

VETO MESSAGE: No

GOVERNOR'S PRESS RELEASE ON SIGNING: Yes

FOLLOWING WERE PRINTED:

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REPORTS: No

HEARINGS: No

NEWSPAPER ARTICLES: Yes

"New laws will provide services to gun violence victims,"
Burlington County Times (Willingboro, NJ) - August 6, 2019

"NJ aims to help victims of gun violence in wake of mass shootings in Dayton and El Paso,"
northjersey.com (Published as northjersey.com (NJ)) - August 5, 2019

"New Jersey enacts 3 gun violence intervention laws,"
Associated Press State Wire: New Jersey (NJ) - August 6, 2019

"'This country has to stand up' At signing of anti-violence bills, a call for U.S. to follow the state's lead,"
The Star-Ledger, (Newark, NJ) - August 6, 2019

"A trio of gun bills now law in N.J.,"
South Jersey Times (NJ) - August 6, 2019

"New laws put gun violence in crosshairs Laws,"
Times, The (Trenton, NJ) - August 6, 2019

"TRENTON — Already known for its strict restrictions on guns,"
Burlington County Times (Willingboro, NJ) - August 6, 2019

RWH/CL

P.L. 2019, CHAPTER 209, *approved August 5, 2019*
Senate, No. 3312 (*First Reprint*)

1 AN ACT concerning trauma centers and violence prevention in New
2 Jersey and supplementing Chapter 2KK of Title 26 of the
3 Revised Statutes.

4
5 **BE IT ENACTED** by the Senate and General Assembly of the State
6 of New Jersey:

7
8 1. a. (1) A hospital in the State, which provides services in a
9 municipality that has a disproportionately high rate of firearm
10 violence or homicide, ¹**【shall not be】** and is¹ designated as a Level
11 One or Level Two trauma center, under the provisions of P.L.2013,
12 c.233 (C.26:2KK-1 et seq.) and the regulations adopted pursuant
13 thereto, ¹**【unless the hospital operates or contracts】** upon the
14 availability of monies which are necessary to fully fund a hospital-
15 based or hospital-linked violence intervention program, shall
16 operate or contract¹ with a hospital-based or hospital-linked
17 violence intervention program that provides appropriate counseling,
18 case management, and social services to patients who have been
19 injured as a result of violence.

20 ¹**【(2) Any hospital in the State that provides services in a**
21 **municipality that has a disproportionately high rate of firearm**
22 **violence or homicide, and that was designated as a Level One or**
23 **Level Two trauma center prior to the effective date of this section,**
24 **shall be required to establish or contract with a hospital-based or**
25 **hospital-linked violence intervention program within one year after**
26 **the effective date of this act, or shall have its designation revoked.**

27 **(3)】** (2)¹ For the purposes of enforcing the provisions of this
28 subsection, the commissioner shall establish criteria to be used in
29 identifying municipalities that have disproportionately high rates of
30 firearm violence or homicide, and shall develop a list of such
31 municipalities, based on the application of identified criteria ¹, in
32 coordination with the Department of Law and Public Safety¹. The
33 list shall be published on the department’s Internet website, and
34 shall be revised and updated as necessary, on at least an annual
35 basis.

36 b. The commissioner shall adopt rules and regulations,
37 pursuant to the “Administrative Procedure Act,” P.L.1968, c.410
38 (C.52:14B-1 et seq.), as may be necessary to implement the
39 provisions of this section. Such rules and regulations shall identify,

EXPLANATION – Matter enclosed in bold-faced brackets **【thus】 in the above bill is not enacted and is intended to be omitted in the law.**

Matter underlined thus is new matter.

Matter enclosed in superscript numerals has been adopted as follows:

¹**Assembly floor amendments adopted June 20, 2019.**

1 at a minimum, the criteria that the department will use, pursuant to
2 paragraph ~~1[(3)]~~ (2)¹ of subsection a. of this section, to determine
3 which of the State's municipalities have a disproportionately high
4 rate of firearm violence or homicide.

5 c. As used in this section:

6 "Commissioner" means the Commissioner of Health.

7 "Department" means the Department of Health.

8 "Hospital-based or hospital-linked violence intervention
9 program" means a program that is operated by a hospital, or by a
10 person or entity who is contracted by the hospital, and which works
11 to end cycles of violence through the provision of intensive
12 counseling, case management, and social services to patients in the
13 hospital who are recovering from gunshot wounds and other injuries
14 resulting from violence.

15

16 2. This act shall take effect immediately.

17

18

19

20

21 _____
22 Requires certain hospitals to provide hospital-based or hospital-
23 linked violence intervention programs, in order to be designated as
Level One or Level Two trauma centers.

SENATE, No. 3312

STATE OF NEW JERSEY 218th LEGISLATURE

INTRODUCED JANUARY 15, 2019

Sponsored by:

Senator JOSEPH F. VITALE

District 19 (Middlesex)

Senator RICHARD J. CODEY

District 27 (Essex and Morris)

Assemblyman LOUIS D. GREENWALD

District 6 (Burlington and Camden)

Assemblywoman VERLINA REYNOLDS-JACKSON

District 15 (Hunterdon and Mercer)

Assemblyman DANIEL R. BENSON

District 14 (Mercer and Middlesex)

Co-Sponsored by:

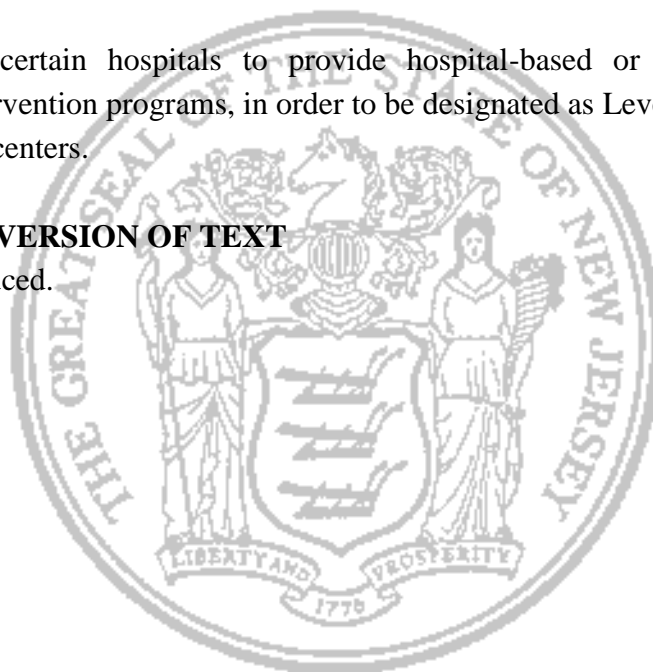
**Senator Ruiz, Assemblywomen Pintor Marin, Speight, Murphy,
Timberlake, Lopez, Quijano, McKnight and Jasey**

SYNOPSIS

Requires certain hospitals to provide hospital-based or hospital-linked violence intervention programs, in order to be designated as Level One or Level Two trauma centers.

CURRENT VERSION OF TEXT

As introduced.



(Sponsorship Updated As Of: 6/21/2019)

1 AN ACT concerning trauma centers and violence prevention in New
2 Jersey and supplementing Chapter 2KK of Title 26 of the
3 Revised Statutes.

4
5 **BE IT ENACTED** *by the Senate and General Assembly of the State*
6 *of New Jersey:*

7
8 1. a. (1) A hospital in the State, which provides services in a
9 municipality that has a disproportionately high rate of firearm
10 violence or homicide, shall not be designated as a Level One or
11 Level Two trauma center, under the provisions of P.L.2013, c.233
12 (C.26:2KK-1 et seq.) and the regulations adopted pursuant thereto,
13 unless the hospital operates or contracts with a hospital-based or
14 hospital-linked violence intervention program that provides
15 appropriate counseling, case management, and social services to
16 patients who have been injured as a result of violence.

17 (2) Any hospital in the State that provides services in a
18 municipality that has a disproportionately high rate of firearm
19 violence or homicide, and that was designated as a Level One or
20 Level Two trauma center prior to the effective date of this section,
21 shall be required to establish or contract with a hospital-based or
22 hospital-linked violence intervention program within one year after
23 the effective date of this act, or shall have its designation revoked.

24 (3) For the purposes of enforcing the provisions of this
25 subsection, the commissioner shall establish criteria to be used in
26 identifying municipalities that have disproportionately high rates of
27 firearm violence or homicide, and shall develop a list of such
28 municipalities, based on the application of identified criteria. The
29 list shall be published on the department's Internet website, and
30 shall be revised and updated as necessary, on at least an annual
31 basis.

32 b. The commissioner shall adopt rules and regulations,
33 pursuant to the "Administrative Procedure Act," P.L.1968, c.410
34 (C.52:14B-1 et seq.), as may be necessary to implement the
35 provisions of this section. Such rules and regulations shall identify,
36 at a minimum, the criteria that the department will use, pursuant to
37 paragraph (3) of subsection a. of this section, to determine which of
38 the State's municipalities have a disproportionately high rate of
39 firearm violence or homicide.

40 c. As used in this section:

41 "Commissioner" means the Commissioner of Health.

42 "Department" means the Department of Health.

43 "Hospital-based or hospital-linked violence intervention
44 program" means a program that is operated by a hospital, or by a
45 person or entity who is contracted by the hospital, and which works
46 to end cycles of violence through the provision of intensive
47 counseling, case management, and social services to patients in the

1 hospital who are recovering from gunshot wounds and other injuries
2 resulting from violence.

3

4 2. This act shall take effect immediately.

5

6

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STATEMENT

8

9 This bill would provide that any hospital in the State, which
10 provides services in a municipality that has a disproportionately
11 high rate of firearm violence or homicides, may not be designated
12 as a Level One or Level Two trauma center, under the provisions of
13 P.L.2013, c.233 (C.26:2KK-1 et seq.) and the regulations adopted
14 pursuant thereto, unless the hospital operates or contracts with a
15 hospital-based or hospital-linked violence intervention program that
16 provides appropriate counseling, case management, and social
17 services to patients who have been injured as a result of violence.
18 Any such hospital that, as of the bill's effective date, was already
19 designated as a Level One or Level Two trauma center, will be
20 required to establish or contract with a hospital-based or hospital-
21 linked violence intervention program within one year after the bill
22 becomes effective, or will have its designation revoked.

23 For the purposes of enforcing the bill's provisions, the
24 Commissioner of Health would be required to establish criteria to
25 be used in identifying municipalities that have disproportionately
26 high rates of firearm violence or homicide, and would further be
27 required to develop a list of such municipalities, based on the
28 application of such identified criteria. The list is to be published on
29 the Internet website of the Department of Health, and is to be
30 revised and updated as necessary, on at least an annual basis.

31 Many U.S. hospitals see a "revolving door" of gunshot injuries,
32 as patients who have been shot are at a very high risk of being
33 violently reinjured and perpetrating retaliatory violence themselves.
34 In some urban hospitals, up to 45 percent of patients treated for
35 violent injuries like gunshot wounds are re-injured within five
36 years, and up to 20 percent of those patients are killed in the five
37 year period following discharge. Hospital-based or hospital-linked
38 violence intervention programs (HVIPs) work to break these cycles
39 of violence by providing intensive counseling, case management,
40 and social services to patients who are recovering from gunshot
41 wounds and other violent injuries. Multiple case studies and
42 controlled trials have shown that HVIPs are highly effective at
43 reducing patients' rates of violence and re-injury. Moreover,
44 because HVIPs effectively reduce the likelihood that patients will
45 be re-hospitalized or will perpetrate violence in the future, they
46 have also been associated with substantial cost savings in health
47 care.

STATEMENT TO
SENATE, No. 3312

with Assembly Floor Amendments
(Proposed by Assemblyman GREENWALD)

ADOPTED: JUNE 20, 2019

These floor amendments would remove the provisions of the bill that provided for the revocation of a hospital's designation as a Level One or Level Two trauma center for failure to operate or contract with a hospital-based or hospital-linked violence intervention program, and insert a new provision providing that the operation of, or execution of a contract with, a hospital-based or hospital-linked violence intervention program will be contingent upon the availability of monies that are necessary to fully fund a hospital-based or hospital-linked violence intervention program. The amendments would further require the Commissioner of Health to coordinate with the Department of Law and Public Safety in developing a list of municipalities that have disproportionately high rates of firearm violence or homicide.

ASSEMBLY, No. 4802

STATE OF NEW JERSEY 218th LEGISLATURE

INTRODUCED DECEMBER 10, 2018

Sponsored by:

Assemblyman LOUIS D. GREENWALD

District 6 (Burlington and Camden)

Assemblywoman VERLINA REYNOLDS-JACKSON

District 15 (Hunterdon and Mercer)

Assemblyman DANIEL R. BENSON

District 14 (Mercer and Middlesex)

Co-Sponsored by:

Assemblywomen Pintor Marin and Speight

SYNOPSIS

Requires certain hospitals to provide hospital-based or hospital-linked violence intervention programs, in order to be designated as Level One or Level Two trauma centers.

CURRENT VERSION OF TEXT

As introduced.



(Sponsorship Updated As Of: 2/26/2019)

1 AN ACT concerning trauma centers and violence prevention in New
2 Jersey and supplementing Chapter 2KK of Title 26 of the
3 Revised Statutes.

4
5 **BE IT ENACTED** by the Senate and General Assembly of the State
6 of New Jersey:

7
8 1. a. (1) A hospital in the State, which provides services in a
9 municipality that has a disproportionately high rate of firearm
10 violence or homicide, shall not be designated as a Level One or
11 Level Two trauma center, under the provisions of P.L.2013, c.233
12 (C.26:2KK-1 et seq.) and the regulations adopted pursuant thereto,
13 unless the hospital operates or contracts with a hospital-based or
14 hospital-linked violence intervention program that provides
15 appropriate counseling, case management, and social services to
16 patients who have been injured as a result of violence.

17 (2) Any hospital in the State that provides services in a
18 municipality that has a disproportionately high rate of firearm
19 violence or homicide, and that was designated as a Level One or
20 Level Two trauma center prior to the effective date of this section,
21 shall be required to establish or contract with a hospital-based or
22 hospital-linked violence intervention program within one year after
23 the effective date of this act, or shall have its designation revoked.

24 (3) For the purposes of enforcing the provisions of this
25 subsection, the commissioner shall establish criteria to be used in
26 identifying municipalities that have disproportionately high rates of
27 firearm violence or homicide, and shall develop a list of such
28 municipalities, based on the application of identified criteria. The
29 list shall be published on the department's Internet website, and
30 shall be revised and updated as necessary, on at least an annual
31 basis.

32 b. The commissioner shall adopt rules and regulations,
33 pursuant to the "Administrative Procedure Act," P.L.1968, c.410
34 (C.52:14B-1 et seq.), as may be necessary to implement the
35 provisions of this section. Such rules and regulations shall identify,
36 at a minimum, the criteria that the department will use, pursuant to
37 paragraph (3) of subsection a. of this section, to determine which of
38 the State's municipalities have a disproportionately high rate of
39 firearm violence or homicide.

40 c. As used in this section:

41 "Commissioner" means the Commissioner of Health.

42 "Department" means the Department of Health.

43 "Hospital-based or hospital-linked violence intervention
44 program" means a program that is operated by a hospital, or by a
45 person or entity who is contracted by the hospital, and which works
46 to end cycles of violence through the provision of intensive
47 counseling, case management, and social services to patients in the
48 hospital who are recovering from gunshot wounds and other injuries
49 resulting from violence.

1 2. This act shall take effect immediately.

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3

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STATEMENT

5

6 This bill would provide that any hospital in the State, which
7 provides services in a municipality that has a disproportionately
8 high rate of firearm violence or homicides, may not be designated
9 as a Level One or Level Two trauma center, under the provisions of
10 P.L.2013, c.233 (C.26:2KK-1 et seq.) and the regulations adopted
11 pursuant thereto, unless the hospital operates or contracts with a
12 hospital-based or hospital-linked violence intervention program that
13 provides appropriate counseling, case management, and social
14 services to patients who have been injured as a result of violence.
15 Any such hospital that, as of the bill's effective date, was already
16 designated as a Level One or Level Two trauma center, will be
17 required to establish or contract with a hospital-based or hospital-
18 linked violence intervention program within one year after the bill
19 becomes effective, or will have its designation revoked.

20 For the purposes of enforcing the bill's provisions, the
21 Commissioner of Health would be required to establish criteria to
22 be used in identifying municipalities that have disproportionately
23 high rates of firearm violence or homicide, and would further be
24 required to develop a list of such municipalities, based on the
25 application of such identified criteria. The list is to be published on
26 the Internet website of the Department of Health, and is to be
27 revised and updated as necessary, on at least an annual basis.

28 Many U.S. hospitals see a "revolving door" of gunshot injuries,
29 as patients who have been shot are at a very high risk of being
30 violently reinjured and perpetrating retaliatory violence themselves.
31 In some urban hospitals, up to 45 percent of patients treated for
32 violent injuries like gunshot wounds are re-injured within five
33 years, and up to 20 percent of those patients are killed in the five
34 year period following discharge. Hospital-based or hospital-linked
35 violence intervention programs (HVIPs) work to break these cycles
36 of violence by providing intensive counseling, case management,
37 and social services to patients who are recovering from gunshot
38 wounds and other violent injuries. Multiple case studies and
39 controlled trials have shown that HVIPs are highly effective at
40 reducing patients' rates of violence and re-injury. Moreover,
41 because HVIPs effectively reduce the likelihood that patients will
42 be re-hospitalized or will perpetrate violence in the future, they
43 have also been associated with substantial cost savings in health
44 care.

ASSEMBLY HEALTH AND SENIOR SERVICES COMMITTEE

STATEMENT TO

ASSEMBLY, No. 4802

with committee amendments

STATE OF NEW JERSEY

DATED: MARCH 7, 2019

The Assembly Health and Senior Services Committee reports favorably and with committee amendments Assembly Bill No. 4802.

As amended, this bill provides that any hospital in the State, which provides services in a municipality that has a disproportionately high rate of firearm violence or homicides and is designated as a Level One or Level Two trauma center, under the provisions of P.L.2013, c.233 (C.26:2KK-1 et seq.) and the regulations adopted pursuant thereto, upon the availability of monies which are necessary to fully fund a hospital-based or hospital-linked violence intervention program, is to operate or contract with a hospital-based or hospital-linked violence intervention program that provides appropriate counseling, case management, and social services to patients who have been injured as a result of violence.

For the purposes of enforcing the bill's provisions, the Commissioner of Health is to be required to establish criteria to be used in identifying municipalities that have disproportionately high rates of firearm violence or homicide, and would further be required to develop a list of such municipalities, based on the application of such identified criteria. The list is to be published on the Internet website of the Department of Health, and is to be revised and updated as necessary, on at least an annual basis.

COMMITTEE AMENDMENTS:

The committee amendments remove the provisions of the bill which revoke a hospital's designation as a Level One or Level Two trauma center for failure to operate or contract with a hospital-based or hospital-linked violence intervention program. The committee amendments also provide that operating or contracting with a hospital-based or hospital-linked violence intervention program is contingent upon the availability of upon the availability of monies which are necessary to fully fund a hospital-based or hospital-linked violence intervention program.

ASSEMBLY APPROPRIATIONS COMMITTEE

STATEMENT TO

[First Reprint]

ASSEMBLY, No. 4802

with committee amendments

STATE OF NEW JERSEY

DATED: JUNE 13, 2019

The Assembly Appropriations Committee reports favorably and with committee amendments Assembly Bill No. 4802 (1R).

As amended, the bill provides that any hospital in the State, which provides services in a municipality that has a disproportionately high rate of firearm violence or homicides and is designated as a Level One or Level Two trauma center, under the provisions of P.L.2013, c.233 (C.26:2KK-1 et seq.) and the regulations adopted pursuant thereto, upon the availability of monies which are necessary to fully fund a hospital-based or hospital-linked violence intervention program, is to operate or contract with a hospital-based or hospital-linked violence intervention program that provides appropriate counseling, case management, and social services to patients who have been injured as a result of violence.

For the purposes of enforcing the bill's provisions, the Commissioner of Health is to be required to establish criteria to be used in identifying municipalities that have disproportionately high rates of firearm violence or homicide, and would further be required to develop a list of such municipalities, based on the application of such identified criteria, in coordination with the Department of Law and Public Safety. The list is to be published on the Internet website of the Department of Health, and is to be revised and updated as necessary, on at least an annual basis.

COMMITTEE AMENDMENTS:

This committee amended the bill to requiring the Commissioner of Health to coordinate with the Department of Law and Public Safety.

FISCAL IMPACT:

This bill is not certified as requiring a fiscal note.

Acting Governor Oliver Signs Gun Violence Intervention Bills

08/05/2019

TRENTON – Acting Governor Sheila Oliver today signed a package of gun violence intervention bills that underscore New Jersey’s commitment to combating gun violence. The bills, which are part of Gun Safety Package 2.0, follow a series of comprehensive gun safety laws signed by Governor Phil Murphy in July 2019. The three bills signed today establish community-based non-violence and gun violence prevention programs. Recent domestic terrorist attacks in El Paso, Texas, and Dayton, Ohio underscore the need for comprehensive, holistic approaches to gun safety in our communities.

“Every day gun violence is tearing our communities apart, especially in underserved communities of color. Governor Murphy and I are determined to stop the violence through intervention programming,” **said Acting Governor Sheila Oliver, who serves as Commissioner of the Department of Community Affairs.** “The bills I am signing today will help cut gun violence off at the source through comprehensive hospital-based violence intervention programs (HBIV) that will educate, care for, and protect New Jersey residents to help save lives.”

“We must bring all of our resources to bear on this critical public health issue,” said **New Jersey Department of Health Acting Commissioner Judith M. Persichilli.** “Hospital-based violence intervention programs have been proven to reduce violence, lower societal costs, and protect and assist victims. The Department of Health welcomes these new tools in the fight to reduce gun violence in our state.”

“As public leaders, we have a moral obligation to do something about the gun violence sweeping this country,” **said Attorney General Grewal.** “And in New Jersey, we actually are. So I urge our nation’s leaders to take a page from the New Jersey playbook, which treats the epidemic of gun violence like the public health crisis it is and that focuses on prevention, treatment, and enforcement. The time to do so is now.”

Acting Governor Oliver signed the following three bills into law:

S3301 (Cryan, Ruiz/Greenwald, Reynolds-Jackson, Benson) – Establishes “Hospital-Based Violence Intervention Program Initiative” in the Department of Health.

S3312 (Vitale, Codey/Greenwald, Reynolds-Jackson, Benson) – Requires Level One and Level Two trauma centers to provide hospital-based or hospital-linked violence intervention programs upon available funding.

S3323 (Cryan, Ruiz/Greenwald, Johnson, Murphy) – Requires the Victims of Crime Compensation Office victim counseling service to partner with trauma centers to refer certain victims to violence and intervention programs.

“When victims of gunshots arrive to the Emergency Room, the first thing to do is stop the bleeding and dress the wounds,” **said Senator Joseph Vitale.** “But a band-aid does not address the root causes or the mental trauma resulting from such a violent act. This legislation ensures that hospitals that regularly deal with these kinds of emergencies are also equipped with the tools for secondary treatment – counseling and social services – so as to treat the cycle of violence that these violent acts often produce.”

“There are actions we can take to respond to gun violence and other violent acts to prevent the cycle of violence from continuing,” **said Senator Joseph Cryan.** “The hospital intervention programs have proven to be successful in reducing the likelihood of retaliation by victims and preventing them from being victimized again. Getting the Crime Victims Compensation office engaged with the hospital trauma centers that treat crime victims will help prevent them from being victimized again and from engaging in retaliation. The intervention programs that get to victims while they are hospitalized can reach them at a key time with social services, counseling and case management. We want to be resourceful in helping to reduce violence by intervening before it continues.”

“Gun violence is a public health crisis plaguing many communities around the country,” **said Senator M. Teresa Ruiz.** “The trauma associated with it has a lasting impacted on those directly and indirectly touched by it. Through this legislation we can connect individuals with resources before they are discharged, ensuring that not only their physical health is addressed, but also their mental and emotional well-being.”

“We must continue our due diligence of addressing gun violence in New Jersey, and to do so, we must approach it from every angle,” **said Senator Richard Codey.** “By providing the injured access to resources such as counseling, we will be able to curb the staggeringly high injury recidivism rates here in the state.”

"In recent months, we've seen more acts of mass gun violence in major U.S. cities, Virginia Beach, and our own state capitol that claim too many lives and leave numerous injured," **said Assembly Majority Leader Lou Greenwald**. "How do we help prevent these acts from recurring again and again by individuals who believe gun violence or any violence is the answer to a problem? Many who are on the frontlines believe a coordinated effort is the best way to tackle public health problems of mental health and violence. Community and hospital-based prevention services are the key to improving safety in our communities."

"In Trenton, we understand the impact that gun violence has on a community every day. We see permanent effects of retaliatory behavior and the need to help hospitals close the revolving door of gunshot victims as a result," **said Assemblywoman Verlina Reynolds-Jackson**. "Getting to survivors before they leave our hospitals is paramount to decreasing violence happening on our streets. Tying hospital-based prevention programs with community programs is the key."

"Many are unaware they can receive help and where to go to obtain it," **said Assemblyman Dan Benson**. "We need to be there for them at the moment it happens in order to have a long-term effect on their lives. Connecting hospital-based intervention programs and community-based programs will help put an end to the cycle of violence."

"Even police officers are debriefed after engaging in fire. This goes a long way in making sure they are mentally able to return to the field," **said Assemblyman Gordon Johnson**. "Gun violence survivors should have access to this type of mental health care in counseling. Helping one person this way can save many others."

"Silencing gun violence will require a multi-faceted legislative approach," said **Assemblywoman Carol Murphy**. "A part of this is bridging the efforts of hospital-based programs and community programs. With these steps, we continue the fight to make our communities safer."

"I applaud the Giffords Law Center for developing these measures with the Legislature and am extremely pleased that evidence-based strategies will be expanded in New Jersey," **said Bill Castner, Senior Advisor to the Governor on Gun Safety**. "Governor Murphy and Lt. Governor Oliver are working very hard on an issue Washington is complete neglecting – reducing our plague of gun violence."

"Gun violence continues to leave families and communities feeling less safe across the country. It's no different in New Jersey," **said Nico Bocour, State Legislative Director at Giffords**. "With these bill signings, Governor Phil Murphy and Lt. Governor Sheila Oliver are taking bold, innovative action in response to the gun violence communities face on a daily basis. We thank Assembly Majority Leader Lou Greenwald and Senior Advisor Bill Castner for leading this lifesaving package of bills forward. New Jersey continues to be a leader on gun safety and these substantial reforms to support evidence-based strategies in the Garden State's most impacted cities will save lives."

