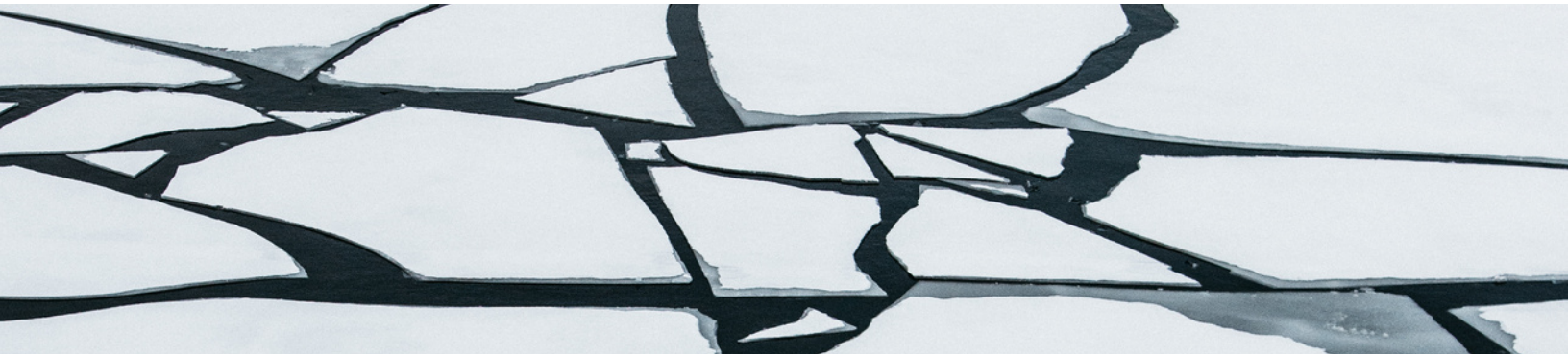


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MONTHLY NEWSLETTER OF CLINICAL SECURITY SOLUTIONS



## WINTER IS COMING

And so are new Workplace Violence Standards for hospitals and critical access hospitals accredited by The Joint Commission (TJC). **These standards will be effective on January 1, 2022**, and include specific changes and enhancements to the environment of care, human resources, and leadership chapters of The Joint Commission standards.

*TJC now defines workplace violence as: An act or threat occurring at the workplace that can include any of the following: **verbal, nonverbal, written, or physical aggression; threatening, intimidating, harassing, or humiliating words or actions; bullying; sabotage; sexual harassment; physical assaults; or other behaviors of concern involving staff, licensed practitioners, patients, or visitors.***

New standards require **all accredited organizations** to "maintain a workplace violence prevention program and that the program:" (LD.03.01.01)

- Is led by a designated individual.
- Is developed by a **multidisciplinary team**.
- Has policies and procedures to prevent and respond to workplace violence.
- Has a process for reporting and analysis of workplace violence incidents.
- Has a process to follow-up and support victims of workplace violence.
- Has a process for reporting workplace violence incidents to the organization's governing body.

> Organizations must conduct an **annual assessment of the effectiveness** of its program and act on its findings. This worksite analysis **must** be documented and needs to be "a proactive analysis of the worksite, an investigation of the hospital's workplace violence incidents, and an analysis of how the program's policies and procedures, training, education, and environmental design reflect best practices and conform to applicable laws and regulations." (EC.02.01.01)



## CONTINUED...

> **Requires a formal process to document, monitor, and investigate** all “workplace violence incidents” and requires that “a summary of such incidents may also be shared with the person designated to coordinate safety management activities.” (EC.04.01.01)

> **Requires that the organization “provide training, education, and resources (at time of hire, annually, and whenever changes occur regarding the workplace violence prevention program) to leadership, staff, and licensed practitioners.”** (HR.01.05.03)

This training must include:

- **What constitutes workplace violence.**
- Education on the **roles and responsibilities** of leadership, clinical staff, security personnel, and external law enforcement.
- Training in de-escalation, nonphysical intervention skills, physical intervention techniques, and response to emergency incidents.
- The **reporting process** for workplace violence incidents.

## NEXT STEPS

**Assign an Owner:** These new standards will be assessed by the TJC Medical Surveyor, so it is imperative **senior leadership teams be well versed** in their organization’s workplace violence prevention program details. You should designate a key member of the leadership team to “own” workplace violence prevention. This person must take an active leadership role that is visible and documented.

**Analyze Your Current State:** Assess your current workplace violence prevention program. Perform a gap analysis **against the new standards** and implement changes as needed. While TCJ does not specify who should conduct such an analysis, organizations that have utilized external subject matter experts have been favorably assessed by TJC.

**WINTER IS COMING ... DON'T WAIT!**  
**CALL US FOR A FREE CONSULTATION: 1-888-705-1007**

# CONTINUED

**Get a Team:** If you do not already have one, form a multidisciplinary team (MDT). **This team should meet at regular intervals** for training (we recommend quarterly) and on an as-needed basis to address workplace violence incidents. At a minimum this team should include the following entities: Security, Legal, Risk Management, and Clinical leadership.

**Create a System:** The MDT should review the previously completed worksite analysis/gap analysis and **develop a process** for continually monitoring, internally reporting, and investigating workplace violence incidents involving patients, staff, or others within its facilities. This process must be formally documented.

**Train to the System:** Develop and implement a training and education plan to address prevention, recognition, response, and reporting of workplace violence as follows.

## OVERWHELMED? CLINICAL SECURITY SOLUTIONS CAN:

- Conduct a Joint Commission worksite/gap analysis of your workplace violence prevention program
- Develop and deliver compliant training programs
- Develop and deliver after care programs
- We can help you select and train your multidisciplinary team

**Through our Virtual Threat Manager® Program we can serve as your multidisciplinary team, augmenting your own staff while providing our experience and expertise.**

### RESOURCES:

[Hospital Standards Requirements - Link](#)

[Critical Access Hospital Standards Requirements - Link](#)

**Educational Opportunity:** [The International Association for Healthcare Security and Safety \(IAHSS\)](#) convened a panel of healthcare security subject matter experts and developed a training program on these new standards. IAHSS will begin offering this course in early December 2021. Clinical Security Solutions founder Don Robinson was one of the subject matter experts involved in developing this course.

## READY FOR THE NEXT LEVEL? LET'S GO.

Contact us for a complimentary assessment.

**1-888-705-1007 | [info@clinicalsecurity.org](mailto:info@clinicalsecurity.org)**

Our Services: Virtual Threat Manager® | Behavioral Threat Assessment & Management | Policy Review & Gap Analysis

