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District 23 (Warren and Hunterdon)
Assemblywoman VALERIE VAINIERI HUTTLE
District 37 (Bergen)

Co-Sponsored by:
Assemblywomen Spencer, Angelini, Lampitt, Senators Codey, Doherty and Ruiz

SYNOPSIS
Establishes State Mental Health Facilities Evaluation Task Force.

CURRENT VERSION OF TEXT
As introduced.

(Sponsorship Updated As Of: 6/29/2010)
AN ACT establishing the State Mental Health Facilities Evaluation Task Force.

BE IT ENACTED by the Senate and General Assembly of the State of New Jersey:

1. As used in this act:
   “Commissioner” means the Commissioner of Human Services.
   “County psychiatric facility” means a psychiatric facility that is operated and maintained by the governing body of a county, or such a facility for which the State has assumed the operation and management thereof pursuant to an agreement with the governing body of the county, in accordance with State and federal law and regulations.
   “Department” means the Department of Human Services.
   “Screening service” means a screening service as defined in section 2 of P.L.1987, c.116 (C.30:4-27.2).
   “Short-term care facility” means a short-term care facility as defined in section 2 of P.L.1987, c.116 (C.30:4-27.2).
   “State psychiatric facility” means a State psychiatric hospital listed in R.S.30:1-7.

2. a. There is established the State Mental Health Facilities Evaluation Task Force.
   b. The purpose of the task force shall be to study a number of specified issues relating to the care and cost of persons who are currently patients in one of the State psychiatric facilities and to develop a plan for the effective functioning of these facilities that will ensure that the current and long-term needs of these patients are met in the setting most appropriate to their individual circumstances, to which end the task force, in accordance with the provisions of subsection c. of this section, shall review all relevant past and current patient data for the State psychiatric facilities and examine those issues which serve the purpose of the task force and relate to the State psychiatric facilities, short-term care facilities, county psychiatric facilities, and community-based care for persons with mental illness throughout New Jersey.
   c. In order to effectuate the purposes of subsection b. of this section, the task force shall, at a minimum:
      (1) evaluate the current and long-term needs for inpatient psychiatric beds in New Jersey, including those in the State psychiatric facilities, short-term care facilities, and county psychiatric facilities;
      (2) assess the availability of appropriate and adequate supportive services in the community, including, but not limited to, housing, case management, medication, and treatment;
      (3) evaluate the effects of patient displacement from the State psychiatric facilities on general hospital emergency departments,
correctional facilities, and homeless shelters, including in that
evaluation data gathered from the closure of Marlboro Psychiatric
Hospital and overcrowding at Ancora Psychiatric Hospital;
(4) assess the long-term psychiatric care needs of special
populations, including, but not limited to, the geriatric, forensic,
and culturally/linguistically diverse populations, and persons with
developmental disabilities;
(5) compare the readmission rates at State psychiatric facilities,
short-term care facilities, and county psychiatric facilities, by
category of facility, during Fiscal Year 2010 with the readmission
rates for those facility categories during the prior three fiscal years,
and compare the rate of referrals for treatment from screening
services during Fiscal Year 2010 with the rate of referrals during
the prior three fiscal years;
(6) analyze and estimate projected cost savings that may be
realized if ancillary services at the State psychiatric facilities are
outsourced;
(7) provide a complete analysis of the costs of caring for patients
at all State psychiatric facilities, including, but not limited to, a
comparison among the State psychiatric facilities of their
respective: costs of care; staffing ratios; overtime costs; and costs
of renovations and capital expenses projected over the next five
years, including the total cost of bringing Ancora Psychiatric
Hospital into compliance with federal standards;
(8) examine the feasibility of partial closures at each State
psychiatric facility and actions needed to allow for utilization of the
most modern facilities; and
(9) analyze The Joint Commission survey results for each of the
State psychiatric facilities and the cost-effectiveness of making
changes recommended by The Joint Commission.
d. The task force shall include 21 members, as follows:
(1) the Commissioner of Human Services and the Directors of
the Divisions of Mental Health Services, Medical Assistance and
Health Services, and Developmental Disabilities in the department,
or their designees, as ex officio members;
(2) two members each from the Senate and the General
Assembly, to be appointed by the President of the Senate and the
Speaker of the General Assembly, respectively, who in each case
shall be members of different political parties; and
(3) 13 public members who are residents of this State, as
follows:
(a) 11 public members to be appointed by the Governor,
including: one person who is a county health administrator; one
person appointed upon the recommendation of the New Jersey
Association of Mental Health and Addiction Agencies; one person
appointed upon the recommendation of NAMI New Jersey; one
person appointed upon the recommendation of the Mental Health
Association in New Jersey; one person appointed upon the
recommendation of a New Jersey affiliate of Mental Health America other than the Mental Health Association in New Jersey; one person upon the recommendation of the Institute for Health, Health Care Policy and Aging Research at Rutgers, The State University of New Jersey; one person upon the recommendation of the New Jersey Psychiatric Association; one person upon the recommendation of the New Jersey Hospital Association; one person upon the recommendation of the Coalition of Mental Health Consumer Organizations of New Jersey; one person who is a member of the board of trustees of a State psychiatric facility; and one member of the general public with an interest or expertise in the work of the task force; and
(b) two additional members of the general public with an interest or expertise in the work of the task force, who in each case have, or have had, a family member who is, or has been, a patient in a State psychiatric facility, one of whom shall be appointed by the President of the Senate and one of whom shall be appointed by the Speaker of the General Assembly.

e. The legislative members of the task force shall serve during their terms of office. Vacancies in the membership of the task force shall be filled in the same manner provided for the original appointments.
f. The commissioner or the commissioner’s designee shall serve as chairperson of the task force. The task force shall organize as soon as practicable following the appointment of its members and shall select a vice-chairperson from among the members. The chairperson shall appoint a secretary who need not be a member of the task force.
g. The public members shall serve without compensation, but shall be reimbursed for necessary expenses incurred in the performance of their duties and within the limits of funds available to the task force.
h. The task force shall be entitled to call to its assistance and avail itself of the services of the employees of any State, county or municipal department, board, bureau, commission or agency as it may require and as may be available to it for its purposes.
i. The task force may meet and hold hearings at the places that it designates during the sessions or recesses of the Legislature, but shall hold a minimum of three public hearings, one each in the southern, central, and northern regions of the State.
j. The department shall provide staff support to the task force.
k. The task force shall report its findings and recommendations to the Governor, and to the Legislature pursuant to section 2 of P.L.1991, c.164 (C.52:14-19.1), along with any legislative bills that it desires to recommend for adoption by the Legislature, no later than February 1, 2011. The report shall contain the plan provided for in subsection b. of this section.
3. This act shall take effect immediately and shall expire upon the issuance of the task force report.

STATEMENT

This bill establishes the State Mental Health Facilities Evaluation Task Force.

The bill provides specifically as follows:

• The purpose of the task force is to study a number of specified issues relating to the care and cost of persons who are currently patients in one of the State psychiatric facilities and to develop a plan for the effective functioning of these facilities that will ensure that the current and long-term needs of these patients are met in the setting most appropriate to their individual circumstances, to which end the task force is to review all relevant past and current patient data for the State psychiatric facilities and examine those issues which serve the purpose of the task force and relate to the State psychiatric facilities, short-term care facilities, county psychiatric facilities, and community-based care for persons with mental illness throughout New Jersey.

• The task force is directed, at a minimum, to:
  -- evaluate the current and long-term needs for inpatient psychiatric beds in New Jersey;
  -- assess the availability of appropriate and adequate supportive services in the community;
  -- evaluate the effects of patient displacement from the State psychiatric facilities on general hospital emergency departments, correctional facilities, and homeless shelters;
  -- assess the long-term psychiatric care needs of special populations;
  -- compare the readmission rates at State psychiatric facilities, short-term care facilities, and county psychiatric facilities, by category of facility, during Fiscal Year 2010 with the readmission rates for those facility categories during the prior three fiscal years, and compare the rate of referrals for treatment from screening services during Fiscal Year 2010 with the rate of referrals during the prior three fiscal years;
  -- analyze and estimate projected cost savings that may be realized if ancillary services at the State psychiatric facilities are outsourced;
  -- provide a complete analysis of the costs of caring for patients at all State psychiatric facilities, including, but not limited to, a comparison among the State psychiatric facilities of their respective: costs of care; staffing ratios; overtime costs; and costs of renovations and capital expenses projected over the next five years, including the total cost of bringing Ancora Psychiatric Hospital into compliance with federal standards;
-- examine the feasibility of partial closures at each State psychiatric facility and actions needed to allow for utilization of the most modern facilities; and
-- analyze Joint Commission survey results for each of the State psychiatric facilities and the cost-effectiveness of making changes recommended by the Joint Commission.

• The task force is to include 21 members, as follows:
  (1) the Commissioner of Human Services and the Directors of the Divisions of Mental Health Services, Medical Assistance and Health Services, and Developmental Disabilities in the Department of Human Services, or their designees, as ex officio members;
  (2) two members each from the Senate and the General Assembly, to be appointed by the President of the Senate and the Speaker of the General Assembly, respectively, who in each case are to be members of different political parties;
  (3) 13 public members who are residents of this State, as follows:
    (a) 11 public members to be appointed by the Governor, including: one person who is a county health administrator; one person each appointed upon the recommendation of the New Jersey Association of Mental Health and Addiction Agencies, NAMI New Jersey, the Mental Health Association in New Jersey, a New Jersey affiliate of Mental Health America other than the Mental Health Association in New Jersey, the Institute for Health, Health Care Policy and Aging Research at Rutgers University, the New Jersey Psychiatric Association, the New Jersey Hospital Association, and the Coalition of Mental Health Consumer Organizations of New Jersey, respectively; one person who is a member of the board of trustees of a State psychiatric facility; and one member of the general public with an interest or expertise in the work of the task force; and
    (b) two additional members of the general public with an interest or expertise in the work of the task force, who in each case have, or have had, a family member who is, or has been, a patient in a State psychiatric facility, one to be appointed by the President of the Senate and one by the Speaker of the General Assembly.
• The Commissioner of Human Services or the commissioner's designee is to serve as chairperson of the task force.
• The task force is to hold a minimum of three public hearings, one each in the southern, central, and northern regions of the State.
• The Department of Human Services is to provide staff support to the task force.
• The task force is to report its findings and recommendations to the Governor and the Legislature, along with any legislative bills that it desires to recommend for adoption by the Legislature, no later than February 1, 2011. The report is to contain the plan provided for in the bill.
• The bill expires upon the issuance of the task force report.