

CHAPTER 37G

SHORT TERM CARE FACILITY STANDARDS

Authority

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SUBCHAPTER 1. GENERAL PROVISIONS

10:37G-1.1 Scope and purpose

(a) The rules in this chapter shall apply to all Division designated short term care facilities (STCF) for adults.

(b) The Mental Health Screening Law (N.J.S.A. 30:4-27.1 et seq.) authorizes the establishment of STCFs to provide assessment services and short term, intensive psychiatric care to individuals with acute mental illness. Patients are admitted to STCFs through a Division designated screening center which has determined that the patient meets the commitment standard of mentally ill and dangerous to self or others, needs intensive treatment, and that appropriate, less restrictive services or facilities are not otherwise available for the patient. The goal of STCFs is to resolve the psychiatric emergency precipitating admission in a location close to the patient's home within an acute length of stay. Services are provided to restore the individual as soon as possible to a level of functioning which promotes return to community residence and ambulatory treatment, or to ensure further inpatient treatment if needed.

10:37G-1.2 Definitions

The following words and terms, as used in this chapter, shall have the following meanings, unless the context clearly indicates otherwise:

“Community liaison” means staff of liaison services who are responsible to facilitate the transition of clients 18 years of age or older from treatment received at State or county operated hospitals or STCFs to treatment received at community mental health programs.

“Designated screening center” means a public ambulatory care service designated by the Commissioner of the Department of Human Services and located in or adjacent to an emergency room in a general hospital, which provides mental health services including assessment, screening, emergency and referral services for mentally ill persons in a specified geographic area. A designated screening center is the facility in the public mental health care system wherein a person who may be in need of treatment at a short-term care psychiatric facility (STCF) or a state or county psychiatric hospital or a unit in a special psychiatric hospital undergoes an assessment to determine what mental health services are appropriate for the person and where those services may be appropriately provided.

“Designation as a short term care facility” means that a facility has received approval for a certificate of need (CON) application by the Department of Health in consultation with the Division and that the Division has determined that the STCF applicant meets all of the rules of this chapter and is authorized to begin operating as a STCF provided the unit also meets applicable Department of Health licensure requirements. The application for designation shall be submitted at least 60 days prior to planned implementation.

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

“Short term care facility (STCF)” means an acute care adult psychiatric unit in a general hospital for short term admission of individuals who meet the legal standards for commitment and require intensive treatment. The STCF shall be designated by the Division of Mental Health Services to serve a specific geographic area within the State. All admissions to short term care facilities must be referred through a designated emergency/screening mental health service.

“Systems review committee (SRC)” means a group of representatives of State and county hospitals, acute care provider agencies, family members and consumers, including STCFs, who, under the auspices of the county mental health board and the Division, participate in the monitoring of the acute psychiatric services system in a geographic area. These committees also recommend revisions to the acute

care service delivery system for the purpose of improving the service delivery for the patients they share in common.

SUBCHAPTER 2. OPERATIONAL STANDARDS

10:37G-2.1 Admission

(a) All patients admitted to the STCF shall be referred exclusively through a designated screening center. Prior to admission, all patients shall receive a face-to-face assessment by both a certified screener and a psychiatrist formally affiliated with the screening center to confirm that the patient is mentally ill, the mental illness causes the person to be dangerous to self or dangerous to others or property and the patient needs care at a STCF because other services are not appropriate or available to meet the person's mental health care needs.

1. There shall be written policies and procedures which describe the referral function of the designated screening center regarding transfers to the STCF from other hospitals or from beds within the same hospital to assure that patients meet the criteria noted at (a) above.

(b) STCF staff shall develop and implement written comprehensive affiliation agreements between the designated screening center, State and county hospitals and community mental health service providers, to facilitate transfer, linkage and access to appropriate aftercare services for patients.

(c) All the affiliation agreements shall be approved by the Division's Assistant Director responsible for the geographical area served by the STCF or his or her designee.

(d) The affiliation agreement with the designated screening center shall clearly delineate the STCF admission criteria and the requirement that all referrals to the STCF emanate from the designated screening center.

(e) Inclusionary and exclusionary admission criteria which describe the diagnostic and patient characteristics appropriate for the STCF shall be written and utilized.

1. Admission criteria shall include the requirement that only individuals who meet the statutory standard of dangerousness to self or others due to mental illness (N.J.S.A. 30:4-27.2h, i and r) and who require intensive treatment shall be admitted to the STCF.

2. Admission criteria shall identify the geographic area or areas in which individuals must reside in order to be considered appropriate for admission to that STCF.

3. Admission criteria shall include the requirement that patients with a dual diagnosis of substance abuse and psychiatric disorder shall be admitted when they meet the other provisions of the admission criteria.

4. Admission criteria shall include a provision that no individual otherwise eligible for admission shall be denied admission due to inability to pay or type of insurance coverage.

(f) The STCF's written procedures shall require the immediate admission of patients who meet the admission criteria whenever an STCF bed is available. When a new patient meets the admissions criteria and all STCF beds are full, current patients shall be reassessed for possible transfer to the less restrictive acute unit or possible transfer to longer term treatment, as appropriate, to allow the admission of the new patient. Pursuant to Division approved written agreements among designated screening centers and STCFs, an STCF may also be contacted regarding a possible admission of a new patient from outside its county whenever all the STCF beds assigned to that patient's county of residence are full or no STCF exists in the patient's county of residence. STCFs can expect the designated screening center with the new admission to inquire regarding the feasibility of such transfers and such approved out-of-county placements.

(g) STCF staff shall comply with the provisions of N.J.S.A. 36:2H-53 ("New Jersey Advance Directives for Health Care Act") including the adoption of such policies and practices as are necessary to provide for routine inquiry at the time of admission and at such other time as are appropriate under the circumstances, concerning the existence and location of an advance directive, pursuant to N.J.S.A. 26:2H-65a.1.

10:37G-2.2 Assessment and service planning

(a) STCF staff shall complete written diagnostic evaluations of each patient which provide clear descriptions of each patient's psychiatric, psychosocial, medical and social service needs.

1. The STCF's written procedures shall require that evaluations include, at a minimum, the following:

i. A psychiatric assessment and mental status examination within 24 hours of admission which includes the patient's and family's psychiatric history. The assessment shall conclude with a diagnosis and treatment recommendations;

ii. A physical examination within 24 hours of admission including a medical, alcohol and substance abuse history. The physical assessment shall result in a summary with conclusions;

iii. A nursing assessment by a registered nurse within 24 hours of admission. The nursing assessment shall conclude with individualized clinical treatment recommendations;