

LEGISLATIVE FISCAL ESTIMATE
ASSEMBLY, No. 4855
STATE OF NEW JERSEY
219th LEGISLATURE

DATED: MAY 20, 2021

SUMMARY

Synopsis: Requires DOH to develop Statewide plan for infection control and prevention infrastructure improvements in nursing homes.

Type of Impact: Indeterminate increase in State expenditures, General Fund.

Agencies Affected: Department of Health, Communicable Disease Service.

Fiscal Impact	<u>Year 1</u>	<u>Year 2</u>
State Cost	Indeterminate Increase	Indeterminate Increase

- 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.

BILL DESCRIPTION

This bill would require the DOH 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 is to include:

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

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

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

(4) any other infrastructure-related infection control or prevention considerations recommended for assessment by the New Jersey Task Force on Long-Term Care Quality and Safety. 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.

FISCAL ANALYSIS

EXECUTIVE BRANCH

None received.

OFFICE OF LEGISLATIVE SERVICES

The OLS finds that this bill would increase State expenditures from the General Fund by an indeterminate amount in order for the DOH to conduct the Statewide nursing home infection control and prevention infrastructure assessment, and develop a strategic plan to address gaps in facilities' infection control and prevention infrastructure. For context, the OLS calculates that there are 377 nursing homes in the State that would come under the purview of this bill.

Currently, the CDS within the DOH has team of epidemiologists and infection preventionists that conducts voluntary infection control and prevention assessments of nursing homes and other healthcare facilities, utilizing the federal Centers for Disease Control and Prevention's (CDC)

ICAR tool. The CDS utilizes the ICAR tool, as part of a cooperative agreement with the CDC, to help nursing homes reduce the number of healthcare associated infections.

However, assessments conducted by the ICAR team are non-regulatory in nature, meaning that results from the ICAR assessments are not reported to the DOH, unless the team observes an egregious violation. Specifically, the ICAR team will: survey a nursing home's infection control and prevention practices, identify areas for improvement in a facility's infection prevention practices, share local and national best practices with a facility's leadership team, provide resources to support outbreak response and reporting preparedness, and provide post-assessment follow up resources. In response to the COVID-19 pandemic, the CDC adapted its ICAR tool to assess infection control and prevention protocols related to COVID-19; the revised ICAR tool includes a section pertaining to a nursing home's infrastructure. To the extent that the DOH can adapt the ICAR tool to meet the requirements established under this bill, costs to the State may be somewhat reduced.

. The bill additionally requires the DOH to develop a strategic plan to address infrastructure improvements that nursing homes may need to make in order to facilitate infection control and prevention. The strategic plan is additionally to include: design and construction standards to improve infection control capabilities at nursing homes; best practices utilized in other states; and, specific infection control benchmarks, along with timelines for the nursing home industry to meet these benchmarks. To the extent that the DOH can consult with, and obtain recommendations from, the ICAR team in formulating the required strategic plan, State costs could be reduced. In addition, the DOH could consult with the Health Care Association of New Jersey, which represents both for-profit and non-profit nursing homes, or LeadingAge New Jersey and Delaware, which represents non-profit nursing homes, to develop specific design and construction protocols and best practice standards as part of the long-term strategic plan.

Section: Human Services

*Analyst: Anne Cappabianca
Associate Fiscal Analyst*

*Approved: Thomas Koenig
Legislative Budget and Finance Officer*

This legislative fiscal estimate has been produced by the Office of Legislative Services due to the failure of the Executive Branch to respond to our request for a fiscal note.

This fiscal estimate has been prepared pursuant to P.L.1980, c.67 (C.52:13B-6 et seq.).