

Let's Make Healthy
Change Happen.



Quality Improvement Plan (QIP) Narrative for Health Care Organizations in Ontario

Radiant
Care
Tabor
Manor

Long-Term Care
March 2026

This document is intended to provide health care organizations in Ontario with guidance as to how they can develop a Quality Improvement Plan. While much effort and care has gone into preparing this document, this document should not be relied on as legal advice and organizations should consult with their legal, governance and other relevant advisors as appropriate in preparing their quality improvement plans. Furthermore, organizations are free to design their own public quality improvement plans using alternative formats and contents, provided that they submit a version of their quality improvement plan to Health Quality Ontario (if required) in the format described herein.

ontario.ca/excellentcare

Overview

The objective of our Quality Improvement Plan (QIP) is to optimize ambient conditions, including reducing noise levels, improving lighting, maintaining tidy and well-organized spaces, and ensuring high-quality, accurate delivery of resident laundry to promote comfort, dignity, and quality of life. This objective was selected based on feedback from Long-Term Care residents, highlighting lower satisfaction ratings in the 2025 Resident Experience Surveys.

Our QIP aligns with the quality objectives in our organization's strategic plan, complies with the Long-Term Care Service Accountability Agreement (L-SAA), and supports provincial and regional strategies focused on client-centered care, including the Seniors Strategy in our province.

Over the past year, we have dedicated most of our staff time and energy to ensuring the safety and support of our residents, staff, visitors, and family members. We will continue to prioritize quality improvement efforts aimed at enhancing resident satisfaction, particularly in strengthening communication between the home, residents, and their families.

Resident Experience

This year's Quality Improvement Plan (QIP) has been developed in consultation with our Residents' Council to enhance resident satisfaction, specifically regarding enhancing a home-like environment to support resident well-being, based on the feedback received.

We are committed to collaborating with residents and gathering their feedback through regular Residents' Council meetings and our annual Resident Experience Surveys. After identifying areas for improvement, we held discussions with the Residents' Council, which supported our focus on enhancing residents' living environment to promote comfort, dignity, and well-being. Our staff will create an action plan and report back to both the Resident's Council and Family Council to share our strategies for improving resident satisfaction.

Provider Experience

Radiant Care Tabor Manor is committed to strengthening recruitment, retention, workplace culture, and overall staff experience through strategic initiatives aligned with our organizational plan.

To support recruitment, we maintain strong partnerships with local colleges and universities that provide Personal Support Worker (PSW) and Nursing student placements within our home. These placements offer early exposure to long-term care practice, support workforce readiness, and create a reliable recruitment pipeline. We also participate in the Ministry's PREP-LTC Living Classroom initiative, integrating education and clinical practice within the home to enhance staffing stability and competency development.

We actively support Ontario's incentive funding program aimed at attracting new PSW graduates to the Long-Term Care and Home and Community Care sectors. We promote these opportunities to students and new graduates and facilitate onboarding processes aligned with provincial funding requirements, further strengthening recruitment efforts.

To support retention, we have implemented a structured employee referral program with a two-step incentive model, recognizing staff when referred candidates advance to interview and again upon successful completion of probation.


Employee recognition is embedded in our strategic plan through an immediate, tailored recognition approach that acknowledges contributions in real time. Workplace culture is reinforced through our internally developed curriculum, *The Radiant Care Way*, focused on relational excellence. All team members complete this training and commit to a Relational Charter, fostering accountability, respect, and collaboration.


Contact Information/Designated Lead

Fola Akano, Senior Administrator Long-Term Care
Chair, Continuous Quality Improvement Committee
1 Tabor Drive, St. Catharines, ON L2N 1V9
Email: folaa@radiantcare.net; Phone: 905-934-3414, ext. 1054

Sign-off

I have reviewed and approved our organization's Quality Improvement Plan


_____ Ken Friesen, Board Chair


_____ Tim Siemens, Chief Executive Officer
Chair, Quality Council


_____ Fola Akano, Senior Administrator Long-Term Care
Chair, Continuous Quality Improvement Committee

2026 - 2027 Quality Improvement Plan - Long Term Care

AIM		MEASURE				CHANGE				
Quality Dimension	Objective	Measure / Indicator	Current Performance	Target Performance	Target Justification	Planned Improvement Initiatives (change ideas)	Methods	Process Measures	Target for Process Measures	Comments
Enhancing a Home-Like Environment to Support Resident Well-Being	Optimize ambient conditions, including reducing noise levels, improving lighting, maintaining tidy and well-organized spaces, and ensuring high-quality, accurate delivery of resident laundry to promote comfort, dignity, and quality of life.	Percentage of residents responding positively to the following questions: (1) Temperature inside our building; (2) Overall appearance of Radiant Care Tabor Manor; (3) Laundry service at Radiant Care Tabor Manor.	94% (90 of 95) positive responses	96% positive responses	To best match performance in other categories on the Resident Experience Survey	Resident comfort and temperature audits	Weekly audits are completed by Assistant Director of Care (ADOC) to ensure temperatures are recorded and are within 22°C-26°C range as per FTLCA 2021. Provide education at weekly unit meetings on heating and cooling protocols.	Nursing leadership team to monitor air temperature log on a weekly basis to ensure the recordings are within range; e.g., 22°C-26°C. Education completed	Air temperatures are within the ranges of 22-26°C consistently. April 1, 2026, and ongoing	

2026 - 2027 Quality Improvement Plan - Long Term Care

AIM		MEASURE				CHANGE				
Quality Dimension	Objective	Measure / Indicator	Current Performance	Target Performance	Target Justification	Planned Improvement Initiatives (change ideas)	Methods	Process Measures	Target for Process Measures	Comments
						Ambient environmental audits focusing on noise, lighting, organization and tidiness	<p>Recreation staff to ensure that appropriate noise levels are maintained while residents are in the dining room; (e.g., soft, calming background music and no excessively loud television shows).</p> <p>Supervisors to complete weekly audits in the dining rooms to ensure noise levels are adequate.</p>	<p>Noise levels monitored in dining room</p> <p>Audits completed</p>	<p>April 1, 2026, and ongoing</p> <p>April 1, 2026, and weekly</p>	
							Director of Care (DOC) will schedule 1-2 PSWs to complete room audits for excessive clutter or equipment that can be removed on a biannual basis.	Audits completed to ensure that all resident rooms are clean, tidy and free of excessive clutter.	June 1 and November 1, 2026	

2026 - 2027 Quality Improvement Plan - Long Term Care

AIM		MEASURE				CHANGE				
Quality Dimension	Objective	Measure / Indicator	Current Performance	Target Performance	Target Justification	Planned Improvement Initiatives (change ideas)	Methods	Process Measures	Target for Process Measures	Comments
							<p>During admission process, ADOC to remind family and residents that Radiant Care Tabor Manor does not accept donations and that rooms are to be cleared out within 24 hours of a resident being discharged.</p>	<p>(1) Supervisors will work together to ensure the storage room in the basement is cleaned and organized for their department.</p> <p>(2) Resident belongings are removed from the home within 24 hours of a resident being discharged.</p> <p>(3) Storage rooms on home areas are neat and tidy. DOC to complete audits monthly and to follow up on unlabeled items.</p> <p>(4) Resident home areas and meeting rooms are clean and tidy and free of excessive clutter.</p>	<p>April 1, 2026 and ongoing</p> <p>April 1, 2026 and ongoing</p> <p>April 1, 2026, and ongoing</p> <p>April 1, 2026 and ongoing</p>	

2026 - 2027 Quality Improvement Plan - Long Term Care

AIM		MEASURE				CHANGE				
Quality Dimension	Objective	Measure / Indicator	Current Performance	Target Performance	Target Justification	Planned Improvement Initiatives (change ideas)	Methods	Process Measures	Target for Process Measures	Comments
							DOC to provide education at weekly unit meetings on Dining with Dignity.	Weekly education completed	May 2026	
							Supervisors will complete 1 dining room audit per month each using Radiant Care Dining Audit.	Monthly audits completed	April 1, 2026, and ongoing	
							Education will be provided to nursing staff at weekly unit meetings on entering WorxHub requests for equipment that needs repair.	Weekly education completed	April 1, 2026, and ongoing	
						Laundry quality and accuracy audits	Nutrition Manager to complete monthly audits of resident rooms to ensure items are clean, in good condition, and delivered to the correct resident.	Monthly audits completed	April 1, 2026, and ongoing	

2026 - 2027 Quality Improvement Plan - Long Term Care

AIM		MEASURE				CHANGE				
Quality Dimension	Objective	Measure / Indicator	Current Performance	Target Performance	Target Justification	Planned Improvement Initiatives (change ideas)	Methods	Process Measures	Target for Process Measures	Comments
							DOC will provide education to personal support workers during weekly unit meetings about the importance of completing the personal belongings form correctly; (i.e., name, location, etc.) to prevent any delays in getting laundry items labelled and to ensure that residents will receive their clothing in a timely manner.	Weekly education completed	May 2026	
							DOC to provide education to staff on lost and the found process.	Education completed	April 1, 2026, and ongoing as required	

2026 - 2027 Quality Improvement Plan - Long Term Care

AIM		MEASURE				CHANGE				
Quality Dimension	Objective	Measure / Indicator	Current Performance	Target Performance	Target Justification	Planned Improvement Initiatives (change ideas)	Methods	Process Measures	Target for Process Measures	Comments
						Tidiness and cleanliness of the home	Weekly audits to be completed by the Manager of Support Services	Audits completed to ensure all residents' bedrooms and common and service areas throughout the entire home are cleaned, dusted, vacuumed, swept, or wet mopped, where applicable.	June 1 and November 1, 2026	