

Risk Management B-G-023

Board of Health Policy

1.0 Policy Statement

This policy provides a framework for the North Bay Parry Sound District Health Unit (Health Unit) to proactively manage and analyze risk, and accomplish its mission ‘to improve the health of our communities through preparation, prevention, promotion and protection’. It fulfills the requirement in the Ontario Public Health Standards: Requirements for Program, Services, and Accountability (Standards) for a Risk Management Process by building increased awareness and a shared responsibility for risk management at all levels of the organization through an Integrated Risk Management process that includes:

- clearly defined accountabilities and responsibilities
- framework to analyze risk
- risk register of key organizational risks
- Board reporting schedule

2.0 Purpose

This policy describes the framework for organization-wide management of risk within the Health Unit and sets out a consistent approach to risk assessment, management, and mitigation activities.

3.0 Scope / Responsibility

The Board of Health (Board) oversees the Integrated Risk Management process by ensuring appropriate systems and processes are in place to identify and manage organization-wide risk. The Board is alert for organizational dysfunctional behaviour that can lead to excessive risk taking or insufficient risk taking and provides input to the Executive Team regarding critical risk issues. The Board also provides direction on the extent and categories of risk that it regards as acceptable risk tolerance and defines the scope and frequency of risk management reporting. The Board, through the Medical Officer of Health/Executive Officer, ensures that this policy is implemented.

The Medical Officer of Health/Executive Officer ensures the Integrated Risk Management process supports the risk management philosophy of open communication, knowledge sharing, best practice and transparent risk reporting in keeping with the Health Unit’s value of “Transparency”. The Medical Officer of Health/Executive Officer also ensures that management implements and is accountable for the Integrated Risk Management process and that an annual report is presented to the Board regarding the Health Unit’s top risks.

The Executive Team oversees the Integrated Risk Management process by assigning ownership of, developing, implementing, and monitoring risk management strategies. The Executive Team ensures that policies are carried out and processes are executed in accordance with objectives and identified risk tolerances, as well as actively embracing an integrated approach to risk management, sharing risk information transparently throughout the agency and promoting a culture where risk management permeates all levels of the organization.

Management and staff have an inherent responsibility to identify, assess, manage, and communicate risks associated with their work to assist in developing and implementing risk management plans and actions. Management and staff are responsible for reporting all identified risks to the Executive Team who ensure that no person who reports a risk in good faith is subjected to any form of retribution, retaliation or reprisal.

4.0 Procedure

4.1 Definitions

Integrated Risk Management Process: includes the systematic application of management policies, procedures and practices to the tasks of establishing the context, identifying, assessing, managing, evaluating, documenting, monitoring/re-evaluating, and reporting risk.

Residual Risk: the exposure to loss remaining after each known risk has been countered with risk mitigation strategies or eliminated completely.

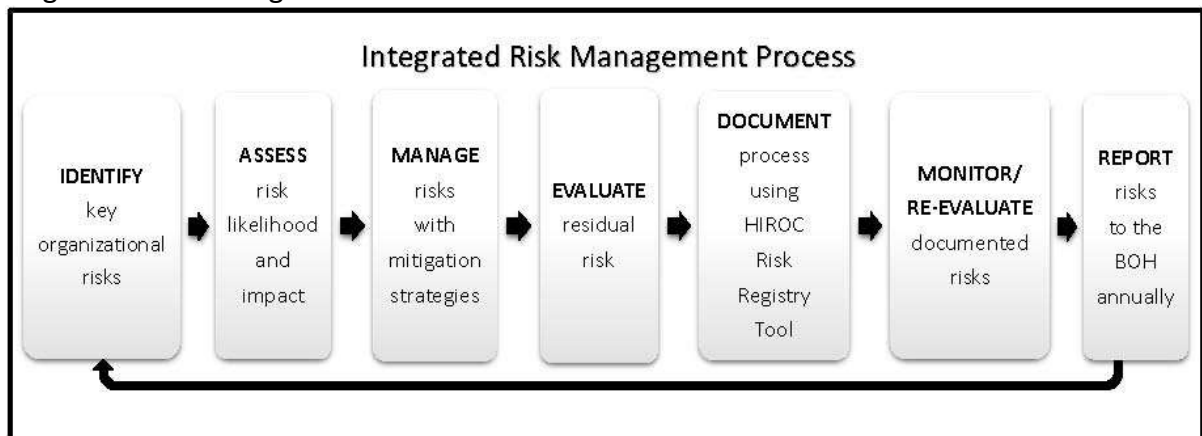
Risk: any threat or potential barrier to opportunities; anything that affects an organization’s ability to meet its objectives and preserve its reputation; risk is measured in terms of consequences and likelihood.

Risk Management: includes the culture, processes, and structure that are directed towards the effective management of potential opportunities and adverse effects.

Risk Mitigation: a strategy that reduces the extent of exposure to a risk or the likelihood of its occurrence.

4.2 Integrated Risk Management Process

In combination with the [Standards](#) and the Ministry of Health and Long-Term Care Accountability Agreements, the Executive Team (with the assistance of other management and staff) follow the steps in the Integrated Risk Management Process below to assess and document risk within the Health Unit:



The following categories of risk are considered in the Integrated Risk Management process and described in more detail in the Association of Local Public Health Agencies (ALPHA) Risk Management Strategy & Process Toolkit chart: Financial, Operational/Service Delivery, Human Resources, Environmental, Information/Knowledge, Strategic/Policy, Legal/Compliance, Technology, Governance/Organizational, Privacy, Stakeholder/Public Perception, Security, Equity, and Political.

The Health Unit uses the following strategies to manage risk:

- a) Avoid risk by not engaging in risky activities.
- b) Transfer the risk by sharing it with another entity (i.e. insurance).
- c) Mitigate risk by developing control activities to reduce the likelihood or severity of the potential consequences.
- d) Accept the risk as unlikely or not likely to cause serious harm to the organization.
- e) Monitor the cost of managing a risk to ensure it is compatible with the potential consequences.

5.0 Records Retention

All records relating to this Policy are retained in accordance with the Records Retention and Management work instruction ([WI-HU-108](#)).

6.0 References

Internal References

- a) North Bay Parry Sound District Health Unit, [Board of Health Bylaws](#).
- b) [Quality Assurance Manual](#) (1999).
- c) Records Retention and Management – [WI-HU-108](#)
- d) Risk Management - [WI-HU-165](#)

External References

- a) *Health Protection and Promotion Act*, R.S.O., 1990, c H.7. [Ontario E-Laws Website](#)
- b) *Municipal Act*, 2001, S.O. 2001, c. 25. [Ontario E-Laws Website](#)
- c) [Ontario Public Health Standards: Requirements for Program, Services, and Accountability](#)
- d) Association of Local Public Health Agencies (aLPHa) Risk Management Strategy & Process Toolkit chart
- e) *HIROC IRM Policy Template*
- f) *Kingston, Frontenac and Lennox & Addington Public Health Policy 1.20 Risk Management*
- g) Lindsay, H. *20 Questions Directors of Not-For-Profit Organizations Should Ask About Risk*. Toronto. Canadian Institute of Chartered Accountants. (2009)

7.0 Summary of Revisions

2018-05-30 – Minor revisions to sections 1.0, 3., and 4.2, including updated links to the new Standards.

8.0 Board Policy Development Details

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