



State of New Jersey

DEPARTMENT OF HUMAN SERVICES
OFFICE OF PROGRAM INTEGRITY AND ACCOUNTABILITY
OFFICE OF LICENSING
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ACTING COMMISSIONER

January 26, 2016

Robert N. Davison
Executive Director
Mental Health Association of Essex County
33 South Fullerton Avenue
Montclair, New Jersey 07042

Dear Mr. Davison:

On behalf of the site review team, I wish to express my appreciation for the cooperation provided by you and your staff during the site review of Mental Health Association of Essex County. Your Mental Health program licenses are attached to this report. In accordance with licensing regulations N.J.A.C. 10:190-1.1(d), *"A license specific to each separate site shall be issued for every mental health program and shall be conspicuously posted at that site, so as to identify the mental health program and its address."* The original license(s), not copies, must be prominently displayed at each respective licensed program location.

Changes in program service locations and/or new program locations must be reported to the Office of Licensing before they occur. Licenses are not transferable to a new location.

Please review the licenses and notify me immediately of any discrepancies or omissions. I may be reached by phone at 609-292-0211 by e-mail at alex.burak@dhs.state.nj.us, or by fax at 609-777-1217.

The program review report is attached. It includes the observations of all review team members. Each deficiency is noted with the applicable regulation(s) noted in italics accompanied by a comment as to why the regulation is not met. A formal plan of correction must be provided within forty days of report receipt. The plan of correction must address **all** deficiencies noted in relation to the accompanying surveyor comments. **For each deficiency requiring ongoing implementation of a process (e.g. clinical records deficiencies, personnel files deficiencies) or ongoing oversight to ensure corrective action was effective over a long period of time, the action planned must include a formal method of data collection and analysis (e.g. aggregated clinical records review or other quality assurance monitoring) or increased oversight by supervisory staff.** The enclosed "Site Review Plan of Correction" form must be used for documenting the plan of correction. Do not attach any supporting material(s), (for example, revised policy/procedure) unless specifically requested to do so in the report.

Your improvement plan will be attached to the report when it is disseminated as a public document. Thank you for your continued efforts in providing quality mental health services to New Jersey's citizens. If you have any questions, please feel free to contact me at your earliest convenience.

Sincerely,



Alex Burak, Quality Assurance Coordinator
Office of Licensing

c: SharePoint
 Joseph Scarpelli, Essex County Mental Health Administrator

Attachments (attached to original letter only):

- Site Review Plan of Correction form
- Original License

DEPARTMENT OF HUMAN SERVICES

OFFICE OF LICENSING

SITE REVIEW REPORT

Mental Health Association of Essex County

**33 South Fullerton Avenue
Montclair, New Jersey 07042**

SITE REVIEW DATES:

July 14 – 15, 2015

TEAM:

Stuart Waldorf, Team Leader, Office of Licensing, DHS

Denise Bradeen, Office of Licensing, DHS

Tiffany White, Office of Licensing, DHS

Crystal Thomas, Office of Licensing, DHS

Kathryn Eckel, Office of Licensing, DHS

Christine Gitto, Office of Licensing, DHS

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EXECUTIVE SUMMARY: MENTAL HEALTH ASSOCIATION OF ESSEX COUNTY

DESCRIPTION:

The Mental Health Association of Essex County was founded in 1950. The agency provides services throughout all of Essex County, with an emphasis on under-served urban populations. The programs and services are designed to promote mental health and to improve the care and treatment of individuals with mental illness. It is a not for profit agency that is funded by the Division of Mental Health Services.

MENTAL HEALTH SERVICES PROVIDED:

The agency provides Outpatient, Adult Partial Care, Intensive Family Support Services (IFSS), and Supportive Housing. The type of license being issued for each program is listed in the addendum. Integrated Case Management Services (ICMS) are also provided but the program was not included in the review because there are no regulations for the program and it is not licensed.

ACCREDITATION:

The agency is accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF) from August 2013 through August 2016. Therefore, at the agency's request and in accordance with N.J.A.C. 10:190-1.4(c), deemed status was considered in this licensing review. For those programs granted full deemed status, full licensure was granted based upon Office of Licensing (OOL)'s review of documentation related to licensing history, accreditation, operations, quality improvement, risk management, and any required reporting to DHS. For those programs receiving partial deemed status, the site review primarily focused on staff credentials, clinical records, medication counseling, client rights/grievance procedure and compliance with Level I regulations not addressed by the accrediting body. Any agency programs licensed or inspected by OOL which did not qualify for deemed status received full site reviews or, in selected cases, focused site reviews.

<i>Programs granted full deemed status</i>	<i>Programs granted partial deemed status</i>	<i>Programs receiving focused site reviews</i>	<i>Programs receiving full site review</i>
Outpatient	Adult Partial Care	Supportive Housing	
IFSS			

The agency has developed and implemented a policy and procedure that assures compliance with N.J.A.C. 10:44D, Central Registry. A sample of staff personnel files reviewed included copies of the required "Employee/Volunteer Consent for Employers to Check Form." The forms included dated caregiver signatures as well as the dated signature of the CEO/Executive Director or designee affirming that the Central Registry was checked and that the caregiver is not listed on the Central Registry. In addition, a policy on reporting allegations of abuse, neglect and exploitation is posted in each staff office as required.

The agency has developed and implemented a policy and procedure that assures compliance with the new DHS unusual incident reporting processes.

ADULT PARTIAL CARE

1. *All funded mental health programs shall provide their clients with the following rights... [N.J.A.C. 10:37-4.5(h)5]*
 5. *The right to privacy and dignity.*

The second floor men's bathroom had a stall that was missing a lock. The agency corrected this on-site during the inspection.

2. *The PA shall provide a safe environment, normalized to the extent possible, that shall serve to enhance interaction among staff and consumers. [N.J.A.C. 10:37F-2.9(a)]*

The following deficiencies were identified during the review:

- In the basement, the furnace exhaust pipe was rusting out causing holes within the pipe.
- A declining inventory log was lacking for the sample medications stored by the agency.
- A declining inventory log was lacking for the stored syringes.

Either during the site review, or shortly thereafter, the agency provided documentation that these deficiencies were corrected.

3. *The PA facility shall conform to all Federal, State and local laws and shall provide evidence of satisfactory inspections. [N.J.A.C. 10:37F-2.9(a)1]*

The agency's Health Inspection Certificate from the East Orange Health Department permitting food preparation was issued as "Conditionally Satisfactory" because the staff members who had been trained in safe food handling had left the agency. Shortly after the review, the agency arranged for two staff members to be trained, and they successfully passed the test given by the East Orange Health Department.

4. *Before initiating treatment with psychotropic medication(s), a comprehensive drug history shall be obtained and documented with special emphasis on which drugs have, in the past, produced a positive response, and which drugs have caused allergic or toxic reactions. Unfavorable reactions shall be emphasized in the record and listed as individual risk factors. In cases where the client may have taken a combination of drugs prior to coming to the agency, inquiries shall be made, especially with regard to alcohol, street and over-the-counter drugs. [N.J.A.C. 10:37-6.54 (b)]*

In three out of seven clinical records reviewed, timely documentation in the psychiatric evaluation of a comprehensive drug history was lacking. Medications were prescribed by the psychiatrist for the clients prior to obtaining the client's medication history. For example, EG was prescribed medication on 4/30/13 and 5/28/13 prior to the comprehensive drug history completed on 6/4/13.

5. *The PA's written procedures shall require that every comprehensive assessment include at a minimum, the assessment of the consumer's skill and resource strengths, and barriers to attainment of the consumer's self-expressed goals related to community integration and living, learning, working and social role recovery in the following areas: [N.J.A.C. 10:37F-2.3(a)] i-x]*
- v. *Vocational and educational factors including, but not limited to, job history, task concentration and motivation for work;*

In three out of seven clinical records reviewed, the comprehensive assessment lacked an assessment of task concentration for work.

6. *The written comprehensive assessment shall be completed within one month after acceptance to the program and prior to development of the individualized recovery plan. [N.J.A.C. 10:37F-2.3(a)5]*

Six out of six clinical records reviewed documented the comprehensive assessment being done late and not within one month after acceptance to the program.

7. *The written comprehensive assessment shall include a documented psychiatric evaluation completed within two weeks of admission... [N.J.A.C. 10:37F-2.3(a)6]*

Six out of seven clinical records reviewed reflected a psychiatric evaluation being completed later than within two weeks of admission.

8. *The PA shall directly provide an Illness Management and Recovery Program, which is comprised of a broad set of strategies and activities that help consumers collaborate with practitioners to identify and pursue personally meaningful recovery goals and which is founded upon a core set of interventions that include: psycho education, social skills training, cognitive-behavioral therapy, motivational interviewing and behavioral tailoring, and relapse prevention techniques. This is accomplished by helping people to develop coping strategies and skills that reduce the individual's susceptibility to the illness, provide assistance and support to effectively manage symptoms to prevent relapse and rehospitalizations, and reduce distress to the point that the consumer is able to enjoy an improved quality of life. They are intended to be both didactic and practical in nature and can be provided in both group and individual settings. Such services will be provided directly to consumers and in support of family members and/or other significant individuals important to the consumer. [N.J.A.C. 10:37F-2.5(b)3 i-vi]*

The Illness Management and Recovery group lacked a well-defined, sequential curriculum. In addition, in two out of two applicable clinical records, progress notes were limited to IMR group attendance and lacked information about the consumer's level of participation progress in the IMR group.

9. *The primary case coordinator or counselor shall possess a bachelor's degree in a human services field, or an associate's degree and two years experience in providing human services, or five years of human service experience, or possess a relevant professional credential, such as Certified Psychiatric Rehabilitation Practitioner, bachelor's degree in social work, certified rehabilitation counselor, certified alcohol and drug counselor, bachelor's degree in rehabilitation, or bachelor of science in nursing. [N.J.A.C. 10:37F-2.10(b) 4 ii]*

The personnel file for D.H. contained a copy of the degree which was signed and dated verifying that Human Resources had viewed the original degree. However the degree was written in Latin and the discipline was unknown. During the review, the agency verified through VCred that the degree was in Psychology.

10. *The PA shall ensure that only appropriately licensed personnel shall provide services for which a license is required. [N.J.A.C. 10:37D-2.13 (a) 2]*

The personnel file for J.F. lacked current documentation of verification of the driver's license. The license was verified during the review.

11. *The primary case coordinator or counselor shall possess a bachelor's degree in a human services field, or an associate's degree and two years experience in providing human services, or five years of human service experience, or possess a relevant professional credential, such as Certified Psychiatric Rehabilitation Practitioner, bachelor's degree in social work, certified rehabilitation counselor, certified alcohol and drug counselor, bachelor's degree in rehabilitation, or bachelor of science in nursing. [N.J.A.C. 10:37F-2.10(b) 4 ii]*

The personnel file for D.H. contained a copy of the degree which was signed and dated verifying that Human Resources had viewed the original degree. However, the degree was written in Latin and the discipline was unknown. During the review, the agency verified through VCred that the degree is in Psychology.

SUPPORTIVE HOUSING PROGRAM

12. *The PA shall ensure that only appropriately licensed personnel shall provide services for which a license is required. [N.J.A.C. 10:37D-2.13 (a) 2]*

The personnel file for G.R. lacked current documentation of verification of the driver's license. The license was verified during the review. In addition, the personnel record for D.P. lacked documentation of verification that the driver's license was verified at the time of hire; documentation reflected that it was verified three months later.

Addendum

Mental Health Association of Essex County
33 South Fullerton Avenue
Robert N. Davison
Executive Director

Review Dates:
July 14- 15, 2015

Licenses Expiration Date:
July 14, 2018

The following table lists each program provided by Mental Health Association of Essex County, its location, Division of Mental Health and Addiction Services (DMHAS) funding status, and the licensure status resulting from this review. Housing locations for the residential programs are not included. Main office locations for residential programs are provided instead.

Program Element	Program Name	Program Address	Funded by DMHAS	Licensure Status
Outpatient	Center for Low Cost Psychotherapy	33 South Fullerton Avenue, Montclair	Yes	Full Deemed Status
Adult Partial Care	Prospect House	424 Main Street East Orange	Yes	Partial Deemed Status
Intensive Family Support Services (IFSS)		33 South Fullerton Avenue, Montclair	Yes	Full Deemed Status
Supportive Housing Program		60 South Fullerton Avenue, Montclair	YES	Full



License No. 302090304

State of New Jersey
Department of Human Services
Office of Licensing

LICENSE

Mental Health Association of Essex County

33 South Fullerton Avenue
Montclair, NJ 07042

In accordance with Department of Human Services regulations, NJAC 10:190, is hereby licensed to operate

Outpatient Mental Health Services

at
33 South Fullerton Avenue
Montclair, NJ 07042

This License is effective from 7/15/2015 to 7/14/2018


Elizabeth Connolly, Acting Commissioner
Department of Human Services



License No. 302090405

State of New Jersey
Department of Human Services
Office of Licensing

LICENSE

Mental Health Association of Essex County

33 South Fullerton Avenue
Montclair, NJ 07042

*In accordance with Department of Human Services regulations, NJAC 10:190, is
hereby licensed to operate*

Adult Partial Care Services

Prospect House

at

424 Main Street
East Orange, NJ 07018

This License is effective from 7/15/2015 to 7/14/2018

A handwritten signature in black ink, appearing to read "Elizabeth Connolly".

Elizabeth Connolly, Acting Commissioner
Department of Human Services



License No. 302090312

State of New Jersey
Department of Human Services
Office of Licensing

LICENSE

Mental Health Association of Essex County

33 South Fullerton Avenue
Montclair, NJ 07042

*In accordance with Department of Human Services regulations, NJAC 10:190, is
hereby licensed to operate*

Intensive Family Support Services

at
33 South Fullerton Avenue
Montclair, NJ 07042

This License is effective from 7/15/2015 to 7/14/2018

Elizabeth Connolly, Acting Commissioner
Department of Human Services



License No. 302090348

State of New Jersey
Department of Human Services
Office of Licensing

LICENSE

Mental Health Association of Essex County

33 South Fullerton Avenue
Montclair, NJ 07042

In accordance with Department of Human Services regulations, NJAC 10:37A, is hereby licensed to operate

Supportive Housing Program

at
60 South Fullerton Avenue
Montclair, NJ 07042

This License is effective from 7/15/2015 to 7/14/2018

A handwritten signature in black ink, appearing to read "Elizabeth Connolly".

Elizabeth Connolly, Acting Commissioner
Department of Human Services