



*Maine State Legislature  
Augusta, Maine 04333-0002*

August 24, 2015

Gov. Paul R. LePage  
Office of the Governor  
1 State House Station  
Augusta, ME 04333

Re: Drug Crisis Summit recommendations

Dear Governor LePage,

We write regarding the upcoming drug summit because we want to ensure that Maine takes a comprehensive and effective approach to the state's drug crisis.

Nationally and here in Maine, we've seen leaders across the political spectrum recognize the importance of access to health care and substance abuse treatment in addressing the drug epidemic. The drug crisis is a health care crisis, not simply a matter for law enforcement. As a trained family therapist who has worked on the frontlines with individuals struggling with addiction and mental illness, I can tell you firsthand that the challenges of addiction will not be solved in a prison cell. We must bridge the gap between law enforcement and substance abuse treatment.

Your administration has put together a participant list for the upcoming summit that largely consists of well-respected law enforcement and public safety officials. We respectfully urge you and those involved to take a comprehensive approach, bringing substance abuse treatment tools and law enforcement together to address the drug epidemic.

While you chose to exclude members of the Legislature, many of our members, including myself, are eager to address the crisis in our hometowns. As a citizen legislature, we bring to the table valuable expertise from our personal and professional lives. We have consulted with members from the Criminal Justice and Public Safety Committee and members serving on the Health and Human Services Committee. These members include former members of law enforcement and the military, doctors, nurses and mental health providers. Below please find a list of recommendations for the participants in your meeting to consider.

At the heart of our recommendations is a comprehensive approach. In other places like Washington State and Massachusetts, we've seen success when police address both the demand and supply sides of the equation. The Legislature took several steps to bolster law enforcement efforts to counter the drug crisis, but more needs to be done to address treatment and recovery from addiction. More also needs to be done to ensure that law enforcement and our health care providers are working together and coordinating their efforts.

This year, lawmakers passed a \$6.7 billion bipartisan budget that funds up to six of the seven new drug enforcement agents you requested. We added two new drug prosecutors to handle major drug crimes, two new judges and two new clerks for the court system to handle the increased caseload. We also provided funding to reestablish a new drug court in Penobscot County. These are steps we took in consultation with your administration and experts across the state.

While we made efforts to bolster law enforcement, we've seen your administration cut health care, including access to drug treatment, for thousands of Maine people. Cuts in MaineCare coverage and low reimbursement rates have already led to the closure of one of the largest treatment facilities in the state, while others struggle to remain open. Now, we are learning that your administration plans to cancel substance abuse contracts with prevention and recovery programs that have a track record of success.

We share the ideas below in the hopes that we can collaborate to address the drug epidemic that impacts the people of Maine.

Enclosed please find our recommendations.

Thank you,



Mark Eves  
Speaker of the House



Justin Alfond  
Senate Democratic Leader

cc: Thomas Delahanty - U.S. Attorney  
Leigh Saufley - Chief Justice  
Janet Mills - Attorney General  
Dr. Matt Sholl - State EMS Medical Director  
John Morris - Commissioner Public Safety  
Mary Mayhew - Commissioner DHHS  
Noel March - U.S. Marshall  
Michael Ferguson - DEA SAC New England  
Robert Swartz - Executive Director MCOP  
Joel Merry - President Maine Sheriffs  
Stephanie Anderson - President Maine DA's  
Michael Sauschuck - Portland Police Chief  
Daniel Hiebert - Chief Customs & Border Patrol  
Robert Williams - Colonel State Police  
Joel Wilkinson - Colonel Warden Service  
Jon Cornish - Colonel Marine Patrol  
Roy McKinney - Maine Drug Enforcement  
Dr. Marcella Sorg - Medical Examiner's Office

Brigadier General Gerald Bolduc – Maine National Guard  
Daniel Coffey – President Acadia Hospital  
Bruce Campbell – Chairman Bangor Area Recovery Network  
Dr. Steve Diaz – Chief Medical Officer Maine General Hospital

## Recommendations for Addressing Maine's Drug Crisis

Maine is not alone in its struggle to address a growing drug crisis. The drug epidemic, caused mostly by increased addiction to heroin and other opiates, is hitting cities, small towns and rural areas across the country. We can learn a lot from other state and city-led initiatives that are successfully improving public safety and helping their residents overcome their addictions. The most successful efforts are often led by law enforcement with coordination and collaboration among many community stakeholders, including substance abuse providers, public health officials, district attorneys and other local leaders. We hope that those participating in the drug summit on August 26 will keep the following recommendations in mind during their deliberations and will broaden collaboration among stakeholders throughout Maine to address this growing epidemic.

In order to be successful in our efforts to address the state's drug crisis, we must:

- **Invest in and support programs that encourage coordination and collaboration of efforts among law enforcement, health care providers and other key stakeholders.** There are a number of projects nationwide that are effectively reducing crime and helping individuals receive necessary substance abuse treatment and recovery. The two programs highlighted below have received national recognition and are currently being considered for implementation in two of Maine's cities.
  - The City of Portland recently announced its desire to implement a program modeled on Seattle's successful Law Enforcement Assisted Diversion (LEAD) program. LEAD is a pre-arrest diversion program that links low-level drug offenders with case management and legal services as an alternative to incarceration and prosecution. The program connects addicts to important services, including substance abuse treatment, housing and legal services. The program has successfully decreased utilization of the criminal justice and legal system by participants. In 2013, Santa Fe started the second official LEAD pilot project. A number of other cities are now looking to implement the program.
  - The Volunteer Angel Program in Gloucester, Massachusetts, led by Police Chief Campanello has recently received widespread recognition for its success in helping addicts get off the street and access substance abuse treatment and other services. Frustrated by his police force's inability to curb the growing number of opiate overdoses, Chief Campanello established the Volunteer Angel Program, which screens any person who walks in the door looking for assistance with his/her addiction. If determined eligible for the program, the person is quickly taken to the local hospital where he/she receives assistance from an "ANGEL" volunteer and is then placed immediately into substance abuse treatment. Any drug paraphernalia is confiscated and the individual is not charged with any crime. In addition, the police department uses any money confiscated during drug arrests to fund treatment for Angel Program participants with no insurance. We could do the same here in Maine to help fund treatment.

By January 2016, a program modeled after Gloucester's program is expected to be up and running in Augusta, Maine.

- **Increase access to needed treatment.** Access to substance abuse treatment, especially intensive inpatient treatment, must be increased to address the growing crisis in our state. Too many people are currently sitting on waitlists, unable to access desired and needed substance abuse treatment. Cuts to MaineCare eligibility and Maine's refusal to fully implement the ACA have resulted in people being cut off from treatment and providers losing a valuable source of reimbursement. These individuals remain addicted and continue to use dangerous drugs, often ending up homeless, estranged from family and in a cycle of being in and out of jail. All of the state and city initiatives that are successfully combatting the problem of drug addiction support individuals to access intensive and immediate substance abuse treatment.
- **Build upon successful and effective recovery programming.** The state must also invest in effective long term recovery efforts. Addiction is a disease that people struggle with on a daily basis. A small investment in recovery programs can go a long way to prevent relapse and promote sustained recovery for those struggling with addiction. Research has shown peer support programs to be effective in facilitating the recovery process. The state should build on the success of recovery programs like the Portland Recovery Community Center, which had over 21,000 participants in one of its peer support programs over the last fiscal year, and the Maine Alliance for Addiction Recovery, which continues to train volunteers and staff to support the recovery process in health care settings throughout the state and through its statewide Telephone Recovery program. We hope the Governor will reconsider the decision to terminate the state's contract with the Maine Alliance for Addiction Recovery, and we recommend that the state consider opening peer support centers, like the Portland Recovery Community Center, in other parts of the state. Research has shown peer support to be extremely effective in facilitating the recovery process. Programs like these are essential to ensuring that we are successful in helping individuals overcome their addiction in the long term.
- **Listen to people in recovery and family members of individuals struggling with addiction.** Along with including law enforcement and health care providers in the development and implementation of community and state-level programs, it is important that we all engage people who have struggled with the state's drug crisis on a personal level. They can help us to understand the challenges, the barriers and needs of those who need our help. We have received personal emails asking for the opportunity to participate in our policy discussions. It is important that we listen and learn from their experiences.