

2025/2026 Woodlands of Sunset Continuous Quality Improvement Initiative Report

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Overview

Woodlands of Sunset is one of seven long-term care homes owned and operated by the Regional Municipality of Niagara. Located in the Welland community, it has 121 beds.

Woodlands of Sunset is recognized as a best practice spotlight long-term care home and has received exemplary standing accreditation from Accreditation Canada.

We collaborate with various stakeholders, including team members, volunteers, students, physicians, and the Public Health and Social Services Committee, to ensure that resident care and services are consistently monitored, analyzed, and evaluated. Our approach aligns with resident preferences, best practices, leading standards, and the requirements of the Fixing Long-Term Care Act 2021 (FLTCA), Ontario Regulation 246/22, When opportunities for improvement arise, we collaborate to develop, implement, and evaluate initiatives that enhance care.

Our Mission

Working together, we provide the highest quality of life for Seniors living in long-term care and in the community.

Our Vision

Exemplary care, Compassionate team, and Community Leader.

Our Values

Respect

Serve

Choice

Honesty

Partnership



Our Approach to Continuous Quality Improvement

Niagara Region long-term care homes have a comprehensive quality program that guides our long-term care homes through continuous quality improvement activities.

The Seniors Services Operational plan includes improvement efforts and initiatives across the homes to optimize standardization and decrease variability. We identify the priority areas through in-home committees, audits, reports, resident and family feedback, legislative requirements, and guiding principles.

Our home will monitor progress on strategic priorities to align it with our residents' needs by focusing on providing the best quality and embracing our continuous quality improvement philosophy. Prioritizing improvement opportunities is a crucial step in translating data into actionable insights.

How We Identify Home's Priority Areas

Woodlands of Sunset is committed to fostering a collaborative and inclusive environment where the voices of our residents and their families are integral in shaping the care we provide.

Woodlands of Sunset actively engages members of the Resident and Families in quarterly Professional Advisory and Continuous Quality Improvement (PAC-CQI) Committee meetings. The insights and experiences of Resident Council, Family Meetings and the Quality Committee are invaluable in identifying areas for growth and implementing meaningful, actionable plans that are included for the next fiscal year based on the recommendations of the homes and their quality committees.

During these meetings, the management team updates our quality and safety programs, sharing any activities that need discussion and input. We review various topics, including program performance, feedback from residents and families, essential incidents, complaints, infection control, and other key focus areas. This collaborative approach ensures that we consistently work towards enhancing the quality of care we provide.

Policies, Procedures and Protocols

Each year, Woodlands develops Quality Improvement Plans aligned with provincial system priorities. The plan for 2025-2026 emphasizes Health Quality Ontario's systemic challenges: Access and Flow, Equity, Safety, and Experience. These priorities align with our organization's goal of enhancing care and improving service quality. The objectives and suggested changes from this plan will often continue as multi-year initiatives, while Woodlands works to sustain advancements in effective care, service delivery, and resident experience.

Our team will follow the PDSA cycle (Plan, Do, Study, Act). It's a simple tool for testing and enhancing ideas or processes. Start by planning a small change, then implement it on a limited scale. Analyze the results to see what happened and act on what you learned—either by adopting the change, adjusting it, or trying something new. It's a continuous cycle of improvement.



Identify/Diagnose the Problem

All identified problems that need attention are analyzed using the root cause framework.

- The Woodlands of Sunset will document the problem and identify opportunities for improvement.
- The Woodlands of Sunset will gather data to understand the problem better.
- Woodlands of Sunset will review the problem statement and team composition needs.
- Woodlands of Sunset will analyze the problem and data available using QI methodologies to identify opportunities for improvement.

Create a Plan

- Once teams understand the underlying causes and align any resident's needs, they would define an action plan in collaboration with residents and families.
- The team will explore and evaluate those opportunities.
- Woodlands of Sunset will identify how they plan to achieve desired results and document them under the PCC insights, Resident and Family Survey Action Plan, and other Project planning tools available.
- The plan should include (1) where we are, (2) where we want to be, (3) how we will do it and identify the team that will support the improvement activity.
- The team will determine if training is needed and include it as a task.

Set Improvement Aims

The aims set out in our plan are developed using an interdisciplinary approach and feedback from family and residents. Data supporting the objective will be collected and used for analysis and benchmarking. Examples of data include scorecards, dashboards, and other facility reports such as employee and resident satisfaction results. Reports available from outside resources, including but not limited to Health Quality Ontario, CIHI, Nquire, and RNAO, are used to set clear paths for improvement. We use the SMART framework (Specific, Measurable, Attainable, Relevant, and Time-Bound) to set goals that will align with the desired improvement target and will help to focus on continuous improvement.

Set and Test Improvement Ideas

Our quality improvement plan relies on teamwork among all staff to analyze problems and propose and implement resolutions. Ideas or interventions are established and monitored for the duration of the plan. The analysis identifies the effectiveness of the improvement activity and if any other approach should be considered.

The improvement indicator or activity progress is documented in the Point Click Care (PCC) Insights, Project planner, and Resident and Family Survey Action Plan, and meeting minutes are recorded immediately after each quality meeting.

Implement, Spread and Sustain

Implementation plans are reviewed and evaluated routinely and as often as needed. The interventions are tested and assessed to ensure that any practice changes are appropriately



embedded into our workflow and that staff are aware of the changes. At the end of the testing period, the team will evaluate whether the interventions or changes resulted in improvement. The team will present any opportunities that could result in standardized practices across our long-term care homes to the quality steering committee. The Quality Steering Committee will discuss sustainability and consistency approaches and support the long-term care homes with the resources needed to implement any adaptations.

How We Monitor Improvement and Identify Outcomes

Woodlands champions quality initiatives by leveraging our Continuous Quality Improvement Advisors' support that guides project planning, measurement strategies and accountability. Our quality and risk management program processes include monitoring and evaluating.

- Performance indicators at the home and program level
- Priority indicators outlined in the annual quality improvement plans.
- Professional and CQI committee
- Core programs meetings.
- Municipal benchmarking and Resident and Family Experience survey results
- System-wide indicators

An Interdisciplinary team reviews metrics on PCC and other sources, and monitors progress in line with the core programs by proactively reviewing real-time data and progress across indicators. This allows the team to communicate effectively and adjust strategies to align with any issues identified.

Outcomes

Outcomes are conveyed through a range of resident and family council committees and PAC and quality committees within the divisional frameworks. The primary outcomes can be divided into the following categories:

1. Resident Well-being Outcomes: includes metrics such as decreased hospitalizations and reduced medication errors.
2. Resident and Family Engagement Outcomes: align with the goals specified in the Resident and Family Action Plan and involve improvements in care, services and programs.
3. Core and Risk Management Outcomes: emphasizes the management and oversight of our clinical indicators, particularly targeting a reduction among different indicators of falls, injuries, and pressure injuries.
4. System and Organizational Outcomes: outcomes in accreditation and compliance, along with the encouragement of innovation in technologies and processes.

Communication

Strategies are developed following the senior's communication plan but are not limited to home-specific needs and preferences.

Updates in the quality improvement plan are shared through several means, including:



1. Postings on the quality board
2. Computerized information blast emails using the Cliniconex app.
3. Direct e-mails to staff and families
4. Newsletters
5. Website
6. Informal presentations/huddles
7. Presentations at staff meetings
8. Presentation at Professional Advisory and Quality Committees
9. Presentations at Residents' Council meetings
10. Presentations at Family Council meetings (on request)
11. Presentations at Public Health and Social Services Committee
12. Quarterly reports at the Quality Steering Committee

2024-25 Quality Improvement Accomplishments (reflections since last report)

1. Falls Prevention and Management

Woodlands of Sunset continues to focus on preventing falls through monthly core program interdisciplinary meetings. Every month of 2024, the team reviewed current and potential falls interventions strategies and determined their effectiveness based on the residents' needs and fracture risk scores. The residents who frequently fall were reviewed to ensure all possible strategies were utilized. The Woodlands team discussed falls and implementation of prevention measures in daily clinical rounds, where all information regarding any falls that occurred within the previous 24 hours was reviewed. The team used post-fall assessments and fracture risk scores to identify residents who were at greater risk of injury and used multifaceted measures to meet the needs of these residents. Falls prevention awareness was enhanced through the creation of six newsletter articles shared with residents and their families. These articles identified various strategies that contribute to a reduction in falls such as a clutter-free environment, improving access to items, and ensuring staff are notified when changes are noticed during visits. Residents were also encouraged to participate in active programs. The interdisciplinary team continues to discuss, and review falls trends to identify the most appropriate strategies for our residents in CAPS meetings, which also ensures care plans are in place to support residents at risk of falls.

2. Antipsychotic Medication Reduction

Efforts to reduce the use of antipsychotic medication for residents without psychosis are ongoing. One major success was the introduction of a Responsive Behaviour Therapeutic Advisor (RBTA) in the home in September 2024. The RBTA provides staff coaching, modeling, and education on resident-centered non-pharmacological interventions. The home also continues to utilize external partners such as BSO and the Psychogeriatric Resource Consultant to ensure careful review of referred cases and continued education. Staff also received education on antipsychotic use from our CareRX pharmacy representative and

Nurse Practitioner (NP). The education provided, such as principles of documentation, ensured that staff were aware of how their contributions impact care and medication decisions.

Embedded into their role, the RBTA creates a comprehensive escalation tool for each referred resident to enhance staff understanding of resident behavior based on care notes, resident assessment, and discussions with staff. Woodlands also increased the availability of therapeutic supplies in units based on RBTA suggestions by \$40, 000. These supplies have contributed to creating a positive, stimulating environment for residents. The home was also able to increase recreation hours for each home unit by 20 hours per week starting in September 2024. Woodlands continues to find ways of reducing antipsychotic usage, with our antipsychotic use percentage decreasing from 8.8% in Q4, 2023, to 5.6% in Q4, 2024.

3. **Resident Satisfaction and Engagement**

Woodlands of Sunset has made significant strides in improving communication of the services provided by the home, including rehabilitation, physiotherapy, and physician services by utilizing existing communication channels, and resident council and family meetings. To improve our food and snack quality, the dietary manager conducted a survey on April 15th, 2024, to understand potential improvement initiatives, that will be implemented in the year of 2025 such as enhancements in snack carts and communication of changes to menus. These efforts were based on the feedback provided through the 2024-25 resident and family satisfaction survey.

The Dementia Friendly Home project was planned, and some action items were complete in the year 2024. Activity rooms were completely revamped, and indoor gardens were implemented on three units.

4. **Diversity, Equity, and Inclusion (DEI)**

Woodlands of Sunset continues to support and promote inclusivity within the home. The DEI committee planned and hosted events and activities centered on culturally significant days and collaborated with external partners to offer education, entertainment and spiritually inclusive activities. Staff, residents and families were also provided 2 education sessions; a speaker event from Niagara Region's Indigenous advisor on September 9th, 2024, and a session with Niagara Region's Accessibility Advisor on June 26, 2024. Enhanced training on these topics was also incorporated into mandatory training for staff. Woodlands was successful in hosting different displays about different cultures, and these events were shared with the home's inner community through our newsletters to welcome participation.

5. **Hospital Transfer Reduction and Recreation Engagement**

Woodlands aimed to reduce avoidable hospital transfers by promoting the falls management program. Falls were tracked for each month, and RNAO falls pathways were utilized to comprehensively assess risk mitigation strategies and trends. Falls with injury were reviewed, specifically FRS scores to contribute to a reduction of falls with fractures in 2024. Given that a large number of hospital transfers occur due to falls with injury, these strategies helped to contribute to reducing falls, and Woodlands of Sunset continues to look for ways to reduce avoidable visits to the hospital.



6. Palliative Care

Woodlands of Sunset maintains a resident-centered approach to palliative care, with an interdisciplinary team supporting residents and their families in planning end-of-life care that respects their wishes. The home utilizes a palliative care cart, where staff and volunteers can engage in ongoing discussions to ensure the residents' needs are met during the end-of-life process. The nurse practitioner and external hospice pain consultant also ensure that all care decisions align with residents' desires for comfort and dignity. In upholding the palliative care philosophy, Woodlands of Sunset ensures that family and friends can spend quality time with residents at the end of life 24 hours a day.

Other Actions and Priorities Taken by the Home.

The Woodlands Sunset team has made additional efforts to improve the accommodations, care, services, programs and goods that contribute to the wellbeing of our residents and staff.

Accommodations:

1. **Dementia Friendly Home Project:** For the past year Woodlands of Sunset has been working towards completing this multi-year project across the home rooted in enhancing resident experience and standard of living and based on resident and family feedback. The goal of this project was to enhance the built environment through the creation of supportive spaces that enable Woodlands of Sunset to be a comforting and familiar home for our residents and based on their feedback from residents' council. By fostering a positive, emotional ambiance through utilization of design principles, the home can address stressors such as noise, lighting, unrecognizable spaces, and clutter, which ultimately contributes to the resident's standard of living. For the year of 2024, Woodlands of Sunset completed the following related to this project:
 - Activity rooms in all units were painted.
 - Indoor gardens were implemented on 3 units.
 - Activity rooms were reorganized for better accessibility of therapeutic activities.
2. **Creation/Revamp of Staff Spaces -*Employee Wellness Room*:** The home successfully created an employee wellness room that ensures all staff have space for quiet time and relaxation during their breaks. This initiative promotes wellness among our staff, enabling them to be their best for our residents.
3. **Revamp Outdoor Spaces:** The staff patio was decluttered and revamped.

Care:

1. **Full Home Unit Rounds:** Care teams switched from unit-specific rounds to complete home rounds this past year. This change has contributed to enhanced communication throughout the home, fostering a culture of care across all units.
2. **New Pets:** Seven birds were welcomed into the home this year, which has brought both happiness and cognitive and emotional support for our residents.

Services:



1. **Staffing Increases:** There were several additions to the Woodlands team this year including an additional PSW for each home area for Day Shift, along with the introduction of two new permanent roles including the Responsive Behavior Therapeutic Advisor and a Continuous Quality Improvement Advisor. In addition, an additional recreation therapist was added, ensuring that each home area has their own Full-Time Recreation Staff. Lastly, we implemented summer recreation student positions that have supported our residents in outdoor activities. These additions to our team have helped to enhance the care and services our residents receive.
2. **Work Routine Changes:** Recreational staff were moved to the units, having previously been in offices, which has promoted enhanced engagement on units, encouraging meaningful interactions between staff and residents.

Programs:

1. **Activity Room Revamp:** Activity rooms were revamped, which have been supportive for family visits and the daily life of our residents. These activity rooms, in addition to the great hall, are now equipped with books, games, and sorting activities that help to promote conversation, along with Montessori kits, which has enhanced engagement and enjoyment for families and residents.
2. **Special Events:** On April 8th, 2024, residents received special solar eclipse glasses so they could observe the solar eclipse. On June 20th, 2024, Woodlands celebrated their 20th anniversary through an open house for residents, families, and politicians who were invited to attend, with entertainment, BBQ and speeches. Residents also enjoyed a summer Olympics on August 14th, 2024, where they were invited to play games with staff. On September 9th, 2024, Brian Kon, the regions Indigenous Advisor presented on indigenous matters and discussed local history by utilizing show and tell items.

Goods:

1. **New Care Devices** Woodlands of Sunset has enhanced the care on our units by purchasing brand new bladder scanners, vital machines, and paragliders. These new devices help to ensure our staff have reliable care devices to support our residents in their homes.
2. **New Dietary Equipment:** Based on feedback on our food and snack quality by residents and staff, new coffee machines and ovens were introduced to each unit, providing an enhanced dietary experience.
3. **New Smartboards and computers:** Smartboards were introduced across the home and have enhanced the available activities for our residents. The office also received new computers which have advanced the technology utilized.

2024/2025 Review of Resident and Family Surveys Action Plan

Woodlands of Sunset made significant progress during 2024-2025 across key areas, particularly in enhancing our rehabilitation and physiotherapy program, quality of food and snacks, and our



physician services. Regular Resident Council (RC) and family newsletters throughout 2024 have been instrumental in sharing updates, gathering feedback, and implementing action plans. Notable achievements include the implementation of sharing recreational calendars to families monthly starting February 1st, 2024, and communicating the role of physiotherapy in the home by utilizing communication channels which began April 2024. The administrator also met with resident council to discuss the role of physicians and outlined the frequency and scope of their practice within the home on March 12th, 2024, and November 28th, 2024. The dietary manager also attended resident council to communicate relevant updates and survey for feedback on key improvement areas on April 15, 2024. Based on the feedback provided, fresh fruit was added to the snack carts, and this was followed up with residents on June 12th, 2024. These initiatives, supported by quarterly PAC/CQI Committee meetings, reflect a resident-centered approach and a commitment to continuous improvement in care and quality of life. A full action plan is available upon request.

Resident & Family Survey Results and Action Plan 2025/2026

Woodlands of Sunset conducted its annual Resident and Family Satisfaction Surveys to gather feedback from residents and their families about the services provided. The purpose of the survey is to facilitate improvements and ensure that care meets each resident's needs. In 2024, the survey was available from November 18th to December 8th, and we received a total of 96 responses, including 63 from residents and 33 from families.

The feedback we receive is invaluable as it helps us identify our strengths and areas for improvement, while also reinforcing our commitment to enhancing the quality of life in our homes. Overall care satisfaction was 95.1%, Services 94%, and Products 93.8%, with 93.6% of families and 91.8% of residents rating this home as either Excellent or Good. The following are the results compiled for the family and resident surveys. Please see the survey results in appendix A.

Three areas received lower satisfaction scores: the quality of food and snacks, physician services, and support for residents and their families. On January 13, 2025, the survey results were shared with resident contacts through email and with families via newsletters. Additionally, a satisfaction survey board was posted in the Great Hall. On February 5, 2025, the results of the survey were presented to the Resident's Council, and the action plan was discussed. A Family and loved one's meeting occurred on January 31, 2025, to discuss the action plan. Printed copies of the results were posted on the Quality Board.

To address the areas with low satisfaction ratings, we have identified the following actions for improvement:

1. **Quality of Food and Snacks:** Based on the feedback received from residents and families, we will utilize a new supplier system to launch a revised menu and introduce a new digital platform, which will enhance access to menus for residents, families and the dietary team.



We also aim to address all change requests within 48 hours and provide status updates and resolutions in the Food Committee meeting. The NEST manager will ensure these meetings occur monthly and are scheduled in advance to ensure residents are able to attend. These initiatives will help address any concerns identified about the quality of food and snacks provided at Woodlands of Sunset.

2. **Physician Services:** To ensure residents and families are provided adequate information about physician services, following admission, in care conferences, and at a resident council meeting, they will be provided an explanation about the role of Physicians and Nurse Practitioners. In addition, a visual display of physicians will be posted in key resident areas. We anticipate that these efforts will support residents and families understanding of physician services, which was a gap their feedback identified.
3. **Support for residents and families:** To enhance resident and family's understanding supports in the home, the Resident and Family Social worker (RFSW) will attend Resident council twice a year and set up an initial visit with all new admissions to share key information and contact details. The RFSW will also develop a poster to describe their role and share their hours of work, which will be posted at their office. We anticipate that these changes will address residents' concerns more efficiently and effectively.

The Resident Council, Family Meetings and the Professional Advisory and Quality Committee receive the current report and are regularly informed of progress regarding the action items during their meetings. Members can raise questions, provide input, and request changes as needed. An updated report and meeting minutes are posted in the Home page, with copies available upon request.

The action plan will be reviewed and revised every quarter in collaboration with the resident and family council and the Quality Committee (refer to Appendix A). The comprehensive action plan is available at home.



Upcoming Priority Areas for 2025-2026

In 2025/2026, Woodlands of Sunset is aiming to implement the following initiatives.

Table 1: The Woodlands of Sunset Initiatives

Area of Focus	Performance	Change ideas
Rate of ED visits for modified list of ambulatory care–sensitive conditions* per 100 long-term care residents	Current: 20.78% Target: 18.70%	<ul style="list-style-type: none"> Enhance the family's understanding of the various services offered by Long Term Care to reduce emergency department (ED) visits. Enhance staff's knowledge and skills in completing physical assessments through staff education. Optimize the Goals of Care conversation by utilizing Nurse Practitioners and Physicians when there is a significant health decline. Early Identification of residents exhibiting signs of delirium or potential treatable infections.
Diversity, Equity & Inclusion	Current: 100% Target: 100%	<ul style="list-style-type: none"> To provide deeper awareness of different cultures, traditions, and values of people from different countries. To increase residents' and staff's awareness with respect to the 2SLGBTQ+ community. To enhance staff's knowledge of DEI through education and training using different channels. Enhance staff's knowledge on diversity equity, inclusion and anti- racism topics.
The percentage of residents responding positively to: "What number would you use to rate how well the staff listen to you?"	Current: 96.61% Target: 97%	<ul style="list-style-type: none"> Enhance staff's knowledge of different diseases that can affect how resident communicates. To create a resident spotlight that promotes meaningful conversations. Implement and communicate tips and tricks for residents who require more support for communication and understanding. Engage residents in projects that are being implemented in the home.
Percentage of residents who responded positively to the statement: "I can express my opinion without fear of consequences."	Current: 91.53% Target: 93%	<ul style="list-style-type: none"> Addressing residents' concerns within 24 hours when possible. Enhancing awareness of management roles and concern-reporting channels. Enhancing resident awareness of concern and complaint reporting. Providing quarterly updates on resident action plan progress.



Area of Focus	Performance	Change ideas
The percentage of LTC home residents fell in the 30 days leading up to their assessment.	Current: 18.50% Target: 16%	<ul style="list-style-type: none"> • Conducting a comprehensive audit to identify and analyze fall trends among residents. • Raise awareness of falls and educate residents and families on fall prevention strategies. • Increase residents' and families' awareness of environmental considerations concerning fall prevention. • Engaging the recreation department in fall prevention through unit-based physical programs.
Percentage of LTC residents without psychosis who were given antipsychotic medication in the 7 days preceding their resident assessment.	Current: 4.08% Target: 4%	<ul style="list-style-type: none"> • Enhance staff's knowledge of non-pharmaceutical strategies through targeted education. • Ongoing education on how to correctly identify hallucinations and delusions to personal support workers. • To identify residents who are on antipsychotics and monitor for opportunities to decrease medications. • Establish a formal titration process within 3 months.
Dementia Friendly Home Project	N/A	Woodlands of Sunset will continue to progress on project action items that contribute to the comfort and familiarity of the home, thereby enhancing residents' standard of living.



Appendix A – Woodlands of Sunset Satisfaction Survey Results 2024

Question Category	Question Short	Resident	Family	Combined
Care	Ability to Express Opinion Without Fear	91.5%	100.0%	94.0%
Care	Addressing Resident Concerns	94.6%	96.6%	95.3%
Care	Care Team - General	96.8%	100.0%	97.8%
Care	Feeling of Safety at the Home	100.0%	100.0%	100.0%
Care	Maintaining Privacy	98.4%	96.4%	97.8%
Care	Nurse Practitioner Services	91.8%	100.0%	94.6%
Care	Nursing Services - General	100.0%	96.4%	98.9%
Care	Pharmacy Services	90.0%	96.3%	93.0%
Care	Physician Services	60.4%	96.2%	73.0%
Care	Staff Hand Hygiene and Washing	96.4%	100.0%	97.5%
Care	Staff Listening and Understanding Needs	96.6%	100.0%	97.7%
Care	Treatment with Compassion and Respect	96.8%	96.9%	96.8%
Overall	Knowing Who to Bring Concerns To	85.7%	96.6%	89.4%
Overall	Overall Care Received		100.0%	100.0%
Overall	Recommendation of Home	98.4%	93.1%	96.7%
Overall	Response to Concerns	98.2%	89.7%	95.3%
Products	Comfort of Products	93.3%	96.0%	94.3%
Products	Healthy Skin Promotion of Products	91.3%	96.4%	93.2%
Services	Dietary Services	91.7%	96.3%	93.1%
Services	Food and Snack Quality	75.8%	100.0%	83.9%
Services	Housekeeping Services	94.9%	100.0%	96.5%
Services	Maintenance Services	98.2%	88.5%	95.1%
Services	Manager Helpfulness	87.9%	96.0%	91.4%
Services	Meeting Personal Needs	98.3%	100.0%	98.9%
Services	Reception and Banking Services	91.3%	100.0%	95.8%
Services	Recreation Programs	98.3%	95.2%	97.5%
Services	Rehabilitation and Physiotherapy	97.0%	93.8%	95.9%
Services	Resident and Family Support	61.5%	100.0%	86.5%
Services	Volunteer Services	100.0%	100.0%	100.0%

