

CHAPTER 37J
PROGRAMS OF ASSERTIVE COMMUNITY
TREATMENT

Authority

N.J.S.A. 30:1-12, 30:9A-1 and 30:9A-10.

Source and Effective Date

R.2008 d.256, effective July 30, 2008.
See: 40 N.J.R. 974(a), 40 N.J.R. 5227(b).

Chapter Expiration Date

Chapter 37J, Programs of Assertive Community Treatment, expires on July 30, 2013.

Chapter Historical Note

Chapter 37J, Programs of Assertive Community Treatment, was adopted as R.2003 d.68, effective February 3, 2003. See: 34 N.J.R. 906(a), 35 N.J.R. 875(a).

Chapter 37J, Programs of Assertive Community Treatment, was readopted as R.2008 d.256, effective July 30, 2008. See: Source and Effective Date. See, also, section annotations.

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SUBCHAPTER 1. GENERAL PROVISIONS

10:37J-1.1 Scope and purpose

(a) The rules in this chapter shall apply to all Programs of Assertive Community Treatment (PACT).

(b) The purpose of PACT is to provide comprehensive, integrated rehabilitation, treatment and support services to individuals with serious and persistent mental illness, who have had repeated psychiatric hospitalizations, and who are at serious risk for psychiatric hospitalization. PACT, provided in vivo by a multi-disciplinary service delivery team, is the most intensive program element in the continuum of ambulatory community mental health care. Services to an individual

may vary in type and intensity. Treatment has no predetermined end point. These rules provide a description of the consumers for whom the services are targeted, the range of services to be provided, the requirements and responsibilities of the provider agencies and their staff, and the procedures required to provide the services.

(c) PACT teams shall be guided by the following principles:

1. It is possible for adults with a severe and persistent mental illness to achieve wellness, engage in the process of recovery and live successfully in normal community settings when adequate supports and services are provided.
2. PACT services shall be delivered with high regard for the dignity and autonomy of each consumer.
3. PACT services shall be delivered with an attitude of optimism that fully considers each consumer's strengths and abilities.
4. PACT services shall be highly individualized. All facets of PACT service delivery shall be intentionally tailored to the unique needs and choices of individual consumers.
5. PACT shall function as a self-contained clinical program that is the fixed point of responsibility for providing treatment, rehabilitation, and support services. Accordingly, there will be minimal referral of consumers to other program entities for specialized treatment, rehabilitation, and support services.
6. Treatment interventions and rehabilitation services shall be based on the goal of each consumer developing the specific skills that are necessary for achieving consumer-defined recovery outcomes.
7. PACT services shall be delivered in a manner that respects the cultural and language preferences of the consumer.

Amended by R.2008 d.256, effective September 15, 2008.
See: 40 N.J.R. 974(a), 40 N.J.R. 5227(b).

In (b), deleted "those" following "services to" in the first sentence, substituted "who have had repeated psychiatric" for "as evidenced by repeated", and substituted "provider agencies" for "PA's"; in (c)1, deleted "most" preceding "adults" and inserted "achieve wellness,;" added new (c)2 through (c)4; recodified former (c)2 and (c)3 as (c)5; rewrote (c)5; deleted former (c)4; and added (c)6 and (c)7.

10:37J-1.2 Definitions

The words and terms in this chapter shall have the following meanings unless the content clearly indicates otherwise.

"Assessment" means the ongoing process of identifying and reviewing a consumer's strengths, needs, and consumer-defined goals, based upon input from the consumer, significant others, family members and health professionals. The

assessment process continues throughout the entire length of service.

“Boarding home” means a building containing two or more units of dwelling space arranged or intended for single room occupancy, exclusive of any such unit occupied by an owner or operator, offering no financial or personal services other than a room, food service, and laundry to two or more residents unrelated to the operator. Such facilities shall be licensed by the Department of Community Affairs, pursuant to P.L. 1979, c.496 (Rooming House/Boarding House Act of 1979).

“Co-occurring disorder” means the presence of both one or more substance-related disorders, as well as one or more mental illness.

“Crisis assessment and intervention” means in-home or in-community emergency care provided by a PACT team member(s) who has direct access to other PACT team members, including the psychiatrist and PACT director/coach, for consultation and assistance.

“Department” means the Department of Human Services.

“Development and support of recreational and social activities and relationships” means provision of skill training, including supervised teaching activities and experiences, provided individually or in small groups to improve communication and facilitate appropriate interpersonal behavior.

“Direct assistance to ensure that each consumer obtains the basic necessities of life, such as food, clothing, physical health and dental care, shelter and safety,” means that the PACT team will maximally assist consumers in meeting their concrete needs. To the extent possible, the team will assist enrollees in securing and maintaining safe, affordable housing in settings that are clean, attractive and promote stability and well-being.

“Direct assistance with structuring and performing basic daily living activities” means the provision of hands-on assistance with a wide range of independent living tasks.

“Division” means the Division of Mental Health Services within the Department of Human Services.

“Dual disorder services” means specialized, integrated assessment and stage-based treatment of individuals who have co-occurring mental illness and substance abuse disorders.

“In vivo” means assistance is provided in the consumer’s home and other normative community settings. Direct assistance, individualized support, supervision, problem solving and the teaching of independent living skills are provided in the consumer’s natural settings.

“Level I standards” means those standards with which mental health programs must be in full compliance in order to be granted or to continue to receive a full Department license. Level I standards include those standards that relate most

directly to consumer rights, safety, and staffing. With specific reference to the PACT program, Level I standards are: N.J.A.C. 10:37J-2.4, Program intensity; N.J.A.C. 10:37-2.5(a) through (h), (l) and (m), Services to be provided and service coordination; and N.J.A.C. 10:37J-2.8(a) through (d) and (i), Staff requirements.

“Medication prescription, administration, monitoring, and documentation” means psychiatric assessment and the prescription of appropriate medication. PACT staff, under the direction of the team psychiatrist, shall participate in the medication-related education, delivery, administration including observed self-administration, monitoring and documentation of medication. Staff shall assess and document the consumer’s mental illness symptoms and behavior in response to medication and monitor for psychotropic medication side effects. Staff shall report observations to the team psychiatrist.

“Minimizing consumer involvement with the criminal justice system” means that the PACT team collaborates with police, court personnel, and jail and prison officials to ensure appropriate use of legal and mental health services. The team informs and educates the court, corrections and police officials in regard to the consumer’s needs.

“Observed self-administration of medication” means a procedure in which any medication is taken orally, injected, or topically or otherwise administered by a PACT enrollee to himself or herself under the observation of a PACT team member. The complete procedure of self-administration includes removing an individual dose from a previously dispensed (in accordance with the New Jersey State Board of Pharmacy rules, N.J.A.C. 13:39), labeled container (including a unit dose container), verifying it with the directions on the label, and taking orally, injecting, or topically or otherwise administering the medication.

“PACT” means Programs of Assertive Community Treatment.

“PACT director” means a designated manager within the administrative structure of the PA whom, although not a PACT team member, is dedicated to the success of the team(s). The director provides clinical supervision (or ensures that it takes place), leadership, support, guidance, networking, and advocacy efforts on behalf of the team(s) and the consumers that it serves.

“Primary consumer” means, for the purposes of this rule, a person who is most challenged by the need to cope with a serious and persistent mental illness and who meets the eligibility requirements set forth in this subchapter.

“Provider agency” (PA) means a public or private organization, which has a contract or an affiliation agreement with the Division to provide PACT services.

“Provision of support to consumer’s family and other members of the consumer’s social network” means that the