

## 2024/25 Continuous Quality Improvement Initiative Report

### Community Demographics

Community Name: Muskoka Shores Community

Street Address: 200 Kelly Dr, Gravenhurst, Ontario P1P 1P3

Phone Number: 705-687-3444

Quality Lead: Leslie Watson, Executive Director

### 2023-24 Quality Improvement Initiatives

In 2023/24, Muskoka Shores Community chose to focus on falls in the last 30 days in long-term care and Resident and Family Satisfaction for its CQI initiatives.

Muskoka Shores Community set a 5% improvement target to achieve a performance of 19.57% on the falls in the last 30 days in long-term care indicator, from 20.60%. Muskoka Shores Community's current performance on this indicator is 21.30%. A summary of the change ideas and their results is available in table 1.

Muskoka Shores Community aimed to improve resident satisfaction to 83%, and to maintain the current performance for family satisfaction of 86%. This was a 9.2% improvement for resident satisfaction, from 76%. Sienna Senior Living implemented a new, innovative survey format on a new platform to measure resident and family satisfaction in 2023. Muskoka Shores Community achieved a combined Net Promoter Score (NPS) of 21.00 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 Muskoka Shores Community's quality committee has chosen Resident and Family Satisfaction (see table 2) and falls in the last 30 days in long-term care for its CQI initiatives (see table 3). In addition to the QIP, Muskoka Shores 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. Muskoka

Shores Community completed the annual resident and family satisfaction surveys from September 13-27, 2023. Muskoka Shores Community achieved an NPS of 2.00 for resident satisfaction and an NPS of 39.00 for family satisfaction. The results were shared with our resident council on June 27, 2024, family council on June 27, 2024, and team members through town halls on June 21, 2024. Feedback from the resident, family, and team member stakeholders was used to the develop strategies to improve overall resident and family satisfaction.

Additionally, Muskoka Shores Community's annual Operational Planning Day was held on May 28, 2024, with the management team. During Operational Planning, resident and family satisfaction results and other clinical indicators was 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 27, 2024, and Family Council on June 27, 2024. This was shared with team members on June 21, 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
Falls in the last 30 days in long-term care	20.60%	21.30%	Improve post-fall assessment documentation. Muskoka Shores will educate 50% of the registered staff on completing post-fall assessment education by September 30, 2023.	Continuous process throughout 2023. During registered staff meetings, orientation and as needed.	Muskoka Shores completed education for all registered staff on post-fall assessment documentation. This change idea helped the Muskoka Shores team complete root cause analysis for falls especially for residents with frequent falls
			Re-establish post-fall huddles. 50% of falls will have a post-fall huddle by September 30th, 2023, with an ultimate goal of 100% of falls having a post-fall huddle by March 2024.	Ongoing process throughout 2023.	Muskoka Shores fully implemented post-fall huddles in 2023, 100% of falls have a post-fall huddle as of February 2024. There is further opportunity for improvement by increasing the interprofessional collaboration in post-fall huddles.

Area of Focus	Previous Performance (2022/23)	Current Performance (2023/24)	Change Ideas	Date of Implementation	Outcomes/Impact
Resident and Family Satisfaction	Resident: 76% Family 86%	Resident NPS: 2 Family NPS: 39	Muskoka Shores' cooks will participate in education with Sienna Senior Living's Executive Chef on enhancing culinary skills on July 6th.	July 6, 2023.	Education improved the culinary skills of the Muskoka Shores cooks.
			Muskoka Shores implemented 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 on May 29th, 2023.	May 29, 2023.	New menus incorporate fresher ingredients and positively impact food quality overall.
			Muskoka Shores is refreshing the lobby and visitors' washrooms by painting walls and purchasing new furniture by December 31, 2023.	Deferred until later date.	N/A

## Planned Quality Improvement Initiatives for 2024-25

Table 2: QIP Indicator: Resident and Family Satisfaction

Muskoka Shores Community aims to improve the combined Net Promoter Score for resident and family satisfaction from 21.00 to 22.00.

Change Ideas	Process Measure	Target for 2024/25
Muskoka Shores aims to improve communication with residents and families by supporting team members to complete the CLRI Families in Distress education modules. These modules will help team members build	Percentage of team members who complete the CLRI Families in Distress education modules.	100% of the leadership team will complete the CLRI Families in Distress education modules by December 31, 2024.

<b>Change Ideas</b>	<b>Process Measure</b>	<b>Target for 2024/25</b>
empathy skills while interacting with families and residents		
Muskoka will improve service excellence to improve resident and family satisfaction. Muskoka will fully implement the Sienna Move-in Process including welcome gifts for all newly moved-in residents and check-in calls for the families of newly moved-in residents.	1) Percentage of residents who received a welcome gift. 2) Percentage of residents who have the check-in call process completed.	1) 100% of newly moved-in residents will have welcome gifts given to them throughout 2024. 2) 100% of newly moved-in residents will have the check in call process completed throughout 2024.

**Table 3: QIP Indicator: Percentage of LTC home residents who fell in the 30 days leading up to their assessment.**

Muskoka Shores Community aims to improve the percentage of LTC home residents who fell in the 30 days leading up to their assessment from the current performance of 21.29% to 20.86%.

<b>Change Ideas</b>	<b>Process Measure</b>	<b>Target for 2024/25</b>
Monitoring the alignment to the standard operation procedure for post-fall huddles	Percentage of post-fall huddles that are completed and closed on time.	100% of post-fall huddles will be closed and completed on time throughout 2024.
Improve the details included in the post-fall assessment note.	Percentage of registered staff educated on details in post-fall assessment notes.	50% of registered staff will received education by September 30, 2024.