

**BOARD OF SELECTMEN**  
**September 11, 2012**  
**Needham Town Hall**  
**REVISED Agenda**

	<b>6:45</b>	Informal Meeting with Citizens <i>One or more members of the Board of Selectmen will be available between 6:45 and 7:00 p.m. for informal discussion with citizens. While not required, citizens are encouraged to call the Selectmen's Office at (781) 455-7500 extension 204 in advance to arrange for an appointment. This enables the Board to better assure opportunities for participation and respond to citizen concerns.</i>
<b>1.</b>	<b>7:00</b>	Introduce Fire Captain and Fire Lieutenant <ul style="list-style-type: none"> <li>• Paul Buckley, Fire Chief</li> </ul>
<b>2.</b>	<b>7:00</b>	Public Hearing Verizon & NSTAR- Damon Road (continuation) <ul style="list-style-type: none"> <li>• Ellen Joy, Verizon representative</li> <li>• Maureen Carroll, NSTAR representative</li> </ul>
<b>3.</b>	<b>7:00</b>	Public Hearing Verizon & NSTAR- Colby Road <ul style="list-style-type: none"> <li>• Ellen Joy, Verizon representative</li> <li>• Maureen Carroll, NSTAR representative</li> </ul>
<b>4.</b>	<b>7:10</b>	Marijuana State Ballot Question & Proposed Public Consumption By-law <ul style="list-style-type: none"> <li>• Board of Health</li> </ul>
<b>5.</b>	<b>7:30</b>	Town Manager <ul style="list-style-type: none"> <li>• Charge for Solar Committee</li> <li>• Senior Center Naming</li> <li>• Open STM Warrant</li> <li>• FY2014 – 2018 Budget Pro Forma</li> </ul>
<b>6.</b>	<b>8:10</b>	Board Discussion <ul style="list-style-type: none"> <li>• Committee Reports</li> </ul>
<b>7.</b>	<b>8:15</b>	Executive Session – Exception 2 – strategy sessions and contract negotiations with non-union personnel

**APPOINTMENTS**

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**CONSENT AGENDA      \*=Backup attached**

1.	Approve and sign integrated collective bargaining agreement between the Town and the Needham Independent Employees Association for fiscal years 2012, 2013 and 2014.
2.	Ratify Aly Raisman Proclamation dated August 26, 2012
3.	Accept donations made to the Needham Community Revitalization Trust fund for a bench in memory of Town Meeting Member, Jane Howard: Daniel Howard- \$200, Needham Cares -\$ 500, Pauline Attridge-\$100, Joanne & Peter Roth-\$25.

- 4.\* Approve a One Day Special All Alcoholic Beverages license request from Michael R. Despres of The Village Club Building, Inc. to hold an Oktoberfest event on September 22, 2012 from 3:00 p.m. to 11:00 p.m. at The Village Club, 83 Morton Street, Needham.
5. Accept the following donations made to the Needham Public Library for the period May 17, 2012- September 5, 2012: Polly Fitzgerald donated \$30.00 in memory of Cpl. Francis Karalewicz; Debbie & Bill Pryor donated 75.00 in memory of Irving Laker; Ann MacFate donated \$250.00 for the purchase of large print books in memory of Irene MacFate; The Needham Community Council gave the library a subscription to *Easy English News* (\$38.00); Keith and Lynn McClelland donated a copy of Keith's sister's mystery new book, *Threaded for Trouble* (\$7.99); Lizzy's Ice Cream donated 100 coupons for Summer Reading Club prizes (app. \$200); The library received a \$22,000.00 donation from a donor who wishes to remain anonymous; The Friends of the Needham Public Library made the following donations: \$200.00 in memory of Board Member Jim Fraylick and \$6,000.00 for audiovisual purchases; The Needham Lions Club donated \$500 for the purchase of large print books; Mrs. Raymond F. Keyes donated \$25.00 in memory of Sheila Ryan; Jay and Neeta Wadekar donated a copy of *The Age of Ananda: Conscious Evolution to the Life Divine* by Kumar S. Sharma (\$18.00); Cynthia Stern donated \$60.00 in memory of Demetria Olga Stern, for the purchase of an adult fiction book and a children's book; Paul Shore donated the following books: *ABC Chinese-English Comprehensive Dictionary* (\$67.00), and *Prisma's Swedish-English and English-Swedish Dictionary* (\$60.00); Wendy Porter of Needham Market, England, sent the library a copy of a booklet on the history of Christchurch, Needham Market, on its 350<sup>th</sup> anniversary; and Michael Stedman donated a copy of his book, *A for Argonaut* (\$14.99).
- 6.\* Water & Sewer Abatement Order #1146
7. Accept donations and sponsorships made to the Town of Needham in support of the event for Aly Raisman's parade and rally held on August 26, 2012.
- 8.\* That the Board vote to approve and authorize the Chairman to sign the RCN Institutional Network Agreement letter between the Town of Needham, RCN-BECOCOM, LLC and NSTAR Communications, Inc.
- 9\* Approve minutes from June 26, 2012 (Executive Session) and August 17, 2012 (Open Meeting).

10. Grant permission for the following residents to hold a Block Party:

Name	Address	Party Location	Date	Rain Date	Time
Tina Chin ratify	37 North Hill Avenue	Howe Road	9/8/12		4-11pm
Julie Middleton	74 Henderson St	Henderson St	9/15/12		3-10pm
Stephen Hamburger ratify	76 Grosvenor Rd	Grosvenor Rd	9/8/12	9/9/12	3-8pm
Valerie Maio ratify	15 Park Ave	Park Ave between Greendale & Mercer	9/8/12	9/9/12	12-10pm
Amy Rielly ratify	121 Newell Ave	Newell Ave closer to the	9/8/12	9/9/12	4-8pm

		intersection of Prospect			
Molly Kerrigan ratify	386 Warren St	6-21 Laurel Dr ( Lower Laurel)	9/8/12	9/9/12	4-7pm
Kathleen Phelps ratify	9 Fuller Rd	Fuller Rd	9/8/12	9/9/12	4-9pm
Beata Fernandez	7 Woodledge Rd	Corner Woodledge rd/Highgate to Highgate/Audrey Rd	9/15/12	9/22/12	3-7pm
Lisa Cherbuliez	17 Lindbergh	Lindbergh Ave at bottom of hill, between Manning and Webster	9/15/12	9/16/12	4-8pm 4-7pm
Lisa Greig	83 Valley Road	Valley Road between Peacedale and Norwich	10/27/12	10/28/12	3-6pm
Susan Pouliot	54 Eaton Road	Eaton Rd	9/22/12	9/29/12	3:30-7pm
Liza Berkman	113 Melrose Ave	Park on Melrose/Ellicott	10/13/12	10/14/12	12-5pm
Bill Gallagher	48 Hawthorn Ave	Hawthorn Ave	9/15/12	9/16/12	3-8pm
Randall Deck	45 Bennington St	Bennington St	9/15/12/	9/22/12	4-10pm
Kim Marie Nicols	12 Crescent Rd	Crescent Road between West and Union St	9/23/12		3-7pm
Joanne Crispin	46 Hillcrest	Intersection of 49 Hillside Road & Ingleside Road	9/29/12		1-6pm
Ting & John Sherry	130 Birds Hill Ave	Thornton Road & Bird Hill Ave	9/23/12	9/30/12	4-6:30pm



**Board of Selectmen  
TOWN OF NEEDHAM  
AGENDA FACT SHEET**

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**MEETING DATE: 9/11/2012**

<b>Agenda Item</b>	Introduction of Fire Officers
<b>Presenter(s)</b>	Kate Fitzpatrick, Town Manager Paul Buckley, Fire Chief

<b>1.</b>	<b>BRIEF DESCRIPTION OF TOPIC TO BE DISCUSSED</b>		
	Chief Buckley will introduce newly promoted Fire Captain Dennis Condon and newly promoted Fire Lieutenant Peter Cosgrove.		
<b>2.</b>	<b>VOTE REQUIRED BY BOARD OF SELECTMEN</b>	<b>YES</b>	<b>NO</b>
<b>3.</b>	<b>BACK UP INFORMATION ATTACHED</b>	<b>YES</b>	<b>NO</b>
	Resumes for Captain Condon and Lieutenant Cosgrove		



**Board of Selectmen  
TOWN OF NEEDHAM  
AGENDA FACT SHEET**

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**MEETING DATE: 9/11/2012**

<b>Agenda Item</b>	Continuation Public Hearing: Verizon and NSTAR Petition for Damon Road
<b>Presenter(s)</b>	Ellen Joy, Verizon and Maureen Carroll, NSTAR

<b>1.</b>	<b>BRIEF DESCRIPTION OF TOPIC TO BE DISCUSSED</b>		
<p>In continuation of its joint hearing opened on August 14<sup>th</sup>, Verizon and NSTAR will be withdrawing its petition to install an anchor on Damon Road between houses 112 and 116.</p>			
<b>2.</b>	<b>VOTE REQUIRED BY BOARD OF SELECTMEN</b>	<b>YES</b>	NO
<p><b>Suggested Motion:</b> Move that the Board of Selectmen re-open the public hearing from August 14<sup>th</sup> and accept the withdrawal of the petition to install an anchor on Damon Road between houses 112 and 116.</p>			
<b>3.</b>	<b>BACK UP INFORMATION ATTACHED</b>	<b>YES</b>	NO
<p><b>(Describe backup below)</b></p> <p style="padding-left: 40px;">a. Letter of Withdrawal</p>			



September 6, 2012

Chairman  
Board of Selectmen  
Town of Needham  
1471 Highland Avenue  
Needham, MA 02492

Verizon and Nstar will be withdrawing our petition to install an anchor on Damon Road between house numbers 112 and 116 at the next Selectmen's Hearing on Tuesday, September 11, 2012.

If you need any additional information, please contact at the number below or email.

Sincerely,

A handwritten signature in cursive script that reads "Ellen M. Joy".

Ellen M. Joy  
Verizon Right of Way Manager  
125 High Street, Oliver Tower, Floor 5  
Boston, MA 02110  
Phone: 617-743-4524  
Fax: 617-737-2771  
Email: [ellen.m.joy@verizon.com](mailto:ellen.m.joy@verizon.com)



**Board of Selectmen  
TOWN OF NEEDHAM  
AGENDA FACT SHEET**

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**MEETING DATE: 9/11/2012**

<b>Agenda Item</b>	Public Hearing: Verizon and NSTAR Petition for Colby Road
<b>Presenter(s)</b>	Ellen Joy, Verizon and Maureen Carroll, NSTAR

<b>1.</b>	<b>BRIEF DESCRIPTION OF TOPIC TO BE DISCUSSED</b>		
<p>Verizon and NSTAR requests permission to install one anchor and sidewalk guy at existing Pole #331/7. This work is necessary on Colby Road between house numbers 11 and 21 as the existing guy wire is attached to a tree that is being taken down.</p> <p>The Department of Public Works has approved this petition, based on Verizon and NSTAR's commitment to adhere to regulation that <b>all conduit installed must be 3" schedule 40 minimum; and, that when buried, the conduit must be placed at 24" below grade to the top of the conduit.</b></p>			
<b>2.</b>	<b>VOTE REQUIRED BY BOARD OF SELECTMEN</b>	<b>YES</b>	NO
<p><b>Suggested Motion:</b> Move that the Board of Selectmen approve and sign petition from Verizon and NSTAR to install one anchor and sidewalk guy at existing Pole #331/7. This work is necessary on Colby Road between house numbers 11 and 21 as the existing guy wire is attached to a tree that is being taken down.</p>			
<b>3.</b>	<b>BACK UP INFORMATION ATTACHED</b>	<b>YES</b>	NO
<p><b>(Describe backup below)</b></p> <ul style="list-style-type: none"> <li>a. Letter of Application</li> <li>b. Petition</li> <li>c. Order</li> <li>d. Petition Plan</li> <li>e. Notice Sent to Abutters</li> <li>f. List of Abutters</li> </ul>			

RECEIVED

2012 AUG 23 PM 1:51

ADMINISTRATION OFFICE  
PUBLIC WORKS DEPARTMENT  
TOWN OF NEEDHAM



August 17, 2012

Chairman  
Board of Selectmen  
Town of Needham  
1471 Highland Avenue  
Needham, MA 02492

Enclosed please find one joint petition (9AD7AV) from Verizon New England Inc. and Nstar Electric Company to install one anchor and sidewalk guy at existing Pole #331/7 on Colby Road between house numbers 11 and 13. The anchor and sidewalk guy are needed as the existing guy wire is attached to a tree that is being taken down.

Notice to abutters is required as well as a public hearing.

Sincerely,

Ellen M. Joy  
Verizon Right of Way Manager  
125 High Street, Oliver Tower, Floor 5  
Boston, MA 02110  
Phone: 617-743-4524  
Fax: 617-737-2771  
Email: [ellen.m.joy@verizon.com](mailto:ellen.m.joy@verizon.com)

enc.

OK to proceed  
note:  
pole is located  
between #11 and #13  
colby road.  
Thayer Enggr.  
9-4-12  
OK R.P. Mearns  
DPW Director  
9-4-12

PETITION FOR NEW JOINT POLE LOCATION

August 17, 2012

To the Board of Selectmen  
of Needham, Massachusetts

VERIZON NEW ENGLAND INC. and NSTAR ELECTRIC COMPANY request permission to locate pole(s), wires, cables and fixtures, including anchors, guys and other such necessary sustaining and protecting fixtures, along and across the following public way:

Colby Road

One (1) Anchor & Sidewalk Guy

The petition proposes to install one anchor & sidewalk guy at existing Pole #331/7 on Colby Road between house numbers 11 and 13. This petition is necessary in order to remove a guy wire that is attached to a tree that is coming down.

Wherefore they ask that they be granted a location for and permission to erect and maintain pole(s), wires and cables, together with anchors, guys and other such sustaining and protecting fixtures as they may find necessary, said pole(s) to be erected substantially in accordance with the plan filed herewith marked-VERIZON No. 9AD7AV dated 08/17/2012.

Also for permission to lay and maintain underground laterals, conduits, cables and wires in the above or intersecting public ways for the purpose of making connections with such pole(s), conduits and buildings as each of said petitioners may desire for distributing purposes.

Your petitioners agree to reserve space for one crossarm at a suitable point on each of said pole(s) for the fire and police telephone and telegraph signal wires belonging to the municipality and used by it exclusively for municipal purposes.

VERIZON NEW ENGLAND INC.

By Ellen M. Jay  
Manager Rights of Way

Dated this 17<sup>th</sup> day of August, 2012.

NSTAR ELECTRIC COMPANY

By William D. [Signature]  
Supervisor Rights of Way

Dated this 22<sup>nd</sup> day of August, 2012.

## ORDER FOR JOINT POLE LOCATION

In Board of Selectmen of the Town of Needham, Massachusetts

Notice having been given and a public hearing held, as provided by law,  
**ORDERED:** That the VERIZON NEW ENGLAND INC. and NSTAR ELECTRIC COMPANY be and they are hereby granted a joint location for and permission to erect and maintain pole(s) and their respective wires and cables to be placed thereon, together with anchors, guys and other such sustaining and protecting fixtures as said companies may deem necessary, in the public way hereinafter referred to, as requested in petition of said companies dated the 17th day of August, 2012.

All construction under this order shall be in accordance with the following conditions:

Poles shall be of sound timber, and reasonably straight, and shall be set substantially at the points indicated upon the plan marked-VERIZON No. 9AD7AV dated 08/10/2012 - filed with said petition. There may be attached to said poles by said VERIZON NEW ENGLAND INC. and NSTAR ELECTRIC COMPANY wires and cables not to exceed the necessary amount of wires, cables and fixtures and all of said wires and cables shall be placed at a height of not less than 18 feet from the ground at highway crossings, and not less than 16 feet elsewhere.

The following are the public ways or parts of ways along which the poles above referred to may be erected and the number of poles which may be erected thereon under this order:

Colby Road'

One (1), Anchor & Sidewalk Guy

The petition proposes to install one jointly owned anchor and sidewalk guy at existing Pole #331/7 on Colby Road between house numbers 11 and 13. This petition is necessary in order to remove an existing guy wire that is attached to a tree that is coming down.

Also that permission be and hereby is granted to said companies to lay and maintain underground laterals, conduits, cables and wires in the above or intersecting public ways for the purpose of making connections with such poles, conduits and buildings as each may desire for distributing purposes.

I hereby certify that the foregoing order was adopted at a meeting of the Board of Selectmen of the Town of Needham, Massachusetts, held on the 11<sup>th</sup> day of September 2012.

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Clerk of Selectmen

We hereby certify that on September 11 2012, at 7 o'clock p m., at the Needham Town Hall a public hearing was held on the petition of the VERIZON NEW ENGLAND INC. and NSTAR ELECTRIC COMPANY for permission to erect the poles, wires, cables, fixtures and connections described in the order herewith recorded, and that we mailed at least seven days before said hearing a written notice of the time and place of said hearing to each of the owners of real estate (as determined by the last preceding assessment for taxation) along the ways or parts of ways upon which the companies is permitted to erect poles, wires, cables, fixtures and connections under said order. And that thereupon said order was duly adopted.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Selectmen of the Town of Needham, Massachusetts

CERTIFICATE

I hereby certify that the foregoing is a true copy of a joint location order and certificate of hearing with notice adopted by the Board of Selectmen of the Town of Needham, Massachusetts, on the \_\_\_\_\_ day of \_\_\_\_\_ 2012, and recorded with the records of location orders of said Town, Book \_\_\_\_\_, Page \_\_\_\_\_. this certified copy is made under the provisions of Chapter 166 of General Laws and any additions thereto or amendments thereof.

Attest:

\_\_\_\_\_  
Town Clerk

**PETITION PLAN  
VERIZON NEW ENGLAND INC**

Municipality: NEEDHAM, Massachusetts

No. 9AD7AV

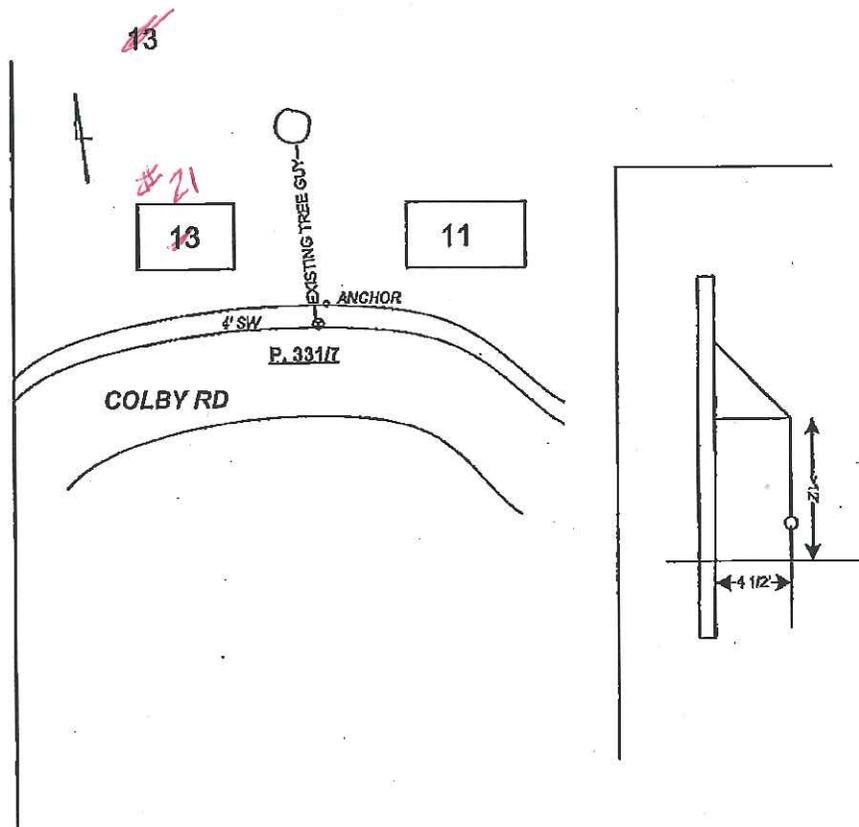
Electric-Power Co.: NSTAR

Date: 08/17/2012

Showing: PROPOSED NEW ANCHOR & SIDEWALK GUY

**Proposed:** Install anchor and guy at pole 331/7.

**Purpose:** To remove tree guy. TREE



*Drawing Not To Scale  
All Distances Are Approximate*

Prepared By: Phillippe Desroses 781 849-6313

**LEGEND**

Checked By: \_\_\_\_\_

- |  |  |
|--|--|
| - Existing J.O. Pole to Remain*                            | - Proposed J.O. Pole Location*                     |
| - Existing Verizon N.E. Inc. S.O. Pole to Remain**         | - Proposed Verizon N.E. Inc. S.O. Pole Location**  |
| - Existing Verizon N.E. Inc. Location to be Held Jointly   | - Existing Power Co. Location to be Held Jointly   |
| - Existing Verizon N.E. Inc. Pole Location to be Abandoned | - Existing Power Co. Pole Location to be Abandoned |
| - Existing Verizon N.E. Inc. Manhole                       | - Existing J.O. Pole Location to be Abandoned*     |
| - Existing Verizon N.E. Inc. Buried Cable                  | - Proposed Verizon N.E. Inc. Manhole Location      |
| - Existing Verizon N.E. Inc. Conduit                       | - Proposed Verizon N.E. Inc. Buried Cable Location |
|  | - Proposed Verizon N.E. Inc. Conduit Location      |

\*J.O. Indicates Poles Jointly-Owned by Verizon N.E., Inc. & Power Co.  
\*\*S.O. Indicates Poles Solely-Owned by Verizon N.E., Inc. or Power Co.



## NOTICE

To the Record

You are hereby notified that a joint public hearing will be held at the **Needham Town Hall, 1471 Highland Avenue, at 7:00 p.m. on September 11, 2012** upon petition of Verizon and NSTAR dated **August 17, 2012** to install one anchor and sidewalk guy at existing Pole #331/7 on Colby Road between house numbers 11 and 21. The anchor and sidewalk guy are needed as the existing guy wire is attached to a tree that is being taken down. A public hearing is required and abutters should be notified.

Gerald A. Wasserman  
Daniel P. Matthews  
John A. Bulian  
Matthew D. Borrelli  
Maurice P. Handel

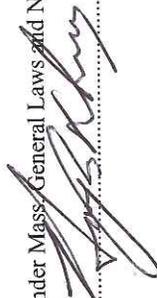
BOARD OF SELECTMEN

Dated: September 4, 2012

11-21 COLBY ST

<u>PARCEL ID</u>	<u>St No.</u>	<u>Street</u>	<u>Owner Names</u>	<u>Owner Address</u>	<u>Mailing Address</u>		
					<u>OWNER CITY</u>	<u>State</u>	<u>OWNER ZIP</u>
199/027.0-0081-0000.0	5	RAE AVE	STEINKRAUSS, KURT R & STEINKRAUSS, JULIE C.	5 RAE AVE	NEEDHAM	MA	02492
199/027.0-0082-0000.0	2	RAE AVE	CAREW, THOMAS F. & HELEN F., TRS. CAREW REALTY TRUST	2 RAE AVE	NEEDHAM	MA	02492
199/027.0-0101-0000.0	82	WOODLEDGE RD	HAGGERTY, JOHN T & HAGGERTY, JENNIFER A.	82 WOODLEDGE RD	NEEDHAM	MA	02492
199/028.0-0001-0000.0	27	COLBY ST	LONG, JAMES P & LONG, LAURA R	27 COLBY ST	NEEDHAM	MA	02492
199/028.0-0002-0000.0	21	COLBY ST	GANGE, JACQUELINE C/O LOVETT, JACQUELINE GANGE & WILLIAM	21 COLBY ST	NEEDHAM	MA	02492
199/028.0-0003-0000.0	11	COLBY ST	REILLY, ROBERT H.	11 COLBY STREET	NEEDHAM	MA	02492
199/028.0-0004-0000.0	5	COLBY ST	RIVIN, MARK & RIVIN, OLGA	5 COLBY ST	NEEDHAM	MA	02492

Certified as list of parties in interest under Mass. General Laws and Needham Zoning By-Law, to the Best of our knowledge  
For the Needham Board of Assessors.....





**Board of Selectmen  
TOWN OF NEEDHAM  
AGENDA FACT SHEET**

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**MEETING DATE: 9/11/2012**

<b>Agenda Item</b>	Board of Health Presentation
<b>Presenter(s)</b>	Dr. Jane Fogg, Ed Cosgrove, Ph.D., Dr. Janice Berns, Carol Read

<b>1.</b>	<b>BRIEF DESCRIPTION OF TOPIC TO BE DISCUSSED</b>		
	<ol style="list-style-type: none"> <li>1. Marijuana Public Consumption Ordinance – proposal</li> <li>2. Massachusetts legalization of marijuana as medicine initiative – Ballot Q3</li> </ol>		
<b>2.</b>	<b>VOTE REQUIRED BY BOARD OF SELECTMEN</b>	<b>YES</b>	<b>NO</b>
<b>3.</b>	<b>BACK UP INFORMATION ATTACHED</b>	<b>YES</b>	<b>NO</b>
	<ol style="list-style-type: none"> <li>1. Marijuana Public Consumption Ordinance</li> <li>2. NIDA Marijuana overview</li> <li>3. Public Consumption Ordinance – Needham Proposal</li> <li>4. Testimony MMS Dr. Kevin Sabet</li> <li>5. MMS Resolution</li> <li>6. Testimony Dr. Bertha Madras</li> <li>7. AG Petition 11-11</li> <li>8. Dispensary photos</li> </ol>		

## Proposed Warrant Article

### Public Consumption of Marihuana or Tetrahydrocannabinol

To see if the Town will vote to amend its General By-Laws, Article 3, Police Powers, Authority and Regulations, by adding the following section;

“3.10. Use of Controlled Substances. No person shall smoke, ingest, or otherwise use or consume marihuana or tetrahydrocannabinol (as defined in G.L. c. 94C, 1, as amended) while in or upon any street, sidewalk, public way, footway, passageway, stairs, bridge, park, playground, beach, recreation area, boat landing, public building, schoolhouse, school grounds, cemetery, parking lot, or any area owned by or under the control of the town; or in or upon any bus or other passenger conveyance operated by a common carrier; or in any place accessible to the public.

This by-law may be enforced through any lawful means in law or in equity including, but not limited to, enforcement by criminal indictment or complaint pursuant to G.L. c. 40, 21D, or by noncriminal disposition pursuant to G.L. c. 40, 21D, by any police officer. The fine for violation of this by-law shall be three hundred dollars (\$300) for each offence. Any penalty imposed under this by-law shall be in addition to any civil penalty imposed under G.L. c. 94C, 32L.”

And to amend Article 8, Section 8.2.2.4 Police Regulations, by adding the following sub-section:

“V. Use Of Controlled Substances (Section 3.10)

Each Offence \$200.”

### Summary

The purpose of this proposed by-law is to prohibit the public consumption of marihuana or tetrahydrocannabinol on town property or in any place accessible to the public. It allows the police to seek a criminal complaint with a fine of \$300 or issue a citation with a fine of \$200 per offence. This is in addition to the civil penalties that may be imposed under Mass. general

## Marijuana Public Consumption By-Law Proposal

This proposal is not an attempt to circumvent the Massachusetts law approved by voter majority in 2008 to decriminalize possession of an ounce or less of marijuana nor does it seek to alter any of the conditions or sanctions outlined in the law.

1. In proposing a bylaw to increase the fine for public consumption of marijuana, the Needham Police Department, the Needham Coalition for Youth Substance Abuse Prevention (NCYSAP), the Public Health Department and the Board of Health are acting in a manner consistent with the language and spirit of the 2008 vote to decriminalize the offense while imposing civil penalties to deter the behavior. Over 80 cities and towns in the Commonwealth have enacted a public consumption by-law.

**“Nothing contained herein shall prohibit a political subdivision of the Commonwealth from enacting ordinances or bylaws regulating or prohibiting the consumption of marihuana or tetrahydrocannabinol in public places and providing for additional penalties for the public use of marihuana or tetrahydrocannabinol.”**

2. Under the current law, “simple” possession of marijuana and public consumption of marijuana are regarded as one in the same, and subject to the same \$100 fine. Smoking marijuana in public places impacts the community; public consumption of marijuana exposes unwilling residents to involuntary second hand smoke and creates a community environment favorable to drug use. By increasing the fine from \$100 to \$300 for public marijuana use, we intend to send a clear message to the community that our interest is in protecting the health and safety of all residents of Needham, and not the choice habits of a select few.
3. It is our intention that, by increasing the fine for public marijuana use, the Town will send a clear message to youth that marijuana use is still illegal and that there are serious and relevant consequences. In 2010 23% of Needham High students reported using marijuana within the previous 30 days (9<sup>th</sup>- 9%/ 10<sup>th</sup> – 15%/11<sup>th</sup> 32.8% 12<sup>th</sup>- 37.5%), while 3% of Pollard Middle School reported use. School incident reports and student feedback show that the number of students using marijuana appears to be increasing. High school students have expressed their (mis) perceptions of the new law, believing that it is now acceptable to possess and smoke marijuana in public. 38% of Needham High School youth reported going to a party or “hanging out” where marijuana was available during the previous 30 days.  
[http://rwd1.needham.k12.ma.us/student\\_development/documents/2010/2010NEEDHAMkeyindicators.pdf](http://rwd1.needham.k12.ma.us/student_development/documents/2010/2010NEEDHAMkeyindicators.pdf)
4. Research shows that when the perception of risk and harm of substance decreases use rates increase. National data depicts the decade’s long trend of the correlation between the youth perception of risk and increases in use of marijuana. In Needham in 2010 44% of high school students reported “great risk” in daily marijuana use during the previous 30 days. Research shows that regular marijuana use in youth is correlated with increases in anxiety, depression and other mental health issues. 9% of regular marijuana users may become dependent with the risk of addiction going up to about 1 in 6 who start using marijuana in adolescence. <http://www.drugabuse.gov/publications/topics-in-brief/marijuana>
5. Opponents may argue that this proposal undermines the intent of the Needham voters, the majority of whom voted (64% Yes- 33% No- 2.6% Abstained) to decriminalize marijuana possession in 2008, however it does not. While supporters of the law may favor civil penalties over criminal proceedings in an over-burdened justice system and lasting criminal records, they do not necessarily condone the practice, especially in public locations. This is especially true in regard to youth consumption of marijuana.
  - ***Almost all parents (95%) indicated in the 2011 Needham Parent Survey (504 respondents) that they personally believe student marijuana use is never a good thing, 5% believe that occasional student marijuana use without adult supervision is OK as long as there is no driving involved.***

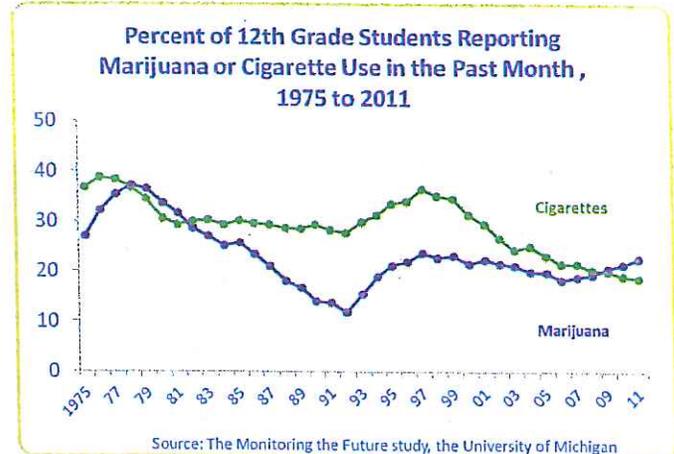
Opposition to public consumption by-laws in Massachusetts generates from a strategic national marijuana reform movement, and does not reflect the values and standards of Needham as a community.

## Marijuana—December, 2011 An Update from the National Institute on Drug Abuse

### Marijuana Abuse in the United States

In 2010, more than 29 million Americans (11.5%) aged 12 or older reported abusing marijuana within the past year—a significant increase over rates reported each year from 2002-2008. According to NIDA's Monitoring the Future study of 8<sup>th</sup>, 10<sup>th</sup>, and 12<sup>th</sup> graders, a consistent decline in marijuana use began in the mid-1990's and continued into the early 2000s. But in the past few years this trend has reversed with 5-year trends showing significant increases among 10<sup>th</sup> and 12<sup>th</sup> graders for daily, current and past year use. This year, 12.5% of 8<sup>th</sup> graders, 28.8% of 10<sup>th</sup> graders, and 36.4% of 12<sup>th</sup> graders reported past-year marijuana use. Although there were no increases

between 2010 and 2011, it appears that marijuana use continues to exceed cigarette use in these students. In 2011, 22.6% of high school seniors used marijuana in the past 30 days compared with 18.7% who smoked cigarettes. This year's survey captured **the use of synthetic marijuana**, also known as K2 or "Spice," among high school seniors for the first time. Almost 1 in 9, or 11.4%, of high school seniors reported using Spice in the past year.



### Marijuana's Effects

Marijuana is derived from a plant containing more than 400 chemical constituents. Tetrahydrocannabinol (THC) is the main psychoactive ingredient in marijuana. It binds to cannabinoid (CB) receptors, widely distributed throughout the nervous system, and other parts of the body. In the brain, CB receptors are found in high concentrations in areas that influence pleasure, memory, thought, concentration, sensory and time perception, appetite, pain, and movement coordination. This is why marijuana can have wide ranging effects, including:

- Impaired short-term memory (memory of recent events)—making it hard to learn and retain information, particularly complex tasks.
- Slowed reaction time and impaired motor coordination—throwing off athletic performance, impairing driving skills, and increasing the risk of injuries
- Altered judgment and decisionmaking—possibly leading to high-risk sexual behaviors that could lead to the spread of sexually transmitted diseases.
- Increased heart rate by 20-100%—may increase the risk of heart attack, especially in otherwise vulnerable individuals
- Altered mood—euphoria, calmness, or in high doses, anxiety, paranoia

*Exposure during critical developmental periods:* From animal research, THC exposure pre- or perinatally or during adolescence can alter brain development, particularly in areas related to mood, reward, and executive function (e.g., cognitive flexibility).

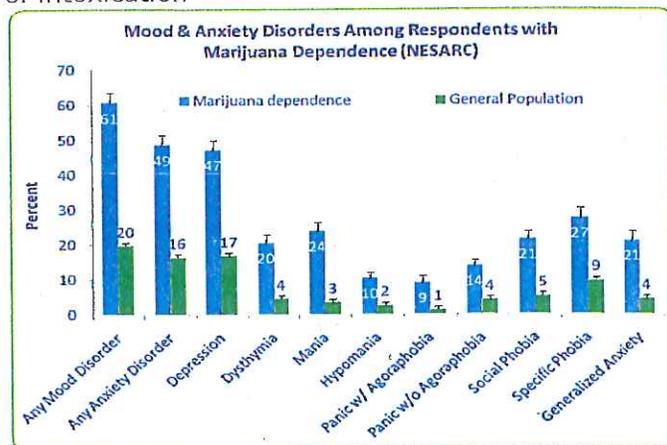
Long-term marijuana abuse can lead to:

- Addiction
- Poorer educational outcomes and job performance, diminished life satisfaction
- Respiratory problems—chronic cough, bronchitis
- Risk of psychosis in vulnerable individuals

- Cognitive impairment persisting beyond the time of intoxication

## Marijuana and Mental Illness

People who are *dependent* on marijuana frequently have other comorbid mental disorders (see figure). Population studies reveal an association between cannabis use and increased risk of schizophrenia and, to a lesser extent, depression, and anxiety. There are now sufficient data indicating that marijuana may trigger the onset or relapse of schizophrenia in people predisposed to it, perhaps also intensifying their symptoms.



## Marijuana and Addiction

Long-term marijuana use can lead to addiction; that is, people use the drug compulsively even though it interferes with family, school, work, and recreational activities. According to NSDUH, in 2010 of the estimated 7.1 million Americans classified with dependence on or abuse of illicit drugs, nearly 4.5 million were dependent on or abused marijuana. Research has shown that approximately 9% of people who use marijuana may become dependent. The risk of addiction goes up to about 1 in 6 among those who start using as adolescents, and 25-50% of daily users. In 2009, 18% of people entering drug abuse treatment programs reported marijuana as their primary drug of abuse (70% of those aged 12-14; and 72% of those 15-17), representing more than 350,000 admissions (TEDS, 2009). Along with craving, withdrawal symptoms such as irritability, sleeping problems, and anxiety can make it difficult for long-term marijuana smokers to quit.

## Treatment for Marijuana Addiction

Behavioral interventions, including cognitive-behavioral therapy and motivational incentives (i.e., providing vouchers for goods or services to patients who remain abstinent) have shown moderate efficacy in treating marijuana dependence. Although no medications are currently available, recent discoveries about the workings of the cannabinoid system offer promise for the development of medications to ease withdrawal, block the intoxicating effects of marijuana, and prevent relapse.

## Marijuana as Medicine

The potential medicinal properties of marijuana have been the subject of substantive research and heated debate. And while marijuana is not an FDA-approved medicine, 16 states and the District of Columbia have currently legalized its medical use. Scientists have confirmed that the cannabis plant contains active ingredients with therapeutic potential for relieving pain, controlling nausea, stimulating appetite, and decreasing ocular pressure. As a result, a 1999 Institute of Medicine report concluded that further research on cannabinoid drugs and safe delivery systems was warranted.

Marijuana itself is an unlikely medication candidate for several reasons: (1) it is an unpurified plant containing numerous chemicals with unknown health effects; (2) it is typically consumed by smoking, further contributing to potential adverse effects; and (3) its cognitive impairing effects may limit its utility. The promise lies instead in designing tailored medications, developed from marijuana's active components, for specific conditions or symptoms with improved risk/benefit profiles. Scientists are actively engaged in this pursuit and hope to bring to market a new generation of safe and effective medications that avoid the adverse effects of smoked marijuana.

For more information please visit NIDA on the web at [www.drugabuse.gov](http://www.drugabuse.gov) or contact:

Public Information and Liaison Branch  
Office of Science Policy and Communications  
Phone 301-443-1124/Fax 301-443-7397  
[information@nida.nih.gov](mailto:information@nida.nih.gov)

**NIDA** NATIONAL INSTITUTE ON DRUG ABUSE



## MASSACHUSETTS MEDICAL SOCIETY

EVERY PHYSICIAN MATTERS, EACH PATIENT COUNTS.

# MMS House Votes to Oppose Legalization of Medicinal Marijuana

May 19, 2012

Contact:  
Richard P. Gulla  
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rgulla@mms.org

Boston/Waltham, Mass. -- May 19, 2012 -- Opposition to the legalization of medicinal marijuana in the absence of scientific studies that demonstrate its safety and efficacy led the list of resolutions adopted by physicians of the Massachusetts Medical Society at the organization's annual meeting of its House of Delegates on Saturday, May 19 in Boston.

The Society's Annual Meeting brings together hundreds of Massachusetts physicians from across the state to examine and consider specific resolutions brought forth by members to the Society's House of Delegates, its policy-making body. Resolutions approved by the membership become policies of the organization.

The multi-part resolution on medicinal marijuana also advocated that marijuana be reclassified by the U.S. Drug Enforcement Administration so that its potential medicinal use by humans may be further studied and potentially regulated by the U.S. Food and Drug Administration; support for the development of non-smoked, reliable delivery systems of cannabis-derived and cannabinoid medications for research purposes; and support for educating residents of the Commonwealth that there is insufficient scientific information about the safety of marijuana when used for medicinal purposes.

A second, separate resolution on medicinal marijuana declared that the Medical Society "cannot support legislation intended to involve physicians in certifying, authorizing, or otherwise directing persons in the use of medicinal marijuana outside of scientific and clinical trials."

Among other resolutions adopted by the delegates:

**Physician Gift Ban:** MMS members adopted a resolution to engage in advocacy to modify the Massachusetts ban on gifts to physicians if such advocacy advances patient interest, if it conforms to the guidelines regarding industry gifts to physicians as stated by the American Medical Association and the Accreditation Council on Continuing Medical Education, and if it does not adversely affect public trust, or if the benefit to the patient from modification of the law outweighs the ethical impact of any potential adverse effect on public trust.

**Medical Liability:** Physicians voted to financially support the initiative to transform the medical liability system in the state to one of Disclosure, Apology, and Offer, an effort led by the Medical Society and announced last month by a coalition of major hospitals and healthcare organizations in the state.

**Accountable Care Organizations:** A resolution was adopted for the Medical Society to strongly advocate that all physicians practicing in the same geographic area be allowed to participate in any local accountable care organizations or integrated networks upon demonstration of compliance with non-exclusionary and transparent requirements for participation. The resolution further stated that the Medical Society will develop reasonable criteria for membership in ACOs and integrated networks.

**Employed Physicians:** Physicians approved a resolution stating that the Medical Society should become the lead association for physicians in Massachusetts who maintain employment or contractual relationships with hospitals, health systems, and other entities and to represent and address the unique needs of employed physicians in those organizations.

**Robotic Surgery:** A resolution was adopted to oppose efforts of the legislature to develop training protocols, certification, and guidelines for surgeon training and experience for the use of robotic surgery.

**Oral Health:** The Society agreed to create a Task Force on Oral Health whose objectives include engaging medical educators to add oral health into medical curriculum and to incorporate oral health into Medical Society initiatives to improve public health.

**Strategic Plan:** Delegates approved the 2012-2013 strategic priorities for the Society to include improving health care quality, access, and equity for patients, while delivering cost-effective care and promoting a sound public health system for the

1                   **MASSACHUSETTS MEDICAL SOCIETY HOUSE OF DELEGATES**

2  
3   Code:                Report: 102, A-12 (A)  
4   Title:                "Medical Marijuana"  
5   Sponsor:             Committee on Public Health  
6                         Louis Fazen III, MD, MPH  
7  
8   Referred to:         Reference Committee A  
9                         Stephen Berkowitz, MD, Chair  
10

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11 Background

12 The Massachusetts Medical Marijuana Ballot Initiative was filed by the deadline  
13 imposed by the Massachusetts Secretary of State's office, allowing it to be  
14 eligible for the November 2012 ballot. The initiative calls for legalization of the  
15 use of "medical marijuana" in the Commonwealth<sup>1</sup>. It is backed by the American  
16 Civil Liberties Union, the Massachusetts Patient Advocacy Alliance, the  
17 Massachusetts Bar Association, and the Massachusetts Public Health  
18 Association, among others<sup>2</sup>.

19  
20 As of this writing, House bill (H.R. 625), "An Act to regulate the medical use of  
21 marijuana by patients approved by physicians and certified by the department of  
22 public health", and the identical Senate bill (S. 1161), were last heard before the  
23 Joint Committee on Public Health in July 2011<sup>3</sup>. An additional bill, H.R. 3885 was  
24 scheduled for hearing on April 10. The MMS provided written testimony at those  
25 hearings, urging clinical trials on the medical use of marijuana, approved through  
26 an institutional review board process<sup>4</sup>.

27  
28 Should the general assembly choose not to enact the "medical marijuana" bills by  
29 May 1, 2012, the ballot initiative supporters must gather signatures by July 3,  
30 2012, from one half of 1% of the voters who voted in the last election<sup>5</sup>.

31  
32 The U.S. Drug Enforcement Administration (DEA) lists marijuana as a Schedule  
33 1 drug, a classification made and enforced since the 1980s. Schedule 1 drugs  
34 have no currently accepted medical use in treatment in the United States, have a  
35 high potential for abuse, and lack accepted safety for use under medical  
36 supervision. Other examples of Schedule 1 drugs include heroin, peyote,  
37 ecstasy, and LSD<sup>6</sup>.

38  
39 The American Medical Association (AMA) recommended changing the  
40 classification of marijuana to Schedule II in 2009, which would then allow for  
41 further "adequate and well-controlled studies of marijuana and related  
42 cannabinoids in patients who have serious conditions for which preclinical,

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<sup>1</sup> Kamire, Chris. "Marijuana and assisted suicide on the Massachusetts 2012 ballot?" The Lowell Sun, 22 Aug 2011

<sup>2</sup> Massachusetts Patient Advocacy Alliance [www.masspatient.org](http://www.masspatient.org) accessed 24 Feb 2012

<sup>3</sup> Available online at [www.malegislature.gov](http://www.malegislature.gov)

<sup>4</sup> Full testimony is available at [www.massmed.org](http://www.massmed.org) under "MMS Advocacy"

<sup>5</sup> Available online at [www.sec.state.ma.us/ele/eleguide/guideamend.htm](http://www.sec.state.ma.us/ele/eleguide/guideamend.htm)

<sup>6</sup> Available online at [www.justice.gov/dea](http://www.justice.gov/dea)

1 anecdotal, or controlled evidence suggests possible efficacy and the application  
2 of such results to the understanding and treatment of disease.”<sup>7</sup> Despite the DEA  
3 regulation, 16 states and the District of Columbia have legalized medical  
4 marijuana.

5  
6 The DEA recognizes the importance of the scientific method and has registered  
7 seven research initiatives to continue investigating the effects of smoked  
8 marijuana as medicine. At this time, however, neither the medical nor scientific  
9 community has found sufficient data to conclude that smoked marijuana is the  
10 best approach to dealing with medical issues<sup>8</sup>.

11  
12 The most comprehensive, scientifically rigorous review of studies of smoked  
13 marijuana was conducted by the Institute of Medicine (IOM) in 1999. The Institute  
14 did not recommend the use of smoked marijuana, but found that active  
15 ingredients in marijuana could be isolated and developed into a variety of  
16 pharmaceuticals, such as Marinol<sup>9</sup>.

17  
18 Both the AMA and the American College of Physicians have rejected the use of  
19 state legislative enactments to determine whether a medication should be made  
20 available to patients. The IOM has also rejected this approach and has called for  
21 further research into the development of non-smoked, reliable delivery systems  
22 for cannabis-derived and cannabinoid medications. Further rigorous research is  
23 needed to better understand the significance of different cannabinoid  
24 formulations and ratios, methods of administration, and dose-response  
25 relationships<sup>10</sup>.

26  
27 The American Society of Addiction Medicine prepared a white paper that  
28 opposes the use of marijuana for medicinal purposes. The paper notes that all  
29 major medical organizations support the U.S. Food and Drug Administration  
30 (FDA) approval process<sup>11</sup>.

31  
32 Cannabis has a range of effects, and may affect different patients in different  
33 ways. Some patients with serious medical conditions may find cannabis use  
34 adversely impacts their cognitive skills, or impairs their lung function. Further,  
35 increased cannabis potency heightens the risk of adverse events, especially  
36 among those who have not previously used the drug, as well as the dangers of  
37 dependence and addiction<sup>12</sup>. The risk of fire and explosion exist for bed-ridden  
38 patients using smoked marijuana. Driving under the influence of cannabis and its  
39 toxins is also of concern. Children, too, suffer the various ailments and illnesses  
40 that proponents of “medical” marijuana allege alleviate the pain. Physicians

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<sup>7</sup> Available online at [www.ama-assn.org](http://www.ama-assn.org) Report 3 of the Council on Science and Public Health (I-09), Use of Cannabis for Medicinal Purposes, (Resolutions 910, I-08; 921, I-08; and 229, A-09)

<sup>8</sup> Available online at [www.justice.gov/dea/ongoing/marinol.html](http://www.justice.gov/dea/ongoing/marinol.html) Accessed 8 Mar 2012

<sup>9</sup> Ibid

<sup>10</sup> Institute of Medicine. Marijuana and Medicine: Accessing the Science Base. [www.nap.edu/catalog/6376.html](http://www.nap.edu/catalog/6376.html)

<sup>11</sup> The role of the physician in “medical” marijuana. The American Society of Addiction Medicine policy statement. 1 Sept 2010.

<sup>12</sup> Ibid

1 oppose smoking; drawing cannabis and its components into the body should not  
2 be doctor recommended.  
3

4 "Medical marijuana," distributed pursuant to state legislation does not conform to  
5 critically important aspects of the scientific model. Without a supervised or  
6 contained growing environment for the plant, quality control and standardization  
7 are lacking. Plants can be contaminated with pesticides and microbes, and  
8 patients are not assured of a reliable and reproducible dose<sup>13</sup>.  
9

10 The effects of marijuana must be better understood, particularly in the context of  
11 chronic medical use. How does a physician define physical impairment when the  
12 patient is impaired by marijuana?  
13

14 Current MMS policy on medical marijuana states that:

- 16 • The Massachusetts Medical Society affirms its opposition to smoking  
17 marijuana for recreational purposes.
- 18 • The Massachusetts Medical Society recognizes the importance of clinical  
19 trials on the medical use of marijuana and its derivatives. All such trials  
20 should be approved by an Institutional Review Board process.  
21

22 **Recommendations:**

- 23 **1. That the Massachusetts Medical Society oppose the legalization of**  
24 **"medical" marijuana until such time that scientific studies demonstrate**  
25 **its safety and efficacy. (HP)**  
26
- 27 **2. That the Massachusetts Medical Society advocate that marijuana be**  
28 **reclassified by the U.S. Drug Enforcement Administration so that its**  
29 **potential medicinal use by humans may be further studied and**  
30 **potentially regulated by the U.S. Food and Drug Administration. (D)**  
31
- 32 **3. That the Massachusetts Medical Society support the development of**  
33 **non-smoked, reliable delivery systems for cannabis-derived and**  
34 **cannabinoid medications for research purposes. (HP)**  
35
- 36 **4. That the Massachusetts Medical Society educate the residents of the**  
37 **Commonwealth through appropriate MMS media vehicles on the**  
38 **potential risks and dangers of smoked marijuana for "medicinal"**  
39 **purposes. (D)**  
40

41 Fiscal Note: No Significant Impact  
42 (Out of Pocket Expenses)

44 FTE: Existing Staff  
45 (Staff Effort to Complete Project)

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<sup>13</sup> Ibid

*Testimony Submitted to the Massachusetts Medical Society*

*By Kevin Sabet, Ph.D.*

*Asst. Prof., University of Florida (Cambridge, MA resident) and*

*Former Senior Advisor, Obama Administration White House Office of National Drug Control Policy*

**Is marijuana medicine? Smoked marijuana is not; its isolated components and extracts can be.**

Modern science has synthesized the marijuana plant's primary psychoactive ingredient – THC – into a pill form. This pill, dronabinol (or Marinol®, its trade name) is sometimes prescribed for nausea and appetite stimulation. Another drug, Cesamet, mimics chemical structures as that naturally occur in the plant.

But when most people think of medical marijuana these days, they don't think of a pill with an isolated component of marijuana, but rather the entire smoked, vaporized, or edible version of the *whole marijuana plant*. Rather than isolate active ingredients in the plant – like we do with the opium plant when we create morphine, for example – many legalization proponents advocate vehemently for smoked marijuana to be used as a medicine. But the science on smoking any drug is clear: smoking especially highly-potent whole marijuana, is not a proper delivery method, nor do other delivery methods ensure a reliable dose. And while parts of the marijuana plant have medical value, the Institute of Medicine said in its landmark 1999 report: “Scientific data indicate the potential therapeutic value of cannabinoid drugs...smoked marijuana, however, is a crude THC delivery system that also delivers harmful substances...and should not be generally recommended...”<sup>1</sup>

It is not so unimaginable to think about other marijuana-based medications that might come to market very soon. Sativex®, an oral mouth spray developed from a blend of two marijuana extracts (one strain is high in THC and the other in CBD, which counteracts THC's psychoactive effect), has already been approved in 10 countries and is in late stages of approval in the U.S. It is clear to anyone following this story that it is possible to develop marijuana-based medications in accordance with modern scientific standards, and many more such legitimate medications are just around the corner.

Recently, the federal government has expanded its enforcement actions against commercialized “medical marijuana” operations. They have closed down dispensaries in states like California (including the “Harvard” of medical marijuana learning – the now-defunct “Oaksterdam University”), Colorado, and Oregon.

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<sup>1</sup> *Marijuana and Medicine: Assessing the Science Base*, Institute of Medicine 1999. [http://books.nap.edu/catalog.php?record\\_id=6376](http://books.nap.edu/catalog.php?record_id=6376)

## **The Medical Community is Staunchly Against Smoked Marijuana as Medicine – And Rightly So**

Marijuana itself is not an approved medicine under the Food and Drug Administration's (FDA) scientific review process. Yet 16 states and the District of Columbia have permitted marijuana to be sold as "medicine" for various conditions. Although, some of the individual, orally-administered components of the cannabis plant (*Marinol* and *Cesamet* are two such drugs available today) have medical value, smoking marijuana is an inefficient and harmful method for delivering the constituent elements that have or may have medicinal value. The FDA process for approving medicine remains the only scientific and legally recognized procedure for bringing safe and effective medications to the American public. To date, the FDA has not found smoked marijuana to be either safe or effective medicine for any condition.

In 1997, the White House Office of National Drug Control Policy (ONDCP) requested that the Institute of Medicine (IOM) conduct a review of the scientific evidence regarding the potential health benefits and risks of cannabis and its component cannabinoids. In 1999, the IOM issued the report *Cannabis and Medicine: Assessing the Science Base* that became the foundation of study into "medical marijuana." For a number of these conditions, the group concluded that there would only be limited value in pursuing further research into smoked cannabis, because effective treatments were already available. However, they did recommend new controlled studies on cannabis, since current research did not provide definitive answers on its risk/benefit profile. The consensus was that in these research studies, smoked cannabis must meet the same standards as other medications in terms of effectiveness and safety. IOM made a series of recommendations pertaining to the use of cannabis in medical treatment that revolve around the need for more research and evaluation. They concluded that: "The goal of clinical trials of smoked cannabis would not be to develop cannabis as a licensed drug but rather to serve as a first step toward the possible development of *nonsmoked rapid-onset cannabinoid delivery systems* (emphasis added)." And that: "there is little future in smoked marijuana."

No major medical association has come out in favor of smoked marijuana for widespread medical use. Further, public health organizations have weighed in:

**American Society of Addiction Medicine:** "ASAM asserts that cannabis, cannabis-based products, and cannabis delivery devices should be subject to the same standards that are applicable to other prescription medications and medical devices, and that these products should not be distributed or otherwise provided to patients unless and until such products or devices have received marketing approval from the Food and Drug Administration. ASAM rejects smoking as a means of drug delivery since it is not safe. ASAM rejects a process whereby State and local ballot initiatives approve medicines because these initiatives are being decided by individuals not qualified to make such decisions."

**American Cancer Society:** "The ACS is supportive of more research into the benefits of cannabinoids. Better and more effective treatments are needed to overcome the side effects of cancer and its treatment. The ACS does not advocate the use of inhaled marijuana or the legalization of marijuana."

**American Glaucoma Foundation:** "Marijuana, or its components administered systemically, cannot be recommended without a long term trial which evaluates the health of the optic nerve," said the editorial. "Although marijuana can lower IOP, its side effects and short duration of action, coupled with a lack of evidence that its use alters the course of glaucoma, preclude recommending this drug in any form for the treatment of glaucoma at the present time."

**National Multiple Sclerosis Society:** "Although it is clear that cannabinoids have potential both for the management of MS symptoms such as pain and spasticity, as well as for neuroprotection, the Society cannot at this time recommend that medical marijuana be made widely available to people with MS for symptom management. This decision was not only based on existing legal barriers to its use but, even more importantly, because studies to date do not demonstrate a clear benefit compared to existing symptomatic therapies and because issues of side effects, systemic effects, and long-term effects are not yet clear." -- Recommendations Regarding the Use of Cannabis in Multiple Sclerosis: Executive Summary. National Clinical Advisory Board of the National Multiple Sclerosis Society, Expert Opinion Paper, Treatment Recommendations for Physicians, April 2, 2008. <http://www.nationalmssociety.org>.

**The American Academy of Pediatrics (AAP)** believes that "[a]ny change in the legal status of marijuana, even if limited to adults, could affect the prevalence of use among adolescents." While it supports scientific research on the possible medical use of cannabinoids as opposed to smoked marijuana, it opposes the legalization of marijuana. -Committee on Substance Abuse and Committee on Adolescence. "Legalization of Marijuana: Potential Impact on Youth." *Pediatrics* Vol. 113, No. 6 ( June 6, 2004): 1825-1826. See also, Joffe, Alain, MD, MPH, and Yancy, Samuel, MD. "Legalization of Marijuana: Potential Impact on Youth." *Pediatrics* Vol. 113, No. 6 ( June 6, 2004): e632-e638h.

**The American Medical Association (AMA)** has called for more research on the subject, with the caveat that this "should not be viewed as an endorsement of state-based medical cannabis programs, the legalization of marijuana, or that scientific evidence on the therapeutic use of cannabis meets the current standards for a prescription drug product."

John Knight, director of the Center for Adolescent Substance Abuse Research at Children's Hospital Boston, recently wrote: "Marijuana has gotten a free ride of sorts among the general public, who view it as non-addictive and less impairing than other drugs. However, medical science tells a different story."

Similarly, Christian Thurstone, a board-certified Child and Adolescent Psychiatrist, an Addiction Psychiatrist, and also an Assistant Professor of Psychiatry at the University of Colorado, said:

"In the absence of credible data, this debate is being dominated by bad science and misinformation from people interested in using medical marijuana as a step to legalization for recreational use. Bypassing the FDA's well-established approval process has created a mess that especially affects children and adolescents. Young people, who are clearly being targeted with medical marijuana advertising and diversion, are most vulnerable to developing marijuana addiction and suffering from its lasting effects."

—Dr. Christian Thurstone, MD, Assistant Professor at Denver Health & Hospital Authority

### **What Would Massachusetts' Ballot Initiative Do?**

#### **Allows Virtually Anyone to Obtain Marijuana**

- HR 3885 lists some conditions for which marijuana can be obtained, but then opens it up to “other conditions as determined in writing by a qualifying patient’s physician.”

#### **Sets Up Illegal Medical Marijuana Bureaucracy Within Department of Health**

- The bill would put Massachusetts in the compromising position of violating federal law by allowing the cultivation of a Schedule I controlled substance.
- In other states, like California, Washington, Arizona, and Colorado, U.S. Justice Department officials have raided such facilities, warned state officials of imminent arrest, and threatened states with significant criminal and civil action.

#### **State Employees at Risk of Arrest**

- U.S. Department of Justice officials have threatened to arrest state employees who facilitate marijuana use for purported “medical” purposes.<sup>2</sup>

#### **Could Compromise Massachusetts' Ability to Obtain Federal Funds and Support**

- By violating Federal law, Massachusetts threatens its ability to maintain federally-mandated drug-free workplaces. Additionally, the bill could compromise the State’s ability to obtain federal funds.

#### **Allows 60-Day Supply of Marijuana Defined by the Department of Health**

- This ensures that large amounts of marijuana could be used as a defense under the guise of “medicine.”

#### **Marijuana Use Among Youth Would Increase**

- Major studies by researchers at Columbia University and elsewhere have found that states with “medical” marijuana had marijuana abuse/dependence rates almost twice as high than states without such laws.<sup>3 4</sup>

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<sup>2</sup> See the Memo to the Washington Governor from US Attorneys Durkan and Ormsby:  
<http://reason.com/assets/db/13050453232855.pdf>

- Since decriminalization passed in 2008, Massachusetts has already seen a rise in youth marijuana use and now has a 30% higher than that of the nation.<sup>5</sup>

### Raids from Federal Government

- The Obama Administration has been unambiguous in their opposition to state-based medical marijuana programs and has been routinely raiding state-sanctioned marijuana dispensaries.
- The Department of Justice released two memoranda in 2009 and 2011 stating that that “prosecution of significant traffickers in illegal drugs, including marijuana, remains a core priority” of the Department, and that current policy “was never intended to shield such activities from federal enforcement action and prosecution, even where those activities purport to comply with state law. Persons who are in the business of cultivating, selling, or distributing marijuana, and those who knowingly facilitate such activities, are in violation of the Controlled Substances Act, regardless of state law.”<sup>6</sup>

### Chronically Ill Are Not Using Existing State Programs

- Studies have shown that in California more than 95% of “medical marijuana” users were not suffering from life threatening illnesses and in one sample of over 4,000 users, 74% of people had used cocaine in their lifetime.<sup>7 8</sup>

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<sup>3</sup> Cerda, M. et al. (in press). Medical marijuana laws in 50 states: investigating the relationship between state legalization of medical marijuana and marijuana use, abuse and dependence. *Drug and Alcohol Dependence*. Found at <http://www.columbia.edu/~dsh2/pdf/MedicalMarijuana.pdf>

<sup>4</sup> Wall, M. et al (2011). Adolescent Marijuana Use from 2002 to 2008: Higher in States with Medical Marijuana Laws, Cause Still Unclear, *Annals of epidemiology*, Vol 21 issue 9 Pages 714-716.

<sup>5</sup> CDC, Youth Online, High School YRBSS, <http://apps.nccd.cdc.gov/youthonline/App/Default.aspx>

<sup>6</sup> Ogden, D. (Oct. 19, 2009). Memorandum to Selected United States Attorneys, *Investigations and Prosecutions in States Authorizing the Medical Use of Marijuana*, Department of Justice and Cole, J. (Jun. 29, 2011). Memorandum to United States Attorneys, *Guidance Regarding the Ogden Memo in Jurisdictions Seeking to Authorize Marijuana for Medical Use*, Department of Justice.

<sup>7</sup> O'Connell, T and Bou-Matar, C.B. (2007). Long term marijuana users seeking medical cannabis in California (2001–2007): demographics, social characteristics, patterns of cannabis and other drug use of 4117 applicants. *Harm Reduction Journal*, <http://www.harmreductionjournal.com/content/4/1/16>

<sup>8</sup> Nunberg, Helen; Kilmer, Beau; Pacula, Rosalie Liccardo; and Burgdorf, James R. (2011) “An Analysis of Applicants Presenting to a Medical Marijuana Specialty Practice in California,” *Journal of Drug Policy Analysis*: Vol. 4: Iss. 1, Article 1. Available at: <http://www.bepress.com/jdpa/vol4/iss1/art1>

- The average user in California was a 32-year old white male with a history of alcohol and substance abuse and no history of life-threatening illness.
- In Colorado, according to the Department of Health, only 2% of users reported cancer, and less than 1% reported HIV/AIDS as their reason for marijuana. The vast majority (94%) reported “severe pain.”<sup>9</sup>
- In Oregon, there are reports that only 10 physicians made the majority all recommendations for “medical” marijuana<sup>10</sup>, and agitation, seizures, cancer, HIV/AIDS, cachexia, and glaucoma were the last six reasons people utilized marijuana for “medical” purposes.<sup>11</sup>

### How does medical marijuana currently work in the various states?

At present in California, and in several other states, it is widely recognized that the reality of the “medical use” of marijuana is highly questionable. For payment of a small cash sum, almost anyone can obtain a physician’s “recommendation” to purchase, possess, and use marijuana for alleged medical purposes. Indeed, numerous studies have shown that the most customers of these dispensaries do not suffer from chronic, debilitating conditions such as HIV/AIDS or cancer.<sup>12 13</sup> Both sides of the argument agree that this system has essentially legalized marijuana for recreational use, at least amongst those individuals able and willing to buy a recommendation.<sup>14</sup> To date many pot dispensaries are mom and pop operations, though some act as multimillion dollar, professional companies. A recent documentary on the Discovery Channel, which examined the practices of Harborside Health Center in Oakland, California—by its own admission, the largest marijuana dispensary “on the planet,” the buds (which are distributed directly to member-patients) are merely examined visually and with a microscope. The buds are also handled by employees who do not use gloves or face masks. Steve DeAngelo, Harborside’s co-founder, states that they must “take it as it comes.” The documentary noted that some plant material is tested by Steep Hill Laboratory, but there was no evidence that

<sup>9</sup> See Colorado Department of Public Health, <http://www.cdph.state.co.us/hs/medicalmarijuana/statistics.html>

<sup>10</sup> See for example, Danko, D. (2005). Oregon Medical Marijuana Cards Abound, *The Oregonian*, January 23, 2005. Also see Oregon Medical Marijuana, Protect the Patients & Treat it Like Medicine, [http://www.oregon.gov/Pharmacy/Imports/Marijuana/Public/ORStatePolice\\_OMMALegPP.pdf?ga=t](http://www.oregon.gov/Pharmacy/Imports/Marijuana/Public/ORStatePolice_OMMALegPP.pdf?ga=t)

<sup>11</sup> Oregon Medical Marijuana Program Statistics, <http://public.health.oregon.gov/DISEASES/CONDITIONS/CHRONICDISEASE/MEDICALMARIJUANAPROGRAM/Pages/data.aspx>

<sup>12</sup> O’Connell, T and Bou-Matar, C.B. (2007). Long term marijuana users seeking medical cannabis in California (2001–2007): demographics, social characteristics, patterns of cannabis and other drug use of 4117 applicants. *Harm Reduction Journal*, <http://www.harmreductionjournal.com/content/4/1/1>

<sup>13</sup> Nunberg, Helen; Kilmer, Beau; Pacula, Rosalie Liccardo; and Burgdorf, James R. (2011) “An Analysis of Applicants Presenting to a Medical Marijuana Specialty Practice in California,” *Journal of Drug Policy Analysis*: Vol. 4: Iss. 1, Article 1. Available at: <http://www.bepress.com/jdpa/vol4/iss1/art1>

<sup>14</sup> According to Allen St. Pierre of NORML, “in California, marijuana has also been de facto legalized under the guise of medical marijuana.” See Transcript of Don Lemon CNN Television Show with Kevin Sabet and Allen St. Pierre: <http://transcripts.cnn.com/TRANSCRIPTS/0905/09/cnr.04.html>. Accessed January 22, 2012

Steep Hill's instrumentation and techniques are "validated," that its operators are properly trained and educated, that its reference standards are accurate, and that its results are replicable by other laboratories.

### What if we rescheduled marijuana?

In the wake of recent enforcement efforts by the Obama Administration, the governors of Washington, Rhode Island, and Colorado have filed a petition with the Drug Enforcement Administration (DEA) to reschedule marijuana.<sup>15</sup> Specifically, the petition asks the DEA to reclassify marijuana from Schedule I to Schedule II of the federal Controlled Substances Act (CSA). The governors contend that such rescheduling will eliminate the conflict between state and federal law and enable states to establish a "regulated and safe system to supply legitimate patients who may need medical cannabis."

The current petition takes a unique approach. It seeks to move marijuana to Schedule II "for medicinal purposes only." Marijuana advocacy organizations, such as the Marijuana Policy Project (MPP) and Americans for Safe Access (ASA) are urging other governors around the country to join onto the petition. The petition has garnered considerable publicity, but, as MPP acknowledges, "[r]escheduling is not a cure-all."<sup>16</sup> This is an understatement. Indeed, it is not even a significant step in the direction that the governors, MPP, and ASA hope to move.

Part of the confusion over the actual significance of Schedule II status stems from a misunderstanding of the interrelated, but distinct, functions of the CSA and the Food, Drug, and Cosmetic Act (FDCA). Under the FDCA, the FDA approves *specific medical products* produced by particular "innovator" (for branded products) or generic manufacturers. For example, oxycodone, an opioid, is in Schedule II. Specific products, such as OxyContin® (an extended release form), are also in Schedule II. Physicians prescribe a specific branded or generic product, in a particular dose and dosage form. So until the FDA approves a *smoked marijuana product*, it cannot be prescribed or sold in "dispensaries" for medical use. And the FDA has been clear that smoked marijuana does not pass its rigorous approval standards.

Imagine for a moment that the "medical marijuana" advocates were instead "medical opium" advocates and that various states passed laws decriminalizing (or affirmatively authorizing and regulating) the cultivation and distribution of opium plant material, i.e., opium latex or poppy straw. Even though opium latex and poppy straw **are each in Schedule II**, there would still be a conflict between such state laws and both the CSA and the FDCA. As a well-known drug reform advocacy website states: "If poppies are grown as sources for opiates, there is no question that it violates the CSA."<sup>17</sup> Furthermore, physicians would not be authorized to prescribe, nor pharmacists to dispense, dried opium latex or poppy straw.<sup>18</sup> In order to be

<sup>15</sup>Ingold, J. (Dec. 29, 2011) "Colorado Asks DEA To Reschedule Marijuana." *Denver Post* Accessed on January 20, 2012 at [http://www.denverpost.com/news/marijuana/ci\\_19636149](http://www.denverpost.com/news/marijuana/ci_19636149)

<sup>16</sup> Marijuana Policy Project, Message to Governors, Letter. (2011). Accessed on Jan. 12, 2012: <https://secure2.convio.net/mpp/site/Advocacy?cmd=display&page=UserAction&id=1079>

<sup>17</sup> [http://www.erowid.org/plants/poppy/poppy\\_law.shtml](http://www.erowid.org/plants/poppy/poppy_law.shtml)

<sup>18</sup> Both Laudanum and Paregoric (tinctures of opium) pre-existed the original Food and Drugs Act of 1906. Recently, the FDA has taken enforcement action against these products as "unapproved drugs" that have not undergone FDA trials to prove safety and efficacy, as well as for violations of Good Manufacturing Practices. See, e.g., FDA, Warning Letter, Hi-Tech Pharmacal Co., Inc (June 28, 2010),

prescribed, a specific product containing opiates would have to pass muster in the FDA approval process. Therefore, the mere act of placing herbal marijuana in Schedule II would not make it available to patients nor address the conflict between state and federal law.

### **But won't rescheduling allow for research to be done?**

No. Rescheduling is not necessary to make marijuana products available for research. A committee of the California Medical Association recently called for the rescheduling of marijuana "so it can be tested and regulated." However, it is not necessary for marijuana to be rescheduled in order for legitimate research to proceed. Schedule I status does not prevent a product from being tested and researched for potential medical use. Schedule I research certainly does go forward. In a recent pharmaceutical company-sponsored human clinical study investigating a product derived from marijuana extracts, the DEA registered approximately 30 research sites in the U.S. and also registered an importer to bring the product into the U.S. from the U.K., where it was manufactured.<sup>19</sup> And a quick search of NIH-reporter reveals more than \$14 Million of current research going forward on marijuana and medicine. Research is happening.

### **What about obtaining marijuana for research?**

Researchers wishing to conduct studies with herbal/whole plant marijuana may obtain it from the National Institutes of Health (or import formulated extracts).. Researchers who obtain grant funding from an institute of the National Institutes of Health (NIH), such as NIDA, can obtain marijuana for their study; researchers who are externally funded must undergo the equivalent of a grant review process (review of their study design by an expert committee of the Public Health Service) in order to obtain such marijuana at cost from NIDA. NIH (via the University of Mississippi's National Center for Natural Products Research) has the ability to produce standardized marijuana of varying THC potencies. Its cultivation area of five acres has been adequate to supply all marijuana-related studies to date.<sup>20</sup> In theory, NCNPR could also produce marijuana extracts, or such products could be imported from outside the US for research, as is currently the case with Sativex®.

### **What has been the result of medical marijuana in various states on drug use rates?**

An in-depth examination of medical marijuana and its relationship to the explosion in use and users came in 2012 from five epidemiological researchers at Columbia University. Using results from several large national surveys, they concluded that: "residents of states with medical

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<http://www.fda.gov/ICECI/EnforcementActions/WarningLetters/ucm219984.htm> (Paregoric). See also, FDA, Guidance for FDA Staff and Industry, "Marketed Unapproved Drugs—Compliance Policy Guide," <http://www.fda.gov/downloads/Drugs/GuidanceComplianceRegulatoryInformation/Guidances/ucm070290.pdf>.

<sup>19</sup> GW Pharmaceuticals, "Sativex Commences US Phase II/III Clinical Trial in Cancer Pain," <http://www.fda.gov/downloads/Drugs/GuidanceComplianceRegulatoryInformation/Guidances/ucm070573.pdf> (press release); DOJ, DEA, "Importer of Controlled Substances; Notice of Registration," 71 Fed. Reg. 64298 (Nov. 1, 2006).

<sup>20</sup> See DOJ, DEA, "Lyle E. Craker; Denial of Application," 74 Fed. Reg. 2101, 2104 (Jan. 14, 2009).

marijuana laws had higher odds of marijuana use and marijuana abuse/dependence than residents of states without such laws.<sup>21</sup>

States with medical marijuana laws also show much higher average marijuana use by adolescents, and lower perceptions of risk from use, than non-medical pot states.<sup>11</sup> This would seem to indicate that relaxed community norms about drug use contribute greatly to an increased prevalence of use and users, a situation resulting from the spread of an attitude that “if pot is medicine and is sanctioned by the state, then it must be safe to use by anyone.”

Medical marijuana should really only be about bringing relief to the sick and dying, and it should be done in a responsible manner that formulates the active components of the drug in a non-smoked form that delivers a defined dose. However, in most states with medical marijuana laws, it has primarily become a license for the state-sanctioned use of a drug by most anyone who desires it. Developing marijuana-based medications through the FDA process is more likely to ensure that seriously ill patients, who are being supervised by their actual treating physicians, have access to safe and reliable products.

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<sup>21</sup> Cerda, M. et al. (2011). Medical marijuana laws in 50 states: investigating the relationship between state legalization of medical marijuana and marijuana use, abuse and dependence. *Drug and Alcohol Dependence*. Found at <http://www.columbia.edu/~dsh2/pdf/MedicalMarijuana.pdf> ; Wall, M. et al (2011). Adolescent Marijuana Use from 2002 to 2008: Higher in States with Medical Marijuana Laws, Cause Still Unclear, *Annals of epidemiology*, Vol 21 issue 9 Pages 714-716.

**I strongly oppose any legislation that would legalize the use of marijuana as medicine. My reasons are outlined below. Additional information can be obtained by contacting me.**

**SMOKING AN IMPURE PRODUCT AND DELIVERY OF ANY MEDICINE BY SMOKE IS NOT MODERN MEDICINE.**

**IT RUNS COUNTER TO A 50 YEAR PUBLIC HEALTH CAMPAIGN TO END SMOKING**

- ❖ New York bans smoking in restaurants, bars, public places, 1,700 parks, on the city's 14 miles of public beaches, in pedestrian plazas (Times Square), to prevent harm associated with second hand smoke.
- ❖ Approval of marijuana smoking is a complete contradiction of this sound public health policy and a reversal of efforts to reduce smoking and second hand smoke.

**IT IS POOR PUBLIC POLICY AND MEDICAL PRACTICE TO PERMIT MARIJUANA TO BE USED AS A SMOKED OR ANY OTHER FORM FOR MEDICAL PURPOSES, IF IT IS:**

- Not FDA-approved
- Ingested by smoking of hundreds of chemicals – some hazardous
- Not subject to product liability regulations
- Exempt from quality control standards
- Not governed by dose, frequency of dosing, longitudinal effects
- Provided at unknown strengths of THC
- Self-prescribed and self-administered by the patient
- Marinol is approved
- The scientific evidence does not achieve FDA standards for safety, efficacy
- The intoxicating effects of marijuana on cognition are unacceptable
- Long term psychological, physiological effects in sick populations unknown
- Clinical trials require subjects to be experienced marijuana users
- Majority of trials do not provide side effect profile e.g. cognition

**LONG TERM USE OF MARIJUANA CAN ADVERSELY AFFECT THE MENTAL HEALTH AND HEALTH OF PEOPLE WHO USE IT DAILY FOR MEDICAL CONDITIONS.  
USE OF MARIJUANA FOR MEDICAL PURPOSES IS UNSAFE,  
POOR PUBLIC HEALTH, POOR PUBLIC POLICY AND POOR MEDICINE**

Sincerely,



Bertha K. Madras, PhD  
Professor of Psychobiology, Department of Psychiatry, Harvard Medical School/NEPRC

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**FDA IS THE *SOLE* FEDERAL AGENCY THAT APPROVES DRUGS AS SAFE AND EFFECTIVE FOR INTENDED INDICATIONS. FDA REQUIRES THAT SCHEDULED DRUGS FOR APPROVAL:**

- Are pure compound(s)
- Are produced with controlled chemistry, manufacturing, composition of matter; known shelf life
- Have reproducible and validated production methods
- Have distribution by a regulated chain of custody
- Have documented pharmacology and toxicology in animals at various doses
- Have documented human pharmacokinetics, bioavailability for a wide range of doses
- Have documented clinical microbiology
- Have proven dose response effects, efficacy, safety for all medical indications
- Have documented side effect profile
- Have in place post-approval processes to report adverse events, safety updates

**DOES MARIJUANA FULFILL FDA CRITERIA FOR DOSE REQUIREMENTS?**

- ❖ Production is not standardized
- ❖ There is no quality control; (bacteria, chemical, cleanliness, are not regulated)
- ❖ Dose is not regulated; doses can range from 2-20%
- ❖ Dosage forms unregulated: marijuana can be smoked, vaporized, baked products, teas.
- ❖ Marijuana is impure: it contains ~ 80 cannabinoids; (a) ammonia in marijuana smoke up to 20-times greater than in tobacco smoke; (b) hydrogen cyanide is 3-5 times higher than in tobacco smoke; (c) marijuana cigarette smoke contains known carcinogens and other chemicals implicated in respiratory diseases<sup>1</sup>.

**DOES MARIJUANA FULFILL FDA REQUIREMENTS FOR DRUG APPROVAL? MARIJUANA IS LISTED IN SCHEDULE I OF THE CONTROLLED SUBSTANCES ACT (CSA) THE MOST RESTRICTIVE SCHEDULE**

- The Drug Enforcement Administration (DEA) which administers the CSA, continues to support that placement and FDA concurred because marijuana met the three criteria for placement in Schedule I under 21 U.S.C. 812(b)(1)
- Marijuana has a high potential for abuse; it has no currently accepted medical use in treatment in the United States
- Lacks accepted safety for use under medical supervision.
- There is sound evidence that smoked marijuana is harmful.
- A past evaluation by HHS agencies, FDA, SAMHSA and NIDA, concluded that no sound scientific studies supported medical use of marijuana for treatment in the United States
- No animal or human data supported the safety or efficacy of marijuana for general medical use.
- There are alternative FDA-approved medications in existence for treatment of many of the proposed uses of smoked marijuana

## **FDA STATEMENT ON BALLOT INITIATIVES AND LEGISLATIVE ACTIONS FOR MARIJUANA**

- ❖ A growing number of states have passed voter referenda (or legislative actions) making smoked marijuana available for a variety of medical conditions upon a doctor's recommendation.
- ❖ These measures are inconsistent with efforts to ensure that medications undergo the rigorous scientific scrutiny of the FDA approval process and are proven safe and effective under the standards of the FD&C Act.
- ❖ Accordingly, FDA, as the federal agency responsible for reviewing the safety and efficacy of drugs, DEA as the federal agency charged with enforcing the CSA, and the Office of National Drug Control Policy, as the federal coordinator of drug control policy, do not support the use of smoked marijuana for medical purposes.

## **MARIJUANA AS "MEDICINE" IN THE PRACTICE OF MEDICINE IS MEDICAL FICTION**

- Composition of matter: completely unregulated for purity, potency, quality,
- **Medical indications: for each of the medical conditions listed in ballot initiatives or legislative actions, the evidence is absent or inadequate**
- Medical education: Medical education focuses on evidence-based diagnosis and treatment, but marijuana has no scholarly presence in medical training
- Medical practice is compromised because there are no: requirements to extract medical history or give a detailed medical exam, discuss long term treatment, effects or follow-up, provide informed consent, consult with other physicians, keep proper records that support recommending marijuana instead of safe approved alternatives, have an "in good faith" relationship with patient rather than a "pill mill", be able to identify substance abusers, addicted.
- Marijuana Production: Dispensaries had no product liability, no product regulation, no chain of custody, no accountability to physicians or their patients.

## **MARIJUANA BIOLOGY**

### **CANNABINOID SYSTEM IN THE BRAIN AND BODY AFFECTS:**

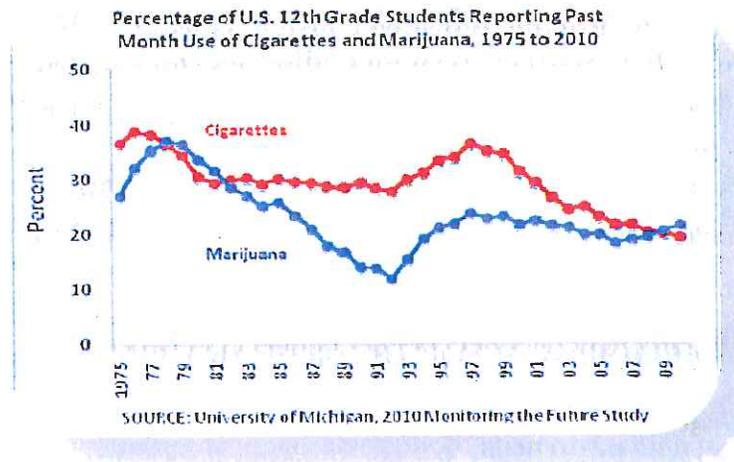
- ❖ Brain cell function
- ❖ Production of new brain cells
- ❖ Appetite, pain
- ❖ Learning, memory
- ❖ Early pregnancy, fertility, implantation sucking, maintenance of pregnancy
- ❖ Skeletal nerve terminals
- ❖ Immune system function
- ❖ Inflammatory response
- ❖ Gastrointestinal tract
- ❖ Liver function
- ❖ Cardiovascular system
- ❖ Lung airways

## MARIJUANA, ACUTELY, HAS ADVERSE EFFECTS ON BRAIN FUNCTION

- Impairs memory
- Impairs attention
- Impairs judgment
- Impairs motor coordination
- Impairs cognition
- Impairs attention
- Impairs time sense
- Impairs self-perception
- Impairs complex tasks
- Impairs sleep
- Impairs balance
- Disjointed thoughts
- Causes dizziness

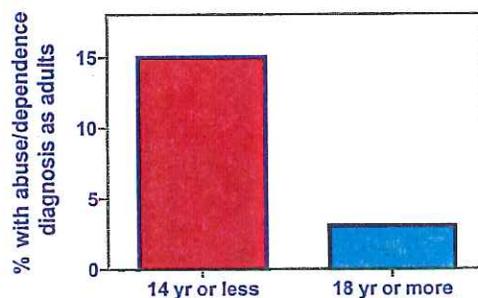
### MARIJUANA AND ADOLESCENTS

**MARIJUANA USE (PAST 30 DAYS) IS HIGHER THAN CIGARETTE SMOKING (12<sup>TH</sup> GRADERS)<sup>2</sup>**



**IF MARIJUANA IS INITIATED AT AGE 14 OR YOUNGER, PREVALENCE OF ABUSE/ADDICTION IS 5-6 TIMES HIGHER IN THE ADULT<sup>3</sup>**

Age at first use and abuse/dependence as adult



**ADOLESCENTS IN TREATMENT WHO OBTAIN MARIJUANA DIVERTED FROM A "MEDICAL" USER HAVE INCREASED CONSEQUENCES**

MEASURE	SOURCE DIVERTED	SOURCE NOT DIVERTED	CONCLUSION
	48.8%	16.6%	
Use more than 20 times/month	83.8%	56.1%**	Much higher use rates if marijuana obtained from diverted source.
Perceived risk of using	15.4%	14.6%	No differences
Friends don't disapprove regular use	79.5%	56.1%*	More associates approve of use by user with diverted source of marijuana.
Substance use problems, score	46.5	37.6**	More substance use problems if marijuana obtained from diverted source.
Other problems, score	46.3	37.6*	More problems if marijuana obtained from diverted sources.
Very easy access to marijuana	84.6%	43.9%***	More reported access if marijuana obtained from diverted source.

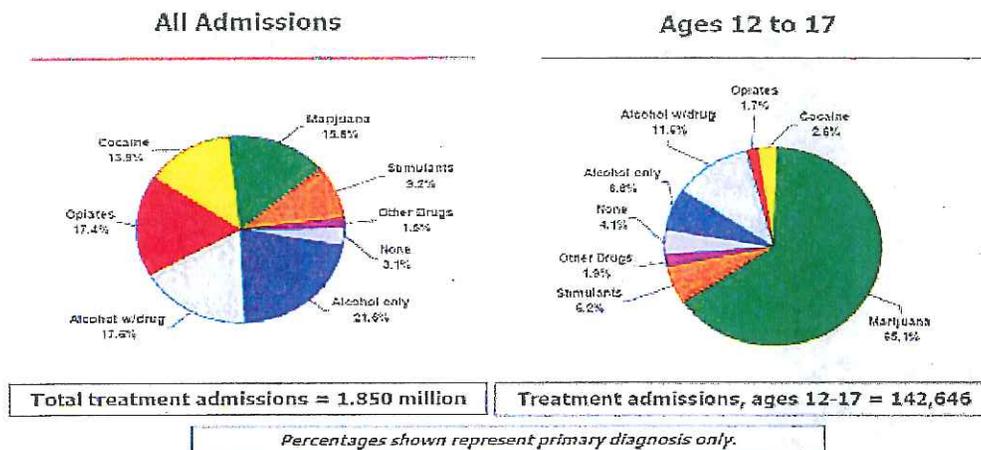
**MENTAL HEALTH PROBLEMS IN MARIJUANA-USING COLLEGE STUDENTS**

Percent endorsement of marijuana-related problems.

	Any marijuana use (n = 487)	Infrequent marijuana use (n = 323)	Frequent marijuana use (n = 164)
Problems with partner	15.4	15.1	16.1
Problems with family	12.3	8.8	19.1 <sup>b</sup>
Neglect family	10.2	6.3	17.9 <sup>b</sup>
Problems with friends	10.9	9.8	13.0
Miss days of work/class	20.2	13.8	32.7 <sup>b</sup>
Lose a job	2.9	2.2	4.3
Lower productivity	30.4	21.1	48.8 <sup>b</sup>
Medical problems	3.3	2.2	5.6
Withdrawal symptoms	4.0	1.9	8.0 <sup>b</sup>
Blackouts or flashbacks	4.9	4.1	6.8
Memory loss	24.2	15.4	41.4 <sup>b</sup>
Difficulty sleeping	11.5	9.1	16.0 <sup>b</sup>
Financial difficulties	12.9	6.0	26.5 <sup>b</sup>
Legal problems	7.5	4.4	13.6 <sup>b</sup>
Lower energy	31.2	23.9	45.7 <sup>b</sup>
Feel bad about use	17.2	16.0	21.6
Lowered self-esteem	10.2	7.9	14.8 <sup>b</sup>
Procrastinate	41.7	28.6	67.3 <sup>b</sup>
Lack self-confidence	11.9	8.8	17.9 <sup>b</sup>

Buckner JD, Ecker AH, Cohen AS. Mental health problems and interest in marijuana treatment among marijuana-using college students. *Addict Behav.* 2010 Sep;35(9):826-33. Epub 2010 May 18.

## A HIGH PROPORTION OF YOUTH ARE IN TREATMENT PRIMARILY FOR MARIJUANA, NOT ALCOHOL



Source: SAMHSA, 2005 Treatment Episode Data Set.

- ~23,770 treatment admissions were adolescents 12-14 years<sup>4</sup>
- 63% were for marijuana; 20.8% for alcohol
- 45.5% reported multiple drug use
- 24.7% had a psychiatric disorder
- 17.3% had a prior admission

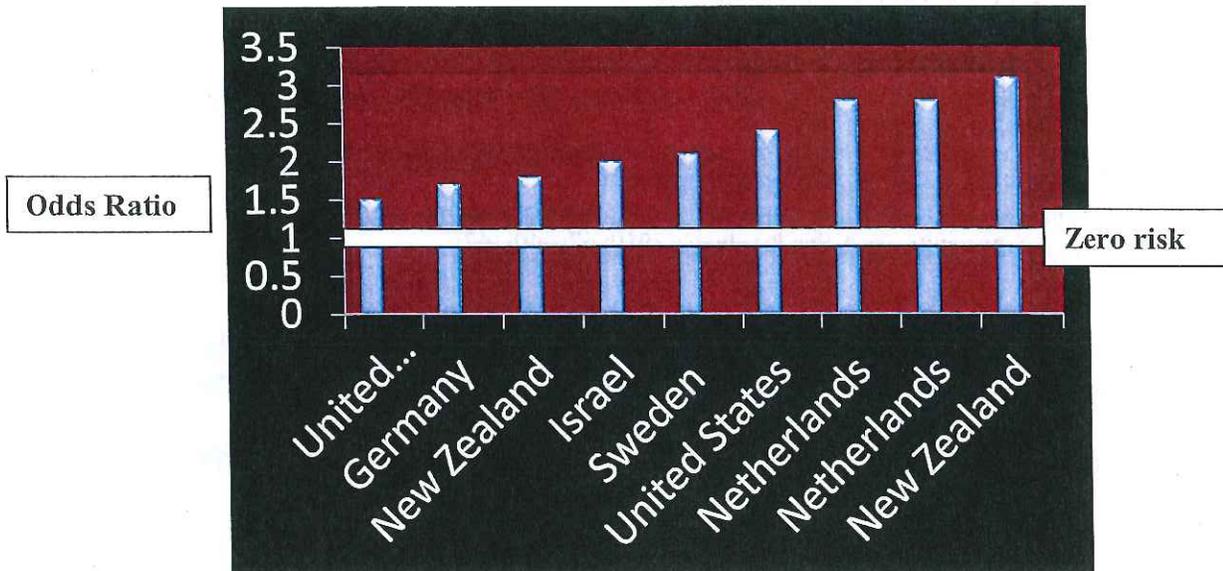
### MARIJUANA IS ADDICTIVE AND CAN RESULT IN WITHDRAWAL SYMPTOMS

- Progression to chronic use can be as rapid as nicotine, more rapid than alcohol
- Tolerance and withdrawal may reflect more severe addiction
- Progression to addiction *more rapid in youth*
- Cognitive-behavioral treatment reduces marijuana use, but only 15% remain abstinent 6-12 months after treatment
- Withdrawal from marijuana can result in:
- Irritability, Anxiety, Nervousness, Restlessness, sleep disturbances
- Aggression, Sadness, Boredom, Anger
- Weight gain, headaches, GI problems discomfort, craving, appetite change,
- Improved memory (after 12 days for 1 year)

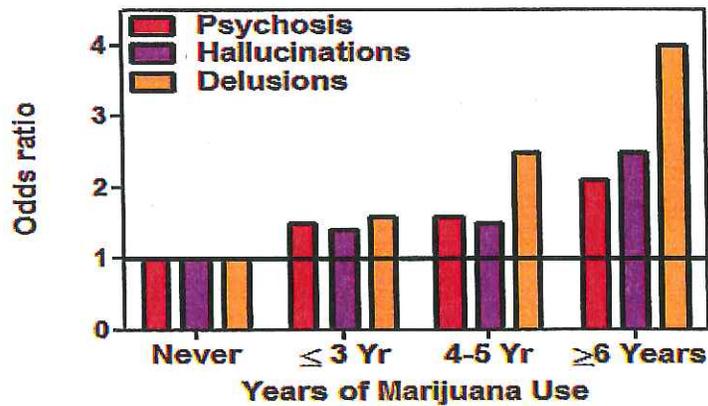
### MARIJUANA USE IS ASSOCIATED WITH BRAIN CHANGES<sup>5</sup>

- Marijuana users had bilaterally reduced volumes of hippocampus and amygdala.
- Reduced volume in brain region critical for learning and memory depended on how long the person smoked marijuana during previous 10 years.
- Positive psychotic symptoms were associated with cumulative exposure to marijuana.
- Marijuana users performed significantly worse than controls on verbal learning.
- Study suggests that heavy daily marijuana use – [such as for “medical indications”] for prolonged periods can exert harmful effects on brain tissue and mental health.

### MARIJUANA USE IS ASSOCIATED WITH INCREASED RISK FOR PSYCHOSIS<sup>6</sup>



### LENGTH OF MARIJUANA USE IS ASSOCIATED WITH INCREASED RISK FOR PSYCHOSIS, HALLUCINATIONS, DELUSIONS<sup>7</sup>



### MARIJUANA USE IS ASSOCIATED WITH INCREASED HEALTH RISKS

- Bronchitis, compromised pulmonary function
- Strokes
- Heart attack (4.8 times higher in susceptible) and angina
- Adverse effects on pregnancy and developing fetus
- Hormonal effects
- Higher rates of hospitalizations, car accidents

**References. Others available upon request**

1. Moir et al, A Comparison of Mainstream and Sidestream Marijuana and Tobacco Cigarette Smoke Produced under Two Machine Smoking Conditions. *Chem. Res. Toxicol.*, 2008, 21 (2), pp 494-502
2. University of Michigan, 2010, Monitoring the Future
3. National Survey on drug use and health, 2010, NSDUH, Sept 2011
4. The TEDS Report, SAMHSA, May 3, 2011
5. Yucel et al, Regional brain abnormalities associated with long-term heavy cannabis use. *Arch Gen Psychiatry*. 2008 Jun;65(6):694-701.
6. Adapted from Murray RM, Morrison PD, Henquet C, Di Forti MCannabis, the mind and society: the hash realities. *Nat Rev Neurosci*. 2007 Nov;8(11):885-95.
7. McGrath et al, Association Between Cannabis use and Psychosis-related outcomes using sibling pair analysis in a cohort of young adults. *Arch Gen Psychiatry* 2010; 67: 440-447

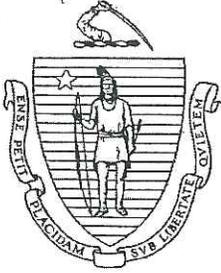
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MARTHA COAKLEY  
ATTORNEY GENERAL

# THE COMMONWEALTH OF MASSACHUSETTS OFFICE OF THE ATTORNEY GENERAL

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### Initiative Petition Information Sheet

Title of Petition An Initiative Petition for a Law for the Humanitarian Medical Use of Marijuana

Petition Number 11-11

*(to be filled in by Attorney General's Office staff)*

#### Proponents' Contact

Name Rasky Baerlein Strategic Communications, Lawrence B. Rasky  
Residential Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_  
Email lrasky@rasky.com  
Business Address 70 Franklin St., 3<sup>rd</sup> Floor  
City Boston State MA Zip 02110  
Phone 617-443-9933 Fax 617-443-9944

#### Proponents' Attorney

Name John J. Corrigan  
City Brookline State MA Zip 02446  
Phone 617-264-9800 Fax n/a  
Email jackcorrigan@aol.com

#### Optional:

Will the proponents propose a summary by the Monday, 5 days after the petition-filing deadline?  
Yes X No

Will the proponents submit a memo of law by the Friday 9 days after the petition-filing deadline?  
Yes No X

Please note that the above information will be made available to the public and particularly to possible opponents of certification. The Proponent and Proponents' Attorney (if any) will receive copies of any materials submitted by the public regarding certification.

AGO Staff Person Receiving Petition

PS  
*(to be filled in by Attorney General's Office staff)*

Date

8/2/2011  
*(to be filled in by Attorney General's Office staff)*

An Initiative Petition for a Law for the Humanitarian Medical Use of Marijuana

We, the undersigned registered voters of the Commonwealth of Massachusetts, submit this initiative petition pursuant to Amendment Article 48 of the Massachusetts Constitution:

Be it enacted by the people and by their authority,

Section 1. Purpose and Intent.

The citizens of Massachusetts intend that there should be no punishment under state law for qualifying patients, physicians and health care professionals, personal caregivers for patients, or medical marijuana treatment center agents for the medical use of marijuana, as defined herein.

Section 2. As used in this Law, the following words shall, unless the context clearly requires otherwise, have the following meanings:

(A) "Card holder" shall mean a qualifying patient, a personal caregiver, or a dispensary agent of a medical marijuana treatment center who has been issued and possesses a valid registration card.

(B) "Cultivation registration" shall mean a registration issued to a medical marijuana treatment center for growing marijuana for medical use under the terms of this Act, or to a qualified patient or personal caregiver under the terms of Section 11.

(C) "Debilitating medical condition" shall mean:

Cancer, glaucoma, positive status for human immunodeficiency virus, acquired immune deficiency syndrome (AIDS), hepatitis C, amyotrophic lateral sclerosis (ALS), Crohn's disease, Parkinson's disease, multiple sclerosis and other conditions as determined in writing by a qualifying patient's physician.

(D) "Department" shall mean the Department of Public Health of the Commonwealth of Massachusetts.

(E) "Dispensary agent" shall mean an employee, staff volunteer, officer, or board member of a non-profit medical marijuana treatment center, who shall be at least twenty-one (21) years of age.

(F) "Enclosed, locked facility" shall mean a closet, room, greenhouse, or other area equipped with locks or other security devices, accessible only to dispensary agents, patients, or personal caregivers.

(G) "Marijuana," has the meaning given "marihuana" in Chapter 94C of the General Laws.

(H) "Medical marijuana treatment center" shall mean a not-for-profit entity, as defined by Massachusetts law only, registered under this law, that acquires, cultivates, possesses, processes (including development of related products such as food, tinctures, aerosols, oils, or ointments), transfers, transports, sells, distributes, dispenses, or administers marijuana, products containing marijuana, related supplies, or educational materials to qualifying patients or their personal caregivers.

(I) "Medical use of marijuana" shall mean the acquisition, cultivation, possession, processing, (including development of related products such as food, tinctures, aerosols, oils, or ointments), transfer, transportation, sale, distribution, dispensing, or administration of marijuana, for the benefit of qualifying patients in the treatment of debilitating medical conditions, or the symptoms thereof.

(J) "Personal caregiver" shall mean a person who is at least twenty-one (21) years old who has agreed to assist with a qualifying patient's medical use of marijuana. Personal caregivers are prohibited from consuming marijuana obtained for the personal, medical use of the qualifying patient. An employee of a hospice provider, nursing, or medical facility providing care to a qualifying patient may also serve as a personal caregiver.

(K) "Qualifying patient" shall mean a person who has been diagnosed by a licensed physician as having a debilitating medical condition.

(L) "Registration card" shall mean a personal identification card issued by the Department to a qualifying patient, personal caregiver, or dispensary agent. The registration card shall verify that a physician has provided a written certification to the qualifying patient, that the patient has designated the individual as a personal caregiver, or that a medical treatment center has met the terms of Section 9 and Section 10 of this law. The registration card shall identify for the Department and law enforcement those individuals who are exempt from Massachusetts criminal and civil penalties for conduct pursuant to the medical use of marijuana.

(M) "Sixty-day supply" means that amount of marijuana that a qualifying patient would reasonably be expected to need over a period of sixty days for their personal medical use.

(N) "Written certification" means a document signed by a licensed physician, stating that in the physician's professional opinion, the potential benefits of the medical use of marijuana would likely outweigh the health risks for the qualifying patient. Such certification shall be made only in the course of a bona fide physician-patient relationship and shall specify the qualifying patient's debilitating medical condition(s).

### Section 3. Protection from State Prosecution and Penalties for Health Care Professionals

A physician, and other health care professionals under a physician's supervision, shall not be penalized under Massachusetts law, in any manner, or denied any right or privilege, for:

(a) Advising a qualifying patient about the risks and benefits of medical use of marijuana; or

(b) Providing a qualifying patient with written certification, based upon a full assessment of the qualifying patient's medical history and condition, that the medical use of marijuana may benefit a particular qualifying patient.

### Section 4. Protection From State Prosecution and Penalties for Qualifying Patients and Personal Caregivers

Any person meeting the requirements under this law shall not be penalized under Massachusetts law in any manner, or denied any right or privilege, for such actions. A qualifying patient or a personal caregiver shall not be subject to arrest or prosecution, or civil penalty, for the medical use of marijuana provided he or she:

- (a) Possesses no more marijuana than is necessary for the patient's personal, medical use, not exceeding the amount necessary for a sixty-day supply; and
- (b) Presents his or her registration card to any law enforcement official who questions the patient or caregiver regarding use of marijuana.

#### Section 5. Protection From State Prosecution and Penalties for Dispensary Agents.

A dispensary agent shall not be subject to arrest, prosecution, or civil penalty, under Massachusetts law, for actions taken under the authority of a medical marijuana treatment center, provided he or she:

- (a) Presents his or her registration card to any law enforcement official who questions the agent concerning their marijuana related activities; and
- (b) Is acting in accordance with all the requirements of this law.

#### Section 6. Protection Against Forfeiture and Arrest

(A) The lawful possession, cultivation, transfer, transport, distribution, or manufacture of medical marijuana as authorized by this law shall not result in the forfeiture or seizure of any property.

(B) No person shall be arrested or prosecuted for any criminal offense solely for being in the presence of medical marijuana or its use as authorized by this law.

#### Section 7. Limitations of Law

(A) Nothing in this law allows the operation of a motor vehicle, boat, or aircraft while under the influence of marijuana.

(B) Nothing in this law requires any health insurance provider, or any government agency or authority, to reimburse any person for the expenses of the medical use of marijuana.

(C) Nothing in this law requires any health care professional to authorize the use of medical marijuana for a patient.

(D) Nothing in this law requires any accommodation of any on-site medical use of marijuana in any place of employment, school bus or on school grounds, in any youth center, in any correctional facility, or of smoking medical marijuana in any public place.

(E) Nothing in this law supersedes Massachusetts law prohibiting the possession, cultivation, transport, distribution, or sale of marijuana for nonmedical purposes.

(F) Nothing in this law requires the violation of federal law or purports to give immunity under federal law.

(G) Nothing in this law poses an obstacle to federal enforcement of federal law.

Section 8. Department to define presumptive 60-day supply for qualifying patients.

Within 120 days of the effective date of this law, the department shall issue regulations defining the quantity of marijuana that could reasonably be presumed to be a sixty-day supply for qualifying patients, based on the best available evidence. This presumption as to quantity may be overcome with evidence of a particular qualifying patient's appropriate medical use.

Section 9. Registration of nonprofit medical marijuana treatment centers.

(A) Medical marijuana treatment centers shall register with the department.

(B) Not later than ninety days after receiving an application for a nonprofit medical marijuana treatment center, the department shall register the nonprofit medical marijuana treatment center to acquire, process, possess, transfer, transport, sell, distribute, dispense, and administer marijuana for medical use, and shall also issue a cultivation registration if:

1. The prospective nonprofit medical marijuana treatment center has submitted:

(a) An application fee in an amount to be determined by the department consistent with Section 13 of this law.

(b) An application, including:

(i) The legal name and physical address of the treatment center and the physical address of one additional location, if any, where marijuana will be cultivated.

(ii) The name, address and date of birth of each principal officer and board member.

(c) Operating procedures consistent with department rules for oversight, including cultivation and storage of marijuana only in enclosed, locked facilities.

2. None of the principal officers or board members has served as a principal officer or board member for a medical marijuana treatment center that has had its registration certificate revoked.

(C) In the first year after the effective date, the Department shall issue registrations for up to thirty-five non-profit medical marijuana treatment centers, provided that at least one treatment center shall be located in each county, and not more than five shall be located in any one county. In the event the Department determines in a future year that the number of treatment centers is insufficient to meet patient needs, the Department shall have the power to increase or modify the number of registered treatment centers.

(D) A medical treatment center registered under this section, and its dispensary agents registered under Section 10, shall not be penalized or arrested under Massachusetts law for acquiring, possessing, cultivating, processing, transferring, transporting, selling, distributing, and dispensing marijuana, products containing marijuana, and related supplies and educational materials, to qualifying patients or their personal caregivers.

Section 10. Registration of medical treatment center dispensary agents.

(A) A dispensary agent shall be registered with the Department before volunteering or working at a medical marijuana treatment center.

(B) A treatment center must apply to the Department for a registration card for each affiliated dispensary agent by submitting the name, address and date of birth of the agent.

(C) A registered nonprofit medical marijuana treatment center shall notify the department within one business day if a dispensary agent ceases to be associated with the center, and the agent's registration card shall be immediately revoked.

(D) No one shall be a dispensary agent who has been convicted of a felony drug offense. The Department is authorized to conduct criminal record checks with the Department of Criminal Justice Information to enforce this provision.

Section 11. Hardship Cultivation Registrations.

The Department shall issue a cultivation registration to a qualifying patient whose access to a medical treatment center is limited by verified financial hardship, a physical incapacity to access reasonable transportation, or the lack of a treatment center within a reasonable distance of the patient's residence. The Department may deny a registration based on the provision of false information by the applicant. Such registration shall allow the patient or the patient's personal caregiver to cultivate a limited number of plants, sufficient to maintain a 60-day supply of marijuana, and shall require cultivation and storage only in an enclosed, locked facility.

The department shall issue regulations consistent with this section within 120 days of the effective date of this law. Until the department issues such final regulations, the written recommendation of a qualifying patient's physician shall constitute a limited cultivation registration.

Section 12. Medical marijuana registration cards for qualifying patients and designated caregivers.

(A) A qualifying patient may apply to the department for a medical marijuana registration card by submitting:

1. Written certification from a physician.
2. An application, including:
  - (a) Name, address unless homeless, and date of birth.
  - (b) Name, address and date of birth of the qualifying patient's personal caregiver, if any.

Section 13. Department implementation of Regulations and Fees.

Within 120 days of the effective date of this law, the department shall issue regulations for the implementation of Sections 9 through 12 of this Law. The department shall set application fees for non-profit medical marijuana treatment centers so as to defray the administrative costs of the medical marijuana program and thereby make this law revenue neutral.

Until the approval of final regulations, written certification by a physician shall constitute a registration card for a qualifying patient. Until the approval of final regulations, a certified mail return receipt showing compliance with Section 12 (A) (2) (b) above by a qualifying patient, and a photocopy of the application, shall constitute a registration card for that patient's personal caregiver.

#### Section 14. Penalties for Fraudulent Acts.

(A) The department, after a hearing, may revoke any registration card issued under this law for a willful violation of this law. The standard of proof for revocation shall be a preponderance of the evidence. A revocation decision shall be reviewable in the Superior Court.

(B) The fraudulent use of a medical marijuana registration card or cultivation registration shall be a misdemeanor punishable by up to 6 months in the house of correction, or a fine up to \$500, but if such fraudulent use is for the distribution, sale, or trafficking of marijuana for non-medical use for profit it shall be a felony punishable by up to 5 years in state prison or up to two and one half years in the house of correction.

#### Section 15. Confidentiality

The department shall maintain a confidential list of the persons issued medical marijuana registration cards. Individual names and other identifying information on the list shall be exempt from the provisions of Massachusetts Public Records Law, M.G.L. Chapter 66, section 10, and not subject to disclosure, except to employees of the department in the course of their official duties and to Massachusetts law enforcement officials when verifying a card holder's registration.

#### Section 16. Effective Date.

This law shall be effective January 1, 2013.

#### Section 17. Severability.

The provisions of this law are severable and if any clause, sentence, paragraph or section of this measure, or an application thereof, shall be adjudged by any court of competent jurisdiction to be invalid, such judgment shall not affect, impair, or invalidate the remainder thereof but shall be confined in its operation to the clause, sentence, paragraph, section or application adjudged invalid.

We, the Undersigned registered voters of the Commonwealth of Massachusetts, having read the full text of the foregoing proposed law, do fully subscribe to its content and agree to be among the original signers of the Petition.

Richard Elliot Doblin  
3 Francis Street  
Belmont, MA 02478

Regis A. Desilva  
40 Larchwood Drive  
Cambridge, MA 02138

Alexander T. Bok  
35 Melrose Street  
Boston, MA 02116

Barbara Theran  
65 East India Row #6F  
Boston, MA 02110

Erik Wunderlich  
20 Seymour Street, #3  
Boston, MA 02131

Rebecca A. Frank  
20 Seymour Street, #3  
Boston, MA 02131

Harold Theran  
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Boston, MA 02110

Marcella M. Duda  
151 Bondsville Road  
Ware, MA 01082

Madeline E. Paz  
29 Sycamore Road  
Quincy, MA 02171

Jack Arlen Cole  
27 Austin Road  
Medford, MA 02155

Michael D. Cutler  
130 Prospect Avenue  
Northampton, MA 01060

Susan S. Poverman  
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Jesse R. Greenblatt  
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Lorraine Kerz  
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David J. Temelini  
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Joanne C. Moore  
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Robert D. Truog  
37 Trowbridge Street  
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Matthew John Allen  
8 Woodside Avenue, #1  
Boston, MA 02130

Steven A. Saling  
165 Captains Row, #203  
Chelsea, MA 02150

Chad A. O'Connor  
309 Canton Street  
Randolph, MA 02368

Anne M. Richmond  
43 Brackett St. Unit 1  
Boston, MA

John H. Halpern  
143 Hudson Road  
Stow, MA 01775

Andrea Landis Solomon  
165 Captains Row  
Chelsea, MA 02150

Timothy P. Callahan  
130 Church Street  
Milton, MA 02186

Joyce Wolf Zakim  
37 Westbourne Road  
Newton, MA 02459







Prime Green Rice Country Tricolor Mac  
100% Whole Grain Flour  
Enriched with Vitamins  
Iron and Folic Acid  
Agency - Memphis  
Exp by 01/2009





of

MEDICAL



ATM





**Board of Selectmen  
TOWN OF NEEDHAM  
AGENDA FACT SHEET**

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**MEETING DATE: 9/11/2012**

<b>Agenda Item</b>	Solar Energy Exploratory Committee
<b>Presenter(s)</b>	Kate Fitzpatrick, Town Manager

<b>1.</b>	<b>BRIEF DESCRIPTION OF TOPIC TO BE DISCUSSED</b>		
<p>The Town Manager will recommend the creation of a Solar Energy Exploratory Committee.</p>			
<b>2.</b>	<b>VOTE REQUIRED BY BOARD OF SELECTMEN</b>	<b>YES</b>	<b>NO</b>
<p><i>Suggested Motion:</i> That the Board of Selectmen vote to create a solar energy exploratory committee to evaluate options for installing solar technology on public property, including specifically the Town's closed landfill site and other parcels or structures, as appropriate. The Exploratory Committee will evaluate options, costs, benefits and implementation and operating considerations, and make recommendations to the Board of Selectmen. The Exploratory Committee shall consist of 7 members. When practicable, the committee should include members with expertise in alternative energy and energy facility installation or management. The Superintendent of Solid Waste and Recycling shall be an additional, ex officio and non-voting member of the Committee.</p>			
<b>3.</b>	<b>BACK UP INFORMATION ATTACHED</b>	<b>YES</b>	<b>NO</b>
<p>Proposed Charge and Composition – Solar Energy Exploratory Committee</p>			

**Proposed Charge**  
**Solar Energy Exploratory Committee**  
**September 11, 2012**

Charge

The charge of the Solar Energy Exploratory Committee will be to evaluate options for installing solar technology on public property, including specifically the Town's closed landfill site and other parcels or structures, as appropriate. The Exploratory Committee will evaluate options, costs, benefits and implementation and operating considerations, and make recommendations to the Board of Selectmen, as appropriate.

Composition

The Exploratory Committee shall consist of 7 members. When practicable, the committee should include members with expertise in alternative energy and energy facility installation. The Superintendent of Solid Waste and Recycling shall be an additional, ex officio and non-voting member of the Committee.



**Board of Selectmen  
TOWN OF NEEDHAM  
AGENDA FACT SHEET**

**MEETING DATE: 9/11/2012**

<b>Agenda Item</b>	The Center at the Heights – Naming Request
<b>Presenter(s)</b>	Kate Fitzpatrick, Town Manager

<b>1.</b>	<b>BRIEF DESCRIPTION OF TOPIC TO BE DISCUSSED</b>		
<p>On behalf of the Council on Aging, Board Chair Susanne Hughes has requested that the Board of Selectmen consider naming the new facility The Center at the Heights. In accordance with the Board's policy, requests for naming must be discussed at one meeting and approved at a future meeting, in order to provide an opportunity for public input.</p>			
<b>2.</b>	<b>VOTE REQUIRED BY BOARD OF SELECTMEN</b>	<b>YES</b>	<b>NO</b>
<b>3.</b>	<b>BACK UP INFORMATION ATTACHED</b>	<b>YES</b>	<b>NO</b>
<p>a. Naming Request submitted by Susanne Hughes, Chairman, Council on Aging</p> <p>b. Board of Selectmen policy – Naming of Facilities and Placement of Memorials</p>			

## Kate Fitzpatrick

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**From:** Susanne Hughes [hughes.susanne@gmail.com]  
**Sent:** Wednesday, August 29, 2012 8:52 AM  
**To:** Kate Fitzpatrick  
**Cc:** Carol DeLemos; Colleen Schaller  
**Subject:** Name for new Senior Center

Hi Kate,

As I mentioned to you earlier this summer on the phone, the COA Board is ready to forward a suggestion to the Selectmen regarding a name for the new Senior Center. The COA Board formed a sub-committee chaired by Dan Goldberg from the Board. Representatives from the Board, the Friends of Needham Elderly, Senior Center participants, and COA staff all served on the committee. The committee met twice. Names were submitted to the COA Board with a recommendation for one name in particular.

The COA Board discussed the names and agreed with the selection of the committee. This leads me to asking if you could present to the Selectment, on behalf of the COA Board, that we unanimously voted to recommend that the new Senior Center be called The Center at the Heights.

As is common in any town, it will be a challenge at first to call the "Senior Center" anything but that. Just as BIDMC is still referred to as "The Glover" by many, and the Recycling and Transfer Station is fondly known as "The Dump", so it will be for the Senior Center for a while. However, as a Board we did not see a reason to include either "Senior" or "Needham" in the name. We are looking to appeal to a broad range of seniors and their families with our brand new facility and we feel this name captures the sense of new, different, part of a neighborhood and part of a great town.

Thank you for helping us with this. If you have questions, please send them along to me or to the new COA co-chairs, Carol DeLemos and Colleen Schaller.

Susanne Hughes

COA Board

## **Board of Selectmen**

**Policy Number:** BOS 2005.001

**Policy:** Naming of Facilities and Placement of Memorials

**Date Approved:** April 13, 2005

**Approved:**  

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**Chairman, Board of Selectmen**

### ***Policy:***

1. The Board of Selectmen is responsible for the naming (or renaming) of any facilities located on parcels of land under the jurisdiction of the Board. A facility is defined as a building, portion of a building, driveway, intersection, walkway, or other parcel or portion of a parcel of land and places or natural features contained therein. Once a facility has been named, renaming will be approved only in extraordinary circumstances.
2. The Board of Selectmen is responsible for approval of the placement of memorial objects, artwork, signs or other fixtures on parcels of land under the jurisdiction of the Board. Examples include, but are not limited to, plaques, memorial or ornamental signs, sculptures, banners, benches, trees or other plantings, fountains, detached structures, and walls.

### ***Procedure:***

1. A proposal to name a facility must be submitted in writing to the Board of Selectmen and must include a summary outlining the merits of the proposal. The proponent or his or her designee will present the request to the Board of Selectmen at a regularly scheduled meeting. The Board will vote on the proposal no sooner than the next regularly scheduled meeting, after allowing a period of time for public comment. The Board of Selectmen may appoint a committee to assist with its review of any proposal.
2. A proposal for the placement of a memorial object, piece of artwork, sign, or other fixture must be submitted in writing to the Board of Selectmen and must include a summary outlining the merits of the proposal. The Board will vote on the proposal at a regularly scheduled meeting.
3. The Board of Selectmen shall review existing facility names to avoid duplication, confusing similarity or inappropriateness.

4. Approval of the placement of a memorial object, artwork, sign, or other fixture will only be made after a determination by the Board of Selectmen that the proposal will not: limit physical access to the site; endanger the peace or safety of the public; interfere with any utility or access thereto; be limited by unacceptable special restrictions, conditions or covenants; or create a significant budgetary obligation on the Town for which no provision has been made.
5. Donation of funds, memorial objects, artwork, signs, fixtures, or in-kind services must be formally accepted by the Board of Selectmen in accordance with Massachusetts General Laws.
6. Requests for naming of facilities or placement of memorials on land not under the jurisdiction of the Board will be referred to the appropriate board.



**Board of Selectmen  
TOWN OF NEEDHAM  
AGENDA FACT SHEET**

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**MEETING DATE: 9/11/2012**

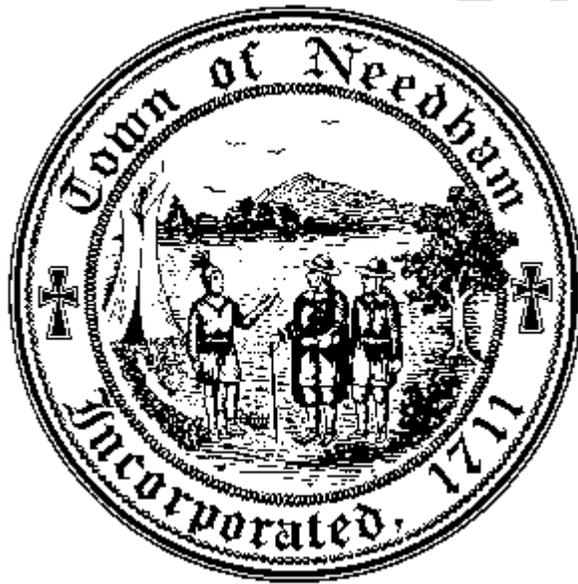
<b>Agenda Item</b>	Open Special Town Meeting Warrant
<b>Presenter(s)</b>	Kate Fitzpatrick, Town Manager

<b>1.</b>	<b>BRIEF DESCRIPTION OF TOPIC TO BE DISCUSSED</b>		
<p>The Town Manager will recommend that the Board of Selectmen open the warrant for the Special Town Meeting to be held on October 29, 2012. The Board voted to call for the Special Town Meeting on June 26, 2012. Because of the holiday observances and election that occur in November, if a second night of Town Meeting is required, it is likely to be held on Tuesday, October 30<sup>th</sup>.</p>			
<b>2.</b>	<b>VOTE REQUIRED BY BOARD OF SELECTMEN</b>	<b>YES</b>	<b>NO</b>
<p><i>Suggested Motion:</i> That the Board of Selectmen vote to open the warrant for the Special Town Meeting to be held on October 29, 2012.</p>			
<b>3.</b>	<b>BACK UP INFORMATION ATTACHED</b>	<b>YES</b>	<b>NO</b>
<p>a. Draft Special Town Meeting Warrant</p>			

Updated 9.8.12

# **SPECIAL TOWN MEETING**

## **WARRANT**



## **TOWN OF NEEDHAM**

**MONDAY, OCTOBER 29, 2012**

**7:30 P. M.**

**JAMES HUGH POWERS HALL, NEEDHAM TOWN HALL**

**1471 HIGHLAND AVENUE**

**NEEDHAM**

DRAFT 9.7.12

Additional information on particular warrant articles will be made available from time to time at [www.needhamma.gov/townmeeting](http://www.needhamma.gov/townmeeting) during the weeks leading up to the Special Town Meeting.

COMMONWEALTH OF MASSACHUSETTS

Norfolk, ss.

To either of the Constables in the Town of Needham in said County, Greetings:

In the name of the Commonwealth of Massachusetts, you are hereby required to notify and warn the inhabitants of the Town of Needham qualified to vote in elections and in Town affairs to meet at the Town Hall:

**MONDAY, THE TWENTY NINTH DAY OF OCTOBER, 2012**

at seven-thirty in the afternoon, then and there to act upon the following articles, viz:

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**HUMAN RESOURCES ARTICLES**

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**ARTICLE :        FUND COLLECTIVE BARGAINING AGREEMENT – FIRE UNION**

To see if the Town will vote to approve the funding of a collective bargaining agreement between the Town and the Needham Fire Union, and to appropriate a sum of money to defray the cost of salary and wages provided for under the agreement for fiscal year 2013; or take any other action relative thereto.

INSERTED BY:    Board of Selectmen  
FINANCE COMMITTEE RECOMMENDS THAT:  
PERSONNEL BOARD RECOMMENDS THAT:

*Article Information:*

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**ARTICLE :    ACCEPT THE PROVISIONS OF CHAPTER 176 OF THE ACTS OF 2011/SUPPLEMENTAL PENSION ALLOWANCE**

To see if the Town will vote to accept the provisions of Chapter 176 of the Acts of 2011: An Act Increasing the Supplemental Pension Allowance under M.G.L. c. 32 Section 12 to survivors of members who die while employed by the Town from an annual amount of \$3,000 to \$6,000; or take any other action relative thereto.

INSERTED BY:    Retirement Board  
FINANCE COMMITTEE RECOMMENDS THAT:

*Article Information:* Acceptance of this legislation will allow the Needham Retirement Board to increase the benefit to surviving spouses of members who die while employees. This benefit will take effect on the date that certification of acceptance is filed with the Public Employee Retirement Administration Commission and is not retroactive. Currently there are four (4) survivors who would qualify for this benefit. The increase to those survivors currently receiving the benefit would be approximately \$3,300 per year. Acceptance of this Act will have no material impact on the annual funding required by the Town to the Retirement System.

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**FINANCE ARTICLES**

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**ARTICLE :        APPROPRIATE FOR SOLAR ENERGY FEASIBILITY STUDY**

To see if the Town will vote to raise and/or transfer and appropriate a sum for a study of the feasibility of locating solar facilities within the Town, to be spent under the direction of the Town Manager, said sum to be raised from the tax levy; or take any other action relative thereto.

INSERTED BY:    Board of Selectmen  
FINANCE COMMITTEE RECOMMENDS THAT:

Article Information:

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**ARTICLE :        AMEND THE FY2013 OPERATING BUDGET**

To see if the Town will vote to amend and supersede certain parts of the fiscal year 2013 Operating Budget adopted under Article 10 of the 2012 Annual Town Meeting, by deleting the amounts of money appropriated under some of the line items and appropriating new amounts as follows:

<u>Line Item</u>	<u>Appropriation</u>	<u>Changing From:</u>	<u>Changing To:</u>
3	Group Health Insurance	\$9,973,869	\$
10	Reserve Fund	\$1,199,821	\$
15A	Finance Department Salary & Wages	\$1,512,620	\$1,600,620
15B	Finance Department Expenses	\$746,495	\$793,865
20C	Police Department Capital	\$200,000	\$228,018
24	Needham Public Schools	\$51,112,681	\$
25C	Department of Public Works Capital	\$6,500	\$126,500

And to meet this appropriation that ~~\$X~~ be raised from the FY2013 tax levy, \$28,018 be transferred from Insurance Proceeds in Excess of \$20,000; that **\$120,000** be transferred from Article 4 of the March 3, 2008 Special Town Meeting; or take any other action relative thereto.

INSERTED BY:    Finance Committee  
FINANCE COMMITTEE RECOMMENDS THAT:

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**ARTICLE 29:        RESCIND DEBT AUTHORIZATIONS**

To see if the Town will vote to rescind a portion of certain authorizations to borrow, which were approved at prior town meetings, where the purposes of the borrowing have been completed, and/or it was unnecessary to borrow the full authorization:

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or take any other action relative thereto.

INSERTED BY: Board of Selectmen  
 FINANCE COMMITTEE RECOMMENDS THAT:

*Article Information:* When a project is financed by borrowing, the project has been completed, and all the bills have been paid, the balance of the authorization that was not borrowed can be rescinded. A Town Meeting vote to rescind the balance of a borrowing prevents any further borrowing for the project, and frees up borrowing capacity. In some cases, the full appropriation for a project is not required, due to monies received from other sources, changes in scope, cost saving measures, or favorable bids.

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**ZONING / LAND USE ARTICLES**

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**ARTICLE : AMEND ZONING BY-LAW - MIXED USE 128 DIMENSIONAL CHANGES**

To see if the Town will vote to amend the Needham Zoning By-Law, as follows:

INSERTED BY: Planning Board  
 FINANCE COMMITTEE RECOMMENDS THAT:

*Article Information:*

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**ARTICLE : AMEND ZONING BY-LAW - MUNICIPAL USE HEIGHT EXEMPTION**

To see if the Town will vote to amend the Needham Zoning By-Law, as follows:

INSERTED BY: Planning Board  
 FINANCE COMMITTEE RECOMMENDS THAT:

*Article Information:*

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**ARTICLE : AMEND ZONING BY-LAW – DEFINITION OF A STRUCTURE**

To see if the Town will vote to amend the Needham Zoning By-Law, as follows:

INSERTED BY: Planning Board

FINANCE COMMITTEE RECOMMENDS THAT:

Article Information:

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**GENERAL ARTICLES / CITIZENS' PETITIONS / COMMITTEE ARTICLES**

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**ARTICLE : AMEND GENERAL BY-LAW - PUBLIC CONSUMPTION OF MARIHUANA  
(TETRAHYDRCANNABINOL)**

To see if the Town will vote to amend its General By-Laws, Article 3, Police Powers, Authority and Regulations, by inserting the following section:

**“3.10. Use of Controlled Substance** No person shall smoke, ingest, or otherwise use or consume marihuana or tetrahydrocannabinol (as defined in G.L. c. 94C, 1, as amended) while in or upon any street, sidewalk, public way, footway, passageway, stairs, bridge, park, playground, beach, recreation area, boat landing, public building, schoolhouse, school grounds, cemetery, parking lot, or any area owned by or under the control of the town; or in or upon any bus or other passenger conveyance operated by a common carrier; or in any place accessible to the public.

This by-law may be enforced through any lawful means in law or in equity including, but not limited to, enforcement by criminal indictment or complaint pursuant to G.L. c. 40, 21D, or by noncriminal disposition pursuant to G.L. c. 40, 21D, by any police officer. The criminal fine for violation of this by-law shall be three hundred dollars (\$300) for each offence. Any penalty imposed under this by-law shall be in addition to any civil penalty imposed under G.L. c. 94C, 32L.”

And to amend Article 8, Section 8.2.2.4 Police Regulations, by adding the following sub-section:

**“T. Use Of Controlled Substances (Section 3.10)**

**\$200 per offense”**; or take any other action relative thereto.

INSERTED BY: Board of Health

FINANCE COMMITTEE RECOMMENDS THAT:

Article Information: *The purpose of this proposed by-law is to prohibit the public consumption of marihuana or tetrahydrocannabinol on Town property or in any place accessible to the public. It allows the Police Department to seek a criminal complaint with a fine of \$300 or issue a non-criminal citation with a fine of \$200 per offence. This is in addition to the civil penalties that may be imposed under Mass. general Laws, Ch. 94, section 32.*

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**COMMUNITY PRESERVATION ACT ARTICLES**

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**ARTICLE : APPROPRIATE FOR SOUTH STREET HOME / CHARLES RIVER ARC**

To see if the Town will vote to raise and/or transfer and appropriate a sum for the construction by the Charles River Center of an accessible home for individuals with disabilities, to be spent under the direction of the Town Manager, said sum to be transferred from the Community Housing Reserve; or take any other action relative thereto.

INSERTED BY: Community Preservation Committee  
FINANCE COMMITTEE RECOMMENDS THAT:

*Article Information:*

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**ARTICLE : APPROPRIATE FOR RAIL TRAIL FEASIBILITY STUDY**

To see if the Town will vote to raise and/or transfer and appropriate a sum for a feasibility study of the abandoned rail corridor from Needham Junction to the Dover line for use as a shared use rail trail, to be spent under the direction of the Town Manager, said sum to be transferred from the CPA General Reserve; or take any other action relative thereto.

INSERTED BY: Community Preservation Committee  
FINANCE COMMITTEE RECOMMENDS THAT:

*Article Information:*

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**ARTICLE : APPROPRIATE FOR GREENE'S FIELD IMPROVEMENT**

To see if the Town will vote to raise and/or transfer and appropriate a sum for the renovation of Greene's Field including a play structure, to be spent under the direction of the Town Manager, said sum to be transferred from the CPA General Reserve; or take any other action relative thereto.

INSERTED BY: Community Preservation Committee  
FINANCE COMMITTEE RECOMMENDS THAT:

*Article Information:*

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**CAPITAL ARTICLES**

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**ARTICLE : APPROPRIATE FOR PUBLIC WORKS INFRASTRUCTURE PROGRAM**

To see if the Town will vote to raise and/or transfer and appropriate a sum for improvements and repairs to the Town's infrastructure including but not limited to roads, bridges, sidewalks, intersections, drains, brooks and culverts, to be spent under the direction of the Town Manager, said sum to be transferred from Article 35 of the 2011 Annual Town Meeting; or take any other action relative thereto.

INSERTED BY: Board of Selectmen  
FINANCE COMMITTEE RECOMMENDS THAT:

Article Information:

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**ARTICLE : APPROPRIATE FOR ATHLETIC FACILITY IMPROVEMENTS/WALKER GORDON**

To see if the Town will vote to raise and/or transfer and appropriate the sum of \$120,000 for athletic facility improvements, to be spent under the direction of the Town Manager, said sum to be transferred from Article 4 of the March 3, 2008 Special Town Meeting; or take any other action relative thereto.

INSERTED BY: Board of Selectmen  
FINANCE COMMITTEE RECOMMENDS THAT:

Article Information:

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**ARTICLE : APPROPRIATE FOR SALT SHED CONSTRUCTION**

To see if the Town will vote to raise and/or transfer and appropriate a sum for engineering, design, construction, and associated improvements for the construction of a salt storage shed, to be spent under the direction of the Town Manager, said sum to be \_\_\_\_\_; or take any other action relative thereto.

INSERTED BY: Board of Selectmen  
FINANCE COMMITTEE RECOMMENDS THAT:

Article Information:

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**ARTICLE : APPROPRIATE FOR RTS REMEDIATION**

To see if the Town will vote to raise and/or transfer and appropriate a sum for soil remediation at the Recycling/Transfer Station , to be spent under the direction of the Town Manager, said sum to be transferred from Article XX of the XX Annual Town Meeting; or take any other action relative thereto.

INSERTED BY: Board of Selectmen  
FINANCE COMMITTEE RECOMMENDS THAT:

Article Information:

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**ARTICLE :            APPROPRIATE FOR PROPERTY ACQUISITION**

To see if the Town will vote to raise and/or transfer and appropriate a sum for the acquisition of real property known as \_\_\_\_\_, and associated improvements thereto, to be spent under the direction of the Town Manager, and to meet this appropriation the Treasurer, with the approval of the Board of Selectmen, is authorized to borrow said sum under M.G.L., Chapter 44, Section 7; or take any other action relative thereto.

INSERTED BY: Board of Selectmen  
FINANCE COMMITTEE RECOMMENDS THAT:

*Article Information:*

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And you are hereby directed to serve this Warrant by posting copies thereof in not less than twenty public places in said Town at least fourteen (14) days before said meeting.

Hereof fail not and make due return of this warrant with your doings thereon unto our Town Clerk on or after said day and hour.

Given into our hands at Needham aforesaid this 18<sup>th</sup> day of September, 2012.

**GERALD A. WASSERMAN, *Chairman***  
**DANIEL P. MATTHEWS, *Vice Chair***  
**JOHN A. BULIAN, *Clerk***  
**MAURICE P. HANDEL**  
**MATTHEW D. BORRELLI**

*Selectmen of Needham*

A TRUE COPY  
Attest:  
Constable:

**Town Clerk's Office  
Needham, MA 02492**

**First Class Mail  
U.S. Postage Paid  
Needham, MA  
Permit No. 58224**

**ATTN: SPECIAL TOWN MEETING WARRANT**

DRAFT 9.7.12



**Board of Selectmen  
TOWN OF NEEDHAM  
AGENDA FACT SHEET**

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**MEETING DATE: 9/11/2012**

<b>Agenda Item</b>	Fiscal Year 2014 – 2018 Pro Forma Budget
<b>Presenter(s)</b>	Kate Fitzpatrick, Town Manager David Davison, Assistant Town Manager/Finance

<b>1.</b>	<b>BRIEF DESCRIPTION OF TOPIC TO BE DISCUSSED</b>		
	We will provide the Board with our five year, pro forma budget analysis for fiscal years 2014 - 2018.		
<b>2.</b>	<b>VOTE REQUIRED BY BOARD OF SELECTMEN</b>	<b>YES</b>	<b>NO</b>
<b>3.</b>	<b>BACK UP INFORMATION ATTACHED</b>	<b>YES</b>	<b>NO</b>
	a. Town of Needham General Fund Revenue and Expense Pro Forma FY 2014 – 2018 to be provided at the Board's meeting		



**Board of Selectmen  
TOWN OF NEEDHAM  
AGENDA FACT SHEET**

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**MEETING DATE: 9/11/2012**

<b>Agenda Item</b>	Committee Reports
<b>Presenter(s)</b>	Board Discussion

<b>1.</b>	<b>BRIEF DESCRIPTION OF TOPIC TO BE DISCUSSED</b>		
	<i>Board members will report on the progress and / or activities of their Committee assignments.</i>		
<b>2.</b>	<b>VOTE REQUIRED BY BOARD OF SELECTMEN</b>	YES	<b>NO</b>
<b>3.</b>	<b>BACK UP INFORMATION ATTACHED</b>	YES	<b>NO</b>
	<b>(Describe backup below)</b>		
	None		

**ONE DAY SPECIAL LICENSE  
TOWN OF NEEDHAM BOARD OF SELECTMEN  
EVENT INFORMATION SHEET**  
*(Please complete and attach event flyer or other information.)*

Event Manager Name (Name that will appear on license)	Michael R. Despres		
Event Manager Address	83 Morton St. Needham		
Event Manager Phone Number	781 690-6190		
Organization Representing (if applicable)	Village Club		
Is the organization (if applicable) you are representing non-profit? If so, please attach proof of non-profit status.	<input checked="" type="checkbox"/> Non-profit	<input checked="" type="checkbox"/> For profit	
	<input type="checkbox"/> Proof of non-profit status is attached Form of Proof: _____		
Name of Event	Oktoberfest		
Date of Event	9/22/12 (Saturday)		
License is for Sale of:	<input type="checkbox"/> Wines & Malt Beverages Only <input checked="" type="checkbox"/> All Alcoholic Beverages (for non-profit groups only)		
Requested Time for Liquor License	FROM:	3 PM	TO: 11 PM
Are tickets being sold in advance for this event?	<input checked="" type="checkbox"/> YES	\$ 5.00 /per ticket	<input type="checkbox"/> NO
Is there an admission fee for this event?	<input checked="" type="checkbox"/> YES	\$ 5.00 /per ticket	<input type="checkbox"/> NO
Are you using dues collected to purchase alcohol for this event?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
How many people are you expecting at this event?	150		
Name & address of event location. Please attach proof of permission to use this facility.	83 Morton St. Needham Village Club Hall		
Who will be serving the alcohol to your guests?	Two Bartenders		
Bartenders and/or servers of alcohol, beer and/or wine must have completed in the past three years an appropriate Massachusetts alcoholic beverages server-training program. Please state below who will be serving alcohol, beer and/or wine and attach proof of their training (certificate).	Don Lavallo and Peter Klein / certificates on file		
Please use the space below to describe the manner in which alcohol will be served to your guests. (For example, will guests be served alcohol or will they need to purchase it from the bar?) Please attach floorplan (can be hand drawn) of the event facility with liquor delivery plan.	Guests will need to purchase alcohol from a bar		
<input checked="" type="checkbox"/> I understand that the alcohol purchased for this event must be purchased from a licensed wholesaler/importer, manufacturer, farmer-winery, farmer-brewery or special permit holder and that I have received a current list of wholesalers. (A person holding a Section 14 license cannot purchase alcoholic beverages from a package store. (MGL Ch. 138, Sec 14, 23; 204 CMR 7.04))			
Event Manager Signature:	Michael R. Despres		Date: 9/4/12



**Saturday, Sept.22th, 2012 6-11pm**  
**at The Needham Village Club**

83 Morton St. Needham,MA

*Traditional German style*  
**Oktoberfest**

*Pretzels, German sausages, Beer,  
Wood sawing and pie eating contest.*

**Music**  
**Live**

**German Oompah Band**

**Admission is \$5.00**

**with raffles and prizes throughout the day**

Ocktoberfest traditionally, begins on the first Saturday after  
September 15th and ends on the first Sunday in October.

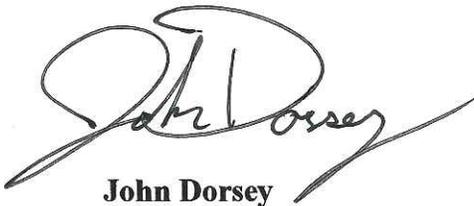
*This is a over 21 event.*

**Village Club  
83 Morton Street  
Needham, Massachusetts  
02494**

**September 4, 2012**

**To whom it may concern,**

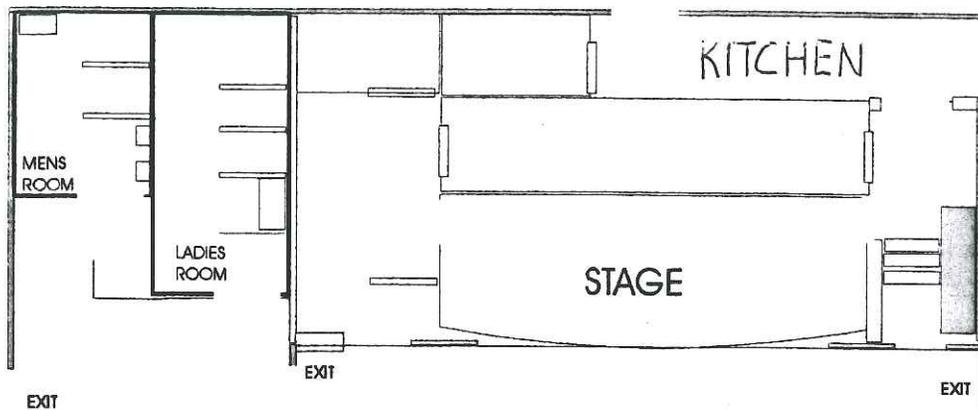
**The Village Club Board of Directors hereby grants permission to the Oktoberfest Committee the use of its hall and facilities for Saturday September 22, 2012.**



**John Dorsey  
President**



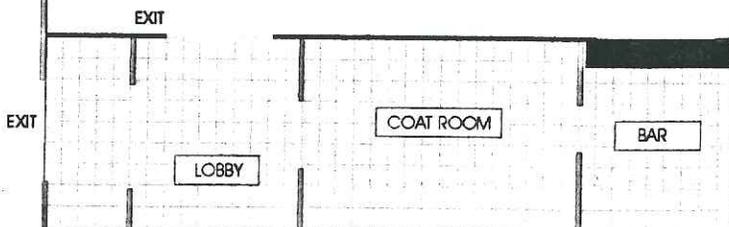
**Michael Despres  
Manager**



**The Village Club**  
HIGHLANDVILLE HALL  
Needham, Ma

**HIGHLANDVILLE  
HALL**

**60' X 40'**  
**SEATING 185 max**  
**w/ dancing 155**



CERTIFICATION NUMBER:

**67053**

ALCOHOL INTERVENTION METHODS

CERTIFIES:

*Peter J. Klein*

CAMPBELL TRENT  
508-756-8542

EXPIRES:  
APR 10 2013.

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eTIPS On Premise

SSN: XXX-XX-XXXX

Issued: 10/6/2010

Expires: 10/6/2013

ID#: 2878618

D.O.B.: XXX/XX/XXXX

Don Lavallo  
The Village Club  
83 Morton St  
Needham Heights, MA 02494-1203

For service visit us online at [www.gettips.com](http://www.gettips.com)

Town of Needham  
Water Sewer Billing System  
Adjustment Form

DEPARTMENT OF PUBLIC WORKS

TO: TOWN TREASURER AND COLLECTOR  
cc: TOWN ACCOUNTANT, WATER AND SEWER SUPERINTENDENT

WHEREAS the appropriate divisions of the Department of Public Works have submitted to you the following commitment(s) on the dates listed below for the collection of water, sewer revenue and

WHEREAS certain inadvertent error(s) were made in said commitment(s), it is hereby requested that you abate these particular account(s) in the amount(s) stated below.

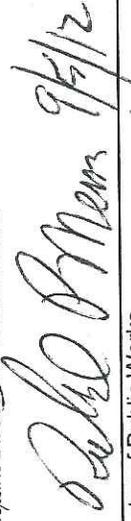
Water Sales:	-\$138.95
Water Irrigation:	-\$93.83
Water Admin Fees	\$0.00
Sewer Sales:	-\$323.30
Transfer Station Charges:	\$0.00
Total Abatement:	-\$556.08

Order #: 1146

Read and Approved: 9/5/2012



Assistant Director of Public Works



Director of Public Works

For the Board of Selectmen

Date: 9/11/2012

**Town of Needham  
Water Sewer Billing System  
Adjustment Form**

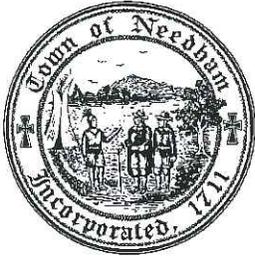
Prepared By:	Last Name	First Name	Customer ID#	Location ID#	Street Number	Street Name	Irrigation Water	Domestic Water	Sewer	Total	Reason	Corrected Last Read Y/N
DB	London	Eileen	1831	5738	103	Grant Street	-\$24.25	-\$33.20	-\$73.85	-\$131.30	BP	N
DB	Centola	Joseph	28603	13014	31	Grasmere Road	-\$69.58	\$0.00	\$0.00	-\$69.58	BP	N
DB	Council on Aging						\$0.00	-\$105.75	-\$249.45	-\$355.20	COA	N

**Total:                   -\$556.08**

ALSO, LET THIS SERVE AS AUTHORIZATION TO ABATE ANY PENALTY OR INTEREST WHICH HAS ACCRUED DUE TO THE NON-PAYMENT OF AMOUNTS AS STATED ABOVE.

**Legend:**

- O.I. = O.I. reading slower than inside meter causing large bill when inside meter is read.
- Leak = Leak in house or at spigot that caused loss of water, with proof of repair
- TWN = Town Project caused damage to private property
- Equip = Equipment Malfunction
- UEW = Unexplained water loss
- ACC = Accidental Water Loss
- BP = Billing Period beyond 100 days
- COA = Council on Aging



**TOWN OF NEEDHAM**  
NORFOLK COUNTY MASSACHUSETTS

NEEDHAM TOWN HALL  
1471 Highland Avenue  
Needham, MA 02492  
TEL: 781-455-7500  
FAX: 781-449-4569  
TDD: 781-455-7558

Christopher T. Coleman  
Assistant Town Manager/  
Director of Operations

E-mail: [ccoleman@needhamma.gov](mailto:ccoleman@needhamma.gov)  
Web Site: [www.needhamma.gov](http://www.needhamma.gov)

To: Kate Fitzpatrick, Town Manager

From: Christopher Coleman, Assistant Town Manager/Director of Operations

Date: September 7, 2012

**RE: RCN Institutional Network Agreement Letter**

As part of the negotiations between the Town through its Cable Television Advisory Committee (CTAC) and RCN, BecoCom, LLC it was agreed that an Institutional Network (I-Net) Agreement be executed. The purpose of this agreement is solely due to the reason that RCN does not own the infrastructure used for the Town's I-Net.

The original plan was to have this document and make a recommendation to the Board at its July 10, 2012 meeting; however as a result of some scheduling conflicts the document was delayed.

The CTAC are recommending that the Needham Board of Selectmen, as the Issuing Authority for the Town sign the agreement that will provide the Town with an added level of protection in the event RCN ever abandons the multi-strand fibers I-Net or their license is not transferred to another party pursuant to the July 10, 2012 ten year license renewal. In such an event the I-Net will continued to be made available by NSTAR Communication for the use by the Town.

*Suggested Motion:* That the Board vote to authorize the Chairman to sign the RCN Institutional Network Agreement Letter between the Town of Needham, RCN-BecoCom, LLC and NSTAR Communications, Inc.



## TOWN OF NEEDHAM

TOWN HALL  
1471 Highland Avenue  
Needham, MA 02492-2669

Office of the  
BOARD OF SELECTMEN

TEL: (781) 455-7500  
FAX: (781) 449-4569  
TDD: (781) 455-7558

July 10, 2012

Thomas Steel  
Vice-President and Regulatory Counsel  
RCN-BecoCom, Inc.  
105 West First Street  
South Boston, MA 02127

Neven Rabadjija  
Associate General Counsel  
NSTAR Communications, Inc.  
800 Boylston Street, 17<sup>th</sup> Floor  
Boston, MA 02199

RE: RCN Institutional Network in Needham

Dear Mr. Steel and Mr. Rabadjija:

I am writing to you as Chairman of the Board of Selectmen, statutory Issuing Authority for the Town of Needham, MA (the "Town"). The Board of Selectmen is expected to grant a Cable Television Renewal License to RCN-BecoCom, Inc. ("RCN") on or about July 10, 2012. The Selectmen are aware that the Town's Cable Advisory Committee has raised concerns about the status of the Institutional Network (the "I-Net") over the term of the new Renewal License. It is our understanding that while RCN is the Licensee in Needham and maintains and operates the I-Net, NSTAR Communications, Inc., a subsidiary of NSTAR, actually owns the fiber infrastructure; RCN itself has an indefeasible right-of-use ("IRU") of the fiber strands comprising the I-Net. To that end, the Selectmen would like to have an agreement between the Town, RCN and NSTAR Communications on this matter, as memorialized below:

In the event that (i) RCN in any manner abandons the multi-strand fibers that comprise the Needham Institutional Network ("I-Net"), and (ii) the Renewal License, dated July 10, 2012, is not transferred to another party in accordance with said Renewal License, then said multi-strand fibers will continue to be made available by NSTAR Communications for use by the Town of Needham, for continued use by the Town of Needham as its I-Net, in accordance with the Renewal License.

Thomas Steel  
Neven Rabadjija  
June 26, 2012

This agreement is made with the express understanding that while NSTAR Communications owns the fiber cable, and has certain maintenance obligations regarding the fiber cable as a whole (as long as it is being compensated for such maintenance, in accordance with its IRU agreement), NSTAR Communications does not, and will not (a) provide any "lit fiber" services or equipment; (b) provide any operational, diagnostic, repair or maintenance services with respect to specific strands of fiber; (c) provide any fiber or cable relocation (e.g. transfer from pole to pole), replacement, repair or reconfiguration (e.g. new laterals, or reconfiguration of connections) services, except if it chooses to do so, upon specific request and with full reimbursement of costs and overhead.

In other words, NSTAR Communications agrees hereby to simply provide a passive availability of the multi-strand fibers currently comprising the I-Net so long as the cable is in place, and not to provide an active service of the kind RCN may now provide under its existing or new Renewal License with the Town.

In addition, in the event of RCN's demise, if the IRU Agreement were not assumed by another carrier and continued, then NSTAR Communications reserves all rights, and accepts no limitation on its right to sell or re-use all or any part of the fiber network in its own best financial interest, including the multi-strand fibers reserved to the Town, but subject to the Town's continuing access to said multi-strand fibers, as specified herein, so long as the cable is in place.

I would appreciate it if you would indicate your agreement with the foregoing by signing below.

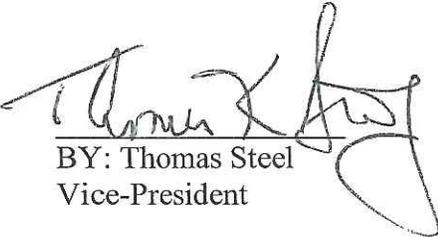
Thank-you for your assistance in this matter.

Thomas Steel  
Neven Rabadjija  
June 26, 2012

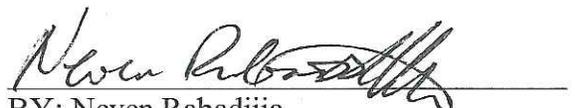
**The Town of Needham**

\_\_\_\_\_  
BY:  
Chairman  
Board of Selectmen

**RCN-BecoCom, Inc. LLC**

  
BY: Thomas Steel  
Vice-President

**NSTAR Communications, Inc.**

  
BY: Neven Rabadjija  
Attorney for NSTAR Communications, Inc.

Minutes  
Board of Selectmen Meeting  
August 17, 2012

- 12:00 p.m. A special meeting of the Board of Selectmen was convened by Chairman Jerry Wasserman at the Needham Town Hall. Present were Mr. Dan Matthews, Mr. John Bulian, Mr. Moe Handel, Mr. Matt Borrelli, Assistant Town Manager David Davison, and Town Manager Kate Fitzpatrick.
- 12:00 p.m. The Board discussed the fiscal year 2013/2014 goals and objectives and discussed action steps as noted on the attached summary.
- 3:20 p.m. The Board discussed the location of Town Meeting. It was agreed that the October 29, 2012 Special Town Meeting will be held in Powers Hall. Ms. Fitzpatrick suggested that the Board invite the Moderator to tour the renovated Newman Auditorium prior to making a decision for the long-term. The Board discussed the concept of holding the Annual Town Meeting at Newman, and Special Town Meetings, which are shorter in duration, at Town Hall. Ms. Fitzpatrick agreed to set up a tour at Newman in September or October.
- 3:30 p.m. The Board discussed protocols for speaking against a Board vote at Town Meeting. It was acknowledged that on rare occasions Board members feel compelled to speak or are asked a direct question. It was agreed that on general principal, the Board should speak as one voice.
- 3:40 p.m. **Motion: Mr. Handel moved that the meeting be adjourned. The motion was seconded by Mr. Bulian. Unanimous: 5-0.**

**Board of Selectmen/Town Manager  
Statement of Obligations and Goals 2013/2014**

<b>Committed Obligations Over and Above On-going Municipal Operations</b>	
Goal	Status
<b>Maximize the use of Town assets and ensure that Town and School services are housed in buildings that provide suitable and effective environments.</b>	
Monitor construction of Senior Center with expected opening in fall, 2013	On-going.
Update the Facility Master Plan, including renovation or replacement of the Hillside and Mitchell Schools, identification of office space for School Administration, and determining appropriate reuse, if any, of the Stephen Palmer Senior Ctr. Emery Grover and the Ridge Hill buildings.*	<p>The Board discussed the likelihood of receiving MSBA funding for two schools at the same time. The SOI process will likely open in the early part of 2013, with invitations to participate occurring in the late summer. The Town will have 270 days to seek feasibility study funding at that time.</p> <p>The Board agreed that its goal relative to reuse of the NIKE site should be considered in conjunction with future use of the Ridge Hill buildings. The Board agreed that a decision on reuse of the buildings should be held until after the on-going feasibility study relative to Emery Grover, and that all historical properties should be evaluated at that time.</p>
Evaluate and make changes as necessary to polling locations.	The Town Manager will prepare a report evaluating the number of precinct voting locations which can be accommodated at each available Town-owned building.
Improve the DPW Complex beginning with the construction of garage bays	The Town Manager and Director of Public Works were appointed by the Board of Selectmen to serve as user agency representatives to this project. An RFP for designer services has been issued.
Redevelop 59 Lincoln Street and 89 School Street for additional parking to support public safety operations.	A plan is being developed to consider the pending reconstruction in the context of possible future ownership of the entire block.
<b>Continue efforts to maintain and improve the vitality and economic success of the Town.</b>	
Further review the Needham Center Zoning*	The Board asked the Town Manager to inquire about the status of this project. The Board's opinion was that the Town committed to comprehensive review of parking, traffic, and commercial viability (height and density). The Board noted that the Board has supported an aggressive plan for increasing surface parking in the downtown. The

	subject should also be discussed at a chair/vice chair meeting.
Expand the amount and accessibility of surface parking in Needham Center, including restructuring the permit parking system, in Needham Center, evaluating "buddy parking," and reconfiguring the Lincoln Street lot with the acquisition of 37-39 Lincoln Street.	The Town Manager will recommend a financing plan for acquisition of an additional parcel on Lincoln Street at the Board of Selectmen's September 18, 2012 meeting. A proposal for fee restructuring will be presented later this fall.
Improve the Needham Center streetscape and infrastructure including traffic signals.	The Department of Public Works is seeking feedback and ideas from stakeholders to the project.
Develop regulations for the retail sale of alcoholic beverages in Needham prior to submitting a ballot question.	On-going.
Improve the streetscape and infrastructure of the NEBC.	On-going.
Complete the preferred renovation of Highland Avenue from Webster Street to the Charles River (State highway).	On-going.
Monitor implications of the add-a-lane project and assure that Needham's interests are addressed in the final design.	On-going.
Develop a consensus with Newton regarding transportation options along the Highland Avenue/Needham Street corridor.	The Town Manager will arrange a meeting between the Board and the Mayor of Newton to discuss this and related issues.
Review the Town's sign by-law*	The Town Manager will ask the Design Review Board and Building Inspector to review and make recommendations for changes to the sign by-law. The Board is particularly interested in receiving input on so-called "sandwich board" signs, perpendicular hanging signs, the number of signs on a building that has more than one front, neon signs, signs along Route 128 (to promote business visibility) and signs inside windows. The Board also asked that the process for obtaining a variance for certain signs be reviewed and streamlined if necessary.
Review the Town's by-laws relative to outdoor displays, furniture, etc.	The Town Manager will prepare a report of the current status of outdoor furniture and displays after which the Board will discuss the issue further.
Evaluate options, including incentives, to address the issue of empty storefronts in Needham Center	On-going.

Evaluate the need to develop a formal protocol for mobile food vendors.	The Town Manger will prepare a recommendation for regulating mobile food vendors.
Encourage a review of the thresholds for site plan and special permit review, particularly in the downtown.	The Town Manger will ask the CEA to make recommendations and will discuss proposed changes with the Planning Board.
<b>Continue working toward energy efficient and environmentally sound operations for both the Town and its residents and businesses.</b>	
Complete fleet inventory and develop a policy for purchasing fuel efficient vehicles.	The Town Manager will complete the fleet inventory, and will develop a proposed policy for purchase of fuel efficient vehicles. The Town Manager will develop a cost/benefit analysis of the Town's recent pilot program of purchasing hybrid vehicles in the Department of Public Works.
Evaluate the generation of power through alternative or renewable energy sources, including solar power	The Town Manger will draft a proposed charge and composition of a committee to explore use of solar power at the closed landfill. The Town Manager will recommend funding for a consultant for the October Special Town Meeting. The Board also discussed the importance of considering solar energy when new facilities are constructed in Needham.
Review and revise as necessary the Integrated Pest Management Policy	The IPM Committee has met and discussed proposed changes to the IPM Policy. The Town Manager and the IPM Committee will recommend policy changes to the Board of Selectmen and to other affected Boards, Committees and Commissions.
Adopt a plan based on EMG's, study for improving energy efficiency in town buildings.	The 2013 – 2017 Capital Improvement Plan includes a five year plan implementing the recommendations in the EMG study.
<b>Maintain and develop amenities that contribute to the desirability of Needham as a place to live and work.</b>	
Replace the Greene's Field play structure.	The Town Manager is working to determine the best approach for procuring the play structure, and will continue to work with Park and Recreation and the Greene's Field Study Committee to formalize the plan. The Board of Selectmen voted to support a request to the Community Preservation Committee for funding for the comprehensive Greene's Field Improvement Project.
Develop a shared use recreational rail trail from Needham Junction to the Dover line.	The MBTA Board of Directors voted to authorize the General Manager to lease the rail corridor to the Town of Needham. Before the Town can consider whether to lease the corridor, a study of the

	feasibility of the shared use recreational trail from the Junction to the Dover line is needed. The Board of Selectmen voted to support the project which has been presented to the CPC by the Bay Colony Rail Trail Association for funding.
Evaluate the future of Rosemary Pool and its site, in cooperation with the Park and Recreation Commission.*	The Bi-annual citizen survey confirmed that there is a high level of interest in evaluating the possibility of reconstructing the pool in Rosemary Lake. A feasibility study of the engineering options will be overseen by the PPBC using a prior Town Meeting appropriation for this purpose.
Evaluate the impact of broadening the historical demolition delay By-law.	Matt Borrelli and Moe Handel will consult with the Historical Commission and the Historical Society and draft a recommendation for the Board's consideration.
Review and make recommendations, as necessary, relative to the creation of an off-leash dog area in Needham.	The Town Manager will consult with the School Superintendent and then make a recommendation to the Board outlining the costs and any implementation issues.
Evaluate user fees and field maintenance fees in cooperation with the Park and Recreation Commission.*	On-going.
Work with the Planning Board on re-evaluation of zoning provisions relating to residential construction.*	The Town Manager will schedule a chair/vice chair meeting to discuss this and related items with the Planning Board, and will follow-up with a letter to the Planning Board. A future meeting of both boards will be arranged. The Board will specifically ask the Planning Board to consider the adoption of a residential FAR. The Town Manager will consult with the Building Inspector to develop a list of recommendations in addition to the FAR.
Develop a plan for recreation and open space improvements if proposed changes to the Community Preservation Act are approved.*	A CPA summit is planned for August 30 <sup>th</sup> . The Town Manager will recommend a five year CPA capital plan to the Board and other affected Boards, Committees, Commissions and stakeholders.
Develop a strategic plan for property acquisition including the financial impact and financial options	The Town Manager will send the draft letter and list of parcels that were recommended for possible future acquisition. The Town Manager will schedule a chair/vice chair meeting with the School Committee to discuss specific parcels.
Oversee final cost certification of Charles River Landing project, participate in development of 40B guidelines, evaluate and make recommendations relative to 40B project proposals, review existing affordable housing units and ensure compliance with applicable laws and regulations.	On-going.
Evaluate and make recommendations, as	Combined with evaluation of Ridge Hill buildings

necessary, relative to the future use of the NIKE site.*	(above).
Evaluate the need to regulate services offered in day spas.	The Town Manager will consult with the Police Department and make a recommendation.
Implement amended hunting regulations	
<b>Maintain and enhance the Town's Financial Sustainability New Initiatives.</b>	
Review and amend as necessary the specialized stabilization policies; formalize fund targets.	The Town Manager will make a recommendation for amendment (if any) to the debt and stabilization policies. The Board will convene a working group including representatives of the School Committee and Finance Committee to discuss the matter.
Review and amend as necessary the debt management policy with emphasis on the appropriate use of tax-levy supported ("3%") debt.	The Town Manager will make a recommendation for amendment (if any) to the debt and stabilization policies. The Board will convene a working group including representatives of the School Committee and Finance Committee to discuss the matter.
Create a super committee to evaluate and make recommendations relative to the financial sustainability of the RTS.	The Board created the RTS Super Committee which will make a preliminary report on September 18 <sup>th</sup> .
Implement a new financial software system for Town and School operations.	On-going.
Review current approaches to financing school playgrounds.	The Town Manager will schedule a chair/vice chair meeting including the School Committee and Finance Committee to discuss this issue.
<b>Evaluate Town Operations and Administration.</b>	
Evaluate Open Meeting Attendance/Remote Participation Options	It was the consensus of the Board not to pursue this option at this time.
Evaluate and Update the Town's Website to enhance the level of customer service	The newly restructure Support Services Manager position is responsible for ensuring appropriate and up-to-date web content.