

Community Demographics

Community Name: Deerwood Creek Community

Street Address: 70 Humberline Drive, Etobicoke, Ontario, M9W 7H3

Phone Number: (416) 213-7300

Quality Lead: Carol Ois, Executive Director

Continuous Quality Improvement Initiative Report

2022-23 Quality Improvement Initiative

In 2022/23, Deerwood Creek Community chose to focus on the number of ED visits for a modified list of ambulatory care-sensitive conditions per 100 LTC residents for its CQI initiative. Deerwood Creek Community set a 5.71% reduction target to achieve a performance of 14.5% on this indicator, from 15.29%. Deerwood Creek Community's current performance on this indicator is 21.43%. 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

Deerwood Creek Community's priority areas for quality improvement for the year are:

1. Resident and Family Satisfaction
2. Our Ontario Health QIP Indicator: number of ED visits for a modified list of ambulatory care-sensitive conditions per 100 LTC residents

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. Deerwood Creek Community completed the annual resident and family satisfaction surveys from September 14-28, 2022. Deerwood Creek Community achieved 79% for overall resident satisfaction and 86% for overall family satisfaction. The results were shared with our resident council May 23, 2023, and family council on May 31, 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 number of ED visits for a modified list of ambulatory care-sensitive conditions per 100 LTC residents 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 January 17th and Family Council on March 29, 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

Deerwood Creek Community aims to improve resident satisfaction to 83%; this is a 4% improvement for resident satisfaction, from 79%. Deerwood Creek Community aims to maintain our current performance of 86% for family satisfaction.

Area of Focus	Change Ideas
Move-in experience	Deerwood Creek is a regional pilot site for the implementation of the enhanced move in experience. Our pilot commenced December 2 nd , 2022, and included: <ul style="list-style-type: none"> • Personalized welcome gift for every resident admitted to the community • Implemented Tour team following a set standard and team member training • Implementation of post move in survey to evaluate resident & family experience
Dining Experience	<ul style="list-style-type: none"> • Deerwood Creek has implemented Happy Hour Huddles twice weekly starting on April 4, 2023, as a way to share information and improve the meal service for the residents. • Deerwood Creek cooks will participate in education with Sienna Senior Living’s Executive Chef on enhanced culinary skills in July 2023. • Deerwood Creek 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 in Spring/Summer 2023.

Table 2: QIP Indicator: number of ED visits for a modified list of ambulatory care-sensitive conditions per 100 LTC residents

Deerwood Creek Community has set a 13.6% improvement target to achieve a performance of 18.5% on this indicator, from 21.43%.

Change Ideas	Process Measure	Target for 2023-24
1. Purposeful rounds will be completed at identified peak times.	Percentage of staff who complete purposeful rounding education.	100% of full-time and part-time nursing staff on the home area with the highest falls rate will complete purposeful rounding education by September 30, 2023.

Change Ideas	Process Measure	Target for 2023-24
2. Send physiotherapy referrals for residents in isolation who are medium to high risk for falls	Percentage of residents who are medium to high risk for falls and are in isolation who have a physiotherapy referral sent.	100% of residents who are medium to high risk for falls who are in isolation will have a physiotherapy referral sent by the nursing team by December 31, 2023.