



DBHDS Office of Licensing

SAMPLE Root Cause Analysis Policy

Disclaimer: This document is provided for educational purposes only. The provider's policy on conducting root cause analyses could be a separate policy or could be incorporated into the provider's serious incident reporting policy. If the provider chooses to incorporate their root cause analysis policy into their serious incident reporting policy, the header for the document should clearly mark that the policy addresses both regulations. This document is not a template for a root cause analysis (RCA) policy.

Providers should also reference [Guidance for Serious Incident Reporting](#).

12VAC35-105-20 defines a root cause analysis as “a method of problem solving designated to identify the underlying causes of a problem. The focus of a root cause analysis is on systems, processes, and outcomes that require change to reduce the risk of harm.”

Providers shall consider the following questions when developing a root cause analysis policy, so that the policy clearly outlines the procedures the provider will follow. The provider should reference the regulatory language (italicized below) in order to guide their policy while making the policy appropriate for their organization's size and population served.

When is an RCA required?

12VAC35-105-160.E – a root cause analysis shall be conducted by the provider within 30 days of discovery of Level II serious incidents and any Level III serious incidents that occur during the provision of a service or on the provider's premises.

While the regulation outlines when an RCA is required, the provider may choose to include additional times or situations when an RCA is to be completed.

What should be included in an RCA?

12VAC35-105.160.E.1 - The root cause analysis shall include at least the following information:

- a. A detailed description of what happened;*
- b. An analysis of why it happened, including identification of all identifiable underlying causes of the incident that were under the control of the provider; and*
- c. Identified solutions to mitigate its reoccurrence and future risk of harm when applicable,*

A provider may have a certain form or format that is utilized for ensuring that the above information is included.

Who will complete the RCA?

It is recommended that the provider's policy outline who will complete the RCA. The staff assigned to conduct the RCA would vary depending on the situation/incident and the provider's policy could include that the provider's leadership may assign RCA team members. This section

could also include the process involved such as submitting the completed RCA to a supervisor and/or committee/team for review.

What are the provider's requirements for the timeframe for conducting the RCA?

The regulations require that the RCA be conducted within 30 days of discovery of Level II serious incidents and any Level III serious incidents that occur during the provision of a service or on the provider's premises.

How will recommendations and/or actions be implemented and monitored for effectiveness?

The provider could outline how the recommendations will be made to a supervisor or a committee/team. Based on the provider's policy, recommendations implemented should be monitored for effectiveness. For example, if a new process is recommended, the policy could outline who will ensure that the process is outlined, implemented and monitored for the desired outcome.

When will a more detailed RCA will be conducted?

When identifying thresholds, consider what is best for the organization because the purpose of the RCA process is to help the provider mitigate reoccurrence of serious incidents and make systemic improvements.

12VAC35-105-160.E.2 - The provider shall develop and implement a root cause analysis policy for determining when a more detailed root cause analysis, including convening a team, collecting and analyzing data, mapping processes, and charting causal factors, should be conducted. At a minimum, the policy shall require for the provider to conduct a more detailed root cause analysis when:

- a. A threshold number, as specified in the provider's policy based on the provider's size, number of locations, service type, number of individuals served, and the unique needs of the individuals served by the provider, of similar Level II serious incidents occur to the same individual or at the same location within a six-month period;*

Example

A partial hospitalization program at one (1) location serves 25 individuals.

The provider's RCA policy states that when three (3) or more of the same Level II serious incidents occur to the same individual or at the same location within a six (6) month period, the provider conducts a more detailed RCA. The provider reports a Level II serious incident involving a serious injury onsite in May and two Level II serious injuries involving different individuals onsite in August. Based on the provider's RCA policy, a more detailed RCA is conducted because the threshold was met when three of the same Level II serious incidents occurred at the same location within six months.

Example

A supportive in-home provider for thirty (30) individuals with developmental disabilities has an RCA policy that states a more detailed RCA will be conducted when two (2) or more similar incidents occur to the same individual within a six (6) month period.

The provider reports a Level II serious incident involving a fall with fracture during the provision of services in December, and the same individual sustains a fall with fracture during the provision of services in March. The provider conducts a more detailed RCA because their policy is that two similar incidents occur to the same individual within a six-month period.

- b. *Two or more of the same Level III serious incidents occur to the same individual or at the same location within a six-month period;*

Example

An Intensive in-home provider serving fifty (50) individuals has an RCA policy that when two or more of the same Level III serious incidents occur to the same individual within a six-month period, the provider will conduct a more detailed RCA. The provider reports a Level III serious incident of a suicide attempt by an individual that results in hospital admission in March. In June, the provider reports a Level III serious incident of a suicide attempt that results in hospital admission by the same individual. The provider conducts a more detailed RCA in accordance with the provider's policy.

- c. *A threshold number, as specified in the provider's policy based on the provider's size, number of locations, service type, number of individuals served, and the unique needs of the individuals served by the provider, of similar Level II or Level III serious incidents, occur across all of the provider's locations within a six-month period; or*

Example

A supervised living residential service provider with three (3) locations serving 6-8 individuals per location has a policy that when three (3) similar Level II or Level III serious incidents occur across all of the provider's locations within a six-month period, the provider will conduct a more detailed RCA. In July the provider reports a missing individual at Location A; in August, the provider reports a missing individual at Location B; in September, the provider reports a missing individual at Location A. The provider conducts a more detailed RCA in accordance with the provider's policy.

Example

A day support program has two locations serving 25-30 individuals with developmental disabilities at each location. The provider has a policy that when two (2) similar Level II or Level III serious incidents occur across all of the provider's locations within a six-month period, the provider will conduct a more detailed RCA. In December, one Level II serious incident of choking requiring physical aid by another person occurs at Location A; in May, a Level II serious incident involving choking which required physical aid by another person occurs at Location B. The provider conducts a more detailed RCA in accordance with the provider's policy.

- d. *A death occurs as a result of an acute medical event that was not expected in advance or based on a person's known medical condition.*

Example

A developmental services group home reports a death of an individual. The individual with no known medical conditions died of a massive heart attack. The

provider's RCA policy requires an RCA for any death that occurs as a result of an acute medical event that was not expected in advance or based on a person's known medical condition.

Example

An individual is receiving services at a substance abuse intensive outpatient location and during service the individual experiences a seizure and suddenly dies. The individual had no known medical conditions. The provider conducts a more detailed RCA because this was a Level III serious incident that was not expected in advance or based on the person's known medical condition.

What is a more detailed RCA?

The provider's RCA policy would include what is involved in a more detailed RCA. This would vary depending on the provider's size and population served. During an Office of Licensing review, the provider would provide proof that the policy was followed. A more detailed RCA could include:

- Convening a team;
- Collecting and analyzing data;
- Mapping processes;
- Charting causal factors;
- Identifying systemic issues;
- Making recommendations to leadership; and/or
- Implementing recommendations and then testing to ensure desired outcomes are achieved.

