SUPPLEMENTARY DOCUMENT (APPENDIX)

Implementation and timeline

Table A1. PICU Liberation (PICUstars) implementation plan and timeline

Steps	Implementation process	Timeline
Engage (Phase 1)	 Establish the inter-professional team (RN, MD, Pharmacy, allied health). Include patient and family representatives, and research team members. Clarify roles and processes. Define problems, set goals and timelines. bundle adaptation to local PICU Australian context. Comprehensive assessment of impediments to bundle and Focus groups feedback on feasibility of proposed bundle developed by implementation group. Assess local practice and resources. Systematically assess enablers and barriers to implementation of the bundle using evidence-informed strategies and measures from the KT literature. Develop implementation protocol. Tailor PICU Liberation Bundle elements to the needs of the PICU. Develop a process for reliable Bundle delivery to all patients. Match Liberation interventions and processes to mitigate challenges identified in assessment phase. Determine evaluation strategy. A2F bundle adaption to the Australian PICU context. 	6 months
Educate (Phase 2)	 Train operational leads on all intervention activities. Train front line clinicians and stakeholders. Provide self-learning modules and resources including: A - Institutional analgesia and sedation guidelines education workshops, in-services, FLACC and WAT scoring educational videos B – safety screening tool and checklist for SABT and extubation readiness workshops and online education tools C – Institutional analgesia and sedation guidelines education workshops, in-services, RASS scoring educational video D – delirium checklist and guideline education tools including non-pharmacological delirium management strategies workshops and in-services, CAP-D scoring educational video E – early mobilisation and rehabilitation program education and training including activity level classification, mobility activities, assessment of physical function by cCPAx online examples F – consumer information hybrid booklet, education and training around tools used to ensure family inclusion 	6 months

	 G – education training around nutritional checklists/nutritional assessment tool used, importance of correct weight obtained H – education/training around tools to help personalise the patient for the clinicians (e.g. "getting to know you") and strategies to individualise care appropriately Measurement of baseline rate of PICU related complications (activity levels, over-sedation, withdrawal, delirium, PICU acquired weakness, ventilated patient days, VAP, CLABSI, immobility, CAUTI, fall, mediation error, PICU readmission, accidental line removal. 	
Execute (Phase 3)	 Integrate PICU Liberation into practice. Unit wide roll-out, one to three bundle elements at every one time. Regular assessment of above elements, these might be revised depending on feedback and evaluations. "Provide care as required" to improve each element of the bundle. Post-marketing and education. Pilot-Implementation, ongoing adaptation. 	24 months
Evaluate (Phase 4)	 Evaluate Impact of PICU Liberation on practice. Regular evaluation -refine implementation and target education in response to feedback and control chart data implementation process and efficacy outcomes measurement. Re-measure bundle fidelity over time to determine maintenance of new practices. Assess impact of PICU Liberation on PICU related complication incidence and patient outcomes. Assessment of feasibility, implementation success and impact. 	12 months (overlap with execution phase as evaluation begins as bundle elements are rolled out)