

BILL ANALYSIS

C.S.H.B. 3711
By: Sheffield
Public Health
Committee Report (Substituted)

BACKGROUND AND PURPOSE

Interested parties express concern that it is too easy for an outbreak of a communicable disease to occur in the state's long-term care facilities. The goal of C.S.H.B. 3711 is to provide for the prevention of and response to communicable diseases in certain long-term care facilities.

CRIMINAL JUSTICE IMPACT

It is the committee's opinion that this bill does not expressly create a criminal offense, increase the punishment for an existing criminal offense or category of offenses, or change the eligibility of a person for community supervision, parole, or mandatory supervision.

RULEMAKING AUTHORITY

It is the committee's opinion that this bill does not expressly grant any additional rulemaking authority to a state officer, department, agency, or institution.

ANALYSIS

C.S.H.B. 3711 amends the Health and Safety Code to require the infection prevention and control program of each long-term care facility licensed or regulated as a convalescent or nursing facility, assisted living facility, or intermediate care facility for individuals with an intellectual disability to include monitoring of key infectious agents, including multidrug-resistant organisms, and procedures for making rapid influenza diagnostic tests available to facility residents. The bill requires the Department of State Health Services to establish a regional advisory committee in each designated public health region to address antimicrobial stewardship in such long-term care facilities and to improve antimicrobial stewardship through collaborative action. The bill requires such a regional advisory committee to include physicians, directors of nursing or equivalent consultants with long-term care facilities, public health officials knowledgeable about antimicrobial stewardship, and other interested parties.

EFFECTIVE DATE

September 1, 2017.

COMPARISON OF ORIGINAL AND SUBSTITUTE

While C.S.H.B. 3711 may differ from the original in minor or nonsubstantive ways, the following comparison is organized and formatted in a manner that indicates the substantial differences between the introduced and committee substitute versions of the bill.

INTRODUCED	HOUSE COMMITTEE SUBSTITUTE
SECTION 1. Section 81.003, Health and	SECTION 1. Same as introduced version.

Safety Code, is amended.

SECTION 2. Subchapter A, Chapter 81, Health and Safety Code, is amended by adding Sections 81.014 and 81.015 to read as follows:

Sec. 81.014. LONG-TERM CARE FACILITY COMMUNICABLE DISEASE RESPONSE PLAN. Each long-term care facility shall develop a plan for preventing and responding to outbreaks of communicable diseases, including influenza.

The plan must include:

- (1) surveillance for key infectious agents, including multidrug-resistant organisms; and
- (2) procedures for making rapid influenza diagnostic tests available to facility residents.

Sec. 81.015. ANTIMICROBIAL STEWARDSHIP REGIONAL ADVISORY COMMITTEES. (a) The department shall establish a regional advisory committee in each public health region designated under Section 121.007 to monitor antimicrobial stewardship in long-term care facilities.

(b) A regional advisory committee established under this section must include members who are physicians and members who are

public health officials.

SECTION 3. Subchapter A, Chapter 161, Health and Safety Code, is amended by adding Section 161.0053 to read as follows:

Sec. 161.0053. LONG-TERM CARE FACILITY IMMUNIZATION INFORMATION. (a) In this section, "long-term care facility" means a facility licensed or regulated under Chapter 242, 247, or 252.

(b) A long-term care facility shall provide educational materials to facility employees regarding:

- (1) immunizations, including the risks posed to facility residents by employees who are not immunized; and
- (2) the availability of specific immunizations.

(c) A long-term care facility shall provide,

SECTION 2. Subchapter A, Chapter 81, Health and Safety Code, is amended by adding Sections 81.014 and 81.015 to read as follows:

Sec. 81.014. LONG-TERM CARE FACILITY INFECTION PREVENTION AND CONTROL PROGRAM. Each 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.

Sec. 81.015. ANTIMICROBIAL STEWARDSHIP REGIONAL ADVISORY COMMITTEES. (a) The department shall establish a regional advisory committee in each public health region designated under Section 121.007 to address antimicrobial stewardship in long-term care facilities and to improve antimicrobial stewardship through collaborative action.

(b) A regional advisory committee established under this section must include:

- (1) physicians;
- (2) directors of nursing or equivalent consultants with long-term care facilities;
- (3) public health officials knowledgeable about antimicrobial stewardship; and
- (4) other interested parties.

No equivalent provision.

on request, current influenza and pneumococcal vaccination data of the facility's personnel to a public health official, facility resident, and resident's family member.

SECTION 4. This Act takes effect September 1, 2017.

SECTION 3. Same as introduced version.