

September 7, 2017

Dear Madam Chair and Multnomah County Commissioners:

I am very proud to have served in various leadership roles in Multnomah County for almost 12 years since 2000. I am a fourth generation Portlander, and my grandfather retired from the County in 1970. My values have always aligned with County leadership's commitment to health equity and diversity. I have been proud to serve as Public Health Director since January 2015. As an African American woman serving in this role, I am the first and only local Public Health Director in the County and the state of Oregon who is not White. Prior to this role, I served the County in multiple roles with increasing leadership from 2000 - 2009, working on projects with departmental and county-wide impact, as well as national recognition. I have received formal commendations, appreciation from community partners, and positive feedback and performance reviews throughout my tenure with the County. However, my experience at Multnomah County changed drastically in the last few months. I need your help to address it.

In April 2017, for the first time in my career, I took a FMLA leave to care for my mother who has recurrent Stage 4 lung cancer and experienced a rapid and significant downturn in her health. Although I tried, I could not manage this along with my work responsibilities. I am a single mother and my mother's only relative in Portland who could care for her - so the duty of caring for her while simultaneously shepherding my son through the final days of his senior year, graduation, and transition to college fell heavily on my shoulders. I maintained communication with Joanne Fuller throughout my leave, and in late May, we began talking about my return in early July. I returned to work on July 5 with the expectation of resuming as Director at the end of the summer and had several communications about the transition back with Joanne before she left on vacation (July 20 - August 14).

On August 18, six weeks after returning from leave and one week after taking my son to college, I met with Joanne thinking we would discuss the plan for my return to my role as Public Health Director. Instead, and completely traumatically to me, I was told by Joanne that my role as Public Health Director "was not working out" and we needed to plan my "graceful" exit from the County in a way that would feel best to me. She told me she could keep me in a role for 3-4 months (later she said 2-3 months) at a lower level with lower compensation, but that no long-term option existed for me in the County. Despite repeated requests for more information, I was not given any specifics other than the HR Director had talked to me (we had never discussed performance issues) and that two of my subordinates felt they could not work with me (even though they had accepted promotions into their positions on my leadership team, with one assuming her new role while I was on leave).

Contrary to these statements, throughout my tenure I received support and positive feedback from Joanne for my national, statewide, and countywide work and no negative feedback. In light of my work on organizational and culture change and my ability to deliver on other priorities, Joanne gave me positive performance reviews at 6 months and 18 months. Most recently, upon asking for my annual performance review on July 5, rather than take the opportunity to give me feedback (which is County and Health Department policy and practice), Joanne told me that a review would not be necessary, as she said they are perfunctory and she would take care of it so that my increases could take effect.

You can imagine my confusion, devastation, and disbelief that I was being treated this way by an organization for which I have regularly gone above and beyond the call of duty. Since the August 18 meeting, I was offered 3 months severance initially, and after hours of negotiation with an attorney, was offered slightly more than 4 months. My attorney told me she was informed by Kathy Short that I was on performance management - which is untrue and was the first I had heard those words related to my work in my 12 years of service. She was also told that contractors were providing performance management for me - which is also not factual.

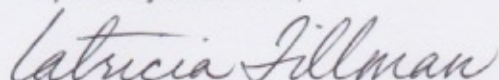
This treatment smacks of institutional racism and disparate treatment. It contradicts how other senior leaders who are not Black are treated and conflicts with County and Health Department values of workforce equity and work-life balance. I have been denied the opportunity to receive honest performance improvement feedback from my boss (and was told instead to seek it from my peer and subordinates), as well as the opportunity to improve. This treatment is incongruous with my track record, does not recognize my years of quality service with the Department and the County and instead, has had the effect of shaming, shunning and marginalizing me in a workplace, region and state where I have spent the bulk of my career. The unpredictable, disrespectful, non-transparent and negative change seems like a combination of retaliation for taking leave to care for my mother and institutional racism.

I ask that you re-evaluate and investigate the actions taken towards me. In light of the county values of diversity, racial equity, work-life balance and good government, along with my track record of results in partnership with diverse community leaders and organizations committed to health equity, I am confident Multnomah County leadership will handle this issue consistent with the values we all hold dear.

Unfortunately, the work environment in which I have been able to serve and promote a diverse and highly qualified workforce is now stressful, unsafe and toxic. To this end, I request a severance consistent with my 12-year track record and your consideration of the unfair and damaging impact this discriminatory process has had on my professional reputation and well-being. I ask that this be in addition to the severance agreements to which the county has already agreed.

Further, I ask that you and County leadership work with community leaders from diverse communities to immediately investigate and explore the pattern and practice of racist, unjust, unfair, disparate and negative treatment of leaders of color, particularly African Americans, who have served Multnomah County, including reviewing past settlements and administrative remedies and identifying how pervasive this treatment is and how it is perpetuated. Your public commitment to workforce equity and your ability to make meaningful progress depends on this additional reflection and organizational evaluation. I hope that you use my experience as opportunity to tackle this systemic issue.

Respectfully submitted,

A handwritten signature in cursive script that reads "Latricia Tillman".

Latricia Tillman, MPH
Public Health Director

Appendix

The following are some of my achievements as Public Health Director since January 2015:

Between 2015 and today, I have been a member of the Health Department executive team and built strategic partnerships with county commissioners, division directors, Oregon legislators, Coordinated Care Organizations, academia, and philanthropy to modernize public health, advance health equity, diversify the public health workforce, and support a culture of quality and continuous improvement.

As the inaugural Public Health Division Director, I led an organizational restructure and developed a strategic plan focused on health equity, public health modernization, and public health's role within Oregon's Health System Transformation. I established the Multnomah County Public Health Advisory Board, which informed the division's budget and legislative priorities, while leading and supporting ~275 FTE and managing the division's \$54 million budget.

I increased Multnomah County's investment in the Health Equity Initiative and oversaw the development of a health-equity focused Community Health Improvement Plan. I provided leadership during Multnomah County's community response to environmental health threats in the air and the water in our local schools, as well as in the county's response to the local opioid epidemic. Through thoughtful and strategic recruitment, I increased the diversity of the public health leadership team and filled a highly specialized Public Health Epidemiology leadership position.

I have represented the county on the Oregon Public Health Advisory Board, served as a principal member of the National Association of City and County Health Officials Health Equity and Social Justice Committee, the Big Cities Health Coalition and the Healthy Columbia Willamette Collaborative. I oversaw the development of a community partnership strategy, supported a strong regional public health approach to data-driven decision making and connecting population health with clinical care, and expanded shared leadership in a public health legislative strategy that included advancing tobacco control policies locally and statewide.

My efforts over the past 2 ½ years have improved public understanding of the range of public health, health equity and social determinants of health in our county, region, and state. This spring, Joanne Fuller approved my visits to federal elected officials in a visit to Capitol Hill as part of a national meeting for Big Cities Health Coalition on February 23, texted me on March 20 about the Chair being "thrilled" about a Governor appointment to the Housing Stability Council,

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set up numerous appointments with me to talk with County Commissioners about the legal underpinnings of local public health authority (texting me on April 3 after a meeting with a commissioner that I had to miss due to my mom's health that she and Bernadette "were not as good as u but did fine"), and approved a presentation to the Board of County Commissioners for Public Health Week.

Joanne and I worked in partnership throughout my 2 ½ years to address very complex personnel dynamics of senior leaders who had supervised me in my first tenure at the County, and whom I now supervised in my role as Public Health Director. In the midst of these and other very difficult dynamics, which predated my service in this role, I worked to provide both of these senior leaders with respectful pathways out of the department. These personnel situations finally resolved on June 30, 2017.

The following are some of my achievements from January 2000 to May 2009:

- I was a part of the team that expanded SUN Schools countywide.
- I partnered with Portland Public Schools and Multnomah Educational Service District to integrate eligibility for the Children's Health Insurance Program with school registrations.
- I was a leader in the project that established an environmental justice lens and "built environment" practice into Environmental Health Services.
- I established culturally-specific, community-based approaches to emergency preparedness which were mobilized during the flu vaccine shortage and in response to the resettlement of displaced New Orleans residents displaced during Hurricane Katrina.
- I was a leader in establishing and managing the African American Sexual Health Equity Program, which established a focus on health inequities in the Black community, a program which continues to this day and has expanded to provide culturally specific sexual health education through community partner organizations.
- In 2007, I established the Multnomah County Health Equity Initiative - which began a countywide focus on health equity, led to the establishment of the Office of Diversity and Equity, led the County's Community Health Improvement Plan, and has continued to advance equity in our community in partnership with diverse community organizations.

I built on this early work through six successful years at Oregon Health Authority. During that time; I established policy and program supports for health equity, language access, data equity, cultural responsiveness and the community health worker workforce. Multnomah County benefits from these public policy and programmatic levers in service to our diverse community.

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