

2025/26 Continuous Quality Improvement (CQI) Initiative Report

Community Demographics

Community Name: Langstaff Square Community

Street Address: 170 Red Maple Rd, Richmond Hill, ON L4B 4T8

Phone Number: (905) 731-2273

Quality Lead: Deniese Johnson, Executive Director

2024–25 Quality Improvement Initiatives

In 2024–25, Langstaff Square focused on reducing avoidable ED visits and improving Resident and Family Satisfaction as part of its CQI initiatives.

The target was to improve performance on avoidable ED visits from 26.05% to 24.75%. Current performance stands at 31.40%. A summary of change ideas and their results is provided in Table 1.

Additionally, the community aimed to raise the combined Net Promoter Score (NPS) for Resident and Family Satisfaction by 1 point from the 2023 score of 19.00. In 2024, Langstaff Square achieved an NPS of 25.00. The action plan and its outcomes are also summarized in Table 1.

2025–26 Priority Areas for Quality Improvement

Sienna Senior Living communities use Ontario Health’s QIP to identify and prioritize quality improvement initiatives. This year, Langstaff Square selected Resident and Family Satisfaction (see Table 2) and antipsychotic reduction (see Table 3) as focus areas. These priorities are also reflected in the community’s internal operational plan.

Posted: June 30, 2025.

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. Resident & Family Satisfaction Surveys were conducted for each resident and family over the course of the year between January 1, 2024 – December 31, 2024; per our practice, we offer each resident and family member the opportunity to participate in a satisfaction survey twice each year.

In 2024, Langstaff Square achieved an NPS of 20.00 for resident satisfaction and an NPS of 32.00 for family satisfaction. The results were shared with our resident council on March 18, 2025, family council on March 18, 2025, and team members through town halls on March 19, 2025. Feedback from the residents, family, and team member stakeholders was used to develop strategies to improve overall resident and family satisfaction.

Additionally, Langstaff Square's annual Operational Planning Day will be held on July 22, 2025, and will include residents, team members, and the management team. During Operational Planning, resident and family satisfaction results and other clinical indicators were shared and feedback from stakeholders was sought in the development of improvement strategies.

Resident and Family Satisfaction Survey

Sienna Senior Living's innovative resident and family satisfaction survey improves our ability to incorporate feedback into our day-to-day culture. We've worked with experts to create surveys that are more accessible for people living in long-term care. Resident and Family councils from each Sienna Senior Living Community were consulted and involved in the creation of the new survey. They are shorter, intended to occur more frequently, and designed to capture a true picture of your experience and what you define as important. The survey results include an overall Net Promoter Score (NPS) that identifies residents' and families' perceptions of our community and how people feel their needs are being met as well as a text analysis that highlights what people have focused on and how we can meet their needs.

Policies, Procedures, and Protocols Guiding Continuous Quality Improvement

Quality Improvement Policy, Planning, Monitoring & 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 manages all continuous quality improvement initiatives and identifies change ideas to be tested and implemented with the interdisciplinary team. CQI initiatives utilize Plan-Do-Study-Act (PDSA) cycles, following the Model for Improvement. The Continuous Quality Improvement Committee meets regularly to monitor key indicators and gathers feedback from stakeholders, including residents and families. Change ideas are based on best practices across Sienna, informed by research and literature. Regular meetings and data reviews help the organization determine if changes result in improvement and adjust as necessary.

Accreditation

In 2025, Sienna Senior Living will undergo an external quality review for accreditation by the Commission on Accreditation of Rehabilitation Facilities (CARF), reaffirming our commitment to delivering high-quality care and services. We were last accredited in Fall 2022, earning CARF's highest-level award: three-year accreditation. The process includes internal self-assessments, engagement with residents, families, and other stakeholders, and an on-site evaluation conducted by peer surveyors.

Sharing and Reporting

A copy of this Continuous Quality Improvement Initiative Report and the QIP, including the progress report from the 2024/25 QIP, and the workplan for 2025/26, was shared with the Resident Council on July 22, 2025, and Family Council on July 22, 2025.

Posted: June 30, 2025.

This was shared with team members on July 22, 2025, through town halls and meetings with team members and it is posted in the homes. 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.

Table 1: 2024–25 Results — QIP and Satisfaction Initiatives

Area of Focus	Previous Performance (2023/24)	Current Performance (2024/25)	Change Ideas	Date of Implementation	Outcomes/Impact
Avoidable ED Visits	25.05%	31.40%	Langstaff Square will utilize SIM mannequins to improve the clinical assessment skills of registered staff.	December 16, 27, 18, 30 & 31	SIM mannequin education helped improve the clinical skills of the registered staff.
			Interdisciplinary Team, ADOCs and registered staff will conduct weekly clinical rounds in each resident home area; identifying and reviewing residents that have experienced a change in health status.	January 6 th , 2025, and weekly thereafter	This change idea helped the team to work collaboratively.
Resident and Family Satisfaction	Resident NPS: 25.00 Family NPS: 36.00	Resident NPS: 20.00 Family NPS: 32.00	Langstaff Square aims to improve food quality to improve resident and family satisfaction.	Surveys conducted monthly, analysis was ongoing throughout 2024.	Concerns regarding food have decreased, as evidenced by the reduction in food-related concerns expressed in the resident survey. To further improve satisfaction, we have offered residents more food events.

Area of Focus	Previous Performance (2023/24)	Current Performance (2024/25)	Change Ideas	Date of Implementation	Outcomes/Impact
			Enhance daily social experience (programs/activities) offered at Langstaff Square to improve resident and family satisfaction.	November 2024	10% of the new program focused on holistic resident care—culturally, emotionally, physically, and spiritually—has been implemented, resulting in an increase in participation.
			Langstaff Square aims to improve communication with residents and families.	December 31, 2024.	75% of team members have completed the 'Families in Distress' education program.

Table 2: 2025/26 Resident and Family Satisfaction

Langstaff Square aims to improve the combined Net Promoter Score for resident and family satisfaction from 25.00 to 26.00.

Change Ideas	Process Measure	Target for 2025/26
Langstaff Square Community aims to improve food quality and resident experience by offering opportunity for residents to be involved in menu planning	1. Number of Menufest Events Held. 2. Number of Close the Loop Calls attended by the leadership team with Sienna Senior Living Support Services.	1. Langstaff Square Community will hold 1 Menufest events in 2025. 2. Langstaff Square Community will attend 2 close the loop calls
Langstaff Square Community aims to improve food quality and resident experience by implementing Sienna Standard Menus.	Completion of quarterly Sienna Dining Audits to confirm adherence with Sienna Standard Menus.	Langstaff Square Community aims to complete all quarterly Sienna Dining Audits throughout 2025.

Table 3: 2025/26 QIP Indicator – antipsychotic use

Langstaff Square aims to improve antipsychotic use from the current performance of 23.09% to 22.63%.

Change Ideas	Process Measure	Target for 2025/26
Langstaff Square Community will form an interdisciplinary committee to review antipsychotic usage.	The number of Antipsychotic Reduction team meetings.	Langstaff Square Community will conduct 12 Antipsychotic Reduction team meetings in 2025.
Langstaff Square Community will train team members on the Gentle Persuasive Approach.	Number of team members who complete the iGPA modules.	Langstaff Square Community will have 30 team members complete the iGPA modules in 2025.