

ASSEMBLY APPROPRIATIONS COMMITTEE

STATEMENT TO

SENATE, No. 3032

**STATE OF NEW JERSEY**

DATED: MAY 18, 2021

The Assembly Appropriations Committee reports favorably Senate Bill No. 3032.

This bill requires the Department of Health to conduct a Statewide nursing home infection control and prevention infrastructure assessment and, based on that assessment, develop a Statewide nursing home infection control and prevention infrastructure improvement plan.

At a minimum, the assessment will include:

(1) a count of the total number of single-resident rooms in nursing homes in the State and the percentage of total nursing home beds that are utilized in single-resident rooms, as well as a review of the ability of nursing homes to expand single-resident room capacity;

(2) a survey of the maintenance status of heating, ventilating, air conditioning, and refrigeration systems in nursing homes;

(3) a study of the utilization of negative pressure rooms and other physical plant features that are designed or may be implemented to increase infection control and prevention capability in nursing homes; and

(4) any other infrastructure-related infection control or prevention considerations as are recommended for assessment by the New Jersey Task Force on Long-Term Care Quality and Safety established pursuant to P.L.2020, c.88. The bill expressly requires the department to request recommendations from the task force.

The assessment is to be completed within one year after the effective date of the bill.

No later than 180 days after the assessment is completed, the department will be required to develop a Statewide nursing home infection control and prevention infrastructure improvement plan, which plan is to:

(1) establish standards and requirements for improvements to the infrastructure in nursing homes to improve infection control and prevention and to ensure the nursing homes are primarily focused on resident safety and the quality of services provided to residents;

(2) establish a long-term strategy to redesign the nursing home industry in New Jersey to ensure the industry is primarily focused on resident safety and the quality of services provided to residents, which strategy will include design and construction standards for new facilities and facilities undergoing significant modifications;

(3) review and seek to incorporate best practice standards in place in other states; and

(4) establish specific goals and timelines for improvements, which will take into account the age of the facilities, the availability of land for expansion or new construction, the costs of improvements, and the authorizations that would be required.

In developing the Statewide plan, the department will be required to consult with representatives from the nursing home industry, including representatives from for-profit and non-profit facilities, groups representing both direct care providers and support staff in nursing homes, resident advocates, and the families of residents.

As reported by the committee, Senate Bill No. 3032 is identical to Assembly Bill No. 4855, which also was reported by the committee on this date.

FISCAL IMPACT:

The Office of Legislative Services (OLS) finds that this bill would increase State expenditures from the General Fund by an indeterminate amount over a two-year period, in order for the Department of Health (DOH) to conduct a Statewide nursing home infection control and prevention infrastructure assessment, and develop a strategic plan to address gaps in facilities' infection control and prevention infrastructure.

To the extent that the DOH can adapt the Infection Control Assessment and Response (ICAR) tool, utilized by the department's Communicable Disease Service (CDS) to reduce the number of healthcare associated infections in nursing homes, State costs could be reduced.

The DOH would incur additional costs to develop a strategic plan to improve infection control and prevention infrastructure in New Jersey nursing homes. To the extent that the DOH is able to consult with CDS staff regarding steps to improve facilities' infection control and prevention protocols, or incorporate best practices utilized in other states, costs to meet this requirement could be limited.