

MAINE STATE LEGISLATURE

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(EMERGENCY)

FIRST REGULAR SESSION

ONE HUNDRED AND ELEVENTH LEGISLATURE

Legislative Document

No. 1692

H.P. 1276

House of Representatives, May 26, 1983

Submitted by the Joint Select Committee on Alcoholism Services pursuant to Joint Rule 19.

Reported by Representative Rolde from the Joint Select Committee on Alcoholism Services pursuant to H.P. 118 and printed under Joint Rule 2.

EDWIN H. PERT, Clerk

STATE OF MAINE

IN THE YEAR OF OUR LORD
NINETEEN HUNDRED AND EIGHTY-THREE

**AN ACT to Provide for the Development of
a Centralized Coordinated Planning and
Evaluation Process for State Alcohol
and Drug Abuse Activities.**

Emergency preamble. Whereas, Acts of the Legislature do not become effective until 90 days after adjournment unless enacted as emergencies; and

Whereas, the alcohol premium law enacted by the 110th Legislature established a bold, new approach to the funding and delivery of alcoholism services in the State; and

Whereas, a study commissioned by the Legislature has recommended a reorganization of the functions of certain state agencies and the development of a small centralized planning and evaluation unit to coordinate the planning, evaluation and monitoring of state-funded alcoholism services; and

1 Whereas, it is necessary to make administrative
2 changes rapidly in order to facilitate the develop-
3 ment of an improved planning process; and

4 Whereas, in the judgment of the Legislature,
5 these facts create an emergency within the meaning of
6 the Constitution of Maine and require the following
7 legislation as immediately necessary for the preser-
8 vation of the public peace, health and safety; now,
9 therefore,

10 Be it enacted by the People of the State of Maine as
11 follows:

12 Sec. 1. 22 MRSA §7102, sub-§3, as amended by PL
13 1981, c. 454, §1, is repealed and the following
14 enacted in its place:

15 3. Office established. It is the objective of
16 this Act to establish an office within the Department
17 of Human Services to administer and oversee the oper-
18 ation of the Department of Human Services' alcohol
19 and drug abuse activities, including those related to
20 the abuse of alcohol and excepting those relating to
21 the prevention of drug traffic and to provide support
22 and guidance to individuals, public and private orga-
23 nizations and especially local governments, in their
24 drug abuse prevention activities.

25 Sec. 2. 22 MRSA §7102, sub-§4 is enacted to
26 read:

27 4. Alcohol and Drug Abuse Planning Committee
28 established. It is the objective of the Legislature
29 to establish an office within State Government to
30 coordinate the planning and evaluation of all state
31 alcohol and drug abuse activities.

32 Sec. 3. 22 MRSA §7103, sub-§17-A is enacted to
33 read:

34 17-A. Planning committee. "Planning committee"
35 means the Alcohol and Drug Abuse Planning Committee
36 established under section 7131.

37 Sec. 4. 22 MRSA §7103, sub-§17-B is enacted to
38 read:

1 17-B. Planning director. "Planning director"
2 means the Director of Alcohol and Drug Abuse Planning
3 Committee.

4 Sec. 5. 22 MRSA §7104, as amended by PL 1975, c.
5 293, §4, is repealed and the following enacted in its
6 place:

7 §7104. Office of Alcoholism and Drug Abuse Preven-
8 tion

9 There is created within the Department of Human
10 Services, the Office of Alcoholism and Drug Abuse
11 Prevention.

12 Sec. 6. 22 MRSA §7105, as enacted by PL 1973, c.
13 566, §1, is amended to read:

14 §7105. Director

15 The Office of Alcoholism and Drug Abuse Preven-
16 tion shall be administered by a director, who shall
17 be appointed, subject to the Personnel Law, under the
18 classified service by the commissioner ~~after consulti-~~
19 ~~ation with the Maine Council on Alcohol and Drug~~
20 ~~Abuse Prevention and Treatment.~~ The director shall be
21 a person qualified by training and experience with
22 drug abuse, or alcoholism and intoxication, or who
23 has had satisfactory experience of a comparable
24 nature in the direction, organization and administra-
25 tion of prevention or treatment programs for persons
26 affected by drug abuse or drug dependency. He shall
27 be immediately and fully responsible to the Manager,
28 Office of Resource Development and shall not be indi-
29 rectly responsible to any other official of the
30 department.

31 The director shall serve full time in a position
32 that is separate from and not in any way integrated
33 with another position in the department. He shall not
34 concurrently hold another title and shall perform
35 duties solely germane to the powers and duties of the
36 office as provided for in this chapter.

37 The director shall possess full authority and
38 responsibility for administering all the powers and
39 duties of the office provided in section 7106, except

1 as otherwise provided by statute. He shall, with the
2 advice of the Maine Council on Alcohol and Drug Abuse
3 Prevention and Treatment, assume and discharge all
4 responsibilities vested in the office. He shall not
5 in any case assign to another unit of the department
6 which is not responsible to him any powers and duties
7 granted to the office by statute, or by rules, regu-
8 lations or procedures adopted pursuant to this chap-
9 ter. He shall make full use of existing support ser-
10 vices available in State Government to assist with
11 carrying out the responsibilities set by this chap-
12 ter.

13 The director may employ, subject to the Personnel
14 Law and within the limits of funds available, compe-
15 tent professional personnel and other staff necessary
16 to carry out the purposes of this chapter. He shall
17 prescribe the duties of staff and assign a sufficient
18 number of staff full time to the office to achieve
19 its powers and duties. He may arrange to house staff
20 or assign staff who are responsible to him and who
21 are to provide direct service to individuals or small
22 groups of individuals needing drug abuse treatment,
23 to operating units of the department, such as the
24 Bureau of Rehabilitation, which are responsible for
25 similar functions.

26 Sec. 7. 22 MRSA §7106, first ¶, as amended by PL
27 1981, c. 703, Pt. A, §34, is further amended to read:

28 The office shall establish in accord with the
29 purposes and intent of this chapter, and with the
30 advice of the council, in cooperation with the plan-
31 ning committee, the overall planning, policy, objec-
32 tives and priorities for all Department of Human Ser-
33 vices' drug abuse prevention functions, except pre-
34 vention of drug traffic, which are conducted or sup-
35 ported in the State. In order to carry out the above,
36 the office shall have the power and duty to:

37 Sec. 8. 22 MRSA §7106, sub-§2, as amended by PL
38 1981, c. 468, §§1 and 2, is further amended to read:

39 2. Information system. Develop and maintain an
40 up-to-date information system related to drugs, drug
41 abuse and drug abuse prevention. The information
42 shall be available for use by the people of Maine,

1 the political subdivisions, public and private non-
2 profit agencies and the State. Educational materials
3 shall be prepared, published and disseminated. Objec-
4 tive devices and research methodologies shall be con-
5 tinuously developed. Uniform methods of keeping sta-
6 tistical information shall be specified for use by
7 public and private agencies, organizations and indi-
8 viduals. Existing sources of information shall be
9 used to the fullest extent possible, while maintain-
10 ing confidentiality safeguards of state and federal
11 law. Information may be requested and shall be
12 received from any state government or public or pri-
13 vate agency. To the extent feasible, information
14 shall maintain compatibility with federal information
15 sharing standards.

16 Functions of the drug information system ~~shall~~ may
17 include, but not be limited to:

18 A. Conducting research on the causes and nature
19 of drugs, drug abuse or people who are dependent
20 on drugs, especially alcoholics and intoxicated
21 persons;

22 B. Collecting, maintaining and disseminating
23 such knowledge, data and statistics related to
24 drugs, drug abuse and drug abuse prevention as
25 will enable the office to fulfill its responsi-
26 bilities;

27 C. Determining through a detailed survey the
28 extent of the drug abuse problem, and the needs
29 and priorities for the prevention of drug abuse
30 and drug dependence in the State and political
31 subdivisions. Included ~~shall~~ may be a survey of
32 health facilities needed to provide services for
33 drug abuse and drug dependence, especially alco-
34 holics and intoxicated persons;

35 D. Maintaining an inventory of the types and
36 quantity of drug abuse prevention facilities,
37 programs and services available or provided under
38 public or private auspices to drug addicts, drug
39 abusers and drug dependent persons, especially
40 alcoholics and intoxicated persons. This function
41 shall include the unduplicated count, location
42 and characteristics of people receiving treat-

1 ment, as well as their frequency of admission and
2 readmission, and frequency and duration of treat-
3 ment. The inventory shall include the amount,
4 type and source of resources for drug abuse pre-
5 vention;

6 E. Conducting a continuous evaluation of the
7 impact, quality and value of drug abuse preven-
8 tion facilities, programs and services; including
9 their administrative adequacy and capacity. Ac-
10 tivities operated by or with the assistance of
11 the State and Federal Governments shall be evalu-
12 ated. Included shall be alcohol and drug abuse
13 prevention and treatment services as authorized
14 by this and so much of the several Acts and
15 amendments to them enacted by the People of the
16 State of Maine, and those authorized by the
17 United States Acts and amendments to them as
18 relate to drug abuse prevention:

19 (1) The United States Drug Abuse Office and
20 Treatment Act of 1972 (P.L. 92-255);

21 (2) The United States Community Mental
22 Health Centers Act (42 USC 2688);

23 (3) The United States Public Health Service
24 Act (42 USC);

25 (4) The United States Vocational Rehabili-
26 tation Act;

27 (5) The United States Social Security Act;
28 and

29 (6) The United States Comprehensive Alcohol
30 Abuse and Alcoholism Prevention, Treatment
31 and Rehabilitation Act of 1970, Public Law
32 91-616, and similar Acts; and

33 F. Making a separate written report to the Chief
34 Justice, the Governor and the Legislature not
35 later than March 1st of each year, commencing
36 with 1982, on the enforcement of laws relating to
37 drinking and driving during the preceding calen-
38 dar year. The report shall contain at least the
39 following information:

- 1 (1) The number, by county, of arrests for
2 operating under the influence or operating
3 with an excessive blood-alcohol level;
- 4 (2) The number, by county, of criminal com-
5 plaints filed for operating under the influ-
6 ence;
- 7 (3) The number, by county, of criminal com-
8 plaints filed for operating with an exces-
9 sive blood-alcohol level;
- 10 (4) The number, by county, of complaints
11 filed for the traffic infraction of oper-
12 ating under the influence;
- 13 (5) The number, by county, of complaints
14 filed for the traffic infraction of oper-
15 ating with an excessive blood-alcohol level;
- 16 (6) The number, by county, of revocations
17 of implied consent;
- 18 (7) The number, by county, of operating
19 after suspension and habitual offender
20 arrests;
- 21 (8) Rates of conviction, guilty pleas to
22 lesser charges and dismissals by county for
23 these offenses;
- 24 (9) The rates of successful completion of
25 the Driver Education Evaluation Program and
26 rates of recidivism for individuals complet-
27 ing the Driver Education Evaluation Program;
- 28 (10) The number, by county, of persons
29 whose licenses were suspended; and
- 30 (11) The average fine, jail sentence and
31 period of license suspension, by county, for
32 each category of offense.

33 The office may call upon the assistance of the
34 Department of Public Safety, the State Court
35 Administrator, the office of the Secretary of
36 State and the district attorneys in preparing
37 these reports.

1 Sec. 9. 22 MRSA §7106, sub-§3, as amended by PL
2 1981, c. 703, Pt. A, §§35 and 36, is repealed.

3 Sec. 10. 22 MRSA §7106, sub-§4, as amended by PL
4 1981, c. 703, Pt. A, §37, is repealed.

5 Sec. 11. 22 MRSA §7106, sub-§6, as amended by PL
6 1981, c. 703, §38, is further amended to read:

7 6. Organizational unit. Function as the orga-
8 nizational unit of State Government the Department of
9 Human Services with ~~sole~~ responsibility for conduct-
10 ing and coordinating, ~~with the advice of the council,~~
11 ~~state with the advice and cooperation of the planning~~
12 ~~committee as provided for in section 7131,~~ programs
13 and activities authorized by this chapter, and by the
14 Comprehensive Alcohol Abuse and Alcoholism Preven-
15 tion, Treatment and Rehabilitation Act of 1970, as
16 amended, and by the Drug Abuse Office and Treatment
17 Act of 1972, as amended; and other programs or Acts
18 of the State of Maine or United States related to
19 drug abuse prevention which are not the specific
20 responsibility of another state agency under federal
21 or state law.

22 The office is designated as the single agency of
23 Maine State Government solely responsible for admin-
24 istering the state plans required by those Acts;

25 Sec. 12. 22 MRSA §7107, as amended by PL 1977,
26 c. 78, §156, is further amended to read:

27 §7107. Maine Council on Alcohol and Drug Abuse Pre-
28 vention and Treatment

29 The Maine Council on Alcohol and Drug Abuse Pre-
30 vention and Treatment, hereinafter in this chapter
31 referred to as the "council," is created. The council
32 may appoint from its membership subcommittees relat-
33 ing to particular problem areas or to other matters,
34 provided that by January 1, 1975 the council shall
35 function as an integrated committee. The ~~office~~ plan-
36 ning committee shall provide the council any adminis-
37 trative or financial assistance that from time to
38 time may be reasonably required to carry out its ac-
39 tivities. Any reasonable and proper expenses of the
40 council shall be borne by the ~~office~~ planning commit-

1 tee out of currently available state or federal
2 funds. The Maine Commission on Drug Abuse, as hereto-
3 fore established by Title 5, chapter 317, as amended,
4 and the advisory councils on alcoholism as heretofore
5 established in the department and by section 1367,
6 shall, by this chapter and implementation of it, be
7 reconstituted and unified into a single unit.

8 Sec. 13. 22 MRSA §7108, as amended by PL 1977,
9 c. 253, §§1 and 2, is further amended to read:

10 §7108. Membership

11 The council shall consist of no more than ~~17~~ 25
12 members who, excepting members representing the
13 Legislature, shall be appointed by the Governor. To
14 be qualified to serve, members shall have education,
15 training, experience, knowledge, expertise and inter-
16 est in drug abuse prevention and training. Members
17 shall be residents of different geographical areas of
18 the State, who reflect experiential diversity and
19 concern for drug abuse prevention and treatment in
20 the State.

21 They shall be selected from outstanding people in
22 the fields of corrections, education, health, law,
23 law enforcement, manpower, medicine, mental health,
24 mental retardation, science, social sciences and
25 related areas. Members shall have an unselfish and
26 dedicated personal interest demonstrated by active
27 participation in drug abuse programs such as preven-
28 tion, treatment, rehabilitation, training or research
29 into drug abuse and alcohol abuse.

30 Membership shall include representatives of non-
31 governmental organizations or groups and of public
32 agencies concerned with prevention and treatment of
33 alcoholism, alcohol abuse, drug abuse and drug depen-
34 dence. At least 2 members of the council shall be
35 current members of the Legislature, consisting of one
36 Member from the House of Representatives appointed by
37 the Speaker of the House to serve at his pleasure and
38 one Member from the Senate appointed by the President
39 of the Senate to serve at his pleasure. Two of the
40 private citizen members shall be between the ages of
41 16 and 21. At least ~~3~~ 4 members shall be officials
42 of public or private nonprofit community level agen-

1 cies who are actively engaged in drug abuse preven-
2 tion or treatment in public or private nonprofit com-
3 munity agencies or members of the regional alcohol
4 and drug abuse councils located throughout the State.
5 One of the private citizen members shall be the
6 President of the National Council of Alcoholism in
7 this State. Membership may also include, but not be
8 limited to, representatives of professions such as
9 law, law enforcement, medicine, pharmacy, the insur-
10 ance industry, businesses with employee assistance
11 programs and teaching. Membership shall also include
12 at least 2 representatives of public education, 2
13 representatives from the field of corrections and
14 criminal justice and 2 representatives from the field
15 of social services. Appointments to the council
16 shall be made so as to insure that at least 6 members
17 shall be persons affected by or recovered from alco-
18 holism, chronic intoxication, drug abuse or drug
19 dependency, having evidenced a minimum of 3 years of
20 sobriety or abstention from drug abuse.

21 Members shall be appointed for a term of 3 years,
22 except that of the members first appointed, 5 shall
23 be appointed for a term of 3 years, 5 shall be
24 appointed for a term of 2 years and 5 shall be
25 appointed for a term of one year, as designated by
26 the Governor at the time of appointment, except that
27 any member appointed to fill a vacancy occurring
28 prior to the expiration of the term for which his
29 predecessor was appointed shall be appointed only for
30 the remainder of such term, and except that members
31 who are Members of the current Legislature and who
32 are appointed by the President of the Senate or the
33 Speaker of the House shall serve at their pleasure.
34 Any vacancy in the council shall not affect its
35 powers, but shall be filled in the same manner by
36 which the original appointment was made.

37 Members shall be eligible for reappointment for
38 not more than one consecutive term and may serve
39 after the expiration of their term until their suc-
40 cessors have been appointed, qualified and taken
41 office. The appointing authority may terminate the
42 appointment of any member of the council for good and
43 just cause and the reason for the termination of each
44 appointment shall be communicated to each member so
45 terminated. The appointment of any member of the

1 council shall be terminated if a member is absent
2 from 3 consecutive meetings without good and just
3 cause that is communicated to the chairman. An offi-
4 cial, employee, consultant or any other individual
5 employed, retained or otherwise compensated by or
6 representative of the Executive Branch of the Govern-
7 ment of the State of Maine shall not be a member of
8 the council; but shall assist the council if so
9 requested. The ~~director of the office~~ planning direc-
10 tor or his representative shall attend all meetings
11 of the council.

12 The Governor shall designate the chairman from
13 among the members appointed to the council. The coun-
14 cil may elect such other officers from its members as
15 it deems appropriate.

16 Sec. 14. 22 MRSA §7110, as amended by PL 1981,
17 c. 703, Pt. A, §39, is further amended to read:

18 §7110. Powers and duties

19 The council, in cooperation with the ~~office and~~
20 ~~coordinating committee~~ planning committee, shall have
21 the power and duty to:

22 1. Advise, consult and assist. Advise, consult
23 and assist the Executive and Legislative Branches of
24 the State Government and the Judicial Council, espe-
25 cially the Governor, on activities of State Govern-
26 ment related to drug abuse prevention and treatment,
27 including alcoholism and intoxication. The council
28 may make recommendations regarding any function
29 intended to prevent drug traffic. If findings, com-
30 ments or recommendations of the council vary from or
31 are in addition to those of the ~~office or coordi-~~
32 ~~nating committee~~ planning committee, such statements
33 of the council shall be sent to the respective
34 branches of State Government as attachments to those
35 submitted by the ~~office~~ planning committee. Recom-
36 mendations may take the form of proposed budgetary,
37 legislative or policy actions. The council shall be
38 solely advisory in nature and shall not be delegated
39 any administrative authority or responsibility;

40 2. Serve as advocate. Serve as an advocate on
41 alcoholism and drug abuse prevention and treatment,

1 promoting and assisting activities designed to meet
2 at the national, state and community levels the prob-
3 lems of drug abuse and drug dependence. The council
4 shall serve as an ombudsman on behalf of individual
5 citizens and drug dependent people as a class in mat-
6 ters under the jurisdiction of Maine State Govern-
7 ment. It shall be a spokesman proponent on behalf of
8 drug abuse prevention to the ~~director, commissioner~~
9 planning director, planning committee, Governor,
10 Legislature, public at large and National Government;

11 3. Serve as advisory council. Serve as the
12 advisory council on behalf of the State of Maine to
13 the state agency agencies as required by the federal
14 regulations governing administration of the United
15 States Drug Abuse Office and Treatment Act of 1972,
16 as amended, and the United States Comprehensive Alco-
17 hol Abuse and Alcoholism Prevention, Treatment and
18 Rehabilitation Act of 1970, as amended; and such
19 other Acts of the United States as may heretofore or
20 hereafter be enacted. The council shall advise
21 regarding state and federal plans, policies, programs
22 and other activities relating to the drug abuse and
23 drug dependence in Maine the State. The council shall
24 submit their recommendations and comments on the
25 state plan, and any revisions thereof, and reports to
26 federal or state agencies. Statements at variance or
27 in addition to those of the office planning committee
28 shall be attached to the plan or reports upon submis-
29 sion by the office to agencies of the United States
30 Government and to state agencies;

31 4. Serve, through a subcommittee of the council
32 consisting of 5 persons including the chairman and 4
33 other members appointed by the chairman with the
34 advice and consent of the Governor, as the review
35 committee on behalf of the State of Maine responsible
36 for analysis and recommendation to the director con-
37 cerning the acceptability of proposals requesting
38 award of state administered grant funds for drug
39 abuse prevention and treatment under the United
40 States Comprehensive Alcohol Abuse and Alcoholism
41 Prevention, Treatment and Rehabilitation Act of 1970
42 and the United States Drug Abuse Office and Treatment
43 Act of 1972, and in order to insure coordination and
44 prevent duplication of services shall review and com-
45 ment on, under its own initiative or at the request

1 of any state or federal department or agency; any
2 application from any agency or organization within
3 the State to a state or federal department or agency
4 for financial assistance related to meeting the needs
5 of people who abuse or are dependent on drugs;

6 5. Review and evaluate. Review and evaluate on
7 a continuing basis, in cooperation with the office
8 planning committee, for the purpose of determining
9 the value and impact on the lives of people who abuse
10 or are dependent on drugs, state and federal policies
11 and programs relating to drug abuse and other activi-
12 ties affecting the people who abuse or are dependent
13 on drugs, conducted or assisted by any state depart-
14 ments or agencies;

15 6. Inform the public. Inform the public in
16 cooperation with the office planning committee, to
17 develop a firm public understanding of the current
18 status of drug abuse and drug dependence among
19 Maine's citizens, including information on effective
20 programs elsewhere in the State or nation, by col-
21 lecting and disseminating information, conducting or
22 commissioning studies and publishing the results
23 thereof, and by issuing publications and reports;

24 7. Provide public forums. Provide public
25 forums, including the conduct of public hearings,
26 sponsorship of conferences, workshops and other such
27 meetings to obtain information about, discuss and
28 publicize the need of and solutions to drug abuse and
29 drug dependence. The council may hold a state-wide
30 statewide conference, regional conferences and meet-
31 ings; and

32 8. Administer funds. Administer in accordance
33 with current fiscal and accounting regulations of the
34 State, and in accordance with the philosophy, objec-
35 tives and authority of this Act, any funds appropri-
36 ated for expenditure by the council or any grants or
37 gifts which may become available, accepted and
38 received by the council; and make, to be included in
39 the annual report of the office planning committee,
40 an annual report to the ~~director, commissioner,~~ Gov-
41 ernor and Legislature not later than September 1st of
42 each year on or before the first day of every regular
43 legislative session concerning its work, recommenda-

1 tions and interests of the previous fiscal year and
2 future plans; and shall make such interim reports as
3 it deems advisable.

4 Sec. 15. 22 MRSA §7112, first ¶, as amended by
5 PL 1981, c. 454, §5, is further amended to read:

6 State agencies proposing to develop, establish,
7 conduct, or administer drug abuse prevention programs
8 or to assist with such programs as covered by this
9 chapter shall, prior to carrying out such actions,
10 consult with the office planning committee.

11 Sec. 16. 22 MRSA §7112, second ¶, as amended by
12 PL 1981, c. 454, §6, is further amended to read:

13 All agencies of State Government shall advise the
14 office planning committee of their proposed fiscal
15 activities, especially budget requests and expendi-
16 tures, concurrently with their submission to the Bud-
17 get Office or to the Governor. All agencies of State
18 Government, concurrent with submission to that agen-
19 cy's approval authority, shall advise the office
20 planning committee of proposed legislation, fiscal
21 activities and administrative activities relating to
22 drug abuse prevention. State agencies shall, in the
23 implementation of their activities, keep the office
24 planning committee fully informed of their progress
25 and of any proposed changes in fiscal matters and
26 policy.

27 Sec. 17. 22 MRSA §7112, 3rd ¶, as enacted by PL
28 1973, c. 566, §1, is amended to read:

29 State agencies shall cooperate fully with the
30 office planning committee and council in carrying out
31 this chapter. The office planning committee and coun-
32 cil are authorized to request such personnel, finan-
33 cial assistance, facilities and data as will assist
34 the office planning committee and council to fulfill
35 its powers and duties.

36 Sec. 18. 22 MRSA §7113, as amended by PL 1973,
37 c. 788, §101, is repealed.

38 Sec. 19. 22 MRSA c. 1601, sub-c. V is enacted to
39 read:

1 past year's progress toward obtaining established
2 goals and objectives and the planning committee's
3 recommendations regarding allocations from the
4 Alcoholism Prevention, Education, Treatment and
5 Research Fund for the coming fiscal year;

6 B. By January 15, 1985, and biennially there-
7 after, a comprehensive plan containing statements
8 of measurable goals to be accomplished during the
9 coming biennium and establishing performance
10 indicators by which progress toward accomplishing
11 those goals will be measured; and

12 C. By January 15, 1987, and every 4th year there-
13 after, an assessment of the costs related to drug
14 abuse in the State and the needs for various
15 types of services within the State, including
16 geographical disparities in needs and the needs
17 of special populations of drug abusers.

18 3. Information and data. The planning committee
19 shall assemble and analyze the information necessary
20 to carry out its other duties. The planning commit-
21 tee shall by January 15, 1984, establish uniform data
22 standards which shall be used by all programs receiv-
23 ing state funds for drug abuse prevention, education,
24 treatment and research for the fiscal year which
25 begins on July 1, 1984. These standards shall pro-
26 vide information relating to at least the following:
27 Region, income category, demographic features and
28 impact on the economic sector. To the extent fea-
29 sible, information shall maintain compatibility with
30 federal information sharing standards.

31 4. Recommendations. The planning committee may
32 make recommendations to the respective branches of
33 State Government concerning drug abuse activities and
34 shall consult with and be consulted by any state
35 agency regarding the policies, priorities and objec-
36 tives of its functions relating to drug abuse.

37 5. Review. The planning committee shall review
38 all proposed legislation, activities, plans, policies
39 and other administrative functions of other state
40 agencies relating to drug abuse.

41 §7133. Planning director

1 The planning committee shall be staffed by a
2 director who shall be appointed by the planning com-
3 mittee with the approval of the Governor and who
4 shall be unclassified. The planning director shall
5 be a person qualified by training and experience in
6 drug abuse and alcoholism, and who has experience,
7 knowledge and skill in planning, monitoring, evalu-
8 ating and coordinating drug abuse prevention ser-
9 vices.

10 The planning director shall provide staff support
11 to the planning committee and the council.

12 The planning director shall work under the super-
13 vision of the planning committee and shall be respon-
14 sible for the conduct of all of its responsibilities
15 and duties.

16 The planning director may employ, subject to the
17 Personnel Law and within the limits of funds avail-
18 able, competent professional personnel and other
19 staff necessary to carry out the purposes of this
20 chapter. He shall prescribe the duties of staff and
21 assign sufficient staff to the planning committee to
22 perform its powers and duties.

23 Sec. 20. 28 MRSA §475, sub-§2, as enacted by PL
24 1981, c. 454, §8, is repealed and the following
25 enacted in its place:

26 2. Commissioners' reports. The Commissioner of
27 Corrections, the Commissioner of Educational and Cul-
28 tural Services, the Commissioner of Human Services
29 and the Commissioner of Mental Health and Mental
30 Retardation, through the Alcohol and Drug Abuse Plan-
31 ning Committee established in Title 22, chapter 1601,
32 subchapter V, shall prepare and submit the reports
33 specified in that subchapter. Other governmental
34 departments and nongovernmental organizations may be
35 consulted in the preparation of these reports. The
36 planning committee may hold hearings, solicit and
37 receive proposals or take any other action they con-
38 sider necessary and appropriate in order to prepare
39 their reports.

40 Sec. 21. Appropriation. The following funds are
41 appropriated from the General Fund to carry out the
42 purposes of this Act.

1 a strong centralized planning process as recommended
2 by a study commissioned by the Joint Select Committee
3 on Alcoholism of the 110th Legislature. The purposes
4 of the bill are to improve the scope and quality of
5 planning for alcohol and drug abuse services, to bal-
6 ance the interests of different client groups,
7 departmental programs and other concerned parties and
8 to establish a source of firm leadership and coordi-
9 nated, comprehensive decision making. The purposes
10 are accomplished by:

11 1. Implementing a 4-year cycle of planning which
12 includes periodic needs assessments, statement of
13 service goals, biennial allocation plans and regular
14 performance evaluations;

15 2. Developing a comprehensive plan of service
16 which identifies both long-range and short-range
17 strategies and which balances:

18 A. The needs of various target groups;

19 B. Direct treatment and prevention;

20 C. Maintenance of current delivery methods with
21 development of new methods; and

22 D. Unmet service needs and limited resources;

23 3. Establishing an appropriate division of labor
24 among the departments;

25 4. Designing and implementing a consistent data
26 collection system which provides reliable information
27 on clients and services;

28 5. Instituting program evaluation procedures
29 which measure the effectiveness of services in terms
30 of clients' outcome;

31 6. Establishing a single final point of opera-
32 tional authority, direction and decision making in
33 the management of alcohol and drug programs;

34 7. Enlarging and strengthening the role of the
35 Maine Council on Alcohol and Drug Abuse Prevention
36 and Treatment by:

1 A. Broadening the perspective of the council by
2 including appropriate representatives of inter-
3 ests served by all departments; and

4 B. Reinforcing the responsibility of the council
5 in the planning process by emphasizing its direct
6 access to the Governor, the commissioners and
7 appropriate staff-level planning committees;

8 8. Maintaining an open and consistent relation-
9 ship between the Legislature and the commissioners by
10 establishing the alcohol and drug staff director as a
11 permanent liaison; and

12 9. Establishing the principle of allocation
13 decisions based on priority of need and objective
14 evaluation of effectiveness.

15 This bill appropriates money from the General
16 Fund and allocates money from the Alcoholism Preven-
17 tion, Education, Treatment and Research Fund to carry
18 out the purposes of the bill. An additional alloca-
19 tion from the Alcohol, Drug Abuse and Mental Health
20 Services Block Grant will provide 2 additional posi-
21 tions and additional money to the planning committee.

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