

Policy and Procedure

Title:	Corporate Risk Management
Policy Number:	07.007
Effective Date:	March 15, 2012
Revised Date:	October 28, 2019
Approving Body:	CCMB Board of Directors
Authority:	CancerCare Manitoba Act
Responsible Officer:	Board Chair
Delegate:	President and CEO
Contact:	Office of the President and CEO
Applicable to:	CCMB Community

1.0 BACKGROUND:

CCMB used an Enterprise Risk Management (ERM) system, essentially a continuous, proactive and systematic process of understanding, managing and communicating Risk from an organization-wide perspective. This involved a simple documentation system (spreadsheet) but current involves the Health Insurance Reciprocal of Canada's (HIROC) electronic Integrated Risk Management (IRM) system.

2.0 PURPOSE:

- 2.1 To transition to and maintain CCMB's Risk Register to an electronic Integrated Risk Management system to ensure that CCMB has efficient and effective processes and systems in place to manage all aspects of risk within the organization. This provides CCMB stakeholders with reasonable assurance that the organization is meeting its objectives while maintaining quality services and a safe environment for its patients, staff and the public.
- 2.2 To provide a framework that encourages consistency in the organization's approach to risk assessment, risk management and risk mitigation activities.
- 2.3 To make it clear that management responsibilities are pervasive to the organization and not restricted to risk management specialists.
- 2.4 To recognize the importance of integrating risk management into the organization's philosophy, culture, practices and business plans.
- 2.5 In order to promote organizational mindfulness and maintain a sense of urgency, risks should be described in plain language and as events or failures to be avoided.

3.0 DEFINITIONS:

- 3.1 Integrated Risk Management (IRM): A set of practices and processes supported by a risk-aware culture and enabling technologies, that improves decision making and performance through an integrated view of how well an organization manages its unique set of risks.

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- 3.2 Risk: A potential or actual threat stemming from any event that may compromise the achievement of the organization's objectives. The risk level is measured in terms of its likelihood of occurrence and the associated impact should it occur.
- 3.3 Risk Management: A systematic process of identifying, analyzing, evaluating, addressing and communicating potential and actual risk through a well-designed program that prevents controls and minimizes risk exposures.
- 3.4 Risk Owner: The senior leader ultimately responsible and accountable for managing the risk(s) defined under his/her domain.
- 3.5 HIROC Taxonomy of healthcare organizational risks: A predefined list of risk categories and associated risk names to assist in classifying risks being identified and reported.
- 3.6 Subject Matter Expert (SME): Selected by the senior leadership team, the SME shall provide leadership and guidance, and act as the coordinator and facilitator for the Risk Management function.

4.0 **POLICY:**

- 4.1 Whereas CCMB has a duty of care with respect to the interests of the people of Manitoba and the stewardship of its human and material resources; and, whereas prudent management of corporate risks is one of the means by which this duty of care may be discharged, CCMB has established a system of risk management.
- 4.2 The CCMB Board of Directors ensures IRM is implemented within the organization, with appropriate systems and processes in place to identify and manage organizational-wide risks. The Board delegates authority and responsibility to the CCMB President and Chief Executive Officer (CEO) for overall administrative supervision of the IRM and for the identification and evaluation of mission-critical risks in the social, political and economic environments in which CCMB operates and of risks involved in major new initiatives.
- 4.3 The senior leadership team shall be responsible for the development and implementation of an effective risk management strategy within the organization.
- 4.4 The senior leadership team shall implement an integrated approach to the management of risk, identifying the need for all parts of the organization to be involved.
- 4.5 The CCMB Board of Directors shall provide the senior leadership team with resources and support in fulfilling their role as risk owners.
- 4.6 The SME shall establish the necessary linkages to existing (and potentially new) working groups and committee structures to ensure a continuous, proactive and systematic process is undertaken to manage risk.

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5.0 **PROCEDURE:**

5.1 A specified member of the senior management team shall, under the general direction of the CEO, serve as the Senior Risk Management Officer of CCMB with primary responsibility for risks arising in the normal course of business ("operational" risks).

5.2 The CCMB Board of Directors shall be responsible for general oversight of the performance of the risk management system (RMS).

5.3 Standing committees of the Board shall assist the Board by monitoring particular aspects of the RMS that are of material relevance to the mandates of the respective committees.

5.4 Monitoring, Reporting and Evaluation

5.4.1. The senior risk management officer shall monitor and evaluate the operation of the RMS and shall, at least on an annual basis, report on its performance through the CEO, to the Executive Committee and ultimately to the Board.

5.4.2. The CEO shall report to the Board and the Executive Committee in a timely manner any matters of a material nature that constitute heightened risks, new or emerging hazards, or the occurrence of harmful events.

5.4.3. Standing committees of the Board shall report risk related issues or events of a material nature, addressed during the committee's normal course of business, to the Executive Committee and to the Board.

5.5 Management Functions

5.5.1. Identify strategic risks that represent major threats to achieving the organizational strategic objectives.

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5.5.2.1. Assess current risk mitigation strategies and determine if existing controls are still appropriate and/or being consistently applied.

5.5.2.2. If existing controls are not adequate, develop additional mitigation plans and assign accountability for their implementation.

5.5.2.3. If a specific risk is not at a tolerable level, consider a number of risk management options such as:

- Avoiding the risk by deciding not to start or continue with the activity that gives rise to the risk.
- Removing the hazard.
- Reducing the likelihood.
- Reducing the consequence (e.g. through early warning/detection systems).
- Sharing the risk with another party or parties (e.g. contracts and

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insurance).

- Retaining the risk by informed decision.

5.5.2.4. Consider new control strategies or initiatives to improve compliance with existing controls (e.g. hand hygiene practices).

5.5.2.5. Establish best practices to identify possible options, or consider implementing a quality improvement project to work towards a solution.

5.5.2.6. Conduct periodic audits of mitigation strategies for high priority risks.

5.5.3. Development and implementation of communications plans pertaining to particular risk issues and to promote awareness of the IRM in general.

5.6 Subject Matter Expert

5.6.1. The SME shall establish the necessary linkages to existing (and potentially new) working groups and committee structures to ensure a continuous, proactive and systematic process is undertaken to manage Risk.

5.6.2. The SME shall train and assist the Risk Owners on the input and maintenance of their risks in the HIROC IRM System.

5.6.3. Document the risk assessment results and summarize in reports to senior leadership and the board.

5.6.4. Develop a risk register.

5.6.5. Compare and evaluate the risks

5.6.5.1. Compare with risk register's

5.6.5.2. Compare with RL6 Event and Critical Incident Reporting System entries and trends.

5.6.5.3. Compare with current published North American Healthcare Risks

5.6.6. Use the risk register to form the basis for IRM reporting to senior leaders.

5.6.7. Include one or more of the following when reporting:

- The top 5,10, or 20 ranked risks
- All risks above a certain threshold rating
- Risks linked to specific strategic objectives
- Risks requiring significant remedial action
- Changes made to the register between reporting cycles

6.0 **REFERENCES:**

6.1 WRHA Risk Policy 10.50.050

6.2 CCMB Risk Policy 07.007 – previous 2019 version

6.3 HIROC IRM Policy Template – from website

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Policy Contact:

All enquiries relating to this policy should be directed to:

Name:	Board Chair or President and CEO
Title/Position:	Via the President and CEO's office
Phone:	
E-mail:	
Address: (if required):	

DOCUMENTATION

Policy Location:

This policy is located (hard and e-copy formats):

- | | |
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| 1. | The original signed and approved policy is on file in the Executive Office, CCMB |
| 2. | The e-copy is on file in the CCMB Governing Documents Library, SharePoint |
| 3. | |

Revision History:

Date	Version	Status	Author	Summary of Changes
dd/mm/yyyy	#	Initial, Draft, Final Minor/Major revision		
15/03/2012	1			
23/02/2018	1	Minor Revision	S.Friedenberger	Reformatted to new template
11/04/2019	1	Minor Revision	CCMB Board	Minor wording changes.

Approvals Record:

This Policy requires approval by:

Approval Date	Name / Title	Signature
	Not required.	

FINAL APPROVAL:

Date	Name / Title	Signature
October 28, 2019	Approved by the CCMB Board And President and CEO CancerCare Manitoba	

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APPENDIX A

Risk Management Heat Map

Likelihood (initial)	Impact (initial)				
	Very Low	Low	Medium	High	Very High
Very High	5	10	15	20	25
High	4	8	12	16	20
Medium	3	6	9	12	15
Low	2	4	6	8	10
Very low	1	2	3	4	5

Rating (initial): Risk level (initial):