

2024/25 Continuous Quality Improvement Initiative Report

Community Demographics

Community Name: Villa Leonardo Gambin

Street Address: 40 Friuli Ct, Woodbridge, ON L4L 9T3

Phone Number: (905) 856-3939

Quality Lead: Sonia Roul, Administrator

2023-24 Quality Improvement Reflection

In 2023/24, Villa Leonardo Gambin chose to focus on reducing the use of antipsychotic medications without the diagnosis of psychosis and resident and family satisfaction for its CQI initiatives.

Villa Leonardo Gambin set a 2% improvement target to achieve a performance of 16.37% on the antipsychotic without a diagnosis of psychosis indicator, from 16.57%. Villa Leonardo Gambin's current performance on this indicator is 16.57%. A summary of the change ideas and their results is available in table 1.

Villa Leonardo Gambin aimed to maintain resident satisfaction at 88%, and family satisfaction to 82%. Villa Leonardo Gambin, managed by Sienna Senior Living, implemented a new survey format on a new platform to measure resident and family satisfaction in 2023. Villa Leonardo Gambin achieved a combined Net Promoter Score (NPS) of 31.00 for Resident and Family Satisfaction. A summary of the action plan and its results for resident and family satisfaction for 2023/24 can be found in table 1.

2024-25 Priority Areas for Quality Improvement

Sienna Senior Living Communities use our Ontario Health Quality Improvement Plans (QIPs) to prioritize our improvement projects and this year Villa Leonardo Gambin quality committee has chosen Resident and Family Satisfaction (table 2) and Inappropriate use of anti-psychotics without the diagnosis of psychosis (table 3) for its CQI initiatives. In addition to the QIP, Villa Leonardo Gambin uses the internal operational plan to help prioritize and plan improvements for key indicators.

Villa Leonardo Gambin 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. Villa Leonardo Gambin completed the annual resident and family satisfaction surveys from September 13-27, 2023. Villa Leonardo Gambin achieved an NPS of 11.00 for resident satisfaction and an NPS of 47.00 for family satisfaction. The results were shared with our resident council April 15, 2024, family council February 29, 2024, and team members through during the Operational

Planning Day March 5, 2024. Feedback from the resident, family, and team member stakeholders was used to develop strategies to improve overall resident and family satisfaction.

Resident and Family Satisfaction Survey

Villa Leonardo Gambin'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 focussed on and how we can meet their needs.

Policies, Procedures and Protocols That Guide Continuous Quality Improvement

Quality Improvement Policy, Planning, Monitoring, and Reporting

Villa Leonardo Gambin 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 and 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, Villa Leonardo Gambin 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 2023/24 QIP, and the workplan for 2024/25, was shared with the Resident Council on June 6, 2024, and Family Council on June 10, 2024.

This will be shared with team members on July 11, 2024, through our Operational Planning Day with team members and it is posted in the homes. 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.

2023-24 Quality Improvement Initiatives

Table 1: results of 2023/24 Quality Improvement Plan and Resident and Family Satisfaction Improvement Initiatives

| Area of Focus | Previous Performance (2022/23) | Current Performance (2023/24) | Change Ideas | Date of Implementation | Outcomes/Impact |
|---|--------------------------------|-------------------------------|---|--|---|
| Percentage of LTC residents without psychosis who were given antipsychotic medication | 16.70% | 16.57% | All residents receiving antipsychotic medications will be reviewed monthly. | Ongoing process throughout 2023. | The VLG team accomplished this goal by reviewing residents on antipsychotic medications without a diagnosis in various forums throughout the month. |
| | | | Offer Gentle Persuasive Approach (GPA) training at VLG Community. | Deferred to 2024 | Last year, VLG's GPA coach was on an approved LOA while the back-up is also the IPAC Lead. As a result, it was challenging to facilitate the GPA education. |
| Resident and Family Satisfaction | Resident: 88% | Resident NPS: 11 | Villa Leonardo Gambin aims to increase the frequency of communication of good news with residents and their families throughout 2023. | Ongoing process throughout 2023. | Monthly newsletters and increased communication has a positive impact on overall satisfaction and helps to reduce the number of complaints from families and residents. |
| | Family: 82% | Family NPS: 47 | Villa Leonardo Gambin will send 20% of our full-time nursing staff to the Pallium Palliative Care education course by December 31, 2023, to help improve staff communication skills during palliative care. | 10 number of clinical staff completed the course by December 31, 2023. | LEAP Pallium education helps to improve the quality of care offered at Villa Leonardo Gambin. |

| Area of Focus | Previous Performance (2022/23) | Current Performance (2023/24) | Change Ideas | Date of Implementation | Outcomes/Impact |
|---------------|--------------------------------|-------------------------------|---|--|--|
| | | | Villa Leonardo Gambin cooks and Dietary Leaders will participate in education with Sienna Senior Living's Executive Chef on enhancing culinary skills in June 2023. | June 23, 2023. | Education with the executive chef improved the culinary skills of Villa Leonardo Gambin's cooks and dietary teams. |
| | | | Villa Leonardo Gambin will implement a new menu in collaboration with Sienna Senior Living's Executive Chef with ongoing feedback from residents that incorporates new cooking processes, recipe enhancements, fresher and higher quality local ingredients by Q4 2023. | New menu implemented by December 31, 2023. | The new menu incorporated fresher ingredients and had a positive impact on resident satisfaction. |
| | | | Villa Leonardo Gambin will continue to seek out feedback from residents and families to enhance meal options that delivers culturally specific meals to support the Italian Community it predominantly serves. | Ongoing throughout 2023. | Villa Leonardo Gambin's food committee met at minimum quarterly to review the menu and offer feedback. |

Planned Quality Improvement Initiatives for 2024-25

Table 2: QIP Indicator: Resident and Family Satisfaction

Villa Leonardo Gambin aims to improve the combined Net Promoter Score for resident and family satisfaction from 31.00 to 32.00.

| Change Ideas | Process Measure | Target for 2024/25 |
|--|---|--|
| Villa Leonardo Gambin aims to improve the quality and delivery of service during mealtimes. VLG will implement the upgraded MealSuite system to enhance the Residents Dining Experience. The Mealsuite system improves how residents view and order available meal options. The system enhances flow and communication during meals. | Number of comments on the resident and family survey related to meal service | VLG aims to reduce the number of detractor comments on the resident and family survey related to meal service by 30% in 2024. |
| Villa Leonardo Gambin aims to improve communication with residents and families. Villa Leonardo Gambin will support team members to complete the CLRI Families in Distress education modules. These modules will help team members build empathy skills while interacting with families and residents. | Percentage of team members who complete the CLRI Families in Distress education modules | 100% of full-time clinical staff and leaders will complete the CLRI Families in Distress education modules by December 31, 2024. |

Table 3: QIP Indicator: Antipsychotic Usage without a Diagnosis of Psychosis

Villa Leonardo Gambin aims to improve antipsychotic usage without a diagnosis of psychosis from the current performance of 16.57% to 16.37%.

| Change Ideas | Process Measure | Target for 2024/25 |
|--|--|--|
| Review quarterly all residents who trigger the antipsychotic QI. Villa Leonardo Gambin will generate PCC reports or refer to PCC Insights to identify residents receiving antipsychotic medication without the diagnosis of psychosis. Residents | Review all residents who are taking antipsychotic medication without diagnosis | VLG aims to reduce the number of residents taking antipsychotics without diagnosis by 1.1% |

| Change Ideas | Process Measure | Target for 2024/25 |
|--|---|--|
| identified will be reviewed at the Resident Safety Meeting. | | |
| Offer Gentle Persuasive Approach (GPA) Training. Villa Leonardo Gambin's interim BSO Lead was trained to be a GPA Coach to help provide training to team members to manage responsive behaviours. | Number of team members who received education on GPA | A minimum of 20 team members will complete GPA training on or before December 31, 2024. |
| Ensure there is documentation and diagnosis to support the need for antipsychotic medication without psychosis. Villa Leonardo Gambin will generate a quarterly report of worsened mood with symptoms of depression to identify residents who have responsive behaviours to ensure that there is documentation | Percentage of resident with worsened mood with symptoms of depression will be reviewed quarterly. | 100% of residents identified with worsened mood with symptoms of depression will be identified and reviewed quarterly throughout 2024. |