

AMENDED IN ASSEMBLY SEPTEMBER 2, 2011

AMENDED IN SENATE MAY 10, 2011

**SENATE BILL**

**No. 276**

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**Introduced by Senator ~~Wright~~ Corbett**  
(Principal coauthor: Assembly Member Wieckowski)

February 14, 2011

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~~An act to amend Section 4108 of the Food and Agricultural Code, relating to expositions and fairs. An act to amend Section 1255 of, and to add Section 100923 to, the Health and Safety Code, relating to health facilities, and declaring the urgency thereof, to take effect immediately.~~

LEGISLATIVE COUNSEL'S DIGEST

SB 276, as amended, ~~Wright Corbett. Expositions and fairs: California Science Center: police and security services. General acute care hospitals: special services.~~

*Existing law provides for the licensure and regulation of health facilities, including general acute care hospitals, administered by the State Department of Public Health. A violation of these provisions is a crime.*

*Existing law authorizes the department to approve, as prescribed, a general acute care hospital to offer specified special services, including, but not limited to, cardiac catheterization laboratory services, in addition to the basic services offered under the facility's license.*

*This bill would require the department to adopt specified regulations regarding cardiac catheterization laboratory services. This bill would permit, until regulations are adopted, a general acute care hospital that maintains a cardiac surgery service to provide specified services in its cardiac catheterization laboratory. This bill would require a general acute care hospital that is approved to provide cardiac*

*catheterization laboratory service to develop, maintain, and implement certain policies and procedures.*

*The bill would also require the department to conduct a 16-month pilot program to allow any freestanding cardiac catheterization laboratory to perform both diagnostic and therapeutic procedures, as specified.*

*Because this bill would expand 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.*

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

~~Existing law provides for the Sixth District Agricultural Association, which is known as the California Science Center, and requires the California Science Center to establish the position of Exposition Park Manager to be filled by a person appointed by the Governor for the purpose of managing, scheduling, and administering all park-related events, including oversight for the police and security services of the park. The Exposition Park Manager is authorized to appoint specified security and safety personnel.~~

~~This bill would authorize the Executive Director of the California Science Center to appoint specified security and safety personnel if there is no Exposition Park Manager.~~

Vote: ~~majority~~<sup>2/3</sup>. Appropriation: no. Fiscal committee: ~~no~~<sup>yes</sup>. State-mandated local program: ~~no~~<sup>yes</sup>.

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

1 *SECTION 1. Section 1255 of the Health and Safety Code is*  
2 *amended to read:*

3 1255. (a) In addition to the basic services offered under the  
4 license, a general acute care hospital may be approved in  
5 accordance with subdivision (c) of Section 1277 to offer special  
6 services, including, but not limited to, the following:

7 (a)

8 (1) Radiation therapy department.

- 1 ~~(b)~~
- 2 (2) Burn center.
- 3 ~~(c)~~
- 4 (3) Emergency center.
- 5 ~~(d)~~
- 6 (4) Hemodialysis center (or unit).
- 7 ~~(e)~~
- 8 (5) Psychiatric.
- 9 ~~(f)~~
- 10 (6) Intensive care newborn nursery.
- 11 ~~(g)~~
- 12 (7) Cardiac surgery.
- 13 ~~(h)~~
- 14 (8) Cardiac catheterization laboratory.
- 15 ~~(i)~~
- 16 (9) Renal transplant.
- 17 ~~(j)~~
- 18 (10) Other special services as the department may prescribe by
- 19 regulation.

20 ~~A~~

21 (b) A general acute care hospital that exclusively provides acute

22 medical rehabilitation center services may be approved in

23 accordance with subdivision (b) of Section 1277 to offer special

24 services not requiring surgical facilities.

25 ~~The state~~

26 (c) *The* department shall adopt standards for special services

27 and other regulations as may be necessary to implement this

28 section. ~~For~~

29 (1) *For* cardiac catheterization laboratory service, the ~~state~~

30 department shall, at a minimum, adopt standards and regulations

31 that specify that only diagnostic services, and what diagnostic

32 services, may be offered by ~~an~~ a general acute care hospital or a

33 multispecialty clinic as defined in subdivision (l) of Section 1206

34 that is approved to provide cardiac catheterization laboratory

35 service but is not also approved to provide cardiac surgery service,

36 together with the conditions under which the cardiac catheterization

37 laboratory service may be offered.

38 (2) *The department shall adopt regulations regarding the types*

39 *of diagnostic and therapeutic procedures that can be conducted*

40 *in the cardiac catheterization laboratory of a general acute care*

1 hospital that maintains a cardiac surgery service. Until the  
2 regulations are adopted, a general acute care hospital that  
3 maintains a cardiac surgery service may provide diagnostic and  
4 therapeutic services in its cardiac catheterization laboratory within  
5 the following categories:

6 (A) Percutaneous coronary and electrophysiological  
7 interventions, including, but not limited to, emergency and elective  
8 coronary stent insertions.

9 (B) Peripheral angiography, interventional radiology  
10 procedures, neuroangiography, and neurointerventional  
11 procedures.

12 (C) Surgical interventions, including, but not limited to, insertion  
13 of permanent pacemakers provided the cardiac catheterization  
14 laboratory meets, at a minimum, the standards contained in the  
15 1995 California Building Code, or subsequent edition, for surgery  
16 applicable to a cardiac catheterization laboratory in a general  
17 acute care hospital that maintains a cardiac surgery service, and  
18 a safe operating environment consistent with standards of the  
19 Association of periOperative Registered Nurses, Perioperative  
20 Standards and Recommended Practices in effect as of September  
21 1, 2011.

22 (D) Noncardiac interventions, including, but not limited to,  
23 orthopedic procedures, gastroenterology endoscopy, drainage  
24 procedures, thoracentesis, paracentesis, lumbar punctures,  
25 myelograms, and pain management procedures provided the  
26 general acute care hospital develops, maintains, and implements  
27 policies and procedures for terminal cleaning and other infection  
28 control measures to be used in the laboratory following, during,  
29 and after these interventions.

30 (E) Other diagnostic and therapeutic procedures that can be  
31 safely conducted in a cardiac catheterization laboratory in a  
32 general acute care hospital that maintains a cardiac surgery  
33 service, provided the general acute care hospital first obtains  
34 program flexibility in accordance with the procedures provided  
35 in Section 70129 of Title 22 of the California Code of Regulations.

36 (F) A general acute care hospital that is approved to provide  
37 cardiac catheterization laboratory service shall develop, maintain,  
38 and implement policies and procedures governing the following:

39 (i) Use of the cardiac catheterization laboratory under this  
40 section.

1 (ii) *Measures to ensure patient safety.*

2 (iii) *Availability for routine and emergent cardiac situations.*

3 **A**

4 (d) A cardiac catheterization laboratory service shall be located  
5 in a general acute care hospital that is either licensed to perform  
6 cardiovascular procedures requiring extracorporeal coronary artery  
7 bypass that meets all of the applicable licensing requirements  
8 relating to staff, equipment, and space for service, or shall, at a  
9 minimum, have a licensed intensive care service and coronary care  
10 service and maintain a written agreement for the transfer of patients  
11 to a general acute care hospital that is licensed for cardiac surgery  
12 or shall be located in a multispecialty clinic as defined in  
13 subdivision (l) of Section 1206. The transfer agreement shall  
14 include protocols that will minimize the need for duplicative  
15 cardiac catheterizations at the hospital in which the cardiac surgery  
16 is to be performed.

17 **For**

18 (e) *For* purposes of this section, “multispecialty clinic,” as  
19 defined in subdivision (l) of Section 1206, includes an entity in  
20 which the multispecialty clinic holds at least a 50-percent general  
21 partner interest and maintains responsibility for the management  
22 of the service, if all of the following requirements are met:

23 (1) The multispecialty clinic existed as of March 1, 1983.

24 (2) Prior to March 1, 1985, the multispecialty clinic did not  
25 offer cardiac catheterization services, dynamic multiplane imaging,  
26 or other types of coronary or similar angiography.

27 (3) The multispecialty clinic creates only one entity that operates  
28 its service at one site.

29 (4) These entities shall have the equipment and procedures  
30 necessary for the stabilization of patients in emergency situations  
31 prior to transfer and patient transfer arrangements in emergency  
32 situations that shall be in accordance with the standards established  
33 by the Emergency Medical Services Authority, including the  
34 availability of comprehensive care and the qualifications of any  
35 general acute care hospital expected to provide emergency  
36 treatment.

37 **Except**

38 (f) *Except* as provided in ~~Sections 128525 and 128530~~ *Article*  
39 *4 (commencing with Section 100921) of Chapter 4 of Part 1 of*  
40 *Division 101*, under no circumstances shall cardiac catheterizations

1 be performed outside of a general acute care hospital or a  
2 multispecialty clinic, as defined in subdivision (l) of Section 1206,  
3 that qualifies for this definition as of March 1, 1983.

4 *SEC. 2. Section 100923 is added to the Health and Safety Code,*  
5 *to read:*

6 *100923. (a) Notwithstanding subdivision (d) of Section 100922,*  
7 *the department shall conduct a 16-month pilot program to allow*  
8 *any freestanding cardiac catheterization laboratory licensed*  
9 *pursuant to Section 100922, to perform both diagnostic and*  
10 *therapeutic procedures in addition to those authorized in*  
11 *subdivision (d) of that section.*

12 *(b) The department shall consult with the existing freestanding*  
13 *cardiac catheterization laboratories to determine which procedures*  
14 *to authorize under the pilot program with the primary goal being*  
15 *patient safety. The department may monitor these laboratories*  
16 *during the pilot program. The laboratories shall provide a list of*  
17 *procedures to the department for approval prior to conducting*  
18 *any additional procedures, or adding any additional procedures*  
19 *to the list.*

20 *(c) The laboratories participating in the pilot program shall*  
21 *report at a minimum to the department after nine months of*  
22 *participation in the pilot program the number of procedures*  
23 *performed by type of procedure, the outcome of those procedures,*  
24 *any unusual occurrences at the laboratory, any adverse events,*  
25 *as defined by the department, and any other information needed*  
26 *to evaluate the safety of the pilot program. The laboratory shall*  
27 *report to the department any event or occurrence that affects the*  
28 *health or safety of the patients, staff, or visitors within 72 hours*  
29 *of the occurrence. The department shall use this information to*  
30 *develop any proposed legislative changes to the licensing*  
31 *requirements of existing freestanding cardiac catheterization*  
32 *laboratories.*

33 *(d) As a pilot program of limited scope and duration, the*  
34 *department may set additional standards to ensure patient safety*  
35 *and to gather necessary information on the pilot program.*  
36 *Accordingly, any freestanding cardiac catheterization laboratory*  
37 *participating in the pilot program shall comply with any additional*  
38 *standards required by the department to ensure patient safety and*  
39 *shall provide any additional information requested by the*  
40 *department related to this pilot program.*

1     *SEC. 3. No reimbursement is required by this act pursuant to*  
2 *Section 6 of Article XIII B of the California Constitution because*  
3 *the only costs that may be incurred by a local agency or school*  
4 *district will be incurred because this act creates a new crime or*  
5 *infraction, eliminates a crime or infraction, or changes the penalty*  
6 *for a crime or infraction, within the meaning of Section 17556 of*  
7 *the Government Code, or changes the definition of a crime within*  
8 *the meaning of Section 6 of Article XIII B of the California*  
9 *Constitution.*

10    *SEC. 4. This act is an urgency statute necessary for the*  
11 *immediate preservation of the public peace, health, or safety within*  
12 *the meaning of Article IV of the Constitution and shall go into*  
13 *immediate effect. The facts constituting the necessity are:*

14    *California hospitals with cardiac catheterization laboratories*  
15 *that deliver care in accordance with current standards of practice*  
16 *for cardiac catheterization laboratories face immediate restriction*  
17 *in the care that may be rendered in their facilities, due to*  
18 *ambiguities in California laws and regulations and the*  
19 *interpretation thereof. As a result, access to critical cardiovascular*  
20 *and other such services may be unavailable or delayed,*  
21 *jeopardizing patient health and safety in hospitals throughout*  
22 *California. Enactment of this measure on an emergency basis will*  
23 *help maintain continuity of, and access to, state-of-the-art cardiac*  
24 *and vascular catheterization services.*

25    ~~SECTION 1. Section 4108 of the Food and Agricultural Code~~  
26 ~~is amended to read:~~

27    ~~4108. The California Science Center shall establish the position~~  
28 ~~of Exposition Park Manager to be filled by a person appointed by~~  
29 ~~the Governor for the purpose of managing, scheduling, and~~  
30 ~~administering all park-related events, including oversight for the~~  
31 ~~police and security services of the park.~~

32    ~~(a) The Exposition Park Manager may appoint the following~~  
33 ~~persons:~~

34    ~~(1) The chief and assistant chief of museum security and safety~~  
35 ~~who shall have the powers of peace officers as specified in Section~~  
36 ~~830.3 of the Penal Code.~~

37    ~~(2) Other safety officers who shall have the powers of arrest as~~  
38 ~~specified in Section 830.7 of the Penal Code.~~

39    ~~(b) The officers appointed pursuant to subdivision (a) shall~~  
40 ~~provide police and security services to keep order and to preserve~~

- 1 ~~the peace and safety of persons and property at the California~~
- 2 ~~Science Center and at Exposition Park on a year-round basis.~~
- 3 ~~(e) The Executive Director of the California Science Center~~
- 4 ~~may make the appointments listed in subdivision (a) if there is no~~
- 5 ~~Exposition Park Manager.~~

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