

Quality Improvement Plan (QIP)

Narrative for Health Care Organizations in Ontario

March 4, 2026

OVERVIEW

AgeCare Trilogy Philosophy

At AgeCare Trilogy, we are dedicated to leading the region in exceptional care and innovative services. Guided by our core values of Trust, Respect, Quality, and Teamwork, we ensure every resident, family member, staff member, and visitor experiences dignity, independence, and compassion.

We support our residents and team members in living well across all eight dimensions of wellness—physical, spiritual, emotional, occupational, social, intellectual, financial, and environmental. Through our comprehensive IMAGINE Program, Restorative Care services, and vibrant Recreation activities, we empower residents to live life to their fullest potential.

AgeCare Trilogy is committed to creating an accessible environment for all. We continuously identify and remove barriers so residents can participate in programs independently, and we work closely with stakeholders to ensure our community remains inclusive, supportive, and conducive to thriving.

OVERVIEW

AgeCare Trilogy, located in Scarborough, is a fully accredited long-term care home with 195 beds and 2 respite beds. The home serves a diverse population, including seniors and younger adults with complex health needs. To address the varied medical and mental health needs of its residents, AgeCare Trilogy collaborates with several community partners to provide specialized in-house medical services. These services include nurse practitioners, wound therapy, portable x-ray, medical lab, dental care, audiology, ophthalmology, specialized foot care, physiotherapy, occupational therapy, speech pathology, dietetics, NLOT, BSOT, Ontario Shores and more.

The home also supports educational partnerships with local high schools, colleges, and universities, offering opportunities for students in nursing, dietary, recreation, and environmental departments. Additionally, the recreation team works with church groups to meet residents' religious needs and organizes various activities, including music and art therapy. AgeCare Trilogy regularly recruits volunteers and partners with community organizations for special events. We also provide in-house hairdressing services and bring in vendors to sell clothing, footwear, jewelry, and makeup.

The Executive Director is responsible to ensure that the required quality programs are running efficiently through well established interdisciplinary membership which includes residents and family representatives. The Interdisciplinary membership comprises of Quality/Leadership committee, Infection Control, Professional Advisory Committee, Resident/Family council, Falls prevention, Skin & Wound, Behaviour Support Ontario, Pain/Palliative, Medication, Restraints, Restorative Care, Joint Health & Safety committee. The quality program Committees meet monthly or as needed. This provides the home with the opportunity to nurture a culture of continuous quality improvement through collaborative processes for planning, decision making and problem solving and re-evaluation. The home leadership ensure that staff adhere to AgeCare policies and procedures and Ministry Long term Care regulations and Best Practice. In turn, resident, family, and staff needs and expectations are all met.

Annually a resident/family and employee survey are implemented, and the results of the survey are shared in Resident/family council and all staff. The residents satisfaction experience survey was conducted in July 7th - 18th, and shared with the Residents Council

October 3rd, and with the Family Council November 29th 2025 This promotes inclusion during implementation of Quality Action Plans. Communication in the home has been increased through Team up for 10, House Team meetings, employee departmental meetings, Zoom meetings, Teams meetings, employees' access to emails and newsletters. Monthly programs audits are conducted monthly utilizing different program workbooks. Audit trends are monitored and analyzed through completion of the Trilogy workbooks and KPIs. The first 3 months of the year, all programs in the home are evaluated and analyzed by the leadership team, with input sourced from the staff, families and residents. This provides the home the opportunity to identify trends, develop quality action plans and come up with effective and achievable goals. Any concerns identified through the House team meetings are action planned by the leadership team members and front line staff of that neighborhood.

Quality Improvement Achievements (2025-2026)

Overall, our home has been doing well based on our corporate Risk and Quality Report from Q3 2025 report, which analyzed how the home progressed throughout the year. The percentage of residents in pain has decreased significantly in the home. As per our last Quality Indicator, all are indicators are below the provincial benchmarks. The home has maintained a restraint free environment for almost 13 years. We have a well-defined process in place regarding communication, complaints, new move-ins, Residents care conferences and IPAC protocols. Psychotropic Drug usage in the home has greatly improved through out the year. The Behaviour Support Ontario team continues working collaboratively work with our CareRx pharmacist, Ontario Shores, registered nurses, residents' families, and clinical managers in the home. The

team continually meet monthly to discuss new move-in, residents exhibiting new expressions/behaviours and identifying effective strategies. The home received additional funding 2025 and has recruited additional frontline staff. This we have seen a decrease in agency usage in the our Home. The corporate team is highly involved in our recruitment efforts. Progress on our 2025 QIP is included in the Progress Report and specifics for each initiative throughout this report (ED Visits, Equity and Diversity Training and Pleasurable Dining continues to be our main focus areas).

Effective Communication in the home has greatly improved through Team ups, house team meetings, employee departmental meetings, Teams virtually, employees' access to emails and newsletters. The home has re-established the Evening and Night leadership oversight to provide more support and improve communication efforts. The home continues to hold Palliative care team rounds, which comprises of the home physicians, Registered Nurses, Charge Nurses, Social worker, PSWs and leadership team. We also have some corporate strategies that align with our QIP;

- Dining:- Pleasurable dining; couples lunch, valentines day and other themed meal events.
- Social :- recreational activities
- Palliative care:- Palliative rounds/education on resident was initiated, Honour guard
- Dementia:- Imagine program and residents' meaningful engagements in the home; Move-in resident ambassador on each floor.
- CARF:- Accreditation survey completed January 11-12, 2024

ACCESS AND FLOW

Access and Flow

Trilogy is affiliated with Ontario Health at Home and receives dedicated Nurse Practitioner (NP) support. Scarborough Health Network (SHN) also assists our home through the Nurse Practitioner–Led Outreach Teams (NLOT) and Behavioural Support Outreach Teams (BSOT). These teams provide skilled, time-sensitive services directly to residents in the comfort of their home.

We continue to rely on Sunnybrook's on-call MD services to ensure seamless medical coverage during weekends, holidays, and physician vacations. The utilization of NPs has been vital in reducing avoidable emergency room visits, enabling timely interventions, and easing the workload of our attending physicians.

The home also benefits from a Psychogeriatric Resource Consultant (PRC), who offers education and expert consultation to support residents with complex behavioural expressions.

We also have in-house diagnostics for labs, x-ray and ultrasound. For innovative technologies, we use eConnect and AMPLIFI to enhance sharing of resident electronic information during transfers across health care settings.

In addition, the home has supported other complex clinical needs in the home through use of Paxlovid for Covid+ residents, IV therapy, bariatric needs e.t.c.

Palliative Care Enhancement and Education (2025–2026)

Staff awareness of the Palliative Care program has significantly improved, reinforcing our commitment to comfort-focused care and participation in the Honor Guard. The Comfort Care Cart continues to be effectively used to support residents experiencing pain or distress.

Goal for 2026: IMAGINE Program awareness

IMAGINE is a unique, whole-home initiative that fosters a renewed

customer service culture and supports each individual in living to their fullest potential. By strengthening communication, trust, and teamwork, IMAGINE promotes a sustainable, person-centred care environment that benefits residents, families, and staff.

Key Features

Applied Learning: Engages team members across all AgeCare Ontario sites through interactive, hands-on training experiences.

Person-Centred Care: Prioritizes strong, trusting relationships among residents, families, and staff.

Leadership Development: Builds leadership capacity using the three E's—engage, enable, empower.

Sustained Support: Provides ongoing mentorship, practical tools, and guidance through in-person education, community of practice meetings, and home visits.

Celebrating Success: Recognizes achievements and shares positive stories to build momentum and reinforce cultural transformation.

Family Connections: Enhances communication and mutual understanding, helping to strengthen relationships and create “fans” among families.

Pleasurable Dining Initiative

The 2025 Pleasurable Dining initiative strengthened resident engagement and enhanced the overall dining experience through collaboration, themed events, education, and continuous quality improvement. The Food Committee played a central role, with residents actively participating in live cooking, taste-testing, and regular feedback that informed meaningful changes. Attendance at dining-related activities increased compared to previous years.

Launched in January 2025, the initiative featured monthly dine-in events planned with interdisciplinary input, supported by ongoing

staff feedback and cooking sessions to further enrich engagement. A series of monthly themed fine-dining events—such as Italian nights, summer BBQs, and breakfast clubs—offered variety and improved ambience through restaurant-style settings, music, and décor. These events received strong positive feedback, with experiences documented and shared across teams.

To reinforce quality and consistency, teams completed two semi-annual education sessions, reviewed mealtime best-practice videos, and revisited the AgeCare Meal Service Policy. Audit and leadership oversight also increased through expanded meal service audits, Health Connex monitoring, and enhanced leadership rounds that included temperature checks and plate reviews.

Resident satisfaction survey results were mixed, with challenges noted around cultural food preferences and recall of dining experiences. However, ongoing Food Committee feedback and audit findings continued to show positive momentum.

Looking ahead to 2026, priorities include expanding individualized and culturally diverse meal options, further improving the dining environment, and continuing the Pleasurable Dining initiative with a renewed focus on resident satisfaction.

EQUITY AND INDIGENOUS HEALTH

Equity and Indigenous Health

As part of our Local Service Accountability Agreement with the province, our home ensures that all managers complete training related to Equity, Inclusion, Diversity, and Anti-Racism, as well as additional training on Indigenous Cultural Safety and Awareness. At AgeCare Trilogy, we do not discriminate against residents based on race, color, religion (including religious dress and grooming practices), sex (including pregnancy, childbirth, breastfeeding, or related medical conditions), age, national origin, ancestry, physical

or mental disability, genetic information, marital status, sexual orientation, gender identity, veteran status, or medical condition. We aim to address inequalities such as lack of knowledge and social biases, limited access to culturally emphasized care, continued traditional holistic approaches to care, and access to financial assistance and community resources.

Our goal for 2026 is to continue educating all our teams, including frontline staff, on:

- Cultural awareness.
- LGBTQ+ inclusion (pronouns and gender identity).
- Team-building activities involving cultural themes.
- Diversity, Equity, and Inclusion education through Surge, Team Up, flyers, and newsletters.
- Community partnerships with cultural and religious organizations.
- Guest speakers from different communities, cultures, and religions.
- A Language Bank to support diverse communication needs.
- Recognition of cultural holidays such as National Indigenous Day, Black History Month, National Day for Truth and Reconciliation, and Pride Day.
- Celebrating Black History Month with events and activities that honor the legacy and contributions of Black people in our communities.

On February 20th, 2025, Malia Love, an international award-winning vocalist and songwriter known for her soulful funk performances and dynamic stage presence, performed at Trilogy as part of her Black History Month Tour. The show, titled “Flow & Concept,” featured storytelling and song, with traditional Djembe and Jumba drums. Residents actively participated in the event. Malia shared, “Before we had written history, before the world knew our name, we had the drum. The drum was our heartbeat,

our messenger, our storyteller.

This theme resonated throughout the performance, with residents using drums to help Malia share her story and others’ stories through song.

- Drumming and Smudging Ceremony

To honor and celebrate Truth and Reconciliation Day, staff and residents at Trilogy participated in a smudging and drumming event.

- Chinese New Year

To celebrate Chinese New Year, the Year of the Dragon, Trilogy hosted a special event with live entertainment. The Year of the Dragon symbolizes power, good fortune, and strength, and is associated with traits like intelligence, ambition, and charisma. Entertainers sang traditional songs and distributed Red Pockets for luck and prosperity. Residents, families, and staff participated in the event, with some staff dressing in traditional outfits.

Language Program

A monthly Language Program connects residents who do not speak English with fluent speakers of their native languages—including Italian, French, Portuguese, Sinhalese, and others. Volunteer interpreters facilitate meaningful conversations, helping residents build community connections and ensuring that no one feels excluded. Language banks and communication cards further support multilingual communication.

Truth and Reconciliation Day

Trilogy hosted “Awakening of Spirit” with Michael Eric Savoie, a Métis presenter of Micmac origin, who shared the Prophecies of the Seven Fires. Residents and staff learned about Indigenous teachings, history, and cultural perspectives through this engaging

educational experience.

National Indigenous Peoples Day

The home recognized the history, culture, and achievements of First Nations, Inuit, and Métis peoples. Education on anti-racism and systemic barriers was emphasized. A traditional smudging ceremony—used to cleanse and bring clarity to mind, body, and spirit—was offered for residents and staff as part of the celebration.

Support for Jamaica

Following Hurricane Melissa, residents, families, and staff collected essential supplies. Donations were delivered to the Jamaican Canadian Association Centre to support affected communities, demonstrating Trilogy's commitment to global community care and compassion.

Staff Education and Training

Staff complete mandatory annual education through Surge Learning, with a 93.38% completion rate. Training includes Cultural Competence, Indigenous Cultural Safety, Equity and Inclusion, Anti-Racism, and Ontario Human Rights 101, ensuring ongoing development of culturally sensitive and equitable care practices.

Cultural Meals and Celebrations

Trilogy regularly incorporates cultural dining experiences and special event meals to celebrate diverse traditions. Examples include themed menus and fine-dining events for Black History Month, Chinese New Year, Easter, and other cultural celebrations.

PATIENT/CLIENT/RESIDENT EXPERIENCE

PATIENT/CLIENT/RESIDENT PARTNERING EXPERIENCE

Our Home is committed to providing excellent quality of care to our residents. We believe in a multidisciplinary approach in achieving this goal. Feedback is a much-appreciated gift to us. We source feedback from resident, family and external partners, such as Professional Advisory Committee which comprises of the Physicians, Public health, Ontario Shores, Nurse Practitioner, Pharmacy, Registered Dietician, Physiotherapists, and align with regulatory board. Our 2025 Resident/ Family and Employee surveys were conducted July 7th -18th and the home received the and shared with the Residents/Family Councils October 3rd and November 29th respectively.

Our surveys focus in 10 key areas: IPAC, Environment, Communication, Dining Services, Your Care Team, Privacy and Choice, Safety, Contracted Services, Housekeeping and Laundry Recreation. The Executive Director is the key lead who shares the survey results with Residents Council at their council meeting and the family council meeting held within the quarter.

Our residents' overall satisfaction was 53% Strongly Agree. There were (4) new domains added to the satisfaction survey; thus IPAC, Safety, Contracted Services, Housekeeping & Laundry.

Fine Dining & Themed Events

- Monthly themed fine dining events conducted (e.g. Italian dining, summer BBQs, breakfast clubs)
- Events scheduled at varied times to increase resident participation
- Focus on restaurant-style ambience, music, and enhanced dining

environment

- Positive resident feedback: events documented and pictures shared with the team.

(2026 Focus)

- Enhance individualized and cultural meal preferences
- Improve dining environment and meal service experience
- Continue Pleasurable Dining initiatives with focus on resident satisfaction.

Trilogy Recreation Equipment & Resident-Run Tuck Shop Recreation Equipment & Dementia Support

Trilogy's Recreation Department utilizes a comprehensive suite of adaptive engagement and palliative tools designed to support residents living with advanced dementia. Multi-sensory stimulation is prioritized through platforms such as Zinnia TV, which offers calming visual therapy, and the OM Mobii interactive projection system, which promotes cognitive engagement and physical activation.

In collaboration with Physiotherapy and Restorative Nursing, the team also incorporates specialized rehabilitative technologies to enhance mobility and physical wellness. This integrated, interdisciplinary approach ensures residents receive dignified, holistic care that strengthens quality of life and functional capacity.

Resident-Run Tuck Shop

The Trilogy resident-managed tuck shop fosters autonomy, purpose, and meaningful social engagement. Operated by a resident who manages inventory and seasonal décor, the shop reflects community preferences and creates a welcoming, dynamic environment. It has become a valued social hub where residents can gather, browse, and connect—promoting independence, social interaction, and overall well-being.

We also have a resident new move-in/onboarding ambassadors. Since the last Quality Improvement Plan, there have been a lot of changes related to residents' mood. There has been an increase in Montessori activities; programs which are meaningful to the residents, and which keep them engaged. Also with the new initiative from the Food committee and Imagine program collaborative efforts.

IMAGINE driven residents Job boards were created, for residents to be engaged in some activities like the home Tuck shop, light laundry folding, supporting in snack preparations, and residents' involvement in hand hygiene activities. Zoom calls are scheduled for residents' families who live far from the home and experiencing some challenges to visit consistently to ensure that residents don't feel isolated and continue to be in touch with their loved ones.

Dining experience - The home continues with the breakfast club and fine dining to the residents. This promotes different scenery, social hub, and the introduction of music entertainment during mealtimes.

The 2025 CQI plan outcomes and the 2026 CQI objectives and action plan were shared with the frontline staff will be shared during the upcoming Townhalls in March, Resident Council and the Family council within the month of March 2026. This is also shared

on our resident/family board as well as on the CQI Board on our Main Floor. We also involve residents and our PSW coordinator in our PSW interviewing process.

PROVIDER EXPERIENCE

PROVIDER EXPERIENCE

Recruitment, Retention, Workplace Culture, and Staff Experience Initiatives.

Our organization has implemented several structured practices to strengthen recruitment, retention, workplace culture, and overall staff experience. Recruitment is conducted through the Workday system, where all applications are screened and analyzed to ensure candidates meet the required qualifications and competencies. Successful applicants are then forwarded to the home for a comprehensive interview process.

To support retention and positive onboarding, all newly hired team members participate in a structured orientation program designed to familiarize them with the home's values, expectations, and operational processes. Each new employee is also paired with a designated buddy, who provides ongoing guidance, mentorship, and support during the initial transition period. This approach helps promote confidence, ensures smoother integration into the team, and enhances overall job satisfaction.

These initiatives collectively aim to foster a welcoming, supportive, and inclusive workplace culture that strengthens employee engagement and contributes to long-term staff retention.

Recognizing the need to support our employees, we have implemented various initiatives, including employee recognition

programs, staff retention strategies, and effective two-way communication during Team Ups. We have raised awareness about programs like EAP and introduced team-building activities for front-line staff, such as connect groups where individuals are encouraged to discuss their feelings. Staff are acknowledged and provided with incentives to boost morale.

Our Team Up for 10 and House team meetings are ongoing tools used throughout the year to ensure that the leadership team and front-line staff stay informed and updated on any developments or changes.

Annually, our employees completed the 'Employee Engagement Survey to obtain a pulse check on their satisfaction with their own organization, their employment satisfaction and work environment. We measure satisfaction as with our Resident Satisfaction Survey. We introduced a lot of team building to the front line staff, connect groups, where individuals where encouraged to talk about how they are feeling. Staff were acknowledged and incentives provided to boost morale in the home. Our Team up for 10 and House team meetings continue to be one of the many tools used in the home through out the year to ensure the leadership team and front-line staff keep each other informed and in touch of what is going on, or any form of updates.

SAFETY

Safety

Ensuring the safety and security of our residents remains our highest priority. Resident feedback consistently shows strong agreement that they feel safe, secure, and satisfied with the home as a place to live.

We have a robust process for responding to safety events, which

includes incident reporting, detailed analysis, and the development of individualized safety plans. Safety events are tracked and trended using PointClickCare, Workbooks, and the Emerging Issues Reporting system. Both our in-house quality teams and our corporate quality department review this data to identify opportunities for improvement and to guide changes that help prevent future occurrences.

With support from Ministry funding, we have strengthened our safety infrastructure through enhanced equipment and technology. Our Falls Prevention Program now includes additional alarms, fall mattresses, hip protectors, raised-edge surfaces, and hi-lo beds. We have also implemented a fully operational Automatic Drug Dispensing Cabinet (ADDC) for emergency medications and are in the process of upgrading our electronic medication management module in PCC. This upgrade, along with our partnership with pharmacy for electronic medication incident reporting, has significantly improved our ability to trend medication incidents and conduct more advanced root-cause analysis.

New digital applications have further strengthened our safety systems. Health Connex supports Infection Prevention and Control (IPAC) by tracking audits, generating statistics, and trending infections such as COVID-19, eye infections, and UTIs. Our Skin and Wound application provides a comprehensive week-to-week comparison of skin alterations and wound healing, helping teams respond proactively to changes.

Team members continue to advance their knowledge through specialized education, including IPAC credentialing for IPAC Leads, Advanced Wound Care Training for Skin and Wound Leads, and IMAGINE training for both leadership and front-line staff.

Our corporation recently introduced a Safety Alert/Notification process, allowing homes to share important alerts across the

organization. When one home experiences a safety concern that may impact others—for example, hazardous winter conditions—notifications are issued and posted throughout the home to support proactive prevention and staff education. In 2026, our primary focus will be reducing falls and fall-related injuries. We will ensure residents identified as being at risk receive appropriate fall-prevention equipment promptly, including hi-lo beds, floor mats, alarms, and hip protectors. Leadership and floor supervisors will be expected to complete targeted safety rounds, particularly for residents who spend most of their daytime hours in their rooms. These rounds will also occur during shift exchanges. Medication reviews with physicians and pharmacy partners will be completed when clinically indicated.

We have strengthened our Post-Fall Huddle processes, increased special care meetings with families, and enhanced our interdisciplinary collaboration. These actions help us gather meaningful information to create individualized fall-prevention strategies that reflect each resident's unique needs.

PALLIATIVE CARE

Palliative Care

Our organization is deeply committed to delivering high-quality palliative care, ensuring that patients and their families receive compassionate and comprehensive support. Here are three specific examples of our activities that demonstrate this commitment.

Organizational Readiness and Health Human Resource Competency:

-We have established a dedicated palliative care team comprising physicians, nurses, social workers, and spiritual care providers who are specially trained in palliative care. Continuous professional

development is a priority, with regular training sessions and workshops to keep our staff updated on the latest best practices and innovations in palliative care. This ensures that our team is well-equipped to provide high-quality, resident-centered care.

Staff Education & Awareness

-Ongoing palliative education sessions and regular palliative meetings are conducted.

Palliative care conferences were introduced for residents receiving end-of-life care.

Palliative binders were placed on all floors to outline services, philosophy, and staff roles.

Family Support Enhancements

-Families receive information about end-of-life and palliative services during orientation.

An overnight family support cart (coffee, tea, snacks, uplifting books) was introduced, along with Fulton sofas to support families staying overnight.

Resident Comfort Initiatives

-A palliative comfort cart was implemented, offering calming items such as an ocean-light lamp, diffuser sticks, blankets, spiritual books, and soothing music.

Memorial & Bereavement Support

-Memorial services continue to be held to honor residents who have passed.

A Butterfly Envelope tribute, containing a butterfly crystal and an 'In Loving Memory certificate' was introduced for families.

An Honour Guard is initiated at the time of passing to pay respects

and support both families and staff.

Overall Program Impact

The program has shown strong growth in structured care planning, staff engagement, family support, and delivery of meaningful end-of-life services.

POPULATION HEALTH MANAGEMENT

POPULATION HEALTH APPROACH

Although our organization is not part of an Ontario Health Team, we work closely with numerous external partners to proactively meet the needs of our residents. We collaborate with Ontario Health at Home for placement reviews and have expanded our ability to support complex care through enhanced funding for equipment, technology, and staffing. External programs such as NP STAT further strengthen our capacity for advanced care including IV therapy and central line management. and NLOT.

Our internal health programs—supported by physiotherapists, occupational therapists, dietitians, pharmacy consultants, social workers, and other allied professionals—ensure residents receive comprehensive, interdisciplinary care.

We maintain strong partnerships with Public Health, the IPAC Hub, geriatric mental health specialists, wound care experts, pain and palliative care teams, and virtual care services to address diverse clinical needs. Team members also participate in regional communities of practice and sector forums to stay aligned with best practices.

This year, we expanded our collaborations to include Emergency Medical Services for on-site assessments aimed at reducing unnecessary ER transfers, and we have increased the use of virtual consultation platforms for wound care and responsive behaviour

management through NLOT.

1. **Leadership Engagement:** Regular quarterly leadership meetings are held to engage, empower, and support staff. These sessions provide an open forum for team members to share ideas, raise concerns, and contribute to ongoing program improvement.
2. **Staff Empowerment:** Staff are encouraged to be innovators and leaders within different care program. Opportunities include participation in program evaluations, involvement in quality initiatives, leading focus groups, and access to targeted education that enhances clinical skills and supports high-quality resident care.
3. **Strategic Partnerships:** Collaborative work with Ontario Health at Home continues to support resident placement, care coordination, and management of complex care needs. These partnerships also enable access to additional government-funded services that enhance resident outcomes.
4. **Nurse Practitioner Utilization:** Leveraging Nurse Practitioners for complex care needs, including IV therapy.
5. **External Collaborations:** Working closely with various external partners and accessing virtual care platforms for consultations.
6. **Community Involvement:** Participation in local communities of practice, public health forums, and maintaining memberships with organizations like OLTCa for advocacy.

CONTACT INFORMATION/DESIGNATED LEAD

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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 4, 2026**

Candace Lanthier - DRO, Board Chair / Licensee or delegate

Sihle Mudhlongwa - CQI Lead, Administrator /Executive Director

Maria Carandang - DOC, Quality Committee Chair or delegate

Barbara Murphy - Sr.Director, Other leadership as appropriate
