

# CITY OF MERCER ISLAND CITY COUNCIL MEETING AGENDA

## Thursday April 17, 2014 5:15 PM

Mayor Bruce Bassett Deputy Mayor Dan Grausz Councilmembers Debbie Bertlin, Jane Brahm, Mike Cero, Tana Senn and Benson Wong All meetings are held in the City Hall Council Chambers at 9611 SE 36th Street, Mercer Island, WA unless otherwise noticed

"Appearances" is the time set aside for members of the public to speak to the City Council about any issues of concern. If you wish to speak, please consider the following points:

speak audibly into the podium microphone, (2) state your name and address for the record, and (3) limit your comments to three minutes.

Please note: the Council does not usually respond to comments during the meeting.

Contact: 206.275.7793, council@mercergov.org www.mercergov.org/council

# SPECIAL JOINT MEETING WITH MISD BOARD

## CALL TO ORDER & ROLL CALL, 5:15 PM

## **SPECIAL BUSINESS**

a. Mary Wayte Pool—Interlocal Agreement 2015-2024

The Superintendent and City Manager will share information about the Interlocal Agreement.

b. Construction Projects Update and Schedule

The Superintendent and Board members will share information about the three projects that are moving forward as a result of the successful 2014 bond vote.

c. Task Force on Youth Concerns

The MIYFS Director and Superintendent will share background information about youth concerns.

## ADJOURNMENT, 6:45 PM

### MERCER ISLAND SCHOOL DISTRICT #400 BOARD OF DIRECTORS REGULAR MEETING April 17, 2014

## STUDY SESSION WITH MERCER ISLAND CITY COUNCIL

## **Construction Projects Update and Schedule**

The Superintendent and Board members will share information about the three projects that are moving forward as a result of the successful 2014 bond vote.

1. Build a new 4<sup>th</sup> K – 5 elementary school on district owned land near the high school at Southeast 40<sup>th</sup> street and 86<sup>th</sup> Avenue Southeast.

This project is on track for awarding bids in December 2014. Traffic studies along with analyses of impacts/mitigation have been taking place with City and District staff. There is a high level of cooperation between District and City staff. Site preparation and demolition of existing buildings will commence in earnest this fall. The City and District have been working cooperatively to allow the Little Acorn Preschool to move into its new location by September 1. The District and YTN have agreement on an IMS location for summer, and YTN will vacate their present location prior to August 31. Regarding CHILD, the District has reached out to the City of Renton, imploring them to move up the timeline to issue permits (30 days) which did occur. The District is unaware of the future location for Country Village.

The new school is scheduled for completion for late spring/early summer of 2016, and opening for children on the first day of school in 2016.

2. Expand the existing Islander Middle School campus, including 14 new classrooms, larger student commons area and a new gymnasium.

This project is on track for awarding bids in December 2014. Traffic studies, analyses and impacts/mitigation have been taking place with City and District staff. There is a high level of cooperation between District and City staff. A phased building approach will be needed to build the IMS expansion. To be ready for that approach this fall, site preparation is needed this summer. There are planned improvements to the bus entry (loop) in the front of the school along with re-siting of portable classrooms, scheduled for this summer.

3. Expand the existing high school by adding an additional eight to ten classrooms including science labs.

The project is on track for awarding bids in late summer 2014. As indicated in the elementary school summary, traffic studies were completed and discussions with the City are ongoing. The District has requested a land use variance in order to construct the 10 classrooms sited closest to 92<sup>nd</sup> Street. The Hearing is set for May. Site construction is planned for this summer and will reconfigure MIHS entry/drop-off as well as improvements to the bus pick-off/drop-off.

### Mary Wayte Pool—Interlocal Agreement 2015-2024

The Superintendent and City Manager will share information about the Interlocal Agreement.

The Mercer Island School District is the owner and operator of Mary Wayte Pool. Presently, the District subcontracts the operation of the Pool to Olympic Cascade Aquatics (OCA). The City provides an operating subsidy through an Interlocal Agreement. The District is proposing a 10-year Interlocal Agreement with the City of Mercer Island to continue its subsidy for the operation of Mary Wayte Pool. The topic of increasing the pool subsidy by the prior year's Consumer Price Index (CPI) was discussed at the joint meeting on April 11, 2013. This Interlocal reflects both the CPI escalator as well as the District's commitment to contribute up to \$3M of capital improvements to MWP over the life of the Agreement.

#### **Task Force on Youth Concerns**

Cindy Goodwin and Gary Plano will share background information about youth concerns.

Since 1999, City and District staff continue to meet regularly (five (5) times a year) to discuss youth concerns. The group consists of the Chief of Police, Superintendent, YSF Director and YSF school teams, diversion specialists and community partners. This year discussion has focused on learning about Island youth and concerns related to their social/emotional well being and their ability to consistently make healthy choices. City Manager Noel Treat and Superintendent Gary Plano will discuss the idea of a Task Force, appointed by them, to study youth concerns surrounding depression, anxiety and stress and how those factors contribute to unhealthy choices.

#### EXTENSION AGREEMENT TO INTERLOCAL AGREEMENT BETWEEN THE CITY OF MERCER ISLAND AND THE MERCER ISLAND SCHOOL DISTRICT CONCERNING THE OPERATION OF THE MARY WAYTE POOL

#### 1. PARTIES

This Extension Agreement ("Extension Agreement") is entered into by the City of Mercer Island, a Washington municipal corporation ("City"), and the Mercer Island School District, No.400, a municipal corporation, King County, Washington ("District"). The City and District enter into this Extension Agreement pursuant to and as authorized by the Interlocal Cooperation Act (Chapter 39.34) to amend the INTERLOCAL AGREEMENT BETWEEN THE CITY OF MERECER ISLAND AND MERCER ISLAND SCHOOL DISTRICT COCNERNEING THE OPERATION OF THE MARY WAYTE POOL ("Interlocal Agreement"), executed by the City and the District on November 5, 2013.

#### 2. PURPOSE AND RECITALS

2.1 The Interlocal Agreement between the City and District expires as of December 31, 2014. The City and District desire to extend the Interlocal Agreement for a period of ten (10) years, commencing January 1, 2015 and ending December 31, 2025, by executing this Extension Agreement.

#### 3. EXTENSION AGREEMENT TERMS

The following sections of the Interlocal Agreement are revised to state:

- 3.1 In consideration of the District's agreement to own, operate and maintain the Pool consistent with the terms of this Agreement the City shall pay the District One Hundred and Twenty-six Thousand Five Hundred Dollars and No/100 (\$126,500.00) during 2015 in equal monthly payments, commencing on January 1, 2015. This facility management subsidy shall be adjusted by the prior year's annual Seattle-Tacoma-Bremerton CPI-U for Consumers for each year beginning with the 2016 subsidy.
- 3.2 The District will place \$25,000 on January 1, 2014, and \$25,000.00 on January 1, 2015 inclusive of the dollar amount of anticipated District in-kind services for each year, in a District reserve account to be used solely for capital pool expenditures/improvements. If there is no need to expend all funds in the reserve account, the District will carry over their existing balance in the reserve accounts to be added to the annual contributions for the next contract year, if any.

The District will include up to \$3,000,000 for capital improvements to Mary Wayte Pool in the 2016 Capital Levy to be placed before voters in 2016. These improvements are intended to extend the useful life of Mary Wayte Pool for up to 10 and more years.

In the event of levy failure or system and/or infrastructure failure that cannot be cured from the available funds in the capital account as outlined in this Agreement, the parties' agree that the Board will take action to close the pool and release itself and the City from further financial commitment and the Board will work with the City of Mercer Island to determine a new solution.

Upon termination of this Agreement, all unencumbered funds in the District's reserve accounts shall remain in the District's capital facilities account, to provide major upgrades to the Mary Wayte Pool infrastructure in succeeding years.

#### 4.0 EFFECTIVE DATE

4.01 The effective date of this Agreement is January 1, 2015.

#### 5.0 TERM

5.01 This Agreement shall commence upon the Effective Date and shall continue until December 31, 2025, unless earlier terminated pursuant to any other provision of Section 6 of the Interlocal Agreement.

#### 6.0 CONSTRUCTION OF ETENSION AGREEMENT

6.1 The express terms of this Extension Agreement shall control over any conflicting terms of the Interlocal Agreement. All other terms of the Interlocal Agreement shall remain in effect during its term.

The parties have signed this Agreement on the date indicated below.

#### CITY OF MERCER ISLAND

#### MERCER ISLAND SCHOOL DISTRICT

Noel Treat City Manager Dr. Gary Plano Superintendent

Date: \_\_\_\_\_

Date:

Approved as to Form:

Approved as to Form:

Katie H. Knight City Attorney Cliff Foster Attorney for School District

### MERCER ISLAND SCHOOL DISTRICT #400 BOARD OF DIRECTORS REGULAR MEETING April 17, 2014

## STUDY SESSION WITH MERCER ISLAND CITY COUNCIL

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Integrating Substance Abuse Prevention and Mental Health Promotion: A Case for the Whole Child Approach to Community Health on Mercer Island



To achieve the goal of significantly improved long-term health, developmental, and educational outcomes among Mercer Island youth, full integration of substance abuse prevention and mental health promotion efforts is essential. National trends evidenced by priorities at SAMHSA<sup>1</sup> stress the importance of integrating these disciplines at the community level. Outcomes from the Adverse Childhood Experiences (ACE) Study<sup>2</sup> recommend adopting a "whole life perspective" and coordinating a continuum of care model for youth that focuses on early intervention, prevention and the treatment of childhood maltreatment and family dysfunction. Therefore, consideration should be given to further integrating and coordinating the substance abuse prevention and mental health promotion resources on Mercer Island across key youth-serving sectors and to the development of a functional expression of this integration, which mobilizes youth, parents, and professionals.

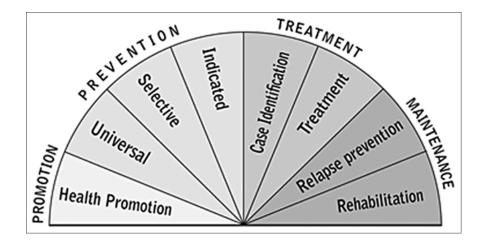
Mercer Island is a community with many assets and protective factors in place for youth—adequate housing, safe neighborhoods, quality education, and access to health care. However, it is important to avoid allowing socioeconomic affluence to mask other universal risk factors that directly affect substance abuse, mental health, and educational outcomes among Mercer Island youth—stress, adequate sleep, performance anxiety, and attachment to community.<sup>3</sup>

**Continuum of Care Model:** Interventions for youth mental health and substance abuse issues can be conceptualized using the Institute of Medicine (IOM) continuum of care model<sup>4</sup>. Best outcomes for the youth of a community are associated with services being offered concurrently across all areas of this model-- prevention-treatment-maintenance—while simultaneously supporting community norms that enhance youth health and wellness.

<sup>&</sup>lt;sup>1</sup> Substance Abuse and Mental Health Services Administration, "Coalitions and Community Health: Integration of Behavioral Health and Primary Care." Community Anti-Drug Coalitions of America document. April 2013

 <sup>&</sup>lt;sup>2</sup> Center for Disease Control and Prevention. "<u>The Relationship of Adult Health Status to Childhood Abuse and Household</u> <u>Dysfunction</u>," published in the American Journal of Preventive Medicine in 1998, Volume 14, pages 245–258.
 <sup>3</sup> 40 Developmental Assets, MISD.

<sup>&</sup>lt;sup>4</sup> Preventing Mental, Emotional, and Behavioral Disorders Among Young People: Progress and Possibilities, National Research Council and Institutes of Medicine, 2009



Understanding integrating substance abuse and mental health involves looking into the IOM continuum of care "protractor." To the left on the protractor, *health promotion* interventions refer to efforts targeting the general public or a whole population. These interventions aim to enhance individuals' ability to achieve developmentally appropriate tasks and a positive sense of self-esteem, mastery, wellbeing, and social inclusion, and strengthen their ability to cope with adversity. Examples on Mercer Island include CTC's Positive Community Norms social norms marketing effort or the IMS Second Step<sup>®</sup> curriculum. On a national level, prominent examples include the public health campaigns to increase usage of seat belts and child car seats.

*Prevention* looks to change the root cause or local condition that contributes to underage substance abuse or mental health conditions. *Universal prevention* also targets the general public or a whole population that has not been identified on the basis of individual risk. Examples includes the school district enhancing visibility at "The Pit" and the City Council enacting the Underage Drinking Ordinance. *Selective prevention* targets individuals or a population subgroup whose risk of developing mental disorders or substance abuse issues is significantly higher than average. Examples include school district discipline code referral or middle school and elementary school behavioral groups. *Indicated prevention* targets to high-risk youth who are identified as having detectable signs or symptoms foreshadowing mental, emotional, behavioral, or substance use disorders. Examples include YFS Drug and Alcohol or Mental Health Counselor assessments and school referrals to YFS School Counselor for mental health intervention and assessment.

Once youth have developed problems with substance abuse or mental health conditions, they are more appropriately candidates for treatment services than prevention.

*Treatment* includes active intervention by trained professionals to address emergent emotional, psychological, social and/or chemical issues. *Case identification* refers screening for high-risk youth such as done by YFS agency and school-based counselors. *Treatment* includes professional intervention for active mental health or substance abuse disorders. *Maintenance* involves individualized support to maintain mental health, sobriety, positive family functioning, and pro-social interactions.

**Whole Life Perspective:** Coordinating health promotion, prevention, treatment and maintenance among community stakeholders involved with youth (parents, schools, youth serving organizations, youth health providers) using a public health approach can prevent youth problem behaviors such as violence, delinquency, school drop-out, substance abuse and mental health disorders. The ACEs study underlines this assertion by demonstrating that by avoiding certain childhood experiences that are major risk factors youth will have a markedly improved overall quality of life. That is, taking a "whole life perspective" and considering longer term health impacts, is a proven-effective method of improving quality of life. Work by Dr. Dennis Embry demonstrates a similar concept by demonstrating the benefits of "behavioral vaccines"<sup>5</sup>, simple interventions (behavior changes such as adequate sleep, positive school-to-home notes and diet considerations) that show powerful statistical correlations with reductions in underage substance abuse and mental health issues.

**Summary:** Preventing substance abuse, mental, emotional and behavioral disorders must include a coordinated public health approach<sup>6</sup> that targets the whole population of Island youth. Such an approach must involve key organizational stakeholders in the lives of youth: parents, schools, YFS, police, faith community, recreation/sports, service groups, businesses. Current research highlights the ability of small changes to have significant lifelong impact in the lives of youth. Mercer Island currently has many areas of the IOM Continuum of Care accounted for but needs to better focus on population level indicators that can act as a barrier to achieving more significant health outcomes. It is time to consider a coordinated approach to improve the health of the youth of the community that focuses on population level indicators beyond those targeted by CTC, schools, YFS or other youth serving organizations in silos. Furthermore, it is time to integrate the parent and professional communities to accomplish this goal.

<sup>&</sup>lt;sup>5</sup> Behavioral Vaccines and Evidence Based Kernels: Non-Pharmaceutical Approaches for the Prevention of Mental, Emotional and Behavioral Disorders: Dennis D. Embry, Ph.D.available at <u>http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3064963/#FN1</u>

<sup>&</sup>lt;sup>6</sup> O'Connell ME, Boat T, Warner KE, editors. Preventing Mental, Emotional, and Behavioral Disorders Among Youth People: Progress and Possibilities. Washington, DC: Institute of Medicinel National Research Council, 2009.