



THE JOINT COMMISSION COMPREHENSIVE  
ACCREDITATION MANUAL FOR HOSPITALS  
ALIGNMENT WITH THE AEGIS SYSTEM<sup>™</sup>



[www.theaegissystem.com](http://www.theaegissystem.com)



Aegis Training Solutions, LLC, has decades of experience providing training and consulting to hospitals and health care facilities to support their safety climate. This training and consulting is in alignment with the elements of performance outlined in the Joint Commission Comprehensive Accreditation Manual for Hospitals.

The Aegis System™ curriculum and resources found within the Aegis Trainer Portal ensure that a positive impact is achieved with any workplace violence prevention initiative. In addition to delivering training, Aegis routinely offers consultation before and after client engagement. The Aegis team is standing by to offer full implementation support.

This document will outline how The Aegis System™ can help hospitals and health care providers comply with the Joint Commission standards.

PROVISION OF CARE, TREATMENT, AND SERVICES	AEGIS ALIGNMENT
<p><b>Standard PC.01.02.13</b></p> <ul style="list-style-type: none"> <li>The hospital assesses the need of patients who receive treatment for emotional and behavioral disorders.</li> </ul> <p><b>Standard PC.03.05.01</b></p> <ul style="list-style-type: none"> <li>The hospital uses restraint or seclusion only when it can be clinically justified or when warranted by patient behavior that threatens the physical safety of the patient, staff, or others.</li> </ul> <p><b>Elements of Performance for PC.03.05.01</b></p> <ul style="list-style-type: none"> <li>The hospital uses restraint or seclusion only to protect the immediate physical safety of the patient, staff, or others.</li> <li>The hospital does not use restraint or seclusion as a means of coercion, discipline, convenience, or staff retaliation.</li> <li>The hospital uses restraint or seclusion only when less restrictive interventions are ineffective.</li> <li>The hospital uses the least restrictive form of restraint or seclusion that protects the physical safety of the patient, staff, or others.</li> <li>The hospital discontinues restraint or seclusion at the earliest possible time, regardless of the scheduled expiration of the order.</li> </ul> <p><b>Standard PC.03.05.03</b></p> <ul style="list-style-type: none"> <li>The hospital uses restraint or seclusion safely.</li> </ul> <p><b>Elements of Performance for PC.03.05.03</b></p> <ul style="list-style-type: none"> <li>The hospital implements restraint or seclusion using safe techniques identified by the hospital’s policies and procedures in accordance with law and regulation.</li> <li>The use of restraint and seclusion is in accordance with a written modification to the patient’s plan of care.</li> </ul> <p><b>Standard PC.03.05.05</b></p> <ul style="list-style-type: none"> <li>The hospital initiates restraint or seclusion based on an individual order.</li> </ul> <p><b>Elements of Performance for PC.03.05.05</b></p> <ul style="list-style-type: none"> <li>A physician or other authorized licensed practitioner responsible for the patient’s care orders the use of restraint or seclusion in accordance with hospital policy and law and regulation.</li> <li>The hospital does not use standing orders or PRN (also known as “as needed”) orders for restraint or seclusion.</li> </ul> <p><b>Standard PC.03.05.07</b></p> <ul style="list-style-type: none"> <li>The hospital monitors patients who are restrained or secluded.</li> </ul>	<p>The Aegis System™ provides instruction on assessing relevant patient history, using person-centered behavioral intervention, maintaining applied empathy, and applying early intervention as a response to escalated behavior. The Aegis model for safety-oriented decision-making ensures that intervening professionals respond with intention. Aegis instructs and assesses competence in both verbal intervention and physical response to out-of-control/unsafe behavior. The clear focus is to apply empathy and maintain effective communication to prevent the occurrence of workplace violence.</p> <p>The Aegis System™ teaches that physical restraint is used only in response to an imminent safety threat and when the risk of not intervening outweighs the risk of physical intervention. Beyond physical restraints, Aegis does not instruct any other form of restraint (mechanical or chemical). Aegis instructs that physical intervention is to be used only when specific criteria are in place. These criteria include using the least restrictive intervention, making safety-oriented decisions at all times, and applying a tertiary design that assists staff in making situation-appropriate decisions throughout an incident.</p> <p>The Aegis System™ maintains a zero-tolerance policy on any coercive or inappropriate use of physical restraint. This zero-tolerance policy prohibits the use of physical intervention for discipline, convenience, retaliation, or any reason other than an imminent safety concern.</p> <p>The Aegis System™ provides a comprehensive Safety Briefing, outlining the risks associated with physical restraint and key safety considerations. This includes monitoring the person in a physical restraint, when to terminate restraint, and a process of incremental release from physical restraint.</p> <p>Aegis maintains a person-centered and individualized approach.</p>



<p><b>Elements of Performance for PC.03.05.07</b></p> <ul style="list-style-type: none"><li>• Physicians, other license practitioners, or staff who have been trained in accordance with 42 CFR 482.13(f) to monitor the condition of patients in restraint or seclusion.</li></ul>	
<p><b>Standard PC.03.05.09</b></p> <ul style="list-style-type: none"><li>• The hospital has written policies and procedures that guide the use of restraint or seclusion.</li></ul> <p><b>Elements of Performance for PC.03.05.09</b></p> <ul style="list-style-type: none"><li>• The hospital's policies and procedures regarding restraint or seclusion include the following:</li><li>• The hospital manages safety and security risks.<ul style="list-style-type: none"><li>○ Physician and other licensed practitioner training requirements.</li><li>○ Staff training requirements.</li><li>○ The determination of who has authority to order restraint and seclusion.</li><li>○ The determination of who has the authority to discontinue the use of restraint or seclusion.</li><li>○ The determination of who can initiate the use of restraint or seclusion.</li><li>○ The circumstances under which restraint or seclusion is discontinued.</li><li>○ The requirement that restraint or seclusion is discontinued as soon as is safely possible.</li><li>○ A determination of who can assess and monitor patients in restraint or seclusion.</li><li>○ Time frames for assessing and monitoring patients in restraint or seclusion.</li><li>○ A definition of restraint.</li><li>○ A definition of seclusion.</li></ul></li><li>• Physicians and other licensed practitioners authorized to order restraint or seclusion (through hospital policy in accordance with law and regulation) have a working knowledge of the hospital policy regarding the use of restraint and seclusion.</li></ul> <p><b>Standard PC.03.05.15</b></p> <ul style="list-style-type: none"><li>• The hospital documents the use of restraint or seclusion.</li></ul> <p><b>Elements of Performance for PC.03.05.15</b></p> <ul style="list-style-type: none"><li>• Documentation of restraint and seclusion in the medical record includes the following:</li><li>○ Any in-person medical and behavioral evaluation for restraint or seclusion used to manage violent or self-destructive behavior.</li><li>○ A description of the patient's behavior and the intervention used.</li><li>○ Any alternatives or other less restrictive interventions attempted.</li><li>○ The patient's condition or symptom(s) that warranted the use of the restraint or seclusion.</li><li>○ The patient's response to the intervention(s) used, including the rationale for the continued use of the intervention.</li><li>○ The intervals for monitoring.</li><li>○ The patient's behavior and staff concerns regarding safety risks to the patient, staff, and others that necessitated the use of restraint or seclusion.</li></ul>	<p>The Aegis System™ recommends that organizations continuously assess their policies and procedures, trends in data, and staff training needs. This includes a minimum yearly assessment of data and a commitment to continual improvement. Aegis provides individual supports (such as resources found within the Aegis Trainer Portal and routine consulting) to support these endeavors.</p> <p>Aegis Holds (section 4 of The Aegis System™) have been designed to best mitigate and minimize risk of injury to all involved. Avoidance of bodily harm is the top priority. The interventions involve nothing that could be misconstrued as pain compliance or joint manipulation. Aegis instructs for the least restrictive option to be used at all times (supported by a tertiary design) and provides guidance and assessment parameters for the duration of an incident. Aegis instruction includes safeguards to ensure that restraint is discontinued as soon as possible.</p> <p>All Aegis physical intervention techniques are engineered to best mitigate risk of injury. All Aegis techniques have passed through Kinesics Review (administered by an external panel of MDs) to make the determination that they are safe when applied correctly.</p> <p>Aegis provides clear definitions of restraint and procedural language in the published Aegis Trainer Manual, which easily translate into policy for participating organizations. These procedures are instructed at all Aegis trainings.</p> <p>The Aegis System™ provides a comprehensive Safety Briefing in its curriculum, which includes a breakdown of physical, psychological, and social-emotional risk factors. Aegis also provides strategies to minimize or avoid potential negative impacts through trauma-informed debriefing and post-incident procedures that are included in regular Aegis instruction.</p> <p>Aegis instructs for the least restrictive option to be used at all times (supported by a tertiary design) and provides other options for physical intervention that do not restrict a patient's free movement. Aegis also provides time frame guidance and assessment parameters for the duration of an incident. Aegis instruction includes safeguards to ensure that restraint is discontinued as soon as possible.</p> <p>The Aegis System™ instructs that every incident is documented and assessed as part of a comprehensive workplace violence prevention and mitigation plan. Aegis outlines specific procedures and expectations for effective debriefing, documentation, and data-driven organizational assessment.</p> <p>The Aegis System™ provides a comprehensive system of documenting staff training, including certifications and reliable recordkeeping of each employee trained.</p>



<p><b>Standard PC.03.05.17</b></p> <ul style="list-style-type: none"><li>• The hospital trains staff to safely implement the use of restraint or seclusion.</li></ul> <p><b>Elements of Performance for PC.03.05.17</b></p> <ul style="list-style-type: none"><li>• The hospital trains staff on the use of restraint and seclusion, and assesses their competence, at the following intervals:<ul style="list-style-type: none"><li>○ At orientation.</li><li>○ Before participating in the use of restraint and seclusion.</li><li>○ On a periodic basis thereafter.</li></ul></li><li>• Based on the population served, staff education, training, and demonstrated knowledge focus on the following:<ul style="list-style-type: none"><li>○ Strategies to identify staff and patient behaviors, events, and environmental factors that may trigger circumstances that require the use of restraint or seclusion.</li><li>○ The use of nonphysical intervention skills.</li><li>○ Methods for choosing the least restrictive interventions based on an assessment of the patient’s medical or behavioral status or condition.</li><li>○ Safe application and use of all types of restraint or seclusion used in the hospital, including training in how to recognize and respond to signs of physical and psychological distress (for example, positional asphyxia).</li><li>○ Clinical identification of specific behavioral changes that indicate that restraint or seclusion is no longer necessary.</li><li>○ Monitoring the physical and psychological well-being of the patient who is restrained or secluded, including, but not limited to, respiratory and circulatory status, skin integrity, vital signs, and any special requirements specified by hospital policy associated with the in-person evaluation conducted within one hour of initiation of restraint or seclusion.</li></ul></li></ul>	<p>Included within Aegis instruction is a specific process of performance-based certification that affirms the ability of each certified staff to perform Aegis techniques and maintain safety-oriented decision-making. Aegis provides the necessary supports to track and document staff certification. This performance-based certification is required to be maintained on an annual basis and no person is to perform an Aegis safety intervention if they are not current with their certification.</p> <p>Aegis is powered by a team that has decades of experience implementing crisis prevention and de-escalation training. The clear focus is on the nonphysical/preventative de-escalation model (sections 1–3 of The Aegis System™). Aegis core principles maintain applied empathy and effective communication to prevent the need for any type of physical intervention.</p> <p>The Aegis System™ provides instruction on assessing relevant patient history, using person-centered behavioral intervention, maintaining applied empathy, and applying early intervention as a response to escalated behavior. The ABCs of Escalation are instructed at the beginning of each training and use an evidence-based approach to identify patient triggers (Activating Events) and other factors that lead to behavioral escalation. These same ABCs serve as the basis for a specific evidence-based de-escalation strategy.</p> <p>Aegis boasts an unrivaled safety record in teaching (benevolent) physical restraint techniques as a last-resort option. Trainer certification provides the option for staff training to be delivered pre-hire, at orientation, or with any training initiative. Aegis expects training to be reinforced at regular intervals on a periodic basis.</p> <p>Training formats are customizable to meet the needs of a variety of learners in different areas. These flexible options are offered while maintaining the fidelity of the training program.</p> <p>The learning design of Aegis is consistent with an approach that best transfers learning to adults. This includes classroom learning, practical demonstrations, real-life examples, scenario-based exercises, and a variety of audio and visual resources.</p> <p>The Aegis model for safety-oriented decision-making ensures that intervening professionals respond with intention. Aegis instructs and assesses competence in both using verbal intervention and physically responding to out-of-control/unsafe behavior.</p> <p>The Aegis System™ provides a comprehensive Safety Briefing in its curriculum, which includes a breakdown of the physical, psychological, and social-emotional risk factors. This Safety Briefing explicitly outlines the warning signs of positional (restraint-associated) asphyxia and requires the termination of restraint if there is any indication of a pending asphyxia.</p> <p>Since incorporating in 2014, Aegis has maintained the evidence-based position that prone restraints present a high risk of positional asphyxia and should not be used. Aegis prohibits prone and supine floor restraints and instructs the use of The Aegis Safety Position™, a proprietary solution that eliminates the need for prone restraints.</p>
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RIGHTS AND RESPONSIBILITIES OF THE INDIVIDUAL	AEGIS ALIGNMENT
<p><b>Standard RI.01.06.03</b></p> <ul style="list-style-type: none"><li>• The patient has the right to be free from neglect; exploitation; and verbal, mental, physical, and sexual abuse.</li></ul> <p><b>Elements of Performance of Standard RI.01.06.03</b></p> <ul style="list-style-type: none"><li>• The hospital determines how it will protect the patient from neglect, exploitation, and abuse that could occur while the patient is receiving care, treatment, and services.</li><li>• The hospital evaluates all allegations, observations, and suspected cases of neglect, exploitation, and abuse that occur within the hospital.</li></ul>	<p>The Aegis System™ maintains a zero-tolerance policy regarding any type of abuse or coercive intervention that includes neglect, exploitation, or mental, physical, or sexual abuse. Any such abuse, coercive intervention, and/or deviation from a Trauma-informed approach is flagrantly out of alignment with Aegis curriculum and instruction.</p> <p>The Aegis System™ instructs that any significant incident(s), especially allegations of abuse, are documented, investigated, and learned from.</p>



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ENVIRONMENT OF CARE	AEGIS ALIGNMENT
<p><b>Elements of Performance for EC.02.01.01</b></p> <ul style="list-style-type: none"> <li>• The hospital conducts an annual work-site analysis related to its workplace violence program. The hospital takes actions to mitigate or resolve the workplace violence safety and security risks based upon findings from the analysis.               <ul style="list-style-type: none"> <li>○ Note: A work-site analysis includes a proactive analysis of the worksite, an investigation of the hospital’s workplace violence events, 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.</li> </ul> </li> </ul>	<p>Aegis delivers support to human service organizations that are seeking to review and improve upon all relevant policy and procedure. Aegis routinely consults around client engagements and does not use the necessary review of data and policy as an upselling opportunity. Aegis consulting ensures a positive impact with any workplace violence prevention plan. In addition, Aegis includes a wealth of resources, within the published Trainer Manual and online Trainer Portal, that provide outlines for successful integration of The Aegis System™ along with any workplace violence prevention initiative. These resources provide a framework that easily translates into Policy and Procedure.</p> <p>Aegis expects staff to be educated regularly to reinforce all relevant policy and procedure. Continual, data-driven review should be happening alongside a commitment to updating these policies and procedures as needed. Trends in legislative best practices and data generated from Incident Reports (included in Aegis instruction) should inform this process. Aegis Operational Policy states that such a work-site analysis needs to happen on a yearly basis, at a minimum. Aegis consultants make themselves available to lend their subject-matter expertise to this endeavor to ensure alignment with the Joint Commission standards.</p>
<p><b>Elements of Performance for EC.04.01.01</b></p> <ul style="list-style-type: none"> <li>• The hospital establishes a process(es) for continually monitoring, internally reporting, and investigating the following:               <ul style="list-style-type: none"> <li>○ Injuries to patients or others within the hospital’s facilities;</li> <li>○ Occupational Illnesses and staff injuries;</li> <li>○ Incidents of damage to its property or the property of others;</li> <li>○ Safety and security incidents involving patients, staff, or others within its facilities, including those related to workplace violence.</li> <li>○ Note 1: All the incidents and issues listed above may be reported to staff in quality assessment, improvement, or other functions as well as to the designated leader of the workplace violence reduction effort. A summary of such incidents may also be shared with the person designated to coordinate safety management activities.</li> <li>○ 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.</li> </ul> </li> <li>• Based on its process(es), the hospital reports and investigates the following:</li> </ul>	<p>Aegis instructs each participating organization to document any incident of workplace violence post-incident. The Aegis System™ provides procedures for aggregating data, spotting trends, and responding with updated policy and procedure. Each incident should be evaluated through the preventative lens of the Aegis De-escalation Model (Sections 1–3 of The Aegis System™). Supportive peer feedback should accompany this evaluation. Aegis may also recommend for this review process to occur with greater frequency, depending upon trends in data and the individual needs of an organization. Special consideration is given to the first year of a new rollout.</p>



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<ul style="list-style-type: none"><li>○ Security incidents involving patients, staff, or others within its facilities, including those related to workplace violence.</li></ul>	
HUMAN RESOURCES	AEGIS ALIGNMENT
<p><b>Elements of Performance for HR.01.05.03</b></p> <ul style="list-style-type: none"><li>• 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:</li></ul> <ul style="list-style-type: none"><li>○ What constitutes workplace violence;</li><li>○ Education on the roles and responsibilities of leadership, clinical staff, security personnel, and external law enforcement;</li><li>○ Training in de-escalation, nonphysical intervention skills, physical intervention techniques, and response to emergency incidents;</li><li>○ The reporting process for workplace violence incidents.</li></ul>	<p>The Aegis approach to organizational assessment is a product of decades of experience implementing Workplace Violence Prevention plans across many human service organizations. This approach is captured within the Aegis resource document Maximizing Integration (<a href="http://www.theaegissystem.com">www.theaegissystem.com</a>) and addressed in greater depth within the Aegis Trainer Manual and Trainer Portal resources. Additionally, Aegis routinely consults along these lines and is able to complete a risk assessment for client organizations.</p> <p>Part of this risk assessment includes assessing and prescribing the right level of training for different team members depending on their professional role. The Aegis De-escalation Model (nonphysical intervention, Sections 1–3) is consistent across every client engagement but different hourly formats and modules for training are available in person and online (e-learning). E-learning is remarkably efficient and blends with in-person learning delivered by certified Aegis Trainers.</p> <p>The learning design of The Aegis System™ is geared towards adult learners. This is factored in at every step when delivering training. Aegis utilizes scenario-based role-playing, interactive media, problem-solving, and engaging activities to transfer learning to adults. Aegis in-person learning and e-learning are highly interactive. All of this, coupled with the abundant resources found within the Aegis Trainer Portal, makes an all-staff rollout easy at any scale.</p> <p>Within these flexible and customizable delivery options, Aegis is careful to maintain the fidelity of the training program. For example, all staff must demonstrate comprehension of the safety information pertaining to the risk of restraint. Aegis trains that restraint is always a last resort and to be used only when the risk of not using a physical safety intervention is greater due to an imminent safety concern. Each staff person is educated on the risk of restraint and required to meet performance-based standards that demonstrate they have the ability to maintain reasonable and safety-oriented decision making when intervening in crisis. This process is instructed at all Aegis Train-the-Trainer events and documented in the Staff Performance Review (documentation provided to all Certified Aegis Trainers via the Aegis Trainer Portal).</p> <p>The Aegis System™ utilizes a tertiary design. For example, an organization may elect to train staff in lower-risk areas in just the De-escalation Model and not any physical skills (such as Aegis Holds or Escapes). Within the physical intervention component, there are different levels of Aegis Holds to mitigate different levels of safety concerns when physical intervention is necessary to ensure a safe outcome. These Aegis Holds are all compatible with The Aegis Safety Position™, which is a seated floor position that eliminates the need for any prone or supine restraint. This proprietary solution is used for higher-risk incidents where a floor hold is needed. Aegis only instructs proprietary Aegis Holds (benevolent physical restraints) and does not include any other form of restraint, such as mechanical or chemical, in its instruction.</p>





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LEADERSHIP	AEGIS ALIGNMENT
<p><b>Elements of Performance of Standard LD.03.01.01</b></p> <ul style="list-style-type: none"><li>• The hospital has a workplace violence prevention program led by a designated individual and developed by a multidisciplinary team that includes the following:<ul style="list-style-type: none"><li>○ Policies and procedures to prevent and respond to workplace violence;</li><li>○ A process to report incidents in order to analyze events and trends;</li><li>○ A process for follow up and support to victims and witnesses affected by workplace violence, including trauma and psychological counseling, if necessary;</li><li>○ Reporting of workplace violence incidents to the governing body.</li></ul></li></ul>	<p>Aegis provides consultation and support for organizations seeking to update, reassess, or implement any workplace violence prevention plan. Aegis encourages organizations to integrate policies and procedures that are consistent with the skills and approach of The Aegis System™. Aegis offers many resources and supports along these lines:</p> <ul style="list-style-type: none"><li>• Complimentary consulting before/after client engagement.</li><li>• The Aegis Position on Workplace Violence and Maximizing Integration documents (available to anyone at <a href="http://theaegissystem.com">theaegissystem.com</a>) provide support and framework for enacting violence prevention plans that make a positive impact.</li><li>• For client organizations, all of Section 4 (Physical Intervention) is written to easily translate into policy and procedure.</li><li>• Section 4 also includes post-incident mitigation, such as:<ul style="list-style-type: none"><li>○ Incident reporting and how to identify trends in the resulting data.</li><li>○ A Trauma-informed approach to debriefing incidents that creates a supportive workplace culture.</li></ul></li><li>• Many resources exist within the Aegis Trainer Portal to further maximize the positive impact of Aegis Training and support any workplace violence prevention plan. Advanced resources are available on within the Aegis Trainer Portal free of charge.</li><li>• Adopting the Aegis approach turns training into a platform for reinforcing and maintaining such policy and procedure. This creates the space to also discuss any individualized behavior plans or person-specific situations. This is a healthy approach that ensures alignment with the Joint Commission standards.</li></ul> <p>This support includes assistance in identifying appropriate individuals and key roles within the multidisciplinary team that will lead the overall initiative. For example, in a health care setting, Aegis insists that this committee has representatives from various clinical areas as well as the security/protective services team.</p> <div data-bbox="797 1199 899 1297"></div> <p>The Aegis System™ includes instruction in Trauma-informed Care and highlights trauma-informed principles throughout the curriculum.</p>