Table S1. SQUIRE 2.0 (Standards for Quality Improvement Reporting Excellence) Checklist

Section and Topic	Item	Checklist Item Description	Reported in Manuscript (Section)
Title and Abstract			
Title	1	Indicate that the manuscript concerns an initiative to improve healthcare (broadly defined to include the quality, safety, effectiveness, patient-centeredness, timeliness, cost, efficiency, and equity of healthcare).	Title
Abstract	2	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; Keywords
Introduction			
Problem Description	3	Nature and significance of the local problem.	Section 1 (Introduction, paragraphs 1–2)
Available Knowledge	4	Summary of what is currently known about the problem, including relevant previous studies.	Section 1 (Introduction, paragraphs 2–3)
Rationale	5	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.	Section 1 (Introduction, paragraphs 2–4); Section 2.4 (Development and timeline)
Specific Aims	6	Purpose of the project and of this report.	Section 1 (Introduction, paragraph 4)
Methods			
Context	7	Contextual elements considered important at the outset of introducing the intervention(s).	Section 2.2 (Setting); Section 2.3 (Pre-Hospitalization Before Centralization)
Intervention(s)	8	a. Description of the intervention(s) in sufficient detail that others could	Section 2.4 (Intervention: Centralized Pre-Hospitalization); Table 1

		reproduce it. b. Specifics of the team involved in the work.	
Study of the Intervention(s)	9	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).	Section 2.1 (Study Design and Reporting); Section 2.5 (Units, Periods and Population); Section 4.4
Measures	10	a. Measures chosen for studying processes and outcomes of the intervention(s), 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.	Section 2.6 (Outcome Measures and Definitions); Section 2.7 (Data Sources and Handling)
Analysis	11	a. Qualitative and quantitative methods used to draw inferences from the data. b. Methods for understanding variation within the data, including the effects of time as a variable.	Section 2.8 (Statistical Analysis); Section 3.2 (Annual trends)
Ethical Considerations	12	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.	Institutional Review Board Statement; Informed Consent Statement; Conflicts of Interest
Results			
Results	13	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. b. Details of the process measures and outcome. c. Contextual elements that interacted with the intervention(s). d. Observed associations between outcomes, interventions, and relevant contextual elements. e. Unintended consequences such as unexpected benefits, problems,	Section 2.4 (Development and timeline); Section 3.1; Section 3.2; Tables 2–3; Figures 1–2; Appendix A (Table A1); Section 2.6 (missing dates)

		failures, or costs associated with the intervention(s). f. Details about missing data.	
Discussion			
Summary	14	a. Key findings, including relevance to the rationale and specific aims. b. Particular strengths of the project.	Section 4.1 (Principal Findings); Section 4.6 (Strengths and Limitations)
Interpretation	15	a. Nature of the association between the intervention(s) and the outcomes. b. Comparison of results with findings from other publications. c. Impact of the project on people and systems. d. Reasons for any differences between observed and anticipated outcomes, including the influence of context. e. Costs and strategic trade-offs, including opportunity costs.	Section 4.2 (Possible Mechanisms); Section 4.3 (Differences Between Units and Concurrent Changes); Section 4.4 (Implications of Comparing Pre- and Post-Pandemic Periods); Section 4.5 (Implications for Practice)
Limitations	16	a. Limits to the generalizability of the work. b. Factors that might have limited internal validity such as confounding, bias, or imprecision in the design, methods, measurement, or analysis. c. Efforts made to minimize and adjust for limitations.	Section 4.6 (Strengths and Limitations)
Conclusions	17	a. Usefulness of the work. b. Sustainability. c. Potential for spread to other contexts. d. Implications for practice and for further study in the field. e. Suggested next steps.	Section 4.5 (Implications for Practice); Section 5 (Conclusions)
Other Information			
Funding	18	Sources of funding that supported this work. Role, if any, of the funding organization in the design, implementation, interpretation, and reporting.	Funding