
NEW JOINT COMMISSION STANDARDS ON WORKPLACE VIOLENCE

New standards by the Joint Commission (TJC) place additional requirements on accredited employers related to the prevention of violence in the workplace. The new standards went into effect as of January 1, 2022. Although the TJC has been slow to adequately address the crisis of workplace violence in healthcare settings, NYSNA welcomes TJC's renewed focus on this issue.

Workplace violence continues to be a tremendous hazard in healthcare facilities. It is important that key organizations such as TJC put in place standards for violence prevention. The key government enforcement agency responsible for worker safety, OSHA, still has no workplace violence standard. NYSNA will continue to work with other unions to push OSHA forward on this issue that is so important to our members. Meanwhile we can add the Joint Commission standards to our workplace violence action tool box.

TJC Workplace Violence Standards Include:

1. The hospital must conduct an **annual worksite analysis** regarding its workplace violence program. (Standard EC.02.01.01, EP17). *Note: Making sure that this analysis happens, and that it reflects the experience of frontline staff, can be a goal for NYSNA members going forward.*
2. The hospital must have in place the means for, **"continually monitoring, internally reporting and investigating" a host of safety issues**, including, "injuries to patients or others, damage to property, and safety and security incidents involving patients, staff, or others within its facilities, including those related to workplace violence." (Standard EC.04.01.01, EP1). *Note: This standard expands the PESH workplace violence requirement for the public sector and requires it of all healthcare employers, whether public or private. NYSNA member action to insist that healthcare facilities meet the requirements of this standard would ensure more incidents are captured, recorded and properly investigated.*
3. **The hospital "takes actions to mitigate or resolve the workplace violence safety and security risks based upon findings from the analysis.** (Standard EC.02.01.01, EP17). *Note: The healthcare employer cannot just identify workplace violence risks; they must take action to decrease or eliminate the risks. The participation of frontline staff can make a significant difference in ensuring that appropriate and effective actions are taken.*
4. The hospital, "based on its processes, **reports and investigates** the following: safety and security incidents involving patients, staff, or others within its facilities, including those related to workplace violence." (Standard EC.04.01.01, EP1). *Note: In many facilities*

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incident investigation is weak at best. NYSNA members can use this requirement to make sure these investigations are conducted thoroughly to get to the root cause of all incidents.

5. The hospital **“has a workplace violence prevention program** led by a designated individual and developed by a multidisciplinary team that includes the following:
- Policies and procedures to prevent and respond to workplace violence.
 - A process to report incidents in order to analyze incidents and trends.
 - A process to follow up and support victims and witnesses affected by workplace violence, including trauma and psychological counseling, if necessary.
 - Reporting of workplace violence incidents to the governing body.” (Standard LD.03.01.01 EP 9)

Note: In order to make sure that management creates more than just a “paper program,” NYSNA members must demand a seat at the table and work to actively participate in all steps of the workplace violence prevention program.

6. “As part of its workplace violence prevention program, **the hospital provides 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.” (Standard HR.01.05.03 EP 29). *Note: Management often prefers to focus on training because it puts the responsibility for stopping violence on frontline healthcare workers’ actions rather than requiring the employer to put in place physical safety features such as barriers or improve staffing levels. However, meaningful training that provides skills, information and a clear idea of the mitigation measures can be helpful.*

Do you believe your facility is in full compliance with TJC workplace violence standards?

If not, please contact your facility NYSNA rep and the NYSNA Health and Safety representatives for more information on how to use these TJM standards to ensure a safer workplace. We must make use of many tools to secure workplaces that are safer from violence.

NYSNA Health and Safety can be reached at **healthandsafety@nysna.org**.