Apotex, Jewish Home for the Aged Continuous Quality Improvement Report

Timeframe: Year End Quality Report 2025-26

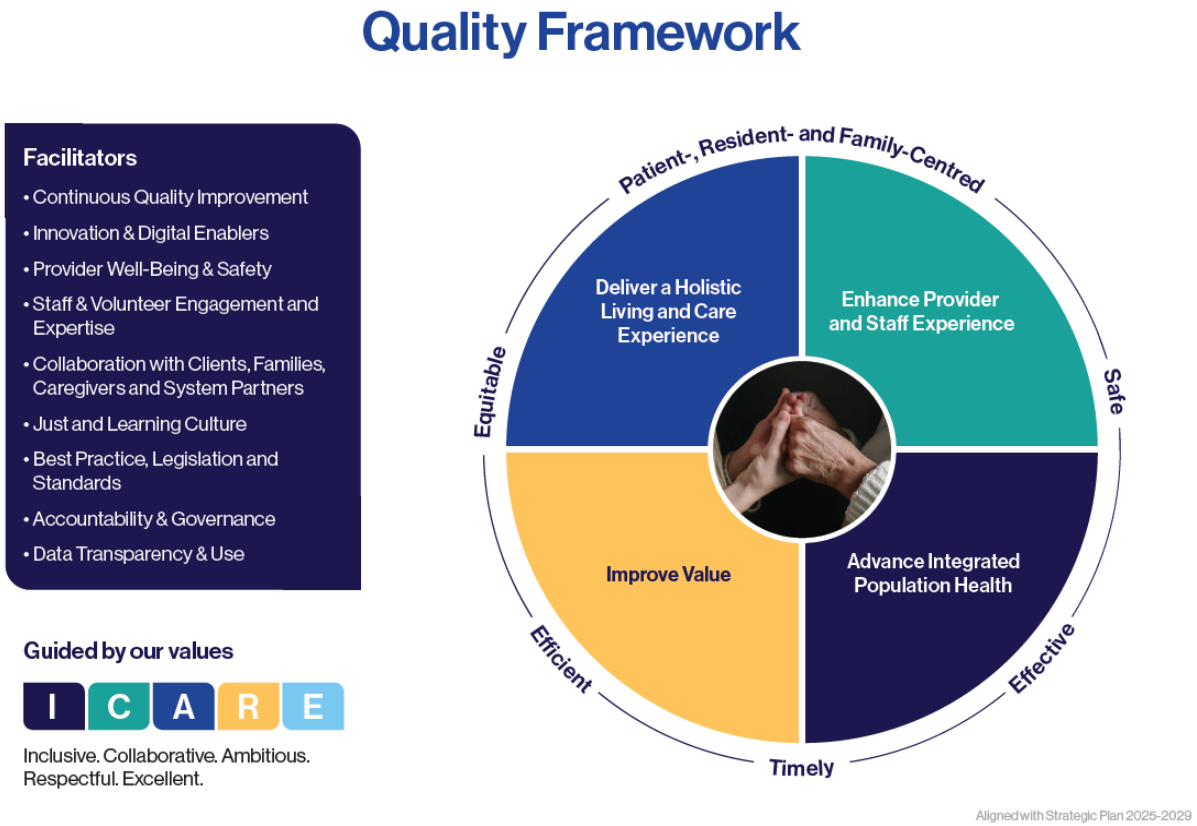
Name of lead: Cyrelle Muskat, Chief Heritage and Quality Officer

The Apotex, Jewish Home for the Aged, is a 472-bed faith-based long-term care facility at Baycrest that provides a range of residential and specialized programs to meet each resident's needs and preferences.

Originally founded in 1918 by the Jewish community of Toronto, Baycrest has an inspiring more than 100-year history of exceptional community services and ceaseless devotion to serving those in need.

Quality Improvement Priorities

The Apotex uses the Quality Framework, aligned with the Baycrest strategic plan, as a clear blueprint to define, pursue and measure quality. The framework places people at the centre and offers a structured approach to quality by outlining its key dimensions and the outcomes Baycrest strives to achieve through the Quadruple Aim. Organization-wide quality initiatives, including the annual Quality Improvement Plan (QIP), are key enablers of Baycrest's strategic goals and reinforce its contribution to a sustainable, high-performing health system for older persons.



Each year, aligned with its Quality Program and Policy, the Apotex establishes key priorities aimed at strengthening the quality of care and services provided within the home. These priorities are informed by feedback from residents and families gathered through surveys, compliments, concerns, and everyday interactions. Additional considerations include historical and current performance data, legislative and regulatory requirements, accreditation standards, and leading practices in geriatric care. With ongoing input from staff, residents and families, and guided by organizational priorities, a formal QIP is developed for the upcoming year. The Apotex 2026-27 QIP will address:

Ensuring Appropriate Use of Antipsychotic Medications
This ongoing work focuses on consistently ensuring that antipsychotics are prescribed only when clinically indicated, at the lowest effective dose, and for the shortest appropriate duration, supported by non-pharmacological approaches and interdisciplinary collaboration.

Reducing harm resulting from falls
While not all falls are preventable, the goal for the next year is to prevent injuries from falls through targeted and proactive fracture risk assessments, medication reviews, individualized prevention strategies, and evidence-based recreation and exercise interventions that support residents' mobility and quality of life.

Reducing Unplanned Emergency Department Transfers
Over the coming year, Apotex will prioritize the implementation of a standardized, evidence-informed care pathway for the management of congestive heart failure, one of the leading causes of ED transfers from the home. This pathway will emphasize early identification of exacerbation symptoms and clear escalation protocols.

Strengthening Residents' Ability to Speak Up Without Fear of Reprisal
Baycrest is committed to upholding the rights of long-term care residents, including the right to express opinions and concerns freely and without fear of consequences. Quality initiatives will focus on strengthening communication practices, supporting staff responsiveness, and reinforcing trust between residents and staff to ensure residents feel safe, heard and respected.

Improving Pressure Injury Prevention and Management
Preventing pressure injuries, especially those acquired in the long-term care home, is a critical safety priority. The Apotex will focus on ensuring individuals identified as high risk have individualized prevention plans in place, strengthening early identification and intervention, and standardizing documentation to support consistent, high-quality care.

Resident and Family Experience

Apotex integrates experience-based feedback into its improvement initiatives through a range of councils, surveys, and feedback mechanisms. Active forums such as the Resident Advisory Council, Family Advisory Council, and Client Food Committee foster collaboration and encourage innovative ideas to enhance the resident and family experience.

Leadership also gathers formal feedback through the internationally validated interRAI Resident and Family Quality of Life surveys, with over 200 responses collected in 2025. Resident surveys are conducted throughout the calendar year and family surveys were mailed out at the end of October. Results are shared with residents, families, staff, and advisory councils, informing meaningful change. Resident and Family Quality of Life survey data was presented at the councils on April 13th and April 21st, respectively. For transparency, these findings are publicly accessible through the Apotex website and displayed throughout the home.

Through its participation in the Seniors Quality Leap Initiative, an international consortium dedicated to advancing quality of life in long-term care, the Apotex compares its resident and family quality of life results against international benchmarks. This broader perspective highlights strengths, identifies areas for improvement, and helps guide targeted quality improvement strategies.

The home takes pride in the sustained improvements made to enhance residents' quality of life. Since 2020, many of the quality of life survey questions (see Table 1 below) have shown year-over-year improvement, with particular gains in questions addressing resident social life. In 2025 alone, 40% of survey items demonstrated improvement compared to the previous year, particularly those related to respectful relationships between residents and staff and meaningful, resident-centred engagement. A snapshot of Apotex's performance across five resident quality of life scales since 2015 is presented below. An improvement trend is observed in the social life, food and caring staff scales.

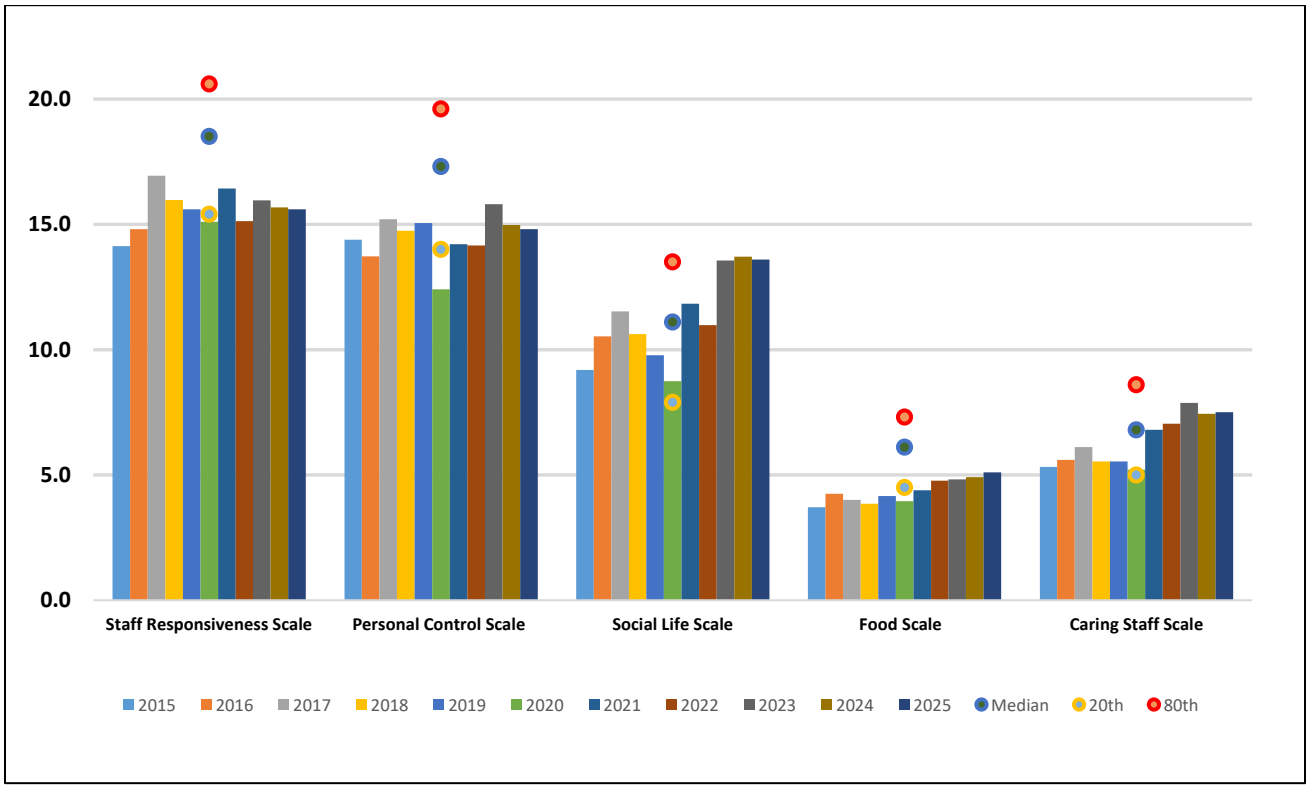


Table 1: Resident Quality of Life Survey Questions with an improvement trend since 2020

Resident	Family
• Food is attractively presented • I can go where I want on the "spur of the moment." • I have a special relationship with a staff member. • Staff ask how my needs can be met. • I have enjoyable things to do here on weekends*. • I have enjoyable things to do here in the evenings. • I have opportunities to spend time with other like-minded residents. • I have the opportunity to explore new skills and interests* • Another resident here is my close friend.	• I would recommend this site or organization to others. • I know who to contact if I have concerns about my family member's care. • I am aware of the variety of programs offered to the resident.

**Apotex performance is better than the 80th percentile*

The Apotex also captures resident and family feedback through a robust complaints and compliments process that supports transparency, accountability, and continuous quality improvement. There is a formal written complaints procedure that ensures complaints are documented, investigated, and addressed in a timely manner. All complaints are systematically tracked, including measures related to timeliness of response and satisfaction with the resolution. 100% of complaints are acknowledged within 1 business day, far exceeding the requirement of 10 days outlined in the Act. When surveyed, the majority of residents respond that they are aware of the process to initiate a concern/complaint.

Compliments are also captured to highlight positive practices and staff contributions. Trends and themes from both complaints and compliments are regularly analyzed and reported to the Apotex Quality Committee, where findings are reviewed and used to identify improvement opportunities, inform quality initiatives, and strengthen the overall resident and family experience within the home.

By combining resident-generated data, structured feedback mechanisms, and ongoing dialogue, Apotex reinforces its commitment to ensuring that every resident feels heard, respected, and empowered, ultimately enhancing the quality, responsiveness, and transparency of care.

Monitoring and Measuring Progress

The Apotex has several committees that are accountable for quality oversight, foresight and planning. Each required program under the *Fixing Long Term Care Act* has a program committee which reports into the Apotex Quality Committee. Updates are shared at resident and family councils. Through these committees, the Apotex tracks progress on quality improvement targets and initiatives through a performance scorecard and quarterly reports. A summary of the 2025/26 QIP goals and outcomes is included in Appendix A, posted on the Baycrest website and explanations for indicators that did not meet target is included below:

Unplanned Emergency Department Visits

The target of 12% for unplanned emergency department (ED) visits was not achieved, with the year-end result reaching 15.9%. Notably, potentially avoidable ED visits are unplanned, but not all unplanned visits are avoidable. Potentially avoidable visits are a subset of unplanned transfers that, with timely assessment, appropriate clinical management, or preventive care, might have been managed on-site (e.g., dehydration). In contrast, unplanned ED visits refer to any unexpected transfer, regardless of reason, that was not anticipated (e.g., sudden illness or injury). It is important to note that in 2025, 71% of residents transferred to the ED required inpatient admission, suggesting that the transfers were appropriate. This data helped identify opportunities for improvement, including earlier detection of symptoms to potentially avoid the trajectory leading to an ED transfer. Although we did not achieve our target for the percentage of unplanned ED visits, the Apotex rate of potentially avoidable ED visits (5.2%) was better than the Ontario average of 7.2%.

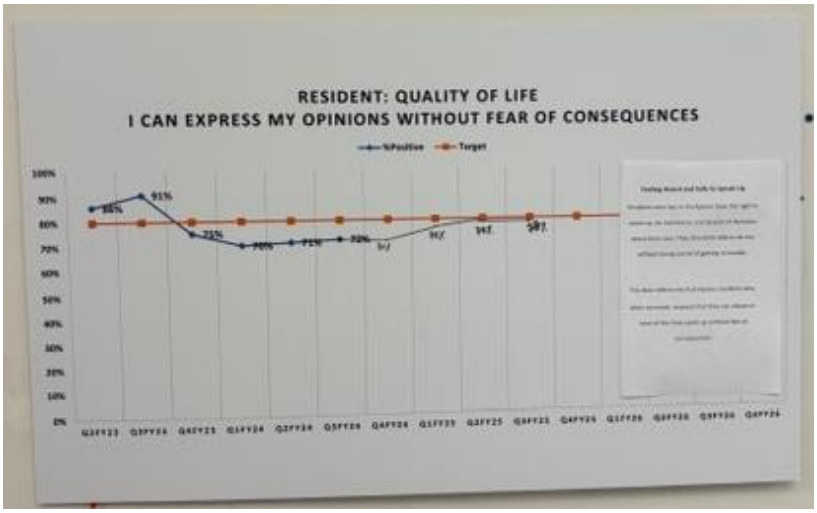
Antipsychotics

Although the Apotex did not achieve the 15% target, there was significant effort to ensure antipsychotics are prescribed appropriately. 33% of residents were admitted to the Apotex already on an antipsychotic; 39 residents had their dose discontinued; 63 residents had their doses reduced and there were 46 residents who were prescribed an antipsychotic to manage behavioral or psychological symptoms of dementia.

Speaking up without fear of consequences

In 2025, the % of residents who expressed that they can speak up without fear of consequences improved to 76% from 72%, though still shy of the target. Work continues to understand the contributing factors and this improvement is reflected in the 2026/27 QIP.

The required program teams meet regularly to monitor key performance indicators, with formal reports shared quarterly with the Quality Committee. Managers are encouraged to share results with staff and there is a performance board on every floor which highlights one indicator of focus. In 2025 it was the QIP indicator related to resident experience, specifically, the percentage of residents who responded positively to the statement, “I can speak up without fear of consequences.” These boards served as a practical tool to engage staff in meaningful discussions about psychological safety and to identify ways to better support residents in feeling comfortable and confident to voice concerns without fear of reprisal.



Improvements across the Apotex

A summary of the actions taken to improve quality across the home is provided below. A list of names of persons who participated in the evaluation of improvements is listed in Appendix B. Residents and families and the associated councils are informed about these initiatives and changes in a variety of ways including at council meetings, postings/flyers across the home, newsletters and email updates, as necessary. Annual evaluations are presented at the Quality and/or Professional Advisory Committees and these reports include the names of all persons who participated in the evaluations.

Recreation and Social Services

Recreation and social service programming were significantly enhanced to support resident engagement, well-being, and quality of life. Recreation staffing and programming were expanded during statutory holiday weekends, alongside the introduction of new special events aligned with resident interests, including a Couples Date Night, Karaoke Pub Party, Casino Day, monthly evening concerts, and monthly therapeutic animal visits. Two additional resident outings were added, with 190 residents participating in at least one outing. From April to December 2025, residents engaged in a range of innovative, evidence-based recreation programs, including Aromatherapy, Therapeutic Dance, Compassionate Touch, and Obie (Interactive multi-sensory projector). All Recreation staff completed specialized training in Compassionate Touch and Therapeutic Dance/Expressive Movement. Therapeutic gardening and nature-based programming were also expanded, with twice-weekly on-floor sessions and a weekly main-floor gardening program.

Access to care and communication were strengthened through the introduction of the ActivityPro family portal, providing families with visibility into resident participation, and through expanded referrals to Recreation and Music Therapy for residents at end of life or requiring additional support during antipsychotic deprescribing. With donor support, the home welcomed

an additional Music Therapist specializing in responsive behaviours. Environmental and cultural enhancements included the introduction of themed lounges across five floors to foster social connection and cognitive stimulation, as well as the addition of artwork from the Baycrest Art Collection in dining and lounge spaces through grant funding. Partnerships with community artists and organizations enriched programming through initiatives such as Smile Theatre, Studio 180 drama programs, and lectures via the Baycrest Learning Academy, alongside curated exhibitions in the Culture Hub.

Further enhancements included collaboration with the National Ballet School to train 15 instructors in delivering the “Sharing Dance Older Adults” program, and expansion of the concert series through donor funding, adding an additional monthly Sunday performance and twice-weekly evening and weekend instrumental sessions. Intergenerational programming was strengthened through partnerships with schools and daycares across the city, with over 500 students participating in activities with residents. Social Work also continued to facilitate the Life and Legacy support group, promoting emotional connection, reflection, and confidence in sharing personal experiences across the resident community.

New this year, the Apotex Social Work Department established and offered two support groups specifically for adult children caring for parents with dementia residing at the Apotex, recognizing the unique emotional and practical challenges this group faces. Each group ran weekly over eight weeks and the groups integrated psychoeducation with a strong emphasis on mutual aid, emotion-focused dialogue, and peer support, fostering a compassionate environment where participants could share experiences, build connections, and develop coping strategies. Sessions covered topics such as dementia progression, caregiver stress, grief and complex emotions, and self-care. Engagement remained strong across both cohorts. Through collaboration with the Alzheimer’s Society of Toronto, caregivers were connected to a range of educational workshops and resources to support their knowledge, skills, and well-being.

Heritage and Spiritual Care

The Apotex is committed to deepening Jewish life and enhancing meaningful opportunities for spiritual connection, learning and community for all residents. For the past 5 years, more residents are responding that they (either always or most of the time) participate in religious activities that have meaning to them and this remained true in 2025 as well. Specific improvements this year including expanding the B’nai Mitzvah program for residents to include Aliyot (an honour given during a Torah reading where an individual is called up to the front to

recite blessings) and Torah readings, creating more inclusive and participatory experiences. Additional Reform Shabbat and afternoon prayer (Mincha) services were introduced to broaden access to worship. Communal menorah lightings during Chanukah were enhanced with celebrations across dining rooms to foster shared joy and visibility of tradition. A Tisha B'Av service was added, ensuring recognition of important moments in the Jewish calendar. To support ongoing learning and personal growth, a Mussar discussion group (Jewish ethical and spiritual practice) was established, encouraging reflection on values and living a conscientious life. Intergenerational engagement remained a priority, with continued participation in morning Megillah readings, strengthening connections across generations and reinforcing a vibrant, living Jewish community. At the same time, spiritual care supports were broadened through the introduction of an Ash Wednesday service, a strengthened partnership with the Archdiocese of Toronto, and expanded 24/7 access to the multi-faith room, ensuring residents of different faith traditions have greater opportunity for prayer, reflection, and connection.

Food Services

As part of ongoing efforts to enhance resident experience and operational efficiency, several targeted improvements were implemented within dining services, with year-over-year gains in resident Quality of Life survey results demonstrating the positive impact of these initiatives. Environmental enhancements were introduced, including the addition of artwork to dining areas, contributing to a more welcoming, home-like atmosphere that supports resident comfort and social engagement. New dining room chairs were also procured, improving both safety and ergonomics while elevating the overall dining experience. Infrastructure upgrades included the installation of three new ice machines, ensuring reliable access to ice, supporting hydration practices and maintaining compliance with public health and infection prevention standards. Process improvements were also undertaken to streamline the mealtime supplement distribution process, resulting in more timely, consistent and efficient delivery to residents.

In alignment with sustainability and resource stewardship goals, food waste monitoring has been strengthened, enabling the team to identify trends, reduce waste and optimize production practices. At the same time, there has been a sustained focus on menu planning and food quality improvement, informed by resident feedback and the client food committee. These efforts have contributed to ongoing enhancements in satisfaction scores and overall dining experience. Collectively, these strategies support quality of life, operational effectiveness and alignment with best practices in long-term care nutrition and dining services.

Required Programs

As per the requirements of the *Fixing Long Term Care Act*, all licensees must ensure that interdisciplinary programs are developed and implemented in the home. Below is a summary of improvements made over the past year for each of the required programs:

Falls Prevention and Management Program

As part of its quality improvement efforts, the home strengthened its falls prevention program through the implementation of evidence-based practices aligned with Best Practice Guidelines under the Best Practice Spotlight Organization program. These efforts enhanced comprehensive risk assessment, post-fall analysis, and interdisciplinary collaboration to support safer resident care. Several targeted process improvements were introduced to enhance monitoring, consistency, and response to falls. A standardized audit checklist (for falls with moderate/severe injury) was implemented to compare PointClickCare and incident reporting data, enabling identification of trends, discrepancies, and high-risk residents to inform focused interventions. Falls prevention equipment is now centrally tracked and managed, improving timely access and oversight. Together, these initiatives strengthened data-driven decision-making, consistency in practice, and overall resident safety.

Responsive Behaviors Management Program

A Constant Observation tool was developed to guide 1:1 monitoring by security staff, ensuring more consistent oversight for residents requiring enhanced supervision. To further support staff competency and standardization across the home, a comprehensive Job Aide binder was implemented in all 18 neighborhoods. This resource consolidates guidance on behavioral documentation, cognitive impairment, verbal self-protection strategies, aphasia compensation techniques, and foundational principles of person-centered care. Together, these improvements enhance the home's ability to safely and effectively manage responsive behaviors, promote resident dignity and support interdisciplinary collaboration.

Additionally, the Apotex proudly participated in Healthcare Excellence Canada's *Sparking Change in the Appropriate Use of Antipsychotics Program*, an impactful initiative focused on advancing person-centred care in long-term care homes across Canada. Through this program, teams were supported in reducing inappropriate antipsychotic use by implementing innovative, non-pharmacological approaches tailored to residents' needs. This initiative led to meaningful and measurable improvements, culminating in The Apotex receiving both the Kickstarter Award and the highly prestigious Impact Award. These recognitions reflect the team's strong use of data, commitment to sustained change, and compelling demonstration of real-world impact on residents, families, and staff, highlighting the organization's leadership in enhancing quality of care.

Continence Care and Bowel Management Program

In 2025, this program advanced key initiatives to improve urinary tract infection (UTI) management, continence care, and individualized resident support. Four in-services were delivered to nurses, focusing on evidence-based UTI assessment aligned with Registered Nurses' Association of Ontario best practice guidelines and Choosing Wisely Canada. Education emphasized the use of Modified Loeb Criteria, accurate documentation of vital signs and symptoms, and the importance of confirming clinical indicators before initiating treatment. The risks of unnecessary antibiotic use in older adults were highlighted, alongside strategies to support clinical decision-making, including educational materials and a "Reflect Before You Collect" campaign to reduce inappropriate urine testing. Continence care practices were strengthened through a partnership with TENA, providing training to staff on appropriate product

selection, absorbency, application, and the importance of toileting and nighttime routines. Ongoing collaboration supports monitoring of product use and ensuring access to appropriate supplies for residents, the majority of whom are incontinent.

Pain and End of Life Management Program

In 2025, several targeted quality improvement initiatives were implemented to enhance palliative care delivery and clinical practice. Focused educational in-services strengthened registered staff competency in pain assessment and documentation, resulting in more consistent, accurate, and timely clinical practices. A comprehensive review of the Ontario Palliative Care Network Quality Standard for Palliative Care, conducted in collaboration with the Registered Nurses' Association of Ontario, led to the identification and prioritization of key practice gaps. This work informed the development of a standardized, interprofessional approach to goals-of-care discussions through structured End-of-Life Conferences, improving communication and alignment between residents, families, and care teams. The standardization of the spiritual care referral process enhanced timely access to supportive services while enabling improved tracking and evaluation of care delivery. Staff capacity was further strengthened through completion of LEAP Long-Term Care training provided by Pallium Canada, reinforcing evidence-based competencies in symptom management and end-of-life care planning. Additionally, the introduction of music therapy and aromatherapy supported a more holistic, non-pharmacological approach to comfort.

Skin and Wound Management Program

In 2025, the Skin and Wound Care Program made several improvements to strengthen monitoring, coordination, and quality of care. The introduction of the Skin and Wound ChartPic application provided real-time access to wound data, supporting more timely clinical decision-making. Weekly interdisciplinary reviews of new and worsening pressure injuries improved root cause analysis, guided targeted interventions, and supported staff education, while also optimizing the use of therapeutic surfaces such as air mattresses. The program was further strengthened through a collaborative team model involving specialized nurses, a physician, and advanced practice leaders, improving consistency in assessment, documentation, and care planning. In addition, ongoing physician education and individualized care plans for high-risk residents contributed to a more proactive, comprehensive, and resident-centered approach to skin and wound management. The Apotex also strengthened the program through a strategic collaboration with Baycrest Hospital to monitor and reduce high-acuity pressure injuries. This partnership focused on a shared “North Star Metric” aligned with the home’s Strategic Goal #1a: tracking the occurrence of newly acquired stage 3 and 4 pressure injuries.

Restorative Care

This year, the Restorative Care and Nursing Rehabilitation Program continued to focus on maintaining and enhancing residents’ functional abilities, independence, and overall quality of life as a key strategy to prevent or delay mid- to late-stage loss of function in activities of daily living (ADLs). A notable enhancement was the expansion of the program’s scope to support a broader range of restorative care and nursing rehabilitation needs, including greater focus on essential ADLs such as eating, dressing, and grooming and resulting in a 37% increase in program enrolment. This strengthened the program’s ability to deliver more comprehensive,

resident-centred interventions and to respond more effectively to early signs of functional decline.

Restraints

The Apotex Chemical and Physical Restraint Minimization and Personal Assistance Services Devices program remained focused on promoting resident safety, dignity, and quality of life through least restrictive measures. The Home continues to operate as a restraint-free environment, maintaining a 0% restraint rate, trending significantly below the provincial average. Recent best practice updates improved efficiency and modernized processes. A physician's order is no longer required for Personal Assistance Services Device (PASD) application, enabling timely access to supports. Residents may retain PASDs at their request even when no longer clinically indicated, supporting autonomy and choice. The transition to electronic consent and assessment documentation enhanced workflow and accuracy, while Occupational Therapy and Physiotherapy assumed responsibility for tracking and completing quarterly PASD assessments through the PointClickCare (PCC) process, reducing administrative burden on nursing staff. The home maintained 100% compliance with bed safety assessments at admission and with any change in status, in alignment with internal policies and provincial legislation. Overall, the program demonstrated a strong commitment to continuous quality improvement, balancing risk with resident autonomy and fostering a culture of safety and respect.

Other Clinical Improvements

In July 2025, the Apotex introduced the InterRAI LTCF assessment, replacing the RAI MDS assessment. The InterRAI LTCF enhances consistency in documentation, strengthens communication among care teams, supports data-driven decision-making, and contributes to quality improvement initiatives across the home.

The Apotex continues its partnership with Sunnybrook Hospital's Nurse-Led Outreach Team (NLOT) to provide specialized, evidence-based care for residents with complex health needs. NLOT nurses bring additional expertise in geriatrics and seniors' mental health, deliver urgent, mobile services to LTC homes to help reduce emergency department visits and hospital admissions. The NLOT also enhances staff capacity through education and mentoring. In March 2026, the Apotex launched a 6-month pilot program for in-home IV hydration through the NLOT. This initiative provides direct benefits to residents who might otherwise require Emergency Department transfers, reducing stress and risks associated with hospitalization.

In December 2025, a Nurse Practitioner (NP) joined the interdisciplinary team at the Apotex. Collaborating closely with the Apotex Physicians, the NP provides primary care to residents, with a focus on those experiencing changes in their health status.

Housekeeping, Laundry, Accommodations and Facilities

In 2025, the Laundry Department implemented several operational improvements to enhance efficiency, workflow, and staff safety. Additional staffing resources were introduced to support more timely processing and return of resident clothing, strengthening overall service reliability. Workflow processes were redesigned to improve handling and reduce physical strain on staff.

This included transitioning the delivery of blue fabric laundry bags directly to residents' rooms rather than centralized nursing stations, minimizing overfilling and improving distribution practices. Staff scheduling was also optimized, with adjustments to Linen Aide shifts, particularly on high-demand days, to better align staffing levels with workload requirements. This change supported more efficient task completion and improved turnaround times for laundry services.

Several initiatives were implemented to enhance the physical environment and safety across the home. Facilities improvements included a comprehensive resident room furniture replacement project, involving a home-wide audit to remove unsafe items and the procurement and installation of new furniture such as side tables, overbed tables, and high-back chairs. Additional upgrades included ongoing flooring replacement in both common areas and resident rooms, replacement of resident room blinds, and renovation of dining room pantries with stainless steel cabinetry and countertops. Further enhancements included updates to two kitchen serveries, the purchase of new washers and dryers for the 4th and 5th floors, and the addition of two new ice machines. Entrance sliding doors at Apotex 7 were replaced, a new sukkot was procured for resident use, and the WA Café space was renovated to expand its square footage and incorporate new cooking equipment, further improving shared spaces for residents and staff.

Housekeeping strengthened pest control measures, improved communication with residents, and completed floor refinishing, while also introducing focused inspection audits and increasing staff engagement. More frequent in-person visits were conducted to quickly identify and address concerns, and staff were instructed to complete thorough end-of-shift checks of all assigned rooms to ensure consistent cleanliness and reinforce daily cleaning standards. In parallel, enhancements to safety and emergency preparedness included revised emergency code drills and tabletop exercises, successful completion of a City of Toronto minimum staffing fire drill, and the development of a standardized security constant observation monitoring document to strengthen documentation practices.

Security and Emergency Preparedness

Security and emergency preparedness were enhanced through a series of targeted initiatives aimed at strengthening oversight, response capability, and communication. The site security model was restructured to ensure a consistent 24/7 supervisory presence on the floor, improving oversight across all shifts. In collaboration with the clinical team, a Close Observation Communication Tool was introduced to enhance 1:1 security documentation of responsive behaviours and clarify permitted interventions for security personnel. Partnerships with the security service provider enabled the creation of a dedicated on-site pool of specially trained guards to support 1:1 resident observation, strengthening emergency response capacity across the Apotex and Baycrest campus as a whole. The team also developed the ability to rapidly deploy a digital visitor management system at screening posts in response to local or international events, improving visitor tracking, identification verification, and overall safety. Enhancements to the real time locating system's elopement monitoring workflows improved real-time response to wandering events and reduced time-to-intervention. In addition, standardized communication templates were implemented to support timely and consistent security advisories and incident briefings, and an expanded fire and Code Red education

program, including hands-on digital fire extinguisher training, was delivered to further build staff preparedness and confidence in emergency situations.

Infection Control

The Apotex Infection Prevention and Control team remains committed to advancing the health, safety, and well-being of residents and staff by ensuring practices continue to respond to the evolving risks of infectious diseases. The Apotex participates in point-of-care respiratory testing further reduced the time from symptom onset to testing and initiation of antiviral prophylaxis for influenza, contributing to more timely interventions. These efforts, alongside a reduction in respiratory outbreaks, enhanced outbreak preparedness and response, improved resident safety, and reinforced adherence to best practices in infection prevention and control.

Equity

In late 2025, the Apotex conducted the second *Cultural, Religious and Spiritual Needs Assessment* to understand how residents experience cultural identity, religious life, and spiritual connection and to ensure that programming and care practices reflect the diverse identities of the community. Building on the initial 2022 assessment, the 2025 assessment examined progress, emerging needs, and opportunities for continued improvement. A total of 98 surveys were completed by residents and caregivers, representing all floors in the home. Findings indicate a slightly more diverse religious and linguistic population compared with 2022, while Jewish identity and traditions remain central to resident life. Participation data demonstrate strong engagement in culturally and spiritually meaningful programming, particularly Shabbat and holiday services, concerts, language groups, and arts-based activities.

The results highlight the importance of maintaining both cultural continuity and inclusive supports as resident demographics evolve. Qualitative responses reinforced that cultural atmosphere, religious identity, and relational support remain key components of residents' well-being, with increased emphasis on personalized access to spiritual care, meaningful engagement, and opportunities for connection.

This needs assessment helps the Apotex enhance its understanding of the resident demographic so that care, services and programs are responsive to the diverse needs of all individuals and that residents from different backgrounds can experience belonging, maintain important aspects of identity, and access appropriate spiritual supports. In doing so, the assessment supports equitable care delivery and informs ongoing quality improvement efforts aimed at creating an inclusive environment where all residents can experience dignity, cultural recognition, and meaningful engagement.

Innovation

Over the past year and thanks to external donor support, the Apotex introduced MemoryLane TV, a research-driven streaming platform designed specifically for people living with dementia, including Alzheimer's disease and related memory-loss conditions. Unlike traditional television, Memory Lane TV is plot-free, removing complicated storylines, abrupt scene changes, and overstimulation that can confuse or distress residents. Instead, its programming unfolds gently, providing a multisensory experience through calming visuals, soothing soundscapes, and familiar themes that encourage comfort, engagement, and joy in the present moment.

The library offers a wide range of curated content tailored to support cognitive and emotional well-being: nature and calming ambience, reminiscence and vintage life journeys, short films, art, story time, trivia, health and wellness, sports, music, dance and soundscapes, food and kitchen, culture and diversity, world travel, and virtual walks, bikes, and rides. Memory Lane TV also supports their caregivers, families, and staff. It includes training and educational tools that teach care strategies and help partners feel more confident and supported. By creating calmer environments, sparking reminiscence, and fostering meaningful interaction, Memory Lane TV has been shown to reduce stress, ease behavioral symptoms, and improve quality of life in long-term care.

Appendix A: Progress in meeting 2025/26 Quality Improvement Plan Goals

Measure/Indicator	2024-25 Performance	2025-26 Target	2025-26 Performance
Number of unplanned visits to the emergency department per 100 residents	12.9%	12%	15.9%
Percentage of residents without a psychosis who were given antipsychotic medication	13.8%	15%	19.5%
Percent of residents who responded positively (always + most of the time) to the following statement “I can express my opinions without fear of consequences”	72.2%	80%	76%
Percent of residents with worsened stage 2 to 4 pressure injury	3.8%	3.5%	3.4%
Percent of all Baycrest hospital and long-term care staff who have completed relevant EDI and antiracism education*	46.4%	60%	30.6%

**led corporately not by the long-term care home*

Appendix B: Names of persons who participated in evaluations of improvements

Quality Committee Members

1. M. Seyi-Ajayi	2. Z. Patel
3. C. Muskat	4. P. Tohm
5. L. Marcovici	6. E. San Jose
7. Dr. S. Feldman	8. D. Nelmida
9. S. Harrylal	10. Y. Zeng
11. S. Baijnauth	12. R. Jing
13. T. Patel	14. E. Sitter
15. J. Valleau	16. R. Gavendo
17. B. Ballano	18. O. Pereira
19. D. Bungay	20. H. He
21. D. Benoit	22. L. Socket
23. S. Thompson	24. T. Zhou
25. G. Chung	26. G. Fleishman
27. S. Jackson	28. R. Anandarajah
29. E. Pacson	30. C. Bouchard
31. H. Haqdad	32. D. Lim
33. M. Amare	34. D. Navy

Required Program Committee Members

1. C. Tabones	2. Dr. E. Chong
3. G. Szeto	4. I. Casitas
5. J. Khattab	6. J. Thomasraj
7. K. Li Li	8. L. Njoroge
9. O. Pereira	10. R. David
11. R. San Pedro	12. K. Indarshan
13. B. Cook	14. M. Vedania-Natividad
15. Dr. N. Malek	16. M. Ferman
17. V. Swartz	18. L. Sutherland
19. J. Ferkaa	20. P. Carcamo
21. V. Han	22. M. Murray
23. A. Chang	24. Z. Kassam
25. S. Caycelyn	26. R. Laguna
27. Dr. A. Neata	28. S. Wang
29. J. Rochman-Fowler	30. J. Ashby
31. H. Hansen	32. F. Chen
33. Dr. A Hirani	34. C. Borokas-Agate
35. J. Thomas	36. L. Brosas
37. J. Khattab	38. J. Thomasraj
39. L. Kim	40. S. Simriti

41. S. Au	42. H. Nunuan
43. M. Murray	44. D. Abeles
45. R. Balaban	46. K Gilhooly
47. S. Schachter	48. P. Ankitaben
49. A. Kozhukh	50. K. Gayak
51. T. Wilson	52. R. Yaqoob
53. S. Panjwani	54. N. Wandel