

SENATE, No. 703
STATE OF NEW JERSEY
219th LEGISLATURE

PRE-FILED FOR INTRODUCTION IN THE 2020 SESSION

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SYNOPSIS

Requires certain health care professionals to undergo implicit bias training.

CURRENT VERSION OF TEXT

Introduced Pending Technical Review by Legislative Counsel.

AN ACT concerning implicit bias training and supplementing Title 26 of the Revised Statutes.

BE IT ENACTED *by the Senate and General Assembly of the State of New Jersey:*

1. a. Every hospital that provides inpatient maternity services and every birthing center licensed in the State pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.) shall implement an evidence-based implicit bias training program for all health professionals who provide perinatal treatment and care to pregnant women at the hospital or birthing center.

b. The training program shall include, but not be limited to:

(1) identifying previous and current unconscious biases and misinformation when providing perinatal treatment and care to pregnant women;

(2) identifying personal, interpersonal, institutional, and cultural barriers to inclusion;

(3) information on the effects of historical and contemporary exclusion and oppression of minority communities;

(4) information about cultural identity across racial and ethnic groups;

(5) information about communicating more effectively across racial, ethnic, religious, and gender identities;

(6) information about reproductive justice;

(7) a discussion on power dynamics and organizational decision-making and their effects on implicit bias;

(8) a discussion on health inequities and racial and ethnic disparities within the field of perinatal care, and how implicit bias may contribute to pregnancy-related deaths and maternal and infant health outcomes; and

(9) corrective measures to decrease implicit bias at the interpersonal and institutional levels.

c. A health care professional who provides perinatal treatment and care to pregnant women at a hospital that provides inpatient maternity services or a birthing center licensed in the State pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.) shall:

(1) complete the training program on implicit bias at such times and intervals as the hospital or birthing center shall require;

(2) complete a refresher course under the training program, designed to provide the health care professional with updated information about racial, ethnic, and cultural identity, and best practices in decreasing interpersonal and institutional implicit bias, every two years or on a more frequent basis, if deemed necessary by the hospital or birthing center; and

(3) receive a certification from the hospital or birthing center upon successful completion of the training program.

d. As used in this section:

“Implicit bias” means a bias in judgment or behavior that results from subtle cognitive processes, including implicit prejudice and implicit stereotypes, that often operate at a level below conscious awareness and without intentional control.

“Implicit stereotypes” means the unconscious attributions of particular qualities to a member of a certain social group, influenced by experience, and based on learned associations between various qualities and social categories, including race and gender.

2. The Department of Health shall adopt rules and regulations, pursuant to the provisions of the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), to effectuate the purposes of this act.

3. This act shall take effect on the first day of the sixth month next following the date of enactment.

STATEMENT

This bill requires every hospital that provides inpatient maternity services and every birthing center licensed in the State pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.) to implement an evidence-based implicit bias training program for all health professionals who provide perinatal treatment and care to pregnant women at the hospital or birthing center.

The training program would include, but not be limited to: identifying previous and current unconscious biases and misinformation when providing perinatal treatment and care to pregnant women; identifying personal,

interpersonal, institutional, and cultural barriers to inclusion; information about the effects of historical and contemporary exclusion and oppression of minority communities; information about cultural identity across racial and ethnic groups; information about communicating more effectively across racial, ethnic, religious, and gender identities; information about reproductive justice; discussions on power dynamics and organizational decision-making and their effects on implicit bias, and on health inequities and racial and ethnic disparities within the field of perinatal care, and how implicit bias may contribute to pregnancy-related deaths and maternal and infant health outcomes; and corrective measures to decrease implicit bias at the interpersonal and institutional levels.

A health care professional who provides perinatal treatment and care to pregnant women at a hospital or birthing center would be required to complete the training program and a refresher course, every two years. The refresher course would be designed to provide the health care professional with updated information about racial, ethnic, and cultural identity, and best practices in decreasing interpersonal and institutional implicit bias. Upon successful completion of the training program, the health care professional would receive a certification from the hospital or birthing center.

As defined in the bill, “implicit bias” means a bias in judgment or behavior that results from subtle cognitive processes, including implicit prejudice and implicit stereotypes, that often operate at a level below conscious awareness and without intentional control. “Implicit stereotypes” means the unconscious attributions of particular qualities to a member of a certain social group, influenced by experience, and based on learned associations between various qualities and social categories, including race and gender.