

SOOTHE: Implementation

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Keys to Building a Successful Initiative



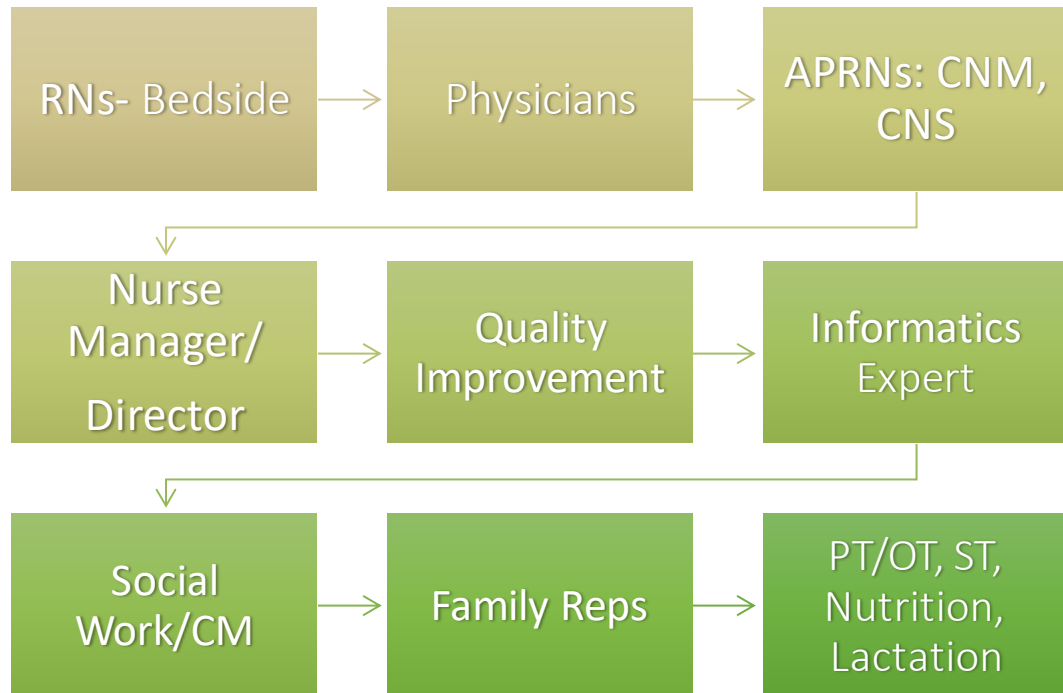
Engage Key Stakeholders
from the Start

Interdisciplinary Planning
and Implementation

C- Suite Support

Consistent Commitment
By All Team Members

Who Should Be On The Team?



Components of Successful Participation

- Create a QI culture—a team environment emphasizing quality and patient safety
- Hold regular QI team meetings to follow and make progress
- Share important information, progress and successes with everyone impacted
- Be creative and flexible!

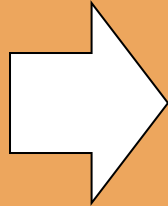


Create a Culture Ready for Change

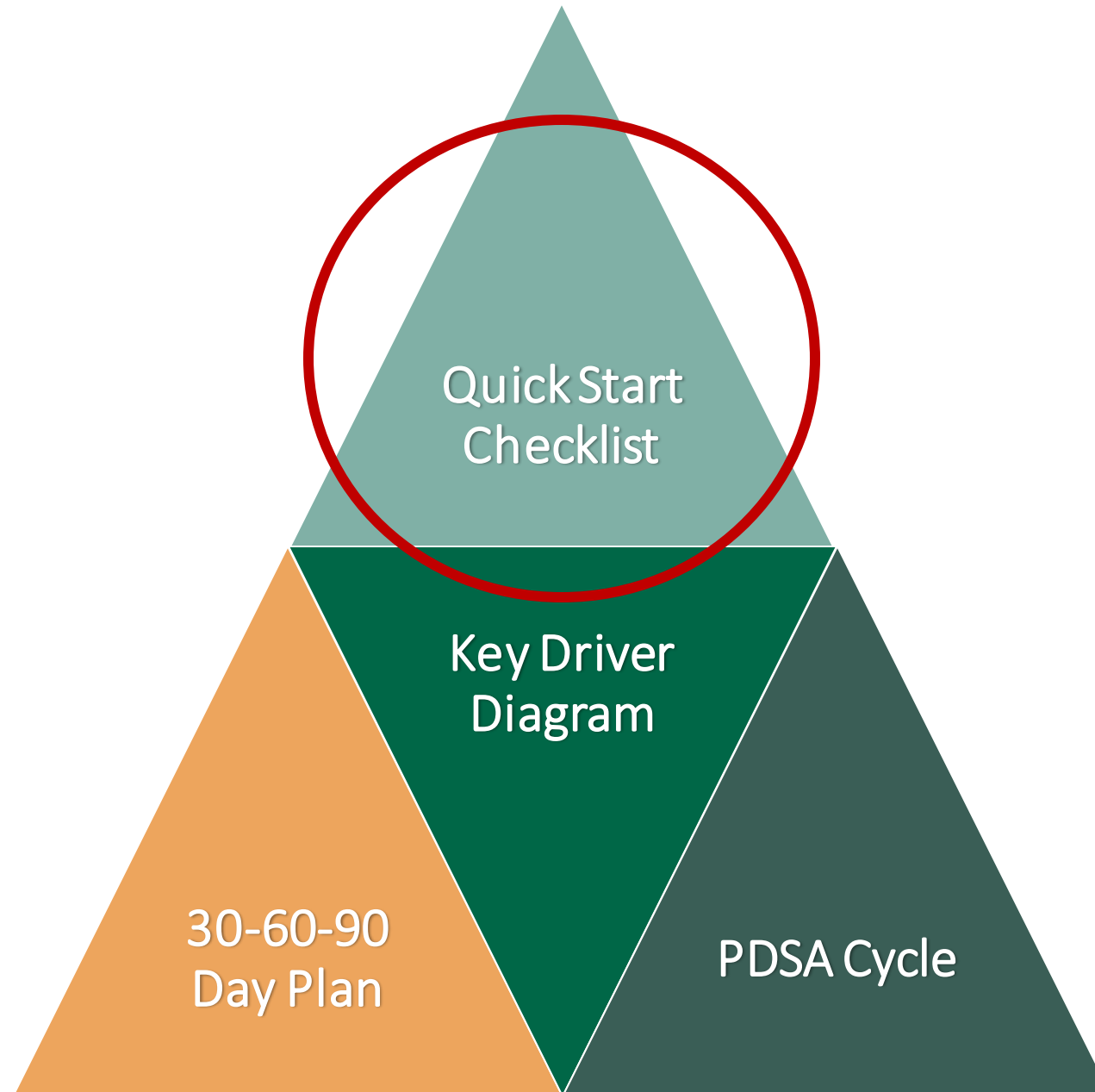
- Must be an interdisciplinary effort
- Teams must meet regularly
- Create safe environment for:
 - Sharing
 - Listening
 - Questioning
 - Persuading
 - Respecting
 - Helping
- Use the Toolkit!
- Get Team engaged with the “Why”



Team Meetings



- Initially meet bi-weekly or monthly depending on work
- Include all departments affected
- Include community/family rep
- Have an agenda and minutes
- Review data, 30-60-90 Day Plan, PDSA cycles
- Discuss insights from webinars/coaching
- Share progress and challenges with administration – follow communication plan



Quick Start Checklist



1. Recruit QI team – Lead, MD lead, RN lead, QI/data lead, administrative champion



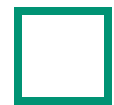
2. Review, complete and return Data Use Agreement



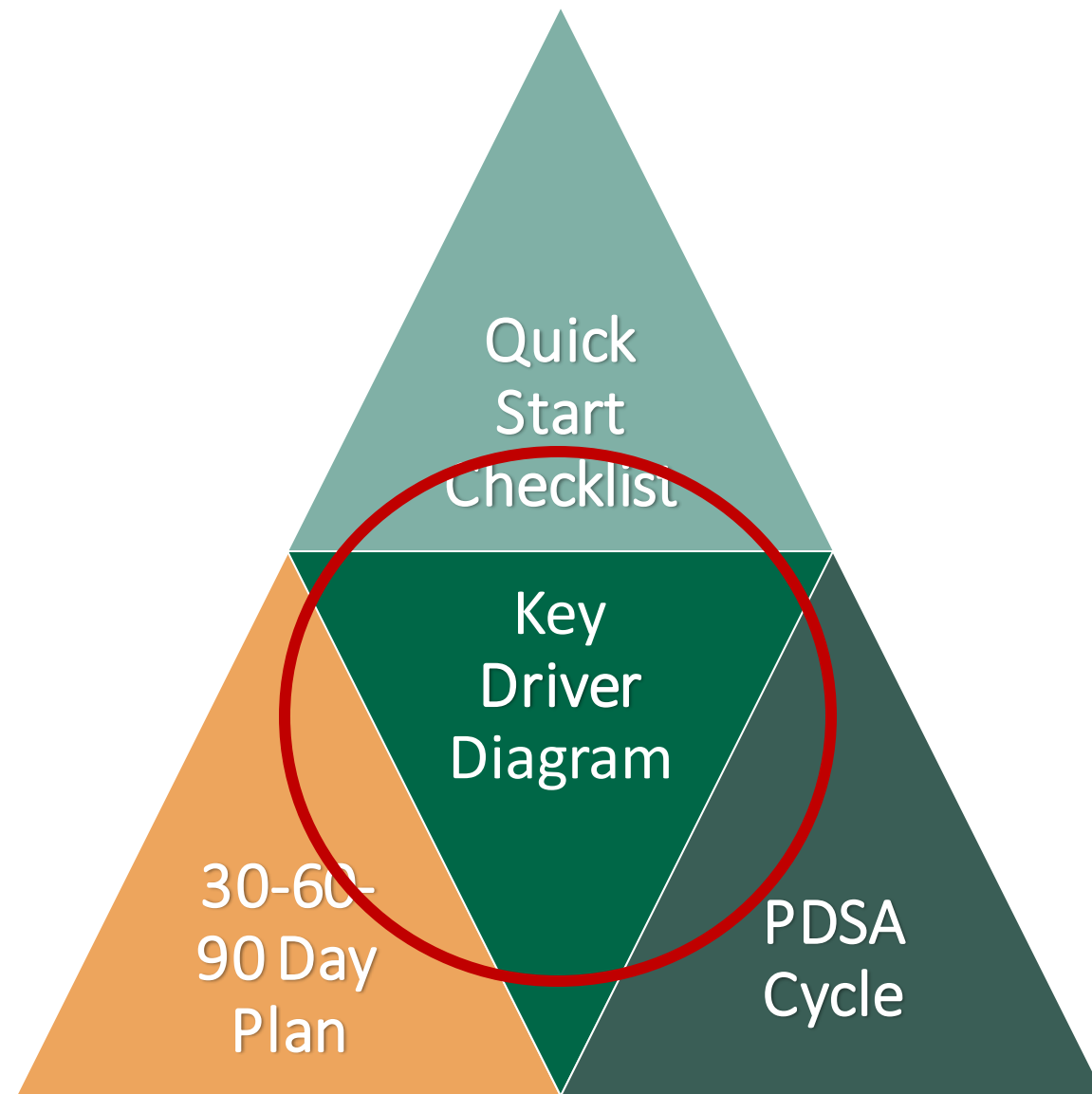
3. Attend Kick-off Meeting



4. Complete the Pre-Implementation Survey



5. Write down questions or concerns



Tools to Use

SOOTHE: Supporting Optimal Outcomes Through a Healing Environment

Global aim: Support hospitals and care teams in fostering a neuroprotective NICU culture by training staff and providers, engaging families, optimizing developmentally appropriate sensory care, and minimizing unnecessary interventions to promote a nurturing environment for infants.

Aim

By 6/2027:

- -80% of participating NICUs will implement at least 1 evidence-based strategy from each of these sensory domains (sight, sound, touch, and taste/smell) to improve the sensory environment
- Achieve a 20% increase in families educated on recognizing and responding to infant stress cues

Primary Drivers

Readiness

Sensory Environment

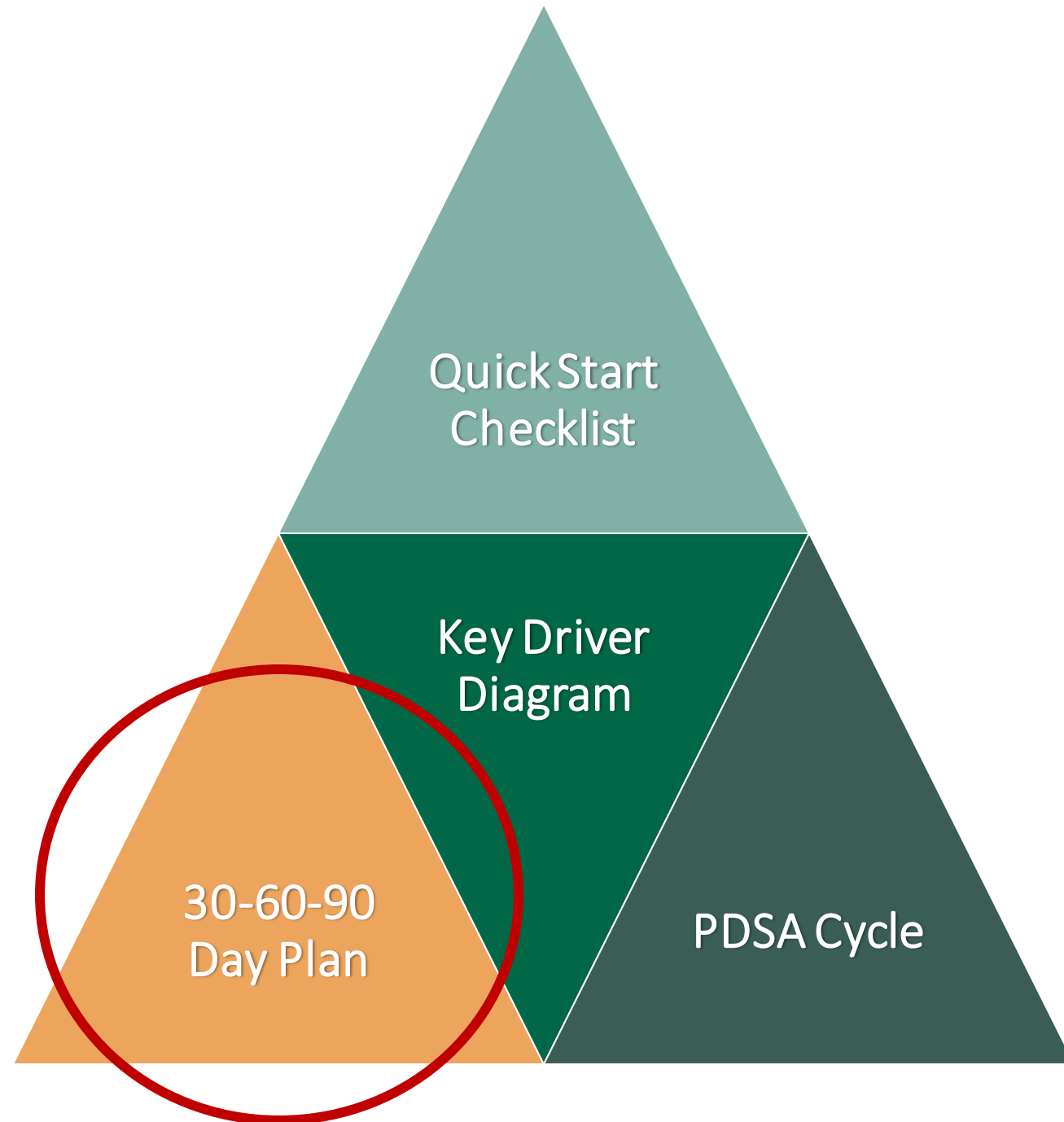
Recognition

Noxious Stimuli

Response

Positive Touch/Interactions

**Respectful care is a universal component of every driver and activity*



30-60-90 Day Plan

Foundations	
Strengths	
Barriers	

Focus Area

Looking Ahead	
Three Things to Accomplish in the Next 30 Days	<div>1.</div> <div>2.</div> <div>3.</div>
Three Things to Accomplish in Next 60 Days	<div>1.</div> <div>2.</div> <div>3.</div>
Three Things to Accomplish in Next 90 Days	<div>1.</div> <div>2.</div> <div>3.</div>

3 Things to Accomplish in the Next 30 Days



Review interdisciplinary team members and fill any gaps



Schedule team monthly meetings for the next 6 months



Review/revise policies, procedures and education plans

What is a PDSA cycle?

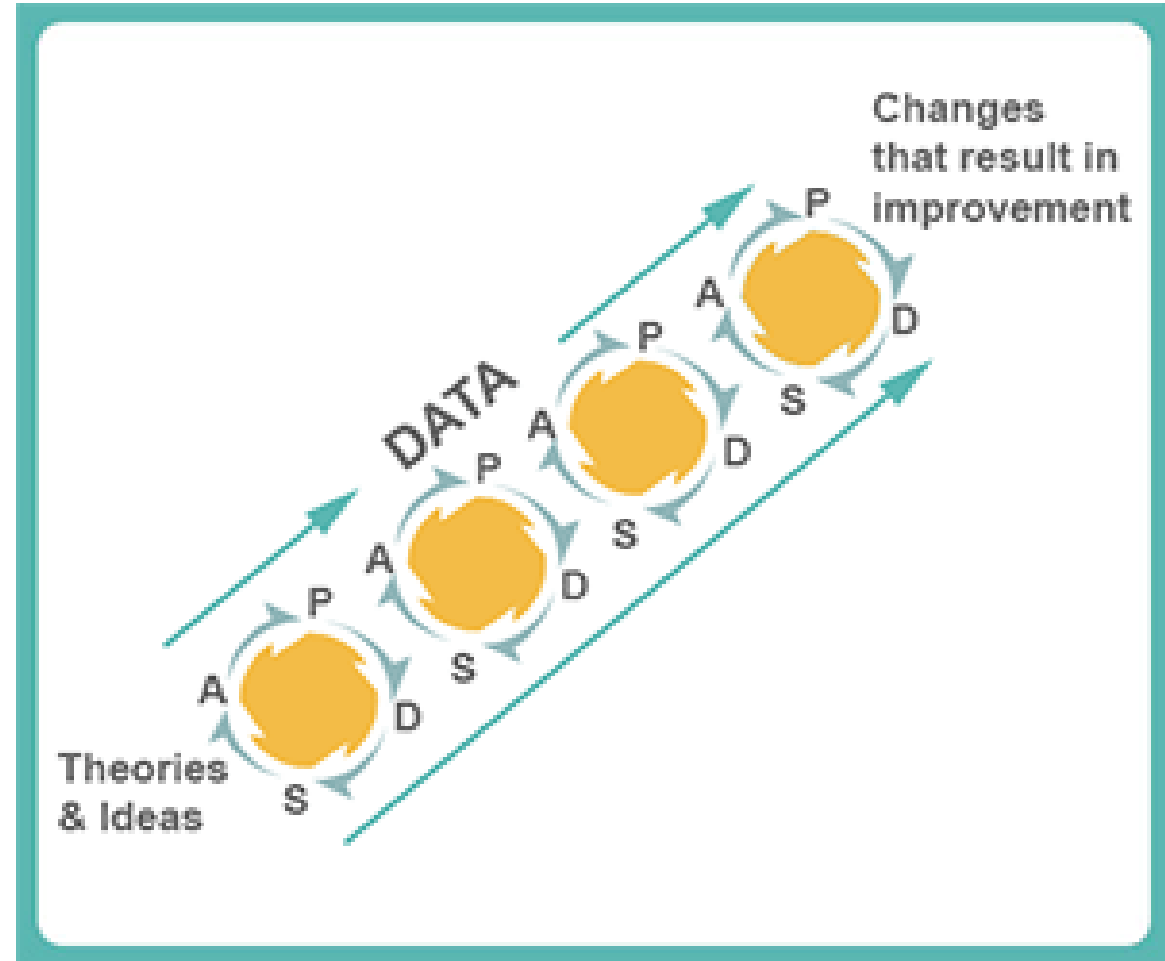
- Useful tool for developing & documenting tests of change to for improvement
- AKA PDCA

P – **Plan** a test

D – **Do** a test

S – **Study** & learn
from test results

A – **Act** on results



Reasons to test changes

Benefits of PDSA cycles



Learn whether change will result in improvement



Predict the amount of improvement possible



Evaluate the proposed change work in a ***practice environment***



Minimize resistance at implementation

PDSA Worksheet

Use Plan-Do-Study-Act to Help Create Action Plans

This plan-do-study-act (PDSA) worksheet helps create your action plan.

FOCUS:

STEP:

CYCLE:

PLAN

Which initiative driver is being addressed? What is the problem?

What is our goal?

DO

What intervention did we test and how did we measure it?

STUDY

What worked well?

What didn't work?

What did we learn that was unexpected?

ACT

What are our next steps?

Potential Implementation Barriers & Strategies to Overcome

Potential Barrier Drivers

- Time limitations

Strategies to Overcome

- Make sure meetings are organized and succinct
- Involve bedside clinical team members-consider use of clinical ladder
- Standardize meeting time for ease of scheduling; consider virtual option
- Use regularly scheduled department meetings to highlight project and results-be succinct

As the Project Continues...

- **Celebrate** successes along the way
- **Display data** by keeping it current AND interesting
- **Make it stick**
 - Routinization
- **Plan for sustainability**



Assess	Review	Attend	Plan
Assess your team to assure all critical departments included	Review Toolkit and Toolbox resources	Attend Data Collection Webinar: October 29th, 2025	Plan for launch – bulletin boards; staff meetings; event invitations

October - December 2025

January 2026

Launch

Official launch at your hospital!

Plan to participate on monthly coaching calls!

Educate clinicians & hospital leadership on importance of SOOTHE & hospital standards

Engage clinical team early & often!



Begin

Begin submitting prospective data!

Plan a call with your Coach-Mentors!

SOOTHE Resources

**Monthly
Coaching Calls
with hospitals
state-wide**

Online Toolbox

**Algorithms, Sample protocols, Education tools, Competencies,
Slide sets, etc.**

Technical Assistance

**from FPQC staff,
state Clinical
Advisors, and
National Experts**

**Educational
sessions,
videos, and
resources**

**Initiative-wide
collaboration
meetings**

**Monthly and
Quarterly QI
Data Reports**

**Regular
E-mail Bulletins**

**Custom, Personalized
virtual, phone, or on-site
Consultations & Grand Rounds
Education**

SOOTHE Website

<http://www.fpqc.org/SOOTHE>

Questions?

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Florida Perinatal Quality Collaborative



Florida Perinatal Quality Collaborative



@thefpqc



Meet Your Coach-Mentors
