

Marion County Public Safety Coordinating Council



Anti-Drug Strategic Plan 2005

Mid-Year Status Report

**Commissioner Patti Milne, Chair
Bob Royer, Vice Chair**

August 16, 2005



Marion County
Public Safety Coordinating Council

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Marion County Public Safety Coordinating Council

Mission

Increase Community Safety

Direction Statement

Reduce Violence to and by Children & Youth and Among Adults
Reduce Alcohol and Drug Abuse
Reduce Fear of Crime

Vision

Safe, secure communities with:

- People who are responsible and held accountable
- Aware and involved community members
- Strong families, healthy children, and thriving, successful students
- Flourishing business



PART 1

BACKGROUND

**Mid-Year Status Report
Anti-Drug Strategic Plan 2005**

*Marion County
Public Safety Coordinating Council*

**MCPSCC
Strategic Plan Mid-Year Status Report**

PART 1

BACKGROUND

The *Marion County Public Safety Coordinating Council*, MCPSCC, is mandated by state law to coordinate local criminal justice policy among affected criminal justice entities. On an annual basis the MCPSCC develops strategic plans prioritizing those criminal justice issues raised by council members and recommends approval from the County Commissioners. For the 2005 calendar year, council members focused on the issue of drugs, and in particular, the increased manufacture and use of methamphetamines in Marion County.

In early 2004, the MCPSCC began receiving reports from the criminal justice agencies represented on the council: (the sheriff, police chiefs, district attorney and judges) that an increasing number of methamphetamine related arrests and activities were taking place throughout the county. For example:

- The Sheriff's Office reported that four out of six Salem-Keizer murders were tied to drug activity in 2004.
- The county District Attorney reported that between July and September of 2004, 307 formal petitions filed in Marion County courts on behalf of children were due to parental involvement with meth.
- The District Attorney also reported that 90% of the cases in the Juvenile Court stemmed from meth.
- The Drug Enforcement Administration in Salem alone seized 7.44 kilos of crystal (pure) meth with a street value of approximately \$750,000 in the first few months of 2004.

As a steady flow of local and statewide meth related criminal news reached the council, the council realized that a new, rapidly growing drug epidemic had developed in Marion County.

During the spring of 2004, the MCPSCC began to strategize how to address the problem of methamphetamine manufacture, use and distribution in Marion County.

MCPSCC Develops Sub-Committees

After discussing several strategic approaches, it was decided that council members would split up into three groups, with each group concentrating on planning around each of the following areas:

1. Educate, Energize and Engage the Community
2. Integrated-Internal System Response
3. Public Leadership.

1. Educate, Energize and Engage the Community

This group decided to use the *NO METH-Not in MY Neighborhood* model to mobilize community leaders, residents, civic groups and neighborhood groups. The group also decided to focus its message on the manufacturing and distribution of meth.

2. Integrated-Internal System Response

This group focused on all the branches of the criminal justice system and how they should respond. These included the Children and Families department, police chiefs, the County Sheriff, the Juvenile Department, the County District Attorney, the County Courts, as well as the County Health department. This roughly corresponds to prevention, arrest and detention, prosecution, rehabilitation and treatment. This group would also develop an Anti-Drug Toolkit for each of the local communities in the county.

3. Public Leadership

This group focused on public leadership and communications, and asked local public leaders to address the issue of drugs, specifically methamphetamines. This group also developed a general time frame for this Anti-Drug Strategic Plan to unfold. Several key phases were identified. The first phase would involve a series of meetings to be held in December, 2004 and January, 2005 for local civic leaders, the county's legislative delegation, and local business leaders. The second phase would involve a press conference to call attention to the meth problem, and to kick off the third phase, visits by members of the MCPSCC to the city councils throughout the county, getting commitments from all to join the fight against meth.

Key elements of the 2005 Anti-Drug Strategic Plan were as follows:

Target Issue (long-term)

Eliminating the manufacture, distribution and use of illegal drugs in Marion County, thereby preventing harm to children, youth, adults and families in our communities.

Goal for the 2005 Strategic Plan (short-term)

To reduce the manufacture, distribution and use of methamphetamines by (1) issuing a *call to action* to the community, (2) improving the system's capacity to respond, and (3) supporting public leadership to create policies and practices to reduce the manufacture, distribution and use of illegal drugs.

Guiding Principles

Key principles of the Marion County Public Safety Coordinating Council's framework for the 2005 Strategic Plan, its development and implementation are as follows:

1. **Community Based:** Everyone can do his or her part, including those elected to public office, community leadership, the faith community, community members, families and individuals (including children and youth).
2. **Public Leadership:** Community leaders and members can make a significant difference in this effort, complementing the statutory responsibility of the formal public safety systems and providing the necessary direction for action and the allocation of resources.
3. **Practical Solutions:** Actions should be achievable, recognizing limited public resources and a compelling drug problem in Marion County.
4. **Measured Accomplishments:** An evaluation approach should be defined from the outset and implemented throughout the plan, reporting findings to key audiences and the general public.
5. **Identify and Duplicate Successes:** Successes should be recognized, as contributing to a “can-do” spirit.

The Strategic Plan also included **seven key commitments**, offered as a menu from which city councils could choose their own particular strategies against meth for maximum effectiveness in their community. The Marion County Public Safety Coordinating Council emphasized the importance of cities customizing this menu to suit their own individual needs.

These seven commitments are as follows:

1. Issue a proclamation, decrying the methamphetamine problem and its influences, and dedicating efforts to fight it.
2. Include pre-employment drug testing for all employees and random drug testing in future labor negotiations for safety sensitive and special needs categories. Consider implementing a drug-screening program for unrepresented employees in safety sensitive and special needs categories.
3. Agree to publicly prioritize public safety and drug-crime reduction, which may include prevention, education, treatment and enforcement in the budget process.
4. Declare a willingness to receive and support statutory change recommendations.
5. Create a list of partners in your efforts, both public and private.
6. Publicly recognize employers who maintain drug-free work places and encourage local businesses to sponsor drug-free work places.
7. Volunteer to take a drug-screening test to demonstrate a leadership role, and the affordability of drug testing.



PART 2

SUMMARY OF PROGRESS

**Mid-Year Status Report
Anti-Drug Strategic Plan 2005**

*Marion County
Public Safety Coordinating Council*

PART 2

SUMMARY OF PROGRESS ON THE 2005 ANTI-DRUG STRATEGIC PLAN

The table below shows the specific activities related to the MCPSCC that are part of the Anti-Drug Strategic Plan, status of the actions and comments.

Action	Status	Comments
1. Host a breakfast with Marion County legislators and state officials. Inform them of the strategic plan and gain their support for local and state efforts.	Completed. Breakfast meeting held at the State Capitol, January 2005.	All Marion County legislative delegates were represented. Able to dialogue with legislators and provide input into key pending meth legislation.
2. Work with key leadership groups about the 2005 Strategic Plan and the opportunity to participate (<i>Note: Groups would include, but not be limited to mayors, other city officials, city managers, civic groups, fire chiefs, police chiefs, faith communities, judges, Chambers of Commerce, legislators, schools, corrections and allied state and county professional and advisory bodies.</i>)	Completed. Breakfast meeting for city officials held December, 17, 2004 Breakfast meeting for Chambers of Commerce held January 18, 2005	All cities represented. Able to dialogue with city officials. Developed groundwork for visiting each city council. Dialogue with Chambers of Commerce on drug-free workplace policies, and employment issues.
3. Will take the initiative to the leaders of local government, asking them to step up to the challenges with Marion County. Each city encouraged to use the seven commitments as a guide, retaining flexibility to customize the plan to meet their own community needs.	Completed. All City Councils visited by members of the MCPSCC by June 25, 2005.	All presentations well received. Cities of Turner, Stayton, Sublimity, issued proclamations. City of Keizer- all Council members drug tested. City to include random drug testing in future labor negotiations.
4. Begin the development of a community mobilization and self-evaluation tool kit, which will include available resources for addressing meth manufacture, distribution and use in the communities of Marion County.	In Progress. Toolkit will be available by September 30, 2005. Website will be launched by September 30, 2005.	As discussions progressed, a web-based resource guide was prioritized to complement the Toolkit.

Action	Status	Comments
<p>5. Build awareness and advocacy for appropriate capacity within the public safety system to provide consequences to illegal drug availability and use.</p>	<p><u>Passage of Key Bills:</u> HB 2485 Comprehensive Meth SB 907 Comprehensive Meth SB 640 (DMV Biometrics) HB 5174 (Drug Court \$)</p> <p><u>Approval of Funding:</u> \$600,000 Anti-Meth Grant to Marion County \$30,000 to the No Meth: Not in My Neighborhood \$6,416 to County Drug Court</p>	<p>MCPSCC working in conjunction with city, state and federal jurisdictions approved up to \$600,000 to fight meth in addition to various legislative bills.</p>
<p>6. Host a summit to educate, energize, and engage a range of community and “system” leaders and members to become more aware of the meth issues, related resources, and effective local actions such as NO METH-Not in MY Neighborhood.</p>	<p>Re-evaluation of the purpose and outcome of a summit is under discussion.</p>	<p>Want flexibility to meet most critical needs of community based on what MCPSCC has learned through the implementation of the Strategic Plan.</p>
<p>7. Implement a county-wide NO METH effort, based on the results of the summit, tailored to the needs of the community and available resources.</p>	<p>In Progress. In working through Strategic Plan, MCPSCC has in effect implemented a countywide NO METH effort.</p>	<p>Growing awareness and willingness of local jurisdictions to coordinate & collaborate with the MCPSCC bypassed need to wait for a summit.</p>
<p>8.</p> <ul style="list-style-type: none"> a. Evaluate and communicate progress on the 2005 Strategic Plan and its effects in Marion County. b. Renew the vision, mission, target, goal, and actions for 2006. 	<ul style="list-style-type: none"> a. Presentation of Mid-Year Status Report to the Board of Commissioners August 17, 2005. b. To be completed in December 2005. 	<ul style="list-style-type: none"> a. Developing tangible criteria to measure success and effects of NO METH plan. b. Based on evaluation, MCPSCC to review our communications process.

PART 2

PROGRESS REPORT ON THE 2005 ANTI-DRUG STRATEGIC PLAN

Breakfast Meetings, Visits to City Councils

The Call to Action to the Community was received with enthusiasm, due to the success of the December, 2004 and January, 2005 Community Breakfast meetings. These meetings were strategically designed for the benefit of elected civic and business leaders. The concept was to inform them of the meth/drug problem, introduce the MCPSCC, and also begin the networking process between government, non-profit, and businesses in the fight against meth. City council members who attended the breakfast meetings proved to be valuable allies when representatives of the MCPSCC personally visited each city council in the county and asked them to commit to the fight against meth.

A press conference was held in March by the MCPSCC to demonstrate solidarity with local community leaders, and to kick off council member presentations of the 2005 Anti-Drug Strategic Plans to the city councils.

Several cities issued proclamations as called for in the Anti-Drug Strategic Plan. The City of Keizer, had all Council members commit to being drug tested, and stated that they would negotiate in future labor contracts about random drug testing for employees. The last city to be visited by the MCPSCC was Scotts Mills on June 23, 2005.

Please see Attachment D for a full list of Cities, Presenters and Actions.

Community Mobilization and Self Evaluation Tool Kit

Much of the drug prevention, and in particular meth information will be incorporated into a Toolkit that the MCPSCC is currently developing. It should be noted that initially the MCPSCC was focused on a Toolkit that was non-web based, but through the involvement of the Marion County Health, Sheriff, Children and Families and county Information Technology departments, a sub-committee of the MCPSCC is now working on the development of both a resource manual and a Website. It is anticipated that both will be available by September 30, 2005.

During presentations to the City Councils, members of the MCPSCC distributed resource packets, Toolkits with basic factual information about meth in Marion County, its impact on Oregon businesses, and a guide to some of the local resources available to fight meth.

Building Meth Awareness: Systematic Components in the Criminal Justice System.

The criminal justice system, as mentioned earlier, is comprised of several sub-systems. These range from prevention, arrest, prosecution and incarceration, to treatment and rehabilitation.

Prevention

The MCPSCC made prevention a central part of its information campaign. Information materials were made available to the general public on all aspects of meth, while a separate campaign focused specifically on businesses. The NO METH-Not In MY Neighborhood organization, Salem-Keizer Together, and the Mid- Willamette Community Action Drug Prevention Network all provided a range of literature on meth, including its impacts on the family, environment and workplace.

The NO METH-Not in MY Neighborhood also launched an Identity Theft project in December of 2004, in conjunction with the Community Action Drug Prevention Network, Community Action Agency Inc. This agency reviewed how the business community could play a meaningful role in helping to deal with the meth issue and three strategies were developed: Meth Watch, Drug Free Workplaces, and Identity Theft. The agency currently has instituted:

- ID theft training in partnership with U.S. Bank,
- A regular schedule of drug-free workplace training, which allows supervisors to realize their role in observing, documenting and following through with individuals on the job.

The MCPSCC also held a breakfast meeting with the county's legislative delegation. Bills in both the House and Senate were discussed and feedback provided to the legislators. There were over 30 meth and meth related bills introduced in the Senate and the House. All were consolidated into either HB 2485 or SB 907. Both bills were signed into law by the Governor on August 16, 2005.

Arrest & Prosecution

On the enforcement components of the system:

- The County funded the Marion County Sheriff's Office \$81,495, to hire one additional detective for methamphetamine/gang enforcement.
- The County also funded the Marion County Work Center at \$1,357,312 in county general funds for FY 2005-06.
- The County funded the District Attorney \$112,694 to hire a meth prosecutor for the 2005-06 budget year. The position will focus on cases involving drug-endangered children, establish a point of contact for partners engaged in the meth effort, and promote public awareness.

- The Marion County Sheriff's Office also received a \$600,000 federal grant to target drug activity in Marion County in FY 2004-05.
- The Marion County Commissioners also approved \$30,000 in funding for the NO METH-Not In MY Neighborhood. These funds were used to pay for printing materials on meth for the general public, as well as purchasing office equipment.
- The County funded the Drug Court with a grant of \$6,416 through the MCPSCC.

In sum, including all grant funding in FY 2004-05, and new positions for the FY 05-06 budget, Marion County has dedicated more than **\$2 million** in the fight against meth to date.

Policies, Practices and Legislation Created by Local, State and Federal Leaders

Local

Through a combination of meetings held for civic leaders, and chambers of commerce members, as well as presentations to city councils, the MCPSCC developed a network of regional partners able to assist local communities with their individual No Meth efforts. For example:

- In January of 2005, the City of Salem, conducted a drug awareness training program for all City employees regarding specific actions they could take to reduce crime and the impact of meth in Salem. Attendance at this training was mandatory for all City employees and was part of an organization-wide priority to support the community effort to eliminate drug activity and the crime that it attracts. As a result, Bob Wells, the City of Salem Manager received an award of recognition for his proactive leadership on the meth issue from the MCPSCC.
- The Salem City Council added ten police officer positions to the City of Salem Police Department over the past year. During 2005, over 380 drug house investigations were conducted and 183 at-risk children taken into custody by the City of Salem P.D.
- The Salem Police department worked with CCTV to create English and Spanish videos to assist the public with identifying and reporting drug houses or suspicious drug activities.
- The City of Salem also granted the NO METH- Not in MY Neighborhood Program \$25,000.
- The City of Keizer mayor, and all six councilors agreed to set a public example by taking a drug test.
- The Cities of Stayton, Sublimity and Turner all issued anti-drug proclamations.
- The City of Aumsville has drafted a property ordinance for renters to be held more accountable.
- The City of Woodburn has developed a Woodburn Meth Task Force that is actively working with the No METH not in MY Neighborhood program.

- The City of Woodburn Police Department has held 12 meth presentations for civic clubs and parents

Statewide

As mentioned earlier, the MCPSCC not only held a breakfast meeting with its state legislative delegation in January 2005, but, also supported a number of legislative initiatives to deal with the statewide meth crisis.

In November 2004, the State of Oregon restricted the sale of cold tablets containing pseudoephedrine as part of the state's fight against methamphetamine. (Within a few months the number of meth lab busts declined by 50% in the state.) Based upon this information, the House Judiciary Committee passed House Bill 2485 on June 24, 2005. HB 2485 stipulates that Sudafed and other products containing pseudoephedrine, the raw material from which meth is extracted, will require a doctor's prescription. If the action does not reduce the number of local meth labs, the bill authorizes the Board of Pharmacy to drop the prescription requirement.

The bill forms part of a package with Senate Bill 907. Senate Bill 907 will make it a felony crime to expose a minor (including pre-natal) to the cooking of meth, make it a crime to contaminate property with waste from meth cooking, impose higher sentences for manufacturing and dealing in large quantities of meth, provide additional beds for treatment of incarcerated meth addicts, and fund drug courts to supervise addicts outside of prison.

Both House Bill 2485 and Senate Bill 907 were signed into law by the Governor on August 16, 2005, making Oregon one of the most restrictive states in the country on the sale of pseudoephedrine based products

Federal

The methamphetamine issue has taken a spotlight in national politics as the epidemic moves from the West and Midwest into the eastern areas of the United States and begins to victimize new communities. Federal authorities and officials are recognizing the critical need to stem the flow of meth into the United States from Mexico and several proposals have been suggested. One such idea ties the receipt of foreign aid to the tighter controls on the import of pharmaceutical-grade pseudoephedrine.

Reports have shown that Mexico imports about twice as much pseudoephedrine than is needed for cold medicine, with the tacit understanding that much of the extra product is diverted towards the lucrative illegal "super-labs" that produce much of the meth found on Oregon's streets. Additionally, stricter reporting requirements are being sought in the international markets for the handful of pseudoephedrine manufacturers located in Europe and Asia.

The County Commissioners have worked closely with the county's federal lobbyists, Conkling, Fiskum, McCormick and Representative Darlene Hooley and Senator Gordon Smith on federal methamphetamine legislation.

For example, one of the federal legislative priorities that Marion County has for FY 2005-2006 is meth treatment support. This request for federal funds focuses on providing treatment to habitual meth offenders who continue to strain the county's law enforcement and judicial systems.

Representative Darlene Hooley's office has also provided outstanding resources to Marion County over the past several years to combat drugs and methamphetamines. In FY 2004-05 Marion County received approximately \$600,000 to fight meth, and Representative Hooley has also personally introduced three congressional Bills, HR 1055, 1056 and the Protection of Children from Meth Act that are currently being heard by the U.S. Congress.



PART 3

WHAT'S NEXT?

**Mid-Year Status Report
Anti-Drug Strategic Plan 2005**

*Marion County
Public Safety Coordinating Council*

PART 3

WHAT'S NEXT?

The MCPSCC is currently planning for three key community breakfast meetings this fall. These will be targeted toward the faith, medical and educational communities.

The Marion County Public Safety Coordinating Council will also continue to work closely with local, state and federal governmental entities in the fight against methamphetamines. The following narratives are from the Marion County Children and Families, Juvenile, Sheriff District Attorney and Health Departments. These departments were requested to provide brief summaries of the future resources and policy changes they foresee as a result of the meth epidemic in Marion County.

The Marion County Children and Families Commission and Department

Having the responsibility to keep a “bird’s eye view” of the conditions and systems that affect children and youth (ages 0-18) and their families, the Commission has a challenge in helping to keep balance between prevention services and deeper-end interventions.

With effective prevention services there will be less need for the acute services, but the acute needs must be addressed and are more visible to the public, legislature, and other funding entities. Solutions are needed for children, youth, families, and support systems that are strained by meth use and its devastating effects. At the same time, community and system leadership must be actively engaged on this issue and work on how best to prevent it. Like so many problems—e.g., teen pregnancy, alcohol and drug addiction, domestic violence, it will take sustained awareness and action on every level—prevention, enforcement, and treatment.

In particular, because of the impact of meth on family users and producers, there is an acute and immediate need for foster care in Marion County.

The Marion County Juvenile Department

The Juvenile Department is concerned about the immediate and increasing impact of methamphetamine projected for the 2005-06 fiscal year. With the youth served, the Juvenile department sees both the impact of youth trying to cope with living in homes with adults who are using, addicted to and in some cases manufacturing methamphetamine, and youth who themselves are using and addicted.

Parental involvement with methamphetamine reduces their ability to parent and provide for children. With the breakdown of the family, there are few replacements of out of home resources of foster care and residential treatment for either short term or long-term placements. The Juvenile Department is receiving increased numbers of criminal referrals on youth who live in

homes where methamphetamine is a problem and/or are using methamphetamine. The aggressively addictive nature of methamphetamine makes it more difficult to convince kids to give up the drug and the lifestyle associated with the acquisition and use, including increased criminality and community disconnectedness, and take responsibility to engage in positive behavior change. Getting a youth clean and stabilized requires both extended time under supervision and in programs, and higher levels of more costly interventions. The extent of the self-degrading activities in exchange for methamphetamine such as prostitution increases the need for a multitude of wrap around resources.

Consequently use of interventions is escalating with more frequent violations of conditions of supervision and a need to move more quickly to restrictive programs such as detention and GAP, both of which have limited capacity.

Ensuring the well being of youth through supervision, management and programming has become increasingly difficult with the unpredictability in behavior associated with methamphetamine use, withdrawal and detox. Assessment of youth must become more refined to determine the extent of the health, mental health, and behavioral issues resulting from the drug use, (versus existing independent of the drug use) to implement appropriate interventions with successful outcomes. In addition, the risk to staff safety while conducting home visits has increased given the conditions of homes, volatility of parent and other adults present, associated criminality, and barriers put up to prevent detection of methamphetamine use or production.

In addition, there will be long term impacts to the juvenile system of the babies currently being born to methamphetamine addicted parents, and for future children born to addicted youth now under supervision in the juvenile system. The brain chemistry and developmental impacts on the physical and mental capacity of these children and resulting juvenile public safety consequences must be anticipated and mitigated.

The Marion County Sheriff's Office

Currently, methamphetamine use is at epidemic proportions in Marion County. The Patrol section of the Enforcement Division deals with the effects of this addiction on a daily basis. The effects are far reaching and affect not only the individual who is a methamphetamine user/abuser but also those around the individual, including, but not limited to, family members, siblings, co-workers and acquaintances.

Based on history, this office expects the abuse of methamphetamine to increase, which will result in increased calls for service, contacts with the abuser, family members of the abuser and community members who are affected by the abuser. This office will also undoubtedly see an increase in assaults on citizens and deputies as well as an increase in violent encounters resulting in the use of deadly force by deputies in the defense of the citizens and themselves.

Jail: Last year 19,266 people were booked into the Marion County Correctional Facility. Because of this high number, the average length of stay is a mere 23 days. During a recent

survey of inmates, 75% identified themselves as methamphetamine users. Meth is the single biggest factor driving crime in our community.

Enforcement: This office has taken several steps to engage the community, (through presentations, education, and involvement with citizen's groups) as well as boosting specific methamphetamine enforcement, (addition of Meth/Gang positions to detectives, procurement of the Meth Grant, support of the Street Crimes unit, etc...) has been excellent. However, problems with methamphetamine will not go away until we (as a community) reduce demand for the drug. This office believes that methamphetamine will continue to tax our resources in the enforcement division in the coming year just as it has done so in the past. The efforts of the legislature this session to control precursor chemicals, will help to reduce meth labs locally, but as long as there is demand for meth, meth and pre-cursor chemicals will get to our community from other sources.

Parole and Probation: There are approximately 3,700 offenders living in the Marion County community under Parole and Probation supervision. Parole and Probation is entrusted with the task of managing, containing and motivating meth using and addicted offenders to change their behavior. This requires officers to actively supervise offenders in the community, acquire adequate resources to sanction those who fail to comply, as well as have the services (treatment programming) that are evidence based to provide the level of intensity and length of time necessary to impact this population.

The Marion County District Attorney

Methamphetamine has infected every function of prosecution in Marion County. From violent crime to identity theft, not a day passes without facing the detrimental impact of meth. Children are suffering dearly from this epidemic, where we continue to see exponential growth in drug endangered children and child abuse directly caused by meth.

Because of its ease of manufacture, lucrative profits to dealers, and crippling addiction, our enforcement efforts will continue to be collaborative, recognizing the generational scope of this challenge.

The prevailing impacts to prosecution as we engage in this effort are as follows:

1. Increased meth-endangered child prosecutions, meth-manufacturing and delivery;
2. Adequate jail space to enable effective prosecution of meth-manufacture and delivery;
3. Implementation of 2005-07 meth-legislation;
4. Surging meth-related child dependency actions in juvenile court, and in particular, meth-addicted babies and foster care resources.

These are but a few of the issues that dominate the landscape of prosecution as we enter the second half of 2005.

The Marion County Health Department

Methamphetamine abuse is a serious issue that must be addressed by multiple systems and partners. The goal of methamphetamine, alcohol, and other drug abuse prevention is to make a positive impact on individual, family, and community behavior. The existing prevention knowledge base, founded on research and principles of effectiveness, should guide prevention strategies applied by agencies and communities to address the issue of methamphetamine abuse prevention.

The prevention field has learned over the years, that often well-intended substance abuse prevention strategies have been applied but have proved to have no positive impact on reducing drug use and abuse (e.g., scared straight, fear arousal, moral approaches and one time assemblies). It is essential that prevention strategies which are implemented have the greatest potential to prevent and to impact the destructive behavior patterns associated with methamphetamine use. Strategies most likely to have a positive impact are those documented in prevention research.

In a July 2005 position paper, the Oregon Department of Human Services, Office of Mental Health and Addiction Service lists essential features of evidence based prevention strategies which are effective in working with children, adolescents, and families:

1. Help youth recognize internal pressures such as wanting to belong to the group and external pressures like peer attitudes and advertising that influence them to use alcohol, tobacco and other drugs.
2. Facilitate development of personal, social and refusal skills to resist these pressures.
3. Teach youth that using alcohol, tobacco and other drugs is not the norm among teenagers, thereby correcting the misconception that "everyone is doing it" and promoting positive norms through constructive role models.
4. Provide developmentally appropriate material and activities including information about the short-term effects and long-term consequences of alcohol, tobacco and other drugs.
5. Use interactive teaching techniques, such as role-plays, discussions, brainstorming and cooperative learning.
6. Cover necessary prevention elements in at least eight well-designed sessions a year (with a minimum of three to five booster sessions in one or more succeeding years).
7. Actively involve the family and the community so that prevention strategies are reinforced across settings.
8. Include teacher training and support in order to assure that curricula are delivered as intended.
9. Provide material that is easy for teachers to implement and culturally relevant for students.

The Marion County Health Department, in partnership with local and state jurisdictions will continue to provide evidence based drug prevention and treatment strategies that are effective in working with children, adolescents, and families in Marion County.

Conclusion

The methamphetamine epidemic facing Oregon presents serious challenges on several fronts. First, it is a cheap drug with a powerful and long lasting effect unrivaled by even that of cocaine or heroin, resulting in quickly formed, long-term addictions and treatments where success is difficult to achieve. Second, although much methamphetamine is manufactured and imported from Mexico, high-quality meth can be cooked in a kitchen or garage using ingredients purchased at the local supermarket, leaving a trail of toxic homes and polluted neighborhoods and poisoned children in its wake. Third, because of meth's aggressively addictive nature, a vast majority of crime is fueled by this epidemic, straining local governments and community-based services like law enforcement, corrections, community health, foster care and treatment providers. Lastly, the meth issue itself is tremendously complex, covering a range of topics from biochemistry to criminal justice, and international relations to psychology. Attempting to educate and engage the public remains an uphill battle while trying to fight apathy, misinformation and stereotypes about the drug itself.

No single solution has emerged as a panacea to this problem, nor is it expected. Victory in the fight against methamphetamines can only truly be declared when people – particularly our youth - refuse to pick up that meth pipe the very first time. That single act will encompass the collective efforts of everyone in our community to reduce the availability of all drugs, to prioritize treatment resources, to educate our parents and children on the facts about meth, to ensure adequate law enforcement resources and to mobilize our neighborhoods to act in concert as we fight the cause and effects of this devastating chemical.

Yet, for all the challenges we face, we have enjoyed measured success in the first steps of confronting the meth problem. The people and local governments in Marion County have been very receptive to both learning about the problem and taking steps to begin addressing it in their community. The unprecedented coordination between public and private entities is encouraging. Additionally, the partnerships between the various layers of government are also impressive. The complexity of the meth issue reveals a role for each to play, and so far, each seems to recognize the necessity of cooperation and communication. We are taking the first critical steps in an endurance race that pits a poisonous addiction and the profiteering of foreign drug cartels against the mettle and personal sacrifices of our communities and citizens. There can be no abdication of this public trust in the fight against methamphetamines.

To that end, the Marion County Public Safety Coordinating Council and our allies in the fight against methamphetamine are continuing to be proactive while maintaining a constant vigilance – measuring our effectiveness to maximize resources, continually expanding our partnerships in the community and analyzing new trends in the methamphetamine culture to prepare for necessary shifts in policy or practices. Additionally, we will be looking at new ways to communicate with our citizens, while serving as a resource to assist our communities and citizen groups as they join this critical effort.

In the final analysis, what will make this effort a success will be the ability of all Marion County residents to learn about the dangers of methamphetamines, and join together collectively for the health and safety of their, *our*, communities!

Attachments:

A: Membership List of the Marion County Public Safety Coordinating Council

B: MCPSCC 2005 Anti-Drug Strategic Plan

C: Resolution from the Marion County Board of Commissioners

D: Summary of Cities Visited, Actions Taken

E: 2005 Meth Package, Summary of Bills

Attachment A

Members of the MCPSCC

Members of the MCPSCC 2005

Name & Address	Fax	Telephone	Who Appoints?	Mandated	Expires
Kathy Bebe, Assistant Director Elementary Education Salem Keizer Public Schools P.O.Box 12024 Salem, OR 97309-0024	375-7804	399-2632	County Commissioners	No. Representative of the School District	Nov 3, 2006
Walt Beglau District Attorney Marion County District Attorney 555 Court St; NE Salem, OR 97309		588-5222	Appointed at Council formation, 1996	Yes District Attorney	Continuous
Rod Calkins Marion County Health Dept. 3180 Center St. NE Salem, OR 97301	364-6552	588-5357	Appointed at Council formation, 1996	Yes. Health and Mental Health Director	If and when MCPSCC dissolves.
Richard Cowan, 1496 Commercial St. NE P.O.Box 965 Salem, 97308-0965	399-8913	585-3351	Presiding Judge	Yes.* 1 of 2 Defense Attorneys (Represents Adults)	April 7, 2006 (Judge has reappointed for another 2 year period)
Faye Fagel Marion County Juvenile Dept. 3030 Center St. NE Salem, Or 97301		588-5291	Appointed July 12, 2005	Yes Juvenile Director	Continuous
Judge Tom Hart Marion County Courts 100 High St NE Salem, OR 97301		584-7749	Selected by Presiding Judge, Appointed by County Commissioners	Yes* 1 of 2 Judges (Represents juveniles)	April 7, 2006
Seantel Heisel Oregon Youth Authority 2001 Front St. Suite 210 Salem, OR 97303	378-5882	378-6804 x 225	Oregon Youth Authority	Yes.	April 7, 2006
Ruth Hewett 250 Kashmir Ct. SE Salem, OR 97306	391-5864	363-2609	County Commissioners	Yes. Lay Citizen	April 7, 2006

Name & Address	Fax	Telephone	Who Appoints?	Mandated	Expires
Chief Rick Lewis City of Silverton 306 S. Water St Silverton, Or 97381	873-3210	873-5326	Selected by City Police Chiefs, appointed by County Commissioners	No. Representing smaller police agencies	April 7, 2006
Pete McCallum, Council Member City of Woodburn Woodburn City Hall 270 Montgomery St. Woodburn OR, 97071	982-0502	982-5741	Cities in Marion County	Yes. City Councilor	June 14, 2008
Ed McKenney Gem Equipment of Oregon P.O.Box 359 Woodburn Oregon 97071	503 845 6012	503 845 1903	County Commissioners	No. Representing Businesses	April 7, 2006
Patti Milne Marion County BOC 100 High St. NE Salem OR 97301	588-5237	588-5212	County Commissioners	Commissioner	
Jim Murchison Trial Court Administrator Marion County Courts 100 High St; NE Salem, OR 97310		588-5368	County Commissioners	No	April 7, 2006
Chief Jerry Moore City of Salem P.D. 555 Liberty St; NE Salem, OR 97301		588-6100	Police Chiefs in Marion County	Yes	Expires April 7, 2006 Walt Resigned May 31, 2005
Dan Murphy Commission on CFC Marion County Courthouse 555 Court St; NE Salem, OR 97309	373-4460	588-7975	Appointed at Council formation, 1996	No Children & Families Director	Continuous
Bert Ortiz P.O.Box 416 Stayton, OR 97383		999-8426	BOC	No	July 12, 2008
Joe Parrott Deputy Fire Chief/Fire Marshal City of Salem Fire Dept. 370 Trade Street. SE Salem 97301	588-6371	589-2130	BOC	No	July 12, 2008

Name & Address	Fax	Telephone	Who Appoints?	Mandated	Expires
Anna M. Peterson 3365 Sunridge Dr. S Salem, OR 97302	585-4746	503-378-1472	Citizen	No	April 7, 2006
Mike Peterson OSP 3710 Portland Rd; NE Salem, OR 97303	373-0754	378-3387 589-3857 931-3600	Oregon State Police	Yes Oregon State Police-	April 7, 2006
Sheriff Raul Ramirez Marion County Sheriff's Office 100 High St; NE Salem, OR 97301		588-7971	Appointed at Council formation, 1996	Yes. Sheriff	Continuous
Bob Royer 3599 Dogwood Dr; S Salem OR 97302		362-3502	County Commissioners	No. Citizen Representative	April 7, 2006
Chief Scott Russell City of Woodburn 587 Hardcastle Ave Woodburn OR 97071		982-2345	BOC	No	October 12, 2005
Judge Susan Tripp Marion County Courts 100 High Street. Salem, OR 97301		588-8485	Presiding Judge	Yes.* 1 of 2 Judges (Represents adults)	April 7, 2006
Phil Wiseman 1828 Lancaster Dr. NE Salem, OR 97305		364-2642	Selected by Presiding Judge, Appointed by County Commissioners	Yes.* 1 of 2 Defense Attorneys (Represents juvenile offenders)	April 7, 2006

Attachment B

MCPSCC 2005 Anti-Drug Strategic Plan

2005 Anti-Drug Strategic Plan

The Marion County Public Safety Coordinating Council has recently renewed its vision, mission, target area, and approach for improving public safety for community members of Marion County.

The 2005 Strategic Plan represents a broad-based effort, involving all members of the council and, over time, engaging community leaders and members who want their communities and neighborhoods to be safe.

Background

The Marion County Public Safety Coordinating Council is mandated by state law to coordinate local criminal justice policy among affected criminal justice entities. On an annual basis the MCPSCC develops strategic plans prioritizing those criminal justice issues that are raised by its council members. For the 2005 calendar year, this issue is drugs, and in particular, the increased manufacture and use of methamphetamines in Marion County. Over the past six months members on the MCPSCC have split up into three groups to focus on the issue of drugs. These groups were as follows: 1. Educate, Energize and Engage the Community; 2. Integrated-Internal System Response and; 3. Public Leadership. The Strategic Plan synthesizes all three plans into one plan for the MCPSCC to focus on in the 2005 calendar year.

Mission

Leading the community in improving public safety.

Vision

Safe, secure communities with:

- People who are responsible and held accountable
- Aware and involved community members
- Strong families, healthy children, and thriving, successful students
- Flourishing business

Target issue (long-term)

Eliminating the manufacture, distribution and use of illegal drugs in Marion County, thereby preventing harm to children, youth, adults, and families in our communities.

Goal for the 2005 Strategic Plan (short-term)

To reduce the manufacture, distribution and use of methamphetamines by (1) issuing a call to action to the community, (2) improving the system's capacity to respond, and (3) supporting public leadership to create policies and practices to reduce the manufacture, distribution and use of illegal drugs.

Guiding Principles

The Marion County Public Safety Coordinating Council has given careful consideration to the framework for a 2005 Strategic Plan. Key principles in its development and implementation are as follows:

8. **Community Based:** Everyone can do his or her part, including those elected to public office, community leadership, the faith community, community members, families, individuals (including children and youth).
9. **Public Leadership:** Community leaders and members can make a significant difference in this effort, complementing the statutory responsibility of the formal public safety systems and providing the necessary direction for action and the allocation of resources.
10. **Practical Solutions:** Actions should be achievable, recognizing limited public resources and a compelling drug problem in Marion County.
11. **Measured Accomplishments:** An evaluation approach should be defined from the outset and implemented throughout the plan, reporting findings to key audiences and the general public.
12. **Identify and Duplicate Successes:** Successes should be recognized, as contributing to a "can-do" spirit.

2005 Strategic Plan MCPSCC

The following represents the major activities that need to be accomplished as part of the Council's 2005 Strategic Plan:

Action	Lead	When
1. Finalize the 2005 Strategic Plan.	PSCC Chair, Commissioner Patti Milne	November 9, 2004
2. Seek approval of the 2005 Strategic Plan from the Board of Marion County Commissioners.	PSCC Chair, Commissioner Patti Milne (with support from Committee Chairs)	November 24, 2004
3. Host a breakfast with Marion County legislators and state officials. Inform them of the strategic plan and gain their support for local and state efforts.	PSCC Chair, Commissioner Patti Milne and Committee Chairs	December, 2004
4. Work with key leadership groups about the 2005 Strategic Plan and the opportunity to participate (<i>Note:</i> Groups would include, but not be limited to mayors, other city officials, city managers, civic groups, fire chiefs, police chiefs, faith communities, judges, Chambers of Commerce, legislators, schools, corrections and allied state and county professional and advisory bodies.)	Committee Chairs and members	November and December, 2004
<p>5. Offer each city council a menu of what they can do to address the drug problem; Joining Marion County in any or all of the following seven commitments:</p> <p>We will take the initiative to the leaders of local government, asking them to step up to the challenges. We will ask each city to take seven steps:</p> <ol style="list-style-type: none"> 1. Issue a proclamation, as prepared by the PSCC, decrying the drug and specifically the methamphetamine problem and its influences, and dedicating efforts to fight it. 2. Include pre-employment drug testing for all employees and random drug testing in 		

Action	Lead	When
<p>future labor negotiations for safety sensitive and special needs categories. Consider implementing a drug screening program for unrepresented employees in safety sensitive and special needs categories.</p> <ol style="list-style-type: none"> 3. Agree to publicly prioritize public safety and drug-crime reduction-, which may include prevention, education, treatment, and enforcement- in the budget processes. 4. Declare a willingness to receive and support statutory change recommendations. (This will be a part of the proclamation.) 5. Create a list of partners in your efforts, both public and private. 6. Recognize employers who maintain drug free workplaces. (At the same meeting as the proclamation, we would have them publicly acknowledge and thank a local employer who has set an example.) 7. Take a drug-screening test. (The PSCC members are asked to take a drug-screening test during January or February regular meeting as part of a kick-off publicity effort. We will ask each city mayor, council, board, or official to do the same.) 	<p>Committee Chair, Brent DeHart and PSCC staff</p>	<p>December, 2004</p>
<p>6. Begin the development of a community mobilization and self-evaluation tool kit, including available resources for addressing meth manufacture, distribution and use in the communities of Marion County. (<i>Note:</i> The tool kit will be available for use after the March-April community summit.)</p>	<p>Committee Chair, Anna Peterson and Department of Children and Families/other county staff</p>	<p>December, 2004</p>
<p>7. Build awareness and advocacy for appropriate capacity within the public safety system to provide consequences to illegal drug availability and use.</p>	<p>Committee Chair, Mike Wilkerson and committee members</p>	<p>Through county, city, and legislative budget processes (with a longer-term focus for 2007-09) (Add Timeline)</p>
<p>8. Host a summit to educate, energize, and engage a range of community and "system" leaders and members to become more aware of the meth issues, related resources, and</p>	<p>Committee Chair, Anna Peterson, PSCC and other County staff, with active involvement by all PSCC</p>	<p>March and April, 2004</p>

Action	Lead	When
effective local actions (based on learnings from the Salem-area NO METH effort).	members; Sheriff and COG.	
9. Implement a county-wide NO METH effort, based on the results of the summit, tailored to the needs of the community and available resources.	PSCC, under the leadership of Chair, Commissioner Patti Milne, Committee Chairs and members, with staff and partner support.	May through December, 2005
10. Evaluate and communicate progress on the 2005 Strategic Plan and its effects in Marion County. Renew the vision, mission, target, goal, and actions for 2006.	PSCC Chair, Patti Milne, with staff support and leadership from the PSCC membership	December, 2005

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Attachment C

Resolution from the
Marion County BOC

BEFORE THE BOARD OF COMMISSIONERS
FOR MARION COUNTY, OREGON

In the matter of endorsing the)
2005 Strategic Plan of the)
Marion County Public Safety)
Coordinating Council.)

RESOLUTION No. 04-47 R

This matter came before the Board of Commissioners at its regularly scheduled public meeting on November 24, 2004, to consider endorsing the 2005 Strategic Plan of the Marion County Public Safety Coordinating Council.

WHEREAS, the Marion County Public Safety Coordinating Council has been established pursuant to ORS 423.560 for the purpose of coordinating local criminal justice policy within Marion County; and

WHEREAS, the Marion County Public Safety Coordinating Council has developed a strategic plan for the upcoming calendar year prioritizing criminal justice issues within the county as set forth in Exhibit A (attached hereto and incorporated herein); and

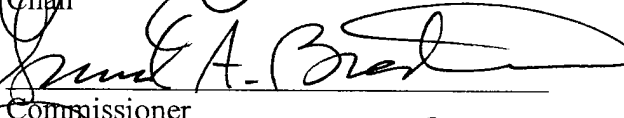
WHEREAS, the Marion County Board of Commissioners finds that the proposed 2005 Strategic Plan of the Marion County Public Safety Coordinating Council provides for an effective strategy for improving public safety within Marion County; now, therefore,

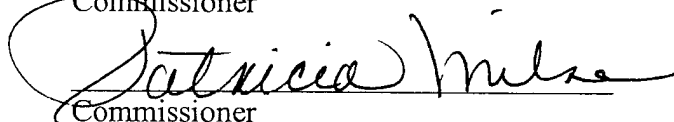
IT IS HEREBY RESOLVED that the Marion County Board of Commissioners approves and endorses the 2005 Strategic Plan of the Marion County Public Safety Coordinating Council.

DATED at Salem, Oregon, this 24th day of November 2004.

MARION COUNTY BOARD OF COMMISSIONERS


Chair


Commissioner


Commissioner

Attachment D

Summary
List of Cities, Presenters, Action Taken

CITY COUNCIL PRESENTATIONS

MCPSCC 2005

DATE	CITY	MCPSCC PRESENTORS	ACTION
April 28	Turner	Commissioner Milne, Dan Estes	- Proclamation Issued
May 2	Keizer	Sheriff Ramirez, Ruth Hewett	<ul style="list-style-type: none"> - All city councilors agree to be tested - Will negotiate with unions for random drug testing employees - Will issue a proclamation in conjunction with August 'Night Out'
May 9	Aumsville	Commissioner Milne, Dan Estes	-Presentation well received
May 9	Sublimity	Anna Peterson, Chief Myers	- Proclamation issued
May 9	Idanha	Seantel Heisel, Dick Cowan	-Presentation well received
May 9	Woodburn	Sheriff Ramirez, Walt Beglau	<ul style="list-style-type: none"> -Presentation well received - All but two councilors tested
May 10	Aurora	Commissioner Milne & Rod Calkins	-Presentation well received
May 12	Gervais	Sheriff Ramirez, Ruth Hewett, Walt Beglau	-Presentation well received
May 16	Stayton	Chief Myers, Dan Estes, Ed McKenney	- Proclamation issued
May 19	Gates	Judge Tripp, Dick Cowan	-Presentation well received
May 23	Salem	Walt Beglau, Chief Myers	
May 24	Mill City	Walt Beglau and Pete McCallum	-Presentation well received
May 26	Jefferson	Sheriff Ramirez, Walt Beglau	
June 6	Mt. Angel	Ed McKenney and Pete McCallum	-Presentation well received
June 6	Silverton	<u>Dan Estes, Anna Peterson</u>	-Presentation well received
June 13	St. Paul	<u>Dan Estes, Seantel Heisel</u>	-Presentation well received
June 14	Hubbard	Commissioner Milne, Dan Estes	-Presentation well received
June 18	Detroit	Sheriff and Ed McKenney	-Presentation well received
June 23	Scotts Mills	Sheriff & Undersheriff	-Presentation well received
	Donald	Not Participating.	

Attachment E

Summary
Senate Bill 907
House Bill 2485

Methamphetamine - 2005 Meth Package

SB 907 and HE 2485, 2005 Oregon Laws Chapter _

1. New or expanded crimes:

- A. Expands Criminal Mistreatment in the First Degree where a dependent person or elderly person is left or caused to enter, a meth cook site where the reaction is occurring or the premises have not been certified as 'fit' after a cook;
- B. Child Neglect I is expanded to include bringing a child in or upon premises where a cook is occurring or has occurred and not certified as 'fit'. Increases the sentencing to a category "6" if the child neglect conviction is for DCS or MCS of methamphetamine;
- C. Arson in the First Degree includes causing a fire or explosion by knowingly engaging in the manufacture of meth and the damage is to protected property;
- D. Arson in the Second Degree is expanded in the same way as Arson I, but to non-protected property;
- E. New Class C felony of Possessing or Disposing of Methamphetamine Manufacturing Waste;
 - a. Knowing possess meth waste; or
 - b. Knowingly dispose of meth waste;
- F. New Class B felony of distribution of equipment, solvent, reagent or precursor with intent to facilitate the manufacture of a controlled substance;
- G. New Class A misdemeanor of Unlawful Possession of Lithium Metal or Sodium Metal; H. Expands Theft I to include stealing precursor substances as defined in ORS 475.940;
- 1. New Class A misdemeanor of Unlawful Possession of Ephedrine, Pseudoephedrine or phenylpropanolamine;
 - c. Note the defenses:
 - i. Obtained it lawfully.
 - ii. Possess no more than 6 grams of pseudoephedrine.
 - iii. Possess under circumstances that "are consistent with typical medicinal or household use..."
- J. New Class A misdemeanor of Unlawful Distribution of Iodine in its Elemental Form if knowingly sold or transferred iodine in its elemental form to a person not authorized;
- K. New Class A misdemeanor of Unlawful Distribution of an Iodine Matrix, same elements as "J" above;
- L. Specifically delineates MCS Methamphetamine, a Class B felony;
- M. Specifically delineates MCS Methamphetamine w/in 1,000' of a school as a Class A felony;
- N. Specifically delineates DCS Methamphetamine as a Class B felony (Class A felony if delivered to a minor or w/in 1,000' of a school);
- O. Specifically delineates PCS Methamphetamine.
- P. Note that specific delineations are created for cocaine, heroin, marijuana, "3, 4 methylenedioxyamphetamine".

2005 LEGISLATIVE UPDATE

II. Penalties:

D. MCS Methamphetamine:

- a. Optional probation or a downward dispositional departure is precluded if there is a prior conviction for:
 - i. DCS or MCS of methamphetamine;
 - ii. *DCSIMCS* of methamphetamine w/in 1,000' of a school;
 - iii. Possession of a precursor with intent to manufacture;
- b. Downward durational departure limited to no less than V2 presumptive time.

E. DCS methamphetamine:

- a. Optional probation or a downward departure is precluded if there is a the DCS involved a "substantial quantity" of meth and there is a prior conviction for:
 - i. *DIMCS* of methamphetamine;
 - ii. *DIMCS* meth w/in 1,000' of a school; or
 - iii. Possession of a precursor substance with the intent to manufacture a controlled substance.

- F. DCS with two prior convictions listed above, is now a presumptive 19 months or longer depending on the defendant's criminal history score.

III. Ancillary Penalties:

E. Loss of food stamp eligibility if:

- a. Convicted of MCS or DCS; and
- b. Person is under supervision and the probation/parole office recommends suspending the eligibility, where the PO has reason to believe that the person is trading food stamps for controlled substances; and
- c. Based on the trading, a member of the person's household who is a dependent did not receive the food stamp benefit that he/she is entitled to.
- d. May reinstate upon a recommendation from probation/parole if the person is enrolled in and successfully participating in rehab.

- F. Expands the definition of "abuse" (in ORS 419B.005) to include unlawful exposure to a controlled substance that subjects the child to a substantial risk of harm to the child's health or safety;

- G. Allows court to limit, suspend or terminate a parent's "parenting time" if the court finds the parent has abused a controlled substance and that parenting time is not in the child's best interests;

- H. Expands Nuisance definitions and decontamination of property.

Note: These bills were signed by the Governor on August 16, 2005.

