Remote HHS and Public Safety Committee Agenda
July 11, 2023 at 5:30 PM
Remote Meeting

MEMBERS
Councilor April Fournier, At-Large, Chair
Councilor Anna Trevorrow, District 1
Councilor Victoria Pelletier, District 2

To submit written public comment on an agenda item, email HHSPS@portlandmaine.gov. Submissions must be received by 12:00 pm the day before the Health & Human Services and Public Safety meeting to guarantee their inclusion in the agenda packet. All submissions must include the commenter's name and legal address. To help ensure your comment is submitted for the correct item, please include the name of the agenda item (see below).

The Health & Human Services and Public Safety Committee will conduct this meeting remotely via Zoom pursuant to the Remote Meeting Policy adopted by the Portland City Council. Allow your computer to install the free Zoom app to get the best meeting experience. If you are not able to attend live either in person or via Zoom, a recording will be available in the Agenda Center following the meeting.

Hi there,

You are invited to a Zoom webinar.
When: Jul 11, 2023 05:30 PM Eastern Time (US and Canada)
Topic: Remote HHS and Public Safety Meeting

Please click the link below to join the webinar:
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1. Announcements

2. Review and Approval of Minutes from May 9, 2023

    a. Draft meeting minutes

3. Chapter 35

    a. Marijuana Businesses Update

4. Decriminalize Maine

    a. Item Information

5. Updates from Public Health on the Education Campaign around Pregnancy Crisis Centers

6. Cooling Centers

    a. Cooling Center Protocol

7. Next Meeting: August 8, 2023

Health & Human Services and Public Safety Committee Minutes

Tuesday, May 9, 2023, 5:30pm, Remote Meeting

Committee Attendance: April Fournier, Chair (At-large), Anna Trevorrow (District 1), & Victoria Pelletier (District 2).

Councilors in Attendance: Pious Ali (At-Large), Roberto Rodriguez (At-Large), Regina Phillips (District 3), Andrew Zarro (District 4), Mark Dion (District 5).

Mayor Kate Snyder

City Staff:

Kristen Dow, Director of HHS; Adam Harr, Executive Assistant for Social Services; Heath Gorham, Interim Police Chief; Aaron Geyer, Director of Social Services; Michael Goldman, Acting Corporation Counsel; Keith Gautreau, Fire Chief; Ethan Hipple, Director of Parks and Recreation; Danielle West, Interim City Manager.

Announcements

- Councilor Trevorrow moved to approve April 11, 2023 and May 2 draft meeting minutes, Councilor Pelletier seconded and the minutes were approved unanimously.
- We are talking about people and assume best intentions.

Encampments and Unsheltered Homelessness in the city

- City Manager West Update
    - looked at properties that may be able help,
    - Further fleshed out the taskforce.

- Specifically looked at Bayside Trail
- Numbers of currently sheltered in our at capacity shelters.
    - We are utilizing GA but in self-directed housing searches,
    - Emergency shelter to just under 1,200 people a night.
    - We no longer track families presenting but they continue to present.
    - Received 18 ingle asylum seekers to Portland yesterday.
    - Parks have counted a rolling tally of 128 tents in the city, with 84 in Bayside alone and 21 tents in the fore river encampment.
        - These jumps coincide with the closing of hotels as shelter in surrounding communities.
- Increase in calls for service at Bayside Trail:
    - 49 calls for service in May alone (had 20 for the entire area in May of last year).
    - A male was swinging around a bat with a knife attached to the end of it; someone had pepper spray, and someone was defecating inside the vestibule of Convenient MD.
- There is no other space available.
- The recommendation from staff leadership is to clear the bayside trail encampment and start the taskforce.
    - We need an additional operator to step forward and provide shelter
- People need shelter under a roof, not outside.

- Director Geyer gave an update on the Emergency Shelter Assessment Committee (ESAC).
    - 50 participants met last Thursday and moved to support the Taskforce, with Resources (Bathrooms, showers, hand washing stations, waste removal) are essential during this work and that people from the encampments and lived experiences, as well as the HUB 2 Coordinator from the United Way of Southern Maine be included on the taskforce.
    - We have also reached out to HUD via Senator Collins' office; HUD is coming next week to give technical assistance.
        - Data management will be a key component to the taskforce being successful.
    - The capacity issue is significant.
- Councilor Rodriguez requested an org chart; Chief Gautreau will go over the command structure at this meeting,

- The taskforce is meant to focus on specific encampments when they are identified for eventual removal.
    - Goal to have time to find shelter or housing for people in identified camps.
    - Once approved, will pull together stakeholders.
- Incident Command System
    - Currently using this model in the EXPO building and things are running smoothly.
    - It is scalable to small and large encampments, and is federal best practice.
    - Daily briefings with small groups and then communication among large groups.
    - A taskforce following the Emergency Operations Center model.
    - Organization will have combined leadership from HHS, PD, and Fire.
    - A large meeting of providers will determine where organizations fall into the structure.
    - Advocating for long term ways to address the issue including temporary housing and GA bills.

Committee Questions and Discussion

- Councilor Zarro asked for a general timeline of addressing housing needs for asylum seekers in the expo.
    - It is a moving target; we are trying to secure a site and provide a shelter with Maine State Housing Authority money. It could be as early as in a couple of months.
    - Bangor cleared 50 tents which appears to have led to a significant increase in calls for service along the riverbank. Is there a plan for managing this?
        - It is outlined in the policy and the PD has experience from Deering Oaks last year.
        - The taskforce model may meet some of the need described.
    - Does PD hand out resource cards?
        - Yes, and parks has done so for years.
- Mayor Snyder asked if there is a plan to open up beds at the HSC?
    - There may be new shelter opportunities for asylum seekers that would open up beds.
    - The taskforce may coordinate options.
    - We don’t want to entrench people into sleeping outside.
    - We paused the encampment clearing and hope the increased coordination will make a

change.

  - How do we assess success?
    - How do we check in an understand how things are going to move people from campsites to shelter?
  - The number of people we need to care for is increasing; title 42 is lifting this week and we anticipate seeing more people from the Southern border.

- Councilor Dion thinks the ICS model is smart and supports the taskforce effort.
  - How we contain and control placement and removal of campsites.
  - Hoes the business liaison and business managers would be part of the taskforce.
  - When someone calls the police, it isn't usually due to a first time event.
- Councilor Fournier asked if as space opens at the HSC, are we prioritizing unsheltered folks to get those beds?
  - Yes, through reaching out to partners via Prevention & Diversion.
  - What are the hotel options we have?
    - We are severely limited due to ordinance in surrounding communities. There are no additional hotels in Portland that will work with us.
  - Is the old gym something we could explore or the USM dorms?
- Councilor Fournier asked how the providers are engaged on the removal. DO we have crisis workers, etc.?
- Mayor Snyder, asked about the HSC; there are a variety of populations staying at the HSC.
  - The services there are for people staying in the shelter, the services there won't be opened to the general public.
- What does a sanctioned encampment look like?
  - Our codes do not allow camping; a change in this policy direction would need ordinance.
- City Manager West decided to move forward with removal as dangerous conditions persist.
  - Address the public health and safety issue.
  - The taskforce will move forward.
  - A long term solution is needed with help form the State.
- Councilor Fournier gave guidance to staff on the plan to move forward with the mobile engagement center and the taskforce to focus on campers remaining after clearing.

    - The balance tips when staying in an encampment becomes more harmful than removal.

- Councilor Pelletier said that when we clear the encampment we will have populations of people with nowhere to go.

- Councilor Trevorrow moved to adjourn; Councilor Pelletier seconded. The motion passed unanimously 3 – 0, and the committee adjourned at approximately 7:43 PM.

City of Portland | Permitting and Inspections
Jessica B. Hanscombe, *Director*

Memorandum

TO: Health and Huma Services and Public Safety Committee
FROM: Jessica B. Hanscombe, Director of Permitting and Inspections
DATE: June 2, 2023
RE: Chapter 35-Marijuana Businesses Update

Marijuana licensing is a part of the Licensing and Housing Safety Division in the Permitting and Inspections Department. This department employs one dedicated person to Marijuana compliance. The Marijuana Compliance Coordinator is a Certified Code Enforcement Office and a Certified Fire Plans Reviewer.

History of Chapter 35

The City began work on Chapter 35 in 2019. We had an internal working group that met throughout 2019 and into 2020. The working group received guidance from the Joint Committees of Economic Development and Health and Human Services. Multiple public hearings were held on the Committee level and staff met with members of the industry, state officials and neighboring municipalities as we worked on the proposed ordinance. The first read of Chapter 35 was May 4, 2020 and the vote to approve was on May 18, 2020. The ordinance went into effect on June 20, 2020.

Since then, we have had three separate amendments to Chapter 35. On October 19, 2020 the City Council voted to amend 35-14 (f) 3, which stated:
Notwithstanding the cap in Sec. 35-43(i), and the dispersal requirements in Sec. 35-43(h), all qualified applicants who submit a complete application in the First Round of licensing shall be awarded tentative approval for a marijuana retail license. After the First Round, no additional licenses shall be awarded until the number of licenses falls below the cap, and all new licensees must meet the dispersal requirements and all other requirements of this Code.
The original cap was 20 stores and this allowed for 35 stores to be permitted.

Election Day in November 2020, the Voters amended Chapter 35. The amendment was:
This amendment to Chapter 35 of the City Code removes any limitation on the number of marijuana retail licenses granted by the City of Portland. In addition, it reduces the space required between two marijuana retail stores from 250 feet to 100 feet.
Currently the City has 36 Retail Stores and 5 licenses pending.

Lastly, the City Council voted in August 2022 to clarify the language in 35-14 on licensees converting license types from medical to adult use or vice versa. Also amended was 35-36 (a) 2 in regards to AES alarm systems. That amendment was:
A new or existing intrusion alarm system that is professionally monitored by a third party monitoring company and maintained in good working condition. The intrusion alarm system must include a panic button(s) that has the capability of transmitting its signal via City of Portland AES system directly to the City Dispatch Center Door.

Marijuana Licenses:

By Year

Year Issued	Amount issued
2020	1
2021	33
2022	62
2023 (1/1-5/31)	36

Currently Issued by Type:

Type	Amount
Caregiver Small Scale	1
Cultivation Tier 1	3
Cultivation Tier 2	4
Cultivation Tier 3	3
Manufacturing-High Hazard	4
Manufacturing – Manual	6
Retail Adult Use	27
Retail Dispensary	1
Retail Medical	8
Testing	1

The City currently has 15 pending Marijuana Business Applications

Inspections:

The Marijuana Compliance Coordinator performs inspections on new businesses, renewals and follows up on complaints. He works closely with other City Staff members on new business inspections, those would include: Health Inspector, Police, Fire, Water Resources, Public Works and Building Inspectors.

Inspections for Marijuana businesses are unique compared to other license types the City inspects. Odor Mitigation, Ventilation and Waste Disposal are three things that have different requirements. Marijuana Waste cannot be disposed of as "normal" waste is. Another example is inspections of Manufacturing Licenses. Many use Non-Odorized Flammable Gases to extract products. Normal gas leaks have an odor in them to alert individuals of the leak. These do not and are only detected by gas meters. We track these for purposes of public safety responses.

Marijuana Compliance Coordinator's Inspections

Year	Inspections
2021	270
2022	344
2023 (1/1-5/31)	181

Additional Information:

On the State Level, Adult Use facilities are more regulated then medical facilities. For example, testing, tracking, and labeling is not a requirement for medical use marijuana. When the Ordinance was being written, staff purposefully required the same standards for both Medical and Adult Use businesses. This allowed for applicants to abide by identical requirements and for staff to inspect licenses based on the use and not whom the end user will be.

The City does allow for deliveries from Small Scale Caregivers, Medical Retail and Dispensaries to patients. They are required to be a licensed business in Portland and abide by the security requirements listed in 35-36 (b). This ensures that residents are receiving their medical marijuana from licensed establishments that have been inspected and comply with our testing and/or labeling requirements.

Chapter 35 requires that all retail store employees receive annual training. That training is provided monthly by the Health and Human Services Department. The state is currently exploring a state wide program.

Decriminalize Maine

Decriminalize Maine is a community organization seeking to decriminalize the possession, adult use, and cultivation of plant and fungal medicines (psychedelics, sometimes known as entheogens).

What Are Psychedelics?

Psychedelics are biochemical substances, typically of plant origin, that when ingested for religious, spiritual, medicinal, or recreational purposes can produce expanded, non-ordinary states of consciousness. These substances contain compounds such as tryptamines, phenethylamines, indole amines, or others that act upon the central nervous systems of the human body. These compounds can elicit altered states of consciousness and result in the benefits that they are known for.

Common Psychedelic Plants and Fungi:

- Psilocybin containing mushrooms
- Cannabis
- DMT-containing plants; Ayahuasca
- Tabernanthe Iboga; Ibogaine
- Mescaline-containing cacti, such as San Pedro*

* Due to the vulnerable ecological status of Peyote combined with its religious and cultural significance to Indigenous peoples, Peyote is not included on *Decriminalize Maine's* list.

Decriminalize Maine Commits To:

Equity and Inclusion

We embrace a decolonized framework that acknowledges the historical use of psychedelics by Indigenous communities, that protects Indigenous resources, and that resists policies harmful to those communities (for example, the over-harvesting of Peyote).

Education

A key objective of *Decriminalize Maine* is to provide our communities with accessible information related to the safe use of plant and fungal medicines. We also advocate for harm reduction based policies and practices around all drug use.

Decriminalization

We advocate for a decriminalized approach to all substance use and specifically for an end to the prosecution of persons involved in the use of entheogenic plants, plant-based compounds, and fungi.

Psychedelics, The Landscape:

Plant-based medicines are one of the oldest known healing modalities on the planet that are still used today. Archeological evidence shows that since the Neolithic age, humans have used plant medicines for healing and treatment of illnesses while also working ceremonially with the plants for spiritual wellbeing.

In the mid-twentieth century, Western medicine began studying Psilocybin, DMT, Ibogaine, and other psychedelic drugs in clinical settings. This research illuminated effective treatments for substance use disorders, as well as such mental health issues as depression and anxiety. President Nixon's War on Drugs put a stop to this research with the introduction of the The Controlled Substances Act in 1970. However, in the last twenty years, there has been significant renewed scientific interest in these substances leading to a renaissance in research within leading medical research centers.

Many prominent institutions are actively engaged in researching entheogenic medicines, including:

- Johns Hopkins Medicine
- NYU - Langone Health
- Harvard University
- Imperial College London
- Columbia University
- Mount Sinai Hospital
- UC Berkeley
- UC San Francisco
- Stanford University
- University of Wisconsin
- University of Miami
- University Hospital Basel

Reported Benefits & Safety

Therapeutic

- Treatment for:
  - Obsessive compulsive disorder
  - Anxiety
  - Depression (including treatment resistant depression)
  - Eating disorders
  - Suicidal thoughts
  - End of life care

- Addiction relief for:
  - Alcohol
  - Cocaine
  - Tobacco
  - Opioids
  - Other substances and/or non-drug related addictions

Social

- Deeper connection to nature
- Lower recidivism
- Lower partner violence
- Increased creativity
- Increased well-being

Safety and Addiction

Evidence shows that the psychedelics are much safer than the major addictive drugs, having extremely low levels of toxicity, and producing little if any physical dependence. [14] The effects of these substances are heavily dependent on context in which they are used, commonly referred to as set and setting.

What is **Set and Setting?**

Set

The mindset, character, expectations, and intentions of the participating individual.

Setting

The social and physical surrounding in which the experience is taking place.

US Communities Making Change

In recognizing the evidence-based benefits of psychedelics, a growing number of communities in the US have decriminalized their use.

These include:

- Denver, Colorado
- Oakland, California
- Santa Cruz, California
- Arcata, California
- Ann Arbor, Michigan
- Hazel Park, Michigan
- Detroit, Michigan
- Cambridge, Massachusetts
- Northhampton, Massachusetts
- Easthampton, Massachusetts
- Somerville, Massachusetts
- Port Townsend, Washington
- Seattle, Washington
- Washington, DC

- In November 2020, **Oregon** became the first state in the U.S. to **legalize Psilocybin-assisted therapy** and in February 2021, Oregon decriminalized personal possession of small amounts of all drugs.

- In 2021, **New Jersey** passed a bill to decriminalize possession of under one ounce of Psilocybin mushrooms.

Legislative Models

Give

Gather

Grow

The **Give, Gather, Grow** Model of Decriminalization:

- Provides broad access across communities & creates low barriers for public use by allowing individuals (or co-ops) to give, gather, and grow plant medicines in their homes or shared community space
- Acknowledges the use of psychedelics outside of a purely medical context, allowing for psychospiritual growth/development
- Respects cognitive liberty, and maintaining our inherit relationship with nature
- Protects people who are already using these plants/medicine
- Resists exploitative commercialization, encourages equitable access

Decriminalize Maine supports this model.

Currently adopted by the state of Oregon, this model emphasizes a therapeutic context for use of plant medicines typically involving a series of preparatory meetings, medicine-administration days, and on-going aftercare in the form of therapy to integrate the entheogenic experience with the patient's everyday experience while attending to such issues as trauma, addiction, depression, and anxiety. While there is always an importance for a medical model, we recognize that this pathway alone creates unequal access.

Medical + Therapeutic

Recreational + Commercial

A modality similar to cannabis dispensaries providing regulated products to consumers while overseen by governmental entities.

Did You Know?

- A 2020 study in the Journal of the American Medical Association found **one out of two** patients had remission in major depression after only two psilocybin therapy sessions - **four times** more effective than conventional medication. [1]

- For **patients with a terminal illness**, double-blind trials show a single dose of psilocybin mushrooms can substantially reduce long-term anxiety and depression with a nearly **80%** clinical response rate. [2]

- A 2020 meta-analysis of randomized clinical trials dating back two decades found that psychedelic-assisted therapy is highly effective in treating PTSD, depression, anxiety linked to terminal illness, and anxiety linked to autism. [3]

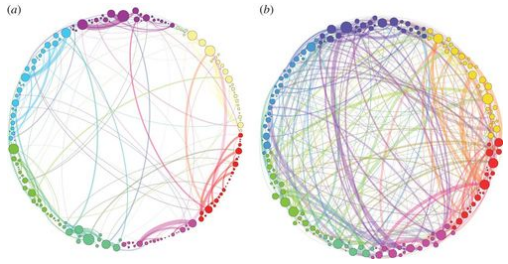
- On average, **2,400 Mainers** die from smoking-related illnesses each year. [4] A 2017 study by Johns Hopkins faculty found that smoking patients achieved an **80% abstinence rate** over six months after psilocybin therapy - a **45% higher success rate** than the most effective FDA-approved smoking cessation drug. [5]

Did You Know? *cont.*

- In 2021, there were **636 opioid related deaths** in Maine. [6] A 2017 Harvard University study found that in 44,000 Americans surveyed, psychedelic use was associated with a **40%** reduced risk of opioid abuse. [7] Ibogaine treatments, an African psychedelic, helped people with opioid addiction dramatically reduce "withdrawal symptoms and drug use in subjects for whom other treatments had been unsuccessful" and achieve "sustained reduced use in dependent individuals" over 12 months. [8,9]

- Entheogen treatments can substantially reduce distress, suicidal planning, and suicidal ideation. [12]

- Interconnections between networks of brain activity during normal waking consciousness (left) and after receiving Psilocybin (right). Different networks are depicted as small colored circles around rim. Upon taking Psilocybin, new neural pathways arise. [15]



- "Cluster Headaches" are severe migraines with no known cures that drive many to suicide or opioids. A study by the American Academy of Neurology interviewed patients who had tried psilocybin as a treatment. **Five in seven** reported psilocybin ended the headaches; **one in two** reported a complete termination of symptoms. [13]

In light of all the evidence presented, and the rapid integration of psychedelics into mainstream society, Decriminalize Maine looks to our state municipalities to join those around the country to decriminalize psychedelics. We believe that by working with our communities now, we may address the future of psychedelics in a way that upholds the community values unique to Maine. The City of Portland has a responsibility to empower its community and put public health above incarceration. Psychedelics are happening; the time for action is now.

For more information and/or to get involved please contact us:

Sarah Farrugia, **Executive Director**

Email decrimmaine@gmail.com

Instagram @decriminalizemaine

Website https://www.decriminalizemaine.me/

Facebook https://www.facebook.com/DecriminalizeMaine/

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WHEREAS: Drug policy in the United States and the so-called “War on Drugs” has historically led to unnecessary penalization, arrest, and incarceration of vulnerable populations, particularly people of color and people of limited financial means, instead of prioritizing policies that reduce harm and treat substance use as an issue of public health;

And WHEREAS: Along with many cities and states across the country, Portland, Maine has begun in recent years to recognize the public health impact that criminalizing people who use psychedelic plants, such as psilocybin, is neither a just or effective legal approach;

And WHEREAS: Psychedelic plants, which include a spectrum of natural plants, fungi, and natural materials, have been used for centuries by people in different cultures to address conditions including addiction, post-traumatic stress disorder (PTSD), elements of Persistent Traumatic Stress Environment (PTSE) conditions, chronic depression, end-of-life anxiety, grief, cluster headaches, and tendencies toward recidivism, as well as to improve mental and socio-emotional health;

And WHEREAS: The COVID-19 pandemic has led to a wave of accidental, illicitly-produced opioid overdose and other substance-related deaths in Maine communities, ailments that psychedelic plants have been shown to have particular strength in treating according to peer-reviewed medical research;

And WHEREAS: The federal government historically has been recognized not to have the power to regulate purely intrastate commerce and its police powers are limited, as recognized by the 2013 Cole memorandum. This memorandum, produced by the U.S. Department of Justice permits states and localities to deprioritize enforcement of cannabis crimes;

now therefore be it ORDERED: That the City Manager, Chief of Police and city staff are hereby directed to work with the City’s state and federal partners in support of decriminalizing all psychedelic plants and plant or fungal-based compounds (with the exception of peyote due to its vulnerable ecological status, combined with its religious and cultural significance to Indigenous peoples), that are listed in the Maine Criminal Code Title 17-A §1102 Subsection 2 (Schedule X drugs) as well as Schedules I-IV of 21 U.S.C. §812 of the Controlled Substances Act;

and be it further RESOLVED: That the City Council requests that the Cumberland County District Attorney cease prosecution of persons within the City of Portland involved in the use, possession, or distribution of psychedelic plants and the use or possession without the intent to distribute of any controlled substance;

and be it further RESOLVED: That the City Council hereby maintains that the use and possession of all controlled substances should be understood first and primarily as an issue of public health by city departments, agencies, boards, commissions, and all employees of the city;

and be it further RESOLVED: That the City Council hereby maintains that it should be the policy of the City of Portland that the arrest of adult persons for using or possessing controlled substances shall be amongst the lowest law enforcement priority for the City of Portland;

and be it further RESOLVED: That the City Council hereby maintains that no City of Portland department, agency, board, commission, officer or employee of the city should use city funds or resources to assist in the enforcement of laws imposing criminal penalties for the cultivation, use or possession of psychedelic plants by adults;

and be it further RESOLVED: That the City Council hereby maintains it should be the policy of the City of Portland that the investigation and arrest of adult persons for planting, cultivating, purchasing, transporting, distributing, engaging in practices with, and/or possessing psychedelic plants listed in Title 17-A §1102, Subsection 2 of the Maine Criminal Code (Schedule X drugs) or Schedules I-IV of 21 U.S.C. § 812 of the Controlled Substances Act shall be amongst the lowest law enforcement priority for the City of Portland;

and be it further RESOLVED: That the City Council does not have the power nor does this resolution authorize or enable any of the following activities: commercial sales of psychedelic plants and fungi, possessing or distributing these materials on school grounds, operating under the influence of these materials.

City of Portland Cooling Center Protocol

Activation triggers:

- When the National Weather Service issues a Heat Advisory (heat index of approximately 95°F or higher that lasts 2 hours or longer)
    - Activate Portland Public Library during their normal hours of operation
- When the National Weather Services issues an Excessive Heat Warning (Issued when the heat index is expected to reach 105°F or greater lasting for 2 hours or more) and/or when there is a heat wave where nighttime temperatures do not go below 75 F or less
    - Activate Portland Public Library during their normal hours of operation
    - If Portland Public Library is not available, activate available City facilities and staff

Open Cooling Centers:

Emergency Management Coordinator monitors weather

When activation criteria are met, the Emergency Management Coordinator alerts the Emergency Management Director then:

- Requests activation of available cooling centers
- Once availability is confirmed, the Emergency Management Coordinator notifies:
    - Director of Communications: who then will send notification via email/ text alert to subscribers, add to the City website and social media pages
- Cumberland County Emergency Management Agency (who then notifies MEMA and 2-1-1)

Confirmed Cooling Center Options: (Heat Advisory)

- Portland Public Library during regular hours (See hours below)

Emergency options: (Excessive Heat Warning)

- Troubh Ice Arena (confirmed emergency option)
- Community Centers (Riverton and East End have summer camps, Reiche is closed for construction)
- Ocean Gateway (requires credentialed staff)
    - All of these options would require additional staffing / overtime

Notification

Share a message like:

The City of Portland is alerting residents that a cooling center is available to the public at the downtown **Portland Public Library,** at 5 Monument Square. The public is welcome to come inside to cool off from the heat.

The library hours are:

Sunday: Closed

Monday: 10am - 5pm

Tuesday: 10am - 6pm

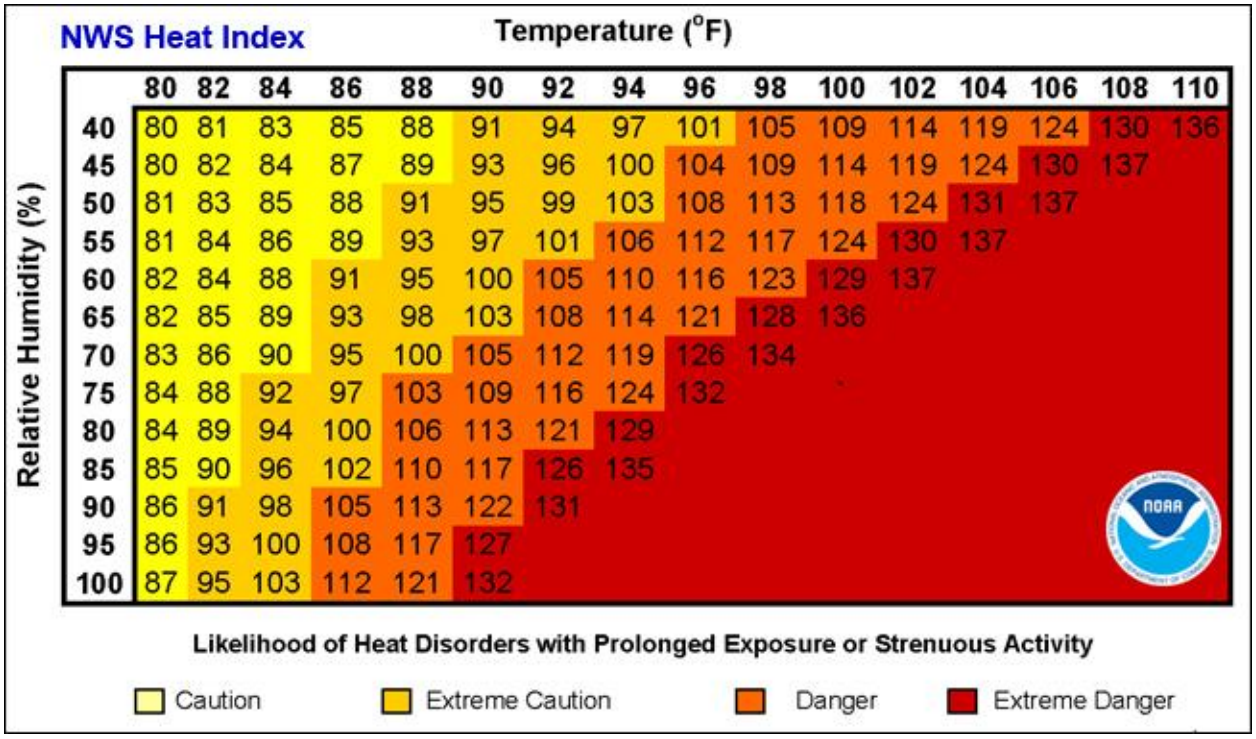
Wednesday: 10am - 6pm

Thursday: 10am - 6pm

Friday: 10am - 5pm

Saturday: 10am - 5pm

Splash Pads are also a good place to cool down and are open roughly 9:30 AM to 7:00 PM daily, located at Kiwanis, Peppermint Park, Payson Park and Stone Street Playground, as well as the Ravine at Deering Oaks (for updates, call 207-808-5400).



National NWS Criteria:

(National) Excessive Heat Warning—Take Action! An Excessive Heat Warning is issued within 12 hours of the onset of extremely dangerous heat conditions. The general rule of thumb for this Warning is when the maximum heat index temperature is expected to be 105° or higher for at least 2 days and night time air temperatures will not drop below 75°; however, these criteria vary across the country, especially for areas not used to extreme heat conditions. If you don't take precautions immediately when conditions are extreme, you may become seriously ill or even die.

(National) Excessive Heat Watches—Be Prepared! Heat watches are issued when conditions are favorable for an excessive heat event in the next 24 to 72 hours. A Watch is used when the risk of a heat wave has increased but its occurrence and timing is still uncertain.

(National) Heat Advisory—Take Action! A Heat Advisory is issued within 12 hours of the onset of extremely dangerous heat conditions. The general rule of thumb for this Advisory is when the maximum heat index temperature is expected to be 100° or higher for at least 2 days, and night time air temperatures will not drop below 75°; however, these criteria vary across the country, especially for areas that are not used to dangerous heat conditions. Take precautions to avoid heat illness. If you don't take precautions, you may become seriously ill or even die.

Local Forecast office (GYX): Heat Advisory https://www.weather.gov/gyx/Warning_Criteria

(Local) Heat Advisory: Issued when the heat index is expected to reach 95 degrees lasting 2 hours or more or 100-104F for any amount of time.

(Local) Excessive Heat Warning: Issued when the heat index is expected to reach 105 or greater lasting for 2 hours or more.

Public Information

Excessive Heat Outlooks—Be Aware! The outlooks are issued when the potential exists for an excessive heat event in the next 3-7 days. An Outlook provides information to those who need considerable lead-time to prepare for the event.

Where can I go for more information on how to protect myself from heat?

- Heat.gov
- NWS Weather Ready Nation "Beat the Heat" Resources
- CDC Heat & Health Tracker
- CDC Tips for Preventing Heat-Related Illness
- CDC Info for Specific "Heat Sensitive" Groups
- American Red Cross Heat Wave Safety
- Ready.gov Extreme Heat Resource
- OSHA Heat Educational Resources