

SENATE HEALTH, HUMAN SERVICES AND SENIOR
CITIZENS COMMITTEE

STATEMENT TO

SENATE, No. 2798

STATE OF NEW JERSEY

DATED: AUGUST 21, 2020

The Senate Health, Human Services and Senior Citizens Committee reports favorably Senate Bill No. 2798.

This bill establishes uniform requirements on the submission of outbreak response plans to the Department of Health (DOH) by long-term care facilities.

P.L.2019, c.243 applied additional requirements on long-term care facilities with ventilator dependent patients regarding the submission of outbreak response plans. This bill amends P.L.2019, c.243 to apply the additional requirements to all long-term care facilities, irrespective of whether the long-term care facilities treat ventilator dependent patients. In addition, this bill requires the DOH to approve submitted plans and provides that the submission of the plans is to be a condition of licensure. P.L.2019, c.243 only required the DOH to verify submitted plans.

Under the bill, the DOH is to require long-term care facilities to include in the facility's outbreak response plan written policies to meet staffing, training, and facility demands during an infectious disease outbreak to successfully implement the outbreak response plan, including either employing on a full-time or part-time basis, or contracting with on a consultative basis, the following individuals: an individual certified by the Certification Board of Infection Control and Epidemiology; and a physician who has completed an infectious disease fellowship. Each long-term care facility is to submit to the DOH the facility's outbreak response plan within 180 days after the effective date of this bill.

The bill provides that the DOH is to verify that the outbreak response plans submitted by long-term care facilities are in compliance with the bill's requirements. If a long-term care facility makes any material changes to its outbreak response plan, the facility is to, within 30 days after completing the material change, submit to the DOH an updated outbreak response plan. The DOH is to, upon receiving an updated outbreak response plan, verify that the plan is compliant with the bill's requirements.

Further, the DOH is to require a long-term care facility to assign to the facility's infection control committee on a full-time or part-time basis, or on a consultative basis: a physician who has completed an

infectious disease fellowship; and an individual designated as the infection preventionist, as provided for in the bill.

Under the bill, an infection preventionist assigned to a long-term care facility's infection control committee is to be a managerial employee and is to be employed at least part-time at a long-term care facility with a licensed bed capacity equal to 100 beds or less or full-time at a long-term care facility with a licensed bed capacity equal to 101 beds or more. The infection preventionist is to report directly to the chief executive officer and the board of the long-term care facility, as applicable, and is to provide the chief executive officer and board, as applicable, quarterly reports detailing the effectiveness of the long-term care facility's infection prevention policies.

The infection preventionist is to be responsible for: developing policies, procedures, and a training curriculum for long-term care facility staff based on best practices and clinical expertise; and monitoring the implementation of infection prevention policies and instituting disciplinary measures for staff who routinely violate those policies.

The bill provides that a long-term care facility is to publish its outbreak response on its Internet website and annually perform preparedness drills to evaluate the effectiveness of its outbreak response plan.