

[First Reprint]

**SENATE, No. 703**

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**STATE OF NEW JERSEY**  
**219th LEGISLATURE**

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PRE-FILED FOR INTRODUCTION IN THE 2020 SESSION

**Sponsored by:**

**Senator M. TERESA RUIZ**

**District 29 (Essex)**

**Senator SANDRA B. CUNNINGHAM**

**District 31 (Hudson)**

**Co-Sponsored by:**

**Senators Scutari and Singleton**

**SYNOPSIS**

Requires certain health care professionals to undergo implicit bias training.

**CURRENT VERSION OF TEXT**

As reported by the Senate Health, Human Services and Senior Citizens Committee on July 22, 2020, with amendments.



**(Sponsorship Updated As Of: 7/30/2020)**

1 AN ACT concerning implicit bias training and supplementing Title  
2 26 <sup>1</sup>and Title 45<sup>1</sup> of the Revised Statutes.

3

4 **BE IT ENACTED** by the Senate and General Assembly of the State  
5 of New Jersey:

6

7 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  
10 implicit bias training program for <sup>1</sup>;

11 (1)<sup>1</sup> all health professionals who provide perinatal treatment and  
12 care to pregnant women at the hospital or birthing center <sup>1</sup>; and

13 (2) all administrative and clerical staff members who interact  
14 with pregnant women at the hospital or birthing center.

15 A hospital or birthing center that implements an implicit bias  
16 training program pursuant to this section shall ensure that the  
17 program is structured in a manner that permits health care  
18 professionals to be eligible to receive continuing education credits  
19 for participation in the program<sup>1</sup>.

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

21 (1) identifying previous and current unconscious biases and  
22 misinformation when providing perinatal treatment and care to <sup>1</sup>, or  
23 interacting with,<sup>1</sup> pregnant women;

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

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

28 (4) information about cultural identity across racial and ethnic  
29 groups;

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

32 (6) information about reproductive justice;

33 (7) a discussion on power dynamics and organizational  
34 decision-making and their effects on implicit bias;

35 (8) a discussion on health inequities and racial and ethnic  
36 disparities within the field of perinatal care, and how implicit bias  
37 may contribute to pregnancy-related deaths and maternal and infant  
38 health outcomes; and

39 (9) corrective measures to decrease implicit bias at the  
40 interpersonal and institutional levels.

41 c. A health care professional who provides perinatal treatment  
42 and care to pregnant women at a hospital that provides inpatient  
43 maternity services or a birthing center licensed in the State pursuant  
44 to P.L.1971, c.136 (C.26:2H-1 et seq.) <sup>1</sup>and all administrative and

**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:**

**<sup>1</sup>Senate SHH committee amendments adopted July 22, 2020.**

1 clerical staff members who interact with pregnant women at the  
2 hospital or birthing center<sup>1</sup> shall:

3 (1) complete the training program on implicit bias at such times  
4 and intervals as the hospital or birthing center shall require;

5 (2) complete a refresher course under the training program,  
6 designed to provide the health care professional <sup>1</sup>or administrative  
7 or clerical staff member<sup>1</sup> with updated information about racial,  
8 ethnic, and cultural identity, and best practices in decreasing  
9 interpersonal and institutional implicit bias, every two years or on a  
10 more frequent basis, if deemed necessary by the hospital or birthing  
11 center; and

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

14 d. <sup>1</sup>A health care professional who completes a continuing  
15 education course on implicit bias pursuant to section 2, 3, or 4 of  
16 P.L. , c. (C. , C. , or C. ) (pending before the  
17 Legislature as this bill) shall be deemed to have satisfied the  
18 implicit bias training requirement set forth in subsection c. of this  
19 section for the licensure or certification period in which the  
20 continuing education course was completed.

21 e.<sup>1</sup> As used in this section:

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

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

31

32 <sup>1</sup>2. The State Board of Medical Examiners shall require that the  
33 number of credits of continuing medical education required of each  
34 person licensed as a physician who provides prenatal or perinatal  
35 treatment and care to pregnant women, as a condition of biennial  
36 registration pursuant to section 1 of P.L.1971, c.236 (C.45:9-6.1),  
37 include one credit of educational programs or topics concerning  
38 implicit bias, which educational programs and topics shall meet the  
39 requirements for a training program set forth in subsection b. of  
40 section 1 of P.L. , c. (C. ) (pending before the Legislature  
41 as this bill). The continuing medical education requirement in this  
42 subsection shall be subject to the provisions of section 10 of  
43 P.L.2001, c.307 (C.45:9-7.1), including, but not limited to, the  
44 authority of the board to waive the provisions of this section for a  
45 specific individual if the board deems it is appropriate to do so.<sup>1</sup>

1       <sup>1</sup>3. The State Board of Medical Examiners shall require that the  
2 number of credits of continuing medical education required of each  
3 person licensed as a physician assistant who provides prenatal or  
4 perinatal treatment and care to pregnant women, as a condition of  
5 biennial renewal pursuant to section 4 of P.L.1991, c.378 (C.45:9-  
6 27.13), include one credit of educational programs or topics  
7 concerning implicit bias, which educational programs and topics  
8 shall meet the requirements for a training program set forth in  
9 subsection b. of section 1 of P.L. , c. (C. ) (pending before  
10 the Legislature as this bill). The continuing medical education  
11 requirement in this subsection shall be subject to the provisions of  
12 section 16 of P.L.1991, c.378 (C.45:9-27.25), including, but not  
13 limited to, the authority of the board to waive the provisions of this  
14 section for a specific individual if the board deems it is appropriate  
15 to do so.<sup>1</sup>

16  
17       <sup>1</sup>4. The New Jersey Board of Nursing shall require that the  
18 number of credits of continuing education required of each person  
19 licensed as a professional nurse or a practical nurse who provides  
20 prenatal or perinatal treatment and care to pregnant women, as a  
21 condition of biennial license renewal, include one credit of  
22 educational programs or topics concerning implicit bias, which  
23 educational programs and topics shall meet the requirements for a  
24 training program set forth in subsection b. of section 1 of P.L. ,  
25 c. (C. ) (pending before the Legislature as this bill). The  
26 board may, in its discretion, waive the continuing education  
27 requirement set forth in this section on an individual basis for  
28 reasons of hardship, such as illness or disability, retirement of the  
29 license, or other good cause. A waiver shall apply only to the  
30 current biennial renewal period at the time of board issuance.<sup>1</sup>

31  
32       <sup>1</sup>[2.] <sup>1</sup>5. The Department of Health <sup>1</sup>and the Director of the  
33 Division of Consumer Affairs in the Department of Law and Public  
34 Safety<sup>1</sup> shall adopt rules and regulations, pursuant to the provisions  
35 of the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-  
36 1 et seq.), to effectuate the purposes of this act.

37  
38       <sup>1</sup>[3.] <sup>1</sup>6. This act shall take effect on the first day of the sixth  
39 month next following the date of enactment.