



General Assembly

**Amendment**

**January Session, 2021**

LCO No. **9433**



Offered by:  
SEN. DAUGHERTY ABRAMS, 13<sup>th</sup> Dist.  
REP. STEINBERG, 136<sup>th</sup> Dist.

To: Subst. Senate Bill No. **1030**

File No. 457

Cal. No. 281

**"AN ACT CONCERNING LONG-TERM CARE FACILITIES."**

1 Strike everything after the enacting clause and substitute the  
2 following in lieu thereof:

3 "Section 1. (NEW) (*Effective October 1, 2021*) (a) As used in this section  
4 and sections 2 to 11, inclusive, of this act:

5 (1) "Nursing home" means any chronic and convalescent nursing  
6 home or any rest home with nursing supervision that provides nursing  
7 supervision under a medical director twenty-four hours per day, or any  
8 chronic and convalescent nursing home that provides skilled nursing  
9 care under medical supervision and direction to carry out nonsurgical  
10 treatment and dietary procedures for chronic diseases, convalescent  
11 stages, acute diseases or injuries; and

12 (2) "Dementia special care unit" means the unit of any assisted living

13 facility that locks, secures, segregates or provides a special program or  
14 unit for residents with a diagnosis of probable Alzheimer's disease,  
15 dementia or other similar disorder, in order to prevent or limit access by  
16 a resident outside the designated or separated area, or that advertises or  
17 markets the facility as providing specialized care or services for persons  
18 suffering from Alzheimer's disease or dementia.

19 (b) Each nursing home and dementia special care unit shall employ a  
20 full-time infection prevention and control specialist who shall be  
21 responsible for the following:

22 (1) Ongoing training of all administrators and employees of the  
23 nursing home or dementia special care unit on infection prevention and  
24 control using multiple training methods, including, but not limited to,  
25 in-person training and the provision of written materials in English and  
26 Spanish;

27 (2) The inclusion of information regarding infection prevention and  
28 control in the documentation that the nursing home or dementia special  
29 care unit provides to residents regarding their rights while in the home  
30 or unit and posting of such information in areas visible to residents;

31 (3) Participation as a member of the infection prevention and control  
32 committee of the nursing home or dementia special care unit and  
33 reporting to such committee at its regular meetings regarding the  
34 training he or she has provided pursuant to subdivision (1) of this  
35 subsection;

36 (4) The provision of training on infection prevention and control  
37 methods to supplemental or replacement staff of the nursing home or  
38 dementia special care unit in the event an infectious disease outbreak or  
39 other situation reduces the staffing levels of the home or unit; and

40 (5) Any other duties or responsibilities deemed appropriate for the  
41 infection prevention and control specialist, as determined by the  
42 nursing home or dementia special care unit.

43 (c) Each nursing home and dementia special care unit shall require its  
44 infection and control specialist to work on a rotating schedule that  
45 ensures the specialist covers each eight-hour shift at least once per  
46 month for purposes of ensuring compliance with relevant infection  
47 control standards.

48 Sec. 2. (NEW) (*Effective October 1, 2021*) On or before January 1, 2022,  
49 the administrative head of each nursing home and each dementia  
50 special care unit shall provide its emergency plan of operations to the  
51 political subdivision of this state in which it is located for purposes of  
52 the development of the emergency plan of operations for such political  
53 subdivision of this state required pursuant to the Interstate Mutual Aid  
54 Compact made and entered into under section 28-22a of the general  
55 statutes.

56 Sec. 3. (NEW) (*Effective October 1, 2021*) (a) The administrative head  
57 of each nursing home shall ensure that (1) the home maintains at least a  
58 two-month supply of personal protective equipment for its staff, and (2)  
59 the personal protective equipment is of various sizes based on the needs  
60 of the home's staff. The personal protective equipment shall not be  
61 shared amongst the home's staff and may only be reused in accordance  
62 with the strategies to optimize personal protective equipment supplies  
63 in health care settings published by the National Centers for Disease  
64 Control and Prevention. The administrative head of each nursing home  
65 shall hold fittings of his or her staff for N95 masks or higher rated masks  
66 certified by the National Institute for Occupational Safety and Health,  
67 at a frequency determined by the Department of Public Health.

68 (b) On or before January 1, 2022, the Department of Emergency  
69 Management and Homeland Security, in consultation with the  
70 Department of Public Health, shall establish a process to evaluate,  
71 provide feedback on, approve and distribute personal protective  
72 equipment for use by nursing homes in a public health emergency.

73 Sec. 4. (NEW) (*Effective October 1, 2021*) The administrative head of  
74 each nursing home shall ensure that there is at least one staff member

75 or contracted professional licensed or certified to start an intravenous  
76 line who is available on-call during each shift to start an intravenous  
77 line.

78 Sec. 5. (NEW) (*Effective October 1, 2021*) Each nursing home's infection  
79 prevention and control committee shall meet (1) at least monthly, and  
80 (2) during an outbreak of an infectious disease, daily, provided daily  
81 meetings do not cause a disruption to the operations of the nursing  
82 home, in which case the committee shall meet at least weekly. The  
83 prevention and control committee shall be responsible for establishing  
84 infection prevention and control protocols for the nursing home and  
85 monitoring the nursing home's infection prevention and control  
86 specialist. Not less than annually and after every outbreak of an  
87 infectious disease in the nursing home, the prevention and control  
88 committee shall evaluate (A) the implementation and analyze the  
89 outcome of such protocols, and (B) whether the infection prevention and  
90 control specialist is satisfactorily performing his or her responsibilities  
91 under subsection (b) of section 1 of this act.

92 Sec. 6. (NEW) (*Effective October 1, 2021*) Each nursing home shall,  
93 during an outbreak of an infectious disease, test staff and residents of  
94 the nursing home for the infectious disease at a frequency determined  
95 by the Department of Public Health as appropriate based on the  
96 circumstances surrounding the outbreak and the impact of testing on  
97 controlling the outbreak.

98 Sec. 7. (NEW) (*Effective October 1, 2021*) On or before January 1, 2022,  
99 the administrative head of each nursing home and dementia special care  
100 unit shall encourage the establishment of a family council and assist in  
101 any such establishment. The family council shall facilitate and support  
102 open communication between the nursing home or dementia special  
103 care unit and each resident's family members and friends. As used in  
104 this section, "family council" means an independent, self-determining  
105 group of the family members and friends of the residents of a nursing  
106 home or dementia special care unit that is geared to meeting the needs  
107 and interests of the residents and their family members and friends.

108 Sec. 8. (NEW) (*Effective October 1, 2021*) (a) On or before January 1,  
109 2022, the administrative head of each nursing home shall ensure that  
110 each resident's care plan includes the following:

111 (1) Measures to address the resident's social, emotional and mental  
112 health needs, including, but not limited to, opportunities for social  
113 connection and strategies to minimize isolation;

114 (2) Visitation protocols and any other information relevant to  
115 visitation that shall be written in plain language and in a form that may  
116 be reasonably understood by the resident and the resident's family  
117 members and friends; and

118 (3) Information on the role of the Office of the Long-Term Care  
119 Ombudsman established under section 17a-405 of the general statutes  
120 including, but not limited to, the contact information for said office.

121 (b) On or before January 1, 2022, the administrative head of each  
122 nursing home shall ensure that its staff is educated regarding (1) best  
123 practices for addressing the social, emotional and mental health needs  
124 of residents, and (2) all components of person-centered care.

125 Sec. 9. (*Effective from passage*) On or before October 1, 2021, the Public  
126 Health Preparedness Advisory Committee established pursuant to  
127 section 19a-131g of the general statutes shall amend the plan for  
128 emergency responses to a public health emergency prepared pursuant  
129 to said section to include a plan for emergency responses to a public  
130 health emergency in relation to nursing homes and dementia special  
131 care units and providers of community-based services to residents of  
132 such homes and units.

133 Sec. 10. (NEW) (*Effective October 1, 2021*) (a) On or before January 1,  
134 2022, the Department of Public Health shall (1) establish minimum  
135 staffing level requirements for nursing homes of three hours of direct  
136 care per resident per day, and (2) modify staffing level requirements for  
137 social work and recreational staff of nursing homes such that the  
138 requirements (A) for social work are one full-time social worker per

139 sixty residents, and (B) for recreational staff are lower than the current  
 140 requirements, as deemed appropriate by the Commissioner of Public  
 141 Health.

142 (b) The commissioner shall adopt regulations in accordance with the  
 143 provisions of chapter 54 of the general statutes that set forth nursing  
 144 home staffing level requirements to implement the provisions of this  
 145 section.

146 Sec. 11. (*Effective from passage*) The Department of Public Health shall  
 147 seek any federal or state funds available for improvements to the  
 148 infrastructure of nursing homes in the state. Not later than January 1,  
 149 2022, the Commissioner of Public Health shall report, in accordance  
 150 with the provisions of section 11-4a of the general statutes, regarding  
 151 the commissioner's success in accessing such federal or state funds  
 152 available for infrastructure improvement to the joint standing  
 153 committee of the General Assembly having cognizance of matters  
 154 relating to public health."

This act shall take effect as follows and shall amend the following sections:

Section 1	<i>October 1, 2021</i>	New section
Sec. 2	<i>October 1, 2021</i>	New section
Sec. 3	<i>October 1, 2021</i>	New section
Sec. 4	<i>October 1, 2021</i>	New section
Sec. 5	<i>October 1, 2021</i>	New section
Sec. 6	<i>October 1, 2021</i>	New section
Sec. 7	<i>October 1, 2021</i>	New section
Sec. 8	<i>October 1, 2021</i>	New section
Sec. 9	<i>from passage</i>	New section
Sec. 10	<i>October 1, 2021</i>	New section
Sec. 11	<i>from passage</i>	New section