

### **STATEMENT OF**

# DONALD (MAX) DORSEY, II

## **OF THE**

# SOUTH CAROLINA LAW ENFORCEMENT DIVISION (SLED)

# BEFORE THE SUBCOMMITTEE ON HEALTHCARE, DISTRICT OF COLUMBIA, CENSUS & THE NATIONAL ARCHIVES

# COMMITTEE ON OVERSIGHT AND GOVERNMENT REFORM

UNITED STATES HOUSE OF REPRESENTATIVES

112<sup>th</sup> CONGRESS OF THE UNITED STATES OF AMERICA

**JULY 24, 2012** 

#### Introduction

Chairman Gowdy, Ranking Member Davis, and Members of the Subcommittee:

By way of introduction, my name is Max Dorsey and I serve as a Lieutenant with the South Carolina Law Enforcement Division ("SLED"). SLED is the State's investigative authority with specific and exclusive jurisdiction over various functions and activities within the Palmetto State. Over the past 17 years, I have worked with SLED in several capacities, most of which have been focused on narcotic investigations. I am currently a Supervisory Special Agent in the Narcotics Unit and I am also SLED's Clandestine Laboratory Coordinator responsible for directing matters related to the enforcement of South Carolina's efforts to stop the manufacturing of illegal narcotics.

Thank you for giving me the opportunity to participate in today's hearing. My testimony will discuss how domestic methamphetamine production is impacting South Carolina and offer a solution as to how Congressional action can help law enforcement agencies across the country curtail the domestic production of methamphetamine.

#### **Background**

Although South Carolina has dealt with methamphetamine trafficking for decades and users lives have been ruined due to the drug's destructive nature, we have recently discovered the meth "manufacturing" epidemic has now reached our State. In 2007, SLED began receiving more frequent calls from Sheriff's offices and police departments regarding small scale meth manufacturing labs. These labs, commonly referred to as One-Pot labs, were typically capable of producing a few grams of meth. The labs were very small in size and were contained in plastic bottles, usually one to two liter drink bottles. Unfortunately, I report to you today that South Carolina is grappling with this meth lab epidemic in ways which we never could have imagined.

These domestic meth labs are treacherous and are increasing in frequency in a mind-boggling manner. The social, economic, health, environmental, and financial well-being of our communities is being negatively impacted due to this rampant increase in domestic meth manufacturing.

Methamphetamine, commonly known as "meth," is a highly addictive stimulant affecting the central nervous system. Although most of the methamphetamine used in this country comes from foreign or domestic super-labs, the drug is also easily made in small clandestine laboratories, with relatively inexpensive over-the-counter ingredients. These factors combine to make methamphetamine a drug with high potential for widespread abuse.<sup>1</sup>

Most chemicals used to produce methamphetamine are extremely hazardous. Some of these elements are highly volatile and may ignite or explode if mixed or stored improperly. Fire and explosion pose risks not only to the individuals producing the drug but also to anyone in the surrounding area, including children, neighbors, and emergency responders. Methamphetamine production is dangerous, even if a fire or explosion does not occur. Exposure to the toxic chemicals used to produce methamphetamine poses a variety of health risks including serious respiratory problems, severe burns, and damage to internal organs. Furthermore, methamphetamine production threatens the environment. The average methamphetamine laboratory produces five to seven pounds of toxic waste for each pound of manufactured methamphetamine. Methamphetamine manufacturers often dispose of this waste improperly, causing contamination of the soil and nearby water supplies.

 $<sup>^{1}\,\</sup>underline{\text{http://www.drugabuse.gov/publications/research-reports/methamphetamine-abuse-addiction/what-methamphetamine}$ 

Criminals are becoming bolder and more innocent people are being put in harm's way as meth manufacturers combine these toxic chemicals during the manufacturing process.

For example, last March, Investigators with the Greenville County Sheriff's Office in South Carolina seized a meth lab where a child was present. After processing the site, Sheriff's Deputies learned through their investigation that just minutes before they entered the residence, a three year old girl actually held the meth lab bottle while the reaction was taking place. Fortunately, this ticking time bomb did not ignite or explode while the child had the reaction vessel in her hands. However, after further examination by medical personnel, the little girl tested positive for methamphetamine in her system because she had been present in the meth manufacturing environment.

The expansion of meth labs are unfortunately becoming so frequent in our state that local news outlet WSPA in Spartanburg County maintains a meth lab tracker to inform the public of incidences.<sup>2</sup> Law enforcement data further demonstrates the rapid increase in meth lab discoveries within our state.

<sup>&</sup>lt;sup>2</sup> http://www2.wspa.com/methlocations/

Reported Clandestine Laboratory Incidents in South Carolina<sup>3</sup>

Year	Reported Incidents
January 1, 2007 to December 31, 2007	26
January 1, 2008 to December 31, 2008	56
January 1, 2009 to December 31, 2009	99
January 1, 2010 to December 31, 2010	125
January 1, 2011 to December 31, 2011	267
January 1, 2012 to July 1, 2012	302

According to the El Paso Intelligence Center ("EPIC"), South Carolina is now one of the top ten meth manufacturing states in the nation.<sup>4</sup> Despite several legislative and regulatory attempts to combat domestic meth production in our state, the above data clearly shows illicit meth manufacturing continues to rise at alarming rates.

#### Problem

This rapid increase in domestic meth labs has placed law enforcement personnel and our communities at a tremendous health and safety risk and has drastically burdened resources during these dire economic times. Most meth labs in South Carolina are found in a home or car and are usually discovered from a tip provided to law enforcement by a concerned person. There are many instances of meth labs violently exploding or burning due to the volatile nature of various production components. The myriad of toxic chemicals and fumes within a meth production environment often cause immediate respiratory, eye, and skin irritation. Let me be clear, entering a meth lab site is one of the most dangerous acts a law enforcement officer can do.

<sup>&</sup>lt;sup>3</sup> http://www.justice.gov/dea/concern/map lab seizures.html

<sup>4</sup> http://www.lsureveille.com/news/national-methamphetamine-lab-seizures-rose-again-in-2011-1.2705055#.T 90QJEt2So

In addition to this dire health and safety risk, our State is being forced to allocate an unsustainable amount of financial resources to meth lab investigations and hazardous waste removal from these sites. Since 2007, federal and state authorities have spent more than \$3 million to remove the gross contaminants from meth lab sites in South Carolina. This figure certainly does not include the cost incurred by local law enforcement, fire, medical, and environmental services that respond to these sites. Furthermore, this amount does not include the cost associated with decontaminating meth lab sites of all meth lab manufacturing contaminants. Recent changes in the Drug Enforcement Administration's policy to no longer pay for the removal of gross contaminants at meth lab sites has led South Carolina to fund the decontamination of these sites with State funds.

#### Solution

The aforementioned safety risks and resource strains are absolutely unnecessary. There is a way to solve the domestic meth lab epidemic. However, the law enforcement community needs your assistance in combating domestic meth manufacturing.

Over the past decade, several states and Congress have passed legislation in an attempt to combat the meth lab epidemic. Most of this legislation has sought to control access to meth's main ingredient, ephedrine ("EPH") and pseudoephedrine ("PSE"), which are main ingredients in cold medicines. An important piece of federal legislation was the Combat Methamphetamine Epidemic Act of 2005 ("CMEA"). This Act sought to limit a person's ability to purchase more than 3.6 grams of EPH/PSE per day and 9 grams per month. Although over-the-counter products contain varying amounts of EPH/PSE, these limits still allow an individual to purchase as much as one to three boxes of cold medicine per day up to the nine-gram monthly limit. In addition to these limits, the legislation requires retailers to maintain paper records of those persons who

purchase EPH/PSE based products and make these records available to law enforcement for inspection.

The intent of Congress in 2005 was to limit the daily purchases of products containing EPH/PSE, thus restricting the amount of this necessary precursor chemical in the marketplace being diverted for the domestic manufacturing of methamphetamine. Despite the good intentions of CMEA, we can now see that it has not been effective. The approach taken by Congress to solving the meth epidemic to this point is comparable to fixing a gushing, broken water faucet with cotton swabs. The precursor limitation approach simply attempts to mask the problem without targeting the source.

The pharmaceutical industry supports tracking precursor chemicals and brought forward a potential solution known as The National Precursor Log Exchange System ("NPLEX"). NPLEx was implemented in South Carolina on January 1, 2011, and provides law enforcement with an investigative tool to identify persons who purchase unusually high amounts of EPH/PSE products.

The intent of NPLEx was to better electronically track EPH/PSE purchases through a central, interlinking database. Despite the good intentions of NPLEx to better track and limit illicit EPH/PSE purchases, it has not stopped domestic meth manufacturing in South Carolina. NPLEx is not limiting illicit purchases. In fact, in our first year of utilizing NPLEx, South Carolina actually saw an <u>increase</u> in discovered meth labs. According to data maintained by SLED, since February of 2012, only ten percent of the meth lab seizures by law enforcement in South Carolina were the result of the use of NPLEx.

NPLEx has shown that since January 1, 2011, there have been 1,873,148 EPH/PSE transactions in South Carolina. These transactions have been conducted by 695,696 people.

Since there are approximately 4.6 million people in South Carolina, these numbers indicate that no more than fifteen percent of our State's population is buying these EPH/PSE products. Despite common perceptions that a plethora of South Carolinians utilize EPH/PSE based products, data provided by the pharmaceutical industry indicates only fifteen percent of the State's population actually purchase these products.

Any legislation that seeks to merely lower the purchase limit or track purchases does not effectively combat domestic meth production. It is too easy for criminals to subvert the CMEA and NPLEx through the practice of "smurfing." Smurfing is the act of employing a number of individuals for the sole purpose of purchasing the maximum daily and monthly limits of EPH/PSE based products and diverting these products to a person or persons that are engaged in the methamphetamine manufacturing process.

For example, meth manufacturers know they can only purchase the CMEA limit of 3.6 grams of EPH/PSE per day. Although this amount can be processed into a small amount of methamphetamine, it certainly cannot be used by many people for an extensive high. To seek more EPH/PSE for additional methamphetamine production, manufacturers employ individuals to travel to retailers to purchase their legal limits. Manufacturers then receive the EPH/PSE from the multiple people they have employed and produce more methamphetamine from the additional EPH/PSE they have accumulated from the "smurfers". Smurfing is a common practice seen by law enforcement officers throughout South Carolina and is indicative of large scale manufacturing organizations with the intent of distributing their product after manufacturing. The CMEA strategy to track EPH/PSE purchases assumed people would abide by the purchase limitation and use their own form of identification to make the purchase.

However, the unintended but actual consequences of this strategy are that "smurfers" often use fraudulent forms of identification, thus rendering the tracking system ineffective.

Despite CMEA and NPLEx, South Carolina has not seen even the slightest downturn in meth production. Instead, we have experienced the exact opposite. Domestic meth manufacturing is increasing and will likely continue to increase unless Congress enacts targeted legislation to combat our nation's meth epidemic. Despite all of our diligent efforts with current resources and the access to tracking data provided by NPLEx, law enforcement is overwhelmed.

There is good news in this meth epidemic story, and my law enforcement colleagues from the states of Oregon and Mississippi bear witness as to how domestic meth manufacturing can be virtually eliminated. In response to the growing meth crisis, Oregon and Mississippi passed new laws to prevent ephedrine and pseudoephedrine from entering the criminal marketplace. Their laws now require a prescription to purchase an EPH/PSE based product. It essentially returns these products to their proper role in the marketplace as excellent cold medicines, rather than the key ingredients for a dangerous, toxic, and highly-addictive narcotic. The results of Oregon's and Mississippi's targeted legislation have proven to be the most effective approach to combating domestic meth production within those states.

If we are serious about combating domestic meth production, Congress must pass legislation returning ephedrine and pseudoephedrine to prescription only. We have seen the absolute success of this approach in Oregon and Mississippi as meth manufacturing has plummeted in those states. The rescheduling of ephedrine and pseudoephedrine has had a direct causal effect in the decrease of local meth production.

While it is certainly within the purview of state governments to consider scheduling these products, I sincerely believe federal action to schedule is the best practice. Meth manufacturing

is highly mobile, and it is likely that as states begin to individually schedule EPH/PSE, meth manufacturing criminals will simply move and concentrate their operations in states with easy access to these products. Criminals will then transport their toxic product throughout the country via our nation's highways. A national approach is needed to solve the meth lab epidemic because of the interstate impacts of domestic meth production and transportation.

#### Conclusion

South Carolina has many great achievements to celebrate. Our newspaper headlines are filled with economic development success stories and great accomplishments of our talented and hardworking people. However, these headlines are often stained by the tragic reality of our meth lab epidemic.

In May of this year, a horrific fire destroyed sixteen apartment units in the Pine Harbour apartment complex in Goose Creek, South Carolina, killing three people. The victims of this tragedy were:

- ➤ 4 year old Samuel Garbe
- ➤ 19 year old Morgan Abernathy
- ➤ 69 year old retired Air Force Captain and Vietnam Veteran Joseph Raeth

These people did nothing wrong. They were victims of circumstance. Their circumstance was that they were in their apartment in close proximity to a meth lab. Although the manufacturing of meth cannot be exclusively proven to be the cause of the fire, it appears based upon information present at the scene that it most certainly may have contributed to the spread of the fire. During this manufacturing process, something went wrong and a fire ensued causing the destruction of sixteen apartment units in the complex and the death of three innocent victims. This is the reality.

Let me be clear. The majority of methamphetamine consumed in America is produced in super labs, most of which are outside this country. My comments today are not intended to convince you that the scheduling of EPH/PSE will absolutely solve the methamphetamine problem in America. However, my position is that enacting targeted legislation to restrict the sale of EPH/PSE products will essentially eliminate the domestic meth lab epidemic in the United States.

President Ronald Reagan once said:

"To sit back hoping that someday, some way, someone will make things right is to go on feeding the crocodile, hoping he will eat you last – but eat you he will".

Committee Members – the crocodile is alive and well and is preying on our criminal justice system, our environment, our health care system, our social welfare system, and our economy. This Committee has an opportunity to put the crocodile back in its cage and stop domestic meth labs in this Country by rescheduling ephedrine and pseudoephedrine.

Thank you for your time and I will be happy to answer any questions the Committee may have for me.

## SOUTH CAROLINA LAW ENFORCEMENT DIVISION

NIKKI R. HALEY
Governor



MARK A. KEEL Chief

# D. Max Dorsey, II Lieutenant / Supervisory Special Agent South Carolina Law Enforcement Division

A native of Chester, South Carolina, Lieutenant D. Max Dorsey, II is employed with the South Carolina Law Enforcement Division (SLED) and currently serves as the Supervisory Special Agent for the Narcotics Section of the State Grand Jury. He also serves as the Agency's Clandestine Laboratory Coordinator, which includes the management of South Carolina's Drug Lab Clean-Up Program.

Lieutenant Dorsey has more than fifteen years of law enforcement experience which includes more than eight years assigned as a Special Agent to the Narcotics Section of the State Grand Jury. He is recognized as an expert witness in narcotics trafficking investigations in South Carolina.

In 2010, Lieutenant Dorsey assisted in the formation and passage of the Omnibus Crime Reduction and Sentencing Reform Act in the South Carolina Legislature which, among other reforms, limited a person's daily amount of pseudoephedrine purchases.

Lieutenant Dorsey is a member of the Drug Sub-committee of South Carolina's US Attorney's Law Enforcement Coordinating Committee (LECC) and has been an instructor at the LECC's Narcotics Commanders School at the Department of Justice's National Advocacy Center since 2003.

For his diligent work and contributions to the State of South Carolina, Dorsey received the 2007 Strom Thurmond Award for Excellence in Law Enforcement, the highest law enforcement honor in the State.

Lieutenant Dorsey holds a Bachelor of Arts degree from the University of South Carolina with a major in Political Science.

