

Community Connections Support Services

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Risk Management Plan and Assessment

Community Connections Support Services

Background:

Community Connections Support Services is committed to long range planning to ensure service continuity and, therefore, to a formal and periodic risk management process. Specifically, the organization is committed to Risk Management as a way to:

1. identify any loss exposures,
2. analyze and evaluate any loss exposures
3. identify a strategy (including techniques and/or actions) to be taken to counter any potential losses or identified exposures,
4. implement the most effective strategy or plan to reduce risk for the organization,
5. provide ongoing monitoring of any actions taken to reduce risk,
6. report result of actions taken to reduce risks, and
7. Include the results of risk reduction activities in performance improvement activities.

Risk Management Plan:

the Director is responsible for ensuring that an annual risk management assessment is conducted and reports the findings about assessment to the organization's leadership. The risk assessment will be conducted annually and no later than April 30th of each year with the results:

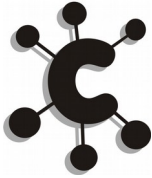
1. Provided to the organization's leadership and
2. Incorporated into program planning, performance improvement activities, strategic planning, community advocacy efforts, and financial and resource planning efforts.

Current assessment:

this document and the organization's responses to the following questions, provides documentation of Community Connections Support Services' current risk management assessment conducted on April 15, 2010 in accordance with CARF's accreditation standards pertaining to risk management.

Assessment findings:

1. Does the organization anticipate significant changes in the types of people of the organization currently serves? (for example, is it anticipated that the organization will need to serve more people who do not speak English as their primary language? Is it anticipated that the organization will need to see more people with unique needs? If yes, described the impact of these anticipated needs in terms of fiscal and human resources and the projected impact on service delivery).
 - No, currently Community Connections Support Services does not anticipate that the people we will serve in future will be different in unique ways than the people we are currently serving. However, attention needs to be placed on how we might as an



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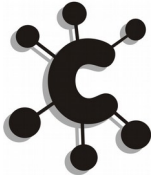
organization reduced risk as people and employees age in place.

2. Does it appear that the organization's inventory and accountability system for office equipment, computers, and other high-value items is sufficient to protect against loss, theft, or inappropriate use? If no, identify a course of corrective action.
 - Much of our approach to risk management with regard to technology and high value items such as computers is addressed in our technology plan.
 - As most of the work that we do at the organization does not require a state-of-the-art computer, we often place older machines, of lesser value, in the work locations that don't require higher processing power.
 - As a condition of employment, new staff sign an agreement that equipment and files are to be returned upon the termination of their employment.
 - Otherwise, the value of the organization is in the contracts it holds with our funder and most importantly, the people that we serve and the members of their support teams and we do not have a lot of high-value items in our inventory.

3. Does the organization's physical plant at all locations provide reasonable security for persons served and employees? If no, identify improvements and or changes needed to rectify the problem.
 - Our head office in Kelowna, BC has an alarm system monitored through a national security company and a local broker.
 - Our residential resource in Trail, BC has an alarm system for the purposes of monitoring elopement of one of the people we support.
 - All locations where we are providing supports have door and window locks in place to reduce the likelihood of break-ins.

4. Has the organization conducted an accessibility evaluation at all program locations to identify all barriers to accessibility and develop a plan for elimination of all identified barriers? If no, list the projected date for the completion of the accessibility evaluation.
 - The organization monitors accessibility in an ongoing way and has accessibility issues addressed in their accessibility plan. Please see this plan for further information on these issues.
 - Accessibility, and barriers to accessibility are also addressed in each individual's program planning.
 - The nature of the work at the agency is reducing and successfully dealing with barriers to accessibility in all of its forms (physical, attitudinal, financial, etc.)

5. Does the organization's health and safety program appear effective in identifying possible risks and hazards? If no, list all problem areas and a plan of corrective action.

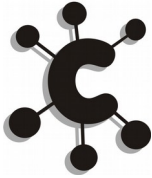


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- Our employees, as part of their regular team meetings, identify any ongoing health and safety considerations that arise out of the services that we provide on a regular basis.
 - Individual health and safety concerns for the people that we support are addressed through the individual service plan process and strategies to correct or address the safety concerns are identified and implemented.
 - Each work location has an Emergency Management Plan which addresses all conceivable health and safety urgencies and describes a course of action for the people we serve, stakeholders, and our employees to take should a health and safety concern arise.
 - This Plan is filled with a number of resources in the form of instruction sheets, manuals, and advice in the case of an emergency.
 - Each work location has a health and safety officer identified who contributes to the health and safety committee and is responsible for implementing new health and safety plans and records the outcomes of checks of our health and safety system.
 - Regular internal inspections of each work location on a six-month basis provides the organization with any prevailing health or safety concerns or considerations. A corrective action plan is established at the completion of these internal inspections and followed through in a timely manner.
 - Regular external inspections of each work location on an annual basis is conducted by consulting the local recognized authority in the health and safety area. Most often, this external inspection is done by a representative of the local fire department who attends the residence or work location and completes a comprehensive overview of the specific work location's approach to managing an emergency and evacuation.
 - In each of our work locations, we have in place, appropriate first aid kits that are stocked with all of the recommended supplies to manage a workplace injury.
 - In each of our work locations, we have in place, a disaster kit which contains supplies to support an appropriate number of people for three to four days in the event that emergency services are not able to get to the resource.
6. Does the organization have an adequate oversight system in place to minimize the risk of misappropriation of funds? If no, what plans does the organization have to address that situation?
- The organization employs a bookkeeper/accountant who monitors program, human resource, and administrative spending on a monthly basis in accordance to generally accepted accounting principles.
 - Budgets are developed in a collaborative way with our funder and bookkeeper/accountant and are managed and reported on a monthly basis.
 - Currently, the organization uses the approved budget templates issued by CLBC so that the organization and its funder can agree on how particular budget lines are determined.
 - Program cost spending is monitored on a monthly basis; checks are issued and receipts for spending collected and returned to the director on a monthly basis. This method of

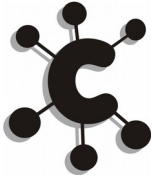


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- distribution of program cost funds and collection of receipts and record of spending is consistent across all program areas.
- Many employees at the agency have access to the records of persons served. This allows for regular monitoring and overseeing of the spending of funds specific to the people we support.
 - Many of the people that we support have a Public Trustee who is responsible for making sure that personal funds are accounted for and spent according to the wishes of their client.
7. Does the organization's corporate compliance programs appear to be effective in preventing fraud, waste, and abuse? If no, what changes need to be made?
- As the agency has had no serious incident regarding fraud, waste, and abuse, we are confident that our policy in this area has successfully guided employees and management in this area.
 - As our services are overseen by more than one employee, we encourage active problem-solving between employees and services, and we have policy supporting all levels of the organization to report fraud, waste, and abuse. We believe that we've developed a sufficient level of accountability in the area of fraud prevention.
 - Our organization has developed a comprehensive code of ethics to which we hold each other accountable.
8. Does it appear that the organization will face increased business competition in the next 18 months? If yes, provide an estimate as to how that competition could affect the organization's revenue generation efforts and base of person served.
- Competition is an ongoing issue at our organization, especially in the area of Community Support Services. Our focus continues to require us to provide effective, responsive, and consumer focused services to remain relevant and a service provider of choice in our community.
 - The Request For Proposals (RFP) process is inherently competitive. Over the past two years, we have been a successful proponent in several RFP solicitations and are currently successfully completing the work of the agency.
 - We continue to have a low incidence of complaints about our services and when these occur, we actively pursue corrective action that provides successful resolution of the problem.
9. Does it appear that the organization has sufficient insurance coverage to protect the organization's assets and protect the organization's personnel in the event of a lawsuit? If no, describing the shortfalls in insurance coverage that needs to be addressed.
- Yes the organization believes that it has adequate insurance coverage to protect our assets in the event of a lawsuit.
 - Our corporate insurance is reviewed annually each October and a new policy is issued in



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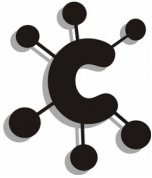
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November of each year. This insurance covers up the homes and work locations of our employees and is designed to cover liability in areas that the insurance that comes with their contracts does not cover.

- Each of our contracts with their current funder (CLBC), has attached to it coverage under the Government Master Insurance Program (GMIP) which provides our agency with liability coverage for all of the work that we do as an organization.

10. Are the organization's emergency plans and procedures adequate to provide for the health and safety of persons served, personnel, and visitors to the organization in the event of actual emergencies? If no, please describe any changes that need to be made.
 - Yes, each work location has a complete Emergency Management Plan that includes documentation and support for any emergencies that may arise while conducting company business.
 - In addition, all employees are trained in First Aid and CPR and have additional training in the areas of nonviolent crisis intervention, behavior management, diabetes training and support, etc. as required to support the unique needs of the people that we support.
 - We maintain current records of health related info for the people that we support in their homes, their vehicles, and in the main office of the organization. These health profiles are updated semi-annually and serve as an emergency record for the health-related approaches required by each of the people that we serve.
 - During the Individual Service Plan process, personal safety issues (hospital protocols/ emergency contacts/ specialists/ concerns identified) are addressed and plans to remedy are created.
11. Describe the organization's most significant challenge in the next 18 months. Include an assessment of how that challenge will impact the organization and, more critically, how the organization will meet the challenge.
 - The organization's most significant challenge in the next 18 months is one of unprecedented growth. As we have embarked in a very large Home Sharer Coordination and Contracting service, we must be active in making sure that this service thrives and support to our other service areas remains of a high quality.
 - The strategy that we have implemented to address this issue is to develop a team of key managers to take on increased responsibility for their teams. This serves to develop a new layer of accountability and supervision at the agency and decreases the direct responsibility of the director to oversee individual program areas.
 - A second strategy that we have implemented to address this issue is to improve our information management and storage of records on persons served, program areas, and accounting to accommodate this large increase in business activity at the organization.
12. Does the organization have sufficient hardware, software, peripherals, and other technology to accomplish its mission and provide quality care? If no, describe any purchases/ acquisitions



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that need to be made and the projected time-line for acquiring the new technology necessary to support persons served.

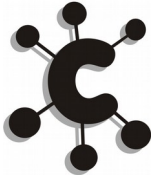
- There are several areas where technology needs to be improved at the organization. Our approach will be to purchase equipment and supplies as required to address prevailing need.
- New domain hosting needs to be purchased for the agency to host an improved and more information driven website.
- A new computer needs to be purchased for department number 25 (TV) so that his team members can complete reports and communicate with the rest of the organization from his home.
- New printer/scanner machines need to be purchased for our Home Share Coordinators in East and West Kootenays so that they may scan and returned documents electronically to their team leader in Kelowna.
- While our database and information management system seems sufficient at this time, we may want to investigate purchasing information management/CRM software to assist in our data management efforts.
- A portable computer needs to be purchased for our Service Coordinator in the West Kootenays.

13. Do many of the organizations policies and procedures have the potential to put the organization at risk and or subject the organization to legal liability? If yes, identify the policies and any changes/revisions that need to be made and the time-line for making the changes.

- We currently do not have a policy regarding conflict of interest across service delivery areas and need to investigate the necessity of putting one in place.
- We currently do not have a policy around shared services and need to investigate the necessity of putting one in place. For example, we provide support services to several people to receive their residential services from our organization and live with a subcontractor who receives compensation from the organization for overnight supports. As there are two separate service areas implemented in one work location (residential support and home share coordination), we may need to have a policy directing the conduct of relevant personnel/subcontractors in this area.
- We are currently revisiting our policies on other relationships between relevant stakeholders. For example, persons served and employees; employee and employee; employment of relatives, etc.

14. Describe any immediate actions that need to be taken to ensure the long-term viability of the organization.

- Currently we have several key strategies to ensure that our organization stays viable over the long term.



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- We need to develop a management team that meets on a regular basis (in person or on-line) to address service issues, personnel issues, and other organizational considerations with regard to risk management.
- We need to develop a more comprehensive website that addresses health and safety considerations, risk, advocacy, coordination and support of person served, and personnel.
- We need to follow through on our commitment to purchase required technological items to assist in the administration and data management efforts of the organization.
- We would like to investigate increased use of technology to support our teams; perhaps the use of on-line meetings and webinars to successfully deal with the issues of providing supports in several regional areas of the province.

Date Report Generated: April 2010

Report Generated By: Brian Burnham, Director
Jacqueline Burnham, Quality Assurance Manager

Date For Review / Renewal: September 2010