



Enfield Police Department

Alaric J. Fox, Chief of Police



March 1, 2021

Connecticut General Assembly
State Capitol
Hartford, Connecticut 06106-1562

Through: Representative Carol Hall

Ladies and Gentlemen:

It is my pleasure to provide you with the attached letter of support in regard to HB5583. As you are certainly aware, the opioid crisis has impacted every corner of Connecticut and numerous sectors of our state, both public and private, have mobilized in an effort to address this scourge.

The Office of the Chief Medical Examiner reports that between 2015 and 2020 the town of Enfield suffered 73 accidental overdose deaths, for an average of 12.3 deaths per year. Additionally, our records reflect 51 Narcan “saves” that occurred in 2019 and 62 that occurred in 2020. Some individuals have been revived on more than one occasion. Some have been revived on more than one occasion within the same night. As to 2020 and Connecticut as a whole, our state saw 1,259 overdose deaths for the year, our highest total yet. Our per capita death rate has continually ranked among the nation’s highest. An opioid is present in approximately 94% of Connecticut’s overdose deaths. The powerful synthetic opioid “fentanyl” was involved in approximately 78% of these cases.

Against this troubling backdrop, and against the positive efforts that we have made in address this concern, one notable limitation continues to exist: In the event of a Narcan “save” a now-coherent individual is fully permitted to decline any further medical care. Members of the public, as well as the members of the law enforcement profession, are astonished to learn that, under the dictates of Conn. Gen. Stat. 17a-503 and similar statutes, an individual who is unable to care for themselves owing to a psychiatric disability, or even an alcohol issue, can be compelled through the protective custody process to be brought to the local emergency room for advanced medical care. An individual who has just been revived from the brink of an opioid overdose death, through the lifesaving administration of Narcan or similar drug, can (and often does) frequently decline any further care, however. This dichotomy only exacerbates the challenges that we face as a community, and as a state, in routing those who need care to this care, even when they will not acknowledge, on scene, their need for this assistance.

Finally, as to the concern that has previously been raised that this request for legislative action would only allow law enforcement another tool with the potential for misapplication and abuse, I would respectfully offer that an individual who we locate intoxicated by narcotics is technically in possession of narcotics at that time and is, therefore, subject to arrest. We seek what is in essence, a lesser, statutory tool, to ensure the provision of care to persons so desperately in need of it that does not trigger the lodging of any criminal charges or the intervention of the criminal justice system.



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I urge your favorable review and reflection upon HB5583 in order to allow us an additional tool in rectifying this concern.

Sincerely yours,

Chief Alaric J. Fox
Enfield Police Department