87R5392 EAS-D

By:  Campos H.B. No. 1221

A BILL TO BE ENTITLED

AN ACT

relating to communicable disease and infection prevention and control measures for certain long-term care facilities; authorizing an administrative penalty.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

SECTION 1.  Section 81.014, Health and Safety Code, is amended to read as follows:

Sec. 81.014.  LONG-TERM CARE FACILITY INFECTION PREVENTION AND CONTROL PROGRAMS [~~PROGRAM~~]. (a) Each long-term care facility shall, with advice from and subject to the approval of a quality assessment and assurance committee designated under Subsection (c), establish and maintain an [~~facility's~~] infection prevention and control program designed to:

(1)  provide to facility residents and staff a safe, sanitary, and comfortable environment; and

(2)  help prevent the development and transmission of communicable diseases and infections among facility residents and staff.

(b)  A long-term care facility's infection prevention and control program must include:

(1)  monitoring of key infectious agents, including multidrug-resistant organisms; [~~and~~]

(2)  procedures for making rapid influenza diagnostic tests available to facility residents and staff; and

(3)  procedures for ensuring that rapid antigen COVID-19 viral tests are available to facility residents and staff as needed.

(c)  Each long-term care facility shall designate a quality assessment and assurance committee to approve and monitor the facility's infection prevention and control program. The facility's committee must include:

(1)  the facility's director of nursing or an equivalent consultant with the facility;

(2)  the facility's medical director or the director's designee;

(3)  not less than three members of the facility's staff, at least one of whom must be a facility administrator, a facility board member, or another individual in a leadership position with the facility; and

(4)  the facility's primary infection preventionist designated under Section 81.0145.

(d)  A long-term care facility's quality assessment and assurance committee shall:

(1)  conduct an annual review of the facility's infection prevention and control program and modify the program as necessary; and

(2)  present the findings of each review conducted under Subdivision (1) to facility staff and residents at annual meetings that are open to the public.

(e)  A long-term care facility's primary infection preventionist designated under Section 81.0145 shall:

(1)  with the assistance of the facility's secondary infection preventionist designated under that section, implement the facility's infection prevention and control program; and

(2)  submit regular reports to the facility's quality assessment and assurance committee on the implementation of the program.

SECTION 2.  Subchapter A, Chapter 81, Health and Safety Code, is amended by adding Sections 81.0145 and 81.0146 to read as follows:

Sec. 81.0145.  LONG-TERM CARE FACILITY INFECTION PREVENTIONISTS. (a) Each long-term care facility shall designate a primary and a secondary infection preventionist. The primary and secondary infection preventionists must:

(1)  have professional training or other specialized training in nursing, medical technology, microbiology, or another related field;

(2)  have completed specialized training in infection prevention and control;

(3)  work at least part-time at the facility; and

(4)  annually complete at least eight hours of training approved by the commission related to infectious diseases and vaccinations.

(b)  A long-term care facility's primary infection preventionist and, under the direction of the primary infection preventionist, secondary infection preventionist shall:

(1)  implement the facility's infection prevention and control program in the manner described by Section 81.014;

(2)  serve as the facility's contact for the local health department or health authority to notify the facility of a potential exposure to a reportable disease at the facility;

(3)  notify the local health department or health authority of a potential exposure to a reportable disease at the facility not later than eight hours from the time of exposure;

(4)  notify staff, residents, and resident representatives not later than 12 hours from the time a reportable disease at the facility is verified;

(5)  investigate and evaluate incidents during which facility residents or staff were or may have been exposed to a communicable disease, using current evidence-based information on the possible risks associated with exposure to the communicable disease;

(6)  implement control measures to prevent the spread of infection of a communicable disease among facility residents and staff, including:

(A)  immunization;

(B)  detention;

(C)  restrictions;

(D)  disinfection;

(E)  decontamination;

(F)  isolation;

(G)  quarantine;

(H)  disinfestation;

(I)  chemoprophylaxis;

(J)  preventive therapy;

(K)  prevention methods; and

(L)  education;

(7)  in accordance with applicable law, monitor all treatment provided to a facility resident or staff member who is exposed to and as a result of that exposure infected with a communicable disease at the facility;

(8)  maintain records of and respond in a timely manner, as determined by the facility, to each communicable disease complaint made by facility staff, residents, or resident representatives;

(9)  as required by the executive commissioner, submit to the department or the local health department or health authority accurate information on the total number of cases of a reportable disease among facility residents or staff; and

(10)  perform other duties for the facility as assigned by the executive commissioner.

(c)  A primary or secondary infection preventionist may not serve concurrently as an infection preventionist for more than three long-term care facilities.

(d)  Each long-term care facility shall provide to the local health department or health authority the names and qualifications of the facility's primary and secondary infection preventionists.

Sec. 81.0146.  ADMINISTRATIVE PENALTY RELATED TO LONG-TERM CARE FACILITY COMMUNICABLE DISEASE AND PREVENTION CONTROL MEASURES. (a) The commission may impose an administrative penalty against a long-term care facility that violates Section 81.014 or 81.0145 in an amount determined by the executive commissioner in accordance with commission rules.

(b)  The amount of an administrative penalty imposed under this section shall be based on:

(1)  the seriousness of the violation, including the nature, circumstances, extent, and gravity of any prohibited acts, and the hazard or potential hazard created to the health and safety of facility residents and staff;

(2)  enforcement costs relating to the violation;

(3)  the history of previous violations;

(4)  the amount necessary to deter future violations;

(5)  efforts to correct the violation; and

(6)  any other matter that justice may require.

SECTION 3.  (a) As soon as practicable after the effective date of this Act, each long-term care facility licensed under Chapter 242, 247, or 252, Health and Safety Code, shall:

(1)  establish an infection prevention and control program and designate a quality assessment and assurance committee to approve the program as required by Section 81.014, Health and Safety Code, as amended by this Act; and

(2)  designate a primary and a secondary infection preventionist as required by Section 81.0145, Health and Safety Code, as added by this Act.

(b)  As soon as practicable after the effective date of this Act, the executive commissioner of the Health and Human Services Commission shall adopt the rules necessary to implement the changes in law made by this Act.

SECTION 4.  This Act takes effect September 1, 2021.