



Gap/Root Cause Analysis (RCA)

Before completing this form, complete the Care Transitions Assessment. Identify one of the gap assessment items where the facility's response was either: (1) not implemented/no plan, (2) plan to implement/no start date set, or (3) plan to Implement/start date set. Use this gap/RCA form to get a better understanding of what factors are contributing to the gap and what steps can be taken for improvement.

| Organization: | |
|---|--|
| Team Lead: | |
| Team Members: | |
| Assessment Item/Area of Focus: (refer to Care Transitions assessment) | |

| Component | Activities Completed | Key Findings |
|---|----------------------|--------------|
| Data: What data specific to this gap area is available to help guide and measure this work? | | |
| Supportive tools: • 7-Day Audit Chart Tool | | |
| • 5 Whys | | |
| HSAG Data Report | | |
| Observational work: Evaluate the current processes related to patient transitions. Supportive tools: • 5 Whys | | |
| Individual and group interviews: Understand the voices of your patients and staff. Supportive tools: • Readmission Interview Tool | | |





| Component | Activities Completed | Key Findings |
|--|----------------------|--------------|
| Financial review: Understand the financial impact of gap item. | | |
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