

On-line Appendix 1: Timeline of different activities related to improvement work at Arkansas Children's Hospital CF Care Center from February 2006 to the end of the year in 2012.

Year/month	Action
<b>2006</b>	
February	<ul style="list-style-type: none"> <li>• Established LLCIV team</li> <li>• Drafted ground rules</li> <li>• Reviewed PORT CF data</li> <li>• Mailed FAB applications</li> <li>• Discussed QI aims</li> </ul>
March	<ul style="list-style-type: none"> <li>• Began microsystems evaluation</li> <li>• Worked on 5 P's (purpose, patients, professionals, processes, patterns)</li> <li>• Drafted staff satisfaction survey</li> <li>• Initial FAB meeting</li> <li>• Sent patient/physician ratio list to Appointment Center to ensure clinic schedule allowed each patient 3 CF clinic slots per 6 months</li> </ul>
April	<ul style="list-style-type: none"> <li>• Presented FAB plan, do, study, act process in Bethesda</li> <li>• Worked on clinic profile and demographics</li> </ul>
May	<ul style="list-style-type: none"> <li>• Created fishbone for barriers to clinic attendance</li> <li>• Created clinic flow chart</li> <li>• Discussed themes and specific aims</li> <li>• Drafted patient satisfaction survey</li> <li>• Reviewed CF patients in 2005 seen less than 4 times looking for patterns of non-adherence (i.e. age, gender, season, insurance, geographic area, or physician)</li> </ul>
June	<ul style="list-style-type: none"> <li>• Finalized purpose statement</li> <li>• Met with pulmonary section regarding LLCIV goals</li> <li>• Collated staff and clinic satisfaction surveys</li> <li>• Drafted rescheduling algorithm for missed appointments</li> <li>• Started clinic time cycle studies</li> </ul>
July	<ul style="list-style-type: none"> <li>• Distributed patient satisfaction survey to assess perception of care</li> <li>• Met with centralized scheduling team</li> <li>• Revised clinic template to include CF- specific slots</li> </ul>
August	<ul style="list-style-type: none"> <li>• Internal display posted</li> <li>• Met with nurses on rescheduling algorithm participation</li> <li>• Began run chart for patient specific missed appointment rates</li> <li>• Met with ACH information technology group to create daily missed appointment reports</li> <li>• Ended clinic time studies</li> <li>• First FAB newsletter distributed highlighting importance of clinic</li> </ul>

	attendance
September	<ul style="list-style-type: none"> <li>• Met with physicians and nurses on staff satisfaction results</li> <li>• Collated time study data, and patient satisfaction results</li> </ul>
October - December	<ul style="list-style-type: none"> <li>• Status report to LLCIV and poster presentation at the North American CF Conference</li> <li>• Nutrition algorithm and monitoring started</li> </ul>
	<ul style="list-style-type: none"> <li>• 2 issues of FAB newsletters distributed during 2006</li> </ul>
<b>2007</b>	
	<ul style="list-style-type: none"> <li>• Quarterly posting of clinic attendance, and BMI/W-L % on internal display and emailed to CF Team</li> <li>• Three issues of FAB newsletter distributed during 2007</li> </ul>
January	<ul style="list-style-type: none"> <li>• Reviewed run charts</li> <li>• Outlined Center playbook</li> <li>• Reviewed rescheduling algorithm, met with appointment center</li> <li>• Auto emails sent to office assistant</li> <li>• Reviewed nurses role in rescheduling</li> </ul>
Feb- Mar	<ul style="list-style-type: none"> <li>• Met with Appointment Center to standardize rescheduling algorithm</li> </ul>
May	<ul style="list-style-type: none"> <li>• Appointment Center opened on 5/4</li> <li>• Assistant tracked patients who missed appointments to be rescheduled</li> <li>• Reviewed scheduling issues with Section Chief since physician calendars not released hence appointment slots not available for next fiscal year (July 1 2007)</li> </ul>
June	<ul style="list-style-type: none"> <li>• Final LLCIV meeting</li> <li>• Standardized practice and continued monitoring through the outpatient committee as part of the CF Leadership team</li> <li>• Monitoring of attendance: monthly through CFF Registry and quarterly through internal database</li> </ul>
<b>2008</b>	
	<ul style="list-style-type: none"> <li>• Quarterly posting of clinic attendance, and BMI/W-L % on internal display and emailed to CF Team</li> <li>• Three issues of FAB newsletter distributed during 2008</li> <li>• Continued monitoring through the outpatient committee as part of the CF Leadership team</li> <li>• Monitoring of attendance: monthly through CFF Registry and quarterly through internal database</li> </ul>
Feb	<ul style="list-style-type: none"> <li>• Decision to establish an award to be given to 3 randomly selected patients who met 4 or more visits at the end of each calendar year</li> </ul>
May	<ul style="list-style-type: none"> <li>• Outreach clinic in the northwestern part of the state opened with reassignment of patient/MD appointment slot ratios</li> </ul>
June	<ul style="list-style-type: none"> <li>• Meeting was held with the Appointment Center team to discuss issues with staff not following the rescheduling decision tree</li> </ul>
July	<ul style="list-style-type: none"> <li>• Changes were made to the appointment letter template and automated phone calls to patients</li> </ul>

<b>2009</b>	
	<ul style="list-style-type: none"> <li>• Quarterly posting of clinic attendance, and BMI/W-L % on internal display and emailed to CF Team</li> <li>• Two issues of FAB newsletter distributed during 2009</li> <li>• Continued monitoring through the outpatient committee as part of the CF Leadership team</li> <li>• Monitoring of attendance: monthly through CFF Registry and quarterly through internal database</li> </ul>
<b>2010</b>	
	<ul style="list-style-type: none"> <li>• Quarterly posting of clinic attendance, and BMI/W-L % on internal display and emailed to CF Team</li> <li>• One issue of FAB newsletter distributed during 2010</li> <li>• Continued monitoring through the outpatient committee as part of the CF Leadership team</li> <li>• Monitoring of attendance: monthly through CFF Registry and quarterly through internal database</li> </ul>
October	<ul style="list-style-type: none"> <li>• Annual CFF Quality Care Award: Recognizing Outstanding QI Projects and Accomplishments</li> </ul>
<b>2011</b>	
	<ul style="list-style-type: none"> <li>• Quarterly posting of clinic attendance, and BMI/W-L % on internal display and emailed to CF Team</li> <li>• Two issues of FAB newsletter distributed during 2011</li> <li>• Continued monitoring through the outpatient committee as part of the CF Leadership team</li> <li>• Monitoring of attendance: monthly through CFF Registry and quarterly through internal database</li> </ul>
Feb	<ul style="list-style-type: none"> <li>• Nurses were included in the notification of patients to be rescheduled sent by the office assistant</li> </ul>
<b>2012</b>	
	<ul style="list-style-type: none"> <li>• Quarterly posting of clinic attendance, and BMI/W-L % on internal display and emailed to CF Team</li> <li>• Three issues of FAB newsletter distributed during 2012</li> <li>• Continued monitoring through the outpatient committee as part of the CF Leadership team</li> <li>• Monitoring of attendance: monthly through CFF Registry and quarterly through internal database</li> </ul>

CF = Cystic Fibrosis, BMI = Body mass index, W-L = Weight-for Length, and FAB = Family Advisory Board, QI = Quality Improvement, LLCIV = Learning and Leadership Collaborative IV, CFF = Cystic Fibrosis Foundation, PORT CF = CFF Patient Database.