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Centers for Disease Control and Prevention
395 E Street, SW
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Washington, DC 20201

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Dear Dr. Howard:

The Joint Commission appreciates the opportunity to comment on the Centers for Disease Control and Prevention (CDC) request for information, Interventions to Prevent Work-Related Stress and Support Health Worker Mental Health.

Founded in 1951, The Joint Commission seeks to continuously improve health care for the public in collaboration with other stakeholders, by evaluating health care organizations and inspiring them to excel in providing safe and effective care of the highest quality and value. An independent, not-for-profit organization, The Joint Commission accredits and/or certifies more than 22,000 health care organizations and programs in the United States. The Joint Commission evaluates health care organizations across the continuum of care, including most of the nation’s hospitals. In addition, Joint Commission programs encompass clinical laboratories, ambulatory care and office-based surgery facilities, behavioral health care, home care, hospice, nursing care centers, and long-term care organizations. Joint Commission accreditation and certification are recognized nationwide as symbols of quality that reflect an organization’s commitment to meeting state-of-the-art performance standards. Although accreditation is voluntary, a variety of federal and state government regulatory bodies, including CMS, recognize and rely upon The Joint Commission’s decisions and findings for Medicare or licensure purposes.

The Joint Commission offers the following in response to the questions from CDC:

1. Please tell us about your experience with the development of any preventive interventions currently in place in your workplace to help health workers avoid work-related stress and maintain or improve their mental health and wellbeing. Describe the intervention’s origins and basis, its target population, evaluation or outcome measures, challenges and successes, as well as any other information you think is noteworthy.

The Joint Commission supported the inclusion of the language in the American Rescue Plan to support funding for an education and awareness campaign encouraging healthy work conditions and use of mental health and substance use disorder services by health care professionals. The Joint Commission agrees that health care workers will face many demands at work, including long and irregular hours, exposure to human suffering and death, and increased risk of exposure to disease...
and harm. The COVID-19 pandemic has exacerbated these challenges and the stresses that health care workers face. Recent health care workers’ feedback submitted to The Joint Commission’s Office of Quality and Patient Safety underscored health care worker concerns and fears, including fear of the unknown, fear of getting sick, and fear of bringing the COVID-19 virus home.1 Staffing shortages have also posed a significant challenge for many health care organizations.

The Joint Commission appreciates NIOSH’s work to explore workplace policies that can protect workers from stress and adverse mental health outcomes and address these issues. In May 2020, The Joint Commission issued a Quick Safety on Promoting Psychosocial Well-Being of Health Care Staff During Crisis.2 The Quick Safety underscored the importance of health care organizations having systems in place that support institutional and individual resilience. It recommended safety actions for health care organization managers and leaders to consider to support health care staff, including regular communication, modeling behaviors that promote self-monitoring, encouraging sharing of concerns, demonstrating the value of staff, orienting staff to psychosocial resources, proactively monitoring and providing active outreach, encouraging peer support, sharing positive feedback, adapting staffing where possible, and ensuring the systemic plans and infrastructure needed to support resilience in post-crisis recovery.

4. Please describe any programs you are aware of that help employers to fund or otherwise develop interventions or services to support health worker mental health and well-being.

To better understand challenges faced by health care workers and to help health care organizations move forward, The Joint Commission is continually conducting research and listening sessions with accredited organizations. The Joint Commission plans to conduct a national survey in cooperation with the American Medical Association (AMA), to learn what Joint Commission-accredited hospitals and federally qualified health centers are doing to assess and address clinician wellbeing, what actions are being taken to ease the burden of burnout, and what resources are being used to help mitigate the impact of burnout on clinicians and the organizations. The results will help The Joint Commission and other identify ways in which it can further support facility-based programs to promote the mental health and wellbeing of health care personnel.

The Joint Commission also recognizes that the wellbeing of the clinician workforce has ramifications for patient safety. As part of a NIOSH-supported review of worker safety interventions, The Joint Commission is examining the effects of organizational culture on health care worker well-being and the related impact on patient safety. Health worker safety interventions will be identified and examined for their impact. The review will also identify research gaps to address opportunities to enhance the effectiveness or applicability of the intervention.


5. Please tell us about your experience with any workplace policies designed to protect workers from stress and adverse mental health outcomes and to address these issues. Describe the part(s) of your organization involved in work-associated stress prevention efforts.

The Joint Commission supports the removal of any barriers that inhibit clinicians and health care staff from accessing mental health services, including eliminating policies that reinforce stigma and fear about the professional consequences of seeking mental health treatment. The Joint Commission does not require organizations to ask about a clinician’s history of mental health conditions or treatment. Many clinicians fear seeking help from mental health services due to licensing or credentialing concerns. During the credentialing process, or in applying or renewing licenses, clinicians may be asked about their use of mental health services. The Joint Commission does not require such questions for credentialing and has urged health care organizations not to ask these questions, which may contribute to the stigma that prevents clinicians from seeking vital mental health care.³

The Joint Commission, the Occupational Safety and Health Administration, and many other health care organizations have studied workplace violence prevention strategies for many years. Research shows that the incidence of health care provider workplace violence events and related injuries has steadily increased over the last decade, with many events being underreported.⁴ Workplace violence directly impacts a provider’s physical well-being, in addition to impairing patient care and increasing the risk for psychological distress, increased costs, higher turnover, and employee dissatisfaction.

To guide hospitals and providers in developing effective prevention and management systems, The Joint Commission released New and Revised Workplace Violence Prevention Requirements, effective January 1, 2022.⁵ Requirements incorporated into the new standards include developing strong workplace violence prevention systems; defining workplace violence; establishing leadership oversight for the program; fine-tuning policies and procedures; creating easy and accessible reporting systems; analyzing, tracking, and trending data; crafting post-incident strategies; and implementing staff training and education to decrease workplace violence. These new and revised requirements provide a framework to guide hospitals and critical access hospitals in developing strong workplace violence preventions systems.

The Joint Commission commends NIOSH’s assimilation and development of best practices, resources, and interventions to support policy changes to improve the well-being of health care workers.
workers. The Joint Commission also supports the agency’s awareness campaign to help lower barriers for health care workers seeking care for mental health.

6. Please tell us about your workplace’s most effective methods of informing health workers about available interventions, services, and workplace practices and policies, including but not limited to: Notification channels, trusted messengers (e.g., upper management, front line supervisor, union representatives), and efforts to reach workers who are underserved by mental health/behavioral health resources.

In support of the recently released Workplace Violence Prevention standards, The Joint Commission has compiled an online compendium of workplace violence prevention resources. The compendium is intended to serve as a resource for health care organizations and their staff on measures to prevent workplace violence.

The Joint Commission is pleased to answer any questions you may have regarding our comments. If you have any questions, please do not hesitate to contact me or staff: Patrick Ross at 202-783-6655 or pross@jointcommission.org.

Sincerely,

Kathryn E. Spates, JD
Executive Director, Federal Relations

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