



Multnomah County Oregon

Board of Commissioners & Agenda

connecting citizens with information and services

REVISED

BOARD OF COMMISSIONERS

Ted Wheeler, Chair

501 SE Hawthorne Boulevard, Suite 600
Portland, Or 97214

Phone: (503) 988-3308 FAX (503) 988-3093

Email: mult.chair@co.multnomah.or.us

Maria Rojo de Steffey, Commission Dist. 1

501 SE Hawthorne Boulevard, Suite 600
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Phone: (503) 988-5213 FAX (503) 988-5262

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MARCH 21 & 22, 2007 BOARD MEETINGS

FASTLOOK AGENDA ITEMS OF INTEREST

Pg 2	9:30 a.m. Wednesday Budget Work Session
Pg 2	1:00 a.m. Wednesday Budget Work Session
Pg 3	9:30 a.m. Thursday Opportunity for Public Comment on Non-Agenda Matters
Pg 4	9:30 a.m. Thursday Legislative Update
Pg 4	10:00 a.m. Thursday Briefing on Oregon Older Adult Suicide Prevention Plan and Forums
Pg 4	10:20 a.m. Thursday MCSO Notice of Intent to Apply for a Grant Under the Prison Rape Elimination Act
Pg 4	10:35 a.m. Thursday Peak Oil Task Force Report

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Thursday, 9:30 AM, (LIVE) Channel 30
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Produced through MetroEast Community Media
(503) 667-8848, ext. 332 for further info
or: <http://www.mctv.org>

Wednesday, March 21, 2007 - 9:30 AM
Multnomah Building, First Floor Commissioners Boardroom 100
501 SE Hawthorne Boulevard, Portland

BUDGET WORK SESSION

WS-1 Multnomah County 2007-2008 Budget Work Session on Fiscal Year 2008 Budget Process. This meeting is open to the public however no public testimony will be taken. Facilitated by Karyne Dargan, the Public Strategies Group and Invited Staff. 2 HOURS REQUESTED.

CABLE PLAYBACK INFO:

Wednesday, March 21 - 9:30 AM LIVE Channel 29
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Wednesday, March 21, 2007 - 1:00 PM
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BUDGET WORK SESSION

WS-2 Multnomah County 2007-2008 Budget Work Session on Fiscal Year 2008 Budget Process. This meeting is open to the public however no public testimony will be taken. Facilitated by Karyne Dargan, the Public Strategies Group and Invited Staff. 2 HOURS REQUESTED.

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Thursday, March 22, 2007 - 9:30 AM
Multnomah Building, First Floor Commissioners Boardroom 100
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REGULAR MEETING

CONSENT CALENDAR - 9:30 AM **NON-DEPARTMENTAL**

- C-1 Reappointment of John Ingle to the Multnomah County PLANNING COMMISSION

SHERIFF'S OFFICE

- C-2 RESOLUTION Authorizing the Sheriff to Dispose of Found/Unclaimed Property Pursuant to MCC 15.650
- C-3 Budget Modification MCSO-06 Transferring \$36,545.56 Found/Unclaimed Property Including Money Recovered During Drug Deals and Court Designated Forfeitures to the Multnomah County General Fund

DEPARTMENT OF COMMUNITY SERVICES

- C-4 RESOLUTION Authorizing the Private Sale of a Tax Foreclosed Property to DANIEL Y. ANDRE'

DEPARTMENT OF COUNTY MANAGEMENT

- C-5 Budget Modification DCM-09 Reclassifying Positions in Treasury and Assessment and Taxation, as Determined by the Class/Comp Unit of Central Human Resources

DEPARTMENT OF COUNTY HUMAN SERVICES

- C-6 Budget Modification DCHS-18 Reclassifying an Office Assistant 2 to Office Assistant Senior in the Mental Health and Addiction Services Division, DUII Evaluation Program, as Determined by the Class/Comp Unit of Central Human Resources

REGULAR AGENDA **PUBLIC COMMENT - 9:30 AM**

Opportunity for Public Comment on non-agenda matters. Testimony is limited to three minutes per person. Fill out a speaker form available in the Boardroom and turn it into the Board Clerk.

PUBLIC AFFAIRS OFFICE - 9:30 AM

- B-1 Update on the Work of the Legislature as it Pertains to Issues of Interest to Multnomah County. Presented by Gary Conkling and Gina Mattioda. 30 MINUTES REQUESTED.

NON-DEPARTMENTAL - 10:00 AM

- B-2 Briefing on Oregon Older Adult Suicide Prevention Plan and Forums. Presented by Commissioner Maria Rojo de Steffey; Mary Shortall, ADS; Lisa Millet, OR Dept of Human Services; and Paul Iarrobino, ADS. 20 MINUTES REQUESTED.

SHERIFF'S OFFICE - 10:20 AM

- R-1 NOTICE OF INTENT to Apply for a Grant Under the Prison Rape Elimination Act (PREA) Protecting Inmates and Safeguarding Communities Program For Purposes of Installing a Radio Frequency Identification System in the Multnomah County Detention Center

NON-DEPARTMENTAL - 10:35 AM

- B-3 Peak Oil Task Force Report – Social Service Provider Implications. Presented by Commissioner Jeff Cogen and Bill Scott, Flex Car General Manager. 20 MINUTES REQUESTED.

BOARD COMMENT - 10:55 AM

Opportunity (as time allows) for Commissioners to provide informational comments to Board and public on non-agenda items of interest or to discuss legislative issues.



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BOARD COMMENT - 10:35 AM

Opportunity (as time allows) for Commissioners to provide informational comments to Board and public on non-agenda items of interest or to discuss legislative issues.



MULTNOMAH COUNTY AGENDA PLACEMENT REQUEST (short form)

Board Clerk Use Only

Meeting Date: 03/22/07
Agenda Item #: C-1
Est. Start Time: 9:30 AM
Date Submitted: 03/14/07

Agenda Title: Reappointment of John Ingle to the Multnomah County Planning Commission

Note: If Ordinance, Resolution, Order or Proclamation, provide exact title. For all other submissions, provide a clearly written title.

Requested Meeting Date:	March 22, 2007	Amount of Time Needed:	N/A
Department:	Non-Departmental	Division:	Chair's Office
Contact(s):	Ted Wheeler, Tara Bowen-Biggs		
Phone:	(503)988-3308	Ext.	83953
I/O Address:	503/600		
Presenter(s):	Consent Calendar		

General Information

1. What action are you requesting from the Board?

Request board approval of reappointment of John Ingle to the Multnomah County Planning Commission.

2. Please provide sufficient background information for the Board and the public to understand this issue. Please note which Program Offer this action affects and how it impacts the results.

The Multnomah County Planning Commission acts as the land use advisory body to the Board of County Commissioners for unincorporated Multnomah County. The Planning Commission makes recommendations to the Board of County Commissioners on the adoption, revision or repeal of the comprehensive plan and the implementing measures needed to carry out the plan. The Commission is made up of 9 members to represent the various demographic areas of Multnomah County. Members are appointed to 4-year terms by the County Chair with approval of the Board of County Commissioners. No commission member may serve more than two consecutive terms without the unanimous consent of the Board of County Commissioners.

3. Explain the fiscal impact (current year and ongoing).

No fiscal impact

4. Explain any legal and/or policy issues involved.

No legal and/or policy issues involved.

5. Explain any citizen and/or other government participation that has or will take place.

N/A

Required Signature

Elected Official or
Department/
Agency Director:

TED WHEELER

Date: 3/14/07



MULTNOMAH COUNTY AGENDA PLACEMENT REQUEST

Board Clerk Use Only

Meeting Date: 03/22/07
Agenda Item #: C-2
Est. Start Time: 9:30 AM
Date Submitted: 03/08/07

Agenda Title: RESOLUTION Authorizing the Sheriff to Dispose of Found/Unclaimed Property Pursuant to MCC 15.650

Note: If Ordinance, Resolution, Order or Proclamation, provide exact title. For all other submissions, provide a clearly written title.

Date Requested: March 22, 2007 Time Requested: 3 mins
Department: Sheriff's Office Division: Business Services
Contact(s): Larry Aab/Chris Payne
Phone: 503-251-2501 Ext. I/O Address: 331/118
Presenter(s): Chris Payne, Larry Aab and/or Wanda Yantis

General Information

1. What action are you requesting from the Board?

The Sheriff's Office is requesting approval of a Resolution Authorizing the Sheriff to Dispose of Found/Unclaimed Property Pursuant to MCC 15.650.

2. Please provide sufficient background information for the Board and the public to understand this issue. Please note which Program Offer this action affects and how it impacts the results.

This property has been in the Sheriff's possession for over 30 days. Property includes money recovered during drug deals and court designated forfeitures. The Sheriff's Office requests approval to deposit these monies in the county treasury to the credit of the county general fund.

3. Explain the fiscal impact (current year and ongoing).

This action will increase the General Fund unappropriated balance by \$36,545.56.

4. Explain any legal and/or policy issues involved.

None other than those noted above.

5. Explain any citizen and/or other government participation that has or will take place.

The State court system was involved in the court designated forfeitures.

Required Signature

**Department/
Agency Director:**

Bernie Lipato

Date: 03/08/07



MULTNOMAH COUNTY SHERIFF'S OFFICE

12240 NE GLISAN ST., • PORTLAND, OR 97230

Exemplary service for a safe, livable community

BERNIE GIUSTO
SHERIFF

503 255-3600 PHONE
503 251-2484 TTY
www.sheriff-mcso.org

MEMORANDUM

TO: DEBORAH BOGSTAD
Clerk of the Board

FROM: BERNIE GIUSTO
Sheriff

DATE: March 8, 2007

SUBJECT: FOUND/UNCLAIMED PROPERTY – LIST 06-1

Attached is a listing of found/unclaimed or unidentified property. This property has been in the Sheriff's possession for over 30 days. All attempts to establish the rightful owner(s) of the listed property have proven negative.

To comply with Multnomah County Code 15.650 I am requesting that this listing of property be placed on the Board of County Commissioners' agenda for approval of deposit in the county treasury to the credit of the county general fund.

Attachment

BEFORE THE BOARD OF COUNTY COMMISSIONERS
FOR MULTNOMAH COUNTY, OREGON

RESOLUTION NO. _____

Authorizing the Sheriff to Dispose of Found/Unclaimed Property Pursuant to MCC
15.650

The Multnomah County Board of Commissioners Finds:

- a. The Multnomah County Sheriff has had in his possession unclaimed property, identified as List 06-1 for a period in excess of 30 days. All attempts to establish the rightful owners(s) have proven negative.
- b. Multnomah County Code 15.650 provides for the Sheriff to seek authorization from the Board of County Commissioners to deposit unclaimed property by transfer of these items to the State of Oregon Department of Administrative Services. The Ordinance further allows for the transfer of property to the Multnomah County Sheriff for the use by MCSO.

The Multnomah County Board of Commissioners Resolves:

1. The Multnomah County Sheriff shall be authorized to transfer those items identified on list 06-1 to the State of Oregon Department of Administrative Services for disposal. The Sheriff shall also be authorized to transfer those items identified on list 06-1 to the Multnomah County Sheriff's Office for use by the MCSO.

ADOPTED this 22nd day of March, 2007.

BOARD OF COUNTY COMMISSIONERS
FOR MULTNOMAH COUNTY, OREGON

Ted Wheeler, Chair

REVIEWED:

AGNES SOWLE, COUNTY ATTORNEY
FOR MULTNOMAH COUNTY, OREGON

By _____
Jacqueline A. Weber, Assistant County Attorney

SUBMITTED BY:
Sheriff Bernie Giusto

MULTNOMAH COUNTY
DEPARTMENT OF PUBLIC SAFETY
FOUND/UNCLAIMED PROPERTY FOR DISPOSAL
LIST 06-1

FILE #	PROPERTY DESCRIPTION	DISPOSITION
81-21575	\$5.00	Mult. Co. General Fund
86-6842	\$4.22	Mult. Co. General Fund
87-295	\$.54	Mult. Co. General Fund
89-9331	\$413.90	Mult. Co. General Fund
90-1157	\$80.00	Mult. Co. General Fund
94-6466	\$17.00	Mult. Co. General Fund
94-7590	\$20.00	Mult. Co. General Fund
95-3318	\$2.45	Mult. Co. General Fund
96-5321	\$150.00	Mult. Co. General Fund
96-5689	\$6.29	Mult. Co. General Fund
97-5178	\$17.30	Mult. Co. General Fund
98-405537	\$20.00	Mult. Co. General Fund
99-401802	\$1.00	Mult. Co. General Fund
99-404850	\$2.61	Mult. Co. General Fund
99-407412	\$150.00	Mult. Co. General Fund
99-408296	\$476.00	Mult. Co. General Fund
01-401676	\$1,347.00	Mult. Co. General Fund
01-402003	\$6.00	Mult. Co. General Fund
01-402149	\$1.00	Mult. Co. General Fund
01-402374	\$200.00	Mult. Co. General Fund

MULTNOMAH COUNTY
DEPARTMENT OF PUBLIC SAFETY
FOUND/UNCLAIMED PROPERTY FOR DISPOSAL
LIST 06-1

FILE #	PROPERTY DESCRIPTION	DISPOSITION
01-402464	\$4.00	Mult. Co. General Fund
01-402966	\$1.25	Mult. Co. General Fund
01-404531	\$4.00	Mult. Co. General Fund
01-405672	\$538.00	Mult. Co. General Fund
01-407562	\$460.00	Mult. Co. General Fund
01-407812	\$434.00	Mult. Co. General Fund
01-407980	\$4.30	Mult. Co. General Fund
01-408222	\$434.00	Mult. Co. General Fund
01-408405	\$21.00	Mult. Co. General Fund
01-408447	\$40.00	Mult. Co. General Fund
01-408754	\$19.00	Mult. Co. General Fund
02-400352	\$785.00	Mult. Co. General Fund
02-401300	\$2,703.00	Mult. Co. General Fund
02-401426	\$444.00	Mult. Co. General Fund
02-402460	\$.26	Mult. Co. General Fund
02-402610	\$9.37	Mult. Co. General Fund
02-402715	\$.80	Mult. Co. General Fund
02-402721	\$15.57	Mult. Co. General Fund
02-402739	\$300.00	Mult. Co. General Fund
02-403530	\$140.00	Mult. Co. General Fund

MULTNOMAH COUNTY
DEPARTMENT OF PUBLIC SAFETY
FOUND/UNCLAIMED PROPERTY FOR DISPOSAL
LIST 06-1

FILE #	PROPERTY DESCRIPTION	DISPOSITION
02-404248	\$52.00	Mult. Co. General Fund
02-404270	\$110.00	Mult. Co. General Fund
02-404542	\$15.00	Mult. Co. General Fund
02-404924	\$529.00	Mult. Co. General Fund
02-405208	\$878.00	Mult. Co. General Fund
02-405248	\$50.00	Mult. Co. General Fund
02-405501	\$501.00	Mult. Co. General Fund
02-405541	\$14.00	Mult. Co. General Fund
02-406035	\$3.00	Mult. Co. General Fund
02-406965	\$66.00	Mult. Co. General Fund
02-407437	\$2,292.00	Mult. Co. General Fund
02-407700	\$3,400.00	Mult. Co. General Fund
02-407780	\$322.00	Mult. Co. General Fund
02-407908	\$1,546.00	Mult. Co. General Fund
02-408232	\$27.00	Mult. Co. General Fund
03-400161	\$197.63	Mult. Co. General Fund
03-400439	\$463.00	Mult. Co. General Fund
03-400504	\$683.20	Mult. Co. General Fund
03-400513	\$150.00	Mult. Co. General Fund
03-400540	\$573.00	Mult. Co. General Fund

MULTNOMAH COUNTY
DEPARTMENT OF PUBLIC SAFETY
FOUND/UNCLAIMED PROPERTY FOR DISPOSAL
LIST 06-1

FILE #	PROPERTY DESCRIPTION	DISPOSITION
03-400876	\$1,219.00	Mult. Co. General Fund
03-401452	\$264.00	Mult. Co. General Fund
03-401568	\$10.80	Mult. Co. General Fund
03-401597	\$380.00	Mult. Co. General Fund
03-401600	\$56.66	Mult. Co. General Fund
03-401752	\$484.00	Mult. Co. General Fund
03-401846	\$214.00	Mult. Co. General Fund
03-401857	\$541.00	Mult. Co. General Fund
03-401986	\$291.00	Mult. Co. General Fund
03-402033	\$66.91	Mult. Co. General Fund
03-402331	\$20.00	Mult. Co. General Fund
03-402349	\$1,221.00	Mult. Co. General Fund
03-402650	\$555.00	Mult. Co. General Fund
03-402772	\$234.00	Mult. Co. General Fund
03-403031	\$30.00	Mult. Co. General Fund
03-403037	\$30.00	Mult. Co. General Fund
03-403868	\$141.00	Mult. Co. General Fund
03-403891	\$570.00	Mult. Co. General Fund
03-403917	\$935.00	Mult. Co. General Fund
03-404107	\$280.00	Mult. Co. General Fund

MULTNOMAH COUNTY
DEPARTMENT OF PUBLIC SAFETY
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LIST 06-1

FILE #	PROPERTY DESCRIPTION	DISPOSITION
03-404213	\$480.00	Mult. Co. General Fund
03-404337	\$558.00	Mult. Co. General Fund
03-404826	\$80.00	Mult. Co. General Fund
03-404959	\$1.30	Mult. Co. General Fund
03-405056	\$81.48	Mult. Co. General Fund
03-405326	\$60.00	Mult. Co. General Fund
03-405327	\$960.00	Mult. Co. General Fund
03-405329	\$580.00	Mult. Co. General Fund
03-405530	\$93.00	Mult. Co. General Fund
03-405755	\$29.00	Mult. Co. General Fund
03-406468	\$163.00	Mult. Co. General Fund
04-400436	\$2,305.00	Mult. Co. General Fund
04-400494	\$340.00	Mult. Co. General Fund
04-400917	\$924.00	Mult. Co. General Fund
04-402029	\$217.00	Mult. Co. General Fund
04-404147	\$1.65	Mult. Co. General Fund
04-404188	\$1.23	Mult. Co. General Fund
04-406684	\$20.00	Mult. Co. General Fund
04-407989	\$1.31	Mult. Co. General Fund
05-400907	\$1.01	Mult. Co. General Fund

MULTNOMAH COUNTY
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LIST 06-1

FILE #	PROPERTY DESCRIPTION	DISPOSITION
05-401413	\$10.46	Mult. Co. General Fund
05-401947	\$2.26	Mult. Co. General Fund
05-402019	\$32.38	Mult. Co. General Fund
05-402099	\$200.00	Mult. Co. General Fund
05-402889	\$20.00	Mult. Co. General Fund
05-403951	\$5.00	Mult. Co. General Fund
05-404599	\$102.00	Mult. Co. General Fund
05-406527	\$3.00	Mult. Co. General Fund
06-400023	\$41.77	Mult. Co. General Fund
06-400589	\$136.18	Mult. Co. General Fund
06-400741	\$40.00	Mult. Co. General Fund
06-402368	\$3.00	Mult. Co. General Fund
06-402567	\$60.00	Mult. Co. General Fund
06-403538	\$102.05	Mult. Co. General Fund
06-403688	\$13.26	Mult. Co. General Fund
06-404300	\$91.00	Mult. Co. General Fund
06-404567	\$12.00	Mult. Co. General Fund
06-405360	\$81.16	Mult. Co. General Fund
		Mult. Co. General Fund
	TOTAL \$36,545.56	Mult. Co. General Fund

BEFORE THE BOARD OF COUNTY COMMISSIONERS
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The Multnomah County Board of Commissioners Resolves:

1. The Multnomah County Sheriff shall be authorized to transfer those items identified on list 06-1 to the State of Oregon Department of Administrative Services for disposal. The Sheriff shall also be authorized to transfer those items identified on list 06-1 to the Multnomah County Sheriff's Office for use by the MCSO.

ADOPTED this 22nd day of March, 2007.

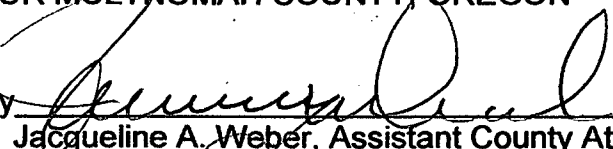


BOARD OF COUNTY COMMISSIONERS
FOR MULTNOMAH COUNTY, OREGON


Ted Wheeler, Chair

REVIEWED:

AGNES SOWLE, COUNTY ATTORNEY
FOR MULTNOMAH COUNTY, OREGON

By 
Jacqueline A. Weber, Assistant County Attorney

SUBMITTED BY:
Sheriff Bernie Giusto

MULTNOMAH COUNTY
DEPARTMENT OF PUBLIC SAFETY
FOUND/UNCLAIMED PROPERTY FOR DISPOSAL
LIST 06-1

FILE #	PROPERTY DESCRIPTION	DISPOSITION
81-21575	\$5.00	Mult. Co. General Fund
86-6842	\$4.22	Mult. Co. General Fund
87-295	\$.54	Mult. Co. General Fund
89-9331	\$413.90	Mult. Co. General Fund
90-1157	\$80.00	Mult. Co. General Fund
94-6466	\$17.00	Mult. Co. General Fund
94-7590	\$20.00	Mult. Co. General Fund
95-3318	\$2.45	Mult. Co. General Fund
96-5321	\$150.00	Mult. Co. General Fund
96-5689	\$6.29	Mult. Co. General Fund
97-5178	\$17.30	Mult. Co. General Fund
98-405537	\$20.00	Mult. Co. General Fund
99-401802	\$1.00	Mult. Co. General Fund
99-404850	\$2.61	Mult. Co. General Fund
99-407412	\$150.00	Mult. Co. General Fund
99-408296	\$476.00	Mult. Co. General Fund
01-401676	\$1,347.00	Mult. Co. General Fund
01-402003	\$6.00	Mult. Co. General Fund
01-402149	\$1.00	Mult. Co. General Fund
01-402374	\$200.00	Mult. Co. General Fund

MULTNOMAH COUNTY
DEPARTMENT OF PUBLIC SAFETY
FOUND/UNCLAIMED PROPERTY FOR DISPOSAL
LIST 06-1

FILE #	PROPERTY DESCRIPTION	DISPOSITION
01-402464	\$4.00	Mult. Co. General Fund
01-402966	\$1.25	Mult. Co. General Fund
01-404531	\$4.00	Mult. Co. General Fund
01-405672	\$538.00	Mult. Co. General Fund
01-407562	\$460.00	Mult. Co. General Fund
01-407812	\$434.00	Mult. Co. General Fund
01-407980	\$4.30	Mult. Co. General Fund
01-408222	\$434.00	Mult. Co. General Fund
01-408405	\$21.00	Mult. Co. General Fund
01-408447	\$40.00	Mult. Co. General Fund
01-408754	\$19.00	Mult. Co. General Fund
02-400352	\$785.00	Mult. Co. General Fund
02-401300	\$2,703.00	Mult. Co. General Fund
02-401426	\$444.00	Mult. Co. General Fund
02-402460	\$.26	Mult. Co. General Fund
02-402610	\$9.37	Mult. Co. General Fund
02-402715	\$.80	Mult. Co. General Fund
02-402721	\$15.57	Mult. Co. General Fund
02-402739	\$300.00	Mult. Co. General Fund
02-403530	\$140.00	Mult. Co. General Fund

MULTNOMAH COUNTY
DEPARTMENT OF PUBLIC SAFETY
FOUND/UNCLAIMED PROPERTY FOR DISPOSAL
LIST 06-1

FILE #	PROPERTY DESCRIPTION	DISPOSITION
02-404248	\$52.00	Mult. Co. General Fund
02-404270	\$110.00	Mult. Co. General Fund
02-404542	\$15.00	Mult. Co. General Fund
02-404924	\$529.00	Mult. Co. General Fund
02-405208	\$878.00	Mult. Co. General Fund
02-405248	\$50.00	Mult. Co. General Fund
02-405501	\$501.00	Mult. Co. General Fund
02-405541	\$14.00	Mult. Co. General Fund
02-406035	\$3.00	Mult. Co. General Fund
02-406965	\$66.00	Mult. Co. General Fund
02-407437	\$2,292.00	Mult. Co. General Fund
02-407700	\$3,400.00	Mult. Co. General Fund
02-407780	\$322.00	Mult. Co. General Fund
02-407908	\$1,546.00	Mult. Co. General Fund
02-408232	\$27.00	Mult. Co. General Fund
03-400161	\$197.63	Mult. Co. General Fund
03-400439	\$463.00	Mult. Co. General Fund
03-400504	\$683.20	Mult. Co. General Fund
03-400513	\$150.00	Mult. Co. General Fund
03-400540	\$573.00	Mult. Co. General Fund

MULTNOMAH COUNTY
DEPARTMENT OF PUBLIC SAFETY
FOUND/UNCLAIMED PROPERTY FOR DISPOSAL
LIST 06-1

FILE #	PROPERTY DESCRIPTION	DISPOSITION
03-400876	\$1,219.00	Mult. Co. General Fund
03-401452	\$264.00	Mult. Co. General Fund
03-401568	\$10.80	Mult. Co. General Fund
03-401597	\$380.00	Mult. Co. General Fund
03-401600	\$56.66	Mult. Co. General Fund
03-401752	\$484.00	Mult. Co. General Fund
03-401846	\$214.00	Mult. Co. General Fund
03-401857	\$541.00	Mult. Co. General Fund
03-401986	\$291.00	Mult. Co. General Fund
03-402033	\$66.91	Mult. Co. General Fund
03-402331	\$20.00	Mult. Co. General Fund
03-402349	\$1,221.00	Mult. Co. General Fund
03-402650	\$555.00	Mult. Co. General Fund
03-402772	\$234.00	Mult. Co. General Fund
03-403031	\$30.00	Mult. Co. General Fund
03-403037	\$30.00	Mult. Co. General Fund
03-403868	\$141.00	Mult. Co. General Fund
03-403891	\$570.00	Mult. Co. General Fund
03-403917	\$935.00	Mult. Co. General Fund
03-404107	\$280.00	Mult. Co. General Fund

MULTNOMAH COUNTY
DEPARTMENT OF PUBLIC SAFETY
FOUND/UNCLAIMED PROPERTY FOR DISPOSAL
LIST 06-1

FILE #	PROPERTY DESCRIPTION	DISPOSITION
03-404213	\$480.00	Mult. Co. General Fund
03-404337	\$558.00	Mult. Co. General Fund
03-404826	\$80.00	Mult. Co. General Fund
03-404959	\$1.30	Mult. Co. General Fund
03-405056	\$81.48	Mult. Co. General Fund
03-405326	\$60.00	Mult. Co. General Fund
03-405327	\$960.00	Mult. Co. General Fund
03-405329	\$580.00	Mult. Co. General Fund
03-405530	\$93.00	Mult. Co. General Fund
03-405755	\$29.00	Mult. Co. General Fund
03-406468	\$163.00	Mult. Co. General Fund
04-400436	\$2,305.00	Mult. Co. General Fund
04-400494	\$340.00	Mult. Co. General Fund
04-400917	\$924.00	Mult. Co. General Fund
04-402029	\$217.00	Mult. Co. General Fund
04-404147	\$1.65	Mult. Co. General Fund
04-404188	\$1.23	Mult. Co. General Fund
04-406684	\$20.00	Mult. Co. General Fund
04-407989	\$1.31	Mult. Co. General Fund
05-400907	\$1.01	Mult. Co. General Fund

MULTNOMAH COUNTY
DEPARTMENT OF PUBLIC SAFETY
FOUND/UNCLAIMED PROPERTY FOR DISPOSAL
LIST 06-1

FILE #	PROPERTY DESCRIPTION	DISPOSITION
05-401413	\$10.46	Mult. Co. General Fund
05-401947	\$2.26	Mult. Co. General Fund
05-402019	\$32.38	Mult. Co. General Fund
05-402099	\$200.00	Mult. Co. General Fund
05-402889	\$20.00	Mult. Co. General Fund
05-403951	\$5.00	Mult. Co. General Fund
05-404599	\$102.00	Mult. Co. General Fund
05-406527	\$3.00	Mult. Co. General Fund
06-400023	\$41.77	Mult. Co. General Fund
06-400589	\$136.18	Mult. Co. General Fund
06-400741	\$40.00	Mult. Co. General Fund
06-402368	\$3.00	Mult. Co. General Fund
06-402567	\$60.00	Mult. Co. General Fund
06-403538	\$102.05	Mult. Co. General Fund
06-403688	\$13.26	Mult. Co. General Fund
06-404300	\$91.00	Mult. Co. General Fund
06-404567	\$12.00	Mult. Co. General Fund
06-405360	\$81.16	Mult. Co. General Fund
		Mult. Co. General Fund
	TOTAL \$36,545.56	Mult. Co. General Fund



MULTNOMAH COUNTY AGENDA PLACEMENT REQUEST

APPROVED : MULTNOMAH COUNTY
BOARD OF COMMISSIONERS
AGENDA # 6-3 DATE 03-22-07
DEBORAH L. BOGSTAD, BOARD CLERK

Board Clerk Use Only

Meeting Date: 03/22/07
Agenda Item #: C-3
Est. Start Time: 9:30 AM
Date Submitted: 03/08/07

BUDGET MODIFICATION: MCSO - 06

Agenda Title: Budget Modification MCSO-06 Transferring \$36,545.56 Found/Unclaimed Property Including Money Recovered During Drug Deals and Court Designated Forfeitures to the Multnomah County General Fund

Note: If Ordinance, Resolution, Order or Proclamation, provide exact title. For all other submissions, provide a clearly written title.

Date Requested:	<u>March 22, 2007</u>	Time Requested:	<u>1 min</u>
Department:	<u>Sheriff's Office</u>	Division:	<u>Business Services</u>
Contact(s):	<u>Larry Aab/Chris Payne</u>		
Phone:	<u>503-251-2501</u>	Ext.	<u>I/O Address: 331/118</u>
Presenter(s):	<u>Chris Payne, Larry Aab and/or Wanda Yantis</u>		

General Information

1. What action are you requesting from the Board?

Approval of Budget Modification MCSO-06 Transferring \$36,545.56 Found/Unclaimed Property Including Money Recovered During Drug Deals and Court Designated Forfeitures to the Multnomah County General Fund.

2. Please provide sufficient background information for the Board and the public to understand this issue. Please note which Program Offer this action affects and how it impacts the results.

This property has been in the Sheriff's possession for over 30 days. Property includes money recovered during drug deals and court designated forfeitures.

3. Explain the fiscal impact (current year and ongoing).

This action will increase the General Fund unappropriated balance by \$36,545.56

4. Explain any legal and/or policy issues involved.

None other than those noted above

5. Explain any citizen and/or other government participation that has or will take place.

The State court system was involved in the court designated forfeitures.

ATTACHMENT A

Budget Modification

If the request is a **Budget Modification**, please answer all of the following in detail:

- What revenue is being changed and why?

This action will increase the General Fund unappropriated balance by \$36,545.56

- What budgets are increased/decreased?

This action will increase the General Fund unappropriated balance by \$36,545.56

- What do the changes accomplish?

This will increase the County General Fund unappropriated balance by \$36,545.56

- Do any personnel actions result from this budget modification? Explain.

No.

- How will the county indirect, central finance and human resources and departmental overhead costs be covered?

NA

- Is the revenue one-time-only in nature? Will the function be ongoing? What plans are in place to identify a sufficient ongoing funding stream?

One time only.

- If a grant, what period does the grant cover?

NA

- If a grant, when the grant expires, what are funding plans?

NA

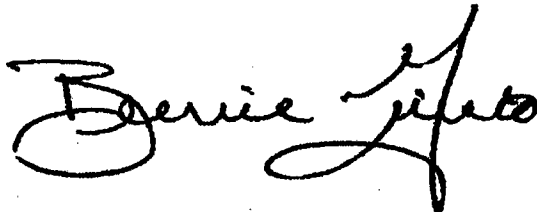
NOTE: If a Budget Modification or a Contingency Request attach a Budget Modification Expense & Revenues Worksheet and/or a Budget Modification Personnel Worksheet.

ATTACHMENT B

BUDGET MODIFICATION: MCSO - 06

Required Signatures

**Department/
Agency Director:**



Date: 03/08/07

Budget Analyst:



Date: 03/15/07

Department HR:

Date:

Countywide HR:

Date:



MULTNOMAH COUNTY SHERIFF'S OFFICE

12240 NE GLISAN ST., • PORTLAND, OR 97230

Exemplary service for a safe, livable community

BERNIE GIUSTO
SHERIFF

503 255-3600 PHONE
503 251-2484 TTY
www.sheriff-mcso.org

MEMORANDUM

TO: DEBORAH BOGSTAD
Clerk of the Board

FROM: BERNIE GIUSTO
Sheriff

DATE: March 8, 2007

SUBJECT: FOUND/UNCLAIMED PROPERTY – LIST 06-1

Attached is a listing of found/unclaimed or unidentified property. This property has been in the Sheriff's possession for over 30 days. All attempts to establish the rightful owner(s) of the listed property have proven negative.

To comply with Multnomah County Code 15.650 I am requesting that this listing of property be placed on the Board of County Commissioners' agenda for approval of deposit in the county treasury to the credit of the county general fund.

Attachment

MULTNOMAH COUNTY
DEPARTMENT OF PUBLIC SAFETY
FOUND/UNCLAIMED PROPERTY FOR DISPOSAL
LIST 06-1

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MULTNOMAH COUNTY
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03-405056	\$81.48	Mult. Co. General Fund
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03-405327	\$960.00	Mult. Co. General Fund
03-405329	\$580.00	Mult. Co. General Fund
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04-404188	\$1.23	Mult. Co. General Fund
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MULTNOMAH COUNTY
DEPARTMENT OF PUBLIC SAFETY
FOUND/UNCLAIMED PROPERTY FOR DISPOSAL
LIST 06-1

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05-402889	\$20.00	Mult. Co. General Fund
05-403951	\$5.00	Mult. Co. General Fund
05-404599	\$102.00	Mult. Co. General Fund
05-406527	\$3.00	Mult. Co. General Fund
06-400023	\$41.77	Mult. Co. General Fund
06-400589	\$136.18	Mult. Co. General Fund
06-400741	\$40.00	Mult. Co. General Fund
06-402368	\$3.00	Mult. Co. General Fund
06-402567	\$60.00	Mult. Co. General Fund
06-403538	\$102.05	Mult. Co. General Fund
06-403688	\$13.26	Mult. Co. General Fund
06-404300	\$91.00	Mult. Co. General Fund
06-404567	\$12.00	Mult. Co. General Fund
06-405360	\$81.16	Mult. Co. General Fund
		Mult. Co. General Fund
	TOTAL \$36,545.56	Mult. Co. General Fund

Budget Modification ID: **MCSO-06****EXPENDITURES & REVENUES**

Please show an increase in revenue as a negative value and a decrease as a positive value for consistency with MERLIN.

Budget/Fiscal Year: 2007

Line No.	Fund Center	Fund Code	Func. Area	Accounting Unit			Cost Element	Current Amount	Revised Amount	Change Increase/ (Decrease)	Subtotal	Description
				Internal Order	Cost Center	WBS Element						
1	19	1000			9500001000		50280		(36,546)	(36,546)		Contingency
2	19	1000			9500001000		60470		36,546	36,546		Contingency
3									0			
4									0			
5									0			
6									0			
7									0			
8									0			
9									0			
10									0			
11									0			
12									0			
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24									0			
25									0			
26									0			
27									0			
28									0			
29									0			
										0	0	Total - Page 1
										0	0	GRAND TOTAL



MULTNOMAH COUNTY

AGENDA PLACEMENT REQUEST short form

Board Clerk Use Only

Meeting Date: 03/22/07
Agenda Item #: C-4
Est. Start Time: 9:30 AM
Date Submitted: 03/07/07

Agenda Title: RESOLUTION Authorizing the Private Sale of a Tax Foreclosed Property to DANIEL Y. ANDRE'

Note: If Ordinance, Resolution, Order or Proclamation, provide exact title. For all other submissions, provide a clearly written title.

Date Requested: March 22, 2007 Time Requested: Consent Item
Department: Community Services Division: Tax Title
Contact(s): Gary Thomas
Phone: 503-988-3590 Ext. 22591 I/O Address: 503/4/TT
Presenter(s): Gary Thomas

General Information

1. What action are you requesting from the Board?

The Tax Title Section is requesting the Board to approve the private sale of a tax foreclosed property to DANIEL Y. ANDRE'.

2. Please provide sufficient background information for the Board and the public to understand this issue. Please note which Program Offer this action affects and how it impacts the results.

The subject property is a narrow strip that came into county ownership through the foreclosure of delinquent tax liens on October 11, 1996. The strip is more or less 0.49' or close to 6 inches wide at the north end and narrows down approximately 83' later to a negligible dimension at the south end. It contains approximately 45 square feet. The parcel is located between 2903/2909 and 2911 SE Pine.

The subject strip appears to have been created in 1958 when it was determined that neither of the adjacent properties included the legal description for the subject strip in the legal descriptions on their deeds. The strip came into county ownership and sold at a public auction to one of the adjacent owners in 1982. Taxes were paid on the strip for a few years until payment stopped and it again came into county ownership through foreclosure. In 1991, the property at 2903/2909 SE Pine was sold but the legal for the subject strip was not included on the deed. We propose to sell the strip to the current owner of the 2903/2909 SE Pine property.

The attached Exhibit A, a plat map shows the location of the property. Exhibit B, an aerial photo,

shows the parcel in relation to the adjacent properties.

Although no written confirmation from the City of Portland was obtained, the Tax Title Division is confident that the shape and size of the property make it unsuitable for the construction or placement of a dwelling thereon under current zoning ordinances and building codes, as provided under ORS 275.225.

This action affects our Vibrant Communities Program Offer by placing a tax foreclosed property back onto the tax roll.

3. Explain the fiscal impact (current year and ongoing).

The private sale will allow for the recovery of a portion of the delinquent taxes, fees, and expenses. The sale will also reinstate the property on the tax roll (see Exhibit C).

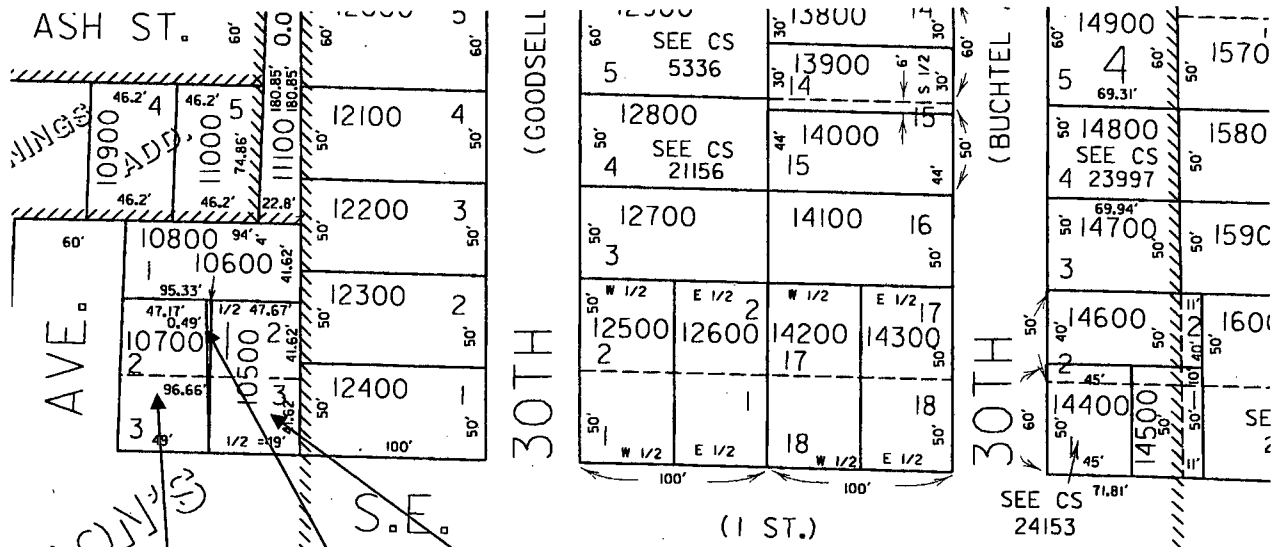
4. Explain any legal and/or policy issues involved.

No legal issues are expected. The parcel will be sold "As Is" without guarantee of clear title.

5. Explain any citizen and/or other government participation that has or will take place.

No citizen or government participation is anticipated.

EXHIBIT A



2903/2909 SE Pine Subject strip 2911 SE Pine

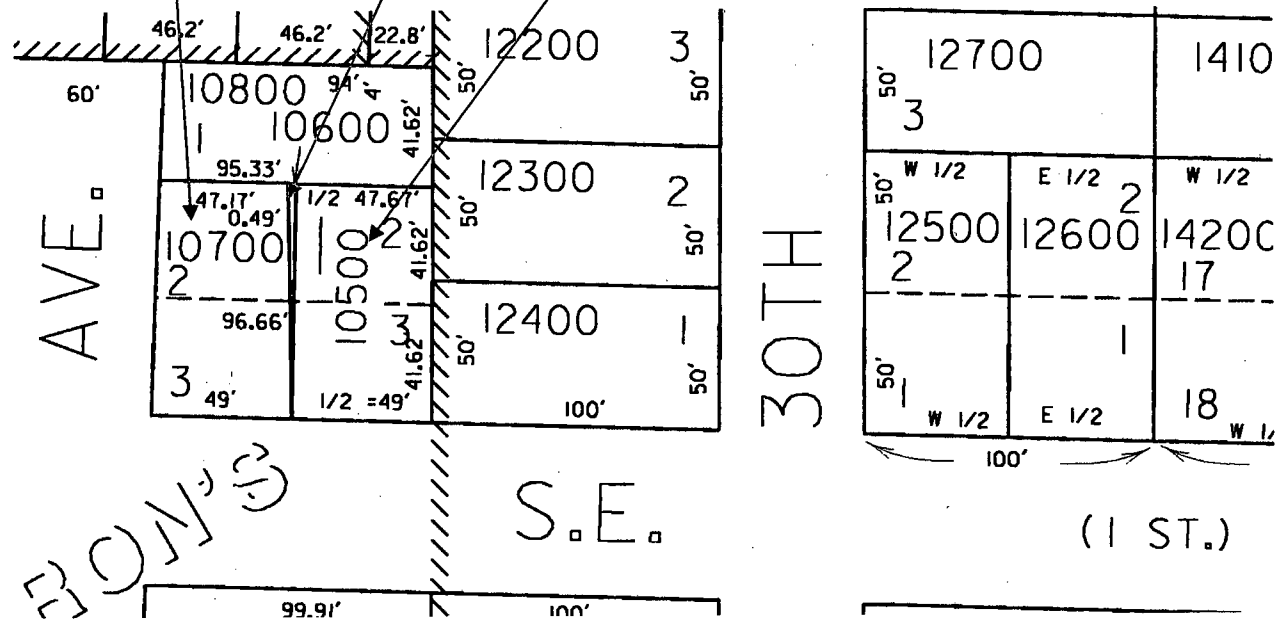


EXHIBIT B



2903-2909 SE Pine St

Subject strip

EXHIBIT C
PROPOSED PROPERTY LISTED FOR PRIVATE SALE

LEGAL DESCRIPTION:

A tract of land lying in the S.W. ¼ of Sec. 36 1N 1E, being a portion of Lots 2 and 3, Block 1, Camerons Add. and being described as follows:

The West one-half of Lots 2 & 3, EXCEPT the part described as follows: Beginning at the Northwest corner of said Lot 2; thence Easterly 47.165 feet to a point; thence Southerly to a point in the South line of said Lot 3, 49 feet distant from the Southwest corner thereof; thence Westerly along the Southerly line of said Lot 3 to the Southwest corner thereof; thence Northerly along the Westerly line of said Lots to the point of beginning.

ADJACENT PROPERTY ADDRESS:	2903/2909 SE Pine
TAX ACCOUNT NUMBER:	R126038
GREENSPACE DESIGNATION:	No designation
SIZE OF PARCEL:	Approximately 45 square feet
ASSESSED VALUE:	\$100

ITEMIZED EXPENSES FOR TOTAL PRICE OF PRIVATE SALE

BACK TAXES & INTEREST:	\$94.88
TAX TITLE MAINTENANCE COST & EXPENSES:	\$38.00
RECORDING FEE:	\$26.00
SUB-TOTAL	\$158.88
MINIMUM PRICE REQUEST OF PRIVATE SALE	\$26.00

Required Signature

**Department/
Agency Director:**



Date: 03//07/07

BEFORE THE BOARD OF COUNTY COMMISSIONERS
FOR MULTNOMAH COUNTY, OREGON

RESOLUTION NO. _____

Authorizing the Private Sale of a Tax Foreclosed Property to DANIEL Y. ANDRE'

The Multnomah County Board of Commissioners Finds:

- a. Multnomah County acquired the real property described in Exhibit A through the foreclosure of liens for delinquent real property taxes.
- b. The property has an assessed value of \$100.
- c. Although no written confirmation from the City of Portland was obtained, the Tax Title Division is confident that the shape and size of the property, approximately 45 square feet make it unsuitable for the construction or placement of a dwelling thereon under current zoning ordinances and building codes, as provided under ORS 275.225.
- d. DANIEL Y. ANDRE' has agreed to pay \$26, an amount the Board finds to be a reasonable price for the property in conformity with ORS 275.225.

The Multnomah County Board of Commissioners Resolves:

1. Upon Tax Title's receipt of the payment of \$26 the Chair on behalf of Multnomah County is authorized to execute a deed, number D072129 conveying to DANIEL Y. ANDRE' the real property described in the attached Exhibit A.

ADOPTED this 22nd day of March, 2007.

BOARD OF COUNTY COMMISSIONERS
FOR MULTNOMAH COUNTY, OREGON

Ted Wheeler, Chair

REVIEWED:

AGNES SOWLE, COUNTY ATTORNEY
FOR MULTNOMAH COUNTY, OREGON

By _____
Matthew O. Ryan, Assistant County Attorney

SUBMITTED BY:

M. Cecilia Johnson, Director, Dept. of Community Services

EXHIBIT A

A tract of land lying in the S.W. $\frac{1}{4}$ of Sec. 36 1N 1E, being a portion of Lots 2 and 3, Block 1, Camerons Add. and being described as follows:

The West one-half of Lots 2 & 3, EXCEPT the part described as follow:

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Until a change is requested, all tax statements shall be sent to the following address:
DANIEL Y. ANDRE'
%PHILIPPE ANDRE'
333 NW 9TH #1002
PORTLAND, OR 97209

After recording, return to:
MULTNOMAH COUNTY
TAX TITLE DIVISION
503/4

Deed D072129

MULTNOMAH COUNTY, a political subdivision of the State of Oregon, Grantor, conveys to DANIEL Y. ANDRE', Grantee, the real property described in the attached Exhibit A.

The true consideration paid for this transfer is \$26.

BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON TRANSFERRING FEE TITLE SHOULD INQUIRE ABOUT THE PERSON'S RIGHTS, IF ANY, UNDER ORS 197.352. THIS INSTRUMENT DOES NOT ALLOW USE OF THE PROPERTY DESCRIBED IN THIS INSTRUMENT IN VIOLATION OF APPLICABLE LAND USE LAWS AND REGULATIONS. BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON ACQUIRING FEE TITLE TO THE PROPERTY SHOULD CHECK WITH THE APPROPRIATE CITY OR COUNTY PLANNING DEPARTMENT TO VERIFY APPROVED USES TO DETERMINE ANY LIMITS ON LAWSUITS AGAINST FARMING OR FOREST PRACTICES AS DEFINED IN ORS 30.930 AND TO INQUIRE ABOUT THE RIGHTS OF NEIGHBORING PROPERTY OWNERS, IF ANY, UNDER ORS 197.352

IN WITNESS WHEREOF, MULTNOMAH COUNTY has caused these presents to be executed by the Chair of the Multnomah County Board of Commissioners the 22nd day of March 2007, by authority of a Resolution of the Board of County Commissioners heretofore entered of record.

BOARD OF COUNTY COMMISSIONERS
FOR MULTNOMAH COUNTY, OREGON

Ted Wheeler, Chair

REVIEWED:

AGNES SOWLE, COUNTY ATTORNEY
FOR MULTNOMAH COUNTY, OREGON

By _____
Matthew O. Ryan, Assistant County Attorney

STATE OF OREGON)
) ss
COUNTY OF MULTNOMAH)

This Deed was acknowledged before me this 22nd day of March 2007, by Ted Wheeler, to me personally known, as Chair of the Multnomah County Board of Commissioners, on behalf of the County by authority of the Multnomah County Board of Commissioners.

Deborah Lynn Bogstad
Notary Public for Oregon
My Commission expires: 6/27/09

EXHIBIT A

(Deed D072129 & Tax Account R126038)

A tract of land lying in the S.W. $\frac{1}{4}$ of Sec. 36 1N 1E, being a portion of Lots 2 and 3, Block 1, Camerons Add. and being described as follows:

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BEFORE THE BOARD OF COUNTY COMMISSIONERS
FOR MULTNOMAH COUNTY, OREGON

RESOLUTION NO. 07-044

Authorizing the Private Sale of a Tax Foreclosed Property to DANIEL Y. ANDRE'

The Multnomah County Board of Commissioners Finds:

- a. Multnomah County acquired the real property described in Exhibit A through the foreclosure of liens for delinquent real property taxes.
- b. The property has an assessed value of \$100.
- c. Although no written confirmation from the City of Portland was obtained, the Tax Title Division is confident that the shape and size of the property, approximately 45 square feet make it unsuitable for the construction or placement of a dwelling thereon under current zoning ordinances and building codes, as provided under ORS 275.225.
- d. DANIEL Y. ANDRE' has agreed to pay \$26, an amount the Board finds to be a reasonable price for the property in conformity with ORS 275.225.

The Multnomah County Board of Commissioners Resolves:

1. Upon Tax Title's receipt of the payment of \$26 the Chair on behalf of Multnomah County is authorized to execute a deed, number D072129 conveying to DANIEL Y. ANDRE' the real property described in the attached Exhibit A.

ADOPTED this 22nd day of March, 2007.



BOARD OF COUNTY COMMISSIONERS
FOR MULTNOMAH COUNTY, OREGON


Ted Wheeler, Chair

REVIEWED:

AGNES SOWLE, COUNTY ATTORNEY
FOR MULTNOMAH COUNTY, OREGON

By 
Matthew O. Ryan, Assistant County Attorney

SUBMITTED BY:

M. Cecilia Johnson, Director, Dept. of Community Services
Page 1 of 4 - Resolution 07-044 and Deed Authorizing Private Sale

EXHIBIT A

A tract of land lying in the S.W. $\frac{1}{4}$ of Sec. 36 1N 1E, being a portion of Lots 2 and 3, Block 1, Camerons Add. and being described as follows:

The West one-half of Lots 2 & 3, EXCEPT the part described as follow:
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Until a change is requested, all tax statements shall be sent to the following address:

DANIEL Y. ANDRE'
%PHILIPPE ANDRE'
333 NW 9TH #1002
PORTLAND, OR 97209

After recording, return to:
MULTNOMAH COUNTY
TAX TITLE DIVISION
503/4

Deed D072129

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The true consideration paid for this transfer is \$26.

BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON TRANSFERRING FEE TITLE SHOULD INQUIRE ABOUT THE PERSON'S RIGHTS, IF ANY, UNDER ORS 197.352. THIS INSTRUMENT DOES NOT ALLOW USE OF THE PROPERTY DESCRIBED IN THIS INSTRUMENT IN VIOLATION OF APPLICABLE LAND USE LAWS AND REGULATIONS. BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON ACQUIRING FEE TITLE TO THE PROPERTY SHOULD CHECK WITH THE APPROPRIATE CITY OR COUNTY PLANNING DEPARTMENT TO VERIFY APPROVED USES TO DETERMINE ANY LIMITS ON LAWSUITS AGAINST FARMING OR FOREST PRACTICES AS DEFINED IN ORS 30.930 AND TO INQUIRE ABOUT THE RIGHTS OF NEIGHBORING PROPERTY OWNERS, IF ANY, UNDER ORS 197.352

IN WITNESS WHEREOF, MULTNOMAH COUNTY has caused these presents to be executed by the Chair of the Multnomah County Board of Commissioners the 22nd day of March 2007, by authority of a Resolution of the Board of County Commissioners heretofore entered of record.

BOARD OF COUNTY COMMISSIONERS
FOR MULTNOMAH COUNTY, OREGON

Ted Wheeler, Chair

REVIEWED:

AGNES SOWLE, COUNTY ATTORNEY
FOR MULTNOMAH COUNTY, OREGON

By _____
Matthew O. Ryan, Assistant County Attorney

STATE OF OREGON)
) ss
COUNTY OF MULTNOMAH)

This Deed was acknowledged before me this 22nd day of March 2007, by Ted Wheeler, to me personally known, as Chair of the Multnomah County Board of Commissioners, on behalf of the County by authority of the Multnomah County Board of Commissioners.

Deborah Lynn Bogstad
Notary Public for Oregon
My Commission expires: 6/27/09

EXHIBIT A

(Deed D072129 & Tax Account R126038)

A tract of land lying in the S.W. $\frac{1}{4}$ of Sec. 36 1N 1E, being a portion of Lots 2 and 3, Block 1, Camerons Add. and being described as follows:

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IN WITNESS WHEREOF, MULTNOMAH COUNTY has caused these presents to be executed by the Chair of the Multnomah County Board of Commissioners the 22nd day of March 2007, by authority of a Resolution of the Board of County Commissioners heretofore entered of record.



BOARD OF COUNTY COMMISSIONERS
FOR MULTNOMAH COUNTY, OREGON.

TED WHEELER
Ted Wheeler, Chair

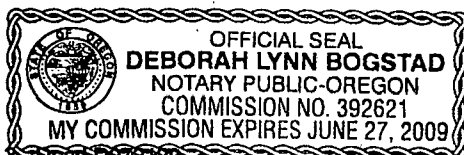
REVIEWED:

AGNES SOWLE, COUNTY ATTORNEY
FOR MULTNOMAH COUNTY, OREGON

By Matthew O. Ryan
Matthew O. Ryan, Assistant County Attorney

STATE OF OREGON)
) ss
COUNTY OF MULTNOMAH)

This Deed was acknowledged before me this 22nd day of March 2007, by Ted Wheeler, to me personally known, as Chair of the Multnomah County Board of Commissioners, on behalf of the County by authority of the Multnomah County Board of Commissioners.



Deborah Lynn Bogstad
Deborah Lynn Bogstad
Notary Public for Oregon
My Commission expires: 6/27/09

EXHIBIT A

(Deed D072129 & Tax Account R126038)

A tract of land lying in the S.W. $\frac{1}{4}$ of Sec. 36 1N 1E, being a portion of Lots 2 and 3, Block 1, Camerons Add. and being described as follows:

**The West one-half of Lots 2 & 3, EXCEPT the part described as follow:
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Southwest corner thereof; thence Westerly along the Southerly line of said Lot 3 to the
Southwest corner thereof; thence Northerly along the Westerly line of said Lots to the
point of beginning.**



MULTNOMAH COUNTY AGENDA PLACEMENT REQUEST (long form)

APPROVED : MULTNOMAH COUNTY
BOARD OF COMMISSIONERS
AGENDA # C-5 DATE 03.22.07
DEBORAH L. BOGSTAD, BOARD CLERK

Board Clerk Use Only

Meeting Date: 03/22/07
Agenda Item #: C-5
Est. Start Time: 9:30 AM
Date Submitted: 03/08/07

BUDGET MODIFICATION: DCM - 09

Agenda Title: **Budget Modification DCM-09 Reclassifying Positions in Treasury and Assessment and Taxation, as Determined by the Class/Comp Unit of Central Human Resources**

Note: If Ordinance, Resolution, Order or Proclamation, provide exact title. For all other submissions, provide a clearly written title.

Requested Meeting Date:	<u>March 22, 2007</u>	Amount of Time Needed:	<u>5 minutes</u>
Department:	<u>County Management</u>	Division:	<u>Director's Office</u>
Contact(s):	<u>Bob Thomas</u>		
Phone:	<u>(503) 988-4283</u>	Ext.	<u>84283</u>
	I/O Address:		<u>503 / 531</u>
Presenter(s):	<u>Bob Thomas</u>		

General Information

1. What action are you requesting from the Board?

The department is requesting the Board approve a budget modification relating to the reclassification of positions in Treasury and Assessment & Taxation that were approved by the Central Class/Comp Unit.

2. Please provide sufficient background information for the Board and the public to understand this issue. Please note which Program Offer this action affects and how it impacts the results.

The Department of County Management is asking the Board to approve the reclassification and position request for the following two positions:

Position Title (Old)	Position Title (New)	Position Number	FTE
<u>County Treasury</u>			
Finance Specialist 1	Finance Specialist 2	701674	No FTE Change

Assessment & Taxation

Vacant Finance Specialist 2 Finance Specialist Sr

707628 No FTE Change

In Treasury, Central Class Comp has approved the reclassification of a Finance Specialist 1 position to the Finance Specialist 2 level. This position performs complex critical functions such as determining the daily funding requirements based on early morning bank reports and other on-line cash reports. Additionally, this position performs numerous daily bank downloads which are reformatted and uploaded into SAP. These are crucial functions that occur more rapidly than in recent years as a result of electronic banking. Based on duties and responsibilities, Class Comp has assigned this position to the Finance Specialist 2 level.

The A&T reclassification request converts a vacant Finance Specialist 2 position to a Finance Specialist Senior level to serve a lead function in Tax Collection. Changes in systems now require a different approach to maintaining adequate internal financial controls in the Tax Collection section of A&T. Business requirements have shifted as a result of statutory changes that have added complexities and more duties at higher levels, requiring a position serving a lead role in the work unit. Central Class Comp recommends this change in level based on the duties and responsibilities assigned.

3. Explain the fiscal impact (current year and ongoing).

Budget modification detail is attached. The reclassification requests are being accomplished within current resources. Salary and fringe costs will increase by \$6,283 during this fiscal year. Materials and Services are being reduced by this same amount to cover the increase. Expected future cost of living and merit increases are likely for these positions in future years.

4. Explain any legal and/or policy issues involved.

The reclassifications for which approval is sought in this request, have been reviewed by the Classification/Compensation Unit and the positions have been found to be wrongly classed. By contract and under our personnel rules, we are required to compensate employees appropriately based on these findings.

Local 88 represented employees have a contractual right to appeal and arbitrate the outcome of a reclassification request, which would include Board action to disapprove the request. It is the policy of Multnomah County to make all employment decisions without regard to race, religion, color, national origin, sex, age marital status, disability, political affiliations, sexual orientation, or any other nonmerit factor.

5. Explain any citizen and/or other government participation that has or will take place.

NA

ATTACHMENT A

Budget Modification

If the request is a **Budget Modification**, please answer all of the following in detail:

- **What revenue is being changed and why?**

Revenue to the Risk Management Fund is increased by \$296.

- **What budgets are increased/decreased?**

The Risk Management Fund budget is increased by \$296.

- **What do the changes accomplish?**

This budget modification implements position changes as described in this document.

- **Do any personnel actions result from this budget modification? Explain.**

Reclassification of two existing positions.

- **How will the county indirect, central finance and human resources and departmental overhead costs be covered?**

NA

- **Is the revenue one-time-only in nature? Will the function be ongoing? What plans are in place to identify a sufficient ongoing funding stream?**

Any future changes would be ongoing.

- **If a grant, what period does the grant cover?**

NA

- **If a grant, when the grant expires, what are funding plans?**

NA

NOTE: If a Budget Modification or a Contingency Request attach a Budget Modification Expense & Revenues Worksheet and/or a Budget Modification Personnel Worksheet.

ATTACHMENT B

BUDGET MODIFICATION: DCM - 09

Required Signatures

**Elected Official or
Department/
Agency Director:**

Carol M. Ford

Date: 03/07/07

Budget Analyst:

Debra

Date: 03/07/07

Department HR:

Carl R. Quigley

Date: 03/07/07

Countywide HR:

Sandra J. Busby

Date: 03/07/07

Budget Modification or Amendment ID:

DCM-09

EXPENDITURES & REVENUES

Budget/Fiscal Year:07

Please show an increase in revenue as a negative value and a decrease as a positive value for consistency with MERLIN.

Line No.	Fund Center	Fund Code	Func. Area	Accounting Unit		Cost Element	Current Amount	Revised Amount	Change Increase/ (Decrease)	Subtotal	Description
				Internal Order	Cost Center						
1	72-30	1000	0020		706204	60000	1,005,648	1,005,923	275		Increase Base Pay
2	72-30	1000	0020		706204	60130	319,897	319,985	88		Increase Salary Related
3	72-30	1000	0020		706204	60140	305,548	305,566	18		Increase Insurance Benefits
4	72-30	1000	0020		706204	60240	12,000	11,619	(381)	0	Decrease Supplies
5	72-10	1000	0020		704400	60000	152,729	156,987	4,258		Increase Base Pay
6	72-10	1000	0020		704400	60130	49,011	50,377	1,366		Increase Salary Related
7	72-10	1000	0020		704400	60140	34,912	35,190	278		Increase Insurance Benefits
8	72-10	1000	0020		704400	60170	100,000	94,098	(5,902)	0	Decrease Professional Services
9								0			
10								0			
11								0			
12								0			
13								0			
14								0			
15	72-10	3500	0020		705210	50316		(296)	(296)		Increase Insurance Revenue
16	72-10	3500	0020		705210	60330		296	296	0	Increase Offsetting expenditure
17								0			
18								0			
19								0			
20								0			
21								0			
22								0			
23								0			
24								0			
25								0			
26								0			
27								0			
28								0			
29								0			
30								0			
31								0			
32								0			
									0	0	Total - Page 1

ANNUALIZED PERSONNEL CHANGEChange on a full year basis even though this action affects only a part of the fiscal year (FY).

						ANNUALIZED			
Fund	Job #	HR Org Unit	Position Title	Position Number	FTE	BASE PAY	FRINGE	INSUR	TOTAL
1000	6030	61798	Finance Specialist 2	707628	(1.00)	(51,500)	(16,526)	(13,342)	(81,368)
1000	6032	61798	Finance Specialist Senior	707628	1.00	52,332	16,793	13,396	82,521
1000	6029	61271	Finance Specialist 1	701674	(1.00)	(38,235)	(12,270)	(12,479)	(62,984)
1000	6030	61271	Finance Specialist 2	701674	1.00	42,777	13,727	12,775	69,279
									0
									0
									0
									0
									0
									0
									0
									0
									0
									0
									0
									0
									0
									0
TOTAL ANNUALIZED CHANGES					0.00	5,374	1,724	350	7,448

CURRENT YEAR PERSONNEL DOLLAR CHANGECalculate costs/savings that will take place in this FY; these should explain the actual dollar amounts being changed by this Bud Mod.

						CURRENT YEAR			
Fund	Job #	HR Org Unit	Position Title	Position Number	FTE	BASE PAY	FRINGE	INSUR	TOTAL
1000	6030	61798	Finance Specialist 2	707628	(0.33)	(16,995)	(5,454)	(4,403)	(26,852)
1000	6032	61798	Finance Specialist Senior	707628	0.33	17,270	5,542	4,421	27,233
1000	6029	61271	Finance Specialist 1	701674	(0.94)	(35,845)	(11,503)	(11,699)	(59,048)
1000	6030	61271	Finance Specialist 2	701674	0.94	40,103	12,869	11,977	64,949
									0
									0
									0
									0
									0
									0
									0
									0
									0
									0
									0
									0
									0
TOTAL CURRENT FY CHANGES					0.00	4,533	1,454	296	6,283



MULTNOMAH COUNTY

AGENDA PLACEMENT REQUEST (long form)

APPROVED : MULTNOMAH COUNTY
BOARD OF COMMISSIONERS
AGENDA # C-6 DATE 03-22-07
DEBORAH L. BOGSTAD, BOARD CLERK

Board Clerk Use Only

Meeting Date: 03/22/07
Agenda Item #: C-6
Est. Start Time: 9:30 AM
Date Submitted: 03/01/07

BUDGET MODIFICATION: DCHS - 18

Agenda Title: Budget Modification DCHS-18 Reclassifying an Office Assistant 2 to Office Assistant Senior in the Mental Health and Addiction Services Division, DUII Evaluation Program, as Determined by the Class/Comp Unit of Central Human Resources

Note: If Ordinance, Resolution, Order or Proclamation, provide exact title. For all other submissions, provide a clearly written title.

Requested Meeting Date:	<u>March 22, 2007</u>	Amount of Time Needed:	<u>2 mins</u>
Department:	<u>Dept of County Human Services</u>	Division:	<u>Mental Health</u>
Contact(s):	<u>Chris Yager</u>		
Phone:	<u>503 988-3691</u>	Ext.	<u>26777</u>
Presenter(s):	<u>Karl Brimner/Joi Doi</u>		
I/O Address:	<u>167/620</u>		

General Information

1. What action are you requesting from the Board?

The Department of County Human Services recommends approval of budget modification DCHS-18 reclassifying a position in Mental Health & Addiction Services Division (MHASD), DUII Evaluation program, Program Offer #50061.

2. Please provide sufficient background information for the Board and the public to understand this issue. Please note which Program Offer this action affects and how it impacts the results.

This modification reflects a Class/Comp decision on a reclassification request from Division management. Class/Comp reviewed the submitted job duties and descriptions and agreed that an Office Assistant Senior was the best fit for the position. The purpose of this position and main job duties are as follows:

Perform as the office manager and coordinate the work of other Office assistants.
Act as the program's cashier, balancing the cash register daily.

Train new employees on program systems and office procedures, and schedule professional staff to meet with clients.

Serve as the administrative support to the Program Director.

Act as the program coordinator for the Hispanic Victim's Impact Panel which involves recruiting, training and supporting volunteer panel members.

3. Explain the fiscal impact (current year and ongoing).

For the current fiscal year, this reclassification in the MHASD, DUII Evaluation program is budget neutral as the pay scales overlap. The pay scale for an Office Assistant 2 is \$28,142 - \$34,594 and the pay scale for an Office Assistant Senior is \$32,594 - \$40,123. Personnel costs will increase over time, as the pay scale for the Office Assistant Senior position is higher than an Office Assistant 2.

4. Explain any legal and/or policy issues involved.

Local 88 represented employees have a contractual right to appeal and arbitrate the outcome of a reclassification request, which would include Board action to disapprove the request. It is the policy of Multnomah County to make all employment decisions without regard to race, religion, color, national origin, sex, age marital status, disability, political affiliations, sexual orientation, or any other non-merit factor.

5. Explain any citizen and/or other government participation that has or will take place.

N/A

ATTACHMENT A

Budget Modification

If the request is a **Budget Modification**, please answer all of the following in detail:

- What revenue is being changed and why?

N/A

- What budgets are increased/decreased?

N/A

- What do the changes accomplish?

Approval of a classification decision from Class/Comp initiated by Division Management:

- Do any personnel actions result from this budget modification? Explain.

Reclassification of an Office Assistant 2 to Office Assistant Senior in MHASD, DUII Evaluation program.

- How will the county indirect, central finance and human resources and departmental overhead costs be covered?

N/A

- Is the revenue one-time-only in nature? Will the function be ongoing? What plans are in place to identify a sufficient ongoing funding stream?

N/A

- If a grant, what period does the grant cover?

N/A

- If a grant, when the grant expires, what are funding plans?

N/A

NOTE: If a Budget Modification or a Contingency Request attach a Budget Modification Expense & Revenues Worksheet and/or a Budget Modification Personnel Worksheet.

ATTACHMENT B

BUDGET MODIFICATION: DCHS-18

Required Signatures

**Elected Official or
Department/
Agency Director:**

Joanne Filler

Date: 02/27/07

Budget Analyst:

Michael D. Gaspin

Date: 03/01/07

Department HR:

Joi E. Dot

Date: 02/28/07

Countywide HR:

Date:



PHONE (503) 988-5015
FAX (503) 988-3009
TDD (503) 988-5170

December 18, 2006

EFFECTIVE
MARCH 3/25/2006
outlined below

The reason the incumbent employee is not reclassified with the position:

- ☐ The change in duties, authority, and responsibility has not occurred gradually over a period of time
- ☐ Employee has not been performing the new duties for at least 6 months prior to the reclassification request
- ☐ Other: _____

If an employee is not reclassified with the position then the position must be filled using normal appointment procedures. Please consult with the Department Human Resource Unit to determine the appropriate process.

Reason for Classification Decision

- Incumbent performs as the office manager and coordinates the work of other Office Assistants
- Acts as the program's cashier, balancing the cash register daily
- Trains new employees on program systems and office procedures, and schedules professional staff to meet with clients
- Serves as the administrative support to the Program Director
- Is the program coordinator for the Hispanic Victims Impact Panel which involves recruiting, training and supporting volunteer panel members

Appeal Rights

The outcome of a reclassification request may be appealed under Article 18 of the Local 88 contract by filing a Step 3 grievance within fifteen (15) days of receipt of this notification letter.

Management's appeal rights

If you have any questions, please feel free to contact a member of the Class Comp team.

cc: Employee
HR Maintainer
Class Comp File Copy

#1

**MULTNOMAH COUNTY BOARD OF COMMISSIONERS
PUBLIC TESTIMONY SIGN-UP**

Please complete this form and return to the Board Clerk

This form is a public record

MEETING DATE: March 22, 2007

SUBJECT: Changes to Brenster Clinic

AGENDA NUMBER OR TOPIC: Public Comment

FOR: _____ AGAINST: _____ THE ABOVE AGENDA ITEM

NAME: Maria Castalum (MARIA CA STALUM)

ADDRESS: 5335 NE Cully Apt 301

CITY/STATE/ZIP: Portland Or 97218

PHONE: _____ DAYS: 503-281-9553 EVES: _____

EMAIL: _____ FAX: _____

SPECIFIC ISSUE: Support of current director Against change in his position

WRITTEN TESTIMONY: yes -

IF YOU WISH TO ADDRESS THE BOARD:

1. Please complete this form and return to the Board Clerk.
2. Address the County Commissioners from the presenter table microphones. Please limit your comments to **3 minutes**.
3. State your name for the official record.
4. If written documentation is presented, please furnish one copy to the Board Clerk.

IF YOU WISH TO SUBMIT WRITTEN COMMENTS TO THE BOARD:

1. Please complete this form and return to the Board Clerk.
2. Written testimony will be entered into the official record.

#2

**MULTNOMAH COUNTY BOARD OF COMMISSIONERS
PUBLIC TESTIMONY SIGN-UP**

Please complete this form and return to the Board Clerk

This form is a public record

MEETING DATE: March 22, 2007

SUBJECT: Changes at Brenston Clinic

AGENDA NUMBER OR TOPIC: Public Comment

FOR: ✓ 2/6/07 AGAINST: _____ THE ABOVE AGENDA ITEM (VEALLABA BENITA CASILLO)
NAME: ~~Alma~~ Benita Castillo

ADDRESS: 1094 Cherry Blossom Apt 64

CITY/STATE/ZIP: Portland Or 97216

PHONE: DAYS: 503-408-0534

EVES: _____

EMAIL: _____

FAX: _____

SPECIFIC ISSUE: support of current administrator - Against
change in his position

WRITTEN TESTIMONY: yes -

IF YOU WISH TO ADDRESS THE BOARD:

1. Please complete this form and return to the Board Clerk.
2. Address the County Commissioners from the presenter table microphones. Please limit your comments to **3 minutes**.
3. State your name for the official record.
4. If written documentation is presented, please furnish one copy to the Board Clerk.

IF YOU WISH TO SUBMIT WRITTEN COMMENTS TO THE BOARD:

1. Please complete this form and return to the Board Clerk.
2. Written testimony will be entered into the official record.

We are here today to advocate not for ourselves but in the interest of the future for our children and grandchildren.

My name is Maria Gastelum. I am a single mother of 6 children and I live in northeast Portland – Villa de Clara Vista. I am part of the “Vecinos en Alerta – Neighborhood Watch,” a volunteer organization with many residents that watch over neighborhood safety.

I am here today to share 2 important points with you:

First: I want to let you know how vital and important the county **Bienestar** program is for all families that are of diverse cultures, and speak a second language, – Hispanic, Somali, Russian, and Asian families. Bienestar is a unique program whom without we would not be able to exist. Many of us face many obstacles - lack of transportation, no medical insurance, low paying jobs, unemployment, health problems, domestic violence, and housing issues. The Bienestar program does know how to give us the proper orientation and help us because they speak our language, understand our culture, and genuinely care. I would like to invite you to visit our community where Bienstar provides services so you can see with your own eyes how much good this program provides for thousands of people.

Secondly: Mr Nabil Zaghloul of La Clinica is a very important person within the Bienestar team. It worries us **gravely** what is occurring – that his position is being eliminated and decisions are happening without leaders actually informing themselves of what the needs of our community actually are. This makes our community feel really bad, as if the county doesn't value us nor respect us. We are here today to ask that Mr. Nabil not be removed in his role as **community leadership and community advocate**. He is someone we have developed a relationship with, and who we highly trust, someone who watches out for our best interests, and advocates for us. Removing him would create major damage to our community. We ask you as our community leaders, and representatives to please take our input seriously, and **restore** Mr Nabil to his leadership post at La Clinica and with the Bienestar team. **instead of reassigning him to dental clinics.**

Thank You for allowing me the opportunity to speak in front of you today.



MULTNOMAH COUNTY AGENDA PLACEMENT REQUEST (short form)

Board Clerk Use Only

Meeting Date: 03/22/07
Agenda Item #: B-1
Est. Start Time: 9:30 AM
Date Submitted: 02/26/07

Agenda Title: Update on the Work of the Legislature as it Pertains to Issues of Interest to Multnomah County

Note: If Ordinance, Resolution, Order or Proclamation, provide exact title. For all other submissions, provide a clearly written title.

Requested Meeting Date: March 22, 2007 **Amount of Time Needed:** 30 mins
Department: Non-Departmental **Division:** Public Affairs Office
Contact(s): Barb Disciascio, Gina Mattioda
Phone: 503-988-6800 **Ext.** 86800 **I/O Address:** 503/600/PAO
Presenter(s): Gary Conkling and Gina Mattioda

General Information

1. What action are you requesting from the Board?

None

2. Please provide sufficient background information for the Board and the public to understand this issue. Please note which Program Offer this action affects and how it impacts the results.

Update on the work of the legislature as it pertains to issues of interest to Multnomah County.

3. Explain the fiscal impact (current year and ongoing).

None

4. Explain any legal and/or policy issues involved.

None

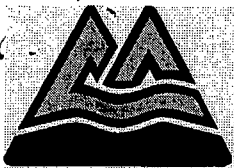
5. Explain any citizen and/or other government participation that has or will take place.

None

Required Signature

**Elected Official or
Department/
Agency Director:**

Date: Feb. 26, 2007



Public Affairs Office
MULTNOMAH COUNTY OREGON

501 SE Hawthorne Blvd., Ste. 600
Portland, Oregon 97214
503-988-6800

March 21, 2007

SB 895 is sponsored by Senator Jackie Winters (R-Salem), it is in the Senate Health and Human Services Committee with no public hearing currently scheduled.

The Public Affairs Office requests the BCC oppose SB 895

This bill will remove the inspection schedule from statute and place it in rule. Statutory authority is stronger and less easily revised than rule authority.

This bill eliminates the six month inspection requirement of restaurants and states, "rules and criteria shall be designed to give substantial emphasis to the presence or absence of critical violations."

This bill could reduce inspections in Multnomah County to 31% of the restaurants.

This bill potentially reduces the infrastructure support and creates significant variations in the inspection schedule. Food borne illness protection requires an approach that reviews the entire population of restaurants and maintains a stable educated workforce.

This bill includes unnecessarily restrictive language. Current rules prohibit counties from creating rules more stringent than state rules.

This bill would put the following language in statute. "A local public health authority may not require the inclusion of any label, warning, advisory or other information on a restaurant..." without approval of the Department of Human Services.

SB 1011 is sponsored by Committee on Judiciary, it is in the Senate Environment and Natural Resources Committee with no public hearing currently scheduled. However, a hearing is anticipated by the end of March.

The Public Affairs Office requests the BCC support SB 1011

Over the past year Multnomah County has been involved in the Ag/Urban Study with Metro, Clackamas and Washington Counties, Department of Land Conservation and Development and Department of Agriculture. As a result, SB 1011 was introduced to help the region use what has been learned by identifying where to expand in the future (urban reserves) and where not to expand (rural preserves).

Successful future UGB expansions mean that Multnomah County can be successful in meeting the county's land use values of protecting and preserving our agriculture and forest lands.

SB1011 allows the region to examine critical issues before the boundary is moved to insure correct areas are identified for communities and not end up with UGB expansion areas that either result in an impractical urban form or an area that has other challenges to urbanization such as governance or finance.

SB 1011 includes a new concept of identifying rural preserves which would set aside areas and commit to not urbanizing them. This action would provide the agricultural community more long-term certainty. In addition rural preserves would help shape the identity of the region and protect key air and water quality attributes by protecting natural areas from urbanization.

Items for consideration from CFM memo

Double Majority

- *The Public Affairs Office requests the BCC support SB 921 with amendments*

Beer Increase

- *The Public Affairs Office request the BCC support a beer increase proposal that includes additional funds for community mental health and substance abuse programs*

The Co-Chair's Budget is scheduled to be released today at 10:00a.m. in joint session.



Memorandum

TO: Gina Mattioda
FROM: CFM State Lobby Team
DATE: March 21, 2007
RE: Legislative Update

This update covers requested topics that will be discussed at the Multnomah County board of commissioners briefing March 22.

Double Majority

Several measures have been introduced to repeal or modify the double majority voting requirements for property tax measures that were enacted as a result of voter approval of Measure 47 and, subsequently, Measure 50.

The emerging dominant viewpoint on Senate Finance and Revenue is to move a bill that modifies the double majority requirements for certain additional elections. There are two choices. Senator Richard Devlin proposes eliminating the double majority requirement for all November elections and for the May election in even years. On the other hand, House Majority Leader Dave Hunt favors eliminating the double majority requirement for all November and May elections. At the hearing Wednesday, Chair Ryan Deckert indicated the committee will follow the lead of Devlin and Hunt. Based on opinions expressed during the hearings and in private conversations with Senators Rod Monroe and Ginny Burdick, the Hunt version is most likely to emerge. They favor this over outright repeal because they believe voters are more likely to agree to such a change.

Deckert has not indicated when he will move a double majority measure in his committee, but action could occur as early as next week.

Measure 37

Legislation to declare a time out on issuing final land use orders – for waivers and development approvals – or to extend the time line for processing Measure



37 claims are both on hold while a work group searches for a remedy to the troubled landowner rights initiative. The work group, which consists of five legislators, DLCD Director Lane Shetterly and Deputy Chief of Staff Tim Nesbitt, has apparently not found common ground and reportedly had a "blowup" at its session last Thursday night. As a result, the Joint Land Use Fairness Committee scheduled no hearings this week.

It is unclear what the committee will turn to next if the work group fails to make any progress. One option is to narrow the scope of a Measure 37 "fix," and combine it with an extension to help a number of jurisdictions that are unable to process all their claims by the statutory 180-day deadline. This is a problematic approach, too, because it presupposes that certain issues, such as transferability of claims, will be addressed in a narrow rather than larger context. That could spark opposition by land use activists and farm interests worried about the impact of large subdivisions and commercial developments spawned by Measure 37. On the other hand, a simple time extension is politically unlikely without some concessions to claimants. The possibility exists that the legislature won't be able to agree on anything, which could push the issue back to the ballot with dueling initiatives. Of course, there is the prospect that some compromise could emerge in time for the legislature to act next February, thus negating the need for further ballot measures, at least by major players such as 1000 Friends of Oregon and Oregonians in Action.

Beer Tax

Behind-the-scenes discussions continue between House and Senate advocates of a beer tax for different purposes. A group of House Republicans, led by Rep. Sal Esquivel, is pressing for a beer tax increase to provide a source of dedicated funding for Oregon State Police. Senator Bill Morrisette and others are seeking an increase in the beer tax to provide additional funding for community mental health and substance abuse programs. The two sides are talking about a blended approach, but they haven't reached agreement. In fact, they are still quarreling over some basic facts such as how much an increase will generate. There are some people attempting to mediate the issue so sides don't harden and a compromise fails to materialize. The governor's office is involved.

BOGSTAD Deborah L

From: MATTIODA Gina M
Sent: Thursday, March 22, 2007 3:34 PM
To: #ALL CHAIR'S OFFICE; #ALL DISTRICT 1; #ALL DISTRICT 2; #ALL DISTRICT 3; #ALL DISTRICT 4; #CABINET; #CABINET ATTENDEES; MARCY Scott; STEWART Joey A; KIRK Christine A; 'MOYER Catherine M'
Cc: 'Gary Conkling'; Kate Cusack; DISCIASCIO Barbara A
Subject: Co-Chair' Budget Materials

As I mentioned during today's legislative briefing, the co-chair's released their budget at 10:00 am. Their presentation is attached, below is a write up from CFM. I'm reviewing the attachment and working with departments and lobbyists to create an email with specifics. It was my hope to provide you with a detailed email today, but I can't stress enough as stated below "budget provides little details." It is my intent to provide you with such an email by Friday morning.

Please see yellow highlighted portion below.

Co-Chairs' Budget Provides Little Detail

March 22, 2007

Author: CFM Staff

☐ Print ☐ Send to a Friend

A much anticipated release of the Joint Ways and Means Committee co-chairs' budget today was anti-climatic as it revealed little of the programmatic detail on which Capitol insiders thrive.

Co-chairs Kurt Schrader, D-Canby, and Mary Nolan, D-Portland, described their agenda in an informal joint House and Senate floor session. One emphasis was clear. The total amount recommended for K-12 schools is \$6.245 billion, including \$260 million for a "school improvement fund" to improve graduation rates, narrow an achievement gap and produce other "outcomes," a favorite word of Schrader, who is in his third term as Senate co-chair of the budget writing committee. The budget document released today also projects \$2.817 billion in local resources, bringing the total K-12 budget for 2007-2009 to about \$9 billion.



Students were the big winner when the co-chairs released their budget

It is not clear how the education lobby will react to the co-chairs recommendations, but if past history is any indication, it will consider the amount a floor, not a ceiling.

In addition to a commitment to K-12, the two co-chairs went on record in favor of providing \$47 million to what they called the "shared financial responsibility" model, a concept used by the governor to describe his commitment to increasing student aid for higher education.

Other highlights of the presentation:

- A commitment of \$100 million for round two of the Connect Oregon transportation investment package.
- A commitment of \$100 million to affordable housing.
- A commitment to hire 100 new State Police officers, though the source of funding was not immediately clear in today's presentation.

- A commitment of \$50 million to a county road building fund.
- A commitment to a total of \$914 million in ending balance and reserves, which is a combination of 1 percent of total appropriations, the increased money from the March forecast, the new Rainy Day fund and the education stability fund.

Comments from the co-chairs indicate they are proposing to spend dollars flowing from the tobacco tax increase, though they know that the new tax is still in limbo in the Joint Ways and Means Committee, waiting to line up the votes on the House floor to pass the new tax. It was not immediately clear whether the co-chairs were counting on other new revenue, such as the provider taxes on hospitals, Medicaid managed care companies and nursing facilities.

As he started his portion of the presentation today, Schrader told members and a large audience in the gallery and watching on television sets around the Capitol that they would be disappointed if they were looking for a lot of programmatic detail. "What we are doing today," he said, "is providing a general look at our recommended priorities. And then we want to empower the Ways and Means subcommittees to work on the individual programmatic detail."

Gina Mattioda

Director

Multnomah County Public Affairs Office

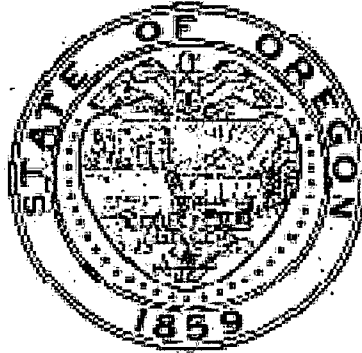
gina.m.mattioda@co.multnomah.or.us

Newsroom: <http://www.co.multnomah.or.us/news>

phone: 503.988.5766

cell: 503.708.5692

fax: 503.988.6800



Co-Chairs' 2007-09 Recommended Budget

Strategic Investments for Sustained Prosperity

March 22, 2007

Senator Kurt Schrader

Representative Mary Nolan

Co-Chairs Process

- **Principles**

- Emphasize investments that promote self sufficiency and community vitality
- Fund outcomes that improve lives, not just activities
- Reward innovation, customer service, efficiency, collaboration
- Lead by example: energy conservation, diversity, family friendliness
- Expect continuous improvement

- **Subcommittee Role**

- Make the best use of all funds – discretionary and dedicated
- Focus agencies on achieving and reporting results
- Meet total expenditure target for program area
- Include Co-chairs' investment priorities in agency budgets
- Make other adjustments as subcommittees deem appropriate

Major Investments and Initiatives

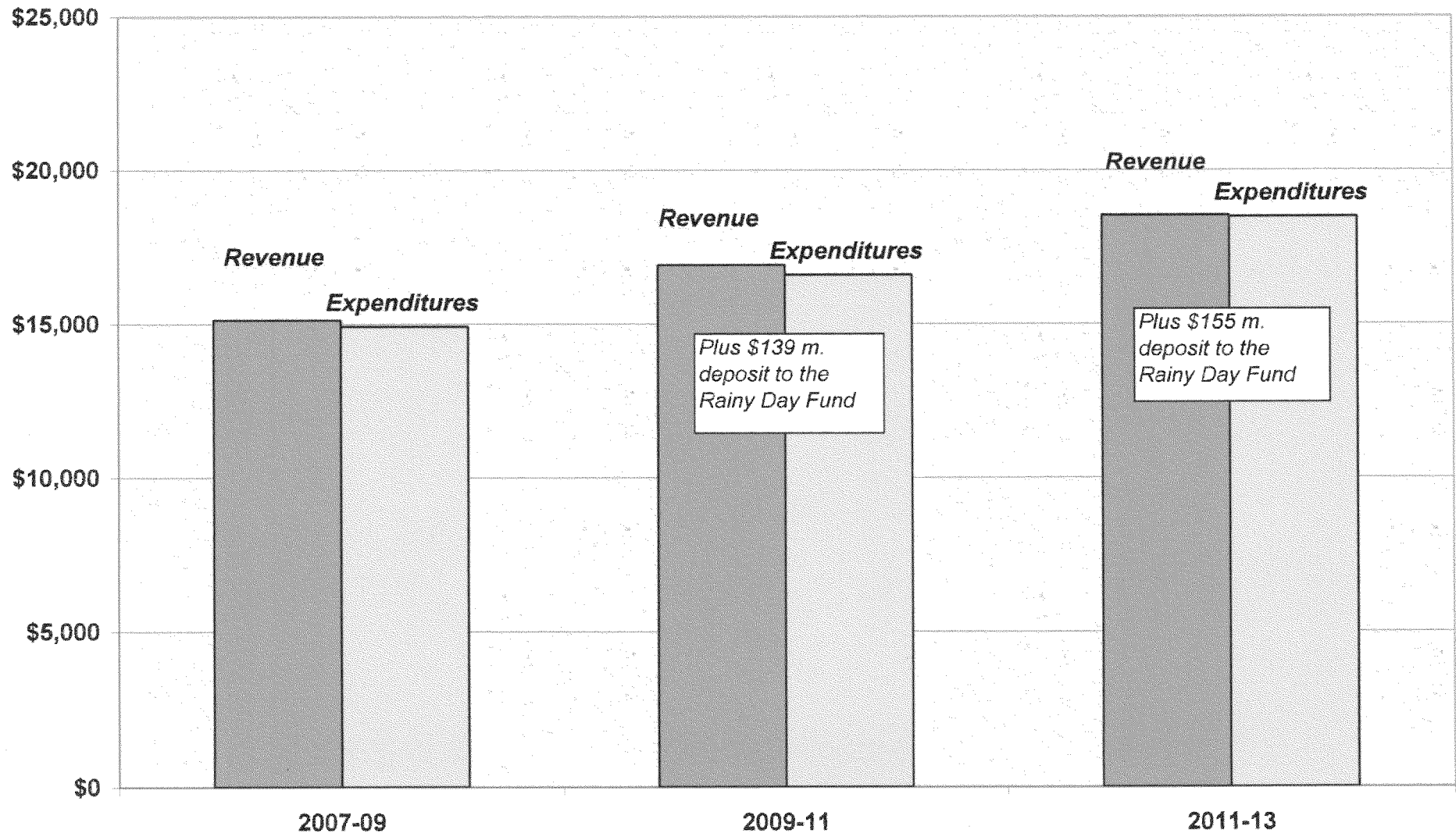
- The Co-chairs Recommended Budget is fully sustainable.
- It reaffirms our commitment to strengthening education, creating safe communities, supporting the rural economy, and making sure even the most vulnerable Oregonians have a solid foundation to build on.

This budget makes key investments in these areas by:

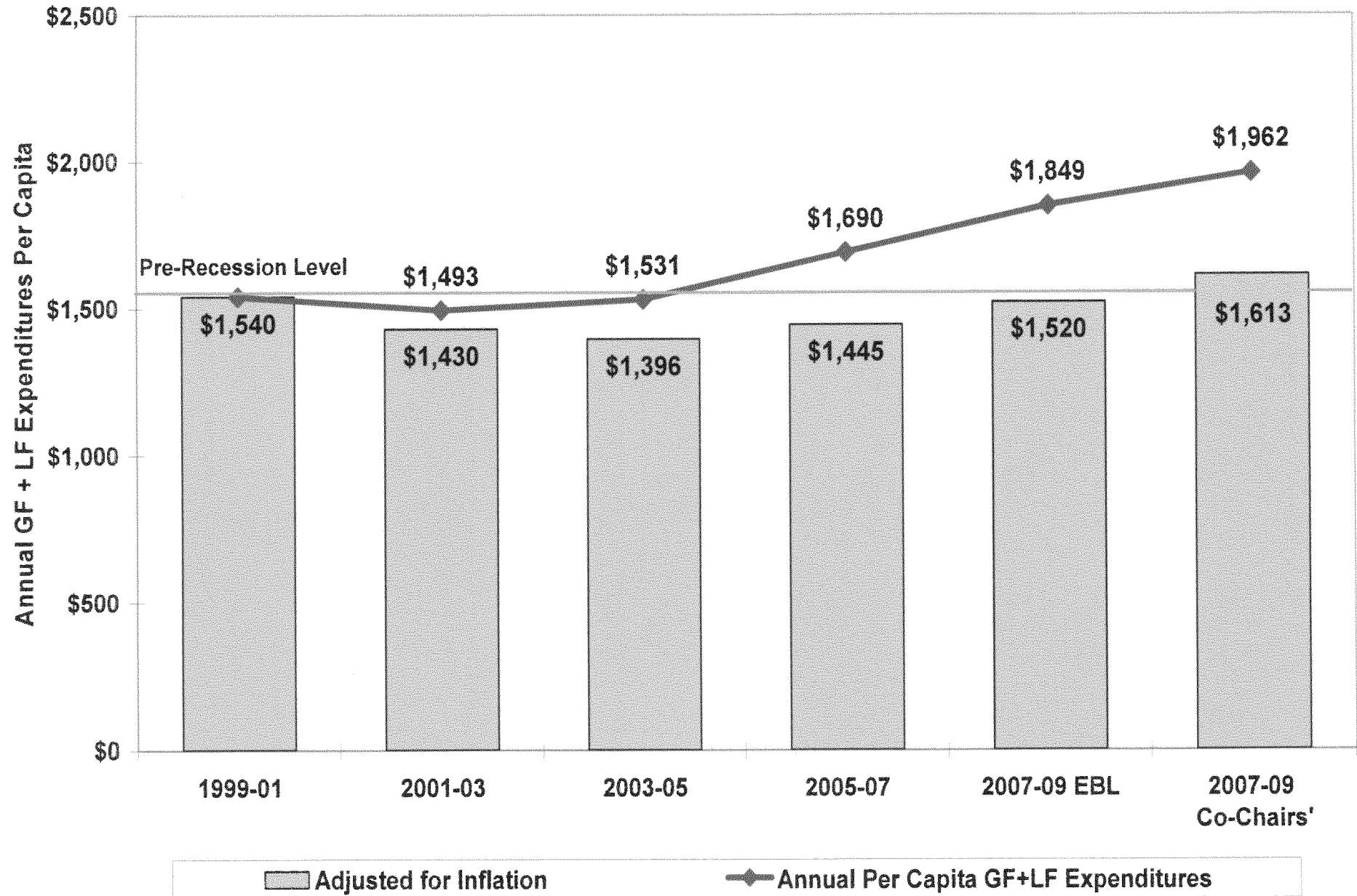
- Guaranteeing \$6,245 million for K-12 education, making sure Oregon's schools have a full school year and reduced class sizes.
- Dedicating \$47 million more for Shared Responsibility grants, making a college education accessible to EVERY Oregonian.
- Dedicating \$100+ million to affordable housing programs. Mental health, seniors and poverty advocates all agree that housing is a crucial issue for our most vulnerable citizens.
- Adding 100 sworn officers to the Oregon State Police, to fight meth and make Oregon's highways safer for everyone.
- Directing \$50 million to counties suffering from the loss of federal timber payments to make needed road repairs, plus additional funds to help them keep their school doors open.
- Adding \$139 million to our new Rainy Day Fund, keeping our commitment to save before we spend and protect Oregon during difficult economic times.

Tentative General Fund and Lottery Funds Budgets for 2009-11 & 2011-13

(in millions)

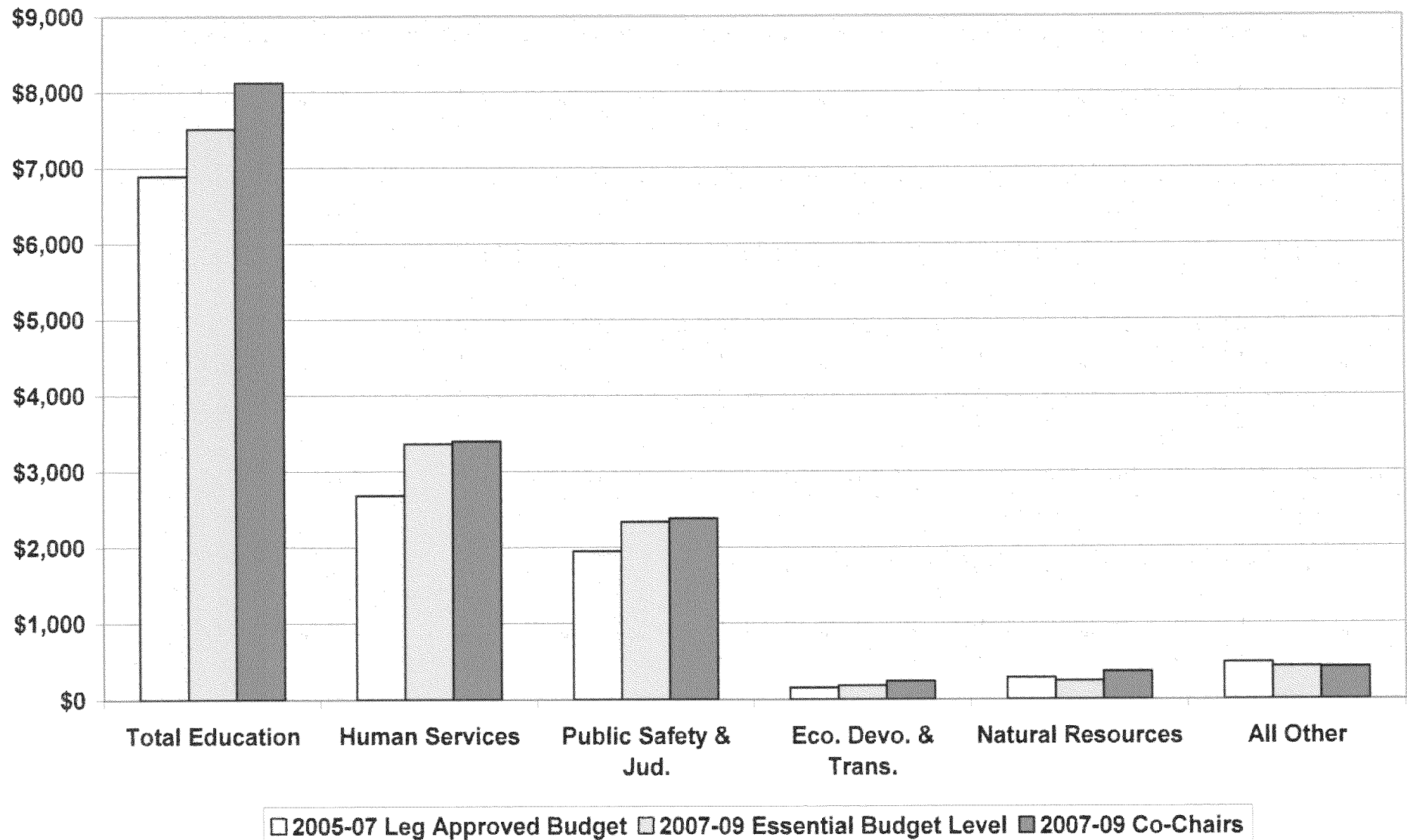


Per Capita General Fund plus Lottery Funds Expenditures

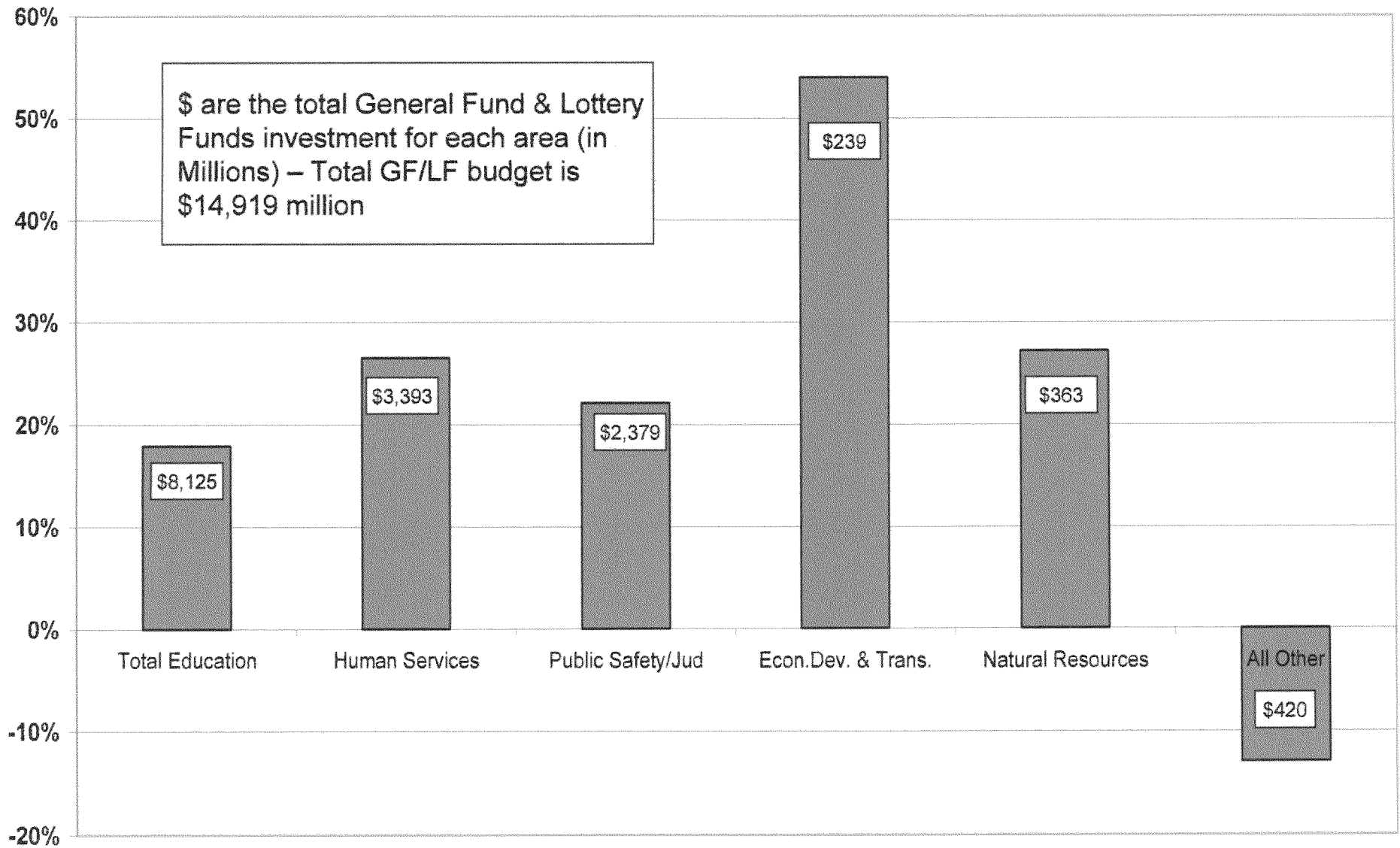


General Fund and Lottery Funds Investments in Oregon

(in millions)



General Fund and Lottery Funds Percent Change From 2005-07



2007-09 Ways & Means Co-Chair Recommended Budget
Resources (in millions)

	General Fund	Lottery Funds Discretionary	Lottery Funds Measure 66	TOTAL GF+LF
March 2007 Forecast Revenues				
Beginning Balance	1,397.9	59.2	25.1	1,482.2
Projected Revenues	12,666.8	1,061.1	185.9	13,913.8
Total Resources	<u>14,064.7</u>	<u>1,120.3</u>	<u>211.0</u>	<u>15,396.0</u>
Less Anticipated Administrative Actions	(64.3)	-	-	(64.3)
Total Available Resources	<u>14,000.4</u>	<u>1,120.3</u>	<u>211.0</u>	<u>15,331.7</u>
Dedicated Distributions				
County Economic Development	-	(44.7)	-	(44.7)
Education Stability Fund	-	(223.1)	-	(223.1)
Education Stability Fund Interest	-	26.7	-	26.7
Agency Beginning Balances	-	23.1	-	23.1
Interest and Other Earnings	-	2.3	-	2.3
Net Current Law Resources	<u>14,000.4</u>	<u>904.6</u>	<u>211.0</u>	<u>15,116.0</u>
Resources Beyond Forecast in C-CRB				
Resources:				
Racing Commission Revenue Increase	0.5	-	-	0.5
State Agency Reversions	25.0	-	-	25.0
Adjustments:				
Biofuel and other Tax Credits	(9.0)	-	-	(9.0)
CFAA Reduction to GF	(12.3)	-	-	(12.3)
ERT Funding (from County Eco. Dev. LF)	-	0.9	-	0.9
Total Resources in C-CRB	<u>14,004.6</u>	<u>905.5</u>	<u>211.0</u>	<u>15,121.1</u>

2007-09 Ways & Means Co-Chair Recommended Budget
Expenditures (in millions)

	General Fund	Lottery Funds Discretionary	Lottery Funds Measure 66	TOTAL GF+LF
Total Resources in C-CRB	14,002.2	905.5	211.0	15,118.7
2005-07 Supplemental Expenditures not in GRB				
OJD - Interpreter Costs	1.7	-	-	1.7
PDSC - Caseload and Costs per Case	1.1	-	-	1.1
DOJ - TMSA Litigation	0.6	-	-	0.6
ODF - Eradicate Pathogens for Sudden Oak Death	0.3	-	-	0.3
Governor - Computer Purchases	-	-	-	-
ODE - SB 426 OEGB 05-07 start up costs	0.1	-	-	0.1
Total 2005-07 Supplemental Expenditures	3.8	-	-	3.8
2007-09 Expenditures by Program Area				
Education	7,443.9	681.2	-	8,125.1
Human Services	3,380.7	12.0	-	3,392.7
Public Safety/Judicial	2,371.9	-	6.8	2,378.7
Transportation/Economic Development	55.2	183.5	-	238.7
Natural Resources	162.1	-	201.2	363.3
General Government	255.6	6.8	-	262.4
Emergency Fund	158.3	-	-	158.3
Total 2007-09 Expenditures	13,827.7	883.5	208.0	14,919.2
Total Budgeted Expenditures	13,831.5	883.5	208.0	14,923.0
1% GF Expenditures plus March 07 Forecast	173.0	-	-	173.0

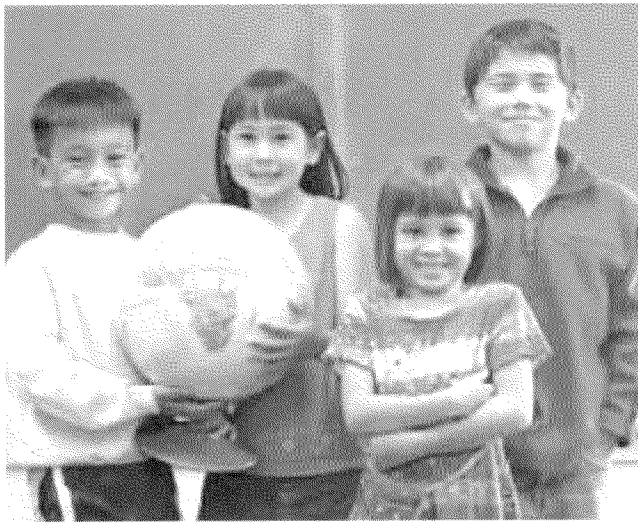
Totals may not add due to rounding.

Education Investments K-12

(in millions)

Total State Support for K-12

\$6,245



- Includes \$260 million for the School Improvement Fund pilot to:

- Improve graduation rates
- Achieve 3rd grade reading proficiency
- Narrow achievement gap
- Other ODE performance outcomes

- Plus local resources

\$ 2,817

Total Support for K-12

\$9,062

Shared Responsibility Model



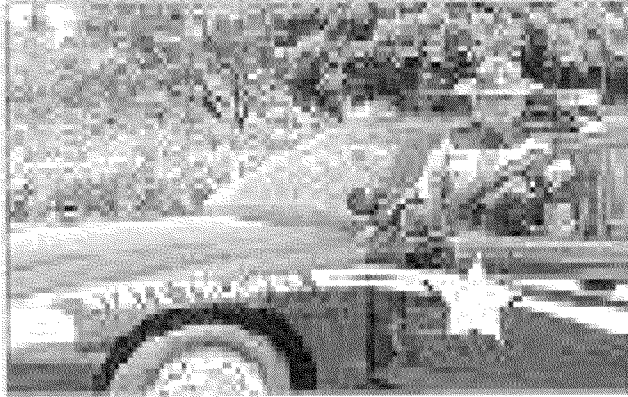
- Affordable college education for all Oregonians
 - Require reasonable contribution by student and families
 - Students must maintain good academic standing
 - State provides balance to ensure students who want to attend college can afford to

\$100+ million Housing Initiative



- Investments in affordable housing for seniors and mentally ill Oregonians and low income families
- \$50 million total investment from General Fund, Lottery Funds, and Public Purpose Charges
- Recommend additional \$60+ million from increased document recording fee

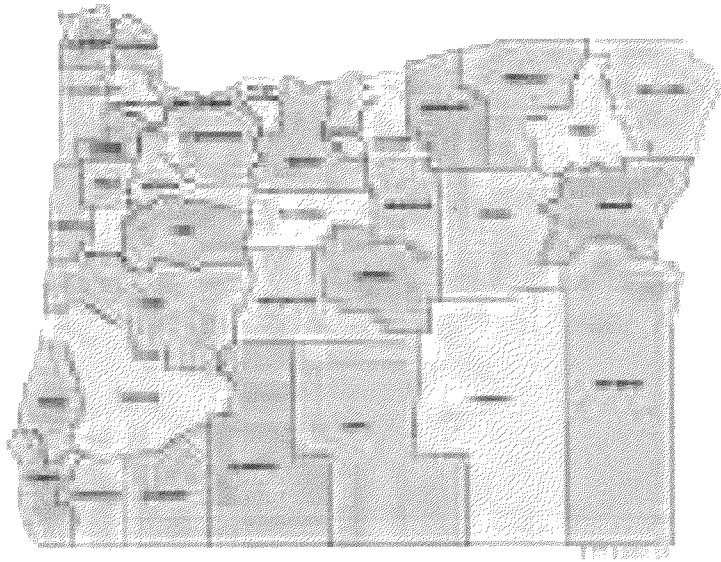
Prevention Initiative



- Keep Oregonians safe
 - Increase highway patrol
 - Increase meth interdiction
- Brighten our children's future
 - Access to health care
 - Build quality day care capacity
 - Services for kids who have been victims of violence and abuse



County Partnership



- Protect schools from loss of federal timber money
- Create \$50 million fund for county roads
- Continue enhanced video lottery distribution
- Community Corrections funding to build toward a county friendly rebasing
- Continue county enhanced services for veterans

Ending Balance/Reserves

(in millions)

1% of appropriations	\$139
March forecast change	<u>34</u>
• Total Ending Balance	\$173
• Education Stability Fund	\$451
• Rainy Day Fund	\$290
• May Forecast Change	<u>?</u>
Ending Balance + Reserves	+/- \$914

Jobs and Business Investments



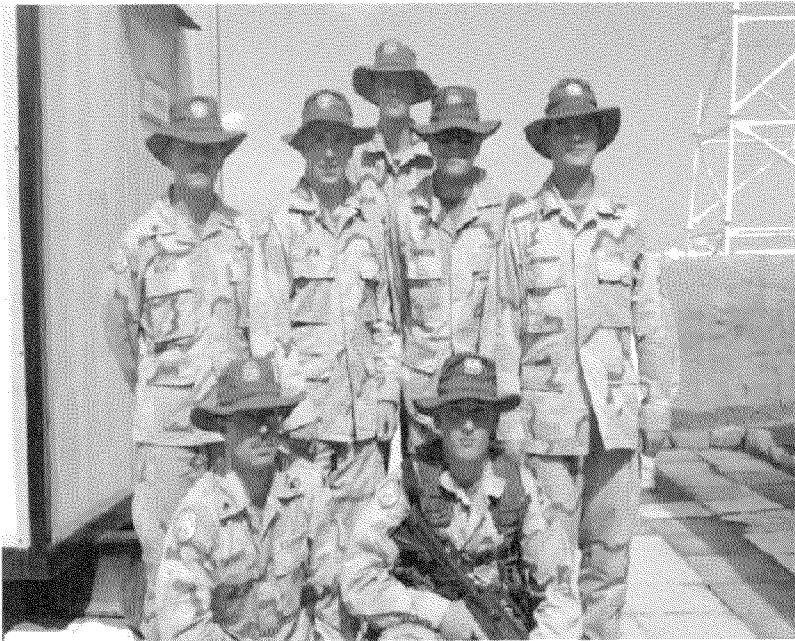
- Keep freight moving with Connect Oregon II and expediting OTIA projects
- Continue investing in innovative technologies
- Enhance ETIC
- Create jobs for Oregonians by building modern infrastructure in small and rural communities

Renewable Energy and Quality of Life Initiative



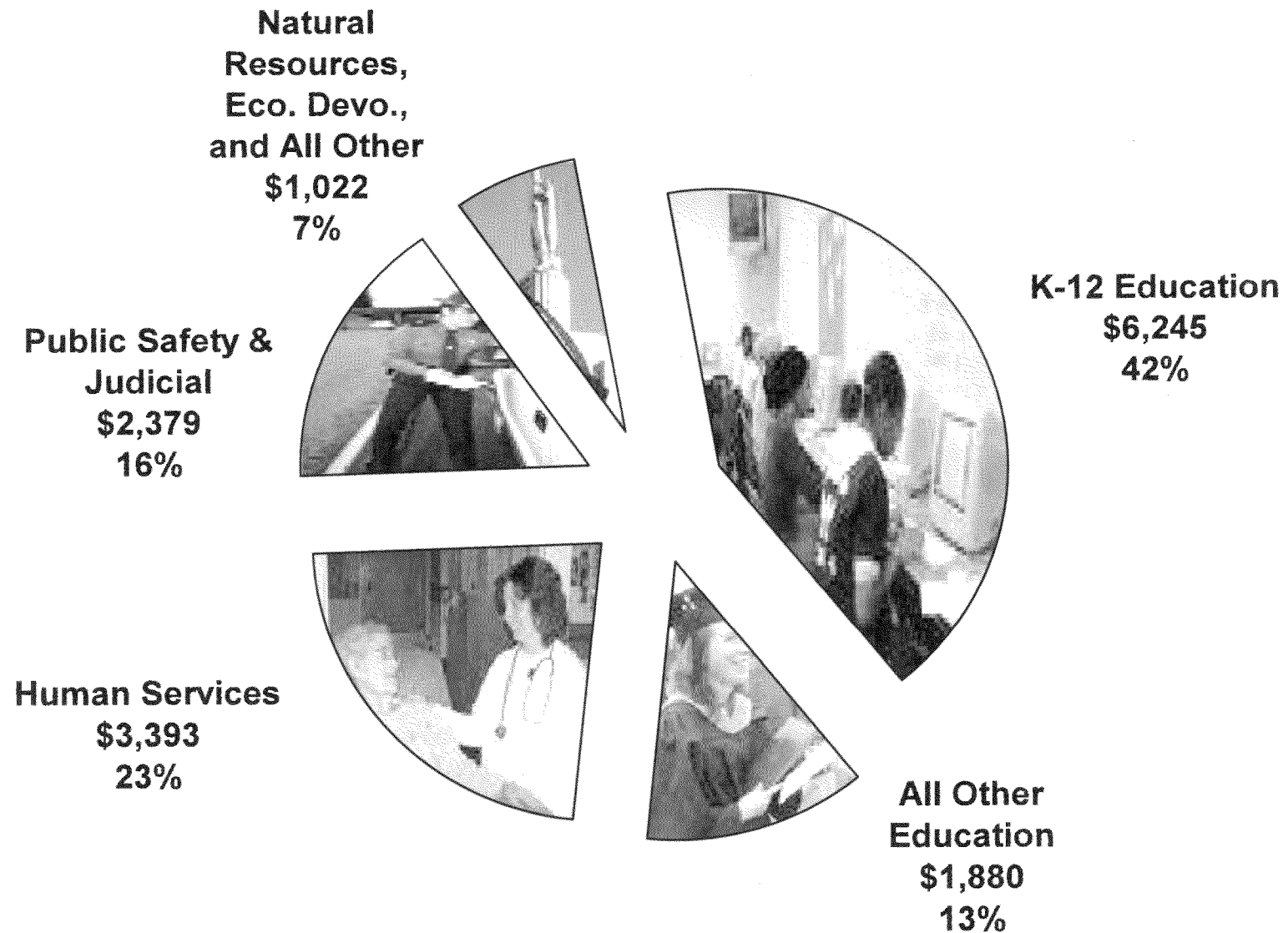
- Renewable Portfolio Standard legislation
- Catalyst investments in biofuels, solar, geothermal, wind and wave energy production
- Projects that reduce CO₂ emissions and reliance on fossil fuels

Veterans Initiative

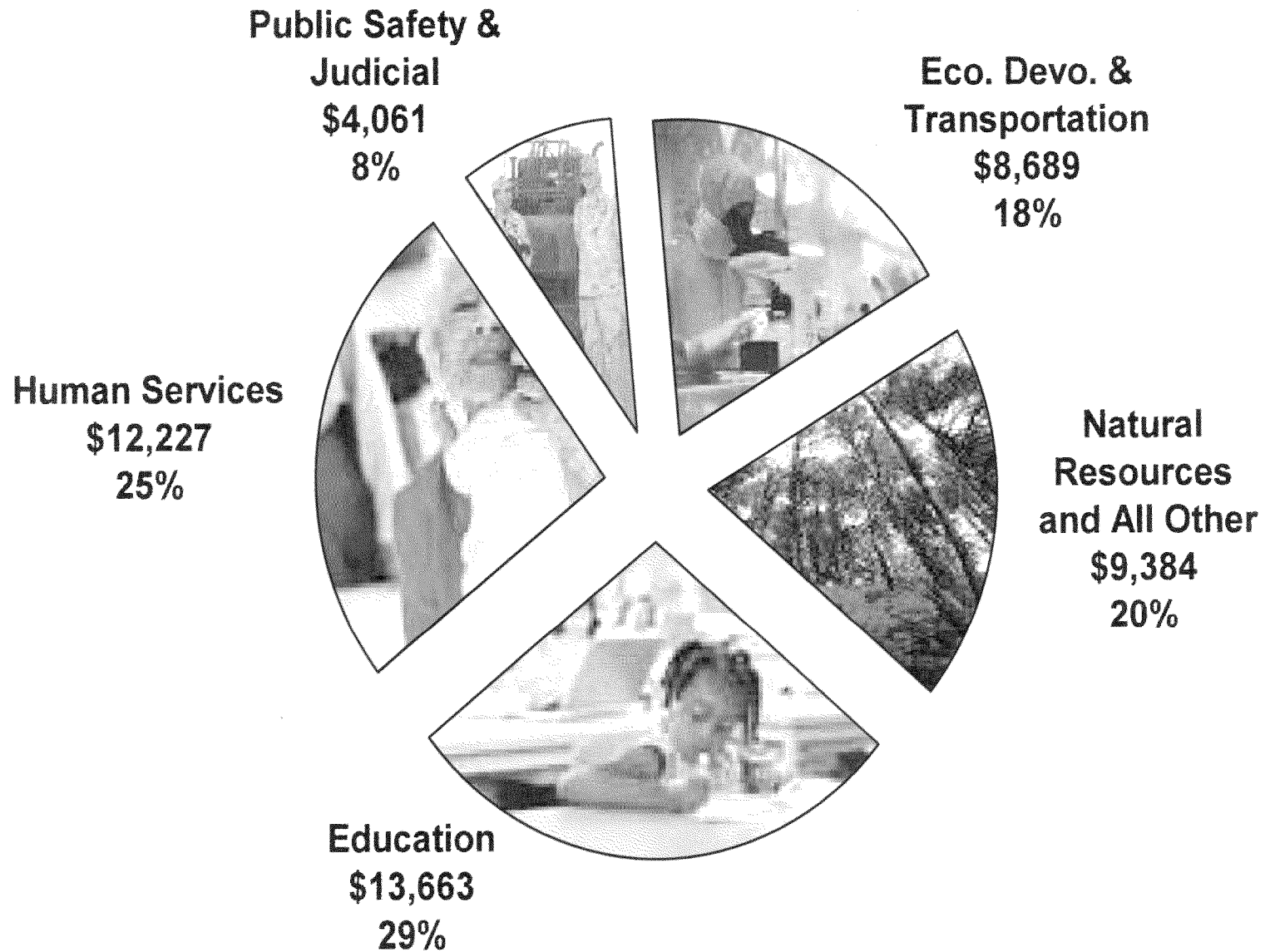


- Additional assistance for loans for veterans
- Increase funds for services to veterans – emergency needs and long-term
- Increase funding for education programs serving veterans
- Nationally recognized reintegration program for returning soldiers

2007-09 General Fund & Lottery Funds \$14,919 Million



2007-09 Total Funds \$48,024 Million



Education Investments

(in millions)

\$7,443.9 General Fund
\$ 681.2 Lottery Funds
54.5% of Total GF/LF

GF/LF Cost to continue previous services \$7,505.3

PreK-20 holistic view of Education and lifelong learning

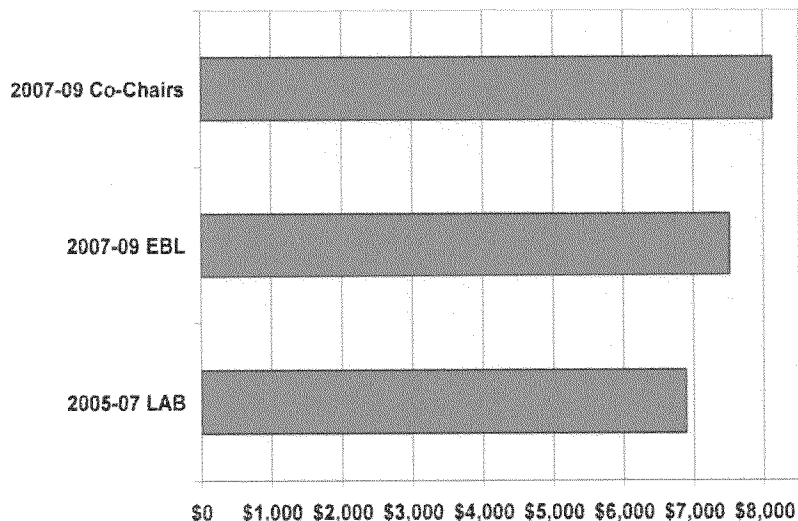
Highlights –

- 16% increase in K-12 Funding, including \$260 million for the School Improvement Fund pilot
- Dramatically expand Head Start and start ramp up to serve all eligible children
- Affordable access to college for every Oregonian who maintains good grades
- Increase per student support for Community Colleges
- Increase support and flexibility for public Universities
- Graduate more health care professionals
- Continued capital investment to maintain infrastructure and create jobs
- Build data systems to ensure great results
- Other strategic investments

Total General Fund/Lottery Funds

\$8,125.1

Education



Human Services Investments

(in millions)

\$3,380.7 General Fund
\$ 12.0 Lottery Funds
22.7% of Total GF/LF

GF/LF Cost to continue previous services \$3,360.6

Promote independence, self sufficiency, and dignity
Put health back into health care

Highlights

- Expand employment related day care for low income working families
- Expand support for abused and at-risk children
- Ensure access to health and long term care providers—provider taxes, increase DRG rates, improve AAA equity
- Ensure sustainability for Oregon Project Independence
- Invest more in school based health centers
- Make our Healthy Kids program sustainable
- Replace the State hospital and add community services for Oregonians with mental illness
- Data systems to support transparency and fiscal responsibility
- Other strategic investments



Total General Fund/Lottery Funds

\$3,392.7

Public Safety/Judicial Investments

(in millions)

\$2,371.9 General Fund
\$ 6.8 Lottery Funds
15.9% of Total GF/LF

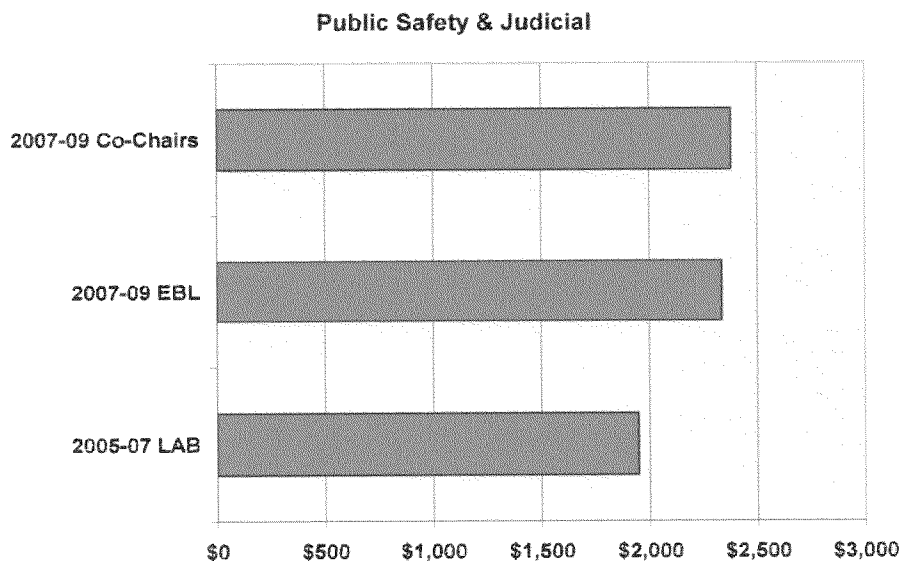
GF/LF Cost to continue previous services \$2,333.6

Effective prevention backed up by enforcement

Highlights

- Increase juvenile crime and gang prevention grants
- More beds and services for juveniles
- Expand services to prevent and treat victims of child abuse and domestic violence
- Add 100 new Oregon State Police officers
- Enhance statewide forensics capability
- Bolster community corrections and initiate a path to fully fund a new partnership formula
- Assures equal access to justice under the law
- Enhanced support for our military troops and our veterans
- Other strategic investments

Total General Fund/Lottery Funds \$2,378.7



Economic Development and Transportation Investments

(in millions)

\$ 55.2 General Fund
\$ 183.5 Lottery Funds
1.6% of Total GF/LF

GF/LF Cost to continue previous services \$183.2

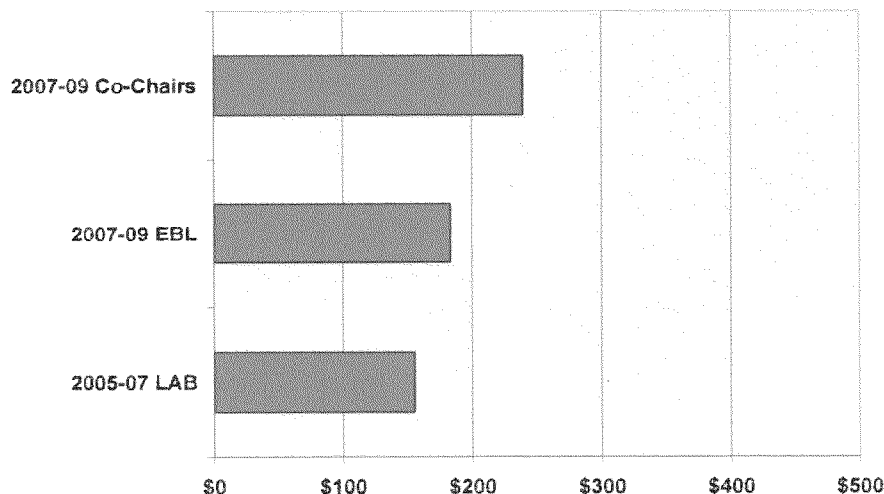
Support businesses that invest in Oregon & provide jobs to Oregonians

Highlights

- Make targeted sustainable investments in the Innovation Economy
- Continue investing in Women, Minority and Small Business
- Continue investing in Oregon's roads and bridges
- Connect Oregon II for freight mobility
- Reinvest in Oregon's Arts Community
- Major investment in housing for Oregon's vulnerable populations, including seniors
- Other strategic investments

Total General Fund/Lottery Funds \$238.7

Economic Development & Transportation



Natural Resources Investments

(in millions)

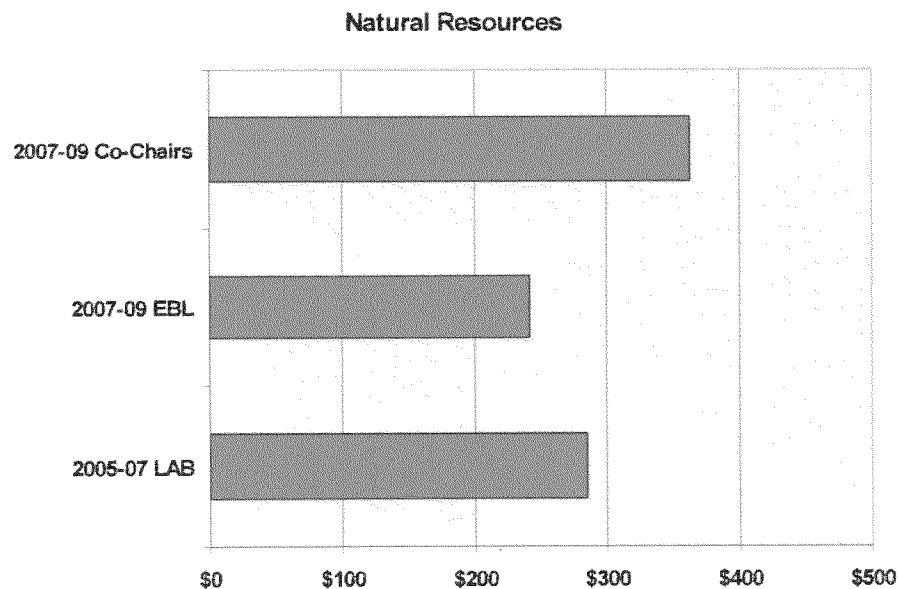
\$162.1 General Fund
\$201.2 Lottery Funds
2.4% of Total GF/LF

GF/LF Cost to continue previous services \$241.2

Restoring our commitment to Oregon's natural splendor

Highlights

- Restores General Fund for regulatory activities
- Establishes Oregon as a leader in renewable energy
- Reinvestment in Oregon's air and water quality
- Enhance fire protection of forests with Oregon's landmark early attack system
- Double OWEB investments from 4 years ago to restore habitat
- Assistance to rural Oregon through grants
- Provides funds for forest monitoring in E. Oregon
- Commitment to reach park grant and land acquisition goals to ensure Oregon communities' quality of life as we grow
- Begin to inventory water resources to support sustainable development
- Other strategic investments



Total General Fund/Lottery Funds \$363.3

General Government Investments

(in millions)

\$413.9 General Fund
\$ 6.8 Lottery Funds
2.8% of Total GF/LF

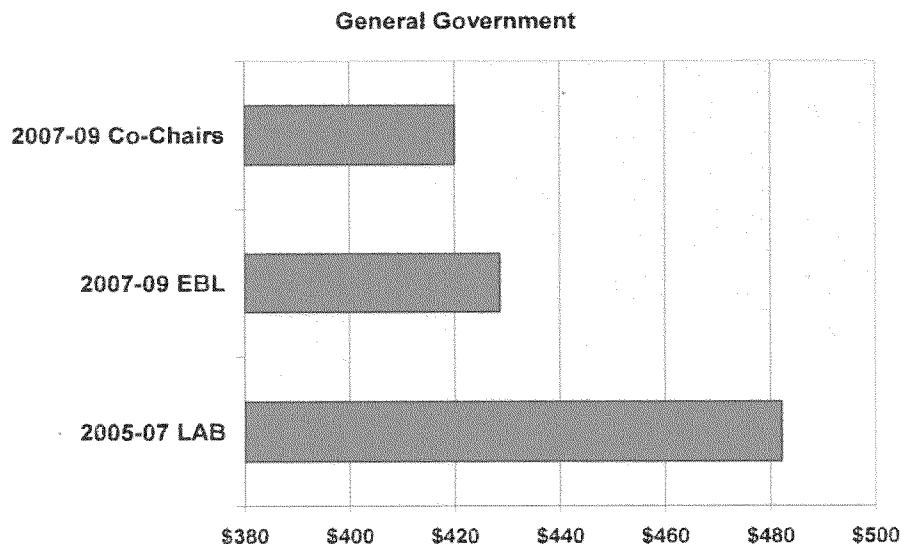
GF/LF Cost to continue previous services \$428.6

Reducing percentage of the budget spent on administrative costs

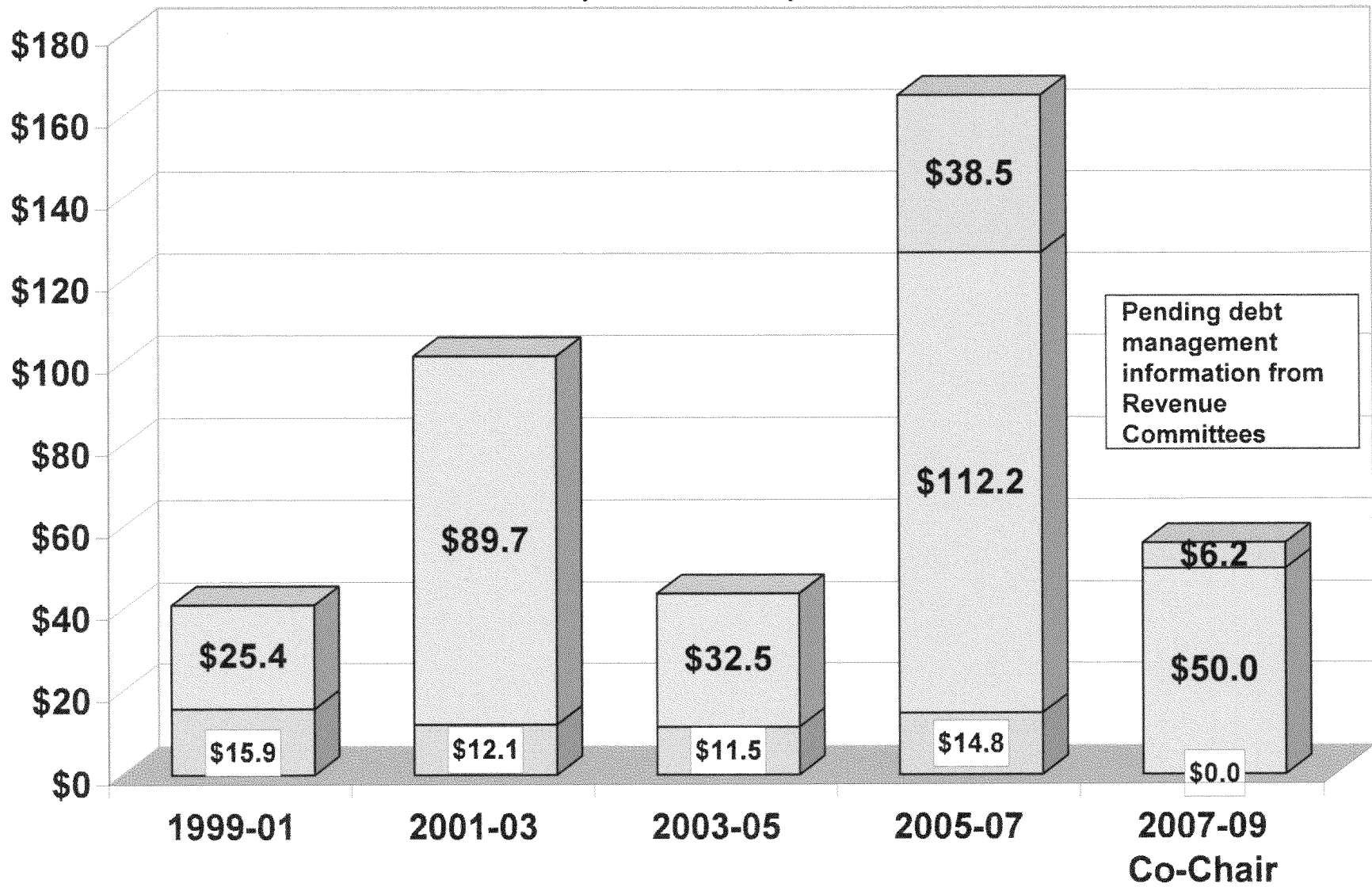
Highlights

- Clean government initiative and ethics reform
- Provide resources to help Oregon's seniors navigate prescription drug issues, especially Medicare Part D
- Enhance apprenticeship training coordination
- Ensure a reliable, secure IT infrastructure
- Audit outcomes, continuous improvement, and agency performance
- Other strategic investments

Total General Fund/Lottery Funds \$420.7

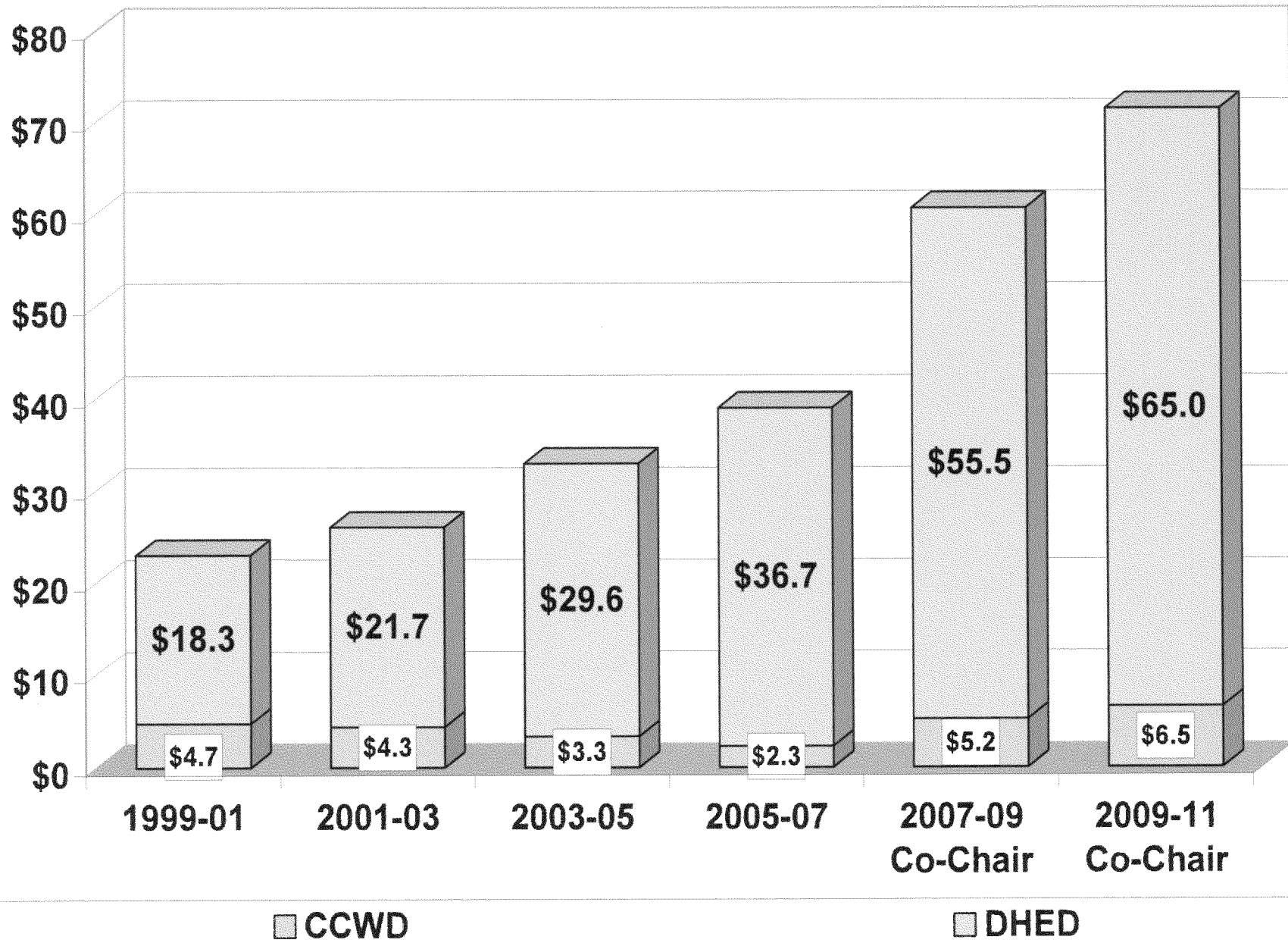


State-supported DHED/CCWD Capital Construction Budget (in millions)



General Fund State-paid Bonds (DHED) State-paid Bonds (CCWD)

State-paid DHED/CCWD Capital Construction Debt (in millions)



Other Issues

- Federal Budget and Policy Changes
 - Human Services
 - Technology
 - Local government
- Lawsuits and initiatives
- Revenues
 - Economic Volatility
 - Tobacco Taxes
 - Provider “Self” Taxes
 - Insurance Surcharge
 - Corporate Minimum
- Health care issues
 - Inflation
 - Demographics



Education Program Area Investments - Highlights
(in millions \$ GF/LF)

Agency	Description	Co-Chairs' Recommended Enhancements
Department of Education - State School Fund	K-12 - Increase over EBL (including Statewide Virtual School District and Mentoring)	196.0
	K-12 - School Improvement Fund Pilot	260.0
\$6,245.0 million GF/LF total		
Department of Education	Data integration project and Growth Model development/implementation	10.2
	Oregon Pre-K expansion	29.0
	Early Intervention/Early Childhood Special Education (EI/ECSE) caseload	3.0
\$371.1 million GF/LF total		
Community Colleges & Workforce Development	Community College Support Fund enhancement	30.0
	Integrated Management Information System - data system consolidation	1.7
\$468.6 million GF total		
Higher Education	Basic University Support	28.5
	Regional University Support	2.0
	Healthcare Initiative - Allied Health and Nursing Programs	7.4
	ETIC - increase in engineering programs	7.0
\$843.1 million GF/LF total		
Oregon Health & Sciences Univ.	MD class expansion from 108 to 120	4.1
	Nursing Program Partnerships Expansion (including BS, Master's, WOU)	5.6
	State student enrollment 75% in-state in MD program (from current 50-50)	1.2
\$86.6 million GF total		
Student Assistance Commission	Opportunity Grant Shared Responsibility Model	47.0
\$111.0 million GF/LF total		

Human Services Program Area Investments - Highlights

(in millions \$ GF/LF, except where OF noted)

Agency	Description	Co-Chairs' Recommended Enhancements
Dept. of Human Services		
Children, Adults & Families	Self Sufficiency/Substitute Care Health and Safety Initiatives	51.0
Seniors and People with Disabilities	Long Term Care Services to DD Clients - Equity rate increases for providers	20.0
	Program Support - Medicare Part D enrollment and quality of care in community-based facilities	2.3
	Extend Long Term Care provider tax (Other Funds)	40.4
	Continue Oregon Project Independence using property tax deferral account transfers (Other Funds)	12.0
Health Services	Community mental health programs	21.5
	OHP extends MCO and Hospital Provider Taxes expiring Jan. 2008 (Other Funds)	191.4
	CHIP Healthy Kids program/TURA (using increased cigarette tax; Other Funds)	62.0
\$3,308.0 million GF/LF - DHS Total		
Office of Private Health Partnerships	Healthy Kids program (using increased cigarette tax; Other Funds)	22.6
\$26.5 million GF total		
State Commission on Children and Families	Expanded programs for court appointed special advocates; Healthy Start; Relief Nurseries	4.6
\$54.7 million GF total		
Commission for the Blind		
\$1.6 million GF total		
Long Term Care Ombudsman		
\$0.8 million GF total		
Psychiatric Security Review Board		
\$1.0 million GF total		

Public Safety / Judicial Program Area Investments
(in millions \$ GF/LF, except where OF noted)

Agency	Description	Co-Chairs' Recommended Enhancements
Corrections	Mental Health Staffing/Services/A&D Compensation/Re-Entry Coordination	8.0
	Community Corrections	12.3
\$1,285.1 million GF total		
Oregon Youth Authority	Facility Program staffing safety and security/young women services/medical and pharmacy costs	2.7
	Community Program - juvenile crime prevention grants and provider rates	4.1
	Gang Prevention Grants	1.6
\$252.9 million GF total		
Oregon State Police	Essential patrol infrastructure adds evidence techs, field support, equipment	1.9
	Oregon Wireless Interoperability Network (OWIN) development	4.8
	Forensics Staffing and DNA backlog; infrastructure and field support	3.4
	100 new officers for patrol and drug interdiction	13.4
	46 existing troopers funded with GF rather than OF from auto insurance surcharge	6.3
\$222.3 million GF/LF total		
Department of Justice	Domestic and Sexual Violence services	1.0
	Victim Services compensation and Child Abuse Multidisciplinary Intervention (CFAA; Other Funds)	4.0
\$47.9 million GF total		
Criminal Justice Commission	Drug Court program	2.5
\$6.4 million GF total		
Military Department		
\$23.1 million GF total		
District Attorneys & Deputies		
\$9.2 million GF total		
Bd. of Parole & Post Prison Supervision		
\$3.7 million GF total		
Dept. of Public Safety Standards and Training		
\$11.3 million GF total		
Council on Court Procedures		
\$0.01 million GF total		
Judicial Department		
\$304.6 million GF total		
Public Defense Services Commission		
\$212.1 million GF total		
Commission on Judicial Fitness		
\$0.2 million GF total		

Transportation/Economic Development Program Area Investments - Highlights
(in millions \$ GF/LF, except where OF noted)

Agency	Description	Co-Chairs' Recommended Enhancements
Economic and Community Development Dept.	Oregon InC investment	19.0
	Workforce Investment - targeted training in industry clusters (LF)	5.0
	Small Business Services - restores base for minority, women, small bus dev center (LF)	4.3
	Arts, Culture, and Tourism (GF)	1.4
\$125.9 million GF/LF total		
Housing and Community Services	Affordable housing investment (GF and LF); additional OF assumed in initiative	11.7
	Oregon Food Bank network increased capacity	1.2
\$28.6 million GF/LF total		
Veterans' Affairs	County Veterans' Services Offices funding	2.7
	Emergency Assistance program	0.5
\$5.9 million GF total		
Consumer and Business Services	Senior Assistance for Medicare Part D (OF)	0.8
(no direct GF)		
Transportation	Connect Oregon II; \$100 million multi-modal investment (lottery-backed bonds)	5.5
	Commuter Light Rail; \$250 million (lottery-backed bonds; debt begins in 2009-11)	-
\$60.4 million GF/LF total		
Employment Department		
\$3.9 million GF total		
Bureau of Labor and Industries		
\$12.6 million GF total		
County Fairs		
\$3.5 million LF total		
OPB/Historical Society		
\$3.1 million GF/LF total		

Natural Resources Program Area Investments - Highlights
(in millions \$ GF/LF)

Agency	Description	Co-Chairs' Recommended Enhancements
Agriculture	Ag Development - developing renewable energy sources	0.5
	Natural Resources - fund shift from PCSRF to GF due to FF declines	2.0
	Natural Resources - CAFO - use GF instead of M66 LF	1.2
	\$30.7 million GF/LF total	
Environmental Quality	Air Quality program investments	4.0
	Water Quality program investments	2.4
	Water Quality fund shift from PCSRF to GF due to FF declines	0.9
	\$37.8 million GF/LF total	
Fish & Wildlife	Natural Prod - M66 operating LF for Lower Columbia Monitoring Program (16 positions)	1.4
	Natural Prod - fund shift from PCSRF to GF due to FF declines	3.8
	Habitat - fund shift from PCSRF to GF due to FF declines	0.5
	Coastal monitoring program	0.7
	\$24.5 million GF/LF total	
Forestry	Fire - Severity resources, insurance premium, system redesign	6.0
	\$47.1 million GF total	
Land Conservation & Development	Measure 37 claim processing and 30-Year Land Use Review	5.2
	\$16.0 million GF total	
Oregon Watershed Enhancement	Non-capital grant program (monitoring, watershed education, technical asst) (M66 LF)	4.0
	Non-capital grant program (split out Restoration and Protection Research Fund)	2.7
	Capital construction grants (M66 LF)	55.8
	Capital construction grants (M66 LF) - (split out Restoration and Protection Res. Fund)	4.8
	\$77.1 million LF total	
Parks & Recreation	Additional funding for Grants, Acquisition, and Recreation programs (M66 LF)	26.9
	\$98.9 million LF total	
Water Resources	Field Services restoration and Technical Services (measurement and supply)	1.6
	\$24.1 million GF total	
Columbia River Gorge Commission		
	\$1.0 million GF total	
Dept. of Energy		
	\$1.5 million GF total	
Dept. of Geology and Mineral Industries		
	\$3.2 million GF total	
Land Use Board of Appeals		
	\$1.4 million GF total	
Dept. of State Lands		
	\$0.2 million GF total	

General Government Program Area Investments - Highlights
(in millions \$ GF/LF)

Agency	Description	Co-Chairs' Recommended Enhancements
Dept. of Administrative Services	BM 37 claims processing costs	0.7
	Oregon Prescription Drug Program staff and related costs	0.7
\$10.1 million GF total*		
Dept. of Revenue	Verification of refundable credits eligibility staff	0.5
	Electronic document management system	0.8
\$148.6 million GF total		
Secretary of State	Voters' Pamphlet funding	1.2
\$11.8 million GF total		
Government Standards & Practices Commission	Implement ethics reforms	1.1
\$1.8 million GF total (including Emergency Fund)		
Emergency Fund	Continuous Improvement Projects	2.5
\$157.5 million GF total (including special purpose)		
Advocacy Commissions Office		
\$0.4 million GF total		
Employment Relations Board		
\$1.7 million GF total		
Office of Governor		
\$11.6 million GF/LF total		
State Library		
\$3.4 million GF total		
Legislative Branch		
\$68.9 million GF total		

* \$5.2 million LF in DAS shown in Transportation/Economic Development



MULTNOMAH COUNTY AGENDA PLACEMENT REQUEST (short form)

Board Clerk Use Only

Meeting Date: 03/22/07
Agenda Item #: B-2
Est. Start Time: 10:00 AM
Date Submitted: 03/14/07

Agenda Title: **Briefing on Oregon Older Adult Suicide Prevention Plan and Forums**

Note: If Ordinance, Resolution, Order or Proclamation, provide exact title. For all other submissions, provide a clearly written title.

Requested Meeting Date: March 22, 2007 Amount of Time Needed: 20 minutes
Department: Non-Departmental Division: Commissioner District 1
Contact(s): Matthew Lashua
Phone: 503 988-6796 Ext. 86796 I/O Address: 503/600
Commissioner Maria Rojo de Steffey, Mary Shortall – ADS; Lisa Millet – OR Dept of Human Services; and Paul Iarrobino - ADS
Presenter(s):

General Information

1. What action are you requesting from the Board?
Informational briefing only.
2. Please provide sufficient background information for the Board and the public to understand this issue. Please note which Program Offer this action affects and how it impacts the results.
See attached Oregon Older Adult Suicide *Prevention Plan*.
3. Explain the fiscal impact (current year and ongoing).
4. Explain any legal and/or policy issues involved.
5. Explain any citizen and/or other government participation that has or will take place.

Required Signature

**Elected Official or
Department/
Agency Director:**

Maria Rojo de Steffen

Date: 03/14/07

Oregon Older Adult Suicide *Prevention Plan*

A Call to Action

*For more information or to receive this plan
in an alternate format, please contact:*

Oregon Department of Human Services
Office of Disease Prevention and Epidemiology
Injury and Violence Prevention Program
800 NE Oregon Street, Suite 772
Portland, Oregon 97232

For more information contact: Lisa Millet, IVPP Manager
971-673-1111 or Lisa.M.Millet@state.or.us

Website: <http://oregon.gov/DHS/ph/ipe/esp/index.shtml>

This document was made possible in part, by grants from the Centers for Disease Control and Prevention, National Center for Injury Prevention and Control (U17/CCU05012) and (U17/CCU022393) and support from the Oregon Department of Human Services.

March 2006

Acknowledgements

Compiled and Written by the Injury and Violence Prevention Program (IVPP)
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800 NE Oregon Street, Suite 772
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Oregon Older Adult Suicide Prevention Advisory Work Group

Members of the workgroup assisted in the writing and development of the plan and engaged community partners in providing input at community forums.

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Governor's Committee on Senior
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Data for this plan were compiled from a number of published and unpublished sources. Many of these are available at the DHS website: www.healthoregon.org

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Oregon Older Adult Suicide Prevention Plan

Executive Summary

Suicide among older adults is a serious public health problem with over 5,000 older Americans dying by suicide annually. In 1999, the United States Surgeon General issued a National Call to Action to prevent suicide. Adults aged 65 and older are identified in this document as a priority for prevention.

National data from 2003 show that Oregon had the fourth highest suicide rate among older adults in the US. The problem is particularly acute among older males: in 2003 the rate among Oregon males (54.89 per 100,000) is nearly nine times higher than that among Oregon females (6.19 per 100,000).

Both nationally and in Oregon suicide rates are highest among older adults compared with any other age group. Currently about one in five suicides in Oregon occur among older adults,^a with an annual average of approximately 100 deaths. While Oregon has launched efforts to reduce suicides among youth, from 1999-2003 the suicide rates among adults aged 65 and older were three times higher than rates for those aged 10-24 (average rates of 27.12 vs. 8.49).

In the next three decades the aging of the "baby boomers" will cause the number of older adults in Oregon to double and the proportion of the population in this age group is expected to increase to 24%, which represents a 78% increase. As Oregon's population ages, the problem of suicide among older adults is likely to grow concomitantly, unless something is done to prevent these deaths.

Suicide can be understood as the result of the interplay of a complex set of factors that exist in individuals, relationships, communities and institutions, and society.¹ Although a wide range of factors contribute to the problem of older adult suicide, they fall into two main groups. The first group of factors is related to the provision of medical and behavioral health care to older adults, and includes such factors as: the prevalence of mood disorders in the older adult population, financial and logistical barriers to medical and behavioral care, lack of linkage between medical care and behavioral care services, and failure by clinicians to identify and treat mood disorders among older adults. The second group of factors is related to community attitudes and practices that affect suicidal behavior and engagement with clinical care, and includes such factors as: social isolation, lack of awareness about the problem of suicide, social stigma and misconceptions about suicide and behavioral health care, low rates of care-seeking by older males, the "ageist" belief that depression is an inevitable consequence of aging, and lack of community-based suicide prevention programs for older adults. Progress in addressing both of these groups of factors would be enhanced by improvements in public health surveillance of

^a Deaths that occur under Oregon's Death with Dignity Act by law are not classified as suicides, and are not addressed in this State Plan.

older adult suicides and suicidal behavior, research on new medical, behavioral health and community-based techniques to address this problem, and evaluation of existing efforts. Although many suicides are preventable, suicide prevention requires the implementation of a multifaceted approach. Just as there is no single cause of suicide, there is no single prevention activity that alone will reduce suicide. To be successful, prevention efforts must address factors at the individual, relationship, institutional, community and societal levels.

In 2003, with funding from the Centers for Disease Control and Prevention, the Injury and Violence Prevention Program within Oregon State Public Health convened a multidisciplinary workgroup to write a plan that could help coordinate and focus efforts to prevent suicide among older adults in Oregon. The workgroup used as its framework the National Strategy for Suicide Prevention,² Elder Specific Goals and Objectives developed by international consensus in 2002.³ The Centers for Disease Control and Prevention funded Oregon Violent Death Reporting System and Injury Surveillance Programs, that provided data on suicidal behavior among older adults. The workgroup reviewed data available from deaths, hospitalization, adult risk surveys and research literature,⁴ interviewed national and local experts, older adults, and medical and social service professionals, and then developed draft prevention concepts. The workgroup partnered with local hosts to conduct six community forums throughout the state to collect public input. Staff then took the information gathered through this process and the recommendations of the workgroup and wrote this plan.

This plan identifies three primary strategies to prevent suicide in older adults:

1. Clinically based suicide prevention.
2. Community-based suicide prevention.
3. Public health surveillance, program evaluation, and research.

For each of these strategies a list of objectives is included. Under each objective a variety of ideas for action are listed. While these lists of ideas for action are not exhaustive, the lists are included in order to help make the objectives more concrete for readers.

While this plan represents the hard work of many contributors, a plan itself will not save lives. The challenge for the future is to take this plan and use it to galvanize and guide action in Oregon to prevent older adult suicide.

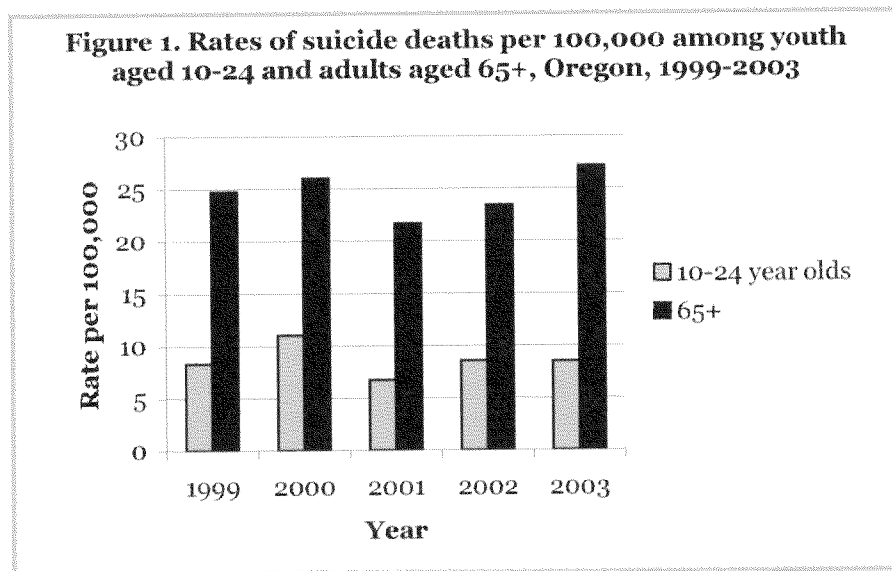
Oregon Older Adult Suicide Prevention Plan

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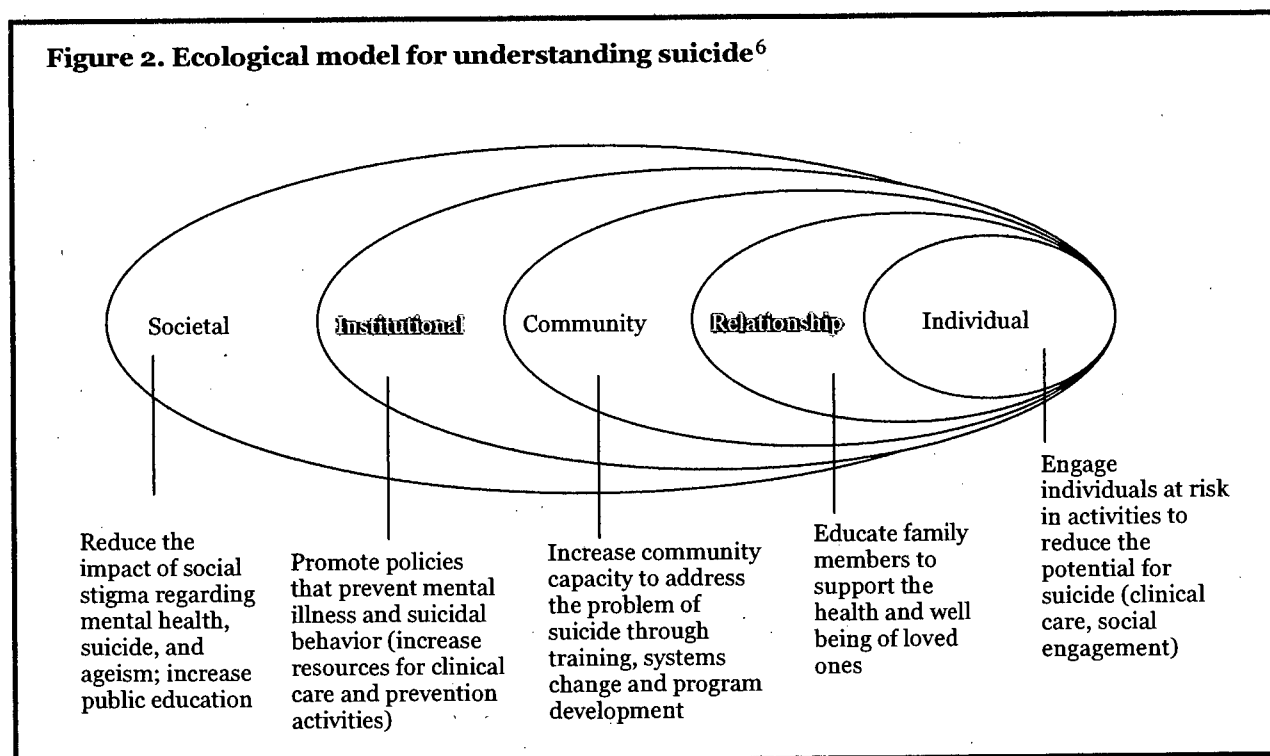
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^b Deaths that occur under Oregon’s Death with Dignity Act by law are not classified as suicides, and are not addressed

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*An Ecological Model for Prevention*⁵

Suicide can be understood to result from the interplay of a complex set of factors that exist in individuals, relationships, communities and institutions, and society (figure 2). Prevention activities should be implemented on each level.



Individual Level

Research has identified a number of individual risk and protective factors for suicide among older adults. Risk factors include such factors as:^{8, 9, 10}

- ♦ Depression
- ♦ Hopelessness
- ♦ Withdrawal
- ♦ Induced helplessness
- ♦ Institutionalization
- ♦ Organic mental deterioration
- ♦ Recent change in organization or complexity of behavior
- ♦ Decreased self-regard
- ♦ Access to lethal means
- ♦ Poor physical health
- ♦ Alcoholism or other substance abuse
- ♦ Expectation of death from some cause
- ♦ Changes in sleep patterns: severe nightmares
- ♦ Life lacks pleasure or purpose, a sense that life is meaningless

The success of recent suicide prevention efforts that increase social support and other positive variables underscores the usefulness of addressing individual-level protective factors as well.⁷

Individual protective factors include factors such as:⁸

- ♦ Effective coping skills
- ♦ Engagement in evidence based treatment for behavioral health problems
- ♦ Life satisfaction, existential & spiritual well-being, &/or belief that one can resolve problems & survive difficult periods

On the individual level, suicidal behaviors^c among older adults are different than behaviors among youth. Older people who initiate self-harming behavior are more likely to die as a result than younger people. Suicide among older people is often long-considered and planned rather than impulsive, and frequently involves highly lethal methods, such as firearms.⁹

Relationship Level

Relationships with peers, intimate partners, and family members can affect the risk for suicide. For older adults, social isolation, family discord, and the loss of relationships through death and divorce are important relationship-level risk factors. Bereavement is particularly important in the first year after a death. In addition, the attitudes and actions of peers, partners, and family members can influence the help-seeking behavior of those at risk for suicide.

Community and Institutional Level

Communities and their institutions provide a broader context of risk and protection. Educational systems, faith institutions, workplaces, healthcare systems, and social service systems all have characteristics that influence social connectedness, the availability and accessibility of health, behavioral health and social services, a sense of spiritual connection, and perceptions of safety in a community, which in turn affect the risk for suicide.

Gaps in our medical care system are particularly problematic with regard to limiting our ability to provide clinical suicide prevention services. Some of these gaps include:

- ♦ The nation needs 9,000 physicians qualified in geriatrics care to meet present needs,
- ♦ There are only five departments of geriatrics in the nation's 145 medical colleges,

^c Suicidal behavior includes thoughts about suicide, talking about suicide, and attempts to harm oneself.

- Only one percent of professionals in nursing, pharmacy and other allied health fields have training in geriatrics care,
- Only 720 of the nation's 200,000 pharmacists have geriatric certifications even though most prescription and over the counter drug consumers are over the age of 65,
- Geriatricians comprise only 0.5 percent of all medical educators in the U.S.,
- Reimbursement rates for Medicare continue to decline and physicians are reducing care or not providing care for Medicare patients.¹⁰

Societal Level

Societal factors also influence the rate of suicide. Cultural norms that accept depression and suicide as inevitable for older adults, and social stigma regarding behavioral health problems and suicide are examples of societal level factors that contribute to suicide death rates.

On the societal level, ageism prevents appropriate identification and treatment of depression among older adults.¹¹ Contrary to popular belief, poor health, depression, and suicidal thoughts are not the inevitable consequences of aging. Negative stereotypes, attitudes and assumptions about older adults are a result of ageism in our society. Ageism can be defined as any prejudice or discrimination against or in favor of an age group.¹² Ageism affects our willingness as a society to address the needs of older adults, including the need to address the factors related to suicide.

Prevention Approaches

Because of the complexity of suicide, there is no single program or strategy that will prevent these deaths. No one component of service delivery has been shown to be effective when implemented as a stand-alone strategy. To be most powerful, multiple prevention strategies should be implemented in a coordinated way on the individual, family, community and societal levels.

Some prevention practices should be implemented universally for the entire population, others known as selected interventions should be implemented with populations considered to be at heightened risk for suicide, and indicated interventions are approaches for use with those individuals who have already demonstrated self-harming behavior (see Appendix B).

The research to determine evidence-based practice for suicide prevention is in its infancy. Therefore this plan contains a few evidence-based strategies, and a great deal more of what are termed "best practices" or "promising strategies." The World Health Organization's *World Report on Violence and Health* and the Department of U.S. Department of Health and Human Service's *National Strategy for Suicide Prevention: Goals and Objectives for Action* call on states and communities to invest in evidence-based practice and to implement and test what are thought to be best practice and promising strategies. All of these prevention activities should be evaluated and monitored carefully.

How This Plan Was Developed

In 2003, with funding from the Centers for Disease Control and Prevention, the Injury Prevention and Epidemiology Section within Oregon State Public Health convened a multidisciplinary workgroup to write a plan that could help coordinate and focus efforts to

prevent suicide among older adults in Oregon. The Centers for Disease Control and Prevention funded Oregon Violent Death Reporting System and Injury Surveillance Programs, that provided data on suicidal behavior among older adults. The workgroup used as its framework the National Strategy for Suicide Prevention,¹³ Elder Specific Goals and Objectives developed by international consensus in 2002.¹⁴ The workgroup reviewed data available from deaths, hospitalization, adult risk surveys and research literature,¹⁵ interviewed national and local experts, older adults, and medical and social service professionals, and then developed draft prevention concepts. The workgroup partnered with local hosts to conduct six community forums around the state to collect public input on prevention concepts. Staff then took the information gathered through this process and the recommendations of the workgroup and wrote this plan.

Contents of This Plan

This plan identifies three primary strategies to prevent suicide in older adults:

1. Clinically based suicide prevention.
2. Community-based suicide prevention.
3. Public health surveillance, program evaluation, and research.

For each of these strategies a list of objectives is included. Under each objective a variety of ideas for action are listed. While these lists of ideas for action are not exhaustive, the lists are included in order to help make the objectives more concrete for readers.

While this plan represents the hard work of many contributors, a plan itself will not save lives. The challenge for the future is to take this plan and use it to galvanize and guide action in Oregon to prevent older adult suicide.

Suicide Prevention Strategies

Strategy One: Clinically-based suicide prevention

Rationale and Implementation Considerations:

- ♦ Nationally, more than two-thirds of older adults who died by suicide had seen a primary care physician within the previous month.¹⁶ In Oregon, 93% of older adults who died by suicide in 2004 had a chronic illness.¹⁷ Screening, assessment, treatment and referral in the primary care setting can provide important opportunities to prevent suicide in older adults.
- ♦ When suicidal adults are seen in primary care, depression and suicidal thought often are not identified. It has been estimated that 15% of adults over age 65 suffer from persistent and serious symptoms of depression but only 3% are given the clinical diagnosis of depression.¹⁸ Between 63% and 90% of depressed older adults go untreated or receive inadequate treatment. Several studies have shown that many physicians are not adequately trained about the importance of screening older adults for depression and suicidality.¹⁹
- ♦ While this plan is focused on preventing suicide, treating depression also has other health benefits. Depression is associated with increasing mortality from a number of other diseases, such as cancer and heart disease. Depressed adults often have more difficulty attending to self-management of chronic diseases, such as diabetes, which can have a devastating impact on health. Even mild depression, if it goes on long enough, can weaken the immune system of older adults.²⁰
- ♦ Even when health care providers recognize depression and suicidality in patients they may be less willing to treat an older adult patient.²¹ In one study, 75% of physicians were found to believe that depression in older persons is a “normal facet of old age.”²²
- ♦ Although integration of primary medical care with behavioral health care has been shown to improve patient outcomes,²³ there is substantial variability in implementation of this approach across Oregon.
- ♦ Key informant interviews indicated that there are currently not enough behavioral health resources to meet the demand for services among older adults. This is occurring just as the leading edge of the baby boom generation is approaching the age of 60. In 1995 older adults comprised 14 percent of Oregon’s population. By 2025 that percentage is expected to increase to 24 percent.²⁴ Training primary care providers in behavioral health, and integrating primary medical care and behavioral health care can help address this gap in resources.
- ♦ Cultural differences between urban and rural areas, and between different racial and ethnic groups require culturally and linguistically competent approaches to care in order to be successful.
- ♦ Affordability is a barrier to seeking services, particularly for older adults who are more likely to be on a fixed income. Health insurance coverage often is not adequate to cover the necessary behavioral health care.
- ♦ Distance to services and travel requirements create barriers to care throughout Oregon’s rural areas, particularly for specialty care.
- ♦ When primary care providers make a referral for behavioral health care the referrals are often unsuccessful because fewer older adults use behavioral health services than people of other ages. Older adults may be more likely to associate a stigma with behavioral

health services, see their problems as being physical rather than psychological, and be unaware of the existence of outpatient therapy.²⁵

Objective 1.0: Increase the confidence and competence of primary care providers and other clinicians to identify, assess, and treat older adult suicidal behavior and depression.

Ideas for Action:

- ♦ Disseminate screening and assessment tools for depression, suicidality, and substance abuse, particularly to primary care providers.
- ♦ Train primary care providers to use screening tools.
- ♦ Train primary care providers in culturally competent care.
- ♦ Increase the proportion of educational programs in undergraduate, graduate, and continuing education in relevant professions (medicine, nursing, allied health, psychology, social work, etc.) that include training in the identification, assessment and management of suicide risk in older adults.
- ♦ Increase the number of recertification or licensing programs in relevant professions that require competency in late life depression assessment and management and in prevention of suicide in later life.
- ♦ Implement evidence-based models of primary care/behavioral health integration.
- ♦ Improve cross system referrals to assure the continuity of care for older adults at risk for suicidal behavior.

Objective 1.1: Improve the availability of medical and behavioral health care providers trained in geriatrics.

Ideas for Action:

- ♦ Develop policies and programs to help recruit physicians, nurses, and physician's assistants into geriatric specialties.

Objective 1.2: Reduce financial barriers to medical and behavioral care for older adults.

Ideas for Action:

- ♦ Increase financial resources for primary care and behavioral health services.
- ♦ Ensure parity of behavioral health with physical health care coverage.

Objective 1.2: Institute clinical outreach programs to older adults.

Ideas for Action:

- ♦ Enhance telehealth links for rural areas.
- ♦ Strengthen and expand services in rural areas through close cooperation and coordination among agencies, including those that serve members of Tribes.
- ♦ Enlist Parish Nurses and Home Visiting Nurses to screen older adults and help connect them with clinical resources.
- ♦ Increase the proportion of counties with primary care and/or social service outreach programs for at-risk populations that incorporate behavioral health services.

Strategy Two: Community-based suicide prevention

Rationale and Implementation Considerations:

- ♦ Programs that reduce certain risk factors such as depression, social isolation, loss of spouse or partner, access to lethal means,²⁶ alcoholism, and poor physical health and

increase protective factors such as social support, coping skills, and outreach can reduce suicide deaths.^{27, 28}

- Implementing evidence-based practice should be the first priority. However, since the field of suicide prevention is in its infancy, implementing and evaluating the benefits of “best practice” and “promising” strategies should be done.
- Programs should be sensitive and culturally competent in order to best address the needs of older adults. Older adults should be involved in all levels of program planning.²⁹
- Among older adults, social stigma and shame often prevent open discussion about mental illness and suicide.³⁰ Families conceal suicidal behavior and mental illness to avoid shame or embarrassment, or to avoid the societal perception that they are to blame. Many professionals have difficulty talking with older adults about health-related risk factors for suicide or suicidal ideation, or aren't sure how to address shame and stigma among their patients and staff. Because stigma affects both professionals and their patients or clients and families, attempts to reduce prejudice and stigma must involve all elements of the community.³¹
- The media can help enhance public awareness. Media guidelines for appropriate reporting of suicide can (a) help reduce the stigma of suicidal behaviors and the use of behavioral health services, (b) build awareness of the issue and its risk factors, and (c) provide information on how to access help when needed.^{32, 33, 34}
- Ageism has significant negative impacts on individuals, how systems of care function, and how society treats older adults. On the individual level ageism lowers feelings of self-efficacy and the isolating experience of marginalization. The experience of ageism and institutional results of ageism can contribute to premature loss of independence, increased mortality, disability, depression, and suicide among older adults who might otherwise lead healthy lives. On the societal level media, films, and advertisements create and perpetuate negative attitudes toward older adults.
- A broad base of support that crosses disciplines is necessary for the success of a suicide prevention initiative.³⁵ Community-based prevention activities are more likely to be effective when they involve a mixture of governmental and non-governmental groups and community members.
- Funding and in-kind resources are necessary to implement community-based programs.

Objective 2.0: Develop state and local partnerships and the resources to support those partnerships.

Ideas for Action:

- Build new or expand existing local older adult coalitions to promote suicide prevention and mobilize organizations engage in prevention.
- Mobilize statewide organizations including commissions, associations, businesses, faith communities, and governmental offices to implement provisions of this Plan.
- Promote public policies that will reduce the risk of suicide among older adults.
- Increase the number of counties that integrate late life suicide prevention strategies into their county mental health plans that (a) coordinate across county agencies, (b) involve the private sector, and (c) implement and evaluate prevention strategies.
- Increase the number of county multidisciplinary teams that provide assessment and intervention for psychological, physical and social problems.
- Work with local, state and federal governments, non-profit organizations and foundations to secure resources for suicide prevention.

Objective 2.1: Increase awareness that suicide is preventable and reduce the stigma associated with aging and the use of treatment services.

Ideas for Action:

- ♦ Conduct a coordinated public education campaign.
- ♦ Create suicide awareness materials and presentations for use by community organizations and the faith community.
- ♦ Implement late life suicide prevention education into the programs and activities of state, professional, social, fraternal, faith based and other groups.
- ♦ Educate legislators and other policy makers about older adult suicide prevention.
- ♦ Educate the professional community about older adult behavioral health issues and suicide.
- ♦ Integrate education on behavioral health, aging and suicide prevention into health curriculum in middle and high schools and colleges.

Objective 2.2: Improve reporting of suicides and behavioral health issues in the media.

Ideas for Action:

- ♦ Provide Centers for Disease Control and Prevention and American Foundation for Suicide Prevention reporting guidelines to media representatives.
- ♦ Provide reporting guidelines to key partners in suicide prevention, such as mental health professionals, aging services workers, community leaders, and advocates.
- ♦ Establish a citizen's group to monitor local media reporting of suicide and behavioral health issues.
- ♦ Update, repeat, and reinforce media guidelines regularly to ensure that both new and experienced editors stay informed.
- ♦ Disseminate information on older adult mental health and suicide to local media outlets.

Objective 2.3: Provide suicide intervention skills training for community members.

Ideas for Action:

- ♦ Train individuals to teach suicide intervention skills to community members, professionals, and first responders in Oregon.
- ♦ Provide ongoing technical assistance to trainers.

Objective 2.4: Reduce social isolation and increase a sense of social support among older adults.

Ideas for Action:

- ♦ Educate older adults, families, and other community members about the importance of social connection to a sense of well-being.
- ♦ Increase outreach and home visits to isolated older adults.
- ♦ Develop telephone support, help, and assessment intervention for older adults.
- ♦ Publicize crisis line services among older adults.
- ♦ Publish crisis line numbers in local phone books.
- ♦ Establish bereavement support in communities for older adults.
- ♦ Expand peer-counseling programs to include bereavement support skills.

Objective 2.5: Enhance the abilities of older adults to cope with difficult challenges.

Ideas for Action:

- ♦ Increase access to home care, rehabilitation services, and pain management.
- ♦ Focus medical and social services on reducing disability and enhancing independent functioning.

Objective 2.6: Reduce access to lethal means among older adults at-risk for suicide.

Ideas for Action:

- ♦ Increase the proportion of primary care clinicians and other clinicians who routinely assess the presence of lethal means such as firearms, medications, and poisons in the homes of suicidal older adults.
- ♦ Educate older adults and their families about actions needed to reduce the risks associated with access to lethal means.
- ♦ Work with Oregon Gun Owner's Association to develop suicide prevention information for gun owners and provide materials to customers.
- ♦ Develop and implement guidelines for pharmacists, hospitals, and ambulatory care clinics for safer dispensing of medications for older adults at high risk of suicide.

Objective 2.7: Subvert negative societal stereotypes about aging. Expand the societal definition of retirement to include an understanding of the value of older adults as role models, wisdom-keepers, mentors, and living historians.

Ideas for Action

- ♦ Conduct "introduction to aging" workshops for journalists.
- ♦ Conduct reading and discussion groups with children with material that uses images of active, healthy older adults.
- ♦ Establish connections for children with active older adults that include opportunities for sharing stories, mentorship, physical activity, and learning.
- ♦ Set up volunteer programs that recruit older adults as role models that can share their knowledge and experience through activities such as: para-educator opportunities in schools, public speakers bureau for presentations at colleges, and mentoring programs for young professionals. Emphasize strategies that maintain bonding between generations.

Objective 2.8: Develop public policy to assure that older adults have increased opportunities to engage in society in the fullest way.

Ideas for Action:

- ♦ Establish a task force to investigate and promote recommendations to reduce social, healthcare, and market discrimination against older adults.
- ♦ Establish a task force to evaluate building, transportation and other built environment codes and regulations, and promote recommendations for changes in regulation, rules, development practices, community input, design, and public policy that will better meet the needs of older adults.

Strategy 3: Public health surveillance, program evaluation, and research

Rationale and Implementation Considerations:

- ♦ Data from public health surveillance about suicides in older adults, including associated circumstances and risk factors, provide the foundation necessary to promote evidence-based policy development, program development and evaluation.
- ♦ Currently our knowledge about the effectiveness of suicide prevention programs is extremely limited. Program evaluation should be incorporated into every prevention activity so that we can learn what works and how to most efficiently use and effectively advocate for prevention resources.
- ♦ Research to guide the development of new prevention approaches also is needed. Encouraging relationships among Oregon researchers and between researchers and prevention practitioners can help to encourage research in this area and ensure that research is relevant to practice.

Objective 3.0: Enhance public health surveillance systems to capture more detailed information on suicide events, victims and survivors.

Ideas for Action:

- ♦ Improve the capacity of existing injury surveillance systems, such as Oregon's Violent Death Reporting System and the Behavioral Risk Factor Surveillance System, to capture information about suicides in older adults.
- ♦ Expand the Adolescent Suicide Attempt Data System to include adults.
- ♦ Evaluate surveillance systems with information about suicides to determine the quality of data and additional data needs, and implement the results of that evaluation.

Objective 3.1: Encourage evaluations of suicide prevention programs implemented in Oregon.

Ideas for Action:

- ♦ Increase the number of prevention efforts that have an evaluation component.
- ♦ Provide technical assistance and guidance about evaluation to program programs.
- ♦ Develop and disseminate written reports summarizing evaluation findings.

Objective 3.2: Improve research-based knowledge about late life suicide and suicide prevention practice.

Ideas for Action

- ♦ Develop a state agenda for research on suicide among older adults.
- ♦ Create an older adult suicide researchers' network.

Conclusions:

While this plan represents the hard work of many contributors, a plan itself will not save lives. The challenge for the future is to take this plan and use it to galvanize and guide action in Oregon to prevent older adult suicide.

Appendix A

The Epidemiology of Suicide Among the Older Adults in Oregon

Epidemiologic study of suicide, non-fatal suicidal behavior and suicide risk among older adults can assist the state and communities to gauge the magnitude and scope of the problem of suicide among older adults. Oregon's public health surveillance activities can provide communities and the state a valuable resource that can be used to increase awareness of the problem, identify problems, target populations for intervention, identify interventions to address problems, measure progress, and inform public policy.

Data sources for epidemiologic investigation include: the Oregon Violent Death Data System (includes: medical examiner reports, police reports, death certificates), the Oregon Hospital Discharge Index, the Oregon Behavioral Risk Factor Surveillance System, and the WISQARS data base at the Centers for Disease Control and Prevention. This profile of suicide deaths among older adults includes data from all of these sources.

Older Adult Suicide Rate in Oregon and the US

Suicide is the second leading cause of injury death and the eight leading cause of death overall among Oregon's older adult population. Each year approximately 100 of Oregon's older adults are victims of a suicide death. Approximately 1 in 5 of all reported suicides in Oregon occur among older adults. In 2003, individuals over the age of 65 comprised 13% of the state's population but accounted for 22% of the total suicides.

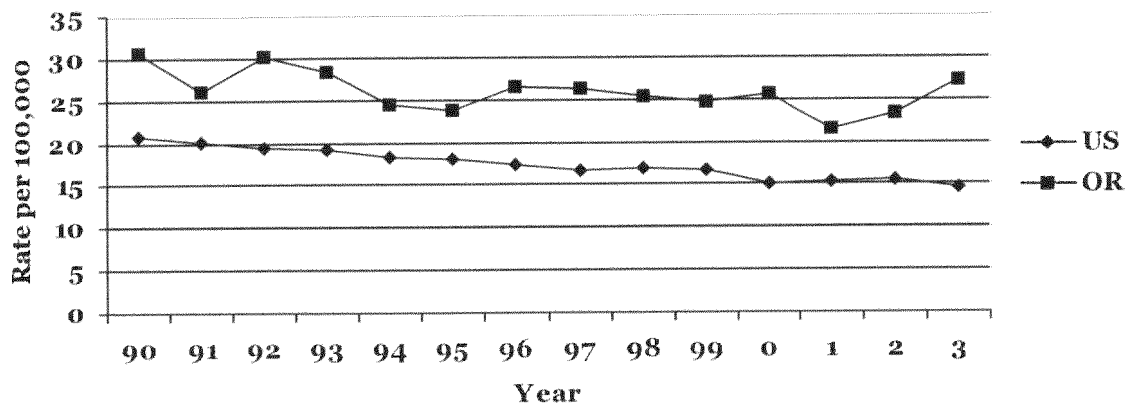
Oregon's older adult suicide rate has been higher than the national death rate for over a decade. In 2003, Oregon had the fourth highest older adult suicide rate in the country (behind Nevada, Wyoming and Alaska). The state rate was 27.12 per 100,000 compared to 14.61 per 100,000 for the nation. Death rates in the nation and in Oregon have been stable, with a slight decrease between 1990 and 2003 (see figure 1).

Table 1. Suicide deaths and death rates per 100,000 among adults aged 65+, by age, gender, and mechanism, OR, 1999-2003, n=546

		Total	65-74	75-84	85+
All Suicide	Both Sexes	546 (24.61)	205 (18.66)	237 (29.02)	104 (34.23)
	Male	472 (49.80)	175 (34.25)	209 (61.73)	88 (89.42)
	Female	74 (5.82)	30 (5.11)	28 (5.86)	16 (7.79)
Poisoning	Both Sexes	46 (2.07)	19 (1.73)	19 (2.33)	8 (2.63)
	Male	25 (2.64)	14 (2.74)	7 (2.07)	4 (4.06)
	Female	21 (1.65)	5 (0.85)	12 (2.51)	4 (1.95)
Hanging /suffocation	Both Sexes	43 (1.94)	12 (1.09)	16 (1.96)	15 (4.94)
	Male	29 (3.06)	8 (1.59)	14 (4.13)	7 (7.11)
	Female	14 (1.10)	4 (0.68)	2 (0.42)	8 (3.89)
Firearm	Both Sexes	434 (19.56)	163 (14.84)	193 (23.63)	78 (25.67)
	Male	403 (42.52)	147 (28.77)	180 (53.16)	76 (77.23)
	Female	31 (2.44)	16 (2.72)	13 (2.72)	2 (0.97)

Source: Oregon Vital Statistics, 1990-2003, CDC WISQARS, 1999-2003

Figure 1. Suicide rates among individuals aged 65+, US and OR, 1990-2003



Source: Oregon Vital Statistics, 1990-2003, CDC WISQUARS, 1999-2003

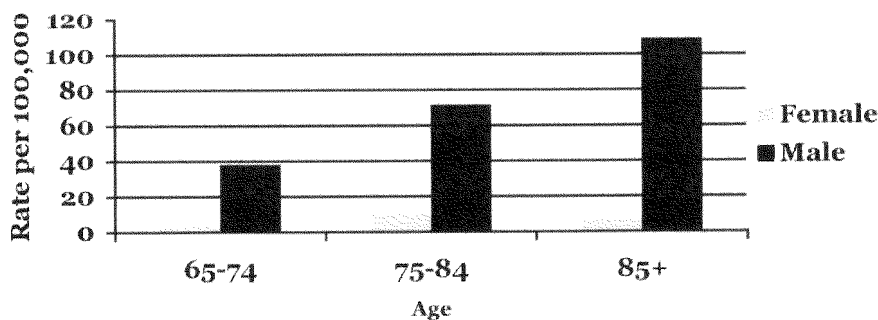
Age, Gender and Race

There is variation in suicide rates in the age groups after the age of 65. Suicide rates increase dramatically after the age of 65 (figure 2).

Eighty-six percent of the victims were males and the rate for males was nearly nine times higher than the rate for females (52 per 100,000 vs. 6 per 100,000, respectively). Sixty-three percent of the victims were over the age of 74. In 2003, the suicide rate was 38 per 100,000 among males aged 65-74 and increased to 109 per 100,000 by age 85.

Whites, particularly white males, were over-represented in the suicide data (see figure 2). Ninety-nine percent of the victims were white, 87% of them were white males. The rate for white males began to rise significantly around age 65 and peaked around age 85.

Figure 2. Suicide rates by age group and gender, OR, 2003 n=122



Source: Oregon Vital Statistics, 2003

Mechanisms of Death

Death certificates indicate that firearms were the mechanism of death in the majority of cases among male and female suicide victims. Overall, in 2003, firearms were the mechanism of death for 79% of suicide victims, among 85% of male victims and 41% of female victims. Other mechanisms of death included poisoning (9%) and suffocation (8%).

Depressed Mood and Treatment

According to the Oregon Violent Death Reporting System that collects detailed circumstantial data on suicide deaths, in 2003, 50% of male and 61% of female suicide victims were reported to have a current depressed mood. Investigations also report on current treatment or lack of current treatment for this problem. Among older adult suicide victims 20% of males and 54% of females were reported to be currently depressed and currently in treatment for depression.

Data on depression are limited by the fact that it is not systematically noted in death investigations of suicides. In addition, it may be difficult to ascertain whether or not depression was present for socially isolated decedents. For these reasons the prevalence of depressed mood noted here is probably under-estimated.

Physical Health Problems and Risk ^c

Thirty-six percent of suicide victims were reported to have visited a physician in the last 30 days prior to their death. Seventy-six percent of male suicide victims and seventy-two percent of female victims were reported to have some physical health problem. The most common illnesses reported:

- ♦ 23% had heart disease;
- ♦ 19% had cancer;
- ♦ 18 % had chronic respiratory disease;
- ♦ 10% had stroke; and
- ♦ 6% had diabetes.

Declining health was reported among 58% of the suicide victims. In addition, 36% had a loss of autonomy or independence related to health status, and 25% suffered from chronic pain.

Social Isolation^d

Social isolation and failed or lack of marital or co-habiting partnerships are thought to be important risk factors. Table 1 illustrates the marital status of male and female suicide victims as compared to older adults dying of all causes in Oregon between 1999 and 2003.

^c Oregon Violent Death Reporting System, 2003

^d Oregon Violent Death Reporting System, 2003

Table 2. Marital status at time of death among older adult suicides and older adults who died of all causes, by gender, OR, 1999-2003

Marital Status	Males		Females	
	Suicide Victims	All Causes	Suicide Victims	All Causes
Married	47%	60%	26%	22%
Divorced	16%	11%	27%	11%
Widowed	30%	26%	44%	64%
Single, never married	6%	4%	3%	3%

Source: Oregon Vital Statistics

The proportion of divorced individuals among suicide victims is much higher among women and slightly higher among men when compared to deaths by all causes. The proportion of married individuals is much lower among male suicide victims, generally because females live longer than their male partners. Twenty-six percent of male suicide victims and 41% of female suicide victims were reported to be living alone or in isolation at the time of death.

Precipitating Events²

Acute crises are not thought to be the underlying cause of many suicides among older adults as most suicides among this age group are not the result of impulsiveness. However, when acute crises occur among those who are predisposed toward suicide, these acute crises can alert clinicians, family and friends of the need to take immediate action to prevent a suicide. In 2003 53% of male suicide victims and 18% of female suicide victims had experienced a crisis. Crises identified included:

- ♦ Loss of a spouse or friend who is the last of a dwindling peer group,
- ♦ Financial crisis related to costs of medical care
- ♦ Ability to maintain independent living,
- ♦ Diagnosis of a new serious illness, and
- ♦ Move to a new living situation or need to transition to supervised care in the last two weeks prior to death.

In the literature, recent loss of a spouse is identified as a risk factor and as a precipitating event preceding an older adult suicide. The recent death of a spouse occurred only among 5% of older male suicide victims and 12% of older female suicide victims in Oregon. Deaths of a family member or a friend similarly occurred in only a minority of cases (9% of suicides among males and 12% of suicides among females).

Alcohol and Other Substance Abuse²

The role of alcohol and drugs in suicide is not clearly understood. Alcohol and drugs can be the mechanism of death, they can contribute to reducing inhibitions, they can be used as self-medication, and any combination thereof. Alcohol and/or other substance abuse were found in a minority of cases. Although alcohol use and dependence is probably under-reported, alcohol intoxication was suspected at the death scene in only 11% of cases, and only 8% of victims tested positive for blood alcohol. There were no reports of other substance abuse among older adult suicide victims.

Nonfatal Attempts^e

Two-hundred-fifty-two nonfatal suicide attempts among older adults were identified in Oregon's 1998–2002 hospital discharge databases. The majority of hospitalizations (51%) occurred among individuals aged 75 years and older. Sixty-five percent of cases were females and 35% were males. Inpatient treatment costs exceeded 2.6 million dollars.

While rates of suicide death are much higher among older adults than youth aged 10–24, the numbers of hospitalization among older adults is lower (Table 3).

Table 3. Comparison of suicide attempt hospitalization among youth and older adults, OR, 1998–2002

Age Group	Males	Females
10–24	647 (31%)	1425 (69%)
65+	88 (35%)	164 (65%)

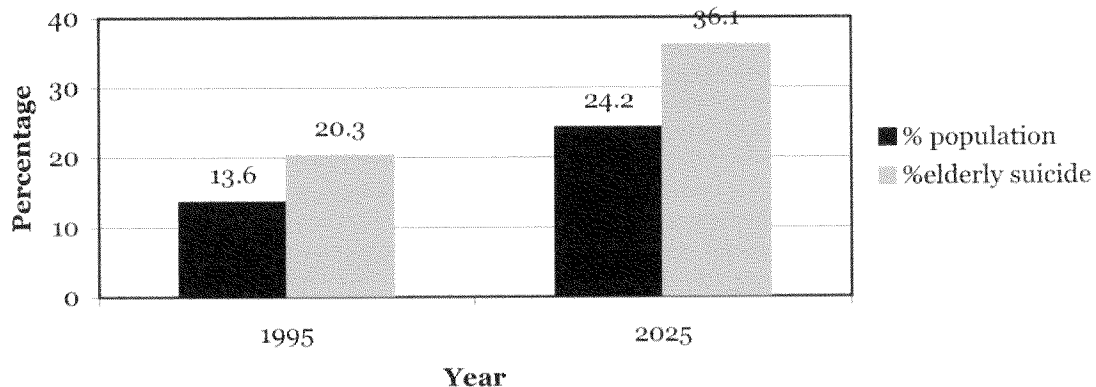
Source: Oregon Hospital Discharge Index

Among older adults who were hospitalized after a suicide attempt, poisoning was the mechanism of injury in 87% of cases. Other mechanisms of injury included: cutting and piercing (8%), and firearms (4%). The average length of stay among older adults was 3.5 days.

Projections

According to the US Census Bureau, Oregon's older adult population will double during the next three decades. By 2025, Oregon will have the 4th highest proportion of older adult residents in the nation (1). In 1995, older adults represented 13.6% of Oregon's total population. By 2025, that percentage is expected to increase to 24.2% (see figure 3). If the rate of older adult suicide remains the same as the proportion of the older adult population increase, Oregon will see 78% more deaths by suicide in 2025.

Figure 3. Current and projected older adult population and suicides, OR, 1995 and 2025



Source: Oregon Vital Statistics and Portland State Center for Population Statistics

^e Oregon Hospital Discharge Index, 1998–2002

Risk Behavior^f

The Oregon Behavioral Risk Factor Surveillance System collects data on a number of factors known to put older adults at increased risk for suicide. Responses below are a number of risk categories, questions, and percentage of older adults (65+) responding to questions in the survey. Complete survey questions and responses can be found on the web at:

<http://www.oregon.gov/DHS/ph/chs/brfs/brfss.shtml>

Table 4. Risk factors for suicide among older adults measured in Oregon BRFSS, 2003 and 2004

Risk Factor	% 65 & older reporting
<i>Social support:</i>	
I rarely or never get the social support that I need	10%
I would like to be doing more social activity	27%
No social activity w/ friends, family, neighbors in past 2 weeks	5%
<i>Life satisfaction:</i> "I am dissatisfied or very dissatisfied with my life	4%
<i>Autonomy/independence:</i> # days in past 30 that poor physical or mental health kept you from doing usual activities such as self-care, work, or recreation	
1-14 days	23%
15-29 days	7%
30+ days	7%
"I need help with personal care needs" (eating, bathing, dressing)	10%
"I need help with activities" (chores, shopping, business, travel)	31%
"I am limited due to physical, mental, or emotional problems"	34%
"I consider myself disabled"	21%
Trouble learning, remembering or concentrating due to health	17%
<i>Physical health:</i> Been told by a doctor you have arthritis, heart disease and/or diabetes	84%
Mental health & alcohol abuse: Number of days in past 30 days mental health not good	
1-14 days	12%
15-29 days	2%
30+ days	3%
5 or more alcoholic drinks on 1 or more occasions in past 30 days	5%
<i>Access to lethal means:</i> Firearms in the home	
Males	55%
Females	25%
<i>Hunger:</i> Oregon older adults living in food insecure households	6%
<i>Veteran Status:</i> Oregon older adults receiving some or all of medical care from VA facilities	
Served in military	35%

^f Oregon Behavioral Risk Factor Surveillance System, data from questions in years, 2002, 2003, 2004. Note: The objective of the BRFSS is to collect uniform on preventive health practices and risk behaviors that are linked to chronic diseases, injuries, and preventable infectious diseases in the adult population. Data are collected from a random sample of adults (one per household) through a telephone survey.

APPENDIX B

THE LANGUAGE OF PREVENTION SCIENCE APPLIED TO SUICIDE AND ATTEMPTED SUICIDE IN LATER LIFE

Intervention Terminology	Approach	Target	Objectives	Examples of Possible Prevention Efforts
Universal Prevention	Population	Entire population, not identified based on individual risk.	Implement broadly directed initiatives to prevent suicide-related morbidity and mortality through reducing risk and enhancing protective factors.	1) Education of the general public, clergy, the media, and health care providers concerning <ul style="list-style-type: none"> ▪ normal aging ▪ ageism and stigma re: mental illness ▪ pain and disability management ▪ depression ▪ suicidal behaviors
Selective Prevention	Population High Risk	Asymptomatic or pre-symptomatic individuals or subgroups with distal risk factors for suicide, or who have a higher-than-average risk of developing mental disorders or other more “proximal” risk factors.	Prevent suicide-related morbidity and mortality through addressing specific characteristics that place elders at risk.	1) Promote church-based and community programs to contact and support isolated elders 2) Focus medical and social services on reducing disability and enhancing independent functioning 3) Increase access to home care and rehabilitation services 4) Improve access to pain management and palliative care services 5) Treat elders with chronic pain syndromes more effectively

Intervention Terminology	Approach	Target	Objectives	Examples of Possible Prevention Efforts
Indicated Prevention	High Risk	Individuals with detectable symptoms and/or other proximal risk factors for suicide.	Treat individuals with precursor signs and symptoms to prevent development of disorder or the expression of suicidal behavior.	<ol style="list-style-type: none"> 1) Train gatekeepers in recognition of symptomatic and at-risk elders 2) Link outreach and gatekeeper services to comprehensive evaluation and health management services in a continuum of care 3) Implement strategies to provide more accessible, acceptable, and affordable mental health care to elders 4) Increase screening/evaluation/referral/treatment in primary care settings for elders with depression, anxiety, and substance misuse 5) Improve providers' assessment and restriction of access to lethal means

©Yeates Conwell, MD University of Rochester Center for the Study and Prevention of Suicide (8/21/02)

Appendix C

Key Contacts and Resources

Oregon State Government

Department of Human Services:

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Injury and Violence Prevention Program

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<http://www.oregon.gov/DHS/aboutdhs/structure/spd.shtml>

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<http://www.oregon.gov/DHS/ph/hpcdp/index.shtml>

Office of Mental Health and Addiction Services

2575 Bittern N.E., Salem 97309

Sandra Moreland, PhD, Older Adult Services Coordinator

(503) 945-9715

Sandra.Moreland@state.or.us

<http://www.oregon.gov/DHS/mentalhealth/index.shtml>

Gero Outreach Team

Oregon State Hospital

2600 Center St. NE

Salem, OR 97301-2682

Rebecca Curtis

Jeanne Dalton, RN, ANP, PMHNP

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Jeanne.R.Dalton@state.or.us

Governor's Commission on Senior Services:

Department of Human Services, Seniors & People with Disabilities

500 Summer N.E. E-02, Salem, 97301-1075

Marc Overbeck, Legislative and Advocacy Specialist

(503) 945-6406

Marc.Overbeck@state.or.us

<http://www.oregon.gov/DHS/spd/adv/gcss/home.shtml>

Oregon Health Sciences University, Department of Psychiatry

Multnomah Pavilion, Room 2316

OHSU, UHN-80

3181 SW Sam Jackson Park Rd

Portland, OR 97239-3098

(503) 494-8144

psych@ohsu.edu

Community Based Organizations/nonprofits

Association of Oregon Community Mental Health Program Directors

Gina Firman, Executive Director

1201 Court Street, NE, Suite 201

Salem, OR 97301

(503) 399-7201

Conference of Local Health Officials

Linda Fleming, Executive Director

P.O. Box 428

Fossil, OR 97830

(541) 763-3740

Linkflem@centurytel.net

Living Works also known as Applied Suicide Intervention Skills Training

<http://www.livingworks.net/>

ASIST Oregon contact: Gary McConahay, PhD

(541) 858-8170

Gmccconahay@orbsinc.org

<http://www.jcmhd.com/suicideprevention.htm>

Oregon Association of Area Agencies on Aging and Disability

Jaqueline Zimmer, Executive Director

3410 Cherry Ave. NE, Salem, OR 97309

(503) 463-8692

<http://www.o4ad.org/>

National Association for the Mentally Ill, Oregon

David Gallison, Executive Director

3550 SE Woodward Street

Portland, OR 97202

(503) 230-8009 and (800) 343-6264

namioregon@qwest.net

http://www.nami.org/MSTemplate.cfm?Site=NAMI_Oregon

Northwest Chapter of the American Foundation for Suicide Prevention

AFSP Northwest

P.O. Box 25587

Portland, OR 97298-0587

afspnw@yahoo.com

(503) 650-5595

<http://www.afspnw.org/home.html>

Oregon Partnership Helpline

(800) 923-HELP

<http://www.orpartnership.org/>

QPR Institute: Question, Persuade, Refer Suicide Intervention Skills Training

(888) 726-7926

<http://www.qprinstitute.com/>

Suicide Bereavement Support in Oregon

(503) 285-1714

<http://www.oregon.gov/DHS/ph/ipe/ysp/sbs.shtml#about>

The Dougy Center (bereavement support)

3909 SE 52nd Ave

Portland, Oregon

(503) 775-5683

<http://www.dougy.org>

Yellow Ribbon Suicide Prevention Program

Tyler Barges
Troutdale, Oregon
(503) 314-8025
bargastyler@hotmail.com

National Organizations

American Association of Suicidology
4201 Connecticut Ave., NW Suite 408
Washington, DC 20008
(202) 237-2280
info@suicidology.org
<http://www.suicidology.org>

American Foundation for Suicide Prevention
120 Wall Street, 22nd Floor
New York, New York 10005
(888) 333-AFSP (2377)
inquiry@afsp.org
<http://www.afsp.org>

Centers for Disease Control and Prevention
National Center for Injury Prevention and Control
4770 Buford Highway, Mailstop K60
Atlanta, Georgia 30341-3724
(770) 488-4362
DVPINFO@cdc.gov to send messages or questions
WISQARS (Web-based Injury Statistics Query and Reporting System): Fatal Injuries:
Mortality reports
<http://webappa.cdc.gov/sasweb/ncipc/mortrate.html>
Information on suicide
<http://www.cdc.gov/ncipc/factsheets/suifacts.htm>

International Friends and Families of Suicides
<http://www.friendsandfamiliesofsuicide.com/>

National Alliance for the Mentally Ill
Colonial Place Three
2107 Wilson Blvd., Suite 300
Arlington, VA 22201-3042
NAMI Helpline: 800.950.NAMI (6264)
(703) 524-7600
<http://www.nami.org>

National Institutes of Mental Health
Facts on: Depression in Older Adults, Depression and Other Illness
Information About Medications

<http://www.nlm.nih.gov/healthinformation/depoldermenu.cfm>
Medline Plus – Health Information: Suicide
<http://www.nlm.nih.gov/medlineplus/suicide.html>

National Organization for People of Color Against Suicide
4715 Sargent Road, NE
Washington, D.C. 20017
(866) 899-5317
nopcas@onebox.com
<http://www.nopcas.com>

National Resource Center for Suicide Prevention and Aftercare/The Link
Counseling Center
348 Mt. Vernon Highway NE
Atlanta, Georgia 30328-4139
(404) 256-9797
linknrc@bellsouth.net
<http://www.thelink.org>

National Suicide Prevention Lifeline
(800) 273-TALK (8255)
TTY: (800) 799-4TTY (4899)
<http://www.suicidepreventionlifeline.org/>

Organization for Attempters and Survivors of Suicide in Interfaith Services (OASSIS)
101 King Farm Blvd, #D401.
Rockville, MD 20850
(240) 632-0335
jamestclemons@aol.com
<http://www.oassis.org>

Pacific Institute for Research and Evaluation
Calverton Office Park
11710 Beltsville Drive, Suite 300
Calverton, MD 20705-3109
(301) 731-9891
info@pire.org
<http://www.pire.org>

Substance Abuse and Mental Health Administration
<http://www.mentalhealth.samhsa.gov/cmhs/nspi/>

Suicide Awareness Voices of Education (SAVE)
<http://www.save.org/>

Suicide Prevention Action Network USA
1025 Vermont Avenue NW #1200
Washington, D.C. 20005
(202) 449-3600
info@spanusa.org
<http://www.spanusa.org>

Suicide Prevention Resource Center
Lloyd Potter, Director
(877) 439-7772
<http://www.sprc.org/>

The National Strategy for Suicide Prevention
<http://www.mentalhealth.samhsa.gov/suicideprevention/>

The National Hopeline Network
(800) SUICIDE or (800) 784-2433
<http://www.hopeline.com/>

The Samaritans Suicide Prevention Hotline
P.O. Box 1259
Madison Square Station, New York, NY 10159
(212) 673-3000
<http://www.samaritansnyc.org/>

Training Institute for Suicide Assessment and Clinical Interviewing
www.suicideassessment.com

University of Rochester Medical Center
Center for the Study of Prevention of Suicide
Suicide Prevention in Later Life link:
<http://www.rochesterpreventsuicide.org/elders.html>

Yellow Ribbon Suicide Prevention Program®
Light for Life Foundation International
PO Box 644
Westminster, CO 80036-0644
(303) 429-3530
ask4help@yellowribbon.org
www.yellowribbon.org

References

- ¹ Krug EF, et al., eds. *World report on violence and health*. Geneva, World Health Organization, 2002.
- ² U.S. Department of Health and Human Services, Public Health Service. 2001. *National Strategy for Suicide Prevention: Goals and Objectives for Action*, Rockville, MD. www.surgeongeneral.gov/library
- ³ Elder Specific Goals and Objectives Adapted from the National Suicide Prevention Strategy are published on the web at <http://www.rochesterpreventsuicide.org/elders.html>
- ⁴ Dekker M. 2004. Unpublished document, Final Report: Literature Review State-wide Elder Suicide Prevention Plan, and Prevention Concepts Matrix. On the web @ <http://oregon.gov/DHS/ph/ipe/esp/data.shtml> and <http://oregon.gov/DHS/ph/ipe/esp/concepts.shtml>
- ⁵ Krug EF, et al., eds. *World report on violence and health*. Geneva, World Health Organization, 2002.
- ⁶ Ibid.
- ⁷ Ibid.
- ⁸ U.S. Department of Health and Human Services, Public Health Service. 2001. *National Strategy for Suicide Prevention: Goals and Objectives for Action*, Rockville, MD. www.surgeongeneral.gov/library
- ⁹ Goldsmith, S., Pellmar, T., Kleinman, A., & Bunney, W. (Eds.). (2002). *Reducing Suicide: A National Imperative*. Institute of Medicine, National Academies Press, Washington, D.C.
- ¹⁰ Ibid.
- ¹¹ Alliance for Aging Research. 2003. *Ageism: How Healthcare Fails the Elderly*. On the web at: <http://www.agingresearch.org>
- ¹² Palmore E. 1990. *Ageism: Negative and Positive*. New York: Springer.
- ¹³ U.S. Department of Health and Human Services, Public Health Service. 2001. *National Strategy for Suicide Prevention: Goals and Objectives for Action*, Rockville, MD. www.surgeongeneral.gov/library
- ¹⁴ Elder Specific Goals and Objectives Adapted from the National Suicide Prevention Strategy are published on the web at <http://www.rochesterpreventsuicide.org/elders.html>
- ¹⁵ Dekker M. 2004. Unpublished document, Final Report: Literature Review State-wide Elder Suicide Prevention Plan, and Prevention Concepts Matrix. On the web @ <http://oregon.gov/DHS/ph/ipe/esp/data.shtml> and <http://oregon.gov/DHS/ph/ipe/esp/concepts.shtml>
- ¹⁶ Goldsmith, S., Pellmar, T., Kleinman, A., & Bunney, W. (Eds.). 2002. *Reducing Suicide: A National Imperative*. Institute of Medicine, National Academies Press.
- ¹⁷ Shen, X, Millet L, Kohn M. 2006. *Violent Deaths in Oregon: 2004*. Oregon Department of Human Services, Portland, Oregon.
- ¹⁸ Haber, D. 2003. *Health Promotion and Aging: Practical Applications for Health Professionals*. New York: Springer Publications.
- ¹⁹ Goldsmith, S., Pellmar, T., Kleinman, A., & Bunney, W. (Eds.). 2002. *Reducing Suicide: A National Imperative*. Institute of Medicine, National Academies Press, Washington, D.C.
- ²⁰ Ibid.

²¹ Uncapher H, Arean P. 2000. Physicians are less willing to treat suicidal ideation in older patients. *Journal of the Geriatrics Society*; Feb; 48(2): 188-92.

²² Ibid.

²³ Brown G, Bruce M, & Pearson J. 2001. High-risk management guidelines for elderly suicidal patients in primary care settings. *International Journal of Geriatric Psychiatry*; Jun 16 (6): 593-601.

²⁴ Department of Human Services, Office of Disease Prevention and Epidemiology, undated document.

²⁵ Knight, B. 1989. *Outreach with the Elderly: Community Education, Assessment, and Therapy*. New York: New York University Press.

²⁶ Conwell Y, et. Al. 2002. Access to firearms and risk for suicide in middle-aged and older adults. *American Journal of Geriatric Psychiatry*; Jul-Aug; 10(4): 407-16.

²⁷ De Leo D, Carollo G, Dello B. 1995. Lower suicide rates associated with a Tele-Help/Tele-Check service for the elderly at home. *American Journal of Psychiatry*; Apr; 152(4); 632-4.

²⁸ De Leo D, Dello B, Dwyer J. 2002. Suicide among the elderly: the long-term impact of a telephone support and assessment intervention in Northern Italy. *British Journal of Psychiatry*; Sep; 181:226-9.

²⁹ University of Rochester Center for the Study and Prevention of Suicide. 2002. Suicide Prevention in Later Life - Year II: Elder-specific goals and objectives, on the web at <http://www.rochesterpreventsuicide.org/elders.html>

³⁰ Goldsmith, S., Pellmar, T., Kleinman, A., & Bunney, W. (Eds.). 2002. *Reducing Suicide: A National Imperative*. Institute of Medicine, National Academies Press.

³¹ Ibid.

³² Commonwealth of Australia. 2001. Fact or Fiction? Reporting Mental Illness and Suicide. *Responsibility Resources for Journalism Education*. Retrieved from www.responsibility.com

³³ American Foundation for Suicide Prevention, American Association of Suicidology, Annenberg Public Policy Center. 2001. Reporting on Suicide: Recommendations for the Media. Retrieved from www.afsp.org/education/recommendations/5/1.htm

³⁴ World Health Organization. 2000. *Preventing Suicide: A Resource for Media Professionals*. Geneva: World Health Organization, Department of Mental Health. Retrieved from: www.who.int/entity/mental_health/resources/suicide/en

³⁵ U.S. Department of Health and Human Services, Public Health Service. 2001. *National Strategy for Suicide Prevention: Goals and Objectives for Action*, Rockville, MD. Retrieved from: www.surgeongeneral.gov/library

Older Adult Suicide: Everybody's Business

Lisa Millet

Injury Prevention & Epidemiology Section Manager

Oregon Public Health

Multnomah County Commission Meeting, March, 2007

Meeting Overview

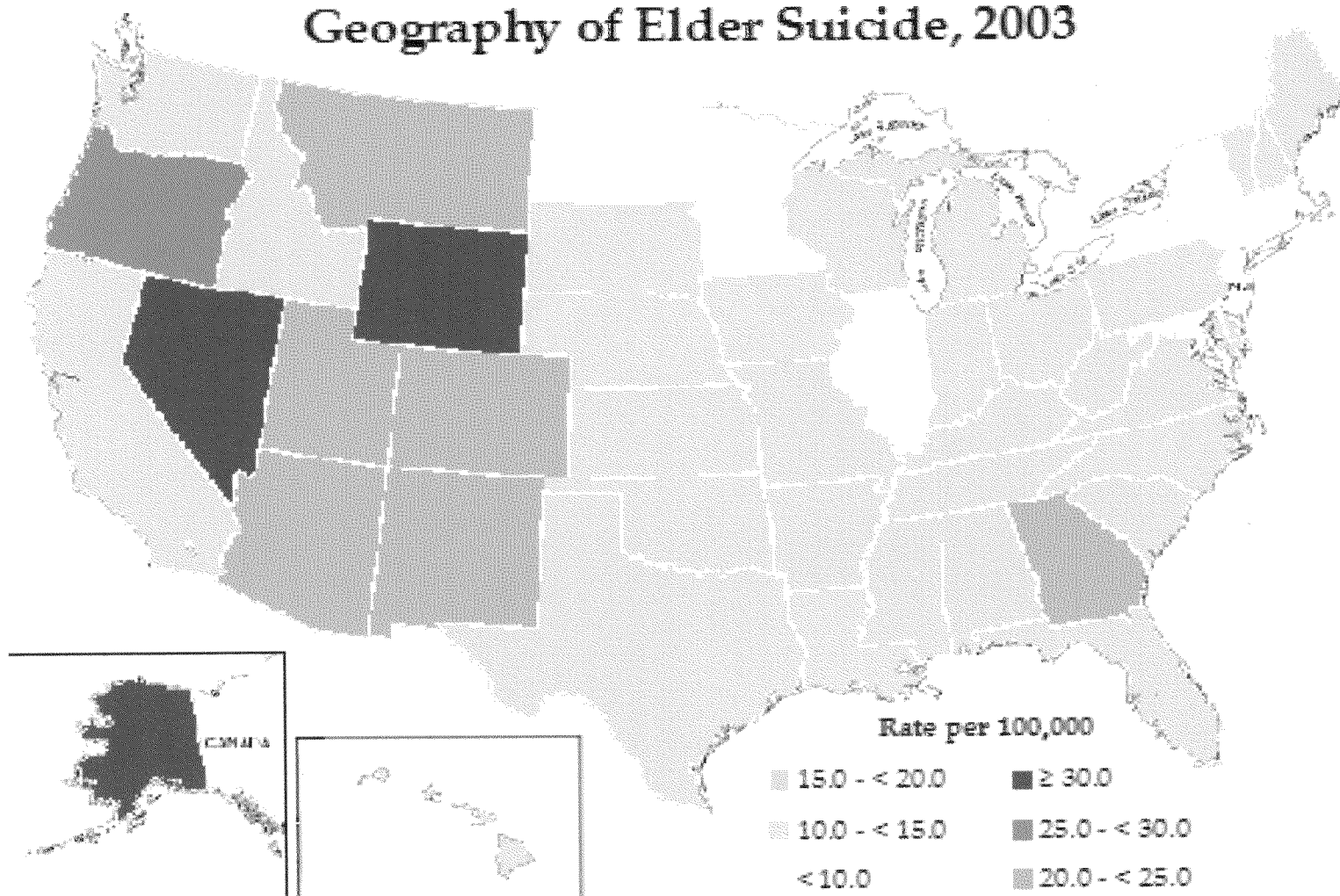
- Older adult suicide – when, where, and who?
- Planning process
- Prevention plan elements

A Word About Oregon's Death With Dignity Act

- Oregon voters twice approved a referendum (in 1994 & 1997) that allows patients with a terminal illness with 6 months or less to live to request medication that will hasten death
- In 2005, 38 people died after ingesting a prescribed medication
- These deaths by law are not classified as “suicides”
- These deaths are not a focus of this prevention plan

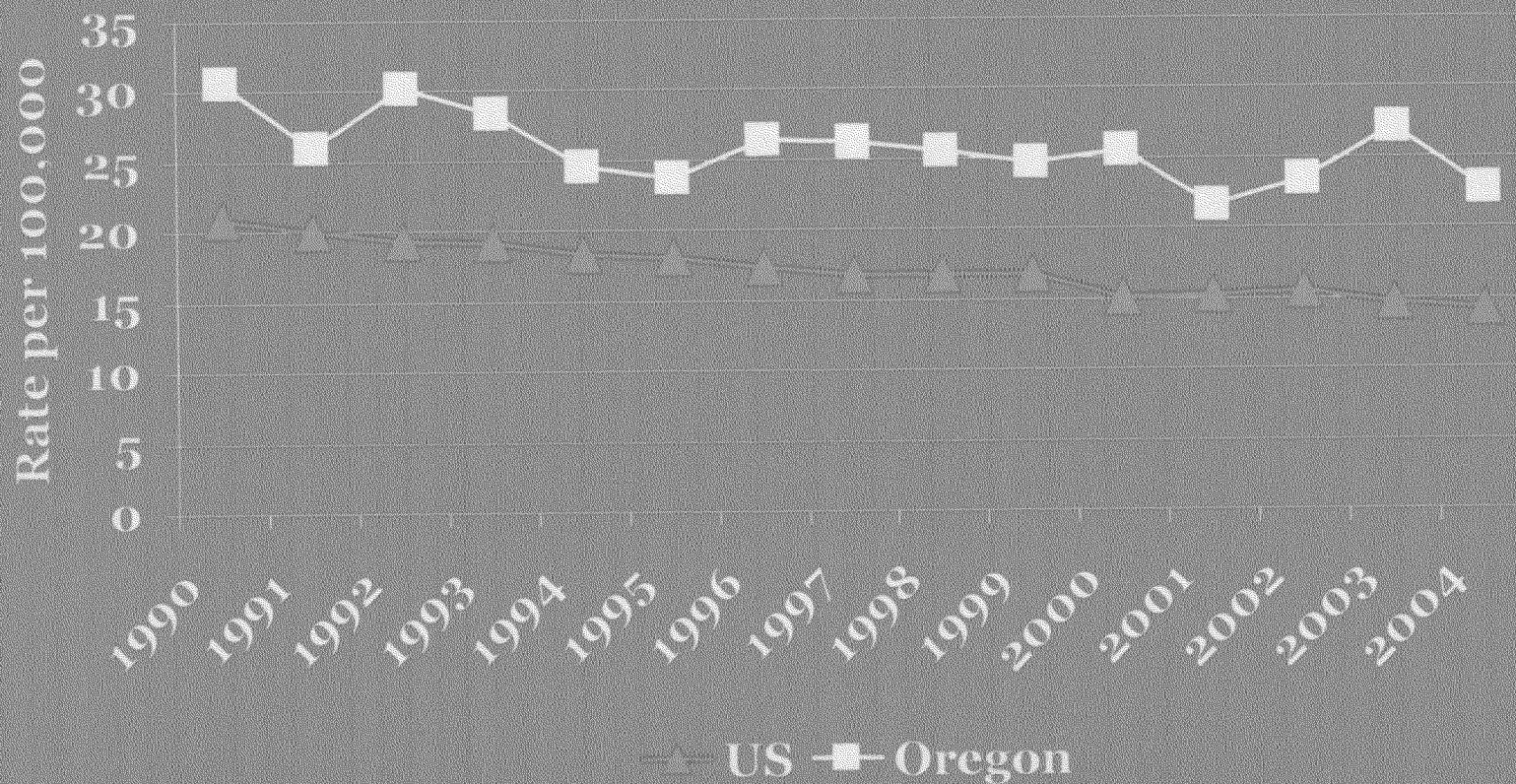
Geography of Elder Suicide:

Geography of Elder Suicide, 2003



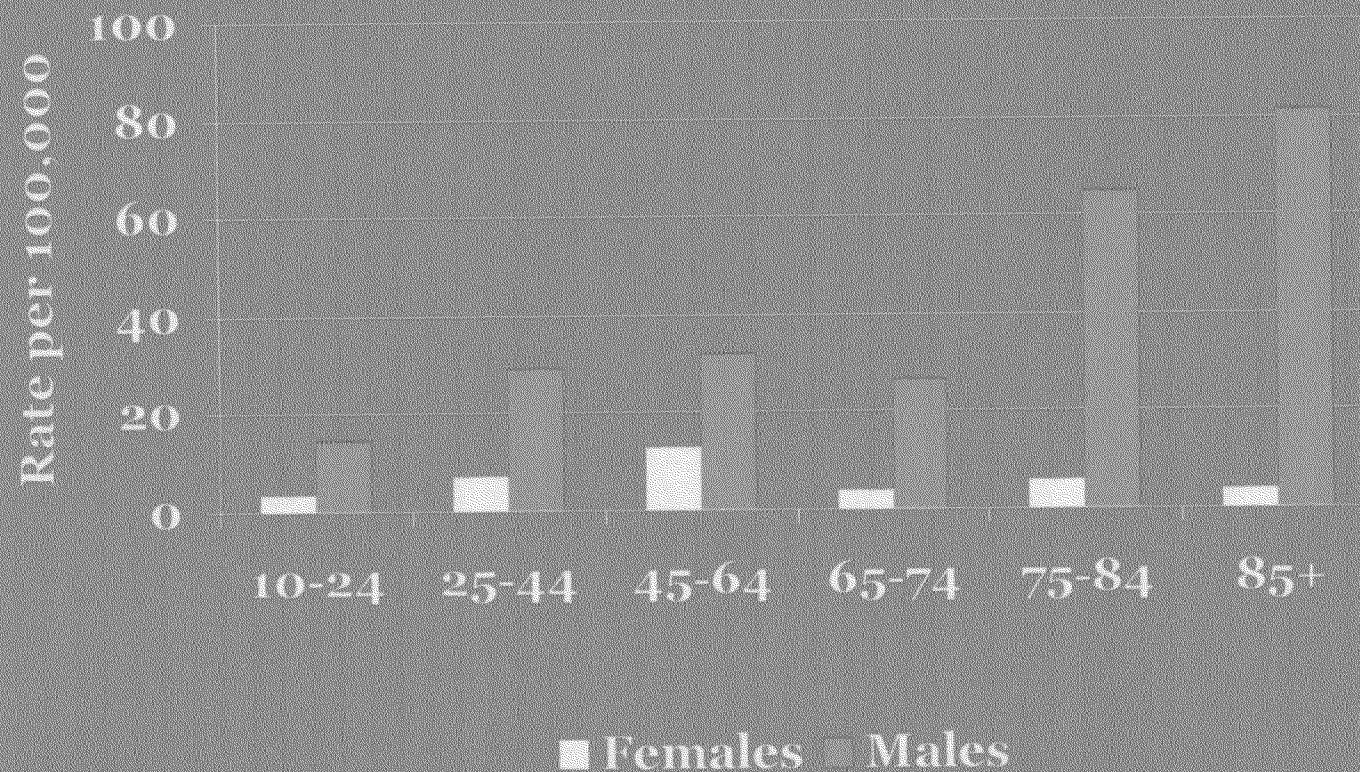
Centers for Disease Control and Prevention: Web-based Injury Statistics Query and Reporting System (WISQARS) [Online]

Suicide Rates Among Those Aged 65+, US & Oregon, 1990-2004



Oregon Vital Statistics, National Center for Health Statistics

Suicide Rates per 100,000 by Age & Gender, Oregon, 2004



Frequency, Rate & Percent of Suicide by Race, Population Percent, Older Adults 65+, OR, 1999-04

Race	Frequency (rate per 100,000)	Percent of suicides	Percent of race in general population
White	643(24.86)	98.7%	90.9%
African American	*(4.09)	.001%	1.8%
American Indian	*(5.71)	.0015%	1.4%
Asian/Pac Islander	6(11.69)	.9%	3.7%
Total	651(24.29)	100%	—

WISQARS, 1999-04, * Value is less than 5 occurrences

Suicide Circumstances, Oregonians Aged 65+, 2003-04

	Males	Females
Currently depressed	47%	58%
Currently depressed & in treatment (meds/office visits)	27%	50%
Physical health problem(s) (Heart Disease, Chronic Pain, Cancer)	69%	71%
Disclosed their suicidal intent	20%	35%

Frequency & Percent of Suicide Methods by Gender, Adults 65+, OR, 1999-04

Method	Frequency (%) Males	Frequency (%) Females	Frequency (%) Total
Firearm	480(85%)	35 (38%)	515 (79%)
Poisoning	32(5%)	25 (27%)	57 (8%)
Suffocation	34(6%)	16 (17%)	50 (7%)
Cut/Pierce	8(1%)	3 (3%)	11 (1.6%)
Fall	4(.07%)	4 (4%)	8 (1.2%)
Drowning/Submersion	3(.05%)	2 (2%)	5 (.7%)
Total	561(100%)	90(100%)	651(100%)

Risk Factors That Put Older Adults in Oregon At Higher Risk for Suicide:

- Firearm in home 41%
- Limitations due to health problems 34%
- Need help chores/business 31%
- Depression concurrent with arthritis, diabetes & cardiovascular disease 30%
- Mental health problems 17%

More Risk Factors for Oregon's Older Adults:

- No physical activity 27%
- Would like more social activity 27%
- Remembering/ Concentrating 19%
- Rarely/never get social & emotional support 10%
- Alcohol use or abuse 5%

• Source: BRFSS, 2004

Quality of Life Issues Documented, Oregon Suicides Aged 65+, 2004

- 93% had at least one medical condition
- 25% had visited a physician in last 30 days
- 21% suffered from chronic pain
- 68% had declining health
- 45% had a loss of autonomy or independence
- 45% were isolated or lived alone

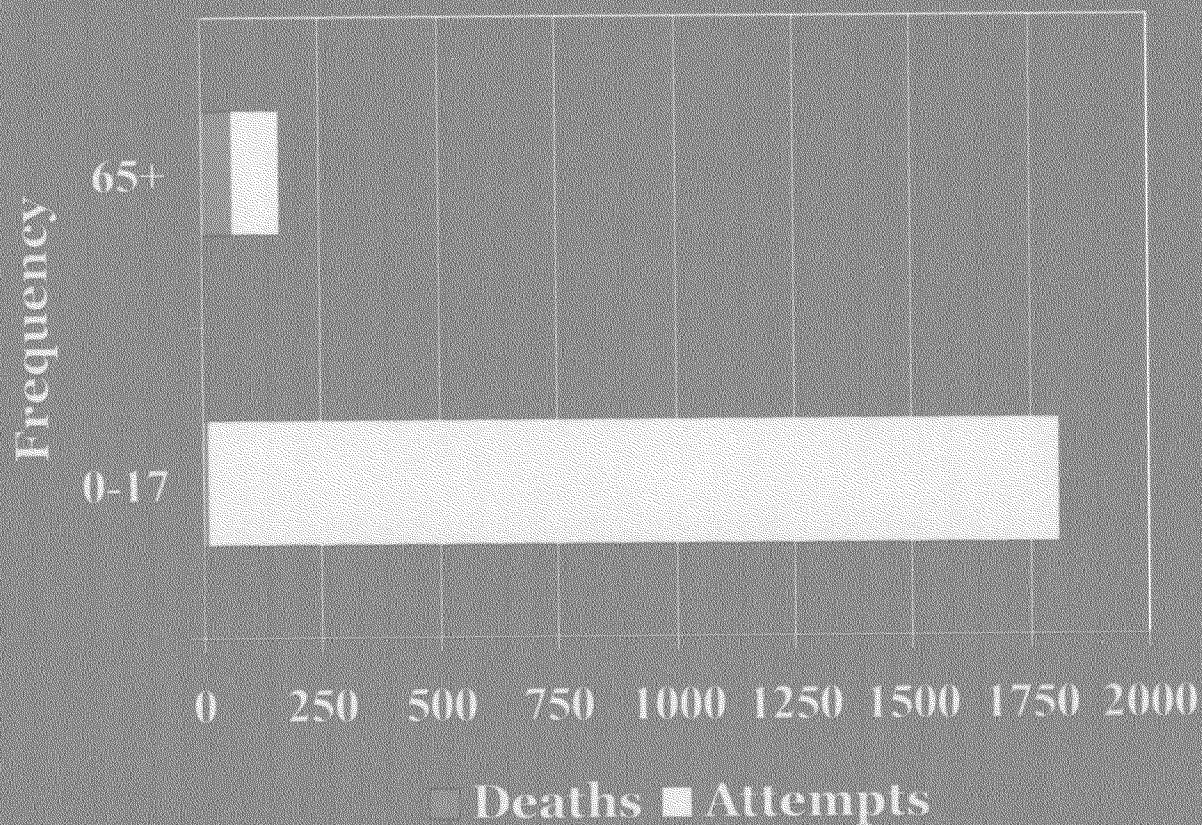
Older Adult Suicide Attempt Data

- Gender differences
- Age differences

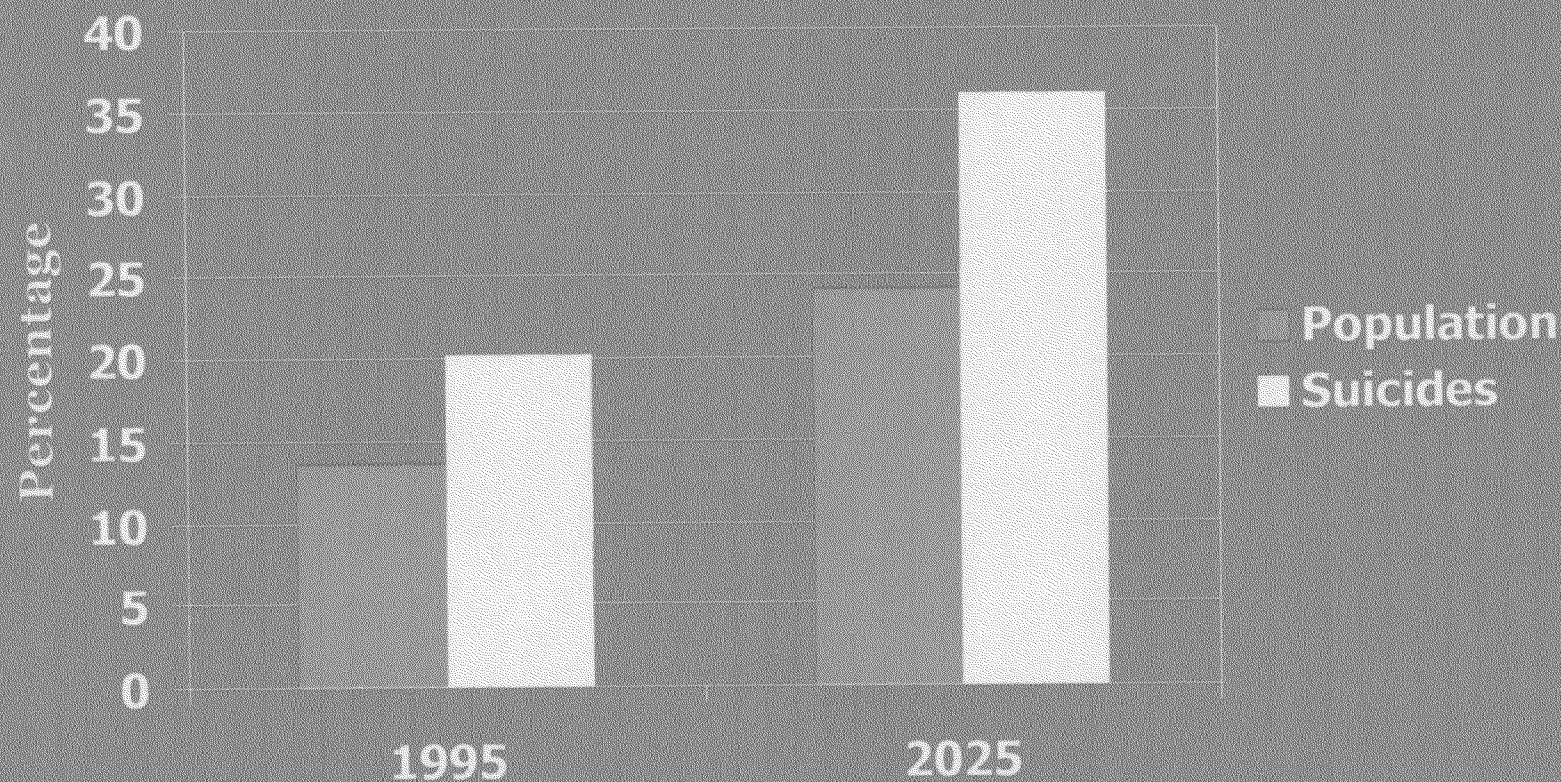
Frequency & Percentage of Hospital Discharges After a Suicide Attempt by Gender, Seniors Aged 65+, Oregon, 2004

Gender	Frequency (%)
Males	25 (39%)
Females	39 (61%)
Total	64 (100%)

Ratio of the Frequency of Attempts to Deaths Among Oregon Older Adults and Youth, 2004



Current and Projected Older Adult Population & Suicides, OR, 1995 & 2025



What the Data Suggest

- Primary focus for prevention is white males
- Primary care training & intervention
- Need to integrate behavioral health and primary care
- Social connection needs important
- Outreach & follow-up important

Creating Oregon's Older Adult Suicide Prevention Plan Strategies

It all started...with the data

- Identified a problem and associated circumstances
- Need to know what to do
- Need to create partnerships
- Need to develop consensus about how to prevent suicide

Advisory Committee

- Mariana Bornholdt & Marilyn Hinds, Gov's Comm. on Sr. Services
- Lynda Crandall, DHS – Seniors & Disabilities
- Jeanne Dalton, DHS – State Hospital
- Dianne DeVilliers, Coos Co. Mental Health
- Mark Kaplan, Portland State University
- Tim Malone, Deschutes Co. Mental Health Dept.
- Sandra Moreland, DHS – Mental Health
- Judy Strand, Metropolitan Family Service

Staff

- Mel Kohn, State Epidemiologist
- Janice Alexander, Injury Epidemiologist
- Xun Shen, Violent Death Epidemiologist
- Lisa Millet, Manager Injury Prevention & Violence Prevention Program
- Lee Anna Bennett-Ashworth, Data Abstractionist, Violent Death Reporting System

Learning All We Could

- Examined data
- Literature review
- Key informant interviews
- National Strategy
- Informed by elder suicide strategies adapted from National Plan by University of Rochester Institute for Suicide Prevention
- American Association of Suicidology
- Suicide Prevention Resource Center

Synthesis

- Concepts generated
- Developed community planning process
- Local partners hosted community forums

Community Engagement

- **Engage communities** in planning process to promote ownership
- **Collect examples of current practice**
- **Explore community knowledge** of how concepts might be implemented
- **Create dialogue** across disciplines that included lay people

And then...

Prevention Plan Strategies

- Clinically based suicide prevention
- Community based suicide prevention
- Public health surveillance, program evaluation, and research

Clinically Based Suicide Prevention

- Train healthcare providers.
- Improve availability of geriatric providers.
- Reduce financial barriers to care.
- Institute clinical outreach programs to older adults.

Community-Based Suicide Prevention

- **Develop broad-based support.**
- **Promote awareness** that suicide is preventable, and reduce the stigma associated with aging and the use of treatment services.
- **Improve the reporting of suicide in media.**
- **Provide suicide intervention skills training** for community members.

Community-Based Suicide Prevention Continued....

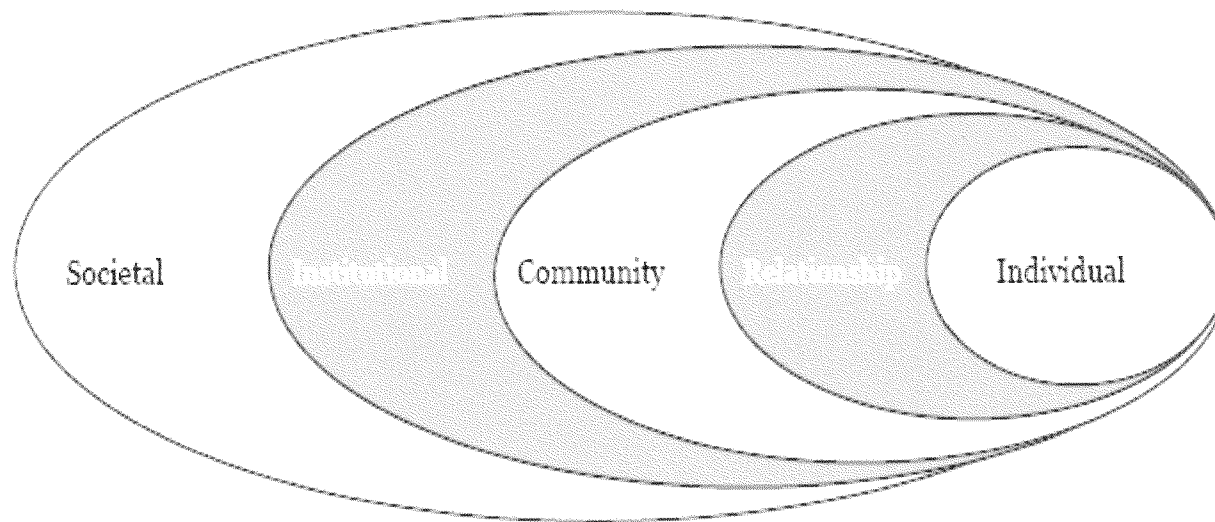
- **Reduce social isolation.**
- **Enhance abilities of older adults to cope with difficult challenges.**
- **Reduce access to lethal means.**
- **Decrease the negative impact of ageism.**
- **Increase opportunities** for older adults to engage more fully in society.

Public health surveillance, program evaluation, and research

- **Improve and expand** public health surveillance systems.
- **Evaluate the effectiveness** of services and programs.
- **Develop research** on suicide and suicide prevention.

Effective Prevention Would Include Interventions on All Levels

Ecological model for understanding suicide:



Source: Krug F.F., et al., eds. World report on violence and health.
Geneva, World Health Organization, 2002.

Goals

- **Convene** community forums to disseminate plan, assess community prevention strengths and opportunities for improvement.
 - **Select 2-3 goals**
 - **Identify or create a work group**
 - **Develop local resources**
- **Re-convene in 6-9 months time to review progress**

Prevention Goal: Physician Training

- Every community forum across the state should add this goal to their list: Physician Training
- The state feels it is a vital strategy for older adult suicide prevention. The plan shows us.
- The focus of the training is depression screening, suicide assessment skills, and treatment.
- Work to identify one local physician who will lead a training for other physician's and healthcare professionals in the community.

Next Steps

- Look ahead to upcoming Legislative session to see which older adult issues need support.
- Reconvene in 5-6 months for the second community forum meeting.
- Start thinking about a statewide suicide prevention coalition.....

Resources

Older Adult Suicide Prevention Plan:

Oregon Public Health Division, Injury and Violence Prevention Program

<http://oregon.gov/DHS/ph/ipe/esp/index.shtml>

Suicide Prevention Resource Center

(877) 439-7772

<http://www.sprc.org/>

National Strategy for Suicide Prevention

<http://mentalhealth.samhsa.gov/suicideprevention/strategy.asp>

**University of Rochester Medical Center, Center for the Study
of Prevention of Suicide, Suicide Prevention in Later Life link:**

<http://www.rochesterpreventsuicide.org/elders2.htm>

Contact Information:

- **Lisa Millet**, Injury & Violence Prevention Program

Lisa.M.Millet@state.or.us

- **Kari B. Lyons**, Older Adult Suicide Prevention Project Lead

(971) 673-1036

Kari.B.Lyons@state.or.us



MULTNOMAH COUNTY AGENDA PLACEMENT REQUEST (long form)

Board Clerk Use Only

Meeting Date:	03/22/07
Agenda Item	R-1
Est. Start	10:20 AM
Date	03/09/07

BUDGET MODIFICATION: -

NOTICE OF INTENT to Apply for a Grant Under the Prison Rape Elimination Act (PREA) Protecting Inmates and Safeguarding Communities Program For Purposes of Installing a Radio Frequency Identification System in the Multnomah County Detention Center

Agenda Title:

Note: If Ordinance, Resolution, Order or Proclamation, provide exact title. For all other submissions, provide a clearly written title.

Requested Meeting Date:	March 22, 2007	Amount of Time	15 Minutes
Department:	Sheriff	Division:	
Contact(s):	Larry Aab, Chief Ron Bishop		
Phone:	(503) 988-4489	Ext.	84489
I/O Address:	503/350		
Presenter(s):	Business Services Director Larry Aab, Chief Deputy Ron Bishop		

General Information

1. What action are you requesting from the Board?

Request approval of notice of intent to apply for \$350,000 in grant revenue from the Bureau of Justice Administration (BJA) under the Prison Rape Elimination Prevention Act (PREA) Protecting Inmates and Safeguarding Communities Program for the purchase and installation of a Radio Frequency Identification System in the Multnomah County Detention Center.

2. Please provide sufficient background information for the Board and the public to understand this issue. Please note which Program Offer this action affects and how it impacts the results.

PREA Grant Criteria and Submission Process

The Multnomah County Sheriff's Office has submitted a notice of intent to the

Oregon Department of Justice to apply for funds under the Prison Rape Elimination Act (PREA) Protecting Inmates and Safeguarding Communities Program. Applications for PREA grant funds are limited to the 50 US states and its territories and the Oregon Department of Justice has been designated the representative agency for Oregon for this grant period. Priority consideration is being given to states that agree to pass through grant funds (via sub-awards) to a locality so that the locality can fund Protecting Inmates and Safeguarding Communities projects. The Oregon Department of Justice has identified the MCSO RFID request as a pass through project and has included it in their grant request to BJA.

The grant amount applied for is \$350,000. This will require a local match of \$350,000 and can be a hard or soft match. However, since the project is equipment, consulting, and installation of the RFID system, the match will likely have to be a hard match (see project description below). It should be noted that the grant submission deadline was January 18, 2007 and the Sheriff's Office was given a very short timeline to research, write and submit the notice of intent to the Oregon DOJ. Therefore, the Sheriff's Office was unable to bring this matter before the Board prior to submission. If the Board elects not to accept this notice of intent, the Sheriff's Office will inform the Oregon DOJ and withdraw its application. The grant is expected to be awarded on or about July 1, 2007 and a request for local match will be submitted as a new program offer for Fiscal Year 2008.

Description of Grant

The Prison Rape Elimination Act of 2003 establishes the following mechanisms to combat sexual assault in prison or local jails:

Investigation and Reporting:

- Requires the Bureau of Justice Statistics to conduct annual surveys and research on the prevalence and effects of prison rape in local, state and federal prisons;
- Creates the Review Panel on Prison Rape in the Department of Justice, which will hold annual public hearings concerning the operation of the prisons with the highest and lowest rates of prison rape;
- Requires the Attorney General to submit a report of these findings to Congress and the Department of Health and Human Services; and
- Establishes a National Commission to study prison rape, report its findings to Congress and develop national standards for preventing prison rape for review by the Attorney General.

Prevention and Prosecution:

- Creates a national clearinghouse on prison rape within the National Institute of Corrections. This clearinghouse will provide information and assistance to authorities responsible for preventing, investigating and punishing prison

rape; and

- Requires the National Institute of Corrections to provide training and education programs for federal, state and local prison authorities.

Grant Program:

- Requires the Attorney General to make 2-year grants to state and local governments and prison systems to establish more effective programs to prevent, investigate, and punish prison rape. The bill authorizes \$40,000,000 per year to be spent on these and related grants to safeguard communities from 2004 to 2010, at least 50 percent of which must be spent on grants to address prison rape.

Although sexual assault through inmate to inmate or corrections staff to inmate is not a recent phenomenon in the history of corrections systems, a critical component of any well run corrections system is to protect vulnerable inmates from the predatory sexual advances of others. Protecting inmates from inmate on inmate sexual assault and staff on inmate sexual assault is most effectively accomplished through direct and continuous observation of inmate activity. However, continuous observation of inmate activity is quite staff intensive, especially in facilities which are older and have poor physical plant design. Many older facilities were not designed with clear lines of sight that eliminate many sexual assault opportunity areas. It is not possible that every prisoner can be under direct visual observation at all times.

The MCSO has a zero tolerance regarding sexual assault and any incident is unacceptable. According to the National Institute of Corrections, sexual predators in prisons and jails rely on a code of silence and incidents of sexual assault are widely believed to be underreported (Facing Prison Rape, 2004) Victims are intimidated into remaining silent and coerced into participating in activities by threats of further violence. Lack of evidence also can be a hindrance during investigation of alleged incidents and makes prosecution difficult. If offenders are routinely not punished for assaults because of lack of evidence, victims may be reluctant to report assaults. This feeds the vicious cycle of intimidation, coercion, and violence in jails.

Multnomah County's highest security facility is the Multnomah County Detention Center (MCDC). MCDC is located in a high rise building in downtown Portland, Oregon and was constructed in 1981. The Sheriff's Office occupies approximately 209,280 square feet of the 440,937 square feet available. Five floors are dedicated to jail space housing 676 offenders.

The original design capacity of the facility was 476 inmates but the capacity was increased to 676 in 1996 by double bunking some of the facility modules. In addition to general housing, the facility houses specialty units to manage offenders who are in administrative segregation for disciplinary reasons, suffer from acute mental illness, or have medical conditions that make them unsuitable to co-mingle

in a general housing population. The specialty units house both male and female inmates simultaneously. The facility design and occupancy increases the likelihood of sexual assault within the facility.

GOALS AND OBJECTIVES

The goal of this project is to reduce both inmate on inmate sexual assault and staff on inmate sexual assault and improve the overall safety for both staff and inmates through the installation of a wireless Radio Frequency Identification (RFID) tracking system in the MCDC.

The first objective is to reduce the number of inmate on inmate sexual assaults in the facility. Performance will be measured by comparing the number of inmate on inmate sexual assaults in the facility during the grant period to the number of inmate on inmate sexual assaults in the facility during a comparable time period.

The second objective is to reduce the number of staff on inmate sexual assaults in the facility. Performance will be measured by comparing the number of staff on inmate sexual assaults in the facility during the grant period to the number of staff on inmate sexual assaults in the facility during a comparable time period.

The third objective is to increase the number of cases referred for prosecution. Performance will be measured by comparing the number of cases from the facility referred to prosecution during the grant period to the number from the facility during a comparable time period.

PROJECT DESIGN AND STRATEGY

The MCSO administration and staff at MCDC are committed to reducing inmate on inmate sexual violence and staff on inmate sexual assault to improving the overall safety for both staff and inmates. This will be accomplished through the installation of a wireless RFID tracking system in the MCDC.

The presence of RFID surveillance equipment should inhibit offenders from committing sexual assault because they will know they are being recorded and documented. The MCSO will be able to use this technology to review activity within the MCDC during a specific time period when investigating alleged incidents. Proactive steps may be facilitated in the observation of suspicious activities of offenders.

Recorded and documented activities should result in better investigations by providing investigators with enough evidence to refer cases for prosecution. These stronger cases that are forwarded to local prosecutors should result in a greater willingness of local prosecutors to take action against perpetrators and greater conviction rates, all of which MCSO believes will lead to reduced incidents.

The RFID system provides continuous real-time location and status monitoring of

inmates and staff. The system consists of an electronic bracelet worn by inmates. The bracelet is waterproof and tamperproof and transmits an identity-stamped radio signal every two seconds. Network antennas receive signals and route them to a computer. Corrections staff wears a safety device with an emergency button to summon assistance. A computer monitor displays the location and identity of inmates and staff. Information is archived for possible use in investigations.

Although relatively new to prison and jail systems, successful RFID implementations have been made in California State Prison at Calipatria; Miami/Dade County Sheriff's Office; Virginia Department of Corrections; and a Missouri Juvenile Detention Facility.

RFID technology has long been used in the retail and manufacturing industry to track and verify inventory and for loss prevention. Other possible uses in Multnomah County include inventory tracking and loss prevention for central stores, library books, fleet, and facilities.

MANAGEMENT AND ORGANIZATIONAL CAPACITY

The MCSO has successfully managed many federal grant awards for the past 35 years, including construction grants through the VOI-TIS program. Sufficient experienced staff is available to manage both the implementation and financial reporting of the grant.

MCSO is requesting \$350,000 from PREA Funds to purchase, install, and train staff in use of the wireless RFID system in the MCDC. The grant will be matched by \$350,000 of local funding for a total project cost of \$700,000. This will be sufficient to equip floors 4 through 6 of the facility. A more detailed budget identifying equipment, labor, installation, consulting, and training costs is in development and will be forthcoming.

The RFID project is self-sustaining because equipment, unlike personnel costs requires a one-time expense. A successful project will lead to less money spent on staff and legal fees associated with inmate lawsuits and health care. That saved funding can be reallocated to implement RFID technology in other jail facilities.

3. Explain the fiscal impact (current year and ongoing).

There will be no fiscal impact in Fiscal Year 2007. Matching funds of \$350,000 will be required in FY 2008. This will be submitted as a program budget request for Board consideration during the upcoming budget process.

4. Explain any legal and/or policy issues involved.

Recently the District Attorney issued a report making numerous recommendations regarding operations within the jail facilities of the Sheriff's Office. An RFID system is a valuable tool in addressing some of those recommendations. For example:

- A recent incident in which a male inmate was able to access a female inmate's cell and engage in a sexual encounter would have been averted through an RFID

system. RFID can be programmed to distinguish male/female inmates and sound an alarm if there is too close proximity.

- Violent inmates can be identified and their movements tracked through RFID.
- Supplements direct supervision requirements by providing an electronic real time record of inmates' location and movement within the jail.
- Provides investigative and prosecutorial evidence showing inmate movement and proximity of inmates to disciplinary or crime events.
- Supplements video supervision as a tool for inmate monitoring.
- RFID provides "automated logbooks" showing when deputies make their rounds and verifying presence in work locations.

5. Explain any citizen and/or other government participation that has or will take place.

N/A

ATTACHMENT A

Grant Application/Notice of Intent

If the request is a Grant Application or Notice of Intent, please answer all of the following in detail:

- **Who is the granting agency?**

The U.S. Department of Justice, Office of Justice Programs' Bureau of Justice Assistance

- **Specify grant (matching, reporting and other) requirements and goals.**

The grant amount applied for is \$350,000. This will require a local match of \$350,000 and can be a hard or soft match. However, since the project is equipment, consulting, and installation of the RFID system, the match will likely have to be a hard match.

The goal of this project is to reduce both inmate on inmate sexual assault and staff on inmate sexual assault and improve the overall safety for both staff and inmates through the installation of a wireless Radio Frequency Identification (RFID) tracking system in the MCDC.

The first objective is to reduce the number of inmate on inmate sexual assaults in the facility. Performance will be measured by comparing the number of inmate on inmate sexual assaults in the facility during the grant period to the number of inmate on inmate sexual assaults in the facility during a comparable time period.

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The third objective is to increase the number of cases referred for prosecution. Performance will be measured by comparing the number of cases from the facility referred to prosecution during the grant period to the number from the facility during a comparable time period.

- **Explain grant funding detail – is this a one time only or long term commitment?**

This is a one time only grant to purchase and implement a Radio Frequency Identification System in the Multnomah County Detention Center. Ongoing costs will be supply type items, hardware and software upgrades, and licensing fees.

- **What are the estimated filing timelines?**

Filing deadline is January 18, 2007

- **If a grant, what period does the grant cover?**

This is a two year grant that covers FY 2008-09.

- **When the grant expires, what are funding plans?**

One time only for equipment acquisition. Ongoing costs will be built into baseline budget.

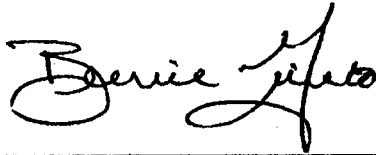
- **How will the county indirect, central finance and human resources and departmental overhead costs be covered?**

This grant is for purchase of capital equipment. It is not subject to county indirect.

ATTACHMENT B

Required Signatures

Elected Official
or Department/
Agency Director:



Date: 02/16/2007

Budget Analyst:



Date: 03/13/07

Department HR:

Date: _____

Countywide HR:

Date: _____



MULTNOMAH COUNTY AGENDA PLACEMENT REQUEST (short form)

Board Clerk Use Only

Meeting Date: 03/22/07
Agenda Item #: B-3
Est. Start Time: 10:35 AM
Date Submitted: 03/15/07

Agenda Title: **Peak Oil Task Force Report – Social Service Provider Implications**

Note: If Ordinance, Resolution, Order or Proclamation, provide exact title. For all other submissions, provide a clearly written title.

Requested Meeting Date: March 22, 2007 **Amount of Time Needed:** 20 minutes
Department: Non-Departmental **Division:** Commissioner District 2
Contact(s): Karol Collymore
Phone: 503-988-6786 **Ext.** 86786 **I/O Address:** 503/600
Presenter(s): Bill Scott, Flex Car General Manager

General Information

1. What action are you requesting from the Board?

No action, informational briefing only.

2. Please provide sufficient background information for the Board and the public to understand this issue. Please note which Program Offer this action affects and how it impacts the results.

In May 2006, the City of Portland created the Peak Oil Task Force and requested recommendations for how best to prepare for a future when oil and gasoline are too expensive to support our current transit economy and lifestyles. The Task Force's final report titled "Descending the Oil Peak: Navigating the Transition from Oil and Natural Gas," includes recommendations to reduce oil use and strengthen the community's ability to respond to social and economic stress. Of particular importance to Multnomah County, are recommendations for social services and redesigning the safety net to protect vulnerable and marginalized populations.

3. Explain the fiscal impact (current year and ongoing).

No impact.

4. Explain any legal and/or policy issues involved.

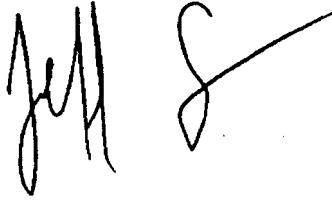
Policy issues include recommendations to redesign social services, first responder services, and emergency plans.

5. Explain any citizen and/or other government participation that has or will take place.

N/A

Required Signature

**Elected Official or
Department/
Agency Director:**

A handwritten signature in black ink, appearing to be "JH S", written over a horizontal line.

Date: 03/15/07



Descending the Oil Peak: Navigating the Transition from Oil and Natural Gas

**Report of the City of Portland
Peak Oil Task Force
March 22, 2007**

Task Force Process

May 2006 **Task Force created by Portland City Council**

12 members appointed

Examine consequences & recommend actions

July – Dec 2006 **Research conducted by Task Force**

40+ public meetings

Interviews

Staff from Planning, Transportation, Sustainable Development,
Emergency Management, Oregon Department of Energy

Jan – Feb 2007 **Draft report released, revised based on public input**

March 7, 2007 **Report presented to Portland City Council**

Task Force Process

Research areas

**Land use
& transportation**

Economy

Public services

Health care

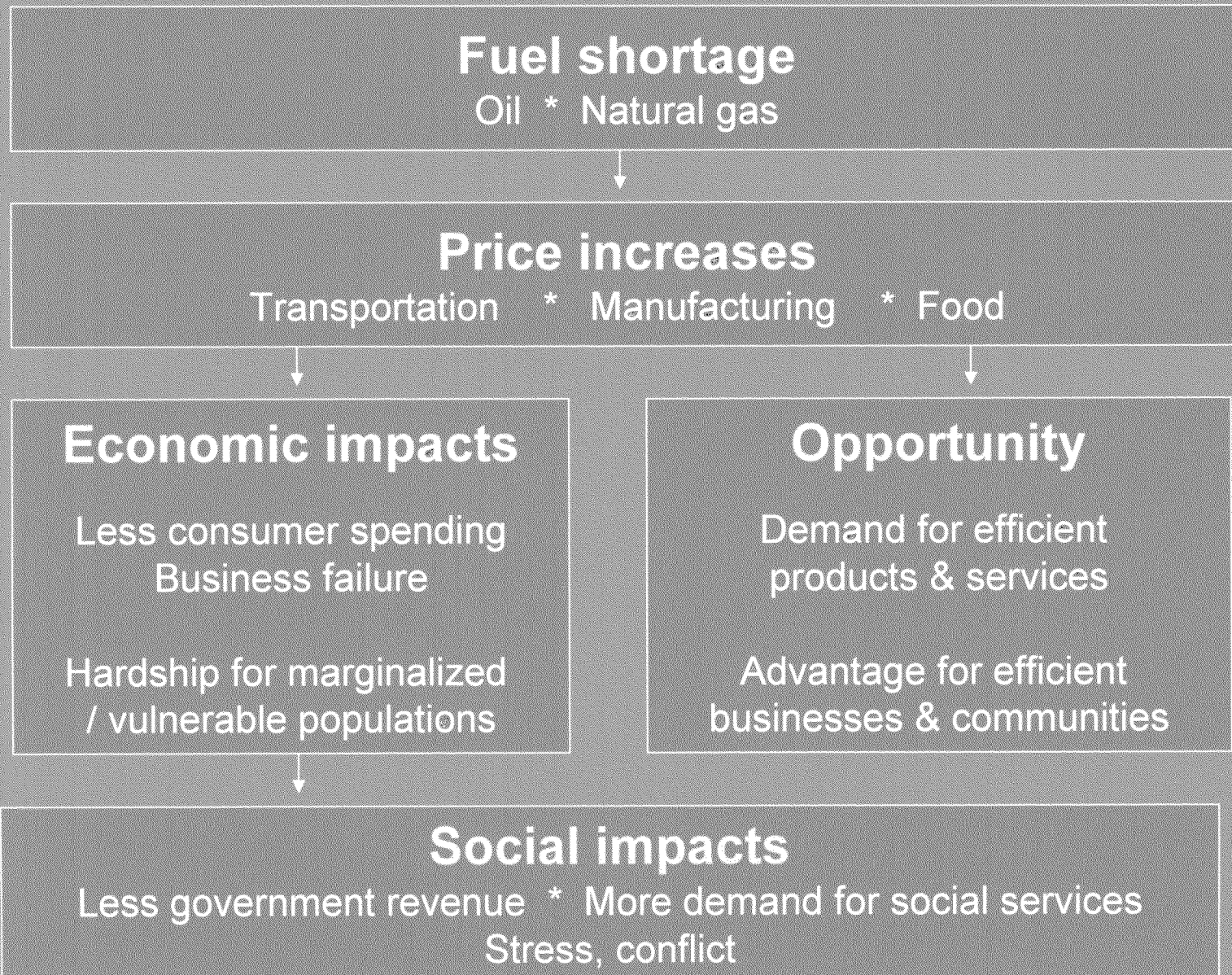
Schools

Utilities

City services

Food & agriculture

Impacts for all communities



Where does Portland stand?

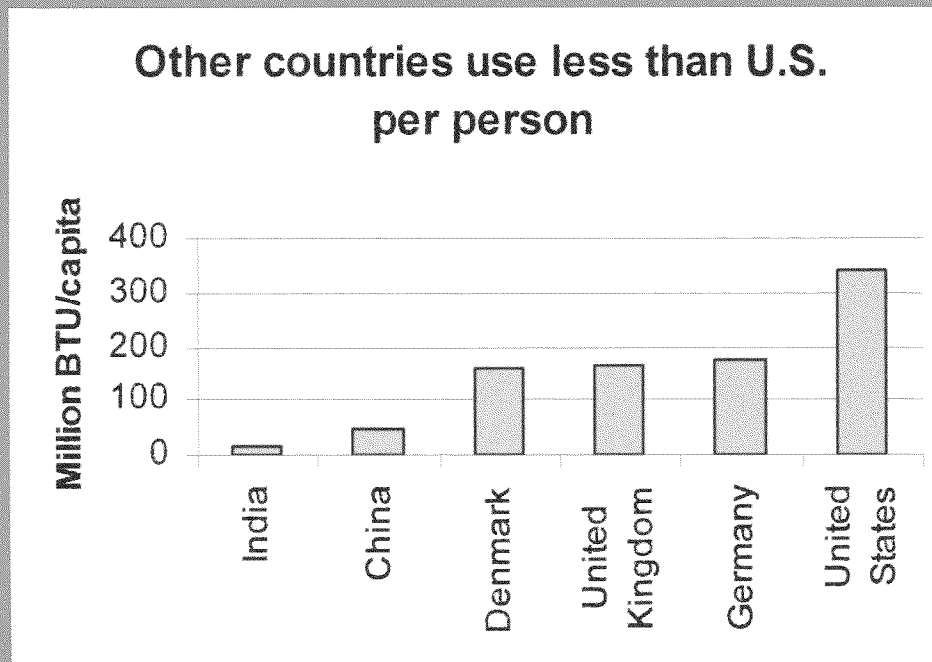
- + Ahead of most U.S. cities
- + City infrastructure, culture, reputation
- + Pioneering businesses

- Long way to go
- Advantages may lead to more population growth

Recommendation: Set a goal

1.Reduce oil and natural gas consumption by 50 percent over the next 25 years.

Reductions are achievable



✓ Efficient vehicles available

✓ Proven building technologies

Recommendation: Leadership

2. Inform citizens.

3. Engage business, government and community leaders.



Recommendation: Urban design

4. Support land use patterns that reduce transportation needs.
5. Design infrastructure to promote transportation options and efficient movement of freight.

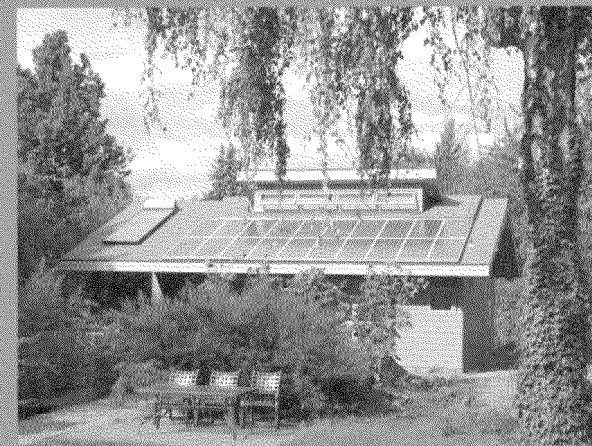


Recommendation: Energy efficiency and renewable energy

6. Encourage efficient and renewable transportation choices.



7. Expand building energy-efficiency programs.



Recommendation: Sustainable economic development and farm preservation

8. Preserve farmland and expand local food production.

9. Promote sustainable business opportunities.



Recommendation: Social, economic, and emergency support systems

**10. Protect vulnerable and
marginalized populations.**

11. Prepare emergency plans.

Recommendations

An integrated approach

- Multiple benefits
 - Social and community benefits
 - Environmental benefits: global warming, air quality
- Greater urgency and magnitude of effort
- Not a separate Peak Oil campaign
 - Part of a sustainability vision and action plan
 - Community partnership

Resolution

- Adopt the goal
- Document the baseline
- Mobilize City agencies
- Assign monitoring structure
- Engage community leaders & organizations



THE CITY OF PORTLAND

DESCENDING THE OIL PEAK: NAVIGATING THE TRANSITION FROM OIL AND NATURAL GAS

REPORT OF THE
CITY OF PORTLAND PEAK OIL TASK FORCE
MARCH 2007

INTRODUCTION: PREPARING FOR PEAK OIL

Every day, businesses, government agencies and households around the world plan and make decisions based on the assumption that oil and natural gas will remain plentiful and affordable. In the past few years, powerful evidence has emerged that casts doubt on that assumption and suggests that global production of both oil and natural gas is likely to reach its historic peak soon. This phenomenon is referred to as "peak oil." Given both the continuous rise in global demand for these products and the fundamental role they play in all levels of social, economic and geopolitical activities, the consequences of such an event are enormous. This report assesses Portland's vulnerabilities in the face of wide-ranging changes in global energy markets and provides an initial set of recommendations for addressing that challenge thoughtfully and prudently.

TASK FORCE CREATED BY CITY COUNCIL

In May 2006 Portland City Council adopted Resolution 36407 establishing the Peak Oil Task Force consisting of 12 citizens from a wide variety of backgrounds. The resolution charged the Task Force with examining the potential economic and social consequences of peak oil in Portland and developing recommendations to mitigate the impacts of rising energy costs and declining supplies. Over the past six months, the Task Force held more than 40 meetings and involved more than 80 stakeholders and interested citizens in gathering information.

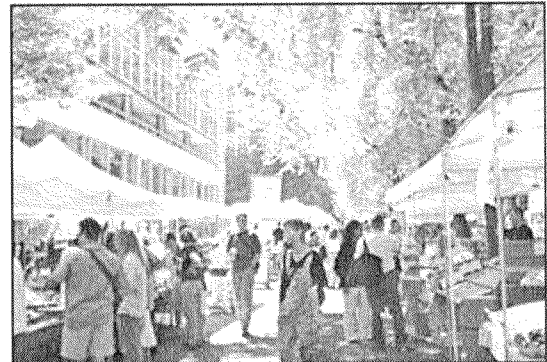
IMPACTS AND VULNERABILITIES: HIGH FUEL PRICES WILL CHANGE PORTLAND

Fifty years from now, the peak of global oil production will be a distant memory. Predictions for the year oil production will peak range from present day until 2040, with the most common estimates between 2010 and 2020. Despite the apparent breadth of current projections, even the most optimistic forecasts offer little time to adapt given the very long lead times required to change such things as transportation and building infrastructure.



Of all the impacts from rising oil prices, the clearest are those on transportation, which will experience profound pressure to shift toward more efficient modes of travel. For personal travel, this means transit, carpooling, walking, bicycling and highly efficient vehicles. Transportation of freight will become more costly and either decline or shift modes from air and truck to rail and boat. Population may shift to city centers, and density and mixed-use buildings will increase.

American food production and distribution have become highly dependent on fossil fuels, accounting for 17 percent of U.S. energy consumption. Because of this, higher oil and natural gas prices are expected to lead to a decline in the amount and variety of food produced and available locally, even with Portland's proximity to the agricultural production of the Willamette Valley. Food prices will rise, further straining the ability of low-income households to put food on the table.



Like agriculture, the economy as a whole is expected to experience significant disruption and volatility. Impacts will vary widely by industry and firm, and Portland has strengths in high technology and a relatively diversified transportation system. Portland also enjoys a strong and growing clean energy sector, which is likely to see increased demand. Nevertheless, many of Portland's industries are dependent on national and global markets, and business start-ups and failures are likely to increase.

Unemployment could increase. This is of particular concern, since social services are already stretched to their limits. Vulnerable and marginalized populations are likely to grow and will be the first and hardest hit by rising oil prices. Increasing costs and decreasing incomes will reduce health coverage and further stress the health care system, which is already in crisis. Heating, maintenance, and monthly housing costs will consume a larger share of household budgets and push people toward lower-quality housing choices at the same time that auto transportation costs increase dramatically. First responders, especially police, are likely to be further taxed as social service agencies struggle to meet demand.

RECOMMENDATIONS: ACT BIG, ACT NOW

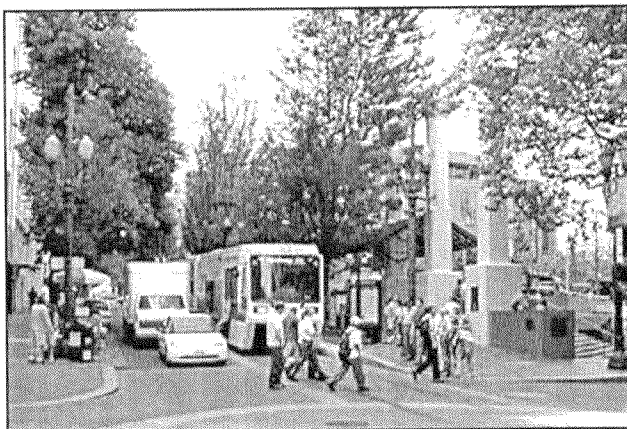
The Task Force findings illustrate the profound economic and social vulnerabilities that could result as fuel supplies cease to be abundant and inexpensive. The magnitude of this issue led the Task Force to explore bold and far-reaching solutions. The Task Force is unified in urging strong and immediate action.

The Task Force recommends preparedness on two different levels. Most of the recommendations seek to reduce Portland's exposure to rising fuel prices, anticipating the economic and lifestyle adjustments that will be needed in the future. Other recommendations prepare Portland to maintain community stability as volatile energy markets trigger conditions ranging from emergency shortages to longer-term economic and social disruption.

Reduce Portland's exposure: The Task Force proposes cutting oil and natural gas consumption in half, transforming how energy is used in transportation, food supply, buildings and manufacturing. It proposes strategies to maintain business viability and employment in an energy-constrained marketplace.

Strengthen community cohesion: However well Portland succeeds in its energy transition, it will not be able to isolate itself from global energy crises or the resulting economic implications. The Task Force sees the potential for profound economic hardship and high levels of unemployment, and it recommends having plans in place to adapt social and economic support systems accordingly. Similarly, contingency plans are needed for fuel shortages that may last for months or years, well beyond the time considered in existing emergency plans.

The Task Force recommends a comprehensive package of actions, proposing strategies to initiate institutional change and to motivate action by households and businesses. The recommendations



propose major changes for Portland, but the Task Force believes their implementation can have a positive social and economic impact as local residents and businesses spend less on imported fuels and redirect dollars into the local economy. This presents a significant economic development opportunity for Portland.

While all the recommendations are important, achieving a significant reduction in oil and natural gas use is a necessity for easing the transition to an energy-constrained future.

1. Reduce total oil and natural gas consumption by 50 percent over the next 25 years.

Leadership builds the public will, community spirit and institutional capacity needed to implement the ambitious changes. Leadership is needed to build partnerships to address these issues at a regional and statewide level.

2. Inform citizens about peak oil and foster community and community-based solutions.

3. Engage business, government and community leaders to initiate planning and policy change.

Urban design addresses the challenge at a community scale.

4. Support land use patterns that reduce transportation needs, promote walkability and provide easy access to services and transportation options.
5. Design infrastructure to promote transportation options and facilitate efficient movement of freight, and prevent infrastructure investments that would not be prudent given fuel shortages and higher prices.

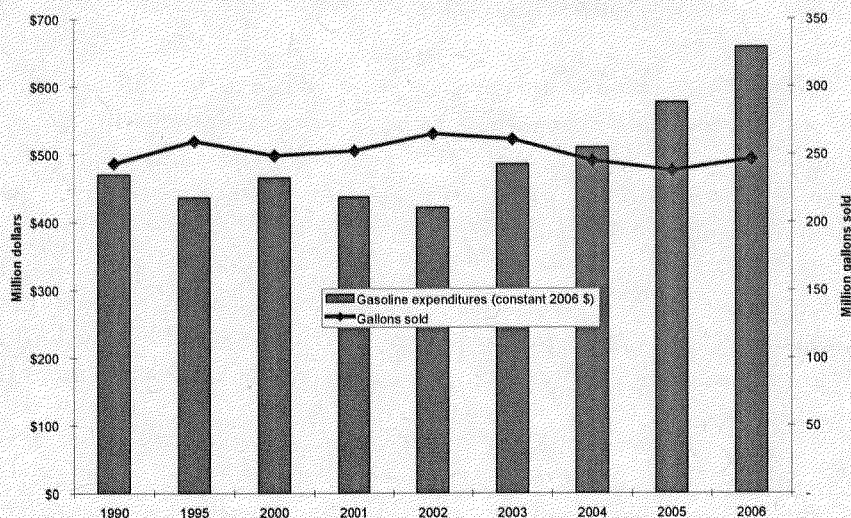
Expanded efficiency and conservation programs shape the many energy choices made by individual households and businesses.

6. Encourage energy-efficient and renewable transportation choices.
7. Expand building energy-efficiency programs and incentives for all new and existing structures.

Sustainable economic development fosters the growth of businesses that can supply energy-efficient solutions and provide employment and wealth creation in a new economic context.

8. Preserve farmland and expand local food production and processing.
9. Identify and promote sustainable business opportunities.

**GASOLINE SALES AND EXPENDITURES
(MULTNOMAH COUNTY)**



Social and economic support systems will be needed to help Portlanders dislocated by the effects of fuel price increases.

10. Redesign the safety net and protect vulnerable and marginalized populations.

Emergency plans should be in place to respond to sudden price increases or supply interruptions.

11. Prepare emergency plans for sudden and severe shortages.

Each of these 11 major recommendations is accompanied by a series of action items detailing how it can be implemented.

NEXT STEPS

A number of the recommendations imply the need for a central program to coordinate goal setting, tracking and communications. Other recommendations are policies, programs or projects to be implemented by specific bureaus or groups of bureaus. The Task Force proposes that a team of city staff be appointed to translate these recommendations into a funded, operational course of action.

Acting on this report, however, does not need to await further study or analysis. City bureaus can immediately look for ways to incorporate these energy concerns and impacts into ongoing planning activities and educational programs around sustainable development. City Council can challenge bureaus to align their investments and activities with the recommendations outlined in this report.

Finally, the Task Force members would like to express their willingness to continue assisting the City of Portland as it engages City staff and the public about peak oil and Portland's energy future.

CITY OF PORTLAND PEAK OIL TASK FORCE MEMBERS

Affiliations are provided for identification purposes and are not intended to represent the formal participation of any agency or organization.

Richard Benner, Metro

Christine Caruso, MCM Architects and Portland Planning Commission

David Cohan, Portland Peak Oil and Northwest Energy Efficiency Alliance

Angela Crowley-Koch, Oregon Chapter of Physicians for Social Responsibility

Lesa Dixon-Gray, Oregon Department of Human Services

Allen Lee, Quantec

Jeanne Longley, Zero Waste Alliance

Bill Scott, Flexcar

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Sam Adams, Commissioner



CITY OF PORTLAND, OREGON
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