

AMENDED IN SENATE JUNE 19, 2015

AMENDED IN SENATE MAY 28, 2015

AMENDED IN ASSEMBLY APRIL 23, 2015

CALIFORNIA LEGISLATURE—2015–16 REGULAR SESSION

ASSEMBLY BILL

No. 1147

**Introduced by Assembly Member Maienschein
(Coauthor: Assembly Member Kim)**

February 27, 2015

An act to amend Sections 1760.2 and 1760.4 of, and to add Sections 1760.7, 1760.9, 1761.85, 1762, 1762.2, 1762.4, 1762.6, 1762.8, 1763, 1763.2, and 1763.4 to, the Health and Safety Code, relating to health facilities, and declaring the urgency thereof, to take effect immediately.

LEGISLATIVE COUNSEL'S DIGEST

AB 1147, as amended, Maienschein. Health facilities: pediatric day health and respite care facilities.

Under existing law, the State Department of Public Health licenses and regulates health facilities, including, among others, pediatric day health and respite care facilities. Existing law defines “pediatric day health and respite care facility” as a facility that provides an organized program of therapeutic social and day health activities and services and limited 24-hour inpatient respite care to medically fragile children 21 years of age or younger, including terminally ill and technology dependent children.

This bill would authorize an individual who is 22 years of age or older to continue to receive care in a pediatric day health and respite care facility, if the facility receives approval from the State Department of Public Health for a Transitional Health Care Needs Optional Service

Unit. The bill would also authorize a patient who previously received services from a pediatric day health and respite care facility and who is 22 years of age or older to receive care in an optional service unit, as provided. The bill would establish a licensing process for a pediatric day health and respite care facility to operate an optional service unit, and would impose certain requirements on those optional service units, including, among others, that the optional service unit provide care for patients who are 22 years of age or older in a distinct part of the pediatric day health and respite care facility or optional service unit, separate from the area where care is provided to younger patients, except under specified circumstances.

This bill would authorize a pediatric day health and respite care facility to implement policies and procedures that prohibit smoking by patients, parents, staff, visitors, or consultants within the facility or on the premises, if the prohibition is clearly stated in the admission agreement and notices are posted at the facility.

This bill would establish procedures for the issuance of a provisional license to a pediatric day health and respite care facility. The bill would specify additional procedures relating to the licensure of a pediatric day health and respite care facility and renewals of those licenses, including, among others, requiring the department to initiate an initial licensing inspection of an optional service unit within 60 days of receipt of a pediatric day health and respite care facility's completed application and requiring periodic inspections by a duly authorized representative of the department and specified reports related to those inspections. The bill would authorize the department to make reasonable accommodation for exceptions to the licensing standards if the health, safety, and quality of patient care is not compromised. The bill would also specify the grounds upon which those licenses may be revoked, including, among others, willful omission or falsification of a material fact in the application for a license. The bill would require proceedings for the denial, suspension, or revocation of licenses, or denial or withdrawal of approval, to be conducted in accordance with specified provisions of law.

Existing law requires facilities serving persons who are terminally ill, catastrophically and severely disabled, mentally alert but physically disabled, or any combination of these persons, to comply with specified provisions of the California Code of Regulations, and exempts those facilities from certain requirements of that code relating to required services for skilled nursing facilities.

This bill would provide additional exemptions from that code for a pediatric day health and respite care facility.

Existing law specifies the services that a pediatric day health and respite care facility is required to provide, including, among others, pharmacy services.

This bill would require that pharmacy services by a pediatric day health and respite care facility satisfy certain requirements, including, among others, that medications be administered only upon written and signed orders of the patient's attending physician.

This bill would require a pediatric day health and respite care facility to have a patient care committee to address quality of care provided in the facility, including, but not limited to, patient care policies, pharmacy services, and infection control. The bill would specify the composition of the committee, impose specified meeting requirements, and outline the committee's responsibilities.

Existing law requires pediatric day health and respite care facilities to meet the same fire safety standards adopted by the State Fire Marshal and the same seismic safety standards that apply to community care facilities. Existing law provides that a pediatric day health and respite care facility is not subject to architectural plan review or field inspection by the Office of Statewide Health Planning and Development, and requires, as part of the application for licensure, an applicant to submit evidence of compliance with local building code requirements and that the physical environment is adequate to provide the level of care and service required by the clients of the facility as determined by the department.

This bill would provide that those provisions do not prohibit the use of alternate space utilization, new concepts of design, treatment techniques, equipment and alternate finish materials, or other flexibility, if written approval is granted by the local building authority.

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

Vote: $\frac{2}{3}$. Appropriation: no. Fiscal committee: yes.
State-mandated local program: no.

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

1 SECTION 1. Section 1760.2 of the Health and Safety Code is
2 amended to read:

1 1760.2. As used in this chapter, the following definitions shall
2 apply:

3 (a) (1) “Pediatric day health and respite care facility” means
4 a facility that provides an organized program of therapeutic social
5 and day health activities and services and limited 24-hour inpatient
6 respite care to medically fragile children 21 years of age or
7 younger, including terminally ill and technology-dependent
8 patients, except as provided in paragraph (2) and Section 1763.4.

9 (2) An individual who is 22 years of age or older may continue
10 to receive care in a pediatric day health and respite care facility if
11 the facility receives approval from the state department for a
12 Transitional Health Care Needs Optional Service Unit pursuant to
13 Section 1763.4. A patient who previously received services from
14 a pediatric day health and respite care facility, who is 22 years of
15 age or ~~older~~ *older*, and who satisfies the requirements of Section
16 1763.4, may also receive services in an optional service unit.

17 (b) “Medically fragile” means having an acute or chronic health
18 problem that requires therapeutic intervention and skilled nursing
19 care during all or part of the day. Medically fragile problems
20 include, but are not limited to, HIV disease, severe lung disease
21 requiring oxygen, severe lung disease requiring ventilator or
22 tracheostomy care, complicated spina bifida, heart disease,
23 malignancy, asthmatic exacerbations, cystic fibrosis exacerbations,
24 neuromuscular disease, encephalopathies, and seizure disorders.

25 (c) “Technology-dependent patient” means a person who, from
26 birth, has a chronic disability, requires the routine use of a specific
27 medical device to compensate for the loss of use of a life sustaining
28 body function, and requires daily, ongoing care or monitoring by
29 trained personnel.

30 (d) “Respite care” means day and 24-hour relief for the parent
31 or guardian and care for the patient. 24-hour inpatient respite care
32 includes, but is not limited to, 24-hour nursing care, meals,
33 socialization, and developmentally appropriate activities. As used
34 in this chapter, “24-hour inpatient respite care” is limited to no
35 more than 30 intermittent or continuous whole calendar days per
36 patient per calendar year.

37 (e) “Comprehensive case management” means locating,
38 coordinating, and monitoring services for the eligible patient
39 population and includes all of the following:

1 (1) Screening of patient referrals to identify those persons who
2 can benefit from the available services.

3 (2) Comprehensive patient assessment to determine the services
4 needed.

5 (3) Coordinating the development of an interdisciplinary
6 comprehensive care plan.

7 (4) Determining individual case cost effectiveness and available
8 sources of funding.

9 (5) Identifying and maximizing informal sources of care.

10 (6) Ongoing monitoring of service delivery to determine the
11 optimum type, amount, and duration of services provided.

12 (f) "License" means a basic permit to operate a pediatric day
13 health and respite care facility. With respect to a health facility
14 licensed pursuant to Chapter 2 (commencing with Section 1250),
15 "license" means a special permit authorizing the health facility to
16 provide pediatric day health and respite care services as a separate
17 program in a distinct part of the facility.

18 (g) "State department" means the State Department of Public
19 Health.

20 SEC. 2. Section 1760.4 of the Health and Safety Code is
21 amended to read:

22 1760.4. (a) The state department shall develop and adopt
23 regulations for the licensure of, and shall license, pediatric day
24 health and respite care facilities. The regulations shall include
25 minimum standards for the following:

26 (1) Adequacy, safety, and sanitation of the physical plant and
27 equipment.

28 (2) Staffing with duly qualified personnel.

29 (3) Training of the staff.

30 (4) Providing the services offered.

31 These regulations shall be filed with the Secretary of State no
32 later than July 1, 1993.

33 (b) The state department shall establish within the state
34 department an advisory committee of experts to assist in the
35 development of the regulations required pursuant to this section.
36 A representative of the state department shall act as chairperson
37 of the committee. The members of the committee shall serve
38 without compensation, but shall be reimbursed by the state
39 department for all necessary expenses incurred in the actual
40 performance of their duties. To the extent sufficient funds have

1 been appropriated in the Budget Act, the state department may
2 provide staff support to the committee as the state department
3 deems is necessary for the conduct of the committee's business.
4 The committee shall meet at the state director's pleasure until the
5 time that the proposed regulations are presented for adoption at
6 the public hearing.

7 (c) Pending adoption of the regulations pursuant to subdivision
8 (b), an entity may be licensed as a pediatric day health and respite
9 care facility if it meets interim regulations administered by the
10 state department for congregate living health facilities pursuant to
11 Section 1267.13.

12 (d) (1) In addition to the exceptions from regulations described
13 in subdivision (n) of Section 1267.13, a pediatric day health and
14 respite care facility shall not be required to conform to the
15 following regulations contained in Chapter 3 of Division 5 of Title
16 22 of the California Code of Regulations: 72329.1, 72353, 72359,
17 72363, 72365, 72371, subdivisions (b) and (c) of Section 72375,
18 subdivision (b) of Section 72377, 72516, 72525, and 72531.

19 (2) A pediatric day health and respite care facility shall not be
20 required to meet the requirements of Section 72367 of Article 3
21 of Chapter 3 of Division 5 of Title 22 of the California Code of
22 Regulations, except that medications brought by or with the patient
23 on admission to the facility shall not be used unless, after admission
24 by the facility, the contents of the containers have been examined
25 and positively identified by a licensed nurse, in accordance with
26 his or her scope of practice.

27 (e) A pediatric day health and respite care facility shall have a
28 patient care committee to address quality of care provided in the
29 facility, including, but not limited to, patient care policies,
30 pharmacy services, and infection control.

31 (1) The pediatric day health and respite care facility shall
32 maintain minutes of every committee meeting and indicate the
33 names of members present, the date, the length of the meeting, the
34 subject matter discussed, and any action taken.

35 (2) The patient care committee shall include the medical director,
36 dietician, pharmacist, nursing staff, nurse supervisor, center
37 administrator or director, and other staff as may be required by
38 facility policies and procedures.

39 (3) The patient care committee shall meet at least twice per year
40 or more often if a need or problem is identified by the committee.

1 (4) The patient care committee shall be responsible for all of
2 the following:

3 (A) Reviewing and approving all policies relating to patient
4 care. Based on reports received from the pediatric day health and
5 respite care facility's administrator, the committee shall review
6 the effectiveness of policy implementation and shall make
7 recommendations to the administrator of the facility for the
8 improvement of patient care. The committee shall review patient
9 care policies annually and revise the policies as necessary. The
10 committee's minutes shall list the policies the committee reviewed.

11 (B) Infection control in the facility, which shall include, but not
12 be limited to, establishing, reviewing, monitoring, and approving
13 policies and procedures for investigating, controlling, and
14 preventing infections in the facility, and maintaining, reviewing,
15 and reporting statistics of the number, types, sources, and locations
16 of infections within the pediatric day health and respite care
17 facility.

18 (C) Establishing, reviewing, and monitoring the storage and
19 administration of drugs and biologicals, reviewing and taking
20 appropriate action based on any findings from a pharmacist hired
21 to consult with the committee and internal quality assurance
22 reviews, and recommending improvements of services to the
23 administrator of the facility.

24 (f) (1) A pediatric day health and respite care facility shall
25 comply with licensing requirements. The state department may,
26 upon written request of an applicant or licensee, approve the use
27 of alternate concepts, methods, procedures, techniques, equipment,
28 personnel qualifications, or conducting pilot projects, provided
29 those alternatives are carried out with safe and adequate care for
30 the patients and with the prior written approval of the state
31 department. The state department's approval shall provide for the
32 terms and conditions under which the alternatives are granted. An
33 applicant's or licensee's written request shall be accompanied by
34 substantiating evidence supporting the request pursuant to this
35 paragraph.

36 (2) The state department's review of written requests submitted
37 under this subdivision shall consider the unique nature of services
38 provided to individuals served by the pediatric day health and
39 respite care facility when compared to the requirements for

1 congregate living health facilities for individuals requiring inpatient
2 care.

3 (3) If the state department grants an approval under this
4 subdivision, a pediatric day health and respite care facility shall
5 immediately post that approval, or a true copy of that approval,
6 adjacent to the facility's license.

7 SEC. 3. Section 1760.7 is added to the Health and Safety Code,
8 to read:

9 1760.7. A pediatric day health and respite care facility shall
10 provide pharmacy services that satisfy all of the following:

11 (a) (1) Medications shall be supplied to the licensed nursing
12 personnel of the pediatric day health and respite care facility by
13 the patient's parent, foster parent, or legal guardian in the original
14 dispensing container that specifies administration instructions.

15 (2) Medications shall be administered only upon written and
16 signed orders of the patient's attending physician.

17 (3) The pediatric day health and respite care facility shall not
18 order medications from a pharmacy or take delivery of medications
19 from a pharmacy.

20 (4) The pediatric day health and respite care facility shall not
21 accept a patient into the facility if the patient's medications have
22 expired or are scheduled to expire during the patient's stay at the
23 facility.

24 (b) (1) Physician orders shall be current and maintained in the
25 patient's medical record at the pediatric day health and respite care
26 facility. Verbal orders from the attending physician for services
27 to be rendered at the facility may be received and recorded by
28 licensed nursing personnel in the patient's medical record at the
29 facility and shall be signed by the attending physician within 30
30 working days.

31 (2) Medications shall not be administered to a patient unless
32 the facility first verifies that the medication was ordered by a
33 physician. Verification may be obtained by contacting the
34 physician's office or by being provided with a copy of the
35 physician's order for the medication.

36 (c) The pediatric day health and respite care facility shall
37 maintain records of medication administered for at least one year,
38 unless a longer period is required by state or federal law. The
39 records of medication administered shall be a part of the patient's
40 plan of care.

1 (d) The pediatric day health and respite care facility may treat
2 changes in the patient’s condition, such as new onset pain, nausea,
3 diarrhea, infections, or other similar changes, in accordance with
4 the patient’s plan of care if the patient has been prescribed
5 medications to treat these anticipated symptoms, and the treatment
6 does not present a risk to the health and safety of themselves, other
7 patients, staff, or other individuals with whom the patient may
8 come into contact. A patient who presents with symptoms that are
9 not anticipated or planned for in the plan of care shall not remain
10 in the facility.

11 (e) Other requirements as specified in subdivision (a) of Section
12 72375, and subdivision (a) of Section 72377, of Article 3 of
13 Chapter 3 of Division 5 of Title 22 of the California Code of
14 Regulations.

15 (f) Only licensed nursing personnel, acting in accordance with
16 their scope of practice, may accept, inspect the condition of medical
17 containers, and record the receipt and the return of all medications
18 in a pediatric day health and respite care facility. The facility shall
19 comply with Section 72313 of Title 22 of the California Code of
20 Regulations with regard to the administration of medication.

21 (g) A pediatric day health and respite care facility shall comply
22 with all applicable state and federal laws regarding the labeling
23 condition of medication containers.

24 SEC. 4. Section 1760.9 is added to the Health and Safety Code,
25 to read:

26 1760.9. A pediatric day health and respite care facility may
27 implement policies and procedures that prohibit smoking by
28 patients, parents, staff, visitors, or consultants within the facility
29 or on the premises, if the prohibition is clearly stated in the
30 admission agreement, and notices are posted at the facility.

31 SEC. 5. Section 1761.85 is added to the Health and Safety
32 Code, to read:

33 1761.85. Sections 1761.2, 1761.4, and 1761.8 do not prohibit
34 the use of alternate space utilization, new concepts of design,
35 treatment techniques, equipment and alternate finish materials, or
36 other flexibility, if written approval is granted by the local building
37 authority.

38 SEC. 6. Section 1762 is added to the Health and Safety Code,
39 to read:

1 1762. (a) In order to obtain a license under the provisions of
2 this chapter to establish, conduct, or maintain a pediatric day health
3 and respite care facility, a person, entity, political subdivision of
4 the state, or governmental agency shall file with the state
5 department a verified application on a form prescribed, prepared,
6 and furnished by the state department, containing information as
7 may be required by the state department for the proper
8 administration and enforcement of this chapter.

9 (b) The state department shall initiate an initial licensing
10 inspection of a Transitional Health Care Needs Optional Service
11 Unit within 60 days of receipt of a completed application.

12 SEC. 7. Section 1762.2 is added to the Health and Safety Code,
13 to read:

14 1762.2. (a) If a pediatric day health and respite care facility
15 or an applicant for a license has not been previously licensed, the
16 state department shall issue a provisional license to the facility
17 only as provided in this section.

18 (b) A provisional license to operate a pediatric day health and
19 respite care facility shall terminate six months from the date of
20 issuance, or the date that the state department is able to conduct a
21 full and complete inspection, whichever is later.

22 (c) Within 30 days prior to the termination of a provisional
23 license, the state department shall give the facility a full and
24 complete inspection, and, if the facility meets all applicable
25 requirements for licensure, a regular license shall be issued. If the
26 facility does not meet the requirements for licensure but has made
27 substantial progress towards meeting the requirements, as
28 determined by the state department, the initial provisional license
29 shall be renewed for six months.

30 (d) If the state department determines that there has not been
31 substantial progress towards meeting licensure requirements at the
32 time of the first full inspection provided by this section, or, if the
33 state department determines upon its inspection made within 30
34 days of the termination of a renewed provisional license that there
35 is lack of full compliance with the requirements, the state
36 department shall not issue a further license.

37 (e) If an applicant for a provisional license to operate a pediatric
38 day health and respite care facility has been denied provisional
39 licensing by the state department, the applicant may contest the
40 denial by filing a request for a hearing pursuant to Section 131071.

1 (f) The state department shall not apply less stringent criteria
2 when granting a provisional license pursuant to this section than
3 it applies when granting a permanent license.

4 SEC. 8. Section 1762.4 is added to the Health and Safety Code,
5 to read:

6 1762.4. (a) A license issued under this chapter shall expire 12
7 months from the date of its issuance. The licensee shall pay a fee,
8 not to exceed the reasonable regulatory cost to the state department,
9 to the state department annually, not less than 30 days prior to
10 expiration date, subject to the state department mailing the notice
11 of renewal in accordance with subdivision (b).

12 (b) (1) At least 45 days prior to the expiration of a license issued
13 pursuant to this chapter, the state department shall mail a notice
14 for renewal to the licensee.

15 (2) A license renewal shall be submitted with the necessary fee
16 in accordance with subdivision (a). A license shall be deemed
17 renewed upon payment of the necessary fee, commencing from
18 the license's expiration date. If the requirements of this section
19 are satisfied, the state department shall issue a license to the facility
20 by the expiration date of the license to ensure the provider remains
21 in good standing. The facility's license shall be mailed within 15
22 calendar days after the date the state department receives the
23 renewal fee.

24 SEC. 9. Section 1762.6 is added to the Health and Safety Code,
25 to read:

26 1762.6. Every pediatric day health and respite care facility for
27 which a license has been issued shall be periodically inspected by
28 a duly authorized representative of the state department. Reports
29 of each inspection shall be prepared by the representative upon
30 forms prepared and furnished by the state department and filed
31 with the state department. The inspection shall be for the purpose
32 of ensuring that the pediatric day health and respite care facility
33 is complying with the provisions of this chapter and the rules and
34 regulations of the state department.

35 SEC. 10. Section 1762.8 is added to the Health and Safety
36 Code, to read:

37 1762.8. The state department may deny an application for, or
38 suspend or revoke a license issued under the provisions of this
39 chapter in the manner provided in Section 1763 upon, any of the
40 following grounds:

1 (a) A serious violation by the licensee of any of the provisions
2 of this chapter, of any other law, or of the rules and regulations
3 promulgated under this chapter that jeopardizes the health and
4 safety of patients.

5 (b) Aiding, abetting, or permitting the commission of any illegal
6 act.

7 (c) Willful omission or falsification of a material fact in the
8 application for a license.

9 SEC. 11. Section 1763 is added to the Health and Safety Code,
10 to read:

11 1763. Proceedings for the denial, suspension, or revocation of
12 licenses, or denial or withdrawal of approval under this chapter
13 shall be conducted in accordance with Section 131071. The
14 suspension, expiration, or forfeiture by operation of law of a license
15 issued by the state department, its suspension, forfeiture, or
16 cancellation by order of the state department or by order of a court,
17 or its surrender without the written consent of the state department,
18 shall not deprive the state department of its authority to institute
19 or continue a disciplinary proceeding against the licensee upon
20 any ground provided by law or to enter an order suspending or
21 revoking the license or otherwise taking disciplinary action against
22 the licensee on any of those grounds.

23 SEC. 12. Section 1763.2 is added to the Health and Safety
24 Code, to read:

25 1763.2. The state department has authority to make reasonable
26 accommodation for exceptions to the standards in this chapter if
27 the health, safety, and quality of patient care is not compromised.
28 Prior written approval communicating the terms and conditions
29 under which the exception is granted shall be required. An
30 applicant shall request an exception in writing accompanied by
31 detailed supporting documentation.

32 SEC. 13. Section 1763.4 is added to the Health and Safety
33 Code, to read:

34 1763.4. (a) For purposes of this chapter, the following
35 definitions shall apply:

36 (1) "Distinct part" means an identifiable unit accommodating
37 beds or patient space, including, but not limited to, contiguous
38 beds or patient space, a wing, floor, or building approved by the
39 state department for a specific purpose.

1 (2) “Older children” means patients who are ~~15~~ 18 to 21 years
2 of age, inclusive.

3 (3) “Transitional Health Care Needs Optional Service Unit” or
4 “optional service unit” means a functional unit of a pediatric day
5 health and respite care facility that is organized, staffed, and
6 equipped to provide care to individuals who are 22 years of age
7 or older.

8 (A) Patients receiving care in the optional service unit shall be
9 in age-appropriate groupings as provided for in the pediatric day
10 health and respite care facility’s policies and procedures. Older
11 children are not precluded from being cared for in the same optional
12 service unit as the patients who are 22 years of age or older. If a
13 pediatric day health and respite care facility proposes to provide
14 care to older children in the optional service unit, the facility shall
15 have policies, procedures, equipment, and supplies to meet the
16 needs of those patients. *Patients who are 15 to 17 years of age,*
17 *inclusive, may also be considered for care in the optional service*
18 *unit if the pediatric day health and respite care facility obtains an*
19 *individual age waiver from the regional center, with the*
20 *concurrence of the department. A pediatric day health and respite*
21 *care facility is not required to operate an optional service unit.*

22 (B) In order to continue receiving care in the pediatric day health
23 and respite care facility, patients who are 22 years of age or older
24 shall have a developmental age of 18 years of age or younger, as
25 evidenced by the patient’s Individual Education Plan (IEP),
26 Regional Center Assessment, physician’s assessment, or other
27 assessment using a standardized assessment tool that is nationally
28 recognized in the field. A patient who previously received services
29 from a pediatric day health and respite care facility, who is 22
30 years of age or older, and who satisfies the requirements of this
31 subparagraph may also receive services in an optional service unit.

32 (b) An optional service unit shall be approved by the state
33 department. A pediatric day health and respite care facility desiring
34 approval for an optional service unit shall file an application on
35 forms furnished by the state department. The state department shall
36 list on the facility license each optional service for which approval
37 is granted.

38 (c) Except as provided in subparagraph (A) of paragraph (3) of
39 subdivision (a), care for patients who are 22 years of age or older
40 shall be provided in a distinct part of the pediatric day health and

1 respite care facility or optional service unit, separate from the area
 2 where care is provided to patients who are 21 years of age or
 3 younger. The facility shall establish and implement policies and
 4 procedures for determining the age ranges of patients who are
 5 cared for in the optional service unit. These policies and procedures
 6 shall include, but not be limited to, consideration of the patient's
 7 chronological age, developmental age, and size, and shall reflect
 8 the needs of individual patients through a comprehensive
 9 assessment.

10 (d) The pediatric day health and respite care facility shall ensure
 11 that its staffing and equipment are sufficient to provide services
 12 to patients who are 22 years of age or older.

13 (e) A Transitional Health Care Needs Optional Service Unit
 14 shall have written policies and procedures for the management of
 15 the service. The policies and procedures shall be established and
 16 implemented by the patient care policy committee described in
 17 Section 1760.4

18 (f) (1) The state department may review and approve the
 19 policies and procedures for an optional service unit.

20 (2) The State Department of Developmental Services and the
 21 regional centers may review the policies and procedures for an
 22 optional service unit.

23 SEC. 14. This act is an urgency statute necessary for the
 24 immediate preservation of the public peace, health, or safety within
 25 the meaning of Article IV of the Constitution and shall go into
 26 immediate effect. The facts constituting the necessity are:

27 In order to protect, at the earliest possible time, the health and
 28 safety of medically fragile adults who are at imminent risk of aging
 29 out of pediatric day health and respite care facilities, it is necessary
 30 that this act take effect immediately.