



CITY OF RICHMOND

REPORT TO COMMITTEE

TO: General Purposes Committee
FROM: Chuck Gale, P. Eng.
General Manager, Community Safety

DATE: September 24, 2001
FILE: -

RE: FCM Municipal Drug Strategy - Call for Participants

STAFF RECOMMENDATION

That Council approve submitting the attached letter of commitment to the FCM offering to become part of the Municipal Drug Strategy Pilot Project, and

That the Mayor be appointed as the City Representative to the project.

A handwritten signature in black ink, appearing to read 'Chuck Gale'.

Chuck Gale, P. Eng.
General Manager, Community Safety

Att. 2

STAFF REPORT

ORIGIN

At the April 2, 2001 General Purposes Committee the Task Force on Drugs and Crime - One Year Work Plan was received for information. A second recommendation was carried which states:

the proposed strategy and draft one year work plan be referred to the General Manager of Community Safety Division for a report to the General Purposes Committee with a program impact statement and recommendations.

In August, 2001 the FCM put out a call for participants to become involved in a one-year pilot project to develop municipal drug strategies (Att. 1). This report deals with the opportunity to become involved in this pilot project and how it can be integrated with the overall Community Safety strategy.

ANALYSIS

Staff had anticipated bringing forward the report to Committee later this Fall which outlined how the Task Force's Draft One Year Plan would impact the Division's Community Safety Strategy (a report will be coming to the October 10, Community Safety Committee). In the interim the FCM's call for participants was received by the Mayor's office, and was forwarded to Community Safety to determine its suitability for Richmond.

FCM is seeking a total of five municipal partners. The selection criteria to be used consists of:

- community size (they are interested in small to medium sized communities)
- regional representation (B.C. is considered one region)
- appointing member of Council as the City's representative
- an existing group to lead the initiative
- a municipal commitment to dedicate funding and/or staff resources for a local coordinator (minimum of six months)
- previous partnerships or initiatives
- a commitment to involve stakeholders
- a vision for a community drug strategy

Staff have reviewed the information from FCM in relation to the work done to date by the Task Force on Crime and Drugs, and offer the following comments:

1. Richmond has already taken a number of actions to support this proposal.
 - The Task Force on Drugs and Crime already exists and could be utilized to lead this initiative
 - Monies have been set aside from the Casino Funds for a temporary drug program and policy coordinator (pending Committee's approval) which could be used for a local coordinator position
 - There are a number existing programs to combat drug abuse in the community
 - Council has demonstrated a commitment to community and stakeholder involvement through the creation of the Task Force on Drugs and Crime, the Community Safety Committee and Citizen Advisory Committee on Policing

2. There are benefits associated with FCM's proposal:
 - Financial assistance towards a local drug policy coordinator (up to \$8,500 per community)
 - Financial assistance towards participation in National Round Tables (up to \$5,000 per community)
 - strategies for communications and public relations
 - sessions on mobilizing community support
 - the ability to influence at the national level
 - an opportunity to collect additional perspectives and partners
3. It was anticipated the report from the General Manager regarding the Task Force on Drugs and Crime Draft One Year Work Plan would be brought forward in November, recommending various options for implementation. There is an opportunity to gain perspectives from other municipal partners before bringing this report forward.
4. Drug abuse and related crime is a regional issue. There are initiatives underway at the regional level, such as the Vancouver/Richmond Health Board's draft "Framework for Action – Urgent Action – Pilot Phase I" which could have implications for Richmond.

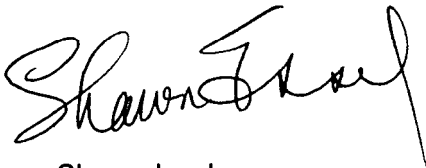
The deadline for submitting an application is October 15, 2001. Staff have prepared a letter of commitment (Att. 2) for Committee's approval, should they decide to pursue this proposal.

FINANCIAL IMPACT

None at this time, however if Council is successful in its application, a subsequent report would need to be brought forwarding outlining the terms of reference for filling the local coordinator position.

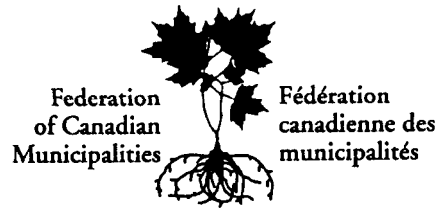
CONCLUSION

The issue of drug abuse and associated crime is of ongoing concern. There are initiatives going on regionally which could impact the community of Richmond. This proposal is an opportunity for Council to continue to have input and control, while gaining expertise and resources.



Shawn Issel
Manager, Divisional Programs

SI:si



FCM's Municipal Drug Strategy - Call for Participants

The Federation of Canadian Municipalities is calling for participants in a one-year pilot project to develop municipal drug strategies.

Canadian municipal leaders view drug abuse as a central strategic concern, with some municipalities reporting that over 70 per cent of local crime is related to substance abuse. In 1992, it was estimated that the social and economic costs of alcohol and illicit drug abuse to Canadians was in the order of \$9 billion. FCM's Municipal Drug Strategy is a multi-year project to build a strategy based on the four pillars of awareness, education, prevention and treatment. The project is a partnership with the Health and Enforcement in Partnership (HEP) Committee (co-ordinated by the Canadian Centre on Substance Abuse), with support from the National Crime Prevention Centre (NCPC).

FCM has developed tools and published a Framework that municipalities across the country can use to develop their own municipal drug strategies. The Framework outlines basic principles and key elements to be considered when a local drug strategy is elaborated and acted upon.

We are now seeking municipal partners to use the Framework to develop a drug strategy tailored to meet local needs. If your community is chosen as one of five pilot communities in this project, you will:

- participate in a Round Table meeting in December 2001 to initiate the Municipal Drug Strategy project;
- bring together key community partners to develop your municipal drug strategy;
- conduct a needs assessment that will provide valuable background information in developing your strategy;
- develop an outline for action on drug abuse for your community;
- mobilize your community around the developed strategy; and
- participate in a final Round Table meeting in Fall 2002.

FCM will help the pilot communities to develop an action plan to address local drug problems by providing:

- expert advice on conducting a comprehensive needs assessment;
- information on the key elements of a municipal drug strategy, including raising awareness, education, prevention, treatment, enforcement, health promotion, harm reduction and rehabilitation;
- sessions on mobilizing community support;
- financial assistance towards a local drug policy co-ordinator (up to \$8,500 per pilot community) and also towards participation in national Round Tables (up to \$5,000 per pilot community); and
- strategies for communications and public relations.

Developing a comprehensive municipal drug strategy is a big undertaking and we ask that you demonstrate your ability and commitment by submitting a letter of commitment from your Municipal Council showing the support that is needed to be successful. Please also attach any other documents that support your application. A sample letter of commitment and list of criteria that will be used to select the five pilot communities are attached here. Should you have any questions, please contact Sue Welke or Sylvie Caissie at 613-241-5221.

The deadline for submitting an application is **October 15, 2001**.

The project Steering Committee will review the expressions of interest in October 2001 and select five pilot communities. The five pilot communities will be notified in early November and will send representatives to an inaugural Round Table in Ottawa in early December 2001.

We wish you every success with your submission.

FCM's Municipal Drug Strategy Selection Criteria

FCM's Municipal Drug Strategy Steering Committee will review your proposals and select five communities to develop their own municipal drug strategies. To guide your proposal-writing process, the Steering Committee presents their list of selection criteria here.

Selection criteria:

1. *Community size:* If possible, the five communities should reflect a range of sizes, i.e.:
 - two small (population up to 65,000)
 - two medium (population 65,000 – 150,000)
 - one large (anything above 150,000)A higher number of small and medium communities are suggested because there are more existing examples of large city drug strategies already being developed.
2. *Regional and urban / rural distribution:* the five regions to consider are 1) British Columbia, 2) the Prairies, Yukon, Northwest Territories and Nunavut, 3) Ontario, 4) Quebec and 5) Atlantic Canada. An attempt will be made to select a community from each region, and one rural community. The Steering Committee will also attempt to select at least one community that has a high population of Aboriginal peoples, and/or is located in Canada's North.
3. *Demonstrated support from community decision-makers:* the letter of commitment naming an elected municipal official as the project liaison will partially fulfill this criterion. The applicant may also wish to consider a contribution of meeting space and administrative or other in-kind support.
4. *Leadership and organizational structure:* the formation of, or existence of, a Committee of Council, a Mayor's Task Group or a Crime Prevention Council will indicate to the project Steering Community that a community group exists to lead the initiative.
5. *Local co-ordinator:* a municipal commitment to dedicating staff resources, or partnering with a community organization to create a position for a local co-ordinator will be an important consideration (FCM can contribute approximately \$8,500 to each pilot community to offset the costs of a local co-ordinator). The Steering Committee has determined that a co-ordinator should be in place for a minimum of six months. A commitment to extending the efforts of the Municipal Drug Strategy beyond the duration of the project will also be an important selection criterion;

6. *Previous partnerships and initiatives:* the applicant should demonstrate community partnerships that have already been created and maintained, and provide information about previous initiatives undertaken in their communities to address drug use and abuse;
7. *Stakeholder involvement:* a commitment to involving community partners and extended community involvement. This commitment could be demonstrated through a description of how the community intends to identify stakeholders, and possible strategies for making information available to citizens, etc.;
8. *Community vision:* applicants are encouraged to formulate a vision for their community's drug strategy and how they wish to enact it through participation in the project.

The Steering Committee will be using a matrix that includes each of these criteria to make the final selection of five participating communities.

September 18, 2001
File: -

Mayor's Office
Telephone: (604) 276-4123
Fax: (604) 276-4332

Mr. James Knight
Chief Executive Officer
Federation of Canadian Municipalities
24 Clarence Street
Ottawa, Ontario
K1N 5P3

Dear Mr. Knight:

Re: FCM's Municipal Drug Strategy Project - Pilot Communities

The City of Richmond is committed to developing a local drug strategy, and by way of this letter of commitment indicate our desire to be involved in FCM's Municipal Drug Strategy Project.

The City of Richmond has a population of 165,000 and is situated just south of the City of Vancouver. Public Safety is the top priority for our Council. In March 2000, the Richmond Task Force on Drugs and Crime was formed to determine the extent of drug use and the related level of crime, and to recommend solutions. The Task Force is a community partnership with representatives from City Council, the School District, RCMP, the regional health board, a provincial representative from the Attorney General's office, as well as members of the community.

An early outcome of the Task Force's work was a briefing paper (Att.1) titled, "Identifying the Facts: Background Information", which details current programs and services, gaps in programs and services, statistics, approaches and philosophies. Earlier this year the Taskforce's draft one year work plan was presented to key community stakeholder agencies. Response to this workplan has been very positive, with most of the stakeholder agencies indicating a keen desire to be involved in its implementation.

The workplan was developed based on the following key principles:

- a cooperative interagency approach involving the public, business and non-profit sectors of the community
- the 'Four-Pillar' approach – prevention, treatment, enforcement and harm reduction
- a recognition and integration of national and regional initiatives, such as FCM's Municipal Drug Strategy

In addition, the workplan's goals are very much in keeping with the municipal leadership role identified in FCM's Municipal Drug Strategy. In an effort to provide you with a comprehensive view of this initiative, the following list of documents are enclosed for your reference:

- Richmond Task Force on Drugs and Crime – Terms of Reference (Att. 2)
- Richmond Task Force on Drugs and Crime draft one year work plan (Att. 3)

At the same time as the Taskforce's draft one year work plan was about to be implemented, the organizational structure of the City changed to reflect Council's priorities for public safety. The Community Safety Division was created, which amalgamates all departments responsible for public safety under one General Manager, and a new Standing Committee of Council, was formed in February 2001, called the Community Safety Committee.

FCM's Municipal Drug Strategy Project is well-timed to coincide with the implementation of Richmond's overall Community Safety Strategy. Later this Fall, the General Manager of the Community Safety Division had intended to bring a report to Council which outlines how the Task Force's draft one year workplan can be integrated into the City's overall community safety strategy. In addition, one-time funding had been set aside, which was earmarked for the implementation of the Task Force work plan based on the recommendations in the report. Although the General Manager's report has not yet been brought forward, enough work has been done to indicate that an initiative to combat drug abuse is a essential component of our community safety strategy.

Therefore, as indication of Richmond City Council's commitment and support, I am pleased to confirm that we would be willing undertake the following actions, with a view to participation in the FCM Municipal Drug Strategy pilot project:

- appointing Councillor Lyn Greenhill as our representative to work with FCM to oversee planning and implementation of a comprehensive municipal drug strategy;
- hiring a consultant to act as the local co-ordinator of our action plan for a period of at least six months, and possibly up to one year;
- utilizing the Richmond Crime and Drug Taskforce draft workplan as the foundation for the FCM Municipal Drug Strategy pilot project;
- utilizing the members of the Richmond Crime and Drug Taskforce and the associated stakeholder community agencies already identified, for continued community involvement.

We understand that only five communities will be selected to participate in this program, and hope that our expression of interest will be seriously considered.

We look forward to working closely with FCM on this venture.

Yours truly,

Lyn Greenhill
Acting Mayor

Att. 3

LG:si