

MAINE STATE LEGISLATURE

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LAWS
OF THE
STATE OF MAINE

AS PASSED BY THE
ONE HUNDRED AND THIRTEENTH LEGISLATURE
FIRST REGULAR SESSION

December 3, 1986 to June 30, 1987

Chapters 1-542

PUBLISHED BY THE REVISOR OF STATUTES
IN ACCORDANCE WITH MAINE REVISED STATUTES ANNOTATED,
TITLE 3, SECTION 163-A, SUBSECTION 4.

Twin City Printery
Lewiston, Maine
1987

PUBLIC LAWS

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of any fact stated in the certificate or documents attached to the certificate. The certificate under the seal shall be presumed to be that of the Chief Medical Examiner. A facsimile of the signature of the Chief Medical Examiner imprinted on any certificate described in this subsection shall have the same validity as his written signature and shall be admissible in court.

7. Medical records provided. In any medical examiner case, upon oral or written request of the medical examiner, any individual, partnership, association, corporation, institution or governmental entity which has rendered treatment pertaining to the medical examiner case shall as soon as practicable provide the medical examiner with all medical records pertaining to the person and the treatment provided.

8. Certain information confidential. When in the custody of a medical examiner, contents of suicide notes, reproductions of medical reports and reports compiled by the police incorporated into the file, communications with the Department of the Attorney General, death certificates and any amendments made to the certificates, except for the information for which the medical examiner is responsible, as listed in section 2842, subsection 3, and not ordered "withheld" by the Attorney General, and reports pertaining to cases under investigation by his office shall be confidential.

9. Release of medical examiner's reports. State, county and local agencies and institutions, public and private, in possession of reports of the Office of Chief Medical Examiner shall not release them, but shall refer all the requests to the Office of Chief Medical Examiner. The Office of Chief Medical Examiner need not release medical examiner reports to the public until a next of kin has been contacted.

10. Cooperation with research requests. The Office of Chief Medical Examiner shall cooperate with research requests by supplying abstracted data and copies of reports to interested persons and agencies consistent with the available resources of the office.

Effective September 29, 1987.

CHAPTER 330

H.P. 964 — L.D. 1293

AN ACT to Allow the Employment of Part-time Superintendents of Schools.

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

Sec. 1. 20-A MRSA §1055, sub-§8, as amended by PL 1983, c. 806, §12, is repealed and the following enacted in its place:

8. Full-time employment. The entire time of a full-

time superintendent shall be devoted to superintendence in the school supervisory unit which employs the superintendent. A full-time superintendent may perform educational service outside of the supervisory unit with the approval of the commissioner and with the consent of the school board.

Sec. 2. 20-A MRSA §1055, sub-§8-A is enacted to read:

8-A. Part-time employment. A superintendent who is employed as a part-time superintendent shall perform the duties agreed upon between the superintendent and the employing school board, subject to approval by the commissioner.

Effective September 29, 1987.

CHAPTER 331

S:P. 351 — L.D. 1043

AN ACT to Ensure Accessibility to Mental Health Services for Deaf Persons.

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

34-B MRSA §3005, as enacted by PL 1985, c. 467, is repealed and the following is enacted in its place:

§3005. Services to persons who are deaf or hearing impaired

1. Accommodations and services. The Bureau of Mental Health shall provide accommodations and services for deaf or hearing impaired persons providing access to mental health programs funded or licensed by the bureau. These accommodations shall include, but are not limited to, the following:

A. Appropriate mental health assessments for deaf clients;

B. Provision of interpreter services for treatment;

C. Education and training for mental health staff providing treatment to deaf persons;

D. Placement of telecommunication devices for the deaf in comprehensive community mental health facilities;

E. Support and training for families with deaf members who experience a mental health problem; and

F. Establishment of a therapeutic residence program for persons who are deaf and in need of residential mental health treatment. The therapeutic residence program shall be operated in conjunction with existing rehabilitation, education, mental health treatment