 Park Nicollet	Title: Patient Safety Analyst Role in Root Cause Analysis (RCA) Process Role: Patient Safety Analyst		
	Location: PNHS	Department: Patient Safety Analysis and Quality Assessment	
Work Standard	Document Owner: Patient Safety Analysis and Quality Assessment		
	Date Prepared: 12/12/06	Date Revised: 5/17/10	Date Approved:

Process Summary: Role of Patient Safety Analyst in Root Cause Analysis (RCA) preparation, RCA meeting, and follow on.

RCA Preparation

1.	Confirm an event that requires a Root Cause Analysis (RCA) with the Medical Director Patient Safety (MDPS).
2.	For Adverse Health Events (AHE) and Sentinel Events (SE), after the MDPS has contacted the Vice President (VP)/Chief, a time for an on-site meeting and further investigation will be determined with the patient safety analyst and held within two business days.
3.	Initiate preliminary chart review.
4.	Create a folder for the RCA documents: I:\Patient Safety\RCA & Stakeholders\Year. Include the event number and name in all document titles (54321 AHE –do not use a # sign).
5.	Enter the event on the RCA Tracker located here: I:\RCA Tracker.
6.	For AHE’s and SE’s, work with the VP/Chief’s Administrative Assistant to coordinate/schedule the investigation meeting with the VP/Chief, MDPS, and appropriate area leaders.
7.	Email a link to the process at a glance document to area leader(s).
8.	For AHE’s and SE’s, meet in service area to investigate with MDPS, VP/Chief, and designated area leader. Bring copies of work standards and RCA checklist for all participants.
9.	Send attendee list to appropriate VP’s administrative assistant (depending on service line affected). Email a copy of the Root Cause Analysis (RCA) Attendee List and RCA Meeting Details with appropriate information. Email a link to the process at a glance so the Admin assistant can access the corresponding work standards and documents.
10.	Work with area manager to: <ul style="list-style-type: none"> • Review policies/procedures and standard work • Review staffing levels • Finalize attendee list

11.	<p>Finalize timeline of the event based on investigation findings and medical record. Include:</p> <ul style="list-style-type: none"> • Summary of the event • QA concern (if needed) • Visio timeline • Only the pertinent information <p>**Do not include the medical record number on printed copies of the timeline or the Visio timeline. Include the RCA number, patient's initials, the patient's age, and the patient's past medical history at the top of the Visio timeline document.</p> <p>The timeline is peer protected and should not be sent via email to all the participants. The patient safety analyst may email the timeline directly to an area manager for review or clarification prior to the meeting.</p>
12.	Update the RCA Tracker as needed, located here: I:\Patient Safety\RCA & Stakeholders.
13.	Prior to the meeting, review EMR to ensure that pertinent facts are included on the timeline.
14.	Confirm the date, time, place and attendance status with VP/Chief's administrative assistant 1-2 days prior to the scheduled RCA meeting.
15.	For AHEs, enter initial findings into Minnesota Adverse Health Event Registry within 15 days of discovery.
16.	For AHEs and SEs, schedule Post RCA Follow Up meeting with patient safety analyst, CAP owner, and key stakeholders for 1-2 weeks after the RCA meeting.

RCA Meeting

1.	Review Root Cause Analysis (RCA) Travel Kit content with Inventory For Root Cause Analysis (RCA) Travel Kit.
2.	Arrange for coffee to be available if the meeting is before 10:00am.
3.	Set up patient safety laptop and projector if needed. This is used to access the patient's medical record.
4.	<p>Analyst #1: Utilize fishbone, CAP and keep Medical Director Patient Safety (MDPS) on time and on task.</p> <p>Analyst #2: Take notes, operate computer, and keep MDPS on time and on task.</p> <p><i>(Patient safety analysts may choose to adjust roles on a case by case basis.)</i></p>
5.	Provide a brief summary of the event and review the timeline for the meeting attendees (listed in RCA Agenda).
6.	Obtain a consensus on 1-3 root cause(s); these should be identified within 1 hour of meeting start time.
7.	Corrective Action Plans are required for AHE's and SE's. All other RCA's will have a CAP at the discretion of the VP/Chief and/or Medical Director of Patient Safety. If a CAP is to be completed, spend the remaining half hour developing a CAP summary. You may begin working on the implementation plan if time permits. <i>(This document will be completed in the Post Root Cause Analysis (RCA) Follow Up meeting.)</i>
8.	If a CAP is to be completed, schedule a date and time, within 1-2 weeks following the RCA, for the Post RCA meeting with the CAP Owner and other key participants or content experts immediately following the conclusion of the RCA meeting. Email an Outlook invite.

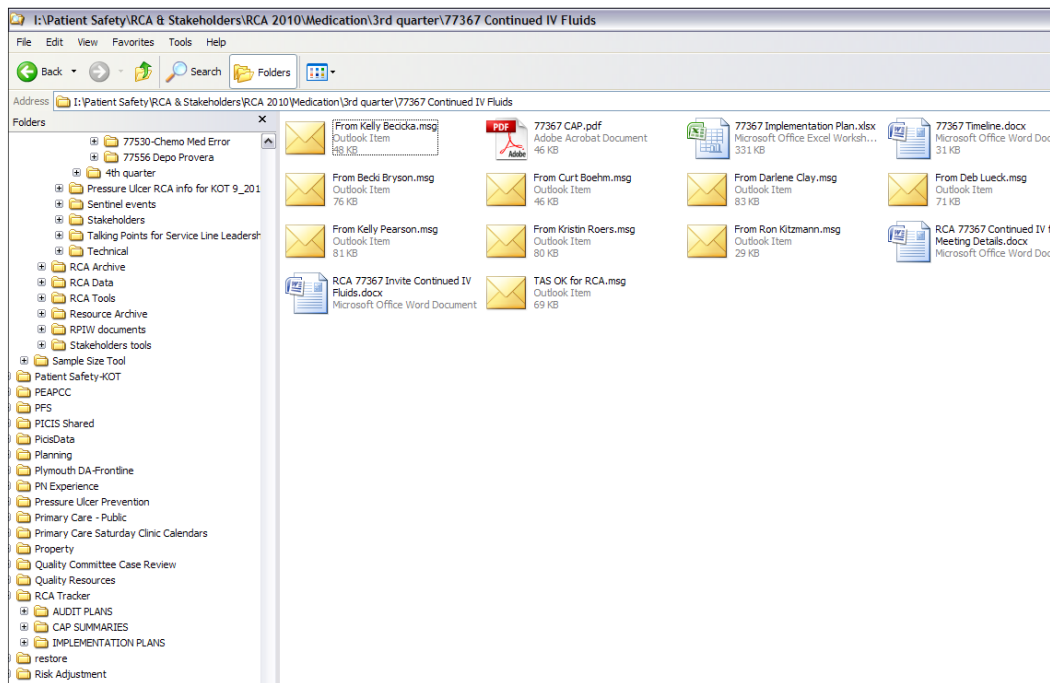
Post RCA Follow Up:

1.	Following the RCA meeting, finalize the CAP summary in the RCA access database (located in I:\Patient Safety\RCA & Stakeholders) and email the CAP summary to the larger RCA group, cc to Director of Risk Management (see standard Post RCA CAP Summary email template).
2.	Attend the post RCA follow up meeting and facilitate discussion in finalizing CAP, including implementation plan, RCA area audit results, and due dates with responsible parties (<i>not</i> Patient Safety staff). Document this information in the Implementation Plan and Post RCA Area Audit Results forms. All due dates will be on the 1 st or 15 th . When saving documents here, make sure to include the RCA number and brief event description in the title of the document (do not use # sign).
4.	<i>See detailed information for this step attached at the end of this document:</i> Save the CAP Summary in I:\RCA Tracker\CAP SUMMARIES , the Implementation Plan in I:\RCA Tracker\IMPLEMENTATION PLANS and Area Audit Results documents in I:\RCA Tracker\AUDIT PLANS . Once the original document(s) is saved, 1) Create a short cut document and cut and paste this document in the folder that was created in step #4 in the RCA preparation process. 2) Create a hyperlink from the original document into the RCA Tracker document. To do this click within the appropriate cell (ie CAP Summary, Implementation Plan or Audit Results) in the RCA Tracker document and type the appropriate wording (ie CAP Summary, Implementation Plan or Audit Results). Right click while the cell is highlighted and choose 'Hyperlink.' Choose the correct pathway to the document(s) original location in the I:\RCA Tracker folder. Click 'Ok.' Once completed double click on cell to ensure the link worked.
5.	Email the Implementation Plan and area audit results documents to VP/Chief and MDPS for final approval, utilizing the VP-Chief-MDPS CAP approval email template . Include due date for when approval is needed.
6.	Once approved, forward the Implementation Plan and area audit results documents to the CAP owner.
7.	Update the RCA Tracker with any remaining details, including Implementation plan and audit due dates, located here: I:\RCA Tracker\RCATracker.xlsx . When entering information into the RCA tracker, do not change font size or the cell size. Please abbreviate to make information fit into Excel document settings.
8.	For Adverse Health Events, enter the CAP into the MHA registry.
9.	Send out email to the CAP owner and cc the Patient Safety Analyst – Measurement Project Manager regarding the implementation plan by using this template I:\Patient Safety\RCA & Stakeholders\RCA Tools\Work Standards\Email Template for Implementation Plan.docx and attach a copy of the implementation plan.
10.	Set up 15 minute Outlook calendar invite/meeting with Patient Safety Analyst Measurement Project Manager to discuss case, due dates, and all other information in order to hand off event.
11.	Put paper file folder in appropriate file cabinet. This will make this file accessible to both the PSA-MPM and the assigned PSA.
12.	Monitor Implementation Plan status and Area Audit results in conjunction with Measurement Project Manager and assist and/or respond to results as needed.

Post RCA Follow UP Step #4 Detail:

Once the RCA Summary, Implementation plan and audit form is completed and saved in the file created for the RCA follow these steps:

- 1.) Open RCA folder on the I:drive
- 2.) For each document (CAP, Implementation Plan and Audit Form): Click and move into the RCA Tracker folder located on the left side of the page as noted below. CAP into the CAP Summaries, Implementation into the Implementation Plans and Audit into the Audit Plans of the RCA tracker.



3. Open the RCA Tracker Cap Summaries, Implementation Plan and Audit form and locate the document you just moved there.
4. Right click on this document and create a shortcut document. The shortcut document will appear in this same folder.
5. Right click on the shortcut document and cut. Return to the original RCA folder and paste this shortcut document.
6. Open RCA tracker document, go to the end of the document (to the right) where the links are located. Click within the appropriate cell for each. ie: CAP Summary, Implementation Plan, and Audit Plan. Once cursor is flashing, type the appropriate wording. CAP summary for CAP etc.
7. Go out of cell and then relick on the cell so the outline of the cell appears. Right click and select hyperlink.
8. A hyperlink box will appear.
9. Choose the correct pathway to the documents original location in the I:**RCA Tracker Folder.** This is not the original RCA folder.
10. Click Ok.
11. Once completed, double click on the cell on the RCA TRACKER to check if the connection worked. The document should appear immediately.