

BEFORE THE COUNCIL OF THE
METROPOLITAN SERVICE DISTRICT

FOR THE PURPOSE OF ADOPTING THE) RESOLUTION NO. 87-829
REGIONAL DRUG INITIATIVE)
RECOMMENDATIONS) Introduced by the
) Executive Officer

WHEREAS, The Regional Drug Initiative has recognized the impact of drug abuse and the illegal use of drugs on all sectors of our community; and

WHEREAS, The Regional Drug Initiative has conducted extensive studies, solicited public testimony and sought the participation of the entire community to develop a coordinated plan to free our community of illegal drugs and drug abuse; and

WHEREAS, It is necessary to coordinate our efforts effectively if we are to succeed in improving our community; now, therefore,

BE IT RESOLVED,

1. That the Council of the Metropolitan Service District adopts the October 30, 1987, "A Community Agenda to Combat Drug Abuse and Illegal Use of Drugs" and approve the implementation of this five-year work plan and agenda.

2. That the members of the Metro Council pledge to involve this agency in the discussions and actions required to implement the agenda.

ADOPTED by the Council of the Metropolitan Service District
this 10th day of December, 1987.


Richard Waker, Presiding Officer

A COMMUNITY AGENDA TO COMBAT DRUG ABUSE
AND
ILLEGAL USE OF DRUGS

THE REGIONAL DRUG INITIATIVE

OCTOBER 30, 1987

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RDI ACTION AGENDA

Goal 1. Foster and change social attitudes regarding drug use

Sample

Action: Direct a public information campaign targeted at youth

Goal 2. Make communities safe from drug abuse and crime

Sample

Action: Eliminate neighborhood drug houses

Goal 3. Support healthier lives for our citizens and families

Sample

Action: Prevent fetal drug syndrome; provide detoxification services for drug addicts

Goal 4. Promote a more productive work force

Sample

Action: Adopt substance abuse policies in all workplaces

Goal 5. Provide an attractive climate for economic development

Sample

Action: Encourage business to use vacant commercial space in target areas.

Goal 6. Increase coordination among government, business, schools, service providers, and citizens

Sample

Action: Develop coordinating bodies to focus on services for youth, mentally ill drug abusers and minorities

INTRODUCTION

The Regional Drug Initiative (RDI), formed in December, 1986, is a task force of policy makers from government, education, law enforcement, corrections, citizen groups, treatment providers, and private business. The Regional Drug Initiative is pioneering a coordinated effort to combat the problems of drug abuse on all fronts to free the community of illegal drugs. The overall strategy of RDI is to reduce the supply and availability of illegal drugs by supporting enforcement efforts as well as to reduce the demand for illegal drugs by fostering changes in social attitudes and increasing opportunities for recovery.

DATA SUMMARY

The need for a coordinated approach to combat illegal use of drugs and drug abuse was confirmed by the data gathered during the RDI planning process.

Some facts about drug abuse in Multnomah County:

- o Police estimate that there are as many as 1,000 drug houses in the metropolitan area.
- o Of the 500 homeless youth in our community, it is estimated that 100% are substance abusers.
- o Preliminary results of a drug use forecasting study revealed that 73.4% of incarcerated offenders in Multnomah County are drug users.
- o There are approximately 150 babies born each year in Multnomah County who are neurologically damaged as a result of narcotics abuse by their mothers while they were pregnant. This does not include fetal alcohol syndrome babies.
- o A 1985 study indicates that 10% of Oregon's eighth graders have used cocaine and amphetamines and 23% of eleventh graders have used cocaine.
- o Drug-related prosecutions increased by more than 100% in 1986 in Multnomah County.
- o Only two beds are available at no cost for detoxification of low-income drug abusers in Multnomah County.

These data only illustrate the broad range of findings which concern community leaders regarding the drug problem in Multnomah County.

THE RDI PLANNING PROCESS

In May and June of 1987, eight study committees were convened by the Regional Drug Initiative. They were charged with the task of analyzing issues and recommending solutions to the problems relating to drug abuse. These study groups involved over 100 volunteer experts who were guided in their work by the RDI Steering Committee. The specific areas of study with their respective chairs were:

Offenders and Drug Abuse - Harley Lieber, Community Corrections Manager for Multnomah County

Low Income Populations and Drug Abuse - Gretchen Kafoury, Multnomah County Commissioner

Drugs in the Workplace - Fred Stickel, Publisher, The Oregonian

Barriers to Treatment and to Treatment Planning for Minorities and Special Needs Populations - Morris Brewer, Clinical Director, Native American Rehabilitation Association

Dual Diagnosis Clients - Gary Smith, Director of Social Services for Multnomah County

Youth and Drug Abuse - Maralyn Turner, Administrator, Bullard, Korshoj, Smith, and Jernstedt, P.C. Attorneys at Law

Women and Drug Abuse - Ann Uhler, Executive Director, Comprehensive Options for Drug Abusers

Families and Drug Abuse - Patrick Vanzo, Director, Providence Addiction Treatment Services.

The recommendations of these study groups focused on developing coordinated efforts to address unmet needs and to change community attitudes. These recommendations were compiled in July, 1987, and reviewed by the RDI task force on August 3, 1987.

During August and September of 1987, three community forums were held to receive public testimony on the study groups' recommendations. Over 150 individuals participated in the public discussions. Hearings were held in Portland City Hall, Gresham City Hall, and at the King Neighborhood Facility in N.E. Portland.

Comments from neighborhood residents and other concerned individuals dramatically illustrated the pain, anger, and frustration that drugs have wrought in our community. The public testimony during these hearings stressed the need for early intervention and law enforcement at the neighborhood level. Support was expressed for study group recommendations regarding increased services to low-income individuals, minority sensitive programs, and fetal drug syndrome intervention.

In order to assure that all sectors of the community were heard from, interviews were also conducted with criminal justice, treatment, and community leaders. Early intervention and street level interdiction continued to receive support in these conversations.

After guiding the study group through their efforts, the RDI Steering Committee evaluated all the data and recommendations. The plan presented to the Regional Drug Initiative for approval consolidates the priorities of the entire community into an action agenda.

FORMAT

This is an action agenda for the next five years. The agenda outlines six broad social goals, specific program objectives, activities required to accomplish these objectives, first-year priorities, and proposed implementation steps. Evaluative criteria are provided with which to measure the effectiveness of the activities.

THE FUTURE

The Regional Drug Initiative will continue in its efforts to bring appropriate jurisdictions, agencies, organizations, and individuals together to implement the objectives under this plan.

The plan is intended to be a dynamic document. The community will revise this document as needs change. The overall strategy is intended to reduce both the demand for and the supply of illegal drugs. Reduction in supply and availability will be accomplished by continuing law enforcement efforts. Reduction in the demand for illegal drugs must result from changes in social attitudes and behaviors as well as increased opportunities for recovery.

GOAL 1. FOSTER AND CHANGE SOCIAL ATTITUDES REGARDING DRUG USE

"Everybody gets high.
Besides, there's nothing
I can do about it."
- A Portland youth

Need: Drug use for recreation is currently accepted in some social groups. This problem exists throughout our community regardless of age or social status. Frequently individuals who are concerned about this behavior feel reluctant or uncomfortable about confronting their peers' behavior. For some, the social pressure of these settings leads them to participate in drug abuse. Unfortunately, drug use has been tolerated as a part of our popular culture for the past twenty years. Many individuals feel hopeless about combatting this problem. For some with substance abuse problems, the fear of stigma makes them reluctant to seek treatment.

Objectives: The Regional Drug Initiative will change social attitudes regarding drug use by:

- o Supporting the concepts that prevention is preferable and cheaper than treatment but that recovery is possible;
- o Assuring our citizens that something can be done about the problem of drug abuse;
- o Warning people about the dangers of drug use;
- o Increasing individual awareness of the extent of the problem;
- o Educating people to understand that drug use is not acceptable recreation
- o Promoting recognition that illegal drug use is not a victimless crime;
- o Encouraging individuals in the community to feel free to speak out against drug use by their peers; and
- o Motivating people to recognize that it is acceptable and encouraged by the general community to receive treatment.

Activities: The Regional Drug Initiative will support adoption of programs by educators, employers, public agencies, the media, public officials, community groups, and religious organizations to accomplish these objectives by using the following methods:

- o Public affairs programs
- o Forums and workshops
- o Articles
- o Public service announcements
- o Peer education and social skill building efforts; and
- o Adoption of resolutions and public policies

Evaluation: Program activities will be evaluated through the development of a survey instrument to measure social attitudes and perceptions in the community. This survey will provide baseline information. Repeated surveying will measure changes in attitudes. Additional evaluation efforts will focus on individual program effectiveness and the number of programs developed.

Priorities for Year 1: The Regional Drug Initiative will develop a public information campaign and support existing public information campaigns to change social attitudes. The RDI will focus efforts on education and prevention of drug abuse among youth and special needs populations.

Implementation Steps For Year 1 Priorities :

1. Organize an interorganizational public relations team to determine goals, strategies, and budget. Assure that youth are involved.
2. Identify priority target populations for public information efforts.
3. Inventory existing efforts to assure coordination.
4. Seek sponsorship and assistance from local communications professionals.
5. Seek financial support from local, private and public sector resources.
7. Implement public information campaign.

GOAL 2. MAKE COMMUNITIES SAFE FROM DRUG ABUSE AND CRIME

"I feel like a hostage on my own block. My five-year old kid even found a dirty needle in the front yard."
- A neighborhood resident

Need: Drug abuse is directly linked to criminal activity. Preliminary results of a recent study of Multnomah County inmates found 73.4% to be under the influence of illegal drugs at the time of arrest. Drug sales in neighborhoods often result in increased crimes such as burglary and prostitution. The problems of drug-related crime are not isolated in any single neighborhood.

Objectives: The Regional Drug Initiative will increase neighborhood safety by involving the community in:

- o Working towards the reduction of burglary, theft, robbery, prostitution, and other drug-related crime rates;
- o Involving citizens directly in efforts to reduce fear in their communities; and
- o Encouraging the entire community to be involved in combatting drug-related crime.

Activities: The Regional Drug Initiative will encourage criminal justice, treatment, and neighborhood organizations to develop coordinated efforts to arrest, prosecute, and supervise drug involved offenders.

RDI will advocate for the dedication of new and existing resources to:

- o Promote crime prevention activities
- o Assess and target drug involved offenders, both juvenile and adult, with sanctions and treatment
- o Promote neighborhood cohesion
- o Target street enforcement of buyers and dealers; e.g. drug houses

Evaluation: Program success will be measured by the number of new and enhanced program efforts undertaken, reduced crime statistics, and survey information regarding changing attitudes towards community safety.

Priorities for Year 1: Develop programs to arrest, prosecute, sanction, treat and rehabilitate drug offenders. Focus significantly on drug involved offenders who are street and drug house dealers and committing a variety of crimes to support drug habits.

Implementation Recommendations for Year 1 Priorities:

1. Support criminal justice leaders in the development of new and continuation of existing interdiction and sanction strategies. Coordinate planning effort with neighborhood leaders and treatment agencies.
2. Develop additional treatment and supervision resources to facilitate community based rehabilitation efforts.
3. Identify program costs and resources available.
4. Develop criteria for target populations and communities.
5. Seek local, state, and federal funds for coordinated efforts.
6. Implement.

GOAL 3. SUPPORT HEALTHIER LIVES FOR OUR CITIZENS AND FAMILIES

"They just told me I'll have to wait six weeks to get into this program. I can't afford a private hospital and I need help now."

- An addict.

Need: Only two beds are available for detoxification of low-income drug addicts in Multnomah County. The majority of treatment programs for low-income individuals have waiting lists. Specialized programs are needed to address the needs of low-income women and other populations which remain underserved.

In addition, the problem of drug abuse must be recognized as a family problem. Fetal Drug Syndrome babies, children of substance abusers, as well as parents and siblings of abusers need support and treatment if the cycle of drug abuse is to be broken.

Objectives: The Regional Drug Initiative will help provide all citizens access to a continuum of services from detoxification to rehabilitation by:

- o Assessing and providing treatment for drug involved target populations;
- o Increasing public detoxification and treatment for low-income and homeless populations;
- o Reducing fetal drug and alcohol syndrome births;
- o Helping families recognize and intervene in drug abuse problems of family members;
- o Assuring that the entire family has access to treatment as well as the identified abuser;
- o Providing drug involved women with opportunities to maintain bonds with their children as they eliminate their bond to drugs;
- o Developing systems to ensure that entitlement programs reduce rather than inadvertently enable drug abuse; and
- o Providing programs to improve and enhance parenting skills.

Activities: The Regional Drug Initiative will work with state and local agencies as well as private sector providers and insurance carriers to advocate for the development of:

- o Prevention, and intervention programs for fetal drug syndrome/fetal alcohol syndrome births;
- o Increased outreach efforts to assure use of prenatal care by drug abusing pregnant women;
- o Third party resources for treatment of families of drug abusers;
- o Increased detoxification and treatment resources for low-income individuals;
- o Child care for people in treatment; and
- o Parent training programs.

Additionally the Regional Drug Initiative will advocate for a review of spending policies and procedures of entitlement dollars for alcohol and drug abusing families.

Evaluation: Success indicators for the listed objectives will include reductions in the number of Fetal Alcohol/Drug Syndrome births and increases in the numbers of families and individuals in treatment, increases in the number of high risk women receiving prenatal care, and increased use of parenting programs and child care resources. Appropriate changes in third party funding policies will also be recognized as success indicators.

Priorities for Year 1: Develop increased outreach, detoxification, and rehabilitation services for low-income individuals, women, minorities and other special needs populations and a comprehensive fetal drug and alcohol syndrome prevention and intervention program.

Implementation Recommendations for Year 1 Priorities:

1. Convene planning teams to develop program proposals for specified target populations.
2. Inventory existing resource providers with which to coordinate.
3. Seek increased funding from local, state, and federal governments and private foundations.
4. Implement.

GOAL 4. PROMOTE A MORE PRODUCTIVE WORK FORCE

"Sure I do drugs.

But it doesn't affect how I do my job."

- A worker

Need: Substance abuse is the most significant contributor to employee absenteeism and lost productivity. Seventy-five percent of drug abusers are employed. Substance abusing employees are more likely to have accidents on the job and cause safety hazards for co-workers. Employee theft is often linked to drug abuse. Frequently employers are unsure of how to address or prevent employee substance abuse problems. Most employers, particularly small business employers, do not have substance abuse policies for their workplace.

Objectives: The Regional Drug Initiative will assure the development of a more productive work force by:

- o Promoting the development of workplace substance abuse policies;
- o Supporting efforts to assure that workers and families have access to treatment;
- o Advocating for the development of better quality insurance programs for workers and families, with emphasis on small business;
- o Encouraging workers to be free from the influence of alcohol and drugs;
- o Educating employers that it can be cost effective to bring substance abusing employees into recovery, and
- o Educating workers that being drug free will increase safety and productivity in the workplace.

Activities: The Regional Drug Initiative will work with employers and labor to:

- o Develop model workplace drug policies
- o Provide training and technical assistance to businesses (especially small businesses) regarding drugs and workplace issues
- o Assess existing insurance programs and promote insurance policies that provide treatment
- o Support employee wellness programs
- o Promote employee assistance efforts
- o Hold seminars for employers and employees regarding drug use concerns

Evaluation: Indicators of success will include reductions in use of sick time, on-the-job accidents, and employee theft and increases in the development of workplace drug policies and treatment programs for employees. Employers will be asked to participate in a baseline and follow-up survey to gain measurable data.

Priorities for Year 1: Develop model workplace substance abuse policies and provide training and technical assistance to management and labor regarding the establishment of such policies.

Implementation Recommendations for Year 1 Priorities:

1. Review model workplace substance abuse policies and sponsor training efforts.
2. Seek public and private resources to provide training workshops and materials.
3. Implement

GOAL 5. PROVIDE AN ATTRACTIVE CLIMATE FOR ECONOMIC DEVELOPMENT

"This neighborhood is too dangerous
for me to open a business here."

- A business person

Need: The linkage between poverty, drug abuse, and street crime has made some neighborhoods less attractive to business developers. Unemployment often leads to the despair which motivates drug abuse. Residents of low-income neighborhoods need opportunities for success in meaningful mainstream employment if they are to choose to remain drug free. Business developers need community and governmental support if they are to supplant illegal drug economies with mainstream private sector investment.

Objectives: The Regional Drug Initiative will work with neighborhoods, criminal justice agencies, and educators to enhance economic development in targeted areas by:

- o Developing a larger and more skilled work force;
- o Undermining the profitability of the existing drug economy;
- o Cooperating with schools to maintain excellence and drug-free environments;
- o Improving the regulatory environment and availability of capital in order to support business development in targeted areas; and
- o Reducing crime rates in targeted areas.

Activities: The Regional Drug Initiative will work with state and local government agencies, employers, community-based organizations, and educators to assure that:

- o Training and employment programs are linked to recovery and treatment services for target populations;
- o Policies are developed to provide tax incentives and low interest loans for economic development in targeted areas;
- o Incentives are provided to promote crime prevention through environmental design for business;
- o Technical and financial assistance is available to property owners/developers to clean up areas contaminated due to illegal drug production; and
- o Programs are developed to restore abandoned properties to productive economic use.

Evaluation: Indicators of success will include increases in the development of new businesses in targeted areas, in employment among targeted populations, in the number of individuals from targeted populations who have completed employment training and entered the work force. Indicators will also include reductions in crime statistics in targeted areas and improved attitudes about local educational and employment opportunities.

Priorities for Year 1: Develop incentive programs to enhance economic development in targeted areas.

Implementation Recommendations for Year 1 Priorities:

1. Convene a committee of economic development specialists, business leaders, and government policy makers to discuss strategies.
2. Select areas to be targeted for incentive efforts.
3. Draft a proposal for discussion and implementation.
4. Implement.

GOAL 6. INCREASE COORDINATION AMONG GOVERNMENT, BUSINESS,
SCHOOLS, SERVICE PROVIDERS, AND CITIZENS

"Sometimes I feel like
I'm out there all alone trying to
do something about this problem."
- A police officer

Need: Traditionally our community has approached the problems of drug abuse and illegal use of drugs from a variety of arenas. Treatment professionals, criminal justice officials, and private citizens have all made sincere efforts to address these problems, but they often are unaware or distrustful of each other. Consequently, drug-involved client populations and those affected by them receive less effective help.

Objectives: The Regional Drug Initiative will work with government, business, schools, service providers, and citizens to increase coordination by:

- o Establishing policies that foster coordinated approaches to combat drug abuse;
- o Expanding the scope of organizations to involve other agencies and organizations in planning;
- o Developing interdependent and cooperative service systems to meet the needs of mentally ill drug users, youth, and other special needs populations;
- o Advocating for program and budget changes to promote coordination priorities;
- o Encouraging organizations to understand services and parameters of other organizations with which they can coordinate;
- o Training staff in various organizations to routinely consider coordination when problem solving; and
- o Providing minority sensitive training to criminal justice and treatment personnel.

Activities: The Regional Drug Initiative will work with agencies, governments, businesses, and community organizations to:

- o Allocate personnel and financial resources to develop coordinated efforts;
- o Develop interorganizational agreements to coordinate efforts;
- o Assure that drug-related service contracts shall have language requiring coordination;
- o Involve citizens and community-based organizations in planning efforts of treatment, criminal justice system, and other agencies involved in drug abuse;
- o Develop an information and referral catalogue regarding alcohol and drug resources for purposes of coordination; and
- o Review laws, statutes, and procedures to overcome obstacles to coordination relating to confidentiality while still protecting the rights of clients;
- o Develop training materials and workshops regarding minority issues for criminal justice and treatment personnel.

Evaluation: Indicators of success will include the number of policies adopted to foster coordination, the publication of an information and referral catalogue, and increased satisfaction of individuals and organizations regarding the level of coordination and knowledge of other organizations.

Priorities for Year 1: Develop coordinated systems for mentally ill drug users, youth, and minority populations.

Implementation Recommendations for Year 1 Priorities:

1. Develop interorganizational agreements regarding coordination.
2. Develop an interagency coordinating council.
3. Develop concept papers for coordinated projects serving targeted populations.
4. Identify and advocate for needed resources.
5. Implement.

ACKNOWLEDGEMENTS

The Regional Drug Initiative Steering Committee members listed below would like to thank the hundreds of concerned individuals who dedicated their energies to the RDI study committee process and the public hearings.

Kenneth Carr, Kenneth Carr Construction Company
Beth Hoover & Linda Tyon, Treatment Alternatives to Street Crime
Norma Jaeger, Multnomah County Alcohol and Drug Program Office
Jim McKillip, WESCOR Distributors and Oregon Heat Pump
Steven Moskowitz, Mayor's Office, City of Portland
Judy Phelan, Multnomah County District Attorney's Office
Captain Thomas Potter, Portland Police Bureau
Dr. Marilyn Richen, Portland Public Schools

Staff: David Fuks, Coordinator
Carol Stone, Program Development Specialist

STAFF REPORT

Agenda Item No. 7.1

Meeting Date December 10, 1987

CONSIDERATION OF RESOLUTION NO. 87-829 FOR THE
PURPOSE OF ADOPTING THE REGIONAL DRUG INITIATIVE
RECOMMENDATIONS

Date: November 24, 1987

Presented by: Steve Lee
Michael Schrunk

FACTUAL BACKGROUND AND ANALYSIS

The Regional Drug Initiative (RDI) was created in December 1986 and its membership is composed of representatives of the business community, government agencies and substance abuse treatment providers. The RDI has completed a plan that presents a five-year action agenda based on the following goals:

- Foster and change social attitudes regarding drug use.
- Keep communities safe from drug abuse and crime.
- Achieve healthier lives for citizens.
- Create a more productive work force.
- Produce an alternative climate for economic development.
- Increase coordination among government, business, schools, service providers and the public.

The body of the plan includes specific strategies for implementation of each goal.

PROPOSED ACTION

The Regional Drug Initiative has completed its report, "A Community Agenda to Combat Drug Abuse and Illegal Use of Drugs" and requests that all jurisdictions in the tri-county area adopt the plan and approve the implementation of this five-year work plan and agenda. A resolution adopting the plan is before the Council.

EXECUTIVE OFFICER'S RECOMMENDATION

The Executive Officer recommends adoption of Resolution No. 87-829.

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All Councilors were present at the executive session with the exception of Councilors Cooper and Knowles. Other parties in attendance included Executive Officer Cusma, Dan Cooper, Vickie Rocker, Ray Barker, Don Carlson, Rich Owings, Tuck Wilson, Kim Duncan and Harry Bodine.

The Presiding Officer called the meeting back into regular session at 6:00 p.m.

Convention Center Real Property Transaction

Motion: Councilor Ragsdale moved, seconded by Councilor Kelley, to approve the Portland Development Commission's recommendation concerning the Grothauf parcel.

Vote: A vote on the motion resulted in all ten Councilors present voting aye. Councilors Cooper and Knowles were absent.

The motion carried unanimously.

7.1 Consideration of Resolution No. 87-829, for the Purpose of Adopting the Regional Drug Initiative Recommendation

Steve Lee, Local Government Coordinator, introduced Michael Schrunk, District Attorney of Multnomah County, and David Fuks, Executive Director of the Regional Drug Initiative, Multnomah County.

Mr. Schrunk reviewed the history of the Regional Drug Initiative and reported on the extent to which other local governments were participating in the program. He explained the Initiative was a means of focusing resources on the drug problem.

Mr. Fuks summarized the action agenda and described the major program goals: 1) Foster and change social attitudes regarding drug use; 2) make communities safe from drug abuse and crime; 3) support healthier lives for our citizens and families; 4) promote a more productive work force; 5) provide an attractive climate for economic development; and 6) increase coordination among government, business, schools, service providers and citizens. He also discussed priority activities planned for each of the above goals. Regarding Goal 4, Mr. Fuks encouraged local government jurisdictions to develop policies to assist employees who abused drugs.

Executive Officer Cusma supported adoption of the resolution. Presiding Officer Waker referred the Council to a memo dated December 10, 1987, from Ray Barker, Council Assistant, which had described Metro's involvement in the Regional Drug Initiative program as being one of a time, rather than financial, commitment.

Motion: Councilor DeJardin moved, seconded by Councilor Kelley, to adopt Resolution No. 87-829.

Vote: A vote on the motion resulted in all ten Councilors present voting aye. Councilors Cooper and Knowles were absent.

The motion carried and Resolution No. 87-829 was unanimously adopted.

In response to Councilor Hansen's question, Executive-Officer Cusma said she would develop a policy to assist Metro employees who abused drugs. The proposed policy would be brought back to the Council for future consideration.

8.1 Consideration of Ordinance No. 87-235, for the Purpose of Amending the Metro Code Section 4.01.060 Revising Admission Fees and Policies at the Washington Park Zoo

The Clerk read the ordinance by title only a first time. Presiding Officer Waker explained contrary to what had been previously reported to Councilors, an ordinance adopted in 1985 had already amended the "Youth" fee category to an age range of 3 to 11 years. Ordinance No. 87-235 would not amend that age category.

Kay Rich, Acting Zoo Director, reported in January 1984, the Council adopted Resolution No. 84-444 which established financial principles and policies for the District. Those policies specified a ratio of approximately 50 percent tax and 50 percent non-tax revenues be maintained for funding Zoo operations and that the Council review admission fees annually to assist in meeting that policy. Any operating fund surplus would be periodically transferred to the Capital Improvement Fund to implement the Zoo's Master Plan, he explained. Possible improvement projects could include upgrading utilities, building an incubation facility for the Zoo's expanding bird collection, building an off-exhibit breeding facility for endangered species, building storage facilities and providing funds for projects included in the Master Plan but for which no money had been budgeted.

Mr. Rich further explained the ordinance would increase admission rates, would simplify the group discount policy, would provide for special admission rates for special events, would provide for a reduced admission for catered events, and would allow for corporate sponsored free days. Staff recommended the new admission fees and policies be effective January 1, 1988, which would require the ordinance to be adopted under the Council's emergency provisions.

Councilor Kirkpatrick requested the ordinance be reviewed by the Zoo Planning Committee before its December 22 second reading. Presiding