

RESOLUTION NO. 5555-21

A RESOLUTION AUTHORIZING THE PROVISION OF WORKERS' COMPENSATION INSURANCE COVERAGE TO VOLUNTEERS OF THE CITY OF TUALATIN.

WHEREAS, workers compensation insurance provides a benefit to injured workers and protects the City from liability;

WHEREAS, under ORS 656.031, the City may choose to extend workers compensation coverage to City volunteers;

WHEREAS, an assumed monthly wage of \$800 per month will be used for public safety volunteers;

WHEREAS, an aggregate assumed annual wage of \$2,500 will be used per volunteer board and commission for the performance of administrative duties;

WHEREAS, non-public safety volunteers will track their hours and the Oregon minimum wage will serve as the assumed wage for both premium and worker's compensation benefit calculations, and Saif Oregon Workers Compensation will assign the appropriate classification code according to the type of volunteer work being performed;

WHEREAS, volunteers at public events will be covered under workers' compensation coverage using verified hourly Oregon minimum wage as basis for premium and/or benefit calculation; and

WHEREAS, the City of Tualatin agrees to maintain verifiable rosters for all volunteers including volunteer name, date of service and hours of service and make them available at the time of a claim or audit to verify coverage; and

WHEREAS, the City is requesting the coverage, as provided by ORS 656.031, and as approved by SAIF.

BE IT RESOLVED BY THE CITY COUNCIL OF THE CITY OF TUALATIN, OREGON, that:

Section 1. Pursuant to ORS 656.031, the City of Tualatin will provide workers' compensation coverage for the Policy Year 2021-2022 to the classes of volunteer workers listed in this resolution and in Attachment A, which is attached and incorporated herein, listing volunteer assignments, noted on SAIF payroll schedule and verified at audit.

Section 2. Workers Compensation coverage under this resolution does not apply to current members of the City Council.

Section 3. This resolution is effective upon adoption.

INTRODUCED AND ADOPTED this 28th day of June, 2021.

CITY OF TUALATIN, OREGON

BY _____
Mayor

APPROVED AS TO FORM

BY _____
City Attorney

ATTEST:

BY _____
City Recorder

**ATTACHMENT A
RESOLUTION NO. 5555-21**



**City of Tualatin
Volunteer Resolution**

Resolution No.: 5555-21

Effective Date: 07/01/2021

A resolution extending workers' compensation coverage to volunteers of the City of Tualatin in which the City of Tualatin elects the following:

Pursuant to ORS 656.031, workers' compensation coverage will be provided to the classes of volunteers listed in this resolution, noted on SAIF payroll schedule, and verified at audit:

1. Public Safety Volunteers

Applicable _____ **Non-applicable** **X**

An assumed monthly wage of **\$800 per month** will be used for public safety volunteers in the following volunteer positions (check all that apply):

- Police reserve
- Search and rescue
- Firefighter
- Emergency medical personnel
- Ambulance drivers
- Other *[List specifically by title]*

2. Volunteer boards, and commissions for the performance of administrative duties.

Applicable **X (except elected officials serving on boards)** **Non-applicable** _____

a. An aggregate assumed annual wage of \$2,500 will be used per each volunteer board, commission, or council for the performance of administrative duties. The covered bodies are (list each body):

- a. Tualatin Planning Commission
- b. Tualatin Budget Advisory Committee
- c. Tualatin Architectural Review Board
- d. Tualatin Library Advisory Committee
- e. Tualatin Parks Advisory Committee
- f. Tualatin Arts Advisory Committee

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- g. Tualatin Core Area Parking District Board
- h. Juanita Pohl Center Advisory Committee

3. Manual labor by elected officials.

Applicable _____ **Non-applicable** X _____

An assumed monthly wage of \$800 per month will be used for public officials for the performance of non-administrative duties other than those covered in paragraph 2 above

4. Non-public safety volunteers

Applicable X **Non-applicable** _____

All non-public safety volunteers listed below will track their hours and Oregon minimum wage will serve as assumed wage for both premium and benefits calculations. SAIF will assign the appropriate classification code according to the type of volunteer work being performed. (List specific non-public safety volunteers below)

- X Parks and Recreation
- X Senior Center
- X Public Works
- X Library
- X Juanita Pohl Center
- X Operations
- X Police
- X Community Development
- X Finance
- X Administration
- X Legal
- X Information Services

5. Public Events

Applicable X **Non-applicable** _____

Volunteers at the following public events will be covered under workers' compensation coverage using verified hourly Oregon minimum wage as basis for premium and/or benefit calculation: (List specific events)

- a. MLK Day of Service
- b. Arbor Week
- c. Blender Dash
- d. Concerts in the Park
- e. Crawfish Festival
- f. Viva Tualatin

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- g. Tualatin Youth Advisory Council Haunted House
- h. West Coast Giant Pumpkin Regatta
- i. Starry Nights and Holiday Lights
- j. Holiday Car Light Parade

6. Community Service Volunteers/Inmates

Applicable _____ Non-applicable X

7. Other Volunteers

Volunteer exposures not addressed here will have workers' compensation coverage if, prior to the onset of the work provided that the City of Tualatin:

- a. Provides at least two weeks' advance written notice to SAIF underwriting requesting the coverage
- b. SAIF approves the coverage and date of coverage
- c. SAIF provides written confirmation of coverage

The City of Tualatin agrees to maintain verifiable rosters for all volunteers including volunteer name, date of service, and hours of service and make them available at the time of a claim or audit to verify coverage.

Now, therefore, be it resolved by the City Council of the City of Tualatin, Oregon to provide workers' compensation coverage as indicated above.

Adopted by the **City of Tualatin and the City Council** this 28th day of June, 2021.

Please see the original Resolution for signatures/authority.

Signature of Authorized Representative Printed Name Title

Attest by _____ this _____ day of _____, 20____.
Printed Name

Signature Title