

Experience

Measure - Dimension: Patient-centred

Indicator #1	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Resident experience: Overall satisfaction -Communication	C	% / LTC home residents	In-house survey / 2025	75.00	85.00	Extendicare Baseline	

Change Ideas

Change Idea #1 Implement new bulletin from the leadership team to inform residents on a regular basis when changes are happening in the home

Methods	Process measures	Target for process measure	Comments
1. Send out bulletin on a regular basis to inform residents about important information 2. Post bulletin on information board in home	# of bulletins distributed to residents # of bulletins posted on information board	1. bulletins will be distributed to residents as of April 2026 2. bulletins will be posted on information board by April 2026	

Change Idea #2 Social sit-down program with residents and leadership team to inform and engage

Methods	Process measures	Target for process measure	Comments
1. add sit-down to activity calendar quarterly 2. add reminder in newsletter and bulletin	# of times program was held # of residents and team members who participated	Program will be implemented as of April 2026	

Measure - Dimension: Patient-centred

Indicator #2	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Resident experience: Overall satisfaction- Spiritual & Religious	C	% / LTC home residents	In-house survey / 2025	75.00	85.00	Extendicare Benchmark	

Change Ideas**Change Idea #1** Create new spiritual programs and activities on the monthly calendar

Methods	Process measures	Target for process measure	Comments
1. review existing offerings 2. add new offerings from current resources available i.e Bible BINGO	# of new offerings on the activity calendar # of spiritual and religious offerings per month	New offerings will be added to the calendar as of February 2026	

Change Idea #2 Complete feedback forms with the participants after each spiritual and religious program

Methods	Process measures	Target for process measure	Comments
1. Create feedback form 2. complete feedback form with the participants after each new spiritual program/activity	# of feedback forms completed	Feedback form will be created and implemented by February 2026	

Measure - Dimension: Patient-centred

Indicator #3	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Resident experience: Overall satisfaction -Care Conference	C	% / LTC home residents	In-house survey / 2025	75.00	85.00	Extendicare Benchmark	

Change Ideas

Change Idea #1 Encourage residents to attend their annual care conference

Methods	Process measures	Target for process measure	Comments
1. provide resident with a physical invitation to their care conference 2. Remind resident the morning of their care conference	# of care conferences where residents attended # of physical invitations distributed # of care conferences where residents were reminded	1. Residents will receive physical invitations by April 2026 2. There will be improvement in this indicator by Dec 2026	

Change Idea #2 Review annual care conference process

Methods	Process measures	Target for process measure	Comments
1. Complete a review of current process 2. adjust process to ensure care conferences are interdisciplinary 3. create feedback form to be completed post care conference	# of reviews completed # of care conference that are interdisciplinary # of feedback forms completed post care conference	1. review of care conference process and changes to implement by April 2026 2. Feedback form created and implemented by April 2026	

Safety

Measure - Dimension: Safe

Indicator #4	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of LTC home residents who fell in the 30 days leading up to their assessment	O	% / LTC home residents	CIHI CCRS / July 1 to September 30, 2025 (Q2), as target quarter of rolling 4-quarter average	14.78	14.00	Improve current performance	

Change Ideas

Change Idea #1 Enhance lighting at bedside and in bathroom for residents who fall in the evening/night

Methods	Process measures	Target for process measure	Comments
1. Fall lead/team to review/analyze falls data for residents who would benefit from enhanced lighting at bedside/bathroom 2. Order and install lighting 3. Monitor pre and post data for improvement	1. # of residents identified as benefiting from enhanced lighting 2. # of lights installed at bedside, and in bathroom	1. Residents will be reviewed for enhanced lighting by March 2026 2. Environmental assessments of each of the identified resident rooms will be completed by April 2026 3. Review of fall data pre and post light installation will be completed by July 2026	

Measure - Dimension: Safe

Indicator #5	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of LTC residents without psychosis who were given antipsychotic medication in the 7 days preceding their resident assessment	O	% / LTC home residents	CIHI CCRS / July 1 to September 30, 2025 (Q2), as target quarter of rolling 4-quarter average	5.88	5.00	Improve current performance	

Change Ideas

Change Idea #1 Provide GPA education to front-line staff

Methods	Process measures	Target for process measure	Comments
1. Coordinate education with PRC 2. schedule GPA training sessions	# of GPA training sessions held for front line staff	GPA training sessions will be completed by Dec 2026	

Measure - Dimension: Safe

Indicator #6	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of long-term care residents whose stage 2 to 4 pressure ulcer worsened	O	% / LTC home residents	CIHI CCRS / July 1 to September 30, 2025 (Q2), as reporting quarter for the rolling 4-quarter average	0.92	0.90	Improve current performance	

Change Ideas

Change Idea #1 Review team membership to ensure interdisciplinary, and that team ensures that all wounds and skin issues in previous quarter are reviewed during the meetings.

Methods	Process measures	Target for process measure	Comments
1. Review current membership of Skin & Wound team 2. Recruit new members and ensure each discipline is represented 3. Standardize agenda and follow up by team on skin issues in the home	1. # of reviews completed on current membership 2. # of new members recruited by discipline 3. Standardized agenda developed which includes review of # of pressure ulcers by stage on each unit on a monthly basis	1. Membership review of skin & wound committee will be completed by April 2026 2. Recruitment of new members will be completed by April 2026 3. Standardized agenda will be developed and in place by April 2026	

Change Idea #2 Wound Care Lead to complete SWAN program

Methods	Process measures	Target for process measure	Comments
Register Wound Care Lead for SWAN program	Completion of SWAN program with certification	Wound Care Lead will be SWAN certified by Dec 31, 2026	