

Supplementary Online Content

Woods-Hill CZ, Koontz DW, Colantuoni EA, et al; Bright STAR Authorship Group. Sustainability of the Bright STAR diagnostic stewardship program to reduce blood culture rates among critically ill children. *JAMA Pediatrics*. Published online September 11, 2023. doi:10.1001/jamapediatrics.2023.3229

eTable 1. Comparison of Program Level Activities in the Post-implementation vs Sustainability Period

eTable 2. Example Site CSAT Tool (Site Identifying Information Removed)

eTable 3. CSAT Tool Domains Addressed in Site Plans, Summarized by Site; and Examples of How Different Sites Proposed to Practically Accomplish That Task in the Sustainability Period

This supplementary material has been provided by the authors to give readers additional information about their work.

eTable 1. Comparison of Program Level Activities in the Post-implementation vs Sustainability Period

Task or activity	Post-implementation period	Sustainability period
Coaching calls with individual sites	Monthly	None
Collaborative-wide calls	Quarterly	None
Implementation surveys	Semi-annually	None
Data sharing	Monthly	At close of sustainability period

eTable 2. Example Site CSAT Tool (Site Identifying Information Removed)

Bright STAR Sustainability Worksheet

Site:

Project Leads:

Domain (examples)	Owner	Frequency	Description
Engaged Staff & Leadership			
Project Champions identified	Primary PICU lead		
Core support team established	PICU leads	Quarterly	
Engaged Stakeholders			
Critical stakeholder groups – maintain existing relationships, partner with new stakeholders as needed	PICU lead	Quarterly	Will review project with PICU QI committee – involves MD and RN PICU leadership
Presentations beyond the unit			Not currently planned
Incorporate stakeholder views	PICU lead	Quarterly	Will review project with PICU QI committee – involves MD and RN PICU leadership
Organizational Readiness			
Clinical support – buy-in for clinical approach; acceptance of clinical tool			Completed with initial implementation
Project Support – process for data collection, data review	PICU leads	Monthly data pull	Continue to use automated data pull for culture rate
Workflow Integration			
Clinical pathways, algorithm, order sets, etc.	Primary PICU lead		Attempt to have add to EHR
Standardized work process			
Implementation & Training			
Educate new unit clinicians	Primary PICU lead	qJuly for fellows, as needed for faculty	Will educate new fellow/faculty during orientation
Reeducate all unit clinicians	Primary PICU lead	Quarterly	Will review quarterly at M and M with all staff
Feedback on non-compliance to unit	Primary PICU lead	Quarterly	Will review quarterly at M and M with all staff
Feedback on safety surveillance	Primary PICU lead	Quarterly	Will review quarterly at M and M with all staff
Monitoring & Evaluation			
Monthly BCX Rate	PICU leads	Monthly	
Safety auditing (review positive cultures)	PICU leads	Quarterly	Will likely change to quarterly

Unit level compliance with tool	PICU leads		Will examine more closely if rates increase
Outcomes & Effectiveness			
Regular review of data	PICU leads	Quarterly	
Adjustment to clinical tool or workflow as needed	PICU leads	Quarterly	Change based on quarterly data review or feedback from PICU QI committee

CSAT: Sustaintool. Washington University in St Louis. Retrieved May 25, 2020, from <https://www.sustaintool.org/csat/>.

eTable 3. CSAT Tool Domains Addressed in Site Plans, Summarized by Site; and Examples of How Different Sites Proposed to Practically Accomplish That Task in the Sustainability Period

Domain	Number of sites that addressed the domain in their CSAT	Examples of how sites practically addressed the domain
Engaged staff/leadership	11/14	Present at PICU divisional quality improvement committee meetings
Engaged stakeholders	10/14	Check-ins with PICU nursing leadership
Organizational readiness	10/14	Maintain support for dashboard or automated data reporting system in order to have easy access to blood culture rate data
Workflow integration	11/14	Continue to integrate Bright STAR guidance into sepsis huddle script
Implementation and training	13/14	Include information about Bright STAR program during orientation for new trainees
Monitoring and evaluation	12/14	Review blood culture rate data regularly
Outcomes and effectiveness	13/14	Revise clinical tool as needed based on feedback from PICU QI committee