

SENATE, No. 2550

STATE OF NEW JERSEY
219th LEGISLATURE

INTRODUCED JUNE 8, 2020

Sponsored by:

Senator ANTHONY M. BUCCO

District 25 (Morris and Somerset)

SYNOPSIS

Establishes temporary Pandemic PTSD Task Force.

CURRENT VERSION OF TEXT

As introduced.



1 **AN ACT** establishing a temporary task force to study, and provide
2 recommendations regarding the identification and treatment of,
3 pandemic-related post-traumatic stress disorder in first
4 responders, health care professionals, and other frontline
5 workers.

6
7 **BE IT ENACTED** *by the Senate and General Assembly of the State*
8 *of New Jersey:*

9
10 1. a. As used in this act:

11 “First responder” means a law enforcement officer, a paramedic
12 or other emergency medical responder, or a firefighter, whether
13 working on a paid or volunteer basis, who provides emergency
14 response services during a pandemic.

15 “Health care professional” means a physician, nurse, physician’s
16 assistant, certified nurse aide, homemaker-home health aide,
17 personal care assistant, or any other health care practitioner licensed
18 or certified pursuant to Title 45 of the Revised Statutes, and any
19 properly authorized resident or intern, who provides health care
20 services during a pandemic.

21 “Other frontline worker” means an individual, other than a first
22 responder or health care professional, who provides an essential
23 service or a key public service during a pandemic.

24 “Pandemic” means the coronavirus-19 (COVID-19) pandemic,
25 declared by the World Health Organization in March 2020, and any
26 other pandemic of disease declared in the future.

27 “Pandemic PTSD” means post-traumatic stress disorder that is
28 suffered by first responders, health care professionals, and other
29 frontline workers due to their provision of health care services,
30 emergency medical services, emergency response or transport
31 services, or other essential or key public services during a
32 pandemic.

33 “Post-traumatic stress disorder” or “PTSD” means a debilitating
34 mental health condition that is triggered by a terrifying, traumatic,
35 or catastrophic event, is not controllable through normal methods of
36 self-care, and includes such symptoms as flashbacks, nightmares,
37 and severe anxiety, as well as the inability to control one’s thoughts
38 about the triggering event.

39 b. There is established, in the Department of Human Services,
40 a Pandemic PTSD Task Force. The purpose of the task force shall
41 be to evaluate the prevalence and likelihood of, and develop best
42 practices for the identification and treatment of, pandemic PTSD in
43 first responders, health care professionals, and other frontline
44 workers in the State, and recommend the implementation and use of
45 appropriate treatments and supports to mitigate, eliminate, and
46 otherwise reduce the effects of pandemic PTSD on these workers.

47 c. The task force shall consist of 21 members, including:

1 (1) five members, or their designees, who shall serve ex officio
2 as follows: the Director of the Office of Employee and
3 Organization Development in the Department of Law and Public
4 Safety, who shall serve as co-chair of the task force; the Assistant
5 Commissioner of the Division of Mental Health and Addiction
6 Services in the Department of Human Services, who shall serve as
7 co-chair of the task force; the Commissioner of Health; the New
8 Jersey Secretary of State; and the State Attorney General;

9 (2) four public members to be appointed by the Senate
10 President, as follows: (a) one licensed psychiatrist who has
11 expertise in the treatment of PTSD in first responders, health care
12 professionals, or other frontline workers, particularly during or
13 following the occurrence of public disasters or other crisis-level
14 incidents; (b) one licensed health care professional who has
15 expertise in the treatment of the physical side-effects of, or illnesses
16 or injuries contributing to, PTSD; (c) one law enforcement officer
17 who has personal experience with PTSD; and (d) one non-volunteer
18 emergency medical responder who has personal experience with
19 PTSD;

20 (3) four public members to be appointed by the Senate Minority
21 Leader, as follows: (a) one licensed psychiatrist or other mental
22 health care professional who has expertise in the treatment of PTSD
23 in first responders, health care professionals, or other frontline
24 workers, particularly during or following the occurrence of public
25 disasters or other crisis-level incidents; (b) one licensed health care
26 professional who has expertise in the treatment of the physical side-
27 effects of, or illnesses or injuries contributing to, PTSD; (c) one law
28 enforcement officer who has personal experience with PTSD; and
29 (d) one emergency medical responder who is a member of a
30 volunteer first aid, ambulance or rescue squad and has personal
31 experience with PTSD;

32 (4) four public members to be appointed by the Speaker of the
33 General Assembly, as follows: (a) one representative of a nonprofit
34 organization that provides community-based mental health or
35 related services to persons suffering from PTSD in the State; (b)
36 one licensed health care professional who has personal experience
37 with PTSD; (c) one firefighter who is a member of a volunteer fire
38 company and has personal experience with PTSD; and (d) one
39 frontline worker who has personal experience with PTSD; and

40 (5) four public members to be appointed by the Minority Leader
41 of the General Assembly, as follows: (a) one citizen who is trained
42 and qualified to serve as a para-professional crisis counselor in the
43 State; (b) one licensed health care professional who has personal
44 experience with PTSD; (c) one non-volunteer firefighter who has
45 personal experience with PTSD; and (d) one frontline worker who
46 has personal experience with PTSD.

47 d. The members of the task force shall serve until the task force
48 submits its report pursuant to subsection j. of this section.

1 Vacancies in the council's membership shall be filled in the same
2 manner provided for the original appointments.

3 e. The task force shall organize as soon as practicable, but not
4 more than 30 days, after the appointment of a majority of its
5 members and shall meet at the times and places designated by its
6 co-chairs. The task force may conduct business without a quorum,
7 but may only vote on a recommendation when a quorum is present.

8 f. Members of the task force shall serve without compensation,
9 but may be reimbursed for travel and other miscellaneous expenses
10 incurred in the necessary performance of their duties, within the
11 limits of funds made available to the council for its purposes.

12 g. The task force shall be entitled to receive assistance and
13 services from any State, county, or municipal department, board,
14 commission, or agency as it may require and as may be available to
15 it for its purposes. The task force shall further be authorized to
16 consult with any association, organization, or individual having
17 knowledge of the causes or effects of PTSD or experience with the
18 identification or treatment of PTSD. The Department of Human
19 Services shall provide staff and administrative support as may be
20 necessary to assist the task force in carrying out its duties.

21 h. The task force may solicit, receive, and expend any grant
22 moneys or other funds that may be made available, for the task
23 force's purposes, by any government agency or any private for-
24 profit or not-for-profit organization or entity.

25 i. The task force shall have the duty to:

26 (1) identify and evaluate the causes of, the factors that
27 contribute to, and the mental and physical effects of, pandemic
28 PTSD in first responders, health care professionals, and other
29 frontline workers;

30 (2) estimate the current prevalence of pandemic PTSD among
31 first responders, health care professionals, and other frontline
32 workers, as well as the likelihood of future cases;

33 (3) develop best practices for the identification and treatment of
34 pandemic PTSD in first responders, health care professionals, and
35 other frontline workers;

36 (4) identify and approve new, alternative, and innovative means
37 and methods of diagnosing and treating pandemic PTSD in first
38 responders, health care professionals, and other frontline workers;
39 and

40 (5) identify policies, practices, services, resources, and funding
41 sources that can be used to: (a) enhance the ability of health care
42 and mental health care professionals to identify, diagnose the
43 severity of, and appropriately treat, pandemic PTSD and its side
44 effects; (b) facilitate the Statewide implementation and use of the
45 best practices and diagnostic and treatment methods identified by
46 the task force pursuant to paragraphs (3) and (4) of this subsection;
47 (c) enhance the ability of employers to identify and provide
48 appropriate assistance to employees who may be suffering from

1 pandemic PTSD; (d) facilitate the cooperative and integrated
2 provision of physical and behavioral health care in association with
3 the treatment of pandemic PTSD and associated injuries, illnesses,
4 or side effects in first responders, health care professionals, and
5 other frontline workers; (e) increase the type and availability of
6 community supports that are available to assist first responders,
7 health care professionals, and other frontline workers in
8 successfully coping with and overcoming pandemic PTSD; (f)
9 increase public awareness of pandemic PTSD occurring among first
10 responders, health care professionals, and other frontline workers;
11 (g) improve the accessibility of care and treatment for pandemic
12 PTSD; (h) enhance the ability of first responders, health care
13 professionals, other frontline workers, and their families to
14 recognize symptoms of pandemic PTSD, identify the need for
15 treatment, and seek out appropriate treatment when needed; (i)
16 remove any professional or other stigma associated with the receipt
17 of treatment for pandemic PTSD; and (j) otherwise enable the State
18 to promptly address and mitigate the effects of pandemic PTSD on
19 first responders, health care professionals, and other frontline
20 workers.

21 j. Not later than 12 months after its organizational meeting
22 pursuant to subsection e. of this section, the task force shall prepare
23 and submit a written report to the Governor and, pursuant to section
24 2 of P.L.1991, c.164 (C.52:14-19.1), to the Legislature, providing
25 its findings and recommendations with respect to the issues under
26 its purview. A copy of the report submitted pursuant to this section
27 shall be posted on the Internet websites of the Departments of Law
28 and Public Safety, Human Services, and Health. The report
29 prepared pursuant to this subsection shall:

30 (1) describe the task force's findings on the matters described in
31 paragraphs (1) and (2) of subsection i. of this section;

32 (2) identify the best practices that have been developed and the
33 new, alternative, and innovative diagnostic and treatment methods
34 that have been approved by the task force pursuant to paragraphs
35 (3) and (4) of subsection i. of this section, and provide data and
36 other appropriate evidence to support the adoption of each best
37 practice and the approval of each diagnostic and treatment method;
38 and

39 (3) provide recommendations for legislative, executive, or other
40 actions that can be undertaken to effectuate the goals described in
41 paragraph (5) of subsection i. of this section.

42 k. The task force shall dissolve on the 30th day following the
43 submission of its report pursuant to subsection b. of this section.

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45 2. This act shall take effect immediately and shall expire on the
46 30th day following the submission of a task force report to the
47 Governor and Legislature pursuant to subsection j. of section 1 of
48 this act.

STATEMENT

This bill would temporarily establish a Pandemic PTSD Task Force in the Department of Human Services. The purpose of the task force will be to: 1) evaluate the prevalence and likelihood of, and develop best practices for the identification and treatment of, post-traumatic stress disorder (PTSD) in first responders, health care professionals, and other frontline workers who have engaged in the provision of health care services, emergency response services, or other essential or key public services during a pandemic; and 2) recommend the implementation and use of appropriate treatments and supports to mitigate, eliminate, and otherwise reduce the effects of pandemic PTSD on these workers.

The task force will be composed of 21 members and will have the duty to:

1) identify and evaluate the causes of, the factors that contribute to, and the mental and physical effects of, pandemic PTSD in first responders, health care professionals, and other frontline workers;

2) estimate the current prevalence of pandemic PTSD among these workers, as well as the likelihood of future cases;

3) develop best practices for the identification and treatment of pandemic PTSD;

4) identify and approve new, alternative, and innovative means and methods of diagnosing and treating pandemic PTSD; and

5) identify policies, practices, services, resources, and funding sources that can be used to: enhance the ability of health care and mental health care professionals to identify, diagnose the severity of, and appropriately treat, pandemic PTSD and its side effects in first responders, health care professionals, and other frontline workers; facilitate the Statewide implementation and use of the best practices and diagnostic and treatment methods identified by the task force; enhance the ability of employers to identify and provide appropriate assistance to employees who may be suffering from pandemic PTSD; facilitate the cooperative and integrated provision of physical and behavioral health care in association with the treatment of pandemic PTSD and associated injuries, illnesses, or side effects in first responders, health care professionals, and other frontline workers; increase the type and availability of community supports that are available to help first responders, health care professionals, and other frontline workers successfully cope with and overcome pandemic PTSD; increase public awareness of pandemic PTSD; improve the accessibility of care and treatment for pandemic PTSD; enhance the ability of first responders, health care professionals, other frontline workers, and their families to recognize symptoms of pandemic PTSD, identify the need for treatment, and seek out appropriate treatment when needed; remove any professional or other stigma associated with the receipt of

1 treatment for pandemic PTSD; and otherwise enable the State to
2 promptly address and mitigate the effects of pandemic PTSD on the
3 community.

4 Not later than 12 months after its organizational meeting, the
5 task force will be required to prepare and submit, to the Governor
6 and the Legislature, a written report of its findings and
7 recommendations in relation to the issues under its purview. A
8 copy of the report will also be posted on the Internet websites of the
9 Departments of Law and Public Safety, Human Services, and
10 Health. The report would be required to include: 1) the task force's
11 findings regarding the causes, effects, and factors contributing to
12 pandemic PTSD and the prevalence and likelihood of future
13 occurrence of pandemic PTSD among first responders, health care
14 professionals, and other frontline workers in the State; 2) a
15 description of the best practices that have been developed and the
16 new, alternative, and innovative diagnostic and treatment methods
17 that have been approved by the task force pursuant to the bill's
18 provisions, together with data and other appropriate evidence to
19 support the adoption of each best practice and the approval of each
20 diagnostic and treatment method; and 3) recommendations for
21 legislative, executive, or other actions that can be undertaken to
22 effectuate the goals described in the bill.

23 The task force will dissolve, and the bill will expire, on the 30th
24 day following the submission of the task force's report.