

HEALTH AND SENIOR SERVICES

SENIOR SERVICES AND HEALTH SYSTEMS BRANCH

HEALTH FACILITIES EVALUATION AND LICENSING DIVISION

OFFICE OF CERTIFICATE OF NEED AND HEALTHCARE FACILITY LICENSURE

Readoption with Amendments: N.J.A.C. 8:43D

Adopted New Rules: N.J.A.C. 8:43D Appendices A and B

Standards for Licensure of Pediatric Community Transitional Homes

Proposed: January 5, 2009 at 41 N.J.R. 47(a).

Adopted: April 6, 2009 by Heather Howard, Commissioner, Department of Health and Senior Services (with the approval of the Health Care Administration Board).

Filed: April 16, 2009 as R.2009 d.161, **without change**.

Authority: N.J.S.A. 26:2H-1 et seq., particularly 26:2H-5.

Effective Date: April 16, 2009, Readoption;
May 18, 2009, Amendments and New Rules.

Expiration Date: April 16, 2014.

Summary of Public Comment and Agency Response:

No comments were received.

Federal Standards Statement

The Department readopts N.J.A.C. 8:43D with amendments and new rules under the authority of N.J.S.A. 26:2H-1 et seq., particularly 26:2H-5, not under the authority of or in order to implement, comply with or participate in any program established under Federal law or standards or under a State statute that incorporates or refers to Federal law, standards or requirements. Therefore, a Federal standards analysis is not required.

Full text of the readopted rules can be found in the New Jersey Administrative Code at N.J.A.C. 8:43D.

Full text of the adopted amendments and new rules follows:

SUBCHAPTER 1. DEFINITIONS AND QUALIFICATIONS

8:43D-1.3 Definitions

The following words and terms, when used in this chapter, shall have the following meanings, unless the context clearly indicates otherwise:

...

"Application for New or Amended Acute Care Facility License (CN-7)" is the form, incorporated herein by reference and set forth at Appendix A, which a pediatric community transitional care home must complete and submit to the Department's Office of Certificate of Need and Healthcare Facility Licensure in order to apply for a license prior to commencement of new or expanded services and which is available through the following methods:

1. A written request to the Office of Certificate of Need and Healthcare Facility Licensure;

2. Electronically at the Department's Division of Health Facilities Evaluation and Licensing webpage at: <http://nj.gov/health/healthfacilities/forms.shtml>; and

3. Electronically at the Department's "Forms" webpage at: <http://web.doh.state.nj.us/apps2/forms/>.

"Application for Waiver (CN-28)" is the form, incorporated herein by reference and set forth at Appendix B, which a facility must complete and submit to the Department in order to request a waiver of the rules established at N.J.A.C. 8:43D and which is available through the following methods:

1. A written request to the Office of Certificate of Need and Healthcare Facility Licensure;

2. Electronically at the Department's Division of Health Facilities Evaluation and Licensing webpage at: <http://nj.gov/health/healthfacilities/forms.shtml>; and

3. Electronically at the Department's "Forms" webpage at: <http://web.doh.state.nj.us/apps2/forms/>.

...

"Commissioner" means the New Jersey State Commissioner of the Department of Health and Senior Services or his or her designee.

...

"Office of Certificate of Need and Healthcare Facility Licensure" means the health care facility licensing unit within the Division of Health Facilities Evaluation and Licensing of the Senior Services and Health Systems Branch of the Department.

1. The contact information is as follows:

i. Mailing Address: Office of Certificate of Need and Healthcare Facility Licensure, Division of Health Facilities Evaluation and Licensing, Department of Health and Senior Services, PO Box 358, Trenton, NJ 08625-0358; and

ii. Telephone number: (609) 292-5960.

"Office of Health Facilities Assessment and Survey" means the survey and inspections unit for acute care services within the Division of Health Facilities Evaluation and Licensing of the Senior Services and Health Systems Branch of the Department.

1. The contact information is as follows:

i. Mailing address: Office of Health Facilities Assessment and Survey, Division of Health Facilities Evaluation and Licensing, Department of Health and Senior Services, PO Box 367, Trenton, NJ 08625-0367; and

ii. Telephone number: (609) 292-9900.

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SUBCHAPTER 2. LICENSURE PROCEDURES

8:43D-2.1 Application for licensure

(a) The Department shall charge a nonrefundable fee of \$ 300.00 plus \$ 10.00 per bed for the filing of an application for licensure of a pediatric community transitional care home and for the annual renewal of the license.

1. Prior to commencement of new or expanded services, a pediatric community transitional care home shall complete and submit to the Department an Application for New or Amended Acute Care Facility License (CN-7), as set forth at Appendix A.

i. The facility shall receive a license for the maximum number of beds approved by the Department.

2. The Department shall mail each licensed facility a License Renewal Form on an annual basis with instructions for completion and submission.

(b)-(c) (No change.)

(d) Each applicant for a license to operate a facility may make an appointment for a preliminary conference at the Department's Office of Certificate of Need and Healthcare Facility Licensure to review all licensing requirements.

(e)-(j) (No change.)

8:43D-2.3 Surveys

(a) When the written application for licensure is approved and the building is ready for occupancy, a survey of the facility by representatives of the Department's Office of Health Facilities Assessment and Survey shall be conducted to determine if the facility adheres to the rules in this chapter.

1. (No change.)

2. The facility shall notify the Department's Office of Health Facilities Assessment and Survey when the deficiencies, if any, have been corrected, and the Office of Health Facilities Assessment and Survey shall schedule one or more resurveys of the facility prior to occupancy and licensure.

(b) (No change.)

8:43D-2.4 License

(a) A license shall be issued for a period of one year or less to a facility when the following conditions are met:

1.-8. (No change.)

9. If requested by the potential licensed operator, a preliminary conference for review of the conditions for licensure and operation (see N.J.A.C. 8:43D-2.1(e)1 through 7) has taken place between the Department's Office of Certificate of Need and Healthcare Facility Licensure and representatives of the facility, who will be advised that the purpose of the conference is to allow the Department to determine the facility's compliance with N.J.S.A. 26:2H-1 et seq., as amended, and the rules pursuant thereto.

(b) No facility shall admit residents to the facility until the facility has the written approval and/or license issued by the Department's Office of Certificate of Need and Healthcare Facility Licensure. Violators of this requirement will be subject to penalties for operating a facility without a license, pursuant to N.J.S.A. 26:2H-14 and N.J.A.C. 8:43E.

(c)-(g) (No change.)

8:43D-2.5 Surrender of license

The facility shall notify each resident, the resident's primary care provider, and any guarantors of payment at least 30 days prior to the voluntary surrender of a license, or as directed under an order of revocation, refusal to renew, or suspension of license. In such cases, the license shall be returned to the Department's Office of Certificate of Need and Healthcare Facility Licensure within seven working days after the voluntary surrender, revocation, non-renewal or suspension of the license.

8:43D-2.6 Waiver

(a) (No change.)

(b) A facility seeking a waiver of these rules shall apply in writing to the Department using the Application for Waiver (CN-28), as set forth at Appendix B.

(c) (No change in text.)

SUBCHAPTER 4. GENERAL REQUIREMENTS

8:43D-4.2 Ownership

(a) The ownership of the facility, as well as the property on which it is located, shall be disclosed to the Department. Any proposed change in ownership shall be reported to the Director of the Department's Office of Certificate of Need and Healthcare Facility Licensure, in writing and in conformity with N.J.A.C. 8:43D-2.4(d)2.

(b)-(d) (No change.)

8:43D-4.3 Submission and availability of documents

The facility shall, upon request, submit any documents, which are required by the rules set forth in this chapter, to the Director of the Department's Office of Certificate of Need and Healthcare Facility Licensure. Additionally, upon request by the Department, the facility shall submit, in writing, data related to utilization, demographics, costs, charges, staffing and other planning and financial data necessary for the Department to evaluate the facility.

8:43D-4.7 Reportable events and notification requirements

(a) The facility shall notify the Department within three hours by telephone at (609) 292-9900 or (800) 792-9770 (after business hours), followed within 72 hours by written confirmation to the Department's Office of Certificate of Need and Healthcare Facility Licensure, of the following:

1.-3. (No change.)

(b)-(c) (No change.)

8:43D-6.1 Resident care policies and procedures

(a) There shall be a resident care policy and procedure committee that shall consist of at least the administrator, director of nursing and the medical director, which shall establish written resident care policies and procedures, which shall be reviewed at least every three years. Each review of the policies and procedures shall be documented. Policies and procedures shall include, but not be limited to, those relating to:

1.-5. (No change.)

6. The prohibition of smoking in the facility in accordance with N.J.S.A. 26:3D-55 et seq.;

7.-11. (No change.)

SUBCHAPTER 14. HOUSEKEEPING, SANITATION, SAFETY AND MAINTENANCE

8:43D-14.3 Resident environment

(a) (No change.)

(b) The following safety conditions shall be met:

1.-6. (No change.)

7. If pets are allowed in the facility, the facility shall provide safeguards to prevent interference in the lives of residents. Guidelines for pet-facilitated therapy may be requested from the Department's Office of Certificate of Need and Healthcare Facility Licensure; and

8. (No change.)

SUBCHAPTER 15. INFECTION PREVENTION AND CONTROL SERVICES

8:43D-15.2 Development of infection control policies and procedures

(a)-(b) (No change.)

(c) The facility shall ensure that residents are immunized in accordance with the 2008 Recommended Childhood and Adolescent Immunization Schedules approved by the Advisory Committee on Immunization Practices, the American Academy of

Pediatrics, and the American Academy of Family Physicians, which is amended yearly, and which is available through written request mailed to the New Jersey Vaccine Preventable Disease Program, Department of Health and Senior Services, PO Box 369, Trenton, NJ 08625-0369, or online at <http://www.cdc.gov/vaccines/recs/schedules/default.htm#child>.

1. Residents entering into or attending a school, preschool or child-care center shall comply with the immunization requirements set forth at N.J.A.C. 8:57-4, Immunization of Pupils in School.

8:43D-15.4 Employee health and resident policies and procedures for infection prevention and control

(a) Tuberculosis screening: The facility shall establish policies and procedures for the detection and control of the transmission of *M. tuberculosis* that includes, but is not limited to, developing a Tuberculosis Infection Exposure Control Plan (TB plan), according to the guidelines set forth in "Guidelines for Preventing the Transmission of *Mycobacterium tuberculosis* in Health-Care Settings, 2005." MMWR. December 30, 2005, volume 54, Number RR-17, p. 1-141, pursuant to the Occupational Safety and Health Act (OSH Act) of 1970, incorporated herein by reference as supplemented and amended.

1. Newly hired employees: The facility shall identify a new employee's baseline status of exposure to *M. tuberculosis*. The facility shall either draw blood for an interferon gamma release assay (IGRA) or administer a two-step Mantoux tuberculin skin test, using five tuberculin units of purified protein derivative, upon the employment of full- and part-time employees, volunteer staff and primary care providers, either salaried by the facility or with clinical privileges to provide medical care at the facility.

i. Employees with an IGRA result of "positive" have latent TB infection, a "negative" result indicates no latent TB infection and employees with an "indeterminate" result shall repeat the IGRA.

ii. Employees with an initial Mantoux skin test result of "negative" (<10 mm of induration or < five mm of induration if the individual is immunosuppressed) shall be administered a second test in one to three weeks.

iii. Employees with either a "positive" IGRA or a "positive" (>=10 mm of induration or >= five mm of induration if the individual is immunosuppressed) Mantoux skin test result following either the first or second test are referred for a medical evaluation to determine whether there is evidence of latent tuberculosis infection or active tuberculosis disease.

(1) (No change.)

(2) The facility shall permit employees with positive IGRA or Mantoux test results

to begin working after they have submitted a written medical clearance to the facility.

2. Exceptions to the requirements in (a)1 above are as follows:

i. (No change.)

ii. Employees who provide documentation of positive IGRA or Mantoux skin test results shall be exempt from screening.

iii. (No change.)

3. Periodic screening of personnel: The facility shall establish policies and procedures for the periodic screening of *M. tuberculosis* in eligible personnel, including, but not limited to, the following testing standards:

i. The facility shall administer an IGRA or Mantoux skin test to all IGRA or tuberculin-negative employees annually at a minimum. Frequency of testing shall be determined by the level of risk assigned by the facility's TB plan.

(1) Medical evaluation, as described in (a)1iii(1) above, is required of any employee with a previously negative test result that, upon follow-up testing, is positive to either the IGRA or Mantoux test.

(2) An asymptomatic employee referred to medical evaluation may continue to work until he or she submits a written medical clearance, but a symptomatic employee cannot return to work until he or she submits a written medical clearance.

4. The facility shall maintain records of employee IGRA or Mantoux test results.

(b)-(l) (No change.)

(m) The facility shall maintain records documenting communicable diseases contracted by employees during employment or residents during their stay in the facility and complete required reporting, as specified at N.J.A.C. 8:57-1.3(a) and (b), 2 or 5, as applicable.

(n) (No change.)

APPENDIX A

"Application for New or Amended Acute Care Facility License (CN-7)" can be found at <http://nj.gov/health/healthfacilities/forms.shtml>

APPENDIX B

"Application for Waiver (CN-28)" can be found at
<http://nj.gov/health/healthfacilities/forms.shtml>