ADOPTIONS COMMUNITY AFFAIRS

RULE ADOPTIONS

CHILDREN AND FAMILIES

(a)

CHILD PROTECTION AND PERMANENCY

Notice of Readoption Substance-Affected Infants Readoption: N.J.A.C. 3A:26

Authority: N.J.S.A. 9:3A-7f, 9:6-8.15, 26:2H-5, and 30:4C-4.h. Authorized By: Christine Norbut Beyer, M.S.W., Commissioner, Department of Children and Families.

Effective Date: December 4, 2024. New Expiration Date: December 4, 2031.

Take notice that pursuant to N.J.S.A. 52:14B-5.1.c, the rules at N.J.A.C. 3A:26 were scheduled to expire on January 16, 2025. These rules ensure New Jersey's compliance with the Child Abuse Prevention and Treatment Act (CAPTA) (42 U.S.C. §§ 5101 et seq.), which requires healthcare providers to notify child protective services when a child is born and identified as affected by substance abuse, withdrawal symptoms resulting from prenatal drug exposure, or a Fetal Alcohol Spectrum Disorder, pursuant to section 106(b)(2)(B)(ii) of CAPTA.

N.J.A.C. 3A:26-1 sets forth definitions, content requirements, and the Division of Child Protection and Permanency's procedures for receiving and evaluating reports that are submitted by ambulatory care facilities and hospitals pursuant to N.J.A.C. 8:43A-28.7 and 8:43G-2.13.

The Department of Children and Families has reviewed the rules at N.J.A.C. 3A:26 and found them to be necessary, reasonable, and proper for the purposes for which they were originally promulgated. Therefore, pursuant to N.J.S.A. 52:14B-5.1.c(1), these rules are readopted and shall continue in effect for a seven-year period.

COMMUNITY AFFAIRS

(b)

DIVISION OF CODES AND STANDARDS

Rooming and Board Homes

Adopted Amendments: N.J.A.C. 5:27-1.5, 1.6, 1.9, 2.1, 4.6, 4.7, and 6.1

Adopted New Rules: N.J.A.C. 5:27-13.1, 13.2, and 13.3

Proposed: December 4, 2023, at 55 N.J.R. 2381(a).

Adopted: December 4, 2024, by Jaquelyn A. Suárez, Commissioner,

Department of Community Affairs.

Filed: December 4, 2024, as R.2025 d.005, without change.

Authority: N.J.S.A. 55:13B-4 and 6. Effective Date: January 6, 2025. Expiration Date: June 6, 2031.

Summary of Public Comments and Agency Responses:

Comments were received from George Brice, Adam Chrone, and Mitchell Malec.

Comments Received From George Brice

1. COMMENT: The commenter recommends removing the provision stating that operators may drug test as part of the house rules because there is not a requirement mandating a drug test.

RESPONSE: The Department of Community Affairs (Department) respectfully disagrees. The intention of including non-mandatory items in the rules is to clarify that a weekly drug and alcohol screening and a

reasonable curfew are house rules that are permitted and are not deemed unreasonable, in accordance with N.J.A.C. 5:27-3.2(a).

2. COMMENT: In reference to paragraph 5 in the definition of "cooperative sober living residences" (CSLRs), the commenter states that this paragraph gives more reason to mandate new operator licenses where residents have access to community resources. The commenter recommends the Department support more expansion of community-based housing and support services.

RESPONSE: The Department thanks the commenter for their recommendation. The Department approves the licensing of all operators that meet the requirements of the rules. Additionally, the Department does not determine the location of the CSLRs.

3. COMMENT: In reference to paragraph 6 in the definition of CSLRs, the commenter states that the operator needs to ensure that the services align with research. Additionally, the commenter notes that the Department needs to understand that not just anyone can reasonably implement non-clinical recovery and support services without training and active monitoring.

Furthermore, the commenter states that mandating recovery activities is not being recovery-oriented. The commenter recommends the Department implement timely operator consequences rather than empowering operators with options for handling residents.

RESPONSE: The Department respectfully disagrees. The operator's consequences for failure to abide by requirements are handled appropriately and timely in accordance with the rulemaking. While the Department permits CSLRs to mandate non-clinical and recovery support services, the professional quality and responsibilities of drug and alcohol counseling services are regulated at N.J.A.C. 13:34C.

- 4. COMMENT: The commenter provided a list of feedback and recommendations for the Department for general concerns on CSLRs, which follows verbatim:
- "1. Disseminate statewide new rule proposals and other future information to behavioral health organizations, advocacy groups, support groups, self-help centers, community wellness centers, etc.
- 2. Engage peer leaders and the peer workforce to take on responsibilities.
 - 3. Mandating heating.
 - 4. Mandating air conditioning.
- 5. Providing key State contact numbers, including 988, Disability Rights of NJ, warm lines, and a listing of self-help and community wellness centers.
 - 6. Mandating professional pest control exterminators.
 - 7. Mandating professional maintenance.
 - 8. Mandating professional safety inspections.
 - 9. Monitor the payees, e.g., the owner.
 - 10. Support self-payee, such as offering financial literacy education.
- 11. Mandate affordable, fair rent prices, including itemized operator charges submitted to the resident.
- 12. Ensure cost of living adjustment money goes to the resident, not the payee owner.
- 13. Ensure boarding home operators earn the additional operational cost that residents increased SSI supplement pays for.
- 14. Be more mindful to strategize keeping money in the resident's pocket.
- 15. Regulating operators who have known far too long that they can make their money even while under indictment and live very well.
 - 16. Truly vet boarding home operators.
 - 17. Move past the historical mantra of "Where will these people go?"
- 18. Require training for boarding home operators and mandate active monitoring and enforcement of these places.
- 19. Regulate operators who expand institutional barriers and prevent timely healthcare. Additionally, they should aid residents to pursue employment, education, training, and social activities.
 - 20. Prevent boarding homes in poor geographic locations, etc.