

[Second Reprint]
ASSEMBLY, No. 1079

STATE OF NEW JERSEY
219th LEGISLATURE

PRE-FILED FOR INTRODUCTION IN THE 2020 SESSION

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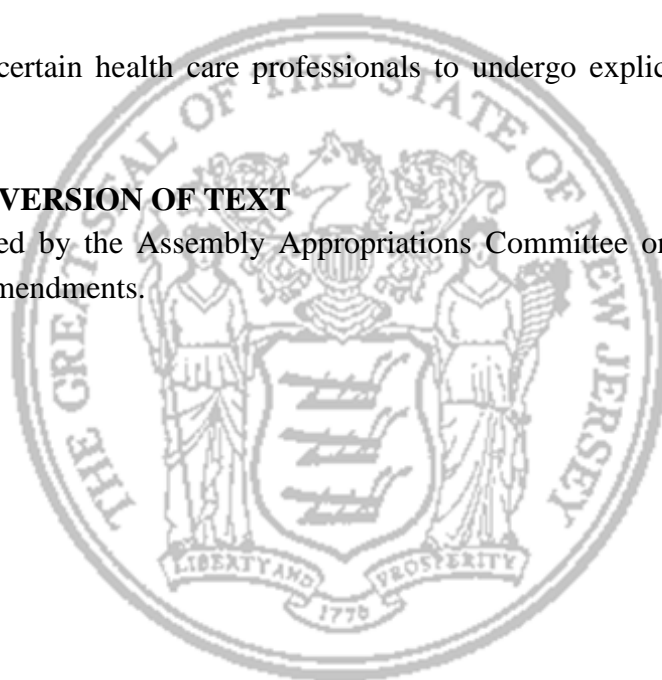
Assemblywoman Murphy, Assemblyman Holley, Assemblywoman Timberlake, Assemblymen Danielsen, Armato, Assemblywomen McKnight, Jasey, Tucker, Vainieri Huttle, Mosquera, Swain, Assemblymen Zwicker, Johnson, Assemblywomen Lampitt and Quijano

SYNOPSIS

Requires certain health care professionals to undergo explicit and implicit bias training.

CURRENT VERSION OF TEXT

As reported by the Assembly Appropriations Committee on February 24, 2021, with amendments.



(Sponsorship Updated As Of: 3/25/2021)

1 AN ACT concerning ²**[implicit]**² bias training and supplementing
2 Title 26 ²and Title 45² of the Revised Statutes.
3
4 **BE IT ENACTED** by the Senate and General Assembly of the State
5 of New Jersey:
6
7 ²**[1.** a. Every hospital that provides inpatient maternity services
8 and every birthing center licensed in the State pursuant to P.L.1971,
9 c.136 (C.26:2H-1 et seq.) shall implement an evidence-based implicit
10 bias training program for all health professionals who ¹regularly¹
11 provide perinatal treatment and care to pregnant women at the hospital
12 or birthing center. ¹A hospital that implements an implicit bias
13 training program pursuant to this section shall ensure that the program
14 is structured in a manner that permits physicians to be eligible to
15 receive continuing education credits for participation in the program.¹
16 b. The training program shall include, but not be limited to:
17 (1) identifying previous and current unconscious biases and
18 misinformation when providing perinatal treatment and care to
19 pregnant women;
20 (2) identifying personal, interpersonal, institutional, and cultural
21 barriers to inclusion;
22 (3) information on the effects of historical and contemporary
23 exclusion and oppression of minority communities;
24 (4) information about cultural identity across racial and ethnic
25 groups;
26 (5) information about communicating more effectively across
27 racial, ethnic, religious, and gender identities;
28 (6) information about reproductive justice;
29 (7) a discussion on power dynamics and organizational decision-
30 making and their effects on implicit bias;
31 (8) a discussion on health inequities and racial and ethnic
32 disparities within the field of perinatal care, and how implicit bias may
33 contribute to pregnancy-related deaths and maternal and infant health
34 outcomes; and
35 (9) corrective measures to decrease implicit bias at the
36 interpersonal and institutional levels.
37 c. A health care professional who ¹regularly¹ provides perinatal
38 treatment and care to pregnant women at a hospital that provides
39 inpatient maternity services or a birthing center licensed in the State
40 pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.) shall:
41 (1) complete the training program on implicit bias at such times
42 and intervals as the hospital or birthing center shall require;

EXPLANATION – Matter enclosed in bold-faced brackets **[thus]** in the above bill is not enacted and is intended to be omitted in the law.

Matter underlined thus is new matter.

Matter enclosed in superscript numerals has been adopted as follows:

¹Assembly AHE committee amendments adopted March 5, 2020.

²Assembly AAP committee amendments adopted February 24, 2021.

(2) complete a refresher course under the training program, designed to provide the health care professional with updated information about racial, ethnic, and cultural identity, and best practices in decreasing interpersonal and institutional implicit bias, every two years or on a more frequent basis, if deemed necessary by the hospital or birthing center; and

(3) receive a certification from the hospital or birthing center upon successful completion of the training program.

d. As used in this section:

“Implicit bias” means a bias in judgment or behavior that results from subtle cognitive processes, including implicit prejudice and implicit stereotypes, that often operate at a level below conscious awareness and without intentional control.

“Implicit stereotypes” means the unconscious attributions of particular qualities to a member of a certain social group, influenced by experience, and based on learned associations between various qualities and social categories, including race and gender.】²

²1. a. Every hospital that provides inpatient maternity services and every birthing center licensed in the State pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.) shall implement an evidence-based explicit and implicit bias training program for:

(1) all health professionals who provide perinatal treatment and care to pregnant persons at the hospital or birthing center regardless of the compensation agreement, contractual status, or privilege status that may exist between the health professional and the hospital or birthing center; and

(2) all supportive services staff members, as defined by the Department of Health, who interact with pregnant persons at the hospital or birthing center.

A hospital or birthing center that implements an explicit and implicit bias training program pursuant to this section shall ensure that the program is structured in a manner that permits health care professionals to be eligible to receive continuing education credits for participation in the program.

b. The training program shall include, but not be limited to:

(1) identifying previous and current unconscious biases and misinformation when providing perinatal treatment and care to, or interacting with, pregnant persons;

(2) identifying environmental, personal, interpersonal, institutional, and cultural barriers to inclusion;

(3) information on the effects of historical and contemporary exclusion and oppression of minority communities;

(4) information about cultural identity across racial, ethnic, and other marginalized groups;

(5) information about communicating more effectively across racial, ethnic, religious, and gender identities;

1 (6) information about reproductive justice;

2 (7) a discussion on power dynamics and organizational
3 decision-making and their effects on explicit and implicit bias;

4 (8) a discussion on inequities and racial, ethnic and other
5 demographic disparities within the field of perinatal care, and how
6 explicit and implicit bias may contribute to pregnancy-related
7 deaths and maternal and infant health outcomes;

8 (9) corrective measures to decrease explicit and implicit bias at
9 the interpersonal and institutional levels; and

10 (10) review of the annual report of the New Jersey Maternal
11 Mortality Review Committee.

12 The Department of Health shall identify an explicit and implicit
13 bias training tool to be utilized by the explicit and implicit bias
14 training program implemented by a hospital or birthing center
15 pursuant to this section. The use of the department's training tool
16 by a hospital or birthing center shall not preclude the hospital or
17 birthing center from utilizing additional or customized training tools
18 in addition to the department's training tool.

19 c. A health care professional who provides perinatal treatment
20 and care to pregnant persons at a hospital that provides inpatient
21 maternity services or a birthing center licensed in the State pursuant
22 to P.L.1971, c.136 (C.26:2H-1 et seq.) and all supportive staff
23 members who interact with pregnant persons at the hospital or
24 birthing center shall:

25 (1) complete the training program on explicit and implicit bias
26 at such times and intervals as the hospital or birthing center shall
27 require;

28 (2) complete a refresher course under the training program,
29 designed to provide the health care professional or supportive staff
30 member with updated information about racial, ethnic, and cultural
31 identity, and best practices in decreasing interpersonal and
32 institutional explicit and implicit bias, every two years or on a more
33 frequent basis, if deemed necessary by the hospital or birthing
34 center; and

35 (3) receive a certification of completion from the hospital or
36 birthing center upon successful completion of the training program.

37 d. A health care professional who completes a continuing
38 education course on explicit and implicit bias pursuant to section 2,
39 3, 4, 5, or 7 of P.L. , c. (C. , C. , C.), or C.)
40 (pending before the Legislature as this bill) shall be deemed to have
41 satisfied the explicit and implicit bias training requirement set forth
42 in subsection c. of this section for the licensure or certification
43 period in which the continuing education course was completed.

44 e. In the event that a hospital or birthing center fails to
45 implement an explicit and implicit bias training program pursuant to
46 this section, the Department of Health shall invoke penalties or take
47 administrative action against the hospital or birthing center. Any

1 penalties imposed or administrative actions taken by the department
2 pursuant to this subsection may be imposed in a summary
3 proceeding.

4 f. As used in this section:

5 “Explicit bias” means attitudes and beliefs about a person or
6 group on a conscious level.

7 “Health care professional” means a person licensed or certified
8 to practice a health care profession pursuant to Title 45 of the
9 Revised Statutes.

10 “Implicit bias” means a bias in judgment or behavior that results
11 from subtle cognitive processes, including implicit prejudice and
12 implicit stereotypes, that often operate at a level below conscious
13 awareness and without intentional control.

14 “Implicit stereotypes” means the unconscious attributions of
15 particular qualities to a member of a certain social group,
16 influenced by experience, and based on learned associations
17 between various qualities and social categories, including race and
18 gender.

19 “Perinatal care” means the provision of care during pregnancy,
20 labor, delivery, postpartum and neonatal periods.²

21
22 ²2. The State Board of Medical Examiners shall require that the
23 number of credits of continuing medical education required of each
24 person licensed as a physician who provides perinatal treatment and
25 care to pregnant persons, as a condition of biennial registration
26 pursuant to section 1 of P.L.1971, c.236 (C.45:9-6.1), include one
27 credit of educational programs or topics concerning explicit and
28 implicit bias, which educational programs and topics shall meet the
29 requirements for a training program set forth in subsection b. of
30 section 1 of P.L. , c. (C.) (pending before the Legislature
31 as this bill). The continuing medical education requirement in this
32 subsection shall be subject to the provisions of section 10 of
33 P.L.2001, c.307 (C.45:9-7.1).²

34
35 ²3. The State Board of Medical Examiners shall require that the
36 number of credits of continuing medical education required of each
37 person licensed as a physician assistant who provides perinatal
38 treatment and care to pregnant persons, as a condition of biennial
39 renewal pursuant to section 4 of P.L.1991, c.378 (C.45:9-27.13),
40 include one credit of educational programs or topics concerning
41 explicit and implicit bias, which educational programs and topics
42 shall meet the requirements for a training program set forth in
43 subsection b. of section 1 of P.L. , c. (C.) (pending before
44 the Legislature as this bill). The continuing medical education
45 requirement in this subsection shall be subject to the provisions of
46 section 16 of P.L.1991, c.378 (C.45:9-27.25).²

1 ^{24.} As a condition of being appointed as a member of the State
2 Board of Medical Examiners, or the member's continued
3 appointment to the board, a board member shall complete an
4 evidence-based explicit and implicit bias training program approved
5 by the Division of Consumer Affairs in the Department of Law and
6 Public Safety that is equivalent to the training program provided for
7 in subsection b. of section 1 of P.L. , c. (C.) (pending
8 before the Legislature as this bill). The board member shall
9 complete, and acknowledge the completion of, the training program
10 at a frequency determined by the division.²

11
12 ^{25.} The New Jersey Board of Nursing shall require that the
13 number of credits of continuing education required of each person
14 licensed as a professional nurse or a practical nurse who provides
15 perinatal treatment and care to pregnant persons, as a condition of
16 biennial license renewal, include one credit of educational programs
17 or topics concerning explicit and implicit bias, which educational
18 programs and topics shall meet the requirements for a training
19 program set forth in subsection b. of section 1 of
20 P.L. , c. (C.) (pending before the Legislature as this bill).²

21
22 ^{26.} As a condition of being appointed as a member of the New
23 Jersey Board of Nursing, or the member's continued appointment to
24 the board, a board member shall complete an evidence-based
25 explicit and implicit bias training program approved by the Division
26 of Consumer Affairs in the Department of Law and Public Safety
27 that is equivalent to the training program provided for in subsection
28 b. of section 1 of P.L. , c. (C.) (pending before the
29 Legislature as this bill). The board member shall complete, and
30 acknowledge the completion of, the training program at a frequency
31 determined by the division.²

32
33 ^{27.} A certified nurse midwife, certified professional midwife, or
34 certified midwife who was licensed prior to the effective date of
35 this act shall, as a condition of license renewal, complete at least
36 one credit of educational programs or topics concerning explicit and
37 implicit bias, which educational programs and topics shall meet the
38 requirements for a training program set forth in subsection b. of
39 section 1 of P.L. , c. (C.) (pending before the Legislature as this
40 bill).²

41
42 ²[2.] ^{8.}² The Department of Health ²and the Director of the
43 Division of Consumer Affairs in the Department of Law and Public
44 Safety² shall adopt rules and regulations, pursuant to the provisions
45 of the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-
46 1 et seq.), to effectuate the purposes of this act.

1 ²**[3.]** 9.² This act shall take effect on the first day of the sixth
2 month next following the date of enactment.