

AMENDED IN ASSEMBLY MARCH 29, 2012

CALIFORNIA LEGISLATURE—2011–12 REGULAR SESSION

**ASSEMBLY BILL**

**No. 1867**

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**Introduced by Assembly Member Pan**  
*(Coauthors: Assembly Members Garrick and Logue)*

February 22, 2012

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An act to amend Section 1279.7 of the Health and Safety Code, relating to health facilities.

LEGISLATIVE COUNSEL'S DIGEST

AB 1867, as amended, Pan. Health facilities. equipment standards.

Existing law, to become operative 36 months after specified prescribed standards are ~~developed~~ *published*, or January 1, 2014, whichever occurs first, prohibits certain health facilities from using an epidural connection that would fit into a connection port other than the type for which it was intended, unless an emergency or urgent situation exists and the prohibition impairs the ability to provide health care. Existing law, to become operative 24 months after specified prescribed standards are ~~developed~~ *published*, or January 1, 2013, whichever occurs first, prohibits these health facilities from using an intravenous or enteral connection that would fit into a connection port other than the type for which it was intended, unless an emergency or urgent situation exists and the prohibition impairs the ability to provide health care. Existing law requires the Advanced Medical Technology Association to report annually to the Legislature on the progress of the development of those standards. *Violation of these provisions is a misdemeanor.*

This bill would revise the ~~prohibition~~ *prohibitions* to instead *become operative on January 1, 2016, and to refer to epidural, intravenous, and enteral connectors.*

Vote: majority. Appropriation: no. Fiscal committee: ~~no~~ yes.  
State-mandated local program: no.

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

1 SECTION 1. Section 1279.7 of the Health and Safety Code is  
2 amended to read:  
3 1279.7. (a) A health facility, as defined in subdivision (a), (b),  
4 (c), or (f) of Section 1250, shall implement a facility-wide hand  
5 hygiene program.  
6 (b) Commencing ~~36 months after the publication of a new design~~  
7 ~~standard for connectors for epidural applications by the~~  
8 ~~International Organization for Standardization, or January 1, 2014,~~  
9 ~~whichever occurs first~~ *January 1, 2016*, a health facility, as defined  
10 in subdivision (a), (b), (c), or (f) of Section 1250, is prohibited  
11 from using an epidural connector that would fit into a connector  
12 other than the type it was intended for, unless an emergency or  
13 urgent situation exists and the prohibition would impair the ability  
14 to provide health care.  
15 (c) Commencing ~~24 months after the publication of a new design~~  
16 ~~standard for connectors for intravenous or enteral applications by~~  
17 ~~the International Organization for Standardization, or January 1,~~  
18 ~~2013, whichever occurs first~~ *January 1, 2016*, a health facility, as  
19 defined in subdivision (a), (b), (c), or (f) of Section 1250, is  
20 prohibited from using an intravenous connector or an enteral  
21 feeding connector that would fit into a connector other than the  
22 type it was intended for, unless an emergency or urgent situation  
23 exists and the prohibition would impair the ability to provide health  
24 care.  
25 (d) The Advanced Medical Technology Association shall, on  
26 January 1 of each year until the standards are developed, provide  
27 the Legislature with a report on the progress of the International  
28 Organization for Standardization in developing new design  
29 standards for connectors for intravenous, epidural, or enteral  
30 applications.  
31 (e) A health facility that is required to develop a patient safety  
32 plan pursuant to Section 1279.6 shall include in the patient safety  
33 plan measures to prevent adverse events associated with  
34 misconnecting intravenous, enteral feeding, and epidural lines.  
35 This subdivision shall become inoperative as to epidural connectors

- 1 upon the operative date of subdivision (b) and as to intravenous
- 2 and enteral connectors upon the operative date of subdivision (c).

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