

Quality Improvement Plan (QIP)

Narrative for Health Care Organizations in Ontario

March 30, 2026

Meaford Long Term Care
a peopleCare community



**Ontario
Health**

OVERVIEW

Redeveloped in 2022, Meaford Long-Term Care has been a part of the peopleCare family since 2017. The municipality of Meaford is situated on the shores of beautiful Georgian Bay and is known for its apple orchards, agriculture and annual scarecrow festival.

The newly-built Home features four 32-bed areas for a total of 128 beds with private and basic accommodations. Residents are encouraged to decorate their rooms with personal items and favourite pieces of furniture when they can be accommodated.

The entire Home is dementia friendly with resident Home areas built around a secure interior courtyard, giving residents safe access to outdoor space and increased freedom and mobility. The gardens have raised flower beds so residents don't have to bend over or strain from a wheelchair to touch and smell. The Home also offers beautiful, airy spa rooms, a salon, dedicated space for multi-faith spiritual services and recreational kitchens in dining areas to support resident engagement and preferences.

As evidence of our commitment to Quality peopleCare Meaford currently holds Exemplary Accreditation with Accreditation Canada with the Survey being completed In November 2023. PeopleCare Meaford strives to exceed the Ministry of Health standards, and Accreditation Canada Standards. PeopleCare has been designated one of Canada's Best Managed Companies since 2013, achieving platinum status in 2023. peopleCare Meaford is proud of their values-based decision making and the positive impact that this has had for our residents, staff, and families.

peopleCare Meaford implemented LTCF last year and looks forward to seeing the benefits of this new platform.

As we prepared for the 2026/2027 QIP submission, the CQI committee reviewed our performance on key priority indicators, and thus we were able to select our priority areas for improvement as indicated in the plan.

DATA REVIEW PROCESS: We began the development of our Quality Plan with a thorough review of all clinical data, IPAC data, as well as our Resident, Family and Staff Survey data with our Quality Committee, Resident, and Family Town Halls, and our staff team including Health, Safety and Wellness Committee.

Through this review, as well guided by our organizations Balanced Score Card, and the new Resident Rights through the updated Act and Regulations we were able to determine the KPI's we will be monitoring and developing quality improvement plans to improve over the next 18 months. We have examined the key priority indicators from Ontario Health and continue to review and benchmark our indicators with homes in our organization and across the province.

PRIORITY AREAS FOR QUALITY IMPROVEMENT: In order to support forward movement towards our goals set in our QIP, as well as support our recovery post pandemic we have made a decision to focus on the key areas of resident QOL and satisfaction for this years QIP. In order to develop the change ideas and initiatives we engaged our front-line team, and partners to support setting achievable targets for our QIPs and to meet and exceed our goals for increased resident satisfaction. Our action plan includes our commitment to supporting our front line through our initiatives, a corporate QIP commitment towards palliative care approach for all care and services and working with our resident and families to improve QOL in the home through initiatives they have requested

through their feedback in the QOL survey conducted annually.

PROCESS TO MONITOR & MEASURE PROGRESS : peopleCare Meaford has an established circle of communication to support the monthly and quarterly review of outcomes through data analysis at leadership team meetings, departmental meetings, resident and family councils, our professional advisory committee and of course our quarterly quality meetings. The process we used to identify our home's priority areas for quality improvement this year was reviewing the data available to us and feedback from families and residents to ensure we are exceeding their expectation and keeping communication open and free flowing. These processes are well defined through the above committee's agendas and meeting minutes.

ACCESS AND FLOW

peopleCare Meaford implemented a new enriched admission Model. This model relies on the foundation of our unique and award winning Clinical pharmacy model in which we have embedded innovative HR solutions such as a 24/7 clinical pharmacists and onsite pharmacy technicians. This means a full scope of practice supporting our registered staff and residents with safe transitions and time released to care through the use of technology and pharmacist led medication reconciliation. We have been able to increase our support of social work in the home, with their role they support the implementation of the RNAO best practice resident, family centered care assessment tool that ensures that our residents and families are supported with providing their wishes, wants and needs that are then integrated directly into the initial plan of care. This assessment has already provided us with improvement on the resident, family and staff experience on admission to our home. We look forward to researching the impact of this model on resident, family staff experience, safety and efficiency this year with Trent University as our research partner.

EQUITY AND INDIGENOUS HEALTH

Equity is a key strategic priority in the 2026/27 QIP. PeopleCare Meaford recognizes the importance of addressing systemic inequities and fostering a culturally safe and inclusive environment for residents, families, and staff.

A core change idea for this QIP is the expansion of Equity, Diversity, Inclusion, and Anti-Racism (EDI-AR) education for leadership and key staff groups. Equity is central to our commitment to high quality, people centred care. We strive to ensure that all residents

have equitable access to services and opportunities that support dignity, well being, and quality of life, regardless of background, identity, ability, or life circumstances. Our Quality Improvement Plan (QIP) is grounded in Equity, Inclusion, Diversity, and Accessibility (EIDA) principles and reflects our responsibility to address systemic barriers that may impact health outcomes and resident experience.

Our QIP is supported by targeted strategies that strengthen equity in care delivery and workplace practices. Staff and volunteers participate in ongoing education focused on cultural competency, anti oppression, implicit bias, cultural humility, and anti racism, ensuring quality improvement efforts are informed by knowledge and awareness.

We foster inclusive and culturally safe environments by creating spaces where residents and team members can learn, grow, and authentically represent their identities and cultures. Recreation and leisure programs are intentionally designed to reflect diverse interests, abilities, and cultural backgrounds, promoting meaningful participation and social connection.

Leadership engagement is fundamental to sustaining equitable practice. Leaders will participate in equity focused learning, including 2SLGBTQ+ inclusion education, supporting inclusive decision making and accountability at all levels of the organization.

Resident, family, and care partner feedback is a cornerstone of our QIP. Input is collected through surveys, Resident and Family Councils. To ensure accessibility and broad participation, surveys are offered in multiple formats, including digital, paper, and assisted options.

Feedback and survey findings are reviewed by leadership and committee structures and translated into measurable actions within the QIP, ensuring resident voices drive meaningful improvement.

Key quality findings and action plans are shared with residents and families and made publicly available. Through transparent communication, ongoing engagement, and systematic evaluation, we remain committed to continuous improvement and the delivery of equitable, high quality, person centred care.

PATIENT/CLIENT/RESIDENT EXPERIENCE

Together we are Changing the World of Senior Living by creating inspired communities where bold ideas thrive.

PeopleCare Meaford is committed to transforming the experience for those who are touched by our services; residents, families, our staff, and partners. We foster vitality through purpose and fulfillment.

Empowering our unstoppable teams who always reach higher to achieve excellence.

peopleCare Meaford incorporates resident experience information into improvement activities through several avenues:

Surveys: peopleCare Meaford regularly conducts surveys among residents on an ongoing annual basis as a part of each resident's annual care conferencing calendar to gather feedback on their care experiences and quality of life. These surveys cover various aspects such as satisfaction with medical care, staff responsiveness, facilities, food quality, social activities, and overall well-being.

Analyzing survey responses allows peopleCare Meaford to identify areas for improvement as outlined on our Quality Improvement Plan.

Resident/Family Advisory Councils & Quality Committee: peopleCare Meaford has established advisory committees consisting of residents and families to provide ongoing feedback and suggestions for improvement. These committees can serve as valuable forums for residents to voice their concerns, preferences, and ideas directly to management. peopleCare Meaford incorporates the feedback received from these committees into their improvement initiatives.

Feedback Mechanisms: peopleCare Meaford does have established feedback mechanisms such as suggestion boxes, complaint forms, or regular meetings with residents to encourage open communication. By actively soliciting and listening to feedback from residents, peopleCare Meaford can gain insights into areas that require attention and prioritize improvement efforts accordingly.

Data Analysis: peopleCare Meaford collects and analyzes data from various sources, including resident feedback, to identify trends and patterns. By examining this data, peopleCare Meaford can pinpoint recurring issues or areas of strength and tailor improvement activities to address specific needs.

Quality Improvement Initiatives: peopleCare Meaford develops and implements quality improvement initiatives based on the feedback received from residents. These initiatives may include staff training programs, facility upgrades, changes to policies and procedures, or the introduction of new services or amenities aimed at enhancing the overall resident experience and quality of life.

Overall, peopleCare Meaford takes a comprehensive approach to incorporating resident experience information into improvement activities, leveraging multiple channels to gather feedback, analyze data, and implement meaningful changes that enhance the well-being and satisfaction of residents.

peopleCare Meaford has created designated clinic spaces in each of our homes to support residents privacy and well being for clinical care needs <https://peoplecare.ca/wellness-centres-offer-designated-clinic-spaces-in-peoplecare-ltc-homes/>

PROVIDER EXPERIENCE

peopleCare Meaford has been providing service in Meaford for over 40 years, and through that time we have developed strong partnerships within our local, regional and provincial community and will continue to expand our partnerships.

peopleCare Meaford, guided by PeopleCare's new strategy, will look to optimize innovative solutions for staff recruitment, retention and engagement. We look forward to continuing to build on the development of partnerships for global recruitment strategies in support of internationally educated nurses, and skilled refugee recruitment.

For our skilled team we have heavily invested in education opportunities to support leadership and skills training in our home. Examples of what is planned for 2025 include leadership training for registered staff and managers. Education and training in dementia care for our frontline staff across the home, with a focus on enhancing the dementia care experience in our special care home area. This will enable us to prepare for implementation of an emotion-based care model in the future. We have also partnered with an expert on the lived experience of residents and families to provide education to our frontline staff on the importance of resident and family centered care.

peopleCare Meaford is committed to being a force for good in our communities and around the globe by empowering women and youth in developing countries and enabling refugees and immigrants to create a new life in Canada. We also have a renewed focus on opportunities to give back through volunteering community involvement.

SAFETY

In 2026/2027 peopleCare Meaford is looking forward to continuing to focus on resident safety. We will utilize the scores and data from our Resident, and Family QOL survey tool to support us in the development of our QIP.

Resident safety is a core priority within our Quality Improvement Plan. To strengthen falls prevention and reduce risk, the home has implemented a fall analytics and decision support tool that consolidates fall related data and provides actionable insights to the interdisciplinary team and leadership. The tool enables proactive monitoring of fall patterns, including high risk times, locations, repeat fallers, and contributing risk factors, allowing for timely, evidence informed interventions.

This tool is embedded within existing governance and clinical oversight processes through weekly interdisciplinary reviews, clear accountability for follow up actions, and care plan updates for residents at increased risk. Findings are routinely reported to leadership and the Quality Committee, supporting transparency, oversight, and continuous monitoring.

This data driven, governance aligned approach enhances proactive risk management, improves process reliability, and supports safer, person centred care for residents.

PALLIATIVE CARE

It is the policy of peopleCare that every resident will receive Palliative Care and End of Life care in a manner that meets their needs. The program will involve an interdisciplinary team that will provide a person-centered and palliative approach to

care that will support the resident's quality of life until death.

A palliative approach and end of life care aims to:

Relieve suffering for residents and family members

Improve quality of life during illness and death

Provide a dignified death for residents

Provide support and resources to staff and families in the Home

OBJECTIVES

Provide palliative/end of life care that is resident-centered

Address pain and symptom management,

Consider physical, emotional, psychological, social, cultural, and spiritual needs

Grief and bereavement support.

Ensure staff receives appropriate training in a palliative approach and end of life care

Interdisciplinary approach to care

Provide guidance through the palliative care resource team

TERMS

Palliative Approach:

Is an approach to care that improves the quality of life of persons and their families facing the problem associated with life-limiting illness, through the prevention and relief of suffering by means of early identification, advance care planning and assessment and treatment of pain and other problems, physical, psychosocial, cultural, and spiritual.

Care:

focuses on comfort and quality of life to every resident when it benefits them the most

Provides treatment of pain and other symptoms
 Interdisciplinary approach to care
 Supports the resident to live as actively as possible
 Offers a support system to help the family cope during the resident's illness

End of Life Care: is the final stage of the palliative approach. The resident is expected to die within the near future (months, weeks, days)

COMMUNITY PARTNERS

Consider utilizing a community organization to support a palliative approach and end of life care.

Alzheimer's Society
 Pain & Palliative Care Consultant
 Local Hospice/hospice volunteers
 Cultural organizations
 Spiritual organizations
 End of Life Care Network
 MS Society
 Family Health Teams

ASSESSMENTS:

Transition of Residents from Palliative to End of Life
 The Palliative Performance Scale (PPS) will be used as a tool to recognize a decline in a resident. The PPS should be completed on admission within the first 48 hours, , upon return from hospital and when there is a significant change.
 In addition, when the PPS is declining the tool should be completed to determine progress towards end of life.

PPS score of 30-0%. (Level of functioning appears to be the most important indicator of prognosis –RNAO 2011).
 The Changes in Health, End-Stage Disease and Signs and Symptoms (CHESS) score, which is done as part of the quarterly RAI, as well as when there is a significant change to a resident can Be used to identify residents who may benefit from a palliative approach or who may be progressing to end of life.

CHESS Scoring:

0 = No health instability
 1 = Minimal health instability
 2 = Low health instability
 3 = Moderate health instability
 4 = High health instability
 5 = Very high health instability

Personal Severity Index Scale (PSI) completed with RAI, can be used to identify residents who may be moving towards end of life. PSI is rated from 0-18. Researchers who developed the PSI found that residents with a score of 9 or more are at high risk of death within 6 months.
 In addition to change in status, these scores will be reviewed at admission and annual care conferences as a means of facilitating discussion on residents' current palliative approaches to care and palliative options available in the home.

It is important to provide resident centered care by addressing and responding to end of life needs of various populations, those with cognitive impairment, language barriers, those with chronic diseases, and mental illness.
 Prior to residents' determination of being considered palliative

advance care planning should be encouraged. Refer to policy/procedure on Advance Care Plan for in-depth information. It is important to know residents wishes relating to comfort, end of life care, and quality of life. Staff should consider and respond to unique needs or background of various ethnicities, nationalities, cultures, and abilities that may affect their experience of palliative and end of life care.

Plan of Care Involvement

If time allows an end-of-life care conference may take place with family and the interdisciplinary team.

The plan of care will be updated when a resident has transitioned to End of Life.

If it is appropriate discussion on organ donation can take place at this time if it has not already been discussed.

End of Life Communication

Our home utilizes a butterfly symbol to inform staff from all departments that a resident has been determined to be at "End of Life". The symbol will be posted outside the door and at the bedside.

Huddle: Residents identified as Palliative/ End of Life will have this communicated at Huddle. This provides an opportunity for all disciplines to be aware and to ensure the plan of care is updated.

Employee Support

Resources available to employees include our Employee Assistance Program (EAP) service, access to social worker in the Home, peer support, and support of clergy.

Family Support

Families support is available through employees, clergy, social worker, hospice volunteers both during and after the death of a resident. Our home is pleased to offer a palliative care Stay Over Room that can be offered to family members during this time. Our home also offers a quarterly support group called "Over the Rainbow Bridge" a chance for residents and/or families to discuss all aspect of death and grief.

Palliative Care Cart

Our home has a palliative care cart for family use during end of life. The cart will be brought to families and contains supplies that will make the family comfortable.(Food, drinks, personal hygiene supplies)

POPULATION HEALTH MANAGEMENT

When addressing population health considerations for peopleCare Meaford, we have the tools, resources and partnerships to assess, document and care plan the following domains:

Demographics: Understanding the demographics of the residents living at peopleCare Meaford is crucial. This includes age distribution, socioeconomic status, cultural backgrounds, and any specific health needs associated with these demographics.

Health Status: Assessing the overall health status of the residents is important for identifying prevalent health conditions, chronic diseases, disabilities, and any existing health disparities within the population.

Access to Healthcare Services: Ensuring access to healthcare services such as primary care, specialists, mental health services, and emergency care is essential for maintaining the health and well-being of the residents. This includes considering transportation

barriers and the availability of health resources within the community. peopleCare Meaford has many longstanding partnerships with the community.

Preventive Care and Health Promotion: During program development and evaluation we prioritize implementing programs and initiatives focused on preventive care and health promotion can help improve the overall health outcomes of the residents. This may include health education, screenings, vaccinations, and lifestyle interventions.

Environmental Factors: Assessing the environmental factors within and around peopleCare Meaford is important for identifying potential health hazards or exposures that could impact the residents' health. This includes air quality, water quality, safety measures, and access to green spaces.

Social Support and Community Engagement: Promoting socialsupport networks and community engagement activities can help foster a sense of belonging and improve mental health outcomes among the residents. This may include organizing social events, support groups, and volunteer opportunities.

Crisis Management and Emergency Preparedness: Developing plans for crisis management and emergency preparedness is essential for addressing potential health crises such as outbreaks of infectious diseases, natural disasters, or other emergencies.

By addressing these population health considerations, peopleCare Meaford delivers on our commitments towards promoting the health and well-being of its residents, families and staff and creating a supportive and thriving community environment.

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

Board Chair / Licensee or delegate

Administrator /Executive Director

Quality Committee Chair or delegate

Other leadership as appropriate
