

10A:16-2.23 Annual inspection

(a) The Division of Operations, Health Services Unit, Director of Medical Services, shall visit and inspect the medical programs at all correctional facilities at least once a year in order to review the facility's medical services activities.

(b) Within 15 business days after the annual inspection, a written report of the findings shall be prepared by the Division of Operations, Health Services Unit, Director of Medical Services and submitted to the:

1. Commissioner or designee;
2. Assistant Commissioner, Division of Operations;
3. Appropriate Division Director;
4. Administrator;
5. Responsible health authority; and
6. Correctional facility chief physician.

(c) The responsible health authority shall respond through the correctional facility Administrator within 15 business days of receipt of the written inspection report to the Health Services Unit, Director of Medical Services with a written action plan for correcting any deficiencies.

Amended by R.2002 d.65, effective March 4, 2002.
See: 33 N.J.R. 3857(a), 34 N.J.R. 1027(a).

In (b), added "or designee" in 1, deleted existing 2 and recodified existing 3 through 7 as 2 through 6.

administratively and clinically responsible for the dental services and/or program of the correctional facility and immediately be notified in writing if the designee(s) is changed.

(b) The dental health services provider, through the responsible health authority, shall be responsible for ensuring that only those dental conditions assessed as necessary in the judgment of the dentist are treated to maintain the inmate's dental health.

(c) A dental consultant(s) may be employed to conduct clinical quality assurance reviews as deemed necessary by the Department of Corrections or the dental health services provider.

10A:16-3.3 Dental staff

(a) The following dental personnel may provide dental services;

1. Dentists;
2. Dental Specialists;
3. Dental Hygienists; and
4. Dental Assistants.

(b) Dental staff shall practice within the guidelines of the Dental Practice Act, N.J.S.A. 45:6-1 et seq.

Amended by R.2005 d.179, effective June 6, 2005.
See: 37 N.J.R. 188(a), 37 N.J.R. 2020(b).
In (b), amended the N.J.S.A. reference.

SUBCHAPTER 3. DENTAL SERVICES

10A:16-3.1 Director of Dental Services, Department of Corrections

(a) The Director of Dental Services of the Department, serving under the Division of Operations Health Services Unit Supervisor, shall:

1. Advise the administrative staff of the Department of Corrections regarding the formulation of Departmental dental program directives and policies; and
2. Oversee the provision of dental services to inmates within the Department of Corrections.

10A:16-3.2 Administration of dental services and program(s)

(a) The dental health services provider in each correctional facility shall be responsible to designate a dental health services staff member as the responsible health authority who shall be administratively and/or clinically responsible for the management and direction of the dental services and/or program. The Division of Operations, Health Services Unit, shall be notified in writing as to who is

10A:16-3.4 Licensure

(a) Only persons licensed and registered in accordance with N.J.S.A. 45:6-1 et seq. shall be permitted to practice dentistry within the State of New Jersey.

(b) The following licenses and certificates of dentists shall be forwarded to the Health Services Unit, Director of Dental Services:

1. The New Jersey License to practice dentistry;
2. The Drug Enforcement Administration Federal Narcotics License;
3. The State of New Jersey Consumer Health Service Certificate of Registration for Controlled Dangerous Substances (C.D.S.);
4. The current certificate of liability insurance appropriate for area of practice; and
5. Any certification(s) for services other than primary dental care.

(c) Final approval to hire dental personnel may be granted only after credential review by the Health Services Unit, Director of Dental Services.

(d) Copies of licenses of dental personnel shall be maintained both at the correctional facility dental department and at the Division of Operations, Health Services Unit.

(e) The dental health care provider shall report all disciplinary actions and license suspensions to the Health Services Unit, Director of Dental Services and other State regulatory bodies, as required by law.

(f) Dental personnel shall be responsible for providing proof of license(s) and certification(s) renewal to the Health Services Unit, Director of Dental Services through the dental health care provider. The responsible health authority of each dental services and/or program shall conduct an annual review of license and certification validation and shall provide a written report of such annually to the Health Services Unit Supervisor.

(g) All persons taking dental x-rays shall be licensed by the State of New Jersey in accordance with N.J.S.A. 26:2D-27 et seq.

Amended by R.2005 d.179, effective June 6, 2005.

See: 37 N.J.R. 188(a), 37 N.J.R. 2020(b).

In (g), amended the N.J.S.A. reference.

10A:16-3.5 Dental personnel identifications badges

In accordance with N.J.A.C. 13:30-8.9, all dental personnel shall wear identification badges indicating their name and professional title while working in the facility.

Amended by R.2005 d.179, effective June 6, 2005.

See: 37 N.J.R. 188(a), 37 N.J.R. 2020(b).

Substituted "N.J.A.C." for "N.J.S.A." and inserted "while working in the facility" at the end.

10A:16-3.6 Inmate work assignments in dental clinics

(a) Inmates shall be prohibited from performing the following dental care services:

1. Providing direct or indirect inmate care services;
2. Scheduling dental appointments;
3. Determining the access of other inmates to dental services;
4. Handling or having access to:
 - i. Surgical instruments;
 - ii. Syringes;
 - iii. Needles;
 - iv. Medications; and
 - v. Dental records.
5. Operating any dental equipment;
6. Handling regulated medical waste, except as established in (b) below.

(b) Inmates may assist in the dental area in the performance of routine housekeeping duties. Handling of regulated medical waste shall be limited to housekeeping clean-up duties, for which appropriate training and supplies have been provided to the inmate.

(c) Inmates working in dental areas shall be kept under close supervision by custody and dental personnel.

Amended by R.2005 d.179, effective June 6, 2005.

See: 37 N.J.R. 188(a), 37 N.J.R. 2020(b).

In (a), inserted ", except as established in (b) below" in 6; in (b), added the last sentence.

10A:16-3.7 Dental services coverage

(a) Arrangements shall be made to provide dental service coverage by the dental health care provider 24 hours per day, seven days per week.

(b) Written policies and procedures for dental services shall be developed in accordance with N.J.A.C. 10A:16-3.21.

(c) All staff likely to be needed or involved in a dental emergency shall be trained in providing dental first aid under emergency conditions. This training shall include, but not be limited to:

1. Signs and symptoms of an emergency;
2. Types of action required for potential emergency situations;
3. Methods of obtaining emergency dental services; and
4. Procedures for transferring the inmate to an appropriate dental provider or facility.

10A:16-3.8 Use of community facilities and consultants

(a) Provisions shall be made by the dental health care provider for the use of general and specialist community dental offices or hospitals when deemed necessary.

(b) Use of general and specialist community dental offices or hospitals shall be subject to the review and written approval of the Health Services Unit, Director of Dental Services.

10A:16-3.9 Dental intake screening and comprehensive dental examination

(a) A dental intake screening shall be performed on all inmates within 72 hours of admission to a reception unit. The dental intake screening shall include, but not be limited to:

1. A panoramic x-ray; or
2. A full mouth x-ray series.

(b) A comprehensive dental examination shall be accomplished within 14 business days after the inmate's arrival at the correctional facility initially assigned. The examination shall include a manual and visual examination of the structures related to the dental field using a mirror.

(c) In the event an inmate bypasses a reception unit of the Department of Corrections, the dental health care provider at the receiving correctional facility shall perform the dental intake screening and comprehensive dental examination of the inmate set forth in (a) and (b) above.

(d) The examination should be augmented by an x-ray examination with appropriate reading and application to the clinical findings. Such diagnostic mechanisms as study models, photographs, tooth vitality determination may also be used.

(e) The findings of the examination shall be recorded on the EMR Dental Intake Encounter form in accordance with N.J.A.C. 13:30-8.7.

Amended by R.2005 d.179, effective June 6, 2005.
See: 37 N.J.R. 188(a), 37 N.J.R. 2020(b).

In (c), inserted "an inmate bypasses" following "In the event", deleted "is bypassed" following "Department of Corrections", and substituted "set forth" for "as outlined"; in (e), substituted "EMR Dental Intake Encounter form" for "Form DR-101 Oral Diagnosis Card and shall be recorded" following "shall be recorded on the".

10A:16-3.10 Dental treatment classification and priority treatment guidelines

(a) Dental staff in each correctional facility shall follow and comply with the Health Services Unit dental treatment classifications to be used following the initial examination and as treatment progresses as established in the Dental Services manual (See: N.J.A.C. 10A:16-3.22).

(b) Dental staff in each correctional facility shall follow and comply with the Health Services Unit guidelines for dental priority treatment as established in the Dental Services manual (see: N.J.A.C. 10A:16-3.22). Dental treatment classifications for which priority treatment may apply includes, but is not limited to:

1. Emergency dental treatment such as, but not limited to, fractures, infection and pain relief; and
2. Insufficient dentition to masticate therefore requiring prosthetic appliances.

Amended by R.2005 d.179, effective June 6, 2005.
See: 37 N.J.R. 188(a), 37 N.J.R. 2020(b).
Rewrote the section.

10A:16-3.11 Routine dental treatment

(a) Excluding emergency treatment, dental treatment shall be rendered in accordance with the written Health Services Unit dental classifications and priority treatment guidelines as established in the Dental Services manual (see: N.J.A.C. 10A:16-3.22).

(b) Routine dental treatment shall be scheduled and provided to the inmate within 30 calendar days after such treatment is identified by a dentist during a dental examination.

Amended by R.2005 d.179, effective June 6, 2005.
See: 37 N.J.R. 188(a), 37 N.J.R. 2020(b).

In (a), deleted "Department's" following "in accordance with the" and inserted "as established in the Dental Services manual (see: N.J.A.C. 10A:16-3.22)" following "treatment guidelines"; in (b), substituted "such treatment is" for "being" preceding "identified".

10A:16-3.12 Oral surgery

(a) Oral surgery shall be performed when the prognosis for success and anticipated gain is sufficient to offset risk to the inmate.

(b) Trauma shall be managed within the scope of the qualification(s) and experience of the dentist(s) or by referral. Management of trauma shall include:

1. Suturing of facial and oral mucosal lacerations;
2. Reimplantations;
3. Repositioning and affixation of involved teeth and alveolar processes;
4. Management of facial bone fractures; and
5. Control of bleeding.

Amended by R.2005 d.179, effective June 6, 2005.
See: 37 N.J.R. 188(a), 37 N.J.R. 2020(b).
In (a), substituted "performed" for "used".

10A:16-3.13 Preventive dentistry

(a) An annual dental cleaning and an annual recall dental examination shall be provided to all inmates.

(b) Preventive dentistry shall be part of inmate patient education.

(c) Preventive dentistry education shall include, but not be limited to, the following:

1. Care of teeth;
2. Function of teeth;
3. Brushing and flossing of teeth;
4. Prosthetic appliance maintenance; and
5. Direct instructional programs.

10A:16-3.14 Administration of medications

(a) Medications prescribed by the dentist may be administered, in the manner prescribed, by designated health care provider staff.

(b) No one shall give medications or administer treatment, with the exception of first aid, unless it is under the express direction or prescription of the dentist or the physician.

Amended by R.2005 d.179, effective June 6, 2005.

See: 37 N.J.R. 188(a), 37 N.J.R. 2020(b).

In (b), substituted "express" for "expressed".

10A:16-3.15 Local anesthesia

Local anesthesia is considered the anesthesia of choice. It shall be used whenever it is considered to be in the best interest of the inmate, or in the dentist's judgment, for success of the procedure.

10A:16-3.16 General anesthesia

(a) General anesthesia shall be indicated when inmates have certain medical complications that would contraindicate the use of local anesthetics.

(b) General anesthesia shall only be administered in the surgical clinic of a consultant or a hospital.

(c) Consultation shall be made prior to the administration of general anesthesia in accordance with this subchapter.

10A:16-3.17 Records

(a) The EMR Dental Intake Encounter form shall be completed on each inmate committed to the Department of Corrections or admitted to a reception correctional facility and shall include the dental classification assignment.

(b) Any MRF dental records shall be sent with inmates when they are transferred to another correctional facility. The dentist receiving the dental records shall review the records within 72 hours of the inmate's transfer.

(c) A daily record shall be maintained describing the activity of the Dental Department on a statistical and narrative basis. These shall be compiled by the week, month and year.

(d) Confidentiality of inmate records shall be maintained in accordance with N.J.A.C. 10A:22, Records.

Amended by R.2005 d.179, effective June 6, 2005.

See: 37 N.J.R. 188(a), 37 N.J.R. 2020(b).

Rewrote (a); in (b), substituted "Any MRF dental" for "Dental" preceding "records".

10A:16-3.18 Informed consent for treatment

Informed consent for treatment shall be handled in accordance with N.J.A.C. 10A:16-5, Informed Consent to Perform Medical, Dental or Surgical Treatment.

10A:16-3.19 Dental equipment and supplies

(a) The dental equipment, instruments and supplies shall be closely supervised by the dental health care provider staff.

(b) Used and unused needles, syringes and scalpels shall be protected against theft or pilferage by:

1. Providing locked storage;
2. Providing supervision of distribution; and
3. Requiring signed inventories at the termination of each shift by the incoming and outgoing dentist.

(c) Shelf life of dated supplies and equipment which requires sterilization shall be current.

10A:16-3.20 Dental research

(a) Dental research shall not be conducted except that which involves the study of clinical records and/or data, such as, but not limited to, statistical studies.

(b) Dental research projects shall be conducted in accordance with N.J.A.C. 10A:1-10, Research.

10A:16-3.21 Reporting responsibilities of all dental services

(a) Monthly and annual reports shall be prepared by the responsible health authority and submitted to the:

1. Assistant Commissioner, Division of Operations;
2. Correctional facility Administrator; and
3. Director of Dental Services.

(b) The monthly and annual reports shall include, but not be limited to, the following:

1. A narrative summary of the major developments and highlights, including, but not limited to:
 - i. Meetings, conferences, workshops and the like attended by staff;
 - ii. Future plans for services; and
 - iii. Problem areas;
2. A statistical summary of dental amounts;
3. A statistical summary of required examinations and specialty care;
4. A statistical summary of dental prosthetics ordered and dispensed;
5. A statistical summary of inmate complaints received and resolved; and
6. Any information required by contract.

(c) The annual report must be submitted by August 31 of each year and will include all periods involved on a fiscal year basis.