

2026/27 Continuous Quality Improvement (CQI) Initiative Report

Community Demographics

Community Name: Cedarvale Lodge Community & Retirement Living

Street Address: 121 Morton Avenue, Keswick, ON L4P 3T5

Phone Number: (905) 476-2656

Quality Lead: Jodi Napper-Campbell, Executive Director

2025–26 Quality Improvement Initiatives

In 2025–26, Cedarvale Lodge Community & Retirement Living focused on reducing falls, reducing antipsychotic medication use without a diagnosis and Resident and Family Satisfaction as part of its CQI initiatives.

The target was to improve performance on the selected percentage of LTC home residents who fell in the 30 days leading up to their assessment from 16.98% to 16.64%. Current performance stands at 14.74%. A summary of change ideas and their results is provided in Table 1.

The target was to improve performance on the selected percentage of LTC residents without psychosis who were given antipsychotic medication in the 7 days preceding their resident assessment from 19.77% to 19.37%. Current performance stands at 23.17%. A summary of change ideas and their results is provided in Table 1.

Additionally, the community aimed to raise the combined Net Promoter Score (NPS) for Resident and Family Satisfaction by 1 point from the 2024 score of 34. In 2025, Cedarvale Lodge Community & Retirement Living achieved an NPS of 50. The action plan and its outcomes are also summarized in Table 1.

Posted: June 30, 2026.

2026–27 Priority Areas for Quality Improvement

Sienna Senior Living communities use Ontario Health’s QIP to identify and prioritize quality improvement initiatives. This year, Cedarvale Lodge Community & Retirement Living selected Resident and Family Satisfaction (see Table 2) and reducing antipsychotic medication use without a diagnosis (see Table 3) as focus areas. These priorities are also reflected in the community’s internal operational plan.

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. Resident & Family Satisfaction Surveys were conducted for each resident and family over the course of the year between January 1, 2025 – December 31, 2025; per our practice, we offer each resident and family member the opportunity to participate in a satisfaction survey twice each year.

In 2026, Long-Term Care operations are focused on a set of initiatives aimed at enhancing resident-centered care and strengthening overall performance. Key initiatives include the Circle Spa, modernization of the Volunteer Program, targeted Dementia Program enhancements, and successful completion of our Accreditation survey and subsequent action planning. Progress is measured through a defined set of outcome indicators, including improvements in resident and family experience as well as quality of life. In addition, the organization is prioritizing employee engagement through values-driven education to support an aligned, empowered workforce.

In 2025, Cedarvale Lodge Community & Retirement Living achieved an NPS of 58 for resident satisfaction and an NPS of 38 for family satisfaction. The results were shared with our resident council on January 8, 2026, family council on May 26, 2026, and team members through town halls on May 28, 2026. Feedback from the residents, family, and team member stakeholders was used to develop strategies to improve overall resident and family satisfaction.

Additionally, Cedarvale Lodge Community & Retirement Living’s annual Operational Planning Day was held on June 4, 2026 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 focused on and how we can meet their needs.

Policies, Procedures, and Protocols Guiding Continuous Quality Improvement

Quality Improvement Policy, Planning, Monitoring & 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 manages all continuous quality improvement initiatives and identifies change ideas to be tested and implemented with the interdisciplinary team. CQI initiatives utilize Plan-Do-Study-Act (PDSA) cycles, following the Model for Improvement. The Continuous Quality Improvement Committee meets regularly to monitor key indicators and gathers feedback from stakeholders, including residents and families. Change ideas are based on best practices across Sienna, informed by research and literature. Regular meetings and data reviews help the organization determine if changes result in improvement and adjust as necessary.

Accreditation

In 2025, Sienna Senior Living underwent an external quality review for accreditation by the Commission on Accreditation of Rehabilitation Facilities (CARF), reaffirming our commitment to delivering high-quality care and services. We earned CARF's

highest-level award: three-year accreditation. The process includes internal self-assessments, engagement with residents, families, and other stakeholders, and an on-site evaluation conducted by peer surveyors.

Sharing and Reporting

A copy of this Continuous Quality Improvement Initiative Report and the 2026/27 QIP was shared with the Resident Council on May 7, 2026 and Family Council on May 26, 2026. They were also shared with team members on May 28, 2026 through town halls and meetings with team members and it is posted in the home. The committee will continually review progress and share updates and outcomes with residents, families, and staff via existing council and team meetings.

Table 1: 2025/26 QIP Results

Area of Focus	Previous Performance (2024/25)	Current Performance (2025/26)	Change Ideas	Date of Implementation	Outcomes/Impact
Falls	16.98%	14.74%	Cedarvale Lodge Community and Retirement Living will engage the interdisciplinary team inclusive of recreation & therapies in care planning for residents with frequent falls.	Completed December 31, 2026	This change idea was implemented in 2025 and the recreation department did set up individual interventions in care plans, including activity bins for all residents deemed high risk for falls.
			Cedarvale Lodge Community and Retirement Living will train frontline Team Members to be falls champions.	Completed September 30, 2026	Six frontline Team Members were trained as falls champions in 2025 to help with supporting falls at Cedarvale Lodge.

Area of Focus	Previous Performance (2024/25)	Current Performance (2025/26)	Change Ideas	Date of Implementation	Outcomes/Impact
Antipsychotic Use	19.77%	23.17%	Cedarvale Lodge Community and Retirement Living will train team members on the Gentle Persuasive Approach.	Completed May 2026	In May 2025, Cedarvale Lodge had one Team Member trained as a GPA Coach. Sessions were held throughout 2025 to start training frontline Team Members in GPA.
			Cedarvale Lodge Community and Retirement Living will form an interdisciplinary committee to review antipsychotic usage.	December 31, 2025	Cedarvale implemented this change idea and had 8 meetings in 2025. Outside of our scheduled meetings, Cedarvale's Attending Physician and Nurse Practitioner reviewed antipsychotic medications for residents on an ongoing basis, which did not require a meeting every month. It was also decided by the Team that holding a meeting every month was not always necessary, as it did not allow sufficient time to observe changes in residents following adjustments of antipsychotic medications.

Area of Focus	Previous Performance (2024/25)	Current Performance (2025/26)	Change Ideas	Date of Implementation	Outcomes/Impact
			New Move ins receiving antipsychotics will be reviewed for reduction and appropriateness.	Completed December 31, 2025	All new residents who moved in to Cedarvale Lodge in 2025, who had antipsychotic medications were reviewed for reduction and appropriateness.
Resident and Family Satisfaction	Resident NPS: 28 Family NPS: 36	Resident NPS: 58 Family NPS: 38	Cedarvale Lodge Community and Retirement Living aims to improve the physical plant.	Project completed June 2025	In 2025, Sensory Scapes was installed in all Resident common areas and dining rooms. Residents also selected a Sensory Scape door design of their choice for their own room doors completing 75% refresh of indoor spaces.
			Cedarvale Lodge Community and Retirement Living aims to improve the quality of clinical care.	Completed December 2025	Cedarvale Lodge collaborated with the Southlake NLOT team to provide 10 education sessions to the Nursing team in 2025. The education was delivered to enhance clinical care and topics were selected based on the clinical needs of the Nursing team.
			Cedarvale Lodge Community and Retirement Living will	Completed December 31, 2025	Sienna Essentials was completed in 2025 with Team Members and achieved a 91% average completion rate for the

Area of Focus	Previous Performance (2024/25)	Current Performance (2025/26)	Change Ideas	Date of Implementation	Outcomes/Impact
			improve resident service excellence.		year surpassing our goal of 80%.

Table 2: 2026/27 Resident and Family Satisfaction Action Plan

Cedarvale Lodge Community & Retirement Living aims to improve the combined Net Promoter Score for resident and family satisfaction from the current performance of 50 to 51.

Change Ideas	Process Measure	Target for 2026/27
Cedarvale Lodge Community & Retirement Living aims to improve the physical plant.	The number of resident outdoor common areas refreshed to improve the physical plant.	Cedarvale Lodge Community and Retirement Living will refresh 75% of resident outdoor common areas by September 30, 2026.
Cedarvale Lodge Community and Retirement Living will improve resident service excellence.	The percentage of Team Members that are educated on the pleasurable dining room program.	Cedarvale Lodge Community and Retirement Living will have 80% of Team Members educated on the pleasurable dining room program by December 31, 2026.
Cedarvale Lodge Community & Retirement Living aims to improve food quality and resident experience by offering opportunities for residents to be involved in menu planning.	Number of Menufest Events Held. Number of Close the Loop Calls attended by the leadership team with Sienna Senior Living Support Services.	Cedarvale Lodge Community & Retirement Living will hold 2 Menufest events in 2026. Cedarvale Lodge Community & Retirement Living will attend 2 close the loop calls in 2026.

Table 3: 2026/27 QIP Indicator Antipsychotic Use

Cedarvale Lodge Community & Retirement Living aims to improve antipsychotic use from the current performance of 23.17% to 22.70%.

Change Ideas	Process Measure	Target for 2026/27
Cedarvale Lodge Community & Retirement Living will train team members on the Gentle Persuasive Approach.	Number of team members who complete the iGPA modules.	Cedarvale Lodge Community & Retirement Living will have 90% of team members complete the iGPA modules in 2026.
Cedarvale Lodge Community & Retirement Living will train nurses who complete the LTCF assessments to ensure medications are coded accurately.	Number of nurses who complete LTCF coding who are provided education.	Cedarvale Lodge Community & Retirement Living will educate 90% of nurses who complete LTCF coding by December 31, 2026.
Cedarvale Lodge Community & Retirement Living will improve process for medication reviews for newly moved-in residents.	Percentage of LTC applications reviewed for antipsychotic medications.	100% of LTC applications will be reviewed for antipsychotic medication use.