



State of New Jersey

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Administration Bulletin Transmittal Memorandum

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DATE ISSUED: November 3, 2014 **EFFECTIVE DATE:** November 3, 2014

**SUBJECT: Administrative Bulletin 6:01
DHS/DMHAS Pilot Program – Conditional Licensure of Substance Use
Disorder Treatment Programs in Residential Community Release Program
Halfway House Facilities**

Attached is a Policy establishing a Pilot Program for the conditional licensure of substance use disorder ("SUD") treatment programs operating within Residential Community Release Program ("RCRP") halfway house facilities.

Specifically, the Policy sets out the minimum rules and standards that a SUD treatment program operating within a RCRP halfway house facility must adhere to in order to be conditionally licensed by the Office of Licensing ("OOL") within the Department of Human Services ("DHS"). Significantly, this Pilot Program only applies to SUD treatment programs operating within RCRP halfway house facilities that contract with and are fully funded by the Department of Corrections.

A copy of the Policy should be distributed to staff, as appropriate, in order to ensure familiarity with this new DHS/DMHAS Pilot Program initiative.

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CHRIS CHRISTIE
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October 21, 2014

JENNIFER VELEZ
Commissioner

Dear DOC Vendors:

The Department of Human Services ("DHS") and the Department of Corrections ("DOC") are pleased to announce the creation of a pilot program by the DHS Division of Mental Health and Addiction Services for the conditional licensure of substance use disorder ("SUD") treatment programs operating within Residential Community Release Program ("RCRP") halfway house facilities that contract with the DOC. The DMHAS has issued a policy describing the minimum licensing standards required for a RCRP halfway house to obtain a license to operate a SUD treatment program within their facility. A copy of the DMHAS Policy and applicable licensing regulations, N.J.A.C. 10:161B, are attached.

The DHS Office of Licensing will begin accepting applications for licensure as of November 3, 2014. Also, the DHS and DOC will hold a joint information session for vendors regarding licensure under the pilot program.

We thank you for your cooperation in moving forward with this joint endeavor.

Sincerely,



Jennifer Velez, Esq.
DHS Commissioner



Gary M. Lanigan
DOC Commissioner

Attachments

**DEPARTMENT OF HUMAN SERVICES
DIVISION OF MENTAL HEALTH AND ADDICTION SERVICES**

ADMINISTRATIVE BULLETIN 6:01

EFFECTIVE DATE: November 3, 2014

POLICY: Pilot Program for Licensure of Substance Use Disorder Treatment Programs Operating in a Department of Corrections Residential Community Release Program Facility Halfway House

I. PURPOSE

This Policy sets out the parameters for a Pilot Program through the Division of Mental Health and Addiction Services ("Division") for the conditional licensure of a substance use disorder ("SUD") treatment program operating within a Residential Community Release Program Facility ("RCRPF") halfway house in accordance with N.J.A.C. 10:161B-2.7.

Through an administrative process, the Department of Corrections ("DOC") determines eligibility of inmates for admission into various RCRPF settings, including halfway houses, to facilitate community re-integration. Certain RCRPF halfway houses offer SUD treatment programming to inmates prior to their release into the community. Thus, the Division has determined that a Pilot Program shall be established in order to permit the conditional licensure of these SUD treatment programs operating within RCRPF halfway houses for the following reasons:

1. it is in the best interest of the inmates served to receive SUD treatment as part of their community re-integration;
2. it will enrich the quality of the SUD treatment provided by programs to inmates; and
3. it will recognize that SUD treatment services are provided within a uniquely criminogenic rehabilitation environment.

Accordingly, this Policy delineates the minimum rules and standards that a SUD treatment program operating within a RCRPF halfway house must adhere to in order to be conditionally licensed by the Department of Human Services ("DHS").

Further, the Division has determined that a Pilot Program is essential to allow the Division sufficient time to evaluate the integrity of the SUD treatment programming within RCRPF halfway houses and assist in the development of regulations for the licensure of SUD treatment programs in a DOC RCRPF halfway houses.

II. SCOPE & DURATION OF TIME

This Pilot Program shall apply only to agencies or entities that contract with the DOC as a RCRPF halfway house and operate a SUD treatment program within their RCRPF halfway houses. In addition to the SUD treatment program standards set out in this Policy, DOC RCRPF halfway house provider agencies or entities and any SUD treatment programs operating within a RCRPF halfway house must continue to adhere to any and all contractual or regulatory standards established by the DOC for RCRPF halfway houses. Further, because licensure is conditional and pursuant to a Pilot Program, agencies or entities that seek licensure of a SUD treatment program operating within a RCRPF halfway house facility must be fully funded by the DOC and may not seek funding for their SUD treatment program from the Division or DHS.

Consistent with the Division's statutory authority, this Pilot Program and accompanying Policy shall only apply to the conditional licensure of SUD Programs serving individuals age 21 and over. See N.J.S.A. 30:4C-4.5.

This Pilot Program is temporary and will terminate either upon notice by the Division or DHS, or the Department of Corrections ("DOC"). Termination by the Division/DHS or DOC requires 45 days notice. When the pilot program terminates, any conditional license issued during the pilot program will become void. See N.J.A.C. 10:161B-2.2(a). The Pilot Program will terminate when regulations governing licensure of a substance use disorder treatment program in a RCRPF halfway house are adopted.

III. AUTHORITY

N.J.S.A. 26:2B-7 et seq., in particular N.J.S.A. 26:2B-13 and 14; N.J.S.A. 26:2BB-5 through 6; N.J.S.A. 26:2G-1 et seq., in particular N.J.S.A. 26:2G-21, 23 and 25; N.J.S.A. 30:1-12; N.J.A.C. 10:161B-1.1 et seq., in particular N.J.A.C. 10:161B-2.7; and Reorganization Plan 002-2004.

IV. DEFINITIONS

The Definitions found at N.J.A.C. 10:161B-1.3 apply, unless otherwise noted. The following definitions are added for the limited purpose of this Pilot Program.

"ABAM" means the American Board of Addiction Medicine.

"Client" means a DOC inmate determined eligible by the DOC for transfer to an RCRPF halfway house facility who has a DSM diagnosis for a SUD and is receiving SUD treatment services at a SUD program licensed by the DMHAS.

"Department of Corrections" or "DOC" means the New Jersey Department of Corrections.

“Division of Mental Health and Addiction Services,” “Division” or “DMHAS” means the New Jersey Division of Mental Health and Addiction Services within the New Jersey Department of Human Services.

“Facility personnel” means those persons who are employed and/or work for the RCRP halfway house facility.

“Residential Community Release Program Facility” or “RCRPF” means a facility designated as a place of confinement by the DOC Commissioner and operating pursuant to a contractual relationship with the DOC for the housing and provision of various types of treatment and services, including but not limited to substance use disorder treatment, for DOC inmates determined eligible for transfer by DOC to such facilities. For the purpose of this pilot program, Assessment and Treatment Centers are not included.

V. STANDARDS FOR LICENSURE

Under the Pilot Program, a SUD treatment program operating within a RCRPF halfway house must meet the Division’s standards for the licensure of outpatient programs in accordance with N.J.A.C. 10:161B-1.1 et seq.¹ This section provides specific detail as to which standards shall fully apply, which standards have been amended in order to reflect the unique nature of a RCRPF halfway house, and which standards shall be waived in their entirety.

A. Applicable Standards

A SUD treatment program operating within a RCRPF halfway house must meet the standards listed below. In addition, where appropriate, amendments to existing standards have been described.

1. N.J.A.C. 10:161B, Subchapter 1, Definitions and Staff Qualifications and Responsibilities, applies along with the following amendments:
 - a. -1.1 and -1.2 are replaced by the Scope and Purpose set forth at Section I and II of this Policy.
 - b. -1.4:
 - i. at (a) and (a)1, July 15, 2016, may be substituted for June 1, 2012; and
 - ii. at (a), a physician may also have ASAM/ABAM board certification.
 - c. -1.7:
 - i. Because the DOC RCRPF halfway house must employ a Director of

¹ In order to cross-reference between this Policy and the Division’s existing standards for the licensure of outpatient SUD treatment programs, a copy of the outpatient licensure standards is attached.

- Substance Use Disorder Treatment Program (see herein at Section A, 1(d)ii), the DOC RCRPF halfway house does not need a facility administrator whose responsibilities are specific to the substance use disorder treatment program. However, the DOC RCRPF halfway house must have a facility administrator who is responsible for the general administrative oversight of the facility and its staff, including the Director of Substance Use Disorder Treatment Program.
- ii. Those standards found at -1.7(c)1-18 are transferred from the Facility Administrator to the Director of Substance Use Disorder Treatment Program. Those standards apply without amendment, except as to the following:
 - N.J.A.C. 10:161B-1.7(c)6 and 10; the Substance Use Disorder Treatment Program Director's responsibilities shall only apply to those staff and employees of and admission interviews to the substance use disorder treatment program.
 - N.J.A.C. 10:161B-1.7(c)11; "or other approved system" is added after "NJSAMS."
 - N.J.A.C. 10:161B-1.7(c)12; "designated areas of the substance use disorder treatment program" shall be substituted for "physical plant" and the following is deleted, ", and otherwise keeping the facility in compliance with all applicable building, fire and safety codes."
 - N.J.A.C. 10:161B-1.7(c)15; a DOC inmate identified by the DOC assessment process through an evidence-based tool as having criminogenic factors and a moderate to high potential for a substance use disorder shall be considered a "priority population" for purposes of this Pilot Program.
 - d. -1.8:
 - iii. This section shall apply to and a DOC RCRPF halfway house must employ a Director of Substance Use Disorder Treatment Program in lieu of a "director of substance abuse counseling services."
 - At N.J.A.C. 10:161B-1.8(d), the following responsibility is added: " 13. Ensuring that there are policies and procedures in place so that only those DOC inmates screened and identified as having a substance use disorder are admitted to the substance use disorder treatment program for further evaluation and treatment, if necessary."
 - e. -1.9:
 - i. At -1.9(a), "three years from the date of this Policy" shall be substituted for "June 1, 2012."
 - ii. At -1.9(b), "substance use disorder treatment program" shall be substituted for "outpatient treatment facility" and "the date of this Policy" shall be substituted for "June 1, 2009."
 - iii. At -1.9(d)4, this rule is restated as follows: "Obtaining previous

records that are relevant to treatment, including but not limited to any treatment documentation and results from the RCRP Assessment and Treatment Center or any other screening service, records from DOC, and sentencing documentation.

- iv. At -1.9(d)10, the following is added: "i. Coordination of substance use disorder treatment with any other treatment being provided at the RCRP halfway house facility."
- v. At -1.9(d)11, this rule is restated as follows: "Participating as a member of any facility-wide multidisciplinary team and in any RCRPF halfway house disciplinary, progress or other meetings conducted for an assigned DOC inmate."

f. -1.10:

- i. this rule only applies should a substance use disorder treatment program provide dietary services separate from those provided by the RCRPF halfway house.

2. N.J.A.C. 10:161B, Subchapter 2, Licensure Procedures and Enforcement, applies in its entirety. However, the new facility fee of \$1,750 will be waived during the first year of the pilot program. Once regulations are adopted, agencies that contract with DOC as a RCRPF halfway house will be required to comply with all fees identified in N.J.A.C. 10:161B-2.1.
3. N.J.A.C. 10:161B, Subchapter 3, General Requirements, applies in its entirety.
4. N.J.A.C. 10:161B, Subchapter 4, Governing Authority, applies in its entirety.
5. N.J.A.C. 10:161B, Subchapter 5, Administration, applies in its entirety.
6. N.J.A.C. 10:161B, Subchapter 6, Client Care Policies and Services, applies along with the following amendments:
 - a. -6.2(c) is amended as follow: If the facility provides medical and/or nursing service, the program's acceptance of verbal and telephone orders from physicians and other licensed practitioners authorized under New Jersey statute must be in compliance with any and all policies and procedures required by the DOC.
 - b. -6.3(a). The following underlined language is added to -6.3(a), which otherwise remains in its entirety: "(a) Prior to or at the time of admission to the program, the client shall have a full and comprehensive assessment by an appropriately credentialed staff of the program, and the program shall conduct a preadmissions interview with all clients and, . . ."
 - c. -6.3(e)5 is deleted.

- d. -6.4(b) is amended as follows: A client's right to appeal an involuntary discharge and the methods and procedures to be followed by both the client and program with respect to any involuntary discharge shall be in accordance with the policy procedures required by the DOC.
7. N.J.A.C. 10:161B, Subchapter 7, Medical Services, applies along with the following amendments:
- a. In lieu of the standards set out at N.J.A.C. 10:161B-7.1 et seq., the following standards shall apply:
 - i. medical services shall be provided in accordance with any and all policies and procedures required by the DOC; and
 - ii. the program shall implement a procedure for the reporting by program staff to appropriate facility personnel of any client medical symptoms or issues.
 - b. Note: If detoxification and opioid treatment services are provided by the substance use disorder treatment program, then those standards delineated in Subchapter 7 relating to opioid treatment shall apply.
8. N.J.A.C. 10:161B, Subchapter 8, Nursing Services, applies along with the following amendments:
- a. In lieu of the standards set out at N.J.A.C. 10:161B-7.1 et seq., the following standards shall apply:
 - i. medical services shall be provided in accordance with any and all policies and procedures required by the DOC; and
 - ii. the program shall implement a procedure for the reporting by program staff to appropriate facility personnel of any client medical symptoms or issues.
 - b. If detoxification and opioid treatment services are provided by the substance use disorder treatment program, then those standards delineated in Subchapter 8 relating to opioid treatment shall apply.
9. N.J.A.C. 10:161B, Subchapter 9, Client Assessment and Treatment Planning, applies along with the following amendments:
- a. At -9.1(a), "days" shall replace "visits" so that the program's completion of a drug screen and comprehensive biopsychosocial assessment must be completed within three days of admission to the program.
 - b. At -9.2(a)1, "days" shall replace "visits" and the duration of time is changed from 30 days to 15 days so that the client's treatment plan must be entered in the client record at least three days following admission, not to exceed 15 days.

- c. At -9.2(a)2iii, the term “mental health facility” shall be replaced by “mental health program or provider.”
 - d. At -9.2(d), the term of review for the client’s treatment plan and progress is changed from at least every 90 days to at least every 60 days to reflect the client’s duration of residence in the RCRPF halfway house.
10. N.J.A.C. 10:161B, Subchapter 10, Substance Abuse Counseling and Supportive Services, applies along with the following amendments:
- a. Those standards related to the provision of partial care services shall not apply.
 - b. Those standards related to the provision of detoxification and opioid treatment services shall not apply, unless detoxification and opioid treatment services are provided by the substance use disorder treatment program.
 - c. -10.3(b) regarding the provision of support services in accordance with client care policies governing financial arrangements shall not apply.
11. N.J.A.C. 10:161B, Subchapter 14, Pharmaceutical Services, applies and is amended to include the following standards:
- a. The program shall provide pharmaceutical services directly in the program or shall ensure the availability of pharmaceutical services through a written affiliation agreement.
 - b. If the program is providing pharmaceutical services directly, this subchapter shall apply in its entirety. However, if the program does not provide pharmaceutical services directly, the program shall comply with the requirements for self-administration of medication set out at N.J.A.C. 10:161B-14..2(a)4 and have, at a minimum, a written policy and procedure regarding the following:
 - i. pharmacy and medical referrals for prescription consultations;
 - ii. designation of responsibilities regarding the administration and dispensing of medication to clients;
 - iii. storage of client medications; and
 - iv. coordination and integration of pharmacy services into the continuum of care.
12. N.J.A.C. 10:161B, Subchapter 15, Emergency Services and Procedures, applies along with the following amendments:
- a. -15.2: In lieu of the standards set out at -15.2, the Program shall arrange for and participate in any drills conducted by the facility and provide and

maintain documentation of any drills.

13. N.J.A.C. 10:161B, Subchapter 18, Clinical Records, applies along with the following amendments:

- a. Those standards related to the provision of detoxification and opioid treatment services shall not apply, unless detoxification and opioid treatment services are provided by the substance use disorder treatment program.
- b. At -18.3(a)7, the reference to partial care ("PC") services is deleted.
- c. The standard at -18.3(a)13 is deleted.

14. N.J.A.C. 10:161B, Subchapter 19, Infection Prevention and Control Services, applies in accordance with the following amendment:

- a. In lieu of the standards set out at -19.1 et seq., the RCRPF halfway house shall be in compliance with any and all DOC and facility policies and procedures related to infection prevention and control.

15. N.J.A.C. 10:161B, Subchapter 21, Quality Assurance Program, applies along with the following amendments:

- a. At -21.1(a), the "SUD Treatment Program director" shall replace the "facility" with respect to the quality assurance program as described therein.
- b. At -21.2(a), the following language is deleted: "infection prevention and control, housekeeping, sanitation, safety, maintenance of physical plant and equipment."
- c. At -21.2(a)1, the reference to N.J.A.C. 10:161B-5.2(a)11 is replaced by N.J.A.C. 10:161B-6.2(a)11.

16. N.J.A.C. 10:161B, Subchapter 22, Volunteer Services, applies in its entirety.

17. General Amendments

- a. Any references to either the Facility Administrator or Director of Substance Abuse Counseling Services shall mean the Director of Substance Use Disorder Treatment Program, unless the context indicates otherwise.
- b. Any references to the "DSM-IV TR" shall mean the current edition of the Diagnostic and Statistical Manual of Mental Disorders as noted at N.J.A.C. 10:161B-1.3, Definitions.

- c. If detoxification and opioid treatment services are provided by the substance use disorder treatment program, then those standards delineated within the subchapters applicable to detoxification and opioid treatment shall apply.

B. Waived Standards

1. Any standards that apply to juveniles are inapplicable because the DMHAS jurisdiction is limited to those individuals age 21 and over pursuant to N.J.S.A. 30:4C-4.5.
2. N.J.A.C. 10:161B, Subchapter 11, Opioid Treatment Services
NOTE: If opioid treatment services are not provided by the substance use disorder treatment program, then Subchapter 11 is waived; however, if opioid treatment services are provided by the substance use disorder treatment program, then Subchapter 11 shall apply in its entirety.
3. N.J.A.C. 10:161B, Subchapter 12, Detoxification Services
NOTE: If detoxification services are not provided by the substance use disorder treatment program, then Subchapter 12 is waived; however, if detoxification services are provided by the substance use disorder treatment program, then Subchapter 12 shall apply in its entirety.
4. N.J.A.C. 10:161B, Subchapter 13, Laboratory Services
5. N.J.A.C. 10:161B, Subchapter 20, Housekeeping, Sanitation and Safety
6. N.J.A.C. 10:161B, Subchapter 23, Physical Plant and Functional Requirements
7. N.J.A.C. 10:161B, Subchapter 24, Physical Environment
8. N.J.A.C. 10:161B, Subchapter 25, Existing Facilities
9. Appendix A, Tuberculosis Surveillance Procedures
10. Appendix B, Administrative Bulletin, Buprenorphine Guidelines
NOTE: If opioid treatment services are provided by the substance use disorder treatment program, then Appendix B shall apply in its entirety.

With respect to the Subchapters 13, 14, 15, 19, 20, 23, 24 and 25, the RCRPF halfway house must adhere to and be in compliance with any and all DOC contractual and regulatory standards related to these areas of operation and services. Should a RCRPF halfway house be in noncompliance with any DOC contractual or regulatory standards related to these areas of operation and services, the DHS may initiate licensure action, including suspension or revocation of the conditional license, based on any such noncompliance in accordance with the procedures set out in Subchapter 2, Licensure


Procedures and Enforcement.

VI. RECOMMENDATIONS

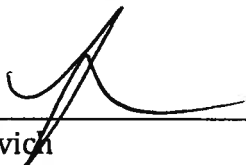
In order for a RCRPF halfway house SUD treatment program to achieve the best possible clinical outcomes and provide maximum therapeutic benefit to admitted DOC inmates, the DMHAS makes the following clinical recommendations:

- A RCRPF halfway house should designate space specifically for the SUD treatment program.
- DOC inmates admitted to the SUD treatment program should reside together and not commingle with DOC inmates or other residents (e.g. general population, county jail inmates) who are not in the SUD treatment program.
- If a client relapses while in a DHS-licensed SUD treatment program and must be returned to a DOC State prison facility in accordance with DOC policy and procedure, on return, the client should be admitted to a SUD treatment program offered within the state prison facility in order to maintain the continuity of the client's SUD treatment.

Attachments: N.J.A.C. 10:161B, Standards for Licensure of Outpatient Substance Abuse Treatment Facilities



Jennifer Velez
Commissioner
Department of Human Services



Lynn A. Kovich
Assistant Commissioner
Division of Mental Health & Addiction Services