

Quality Improvement Plan (QIP)

# Narrative for Health Care Organizations in Ontario

March 26, 2026



## OVERVIEW

Woodingford Lodge Tillsonburg is a 34-bed long-term care home within Oxford County, operating as part of a broader system of care that includes sites in Woodstock and Ingersoll. With a longstanding history of delivering high-quality, not-for-profit long-term care services, the home remains deeply committed to advancing resident-centred care through continuous quality improvement, innovation, and strong community partnerships.

The 2026 Quality Improvement Plan (QIP) reflects a deliberate shift from maintaining strong performance to driving measurable, outcome-based improvement in areas that matter most to residents, families, and the broader health system. This plan is grounded in multiple data sources, including Resident and Family Satisfaction Surveys, clinical performance indicators, and frontline team member insights. These inputs ensure that improvement priorities are not only evidence-informed, but also reflective of lived experience.

For 2026, Woodingford Lodge Tillsonburg has identified five core improvement priorities:

- Reduction in Emergency Department (ED) transfers for ambulatory care sensitive conditions
- Strengthening palliative care through earlier identification and response to clinical decline
- Improving food quality
- Reducing falls and fall-related risks
- Enhancing pain management and symptom control

This QIP is aligned with the County of Oxford's strategic directions, emphasizing community well-being, system integration, and

continuous improvement. The organization's approach is disciplined, data-driven, and anchored in accountability, ensuring that each initiative translates into meaningful outcomes for residents and families.

### **ACCESS AND FLOW**

Ensuring residents receive the right care, in the right place, at the right time, remains a critical priority for Woodingford Lodge Tillsonburg. Reducing avoidable Emergency Department (ED) transfers is central to this objective, as these transfers can be disruptive for residents and often preventable through timely, in-home clinical intervention.

The current rate of ED visits for ambulatory care sensitive conditions is 16.33 per 100 residents, with a targeted reduction to 13.00, representing a meaningful improvement in clinical management and system efficiency.

To achieve this, the 2026 plan focuses on strengthening early identification, clinical assessment, and interdisciplinary decision-making. A key priority is enhancing the ability of frontline team members to recognize subtle changes in resident conditions. Standardized early warning tools and escalation pathways will be implemented to ensure timely intervention before conditions deteriorate.

Clinical capacity within the home will continue to be strengthened through structured nursing assessment protocols and expanded collaboration with physicians and nurse practitioners. This ensures that all potential transfers are clinically assessed and that alternatives to hospital transfer are fully explored.

In addition, targeted initiatives to address common drivers of ED transfers, such as dehydration and infection, will be implemented through improved hydration monitoring, seasonal risk mitigation strategies, and enhanced team education.

A disciplined review process will also be introduced, with 100% of ED transfers reviewed through quality committees to identify trends, root causes, and opportunities for prevention.

Collectively, these strategies represent a shift toward proactive, data-informed care delivery that reduces system reliance on acute care while improving resident outcomes and experience.

### **EQUITY AND INDIGENOUS HEALTH**

Woodingford Lodge Tillsonburg is committed to ensuring that care is equitable, inclusive, and responsive to the diverse needs of its residents, families, and team members. Equity is embedded as a core principle of quality care, recognizing that each resident brings unique cultural, social, and personal experiences that must be reflected in care delivery.

Building on prior initiatives, the home will continue to strengthen culturally responsive practices through team member education focused on diversity, inclusion, unconscious bias, and culturally safe care. These efforts are designed to move beyond awareness toward meaningful behaviour change in day-to-day interactions and care practices.

Resident-centred approaches will be further enhanced through the use of personalized life history tools, ensuring that care plans

reflect individual preferences, values, and lived experiences. Language accessibility will continue to be supported through translation tools and multilingual team member engagement, improving communication and understanding.

Woodingford Lodge also recognizes the importance of advancing Indigenous health and reconciliation. Ongoing education for team members will focus on Indigenous history, cultural safety, and DEI priorities. These efforts support a care environment that is respectful, informed, and responsive to Indigenous residents and families.

Equity work at Woodingford Lodge is not viewed as a standalone initiative, but as an integrated component of all quality improvement efforts, ensuring that all residents experience dignity, respect, and equitable access to high-quality care.

## **PATIENT/CLIENT/RESIDENT EXPERIENCE**

Resident experience remains a central driver of quality improvement at Woodingford Lodge Tillsonburg and is a core requirement under the Fixing Long-Term Care Act, 2021, which emphasizes resident rights, dignity, and participation in care planning. The home's Continuous Quality Improvement (CQI) program is directly informed by Resident and Family Satisfaction Survey results, as required under O. Reg. 246/22, ensuring that resident voice is systematically integrated into improvement planning, monitoring, and evaluation.

As part of enhancing the resident experience in the home, Woodingford Lodge is committed to advancing dementia care that focuses on resident abilities, independence, and meaningful

engagement. Through the implementation of DementiAbility principles, the home has trained several team members to better understand how to support residents living with cognitive impairment in a way that promotes dignity, choice and quality of life. This approach emphasizes recognizing what residents can do, rather than focusing on limitations, while creating purposeful opportunities for engagement in daily routines and activities. Woodingford Lodge will continue to expand this training across interdisciplinary team members, while promoting the application of the principles in our residents' everyday lives, enhancing the resident experience through more personalized, responsive and ability-focused care practices.

The 2025–2026 Resident Satisfaction Surveys were completed in June 2025, results highlight both areas of strength and clear opportunities for improvement. Overall, 67% of residents rated Woodingford Lodge as an excellent place to live, reflecting a strong foundation in care and service delivery.

Key areas of strength identified by residents include:

- Privacy is respected by team members – 73% rated excellent
- Cleanliness of the home – 53% rated excellent
- Feeling safe living in the home – 60% rated excellent
- Assistance received in the bathroom – 67% rated excellent
- Positive interactions with environmental team members - 54% rated excellent

These results demonstrate consistently strong performance in foundational aspects of care, including safety, environment, and team member-resident relationships.

At the same time, survey results identified several priority areas for improvement, which have directly informed the 2026 QIP:

- Assistance provided timely during the night – 17% rated excellent
- Food-related experience (quality, temperature and timing) – 9% rated excellent
- Satisfaction with evening and weekend programming – 0% rated excellent
- Expressing opinions without fear – 8% positive response

While team member-related privacy scores remain relatively strong, overall resident perception of privacy, including interactions between co-residents, has been identified as a key opportunity for improvement at the Tillsonburg site.

In response, Woodingford Lodge Tillsonburg has established a targeted improvement goal to increase the percentage of residents who report that they feel that the food offered is excellent from 7% to 17%, reflecting a meaningful improvement in the residents' experience.

To achieve this, the home will implement a structured, multi-level approach aligned with CQI requirements under the FLTCA:

#### 1. Education and Awareness:

- Provide targeted education to dietary and interdisciplinary team members on the importance of food temperature, meal quality, and resident satisfaction
- Reinforce expectations related to safe food handling practices and serving meals within recommended temperature ranges
- Increase team member awareness of Resident Satisfaction Survey results related to food services and areas for improvement

#### 2. Strengthening Monitoring and Documentation:

- Implement routine monitoring of food temperatures during meal service using standardized temperature logs
- Ensure consistent and accurate documentation of food temperatures across all meal periods
- Conduct regular audits of temperature logs to confirm compliance with established standards

#### 3. Enhancing Meal Service Processes:

- Review and optimize meal service workflows to reduce delays between plating and delivery
- Identify and address operational factors that contribute to temperature loss, including timing, transport, and service practices
- Reinforce accountability among team members for maintaining food quality and temperature standards during service

#### 4. Strengthening Complaint Management and Feedback Loops:

- Monitor and review all complaints related to food temperature and quality
- Ensure 100% of food-related complaints are followed up within 24 hours
- Implement corrective actions and evaluate effectiveness to ensure sustained improvement

#### 5. Monitoring, Accountability, and CQI Integration:

- Review food temperature monitoring results, audit findings, and resident feedback through Food Committee and Quality Committee structures
- Ensure food temperature and quality are standing agenda items for ongoing review and action planning
- Track performance against process measures, including temperature monitoring compliance (>95%) and complaint follow-up (100%)
- Report outcomes and improvement progress to Resident and Family Councils to support transparency and engagement

Consistent with FLTCA requirements, progress on these initiatives will be monitored through defined process and outcome measures, with results reviewed through the home's formal CQI governance structure. This ensures that improvement efforts are sustained, measurable, and responsive to resident feedback.

More broadly, Woodingford Lodge continues to promote resident engagement through:

- Active participation in Resident and Family Councils
- Inclusion of residents and families in care planning and decision-making
- Ongoing use of surveys, feedback forums, and direct engagement to inform improvements

Through this structured and compliant approach, Woodingford Lodge Tillsonburg is not only addressing identified gaps but strengthening a culture where resident voice drives continuous improvement, ensuring care is delivered with dignity, respect, and accountability.

## PROVIDER EXPERIENCE

A highly engaged workforce is essential to deliver exceptional resident care. Woodingford Lodge Tillsonburg recognizes that improving the provider's experience directly translates into better outcomes for residents.

In 2026, the organization will continue to focus on recruitment, retention, onboarding, and workplace culture. Enhanced orientation processes, mentorship programs, and leadership engagement strategies will ensure that new team members are supported and integrated effectively.

Ongoing professional development will be prioritized, with targeted education aligned to key QIP priorities such as falls prevention, pain management, and palliative care. Leadership development and succession planning will also be strengthened to build long-term organizational capacity.

Employee engagement will be reinforced through recognition programs, structured communication forums, and opportunities for frontline input into decision-making. Initiatives such as Team Exchanges and Moments of Excellence will continue to promote transparency, recognition, and collaboration.

Supporting team members' well-being remains a priority, with continued access to mental health resources, wellness initiatives, and work-life balance supports.

The organization's approach is clear: investing in people is not optional, it is foundational to deliver consistent, high-quality care.

## SAFETY

Safety at Woodingford Lodge Tillsonburg is approached proactively, with a focus on prevention, early intervention, and continuous monitoring.

Falls remain a key safety priority, with the current rate at 23.33% and a target reduction to 18.33%. Achieving this reduction requires a coordinated, interdisciplinary approach.

Key strategies include:

- Implementation of individualized fall prevention plans for all high-risk residents
- Increased physiotherapy and restorative care involvement
- Development of detailed monthly fall trend analysis to identify patterns and risk factors
- Structured Falls Committee reviews to drive targeted interventions
- Enhanced monitoring during high-risk periods through proactive rounding

In parallel, pain management has been identified as a critical safety and quality issue. With 3.20% of residents experiencing daily or severe pain, the home has set a target of 2.00%.

Efforts will focus on strengthening assessment processes, improving interdisciplinary care planning, and implementing standardized monitoring tools to ensure effective and safe pain management.

These initiatives reflect a broader commitment to a culture of safety that is data-driven, accountable, and continuously evolving.

## PALLIATIVE CARE

Woodingford Lodge Tillsonburg is advancing a comprehensive palliative approach to care that emphasizes early identification, timely intervention, and compassionate support for residents and families.

A key improvement focus for 2026 is ensuring that residents experiencing clinical decline receive a documented palliative assessment within 24 hours, with a target of 90% compliance.

To support this, the home will implement:

- Standardized education on recognizing clinical decline and managing end-of-life symptoms
- Integration of assessment tools into Point of Care processes to ensure timely documentation
- Strengthened interdisciplinary communication and care planning

In addition to clinical improvements, the organization is enhancing the emotional and experiential aspects of palliative care. This includes the implementation of an Honour Guard process and the creation of a memorial space to recognize and honour residents.

These initiatives reflect a commitment to ensuring that end-of-life care is not only clinically appropriate, but also deeply respectful, compassionate, and aligned with resident and family wishes.

## POPULATION HEALTH MANAGEMENT

Woodingford Lodge Tillsonburg continues to play an active role within the broader health system, working in partnership with Ontario Health Teams, hospitals, and community organizations to support integrated, population-based care.

A key focus is strengthening transitions into long-term care, ensuring that residents and families are supported during admission and throughout their journey. Enhanced transition processes, including dedicated follow-up and family engagement, help reduce anxiety and improve overall experience.

Community partnerships, including intergenerational programming and local collaborations, contribute to resident well-being by fostering connection, engagement, and social inclusion.

Data and feedback from residents, families, and system partners are continuously used to inform program development and improvement efforts, ensuring that services remain responsive to evolving needs.

This approach reflects a broader vision of long-term care as an integrated component of the health system, focused not only on care delivery, but on overall quality of life.

## CONTACT INFORMATION/DESIGNATED LEAD

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## OTHER

Continuous Quality Improvement Initiative Report

Woodingford Lodge Tillsonburg is committed to continuously improving the quality of care and services provided to residents. In alignment with the Fixing Long-Term Care Act, 2021 and Ontario Regulation 246/22, the home maintains a formal Continuous Quality Improvement (CQI) program, supported by an annual Continuous Quality Improvement Initiative Report (CQIIR).

The CQIIR outlines how home monitors performance, identifies opportunities for improvement, and takes action to enhance resident care and experience. It reflects a structured and ongoing approach to quality improvement that is integrated into daily operations and decision-making across the organization.

At Woodingford Lodge, quality improvement is driven by multiple sources of information, including:

- Resident and Family Satisfaction Survey results
- Clinical quality indicators and internal data tracking
- Feedback from residents, families, and team members
- Input from interdisciplinary committees and leadership teams

These inputs are reviewed regularly to identify trends, prioritize improvement areas, and guide action planning.

For 2026, the CQIIR is directly aligned with the organization's Quality Improvement Plan priorities, which focus on:

- Reducing Emergency Department transfers
- Improving the timeliness and quality of palliative care
- Improving involvement in decision making

- Reducing falls and fall-related risks
- Strengthening pain assessment and management

Each of these priorities includes clearly defined goals, measurable targets, and specific actions designed to improve outcomes for residents.

Progress is monitored on an ongoing basis through:

- Regular review of performance data and process measures
- Interdisciplinary committee meetings, including Quality, Falls, and Palliative Care committees
- Leadership oversight and accountability structures

Results and key findings are shared with Resident Council and Family Council, ensuring transparency and providing opportunities for feedback and engagement.

This continuous cycle of measuring, reviewing, improving, and re-evaluating ensures that Woodingford Lodge remains responsive to residents' needs and is committed to delivering high-quality, resident-centred care.

## Conclusion

The 2026 Quality Improvement Plan for Woodingford Lodge Tillsonburg represents a focused, data-driven strategy to advance care quality, resident experience, and system performance.

By prioritizing key areas such as access to care, privacy, safety, pain management, and palliative care, the organization is targeting improvements that will have a meaningful and measurable impact

on residents and families.

What distinguishes this plan is not only the initiatives themselves, but the disciplined approach to execution, clear targets, defined process measures, and strong accountability structures.

Woodingford Lodge remains committed to continuous improvement, transparency, and collaboration. Through this work, the home will continue to strengthen its position as a leader in long-term care, delivering care that is not only safe and effective, but deeply respectful, compassionate, and resident-centered.

## 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 26, 2026**



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**Mark Dager**, Board Chair / Licensee or delegate



Mary Alice Barr (Apr 8, 2026 09:31:33 EDT)

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**Mary Alice Barr**, Administrator /Executive Director



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**Caitlin Pogson**, Quality Committee Chair or delegate

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Other leadership as appropriate

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