

Checklist for family-centered rounds deemed beneficial

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2.43, 4.28, and 12.43, respectively). There was no difference from usual care in intervention families' engagement and reports of safety climate. However, changes in these outcomes were seen with performance of specific checklist elements; for example, order read-back correlated with significantly more family engagement, and asking families for questions correlated with significantly better ratings of staff communication openness and safety of handoffs and transitions.

"Implementing the <u>checklist</u> improves delivery of FCRs, impacting quality and safety of care," the authors write.

More information: <u>Abstract</u>
<u>Full Text (subscription or payment may be required)</u>

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(HealthDay)—Implementation of a family-centered rounds (FCR) checklist and associated provider training is associated with an increase in the number of FCR elements performed, according to a study published online April 25 in *Pediatrics*.

Elizabeth D. Cox, M.D., Ph.D., from the University of Wisconsin School of Medicine and Public Health in Madison, and colleagues conducted a cluster randomized trial involving 298 families. Two hospital services were randomized to use the checklist, and two provided usual care. The performance of eight FCR checklist elements and family engagement were evaluated from 673 FCR videos; the safety climate was assessed with the Children's Hospital Safety Climate Questionnaire.

The researchers found that the intervention resulted in a significant increase in the number of FCR checklist elements performed (? = 1.2). Intervention rounds were significantly more likely to include asking the family or health care team for questions and reading back orders (odds ratios,



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