

10A:16-4.8 Reporting responsibilities

(a) Monthly and annual reports shall be prepared and submitted to the correctional facility Superintendent and to the Office of Institutional Support Services (O.I.S.S.) Director of Psychology.

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

1. Major developments and highlights;
2. Types of psychological services provided;
3. The testing program;
4. Problem areas;
5. Future plans for services;
6. Meetings, conferences, workshops, and the like attended by staff;
7. Official visits by government representatives and other community groups;
8. Statistical comparisons with the previous monthly or annual reports; and
9. Any information as directed by the correctional facility Superintendent and/or Office of Institutional Support Services (O.I.S.S.) Health Services Unit.

(c) Correctional facilities shall report the following to the appropriate Assistant Commissioner and the O.I.S.S. Director of Psychological Services.

1. Misconduct by psychology staff members;
2. Resignations of psychology staff; and
3. Conflicts between interdisciplinary staff.

(d) Monthly reports, annual reports and, as required, special reports shall be prepared by the O.I.S.S. Director of Psychological Services of the Department of Corrections and submitted to the Supervisor, Health Services Unit (O.I.S.S.).

Amended by R.1988 d.542, effective November 21, 1988.
 See: 20 N.J.R. 2128(a), 20 N.J.R. 2929(a).
 Substituted "Supervisor, Health Services Unit" for "Director, Office of Institutional Support Services".
 Amended by R.1992 d.283, effective July 6, 1992.
 See: 24 N.J.R. 1677(a), 24 N.J.R. 2452(a).
 Revised (a) and (b).

1. Surgery;
2. Intrusive procedures;
3. Medical/dental treatment; and
4. Medical and dental procedures governed by informed consent standards in the community.

(b) In order to obtain written informed consent, Form 306-I CONSENT FOR MEDICAL, DENTAL OR SURGICAL TREATMENT shall be completely filled in and signed by the inmate or guardian and a witness. The signed consent form shall be maintained in the inmate's medical record.

(c) The inmate or guardian must:

1. Have legal capacity to give written consent and be able to exercise free choice without any element of force or coercion;
2. Have sufficient knowledge and comprehension of the nature of the treatment to enable him or her to make an understanding and enlightened decision; and
3. Be informed of the:
 - i. Nature, duration and purpose of the medical, dental or surgical procedure;
 - ii. Alternative, if any, to the procedure;
 - iii. All of the inconveniences and hazards that may occur; and
 - iv. Effects upon health or person which can be reasonably expected.

(d) Information regarding the medical, dental or surgical procedure shall be provided by the medical staff; that is, physician, dentist or registered nurse.

(e) If there is doubt as to the inmate's mental capacity to make an informed decision, he or she shall be examined by the psychiatrist of the correctional facility and the Office of Institutional Support Services (O.I.S.S.) Health Services Supervisor shall be notified.

Amended by R.1992 d.283, effective July 6, 1992.
 See: 24 N.J.R. 1677(a), 24 N.J.R. 2452(a).
 Revised (e).

10A:16-5.2 Exception to adult inmate written consent requirement

(a) Written consent shall not be required in the case of adult inmates (18 years or older) in the following circumstances:

1. In a case certified by a licensed physician or dentist to be one of grave emergency which requires immediate surgical intervention or other treatment in order to prevent the death of, or serious consequences to such inmate; and

SUBCHAPTER 5. INFORMED CONSENT TO PERFORM MEDICAL, DENTAL OR SURGICAL TREATMENT

10A:16-5.1 Express written consent required

(a) The express written consent of the inmate shall be required for:

2. In any case in which a court of competent jurisdiction has determined that the inmate is incompetent to give informed consent on his or her own behalf, or is otherwise ordered to undergo treatment (see N.J.A.C. 10A:16-5.6).

Amended by R.1990 d.369, effective August 6, 1990 (operative August 13, 1990).

See: 22 N.J.R. 1322(a), 22 N.J.R. 2322(a).

Added cross reference at (a)2.

10A:16-5.3 Parent or guardian authorized consent for juvenile inmates

(a) A notice of required treatment shall be forwarded to a parent or guardian of a juvenile inmate by certified mail to the last known address along with a Form 306-I CONSENT FOR MEDICAL, DENTAL OR SURGICAL TREATMENT. The notice shall contain the following information:

1. Precise nature of illness;
2. Proposed treatment; and
3. Date treatment will be performed.

(b) The notice shall be sent at least 10 days in advance of the date recommended for such treatment unless the case is one certified to be emergent, in which case the parent or guardian shall be given the maximum advance notice possible under the circumstances.

(c) A parent or guardian of a juvenile inmate may authorize the provision of required treatment by completing Form 306-I CONSENT FOR MEDICAL, DENTAL OR SURGICAL TREATMENT upon receipt, and forwarding it to the correctional facility by certified mail.

10A:16-5.4 Superintendent authorized consent for juvenile inmates

(a) The Superintendent of a State correctional facility is authorized to give consent for medical, psychiatric, surgical or dental treatment to inmates under the age of 18, under the following conditions:

1. Where a licensed physician, psychiatrist, surgeon or dentist certifies that the treatment to be performed is essential and beneficial to the general health and welfare of such inmate, or will improve the inmate's opportunity for recovery, or prolong or save the inmate's life;
2. Where, after reasonable inquiry, there is no parent or guardian known who is competent to give written consent for the treatment;
3. Where a parent or guardian (after reasonable notice of the proposed treatment and a request for consent, and prior to the date fixed in such notice for the rendering of such treatment) refuses or neglects to execute and submit to the Superintendent in writing either the grant or denial of such consent; or

4. Where a case is certified by a licensed physician, surgeon, psychiatrist or dentist to be one of grave emergency and immediate surgical intervention or other treatment is necessary to prevent the death of, or serious consequences, to such juvenile inmate.

(b) Under the circumstances described in this Subchapter, the Superintendent, granting such consent in the exercise of his or her discretion, upon the recommendation contained in the medical, psychiatric, surgical or dental certification, shall be exempt from personal liability in the performance of such public duty.

(c) In cases where a Superintendent's consent has been executed, complete records, including a signed physician's or dentist's certification of the need for and nature of treatment required and given, and a signed copy of the Superintendent's written authorization to the physician or dentist performing such treatment, shall be filed in the inmate's medical record.

10A:16-5.5 Refusal by adult inmates

In every case in which the adult inmate, after having been informed of his or her condition and the treatment prescribed, refuses treatment, this refusal shall be recorded on Form 306-I CONSENT FOR MEDICAL, DENTAL OR SURGICAL TREATMENT in the space provided. Medical staff shall advise the inmate of the possible medical/dental consequences of such refusal.

Amended by R.1990 d.369, effective August 6, 1990 (operative August 13, 1990).

See: 22 N.J.R. 1322(a), 22 N.J.R. 2322(a).

Deleted (b) referring to Special Assistant for Legal Affairs and referral thereto.

10A:16-5.6 Special medical guardianship of adult inmates

The Department of Corrections shall follow the guidelines and procedures set forth by New Jersey Court Rule 4:86-12, Special Medical Guardianship.

New Rule, R.1990 d.369, effective August 6, 1990 (operative August 13, 1990).

See: 22 N.J.R. 1322(a), 22 N.J.R. 2322(a).

Amended by R.1992 d.283, effective July 6, 1992.

See: 24 N.J.R. 1677(a), 24 N.J.R. 2452(a).

Revised section.

10A:16-5.7 Written procedures

(a) Written procedures consistent with this Subchapter shall be prepared and made part of the correctional facility's medical procedures.

(b) These procedures shall be submitted for review to the Regulatory Officer, Division of Policy and Planning, on or before February 15 of each year.

Recodified from 10A:16-5.6 by R.1990 d.369, effective August 6, 1990 (operative August 13, 1990).

See: 22 N.J.R. 1322(a), 22 N.J.R. 2322(a).

Amended by R.1992 d.283, effective July 6, 1992.