

## REPORT TO COUNTY COUNCIL

# Long-Term Care Committee of Management Quarterly Report

**To:** Warden and Members of County Council

**From:** Director of Long-Term Care

## RECOMMENDATION

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1. That Oxford County Council receives the Committee of Management Updates from Woodingford Lodge for information as per requirements under the Fixing Long-Term Care Act, 2021, Section 135.

## REPORT HIGHLIGHTS

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- Committee of Management Quarterly Reports provide County Council a detailed quarterly summary of key activities and Quality Metrics within Woodingford Lodge.
- Committee of Management Quarterly Reports can include the advocacy requests of the residents, families, and staff to ensure high-quality care and services are being communicated to County Council.
- Committee of Management is a requirement under the Fixing Long Term Care Act, 2021 and is responsible for ensuring compliance with the requirements of the Act.

## IMPLEMENTATION POINTS

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Quarterly Reports will be provided to the Committee of Management to ensure continued compliance requirements are fulfilled.

Financial Impact

No additional financial impact beyond the approved 2025 operating budget.

Communications

Staff will communicate the establishment of the Committee of Management to the Resident and Family Councils to ensure awareness of communication pathways are available to have their voice heard.

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 1.3 – Community health, safety and well-being		Goal 3.1 – Continuous improvement and results-driven solutions Goal 3.2 – Collaborate with our partners and communities

See: Oxford County 2023-2026 Strategic Plan

## DISCUSSION

### Background

All long-term care homes are required to annually report to the Province and publicly provide quality performance indicators as prescribed under O.Reg. 246/22. The regulation also requires all long-term care homes to establish a continuous quality improvement committee of staff consisting of cross functional representation. One of the committee's responsibilities is to prepare an annual report on the continuous quality improvement initiatives for the homes and publish a copy of the report on its website.

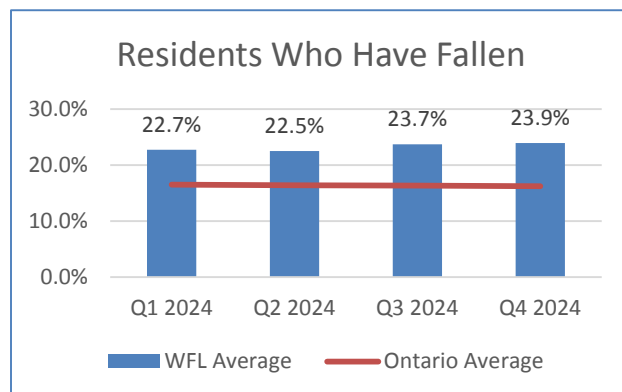
The Woodingford Lodge Progress Reports for the Provincial fiscal year ending March 31, 2024 are found on the County's website:

- Ingersoll Progress Report
- Tillsonburg Progress Report
- Woodstock Progress Report

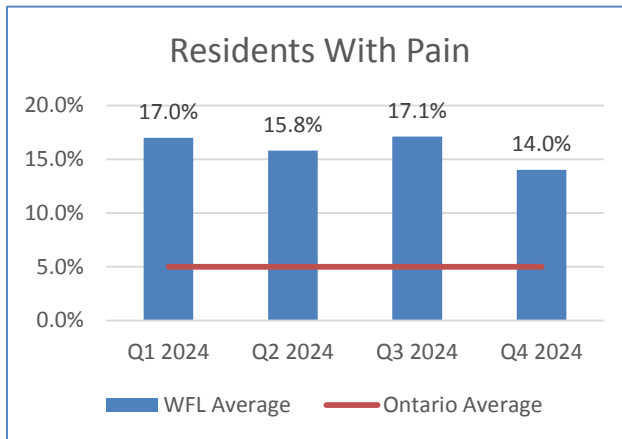
### Comments

Through regular quarterly reports, the Committee of Management will receive operational updates from Woodingford Lodge that provides a summary of current performance outcomes to ensure compliance with provincial regulations and delivery of high-quality care to the residents. These reports provide an update on the continuous quality improvement initiatives within Woodingford Lodge.

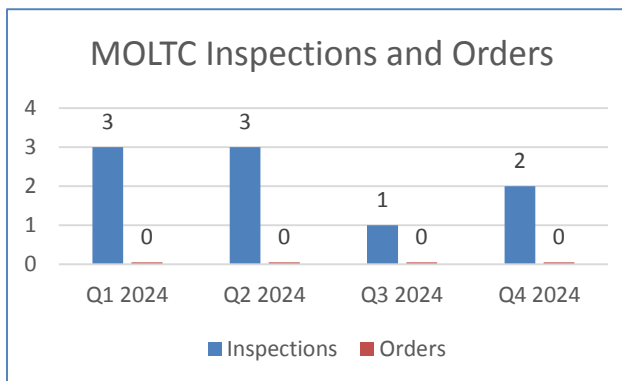
The [Health Quality Ontario website](#) provides a list of quality health indicators that are required by the Province and to be publicly reported which include, antipsychotic medication use, depression, pressure ulcers, pain, falls and physical restraint use. This report presents two indicators; falls and pain as they align to our current quality improvement initiatives. All six indicators are reviewed quarterly at our quality improvement committee meetings. The other metrics provided in this report illustrate the legislative requirements and reportable data to the Ministry of Long Term Care.



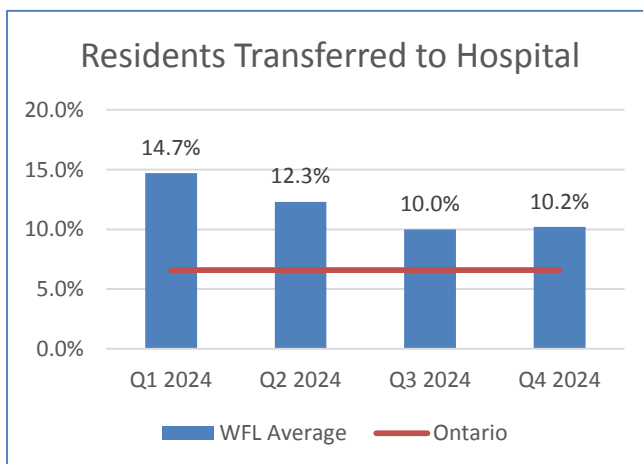
Falls management and prevention remain a key quality improvement initiative at Woodingford Lodge. New initiatives to reduce this indicator include a multidisciplinary team review at time of fall and the establishment of rounds at the end of shift for resident safety. The goal of these rounds is to identify resident needs and eliminate potential falls hazards.



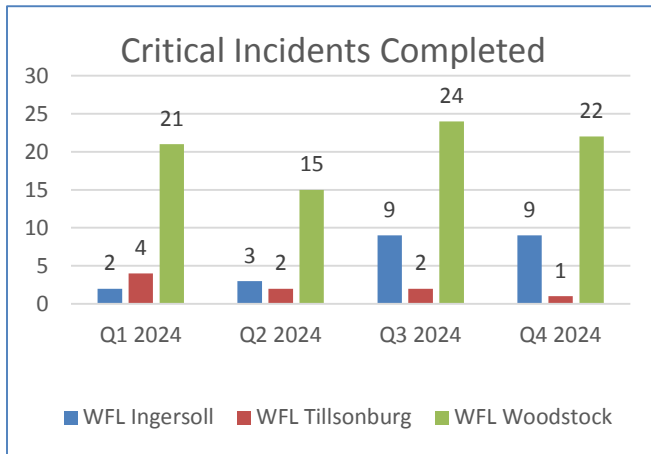
Pain management remains a key quality improvement initiative at Woodingford Lodge, aimed at reducing the daily pain experienced by residents. To further enhance care, initiation of a pain assessment tool that is tailored to our non-verbal residents will be implemented with the goal of identifying early demonstrations of pain.



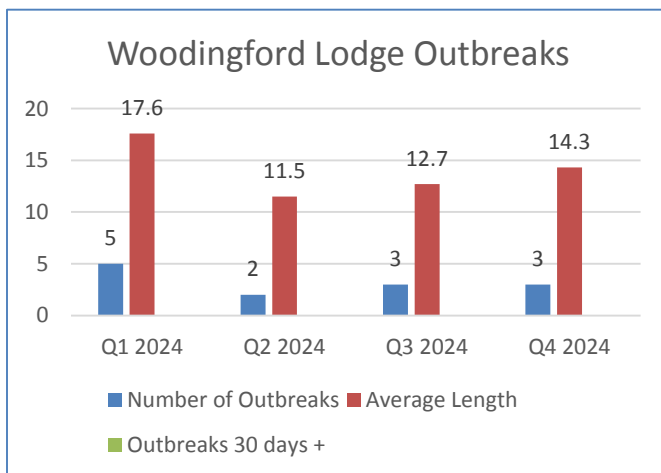
In 2024, Woodingford Lodge locations have undergone a total of nine Ministry of Long-Term Care (MOLTC) inspections, with no compliance orders issued. This achievement reflects the high standard of care provided within the home.



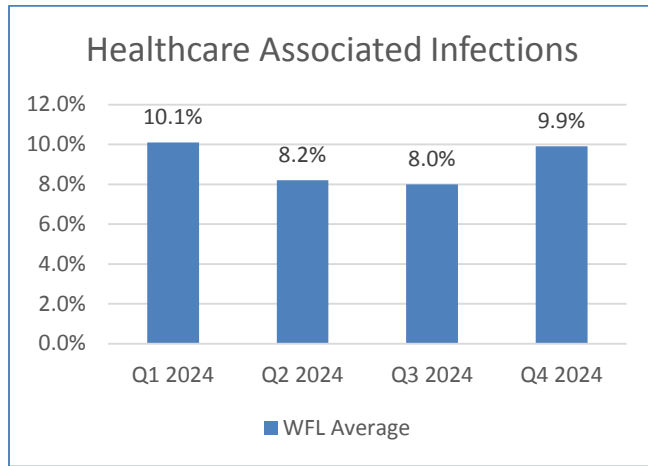
Reducing emergency room visits remains a key priority for Woodingford Lodge. To support this goal, several new initiatives have been implemented, including the addition of a second Nurse Practitioner position, IV therapy training for all registered nurses, on-site suturing and stapling for minor wounds, specialized wound care, and enhanced pain management strategies. As a result, hospital transfers have decreased over the past year with continued efforts aimed at further reduction.



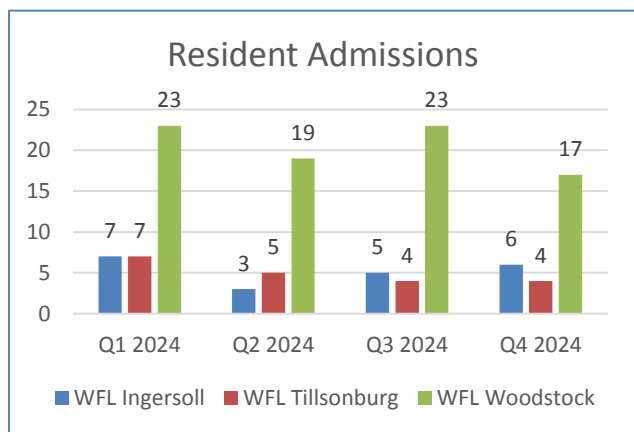
Given the nature of the population at Woodingford Lodge, critical incidents will continue to occur and must be reported to the Ministry of Long-Term Care (MOLTC) immediately. Critical Incidents are significant incidents or events that impact our residents' safety. This reporting process is time-intensive for the team members involved, as each incident requires a thorough investigation, followed by the implementation or adjustment of processes and interventions to enhance resident safety. There was a total of 114 critical incidents in 2024.



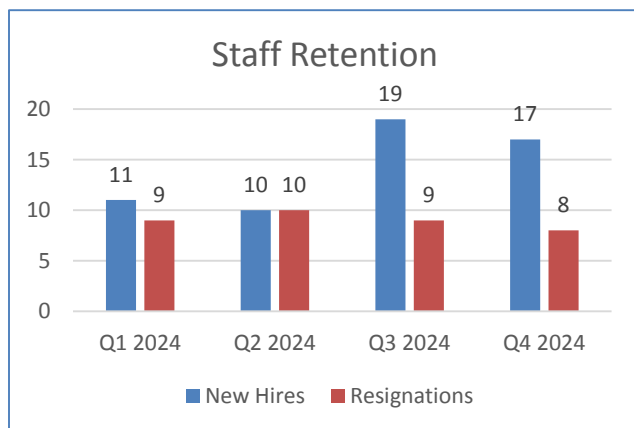
Woodingford Lodge sites have had a combined total of 13 outbreaks in 2024, with the average length of time ranging between 11-18 days, with no outbreaks lasting over 30 days.



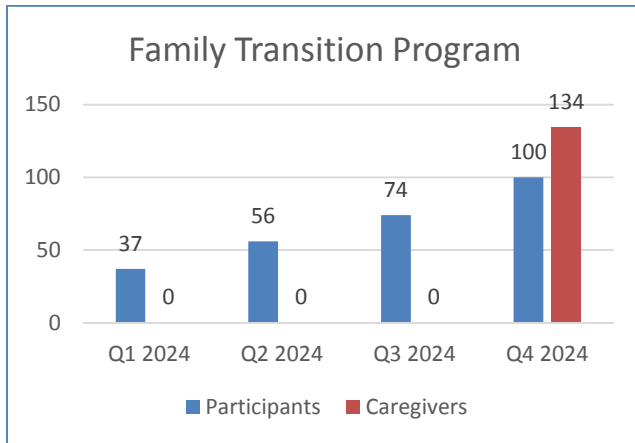
Health care-associated infections are often resistant to antibiotics, necessitating additional precautions during resident care. In 2024, there has been an increase in such infections; however, these cases have been identified upon resident admission rather than through internal transmission. Woodingford Lodge has maintained a record of no internal spread.



Across the three sites, a total of 123 admissions have been recorded in 2024. The admission process is comprehensive and requires several hours to complete. Despite the high volume of new residents, team members remain committed to supporting both residents and their families throughout the transition. For 2025, the admission process has been restructured to place greater emphasis on welcoming new residents and enhancing transitional support.



In 2024, Woodingford Lodge welcomed 57 new staff members across all service areas. Each employee undergoes a comprehensive orientation program to familiarize themselves with essential routines and procedures. During this period, there have also been 36 staff departures. To enhance staff retention, Woodingford Lodge is actively working on revamping its orientation, education opportunities and communication processes.



The Family Transition Program (FTP) at Woodingford Lodge plays a crucial role in preparing residents and caregivers from the local community for Long-Term Care. In 2024, the program has supported over 100 intakes and 134 caregivers. Without this initiative, these 234 community members would not have access to the essential support needed for a smooth and healthy transition.

### **Success Stories:**

#### **Intergenerational Recreation Program:**

The Recreation Department at Woodingford Lodge, in collaboration with Oxford County's EarlyON Program, has created something truly special—an intergenerational program that bridges generations through the simple joys of play, laughter, and connection.

Weekly, at each location, EarlyOn facilitates its children's play group fostering intergenerational interactions between our senior residents and community children.

For our residents, this program is more than just an opportunity to watch young children from the community play—it's a heartwarming experience that brings cherished memories rushing back. The giggles, the tiny hands reaching out, the sweet sound of nursery rhymes—it all evokes moments of childhood, parenthood, and grandparenthood. It's a chance to relive the past while embracing the present.

This is more than just a program. It's a reminder that joy knows no age, and that the bonds we create, even in the simplest of moments, can warm the heart in ways words can hardly capture.

#### **Supporting End of Life Wishes:**

In late December 2024, a resident voiced his final wish to staff to celebrate Christmas at home, one last time and to practice his right of Medical Assistance in Dying (MAID) following the holidays. The home met as a team to determine how to support this resident during a time of the year when many closures of services occur.

Our maintenance team came in on Christmas Eve to personally deliver the residents medical bed to their home in the community. The clinical team ensured that adaptive devices and routine medications were provided, and the team mobilized our community partners in the Community Paramedicine Program to support transportation needs. Our medical clinicians worked with the community MAID practitioners to ensure a seamless transition of care occurred. This collaboration demonstrates the importance of providing residents and family centered care and left a family grateful for the memories created.

**CONCLUSIONS**

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The Committee of Management has received updates on quality initiatives occurring at Woodingford Lodge. These ongoing efforts will ensure compliance, enhance services, and support the well-being of residents.

**SIGNATURES**

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**Departmental approval:**

| Original signed by

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Mark Dager  
Director of Long-Term Care

**Approved for submission:**

Original signed by

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Benjamin R. Addley  
Chief Administrative Officer