

**STATE OF CONNECTICUT
DEPARTMENT OF DEVELOPMENTAL SERVICES**

Policy No.: I.D.PO.002
Subject: Root Cause Analysis
Section: Quality Enhancement

Issue Date: January 11, 2008
Effective: Upon release
Revised: June 23, 2011
Approved: /s/Terrence W. Macy/KdP

A. Policy Statement

The Department of Developmental Services (DDS) shall initiate, in special circumstances, a formal root cause analysis for the purpose of eliminating or reducing risk of future unusual incidents that could result in untimely death or serious injury. The formal root cause analysis may be requested by the DDS Commissioner, Deputy Commissioner, or the Chairperson of the Independent Mortality Review Board (IMRB).

The process of root cause analysis is not designed to supplant traditional review and investigation procedures; nor is it designed to replace existing mortality review procedures. Formal reports resulting from a root cause analysis shall protect the privacy rights of individuals and shall not disclose client, family, guardian, or staff names or other identifying information. The purpose of root cause analysis is to provide information and recommendations for administrative consideration that will result in systemic improvement.

Formal root cause analysis shall adhere to the procedures set forth in DDS Procedure Number I.D.PR.012 Root Cause Analysis.

B. Applicability

This policy applies to any root cause analysis that may be conducted for any sentinel event that occurs with any client of the department, regardless of the type or location of services they receive.

C. Definitions

1. Consumer of the Department: Any individual who has been found eligible for and receives services or supports from the Department of Developmental Services, and who has been assigned an active client number.
2. Independent Mortality Review Board (IMRB): The official DDS central mortality review committee established pursuant to Governor's Executive Order No. 25.
3. Root Cause Analysis (RCA): A formal analytic process designed to identify those factors that are considered primary and contributory causes of an untoward or sentinel event. Root Cause Analysis (RCA) follows a prescribed process and is always conducted by a team of individuals who are familiar with the incident under review, departmental policy and program requirements, and the RCA process itself.

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4. Root Cause Analysis Team: A group of individuals assigned to review a sentinel event using the tools of root cause analysis. The RCA Team includes a team leader, someone familiar with the process of RCA, and at least one individual responsible for the operation, or monitoring of the program setting in which the sentinel event occurred. In most instances the team will be comprised of between three and seven individuals.
5. Sentinel Event: Any unusual incident that results in, or could result in, the untimely death of or serious injury to a client of the department.
6. Team Leader: The individual appointed by the DDS Commissioner, Deputy Commissioner, or the Chair of the IMRB to lead and chair a RCA Team.

D. Implementation

Not applicable

E. References

Governor's Executive Order No. 25, issued February 2002 by Governor John G. Rowland
DDS Procedure No.: I.D. PR. 012 Root Cause Analysis

Connecticut General Statutes

Sections 17a–210 et seq.: “Department and Commissioner of Developmental Services”
Sections 17a–238: “Rights of Persons under supervision of Commissioner of Developmental Services”

Section 19a-25: “Confidentiality of Records procured by the Department of Public Health or directors of health of towns, cities or boroughs”

Regulations of Connecticut State Agencies

Section 19-570-5: “Confidential Client Records”

Other Sources

Analytic approaches to Managing Risk: The I-D-Q Approach (Staugaitis, Steven D. PhD (December 2003)

User Guide for Conducting a Root Cause Analysis (in CT DMR) (Staugaitis, Steven D. PhD, 2002)

Hirsch & Wallace (2001) Hirsch, Kenneth A. and Wallace, Dennis T. Step by Step Guide to Effective Root Cause Analysis: Opus Communications, Marblehead, MA

www.rootcauseanalyst.com

www.patientsafety.gov

F. Attachments

None