

Quality Improvement Plan (QIP)

Narrative for Health Care Organizations in Ontario

March 6, 2026

OVERVIEW

AgeCare Elmira is a 36-bed long-term care home located in Elmira. Elmira is part of Woolwich county which is located on/in the traditional territory of Anishinaabeg, Haudenosaunee, Attiwonderonk and Mississauga's of the Credit First Nation and Mississauga peoples. This territory is covered by the Haldimand Treaty and Treaty 3, 1972.

Our AgeCare mission is to “Create a home where residents are honored as individuals and where we provide the best quality of life experience with the support of team members and families.” Our vision is to “Transform and lead quality, services, and innovation in the publicly funded long-term care sector in Canada.” Our values and guiding principles focus on trust, respect, quality and teamwork.

Our Continuous Quality Improvement Committee oversees the quality programs in our home and is led by the Executive Director. The interdisciplinary team consists of the home’s leadership team, a resident and family representative, front-line team members, and external partners that support our home such as our Medical Director, Dietitian, Pharmacy Consultant and other allied health professionals. This team meets quarterly to review survey results, data and input received from our Resident and Family Councils, team members, external partners and our other quality subcommittees.

After analyzing and trending home results, our CQI committee determines the prioritization of improvement initiatives and is responsible for developing action plans, monitoring the plan, providing updates to key-stakeholders and adjusting the plan. The

CQI plans, actions and evaluation of the plan is shared at Resident and Family Council meetings, Team-Up meetings with staff members. town hall forums and posted on our home website.

In 2025, our home focused on three priority areas: improving resident experience related to how well staff listen, reducing resident falls, and decreasing the number of residents receiving antipsychotic medications without a supporting diagnosis.1. Increased positive response by residents to the question "How well do staff listen to you".

1. Resident Experience – “How well do staff listen to you”

We achieved an improvement in this indicator; however, our final result of 87.5% fell short of our target of 95%. This remains a key area of focus for the upcoming year. To further enhance resident experience—particularly during mealtimes—AgeCare Elmira has been selected to participate in the CHOICE+ Mealtime Experience Study, which will support our efforts to strengthen communication, engagement, and overall resident satisfaction. Increasing our residents satisfaction in the area of "how well do staff listen to you" will drive indicators around resident perception of dignity and choice which we will see reflected in the 2026 resident engagement survey

2. Reduction of Resident Falls

Although we did not meet our target for fall reduction, our work this year highlighted several important opportunities for improvement. We identified the need to reassess the safety devices currently in use, evaluate their effectiveness in preventing falls and injuries, and introduce new interventions where appropriate. We also recognized gaps in adherence to care plan interventions. As a

result, we are reinforcing staff education, auditing compliance, and improving the quality of documentation completed during the Post-Fall Huddle assessment, which is reviewed at Team Up meetings.

3. Antipsychotic Use Without a Supporting Diagnosis

We achieved significant success in this area, improving the indicator by 77.01%. This reflects strong interdisciplinary collaboration, careful medication review, and ongoing commitment to ensuring residents receive appropriate, evidence-based care.

ACCESS AND FLOW

Optimizing system capacity, ensuring timely access to care, and enhancing the resident experience remain priorities for Elmira AgeCare. Although we are a rural home, we continue to leverage strong partnerships across care sectors to support timely admissions, reduce avoidable hospitalizations and emergency department visits, promoting seamless transitions of care.

We recognize the importance of providing the right care at the right time. Our interdisciplinary team works collaboratively toward the shared goal of achieving the best possible outcomes for residents. We continue to partner with the Nurse-Led Outreach Program for Nurse Practitioner support during our recruitment phase and for ongoing acute illness education. We have also expanded Social Service Worker support to assist residents with transfers and transitions within the home. With the additional Ministry funding for four hours of care, we have enhanced our PSW and Registered Staff complement. Our home also benefits from exceptionally high staff retention, allowing team members to build meaningful connections with residents and provide consistent, person-centered care.

Our internal BSO team works closely with the Regional Geriatric Mental Health Outreach Team to support residents living with mental health conditions and dementia. Nineteen staff members have completed the AgeCare IMAGINE program, which focuses on dementia care, meaningful family engagement, and leadership development for front-line team members. Our Infection Prevention and Control Lead has advanced IPAC training and collaborates with the regional IPAC Hub and AgeCare corporate IPAC consultants.

We offer a wide range of onsite services for resident comfort and convenience, including physiotherapy, dental care, hygiene services, optician services, hearing/otology, psychogeriatric resource consultation (PRC), geriatrician support, social work, spiritual care, a robust BSO committee and GPA coach team, a palliative care program, and a customized incident/witness reporting system to enhance reporting and trend identification.

We continue to use technology to improve resident care. Clinical Connect provides valuable health history information to support individualized care planning. We also utilize partner platforms such as the LifeLabs Portal, CareRx Portal, STL Imaging Portal, and VitalAire website to support coordinated care and timely service delivery.

Our clinical team collaborates closely with Ontario Health at Home to determine appropriate placement for residents. We also work with hospital discharge planners to ensure seamless transitions during move-ins or readmissions. An admission nurse supports residents and families throughout the transition into our long-term care home.

EQUITY AND INDIGENOUS HEALTH

AgeCare's commitment to health equity is rooted in our mission to create a home where residents are honored as individuals and supported in achieving the best possible quality-of-life experience.

In alignment with our Local Service Accountability Agreement, all managers and front-line team members have completed training in Equity, Inclusion, Diversity, and Anti-Racism, as well as Indigenous Cultural Safety and Awareness.

Our home is in the second year of a three-year Cultural and Diversity Strategic Plan, which focuses on continuous learning, education, and awareness for both staff and residents. By 2026, we aim to further integrate this knowledge into programs and services that respect and celebrate each resident's individuality.

Elmira AgeCare continues to grow as a culturally diverse community, reflected in both our residents and our team members. Our team brings a wide range of cultural backgrounds and helps lead events such as Diwali and the Festival of India, while our Mennonite team members contribute to Easter, Christmas, and other community-based celebrations. These shared traditions enrich our home and strengthen our sense of community.

As we welcome residents and staff from a wide range of cultural backgrounds, we remain committed to fostering cultural understanding and belonging. We will continue to host social events—including themed meals, cultural celebrations, and activities that recognize diverse traditions and religious practices—while honoring the preferences and traditions of our resident population and building meaningful community connections.

PATIENT/CLIENT/RESIDENT EXPERIENCE

We are committed to resident-centred care and to continuously improving the quality of life for those who call our home their own. Residents and families play an essential role in shaping our services, and we actively seek their input through multiple channels. Our Resident Council and Resident Food Committee remain strong partners in this work, and both a resident and a family member participate on our Continuous Quality Improvement (CQI) Committee. We currently do not have a Family Council in place. Feedback is gathered not only through these committees but also through day-to-day conversations, audits, concerns and compliments, and formal surveys. We also collaborate with external partners and align our efforts with provincial priorities.

2025 Resident and Family Experience Survey:

Our 2025 Resident and Family Experience Survey was conducted from July 7–25, 2025. Residents who required assistance were supported by volunteers or family members. A total of 15 residents participated, compared to 34 respondents in 2024. Several enhancements were introduced the AgeCare Survey to improve alignment and the quality of feedback. New domains were added—including IPAC and Contracted Services—and existing categories were refined, such as separating Environment, Housekeeping, and Laundry into distinct groupings.

Overall Satisfaction

Resident overall satisfaction was 88%, based on four key questions:

- “I am satisfied with my residence as a place to live”
- “I would recommend my residence as a place to live”
- “This home/community feels like home to me”
- “I feel part of this community”

Satisfaction by Domain

Environment 94%
 Recreation 88%
 Overall Satisfaction | 88%
 Your Care Team 84%
 Safety 84%
 Privacy and Choice 80%
 IPAC 79%
 Contracted Services 79%
 Housekeeping and Laundry 77%
 Communication 72%
 Dining Services 56%

Greatest Opportunities for Improvement

Survey results highlighted several areas where residents would like to see enhancements:

Dining Services (46%)

Menu variety, cultural food preferences, and food temperature.

Privacy and Choice (59%)

Opportunities to make personal choices, enjoy outdoor space, and have more autonomy in how they spend their day.

Contracted Services (61%)

Access to hairdressing services and satisfaction with incontinence products.

Sharing Results and Moving Forward

We received our survey results in December 2025 and shared the findings and action plan with Resident Council at their January 2026 meeting, as our home was in outbreak during December. Team members were updated during daily Team-Ups the week of

December 16, 2025, and again the week of January 6, 2026. The completed plan will be again reviewed with the Councils at their next meeting and throughout 2026, we will continue to review our action plan, monitor progress, and make adjustments based on ongoing feedback. Increasing survey participation remains a priority so that our indicators more accurately reflect the experiences of our residents. Additionally, the CQI plan will be posted on our resident-family communication board so all residents, family and staff have the opportunity to review.

2026 Quality Improvement Priorities

With input from residents, families, and team members, our CQI Committee has identified three priority areas for 2026:

1. Enhancing Communication

Our primary focus will be improving positive responses to the question "How well staff listen to you?". This work will be closely tied to creating a more pleasurable and engaging dining experience, as mealtime interactions are a key opportunity for meaningful communication.

2. Reducing Resident Falls

We will strengthen fall-prevention strategies, enhance staff education, and improve consistency in care-plan implementation to reduce fall rates and support resident safety.

3. Improving Skin and Wound Care

We will advance our skin and wound care practices with the goal of reducing home-acquired pressure injuries and decreasing our related quality indicator by 50%.

These priorities reflect our commitment to resident safety, comfort,

dignity, and overall quality of life. By working collaboratively with residents, families, and team members, we aim to ensure that every resident feels heard, supported, and at home.

PROVIDER EXPERIENCE

Each year, our organization distributes an Employee Engagement Survey to assess staff satisfaction with the organization, their work environment, and their overall employment experience. As with our Resident Satisfaction Survey, we measure the percentage of respondents who "Strongly Agree" or "Agree" with key indicators. The 2025 survey was administered online from August 4–22, 2025. Our overall employee engagement score was 66%, based on responses to three core questions: satisfaction with the organization as a workplace, willingness to recommend the organization, and intention to remain employed. These indicators are important measures of retention and recruitment.

Strengths identified in the survey included job contribution, job performance, and training support. Opportunities for improvement included workload, growth opportunities, and recognition. Survey results were shared with staff during Team-Ups in early January, where team members were invited to provide input and ideas for addressing these opportunities.

To support recruitment and address human resource challenges, our home continues to partner with colleges and universities for student placements, host Internationally Educated Nurses through the SPEP program, and welcome PSW students through the Ontario Health PSW initiative. Our corporate office also supports recruitment through a referral program and a dedicated recruitment team.

We recognize that supporting our team members is essential to retention. Our home offers a recognition program and events, daily Team-Ups that encourage two-way communication, and access to an Employee and Family Assistance Program. In 2025, a key priority is strengthening the stability and sustainability of our WOW recognition program, which allows staff to recognize peers and be entered into a corporate-wide recognition initiative. All meetings include a focus on WOW and Gratitude acknowledgments to celebrate the contributions of our team.

SAFETY

The safety and security of our residents is paramount. In our 2025 Resident Survey, 82% of residents strongly agreed that they feel safe in our home. We maintain a robust process for responding to safety events, including incident reporting, analysis, and the development of individualized safety plans. Safety events are tracked and trended using PointClickCare, Workbooks, and Emerging Issue Reporting. Both our in-house quality teams and our corporate office review this data to identify opportunities to improve practices and prevent future incidents.

Ministry funding initiatives have enabled us to purchase additional equipment and technology to enhance resident safety. We have expanded our Falls Prevention resources with motion-detected video monitoring, motion-activated alarms, fall mattresses, hip protectors, and wedge surfaces. Our home also operates a fully functioning Automatic Drug Dispensing Cabinet for emergency medications and has upgraded our electronic medication management system to further strengthen medication safety. Each year, we complete the ISMP Medication System Safety Assessment

with our pharmacy partner to identify additional improvement opportunities. Electronic medication incident reporting supports more advanced trending and root-cause analysis.

We continue to invest in education for our team members, including Infection Prevention and Control credentialing for our IPAC Lead, Advanced Wound Care training for our Skin and Wound Leads, and IMAGINE training for leadership and front-line staff.

Our corporation issues Safety Alerts and Notifications when an event in one home may have implications for others. These alerts prompt us to review our own processes and provide targeted education to team members on risk and prevention.

Our organization also uses the Health Connex IPAC and Quality application, which has strengthened our ability to track and trend KPIs through internal audits. Additional audit tools focusing on clinical programs, occupational health and safety, and IPAC will be introduced in 2025 to further enhance this work.

PALLIATIVE CARE

Our organization is proud of our palliative care program, which is grounded in a palliative approach that honors each resident's spirituality, values, beliefs, and wishes. Goals of Care discussions begin at move-in and are revisited with any significant change in health status and at least annually for each resident. These conversations guide care and treatment decisions and consider all domains of well-being, including cultural and spiritual preferences. Our home has a strong interdisciplinary palliative care team that supports residents and families throughout their journey. The team addresses all domains of palliative care and includes a chaplain who

provides spiritual support or connects residents with external partners when needed. All departments—clinical, dietary, programs, and environmental services—receive education on the palliative approach through our Surge Learning platform.

Our palliative program includes palliative care carts, family and caregiver accommodations at end-of-life, pain and symptom management, and education for residents and families on goals of care, end-of-life, and bereavement. Emotional support is provided to residents, families, and staff. Residents may also participate in our Legacy Program, which offers meaningful keepsakes such as hand molds, art pillows, or paintings that can be gifted to loved ones. This program has been very well received.

We continue to partner with external organizations with expertise in palliative and end-of-life care, including the Palliative Care Network, Palliative Pain and Symptom Management Consultants, and CLRI. Several staff members have completed the Fundamentals of Palliative Care, the LEAP program, and additional palliative education through colleges and universities.

All staff support residents throughout their end-of-life journey with compassion and respect. A butterfly is placed on the door of residents who are nearing end-of-life, allowing others the opportunity to visit. When a resident passes, our team holds an honor guard as they leave the home, presents the family with a card, and places a memorial photo and flower at the front entry for co-residents and visitors. This practice allows the community to acknowledge and honor the resident's life.

POPULATION HEALTH MANAGEMENT

Although our organization is not part of an Ontario Health Team, we work closely with external partners to proactively meet the needs of our resident population. Our home partners with Ontario Health at Home to review applications for appropriate placement, and we are able to support residents with moderately complex care needs through additional funding for equipment, technology, and staffing. In 2025, AgeCare Elmira collaborated with Conestoga College to expand training opportunities for IV therapy management, including PICC and central lines.

We also maintain several internal programs supported by allied health professionals—including Physiotherapy, Occupational Therapy, Registered Dietitians, Pharmacy Consultants, and Social Work—each contributing expertise to promote resident health and well-being.

Our home benefits from strong external partnerships that support residents with complex care needs. We work closely with Public Health and the IPAC Hub on outbreak and case management, and partner with the Geriatric Mental Health Outreach Team through Ontario Shores to support residents with reactive personal expressions. We also have access to pain and palliative care specialists, nurses with advanced wound care training, and virtual care platforms for timely consultation.

Our organization maintains membership with OLTCA, and our corporate team participates on committees focused on population health and sector advocacy.

We are also expanding the use of virtual health consultation platforms to support wound care and responsive behaviour management.

CONTACT INFORMATION/DESIGNATED LEAD

Tamara White, Executive Director, tamara.white@agecare.ca

SIGN-OFF

It is recommended that the following individuals review and sign-off on your organization's Quality Improvement Plan (where applicable):

I have reviewed and approved our organization's Quality Improvement Plan on **March 6, 2026**

Lisa Smith - DRO, Board Chair / Licensee or delegate

Tamara White - CQI Lead, Administrator /Executive Director

Holly Wood - DOC, Quality Committee Chair or delegate

Barbara Murphy - Sr.Director, Other leadership as appropriate
