

Define the problem → identify system contributors → confirm root causes → assign measurable corrective actions.

ORGANIZATION / SITE

RCA DATE

FACILITATOR

TEAM / DEPARTMENTS

MEASURE / PROCESS REVIEWED

REVIEW PERIOD

BASELINE / EVIDENCE

SOURCE / TRIGGER

1 ANALYZE THE PROBLEM

Focus on systems and processes—not individual blame. Ask “Why?” until the cause is actionable.

PEOPLE

Roles, staffing, training, communication

PROCESS

Workflow, handoffs, standard work

TECHNOLOGY

EHR, tools, equipment, alerts

ENVIRONMENT

Space, workload, timing, interruptions

POLICY

Rules, procedures, governance

MEASUREMENT

Definitions, data capture, feedback

PROBLEM / EFFECT

CONFIRMED PRIORITY ROOT CAUSE(S) — VALIDATE WITH EVIDENCE, CASE REVIEW, OBSERVATION, OR 5 WHYS

AIM / DESIRED RESULT — IMPROVE ___ FROM ___ TO ___ BY ___

2 BUILD THE ACTION PLAN

Each action should address a confirmed cause and include an owner, deadline, and success measure.

ROOT CAUSE	CORRECTIVE ACTION / TEST	OWNER	DUE	SUCCESS MEASURE	FOLLOW-UP / RESULT	STATUS
						☐ Not started ☐ In progress ☐ Complete
						☐ Not started ☐ In progress ☐ Complete
						☐ Not started ☐ In progress ☐ Complete

NEXT STEP: Transfer selected action(s) to the MeasureWise PDSA Cycle Record for small-scale testing and learning.

QI support tool; follow organizational event-review, disclosure, reporting, and regulatory requirements. Method basis: AHRQ and CMS RCA guidance.