

Access and Flow | Efficient | Optional Indicator

Indicator #2	Last Year		This Year		
	Rate of ED visits for modified list of ambulatory care–sensitive conditions* per 100 long-term care residents. (AgeCare Pine Grove)	38.84 Performance (2025/26)	35 Target (2025/26)	50.38 Performance (2026/27)	-29.71% Percentage Improvement (2026/27)

Change Idea #1 Implemented Not Implemented In Progress

Increase ability to treat residents in-house with IV therapy.

Process measure

- # of registered staff who are trained to support IV initiation.

Target for process measure

- Have at least 2 staff receive IV start training in 2025.

Lessons Learned

We have supported two of our Registered Nurses (RNs) to complete training in IV therapy. In addition, we conducted two in-house education sessions focused on IV maintenance to strengthen team knowledge and competency.

A current challenge is the low number of residents requiring IV therapy in the home, which limits opportunities for our RNs to regularly practice and maintain hands-on proficiency in this skill.

Change Idea #2 Implemented Not Implemented In Progress

Increase clinical knowledge and skills of registered staff to support clinically complex residents.

Process measure

- % of registered staff that participate in education to support their clinical knowledge and skills.

Target for process measure

- 75% of registered staff will participate in some education that supports their clinical knowledge and skills in 2025.

Lessons Learned

Clinical education was completed at the corporate level, where an education session was hosted. Both Registered Nurses (RNs) and Registered Practical Nurses (RPNs) attended.

In addition, ongoing in-home education is provided throughout the year on topics such as catheter care, diabetes management, and recognizing the signs and symptoms of infection.

We have also implemented the Skin and Wound App to support documentation and monitoring.

Comment

Enroll front line staff in skin and wound education to expand their knowledge and skills. Palliative education will be provided to front line staff to help reduce our ED visits and expand our clinical knowledge.

Equity | Equitable | Optional Indicator

	Last Year		This Year		
Indicator #1	87.39	100	100.00	14.43%	NA
Percentage of staff (executive-level, management, or all) who have completed relevant equity, diversity, inclusion, and anti-racism education (AgeCare Pine Grove)	Performance (2025/26)	Target (2025/26)	Performance (2026/27)	Percentage Improvement (2026/27)	Target (2026/27)

Change Idea #1 Implemented Not Implemented In Progress

To enhance cultural inclusivity within the home by incorporating a broader range of cultural diversity events and recognitions throughout the year.

Process measure

- Develop a year-round cultural diversity calendar that includes key holidays, heritage months, and days of significance. This will be measured by the number of events that were identified and recognized through celebrations.

Target for process measure

- Our goal is to ensure that we have implemented in recognizing and celebrating at least 3 new events.

Lessons Learned

As our home changes with diverse cultures both with the staff and resident we are expanding our knowledge in understanding and celebrating the various cultures through cultural celebrations, events, and educational initiatives. To formulate a calendar that recognizes the cultural celebrations.

Change Idea #2 Implemented Not Implemented In Progress

Staff training on equity, diversity, inclusion and anti-racism education.

Process measure

- % of staff trained.

Target for process measure

- 100% of staff will be trained.

Lessons Learned

During our leadership huddles (Team Up meetings), we share information on diversity and inclusion, providing staff with education, discussion opportunities, and engaging cultural highlights to increase awareness and understanding of different cultures.

Comment

Will continue to increase awareness among staff, residents and families through continuous education and events.

Experience | Patient-centred | Custom Indicator

	Last Year		This Year		
Indicator #3	46.00	55	70.00	--	NA
Resident satisfaction in Dining Services (AgeCare Pine Grove)	Performance (2025/26)	Target (2025/26)	Performance (2026/27)	Percentage Improvement (2026/27)	Target (2026/27)

Change Idea #1 Implemented Not Implemented In Progress

Enhance the pleasurable dining experience.

Process measure

- New radios will be purchased and available in each dining room. Increased leadership presence in the dining rooms to mentor RPNs.

Target for process measure

- Radios to be purchased and installed for use in Q1. Leadership team to be present for at least one meal a day when working.

Lessons Learned

Created and creating a more engaging, inclusive, and resident-centered food service program. As part of this initiative, we have and will introduce more interactive food shows and themed dining events to increase resident engagement and enjoyment. New culturally diverse menu options will be incorporated throughout the year to better reflect the backgrounds of our residents likes. Successes: were strengthen collaboration with our Family Council by inviting members to actively participate in Food Sub-Committee meetings, menu planning discussions, and tasting sessions. This partnership will support continuous feedback, improve menu satisfaction, and ensure transparency in our dining services.

Change Idea #2 Implemented Not Implemented In Progress

Pleasurable dining and plating with pride education for all front-line team members.

Process measure

- % of staff who receive training.

Target for process measure

- 80% of staff will receive the training by the end of the calendar year.

Lessons Learned

The Food and Nutrition Manager works closely with the cooks and dietary aides to ensure that meals are plated in an appealing and tasteful manner. Regular audits are conducted by the leadership team and will continue to support consistency, quality, and ongoing improvement in meal presentation.

Comment

The home has implemented in-house dining surveys to gather resident and family feedback on the overall dining experience, supporting continuous quality improvement.