

Tuesday, September 10, 2024, 5:30pm, Remote Meeting

Committee Attendance:

April Fournier, Chair (At-large), Anna Trevorow (District 1), Roberto Rodriguez (At-Large), Victoria Pelletier (District 2), Anna Bullet (District 4), Kate Sykes (District 5), Mark Dion; Mayor.

City Staff:

Jessie Lemieux, Executive Assistant for Fire Department; Keith Gautreau, Fire Chief; Mark Dubois, Police Chief; Nicole Albert, Corporation Council; Dena Libner, Assistant City Manager; Greg Jordan, Assistant City Manager; Maggie Mclaughlin, Director of Health and Human Services; Bridger Rauscher, Interim Director to Public Health.

Announcements

Review and Approval of Minutes from July 2024

Minutes moved by Trevorow and seconded by Rodriguez

Unanimous vote

Distribution of Food Public Property –

Dena Libner – This is to get feedback from the committee as to whether there is interest in developing a policy to regulate the impact of the distribution of food on public property. Including the amount of litter. The lack of coordination among different providers. Standardizing food prep and sanitization. Coordinating distribution dates and time. Restricting distribution to specific locations within the city.

Councilor Pelletier- What locations are being suggested/selected? What about trash cans?

Can we have conversations with city providers before we move this forward?

Dena Libner– No known locations, need committee input. Needs to be accessible to people. Setting expectations of food distributors to clean up debris/ provide receptacles.

Mayor Dion- Agree with rationale – would like to see inclusion of neighborhood impact.

Councilor Trevorow – More trash receptacles vs regulations on food preparation.

Councilor Rodriguez – This doesn't meet the needs of food hunger. Trash collection should be managed in a way to not increase workload for staff. Would like to hear alternative proposals.

Dena Libner – Park staff states that regardless of areas that have high numbers of trash cans, there is still a large amount of litter and food waste. Clients/Distributors need to be accountable.

Councilor Bullett- Regulation is a reactionary way to go about this. Need an education campaign to assist. Preble St food service closing has had a huge impact on the community. City Health inspector is a great resource to target an education campaign. Have there been complaints about trash – animals, food poisoning?

Councilor Fournier – Path of least restrictive – education first, and then have panel discussion to work together. Have an additional conversation with providers of food distribution before moving to a policy. Include people who receive the food and the impact on them by having a listening session.

Syringe Services Program Update–

Bridget Rauscher – Proposed action plan to reduce syringe waste, that is likely due to the clients and high exchange rate. Update since July – Strengthen client education on proper disposal. Implemented SSP client education, reinforcing the importance of safe disposal. Establish a harm reduction ambassadors program. Proposed a syringe buy back pilot program. Developed a multipronged approach to syringe pick-up operations. Increasing hours, having a hotline, and adding 5 additional sharps containers. Will be holding community conversations with harm reduction program clients, to gain feedback regarding barriers. Plans to improve data tracking, and reporting tools. Additionally meetings with the most impacted city employees, to provide tools and support.

Councilor Pelletier – Harm reduction ambassador program – how it works, client feedback. Conversations about safe injection sites?

Bridget Rauscher – New program funded by grant money. Allows us to work with the community to train, educate, and give supplies for community members.

Mayor Dion – The community sees this as a larger issue. Intend to propose a resolution to reduce the transaction to 1:1 on syringes.

Councilor Trevorrow- When we see an increase of needles on the ground, we seek to do a progressive approach to address this. Policy should not be routed by fear or stigma, that creates bias proposals.

Councilor Sykes – Needle cost is less than disease control. Education is best – reducing fear of pick up, and informing that it's not a public health risk to picking needles up.

Councilor Bullett- Think about root causes – need to remember systemic long term crime was committed by the pharmaceutical industry, which is why we have folks in this situation and why have the money for this because they were prosecuted. Remember root causes as we frame the work.

Allocating Opioid Settlement funds- Public Forum

Eamonn Dundon- Dayspace and syringe buyback program. Summer showed some improvements on encampments. But also showed some changes, such as individuals are more dispersed amongst the city. Dayspace is a promising solution. Would the city consider operating this directly? On syringe buyback programs, this seems like a low cost way to have a big impact.

Nancy English- Supports the dayspace, with the emphasis on helping people to recover by means of sober housing. The dayspace needs to be structured so as to not become a magnet to drug sales like other centers in the past. Dayspace location would be better served in a non residential neighborhood.

Cheryl Harkins-Advocate from Homeless Voices For Justice. Need a low barrier dayspace. The current unhoused have limited regular contact with accurate housing information, and are being told that voucher assistance is on hold. Need a space where housing navigation and case management is available, and healthcare providers can incorporate services such as medication assisted treatments. If the dayspace goes successfully, perhaps a night space added.

Dani Laliberte- Works as a social worker who is also a medical outreach case manager in a small clinic. During covid the clinic has become a dayshelter, which has overwhelmed the services offered. A daycenter that is accessible to people with housing navigators, rest beds, showers, and laundry. Hopeful for a methadone clinic on the peninsula. Transportation issues inhibit people having access.

John Bradley- Chairman on the board of Greater Portland Peer Services. Believe a dayspace should be run by peers, and people with lived experience, as they project trust. Need to be aware of this space having a supportive, safe injection place or people will leave to go back on the streets and so do the needles. Need to hear from the unhoused population about the space they need and would use.

Terence Miller- Advocacy director of Preble st, and supports the dayspace, methadone clinic and buyback program. Dayspace provides crisis support and de-escalation by maintaining a safe environment. Dayspace will assist in access to housing, health care and substance abuse counseling, equaling recovery. Currently no methadone clinics in Portland. Having one on the peninsula will reduce transportation barriers.

Tess Parks- Policy director for Maine Recovery Advocacy Project. Echo the support for the dayspace that supports more case management, housing navigation, harm reduction and mental health services. Support bringing methadone to the peninsula. Urge committee to earmark some settlement funds for a future overdose center in Portland. This would build on the proposal of a dayspace by offering places for clinically supervised drug use, medical care as well as connection to resources.

Jon Picard- Supports dayspace and methadone clinic. Medicated assisted recovery works. Safe spaces allow for recovery and the ability to sustain the recovery.

Atiim Boykin- Works one night a week at the Living Room crisis center, and Low barrier needs to be defined better. Some people don't meet the low barrier threshold and are at risk in the elements. Safe injection spaces protect people by reducing the needle waste. Option of employing two different types of pilot programs. One that is onsite theoretically plausible and studied, and things that are nationally and internationally studied and true. The lower the barrier, the higher the accountability. We need a robust presence with clinicians, case managers, peers and law enforcement at bay.

Joey Brunelle- Provided an anecdotal story about a friend who had oral surgery and was prescribed opioid painkillers to which they became addicted to. Friend was issued suboxone but had gotten into other drugs and his life ultimately fell apart. Points out this money came about because real peoples lives were massively negatively affected by opioids. Stated, it's easy to dismiss the unwashed masses, but these are real people with real lives.

Allie Hunter- Cofounder of the community syringe redemption program. This program is reducing syringe litter and engaging people who use drugs in a low barrier positive income earning opportunity. Offering to partner if desired, as the pilot program in Boston is successful.

Dena Libner - Staff research and feedback from community partners allowed for the list of recommendations : Dayspace, Seed funding for on peninsula treatment, Peer support services, Syringe buyback program, and an Investment in support of housing development.

Received to date 1.2 million dollars and 235, 000/ year up to Fy39 – limited funding and need to be mindful about financial sustainability moving forward.

Councilor Fournier – Prioritize with highest need and lowest barrier - syringe buy back program has immediate impact. Secondly, having a dayspace that is on the peninsula.

Councilor Sykes – Open a dayspace that is run by the city, coordinated, and controlled.

Councilor Bullett- Don't lose sight of the successful way to transport methadone.

Councilor Fournier – Procedurally want to move forward with option 1: buy back, dayspace, and seed funding for a peninsula methadone clinic.

Motion to move out of committee option 1

1 Buy Back

2 Dayspace

3 seed funding for methadone clinic

Moving forward with grant application process

Travorrow seconding

Unanimous vote to move this forward

Police UAS

Em Burnett - Concerns for use of drones. Policy drafted is a police based not council. Expressing privacy concerns, noise, locations of use, and managing the data collection. This opens the door to constant surveillance.

Chief Dubois- Officers already have body cameras, retention records with the same company, all regulated. Less invasive than the body cameras.

Review of attachments. Policies are reviewed weekly to ensure they are updated and changed if needed. Fiscal impact – est \$40k, appropriation was done in January by means of splitting criminal cases. Mostly designed for search and rescue operations, school shootings, accident reconstruction – reduces time. Life cycle of drone is 5-7 years. Same company as the current body cameras. The Maine Criminal Justice Academy is required to report to the legislature the uses statewide from every police department.

Councilor Pelletier- Technology can feel like a heightened level of security.

Councilor Skyes - Do have concerns on privacy. Standard operating guidelines that are created and controlled by the police department not council doesn't feel safe. Would like the council to write a controlling ordinance for it, that lives under the purview of the council.

Councilor Trevorrow- Concerned about the difference between the policy being held by the council vs the police by the police department. What are the ALCUs safeguards?

Councilor Rodriguez- Use of drones exists, borrowed by other towns. Is comfortable with the current regulations, and the annual reporting of every time its utilized.

Councilor Fournier- The state legislature on restrictions are restrictive on how drones are used, with a robust set of guidelines. Aligns with Councilor Rodrigues. Acknowledges the understaffing and sees this as a capacity builder to assist with workload.

Taking action on moving this talking point out of committee.

Vote is split: Pelletier and Trevorrow - No

Rodriguez and Fournier - Yes

Meeting adjourned at 8:05pm

Next Meeting: November 5, 2024