Breaking Down Communication Barriers: Family Centered Rounds

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Unique Barriers
Due to the nature of our CICU we had some unique barriers which included:
• Maintaining confidentiality of patient information due to lack of walls between bed spaces
• Acceptance of process change by staff
• Time restraints due to fast paced nature of CICU
• Children’s Healthcare of Atlanta is a teaching facility and rounds is an integral time for teaching

Solutions To Barriers
• To ensure confidentiality, parents are called back one by one through a sign up process before rounds
• To help with staff acceptance, education was provided and time for discussion was allotted. Evidence of other centers success with family centered rounds was highlighted
• To best facilitate timeliness, secretaries call families when team is rounding at adjoining bed space
• To allow for teaching, families were provided with a handout that described rounds and each individual’s role in the team

Outcomes
• Parents felt more included in their child’s care plan
• Staff felt family centered rounds helped facilitate communication between the team and parents
• After hearing of our success many other units in the hospital started to offer family centered rounds

Results
• Overall staff perception of family centered rounds was more positive after participating in family rounds for three months.
• Parents were surveyed and stated that they felt empowered and were able to better communicate with their child’s care team.
• Confidentiality was maintained for patients in the unit
• Teaching during rounds remained the same
• The FCC continues to monitor the rounding process and makes improvements based on feedback from families and staff

Going Forward
Like any other patient care initiative, the FCC works to evolve Family Centered Rounds to the needs of the patients and their families. Since initiating rounds we have made:
• Tools to enhance communication for the sign up process
• Attempts to make family participation higher
• Different ways to notify families
• Ways to improve patient wait times
Special thanks to the FCC and all the CICU support staff, nurses, and doctors for your continued support of this initiative

Background
• Current evidence based practice shows family presence at rounds enhances communication between families and the medical team.
• Families identified a need to be more involved with their child’s physician decision making process and they wanted to have time to discuss their child’s daily plan of care with the medical team.
• The Cardiac Intensive Care Unit (CICU) is a 27 bed unit with minimal private rooms. This unit layout presented unique challenges.
• The Family Centered Care Committee (FCC) researched and then implemented family centered rounds.

Objectives
• Provide an opportunity for families to participate in daily morning rounds
• Improve communication between families and the medical team
• Design and implement family centered rounds in the CICU
• Improve staff perception of benefits vs. workload of facilitating family rounds

Description
• The FCC performed a literature review of current EBP concerning family centered rounds
• The FCC devised a plan with the interdisciplinary team to implement family centered rounds
• Both parents and staff were surveyed prior to the pilot two week trial
• FCC provided education to staff about benefits and logistics of implementing family centered rounds
• During admission each family was presented a handout outlining the family centered rounds process
• Parents and staff were surveyed three months after implementation

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Rounds in Action

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Staff Perceptions of Positive Impacts of Family Centered Rounds (FCR)

Enhance Communication Between Family and Team
Increase Family Involvement in Decision Making
Create Positive Impact on Patient Care
Support Discussion of All Aspects of Patient Care

Prior to FCR
After FCR