

2025 ANNUAL SUMMARY

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1. Executive Summary

In 2025, Venta Care Centre (VCC) demonstrated continued advancement in clinical governance maturity, workforce development, and system-wide quality improvement, building upon the stabilization achieved in 2023 and the measurable optimization achieved in 2024. The organization further transitioned into a high-reliability care environment characterized by strengthened regulatory alignment, enhanced data-driven decision-making, and sustained improvements in resident outcomes.

A key milestone in 2025 was the successful development and operational readiness of hospice programming, reflecting both organizational expansion and increased capacity to support complex end-of-life care needs. This was complemented by continued increases in Case Mix Index (CMI), indicating appropriate alignment between resident acuity and resource utilization.

Throughout the year, VCC maintained strong occupancy, improved interdisciplinary coordination, and achieved measurable reductions in chemical restraint use while strengthening medication governance systems. Workforce development remained a priority, with significant gains in education completion, onboarding of new staff, and expansion of clinical competencies.

Overall, 2025 reflects a year of consolidation and refinement, where prior system improvements evolved into sustained operational performance and embedded organizational practices aligned with Alberta Continuing Care Health Service Standards.

2. Key Performance Results

2.1 Census, Occupancy & Admissions

VCC maintained stable full occupancy throughout 2025, with a consistent year-end census of 144 residents. This reflects sustained demand for services and continued operational capacity to support a full complement of residents without disruption to care delivery.

A total of 62 new admissions were completed during the year, reflecting stabilized admission flow following earlier system recovery phases.

2.2 Case Mix Index (CMI) & Clinical Complexity

Resident acuity continued to rise in 2025, with Case Mix Index increasing from 1.15–1.16 in Q1 to 1.19 in Q4. This upward trend reflects increased clinical complexity, improved documentation accuracy, and more precise resident classification.

2.3 Care Conferences

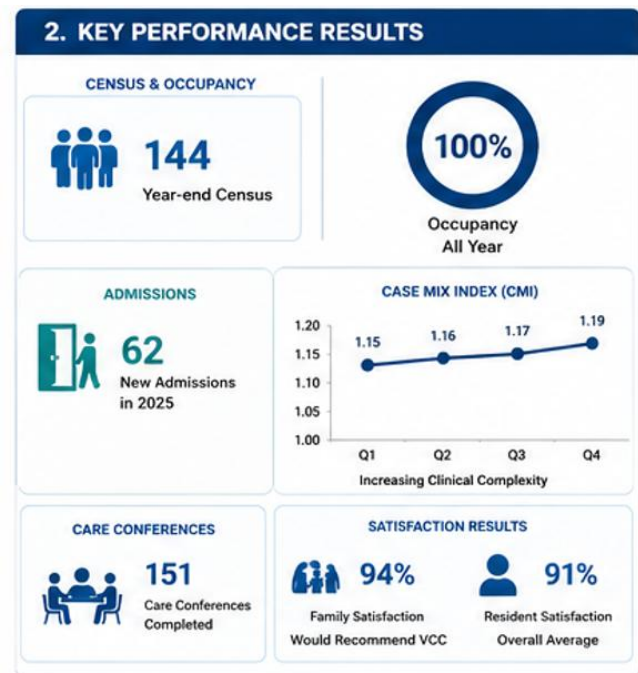
A total of 151 care conferences were completed, supporting interdisciplinary collaboration and individualized care planning. These conferences ensured ongoing review of resident goals, clinical changes, and care interventions.

2.4 Resident & Family Satisfaction

Satisfaction outcomes remained strong throughout 2025:

- Family satisfaction: 94% would recommend VCC
- Resident satisfaction: 91% overall average

Feedback consistently reflected strong satisfaction with communication, staff engagement, and care planning processes.

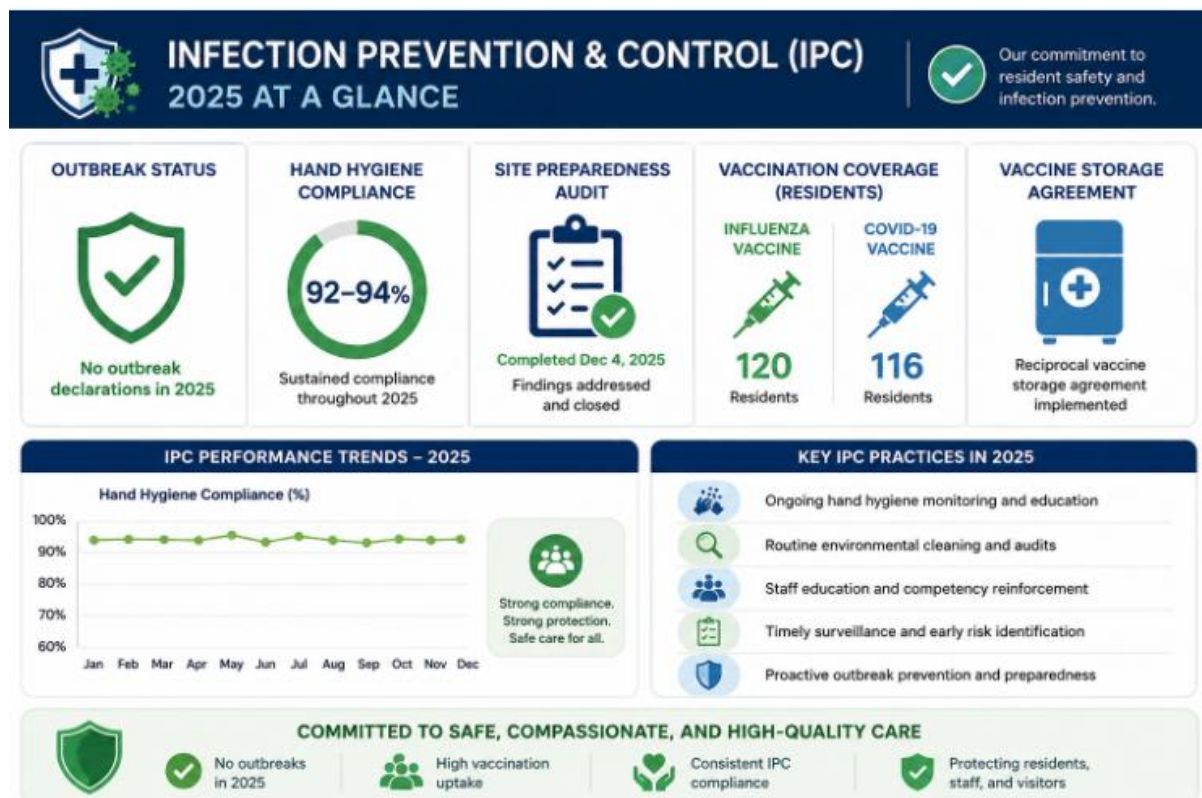


3. Infection Prevention & Control

In 2025, Infection Prevention and Control (IPC) practices at Venta Care Centre remained stable and well maintained, with a continued focus on prevention, surveillance, and regulatory compliance.

Hand hygiene compliance remained strong throughout the year, consistently ranging between 92–94%, reflecting sustained adherence to IPC standards and ongoing staff education.

IPC processes were supported through routine monitoring, environmental hygiene practices, and continued integration of infection prevention expectations into daily clinical workflows. No outbreak activity was recorded during the 2025 reporting period, reflecting effective prevention strategies and system stability.



The Site Preparedness Audit completed in December identified targeted improvement opportunities, which were addressed through corrective action planning and reinforced education.

Vaccination programs remained robust, with 120 residents receiving influenza vaccination and 116 receiving COVID-19 vaccination. A reciprocal vaccine storage agreement was also implemented to strengthen immunization continuity and preparedness.

Overall, IPC performance in 2025 reflects a stable, prevention-focused system with strong compliance outcomes and sustained readiness.

4. Medication Management & Clinical Governance

Medication governance continued to strengthen throughout 2025 through enhanced clinical oversight, standardized medication management processes, and ongoing interdisciplinary review. Leadership maintained a strong focus on medication safety, appropriate prescribing, reduction of unnecessary medications, and continuous quality improvement to support safe, resident-centered care.

4.1 Medication Governance Improvements

Key medication management initiatives implemented throughout 2025 included:

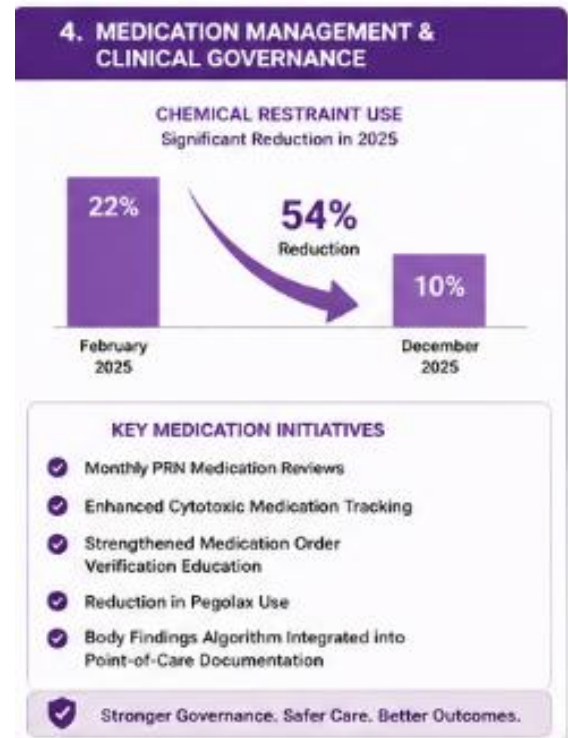
- Monthly PRN medication reviews to evaluate medication appropriateness, effectiveness, and opportunities to reduce unnecessary medication use.
- Enhanced cytotoxic medication tracking systems to improve safe handling practices and documentation accuracy.
- Strengthened medication order verification education to reduce transcription and medication administration risks.
- Reduction in Pegolax prescribing through transition to clinically appropriate alternatives where indicated.
- Integration of a Body Findings Algorithm within PointClickCare to improve assessment consistency, documentation quality, and clinical follow-up.
- Continued interdisciplinary medication reviews involving physicians, pharmacy, nursing, and leadership.

4.2 Medication Safety Monitoring

Medication incidents continued to be reviewed through the organization's incident reporting system and leadership quality review processes. All reported medication events were investigated to identify contributing factors, implement corrective actions, and provide staff education where appropriate.

Leadership monitored:

- Medication incidents and contributing factors.



- Medication administration practices.
- PRN medication utilization.
- Medication reconciliation processes.
- Controlled substance management.
- Physician and pharmacy recommendations.
- Opportunities to strengthen medication safety practices.

4.3 Chemical Restraint Oversight

Appropriate Use of Antipsychotics (AUA) remained an organizational quality priority throughout 2025.

Chemical restraint utilization decreased from 22% in February 2025 to 10% by December 2025, reflecting strengthened interdisciplinary medication reviews, physician collaboration, pharmacist consultation, and implementation of non-pharmacological behavioral management strategies where clinically appropriate.

4.4 Medication Compression / Reconciliation Audits

Medication reconciliation and compression reviews continued throughout 2025, with more than 25% of resident medication profiles undergoing comprehensive review. Increased medication compression activity reflected the growing complexity of resident medication regimens following acute care admissions and higher levels of polypharmacy.

Reviews evaluated:

- Medication appropriateness.
- Therapeutic duplication.
- Polypharmacy risks.
- Medication effectiveness.
- Opportunities for deprescribing.
- Alignment with current clinical best practices.

Recommendations were communicated to attending physicians and the interdisciplinary team where clinically appropriate.

4.5 Outcomes & Analysis

Medication governance continued to evolve from process standardization toward a comprehensive, data-informed clinical governance model. Enhanced monitoring systems,

structured medication reviews, strengthened interdisciplinary collaboration, and ongoing education supported safer medication practices and more appropriate prescribing. The substantial reduction in chemical restraint utilization throughout the year demonstrates continued progress toward evidence-informed, resident-centered medication management.

4.6 Opportunities for Future Reporting

Future annual reports would be strengthened by reporting additional medication safety indicators, including:

- Total number of medication incidents.
- Medication incident rate.
- Near misses.
- Incident severity classifications.
- Number of medication events resulting in resident harm.
- Comparison of medication safety indicators with previous years.

Including these performance measures would allow for more comprehensive evaluation of medication safety initiatives and demonstrate trends over time.

5. Falls, Wounds & Safety Monitoring

Resident safety remained a key organizational priority throughout 2025, with continued emphasis on fall prevention, wound management, early identification of resident risk factors, and interdisciplinary quality improvement. Leadership continued to strengthen resident safety through structured monitoring systems, routine incident reviews, enhanced equipment safety initiatives, and individualized resident interventions.

5.1 Falls Monitoring & Outcomes

A total of 160 resident falls occurred during 2025, representing a 3.0% reduction compared with 165 falls in 2024. Average monthly occupancy remained stable at 145.7 residents, while 106 new resident admissions occurred throughout the year.

Falls were distributed across the facility as follows:

- Unit 100/1200 — 32 falls
- Unit 300/400 — 49 falls
- Unit 1000 — 30 falls
- Unit 2000 — 25 falls
- Unit 2700 — 24 falls

Analysis demonstrated:

- Overall falls decreased by 3% compared with 2024.
- Unit 2000 demonstrated the greatest improvement with a 46.8% reduction in falls.
- Unit 2700 decreased falls by 14.3%.
- Unit 1000 decreased falls by 9%.
- Unit 300/400 experienced the highest number of falls and a 53% increase compared with 2024.
- Unit 100/1200 experienced a 28% increase compared with 2024.

The majority of falls continued to occur during the evening shift (50%), followed by the day shift (30.6%) and night shift (19.4%), identifying evenings as the highest-risk period for resident falls.



5.2 Falls Injury Outcomes

Of the 160 falls reported during 2025:

- 108 (67.5%) resulted in No Apparent Harm.
- 46 (28.8%) resulted in Minimal Harm.
- 4 (2.5%) resulted in Moderate Harm.
- 0 resulted in Severe Harm.
- 0 resulted in Death.

In addition:

- 11 residents required Emergency Department assessment.
- 6 residents required hospital admission following a fall.
- There were no fall-related deaths during 2025.

Overall, although a small proportion of residents required hospital assessment, more than two-thirds of falls resulted in no apparent harm, and there were no severe injuries or fatalities.

5.3 Wound Monitoring

Wound prevalence remained relatively stable throughout 2025, ranging from 37 to 53 active wounds during routine monitoring periods. Standardized wound tracking processes, interdisciplinary wound reviews, and consistent monitoring supported early identification of wound deterioration, timely intervention, and continuity of care.

5.4 Resident Safety Initiatives

Resident safety initiatives implemented throughout 2025 included:

- Routine lift inspections to ensure equipment safety and compliance.
- Introduction of mechanical lift trials to improve resident transfer safety.
- Battery sign-in accountability process for lift equipment.
- Unit-based safety huddles to improve communication and rapid response to resident risks.
- Continued weekly review of falls, wounds, incidents, and resident safety indicators during interdisciplinary Care Meetings.
- Reduction in staff injury rates compared with early 2025 through enhanced safe resident handling practices.

5.5 Leadership Oversight

Leadership continued to review resident safety indicators through Weekly Care Meetings and interdisciplinary quality review processes. Monitoring included:

- Resident falls and injury severity.
- Repeat fallers through the "Catch a Falling Apple" program.
- High-risk units and seasonal trends.
- Shift-specific fall patterns.
- Wound prevalence and healing outcomes.
- Equipment safety and lift compliance.
- Resident acuity and admission trends.
- Workplace injury trends.
- Environmental safety concerns.
- Effectiveness of individualized fall prevention interventions.

5.6 Nursing Interventions

Following routine review of fall trends, nursing and interdisciplinary teams implemented evidence-informed interventions to reduce resident fall risk, including:

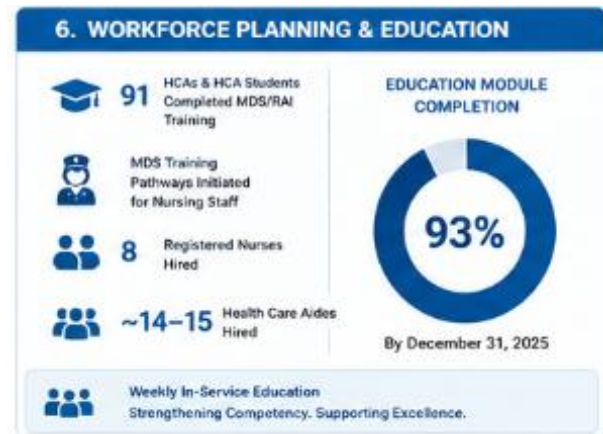
- Ongoing fall prevention education and competency training.
- Regular and post-admission fall risk reassessments.
- Individualized resident-specific fall prevention care plans.
- Scheduled toileting programs and increased evening supervision.
- Pharmacy and physician medication reviews for residents at increased fall risk.
- Staffing adjustments during high-risk periods.
- Routine environmental safety audits.
- Promotion of safe mobility and repositioning.
- Daily nursing safety huddles.
- Weekly interdisciplinary review of all falls and near misses to identify trends and update interventions.

5.7 Outcomes & Analysis

Compared with 2024, Venta Care Centre achieved a modest reduction in overall falls while continuing to maintain low rates of serious injury. Analysis demonstrated that fall risk remained concentrated within specific units and during evening hours rather than being directly associated with new resident admissions. These findings supported continued implementation of targeted unit-specific interventions, enhanced interdisciplinary collaboration, and proactive resident-specific care planning to further reduce falls and improve resident safety throughout the organization.

6. Workforce Planning & Education

Venta Care Centre continued to strengthen workforce capacity throughout 2025 by investing in recruitment, education, competency development, and succession planning. As resident acuity and clinical complexity continued to increase, organizational priorities focused on ensuring adequate staffing resources, enhancing clinical competency, and supporting a knowledgeable and resilient workforce capable of delivering safe, high-quality resident-centered care.



6.1 Workforce Enhancements

To support resident care demands and future service expansion, several workforce initiatives were implemented throughout 2025, including:

- Recruitment of 8 Registered Nurses (RNs).
- Recruitment of approximately 14–15 Health Care Aides (HCAs).
- Workforce planning to support expanded hospice programming and increasing resident acuity.
- Continued investment in staffing stability, succession planning, and interdisciplinary collaboration.

6.2 Staff Education & Professional Development

Education and competency development remained a key organizational priority throughout 2025.

Major education initiatives included:

- 91 Health Care Aides and HCA students completed MDS/RAI education.
- Implementation of structured MDS education pathways for Registered Nurses to strengthen clinical assessment and documentation expertise.
- Weekly clinical in-service education sessions reinforcing:
 - Resident safety.
 - Clinical best practices.
 - Documentation standards.
 - Infection Prevention and Control.

- Regulatory compliance.
- Mandatory online education completion increased to 93% by December 31, 2025, demonstrating continued improvement in organizational education compliance.

These initiatives strengthened clinical knowledge, improved documentation quality, enhanced assessment consistency, and supported evidence-informed resident care.

6.3 Leadership Oversight

Leadership maintained active oversight of workforce performance through routine monitoring of:

- Staffing levels and recruitment.
- Mandatory education completion.
- Clinical competency development.
- MDS/RAI education participation.
- Workforce planning and succession initiatives.
- Staff orientation and onboarding.
- Professional development opportunities.
- Workforce capacity to support increasing resident acuity and hospice program development.

Performance indicators were reviewed regularly to identify workforce needs, support operational planning, and ensure staff possessed the knowledge and competencies required to deliver safe, high-quality care.

6.4 Outcomes & Analysis

Workforce investments throughout 2025 strengthened organizational capacity to respond to increasing resident complexity while supporting future program expansion. Recruitment of additional nursing and Health Care Aide staff improved staffing stability and enhanced readiness for hospice services and evolving resident care needs.

Continued investment in MDS/RAI education, structured learning pathways, and weekly clinical education contributed to improved documentation accuracy, greater consistency in resident assessments, and strengthened interdisciplinary communication. Achievement of a 93% mandatory education completion rate reflects a highly engaged workforce and demonstrates continued organizational commitment to professional development, regulatory compliance, and continuous quality improvement.

6.5 Addressing 2024 Improvement Areas

Building on workforce priorities identified in 2024, Venta Care Centre continued to strengthen workforce development by:

- Expanding recruitment to support increasing resident acuity and future hospice services.
- Increasing participation in MDS/RAI education for both Health Care Aides and Registered Nurses.
- Strengthening mandatory education compliance through ongoing monitoring and weekly education sessions.
- Supporting workforce stability through strategic recruitment and succession planning.
- Enhancing staff competency through continuous professional development and evidence-informed education.

These initiatives further strengthened workforce capacity, improved clinical competency, enhanced documentation quality, and reinforced Venta Care Centre's commitment to maintaining a skilled, engaged, and resident-focused workforce capable of delivering safe, high-quality care.

7. Complaints, Compliments & Feedback

Resident and family feedback remained an important component of Venta Care Centre's continuous quality improvement program throughout 2025. Feedback was gathered through resident and family satisfaction surveys, leadership rounding, care conferences, Resident Council meetings, and the organization's formal concern resolution process. Leadership continued to review feedback regularly to identify trends, implement service improvements, and strengthen resident-centered care.



7.1 Resident & Family Experience

Resident and family satisfaction remained high throughout 2025.

Survey results demonstrated:

- 91% overall resident satisfaction.
- 94% of family respondents indicated they would recommend Venta Care Centre.
- Continued positive feedback regarding staff compassion, responsiveness, and involvement in resident-centered care planning.
- Strong satisfaction with interdisciplinary care conferences and resident engagement initiatives.

7.2 Feedback & Concerns

In addition to satisfaction surveys, residents and family concerns were monitored through the organization's formal feedback and quality improvement processes.

During 2025:

- Nine (9) formal concerns were received.
- 100% of concerns were investigated and resolved in accordance with the organization's complaint resolution process.
- Leadership reviewed all concerns to identify contributing factors, implement corrective actions where appropriate, and identify opportunities for ongoing service improvement.

7.3 Common Feedback Themes

Analysis of resident, family, and leadership feedback identified several recurring themes throughout the year:

- Strong appreciation for interdisciplinary care conferences and collaborative care planning.
- Positive recognition of recreation programming, seasonal events, and resident engagement opportunities.
- Continued appreciation for staff responsiveness, compassion, and professionalism.
- Opportunities to further strengthen communication consistency and provide more timely updates regarding resident care and changes in condition.

7.4 Actions Implemented Following Feedback

Resident and family feedback directly informed several quality improvement initiatives throughout 2025, including:

- Strengthened communication practices between interdisciplinary care teams and families.
- Increased leadership visibility through regular leadership rounding.
- Expansion of resident programming and engagement opportunities.
- Continued focus on improving the timeliness and consistency of communication during resident care changes.
- Ongoing review of resident and family concerns to support continuous quality improvement.

7.5 Outcomes & Analysis

Resident and family feedback continued to demonstrate a high level of satisfaction with the quality of care provided at Venta Care Centre. Strong survey results, combined with the successful resolution of 100% of formal concerns, reflect the organization's commitment to responsive communication, resident-centered care, and continuous quality improvement.

Leadership continued to use resident and family feedback to guide operational planning, strengthen communication practices, enhance resident programming, and improve overall service delivery. This ongoing engagement supports a culture of transparency, collaboration, and continuous improvement while ensuring resident and family perspectives remain central to organizational decision-making.

7.6 Addressing 2024 Improvement Areas

Building on quality improvement initiatives identified in 2024, Venta Care Centre continued to strengthen resident and family engagement by:

- Maintaining high resident and family satisfaction through responsive, resident-centred care.
- Strengthening communication between residents, families, and interdisciplinary care teams.
- Increasing leadership visibility and follow-up regarding resident and family concerns.
- Expanding resident recreation and engagement opportunities.
- Maintaining timely investigation and resolution of resident and family concerns.
- Continuing to use resident and family feedback to guide organizational planning and quality improvement initiatives.

These initiatives reinforce Venta Care Centre's commitment to delivering compassionate, resident-centered care while ensuring resident and family feedback continues to shape organizational improvement and service excellence.

8. Audit Outcomes – 2025

Venta Care Centre maintained a high level of regulatory compliance throughout 2025 through ongoing leadership oversight, continuous quality monitoring, and proactive implementation of corrective actions. Audit findings were routinely reviewed through governance processes to ensure compliance with legislative requirements, strengthen organizational performance, and support continuous quality improvement.

8.1 Audit & Regulatory Outcomes

Key regulatory and audit achievements throughout 2025 included:

- Successfully maintained 96% compliance achieved during the 2024 Partners in Injury Reduction (PIR) / Certificate of Recognition (COR) Re-certification Audit.
- Approved by the Alberta Continuing Care Association to complete a 2025 Maintenance Action Plan in place of a traditional COR maintenance audit, recognizing the organization's strong safety performance and mature occupational health and safety management system.
- Successfully completed 100% of all required actions and deliverables outlined within the 2025 Maintenance Action Plan, maintaining Certificate of Recognition (COR) standing.
- Site Preparedness Audit corrective actions were completed, verified, and formally closed.
- Hospice Licensing successfully obtained during 2025, supporting expansion of specialized end-of-life care services.

8.2 Leadership Oversight

Leadership maintained active oversight of regulatory compliance through:

- Routine review of provincial audit findings and compliance indicators.
- Monitoring implementation and completion of corrective action plans.
- Oversight of occupational health and safety performance.
- Review of Infection Prevention and Control compliance.
- Monitoring organizational readiness for licensing, inspections, and regulatory reviews.

8. AUDIT OUTCOMES – 2025		
	Partners in Injury Reduction (PIR) Audit	96% Compliance
	COR Maintenance Action Plan Audit	100% Compliance
	Site Preparedness Audit Corrective Actions Completed & Closed	
	Hospice Licensing Successfully Granted in 2025	
	Strong Compliance. Trusted Care.	

- Interdisciplinary collaboration to ensure continuous compliance with Continuing Care Health Service Standards.

Performance was routinely reviewed to identify opportunities for improvement, evaluate corrective actions, and maintain ongoing compliance with provincial legislation and organizational standards.

8.3 Outcomes & Analysis

The successful completion of all regulatory requirements throughout 2025 demonstrates the continued maturity of Venta Care Centre's governance and quality management systems. The organization's strong performance during the 2024 PIR/COR Re-certification Audit provided the confidence for Alberta Continuing Care Association to approve a Maintenance Action Plan in place of a traditional maintenance audit. Successful completion of all required deliverables allowed Venta Care Centre to seamlessly maintain its Certificate of Recognition while focusing resources on proactive workplace safety improvements rather than repeat auditing.

Achievement of Hospice Licensing, completion of all Site Preparedness corrective actions, and sustained regulatory compliance further demonstrate the organization's commitment to resident safety, staff safety, operational excellence, and continuous quality improvement. These accomplishments reflect an organization with well-established governance processes, strong leadership oversight, and a proactive approach to regulatory readiness.

8.4 Addressing 2024 Improvement Areas

Building on the strong regulatory performance achieved in 2024, Venta Care Centre continued to strengthen compliance by:

- Maintaining the high standards established during the 2024 PIR/COR Re-certification Audit.
- Successfully completing all requirements of the 2025 Maintenance Action Plan while maintaining Certificate of Recognition status.
- Ensuring all Site Preparedness Audit corrective actions were implemented and sustained.
- Achieving Hospice Licensing through continued compliance with provincial licensing requirements.
- Continuing leadership oversight of audit outcomes, corrective actions, and organizational risk management.
- Embedding regulatory compliance into routine operational monitoring and continuous quality improvement activities.

These initiatives demonstrate Venta Care Centre's continued commitment to maintaining a culture of accountability, regulatory excellence, workplace safety, and continuous quality

improvement while ensuring high-quality care for residents and a safe working environment for staff.

9. Quality Improvement Initiatives

Continuous Quality Improvement (CQI) remained a strategic organizational priority throughout 2025. Building on the quality initiatives implemented over previous years, Venta Care Centre continued to strengthen clinical governance, enhance organizational performance, improve resident safety, and support evidence-informed decision-making through integrated quality monitoring and leadership oversight.

Quality improvement initiatives throughout the year focused on improving documentation accuracy, strengthening interdisciplinary communication, enhancing medication governance, expanding resident safety monitoring, and supporting sustainable operational improvements. Leadership continued to utilize audit findings, quality indicators, incident trend analysis, resident and family feedback, and regulatory standards to guide organizational planning and continuous improvement.

9.1 Quality Improvement Initiatives

Key quality improvement initiatives implemented throughout 2025 included:

- Continued enhancement of electronic documentation systems to improve documentation quality, efficiency, and clinical consistency.
- Expansion of resident safety monitoring through strengthened falls surveillance, wound prevalence reporting, and interdisciplinary review processes.
- Ongoing refinement of medication governance, including medication reconciliation, medication compression, PRN medication review, and chemical restraint monitoring.
- Strengthening Infection Prevention and Control surveillance, outbreak preparedness, and audit readiness.



- Expansion of workforce education, competency monitoring, and mandatory education compliance.
- Continued development of hospice services and organizational readiness following successful hospice licensing.
- Infrastructure improvements supporting resident care, workplace safety, and operational efficiency.
- Continued investment in resident-centered programming, quality-of-life initiatives, and evidence-informed clinical practice.

9.2 Outcomes & Analysis

Quality improvement initiatives implemented throughout 2025 further strengthened Venta Care Centre's integrated quality management framework. Improvements in documentation systems, medication governance, resident safety monitoring, workforce education, and interdisciplinary collaboration contributed to greater consistency in clinical practice, improved regulatory compliance, and enhanced organizational performance.

Continued investment in hospice development, infrastructure modernization, quality monitoring systems, and evidence-informed clinical processes supported improved resident care, strengthened leadership oversight, and enhanced operational efficiency. These initiatives demonstrate the organization's continued progression from individual quality improvement projects toward a sustainable culture of continuous quality improvement embedded throughout everyday operations.

9.3 Addressing 2024 Improvement Areas

Building on opportunities identified in the 2024 Quality Improvement Report, Venta Care Centre continued to strengthen organizational performance by:

- Enhancing documentation accuracy through improved electronic clinical systems and standardized reporting processes.
- Expanding medication governance and medication optimization initiatives to support increasingly complex resident care needs.
- Strengthening falls prevention, wound management, and resident safety monitoring through enhanced data collection, interdisciplinary review, and proactive intervention strategies.
- Continuing to improve Infection Prevention and Control monitoring, outbreak preparedness, and regulatory compliance.
- Increasing workforce competency through expanded education, mandatory training, and leadership development.

- Advancing hospice services, infrastructure improvements, and resident-centered programming to support future organizational growth and service delivery.
- Strengthening leadership oversight through routine review of quality indicators, audit outcomes, resident safety trends, and performance measures.

These initiatives demonstrate Venta Care Centre's continued commitment to embedding continuous quality improvement into all aspects of organizational operations. Through strong leadership, evidence-informed practice, interdisciplinary collaboration, and ongoing evaluation of performance, the organization continues to enhance resident safety, improve clinical outcomes, strengthen regulatory compliance, and deliver high-quality, resident-centered care.

10. Monitoring Risk, Safety & Compliance

Venta Care Centre continued to strengthen organizational risk management throughout 2025 by enhancing clinical safety systems, improving documentation processes, strengthening regulatory compliance, and expanding proactive risk identification strategies. Leadership maintained ongoing oversight of organizational risks through interdisciplinary collaboration, quality monitoring, incident review, and continuous evaluation of clinical and operational performance.



10.1 Risk Mitigation Strategies

Key risk mitigation initiatives implemented throughout 2025 included:

- Expansion of medication safety alerts within electronic documentation systems to strengthen medication safety and reduce the risk of medication errors.
- Continued enhancement of cytotoxic medication tracking to improve handling practices, documentation accuracy, and staff safety.
- Strengthened narcotic monitoring and accountability processes through ongoing auditing and leadership oversight.
- Enhanced oxygen order verification processes to improve documentation accuracy and ensure appropriate clinical interventions.
- Completion of environmental safety improvements, including installation of security fencing and implementation of Site Preparedness corrective actions.
- Implementation of a formal referral tracking system to improve accountability, interdisciplinary communication, and timely follow-up of resident care recommendations.
- Continued review of organizational incidents, audit findings, and quality indicators to support proactive risk identification and mitigation.

10.2 Leadership Oversight

Leadership maintained active oversight of organizational risk through routine review of:

- Resident safety incidents and organizational risk indicators.

- Medication safety trends, narcotic accountability, and high-risk medication monitoring.
- Infection Prevention and Control performance and regulatory compliance.
- Environmental safety, emergency preparedness, and facility security.
- Workplace health and safety indicators, including staff injury trends.
- Quality improvement initiatives, audit outcomes, and corrective action plans.
- Interdisciplinary referrals, documentation quality, and clinical performance indicators.

Performance measures were routinely reviewed to identify emerging risks, evaluate the effectiveness of mitigation strategies, and ensure corrective actions were implemented and sustained.

10.3 Outcomes & Analysis

Risk management initiatives implemented throughout 2025 further strengthened organizational resilience, clinical governance, and resident safety. Improvements to medication safety systems, referral tracking, environmental security, documentation processes, and regulatory monitoring enhanced accountability, reduced operational risk, and improved consistency in clinical practice.

The integration of proactive monitoring systems, interdisciplinary collaboration, and structured leadership oversight supported earlier identification of potential risks and more timely implementation of corrective actions. These initiatives contributed to improved regulatory compliance, strengthened resident and staff safety, and reinforced Venta Care Centre's culture of continuous quality improvement and evidence-informed risk management.

10.4 Addressing 2024 Improvement Areas

Building on improvement opportunities identified in the 2024 Quality Improvement Report, Venta Care Centre continued to strengthen organizational risk management by:

- Enhancing medication safety through expanded electronic safety alerts and strengthened monitoring of high-risk medications.
- Improving documentation quality and interdisciplinary communication through formal referral tracking and standardized clinical processes.
- Strengthening environmental safety through completion of security upgrades and Site Preparedness corrective actions.
- Maintaining proactive leadership oversight of organizational risk indicators, audit findings, and regulatory compliance.
- Continuing to embed risk management into routine operational monitoring and quality improvement activities.

These initiatives demonstrate Venta Care Centre's continued commitment to proactive risk management, strong clinical governance, regulatory compliance, and the delivery of safe, high-quality, resident-centered care. Leadership remains committed to continuously evaluating organizational risks and implementing evidence-informed strategies that support resident safety, workforce safety, and operational excellence.

11. Resource Allocation

Venta Care Centre continued to make strategic investments throughout 2025 to strengthen resident care, modernize infrastructure, enhance workplace safety, and support long-term organizational sustainability. Resource allocation decisions were guided by resident needs, quality improvement priorities, regulatory requirements, workforce development, and the organization's strategic plan. Investments focused on improving the resident living environment, expanding clinical capacity, supporting staff, and strengthening operational efficiency.

11.1 Financial & Operational Investments

Significant investments made throughout 2025 included:

- Allocation of Casino Fundraising proceeds to support resident care initiatives and organizational improvements.
- Utilization of provincial grant funding to enhance resident-centered programming and workplace initiatives.
- Replacement of resident mattresses and furnishings to improve resident comfort, safety, and pressure injury prevention.
- Continued investment in equipment upgrades to support safe, high-quality clinical care.
- Completion of Dining Room renovations to enhance the resident dining experience and quality of life.
- Development and expansion of dedicated Montessori programming space to support cognitive stimulation and meaningful resident engagement.
- Enhancements to the Physiotherapy Room to strengthen rehabilitation services and promote resident mobility.
- Installation of additional security measures to improve resident safety and environmental security.
- Replacement of the commercial dishwasher to improve operational efficiency, infection prevention, and food service operations.

11.2 Outcomes & Analysis

Strategic investments throughout 2025 supported both immediate operational priorities and long-term organizational goals. Infrastructure improvements enhanced resident comfort, safety, rehabilitation services, and quality of life while improving the efficiency of clinical and support services.

Funding from community fundraising initiatives and provincial grants allowed the organization to complete several projects that strengthened resident-centered care while supporting

responsible stewardship of organizational resources. Investments in equipment, resident programming, environmental enhancements, and operational infrastructure further strengthened Venta Care Centre's capacity to respond to increasing resident acuity and evolving service demands.

Collectively, these investments demonstrate the organization's continued commitment to providing a safe, modern, and therapeutic environment while supporting continuous quality improvement, operational excellence, and sustainable service delivery.

11.3 Addressing 2024 Improvement Areas

Building on priorities identified in the 2024 Quality Improvement Report, resource allocation throughout 2025 focused on:

- Continuing modernization of resident care equipment and facility infrastructure.
- Expanding resident-centered programming through dedicated Montessori and rehabilitation spaces.
- Strengthening environmental safety and operational efficiency through targeted infrastructure improvements.
- Supporting quality improvement initiatives through strategic use of grant funding and community fundraising.
- Investing in resources that enhance resident safety, quality of life, workforce support, and long-term organizational sustainability.

These investments reinforce Venta Care Centre's commitment to responsible resource stewardship, continuous quality improvement, and delivering safe, high-quality, resident-centered care while ensuring the organization remains well positioned to meet future resident and operational needs.

12. Workforce Planning & Development

Venta Care Centre continued to strengthen workforce capacity throughout 2025 by investing in recruitment, education, competency development, succession planning, and staff retention. As resident acuity and service complexity continued to increase, organizational priorities focused on ensuring appropriate staffing resources, enhancing clinical competencies, and supporting a resilient workforce capable of delivering safe, high-quality, resident-centered care.

12.1 Workforce Enhancements

To support increasing resident care demands and the expansion of hospice services, several workforce initiatives were implemented throughout 2025, including:

- Recruitment of 8 Registered Nurses (RNs) to strengthen clinical leadership and resident care capacity.
- Recruitment of approximately 14–15 Health Care Aides (HCAs) to support frontline care delivery and staffing stability.
- Continued workforce planning to support hospice service expansion and increasing resident acuity.
- Ongoing succession planning and retention initiatives to strengthen long-term workforce sustainability.

12.2 Education & Professional Development

Education and competency development remained key organizational priorities throughout 2025.

Major education initiatives included:

- 91 Health Care Aides and HCA students successfully completed MDS/RAI education.
- Implementation of structured MDS/RAI education pathways for Registered Nurses to strengthen assessment skills and documentation quality.
- Weekly interdisciplinary in-service education sessions reinforcing:
 - Clinical best practices.
 - Resident safety.
 - Infection Prevention and Control.
 - Documentation standards.
 - Regulatory compliance.
- Mandatory online education completion increased to 93% by December 31, 2025, reflecting strengthened accountability and improved monitoring of education compliance.

These initiatives strengthened clinical competency, improved documentation consistency, enhanced interdisciplinary collaboration, and supported evidence-informed resident care.

12.3 Leadership Oversight

Leadership maintained active oversight of workforce performance through routine monitoring of:

- Staffing recruitment and workforce capacity.
- Mandatory education completion and competency development.
- MDS/RAI education participation and documentation quality.
- Staff orientation and onboarding.
- Professional development initiatives.
- Workforce planning, succession planning, and retention strategies.
- Alignment of staffing resources with resident acuity, hospice expansion, and operational priorities.

Performance indicators were routinely reviewed to identify workforce needs, support operational planning, and ensure staff possessed the knowledge, skills, and competencies required to deliver safe, high-quality resident care.

12.4 Outcomes & Analysis

Workforce investments throughout 2025 strengthened organizational capacity to respond to increasing resident complexity while supporting future service expansion. Recruitment of additional nursing and Health Care Aide staff improved staffing stability and enhanced readiness for hospice services and evolving resident care needs.

Continued investment in MDS/RAI education, structured learning pathways, weekly clinical education sessions, and strengthened education compliance contributed to improved documentation quality, enhanced clinical assessment skills, and greater consistency in resident care planning. Achievement of a 93% mandatory education completion rate demonstrates a highly engaged workforce and reflects Venta Care Centre's ongoing commitment to professional development, regulatory compliance, workforce excellence, and continuous quality improvement.

12.5 Addressing 2024 Improvement Areas

Building on workforce priorities identified in the 2024 Quality Improvement Report, Venta Care Centre continued to strengthen workforce development by:

- Expanding recruitment to support increasing resident acuity and hospice program implementation.

- Increasing participation in MDS/RAI education for both Health Care Aides and Registered Nurses.
- Strengthening mandatory education compliance through enhanced monitoring and ongoing interdisciplinary education.
- Supporting workforce stability through succession planning, retention initiatives, and strategic recruitment.
- Enhancing clinical competency through continuous professional development, evidence-informed education, and leadership support.

These initiatives further strengthened workforce capacity, improved clinical competency, enhanced documentation quality, and reinforced Venta Care Centre's commitment to maintaining a skilled, knowledgeable, and resident-focused workforce capable of delivering safe, high-quality, resident-centered care.

13. Conclusion

For the reporting period of January 1 to December 31, 2025, Venta Care Centre demonstrated continued advancement in clinical governance, regulatory compliance, organizational resilience, and quality management maturity. Building upon the stabilization achieved in 2022, the operational recovery realized in 2023, and the systems optimization completed in 2024, the organization continued its progression toward a fully integrated, data-informed, and resident-centered model of care.

Throughout 2025, leadership maintained a strong focus on continuous quality improvement, proactive risk management, interdisciplinary collaboration, and evidence-informed decision-making. Enhanced monitoring systems, standardized clinical processes, and structured governance reviews strengthened medication management, resident safety, Infection Prevention and Control, workforce competency, documentation quality, and organizational accountability.

Significant progress was achieved across key clinical and operational domains. Medication governance continued to mature through structured interdisciplinary review, medication reconciliation and compression activities, enhanced monitoring systems, and a sustained reduction in chemical restraint utilization from 22% in February to 10% by December 2025. Resident safety monitoring advanced through strengthened falls prevention strategies, wound surveillance, lift safety processes, daily safety huddles, and regular interdisciplinary review. These initiatives contributed to a reduction in overall falls compared with 2024, while maintaining zero severe fall-related injuries and zero fall-related deaths.

Workforce development remained central to organizational performance. Recruitment of additional Registered Nurses and Health Care Aides strengthened staffing capacity and supported increasing resident acuity. Expanded education initiatives resulted in 91 Health Care Aides and HCA students completing MDS/RAI education, while mandatory education completion reached 93% by year-end. These achievements strengthened documentation accuracy, clinical competency, interdisciplinary communication, and organizational readiness for future service expansion.

A major organizational milestone in 2025 was the successful achievement of Hospice Licensing. This accomplishment reflects the organization's readiness to expand its continuum of care and provide more specialized, compassionate, and coordinated end-of-life services. Hospice development represents an important next stage in Venta Care Centre's strategic growth, supporting residents and families through comfort-focused care, symptom management, psychosocial support, dignity, and meaningful family involvement.

Looking forward, hospice implementation will require continued attention to workforce readiness, palliative education, interdisciplinary collaboration, medication and symptom-management protocols, family communication, environmental readiness, and evaluation of resident and family outcomes. Venta Care Centre is committed to embedding hospice services

within its existing quality and safety framework so that the program is sustainable, evidence-informed, and aligned with the organization's broader commitment to resident-centered care.

Regulatory and audit performance remained strong throughout 2025. The organization maintained its 96% PIR/COR performance, completed 100% of the 2025 COR Maintenance Action Plan, closed all Site Preparedness corrective actions, and sustained regulatory readiness through routine leadership oversight and quality monitoring. These outcomes reflect a mature compliance framework in which audit findings are not treated as isolated events, but are incorporated into ongoing education, policy review, risk mitigation, and operational improvement.

Resident and family engagement continued to inform organizational planning. High satisfaction results, timely resolution of formal concerns, interdisciplinary care conferences, Resident Council involvement, and leadership follow-up supported a culture of transparency, partnership, and responsiveness. Feedback was used to strengthen communication, improve resident programming, and guide service-delivery decisions.

Overall, 2025 represents a year of consolidation, refinement, and measurable organizational maturity. Quality improvement has become increasingly embedded within everyday practice, supported by stronger data systems, clearer accountability, interdisciplinary review, and proactive leadership oversight. The organization has moved beyond implementing individual improvements toward sustaining an integrated quality-management framework focused on outcomes, learning, and continuous advancement.

As Venta Care Centre prepares for future accreditation activities, the organization remains committed to demonstrating alignment with recognized principles of quality, safety, governance, resident- and family-centered care, workforce competency, and continuous improvement. Next steps will include strengthening performance measurement, improving the consistency of outcome reporting, maintaining audit readiness, evaluating the effectiveness of hospice services, and ensuring that quality initiatives are sustained across all departments.

Venta Care Centre will continue working toward accreditation excellence by:

- Embedding continuous quality improvement into daily clinical and operational practice.
- Strengthening measurable outcomes and year-over-year performance analysis.
- Advancing resident- and family-centered care through partnership and shared decision-making.
- Maintaining strong governance, risk management, and regulatory compliance.
- Supporting workforce education, competency, succession planning, and leadership development.

- Expanding hospice services through structured implementation, evaluation, and interdisciplinary oversight.
- Using data, audit findings, incidents, and feedback to guide evidence-informed improvement.
- Promoting a culture of safety, accountability, learning, and service excellence.

Through continued investment in people, systems, clinical practice, and organizational leadership, Venta Care Centre is well positioned to enter its next phase of development. The organization looks forward to expanding hospice services, strengthening accreditation readiness, and building upon the progress achieved in 2025 while continuing to deliver safe, compassionate, high-quality, resident-centered care for every resident, every day.

13. CONCLUSION



Stronger Clinical Governance & Regulatory Compliance

Maintained high standards of care, safety, and regulatory excellence.



Improved Resident Safety & Outcomes

Enhanced safety systems and quality initiatives led to better resident outcomes.



Skilled Workforce & Education Excellence

Invested in our people through recruitment, training, and ongoing professional growth.



Successful Hospice Licensing & Service Expansion

Achieved hospice licensing and expanded services to meet evolving resident needs.



Data-Informed, Resident-Centered Care

Used data and resident feedback to drive continuous improvement and compassionate care.



2025 reflects a year of consolidation, refinement, and measurable progress.

Through teamwork, accountability, and a commitment to excellence, we continue to deliver high-quality, compassionate care and build a stronger future for our residents, families, staff, and community—every day.



Stronger Today. Better Tomorrow.