

Community Demographics

Community Name: Secord Trails Community

Street Address: 263 Wonham Street South, Ingersoll, ON N5C 3P6

Phone Number: (519) 485-3920

Quality Lead: Annette Sprentall, Executive Director

Continuous Quality Improvement Initiative Report

2022-23 Quality Improvement Initiative

In 2022/23, Secord Trails Community chose to focus on the number of ED visits for a modified list of ambulatory care-sensitive conditions per 100 LTC residents for its CQI initiative. Secord Trails Community set a 2.5% reduction target to achieve a performance of 28.9% on this indicator, from 29.63%. Secord Trails Community's current performance on this indicator is 26.19%. 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

Secord Trails Community's 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. Secord Trails Community completed the annual resident and family satisfaction surveys from September 14-28, 2022. Secord Trails Community achieved 80.0% for overall resident satisfaction and 80.0% for overall family satisfaction. The results were shared with our resident council February 23, 2023 and family council February 16, 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 the 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 March 26, 2023 and Family Council on April 20, 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

Secord Trails Community aims to improve resident satisfaction to 83% or higher, and family satisfaction to 84% or higher. This is a 3% improvement for resident satisfaction, from 80%, and a 4% improvement for family satisfaction, from 80.0%.

Area of Focus	Change Ideas
Pleasant Atmosphere During Meals	<ul style="list-style-type: none"> Secord Trails will play music during meal times to improve the environment starting in June 2023.
Laundry Services	<ul style="list-style-type: none"> Secord Trails will implement a new process for labelling resident clothing by September 2023 with the overall goal of reducing the number of missing clothing items by December 31, 2023.
Activities/Social Events	<ul style="list-style-type: none"> Secord Trails will improve the availability and variety of self-directed activities for residents by September 31, 2023.

Table 2: QIP Indicator 1: Percentage of LTC residents without psychosis who were given antipsychotic medication

Secord Trails Community has set a 2.0% improvement target to achieve a performance of 23.3% on this indicator, from 23.79%.

Change Ideas	Process Measure	Target for 2023-24
Implement an antipsychotic reduction team.	Number of antipsychotic reduction team meetings.	The antipsychotic reduction team will meet 6 times in 2023 to review residents with potential for medication reduction.
Improve the use of the Gentle Persuasive Approach (GPA) in the care community.	Percentage of registered staff trained on GPA.	65% of Secord Trails registered staff will complete GPA training by December 2023.
Review the antipsychotic medication cohort.	Number of antipsychotic cohort reviews.	The BSO lead will review the antipsychotic cohort with the physician once a month throughout 2023.