

[Disagreement at the State House Allows “Good Samaritan” to Die](#)

On July 1, Rhode Island’s “Good Samaritan” law expires, repealing immunity from legal repercussions for those who contact emergency services for someone overdosing on narcotics. In a sadly ironic twist, the bill flatlined due to warning of legal repercussions by the Attorney General’s office based on an overdose of leeway injected into the original bill. The Rhode Island General Assembly adjourned on Thursday, June 25, without coming to an agreement between the House and Senate versions of the bill to extend the term of the law, originally enacted in 2012, past the three-year sunset provision with which it was written.

Unlike the House bill, 2015 H — 5076 Sub A, the Senate version, 2015 — S 0576 Sub A, sponsored by Senator Michael McCaffrey (D-29) intended to expand the immunity to include those on probation or parole as well as those involved in activity related to the “possession or delivery of a controlled substance or drug paraphernalia, or the operation of a drug-involved premises ...” The House version, sponsored by Representative Robert Craven (D-32), simply amended the sunset provision from 2015 to 2017, allowing the current legislation to continue to offer immunity from criminal prosecution with the exception of a crime involving the manufacture, possession with the intent to manufacture or possession with the intent to deliver a controlled substance.

Regardless of one’s point of reference on this issue, it is inarguable that this debate should have occurred fully, and concluded with a bill that emerged from committee and to the desk of Governor Raimondo. Instead, the issue was swept under the rug, like so many who will die from narcotic overdose in the coming months. This is not to say that such a discourse is easy. There are complexities and concerns from both sides that require time and effort to arrive at a resolution. However, the simple conclusion that one can deduce is that the prospect of such a debate in the General Assembly following the bicameral approval of the budget is slim to none. Like Memorial Day to summer, the approval of the budget signifies the unofficial conclusion of the GA’s session. And, now, Rhode Island, which was listed by a report by Trust for America’s Health and the Robert Wood Johnson Foundation as having the seventh highest per capita deaths by narcotic overdose in the country, is positioned to have even more.

Recovery from narcotic addiction is difficult and painful. However, so is a prison term. Neither one, however, is a death sentence. What is, irrefutably, a death sentence is death by overdose. In fact, 100% of people who experience death by overdose will die. This means there is no hope of treatment or recovery for these people. As a person in long-term recovery myself, I can testify first-hand to the difficulty of an addict living in sobriety. And, although I spent years poisoning myself in the name of the fantasy of “better living through chemistry,” I was extremely fortunate to have never used heroin, and therefore, never forced to face the physical and psychological suffering that comes with detox and withdrawal from such drugs. I have, however, lost friends to overdose. I often wonder if there was someone else present who, rather than dialing 911 and facing sirens and handcuffs, scooped up the evidence of his or her presence and left the scene. If such a person were present and did not fear going to jail, would I still have friends, perhaps like myself, living in recovery?

At the risk of sounding like a man of many years who groans every time he rises from a chair and begins every sentence with, “When I was your age ...,” I will say that drugs are more dangerous now than

before. By that I mean, in an effort to make more money, dealers and manufacturers of heroin are cutting it in ways that make it stronger rather than weaker. The introduction of fentanyl to heroin has allowed those doing the cutting to make a little go a long way. For those who are unfamiliar, fentanyl is an extremely powerful, pharmaceutical, synthetic opioid, painkiller generally administered to be time released. When “cooked” and cut with heroin, it makes the potency of the drugs not only stronger, but unpredictable in their levels of concentration. Most heroin distributors do not possess an advanced degree in chemistry. They are not Walter White.

When Joe Lindbeck, Assistant to the Attorney General and in charge of legislative affairs testified before the House Committee on Judiciary, she and the Office of the Attorney General had obviously given this matter due consideration. AG Kilmartin’s office was in favor of extending the immunity. Lindbeck, in fact, stated, “We have absolutely no objection to expansion of immunity to people on probation or parole.” This sentiment was reinforced by Rebecca Nieves McGoldrick of Protect Families First, who testified about her experiences preparing prison inmates about to be released. Nieves McGoldrick expressed teaching them that being in the presence of a drug user who overdoses, if police and rescue become involved, violates parole. So, again, the difficult choice is (return to) prison, or watch someone die.

The exchange that best reflects the issue was expressed between Ms. Lindbeck, on behalf of the Attorney General’s Office and House Judiciary Chair, Cale Keable (D-47). Lindbeck expressed concern specifically with regard to the breadth of the immunity laws the prospective legislative amendment would grant to those in possession with intent to deliver, possession with intent to manufacture, or manufacturing controlled substances. Lindbeck said, “We do not think that the person giving these people the heroin or the fentanyl-laced heroin and killing them should be immune to prosecution because they made a phone call.” She continued, “We have one case officially going on right now where a person is being tried for murder for delivering fentanyl to a girl who died. If he would have called 911 during overdose, under this [new] provision, he would have been immune from prosecution.”

Chair Keable interjected, “And she might be alive.”

“Maybe,” said Lindbeck, “But maybe not.”

The laws surrounding charging a person with felony murder are fairly strict. My suspicion is that it would take an extremely talented attorney to argue a case that would result in one charged with felony murder to walk with immunity. But, legal complexities aside, the minutiae of the Senate amendment to the language resulted in too much effort to prevent life saving legislation from surviving past sunset. And, it is the fine print, all too often far more important than the selling price, that now leaves those suffering from addiction who may unfortunately encounter the “jackpot” that offers them the help they need to live in recovery. Only, however, if they live at all. If those present are too intimidated by the prospect of legal repercussions to make the call that may save a life, all that is left is a body. There will be no life to save.

The final point I will make is this. Having this immunity provision is not the only conversation we need to have about this epidemic. But, slowing the epidemic itself, is the first step in the conversation. And, when narcotic overdose is responsible for more Rhode Island deaths than car accidents and fires, failing to compromise and pass legislation, 90% of which is agreed upon by both chambers, keeps mostly harmless drug-offenders out of prison, and saves lives, should at least be voted on by the whole General Assembly.

Is political posturing more important than governing in a manner that saves the lives of some of Rhode Island's most vulnerable citizens? Maybe. Maybe not.

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