# CCO ICRC

# Risk Assessment Framework

# Updated as of July 2026

## BACKGROUND

The Inquiries, Complaints and Reports Committee (ICRC) initially developed the Risk Assessment Framework in 2021 in response to the objectives of the College Performance Measurement Framework (CPMF) related to assessing complaints based on risk. The framework guides the ICRC's decision-making when addressing complaints and reports. The framework ensures consistent, fair and transparent decision-making that is guided by the panel's analysis and assessment of risk. The framework is being reviewed and updated to reflect best practices in risk-based regulation.

## PURPOSE

The framework is used by panels of Inquiries, Complaints & Reports Committee (ICRC) to evaluate cases and guide their decision-making. This means they consider the degree of risk to patient safety in evaluating each complaint & report. This includes considering any factors that may increase or decrease the level of risk. The level of risk is used to determine the appropriate proportionate outcome. In keeping with risk-based regulation best practices, outcomes for moderate and high risk matters are made public.

The ICRC explains their analysis of risk in their written reasons for decision, which the member & complainant each receive.

## LEVELS OF RISK

There are four levels of risk, and each is described with examples below.

### No risk

- No valid concerns are raised
- The member's conduct is appropriate

### Low risk

- Concerns are minor and unlikely to have a direct impact on patient care, safety or the public interest. However, there is an opportunity for the member to improve their practice.
- Member would benefit from a reminder about specific standards or requirements
- No conduct that is serious in nature, there is no indication of a pattern of conduct.

- The facts cannot be verified and disputed facts cannot be resolved. If proven the facts would not warrant referral to discipline.

Examples – Communication, record keeping, minor patient care or boundary issues

**Moderate risk**

- Concerns are likely to have an impact on patient care, safety or the public interest. The member is required to upgrade their skills to address the concern.
- Clinical or competency issues identified requiring improvement through education or remediation. (hands on courses, mentoring, assessment & evaluation)
- The member needs to upgrade their skills or change their practice, and timely improvement is required.
- A single egregious episode or a pattern of conduct that can have a direct impact on patient care, safety, or the public interest. The member is capable of improvement, and the conduct is best addressed through advice.

Examples – Competence & patient care, professional conduct & behaviour, intent to mislead/fraud, boundary issues

**High risk**

- Concerns are serious and likely to have a significant impact on patient care, safety or the public interest.
- Concerns that cannot be addressed through other remedial approaches.
- Remedial approaches have been attempted unsuccessfully
- Clinical or competency issues that require restrictions or conditions on practice or withdrawal from the profession.

Examples – ungovernability, sexual abuse, fraud

**Factors that may increase the risk**

- Member has similar past concerns
- High risk practice
- Actual harm or risk of harm
- Dishonesty or deception
- Lack of cooperation
- Financial motivation
- Likelihood of recurrence
- Ungovernability of member
- Disregard for ethical principles
- Reckless or intentionally risky behavior
- Risk of eroding public trust

**Factors that may decrease the risk**

- No actual harm
- Human error
- Member no longer practising
- Member demonstrates insight
- Member has already remediated/addressed the identified concern
- Unlikely to recur

## PROPORTIONATE OUTCOMES

**No risk**

- No further action

**Low risk**

- No further action
- Advice & recommendations

**Moderate risk**

- SCERP
- Undertaking
- Caution

**High risk**

- Discipline
- Interim order

## PANEL MEMBER CONSIDERATIONS FOR EACH CASE

1. Is any additional information required?
2. Considering the issues raised, information gathered in the investigation and the relevant CCO standards & requirements what is the level of risk & what are the reasons for assigning that level?
3. Are there factors that increase or decrease the risk level? If so, what are they?
4. Based on the final risk level, what is the appropriate proportionate outcome & reasons?