



MULTNOMAH COUNTY AGENDA PLACEMENT REQUEST

(Revised: 8/18/11)

Board Clerk Use Only

Meeting Date: 2/16/12
 Agenda Item #: R.4
 Est. Start Time: 9:50 am
 Date Submitted: 2/1/12

Agenda Title: **RESOLUTION Confirming the Hiring of Susan Myers**

Note: If Ordinance, Resolution, Order or Proclamation, provide exact title. For all other submissions, provide a clearly written title sufficient to describe the action requested.

Requested Meeting Date: 2/16/12 **Time Needed:** 15 minutes
Department: Chair's Office **Division:** _____
Contact(s): Rachel Philofsky
Phone: 86803 **Ext.** _____ **I/O Address:** _____
Presenter Name(s) & Title(s): Joanne Fuller, Chief Operating Officer

General Information

1. What action are you requesting from the Board?

The Chair is requesting Board confirmation of the hiring of Susan Myers as director of the Department of County Human Services (DCHS).

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.

Susan comes to us from Broward County, Florida where she served for three years as the director of their Department of County Human Services. Prior to that, Susan had a distinguished career in Alachua County, Florida as a program manager and department deputy director. Susan has a masters degree in education with a background in addictions treatment, anti-poverty services, and community services. Susan received glowing references from the county leadership in the two counties where she has worked for most of her career. She was strongly recommended by a broad hiring panel and her hiring is supported by the Chair of the DCHS Community Budget Advisory Committee. Please review Susan's attached resume and the Resolution affirming this vote.

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
Director:



Date: 2-1-12