

30:4-24.3

LEGISLATIVE HISTORY CHECKLIST
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(Mental health & hospitals--
name change)

NJSA: 30:4-24.3 et al

LAWS OF: 1995 **CHAPTER:** 4

BILL NO: S984

SPONSOR(S): Codey

DATE INTRODUCED: May 12, 1994

COMMITTEE: **ASSEMBLY:** ---
SENATE: Health

AMENDED DURING PASSAGE: Yes Amendments during passage
denoted by superscript numbers

DATE OF PASSAGE: **ASSEMBLY:** December 5, 1994
SENATE: June 30, 1994

DATE OF APPROVAL: January 10, 1995

FOLLOWING STATEMENTS ARE ATTACHED IF AVAILABLE:

SPONSOR STATEMENT: Yes

COMMITTEE STATEMENT: **ASSEMBLY:** No
SENATE: Yes

FISCAL NOTE: No

VETO MESSAGE: No

MESSAGE ON SIGNING: No

FOLLOWING WERE PRINTED:

REPORTS: No

HEARINGS: No

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[FIRST REPRINT]

SENATE, No. 984

STATE OF NEW JERSEY

INTRODUCED MAY 12, 1994

By Senator CODEY

1 **AN ACT** concerning the Division of Mental Health and Hospitals
2 and revising parts of the statutory law.

3
4 **BE IT ENACTED** by the Senate and General Assembly of the
5 **State of New Jersey:**

6 1. Section 11 of P.L.1965, c.59 (C.30:4-24.3) is amended to
7 read as follows:

8 11. All certificates, applications, records, and reports made
9 pursuant to the provisions of this Title and directly or indirectly
10 identifying any individual presently or formerly receiving services
11 in a noncorrectional institution under this Title, or for whom
12 services in a noncorrectional institution shall be sought under this
13 act shall be kept confidential and shall not be disclosed by any
14 person, except insofar as:

15 [(1)]a. the individual identified or his legal guardian, if any, or,
16 if he is a minor, his parent or legal guardian, shall consent; or

17 [(2)]b. disclosure may be necessary to carry out any of the
18 provisions of this act or of article 9 of chapter 82 of Title 2A of
19 the New Jersey Statutes; or

20 [(3)]c. a court may direct, upon its determination that
21 disclosure is necessary for the conduct of proceedings before it
22 and that failure to make such disclosure would be contrary to the
23 public interest.

24 Nothing in this section shall preclude disclosure, upon proper
25 inquiry, of information as to a patient's current medical
26 condition to any relative or friend or to the patient's personal
27 physician or attorney if it appears that the information is to be
28 used directly or indirectly for the benefit of the patient.

29 Nothing in this section shall preclude the professional staff of a
30 community agency under contract with the Division of Mental
31 Health [and Hospitals] Services in the Department of Human
32 Services, or of a screening service, short-term care or
33 psychiatric facility as those facilities are defined in section 2 of
34 P.L.1987, c.116 (C.30:4-27.2) from disclosing information that is
35 relevant to a patient's current treatment to the staff of another
36 such agency.

37 (cf: P.L.1987, c.116, s.24)

38 2. Section 2 of P.L.1987, c.116 (C.30:4-27.2) is amended to
39 read as follows:

40 2. As used in this act:

41 a. "Chief executive officer" means the person who is the chief
42 administrative officer of an institution or psychiatric facility.

EXPLANATION--Matter enclosed in bold-faced brackets [thus] in the
above bill is not enacted and is intended to be omitted in the law.

Matter underlined thus is new matter.

Matter enclosed in superscript numerals has been adopted as follows:

¹ Senate SHH committee amendments adopted June 6, 1994.

1 b. "Clinical certificate" means a form prepared by the division
2 and approved by the Administrative Office of the Courts, that is
3 completed by the psychiatrist or other physician who has
4 examined the person who is subject to commitment within three
5 days of presenting the person for admission to a facility for
6 treatment, and which states that the person is in need of
7 involuntary commitment. The form shall also state the specific
8 facts upon which the examining physician has based his conclusion
9 and shall be certified in accordance with the Rules of the Court.
10 A clinical certificate may not be executed by a person who is a
11 relative by blood or marriage to the person who is being screened.

12 c. "Clinical director" means the person who is designated by
13 the director or chief executive officer to organize and supervise
14 the clinical services provided in a screening service, short-term
15 care or psychiatric facility. The clinical director shall be a
16 psychiatrist, however, those persons currently serving in the
17 capacity will not be affected by this provision. This provision
18 shall not alter any current civil service laws designating the
19 qualifications of such position.

20 d. "Commissioner" means the Commissioner of the
21 Department of Human Services.

22 e. "County counsel" means the chief legal officer or advisor of
23 the governing body of a county.

24 f. "Court" means the Superior Court or a municipal court.

25 g. "Custody" means the right and responsibility to ensure the
26 provision of care and supervision.

27 h. "Dangerous to self" means that by reason of mental illness
28 the person has threatened or attempted suicide or serious bodily
29 harm, or has behaved in such a manner as to indicate that the
30 person is unable to satisfy his need for nourishment, essential
31 medical care or shelter, so that it is probable that substantial
32 bodily injury, serious physical debilitation or death will result
33 within the reasonably foreseeable future; however, no person
34 shall be deemed to be unable to satisfy his need for nourishment,
35 essential medical care or shelter if he is able to satisfy such
36 needs with the supervision and assistance of others who are
37 willing and available.

38 i. "Dangerous to others or property" means that by reason of
39 mental illness there is a substantial likelihood that the person will
40 inflict serious bodily harm upon another person or cause serious
41 property damage within the reasonably foreseeable future. This
42 determination shall take into account a person's history, recent
43 behavior and any recent act or threat.

44 j. "Department" means the Department of Human Services.

45 k. "Director" means the chief administrative officer of a
46 screening service, a short-term care facility or a special
47 psychiatric hospital.

48 l. "Division" means the Division of Mental Health [and
49 Hospitals] Services in the Department of Human Services.

50 m. "In need of involuntary commitment" means that an adult
51 who is mentally ill, whose mental illness causes the person to be
52 dangerous to self or dangerous to others or property and who is
53 unwilling to be admitted to a facility voluntarily for care, and
54 who needs care at a short-term care, psychiatric facility or

1 special psychiatric hospital because other services are not
2 appropriate or available to meet the person's mental health care
3 needs.

4 n. "Institution" means any State or county facility providing
5 inpatient care, supervision and treatment for the mentally
6 retarded; except that with respect to the maintenance provisions
7 of Title 30 of the Revised Statutes, institution also means any
8 psychiatric facility for the treatment of the mentally ill.

9 o. "Mental health agency or facility" means a legal entity
10 which receives funds from the State, county or federal
11 government to provide mental health services.

12 p. "Mental health screener" means a psychiatrist,
13 psychologist, social worker, registered professional nurse or other
14 individual trained to do outreach only for the purposes of
15 psychological assessment who is employed by a screening service
16 and possesses the license, academic training or experience, as
17 required by the commissioner pursuant to regulation; except that
18 a psychiatrist and a State licensed clinical psychologist who meet
19 the requirements for mental health screener shall not have to
20 comply with any additional requirements adopted by the
21 commissioner.

22 q. "Mental hospital" means, for the purposes of the payment
23 and maintenance provisions of Title 30 of the Revised Statutes, a
24 psychiatric facility.

25 r. "Mental illness" means a current, substantial disturbance of
26 thought, mood, perception or orientation which significantly
27 impairs judgment, behavior or capacity to recognize reality, but
28 does not include simple alcohol intoxication, transitory reaction
29 to drug ingestion, organic brain syndrome or developmental
30 disability unless it results in the severity of impairment described
31 herein.

32 s. "Patient" means a person over the age of 18 who has been
33 admitted to, but not discharged from a short-term care or
34 psychiatric facility.

35 t. "Physician" means a person who is licensed to practice
36 medicine in any one of the United States or its territories, or the
37 District of Columbia.

38 u. "Psychiatric facility" means a State psychiatric hospital
39 listed in R.S.30:1-7, a county psychiatric hospital, or a
40 psychiatric unit of a county hospital.

41 v. "Psychiatrist" means a physician who has completed the
42 training requirements of the American Board of Psychiatry and
43 Neurology.

44 w. "Psychiatric unit of a general hospital" means an inpatient
45 unit of a general hospital that restricts its services to the care
46 and treatment of the mentally ill who are admitted on a
47 voluntary basis.

48 x. "Psychologist" means a person who is licensed as a
49 psychologist by the New Jersey Board of Psychological
50 Examiners.

51 y. "Screening certificate" means a clinical certificate
52 executed by a psychiatrist or other physician affiliated with a
53 screening service.

54 z. "Screening service" means a public or private ambulatory

1 care service designated by the commissioner, which provides
2 mental health services including assessment, emergency and
3 referral services to mentally ill persons in a specified geographic
4 area.

5 aa. "Screening outreach visit" means an evaluation provided
6 by a mental health screener wherever the person may be when
7 clinically relevant information indicates the person may need
8 involuntary commitment and is unable or unwilling to come to a
9 screening service.

10 bb. "Short-term care facility" means an inpatient, community
11 based mental health treatment facility which provides acute care
12 and assessment services to a mentally ill person whose mental
13 illness causes the person to be dangerous to self or dangerous to
14 others or property. A short-term care facility is so designated by
15 the commissioner and is authorized by the commissioner to serve
16 persons from a specified geographic area. A short-term care
17 facility may be a part of a general hospital or other appropriate
18 health care facility and shall meet certificate of need
19 requirements and shall be licensed and inspected by the
20 Department of Health pursuant to P.L.1971, c.136 (C.26:2H-1 et
21 seq.) and in accordance with standards developed jointly with the
22 Commissioner of Human Services.

23 cc. "Special psychiatric hospital" means a public or private
24 hospital licensed by the Department of Health to provide
25 voluntary and involuntary mental health services, including
26 assessment, care, supervision, treatment and rehabilitation
27 services to persons who are mentally ill.

28 dd. "Treatment team" means one or more persons, including at
29 least one psychiatrist or physician, and may include a
30 psychologist, social worker, nurse and other appropriate services
31 providers. A treatment team provides mental health services to
32 a patient of a screening service, short-term care or psychiatric
33 facility.

34 ee. "Voluntary admission" means that adult who is mentally
35 ill, whose mental illness causes the person to be dangerous to self
36 or dangerous to others or property and is willing to be admitted
37 to a facility voluntarily for care, needs care at a short-term care
38 or psychiatric facility because other facilities or services are not
39 appropriate or available to meet the person's mental health
40 needs. A person may also be voluntarily admitted to a
41 psychiatric facility if his mental illness presents a substantial
42 likelihood of rapid deterioration in functioning in the near future,
43 there are no appropriate community alternatives available and
44 the psychiatric facility can admit the person and remain within
45 its rated capacity.

46 ff. "County adjuster" means the person appointed pursuant to
47 R.S.30:4-34.

48 (cf: P.L.1989, c.73, s.1)

49 3. Section 1 of P.L.1986, c.71 (C.30:4-82.1) is amended to read
50 as follows:

51 1. It is found and declared:

52 a. That a significant number of inmates in State-owned or
53 operated correctional facilities suffer from mental illness
54 requiring treatment either in the form of counseling or inpatient

1 treatment during the period of their incarceration.

2 b. That because of prison overcrowding, a lack of resources,
3 and the inability of the Department of Human Services and the
4 Department of Corrections to agree on a policy to provide
5 adequate and appropriate mental health services to these persons,
6 they are not receiving the mental health treatment they need.

7 c. That the inability of the two departments to agree on policy
8 is attributable to their separate missions, the Department of
9 Human Services being constituted to provide treatment and not
10 security, and the Department of Corrections being constituted to
11 provide secure custody and not treatment.

12 d. That mentally ill inmates who do not receive treatment
13 present a danger to other inmates and to correction officers
14 while they are incarcerated and pose a threat to their families
15 and to other citizens of the State when they are released.

16 e. That the existing procedures of the Division of Mental
17 Health [and Hospitals] Services in the Department of Human
18 Services and of the Department of Corrections, as well as
19 existing laws, seem to provide sufficient authority to enable the
20 two State agencies to alleviate the problems caused by the lack
21 of treatment made available to mentally ill inmates.

22 (cf: P.L.1986, c.71, s.1)

23 4. Section 1 of P.L.1987, c.32 (C.30:4-177.39) is amended to
24 read as follows:

25 1. The Legislature finds and declares that:

26 a. There exists a population of two groups of clients of the
27 Division of Mental Health [and Hospitals] Services and Division of
28 Developmental Disabilities in the Department of Human Services
29 who are underserved in their current institutional settings.

30 b. One group of these individuals is comprised of clients in the
31 State psychiatric hospitals or developmental centers who are
32 developmentally disabled and who exhibit psychiatric or
33 behavioral problems and are known as "dually diagnosed" clients.
34 The severity of their conditions precludes effective treatment in
35 either developmental centers or State psychiatric hospitals. For
36 these clients, a more intensive, specialized, behaviorally oriented
37 program is required.

38 c. The other group of these individuals includes clients of
39 institutions administered by the Division of Mental Health [and
40 Hospitals] Services who are developmentally disabled, have been
41 administratively or judicially discharged from the Division of
42 Mental Health [and Hospitals] Services, and who are in need of
43 the services of the Division of Developmental Disabilities. These
44 clients are known as "discharged pending placement" clients.

45 d. There exists on the grounds of Ancora Psychiatric Hospital
46 as a pilot program a facility designed to serve the special needs
47 of both the dually diagnosed and discharged pending placement
48 populations that is unfunded for continued operation.

49 (cf: P.L.1987, c.32, s.1)

50 5. Section 2 of P.L.1987, c.32 (C.30:4-177.40) is amended to
51 read as follows:

52 2. The Developmental Center at Ancora is established within
53 the Division of Developmental Disabilities in the Department of
54 Human Services and shall include the pilot program designed to

1 serve the special needs of both the dually diagnosed and
2 discharged pending placement populations. The Developmental
3 Center at Ancora shall accept for treatment only those
4 individuals transferred from State facilities under the supervision
5 of the Division of Mental Health [and Hospitals] Services and the
6 Division of Developmental Disabilities in the Department of
7 Human Services.

8 Nothing in this amendatory and supplementary act shall be
9 construed to require placement at the Developmental Center at
10 Ancora of those persons discharged pending placement who are
11 not in need of institutional care and who have been judicially or
12 administratively determined appropriate for community
13 placement.

14 For those persons for whom institutional placement is initially
15 determined to be judicially or administratively appropriate, the
16 Developmental Center at Ancora shall nevertheless provide
17 discharge-oriented treatment to achieve the goal of ultimate
18 discharge into community settings as soon as their conditions
19 permit.

20 (cf: P.L.1987, c.32, s.2)

21 6. Section 1 of P.L.1957, c.146 (C.30:9A-1) is amended to read
22 as follows:

23 1. It is declared to be the public policy of this State to
24 encourage the development of preventive, treatment and
25 transitional services for mental health clients through the
26 improvement and expansion of community mental health
27 programs in designated service areas for the entire State which
28 will provide these elements of adequate services:

29 (a) In-patient services;

30 (b) Out-patient services;

31 (c) Partial hospitalization services such as day care, night
32 care, weekend care;

33 (d) Emergency services 24 hours per day to be available within
34 at least one of the first [3] three services listed above;

35 (e) Consultation and education services available to
36 community agencies and professional personnel;

37 (f) Children's services;

38 (g) Services for the elderly;

39 (h) Screening services;

40 (i) Rehabilitative services including vocational and educational
41 programs;

42 (j) Transitional services;

43 (k) Advocacy services;

44 (l) Training services; and

45 (m) Research and evaluation.

46 The aforementioned services are to be provided principally for
47 persons residing in a particular community or communities which
48 are designated as the community mental health center service
49 area, in or near which the facilities providing the elements of
50 service are situated.

51 It is further declared to be the public policy of this State to
52 establish a Community Mental Health Citizens Advisory Board
53 for mental health services to plan, establish and recommend to
54 the Commissioner of Human Services and the Director of the

1 Division of Mental Health [and Hospitals] Services those policies
2 which are necessary to ensure the development and adequate
3 delivery of the aforementioned elements of mental health
4 services.

5 (cf: P.L.1979, c.331, s.1)

6 7. Section 2 of P.L.1957, c.146 (C.30:9A-2) is amended to read
7 as follows:

8 2. For the purpose of this act the following terms are hereby
9 defined:

10 "Community Mental Health Citizens Advisory Board" shall
11 mean a board of 15 members to be appointed by the State Board
12 of Institutional Trustees with the approval of the Governor. Of
13 these 15, eight members shall be chosen from among citizens of
14 the State who, as consumers, have demonstrated an interest in
15 the delivery of mental health services and are not providers of
16 mental health services; one from among persons recommended by
17 the State Association of Freeholders; one from among persons
18 recommended by the State League of Municipalities; two from
19 among providers of mental health services and one from among
20 persons recommended by the chairpersons of the standing
21 Assembly and Senate [Institutions, Health and Welfare] ¹[Health
22 and] committees on¹ Human Services ¹[Committees, or their
23 successor committees]¹.

24 The term of each member shall be for [3] three years and shall
25 commence on July 1 and shall terminate on June 30, provided,
26 however, that of the new members appointed three shall be
27 appointed for a term expiring [1] one year, three for a term
28 expiring [2] two years, and four for a term expiring [3] three
29 years from July 1 following the date of appointment. Members of
30 the present Community Mental Health Board serving on the
31 effective date of this amendatory act shall continue to serve
32 until the expiration of their current terms.

33 In addition, the Board of Institutional Trustees will designate
34 two members from among persons currently serving as members
35 of the Board of Managers of each of the four State psychiatric
36 hospitals to be appointed in July of each year. The Director of
37 the Division of Mental Health [and Hospitals] Services or his
38 designee shall be a nonvoting ex officio member of the
39 Community Mental Health Citizens Advisory Board.

40 The role of the board shall be to serve as both advocate and
41 advisor to the department for the development of effective
42 mental health services in the community. To fulfill this role, the
43 board shall become and continue to be thoroughly acquainted with
44 those programs of the Department of Human Services dealing
45 with mental health and related social services, particularly those
46 administered by the Office of Community Services, and shall
47 regularly review all such programs. It shall advise and
48 recommend on the development of policies and procedures within
49 the general directives of the department covering these programs.

50 The board shall promote and maintain constructive
51 relationships with the county mental health boards, community
52 mental health center boards and other official bodies and
53 organized agencies concerned with mental health services. It
54 shall also serve, where possible, in such advisory capacities to the

1 department in the area of community mental health as are
2 required by Federal statutes.

3 The board shall choose one of its members to act as chairman
4 and shall meet as often as required to conduct the business of the
5 board and to assist and advise in the administration of the duties
6 and responsibilities imposed by this chapter, but not less than 6
7 times each year.

8 The board, acting on behalf of the State Board of Institutional
9 Trustees and subject to the authority and direction thereof, may
10 establish within itself committees directly concerned with
11 State-operated facilities, State grant-in-aid programs, Federal
12 grant-in-aid programs, planning for comprehensive mental health
13 services and mental health manpower resources, utilization and
14 training, and may establish such other committees as it may
15 determine.

16 The board may, subject to the approval of the State Board of
17 Institutional Trustees, establish any subsidiary unsalaried advisory
18 or consultant committees or study groups as it may deem
19 necessary and proper and shall appoint the members thereof.

20 "Community mental health program" shall mean a program of
21 preventive, treatment and transitional services for mental health
22 clients, provided in accordance with State or Federal regulations.

23 "Department" shall mean the Department of Human Services.

24 "Sponsoring agency" shall mean any county board of
25 freeholders, municipal governing body, board of education or any
26 nonprofit corporation organized for the purpose of providing
27 health or welfare services to the community, which establishes,
28 maintains or expands a community mental health program.

29 (cf: P.L.1979, c.331, s.2)

30 8. Section 2 of P.L.1985, c.296 (C.30:9B-2) is amended to read
31 as follows:

32 2. The Commissioner of the Department of Human Services
33 shall establish a Self-Help Clearinghouse in the Division of
34 Mental Health [and Hospitals] Services.

35 (cf: P.L.1985, c.296, s.2)

36 9. Section 2 of P.L.1977, c.448, (C.30:11B-2) is amended to
37 read as follows:

38 2. "Community residence for the developmentally disabled"
39 means any community residential facility housing up to 16
40 developmentally disabled persons which provides food, shelter and
41 personal guidance for developmentally disabled persons who
42 require assistance, temporarily or permanently, in order to live
43 independently in the community. Such residences shall not be
44 considered health care facilities within the meaning of the
45 "Health Care Facilities Planning Act," P.L.1971, c.136
46 (C.26:2H-1 et seq.) and shall include, but not be limited to, group
47 homes, halfway houses, supervised apartment living arrangements
48 and hostels.

49 "Community residence for the mentally ill" means any
50 community residential facility which provides food, shelter and
51 personal guidance, under such supervision as required, to not
52 more than 15 mentally ill persons who require assistance
53 temporarily or permanently, in order to live independently in the
54 community. These residences shall be approved for a purchase of

1 service contract or an affiliation agreement pursuant to
2 procedures established by the Division of Mental Health [and
3 Hospitals] Services in the Department of Human Services. These
4 residences shall not house persons who have been assigned to a
5 State psychiatric hospital after having been found not guilty of a
6 criminal offense by reason of insanity or unfit to be tried on a
7 criminal charge. These residences shall not be considered health
8 care facilities within the meaning of the "Health Care Facilities
9 Planning Act," P.L.1971, c.136 (C.26:2H-1 et seq.) and shall
10 include, but not be limited to, group homes, halfway houses,
11 supervised apartment living arrangements, family care homes and
12 hostels.

13 "Community residence for persons with head injuries" means a
14 community residential facility providing food, shelter and
15 personal guidance, under such supervision as required, to not
16 more than 15 persons with head injuries, who require assistance,
17 temporarily or permanently, in order to live in the community,
18 and shall include, but not be limited to: group homes, halfway
19 houses, supervised apartment living arrangements, and hostels.
20 Such a residence shall not be considered a health care facility
21 within the meaning of the "Health Care Facilities Planning Act,"
22 P.L.1971, c.136 (C.26:2H-1 et seq.).

23 "Developmental disability" or "developmentally disabled"
24 means a severe, chronic disability of a person which: a. is
25 attributable to a mental or physical impairment or combination
26 of mental or physical impairments; b. is manifest before age 22;
27 c. is likely to continue indefinitely; d. results in substantial
28 functional limitations in three or more of the following areas of
29 major life activity, that is, self-care, receptive and expressive
30 language, learning, mobility, self-direction and capacity for
31 independent living or economic self-sufficiency; and e. reflects
32 the need for a combination and sequence of special
33 interdisciplinary or generic care, treatment or other services
34 which are of lifelong or extended duration and are individually
35 planned and coordinated. Developmental disability includes, but
36 is not limited to, severe disabilities attributable to mental
37 retardation, autism, cerebral palsy, epilepsy, spina bifida and
38 other neurological impairments where the above criteria are met.

39 "Mentally ill" means any psychiatric disorder which has
40 required an individual to receive either inpatient psychiatric care
41 or outpatient psychiatric care on an extended basis.

42 "Person with head injury" means a person who has sustained an
43 injury, illness or traumatic changes to the skull, the brain
44 contents or its coverings which results in a temporary or
45 permanent physiobiological decrease of cognitive, behavioral,
46 social or physical functioning which causes partial or total
47 disability.

48 (cf: P.L.1993, c.329, s.2)

49 10. Section 10 of P.L.1987, c.112 (C.30:11B-4.2) is amended to
50 read as follows:

51 10. a. Within six months of the effective date of this act, the
52 Director of the Division of Mental Health [and Hospitals] Services
53 in the Department of Human Services shall develop program
54 standards which include criteria for educational and professional

1 experience of employees of a community residence for the
2 mentally ill and staffing ratios appropriate to the needs of the
3 residents of the community residences for the mentally ill.

4 b. Within six months after the effective date of P.L.1993,
5 c.329, the Commissioner of Human Services shall develop
6 program standards which include criteria for educational and
7 professional experience of employees of a community residence
8 for persons with head injuries and staffing ratios appropriate to
9 the needs of the residents of these community residences.

10 (cf: P.L.1993, c.329, s.4)

11 11. (New section) Whenever the term "Division of Mental
12 Health and Hospitals" occurs or any reference is made thereto in
13 any law, contract or document, the same shall be deemed to
14 mean or refer to the "Division of Mental Health Services."

15 12. This act shall take effect immediately.

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20 Changes name of Division of Mental Health and Hospitals to
21 Division of Mental Health Services.

1 mentally ill and staffing ratios appropriate to the needs of the
2 residents of the community residences for the mentally ill.

3 b. Within six months after the effective date of P.L.1993,
4 c.329, the Commissioner of Human Services shall develop
5 program standards which include criteria for educational and
6 professional experience of employees of a community residence
7 for persons with head injuries and staffing ratios appropriate to
8 the needs of the residents of these community residences.

9 (cf: P.L.1993, c.329, s.4)

10 11. (New section) Whenever the term "Division of Mental
11 Health and Hospitals" occurs or any reference is made thereto in
12 any law, contract or document, the same shall be deemed to
13 mean or refer to the "Division of Mental Health Services."

14 12. This act shall take effect immediately.

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17 **STATEMENT**

18
19 This bill changes the name of the Division of Mental Health and
20 Hospitals in the Department of Human Services to the Division of
21 Mental Health Services.

22 The change in name is recommended by the Commissioner of
23 Human Services in order to present a name which better
24 describes the current functions, duties and scope of activity of
25 the division.

26 The new name better reflects the divisional objective of
27 providing integrated mental health services, since the existing
28 name connotes a separation of services provided in State
29 psychiatric facilities from other mental health services. Over
30 the past decade, much of the efforts of the division have been
31 directed at eliminating artificial boundaries between institutional
32 and community-based services, and a change in name would
33 clearly and officially reinforce this direction. In addition, the
34 change in name would eliminate confusion among the general
35 public about the jurisdiction of the division, which sometimes
36 leads to citizen inquiries and complaints that are directed to the
37 division about health care generally and community hospitals over
38 which the division has no regulatory authority.

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Changes name of Division of Mental Health and Hospitals to
44 Division of Mental Health Services.

SENATE HEALTH COMMITTEE

STATEMENT TO

SENATE, No. 984

with committee amendments

STATE OF NEW JERSEY

DATED: JUNE 6, 1994

The Senate Health Committee favorably reports Senate Bill No. 984 with committee amendments.

As amended by committee, this bill changes the name of the Division of Mental Health and Hospitals in the Department of Human Services to the Division of Mental Health Services. This change in name better describes the current functions, duties and scope of activity of the division.

The new name more accurately reflects the divisional objective of providing integrated mental health services, since the existing name connotes a separation of services provided in State psychiatric facilities from other mental health services. Over the past decade, much of the efforts of the division have been directed at eliminating artificial boundaries between institutional and community-based services, and a change in name would clearly and officially reinforce this direction. In addition, the change in name would eliminate confusion among the general public about the jurisdiction of the division, which sometimes leads to citizen inquiries and complaints that are directed to the division about health care generally and community hospitals over which the division has no regulatory authority.

The committee amended the bill to update references to legislative committees.