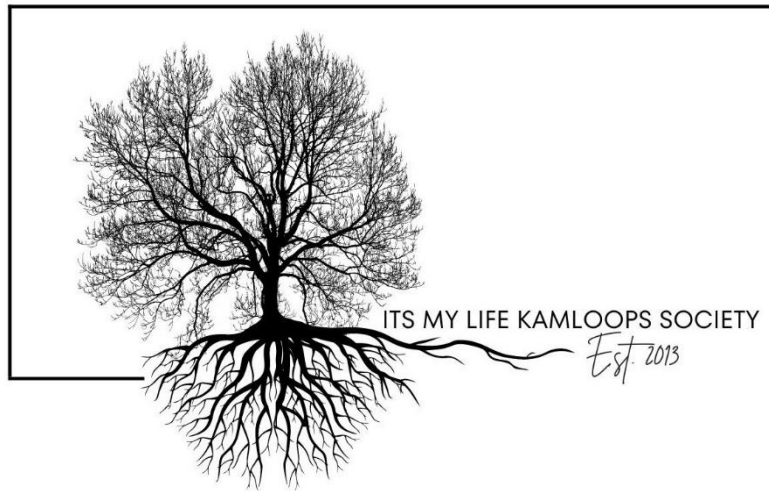


# It's My Life Kamloops Society (IMLKS)



## Risk Management Plan 2024

Updated March 2024  
Revised Feb 2024

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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, shareholders, 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 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.

## **GOALS**

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 the 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, the Employment Standards Act, and CARF Accreditation Standards. Internally, IMLKS has created its own policies and procedures to ensure we are doing everything possible to keep everyone as safe as possible.

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 Board of 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 Plans performance and results.

## **RISK MANAGEMENT METHODS & 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, shareholders, and services by: Providing effective training and appropriate equipment and tools, implementing policies and procedures, supervising staff, clearly stating expectations, and all of the 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.
- **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 that individuals served are safe and secure, whether at home or in community, and have a quality of life they deem fulfilling.

## **COMMUNICATING & REPORTING RESULTS**

The risk management plan should be communicated throughout IMLKS so staff, persons served, and all other stakeholders involved 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, the Executive Director adjusts and renews the Risk Management Plan as necessary.

## RISK MANAGEMENT PLAN

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 & People Responsible for Implementation
		Scale of 1 - 5 1=VERY LOW 5=VERY HIGH				
Individuals & Families Served & Employees	Accidents & Injuries	Low	High	<ul style="list-style-type: none"> <li>▪ Ensure individuals have the equipment &amp; tools needed &amp; 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 &amp; procedures.</li> <li>▪ Provide safety orientation &amp; training.</li> <li>▪ Report injuries &amp; accidents &amp; review reports to see trends.</li> <li>▪ Develop specific interventions in Individual Service Plans (ISP).</li> <li>▪ Plans, care plans, and health care protocols.</li> <li>▪ Implement the Health &amp; Safety Program and the Health &amp; Safety Committee, conduct regular inspections &amp; meetings.</li> <li>▪ Ensure the individual has the skills to maintain their safety in the community i.e. traffic safety, knowing how to get help, can find their way home &amp; know the address and phone # etc., or carries a card on them with the pertinent information.</li> <li>▪ Provide orientation &amp; training to all employees, both general organizational</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>Dec 31<sup>st</sup> 2017 by all Service Coordinators. <b>Completed</b></p> <p>By new hires, all Service Coordinators, &amp; as needed.</p> <p>TBA 2017-2018 by Executive Director.</p> <p>Completed 3-day workshop in Nov 2015 &amp; Nov 2016.</p> <p>Annual competency-based training.</p> <p>Annual training for individuals on the H&amp;S Committee.</p>

<p>Individuals &amp; Families Served &amp; Employees Continued</p>	<p>Accidents &amp; Injuries continued</p>			<p>orientation &amp; orientation specifically to the individuals we serve, particularly with regards to safety concerns. We use an Orientation Checklist. Employees are required to follow policies &amp; procedures, health care protocols, behavior protocols, safety plans, &amp; any &amp; all other care plans. The Critical Incident Policy requires staff to report all incidences and injuries. When staff do not follow policy, procedure &amp; protocols, management responds in a manner to correct the mistake.</p> <ul style="list-style-type: none"> <li>▪ Each Service Coordinator is responsible for completing an Annual Critical Incident Report (see Annual Critical Incident Review Policy) &amp; prepare a summary &amp; analysis with recommendations to the Director &amp; the IMLKS’s Board of Directors.</li> <li>▪ Individual Service Planning is done bi-annually with individuals &amp; 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 &amp; safety.</li> <li>▪ Behavior &amp; Safety Plans are developed &amp; reviewed annually to support challenging behaviors. Service Coordinators ensure there is planning in advance when going out, to consider all possible risks.</li> <li>▪ Health Care Plans created by the nurse from HSCL are updated annually for</li> </ul>	<p>Ensure each staff has First Aid Training &amp; update as needed.</p> <p>Utilize expertise of First Aid attendants and Health &amp; Safety Committee.</p> <p>Review incidents as they occur with Health &amp; Safety committee, following the proper procedures &amp; policies.</p> <p>Review policies annually.</p>	<p>Proof upon hire of new staff &amp; contractors, renewed every 3 years to stay current. By Service Coordinators, staff, &amp; contractors.</p> <p>Monthly meetings by the Health &amp; Safety Committee.</p> <p>As incidents occur. By all staff, Service Coordinators, Executive Director, &amp; Health &amp; Safety committee.</p> <p>Annually at applicable review date. By Human Resources Manager, Service Coordinators, Executive Director, &amp; Board of Directors.</p>
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Individuals & Families Served & Employees continued	Accidents & Injuries continued			<p>every person served that requires one. Training is also provided by HSCL for delegation on tasks.</p> <ul style="list-style-type: none"> <li>Site inspections are completed monthly in all homes &amp; the H&amp;S Committee meet monthly to go over any injuries in the workplace.</li> <li>All injuries are reported, investigated, &amp; reviewed for trends by the Service Coordinators, Executive Director, &amp; the H&amp;S Committee, &amp; recommendations are made. All accidents or injuries are also reported to appropriate governing bodies when applicable, such as WCB &amp; CLBC, &amp; followed up as they deem necessary (see relevant policies).</li> <li>Insure with WCB coverage, Employment Insurance, Health &amp; Welfare Benefits.</li> </ul>		
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 & People Responsible for Implementation
		Scale of 1 - 5 1=VERY LOW 5=VERY HIGH				
Individuals & Families Served	Missing Persons	Low	High	<ul style="list-style-type: none"> <li>Implement relevant policies &amp; procedures.</li> <li>Staff exercise caution &amp; diligence when responsible for individuals, which includes all living in a 24-hour support model, or supported in community with a CSW.</li> <li>Every effort is made to give persons served the tools needed to make decisions which keep them safe &amp; maintain their well-being. Risks are evaluated in order to promote learning &amp; develop new skills. Monitoring &amp;</li> </ul>	Ensure persons served carry current identification, emergency contact information, & medical alert jewellery if applicable.	<p>April 30<sup>th</sup> 2018 by all Service Coordinators. <b>Completed Mar 2018</b></p> <p>On-going discussions.</p>



Individuals & Families Served continued	Missing Persons continued			intervention are done to a level designed to maintain the health & safety of the individual. Where risk is involved, a balance of risk vs benefits, with consideration to the individual's personal autonomy, has to be weighed, & appropriate safeguards put in place.		
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 & People Responsible for Implementation
		Scale of 1 - 5 1=VERY LOW 5=VERY HIGH				
Individuals & Families Served	Abuse & Neglect	High	High	<ul style="list-style-type: none"> <li>Implement relevant policies &amp; procedures. All staff are required to read &amp; sign off on the Abuse &amp; Neglect Policy during new hire orientation &amp; review annually.</li> <li>Provide orientation for individuals, families, &amp; support networks.</li> <li>Report any mistreatment, abuse, or neglect.</li> <li>Allegations are taken very seriously &amp; acted upon immediately. Early reporting &amp; prevention training with staff &amp; self-advocates is important to continue providing.</li> <li>Training for self-advocates is also critical in order to increase their ability to self-report &amp; reduce their vulnerability. We encourage individuals to make their own choices &amp; decisions in order to improve their ability to say "no". Training is provided by a self-advocate advisor with regards to individual rights, responsibilities, &amp; safeguards annually.</li> </ul>	<p>Increase training regarding rights of persons served.</p> <p>Disseminate information regarding rights of persons served training with Direct Support Staff.</p> <p>Training with Direct Support Staff &amp; families.</p>	<p>April 2016 meeting with Self Advocates Advisory Group. <b>Completed</b></p> <p>Dec 2016 workshop with Self Advocates Advisory Group for Service Coordinators, Direct Support, &amp; Persons Served.</p> <p>Upon hire, annually at performance review, &amp; when issues arise. By Service Coordinators to employees and contractors.</p> <p>Annually &amp; on-going as needed.</p>

Individuals & Families Served continued	Abuse & Neglect continued			<ul style="list-style-type: none"> <li>Rights &amp; Responsibilities Training annually &amp; on-going with employees &amp; persons served.</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>		
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 & People Responsible for Implementation
		Scale of 1 - 5 1=VERY LOW 5=VERY HIGH				
Individuals & Families Served	Medication Errors	High	High	<ul style="list-style-type: none"> <li>Employees are required to strictly follow policy &amp; procedures for medication administration. Employees are trained to administer medication safely, &amp; 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> <li>Medication Test updated.</li> <li>Extra training to determine the cause of increased signing errors.</li> </ul>	<p>Medication training, including preventing &amp; managing medication errors.</p> <p>Review medication errors as they occur. Review training with Direct Staff as needed.</p>	<p>Upon hire of each new staff, annually on anniversary date of hire, &amp; as needed. By Service Coordinators &amp; Direct Support Staff.</p> <p>As occurrences happen. By Service Coordinators &amp; Direct Support Staff.</p>
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 & People Responsible for Implementation
		Scale of 1 - 5 1=VERY LOW 5=VERY HIGH				
Individuals & Families Served & Employees	Infectious Disease	Very High	Very High	<ul style="list-style-type: none"> <li>We 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, &amp; help to ensure the safety of the individuals we support. Employees are</li> </ul>	<p>Complete a plan &amp; update annually or as needed to include new infectious diseases.</p>	<p>Updated Nov 2019</p>

Individuals & Families Served & Employees continued	Infectious Disease continued			<p>required to review &amp; update the plan annually.</p> <ul style="list-style-type: none"> <li>The COVID-19 Pandemic was declared on March 11<sup>th</sup> 2020.</li> <li>Staff are required to isolate for 14 days if they test positive for COVID-19.</li> </ul>	<p>Complete a COVID-19 Safety Plan &amp; complete a Contingency Plan.</p> <p>Ensure Direct Support Staff are aware of appropriate policies &amp; implementing procedures.</p> <p>COVID-19 vaccines when available.</p> <p>Masks to be worn in the workplace at all times.</p> <p>Extra cleaning of hard services.</p> <p>Do not come to work if feeling unwell.</p> <p>Getting tested for COVID-19.</p> <p>PPE kits in all homes.</p>	<p>By Service Coordinators &amp; Executive Director. To be reviewed &amp; updated annually by Nov 2021.</p> <p>Upon hire of each new staff/contractor, reviewed annually at performance evaluation, &amp; as needed. By Service Coordinators &amp; Direct Support Staff.</p> <p>During cold &amp; flu season. Oct to March, masks will be worn by staff. Updated March 2023.</p>
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 & People Responsible for Implementation
Individuals & Families Served	Theft/Fraud	Very Low	Moderate	<ul style="list-style-type: none"> <li>Implement relevant policies &amp; procedures</li> </ul>	Ensure all new hires complete a criminal	Upon hire & annually review at performance evaluation or contract

Individuals & Families Served continued	Theft/Fraud continued			<ul style="list-style-type: none"> <li>Provide initial hire &amp; ongoing screening, orientation, &amp; training.</li> <li>Internal controls &amp; audits.</li> <li>Insurance coverage.</li> </ul>	<p>record check and review policies.</p> <p>Utilize petty cash controls (review receipts &amp; utilize amount cap-offs), &amp; monitor cell phone/laptop use.</p> <p>Ensure appropriate insurance is in place.</p> <p>External accountant comments completed annually.</p>	<p>renewal. By Service Coordinators, contractors, &amp; staff.</p> <p>Bi-weekly, when petty cash is submitted with payroll. By Service Coordinators.</p> <p>Review annually in March. By Executive Director.</p> <p><b>Completed April 2022 for 2021 by Stone Hazel.</b></p> <p>Next review date: March 2024.</p>
Area of Risk	Description of Potential Risk	Frequency (Probability)	Severity (Impact)	Strategy/Method Used to Address/Manage the Risk	Improvements Needed	Dates & People Responsible for Implementation
		Scale of 1 - 5 1=VERY LOW 5=VERY HIGH				
Individuals & Families Served & Employees	Staff Turnover	High	High	<ul style="list-style-type: none"> <li>Recruitment &amp; retention practices. All Service Coordinators are trained &amp; involved, along with the person served &amp; their family, in the hiring process.</li> <li>Employee recognition through staff and CIW meetings. Reviewing employee growth through performance reviews.</li> <li>Wage &amp; benefit improvements.</li> <li>Implementing succession planning.</li> <li>Increase in natural unpaid supports.</li> <li>Review of employee exit interviews by Director with involved Service</li> </ul>	<p>Exit interviews &amp; tracking trends. Communicating this information to the appropriate people.</p> <p>Seek feedback from Direct Support Staff in monthly staff meetings.</p>	<p>When employees leave IMLKS. By Human Resources Manager, Direct Support Staff, Service Coordinators, &amp; Executive Director.</p> <p>Completed on a monthly basis or more frequently as needed. By Service</p>

Individuals & Families Served & Employees continued	Staff Turnover continued			<p>Coordinator. Exploring changes with consideration to feedback when necessary.</p> <ul style="list-style-type: none"> <li>Extensive efforts made to increase opportunities for employees to have a voice, &amp; to make greater contributions in the workplace.</li> <li>One-year retention bonuses offered to staff based on years of service.</li> <li>Develop a Fit-to-Work Policy.</li> <li>Annual flu shots &amp; covid-19 boosters.</li> </ul>	<p>Share information with management team.</p> <p>Review any concerns in weekly management meetings.</p> <p>Create a Wellness Plan.</p> <p>Premeditate any potential problems with Direct Support Staff &amp; persons served.</p>	<p>Coordinators, Direct Support Staff, Executive Director, &amp; Human Resources Manager.</p> <p>Weekly. By Service Coordinators &amp; Executive Director.</p> <p>By June 1<sup>st</sup> 2020. By Service Coordinators &amp; Human Resources Manager. <b>Completed May 10<sup>th</sup> 2020</b></p> <p>Have at least monthly meetings with staff and be in contact with on a daily basis or as needed. (Service Coordinators and Executive Director).</p>
Area of Risk	Description of Potential Risk	Frequency (Probability)	Severity (Impact)	Strategy/Method Used to Address/Manage the Risk	Improvements Needed	Dates & People Responsible for Implementation
		Scale of 1 - 5 1=VERY LOW 5=VERY HIGH				
Employees	Violations of Employee Practices	Low	Moderate	<ul style="list-style-type: none"> <li>Implement relevant policies &amp; procedures.</li> <li>Provide initial hire &amp; ongoing screening, orientation, &amp; training.</li> <li>Injury &amp; reporting reviews &amp; investigations.</li> <li>Performance reviews &amp; feedback.</li> <li>Code of ethics &amp; values statement.</li> </ul>	Ensure staff share the same values as IMLKS.	At initial hire, through values & behavioural based interview. By Human Resources Manager, Service Coordinators, & Executive Director.

Employees continued	Violations of Employee Practices continued			<ul style="list-style-type: none"> <li>Complaints &amp; concerns procedure reviews.</li> <li>Following good human rights &amp; labour relations practices.</li> <li>Extensive efforts made to increase opportunities for employees to have a voice &amp; to make a greater contribution in the workplace.</li> <li>Criteria for hiring has shifted emphasis from education to values-based hiring &amp; ability to make good decisions.</li> </ul>	Offer value-based training & incorporate into daily practice.	<p>Done semi-annually.  <b>Completed April 2017</b>  <b>Completed Oct 2017</b></p> <p><b>Completed Oct 2015 by instructor Janet Klees, with Service Coordinators, Executive Director, &amp; Direct Service Staff.</b>  <b>Completed Nov 2014</b>  <b>Completed Nov 2015 by instructor Michael Kendrick, with Service Coordinators &amp; Executive Director.</b></p> <p>Discussed in monthly staff meetings &amp; weekly management meetings by Service Coordinators, Executive Director, &amp; Direct Support Staff.</p>
Area of Risk	Description of Potential Risk	Frequency (Probability)	Severity (Impact)	Strategy/Method Used to Address/Manage the Risk	Improvements Needed	Dates & People Responsible for Implementation
		Scale of 1 - 5 1=VERY LOW 5=VERY HIGH				
Employees	Criminal Activity, Theft & Fraud, Legal Requirement, Liability,	Very Low	High	<ul style="list-style-type: none"> <li>Liability insurance is up to date &amp; appropriate.</li> <li>Annual financial review.</li> <li>General liability coverage is in place for contracts &amp; for activities outside of contracts.</li> <li>Implement policies &amp; procedures.</li> </ul>	Ensure new Board Members & Executive Director complete a criminal record check & review IMLKS's policies.	Liability insurance renewed March 2017. Liability Insurance renewed March 2018. Liability Insurance renewed March 2019.

Employees continued	Errors & Omissions  Criminal Activity, Theft & Fraud, Legal Requirement, Liability, Errors & Omissions continued			<ul style="list-style-type: none"> <li>External governing bodies.</li> <li>External audits completed annually.</li> <li>Liability &amp; insurance reviewed annually.</li> </ul>		<p>Liability Insurance renewed March 2020. Liability insurance renewed March 2021. Next review: March 2022 <b>Completed</b> Next renewal: March 2024</p> <p>Review in March of each year.</p> <p>Criminal record check done by new Board Members &amp; hire of new Executive Director; every 3 years thereafter. Policies annually.</p>
Area of Risk	Description of Potential Risk	Frequency (Probability)	Severity (Impact)	Strategy/Method Used to Address/Manage the Risk	Improvements Needed	Dates & People Responsible for Implementation
		Scale of 1 - 5 1=VERY LOW 5=VERY HIGH				
Individuals & Families Served & Employees	Loss / Reduction in Funding to Provide Supports & Loss or Cancellation of Contracts	Moderate	High	<ul style="list-style-type: none"> <li>Clear expectations upon hire.</li> <li>Have employees support more than one person, keeping in mind how it impacts the overall life of the persons served.</li> <li>Continue to work with CLBC, both locally &amp; provincially.</li> <li>Be creative with funds received.</li> <li>Continue to build individuals personal support networks &amp; make natural, unpaid relationships.</li> <li>Continue innovation &amp; best practice partnership through IIDL &amp; IIMHL sister agency network. Maintain</li> </ul>	<p>Completing Accreditation to ensure operation according to best practices.</p> <p>Ensure all policies are adhered to by staff.</p>	<p>Mock Accreditation: Sept 25<sup>th</sup> 2017 <b>Completed</b></p> <p>Survey Dates: April 18<sup>th</sup> 19<sup>th</sup> 20<sup>th</sup> 2018 <b>Completed</b></p> <p>Next Survey March 18<sup>th</sup> &amp; 19<sup>th</sup> 2024</p> <p>Mock Accreditation in Feb 2023 in</p>

Individuals & Families Served & Employees continued	Loss / Reduction in Funding to Provide Supports & Loss or Cancellation of Contracts continued			<p>membership in BCSCCL &amp; support their advocacy initiatives.</p> <ul style="list-style-type: none"> <li>Tell stories &amp; continue to show the positive impact on people's lives.</li> </ul>	<p>Ensure all staff work with integrity &amp; properly represent IMLKS.</p> <p>Continue positive relationship with CLBC &amp; community at large.</p>	<p>preparation of Survey in March/April 2024 <b>Complete</b></p> <p>Review with all new hires, annually at performance review, &amp; as needed thereafter. By Human Resources Manager, Service Coordinators, &amp; Direct Support Staff.</p> <p>Review expectations with all new hires, annually at performance review, &amp; as needed thereafter. By Human Resources Manager, Service Coordinators, &amp; Direct Support Staff.</p> <p>Ongoing by all employees, contractors, &amp; Board Members.</p>
Area of Risk	Description of Potential Risk	Frequency (Probability)	Severity (Impact)	Strategy/Method Used to Address/Manage the Risk	Improvements Needed	Dates & People Responsible for Implementation
Individuals & Families Served & Employees	Damage, Natural Hazards &	Very Low	Moderate	<ul style="list-style-type: none"> <li>Insurance and deductibles are up to date &amp; appropriate.</li> <li>Implement policies &amp; procedures.</li> </ul>	Ensure all policies are adhered to by staff.	Review with all new hires, annually at performance review, & as needed thereafter.



<p>&amp; Community Members</p> <p>Individuals &amp; Families Served &amp; Employees &amp; Community Members continued</p>	<p>Disasters, Vandalism Damage, Accidents, &amp; Theft</p> <p>Damage, Natural Hazards &amp; Disasters, Vandalism Damage, Accidents, &amp; Theft continued</p>			<ul style="list-style-type: none"> <li>▪ Regular external inspections are completed by building manager &amp; fire department.</li> <li>▪ Support individuals in their own homes to make sure they are safe &amp; secure.</li> <li>▪ Support individuals in purchasing renter's insurance.</li> <li>▪ Monthly safety inspections are completed by employees &amp; submitted to Service Coordinators. The Health &amp; Safety Committee audits the inspections as needed.</li> <li>▪ Staff are trained &amp; orientated to individual support needs in vehicles through support &amp; care plans (all applicable).</li> <li>▪ Promote the use of city transit, walking, and/or biking when appropriate. When appropriate &amp; affordable, the use of Handy Dart or Taxi is also an option.</li> <li>▪ Yearly Drivers Abstracts are mandatory for all employees using their vehicles for work.</li> <li>▪ All employees are required to have &amp; maintain a proper driver's licence, with a current copy in employee files.</li> </ul>	<p>Ensure employees have or acquire the proper vehicle insurance (business use, 3 million 3rd party liability) before using it for work purposes.</p>	<p>By Human Resources Manager, Service Coordinators, &amp; Direct Support Staff.</p>
<p><b>Area of Risk</b></p>	<p><b>Description of Potential Risk</b></p>	<p><b>Frequency (Probability)</b></p>	<p><b>Severity (Impact)</b></p>	<p><b>Strategy/Method Used to Address/Manage the Risk</b></p>	<p><b>Improvements Needed</b></p>	<p><b>Dates &amp; People Responsible for Implementation</b></p>
<p>Property &amp; Assets</p>	<p>Damage &amp; Theft Security, Information Management,</p>	<p>Low</p>	<p>Low</p>	<ul style="list-style-type: none"> <li>▪ Insurance &amp; deductibles are up to date &amp; appropriate.</li> <li>▪ Implement relevant policies, procedures, &amp; internal controls.</li> </ul>	<p>Ensure policies &amp; procedures regarding confidentiality are known by all staff &amp; adhered to.</p>	<p>Done as required for new purchases on ShareVision. By Executive Director, Service Coordinators,</p>

Property & Assets continued	Privacy & Confidentiality, Theft & Damage  Damage & Theft Security, Information Management, Privacy & Confidentiality, Theft & Damage continued			<ul style="list-style-type: none"> <li>▪ Inventories of individual’s belongings are maintained for IMLKS &amp; 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> <li>▪ Accept second hand furniture, supplies, &amp; equipment donations.</li> <li>▪ Streamline all information concerning people being served to ShareVision.</li> <li>▪ Technology plan.</li> <li>▪ Track all new purchases.</li> <li>▪ Password protection.</li> <li>▪ System administrator usage monitored.</li> <li>▪ Back-up practices daily.</li> <li>▪ Anti-virus software installed &amp; run on a regular basis.</li> </ul>	Streamline all information concerning people being served to ShareVision.	employees, & contractors.
Area of Risk	Description of Potential Risk	Frequency (Probability)	Severity (Impact)	Strategy/Method Used to Address/Manage the Risk	Improvements Needed	Dates & People Responsible for Implementation
		Scale of 1 - 5 1=VERY LOW 5=VERY HIGH				
Financial Practice	Fraud, Loss of Funding, Legal Requirements to Record Report & Audit, Investment Losses, Transfer of Funds to Individuals, Families, &	Low	Very High	<ul style="list-style-type: none"> <li>▪ Implement relevant policies &amp; procedures.</li> <li>▪ Insurance is up to date &amp; 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 &amp; Bookkeeper or Accountant review financial position monthly.</li> </ul>	Review insurance annually.  Complete external reviews annually.	<b>Completed March 2019</b> <b>Completed March 2020</b> Next review date: March 2021

Financial Practice continued	Other Agencies			<ul style="list-style-type: none"> <li>Every effort is made to maintain positive relationship with funders and families.</li> </ul>		
Area of Risk	Description of Potential Risk	Frequency (Probability)	Severity (Impact)	Strategy/Method Used to Address/Manage the Risk	Improvements Needed	Dates & People Responsible for Implementation
		Scale of 1 - 5 1=VERY LOW 5=VERY HIGH				
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> </ul>	Explore grants & social enterprise opportunities as needed.	As needed by the Executive Director, Board of Directors, & Service Coordinators.
Area of Risk	Description of Potential Risk	Frequency (Probability)	Severity (Impact)	Strategy/Method Used to Address/Manage the Risk	Improvements Needed	Dates & People Responsible for Implementation
		Scale of 1 - 5 1=VERY LOW 5=VERY HIGH				
Organization Reputation & Profile	Negative Media Coverage, Loss of Credibility	Moderate	Very High	<ul style="list-style-type: none"> <li>Implement relevant policies &amp; procedures.</li> <li>Avoid activities that threaten IMLKSs profile or that may cause a negative impact on their reputation.</li> <li>Values, Vision, &amp; Philosophy statement should be adhered to.</li> <li>Make decisions strategically, to enhance visibility &amp; 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 &amp; consider adopting some.</p> <p>Continue to engage positively with community &amp; other agencies.</p>	<p>Mock Accreditation: <b>Completed Sept 25<sup>th</sup> 2017</b></p> <p>On-going as needed by Senior Service Coordinator.</p> <p>Continual upon interactions with other agencies by Executive Director &amp; Service Coordinators.</p> <p>Every interaction with other agencies &amp; the community by Executive Director,</p>

Organization Reputation & Profile continued	Negative Media Coverage, Loss of Credibility continued				Use Strategic Planning process to stay on track.  Ensure Executive Director is the only spokesperson.	Board of Directors, Direct Support Staff, contractors, & Service Coordinators.  In accordance with dates in Strategic Plan. Review Annually. Next Review Date June 2021 by Executive Director, Board of Directors, Service Coordinators, & all stakeholders.  As needed.
Area of Risk	Description of Potential Risk	Frequency (Probability)	Severity (Impact)	Strategy/Method Used to Address/Manage the Risk	Improvements Needed	Dates & People Responsible for Implementation
		Scale of 1 - 5 1=VERY LOW 5=VERY HIGH				
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 agencies for contracts. Keep an eye on the trends & when the need arises explore other areas of work.	Ongoing as needed by the Executive Director.

Area of Risk	Description of Potential Risk	Frequency (Probability)	Severity (Impact)	Strategy/Method Used to Address/Manage the Risk	Improvements Needed	Dates & People Responsible for Implementation
		Scale of 1 - 5 1=VERY LOW 5=VERY HIGH				
Unexpected Staff Loss Unexpected Staff Loss continued	Disruption in Support Disruption in Support continued	Very High	Very High	<ul style="list-style-type: none"> <li>Clear expectation &amp; good relationships upheld with each staff.</li> <li>Cross training key staff &amp; Service Coordinators.</li> <li>Ensuring all COVID-19 protocols &amp; procedures are followed.</li> <li>All staff must wear masks while at work, except for when they are eating or sleeping.</li> <li>All staff must be abiding by IMLKS cleaning protocols &amp; all homes must have hand sanitizer &amp; PPE kits.</li> <li>Ensure we have plenty of backfill staff.</li> <li>Have an advertisement for casual staff on Indeed at all times.</li> <li>Continue with a referral program.</li> </ul>	<p>Train more casual staff &amp; cross train current employees to comprise a longer float/casual-on-call list.</p> <p>Keep track of staff turnover rates &amp; reasons (see staff turnover).</p>	<p>On-going by Human Resources Manager &amp; Service Coordinators.</p> <p>See staff turnover rate &amp; reasons through exit interviews &amp; HR report. By Human Resources Manager &amp; Executive Director.</p>
Area of Risk	Description of Potential Risk	Frequency (Probability)	Severity (Impact)	Strategy/Method Used to Address/Manage the Risk	Improvements Needed	Dates & People Responsible for Implementation
		Scale of 1 - 5 1=VERY LOW 5=VERY HIGH				
Loss of Business	Fire Damage, Other Disaster, Funding	Low	High	<ul style="list-style-type: none"> <li>Office building is inspected annually by the fire department &amp; regularly by the landlord.</li> <li>Information can be accessed through the web, such as email &amp; ShareVision (individuals).</li> <li>Due to the higher homeless population in Kamloops and the number of fires in the cities Downtown core, we ensure security is monitoring the building after-hours.</li> </ul>	<p>Ensure all files are backed up externally.</p> <p>Report any concerns to the police &amp; fire department.</p>	<p>Weekly backups, scan paper documents to ShareVision as needed &amp; acquired. On-going by Service Coordinators, Executive Director, Human Resources Manager, employees, &amp; contractors.</p>

Area of Risk	Description of Potential Risk	Frequency (Probability)	Severity (Impact)	Strategy/Method Used to Address/Manage the Risk	Improvements Needed	Dates & People Responsible for Implementation
		Scale of 1 - 5 1=VERY LOW 5=VERY HIGH				
Loss of Business	Cancellation or Loss of Funding	Very Low	Very High	<ul style="list-style-type: none"> <li>▪ Maintain good relationships with funders, families, &amp; persons served.</li> <li>▪ Implement &amp; adhere to relevant policies &amp; procedures.</li> <li>▪ Fulfill funders guidelines &amp; policies for support &amp; reporting expectations.</li> </ul>	<p>Review insurance annually.</p> <p>Complete Accreditation.</p>	<p>Next review date: March 2021 by Executive Director. <b>Completed March 2019</b></p> <p>Mock Accreditation: Sept 25<sup>th</sup> 2017 <b>Completed</b></p> <p>Survey Dates: April 18<sup>th</sup> 19<sup>th</sup> 20<sup>th</sup> 2018 <b>Completed</b></p> <p>Next Survey March 18<sup>th</sup> &amp; 19<sup>th</sup> 2024</p>

### **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:

<b>RATING OF IDENTIFIED RISK</b>	<b>VERY LOW</b>	<b>LOW</b>	<b>MODERATE</b>	<b>HIGH</b>	<b>VERY HIGH</b>	<b>TOTAL</b>
<b>FREQUENCY (PROBABILITY) OF RISK</b>	5	7	2	3	2	19
<b>SEVERITY (IMPACT) OF RISK</b>	0	2	4	8	5	19

### **RISK MANAGEMENT PLAN APPROVAL**

The undersigned acknowledge that they have reviewed the Risk Management Plan for It's My Life Kamloops Society. Changes to the Risk Management Plan will be coordinated with and approved by the undersigned or their designated representative.

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Title: \_\_\_\_\_

Role: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Title: \_\_\_\_\_

Role: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Title: \_\_\_\_\_

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Print Name: \_\_\_\_\_

Title: \_\_\_\_\_

Role: \_\_\_\_\_

Date: \_\_\_\_\_