

AMENDED IN ASSEMBLY MAY 6, 2009

CALIFORNIA LEGISLATURE—2009—10 REGULAR SESSION

ASSEMBLY BILL

No. 1083

Introduced by Assembly Member John A. Perez

February 27, 2009

An act to amend Section 1257.7 of the Health and Safety Code, relating to health facilities.

LEGISLATIVE COUNSEL'S DIGEST

AB 1083, as amended, John A. Perez. Health facilities: security plans.

Under existing law, the State Department of Public Health licenses and regulates hospitals, as defined. Violations of these provisions is a crime. Existing law requires hospitals to conduct a security and safety assessment and, using the assessment, develop a security plan with measures to protect personnel, patients, and visitors from aggressive or violent behavior. Existing law requires the plan to include specified security considerations.

This bill would require hospitals to annually review and update the security and safety assessment and plan ~~and to include information regarding aggressive or violent behavior at other facilities~~. The bill would also suggest that the plan include security considerations relating to efforts to cooperate with local law enforcement regarding violent acts in the facility and would require the hospital to consult with affected employees, including the recognized collective bargaining agent or agents, if any, and, upon request, to make the plan and assessment available to any employee or to the recognized bargaining agent of any employee. Because this bill expands the definition of a crime, it would impose a state-mandated local program.

The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that no reimbursement is required by this act for a specified reason.

Vote: majority. Appropriation: no. Fiscal committee: yes.

State-mandated local program: yes.

The people of the State of California do enact as follows:

1 SECTION 1. Section 1257.7 of the Health and Safety Code is
2 amended to read:

3 1257.7. (a) After July 1, 2010, all hospitals licensed pursuant
4 to subdivisions (a), (b), and (f) of Section 1250 shall conduct, not
5 less than annually, a security and safety assessment and, using the
6 assessment, develop, and annually update based on the assessment,
7 a security plan with measures to protect personnel, patients, and
8 visitors from aggressive or violent behavior. The security and
9 safety assessment shall examine trends of aggressive or violent
10 behavior at the facility, ~~as well as information regarding aggressive~~
11 ~~or violent behavior at other facilities.~~ These hospitals shall track
12 incidents of aggressive or violent behavior as part of the quality
13 assessment and improvement program and for the purposes of
14 developing a security plan to deter and manage further aggressive
15 or violent acts of a similar nature. The plan may include, but shall
16 not be limited to, security considerations relating to all of the
17 following:

18 (1) Physical layout.

19 (2) Staffing.

20 (3) Security personnel availability.

21 (4) Policy and training related to appropriate responses to violent
22 acts.

23 (5) Efforts to cooperate with local law enforcement regarding
24 violent acts in the facility.

25 In developing this plan, the hospital shall consider guidelines or
26 standards on violence in health care facilities issued by the
27 department, the Division of Occupational Safety and Health, and
28 the federal Occupational Safety and Health Administration. As
29 part of the security plan, a hospital shall adopt security policies
30 including, but not limited to, personnel training policies designed

1 to protect personnel, patients, and visitors from aggressive or
2 violent behavior. In developing the plan and the assessment, the
3 hospital shall consult with affected employees, including the
4 recognized collective bargaining agent or agents, if any. Upon
5 request, the hospital shall make the plan and assessment available
6 to any employee or to the recognized bargaining agent of any
7 employee.

8 (b) The individual or members of a hospital committee
9 responsible for developing the security plan shall be familiar with
10 all of the following:

- 11 (1) The role of security in hospital operations.
- 12 (2) Hospital organization.
- 13 (3) Protective measures, including alarms and access control.
- 14 (4) The handling of disturbed patients, visitors, and employees.
- 15 (5) Identification of aggressive and violent predicting factors.
- 16 (6) Hospital safety and emergency preparedness.
- 17 (7) The rudiments of documenting and reporting crimes,
18 including, by way of example, not disturbing a crime scene.

19 (c) The hospital shall have sufficient personnel to provide
20 security pursuant to the security plan developed pursuant to
21 subdivision (a). Persons regularly assigned to provide security in
22 a hospital setting shall be trained regarding the role of security in
23 hospital operations, including the identification of aggressive and
24 violent predicting factors; and management of violent disturbances.

25 (d) Any act of assault, as defined in Section 240 of the Penal
26 Code, or battery, as defined in Section 242 of the Penal Code, that
27 results in injury or involves the use of a firearm or other dangerous
28 weapon, against any on-duty hospital personnel shall be reported
29 to the local law enforcement agency within 72 hours of the incident.
30 Any other act of assault, as defined in Section 240 of the Penal
31 Code, or battery as defined in Section 242 of the Penal Code,
32 against any on-duty hospital personnel may be reported to the local
33 law enforcement agency within 72 hours of the incident. No health
34 facility or employee of a health facility who reports a known or
35 suspected instance of assault or battery pursuant to this section
36 shall be civilly or criminally liable for any report required by this
37 section. No health facility or employee of a health facility who
38 reports a known or suspected instance of assault or battery that is
39 authorized, but not required, by this section, shall be civilly or
40 criminally liable for the report authorized by this section unless it

1 can be proven that a false report was made and the health facility
2 or its employee knew that the report was false or was made with
3 reckless disregard of the truth or falsity of the report, and any
4 health facility or employee of a health facility who makes a report
5 known to be false or with reckless disregard of the truth or falsity
6 of the report shall be liable for any damages caused. Any individual
7 knowingly interfering with or obstructing the lawful reporting
8 process shall be guilty of a misdemeanor. “Dangerous weapon,”
9 as used in this section, means any weapon the possession or
10 concealed carrying of which is prohibited by Section 12020 of the
11 Penal Code.

12 SEC. 2. No reimbursement is required by this act pursuant to
13 Section 6 of Article XIII B of the California Constitution because
14 the only costs that may be incurred by a local agency or school
15 district will be incurred because this act creates a new crime or
16 infraction, eliminates a crime or infraction, or changes the penalty
17 for a crime or infraction, within the meaning of Section 17556 of
18 the Government Code, or changes the definition of a crime within
19 the meaning of Section 6 of Article XIII B of the California
20 Constitution.