



EVALUATING PAID SICK TIME: Social, Economic and Health Implications for Portland

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ACKNOWLEDGEMENTS

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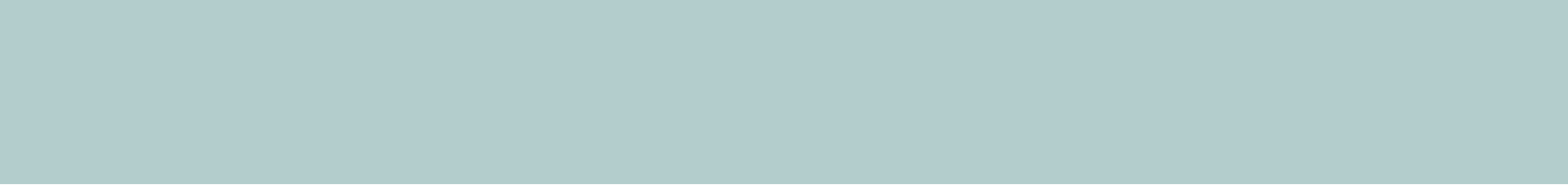


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EXECUTIVE SUMMARY

Across America, people are going to work sick or losing needed pay so they can recover at home. They're sending sick kids to school and child care and failing to get timely health care. Why? Because two of every five private-sector workers aren't allowed to earn any paid sick time, and many can't afford to take unpaid time off work to care for their own or their family's inevitable short-term health needs. As a result, workplaces, schools, childcares and whole communities are less healthy and less efficient.

The same is true in the Portland area, where there is no requirement that employers allow their employees to earn paid sick time while on the job. As a result, workers, their families, workplaces, and the community's overall health are worse off.

HERE'S HOW:

❑ Workers and their families are affected.

For families nationwide, even a few days of lost pay can equate to an entire monthly grocery or health care budget.¹ In this economic climate, in which 27% of Latinos, 33% of African-Americans, and 34% of Native Americans in the Portland area are living in poverty,² job-protected paid sick days are vital to the economic security of our families—especially for people of color and low-wage earners who are more likely to have no paid sick time, yet just as likely as everyone else to get sick.

❑ Workplaces are affected.

Multiple studies have found that providing paid sick time for employees results in higher morale and productivity, less absenteeism, and lower rates of turnover.³ And providing paid sick time that is available for the care of sick family members has been shown to increase employer profits.⁴ Policies that support paid sick time result in better retention and measurable declines in costly employee turnover in all types of businesses.⁵

❑ Community health is affected.

When people work sick, they do not take optimal care of their own health, they get co-workers and customers sick when they are contagious—especially in the service industry where lack of paid sick time is prevalent. They are less likely to be able to visit a doctor and receive preventive care, and are more likely to over-utilize emergency and urgent care services. A parent's lack of paid sick time can also negatively affect a child's health and school performance. Parents without paid sick time are more than twice as likely to send a child to childcare or school sick,⁶ increasing the spread of contagious illnesses to other children and adult caregivers/teachers.

A common-sense policy solution is now being considered and applied in cities and states across the nation. In fact, three American cities (San Francisco, Seattle and Washington, DC) and one state (Connecticut) have recently passed paid sick day requirements to create healthier workforces and communities. In the absence of a federal labor standard for paid sick time, such local requirements are a positive, near-term option available to policy makers to solve this community health problem.

Multiple studies have found that providing paid sick time for employees results in higher morale and productivity, less absenteeism, and lower rates of turnover.

KEY FINDINGS

❑ A lot of Oregonians don't earn paid sick time, especially low-wage earners.

Forty percent of Oregon's private-sector workers don't earn a single paid sick day. Nationally, 80% of low-wage earners—who can less afford to lose pay—don't earn a single sick day. The situation is very similar for workers in the Portland area.

❑ High-wage earners are far more likely than low-wage earners to earn paid sick time while working.

Nationally, over 84% of people in the top 25% of earners have paid sick time, while only 18% do among the bottom 10% of earners.

❑ Service industry workers are working sick, despite health risks.

Most food service workers (81%) in the Portland area earn no paid sick time while working, even though handling food is one of the fastest ways to spread illness.

❑ Sick children are required to stay home from educational and care settings to prevent contagion, but not all do.

A majority (67.2%) of children under age 18 in Multnomah County have all parents in the family in the work force. Without paid sick days, many working parents can't afford to stay home and lose income (or risk losing their job). Nationally, over half of all parents don't earn at least five days of paid sick time, but employed parents take off an average of four days each year to care for their sick children.

❑ Workplaces benefit from paid sick time policies.

Studies have found that providing paid sick days results in higher morale and productivity, less absenteeism, and lower rates of turnover. On average, workers use less paid sick time than they earn.

❑ Fewer Latino Oregonians earn paid sick time at work than any other group.

In the Portland metro area, 39% of whites lack paid sick time from work compared to 57% of Latinos.

INTRODUCTION

Public Risks and Responsible Solutions

“Stay home when you’re sick” was the key public health message during the 2009 H1N1 pandemic, raising public awareness of the responsibility we all share in preventing the spread of contagious disease. The outbreak also highlighted how difficult it is for individuals without paid sick time to meet competing obligations to their families, employers, their own well-being, and public health.

Paid time off from work to recover from illness, tend to a sick child, or see a doctor is a prerequisite for healthy workers and businesses, public health, family economic security, and even children’s success in school.

Yet nationally four in ten workers get no paid sick time—including many restaurant, grocery, and health care workers who are on the front lines of food safety and public health.

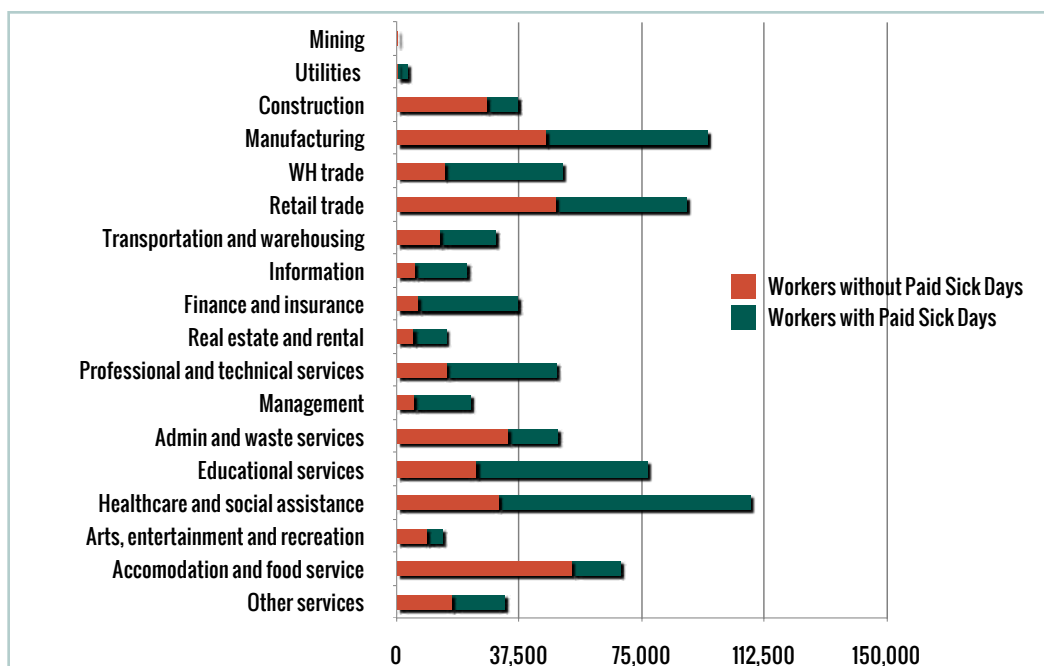
The Portland area is home to approximately 650,000 private-sector jobs. An estimated 263,000 (41%) of those jobs do not offer paid sick time to employees.

While these jobs occur in every sector, they are concentrated in service jobs and disproportionately affect low-wage earners (approximately 80% of whom nationally earn no paid sick time). For example, there are 37,500 people who work in food prep and related occupations without paid sick time in the Portland area (81% of that sector’s workers and 14% of the area’s jobs without paid sick time).⁷

Minimum standards for paid sick days have been enacted in three U.S. cities (San Francisco, Seattle, and Washington DC), one state (Connecticut) and are under consideration across the country.⁸ San Francisco’s paid sick time ordinance has been in place the longest, since February 2007. The research there shows the new standards are supported by two-thirds of employers and have produced real benefits for half of all workers.⁹

Since it was enacted, San Francisco’s job market has been stronger than in the state of California as a whole, and compares favorably with surrounding counties.¹⁰

JOBS IN THE PORTLAND AREA BY SECTOR, WITH AND WITHOUT PAID SICK TIME, 2011



Sources: U.S. Census Bureau, Quarterly Workforce Indicators for Portland-Vancouver-Beaverton, OR-WA, Quarter 1- 2011; IWPR Paid Sick Day Calculator

PUBLIC HEALTH RISKS

Food Workers and Foodborne Illness

Foodborne illness has a major impact on health and the economy in the United States. According to the most recent data from the U.S. Centers for Disease Control and Prevention (CDC), every year one out of six Americans gets sick from food, resulting in 125,000 hospitalizations and 3,000 deaths.¹¹ About 20% of cases can be traced to an ill food worker.¹² Elderly people are particularly vulnerable to foodborne illnesses such as norovirus, especially in group living settings such as nursing homes.¹³

The CDC estimates that there are more than 21 million annual cases of norovirus, and half of all cases of foodborne illness in the U.S. can be attributed to norovirus infection. Norovirus symptoms include vomiting, diarrhea, cramping and fever. Infected people usually feel better after one or two days, but they may be contagious for as long as two weeks.¹⁴

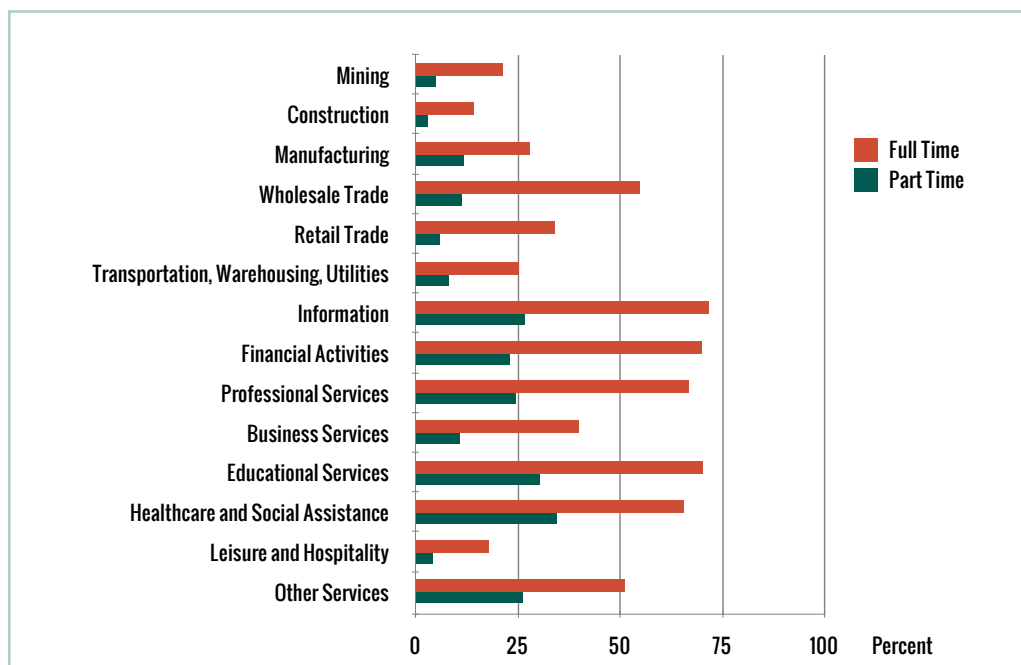
Norovirus is especially difficult to kill and easy to transmit. Of the cases analyzed by the CDC from July

1997 to June 2000, 57% were caused by food, which most often became contaminated by an infected food handler immediately prior to consumption. Thirty-six percent of cases were traced to restaurants and catered meals, 23% to nursing homes, 13% to schools, and 10% to cruise ships.¹⁵

The CDC advises that the measures most likely to significantly reduce the incidence of norovirus are correct handling of cold foods, frequent hand washing and provision of paid sick time.¹⁶

In Oregon, all food service workers are required to take food safety training and are prohibited from working around unpackaged food or beverages if they have symptoms of gastrointestinal disease or have been diagnosed with a disease that can be transmitted through food.¹⁷ However, since most restaurants do not offer paid sick time, ill employees are forced to choose between taking unpaid leave, which can cause serious financial strain, or going to work sick.¹⁸

PERCENTAGE OF FIRMS OFFERING PAID SICK TIME TO FULL- AND PART-TIME WORKERS, OREGON, 2005



Source: Workforce Oregon Employment Department, Employee Benefit Survey 2005

A recent survey of food service workers reported in the *Journal of Food Protection* found that 19.8% had worked while experiencing vomiting or diarrhea in the past year.¹⁹ Another survey of over 4,300 restaurant workers in eight metropolitan regions of the U.S. found that 88% did not receive paid sick time and 63% had served or prepared food while sick.²⁰

Some workers who do earn paid sick time face obstacles in using it. Some employers, including some Portland area grocery stores, do not allow use of paid leave until workers have been off two days without pay (often referred to as “3rd-day sick leave”). Employees may also face disciplinary measures if they call in sick, with too many absences resulting in job loss, even when an illness is well documented.

Spread of H1N1 and Other Common Diseases

Lack of paid sick time contributed to the spread of H1N1 in 2009 and 2010 in workplaces and schools. Of the approximately 26 million employed Americans infected at the height of the pandemic from September through November 2009, only 18 million took time off from work. Sick workers are estimated to have infected seven million of their co-workers.²¹

A study by the Boston Public Health Commission found that African Americans and Latinos in that city experienced higher rates of H1N1 infection than whites, and that children were often the first in their families to be infected.²² Not only are the Boston Public Schools disproportionately black and Latino, but many of those parents are low income and lack paid sick time. Therefore, they were less able to keep their children home from school throughout their illness, increasing the spread of disease.²³

The flu and RSV (respiratory syncytial virus, which causes bronchitis) are both commonly transmitted through tiny droplets in the air when someone coughs, sneezes, or talks. The flu can be contagious one day prior to the

onset of symptoms and for five to seven days after becoming sick.²⁴ RSV is typically contagious for three to eight days.²⁵

SOCIAL & COMMUNITY RISKS

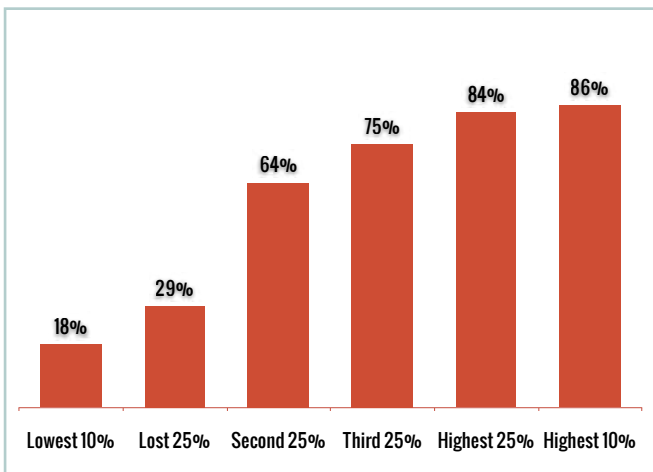
Unequal Access—Nationally

Nationally, over 84% of people in the top 25% of earners have paid sick time, while only 18% do among the bottom 10% of earners.²⁶ Taking unpaid leave causes short-term financial losses for families—especially those with low-wage parents or caregivers. But it can also lead to retaliation and job loss, which can snowball into long-term financial insecurity for whole families.

People who work part time frequently do not qualify for paid leave and other benefits that are provided to full-time employees. As of March 2012, only a quarter of part-time workers in the U.S. had access to paid sick time.²⁷ Women are far more likely than men to work part time, typically for family responsibility reasons.²⁸ According to national data, Latino and African-American workers are less likely than whites and Asians to earn paid sick time.²⁹

A 2010 survey of workers in San Francisco found that Latino and African American workers were more likely than white workers to report benefiting from that city's paid sick days ordinance—by having more paid sick time available, their employers being more supportive of them taking time off, and/or being better able to care for health needs of themselves or family members.³

PAID SICK TIME BY WAGE LEVEL IN PRIVATE INDUSTRY, U.S. AVERAGE 2012



Source: U.S. Bureau of Labor Statistics, National Compensation Survey

Unequal Access—Locally

In and around Portland more than 40,000 workers of color don't have a single paid sick day from work to recover from common illnesses.³¹

PRIVATE SECTOR WORKERS WITHOUT PAID SICK TIME IN THE PORTLAND AREA BY ETHNICITY, 2012

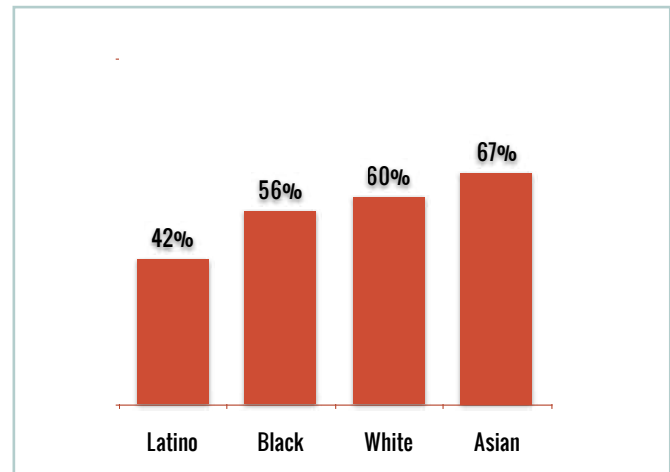
Ethnicity	Other Non-White	White	Black	Latino
Without Paid Sick Time	36%	39%	42%	57%

In and around Portland, 41% of private-sector workers don't earn sick days. When we compare across races, there are notable inequities. Latino workers are hardest hit, with almost six in ten not earning a single sick day.³²

It is likely that these racial disparities are actually worse than this data shows because census data chronically undercount people of color.³³

Low-wage workers, regardless of race, are also much less likely than higher-wage workers to have access to paid sick days. Nationally, a shocking 80% of our lowest wage earners (the lowest 10% of wage earners) have

PRIVATE SECTOR U.S. WORKERS WITH ACCESS TO PAID SICK TIME IN PORTLAND BY ETHNICITY, 2009



Source: IWPR Analysis of 2009 National Health Interview Survey Data

no paid sick days. At the same time, the lowest 15% of wage earners are currently providing dramatically more hours of unpaid care assistance to elderly family members than are higher income adults.³⁴

For families nationwide, even a few days of lost pay can equate to an entire monthly grocery or health care budget.³⁵ In this economic climate, in which 27% of Latinos, 33% of African-Americans, and 34% of Native Americans in the Portland area are living in poverty,³⁶ job-protected paid sick days are vital to the economic security of our families—especially for people of color who are less likely to earn paid sick time, yet just as likely as everyone else to catch the common illnesses—like a cold or the flu—so many experience every year.

Workers losing jobs because they miss work when sick is a serious threat. A 2010 national survey revealed that 16% of workers had reported being fired for taking time off work to care for a sick child or family member, or to cope with their own illnesses.³⁷

Fear of job loss is also greater for workers of color than for white workers.³⁸ Nationally, 44% of white workers reported fearing they will be fired if they miss any work time. Workers of color fare worse: 56% of Latino workers and 75% of black workers are experiencing the same fear.³⁹ In a time of high unemployment, this level of fear of job loss among communities of color is debilitating.

In San Francisco, which implemented the nation's first paid sick days law in 2007, black, Latino and low-wage workers reported both a higher need for paid sick days and a greater benefit from the new law than their white counterparts.⁴⁰

Inequitable access to paid sick days reflects and exacerbates race and income inequalities.

Single Parents

In Portland, 27% of children live with single mothers.⁴¹ Communities of color have higher rates of single parenthood in general, and much higher rates of poverty among single mothers. In Multnomah County, 48% of

single mothers of color are living in poverty (compared to 32% of white single mothers). And a shocking 84% of single mothers of color with children under five are living in poverty (compared to 38% of white single mothers with children under five).⁴²

Inequitable access to paid sick days reflects and exacerbates race and income inequalities.

Without a second income to rely on, single parents are less able to forego a day's pay when they are sick. They also are less able to rely on another parent to stay home and care for a sick child. With no paid sick time, they face impossible options: lose needed pay to recover at home (and risk being punished at work), work sick (and recover later and infect co-workers and clients), or send a child to school sick.

CHILDREN'S HEALTH & EDUCATION

A parent's lack of paid sick time can have a negative impact on the child's health and school performance. This is especially true when a majority (67.2%) of children under age 18 in Multnomah County have all parents in the family in the work force—meaning there is no parent outside the paid work force available to care for a sick child.⁴³

Caring for a sick child or taking a child to see a health care provider during regular doctor's office hours is a significant problem without paid sick time.

Many childcare centers and schools have policies requiring sick children to stay home. The CDC recommends keeping children at home for 24 hours after a fever subsides.⁴⁴ Portland Public Schools follows that recommendation and requires students to stay home during many other illnesses, such as vomiting/diarrhea, rash, or when there is brown, gray, tan or yellow drainage from nose, eyes or any other part of the body.⁴⁵

Studies show children recover more quickly from illness with a parent present.⁴⁶ Older children are sometimes

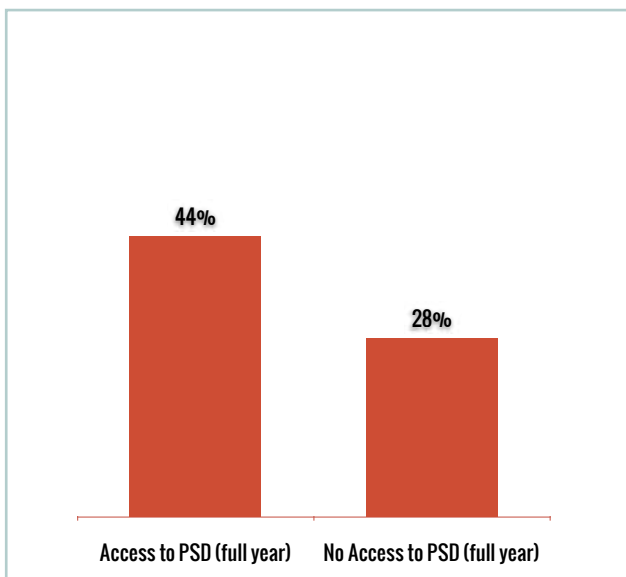
kept home from school to care for younger siblings when parents are not able to take time off from work, affecting the older child's educational outcomes.⁴⁷

Children in families with lower incomes are much less likely to have a parent with access to sick time than higher income children. A study of employed parents based on 2003 and 2004 data found that just 36.3% of children in families with incomes below 200% of the federal poverty level had a parent with access to paid sick time, compared to 80.9% of higher income children.⁴⁸

Children in low-income families are also more likely to be in poor health. In Multnomah County, nearly 29% of children in families below the poverty level were rated by their parents as being in less than very good health, compared to 5.5% of upper income children.⁴⁹

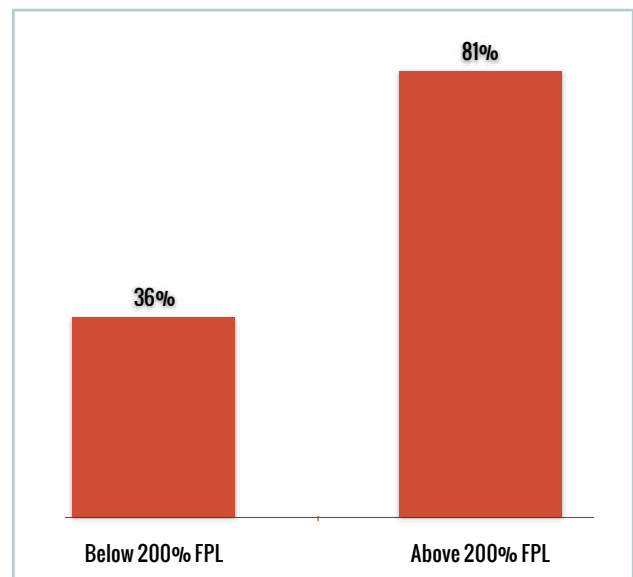
Parents who have paid sick time are far more likely to take time off work to care for a child or other family member.⁵⁰ The 2010 San Francisco survey found that parents without access to sick time were more likely to

PARENTS BELOW 200% OF FEDERAL POVERTY LEVEL WHO TOOK TIME OFF DURING YEAR TO CARE FOR SOMEONE ELSE



Source: Clemons-Cope, et al., Pediatrics 2008; 122:480-486.

CHILDREN ABOVE AND BELOW 200% OF FEDERAL POVERTY LEVEL (FPL) WHOSE PARENTS HAVE PAID SICK TIME AT WORK



Source: Clemons-Cope, et al., Pediatrics 2008; 122:480-486.

send a sick child to school: 75.9% of parents without access to paid sick days said their child had gone to school while sick, compared to 53.8% of parents with paid sick days.⁵¹

Caring for Aging Relatives and Aging Workers

A comprehensive national study based on 2008 data found that 17% of the American workforce at that time was providing uncompensated care for an elderly person, and 42% had during the previous five years. Nearly half of American workers believe they will be responsible for elder care in the next five years.⁵²

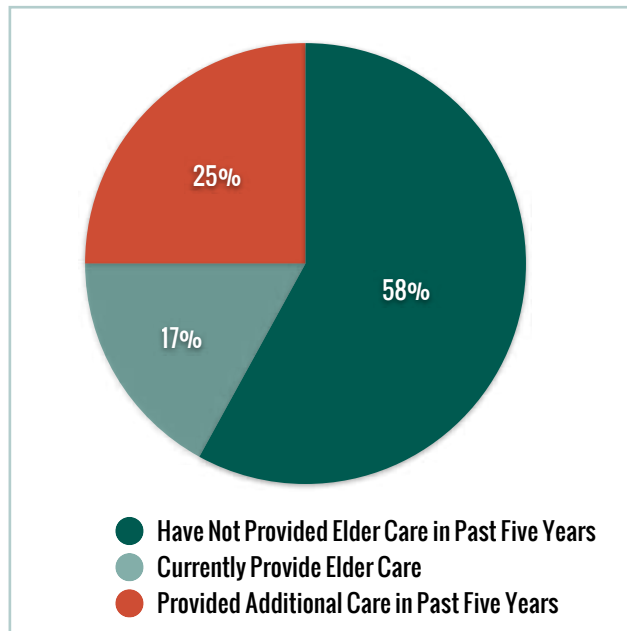
Employed family caregivers still spent on average of 45 hours per week at their paid job—as much time as those without such responsibilities. Compounding the time crunch, 46% of the women and 40% of the men also had children under 18 living at home. Based on those figures, we project that approximately 136,000 members of the Portland-based workforce currently

care for an elderly person, and 405,000 will during the next five years.

Parents who have paid sick time are far more likely to take time off work to care for a child or other family member.

Caring for aging parents is not the only issue. With the workforce rapidly aging, more spouses and domestic partners—and workers themselves—are at risk of developing serious health problems associated with aging. Between 1991 and 2009 the percentage of workers in Multnomah County over the age of 45 increased from 27% to 42%.⁵³

U.S. WORKFORCE PROVIDING UNCOMPENSATED ELDER CARE



Source: Families and Work Institute, Elder Care Study (Based on 2008 Data).

EMPLOYERS & Sick Time

Many employers have long recognized that providing good benefits is essential to attracting and retaining good employees.

Multiple studies have found that providing paid sick time results in higher morale and productivity, less absenteeism, and lower rates of turnover, which is expensive.⁵⁴ Providing paid sick time that is available for the care of sick family members has been shown to increase employer profits.⁵⁵

Turnover is particularly costly for businesses. Estimates of the direct cost of losing and replacing an employee range from 25% to 50% of annual pay for hourly workers, and much more for highly skilled employees.⁵⁶

That means that replacing a half-time employee earning \$9.00 per hour (Oregon's minimum wage is \$8.80) directly costs an employer \$2,340 to \$4,680. Replacing a full-time \$12.00 per hour worker runs \$6,000 to \$12,500. Indirect costs due to lost productivity add more. By contrast, a \$12.00 per hour worker taking three full days of paid sick time per year (which is the average utilization in San Francisco) would only cost the employer \$288.

Policies that support work/life balance in general and paid sick time in particular result in better retention and measurable declines in employee turnover in all types of businesses.⁵⁷

Absenteeism Versus Presenteeism

Controlling unscheduled absences is a routine part of doing business, but remains a concern for employers, whether or not they provide paid sick time. To reduce absenteeism, employers most frequently report using disciplinary action, annual reviews and illness verification.⁵⁸

In workplaces where the majority of employees are committed and satisfied, rates of absenteeism are low.⁵⁹ According to a 2007 survey by CCH Incorporated, a business law research firm, companies with good morale had less than half the rate of absenteeism of firms with morale rated only fair or low. The high-morale firms

also reported fewer employees coming to work sick.⁶⁰ Workers showing up to work sick instead of getting well at home, known as “presenteeism,” has been estimated to cost employers more than absenteeism. Not only does the ill or distracted employee operate below par, but they put their coworkers and customers at risk, too.⁶¹

A 2009 survey by Kronos Incorporated, a workforce management company, found that with the economy down and job security low, 30% of employees reported being even more likely to show up to work sick—presumably because they are concerned about losing income, reprisals or job loss.⁶²

How Workers Use Paid Sick Time

Full-time workers who do earn paid sick time accrued on average nine days after one year on the job in 2011.⁶³ Most workers do not use all the sick time they have available. According to national data, workers with paid sick time use less than they accrue, taking an average just two to three days per year.⁶⁴

A 2010 survey of workers in San Francisco, where all employers are required to provide paid sick time, found that the median number of sick days taken during the year by all workers was three. Average use across all industries was 3.3 days, with an average of 1.9 days in the leisure and hospitality sector—in which restaurants and bars provide the majority of employment.⁶⁵

AVERAGE PAID SICK DAYS DAYS AFTER ONE YEAR OF EMPLOYMENT (FOR THOSE EARNING PAID SICK DAYS), 2010-2011

Worker Group	Paid Sick Days
All civilian workers in U.S.	8
Full time workers	9
At firms with 1-49 workers	7
At firms with 100+ workers	10
Portland area private industry workers	6

Source: Drago & Lovell, San Francisco's Paid Sick Days Ordinance

The most common reason for using paid sick time in San Francisco was for the worker's own health, followed by visiting the doctor, caring for a sick child and caring for another adult. One in ten workers who used a paid sick day reported doing so for some other reason, including a mental health day, a death in the family, or vacation. One-fourth reported taking no sick time in the previous year.⁶⁶

Paid Sick Time Policies Around the Country

In February 2007, San Francisco implemented the nation's first paid sick days law. It establishes a minimum standard of paid sick time for all workers within the city.

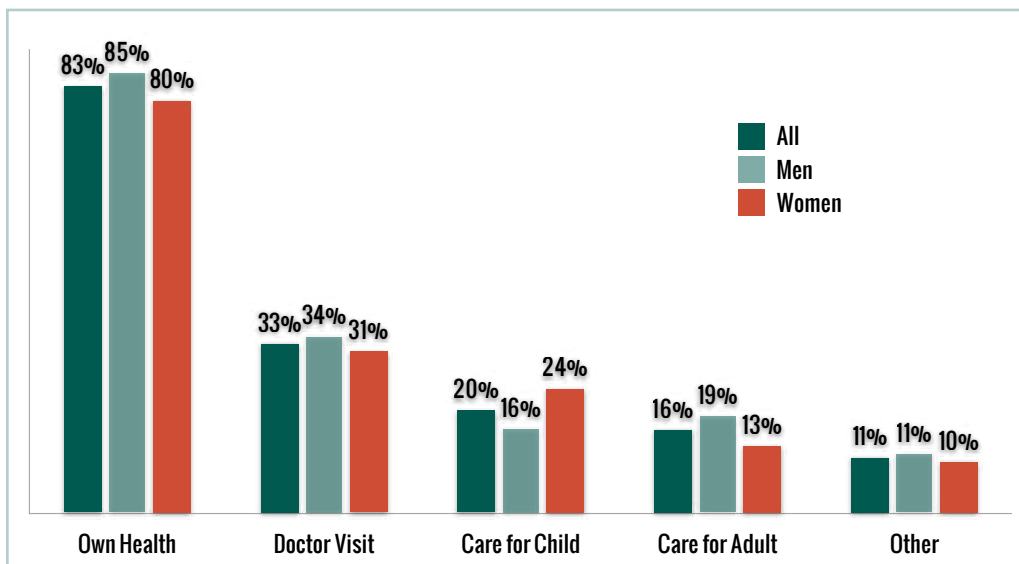
Workers earn one hour of paid leave for every 30 hours worked. Accrual is capped at 40 hours (five 8-hour days) for workers in companies with fewer than 10 employees and at 72 hours (nine 8-hour days) in larger companies.⁶⁷

Seattle passed paid sick time legislation in 2011.⁶⁸ The cities of Milwaukee and Washington, DC also approved minimum standards for paid sick time in 2008, although implementation in Milwaukee was delayed by a court injunction that was lifted in March 2011, and has been pre-empted by the Wisconsin legislature and governor.⁶⁹

Other cities and states have introduced similar bills, some of which are currently under consideration, including in New York City, Philadelphia, Connecticut, Massachusetts, Denver and California.⁷⁰

Policies that support work/life balance in general and paid sick time in particular result in better retention and measurable declines in employee turnover in all types of businesses.

REASONS SAN FRANCISCO WORKERS USED PAID SICK TIME IN PREVIOUS YEAR, 2010



Source: Oregon Employment Department, Quarterly Census of Employment and Wages

EXPERIENCE IN SAN FRANCISCO

Jobs

Despite misgivings by some that the ordinance would add costs to employers and therefore reduce the number of jobs, the data show that San Francisco's job market has compared favorably to the surrounding counties and the state of California as a whole since the sick days law went into effect in 2007.⁷¹

Restaurants are among the employers least likely to provide paid sick time absent such a requirement.⁷² Therefore, if minimum paid leave standards affect the number of jobs available, we would expect to see that impact most clearly in the food service industry.

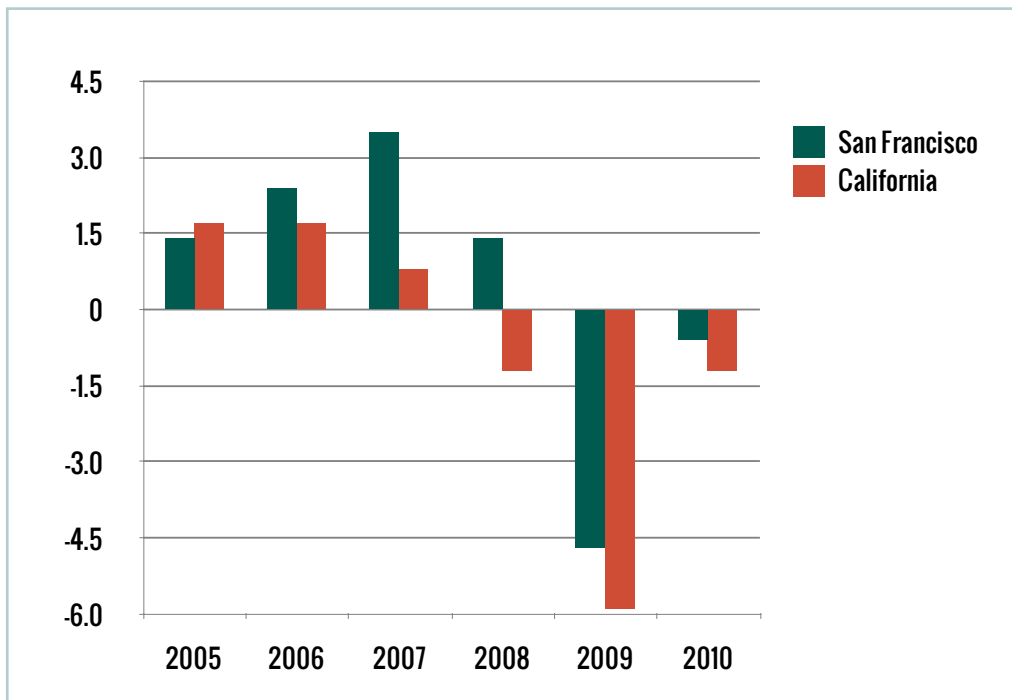
In 2005 and 2006, prior to the adoption of paid leave

standards, accommodation and food service jobs (which are about 80% food service) grew more slowly in San Francisco than in three of the four adjacent counties.

San Francisco's relative position improved following implementation of the sick days ordinance. The city's accommodation and food service jobs outgrew three of the four counties in 2007 and all of them in 2008. All four counties lost jobs in 2009.

In the three-county Metropolitan District, which includes San Francisco and the smaller neighboring counties of Marin and San Mateo, restaurant jobs grew by 1.3% in 2010, while they continued to fall statewide.⁷³

PERCENTAGE ANNUAL CHANGE IN JOBS IN SAN FRANCISCO AND CALIFORNIA, 2005-2009



Source: California Employment and Development Department, Employment by Industry Data, Annual Averages, for San Francisco County and California, 2000-2009

Employers

The most comprehensive survey of San Francisco employers conducted since implementation of the paid sick days ordinance found that after three and one half years, over two thirds supported the ordinance, with 34% very supportive.

Altogether 64% reported making no changes to paid leave policies as a result of the paid leave ordinance because they already had policies that complied with the new law. Thirty-one percent reported making some changes, with 17% each enacting a new policy and expanding a policy to more workers, and 16% increasing the accrual rate.

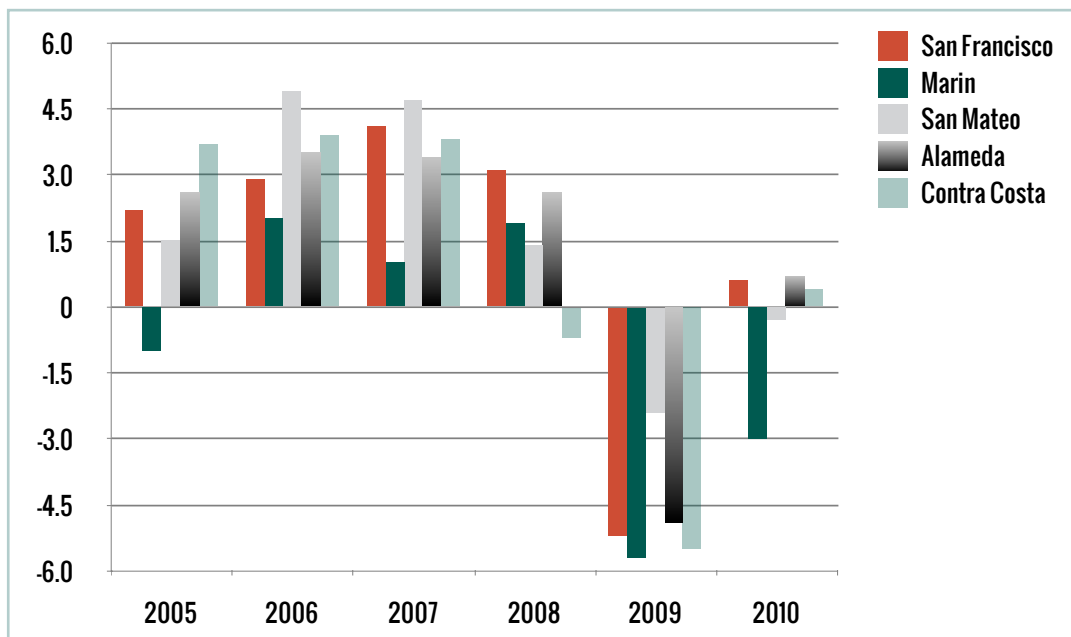
Among the smallest employers with fewer than 10 employees, 21.6% continued to report not providing paid sick time, as required. The vast majority of

larger employers were in compliance with the law.⁷⁴ In looking at the bottom line, 71% of employers said the ordinance made no difference, while 14% reported decreased profits and 15% said they did not know if profits were affected.

The majority of employers reported having little difficulty understanding and administering the ordinance. Those in accommodation and food service were more likely than all employers to report difficulties in these areas, with 50% reporting some difficulty understanding and 58% some difficulty administering.

Nevertheless, 66% of accommodation and food service employers reported supporting the ordinance, just under the overall rate of 68%.

PERCENTAGE ANNUAL CHANGE IN ACCOMMODATION AND FOOD SERVICE JOBS,
SAN FRANCISCO AND ADJACENT COUNTIES, 2005-2009



Source: California Employment and Development Department, Employment by Industry Data, Annual Averages, 2000-2009

CONCLUSION

Lack of access to paid sick time is a serious issue that affects the health and well-being of everyone who works, visits and lives in Portland. Without access to paid sick time, workers in restaurants, grocery stores, daycares, health facilities and offices throughout the city make the decision whether to go to work or send their child to school sick—or lose a day’s pay (and sometimes their job).

Fortunately, replicable models of successful paid sick day ordinances are available from other cities. Utilizing these successful models from around the country (and up and down the west coast), Portland can join the growing national movement to adopt a minimum standard of paid sick days.

Portland can join the growing national movement to adopt a minimum standard of paid sick days.

Absent a law requiring the provision of paid sick time, the majority of employers in restaurants and a significant portion of firms spread across all industries will continue not offering employees sick days, or significantly limiting access. Workers earning lower wages and their children are most directly affected by current practices, but the health and economic vitality of the whole community is negatively affected.

DISTRIBUTION OF FIRMS BY NUMBER OF EMPLOYEES IN MULTNOMAH COUNTY, 1ST QUARTER 2011

Firm Size	# Firms	# Employees	% Firms	% Employees
0	3,941	0	16%	0%
1 to 4	11,560	21,869	47%	5.3%
5 to 9	3,767	24,927	15%	6%
10 to 49	4,074	82,624	16.5%	20%
50 to 99	596	40,811	2.4%	9.8%
11 to 499	526	102,820	2.1%	24.9%
500 +	102	139,820	0.4%	33.8%

ENDNOTES

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