Health & Human Services and Public Safety Committee Minutes

Tuesday, February 9, 2021, 5:30pm, Remote Meeting

Committee Attendance:

Tae Chong, Chair (District 3), Belinda Ray (District 1), Mark Dion (District 5).

Councilors in Attendance: April Fournier (At-Large), Andrew Zarro (District 4)

City Staff:

Kristen Dow, Director of Health and Human Services; Keith Gautreau, Fire Chief; Frank Clark, Police Chief; Anne Torregrossa, Associate Corporation Council; Jessica Hanscombe, Licensing and Housing Safety Manager; Adam Harr, Executive Assistant for Social Services.

Maine Medical Center and Maine Behavioral Healthcare Presenters: Kari Donatelli, Maria Hadjiyane, Robert McCarley, Brian Batson, Randy Morrison and Katie Harris.

Meeting called to order at 5:32 PM.

AGENDA ITEM 1 – Announcements

- Updates are regular parts of the meeting:
- Shelter licensing is on the agenda this evening; small shelter zoning will appear on a future agenda.

AGENDA ITEM 2 – Approval of Minutes

- Councilor Ray moved to approve the minutes, Councilor Dion seconded and the minutes were approved unanimously.

AGENDA ITEM 3 – Updates

- Health and Human Services Department Update
    - General Assistance
        - January: 1,105 applications
            - 1,105 total applications
            - 819 approvals
            - 91 denials, 8.4 %
        - December, 2020 Denial rate was 8.6%.
        - January, 2020 denial rate was 9.5%.
    - OSS in January, 2021
        - 46 stayed at the shelter on average every night.
        - 96 stayed in the hotel shelter on average
        - In outbreak status in Oxford Street and across shelters citywide.
        - Daily talks with the CDC and doing nightly rapid testing of all guests and staff.

        - Positive cases are referred to the quarantine shelter operated through a partnership between MaineHousing and Preble Street.
        - OSS staff ae being trained to conduct testing.
    - Homeless Services Center
        - Council workshop tomorrow night to discuss next steps.
        - Presentation on RFQ last week.
    - In Outbreak Status
        - Due to outbreak status new families are entering the hotel instead of the shelter.
        - 24 Families and 77 individuals in the shelter.
        - 66 families for 205 individuals in the hotel.
        - 24 new families new in January; these were not just asylum seekers.
        - In conversations with partners at the southern border on policy changes from the new administration.
            - Partners reported families moving from the southern border.
            - Discussing the possibility of people coming to Portland to be better prepared in the event of an influx similar to 2019.
    - Barron Center
        - It experienced an outbreak that started on Christmas Eve and tonight is the 14th day with no new cases; if this continues we will be out of outbreak status.
        - On site testing conducted twice a week.
        - Today is the 14th day without cases; if this continues we will be out of outbreak status.
        - 2 vaccine clinics conducted with a third next week.
    - Needle Exchange
        - 819 exchanges.
        - 29,185 needles collected.
        - 30,006 needles distributed.
        - 136 doses of narcan disturbed.
            - Narcan is offered to every client at every visit.
        - Distributed 128 more needles than we took in.
            - We are largely following our one-for-one policy but if someone presents with no needles, but there were exceptions. When someone presents with no needles, we are distributing safety supplies including a pack of ten needles, allowable under the governor's order.
        - Evaluating community need, the policies and we are soliciting client and partner feedback.
        - Public Health staff are looking at the placement of community sharps boxes. It was reported that there was increase of needles collected from 598 in 2015 to 6,240 in 2020. Staff looked at 2020 data:
            - 6,240 needles were picked up in the community.
                - Only 1,732 (27.8%) were collected in community sharps boxes.
            - The most used box was on Oxford Street.

- Shelter Resistant Individuals in Portland
    - Solicited provider feedback available in the posted memo.

Committee Questions and Discussion

- Councilor Ray has received a lot of community feedback and is interested in discussing the needle exchange at a future meeting.
    - At this committee or at a council workshop?
    - The committee would prepare questions for Director Dow ahead of time.
- Councilor Dion thanked director Dow for the memo on shelter resistant individuals for context for that part of the unhoused population.
- Councilor Dion agrees that a workshop or committee meeting should happen.
    - Needle program should either be organized on a needs basis or one-to-one basis as a public health strategy.
    - He will be coming from a needs based plan of care.
- Councilor Chong agreed on the need to address the needle exchange program in a larger conversation.
    - Heading towards collecting 360,000 needles over the 270,000 collected last year.
    - More needles will be collected this year; policy change or not, more needles will be exchanged this year.
- Councilor Chong asked about the asylum seeker piece: are providers also looking at the other refugees and the families of asylum seekers and refugees?
    - Yes. An update looking at the balance of immigrants coming to Portland is being looked at.
    - What are the numbers of refugees coming?
        - Director Dow can follow up with Catholic Charities, the organization who administers the refugee resettlement program in Portland.

- Mental Health Services offered at MMC
  https://civicclerk.blob.core.windows.net/stream/PORTLANDME/21f08a2739.pdf?sv=2015-12-11&sr=b&sig=1MUWJ3WwLMKDtexOEOs4RnXMD06AHo4Tm6%2FVfNzPy1k%3D&st=2021-02-09T22%3A20%3A08Z&se=2022-02-09T22%3A25%3A08Z&sp=r

    - Councilor Fournier is now working at Maine Behavioral Health at the Lancaster Street location.
    - Maine Medical Center's Outpatient psychiatry clinic is working collaboratively with Maine Behavioral Health.
    - Overview of Maine Health
        - Behavioral Health
            - Exists on a behavioral healthcare continuum of care.
            - Peer services exist at all levels.
            - Patient advocacy committee of patients with lived experience who provide feedback on how services are progressing.
            - If a needed service is not offered, they will find that service in the community.
        - Locations

        - MMC has 216 Vaugh for the adult outpatient clinic and 216 Bramhall for children and geriatric.
        - Partial hospitalization program with group therapy and family therapy with medication management offered to patients.
    - Continuum
        - Acute to ambulatory care.
    - Patients
        - Patients have communications of psychiatric, medical and social conditions.
        - Increase in substance use.
    - Partners
        - Maine Association of New Americans' (MANA)
            - Peer supports, COVID-19 Transportation, social support events
        - Sweetser NEEDS
            - Eating Disorder
        - Crossroads
            - Eating Disorders and SUD-
        - Universities
            - We are able to provider no cost treatment through interns.
        - United Way
            - Grant funding provided to us directly to the clinic.
        - Avesta
            - Housing for homeless
    - Substance Use Disorders Treatment HUB
        - Services in Portland
- Pandemic, Challenges, and Gaps
        - Wait times have increased during the pandemic.
            - No wait time for the Adult Partial Hospital program.
            - Urgent treatment starts at about 2 weeks.
            - Biggest need is in geriatric service as there is an 8 month to one year wait.
                - Lack of board certified geriatric psychiatrists
                - Maine's population is oldest in the nation.
        - Converted from all face-face to telephone then televideo.
        - Now about 30% are face-to-face.
        - No show rate has decreased by 5%, down 10% overall.
            - Telehealth has helped access.
        - Pandemic has intensified needs.
        - Challenges:
            - Zoom fatigue.
            - Lack of internet access for telehealth.
        - Telehealth is here to stay.

- Increase in patients presenting for emergency services.
- There is insufficient funding for the continuum of care of services.
- Limited supply of providers.
- Insufficient capacity for acute and subacute patient services, including ACT Team.
- Need for improved Education/Coordination re involuntary hospitalization (blue paper) between clinic & police.
- Regulatory barriers to harm reduction models of care.
- Geriatric patients are often allocated a limited amount of care.

  - Assertive Community Treatment (ACT): team approach to help people be as well as possible without being hospitalized.
    - Experienced funding issues and lost an ACT team; currently, there is one active team in the Lancaster location. It is a struggle to meet patients under Covid.
    - 2/3 positions have been filled.
    - ACT has provided an important resource managing their day to day lives.
    - Can currently take up to 70 patients.
  - Seriously and persistently mentally ill population pilot that engages this population with a team approach among a psychiatrist, a therapist, and a case manager.
  - Collaboration to bring in case management into the hospital; moving to a single electronic medical record system.
    - Will comply with all state and federal privacy laws.
    - No matter the access point, a patient's history will be seen.
    - Will increase efficiency and quality of care.

Committee Questions and Discussion

- Councilor Ray thanked the presents.
- Councilor Dion asked needle exchange programs and the one-to-one model.
  - The organization has not taken a position on this.
  - The harm reduction tactics spoke to barriers more broadly including making Narcan available to all patients.
- Councilor Ray asked if Maine Health has a stance on harm reduction in the form of overdose prevention sites.
  - They do not have a position on those sites and will need to have a conversation internally.
  - Councilor Ray said it will help to have medical providers provide input.
    - Two employees submitted public comment in support on their own as private individuals.
  - Patients can get medications at the ED and transportation to the hub; they are also connected with a peer to navigate treatment.
- Chair Chong thanked Maine Health and those who presented and asked how to create a greater dialogue around mental health to better serve vulnerable populations.
  - Outreach and prevention.

    - Make it possible for people to take what they need and walk away with a reusable supports.
    - Take away stigma; on insurance cards, behavioral health information is relegated to the back of the card.
    - How to increase connection with people struggling in one's family and community.
    - People going into primary care fill out an Adverse Childhood Experiences (ACES) questionnaire.
    - Community drop in centers would help people who hold a stigma make a supportive connection.
- Councilor Chong asked if Maine Health would support a marketing campaign. Is there grant funding for things like the current mental health check-in program in schools?
    - This is a conversation happening in the community and Maine Health is involved.
- Councilor Chong asked about front line workers such as grocery store works and employee assistance programs. Is Maine Health working with such employers? It is also a racial disparity issue as most essential workers are more likely to be people of color.
    - Actually discussed the topic this morning.
    - The disparity amongst people of color is something being discussed to reach out around vaccines and see the opportunity to do so around mental health.

AGENDA ITEM 4 – Shelter Licensing

- Director Dow highlighted the changes made since the last meeting.
    - Two different fees based on the size of the shelter with expiration dates on July 1.
    - 90 days for effective date.
    - Licensing Authority: discuss having the city council approve licenses and renewals.
        - Removed section (b) from the city manager to the council.
    - Review Procedures
        - Added b
        - (c): supports a renewal process.
        - Numbered sections reworded.
        - Added
    - Changed management plan to operations plan.
    - Added "The experience and qualifications of shelter management and staff, sufficient to demonstrate that the shelter can meet its obligations under this ordinance, including providing appropriate services to shelter guests;"
    - Performance Standards
        - (e) changed shall to must.
        - Maximum Density of Beds: shall not exceed 250 beds within a 1 mile radius.
    - Enforcement and Penalties.
        - How would we insect our own shelters?
            - Standard for the FIRE to be inspected in-house.
            - We will inspect our own facilities.
    - Appeals

- "(a) Appeals of the suspension or revocation of a license, or of a notice of violation issued pursuant to this Article, shall be to the City Manager pursuant to Sec.15-9"

Committee Questions and Discussion

- Councilor Ray asked about July 1; do they renew every year on July 1?
  - Yes; they are prorated to July 1.

A public hearing opened at 7:12 PM.

- Jim Hall of Cedar Street shared what he thought were a few misalignments in the code: conditional use standards, etc. One such is a shelter approved last month that will have an exemption. The planning board was not comfortable with the management plan. He suggests better thresholds. Overall the City has developed good plans based on best practices. All shelters should be required to rake referrals from the central intake at the homeless services center. Third parties would demonstrate how they fill a particular service gap and how they will record success. There is a very real need for applicants to prove they will mitigate the known impacts on the host community before operating a shelter.
- Rebecca Hobbs, Executive Director of Through These Doors, a domestic violence shelter in Portland. DV is a major cause of homelessness particularly for women. Lessons learned from the pandemic should be forwarded into the licensing requirements; none of the requirements in the current form demonstrate performance standards that we know we need. It adds oversight and reporting but lacks additiontal benefit for homeless people or the community. From her reading, it looks like advocacy staff would be supplanted by additional reports and meetings. These don't' achieve the goals that the city council would achieve. The bed maximum seems arbitrary. As a resident of Portland, we care about our neighbors not living on the streets. From their perspective, it could prevent people from leaving a dangerous situation. Would the council postpone making a decision this evening to give time to submit written comment? She is grateful for the opportunity to speak tonight.
- Joey Brunelle of Kellogg Street asked questions: At the last meeting, a half mile buffer was suggested; is this particular buffer number form an example in another city? Why not a quarter mile? Where did the density limit come from? Section 15: if these same rules will be used to deny or revoke licenses to these facilities he has concerns: these rules say a license or permit may be dine or revoked by the following grounds: person patronizing the licensed activity have breached the peace or the use would disturb the peace in the neighborhood. These vague standards could be used to remove helpful services. There should be some sort of allowance for things that could happen beyond their control around their facility; he is concerned that one or more breaches of the piece does not make sense.
- Sarah Mchniewicz of the Bayside Neighborhood Organization: She gave a brief history of shelters in Bayside: before the pandemic, there were 329 shelter beds plus up to 150 overflow beds, when adding 5 Portland Street, that becomes 369 permanent beds, 529 total shelter beds in a radius of about 515ft. The two largest shelters in Bayside are 50 ft apart. In the 1 miles radius around 5 Portland Street, there are 451 shelter beds. There should be specific narrow waivers for domestic violence shelters. If the buffers are altered, she asked for a moratorium for new shelter beds in bayside, such as 5 years after

the oxford street shelter leaves. Umber of More protective measures could require a minimum number of random inspections. In the past, vagueness has been used to skirt requirements. All clients should sign a neighborhood contract.

- Mark Swan, executive director of Preble Street. He echoed Rebecca Hobbs' comment on postponing a vote until shelter providers and the emergency shelter committee weighs in. He suggested a couple months. He said the review by HHS, Fire and Police is potentially arbitrary and could limit the number of calls made by shelters, putting people at risk. This could also lead shelters to not admit people in need who may increase calls for services. The buffer and cap seem arbiter; it would effectively close the peninsula. Would the City operated shelters have to meet these same requirements? He thinks logging reports make sense but that it demonstrates how lopsided the licensing is towards neighborhoods over the client needs. Why is there not a system for client concerns?
- Frank D'Alessandro Policy Director of Maine Equal Justice. He highlighted the housing gap identified in the Maine Behavioral Health presentation. Any licensing should focus on the health safety and wellbeing of people staying in shelter. When an existing facility is exempted, it is unclear when they would meet new standards. Existing shelters approved of January 31, 2021 would be exempted; it makes sense any shelter approved as the date of the ordinance's passage would be exempted. The buffer zone should be removed. The number of calls for service threshold should be removed. He is concerned about the disparate impact of homelessness on people of color and people with disabilities and mental illness. The license structure could close shelters and be detriment to these losing shelter.
- Oliver Bradeen, Executive Director of Milestone Recovery, a 41 bed shelter on India Street in Portland. He appreciates that there is an exemption process for existing shelters. His shelter is in outbreak status and making any major changes would be difficult due to staffing and space. He is concerned about the language makes it look like clients are dangerous and we are trying to protect the community from clients, not keeping everyone safe. He is concerned about the amount of oversight written into it as there is already a lot of oversight from MaineHousing. There is no specific training module from the state so that needs to be fleshed out from as it is vague. There should be clear definitions throughout. He is concerned about recording; they already record for safety and is concerned about who can see that in the city. They are covered by a SAHMSA CFR and would need releases. They cannot release videos of people shown in their space without violating their rights. He would like clarify on the crisis call numbers; there are more ways to collect information: HOME team calls, etc. Crisis will not respond unless clients request services. He would like to collaborate further. A lot of these requirements would mean more staff. We need day space; the requirement to create day space should have its own section. Milestone's physical space does not allow for day space and they would need to close under this licensing structure. He will submit written comment.

Public hearing closed at 7:45 PM

- Councilor Ray is ready to ask question but not to make a decision tonight.
- Councilor Dion agreed and would like shelters have the opportunity to send comments in writing. There is plenty of work to be done before going to the full council.
- Councilor Chong agreed.
- Councilor Ray answered questions:

    - Where did the half mile buffer come form:
        - Green Bay, Wisconsin.
        - The buffer was a starting point and should be right-sized to Portland.
    - Grandfathering existing shelters. Existing shelters would be exempt from the buffer requirements but would need to apply for a license within 90 days.
- Councilor Ray asked about transferability of license.
    - If ownership changes it should be a new license.
- Councilor Dion agreed that there should be more definitions.
- The committee proceeded by section:
- Licensing Authority
    - Councilor Ray said all new applications should be approved by the council and renewals should be handled by permitting and inspections unless it is requested that it come before the council.
        - "May be approved language" allows the council to refuse. It doesn't mean staff are able to approve them. Only the council is able to approve initial applications; the council can say no.
        - The old language is the committee's intent.
- Review Procedures
    - Councilor Dion: (c) ii: he does not know what adequate means. He would rather "intended to protect."
        - Corporation Counsel is cornered about saying intended; she can intend to fly s plane but does not know how.
        - Adequate is a challenging standard to apply.
            - Could department heads provide opinions to the nature of the plan?
            - That is what is laid out in a less formal level from most licenses.
                - Saying in their opinion it is or is not adequate or could be adequate with edits to the plan.
            - Councilor Dion would like a reasonable person standard to apply.
                - What a reasonable fire chief consider sufficient.
                    - Is sufficient better than adequate?
                - What standard does the plan have to meet?
                    - When a fire chief looks at the plan, they will tell us if the plan does or does not meet public health safety and welfare/
                    - The committee agreed that "more likely than not" can replace "adequate."
            - The language is pulled from other existing license.
            - Councilor Chong asked about approved security plans; if the plans are approved hey would be adequate?
    - Will the license specify the size of license approved or target demographic?
        - The license will show size of the shelter due to the two tiers.
        - Such information can be added to the license.
    - No licenses are transferable outside of specific conditions with marijuana licenses.
    - Councilor Ray would like a question asking if applicants have operated another shelter in the city or elsewhere/similar facility.

- Application submission Requirements.
    - Councilor Ray would like specificity on access to recordings: (g) (vii) (1).
        - Chief Clark said it was a PD ask related to the recent Preble Street shelter.
            - These are limited to public ways on the exterior opposed to private/protected areas.
            - Add language specifying the above that observes the outside and not the clients inside.

Performance Standards.

- Councilor Ray said day space should have its own item.
    - Councilor Ray would alter (d).
        - Language makes it sound like you don't need day space if you are within a quarter mile of a metro line.
        - Adequate access to and from metro service shall be provided; facility shall be within X."
        - Facility shall provide sufficient indoor space to provide sufficient day space. She does not want to make it so prohibitive that Milestone could not meet it; could there be a chance to apply for a waiver? Perhaps a contract to supply the day space within a certain radius?
    - Councilor Dion agreed that day space should be separate.
        - He does not like adequate and should be defined having it or not.
    - Councilor Chong agrees about separating it but is not certain about the day space requirement and agrees to some kind of waiver.
    - Councilor Ray thinks the half mile opens up more space for shelters to exist in the city; access to transit should be required. A quarter mile would make it more prohibitive to where shelters could exist in the city if they have to be within ¼ mile to transit.
        - Will start with ½ a mile to continue the conversation.
    - Density of beds.
        - Councilor Ray said we are one city and that concentrating all services in one are in the city has not yielded good results. Setting some of these limits will avoid concentrating and segregating one population in one section of the city.
            - That said, she does not know what the right numbers are.
            - Staff to help work out what works best for Portland.
            - Does a 10 bed facility need a buffer from the next one? Likely not and it needs nuance from staff.
        - Councilor Dion needs to think further and welcomes staff and citizen input.
            - This feels like a zoning exercise over a licensing one.
            - It gives some information to applicants on where they can exist but it feels like zoning.
        - Corporation Counsel explained this would be one of the more restrictive schemes in the city. A 2,500 foot buffer is large compared to other cities. Sarah's testimony pointed out that almost 400 beds in 250 foot radius is not working; what is not working should inform the requirements. This may be worked out in the two tier system.

- It is technically not zoning because zoning is treating different areas of the city differently.
- We have similar requirements in land use code.
- These would go to site plan approval with planning board then licensing; not thinking about this before the end step could create problems.

- Monitoring Reports
  - Councilor Ray asked what "specialized" means in specialized shelter.
    - Meeting the need of a specific population/demographic such as adult vs family.
    - It does not speak to a specific type of shelter.
  - 5 & 6: Do people with Long term stayer status vs chronically homeless; what is the difference?
  - Asking for the number of CTOs; it would be helpful to know the reason and the length for the CTOs.
    - Councilor Dion said CTOs and Police calls are best left to sometime of report generated by the police department. There are service concerns and public safety concerns and he would like to see those kept in separate buckets. He would like Public Safety to stay with PD versus going to HHS.
      - Director Dow said that when Mark Swan spoke about this earlier, a lot came from the Preble Street application. This was moved forward for consistency but this will be looked at by PD.
      - Are individuals chronically subject to CTOs?
        - Concerns about CTOs could be addressed by PD reports.
      - Chief Clark said that PD and providers are meeting to discuss CTOs. PD has been releasing CTO lists to HHS to work with other providers around the CTO, including the steps to revoke such CTOs.
      - There is a neighborhood persecutor, Rich Bianculli, reviews appeal requests. Community policing will be involved in these reviews.
  - Councilor Ray mentioned the comment that some reporting requirements are onerous and would take away from staff providing services. How much of the information requested is unique versus already collected?
    - Staff will review.
  - Councilor Ray would like to justify everything we are asking for, that it is all relevant to quality of service being provided and the impact to the surrounding community.
  - Councilor Dion said it was a good point made by Mark Swan: the notion of calling the police. It is important to isolate the calls made by third parties (neighbors, etc.) is relevant to for the PD to review. If staff feel they have done their best to deescalate a situation and PD could resolve a situation, they should not be deterred from doing so. When he enforced liquor licenses, licenses were encouraged to report issues.
    - Third party calls can be used to assess failure.
    - Partnership between shelters and PD should be encouraged.

        - Councilor Chong concurred.
    - Councilor Ray asked: how a domestic violence shelter that doesn't disclose its location fit into this process?
        - How do they factor into buffers?
        - Can corporation counsel develop language to exempt domestic violence shelters?
    - Feedback on whether h-xiv comply with MaineHousing reporting standards.
    - (i) communicating monthly: public meetings should be bifurcated.
        - Minutes from those meetings should be available from the shelter operator. On the website?
        - There would be an exemption for DV shelters.
        - Chief Clark said providing direct feedback to shelter privately and meeting publicly can work.
            - The community relations liaison would hear ongoing concerns form neighbors be part of that conversation.
        - Chief Clark agreed that he doesn't want people working in shelters to feel deterred from calling the police.
- Enforcement and Penalties
    - Councilor Ray appreciates that permitting and inspections inspect other city facilities.
        - Outside of optics, she feels it is important a neutral third party take a look, such as an external auditor.
            - It there an organization or entity that provides this service?
        - Councilor Dion asked for clarification.
            - We will require other organizations running shelters to submit reports to the City and she does not think the City should be inspecting itself. It would be harder to say things are not ok when they are not if they are in the same organization.
            - Councilor Dion is interested in seeing what that would look like.
        - Director Dow thinks this makes sense for transparency and would look to partners at the State and to Corporation Counsel to what that would look like.
            - Does this have to be written into ordinance?
                - It can be.
                - As the city manager's bosses, the council can direct him to do so or it can go in the ordinance. It is a policy decision.
                - Councilor Dion sees the value but does not think it should be included in the ordinance and could be accomplished between a memorandum of understanding between the city manager and the organization inspecting.
                    - Would this be the mayor or the council?
        - Councilor Chong asked if a similar shelter in Maine such as the one in Bangor conduct an inspection or what kind of agency?
            - There are requirements for all performing centers but Merrill is inspected in-house. He does see that due to the sensitive nature we could do this to avoid the appearance of a conflict of interest.

- Corporation Counsel is not sure what we are talking about when we say inspections?
    - Reports?
    - Councilor Ray specified that any city official could inspect at any time; she would like the same of City shelters.
    - What are they inspecting; currently fire looks at life safety and fire code.
    - One way to address is that the Council does the renewals so that city inspections does not push through renewals.
        - Councilor Ray thinks that solves it; municipal shelters shall be reviewed annually by the council.

- Councilor Dion asked about (c) and if it is boilerplate?
    - It mirrors state language.
    - We could just refer to code.
    - Certain types of violations have heightened penalties.
        - Such as $200/day versus $100 per day for certain life/safety violation.
    - We could take this out and reference to section 15.
    - It is helpful to know the range of financial consequences.

Section 15.8

- Councilor Ray asked about removal of a license. A license could be suspended from one breach of the peace. Is breach of the peace defined? Is a noise complaint breaching the peace? Should a disorderly house ordinance type mechanism apply here?
    - Corporation Counsel said at some point that section needs to be rewritten. If applied strictly, many old port locations would have had licenses revoked. An update needs to be made to make it more practical.
    - Existing licenses spell out certain violation having specific penalties.
        - We don't want to deter calls for service but also use it as a threshold.
            - How to parse out these calls for service sis challenging to draft.
    - Severity matters; breaching the piece for yelling at 2:00 am is different than breeching the peace with violence.
        - This would be easier if there was a standard to apply.
    - Councilor Dion understands Mr. Brunelle's concerns but sees that it would be reasonably applied in order of it to stand up in court.
    - Any revocation could result in a large population needing to be cared for.
    - Councilor Chong said that before we get to revocation there would be neighborhood meetings and other opportunities to mitigate situations leading to revocation.
    - This could be added in later if things aren't working; too strict of a standard removes discretion.
        - Calls for service lacks nuance.
        - Analyze a year's worth of reports after the initial scheme would inform new standards if needed.

Appeals

- Councilor Ray asked if suspension or revocation can be appealed.
    - Appealed to the city manager but could go to the council.

AGENDA ITEM 8 – Next Steps

- The next meeting is March 9, 2021.

The meeting adjourned at approximately 9:07 PM