S T A T E O F N E W Y O R K

482

2013-2014 Regular Sessions

I N A S S E M B L Y

(PREFILED)

January 9, 2013

Introduced by M. of A. MAGNARELLI, GALEF, BENEDETTO, MILLMAN, BROOK-KRASNY, COLTON, CAHILL, CLARK, JAFFEE -- Multi-Sponsored by -- M. of A. GLICK, HOOPER, MAISEL, RIVERA, ROBINSON, SCARBOROUGH, WEISENBERG -- read once and referred to the Committee on Health

AN ACT to amend the public health law, in relation to establishing standards and programs relating to the prevention and/or reduction of the incidence of hospital-acquired infections

THE PEOPLE OF THE STATE OF NEW YORK, REPRESENTED IN SENATE AND ASSEMBLY, DO ENACT AS FOLLOWS:

Section 1. The public health law is amended by adding two new sections 2819-a and 2819-b to read as follows:

S 2819-A. HOSPITAL-ACQUIRED INFECTION PREVENTION STANDARDS. 1. THE COMMISSIONER SHALL PROMULGATE AND ADMINISTER REGULATIONS AND POLICIES GOVERNING THE PREVENTION OF AND/OR THE REDUCTION IN THE INCIDENCE OF HOSPITAL-ACQUIRED INFECTIONS IN PATIENTS IN HOSPITALS AND RESIDENTIAL HEALTH CARE FACILITIES, AND SUCH RULES AND REGULATIONS AS HE OR SHE MAY DEEM APPROPRIATE TO EFFECTUATE THE PURPOSES OF THIS SECTION.

2. THE DEPARTMENT SHALL ESTABLISH REGULATORY STANDARDS, INCLUDING, BUT NOT LIMITED TO QUALITY CONTROL, EDUCATIONAL AND TRAINING STANDARDS, REGARDING THE PREVENTION OF AND/OR THE REDUCTION IN THE INCIDENCE OF HOSPITAL-ACQUIRED INFECTIONS. THESE STANDARDS SHALL BE CONSISTENT WITH THE RECOMMENDATIONS OF RECOGNIZED CENTERS OF EXPERTISE IN THE IDENTIFICATION AND PREVENTION OF HOSPITAL-ACQUIRED INFECTIONS INCLUDING, BUT NOT LIMITED TO THE NATIONAL HEALTH CARE SAFETY NETWORK OF THE CENTERS FOR DISEASE CONTROL AND PREVENTION OR ITS SUCCESSOR. THE DEPARTMENT SHALL ALSO CONSULT WITH ORGANIZATIONS REPRESENTATIVE OF PROFESSIONS, INSTITUTIONS AND THOSE WITH EXPERTISE IN INFECTION CONTROL WITH RESPECT TO THE REGULATORY STANDARDS PROMULGATED PURSUANT TO THIS SECTION, AND SHALL PROMULGATE SUCH REGULATIONS IN CONSULTATION WITH THE DEPARTMENT OF

EXPLANATION--Matter in ITALICS (underscored) is new; matter in brackets [ ] is old law to be omitted.

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EDUCATION. THE DEPARTMENT SHALL SOLICIT AND CONSIDER PUBLIC COMMENT PRIOR TO SUCH ESTABLISHMENT OF SUCH STANDARDS.

3. WITHIN ONE HUNDRED EIGHTY DAYS AFTER THE DEPARTMENT ESTABLISHES THE STANDARDS DESCRIBED IN SUBDIVISION TWO OF THIS SECTION, EACH GENERAL HOSPITAL SHALL DEVELOP, ADOPT, IMPLEMENT AND MAINTAIN A COORDINATED PLAN TO PREVENT AND/OR REDUCE THE INCIDENCE OF HOSPITAL-ACQUIRED INFECTIONS IN COMPLIANCE WITH THE DEPARTMENT REGULATIONS. SUCH PLAN SHALL PROVIDE FOR THE FOLLOWING, AT A MINIMUM:

(A) DEPARTMENTAL STANDARDS FOR THE PREVENTION OF AND/OR THE REDUCTION IN THE INCIDENCE OF HOSPITAL-ACQUIRED INFECTIONS;

(B) MANDATORY EDUCATIONAL AND TRAINING PROGRAMS FOR EMPLOYEES DEALING WITH THE PREVENTION OF AND/OR THE REDUCTION IN THE INCIDENCE OF HOSPITAL-ACQUIRED INFECTIONS;

(C) THE ESTABLISHMENT OF A QUALITY ASSURANCE COMMITTEE WITH THE RESPONSIBILITY TO REVIEW SERVICES RENDERED IN THE HOSPITAL IN ORDER TO IMPROVE THE QUALITY OF INFECTION PREVENTION AND REDUCTION MEASURES. SUCH COMMITTEE SHALL OVERSEE AND COORDINATE THE PROGRAM AND SHALL INSURE THAT INFORMATION GATHERED PURSUANT TO THE PROGRAM IS UTILIZED TO REVIEW AND TO REVISE HOSPITAL POLICIES AND PROCEDURES. AT LEAST ONE MEMBER OF THE COMMITTEE SHALL BE A MEMBER OF THE GOVERNING BOARD OF THE HOSPITAL WHO IS NOT OTHERWISE AFFILIATED WITH THE HOSPITAL IN AN EMPLOYMENT OR CONTRACTUAL CAPACITY;

(D) THE PERIODIC REVIEW AND THE REVIEW AS OTHERWISE WARRANTED IN SPECIFIC INSTANCES AND CIRCUMSTANCES OF THE EFFECTIVENESS OF MEASURES DESIGNED TO PREVENT AND/OR REDUCE THE INCIDENCE OF HOSPITAL-ACQUIRED INFECTIONS; AND

(E) POLICIES TO ENSURE COMPLIANCE WITH THE REPORTING REQUIREMENTS OF SECTION TWENTY-EIGHT HUNDRED NINETEEN OF THIS ARTICLE.

4. REGULATIONS UNDER THIS SECTION SHALL INCLUDE STANDARDS TO ASSURE THE PROTECTION OF PATIENT PRIVACY IN DATA COLLECTED AND RELEASED UNDER THIS SECTION.

5. FOR THE PURPOSES OF THIS SECTION, "HOSPITAL-ACQUIRED INFECTION" SHALL MEAN ANY LOCALIZED OR SYSTEMIC PATIENT CONDITION THAT:

(A) RESULTED FROM THE PRESENCE OF AN INFECTIOUS AGENT OR AGENTS, OR ITS TOXIN OR TOXINS AS DETERMINED BY CLINICAL EXAMINATION OR BY LABORATORY TESTING; AND

(B) WAS NOT FOUND TO BE PRESENT OR INCUBATING AT THE TIME OF ADMISSION UNLESS THE INFECTION WAS RELATED TO A PREVIOUS ADMISSION.

S 2819-B. EDUCATION AND TRAINING PROGRAMS IN INFECTION CONTROL PRACTICES FOR STERILE PROCESSING PROFESSIONALS. 1. FOR THE PURPOSES OF THIS SECTION:

(A) "HOSPITAL-ACQUIRED INFECTION" SHALL MEAN ANY LOCALIZED OR SYSTEMIC PATIENT CONDITION THAT: (I) RESULTED FROM THE PRESENCE OF AN INFECTIOUS AGENT OR AGENTS, OR ITS TOXIN OR TOXINS AS DETERMINED BY CLINICAL EXAMINATION OR BY LABORATORY TESTING; AND (II) WAS NOT FOUND TO BE PRESENT OR INCUBATING AT THE TIME OF ADMISSION UNLESS THE INFECTION WAS RELATED TO A PREVIOUS ADMISSION; AND

(B) "STERILE PROCESSING PROFESSIONALS" SHALL MEAN PERSONNEL PERFORMING CLEANING, DISINFECTION, STERILIZATION AND INVENTORY MANAGEMENT ACTIVITIES IN THE HOSPITAL SETTING.

2. EACH GENERAL HOSPITAL SHALL:

(A) ENSURE THAT ALL STERILE PROCESSING PROFESSIONALS EMPLOYED BY THE HOSPITAL SHALL, ON OR BEFORE JULY FIRST, TWO THOUSAND SIXTEEN AND EVERY FOUR YEARS THEREAFTER, COMPLETE COURSE WORK OR TRAINING IN TECHNIQUES TO PREVENT OR REDUCE THE INCIDENCE OF HOSPITAL-ACQUIRED INFECTIONS, APPROPRIATE TO THE PROFESSIONAL'S PRACTICE AND APPROVED BY THE DEPARTMENT IN

ACCORDANCE WITH THE REGULATORY STANDARDS PROMULGATED BY THE DEPARTMENT; AND

(B) CERTIFY SO TO THE DEPARTMENT. THE DEPARTMENT SHALL PROVIDE AN EXEMPTION FROM THIS REQUIREMENT TO ANYONE WHO REQUESTS SUCH AN EXEMPTION AND WHO (I) CLEARLY DEMONSTRATES TO THE DEPARTMENT'S SATISFACTION THAT THERE WOULD BE NO NEED FOR HIM OR HER TO COMPLETE SUCH COURSE WORK OR TRAINING BECAUSE OF THE NATURE OF HIS OR HER PRACTICE OR (II) THAT HE OR SHE HAS COMPLETED COURSE WORK OR TRAINING DEEMED BY THE DEPARTMENT TO BE EQUIVALENT TO THE STANDARDS FOR COURSE WORK OR TRAINING APPROVED BY THE DEPARTMENT PURSUANT TO THIS SECTION.

S 2. This act shall take effect on the one hundred eightieth day after it shall have become a law; provided, however, that effective immediately, the addition, amendment or repeal of any rule or regulation necessary for the implementation of this act on its effective date are authorized and directed to be made and completed on or before such effective date.