Status Report of the 2026 Implementation Plan
Updated: June 29, 2026

The 2026 Implementation Plan is reviewed quarterly by the Leadership Team, with MRPs updating activities as needed. This report reflects the current status based on the latest available information. Initiatives not noted below are scheduled to begin later in 2026.

STRATEGIC PRIORITY 1: The best possible quality of life for every resident
Outcome A: Our care is guided by residents' preferences and needs for physical, emotional, social, spiritual and psychological wellbeing. **Outcome B:** Our flexible processes and ways of working accommodate different and changing needs. **Outcome C:** Everyone in our St. Patrick's Home family has greater opportunities to engage with each other and with the larger community.

STRATEGIC PRIORITY 2: Consistent, person-directed, quality care and support
Outcome A: We match our level of care to residents' individual needs and strive to always provide the best quality care possible. **Outcome B:** Staff feel equipped and empowered to provide quality person-directed care. **Outcome C**: Our systems, processes and equipment support consistent, person-directed quality care and the safety of residents and staff. **Outcome D:** Everyone works together in each residents' best interests - families, friends, staff, volunteers, residents themselves and/or their SDMs.

STRATEGIC PRIORITY 3: A purposeful partner in the health system
Outcome A: All of us involved in St. Patrick's Home - residents, families, friends, volunteers and staff - share an understanding of critical health system gaps, identify opportunities and present a strong, collective voice for positive change.
Outcome B: We strive to foster greater coordination and connection among health and social service partners, engaging effectively and drawing on our day-to-day understanding of long-term care realities.

STRATEGIC PRIORITY 4: Supportive affordable housing and services to met community needs
Outcome A: Plans to expand housing and services that defer or provide an alternative to long-term care have broad support throughout the St. Patrick's community. **Outcome B:** We develop our expanded campus thoughtfully, minimizing disruptions and creating new benefits for our home and the broader community. **Outcome C:** We secure the funding needed to fulfill our housing plans and provide associated supports.

Initiative	Strategic Alignment	Key Deliverables (Q2)	Timeline Adjusted	Metric / Target	Q2 Status	Risk	Recovery	Accomplishment
Person-Directed Meal Service	SP1:ABC	Initiate PDSA cycles; begin implementation of improvement actions; evaluate early outcomes	Q2→Q3	Food & Meals QOL: 56% → 61% (+5%)	In Progress	PDSA cycles in early stages	Continue implementation and evaluation through Q3	Solution development underway
Person-Directed Recreation and Leisure	SP1:ABC	Complete audits in trial RHAs; implement revised model across all RHAs		Activities QOL: 34% → 41% (+6%)	Complete	No risk	N/A	Final audits completed and initiative successfully implemented across all RHAs
Quality Improvement	SP1: B SP 2: ABC	Finalize Layered Process Audit (LPA) framework and reporting processes	Q2→Q3	Inspection Findings (MOLTC): -50% (2026) → 0 (2028)	In Progress	Implementation delayed to Q3	Complete standardization and begin rollout in Q3	LPA framework nearing completion
Improve Skin Integrity of Residents	SP2: AC	Deliver wound prevention education; implement SWAN-led mentorship and clinical support		Stage 2–4 Wounds: 4.16% → 1.80%	In Progress	Ensuring consistency across shifts	Continue education, audits, and mentorship	Ongoing staff education, audits, and clinical support implemented

Initiative	Strategic Alignment	Key Deliverables (Q2)	Timeline Adjusted	Metric / Target	Q2 Status	Risk	Recovery	Accomplishment
Improve Oral care of Residents	SP2: AC	Implement oral care education; begin identification of oral care champions		Oral Care Refusals: -50%	On Track	Champions not yet assigned	Identify and implement champions in Q3	Staff education completed and integrated into practice complete, oral care added to mandatory education
Improve Linen Access to Residents	SP2: C	Complete process mapping; identify gaps in linen distribution; begin action planning		Reduce unavailability of linen by 50% by Dec 31/2026, utilizing pre and post measures	In Progress	Process mapping not yet complete	Complete mapping and move to action plan in Q3	Process mapping preparation is underway
Increase knowledge and support of the residents with the abuse and whistleblowing legislation	SP1: A SP2: ACD	Deliver resident education sessions; continue rollout across remaining RHAs		QOL "Express Opinion Safely": 70% → 76%	In Progress	Timing of session delivery	Continue sessions into Q3 with Social Work support	Education sessions resumed; increased resident engagement
CARF Accreditation	SP3: AB	Initiate self-assessment; begin evidence collection and documentation		CARF Accreditation Achieved	In Progress	Volume of documentation required	Continue phased preparation through Q3	Self-assessment complete and preparation underway

Initiative	Strategic Alignment	Key Deliverables (Q2)	Timeline Adjusted	Metric / Target	Q2 Status	Risk	Recovery	Accomplishment
Ontario Association of Resident Council Representation	SP3: A	Maintain resident participation; continue communication of OARC opportunities		OARC Participation: ≥1 resident	On Track	None	Continue engagement	Ongoing participation and support maintained
Membership on External Committees	SP3: AB	Maintain leadership participation in external committees		Committees: ≥4	On track	None	On Track	Leadership engagement maintained across committees