**Final Audit Report**

**Follow-up Audit of Crisis Communications**

**March 2013**

Canada

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# Executive summary

The follow-up audit of recommendations from the 2010 *Audit of Crisis Communications* was carried out as part of the Public Health Agency of Canada's (the Agency's) Risk-Based Audit Plan for 2012-13. The objective of the follow-up audit was to determine whether the implementation of the management action plan has been effective in addressing the recommendations made in the *Audit of Crisis Communications* tabled in October 2010.

An assessment of the actions taken by management was performed to address the recommendations outlined in the 2010 audit report. The follow-up audit was conducted from October 2012 to January 2013.

The key objectives of the 2010 *Audit of Crisis Communications* were to assess:

- the alignment of the Agency management framework, plans and processes, systems and practices related to crisis and emergency communications with relevant policies, protocols and mandates;
- whether the management of crisis and emergency communications activities:
    - is effective, efficient, timely;
    - takes risks into consideration;
    - is performed in cooperation with key collaborators and stakeholders; and
    - ensures that the personnel involved in crisis and emergency communications are qualified and properly trained;  and
- whether the Agency support services in the delivery of crisis and emergency communications are effective and responsive.

As part of the business transformation agenda resulting from the federal Budget 2012, the Agency's Communications Directorate and Health Canada's Public Affairs, Consultation and Communications Branch have consolidated the delivery of their services by creating the Communications and Public Affairs Branch under a single shared services partnership.

A division responsible for supporting portfolio-wide emergency and risk communication was established as part of the new Communications and Public Affairs Branch in 2012.

The follow-up audit concludes that the implementation of the management action plan has been effective in addressing the recommendations made in the 2010 *Audit of Crisis Communications*. All recommendations have been substantially or fully implemented.

Improvements have been noted in the revision to the emergency communications protocols. Many deliverables from the management action plan are now included in the draft Emergency and Risk Communication Protocols such as the triggering factors, roles and responsibilities, quality assurance, the fast track approval process etc. These protocols have been updated based on lessons learned and on the recommendations made in the 2010 *Audit of Crisis*

*Communications*. The crisis communications products will, once approved, be aligned with the Health Portfolio Emergency Response Plan. Improvements have also been noted on the development of strategic communications and human resources plans, on the risk assessment and on performance measurements. However, approvals of the Emergency and Risk Communication Protocols are required and a risk management plan and a performance measurement framework need to be completed.

# A -   Introduction

## 1.   Background

The Public Health Agency of Canada (the Agency) was created within the federal Health Portfolio in 2004 to play a key role in providing a clear focal point for federal leadership in managing public health emergencies. The Agency's efforts related to building emergency preparedness and response capacity included emergency risk communication to support and enhance the Canadian health response. Emergency and risk communication, through warning, advice, guidance and explanation often stands as the primary intervention in helping to manage serious health events. Its objectives include:

- Ensuring citizens have the information they need to make informed choices to help protect themselves and their loved ones.

- Coordinating public communication strategies with health partners, including other government departments, provincial and territorial authorities, international partners, non-government organizations and private sector organizations.

- Helping to minimize social and economic disruption associated with emergencies and supporting the transition back to normal life.

As part of the business transformation agenda resulting from the federal Budget 2012, the Agency's Communications Directorate and Health Canada's Public Affairs, Consultation and Communications Branch have consolidated the delivery of their services by creating the Communications and Public Affairs Branch (CPAB) under a single shared services partnership.

A division responsible for supporting portfolio-wide emergency and risk communication was established as part of the new Communications and Public Affairs Branch in 2012.

The 2010 *Audit of Crisis Communications* was conducted prior to this restructuring and revised allocation of resources, following H1N1 Pandemic, and focussed on that experience within the former communications structure of the Agency.

The 2010 *Audit of Crisis Communications* concluded that the Agency Communications Directorate was able to deliver sound communications response during various crises. However, there were some issues identified in the audit that needed to be addressed to improve its ability to fulfil its mandate. The audit report contained recommendations in the area of governance and strategic direction, management framework and support services.

It included twelve recommendations to strengthen areas relating to:

- crisis and emergency communications protocol;
- response capacity;
- operational risk management;
- performance; and
- quality control.

Although completed prior to the establishment of CPAB and the new Risk and Emergency Communications Division, the recommendations have been and will continue to be used as a foundation for capacity building strategy in the area of emergency risk communication for the Health Portfolio.

## 2.    Audit objective

The objective of the follow-up audit was to determine whether the implementation of the management action plan has been effective in addressing the recommendations made in the *Audit of Crisis Communications* tabled in October 2010.

## 3.    Audit scope

The follow-up audit focused on the management action plan commitments contained in the 2010 *Audit of Crisis Communications.*

## 4.    Audit approach

The progress achieved against action plan commitments has been assessed for each recommendation. The follow-up methodology included interviews and the analysis of supporting documentation. The follow-up audit was conducted from October 2012 to January 2013.

## 5.    Statement of assurance

In the professional judgment of the Chief Audit Executive, sufficient and appropriate procedures were performed and evidence gathered to support the accuracy of the follow-up audit conclusion. The follow-up audit findings and conclusion are based on a comparison of the conditions that existed as of the date of the audit, against established criteria that were agreed upon with management. Further, the evidence was gathered in accordance with the *Internal Auditing Standards for the Government of Canada* and the *International Standards for the Professional Practice of Internal Auditing*.

# B -    Findings, recommendations and management responses

## 1.    Follow-up on the 2010 audit recommendations

### 1.1.    Progress made on 2010 audit recommendations

**Audit criterion:** *Management's actions have been effective in addressing the recommendations identified in the audit tabled in 2010.*

**Recommendation implementation progress**

| Implementation rating level | Number of recommendations | Percentage |
|---|---|---|
| No progress or insignificant progress | 0 | 0% |
| Planning stage | 0 | 0% |
| Preparation for implementation | 0 | 0% |
| Substantial implementation | 10 | 83% |
| Full implementation | 2 | 17% |
| Total | 12 | 100% |

Refer to **Appendix A** for the assessment rating guide and to **Appendix B** for the detailed assessments.

The follow-up audit concludes that the implementation of the management action plan has been effective in addressing the recommendations made in the 2010 *Audit of Crisis Communications.* All recommendations have been substantially or fully implemented.
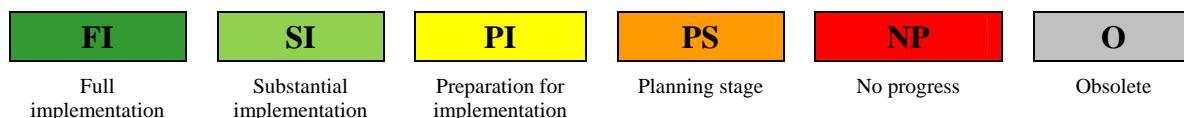
Improvements have been noted in the revision to the Emergency and Risk Communication Protocols. Many deliverables from the management action plan are now included in the draft Emergency and Risk Communication Protocols such as the triggering factors, the roles and responsibilities, quality assurance, the fast track approval process etc. These protocols have been updated based on lessons learned and on the recommendations made in the 2010 *Audit of Crisis Communications*. The crisis communications products will, once approved, be aligned with the Health Portfolio Emergency Response Plan. Improvements have also been noted on the development of strategic communications and human resources plans, on the risk assessment and on performance measurements. However, approvals of the Emergency and Risk Communication Protocols are required and a risk management plan and a performance measurement framework need to be completed.

# Scorecard

The table below summarizes the status of each audit recommendation.

| Recommendations | Rating | Conclusion | Current Target date |
|---|---|---|---|
| **Governance** | | | |
| 1 – Define the fast track approval process for crisis communications products consistent with both the Emergency and Risks Communications Protocols and the Health Portfolio Emergency Response Plan (HPERP). | **SI** | Endorsed by Branch Executive Committee and to obtain Partnership Executive Committee approval. | March 2013 |
| 2 – Develop strategic communications plans for public health crises deemed of high risk. | **SI** | Strategic communications plans need to be approved. | March 2013 |
| 3 – Develop and document a quality assurance framework to improve the quality of translation of communications products. | **SI** | Standard operating procedure for translation in an emergency needs to be included in the approved Emergency and Risk Communication Protocols. | March 2013 |
| 4 – Articulate and document the triggering factors to activate and de-activate the Emergency and Risk Communication Protocols. | **SI** | New triggers for activation and de-activation need to be included in the approved Emergency and Risk Communications Protocols. | March 2013 |
| 5 – Revise the Emergency and Risks Communications Protocols based on lessons learned and other elements identified in this audit. | **SI** | Elements from lessons learned and other elements found in the in the audit need to be included the approved Emergency and Risk Communication Protocols. | March 2013 |
| **Risk management** | | | |
| 8 – Conduct a comprehensive operational risk assessment and develop a risk management plan, including mitigating strategies. | **SI** | A risk management plan needs to be completed. | March 2013 |
| **Internal controls** | | | |
| 6 – Document and communicate a human resource (HR) plan for emergency situations. | **SI** | The HR plan needs to be completed and consistent with the new communications structure and an emergency and risk communication training plan also needs to be completed. | December 2013 |
| 7- Obtain more detailed inputs from contractors when submitting invoices to strengthen internal controls. | **FI** | Completed. | |
| 8 – Develop a performance measurement framework to assess both its internal and external crisis communications performance. | **SI** | A performance measurement framework to assess internal and external crisis communications needs to be completed. | March 2013 |

| Recommendations | Rating | Conclusion | Current Target date |
|---|---|---|---|
| 9 – Articulate, document and communicate the roles and responsibilities of the Strategic Policy Directorate in communicating and in sharing information with major non-governmental organizations. | **FI** | Completed. | |
| 10 – Establish an appropriate structure and process to document discussions and critical information shared with major non-governmental organizations during a crisis. | **SI** | A structure and process to document discussions and critical information shared with major non-governmental organizations during a crisis needs to be completed. | March 2013 |
| 11 – Define and document the needs and expectations from internal support services and develop the necessary administrative arrangements. | **SI** | Administrative arrangements with internal support services need to be formalized. | December 2013 |

| **FI** | **SI** | **PI** | **PS** | **NP** | **O** |
|---|---|---|---|---|---|
| Full implementation | Substantial implementation | Preparation for implementation | Planning stage | No progress | Obsolete |

# Appendix A – Lines of enquiry and audit criteria

| Follow-up Audit of Crisis Communications | |
|---|---|
| **Criteria Title** | **Audit Criteria** |
| **Line of Enquiry 1:** *Follow-up on the 2010 Audit Recommendations* | |
| 1.1 Progress made on 2010 recommendations | Management's actions have been effective in addressing the recommendations identified in the audit tabled in 2010. |

### 1. No progress or insignificant progress
No action taken by management or insignificant progress. Actions such as striking a new committee, having meetings and generating informal plans are insignificant progress.

### 2. Planning stage
Formal plans for organizational changes have been created and approved by the appropriate level of management (at a sufficiently senior level, usually Executive Committee level or equivalent) with appropriate resources and a reasonable timetable.

### 3. Preparation for implementation
The entity has begun necessary preparation for implementation, such as hiring or training staff, or developing or acquiring the necessary resources to implement the recommendation.

### 4. Substantial implementation
Structures and processes are in place and integrated in some parts of the organization, and some achieved results have been identified. The entity has a short-term plan and timetable for full implementation.

### 5. Full implementation
Structures and processes are operating as intended and are implemented fully in all intended areas of the organization.

### 6. Obsolete
Audit recommendations that are deemed to be obsolete or have been superseded by another recommendation.

# Appendix B – Assessment of recommendation implementation

<table>
<tr><td colspan="4" align="center"><strong>Recommendation 1 (57a) [1]</strong></td></tr>
<tr><td colspan="4"><em>The Communications Directorate should define the fast track approval process for crisis communications products in a consistent manner in both the Crisis and Emergency Communications Protocol and the Health Portfolio Emergency Response Plan (HPERP).</em></td></tr>
<tr><td align="center"><strong>Overall Assessment</strong></td><td colspan="3" align="center"><strong>Substantial implementation</strong></td></tr>
<tr><td align="center"><strong>Planned Actions</strong></td><td align="center"><strong>Target Date</strong></td><td align="center"><strong>Progress to date</strong></td><td align="center"><strong>Status of action item</strong></td></tr>
<tr>
<td><strong>A1.</strong> The Director General (DG), Communications will work with the DG, Centre for Emergency Preparedness and Response (CEPR) to clarify and articulate the fast-track approval process and ensure it is consistently reflected in the Protocol and the Health Portfolio Emergency Response Plan (HPERP).</td>
<td>March 2011</td>
<td>As part of the business transformation agenda resulting from the federal Budget 2012, the Public Health Agency of Canada's (the Agency's) Communications Directorate and Health Canada's Public Affairs, Consultation and Communications Branch have consolidated the delivery of their services by creating the Communications and Public Affairs Branch (CPAB) under a single shared services partnership.

A division responsible for supporting portfolio-wide emergency and risk communication was established as part of the new CPAB in 2012.

This change in common services affected the Portfolio governance structure. A new Partnership Executive Committee (PEC) has been created.  Prior to the merger, the Agency developed an emergency fast-track approvals process. However, this process was no longer representative of the practice across the newly created Branch. To address this, communications approvals have since been centralized and an updated fast-track approval process has been developed.

The process has been endorsed by the Branch Executive Committee (BEC). It will now be presented to PEC for approval.  Communication of the fast-track approval</td>
<td>Substantial implementation</td>
</tr>
</table>

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[1] The number in brackets refers to the paragraph number where the recommendation was made in the 2010 *Audit of Crisis Communications*.

|  |  | process will occur following this approval. In addition, changes related to the updated fast track approval process will be reflected in the HPERP. The approval process is expected to be completed at the end of March 2013.

The change in the Portfolio structure has required a review of work to date to ensure the new approvals process aligns with the new governance.

**Revised date: March 2013** |  |

## Recommendation 2 (57b)

*The Communications Directorate should develop, in advance, strategic communications plans for public health crises deemed of high risk. Such plans would clearly delineate the strategic considerations, key communications messages, and strategic approach to respond to communication needs and establish the communications priorities of the Communications Directorate.*

| Overall Assessment | | Substantial implementation | | |
|---|---|---|---|---|
| **Planned Actions** | **Target Date** | **Progress to date** | | **Status of action item** |
| **A1**. Strategic communications plans for public health crises deemed to be the highest risk through the CEPR risk assessment exercise will be developed.

The CEPR risk assessment exercise will be completed later on during the next fiscal year. | March 2012 | The top three threats identified in the CEPR threat and risk assessment in December 2012 were pandemic, food safety and biological incidents. Communications plans for pandemic and food safety exist under the "Canadian Pandemic Influenza Plan for the Health Sector "(CPIP) Annex K and Foodborne Illness Outbreak Response Protocol (FIORP). The Risk and Emergency Strategic Communications Division has drafted a crisis communications plan for biological incidents that will serve as an annex to the all-hazards Emergency and Risk Communication Protocols. Additionally, a shared services communications plan template has been created and approved. This template would be used in conjunction with the more fulsome, hazard-specific plans as reference.

Approval of the biological incidents communications plan is required. It will then be shared and training will be provided. To ensure alignment with the new communications and governance structures between Health Canada and the Agency, and to meet the spirit of the 2010 *Audit of Crisis Communications*, other | | Substantial implementation |

<table>
<tr><td colspan="4">communications plans may be required from a Health Portfolio context. Moving forward, the above mentioned template could be used as a base to building additional hazard-specific communication plans. Validation of certain communications plans will need to be done through exercises or actual events. Exercises will be supported according to the Health Portfolio Exercise Plan (currently being updated by the CEPR for 2013-16).

The revised Emergency and Risk Communication Protocols are expected to be approved in coordination with the revised HPERP in March 2013 (the communications protocols will be an annex). With approval of the protocols, future training will be updated to include reference to the various hazard-specific communications plans. Strategic communications plans for public health crises deemed to be the highest risk through CEPR's risk assessment exercise will be developed.

**Revised date: March 2013**</td></tr>
</table>

| Recommendation 3 (57c) | | | |
|---|---|---|---|
| *The Communications Directorate should develop and document a quality assurance framework to improve the quality of translation of communications product.* | | | |
| **Overall Assessment** | **Substantial implementation** | | |
| **Planned Actions** | **Target Date** | **Progress to date** | **Status of action item** |
| **A1. T**he DG, Communications will develop a quality assurance framework for communications products produced by the Communications Directorate. The framework will outline standards and principles for the development of communications products. Additionally, options will be developed to identify resource requirements to support the overall quality assurance initiative and ultimately improve content consistency for audiences. | March 2011 | The Agency made significant progress on this action prior to the merger. Research on this included discussions with a number of key stakeholders. The Agency Communications staff met with representatives of the Translation Bureau, and with the internal Assets and Material Management (AMM) group. The Translation Bureau provided detail on the services they provide in an emergency. AMM has set up a contract with another firm that could be used by Communications during an emergency. In addition, with the combined Health Canada/Agency communications branch, there are now more on site translation resources available. | Substantial implementation |

|  | The "Standard Operating Procedure for Translation during an Emergency" was drafted to be included in the Emergency and Risk Communication Protocols to serve as the quality assurance framework for translation.<br><br>Approval of the Emergency and Risk Communication Protocols is expected with the approval of the revised HPERP in March 2013.<br><br>**Revised date: March 2013** |  |
|---|---|---|

| **Recommendation 4 (57d)** |||
|---|---|---|
| *The Communications Directorate should articulate and document the triggering factors to activate and de-activate the Crisis and Emergency Communications Protocol.* |||
| **Overall Assessment** | **Substantial implementation** ||
| **Planned Actions** | **Target Date** | **Progress to date** | **Status of action item** |
| **A1.** The Crisis Communications Protocols will be updated to elaborate on activation and de-activation. | March 2011 | The Emergency and Risk Communication Protocols already drafted are being reviewed to ensure alignment with the new Communications and governance structures between Health Canada and the Agency.  New triggers for activation and de-activation of the Emergency and Risk Communication Protocols in emergency situations were drafted and included in these Protocols. The approval of the Protocols will include approval of the activation and de-activation triggers. The Risk and Emergency Communications Division (RECD) created an "Emergency and Risk Communication Assessment and Initial Response Tool" that acts as a decision making tool for those responsible for setting strategic communication direction, organizing staff and resources in the initial stages of an emergency.<br>Training on the approved Protocols (including triggers) will occur in 2013-14. A training plan has now been drafted but is not yet fully approved. Multiple emergency and risk communication training sessions are planned for 2013-14.<br>**Revised date: March 2013** | Substantial implementation |

Note: the header row "Planned Actions / Target Date / Progress to date / Status of action item" has four columns; the rows above with two and three cells are spanning cells.

| Recommendation 5 (93a) | | | |
|---|---|---|---|
| The Communications Directorate should revise the Crisis and Emergency Communications Protocol based on lessons learned and other elements identified in this audit. Once reviewed, it should be approved by the Executive Committee and disseminated more broadly within the organization and tested with all those having key responsibilities under it. | | | |
| **Overall Assessment** | **Substantial implementation** | | |
| **Planned Actions** | **Target Date** | **Progress to date** | **Status of action item** |
| **A1.** The Crisis and Emergency Communications Protocol is being revised based on lessons learned and these audit findings and will be brought to the Joint Emergency Preparedness Committee for approval before being brought to the Deputy Heads of the Agency and Health Canada for approval. | March 2011 | The draft Emergency Communications Protocols are being reviewed and updated to ensure alignment with the new Communications and governance structures between Health Canada and the Agency.  Many deliverables from this management action plan are now included in the draft "Health Portfolio Protocols for Emergency and Risk Communication (PERC)"such as the triggering factors, roles and responsibilities, quality assurance, the fast track approval process etc.  The Protocols have been revised to ensure that they act as a comprehensive reference while still effectively supporting operations during an emergency. Changes include the addition of information in a "Concept of Operations" section. Further changes are the addition of specific hazard considerations and ensuring that roles and responsibilities are accurately defined.  These changes place a larger focus on tools, templates and other products that communications stakeholders can reference. Additionally, the Protocols are being integrated into the Emergency Risk Communication Training to build capacity for emergency response with existing staff.<br><br>The revision of the draft Emergency Communications Protocols and its approval need to be completed to ensure alignment with the new Communications and Governance structures. Training on the revised and approved Emergency Communications Protocols will begin in 2013-14.<br><br>The revised Emergency Communications Protocols are expected to be approved in coordination with the revised | Substantial implementation |

| | | HPERP in March 2013 (as the communications protocols will be an annex).<br><br>**Revised date: March 2013** | |
|---|---|---|---|

<table>
<tr><td colspan="4" align="center">**Recommendation 6 (93b)**</td></tr>
<tr><td colspan="4">*The Communications Directorate should document and communicate a Human Resource Plan for emergency situations that includes the following elements:*<br>　i)　*Analysis of crisis communications current and future resources requirements and competency needs;*<br>　ii)　*analysis of key positions and competencies for those positions as well as a succession planning/retention strategy;*<br>　iii)　*development of a roster of surge resources to facilitate the hiring and contracting of additional personnel with appropriate skills sets;　and*<br>　iv)　*detailed training and development plan (as required) to ensure that staff involved in crisis communications are qualified to support or improve the effectiveness and efficiency of communications activities during a crisis.*</td></tr>
<tr><td align="center">**Overall Assessment**</td><td colspan="3" align="center">**Substantial implementation**</td></tr>
<tr><td align="center">**Planned Actions**</td><td align="center">**Target Date**</td><td align="center">**Progress to date**</td><td align="center">**Status of action item**</td></tr>
<tr><td>**A1.** In collaboration with the DG, Human Resources, the DG, Communications will direct the development of a human resource plan for emergency situations that will build on lessons learned. This plan could serve as a template for other parts of the Agency that will need similar plans.</td><td>April 2011</td><td>Communications met with the Human Resources Services Directorate (HRSD) to plan a way forward for this analysis. A draft "PHAC HR Plan" was developed for Communications.<br><br>Given the merger of the new Branch, the HR plan will be reviewed and updated. Portions of the previous Agency HR Strategy will be used as an overlay to the new Branch's strategy.<br><br>**Revised date: December 2013**</td><td>Substantial implementation</td></tr>
<tr><td>**A2.** Work is already under way for analyzing resource requirements, competencies for key positions, succession and retention strategies and developing rosters of surge resources for future crisis response.</td><td>April 2011</td><td>An analysis of current and future resource requirements was articulated in an HR table to be used for future HR planning. This analysis was based on the restructuring of the Incident Management System (IMS) within the update of the Emergency and Risk Communication Protocols, and the updating of roles and responsibilities using lessons learned from previous activations.<br><br>The Communications Division also discussed with HRD overall Agency plans for managing surge capacity requests to support emergency response and the HPERP. In the interim, it was decided to form a roster of internal staff that could function as surge for various positions in a communications IMS as part of the crisis HR plan. As</td><td>Substantial implementation</td></tr>
</table>

| | | part of the regular directorate HR plan, there is a step-by-step approach for acquiring surge resources quickly. This has been incorporated into the Emergency and Risk Communication Protocols.<br><br>The Division is leading on the delivery of scenario-based workshops to build capacity in the Health Portfolio for communicating effectively during high-risk public health events. Currently a roster of 45 Communications employees have been trained in the past 12-16 months in Emergency Risk Communication workshops. Work will continue to ensure this list is kept up to date as more training is conducted. Further, administration staff will be briefed on the draft Internal Surge Capacity Framework (ISCF) developed by CEPR. The ISCF should also inform the new Branch HR plan. The roster will continue to be updated after the each training session or workshop.<br><br>For each of the internal staff identified to fill various key positions within the Communications IMS, training plans have been recommended to ensure their competence is kept up to standard for responding to crises.<br><br>**Revised date: December 2013** | |
|---|---|---|---|
| **A3.** As part of the existing work plan for Crisis and Emergency Communications, a training module on crisis communications is being developed this fiscal year. Once the Protocols are revised and approved, all communications staff and key communications collaborators within the Agency will be provided training on their applicability and operation. In the meantime, should a crisis arise, at the beginning of the response, a refresher on the Protocol will be given to staff involved in the response. | Dec. 2010 | The Risk Communications Division has begun training communications staff and select program staff across the Health Portfolio in risk communication, which includes a crisis communications component. Training on the new Emergency and Risk Communication Protocols will continue to be a priority deliverable in fiscal year 2013-14.<br><br>CEPR is currently developing a Health Portfolio emergency management training plan. An emergency and risk communication training plan will be developed to align with the CEPR plan, and to ensure other training is available for communications employees.<br><br>**Revised date: December 2013** | Substantial implementation |

## Recommendation 7 (93c)

*The Communications Directorate should obtain more detailed inputs from contractors when submitting invoices to strengthen internal controls to ensure that appropriate stewardship of expenditures is exercised.*

| Overall Assessment | Full implementation | | |
|---|---|---|---|
| **Planned Actions** | **Target Date** | **Progress to date** | **Status of action item** |
| **A1**. The DG, Communications will develop standards for timesheets reporting by contractors. | Dec. 2010 | A new template for detailing contractor work has been developed and distributed to Communications managers for use with contractors. Emergency communications managers are aware of the requirements to ensure that contractors properly describe the services rendered prior to approving the template. This template will be used during emergencies and will be referenced in the updated crisis communications protocols. | Full implementation |

## Recommendation 8 (93d)

*The Communications Directorate should conduct a comprehensive operational risk assessment and develop a risk management plan, including mitigating strategies.*

| Overall Assessment | Substantial implementation | | |
|---|---|---|---|
| **Planned Actions** | **Target Date** | **Progress to date** | **Status of action item** |
| **A1**. The DG, Communications will conduct an operational risk assessment and develop a risk management plan with mitigating strategies. | March 2011 | The Risk and Emergency Communications Division (RECD) completed a crisis communications risk profile in February 2012. The risk profile provides an understanding on how communications risks are identified, assessed, prioritized and how the RECD determines the risk treatment.<br><br>Following the merger, it became necessary for the RECD to be well integrated in risk management processes across the Portfolio. To help achieve this goal, the Division is represented on the Agency's Risk Management Oversight Committee, which gives communications senior management input to a possible risk issue.<br><br>The Division has also increased collaboration with Health Canada and led the development of the | Substantial implementation |

| | "Regulatory Risk Communications Consumer Product Safety Pilot Project". The pilot project will act as a stepping stone to better integrate risk into Health Canada's risk management process. A project charter has been agreed to between working group members, and a project team has come together to strengthen regulatory risk communication. Activities being undertaken include taking stock of existing risk communication practices, and revising them to better align with risk communication principles, and developing a training plan and workshop to build capacity in this area.<br><br>The Division will also be hosting other ongoing workshops to address various risk issues such as the response to a nuclear event. This work will be reflected in the Emergency Risk Communication Training Plan for 2013-14 (currently in development).<br><br>**Revised date: March 2013** | |
|---|---|---|
| **Recommendation 9 (93 e)** | | |
| *The Communications Directorate should develop a performance measurement framework to assess both its internal and external crisis communications performance.* | | |
| **Overall Assessment** | **Substantial implementation** | |

| **Planned Actions** | **Target Date** | **Progress to date** | **Status of action item** |
|---|---|---|---|
| **A1**. The DG, Communications in collaboration with the Chief Financial Officer will develop a performance measurement framework. | Sept. 2011 | The Risk and Emergency Communications Division undertook work on the performance measurement process and on the development of the performance management framework.<br><br>These outputs and outcomes as part of the framework are being updated as part of the revised protocols, so Communications employees know what is expected and how to measure performance during an emergency event. Due to the merger of shared services, the performance measurement framework has not yet been included as part of the emergency risk communication training. However, the framework continues to be assessed for its relevance to the new Branch and revisions are made as | Substantial implementation |

| | | |
|---|---|---|
| | necessary. Performance measurement will need to be included in the Emergency and Risk Communication Protocols training.<br><br>The performance measurement requirements will be included in the protocol document expected to be approved in March in concert with the HPERP.<br><br>**Revised date: March 2013** | |

## Recommendation 10 (107a)

*The Communications Directorate should articulate, document and communicate the roles and responsibilities of the Strategic Policy Directorate in communicating and in sharing information with major non-governmental organizations.*

| Overall Assessment | Full implementation | | |
|---|---|---|---|
| **Planned Actions** | **Target Date** | **Progress to date** | **Status of action item** |
| **A1**. The DG, Communications will work with the DG, Strategic Policy to articulate each directorate's roles and responsibilities with regard to stakeholder communications. This will be included in the Protocol and will be communicated to collaborators. | March 2011 | Roles and responsibilities were negotiated with the Strategic Policy and International Affairs Directorate (SPIAD) and have been articulated and drafted for inclusion in the Emergency and Risk Communication Protocols. Additionally, the Risk Communications Division has created a network of non-government organization (NGO) communications representatives to facilitate contact in advance of a crisis. A contact list for this network has been compiled. It is updated regularly and has been included in the Emergency and Risk Communication Protocols. In March 2012, the Risk Communications Division met with NGO representatives of a Public Health Network (PHN) Communications Group and with federal/provincial/territories representatives to develop recommendations for communicating with front line medical staff in a public health emergency.<br><br>The activity to confirm roles and responsibilities is complete. The NGO network will continue to be engaged in future activities and meetings, as appropriate. | Full implementation |

| Recommendation 11 (107b) | | | |
|---|---|---|---|
| *The Communications Directorate should establish an appropriate structure and process to document discussions and critical information shared with major non-governmental organizations during a crisis.* | | | |
| **Overall Assessment** | **Substantial implementation** | | |
| **Planned Actions** | **Target Date** | **Progress to date** | **Status of action item** |
| **A1**. As part of this, a process for documenting and sharing the results of stakeholder discussions will be set and included in the Protocol. | March 2011 | Further to the work described in the item above (recommendation 10), Risk Communications Division has drafted an operational plan for inclusion in the Emergency and Risk Communication Protocols to document discussions and information shared during a crisis with NGOs.<br><br>Given the merger, protocols will need to be adapted to include additional Health Portfolio stakeholders. It is expected that much of the work can be easily adapted to the new governance. The NGO network will continue to be engaged in future activities and meetings will be held, as appropriate with them. Membership may be expanded.<br><br>The network of NGOs had to first be established with an agreed upon approach before the standard operating procedure could be drafted.<br><br>**Revised date: March 2013** | Substantial implementation |

| Recommendation 12 (107 c) | | | |
|---|---|---|---|
| *The Communications Directorate should define and document the needs and expectations from internal support services and develop the necessary administrative arrangements to ensure that Communications management and staff clearly understands financial, administrative, legal and human resources rules, regulations and restrictions during crises.* | | | |
| **Overall Assessment** | **Substantial implementation** | | |
| **Planned Actions** | **Target Date** | **Progress to date** | **Status of action item** |
| **A1**. The DG, Communications will work with counterparts in corporate and administrative support services to define service level expectations and delivery models during times of crisis response. | March 2011 | The Emergency and Risk Communication Protocols already drafted are being reviewed to ensure alignment with the new communications and governance structures between Health Canada and the Agency. Processes such as administration, contracting and standard operating procedures (SOPs) have been included in the Emergency | Substantial implementation |

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| | | and Risk Communication Protocols. The Communications and Public Affairs Branch (CPAB) is exploring the use of service level agreements (SLAs) between CPAB, Health Canada and Agency the branches it supports.  These SLAs could include specific reference to emergency communications requirements. <br><br> The extent to which SLAs will incorporate reference to emergency communications requirements needs to be determined.  Information on these administrative processes and SOPs need to be included in the emergency communications protocols training that will occur in 2012-13 and beyond. <br><br> **Revised date: December 2013** | |