



## Agenda Item 10.0

### **Report of the Legislative Committee**

BRN Board Meeting | May 18-19, 2022

BRN Board Meeting  
Legislative Committee  
May 18-19, 2022

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## Agenda Item 10.1

**Legislative Update and Discussion of Bills Relevant to the  
Board of Registered Nursing (Board) from the  
2021-2022 Legislative Session**

**BRN Board Meeting | May 18-19, 2022**

**BOARD OF REGISTERED NURSING**  
**Board Meeting**  
**Legislative Agenda Item Summary**

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**AGENDA ITEM:** 10.1  
**DATE:** May 18-19, 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 May 18-19, 2022 Board Meeting**

As of May 5, 2022

### **Bills amended or not previously presented:**

#### **Direct Impact**

1. AB 852 (Wood); Amended April 18, 2022
2. AB 1662 (Gipson), Amended April 27, 2022
3. AB 1711 (Seyarto), Not previously presented
4. AB 2626 (Calderon), Amended April 18, 2022
5. AB 2684 (B&P), Amended April 27, 2022

#### **Indirect Impact**

1. AB 2055 (Low); Amended April 21, 2022
2. AB 2107 (Flora); Amended on April 6, 2022
3. AB 2790 (Wicks), Not previously presented
4. SB 962 (Jones), Not previously presented
5. SB 1334 (Bradford), Not previously presented
6. SB 1475 (Glazer), Amended April 18, 2022

## 2021-2022 Legislative Session

### BRN Bills of Interest: Summaries

(Click on bill title for link to the text; Bill information/status as of May 5, 2022)

#### Direct Impact Bills

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

Requires the 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 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

*Status:* In Senate Committee on Appropriations, Suspense File (two-year bill, i.e. introduced in 2021)

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 (Medical Board of California's BPC 2027 carve-out for the BRN and not removing conviction information, but posting expungement order with date)

*Status:* In Senate Committee on Business, Professions and Economic Development (two-year bill, i.e. introduced in 2021)

3. [AB 852 \(Wood\), Health Care Practitioners: Electronic Prescriptions: Nurse Practitioner Scope of Practice: Practice Without Standardized Procedures](#)

Adds the new category of nurse practitioners (NPs) who are authorized to practice independently starting January 1, 2023, to provisions of law that include physician and surgeons and other relevant health care licensees; corrects a drafting error related to the conditions when an independent NP must refer to a physician and surgeon; adds the new independent NPs to pharmacy definitions for prescribers; and makes other technical and clarifying changes.

Authorizes the board to issue a certificate to practice pursuant to BPC Section 2837.103 for a fee in an amount sufficient to cover the reasonable regulatory cost. The bill would specify that the provisions are not intended to encourage a county government to replace an existing physician and surgeon or any county-administered services provided by a

physician and surgeon. The bill would require a county to follow a specified recruitment procedure if a county physician and surgeon position becomes vacant and would prohibit a county from filling an open physician and surgeon position with a nurse practitioner until the open position has been unfilled for a period of at least 3 months, as specified.

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. The bill would permit a pharmacy, pharmacist, or other authorized practitioner to decline to dispense or furnish an electronic prescription submitted via software that fails to meet any one of specified criteria, including compliance with the federal Health Insurance Portability and Accountability Act of 1996. With respect to health care practitioners who are required to issue a prescription as an electronic data transmission prescription, the bill would make additional exceptions to that requirement, including for a prescriber who registers with the California State Board of Pharmacy and states that they satisfy one or more criteria, including that they issue 100 or fewer prescriptions per calendar year. The bill would make specified exceptions to the requirement for a pharmacy to immediately transfer an electronic prescription to an alternative pharmacy.

It would take effect immediately as an urgency statute.

*Board Position:* Support

*Status:* In Senate Committee on Business, Professions and Economic Development (two-year bill, i.e. introduced in 2021)

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

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:* In Senate Inactive File (two-year bill, i.e. introduced in 2021)

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

Same as AB 105 (Holden), which was vetoed by Governor Newsom in October, 2021, with the recommendation that the bill costs be considered through the annual state budget process.

Modifies certain state civil service employment processes, including those related to job announcements, examinations and classifications; requires state boards and commissions that have at least one volunteer member to have at least one member from an underrepresented community; makes changes to departmental upward mobility programs;

and adds a new demographic category for data collection by state agencies, among other provisions.

*Board Position:* Support

*Status:* In Assembly Committee on Appropriations, Referred to Suspense file

6. 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

*Status:* In Assembly Committee on Appropriations

7. AB 1711 (Seyarto), Privacy: Breach

Requires an agency to post a notice on the agency's internet website when a person or business operating a system on behalf of the agency is required to issue a security breach notification for that system pertaining to licensee personal information as per Civil Code Section 1798.29.

*Board Position:* To be determined

*Status:* Assembly Floor, 3<sup>rd</sup> Reading

8. AB 1756 (Smith), Department of Consumer Affairs

Currently, makes non-substantive changes. Place-holder bill.

*Board Position:* To be determined

*Status:* Pending referral to Committee

9. AB 1996 (Cooley), State Government: Administrative Regulations: Review

Requires each state agency to, on or before January 1, 2026, review that agency's regulations, identify any regulations that are duplicative, overlapping, inconsistent, or out of date, to revise those identified regulations, as provided, and report to the Legislature and Governor, as specified. The bill would repeal these provisions on January 1, 2027.

*Board Position:* Support

*Status:* In Assembly Committee on Appropriations, Suspense File

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

Amends the California Fair Employment and Housing Act to make 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:* In Assembly Committee on Appropriations

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

Prohibits the Medical Board of California and the Osteopathic Medical Board of California from suspending or revoking the certificate of a physician and surgeon solely for performing an abortion so long as they performed the abortion in accordance with the provisions of the Medical Practice Act and the Reproductive Privacy Act.

The bill would also prohibit the Board of Registered Nursing and the Physician Assistant Board from suspending or revoking the certification or license of a nurse practitioner, nurse-midwife, or a physician assistant for performing an abortion so long as they performed the abortion in accordance with the provisions of the Nursing Practice Act or the Physician Assistant Practice Act, as applicable, and the Reproductive Privacy Act.

*Board Position:* To be determined

*Status:* In Assembly Committee on Appropriations

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

Rescinds the Governor's power to remove any member of the Board of Registered Nurses for cause, except for those members appointed by the Governor as well other non-substantive changes.

This bill would create within the board a Nursing Education Advisory Committee, which the bill would require to solicit input from approved nursing programs to study and recommend nursing education standards to the board.

It would require that the executive officer shall develop a uniform method for evaluating requests and granting approvals pursuant to BPC Section 2786 pertaining to approval and regulation of nursing schools/programs. The executive officer may revise the uniform method developed pursuant to subdivision (e) of BPC 2786, as necessary. The development or revision of the uniform method shall be exempt from the requirements of the Administrative Procedure Act (Chapter 3.5 (commencing with Section 11340) of Part 1 of Title 2 of the Government Code). The board's nursing education consultants shall use the uniform method to evaluate requests and grant approvals pursuant to this section. The board shall post the approved method and any revisions on the board's website.

The board shall post the approved method and any revisions on the board's website pertaining to COVID 19 emergency provisions, extended to the 2022-23 academic year, for nursing schools/programs in the non-availability of facilities for their students.

The bill prohibits an institution of higher education or a private postsecondary school of nursing subject to BPC Section 2786 from paying any clinical agency or facility for clinical experience placements for students enrolled in a nursing program offered by that school of nursing, as specified.

BRN sunset extension language to be added.

*Board Position:* Watch

*Status:* In Assembly Committee on Appropriations

13. SB 1031 (Ochoa Bogh), Healing Arts Boards: Inactive License Fees

Requires the renewal fee for an inactive license to be  $\frac{1}{2}$  of the amount of the fee for a renewal of an active license, unless the board establishes a lower fee.

*Board Position:* Support

*Status:* In Senate Committee on Appropriations, Suspense File

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

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 Senate Floor, 2<sup>nd</sup> Reading, per Senate Rule 28.8

15. SB 1365 (Jones), Licensing Boards: Procedures

Requires each board within the DCA to publicly post on its internet website a list of criteria used to evaluate applicants with criminal convictions so that potential applicants for licensure may be better informed about their possibilities of gaining licensure before investing time and resources into education, training, and application fees. The bill would require DCA to establish a process to assist each board in developing its internet website, as specified.

Also, requires DCA to develop a process for each board to use in verifying applicant information and performing background checks of applicants, and would require that process to require applicants with convictions to provide certified court documents instead of listing convictions on application documents. The bill would further require the board to develop a procedure to provide for an informal appeals process that would occur between an initial license denial and an administrative law hearing.

*Board Position:* Support

*Status:* In Senate Committee on Appropriations, Suspense File

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

Allows a nurse practitioner practicing pursuant to a standardized procedure, a qualified nurse practitioner functioning pursuant to Section 2837.103 or 2837.104 (103 and 104 NPs), to perform an abortion by aspiration techniques pursuant to Section 2253 upon completing training recognized by the Board of Registered Nursing.

It does not apply sub-section (c) of Business and Professions Code Section 2725 to 103 and 104 NPs, which pertains to physician supervision, assistance and consultation.

It removes the requirement of AB 890 (Wood, 2019-20) that the BRN shall, by regulation, define minimum standards for transition to practice, and that clinical experience may include experience obtained before January 1, 2021, if the experience meets the requirements established by the board. Instead, it requires that a nurse practitioner who has been practicing a minimum of three full-time equivalent years or 4,600 hours as of January 1, 2023, shall satisfy the transition to practice requirement. Clinical experience may include experience obtained before January 1, 2023, and be counted towards the three full-time equivalent years or 4,600 hours.

It, also, updates Section 123468 (b) (1) and (2) with nurse practitioner and certified nurse-midwife additions.

*Board Position:* Support

*Status:* In Senate Committee on Appropriations, Suspense File

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

Currently, makes non-substantive changes. Place-holder bill.

*Board Position:* To be determined

*Status:* Pending Committee Assignment

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

Currently, makes non-substantive changes. Place-holder bill.

*Board Position:* To be determined

*Status:* Pending Committee Assignment

**Indirect Impact Bills**

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

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

*Status:* In Senate Committee on Appropriations, Held Under Submission (two-year bill, i.e. introduced in 2021)

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

Expands the scope of practice of certified phlebotomists to include the collection of blood through a peripheral venous catheter using blood collection devices approved by the United States Food and Drug Administration, as specified.

*Board Position:* Oppose

*Status:* In Senate Committee on Business, Professions and Economic Development (two-year bill, i.e. introduced in 2021)

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

This bill would, if a pupil diagnosed with seizures, a seizure disorder, or epilepsy has been prescribed an emergency anti-seizure medication by the pupil's health care provider, authorize the pupil's local educational agency, upon receipt of a request from the pupil's parent or guardian, to designate one or more volunteers at the pupil's school to receive initial and annual refresher training regarding the emergency use of anti-seizure medication. The bill would require the Superintendent of Public Instruction to establish minimum standards of training for the administration of emergency anti-seizure medication, as provided. The bill would authorize a school nurse or, if the school does not have a school nurse or the school nurse is not onsite or available, a volunteer who has been designated and received training regarding the emergency use of anti-seizure medication, to administer emergency anti-seizure medication to a pupil diagnosed with seizures, a seizure disorder, or epilepsy if the pupil is suffering from a seizure.

The bill would require any local educational agency or school upon receipt of a parent or guardian's request to distribute a related notice at least once per school year to all staff. Before administering emergency anti-seizure medication or therapy prescribed to treat seizures in a pupil diagnosed with seizures, a seizure disorder, or epilepsy, the bill would require a local educational agency to obtain from the pupil's parent or guardian a seizure action plan that includes specified information. of education, and charter schools, the bill would impose a state-mandated local program.

*Board Position:* Support

*Status:* In Assembly Committee on Appropriations, Suspense File

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

Exempts a resource family member that has an active and unrestricted license issued by the Medical Board of California, the Osteopathic Medical Board of California, the Podiatric Medical Board of California, the Physician Assistant Board, the Board of Registered Nursing, the Board of Vocational Nursing and Psychiatric Technicians of the State of California, the Respiratory Care Board of California, or the Emergency Medical Services Authority from any requirement to complete, or show proof of completing, CPR or first aid training.

*Board Position:* Support if Amended (show proof of being current with CPR)  
*Status:* In Senate Committee on Human Services

5. AB 2055 (Low), Controlled Substances: CURES Database

As of April 1, 2023, transfers the responsibility for administration of the CURES database from the Department of Justice to the California State Board of Pharmacy.

*Board Position:* Watch  
*Status:* In Assembly Committee on Appropriations

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

This bill, for a rapid antigen or point-of-care polymerase chain reaction test classified as waived under CLIA, would authorize an adult who has received appropriate training and is acting under the direction of the laboratory director and ordering physician 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.

*Board Position:* Support  
*Status:* On Assembly Floor, 3<sup>rd</sup> Reading

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

Removes 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 suspects that a patient has suffered physical injury that is caused by domestic violence, as defined, to provide brief counseling and a referral to local and national domestic violence or sexual violence advocacy services, as specified.

*Board Position:* To be determined  
*Status:* On Assembly Floor, 3<sup>rd</sup> Reading

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

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

*Status:* In Assembly Committee on Insurance (two-year bill, i.e. introduced in 2021)

9. 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:* In Assembly Committee on Appropriations, Held Under Submission (two-year bill, i.e. introduced in 2021)

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

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:* In Assembly Inactive File (two-year bill, i.e. introduced in 2021)

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

Permits additional relief by way of withdrawing a plea and deleting arrest records for the purpose of most criminal background checks. Expands automatic arrest record and conviction relief to additional felony offenses, as specified. Expands discretionary expungement relief to include felonies where the defendant was sentenced to state prison, rather than just realigned felonies, as specified.

*Board Position:* Watch

*Status:* In Assembly Inactive File (two-year bill, i.e. introduced in 2021)

12. SB 962 (Jones), Healing Arts: Clinical Laboratory Technology: Moderate-Complexity Laboratories

For purposes of a moderate-complexity laboratory, this bill would expand the definition of a “laboratory director” to include an individual who meets the College of American Pathologists guidelines. The bill would authorize an individual who meets the College of American Pathologists guidelines to operate as a technical consultant in a moderate-complexity laboratory. With respect to the above-specified exceptions concerning a laboratory director for a clinical laboratory of an acute care hospital, the bill would expand those exceptions, as specified.

*Board Position:* To be Determined

*Status:* In Senate Committee on Appropriations, Suspense File

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

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:* To be Determined

*Status:* In Senate Committee on Appropriations, Suspense File

14. 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.

*Board Position:* Oppose

*Status:* In Assembly Health Committee