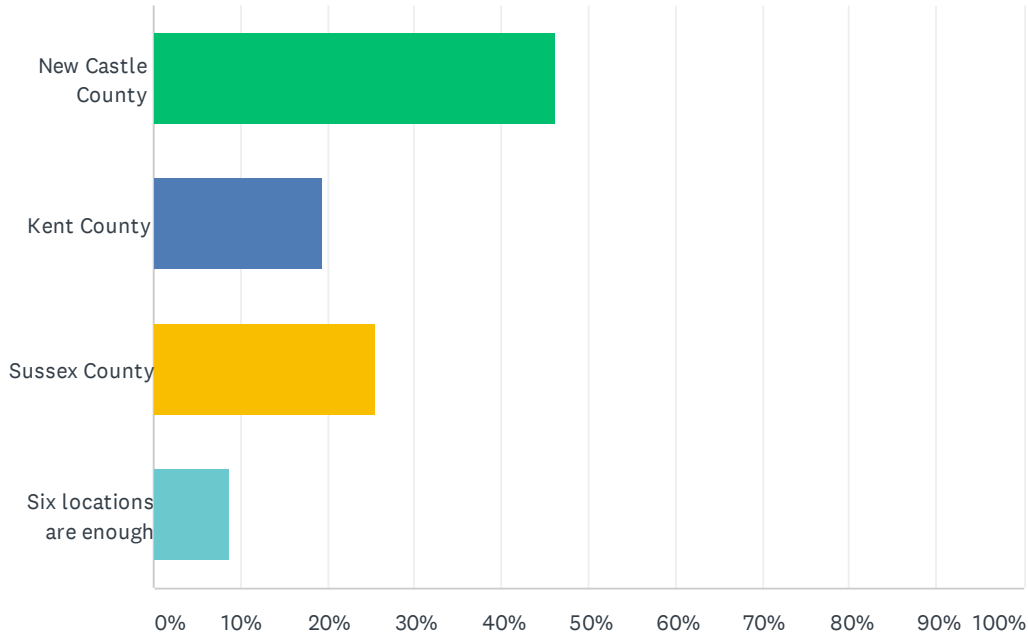
Answered: 1,133 Skipped: 1



ANSWER CHOICES	RESPONSES	
More than adequate	11.74%	133
Adequate	33.63%	381
Less than adequate	27.89%	316
Disappointing	25.86%	293
TOTAL		1,133

Q12 The six (6) medical marijuana dispensaries are distributed throughout the state based on population density. If you could choose, where would you add the next dispensary?

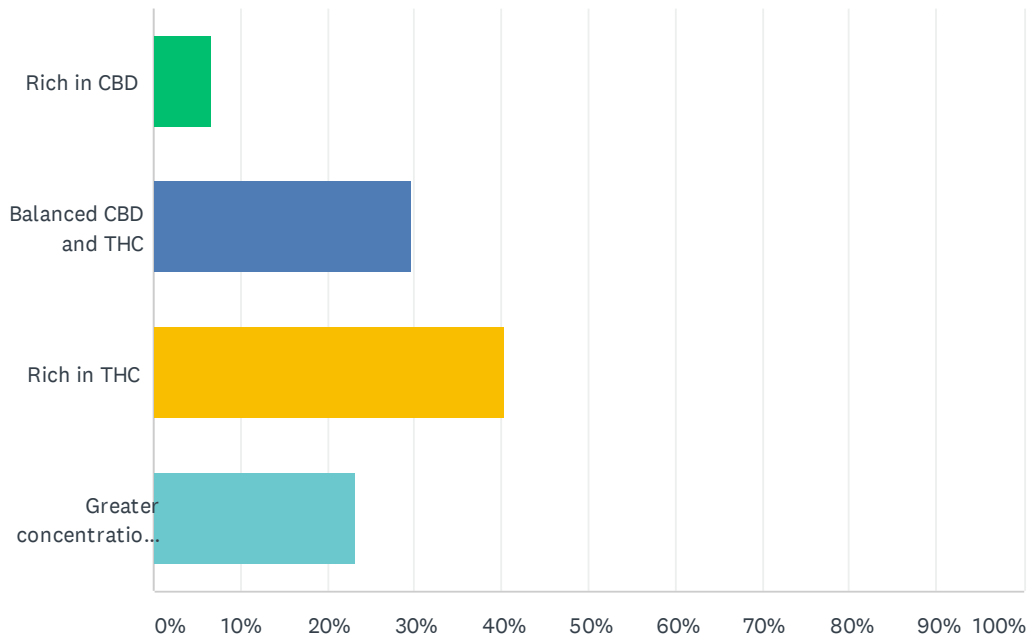
Answered: 1,125 Skipped: 9



ANSWER CHOICES	RESPONSES	
New Castle County	46.31%	521
Kent County	19.56%	220
Sussex County	25.42%	286
Six locations are enough	8.71%	98
TOTAL		1,125

Q13 When you make a purchase from a medical marijuana dispensary, you normally buy products containing:

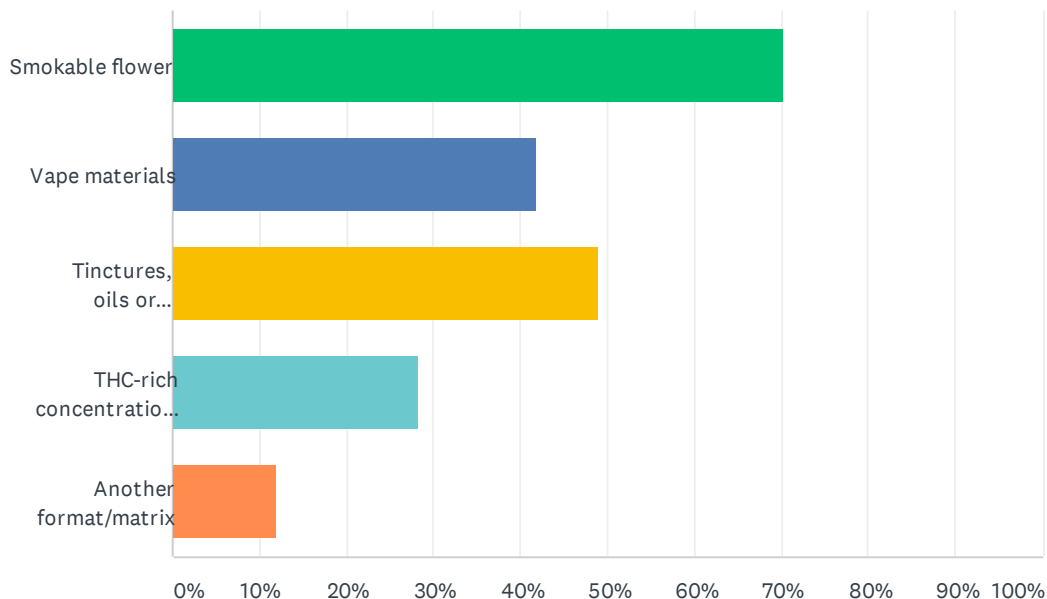
Answered: 1,124 Skipped: 10



ANSWER CHOICES	RESPONSES	
Rich in CBD	6.76%	76
Balanced CBD and THC	29.72%	334
Rich in THC	40.30%	453
Greater concentrations of THC	23.22%	261
TOTAL		1,124

Q14 When you make a purchase from a medical marijuana dispensary, you normally purchase: (choose all that apply)

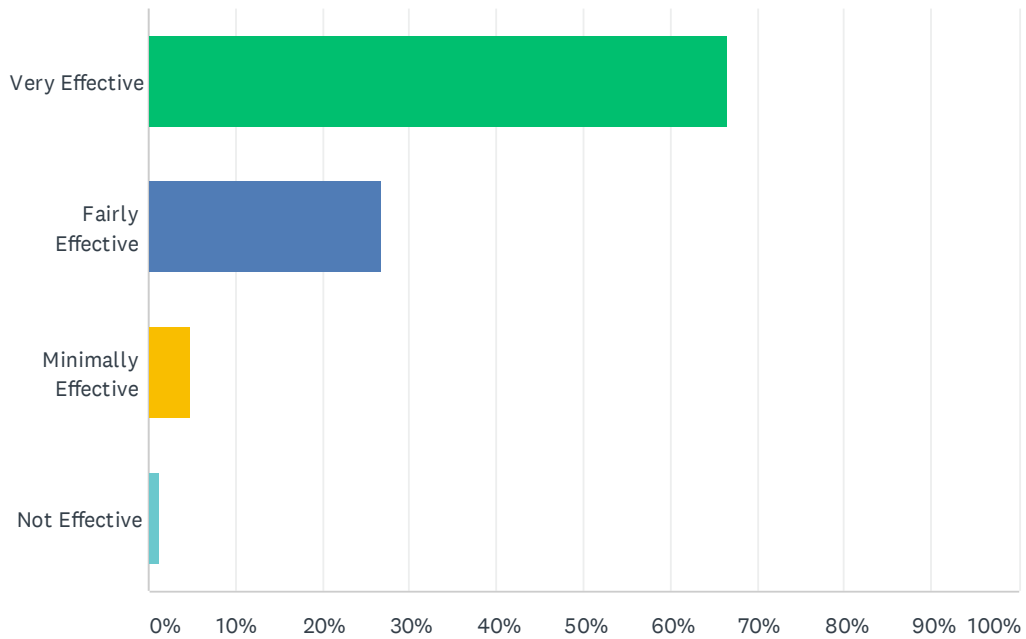
Answered: 1,130 Skipped: 4



ANSWER CHOICES	RESPONSES	
Smokable flower	70.27%	794
Vape materials	41.86%	473
Tinctures, oils or capsules	49.03%	554
THC-rich concentrations (Kief, Shatter or Hash)	28.23%	319
Another format/matrix	11.95%	135
Total Respondents: 1,130		

Q15 How effective is medical marijuana in treating your qualifying condition?

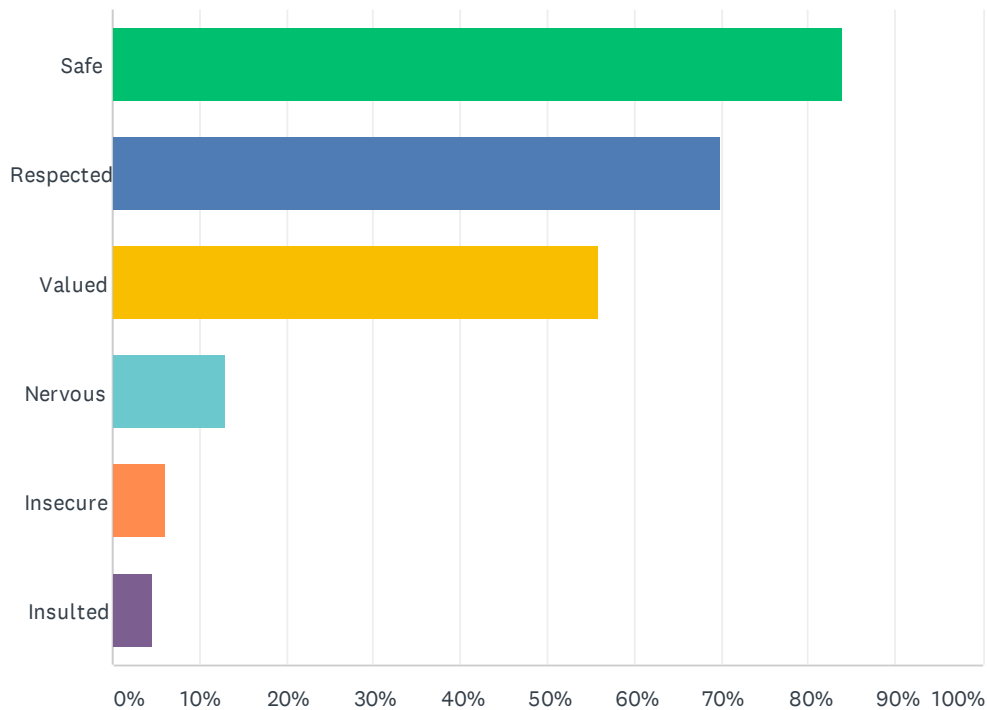
Answered: 1,131 Skipped: 3



ANSWER CHOICES	RESPONSES	
Very Effective	66.58%	753
Fairly Effective	26.88%	304
Minimally Effective	4.77%	54
Not Effective	1.24%	14
TOTAL		1,131

Q16 When you visit a dispensary, you feel: (check all that apply)

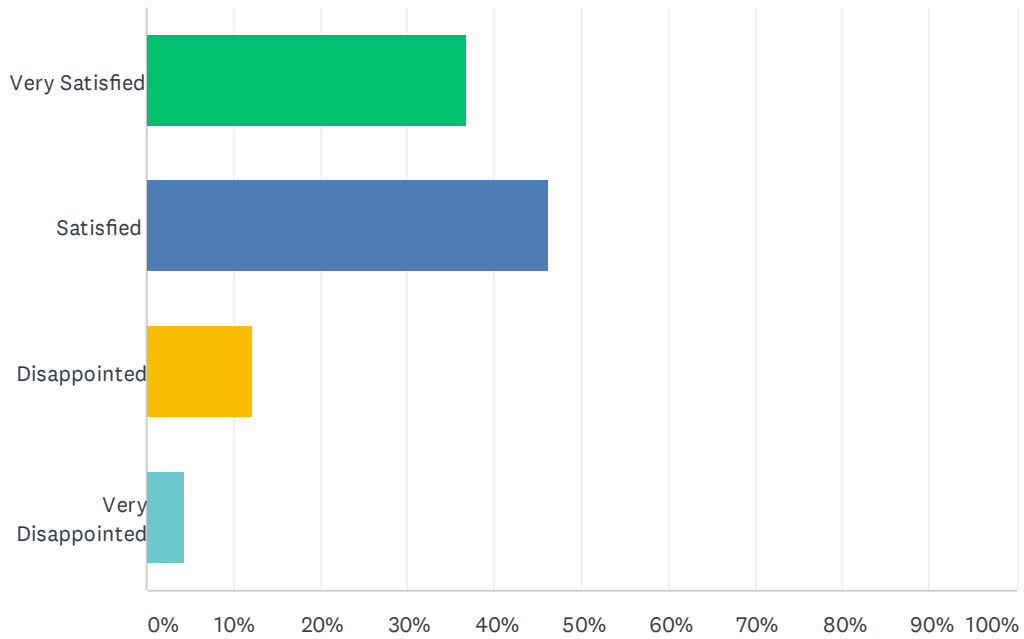
Answered: 1,130 Skipped: 4



ANSWER CHOICES	RESPONSES	
Safe	83.81%	947
Respected	69.91%	790
Valued	55.84%	631
Nervous	13.01%	147
Insecure	6.02%	68
Insulted	4.69%	53
Total Respondents: 1,130		

Q17 Thinking about the medical marijuana program, you are overall:

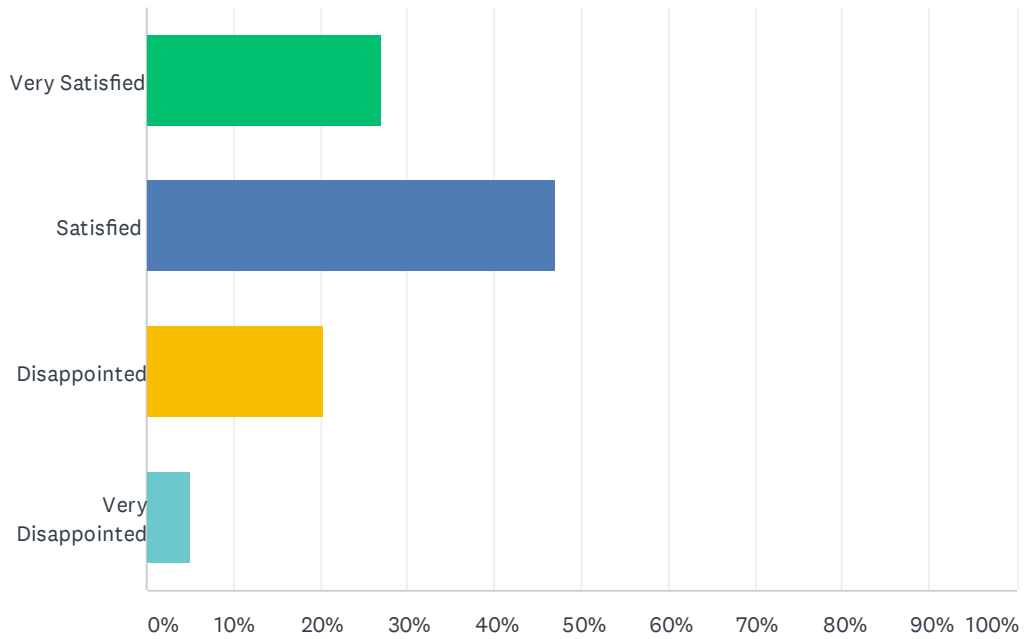
Answered: 1,131 Skipped: 3



ANSWER CHOICES	RESPONSES	
Very Satisfied	36.87%	417
Satisfied	46.15%	522
Disappointed	12.20%	138
Very Disappointed	4.33%	49
TOTAL		1,131

Q18 Thinking about the medical marijuana dispensaries, you are overall:

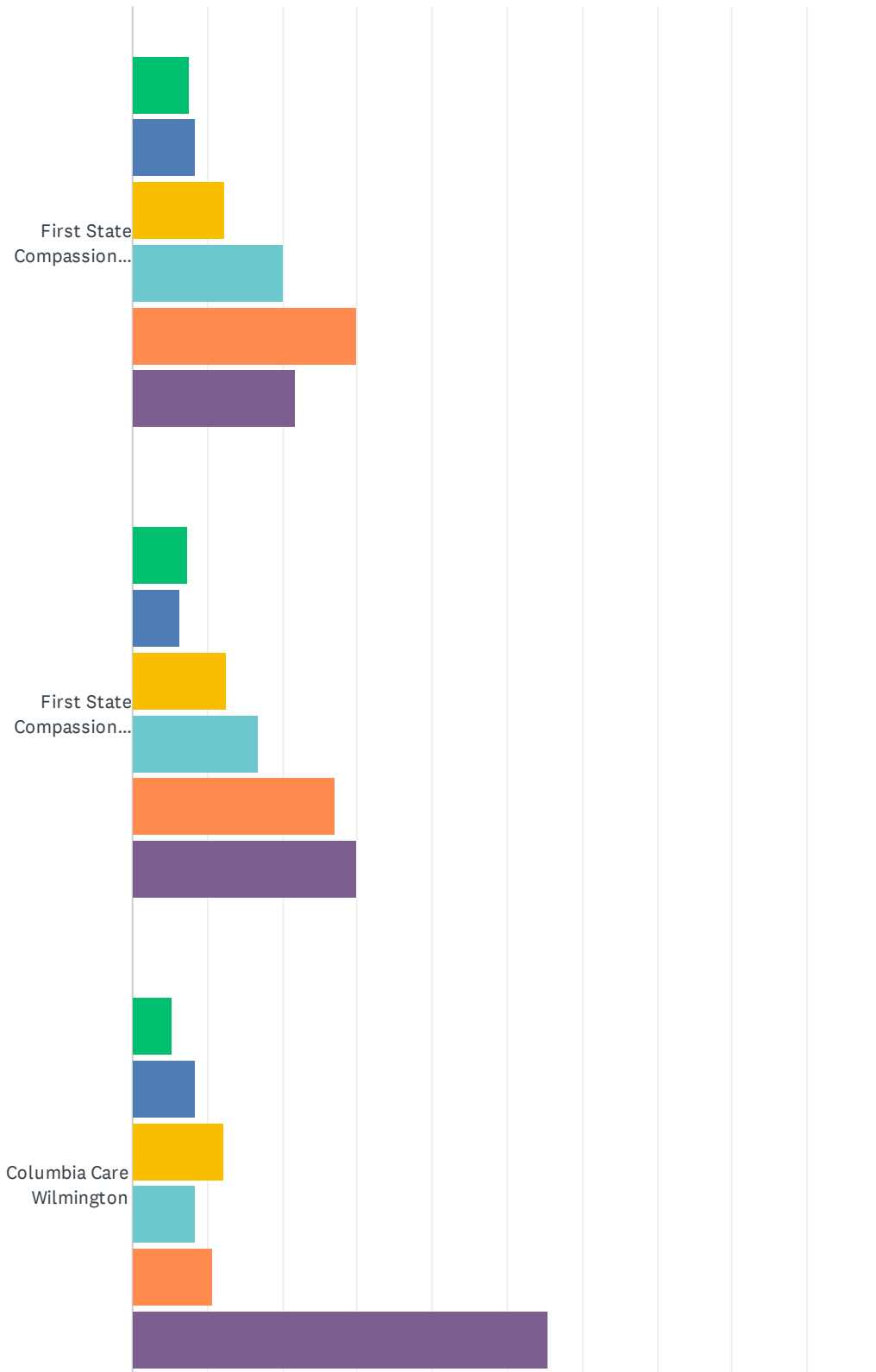
Answered: 1,128 Skipped: 6



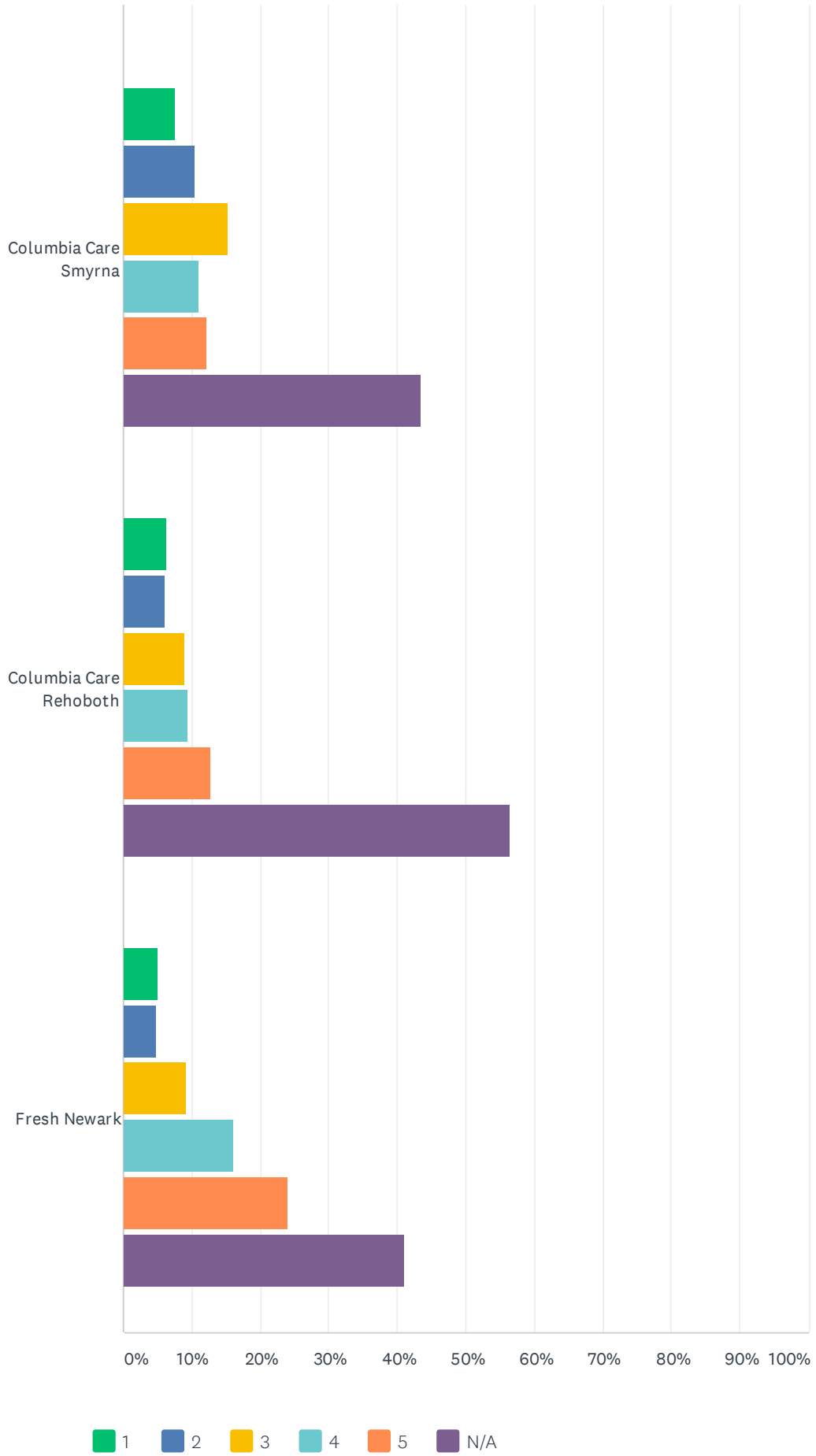
ANSWER CHOICES	RESPONSES	
Very Satisfied	27.04%	305
Satisfied	47.07%	531
Disappointed	20.30%	229
Very Disappointed	4.96%	56
TOTAL		1,128

Q19 On a scale of 1 to 5 (5 being the highest) rate the following dispensaries: (products, staff knowledge, customer service, atmosphere, security)

Answered: 1,123 Skipped: 11



Delaware Medical Marijuana Program Survey



Delaware Medical Marijuana Program Survey

	1	2	3	4	5	N/A	TOTAL
First State Compassion Wilmington	7.61% 58	8.40% 64	12.34% 94	20.08% 153	29.92% 228	21.65% 165	762
First State Compassion Lewes	7.39% 52	6.25% 44	12.64% 89	16.76% 118	26.99% 190	29.97% 211	704
Columbia Care Wilmington	5.15% 28	8.27% 45	12.13% 66	8.27% 45	10.66% 58	55.51% 302	544
Columbia Care Smyrna	7.59% 41	10.37% 56	15.37% 83	11.11% 60	12.04% 65	43.52% 235	540
Columbia Care Rehoboth	6.37% 38	6.03% 36	9.05% 54	9.38% 56	12.73% 76	56.45% 337	597
Fresh Newark	4.99% 36	4.72% 34	9.15% 66	16.09% 116	24.13% 174	40.92% 295	721