

SENATE HEALTH, HUMAN SERVICES AND SENIOR CITIZENS COMMITTEE

STATEMENT TO **SENATE, No. 3900**

with committee amendments

STATE OF NEW JERSEY

DATED: JUNE 17, 2019

The Senate Health, Human Services and Senior Citizens Committee reports favorably and with committee amendments Senate Bill No. 3900.

As amended by the committee, this bill requires the Department of Health (DOH) to require long-term care facilities to develop an outbreak response plan within 180 days after the effective date of the bill. Each plan is to be customized to the facility, based on national standards and developed in consultation with the facility's infection control committee, if any.

Each outbreak response plan developed under the bill will be required to include: (1) a protocol for isolating and cohorting infected and at-risk patients in the event of an outbreak of a contagious disease; (2) clear notification policies for residents, families, visitors, and staff in the event of an outbreak; (3) information on the availability of laboratory testing and various protocols for assessing whether facility visitors are ill, requiring ill staff to not present at the facility for work duties, and implementing evidence-based outbreak response measures; (4) policies to conduct routine monitoring to quickly identify signs of a potential outbreak; and (5) policies for reporting outbreaks to public health officials in accordance with applicable laws and regulations.

Outbreak response plans prepared by long-term care facilities that provide care to ventilator-dependent residents are to submit their plans to the DOH for review within 180 days after the effective date of the bill; the DOH is to verify that the plans are compliant with the requirements of the bill. Outbreak response plans for facilities providing care to ventilator-dependent residents are to additionally include policies to meet staffing, training, and facility demands during an outbreak to successfully implement the outbreak response plan, including retaining the services of an individual certified in infection control and a physician with who has completed an infectious disease fellowship. Facilities providing care to ventilator-dependent residents are required to review their outbreak response plans at least annually and submit an updated plan to the DOH for review within 30 days after completing any material change to the plan.

Long-term care facilities will be required to assign to the facility's infection control committee a physician who has completed an infectious disease fellowship and a designated infection control coordinator who meets certain education, training, and experience requirements, which individuals are required to attend at least half of the committee's meetings. Committees are to meet at least quarterly.

COMMITTEE AMENDMENTS:

The committee amended the bill to revise the requirements for long-term care facilities to develop outbreak response plans to provide that all facilities are to develop a plan, but only facilities that provide care to ventilator-dependent residents are required to submit the plan to the Department of Health (DOH) for review. The amendments clarify that only facilities that have established an infection control committee are required to develop a plan in consultation with that committee. The amendments continue to require the DOH to review submitted plans, but remove a requirement that the review be completed within 180 days after the plan is submitted.

The committee amendments revise the requirements for facilities that submit an outbreak response plan to the DOH to annually review the plan to additionally provide that the updated plan is to be submitted to the DOH within 30 days, and the DOH is to review the updated plan to ensure it is compliant with the requirements of the bill.

The committee amendments revise the requirement for facilities to employ or contract with both an individual certified by the Certification Board of Infection Control and Epidemiology and a physician who has completed an infectious disease fellowship, to provide that this requirement only applies to facilities that provide care to ventilator-dependent residents.

The committee amendments revise the requirement for facilities to develop policies to meet staffing, training, and facility demands during an infectious disease outbreak to successfully implement the outbreak response plan to provide that this requirement only applies to facilities that provide care to ventilator-dependent residents.

The committee amended the bill to remove certain provisions concerning the DOH issuing certificates of need under the bill.

The committee amended the bill to remove a provision that allowed the DOH to temporarily remove licensing requirements to allow long-term care facilities to utilize ancillary space to assist in cohorting residents in the event of an outbreak.

The committee amended the bill to add definitions of "cohorting," "endemic level," "isolating," "long-term care facility that provides care to ventilator-dependent residents," and "outbreak."

The committee amendments make certain technical revisions, including updating references to the Department of Health and certain other terminology and making various grammatical corrections.