



TO: Chair and Members of the Governance Committee

FROM: Emily William, CEO

DATE: 2022 February 17

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## MLHU RISK MANAGEMENT PLAN

### Recommendation

*It is recommended that the Governance Committee recommend that the Board of Health:*

- 1) *Receive Report No. 04-22GC re: “MLHU Risk Management Plan” for information;*
- 2) *Approve the new Middlesex-London Health Unit Risk Management Plan ([Appendix A](#)) and Risk Register ([Appendix B](#)).*

### Key Points

- Boards of Health are required to report to the Ministry of Health in a standardized manner the high risks that are currently being managed at each board of health. The proposed Risk Management Plan remains in alignment with board of health requirements under the Ontario Public Health Standards (OPHS) and the approved Middlesex-London Health Unit (MLHU) Risk Management Policy (G-120).
- Gaps have been identified in the current risk reporting process and an updated Risk Management Plan ([Appendix A](#)) and Risk Register ([Appendix B](#)) have been developed.
- The Risk Register ([Appendix B](#)) is a repository for all risks identified (high, medium and low) and includes additional information about each risk (priority rating, mitigation strategies, and residual risk).
- Actions taken to reduce risk are monitored and efforts to improve performance will now be reported to the Board on a quarterly basis.

### Background

In January 2018, the Ministry of Health and Long-Term Care implemented modernized Ontario Public Health Standards (OPHS) and introduced new accountability and reporting tools required under the Public Health Accountability Framework.

The OPHS require boards of health to have a formal risk management framework in place that identifies, assesses, and addresses risks. All boards of health are required to submit a Risk Management Report as part of their Q3 Standards Activity Report (SAR) on an annual basis. At its meeting on December 9, 2021, the Board of Health approved the 2021 Risk Management Report which summarized high risks and key mitigation strategies to be submitted to the Ministry.

### Risk Management Reporting

Risk assessment and mitigation occurs at the organization, program, and project levels according to the process outlined in the approved MLHU Risk Management Policy (G-120). The Board of Health is kept informed of identified high risks and key mitigation strategies on an annual basis as detailed on the annual Risk Management Report.

The following gaps have been identified in the current risk reporting process:

1. Medium to low risks faced by the organization are not captured on the Risk Management report.
2. Monitoring the effectiveness of the mitigation strategies on an annual basis limits the ability of the Health Unit and the Board of Health to determine the level of residual risk faced by the organization.

### **MLHU Risk Management Plan**

An updated MLHU Risk Management Plan ([Appendix A](#)) has been developed to address the current gaps in the risk reporting process. This plan includes a new Risk Register ([Appendix B](#)) that is a repository for all risks identified (high, medium and low) and includes additional information about each risk (priority rating, mitigation strategies, and residual risk).

The risk register captures MLHU's response to actions taken to address risks and includes the assignment of responsibility. Actions taken to reduce risk are monitored and efforts to improve performance will now be reported to the Board on a quarterly basis.

### **Next Steps**

The Governance Committee has the opportunity to review the MLHU Risk Management Plan ([Appendix A](#)) and the Risk Register ([Appendix B](#)) included with this report. Once the Governance Committee is satisfied with its review, the Risk Management Plan will be forwarded to the Board of Health for approval.

This report was prepared by the Manager, Strategy, Risk and Privacy, Healthy Organization division.



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