

[First Reprint]

ASSEMBLY, No. 4430

STATE OF NEW JERSEY

219th LEGISLATURE

INTRODUCED JULY 20, 2020

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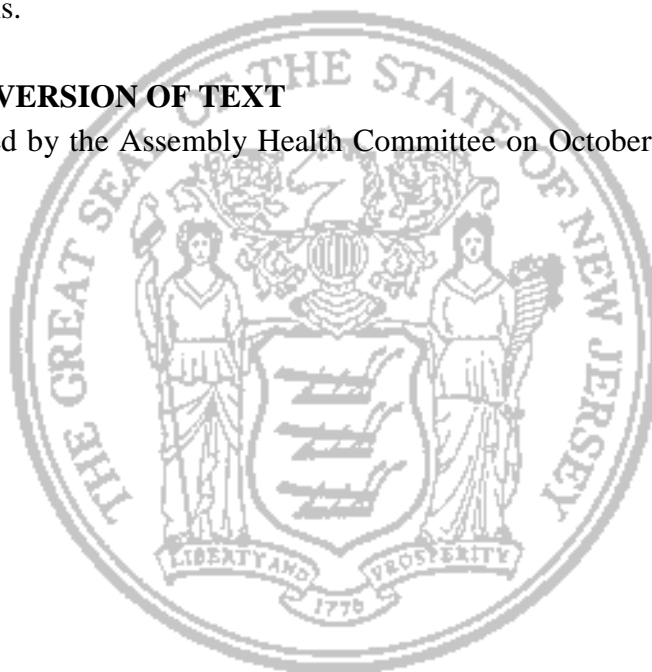
**Assemblyman Benson, Assemblywoman Downey, Assemblymen Caputo,
Giblin and Assemblywoman Speight**

SYNOPSIS

Revises requirements for long-term care facilities to establish outbreak response plans.

CURRENT VERSION OF TEXT

As reported by the Assembly Health Committee on October 22, 2020, with amendments.



(Sponsorship Updated As Of: 10/19/2020)

1 AN ACT concerning long-term care facilities and amending
2 P.L.2019, c.243.

3

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

6

7 1. Section 1 of P.L.2019, c.243 (C.26:2H-12.87) is amended to
8 read as follows:

9 1. a. As used in this section:

10 "Cohorting" means the practice of grouping patients who are or are
11 not colonized or infected with the same organism to confine their care
12 to one area and prevent contact with other patients.

13 "Department" means the Department of Health.

14 "Endemic level" means the usual level of given disease in a
15 geographic area.

16 "Isolating" means the process of separating sick, contagious
17 persons from those who are not sick.

18 "Long-term care facility" means a nursing home, assisted living
19 residence, comprehensive personal care home, residential health care
20 facility, or dementia care home licensed pursuant to P.L.1971, c.136
21 (C.26:2H-1 et seq.).

22 **["Long-term care facility that provides care to ventilator-**
23 **dependent residents"** means a long-term care facility that has been
24 licensed to provide beds for ventilator care.**】**

25 "Outbreak" means any unusual occurrence of disease or any
26 disease above background or endemic levels.

27 b. Notwithstanding any provision of law to the contrary, as a
28 condition of licensure, the department shall require long-term care
29 facilities to develop an outbreak response plan within 180 days after
30 the effective date of this act, which plan shall be customized to the
31 facility, based upon national standards and developed in consultation
32 with the facility's infection ¹prevention and¹ control committee, if the
33 facility has established an infection ¹prevention and¹ control
34 **【committee2】** committee. At a minimum, each facility's plan shall
35 include, but shall not be limited to:

36 (1) a protocol for isolating and cohorting infected and at-risk
37 patients in the event of an outbreak of a contagious disease until the
38 cessation of the outbreak;

39 (2) clear policies for the notification of residents, residents'
40 families, visitors, and staff in the event of an outbreak of a contagious
41 disease at a facility;

42 (3) information on the availability of laboratory testing, protocols
43 for assessing whether facility visitors are ill, protocols to require ill
44 staff to not present at the facility for work duties, and processes for
45 implementing evidence-based outbreak response measures;

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 October 22, 2020.

1 (4) policies to conduct routine monitoring of residents and staff to
2 quickly identify signs of a communicable disease that could develop
3 into an outbreak; ¹**and**¹

4 (5) policies for reporting outbreaks to public health officials in
5 accordance with applicable laws and regulations ¹; and

6 (6) a documented strategy for securing more staff in the event of
7 an outbreak of infectious disease among staff or another emergent or
8 non-emergent situation affecting staffing levels at the facility during
9 an outbreak of an infectious disease¹ .

10 c. (1) In addition to the requirements set forth in subsection b. of
11 this section, the department shall require long-term care facilities **that**
12 **provide care to ventilator-dependent residents** to include in the
13 facility's outbreak response plan written policies to meet staffing,
14 training, and facility demands during an infectious disease outbreak to
15 successfully implement the outbreak response plan, including
16 ¹**either**¹ employing ¹**on a full-time or part-time basis, or**
17 **contracting with on a consultative basis,**¹ the following individuals:

18 (a) an individual ¹**certified by the Certification Board of Infection**
19 **Control and Epidemiology** who meets the requirements of
20 subparagraph (b) of paragraph (1) of subsection e. of this section, who
21 shall be employed:

22 (i) at least part time in the case of a long-term care facility with a
23 licensed bed capacity equal to 100 or fewer beds; and

24 (ii) on a full-time basis in the case of a long-term care facility with
25 a licensed bed capacity equal to more than 100 beds or that provides
26 on-site hemodialysis services¹ ; and

27 (b) a physician who ¹**has completed an infectious disease**
28 **fellowship** meets the requirements of subparagraph (a) of paragraph
29 (1) of subsection e. of this section, who may be employed on a full-
30 time or part-time basis or contracted with on a consultative basis¹ .

31 (2) Each ¹**long-term care facility** nursing home that has not
32 previously submitted an outbreak response plan to the department¹
33 **that provides care to ventilator-dependent residents** shall submit ¹an
34 outbreak response plan¹ to the department ¹**the facility's outbreak**
35 **response plan within 180 days after the effective date of this act** **for**
36 verification as provided in paragraph (3) of this subsection¹ .

37 (3) The department shall verify that the outbreak response plans
38 submitted by ¹**long-term care facilities** nursing homes¹ **that**
39 **provide care to ventilator-dependent residents** are in compliance with
40 the requirements of subsection b. of this section and with the
41 requirements of paragraph (1) of this subsection.

42 ¹(4) The department shall have the authority to require any long-
43 term care facility to revise its outbreak response plan as needed to
44 come into compliance with the requirements of subsection b. of this
45 section and the requirements of paragraph (1) of this subsection. The
46 department may assess civil penalties or take other administrative

1 actions against a facility in the event the department determines the
2 facility is not in compliance with the requirements of this section.¹

3 d. (1) Each long-term care facility ¹~~that submits an outbreak~~
4 ~~response plan to the department pursuant to subsection c. of this~~
5 ~~section]~~¹ shall review ¹~~the~~ its outbreak response¹ plan on an annual
6 basis.

7 (2) If a ¹~~long-term care facility~~ nursing home¹ ~~that provides~~
8 ~~care to ventilator-dependent residents~~ makes any material changes to
9 its outbreak response plan, the ¹~~facility~~ nursing home¹ shall, within
10 30 days after completing the material change, submit to the department
11 an updated outbreak response plan. The department shall, upon
12 receiving an updated outbreak response plan, verify that the plan is
13 compliant with the requirements of subsections b. and c. of this
14 section.

15 e. (1) The department shall require a long-term care facility ~~that~~
16 ~~provides care to ventilator-dependent residents~~ to assign to the
17 facility's infection ¹prevention and¹ control committee ¹~~on a full-time~~
18 ~~or part-time basis, or on a consultative basis]~~¹ :

19 (a) ~~an who is~~ a physician who has completed an infectious
20 disease fellowship; and

21 (b) an individual designated as the infection ~~control~~
22 ~~coordinator,~~ preventionist who has ~~education, training, completed~~
23 ~~course work, or experience in infection control or~~ primary
24 professional training in medicine, nursing, medical technology,
25 microbiology, epidemiology, including or a related field, is qualified
26 by education, training, ¹and at least five years of infection control¹
27 experience, or certification in infection control by the Certification
28 Board of Infection Control and Epidemiology, and has completed
29 specialized training in infection prevention and control.

30 ¹(2)¹ The infection ¹prevention and¹ control committee shall meet
31 on at least a quarterly basis ¹~~and both individuals~~ . The physician¹
32 assigned to the committee pursuant to this subsection shall attend at
33 least half of the meetings held by the infection ¹prevention and¹
34 control committee ¹, and the infection preventionist assigned to the
35 committee pursuant to this subsection shall attend all of the meetings
36 held by the infection prevention and control committee¹ .

37 f. (1) An infection preventionist assigned to a long-term care
38 facility's infection ¹prevention and¹ control committee pursuant to
39 subsection e. of this section shall be a managerial employee ¹~~and~~
40 shall be employed at least part-time at a long-term care facility with a
41 licensed bed capacity equal to 100 beds or less or full-time at a long-
42 term care facility with a licensed bed capacity equal to 101 beds or
43 more]¹ . The infection preventionist shall report directly to the
44 ¹~~chief executive officer and the board~~ administrator¹ of the long-
45 term care facility ¹~~, as applicable,~~¹ and shall provide the ¹~~chief~~
46 executive officer and board, as applicable, administrator¹ quarterly

- 1 reports detailing the effectiveness of the long-term care facility's
2 infection prevention policies.
- 3 (2) The infection preventionist shall be responsible for:
- 4 (a) '[developing]' contributing to the development of' policies,
5 procedures, and a training curriculum for long-term care facility staff
6 based on best practices and clinical expertise; '[and]'
- 7 (b) monitoring the implementation of infection prevention 'and
8 control' policies and '[instituting] recommending' disciplinary
9 measures for staff who routinely violate those policies '; and
- 10 (c) assessing the facility's infection prevention and control
11 program by conducting internal quality improvement audits' .
- 12 g. '[A] Each' long-term care facility '[, which develops an
13 outbreak response plan pursuant to this section,]' shall publish the
14 'facility's outbreak response' plan on its Internet website ', distribute
15 copies of the plan to residents and their families upon admission to the
16 facility, and provide notice to residents and their families any time the
17 facility makes material changes to its plan' .
- 18 h. '[A] Each' long-term care facility '[, which develops an
19 outbreak response plan pursuant to this section,]' shall annually
20 perform preparedness drills to evaluate the effectiveness of its
21 outbreak response plan.
- 22 (cf: '[P.L.2019, c.243, s.1] P.L.2020, c.87, s.7')
- 23
- 24 2. This act shall take effect immediately.