



Bradford Valley Care Community  
July 2022 Continuous Quality Improvement  
(CQI)- Interim Report

## **CARE COMMUNITY DEMOGRAPHICS**

### **LOCATION**

Street Address: 2656 6th Line, Bradford ON, L3Z 2A1

Phone Number: 905-952-2270

Quality Lead: Kathy Wheeler, Executive Director

## **CONTINUOUS QUALITY IMPROVEMENT (CQI) DETAILS**

### **Overview**

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.

As part of a comprehensive and integrated process that includes input from annual program evaluations, annual operating plan development, review of performance and outcomes using provincial and local data sources, and review of priority indicators released from Ontario Health, the Quality Committee identifies improvement opportunities and sets improvement objectives for the year.

### **Priority Area**

Quality Improvement Plans (QIPs) help prioritize improvements, and this year the quality committee has chosen Reduction in the Use of Antipsychotics without a Diagnosis of Psychosis for its CQI initiative.

### **Indicator and Goal**

Percentage of LTC residents without psychosis who were given antipsychotic medication in the 7 days preceding their resident assessment.

A 14.81% reduction target has been set to achieve performance of 16.1% on this indicator, from 18.9%. This will enable Bradford Valley Care Community to remain below provincial average and meet corporate average.

### **Oversight**

The Quality Committee oversees all aspects of our QIP and has identified change ideas that will be tested and implemented in collaboration with staff, physicians, and other key stakeholders, using Plan-Do-Study-Act (PDSA) cycles (rapid implementation, evaluation, and implementation cycles, in line with the Model for Improvement). Change ideas were selected 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.

### **Sharing and Reporting**

A detailed QIP, including Narrative and Workplan, is available on Ontario Health's QIP publicly accessible pages. A copy of this interim report was shared at the Resident's and Family Council.

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.