



Agenda Item 10.0

Report of the Legislative Committee

BRN Board Meeting | August 17, 2022

BRN Board Meeting Legislative Committee

August 17, 2022

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BOARD OF REGISTERED NURSING
Agenda Item Summary

AGENDA ITEM: 10.0
DATE: August 17, 2022

ACTION REQUESTED: Legislative Update

REQUESTED BY: Dolores Trujillo, RN, Chairperson

BACKGROUND: Presentation of amended and not previously considered bills for the Board to review and take a position through vote.

NEXT STEPS: Continued tracking and analysis of BRN relevant bills

[2022 Legislative Calendar](#)

[California Legislative Process](#)

FINANCIAL IMPLICATIONS, IF ANY: Typically, only for direct impact bills, if any, as reflected by the proposed legislation and contained in bill analysis (available upon request).

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Bills to be Presented at the August 17, 2022 Board Meeting

As of August 12, 2022

Bills amended or not previously presented:

Direct Impact

1. Assembly Bill 852 (Wood), Amended 6/23/2022
2. Assembly Bill 1604 (Holden), Amended 8/11/2022
3. Assembly Bill 2626 (Calderon), Amended 8/01/2022
4. Assembly Bill 2684 (Business and Professions), Amended 8/11/2022

Indirect Impact

1. Assembly Bill 1120 (Irwin), Amended 8/3/2022
2. Senate Bill 731 (Durazo), Amended 6/23/2022
3. Senate Bill 1475 (Glazer), Amended 6/29/2022

2021-2022 Legislative Session

BRN Bills of Interest: Summaries

(Click on bill title for link to the text; Bill information/status as of August 12, 2022)

DIRECT IMPACT BILLS

1. AB 657 (Cooper), Healing arts: expedited licensure process: applicants providing abortion services

This bill would require the Medical Board of California, the Osteopathic Medical Board of California, the Board of Registered Nursing, and the Physician Assistant Board to expedite the licensure process of an applicant who can demonstrate that they intend to provide abortions within their scope of practice.

Board Position: Support
Status: Senate Floor

2. AB 852 (Wood), Health Care Practitioners: Electronic Prescriptions: Nurse Practitioner Scope of Practice: Practice Without Standardized Procedures

This bill prohibits a pharmacy, pharmacist, or other practitioner authorized to dispense or furnish a prescription from refusing to dispense or furnish an electronic prescription solely because the prescription was not submitted via, or is not compatible with, their proprietary software; authorizes a pharmacy, pharmacist, or other authorized practitioner to decline to dispense or furnish an e-prescription submitted via software that fails to meet specified criteria; makes specified additional exceptions, with respect to health care practitioners who are required to issue a prescription as an e-prescription; and requires pharmacies, if specified prohibitions for a pharmacy transferring or forwarding e-prescriptions are subsequently removed, to implement, within one year from the date the prohibition is removed, the necessary provisions to allow for the transferring or forwarding of an e-prescription.

Board Position: Support
Status: Senate Floor

3. AB 858 (Jones-Sawyer), Employment: Health Information Technology: Clinical Practice Guidelines: Worker Rights

This bill prohibits a general acute care hospital (GACH) from limiting a worker providing direct patient care from exercising independent clinical judgement, as specified; authorizes a worker who provides direct patient care at a GACH to override health information technology and clinical practice guidelines, as specified; and prohibits a GACH from retaliating against a worker providing direct patient care for overriding health information technology and clinical practice guidelines.

Board Position: Support

Status: Senate Floor – Inactive File (Two Year Bill)

4. AB 1604 (Holden), The Upward Mobility Act of 2022: Boards and Commissions: Civil Service: Examinations: Classifications

This bill would require the California Department of Human Resources, among other provisions, to establish best practices for each aspect of the design, announcement, and administration of examinations for the purpose of increasing diversity of applicant pools on employment lists. The bill would also require state departments to provide a report to the California Department of Human Resources that demonstrates progress made toward meeting upward mobility goals.

Board Position: Support

Status: Senate Floor

5. AB 1711 (Seyarto), Privacy: Breach

This bill requires agencies to report data breaches on their website when a person or business operating a system on behalf of an agency is required to disclose a breach of that system.

Board Position: Watch

Status: Senate Floor

6. AB 2188 (Quirk), Discrimination in Employment: Use of Cannabis

This bill makes it unlawful for an employer to discriminate against a person in hiring, termination, or any term or condition of employment, or otherwise penalize a person, if the discrimination is based upon the person's use of cannabis off the job and away from the workplace or, with prescribed exceptions, upon an employer-required drug screening test that has found the person to have non-psychoactive cannabis metabolites in their urine, hair, or bodily fluids.

Board Position: Support

Status: Senate Floor

7. AB 2626 (Calderon), Medical Board of California: Licensee Discipline: Abortion

This bill prohibits the Medical Board of California, the Osteopathic Medical Board, the Board of Registered Nursing, and the Physician Assistant Board from suspending or revoking the certificate, or denying an application for licensure, of a physician and surgeon, nurse practitioner, certified nurse-midwife, or physician assistant solely for performing an abortion in accordance with existing California law. This bill would also prohibit these boards from imposing such discipline on the licensees if they are disciplined or convicted in another state in which they are licensed or certified solely for performing abortions in that state.

Board Position: Support

Status: Senate Floor

8. AB 2684 (Committee on Business and Professions), Nursing

This is the sunset bill for the Board of Registered Nursing. The bill makes changes to the Nursing Practice Act based on recommendations provided during the joint sunset review of the Board of Registered Nursing.

Board Position: Support, If Amended
Status: Senate Floor

9. SB 1237 (Newman), Licenses: Military Service

This bill defines the phrase "called to active duty" to include active duty in the United States Armed Forces and on duty in the California National Guard, as specified. This bill would also make non-substantive changes to those provisions.

Board Position: Support
Status: Ordered to Engrossing and Enrolling

10. SB 1375 (Atkins), Nursing: Nurse Practitioners

This bill expands the training options for Nurse Practitioners and Certified Nurse-Midwives seeking to perform abortions by aspiration techniques, clarifies that an independent Nurse Practitioner may perform abortions by aspiration techniques without physician supervision, deletes the requirement that the Board of Registered Nursing define the minimum standards for the "transition to practice" requirement for independent Nurse Practitioners, and authorizes an Nurse Practitioner to use prior practice experience to meet the "transition to practice" requirement.

Board Position: Support
Status: Assembly Floor

11. SB 1424 (Nielsen), Consumer Affairs: The Department of Consumer Affairs

This bill makes non-substantive changes. Place-holder bill.

Board Position: None Taken
Status: Senate Rules Committee

12. SB 1451 (Borgeas), Department of Consumer Affairs

This bill makes non-substantive changes. Place-holder bill.

Board Position: None Taken
Status: Senate Rules Committee

INDIRECT IMPACT BILLS

1. AB 1120 (Irwin), Clinical Laboratories: Blood Withdrawal

This bill authorizes a certified phlebotomy technician to collect blood through a peripheral venous catheter under specified conditions, including that the blood collection is performed using a device approved by the United States Food and Drug Administration.

Board Position: Oppose

Status: Senate Floor

2. AB 1810 (Levine), Pupil Health: Seizure Disorders

This bill authorizes a trained employee volunteer to administer emergency anti-seizure medication to a pupil upon the request of the parent, requires the development of state standards for the training, and requires the parent to provide specified information to the local educational agencies, including a seizure action plan.

Board Position: Support

Status: Senate Floor

3. AB 1914 (Davies), Resource Family Approval: Training

This bill exempts resource family parents who meet certain requirements, such as having active and unrestricted licensure as a health care professional, as provided, from resource family approval first aid training requirements. This bill also exempts resource family parents who have a certificate of completion for Basic Life Support for health care professionals, or Pediatric Advanced Life Support, or a higher standard of training that certifies CPR, from RFA CPR training requirements.

Board Position: Support

Status: Senate Floor

4. AB 2107 (Flora), Department of Consumer Affairs

This bill would, for a rapid antigen or point-of-care molecular infectious disease test classified as waived under CLIA, authorize an adult who has received appropriate training and is acting under the direction of the laboratory director and ordering physician for testing in a non-health care congregate setting to collect anterior nasal swabs, if the person to be tested is unable to self-swab, and to perform the test on the collected sample.

Authorizes a person licensed as a clinical molecular biologist to engage in, or to supervise others engaged in, molecular biology related to diagnosis of human genetic abnormalities within the specialty of genetics, specifically molecular biology within the specialty of microbiology.

This bill would declare that it is to take effect immediately as an urgency statute.

Board Position: Watch
Status: Senate Floor

5. SB 441 (Hurtado), Health Care Workforce Training Programs: Geriatric Medicine

Requires the Department of Health Care Access and Information (DHCAI) to include students and professionals with training in geriatrics in its administration of health professions workforce programs. This bill would provide access to loan repayment programs to nurse practitioners and certified nurse midwives practicing as geriatric professionals in underserved areas.

Board Position: Support
Status: Assembly Appropriations Committee, Suspense File (Two Year Bill)

6. SB 637 (Newman), Health Facility Reporting: Staffing

This bill requires a general acute care hospital to report specified information to CDPH (department) on a form and schedule determined by the department and would require the department to publicly post the information on a weekly basis during any health-related state of emergency in California proclaimed by the President of the United States or by the Governor, and on a monthly basis at all other times. The bill would require that the reports contain information on staffing, including, until January 1, 2025, or the end of the declared COVID-19 emergency, whichever comes first, on matters relating to COVID-19 cases.

If the hospital fails to comply with the above requirement, the bill would authorize the department to impose fines or other penalties, and to suspend, revoke, or refuse to renew the license of, the hospital, as specified.

It would require a health facility to post any approval for program flexibility granted by the department immediately adjacent to the facility's license and on the facility's internet website, as specified.

Board Position: Support
Status: Assembly Floor - Inactive File (Two Year Bill)

7. SB 731 (Durazo), Criminal Records: Relief

This bill expands automatic arrest record and conviction relief to additional felony offenses. The bill also expands discretionary expungement relief to include felonies where the defendant was sentenced to state prison, rather than just realigned felonies.

Board Position: Watch
Status: In Senate – Concurrence in Assembly Amendments

8. SB 1334 (Bradford), Meal and Rest Periods: Hospital Employees

This bill entitles employees who provide direct patient care or support direct patient care in a general acute care hospital, clinic, or public health setting directly employed by

specified public sector employers to one unpaid 30-minute meal period on shifts over 5 hours and a 2nd unpaid 30-minute meal period on shifts over 10 hours, as provided by specified existing law. The bill would entitle these employees to a rest period based on the total hours worked daily at the rate of 10 minutes net rest time per 4 hours or major fraction thereof, as provided. The bill would require these employers, if they fail to provide an employee a meal period or rest period in accordance with the bill, to pay the employee one hour of pay for each meal period violation and one hour of pay for each rest period violation at the employee's regular rate of compensation for each workday that the meal or rest period is not provided. The bill would exempt employees who are covered by a valid collective bargaining agreement that provides for meal and rest periods and, if the employee does not receive a meal or rest period as required by the agreement, includes a prescribed monetary remedy.

Board Position: Support

Status: Assembly Floor

9. SB 1475 (Glazer), Blood Banks: Collection

Authorizes blood collection at a blood bank when a physician or surgeon is not physically present if the medical director and their medical advisory committee approve and if the employee placed in charge, is a registered nurse. The bill would authorize the registered nurse placed in charge to be physically present or available via telehealth, so long as the method of telehealth used is synchronous. The bill would also require a blood bank to report annually to the department on any adverse donor events requiring emergency medical intervention, including whether a registered nurse was physically present on the premises.

Board Position: Oppose

Status: Assembly Floor

NOT ADVANCING BILLS

Not Advancing - Direct Impact

1. **AB 562 (Low), Frontline COVID-19 Provider Mental Health Resiliency Act of 2021: Health Care Providers: Mental Health Services**

Requires the Department of Consumer Affairs (DCA) director to establish a program to provide mental health services to specified frontline health care licensees treating patients with COVID-19.

Makes mental health services available to Board of Registered Nursing (BRN) licensees who provide or have provided direct care healthcare services to COVID-19 patients. It also requires notification to licensees by the BRN and solicitation of applications from licensees.

Board Position: Support

2. **AB 646 (Low), Department of Consumer Affairs: Boards: Expunged Convictions**

Requires a professional licensing board to update or remove information posted on its online license search system about a revoked license within 90 days of receiving an expungement order related to the conviction as specified. It, also, requires the board to charge a fee of \$25 to cover the reasonable regulatory cost.

Board Position: Support, if Amended

3. **AB 1662 (Gipson), Licensing Boards: Disqualification from Licensure: Criminal Conviction**

Requires a board to establish a process by which prospective applicants may request a preapplication determination as to whether their criminal history could be cause for denial of a completed application for licensure by the board. The bill would provide that the preapplication determination, among other things, may be requested by the prospective applicant at any time prior to the submission of an application and would require the board to include specified written information regarding the criteria used to evaluate criminal history and how the prospective applicant may challenge a denial by the board.

The bill would provide that a preapplication determination does not constitute a denial or disqualification of an application and would prohibit requiring a preapplication determination for licensure or for participation in any education or training program. The bill would require a board to publish information regarding its process for requesting a preapplication determination on its internet website and authorize a board to charge a fee, as specified, to be deposited by the board into the appropriate fund and available only upon appropriation by the Legislature.

Board Position: Oppose

Not Advancing - Indirect Impact

1. AB 1105 (Rodriguez), Hospital Workers: COVID-19 Testing

This bill requires general acute care hospital employers to develop and implement a program to offer COVID-19 screening testing for health care personnel, as defined.

Requires general acute care hospital employers to test patients for COVID-19 prior to being admitted, with specified conditions and exceptions.

Board Position: Support

2. AB 2790 (Wicks), Reporting of Crimes: Mandated Reporters

This bill would remove the requirement that a health practitioner make a report to law enforcement when they suspect a patient has suffered physical injury caused by assaultive or abusive conduct. The bill would instead require a health care practitioner, who in their professional capacity or within the scope of their employment, knows or reasonably suspects that their patient is experiencing any form of domestic violence or sexual violence, to provide brief counseling and offer a referral and warm handoff to domestic violence or sexual violence advocacy services before the end of treatment, to the extent that it is medically possible.

The bill would allow for reporting of assaultive or abusive conduct when a patient requests and would also give health care practitioners immunity from criminal or civil liability arising from any required or authorized report.

Board Position: Oppose

3. SB 213 (Cortese), Workers' Compensation: Hospital Employees

This bill defines "injury," for a hospital employee who provides direct patient care in an acute care hospital, to include infectious diseases, cancer, musculoskeletal injuries, post-traumatic stress disorder, and respiratory diseases. The bill would include the novel coronavirus 2019 (COVID-19), among other conditions, in the definitions of infectious and respiratory diseases.

It would create rebuttable presumptions that these injuries that develop or manifest in a hospital employee who provides direct patient care in an acute care hospital arose out of and in the course of the employment. The bill would extend these presumptions for specified time periods after the hospital employee's termination of employment.

Board Position: Support