

Quality Improvement Plan (QIP)

# Narrative for Health Care Organizations in Ontario

February 19, 2026

## OVERVIEW

For the Golden Plough Lodge (GPL) 2026/27 Quality Improvement Plan (QIP), we will focus on two Ontario Health priority areas: Access and Flow and Equity and Indigenous Health. Under Access and Flow, our goal is to improve resident well-being by reducing unnecessary Emergency Department (ED) visits. Under Equity and Indigenous Health, GPL aims to strengthen Equity, Diversity, and Inclusion (EDI) within our workforce.

Reflecting trends from 2025, GPL resident admissions were largely composed of Alternate Level of Care (ALC)/Crisis placement applicants with high-acuity mental health and/or medical issues, which contributed to GPL ED utilization. These complex care needs underscore the importance of targeted strategies to improve care coordination and proactively manage residents' health, ensuring that transitions to the ED are appropriate and necessary.

Over the next 12 months, we will prioritize improving access to timely, appropriate care within the Lodge through proactive health management, enhanced care coordination, and stronger communication among clinical teams to better manage residents' complex needs and minimize avoidable transfers to the ED. These efforts will support smoother care transitions, improved clinical decision-making, and better overall resident outcomes.

In parallel, we are committed to fostering an inclusive and equitable workplace where all employees feel valued, respected, and supported. Our initiatives include comprehensive EDI education, embedding inclusive practices into daily operations, and reinforcing policies that promote cultural competence, psychological safety, and accountability. This approach ensures staff are equipped to

meet the diverse needs of residents while also being protected and supported if they experience bias or discrimination.

In addition to the primary goals outlined in the GPL 2026/27 QIP, we will implement further quality improvement initiatives throughout the year, including enhancements to the GPL resident admission processes. Additional improvements will be supported using GPL newly implemented PointClickCare Performance Insights. The enhanced data capability of Performance Insights will enable more informed decision-making, real-time performance monitoring, and targeted interventions that align with additional Ontario Health priority issues.

Through these focused efforts, GPL is committed to enhancing residents' quality of life while empowering staff with the skills, tools, and supportive environment necessary to deliver compassionate, equitable, and resident-centred care. These initiatives reflect and reinforce GPL's mission, vision, and shared values, ensuring that excellence, dignity, and respect remain at the heart of every resident and staff experience.

## **ACCESS AND FLOW**

GPL 2026/27 QIP indicator aimed to reduce avoidable ED visits that result in hospital admission or death aligns with Ontario Health's priority issue Access and Flow within the Long-Term Care sector. Recognizing that optimizing system capacity, effective early recognition of health concerns, and timely access to medical/care interventions improves outcomes across the broader healthcare system, GPL is committed to strengthening access to high-quality, resident-centered care within the home.

GPL benefits from a dedicated Nurse Practitioner onsite five days per week, two Medical Directors, and supportive attending physicians. Clinicians will continue to review and analyze ED visit data quarterly to identify trends, root causes, and opportunities for early interventions. This structured review process ensures residents receive the right care, in the right place, at the right time.

Key change ideas for 2026/27 focus on proactive and preventative strategies. Enhancing GPL's palliative care approach will support timely goals of care discussions, clear documentation, and ongoing review of advance care planning. Strengthening staff confidence and competence in end-of-life care will help ensure residents remain in the home when aligned with their wishes.

Frontline nursing capacity will be strengthened through focused education on early recognition and management of common conditions leading to ED visits. Standardized assessment tools and clinical pathways will support early intervention and appropriate escalation.

Improved interdisciplinary collaboration and communication will further refine processes to reduce unnecessary transfers. Regular case reviews, team huddles, and clear communication pathways between nursing, physicians, social work, and dietary services will ensure coordinated, timely responses to changes in resident condition.

Through these targeted change ideas, GPL aims to safely reduce avoidable ED visits, enhance resident experience, and ensure continuity of care, ultimately improving health outcomes and supporting broader health care system capacity and efficiency.

## EQUITY AND INDIGENOUS HEALTH

For the 2026/27 QIP, GPL has selected Equity and Indigenous Health as a key focus, aligning with Ontario Health priority issues. As a department of the Corporation of Northumberland County, GPL has a workforce of over 290 staff and serves a diverse resident population of 151, expected to increase to 180 in 2026. GPL is committed to delivering resident-centered, culturally safe, and equitable care across all programs and services.

### Resident-Focused Initiatives:

GPL actively collects data on our Francophone population through the French Language Health Services Database and ensures all staff are trained in Indigenous Cultural Safety programs to provide respectful and inclusive care. Residents are supported in expressing their cultural, religious, and spiritual needs through monthly cultural theme nights, family recipe menus, and a non-denominational spiritual space. We also recognize socioeconomic challenges and have measures in place to provide financial assistance to residents in need, ensuring equitable access to care and engagement opportunities.

### Employee-Focused Initiatives:

GPL promotes gender equity and inclusion among staff through non-gendered hiring practices and professional development in equity, diversity, and inclusion. The new GPL facility, expected to open in 2026, will include gender-neutral washrooms to support all employees and residents. Through these initiatives, GPL fosters an inclusive workplace that reflects the diversity of our community and supports staff in delivering culturally competent care.

As part of our continuous quality improvement, GPL is introducing

EDI-focused education for all staff and implementing a diversity calendar to celebrate and acknowledge cultural, Indigenous, and equity-focused observances throughout the year. These initiatives, combined with ongoing collaboration with Northumberland County and community partners, reinforce our commitment to reducing disparities and ensuring an inclusive environment for all residents, staff, and families.

## PATIENT/CLIENT/RESIDENT EXPERIENCE

At GPL, our staff has created a shared purpose that reflects the heart of everything we do: building a caring community where residents can live life to the fullest and have a voice in choices pertaining to their care. This purpose guides our daily practice by keeping residents at the center of all decisions, acting with compassion and empathy, collaborating as a team, and fostering supportive relationships with residents and families. In this priority issue at GPL, we remain committed to continuous learning, applying best practices, and advocating for excellence in long-term care.

Building on this purpose, GPL applies the Eden Alternative Philosophy of Care, ensuring residents and families are central to all care decisions. Our multidisciplinary care teams provide an integrated circle of care, addressing individual preferences, changing demographics, and complex care needs. We actively consult and collaborate with Resident and Family Councils, engaging senior leadership in monthly meetings to review feedback, satisfaction surveys, and care experiences.

Feedback and survey data play a central role in guiding our quality improvement initiatives. GPL systematically analyzes information from experience surveys and other feedback mechanisms to

identify areas for improvement, recognize best practices, and develop targeted action plans. This ensures that resident and family perspectives directly shape our care processes, policies, and programs. By incorporating feedback into performance reviews, staff training, and operational planning, we continuously refine our practices to enhance resident satisfaction, safety, and overall quality of care. These structured improvements allow us to deliver personalized, responsive, and innovative care that reflects the needs and preferences of each resident, now and into the future.

## **PROVIDER EXPERIENCE**

Golden Plough Lodge recognizes that our employees are our most valuable asset, and we are committed to attracting, developing, and engaging a skilled, motivated workforce. We foster a positive workplace culture based on fairness, respect, accountability, mutual support, communication, and transparency, which supports recruitment and retention of skilled employees. Staff are equipped to excel through comprehensive orientation, ongoing professional development, mentorship, and access to necessary resources. Engagement in planning and decision-making is encouraged through appreciative inquiry, focus groups, and committee participation, ensuring staff voices shape operations and culture.

Employee recognition and growth are integral to our approach, with annual performance appraisals designed to provide constructive coaching, goal setting, and identification of learning opportunities. Staff health, wellbeing, and safety are prioritized, with initiatives promoting work-life balance and a safe work environment. The Peer Support Team, composed of trained members from all departments, offers 24/7 support addressing both workplace and personal challenges.

Leveraging Long-Term Care funding, we have increased staffing levels across all areas of the home and continue to refine staffing models that have assisted us in achieving minimum of four hours of care per resident per day. In 2025, the nursing department implemented significant improvements to hiring, onboarding, and orientation, including expanded in-person orientation days and enhanced unit shift orientation. These initiatives have resulted in measurable improvements in recruitment and retention compared to 2024, demonstrating the effectiveness of our strategies in creating a supportive, engaging, and high-performing workplace culture that benefits both staff and residents.

## **SAFETY**

Golden Plough Lodge is committed to fostering a safe, just, and learning-focused culture that continuously improves resident and staff safety. In 2025, the nursing department implemented additional Risk Management Modules in PointClickCare (PCC), fully integrating all PCC risk management tools to enhance incident reporting, analysis, and follow-up. This system allows our team to learn from safety events, identify trends, and share actionable insights with staff to prevent recurrence and reduce risk.

Annual reviews of Critical Incidents are conducted, with findings communicated across the organization to highlight areas for targeted improvement. Resident feedback through Resident Council discussions, Care Conferences, and team meetings further informs quality improvement initiatives, ensuring that resident perspectives and concerns help guide safety enhancements.

Our robust Joint Health and Safety Committee, comprised of staff

representatives from all departments meets monthly to review, analyze, and address actual or potential safety risks. Mitigation strategies and best practices identified during these meetings are shared with staff and residents, promoting a proactive and informed approach to safety throughout the home. Through these initiatives, Golden Plough Lodge continues to strengthen a culture of safety, accountability, and continuous improvement.

Since implementing the PCC Risk Management Modules and enhancing review processes, staff engagement in safety initiatives has increased. Insights from resident feedback and team meetings have directly led to actionable safety improvements, demonstrating measurable progress in both preventing incidents and fostering a culture of accountability and continuous learning.

## **PALLIATIVE CARE**

Palliative care provides symptom relief, comfort and support aimed at improving a person's quality of life. At GPL, we recognize that each resident's journey towards end of life is unique, and we are committed to providing individualized, compassionate care throughout the illness trajectory, including end-of-life care. GPL staff take palliative care seriously, understanding that the transition to end-of-life care is deeply personal and requires a multidisciplinary approach to meet the diverse needs of residents and their families. The Palliative Care Committee at GPL continuously reviews and refines our practices to ensure that residents deemed palliative receive care aligned with legislation, and GPL policies and procedures.

In 2026, GPL will implement several initiatives aimed at enhancing our palliative care approach. First, GPL will facilitate the Pallium

Canada LEAP (Long-Term Care Essential Approaches to Palliative Care) course for key staff members, including the Palliative Clinical Program Lead, Spiritual Advisor, Quality Improvement Nurse, and representatives of frontline staff. This initiative will strengthen staff knowledge and confidence in providing palliative care, ensuring evidence-informed approaches are consistently applied across all care settings. By enhancing staff competencies, GPL aims to improve symptom management, communication, and emotional support for residents and their families, thereby improving quality of life.

Second, GPL will implement the My Health end-of-life planning tool and the Palliative Performance Scale (PPS) to guide care decisions. These tools facilitate structured, personalized planning for residents, supporting their wishes to receive end-of-life care within GPL whenever possible. By using these tools, staff can proactively manage symptoms, avoid unnecessary transfers to emergency departments, and provide care that aligns with resident values and advanced directives. This approach exemplifies our commitment to delivering patient-centered care that respects dignity and comfort.

Finally, GPL will enhance family and care partner engagement by integrating them into the palliative care process through regular communication, education, and spiritual support. For example, nursing department employees, GPL Spiritual Advisor and Family and Resident Services team work closely with families to provide guidance, reassurance, and meaningful participation in care decisions. These activities ensure that families and care partners feel supported and informed, which directly contributes to improved emotional and psychosocial well-being for both residents and their loved ones.

Through these initiatives, GPL demonstrates a continuous commitment to improving the quality of life for residents with life-limiting illnesses, and at end-of-life. Our integrated approach to palliative care aligns with established standards, emphasizing symptom relief, personalized care planning, staff education, and family engagement. By strengthening these areas, GPL ensures that residents experience comfort, dignity, and meaningful support throughout their care journey.

## **POPULATION HEALTH MANAGEMENT**

GPL recognizes that the strength and quality of our services are closely tied to the community we serve and the network of support around us. We acknowledge the importance of our extended relationships with community partners, service providers, and various levels of government, understanding that collaboration is essential to meeting the evolving health and social needs of our residents. By fostering these partnerships, GPL can ensure coordinated care that aligns with population health management principles, addressing not only individual resident needs but also broader community health priorities.

We are committed to enhancing current collaboration with community partners by expanding our engagement and participation in local initiatives and programs. GPL actively contributes as a positive voice for long-term care and health care in the community, serving as a supportive partner to collective system partners within the Ontario Health Team framework. This collaboration ensures that residents benefit from timely access to specialized services, integrated care planning, and innovative programs designed to improve health outcomes and quality of life.

GPL also values the contribution of volunteers, whose experience, skills, and dedication strengthen our ability to provide holistic, person-centered care. We actively recruit, engage, support, and formally recognize volunteers for the invaluable role they play in enriching resident lives and enhancing community connections. In addition, we continue to involve and consult with our Resident Council in planning and decision-making, ensuring that care services reflect resident priorities and community needs both now and into the future.

To provide the right care at the right time, GPL utilizes Nurse Practitioner support and services through Ontario Health at Home services, alongside our team of physicians. This integrated approach ensures timely clinical assessment, intervention, and continuity of care, reducing unnecessary hospital transfers and supporting residents' ability to receive care within the GPL setting whenever possible.

Through these partnerships and population health-informed strategies, GPL remains committed to understanding and responding to the unique health and social needs of our residents. By leveraging community relationships, integrating clinical expertise, and engaging residents, families, and volunteers, we aim to deliver care that is proactive, collaborative, and responsive, improving overall health outcomes and quality of life for the population we serve.

**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

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Board Chair / Licensee or delegate



Administrator /Executive Director



Quality Committee Chair or delegate

Other leadership as appropriate

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