

REPORT TO COUNTY COUNCIL

Woodingford Lodge Accreditation Update

To: Warden and Members of County Council

From: Director of Long Term Care

RECOMMENDATION

1. That County Council receive Report WDFL 2025-01 entitled “Woodingford Lodge Accreditation Update” as information.

REPORT HIGHLIGHTS

- Post COVID pandemic and with the introduction of the Fixing Long Term Care Act, 2021, the Long-Term Care Sector has become the heaviest regulated sector provincially.
- Given the regulatory requirements for Long-Term Care, Woodingford Lodge voluntarily participated in the Accreditation process for the first time to ensure the quality care and services offered to the residents is achieving high standards.
- The result of the process awarded Woodingford Lodge “Accreditation with Commendation” which is a four-year cycle and the second highest level that an organization can receive. It means that we were able to meet at least 85% of all normal and high priority criteria and 90% of Required Organizational Practices that Accreditation Canada measures. These results demonstrate that Woodingford Lodge is committed to the quality and safety practice to all who live and work within the home.
- In total, Accreditation Canada reviewed 282 standards of practice with only 14 of those standards being unmet or needing adjustment.

IMPLEMENTATION POINTS

Staff will begin introducing reports to County Council as Committee of Management on a quarterly basis, with the first report planned for April 2025. This reporting process will fulfil the requirements of Committee of Management to maintain our Accreditation standing and is also a requirement under the Fixing Long-Term Care Act, 2021. As required under the FLTA, staff will circulate criminal record check request forms to ensure all Councillors meet the legislative requirement to fulfil this obligation.

Financial Impact

The cost of the accreditation process paid to Accreditation Canada to assess Woodingford Lodge’s quality and effectiveness of long-term care services and measure compliance in accordance with Provincial legislation was \$23,895. Upon successful completion of the accreditation process, the home will now receive \$30,804 annually from Accreditation Canada to be used to ensure the home remains in good standing. These funds will be used to offset related expenses resulting in no impact on annual operating budgets.

Communications




The residents, families and staff have all been made aware of the status of Accreditation that has been awarded to the homes through newsletter distribution as well as presentations offered during resident and family councils.

2023-2026 STRATEGIC PLAN

Oxford County Council approved the **2023-2026 Strategic Plan** on September 13, 2023. The Plan outlines 39 goals across three strategic pillars that advance Council’s vision of “Working together for a healthy, vibrant, and sustainable future.” These pillars are: (1) *Promoting community vitality*, (2) *Enhancing environmental sustainability*, and (3) *Fostering progressive government*.

The recommendation in this report supports the following strategic goals.

Strategic Plan Pillars and Goals

PILLAR 1	PILLAR 2	PILLAR 3
		
Promoting community vitality	Enhancing environmental sustainability	Fostering progressive government
Goal 1.4 – Connected people and places		Goal 3.1 – Continuous improvement and results-driven solutions Goal 3.2 – Collaborate with our partners and communities Goal 3.4 – Financial sustainability

See: [Oxford County 2023-2026 Strategic Plan](#)

DISCUSSION

Background

Woodingford Lodge Woodstock, Ingersoll and Tillsonburg were recently accredited based on a thorough assessment of its services by surveyors from Accreditation Canada. The survey team spent 5 days at our long-term care homes, evaluating it against national standards.

The accreditation process is voluntary, involving a third-party assessment to ensure that we are providing the best quality of care and services to our residents. There were 282 standards of practise that were evaluated with only 14 of those standards being unmet or requiring adjustment.

The residents, staff, families and stakeholders were actively involved in this process to ensure compliance standards are adhered to and that Woodingford Lodge is remaining innovative and collaborative with community partners. Stakeholders included members of the local hospitals, partners from various organizations and members from Colleges and Universities with whom the home partners with for student placements and implementation of research initiatives for best practice.

The main topics of the survey process included:

- Governance and Leadership;
- Infection control measures and standards;
- Medication management and safety;
- Delivery of Care models;
- Resident and Family care experiences; and
- Emergency and Disaster management.

Comments

The following provides a summary of Accreditation Canada's findings in their report.

Governance and Leadership

The key areas of excellence achieved under governance and leadership include: development of the home's Strategic Plan 2024-2027; introductions of quality improvement measures to ensure our policy framework meets the standards; partnerships between Council and Senior Leadership; community partnerships within the municipality and province; as well as collaboration with the Ministry of Long-Term Care.

Delivery of Care Models

In this category the areas of excellence include noted: education and training opportunities; the creation and development of virtual health infrastructure tools; policies; and enhancing resident and family partnerships

Resident and Family Care Experiences

Resident care experience was recognized for excellence in the creative recreational style of programming being offered to the diverse group of residents in the home; the home's

philosophy of being resident and family focussed care is adhered to; innovative strategies implemented into the home to divert Emergency department visits with the expansion of the IV therapy service offered; our unique Family Transition program; and streamlined admission process.

Infection, prevention and control was recognized for excellence due to our dedicated team to support the home's needs for outbreaks; adoption of leading practices and resources; and the successful immunization program and results achieved, Excellence was also awarded for the successful management of the pandemic and other outbreaks within all locations.

Excellence in medication management and safety was achieved with the implementation of the automated dispensing units for controlled medications and emergency supply medications; the partnerships with pharmacy for medication reconciliation; and the creation of a medication safety team designed to foster a culture for learning and improvement.

Emergency and Disaster Management

Excellence was achieved in this category citing our frequent testing of emergency and disaster plans; partnerships and debriefs supporting feedback and revisions as needed of protocols; as well as our support of community for our interim shelter agreements.

Accreditation Canada referenced a legislative requirement arising from pandemic under the Fixing Long-Term Care Act, more specifically the requirement for all long-term care homes to establish a "Committee of Management" comprised of not fewer than three members of Council.

The purpose of establishing a Committee of Management is to improve decision-making; increase resident satisfaction; enhance awareness and compliance with the legislation; ensure long term sustainability; and enhance community trust and engagement.

In order to achieve the purpose of a Committee of Management, the Director of Long Term Care will prepare and present to County Council, as Committee of Management with the Warden as Chair, quarterly reports containing key performance indicators related to Quality Assurance and Compliance Standards and Infection, Prevention and Control Standards. Additional information will be presented regarding regulatory updates; quality improvement initiatives; risk management updates; staffing and recruitment activities; policy review and updates if required; strategic planning to facilitate discussion around facility improvements; and new initiatives. The Committee of Management will also provide the residents and families the opportunity for engagement opportunities. The first of the reports to the Committee of Management will be presented to Council at a regular meeting of Council scheduled in April 2025.

CONCLUSIONS

Staff are proud of the results of the past few years of concerted efforts in finally achieving accreditation in good standing along with many of our peers in long-term care. To ensure Woodingford Lodge maintains their good standing, staff will present quarterly reports to County Council sitting as the "Committee of Management" that demonstrate how Woodingford Lodge services remain responsive, sustainable, and of the highest quality.

SIGNATURES

Departmental approval:

Original Signed By _____

Mark Dager
Director of Long Term Care

Approved for submission:

Original Signed By _____

Benjamin R. Addley
Chief Administrative Officer