

2012 Hood River Winter Horticulture Meeting

Tuesday, January 31, 2012
Pine Grove Grange, Hood River, OR

7:30 am Coffee and Donuts Provided by Our Sponsors

- 8:00** **Welcome** - Steve Castagnoli, OSU Extension Service, Hood River
- 8:15** **MCAREC Director's Update** - Brian Tuck, OSU-MCAREC, Hood River
- 8:30** **Modified Atmosphere Packing of Pears for Long-term Storage and Export** - Yan Wang, OSU-MCAREC, Hood River
- 8:50** **Improving Pear Production Efficiency: research update** - Todd Einhorn, OSU-MCAREC, Hood River
- 9:20** **Engineering Solutions for Pacific Northwest Orchards** - Karen Lewis, WSU Extension, Grant-Adams, WA
- 9:50** ***Il Pero: Observations on Pear Production in Italy*** - Todd Einhorn, OSU-MCAREC, Hood River

10:10 am Break - Juice Provided Courtesy of Tree Top

- 10:30** **Farm Services Agency Programs for Fruit Growers** - Kevin MacIntyre, USDA-FSA, The Dalles, OR
- 10:50** **Immigration Reform: battle going to the States while Congress sleeps** - Jeff Stone, Coalition for a Working Oregon
- 11:20** **Columbia Gorge Fruit Growers Elections and Updates** - CGFG Board of Directors
- 11:40** **Presentation of the Oregon Horticultural Society Hartman Cup Award** - Preston Henry, Oregon Horticultural Society

12:00 pm Lunch Provided – Thank You Sponsors!

- 1:00** **Developing New Information and Tools to Enhance Biological Control in Pear & Sweet Cherry Orchards** - Peter Shearer and Kaushalya Amarasekare, OSU-MCAREC, Hood River
- 1:30** **Fire Blight Management in 2012: will we see a new antibiotic for fire blight control?** Ken Johnson, OSU Department of Botany & Plant Pathology, Corvallis
- 2:00** **Hood River Extension Programs Update** - Steve Castagnoli, OSU Extension Service, Hood River
- 2:20** **Update on Spotted Wing Drosophila Biology and Management** - Peter Shearer, OSU-MCAREC, Hood River
- 2:50** **Adjourn** - two ODA & WSDA pesticide recertification credits are anticipated for the afternoon presentations on pest & disease management.

2012 Winter Horticulture Meeting Sponsors: Bryant Pipe & Supply, CenterPointe Community Bank, Chamberlin Distributing, Columbia Bank, Columbia Gorge Fruit Growers, Columbia Reach Pack, Diamond Fruit, Duckwall-Pooley Fruit, Farm Credit Services, Gorge Delights, GS Long, Hood River Supply, Nichino America, Oregon Horticultural Society, Sheppard's, Stadelman Fruit, Tree Top, Underwood Fruit, Valley Ag Service, Western Ag Improvement, and Wilbur-Ellis.



Agriculture, Family and Community Development, 4-H Youth, Forestry, Energy and Extension Sea Grant Programs. Oregon State University, United State Department of Agriculture, and Hood River County cooperating. The Extension Service offers its programs and materials equally to all people.





LEY DE LICENCIA FAMILIAR de Oregon

Brad Avakian, Comisionado



AVISO A EMPLEADORES Y EMPLEADOS

La Ley de Licencia Familiar de Oregon (Oregon Family Leave Act: OFLA), autorizada por la Legislatura en 1995, requiere que los empleadores que tengan 25 empleados o más en Oregon les otorguen a sus trabajadores licencia protegida para cuidar de su persona o miembros de su familia en caso de enfermedad, lesión, parto o adopción.

<p>¿Cuándo puede tomar una licencia familiar un empleado?</p>	<p>Los empleados pueden tomar una licencia familiar por las razones a continuación:</p> <ul style="list-style-type: none"> ▶ Licencia para Padre o Madre durante el año siguiente al nacimiento o adopción de un hijo(a) o de la colocación en cuidado temporal de un menor de 18 años o de una persona de 18 años de edad o más si es incapaz de cuidarse a sí misma debido a una discapacidad mental o física. La licencia para padre o madre incluye la licencia para llevar a cabo el proceso legal requerido para una colocación en cuidado temporal o adopción. ▶ Licencia por condición de salud grave por la condición de salud grave del propio empleado o para cuidar de un cónyuge, padre o madre, hijo(a), suegro(a), abuelo(a), nieto(a), pareja doméstica del mismo sexo o del padre, madre o hijo(a) de su pareja doméstica del mismo sexo que sufre de una condición de salud grave. NOTA: No incluye a un empleado que es incapaz de trabajar debido a una lesión recompensable por la Compensación de Trabajadores. ▶ Licencia de discapacidad por embarazo (un tipo de licencia por condición de salud grave) tomada por una empleada debido a una discapacidad relacionada al embarazo o parto, que ocurra antes o después del nacimiento de un menor o por cuidado prenatal. ▶ Licencia por enfermedad de un menor tomada para cuidar del hijo(a) de un empleado que sufre de una enfermedad, condición o lesión que requiere del cuidado en el hogar, pero que no es una condición de salud grave. ▶ Licencia familiar militar de Oregon es tomada por el cónyuge o pareja doméstica del mismo sexo de un miembro del servicio militar quien ha sido llamado al servicio activo o que ha sido notificado sobre un llamado inminente al servicio activo o que está bajo licencia del servicio activo durante un periodo de conflicto militar.
<p>¿Quién reúne los requisitos?</p>	<ul style="list-style-type: none"> ▶ Para reunir los requisitos para licencia, los trabajadores deben haber estado empleados por un periodo de 180 días calendario inmediatamente antes de la licencia y haber trabajado como mínimo un promedio de 25 horas a la semana durante el periodo de 180 días. ▶ Excepción 1: Para la licencia para padre o madre, los trabajadores reúnen los requisitos después de haber estado empleados por 180 días calendario, sin importar el número de horas trabajadas. ▶ Excepción 2: Para la Licencia familiar militar de Oregon, los trabajadores que califican deben trabajar para un empleador como mínimo un promedio de 20 horas a la semana, sin importar el número de días trabajados.
<p>¿Cuál es la duración de la licencia que puede tomar un empleado?</p>	<ul style="list-style-type: none"> ▶ Por lo general los empleados tienen derecho a un máximo de 12 semanas de licencia familiar dentro del año de 12 meses de licencia del empleador. ▶ Una mujer que use la licencia de discapacidad por embarazo tiene el derecho a 12 semanas adicionales de licencia en el mismo año de licencia para cualquier propósito calificable de OFLA. ▶ Un hombre o una mujer que use una licencia completa para padre o madre de 12 semanas tiene el derecho a tomar hasta 12 semanas adicionales para el propósito de licencia por enfermedad de un menor. ▶ Un cónyuge o pareja doméstica del mismo sexo de un miembro del servicio militar tiene el derecho a un total de licencia de 14 días laborales sin goce de sueldo por despliegue después de que el miembro militar haya sido notificado de un llamado inminente u orden al servicio activo antes del despliegue y cuando el miembro militar esté en un periodo de licencia del despliegue.
<p>¿Qué tipo de aviso es requerido?</p>	<ul style="list-style-type: none"> ▶ Los empleadores pueden requerirle a los empleados dar un aviso con 30 días de anticipación a la licencia, a menos que la licencia se tome debido a una emergencia. Los empleados deben seguir la política del empleador. Los empleadores pueden requerir que el aviso sea entregado por escrito y pueden requerir una explicación de la necesidad de la licencia. En caso de emergencia, los empleados deben dar un aviso verbal dentro de las 24 horas de haber empezado una licencia.
<p>¿Se remunera la licencia familiar o no?</p>	<ul style="list-style-type: none"> ▶ Aunque por lo general la licencia familiar no es con goce de sueldo, los empleados tienen el derecho a usar cualquier licencia por enfermedad u otro tipo de licencia con goce de sueldo o vacaciones con goce de sueldo que hayan acumulado.
<p>¿Cómo se protege el trabajo de un empleado durante una licencia?</p>	<ul style="list-style-type: none"> ▶ Los empleadores deben regresar a los empleados a sus trabajos anteriores o a trabajos equivalentes si el puesto anterior ya no existe. Sin embargo, los empleados en licencia de OFLA siguen estando sujetos a medidas de empleo no discriminatorias tales como despido o acción disciplinaria que se hubiera tomado sin importar la licencia del empleado.

Los empleados calificables a quienes se les ha negado una licencia, que hayan sido disciplinados o que hayan sufrido represalias por solicitar una licencia, o a quienes se les haya negado la reintegración al mismo puesto o a uno equivalente cuando regresaron de una licencia o después de haber solicitado una licencia pueden presentar una queja ante la División de Derechos Civiles del Departamento de Trabajo e Industrias.

Para obtener información adicional, favor de llamar a la oficina del Departamento de Trabajo e Industrias más cercana:
 ▶ Eugene.....541-688-7623 Asistencia a empleadores:
 ▶ Salem.....503-378-3292 ▶ 871-673-0824
 ▶ Portland.....971-673-0761
 Sitio Web: www.oregon.gov/boli

O escriba a la División de Derechos Civiles a:
 Bureau of Labor and Industries
 Civil Rights Division
 800 NE Oregon St Ste. 1045
 Portland, OR 97232

El presente es un resumen de las leyes de Oregon pertinentes a la Ley de Licencia Familiar (Family Leave Act : OFLA). No es el texto completo de la ley. Enero de 2012

ESTA INFORMACIÓN DEBE SER FIJADA EN UN LUGAR VISIBLE



Oregon FAMILY LEAVE ACT

Brad Avakian, Commissioner



NOTICE TO EMPLOYERS AND EMPLOYEES

The Oregon Family Leave Act, passed by the 1995 Legislature, requires employers of 25 or more employees in Oregon to provide their workers with job protected leave to care for themselves or family members in cases of illness, injury, childbirth or adoption.

When Can an Employee Take Family Leave?

Employees can take family leave for the following reasons:

- ▶ **Parental Leave** during the year following the birth of a child or adoption or foster placement of a child under 18 or a child 18 or older if incapable of self-care because of a mental or physical disability. Parental leave includes leave to effectuate the legal process required for foster placement or adoption.
- ▶ **Serious health condition leave** for the employee's own serious health condition or to care for a spouse, parent, child, parent-in-law, grandparent, grandchild, same-gender domestic partner or parent or child of same-gender domestic partner with a serious health condition. **NOTE:** Does not include an employee unable to work due to a compensable Workers Compensation injury.
- ▶ **Pregnancy disability leave** (a form of serious health condition leave) taken by a female employee for an incapacity related to pregnancy or childbirth, occurring before or after the birth of a child, or for prenatal care.
- ▶ **Sick child leave** taken to care for an employee's child with an illness, condition or injury that requires home care but is not a serious health condition.
- ▶ **Oregon Military Family Leave** is taken by the spouse or same-gender domestic partner of a service member who has been called to active duty or notified of an impending call to active duty or is on leave from active duty during a period of military conflict.

Who is Eligible?

- ▶ To be eligible for leave, workers must be employed for the 180 day calendar period immediately preceding the leave and have worked at least an average of 25 hours per week during the 180 day period.
- ▶ **Exception 1:** For parental leave, workers are eligible after being employed for 180 calendar days, without regard to the number of hours worked.
- ▶ **Exception 2:** For Oregon Military Family Leave, eligible workers must work for an employer an average of at least 20 hours per week, without regard to the number of days worked.

How Much Leave Can an Employee Take?

- ▶ Employees are generally entitled to a maximum of 12 weeks of family leave within the employer's 12-month leave year.
- ▶ A woman using pregnancy disability leave is entitled to 12 additional weeks of leave in the same leave year for any qualifying OFLA purpose.
- ▶ A man or woman using a full 12 weeks of parental leave is entitled to take up to 12 additional weeks for the purpose of sick child leave.
- ▶ A spouse or same-gender domestic partner of a service member is entitled to a total of 14 work days of unpaid leave per deployment after the military member has been notified of an impending call or order to active duty before deployment and when the military member is on leave from deployment.

What Notice is Required?

- ▶ Employers may require employees to give 30 days notice in advance of leave, unless the leave is taken for an emergency. Employees must follow the employer's policy. Employers may require that notice is given in writing and may require an explanation of the need for leave. In an emergency, employees must give verbal notice within 24 hours of starting a leave.

Is Family Leave Paid or Unpaid?

- ▶ Although Family Leave is generally unpaid, employees are entitled to use any accrued paid vacation, sick or other paid leave.

How is an Employee's Job Protected During a Leave?

- ▶ Employers must return employees to their former jobs or to equivalent jobs if the former position no longer exists. However, employees on OFLA leave are still subject to nondiscriminatory employment actions such as layoff or discipline that would have been taken without regard to the employee's leave.

Eligible employees who have been denied leave, disciplined or retaliated against for requesting or taking leave, or have been denied reinstatement to the same or equivalent position when they returned from a leave or requested leave may file a complaint with the Bureau of Labor and Industries, Civil Rights Division.

For additional information, please call the nearest office of the Bureau of Labor and Industries:
▶ Eugene...541-699-7023 Employer Assistance:
▶ Salem...503-378-3292 ▶ 971-673-0624
▶ Portland...971-673-0761
Website: www.oregon.gov/boli

Or Write:
Bureau of Labor and Industries
Civil Rights Division
800 NE Oregon St Ste. 1045
Portland, OR 97232

This is a summary of Oregon's laws relating to Family Leave Act (OFLA). It is not a complete text of the law.

January 2012

THIS INFORMATION MUST BE POSTED IN A CONSPICUOUS LOCATION

Summary of Work-Related Injuries and Illnesses

Year 20 _____



Form approved OMB no. 1218-0176

All establishments covered by Part 1904 must complete this Summary page, even if no work-related injuries or illnesses occurred during the year. Remember to review the Log to verify that the entries are complete and accurate before completing this summary.

Using the Log, count the individual entries you made for each category. Then write the totals below, making sure you've added the entries from every page of the Log. If you had no cases, write "0."

Employees, former employees, and their representatives have the right to review the OSHA Form 300 in its entirety. They also have limited access to the OSHA Form 301 or its equivalent. See 29 CFR Part 1904.35, in OSHA's recordkeeping rule, for further details on the access provisions for these forms.

Number of Cases

Total number of deaths	Total number of cases with days away from work	Total number of cases with job transfer or restriction	Total number of other recordable cases
(G) _____	(H) _____	(I) _____	(J) _____

Number of Days

Total number of days away from work	Total number of days of job transfer or restriction
(K) _____	(L) _____

Injury and Illness Types

Total number of . . .	(1) Injuries	(4) Poisonings
(M) _____	_____	_____
(2) Skin disorders	(5) Hearing loss	(6) All other illnesses
_____	_____	_____
(3) Respiratory conditions	_____	_____
_____	_____	_____

Post this Summary page from February 1 to April 30 of the year following the year covered by the form.

Public reporting burden for this collection of information is estimated to average 58 minutes per response, including time to review the instructions, search and gather the data needed, and complete and review the collection of information. Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. If you have any comments about these estimates or any other aspects of this data collection, contact: US Department of Labor, OSHA Office of Statistical Analysis, Room N-3644, 200 Constitution Avenue, NW, Washington, DC 20210. Do not send the completed forms to this office.

Establishment information

Your establishment name _____
 Street _____
 City _____ State _____ ZIP _____
 Industry description (e.g., *Manufacture of motor truck trailers*) _____
 Standard Industrial Classification (SIC), if known (e.g., 3715) _____
 OR _____
 North American Industrial Classification (NAICS), if known (e.g., 336212) _____

Employment information (If you don't have these figures, see the Worksheet on the back of this page to estimate.)

Annual average number of employees _____
 Total hours worked by all employees last year _____

Sign here

Knowingly falsifying this document may result in a fine.

I certify that I have examined this document and that to the best of my knowledge the entries are true, accurate, and complete.

Company executive _____ Title _____
 (_____) _____ / /
 Phone _____ Date _____