

Community Demographics

Community Name: Woodbridge Vista Community

Street Address: 5400 Steeles Avenue West, Woodbridge, Ontario L4L 9S1

Phone Number: (905) 856-7200

Quality Lead: Amy Wilkinson, Executive Director

Continuous Quality Improvement Initiative Report

2022-23 Quality Improvement Initiative

In 2022/23, Woodbridge Vista Community chose to focus on the percentage of LTC residents without psychosis who were given antipsychotic medication for its CQI initiative. Woodbridge Vista Community set a 2.69% reduction target to achieve a performance of 21% on this indicator, from 21.58%. Woodbridge Vista Community's current performance on this indicator is 23.86%. 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

Woodbridge Vista Community's priority areas for quality improvement for the year are:

1. Resident and Family Satisfaction
2. Our Ontario Health QIP Indicator: Percentage of LTC residents without psychosis who were given antipsychotic medication

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. Woodbridge Vista Community completed the annual resident and family satisfaction surveys from September 14-28, 2022. Woodbridge Vista Community achieved 87% for overall resident satisfaction and 72% for overall family satisfaction. The results were shared with our resident council February 10 and family council January 25, 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 percentage of LTC residents without psychosis who were given antipsychotic medication 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 and the QIP, including the progress report from the 2022/23 QIP, and the workplan for 2023/24, was shared with the Resident Council on May 12, 2023 and will be shared with Family Council on June 27, 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

Woodbridge Vista Community aims to improve resident satisfaction to 83% or higher, and family satisfaction to 84% or higher. This is a maintenance goal for resident satisfaction, and an 11% improvement for family satisfaction, from 72%.

Area of Focus	Change Ideas
Food Options	<ul style="list-style-type: none"> Woodbridge Vista held the annual “menufest” on June 28 to showcase new menu items and food choices for the residents and their families. Woodbridge Vista cooks will participate in education with Sienna Senior Living’s Executive Chef on enhancing culinary skills in June 2023. Woodbridge Vista will improve the advertisement of and communication about Special event meal selections
Area Quiet for Sleep	<ul style="list-style-type: none"> Circle of Care meeting agendas throughout 2023 will include discussion around keeping hallways quiet to promote a quiet sleep environment.

Table 2: QIP Indicator: Percentage of LTC residents without psychosis who were given antipsychotic medication

Woodbridge Vista Community has set a 0.053% improvement target to achieve a performance of 22.67% on this indicator, from 23.86%.

Change Ideas	Process Measure	Target for 2023-24
1. Review all residents on antipsychotic medications	Percentage of residents whose antipsychotic medications are reviewed quarterly.	Woodbridge Vista will review 100% of the resident who are currently receiving antipsychotic medications quarterly
2. Improve the use of the Gentle Persuasive Approach at Woodbridge Vista.	Number of team members trained on GPA.	Woodbridge Vista aims to train 40 team members on GPA by December 31, 2023.
3. Increase collaboration with community partners.	Number of behaviour rounds with community partner support.	Woodbridge Vista aims to involve community partners in behaviour rounds once a month.