

# 2025/26 Continuous Quality Improvement (CQI) Initiative Report

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## **Community Demographics**

Community Name: Villa Santa Maria Community

Street Address: 5400 Steels Avenue West Woodbridge, ON L4L 9S1

Phone Number: 905 856 7200

Quality Lead: Lora Monaco, Executive Director

## **2024–25 Quality Improvement Initiatives**

In 2024–25, Villa Santa Maria Community focused on the following QIP performance indicators: ED Visits, Antipsychotics Use without Diagnosis of psychosis and Resident and Family Satisfaction as part of its CQI initiatives.

The target for ED visits was to improve performance on the indicator from 43.87% to 42.77%. Current performance stands at 27.24%. A summary of change ideas and their results is provided in Table 1.

The target for antipsychotic usage without a diagnosis was to improve performance from 26.16% to 25.63 %. Current performance stands at 25.92%. 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 25.00. In 2024, achieved an NPS of 10.00. The action plan and its outcomes are also summarized in Table 1.

Posted: June 30, 2025.

## **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, Villa Santa Maria Community selected Resident and Family Satisfaction (see Table 2) and Antipsychotic Usage for this CQI Initiatives (see Table 3) as focus areas. These priorities are also reflected in the community's internal operational plan.

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, Villa Santa Maria Community achieved an NPS of 21.00 for resident satisfaction and an NPS of -2.00 for family satisfaction. The results were shared with our resident council on June 24, 2025, family council on June 26, 2025, and team members through town halls on June 18, 2025. Feedback from the residents, family, and team member stakeholders was used to develop strategies to improve overall resident and family satisfaction.

Additionally, Villa Santa Maria Community's annual Operational Planning Day was held on April 22, 2025 and included 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 have 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 work plan for 2025/26, was shared with the Resident Council on June 24, 2025 and Family Council on June 26, 2025.

Posted: June 30, 2025.

This was shared with team members on June 18, 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**

<b>Area of Focus</b>	<b>Previous Performance (2023/24)</b>	<b>Current Performance (2024/25)</b>	<b>Change Ideas</b>	<b>Date of Implementation</b>	<b>Outcomes/Impact</b>
Percentage of LTC residents without psychosis who were given antipsychotic medication	26.16%	25.92%	Inter Professional team at Villa Santa Maria Community to complete the quarterly medication review for residents using antipsychotic medications without the diagnosis of psychosis by September 30, 2024.	Resident's medications were reviewed quarterly and as needed through 2024.	Villa Santa Maria Community has implemented the process to involve the Inter Professional team including the BSO Lead for quarterly medication reviews.
			Improve the use of the Gentle Persuasive Approach at Villa Santa Maria by training 60 team members.	GPA in services were held on: <ul style="list-style-type: none"> <li>• June 19, 2024</li> <li>• August 15, 2024</li> <li>• Sept 11, 2024</li> <li>• Sept 13, 2024</li> <li>• Sept 18, 2024</li> <li>• Feb 27, 2025</li> <li>• March 20, 2025</li> <li>• Apr 21, 2025</li> <li>• May 22, 2025</li> </ul>	40 Team Members were trained on GPA in 2024.

Area of Focus	Previous Performance (2023/24)	Current Performance (2024/25)	Change Ideas	Date of Implementation	Outcomes/Impact
			Utilize quarterly PAC Committee and biannual Continuous Quality Improvement Committee meetings as a forum to discuss reducing antipsychotic medications initiative.	Meetings were held in:  February 2025  August 2025	This process improved the inter professional approach to reviewing antipsychotic medications.
			Increase collaboration with internal and external stakeholders by involving Villa Santa Maria Community partners in behaviours rounds once per month.	BSO mobile team referral process continued in 2024 for residents with responsive expressions.	Villa Santa Maria Community partners were involved in behavioural rounds in 2024 to assist residents with responsive expressions management and interventions.
Resident and Family Satisfaction	Resident NPS: 46.00  Family NPS: -7.00	Resident NPS: 21.00  Family NPS: -2.00	Villa Santa Maria Community held the annual “Menufest” to showcase new menu items and food choices for the residents and their families.	March 20, 2024	Residents enjoyed the items served for menu fest. Few items like lemon herb baked chicken, herbed rice and shrimp added to the menu.
			Residents, family members and staff to participated in Taste	April - May 2024	Taste panels occurred during lunch with

Area of Focus	Previous Performance (2023/24)	Current Performance (2024/25)	Change Ideas	Date of Implementation	Outcomes/Impact
			Panel Activity to review food taste and offer feedback for improvement from April - May 2024		opportunities for residents, family members and team members to provide feedback.
			Villa Santa Maria Community cooks participate in education with Sienna Senior Living's Executive Chef on enhancing culinary skills.	February 02, 2024.	Increased knowledge for the cooks which resulted in improved quality of cooking meals and assurance of recipes being followed. Ongoing monitoring quality upon receiving and recipe test for best outcomes to avoid overcooking.
			Villa Santa Maria will implement daily dining huddles	Spring 2025	Daily dining huddles implemented in collaboration with inter professional team
ED Visits	43.87%	27.24%	Improve registered staff capacity and confidence by enhancing physical assessment skills	April 10, 2024	13 registered team members were trained on physical assessment skills.
			Monthly tracking, trending, and analysis of ED transfer data.	Monthly starting April 2024.	100% of ED transfers were reviewed by team monthly during Resident Safety Meetings,

Area of Focus	Previous Performance (2023/24)	Current Performance (2024/25)	Change Ideas	Date of Implementation	Outcomes/Impact
					quarterly at Leadership and Quality, CQI, PAC Meetings.
			Retrain team members on the use of the SBAR tool.	March 14, 2024 May 9, 2024 May 30, 2024 October 10, 2024 November 14, 2024	In 2024 NP in house conducted education to registered staff on SBAR tool during Nursing Practice Meetings, Nursing High Risk reports. As planned, 80% of nurses were trained on SBAR tool.

**Table 2: 2025/26 Resident and Family Satisfaction**

Villa Santa Maria Community aims to improve the combined Net Promoter Score for resident and family satisfaction from 10.00 to 11.00.

Change Ideas	Process Measure	Target for 2025/26
1) Villa Santa Maria aims to improve the dining experience by elevating collaboration in the dining room.	Percentage of meals where a dining huddle with team members is held post-menu each day.	Villa Santa Maria aims to hold Dining Huddles at 100% of weekday lunches throughout 2025 to improve the dining experience of our residents
2) Villa Santa Maria aims to improve food quality by offering opportunities for residents to be involved in menu planning.	Number of Menufest events held.	Villa Santa Maria will hold 1 Menufest events in 2025.

**Table 3: 2025/26 QIP Indicator: Antipsychotic Usage**

Villa Santa Maria Community aims to improve the percentage of residents given antipsychotics without a diagnosis from the current performance of 25.92 % to 25.40%.

Change Ideas	Process Measure	Target for 2025/26
Utilize antipsychotics tracking tools on admission to assess potential to taper or discontinue antipsychotic medications without diagnosis of psychosis	Percentage of new moved in residents on antipsychotic medications who are assessed on admission using the antipsychotic tracking tool.	100% of new moved in residents on antipsychotic medications will be assessed utilizing the antipsychotic tracking tool.
Increase the number of team member utilizing the GPA (Gentle Persuasive Approach)	Number of team members trained on GPA	Villa Santa Maria will train 60 team members on GPA by December 31, 2025