

Meeting - James - 8:30 - 6/1/10 - At Gro Blue.

A2 COMPASSIONATE HEALTHCARE - WORK HOURS AND EMPLOYEES

HOW WE WILL FUNCTION AND SUCCEED MAY

28, 2010 Chuck Ream

Develop the "Buy Form"

IT TAKES A BASIC STAFF OF FOUR TO RUN THE STORE (ON A DAY THAT WE ARE NOT BUYING PRODUCT).

(Actually we don't buy cannabis products. We compensate our members for costs involved in producing the medicine. They are supplying us with the "overage" from their Michigan based legal growing operation so that our compassion center may dispense it to other members, within legal limits, who do not have the medicine they need. Members who acquire cannabis products shall make a **donation** to the collective (A2 Compassionate Healthcare). We need to put on paper how we are going to operationalize procedures that will implement this orientation - as a "collective" of caregivers and patients, organized together to meet the medical needs of Michigan qualifying patients.)

Good says James

our own Memb. CARD

? Have our own membership card - Double Protection for us. - picture - Marketing Good we will have our own Police will like it if we have our own card.

Receptionist - Control entry to front door, be welcoming and gracious, do intake and check cards and/or have prospective patients read and complete our membership agreement (which must be finalized). Make copies of state of Michigan Medical Marihuana ID card and a Michigan photo ID (drivers license), file the copy (and scan it into a computer). Indicate to security when a customer has been cleared to enter the room where cannabis products are dispensed. - Person has to be told their expiration date.

Full Benefits at Green Cross - and start at \$15.00.

Security Person - maintain active continual surveillance of parking areas and all indoor areas of our compassion center. Control doors which allow ingress and egress from the dispensing area. Regularly and frequently monitor the screens from the cameras which continually provide strategic views of our facility. Allow entry of a customer to the dispensing area after the receptionist has validated that all paperwork has been properly completed, and has signaled that a member has been cleared to enter. Possibly admit a second validated patient into the dispensing area to begin viewing products. Allow only 2 (or 1?) patients per salesperson into the dispensing area at a time (decision necessary). Hold the key to the restroom so that we know who is in that room. We want to insure that our restroom is never used as a place for the ingestion of hard drugs, alcohol, or tobacco. Sex is OK... (just checking to see if you are paying attention). The security person must have had training both in martial arts (they must have the ability to immediately disable any individual who is out of control... taser? Mace? Billy club?) and in what response a security guard should make in the face of various situations. The security person must continually monitor every aspect of the compassion center, insuring that patients can have prompt, courteous, and safe access to their medication, that our employees are protected, and that our facility is in no way a public nuisance.

Don't provide Receipts?? People won't demand that - some may

Get a Machine to make your own cards to A card you can scan and the face shows up. Security guard sees your face when you come in.

Budtender (not necessarily our evaluation specialist) - Assist the members of our collective with their selection of and their donation for medical marijuana. Must have a basic

On File In the memb Agreement they would have had how much you buy we would have had locked filing cabinets

James - Suggests Record Keeping over one day - or track it for the week?

We keep a Record of our Membership.

knowledge of cannabis and marijuana, congenial "people skills", and access to the card which has been prepared by our buyer which lists all that our compassion center knows about each particular type of bud. Budtenders must be able to operate (and instruct our members to operate) the magnification equipment which will be available at each bud-dispensing station. They are responsible for the proper entry of each transaction into the cash register. Giving freebies or extra weight to friends is specifically forbidden.

Stol

Stol - Patient caregiver

Rsto

Maintain of Members

hire and fire - look at resumes. Find

Manager - Oversee all functions of the facility, and work both on the floor and in the office. Schedule the employees over our seven day workweek. Take calls from employees who are sick and locate a replacement person who is trained in the job we need filled, and available to work. (People who work for A2CH must show up for work every day, or we will have to locate someone who is more reliable.) Take or make important phone calls or other communications. Help out at any one of the work stations that needs extra help or materials. Cover lunch periods and breaks for the other 3 to 5 staff members. Serve as second budtender if traffic is heavy. Take our money to the bank, or go to the bank to get money. Assist patients with special needs, so that the attention of the security person is not diverted for long periods.

In Michigan we don't call the doctor! Person could have been denied

Second Budtender? Possibly we should schedule 2 budtenders for the weekend, or whenever we have a situation where members need to wait in line to be served.

Employment Agreement will be needed from Targowski; also. AI

Evaluation and Intake specialist: This person will have responsibility for co-ordinating the intake and management of an adequate supply of medical grade dried cannabis flowers for our compassion center members. They must provide and implement a clear methodology (including written forms) for the intake, inventory control, and optimal storage of dried cannabis products. They will make the judgment about which medical cannabis our facility shall acquire for our members. This individual must provide and implement the forms and procedures by which our compassion center will transfer dried cannabis products to our members and how the compassion center will be compensated for our products and services. They must see to it that we have the supplies we need for the proper distribution of medical marijuana, and that scales and equipment are working properly. This specialist must prepare an index card (or other means) of information containing all that he or she has been able to learn (from both the provider and from personal observation) about each type of cannabis which we have available. This card must be available to budtenders who are dispensing our product, so that they can provide details for patients about the medicine they are considering.

Parameters about pricing must be agreed to by the intake specialist, manager, and directors of our compassion center. Knowing that it may change, we must put down in writing, asap, our proposed criteria and our prospective price structure for the acquisition of product. This should be a highly confidential document.

Develop a Feedback System: ^{then a penic} Writing program that we will categorize according to Ailment - Have Sally present it at the A2 Patient Collective.
 Could later be cut dried evidence of our health intent.
 Gather/Categorize.

A SUCCESSFUL COMPASSION CENTER – WHY AND HOW WE MAKE MONEY.

WHY: We must provide high quality product and fast, knowledgeable, courteous service. In order to provide good service to as many members as possible we must have significantly more money coming in than going out. We need a cash surplus to pay rent and payroll, to pay for the huge initial investment which has already been made, to keep enough high quality product on our shelves, to pay a good return on our investors capital and (if things are going well) bonuses for our employees. We must also generate a dollar surplus if we wish to expand into other Michigan cities in order to serve the needs of a greater number of Michigan qualifying patients.

HOW: At this time we have 4 potential sources of revenue, maybe 5 or 6.

1) The provision of medical grade (microscopically inspected), member grown, "boutique" quality trimmed and dried cannabis flowers will be our main service.

(Other product lines will be introduced only when a) We can produce or access a high quality product which meets a clear need of our members and b) we can dispense this product with enough of a markup to make it clearly worthwhile economically.) Our next products will be:

^{2 Testers for} 2) Medical cannabis edible products (baked goods), (both basic power cookies and fine chocolates and confections). - Merilee - a cook - she does edibles.
 - they are powerful - will share knowledge.

3) Tools for the administration of medical cannabis (commonly called paraphernalia). Papers, pipes, water pipes, "art glass" pipes (very expensive, acquired on consignment, kept in glass cases), vaporizers.
 ^{Vendors for these products} Balm's 6 rubs & stuff - Genskoil

4) Hemp oil and hulled hempseed or "hempnut". These are about the most nutritious things that a human can eat. Selling these products would prove that we were really interested in healthcare, not just in making money. Major problems present themselves however, mostly high price and very short shelf life.

5) Clones or cuttings – Rooted living plants which are female and embody some of the best medical cannabis genetics in the world. We must specifically explore the legality of this; our members will love this service. This may be reasonable to do if it does not add significantly to our legal exposure and if we could acquire them for \$10 each and sell them for \$20.

6) Delivery – this will become big in the future (and delivery services are already operating at this time in Michigan). It is a very important service, particularly for very sick people. We should begin to explore how to organize delivery in a way that we do not increase any potential legal problem – and is adequately remunerative.

Our income will be determined by how busy we become.

Each budtender or "salesperson" will have their own cash register for their shift, and they are responsible for it.

Note: When we have our skeleton staff of 4, only one person is taking in money. The receptionist, security person, and manager are all "support staff".

However, when we have 5 people working (if we are busy), we have two people taking in money (so with one additional employee we can take in twice as much money).

If we are busy enough to have 6 employees we have three people taking in money, and could take in three times as much money. If 7 employees become necessary then 4 cash registers will be running.

ESTIMATE OF BUSINESS - I will estimate our daily business if we have a staff of 4 in the building (one cash register taking in money).

I have heard that in California or Colorado the average sale is about \$45. (ask James, & Jamie)

I will estimate that it takes an average of 10 minutes for the average customer to consult with the budmaster, make their selection, complete their sale, and make their exit (ask James). There are 6 ten minute periods in an hour and we are open for 8 hours per day (4 on Sunday). $6 \times 8 = 48 = 48$ ten minute periods in the day.

If 48 members went through our compassion center each day and each spent \$45...

$48 \times \$45 = \2160 (if we have one cash register operating full time) or

\$4320 (with two cash registers operating at full steam all day long) or

\$6480 (if we are so crowded that we have three cash registers operating at full steam all day.

It is not likely, of course, that we will be equally crowded at all points in the day. Possibly each of these figures should be reduced by one quarter or one third. If we have lots of members coming in each day we will be very successful.

Wages and workers

Donna - Receptionist (intake person) and office manager \$20 per hour

Brandon and Jordan - (security and bud dispensation) \$15 per hour

Chuck - Manager - \$30 per hour (When Chuck is not there Jon Childs will be there, at \$20 per hour)

WAGES PER DAY

We figure that the average workday will be at least 9 hours, including prep and closing procedures: SO Donna $9 \times 20 = \$180$

(4)

Brandon $9 \times \$15 = \135

Jordan $9 \times \$15 = \135

Manager (Chuck or Jon) average \$25, manager will probably work a 10 hour day, \$250 (Chuck plans to spend 20 hours working on the floor as "Manager" and 20 hours on work as president of the company. The 20 hours per week he works as president of the company ($20 \times \$30 = \600) must be factored into weekly hours and wages, BUT IS NOT INCLUDED IN THIS ANALYSIS)

Evaluation and intake specialist (will work, as needed, on Monday, Wednesday, and Friday, \$35 per hour)

THEREFORE, Daily wages for skeleton staff of 4 (with no "buyer" on site) is approximately $\$180 + \$135 + \$135 + \250 or \$700 per day.

Sally Haines should be put on the payroll at \$18 per hour, if you want her to learn all of the jobs and be prepared to be a substitute if someone cannot come to work on a particular day. Who else would do this for us?

Note: with this staff we can only stay open 4 days per week. If we want to hire more staff we could reach our goal of being open 7 days per week. We must plan ahead!! We are supposed to hire caregivers – and we cannot make someone a caregiver overnight... it will take at least a month. Donna is still not a caregiver, and we must offer her a contract which will give her some protection.

I WANT AUTHORIZATION *RIGHT NOW* TO BEGIN LOOKING FOR (AND HIRE) ANOTHER PERSON FOR INTAKE/RECEPTIONIST ON THE WEEKEND. WE WILL ALSO NEED ANOTHER REGULAR EMPLOYEE FOR WEEKENDS AND AS A SUBSTITUTE. I NEED LOTS OF LEAD TIME TO HIRE A CAREGIVER.

HOURS WORKED AT A2 COMPASSIONATE HEALTHCARE, ANN ARBOR

(*omitting James*, who has pledged to work on Monday, Wednesday, and Friday – and a total of 40 hours in the week, if we need him. He is willing to work less for us if we don't need him.)

Monday - Friday 4 workers times 9 hours each day = 36 work/hours per day

Saturday – 5 workers x 9 hours each Saturday = 45 work hours on Saturday

Sunday – 5 workers x 5 hours = 25 work hours on Sunday

Total work hours for the week = 250 (plus 20 hours per week when Chuck is working a President of the company) SO, a total of 270 hours...plus James

If Chuck, Brandon, Jordan, and Donna all work 40 hours and Jon Childs works 20 hours that makes 180 hours. We need employees to fill 270 hours. That leaves 90 hours per week with

nobody to work. Obviously we need to hire 2 more full time people, and train another substitute.

UNTIL I GET AUTHORIZATION TO HIRE THE REQUIRED EMPLOYEES I WILL PLAN TO BE OPEN ONLY 4 DAYS PER WEEK. IF WE PAID SOME OVERTIME WE COULD BE OPEN FOR 5 DAYS PER WEEK AT THE STAFFING LEVEL WE NOW HAVE.

We need a contract for Donna right away, one that will protect her a bit if we get shut down.

NOTE: Many dispensaries in the US are having great difficulty maintaining bank accounts. Banks may say what we are doing is not legal and/or they don't want to be accused of "money laundering".

FOR DISCUSSION AND DECISION: POINT OF POSSIBLE MAJOR DIFFICULTY UNLESS WE TALK ABOUT IT UP FRONT AND GET IT FIGURED OUT.

QUESTION: WHAT DEALS DOES OUR COMPANY OFFER TO PATIENTS WHO ALLOW US TO BE THEIR CAREGIVERS?

PROBLEM: DIFFERENT ONES OF US HAVE DIFFERING IDEAS ABOUT WHAT WE SHOULD OFFER TO PEOPLE WHO ARE ONE OF OUR 5 PATIENTS -AND ABOUT WHERE THE GANJA THAT WE GIVE TO OUR PATIENTS SHOULD COME FROM. THIS COULD CREATE PROBLEMS.

Some of us are caregivers who want to attempt to produce an "overage" so that it may be dispensed to other members of our collective. If we are producing product for the compassion center, and we have different deals with our patients, maybe each of us should be individually responsible, using our own product, for the deals we have made to help supply our patients? That is a question. Should we be allowed to supply our patients from the "stash" of the company, or should we give them bud out of our own stock prior to dispensing to the company? We must be sure to list the amount we give away as an expense.

If a person is an employee of A2CH and they are NOT supplying product to the A2CH collective, we still want them to be a caregiver for as many people as possible. For these people, the folks who are our caregiver employees and are not supplying us with cannabis, it seems that the compassion center collective should supply the medical marijuana so that they can maintain a strong relationship with their patients. I recommend that the *basic deal of A2CH* be that we will pay for the patients paperwork and renewals and supply one ounce of top bud every 2 months. At 6 ounces of pot plus the paperwork we would basically be paying patients \$2000 per year to be our patients. That's enough.

I think we would get enough patients if we just offered to pay for paperwork and give them 10% off.

What do people think about this question? It will have to be answered in a way that is clear and reasonable and leaves no room for misunderstanding.

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PLENTY TO DO. I WILL SEND THIS ALSO TO JAMES TO HELP HIM GET GOING,
Chuck

(check all calculations)

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