

Community Demographics

Community Name: Langstaff Square Community

Street Address: 170 Red Maple Road, Richmond Hill, Ontario, L4B 4T8

Phone Number: (905) 731-2273

Quality Lead: Deniese Johnson, Executive Director

Continuous Quality Improvement Initiative Report

2022-23 Quality Improvement Initiative

In 2022/23, Langstaff Square 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. Langstaff Square Community set a 10% reduction target to achieve a performance of 19.8% on this indicator, from 22%. Langstaff Square Community's current performance on this indicator is 16.58%. 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

Langstaff Square Community's priority areas for quality improvement for the year are:

1. Resident and Family Satisfaction
2. Our Ontario Health QIP Indicator: number of ED visits for a modified list of ambulatory care-sensitive conditions per 100 LTC residents

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. Langstaff Square Community completed the annual resident and family satisfaction surveys from September 14-28, 2022. Langstaff Square Community achieved 88% for overall resident satisfaction and 77% for overall family satisfaction. The results were shared with our resident council January 30, 2023, and family council January 31, 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 number of ED visits for a modified list of ambulatory care-sensitive conditions per 100 LTC residents 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 with the Resident Council on June 22nd, 2023 and Family Council on June 22nd, 2023. The QIP, including the progress report from the 2022/23 QIP, and the work plan for 2023/24, was shared with the Resident Council on January 30th, 2023 and Family Council on January 26th, 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

Langstaff Square Community aims to maintain our resident satisfaction score at 88%. Langstaff Square aims to improve family satisfaction to the Sienna benchmark of 84%.

| Area of Focus | Change Ideas |
|---|--|
| Dining Experience | <ul style="list-style-type: none"> Langstaff Square cooks will participate in education with Sienna Senior Living's Executive Chef on culinary skills in June 2023. Langstaff Square 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 higher quality ingredients within 2023. |
| Communication and Timely Response to Concerns | <ul style="list-style-type: none"> Langstaff Square improved the communication structure for the home areas to the leadership team to shorten response time when concerns arise. This was implemented in January 2023. |
| Physical Environment | <ul style="list-style-type: none"> Langstaff Square is improving the courtyard experience for families and residents to enjoy. These improvements will be complete by July 31, 2023. |

Table 2: QIP Indicator: number of ED visits for a modified list of ambulatory care-sensitive conditions per 100 LTC residents

Langstaff Square Community has set a 1.7% improvement target to achieve a performance of 16.3% on this indicator, from 16.58%.

| Change Ideas | Process Measure | Target for 2023-24 |
|--|--|---|
| 1. Improve access to in-house IV therapy. | Percentage of residents who receive IV therapy in-house. | 80% of residents in-need of IV therapy will be offered access to treatment within the care community by September 30, 2023. |
| 2. Access to in-home Bladder Scanner to support diagnosis of urine retention | Percentage of resident that require bladder scan that receive in-home treatment as needed. | 80% of residents requiring a bladder scan will be treated within the care community by September 30, 2023. |