

2024/25 Continuous Quality Improvement Initiative Report

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

2023-24 Quality Improvement Reflection

In 2023/24, Langstaff Square Community chose to focus on reducing avoidable ED transfers, Resident, and Family Satisfaction for its Continuous Quality Improvement (CQI) initiatives.

Langstaff Square Community set a 1.7% reduction target to achieve a performance of 16.3% on this indicator, from 16.3%. Langstaff Square Community current performance on this indicator is 26.05%. A summary of the change ideas and their results is available in table 1.

Langstaff Square Community aimed to maintain resident satisfaction at 88% and improve family satisfaction to the Sienna benchmark of 84% from 77%. Sienna Senior Living implemented a new, innovative survey format on a new platform to measure resident and family satisfaction in 2023. Langstaff Square Community 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 Langstaff Square Community quality committee has chosen Resident and Family Satisfaction (see table 2) and reducing the rate of unnecessary ED visits for its CQI initiatives (see table 3). In addition to the QIP, Langstaff Square 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. Langstaff

Square Community completed the annual resident and family satisfaction surveys from September 13-27, 2023. Langstaff Square Community achieved an NPS of 25.00 for resident satisfaction and an NPS of 36.00 for family satisfaction. The results were shared with our resident council April 12, 2024, family council April 12, 2024, and team members through town halls on February 7, 2024. Feedback from the resident, family, and team member stakeholders was used to develop strategies to improve overall resident and family satisfaction.

Additionally, Langstaff Square Community Annual Operational Planning Day held on June 21, 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, will be shared with the Resident Council on July 11, 2024, and was shared with Family Council on June 27, 2024. This will be shared with team members through town halls on July 3, 2024, and it is posted in the community. 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
Rate of avoidable ED visits	16.58%	26.05%	Improve access to in-house IV therapy.	Education date was April 25, 2023.	This allowed our residents to receive treatment in-house instead of in the hospital.
			Access to in-home Bladder Scanner to support diagnosis of urine retention.	Education date was April 25, 2023.	This allowed the community to assess and treat residents for a greater number of diagnoses and avoid hospital transfers in many cases.
Resident and Family Satisfaction	Resident: 88%	Resident NPS: 25.00	Langstaff Square cooks will participate in education with Sienna Senior Living's Executive Chef on culinary skills in June 2023.	June 21, 2023.	Training with the executive chef improved the culinary skills of Langstaff's dietary team.
			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.	November 2023	Sienna's standard menus incorporate fresher ingredients and have had a positive impact on food quality.
			Langstaff Square improved the communication structure for the home areas to the leadership team to shorten response time when	January 2023	This change idea has improved how Langstaff is able to respond to and
	Family: 77%	Family NPS: 36.00			

Area of Focus	Previous Performance (2022/23)	Current Performance (2023/24)	Change Ideas	Date of Implementation	Outcomes/Impact
			concerns arise. This was implemented in January 2023.		resolve resident concerns.
			Langstaff Square is improving the courtyard experience for families and residents to enjoy. These improvements will be complete by July 31, 2023.	Completed by July 31, 2024.	The refreshed courtyard has created additional space for residents to socialize with families and friends.

Planned Quality Improvement Initiatives for 2024-25

Table 2: QIP Indicator: Resident and Family Satisfaction

Langstaff Square Community aims to improve the combined Net Promoter Score for resident and family satisfaction from 19.00 to 20.00.

Change Ideas	Process Measure	Target for 2024/25
Langstaff Square aims to improve food quality to improve resident and family satisfaction. Langstaff Square is piloting AI technology called Meal Vision that supports analysis of nutritional value and food temperature. This technology will help Langstaff Square improve food quality.	Number of comments in the Resident Survey that mention food quality or food temperature.	Langstaff square aims to reduce the number of comments on the Resident Survey that mention food quality and temperature to 0 in 2024.
Enhance daily social experience (programs/activities) offered at Langstaff Square to improve resident and family satisfaction. Create and provide programs/activities that caters to the holistic resident, culturally emotionally, physically and spiritually.	% of new programs/activities that caters to the holistic resident, culturally, emotionally, physically and spiritually being offer in 2024.	100% of residents will participate in programs/activities that caters to resident's holistic being- culturally, emotionally, physically and spiritually by December 31, 2024.

Change Ideas	Process Measure	Target for 2024/25
Langstaff Square aims to improve communication with residents and families Langstaff Square 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.

Table 3: QIP Indicator: avoidable ED visits

Langstaff Square Community aims to improve the rate of avoidable ED visits from the current performance of 26.05% to 24.75%

Change Ideas	Process Measure	Target for 2024/25
Langstaff Square will utilize SIM mannequins to improve the clinical assessment skills of registered staff. Scheduled education sessions throughout 2024/25 will be facilitated by our Extended Class RN along with attending Nurse Practitioner. Using the SIM technology, we aim to build confidence and enhance clinical assessment skills of our registered nurses. Schedule care conferences with residents and families to provide health teaching on the benefits of remaining at community vs going to ED	Percentage of staff who complete education using the SIM Mannequin.	90% of full-time and part-time nursing staff will complete education using the SIM mannequin by Nov 30, 2024.
Interdisciplinary Team, ADOCs and registered staff will conduct weekly clinical rounds in each resident home area; identifying and reviewing	Number of weekly clinical rounds completed by Interdisciplinary Team, ADOCs and registered staff that	100% compliance with weekly clinical rounds by October 2024.

Change Ideas	Process Measure	Target for 2024/25
residents that have experienced a change in health status.	identifies resident experiencing change in health status	