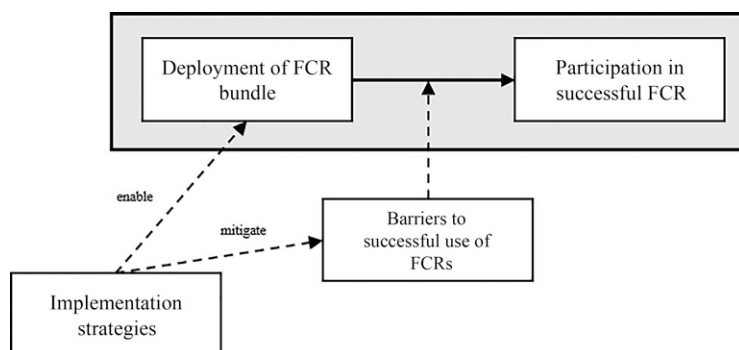


## Supplemental Materials



**SUPPLEMENTAL FIGURE 2** Analytic framework for scoping review.

**SUPPLEMENTAL TABLE 5** Scoping Review Query in PubMed and Medline

Criteria <sup>15</sup>	Primary Query	Secondary Validation Query
Context	(((((Teaching rounds[MeSH Terms]) OR family-centered rounds[MeSH Terms]) OR rounds[Title]) OR round*) OR family-centered rounds)	((family centered rounds) OR (family-centered rounds) OR (family-centered rounding)) OR (family centered rounding))
	AND	AND
Populations	((((((((((((((((((Parent*) OR family) OR Parental Consent[MeSH Terms]) OR Parental Notification[MeSH Terms]) OR Family[MeSH Terms]) OR Legal Guardians[MeSH Terms]) OR Caregivers[MeSH Terms]) OR parent[Title/Abstract]) OR parental[Title/Abstract]) OR parents[Title/Abstract]) OR mother[Title/Abstract]) OR mothers[Title/Abstract]) OR father[Title/Abstract]) OR fathers[Title/Abstract]) OR family[Title/Abstract]) OR families[Title/Abstract]) OR familial[Title/Abstract]) OR maternal[Title/Abstract]) OR paternal[Title/Abstract]) OR caregiver[Title/Abstract]) OR caregivers[Title/Abstract]) OR guardian[Title/Abstract]) OR guardians[Title/Abstract]))	(pediatric)
	AND	
Concept	((((((((((((((barrier*[MeSH Terms]) OR barrier*) OR facilitator*[MeSH Terms]) OR facilitator*) OR enabler[MeSH Terms]) OR enabler*) OR barrier[Title/Abstract]) OR barriers[Title/Abstract]) OR facilitator[Title/Abstract]) OR facilitators[Title/Abstract]) OR enable[Title/Abstract]) OR enablers[Title/Abstract]) OR implementation[MeSH Terms]) OR implementation[Title/Abstract]))	

MeSH, medical subject headings.

**SUPPLEMENTAL TABLE 6** Exclusion Criteria for Title, Abstract, and Full-Text Screening

## Exclusion Criteria

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Studies before 2009

Studies outside the United States, Canada, Western Europe, Scandinavia, and Australia and New Zealand

Studies that focused on family-centered care more generally and did not specifically address FCRs

Studies that discussed multidisciplinary teaming more generally without specifically referencing FCRs

Studies that only include adult patient care

Studies that are limited to revealing methods for conducting FCR-related implementation research without results

Study protocols or other nonstudy articles

Non-English-language articles

Elements of family-centered rounding that are peripheral to the primary focus of this synthesis

Studies on enabling technologies themselves not in the context of a broader FCR study

Studies involving stakeholder roles outside patients, families, or clinicians

Systematic reviews

Other out of scope topics not referenced above

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**SUPPLEMENTAL TABLE 7** Charting the Results

Data Element	Further Study Classification by Reviewers
Study authors, publication year, name, title	
Primary study aims	Understand clinical team attitudes and perceptions; understand patient attitudes and perceptions; understand family attitudes and perceptions; barrier identification to FCR; FCR implementation strategy testing; and other aims
Population description	Clinicians, families, and/or patients
Geographic location(s)	Site count; site beds; facilities within site in scope; beds within the facilities within scope; city, state, and country; rural or urban
Service context	General pediatric, inpatient, PICU, NICU; or other
Delivery system type	University-affiliated, community-based, or both
Study methods	General study description; general study type (experimental, quasi-experimental, observational, or systematic review); observation timing (retrospective, prospective, or cross-sectional); study data type (qualitative, quantitative, or mixed); data collection approach; sample size; and primary study outcomes
Description of FCR	Roles; location; process (before, during, and after rounds); delivery methods; and artifacts
Description of implementation strategies intervention	General implementation description and timing (before, during, or after rounds)
Barriers to using FCR or similar rounding approach	Individual, intervention, inner setting, external setting, and/or implementation

**SUPPLEMENTAL TABLE 8** Criteria for Classification and Presentation of Studies by Table

Table No.	Study Classification and Disclosure Criteria
1	For classification and presentation of studies by study aim and study design, classification of the studies to $\geq 1$ of the 4 scoping review aims was included if, in the study, the researchers explicitly referenced the objective as a primary or secondary study aim with evidence described in the Results and/or Discussion section of the article.
2	For presentation of rounding elements, we excluded from the analysis, because of limited data, studies in which researchers (1) provided no definition of the type of FCR being studied in the Methods section of the study or (2) were limited to a summary definition of FCR, most commonly that FCR involves an interdisciplinary team with active participation by the patient and family in the development of the management plan. Information in the Introduction, Results, and Discussion sections were reviewed to identify possible additional FCR elements not explicitly identified in the Methods section of the article. Implicit references to rounding elements in place before the study began or suggested in the article could not be reasonably confirmed and were excluded. Where the particular study referenced another article to define the FCR intervention, the secondary source was used to capture a complete definition when possible.
3	We limited presentation of barriers to only those studies in which barrier identification was an explicit primary or secondary aim of the study and were presented in the Results section or if identified barriers persisted after implementation of an intervention and were explicitly identified postimplementation, usually in the Discussion section of the article. Barriers may include suspected or demonstrated barriers.
4	We limited the discussion of implementation strategies to those studies in which researchers are testing some form of implementation of FCRs generally or a specific strategy designed to increase adherence to a previously implemented intervention. We did not capture strategies executed before the study, unless they were explicitly referenced in the Methods section of the article as part of the approach.

**SUPPLEMENTAL TABLE 9** Hierarchy of Evidence by Scoping Review Aim

Study Methods Deployed	Melnik Evidence Hierarchy Rating	Understand Clinician Attitudes and Perceptions (n = 27), n (%) <sup>3,7,23-27,30,37,39,40,44-50,51-59</sup>	Understand Patient and Family Attitudes and Perceptions (n = 26), n (%) <sup>3,23,24,26,28-30,32,33,35,37-43,44,48,49,51-53,55,60,61</sup>	Identify Barriers to FCR Adherence (n = 39), n (%) <sup>2,3,7,23-27,29,30,33,36,37,39-51,53-65</sup>	Evaluate and Test FCR Implementation Strategies (n = 22), n (%) <sup>1,31,34-36,38,47,51-56,61,63,65-71</sup>
Descriptive or qualitative studies	VI	22 (81)	20 (77)	32 (82)	4 (18)
Prospective cohort studies (pre-post)	IV	5 (19)	5 (19)	7 (18)	16 (72)
Nonrandomized controlled trials	III	0 (0)	1 (4)	0 (0)	1 (5)
Randomized controlled trials	II	0 (0)	0 (0)	0 (0)	1 (5)