

Good Neighbor Agreement

James Hawthorne Apartments

1. Introduction and background

- 1.1. The following Good Neighbor Agreement ("Agreement") was developed by and between Luke-Dorf, Housing Authority of Portland, Multnomah County Mental Health and Addictions Services Division, Portland Downtown Neighborhood Association, and the Portland Office of Neighborhood Involvement's Crime Prevention Program. Various individuals and organizations in the immediate neighborhood also participated in the discussion.
- 1.2. The James Hawthorne Apartments are located at 1508 SW 13th Avenue in Portland. The Housing Authority of Portland owns the building. Multnomah County Mental Health and Addictions Services Division provides funding and oversight for the program that will operate at the site, which is called the Bridgeview Community program. Luke-Dorf operates the program.
- 1.3. The Bridgeview Community program at the James Hawthorne Apartments will provide single room occupancy housing for 48 adults with severe mental illness who have recently experienced homelessness. With 24-hour on-site staffing, residents will receive case management, mental health treatment, drug and alcohol treatment, clinical supervision, housing services and support services. The building has been renovated specifically to suit the program's needs. Please see Appendix A for more information about the Bridgeview Community program.
- 1.4. In the development of this Agreement, the parties acknowledged that residents of the James Hawthorne are protected by various laws and regulations, including the following.
 - 1.4.1. HIPAA, the Health Information Portability and Accountability Act, protects the confidentiality of persons receiving healthcare services, including mental health services. It prevents service providers from sharing or revealing any information about a client's identity or services.
 - 1.4.2. ADA (Americans with Disabilities Act) and Fair Housing Law are federal laws that prevent discrimination against any person based on that person's disability. They guarantee disabled persons equal access to housing and services.
 - 1.4.3. Landlord-tenant laws prohibit landlords from placing certain restrictions on residents' private activities. For example, although the program can encourage and support residents in their treatment, they cannot evict residents from their units for consuming alcohol in their apartments or refusing to take their medications.
- 1.5. This Agreement is based on the assumption of certain rights:
 - 1.5.1. Every person has the right to personal safety.

1.5.2. Every person has the right to be treated with respect.

1.6. Legal status of the Agreement: All parties are committed to maintaining safety and livability. It is to this end that all parties signing below enter into this Agreement. All parties understand that this Agreement is NOT a legally binding contract and is not intended to be by the parties. Further, all parties acknowledge that they have been advised and given time to present this document to independent counsel for review.

2. Goals of the Agreement

- 2.1. Initiate and maintain open communications and understanding between the parties in order to be responsible partners to each other.
- 2.2. Develop a procedure for resolving problems that may arise in the future.
- 2.3. Encourage early communication to identify and resolve differences.
- 2.4. Encourage care and investment in the neighborhood.
- 2.5. Maintain and enhance neighborhood safety and livability.
- 2.6. Reduce crime and the fear of crime in the neighborhood.
- 2.7. Foster a healthy and welcoming environment for all.

Therefore, the parties have reached the following agreement:

Agreement

3. All parties will:

3.1. Contribute to safety and well-being for everyone in the community by treating every community member with respect.

3.2. Communicate with one another productively when questions, problems or differences arise, and resolve concerns at the lowest possible level.

3.2.1. Step One: Direct communication

3.2.1.1. Contact the other person or organization in a direct and timely fashion if concerns arise, thus allowing the other party to better understand the issue and help resolve it.

3.2.1.1.1. To contact the Bridgeview Community program, community members are asked to follow the order of contact information listed in Appendix B, i.e.: First contact Program Manager, then Front Desk Staff if Program Manager is unavailable. Contact Luke-Dorf Administration if further assistance is needed.

3.2.1.2. Utilize face-to-face or telephone communication whenever possible, to maximize understanding. Exercise caution in communicating via e-mail or similar methods in conflict situations.

3.2.2. Step Two: Call a meeting

3.2.2.1. If concerns are not resolved, contact the Crime Prevention Program Coordinator at the Office of Neighborhood Involvement (see Appendix B for contact information). The Crime Prevention Program Coordinator will be available to help problem-solve and, if needed, will convene a meeting of the parties.

3.2.2.2. If a meeting is convened, each of the parties listed in Section 11 agree to participate (Luke-Dorf, HAP, Multnomah County, Portland Downtown Neighborhood Association and ONI crime prevention). Other community members may also be invited at the discretion of the Crime Prevention Program Coordinator and/or the group.

3.2.2.3. The Crime Prevention Program Coordinator will provide facilitation as needed to help the group increase understanding of the issues and come to a resolution.

3.3. Share contact information with one another.

3.3.1. The participants of this Good Neighbor Agreement process may create a contact list to share among themselves, which will not be included in this document.

3.3.2. A public contact list will be included in Appendix B.

3.4. Encourage their organizations and the general community to develop a greater understanding of the Bridgeview Community program as well as the broader needs and rights of people with mental illness.

3.4.1. Luke-Dorf, HAP and Multnomah County staff members are available to provide educational materials and/or presentations. They welcome the opportunity to respond to community members' interest by increasing education and decreasing stigma around mental illness.

3.4.2. When misinformation arises, the parties agree to share accurate information regarding people with mental illness. A sheet with basic information and statistics is attached as Appendix C.

3.5. If they suspect any community member of criminal activity or other safety/livability concerns:

3.5.1. Avoid making an automatic assumption that the person involved must be a resident of the James Hawthorne Apartments.

- 3.5.1.1. If community members wish to provide Luke-Dorf with information that may relate to residents, Luke-Dorf is open to receiving the information and will respond according to good practice. However, they will not be able to guarantee what their response might be or to give out information that would violate residents' right to privacy.
- 3.5.2. Report crime to police if appropriate, and also contact Project Respond if they suspect mental health issues may be involved (see Appendix B).
- 3.5.3. Report graffiti to the Graffiti Abatement Program (see Appendix B).
- 3.6. Post their community events on the Downtown Neighborhood Association's website, when appropriate, and provide the same welcome to residents of the James Hawthorne as to other community members.
- 3.7. Support residents of the James Hawthorne Apartments by volunteering in the program (if they wish to and if they are accepted through Luke-Dorf's application process).
 - 3.7.1. Luke-Dorf welcomes community members to volunteer in the program, as appropriate, and appreciates the implied message that the community cares about and welcomes the residents.
 - 3.7.2. Luke-Dorf's application process would include a written application, a criminal background check, and a confidentiality agreement.

4. Luke-Dorf will:

- 4.1. Utilize its program design, staff resources and building layout to provide effective services for its residents, thereby enhancing the residents' well-being and safety as well as that of others in the community. (See Appendix A for more information about the program.)
- 4.2. Intervene if possible and appropriate if a safety incident occurs on the sidewalk outside the building.
 - 4.2.1. The role of staff members may be constrained by various factors, including the need to maintain a minimum level of staff presence inside the facility and the restrictions against providing mental health services to persons who are not their clients.
- 4.3. Respond to the administrator of any building in the area who contacts them regarding a security concern, and do something about the concern.
- 4.4. Educate residents about laws and program policies about smoking.
 - 4.4.1. The James Hawthorne has a designated smoking area, and residents may also smoke in any other lawful areas in the community.

5. Housing Authority of Portland will:

5.1. Participate in community efforts toward livability and safety, which might include venues such as those listed in Appendix D.

6. Portland Downtown Neighborhood Association will:

6.1. Make the Appendices to this Agreement available on its website, including the contact list, information about the program and about mental illness, and the list of venues for community involvement.

6.2. Continue to publish notices of community events on its website.

7. Office of Neighborhood Involvement's Crime Prevention Program will:

7.1. Assist in problem-solving around livability and public safety issues.

7.2. Re-convene the group if needed, as described in Section 3.2.2 above.

7.3. Assist the Housing Authority of Portland in conducting the Enhanced Safety Properties (ESP) Program at the James Hawthorne (please see Appendix E for more information).

7.4. Coordinate and/or conduct any needed public safety training for James Hawthorne residents and staff.

7.5. Assist in setting up a Neighborhood Watch program if requested.

7.6. Provide educational information on public safety issues as requested.

8. Future dispute resolution

8.1. If a concern or issue is not resolved through the processes described above, the parties agree to participate in mediation prior to pursuing other remedies. One resource for mediation referrals is the Office of Neighborhood Involvement.

9. Duration

9.1. This Agreement will remain in effect unless dissolved by consensus of the parties listed below in Section 11.

10. Administration

10.1. The original signed Agreement and any amendments will be kept on file by the Office of Neighborhood Involvement.

10.2. The Agreement may be amended by consensus of the parties via a meeting as described in Section 3.2.2 above.

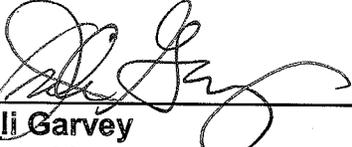
11. SIGNATURES OF PARTIES



Mona Knapp
Director of Client Services, Luke-Dorf

4/27/10

Date



Juli Garvey
Asset Manager, Housing Authority of Portland

4-27-10

Date



Sandy Haffey
Adult Safety Net Manager, Multnomah County Mental Health and Addictions Services Division

4-28-10

Date



Steve Trujillo
Chair, Portland Downtown Neighborhood Association

4-27-10

Date



Michael Boyer
Crime Prevention Program Coordinator, Portland Office of Neighborhood Involvement

5/4/10

Date

Appendices:

- A. Program information
- B. Contact list
- C. Information about mental illness
- D. Venues for community involvement
- E. Enhanced Safety Properties (ESP) Program

**Appendix A
Program Information**

**Luke-Dorf, Inc.
Bridgeview Community**

Program Description

The Bridgeview Community is a 48 bed housing facility in downtown Portland and one of the Metro area's most successful transitional housing programs. Originally opened in 1988 by Mental Health Services West, the program has a long history of serving mentally ill persons in the urban area, who have experienced the trauma of homelessness and need many supports as they transition to living indoors and participating in treatment. Luke-Dorf assumed management of the Bridgeview Community in July of 2008.

Bridgeview provides low-barrier, short-term stabilization that serves as the first step in building a positive rental history, obtaining treatment, and developing essential life skills. The program is designed to bring individuals into housing, engage them in services and help them to move to independent living. Clients sign a six month lease and are expected to move to more independent housing within 18 months, with a maximum stay of 24 months.

Residents have an individual Single Room Occupancy unit with shared kitchens, showers, and common spaces. They receive two meals daily. The secure building is staffed 7 days a week/24 hours a day by professional mental health staff. Additional services include:

- Mental Health Treatment and Services
- Integrated Substance Use Treatment
- Psychiatric Nursing and Physical Health Care Coordination
- Case Management
- Medication Monitoring
- Skills Training
- Assistance obtaining SSI, food stamps and other benefits
- Permanent Housing Placement

The Bridgeview Community is funded by local, state and federal dollars. Referrals come from a variety of sources in the community, including the State Hospital and local hospitals such as Providence St. Vincent, community partner agencies such as Central City Concern, LifeWorks, and Cascadia, and from street outreach programs such as JOIN and Project Respond. In March of 2010, the Bridgeview Community moved to the James Hawthorne Building, newly renovated to fit the specific needs of this unique population.

Some Frequently Asked Questions:

How are participants referred to the Bridgeview program?

Referrals come from a variety of sources in the community, including the State Hospital or local hospitals such as Providence St. Vincent, community partner agencies such as

Central City Concern, LifeWorks, or Cascadia, or from street outreach programs such as JOIN or Project Respond. To refer, call the Clinical Coordinator at 503-726-3820.

What services do the tenants of the Bridgeview receive, and how often?

Staff members check in with each resident at least once every 24 hours. A variety of services are offered on-site and through other programs. On-site services include individual and group counseling, drug and alcohol services, recreational activities, and skill training/coaching for successful independent living. Participation in services is voluntary, however, on-site staff are actively reaching out to residents on a regular basis to promote and support effective engagement in supportive services.

Does this program bring risks to the community?

This program does not serve people who are restricted by law from being in the area due to risk to the neighboring community. The Bridgeview program staff works with law enforcement to ensure building and community safety. Generally speaking, mentally ill persons who are active in treatment do not have a higher risk of violence than the general population. Historically, dangerous incidents involving Bridgeview residents have often resulted from outside elements on the street, with the residents as victims. This program is not designed to serve individuals whose mental health related behaviors require a lock-down secure environment. Residents are selected after careful review and determination by credentialed professionals that this site is the best match for their individual housing and support services needs.

What are the tenancy rights and responsibilities of the residents?

All residents sign a lease and agree to the terms and conditions outlined in that lease. They are responsible for paying rent, caring for their unit, and are protected by Oregon Landlord-Tenant law. They have the same tenant rights and responsibilities as other renters in Oregon. They are free to come and go like other areas residents.

What can you tell us about the stained glass on the main floor of the building?

The stained glass windows, entitled "Icarus Triumphant," were designed and fabricated by Jack Archibald from Camano Island, Washington (www.archibaldglass.com). The design is meant to suggest wings and uplifted arms as well as a sense of welcoming what is ahead. The artist writes, "The artwork brings a sense of new beginnings, a feeling of renewal and rebirth, a kind of spiritual dawn... We all experience obstacles and personal defeats, but we all have the capacity to rise up once more. Rise up singing, rise up courageous, rise up with the hope that we can start anew....I would like to hope that it might prove worthy of its name. If the wax melts on our wings, we can get another pair and try it again."

The project was funded with City of Portland Percent for Art funds and managed and maintained by the Regional Arts & Culture Council (www.racc.org).

Does the Program Accept Volunteers?

Volunteers enhance program operations and make a strong statement of community support and acceptance. The agency welcomes volunteers over the age of 18 years and works with them to find an appropriate assignment and convenient schedule. If you are interested in volunteering, please contact the program manager.

**Appendix B
Contact List**

Luke-Dorf

Lisa Davila, Program Manager 503-726-3816 / ldavila@luke-dorf.org

Front Desk Staff, 24 Hours 503-222-4906

Mona Knapp, Director of Client Services 726-3704 / mknapp@luke-dorf.org
(Luke-Dorf Administration)

Obtain information about Bridgeview Community program and ways to volunteer. Report concerns about a resident or concerns about any activity that is believed to be linked to Bridgeview resident(s).

Community members are asked to follow the order of contact information above, i.e.: First contact Program Manager, then Front Desk Staff if Program Manager is unavailable. Contact Luke-Dorf Administration if further assistance is needed.

Housing Authority of Portland (HAP)

Juli Garvey, Asset Manager 503-802-8457 / julig@hapdx.org

Discuss concerns related to the building that may have an impact to the neighborhood. Note that HAP does not maintain specific information regarding the individuals residing in the building and/or the services provided by Luke-Dorf. In these instances, initial contact should be directed to Luke-Dorf's agency contact.

Multnomah County Mental Health and Addictions Services Division

Call Center 503-988-4888

Discuss concerns regarding residents of the Bridgeview Community program, especially if crisis services may be needed.

Neal Rotman, Supervisor, Residential Services 503-988-5464, ext. 26382

Discuss a concern regarding the Bridgeview Community program, Bridgeview residents, or the James Hawthorne building.

Sandy Haffey, Manager, Adult Safety Net Services 503-988-5464, ext. 26659
sandy.j.haffey@co.multnomah.or.us

Portland Downtown Neighborhood Association

www.dnaportland.org/

Mailing address: 2257 NW Raleigh, Portland, OR 97210

Steve Trujillo, chair 971-230-0030 / stevetru@gmail.com

Discuss a concern that the neighborhood has not been welcoming. Discuss options for DNA members if working with crime prevention is not enough to address a particular concern. Discuss other topics of interest in the downtown area, including land use, public safety, and community involvement (see Appendix D for more information about DNA as a venue for broader community involvement).

Office of Neighborhood Involvement's Crime Prevention Program, City of Portland
General Contact 503-823-4064 / www.portlandonline.com/oni/cp

Stephanie Reynolds, 503-823-2030 / Stephanie.reynolds@portlandoregon.gov
Crime Prevention Program Manager

Michael Boyer, 503-823-5852 / Michael.boyer@portlandoregon.gov
Crime Prevention Program Coordinator, Downtown/Old Town/Chinatown Neighborhoods

Portland Police Bureau

EMERGENCY CALLS 9-1-1
Report a crime in progress, any threat to safety, person, or property.

NON-EMERGENCY CALLS 503-823-3333
Report crimes that have happened after the fact or lower level public safety issues.

Website www.portlandonline.com/police

Central Precinct 503-823-0097
Contact a particular Portland Police Bureau District Officer, or request general information on the Portland Police Bureau.

Dave Famous, 503-823-0099 / dave.famous@portlandoregon.gov
Central Precinct Commander

Mark Friedman, 503-823-0234 / mark.friedman@portlandoregon.gov
Neighborhood Response Team Officer, Downtown / Old Town / Chinatown neighborhoods

Project Respond / Multnomah County 24-hour Mental Health Crisis Line 503-988-4888
Obtain professional assistance on mental health issues. Hotline is available 24 hours a day.

Graffiti Abatement Program
Graffiti Reporting Hotline 503-823-4TAG (4824)

Marcia Dennis, 503-823-5860 / Marcia.dennis@portlandoregon.gov
Graffiti Abatement Program Coordinator

City/County Information and Referral 503-823-4000
Obtain information or get connected to any City of Portland or Multnomah County service. Open Monday through Friday, 8:00 AM to 5:00 PM.

Appendix C Information About Mental Illness

The following information was obtained from the website of the National Alliance on Mental Illness or NAMI (<http://www.nami.org/>).

What is Mental Illness: Mental Illness Facts

Mental illnesses are medical conditions that disrupt a person's thinking, feeling, mood, ability to relate to others and daily functioning. Just as diabetes is a disorder of the pancreas, mental illnesses are medical conditions that often result in a diminished capacity for coping with the ordinary demands of life.

Serious mental illnesses include major depression, schizophrenia, bipolar disorder, obsessive compulsive disorder (OCD), panic disorder, post traumatic stress disorder (PTSD) and borderline personality disorder. The good news about mental illness is that recovery is possible.

Mental illnesses can affect persons of any age, race, religion, or income. Mental illnesses are not the result of personal weakness, lack of character or poor upbringing. Mental illnesses are treatable. Most people diagnosed with a serious mental illness can experience relief from their symptoms by actively participating in an individual treatment plan.

In addition to medication treatment, psychosocial treatment such as cognitive behavioral therapy, interpersonal therapy, peer support groups and other community services can also be components of a treatment plan and that assist with recovery. The availability of transportation, diet, exercise, sleep, friends and meaningful paid or volunteer activities contribute to overall health and wellness, including mental illness recovery.

Important facts about mental illness and recovery

- Mental illnesses are serious medical illnesses. They cannot be overcome through "will power" and are not related to a person's "character" or intelligence. Mental illness falls along a continuum of severity. Even though mental illness is widespread in the population, the main burden of illness is concentrated in a much smaller proportion-about 6 percent, or 1 in 17 Americans-who live with a serious mental illness. The National Institute of Mental Health reports that One in four adults-approximately 57.7 million Americans-experience a mental health disorder in a given year.
- The U.S. Surgeon General reports that 10 percent of children and adolescents in the United States suffer from serious emotional and mental disorders that cause significant functional impairment in their day-to-day lives at home, in school and with peers.
- The World Health Organization has reported that four of the 10 leading causes of disability in the US and other developed countries are mental disorders. By 2020,

Major Depressive illness will be the leading cause of disability in the world for women and children.

- Mental illness usually strike individuals in the prime of their lives, often during adolescence and young adulthood. All ages are susceptible, but the young and the old are especially vulnerable.
- Without treatment the consequences of mental illness for the individual and society are staggering: unnecessary disability, unemployment, substance abuse, homelessness, inappropriate incarceration, suicide and wasted lives; The economic cost of untreated mental illness is more than 100 billion dollars each year in the United States.
- The best treatments for serious mental illnesses today are highly effective; between 70 and 90 percent of individuals have significant reduction of symptoms and improved quality of life with a combination of pharmacological and psychosocial treatments and supports.
- With appropriate effective medication and a wide range of services tailored to their needs, most people who live with serious mental illnesses can significantly reduce the impact of their illness and find a satisfying measure of achievement and independence. A key concept is to develop expertise in developing strategies to manage the illness process.
- Early identification and treatment is of vital importance; By ensuring access to the treatment and recovery supports that are proven effective, recovery is accelerated and the further harm related to the course of illness is minimized.
- Stigma erodes confidence that mental disorders are real, treatable health conditions. We have allowed stigma and a now unwarranted sense of hopelessness to erect attitudinal, structural and financial barriers to effective treatment and recovery. It is time to take these barriers down.

Statistics on mental illness

- One in four adults—approximately 57.7 million Americans—experience a mental health disorder in a given year. One in 17 lives with a serious mental illness such as schizophrenia, major depression or bipolar disorder, and about one in 10 children live with a serious mental or emotional disorder.
- About 2.4 million Americans, or 1.1 percent of the adult population, lives with schizophrenia.
- Bipolar disorder affects 5.7 million American adults, approximately 2.6 percent of the adult population per year.
- Major depressive disorder affects 6.7 percent of adults, or about 14.8 million American adults. According to the 2004 *World Health Report*, this is the leading cause of disability in the United States and Canada in ages between 15 and 44.
- Anxiety disorders, including panic disorder, obsessive-compulsive disorder (OCD), posttraumatic stress disorder (PTSD), generalized anxiety disorder and phobias,

affect about 18.7 percent of adults, an estimated 40 million individuals. Anxiety disorders frequently co-occur with depression or addiction disorders.

- An estimated 5.2 million adults have co-occurring mental health and addiction disorders. Of adults using homeless services, 31 percent reported having a combination of these conditions.
- One-half of all lifetime cases of mental illness begin by age 14, three-quarters by age 24. Despite effective treatments, there are long delays—sometimes decades—between the first onset of symptoms and when people seek and receive treatment.
- Fewer than one-third of adults and one-half of children with a diagnosable mental disorder receive mental health services in a given year.
- Racial and ethnic minorities are less likely to have access to mental health services and often receive a poorer quality of care
- In the United States, the annual economic, indirect cost of mental illness is estimated to be \$79 billion. Most of that amount—approximately \$63 billion—reflects the loss of productivity as a result of illnesses.
- Individuals living with serious mental illness face an increased risk of having chronic medical conditions. Adults living with serious mental illness die 25 years earlier than other Americans, largely due to treatable medical conditions.
- Suicide is the eleventh-leading cause of death in the United States and the third-leading cause of death for people ages 10-24 years. More than 90 percent of those who die by suicide have a diagnosable mental disorder.
- In July 2007, a nationwide report indicated that male veterans are twice as likely to die by suicide as compared with their civilian peers in the general United States population.
- Twenty-four percent of state prisoners and 21 percent of local jail prisoners have a recent history of a mental health disorder.
- Seventy percent of youth in juvenile justice systems have at least one mental disorder with at least 20 percent experiencing significant functional impairment from a serious mental illness.
- Over 50 percent of students with a mental disorder age 14 and older drop out of high school—the highest dropout rate of any disability group.

Appendix D Venues for Community Involvement

The parties to this Agreement recognize multiple challenges in the broader community, as well as multiple opportunities to work together. The following are some of the venues for community involvement regarding livability and public safety issues in the area.

Portland Downtown Neighborhood Association (DNA)

Steve Trujillo, chair

971-230-0030 / stevetru@gmail.com
www.dnaportland.org/

General membership meetings: 7-8:30 pm, 3rd Mondays of odd-numbered months

Land use/transportation meetings: 2nd Mondays, 5:30 pm

Above meetings held in Elliot Tower Room, 1221 SW 10th Avenue

Board meetings: 6-8pm, third Mondays of even-numbered months at Loaves and Fishes at 11th and Main

See also public safety meetings, below.

The purpose of DNA is, among other things, to enhance the livability of the Downtown neighborhood and Portland by establishing and maintaining an open line of communication and liaison among the neighborhood, government agencies and other neighborhoods, and to provide an open process by which all members of the neighborhood may involve themselves in the affairs of the neighborhood. Anyone can attend DNA's meetings, including general meetings as well as committees such as land use. They are open to the public.

Portland Downtown Neighborhood Association Public Safety Committee

Steve Trujillo, chair

971-230-0030 / stevetru@gmail.com
www.dnaportland.org/

Backup contact:

503-823-5852 / Michael.boyer@portlandoregon.gov

Michael Boyer, Crime Prevention Program Coordinator

This public meeting takes place on the third Thursday of the month from 12:00 PM to 1:15 PM. On the odd numbered months (January, March, May, July, September, and November) the meeting is held the Museum Place Apartments (1030 SW Jefferson St) in the second floor community room. On the even numbered months (February, April, June, August, October, December) this meeting is held at the Harland Building (400 SW 6th Ave) in the first floor conference room.

These meetings provide an opportunity to receive updates on current public safety issues, trainings, and events taking place in the Downtown area. They also provide the opportunity to give feedback to the Portland Police Bureau's Neighborhood Response Team, the Crime Prevention Program, and Multnomah County's Neighborhood District Attorney, and notify them of neighborhood public safety problem locations and issues, as they regularly attend these meetings.

Central Precinct Enhanced Safety Properties (ESP) / Landlord Meeting

Michael Boyer, 503-823-5852 / Michael.boyer@portlandoregon.gov
Crime Prevention Program Coordinator

This meeting takes place on the third Wednesday of the month from 1:30 PM to 3:00 PM, at the Housing Authority of Portland's Williams Plaza (2041 NW Everett St), in the first floor community room.

This meeting serves as an educational and problem solving opportunity for all landlords (ESP program members and non-members alike) in the Central Precinct area. The first half of the meeting is devoted to a guest speaker on any given public safety topic; and the last half of the meeting geographic break-out problem solving sessions take place.

Jefferson West Good Neighborhood Agreement

Michael Boyer, 503-823-5852 / Michael.boyer@portlandoregon.gov
Crime Prevention Program Coordinator

The stakeholders that came together to form this Neighborhood Agreement meet directly after the January, March, May and September Portland Downtown Neighborhood Association Public Safety Committee. These meetings will take place in the same location as the Portland Downtown Neighborhood Association Public Safety Committee for those months, the second floor community room of the Museum Place Apartments (1030 SW Jefferson St).

These Stakeholders are defined as any person, business, organization, or housing complex that resides in the geographic boundaries of SW Market Street (South boundary), SW 10th Avenue (East boundary), SW Main Street (North boundary), and SW 13th Avenue (West boundary). During these meetings, issues and updates are discussed as they pertain to the Jefferson West Good Neighborhood Agreement.

Neighbors West Northwest (NWNW)

2257 NW Raleigh St, Portland, OR 97210 ♦ www.nwnw.org
Phone: (503)-823-4288 ♦ Fax: (503)-223-5308

NWNW is a non-profit neighborhood coalition that provides support services to 12 neighborhood associations including Portland Downtown Neighborhood Association. They promote direct participation in grassroots democracy by supporting community efforts at the neighborhood level. NWNW provides opportunities for community involvement in land use issues, neighborhood planning, community building events, and much more.

Appendix E Enhanced Safety Properties (ESP) Program

Enhanced Safety Properties (ESP) Program:

The Enhanced Safety Properties (ESP) Program is a partnership between landlords, tenants, Crime Prevention Program staff, and the Portland Police Bureau. The program is designed to encourage and support landlords and property managers to take measures to keep their properties safe and livable. ESP properties see a dramatic decrease in crime and disorder.

Residents feel safer and more secure, and property managers report a decrease in problem activities on the property. The program has three "components" or "phases." Property owners and their managers certified in all three may display the ESP signs and use the ESP logo in their for-rent advertising, and receive notification when police activity occurs on the property.

The three components are:

Landlord Training: All people involved in the day-to-day management of a property must complete the free, daylong Landlord Training Program offered by the City of Portland. This program has been proven to be effective in educating landlords and property managers in techniques to keep criminal activity off their property.

CPTED (Crime Prevention Through Environmental Design): ESP requires participants to meet minimum management and CPTED standards. Employees are screened for criminal history as are rental applicants, who will also have their credit and rental history checked. Landlords must also use a Criminal Activity Lease Addendum or equivalent and sign a trespass agreement with the Portland Police Bureau. CPTED standards include proper lighting, landscaping, locks, and door and window security devices.

Resident Crime Prevention Training: Landlords are required to share the concepts of crime prevention strategies with the residents. Complexes with three or more units hold a resident meeting with a representative from the Crime Prevention Program and the Portland Police Bureau to provide Neighborhood/Apartment Watch training. For single family homes and duplexes, the owners provide tenants with crime prevention information packets and work with Crime Prevention to establish a Neighborhood Watch. The residents also benefit from learning how to recognize and report crime, and reduce their risk of becoming crime victims.

Once the three components have been completed, the property can be certified as an Enhanced Safety Property. Completion of the three components is usually done within 12 months. Membership in the program is maintained by ensuring that all new managers attend the City's Landlord Training within six months of hiring and every other year thereafter, keeping the property in good condition, and holding the required resident gatherings annually. Member properties benefit from their close working relationships with the police and crime prevention staff, and enjoy low crime rates.