



Quality Line

Minnesota Healthcare Quality Professionals

Spring 2010

Causal Tree Analysis

Causal Tree Analysis -

By P.J. Beilke

“The human mind is prone to match like with like. It is therefore natural for us to believe that disastrous accidents must be due to equally monstrous blunders. But the close investigation of organizational catastrophes has a way of turning conventional wisdom on its head. Defences can be dangerous. The best people can make the worst mistakes. The greatest calamities can happen to conscientious and well run organizations. Most accident sequences, like the road to hell, are paved with good intentions-or with what seemed like a good idea at the time.”

James Reason

Anyone involved with investigating organizational accidents, or as they are usually called in healthcare, adverse events, understands the complexity of these events. The Causal Tree Analysis is a tool that can help to unravel those complex sequences leading up to and precipitating the event. While no one will become an expert on using this very effective tool from reading this one article, the intent here is to begin to shed some light on the use of this tool as a piece of the root causes analysis process.

[Causal factor tree analysis](#) - a technique based on displaying causal factors in a tree-structure such that cause-effect dependencies are clearly identified. (Wikipedia)

While this is a somewhat simplified definition, it is a sound basic starting point in understanding the causal tree tool. The causal tree begins with the actual problem or event. It tracks the immediate precipitating causes of the event, and continues working back in time until the root causes are identified. The methodical nature of the process forces us to look beyond preconceived notions of causation by forcing us to ask at each step if it clearly shows the cause and effect relationship. (Continued on page 2)

Presidents Corner

MARCH 2010 PRESIDENT’S CORNER

2010 is well underway; MHQP is off to a great start. Take a look at MHQP’s 2010 Goals and Objectives. We’d value your input and ideas on these.

Members have had three opportunities so far in 2010 to obtain credits to maintain or prepare for their CPHQ certification. Our education chair, Skip Valuesk, has done an outstanding job delivering a monthly brown bag sessions every third Thursday of the month and the CPQH Review Course on March 6. Ongoing education is just one of the ways MHQP is committed to your professional growth. In addition, the National Association of Healthcare also has many resources that can help you.

(Continued on page 5)

Hold the Date

October 12-13, 2010

MHQP Fall Conference

Scholarship Information	Page 4
Membership Update	Page 6
Mentorship Application	Page 8
Education Update	Page 9
Scholarship Application	Page 10
2010 Goals & Objectives	Page 11
Membership Application	Page 13

(Continued from page 1)

The National Center for Patient Safety (<http://www4.va.gov/ncps/CogAids/RCA/index.html#page=page-13>) has identified Five Rules of Causation that help guide you through this process:

Rule 1. Clearly show the cause and effect relationship.

Rule 2. Use specific and accurate descriptors for what occurred, rather than negative and vague words.

Rule 3. Identify the preceding cause(s), not the human error.

Rule 4. Identify the preceding cause(s) of procedure violations.

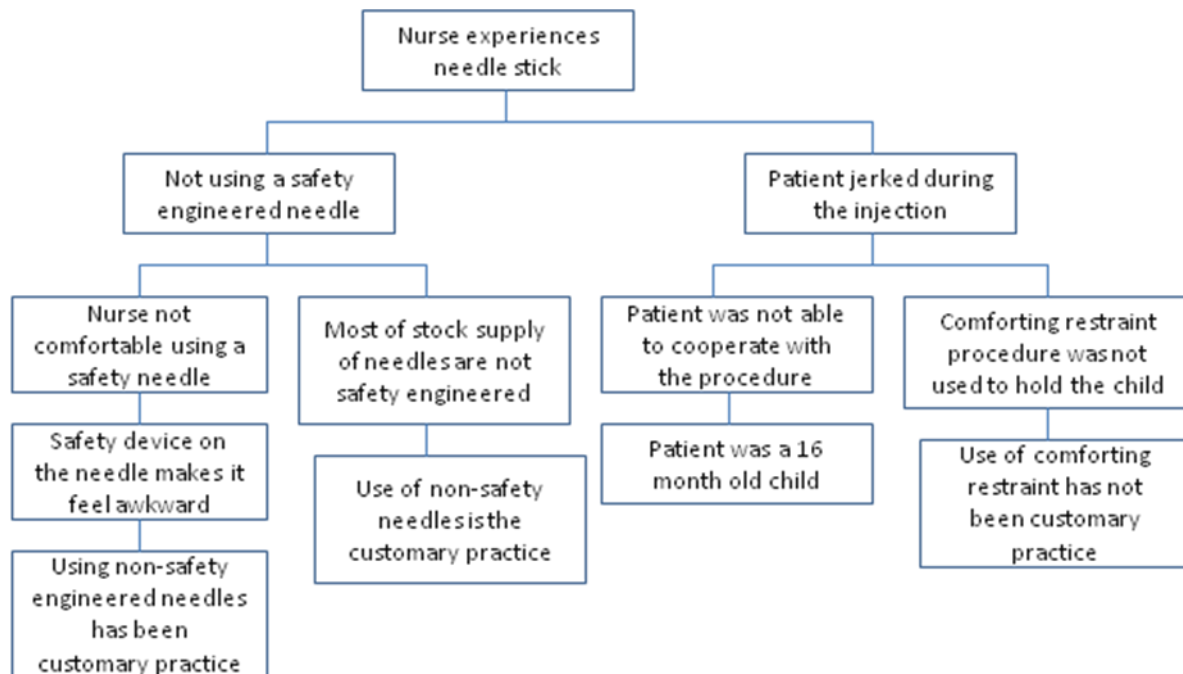
Rule 5. Failure to act is only causal when there is a pre-existing duty to act.

It is clear to see from the rules, that the process focuses on what Michel Silver, VP of Programs and Operations at HealthInsight, calls “conditions” and “actions”, and not on behaviors and human errors. He defines conditions as causes that existed for some time prior to the event. Actions are described as momentary causes that bring conditions together to produce the event. The condition could be something like a cumbersome and ineffective policy that causes staff to develop a workaround. Often the condition precipitates the action.

James Reason (Managing the Risk of Organizational Accidents) uses a similar concept he terms “active failures” described as errors and violations at the “sharp end” of the system. These are the decisions and actions by the people in the shoes leading up to the event.

Reason recognizes people working in complex systems make errors and violate procedures for reasons that go beyond themselves and he calls these “latent conditions”. He goes on to compare latent conditions to resident pathogens on the human body, always present, and not making you ill until some stressor happens and they make you ill. Latent conditions combine with active failures to precipitate an event. Latent conditions can be things like less than adequate training, gaps in supervision, unworkable procedures, poor communication processes, etc. Figure 1 displays a simple example of a causal tree analysis.

Figure 1.



(Continued on page 3)

(Continued from page 2)

The focus of the causal tree is to find solutions. In the simplified causal tree analysis example above, potential solutions present themselves in the final row of causes.

The advantages of using the Causal Tree Analysis as a tool for root causes analysis are the:

- Focus on the cause and effect relationship.
- Ability to go beyond blame and personal behaviors by looking at conditions/latent conditions.
- Ability to make these causes concrete and visually explicit to those needing to understand.
- Methodical nature of the process.
- End result of finding solutions related to actual causes.

James Reason is frequently quoted as saying, “We cannot change the human condition, but we can change the conditions under which people work.” There will always be human errors and violations. The more we understand of the true causes of events the more likely we can apply solutions that are more successful at preventing adverse events.

Causal Tree Analysis Resources To Check Out

<http://www4.va.gov/ncps/CogAids/RCA/index.html#page=page-13>

www.bnl.gov/.../RCD%20ORPS%20Causal%20Analysis%20Tree%20Training%20-...

<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1292997/>

http://dkv.columbia.edu/demo/medical_errors_reporting/site/module1/index.html

<http://www.healthinsight.org/hcp/rca/assets/pdf/modules/m%203.3%20overview.pdf>

http://en.wikipedia.org/wiki/Causal_factor_tree_analysis

Gano, D.L. Apollo Root Cause Analysis: A new Way of Thinking. Yakima, WA: Apollonian Publications. 1999

Reason, J.T. Managing Risks of Organizational Accidents. Burlington, Vermont: Ashgate Publishing Company. 2000 (ISBN-1 84014 105 0)

Silver, M.P., VP Programs and Operations. HealthInsight, Salt Lake City Utah, www.healthinsight.org (Mr. Silver presented a program on Causal Tree Analysis sponsored by the Minnesota Department of Health on 3/24/2010.)

SAVE THE DATE!

OCTOBER 12-13, 2010

Bi-Annual MHQP & MCQ Fall Conference

On October 12-13, MHQP will team with the Minnesota Council for Quality to offer our bi-annual joint fall conference. The theme of the conference is Customer Engagement. October 12 will offer half day workshops on the topics of Voice of the Customer and Shared Decision Making. October 13 will be a full day conference with panels, keynotes and presentations on the topic of Customer Engagement across industries (healthcare, education, detail and manufacturing). The location is yet to be determined but will be in the Twin Cities .

MHQP ANNOUNCES NAHQ NATIONAL EDUCATIONAL CONFERENCE SCHOLARSHIP OPPORTUNITY!

MHQP board members are excited to announce the availability of scholarship funds to attend this year's National Association for Healthcare Quality (NAHQ) annual meeting scheduled for September 30-October 3, 2010 in Nashville, Tennessee.

The NAHQ Scholarship Award was established to enhance the education and knowledge of MHQP's membership by providing financial support to a member for the NAHQ Annual Conference.

Board members have allocated funds to award one scholarship in 2010. **The scholarship will cover the early bird registration fees** for your conference attendance. Travel arrangements are not included. We hope to continue to offer this opportunity to members and grow the number of awards we can give in future years.

- ✓ The application must be postmarked (or emailed) no later than **May 15, 2010**
- ✓ MHQP board members will review applications and select the recipient
- ✓ Award determination will be made in June 2010 and the winner notified
- ✓ The recipient is responsible for making their own travel arrangements and registering themselves for the conference
- ✓ If selected for the scholarship, the recipient agrees to write a newsletter article for the winter edition of the MHQP Newsletter about their experience and learnings from the conference.

The scholarship application form has been attached to the newsletter on page 10. Any questions regarding the scholarship program can be directed to:

Heather Clark, MHQP Secretary/Treasurer at kamr0009@umn.edu.

For professional links and education events

Visit the MHQP Web site at

www.MHQP.com

(Pres. Corner - Continued from page1)

Membership in both organizations is important to your professional role and credibility.

For me this became really clear during 2009. I lost my job during a “reduction in workforce” in February. As I started searching for new jobs, I am convinced my CPHQ certification and leadership role in MHQP made me an attractive candidate for several quality jobs, there were more of them posted than I had anticipated. I had many job interviews, more than most of my peers who were laid off at the same time. Fortunately, I found a job as a quality manager in less than three months. Certification and active membership in either or both MHQP and NAHQ were mentioned as attractive by the HR staff who often completed a screening process prior to on-site interviews. Given the tightness of budgets in most organizations, you may find you have to foot more of the costs for your professional development now than you’ve had to do in the past. MHQP is aware of this and is working hard to bring you affordable educational and networking opportunities.

I’d love to see more members volunteer your skills to MHQP. Opportunities to participate in MHQP include:

- Brown bag presentations speaking about your quality projects;
- Assistance with the MHQP website – posting materials, designing an updated look, etc.;
- Help develop and implement a List Serve that we could use for quick consultations about how to approach quality issues;
- Writing an educational article for our newsletter; or
- Assisting with the Fall Conference either planning or helping with speakers during the conference.

If you’re looking for an opportunity to volunteer, please feel free to call me or any of the other board members. Where you live doesn’t matter, we have the ability to connect via conference calling.

Last year MHQP topped 100 members for the first time in many years. We plan to keep growing. A key role of the board is to help each of you gain and/or enhance the skills needed by quality health professionals. This newsletter is one of the ways we routinely communicate. The website has contact information for each of the board members, please reach out to us with questions and suggestions. We want MHQP to meet your needs. Have a great 2010.

Sally Irgang



Quality Wisdom Tidbit

"The problem is that not everything that counts
can be counted,
and not everything that can be counted counts."

Albert Einstein





MEMBERSHIP UPDATE

Minnesota Healthcare Quality Professional (MHQP) membership renewal continues with a concerted effort to connect with each member who has not yet renewed their 2010 membership. If you have not renewed your 2010 MHQP membership, please take a few moments to complete the application form (available at www.mhqp.com or on page 13 and mail it (with a \$60 check payable to MHQP) to:

Nancy Wolf
390 Rolling Meadows Lane
New Prague, MN 56071

MHQP membership currently stands at 91 with 30 new quality professionals added to the ranks of the organization in 2010. MHQP is pleased to welcome the following new members:

- Linda Barnier-Hudson Hospital and Clinics
- Bette Braem-National Marrow Donor Foundation
- Heather Day-HealthEast Care System
- Carol Dexter-
- Mary Fider-HealthEast Care System
- Martha Gaydos-Unity Hospital, Allina Hospitals and Clinics
- Carmen Hansen-ICSI
- Kerin Hanson-ICSI
- Gail Hunt-ICSI
- Kathleen Lanik-Winona Health
- Sandra Larsen-Minnesota Community Measurement
- Kari Wetzer-ICSI
- Rebecca Sanchez-Fairview Health Services
- Elaine Schermann-Hutchinson Area Health Services
- Jan Schuerman-ICSI
- Denise White-Stratis Health
- Susan Klein-Mercy Hospital, Allina Hospitals and Clinics
- Jennifer Vaqts-Southside Community Health Services
- Barbara Graham-Olmsted Medical Center
- Rebecca Christensen-Owatonna Hospital, Allina Hospitals and Clinics
- Rosemary McGuire-St. Mary's Innovis Health
- Dorothy Connell-HealthEast Care System
- Valerie Enter-Buffalo Hospital-Allina Hospitals and Clinics
- Pamela Schwarz-HealthEast Care System
- Rhonda Marcus-Granite Falls Municipal Hospital
- Cynthia Prout-St. Luke's Hospital
- Susan Carlson-Abbott Northwestern Hospital, Allina Hospitals and Clinics
- Peggy Kaproth-Consultant
- Carol Upcraft-St. Cloud Hospital
- Heidi Borgwardt-Winona Health

I encourage you to share information about MHQP membership with others in your organization who may be interested (patient safety, quality improvement, data analysis, abstraction, infection control, risk management, care management, and others). If in doubt about who may be interested, share information widely and advocate enthusiastically for new members. The following talking points will assist you in sharing the benefits of MHQP membership:

- Monthly free “brown bag” webinar educational offerings;
- Annual certified professional in healthcare quality (CPHQ) prep course;
- Bi-annual educational conference in conjunction with the Minnesota Council for Quality (www.councilforquality.org);
- Annual scholarship to NAHQ conference;
- Opportunities to obtain continuing education credit hours designed to meet CPHQ renewal requirements;
- Quality professional mentorship program;
- “Quality Line” newsletter, featuring articles written by members and experts in the field of quality and safety;
- Regular notices regarding health care quality-related job openings; and
- Opportunities to network with colleagues from other healthcare organizations.

Mentorship Program

Are you new to a healthcare quality role? Would you like a mentor outside of your organization or system to assist in professional growth? If you are a member of MHQP and are interested in becoming a mentor or mentee, please complete the mentorship program application form (page 8). MHQP will attempt to match you with a mentor/mentee relationship. Please be advised that the ultimate nature and extent of the mentoring relationship will be determined by the mentor and the mentee. The goal of the program is to build mutually beneficial and professionally oriented relationships. If you have any questions about the program please contact Nancy Wolf at 952-428-2261 or nancy.wolf@allina.com.

Please do not hesitate to contact any of the MHQP board members with thoughts or ideas about how the organization can better serve your needs. I look forward to seeing you throughout the coming year. Happy Spring!

Nancy Wolf, MSN, RN, CPHQ
MHQP Membership Chair
(952) 428-2261

nancy.wolf@allina.com



Places to go—Things to see.....

<http://www.innovations.ahrq.gov/qualitytools/>
<http://www.freequality.org/Default.aspx?page=27>
<http://www.ispi.org/>
<http://www.organizedchange.com/balancedscorecard.htm>

Placement of a web address on this page is not to be interpreted as an endorsement by MHQP. (It is your discretion whether the links have value for you or not.)

Please include additional comments, topics or skills you think might be helpful in the matching process. (i.e.

√	Mentorship Program Application	
	I am interested in volunteering as a mentor to a new quality professional.	
	I am a new quality professional and am interested in being matched with a mentor.	
	Mentor	Mentee
√	<i>I have quality experience in the following healthcare setting(s):</i>	√ <i>I seek a quality mentor in the following healthcare setting(s):</i>
	Hospital <input type="checkbox"/> Rural <input type="checkbox"/> Urban	Hospital <input type="checkbox"/> Rural <input type="checkbox"/> Urban
	Clinic/ambulatory care	Clinic/ambulatory care
	Long Term Care	Long Term Care
	Home Care	Home Care
	Health Plan	Health Plan
	Behavioral Health	Behavioral Health
	Other:	Other:
	<i>I have expertise in the following area(s):</i>	<i>I would welcome assistance in the following area(s):</i>
	Case/Utilization Management	Case/Utilization Management
	Data Management	Data Management
	Risk Management	Risk Management
	Quality/Patient Safety	Quality/Patient Safety
	Infection Control/Employee Health	Infection Control/Employee Health
	Informatics	Informatics
	Peer Review	Peer Review
	Regulatory (Joint Commission)	Regulatory (Joint Commission)
	Performance Improvement	Performance Improvement
	Other:	Other:

preference for a rural or urban mentor, size of organization (hospital beds) etc.)

Contact Information		
Name:		
Position/Title:		
Employer:		
Address:		
City:	State:	Zip Code:
Telephone:		
E-mail:		

Send completed application to: Nancy Wolf, 390 Rolling Meadows Lane, New Prague, MN 56071
 Phone: (952) 428-2261, or nancy.wolf@allina.com



MHQP Education Update

2nd Annual CPHQ Exam Prep Course

The 2nd CPHQ exam prep course was held on March 6 hosted by the VA Medical Center. Once again Nancy Claflin was a smash hit blending her knowledge of NAHQ and CPHQ requirements sprinkled abundantly with real world examples and healthcare humor. 28 people attended the all day course and most intend to take the exam this year. Winners of the four door prizes of \$150 to purchase a 2010 NAHQ membership were

- Barb Graham Olmstead Medical Center, Rochester
- Dorothy Connell HealthEast Bethesda Hospital
- Jennifer Vagts Southside Community Health Services
- Sue Carlson Allina Abbott Northwestern Hospital

It is highly likely that MHQP will offer the course again in the winter of 2011.

Brownbag Webinars

The monthly brownbags continue the fourth Thursday of the month. These are informal education forums intended to spread quality knowledge to both quality professionals and to clinicians who wish to expand their knowledge of quality as a core competency. We are always interested in panel members, presenters and topic requests from the audience. Contact skipvalusek@comcast.net if you would like to present or have topics to suggest. Following is the table of recent, past and upcoming topics.

2010	
Jan 28	Decision Support and Quality
Feb 25	cancelled
Mar 6	CPHQ Exam Prep Course: Mpls VA Med Center
Mar 25	Panel: DNV
Apr 22	Panel: Rapid Cycle / Continuous Improvement
May 27	Panel: FMEA Best Practices
Jun 24	Panel: Hardwiring Core Measures in EHR's
Jul 22	Panel: Patient Safety in the Clinics
Aug 26	tbd
Sep 23	tbd
Oct 12-13	MCQ-MHQP Joint Conference
Nov 18 (3 rd Thurs)	tbd
Dec 23	tbd

Quality begins on the inside... and then works its way out.

Bob Moawad



**MHQP National Association for Healthcare Quality (NAHQ)
Annual Educational Conference Scholarship Application**

Name:	
Address:	
City, State Zip Code:	
Telephone:	
Email:	
Employer:	
Title:	

How long have you been a MHQP member?	
Have you attended a NAHQ Conference in the past? If so, what year?	

On a separate piece of paper, describe how you and your organization will benefit if you are chosen to go to the National Association for Healthcare Quality conference and if applicable, why you have not attended a conference in the past.

Send completed application to:

Heather Clark
MHQP Secretary/Treasurer
710 4th St. N. #413
Minneapolis, MN 55401

Or email to: kamr0009@umn.edu

If selected for scholarship recipient agrees to write a newsletter article for the winter edition of the MHQP Newsletter about their experience and learnings from the conference.

Signature

Date

Application must be postmarked, or date on the email by May 15, 2010.

MHQP 2010 Goals and Objectives

2010 Goals:

- Provide opportunities for members to advance the theory and practice of quality improvement through education and networking
- Fiscal responsibility of MHQPs resources while supporting educational opportunities through scholarships
- Build local leadership
- Grow membership
- Enhance MHQP's ability to use technology to involve membership and meet their needs
- Maintain MHQP's relationship with the Minnesota Council for Quality and HealthForce Minnesota

2009			
Education	Objectives	Frequency/ Timing	Who
Brown bag sessions	- Assist healthcare professionals in their knowledge base and through the development of quality skills	Monthly internet offering	Skip Valusek
CPHQ Prep Course	- Prepare healthcare personnel for the exam - Offer high quality CEU opportunity to certified individuals	Annual: March	Skip Valuesk
Fall Seminar	- Bring current healthcare quality issues to attention of membership - Networking	Annual: October	Ad hoc team
Mentoring Program	- Promote mentoring program - Involve experienced members as mentors - Evaluate program usage 4 th quarter	Ongoing	Nancy Wolf/
List Serve	- Explore membership interest in and NAHQ's experience with List Serves	2 nd Quarter	Sally Irrgang Elaine Johnson
Scholarship to National	- Provide partial financial support at least one member to attend the National Conference in 2010 - Evaluate and revise scholarship management process by year end		Board planning

Operational			
Education	Objectives	Frequency/ Timing	How/who
Newsletter	- Educate and inform members - Build a community around the MHQP vision as measured by a survey	3 Publications Annually: Spring, Summer, Winter	Trisch Beilke
Annual Meeting	- Increase attendance at meeting over 2009 by 10% - Plan and promote event at least 3 months prior to date	October	Sally Irrgang
Increase membership	- Maintain current membership - 108	Ongoing	Nancy Wolfe

Operational Education	Objectives	Frequency/ Timing	How/who
Connect with NAHQ	<ul style="list-style-type: none"> - Fund attendance at National for one board member - A least one board member attend each National Leadership Call - Apply for Foundation and/or other grants if these advance MHQP goals - Complete an assessment of MHQP to determine readiness for NAHQ Excellence Award 	Fall Ongoing Ad Hoc December	Board budget decision Board will select representative Board members Sally Irrgang
Manage MHQP funds	<ul style="list-style-type: none"> - Meet with US Bank advisor - Implement on-line membership renewal 	3 rd quarter	Heather Clark, Sally Irrgang and possibly member with investment skills
Bylaw Review	<ul style="list-style-type: none"> - Review and update as needed 	3 rd quarter	Jenny Rodlund
Policy and Procedure Review	<ul style="list-style-type: none"> - Review and update as needed 	2 nd quarter	Past President – Jenny Rodlund

MHQP Reflections

Our Mission:

Minnesota Healthcare Quality Professionals (MHQP) advances the theory and practice of quality improvement by providing educational and networking opportunities for professionals within a variety of healthcare settings. MHQP is affiliated with the National Association of Healthcare Quality (NAHQ).

Our Vision:

MHQP is a recognized state leader providing access to cutting edge theory and practices related to quality improvement with a focus on the professional needs of our members

Code of Ethics for Healthcare Quality Professionals

Healthcare Quality Professionals recognize personal accountability and moral obligations to all customers served: clients, employees, employers, physicians, organizations and the public. Healthcare Quality Professionals are committed to maintaining the integrity of the practice of quality and performance improvement. The key elements defining the standards of conduct for Healthcare Quality Professionals are: commitment, confidentiality, and relationships.

The Healthcare Quality Professional agrees to uphold and promote the dignity of the profession and is committed to:

- Practicing the profession with honesty, integrity, and accountability.
- Maintaining the level of competence as outlined in the Standards of Practice for Healthcare Quality Professionals.
- Seeking the trust and confidence of all customers.
- Supporting the Standards of Practice for Healthcare Quality Professionals.



New Membership Application

Renewal Application

Please Complete:

Name/Credentials	
Position/Title	
Today's Date	

Office Use Only:
REC: _____
DB: _____
CS: _____
Email: _____

Home	Employer
Address	Employer
City	Work Address
State/Zip	Work City
County	Work State Zip Code County
Phone	Work Phone
Fax	Work Fax
E-Mail	Work E-Mail
<input type="checkbox"/> NAHQ Member <input type="checkbox"/> CPHQ Certification <input type="checkbox"/> Other Quality Organization _____	Work Department

I prefer correspondence by (check one): E-mail: Work Home U.S. Mail: Work Home

Organization/Facility Type		Area(s) of Interest
<input type="checkbox"/> Hospital	<input type="checkbox"/> Regulatory Agency	<input type="checkbox"/> Case/Utilization Management
<input type="checkbox"/> Clinic	<input type="checkbox"/> Health Plan	<input type="checkbox"/> Data Management
<input type="checkbox"/> Home Health	<input type="checkbox"/> Rehabilitation	<input type="checkbox"/> Risk Management
<input type="checkbox"/> Long Term Care	<input type="checkbox"/> Behavioral Health	<input type="checkbox"/> Quality/Patient Safety
<input type="checkbox"/> Multicare Health System	<input type="checkbox"/> Other: _____	<input type="checkbox"/> Infection Control <input type="checkbox"/> Other: _____

Annual Membership Fee: \$60.00 Questions? Contact Nancy Wolf at (952) 428-2261 or nancy.wolf@allina.com

Make check payable to: Minnesota Healthcare Quality Professionals (MHQP)

Attn. Nancy Wolf
Mail to: 390 Rolling Meadows Lane
New Prague, MN 56071

Comments: