

# RISK MANAGEMENT PLAN

2021

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It's My Life Kamloops Society - Risk Management Plan

*Revised March 2018*

*Reviewed April 2019*

*Revised May 2020*

*Revised March 2021*

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## **PURPOSE**

The Purpose of the risk management plan is to ensure the protection and interests of It's My Life Kamloops Society (IMLKS) and the persons served, employees, members, contractors, and community. The plan is intended to increase everyone's awareness and participation in helping to identify ways and strategies to reduce the probability or the impact of risks while ensuring that IMLKS is successful in achieving its mission and vision. The Risk Management Plan defines how risks associated

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with IMLKS will be identified, analyzed and managed. It outlines how risk management activities will be performed, recorded, and monitored throughout the lifecycle of the organization.

***The overall goals of the Risk Management Plan are:***

- Prevention of harmful events
- Protection of the people we serve
- Protection of our staff and contractors
- Protection of IMLKS's reputation and assets
- Ensure continuity of IMLKS

***Definition of Risk Management*** *A risk is an event or condition that, if it occurs, could have a positive or negative effect on IMLKS's objectives. Risk management is the process of identification, assessment, prioritization, and reporting risks. Followed by coordinated and economical application of resources to minimize, monitor, respond to and control the probability and/or impact of unfortunate events or to maximize the realization of opportunities. The Risk Management Plan provides the opportunity to make responsible choices about how IMLKS conducts the business and responds to unexpected events. The basic principles of risk management are to consider people first, be practical and use common sense.*

## **OVERVIEW OF IMLKS'S APPROACH TO RISK**

It's My Life Kamloops Society is operating in an environment that includes community, regional and provincial context. There are currently shifts in government to a community based governance model and there have been reductions in financial commitments from the funding Ministries for services provided. To minimize risk IMLKS is regulated by external authorities including WorkSafe BC, Community Living British Columbia guidelines and contract requirements, Employment Standards Act, and CARF Accreditations Standards. Internally IMLKS has created its own policies and procedures to ensure we are doing everything possible to keep everyone as safe as possible. As well as there is a team of Service Coordinators lead by the Executive Director who reports to its Board of Directors. Ultimately, it is IMLKS's Executive Director and Board of Directors who are responsible for accepting the Risk Management Plan, defining level of risk to be tolerated, and ways to identify/reduce the probability/impact of risk. The IMLKS Directors are aware of the risk management responsibilities and delegates the operational authority and responsibility to the Executive Director.

## **RESPONSIBILITY FOR RISK MANAGEMENT PLAN**

The Executive Director is delegated the responsibility to develop, manage and report on the plan. The Executive Director may involve additional individuals in the development and implementation of the plan. The Director shall report to the Board of Directors at least annually on the Risk Management Plan performance and results.

## **RISK MANAGEMENT METHODS AND STRATEGIES TO ADDRESS AREAS OF RISK**

By identifying risks and creating a plan to offset the identified risks, IMLKS minimizes the cost and potential negative impacts to the organization, individuals receiving services, families, members, volunteers, community, employees, and services. Providing effective training, appropriate equipment/tools, implementing policies and procedures, supervising staff, clearly stating expectations, and all internal and external controls contributing to minimizing risk at IMLKS. The plan also provides a foundation for effective and efficient organizational planning. The following are some examples of techniques to use in managing risk.

- **Avoidance:** discontinue the activity or do not offer the service

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- **Modification:** change the activities to reduce the level of risk to an acceptable level, e.g. implementing policies, procedures, and training.
- **Retention:** accept all or part of the risk and prepare for potential consequences by accepting deductible costs or self-insuring.
- **Sharing:** sharing responsibility with another organization, or outsourcing the service to another business. Transfer the risk by making another party responsible for the risk by purchasing insurance.

Risk is a part of everyday operations. IMLKS continues to make efforts of unpaid, personal networks and community development work a priority in order to ensure that there are a diverse group of people in the life of every individual we support. IMLKS believes that this will help decrease the risk and increase the likelihood individuals served are safe and secure whether at home or in community and have a quality of life they deem fulfilling.

#### **COMMUNICATING AND REPORTING RESULTS**

The risk management plan should be communicated throughout IMLKS so staff, individuals served and all other stakeholders involved in IMLKS can participate in reducing or removing risks. The performance and results of the Risk Management Plan shall be reported to its Board of Directors at least annually.

In consultation with IMLKS's Board of Directors and Executive Director makes adjustments and renews the risk management plan as necessary.

Area of Risk	Description of Potential Risk	Frequency (Probability )	Severity (Impact)	Strategy/Method used to Address/Manage the Risk	Improvements Needed/actions taken to reduce risk.	Dates and People Responsible for Implementation
		Scale of 1 – 5 1=VERY LOW, 5=VERY HIGH				
<b>PEOPLE</b>						
Individuals and Families Served	Accidents and injuries	Low	High	<ul style="list-style-type: none"> <li>▪ Ensure individuals have the equipment &amp; tools needed and are well prepared for the activity a risk vs. benefit process may be used with individuals in order to ensure that fear of risk does not limit their opportunity to be part of their community and to make choices.</li> <li>▪ Implement relevant policies and procedures</li> <li>▪ Provide safety orientation and training</li> <li>▪ Report injuries and accidents and review reports to see trends</li> <li>1. Develop specific interventions in Individual Service Plans (ISP) <ul style="list-style-type: none"> <li>▪ Plans, care plans, and health care protocols</li> <li>▪ implement Health &amp; Safety Program and Health and Safety Committee</li> <li>▪ Ensure the individual has the skills to maintain their safety in community i.e. traffic safety, know how to get help, can find their way home and know the address and phone no. , etc. or carries a card on them with the pertinent information</li> </ul> </li> <li>▪ IMLKS provides orientation and training to all employees, both general organizational orientation and orientation specifically about the individuals we serve, particularly with regards to safety concerns. We use an</li> </ul>	<p>All Service Coordinators complete Behavioural Support Plan training</p> <p>Disseminate learned information to Direct Support Staff</p> <p>Consider key staff to complete Behavioural Support Plan training when it is next offered</p> <p><b>Service Coordinators and ED</b></p>	<p>December 31st 2017 (All Service Coordinators) <b>Completed</b> Ongoing</p> <p>With new hires, and as needed (All Service Coordinators)</p> <p>TBA 2017-2018. Executive Director <b>Completed 2018</b></p> <p><b>Completed</b> 3 day workshop in Nov 2015 and Nov 2016.</p> <p>One Service Coordinator completed a 3 day workshop with New Horizons in March 2021. ED, HR and 2 other SC are registered to take</p>

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<p>Individuals and Families Served Continued ....</p>	<p>Accidents and injuries continued...</p>			<ul style="list-style-type: none"> <li>▪ Orientation Checklist. Employees are required to follow policies and procedures, health care protocols, behavior protocols, safety plans and any and all other care plans. The Critical Incident Policy require staff to report all incidences and injuries. When staff do not follow policy, procedure and protocols, management responds in a manner to correct the mistake.</li> <li>▪ Employment for Individuals served and in</li> <li>▪ Each Service Coordinator is responsible for completing an Annual Critical Incident Report (see. Annual Critical Incident Review Policy) and prepare a summary and analysis with recommendations to the Director and the IMLKS's Board of Directors.</li> <li>▪ Individual Service Planning is done bi-annually with individuals and their networks in order to support their quality of life and personal goals. Staff support individuals to set goals assisting individuals to manage their environments to reduce any identified risks to their health and safety.</li> <li>▪ Behavior and Safety Plans are developed and reviewed annually to support challenging behaviors. Service Coordinators ensure there is planning in advance when going out, in order to consider all possible risks.</li> <li>▪ Health Care Plans created by the nurse from HSCL are updated annually for every Individual served that requires one. Training is also provided by HSCL for delegation on task.</li> </ul>		<p>the course in April 2021.</p>
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<p>Individuals and Families Served Continued ....</p>	<p>Accidents and injuries continued...</p>					
	<p>Missing Persons</p>	<p>Very Low</p>	<p>High</p>	<ul style="list-style-type: none"> <li>▪ Implement relevant policies and procedures</li> <li>▪ IMLKS staff exercise caution and diligence when responsible for individuals. All individuals living in a 24 hour support model, supported in community with a CSW. Every effort is made to give individuals severed the tools needed to make decisions which keep them safe and maintain their well-being. Risks are evaluated in order to promote learning and develop new skills. Monitoring and intervention are done to a level designed to maintain the health and safety of the individual. Where risk is involved, a balance of risk vs. benefits, with</li> </ul>	<p>Ensure adult clients carry current identification, emergency contact information and medical alert jewellery if applicable.</p>	<p>To be completed April 30th 2018 All Service Coordinators) <b>Completed</b></p>



				consideration to the individual's personal autonomy, has to be weighed and appropriate safeguards put in place.		
Individuals and Families served continued...	Abuse and Neglect	High	High	<ul style="list-style-type: none"> <li>▪ Implement relevant policies and procedures. All staff are required to read and sign off on the Abuse and Neglect Policy during hire orientation and review annually.</li> <li>▪ Provide orientation for individuals, families and support networks</li> <li>▪ Report any mistreatment, abuse or neglect.</li> <li>▪ Allegations are taken very seriously and acted upon immediately. Early reporting and prevention training with staff and self-advocates is important to continue providing to employees</li> <li>▪ Training for self-advocates is also critical in order to increase their ability to self-report and reduce their vulnerability. We encourage individuals to make their own choices and decisions in order to improve their ability to say "no". Training was provided by a self-advocate advisor with regards to individual rights, responsibilities and safeguards annually.</li> </ul> <p><i>David Hingsberger has taught us that even those who cannot speak are able to tell us when something is amiss.</i></p>	<p>Increase training regarding rights of people served</p> <p>Disseminate information regarding rights of people served training with Direct Support Staff</p>	<p>April 2016 meeting with Self Advocates Advisory Group. <b>COMPLETED</b></p> <p>December 2016 workshop with Self Advocates Advisory Group (Service Coordinators, Direct Support and Persons Served).</p> <p>Upon hire, annually at performance review and when issues arise. (Service Coordinators to employees and contractors)</p>

Individuals and Families served continued...	Medication errors	Moderate	High	<ul style="list-style-type: none"> <li>Employees are required to strictly follow policy and procedures for medication administration. Employees are trained to administer medication safely and reviews are done annually. Employees are required by policy, to report all errors. Management responds to errors in a consistent, fair manner that ensures compliance with policy. Failure to report is also followed up with appropriate disciplinary action.</li> </ul>	<p>Medication training including preventing and managing medication errors</p> <p>Review med errors as they occur. Review training with Direct Staff as needed</p>	<p>Upon hire of each new staff, annually and as needed. (Service Coordinators and Direct Support Staff).</p> <p>As occurrences happen. (Service Coordinators and Direct Support Staff).</p>
	Infectious Disease Plan	High	Very High	<ul style="list-style-type: none"> <li>IMLKS will develop a Business Continuity Plan in the event of a pandemic event that details how we will respond. This plan will assist employees to respond in a calm and reasoned manner to such an event and help to ensure the safety of the individuals we support. Employees are required to review and update the plan annually.</li> <li></li> </ul>	<p>Complete a plan and update annually or as needed to include new infectious diseases</p> <p>Ensure Direct Support Staff are aware of appropriate policies and implementing procedures.</p>	<p>June 2018 <b>Updated 2019</b> <b>Updated to include Pandemics May 2020</b></p> <p>(Service Coordinators and Executive Director). To be reviewed and updated annually by: November 2018.</p> <p>Upon hire of each new staff / contractor, reviewed annually at performance evaluation and as needed. (Service Coordinators and Direct Support Staff</p>
	Accidents and Injuries	Moderate	High	<ul style="list-style-type: none"> <li>Implement relevant policies and procedures. Service Coordinators are diligent in making sure they are followed.</li> </ul>	<p>Ensure each staff has First Aid Training. Update as needed.</p>	<p>Proof upon hire of new staff and contractors renewed every 3 years to stay current. (All</p>

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				<ul style="list-style-type: none"> <li>▪ Provide safety orientation and training (including all care plans for each individual served).</li> <li>▪ All injuries are reported, investigated and reviewed for trends by the Service Coordinators, Director, and the H&amp;S Committee and recommendations are made. All accidents or injuries are also reported to appropriate governing bodies when applicable such as WCB and CLBC and followed up as they deem necessary (see relevant policies)</li> <li>▪ Insure with WCB coverage, Employment Insurance, Health &amp; Welfare Benefits</li> </ul> <p>Implement H&amp;S Committee, conduct regular inspections &amp; meetings.</p>	<p>Utilize expertise of First Aid attendants and Health and Safety Committee</p> <p>Review incidents as they occur with HS committee following proper policies.</p> <p>Review policies annually.</p>	<p>Service Coordinators staffs and contractors).</p> <p>Meetings monthly. (Safety Committee)</p> <p>As incidents occur. (All staff, Service Coordinators, Executive Director and Safety committee).</p> <p>Annually at applicable review date. (HR, Service Coordinators, Executive Director and Board of Directors)</p>
Employees	Theft/Fraud	Low	Moderate	<ul style="list-style-type: none"> <li>▪ Implement relevant policies and procedures</li> <li>▪ Provide initial hire/ongoing screening, orientation and training.</li> <li>▪ Internal controls and audits</li> <li>▪ Insurance coverage</li> <li>▪</li> </ul>	<p>Ensure all new hires complete a criminal record check and review IMLKS's policies</p> <p>Utilize petty cash controls (review receipts and utilize amount cap-offs) and monitor cell phone/laptop use</p> <p>Ensure appropriate insurance is in place.</p>	<p>Upon hire and annually review at performance evaluation or contract renewal. (Service Coordinators, contractors and staff).</p> <p>Bi-weekly when petty cash is submitted with payroll. (Service Coordinators)</p>

					External accountant comments ( Notice to Reader) completed annually.	Review October annually. (Executive Director)  Next review date: April m2021 (Stone Hazel ) completed.
<i>*Individuals &amp; Families Served</i>	Staff Turnover*	Moderate	High	<ul style="list-style-type: none"> <li>▪ Recruitment and retention practices. All Service Coordinators are trained and involved along with the person served and their family in the hiring process.</li> <li>▪ Employee recognition through staff and CIW meetings. Reviewing employee growth through performance reviews.</li> <li>▪ Wage and benefit improvements</li> <li>▪ Implement succession planning</li> <li>▪ Increase in natural unpaid supports</li> <li>▪ Review of employee exit interviews by Director with involved Service Coordinator. Exploring changes with consideration to feedback when necessary.</li> <li>▪ Extensive efforts made to increase opportunities for employees to have a voice and to make greater contributions in the workplace</li> <li>▪ Current COVID -19 Pandemic created concerns and fears, resulting in challenges with recruitment</li> </ul>	<p>Exit interviews and track trends. Communicating this information to appropriate people</p> <p>Seek feedback from Direct Support Staff in monthly staff meetings. Share information with Management Team</p> <p>Review any concerns in weekly management meetings</p> <p>Educate and ensure we have all the PPE needed and support staff with their fears</p>	<p>When employees leave IMLKS (HR Coordinator, Direct Support Staff, Service Coordinators and Executive Director).</p> <p>Completed on a monthly basis or more frequently as needed. (Service Coordinators, Direct Support Staff, Executive Director, HR Coordinator)</p> <p>Weekly (Service Coordinators and executive Director)</p> <p>Weekly Meeting with SC, ED and staff</p>
Employees continued...				Criteria for hiring has shifted emphasis from education to values based hiring and ability to make good decisions	Create Wellness plan and support Direct	Expected completion

				Support Staff in Self Care  Premeditate any potential problems with Direct Support Staff and people served	December 2017(Service Coordinators and HR Coordinator) <b>completed</b>  Have at least monthly meetings with staff and be in contact with on a daily basis or as needed. (Service Coordinators and Executive Director).
Violations of Employee Practices	Low	Moderate	<ul style="list-style-type: none"> <li>▪ Implement relevant policies and procedures</li> <li>▪ Provide initial hire/ongoing screening, orientation and training.</li> <li>▪ Injury and reporting reviews/investigations</li> <li>▪ Performance reviews and feedback.</li> <li>▪ Code of ethics and values statement</li> <li>▪ Complaints and concerns procedure reviews</li> <li>▪ Following good human rights and labour relations practices.</li> <li>▪ Extensive efforts made to increase opportunities for employees to have a voice and to make a greater contributions in the workplace</li> <li>▪ Criteria for hiring has shifted emphasis from education to values based hiring and ability to make good decisions</li> </ul>	Ensure staff share the same values as IMLKS          Offer value-based training and incorporate into daily practise.	At initial hire through values/behavioural based interview. (HR Coordinator, Service Coordinators, Executive Director).  Semi-annually April 2017 <b>COMPLETED.</b> October 2017 <b>COMPLETED.</b> April 2017 <b>COMPLETED.</b> October 2015. (Janet Klees instructor. Service Coordinators, Executive Director and Direct Service Staff as participants) November 2014. <b>COMPLETED.</b>

					<p>November 2015. (Michael Kendrick, Service Coordinators, and Executive Director).</p> <p>Discussed in monthly staff meetings. Discussed in weekly management meetings. (Service Coordinators, Director, Direct Support Staff).</p>
<p>Criminal Activity, Fraud/Theft, Legal Requirements, Liability, Errors and Omissions</p>	<p>Very Low</p>	<p>High</p>	<ul style="list-style-type: none"> <li>▪ Liability Insurance is up to date and appropriate</li> <li>▪ Annual financial review</li> <li>▪ General liability coverage is in place for contracts and for activities outside of contracts.</li> <li>▪ Implement policies and procedures</li> <li>▪ External governing bodies</li> </ul>	<p>Ensure new Board Members and executive Director complete a criminal record check and review IMLKS's policies.</p> <p>External audits completed annually</p> <p>Liability and Insurance reviewed annually.</p>	<p>Liability Insurance renewed in March 2017. <b>Completed</b> Liability Insurance renewed March 2018-03-14 <b>completed</b> Liability Insurance renewed March 2019- Liability insurance renewed March 2020 Renewed March 2021</p> <p>CRC – New Board Members and hire of new Executive Director. every 3 years thereafter. Policies annually.</p>

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	Loss/reduction in funding to provide supports, Loss or cancellation of contracts.	low	High	<ul style="list-style-type: none"> <li>▪ Clear expectations upon hire</li> <li>▪ Have employees support more than one person, keeping in mind it how it impacts the overall life of the individuals served</li> <li>▪ Continue to work with CLBC both locally and provincially.</li> <li>▪ Be creative with funds received</li> <li>▪ Continue to build individuals personal support networks and make natural unpaid relationships.</li> <li>▪ Continue innovation and best practice partnership through IIDL &amp; IIMHL sister agency network. Maintain membership in BCSCCL and support there advocacy initiatives.</li> <li>▪ Tell stories, continue to show the positive impact on people's lives.</li> </ul>	<p>Completing Accreditation to ensure operating according to best practices</p> <p>Ensure all policies are adhered to by staff.</p> <p>Ensure all staff work with integrity and properly represent IMLKS</p> <p>Continue positive relationship with CLBC and community at large</p>	<p>CARF Accreditation: April 28-30<sup>th</sup> 2-21</p> <p>Review with all new hires, annually at performance review and as needed thereafter (HR Coordinator, Service Coordinators, and Direct Support Staff).</p> <p>Review expectations with all new hires annually at performance review and as needed thereafter (HR Coordinator, Service Coordinators, and Direct Support Staff).</p> <p>Each interaction with CLBC and other agencies and community. ONGOING. (All employees, contractors and Board Members).</p>
Community members	<b>Description of Potential Risk</b>	<b>Frequency (Probability)</b>	<b>Severity (Impact)</b>	<ul style="list-style-type: none"> <li>▪ <b>Strategy/Method used to Address/Manage the Risk</b></li> </ul>	<b>Improvements Needed</b>	<b>Who will do it &amp; by when</b>

Area of Risk	Description of Potential Risk	Severity (Impact)	Severity (Impact)	Strategy/Method used to Address/Manage the Risk	Improvements Needed	Responsible Party and Frequency
	Damage, Natural Hazards/disasters, Vandalism Damage, Accidents and Theft	Low  Very Low	Moderate		<ul style="list-style-type: none"> <li>▪ Insurance and deductibles are up to date and appropriate</li> <li>▪ Implement policies and procedures</li> <li>▪ Regular external inspections are completed (building manager and fire department).</li> <li>▪ Support individuals in their own homes to make sure they are safe and secure. Support them in purchasing renters insurance.</li> <li>▪ Monthly safety inspections are completed by employees and turned into Service Coordinators.</li> </ul>	. (Executive Director, and Service Coordinators)  March of each year,  Review all insurance annually.



					<p>The Health and Safety Committee audits the inspections as needed.</p> <ul style="list-style-type: none"> <li>▪ Implement relevant policies and procedures</li> <li>▪ Staff are trained and orientated to individual support needs in vehicles through support/care plans (all applicable).</li> <li>▪ Making sure employee have or acquire the proper insurance (Business use, 3 million 3<sup>rd</sup> party liability) for their vehicle before using them for work purposes.</li> <li>▪ Promote the use of city transit, walking and or biking. When necessary, appropriate</li> </ul>	
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					<p>and affordable the use of Handy Dart or Taxi's is also an option.</p> <ul style="list-style-type: none"> <li>▪ Yearly Drivers Abstracts are mandatory for all employees using their vehicles for work</li> </ul> <p>All employees are required to have and maintain a proper driver's licence (current copy on in employee files).</p>	
<b>PROPERTY AND ASSETS Buildings</b>	<p>Damage &amp; Theft Security, Information Management , Privacy and Confidentiality, Theft &amp; Damage</p>	Low	Low	<ul style="list-style-type: none"> <li>▪ Insurance and deductibles are up to date and appropriate</li> <li>▪ Implement relevant policies and procedures</li> <li>▪ Inventories of individual's belongings are maintained for IMLKS and each individual served (if applicable).</li> <li>▪ Individuals are sometimes required to repay damage done due to loss of control or carelessness in order to build in the consequences to their actions for learning purposes.</li> </ul> <p>Accept second hand furniture, supplies and equipment donations.</p> <ul style="list-style-type: none"> <li>▪ Low</li> </ul>	<p>Track all new purchases.</p> <ul style="list-style-type: none"> <li>▪ Password protected (ShareVision, computers,</li> <li>▪ System administrator, usage monitored</li> <li>▪ Implement relevant policies, procedures</li> </ul>	<p>Done as required for new purchases on ShareVision. (Executive Director, Service Coordinators, and employees and contractors). Track laptops</p> <p>Ensure policies and procedures regarding confidentiality are</p>

						<ul style="list-style-type: none"> <li>and internal controls.</li> <li>▪ Back up practices (nightly through Sharevision)</li> <li>▪ Insurance is up to date and appropriate</li> <li>▪ Training is up to date and appropriate</li> <li>▪ Anti-virus software installed and run on a regular basis</li> </ul>	<p>known by all staff and adhered to.</p> <p>Streamline all information concerning people being served to ShareVision</p>
<b>PROPERTY AND ASSETS</b> Buildings Vehicles Furnishings, Supplies & Equipment	Damage & Theft Security, Information Management, Privacy and Confidentiality, Theft & Damage	<b>Low</b>	Low	<ul style="list-style-type: none"> <li>▪ Insurance and deductibles are up to date and appropriate</li> <li>▪ Implement relevant policies and procedures</li> <li>▪ Inventories of individual's belongings are maintained for IMLKS and each individual served (if applicable).</li> <li>▪ Individuals are sometimes required to repay damage done due to loss of control or carelessness in order to build in the consequences to their actions for learning purposes.</li> </ul> <p>Accept second hand furniture, supplies and equipment donations.</p> <p style="text-align: center;">Low</p>	Track all new purchases. <ul style="list-style-type: none"> <li>▪ Password protected (ShareVision, computers, cell phones)</li> <li>▪ System administrator, usage monitored</li> </ul>	<b>Technology Plan</b>	

				<ul style="list-style-type: none"> <li>▪ Implement relevant policies, procedures and internal controls.</li> <li>▪ Back up practices (nightly through Sharevision)</li> <li>▪ Insurance is up to date and appropriate</li> <li>▪ Training is up to date and appropriate</li> <li>▪ Anti-virus software installed and run on a regular basis</li> </ul> <p>Technology Plan</p>	
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Area of Risk	Description of Potential Risk	Frequency (Probability)	Severity (Impact)	Strategy/Method used to Address/Manage the Risk	Improvements Needed	Who will do it & by when
		Scale of 1 - 5 1=VERY LOW, 5=VERY HIGH				
<b>FINANCIAL</b>						
Financial Practice	Fraud, Loss of Funding, Legal Requirements to record, report and audit, Investment losses, Transfer of funds to individuals, families and other agencies	Low	Very High	<ul style="list-style-type: none"> <li>▪ Implement relevant policies and procedure</li> <li>▪ Insurance is up to date and appropriate</li> <li>▪ Annual external review by recognized firm</li> <li>▪ Letter of understanding outlining deliverable, funding details, delineation of responsibilities including WCB, Revenue Canada and employment standards expectations.</li> <li>▪ Director and Bookkeeper or Accountant review financial position monthly</li> <li>▪ Every effort is made to maintain positive relationship with funders and families</li> </ul>	<p>Insurance is reviewed annually</p> <p>Complete external reviews completed annually.</p>	<p>March every year (Executive Director). <b>Completed.</b></p> <p>Next date: March 2019 <b>Completed</b></p> <p>Next date: March 2020 <b>Completed</b></p> <p><b>March 2021-Completed</b></p>
Grants	Loss of income	Low	Low	<ul style="list-style-type: none"> <li>▪ Fulfill funders expectations</li> <li>▪ Encourage and maintain strong membership base</li> <li>▪ Explore social enterprise opportunities</li> </ul>	Explore grants as needed.	As needed (Executive Director, Board of Directors and HR).
				▪		

Area of Risk	Description of Potential Risk	Frequency (Probability)	Severity (Impact)	Strategy/Method used to Address/Manage the Risk	Improvements Needed	Who will do it & by when
		Scale of 1 - 5 1=VERY LOW, 5=VERY HIGH				
<b>ORGANIZATION</b>						
Reputation and Profile	Negative Media Coverage, Loss of Credibility	Moderate	Very High	<ul style="list-style-type: none"> <li>▪ Implement relevant policies and procedures</li> <li>▪ Avoid activities that threaten IMLKSs profile or that may cause a negative impact on their reputation</li> <li>▪ Values, Vision, and Philosophy statement should be adhered to</li> <li>▪ Make decisions strategically, to enhance visibility and positive reputation in the local community as well as in the larger community living communities.</li> </ul>	<p>Complete Accreditation.</p> <p>Explore other agencies best practices and consider adopting some.</p> <p>Continue to engage positively with community and other agencies.</p>	<p>Accreditation: April 2021 (ED and HR)</p> <p>Upon interactions with other agencies. Continual (Executive Director and Service Coordinators and HR)</p> <p>Every interaction with other agencies and the community. (Executive Director, Board of Directors, Direct Support Staff and HR and Service Coordinators)</p>

					<p>Use Strategic Planning process to stay on track.</p> <p>Ensure Executive Director is the only spokesperson.</p>	<p>In accordance with dates in Strategic Plan. Review Annually. Next review date: June 2019-  <b>Completed</b>  Next review date: June 2020  <b>completed</b>  Next review date: June 2021</p> <p>Next Review Date June 2021 (Executive Director, Board of Directors Service Coordinators, and all stakeholders)</p> <p>As needed.</p>
Competition	Loss of Contract to Competition	Very Low	Moderate	<ul style="list-style-type: none"> <li>Diversifying contracts, looking at new areas of work, and/or amalgamation with other organizations.</li> </ul>	Not a concern at this time. We are being sought out by many families for support. Keep an eye on the trends and when the need arises explore other areas of work.	Executive Director – Ongoing as needed.

Unexpected Staff Loss	If numerous staff leave IMLKS at the same time, an individual(s) may experience disruption in their support, leaving Service Coordinator and other key staff overworked.	Moderate	High	<ul style="list-style-type: none"> <li>Clear expectation and good relationships upheld with each staff.</li> <li>Cross training key staff and Service Coordinators</li> </ul>	<p>Train more casual staff and cross train current employees to comprise a longer float/casual on call list.</p> <p>Keep track of staff turnover rates and reasons. (See Staff Turnover).</p>	cross-training. (HR Coordinator and Service Coordinators). <b>Completed</b> March 2017 See Staff Turnover rate/reasons through Exit Interviews and HR report (HR Coordinator and Executive Director)
Loss of Business due to: fire or other disaster, Funding	Fire damage	Low	High	<ul style="list-style-type: none"> <li>Office building is inspected annually by the fire department and regularly by the landlord.</li> <li>Information can be accessed through the web such as email and ShareVision (individuals)</li> </ul>	Ensure all files are backed up externally	Ongoing – weekly backups, scan paper documents to ShareVision as needed and acquired (Service Coordinators, Executive Director, HR Coordinator and employees and contractors).
	Cancellation or loss of funding	Very Low	Very High	<ul style="list-style-type: none"> <li>Maintain good relationships with funders, families and individuals served</li> <li>Implement and adhere to relevant policies and procedures.</li> <li>Fulfill funders guidelines/policies for support and reporting expectations</li> </ul>	Review insurance annually	Next Annually in March



					Complete Accreditation	(Executive Director) <b>Completed March 2018</b> Accreditation: <b>April 2021</b> Survey for Accreditation- <b>April 18<sup>th</sup> 19<sup>th</sup> 2018</b>  (Senior Service Coordinator)
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**RISK MANAGEMENT FOLLOW UP**

The frequency and probability of identified risks at IMLKS ranges from very low to very high, the severity and impact of any occurrence of the identified risks ranges from very low to very high. A summary of these identified risk rating is as follows:

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It's My Life Kamloops Society - Risk Management Plan  
*Revised March 2018*  
*Reviewed April 2019*  
*Revised May 2020*  
*Revised March 2021*

<b>RATING OF IDENTIFIED RISK</b>	<b><i>VERY LOW</i></b>	<b><i>LOW</i></b>	<b><i>MODERATE</i></b>	<b><i>HIGH</i></b>	<b><i>VERY HIGH</i></b>	<b>TOTAL</b>
<b>FREQUENCY (PROBABILITY) OF RISK</b>	4	10	6	2	0	22
<b>SEVERITY (IMPACT) OF RISK</b>	1	3	4	10	4	22