

## Community Demographics

Community Name: Harmony Hills Community

Street Address: O'Connor, 1800 O'Connor Drive building 1, North York, ON M4A 1W7

Phone Number: (416) 285-1411

Quality Lead: Vilma Bugarin, Executive Director

## Continuous Quality Improvement Initiative Report

### 2022-23 Quality Improvement Initiative

In 2022/23, Harmony Hills Community chose to focus on the percentage of LTC residents without psychosis who were given antipsychotic medication for its CQI initiative. Harmony Hills Community set a 5% reduction target to achieve a performance of 14.61% on this indicator, from 15.38%. Harmony Hills Community's current performance on this indicator is 16.89%. A detailed summary of our change ideas and lessons learned is available on the Ontario Health's Quality Improvement Plan (QIP) publicly accessible pages.

### 2023-24 Priority Areas for Quality Improvement

Harmony Hills Community priority areas for quality improvement for the year are:

1. Resident and Family Satisfaction
2. Our Ontario Health QIP Indicator: percentage of LTC residents without psychosis who were given antipsychotic medication

Sienna Senior Living strives to continuously monitor and improve resident and family satisfaction and staff engagement year over year. In response to feedback, specific action plans are developed and shared with residents, families, and staff. Harmony Hills Community completed the annual resident and family satisfaction surveys from September 14-28, 2022. Harmony Hills Community achieved 90% for overall resident satisfaction and 88% for overall family satisfaction. The results were shared with our resident council January 23, 2023 and family council January 19, 2023 and their feedback was sought in the development of the strategies to improve overall satisfaction (see Table 1).

Sienna Senior Living Communities use QIPs to help us prioritize our improvement projects and this year the quality committee has chosen percentage of LTC residents without psychosis who were given antipsychotic medication for its CQI initiative (see

table 2). In addition to the QIP, our community uses our internal operational plan to help prioritize and plan improvements for key indicators.

## Policies, Procedures and Protocols That Guide Continuous Quality Improvement

### Quality Improvement Policy, Planning, Monitoring, and Reporting

Sienna Senior Living has a robust Quality & Risk Management Manual that guides our communities through continuous quality improvement activities with a focus on enhancing resident care and achieving positive resident outcomes. The Quality Committee identifies improvement opportunities and sets improvement objectives for the year by considering input from annual program evaluations, operating plan development, review of performance and outcomes using provincial and local data sources, and review of priority indicators released from Ontario Health, and the results of the resident and family satisfaction surveys.

### Continuous Quality Improvement Committee

The Quality Committee oversees all aspects of our continuous quality improvement initiatives and identifies change ideas that will be tested and implemented in collaboration with the interdisciplinary team. CQI initiatives use Plan-Do-Study-Act (PDSA) cycles (rapid implementation, evaluation, and implementation cycles) in line with the Model for Improvement. The Continuous Quality Improvement Committee meets at a routine frequency to monitor key indicators and elicits feedback from key stakeholders including residents and families. Selected change ideas are based on best practices used across Sienna, which are informed by research/literature. Through regular meetings and data review, the organization can confirm whether the changes resulted in improvement and adjust if and where required.

### Accreditation

In the fall of 2022, Sienna Senior Living communities participated in an external quality review for Accreditation. The accreditation process involves self-assessments of quality practices, engagement of our residents, families, and other stakeholders, and an on-site assessment conducted by peer surveyors. Sienna Senior Living was successful in receiving the highest-level award of a 3-year Accreditation from the Commission on Accreditation of Rehabilitation Facilities (CARF).

### Sharing and Reporting

A copy of this Continuous Quality Improvement Initiative Report and the QIP, including the progress report from the 2022/23 QIP, and the workplan for 2023/24, was shared with the Resident Council on May 31, 2023 and Family Council on May 29, 2023. As part of our quarterly reporting schedule, the committee will continually review progress and share updates and outcomes with residents, families, and staff via existing council and team meetings.

## Planned Quality Improvement Initiatives for 2023-24

**Table 1: Resident and Family Satisfaction**

Harmony Hills Community aims to maintain current performance for resident satisfaction at 90.0% and family satisfaction at 88.0%.

Area of Focus	Change Ideas
Dining Experience	<ul style="list-style-type: none"> <li>Harmony Hills cooks and leaders will participate in education with Sienna Senior Living's Executive Chef on enhancing culinary skills in July 2023.</li> <li>Harmony Hills implemented new Sienna standard menus in collaboration with our Executive Chef and with ongoing feedback from residents, which incorporates new cooking processes, recipe enhancements and fresher and higher quality ingredients in May 2023.</li> </ul>
Activities/Social Events	<ul style="list-style-type: none"> <li>Harmony Hills created a café space called the Circle Café in January 2023 and aims to offer weekly café socials throughout 2023.</li> <li>Harmony Hills aims to offer five opportunities each month for residents to engage in large group programs such as performers or social events.</li> </ul>

**Table 2: QIP Indicator: Percentage of LTC residents without psychosis who were given antipsychotic medication**

Harmony Hills Community has set a 5.2% improvement target to achieve a performance of 16.0% on this indicator, from 16.89%.

Change Ideas	Process Measure	Target for 2023-24
1. Review of the antipsychotic medication cohort	Number of residents in the antipsychotic medication cohort reviewed monthly.	Harmony Hills aims to review 2 residents in the antipsychotic medication cohort each month.
2. Increase the use of non-pharmacological interventions for residents with responsive behaviours	Percentage of residents in the antipsychotic cohort with non-pharmacological interventions included in their care plan.	100% of residents in the antipsychotic cohort will have non-pharmacological interventions included in their care plan by September 30, 2023.
3. Offer Gentle Persuasive Approach (GPA) to front-line staff.	Number of front-line staff trained on GPA.	Harmony Hills will train 20 front-line staff on GPA by December 31, 2023.