

ASSEMBLY, No. 466

STATE OF NEW JERSEY

219th LEGISLATURE

PRE-FILED FOR INTRODUCTION IN THE 2020 SESSION

Sponsored by:

Assemblyman JOHN CATALANO

District 10 (Ocean)

Assemblyman GREGORY P. MCGUCKIN

District 10 (Ocean)

Assemblywoman AURA K. DUNN

District 25 (Morris and Somerset)

SYNOPSIS

Requires health care facility staff to provide certain counseling following miscarriages and State registrar to establish certificate of birth.

CURRENT VERSION OF TEXT

Introduced Pending Technical Review by Legislative Counsel.



(Sponsorship Updated As Of: 5/1/2020)

1 **AN ACT** concerning miscarriages and supplementing Title 26 of the
2 Revised Statutes.

3

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

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7 1. a. The State registrar shall establish a certificate of birth
8 following a miscarriage, as defined in section 2 of P.L. ,
9 c. (C.) (pending before the Legislature as this bill), subject to
10 the provisions of subsection b. of this section, which shall contain
11 the items listed on a form provided or approved by the State
12 registrar pursuant to subsection c. of R.S.26:8-24, for a miscarriage
13 occurring in this State. This certificate shall be offered to a parent
14 who experiences a miscarriage.

15 b. The certificate shall be provided by the State Registrar upon
16 the parent's written request, which may be transmitted to the State
17 registrar directly by the parent or, at the parent's option, by a
18 licensed health care professional on the parent's behalf.

19 c. The person who prepares a certificate pursuant to this
20 subsection shall leave blank any references to the name of the
21 intended child if the parent does not wish to provide a name.

22 d. The certificate of birth following a miscarriage shall be filed
23 with the local registrar of the district in which the miscarriage
24 occurred within three days following receipt by the State registrar
25 of a request for the certificate pursuant to subsection b. of this
26 section.

27 e. When a miscarriage occurring in this State has not been
28 registered within one year after the date of the miscarriage, a
29 certificate marked "delayed" may be filed and registered.

30

31 2. a. As used in this section, "miscarriage" means an
32 unintended, intrauterine fetal death occurring in this State prior to a
33 gestational period of 20 weeks.

34 b. The Commissioner of Health, in consultation with the State
35 Board of Medical Examiners, the New Jersey Board of Nursing, the
36 State Board of Psychological Examiners, and the State Board of
37 Social Work Examiners, shall develop and prescribe by regulation
38 comprehensive policies and procedures to be followed by health
39 care facilities that provide care to a woman who experiences a
40 miscarriage.

41 c. The Commissioner of Health shall require, as a condition of
42 licensure, that each health care facility in the State that provides
43 care to a woman who experiences a miscarriage adhere to the
44 policies and procedures prescribed in this section. The policies and
45 procedures shall include, at a minimum:

46 (1) guidelines to assess a family's level of awareness and
47 knowledge regarding the miscarriage;

1 (2) the establishment of a bereavement checklist and an
2 informational pamphlet to be given to a family experiencing a
3 miscarriage that includes information about funeral and cremation
4 options;

5 (3) training of physicians, nurses, psychologists, and social
6 workers to ensure that information is provided to the woman and
7 family experiencing a miscarriage in a sensitive manner, including
8 information about what to expect, the availability of grief
9 counseling, the opportunity to develop a plan of care that meets the
10 family's social, religious, and cultural needs, and the possibility of
11 experiencing postpartum depression or anxiety following the
12 miscarriage;

13 (4) best practices to provide psychological and emotional
14 support to the woman and family following a miscarriage,
15 including, as applicable: referring to the intended child by name;
16 offering the family the opportunity to cut the umbilical cord;
17 offering the family the opportunity to hold the intended child with
18 privacy and without time restrictions; and preparing a memory box
19 with keepsakes, with provisions for retaining the keepsakes for one
20 year if the family chooses not to take them at discharge;

21 (5) protocols to ensure coordinated visits to the family by a
22 hospital staff trained to address the psychosocial needs of a family
23 experiencing a miscarriage, provide guidance in the bereavement
24 process, assist with completing any forms required in connection
25 with the miscarriage, and offer the family the opportunity to meet
26 with the hospital chaplain or other individual from the family's
27 religious community; and

28 (6) guidelines for educating health care professionals and
29 hospital staff on caring for families after a miscarriage.

30 d. The State Board of Medical Examiners and the New Jersey
31 Board of Nursing shall require physicians and nurses, respectively,
32 to adhere to the policies and procedures prescribed in this section.
33

34 3. The Commissioner of Health, pursuant to the
35 "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et
36 seq.), shall adopt rules and regulations as the commissioner
37 determines necessary to effectuate the purposes of this act.
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39 4. This act shall take effect on the first day of the 13th month
40 next following the date of enactment, but the Commissioner of
41 Health may take such anticipatory administrative action in advance
42 thereof as shall be necessary for the implementation of this act.
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45 STATEMENT

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47 This bill requires the Commissioner of Health, in consultation
48 with the State Board of Medical Examiners, the New Jersey Board

1 of Nursing, the State Board of Psychological Examiners, and the
2 State Board of Social Work Examiners, to develop and prescribe by
3 regulation comprehensive policies and procedures to be followed by
4 health care facilities that provide care to a woman who experiences
5 a miscarriage. "Miscarriage" is defined in the bill as an unintended,
6 intrauterine fetal death occurring in this State prior to a gestational
7 period of 20 weeks.

8 The policies and procedures are to include, at a minimum: 1)
9 guidelines to assess a family's level of awareness and knowledge
10 regarding the miscarriage; 2) the establishment of a bereavement
11 checklist and pamphlet with information about funeral and
12 cremation options; 3) training of physicians, nurses, psychologists,
13 and social workers to ensure, at a minimum, that information is
14 provided in a sensitive manner about what to expect, the availability
15 of grief counseling, the opportunity to develop a plan of care that
16 meets the family's social, religious, and cultural needs, and the
17 possibility of experiencing postpartum depression or anxiety; 4)
18 best practices to provide support to the family following a
19 miscarriage; 5) protocols to ensure coordinated visits to the family
20 by a hospital staff trained to address the psychosocial needs of the
21 family, provide guidance in the bereavement process, assist with
22 completing any forms required in connection with the miscarriage,
23 and offer the family the opportunity to meet with the hospital
24 chaplain or other individual from the family's religious community;
25 and 6) guidelines for educating health care professionals and
26 hospital staff on caring for families after a miscarriage.

27 The State Board of Medical Examiners and the New Jersey
28 Board of Nursing are to require physicians and nurses to adhere to
29 these policies and procedures.

30 The bill also requires the State Registrar to establish a certificate
31 of birth following a miscarriage, which will be offered to parents
32 who experience a miscarriage and provided upon written request.