Best Practices – Process
- Keep it simple; recognize limitations
- Ensure board engagement
- Appoint executive lead
- Appoint a knowledgeable, credible coordinator(s)
- Confirm organizational objectives
- Review existing information / data sources

Best Practices – Risk Identification
- Focus on risks to key organizational objectives
- Focus on significant risks only (i.e. risks requiring attention of senior leadership/board)
- Aggregate risks wherever possible
- Recognize that risks are interrelated; clear delineation between risks is not always possible
- Start with a few (5-10-20)

A. Care (e.g. Deliver High Quality, Compassionate, Respectful and Safe Care)
  1. Adverse events (AE) general
     a) Birth trauma
     b) Falls
     c) Abduction (infant/child)
     d) Diagnostic
     e) Infections
     f) Medication
     g) Pressure ulcers
     h) Restraints
     i) Retained objects
     j) Wrong patient/site
     k) Multi-patient incidents

  2. Access (long wait times/poor patient flow)
  3. Acuity (complexity)
  4. Care/consent conflicts (between patient/family and care providers related to care)
  5. Communication (including hand-offs)
  6. Complaints management (poor management of)
  7. Contracted services monitoring
  8. Discharge/transitions
  9. Experience/relations (including low satisfaction scores)
  10. Patient/resident funds mismanagement
  11. Length of stay (long/excessive)
  12. Monitoring (inadequate)
  13. Pain management
  14. Readmissions (high/excessive)
  15. Security/assault (of patient by staff or other patients/clients)
  16. Supply shortages (e.g. critical drugs, other supplies)
  17. Support services (inadequate, e.g. laundry, dietary)
  18. Other

B. Human Resources (e.g. Provide a Safe and Engaging Work Environment)
  1. Agency issues (poor performance of sub-contracted providers)
  2. Development (inadequate development/training)
  3. Engagement (poor, low satisfaction)
  4. Labour relations
  5. Physical injuries
  6. Psychological injuries
  7. Retention, succession
  8. Rights (violations, discrimination)
  9. Scope of practice (practicing outside scope)
  10. Shortage, aging

11. Disruptive behavior (by staff on other staff)
12. Wrongful dismissal
13. Other

C. **Financial** (e.g. Make the Best Use of Resources)
1. Contracts (failed/inadequate
2. Costs (increased salaries, supplies, etc.)
3. Fines/liabilities (unfunded)
4. Fraud (employee)
5. Inefficient use of resources
6. Investments (poor returns)
7. Procurement (mismanagement of processes)
8. Reporting (financial accounting and reporting issues)
9. Revenue/funding (unstable, decreased)
10. Supply chain (failures)
11. Other

D. **Leadership** (e.g. Positive Leadership That Fosters Organizational Values)
1. Alignment acute/non-acute (lack of)
2. Change management (lack of readiness, change fatigue)
3. Conflict of interest
4. Culture (weak, inconsistent quality, safety, ethical culture)
5. Emergency response (inadequate, business continuity issues)
6. Governance (issues)
7. Information gaps (related to key decisions)
8. Mergers (issues)
9. New program/technology (issues e.g. high costs, inadequate competency)
10. Political uncertainties
11. Strategic projects (failed/inadequate implementation)
12. Strategy alignment (lack of alignment, engagement)
13. Succession (key leaders)
14. Other

E. **External Relations** (e.g. Listen to the Needs of Our Community)
1. Community relations issues
2. Donor relations
3. Government relations
4. Media relations
5. Partner relations
6. Other

F. **IS/Technology** (e.g. Implement Clinical Information Systems to Improve Care)
1. Systems access (privacy, security, hacking)
2. Systems failure
3. Systems integration (poor)
4. Systems needs (aging, obsolescence)
5. Systems project (failure, delay)
6. Systems reliability (data loss, poor integrity)
7. Technology failure
8. Technology needs (aging, obsolescence)
9. Technology misuse
10. Other

G. Facilities (e.g. Strategically Invest in Facilities)
1. Aging/maintenance
2. Building access, security
3. Building project/construction (issues, delay)
4. Hazardous materials
5. Plant/systems failure
6. Property damage (e.g. water, fire, vandalism)
7. Visitor falls
8. Other

H. Regulatory (e.g. Incorporate Performance Agreements that Reflect Strategic Directions)
1. Accreditation (poor results)
2. Credentialing (disputes)
3. Performance agreements (targets not met)
4. Regulations/legislation non-compliance
5. Other

I. Teaching (e.g. Provide Trainees with Exceptional Learning Experience)
1. Accreditation – teaching (unfavorable, program loss)
2. Contracts – teaching
3. Student experience (poor)
4. Student performance (poor)
5. Other

J. Research (e.g. Build Strong and Sustainable Research Program)
1. Adverse events – research subjects
2. Conflict of interest – research
3. Contracts – research
4. Ethics – research
5. Funding – research
6. Grant usage
7. Inspections – research
8. Intellectual property
9. Misconduct – research
10. Other

K. Community Health (e.g. Reduce the Incidence of Preventable Disease)
1. Chronic disease management
2. Demographics (unfavorable changes)
3. First responder issues
4. Immunization (poor)
5. Prenatal care (poor access)
6. Primary care (poor access)
7. Other