



# County of Los Angeles CHIEF EXECUTIVE OFFICE

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November 30, 2021

To: Supervisor Hilda L. Solis, Chair  
Supervisor Holly J. Mitchell  
Supervisor Sheila Kuehl  
Supervisor Janice Hahn  
Supervisor Kathryn Barger

From: Fesia A. Davenport  
Chief Executive Officer

Board of Supervisors  
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## **REPORT BACK ON ESTABLISHING CHIEF WELL-BEING OFFICERS AND PROMOTING WORKFORCE WELLNESS (ITEM NO. 4, AGENDA OF JULY 13, 2021)**

On July 13, 2021, the Board of Supervisors (Board) adopted a motion directing the Chief Executive Officer (CEO), in collaboration with the Department of Human Resources (DHR), the Alliance for Health Integration (AHI), and other relevant departments, to provide recommendations for creating new classifications for a Chief Well-being Officer and applicable support staff. The motion also included a review of best practice models for Chief Well-being Officer teams at hospitals, private companies, non-profit organizations and government agencies in other jurisdictions; descriptions of the roles, responsibilities and specifications of the Chief Well-being Officer and relevant support staff; and recommendations for Department Heads and Departmental Human Resource Managers to evaluate and identify the need for Chief Well-being Officer teams.

In addition, your Board instructed the Director of Personnel, in consultation with its Countywide Well-being Committee, to provide recommendations on additional resources or services needed to support the mental health and well-being of County workers, including the feasibility of expanding Employee Assistance Program services available to all employees.

CEO, DHR, and AHI researched and reviewed best practices; conducted focus groups and interviews; and consulted with various County subject matter experts. Our recommendations are to enhance communication of wellness resources and expand existing Employee Assistant Program services; expand dedicated wellness resources; and assess options for departmental wellness positions.

*"To Enrich Lives Through Effective And Caring Service"*

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The attached report details the needs assessment and data gathering process, findings, review of existing resources, and specific recommendations for your consideration.

Should you have any questions concerning this matter, please contact me or Ann Havens, Senior Manager, CEO, at (213) 974-9960 or [ahavens@ceo.lacounty.gov](mailto:ahavens@ceo.lacounty.gov).

FAD:JMN:AC:AYH  
EC:VT:mmg

**Attachment**

c: Executive Office, Board of Supervisors  
County Counsel  
Auditor-Controller

## PROMOTING WORKFORCE WELLNESS

This report is in response to your Board's July 13, 2021, motion directing the Chief Executive Officer (CEO), in collaboration with the Department of Human Resources (DHR), the Alliance for Health Integration (AHI), and other relevant departments to provide recommendations for creating new classifications for a Chief Well-being Officer (CWO) and applicable staff support.

### **NEEDS ASSESSMENT**

To prepare this report, CEO, DHR and AHI, hereafter CWO Group, conducted a review of best practices in the public and private sectors, developed and administered surveys to internal stakeholders, and solicited input from subject matter experts who are knowledgeable about issues impacting the well-being of County employees. Specifically, the CWO Group:

- Reviewed the practices, organizational structures, and wellness programs across several California counties and municipalities.
- Reviewed numerous articles and resources that offered information on how an employer can promote the comprehensive well-being (mental, emotional, physical, financial, and professional) of employees and their families.
- Reviewed dedicated wellness websites of both private and public organizations.
- Examined how expanded and comprehensive Employee Assistance Program (EAP) services offered through a third-party specialty provider could address the County's wellness needs.
- Explored how the position of CWO can either be strategic or programmatic in nature based on the needs of the employer and employee.
- Conducted presentations to Chief Deputies and Departmental Human Resources Managers to solicit feedback and request their participation in completing surveys and attending focus group meetings.
- Conducted a focus group with the Health Transformation Advocates (HTA) to obtain a represented frontline perspective. AHI facilitated the focus group and conducted targeted research with the Departments of Health Services (DHS), Mental Health (DMH), and Public Health (DPH).
- Met with the Chair of the Department of Psychiatry at DHS' Harbor-UCLA Medical Center (HUMC) to know more about this facility's efforts to provide peer support and counseling services for medical and resident staff.
- Conducted focus groups with Department Heads, Administrative Deputies, and departmental Human Resources staff so they could provide valuable input on existing wellness programs and provide department-specific perspectives on their employees' wellness needs.

## **FINDINGS**

- **HTA Feedback**

The committee endorsed creating a CWO in each of the Alliance for Health departments. They advocated for the CWO to report to an executive leader in the department with the idea that the CWO would be focused on creating high visibility and accountability on wellness initiatives. They also validated the level of burnout that exists among their workforce as they continue to address the pandemic response.

The HTAs further believed that a departmental CWO is needed to ensure bidirectional communication and would be instrumental in expanding existing wellness programs/resources so the efforts are not diluted. The CWO would ensure that all workers can make use of the programs/services offered.

- **Health Departments Feedback**

The three Departments in the Health Alliance expressed a desire to have executive level leadership within their departments who would be tasked with creating a strategy for wellness programs in their respective organizations. Burnout was cited as a critical problem that has led to and continues to lead to early retirement, prolonged leaves of absence and decreased job satisfaction. The hospitals have specific programs dedicated to address the wellness of professional and resident medical staff, however, as we saw at HUMC, these programs were designed prior to the pandemic by utilizing volunteer staff.

- **Research Specific to Healthcare Settings**

AHI, in coordination with CEO and DHR, conducted a best practice review of CWOs in the healthcare setting. The link between burnout and lack of wellness resources is clear and burnout has been exacerbated by the pandemic.<sup>1</sup> Specifically, for clinicians, burnout can have serious consequences on the clinician and on their ability to provide patient care.<sup>2</sup> On a landscape where the demand on healthcare providers is increasing, burnout continues to grow and cause loss of dedication and cynicism. These consequences can, in turn, lead to early retirement, alcohol or substance misuse, and suicidal ideation.<sup>3</sup> These research findings are validated by findings from department interviews and focus group feedback conducted as a part of this report.

According to research findings, to support the wellness needs of the workforce, many organizations have adopted the CWO into their structure. This position has been placed alongside the top leaders in the organizations, and the CWO reports to the organization's CEO or their equivalent.<sup>4,5</sup> The CWO role is expected to work in collaboration with executive leadership and other stakeholders, to listen and develop a response strategy for the specific organization. In this role, the CWO champions a

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<sup>1</sup> [Well-Being in Academic Medicine | AAMC](#)

<sup>2</sup> [From Triple to Quadruple Aim: Care of the Patient Requires Care of the Provider | Annals of Family Medicine \(annfam.org\)](#)

<sup>3</sup> [Clinician Resilience and Well-Being - National Academy of Medicine \(nam.edu\)](#)

<sup>4</sup> [New role needed: Chief Wellbeing Officer \(fastcompany.com\)](#)

<sup>5</sup> [The Chief Wellness Officer: Insights and Impacts - WittKieffer](#)

well-being culture that benefits workers and the patients/residents they serve.<sup>6</sup> The CWO stays connected to the needs of the workforce to ensure that the issues are raised to executive leadership in a timely manner and to ensure that employees have input in the development of solutions/offerings.<sup>5</sup> In this way, the CWO works as a collaborator, strategist, operator, and policymaker and would need strong experience and expertise in change management and strategic planning, among other skills.<sup>5,7</sup>

- County Departmental Feedback

Based on survey results and focus group feedback, we found our County Departments have an active role on their employees' well-being. They expressed various concerns related to employee wellness, all of which have been heightened by the pandemic. A big concern within the departments is fatigued due to the unrelenting pandemic response work. The sustained nature of this work can come at the sacrifice of quality.

In addition, departments stated their employees are experiencing anxiety over returning to the workplace and have related concerns about childcare. Departments believe that their employees have a sense of isolation and loss of connection with colleagues.

Some departments stated it would be beneficial to have a centralized CWO in their organization who can conduct research that would allow them to design and implement wellness strategies, and coordinate resources, including counselors, programs, and personnel. The departments expressed a desire to have a dedicated CWO who understands the unique needs of their respective department and utilizes these insights and information to customize programs.

## **EXISTING RESOURCES**

DHR offers and oversees the provision of various resources and services for County employees and their families to help them address several personal issues, including managing anxiety, stress, grief, family stressors, and interpersonal challenges. DHR offers the following resources to our workforce Countywide:

- Los Angeles County EAP

The County's EAP service features free and confidential one-on-one short-term counseling and support to employees. These services are offered by two full-time clinicians. Employees can reach an EAP clinician by calling (212) 433-7202, Monday through Friday from 7:00 a.m. to 4:30 p.m. In addition, the EAP clinicians provide workshops to departments on a number of topics, including grief support services, and consultations for supervisors on how to address issues, such as deteriorating work performance, poor morale/attitudes in the workplace and other management challenges.

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<sup>6</sup> Making The Case For The Chief Wellness Officer In America's Health Systems: A Call To Action | Health Affairs

<sup>7</sup> Meet the Wellness Officers—What They're Doing About Burnout : Neurology Today ([lww.com](http://www.com))

- *Cigna's Life Assistance Program (LAP)*  
Employees and their families can access free, anonymous, and confidential crisis intervention services and virtual counseling support, which can be obtained by video conference or by phone. Services are available 24/7 and can be reached by calling (800) 538-3543. Although the services are provided by Cigna, these services are available to all represented and non-represented employees and their families, regardless of medical plan selection.
- *Los Angeles County EAP for Military and Veterans (MVEAP)*  
This confidential free EAP program was designed specifically for County employees that are currently active duty military reservists or veterans. The program offers assessment, referral, short-term counseling, and work/life consultations to employees and their families. Developed with an understanding of the military experience and culture, the MVEAP was designed to assist in the identification and resolution of personal, family, and workplace concerns specific to veterans and to transition veterans to the civilian workforce. As with the County's EAP, these services are provided Monday through Friday from 7:00 a.m. to 4:30 p.m.
- *Departmental Wellness Coordinators*  
Wellness Coordinators are called to spearhead Countywide wellness initiatives and help employees learn about the lifestyle changes they can make to improve their overall physical and mental health. The Wellness Coordinators receive information and resources from DHR's Workplace and Community Programs Division, and they are responsible for disseminating that information to departmental employees. These duties are carried out by existing personnel in the department.
- *Special Programs*  
A few departments offer peer-support programs, including DHS, Fire, and Sheriff. Peer support programs are modeled on having a qualified peer who assists their colleague/co-worker with recovery from mental illness and/or substance abuse disorders and helps them to process traumatic events that they may have experienced in the workplace.
- *Workplace Wellbeing Ambassador Program*  
DHR partnered with DMH to create the COVID-19 Workplace Wellbeing Ambassador Program, and the individuals who serve as departmental ambassadors direct employees to the right contact person for questions about COVID-19 safety in the workplace, testing, vaccination, and a variety of other resources. Ambassadors were trained on providing information about the EAP and LAP, and other relevant wellness resources.

- Countywide Employee Wellness Initiative  
DHR also created the Countywide Employee Wellness Initiative, which brought together DHR employees from the Workplace and Community Programs, Employee Benefits, and Occupational Health/Leave Management divisions. The team defined six areas of employee wellness (physical, emotional, social, occupational, financial, and intellectual), and each month the team produces the “Did You Know” newsletter that is distributed Countywide using one of those wellness dimensions as its focal point. Newsletters have addressed topics, such as suicide awareness and prevention, lactation awareness support and awareness, and diversity and inclusion.

It should be noted that the services and programs that are denoted in this report are offered as an example of the support and resources that are offered Countywide. Departments across the County augment an array of well-being programs and services that are customized to the needs and interests of employees in each department. However, these programs and services are using existing resources and personnel that are assigned to support the programs.

Regardless of the number of services, programs, and resources Countywide, and the amount of marketing to bring these programs to the attention of our County employees, awareness about the programs and utilization of services continues to be low.

## **RECOMMENDATIONS**

Based on research and departmental feedback, we recommend:

1. Enhance Communication and Expand Existing EAP Services  
DHR has put together an Employee Wellness Team to focus on promoting awareness of all programs, including the County’s EAP (regular EAP and MVEAP) and Cigna’s LAP, and to promote all wellness programming. In addition, the CWO Group will explore developing a Request for Proposals to contract with an EAP vendor to provide comprehensive employee assistance services to County employees and their families. In addition to offering standard services such as 1:1 counseling and crisis intervention services, comprehensive EAP services would offer on financial wellness and substance abuse intervention services.

Although employees have access to the County’s existing EAP services, there are several challenges to utilizing this service. The first barrier is that the County only has two full time clinicians dedicated to over 100,000 employees. Accordingly, it can take several days to get an appointment with one of the clinicians. Another barrier is that some employees do not want to receive counseling from another County employee, and therefore, will not seek EAP services. A third barrier is that the counselors currently do not reflect the ethnic diversity of the County’s workforce. This may contribute to an employee’s reluctance to seek out services if they do not believe the counselor will understand their issues within a cultural context or provide services that are culturally sensitive. Fourth, EAP services are offered to the employee and one family member. In some cases, the problems for which an employee seeks EAP

support are often for issues outside of the workplace, involving family members that could also benefit from counseling. An external EAP service that is contracted out could address all these barriers. As part of this effort, a robust metrics program should also be implemented to monitor utilization and effectiveness of overcoming the aforementioned barriers.

It should also be noted that there are specialty EAP providers that have a specific focus for first-responders (i.e., healthcare personnel in trauma or emergency room settings, paramedics), as well as specialty providers for Fire personnel, employees in the Medical Examiner-Coroner, law enforcement, and social workers, among others. Offering specialized providers for those serving in these jobs would be a great benefit.

## 2. Expand Dedicated Wellness Resources

During the focus groups, several participants cited having designated wellness places (break rooms, workout rooms, etc.) in the workplace. We recommend exploring how this can be replicated in other departments as those individuals in the workforce who were able to work remotely now must adjust to physically reporting to their worksite. Where feasible, these wellness rooms should be separate from public or private rooms, or from rooms which are used for other purposes (i.e., lactation rooms). These wellness areas can be used for employees to take a break, meditate, or recover from a stressful encounter with clients without distraction. Additionally, we recommend expanding upon DHRs Countywide Fitness Challenge program that includes rewards for employee who participate in wellness activities or update their personal biometrics.

## 3. Create Wellness Positions Based on Departmental Needs

Departments expressed different organizational and employee needs. It was very clear that departments have vastly different workforce settings and need to be able to tailor wellness programs appropriately and comprehensively. For instance, some departments may need to hire someone with a strategic focus, other departments may need a person that is able to create and implement programmatic services. Therefore, it is important to build flexible staffing models for departments.

The top priority in creating wellness positions should be for our front facing departments. CEO is currently working with the Fire Department on a dedicated wellness organization within the department. All other departments with first responder employees should be prioritized as well.

After implementing the changes to the EAP services and evaluating their effectiveness, the CWO Group will explore specific staffing options for each department. It should be expected that all CWOs regardless of their focus (and associated wellbeing workers) would be connected to a centralized and Countywide initiative to synergize offerings, share best practices, and reduce redundancies.



## **NEXT STEPS**

CEO, DHR, and AHI will continue to improve communication as needed on existing Countywide wellness programs; explore augmenting and expanding the capacity and comprehensive offerings of EAP services and crisis intervention through an external contract; measure utilization and effectiveness of the enhancements; engage and maximize the use of existing Wellness Coordinators across the County; learn how we can extrapolate successful initiatives like wellness rooms to other departments; and develop staffing options.