Office of Licensing

Serious Incident Review and Root Cause Analysis TEMPLATE

Individual's Name and I.D. Number:	Date of Incident: Incident Report #: Review Completed Date: Review Completed By:
Individual's DOB:	Program:
Location of Incident:	Type of Incident:
Service Received at Time of Incident:	Sources of Information: ☐ Record Review ☐ Policy Review ☐ Interview with Individual ☐ Interview with Staff ☐ Human Rights Investigation ☐ Other:
Is this the first incident of this kind? ☐Yes ☐No, when did this occur before?	Is this addressed in the ISP? ☐Yes ☐No ☐Not applicable
Detailed description of what happened *(Provider may copy information included within the Injury/Incident Description/Circumstances field of CHRIS or include a step-by-step detailed account of the incident)*:	

***Disclaimer**: This template was completed in accordance with 12VAC35-105-160. In order to ensure completion within the 30-day regulatory timeframe, the most available information/resources were utilized to complete this review.*

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Analysis of Incident *(Analysis of trends and potential systemic issues or causes; analysis of why incident happened; identification of all underlying causes of the incident that were in the control of the provider)*:

Quality Improvement Tool used during review: ☐ 5 Whys ☐ Fishbone ☐ FMEA ☐ Other:

(While our regulations do not require use of another tool to analyze trends, providers are required to include their analysis)

Recommendations/Action Plan *(Solutions to mitigate the potential for future incidents)*:

☐ There are no recommendations at this time. There were no underlying causes under the provider's control.

☐ Recommendation(s)/Technical Assistance:

☐ Action Plan:

Due Date:

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Enhanced Root Cause Analysis Determination:

Based on this incident, was a threshold met as outlined in the Root Cause Analysis policy?

☐ Yes
☐ No

If "yes," the threshold criteria met is:

☐ Similar Level II serious incidents occur to the same individual or at the same location within a six-month period.
☐ 2 or more of the same Level III incidents occur to the same individual or at the same location within a six-month period.
☐ Similar Level II or Level III serious incidents occur across all of the provider's locations within a six-month period.
☐ A 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.

Analysis included:

☐Convening a team
☐Collecting and analyzing data
☐Mapping processes
☐Charting causal factor
☐Other:

_____	_____	_____
Completed by:	**Title/Position:**	**Date:**

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