

ASSEMBLY, No. 1659

STATE OF NEW JERSEY 221st LEGISLATURE

PRE-FILED FOR INTRODUCTION IN THE 2024 SESSION

Sponsored by:

Assemblywoman PAMELA R. LAMPITT

District 6 (Burlington and Camden)

Assemblywoman SHAMA A. HAIDER

District 37 (Bergen)

SYNOPSIS

Establishes certain requirements and initiatives related to nurses; transfers oversight of certified nurse aides from DOH to Board of Nursing; appropriates \$26.7 million.

CURRENT VERSION OF TEXT

Introduced Pending Technical Review by Legislative Counsel.



1 AN ACT concerning nurses, revising various parts of the statutory
2 law, supplementing P.L.2002, c.116, Titles 26, 34, and 45 of the
3 Revised Statutes, P.L.1947, c.262 (C.45:11-23 et seq.), and Title
4 54A of the New Jersey Statutes, and making appropriations.

5

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

8

9 1. (New section) The New Jersey Collaborating Center for
10 Nursing (“NJCCN”) shall establish a program through which
11 facilities for acute care, long-term care, public health, ambulatory
12 care, home care and hospice providers, and other qualifying
13 facilities or providers may apply to receive financial, material and
14 technical support from the NJCCN to implement a residency
15 program created in accordance with P.L. , c. (C.) (pending
16 before the Legislature as this bill) for licensed practical nurses and
17 registered professional nurses, or one of these professions.

18

19 2. (New section) a. The NJCCN shall appoint an advisory
20 committee of stakeholders, which shall organize no later than 60
21 days after the date of enactment of P.L. , c. (C.) (pending
22 before the Legislature as this bill), for consultation to effectuate the
23 purposes of P.L. , c. (C.) (pending before the Legislature as
24 this bill).

25 b. The stakeholders to be appointed by the NJCCN to the
26 advisory committee shall include at least:

27 (1) two NJCCN representatives;

28 (2) one representative of the New Jersey Board of Nursing who
29 is either a licensed practical nurse or a registered professional
30 nurse;

31 (3) one licensed practical nurse or registered professional nurse
32 who completed a nursing residency program in the State;

33 (4) one licensed practical nurse or registered professional nurse
34 representing a unionized facility;

35 (5) one faculty member of an associate’s degree program in
36 nursing located in New Jersey;

37 (6) one faculty member of a bachelor’s degree program in
38 nursing located in New Jersey;

39 (7) one representative of the New Jersey Hospital Association
40 who focuses on long-term care;

41 (8) one representative of the Health Care Association of New
42 Jersey;

43 (9) one representative of the Home Care and Hospice
44 Association of New Jersey;

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 (10)one representative of the New Jersey Association of County
2 and City Health Officials;

3 (11)one representative of the New Jersey State Nurses
4 Association; and

5 (12)one representative of the Organization of Nurse Leaders of
6 New Jersey.

7 c. Notwithstanding the requirements for the membership of the
8 advisory committee pursuant to subsection b. of this section, the
9 NJCCN shall have the authority to adjust membership of the
10 advisory committee upon periodic review of the needs of residency
11 programs for licensed practical nurses and registered professional
12 nurses in the State.

13

14 3. (New section) a. Pursuant to section 2 of
15 P.L. , c. (C.) (pending before the Legislature as this bill),
16 the NJCCN shall consult with the advisory committee to:

17 (1) establish and update, as necessary, requirements for a
18 residency program created in accordance with P.L. , c. (C.)
19 (pending before the Legislature as this bill). The requirements shall
20 include, at a minimum:

21 (a) a 12-month timeline for a residency;

22 (b) a full-time schedule for residents;

23 (c) support for residents by a preceptor or mentor; and

24 (d) collection of data by the facility or provider to send to the
25 NJCCN regarding the number of individuals who completed a
26 residency program with the facility or provider and remained at the
27 facility or with the provider after residency completion for full-time
28 employment; and

29 (2) establish criteria for eligibility of facilities and providers to
30 participate in the program created in accordance with section 1 of
31 P.L. , c. (C.) (pending before the Legislature as this bill).

32 b. To participate in the program, established pursuant to section
33 1 of P.L. , c. (C.) (pending before the Legislature as this
34 bill), a facility or provider shall submit an application, in a form as
35 determined by the NJCCN in consultation with the advisory
36 committee, and shall include the following information:

37 (1) the number of spots to be offered in the facility or provider's
38 residency program;

39 (2) the type of facility or provider seeking approval; and

40 (3) whether the facility or provider's residency program is
41 newly established or being updated.

42 c. Applications shall be approved on a first-come, first-served
43 basis, with priority given to long-term care facilities and home care
44 providers.

45 d. Upon approval of an application, the New Jersey Board of
46 Nursing shall provide funding to the NJCCN to offer the financial,
47 material and technical support to the approved facility or provider,
48 in an amount determined based on various criteria, including, but

1 not limited to, the information submitted in the application pursuant
2 to paragraphs (1) through (3) of subsection b. of this section.

3 e. At no time shall the New Jersey Board of Nursing allocate
4 an amount exceeding \$4 million annually to the NJCCN for the
5 financial, material and technical support to facilities and providers
6 participating in the program established pursuant to section 1 of
7 P.L. , c. (C.) (pending before the Legislature as this bill).

8

9 4. Section 4 of P.L.2002, c.116 (C.18A:65-92) is amended to
10 read as follows:

11 4. The board shall:

12 a. determine global policies for the center;

13 b. implement the primary goals of the center as established in
14 this act;

15 c. appoint a multidisciplinary advisory council to provide input
16 and advice on policy matters. The advisory council shall include
17 representatives from all of the organizations represented in the
18 collaborative of New Jersey Colleagues in Caring;

19 d. appoint a full-time executive director who shall serve at the
20 pleasure of the board and shall be a person qualified by training and
21 experience to perform the duties of the office. The board shall
22 authorize the executive director to employ such other staff as the
23 executive director deems necessary and within the limits of funds
24 available to the center. All policies and procedures concerning the
25 hiring of center employees shall be the same as and consistent with
26 the applicable policies and procedures of Rutgers, The State
27 University of New Jersey;

28 e. apply for and accept grants of money available for carrying
29 out the policies and activities of the center from the federal
30 government, and accept gifts, grants and bequests of funds from
31 individuals, foundations, corporations, governmental agencies and
32 other organizations and institutions to carry out the purposes of this
33 act;

34 f. establish policies for the appointment of members of the
35 board; and

36 g. submit a report to the Governor and the Legislature [one
37 year after the center is established, and] every two years
38 [thereafter,] on its activities and findings, including, but not limited
39 to, (1) data on the participation of facilities and providers in the
40 NJCCN program established pursuant to section 1 of P.L. , c.
41 (C.) (pending before the Legislature as this bill); (2) data on
42 the number of licensed practical nurses and registered professional
43 nurses participating in a residency program supported by the
44 NJCCN program established pursuant to section 1 of P.L. , c.
45 (C.) (pending before the Legislature as this bill), including
46 information on the health care settings in which the residencies
47 were supported; and (3) funds spent in the previous two years on
48 materials and technical support supplied by the NJCCN to

1 participating facilities and providers. The report may include such
2 recommendations for legislative action as the board deems
3 appropriate. The board shall make its **【annual】** biannual
4 report available to members of the public, upon request.
5 (cf: P.L.2009, c.47, s.3)

6
7 5. Section 4 of P.L.2009, c.47 (C.18A:65-92.1) is amended to
8 read as follows:

9 4. There is annually appropriated to the New Jersey
10 Collaborating Center for Nursing in the College of Nursing of
11 Rutgers, The State University of New Jersey, 5%, or \$515,000,
12 whichever amount is greater, of the initial and renewal licensing
13 fees for professional and practical nurses collected by the New
14 Jersey Board of Nursing each year.
15 (cf: P.L.2009, c.47, s.4)

16
17 6. Section 5 of P.L.2009, c.47 (C.45:11-27.1) is amended to
18 read as follows:

19 5. a. Of the initial and renewal licensing fees charged by the
20 New Jersey Board of Nursing pursuant to N.J.A.C.13:37-5.5 for
21 professional and practical nurses, an amount equal to 5%, or
22 \$515,000, whichever amount is greater, of the fee shall be dedicated
23 to funding the New Jersey Collaborating Center for Nursing in the
24 College of Nursing of Rutgers, The State University of New Jersey.

25 b. The board may, by regulation, revise the fees charged
26 pursuant to N.J.A.C.13:37-5.5 to account for the loss of revenue to
27 the board as a result of the dedication of funding pursuant to this
28 section.
29 (cf: P.L.2009, c.47, s.5)

30
31 7. (New section) a. As used in this section:

32 "Council" means a Nurse Workplace Environment and Staffing
33 Council established in a hospital pursuant to this section.

34 "Hospital" means a hospital licensed pursuant to P.L.1971, c.136
35 (C.26:2H-1 et seq.).

36 b. The Department of Health shall require each hospital in this
37 State to establish a Nurse Workplace Environment and Staffing
38 Council, either by establishing a new council or assigning the
39 functions of the council to a similar existing entity within the
40 hospital. Each council shall be established based on the American
41 Association of Critical Care Standards for establishing and
42 sustaining a healthy work environment.

43 c. Each council shall serve the purpose of:

44 (1) providing nurses with representation on matters concerning
45 the establishment of healthy work environments and human
46 resource allocation;

47 (2) creating a forum of participatory leadership; and

1 (3) supporting the equal participation of nurses and hospital
2 management in hospital decisions affecting nurses.

3 d. At least 51 percent of the members of each council shall be
4 registered nurses who spend at least 50 percent of work time in
5 direct patient care. Each council shall contain a sufficient number
6 of members to provide adequate representation of all the nurses
7 working in the hospital. The selection of the registered nurses shall
8 be according to the collective bargaining agreement, if one in effect
9 at the hospital. If there is no applicable collective bargaining
10 agreement, the members of the council who are registered nurses
11 shall be selected by their peers. The members of the council who
12 are hospital administrative staff shall be appointed by each
13 council's Chief Nursing Officer.

14 e. Participation in the council by a hospital employee shall be
15 on scheduled work time and compensated at the appropriate rate of
16 pay. Council members shall be relieved of all other work duties
17 during meetings of the council.

18 f. Each council shall have a Chief Nursing Officer and a direct
19 care nurse who shall serve as the co-chairs of the council.

20 g. Each council member shall be required to complete the
21 curriculum provided by the Organization of Nurse Leaders of New
22 Jersey Nursing Workplace Environment Commission program or a
23 similar process defined in a collective bargaining agreement.

24 h. (1) Each council shall develop an annual plan concerning
25 nurse staffing and the creation of a positive work environment for
26 nurses within the hospital. The plan shall be based on the needs of
27 patients and be used as a primary component for budget planning by
28 the Chief Nursing Officer.

29 (2) The plan shall:

30 (a) not diminish other standards under State or federal law,
31 rules, or regulations, or the terms of an applicable collective
32 bargaining agreement, if any, between the hospital and a
33 representative of the nursing staff; and

34 (b) provide for exemptions for some or all requirements of the
35 plan during a state of emergency, as defined in section 23 of
36 P.L.2011, c.19 (C.5:12-45.3), if the hospital is requested or
37 expected to provide an exceptional level of emergency or other
38 medical services.

39 (3) The Department of Health shall be responsible for ensuring
40 that each council is in compliance with the provisions of this
41 subsection and shall review the plan as necessary.

42

43 8. (New section) a. As used in this section:

44 "Authority" means the New Jersey Economic Development
45 Authority established by section 4 of P.L.1974, c.80 (C.34:1B-4).

46 "Chief Executive Officer" means the Chief Executive Officer of
47 the New Jersey Economic Development Authority.

1 “Eligible nursing education program” means an accredited
2 nursing education program located in the State at a public
3 institution of higher education, independent institution of higher
4 education, or hospital-based nursing school.

5 “Program” means the Nursing School Expansion Grant Program
6 established pursuant to this section.

7 b. There is established the Nursing School Expansion Grant
8 Program to be administered by the New Jersey Economic
9 Development Authority. The program shall provide grants to
10 eligible nursing education programs in the State to increase their
11 capacity and improve the supply of the nursing workforce.

12 c. An eligible nursing education program may submit an
13 application for grant funding through the program to the Chief
14 Executive Officer. An application shall include information and
15 data, in such form and in such manner as is required by the Chief
16 Executive Officer, on:

17 (1) the enrollment and graduation rates for the three academic
18 years preceding the date of the application;

19 (2) the projected plan to increase enrollment and graduation
20 targets;

21 (3) the demographic profile of current students, faculty, and
22 staff and specific plans to increase the diversity of the nursing
23 workforce;

24 (4) any plans for faculty expansions in order to meet the needs
25 of an increased student body;

26 (5) any partnerships, connections, or pathways between licensed
27 practical nursing programs, diploma or certificate programs,
28 associate’s degree programs, baccalaureate degree programs, and
29 graduate level programs in nursing and nursing education;

30 (6) student pass rates for examinations administered by the
31 National Council of State Boards of Nursing; and

32 (7) such other information as the Chief Executive Officer may
33 require.

34 d. The Chief Executive Officer, in consultation with the New
35 Jersey Collaborating Center for Nursing, shall develop criteria for
36 the evaluation of applications for grants. Based upon the criteria
37 developed, and within the limits of available appropriations, the
38 Chief Executive Officer shall award grants to eligible nursing
39 education programs in such amounts as the Chief Executive Officer
40 determines.

41
42 9. (New section) a. The New Jersey Nursing Emotional Well-
43 Being Institute (NJ-NEW) in the New Jersey Collaborating Center
44 for Nursing shall establish a program of services designed to
45 promote the mental health and well-being of nurses licensed in New
46 Jersey and their families and prevent the psychological and physical
47 sequelae of stress. At a minimum, the program shall:

- 1 (1) encourage all health care facilities in the State that employ
- 2 nurses to access the NJ-NEW Schwartz Rounds program;
- 3 (2) work to make virtual Schwartz rounds available to all nurses
- 4 in the State on at least a monthly basis;
- 5 (3) coordinate with nursing associations, mental health
- 6 associations, and community organizations to facilitate a Statewide
- 7 NJ-NEW well-being hub, which shall comprise learning
- 8 collaboratives that offer strategies to prevent work-related stress
- 9 from causing physical and emotional symptoms, provide
- 10 educational resources, and provide consultation services for health
- 11 care organizations in New Jersey to promote emotional well-being
- 12 for nurses and their families;
- 13 (4) provide stress first aid training or establish partnerships with
- 14 stress first aid training providers to support health care
- 15 organizations in promoting emotional well-being and resiliency for
- 16 nurses and their families;
- 17 (5) establish an online repository of Statewide emotional well-
- 18 being and mental health resources and referrals for nurses and their
- 19 families; and
- 20 (6) establish any other evidence-based initiatives that meet the
- 21 ongoing emotional well-being and mental health needs of nurses
- 22 and their families.
- 23 b. In addition to the amounts appropriated pursuant to section 4
- 24 of this act, there shall be annually appropriated from the General
- 25 Fund to NJ-NEW such sums as are sufficient to support the
- 26 operations of NJ-NEW and the initiatives undertaken by NJ-NEW
- 27 pursuant to this act.
- 28
- 29 10. (New section) a. The New Jersey Nursing Emotional Well-
- 30 Being Institute (NJ-NEW) in the New Jersey Collaborating Center
- 31 for Nursing and the University Behavioral HealthCare of Rutgers,
- 32 the State University of New Jersey, or another entity, shall provide
- 33 a toll-free nurse-to-nurse peer support helpline, or a similar
- 34 helpline.
- 35 b. The helpline shall be accessible 24 hours a day, seven days
- 36 per week, and shall respond to calls from nurses and their family
- 37 members. The staff of the helpline shall provide counselling and
- 38 support to callers, shall seek to identify the nurses and their family
- 39 members who should be referred for further support and counseling
- 40 services, and shall provide informational resources. The helpline
- 41 shall partner with the Statewide NJ-NEW well-being hub
- 42 established pursuant to paragraph (3) of subsection a. of section 9 of
- 43 this act to provide callers with resources and skill sets to prevent
- 44 situations that cause stress and the psychological and physical
- 45 sequelae of stress.
- 46 c. The operators of the helpline shall be trained by University
- 47 Behavioral Healthcare of Rutgers, the State University of New

1 Jersey and, to the greatest extent possible, shall be current or former
2 nurses who are:

3 (1) familiar with post-traumatic stress disorder and the
4 emotional and psychological tensions, depressions, and anxieties
5 unique to nurses and their family members; or

6 (2) trained to provide counseling services involving marriage
7 and family life, substance abuse, personal stress management, and
8 other emotional or psychological disorders or conditions which may
9 be likely to adversely affect the personal and profession-related
10 well-being of nurses and their family members.

11 d. The NJ-NEW and University Behavioral HealthCare of
12 Rutgers, the State University of New Jersey, or another entity, shall
13 provide for the confidentiality of the names of the callers, the
14 information discussed, and any referrals for further peer support or
15 counseling; provided, however, that the NJ-NEW and Rutgers, the
16 State University of New Jersey, or another entity, may establish
17 guidelines providing for the tracking of any person who exhibits a
18 severe emotional or psychological disorder or condition which the
19 operator handling the call reasonably believes might result in harm
20 to the nurse, family member, or any other person.

21 e. University Behavioral HealthCare of Rutgers, the State
22 University of New Jersey, or another entity, shall maintain a list of
23 credentialed resources and behavioral health care providers
24 throughout the State, and shall provide case management services to
25 ensure that nurses and their family members receive ongoing
26 counseling and a continuum of care in New Jersey. The continuum
27 of services shall utilize applicable State and federal guidelines
28 while providing ongoing peer support.

29

30 11. (New section) a. The New Jersey Board of Nursing shall
31 require each licensed practical nurse, registered nurse, advanced
32 practice nurse, and homemaker-home health aide licensed or
33 certified in the State, as a condition of initial licensure or
34 certification or renewal of a license or certification, to complete a
35 survey, which survey shall include the following information:

36 (1) the type of license or certificate held by the person and the
37 status of that license or certificate;

38 (2) the person's demographic information, including age, race,
39 ethnicity, and gender;

40 (3) the person's educational background;

41 (4) the person's employment status;

42 (5) the person's primary employment setting;

43 (6) the type of position held by the person;

44 (7) in the case of a nurse, whether the nurse is licensed under
45 the multistate Nurse Licensure Compact and whether, during the
46 course of the prior year, the nurse provided professional services in
47 other states under the compact; and

48 (8) such other information as the board may require.

1 b. The New Jersey Board of Nursing shall require each school
2 that offers a nurse training program, including programs that offer a
3 diploma, an associate's degree, a baccalaureate degree, or an
4 advanced degree in nursing as well as licensed practical nursing
5 programs, and each homemaker-home health aide training program,
6 to complete an annual survey, no later than July 1 of each year,
7 which survey shall include the following information:

8 (1) the number of applicants rejected by the school or program;

9 (2) the total number of available slots at the school or program;

10 (3) the total number of qualified candidates who applied for the
11 school or program;

12 (4) the total number of current enrollees in the school or
13 program;

14 (5) graduation rates from the school or program;

15 (6) in the case of nursing schools, passage rates for the National
16 Council Licensure Examination;

17 (7) demographic information concerning current students and
18 faculty, including data concerning age, race, ethnicity, and gender;

19 (8) faculty vacancy rates;

20 (9) the total number of faculty employed;

21 (10) the educational background of faculty members; and

22 (11) such other information as the board may require.

23 c. Until the first day of the 19th month next following the
24 enactment of P.L. , c. (C.) (pending before the Legislature
25 as this bill, the Department of Health shall require each certified
26 nurse aide licensed in the State to complete a survey as a condition
27 of initial certification or renewal of a certification; thereafter, the
28 New Jersey Board of Nursing shall require each certified nurse aide
29 licensed in the State to complete a survey as a condition of initial
30 certification or renewal of a certification. The survey required
31 pursuant to this subsection shall include the following information:

32 (1) the certification status of the person;

33 (2) the person's demographic information, including age, race,
34 ethnicity, and gender;

35 (3) the person's educational background;

36 (4) the person's employment status;

37 (5) the person's primary employment setting;

38 (6) the type of position held by the person; and

39 (7) such other information as the department may require.

40 d. Until the first day of the 19th month next following the
41 enactment of P.L. , c. (C.) (pending before the Legislature
42 as this bill, the Department of Health shall require certified nurse
43 aide training programs to complete an annual survey; thereafter, the
44 New Jersey Board of Nursing shall require certified nurse aide
45 training programs to complete an annual survey. The survey
46 required pursuant to this subsection shall be completed no later than
47 July 1 of each year, and shall include the following information:

48 (1) the number of applicants rejected by the program;

- 1 (2) the total number of available slots at the program;
 - 2 (3) the total number of qualified candidates who applied for the
 - 3 program;
 - 4 (4) the total number of current enrollees in the program;
 - 5 (5) graduation rates from the program;
 - 6 (6) demographic information concerning current students and
 - 7 faculty, including data concerning age, race, ethnicity, and gender;
 - 8 (7) faculty vacancy rates;
 - 9 (8) the total number of faculty employed;
 - 10 (9) the educational background of faculty members; and
 - 11 (10) such other information as the department may require.
- 12 e. (1) The New Jersey Board of Nursing shall develop and
- 13 annually review the surveys required pursuant to subsections a. and
- 14 b. of this section in collaboration with the New Jersey Collaborating
- 15 Center for Nursing.
- 16 (2) Until the first day of the 19th month next following the
- 17 enactment of P.L. , c. (C.) (pending before the Legislature
- 18 as this bill, the Department of Health shall develop and annually
- 19 review the surveys required pursuant to subsections c. and d. of this
- 20 section in collaboration with the New Jersey Collaborating Center
- 21 for Nursing; thereafter the New Jersey Board of Nursing shall
- 22 develop and annually review the surveys required pursuant to
- 23 subsections c. and d. of this section in collaboration with the New
- 24 Jersey Collaborating Center for Nursing.
- 25 f. (1) The New Jersey Board of Nursing shall ensure
- 26 compliance with the survey requirements of subsection a. of this
- 27 section, and shall take appropriate disciplinary action against a
- 28 nurse or homemaker-home health aide who fails to complete the
- 29 annual survey. A survey shall not be deemed complete unless all
- 30 survey questions are answered.
- 31 (2) The New Jersey Collaborating Center for Nursing shall be
- 32 responsible for distributing the survey required pursuant to
- 33 subsection b. of this section, and, commencing on the first day of
- 34 the 19th month next following the effective date of
- 35 P.L. , c. (C.) (pending before the Legislature as this bill),
- 36 the survey required pursuant to subsection d. of this section, based
- 37 on a list of schools that provide nurse training programs, a list of
- 38 homemaker-home health aide training programs, and, commencing
- 39 on the first day of the 19th month next following the effective date
- 40 of P.L. , c. (C.) (pending before the Legislature as this
- 41 bill), a list of certified nurse aide training programs, which lists
- 42 shall be furnished to the New Jersey Collaborating Center for
- 43 Nursing by the New Jersey Board of Nursing. The New Jersey
- 44 Collaborating Center for Nursing shall notify the New Jersey Board
- 45 of Nursing of any school or training program that fails to complete
- 46 a survey distributed by the New Jersey Collaborating Center for
- 47 Nursing pursuant to this paragraph, and the New Jersey Board of
- 48 Nursing shall take appropriate disciplinary action against the school

1 or training program. A survey shall not be deemed complete unless
2 all survey questions are answered.

3 (3) Until the first day of the 19th month next following the
4 enactment of P.L. , c. (C.) (pending before the Legislature
5 as this bill, the Department of Health shall be responsible for
6 distributing and ensuring compliance with the survey requirements
7 set forth in subsections c. and d. of this section, and shall take
8 appropriate disciplinary action against a certified nurse aide or
9 certified nurse aide training program that fails to complete the
10 survey; thereafter, the New Jersey Board of Nursing shall be
11 responsible for distributing and ensuring compliance with the
12 survey requirements set forth in subsection c. of this section, and
13 shall take appropriate disciplinary action against a certified nurse
14 aide that fails to complete the survey. A survey shall not be deemed
15 complete unless all survey questions are answered.

16 g. (1) The New Jersey Board of Nursing shall transmit de-
17 identified survey data collected pursuant to subsection a. of this
18 section to the New Jersey Collaborating Center for Nursing and,
19 commencing on the first day of the 19th month next following the
20 effective date of P.L. , c. (C.) (pending before the
21 Legislature as this bill), shall transmit de-identified survey data
22 collected pursuant to subsection c. of this section to the New Jersey
23 Collaborating Center for Nursing. The New Jersey Collaborating
24 Center for Nursing shall analyze data transmitted to it pursuant to
25 this paragraph and produce an annual aggregate report of the data,
26 which shall be made available on the websites of the New Jersey
27 Board of Nursing and the New Jersey Collaborating Center for
28 Nursing.

29 (2) The New Jersey Collaborating Center for Nursing shall
30 analyze the survey data collected pursuant to subsection b. of this
31 section and, commencing on the first day of the 19th month next
32 following the effective date of P.L. , c. (C.) (pending
33 before the Legislature as this bill), the survey data collected
34 pursuant to subsection d. of this section, and shall produce an
35 annual aggregate report of the data, which shall be made available
36 on the Internet websites of the New Jersey Board of Nursing and the
37 New Jersey Collaborating Center for Nursing.

38 (3) Until the first day of the 19th month next following the
39 enactment of P.L. , c. (C.) (pending before the Legislature
40 as this bill, the Department of Health shall analyze the survey data
41 collected pursuant to subsections c. and d. of this section and shall
42 produce an annual aggregate report of the data, which shall be made
43 available on the Internet websites of the department and the New
44 Jersey Collaborating Center for Nursing. Until the first day of the
45 19th month next following the enactment of P.L. , c. (C.)
46 (pending before the Legislature as this bill, the department may
47 contract with the New Jersey Collaborating Center for Nursing to
48 analyze the survey data and produce the annual aggregate report

1 required pursuant to this paragraph, in which case the department
2 shall provide the New Jersey Collaborating Center for Nursing with
3 five percent of the total certified nurse aide certification fees
4 collected for the current reporting period. The New Jersey
5 Collaborating Center for Nursing may not charge the department
6 any additional compensation for analyzing the survey data and
7 producing the aggregate report above the fee authorized under this
8 paragraph.

9
10 12. Section 2 of P.L.2005, c.83 (C.26:2H-12.2b) is amended to
11 read as follows:

12 2. a. A health care entity shall notify the division in writing if
13 a health care professional who is employed by, under contract to
14 render professional services to, or has privileges granted by, that
15 health care entity, or who provides such services pursuant to an
16 agreement with a health care services firm or staffing registry:

17 (1) for reasons relating to the health care professional's
18 impairment, incompetency, or professional misconduct, which
19 incompetency or professional misconduct relates adversely to
20 patient care or safety: (a) has full or partial privileges summarily or
21 temporarily revoked or suspended, or permanently reduced,
22 suspended, or revoked; (b) has been removed from the list of
23 eligible employees of a health services firm or staffing registry; (c)
24 has been discharged from the staff; or (d) has had a contract to
25 render professional services terminated or rescinded;

26 (2) has conditions or limitations placed on the exercise of
27 clinical privileges or practice within the health care entity for
28 reasons relating to the health care professional's impairment,
29 incompetency, or professional misconduct or, which incompetency
30 or professional misconduct relates adversely to patient care or
31 safety, including, but not limited to, second opinion requirements,
32 non-routine concurrent or retrospective review of admissions or
33 care, non-routine supervision by one or more members of the staff,
34 or the completion of remedial education or training;

35 (3) voluntarily resigns from the staff if: (a) the health care entity
36 is reviewing the health care professional's patient care or reviewing
37 whether, based upon its reasonable belief, the health care
38 professional's conduct demonstrates an impairment or incompetence
39 or is unprofessional, which incompetence or unprofessional conduct
40 relates adversely to patient care or safety; or (b) the health care
41 entity, through any member of the medical or administrative staff,
42 has expressed an intention to do such a review;

43 (4) voluntarily relinquishes any partial privilege or authorization
44 to perform a specific procedure if: (a) the health care entity is
45 reviewing the health care professional's patient care or reviewing
46 whether, based upon its reasonable belief, the health care
47 professional's conduct demonstrates an impairment or incompetence
48 or is unprofessional, which incompetence or unprofessional conduct

1 relates adversely to patient care or safety; or (b) the health care
2 entity, through any member of the medical or administrative staff,
3 has expressed an intention to do such a review;

4 (5) while under, or subsequent to, a review by the health care
5 entity of the health care professional's patient care or professional
6 conduct is granted a leave of absence for reasons relating to a
7 physical, mental, or emotional condition or drug or alcohol use
8 which impairs the health care professional's ability to practice with
9 reasonable skill and safety, except that no report is required for
10 pregnancy-related leaves of absence or if the health care
11 professional has sought assistance from a professional assistance or
12 intervention program approved or designated by the division or a
13 board to provide confidential oversight of the health care
14 professional and is following the treatment regimen or monitoring
15 as that program requires; or

16 (6) is a party to a medical malpractice liability suit, to which the
17 health care entity is also a party, and in which there is a settlement,
18 judgment, or arbitration award.

19 As used in this subsection, incompetence, professional
20 misconduct, and unprofessional conduct shall not include personal
21 conduct, such as tardiness, insubordination, or other similar
22 behavior, which does not relate to patient care or safety.

23 b. A health care entity shall notify the division in writing if it is
24 in possession of information that indicates that a health care
25 professional has failed to comply with a request to seek assistance
26 from a professional assistance or intervention program approved or
27 designated by the division or a board to provide confidential
28 oversight of the health care professional, or has failed to follow the
29 treatment regimen or monitoring program required by that program
30 to assure that the health care professional's physical, mental, or
31 emotional condition or drug or alcohol use does not impair the
32 health care professional's ability to practice with reasonable skill
33 and safety.

34 c. A health care entity shall notify the division in writing if any
35 health care professional who has been the subject of a report
36 pursuant to this section, has had conditions or limitations on the
37 exercise of clinical privileges or practice within the health care
38 entity altered, or privileges restored, or has resumed exercising
39 clinical privileges that had been voluntarily relinquished.

40 d. In the case of a health care professional who is providing
41 services at a health care entity pursuant to an agreement with a
42 health care services firm or staffing agency and is the subject of a
43 notice pursuant to this section, the health care entity shall, when it
44 submits a notice to the division concerning that health care
45 professional, provide a copy of the notice to the health care services
46 firm or staffing agency.

47 e. The form of notification shall be prescribed by the
48 Commissioner of Health, in consultation with the Commissioner of

1 Human Services in the case of psychiatric facilities and
2 developmental centers, and shall contain such information as may
3 be required by the division and shall be made within seven days of
4 the date of the action, settlement, judgment, or award.

5 f. A health care entity which fails to provide such notice to the
6 division or fails to cooperate with a request for information by the
7 division, the board or the Medical Practitioner Review Panel
8 established pursuant to section 8 of P.L.1989, c.300 (C.45:9-19.8)
9 shall be subject to such penalties as the Department of Health may
10 determine pursuant to sections 13 and 14 of P.L.1971, c.136
11 (C.26:2H-13 and 26:2H-14).

12 g. A health care entity, or any employee thereof, which
13 provides information to the division, the board, the Medical
14 Practitioner Review Panel, a health care services firm or staffing
15 agency, or the Department of Health, in good faith and without
16 malice, regarding a health care professional pursuant to the
17 provisions of this section or section 3 of P.L.1989, c.300 (C.26:2H-
18 12.2a), is not liable for civil damages in any cause of action arising
19 out of the provision or reporting of the information.

20 h. A health care entity shall provide the health care
21 professional who is the subject of a notice pursuant to paragraphs
22 (1), (2), (4), and (5) of subsection a. of this section and subsection
23 c. of this section with a copy of the notice provided to the division,
24 when the health care entity submits the notice to the division.

25 i. For the purposes of this section, section 3 of P.L.1989, c.300
26 (C.26:2H-12.2a) and section 15 of P.L.2005, c.83 (C.26:2H-12.2c):

27 "Board" means a professional and occupational licensing board
28 within the Division of Consumer Affairs in the Department of Law
29 and Public Safety which licenses or otherwise authorizes a health
30 care professional to practice a health care profession.

31 "Division" means the Division of Consumer Affairs in the
32 Department of Law and Public Safety.

33 "Health care entity" means a health care facility licensed
34 pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.), a health
35 maintenance organization authorized to operate pursuant to
36 P.L.1973, c.337 (C.26:2J-1 et seq.), a carrier which offers a
37 managed care plan regulated pursuant to P.L.1997, c.192 (C.26:2S-
38 1 et seq.), a State or county psychiatric hospital, a State
39 developmental center, a staffing registry, and a home care services
40 agency as defined in section 1 of P.L.1947, c.262 (C.45:11-23).

41 "Health care professional" means a person licensed or otherwise
42 authorized pursuant to Title 45 or Title 52 of the Revised Statutes to
43 practice a health care profession that is regulated by the Director of
44 the Division of Consumer Affairs or by one of the following boards:
45 the State Board of Medical Examiners, the New Jersey Board of
46 Nursing, the New Jersey State Board of Dentistry, the New Jersey
47 State Board of Optometrists, the New Jersey State Board of
48 Pharmacy, the State Board of Chiropractic Examiners, the

1 Acupuncture Examining Board, the State Board of Physical
2 Therapy, the State Board of Respiratory Care, the Orthotics and
3 Prosthetics Board of Examiners, the State Board of Psychological
4 Examiners, the State Board of Social Work Examiners, the State
5 Board of Veterinary Medical Examiners, the State Board of
6 Examiners of Ophthalmic Dispensers and Ophthalmic Technicians,
7 the Audiology and Speech-Language Pathology Advisory
8 Committee, the State Board of Marriage and Family Therapy
9 Examiners, the Occupational Therapy Advisory Council and the
10 Certified Psychoanalysts Advisory Committee. "Health care
11 professional" also includes [a nurse aide and] a personal care
12 assistant certified by the Department of Health.
13 (cf: P.L.2012, c.17, s.179)
14

15 13. Section 2 of P.L.1997, c.100 (C.26:2H-83) is amended to
16 read as follows:

17 2. a. The Department of Health shall not issue a [nurse aide
18 or] personal care assistant certification to any applicant, except on a
19 conditional basis as provided for in subsection d. of section 3 of
20 P.L.1997, c.100 (C.26:2H-84), unless the Commissioner of Health
21 first determines, consistent with the requirements of sections 2
22 through 6 of P.L.1997, c.100 (C.26:2H-83 through 87), that no
23 criminal history record information exists on file in the Federal
24 Bureau of Investigation, Identification Division, or in the State
25 Bureau of Identification in the Division of State Police, which
26 would disqualify that person from being certified. A [nurse aide or]
27 personal care assistant certified by the department prior to the
28 effective date of P.L.2000, c.20 upon whom a criminal history
29 record background check has not been conducted pursuant to
30 sections 2 through 6 of P.L.1997, c.100 (C.26:2H-83 through 87),
31 shall be required to undergo that criminal history record background
32 check as a condition of that individual's initial recertification
33 following the effective date of P.L.2000, c.20.

34 In addition, a follow-up criminal history record background
35 check of federal records shall be conducted at least once every two
36 years as a condition of recertification for every certified [nurse aide
37 and] personal care assistant; except that the commissioner, in lieu
38 of conducting follow-up criminal history record background checks
39 for purposes of recertification, may provide for an alternative means
40 of determining whether a certified [nurse aide or] personal care
41 assistant has been convicted of a crime or disorderly persons
42 offense which would disqualify that person from certification,
43 including, but not limited to, a match of a person's Social Security
44 number or other identifying information with records of criminal
45 proceedings in this and other states. If the commissioner elects to
46 implement this alternative means of determining whether a certified
47 [nurse aide or] personal care assistant has been convicted of a

1 crime or disorderly persons offense which would disqualify that
2 person from certification, the commissioner shall report to the
3 Governor and the Legislature prior to its implementation on the
4 projected costs and procedures to be followed with respect to its
5 implementation and setting forth the rationale therefor.

6 A person shall be disqualified from certification if that person's
7 criminal history record background check reveals a record of
8 conviction of any of the following crimes and offenses:

9 (1) In New Jersey, any crime or disorderly persons offense:

10 (a) involving danger to the person, meaning those crimes and
11 disorderly persons offenses set forth in N.J.S.2C:11-1 et seq.,
12 N.J.S.2C:12-1 et seq., N.J.S.2C:13-1 et seq., N.J.S.2C:14-1 et seq.
13 or N.J.S.2C:15-1 et seq.; or

14 (b) against the family, children, or incompetents, meaning those
15 crimes and disorderly persons offenses set forth in N.J.S.2C:24-1 et
16 seq.; or

17 (c) involving theft as set forth in chapter 20 of Title 2C of the
18 New Jersey Statutes; or

19 (d) involving any controlled dangerous substance or controlled
20 substance analog as set forth in chapter 35 of Title 2C of the New
21 Jersey Statutes except paragraph (4) of subsection a. of
22 N.J.S.2C:35-10.

23 (2) In any other state or jurisdiction, of conduct which, if
24 committed in New Jersey, would constitute any of the crimes or
25 disorderly persons offenses described in paragraph (1) of this
26 subsection.

27 b. Notwithstanding the provisions of subsection a. of this
28 section, no person shall be disqualified from certification on the
29 basis of any conviction disclosed by a criminal history record
30 background check performed pursuant to sections 2 through 6 and
31 section 14 of P.L.1997, c.100 (C.26:2H-83 through 87 and C.53:1-
32 20.9a) if the person has affirmatively demonstrated to the
33 Commissioner of Health clear and convincing evidence of the
34 person's rehabilitation. In determining whether a person has
35 affirmatively demonstrated rehabilitation, the following factors
36 shall be considered:

37 (1) the nature and responsibility of the position which the
38 convicted person would hold, has held or currently holds, as the
39 case may be;

40 (2) the nature and seriousness of the offense;

41 (3) the circumstances under which the offense occurred;

42 (4) the date of the offense;

43 (5) the age of the person when the offense was committed;

44 (6) whether the offense was an isolated or repeated incident;

45 (7) any social conditions which may have contributed to the
46 offense; and

47 (8) any evidence of rehabilitation, including good conduct in
48 prison or in the community, counseling or psychiatric treatment

1 received, acquisition of additional academic or vocational
2 schooling, successful participation in correctional work-release
3 programs, or the recommendation of those who have had the person
4 under their supervision.

5 c. If a person subject to the provisions of sections 2 through 6
6 of P.L.1997, c.100 (C.26:2H-83 through 87) refuses to consent to,
7 or cooperate in, the securing of a criminal history record
8 background check, the commissioner shall, as applicable:

9 (1) not issue a **【nurse aide or】** personal care assistant
10 certification and shall notify the applicant, and the applicant's
11 employer if the applicant is conditionally employed as provided in
12 subsection d. of section 3 of P.L.1997, c.100 (C.26:2H-84) or the
13 applicant's prospective employer if known, of that denial; or

14 (2) revoke the person's current **【nurse aide or】** personal care
15 assistant certification and notify the person, and the person's
16 employer, if known, of that revocation.

17 (cf: P.L.2012, c.17, s.240)

18

19 14. Section 3 of P.L.1997, c.100 (C.26:2H-84) is amended to
20 read as follows:

21 3. a. An applicant for certification, or a certified **【nurse aide**
22 **or】** personal care assistant who is required to undergo a criminal
23 history record background check pursuant to section 2 of P.L.1997,
24 c.100 (C.26:2H-83), shall submit to the Commissioner of Health
25 that individual's name, address, and fingerprints taken on standard
26 fingerprint cards by a State or municipal law enforcement agency.
27 The commissioner is authorized to exchange fingerprint data with
28 and receive criminal history record information from the Federal
29 Bureau of Investigation and the Division of State Police for use in
30 making the determinations required by sections 2 through 6 of
31 P.L.1997, c.100 (C.26:2H-83 through 87).

32 b. Upon receipt of the criminal history record information for a
33 person from the Federal Bureau of Investigation or the Division of
34 State Police, the commissioner shall immediately notify, in writing,
35 the applicant, and the applicant's employer if the applicant is
36 conditionally employed as provided in subsection d. of this section
37 or the applicant's prospective employer if known, or a certified
38 **【nurse aide or】** personal care assistant who is required to undergo a
39 criminal history record background check pursuant to section 2 of
40 P.L.1997, c.100 (C.26:2H-83) and that person's employer, as
41 applicable, of the person's qualification or disqualification for
42 certification under sections 2 through 6 of P.L.1997, c.100
43 (C.26:2H-83 through 87). If the person is disqualified, the
44 conviction or convictions which constitute the basis for the
45 disqualification shall be identified in the notice to the person, but
46 shall not be identified in the notice to the person's employer or
47 prospective employer.

1 c. The person who is the subject of the background check shall
2 have 30 days from the date of the written notice of disqualification
3 to petition the commissioner for a hearing on the accuracy of the
4 person's criminal history record information or to establish the
5 person's rehabilitation under subsection b. of section 2 of P.L.1997,
6 c.100 (C.26:2H-83). The commissioner shall notify the person's
7 employer or prospective employer of the person's petition for a
8 hearing within five days following the receipt of the petition from
9 the person. Upon the issuance of a final decision upon a petition to
10 the commissioner pursuant to this subsection, the commissioner
11 shall notify the person and the person's employer or prospective
12 employer as to whether the person remains disqualified from
13 certification under sections 2 through 6 of P.L.1997, c.100
14 (C.26:2H-83 through 87).

15 d. An applicant for certification may be issued conditional
16 certification and may be employed as **【a nurse aide or】** a personal
17 care assistant conditionally for a period not to exceed 60 days,
18 pending completion of a criminal history record background check
19 required under sections 2 through 6 of P.L.1997, c.100 (C.26:2H-83
20 through 87) by the Division of State Police in the Department of
21 Law and Public Safety based upon an examination of its own files
22 in accordance with section 14 of P.L.1997, c.100 (C.53:1-20.9a),
23 and for an additional period not to exceed 60 days pending
24 completion of a criminal history record background check by
25 federal authorities as arranged for by the Division of State Police
26 pursuant to section 14 of P.L.1997, c.100 (C.53:1-20.9a), if the
27 person submits to the commissioner a sworn statement attesting that
28 the person has not been convicted of any crime or disorderly
29 persons offense as described in section 2 of P.L.1997, c.100
30 (C.26:2H-83). A person who submits a false sworn statement shall
31 be disqualified from certification as **【a nurse aide or】** a personal
32 care assistant, as the case may be, and shall not have an opportunity
33 to establish rehabilitation pursuant to subsection b. of section 2 of
34 P.L.1997, c.100 (C.26:2H-83).

35 A conditionally employed person, or an employed person
36 certified as **【a nurse aide or】** a personal care assistant, who disputes
37 the accuracy of the criminal history record information and who
38 files a petition requesting a hearing pursuant to subsection c. of this
39 section may remain employed by that person's employer until the
40 commissioner rules on the person's petition but, pending the
41 commissioner's ruling, the employer shall not permit the person to
42 have unsupervised contact with patients, residents, or clients, as the
43 case may be, who are 60 years of age or older.

44 e. (1) A licensed health care facility or other entity that has
45 received an application from or conditionally employs an applicant
46 for **【nurse aide or】** personal care assistant certification, or employs
47 a certified **【nurse aide or】** personal care assistant, and:

1 (a) receives notice from the Commissioner of Health that the
2 applicant or certified [nurse aide or] personal care assistant, as
3 applicable, has been determined by the commissioner to be
4 disqualified from certification as a [nurse aide or] personal care
5 assistant pursuant to sections 2 through 6 of P.L.1997, c.100
6 (C.26:2H-83 through 87); or

7 (b) terminates its employment of a conditionally employed
8 applicant for [nurse aide or] personal care assistant certification or
9 a certified [nurse aide or] personal care assistant because the
10 person was disqualified from employment at the health care facility
11 or other entity on the basis of a conviction of a crime or disorderly
12 persons offense as described in section 2 of P.L.1997, c.100
13 (C.26:2H-83) after commencing employment at the health care
14 facility or other entity;

15 shall be immune from liability for disclosing that disqualification
16 or termination in good faith to another licensed health care facility
17 or other entity that is qualified by statute or regulation to employ
18 the person as a [nurse aide or] personal care assistant.

19 (2) A licensed health care facility or other entity which discloses
20 information pursuant to paragraph (1) of this subsection shall be
21 presumed to be acting in good faith unless it is shown by clear and
22 convincing evidence that the health care facility or other entity
23 acted with actual malice toward the person who is the subject of the
24 information.

25 f. (1) A licensed health care facility or other entity, upon
26 receiving notice from the Commissioner of Health that a person
27 employed by it as a [nurse aide or] personal care assistant,
28 including a conditionally employed person, has been convicted of a
29 crime or disorderly persons offense as described in section 2 of
30 P.L.1997, c.100 (C.26:2H-83) after commencing employment at the
31 health care facility or other entity, shall:

32 (a) immediately terminate the person's employment as a [nurse
33 aide or] personal care assistant; and

34 (b) report information about the termination to the
35 Commissioner of Health in a manner prescribed by the
36 commissioner, who shall thereupon deem the person to be
37 disqualified from certification as a [nurse aide or] personal care
38 assistant, subject to the provisions of paragraph (3) of this
39 subsection.

40 (2) A licensed health care facility or other entity shall be
41 immune from liability for any actions taken in good faith pursuant
42 to paragraph (1) of this subsection and shall be presumed to be
43 acting in good faith unless it is shown by clear and convincing
44 evidence that the health care facility or other entity acted with
45 actual malice toward the employee.

46 (3) The person terminated from employment pursuant to
47 paragraph (1) of this subsection shall have 30 days from the date of

1 the termination to petition the commissioner for a hearing on the
2 accuracy of the information about the conviction reported to the
3 commissioner or to establish why the person should not be
4 terminated from employment, and disqualified from certification, as
5 a **【nurse aide or】** personal care assistant. The commissioner shall
6 notify the person's employer of the person's petition for a hearing
7 within five days following the receipt of the petition from the
8 person. Upon the issuance of a final decision upon a petition to the
9 commissioner pursuant to this paragraph, the commissioner shall
10 notify the person and the person's employer as to whether:

11 (a) the person is to be reinstated in the person's employment as a
12 **【nurse aide or】** personal care assistant and retain the person's
13 certification; or

14 (b) the person's termination from employment as a **【nurse aide**
15 **or】** personal care assistant stands and the person remains
16 disqualified from certification.

17 g. The commissioner shall provide for a registry of all persons
18 who have successfully completed all training and competency
19 evaluation requirements for certification as a **【nurse aide or】**
20 personal care assistant and shall provide for the inclusion in the
21 registry of information about the disqualification of any person
22 from certification pursuant to sections 2 through 6 of P.L.1997,
23 c.100 (C.26:2H-83 through 87); for which purposes, the
24 commissioner may use an existing registry established pursuant to
25 statute or regulation, subject to the requirements of federal law.
26 The registry shall include the specific documented findings
27 constituting the basis for that disqualification, except that the
28 information shall indicate that the person was convicted of a crime
29 or disorderly persons offense as described in section 2 of P.L.1997,
30 c.100 (C.26:2H-83), but shall not identify the conviction or
31 convictions which constitute the basis for the disqualification.

32 (cf: P.L.2012, c.17, s.241)

33

34 15. Section 4 of P.L.1997, c.100 (C.26:2H-85) is amended to
35 read as follows:

36 4. The Department of Health shall assume the cost of the
37 criminal history record background check conducted on an
38 applicant for **【nurse aide or】** personal care assistant certification, or
39 a certified **【nurse aide or】** personal care assistant, as the case may
40 be, pursuant to sections 2 through 6 and section 14 of P.L.1997,
41 c.100 (C.26:2H-83 through 87 and C.53:1-20.9a).

42 (cf: P.L.2012, c.17, s.242)

43

44 16. Section 1 of P.L.2002, c.104 (C.45:1-28) is amended to read
45 as follows:

46 1. As used in this act:

1 "Applicant" means an applicant for the licensure or other
2 authorization to engage in a health care profession.

3 "Board" means a professional and occupational licensing board
4 within the Division of Consumer Affairs in the Department of Law
5 and Public Safety.

6 "Director" means the Director of the Division of Consumer
7 Affairs in the Department of Law and Public Safety.

8 "Division" means the Division of Consumer Affairs in the
9 Department of Law and Public Safety.

10 "Health care professional" means a health care professional who
11 is licensed or otherwise authorized, pursuant to Title 45 or Title 52
12 of the Revised Statutes, to practice a health care profession that is
13 regulated by one of the following boards or by the Director of the
14 Division of Consumer Affairs: the State Board of Medical
15 Examiners, the New Jersey Board of Nursing, the New Jersey State
16 Board of Dentistry, the New Jersey State Board of Optometrists, the
17 New Jersey State Board of Pharmacy, the State Board of
18 Chiropractic Examiners, the Acupuncture Examining Board, the
19 State Board of Physical Therapy, the State Board of Respiratory
20 Care, the Orthotics and Prosthetics Board of Examiners, the State
21 Board of Psychological Examiners, the State Board of Social Work
22 Examiners, the State Board of Veterinary Medical Examiners, the
23 State Board of Examiners of Ophthalmic Dispensers and
24 Ophthalmic Technicians, the Audiology and Speech-Language
25 Pathology Advisory Committee, the State Board of Marriage and
26 Family Therapy Examiners, the Occupational Therapy Advisory
27 Council, the Certified Psychoanalysts Advisory Committee or the
28 State Board of Polysomnography.

29 Health care professional shall not include a [nurse aide or]
30 personal care assistant who is required to undergo a criminal history
31 record background check pursuant to section 2 of P.L.1997, c.100
32 (C.26:2H-83) [or] , a homemaker-home health aide who is required
33 to undergo a criminal history record background check pursuant to
34 section 7 of P.L.1997, c.100 (C.45:11-24.3) or a certified nurse aide
35 who is required to undergo a criminal history record background
36 check pursuant to sections 19 and 20 of P.L. , c. (C.)
37 (pending before the Legislature as this bill).

38 "Licensee" means an individual who has been issued a license or
39 other authorization to practice a health care profession.
40 (cf: P.L.2005, c.244, s.17)

41
42 17. Section 2 of P.L.1993, c.249 (C.52:27D-407) is amended to
43 read as follows:

44 2. As used in this act:

45 "Abuse" means the willful infliction of physical pain, injury or
46 mental anguish, unreasonable confinement, or the willful
47 deprivation of services which are necessary to maintain a person's
48 physical and mental health.

1 "Caretaker" means a person who has assumed the responsibility
2 for the care of a vulnerable adult as a result of family relationship or
3 who has assumed responsibility for the care of a vulnerable adult
4 voluntarily, by contract, or by order of a court of competent
5 jurisdiction, whether or not they reside together.

6 "Commissioner" means the Commissioner of Human Services.

7 "Community setting" means a private residence or any
8 noninstitutional setting in which a person may reside alone or with
9 others, but shall not include residential health care facilities,
10 rooming houses or boarding homes or any other facility or living
11 arrangement subject to licensure by, operated by, or under contract
12 with, a State department or agency.

13 "County adult protective services provider" means a county
14 Board of Social Services or other public or nonprofit agency with
15 experience as a New Jersey provider of protective services for
16 adults, designated by the county and approved by the commissioner.
17 The county adult protective services provider receives reports made
18 pursuant to this act, maintains pertinent records and provides,
19 arranges, or recommends protective services.

20 "County director" means the director of a county adult protective
21 services provider.

22 "Department" means the Department of Human Services.

23 "Emergency medical technician" means a person trained in basic
24 life support services as defined in section 1 of P.L.1985, c.351
25 (C.26:2K-21) and who is certified by the Department of Health to
26 provide that level of care.

27 "Exploitation" means the act or process of illegally or improperly
28 using a person or his resources for another person's profit or
29 advantage.

30 "Firefighter" means a paid or volunteer firefighter.

31 "Health care professional" means a health care professional who
32 is licensed or otherwise authorized, pursuant to Title 45 or Title 52
33 of the Revised Statutes, to practice a health care profession that is
34 regulated by one of the following boards or by the Director of the
35 Division of Consumer Affairs: the State Board of Medical
36 Examiners, the New Jersey Board of Nursing, the New Jersey State
37 Board of Dentistry, the New Jersey State Board of Optometrists, the
38 New Jersey State Board of Pharmacy, the State Board of
39 Chiropractic Examiners, the Acupuncture Examining Board, the
40 State Board of Physical Therapy, the State Board of Respiratory
41 Care, the Orthotics and Prosthetics Board of Examiners, the State
42 Board of Psychological Examiners, the State Board of Social Work
43 Examiners, the State Board of Examiners of Ophthalmic Dispensers
44 and Ophthalmic Technicians, the Audiology and Speech-Language
45 Pathology Advisory Committee, the State Board of Marriage and
46 Family Therapy Examiners, the Occupational Therapy Advisory
47 Council, the Certified Psychoanalysts Advisory Committee, and the
48 State Board of Polysomnography. "Health care professional" also

1 means a **【nurse aide or】** personal care assistant who is certified by
2 the Department of Health.

3 "Neglect" means an act or failure to act by a vulnerable adult or
4 his caretaker which results in the inadequate provision of care or
5 services necessary to maintain the physical and mental health of the
6 vulnerable adult, and which places the vulnerable adult in a
7 situation which can result in serious injury or which is life-
8 threatening.

9 "Protective services" means voluntary or court-ordered social,
10 legal, financial, medical or psychiatric services necessary to
11 safeguard a vulnerable adult's rights and resources, and to protect a
12 vulnerable adult from abuse, neglect or exploitation. Protective
13 services include, but are not limited to: evaluating the need for
14 services, providing or arranging for appropriate services, obtaining
15 financial benefits to which a person is entitled, and arranging for
16 guardianship and other legal actions.

17 "Vulnerable adult" means a person 18 years of age or older who
18 resides in a community setting and who, because of a physical or
19 mental illness, disability or deficiency, lacks sufficient
20 understanding or capacity to make, communicate, or carry out
21 decisions concerning his well-being and is the subject of abuse,
22 neglect or exploitation. A person shall not be deemed to be the
23 subject of abuse, neglect or exploitation or in need of protective
24 services for the sole reason that the person is being furnished
25 nonmedical remedial treatment by spiritual means through prayer
26 alone or in accordance with a recognized religious method of
27 healing in lieu of medical treatment, and in accordance with the
28 tenets and practices of the person's established religious tradition.
29 (cf: P.L.2012, c.17, c.424)

30

31 18. Section 14 of P.L.1997, c.100 (C.53:1-20.9a) is amended to
32 read as follows:

33 14. a. In accordance with the provisions of sections 2 through 6
34 and sections 7 through 13 of P.L.1997, c.100 (C.26:2H-83 through
35 87 and C.45:11-24.3 through 24.9) and P.L.2002, c.104 (C.45:1-28
36 et al.), the Division of State Police in the Department of Law and
37 Public Safety shall conduct a criminal history record background
38 check, including a name and fingerprint identification check, of:

39 (1) each applicant for **【nurse aide or】** personal care assistant
40 certification submitted to the Department of Health **【and Senior**
41 **Services】** and of each applicant for homemaker-home health aide
42 and nurse aide submitted to the New Jersey Board of Nursing in the
43 Division of Consumer Affairs;

44 (2) each **【nurse aide or】** personal care assistant certified by the
45 Department of Health **【and Senior Services】** and each homemaker-
46 home health aide and nurse aide certified by the New Jersey Board

1 of Nursing, as required pursuant to P.L.1997, c.100 (C.26:2H-83 et
2 al.); and

3 (3) each applicant for licensure or other authorization to engage
4 in a health care profession who is required to undergo a criminal
5 history record background check pursuant to P.L.2002, c.104
6 (C.45:1-28 et al.).

7 b. For the purpose of conducting a criminal history record
8 background check pursuant to subsection a. of this section, the
9 Division of State Police shall examine its own files and arrange for
10 a similar examination by federal authorities. The division shall
11 immediately forward the information obtained as a result of
12 conducting the check to: the Commissioner of Health **【and Senior**
13 **Services】**, in the case of an applicant for **【nurse aide or】** personal
14 care assistant certification or a certified **【nurse aide or】** personal
15 care assistant; the New Jersey Board of Nursing in the Division of
16 Consumer Affairs in the Department of Law and Public Safety, in
17 the case of an applicant for homemaker-home health aide or nurse
18 aide certification or a certified homemaker-home health aide or
19 nurse aide; and the Director of the Division of Consumer Affairs in
20 the Department of Law and Public Safety, in the case of an
21 applicant for licensure or other authorization to practice as a health
22 care professional as defined in section 1 of P.L.2002, c.104 (C.45:1-
23 28).

24 (cf: P.L.2002, c.104, s.5)

25

26 19. (New section) a. The New Jersey Board of Nursing shall
27 not issue a nurse aide certification to any applicant, except on a
28 conditional basis as provided for in subsection d. of section 20 of
29 P.L. , c. (C.) (pending before the Legislature as this bill),
30 unless the board first determines, consistent with the requirements
31 of sections 19 through 22 of P.L. , c. (C.) (pending before
32 the Legislature as this bill), that no criminal history record
33 information exists on file in the Federal Bureau of Investigation,
34 Identification Division, or in the State Bureau of Identification in
35 the Division of State Police, which would disqualify that person
36 from being certified.

37 In addition, a follow-up criminal history record background
38 check of federal records shall be conducted at least once every two
39 years as a condition of recertification for every certified nurse aide;
40 except that the board, in lieu of conducting follow-up criminal
41 history record background checks for purposes of recertification,
42 may provide for an alternative means of determining whether a
43 certified nurse aide has been convicted of a crime or disorderly
44 persons offense which would disqualify that person from
45 certification, including, but not limited to, a match of a person's
46 Social Security number or other identifying information with
47 records of criminal proceedings in this and other states. If the board
48 elects to implement this alternative means of determining whether a

1 certified nurse aide has been convicted of a crime or disorderly
2 persons offense which would disqualify that person from
3 certification, the board shall report to the Governor and the
4 Legislature prior to its implementation on the projected costs and
5 procedures to be followed with respect to its implementation and
6 setting forth the rationale therefor.

7 A person shall be disqualified from certification if that person's
8 criminal history record background check reveals a record of
9 conviction of any of the following crimes and offenses:

10 (1) In New Jersey, any crime or disorderly persons offense:

11 (a) involving danger to the person, meaning those crimes and
12 disorderly persons offenses set forth in N.J.S.2C:11-1 et seq.,
13 N.J.S.2C:12-1 et seq., N.J.S.2C:13-1 et seq., N.J.S.2C:14-1 et seq.
14 or N.J.S.2C:15-1 et seq.; or

15 (b) against the family, children, or incompetents, meaning those
16 crimes and disorderly persons offenses set forth in N.J.S.2C:24-1 et
17 seq.; or

18 (c) involving theft as set forth in chapter 20 of Title 2C of the
19 New Jersey Statutes; or

20 (d) involving any controlled dangerous substance or controlled
21 substance analog as set forth in chapter 35 of Title 2C of the New
22 Jersey Statutes except paragraph (4) of subsection a. of
23 N.J.S.2C:35-10.

24 (2) In any other state or jurisdiction, of conduct which, if
25 committed in New Jersey, would constitute any of the crimes or
26 disorderly persons offenses described in paragraph (1) of this
27 subsection.

28 b. Notwithstanding the provisions of subsection a. of this
29 section, no person shall be disqualified from certification on the
30 basis of any conviction disclosed by a criminal history record
31 background check performed pursuant to sections 19 through 22 of
32 P.L. , c. (C.) (pending before the Legislature as this bill)
33 and section 14 of P.L.1997, c.100 (C.53:1-20.9a) if the person has
34 affirmatively demonstrated to the board clear and convincing
35 evidence of the person's rehabilitation. In determining whether a
36 person has affirmatively demonstrated rehabilitation, the following
37 factors shall be considered:

38 (1) the nature and responsibility of the position which the
39 convicted person would hold, has held or currently holds, as the
40 case may be;

41 (2) the nature and seriousness of the offense;

42 (3) the circumstances under which the offense occurred;

43 (4) the date of the offense;

44 (5) the age of the person when the offense was committed;

45 (6) whether the offense was an isolated or repeated incident;

46 (7) any social conditions which may have contributed to the
47 offense; and

1 (8) any evidence of rehabilitation, including good conduct in
2 prison or in the community, counseling or psychiatric treatment
3 received, acquisition of additional academic or vocational
4 schooling, successful participation in correctional work-release
5 programs, or the recommendation of those who have had the person
6 under their supervision.

7 c. If a person subject to the provisions of sections 19 through
8 22 of P.L. , c. (C.) (pending before the Legislature as this
9 bill) refuses to consent to, or cooperate in, the securing of a
10 criminal history record background check, the board shall, as
11 applicable:

12 (1) not issue a nurse aide certification and shall notify the
13 applicant, and the applicant's employer if the applicant is
14 conditionally employed as provided in subsection d. of section 20 of
15 P.L. , c. (C.) (pending before the Legislature as this bill)
16 or the applicant's prospective employer if known, of that denial; or

17 (2) revoke the person's current nurse aide certification and
18 notify the person, and the person's employer, if known, of that
19 revocation.
20

21 20. (New section) a. An applicant for certification, or a
22 certified nurse aide who is required to undergo a criminal history
23 record background check pursuant to section 19 of
24 P.L. , c. (C.) (pending before the Legislature as this bill),
25 shall submit to the board that individual's name, address, and
26 fingerprints taken on standard fingerprint cards by a State or
27 municipal law enforcement agency. The board is authorized to
28 exchange fingerprint data with and receive criminal history record
29 information from the Federal Bureau of Investigation and the
30 Division of State Police for use in making the determinations
31 required by sections 19 through 22 of P.L. , c. (C.)
32 (pending before the Legislature as this bill).

33 b. Upon receipt of the criminal history record information for a
34 person from the Federal Bureau of Investigation or the Division of
35 State Police, the board shall immediately notify, in writing, the
36 applicant, and the applicant's employer if the applicant is
37 conditionally employed as provided in subsection d. of this section
38 or the applicant's prospective employer if known, or a certified
39 nurse aide who is required to undergo a criminal history record
40 background check pursuant to section 19 of P.L. , c. (C.)
41 (pending before the Legislature as this bill) and that person's
42 employer, as applicable, of the person's qualification or
43 disqualification for certification under sections 19 through 22 of
44 P.L. , c. (C.) (pending before the Legislature as this bill). If
45 the person is disqualified, the conviction or convictions which
46 constitute the basis for the disqualification shall be identified in the
47 notice to the person, but shall not be identified in the notice to the
48 person's employer or prospective employer.

1 c. The person who is the subject of the background check shall
2 have 30 days from the date of the written notice of disqualification
3 to petition the board for a hearing on the accuracy of the person's
4 criminal history record information or to establish the person's
5 rehabilitation under subsection b. of section 19
6 of P.L. , c. (C.) (pending before the Legislature as this
7 bill). The board shall notify the person's employer or prospective
8 employer of the person's petition for a hearing within five days
9 following the receipt of the petition from the person. Upon the
10 issuance of a final decision upon a petition to the board pursuant to
11 this subsection, the board shall notify the person and the person's
12 employer or prospective employer as to whether the person remains
13 disqualified from certification under sections 19 through 22 of
14 P.L. , c. (C.) (pending before the Legislature).

15 d. An applicant for certification may be issued conditional
16 certification and may be employed as a nurse aide conditionally for
17 a period not to exceed 60 days, pending completion of a criminal
18 history record background check required under sections 19 through
19 22 of P.L. , c. (C.) (pending before the Legislature) by the
20 Division of State Police in the Department of Law and Public
21 Safety based upon an examination of its own files in accordance
22 with section 14 of P.L.1997, c.100 (C.53:1-20.9a), and for an
23 additional period not to exceed 60 days pending completion of a
24 criminal history record background check by federal authorities as
25 arranged for by the Division of State Police pursuant to section 14
26 of P.L.1997, c.100 (C.53:1-20.9a), if the person submits to the
27 board a sworn statement attesting that the person has not been
28 convicted of any crime or disorderly persons offense as described in
29 section 19 of P.L. , c. (C.) (pending before the Legislature
30 as this bill). A person who submits a false sworn statement shall be
31 disqualified from certification as a nurse aide, as the case may be,
32 and shall not have an opportunity to establish rehabilitation
33 pursuant to subsection b. of section 19 of P.L. , c. (C.)
34 (pending before the Legislature as this bill).

35 A conditionally employed person, or an employed person
36 certified as a nurse aide, who disputes the accuracy of the criminal
37 history record information and who files a petition requesting a
38 hearing pursuant to subsection c. of this section may remain
39 employed by that person's employer until the board rules on the
40 person's petition but, pending the board's ruling, the employer shall
41 not permit the person to have unsupervised contact with patients,
42 residents, or clients, as the case may be, who are 60 years of age or
43 older.

44 e. (1) A licensed health care facility or other entity that has
45 received an application from or conditionally employs an applicant
46 for nurse aide certification, or employs a certified nurse aide, shall
47 be immune from liability for disclosing that disqualification or
48 termination in good faith to another licensed health care facility or

1 other entity that is qualified by statute or regulation to employ the
2 person as a nurse aide, provided that the licensed health care facility
3 or other entity:

4 (a) receives notice from the board that the applicant or certified
5 nurse aide, as applicable, has been determined by the board to be
6 disqualified from certification as a nurse aide pursuant to sections
7 19 through 22 of P.L. , c. (C.) (pending before the
8 Legislature); or

9 (b) terminates its employment of a conditionally employed
10 applicant for nurse aide certification or a certified nurse aide
11 because the person was disqualified from employment at the health
12 care facility or other entity on the basis of a conviction of a crime or
13 disorderly persons offense as described in section 19 of P.L. , c.
14 (C.) (pending before the Legislature as this bill) after
15 commencing employment at the health care facility or other entity.

16 (2) A licensed health care facility or other entity which discloses
17 information pursuant to paragraph (1) of this subsection shall be
18 presumed to be acting in good faith unless it is shown by clear and
19 convincing evidence that the health care facility or other entity
20 acted with actual malice toward the person who is the subject of the
21 information.

22 f. (1) A licensed health care facility or other entity, upon
23 receiving notice from the board that a person employed by it as a
24 nurse aide, including a conditionally employed person, has been
25 convicted of a crime or disorderly persons offense as described in
26 section 19 of P.L. , c. (C.) (pending before the Legislature
27 as this bill) after commencing employment at the health care facility
28 or other entity, shall:

29 (a) immediately terminate the person's employment as a nurse
30 aide; and

31 (b) report information about the termination to the board in a
32 manner prescribed by the board, who shall thereupon deem the
33 person to be disqualified from certification as a nurse aide, subject
34 to the provisions of paragraph (3) of this subsection.

35 (2) A licensed health care facility or other entity shall be
36 immune from liability for any actions taken in good faith pursuant
37 to paragraph (1) of this subsection and shall be presumed to be
38 acting in good faith unless it is shown by clear and convincing
39 evidence that the health care facility or other entity acted with
40 actual malice toward the employee.

41 (3) The person terminated from employment pursuant to
42 paragraph (1) of this subsection shall have 30 days from the date of
43 the termination to petition the board for a hearing on the accuracy
44 of the information about the conviction reported to the board or to
45 establish why the person should not be terminated from
46 employment, and disqualified from certification, as a nurse aide.
47 The board shall notify the person's employer of the person's petition
48 for a hearing within five days following the receipt of the petition

1 from the person. Upon the issuance of a final decision upon a
2 petition to the board pursuant to this paragraph, the board shall
3 notify the person and the person's employer as to whether:

4 (a) the person is to be reinstated in the person's employment as a
5 nurse aide and retain the person's certification; or

6 (b) the person's termination from employment as a nurse aide
7 stands and the person remains disqualified from certification.

8 g. The board shall provide for a registry of all persons who
9 have successfully completed all training and competency evaluation
10 requirements for certification as a nurse aide and shall provide for
11 the inclusion in the registry of information about the
12 disqualification of any person from certification pursuant to
13 sections 19 through 22 of P.L. , c. (C.) (pending before the
14 Legislature); for which purposes, the board may use an existing
15 registry established pursuant to statute or regulation, subject to the
16 requirements of federal law. The registry shall include the specific
17 documented findings constituting the basis for that disqualification,
18 except that the information shall indicate that the person was
19 convicted of a crime or disorderly persons offense as described in
20 section 19 of P.L. , c. (C.) (pending before the Legislature
21 as this bill), but shall not identify the conviction or convictions
22 which constitute the basis for the disqualification.

23

24 21. (New section) The Department of Law and Public Safety
25 shall assume the cost of the criminal history record background
26 check conducted on an applicant for nurse aide certification, or a
27 certified nurse aide, as the case may be, pursuant to sections 19
28 through 22 of P.L. , c. (C.) (pending before the
29 Legislature) and section 14 of P.L.1997, c.100 (C.53:1-20.9a).

30

31 22. (New section) Any person submitting a false sworn
32 statement pursuant to section 20 of P.L. , c. (C.) (pending
33 before the Legislature as this bill) shall be subject to a fine of not
34 more than \$1,000, which may be assessed by the board.

35

36 23. (New section) An individual certified as a nurse aide by
37 another state or territory of the United States may apply to have that
38 certification entered on the registry established and maintained by
39 the board pursuant to section 20 of P.L. , c. (C.) (pending
40 before the Legislature as this bill), provided that:

41 a. the board receives documentation from the other state or
42 territory that the applicant holds a current, valid certification as a
43 nurse aide in the state or territory;

44 b. the applicant has not been convicted of any crimes and has
45 no documented findings of abuse, neglect, or misappropriation of
46 resident property in the other state or territory;

47 c. the applicant complies with the criminal history record
48 background check requirements set forth under sections 19 through

1 22 of P.L. , c. (C.) (pending before the Legislature as this
2 bill); and

3 d. (1) the applicant has completed within the preceding 24
4 months the amount of continuing education hours required by
5 regulation for a nurse aide; or

6 (2) the applicant has the equivalent of at least two years of full
7 time employment in the other state or territory as a nurse aide and
8 the most recent date of such employment is within the 24-month
9 period immediately preceding the date of the application. The
10 board shall require an individual applying for a certification to be
11 entered on the registry on the basis of work experience pursuant to
12 this paragraph to complete any clinical skills competency
13 examination and any written and oral competency examination the
14 board may require pursuant to regulation, to verify the individual
15 meets New Jersey's training and competency requirements.

16

17 24. (New section) a. As used in this section:

18 "Advanced practice nurse" means a person certified in
19 accordance with the provisions of section 8 or 9 of P.L.1991, c.377
20 (C.45:11-47 or 45:11-48).

21 "Certified nurse midwife" means a midwife licensed by the State
22 Board of Medical Examiners as a certified nurse midwife pursuant
23 to the provisions of P.L.1991, c.97 (C.45:10-17 et al.).

24 "Physician" means a person licensed to practice medicine in New
25 Jersey pursuant to R.S.45:9-1 et seq. or licensed to practice in any
26 one of the United States or its territories, or the District of
27 Columbia.

28 "Physician assistant" means a health professional who meets the
29 qualifications under P.L.1991, c.378 (C.45:9-27.10 et seq.) and
30 holds a current, valid license issued pursuant to section 4 of
31 P.L.1991, c.378 (C.45:9-27.13).

32 "Preceptor" means an individual who is an advanced practice
33 nurse, certified nurse midwife, certified registered nurse anesthetist,
34 physician, physician assistant, or psychologist, who meets the
35 qualifications for precepting under the rules and regulations of the
36 New Jersey Board of Nursing, and who participates in the
37 instructional training of advanced practice nurse, certified nurse
38 midwife, or certified registered nurse anesthetist students.

39 "Preceptorship program" means an organized system of clinical
40 experience that, for the purpose of attaining specified learning
41 objectives, pairs a student enrolled in a nursing education program
42 that is recognized by the New Jersey Board of Nursing with a
43 preceptor.

44 "Psychologist" means a person who is licensed as a psychologist
45 by the New Jersey Board of Psychological Examiners.

46 b. A preceptor shall be allowed a credit against the tax
47 otherwise due for the taxable year under the "New Jersey Gross
48 Income Tax Act," N.J.S.54A:1-1 et seq., in an amount equal to

1 \$1,000 for each advanced practice nurse, certified nurse midwife, or
2 certified registered nurse anesthetist student supervised by the
3 preceptor, during the taxable year, as part of a preceptorship
4 program. The preceptor shall be the primary supervisor of the
5 student for at least 100 clinical hours during the taxable year in
6 order to be eligible for the tax credit allowed pursuant to this
7 section.

8 c. (1) A faculty of record from an accredited school of nursing
9 in New Jersey, or the faculty of record's designee, shall certify the
10 number of students supervised by the preceptor during the taxable
11 year who may be included in the calculation of the tax credit
12 allowed pursuant to this section.

13 (2) The certification form shall include the name of the
14 preceptor, information identifying the school of record and the
15 faculty of record, or the faculty of record's designee, and the
16 number of hours and names of the students whom the preceptor
17 supervised.

18 d. The certification form shall be submitted by the preceptor to
19 the Division of Taxation in the Department of the Treasury for
20 approval by the January 31 next following the completion of the
21 applicable taxable year. The director shall approve all forms that
22 qualify for a tax credit pursuant to this section on a first-come, first-
23 served basis, and notify the preceptor within 45 days of receipt of
24 the preceptor's application of its approval or denial. The value of
25 tax credits approved under this section shall not exceed a
26 cumulative total of \$10 million annually.

27 e. The director shall prescribe the order of priority of the
28 application of the tax credit allowed under this section and any
29 other tax credits allowed by law against the tax otherwise due for
30 the taxable year under N.J.S.54A:1-1 et seq. The amount of the tax
31 credit applied under this section against the tax imposed under
32 N.J.S.54A:1-1 et seq. for the taxable year, together with any other
33 tax credits allowed by law, shall not reduce the tax liability to an
34 amount less than zero, and any unused amount of the tax credit may
35 not be carried forward to any other taxable year.

36

37 25. Section 1 of P.L.2019, c.18 (C.26:2H-87.1) is repealed.

38

39 26. (New section) a. The New Jersey Economic Development
40 Authority, the New Jersey Board of Nursing, and the Department of
41 Health shall adopt rules and regulations, pursuant to the
42 "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et
43 seq.), as shall be necessary to implement the provisions of this act.

44 b. Notwithstanding any provision of the "Administrative
45 Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), to the
46 contrary, the Director of the Division of Taxation in the Department
47 of the Treasury is authorized to adopt immediately upon filing with
48 the Office of Administrative Law such rules and regulations as are

1 necessary to implement the provisions of section 24 of this act. The
2 rules and regulations adopted pursuant to this subsection shall be
3 effective for a period not to exceed 18 months following the date of
4 filing and may thereafter be amended, adopted, or readopted by the
5 director in accordance with the requirements of P.L.1968, c.410
6 (C.52:14B-1 et seq.).
7

8 27. a. There is appropriated from the General Fund to the New
9 Jersey Collaborating Center for Nursing the sum of \$500,000 to
10 effectuate the provisions of sections 1 through 4 of this act.

11 b. There is appropriated from the General Fund to the New
12 Jersey Economic Development Authority the sum of \$25,000,000 to
13 effectuate the purposes of section 8 of this act. The authority shall
14 issue grants in the amount of \$24,500,000 and shall expend no more
15 than \$500,000 for the administrative costs of the program.

16 c. There is appropriated from the General Fund to the New
17 Jersey Nursing Emotional Well-Being Institute in the New Jersey
18 Collaborating Center for Nursing the sum of \$1,200,000 for the
19 purpose of implementing the provisions of sections 9 and 10 of this
20 act. Of this amount, the New Jersey Nursing Emotional Well-Being
21 Institute shall use \$300,000 to support the nurse-to-nurse peer
22 support helpline established pursuant to section 10 of this act.
23

24 28. This act shall take effect immediately, except that sections 1
25 through 4 of this act shall take effect on the first day of the 10th
26 month next following enactment, section 7 of this act shall take
27 effect on the first day of the seventh month next following
28 enactment, section 11 of this act shall remain inoperative until the
29 first July 1 that is at least four months after the date of enactment,
30 and sections 12 through 23 and section 25 of this act shall take
31 effect on the first day of the 19th month next following enactment.
32 The New Jersey Department of Health and New Jersey Board of
33 Nursing may take such anticipatory administrative action in
34 advance of the effective dates of sections 12 through 23 and section
35 25 of this act as shall be necessary for implementation of this act.
36 Section 24 of this act shall apply to taxable years beginning on or
37 after the date of enactment.
38
39

40 STATEMENT
41

42 This bill implements certain measures to support nurses and the
43 nursing workforce, and transfers oversight over certified nurse aides
44 (CNAs) from the Department of Health (DOH) to the New Jersey
45 Board of Nursing, effective on the first day of the 19th month next
46 following the enactment of this bill. Specifically, the bill
47 establishes requirements for the New Jersey Collaborating Center
48 for Nursing (NJCCN) to develop new graduate nursing residency

1 programs; increases State funding for the NJCCN; requires
2 hospitals to establish Nurse Workplace Environment and Staffing
3 Councils; establishes a Nursing School Expansion Grant Program;
4 requires the New Jersey Nursing Emotional Well-Being Institute
5 (NJ-NEW) to establish a program of services and a peer support
6 helpline to promote the mental health and emotional well-being of
7 nurses and their families; establishes annual survey requirements
8 for nurses, homemaker-home health aides (HHAs) and CNAs, as
9 well as for schools that offer nurse training programs and HHA and
10 CNA training programs; and establishes a gross income tax credit
11 for preceptors of certain nursing students.

12

13 Graduate Nursing Residency Programs

14

15 This bill establishes a program through which facilities for acute
16 care, long-term care, public health, ambulatory care, home care and
17 hospice providers, and other qualifying facilities or providers may
18 apply to receive financial, material and technical support from the
19 New Jersey Collaborating Center for Nursing (“NJCCN”) to
20 implement a residency program for licensed practical nurses and
21 registered professional nurses, or one of these professions. To
22 manage the operations of the program, the bill appropriates
23 \$500,000 to NJCCN.

24 The NJCCN is to appoint an advisory committee of stakeholders
25 for consultation to effectuate the purposes of the bill. Among the
26 stakeholders to be appointed are two NJCCN representatives; one
27 representative of the New Jersey Board of Nursing who is either a
28 licensed practical nurse or a registered professional nurse; one
29 licensed practical nurse or registered professional nurse
30 representing a unionized facility; representatives of various health
31 care facility and provider associations; and two representatives of
32 different academic nursing programs. The bill grants authority to
33 the NJCCN to adjust membership of the advisory committee upon
34 periodic review of the needs of residency programs for licensed
35 practical nurses and registered professional nurses.

36 The NJCCN is to consult with the advisory committee to 1)
37 establish and update, as necessary, requirements for a residency
38 program and 2) establish criteria for eligibility of facilities and
39 providers to participate in the program created in accordance with
40 the bill. Requirements for a residency program are to include, at a
41 minimum: 1) a 12-month timeline for a residency; 2) a full-time
42 schedule for residents; 3) support for residents by a preceptor or
43 mentor; and 4) collection of data by the facility or provider to send
44 to the NJCCN regarding the number of individuals who completed a
45 residency program with the facility or provider and remained at the
46 facility or with the provider after residency completion for full-time
47 employment.

1 To participate in the NJCCN program, facilities and providers
2 are to file an application that includes information on 1) the
3 number of spots to be offered in the facility or provider's residency
4 program; 2) the type of facility or provider seeking approval; and 3)
5 whether the facility or provider's residency program is newly
6 established or being updated. Approval of an application will be
7 made on a first-come, first-serve basis, with priority given to long-
8 term care facilities and home care providers. Upon approval of an
9 application, the New Jersey Board of Nursing will provide funding
10 to the NJCCN to offer the financial, material and technical support
11 to the approved facility or provider, in an amount determined based
12 on various criteria, including, but not limited to, the information
13 submitted in the application on the number of spots in a residency
14 program, the type of facility, and if the residency program is new or
15 being updated. The bill directs that at no time is the New Jersey
16 Board of Nursing to allocate an amount exceeding \$4 million
17 annually to the NJCCN for the financial, material and technical
18 support to facilities and providers participating in the program
19 created in the bill.

20 Lastly, a biannual report currently required of the NJCCN to
21 submit to the Governor and Legislature is to now include various
22 data on the residency programs established for licensed practical
23 nurses and registered professional nurses.

24

25 New Jersey Collaborating Center for Nursing Funding

26

27 The bill amends current law to provide that an amount equal to at
28 least \$515,000 of the initial and renewal licensing fees charged by
29 the New Jersey Board of Nursing for professional and practical
30 nurses is dedicated to funding, and annually appropriated to, the
31 NJCCN. Under current law, five percent of the initial and renewal
32 licensing fees charged by the board are dedicated to funding, and
33 annually appropriated to, the NJCCN. Under this bill, the NJCCN
34 will annually receive five percent, or \$515,000, whichever amount
35 is greater.

36

37 Nurse Workplace Environment and Staffing Council Program

38

39 The bill requires the Department of Health to require each
40 hospital in this State, as a condition of licensure, to establish a
41 Nurse Workplace Environment and Staffing Council, either by
42 establishing a new council or assigning the functions of the council
43 to a similar existing entity within the hospital.

44 Each council will serve the purpose of:

45 (1) providing nurses with representation on matters concerning
46 the establishment of healthy work environments and human
47 resource allocation;

48 (2) creating a forum of participatory leadership; and

1 (3) supporting the equal participation of nurses and hospital
2 management in hospital decisions affecting nurses. The bill
3 requires that at least 51 percent of the members of each council will
4 be registered nurses that spend at least 50 percent of work time in
5 direct patient care. Each council will contain a sufficient amount of
6 members to provide adequate representation of all the nurses
7 working in the hospital. Each council will have a Chief Nursing
8 Officer and a direct care nurse who will serve as the co-chairs of the
9 council. The selection of the registered nurses will be according to
10 the collective bargaining agreement, if there is one in effect at the
11 hospital. If there is no applicable collective bargaining agreement,
12 the members of the council who are registered nurses will be
13 selected by their peers. The members of the council who are
14 hospital administrative staff will be appointed by each council's
15 Chief Nursing Officer.

16 Participation in the council by a hospital employee will be on
17 scheduled work time and compensated at the appropriate rate of
18 pay. Council members will be relieved of all other work duties
19 during meetings of the council. Each council member will be
20 required to complete the curriculum provided by the Organization
21 of Nurse Leaders of New Jersey Nursing Workplace Environment
22 Commission program or a similar process defined in a collective
23 bargaining agreement.

24 Each council will develop an annual plan concerning nurse
25 staffing and the creation of a positive work environment for nurses
26 within the hospital. The plan will be based on the needs of patients
27 and be used as a primary component of the staffing budget. Each
28 council will provide the annual plan to the Chief Nursing Officer
29 for budget planning.

30 The plan will:

31 (a) not diminish other standards contained in State or federal
32 law and rules, or the terms of an applicable collective bargaining
33 agreement, if any, between the hospital and a representative of the
34 nursing staff; and

35 (b) provide for exemptions for some or all requirements of the
36 plan during a state of emergency, as defined in section 23 of
37 P.L.2011, c.19 (C.5:12-45.3), if the hospital is requested or
38 expected to provide an exceptional level of emergency or other
39 medical services.

40 The Department of Health will be responsible for ensuring that
41 each council is in compliance and will review the plan as necessary.

42

43 Nursing Education Program Grants

44

45 The bill establishes the Nursing School Expansion Grant
46 Program, which will be administered by the New Jersey Economic
47 Development Authority. Under the bill, the program will provide
48 grants to eligible nursing education programs in the State to

1 increase their capacity and improve the supply of the nursing
2 workforce. The bill also appropriates \$25 million from the General
3 Fund to the authority for the bill's purposes.

4 Under the bill, an eligible nursing education program may submit
5 an application for grant funding through the program to the Chief
6 Executive Officer. An application is required to include
7 information and data, in such form and in such manner as is
8 required by the Chief Executive Officer, on:

9 (1) the enrollment and graduation rates for the three academic
10 years preceding the date of the application;

11 (2) the projected plan to increase enrollment and graduation
12 targets;

13 (3) the demographic profile of current students, faculty, and
14 staff and specific plans to increase the diversity of the nursing
15 workforce;

16 (4) any plans for faculty expansions in order to meet the needs
17 of an increased student body;

18 (5) any partnerships, connections, or pathways between licensed
19 practical nursing programs, diploma or certificate programs,
20 associate's degree programs, baccalaureate degree programs, and
21 graduate level programs in nursing and nursing education;

22 (6) student pass rates for examinations administered by the
23 National Council of State Boards of Nursing; and

24 (7) such other information as the Chief Executive Officer may
25 require.

26 The bill directs the Chief Executive Officer, in consultation with
27 the New Jersey Collaborating Center for Nursing, to develop
28 criteria for the evaluation of applications for grants. Based upon
29 the criteria developed, and within the limit of available
30 appropriations, the Chief Executive Officer will award grants to
31 eligible nursing education programs in such amounts as the officer
32 determines.

33 The bill directs the authority to issue grants in the amount of
34 \$24,500,000 and provides that no more than \$500,000 may be
35 expended by the authority for the administrative costs of the
36 program.

37

38 Nurse Emotional Well-Being and Mental Health Support

39

40 The bill requires the New Jersey Nursing Emotional Well-Being
41 Institute (NJ-NEW) in the NJCCN to establish a program of
42 services designed to promote the mental health and emotional well-
43 being of nurses, as well as to provide a nurse-to-nurse peer support
44 helpline.

45 Specifically, NJ-NEW will be required to establish a program of
46 services designed to promote the mental health and well-being of
47 nurses licensed in New Jersey and their families and prevent the

1 psychological and physical sequelae of stress. At a minimum, the
2 program will:

3 (1) encourage all health care facilities in the State that employ
4 nurses to access the NJ-NEW Schwartz Rounds program;

5 (2) work to make virtual Schwartz rounds available to all nurses
6 in the State on at least a monthly basis;

7 (3) coordinate with nursing associations, mental health
8 associations, and community organizations to facilitate a Statewide
9 NJ-NEW well-being hub, which will comprise learning
10 collaboratives that offer strategies to prevent work-related stress
11 from causing physical and emotional symptoms, provide
12 educational resources, and provide consultation services for health
13 care organizations in New Jersey to promote emotional well-being
14 for nurses and their families;

15 (4) provide stress first aid training or establish partnerships with
16 stress first aid training providers to support health care
17 organizations in promoting emotional well-being and resiliency for
18 nurses and their families;

19 (5) establish an online repository of Statewide emotional well-
20 being and mental health resources and referrals for nurses and their
21 families; and

22 (6) establish any other evidence-based initiatives that meet the
23 ongoing emotional well-being and mental health needs of nurses
24 and their families.

25 The bill additionally requires NJ-NEW and the University
26 Behavioral HealthCare of Rutgers, the State University of New
27 Jersey, or another entity, to provide a toll-free nurse-to-nurse peer
28 support helpline, or a similar helpline. The helpline is to be
29 accessible 24 hours a day, seven days per week, and respond to
30 calls from nurses and their family members. The staff of the
31 helpline will provide counselling and support to callers, seek to
32 identify the nurses and their family members who should be
33 referred for further support and counseling services, and provide
34 informational resources. The helpline is to partner with the
35 Statewide NJ-NEW well-being hub established under the bill to
36 provide callers with resources and skill sets to prevent situations
37 that cause stress and the psychological and physical sequelae of
38 stress.

39 The operators of the helpline are to be trained by University
40 Behavioral Healthcare of Rutgers, the State University of New
41 Jersey and, to the greatest extent possible, be current or former
42 nurses who are:

43 (1) familiar with post-traumatic stress disorder and the
44 emotional and psychological tensions, depressions, and anxieties
45 unique to nurses and their family members; or

46 (2) trained to provide counseling services involving marriage
47 and family life, substance abuse, personal stress management, and
48 other emotional or psychological disorders or conditions which may

1 be likely to adversely affect the personal and profession-related
2 well-being of nurses and their family members.

3 NJ-NEW and University Behavioral HealthCare of Rutgers, the
4 State University of New Jersey, or another entity, are to provide for
5 the confidentiality of the names of the callers, the information
6 discussed, and any referrals for further peer support or counseling;
7 provided, however, that NJ-NEW and Rutgers, the State University
8 of New Jersey, or another entity, may establish guidelines providing
9 for the tracking of any person who exhibits a severe emotional or
10 psychological disorder or condition which the operator handling the
11 call reasonably believes might result in harm to the nurse, family
12 member, or any other person.

13 University Behavioral HealthCare of Rutgers, the State
14 University of New Jersey, or another entity, will maintain a list of
15 credentialed resources and behavioral health care providers
16 throughout the State, and provide case management services to
17 ensure that nurses and their family members receive ongoing
18 counseling and a continuum of care in New Jersey. The continuum
19 of services will be required to utilize applicable State and federal
20 guidelines while providing ongoing peer support.

21 The bill appropriates from the General Fund to NJ-NEW the sum
22 of \$1,200,000 for the purpose of implementing the provisions of the
23 bill. Of this amount, NJ-NEW will be required to use \$300,000 to
24 support the nurse-to-nurse peer support helpline. The bill directs
25 that there be annually appropriated to NJ-NEW from the General
26 Fund such sums as are sufficient to support the operations of NJ-
27 NEW and the initiatives undertaken by NJ-NEW pursuant to the
28 bill.

29

30 Workforce and Training Program Survey Requirements

31

32 The bill codifies certain existing surveys for nurses and creates
33 new surveys for homemaker-home health aides (HHAs) and CNAs,
34 as well as for schools that offer nurse training programs and HHA
35 and CNA training programs.

36 Specifically, the survey for nurses, HHAs, and CNAs will solicit
37 information concerning: 1) the person's licensure or certification
38 status; 2) the person's demographic information, including age,
39 race, ethnicity, and gender; 3) the person's educational background;
40 4) the person's employment status; 5) the person's primary
41 employment setting; 6) the type of position held by the person; and
42 any other information as may be required. Nurses will additionally
43 be asked whether the nurse is licensed under the multistate Nurse
44 Licensure Compact and whether, during the course of the prior year,
45 the nurse provided professional services in other states under the
46 compact. The survey is to be completed by the professional in
47 connection with the professional's initial licensure or certification

1 and in connection with the renewal of the professional's license or
2 certification.

3 The survey for schools that offer training programs for nurses
4 will include programs that offer a diploma, an associate's degree, a
5 baccalaureate degree, or an advanced degree in nursing, as well as
6 licensed practical nurse training programs.

7 The nurse training program survey and the surveys for HHA and
8 CNA training programs will solicit the following information: 1)
9 the number of applicants rejected by the school or program; 2) the
10 total number of available slots at the school or program; 3) the total
11 number of qualified candidates who applied to the school or
12 program; 4) the total number of current enrollees in the school or
13 program; 5) graduation rates from the school or program; 6) in the
14 case of nursing schools, pass rates for program graduates for the
15 National Council Licensure Examination; 7) demographic
16 information concerning current students and faculty, including data
17 concerning age, race, ethnicity, and gender; 8) faculty vacancy
18 rates; 9) the total number of faculty employed; 10) the educational
19 background of faculty members; and 11) such other information as
20 may be required. The survey is to be completed by the school or
21 training program no later than July 1 of each year.

22 The New Jersey Board of Nursing and the DOH will be required
23 to develop and annually review the surveys required under the bill
24 in collaboration with the New Jersey Collaborating Center for
25 Nursing (NJCCN) until oversight of CNAs transfers to the New
26 Jersey Board of Nursing pursuant to the bill on the first day of the
27 19th month next following the enactment of the bill; thereafter, the
28 New Jersey Board of Nursing will develop and review all the
29 surveys required under the bill.

30 The New Jersey Board of Nursing will ensure compliance with
31 the nurse and HHA survey requirements and, following transfer of
32 oversight of CNAs from the DOH, CNAs and CNA training
33 program survey requirements. Until oversight of CNAs transfers to
34 the New Jersey Board of Nursing, the DOH will ensure compliance
35 with CNA and CNA training program survey requirements. The
36 NJCCN and New Jersey Board of Nursing will ensure compliance
37 with the survey requirements for schools with nurse training
38 programs and HHA training programs and, following transfer of
39 oversight over CNAs from the DOH, CNA training programs. The
40 New Jersey Board of Nursing and DOH will each be required to
41 take appropriate disciplinary action against entities within their
42 respective jurisdictions that fail to complete the survey. A survey
43 will not be deemed complete unless all survey questions are
44 answered.

45 The New Jersey Board of Nursing will transmit de-identified
46 nurse and HHA survey data, and following transfer of oversight of
47 CNAs from the DOH, CNA survey data, to the NJCCN, which will
48 analyze the data and produce an annual aggregate report. The

1 NJCCN will additionally analyze and produce an annual aggregate
2 report of nursing school and HHA training program survey data, as
3 well as CNA training program survey data following transfer of
4 oversight of CNAs from the DOH. Until oversight of CNAs is
5 transferred to the New Jersey Board of Nursing, the DOH will be
6 required to analyze CNA and CNA training program survey data
7 and produce an annual aggregate report; however, the department
8 will be authorized to contract with the NJCCN to analyze the data
9 and produce the report, the costs of which will be offset by the
10 department furnishing the NJCCN with five percent of CNA
11 licensure fees collected for the current reporting period.

12 The reports of survey data for nurses, HHAs, schools that offer
13 training programs for nurses, and HHA training programs will be
14 made available on the Internet websites of the New Jersey Board of
15 Nursing and the NJCCN. The CNA and CNA training program
16 reports will be made available on the Internet websites of the DOH
17 and the NJCCN until transfer of oversight over CNAs transfers to
18 the New Jersey Board of Nursing, at which point CNA and CNA
19 training program reports will be made available on the Internet
20 websites of the New Jersey Board of Nursing and the NJCCN.

21

22 Transferring Oversight of CNAs to New Jersey Board of Nursing

23

24 This bill modifies current law governing CNAs by transferring
25 the regulation of CNAs from the New Jersey Department of Health
26 to the New Jersey Board of Nursing, which is part of the Division
27 of Consumer Affairs in the Department of Law and Public Safety.
28 Under the bill, references to CNAs in the law currently governing
29 the profession and references to CNAs in law attributing the
30 oversight of CNAs to the Department of Health are removed and
31 substantively identical language on the regulation of CNAs is added
32 under the law governing the New Jersey Board of Nursing or is
33 added to provisions attributing CNA oversight to the board. The
34 board is authorized under the bill to promulgate regulations to
35 effectuate the purposes of the bill.

36

37 Preceptor Tax Credit Program

38

39 The bill establishes a gross income tax credit for preceptors of
40 advanced practice nursing, certified nurse midwife, or certified
41 registered nurse anesthetist students. The tax credit would be equal
42 to \$1,000 per student primarily supervised by the preceptor. The
43 preceptor is required to supervise the student for at least 100
44 clinical hours during the taxable year to be eligible for the credit.
45 The tax credit program is limited to \$10 million annually, and the
46 tax credits awarded under the program are non-refundable and may
47 not be carried forward.

1 As defined in the bill, a preceptor is an individual who is an
2 advanced practice nurse, physician, physician assistant, or
3 psychologist, who meets the qualifications for precepting under the
4 rules and regulations of the New Jersey Board of Nursing, and who

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- 1 participates in the instructional training of advanced practice
- 2 nursing, certified nurse midwife, or certified registered nurse
- 3 anesthetist students.