

2024/25 Continuous Quality Improvement Initiative Report

Community Demographics

Community Name: Trillium Community and Retirement Living

Street Address: 800 / 790 Edgar Street, Kingston Ontario, K7M 8S4

Phone Number: 613-547-0040

Quality Lead: Jessica Babcock

2023-24 Quality Improvement Initiatives

In 2023/24, Trillium Community and Retirement Living chose to focus on Antipsychotic Medication and Resident and Family Satisfaction for its CQI initiatives.

Trillium set a 1% reduction target to achieve a performance of 16.45% on this indicator, from 16.62%. Trillium's current performance on this indicator is 19.49%. A summary of the change ideas and their results is available in table 1.

Trillium aimed to improve resident satisfaction to 83%; this was a 10.7% improvement from 75%. Trillium Community aimed to maintain their performance for family satisfaction at 88%. Sienna Senior Living implemented a new, innovative survey format on a new platform to measure resident and family satisfaction in 2023. Trillium achieved a combined Net Promoter Score (NPS) of 28.00 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 Trillium quality committee has chosen Resident and Family Satisfaction (see table 2) and percentage of residents who fell in the last 30 days for its CQI initiatives (see table 3). In addition to the QIP, Trillium 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. Trillium Community and Retirement Living completed the annual resident and family satisfaction surveys from September 13-27, 2023.

Trillium achieved an NPS of 15 for resident satisfaction and an NPS of 45 for family satisfaction. The results were shared with our resident council December 15, 2023, family council January 23, 2024, and team members through our operational planning day on January 18, 2024. Feedback from the resident, family, and team member stakeholders was used to develop strategies to improve overall resident and family satisfaction.

Additionally, Trillium's annual Operational Planning Day was held on February 6, 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 April 19, 2024, and Family Council on April 30, 2024. This was shared with team members on April 18, 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
Percentage of LTC residents without psychosis who were given antipsychotic medication	16.62%	20.4%	LTC application review will focus on identification of responsive behaviours and antipsychotic medication usage for new residents.	Ongoing throughout 2023.	Application review helps with care planning for newly moved-in residents.
			Utilization of the antipsychotic reduction program.	Ongoing throughout 2023.	The antipsychotic reduction program is based on Sienna policy and coordinates Trillium's efforts to review and reduce medication where possible.
			Offer gentle persuasive approach (GPA) training at Trillium Care Community.	Sessions occurred monthly from September to December 2023	38 team members were training in 2023. GPA training helps improve team member's understanding of how to care for residents with dementia.
Resident and Family Satisfaction	Resident: 75% Family: 84%	Resident NPS: 15 Family NPS: 45	Trillium will implement a refreshed 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	October 2023	We have seen an increase in food quality satisfaction 2024 focus will be on atmosphere.

Area of Focus	Previous Performance (2022/23)	Current Performance (2023/24)	Change Ideas	Date of Implementation	Outcomes/Impact
			higher quality ingredients in Spring/Summer 2023.		
			Trillium cooks will participate in education with Sienna Senior Living's Executive Chef on enhanced culinary skills in September 2023.	August 23 & 24, 2023.	Training with the executive chef improved the culinary skills of Trillium's cooks.
			In consultation with residents, Trillium will implement music in the dining rooms to create a more restaurant like atmosphere and pleasurable dining experience by June 2023.	June 2023.	Music in dining rooms has helped improve the ambience during meals.
			In addition to the newsletter, email updates on new initiatives in the Community will be sent to families at least once per month starting in January 2023. These updates will be printed and shared with residents.	Emails were initiated in January 2023 and have continued monthly.	Positive feedback received.

Planned Quality Improvement Initiatives for 2024-25

Table 2: QIP Indicator: Resident and Family Satisfaction

Trillium aims to improve the combined Net Promoter Score for resident and family satisfaction from 28 to 29.

Change Ideas	Process Measure	Target for 2024/25
Operational planning meetings will be held throughout 2024 to gain feedback from residents, families and team members on strategies to reduce unwanted noise in the dining rooms	Feedback in ongoing satisfaction surveys and number of residents, families and team members participating in operational planning meetings.	3 operational planning meetings will be held in 2024
interactive murals will be installed throughout 2024 to enhance the atmosphere as well as support resident way finding and programs throughout the home.	Number of spaces with interactive murals installed.	By the end of 2024 each home area will receive at least one new interactive mural.
Trillium will remove carpets from the court building, repaint the ridge building, and replace damaged furnishings to enhance the physical plant.	number of home areas updated with furniture, paint and carpet removal.	Trillium will have removed all carpet from the home by the end of 2024

Table 3: QIP Indicator: Falls

Trillium aims to improve the percentage of residents who fell from the current performance of 15.93% to 15.30%.

Change Ideas	Process Measure	Target for 2024/25
The nursing leadership team will provide education to registered staff on how to conduct and the importance of post-fall huddles.	Percentage of registered staff who completed education on post-fall huddles.	100% of registered staff will be educated by the end of 2024
Trillium will review medications in collaboration with the CareRX	Percentage of residents who have had 3 or more falls who have their	80% of residents who had 3 or more falls within a month will have medications reviewed by the CareRx Pharmacist.

Change Ideas	Process Measure	Target for 2024/25
Pharmacist for resident who had 3 or more falls per month	medications reviewed by the CareRx pharmacist.	
Trillium will utilize the monthly falls meeting to review the care plans of residents with frequent falls. The recreation team will be involved in developed care planning strategies for residents who have frequent falls.	percentage of residents who have 3 or more falls per month who have had the recreation team involved in care planning.	80% of residents who fall more than 3 times per month will have the recreation team involved in care planning.