

2024/25 Continuous Quality Improvement Initiative Report

Community Demographics

Community Name: Weston Terrace Community

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Phone Number: (416)-243-8879

Quality Lead: Abiola Awosanya, Senior Executive Director

2023-24 Quality Improvement Initiative Reflection

In 2023/24, Weston Terrace Community chose to focus on reducing antipsychotic usage without a diagnosis of psychosis and Resident and Family Satisfaction for its CQI initiatives.

Weston Terrace Community set a 4.9% reduction target to achieve a performance of 15.45% on this indicator, from 16.26%. Weston Terrace Community's current performance on this indicator is 18.96%. A summary of the change ideas and their results is available in table 1. Weston Terrace Community aimed to improve resident satisfaction to 83%, and family satisfaction to 84%. This was a 4.5% improvement for resident satisfaction, from 79.4% and a 5.0% improvement for family satisfaction, from 80%. Sienna Senior Living implemented a new, innovative survey format on a new platform to measure resident and family satisfaction in 2023. Weston Terrace Community achieved a combined Net Promoter Score (NPS) of 5.00 for Resident and Family Satisfaction. A summary of the action plan and its results for resident and family satisfaction can be found in table 1.

2024-25 Priority Areas for Quality Improvement

Sienna Senior Living Communities use our Ontario Health Quality Improvement Plans (QIPs) to prioritize our improvement projects and this year Weston Terrace Community's quality committee has chosen Resident and Family Satisfaction (see table 2) and antipsychotic usage without a diagnosis of psychosis for its CQI initiatives (see table 3). In addition to the QIP, Weston Terrace Community uses the internal operational plan to help prioritize and plan improvements for key indicators.

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. Weston Terrace Community completed the annual resident and family satisfaction surveys from September 13-27, 2023. Weston Terrace Community achieved an NPS of 5 for resident satisfaction and an NPS of 3 for family satisfaction. The results were

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shared with our resident council January 25, 2024, family council January 9, 2024, and team members through town halls January 25, 2024. Feedback from the resident, family, and team member stakeholders was used to develop strategies to improve overall resident and family satisfaction.

Additionally, Weston Terrace Community's annual Operational Planning Day was held on March 22, 2024, 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'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 focussed on and how we can meet their needs.

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 and 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 2023/24 QIP, and the workplan for 2024/25, was shared with the Resident Council on June 6, 2024, and Family Council on June 11, 2024. This was shared with team members on April 26, 2024, 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.

2023-24 Quality Improvement Initiatives

Table 1: results of 2023/24 Quality Improvement Plan and Resident and Family Satisfaction Improvement Initiatives

Area of Focus	Previous Performance (2022/23)	Current Performance (2023/24)	Change Ideas	Date of Implementation	Outcomes/Impact
Antipsychotic usage without a diagnosis of psychosis	16.26%	18.96%	Collaboration with BSO team to complete the 3-month medication review for residents using antipsychotic medications without the supporting diagnosis. 100% of residents receiving antipsychotic medications without the supporting diagnosis will have a collaborative approach to their 3-month medication review by September 30, 2023.	April 2023	Weston Terrace has implemented the process to involve the BSO in the 3-month medication reviews. Although we have not reached the threshold of involving BSO in 100% of the medication reviews, we have prioritized the residents with high risk behaviours at this time. We will continue to work on this change idea.
			Improve the use of the gentle persuasive approach (GPA).	January 13 & 20, 2023 February 9 & 17, 2023 March 9 & 30, 2023 April 13 & 20, 2023 December 1, 2023 January 16, & January 30, 2024 February 28, 2024	Weston Terrace exceeded our target for training team members on GPA. In 2023 into 2024, over 60 team members completed GPA training.

Area of Focus	Previous Performance (2022/23)	Current Performance (2023/24)	Change Ideas	Date of Implementation	Outcomes/Impact
				March 12, & March 26, 2024	
Resident and Family Satisfaction	Resident: 79.4% Family: 80.0%	Resident NPS: 5.00 Family NPS: 3.00	Weston Terrace will implement new Sienna standard menus in collaboration with our Executive Chef and with ongoing feedback from residents, that incorporate new cooking processes, recipe enhancements and fresher and higher quality ingredients by November 2023.	May 15, 2023 through August 2023	With training completed and procedures in place, this item will continue to be monitored for quality assurance, aided by Taste Panels and feedback from future Resident Council meetings.
			Weston Terrace cooks will participate in education to enhance culinary skills with Sienna Senior Living's Executive Chef in July 2023.	July 7, 2023	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 over-cooking.
			Weston Terrace provided education to cooks on plating different food textures in March 2023.	March 6 & 7, 2023	All cooks have received additional training on the Marquise perfect plating program, process in place for the manger and peer to

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					peer verification that the meals are being produced are following Marquise and Sienna Senior Living standards. Ongoing oversight to ensure sustainability. Visual adds being implemented for use by Dietary Aides and Cooks to ensure consistency.
			Residents and staff to participated in Taste Panel Activity to review food taste and offer feedback for improvement from March – May 2023.	March 7 th through May 2023	Taste panels occurred during lunch and dinner with opportunities for residents, family members and team members to provide feedback.
			All front-line staff will participate in education on the Nurse Call System by October 31, 2023.	October 2023	Team members trained on how to use the new nurse call system inclusive of hand held phones to increase communication and awareness of residents in need of team member assistance via the nurse call system.

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			Improve accessibility to translation supports for residents such as creating communication boards and connecting with translation services throughout 2023.	May 5, 2023	Community has utilized translation services with Multi-Languages Corporation and has developed a partnership. Services have since been utilized to support residents.
			Registered staff and managers to participate in training and certification program on Consent, Capacity, and Substitute Decision Making to further support resident needs and preferences related to care throughout 2023.	October 2023	Leadership team members and Registered team members were trained using the PoET-Prevention of Error-Based Transfers. This will be an ongoing educational opportunity for team members.

Planned Quality Improvement Initiatives for 2024-25

Table 2: QIP Indicator: Resident and Family Satisfaction

Weston Terrace Community aims to improve the combined Net Promoter Score for resident and family satisfaction from 5.00 to 6.00.

Change Ideas	Process Measure	Target for 2024/25
Improving families' knowledge of the opportunities for residents to socialize. Weston Terrace will send out monthly program calendars to families and residents via email to allow increased	Calendars distributed via email monthly	Calendars are sent for all months throughout 2024.

Change Ideas	Process Measure	Target for 2024/25
communication and opportunity for increased socialization.		
Weston Terrace aims to improve communication with residents and families. Weston Terrace will support team members to complete the CLRI Families in Distress education modules. These modules will help team members build empathy skills while interacting with families and residents.	Percentage of team members who complete the CLRI Families in Distress education modules.	100% of clinical staff and leaders will complete the CLRI Families in Distress education modules by December 31, 2024.
Weston Terrace aims to improve the quality of clinical care. Weston Terrace aims to send newly hired and In Charge registered staff to the Humber College Clinical Assessment course throughout 2024 to improve clinical skills and overall quality of care offered.	Number of newly hired and In Charge registered staff who attend Humber College Clinical Assessment Course	Weston Terrace will work to send 6 registered staff to the Humber College Clinical Assessment Course by December 31, 2024.
Weston Terrace aims to improve the quality of clinical care. Weston Terrace has partnered with CareRx to provide education medication safety sessions for registered staff relevant skills and procedures on safe medication administration. Weston Terrace will couple the medication safety education sessions with bimonthly in-house sessions for registered staff	Number of monthly education sessions held.	Weston Terrace aims to hold 2 education sessions with CareRx and 4 in house education sessions throughout 2024.

Table 3: QIP Indicator: Antipsychotic Usage

Weston Terrace Community aims to improve antipsychotic medication usage from the current performance of 18.96% to 18.55%.

Change Ideas	Process Measure	Target for 2024/25
Weston Terrace will utilize the internal GPA coach to improve the utilization of GPA within the community.	Number of staff trained on GPA.	Weston Terrace will train 50 staff on GPA by September 30, 2024.
BSO involvement in LTC resident application reviews. Weston Terrace will involve the internal BSO lead in the review of LTC resident applications to be able to flag residents who are receiving antipsychotic medications without a diagnosis of psychosis and to enable early care planning and assessment of these residents.	Percentage of LTC resident applications reviewed by the internal BSO lead.	The internal BSO lead will review 100% of LTC applications for residents who are on antipsychotics without a diagnosis of psychosis or who have behaviours by September 30, 2024.
Collaboration with BSO team to complete the 3-month medication review for residents using antipsychotic medications without the supporting diagnosis.	The percentage of residents receiving antipsychotics medications who have a collaborative approach to their 3-month medication review.	100% of residents with high-risk behaviours who are receiving antipsychotic medications without the supporting diagnosis will have a collaborative approach to their 3-month medication review by September 30, 2024.