

## Family Safety Time Out Checklist

Patient MRN:

This form is completed by \_\_\_\_\_ on \_\_\_\_\_

\*\*This is a worksheet and not part of the medical record, place in binder (ask charge) when complete\*\*

☐ **Decision made to call Time Out**

Checklist completed by:

- On weekdays: SW
- On weekends: post-partum lead

☐ **Pertinent patient-care team members alerted by** \_\_\_\_\_

Meeting involves:

- Social Worker: \_\_\_\_\_
- Primary OB provider: \_\_\_\_\_
- Primary Peds provider: \_\_\_\_\_
- Primary RN from H22/24/25: \_\_\_\_\_
- Charge RN from H22/24/25 or post-partum lead: \_\_\_\_\_

Best practice (if possible), to also reach out to:

- Patient PCP and/or prenatal care provider: \_\_\_\_\_
- Outpatient Social Worker: \_\_\_\_\_
- PHN: \_\_\_\_\_
- OB/Psych team representative: \_\_\_\_\_
- Case worker/counselor from outside program (e.g. HPP): \_\_\_\_\_

☐ **Family Care Plan (POSC) Reviewed/Updated/Created (if useful, import to Care Coordination note)**

Topics to address:

- ☐ **Discussed strengths of patient**
- ☐ **Discussed challenges to parenting patient is facing**
- ☐ **Identified patient's social support**
- ☐ **Discussed comments of care-team members not present at meeting**
- ☐ **How did identities, power, privilege, and bias affect this case?**
- ☐ **What Structural Determinants are impacting this case?**  
(racism-language barriers-differential access to healthcare-stigma-poverty)

☐ **CPS referral needed / not needed (circle one)**

☐ **Rationale for decision:**

☐ **If referral needed, next steps:**

- ☐ **Discuss CPS referral decision with patient**
- ☐ **Discuss with patient plan for care of self and baby before CPS interview and create POSC to support the process if time permits**
- ☐ **Alert Nursing Station (where patient is located) of referral & who to notify upon CPS caseworker arrival**
- ☐ **Support that can be offered to patient**
  - Link to supportive programs of value to parent
  - Identify any family / friend to contact for support
  - Discharge planning with supports outlined
  - Consider PHN referral, Healthy Steps (if 6M), or linkage to relevant Community Program
- ☐ **Pre-escalation/De-escalation**
- ☐ **Discuss with patient if they would like care-team members to stay with them through the referral**
- ☐ **Offer time for self-care**
- ☐ **Optimize timing of CPS visit by calling early in the day, or when patient stable**
- ☐ **Address any acute physical or mental health needs of patient**
- ☐ **De-escalation checklist available PRN**

-----Form is recorded in binder/repository-----