The Joint Commission has approved the following revisions for prepublication. While revised requirements are published in the semiannual updates to the print manuals (as well as in the online *E-dition®*), accredited organizations and paid subscribers can also view them in the monthly periodical The *Joint Commission Perspectives®*. To begin your subscription, call 800-746-6578 or visit [http://www.jcrinc.com](http://www.jcrinc.com).

**Please note:** Where applicable, this report shows current standards and EPs first, with deleted language struck-through. Then, the revised requirement follows in bold text, with new language underlined.

**APPLICABLE TO HOSPITAL ACCREDITATION PROGRAM**

**Effective January 1, 2022**

### Environment of Care (EC) Chapter

**EC.02.01.01**

The hospital manages safety and security risks.

**Element(s) of Performance for EC.02.01.01**

17. The hospital conducts an annual worksite analysis related to its workplace violence prevention program. The hospital takes actions to mitigate or resolve the workplace violence safety and security risks based upon findings from the analysis.

Note: A worksite analysis includes 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.

(See also EC.04.01.01, EP 1)

**EC.04.01.01**

The hospital collects information to monitor conditions in the environment.

**Element(s) of Performance for EC.04.01.01**
1. The hospital establishes a process(es) for continually monitoring, internally reporting, and investigating the following:
   - Injuries to patients or others within the hospital’s facilities
   - Occupational illnesses and staff injuries
   - Incidents of damage to its property or the property of others
   - Security incidents involving patients, staff, or others within its facilities
   - Hazardous materials and waste spills and exposures
   - Fire safety management problems, deficiencies, and failures
   - Medical or laboratory equipment management problems, failures, and use errors
   - Utility systems management problems, failures, or use errors

   Note 1: All the incidents and issues listed above may be reported to staff in quality assessment, improvement, or other functions. A summary of such incidents may also be shared with the person designated to coordinate safety management activities.

   Note 2: Review of incident reports often requires that legal processes be followed to preserve confidentiality. Opportunities to improve care, treatment, or services, or to prevent similar incidents, are not lost as a result of following the legal process.

6. Based on its process(es), the hospital reports and investigates the following: Security incidents involving patients, staff, or others within its facilities.

6. Based on its process(es), the hospital reports and investigates the following: Safety and security incidents involving patients, staff, or others within its facilities, including those related to workplace violence.
29. 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. The hospital determines what aspects of training are appropriate for individuals based on their roles and responsibilities. The training, education, and resources address prevention, recognition, response, and reporting of workplace violence as follows:
- 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
(See also LD.03.01.01, EP 9)

Leadership (LD) Chapter

LD.03.01.01

Leaders create and maintain a culture of safety and quality throughout the hospital.

Element(s) of Performance for LD.03.01.01

9. 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 for follow up and support to victims and witnesses affected by workplace violence, including trauma and psychological counseling, if necessary
- Reporting of workplace violence incidents to the governing body
(See also HR.01.05.03, EP 29)