

# NOTICE FOR THE CITY OF HUBBARD SPECIAL MEETING

TUESDAY

AUGUST 25, 2020

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CITY COUNCIL: ROSTOCIL, AUDRITSH, PRINSLOW, DODGE, THOMAS  
.....

The Hubbard City Council will meet for its regular council meeting using Zoom. Members of the public may attend **via conference call or electronic device**. This is to enable interested citizens to listen to the meeting. All public comment is suspended during this meeting due to platform restrictions. **Should you wish to speak at the meeting, you may sign up by completing the form on the City's webpage or calling City Hall 48 hours prior to the meeting.** (Comments may be limited at the Mayor's and/or Council President's discretion.)

<https://www.cityofhubbard.org/bc/webform/sign-if-you-want-speak-meeting>)

Join Zoom Meeting

<https://us02web.zoom.us/j/84319391613?pwd=Zm9WUmNmQ2lmWWN4M05lR3Z5d2tOZz09>

Meeting ID: 843 1939 1613

Passcode: 631943

One tap mobile

+16699006833,,84319391613#,,,,,0#,,631943# US (San Jose)

+12532158782,,84319391613#,,,,,0#,,631943# US (Tacoma)

Dial by your location

+1 669 900 6833 US (San Jose)

+1 253 215 8782 US (Tacoma)

+1 346 248 7799 US (Houston)

+1 408 638 0968 US (San Jose)

+1 301 715 8592 US (Germantown)

+1 312 626 6799 US (Chicago)

+1 646 876 9923 US (New York)

Meeting ID: 843 1939 1613

Passcode: 631943

Find your local number: <https://us02web.zoom.us/u/k4sJxvjQ>

## \*\*\*\*\*ACCESSABILITY NOTICE\*\*\*\*\*

**Please contact the Director of Administration/City Recorder prior to the scheduled meeting if you need assistance accessing this electronic meeting at the following: [vnogle@cityofhubbard.org](mailto:vnogle@cityofhubbard.org); Phone No. 503.981.9633; or Hubbard City Hall, 3720 2<sup>nd</sup> St., Hubbard OR 97032. TTY users please call Oregon Telecommunications Relay Service at 1-800-735-2900.**

Agendas are posted at City Hall and on the City website at [www.cityofhubbard.org](http://www.cityofhubbard.org). You may schedule Agenda items by contacting the Director of Administration/City Recorder Vickie Nogle at 503-981-9633. (TTY / Voice 1-800-735-2900)

SEE ATTACHED AGENDA

Posted 8/20/2020, 4:00 p.m.

Vickie L. Nogle, MMC

Director of Administration/City Recorder

**HUBBARD CITY COUNCIL  
SPECIAL MEETING AGENDA  
CITY HALL: (503)981-9633  
AUGUST 25, 2020 – 6:30 PM**

**LOCATION: VIRTUAL - YOU MAY CALL OR LOG IN WITH AN  
ELECTRONIC DEVICE -  
*Refer to Cover Sheet for details***

**MEETING Notice:** The City Council and Staff will meet virtually using Zoom. Members of the public may attend via conference call or electronic device. This is to enable interested citizens to listen to the meeting. All public comment is suspended during this meeting due to platform restrictions. **Should you wish to speak at the meeting, you may sign up by completing the form on the City's webpage or calling City Hall 48 hours prior to the meeting.** (Comments may be limited at the Mayor and/or Council President's discretion.)

**<https://www.cityofhubbard.org/bc/webform/sign-if-you-want-speak-meeting>**

- 1) **CALL TO ORDER.**
  - A) Flag Salute.
  - B) Roll call.
- 2) **REVIEW TELECOMMUTING POLICY – Mayor Charles Rostocil.**
- 3) **ADJOURNMENT.** (Next regular scheduled City Council Meeting September 8, 2020, at 7:00 p.m.)

**\*\*\*\*\*ACCESSABILITY NOTICE\*\*\*\*\***

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#### **6.14.03 Emergency Situations**

The need to prevent a threat from being carried out, a violent act from occurring, or a life-threatening situation from developing supersedes any rule, practice, or procedure that may appear to prohibit taking action to avoid violence.

#### **6.14.04 Notification Requirements**

All employees must notify their supervisors or a Department Head of any threat that they have witnessed, received, or have been told that another person has witnessed or received. Even without an actual threat, employees should also report any suspicious behavior that relates to City property or City employees. All supervisors are responsible for taking workplace violence issues seriously and following prevention policies and procedures as appropriate.

#### **6.15.05 Copy of Certification Order**

All individuals who obtain a protective or restraining order which lists the City property as protected areas must provide their Department Head and the Hubbard Police Department with a copy of the order. The City understands the sensitivity of the information requested and will recognize and respect the privacy of the reporting employees.

### **6.15 PURCHASING POLICY AND PROCEDURES**

All purchases shall be approved through the Department Head or the Department Head designee and are subject to the City's purchasing policies and procedures.

### **6.16 TELECOMMUTING**

The City may consider telecommuting where there are opportunities for improved employee performance, reduced commuting miles, and/or the potential for City savings. Telecommuting is defined as work and transportation alternatives that substitute home-to-work commuting with the option of working at home or elsewhere. Telecommuting is not suitable or available for all employees and/or positions.

Participation in the City's telecommuting program is at City's option. The City may terminate telecommuting at any time with reasonable advance notice (discussed below).

#### **6.16.01 Eligibility**

Employees seeking formal telecommuting arrangements must meet, at a minimum, the following requirements:

- Employed with City for a minimum of six months of continuous, regular employment at the time the telecommuting arrangement is requested;
- Demonstrated excellent working habits; and
- Employed in a position where face-to-face communication is required on a minimal basis.

City will make an exception to these eligibility requirements when an employee with a "disability" under federal or Oregon law requests telecommuting as a reasonable accommodation and provides verification from a health care provider of the Employee's need for telecommuting

(subject to City's determination of whether providing telecommuting as an accommodation would create an undue hardship on City's operations).

City reserves the right to add to or change any of the eligibility requirements described in this policy. Employees requesting formal telecommuting arrangements must agree to enter into a Telecommuting Agreement with City. See "Requesting a Telecommuting Arrangement," below.

#### **6.16.02 General**

An employee's work schedule may include telecommuting on either a part-time or full-time basis. Telecommuting can be informal, such as working from home for a short-term project, during inclement weather, or on the road during business travel, or formal, as described below. All informal telecommuting arrangements are made on a case-by-case basis, focusing first on the business needs of the City.

Any telecommuting arrangement made will be on a trial basis for the first three months, and may be discontinued, at will, at any time at the request of either the employee or the City. At the conclusion of the trial period employee and his/her manager will each complete an evaluation of the arrangement and make recommendations for continuance or modifications.

The employee's duties, obligations, and responsibilities remain unchanged during the telecommuting arrangement. The employee will meet or communicate with his/her manager to receive assignments, review work progress, and complete work as often as the manager believes is necessary. A manager has discretion to decide whether employee will work exclusively outside of the office, or a certain number of hours each week in the office.

Employee's salary, benefits, worker's compensation, and other City insurance coverage will not change due to telecommuting, if the working hours remain the same.

Travel from employee's home to City will be considered commuting mileage and will not be reimbursed.

Professionalism in terms of job responsibilities, work products, and customer or public contact will continue to follow the same high standards as currently being met by City employees. *Employees will be expected to adhere to all City policies during the course of employee's telecommuting arrangement with City.*

Telecommuting is not a substitute for dependent care. Telecommuters are required to make arrangements for dependent care during the agreed-upon work hours. Employee may be required to provide information regarding dependent care arrangements.

Telecommuting employees shall not perform personal business or activities during agreed-upon work hours.

While telecommuting, employee must be reachable via telephone, fax, network access, or e-mail during agreed-upon work hours. Employee and his/her supervisor will determine how much

interaction is required on a daily or weekly basis, and how these interactions should occur (email, phone, Skype, etc.).

The availability of telecommuting can be discontinued at any time at City's discretion. Every effort will be made to provide 30 days' notice of such a change to accommodate commuting, child care, and other problems that may arise from such a change. There may be instances, however, when no notice is possible.

#### **6.16.03 Work Site**

A designated workspace shall be maintained by employee that is quiet, free of distractions, and kept in a clean, professional, and safe condition, with adequate lighting and ventilation. To ensure that safe working conditions exist, City retains the right to make on-site inspections of the workspace, including home workspace, at mutually agreed-upon times.

City is not responsible for operating costs, home maintenance, property or liability insurance, or other incidental expenses (utilities, cleaning services, etc.) associated with the use of employee's residence.

City is not liable for damages to the employee's property that may result from participating in the telecommuting program.

#### **6.16.04 Supplies, Equipment, and Software Usage**

Equipment provided by City to employee to assist with telecommuting will be maintained by City. Equipment supplied by employee, if deemed appropriate by City, will be maintained by the Employee. City accepts no responsibility for damage or repairs to employee-owned equipment. City reserves the right to make determinations as to appropriate equipment, subject to change at any time. Employee will be responsible for taking all necessary action to protect City's equipment against damage or theft. Upon termination of employment, all City property will be returned to City.

Employee out-of-pocket expenses for supplies, which are normally available in the employee's regular work location, will not be reimbursed. Other supplies, as needed, must be requested by the employee and approved by the manager.

Employee will provide his/her own Internet access and equipment necessary to access the Internet.

Use of City equipment, communications and software systems by telecommuting employees is subject to City's policies on City equipment as described in these policies.

- A computer used for City business must be plugged into a surge protector and have current virus protection maintained.
- Restricted-access materials shall not be removed from the City or accessed through the computer unless approved in advance by employee's manager and the appropriate security access administrator.

Employee shall promptly notify his/her manager when unable to perform work assignments due to the equipment failure or other unforeseen circumstances. The employee may be assigned to another project that may necessitate termination of the telecommuting agreement. Non-exempt employees will have their pay adjusted to reflect all telecommuting hours that are not worked due to equipment failure or other unforeseen circumstances.

#### **6.16.05 Requesting a Telecommuting Arrangement**

Employees interested in requesting a telecommuting arrangement should speak with their Department Head. Employee and his/her supervisor must discuss the suitability of a telecommuting arrangement and consider, among other issues, the employee's needs and work habits (compared to the environment in which employee would work as a telecommuter); whether the job performed by the employee is appropriate for telecommuting; equipment needs; workspace considerations; and scheduling issues. If employee and his/her manager agree on these issues, a telecommuting agreement will be prepared and signed by all parties.

Because an employee in a telecommuting arrangement is solely responsible for any tax or licensing requirements for working as a telecommuter, employees are strongly encouraged to consult with a financial consultant or other expert about these issues.

# CITY OF HUBBARD

3720 2nd Street • P.O. Box 380      Hubbard, Oregon 97032

503-981-9633 Fax: 503-981-8743

[www.cityofhubbard.org](http://www.cityofhubbard.org)



## Temporary City Policy: Response to COVID-19

The purpose of this temporary policy is to recognize that the novel coronavirus, also known as COVID-19, may impact the City of Hubbard locally. Our employees are at the forefront of our concern as we work to adapt quickly to this emerging public health threat and navigate new business practices in order to continue to serve our community to the best of our abilities. It is in times like these that our community may need our services the most.

### Definitions:

**Novel Coronavirus / COVID-19:** A respiratory disease caused by a novel (new) coronavirus. The virus has been named "SARS-CoV-2" and the disease it causes has been named "coronavirus disease 2019" (abbreviated "COVID-19").

**Curtailed Operations:** A change or reduction to the routine services, service levels, activities and functions of any given office, department or division.

**Household Member:** Any other person who resides in the employee's household.

**Immediate Family:** As defined by Oregon Family Leave Act: the spouse, same-gender domestic partner, custodial parent, non-custodial parent, adoptive parent, foster parent, biological parent, step parent, parent-in-law, parent of same-gender domestic partner, grandparent or grandchild of the employee, or a person with whom the employee is or was in a relationship of in loco parentis. It also includes the biological, adopted, foster or stepchild of an employee or the child of an employee's same-gender domestic partner. For the purposes of OFLA, an employee's child in any of these categories may be either a minor or an adult at the time serious health condition leave, sick child leave, or leave under ORS659.159(1)(e) is taken.

**Isolation:** A method to separate sick people with a contagious disease from people who are not sick. Isolation is a term applied to infection control actions that are taken by public health officials to stop or slow down the spread of a highly contagious disease.

**Medical Advice:** Information or advice received from a medical professional.  
**Quarantine:** Quarantine separates and restricts the movement of people who were exposed to a contagious disease to see if they become sick.

**Social Distancing:** Measures taken to restrict when and where people can gather to stop or slow the spread of infectious diseases. Social distancing measures include limiting large groups of people coming together, closing buildings, and canceling events.

**Telecommuting:** A work arrangement in which the employee works outside the normal work site, often working from home.

**Marion County Health Department:** The regional health authority for public health concerns in Marion County.

**General Policy:** The City of Hubbard is following the guidance of the Oregon Health Authority (OHA), Centers for Disease Control (CDC), and Marion County Health Department. The City is adhering to the recommendations of these agencies regarding preventative measures including social distancing, quarantines, and possible curtailment of non-essential City functions. The City will continue to adjust as the recommendations of these agencies change. This policy applies to all employees, and specifically those who fall into one of the following categories:

1. An employee or an employee's dependent or household member who is under observation, being monitored or has been diagnosed with COVID-19;
2. An employee or a household member who falls into one of the categories identified by the CDC as being at high risk for serious complications from COVID-19 and has been advised by a medical professional or public health authority not to leave their home or come to work;
3. The school or daycare center of an employee's dependent has closed due to COVID-19;
4. Supportive services for an employee's dependent (such as medical transportation, in-home care providers, etc.) are unavailable due to COVID-19 which requires them to care for that dependent;
5. Public or alternative transportation is unavailable due to COVID-19 and an employee is unable to travel to and from work; OR
6. In the event that the CDC or OHA directs the City to take advanced steps such as social distancing, quarantines or curtailment of non-essential City functions, this policy would then pertain to all but a few staff providing essential services.

## Policy Guidelines:

1. Employees who fall into one of the six General Policy categories above and cannot telecommute may use Payroll Code (COVID-19 Type) 'Administrative Leave' and Reason Code 'COVID-19 Absence' to account for the absence.
  - a. Reason Code 'COVID-19 Absence' will pay an employee's regular wage without utilizing leave accruals.
  - b. This Reason Code does not identify whether or not an employee is ill; but instead is used for the sole purpose of tracking expenses associated with the City's response to COVID-19,
  - c. If employees utilize Reason Code 'COVID-19 Absence' they must complete the Coronavirus / COVID-19 Absence Form (see attachment A) and turn it in to their direct supervisor before submitting a timecard with this reporting category.
  - d. The direct supervisor will then forward the completed form to the Director of Administration/City Recorder via email: [vlno@cityofhubbard.org](mailto:vlno@cityofhubbard.org). Supervisors shall not retain a copy of this form in their supervisor file.
2. Employees who do not fall into one of the six categories listed in the General Policy section above must utilize their accruals per the City's existing policies or procedures if they wish to be absent from work.
3. Telecommuting Option: If an employee meets one of the six General Policy categories but is not ill.
  - a. The employee shall first attempt to utilize telecommuting in order to serve the public in the best possible manner.
  - b. When an employee is in a position with telecommuting capabilities, they shall talk with their supervisor to gain approval and make appropriate arrangements for telecommuting.
  - c. When telecommuting, employees must be available via computer or phone and provide a contact phone number where they can be easily and readily reached during their regular work day while working remotely from the work site.
  - d. If an employee is not in a position with telecommuting capabilities and is unable to come to work for reasons mentioned in one of the six General Policy categories above, Reporting Category 'COVID-19 Absence' should be utilized to account for time away from work.
4. Employees who are diagnosed with COVID-19 will be approved for FMLA/OFLA leave for 80 hours (or two weeks of the employee's shifts.)

No FMLA/OFLA paperwork will be required for the first 80 hours of this leave. If the employee wishes to request FMLA/OFLA leave in excess of the 80 hours they will be required to complete the appropriate paperwork. In this situation their pay status will be converted to FMLA/OFLA leave.

5. Exceptions: Exceptions to this temporary policy may only be granted by the City Council or designee. Any situation or circumstance not covered in this temporary policy shall be governed by existing City policies and procedures.
6. Implementation: Elected officials, department directors and all supervisory staff are responsible for implementing this policy within their respective departments. Observance of this policy is mandatory for all City employees and violation may result in disciplinary action (up to and including termination.)
7. Review: This temporary policy shall be reviewed by the City's Executive Team at least every 14 days and updated or revoked as necessary. This temporary policy is only in effect during the time period covered by the COVID-19 Emergency Declaration issued by the State of Oregon.

#### 8. Resources

- 7.1 Marion County Health Department (<https://www.co.marion.or.us/HLT>)
- 7.2 Oregon Health Authority (<https://www.oregon.gov/oha/pages/index.aspx>)
- 7.3 Centers for Disease Control (<https://www.cdc.gov/>)
- 7.4 2-1-1(<http://211.org/>, or dial 2-1-1)

Established 3/17/2020

Approved 3/17/2020

 3/17/2020

Vickie Nogle, MMC

Director of Administration/City Recorder

## **Attachment A: Coronavirus/COVID-19 Employee Absence Form**

The City of Hubbard prioritizes the health and safety of its employees. We recognize that the current novel coronavirus, also known as COVID-19, may impact the City of Hubbard locally. Our employees are at the forefront of our concern as we work to adapt quickly to the changing health scene and navigate new business practices in order to continue to serve our citizens to the best of our abilities. It is in times like these that our community may need our services the most.

The City of Hubbard is following the guidance of the Oregon Health Authority, Centers for Disease Control and Marion County Public Health Division.

City of Hubbard employees who need to be absent from work due to reasons outlined in the six categories below AND are unable to telecommute, please complete and submit this form. **If you are able to telecommute, this form is not necessary. Talk with your supervisor to make appropriate arrangements.**

Once completed and submitted, this form will remain valid for 14 calendar days following its certification and submission. If an extension for the absence becomes necessary, a new form must be submitted.

The Payroll Reason Code "COVID-19 Absence" is appropriately used on time sheets only for circumstances listed below. This Payroll Reason Code does not identify that an employee is ill; rather the code is used to track expenses associated with the City's response to the COVID-19. **Please see Temporary Administrative Policy: Response to COVID-19 for more information.**

**If you must be absent from work for any of the following reasons, please complete this form and submit it to your supervisor. Use typed or electronic signatures. Do not print and sign this form.**

### Form Instructions:

1. Answer the bolded question below without specifying which of the six categories applies to you. Simply check "Yes" or "No" below.
2. Submit the form via email to your supervisor.
3. Supervisors will forward the form to HR at [vlnoyle@cityofhubbard.org](mailto:vlnoyle@cityofhubbard.org). Supervisors – DO NOT retain a copy of this form.
4. If you record work hours on a paper time sheet please note "COVID-19" for related absences.

I am unable to come to work due to one or more of the following reasons:

1. I, or a household member, are under observation, being monitored or have been diagnosed with COVID-19;
2. I, or a household member, fall into one of the categories identified by the CDC as being at high risk for serious complications from COVID-19 and have been advised by a medical professional or public health authority not to come to work.
3. My dependent's school or daycare center has closed due to COVID-19;
4. I rely on other supportive services to care for my dependent (such as medical transportation, in-home care providers, etc.) that are unavailable due to COVID-19, which requires me to care for that dependent;
5. Public or alternative transportation is unavailable to me due to COVID-19 and I am unable to travel to and from work; OR
6. The CDC or OHA have deemed it necessary to take advanced steps such as social distancing, quarantines and possible curtailment of non-essential City functions.

**I certify that I am unable to come to work because of one of the six reasons listed above. I understand that this absence authorization expires 14 calendar days after submission.**

Yes     No (required to use accruals)

Name: \_\_\_\_\_ Department: \_\_\_\_\_

Position: \_\_\_\_\_ Supervisor: \_\_\_\_\_

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

Regular Schedule: \_\_\_\_\_