

**Legislative Regulation
Review Committee**

2009-061

Department of Public Health

**STRIKE PLANS FOR HEALTH CARE
FACILITIES**

IMPORTANT: Read instructions on bottom of Certification Page before completing this form. Failure to comply with instructions may cause disapproval of proposed Regulations.

STATE OF CONNECTICUT REGULATION OF

Department of Public Health Concerning

Strike Contingency Plans for Health Care Facilities

Section 1. The Regulations of Connecticut State Agencies are amended by adding section 19a-127n-1 to section 19a-127n-2, inclusive as follows:

Section 19a-497-1. Strike contingency plans for health care facilities

- (a) Upon receipt of notice of an anticipated strike action, a health care institution, as defined in Section 19a-490 of the Connecticut General Statutes, shall immediately notify the Department of Public Health of such anticipated action and provide the Department a copy of the strike notice.
- (b) A strike contingency plan shall be submitted to the Department pursuant to Section 19a-497 of the Connecticut General Statutes. Such plan shall be filed with the Department as soon after a health care institution receives notification of a strike as possible but in no event later than five (5) calendar days prior to the [onset of an anticipated strike action] date set forth for the strike in the notice received by the health care institution. [The strike contingency plan shall contain the following information, as appropriate:]
- [(a)](c) [Strike Contingency Plan Requirements for Hospitals] The strike contingency plan for hospitals shall contain the following information:
- (1) Name, address, [level of care and] licensed capacity of the facility and satellite locations;
 - (2) Name of labor organization that has notified the facility of its intention to strike;
 - (3) Date and time the strike is expected to occur;
 - (4) Categories and numbers of personnel expected to strike at each site;
 - (5) Names, addresses and telephone numbers of the following: [facility owner,] president, administrator, medical director, medical staff, director of nurses, assistant director of nurses, maintenance supervisor;
 - (6) Names and emergency telephone numbers of the following:
 - (A) Local fire department;
 - (B) Local police department;
 - (C) Local director of health;
 - (D) Utility companies: (gas, water, electricity, telephone);
 - (E) Ambulance service;
 - (F) Closest hospital able to admit patients or clients in case of an emergency; and
 - (G) All providers of basic services to the facility (i.e., oxygen service, emergency generator repair service, fuel supplier, electrical and plumbing service [also], suppliers or vendors of food and provisions, linen, pharmaceutical and medical supplies); and
 - (H) Staff person charged with overall coordination of the facility's services during the strike.
 - (I) The chair of the Board of Directors and the chief executive officer.
 - (7) Description of plans for the [operation] provision of professional and support services during the strike[.];
 - (8) Security measures specific to strike activities;
 - (9) Plan for orientation and training of replacement staff in emergency procedures related to the facility's patients or clients prior to the replacement staff assuming duties;
 - (10) Plan for assuring access of patients or clients, personnel, visitors and vendors to and from the facility during the strike including special security arrangements to assure their safety and facility safety.
- [(b)](d) The Strike Contingency Plan Requirements for Nursing Homes, [Rest Homes,] Residential Care Homes, [Health Care Facilities for the Handicapped,] Residential Alcohol or Drug Treatment Facilities, and Infirmaries in Educational Institutions shall contain the following information:
- (1) Name, address, [level of care] licensure category and licensed capacity of the facility;
 - (2) Name of labor organization that has notified the facility of its intention to strike;
 - (3) Date and time the strike is expected to occur;
 - (4) Categories and numbers of personnel expected to strike;
 - (5) Names, addresses and telephone numbers of the following: facility owner, administrator, medical director, medical staff, director of nurses, assistant director of nurses, maintenance supervisor;

**STATE OF CONNECTICUT
REGULATION**

OF

Department of Public Health
Concerning

Strike Contingency Plans for Health Care Facilities

- (6) Names and emergency telephone numbers of the following:
- (A) Local fire department;
 - (B) Local police department
 - (C) Local director of health;
 - (D) Utility companies: (gas, water, electricity, telephone);
 - (E) Ambulance service;
 - (F) Closest hospital able to admit patients or clients in case of an emergency;
 - (G) All providers of basic services to the facility (i.e., oxygen service, emergency generator repair service, fuel supplier, electrical and plumbing service [also], suppliers or vendors of food and provisions, linen, pharmaceutical and medical supplies); and
 - (H) Staff person charged with overall coordination of the facility's services during the strike;
 - (I) The chair of the Board of Directors and the chief executive officer.
- (7) Current patient or client census;
- (8) Numbers and diagnoses of [critical, unstable, bed bound, ambulatory] patients or clients by unit;
- (9) Procedure by which to notify patients or clients and their [spouses, relatives,] family, guardians or conservators of the impending strike;
- (10) Staffing patterns, by shift, for all services which the facility intends to maintain during the strike;
- (11) Names and titles of all facility staff, by assignment and shift, who will be on duty during the strike;
- (12) Sources of any additional personnel that may be necessary to meet the staffing patterns described in subdivision (10) of this subsection;
- (13) Plan for orientation and training of replacement staff in emergency procedures [for personnel unfamiliar with] related to the facility or the facility's patients or clients prior to the replacement staff assuming duties;
- (14) Plan for update of patient care plans, discharge plans and W-10 transfer forms;
- (15) Any changes in the tasks and responsibilities assigned to personnel including but not limited to nursing, dietary, maintenance functions for which the individual has been trained meets all applicable state and federal requirements;
- (16) If a reduction of patient or client census is anticipated, the names and types of health care facilities which will admit transferred patients or clients during the strike;
- (17) Plan for assuring access of patients or clients, personnel or visitors to and from the facility during the strike including special security arrangements to assure their safety and facility safety;
- [(18)] Description of special security arrangements to assure patient or client, staff and facility safety;]
- [(19)](18) [Inventory of pharmaceutical and medical supplies and amount of provisions needed for at least the period of one (1) week and description of plans for delivery of same;] An adequate inventory of at least a one week supply of pharmaceutical and medical supplies. If additional supplies are needed to meet the one week minimum standard, a copy of the supply order must be attached to the strike contingency plan;
- [(20)] (19) [Inventory of food supplies and amount of provisions needed for at least the period of one (1) week and description of plans for delivery of same;] An adequate inventory of at least a one week supply of food and provisions. If additional supplies are needed to meet the one week minimum standard, a copy of the supply order must be attached to the strike contingency plan ;
- [(21)] (20) [Inventory of linen supply and laundry needed for at least the period of one (1) week and description of plans for delivery of same;] An adequate inventory of at least a one week supply of linens, laundry, dishwashing and cleaning supplies. If additional supplies are needed to meet the one week minimum standard, a copy of the supply order must be attached to the strike contingency plan;
- [(22)] (21) [Inventory of fuel supply and amount needed for at least the period of one (1) week and description of plans for delivery of same; and] An adequate inventory of at least a one week supply of fuel. If additional fuel is needed to meet the one week minimum standard, a copy of the supply order must be attached to the strike contingency plan.
- [(23)] (22) [Description of plans for [the operation of] professional and support services during the strike.] A detailed plan for the delivery of supplies as identified in subsection 18 through 21 of these regulations and with the provision of alternate delivery sites if vendors choose not to cross the picket line.

STATE OF CONNECTICUT
REGULATION
OF
Department of Public Health
Concerning

Strike Contingency Plans for Health Care Facilities

- [(c)](e) The Strike Contingency Plan [Requirements] for [Out-Patient Medical Facilities] Outpatient Clinics Operated by a Corporation or Municipality shall contain the following information:
- (1) Name, address, and [level of care] licensure category of the facility;
 - (2) Name of labor organization that has notified the facility of its intention to strike;
 - (3) Date and time the strike is expected to occur;
 - (4) Categories and numbers of personnel expected to strike;
 - (5) Names, addresses and telephone numbers of the following: [facility owner,] president, administrator, medical director, medical staff, nursing staff;
 - (6) Names and emergency telephone numbers of the following:
 - (A) Local fire department;
 - (B) Local police department;
 - (C) Local director of health;
 - (D) Utility companies: (gas, water, electricity, telephone);
 - (E) Ambulance Service;
 - (F) Closest hospital able to [admit] care for patients in case of an emergency;
 - (G) All providers of basic services to the facility (i.e., oxygen service, emergency generator repair service, fuel supplier, electrical and plumbing service [also], suppliers or vendors of [food and provisions,] linen, pharmaceutical and medical supplies); and
 - (H) Staff person charged with overall coordination of the facility's services during the strike;
 - (I) The chair of the Board of Directors and the chief executive officer.
 - (7) Current patient or client caseload;
 - (8) Procedure by which to notify patients or clients and their [spouses, relatives,] families, guardians or conservators of the impending strike;
 - (9) Staffing patterns, by shift, for all services which the facility intends to maintain during the strike;
 - (10) Names and titles of all facility staff, by assignment and shift, who will be on duty during the strike;
 - (11) Plan for orientation and training of replacement staff in emergency procedures [for personnel unfamiliar with] related to the facility or the facility's patients or clients prior to the replacement staff assuming duties;
 - (12) Any changes in the tasks and responsibilities assigned to personnel including but not limited to nursing, dietary, maintenance functions for which the individual has been trained and meets all applicable state and federal requirements;
 - (13) If a reduction in caseload or services is anticipated, the names and types of facilities which will provide service to these patients or clients during the strike, and plans for transmitting information on the care or services to be provided;
 - (14) Plan for assuring access of patients or clients, personnel, vendors [or] and visitors to and from the facility during the strike;
 - (15) Description of special security arrangements to assure patient or client, staff, vendors, visitors and facility safety;
 - (16) [Inventory of pharmaceutical and medical supplies and amounts needed for at least the period of one (1) week and description of plans for delivery of same;] An adequate inventory of at least a one week supply of pharmaceutical and medical supplies. If additional supplies are needed to meet the one week minimum standard, a copy of the supply order must be attached to the strike contingency plan;
 - (17) [Inventory of linen supply and laundry needed for at least the period of one (1) week and description of plans for delivery of same;] An adequate inventory of at least a one week supply of linens, laundry, dishwashing and cleaning supplies. If additional supplies are needed to meet the one week minimum standard, a copy of the supply order must be attached to the strike contingency plan
 - (18) [Inventory of fuel supply and amount needed for at least the period of one (1) week and description of plans for delivery of same; and] An adequate inventory of at least a one week supply of fuel. If additional fuel is needed to meet the one week minimum standard, a copy of the supply order must be attached to the strike contingency plan.
 - (19) A plan that shall describe the operation of the professional and support services during the strike including the mechanism utilized to inform said individuals of the potential strike and the provisions to ensure professional and support services are maintained.
- [(e)](f) The Strike Contingency Plan [Requirements] for Home Health Care Agencies and Homemaker-Home Health Aid Agencies shall contain the following information:
- (1) Name, address [and level of care] of the agency;

STATE OF CONNECTICUT
REGULATION
OF
Department of Public Health
Concerning

Strike Contingency Plans for Health Care Facilities

- (2) Name of labor organization that has notified the agency of its intention to strike;
 - (3) Date and time the strike is expected to occur;
 - (4) Categories and numbers of personnel expected to strike;
 - (5) Names, addresses and telephone numbers of the following: agency owner; administrator; supervisor of clinical services; and other supervisory personnel;
 - (6) Names and emergency telephone numbers of the following:
 - (A) Local director of health;
 - [(B)] Ambulance service;
 - (C) Closest medical facilities available to admit patients in case of an emergency;
 - (D) All providers of basic services to the patients of the agency (i.e., oxygen service, suppliers or vendors of pharmaceutical and medical supplies); and
 - (E)](B) Staff person charged with overall coordination of the agency's services during the strike;
 - (C) The chair of the Board of Directors and the chief executive officer;
 - (7) Current patient caseload;
 - (8) Numbers and diagnosis of critical, unstable, [bed-bound and ambulatory] patients;
 - (9) Procedure by which to notify patients and their [spouses, relatives] family, guardians or conservators of the impending strike;
 - (10) Staffing patterns, by shift, for all services which the agency intends to maintain during the strike;
 - (11) Names and titles of all agency staff, by assignment and shift, who will be on duty during the strike;
 - (12) Sources of any additional personnel that may be necessary to meet the staffing pattern described in subdivision (10) of this subsection;
 - (13) Plan for orientation of replacement staff to the agency's policies and patient caseload and training in emergency procedures [or personnel unfamiliar with] related to the agency or patients prior to the replacement staff assuming duties;
 - (14) Plan for update of patient care plans, discharge plans and W-10 transfer forms;
 - (15) Any changes in tasks and responsibilities assigned to personnel;
 - (16) If a reduction of patient caseload is anticipated, the names, telephone numbers and types of health care facilities which will admit transferred patients during the strike;
 - (17) Plans for assuring access of [patients,] staff or visitors to and from the agency during the strike;
 - (18) Description of special security arrangements to assure [patient and] staff safety during the strike; and
 - [(19)] Inventory of pharmaceutical and medical supplies and amounts needed for at least a one week period and description of plans for delivery of same; and
 - (20)](19) Description of plans for the operation of professional and support services during the strike.
- [(f)](g) Civil Penalty. Each institution as defined in section 19a-490 of the Connecticut General Statutes shall be subject to a civil penalty pursuant to section 19a-497 of the Connecticut General Statutes for noncompliance with any provision of [said] Connecticut General Statutes section 19a-497 including, but not limited to:
- (1) The [Failure] failure to submit a strike contingency plan to the Department of Public Health not later than five (5) days prior to the indicated strike date; [or]
 - (2) The [Failure] failure of the plan to include documentation [sufficient to support that the institution has arranged for] as required by these regulations; and
 - (3) The failure of the plan to meets the needs of the population served by the institution in any respect, including but not limited to, any of the following:
 - (A) adequate staffing;
 - (B) security;
 - (C) pharmaceuticals;
 - (D) essential supplies, [to include] including but not [be] limited to, food, fuel and medical supplies; and
 - (E) necessary services to meet the needs of the patient population served by the institution in the event of a strike.

**STATE OF CONNECTICUT
REGULATION
OF
Department of Public Health
Concerning**

Strike Contingency Plans for Health Care Facilities

Statement of Purpose:

Statement of Purpose Includes: (A) the purpose of the regulation is to update section 19a-497-1 regarding strike contingency planning for Health Care Facilities; (B) this regulation requires health care institutions to provide the Department with a copy of the strike notice and modifies the regulation as it pertains to alternate sites and replacement staff. It also clarifies the language regarding inventory of daily provisions needed such as medical supplies, pharmaceuticals, food supplies and housekeeping; (C) the proposed regulation will update, modify, and delete outdated regulations in order to reflect current standards for strike contingency planning for Health Care Facilities in section 19a-497-1.

Be it known that the foregoing:

Regulations Emergency Regulations
are: Adopted Amended as hereinabove stated Repealed

By the aforesaid agency pursuant to:

Sections 19a-497 of the General Statutes.
 Section of the General Statutes, as amended by Public Act No. of the Public Acts.
 Public Act No. of the Public Acts.

After publication in the Connecticut Law Journal on July 7, 2009 the notice of the proposal to:

Adopt Amend Repeal such regulations

(If applicable): And the holding of an advertised public hearing on

WHEREFORE, the foregoing regulations are hereby:

Adopted Amended as hereinabove stated Repealed

Effective:

When filed with the Secretary of the State.

(OR)

The ____ day of ____ 20__.

Witness whereof:	Date 2/23/09	SIGNED (Head of Board, Agency or Commission) <i>Robert D. Salas</i>	OFFICIAL TITLE, DULY AUTHORIZED Commissioner
---------------------	-----------------	--	---

Approved by the Attorney General as to legal sufficiency in accordance with Sec. 4-169, as amended, C.G.S.:	SIGNED <i>WUB</i>	DATE 9/23/09	OFFICIAL TITLE, DULY AUTHORIZED ASSOC. ATTY. GENERAL
---	----------------------	-----------------	---

- Approved
- Disapproved
- Disapproved in part, (Indicate Section Numbers disapproved only)
- Rejected without prejudice.

The Legislative Review Committee in accordance with Sec. 4-170, as amended, of the General Statutes	DATE	SIGNED (Clerk of the Legislative Regulation Review Committee)
---	------	---

Two certified copies received and filed, and one such copy forwarded to the Commission on Official Legal Publications in accordance with Section 4-172, as amended, of the General Statutes.

DATE	SIGNED (Secretary of the State)	BY
------	---------------------------------	----

INSTRUCTIONS

One copy of all regulations for adoption, amendment or repeal, except emergency regulations, must be presented to the Attorney General for his determination of legal sufficiency. Section 4-169 of the General Statutes.

Eighteen copies of all regulations for adoption, amendment or repeal, except emergency regulations, must be presented to the standing Legislative Regulation Review Committee for its approval. Section 4-170 of the General Statutes.

Each regulation must be in the form intended for publication and must include the appropriate regulation section number and section heading. Section 4-172 of the General Statutes.

Indicate by "(NEW)" in heading if new regulation. Amended regulations must contain new language in capital letters and deleted language in brackets. Section 4-170 of the General Statutes.