# FINANCIAL IMPACT STATEMENT For Council Action Items

(Deliver original to Financial Planning Division. Retain copy.)

Becky Chiao	503-823-6124	3. Bureau/Office/Department OMF/Risk Management
4a. To be filed (date) April 1, 2010	4b. Calendar (Check One)  Regular Consent 4/5ths	5. Date Submitted to FPD Budget Analyst March 24, 2010

1) Legislation Title: \*Pay Claim of Nicole Whitley.

2) Purpose of the Proposed Legislation: This ordinance will close OMF Risk Management File No. G2006-8010-01 for a total of \$170,000.00. Please see memorandum for detail.

#### 3) Revenue:

Will this legislation generate or reduce current or future revenue coming to the City? If so, by how much? If new revenue is generated please identify the source.

This legislation will have no impact on City revenue.

### 4) Expense:

What are the costs to the City as a result of this legislation? What is the source of funding for the expense? (Please include costs in the current fiscal year as well as costs in future years) (If the action is related to a grant or contract please include the local contribution or match required)

Cost to the City is \$170,000.00. The source of funding is the City's Insurance and Claims Fund. All cost is in the current fiscal year.

## **Staffing Requirements:**

5) Will any positions be created, eliminated or re-classified in the current year as a result of this legislation? (If new positions are created please include whether they will be part-time, full-time, limited term or permanent positions. If the position is limited term please indicate the end of the term.)

No.

6) Will positions be created or eliminated in future years as a result of this legislation?

No.

Complete the following section only if an amendment to the budget is proposed.

7) Change in Appropriations (If the accompanying ordinance amends the budget please reflect the dollar amount to be appropriated by this legislation. Include the appropriate cost elements that are to be loaded by accounting. Indicate "new" in Center Code column if new center needs to be created. Use additional space if needed.)

Fund	Fund Center	Commitment Item	Functional Area	Funded Program	Grant	Amount
			P C			
Jeff Ba	er, Director, BIB	s	1 m			
Kate W	ood, Risk Manag	ger <u>kathl</u>	me me	rd .		

APPROPRIATION UNIT HEAD (Typed name and signature)



# **CITY OF PORTLAND, OREGON**

# Office of Management and Finance Risk Management Services

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**DATE:** March 19, 2010 FOR MAYOR'S OFFICE USE ONLY TO: Mayor Sam Adams Reviewed by Bureau Liaison FROM: Becky Chiao 503-823-6124 Pay Claim of Nicole Whitley (emergency) RE: 1. INTENDED THURSDAY FILING DATE: April 1, 2010 2. REQUESTED COUNCIL AGENDA DATE: April 7, 2010 3. CONTACT NAME & NUMBER: Becky Chiao, 503-823-6124 4. PLACE ON: CONSENT ✓ REGULAR 5. BUDGET IMPACT STATEMENT ATTACHED: ✓ Y 6. (3) ORIGINAL COPIES OF CONTRACTS APPROVED AS TO FORM BY CITY ATTORNEY ATTACHED:

#### 7. BACKGROUND/ANALYSIS

Nicole Whitely was a probationary employee of the Portland Police Bureau. Ms. Whitley filed a lawsuit claiming that she was unlawfully retaliated against for reporting an incident involving State of Oregon training staff at the Department of Public Safety Standards and Training Basic Academy that all police recruits must attend.

Risk Management and the City Attorney's office have reached a negotiated settlement to resolve the case without a trial. Ms. Whitley sought back pay, emotional damages, reinstatement and attorney's fees, which could amount to significantly more than the settlement amount. We therefore seek approval from City Council in the form of the attached ordinance.

## 8. FINANCIAL IMPACT

Approval of the settlement would result in a payment of \$170,000.00 from the liability fund.

## 9. RECOMMENDATION/ACTION REQUESTED

Submit the attached Ordinance for approval by City Council as an emergency ordinance.