

Community Demographics

Community Name: Weston Terrace Community

Street Address: 2005 Lawrence Avenue West, Toronto, ON M9N 3V4

Phone Number: (416) 243-8879

Quality Lead: Abiola Awosanya, Executive Director

Continuous Quality Improvement Initiative Report

2022-23 Quality Improvement Initiative

In 2022/23, Weston Terrace Community chose to focus on the percentage of LTC residents without psychosis who were given antipsychotic medication for its CQI initiative. Weston Terrace Community set a 18.89% stretch reduction target to achieve a performance of 14.0% on this indicator, from 17.26%. Weston Terrace Community's current performance on this indicator is 16.26%. 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

Weston Terrace 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. Weston Terrace Community completed the annual resident and family satisfaction surveys from September 14-28, 2022. Weston Terrace Community achieved 79.4% for overall resident satisfaction and 80.0% for overall family satisfaction. The results were shared with our resident council on January 26, 2023 and family council on February 7, 2023 and their feedback was sought in the development of the strategies to improve overall satisfaction (see Table 1). [Weston Terrace's Quality Committee reviewed the results of the resident and family satisfaction survey and developed a draft action plan that was finalized upon seeking and incorporating input from the resident and family councils.](#)

Sienna Senior Living Communities use QIPs to help us prioritize our improvement projects and this year the quality committee has chosen the 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 June 29, 2023 and Family Council on May 17, 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

Weston Terrace Community aims to improve resident satisfaction to 83% or higher, and family satisfaction to 84% or higher. This is a 4.5% improvement for resident satisfaction, from 79.4% and a 5.0% improvement for family satisfaction, from 80.0%

Area of Focus	Change Ideas
Improve Dining Experience	<ul style="list-style-type: none"> • Weston Terrace will implement 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 by November 2023. • Weston Terrace cooks will participate in education to enhance culinary skills with Sienna Senior Living's Executive Chef in July 2023. • Weston Terrace provided education to cooks on plating different food textures in March 2023. • Residents and staff to participated in Taste Panel Activity to review food taste and offer feedback for improvement from March – May 2023.
Improve Care Responsiveness	<ul style="list-style-type: none"> • All front-line staff will participate in education on the Nurse Call System by October 31, 2023. • Improve accessibility to translation supports for residents such as creating communication boards and connecting with translation services throughout 2023. • Weston Terrace will re-introduce a nursing rounding method that includes direct questions about resident needs by December 31, 2023. • Registered staff and managers to participate in training and certification program on Consent, Capacity, and Substitute Decision Making to further support resident needs and preferences related to care throughout 2023.

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

Weston Terrace Community has set a 4.9% improvement target to achieve a performance of 15.45% on this indicator, from 16.26%.

Change Ideas	Process Measure	Target for 2023-24
1. Collaboration with BSO team to complete the 3-month medication review for residents using antipsychotic medications without the supporting diagnosis.	The percentage of residents receiving antipsychotics medications who have a collaborative approach to their 3 month medication review	100% of residents receiving antipsychotic medications without the supporting diagnosis will have a collaborative approach to their 3-month medication review by September 30, 2023.
2. Improve the use of the gentle persuasive approach (GPA).	Number of team members trained on GPA.	30 team members will be trained on GPA by December 31, 2023.