

Access and Flow | Efficient | Optional Indicator

	Last Year		This Year		
Indicator #4	16.83	15	26.11	-55.14%	21
Rate of ED visits for modified list of ambulatory care–sensitive conditions* per 100 long-term care residents. (AgeCare Glen Oaks)	Performance (2025/26)	Target (2025/26)	Performance (2026/27)	Percentage Improvement (2026/27)	Target (2026/27)

Change Idea #1 Implemented Not Implemented In Progress

Continue with efforts to recruit a Nurse Practitioner. Have in-house registered staff trained on initiating IV Therapy.

Process measure

- % of residents who receive in-house IV antibiotic therapy in-house, and % Registered Nurses trained on initiating IV Therapy.

Target for process measure

- 90% of residents who receive in-house IV antibiotic therapy will be treated in-house.

Lessons Learned

The home was not successful in recruiting a Nurse Practitioner in 2025. With the support of Local Priority Funding, the home purchased the equipment required to provide IV therapy services, and two Registered Nurses were trained to deliver this care. Further progress on this initiative is currently on hold pending the rollout of a corporate program.

Change Idea #2 Implemented Not Implemented In Progress

Continued use of environmental modifications, regular assessments and education of all staff on falls prevention measures.

Process measure

- Decrease ED visits related to falls injuries.

Target for process measure

- To continue to see decrease in ED visits for falls related injuries.

Lessons Learned

With a stronger focus on preventative measures, 2025 saw a noticeable decline in emergency department visits related to falls.

Comment

Through the support of Local Priorities and Equipment & Training funding, the home successfully acquired new blood pressure and vital signs monitoring equipment. we continue to strengthen staff knowledge and capacity in clinical assessment skills, ensuring high-quality care delivery. Ongoing education is also provided to families, helping them better understand the treatment modalities available within the home and supporting informed decision-making regarding their loved ones' care.

Experience | Patient-centred | Custom Indicator

	Last Year		This Year		
Indicator #1	42.00	44	63.00	--	NA
I like the food here (AgeCare Glen Oaks)	Performance (2025/26)	Target (2025/26)	Performance (2026/27)	Percentage Improvement (2026/27)	Target (2026/27)

Change Idea #1 Implemented Not Implemented In Progress

Utilizing food molds and improved plate presentation for our residents on puree texture diets

Process measure

- Increase in food satisfaction at mealtime from residents receiving puree texture.

Target for process measure

- To see increase in food satisfaction scores

Lessons Learned

The home continues to experiment with food molds to improve the visual presentation of pureed textures. However, challenges remain, as the molded food does not consistently retain its shape during mealtime. The home will continue refining preparation techniques to improve consistency and presentation.

Change Idea #2 Implemented Not Implemented In Progress

Resident Council and Food Council feedback to drive menu changes, snacks and diners club options.

Process measure

- Meal audits and resident feedback will also help us to know we are moving in the right direction.

Target for process measure

- Positive feedback on over 80% of meal audits.

Lessons Learned

The home continues to implement suggestions brought forward from our resident and food councils in our menu planning. Increases in the variety of food options for breakfast club and summer BBQ's helped increase our overall food satisfaction scores. The home continues to increase its menu of multicultural food options.

Change Idea #3 Implemented Not Implemented In Progress

Have herbs/spices available in the dining rooms.

Process measure

- No process measure entered

Target for process measure

- No target entered

Lessons Learned

A selection of herbs/spices is on display in the dining rooms and available for residents to add personalized flavor to their meals

Comment

2025 Surveys changed the question from "I like to food here" to "I enjoy the taste of most of the food served to me" The Home has a very diverse population, which makes pleasing all residents a challenge. The home also has a large population of residents on alternate textured diets. Changes implemented in 2025 continue to drive results in the right direction. Our Dietary and Programs teams with resident feedback from audits and Resident and Food Council meetings continue to work together to ensure meal satisfaction remains a top priority.

Safety | Safe | Optional Indicator

	Last Year		This Year		
Indicator #2	11.40	10.90	12.82	-12.46%	NA
Percentage of LTC home residents who fell in the 30 days leading up to their assessment (AgeCare Glen Oaks)	Performance (2025/26)	Target (2025/26)	Performance (2026/27)	Percentage Improvement (2026/27)	Target (2026/27)

Change Idea #1 Implemented Not Implemented In Progress

Relaunch of our Restorative Program which includes our restorative lead and aides having received comprehensive training in restorative care practices.

Process measure

- Number of resident referrals into Restorative Program

Target for process measure

- Increase in the number of residents being referred for restorative care to at least 4% of population.

Lessons Learned

As part of our relaunch the home added a second Full Time Restorative Aide to our team. As well, over 20 PSW's were trained for restorative care which allows us to increase the number of residents in our program. The home continues to work with staff to be less "task" focused and more "restorative focus" when providing care.

Change Idea #2 Implemented Not Implemented In Progress

Continuing to enhance our falls program utilizing preventative measures.

Process measure

- Number of falls tracked and analyzed for fall prevention measures.

Target for process measure

- All residents deemed to be a high falls risk will have preventative measures in place

Lessons Learned

The home continues to prioritize prevention. Information gained through post fall huddles help us determine the root cause so that preventative measures can be implemented.

Comment

Utilizing a falling star logo helps to ensure our caregivers are more aware of residents who are a high risk for falls. Our post fall huddles help to determine the root cause of falls so that the right preventative measures can be put into place. Ensuring that residents in the restorative program are on the correct care teams with a staff member who had restorative training will help establish ongoing restorative care.

Indicator #3	Last Year		This Year		
	Percentage of LTC residents without psychosis who were given antipsychotic medication in the 7 days preceding their resident assessment (AgeCare Glen Oaks)	20.93 Performance (2025/26)	18.90 Target (2025/26)	22.90 Performance (2026/27)	-9.41% Percentage Improvement (2026/27)

Change Idea #1 Implemented Not Implemented In Progress

Work with physicians and interdisciplinary team to ensure newly admitted residents on antipsychotic medications have a diagnosis.

Process measure

- % of newly admitted residents that are reviewed.

Target for process measure

- 100% of newly admitted residents will be reviewed for appropriate antipsychotic use.

Lessons Learned

The homes transition to LTCF in the last quarter of 2025, high resident turnover, and inconsistent RAI coverage were all challenges faced by the home.

Comment

Our physicians remain supportive of the home's goals regarding the appropriate use of antipsychotic medications. In 2026, the home hired a second full-time RAI Coordinator to strengthen audit processes and enhance education for our PSWs, particularly in the accurate coding of hallucinations and delirium.