

SUBJECT: Requiring certain care facilities to monitor multidrug-resistant organisms

COMMITTEE: Human Services — committee substitute recommended

VOTE: 8 ayes — Frank, Hinojosa, Clardy, Deshotel, Klick, Meza, Miller, Noble

0 nays

1 absent — Rose

WITNESSES: For — Amanda Fredriksen, AARP; Michael Krol, Texas Medical Association, Texas Public Health Coalition; (*Registered, but did not testify*: Aimee Bertrand, Harris County Commissioners Court; Alyse Meyer, LeadingAge Texas; Diana Martinez, Texas Assisted Living Association; Lee Johnson, Texas Council of Community Centers; Susan Merrick, Mary Pat Smith, and Sherry Hubbard, Texas Silver Haired Legislature)

Against — None

On — (*Registered, but did not testify*: Monica Gamez and Imelda Garcia, Department of State Health Services; Stephanie Stephens, Health and Human Services Commission)

BACKGROUND: 42 C.F.R. sec. 483.80 requires long-term care facilities to establish and maintain infection prevention and control programs.

Health and Safety Code sec. 121.007 allows the Department of State Health Services (DSHS) to designate certain geographic areas of the state as public health regions and appoint physicians as regional directors.

DSHS defines "antimicrobial stewardship" as a coordinated program that promotes the appropriate use of antibiotics and other antimicrobials, improves patient outcomes, reduces microbial resistance, and decreases the spread of infections caused by multidrug-resistant organisms.

Interested parties have suggested a need to establish certain requirements for infection prevention control programs at long-term care facilities in order to prevent outbreaks of potentially fatal multidrug-resistant organisms in these facilities.

DIGEST:

CSHB 1848 would require each long-term care facility's infection prevention and control program to include monitoring of key infectious agents and multidrug-resistant organisms as well as procedures for making rapid influenza diagnostic tests available to residents.

The Department of State Health Services would be required to create a regional advisory committee in each public health region to address antimicrobial stewardship in long-term care facilities and to improve this stewardship through collaborative action.

A regional advisory committee would be required 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.

The bill would take effect September 1, 2019.