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Orange County Risk Management Services and Program Assessment

FINAL REPORT

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Executive Summary

CPS HR was contracted by the County of Orange County Executive Office (CEO)/Risk Management to provide an analysis of its compliance, effectiveness, and overall performance in context of the 2012 performance audit recommendations. This included an examination of current policies, insurance cost allocation and coverage, ADA compliance data, workers' compensation and litigation processes and reporting, and the perceived effectiveness of safety training, resources, and communications. Analyses reviewed current practices, data records, and County departmental stakeholder feedback and interactions. This report summarizes the findings in each functional area, identifying any outstanding audit recommendations, and outlining recommended changes to refine current processes and standards to meet industry specific best practices.

Findings and Recommendations

CPS HR has laid out the findings below based on functional area, along with the correlating recommendations numbered below each set of findings. Expanded findings and recommendations are provided within the body of the report.

1. Policy and Procedure Effectiveness

All 58 reviewed policies and guidelines met or exceeded industry standards, however 22 could be strengthened with notated recommendations. Policies should be reviewed on a more routine basis, revising as needed, as the reviewed policies were revised an average of 11.5 years ago, including 6 revised in the last 5 years, 15 revised in the last 5 to 10 years, and 30 revised over 10 years ago. Additionally, communication efforts with the Board of Supervisors met or exceeded the level of communication typically provided by other organizations.

Audit Findings:

The County-wide Risk Management policy was updated March 14, 2017 and determined to meet or exceed industry standards, fulfilling the first 2012 audit recommendation (Recommendation 1).

The 2012 audit indicated a need to identify and implement insurance certification software to allow departmental staff to verify proof of insurance from vendors (Recommendation 7). The County Procurement office piloted EBIX, a full-service program in 2014, but has since cancelled the contract and established an in-house program for departmental use. Risk Management staff provide advice on insurance limits but do not utilize this in-house program as they are not involved in the tracking of insurance. This recommendation is outside the scope of this Risk Management Program review.

Recommendations

1. Establish a schedule to routinely review and update policies, if needed, to ensure compliance with current regulation and current events, avoiding long periods between reviews.
2. Implement Recommended Policy Revisions – Review the recommended policy changes outlined within the report, focused on updating industry language, linking policies to performance measures, updating and re-issuing policies to staff to strengthen visibility, and ensuring roles are clearly defined at the appropriate level.

3. Risk Transfer/Contract Management/Insurance Requirements – County should evaluate increasing insurance requirement limits to \$2 million for General Liability as the baseline standard to align with more proactive industry best practices. In the event that an across the board limits increase is not an option, it is highly recommended to review the types of agreements and increase the limits on contract types with the greatest risk, increasing limits for contracts exposures as needed.

2. Americans with Disability Act (ADA) Compliance

Title I – The Integrated Disability and Absence Management Program is an effective Return to Work program with records indicating all but one employee was able to return to work in their original or modified position. The procedures are consistent with the interactive process requirements of the American Disability and California Fair Employment and Housing Acts. Proposed revisions to the ADA/FEHA/FMLA/CRFRA compliance policy appear appropriate and in compliance with associated regulations indicating implementation with minimal revisions.

Title II – The current Coordinator is knowledgeable of Risk Management’s (RM) role in ensuring ADA Title II compliance with a good grasp on the issues and plans to improve current processes and tools to be more user accessible. A review of the ADA Title II Transition Binder found it had not been updated since the early 2000’s, but the Chart of Corrective Action for the latest ADA complaint had sufficient details on interim issues and corrective actions. The department currently documents calls and e-mails on a calendar, but a more detailed log is under development to track date, issue, and disposition. A review of forms indicated the current complaint and denial letters are appropriate, with a minor update, and the proposed Reasonable Accommodation and Request Review forms are under County review.

Recommendations

1. The Transition Plan Binder should be updated annually with current names and contact information as it is noted as the “Public Review Copy” and should list appropriate parties for the public to contact.
2. A more structured issues log should be developed and implemented with the initiating date, raised issue, and resulting disposition to build a more comprehensive record that would allow for trend analysis over time.
3. The draft Reasonable Accommodation and Request for Review forms currently under consideration should be implemented and used as precursor to an issue tracking log (Recommendation 2 above).

3. Closing Project Analysis

An external vendor was commissioned in April of 2007 to conduct a closing project to close out outstanding RM claims. Best practices indicate closing projects typically last from 3 to 12 months and occur infrequently based on a review of workload volume every 4 to 5 years. It is also best practice to predefine the scope of the project with the County and TPA setting the number of files, age and types of claims, and dollar amounts to provide guidance in ensuring vendor compliance. The reviewed closing project appears to be continual, spanning multiple years, with discrepancies in the understanding of

application referral criteria, TPA and vendor staff identifying inaccuracies in reported employment status causing inappropriate referral, TPA reported errors in vendor reports, and ambiguity on who is responsible for each type of case, resulting in duplicative efforts.

A financial review of TPA data indicated that the vendor closed 129 files over 30 months with an average expense of \$3,157, while 138 open cases have accrued a higher average expense of \$3,653 so far. Meanwhile, the TPA resource specialist and current RM Assistant Workers' Compensation Manager are capable of doing many of the tasks for less expense. These findings are consistent with an AON audit of the process.

Based on this analysis, the reviewed closing project does not align with best practices given the duration and the ambiguous inclusion criterion being utilized. Without having clear criteria and timelines, the current closing project does not exhibit financial practicality in terms of long-term budgeting.

Recommendations

- 1.** County RM should initiate a schedule for reviewing claim pending volume and closing ratio every 4 to 5 years to determine whether a special closing project should be implemented utilizing the best practices criterion outlined above.
- 2.** Future closing projects should establish written criteria, with input from the TPA, outlining the case selection methodology including the number, age, and specific types of claims to be included, in addition to a reasonable timeframe to guide those completing the project.
- 3.** The determination to use an external vendor for closing projects should incorporate a review of current staff capability and availability, the potential for redundant efforts, and a comparison of the financial expense of utilizing internal or TPA staff compared to an external vendor.

4. Workers' Compensation (WC) and General Liability (GL) Claims Processing

RM staff were praised by defense counsel and the Third-Party Administrator (TPA) for being responsive and knowledgeable but could expedite turnaround times if given more authority on smaller cases and by ensuring blind applications are complete with all required forms. An internal digitalization project is underway to expedite information sharing but is hindered by lack of support staff. A review of workers' compensation claims showed accurate reserving, appropriate payments and medical bill review, and efficient use of the utilization review. Overall, the WC program is working within industry standards and best practices and does not require any action to improve the program.

County Examiners have effectively utilized the Risk Management Information System (RMIS), accurately documenting government codes, liability determinations, litigation management, definition of issues, and claim status. With the implementation of RMIS, the Liability Claims program is a well-run and well-managed operation. RM has implemented many safeguards against fraud including a focus on the appropriateness of the medical diagnosis, sworn submissions under penalty of perjury, and the use of the discovery process to identify red flags. Overall, the fraud reporting protocols and deterrents in place minimize fraudulent activities are appropriate.

Audit Findings:

The implementation of RMIS fulfills the second part of the eighth recommendation from the 2012 audit, which required the development of a Liability system to track information, with the remainder of the recommendation addressed in part 8, “Loss Exposure Policy Effectiveness.”

Recommendations

1. County RM should consider budgeting a designated support position to assist with file scanning, in addition to other support functions like conducting document and subpoena requests, drafting department notices, filing support, tracking OCERS information requests, and death certificate notifications.
2. Obtain greater RM autonomy from Board to expedite WC settlement process in granting authority to defense Counsel. *It is noted that during the course of this project, RM addressed this situation and received an increase in authority from the Board of Supervisors from \$75,000 to \$150,000.*
3. Develop a quality control checklist or process to minimize missing information on submitted 5020s with the claim application.
4. Review and adjust reserves to reflect indicated general liability settlements within RMIS on a timely basis based on current information.

5. Evaluation of Workers’ Compensation Time Requirements

RM staff distributed their time across key functional areas, with the most time spent in WC claims, followed by Office Administration/clerical, and then Human Resource functions with less time spent in administrative and ad hoc responsibilities. Of note, Staff Specialists spend approximately a third of their time and the manager spends approximately a fifth of their time on office administration/clerical tasks, with the expectation that this will increase in response to the digitalization project. Additionally, Staff Specialists spend approximately 53.2 hours per year on the closure project but utilize temporary positions for an additional 126.8 hours due to staff time shortages.

Departmental representatives spent an average of 29.1 hours working independently and 7.3 hours per month working with RM staff on workers’ compensation tasks. Overall, respondents were positive about the availability of County RM staff as experts, transition to email instead of the postal service for most communication, and the implementation of the wage statement template. In contrast, respondents identified a need for a countywide guideline, more training options – specifically in payroll and human resource related tasks, and better communication on what to expect, what is pending, and how decisions are made.

Recommendations

1. The Risk Manager should consider a dedicated or shared support position to free up Staff Specialist and Program Manager time for more technical work (e.g., claims, settlements, subject matter guidance).

2. Assess if any of the WC Program Manager responsibilities can shift to Staff Specialists to free the WC Program Manager time for resolution specialist tasks, as discussed in the Closing Project Analysis.
3. Implement a proactive schedule of routine training refresher courses reaching out directly to each department to address the departmental liaison feedback that refresher courses to ensure familiarity with all current regulations and processes would be beneficial.
4. Facilitate training among HR, RM, and the departmental liaisons to address the departmental liaison feedback requesting training on the appropriate workers' compensation codes and payroll issues, such as restoration of benefits is also being requested.

6. Cost Allocation Methodology Assessment

The current cost allocation methodology meets or exceeds current industry standards and is compliant with State and County Agency loss allocation requirements based on a review of cost allocation policies, procedures, and historical cost allocation data reported in FY 04/05, 14/15, and 18/19. The use of a seven to ten year rolling history, for Workers' Compensation and General Liability, respectively is appropriate to ensure the inclusion of long-term claims. Calculations based on 70% of losses and 30% of department size has minimized steep curves for each department while maintaining consistent costing and contributions. The needed increase in funding over time reflects an increase in overall operational size and increase in losses across departments, which is consistent with industry development of Workers' Compensation claims and Actuary comments from their report. The current methodology meets standards.

Recommendation

1. RM should continue using the current annual cost allocation methodology as it aligns with best practices to monitor the results and ensure the continued stability required by the County.

7. Adequacy of Policy Limitations

Based on a review of policy premiums, deductibles, and coverage amounts, the policy limits appear to be adequate, with retentions at a level the County has determined to be appropriate.

Recommendations

1. The County should continue the current practice of reviewing policy levels to ensure adequate coverage with consideration to updated internal loss documentation as it aligns with industry best practices.

2. County brokers should continue the current practices of periodically reviewing available policies for purchase or through self-insurance to ensure the policy scope and coverage aligns with the most cost-effective option in a continually changing market. This periodic review, including a review of the private market, the California State Association of Counties – Excess Insurance Authority (CSAC-EIA), and potentially other JPA pools, reflects current use of industry best practices.

8. Loss Exposure Policy Effectiveness

The effectiveness of the general liability (GL) processes was assessed utilizing both RM and departmental feedback. Overall, the information being provided is sufficient to complete the general liability work activities, but an enhancement of the available information and clarity on the process would be beneficial. Current informational metric reports are useful to large departments but could be enhanced and globally shared with the inclusion of historical and trending liability sources, the financial impacts, and actionable recommendation to minimize or prevent departmental risks. Additional training opportunities to provide clarity on the metrics and how to utilize them in addition to explanation of the process, responsibilities, and factors considered when deciding on trial or settlement. Timely communication is key to preparing for the litigation process, with executive staff preferring to be notified via email at milestones. Meanwhile departmental staff work an average of 48.5 hours a month on GL activities, including 23.6 hours working collaboratively with RM staff.

Audit Findings:

The utilization of RMIS to define useful risk metrics and provide informational reports fulfills the first part of the eighth recommendation from the 2012 audit, with departmental staff indicating the report information is useful. This study provides recommendations to continue improvement through modifications to the reporting practice to align with best practices and to enhance the report utility.

Recommendations

1. RM should work with the departments to identify the resources and information that would be useful to assist them in achieving a positive impact in reducing their losses.
2. Data in the Informational Metric Reports needs to be set in context within each department, including a section for overall industry trends, comparison to similar Orange County departments, or other county departments. Departmental liaison feedback identified a need for training to explain the impact of the provided data and how it could be utilized to improve their department specific loss reduction efforts.
3. Large program reports providing examples of specific risk exposures, in addition to the County Risk Management Annual Report providing the high-level broad analysis, should be available as references to smaller departments to assist in the development of preventative programs based on County trends where small departments do not have sufficient data for individualized reports.

4. RM should evaluate the current distribution of the informational metric reports and evaluate alternative sources of data and an expansion of the data provided. *It is noted that during the course of this project, the IT division was implementing department specific data dashboards. This is an appropriate course of action to provide an additional source of data and RM should finalize the dashboards and then assess the efficiency of them once departments have started utilizing them.*
5. RM should establish a training program to provide managers and executives with an understanding of current trends, historical summaries, and the financial impact to both departments and the County overall. This should be provided every two to three years, or when significant changes occur in liability trends.
6. RM should address the reported inconsistency in the level of department executive communication across the litigation process through the establishment of a standardized schedule of communications, proactively identifying when and what information will be provided, and to whom, during the litigation process to ensure clear expectations of shared information and consistently provided communication.
7. RM should develop a training program for those persons participating in the litigation process explaining the details and issues surrounding investigation, claim analysis, testimony requirements and the process for determining settlement posture versus awaiting a verdict.

9. Safety Training Effectiveness

Departments prioritize safety training, despite the low priority perceived by RM staff, but both acknowledge training is hindered by unclear safety standards. Line supervisors are typically involved in the selection, coordination, and feedback on training while County RM is mostly involved in selection and administration. Department safety representatives work with RM to identify safety requirements and address non-routine questions, but RM indicated the representatives often lack authority and specific department knowledge and training needs. Departments rated 30 current trainings as between somewhat effective and effective, with small departments identifying six as more than effective and large departments identifying six as less than somewhat effective. Overall, departments prefer internal trainers, followed by online training, and then external trainers, with training records mostly provided to RM upon request.

It was clear there were procedures in place to report unsafe working conditions, with departments indicating supervisors were held accountable through reporting and correcting the issue and providing the appropriate tools and guidelines to staff. RM indicated supervisors should also be attending regular training and conducting root cause analyses but are also in the process of creating job safety analyses to better educate employees to avoid injury.

Overall, open feedback identified a desire for a guide identifying general and classification specific training, with more class time options offered and the implementation of a knowledge check to ensure the knowledge has been obtained. It would also be beneficial to have a catalog of available trainings and subject matter experts and an assigned safety training officer to customize department specific training.

Acknowledging the heightened need for safety due to COVID-19 pandemic, it is noted that these recommendations are intended to be addressed after the pandemic has been eradicated and normal operations have resumed.

Recommendations

1. Departmental management and supervisory staff should build a defined “safety culture”, elevating the recognition of safety and importance to the County and enhancing the current perception of safety.
2. County RM should revisit and align delivery methods with preferred providers per course type, utilizing the survey data as a guide.
3. County RM should review the effectiveness ratings for each course, initially targeting those courses that were perceived as less than somewhat effective including courses on Intruder/Active Shooter Safety, Lock-out/Tag-out, Confined Space Entry, Job Safety Analysis, Welding Safety, and Portable Extinguisher Training.
4. Recommend the County Office of Risk Management evaluate options for and implement a County Wide electronic training record keeping system to allow RM to review and identify departments not meeting acceptable standards. A mandate by the Board of Supervisors to require all departments that are subject to County funding be required to comply with the reporting tracking system.
5. Develop a county-wide training schedule, posting it in a common area and following up with departments to ensure all are aware of the available trainings.
6. Follow up with each department on a quarterly basis to assess if there are any additional trainings needed to meet departmental requirements.
7. Incorporate cross-departmental trainings on shared concepts (e.g., Job Safety Analyses, Emergency Action Plans, public accidents) to allow better understanding of cross-departmental operations. This shared understanding of exposures increases perception and awareness, impacting other departments and can influence a pro-active culture committed to safety and risk reduction.
8. The alignment of key indicators, service delivery, and expectations between County RM and the serviced departments should be assessed every three years through customer satisfaction surveys to identify areas that are doing well and areas that could be improved.

Introduction

The County of Orange County Executive Office (CEO)/Risk Management entered into an agreement with CPS HR Consulting (CPS HR) in June 2019, to review the performance of CEO/Risk Management (RM), in context of selected recommendations and program improvements identified during a 2012 performance audit. This study focuses on an assessment of current RM policies, insurance coverage and cost allocation, ADA compliance data, workers' compensation and litigation processes and reporting, and the perceived effectiveness of safety training, resources, and communications. Each studied area was analyzed through a review of existing documentation, data, and/or feedback from both RM and Departmental liaison staff. This report presents the results of these analyses, providing a summary of findings in each assessed area and recommendations to guide RM in meeting industry best practices.

Scope of Work

The CPS HR scope of work to conduct the County of Orange RM performance review included completion of the following tasks and deliverables, with documented findings and recommendations.

1. **Policy and Procedure Effectiveness:** Review clarity, revision timelines, and alignment of current policies and procedures with best practices and current law.
2. **Americans with Disability Act Compliance:** Review of the implementation of developed corrective action plans to determine effectiveness in meeting Title II of the Americans with Disability Act.
3. **Closing Project Analysis:** Review and comparison of the Closing Project criterion, billing, and claims handling against industry best practices.
4. **Workers' Compensation and General Liability Claims Processing:** Determining the adequacy of insurance coverage for loss runs, workers' compensation and liability claims, and litigation processes, benchmarking the program's performance with industry peers.
5. **Evaluation of Workers' Compensation Time Requirements:** Identification of time spent by County RM staff in each work area compared to the time spent by departmental liaisons on workers' compensation tasks. Assessment of the current effectiveness of workers' compensation procedures from both RM and departmental perspectives.
6. **Cost Allocation Methodology Assessment:** Review the current and historical cost allocation methodologies in relation to litigation loss runs to assess effectiveness/impact on departmental loss experiences.
7. **Adequacy of Policy Limitations:** Comparison of current insurance policies to loss exposure documentation to determine adequacy of policy limits.
8. **Loss Exposure Policy Effectiveness:** Assess the current Loss Exposure/Liability claim communication frequency, procedure clarity, and information usefulness from the perspective of both County RM staff and departmental liaisons assigned to these tasks.
9. **Safety Training Effectiveness:** Assess the perceived effectiveness and importance of the current available safety training, resources, and communication from the perspective of both County RM staff and departmental liaisons assigned to related tasks.

County of Orange Risk Management Background

The County of Orange Risk Management (RM) consists of five units dedicated to preserving and protecting County human and capital assets to assist County departments in fulfilling their missions without unnecessary cost. This includes the following working units:

- **Administrative, Insurance Procurement, and Financial Management:** Responsible for the development of strategic plans and annual budgets, revenue management, purchasing commercial insurance policies to protect County assets, and supporting departmental purchasing and real estate staff.
- **Liability Claims Management:** Responsible for in-house adjustment of all liability claims against the County, litigation management and financial recovery, and contractor management for legal or investigative services and aviation adjustments.
- **Workers' Compensation Management:** Responsible for provision of state mandated benefits to injured employees, coordination of benefits among departments, oversight of private claims management contract, and evaluation of submitted information related to anti-fraud and loss prevention efforts.
- **Safety and Loss Prevention:** Responsible for ensuring a safe environment for staff and visitors, providing specific safety trainings to County employees, training departmental safety representatives to assist in maintaining standards, developing policies, and training materials, and providing corporate safety oversight.
- **Integrated Disability and Absence Management:** Responsible for providing oversight to departmental implementation of programs in support of American with Disabilities Act (ADA) compliance including the interactive process, designating an ADA Coordinator to each department to address complaints or recommendations, managing leave of absence and return to work processes.

To increase transparency of the operations of CEO/RM, the Board of Supervisors initiated a performance audit to provide a comprehensive assessment of RM Operations in 2012. This audit resulted in 26 recommendations for process improvement or movement towards best practice. This included updating existing policies and manuals, automating or streamlining processes, implementing a tracking system and providing data driven reports to better manage risks, and increasing the collaborative efforts to help departments be more proactive in managing risks.

In 2014, a follow-up to the audit was conducted to assess the implementation of the recommendations. CEO/RM had completed/closed 23 of the 26 recommendations. Significant improvement was noted in:

- Development and revision of policies.
- Implementation of new information systems to increase automation and improve risk analysis capabilities.
- Increase in contractor oversight with incentives and penalties for third party contracts.
- Retention of a County Legal Defense Panel with 5-year terms; and
- An increase in the County-wide coordination of information including quarterly newsletters and the provision of training opportunities.

The 2014 follow-up found the remaining three recommendations were in progress with the intent to complete them within 12 months. The remaining recommendations included:

- Updating the County RM policy with consideration to the other recommendations
- Improve RM through the development of a new system to facilitate collection of useful metrics, analysis, and summarization for departments; and
- Implementing insurance certification software to track and verify proof of insurance.

Purpose

The purpose of this report is to provide an analysis of the County of Orange Risk Management program's compliance, effectiveness, and overall performance in context of the 2012 audit recommendations. This analysis evaluates Risk Management functions and processes, identifying the status of the audit recommendations that were in progress at the time of the 2014 audit follow-up review, and provides recommendations to refine processes and standards to meet industry specific best practices. This includes a review of past audit findings, current policies and information, and current practices and interaction with other Orange County departments.

Methodologies

The analysis of the current RM performance incorporated multiple methodologies, as outlined herein, with the specific methodologies utilized identified within each defined deliverable.

Subject Matter Expert Collaboration

CPS HR Consulting provided a high-level view of the project to the Director of Risk Management and managers in July 2019, identifying key subject matter experts (SME) in each work area. Subsequent interviews with the individual managers were conducted to obtain a comprehensive understanding of each area's workload, current work processes, and any recent changes to the processes. Additionally, CPS HR requested background information, including historical workload metrics and financial impacts where applicable, and system access to review information where needed. SMEs were consulted to provide clarifying information in their respective areas to ensure accurate understanding of the data.

Document Review

CPS HR conducted a document review to assess comprehensiveness and coverage of all relevant areas, timeliness of review/revision, clarity, and reflectiveness of current best practices within each functional mission-based work area. This included a review of the following:

- Current County Risk Management policies and procedures
- Safety and Loss Prevention Manual (encompassing many of the Safety guidelines/policies)
- Documentation of the commitments and corrective action plans to meet the County's 2010 transition plan to comply with the Title II Americans with Disabilities Act.

Historical Performance Metric Data Review

Quantitative performance metrics were requested to conduct trend analyses on the frequency of claims and the financial impact to the County overall and to the Departments. Additionally, performance metrics were reviewed in context of current practices to assess alignment with best practices for relevant key deliverables. The collected information included the following:

- Loss run, workers' compensation Return-to Work and Alternative Dispute Resolution data, liability claims and litigation metrics, and closing project criteria, billing, and feasibility were collected from County Risk Management and the County's third-party administrator.
- Current loss exposure policies were compared to reported loss exposures to evaluate limits.
- Workers' Compensation and General Liability cost allocation data from FY 09-10, FY 14-15, and FY 19-20 was reviewed to assess the allocation methodology and impact on loss experience.

Departmental and Risk Management Staff Feedback

Four of the designated deliverables relied on feedback from specific County Risk Management and/or departmental liaison staff. For each deliverable, surveys or data gathering tables were developed and deployed to the targeted staff. County Risk Management identified departmental liaisons who would be knowledgeable of loss exposure, safety training effectiveness, and Workers' Compensation practices.

Each group was sent a customized survey targeting their area of expertise via a confidential link using the online surveying tool, Survey Gizmo. Each group was given two to three weeks to respond, with automatic reminders sent to those who had not responded twice during the survey collection period. Additionally, the list of liaisons received a follow up e-mail by CPS HR to verify the links had been received, and an executive sponsored letter encouraging responses from County Risk Management.

In addition to departmental feedback, County Risk Management staff responsible for Loss Exposure/Litigation and/or Safety Training provided feedback from their perspective via an online survey. This survey was open for about two weeks with staff receiving reminders from Survey Gizmo, a follow-up e-mail from CPS HR, and encouragement from County Risk Management Executive staff.

Each of the online surveys contained scaled items with standardized response options and opportunities to provide open feedback on what was currently working or not working in the current processes. In order to encourage candid feedback, all responses were confidential with only aggregated summaries provided to County Risk Management.

Additionally, County Risk Management staff responsible for Workers' Compensation completed a workload summary table documenting the percentage of time spent in administrative tasks, human resource functions, workers' compensation claims, and ad hoc/miscellaneous work tasks. The work task areas were predefined by CPS HR Consulting based on a review of duty statements, work process documentation, and discussion with the SME.

Constraints and Data Qualifications

CPS relied on information received from County Risk Management staff and departmental liaisons. The feedback surveys and subsequent conclusions were based on a limited number of responses due to lower response rates. The ability to follow up with further interviews and onsite document review was also impacted by a state-wide "Stay-at-Home" initiative in response to the COVID-19 pandemic. The CPS HR team was also impacted by internal turnover; however, measures were taken to identify equivalent expertise and minimize impact to the overall timeline.

Organizational Findings and Recommendations

1. Policy and Procedure Effectiveness

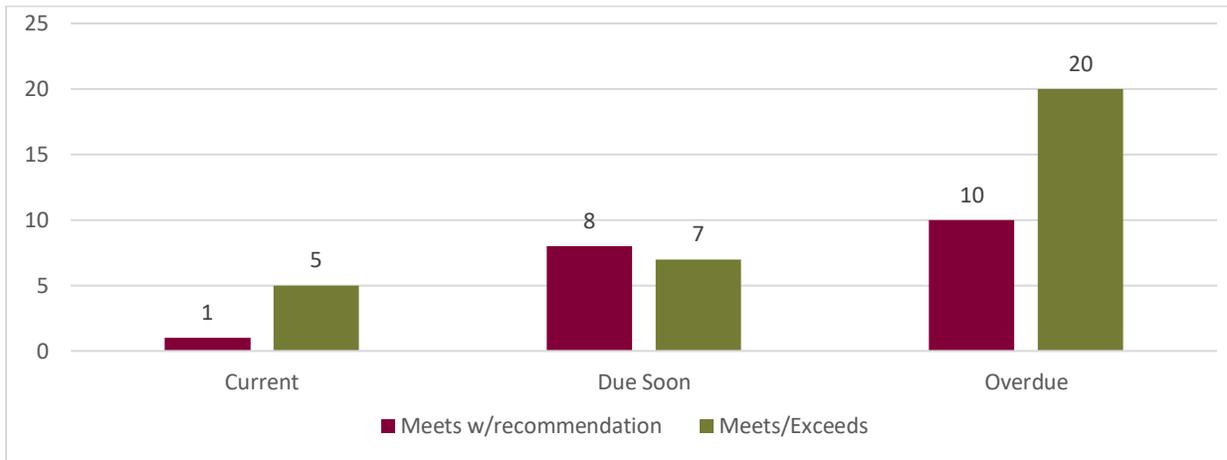
CPS HR Consulting reviewed each identified and provided Orange County Risk Management policy or procedure to identify if it met current compliance expectations. The intent of this review was to determine if the County maintained a comprehensive set of policies and procedures to provide guidance in clear language that was practical to implement in all the departmental programs. Recommendations were provided within context of current best practices to provide clarity, increase efficiency, and/or improve operations.

Findings

CPS HR reviewed 55 policy/procedures and 3 additional guidelines (Claim Settlement Authority levels, Risk Transfer/Contract Insurance Requirements, and TPA Performance Incentives). Of the 58 reviewed documents, 62.1% met or exceeded industry standards and best practices with the remaining 37.9% meeting standards but had corresponding recommendations for improvement. Those that meet or exceed standards currently align with industry standards and best practices, with little to no change required to the content tied to industry knowledge. Those that meet with recommendations currently meet the industry standards but could be updated to reflect current terminology or be enhanced to provide more clear comprehensive coverage.

The development and revision dates on each of the policies was also reviewed to determine if the policies were current and being updated in a timely manner. Overall, 51 of the policies had associated established and/or revision dates, with the last update ranging from 5/22/62 through 5/8/19, including ten (19.6%) being revised 1/28/09 to 1/29/09. On average, policies were last reviewed approximately 11.5 years ago. It is recommended that policies be reviewed and revised at least once every ten years to ensure continued compliance with current standards and current events. Each of the reviewed policies and guidelines were identified as being current (last updated within last 5 years), review soon (last updated 5 to 10 years ago), and overdue for review (updated 10 or more years ago). Of the 51 with dates, 11.8% were considered current, 29.4% were due soon, and 58.8% were overdue for review.

The following graph, Figure 1 below, identifies the number of current, due soon, and overdue policies by recommendation status, but does not include those with no date. The full list of policies reviewed, last revision date, and current status in accordance with industry standards is located in Appendix A. The largest number of policies are overdue for review, but currently meet or exceed standards indicating the revision may not need much adjustment. Meanwhile, those categorized as meeting standards with recommendations may require more revision to implement recommended changes in addition to verifying alignment with current compliance and regulatory standards.

Figure 1. Summary of Policy Revision Timelines and Applicability to Standards

In addition to the policies and guidelines discussed above, a series of communication documents were provided and reviewed, including a sample of the quarterly newsletter, County RM report, employee newsletters, confidential communications to Board of Supervisors, CEO RM performance metrics and other assorted documents. Overall, these documents indicate County RM is effectively communicating with departments and the Board of Supervisors. The data provided to Departments is well organized and critical for effective Risk Management. It also appears that the communication efforts with the Board of Supervisors meets and or exceeds the level of communication provided by other organizations and should be continued.

The first audit recommendation identified a need to update the existing County-wide Risk Management policy. This recommendation was still in progress as of the 2014 audit follow-up, with the plan to submit an updated draft to the Board of Supervisors and CEO office by December 2014. This policy was updated March 14, 2017 and determined to meet or exceed industry standards, fulfilling the audit recommendation.

The seventh audit recommendation identified a procedural improvement to identify and implement insurance certification software or methodology to allow departmental staff to verify proof of insurance from vendors with multiple County contracts. During the 2014 audit follow-up, the County Procurement office was piloting a contracted full-service program, EBIX, however has since cancelled the contract and established an in-house program for departmental use. Risk Management staff do not utilize this program as they are not involved in the tracking of insurance but do provide advice on insurance limits pre-contract when there are variances. This audit recommendation is outside the scope of this Risk Management Program review.

CPS HR also evaluated the insurance requirement limits for General Liability. The current industry limit requirements have been in place for more than thirty years. Industry practices are showing that agencies looking to be more proactive in minimizing risk are increasing the insurance requirement limits to \$2 million per occurrence and to \$4 million aggregate limits. These agencies acknowledge the potential for increase in cost of services however they understand the raised limits allow for a more effective transfer of risk to their vendors and an enhanced reduction to their exposure to risk.

Recommendations

The reviewed policies all met industry standards with recommendations focused on updating industry language, linking policies to performance measures, updating and re-issuing policies to staff to strengthen visibility, and ensuring roles are clearly defined at the appropriate level.

1. Establish a schedule to routinely review and update policies, if needed, to ensure compliance with current regulation and current events, avoiding long periods between reviews.
2. **Policy #101: Injury and Illness Protection** – County Executives should review the responsibility allocated to Department heads; build in safety as a measurable criterion for performance review to enhance safety visibility and buy in from top management.
3. **Policy #103: Confined Space Entry** - Annual training required including documenting frequency per employee, with recommended annual review by CEO/RM to confirm compliance.
4. **Policy #104: Emergency Action Plan** – Establish a comprehensive policy that adds Active Shooter, Wildland Fires, Floods, and Workplace Violence.
5. **Policy #106: Hazard Communication** – Change Material Safety Data Sheets (MSDS) to Safety Data Sheets (SDS); Update policy to confirm compliance with current standards.
6. **Policy #107: Hearing Conservation and Noise Control** – Update policy to bring current, re-issue policy to strengthen visibility and enhance full compliance.
7. **Policy #108: Lock out Tag Out** – Clarify policy to identify how and who within RM reviews compliance.
8. **Policy #109: Respiratory protection program** - Change terminology of Forest Fires to Wildland Fires
9. **Policy #201: Establishing Loss Prevention and Safety Policy** – Update policy to bring current, re-issue policy to strengthen visibility and enhance full compliance.
10. **Policy #301: Safety Responsibilities – Agency/Dept. Heads** - County should evaluate Senior Management review of the authority. Improving workplace should be include within Department Head evaluation process.
11. **Policy #303: Safety Responsibilities – All Employees** – Routinely re-issue/distribute to remind employees of current policy, importance of reporting hazards.
12. **Policy #305: County Safety Office Responsibilities** – Review the business practice, clarify whether Safety Professionals or Department Heads are responsible for confirming other policies comply with existing safety policy to eliminate perceived duplicative role and complication in ensuring compliance.
13. **Policy #306: Contractor Safety Responsibilities** – Add a requirement for contractors to provide evidence of an approved or adopted IIPP that complies with the County program when working on County property.
14. **Policy #401: Accident/Incident Investigations** – Implement a random review of records to enhance supervisor training on accident investigation.
15. **Policy #402: Hazard Control/Safety Inspections** – a) Adopt a requirement requiring Safety inspections to be documented with program compliance being included in the evaluation of Department funding. b) Evaluate options to implement County-wide system for documenting all conducted safety related trainings, with County RM reviewing compliance and issuing annual compliance metric reports.
16. **Policy #405: Job Safety Analysis** – Develop a county-wide joint effort between Department and Safety staff for implementing JSAs into identifying safety training requirements for all employees, updating routinely to incorporate new exposures that have entered the workplace.

17. **Policy #601 Safety Communication** - Deploy a county-wide broadcast to all employees to educate them on the county-wide safety hotline to report unsafe conditions.
18. **Policy #703: General Safety Rules, General Safe Work Procedures** - Update the format of all safety policies for online accessibility/searchability by employees, department supervisors, and management.
19. **Policy #802: Aerosol Transmissible Diseases (ATD) Policy** – Shorten policy, simplifying the language to be understood by those without a Health care background. Ensure that program be updated for current COVID-19 Pandemic (Current responsibility of the Health Care Agency).
20. **Policy #901: Forklift, Industrial Truck Operating Rules** – Create a formal County established policy aligning with Cal OSHA standards currently utilized to align with County established protocols.
21. **Risk Transfer/Contract Management/Insurance Requirements** – County should evaluate increasing insurance requirement limits to \$2 million for General Liability as the baseline standard to align with more proactive industry best practices. In the event that an across the board limits increase is not an option, it is highly recommended to review the types of agreements and increase the limits on contract types with the greatest risk, increasing limits for contracts exposures as needed.

2. Americans with Disability Act (ADA) Compliance

CPS HR evaluated the County RM ADA Title I and Title II policies for compliance with regulatory guidelines and the effectiveness of current documentation to meet the County's 2010 Transition plan for meeting Title II.

Findings

Title I:

CPS HR discussed the current Integrated Disability and Absence Management (IDAM) Program with the program manager, in addition to reviewing a spreadsheet outlining current staff with restrictions, classified by department and disposition. The IDAM Manager indicated the County processes employees who are unable to do prior jobs as disability retirements through the Orange County Employees Retirement System (OCERS). However, if OCERS denies the status, the County works to incorporate them into a transitional or modified position in their original department, or if needed in another County department. A couple of employees have been accommodated in departments other than their original position, and one was accommodated in her own department. Apart from one case, all employees were able to return to work in their original or a modified position, demonstrating an effective Return to Work program.

- These procedures are consistent with requirements under the interactive process as required by the ADA and the California Fair Employment and Housing Act (FEHA).

CPS HR also reviewed a proposed policy revision to the ADA/FEHA/Family Medical Leave Act (FMLA)/California Family Rights Act (CFRA) compliance policy, which focused on the California FEHA and CFRA compliance which are broader and encompass the Federal statute requirements.

- The proposed revisions appear to be appropriate and in compliance with the associated regulations with indications this policy will be implemented with minimal revisions.

Title II:

CPS HR met with the County ADA Coordinator for Title II, who provided an Americans with Disabilities Act, Title II Transition Plan outlining departmental ADA actions including the issue and anticipated resolution. However, the binder has not been updated since the early 2000's with the contacts last updated as of 2000 and the last entry being in 2003.

The Coordinator provided a Chart of Corrective Action for the singular ADA complaint received during the last year, encompassing her time in the position, which provided a thorough description of interim issues and corrective actions. The only other documentation was a desk calendar noting when calls or e-mails were received. A more detailed data log documenting the date, issue, and disposition of the calls or e-mails is under development but did not exist at the time of this evaluation.

CPS HR also reviewed the current complaint letter and denial letter, noting that the former needs to update the address for the Coordinator, but the latter is appropriate. In addition to existing forms, CPS HR reviewed draft copies of a Reasonable Accommodation request and a Request Review Form which document raised issues, steps considered and implemented, and request outcome. These forms are currently under consideration for use in the County.

- Overall, the Coordinator is knowledgeable of RM's role in ensuring ADA Title II compliance, with a good grasp on the issues, utilizing the two available attorneys in a consultative capacity when a path to resolution is unclear. Additionally, the Coordinator has plans in place to proceed to improve current processes and tools to be more user accessible.

Recommendations

1. The Transition Plan Binder should be updated annually with current names and contact information as it is noted as the "Public Review Copy" and should list appropriate parties for the public to contact.
2. A more structured issues log should be developed and implemented with the initiating date, raised issue, and resulting disposition to build a more comprehensive record that would allow for trend analysis over time.
3. The draft Reasonable Accommodation and Request for Review forms currently under consideration should be implemented and used as precursor to an issue tracking log (Recommendation 2 above).

3. Closing Project Analysis

CPS HR conducted a three-pronged audit of the Closing Project to assess conformance with best practices with consideration to closing project criteria, claims processing, and the efficiency of utilizing an outside vendor. This included interviews with appropriate parties, an audit of open and recently closed (within last 18 months) files, and an analysis of the cost data and metrics on open and closed files. Additionally, CPS HR reviewed the results of an independent audit of the Closing Project conducted by AON in March 2019.

Findings

Findings were summarized and compared to industry best practices based on interviews with two large California public entity Risk Pooling JPAs, and one large TPA who specializes in public entities in addition to the CPS HR Consultant's related work experience in claims management.

An external vendor was commissioned in April of 2007 to conduct a closing project to close out outstanding RM claims. Best practices indicate closing projects are typically short term, lasting from 3 to 12 months, used to reduce TPA caseloads or catch up on a backlog, control litigation costs, and reduce future organizational liabilities. Additionally, best practices indicate closing projects should be done on an infrequent basis. County RM should review performance and workload volume every 4 to 5 years to determine if there is a need for a closing project. Indicators of need would include increasing case load and/or closing ratios below 95%, without an unusual event providing an explanation for same. If closing ratios remain near 100% and caseloads are not increasing beyond a reasonable deviation a special project would not be indicated. The current closing project appears to be continual, spanning multiple years, with a previous audit by AON indicating the TPA staff's description of the project was open-ended without a timeframe or written program description.

Claim cases are forwarded to the closing project team for expedited processing based on preset criteria. Best practices dictate that included claims be identified by criterion established by the County and TPA as the client holding the initial claims. This criterion should include the number of files, age of claims, types of claims, and dollar amounts to control the scope of the closing project and to provide guidance in ensuring vendor compliance.

Findings revealed a discrepancy in the understandings of the application referral criteria, with TPA and vendor staff identifying errors in the employment status causing inappropriate referral, TPA staff reporting errors in vendor reports, and ambiguity on who should be responsible for each type of case to avoid duplicative efforts within the reviewed closing project. This included the referral of cases that were still under active litigation or that could be closed administratively, resulting in unnecessary review and expense by the vendor. This is consistent with AON audit findings that active employee and previously closed cases were being referred inappropriately to the project, especially given that the TPA resource specialist can conduct the same tasks for less expense. Further review of the process identified duplicative efforts between the TPA, vendor, and defense counsel through required follow-ups to clarify data, obtain answers to questions, and the completion of additional paperwork, resulting in additional costs to the County.

Additionally, the movement of cases from the TPA closing manager and panel defense firms to the vendor creates negative morale given that the TPA resource specialist and current RM Assistant Workers' Compensation Manager are capable of doing many of the tasks at less cost. A financial review of TPA data indicated that the vendor closed 129 files over 30 months with an average expense of \$3,157, while 138 open cases have accrued a higher average expense of \$3,653 so far. This feedback is provided for consideration and future examination, but has not been independently verified by CPS HR.

Based on this analysis, the reviewed closing project does not align with best practices given the duration and the ambiguous inclusion criterion being utilized. Without having clear criteria and timelines, the current closing project does not exhibit financial practicality in terms of long-term budgeting.

Recommendations

1. County RM should initiate a schedule for reviewing claim pending volume and closing ratio every 4 to 5 years to determine whether a special closing project should be implemented utilizing the best practices criterion outlined above.
2. Future closing projects should establish written criteria, with input from the TPA, outlining the case selection methodology including the number, age, and specific types of claims to be included, in addition to a reasonable timeframe to guide those completing the project.
3. The determination to use an external vendor for closing projects should incorporate a review of current staff capability and availability, the potential for redundant efforts, and a comparison of the financial expense of utilizing internal or TPA staff compared to an external vendor.

4. Workers' Compensation and Liability Claims Processing

CPS HR reviewed the effectiveness of workers' compensation and general liability claim processes, including collaboration in the process, appropriate documentation of claim information, and an assessment of the fraud prevention processes.

Findings

Workers' Compensation

CPS HR reviewed the efficiency of the Workers' Compensation process through a review of 20 workers' compensation claim files and interviews with the Workers' Compensation manager, six defense Counsel staff, and the program manager, three unit managers, and three examiners from the County's Third-Party Administrator (TPA).

Discussion with the Workers' Compensation manager identified an effort to digitalize files, retaining notes, and running metrics to make the information more accessible. This effort is hindered by the lack of support staff, resulting in the manager spending time on clerical level work. The implementation of scanned files instead of the current manual process would result in increased efficiency and sharing of information with the TPA and/or defense counsel.

Defense Counsel interviews indicated that the County RM and TPA were some of their better collaborators due to staff being accessible, responsive, and knowledgeable. Counsel indicated authority is provided within a reasonable turnaround time but could be improved if RM had more autonomy to short-cut authority requests to the Board on smaller cases or returning to quarterly instead of semi-annual reviews.

TPA staff interviews complimented County RM on their responsiveness, thoroughness of initial claim submissions, and ability to get Stipulation (STIP) if still employed, or Compromise and Release (C&R) settlements if separated. TPA staff also indicated delays due to blind applications missing the 5020 form that initiates the claim or receiving the 5020 but missing additional required forms. Specific departmental challenges include off-hour shifts and problems getting data from the Sheriff's department and slower response times from the Health Care Agency.

The review of the 20 workers' compensation files demonstrated accurate reserving, appropriate initial payments, appropriate medical bill review, and efficient use of the utilization review. Consultant found no issues that need any action to improve this program, either at the County or with the TPA.

General Liability

The Risk Management Information System (RMIS) was developed to automate the General Liability process and provide better analytical data for reporting in response to the 2012 audit findings. CPS HR evaluated the efficiency of the General Liability process through an audit of 15 open and 16 closed claims in RMIS.

The audit demonstrated effective use of RMIS by the County Examiners with good recognition of Government codes, liability determination, litigation management, and excellent documentation of the issues and claim status. A couple files did not have reserves adjusted to reflect the indicated settlement value; however, most files did have appropriate reserves present. This may be due to timing issues rather than lack of awareness (i.e., the reserves had just not been raised yet).

Overall, with the implementation of RMIS, the Liability Claims program is a well-run, and well-managed operation. The implementation of RMIS fulfills the second part of the eighth audit recommendation, which was still in progress at the time of the 2014 audit follow-up¹.

Fraud Investigation Process:

CPS HR reviewed the fraud investigation and assessment process to assess the potential for fraud within the Workers' Compensation claims process. The department has many safeguards against fraud from claimants, attorneys, and/or doctors. Workers' compensation investigations focus on the appropriateness of medical diagnosis with respect to physical damages and described injury. Government claims must be submitted in a sworn fashion under penalty of perjury, which strengthens protection against fraud, especially as penalties for fraud would be stronger than in general civil service claims. General Liability uses the discovery process in litigation to determine whether there are red flags that need to be considered as to any potential fraud. Also reviewed are professional claimants and attorney/doctor rings involved in County claims.

Overall, the fraud reporting protocols and deterrents in place to minimize fraudulent activities are appropriate.

Recommendations

1. County RM should consider budgeting a designated support position to assist with file scanning, in addition to other support functions like conducting document and subpoena requests, drafting department notices, filing support, tracking OCERS information requests, and death certificate notifications.
2. Obtain greater RM autonomy from Board to expedite WC settlement process in granting authority to defense Counsel. *It is noted that during the course of this project, RM addressed this situation, receiving an increase in authority from the Board of Supervisors from \$75K to \$150K.*

¹ Recommendation 8: a) Identify useful metrics to collect and analyze, b) develop a new liability claims information system, and c) develop risk analysis capability for the County.

3. Develop a quality control checklist or process to minimize missing information on submitted 5020s with the claim application.
4. Review and adjust reserves to reflect indicated general liability settlements within RMIS on a timely basis based on current information.

5. Evaluation of Workers' Compensation Time Requirements

CPS HR evaluated the time required on workers' compensation using a two-pronged approach. The first assessed the time requirements of County RM staff, summarizing the current utilization of time and any undone work due to lack of resources. The second assessed the current Workers' Compensation procedures and operations along with the time requirements of departmental liaisons to complete related work tasks.

Findings

County Risk Management Time:

The four County RM Workers' Compensation staff provided estimations of percentage of time spent in a series of 36 standardized work task areas, developed through discussion with subject matter experts and review of related procedures, policies, and job descriptions. Staff also identified the number of additional hours required to complete any work not being done within the standardized areas.

Overall, the time was distributed amongst key functions, as summarized in Table 1 below, with the following key findings:

- Staff specialists spend approximately a third of their time on office administration/clerical functions, equivalent to 1,212 hours across the two positions, and the Program Manager spends just over a fifth of time, equivalent to 398 hours a year, on similar tasks. This time requirement is expected to increase as the files become digitalized for easier access and sharing.
- Only 1.5% of Staff Specialist time, equivalent to approximately 53.2 hours across the two positions, is spent on the closure project, but staff indicated an additional 126.8 hours is required and is currently being covered by temporary positions.

Table 1. Time Distributed Amongst Key Functions

	Staff Spec. (x2 FTE)	Asst. Mgr.	Prog. Mgr.
Administrative/General Work Tasks – breaks, administrative paperwork, supervision, program management.	1%	12%	20%
Office Administration – customer support, mail, filing, copying, program meetings	33.5%	10%	22%
Human Resource Functions – liaison support, payroll, new hire training, wage statement logs	26.6%	10%	5%
Workers' Compensation Claims – set-up; reviewing claims, authorization requests, verifying information, meeting with claimants, reviewing C&R settlements, claim resolution, reporting	37.4%	44%	22%
Ad Hoc Responsibilities – Closure project, settlements review, ergonomic requests, subpoena response, death notifications, metrics, and ad hoc meetings	1.5%	16%	14%
Administrative – reserve change files, Board of Supervisor meetings, review legal mail	0%	8%	17%

Departmental Liaison Feedback:

A feedback survey was designed and deployed to a list of 29 departmental liaisons, of which 16 provided feedback, however one response was removed as invalid data. The full results of the survey are available in Appendix B, with the following key findings:

- Departmental liaisons spent an average of 29.1 hours per month working independently and 7.3 hours a month working collaboratively with County RM on workers' compensation tasks.
- Departments found County RM responsive and knowledgeable as subject matter experts but were less clear on the availability of clear processes and guidelines outlining potential fraud sources and methods to manage risks with all respondents indicating a refresher course would be beneficial.
- Overall, two-thirds of respondents indicated processes were effective; however, two of the three departments with less than 15 staff and both departments who process 6 to 10 claims per month indicated the processes were ineffective.

Overall, respondents were positive about the availability of County RM staff as experts, transition to email instead of pony mail for most communication, and the implementation of the wage statement template. In contrast, respondents identified a need for a countywide guideline, more training options – specifically in payroll and human resource related tasks, and better communication on what to expect, what is pending, and how decisions are made.

Recommendations

1. As mentioned in the prior section, the Risk Manager should consider a dedicated or shared support position to free up Staff Specialist and Program Manager time for more technical work (e.g., claims, settlements, subject matter guidance).
2. Assess if any of the WC Program Manager responsibilities can shift to Staff Specialists to free the WC Program Manager time for resolution specialist tasks, as discussed in the Closing Project Analysis.
3. Implement a proactive schedule of routine training refresher courses reaching out directly to each department to address the departmental liaison feedback that refresher courses to ensure familiarity with all current regulations and processes would be beneficial.
4. Facilitate training among HR, RM, and the departmental liaisons to address the departmental liaison feedback requesting training on the appropriate workers' compensation codes and payroll issues, such as restoration of benefits is also being requested.

6. Cost Allocation Methodology Assessment

CPS HR evaluated the effectiveness of the County of Orange's methodology for allocating premiums to County Departments as it applies to Workers' Compensation and General Liability/Auto Liability (Tort Exposure) funding. The evaluation did not review the philosophies associated with other lines of business (e.g., property, earthquake), which are typically a direct transfer of risk to an insurer and based on Tennant Improvement Values rather than driven by the exposures as presented by the departments.

Findings

Department allocations are determined using the operational size of the department based on number of full-time equivalent staff and the paid losses for seven years prior to the reported year for Workers’ Compensation and ten years prior for General Liability. The use of a seven- and ten-year loss histories for Workers’ Compensation and General Liability, respectively, is appropriate given that the overall time to develop and resolve these types of claims is much longer than a typical property based claim, with General Liability claims taking longer than Workers’ Compensation claims. For the purpose of this report, the required departmental allocation is referred to as a contribution, defined as the amount of funds provided to effectively fund the County in paying for claims costs, litigation costs, and settlements.

The evaluation of the methodology for determining the required contributions is based on data reports provided by the County of Orange Risk Management. These reports document the total paid and corresponding contributions by department for three specific time periods representing ten years ago (report from FY 09-10), five years ago (report from FY 14-15), and the current year (report from FY 19-20). Additionally, the analysis within and across these three time periods focused on departments who were responsible for at least 1% of the actual paid losses, combining the remaining departments into an “All Others” category. The required contribution for these departments were based more on their size with the loss history having little to no impact on determining the required contribution. A summary of the reviewed amounts and percentages for both General Liability and Workers’ Compensation is provided in Appendix C.

GENERAL LIABILITY

The reported amount and percentage of overall County required contributions and losses was reviewed, with the contribution and losses by department summarized in Figures 2 and 3 below.

Figure 2. General Liability Required Contributions by Department and Time Period

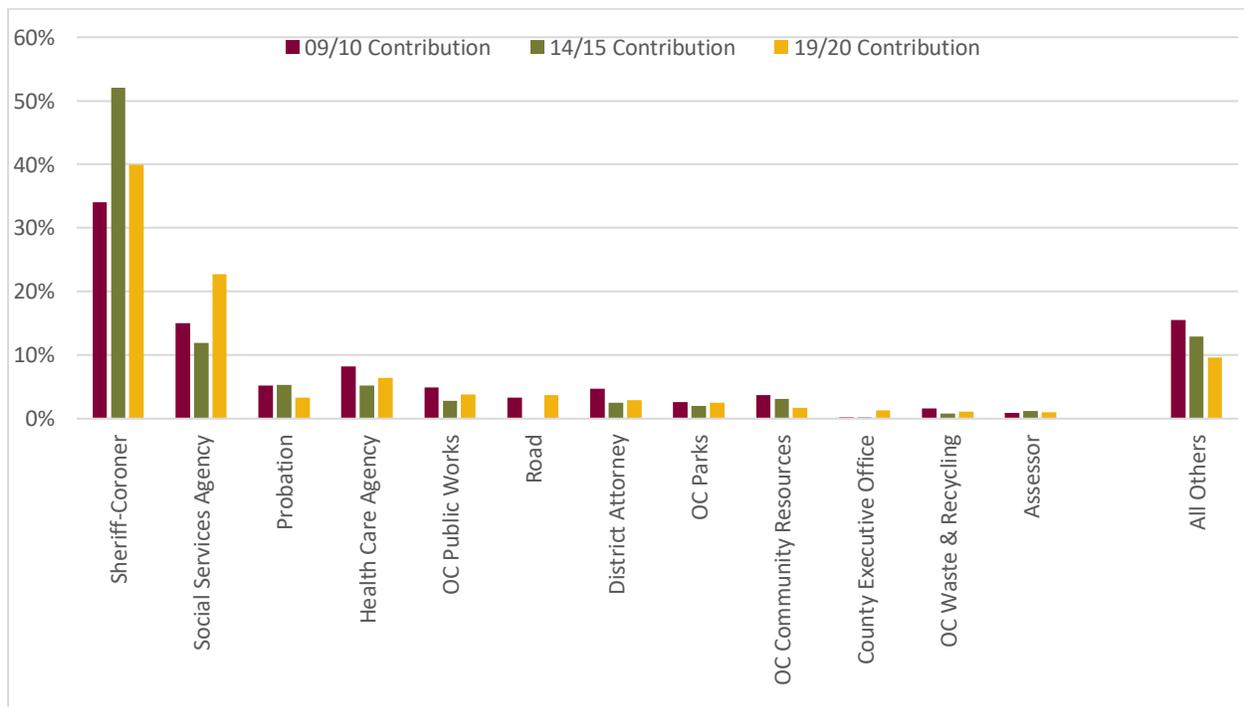
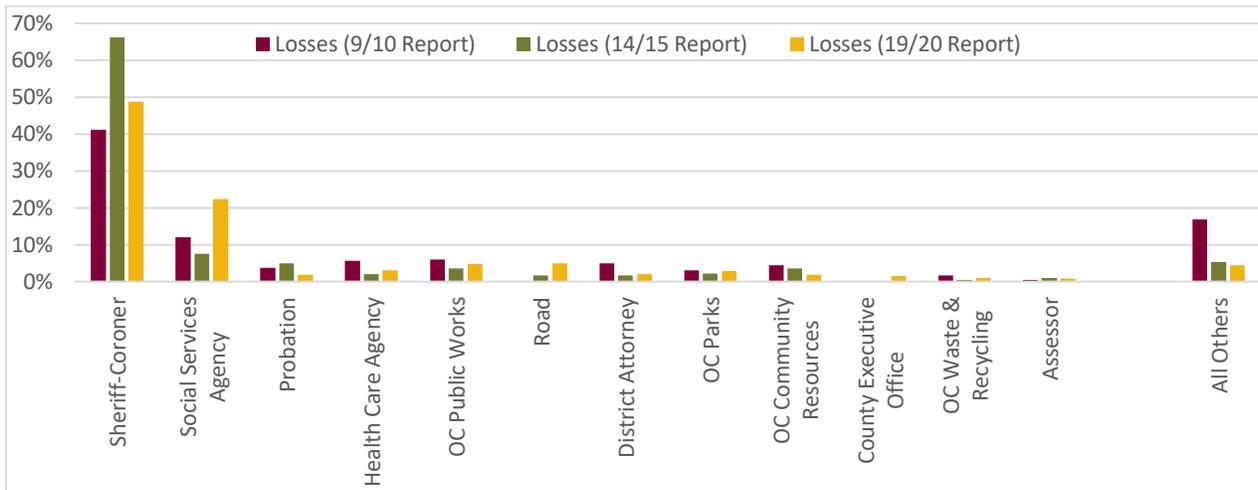


Figure 3. General Liability Reported Losses by Department and Time Period



The percentage of County loss and total contribution allocated to each department was compared, as seen in Table 2, to determine the impact the cost allocation methodology had on the frequency of departmental loss experiences and to stabilize overall annual funding. The use of a ten-year rolling loss history, including calculations based on 70% of losses and 30% of size, has minimized the steep curves for each department while accomplishing education goals and maintaining consistent costing and contribution for the program.

Also noted was a spike in loss exposures for the Sheriff-Coroner for the 14/15 data. This is consistent with other California agencies that experienced dramatic cost increases related to police exposure cases. California JPA’s in general experienced those increases including CSAC-EIA, California Joint Powers Insurance Authority and California Joint Powers Risk Management Authority. The latter two representing primarily non-county California public agencies.

Table 2. Comparison of Reported General Liability Loss and Contribution Percentages

	FY 09-10		FY 14-15		FY 19-20	
	Loss	Contribution	Loss	Contribution	Loss	Contribution
Sheriff-Coroner	41.1%	34.0%	66.2%	52.1%	48.7%	40.0%
Social Services Agency	12.0%	15.0%	7.5%	11.9%	22.4%	22.7%
Probation	3.7%	5.2%	5.0%	5.3%	1.8%	3.3%
Health Care Agency	5.6%	8.2%	2.0%	5.2%	3.0%	6.4%
OC Public Works	6.0%	4.9%	3.5%	2.8%	4.7%	3.8%
Road	0.1%	3.3%	1.7%	--	4.9%	3.7%
District Attorney	5.0%	4.7%	1.6%	2.5%	2.0%	2.9%
OC Parks	3.0%	2.6%	2.2%	2.0%	2.9%	2.5%
OC Community Resources	4.4%	3.7%	3.5%	3.1%	1.8%	1.7%
County Executive Office	0.0%	0.2%	0.0%	0.2%	1.6%	1.3%
OC Waste & Recycling	1.7%	1.6%	0.5%	0.8%	1.0%	1.1%
Assessor	0.5%	0.9%	1.0%	1.2%	0.8%	1.0%
All Others	16.8%	15.5%	5.3%	12.9%	4.5%	9.6%

Note: The larger of the two percentages is bolded within each year across the departments

WORKERS' COMPENSATION

The reported amount and percentage of overall County required contributions and losses related to Workers' Compensation was reviewed, with the contribution and losses by department summarized in Figures 4 and 5 below.

The review of required contributions indicated a needed increase in funding each subsequent studied time period, reflecting an increase in the overall operational size of county operations and an increase in losses. This is consistent with industry development of Workers' Compliance claims and Actuary comment in their report. The increase across the departments indicates that no specific department sustained overall catastrophic results which would have led to a sharp increase within that department that was not seen elsewhere. Meanwhile, the percentage of total County losses did not provide sufficient data to reveal a pattern on types of losses based on the allocation methodology. Provided reports included the 70% of loss totals data, which was then extrapolated to get the full loss percentage per department.

Figure 4. Workers' Compensation Required Contributions by Department and Time Period

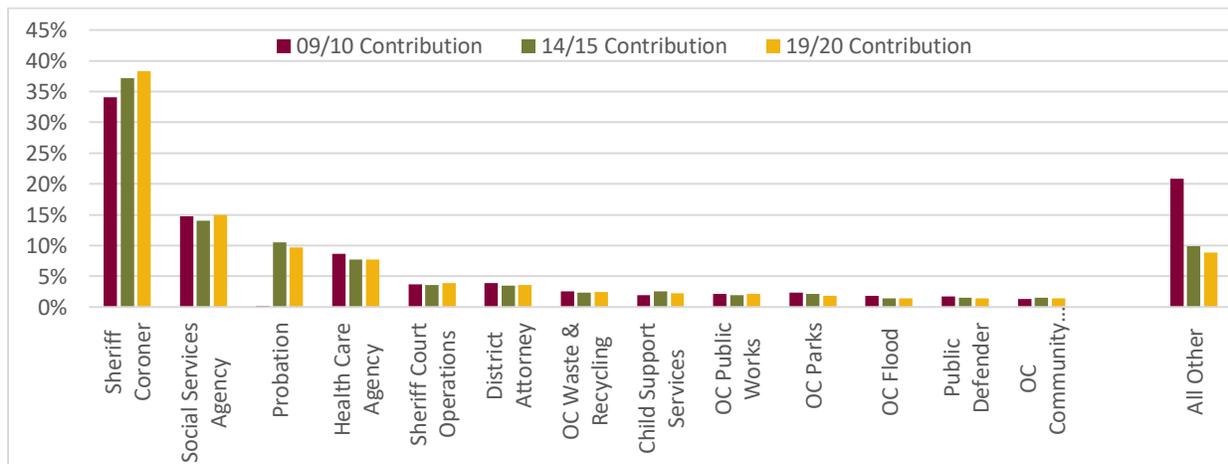
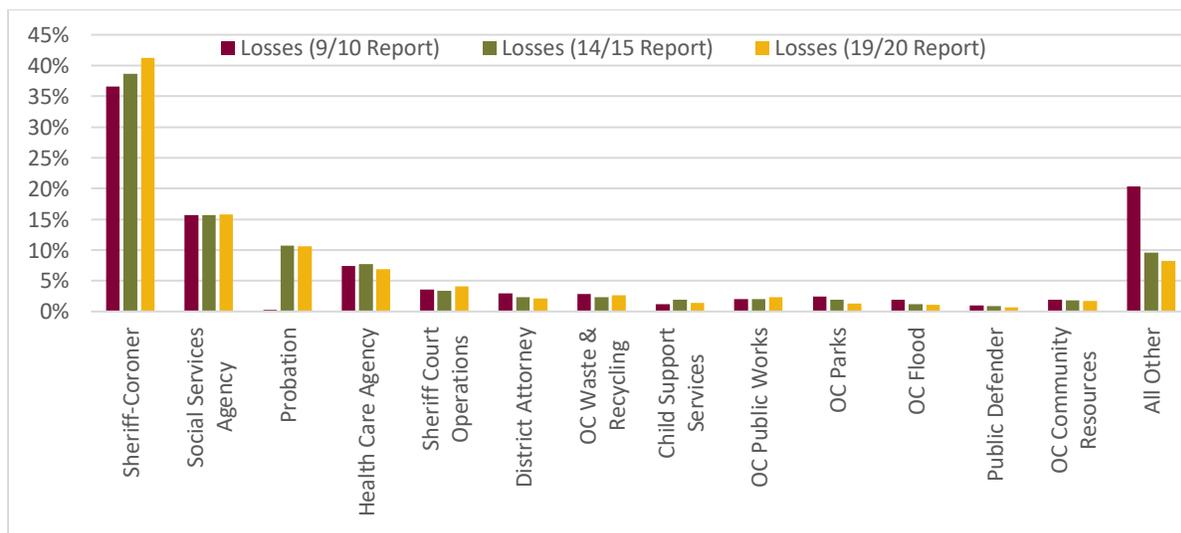


Figure 5. Workers' Compensation Reported Losses of Department and Time Period



The percentage of County loss and total contribution allocated to each department was compared, as seen in Table 3 below, to determine the impact the cost allocation methodology had on the frequency of departmental loss experiences.

Table 3. Comparison of Reported Workers' Compensation Loss and Contribution Percentages

	FY 09-10		FY 14-15		FY 19-20	
	Loss	Contribution	Loss	Contribution	Loss	Contribution
Sheriff-Coroner	36.6%	34.1%	38.6%	37.2%	41.2%	38.3%
Social Services Agency	15.7%	14.8%	15.7%	14.0%	15.7%	14.9%
Probation	0.3%	0.2%	10.8%	10.5%	10.6%	9.6%
Health Care Agency	7.4%	8.7%	7.7%	7.8%	6.9%	7.7%
Sheriff Court Operations	3.5%	3.7%	3.4%	3.6%	4.0%	3.9%
District Attorney	2.9%	3.9%	2.3%	3.5%	2.1%	3.6%
OC Waste & Recycling	2.9%	2.6%	2.3%	2.3%	2.6%	2.5%
Child Support Services	1.1%	1.9%	1.9%	2.5%	1.4%	2.2%
OC Public Works	2.1%	2.1%	2.0%	1.9%	2.3%	2.1%
OC Parks	2.4%	2.3%	1.9%	2.2%	1.3%	1.8%
OC Flood	1.9%	1.9%	1.2%	1.4%	1.1%	1.4%
Public Defender	1.0%	1.7%	0.8%	1.5%	0.7%	1.4%
OC Community Resources	1.9%	1.3%	1.8%	1.5%	1.7%	1.4%
All Other	20.4%	20.9%	9.6%	9.9%	8.3%	8.9%

Note: The larger of the two percentages is bolded within each year across the departments

Recommendation

After reviewing the historical data supplied by the County and review of all policies and procedures currently in place regarding cost allocation, the County program meets and or exceeds current industry standards and is compliant with the State of California requirements for County Agency loss allocation standards. The following recommendation supports continued use of an industry best practice already in place.

1. RM should continue using the current annual cost allocation methodology as it aligns with best practices to monitor the results and ensure the continued stability required by the County.

7. Adequacy of Policy Limitations

CPS HR reviewed County insurance policies to determine the adequacy of the policy limits in providing coverage to the documented internal loss claims.

Findings

The Orange County Schedule of Coverages, effective July 2019, was reviewed including the insurance policy period, deductible or self-insured retention (SIR) amount, coverage limit, coverage placement, and the premium charged for each listed line of coverage. The review included two property lines (property, JWA property), thirteen casualty lines (e.g., Active assailant, Sheriff helicopter, drone, workers' compensation, etc.), and twelve miscellaneous lines (e.g., In-Home Supportive Services Crime, Local Agency Formation Committee Special Property Insurance Program (SPIP), Notary Public Errors and Omissions Board, Volunteer accident, etc.).

Based on a review of policy premiums, deductibles, and coverage amounts, the policy limits appear to be adequate, with retentions at a level the County has determined to be appropriate. The appropriateness of the parameters and specific coverage terms of the various policies and excess policies was not assessed during this review.

Recommendations

1. The County should continue the current practice of reviewing policy levels to ensure adequate coverage with consideration to updated internal loss documentation as it aligns with industry best practices.
2. County brokers should continue the current practices of periodically reviewing available policies for purchase or through self-insurance to ensure the policy scope and coverage aligns with the most cost-effective option in a continually changing market. This periodic review, including a review of the private market, the California State Association of Counties – Excess Insurance Authority (CSAC-EIA), and potentially other JPA pools, reflects current use of industry best practices.

8. Loss Exposure Policy Effectiveness

CPS HR evaluated the current loss exposure and general liability claims processes and procedures from the perspective of both the departmental liaison and County RM staff through confidential online surveys. The departmental liaison and County RM surveys both assessed the awareness and utility of the provided information related to the sources of liability, the effectiveness of the litigation process communications, and an overall assessment of loss exposure and liability processes. In addition, the County RM survey assessed available training related to loss exposure and liability processes.

Findings are based on the 9 departmental liaison and 8 County RM staff who responded to the loss exposure/liability questions. The full results of the survey are available in Appendix D, with the following key findings.

Findings

Informational Reports:

County RM is expected to provide information regarding current claim trends loss information. In addition, RM is expected to develop training focused on minimizing liability risks and protecting the County from exposures to tort claims filed by the public. Four of eleven departmental liaisons had received general loss information, with five of the seven large departments being aware of the informational metric report produced for large departments. Of the five, four had reviewed and found the informational metric report useful, however RM staff stated these reports could be improved with the inclusion of historical benchmarks and the urgency of developing trends, financial impacts of litigation claims, and an explanation of liability sources with the corresponding County risk level.

Sources of Liability:

Both departmental and RM staff indicated departments were aware of the specific impact of Employment Action and Public Tort Claims, with departments also indicating awareness of the specific impact of Civil Rights claims. RM staff identified departmental awareness of exposures involving Auto

Liability claims². Based on interactions with departmental staff, 25% of RM staff indicated that Employment Action, Auto Liability, and Tort Claims were not applicable to their assigned departments while 37.5% indicated Civil Rights and Excessive Force were not applicable.

CPS HR recognizes that Civil Rights Claims and Excessive Force Claims would apply to the Sherriff Department operation and this conclusion is expected.

General Liability Information and Training:

Respondents from smaller departments strongly agreed that they have utilized training provided by County RM, received information on general liability claims, and have been provided with metrics that identified sources of exposures for their departments. They also recognize the value of the follow-up on actual claims experienced within their departments.

However, larger departments only slightly agreed that County RM provided information on exposures to Tort Claims and or provided any follow-up on claims. Respondents from larger departments were generally not aware of any training made available by RM for Tort related exposures. This aligns with RM feedback that indicated effective training opportunities were not available and data was not available to update the training to make it more effective. Meanwhile, RM staff did not agree or disagree on specific litigation information provided to departments and they generally were not aware of a perceived interest from the departments for additional training.

Liability Claims Processes:

Departmental liaisons were asked to identify the level of explanation provided on four components of the liability claims process, while County RM identified the level of explanation required from *No Explanation (1) to Well Explained/Detailed Explanation (4)*.

The average responses are provided below, with small departments indicating all components were well explained while the large departments indicated sufficient information on the process, goals, and outcomes was provided to allow them to complete the process, but only a basic level of explanation was provided on County produced reports.

County RM indicated they were required to provide a sufficient level of explanation on the actual litigation process, with slightly less explanation required on the goals and potential outcomes. However, staff indicated the departments needed less explanation on the County produced reports, which aligns with the large departments indicating only a basic level of explanation is provided.

Table 4. Average Explanation Required on Litigation Components

	Explanation Provided		Explanation Required
	Small	Large	County RM
Litigation Process	4.0	3.1	3.0
Goals of Litigation	4.0	3.0	2.8
Potential Outcomes of Litigation	4.0	3.0	2.8
Explanation of County RM produced reports	4.0	2.0	2.5

**Ratings provided a scale from Low (1) to High (4) amounts of explanation.*

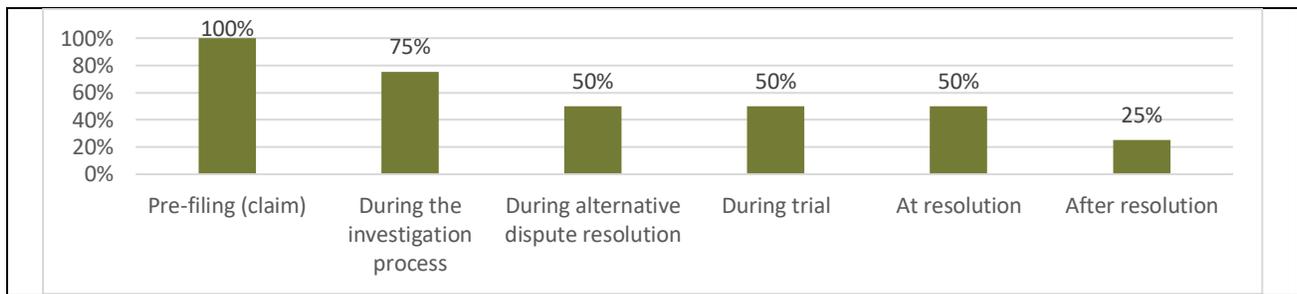
² The feedback survey assessed knowledge of “Service Liability” claims (elicited through the provision of services). However, this terminology was not utilized by Orange County, as reflected in the results of a general “unawareness” of this claim type; results for this type of claim were omitted.

In addition to the level of explanation provided, departmental staff also indicated that general liability responsibilities required an average of 48.5 hours a month including 7.3 hours on metrics/reporting, 17.6 hours working independently on claims, and 23.6 hours working with County RM staff.

Liability Process Communications:

County RM indicated that timely communication to the departments was the most helpful in preparing for the litigation process. Four department executives from large departments indicated that County RM provided them with sufficient information regarding litigated claims in their department, with the following table identifying when in the process information was received. Overall, fewer executives were informed as the process progressed. Two responding executives also indicated e-mail as the preferred communication method at each of the milestones.

Figure 6. Liability Process Communications Survey Results



General Feedback:

Overall, both the department and RM staff indicated updates on claim status, compiled litigation metric reports, and information from defense counsel or knowledge of legal changes are most beneficial. In terms of improvement, departmental liaison staff would like to see claim trends, actionable recommendations on policy to minimize risk, and additional training based on metrics/trending liability. Meanwhile, RM staff would like data that is actionable, better communication, and a better understanding of the litigation process to clarify that while the County’s goal is to defend the lawsuit, policy, and employees’ actions, the Departments’ tend to pursue settlement over the expense of a trial.

The final audit recommendation still in progress in 2014 identified a need to identify useful risk metrics to collect and analyze, develop a Liability claims information system to facilitate analysis and sharing of information, and to develop overall County liability risk analyses (Recommendation 8). As of the 2014 audit follow-up, RM had implemented a new system, the Risk Management Information System (RMIS) effective in July 2014, to assist in the collection, analysis, and reporting of risk information. As discussed in this section, RM has provided reports to the larger departments with sufficient data to analyze and report. These reports have been perceived as useful by those department staff who review them.

RM also produces an annual report providing a high-level review of the program to educate the Board of Supervisors and top county staff on the performance of the Risk Management Dept and the overall losses sustained by the departments. This report provides a general overview of the actions completed by RM, the overall exposures in workers’ compensation and liability, and the top ten causes of loss. This broad overview is very good for audiences that are looking for the big picture, however it may be too broad to help the departments focus in on actionable risk avoidance measures in their department.

Based on the results of this study, this recommendation has been fulfilled at a basic level with the tools in place to collect information and developed reporting templates to share the information. However, it is recommended that RM continue to improve their reporting templates to align with best practices including sharing information with all departments, providing industry wide specific context behind the available statistical reports to further enhance their utility, and ensuring liaisons understand the information being shared.

Recommendations

The following recommendations are based on survey responses, with the acknowledgement of the low response rates of 50% and 61% for departmental and County RM staff, respectively, which limits the generalizability of the results. Even with limited responses, the data produces a perceived disconnect between County RM and the internal customers/departments.

1. RM should work with the departments to identify the resources and information that would be useful to assist them in achieving a positive impact in reducing their losses.
2. Data in the Informational Metric Reports needs to be set in context within each department, including a section for overall industry trends, comparison to similar Orange County departments, or other county departments. Departmental liaison feedback identified a need for training to explain the impact of the provided data and how it could be utilized to improve their department specific loss reduction efforts.
3. Large program reports providing examples of specific risk exposures, in addition to the County Risk Management Annual Report providing the high-level broad analysis, should be available as references to smaller departments to assist in the development of preventative programs based on County trends where small departments do not have sufficient data for individualized reports.
4. RM should evaluate the current distribution of the informational metric reports and evaluate alternative sources of data and an expansion of the data provided. *It is noted that during the course of this project, the IT division was implementing department specific data dashboards. This is an appropriate course of action to provide an additional source of data and RM should finalize the dashboards and then assess the efficiency of them once departments have started utilizing them.*
5. RM should establish a training program to provide managers and executives with an understanding of current trends, historical summaries, and the financial impact to both departments and the County overall. This should be provided every two to three years, or when significant changes occur in liability trends.
6. RM should address the reported inconsistency in the level of department executive communication across the litigation process through the establishment of a standardized schedule of communications, proactively identifying when and what information will be provided, and to whom, during the litigation process to ensure clear expectations of shared information and consistently provided communication.

7. RM should develop a training program for those persons participating in the litigation process explaining the details and issues surrounding investigation, claim analysis, testimony requirements and the process for determining settlement posture versus awaiting a verdict.

9. Safety Training Effectiveness

CPS HR evaluated the effectiveness of the current safety training and safety administration processes from the perspective of both the departmental liaisons and County RM staff who work on Safety administration through confidential online surveys. The departmental liaison survey assessed the prominence of training, process of reporting and following up on unsafe conditions, the allocation of safety resources and level of involvement, and the effectiveness and preferred training methods of various training topics. The County RM survey assessed perceived prominence of training, the accountability to unsafe conditions, the allocation of safety resources, and the ability to develop new training.

Findings are based on the 35 departmental liaison and 8 County RM staff who responded to the safety training effectiveness questions. The full results of the survey are available in Appendix E, with the following key findings.

Findings

Training Availability:

Safety training was prioritized as 8.1 out of 10 by the departmental liaisons, hindered by the lack of clarity on safety standards and changes to approved trainings. In contrast, RM staff perceived the departmental priority to be lower at 4.7, hindered by unclear safety standards, insufficient time for training, and lack of management prioritization. In the last year, large departments reported receiving at least three trainings, however 2 of the 3 small departments indicated receiving none, including one who had hired an outside vendor for First Aid/CPR/AED but preferred to have RM conduct the training.

In general, departmental liaisons agreed that the departments invest time and money into safety training, with expectations by position clearly defined and the ability to attend required training programs. However, this does not align with the prior section where small departments had not received any training and the large departments were not sure if there was a system in place to obtain all the mandated training. In contrast, RM staff slightly disagreed that expectations by position were clearly defined, but slightly agreed that departments were able to sign up for mandated safety programs.

Work Environment Safety and Accountability:

Small and large departments both indicated there are clear procedures in place to report unsafe work conditions, however only the small departments clearly felt there was follow up to address the issue. County RM staff agreed with the small departments that there was follow up to address identified issues, including new safety training programs and the ability to reach outside the department to ensure resolution.

The primary means of holding supervisors accountable for safe working conditions in both large and small departments included documenting and correcting noted hazards and providing the correct tools and resources to staff. Additionally, small departments utilized regular safety training and holding staff accountable. County RM staff indicated supervisors are held accountable via regular training, the

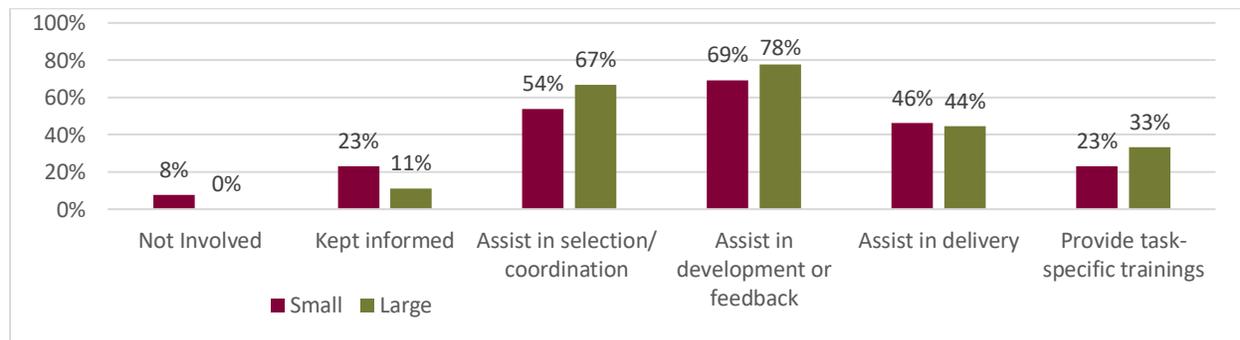
provision of correct tools and resources, and through root cause analysis to determine how the unsafe incident occurred.

Conversely, routine job safety analyses were the least cited accountability method by all groups, however RM staff are developing living job safety analyses to better educate employees to avoid injury and address new hazards.

Collaboration of Resources:

Departmental liaisons slightly agreed that there was a cooperative relationship between County RM and the departments, with large departments interacting slightly more with the CEO/Safety RM Specialists and small departments interacting most with County Safety Representatives, followed by the CEO/RM Safety Manager. The line supervisors and managers were mostly involved in the selection/coordination of training and in the development feedback of current trainings, with the percentage of respondents in each department size involved in each phase depicted below. Meanwhile, County RM was mostly involved in the selection/coordination and the delivery of trainings.

Figure 7. Collaboration of Resources Survey Results



County RM agreed that the provided internal, external, and online training resources were all useful to their departments, with average ratings of each resource aligning more closely with large departments. Large departments agreed resources were useful, with a slight preference to online resources whereas small departments very slightly disagreed that the resources were useful with a slight preference to internal trainers.

County RM indicated there was a cooperative working relationship with departments and sufficient tools, funding, and access to trainers to develop and deliver training, but only slightly agreed that they had the needed data to update or create the training. They slightly agreed that effective training based on safety concerns and best practices was provided and that OC departments actively participated to ensure understanding.

Training Oversight/Administrative Tracking:

Most departmental liaisons (63.6%) indicated a designated safety representative collaborated with County RM on non-routine questions and identifying safety requirements while the rest relied on County RM (36.4%) to provide oversight of safety training. County RM staff also indicated departmental safety representatives reached out for non-routine questions and identifying safety requirements, in addition to collaborative efforts in developing and presenting trainings. However, County RM also

observed that assigned designated safety representatives often lack authority over staff and lack knowledge of the background and training needs in the assigned area.

Training records were retained by departments and largely provided to County RM upon request via scanned participation lists, with only 54.5% indicating knowledge of the existence of an electronic tracking system. County RM agreed that records are provided upon request, either through the electronic tracking system, Eureka, via e-mailed participation lists, or through review of physical forms during annual audits.

It is within industry best practices to have a consistent or universal tracking system with clear expectations and ability to submit training records. This allows RM to review and evaluate training that is occurring and to follow-up with departments not meeting acceptable standards. An overall tracking system can be utilized in a decentralized system to ensure compliance, acknowledging that compliance requirements may vary between departments.

Specific Training Course Effectiveness:

Departmental liaisons rated 30 current training courses between somewhat effective and effective on average, including six courses with ratings slightly more than effective by small departments and six with ratings indicating they were less than somewhat effective by large departments. Across the 30 courses, an average of 32.1% of small departments indicated a course was not applicable to their department compared to an average of 19.7% of large departments indicated a course was not applicable. Departmental liaisons identified preferred training methodologies, with both large and small departments preferring internal trainers the most often, followed by online training, and then external trainers. The full list of evaluated courses with the average effectiveness rating and preferred training method is available in Appendix E along with the full raw responses to the open feedback summarized below.

Safety Trainings Open Feedback:

Departmental liaisons and County RM staff provided the following key ideas to make the trainings more effective overall.

- Create a guide identifying needed general training and classification specific training
- Implementation of knowledge check at the end of training and discussion/examples of how to apply once back on the job
- Real life experience/practice instead of just reading about it
- Consistent training for all departments with a centralized County wide guideline
- More class time options, reduce travel by bringing classes to department or online.
- The RM staff indicated a lack of senior leadership guidance and interest within the departments.

Safety Resources Open Feedback:

Departmental liaisons and County RM staff identified currently provided and needed key resources to ensure delivery of safety training. The following items were notated in the open-ended comments and are presented as a summary of the feedback.

The resources that are currently working well, based on raw open-ended comments, are:

- Embedded Safety and Training Officer within the Department to customize and track completed training for department staff.
- Some prefer in-house where staff are forced to focus, others prefer online which are more accessible and cost efficient.

The key needed resources based on raw open-ended comments are:

- Assign Safety Training Officers to departments to allow for customized and specific training, more frequent available training sessions, and an in-house resource rather than traveling to training in groups
- Assign Safety Training Officer(s) based on department size with larger departments potentially needing more than one.
- Consistent support and priority from all levels of management
- Better response time from RM, waiting for responses
- Availability of interactive training to engage participants, track progress
- Provision of quick reference tools, PDFs of learning tools
- Consistent training for all agencies
- Development of a catalog of trainings and available teachers/subject matter experts.

Recommendations

The following recommendations are based on survey responses, with the acknowledgement of the low response rates of 50% and 61% for departmental and County RM staff, respectively, which may impact generalizability of the results. Despite the low response rates, responses provided consistent feedback, resulting in the following recommendations. Acknowledging the heightened need for safety due to COVID-19 pandemic, it is noted that these recommendations are intended to be addressed after the pandemic has been eradicated and normal operations have resumed.

1. Departmental management and supervisory staff should build a defined “safety culture”, elevating the recognition of safety and importance to the County and enhancing the current perception of safety.
2. County RM should revisit and align delivery methods with preferred providers per course type, utilizing the survey data as a guide.
3. County RM should review the effectiveness ratings for each course, initially targeting those courses that were perceived as less than somewhat effective including courses on Intruder/Active Shooter Safety, Lock-out/Tag-out, Confined Space Entry, Job Safety Analysis, Welding Safety, and Portable Extinguisher Training.
4. Recommend the County Office of Risk Management evaluate options for and implement a County Wide electronic training record keeping system to allow RM to review and identify departments not meeting acceptable standards. A mandate by the Board of Supervisors to require all departments that are subject to County funding be required to comply with the reporting tracking system.

5. Develop a county-wide training schedule, posting it in a common area and following up with departments to ensure all are aware of the available trainings.
6. Follow up with each department on a quarterly basis to assess if there are any additional trainings needed to meet departmental requirements.
7. Incorporate cross-departmental trainings on shared concepts (e.g., Job Safety Analyses, Emergency Action Plans, public accidents) to allow better understanding of cross-departmental operations. This shared understanding of exposures increases perception and awareness, impacting other departments and can influence a pro-active culture committed to safety and risk reduction.
8. The alignment of key indicators, service delivery, and expectations between County RM and the serviced departments should be assessed every three years through customer satisfaction surveys to identify areas that are doing well and areas that could be improved.

Conclusion

There are many distinct and important strengths demonstrated by the County of Orange Risk Management staff. The entire team has shown its commitment to change, increased awareness for promoting safety, and improving operational effectiveness since the previous 2012 audit and corresponding 2014 follow-up, and throughout this process with CPS HR consultants. Additionally, the RM management and staff have been applauded by third party administrators as being responsive and knowledgeable.

An examination of the overall structure of Orange County identified several large departments with significant liability exposures that are directed and managed by elected officials. These Departments are not mandated to adopt and to adhere to overall County RM Policies and Procedures.

CPS HR has recognized the following areas of opportunity for progress including:

- County of Orange should develop a task force that explores, identifies, and develops a plan to heighten the visibility and compliance with all RM policies within those departments. Once that is completed it is anticipated that reductions to the overall cost of risk may be achieved.
- Develop a revision schedule for all policy areas with routine updates for compliance, as needed.
- Clearly outline a vision for RM goals, priorities and expectations, including considering autonomy for RM staff to work with TPAs on various projects as needed.
- Review financials for any outside vendor contracts and develop a process for checks/balances of reported values.
- Collaborate with HR to consider dedicated or shared support positions and transitioning some Staff Specialist and Program Manager tasks.
- Develop reports or training to provide all departments with historical and current loss claim trends, financial impact, and methods to avoid future losses on a regular basis to ensure applicable and actionable understanding of the data.

Organizational Findings and Recommendations

- Implement proactive measures to enhance services to the departments to reduce the need for reactive urgent response situations through consistent sharing of information throughout the claims process and standardized scheduled training and refreshers to ensure uniform knowledge.
- Establish and promote a "safety culture" to elevate the recognition of safety and importance to the County, further enhancing the current perception of safety.

Appendix A: List of Reviewed Policies and Procedures

Policy Name	Last Update	Status	Recommendation, if applicable
#101: Injury and Illness Protection	Rev. 5/1/13	Meets Standards w/recommendations	County Executives should review the responsibility allocated to Department heads; build in a safety as a measurable criterion for performance review to enhance safety visibility and buy in from top management.
#102: Bloodborne Pathogen	Rev. 10/17/11	Meets/Exceeds Standards	
#103: Confined Space Entry	Rev. 4/5/06	Meets Standards w/recommendations	Annual training required including documenting frequency per employee, with recommended annual review by CEO/RM to confirm compliance.
#104: Emergency Action Plan	Rev. 10/17/06	Meets Standards w/recommendations	Establish a comprehensive policy that adds Active Shooter, Wildland Fires, Floods, and Workplace Violence.
#105: Fire Prevention	Rev. 4/3/06	Meets/Exceeds Standards	
#106: Hazard Communication	Rev. 3/26/09	Meets Standards w/recommendations	Change Material Safety Data Sheets (MSDS) to Safety Data Sheets (SDS); Update policy to confirm compliance with current standards.
#107: Hearing Conservation and Noise Control	Rev. 4/4/02	Meets Standards w/recommendations	Update policy to bring current, re-issue policy to strengthen visibility and enhance full compliance.
#108: Lock out Tag Out	Rev. 3/26/09	Meets Standards w/recommendations	Clarify policy to identify how and who within RM reviews compliance.
#109: Respiratory protection program	Rev. 5/05/14	Meets Standards w/recommendations	Change terminology of Forest Fires to Wildland Fires
#110: Chemical Hygiene Plan	Rev. 3/1/02	Meets/Exceeds Standards	
#201: Establishing Loss Prevention and Safety Policy	Eff. 5/22/1962	Meets Standards w/recommendations	Update policy to bring current, re-issue policy to strengthen visibility and enhance full compliance.
#202: Occupational Safety Program (Expanded)	Eff. 4/23/1973	Meets/Exceeds Standards	
#301: Safety Responsibilities – Agency/Dept. Heads	Rev. 5/1/13	Meets Standards w/recommendations	County should evaluate Senior Management review of the authority. Improving workplace should be include within Department Head evaluation process.
#302: Safety Responsibilities – Supervisors/Managers	Rev. 5/1/13	Meets/Exceeds Standards	
#303: Safety Responsibilities – All Employees	Rev. 5/1/13	Meets Standards w/recommendations	Routinely re-issue/distribute to remind employees of current policy, importance of reporting hazards.
#304: Responsibilities of Agency/Dept. based Safety Training Officers and Dept. Safety Reps.	Rev. 3/1/12	Meets/Exceeds Standards	

Appendix A: List of Reviewed Policies and Procedures

Policy Name	Last Update	Status	Recommendation, if applicable
#305: County Safety Office Responsibilities	Rev. 3/1/12	Meets Standards w/recommendations	Review the business practice, clarify whether Safety Professionals or Department Heads are responsible for confirming other policies comply with existing safety policy to eliminate perceived duplicative role and complication in ensuring compliance.
#306: Contractor Safety Responsibilities	Rev. 6/1/14	Meets Standards w/recommendations	Add a requirement for contractors to provide evidence of an approved or adopted IIPP that complies with the County program when working on County property.
#307: Safety Responsibilities: Safety Committees	Rev. 1/29/09	Meets/Exceeds Standards	
#401: Accident/Incident Investigations	Rev. 2/1/14	Meets Standards w/recommendations	Implement a random review of records to enhance supervisor training on accident investigation.
#402: Hazard Recognition and Control Safety Inspection Procedures	Rev. 7/21/05	Meets/Exceeds Standards w/Recommendations RM conducted a gap analysis across all departments, identifying common gaps in the safety process. Identified need to examine a central record keeping system to implement in all departments.	Adopt a requirement requiring Safety inspections to be documented with program compliance being included in the evaluation of Department funding. Evaluate options to implement County-wide system for documenting all conducted safety related trainings, with County RM reviewing compliance and issuing annual compliance metric reports.
#403: Fire Extinguisher Inspection	Rev. 1/29/09	Meets/Exceeds Standards	
#404: Hazard Recognition and Loss Control Reporting Unsafe Conditions and Acts	Rev. 1/29/09	Meets/Exceeds Standards	
#405: Job Safety Analysis	Rev. 3/7/07	Meets Standards w/recommendations	Develop a county-wide joint effort between Departments, Human Resources and Safety staff for implementing JSAs which identify specific tasks performed by position, utilizing the information to identify safety training requirement metrics based upon tasks performed.
#406: Lobby and Corridor Use Policy	Rev. 1/29/09	Meets/Exceeds Standards	
#407: General Safety Non-Structural Seismic Hazard Reduction	Rev. 7/1/08	Meets/Exceeds Standards	

Appendix A: List of Reviewed Policies and Procedures

Policy Name	Last Update	Status	Recommendation, if applicable
#501: Safety Training and New Hire Orientation	Rev. 1/29/09	Meets/Exceeds Standards HR, RM and Departments work on developing a training core for new hires.	
#502: Safety Training – Summary of Cal OSHA Mandated Training	Rev. 1/29/09	Meets/Exceeds Standards	
#601: Safety Communication	Rev. 1/28/09	Meets Standards w/recommendations	Deploy a county-wide broadcast to all employees to educate them on the county-wide safety hotline to report unsafe conditions.
#701: Personal Protective Equipment and Clothing	Rev. 1/28/09	Meets/Exceeds Standards	
#702: Welding Procedures IIP Program	Rev. 1/28/09	Meets/Exceeds Standards	
#703: General Safety Rules, General Safe Work Procedures	Rev. 3/26/09	Meets/Exceeds Standards w Recommendations	Update the format of all safety policies for online accessibility/searchability by employees, department supervisors, and management.
#704: Portable Ladder Safety	Rev. 4/2/07	Meets/Exceeds Standards	
# 801: First Aid Kits	Rev. 1/28/09	Meets/Exceeds Standards	
#802: Aerosol Transmissible Diseases (ATD) Policy	Rev. 5/1/12	Meets Standards w/recommendations A COVID-19 policy would be included within the ATD policy be each Department. Overall responsibility for this policy resides with Health and Human Services.	Shorten policy, simplifying the language to be understood by those without a Health care background.
#803: Ergonomics Program	Rev. 5/1/13	Meets/Exceeds Standards	
#804: Outdoor Heat Illness Prevention	Rev. 5/1/15	Meets/Exceeds Standards	
#901: Forklift, Industrial Truck Operating Rules		Meets Standards w/recommendations	Create a formal County established policy aligning with Cal OSHA standards currently utilized to align with County established protocols.
#902: Small Cart Safety Program	Rev. 1/27/09	Meets/Exceeds Standards	
#1001: Reporting Work Related Fatalities and Serious Injuries	Rev. 2/5/09	Meets/Exceeds Standards	
#1002: Cal OSHA Inspections or Correspondence	Rev. 9/10/10	Meets/Exceeds Standards	

Appendix A: List of Reviewed Policies and Procedures

Policy Name	Last Update	Status	Recommendation, if applicable
#1003: Review of Motor Vehicle Collisions	Rev. 7/25/08	Meets/Exceeds Standards	
#1004: Death Notification Procedure	Rev. 3/26/09	Meets/Exceeds Standards	
#1005: Motor Vehicle Collision Reporting Procedure	Rev 1/30/09	Meets/Exceeds Standards	
Office of Risk Management Operating Policies and Procedures			
Funding Policy – Workers' Compensation & Property & Casualty ISF		Meets/Exceeds Standards	
W.C. Claims Audit Process		Meets/Exceeds Standards	
Claim settlement authority levels	Eff. 7/27/2010	Meets/Exceeds Standards	
Claim settlement policy	Eff. 5/8/19	Meets/Exceeds Standards	
Risk Management Policy ASR	Eff. 3/14/2017	Meets/Exceeds Standards	
Risk Transfer/Contract Management/Insurance Requirements	Rev. 2019	Meets Standards w/recommendations	County should evaluate increasing insurance requirement limits to \$2million for General Liability.
TPA Performance Incentives		Meets/Exceeds Standards	
Public Accident Investigation		Meets/Exceeds Standards	
Special Event Instructions		Meets/Exceeds Standards	
Vehicle Operations program		Meets/Exceeds Standards	
Workers' Compensation Policies and Procedure Manual.	<u>Rev: 8/4/08</u>	Meets/Exceeds Standards	
Occupational Injury and Illness Reporting Packet	Rev. 8/14/18	Meets/Exceeds Standards	
WC and Liability Funding Policy and ASR Attachments	Eff. 5/1/12	Meets/Exceeds Standards	
Liability Rates Procedure 2019	Eff. 2019	Meets/Exceeds Standards	
Commercial Driver Program (DOT)/DMV Pull Program		Program resides in the Public Works Department and was not subject to review in this report.	

Appendix B: Workers' Compensation Feedback Survey by Department size, Claim Frequency

Summary

The County of Orange Risk Management Office requested feedback on current Workers' Compensation procedures and operations from departmental liaisons/stakeholders. Liaisons were e-mailed a survey link on 2/13/2020 to provide confidential feedback by 3/6/2020. A total of 16 of the 29 invited departments participated³. The demographic information is summarized below demonstrating representation from different department sizes and volumes of Workers' Compensation activity.

Overall, 33.3% had fewer than 45 staff while 66.7% had more than 100 staff. The number of claims per month was varied with 53.4% of respondents having five or less claims per month, including all agencies with less than 150 employees. There was more variance in agencies with over 150 staff ranging from 13.3% of respondents having 5 claims or less, 26.7% have between 6 and 15 claims per month, and 20% have more than 21 claims per month.

		Number of Workers' Compensation claims per month							TOTAL
		None	1 to 5	6 to 10	11 to 15	16 to 20	21 to 25	More than 25	
Number of Employees	Less than 15	1	2	0	0	0	0	0	3 (20.0%)
	15 to 29	0	0	0	0	0	0	0	0 (0.0%)
	30 to 44	0	2	0	0	0	0	0	2 (13.3%)
	45 to 59	0	0	0	0	0	0	0	0 (0.0%)
	60 to 74	0	0	0	0	0	0	0	0 (0.0%)
	75 to 99	0	0	0	0	0	0	0	0 (0.0%)
	100 to 149	0	1	0	0	0	0	0	1 (6.7%)
	150+	0	2	2	2	0	1	2	9 (60.0%)
TOTAL	1 (6.7%)	7 (46.7%)	2 (13.3%)	2 (13.3%)	0 (0.0%)	1 (6.7%)	2 (13.3%)	15 (100%)	

Note: Responding departments included Health Care Agency, Human Resource Services, OC Community Resources, OC Public Works, OC Waste and Recycling, Public Defender, and Sheriff-Coroner.

In addition to assessing the department size and number of claims, the survey asked respondents to identify role and tenure. Of the 15 respondents, 56.3% were line staff/non-supervisory, 18.8% were supervisory, and 25.0% were mid-level managers. The tenure in the current position, department, and county are identified below with 50% being in their current position for 1 to 5 years, 56.3% had being in their current department for 1 to 5 years, and 56.3% had been with the County for over 15 years.

	1 year or less	At least 1 year, up to 5 years	At least 5 years, up to 10 years	At least 10 years, up to 15 years	More than 15 years
Time in current position	1 (6.7%)	7 (46.7%)	5 (33.3%)	1 (6.7%)	1 (6.7%)
Time in current department	1 (6.7%)	8 (53.3%)	1 (6.7%)	2 (13.3%)	3 (20.0%)
Time in Orange County	0 (0.0%)	2 (13.3%)	1 (6.7%)	3 (20.0%)	9 (60.0%)
Time Supervising or higher	6 (40.0%)	3 (20.0%)	3 (20.0%)	1 (6.7%)	2 (13.3%)

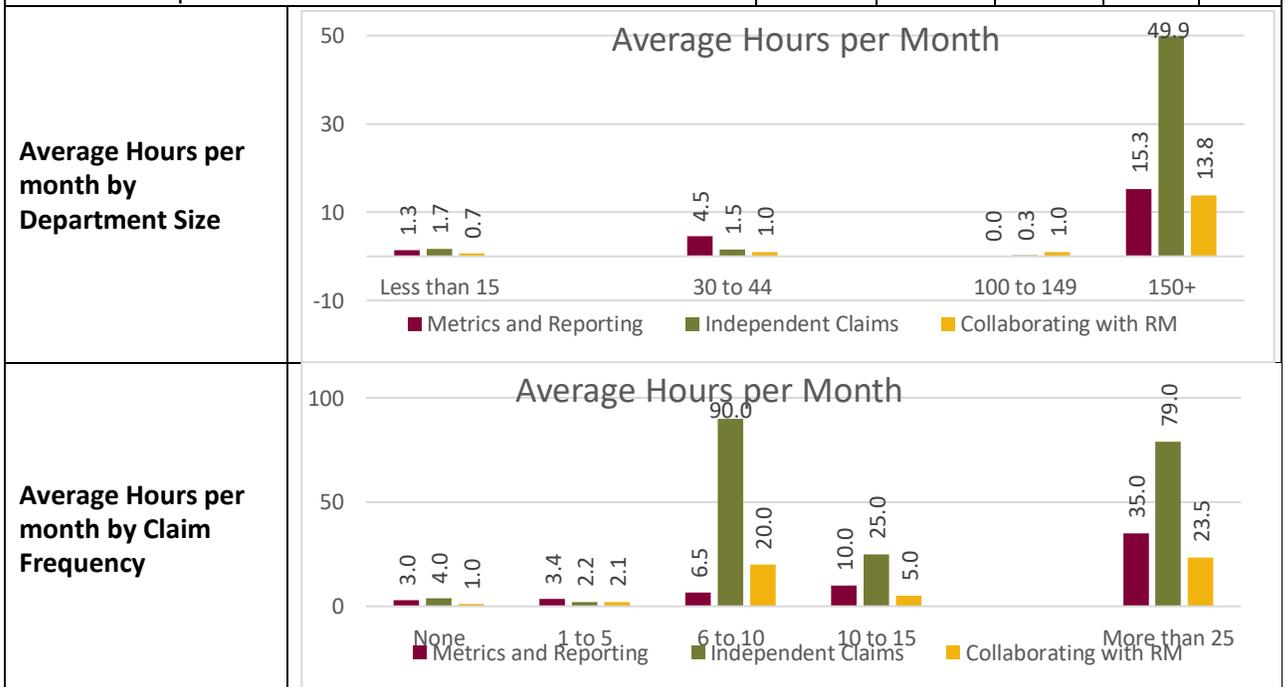
³ One response was removed during data clean-up due to responses indicating misunderstanding of the questions.

1. Time Requirements:

The average hours per month spent on work related Workers' Compensation was assessed to determine the impact on departmental staff workloads.

- Overall, departments spend an average of 9.2 hours on metrics and reporting, 29.1 hours independently working on Workers' Compensation claims, and 7.3 hours a month collaborating with County RM staff.
- Department size did not dictate the hours spent on Workers' Compensation activities with the most time spent by the largest departments and the least time spent by the departments with 100 to 149 employees. While departments with less than 150, had a relatively consistent number of hours spent on each activity, departments with more than 150 staff spent significantly more hours working independently on claims, aligning with the increased number of claims.
- Number of claims per month did not have a direct relationship with the hours spent on Workers' Compensation activities. Departments with 6 to 10 claims per month spent the most independent time on claims, followed by those with more than 25 claims. Departments with fewer than 5 claims per month spent minimal time on Workers' Compensation activities.

Overall	Minimum	Maximum	Median	Mean	Std. Dev.
Hours per month gathering and summarizing metrics, creating reports related to Workers' Compensation activities	0	60	4	9.2	15.7
Hours spent per month working independently on Workers' Compensation Claims	0	160	6	29.1	54.4
Hours spent per month working with staff from RM on Workers' Compensation Claims	0	40	1	7.3	11.8



2. Workers' Compensation Practices and Procedures:

The availability of knowledge and processes from the RM Office to the departments was assessed through a series of six statements rated on a five-point scale from Strongly Disagree (1) to Strongly Agree (5).

- Overall, department staff agreed that RM was available as subject matter experts and were between neutral and agreeing that RM provided clear processes, useful methods, and the knowledge of potential sources of fraud.
- Respondents did not agree or disagree that RM provided regular training and strongly agreed that a refresher would be beneficial to the staff conducting Workers' Compensation work in the departments.



The ratings on the six statements were assessed by staff size and frequency of claims, with the average rating on each statement presented in the following tables. Average ratings that indicated agreement to strong agreement (3.5 to 5) are shaded green demonstrating that the notated information has been provided sufficiently; neutral ratings that indicated neither agreeing or disagreeing (2.51 to 3.49) are shaded in yellow demonstrating a lack of clarity on the availability of the information, and average ratings that demonstrated a need for additional information (1.0 to 2.5) are shaded in orange. It is important to note that high ratings on the last statement indicate a desire for a refresher course, or a desire for more information, so ratings are shaded inversely.

Ratings by Department size:

A review of statement ratings by staff size indicated the departments agree that the information to conduct Workers' Compensation activities is provided by the RM Office, with the following areas for potential improvement.

- Departments with less than 15 staff are less clear on Workers' Compensation claim processes, those with over 150 staff are less clear on potential sources of fraud, and those with over 100 staff are less clear on the available useful methods to manage risks to minimize the number of claims.

- Departments with 30 to 149 staff agreed that training was offered on a regular basis, but those with less than 15 or more than 150 were less aware of offered trainings. Meanwhile, none of the departments disagreed that a refresher course would be beneficial to staff.

	Less than 15 staff	30 to 44 staff	100 to 149 staff	150 + staff
We have clear processes from OC Risk Management for processing Workers' Compensation claims	3.0	4.5	5.0	3.9
County Workers' Compensation guidelines provide useful methods to proactively manage risks to minimize the number of required Workers' Compensation claims	3.7	4.5	3.0	3.3
County Workers' Compensation guidelines outline potential sources of fraud in Workers' Compensation claims and how to guard against them	3.7	4.0	4.0	3.3
OC Risk Management staff are available as subject matter experts to provide guidance and answer questions on Workers' Compensation claims	3.7	4.5	5.0	4.0
OC Risk Management offers training on Workers' Compensation processes on a regular basis	2.7	4.0	4.0	3.1
A training course/refresher would be beneficial to staff processing Workers' Compensation claims*	3.7	4.5	3.0	4.4

*Reverse coded – higher ratings indicate a need for information.

Note – there were no respondents from agencies with 16-29, 45-99 staff.

Ratings by Claim Frequency:

A review of statement ratings by claim frequency indicated overall availability of information to conduct Workers' Compensation activities is provided by the RM Office, with the following areas for potential improvement.

- Departments who process 6 to 10 claims a month were more likely to disagree on the availability of clear processes, knowledge of potential sources of fraud, knowledge of methods to minimize claims, and availability of RM Office staff as subject matter experts.
Note – this is based on only two responding agencies.
- Departments with less than 20 claims a month did not agree or disagree that the RM Office provided regular training opportunities with the exception of those who process 6 to 10 claims which notably disagreed that these opportunities were available.
- With the exception of those who do not file any claims, all responding departments agreed to strongly agreed that a refresher course would be beneficial to staff conducting Workers' Compensation activities.

	None	1 to 5 claims	6 to 10 claims	10 to 15 claims	20 to 25 claims	More than 25 claims
We have clear processes from OC Risk Management for processing Workers' Compensation claims	4.0	4.1	2.5	4.0	4.0	4.0
County Workers' Compensation guidelines provide useful methods to proactively manage risks to minimize the number of required Workers' Compensation claims	4.0	3.9	2.0	4.0	4.0	3.0
County Workers' Compensation guidelines outline potential sources of fraud in Workers' Compensation claims and how to guard against them	4.0	3.7	2.0	4.0	4.0	3.5
OC Risk Management staff are available as subject matter experts to provide guidance and answer questions on Workers' Compensation claims	4.0	4.4	2.5	4.0	4.0	5.0
OC Risk Management offers training on Workers' Compensation processes on a regular basis	3.0	3.4	1.5	2.5	4.0	4.5
A training course/refresher would be beneficial to staff processing Workers' Compensation claims*	3.0	4.0	4.5	4.5	4.0	5.0

*Reverse coded – higher ratings indicate a need for information

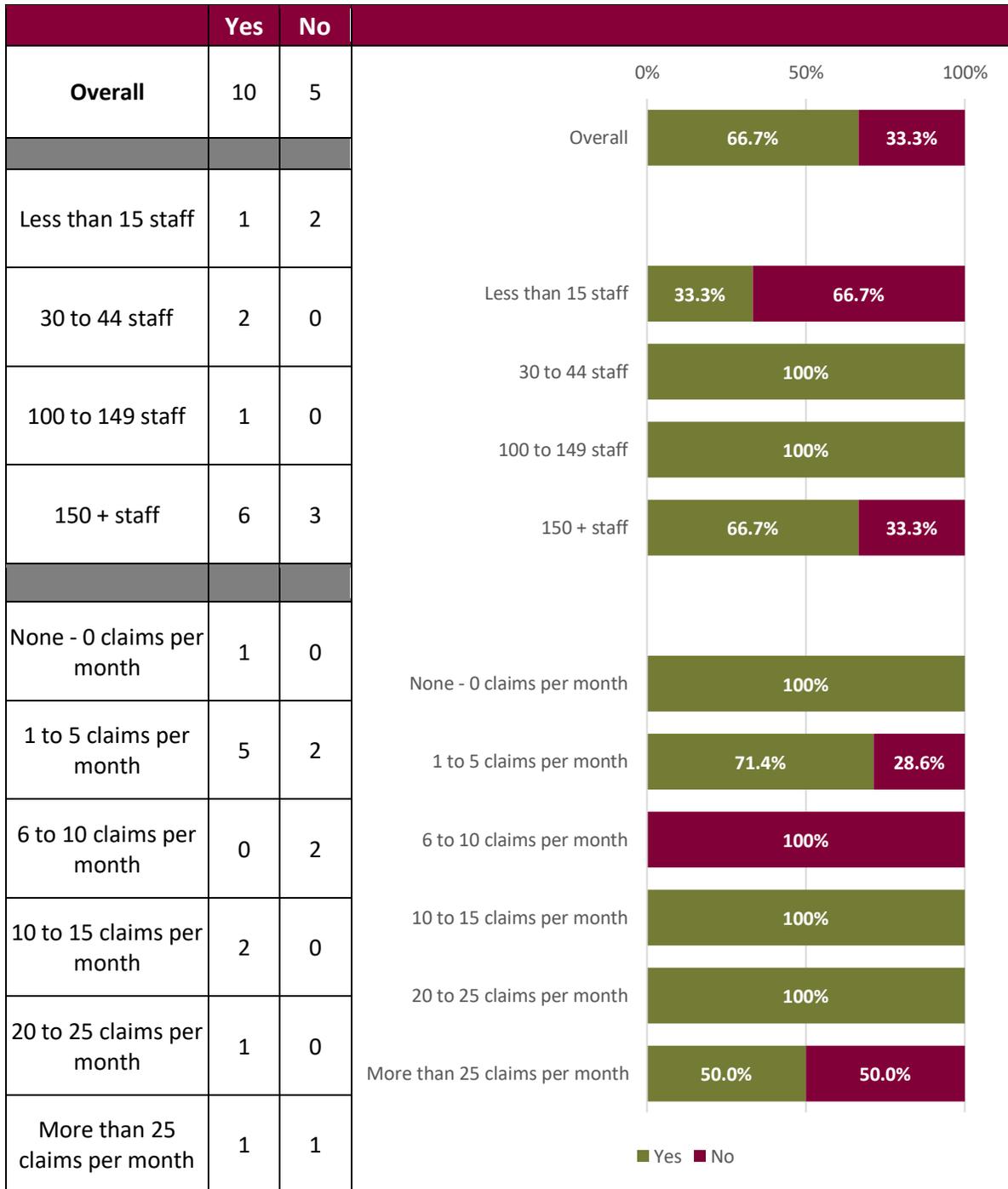
Workers' Compensation Process Effectiveness

Participants were asked if the current processes were effective in managing the Workers' Compensation claims, and to explain what was working well versus not being very effective. Overall, 10 of the 15 respondents (66.7%) indicated that the current processes were effective. When examining it by department staff size, 100% of responding departments with 30 to 44 staff and 100 to 149 staff agreed that processes were effective, however a third of the departments with less than 15 staff and half of the departments with more than 150 staff indicated current processes were not effective.

Based on number of claims per month, 100% of responding departments with 10 to 25 claims per month indicated the processes were effective, however 28.6% of respondents in departments with 1 to 5 claims and half of the departments with over 25 claims per month indicated the processes were not effective. Aligning with the assessment of available information, 100% of responding departments with 6 to 10 claims per month indicated the processes were not effective.

The table on the next page summarizes the number and percentage of responding agencies indicating if the current processes were effective or not effective for processing Workers' compensation claims.

Appendix B: Workers' Compensation Feedback Survey



Open ended feedback:

Respondents were asked to identify what was effective or not effective in current Workers' compensation claim processes. The raw responses are presented in the tables below, with only identifying information redacted.

The overall themes for things that are working well were:

- County Workers' Compensation staff responses are helpful and timely
- Ease of communication via e-mail instead of Pony mail
- Wage Statement worksheet/template make things easier

The overall themes for things that could use improvement were:

- More training, including payroll codes
- Countywide guideline is needed
- Better communication on what to expect, what is pending, explanation of decisions

<i>What is working well in the current Workers' Compensation processes?</i>
The staff in OC Risk Management are always very helpful and efficient in supplying information.
Previous communication with the Workers' Comp staff used to be via pony mail. Now, everything is communicated via emails which are more time efficient and more accurate, since sometimes paperwork could be lost in the pony mail. Also, Central Payroll provided an excellent working spreadsheet to help complete the wage statements in a faster and more efficient way, which we submit to the Workers' Comp staff.
The good thing about my department is that we do not have that many claims. But at my prior Agency, we had many claims a month and to get information from one place to another was very difficult.
Forms and reporting process is easy to follow.
Emailing our department the workers' comp form instead of pony mail.
WAGE STATEMENT WORKSHEET
Risk Management staff communications
The Workers' Comp staff responds to our questions and concerns right away. I currently do not have any ideas for improvement at this time.

<i>What areas could use improvement in the current Workers' Compensation processes?</i>
A Countywide guideline with the process of Workers' Compensation in the County is needed.
Understanding the decision-making process from (name omitted) and having better communication and professionalism would be a step in the right direction.
More training, staff handling WC claims should be able to know the basic, such as what code to use on the timesheet if someone from payroll is not available, etc.
Notification to department as well as (department name) payroll on WC updates, i.e. restoration of balances. (department name) payroll is very short staff right now and we are seeing delays with the (department name) Payroll processing transactions. It would be good to know what to expect and what is pending to be processed.
More training on the staff
Training
In my case, Doctor approve to have Physical Therapy treatment but OC WP did not agreed. - When I ask where is my approval? worker did not give strait answer, I have to know from the Doctor.

Appendix C: Cost Allocation Summary Data

The reported amount and percentage of overall County required contributions and losses by department are summarized in the following tables. The first two tables show the General Liability contributions and losses while the second two tables show the Workers' Compensation contributions and losses. The percentages are shaded according to the relationship of the contribution within each department with the year the department had the lowest percentage of overall County contribution in green, followed by yellow, and then orange for the year with the highest percentage.

General Liability Required Contributions by Department and Time Period

	FY 09-10		FY 14-15		FY 19-20	
	Contribution	% of County	Contribution	% of County	Contribution	% of County
Sheriff-Coroner	\$3,713,880	34.0%	\$11,398,875	52.1%	\$8,321,564	40.0%
Social Services Agency	\$1,639,727	15.0%	\$2,605,285	11.9%	\$4,734,261	22.7%
Probation	\$563,910	5.2%	\$1,170,219	5.3%	\$680,131	3.3%
Health Care Agency	\$896,822	8.2%	\$1,137,260	5.2%	\$1,332,883	6.4%
OC Public Works	\$535,426	4.9%	\$614,550	2.8%	\$786,083	3.8%
Road	\$364,967	3.3%	-	-	\$763,092	3.7%
District Attorney	\$516,444	4.7%	\$540,668	2.5%	\$602,310	2.9%
OC Parks	\$283,944	2.6%	\$447,300	2.0%	\$530,664	2.5%
OC Community Resources	\$406,701	3.7%	\$681,608	3.1%	\$345,286	1.7%
County Executive Office	\$20,888	0.2%	\$39,726	0.2%	\$265,467	1.3%
OC Waste & Recycling	\$179,717	1.6%	\$165,182	0.8%	\$230,259	1.1%
Assessor	\$98,305	0.9%	\$272,998	1.2%	\$218,010	1.0%
All Others	\$1,693,724	15.5%	\$2,824,525	12.9%	\$2,004,856	9.6%
TOTAL:	\$10,914,456		\$21,898,196		\$20,814,868	

General Liability Reported Losses by Department and Time Period

	FY 09-10 Report (Losses 7/1/98 to 6/30/08)		FY 14-15 Report (Losses 7/1/01 to 6/30/11)		FY 19-20 Report (Losses 7/1/08 to 6/30/18)	
	Loss	% of County	Loss	% of County	Loss	% of County
Sheriff-Coroner	\$21,375,639	41.1%	\$52,247,797	66.2%	\$43,784,777	48.7%
Social Services Agency	\$6,226,097	12.0%	\$5,938,546	7.5%	\$20,111,481	22.4%
Probation	\$1,921,872	3.7%	\$3,943,891	5.0%	\$1,646,449	1.8%
Health Care Agency	\$2,930,373	5.6%	\$1,544,891	2.0%	\$2,674,681	3.0%
OC Public Works	\$3,129,568	6.0%	\$2,757,678	3.5%	\$4,247,250	4.7%
Road	\$35,467	0.1%	\$1,350,016	1.7%	\$4,391,367	4.9%
District Attorney	\$2,574,854	5.0%	\$1,299,335	1.6%	\$1,819,855	2.0%
OC Parks	\$1,550,910	3.0%	\$1,723,741	2.2%	\$2,605,218	2.9%
OC Community Resources	\$2,294,565	4.4%	\$2,756,653	3.5%	\$1,606,499	1.8%
County Executive Office	\$24,398	0.0%	\$31,875	0.0%	\$1,397,620	1.6%
OC Waste & Recycling	\$889,491	1.7%	\$392,405	0.5%	\$880,722	1.0%
Assessor	\$257,044	0.5%	\$768,112	1.0%	\$725,923	0.8%
All Others	\$8,752,404	16.8%	\$4,216,865	5.3%	\$4,024,585	4.5%
Total (using 10-yr. loss histories)	\$51,962,681		\$78,971,804		\$89,916,428	

Workers' Compensation Required Contributions by Department and Time Period

	FY 09-10		FY 14-15		FY 19-20	
	Contribution	% of County	Contribution	% of County	Contribution	% of County
Sheriff-Coroner	\$6,822,210	34.1%	\$14,988,656	37.2%	\$23,215,225	38.3%
Social Services Agency	\$2,950,696	14.8%	\$5,648,871	14.0%	\$9,048,976	14.9%
Probation	\$43,132	0.2%	\$4,232,575	10.5%	\$5,842,940	9.6%
Health Care Agency	\$1,731,330	8.7%	\$3,123,038	7.8%	\$4,692,423	7.7%
Sheriff Court Operations	\$736,374	3.7%	\$1,445,707	3.6%	\$2,366,471	3.9%
District Attorney	\$779,762	3.9%	\$1,402,212	3.5%	\$2,154,912	3.6%
OC Waste & Recycling	\$517,686	2.6%	\$943,015	2.3%	\$1,511,869	2.5%
Child Support Services	\$380,670	1.9%	\$1,019,316	2.5%	\$1,357,593	2.2%
OC Public Works	\$423,074	2.1%	\$781,467	1.9%	\$1,301,625	2.2%
OC Parks	\$463,768	2.3%	\$878,207	2.2%	\$1,096,398	1.8%
OC Flood	\$374,676	1.9%	\$578,751	1.4%	\$877,381	1.4%
Public Defender	\$334,834	1.7%	\$623,112	1.5%	\$874,328	1.4%
OC Community Resources	\$266,812	1.3%	\$618,884	1.5%	\$860,751	1.4%
All Other	\$4,174,976	20.9%	\$3,982,437	9.9%	\$5,382,933	8.9%
TOTAL:	\$20,000,000		\$40,266,248		\$60,583,825	

Workers' Compensation Reported Losses by Department and Time Period

	FY 09-10 Report (Losses based on 7-year history)		FY 14-15 Report (Losses based on 7-year history)		FY 19-20 Report (Losses based on 7-year history)	
	Loss	% of County	Loss	% of County	Loss	% of County
Sheriff-Coroner	\$60,955,594	36.6%	\$66,450,000	38.6%	\$101,293,068	41.2%
Social Services Agency	\$26,162,939	15.7%	\$26,957,718	15.7%	\$38,692,245	15.7%
Probation	\$17,545,610	10.5%	\$18,519,625	10.8%	\$26,172,916	10.6%
Health Care Agency	\$12,397,084	7.4%	\$13,246,785	7.7%	\$17,013,120	6.9%
Sheriff Court Operations	\$5,887,511	3.5%	\$5,852,767	3.4%	\$9,923,337	4.0%
District Attorney	\$4,883,013	2.9%	\$4,035,056	2.3%	\$5,265,439	2.1%
OC Waste & Recycling	\$4,782,363	2.9%	\$4,041,937	2.3%	\$6,380,043	2.6%
Child Support Services	\$1,913,845	1.1%	\$3,234,582	1.9%	\$3,379,187	1.4%
OC Public Works	\$3,434,590	2.1%	\$3,405,412	2.0%	\$5,603,972	2.3%
OC Parks	\$4,002,994	2.4%	\$3,339,179	1.9%	\$3,286,078	1.3%
OC Flood	\$3,123,475	1.9%	\$1,984,067	1.2%	\$2,622,033	1.1%
Public Defender	\$1,629,893	1.0%	\$1,445,773	0.8%	\$1,629,036	0.7%
OC Community Resources	\$3,117,476	1.9%	\$3,040,528	1.8%	\$4,215,201	1.7%
All Others	\$16,868,969	10.1%	\$16,549,348	9.6%	\$20,292,359	8.3%
Total (using 7-yr. loss histories)	\$166,705,358		\$172,102,778		\$245,768,035	

Appendix D: Loss Exposure and General Liability Survey by Department and Risk Management

Summary

The County of Orange Risk Management (RM) Office requested feedback on current Loss Exposure and General Liability Claims procedures and operations from both departmental liaisons/stakeholders and internal RM staff.

Department Liaison Demographics:

Liaisons were e-mailed a survey link on 2/25/2020 to provide confidential feedback by 3/13/2020. A total of 9 of the 18 invited departments participated⁴. Of the 9 respondents, 55.6% were mid-level managers and 44.4% were department executives (policy/decision makers), with no respondents identifying as a non-supervisory or line supervisor. A majority of respondents had been in their current position and in their current department at least one year but less than five years while the majority of respondents had been in a supervisory role at least ten years.

In addition to the self-identified tenure and role, departments were classified as large or small departments by County RM. Respondents included seven large and two small departments.

	1 year or less	At least 1 year, up to 5 years	At least 5 years, up to 10 years	At least 10 years, up to 15 years	More than 15 years	Decline to state
Time in current position	1 (11.1%)	7 (77.8%)	1 (11.1%)	0 (0.0%)	0 (0.0%)	0 (0.0%)
Time in current department	0 (0.0%)	5 (55.6%)	2 (22.2%)	0 (0.0%)	1 (11.1%)	1 (11.1%)
Time Supervising or higher	1 (11.1%)	0 (0.0%)	1 (11.1%)	4 (44.4%)	2 (22.2%)	1 (11.1%)

County Risk Management Demographics:

County RM staff were e-mailed a survey link on 3/3/2020 to provide confidential feedback by 3/13/2020. A total of 17 of the 28 invited departments participated, including three partially complete responses. Of the 17 respondents, eight indicated experience or knowledge in loss exposure and general liability claims while eight indicated experience or knowledge in safety training processes. The respondents included five that had experience in both areas and six that did not indicate experience in either area. The analysis of Loss Exposure and Liability only includes the eight County RM staff who indicated experience in this area. Of the eight respondents, 50% were non-supervisory positions, 25% were line supervisors, and 25% were mid-level manager positions, with no respondents identifying as department executives.

⁴ Respondents included representatives from Health Care Agency, Human Resources, John Wayne Airport, OC Animal Care, OC Community Resources, Sheriff-Coroner, and Social Services Agency department.

Slightly more than a third of respondents had been in their current position, department, and Orange County for at least one year but less than five years, with the remaining distributed among categories with more than five years, including some with over fifteen years as outlined in the table below. The supervisory positions had been supervising for either one to five years or ten to fifteen years. In addition to assessing role and tenure, respondents identified the departments they supported. Five respondents provided support for all departments, in addition to identifying specific support for the Sheriff-Coroner, OC Community Resources, County Executive Office, Health Care Agency, John Wayne Airport, and OC Waste and Recycling departments.

	1 year or less	At least 1 year, up to 5 years	At least 5 years, up to 10 years	At least 10 years, up to 15 years	More than 15 years	Decline to state
Time in current position	0 (0.0%)	3 (37.5%)	3 (37.5%)	1 (12.5%)	1 (12.5%)	0 (0.0%)
Time in current department	0 (0.0%)	3 (37.5%)	1 (12.5%)	2 (25.0%)	2 (25.0%)	0 (0.0%)
Time in Orange County	0 (0.0%)	3 (37.5%)	1 (12.5%)	1 (22.2%)	3 (37.5%)	0 (0.0%)
Time Supervising or higher	0 (0.0%)	2 (25.0%)	0 (0.0%)	1 (12.5%)	0 (0.0%)	0 (0.0%)

1. Informational Reports:

Departmental Assessment:

County RM provides information to the departments regarding Loss Exposure trends and claims, including what factors into the County being sued and prevention methods. Only four of the large departments (44.4% of responses) indicated they had received general information from County RM regarding Loss Exposure.

As a part of the provided information, County RM produces an informational metric report summarizing the number of claims and lawsuits filed, litigation costs, and trends for the large departments. The following outcomes are based on questions only shown to those departments identified as large departments who would have received this report.

- Five of the seven responding large departments indicated they had heard of this Informational Metrics Report, but only two had actually reviewed it.
- Of the five who had heard of it, two had personally received it and two had it forwarded to them, with all four indicating the information was useful to the department.
- One department indicated they had not received the report but the department had it, however they did not feel the information was useful to the department.

County Risk Management Assessment:

Six of the eight (75.0%) County RM staff reporting having access to the Orange County loss exposure data, trends, and claim information, leaving a third of respondents who do not currently have access to this data. The current expectations and responsibilities of the Loss Exposure and General Liability program, based on open feedback from RM staff, are to minimize

liability risks and County costs, reporting on current claims to identify who, how, and at what frequency each claim type occurs to develop training to address these concerns, and providing customer service to answer any questions. Reporting includes bi-annual and annual summaries, with smaller departments having only one or two claims and larger departments having enough claims to conduct trend analyses.

Based upon conversations with the departments, two of the eight respondents (25.0%) indicated the information provided in the large department informational metric reports was useful while three respondents (37.5%) indicated it was not useful. Two others indicated it was not applicable to their departments, with one not answering.

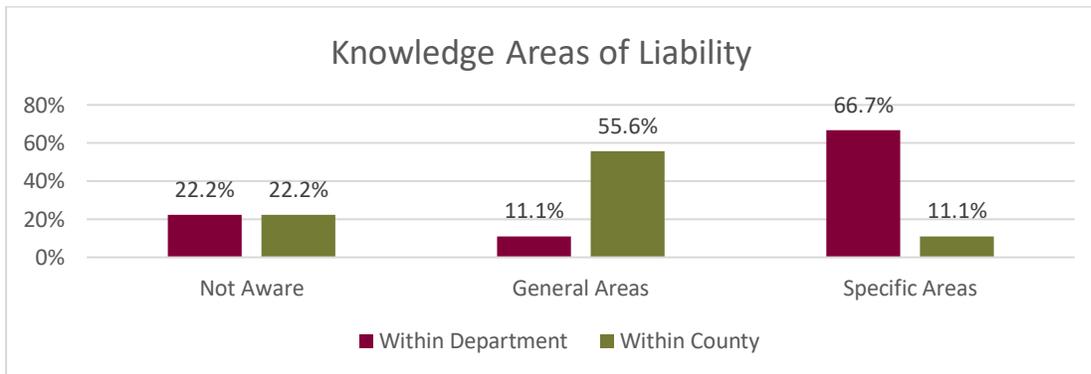
Those who indicated the information was useful stressed the importance of trend knowledge for the departments. Additionally, RM staff monitors political impacts that drive claims, related claims in nearby cities and counties, and new laws and court cases to project future claim patterns. The respondents indicated that the metric report could be improved by expanding the delivery of the data with additional trending and historical benchmarks. Additionally, reports would be enhanced and more valuable with a general explanation of the liability source compared to the department's exposure or risk level, clarified guidance on needed actions to convey urgency on developing trends, and the financial impact to the County and financial impacts to their department.

- The smaller departments have significantly fewer losses and therefore creating trending data and performance metrics can be difficult. Each and every loss can be deemed an outlier and difficult for the smaller departments to manage. If the smaller departments were provided the same data metrics for other county departments, they would have the benefit of observing claim trends throughout the county and they would be able to use those metrics to implement loss prevention measures minimizing loss exposures.
- The departments have a vision to utilize the litigation process to learn and reduce future incidents while we use the opportunity to be successful in the litigation process. Clearly two different perspectives. We work well together to get this done.
- The data presented in reports covers a specific 12-month period and there is no comparison over longer periods of time. There is content language in the reports that is not meaningful to our operation. There is no clear guidance, call to action or sense of urgency to act based on trends that are identified.
- Complete loss runs, including reserves and total incurred, would be helpful.
- OCWR requests cost of claims, open workers' compensation claims, increase premium cost per employee, 5-year trend.

2. Sources of Liability:

Departmental Assessment:

The next set of questions assessed the knowledge of specific sources of liability and risk within the departments. Overall, two of the nine responding departments (22.2%) were unaware of the sources of liability at the department or the county level, while six were aware of specific liability sources within their departments (66.7%) and five were aware of general sources of liability within the county (55.6%).



Respondents were asked if they had been informed of each type of claim, and by whom, in addition to identifying the level of understanding of each claim type. The following table summarizes the responses by claim type.

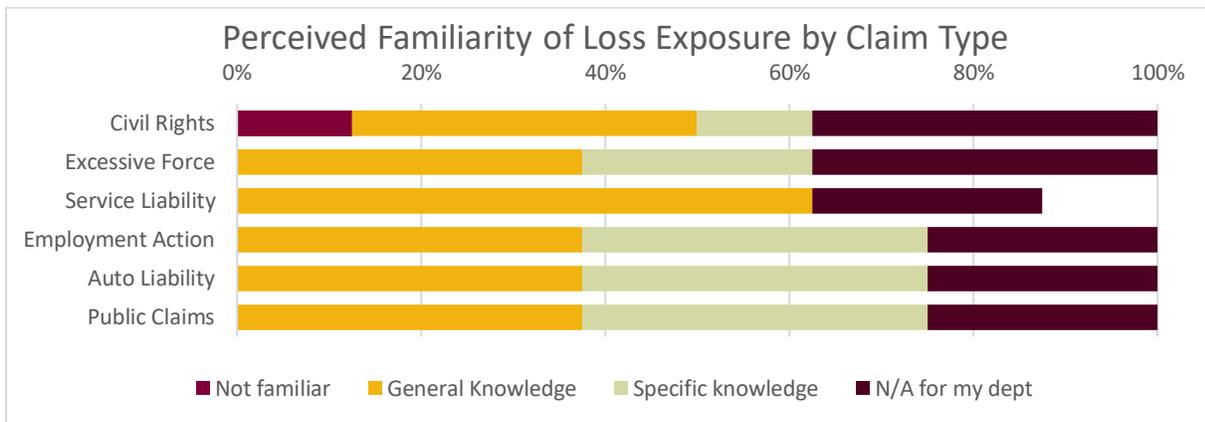
Type of Claim	Have you been informed and by whom?	Level of Understanding of Potential Loss Exposure
Civil Rights	6 of 9 Informed, from coworkers, supervisor, and County RM	
Excessive Force	1 of 9 Informed, from coworkers, supervisor, and County RM	
Service Liability	4 of 9 Informed, from coworkers, supervisor, and County RM	
Employment Action	7 of 9 Informed, from coworkers, supervisor, and County RM	
Auto Liability	5 of 9 Informed, from coworkers, supervisor, and County RM	
Public Claims	5 of 9 Informed, from supervisor and County RM	
Public Claims	5 of 9 Informed, from supervisor and County RM	

- Overall, respondents were most informed on Employment Action and Civil Rights claims and least informed on Excessive Force and Service Liability Claims.

- In all except Public Claims, information came from coworkers, immediate supervisors, and County RM staff.
- The level of understanding of the potential loss exposure varied with respondents most aware of the specific impact of Public claims and Employment Action claims and most aware of the general impact of Civil Rights claims.
- Respondents were least familiar with the impact of Service Liability and Excessive Force claims.

County Risk Management Assessment:

Eight of the responding County RM staff identified the level of understanding departmental liaisons had on each of the following six key claim types based on conversations.



- RM staff indicated department liaisons were most aware of the specific impact of Auto Liability, Employment Action, and Public Claims and most aware of the general impact of Service Liability claims.
- Of the eight respondents, 25% indicated that Service Liability, Employment Action, Auto Liability, and Public claims were not applicable to their departments while 37.5% indicated Civil Rights and Excessive Force were not applicable to their departments.

3. General Liability Information and Training:

Departmental Assessment:

Respondents were asked to rate the availability of knowledge provided by County RM through five statements rated on a five-point scale from Strongly Disagree (1) to Strongly Agree (5). The responses were compared between the two small and five large departments.

	Small	Large
OC Risk Management staff provide general information outlining areas of risk and how to proactively avoid incidents resulting in General Liability claims.	4.5	3.4
OC Risk Management staff summarize current County claims/metrics to inform of problematic areas and methods for proactively minimizing the risk factors.	4.5	3.4
OC Risk Management staff follow up with the Department to discuss individual claims/lawsuits impacting the Department.	4.0	3.3
We have utilized training by the Risk Management staff to better understand current risks and risk prevention strategies.	5.0	3.0
Our department could use additional training/refresher on current risks and risk prevention strategies to avoid General Liability claims.*	3.0	4.3

**Higher scores on this item indicate a greater need for knowledge.*

Overall, large departments rated the availability of information lower than small departments, with the exception of the need for additional training in which the higher score indicated a desire for more knowledge. The smaller departments agreed to strongly agreed that County RM provides general information and metrics, follows up on individual claims and they have utilized training by RM staff. Larger departments only slightly agreed that County RM provides general information and metrics and follows up on claims. A follow up on why they did not utilize training to better understand indicated the respondents were not aware of the available trainings.

County Risk Management Assessment:

RM staff rated the efficiency of information and training materials provided by County RM through five statements rated on a five-point scale from Strongly Disagree (1) to Strongly Agree (5).

	Average
Risk Management provides sufficient information to the County Departments related to the specific litigation occurring in their department and the outcomes.	3.1
The Risk Management Office currently provides effective training opportunities based on loss exposure/liability claims.	2.6
The department liaisons show interest and actively participate in available training to ensure understanding.	2.9
I am able to access the data necessary to create new or updated training programs and/or tools that would be beneficial to the departments.	2.6
I have sufficient resources (materials, access to outside trainers, tools, funding, etc.) to develop and deliver training on the litigation process.	2.9

Overall, County RM staff slightly disagreed that effective training opportunities regarding loss exposure were provided and that the data necessary to update the training was available. Responses did not agree or disagree with the sufficiency of specific litigation information provided to departments, the interest of departmental liaisons during training, and the availability of sufficient resources to develop training.

4. Processing Liability Claims

Departmental Assessment:

The following section focus on the experiences of staff while working on liability claims using the current processes. Eight of the nine respondents had personally been involved in the defense of litigation on behalf of the county, while one small department had not. The most recent claim within the departments ranged from April 2013 to March 2020, however six of the eight occurred in 2018 or later.

Respondents were asked to rate the level of explanation provided across four aspects of the litigation process using a four-point scale from No Explanation (1) to Well Explained (4). The responses were compared between the two small and five large departments.

	Small	Large
Litigation Process	4.0	3.1
Goals of Litigation	4.0	3.0
Potential Outcomes of Litigation	4.0	3.0
Explanation of County Risk Management produced reports	4.0	2.0

The small department indicated County Risk Management well explained all aspects of the litigation process so they could explain it to others. However, the average rating across the large departments indicated County Risk Management Adequately explained three of the four aspects so they could complete the process, but not sufficiently enough that they could explain it to others. However, large departments felt that there was only a Basic level of explanation on County Risk Management produced reports and they had follow-up questions.

Six of the eight departments with personal experience using the process indicated they were comfortable with their role in the litigation process. Of these six, three indicated Timely Communication was the most helpful in preparing for the process while the other three indicated Availability of Risk Management staff expertise was the most beneficial. For the two who indicated they were not comfortable with their role in the process, one indicated the need for more timely notification of the steps and settlement process and the other indicated a need for more timely notifications, Risk Management expertise access, training on the process, and the overall loss exposure risks.

County Risk Management Assessment:

All eight of the responding County RM staff indicated they were comfortable with their role in Tort claim/litigation process. Respondents were asked to rate the level of explanation required when speaking to departments regarding claims/litigation across four aspects of the litigation process using a four-point scale from No Explanation Needed (1) to Detailed Explanation Required to enable liaison to explain it to others (4). Higher numbers reflect more explanation needed.

	Average
Litigation Process	3.0
Goals of Litigation	2.8
Potential Outcomes of Litigation	2.8
Explanation of County Risk Management produced reports	2.5

- County RM staff indicated needing to provide departmental liaisons with a sufficient level of explanation of the actual litigation process, with slightly less explanation required on the goals and potential outcomes of litigation. However, staff indicate that County produced reports requires just a little more than basic explanation. However, staff indicated that reports produced by the County require additional explanation for their Departments to comprehend the findings.
- Three of the seven respondents in this section indicated the litigation process, goals and outcomes, and RM reports were not applicable to their departments (one did not provide a response).
- Four of the eight respondents identified timely communication to the departments as being the most helpful in preparing for the litigation process with knowledge of potential loss exposure and training on litigation mentioned once each by the other respondents.

5. Time Requirements:

Departmental Assessment:

The average hours per month spent on work related General Liability was assessed to determine the impact on departmental staff workloads.

- Overall, departments spend an average of 7.3 hours on metrics and reporting, 17.6 hours independently working on general liability claims, and 23.6 hours a month collaborating with County Risk Management staff.
- The amount of time spent gathering and summarizing reporting metrics was about the same regardless of department size.
- The time spent working on claims independently and collaborating with Risk Management staff largely varied, with some large departments aligning with the small department values but others being significantly higher.

	Minimum	Maximum	Median	Mean	SD
Hours per month gathering and summarizing metrics, creating reports related to General Liability	0	15	8.0	7.3	5.9
Hours spent per month working independently on General Liability Claims	0	67	10	17.6	23.3
Hours spent per month working with staff from Risk Management on General Liability Claims	2	90	5	23.6	33.8

Average Hours per month	<p>A bar chart titled 'Average Hours per month' showing the mean values for three categories. The y-axis is labeled from 0 to 30 in increments of 10. The x-axis categories are 'Metrics and Reporting', 'Independent Claims', and 'Collaborating with RM'. The bars are olive green. The values are: Metrics and Reporting: 7.3; Independent Claims: 17.6; Collaborating with RM: 23.6.</p>
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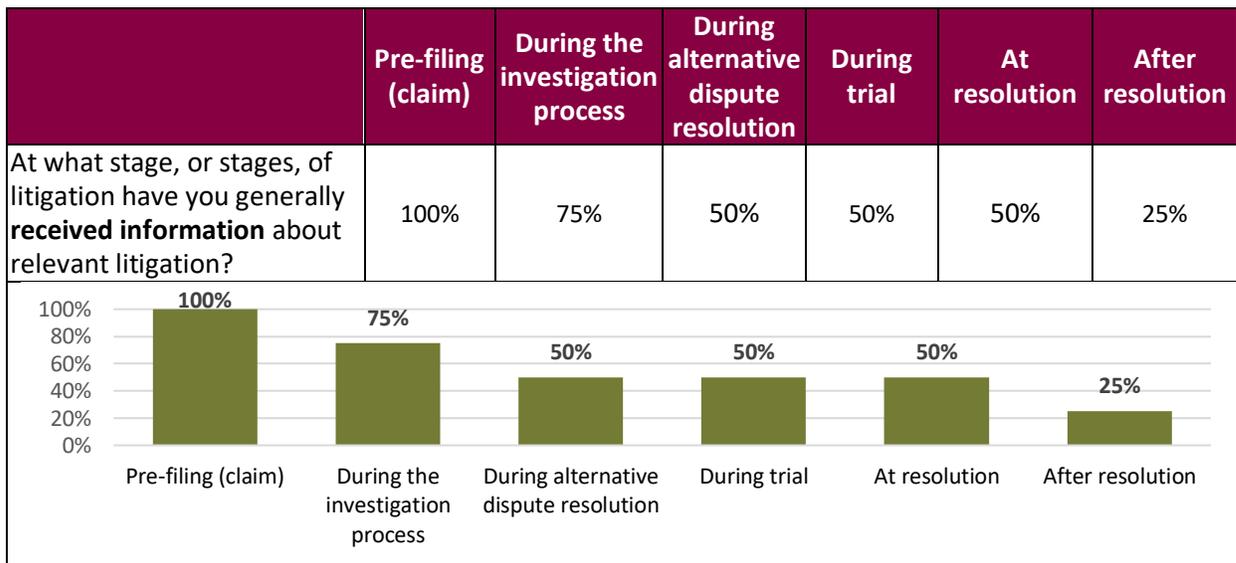
County Risk Management did not have questions related to departmental time requirements.

6. Department Executive Feedback:

Departmental Assessment:

The last set of questions were directed only to the four respondents identified as Department Executives (Policy/Decision Makers), all of which were in larger departments. On a scale from Strongly Disagree (1) to Strongly Agree (5), respondents slightly agreed (average 3.5) that the County Risk Management Office provided them with sufficient information regarding litigation specific to their departments.

Respondents identified when they received information during the litigation process, with the following table identifying the percentage of respondents receiving information at each stage. Overall, departments received less information as the process went on with 100% receiving information on the litigation claim pre-filing, but only 50% receiving information at the resolution of the claim.



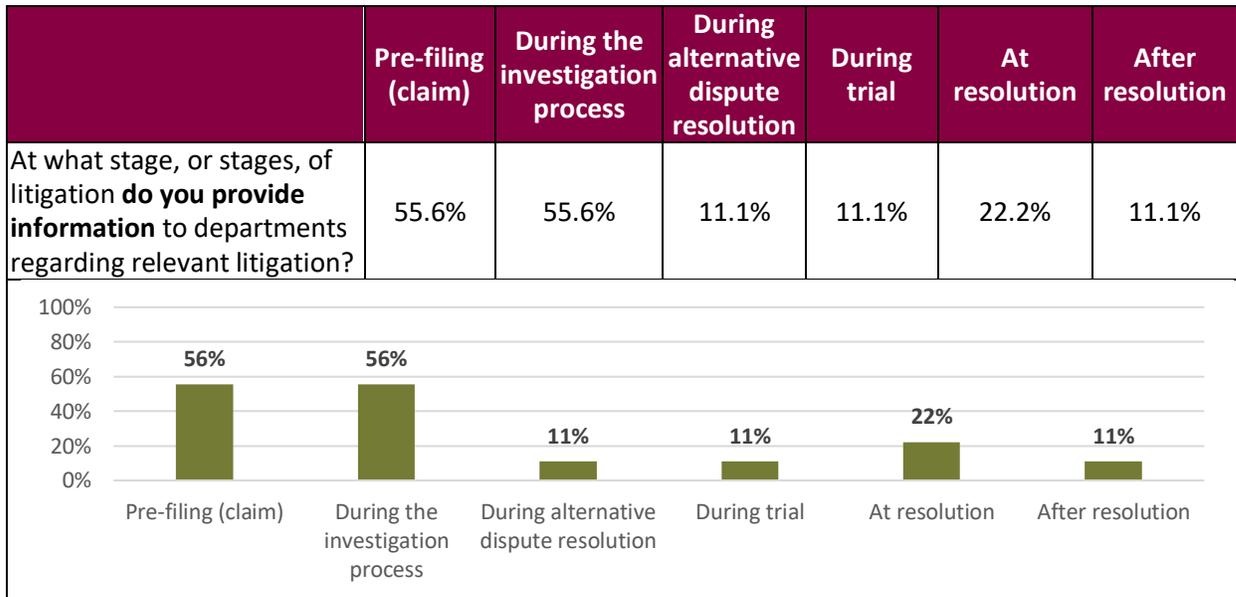
Communication type and frequency were assessed through an evaluation of current and preferred communications to determine the best way to provide information. Overall, Department Executives currently receive minimal information, with e-mails when the claim is filed and at resolution. The preference would be e-mails at milestones, calls as needed, and on occasion an in-person meeting, with no communication through physical mail/ interdepartmental mail. However, it is noted that only two respondents provided feedback on this question.

Communication Format	Frequency of Past Communication	Frequency of Preferred Communication
In-person meeting	Rarely	Quarterly/semi-annually
Phone call/voice message	Very rarely	As needed
E-mail	At claim, resolution	When milestones achieved
Inter-department mail	Very rarely	Never
Other	n/a	n/a

Given the opportunity to provide open feedback on what Risk Management was currently doing to effectively convey information, one Department Executive identified the current claims/metric report as a good source of information.

County Risk Management Assessment:

County RM staff identified when they provided information during the litigation process, with the percentage of respondents indicating information is provided at each stage summarized below. Overall, five of the eight RM staff provided information during the pre-filing stage and five provided information during the investigation process. Information was only provided in the later stages by one or two of the eight responding RM staff. After resolution, information is provided in monthly reports for smaller or specific claims, or departments are involved in the settlement process for big losses.



The frequency and type of communications provided during a typical litigation process were assessed to identify current practices. Overall, County RM staff estimated sending approximately 11 mailed items, 10 e-mails, 4 phone calls, and 2 in-person meetings per litigation claim. *This reflects notably more communications per claim than was estimated by departmental staff.*

Communication Format	Frequency of Provided Communication
In-person meeting	2.1 meetings
Phone call/voice message	4.3 phone calls
E-mail	9.6 e-mails
Inter-department mail	11.4 mailed items
Other	n/a

7. Open Ended Feedback:

Departmental and County HR Assessment:

All respondents from both the departmental liaison and the County RM were asked to identify the information received from Risk Management that was most beneficial in minimizing risk and exposure to loss and what additional information would help them respond to general liability claims. The raw responses are presented in the tables below, with only identifying information redacted.

Which information received from Risk Management is most beneficial to your Department in minimizing risks and exposure to loss or responding to general liability claims when they occur?	
Departmental Liaisons	County RM staff
Claims Status - updates on claims progress Claims Resolution - ability to add detail and other input to assist resolution.	Changes in the law or changes from the court. We have in the past jumped on changes in the law and trained with counsel and the department on same...like warrants for SSA taking endangered children, or not booking and holding misdemeanors etc.
Detailed data/metrics	Department metric reports & statistics
Information received from defense counsel which they acquired through their investigation. The department isn't always made aware of case information.	I only see pieces of information and not the whole picture.
Our Safety Officer provides us an annual report of injury and loss claims	Status Updates

What additional services and information would you like to see from Risk Management to help your Department respond to General Liability/Loss Exposure claims more effectively?	
Departmental Liaisons	County RM staff
Insurance Industry Information - claims trends, updates in loss control, success stories in reducing most frequent/problematic claims.	We are an open door and they know they can reach out and ask and we will answer or find the answer or tell them we cannot, due to litigation, discuss an item. The issue with a public entity is that at first, the department wants to defend the lawsuit, show their policy is good and employees acted well. But when it comes to sending 5 employees up to Los Angeles to be deposed in that litigation, suddenly they want to settle, or agree to mediate to resolve. Much like the private insurance world, a loss from a business is reported to the carrier, and while they work with the insured, and inform them, the insurance company is in control of the litigation, and how they will attack it, defend it and what process that will be. Insured's tend to want to settle so they do not have to deal with the time expense of employees being deposed, or gathering discovery etc. So we inform and keep them in the process, but we have to keep litigation decisions, and the settle, don't settle, go to court discussion with them, but in house for final decision. We try to get buy in whenever possible, and explain we will do the depositions and the employees need that time to prepare and defend.
More recommendations from RM staff as well as defense counsel on how the department can improve their policies and practices as an external entity looking in.	Clear data that is more easily interpreted and actionable.
Staff training recommendations based on metrics, facility inspections	Communication

Appendix E: Safety Training Effectiveness Survey by Department and Risk Management

Summary

The County of Orange Risk Management Office requested feedback on the effectiveness of current Safety Training procedures and operations from both departmental liaisons/stakeholders and internal risk management staff.

Department Liaison Demographics:

Liaisons were e-mailed a survey link on 2/27/2020 to provide confidential feedback by 3/13/2020. A total of 35 of the 70 invited departments participated⁵, including two partially completed responses. Of the 35 respondents, 11 (31.4%) were department executives, 19 (54.3%) were mid-level managers, 3 (8.6%) were line supervisors and 2 (5.7%) were non-supervisory positions. A majority of respondents had been in their current position between one and five years with time in the department split between one and five years or over fifteen years, while a majority of respondents had been working for Orange County over fifteen years. For those in a supervisory role, their time supervising was either one to five years or over ten years. This demonstrates a diversity of experience providing feedback.

In addition to the self-identified tenure and role, departments were classified as large or small departments by County Risk Management based on whether they received informational metrics reports on liability and loss exposure. Respondents included 13 large and 22 small departments.

	1 year or less	At least 1 year, up to 5 years	At least 5 years, up to 10 years	At least 10 years, up to 15 years	More than 15 years
Time in current position	2 (5.7%)	21 (60.0%)	5 (14.3%)	4 (11.4%)	3 (8.6%)
Time in current department	1 (2.9%)	13 (37.1%)	5 (14.3%)	4 (11.4%)	12 (34.3%)
Time in Orange County	0 (0.0%)	7 (20.0%)	1 (2.9%)	5 (14.3%)	22 (62.9%)
Time Supervising or higher <i>(if applicable)</i>	0 (0.0%)	9 (25.7%)	4 (11.4%)	8 (22.9%)	11 (31.4%)

County Risk Management Demographics:

County Risk Management staff were e-mailed a survey link on 3/3/2020 to provide confidential feedback by 3/13/2020. A total of 17 of the 28 invited departments participated, including three partially complete responses. Of the 17 respondents, eight indicated experience or knowledge in loss exposure and general liability claims while eight indicated experience or knowledge in safety training processes. The respondents included five that had experience in both areas and six that did not indicate experience in either area. The analysis of the Safety Training Effectiveness only includes the eight County Risk Management staff who indicated experience in this area. Of the eight respondents, 5 (62.5%) were non-

⁵ Respondents included representatives from the Assessor, Auditor-Controller, Child Support Services, Clerk of the Board, County Counsel, County Executive Office, District Attorney, Health Care Agency, Human Resources, Internal Audit, John Wayne Airport, OC Community Resources, OC Public Works, OC Waste and Recycling, Probation, Public Defender, Sheriff-Coroner, Social Services Agency, and Treasurer-Tax Collector departments.

supervisory positions, 1 (12.5%) was a line supervisor, and 2 (25%) were mid-level manager positions, with no respondents identifying as department executives.

Half of the respondents had been in their current position, department, and with Orange County for between one and five years, with the remaining distributed across categories with more than five years including just over a third who had been with Orange County for over 15 years. The three supervisory positions had been supervisory for one to ten years.

In addition to assessing role and tenure, respondents identified the departments they supported. Three respondents while other respondents supported the County Executive Office, Health Care Agency, John Wayne Airport, OC Community Resources, OC Public Works, OC Waste and Recycling, Probation, and the Sheriff-Coroner departments.

	1 year or less	At least 1 year, up to 5 years	At least 5 years, up to 10 years	At least 10 years, up to 15 years	More than 15 years
Time in current position	0 (0.0%)	4 (50.0%)	2 (25.0%)	1 (12.5%)	1 (12.5%)
Time in current department	0 (0.0%)	4 (50.0%)	2 (25.0%)	1 (12.5%)	1 (12.5%)
Time in Orange County	0 (0.0%)	4 (50.0%)	1 (12.5%)	0 (0.0%)	3 (37.5%)
Time Supervising or higher <i>(if applicable)</i>	0 (0.0%)	2 (25.0%)	1 (12.5%)	0 (0.0%)	0 (0.0%)

1. Training Availability:

Departmental Assessment:

The five non-supervisory and line supervisor positions assessed the availability and importance of safety training from the perspective of those who conduct the work on a regular basis.

- The average priority of safety training was 8.1 on a scale from 0 (not a priority) to 10 (highest priority), with answers ranging from 6.1 to 10.0.
- Multiple factors impacted the perceived lower priority of safety training with the most frequently mentioned factor being a lack of clarity on current safety standards including frequent changes to acceptable and/or approved trainings.
- The lack of time, absence of a department specific safety specialist, insufficient safety drills, and lack of resources from County Risk Management were also each mentioned once.

The number of safety and occupational health trainings received in the last two years varied with larger departments receiving at least three trainings, while two of the three responding smaller departments indicated not receiving any training. The availability of County Risk Management provided trainings was inconsistent between small department responses. One indicated receiving internal training on safety/occupational issues from a County Safety Representative while another had to hire an outside vendor for First Aid/CPR/AED training, but would prefer to have County Risk Management resume the trainings.

County Risk Management Assessment:

County RM rated the priority departments place on identifying and addressing safety issues on a scale from 0 to 10. Responses ranged from 1.0 to 9.9, with an average perceived priority of 4.7. Based on interactions with the departments, respondents identified factors that impacted the priority of safety training with five of the eight (62.5%) RM staff indicating there was no time for safety training, four of the eight (50%) indicating safety was not prioritized by management, and two (25%) indicating there was uncertainty on the training standards. There was also one mention of the lack of a safety specialist in the department, insufficient safety drills, and a lack of positive consequences of generating results.

2. Work Environment Safety and Accountability:**Departmental Assessment:**

The non-supervisory and line supervisors provided feedback on the current requirements to ensure a safe working environment. Respondents were asked to rate the clarity and availability of required trainings to ensure employees are maintaining a safe work environment on a five-point scale from Strongly Disagree (1) to Strongly Agree (5). The responses were compared between the twenty-two small and thirteen large departments.

	Small	Large
My department invests a lot of time and money in safety training for employees.	4.0	4.5
In my department, there is a system to obtain all of the mandated and required safety training programs.	4.5	3.0
In my department, each position has identified standards for mandated and required safety training programs.	4.0	4.0
Each position has access to and the ability to attend the required safety training programs.	5.0	4.5

- For the most part, both small and large departments agreed that the departments invest time and money into safety training, with identified standards and the ability to obtain and attend the mandated trainings. The exception being the large departments being unsure if they had a system in place to obtain all of the mandated training programs.

Additional statements assessed the ability to address unsafe or dangerous working conditions using the same five-point scale.

	Small	Large
Clear procedures to report any concerns of unsafe or dangerous conditions in the workplace are clearly explained to staff as a part of current safety training.	4.5	4.5
Safety training programs are developed and delivered, either by the Department or Risk Management, to mitigate any identified unsafe or dangerous conditions.	4.5	3.5
There are clear procedures for contacting sources outside the department in the event that an identified safety hazard has not been resolved.	4.5	3.0

- The small departments firmly agreed that there was a clear procedure to report unsafe conditions with follow up training to address the issue, and a clear procedure on who to contact outside the department if it was not addressed satisfactorily.
- The larger departments firmly agreed that there was a clear procedure to report unsafe conditions, but only slightly agreed that follow up training was provided, and had contrasting opinions of disagree and agree on the existence of clear procedures for contacting someone outside the department if the issue was not resolved.

Supervisors and managers are accountable for avoiding or addressing injuries and safety incidents in their respective areas. All respondents indicated the way(s) supervisors were held accountable in the small and large departments, with the percentage of small and large departments identifying each accountability method summarized below.

	Small (n=22)	Large (n=13)
Required to complete job safety analyses on a routine basis.	27.3%	23.1%
Required to complete safety training on a regular basis, regardless of occurrence of incidents.	68.2%	76.9%
Required to provide staff the correct tools and resources to avoid injury and safety incidents.	68.2%	100%
Required to document identified hazards, correcting the situation to ensure a safe working environment.	63.6%	100%
Required to conduct a thorough root-cause analysis to determine how the injury or safety incident occurred.	40.9%	53.9%
Required to complete a refresher course personally on impacted area	31.8%	30.8%
Required to hold staff accountable for safety practices, implementing refresher or training courses to avoid future similar incidents	68.2%	69.2%
Other	9.1%	3.3%

- Large departments primarily utilized provision of the correct tools and resources and documenting and correcting any notated hazards as the primary means of holding supervisors accountable as identified by 100% of respondents.
- Unlike the large departments, there was no single method that was identified by all respondents, but rather they were spread across the methods. Small departments utilized regular safety training, provision of the correct tools and resources, and holding staff accountable for safety practices, along with documenting and correcting any documented hazards as the primary means of holding supervisors and their staff accountable.
- The least commonly cited accountability method was the completion of routine job safety analyses and completion of refresher courses on impacted areas.

County Risk Management Assessment:

County Risk Management staff provided feedback on the clarity of current requirements and availability of the required courses to ensure employees are maintaining a safe work environment on a five-point scale from Strongly Disagree (1) to Strongly Agree (5).

	Small
The County has a system in place identifying mandated safety training requirements for each position or classification within the County.	2.8
The departments have access to and the ability to sign up/attend or request the mandated safety training programs.	3.2
OC Department staff have the tools and/or equipment needed to do their work safely	3.8
There are clear procedures for contacting sources outside the OC Departments in the event that an identified safety hazard has not been resolved.	3.6
New safety training programs are developed and delivered, either by the OC Departments or Risk Management, to mitigate any identified unsafe or dangerous conditions.	3.8
OC Department staff proactively work with County Risk Management staff to address any safety issues noted during safety analyses or incidents	3.6

- County Risk Management staff slightly disagreed that there was a system to identify the mandated safety requirements for each classification while slightly agreeing that the departments have access and ability to sign up for mandated safety programs.
- Respondents mostly agreed that department staff have the tools to do their work safely.
- Respondents slightly agreed that department and County Risk Management staff proactively address noted safety issues and that there are clear procedures for reaching outside of the department to address unresolved safety concerns, and mostly agreed that new safety training programs were developed to mitigate identified safety concerns.

While department staff identified that there are clear procedures to report unsafe work conditions, it is important to understand how supervisors are held accountable across the departments. Risk Management staff identified the method(s) utilized to hold supervisors accountable for avoiding or addressing injuries and safety incidents based on their interactions with the departments. The percentage of the County Risk Management staff identifying each accountability method is below.

	Percent
Required to complete job safety analyses on a routine basis.	0%
Required to complete safety training on a regular basis, regardless of occurrence of incidents.	50%
Required to provide staff the correct tools and resources to avoid injury and safety incidents.	50%
Required to document identified hazards, correcting the situation to ensure a safe working environment.	25%
Required to conduct a thorough root-cause analysis to determine how the injury or safety incident occurred.	50%
Required to complete a refresher course personally on impacted area	25%
Required to hold staff accountable for safety practices, implementing refresher or training courses to avoid future similar incidents	25%
Other	75%

- RM staff primarily identified regular training, provision of the correct tools/resources, and conducting thorough root-cause analyses to determine how the unsafe incident occurred as the primary means of holding supervisors accountable.
- The least commonly cited accountability method was the completion of routine job safety analyses. However, one of the RM staff indicated that they have been developing living job safety analyses to better educate an employee on accomplishing specific tasks and avoiding injury, noting that the analyses could be updated to address new hazards.
- The percentage of RM staff who identified each method was lower than both the small and large departments, with only one or two of the four responding RM staff identifying each method.
- Under the “Other” category, RM staff indicated that nothing is required but it is recommended, and that they provide oversight over all the identified methods which are a part of the IIPP.

3. Collaboration of Resources:

Departmental Assessment:

All respondents rated the current cooperation level between departmental and County Risk Management staff in developing and providing new safety training on a five-point scale from Strongly Disagree (1) to Strongly Agree (5). Overall, respondents slightly agreed that there was a cooperative relationship with an average rating of 3.6 with large departments rating the relationship slightly higher with an average of 3.69 while smaller departments rated it slightly lower with an average of 3.55.

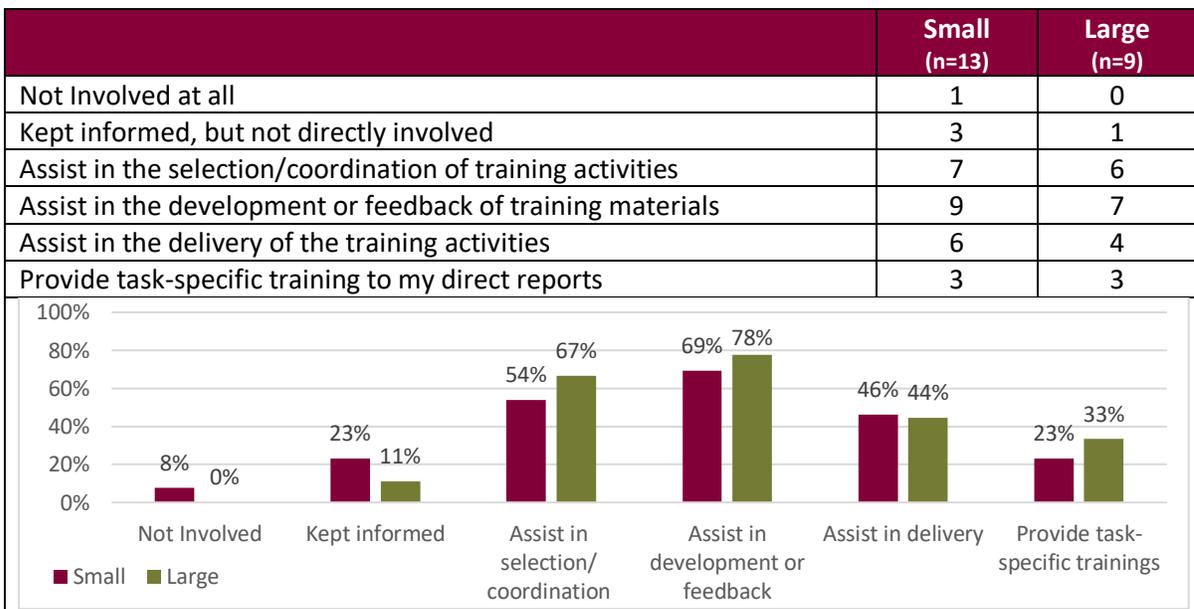
Focusing in on the availability of safety training resources, the three line-supervisors and nineteen mid-level managers provided feedback on the following questions.

Orange County has a number of positions involved in safety training. The familiarity with each of these positions was assessed to identify the level of knowledge of these available resources. The percentage of departments at each familiarity level is summarized below, split by department size, producing the following findings.

- Interaction with each resource was the most common familiarity level for both small and large departments.
- Small departments had the most familiarity with County Safety Representatives while large departments had the most familiarity with the CEO/Risk Management Safety Specialists.
- Approximately a third of the small departments were not familiar with the CEO/Risk Management Safety Specialists.

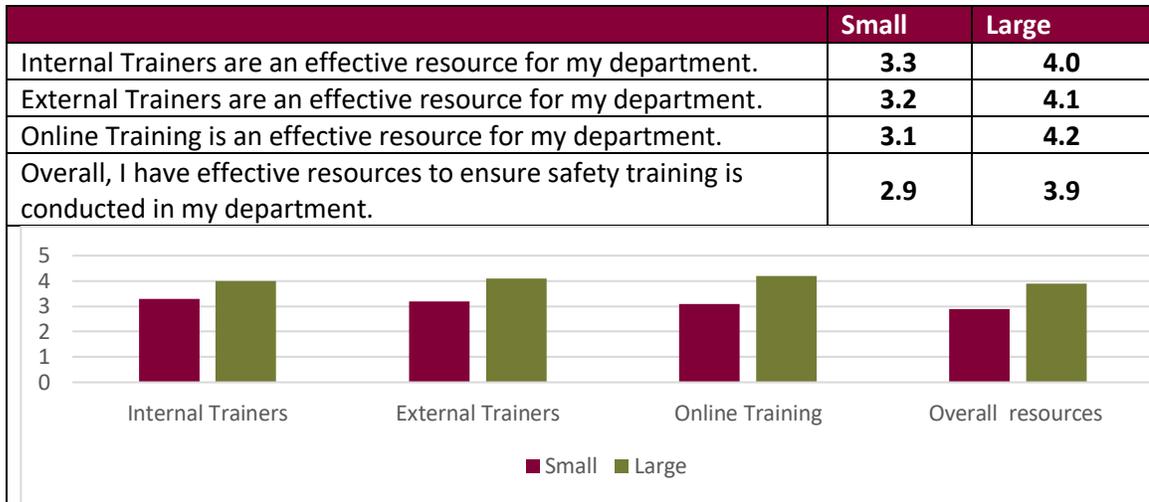
	Dept. Size	Do not know who this is	Know the name of this person	Know how to contact this position	Interacted with this position
CEO/Risk Management Safety Manager	Small	7.7%	15.4%	15.4%	61.5%
	Large	11.1%	11.1%	33.3%	44.4%
CEO/Risk Management Safety Specialists	Small	30.8%	7.7%	15.4%	46.2%
	Large	0.0%	22.2%	22.2%	55.6%
County Safety Representative (CSR's)	Small	7.7%	0.0%	23.1%	69.2%
	Large	11.1%	11.1%	33.3%	44.4%

The line supervisors and mid-level managers identified their involvement in safety training activities. The following table summarizes the number and percentage of respondents involved in each component of safety training.



- Overall, the patterns of involvement were fairly consistent between small and large departments, with the majority of respondents involved in the selection/coordination of training and in the development or feedback of training.
- A higher percentage of the large departments were involved in each of the training components, except for delivery which was similar to the smaller departments.
- One of the smaller departments indicating not being involved and a higher percentage of small departments indicated they were kept informed but not involved.

Orange County Risk Management assists each department by providing training resources/trainers upon request. Respondents rated the effectiveness of each type of resource on a five-point scale from Strongly Disagree (1) to Strongly Agree (5). The average rating by department size is below.



- Large departments solidly agreed that all the resources were effective, while small departments were more ambiguous with average ratings neither agreeing or disagreeing that the resources were effective for their departments.
- Large departments rated online training as slightly more effective followed by external trainers and then internal trainers. Small departments reported the inverse with internal trainers rated as slightly more effective followed by external trainers and then online training.

County Risk Management Assessment:

County Risk Management staff identified their personal involvement in the safety training activities with their assigned departments. The following table summarizes the number and percentage of the seven respondents involved in each component of safety training.

	Percent of RM staff
Not Involved at all	0 (0%)
Kept informed, but not directly involved	2 (28.6%)
Assist in the selection/coordination of training activities	5 (71.4%)
Assist in the development or feedback of training materials	3 (42.9%)
Assist in the delivery of the training activities	4 (57.1%)
Other Involvement	1 (14.3%)

Overall, the majority of staff are involved in the selection and coordination of training activities and in the delivery of training with at least half of respondents assisting in these activities, and to a slightly lesser extent, the development of training materials. Overall, Risk Management respondents unanimously agreed that they had adequate resources to conduct safety training for their departments.

The most prevalent involvement was the selection and coordination of training and trainers upon request. Respondents rated the perceived effectiveness of each type of trainer resource on a five-point scale from Strongly Disagree (1) to Strongly Agree (5). The average rating per resource type is summarized below.

	Average
Internal Trainers are an effective resource for my departments.	4.0
External Trainers are an effective resource for my departments.	4.0
Online Training is an effective resource for my departments.	4.0
Overall, I have effective resources to ensure safety training is conducted in my departments.	3.6

- County Risk Management staff solidly agreed that all the trainer resources were effective, while slightly agreeing that overall resources are sufficient to ensuring safety training is conducted.
- The average ratings of the County Risk Management staff more closely align with the perceived effectiveness by the larger departments.

Risk Management staff also rated a series of five statements assessing the current training processes and impact on a five-point scale from Strongly Disagree (1) to Strongly Agree (5).

	Average
The Risk Management Office provides or helps obtain effective training opportunities based on safety concerns, best practices and mandated training.	3.6
Risk Management and OC departmental staff have a cooperative relationship in developing and providing new safety training.	3.8
The OC departments actively participate in safety trainings to ensure understanding.	3.6
I am able to access the data necessary to create new or updated safety training programs and/or tools that would be beneficial to the OC departments	3.6
I have sufficient resources (materials, access to outside trainers, tools, funding, etc.) to develop and deliver safety training	3.8

- Respondents mostly agreed that Risk Management and departmental staff have sufficient resources (tools, trainers, etc.) to cooperatively develop and provide new safety training and slightly agreed that they had the data necessary to create new or modified training programs or tools.
- Respondents slightly agreed that the Risk Management Office helps provide effective training opportunities based on safety concerns and that the OC departments actively participated in the safety trainings.

4. Training Oversight/Administrative Tracking:

Departmental Assessment:

The following questions were given to respondents who identified as Department Executives. This includes eleven survey respondents, four from large departments and seven from small departments.

Seven of the eleven respondents (63.6%) indicated they do have a clearly designated party responsible for overseeing safety training, with six having one departmental representative and one relying on the supervisor of each work unit. The level of interaction with County Risk Management

varied with three indicating they reached out for assistance on non-routine questions, two working collaboratively to identify safety requirements and class availability, and one working independently to conduct training. The supervisors over each work unit work collaboratively with County Risk Management as needed. In contrast, four of the eleven respondents (36.4%) indicated they do not currently have a designated party responsible for overseeing safety training and rely on County Risk Management as their Safety Specialist.

Employee training records are maintained by all responding departments. Nine of the eleven respondents (81.8%) indicated the records are shared with County Risk Management upon request, one worked collaboratively with County Risk Management to record and report on training compliance, and one indicated it is the departments responsibility to track records. The method for sharing the training records could vary depending on the type of request received, but the most commonly cited method was through scanned and e-mailed training participation lists. When asked about the availability of an electronic tracking system that could be used by all departments, six (54.5%) indicated Orange County currently has an electronic tracking system while three (27.3%) indicated the County does not have a system, and two (18.2%) were unsure of the existence of this type of system.

County Risk Management Assessment:

Based on their work with the departments, County Risk Management staff identified if the departments they worked with had a designated representative responsible for overseeing safety training. Four of the seven respondents indicated their departments had one departmental liaison, one indicated the departments rely on County Risk Management, and two were not sure if the departments had designated representatives.

Respondents identified the ways that the County Safety Representatives (CSR) interacted with County Risk Management, with four of six respondents indicated CSRs reached out to County Risk Management for non-routine questions, while two mentioned working collaboratively on identifying training requirements, two worked together administering training, and one indicated collaborative efforts in developing training. Two respondents indicated that the CSRs independently conducted safety training and two indicated that Risk Management Safety Specialists are the departmental CSRs.

In addition to identifying categories of collaboration, one staff member indicated that the assignments were ineffective due to the lack of authority over the employees and general lack of training or background in the assigned area, causing the County to consider shifting the responsibility for training back to the immediate supervisors.

In terms of training records, three respondents indicated that records are shared with County Risk Management upon request, one respondent indicated County Risk Management is updated through regular updates to Eureka, and one indicated it was the departments responsibility to track and maintain records. Records are provided to County Risk Management via e-mail, updates to Eureka, or through a review of physical safety meeting forms during annual audits/inspections. Of note, four of the five respondents acknowledged the existence of an online tracking system while one indicated an electronic system is not available to departments yet.

5. Specific Training Course Effectiveness:

Departmental Assessment:

The next section asked all respondents to rate the effectiveness of a series of training courses using a four-point scale from Not effective (1) to Very Effective (4), with the option to indicate not applicable to their department as needed. The average effectiveness rating and percent of small and large departments preferring each method is outlined below. This table is shaded as a heat map to help identify courses that are currently perceived as effective (light green – average of 3.00 to 4.00), somewhat effective (yellow – average of 2.0 to 2.99), or not very effective (orange – average less than 2.00).

Additionally, respondents were able to indicate their preferred method of delivery between internal trainers, external trainers, or online training. The percentage of small or large departments indicating each method is documented in the right side of the table with the most preferred method for each department size shaded in blue (ties for the highest are both shaded).

Training Course	Dept. size	Average Effectiveness	N/A to dept.	Internal Trainer	External Trainer	Online Training
Office Safety	Small	2.94	n=2	36.4%	13.6%	54.5%
	Large	2.36	n=1	46.2%	15.4%	46.2%
Fire Safety	Small	2.81	n=3	22.7%	27.3%	36.4%
	Large	2.36	n=0	46.2%	23.1%	46.2%
Medical Safety (CPR, First Aid, etc.)	Small	3.07	n=4	22.7%	59.1%	13.6%
	Large	2.50	n=2	23.1%	53.8%	7.7%
Equipment/Maintenance Safety	Small	2.60	n=8	40.9%	13.6%	18.2%
	Large	2.40	n=2	38.5%	23.1%	30.8%
Intruder/Active Shooter Safety	Small	2.60	n=4	36.4%	36.4%	18.2%
	Large	1.80	n=2	23.1%	46.2%	38.5%
Road Safety/Driving Safety	Small	2.44	n=3	36.4%	31.8%	22.7%
	Large	2.20	n=2	23.1%	46.2%	15.4%
Hazard Communication	Small	2.67	n=4	50.0%	18.2%	27.3%
	Large	2.20	n=2	38.5%	15.4%	30.8%
Ergonomics	Small	3.00	n=2	63.6%	31.8%	27.3%
	Large	2.58	n=0	53.8%	15.4%	38.5%
Back/Lifting Safety	Small	2.88	n=3	50.0%	27.3%	31.8%
	Large	2.42	n=0	38.5%	23.1%	30.8%
Industrial Truck Operations	Small	3.00	n=15	22.7%	9.1%	0.0%
	Large	2.25	n=9	30.8%	15.4%	7.7%
Respirator Protection	Small	2.75	n=15	18.2%	4.5%	9.1%
	Large	2.44	n=3	30.8%	30.8%	15.4%
Hearing Conservation	Small	3.00	n=14	18.2%	13.6%	9.1%
	Large	2.43	n=6	30.8%	23.1%	15.4%
Lock-out/Tag-out	Small	2.25	n=15	22.7%	9.1%	0.0%
	Large	1.25	n=9	15.4%	15.4%	15.4%
Confined Space Entry	Small	2.25	n=15	13.6%	9.1%	0.0%
	Large	1.25	n=9	15.4%	15.4%	15.4%

Appendix E: Safety Training Effectiveness Feedback Survey

Training Course	Dept. size	Average Effectiveness	N/A to dept.	Internal Trainer	External Trainer	Online Training
Heat Illness Prevention	Small	2.64	n=8	31.8%	4.5%	31.8%
	Large	2.50	n=3	46.2%	23.1%	15.4%
Bloodborne Pathogen	Small	2.33	n=15	18.2%	0.0%	9.1%
	Large	2.33	n=0	46.2%	38.5%	30.8%
Aerosol Transmissible Disease	Small	2.50	n=16	4.5%	0.0%	13.6%
	Large	2.10	n=2	46.2%	23.1%	30.8%
Supervisor Safety	Small	2.61	n=1	27.3%	36.4%	27.3%
	Large	2.33	n=0	61.5%	46.2%	23.1%
Wildfire Smoke Prevention	Small	2.00	n=11	13.6%	4.5%	18.2%
	Large	2.13	n=4	30.8%	15.4%	30.8%
Incident Reporting and Investigation	Small	2.53	n=2	50.0%	13.6%	22.7%
	Large	2.17	n=0	69.2%	23.1%	46.2%
Root-cause Analysis	Small	2.38	n=3	40.9%	13.6%	31.8%
	Large	2.00	n=1	46.2%	23.1%	30.8%
Job Safety Analysis	Small	2.43	n=4	50.0%	13.6%	22.7%
	Large	1.91	n=1	53.8%	30.8%	23.1%
Slips/Trips/Falls	Small	2.75	n=3	40.9%	13.6%	36.4%
	Large	2.33	n=0	61.5%	23.1%	38.5%
Fall Protection	Small	2.71	n=4	31.8%	9.1%	36.4%
	Large	2.40	n=2	53.8%	15.4%	38.5%
Portable Ladder Safety	Small	2.67	n=9	31.8%	4.5%	18.2%
	Large	2.00	n=3	53.8%	15.4%	23.1%
Welding Safety	Small	3.00	n=15	13.6%	0.0%	0.0%
	Large	1.60	n=7	38.5%	15.4%	15.4%
Emergency Action/Fire Prevention	Small	2.71	n=5	45.5%	13.6%	27.3%
	Large	2.20	n=2	61.5%	15.4%	38.5%
OSHA Record keeping (including OSHA 300 logs)	Small	3.00	n=3	40.9%	13.6%	27.3%
	Large	2.36	n=1	69.2%	30.8%	23.1%
Injury and Illness Protection	Small	2.88	n=3	54.5%	18.2%	31.8%
	Large	2.64	n=1	61.5%	23.1%	46.2%
Portable Extinguisher Training	Small	2.43	n=3	40.9%	18.2%	22.7%
	Large	1.78	n=3	46.2%	30.8%	15.4%

An examination of the average effectiveness ratings produced the following key points:

- The overall effectiveness rating was 2.66 for small departments and 2.17 for large departments, reflecting an effectiveness level between “somewhat effective” at 2.0 and “effective” at 3.0.
- Of the 30 courses, six received an average rating of 3.0 or above, with 3.0 being the minimum to be considered effective, with all six coming from small departments. This included the courses on Medical Safety, Ergonomics, Industrial Truck Operations, Hearing Conservation, Welding Safety, and OSHA Record Keeping.

- Of the 30 courses, six received an average rating below 2.0 indicating they were less than somewhat effective, with all six coming from large departments. This included the courses on Intruder/Active Shooter Safety, Lock-out/Tag-out, Confined Space Entry, Job Safety Analysis, Welding Safety, and Portable Extinguisher Training.

Respondents had the option of indicating a particular course was not applicable to their department, resulting in the following observations:

- Across the 30 courses, an average of 32.1% of responding small departments indicated a course was not applicable to their department (equivalent to 7.1 out of 22 responding small departments). An average of 19.7% of responding large departments indicated the course was not applicable to their departments (equal to 2.6 of 13 responding large departments).
- A few small departments indicated some universal training topics did not apply to them, presenting the possibility of not seeing the importance of these topics. This included Fire Safety, Medical Safety, Ergonomics, Intruder Safety, and Emergency Action/Fire Protection among others.

Responding departments identified the preferred trainer method for each of the courses, with an option to select any that apply. An examination of the average percentage of departments who preferred each delivery method produced the following themes:

- An average of 33% of small departments preferred internal trainers across the course types, followed by 21.5% preferring online training, and 16.1% preferring external trainers.
- In a similar pattern, an average of 43.3% of large departments preferred internal trainers across the course types, followed by 27.4% preferring online training, and 25.1% preferring external trainers. The difference between online and external trainers was only 2.3% and is relatively negligible.
- For a majority of the courses, the small and large departments preferred the same trainer method, or at least had a tie for a shared method. This included 21 of the 30 course topics where both small and large departments preferred internal trainers (70%), 2 of the 30 topics that both preferred external trainers (6.7%), and 3 of the 30 topics where both preferred online training (10%).
- The small and large departments preferred different trainer methods for the remaining four course topics, including Road Safety/Driving Safety, Aerosol Transmissible Disease, Supervisor Safety, and Fall Protection.

6. Safety Trainings Open Feedback:

Departmental Liaison and County Risk Management Assessment:

All departmental respondents and County Risk Management staff were asked for suggestions to help make the trainings more effective overall. The raw responses are presented in the tables below, with only identifying information redacted.

The key ideas for things that could use improvement were:

- Guide identifying needed general training and classification specific training
- Implementation of knowledge check at the end of training and discussion/examples of how to apply once back on the job
- Real life experience/practice instead of just reading about it
- Consistent training for all agencies with a centralized County wide guideline
- More class time options, reduce travel by bringing classes to department or online.
- The RM staff indicated a lack of senior leadership guidance and interest within the departments.

Is there anything that would help make the safety trainings more effective overall?	
Departmental Liaisons	County RM staff
Effective training needs to have a knowledge check at the end of every training along with a follow up inspection of training records and employee Q&A. Once the training is completed, there is still a need to follow up with the employees once they are back on the job. This helps with retention of diminishing skills and creates a greater accountability than just a check the box mentality. Some of the training materials are covered, such as maintenance, however, it is very basic in nature and employees received additional training as it relates to specific pieces of equipment and tools.	For the most part, worksite supervisors are receptive and welcome my participation and help offered to them and we are making good progress. But it's the lack of guidance or directive from senior leadership that seems missing. These seems very little interest in what they can do to help execute effective solutions that drive results.
Content revisions that include up to date methods and scenarios. CHANGE THE SAFETY CULTURE	
A centralized training that is proctored/administered by Risk Mgmt. via online tracking to ensure all required training takes place when due.	
Honestly, my beef with the training is mainly rooted in the fact that there isn't enough being offered. I am sure that all of these would be getting higher ratings if they offered more classes. I think that if they contract some of the training out to a private vendor, they would have more time to provide more of the training on the internal safety policies. Also, if an outside vendor would provide the training, we could hopefully get the training as a one-day training onsite versus sending employees down to the Risk building on random days and times.	
I didn't know a lot of these trainings were available. I'm new to the safety role and felt like I received no guidance on what courses to take.	
I have attended a lot of the safety trainings provided by Risk Management and they have all been very good, effective and informative. If I had my choice though I would prefer online trainings whenever possible so I can fit, it into my schedule as needed and complete from my office.	

Is there anything that would help make the safety trainings more effective overall?	
Departmental Liaisons	County RM staff
I really wish that the training for the different Dept/Agencies would be mandated and people held accountable. Additionally, tracking is currently very difficult. I believe that when everyone gets on the new training system this will be easier.	
I selected NA above both if the topic presented had never been taught to my department, and if it did not apply to my department. More county safety statistics would be useful. Less emphasis on icebreakers. Start and end on time. Less reading from the slides and more experiential information from the safety reps.	
In person training not being provided.	
It would be more effective if there was continuity through-out the county. right now, each department does its own thing.	
It would be nice to have more than just one STO.	
Make them available online and on demand.	
1) More hands-on experience (e.g., using an actual fire extinguisher, rather than reading a document about fire extinguishers) 2) Subject matter experts to provide training or additional training for our supervisors who are required to provide training (Train-the-Trainer) 3) Classes provided at the location where employees work, (e.g.; at the landfill, rather than downtown Santa Ana, because this requires us to reimburse for travel, and disrupts operating schedules.) 4) More proactive schedule of class options - it would be more helpful if the CEO Risk provided a schedule of classes available, so employees could schedule to meet their training requirements.	
More training offered on site.	
Passing a quiz to demonstrate retention.	
There is very little standardized training. The safety program is very minimal and there is not a clear understanding of roles and responsibilities.	
Trainers that are excited about training and not just reading the PowerPoint presentation.	
Training is typically recommended/prescribed and administered/facilitated by the assigned CEO/Risk Safety and Training Officer. Establishing a list of required training for all staff and specialized training for certain classifications and in response to metrics would make training more effective. Training should be conducted by qualified staff and made available through CEO/Risk whenever possible for all departments.	
We were advised at the last safety CSR meeting that a safety system similar to Expediter had been created in 2019. Several agencies had not been advised re: this system. When we inquired why all agency CSRs had not been notified, we received no response. There needs to be more transparency when it comes to streamlining safety processes in the County.	

7. Safety Resources Open Feedback:

Departmental Liaison and County Risk Management Assessment:

Respondents from both the departmental line supervisors and mid-level managers and the County RM were asked to identify the resources currently provided by Risk Management that were most effective in ensuring delivery of safety training and what additional resources would be helpful. The raw responses are presented in the tables below, with only identifying information redacted.

The overall themes for things that are working well were:

- Embedded Safety and Training Officer within the Department to customize and track completed training for department staff.
- Some prefer in-house where staff are forced to focus, others prefer online which are more accessible and cost efficient.

The key ideas for things that could use improvement were:

- Assign Safety Training Officers to departments to allow for customized and specific training, more frequent available training sessions, and an in-house resource rather than traveling to training in groups
- Assign Safety Training Officer(s) based on department size with larger departments potentially needing more than one.
- Consistent support and priority from all levels of management
- Better response time from RM, waiting for responses
- Availability of interactive training to engage participants, track progress
- Provision of quick reference tools, PDFs of learning tools
- Consistent training for all agencies
- Development of a catalog of trainings and available teachers/subject matter experts.

Which resources provided by Risk Management are most effective in ensuring delivery of safety training?	
Departmental Liaisons	County RM staff
Contact info.	In-house training
Embedded Safety and Training officer	Online training (Eureka)
I only receive safety communication through my DSR. I never interact with CEO/Risk Mngt.	Classes offered for specific departments upon request
I strongly believe in house training is more effective than online. When it is in house- staff have to pay attention.	
Internal Trainers	
Internet/ online training	
On site/in person training is most effective.	
Online	

Which resources provided by Risk Management are most effective in ensuring delivery of safety training?	
Online resources that are direct and to the point are the most effective for staff.	
on-site training	
Our agency-assigned Safety Specialist has been effective in presenting and documenting existing safety training material. Our agency has also utilized existing on-line safety training materials provided by CEO Risk, but this material is less effective than the training provided by a knowledgeable safety professional.	
Safety Training Officer	
The assigned Safety Specialist delivers certain training content along with monitoring the attendance of staff required to attend based upon their job duties.	
The most effective training is classroom training for the groups; however, due to cost constraints I have been encouraging online training.	
what we have is working well	

What additional resources do you need to be able to ensure adequate and effective safety training for your department?	
Departmental Liaisons	County RM staff
Good handouts with informative graphics to provide employees a quick reference.	A catalog of trainings and a list of contractors that can provide training for county agencies.
I liked the EEO recent training. Software recognized progress, graded quiz, and acknowledged that training was reviewed. I'd like something interactive like that for Safety training. I'd be more certain that employees actually made and effort to do it. Also, it would give correct and more complete info than I might give since I'm not a professional safety person.	
I'd like to see training and procedure continuity throughout the agencies. It appears that many agencies are doing different things and safety programs vary widely. I believe our department is effectively providing safety training for our staff.	
It would be beneficial if we Department Management elevated the need for Safety training.	
It would be nice to have additional Safety Training Officers as our agency is very big and one STO cannot do it all by themselves.	
More hands on training and better communication.	
More training topics	
Most resources are high level and need to be more in depth.	
Ongoing training and refresher training	
Our Agency would benefit from the Safety Specialist dedicating 1) additional time to providing training, and 2) additional time/ resources to developing agency-specific safety training. I believe this could be accomplished by the Safety Specialist dedicating less time focused on administrative duties.	
PDF Information Files	

What additional resources do you need to be able to ensure adequate and effective safety training for your department?	
providing training programs that I can deliver that can be adapted to my department; providing templates for training; ensuring the CSR's are trained	
Still waiting on resources provided by Risk Management. I've asked for safety trainings and haven't received a response back.	
Support and commitment from all levels of management to develop a safety minded culture through training, changing behaviors and making safety a priority.	
Support by Risk Management as I have obtained none since I started this role 2 1/2 years ago.	
They don't offer enough training to meet our needs. When they do have training posted, there are not enough sessions available to work with my staffs' busy schedule.	
train the trainer sessions	
We are a large agency and have an STO full-time assigned to us. We have been told we won't be having this in the near future. It would be very beneficial to have the STO full dedicated to us.	
We need more training available and we need more sessions in general. What would be amazing is if the trainers could come to my department and train all my staff at once versus sending everyone over to Risk piecemeal.	