



RCA Name Hospice Family Crisis
RCA Owner Hospice Director

Root Cause Analysis Report

Problem Statement

Focal Point Hospice family left in crisis

When

Start Date 9/14/2011
Start Time 11 p.m. End Time 12:30 a.m.
Unique Timing After on-call RN received another emergency call about another patient

Where

Facility Hospice (name withheld for confidentiality)
Location Hospice patient's home
Component RN on-call protocol

Actual Impact

Safety	Family members Stressed	Cost
Customer Service		
Revenue		
Cost		
Actual Impact Total:		\$0.00

Frequency 1 times overall

Frequency Notes On-call nurses constantly have to make decisions about when it is appropriate to leave home care patients alone with family.

Potential Impact

Safety	Family members emotional distress
Customer Service	Very poor reflection on Hospice team
Revenue	Poor company reputation

Report Summaries

Cause and Effect Summary

On September 14, 2011 at approximately 9 p.m., the on-call RN was called by the family of a hospice patient. The family stated that the patient was extremely confused and anxious, and they did not know what to do. The family was told by RN that she was on her way.

Upon arrival, RN found patient as described by family. RN administered Ativan to help relieve the patient's anxiety. Upon further assessment, the RN determined the patient was showing signs of actively dying. After a while, the Ativan took effect and the patient calmed down, but the family was still very anxious.

Since the patient was actively dying, RN offered to have patient transported to hospital. Even though hospice is a home care program, this option is acceptable under Medicare guidelines when a patient is actively dying. The family, however, chose not to accept this option because the patient had previously requested to pass away at home.

While with the family, RN received another emergency call from one of the agency's home health patients and she needed to leave. RN assessed the hospice patient was comfortable and since the family did not want to go to the hospital, the RN determined the situation was stable and left. The RN, in her haste to leave, did not think to call the back-up RN, Hospice Social Worker, or Chaplain to come and sit with the family.

On-call RN is primarily a home health nurse and has only been on-call for hospice patients a couple of times. She never had the need for family support before with hospice, so she was not aware of any of the protocols.

On-call RN did not attend the Hospice team staff meeting earlier in the day because she was off duty and at home sleeping because she worked the night before. Patient, however, had shown no signs earlier in the day of starting to actively die.

Patient passed away during the night and the family was moritfied that they were left alone during that time. Family contacted the agency director the next morning and filed a formal complaint stating that hospice was a terrible program and she would never recommend it to anyone.

Solutions

ID	Label	Description		
1	Solution	On-call RN automatically notifies on-call Social Worker or Chaplain when patient actively dying at home to assess family needs		
	Cause	On-call RN left patient/family		
	Note	This protocol is being written in Hospice procedures.		
	Assigned	Hospice Director	Criteria	Pass
	Due		Status	Selected
	Term	Long	Cost	\$0.00
2	Solution	Step-by-step protocol given to on-call RN if patient actively dying at home.		
	Cause	Patient actively dying		
	Note	1. Offer family option of taking patient to hospital. 2. notify on-call social worker/Chaplain to assess family. 3. If RN receives other call notify backup RN to either take call or come stay with family.		
	Assigned	Hospice RN Director	Criteria	Pass
	Due		Status	Selected
	Term	Long	Cost	\$0.00
4	Solution	Move Hospice Team meeting to late in afternoon so on-call RN can attend.		
	Cause	RN not at hospice team staffing		
	Note			
	Assigned	Hospice RN Director	Criteria	Pass
	Due		Status	Selected
	Term	Long	Cost	\$0.00
7	Solution	While RN with patient that is actively dying, turn over on-call to backup RN.		
	Cause	RN received another emergency call		
	Note			
	Assigned	Hospice RN Director	Criteria	Pass
	Due		Status	Selected
	Term	Long	Cost	\$0.00

Team

ID	Label	Description	Label	Description
1	First Name	On-call RN	Last Name	
	Phone (1)		Phone (2)	
	Role	On-call RN	Group	
	Email			
2	First Name	Backup RN	Last Name	
	Phone (1)		Phone (2)	
	Role	Backup RN	Group	
	Email			
3	First Name	Hospice Social Worker	Last Name	
	Phone (1)		Phone (2)	
	Role	Hospice Social Worker	Group	
	Email			
4	First Name	Hospice Chaplain	Last Name	
	Phone (1)		Phone (2)	
	Role	Hospice Chaplain	Group	
	Email			
5	First Name	Hospice RN Director	Last Name	
	Phone (1)		Phone (2)	
	Role	Hospice RN Director	Group	
	Email			
6	First Name	Hospice Director	Last Name	
	Phone (1)		Phone (2)	
	Role	Hospice Director	Group	
	Email			
7	First Name	Agency Director	Last Name	
	Phone (1)		Phone (2)	
	Role	Agency Director	Group	
	Email			

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First Name Hospice RN**Last Name****Phone (1)****Phone (2)****Role** Hospice RN**Group**

Email

Evidence

ID	Label	Description
1	Evidence	RN duty log
	Cause(s)	RN on-call for home health patients Only 2nd time RN has been on-call for hospice Home health RNs periodically cover hospice on-call Other RNs take care of patients during daytime hours Agency only has two hospice RNs RN received another emergency call
	Location	
	Link	
	Contributor	Hospice RN Director
	Type	Spreadsheet
	Quality	★★★★★
2	Evidence	On-call RN beeper log
	Cause(s)	RN received another emergency call
	Location	
	Link	
	Contributor	Hospice RN Director
	Type	Spreadsheet
	Quality	★★★★★
3	Evidence	On-call RN visit notes & medication log at patient home
	Cause(s)	Confused? Scared? Patient anxious/agitated Patient surrounded by family members Ativan administered On-call RN left patient/family Patient actively dying Family very anxious Family chose not to take patient to hospital Hospice patient comfortable
	Location	
	Link	

Contributor On-call RN
Type Document
Quality ★★★★★

4 **Evidence** Medicare guidelines
Cause(s) Hospice palliative (comfort) care
Hospice is a home care program
Hospice palliative (comfort) care
Home health curative care
Home health focus different than hospice

Location
Link
Contributor Agency Director
Type Document
Quality ★★★★★

5 **Evidence** Social Worker & Chaplain statement
Cause(s) Hospice social worker/chaplain not called to stay wth family.

Location
Link
Contributor Hospice Social Worker
Type Direct Statement
Quality ★★★★★

6 **Evidence** Back-up RN statement & beeper log
Cause(s) Backup RN not called to come stay with family
Backup RN not called to handle other emergency

Location
Link
Contributor Choose
Type Direct Statement
Quality ★★★★★

Location
Link
Contributor Agency Director
Type Document
Quality ★★★★★

11 **Evidence** Chaplain documentation in patient chart
Cause(s) Patient requested to pass away at home
Location
Link
Contributor Hospice Chaplain
Type Document
Quality ★★★★★

12 **Evidence** Agency on-call protocol/procedure
Cause(s) RN needs rest to stay up all night
Home health RN home sleeping
On-call RNs work at night
Location
Link
Contributor Agency Director
Type Document
Quality ★★★★★

13 **Evidence** Social Worker & Chaplain job descriptions
Cause(s) SW/chaplain primarily only work with hospice patients
Specialized training in death and dying issues.
Location
Link
Contributor Hospice Director
Type Document
Quality ★★★★★

14	Evidence	Hospice & Home Health Patient logs.
	Cause(s)	Small agency Hospice census usually <20 patients
	Location	
	Link	
	Contributor	Hospice RN
	Type	Spreadsheet
	Quality	★★★★★

Chart Type Legend

- ▶ Transitory
- Non-transitory
- ⏸ Omission - Transitory
- ⏸ Omission - Non-transitory
- ★ Focal Point
- ⊙ Solution Implemented

