

**ADOPTIONS SECTION**

**HEALTH**

**HEALTH SYSTEMS BRANCH**

**CERTIFICATE OF NEED AND LICENSING DIVISION**

**OFFICE OF CERTIFICATE OF NEED AND HEALTHCARE FACILITY LICENSURE**

**Notice of Readoption**

**Standards for Licensure of Residential Health Care Facilities Located With, and  
Operated By, Licensed Health Care Facilities**

**Readoption with Technical Changes: N.J.A.C. 8:43**

Authority: N.J.S.A. 26:2H-1 et seq., particularly 26:2H-5; and Reorganization Plan No. 002-2005 (March 14, 2005) (see 37 N.J.R. 1105(a)).

Authorized By: Shereef M. Elnahal, MD, MBA, Commissioner, Department of Health  
(with the approval of the Health Care Administration Board).

Effective Dates: February 26, 2019, Readoption;  
August 5, 2019, Technical Changes.

New Expiration Date: February 26, 2026.

**Take notice** that, pursuant to N.J.S.A. 52:14B-5.1, the Commissioner of the Department of Health (Department) hereby readopts N.J.A.C. 8:43, Standards for Licensure of Residential Health Care Facilities Located With, and Operated By, Licensed Health Care Facilities.

The Department originally promulgated N.J.A.C. 8:43 in 1974 as addressing Boarding Homes for Sheltered Care. 6 N.J.R. 396(c); 472(e). Over the years, the Department renamed the chapter several times, from Residential Health Care Facilities

in 1980, 12 N.J.R. 394(b); 518(d), to Standards for Licensure of Residential Health Care Facilities in 1993. 25 N.J.R. 25(a); 4631(a).

On March 14, 2005, Governor Richard J. Codey issued Reorganization Plan No. 002-2005, A Plan to Provide for the Transfer, Consolidation and Reorganization of the Licensing and Regulation of Residential Health Care Facilities from the Department of Health and Senior Services to the Department of Community Affairs (Reorganization Plan) (filed with the Secretary of State on March 15, 2005, and effective May 13, 2005). 37 N.J.R. 1105(a). The Reorganization Plan at § 1 continued, transferred to, and established within the Department of Community Affairs (DCA) all powers, functions, and duties exercised by the Commissioner of Health (Commissioner) relating to residential health care facilities, “except those located with, and operated by, licensed health care facilities.” *Ibid.* A notice of administrative changes, effective December 2, 2008, implemented the Reorganization Plan’s reallocation of jurisdiction between the DCA and the Department, and renamed the chapter as it now exists, as Standards for Licensure of Residential Health Care Facilities Located With, and Operated By, Licensed Health Care Facilities. 41 N.J.R. 225(a).

N.J.A.C. 8:43 was scheduled to expire on February 22, 2010. Executive Order No. 1 (Governor Christie, January 20, 2010) at § 6 operated to extend the chapter expiration date from February 22, 2010, “until the completion of the review of administrative regulations and rules by the Red Tape Review Group, and until such time as the extended regulation or rule is readopted pursuant to the provisions of the ‘Administrative Procedure Act,’ P.L. 1968, c. 410 (C. 52:14B-1 et seq.).”

Subchapter 1 establishes general provisions and qualifications. Subchapter 2

establishes licensure procedures. Subchapter 3 establishes standards addressing physical plant for new construction, renovations, and additions. Subchapter 3A establishes standards addressing physical environment for existing residential health care facilities. Subchapter 4 establishes general requirements. Subchapter 5 establishes administration standards. Subchapter 6 establishes standards for resident care policies. Subchapter 7 establishes standards addressing personal care services. Subchapter 8 establishes standards addressing dietary services and establishes nursing services. Subchapter 9 establishes standards addressing health services. Subchapter 10 establishes medication standards. Subchapter 11 establishes standards addressing recreational services. Subchapter 12 establishes standards addressing emergency services and procedures. Subchapter 13 establishes standards addressing resident records. Subchapter 14 establishes standards addressing resident rights. Subchapter 15 establishes housekeeping, sanitation, safety, and maintenance standards. Subchapter 16 establishes standards addressing infection prevention and control services. Chapter 43 Appendix A contains guidelines addressing inappropriate resident behavior and resident-to-resident abuse. Chapter 43 Appendix B contains a daily food guide. Chapter 43 Appendix C contains recommendations for pet-facilitated therapy in New Jersey institutions.

As the Red Tape Review Group made no specific recommendations to the Department following its review of N.J.A.C. 8:43, the Department is developing a rulemaking to update the chapter in the ordinary course. The Commissioner has reviewed N.J.A.C. 8:43 and determined, with the approval of the Health Care Administration Board, and subject to the technical changes on readoption described

below, that until the Department can finalize the rulemaking that is in development to update the chapter, existing N.J.A.C. 8:43 remains necessary, proper, reasonable, efficient, understandable, and responsive to the purposes for which the Department originally promulgated it, as amended over time, and should be readopted. Therefore, pursuant to N.J.S.A. 52:14B-5.1, N.J.A.C. 8:43 is readopted, with the technical changes described below, and shall continue in effect for seven years.

The Department is making several technical changes upon readoption.

The Department is correcting references throughout the chapter to the Department to reflect the change in the Department's name pursuant to N.J.S.A. 26:1A-2.1.

The Department is correcting references to the names and contact information of units within the Department that have changed following Department reorganization.

The Department is correcting references throughout the chapter to the Office of the Ombudsman for the Institutionalized Elderly to reflect the change in the name of that entity to the State Long-Term Care Ombudsman pursuant to P.L. 2017, c. 131, § 202 (see N.J.S.A. 52:27G-1 et seq., particularly at 52:27G-3) and changes to that entity's contact information.

Throughout the chapter, the Department is updating mailing addresses and other contact information of entities to which the chapter refers.

Throughout the chapter, the Department is updating cross-references to laws, rules, and publications to which the chapter refers.

**Full text** of the technical changes follows (additions indicated in boldface **thus**; deletions indicated in brackets [thus]):

## SUBCHAPTER 1. DEFINITIONS AND QUALIFICATIONS

### 8:43-1.1 Scope

The rules in this chapter pertain to all facilities located with, and operated by, licensed health care facilities that provide residential health care services. These rules constitute the basis for the licensure of such residential health care facilities by the New Jersey [State] Department of Health [and Senior Services].

### 8:43-1.3 Definitions

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

...

“Commissioner” means the [New Jersey State] Commissioner of [Health and Senior Services] **the Department**.

...

“Department” means the New Jersey [State] Department of Health [and Senior Services].

...

“Dietitian” means an individual who is registered or eligible for registration by the Commission on Dietetic Registration [(Office on Dietetic Credentialing, 216 W. Jackson Boulevard-7th Floor), **120 South Riverside Plaza, Suite 2190**, Chicago, [Illinois] **IL [60606-6995] 60606, telephone: (800) 877-1600, website: [www.cdrnet.org](http://www.cdrnet.org)**.

...

#### 8:43-1.4 Qualifications of the administrator of a residential health care facility

(a) The administrator of a residential health care facility shall be in good physical and mental health, of good moral character, and shall exhibit concern for the safety and well-being of residents; and shall:

1. Complete a training course approved by the Department of Human Services, or other equivalent training as approved by the Department [of Health and Senior Services], within one year of his or her employment as administrator;

2. (No change.)

3. Complete an assisted living administrator training course approved by the Department [of Health and Senior] as specified at N.J.A.C. 8:36-1.5(a)3.

(b) (No change.)

### SUBCHAPTER 2. LICENSURE PROCEDURES

#### 8:43-2.1 Application for licensure

(a) Any person, organization, or corporation desiring to operate a residential health care facility shall make application to the Commissioner for a license on forms prescribed by the Department. Such forms may be obtained from:

Director

[Long Term Care Licensing and Certification Unit]

**Office of Certificate of Need and Healthcare Facility Licensure**

Division of [Long Term Care Systems] **Healthcare Facilities Evaluation and Licensing**

New Jersey [State] Department of Health [and Senior Services]

PO Box [367] **358**

Trenton, [New Jersey 08625-0367] **NJ 08625-0385**

[609-633-9034] **(609) 292-5960**

(b) (No change.)

(c) Each applicant for a license to operate a facility shall make an appointment for a preliminary conference at the Department with the [Long Term Care Licensing Program] **Office of Certificate of Need and Healthcare Facility Licensure.**

(d)-(i) (No change.)

8:43-2.2 Newly constructed, renovated, or expanded facilities

(a) Any residential health care facility with a renovation, expansion, or construction program shall submit plans to the Health Care Plan Review Unit, Division of Codes and Standards, New Jersey Department of Community Affairs, PO Box 815, Trenton, [New Jersey] **NJ 08625-0815**, for review and approval prior to the initiation of renovation, expansion, or construction.

(b) (No change.)

(c) A copy of the certificate of occupancy issued by the local municipality shall be submitted to the Health Care Plan Review Unit and to the [Long Term Care Licensing Program] **Office of Certificate of Need and Healthcare Facility Licensure** prior to licensure or approval of newly constructed, renovated, or expanded facilities.

#### 8:43-2.3 Preliminary conference

When a newly constructed facility is approximately 80 percent complete or when an applicant's estimated date of opening is within 30 days, the applicant shall schedule a preliminary conference with the [Long Term Care Licensing Program] **Office of Certificate of Need and Healthcare Facility Licensure** for review of the conditions for licensure and operation.

#### 8:43-2.4 Surveys and license

(a) When the written application for licensure is approved, the fee for filing the application has been received, the preliminary conference has been completed, and the building is ready for occupancy, a survey of the facility by representatives of the [Residential] **Division of Health [Care] Facility Survey [Program] and Field Operations** of the Department shall be conducted, in order to determine if the facility adheres to the rules in this chapter.

1. (No change.)

2. The facility shall notify the [Residential] **Division of Health [Care] Facility Survey [Program] and Field Operations** of the Department when the deficiencies, if any, have been corrected, and the [Residential] **Division of Health [Care] Facility Survey [Program] and Field Operations** shall schedule one or more resurveys of the facility prior to occupancy.

(b) An initial license shall be issued to a facility when the following conditions are met:

1. A preliminary conference for review of the conditions for licensure and operation has taken place between the [Long Term Care Licensing Program] **Office of**

**Certificate of Need and Healthcare Facility Licensure** and representatives of the facility;

2.–8. (No change.)

(c) No facility shall admit residents to the facility until the facility has the approval and/or license issued by the [Long Term Care Licensing Program] **Office of Certificate of Need and Healthcare Facility Licensure** of the Department.

(d)-(i) (No change.)

#### 8:43-2.5 Surrender of license

The facility shall notify each resident, the resident's physician, and any guarantors of payment, the county welfare agency, the Office of the **State Long-Term Care Ombudsman**, and the Supplemental Security Income (SSI) program, Region II Office, if residents are SSI recipients, at least 30 days prior to the voluntary surrender of a license, or as directed under an order of revocation, suspension, or refusal to renew a license. In such cases, the license shall be returned to the [Long Term Care Licensing Program] **Office of Certificate of Need and Healthcare Facility Licensure** of the Department within seven working days after the voluntary surrender, revocation, suspension, or non-renewal of the license.

#### 8:43-2.6 Waiver

(a) (No change.)

(b) A facility seeking a waiver of these rules shall apply in writing to the Director of the [Long Term Care Licensing and Certification Unit] **Office of Certificate of Need and Healthcare Facility Licensure** of the Department.

(c)-(d) (No change.)

#### 8:43-2.9 Special residential health care services

(a) (No change.)

(b) The Department may impose operational standards derived from the plan submitted by the facility and from other licensure rules appropriate to this population as a condition on the issuance of a license. Such conditions shall be subject to the enforcement actions and procedures specified at N.J.A.C. 8:43E, General Licensure Procedures and [Enforcement of Licensure Regulations] **Standards Applicable to All Licensed Facilities.**

### SUBCHAPTER 3. PHYSICAL PLANT FOR NEW CONSTRUCTION, RENOVATIONS, AND ADDITIONS

#### 8:43-3.1 Scope

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

(c) Requests for variations and waivers of physical plant standards may be submitted as follows:

1. (No change.)

2. A request for a waiver of any physical environment standard contained in this chapter, if compliance with same would create a financial hardship, shall be submitted to the Director of the [New Jersey Department of Health and Senior Services Long Term Care Licensing and Certification Unit] **Office of Certificate of Need and Healthcare Facility Licensure** and shall be reviewed in accordance with N.J.A.C. 8:43-2.6.

SUBCHAPTER 3A. PHYSICAL ENVIRONMENT FOR EXISTING RESIDENTIAL  
HEALTH CARE FACILITIES

8:43-3A.1 Scope

The rules set forth in this subchapter shall apply to all existing residential health care facilities. Physical environment standards for existing licensed facilities shall be maintained, and existing facilities shall be inspected according to licensing standards contained in this subchapter, and in addition shall comply with [the N.J. Uniform Fire Code,] N.J.A.C. 5:70, **the New Jersey Uniform Fire Code**.

SUBCHAPTER 4. GENERAL REQUIREMENTS

8:43-4.3 Transfer of ownership

(a) Prior to transferring ownership of a facility, the prospective new owner shall submit an application to the [Long-Term Care Licensing Program] **Office of Certificate of Need and Healthcare Facility Licensure**. The application shall include the following items:

1. - 5. (No change.)

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

(d) When a transfer of ownership application has been reviewed and deemed acceptable, an approval letter from the [Long-Term Care Licensing Program] **Office of Certificate of Need and Healthcare Facility Licensure** shall be sent to the applicant along with licensure application forms.

(e) Within five days after the transaction has been completed, the applicant shall submit the following documents to the [Long Term Care Licensing Program] **Office of**

**Certificate of Need and Healthcare Facility Licensure:**

1.-3. (No change.)

8:43-4.6 Policy and procedure manual

(a) A policy and procedure manual(s) for the organization and operation of the facility shall be developed, implemented, and reviewed at intervals specified in the manual(s). Each review of the manual(s) shall be documented, and the manual(s) shall be available in the facility to representatives of the Department at all times. The manual(s) shall include at least the following:

1.-3. (No change.)

4. Policies and procedures for reporting all diagnosed and/or suspected cases of resident abuse or exploitation, as follows:

i. All county welfare agencies shall be notified, in accordance with N.J.S.A. 55:13B-1 et seq., [The] **the** Rooming and Boarding Act of 1979, as amended; and

ii. In accordance with N.J.S.A. 52:27G-7.1 et seq., if the resident is 60 years of age or older, the [State of New Jersey] Office of the **State Long-Term Care** Ombudsman [for the Institutionalized Elderly] shall also be notified, at [1-877-582-6695]

**(877) 582-6995;**

5.-7. (No change.)

(b) (No change.)

#### 8:43-4.9 Reportable events

(a) The facility shall notify the Department immediately by telephone at (609) [633-8993] **633-8991** or [(609) 392-2020] **(800) 792-9770 during business hours, or (800) 792-9770** after business hours, followed within 72 hours by written confirmation of the following:

1.-2. (No change.)

3. All suspected cases of resident abuse or exploitation that have been reported to the [State of New Jersey] Office of the **State Long-Term Care** Ombudsman [for the Institutionalized Elderly] and/or to the county welfare agencies.

#### 8:43-4.10 Notices

(a) The facility shall conspicuously post a notice that the following information is available in the facility during normal business hours, to residents and the public:

1.-4. (No change.)

5. The toll-free hot line number of the Department, telephone numbers of county agencies and of the [State of New Jersey] Office of the **State Long-Term Care** Ombudsman; and

6. (No change.)

### SUBCHAPTER 6. RESIDENT CARE POLICIES

#### 8:43-6.3 Personal needs allowance

(a) The administrator or his or her representative shall reserve for each resident who receives Supplemental Security Income (SSI) or General Public Assistance a monthly

personal needs allowance of at least the amount specified [by the Division of Youth and Family Services of the New Jersey State Department of Human Services] pursuant to N.J.S.A. 44:7-[87(h)]**87.h** and N.J.A.C. 10:123-3 and under the following conditions:

1.-3. (No change.)

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

(d) Resident's funds received in trust or on deposit with the facility shall be kept in a separate bank account(s) and not commingled with the facility's general funds. If resident's funds are kept in an [interest bearing] **interest-bearing** account, all interest earned shall be credited to the resident after bank charges, if any, are deducted.

#### SUBCHAPTER 8. DIETARY SERVICES

##### 8:43-8.2 Requirements for dietary services

(a)-(e) (No change.)

(f) The facility and personnel shall comply with the provisions of [Chapter XII of the New Jersey Sanitary Code,] N.J.A.C. 8:24, **Sanitation in Retail Food Establishments and Food and Beverage Vending Machines**. The facility shall obtain a copy of N.J.A.C. 8:24 by contacting the [Residential] **Division of Health [Care] Facility Survey [Program] and Field Operations** of the Department at (609) [633-8993] **633-8991**.

#### SUBCHAPTER 9. HEALTH SERVICES

##### 8:43-9.2 Provision of health services

(a)-(d) (No change.)

(e) The nursing assessment required by (d) above shall be documented on the Minimum Data Set for resident assessment and care screening (MDS 2.0), or on an equivalent assessment instrument which has been developed by the facility and approved by the Department prior to its use. Copies of the MDS 2.0 may be obtained by contacting the [Residential] **Division of Health [Care] Facility Survey [Program of the Department] and Field Operations** at (609) [633-8993] **633-8991**.

(f)-(m) (No change.)

## SUBCHAPTER 10. MEDICATIONS

### 8:43-10.3 Storage of medications

(a)-(c) (No change.)

(d) Medications which require refrigeration shall be properly maintained. The refrigerator shall have a thermometer to indicate temperature in conformance with U.S.P. (United States Pharmacopoeia) requirements contained in the National Formulary USP26, NF21, January 1, 2003, published by the U.S. Pharmacopoeia Convention, 12601 Twinbrook Parkway, Rockville, MD 20852-**1790**, incorporated herein by reference. If medications are stored in a refrigerator in common with food, medications shall be stored in a locked container.

(e)-(g) (No change.)

## SUBCHAPTER 12. EMERGENCY SERVICES AND PROCEDURES

### 8:43-12.2 Emergency plans and procedures

(a) The facility shall develop written emergency plans, policies, and procedures which shall include plans and procedures to be followed in case of medical emergencies, power failures, fire, or natural disasters. The emergency plans shall be filed with the Department [of Health and Senior Services] and the Department shall be notified when the plans are changed. Copies of emergency plans shall also be forwarded to both municipal and county emergency management officials for their review.

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

## SUBCHAPTER 13. RESIDENT RECORDS

### 8:43-13.1 Maintenance of resident records

(a)-(c) (No change.)

(d) The following records shall be maintained and shall be kept available on the premises for review at any time by representatives of the Department [of Health and Senior Services]:

1.-3. (No change.)

## SUBCHAPTER 14. RESIDENT RIGHTS

### 8:43-14.1 Policies and procedures regarding resident rights

(a) The facility shall establish and implement written policies regarding the rights and responsibilities of residents, and shall be responsible for developing and adhering to procedures implementing such policies. These policies and procedures and a copy of **P.L. 1979, c. 500, as codified at N.J.S.A. 55:13B-17 et seq.**, shall be given to residents

and their next of kin and/or sponsors and/or guardians, and to each member of the facility's staff. These policies and procedures and **P.L. 1979, c. 500, as codified at N.J.S.A. 55:13B-17 et seq.**, shall also be conspicuously posted in the facility.

(b) (No change.)

(c) The facility shall comply with all applicable State and Federal statutes, rules, and regulations concerning resident rights, including N.J.S.A. 52:27G-7.1 et seq., and **P.L. 1979, c. 500, as codified at N.J.S.A. 55:13B-17 et seq.**

(d) Any suspected case of resident abuse or exploitation shall be reported to the county welfare agency, in accordance with N.J.S.A. 55:13B-1 et seq., [The] **the** Rooming and Boarding House Act of 1979. If the resident is 60 years of age or older, the [State of New Jersey] Office of the **State Long-Term Care** Ombudsman [for the Institutionalized Elderly] shall also be notified at [1-877-582-6995] **(877) 582-6995**, pursuant to N.J.S.A. 52:27G-7.1 et seq. If the resident is less than 60 years of age, the **Long-Term Care** Complaints Program of the Department shall also be notified at **(609) 633-8991 or (800) 792-9770 during business hours or (800) 792-9770 after business hours.**

#### 8:43-14.2 Rights of each resident

(a) Resident rights, policies, and procedures shall ensure that, as a minimum, each resident admitted to the facility:

1.-4. (No change.)

5. Is encouraged and assisted, throughout the period of stay, to exercise rights as a resident and as a citizen, and to this end may voice grievance on behalf of himself or herself or others, initiate action for damages or other relief for deprivations or

infringements of the right to treatment and care established by any applicable statute, rule, regulation, or contract, and recommend changes in policies and services to facility personnel and/or to outside representatives of the resident's choice, free from restraint, interference, coercion, discrimination, or reprisal.

i. The administrator shall provide all residents and/or next of kin and/or sponsors and/or guardians with the following names, addresses, and telephone numbers where complaints may be lodged:

**Long-Term Care Complaints Program**

Division of [Long Term Care Systems] **Health Facility Survey and**

**Field Operations**

New Jersey [State] Department of Health [and Senior Services]

[P.O.] **PO** Box 367

Trenton, [N.J.] **NJ** 08625-0367

Telephone: (800) 792-9770;

and

[State of New Jersey

Office of the] **State Long-Term Care** Ombudsman [for the

Institutionalized Elderly]

PO Box [808] **852**

Trenton, [N.J. 08625-0808] **NJ 08625-0852**

**Toll-Free Telephone Intake Line:** [(800) 792-8820] **(877) 582-6995**

ii. (No change.)

6.-10. (No change.)

11. May associate and communicate privately with persons of his or her choice, may have reasonable opportunities for private and intimate physical and social interaction with other people, may join with other residents or individuals within or outside the facility to work for improvements in resident care, may send and receive personal mail unopened, and upon his or her request, shall be given assistance in the reading and writing of correspondence.

i. The facility shall, with the consent of the resident being visited, permit visitors, legal services representatives, employees of the Department of the Public Advocate, employees and volunteers of the Office of the **State Long-Term Care** Ombudsman [for the Institutionalized Elderly], representatives of governmental welfare and social agencies, and all governmental representatives full and free access at a reasonable hour to the facility in order to visit with, and make personal, social and legal services available to all residents;

12.-23. (No change.)

## SUBCHAPTER 15. HOUSEKEEPING, SANITATION, SAFETY AND MAINTENANCE

### 8:43-15.3 Resident environment

(a) The following housekeeping and sanitation conditions shall be met:

1.-5. (No change.)

6. Thermometers which are accurate to within three degrees Fahrenheit shall be maintained in refrigerators, freezers, and storerooms used for perishable and other items subject to deterioration, in accordance with [Chapter XII of the New Jersey Sanitary Code,] N.J.A.C. 8:24, **Sanitation in Retail Food Establishments and Food**

**and Beverage Vending Machines**, copies of which are available by contacting the [Residential] **Division of Health [Care] Facility Survey [Program of the Department] and Field Operations** at (609) [633-8993] **633-8991**;

7.-13. (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. (See recommendations concerning [pet facilitated] **pet-facilitated** therapy, chapter Appendix C).

8. (No change.)

9. An electrician licensed in accordance with N.J.A.C. 13:31 shall annually inspect and provide a written statement that the electrical circuits and wiring in the facility are satisfactory and in safe condition;

i. (No change.)

ii. The written statement shall be forwarded annually to the [Residential] **Division of Health [Care] Facility Survey [Program] and Field Operations**, New Jersey Department of Health [and Senior Services], PO Box 367, Trenton, [New Jersey] **NJ 08625-0367**; and

10. (No change.)

8:43-15.4 Waste removal

(a) All solid or liquid waste which is not regulated medical waste, garbage, and trash shall be collected, stored, and disposed of in accordance with the rules of the New

Jersey [State] Department of Environmental Protection, and of the [New Jersey State] Department [of Health and Senior Services (] at N.J.A.C. 8:24)]. Solid waste shall be stored in insectproof, rodentproof, fireproof, nonabsorbent, watertight containers with tightfitting covers and collected from storage areas regularly, so as to prevent nuisances such as odors. Procedures and schedules shall be established and implemented for the cleaning of storage areas and containers for solid or liquid waste, garbage, and trash, in accordance with N.J.A.C. 8:24.

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

#### 8:43-15.6 Water supply

(a) The water supply used for drinking or culinary purposes shall be adequate in quantity, of a safe and sanitary quality, and from a water system which shall be constructed, protected, operated, and maintained in conformance with the New Jersey Safe Drinking Water Act, N.J.S.A. 58:12A-1 et seq., N.J.A.C. 7:10, and local laws, ordinances, and regulations. Copies of the Safe Drinking Water Act can be obtained from the **New Jersey** Department of Environmental Protection, **Division of Water Supply and Geoscience**, Bureau of Safe Drinking Water, **Mail Code 401-04Q**, PO Box [426] **420**, Trenton, [New Jersey 08625-0426] **NJ 08625-0420**.

(b)-(f) (No change.)

## SUBCHAPTER 16. INFECTION PREVENTION AND CONTROL SERVICES

### 8:43-16.2 Development of infection control policies and procedures

(a) The facility shall develop, implement, and review, at least annually, written policies and procedures regarding infection prevention and control. Written policies and procedures shall be consistent with the following [Centers for Disease Control] publications, incorporated herein by reference, as amended and supplemented, **which are available from the Infection Control Guidelines Library of the Centers for Disease Control and Prevention (CDC) at**

**<https://www.cdc.gov/infectioncontrol/guidelines/index.html>:**

1. **CDC, Guidelines for Hand Hygiene in Health Care Settings:**

**Recommendations of the Healthcare Infection Control Practices Advisory Committee and the HICPAC/SHEA/APIC/IDSA Hand Hygiene Task Force, [PB85-923404,] MMWR October 25, [2002/51] 2002; 51 (No. RR-16) [as amended and supplemented];**

2. **Siegel JD, Rhinehart E, Jackson M, Chiarello L, and the Healthcare Infection Control Practices Advisory Committee, 2007** Guideline[s] for Isolation Precautions: **Preventing Transmission of Infectious Agents** in [Hospitals, PB96-138102, February 18, 1997, as amended and supplemented] **Healthcare Settings (routinely updated web-based document) (last update: May 2019);**

[3. Prevention and Control of Tuberculosis in Facilities Providing Long-Term Care to the Elderly, MMWR/39 (RR-10), July 13, 1990, as amended and supplemented; and]

3. **CDC, Guidelines for Preventing the Transmission of *Mycobacterium tuberculosis* in Health-Care Settings, MMWR December 30, 2005; 54 (No. RR-17);**

**4. Sosa LE, Njie GJ, Lobato MN, et al., Tuberculosis Screening, Testing, and Treatment of U.S. Health Care Personnel: Recommendations from the National Tuberculosis Controllers Association and CDC, 2019, MMWR May 17, 2019; 68:439–443; and**

[4.] **5. CDC, Guidelines for Preventing [Health-Care Associated] Health-Care--Associated Pneumonia, 2003: Recommendations of CDC and the Healthcare Infection Control Practices Advisory Committee, MMWR[()], March 26, 2004; 53 (No. RR-03)[, March 26, 2004, as amended and supplemented].**

[(b) Centers for Disease Control publications can be obtained from:

National Technical Information Service

U.S. Department of Commerce

5285 Port Royal Road

Springfield, VA 22161

(703) 605-6000 or

(800) 553-6847

or

Superintendent of Documents

U.S. Government Printing Office

Washington, D.C. 20402]

[(c)] **(b)** The facility shall document evidence of annual vaccination against influenza for each resident, in accordance with the recommendations of the Advisory Committee on Immunization Practices of the [Centers for Disease Control] **CDC** most recent to the time of vaccination, incorporated herein by reference, unless such vaccination is

medically contraindicated or the resident has refused the vaccine, in accordance with N.J.A.C. 8:43-14.2(a)3. Influenza vaccination for all residents accepting the vaccine shall be completed by November 30 of each year. Residents admitted after this date, during the flu season and up to February 1 **of each year**, shall, as medically appropriate, receive influenza vaccination prior to or on admission unless refused by the resident.

[(d)] **(c)** (No change in text.)

#### 8:43-16.3 General infection control policies and procedures

(a) Written policies and procedures shall be established and implemented regarding infection prevention and control, including, but not limited to, policies and procedures for the following:

1. In accordance with [Chapter II, New Jersey State Sanitary Code, Communicable Diseases,] N.J.A.C. 8:57, **Communicable Diseases**, a system for investigating, reporting, and evaluating the occurrence of all infections or diseases which are reportable or conditions which may be related to activities and procedures of the facility, and maintaining records for all residents or personnel having these infections, diseases, or conditions;

2.-7. (No change.)

(b)-(f) (No change.)

8:43-16.4 Employee health and resident policies and procedures for infection prevention and control

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

(c) The facility shall report annually the results of all tuberculin testing of personnel and residents, on forms provided by the [Department of Health and Senior Services, Division of Epidemiology,] Tuberculosis Program **of the Department**, (609) [588-7522] **826-4878**.

(d)-(g) (No change.)

(h) The facility shall maintain listings of all residents and personnel who have infections, diseases, or conditions which are reportable to the Department pursuant to [Chapter II, New Jersey State Sanitary Code, Communicable Diseases,] N.J.A.C. 8:57, **Communicable Diseases**, unless prohibited by Federal or State law.

(i) (No change.)