Quality Improvement Plan (QIP)

Narrative for Health Care Organizations in Ontario

February 26, 2026





OVERVIEW

Heidehof is a Long-Term Care Facility housing 106 residents. It is also a campus of care setting housing 91 units of apartments for seniors and 90 units of life lease living. We offer Home Support services to those seniors living independently on the campus. Heidehof is an ethnic home where the German flavours run through in all aspects of the home from the decor to the meals, programs and German language.

We are interested in raising the number of German residents from 25% occupancy to at least 50% this year as we take part in the cultural pilot offered by the Ministry of Health. We believe that resident centered care means that residents should be placed in a home where they feel comfort in being surrounded by the customs that they identify with and are familiar with. This provides for better outcomes for all of our residents and tenants.

Heidehof has established a team of dedicated quality improvement specialists who review a variety of areas to build a focus for annual improvement strategies. This year we will endeavour to educate all of the employees on indigenous training and cultural sensitivity care so that we can make a meaningful difference to a variety of people we may have the opportunity to care for. Another area where we can make a meaningful difference is by reviewing our palliative care program and revamping it so that it is engrained into our care in all departments. Palliative Care and End of Life and different and we will strive to ensure that our program educates our staff on the differences and therefore care will be more effective. As our mission statement is "Making a Meaningful Difference", we are dedicated to live by our mission and create a home that residents and tenants feel is the best place that they could reside in.

ACCESS AND FLOW

At Heidehof, we know that the best place for a person to heal and to feel comfortable is in their home. That is why we are working with RNAO, to have a data set that provides for best practices and best outcomes for residents.
We keep our staff educated in leading practices that will keep residents out of hospital, and we work with Ontario Health to admit residents who require specialized care such as dialysis, bariatric care, specialized diets, dementia care etc.

EQUITY AND INDIGENOUS HEALTH

Heidehof is committed to ensure that everyone has access to the same quality care. It is important that even though we are a traditionally German Home, we educate our staff to a variety of different cultures so that resident and tenant experiences at Heidehof are positive, inclusive and consistent.

PATIENT/CLIENT/RESIDENT EXPERIENCE

Heidehof sends out an annual survey to residents, families, tenants of Home support services, and employees to gather information that drives our quality improvement programs. THe quality improvement team as well as each manager reviews the data collected. If there are areas for improvement, managers will reach out to the resident or family member to discuss ways to improve outcomes. The resident council reviews all the surveys and will make suggestions for improvement. The Q.I. team will also review the complaints that have been received throughout the year, any suggestions/complaints that come up during family conferences and any other concerns from staff. The main focus is our mission to "make a meaningful difference"!

PROVIDER EXPERIENCE

Heidehof strives to be a place where staff feel good about coming to work and they feel valued and celebrated. As an employer we are aware of the difficulty in recruiting and retaining employees who share our mission and vision. Therefore, we have worked hard on celebrating staff through various wellness activities, luncheons. educational opportunities and motivational speakers. We have purchased an app that staff use to give kudos to each other, and we post the results for all staff to read. Residents and families are also able to praise our staff through this app and it gives staff a real boost to see what others say about them. We are consistently aware of the culture of the home and make it a priority of focus to ensure that staff are living the mission and vision of the home and feel joy from working in this environment.

SAFETY

Heidehof is dedicated to the safety of residents and clients of home support services. Our quality improvement team, the Professional Advisory, and falls committees have safety as a standing agenda item to review. WE have emergency measures in place in case of a variety of disaster type of events occur. WE practice regular fire drills, annual evacuations and are heavily focused on good infection control practices in the facility. We want residents and clients of Heidehof to feel safe and secure in our care.

PALLIATIVE CARE

Building a strong palliative care program is on our quality improvement plan for this coming year. Heidehof is exploring ways to make this program as meaningful and as effective as possible to ensure the needs of the residents and clients in are care are assessed at the right time, have their needs met and are as comfortable and pain free as possible. We endeavor to educate staff, families as well as the resident or client regarding palliative care and the difference between palliative care and end of life care. Our program will encompass holistic measures to fulfill the needs of the whole person. We are fortunate to have a Medical Director who specializes in palliative care and we have staff who are trained in palliative care and work at hospice. We are confident that our palliative care program will be stronger as we make changes that will make a meaningful difference.

POPULATION HEALTH MANAGEMENT

Heidehof is part of the Niagara Health Team. This partnership provides opportunities for Heidehof to help the needs out in the community in relation to healthcare. We provide a model where we support clients as long as possible in our community apartments attempting to avoid emergency room visits, hospitalizations and the need for Long Term Care. We offer a continuum of care to ease the burden on the health care system.

CONTACT INFORMATION/DESIGNATED LEAD

Elena Caddis
Administrator
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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 **March 26, 2025**

Udo Schafer, Board Chair / Licensee or delegate

Elena Caddis, Administrator /Executive Director

Heather Vokey, Quality Committee Chair or delegate

liz Klassen,DOC, Other leadership as appropriate

Equity

Measure - Dimension: Equitable

Indicator #1	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of staff (executive-level, management, or all) who have completed relevant equity, diversity, inclusion, and anti-racism education	O	% / Staff	Local data collection / Most recent consecutive 12-month period	1.33	90.00	We aim to have 90 percent or more of our staff complete relevant equity,diversity,inclusion and antiracism training.	

Change Ideas

Change Idea #1 Staff will be given the list of the education that they will be required to complete before the end of the year. Posters influencing equity, diversity,inclusion and anti-racism will be posted. This topic will be on the agenda of the labour management meetings Equity,diversity,inclusion and anti-racism education will be offered through a guest speaker for staff events.

Methods	Process measures	Target for process measure	Comments
Nurse educator will tally the number of staff who have had education for the year on a quarterly basis. Nurse educator will schedule group sessions and have staff sign off on the education. Staff newsletters will include education on equity,diversity, inclusiong and anti-racism. Labour Management meetings will discuss the culture of the home in relation to diversity,inclusion, equity and anti-racism.	The statistics of the number of staff educated every quarter will show if employees are doing the education in a timely manner. The review of the culture of the home at the quarterly lablour management meetings will show if the education is successful.	By the end of December 2025, we will have 95% of the staff trained and educated on equity, diversity,inclusion and anti-racism.	Total LTCH Beds: 106

Experience

Measure - Dimension: Patient-centred

Indicator #2	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
A robust palliative care program	C	90th percentile / Palliative patients	In house data collection / January to December	CB	100.00	Our goal is to have 100% of palliative care residents have their needs met in the home.	

Change Ideas

Change Idea #1	The interdisciplinary team will review the palliative program as it stands and will list the gaps. Then gaps will be addressed with new policy and procedures. Palliative care will be on the roster of mandatory education for all nursing staff. We will send staff to attend palliative care seminars offered through hospice and other. We will revamp our palliative care room for comfort of residents and families.		
Methods	Process measures	Target for process measure	Comments
The Interdisciplinary team will meet monthly to review the palliative care program and list the gaps that need to be addressed. Team of psw's headed up by a manager will revamp the palliative care room. All staff will be educated on the new policies and procedures through lectures and through surge learning. The volunteers will quilt a blanket to drape over the body when leaving the building. The resident council will have input into the palliative care program through discussion at their monthly meetings. Resident families will be surveyed for input into the palliative care program RNAO best practice will be incorporated into the nursing practice at the home in regards to palliative care for best outcomes.	Education of staff on palliative care measures will be tracked quarterly by the nurse educator The palliative care room will look and feel comfortable for resident and family members. There will be new policy and procedures for residents in regard to palliative care with best outcomes measured by surveys.	Education of staff on palliative care measures will be 95 percent by the end of December 2025.	