

SUPPLEMENTAL FILE 1. SQUIRE 2.0 REPORTING GUIDELINE CHECKLIST		
Area	Item	Location in Manuscript
1. Title	Indicate that the manuscript concerns an initiative to improve healthcare (broadly defined to include the quality, safety, effectiveness, patientcenteredness, timeliness, cost, efficiency, and equity of healthcare)	Title (“improve”)
2. Abstract	a. Provide adequate information to aid in searching and indexing b. Summarize all key information from various sections of the text using the abstract format of the intended publication or a structured summary such as: background, local problem, methods, interventions, results, conclusions	Abstract (structured)
Introduction		
3. Problem	Nature and significance of the local problem	Introduction: “Baseline organizational status”
4. Available knowledge	Summary of what is currently known about the problem, including relevant previous studies	Introduction: paragraphs 1-2
5. Rationale	Informal or formal frameworks, models, concepts, and/or theories used to explain the problem, any reasons or assumptions that were used to develop the intervention(s), and reasons why the intervention(s) was expected to work	Introduction: paragraphs 1-2, “Interprofessional team context”, and “Program objectives”
6. Specific aims	Purpose of the project and of this report	Introduction: “Baseline organizational status” and “Program objectives”
Methods		
7. Context	Contextual elements considered important at the outset of introducing the intervention(s)	Introduction: “Organizational context” and “Interprofessional team context”
8. Intervention(s)	a. Description of the intervention(s) in sufficient detail that others could reproduce it b. Specifics of the team involved in the work	Introduction: “Interprofessional team context”, and Methods
9. Study of the Intervention(s)	a. Approach chosen for assessing the impact of the intervention(s) b. Approach used to establish whether the observed outcomes were due to the intervention(s)	Methods
10. Measures	a. Measures chosen for studying processes and outcomes of the intervention(s), including rationale for choosing them, their operational definitions, and their validity and reliability b. Description of the approach to the ongoing assessment of contextual elements that contributed to the success, failure, efficiency, and cost c. Methods employed for assessing completeness and accuracy of data	Methods: “Included medications”, “Outcomes”, and “Data analysis”
11. Analysis	a. Qualitative and quantitative methods used to draw inferences from the data	Methods: “Data analysis”

	b. Methods for understanding variation within the data, including the effects of time as a variable	
12. Ethical Considerations	Ethical aspects of implementing and studying the intervention(s) and how they were addressed, including, but not limited to, formal ethics review and potential conflict(s) of interest	Methods: “Ethical considerations” (and Acknowledgements section, “Ethics approval and informed consent”)
Results		
13. Results	<p>a. Initial steps of the intervention(s) and their evolution over time (e.g., time-line diagram, flow chart, or table), including modifications made to the intervention during the project</p> <p>b. Details of the process measures and outcome</p> <p>c. Contextual elements that interacted with the intervention(s)</p> <p>d. Observed associations between outcomes, interventions, and relevant contextual elements</p> <p>e. Unintended consequences such as unexpected benefits, problems, failures, or costs associated with the intervention(s).</p> <p>f. Details about missing data</p>	Results, including Table 1-2, Supplemental File 2
Discussion		
14. Summary	<p>a. Key findings, including relevance to the rationale and specific aims</p> <p>b. Particular strengths of the project</p>	Discussion, paragraph 1.
15. Interpretation	<p>a. Nature of the association between the intervention(s) and the outcomes</p> <p>b. Comparison of results with findings from other publications</p> <p>c. Impact of the project on people and systems</p> <p>d. Reasons for any differences between observed and anticipated outcomes, including the influence of context</p> <p>e. Costs and strategic trade-offs, including opportunity costs</p>	Discussion, paragraphs 1-4
16. Limitations	<p>a. Limits to the generalizability of the work</p> <p>b. Factors that might have limited internal validity such as confounding, bias, or imprecision in the design, methods, measurement, or analysis</p> <p>c. Efforts made to minimize and adjust for limitations</p>	Discussion: “Limitations”
17. Conclusions	<p>a. Usefulness of the work</p> <p>b. Sustainability</p> <p>c. Potential for spread to other contexts</p> <p>d. Implications for practice and for further study in the field</p> <p>e. Suggested next steps</p>	Discussion: paragraphs 1-4, and “Conclusions”
18. Funding	Sources of funding that supported this work. Role, if any, of the funding organization in the design, implementation, interpretation, and reporting	Funding statement

