

[Second Reprint]

ASSEMBLY, No. 5527

STATE OF NEW JERSEY
218th LEGISLATURE

INTRODUCED JUNE 6, 2019

Sponsored by:

Assemblyman HERB CONAWAY, JR.

District 7 (Burlington)

Assemblyman P. CHRISTOPHER TULLY

District 38 (Bergen and Passaic)

Assemblywoman LISA SWAIN

District 38 (Bergen and Passaic)

Senator JOSEPH F. VITALE

District 19 (Middlesex)

Senator TROY SINGLETON

District 7 (Burlington)

Co-Sponsored by:

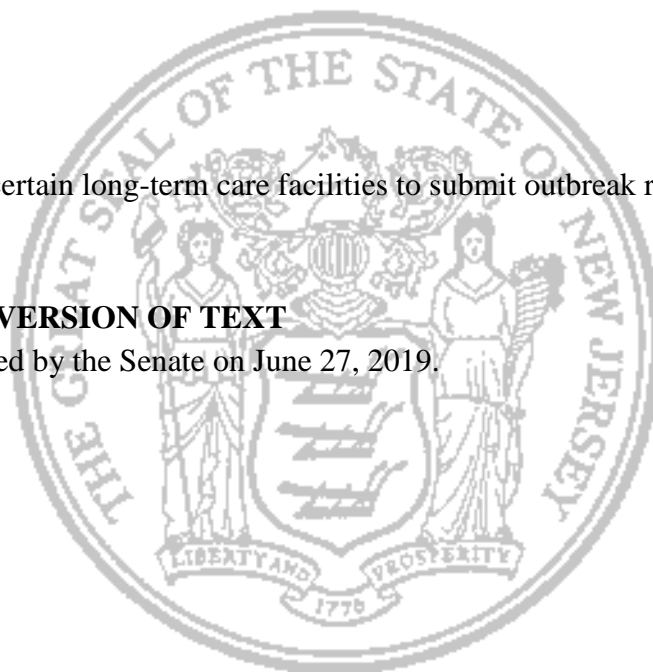
**Assemblywomen Vainieri Huttler, Murphy, Schepisi, Timberlake,
McKnight, Assemblyman Houghtaling, Assemblywoman Downey,
Senators Codey, Ruiz and Greenstein**

SYNOPSIS

Requires certain long-term care facilities to submit outbreak response plan to DOH.

CURRENT VERSION OF TEXT

As amended by the Senate on June 27, 2019.



(Sponsorship Updated As Of: 6/28/2019)

1 AN ACT concerning certain long-term care facilities and
2 supplementing Title 26 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. As used in this section:

8 ¹“Cohorting” means the practice of grouping patients who are or
9 are not colonized or infected with the same organism to confine
10 their care to one area and prevent contact with other patients.

11 ²“Department” means the Department of Health.

12 “Endemic level” means the usual level of given disease in a
13 geographic area.²

14 “Isolating” means the process of separating sick, contagious
15 persons from those who are not sick.¹

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

20 ²“Long-term care facility that provides care to ventilator-
21 dependent residents” means a long-term care facility that has been
22 licensed to provide beds for ventilator care.

23 “Outbreak” means any unusual occurrence of disease or any
24 disease above background or endemic levels.²

25 b. Notwithstanding any provision of law to the contrary, the
26 ²**[Department of Health]** department² shall require long-term care
27 facilities ¹**[that provide care to ventilator-dependent residents]**¹
28 to develop ²**[and submit to the department]**² an outbreak response
29 plan within 180 days after the effective date of this act, which plan
30 shall be customized to the facility, based upon national standards
31 and developed in consultation with the facility’s infection control
32 committee ², if the facility has established an infection control
33 committee². At a minimum, each facility’s plan shall include, but
34 shall not be limited to:

35 (1) a protocol for isolating and cohorting infected and at-risk
36 patients in the event of an outbreak of a ¹**[life-threatening,]**¹
37 contagious disease ¹**[, or of a similar health emergency at a**
38 **facility,]**¹ until the cessation of the outbreak ¹**[or emergency]**¹;

39 (2) clear policies for the notification of ¹**[patients, patients’]**
40 residents, residents’¹ families, ¹visitors,¹ and staff in the event of an
41 outbreak of a ¹**[life-threatening,]**¹ contagious disease¹**[, or of a**
42 similar health emergency]¹ at a facility;

43 (3) information on the availability of laboratory testing,
44 protocols for assessing whether facility visitors are ill, protocols to

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 June 6, 2019.

²Senate floor amendments adopted June 27, 2019.

1 require ill staff to not present at the facility for work duties, and
2 processes for implementing evidence-based outbreak response
3 measures;

4 (4) ² policies to meet staffing, training, and facility demands
5 during an infectious disease outbreak to successfully implement the
6 outbreak response plan, including either employing on a full-time or
7 part-time basis, or contracting with on a consultative basis:

8 (a) an individual certified by the ¹ National Board of Infection
9 Control in infection prevention and control Certification Board of
10 Infection Control and Epidemiology¹; and

11 (b) a physician who has completed an infectious disease
12 fellowship;

13 (5) ² policies to conduct routine ¹ surveillance on monitoring
14 of¹ residents and staff to quickly identify signs of a communicable
15 disease that could develop into an outbreak; and

16 ² (6) (5)² policies for reporting outbreaks to public health
17 officials in accordance with applicable laws and regulations.

18 c. ² Each long term care facility shall notify the department
19 ¹ ,¹ on an annual basis ¹ unless otherwise required by the
20 department,¹ thereafter¹ of any material changes or updates to its
21 outbreak response plan. ¹ The department shall, within 180 days of
22 the submission of the outbreak plan, review the plan and ensure that
23 all criteria are satisfied as set forth in this act¹

24 (1) In addition to the requirements set forth in subsection b. of
25 this section, the department shall require long-term care facilities
26 that provide care to ventilator-dependent residents to include in the
27 facility's outbreak response plan written policies to meet staffing,
28 training, and facility demands during an infectious disease outbreak
29 to successfully implement the outbreak response plan, including
30 either employing on a full-time or part-time basis, or contracting
31 with on an consultative basis, the following individuals:

32 (a) an individual certified by the Certification Board of
33 Infection Control and Epidemiology; and

34 (b) a physician who has completed an infectious disease
35 fellowship.

36 (2) Each long-term care facility that provides care to ventilator-
37 dependent residents shall submit to the department the facility's
38 outbreak response plan within 180 days after the effective date of
39 this act.

40 (3) The department shall verify that the outbreak response plans
41 submitted by long-term care facilities that provide care to
42 ventilator-dependent residents are compliance with the requirements
43 of subsection b. of this section and with the requirements of
44 paragraph (1) of this subsection^{2, 1}

1 d. ²【The Department of Health shall develop and implement
2 procedures as are necessary for the submission of the long-term
3 care facility outbreak response plans required pursuant to this
4 section】

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

8 (2) If a long-term care facility that provides care to ventilator-
9 dependent residents makes any material changes to its outbreak
10 response plan, the facility shall, within 30 days after completing the
11 material change, submit to the department an updated outbreak
12 response plan. The department shall, upon receiving an updated
13 outbreak response plan, verify that the plan is compliant with the
14 requirements of subsections b. and c. of this section² .

15 ¹【e. Notwithstanding any provision of law to the contrary, the
16 Department of Health shall, no later than 180 days after the
17 submission of the outbreak response plan pursuant to subsection b.
18 of this section, issue a certificate of need to a long-term care facility
19 which the department determines is in need of a physical expansion
20 of its facilities to permit the long-term care facility to execute the
21 outbreak response plan submitted pursuant to subsection b. of this
22 section.

23 f. Notwithstanding any provision of law to the contrary,
24 following the Department of Health's initial issuance of certificates
25 of need pursuant to this section, the department shall triennially
26 assess the State's need for additional space in long-term care
27 facilities and issue certificates of need to facilities in need of
28 physical expansion to permit long-term care facilities to execute an
29 outbreak response plan submitted pursuant to this section.】¹

30 ¹【g.】 e. ¹ (1) The ²【Department of Health】 department² shall
31 require a long-term care facility ¹【, which provides care to
32 ventilator-dependent residents,】¹ ²that provides care to ventilator-
33 dependent residents² to assign to the facility's infection control
34 committee ¹, on a full-time or part-time basis, or on a consultative
35 basis¹:

36 (a) an ¹【employee】 individual¹ who is a physician ²【that】 who²
37 has completed an infectious disease fellowship; ¹and¹

38 (b) ¹【and】¹ an ¹【employee】 individual¹ designated as the
39 infection control coordinator, who has education, training,
40 completed course work, or experience in infection control or
41 epidemiology, including certification in infection control by the
42 ¹【National Board of Infection Control】 Certification Board of
43 Infection Control and Epidemiology¹. The infection control
44 committee shall meet on ¹at least¹ a quarterly basis and both
45 ¹【employees】 individuals¹ assigned to the committee pursuant to

1 this subsection shall attend at least half of the meetings held by the
2 infection control committee.

3 ¹~~h.~~ ²~~f.~~¹ If necessary, the Department of Health is authorized
4 to ¹~~temporality~~ temporarily¹ remove licensing requirements to
5 permit long-term care facilities to utilize ancillary space, such as
6 space normally reserved for dining or staff purposes, to assist in the
7 effort to cohort residents in the event of an outbreak. ²

8
9 2. The Department of Health shall implement the provisions of
10 this act, and pursuant to the "Administrative Procedure Act,"
11 P.L.1968, c.410 (C.52:14B-1 et seq.), adopt rules or regulations as
12 are necessary to effectuate the provisions of this act.

13
14 3. This act shall take effect immediately.