ROOT CAUSE ANALYSIS REPORT

ORGANIZATION		
AGENCY		
REFERENCE NUMBER		
PROGRAM/FACILITY		
REGION		
CONSUMER ID		
CONSUMER DETAILS	AGE:	
	GENDER:	
	CITY/TOWN:	
DATE OF EVENT:		DATE RCA COMPLETED:

EVENT DETAILS	
EVENT DESCRIPTION	LIST RCA TEAM MEMBERS
Describe the event and include any harm that resulted. Also identify the cause, if known.	TEAM LEADER:

BACKGROUND SUMMARY		
Answer these questions with a brief summary - attach supporting documents if available		
What were the expected sequence of events that were to take place? Attach flowchart if available.		*Description:*
Was there any deviation from the expected sequence?	☐ YES ☐ NO	*If YES, explain the deviation.*
If deviation occurred from the expected sequence, was it likely to have contributed to the adverse event?	☐ YES ☐ NO ☐ UNKNOWN	*If YES, explain the contribution.*
Was the expected sequence described in policy, procedure, written guidelines, or included in staff training?	☐ YES ☐ NO ☐ UNKNOWN	*If YES, explain the source.*