

2026/27 Quality Improvement Plan (QIP)

Narrative for Health Care Organizations in Ontario



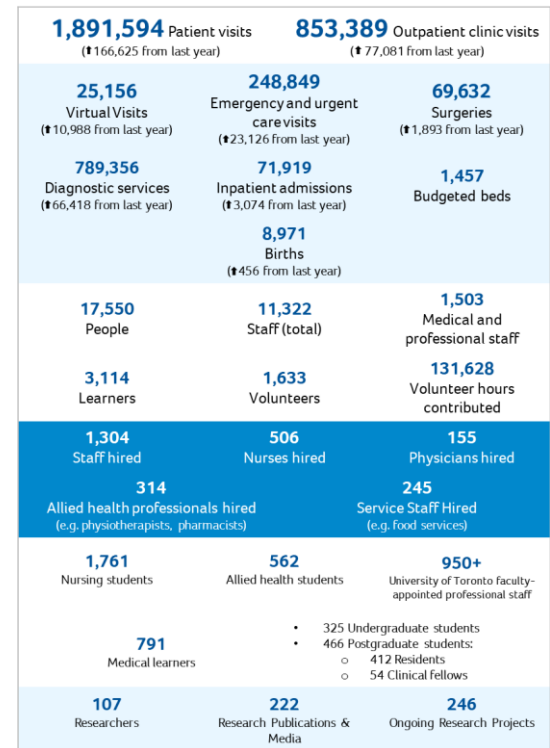
Trillium Health Partners

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.

Overview

Trillium Health Partners (THP) strives to improve care, elevate health, and strengthen the communities we serve. Grounded in the values of compassion, excellence, and courage, we deliver the highest quality care through continuous improvement, while partnering to create a more seamless health system. Serving the diverse and rapidly growing populations of Mississauga and West Etobicoke, THP continues to improve quality for better access and outcomes, preventing avoidable hospitalizations, and ensuring every person experiences care that reflects who they are, where they are, and what matters most to them. Our 2026/27 Quality Improvement Plan (QIP) reflects our continued focus on achieving care excellence across all sites through evidence-based practices, strengthened partnerships, and optimized resources that support timely, effective, and people-centred care.

Guided by our Plan to 2030, our QIP advances five interconnected quality goals for the coming years: improving population health, reducing health inequities, enhancing patient and caregiver experience, supportive and inclusive environment for Team THP, and increasing value that ensures the long-term sustainability of THP and the broader health system.



Patient/Client/Resident Engagement and Partnering

A key priority for THP is to deliver equitable, whole-person care that is personalized and strengthened by evidence, digital innovation, and continuous improvement to achieve better outcomes and experiences. In every project and decision-making process, we prioritize incorporating the perspective of patients and their families. Our Plan to 2030 incorporated input from over 70,000 patients, caregivers, families, the community, partners, and Team THP.

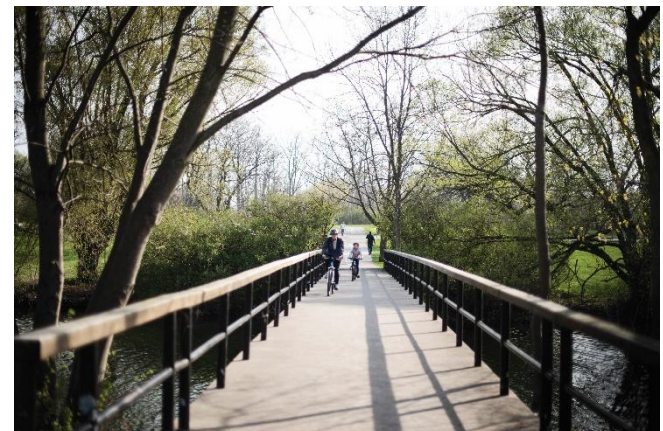
Patient and family partners (PFPs) at THP are patients, families, and caregivers who collaborate with the organization to improve care delivery and the patient experience. They provide input on strategic initiatives, clinical planning, and quality improvement through councils, committees, and focus groups. PFPs have helped inform the development of tools such as the MyChart secure patient portal and the Emergency Department Wait Time Dashboard, making care more accessible and responsive. THP is committed to supporting a diverse and representative group of PFPs and offers orientation and training to support meaningful engagement.

Through our digital experience surveys and patient relations process, patients provide valuable feedback that informs how we improve care, strengthen communication, and enhance overall experience. Drawing on this feedback, we continue to focus on the areas that matter most to patients, including improving emotional support to help reduce fears, anxieties, and worries throughout their care journey. Our real-time patient experience dashboards provide teams with the insight needed to monitor progress, respond quickly, and advance initiatives tied to our Patient Experience QIP goal. Feedback from more than 55,000 patient surveys spanning the entire platform (emergency department, inpatient, outpatient, and pediatrics) was a key input in developing our Plan to 2030 and elevating patient and caregiver experience as one of our five goals.

THP utilizes MyChart, a secure patient portal, to enable patients to access their personal health information, better inform them about their health, have more impactful conversations with care providers, and to have a more active role in tracking, updating, and engaging with their health care information. PFPs were involved in every step of the implementation at THP and continue this year to support optimizations including eCheck-in prior to an outpatient appointment, scheduling of specific appointments, patient-centred questionnaires prior to appointments, and the ability to request additional releases of health information through the portal. The ongoing involvement of PFPs in the evaluation and governance processes ensures that MyChart continues to evolve in ways that enhance patient experience and engagement.

Provider Experience

At THP, we are strengthening our people-centred culture where Team THP reflects the community, and every person feels respected, connected, and supported to deliver better care every day. We continue to modernize and integrate human resource systems to streamline scheduling, timekeeping, and workforce planning, enabling data-driven decisions that support staffing stability and provider wellbeing. We are evolving how we measure engagement and incorporate insights into culture and experience initiatives. We continue to utilize an AI-enabled engagement survey platform that provides real-time sentiment analysis and identifies key drivers of engagement, allowing us to target improvements that directly impact both staff and patient experiences.



Our health and wellbeing program remains central to supporting providers in mind, body, and spirit. Initiatives include wellbeing leadership roles, expert-led grand rounds on resilience and career fulfillment, enhanced Employee and Family Assistance Program tools, and expanded access to on-site wellness resources such as gym memberships and mental health supports. These efforts are complemented by philanthropic support for The Peter Gilgan Mississauga Hospital, which will feature a world-class wellness program for staff, professional staff, volunteers, learners, patients, and families.

To strengthen retention and professional growth, we leverage the Nursing Retention Toolkit, achieving an 11% relative reduction in turnover. The Clinical Scholar Program has supported over 2,000 nurses, while new professional practice clinical educators assist with onboarding and integration of internationally educated nurses. Our Nurse Innovator Award winning project, supported through the Registered Nurses' Foundation of Ontario Nursing Innovation Grant, introduced a mentorship digital application that connects nurses and clinical leaders, offering career goal tracking, networking, and real-time support for clinical questions to foster a culture of learning and belonging.

These initiatives reflect our commitment to prioritizing the holistic well-being of Team THP, cultivating an environment where everyone can do their best work, reflecting diversity in decision-making and opportunity, and fostering meaningful opportunities for every person to learn, grow, and contribute.

Safety

We remain committed to strengthening patient safety systems across THP. We recognize that safety is much more than the absence of harm; it requires a broader understanding that encompasses all forms of health care harm and identifies meaningful opportunities for improvement.

We believe all voices contribute to safer care, and we utilize our educational series "Safety Snippets" in a refreshed format shaped by staff feedback. These videos aim to foster a just culture and to encourage safety conversations. We actively participate in the Toronto Academic Health Science Network (TAHSN) Quality Improvement and Patient Safety Community of Practice, sharing insights and learning from others to advance safety collectively. We participate in Ontario Health's Never Event reporting process for 15 preventable patient safety incidents types that can result in harm or death. By engaging in this reporting process, we advance a culture of learning, transparency, and continuous improvement. For example, we have sustained improvements to prevent hospital-acquired pressure injuries (one of Ontario Health's Never Events). This includes embedding best-practice audits and workflows into daily operations, strengthening oversight and feedback loops, and using data-driven reviews, education, and unit-level engagement to drive consistent prevention practices and sustain outcomes across inpatient units that are better than national benchmarks.



Advancing safety also means prioritizing people safety, ensuring that our patients, families, and staff, learners and volunteers feel safe, supported, and empowered in every interaction. The People Safety team works proactively to prevent workplace illness and injury through investigating incidents involving staff and by using evidence-informed and non-stigmatizing interventions to recognize behaviors that may signal increased risk to enable teams to respond early with appropriate, compassionate, and patient-centered care. Workplace violence incidents have increased in the last few years and can have a significant impact on staff, professional staff, volunteers, learners, and security. THP has a Workplace Violence working group of interprofessional clinicians and leaders, which has goals to prevent incidents, decrease their impact, and understand the role that racism plays when these incidents occur.

Access and Flow

THP continues to advance Trillium HealthWorks, a transformational infrastructure initiative aimed at enhancing access to care and streamlining operations to meet the evolving needs of our community. This initiative includes the expansion of the future home of The Gilgan Family Queensway Health Centre, slated to open in FY 2029/30, and the construction of The Peter Gilgan Mississauga Hospital, which is slated to open in FY 2033/34. Design development for The Peter Gilgan Mississauga Hospital has progressed significantly, with high-fidelity mock-ups of critical spaces being used to allow our staff to participate in user engagement sessions that shape design refinements to enhance workflows, safety, and patient outcomes.



THP is also expanding specialized services to meet diverse patient needs. The future Shah Family Hospital for Women and Children will offer patient-centred care in modern spaces, including couplet-care neonatal intensive care units and advanced birthing suites. To prepare for this model, Women's and Children's services were integrated at the Credit Valley Hospital in October 2025. Emergency services for women and children continue to be provided at both of THP's Emergency Departments and at the Urgent Care Centre.

THP has launched a multi-year transformational project aimed at reducing hospitalizations through digitally enabled seamless and connected care. Reducing hospitalizations supports patients to receive care in the right setting and combines multiple access and flow measures within one overarching goal. Reducing our total patient days supports improvement of several key indicators of inpatient and emergency department capacity and wait times. As part of this initiative, THP will standardize foundational clinical practices, processes and pathways, as well as build digital solutions that will transform how, when and where care is delivered. We will apply Learning Health System methods to rapidly define, co-design, implement, evaluate, adapt and scale this for maximum impact to our people, patients, and community.

THP continues to experience high inpatient demand, with elevated volumes across all sites. We serve a growing population with increasingly complex acute care needs, driving a higher demand for hospital services. Alongside our community partners, we have generated increased capacity and access to care with the following initiatives. We expanded conventional bed spaces for inpatient populations through the transitioning of inpatient rehabilitation services at Credit Valley Hospital to the Trillium Health Partners–University Health Network Reactivation Care Centre (THP-UHN RCC), the integration of the Women’s and Children’s program, and the expansion of the McCall Centre for Continuing Care. This enabled THP to add 27 new acute beds, eight Level Two critical care beds at Mississauga Hospital, and 21 additional complex continuing care beds at the McCall Centre. Inpatient rehabilitation services at the Mississauga Hospital are expected to transition to the THP-UHN RCC in a later phase of work.

THP@home is a program that ensures patients receive high-quality services after their hospital stay. This past year, THP@home transitioned to a single service provider for home and community care services, setting up the ability for rapid expansion and scale of the program. In the first half of 2025/26, THP@home enrolment has accelerated to serve 943 patients, including 361 directly from the emergency department, and has created the equivalent of 32 inpatient beds by providing care to patients in their homes. Expansion of THP@home is continuing through development of new surgical pathways, implementation of digital tools for remote care monitoring, and partnerships on new programs like Enhanced Intensive Home and Community Care. We are planning future innovations, including a virtual hospital model, to help patients receive necessary care while remaining safely at home and reducing avoidable visits to the hospital.

Population Health Approach

THP continues to strengthen its commitment to population health through innovative projects and initiatives led by researchers at the Institute for Better Health (IBH) and the Reporting and Performance Analytics Department.

During FY 2025/26, we expanded the use of our novel Health System Inequity Metric (HSIM) both within our organization and across partner health systems to quantify inequities in service delivery. We partnered with other health systems to adopt HSIM and worked closely with the Mississauga Halton Central West Regional Cancer Program to apply the metric in identifying disparities and designing solutions. Our HSIM research revealed that individuals from low socioeconomic status neighborhoods were 4.5 times less likely to attend breast screening compared to those from higher socioeconomic areas (as of September 2025). Through community engagement, we gathered insights and recommendations to improve access and participation. In FY 2026/27, we will collaborate with community partners and the Mississauga Halton Central West Regional Cancer Program to implement targeted interventions aimed at increasing breast screening.

THP partnered with Mississauga Health, the Mississauga Ontario Health Team, to expand interprofessional primary care teams. Using population health data, we identified high-priority neighbourhoods based on material deprivation, access to team-based care, and chronic disease prevalence. We also worked with other Ontario Health Teams to integrate population health analytics with real-world experiences so that planning was aligned with lived realities. Building on the [Understanding Our Community – Mississauga Health](#) tool that was introduced last year, THP incorporated measures of community flourishing based on an IBH-led survey of 3,805 Peel Region residents. These insights provide a holistic view of wellbeing that encompasses social, economic, cultural, and health-related factors to support the design of interventions that address inequities and improve outcomes for both patients and communities.

Looking ahead to FY 2026/27, we plan to integrate Statistics Canada data to capture additional social risk factors, including alcohol consumption, physical activity, diet, and food insecurity, and link these to priority populations (e.g., individuals with congestive heart failure, diabetes, chronic obstructive pulmonary disease, mental health conditions, cancer, and those presenting with ambulatory care sensitive conditions). By connecting these factors to patterns in emergency visits, avoidable hospitalizations, and premature mortality, we will identify high-risk communities and systemic inequities. This evidence will guide proactive, targeted interventions and resource planning to deliver more equitable and effective care.

Palliative Care

THP is committed to delivering an “everywhere experience” for palliative care, consistent with Ontario’s Quality Standard for Palliative Care and our future model of care. This approach ensures person-centred, evidence-based practices for individuals with life-limiting conditions and at the end-of-life. We are finalizing our palliative and end-of-life framework to ensure a standardized, culturally responsive approach for patients across all settings, in line with Ontario Health’s Palliative Care Health Services Delivery Framework. We are implementing education for care providers to strengthen collaborative care planning, with an initial focus on high-impact areas such as emergency, complex continuing care, medicine, and oncology. An updated bereavement resource package was introduced in 2025 to support families and Team THP.



Patient experience survey data from palliative patients informs our improvement initiatives and feedback is reviewed regularly at team huddles, reflecting our commitment to continuous improvement and responsiveness to patient and caregiver input.

Through our partnership with Mississauga Health, we are advancing integrated care by providing care closer to home, enabling earlier engagement in the illness trajectory, and improving access to community-based supports. Onboarded in 2024, the Community Clinical Coach continues to build capacity and foster education among community partners, while alignment with Hospice Mississauga supports enhanced care delivery and infrastructure planning.

Emergency Department Return Visit Quality Program (ED RVQP)

THP participates in Ontario Health’s ED RVQP to identify, audit, and investigate underlying causes of return visits to their emergency departments and to take steps to address them. Findings from last year’s audit showed that older, medically complex adult patients with prolonged ED stays frequently returned to the ED with delirium, falls, or conditions requiring admission. In response, THP has advanced age-friendly care as an organizational priority. An ED multidisciplinary delirium-prevention working group has been established, EMR enhancements were implemented to support bedside documentation of brief Confusion Assessment Method (bCAM) scores, and discharge planner coverage hours have been expanded. These changes have improved delirium screening compliance and led to earlier allied health involvement for high-risk patients. Last year’s audit also identified an opportunity to improve wait time for physician assessment at the Credit Valley Hospital ED. In response, one ED care area was restructured into a High Acuity Intake Zone (HAIZ) and Urgent Care Area, and physician scheduling was revised to increased dedicated coverage. The evaluation of the new care model demonstrated significant reductions in wait times.

The FY 2025/26 audit identified pressures related to patients leaving without being seen by a physician and patients leaving against medical advice, with system-related capacity pressures during surge periods being a significant contributor. Physician workflows have been adjusted to provide increased coverage in HAIZ and Urgent Care, which is supporting earlier assessment and disposition. A strong home-first approach, supported by expansion of the THP@home program, is enabling direct discharge from the ED with community supports and has reduced avoidable admissions during high-demand periods. The current year audit also highlighted increased return ED visits by patients with Sickle Cell Disease, for which we are deploying targeted staff education and standardized evidence-based workflows in partnership with Ontario Health.

Equity and Indigenous Health

THP is committed to fostering an environment where equity, antiracism, inclusion, and belonging are embedded in how we deliver care. Aligned with our Plan to 2030, THP continues foundational work to support a people-centred culture where equity and inclusion are lived every day, and where communities see themselves reflected in the care they receive.

Guided by staff engagement and emerging data, the THP Circle on Equity, Antiracism, and Inclusion continues to help shape priorities, strengthen dialogue, and support culture-building efforts across the organization. This year, The Circle supported development of the Equity Response Leadership Guide to equip leaders with consistent, reflective approaches to navigate identity-based concerns. To foster connection and belonging, THP continues to develop and share an inclusion calendar, with expanded programming in 2025 that offered opportunities for education, learning, and reflection.

Several priority areas continue to be advanced:

- Developing a phased approach for voluntary identity-based data collection to strengthen representation, recruitment, and retention insights.
- Reviewing key workplace policies using recommendations from an external human-rights review to inform clearer expectations and practices.
- Designing a multi-year learning plan to build leader capability and support application of equity and inclusion principles in daily practice.



In 2025, THP published a formal, public commitment to Indigenous truth, reconciliation and health equity. The [commitment statement](#) is anchored to the Truth and Reconciliation Commission's *94 Calls to Action* that grounds our work in accountability, humility and nurturing respectful, reciprocal relationships with Indigenous communities and outlines specific actions to co-create and deliver health services that honour what Indigenous communities want for their health and wellbeing. Our commitments have been developed through extensive, values-based engagement with First Nations, Indigenous community organizations, and Indigenous leaders (including Indigenous colleagues at THP), who emphasized the importance of a clear, organization-wide mandate to advance Indigenous health, with sustained commitments to truth and reconciliation.

Aligned with THP's commitments and feedback from Indigenous partners, we are advancing several health equity initiatives:

- Developing a traditional ceremonies policy with embedded cultural safety training, operational guidance, and evaluation.
- Refreshing our Land Acknowledgement Process and Protocol guide with complementary education.
- Implementing an organizational flag raising policy that outlines guidance for raising and lowering the Indigenous Survivors' Flag annually.
- Incorporating learning on Indigenous identities, histories, and cultural safety into a multi-year intersectional learning plan for all staff.
- Creating an Indigenous Health Equity Plan with engagement from our Indigenous partners.

Additionally, the Mississauga Halton Central West Regional Cancer Program is advancing a distinct Indigenous health portfolio. A Regional Indigenous Cancer Plan, and associated work plan, have been implemented with key goals aligned to the health needs of First Nations, Inuit, and Metis communities.

Executive Compensation

All executives and leaders at THP have a portion of their Performance Based Pay tied to the quality indicators outlined in the QIP. With oversight from the Board of Directors, the leadership team is held accountable for the overall performance of the organization through quarterly reviews of these priority targets, along with formal annual performance reviews.

Sign-off

I have reviewed and approved our organization's 2026-2027 Quality Improvement Plan:



Karli Farrow
Chief Executive Officer



Dr. Sam Sabbah
Chief of Staff



Terri Irwin
Chief Nursing Executive









Joan Mohammed
Board Chair



Jennifer Lee
Board Quality Committee Chair

Fiscal Year (FY) 2026/27 Acute Care Quality Improvement Plan

Goal		FY 2026/27 QIP Indicator	QIP Indicator Target	QIP Indicator Target Justification
We will improve population health by reducing avoidable hospital days and optimizing length of stay		Reducing Hospitalizations (Measured in Patient Days)	≤ 531,874 days	New target measured as patient days to provide a comprehensive view of hospital demand and system performance.
We will improve the experience of patients and families who trust us with their care		Patient Experience: Rate Your Experience 0-10	≥ 9.0 out of 10	Maintain previous target, which represents an improvement based on current performance and trending
We will engage our staff to provide the training, tools and resources to deliver the highest quality of care with exceptional experiences		People Engagement: Opinion Survey	≥ 77% Grand Driver Average	Improvement target from prior year performance, in alignment with our commitment to an engaged and people-centred workplace
We will maintain our sustainability through efficient care practices resulting in a balanced budget		Hospital Total Margin (GAAP)	≥ -4.0% (-\$71M)	Maintain stability to support sustainable operations through balanced financial performance
We will continue to improve the safety of care we provide by focusing on a core clinical practice: pressure injuries		Hospital Acquired Pressure Injuries Incidence Rate	≤ 4.22%	Improvement target that is aligned with current performance trends and better than national benchmark
We will focus on the safety of our staff through continued engagement and awareness of a healthy and respectful workplace		Number of Workplace Violence (WPV) Incidents resulting in lost-time or health care due to injury	≤ 96 incidents	Maintain previous target