Compliance with JCI Protocols: A Focus on Employee Safety

Dr. A. Girija[1], Husna Ali AL Quattan[2]

[1]Associate Professor, Apollo Institute of Hospital Administration, Hyderabad, Telangana, India

[2] MDHM, Hyderabad, Telangana, India

DOI: https://doi.org/10.51244/IJRSI.2025.120800058

Received: 08 Aug 2025; Accepted: 14 Aug 2025; Published: 04 September 2025

ABSTRACT

The article explores employee safety compliance with Joint Commission International (JCI) protocols at a corporate hospital in Hyderabad. JCI provides comprehensive standards aimed at ensuring the safety and security of healthcare workers. Employee safety remains a top priority for healthcare institutions, covering areas such as workplace hazards, safety training, emergency preparedness, adherence to health regulations, accident reporting, and wellness initiatives.

The study employed both primary and secondary data collection methods. Observations were made on employee safety practices to evaluate whether the healthcare organization complies with JCI protocols. Adherence to these standards is expected to enhance employee performance and strengthen their commitment to the organization.

A total of 200 employees participated in the study, including 50 doctors, 50 administrators, 80 nurses, and 20 technicians. Data was collected using closed-ended questionnaires, where employees selected the safety measures made available to them.

Each employee received a questionnaire to assess their safety-related experiences, which was then used to evaluate compliance with JCI guidelines. The collected data was analyzed to verify adherence to these standards. A Chi-square test was performed to examine the relationship between gender and the perceived responsibility of workload.

The analysis involved various tools and techniques including MS Excel, Chi-square testing, hypothesis testing, Google Forms, graphical representations (such as bar graphs), and percentage-based evaluations.

Key Words: Employee Safety, JCI (Joint Commission International), Employee care, Quality, Safety Compliance.

INTRODUCTION

To meet JCI standards, hospital staff must be thoroughly trained in handling hazardous materials, infection prevention, and emergency response procedures. Regular safety audits, effective communication systems, and active participation from safety committees are crucial. These efforts should involve all staff members including doctors, nurses, technicians, and administrators to foster a safe, well-prepared, and compliant healthcare environment.

This study focuses on evaluating employee safety within the scope of Joint Commission International (JCI) protocols. Its primary goals are to enhance the quality of care for employees, improve coordination among healthcare teams, and strengthen safety practices across the organization. The study also aims to reduce workplace stress, build resilience among hospital staff, and address the essential needs of healthcare workers in alignment with JCI standards.

ISSN No. 2321-2705 | DOI: 10.51244/IJRSI |Volume XII Issue VIII August 2025

Moreover, it emphasizes the need for operational efficiency by adopting effective safety management strategies and reinforcing safety protocols. Ultimately, the study seeks to foster a safer, more supportive work environment for all healthcare professionals.

REVIEW OF LITERATURE

Compliance with JCI protocols is essential for maintaining high standards of patient and staff safety. It involves adherence to IPSGs, which are critical for accreditation and continuous quality improvement in healthcare organizations (Siewert et al., 2018). A robust compliance program helps mitigate risks, protect workers' rights, and promote sustainable business development. Training and resource management are crucial for preparing preventive compliance reports and managing occupational risks effectively (Paula Andrea Ramirez Barbosa, 2023). Studies have shown a decline in compliance and awareness of JCI safety goals post-accreditation, indicating the need for ongoing efforts beyond the accreditation process. Challenges include maintaining continuous readiness and embedding compliance into the daily routine and culture of the organization (Chehab et al. 2016.).

Implementing continuous quality improvement measures and regular monitoring of safety practices can enhance compliance. This includes setting quality indicators and conducting regular audits (Kobayashi et al., 2021). Michael H et al., (2018) conducted an observational study at a primary stroke center and identified security gaps that posed risks to patient and staff safety. The study highlights the importance of regular security audits and staff education to prevent workplace violence.

Anni Vuohijoki et al., (2023) study aims to monitor the effects of implementing the Joint Commission International (JCI) quality assurance system at Orton Orthopedic Hospital on employee well-being and patient safety. In the study Hilda Maze et al., (2023) found that nurses, especially younger ones, showed high engagement and self-efficacy, which positively correlated with the use of quality-enhancing tools and openness to change. Roselle Marie D et al., (2023) in their study examined how Total Quality Management (TQM) and safety influence customer satisfaction in private hospitals, revealing strong stakeholder agreement on these aspects. Their recommendations include better stakeholder profiling, enhanced infection control, and improved hospital processes for more effective service delivery.

OBJECTIVE OF THE STUDY

1. To evaluate the implementations of the standards and rules set by the Joint Commission International for the Healthcare Providers.

2. To identify the factors associated with employee care and safety, including quality of healthcare provided.

3. To improvise employee care and providing the best facilities.

4. To look after basic needs and demands of the Healthcare Providers and the staff within JCI Protocols.

METHODS

This study focuses on evaluating the application of Joint Commission International (JCI) protocols for employee safety and examining the potential benefits of their implementation in a hospital setting. The goal is to enhance staff satisfaction and ensure consistent, high-quality performance. The study covers various aspects, including employee safety compliance, emergency preparedness, proper equipment handling, facility management, workplace hazard prevention, infection control, and the reduction of Hospital Acquired Infections (HAIs), along with other relevant clinical indicators.

The study employed a convenient sampling method to collect data over a two-month period. A total sample of 200 employees comprising 50 doctors, 50 administrators, 80 nurses, and 20 technicians was selected, representing 20% of the hospital's total staff. Data collection involved both primary and secondary sources. Primary data was obtained through observations, interviews, and the distribution of structured questionnaires

ISSN No. 2321-2705 | DOI: 10.51244/IJRSI |Volume XII Issue VIII August 2025

to employees. Secondary data was gathered from JCI guidelines, quality standards, hospital reports, and other relevant documents.

RESULTS & DISCUSSION

The study gathered and analyzed information on a range of employee safety parameters. These included the conduct of regular safety assessments, clarity in clinical and administrative roles, communication methods for safety protocols, physical safety in the workplace, workload distribution, and job security. It also examined organizational policies, opportunities for learning and development, awareness of safety procedures, infection control measures, accessibility of emergency exits, safety training sessions, and the use of hazard warning signals.

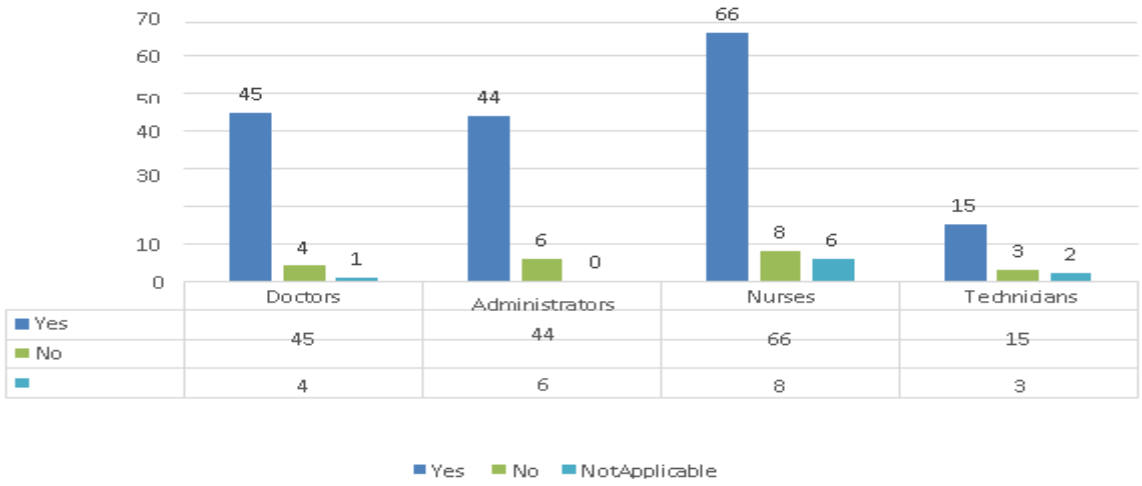


Fig 1- Conducting periodic employee safety surveys

Inference:

Figure 1 presents the findings of the employee safety survey conducted in line with JCI guidelines at the study hospital. The majority of employees confirmed that periodic safety surveys are carried out. This reflects the hospital's proactive approach to safeguarding the well-being of its workforce, including doctors, administrators, nurses, and technicians.

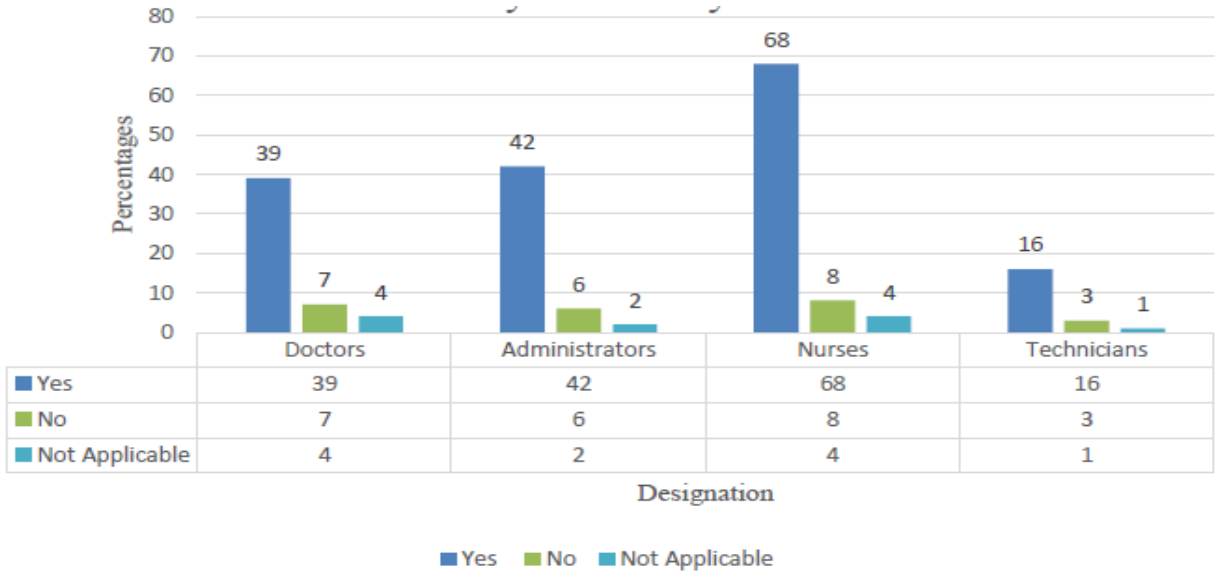


Fig 2 - Clinical and administrative responsibilities covered by the survey

ISSN No. 2321-2705 | DOI: 10.51244/IJRSI |Volume XII Issue VIII August 2025

Inference:

Figure 2 displays a bar graph indicating that the hospital's employee safety surveys effectively address both clinical and administrative responsibilities. A significant number of staff members 39 doctors, 42 administrators, 68 nurses, and 16 technicians reported that the surveys cover both areas of their work, highlighting the hospital's comprehensive approach to employee safety.

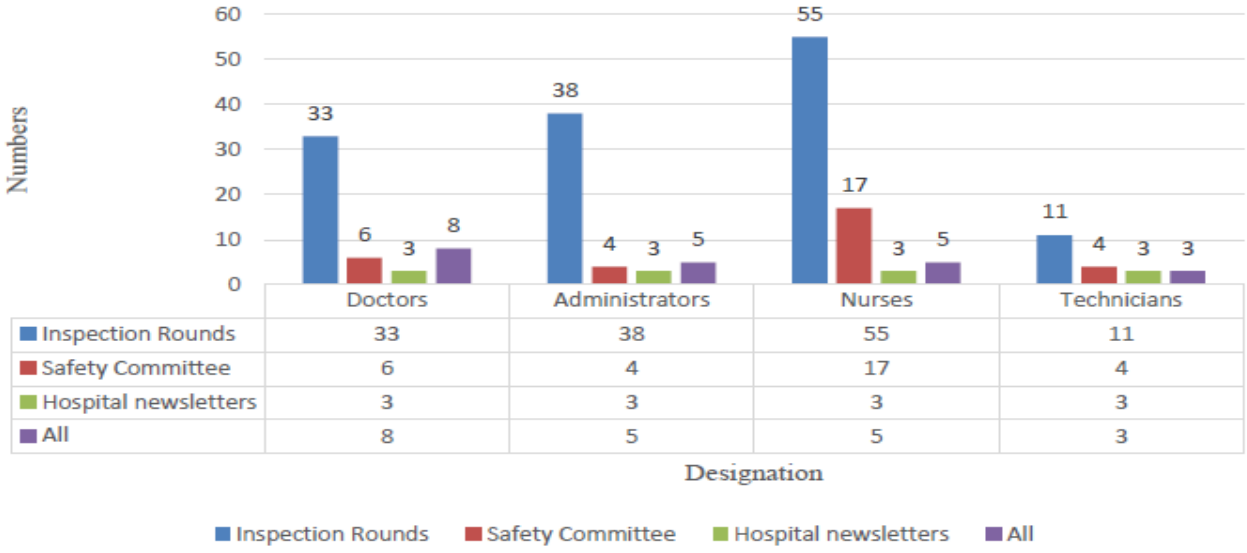


Fig 3 - Methods to communicate employee safety

Inference:

Figure 3 highlights the different methods used by the hospital to communicate employee safety measures to staff. A large portion of respondents identified inspection rounds as the primary mode of communication, while others pointed to the role of the safety committee. Specifically, 33 doctors, 38 administrators, 55 nurses, and 11 technicians reported that inspection rounds are the main method through which employee safety information is conveyed within the organization.

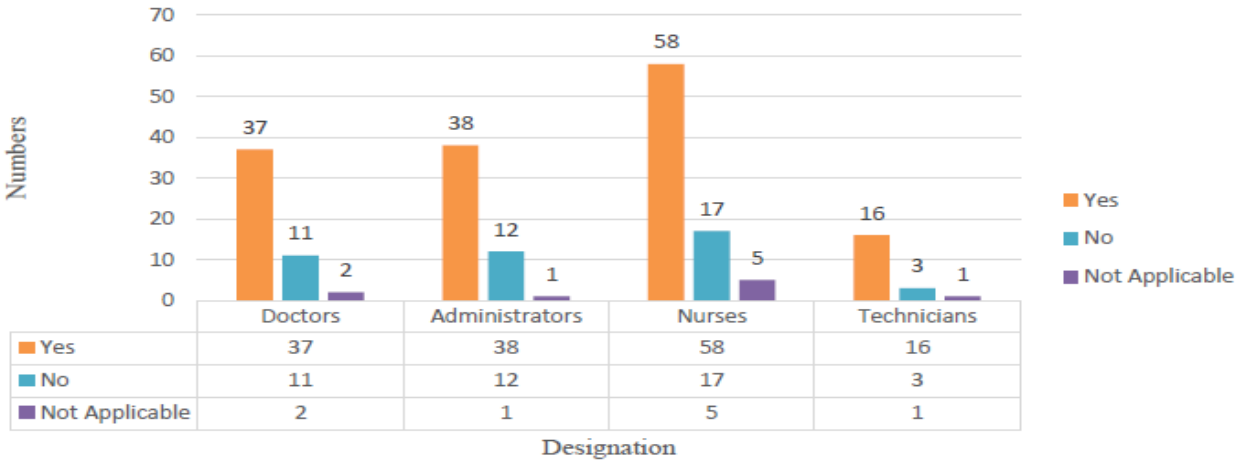


Fig 4 - Encouragement to inform the unresolved facility regulatory issues

INFERENCE:

The bar graph (figure 4) illustrates employee perceptions regarding the hospital's encouragement to report unresolved facility-related issues. A majority of 37 doctors, 38 administrators, 58 nurses, and 16 technicians stated that their concerns are acknowledged and addressed. However, 11 doctors, 12 administrators, 17 nurses, and 3 technicians indicated that they do not feel supported or encouraged in resolving these facility issues.

ISSN No. 2321-2705 | DOI: 10.51244/IJRSI |Volume XII Issue VIII August 2025

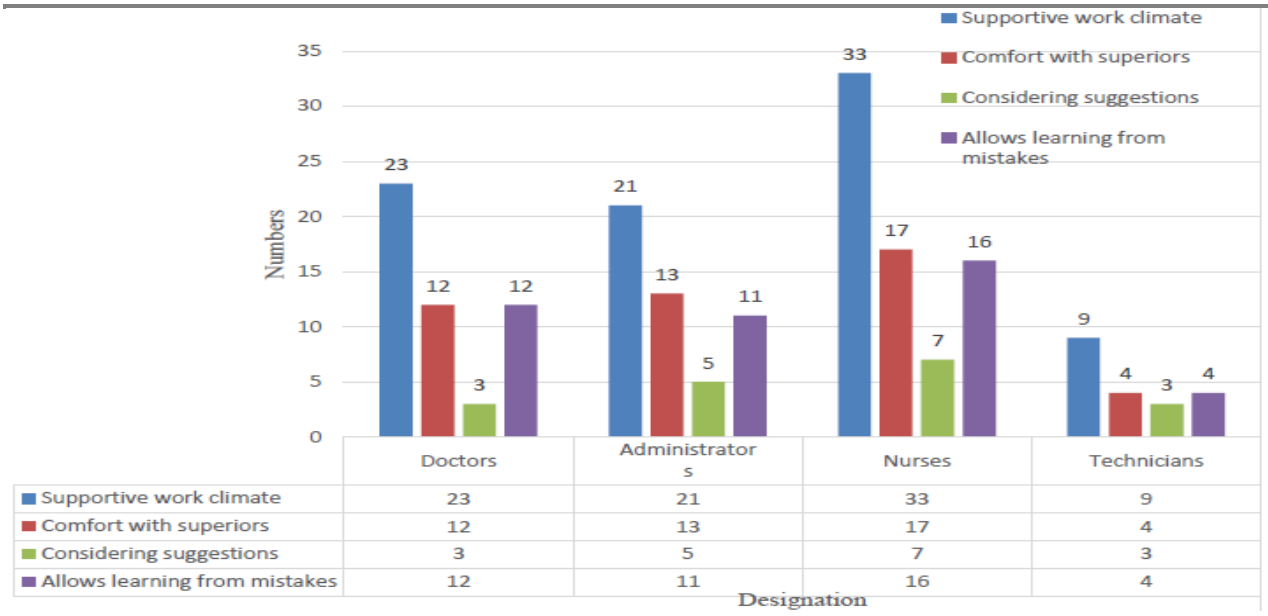


Fig 5 - Employee safety survey probe

Inference:

The above data from figure 5 portrays the findings from the employee safety survey conducted at the hospital. The results show that many employees feel satisfied with the supportive work environment, including 23 doctors, 21 administrators, 33 nurses, and 9 technicians. The organization promotes a culture of continuous learning by encouraging staff to learn from mistakes and stay vigilant in their roles. While some employees reported feeling comfortable with their superiors, others appreciated that their suggestions are acknowledged and valued by the management.

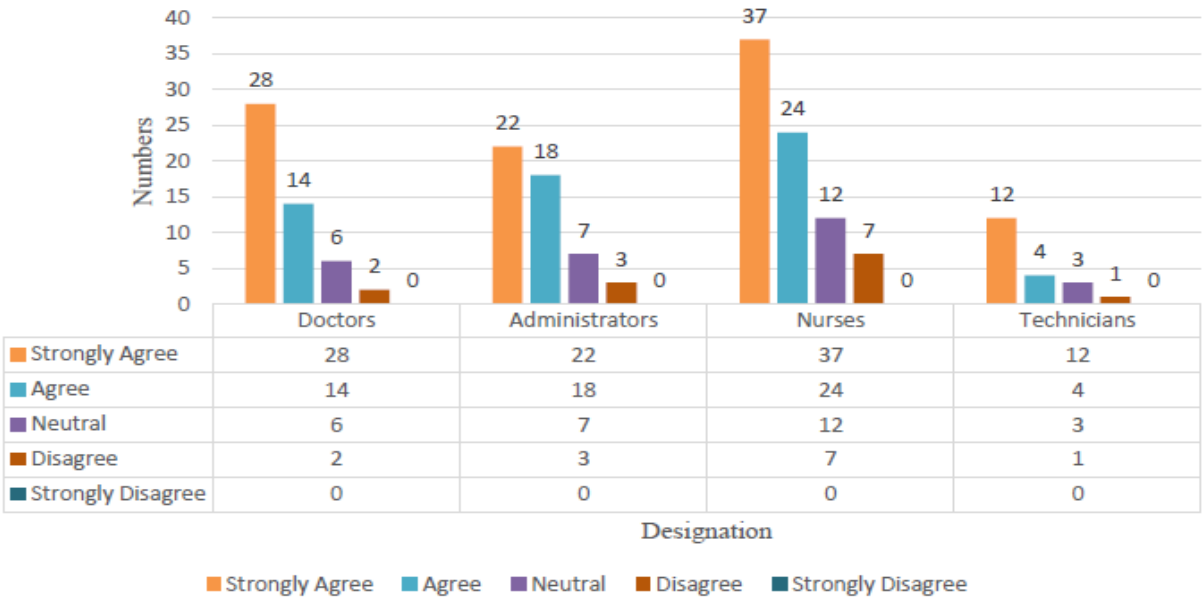
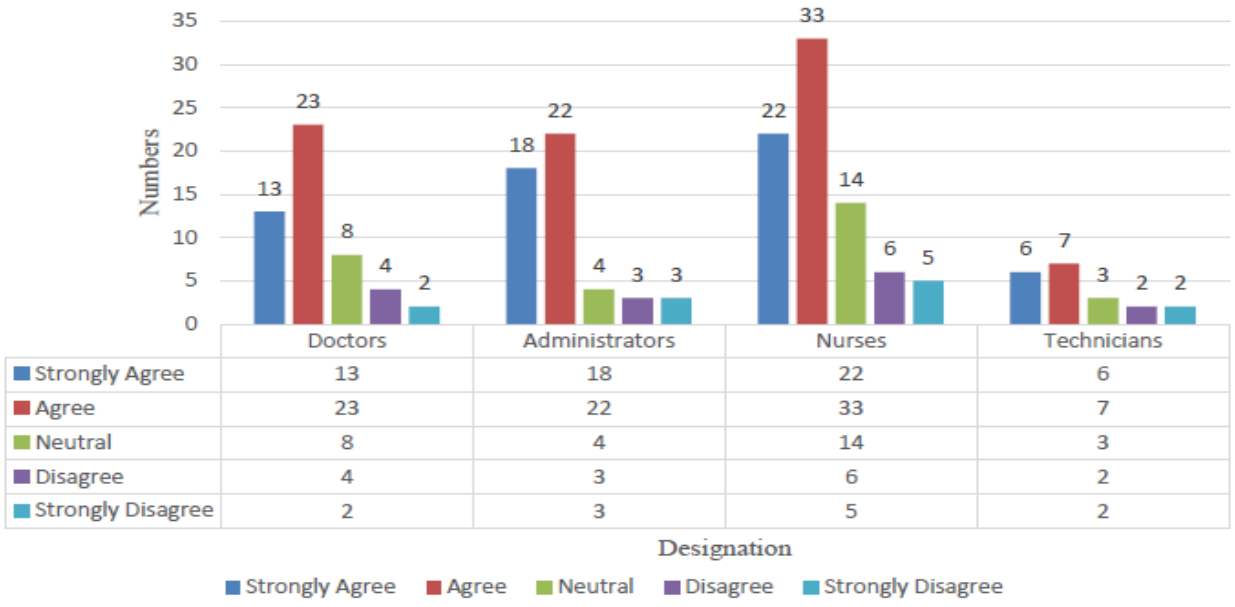


Fig 6 - Physical safety at workplace

Inference:

The bar graph (figure 6) reflects employee responses regarding physical safety in the workplace. A significant number of employees including 28 doctors, 22 administrators, 37 nurses, and 12 technicians strongly agreed that they feel physically safe within the hospital premises. Many others also expressed agreement. This suggests that the hospital maintains a secure and physically safe environment for its staff.

ISSN No. 2321-2705 | DOI: 10.51244/IJRSI |Volume XII Issue VIII August 2025

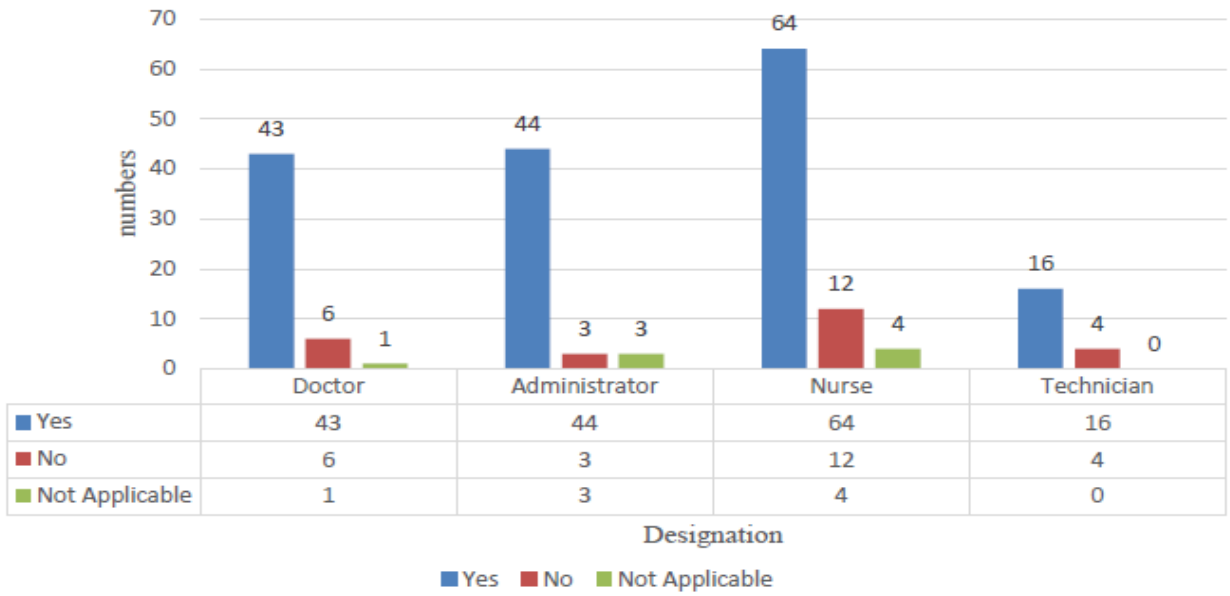


	Doctors	Administrators	Nurses	Technicians
Strongly Agree	13	18	22	6
Agree	23	22	33	7
Neutral	8	4	14	3
Disagree	4	3	6	2
Strongly Disagree	2	3	5	2

Fig 7 - Workload reasonability at the organization

Inference:

Figure 7 represents employees' perceptions of workload reasonability within the hospital. A majority of 23 doctors, 22 administrators, 33 nurses, and 7 technicians agreed that their workload is reasonable. Some employees strongly agreed with this assessment, while a few reported feeling overburdened. Overall, the data indicates that most staff members consider their workload to be manageable, though there are some concerns that may require attention.



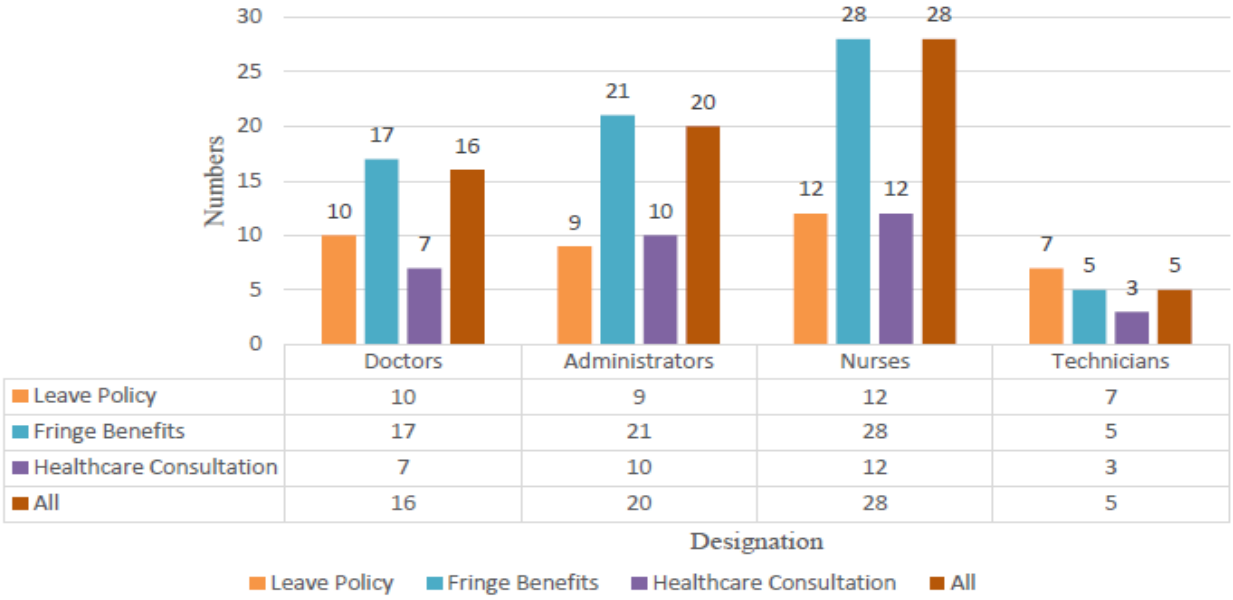
	Doctor	Administrator	Nurse	Technician
Yes	43	44	64	16
No	6	3	12	4
Not Applicable	1	3	4	0

Fig 8 - Job security at workplace

Inference:

The above bar graph (figure 8) depicts physical job security of the employees at the work place. Majority of the employees agreed towards their job security at the firm. A significant majority of 43 doctors, 44 administrators, 64 nurses, and 16 technicians indicated that they feel secure in their positions. This suggests a strong overall sense of stability and confidence in employment among the hospital staff.

ISSN No. 2321-2705 | DOI: 10.51244/IJRSI |Volume XII Issue VIII August 2025

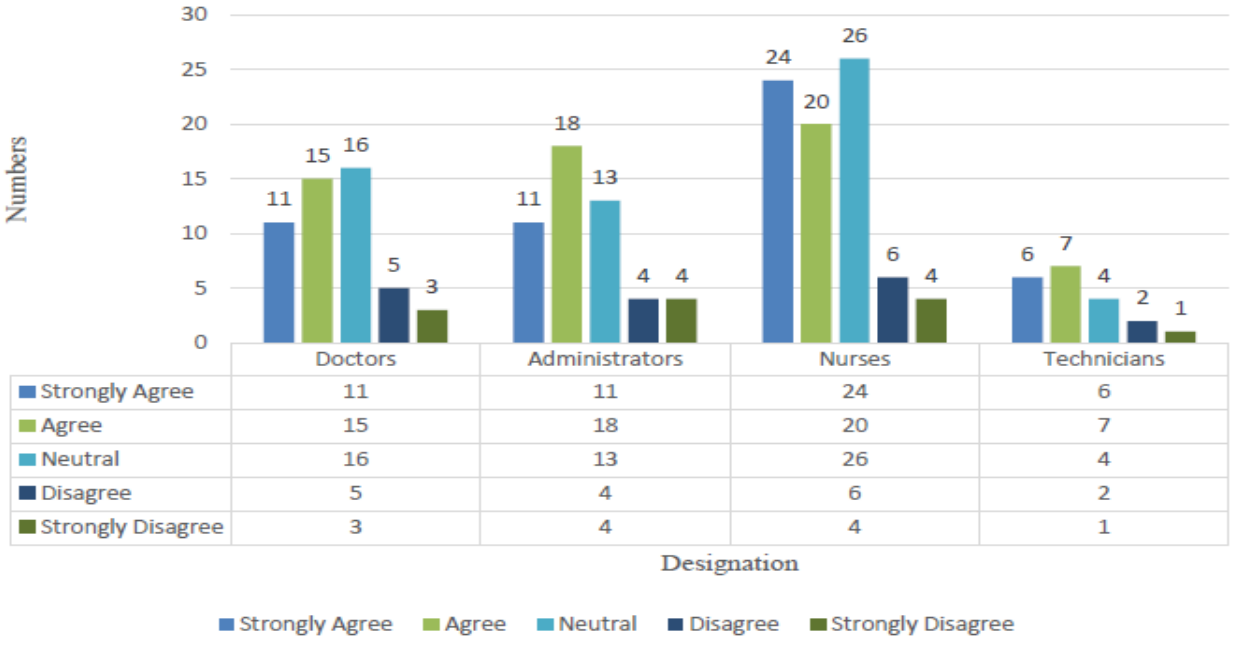


	Doctors	Administrators	Nurses	Technicians
Leave Policy	10	9	12	7
Fringe Benefits	17	21	28	5
Healthcare Consultation	7	10	12	3
All	16	20	28	5

Fig 9 - Satisfaction with organisational policies

Inference:

Figure 9 reflects employee perceptions of various organizational policies, such as leave entitlements, fringe benefits, and healthcare consultation services provided at the workplace. A majority of employees 16 doctors, 20 administrators, 28 nurses, and 5 technicians reported being satisfied with these policies. This indicates a positive overall response toward the hospital's organizational practices and employee support systems.



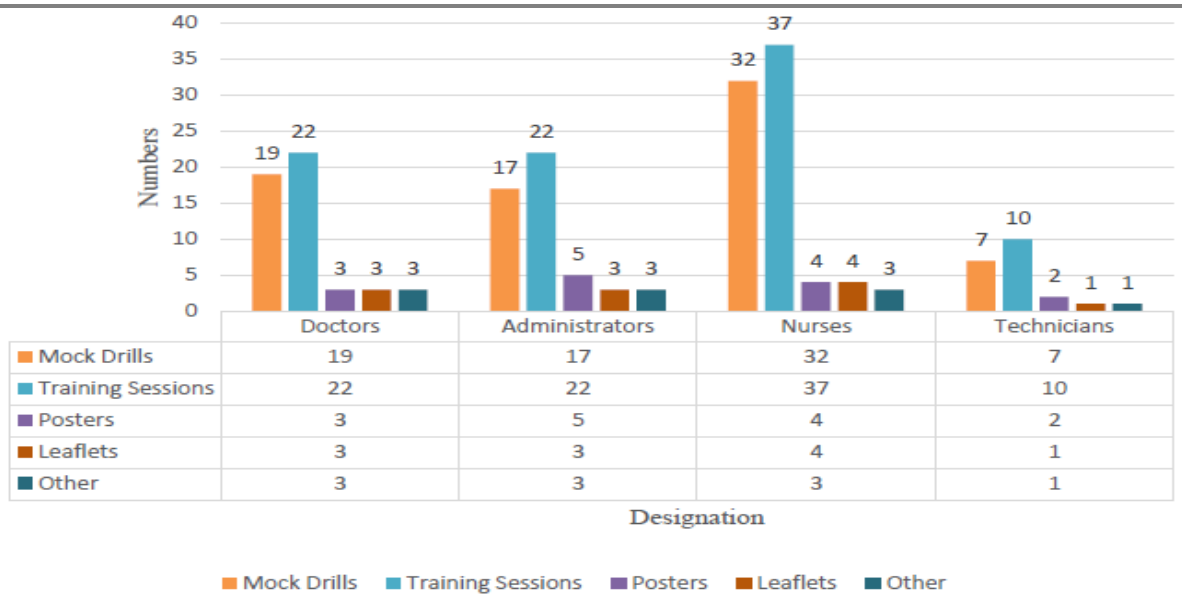
	Doctors	Administrators	Nurses	Technicians
Strongly Agree	11	11	24	6
Agree	15	18	20	7
Neutral	16	13	26	4
Disagree	5	4	6	2
Strongly Disagree	3	4	4	1

Fig 10 - Opportunities to learn and grow

Inference:

The graph (figure 10) highlights the professional development opportunities available to employees within the hospital. Among the staff, 15 doctors**,** 18 administrators**,** 20 nurses**,** and 7 technicians expressed agreement regarding the hospital's efforts to promote learning and growth. Additionally, a subset from these groups reported strong agreement, indicating even deeper support for the hospital's commitment to fostering organizational development and continuous learning.

ISSN No. 2321-2705 | DOI: 10.51244/IJRSI |Volume XII Issue VIII August 2025

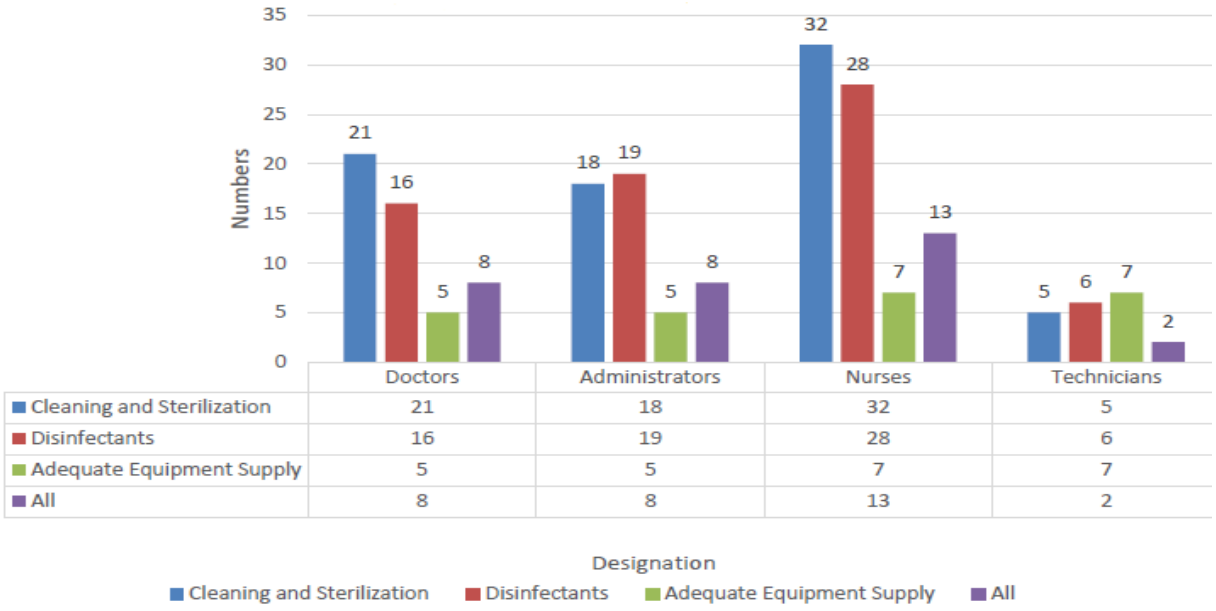


	Doctors	Administrators	Nurses	Technicians
Mock Drills	19	17	32	7
Training Sessions	22	22	37	10
Posters	3	5	4	2
Leaflets	3	3	4	1
Other	3	3	3	1

Fig 11 - Effective methods for employee awareness and safety

Inference:

Figure 11 presents the various methods used to promote employee awareness and safety within the hospital. The majority of employees identified training sessions as the most effective method, with 22 doctors, 22 administrators, 37 nurses, and 10 technicians selecting it. A smaller portion of staff chose mock drills, while only a few opted for posters, leaflets, and other informational materials. These results emphasize the value of hands-on training in enhancing safety awareness among hospital staff.



	Doctors	Administrators	Nurses	Technicians
Cleaning and Sterilization	21	18	32	5
Disinfectants	16	19	28	6
Adequate Equipment Supply	5	5	7	7
All	8	8	13	2

Fig 12 -Methods adopted to reduce risk of infection in the hospital

INFERENCE:

The graph (figure 12) illustrates the effective methods adopted by the hospital to reduce the risk of infection among employees. The main strategies include cleaning and sterilization, use of disinfectants, and ensuring an adequate supply of equipment. The majority of employees include 21 doctors, 18 administrators, 32 nurses, and 5 technicians who identified cleaning and sterilization as the most effective method. Others selected disinfectants, while some opted for adequate equipment supply or all of the listed methods. These results underscore the hospital's emphasis on hygiene and infection control to protect its staff.

ISSN No. 2321-2705 | DOI: 10.51244/IJRSI |Volume XII Issue VIII August 2025

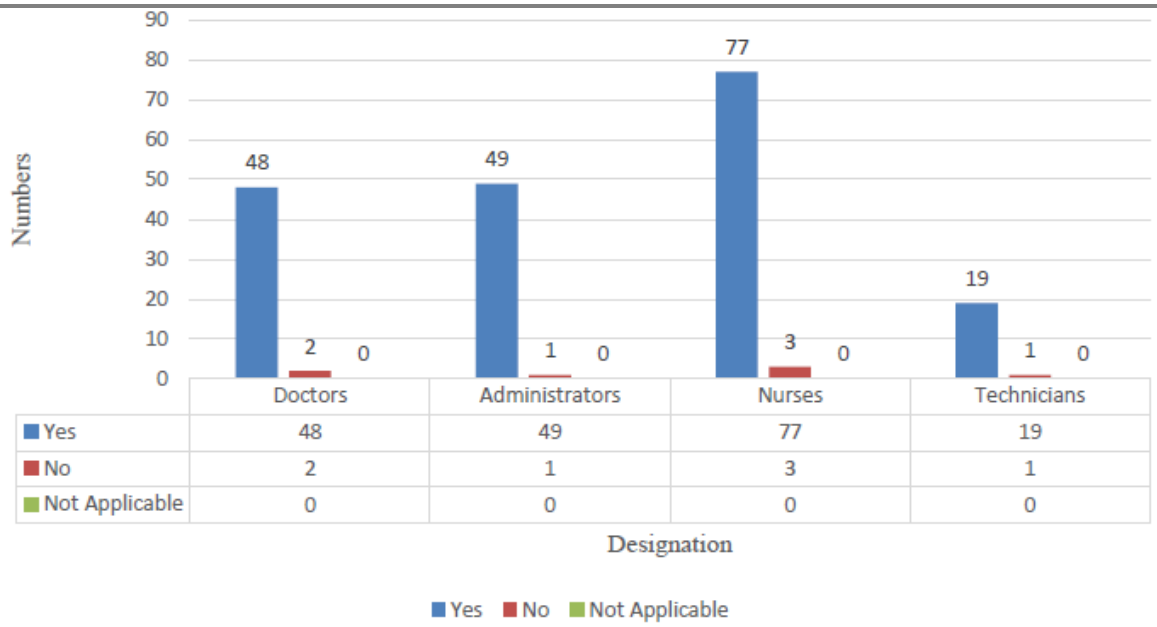


Fig 13 - Proper emergency exits in the hospital

Inference:

Figure 13 highlights employee feedback on the presence of proper emergency exits within the hospital. All employees unanimously agreed that the hospital has well established emergency fire exits in place, indicating strong adherence to safety protocols and a proactive approach to emergency preparedness.

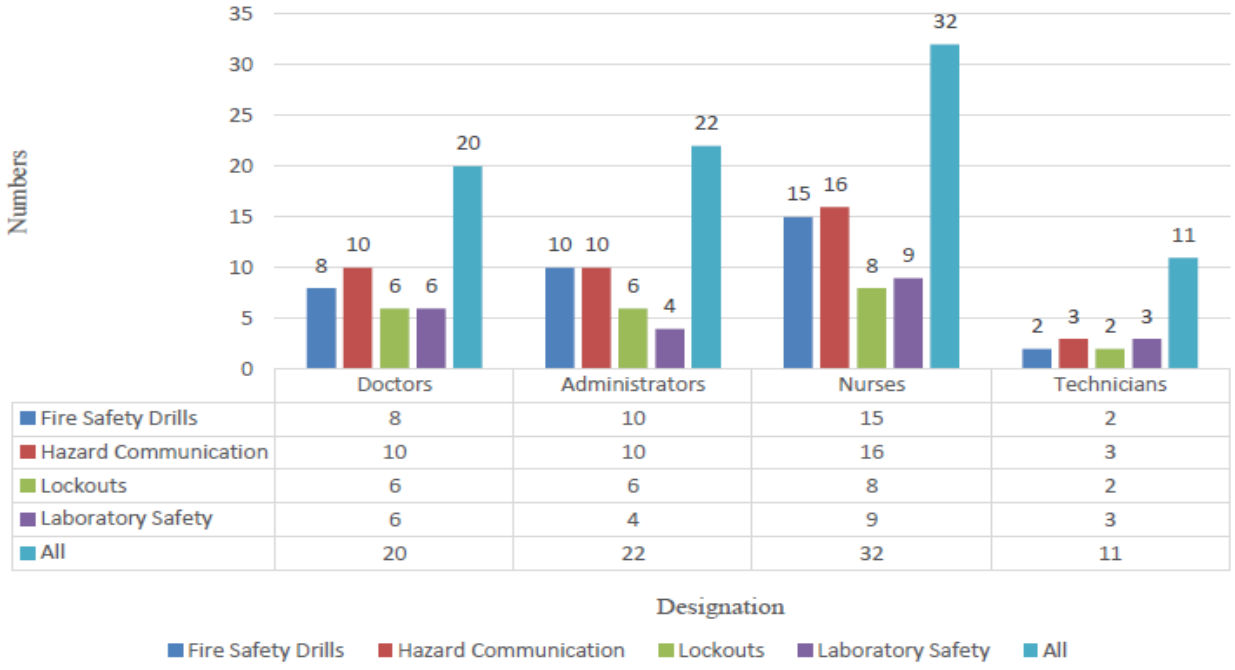


Fig 14 - Safety trainings in the hospital

Inference:

Figure 14 depicts the safety training programs attended by employees as part of the hospital's employee safety protocols. These trainings include fire safety drills, hazard communication, lockout procedures, and laboratory safety. A significant majority of employees reported attending all of these training programs, while a smaller portion participated in only one. This demonstrates the hospital's commitment to comprehensive safety training and preparedness for its staff.

ISSN No. 2321-2705 | DOI: 10.51244/IJRSI |Volume XII Issue VIII August 2025

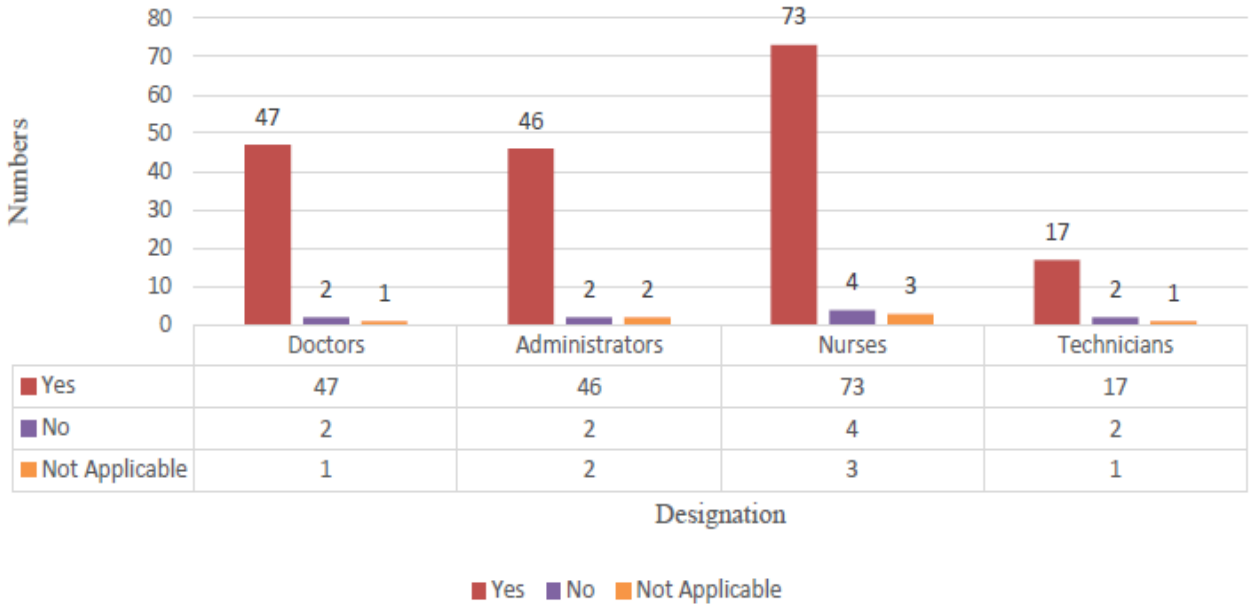


Fig 15 - Laboratory safety and proper equipments supply in radiology department

Inference:

Figure 15 illustrates employee perceptions of laboratory safety and the availability of appropriate equipment in the radiology department for those exposed to radiation. Nearly all employees confirmed that the radiology labs are well-equipped and maintain proper safety measures, reflecting the hospital's commitment to protecting staff working in high-risk areas.

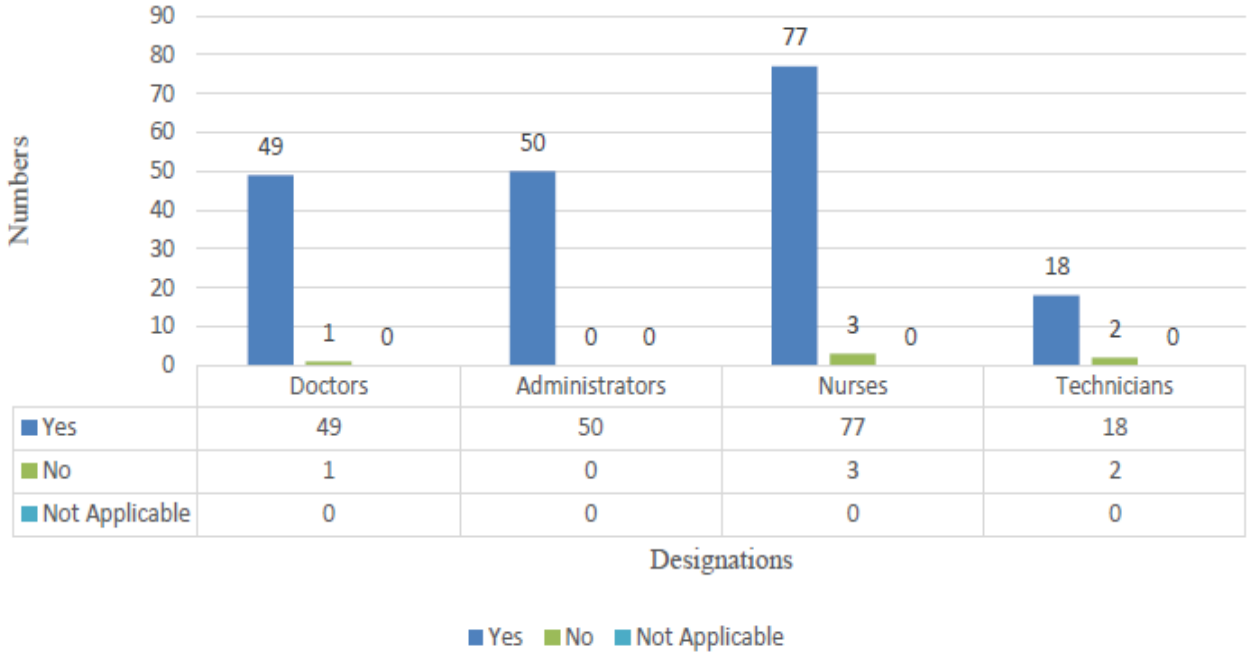


Fig 16 - Appropriate hazard warning signs in the laboratory

Inference:

The graph (figure 16) highlights employee feedback on the presence of hazard warning signs in the laboratory, with a focus on ensuring employee safety. All respondents unanimously agreed that appropriate warning signboards are properly displayed in the radiology department, reflecting the hospital's commitment to maintaining a safe and well-regulated work environment.

ISSN No. 2321-2705 | DOI: 10.51244/IJRSI |Volume XII Issue VIII August 2025

Hypothesis Testing

- A Chi-square test is conducted to examine the association between gender and the perceived responsibility of workload within the organization. The test is conducted at 0.05 level of significance.
- Null Hypothesis includes:

  H0: There is no association between gender and workload responsibility at the organization.
- Alternate hypothesis is:

  H1: There is association between gender and workload responsibility at the organization.
- Table 1 shows the observed frequency values and table 2 shows expected frequency values.

		Workload responsibility		
Gender		**Yes**	**No**	**Total**
	Male	71	29	100
	Female	84	16	100
	Total	155	45	200

Table 1 - Observed frequency values

	Workload responsibility	
	Yes	**No**
Male	77.5	22.5
Female	77.5	22.5

Table 2 – Expected frequency values

Microsoft Excel is used to find out the Chi-Square value. 0.183437 is the calculated value (P value). At 0.05 level of significance, as P value is greater than 0.05, H_0 is accepted. Hence it is concluded that there is no association between gender and workload responsibility at the organization.

The hospital prioritizes employee safety and satisfaction by conducting regular surveys in alignment with JCI norms, covering both clinical and administrative responsibilities. These surveys involve inspection rounds, safety committees, and hospital newsletters, and they incorporate employee feedback to resolve regulatory issues and improve workplace conditions. Most healthcare workers including doctors, nurses, technicians, and administrative staff, report feeling physically safe and secure at work. This is further supported by employee-friendly policies such as flexible leave, fringe benefits, and healthcare consultations, which contribute to a positive work climate. To enhance safety, the hospital has installed JCI vaults in key areas like reception desks, nursing stations, and laboratories.

Infection control is maintained through routine cleaning, sterilization, and the use of disinfectants to reduce hospital-acquired infections. The hospital also provides regular training programs to improve employee performance and raise awareness about safety protocols. These include fire safety drills, hazard communication, lockout procedures, and laboratory safety. Departments like Radiology are equipped with safety kits and manuals, and proper signage is displayed throughout the hospital to ensure smooth workflow.

ISSN No. 2321-2705 | DOI: 10.51244/IJRSI |Volume XII Issue VIII August 2025

Chi-square analyses indicate not a significant association between gender and the perception of workload responsibility.

CONCLUSION

The study highlights the critical role of employee safety in hospital policy-making, especially in a setting where individuals from diverse cultural backgrounds collaborate for a common purpose. It emphasizes the importance of addressing workplace safety concerns and the necessity of creating a secure environment for all staff members. The research reveals inadequacies in current employee satisfaction tracking and monitoring systems, pointing to the need for more effective approaches to manage these challenges and ensure smooth workflow. Key issues such as staff perceptions of care quality, skill development, and overall safety and satisfaction are identified as major concerns. To address these, several recommendations aligned with Joint Commission International (JCI) protocols have been proposed.

To improve employee safety and satisfaction, the hospital should consider implementing several important measures. Introducing a recommendation box would encourage staff to share suggestions and feedback, promoting a more inclusive and responsive workplace culture. Forming a counselling committee could help address employee concerns, provide emotional support, and motivate staff by resolving work-related issues. Additionally, the hospital must take strict action, including penalties or legal steps, against patients or attendees who misbehave with staff, ensuring a respectful and secure work environment.

It is also recommended that the hospital offer full salary and paid leave to employees affected by hospital-acquired infections, as a gesture of support and fairness. More frequent safety drills and hazmat communication sessions should be conducted to keep staff well-prepared for emergencies. Providing basic safety kits to all employees, including front desk and housekeeping staff, would ensure that everyone has the tools needed to stay protected. Furthermore, implementing flexible working hours based on employee needs and safety can greatly improve work-life balance and overall job satisfaction.

BIBLIOGRAPHY

1. Anni Vuohijoki, M.Huusko H. Hurri . The Effects of Quality Assurance System Implementation on Work Well-Being and Patient Safety: JCI Protocol Study. JCI Research Protocols, 23 November 2023.
2. Chehab, F. H., Salim, N. A., & Kathamuthu, R. (2020). Health Care Providers' Compliance to Joint Commission International Patient Safety Goals during the Pre and Post Accreditation Period (2015-2016) in Public Hospitals in the United Arab Emirates. RAS Medical Science, 1(1). https://doi.org/10.51520/2766-5240-6.
3. Hilda Maze, Sanja Zorič, Bojan Rosi, Branko Lobnikar . Interdependence of Nursing Staff Work Engagement, Quality of Workplace Relationships and Patient Safety. The Journal Of Quality And Safety Of Employees. 1 May 2023 .
4. Kobayashi K, Ando K, Nakashima H, Machino M, Kanbara S, Ito S, Inoue T, Yamaguchi H, Ishiguro N, Imagama S. Challenges for Joint Commission International accreditation: performance of orthopedic surgeons based on International Patient Safety Goals. Nagoya J Med Sci. 2021 Feb;83(1):87-92. doi: 10.18999/nagjms.83.1.87. PMID: 33727740; PMCID: PMC7938100.
5. Michael H. Goldberg, P. WrightS. Thirunavukkarasu Richard B. Schwarz. Implementation of Protocols to Mitigate Violence Within a Health Care Setting for Patient and Healthcare Worker Safety. Hospital Managerial Services, 10 April 2018 (P4.166).
6. Paula Andrea Ramirez Barbosa. Compliance and its Contributions to Safety at Work. IUS Novum.2023.Vol 17, No.3, DOI: 10.2478/in-2023-0021.
7. Roselle Marie D. AzucenaJoy C. Ashipaoloye. Total Quality Management, Safety and Satisfaction for Employees: Model for Healthcare Administration. International Journal For Multidisciplinary Functions 9 November 2023.
8. Siewert B, Hochman M, Eisenberg RL, Swedeen S, Brook OR. Acing the Joint Commission Regulatory Visit: Running an Effective and Compliant Safety Program. Radiographics. 2018 Oct;38(6):1744-1760. doi: 10.1148/rg.2018180134. PMID: 30303792.