

Experience | Patient-centred | Custom Indicator

	Last Year		This Year		
Indicator #9	49.10	85	63.30	--	NA
Resident Satisfaction: Communication (Extendicare St. Catharines)	Performance (2024/25)	Target (2024/25)	Performance (2025/26)	Percentage Improvement (2025/26)	Target (2025/26)

Change Idea #1 Implemented Not Implemented

Increase opportunities to obtain feedback and improve overall communication with residents by the home's Leadership Team.

Process measure

- 1) # of meetings attended by Leadership with Resident Council per year to share/obtain feedback.

Target for process measure

- 1) Improved communication with residents by the Leadership Team, July 2024.

Lessons Learned

Success. Attended six (6) Resident Council meetings to share/obtain feedback from residents.

Comment

This was a successful strategy, but we still need to improve. Will continue to meet with residents through variety of ways to provide and or obtain feedback.

Indicator #3	Last Year		This Year		
	Performance (2024/25)	Target (2024/25)	Performance (2025/26)	Percentage Improvement (2025/26)	Target (2025/26)
Family Satisfaction I have an opportunity to provide input on food and beverage options. (Extendicare St. Catharines)	64.30	85	NA	--	NA

Change Idea #1 Implemented Not Implemented

To provide opportunities for additional input into seasonal menus by obtaining feedback from Family Council.

Process measure

- 1) # of family council meetings attended 2) # of recommendations received 3) # of recommendations implemented

Target for process measure

- Opportunities for family council to provide input into seasonal menus will be completed by October 2024.

Lessons Learned

Success: Attended three (3) family council meetings. Obtained recommendations for improvement. Purchased new kettles for kitchenettes, we now offer decaf coffee for residents at night.

Comment

This question was not on our survey in 2024 so unable to compare results. However, we did implement several improvements which families were happy with.

Indicator #5	Last Year		This Year		
	Family Satisfaction Satisfied with timing & schedule Spiritual Care Services. (Extendicare St. Catharines)	66.70 Performance (2024/25)	85 Target (2024/25)	68.40 Performance (2025/26)	-- Percentage Improvement (2025/26)

Change Idea #1 Implemented Not Implemented

To provide opportunities for input & share action plan regarding timing & schedule of Spiritual Care Services at Family Council Meeting.

Process measure

- 1) # of suggestions provided by family. 2) # of recommendations received. 3) # of recommendations implemented.

Target for process measure

- 1) Increase # of new Spiritual Care Services that provide a variety of different times on the monthly Program Calendar by April 2024.

Lessons Learned

Success: We implemented seven (7) new spiritual programs in the afternoons. Residents are enjoying the variety. I.e... Chicken soup stories for the soul.

Challenges: Very small groups of residents attending programs that were implemented. (related to timing of programs)

Comment

We saw an improvement, but we Will continue to review the current program structure.

Indicator #8	Last Year		This Year		
	Performance (2024/25)	Target (2024/25)	Performance (2025/26)	Percentage Improvement (2025/26)	Target (2025/26)
Resident Satisfaction Quality of Dining (Extendicare St. Catharines)	63.20	85	61.40	--	NA

Change Idea #1 Implemented Not Implemented

Improve overall dining services by re-establishing the Pleasurable Dining Program for residents.

Process measure

- 1) Ongoing feedback from Resident Food Committee Meetings. 2) On-going dining audits completed by managers. 3) Dietary Manager to complete daily rounds at meals. Obtain resident feedback.

Target for process measure

- 1) Improved meal, beverage & dining services for residents, by June 2024. 2)# of dining audits completed with significant improvements noted.

Lessons Learned

Success: Receive on-going feedback regarding pleasurable dining. On-going audits completed to identify trends. Food Committee Meetings held regularly to obtain feedback.

Challenges: Reduction in Dietary hours, this year which impacted on service.

Comment

We will continue to focus on Pleasurable Dining for the upcoming year.

	Last Year		This Year		
Indicator #10	82.43	85	66.10	--	NA
Resident Satisfaction: Would you recommend the home. (Extendicare St. Catharines)	Performance (2024/25)	Target (2024/25)	Performance (2025/26)	Percentage Improvement (2025/26)	Target (2025/26)

Change Idea #1 Implemented Not Implemented

1) Provide opportunities for residents & leadership team to meet together.

Process measure

- 1) # of coffee socials attended per year by Leadership team. 2) Leadership daily walk arounds & open door policy.

Target for process measure

- 1) 100 % socials attended by Leadership Team and daily walk arounds fully implemented by December 2024.

Lessons Learned

Success. Attended three (3) coffee socials past year by Leadership to provide and or obtain feedback. Leadership continues to do daily walk arounds & open door policy for residents to share feedback.

Comment

Residents met with CEO & VP to discuss ground breaking event with new build. November 18/2024. Residents were able to provide feedback and obtain information. Further opportunities to socialize with leadership will continue in 2025.

Indicator #4	Last Year		This Year		
	Family Satisfaction	94.10	95	87.50	--
Would you recommend the home (Extendicare St. Catharines)	Performance (2024/25)	Target (2024/25)	Performance (2025/26)	Percentage Improvement (2025/26)	Target (2025/26)

Change Idea #1 Implemented Not Implemented

Create different forums of opportunities to obtain feedback and provide home updates with families.

Process measure

- 1) # of suggestions provided by family. 2) # of recommendations implemented by family.

Target for process measure

- 1) # of Family Council Meetings, Leadership attended, December 2024 2) # of Town Hall meetings held with Families, December 2024

Lessons Learned

Success: Held several family council meetings where feedback was obtained.

Challenges: Very small family council. We continue to recruit for new members.

Comment

Continue to recruit for new family members to be involved.

Safety | Safe | Custom Indicator

	Last Year		This Year		
Indicator #2	1.60	1.50	0.80	--	NA
% of residents with restraints (Extendicare St. Catharines)	Performance (2024/25)	Target (2024/25)	Performance (2025/26)	Percentage Improvement (2025/26)	Target (2025/26)

Change Idea #1 Implemented Not Implemented

Review current restraints and determine plan for trialing alternatives to restraints.

Process measure

- # of resident reviewed monthly # of meetings held with families/residents to discuss alternates

Target for process measure

- 100% of restraints will be reviewed and plans implemented for trialing alternatives by Sept. 2024

Lessons Learned

Success. Able to exceed target for this year. Discussed with family and at family council meetings which helped to provide increased information about restraints.

Comment

We successfully exceeded our target for this indicator. Processes will continue .

Indicator #1	Last Year		This Year		
	% of LTC residents with worsened ulcers stages 2-4 (Extendicare St. Catharines)	2.40 Performance (2024/25)	2 Target (2024/25)	0.80 Performance (2025/26)	-- Percentage Improvement (2025/26)

Change Idea #1 Implemented Not Implemented

Review current bed systems/surfaces for residents with PURS score 3 or greater. 2) Improve Registered staff knowledge on identification.

Process measure

- # of resident with PURS score 3 or greater. # of reviews completed of bed surfaces/mattresses monthly. # of bed surfaces/mattresses replaced monthly.

Target for process measure

- # of reviews current bed systems/surfaces for residents with PURS score 3 or greater will be completed by August 2024.

Lessons Learned

Review of bed systems was a successful strategy. We were able to exceed the target for this year.

Comment

Improvement seen in this indicator and we successfully exceeded our target.

Safety | Safe | Optional Indicator

	Last Year		This Year		
Indicator #6	21.95	15	17.79	18.95%	15
Percentage of LTC home residents who fell in the 30 days leading up to their assessment (Extendicare St. Catharines)	Performance (2024/25)	Target (2024/25)	Performance (2025/26)	Percentage Improvement (2025/26)	Target (2025/26)

Change Idea #1 Implemented Not Implemented

Implement specific activity program at afternoon change of shift for residents who are high risk for falls.

Process measure

- # of resident reviewed for activity needs/preferences weekly. # of activity programs that occur during change of shift in afternoon weekly.

Target for process measure

- Specific activity program at afternoon change of shift will be implemented by June 2024. # of programs added at afternoon shift.

Lessons Learned

Challenges: Not very successful, implemented change idea however did not decrease # of falls. will continue to review.

Comment

We did see improvement overall in this indicator. Will continue to determine root causes for falls and implement change ideas to further improve to meet target.

Indicator #7	Last Year		This Year		
	Performance (2024/25)	Target (2024/25)	Performance (2025/26)	Percentage Improvement (2025/26)	Target (2025/26)
Percentage of LTC residents without psychosis who were given antipsychotic medication in the 7 days preceding their resident assessment (Extendicare St. Catharines)	13.55	13	13.84	-2.14%	13

Change Idea #1 Implemented Not Implemented

Medication reviews completed for all residents currently prescribed antipsychotics.

Process measure

- 1) #of residents reviewed monthly. 2) # of plans of care reviewed the have supporting diagnosis. 3) # of reduction strategies implemented monthly. 4) # of families provided with best practice information.

Target for process measure

- 1) All residents currently prescribed antipsychotics will have a medication review completed by July 2024. # of med reviews.

Lessons Learned

Success: Monthly review of all residents was successful and will continue. Able to exceed corporate target.

Comment

Able to exceed corporate target,