

# Becoming a Choosing Wisely Canada Hospital

Designation Guide

# Contents

<b>Participate in the Program</b>	<b>3</b>
<b>Quality Improvement Status</b>	<b>4</b>
<b>Leadership Status</b>	<b>5</b>
<b>Earn Credits and Meet Criteria</b>	<b>7</b>
National Programs	7
Self-Directed QI Projects	7
<b>Sustain Efforts</b>	<b>10</b>
<b>Ready to Apply?</b>	<b>11</b>

# Participate in the Program

## Who Can Participate

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Becoming a Choosing Wisely Canada Hospital means taking deliberate action to reduce overuse and demonstrating organizational commitment to minimizing waste and harm.

The Choosing Wisely Canada Hospital designation program is intended for all Canadian acute care hospitals. If able to meet the application requirements, non-acute care hospitals are also welcome to participate in the program. Please refer to the [FAQ](#) for more information.

For hospitals applying as a health system, please see [FAQ](#) for information on criteria.

## How to Participate

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The Choosing Wisely Canada Hospital designation program has two types of designation: **Quality Improvement (QI) Status** and **Leadership Status**.

To qualify for each status, eligible sites need to implement hospital-wide Choosing Wisely QI projects that earn credits towards designation. Hospitals will be required to demonstrate improvement using QI methodology and appropriate time-series data aligned with acute care Choosing Wisely Canada recommendations or toolkits.

# Quality Improvement Status

To obtain Quality Improvement (QI) Status, hospitals need to earn 5 credits, and provide a plan for sustainability.

## Pathways to QI Status (5 Credits)

Pathway	Using Blood Wisely (2 Credits)	Using Labs Wisely (2 Credits)	Self-Directed QI Project (1 Credit)	Total Credits
1	✓		3 projects	5
2		✓	3 projects	5
3	✓	✓	1 project	5
4			5 projects	5

# Leadership Status

To obtain Leadership Status, hospitals need to earn 7 credits, provide a plan for sustainability, demonstrate Choosing Wisely is an organizational/strategic priority, and mentor another hospital.

## Pathways to Leadership Status (7 Credits)

Pathway	QI Status Designation (5 Credits)	Using Blood Wisely (2 Credits)	Using Labs Wisely (2 Credits)	Self Directed QI Project (1 Credit)	Strategic Priority & Mentorship	Total
1	✓	✓*			✓	7
2	✓		✓**		✓	7
3	✓			2 projects	✓	7
4		✓		5 projects	✓	7
5			✓	5 projects	✓	7
6		✓	✓	3 projects	✓	7
7				7 projects	✓	7

\* Using Blood Wisely can be combined with QI Status Designation if Using Blood Wisely was not used to obtain the QI Status Designation

\*\* Using Labs Wisely can be combined with QI Status Designation if Using Labs Wisely was not used to obtain the QI Status Designation

## **Making Choosing Wisely an Organizational/Strategic Priority**

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- Detail how your hospital has made Choosing Wisely a strategic priority.
  - Examples:
    - Choosing Wisely priorities embedded within hospital's operating/strategic plan.
    - Choosing Wisely metrics on hospital scorecard.
    - This information needs to be clearly identified, labelled and included in the data/supporting documents file that accompanies your application.

## **Mentor Another Hospital**

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- Mentorship should be for a hospital outside of your organization and this would typically involve guidance by various team members.
- Demonstrable mentorship of at least one cross-departmental quality improvement project linked to a Choosing Wisely Canada recommendation is required.
- There is no formal requirement regarding the frequency or duration of mentorship.
- Include a letter from the mentee hospital in your data/supporting documents file that accompanies your application, describing your mentorship and which Choosing Wisely Canada recommendation or toolkit was implemented.
  - The mentorship letter should be written by a senior leader (e.g. CEO, CIO, Department Chief).

# Earn Credits and Meet Criteria

## National Programs (2 Credits each)

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**Using Blood Wisely (UBW):** Compare your hospital's red blood cell utilization against national appropriateness benchmarks and become a designated UBW Hospital. Sites will earn two credits for meeting necessary UBW targets. Sites will need to remain in good standing by continued demonstration of meeting benchmarks in sustainability data.

**Using Labs Wisely (ULW):** Participate in ULW and join a national consortium that's changing the lab utilization landscape in Canada. Sites that have met all program deliverables and completed one year of the program are awarded two credits. To maintain QI or Leadership status, sites will be required to continue full participation and remain in good standing with the program.

## Self-Directed QI Projects (1 Credit each)

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### What is considered an eligible self-directed QI project?

- A self-directed QI project must be linked to a Choosing Wisely Canada [toolkit](#) or one of the 500+ [recommendations](#) including [climate-conscious](#) recommendations.
- The scope of the project should apply to multiple departments within the hospital (i.e., should not solely apply to one internal medicine unit).
- The project should engage cross-discipline team members (e.g., physicians, nurses, hospital administrators).
- The project should be implemented within the four years prior to your application (i.e., baseline data is no more than four years old).
- Red blood cell transfusion recommendations are not eligible as self-directed QI projects as they are covered in UBW.
- To ensure that your self-directed QI project is eligible, please consult with Choosing Wisely Canada prior to your submission ([info@choosingwiselycanada.ca](mailto:info@choosingwiselycanada.ca)).

### Additional Considerations for Self-Directed QI Projects

- Lab test-related projects demonstrating clinical or statistically significant improvement can be submitted as self-directed QI projects.
- Lab test-related projects include any project related to a process that includes steps completed by the lab (e.g., includes POCT, and/or Choosing Wisely Canada Climate Action lab test-related recommendations).
- Hospitals that include lab test-related projects as self-directed QI projects in their application would be asked to present their lab test-related project at ULW collaborative regardless of whether they are actively involved in ULW.
- For Leadership Status, given the elite nature of this designation, it is important to demonstrate implementation of a breadth of Choosing Wisely Canada recommendations/toolkits. Therefore, Leadership Status applicants should include at least **two** self-directed QI projects that are **not** lab test-related.

## Requirements for a Self-Directed QI Project

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- 1. The Aim** should detail the objective(s) of the project and should be **SMART: Specific, Measurable, Achievable, Realistic, and Timely**. Please clearly note the corresponding Choosing Wisely Canada recommendation or toolkit.
- 2. The Project Summary** requires the project name, description of the project, interventions used, sustainment plan, and departments impacted. The intervention(s) should be described in sufficient detail to provide reviewers with a comprehensive view of what was done. For example, simply stating “education” and “IT changes” do not provide sufficient detail.
- 3. The Project Scope** outlines the reach of the project across the hospital. To qualify, the project needs to reach hospital-wide or across multiple departments (it cannot be in only one department).
- 4. The Results Summary** is a brief overview of your findings and should align with your aim statement. The date of the final/most recent data point should be within 6 months of submitting the application to Choosing Wisely Canada. Please ensure your primary measure is an outcome measure, refer to pages 5 and 6 of the [Ontario Health Measurement for Quality Improvement 2024](#) for more information.

# How to Display Results

It is preferred that data submitted is displayed as **Statistical Process Control (SPC) charts** with 10 -12 datapoints pre-intervention and 10 -12 points post-intervention (total of 20 - 24 data points). Run charts are also acceptable. The data can be displayed weekly, biweekly, monthly, or quarterly. The target should demonstrate a significant clinical reduction or a statistically significant reduction by SPC/run chart rules. Please include rationale for your chosen target.

An SPC/run chart displays data over time. The chart should include the following details:

- Proper title
- Labels for the X- and Y-axis
- Annotations to illustrate when the intervention(s) were implemented. This is commonly done by inserting a line or arrow in the graph to indicate the pre-data from the post-data

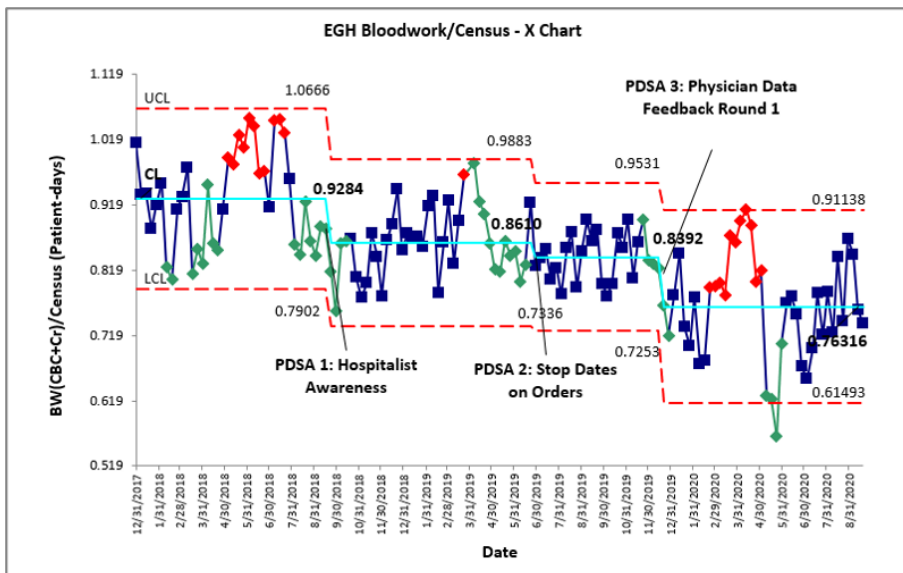
References to peer-reviewed articles, publications, conference posters, or presentations pertaining to your project can also be included. Please include a full reference and/or PDF attachment of the full article that is being referenced.

Note: If intervention details and SPC/run chart data are not included in the article/publication, please include this information in the application.

## Resources

[Ontario Health Measurement for Quality Improvement 2024](#)

Example of an **SPC chart** from William Osler Health System:



# Sustain Efforts

**QI Status** and **Leadership Status** applications require a plan to demonstrate ongoing sustainment of your Choosing Wisely improvement activities (UBW, ULW, QI projects) and an organizational commitment to Choosing Wisely Canada. Here are some examples of activities that would demonstrate this commitment:

- Establishing a Choosing Wisely Committee(s)
- Discussions about Choosing Wisely Canada recommendations at Grand rounds
- Workshops/webinars or other resources on Choosing Wisely Canada recommendations
- Choosing Wisely education in clinician onboarding
- Other Choosing Wisely QI projects completed in the past or currently underway

Once designated, **QI Status** and **Leadership Status** hospitals will be required to demonstrate sustained efforts and organizational commitment to Choosing Wisely **one year** after receiving their designation, and every **two years** thereafter. Choosing Wisely Canada will reach out to sites by email for a sustainability update.

Sustainability updates for both QI Status and Leadership Status Hospitals will include all elements contained in the original application:

- Using Blood Wisely: Confirm hospital is in good standing.
- Using Labs Wisely: Confirm hospital is in good standing.
- Self-directed QI projects: Sites will be asked to submit sustainability data ranging from the time of application submission to time of update request. Sustainability data should demonstrate sustained improvement or ongoing improvement. If the data demonstrates a lack of sustainability, interventions planned and/or underway should be included with the update. Data updates should be shared using the same format as submission (e.g. SPC, run chart).
- In the sustainability update, organizations will be asked to describe ongoing organizational commitment to Choosing Wisely. This could include implementation of planned/proposed activities outlined in the application and any other Choosing Wisely activities.

# Ready to Apply?

## Application Instructions

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Earned enough credits? Congratulations! Your site is on its way to becoming a Choosing Wisely Canada Hospital.

The application can be submitted in French or English as the review panel includes bilingual members. Discussions with the team will be in English.

Your final application (for both **QI Status** and **Leadership Status**) should contain **TWO** attachments:

- 1. APPLICATION FORM:** Completed and signed by Chief of Staff (or equivalent) and President/CEO (or equivalent).
- 2. SUPPORTING DATA AND DOCUMENTS:** Should be submitted as a single PDF or Word file that includes all supporting data and documents. Please ensure graphs are legible and upright, materials are clearly labelled and incorporate a table of contents if including multiple documents.

## Following Application Submission

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Once submitted, you will receive confirmation. Applications are typically reviewed within **8 to 10 weeks**. Sites will be notified if further information or edits are required.

If your hospital is designated, virtual and physical certificates will be provided along with a digital package of designation assets. Hospitals will be invited to connect with the Choosing Wisely Canada communications team to discuss how best to share this exciting news!





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 [www.choosingwiselycanada.org](http://www.choosingwiselycanada.org)

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