



**STATE OF MAINE  
DEPARTMENT OF PUBLIC SAFETY  
MAINE STATE POLICE**

**COL JOHN E. COTE  
CHIEF**

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**TESTIMONY OF JONATHAN WILSON  
SERGEANT, MAINE STATE POLICE RECORDS MANAGEMENT**

**Testimony Neither For Nor Against LD 1392  
An Act Directing the Maine Center for Disease Control and Prevention To  
Release Annually Public Health Data Regarding Certain Fatalities and  
Hospitalizations  
Thursday April 26<sup>th</sup> @ 0900 hours**

Representative Gramlich, Senator Sanborn, other distinguished Members of the Committee:

My name is Jonathan Wilson, I am a Sergeant with the Maine State Police, and I oversee the Records Management Unit, which includes Uniform Crime data collection, at the Department of Public Safety. I present this testimony on behalf of the Department neither for nor against LD 1392.

My purpose today is to present information relevant to data that is currently collected by law enforcement agencies in Maine, as well as the logistical and technical hurdles the bill presents in terms of collection of additional data.

The bill proposes to collect data on firearm-related fatalities, sorted by victim age, in 4 specific categories: Homicides, suicides, accidents, and hospitalizations that did not result in death. The data would also collect information as to the type, make and model of firearm involved in each incident.

As you may know, Maine State Police oversee the data submission of Uniform Crime Reports (UCR) for every municipal, county and state-wide law enforcement agency in the state. UCR data collection standards are set by the FBI. Of the four categories presented for data collection in LD 1392, currently only homicide data is collected in UCR, and that homicide data does not include specifics on the firearm make and model. The other 3 categories of suicide, accidents and hospitalizations are not crimes, so therefore do not fall under collection guidelines established by the FBI.

This means that there is currently no centralized repository from law enforcement in Maine where data on suicides, accidents of hospitalizations can be compiled and provided to the CDC. Further, there are no set data collection standards in Maine for entry of these types of reports. While it is extremely likely an agency will collect information on a firearm involved in a suicide or accident, that data is currently only housed at that individual agency, per that agency's policies on reporting, and is not currently compiled or accessible in any centralized database in Maine.

In addition, the last categorization of hospitalization may present some unique challenges. While hospitals are mandated to report any gunshot victims that come to their facility, police reports often will not have any sort of standardized data regarding that hospitalization information, other than listing the hospital as the entity calling in the complaint.

What this leads to is that in order for the data collection in this bill to be successful, a centralized repository would need to be established where law enforcement could submit the relevant data in a standardized fashion. Such as repository would have to be constructed and maintained on an ongoing basis. This would allow for the collection of vetted information in a standardized fashion, and for such information to then be provided to the CDC. Research would need to be done as to the costs to build and maintain such a database, but it would undoubtedly require substantial costs and time to establish such a mechanism to gather and report on the data elements this bill looks to collect.

In conclusion, I ask that you please weigh the information presented in this testimony when considering LD 1392. On behalf of the Department of Public Safety and the Maine State Police, I thank you for your time. If there are questions or you need more information about my testimony, I will do my best to provide more information for any work session that may be held.

Thank you,

Jonathan Wilson  
Sergeant  
Maine State Police