

MAINE STATE LEGISLATURE

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LAWS
OF THE
STATE OF MAINE

AS PASSED BY THE

ONE HUNDRED AND TWENTY-SECOND LEGISLATURE

SECOND SPECIAL SESSION
July 29, 2005

SECOND REGULAR SESSION
January 4, 2006 to May 24, 2006

THE GENERAL EFFECTIVE DATE FOR
SECOND SPECIAL SESSION
NON-EMERGENCY LAWS IS
OCTOBER 28, 2005

THE GENERAL EFFECTIVE DATE FOR
SECOND REGULAR SESSION
NON-EMERGENCY LAWS IS
AUGUST 23, 2006

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

Penmor Lithographers
Lewiston, Maine
2006

Whereas, in the judgment of the Legislature, these facts create an emergency within the meaning of the Constitution of Maine and require the following legislation as immediately necessary for the preservation of the public peace, health and safety; now, therefore,

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

Sec. 1. 12 MRSA §6959-A, as enacted by PL 2005, c. 160, §1, is repealed and the following enacted in its place:

§6959-A. Dragging in Taunton River area

1. Dragging prohibited. A person may not fish with any drag or combination of drags in the territorial waters westerly and northerly of Sullivan Falls in the towns of Hancock and Sullivan in Hancock County, including Egypt Bay, Taunton Bay and Hog Bay. This section does not apply to research activities in Taunton Bay that are authorized by the commissioner. Research activities may include, but are not limited to, scientific studies and experimental commercial mussel harvesting.

2. Exception. Notwithstanding subsection 1, a person may fish with any drag or combination of drags in the territorial waters of Taunton Bay north of Sullivan Falls and south of the Route 1 bridge in the towns of Hancock and Sullivan in Hancock County.

3. Repeal. This section is repealed July 1, 2008.

Emergency clause. In view of the emergency cited in the preamble, this Act takes effect when approved.

Effective February 2, 2006.

CHAPTER 467

H.P. 984 - L.D. 1420

An Act To Establish a Maternal and Infant Death Review Panel

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

Sec. 1. 22 MRSA §261 is enacted to read:

§261. Maternal and infant death review panel

The department shall establish the maternal and infant death review panel in accordance with this section.

1. Definitions. As used in this section, unless the context otherwise indicates, the following terms have the following meanings.

A. "Center" means the Maine Center for Disease Control and Prevention.

B. "Deceased person" means a woman who died during pregnancy or within 42 days of giving birth or a child who died within 1 year of birth.

C. "Director" means the director of the center.

D. "Panel" means the maternal and infant death review panel established under this section.

E. "Panel coordinator" means an employee of the center who is appointed by the director or a person designated by the panel coordinator. The panel coordinator must be a licensed physician or registered nurse or other health care professional licensed or registered in this State.

2. Membership. The panel consists of health care and social service providers, public health officials, law enforcement officers and other persons with professional expertise on maternal and infant health and mortality. The director shall appoint the members of the panel, who serve at the pleasure of the director. The director shall appoint an employee of the center to serve as panel coordinator.

3. Contact with authorized representatives. The first contact pursuant to this section with a parent or parents or other authorized representative of a deceased person may not occur prior to 4 months after the death and must:

A. Be by letter from the State Health Officer on letterhead of the center; and

B. Include a separate invitation to participate in a review of the death of the deceased person from a statewide organization dedicated to improving the health of babies by preventing birth defects, premature birth and infant mortality.

4. Duties and powers of panel coordinator. The panel coordinator has the following duties and powers.

A. The panel coordinator shall review the deaths of all women during pregnancy or within 42 days of giving birth and the majority of deaths of infants under 1 year of age, with selection of cases of infant death based on the need to review particular causes of death or obtaining a representative sample of all deaths.

B. Prior to accessing medical records, the panel coordinator shall obtain permission in all cases for access to those records from the parent or

parents or other authorized representative of the deceased person.

C. Prior to conducting a voluntary interview, the panel coordinator shall obtain permission in all cases for the interview from the parent or parents or other authorized representative of the deceased person.

D. The panel coordinator may conduct voluntary interviews with the parent or parents of a deceased child or other relevant family members of a deceased person. The purpose of the voluntary interview is limited to gathering information or data for the purposes of the panel in summary or abstract form without family names or patient identifiers. A person who conducts interviews under this paragraph must meet the qualifications for panel coordinator and also have professional experience or training in bereavement services. A person conducting an interview under this paragraph may make a referral for bereavement counseling.

E. The panel coordinator shall prepare a summary or abstract of relevant information regarding the deceased person, as determined to be useful to the panel, but without the name or identifier of the deceased person, and shall present the summary or abstract to the panel.

5. Duties and powers of panel. The panel has the following duties and powers.

A. The panel shall conduct comprehensive multidisciplinary reviews of data presented by the panel coordinator.

B. The panel shall present an annual report to the department and to the joint standing committee of the Legislature having jurisdiction over health and human services matters. The report must identify factors contributing to maternal and infant death in the State, determine the strengths and weaknesses of the current maternal and infant health care delivery system and make recommendations to the department to decrease the rate of maternal and infant death.

The panel shall offer a copy of the annual report to the parent or parents or other authorized representative of the deceased person that granted permission to the panel coordinator for a voluntary interview under subsection 4, paragraph C.

C. The panel shall share the results of its data reviews and recommendations with the child death and serious injury review panel established pursuant to section 4004, subsection 1, paragraph E. The maternal and infant death review panel may request and review data from the child death

and serious injury review panel, regardless of any prior work by the child death and serious injury review panel.

6. Limitations. The panel coordinator may not proceed with reviews of medical records or voluntary interviews without the permission of the parent or parents or other authorized representative of the deceased person. The panel coordinator may not photocopy or retain copies of medical records. In performing work under this section, the panel coordinator shall minimize the burden imposed on health care practitioners, hospitals and facilities.

7. Confidentiality. All records created or maintained pursuant to this section, other than reports provided under subsection 5, paragraph B, are protected as provided in this subsection. The records are confidential under section 42, subsection 5. The records are not open to public inspection, are not public records for the purposes of Title 1, chapter 13, subchapter 1 and are not subject to subpoena or civil process nor admissible in evidence in connection with any judicial, executive, legislative or other proceeding.

8. Immunity. A health care practitioner, hospital or health care facility or the employee or agent of that person or entity is not subject to civil or criminal liability arising from the disclosure or furnishing of records or information to the panel pursuant to this section.

9. Funding. The department may accept any public or private funds to carry out the purposes of this section.

10. Rulemaking. The department shall adopt rules to implement this section, including rules on collecting information and data, selecting members of the panel, collecting and using individually identifiable health information and conducting reviews under this section. The rules must ensure that access to individually identifiable health information is restricted as much as possible while enabling the panel to accomplish its work. The rules must establish a protocol to preserve confidentiality, specify the manner in which family and authorized representatives will be contacted for permission and maintain public confidence in the protection of individually identifiable information. Rules adopted pursuant to this subsection are routine technical rules as defined in Title 5, chapter 375, subchapter 2-A.

11. Repeal. This section is repealed January 1, 2011.

See title page for effective date.
