

ASSEMBLY, No. 1560

STATE OF NEW JERSEY

219th LEGISLATURE

PRE-FILED FOR INTRODUCTION IN THE 2020 SESSION

Sponsored by:

Assemblyman ROBERT D. CLIFTON

District 12 (Burlington, Middlesex, Monmouth and Ocean)

Assemblyman RONALD S. DANCER

District 12 (Burlington, Middlesex, Monmouth and Ocean)

SYNOPSIS

Establishes certain requirements concerning resident supervision at residential health care facilities.

CURRENT VERSION OF TEXT

Introduced Pending Technical Review by Legislative Counsel.



1 **AN ACT** concerning residential health care facilities and amending
2 P.L.1953, c.212.

3

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

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7 1. Section 3 of P.L.1953, c.212 (C.30:11A-3) is amended to
8 read as follows:

9 3. a. The Department of Health and the Department of
10 Community Affairs shall each adopt, promulgate, and enforce such
11 rules, regulations, and standards with respect to the residential
12 health care facilities that are approved hereunder, and that fall under
13 each department's jurisdiction, as each such department may deem
14 to be necessary to assure that: persons living in such facilities are
15 afforded the opportunity to live with as much independence,
16 autonomy, and interaction with the surrounding community as they
17 are capable of; such persons are afforded a minimum standard of
18 sanitation, housekeeping, heat, light, air, food, lodging, care,
19 service, and fire safety which also preserves and promotes a
20 homelike atmosphere appropriate to such facilities; such persons are
21 not deprived of any constitutional, civil, or legal right solely by
22 reason of their living in such facilities; employees of public and
23 private agencies have reasonable access to such facilities; and other
24 citizens have reasonable access to such facilities upon receiving the
25 consent of a resident to be visited by them. The rules, regulations,
26 and standards adopted pursuant to this subsection shall, at a
27 minimum, require each residential building at the facility to have at
28 least two staff members on duty at all times who are able to provide
29 resident supervision, which supervision may be a primary or
30 secondary duty of the staff members, and require each facility to
31 develop, maintain, and enforce a comprehensive plan concerning
32 residents who leave the premises of the facility, including protocols
33 for identifying and immediately reporting incidents in which a
34 resident is missing for 24 hours.

35 b. Nothing in this chapter, or in any rule or regulation
36 promulgated hereunder, shall be construed to mean that any
37 residential health care facility may advertise, hold itself out, or
38 operate, as a nursing home.

39 c. Each department may determine that the various
40 establishments covered by P.L.1953, c.212 (C.30:11A-1 et seq.),
41 which are subject to each department's respective jurisdiction, are
42 appropriately and reasonably classified into two or more classes,
43 and may establish separate rules, regulations, and standards for each
44 such class. Such rules, regulations, and standards shall include, but
45 need not be limited to, all requirements and limitations legally

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.

1 imposed upon any such establishment by any other municipal,
2 county, or State office or officer having inspection, approval,
3 licensing, or regulatory authority with respect to such
4 establishment.

5 d. The provisions of this subsection shall apply only to those
6 free-standing residential health care facilities that are not located
7 with, and operated by, a licensed health care facility, and which are
8 subject to the authority of the Department of Community Affairs.

9 (1) No licensee shall cause any resident to be evicted from a
10 residential health care facility that is not located with, and operated
11 by, a licensed health care facility, except for good cause, as defined
12 in P.L.1974, c.49 (C.2A:18-61.1 et seq.), and except in accordance
13 with the procedural requirements of P.L.1974, c.49 (C.2A:18-61.1
14 et seq.). Nothing in P.L.1953, c.212 (C.30:11A-1 et seq.) shall
15 prohibit the transfer of a resident to a screening center for an
16 evaluation to determine whether the resident poses a risk of danger
17 to the resident's own self or to others. In the event of such transfer,
18 the licensee may contemporaneously proceed with eviction against
19 such resident pursuant to P.L.1974, c.49 (C.2A:18-61.1 et seq.). All
20 references in P.L.1974, c.49 (C.2A:18-61.1 et seq.) to the terms
21 "landlords," "tenants," "tenancy," "lease," or similar terminology
22 shall be equally applicable to residents of and residential
23 agreements used by a residential health care facility that is not
24 located with, and operated by, a licensed health care facility.

25 (2) In addition to the other requirements of this subsection, a
26 licensee shall provide prompt written notice to the county welfare
27 agency, to the Department of Community Affairs, and to the New
28 Jersey Office of the Ombudsman for the Institutionalized Elderly of
29 any proposed eviction of a resident. The written notice required by
30 this paragraph shall be provided at the time that a complaint for
31 eviction is filed with the appropriate court and appended thereto.
32 No Judgment of Possession shall be entered unless the requirements
33 of this paragraph have been met.
34 (cf: P.L.2017, c.234, s.3)

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36 2. This act shall take effect immediately.

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STATEMENT

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41 This bill requires that the rules and regulations adopted for
42 residential health care facilities include a requirement that all
43 residential buildings at the facility have at least two staff members
44 on duty at all times to provide resident supervision, which
45 supervision may be a primary or secondary duty of the staff
46 members. The rules and regulations are to additionally require that
47 all residential health care facilities develop, maintain, and enforce a
48 comprehensive plan concerning residents who leave the premises of

1 the facility, including protocols for identifying and immediately
2 reporting incidents in which a resident is missing for 24 hours.
3 The Department of Health (DOH) oversees residential health
4 care facilities that are located with, and operated by, another DOH-
5 licensed facility, and the Department of Community Affairs
6 oversees free-standing residential health care facilities that are not
7 located with, or operated by, a DOH-licensed facility. Each
8 department will be responsible for ensuring its respective rules and
9 regulations concerning residential health care facilities are
10 consistent with the requirements of the bill.