

2026/27 Continuous Quality Improvement (CQI) Initiative Report

Community Demographics

Community Name: Villa Santa Maria Community

Street Address: 5400 Steels Ave West

Phone Number: 905 856 7200

Quality Lead: Lora Monaco, Executive Director

2025 –2026 Quality Improvement Initiatives

In 2025–26, Villa Santa Maria Community focused on the following QIP performance indicators: Antipsychotics Medication without Diagnosis of psychosis and Resident and Family Satisfaction as part of its Continuous Quality Improvement initiatives.

The target for antipsychotic usage without a diagnosis was to improve performance from 25.92% to 25.40 %. Current performance stands at 9.71%. 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 10. In 2025, Villa Santa Maria Community achieved an NPS of 56. 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 QIPs to identify and prioritize quality improvement initiatives. This year, Villa Santa Maria Community selected Resident and Family Satisfaction (see Table 2) and Emergency Department Transfers (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, Villa Santa Maria Community achieved an NPS of 69 for resident satisfaction and an NPS of 32 for family satisfaction. The results were shared with our Resident Council on May 28, 2026 Family Council on May 14, 2026 and team members through town halls on May 26, 2026. Feedback from the residents, family, and team member stakeholders was used to develop strategies to improve overall resident and family satisfaction.

Additionally, Villa Santa Maria Community's annual Operational Planning Day was held on April 9, 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 28, 2026 and Family Council on May 14, 2026. They were also shared with team members on this May 26, 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
Percentage of LTC residents without psychosis who were given antipsychotic medication	25.92%	9.71%	Villa Santa Maria Community Inter Professional team to complete the quarterly medication review for residents using antipsychotic medications without the diagnosis of psychosis by September 30, 2025.	Residents medications were reviewed quarterly and as needed through 2025	Villa Santa Maria Community has implemented the process to involve the Inter Professional team including the Nurse Practitioner, BSO Lead for quarterly medication reviews.
			Improve the use of the Gentle Persuasive Approach at Villa Santa Maria by training 60 team members.	Gentle Persuasive Approach in service held on: February 27, 2025 March 20, 2025 April 21, 2025 May 22, 2025 October 6, 2025	71 Team Members were trained on Gentle Persuasive Approach in 2025 and will continue in 2026 training for direct care providers. Team Members re-trained every two years.

Area of Focus	Previous Performance (2024/25)	Current Performance (2025/26)	Change Ideas	Date of Implementation	Outcomes/Impact
				Nov 20, 2025	
			Increase collaboration with community partners by involving community partners in behaviours rounds once per month.	BSO mobile team referral process continue in 2025 for residents with responsive expressions.	Community partners were involved in behaviour rounds at the end of 2025 to assist residents with responsive expressions management and interventions.
			Utilize Continuous Quality Improvement and Professional Advisory Committees meetings as a forum to discuss reduction antipsychotic initiative.	Meetings were held in: February 2025 August 2025 February 2026	This process improved the Inter professional approach to review antipsychotic medications.
Resident and Family Satisfaction	Resident NPS: 69	Resident NPS: 73	Villa Santa Maria Community held the annual “menufest” on March 25, 2025 to showcase new menu items and food choices for the residents and their families.	March 25, 2025	Residents provided positive feedback in regards the “menufest”. Few new items were added to the menu.
	Family NPS: 32	Family NPS: 35	Villa Santa Maria implemented daily dining huddles. In dining huddles	Implemented Dining Huddles in April 2025 .	Team collaborated with residents/family members on likes/dislikes and

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			team members discussed the day's menus, dining needs of resident, and leaders offered education on plate presentation, table set up, and tips for dining service.	100% of weekday lunches throughout April – Dec 2025 to improve the dining experience of our residents.	adjusted residents' preferences accordingly. Improved communication between dietary and direct care providers.

Table 2: 2026/27 Resident and Family Satisfaction

Villa Santa Maria Community aims to continue to maintain the combined Net Promoter Score for resident and family satisfaction at 56.

Change Ideas	Process Measure	Target for 2026/27
1) Villa Santa Maria Community aims to improve resident experience by increasing interactions between residents and team members.	Number of Residents who had 5 or less resident contacts per month.	To decrease the number of residents who have had 5 or less resident contacts.
2) Villa Santa Maria aims to improve food quality and resident experience by offering opportunities for residents to be involved in menu planning.	1.Number of Menifest Events Held. 2.Number of Close the Loop Calls attended by the leadership team with Sienna Senior Living Support Services.	1.Villa Santa Maria will hold 1 Menifest events in 2026. 2.Villa Santa Maria will attend 2 close the loop calls.

Table 3: 2026/27 QIP Indicator- ED Transfers.

Villa Santa Maria is aiming to improve the rate of unnecessary ED visits by 2.5% by September 30, 2026

Change Ideas	Process Measure	Target for 2026/27
1) Improve registered staff capacity and confidence by enhancing physical assessment skills.	Number of staff who attend the Humber College physical assessment course.	Villa Santa Maria will send 5 registered staff to the Humber College physical assessment course by December 31, 2026.
2) Monthly tracking, trending, and analysis of ED transfer data.	Percentage of ED transfers reviewed monthly.	Villa Santa Maria aims to review 100% of ED transfers each month throughout 2026.
3) Retrain team members on the use of the SBAR tool.	Percentage of team members who attend sessions offered on the SBAR tool.	Villa Santa Maria will train 80% of registered team members on the SBAR tool by December 31, 2026.