

AMENDED IN SENATE FEBRUARY 25, 2008

SENATE BILL

No. 1058

Introduced by Senator Alquist

January 7, 2008

An act to add Sections 1255.8 and ~~1569.39~~ *120141* to the Health and Safety Code, relating to health.

LEGISLATIVE COUNSEL'S DIGEST

SB 1058, as amended, Alquist. Health ~~and care~~ facilities: bacterial infections.

Existing law provides for the licensure and regulation of health facilities by the State Department of Public Health ~~and of residential care facilities for the elderly by the State Department of Social Services~~. A violation of these provisions is a crime.

This bill would establish the Medical Facility Infection Control and Prevention Act, which would require each health facility ~~and residential care facility for the elderly~~ to implement certain procedures for the screening, prevention, and reporting of specified health facility ~~and residential care facility for the elderly~~ acquired infections. The bill would also require that each laboratory licensed by the state to perform specified microbiological testing relating to the identification of bacterial species and the antibiotic resistance patterns of those species to also report any information obtained by that laboratory on the incidence of any facility acquired infections within 5 working days after obtaining the information. This bill would require the ~~State Department of Health Care Services and the State Department of Social Services~~ *department* to carry out certain duties in order to implement the bill. Because a violation of the health facility ~~and residential care facility for the elderly~~

provisions ~~would be~~ is a crime, the bill would impose a state-mandated local program.

Existing law permits the State Department of Public Health to take various actions to prevent and control the spread of infectious diseases in this state.

This bill would require the department to take various measures to prevent, control, and monitor the spread of infectious diseases, including the sponsoring of local and regional training and the provision of assistance to local health departments, as prescribed.

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. The Legislature finds and declares all of the
2 following:

3 (a) (1) The protection of patients in California health facilities
4 is of paramount importance to the citizens of this state.

5 (2) During the past two decades health care facility associated
6 infections, especially those that are ~~acquired in health care settings~~
7 ~~and that are~~ resistant to commonly used antibiotics, have increased
8 dramatically.

9 (3) The State Department of Public Health ~~and the State~~
10 ~~Department of Social Services need~~ *needs* to develop a better,
11 more efficient system to monitor and report the incidence of
12 antibiotic-resistant *and other* infections that are acquired by patients
13 in health facilities ~~and residential care facilities for the elderly.~~

14 (4) ~~These departments need~~ *The department needs* to establish
15 and maintain a comprehensive inspection and reporting system
16 for health facilities ~~and residential care facilities for the elderly~~
17 that will ensure that those facilities comply with state laws and
18 regulations designed to reduce the incidence of facility associated
19 infections.

20 (b) It is, therefore, the intent of the Legislature to enact
21 legislation that will do all of the following:

1 (1) Ensure that California’s standards for protecting patients
2 from exposure to pathogens ~~associated with~~ *in* health facilities and
3 residential care facilities for the elderly, including
4 Methicillin-resistant Staphylococcus aureus (MRSA) are adequate
5 to reduce the incidence of antibiotic-resistant infection acquired
6 by patients in these facilities.

7 ~~(2) Require that licensed health facilities and residential care~~
8 ~~facilities for the elderly report specified health care associated~~
9 ~~pathogens to the State Department of Public Health and the State~~
10 ~~Department of Social Services, respectively.~~

11 ~~(3)~~
12 (2) Require these departments to develop and implement an
13 Internet-based public reporting system that provides updated
14 information regarding the incidence of infections ~~caused by health~~
15 ~~care, including~~ associated pathogens ~~found~~ *acquired* in health
16 facilities ~~and residential care facilities for the elderly.~~

17 ~~(4)~~
18 (3) Ensure that health facilities ~~and residential care facilities for~~
19 ~~the elderly~~ implement improved procedures intended to maintain
20 sanitary standards in these facilities, avoid transmission of ~~health~~
21 ~~care facility associated~~ pathogens *that cause infection*, and provide
22 adequate training to health care professionals regarding the
23 prevention and treatment of MRSA *and other* infections in these
24 facilities.

25 SEC. 2. This act shall be known, and may be cited as, the
26 Medical Facility Infection Control and Prevention Act.

27 SEC. 3. Section 1255.8 is added to the Health and Safety Code,
28 to read:

29 1255.8. (a) For purposes of this section, the following terms
30 have the following meanings:

31 (1) “Colonized” means that ~~the~~ *a* pathogen is present on the
32 patient’s body, but is not causing any signs or symptoms of an
33 infection.

34 (2) “Health facility acquired infection” means ~~any~~ *a* localized
35 or systemic condition resulting from an ~~exposure~~ *adverse reaction*
36 to the presence of an infectious agent ~~or toxin that occurs during~~
37 ~~the time a person is a patient of a~~ *not present or incubating at the*
38 *time of admission to the* health facility.

39 ~~(3) “Methicillin-resistant Staphylococcus aureus (MSRA)~~
40 ~~infection” means an infection caused by a strain of Staphylococcus~~

1 aureus bacteria that is resistant to those antibiotics known as
2 beta-lactams, including, but not limited to, methicillin, amoxicillin,
3 and penicillin.

4 (3) “MRSA” means *Methicillin-resistant Staphylococcus aureus*.

5 (b) (1) Each health facility shall develop, implement, and
6 periodically evaluate procedures for identifying patients who are
7 colonized by, or infected with, a health facility-acquired toxin or
8 pathogen: MRSA.

9 (2) Each health facility shall, in accordance with subdivision
10 (d), implement a procedure to test screen each patient who is
11 scheduled to undergo an inpatient orthopedic or cardiac or
12 outpatient surgery, or who is admitted to an intensive care unit,
13 burn unit, or other unit at high risk for the presence of the MRSA
14 bacterium: MRSA.

15 (c) Each patient who is admitted to a general acute care hospital
16 shall be tested screened for MRSA, in accordance with subdivision
17 (d), in the following cases:

18 (1) The patient presents with an open, nondraining wound,
19 cellulitis, dermatological lesions, or a pressure ulcer on the skin.

20 (2) The patient has been previously discharged from a general
21 acute care hospital within 30 days prior to the current hospital
22 admission.

23 (3) The patient will be admitted to an intensive care unit of the
24 hospital.

25 (4) The patient will receive receives inpatient or outpatient
26 dialysis treatment.

27 (5) The patient is being transferred from a rehabilitation or
28 skilled nursing facility or other acute care health facility, is
29 homeless, or is being admitted directly from a homeless shelter.

30 (6) The patient has recently received invasive treatment in an
31 oncology, hematology, transplant, or other specialty care unit of
32 a hospital within 30 days prior to admission to the hospital: skilled
33 nursing facility.

34 (6) The patient is homeless or is being admitted directly from
35 a homeless shelter.

36 (7) The patient is being admitted directly from prison.

37 (7)

38 (8) The patient is a hospital roommate of another patient who
39 has tested positive for MRSA.

- 1 ~~(8) The patient will be admitted to the hospital for a period of~~
2 ~~time that will exceed seven days.~~
- 3 (9) The patient has a prior history of MRSA infection.
- 4 (10) The patient is an intravenous drug user.
- 5 ~~(d) (1) A patient tested for MRSA pursuant to paragraph (2) of~~
6 ~~subdivision (b) or subdivision (c) may be tested during a period~~
7 ~~of up to two weeks prior to the patient's admission to the facility.~~
- 8 ~~(2) The patient tested, in accordance with paragraph (1) shall~~
9 ~~(d) A patient screened in accordance with subdivision (c) shall~~
10 again be tested for MRSA immediately prior to his or her discharge
11 from the facility. A patient who tests positive for ~~the MRSA~~
12 ~~bacterium~~ MRSA pursuant to this paragraph shall not be discharged
13 from the facility until an appropriately licensed medical
14 professional determines that the patient's infection can be
15 controlled and does not pose a threat to the health and safety of
16 others.
- 17 (e) Each health facility shall take all reasonable measures to
18 maintain a clean, sanitary, and pathogen-free environment, that,
19 at a minimum, shall include all of the following:
- 20 (1) Regular disinfection of all restrooms, countertops, furniture,
21 televisions, telephones, bedding, office equipment, and surfaces
22 in patient rooms, nursing stations, and storage units.
- 23 (2) Regular removal of accumulations of bodily fluids and
24 intravenous substances, and cleaning and disinfection of all
25 movable medical equipment, including point-of-care testing devices
26 such as glucometers, and transportable medical devices such as
27 cardiac monitors, gurneys, feeding pumps, storage containers, and
28 medication dispensing devices.
- 29 (3) Regular cleaning and disinfection of all surfaces in common
30 areas in the facility such as elevators, meeting rooms, and lounges.
- 31 (f) (1) Each health facility shall maintain an adequate number
32 of staff responsible for the implementation of infection control
33 programs, in accordance with the following requirements:
- 34 (A) One infection control staff person shall be employed by the
35 facility for every 100 occupied beds at the facility.
- 36 (B) One infection control staff person shall be employed by the
37 facility for every 200 outpatient visits per day at the facility.
- 38 (2) An infection control staff person required to be employed
39 by a health facility pursuant to subparagraph (A) shall be a properly

1 licensed registered nurse or other appropriately qualified and
2 licensed medical professional.

3 (g) Each health facility shall regularly report to the department
4 ~~on the number of all cases of a health facility acquired infection,~~
5 ~~including MRSA, that exceeds a baseline level of two or more~~
6 ~~cases at the facility in a seven-day period. The report shall be in~~
7 ~~both written and electronic form, and the identification of the~~
8 ~~pathogen causing each infection. The department shall make those~~
9 statistics pertaining to health facility acquired infection rates at
10 specified health facilities available on its Internet Web site. *This*
11 *information shall be public and shall include the rate of infections*
12 *caused by MRSA and other pathogens.*

13 (h) Each laboratory licensed by the state to perform
14 microbiological testing, including, but not limited to, routine
15 culture and antibiotic resistance testing, or biochemical, biological,
16 genetic or other assays to determine bacterial species identification
17 and the antibiotic resistance patterns of those species shall also
18 report any information obtained by that laboratory pertaining to
19 the discovery or the incidence of any health facility acquired
20 infections, including MRSA, within five working days after
21 obtaining the information.

22 ~~SEC. 4. Section 1569.39 is added to the Health and Safety~~
23 ~~Code, to read:~~

24 ~~1569.39.—(a) For purposes of this section, the following terms~~
25 ~~have the following meanings:~~

26 (1) ~~“Colonized,” means that the pathogen is present on the~~
27 ~~patient’s body, but is not causing any signs or symptoms of an~~
28 ~~infection.~~

29 (2) ~~“Residential care facility for the elderly acquired infection”~~
30 ~~means any localized or systemic condition resulting from an~~
31 ~~exposure to the presence of an infectious agent or toxin that occurs~~
32 ~~during the time a person is a resident of a residential care facility~~
33 ~~for the elderly.~~

34 (3) ~~“Methicillin-resistant Staphylococcus aureus (MSRA)~~
35 ~~infection” means an infection caused by a strain of Staphylococcus~~
36 ~~aureus bacteria that is resistant to those antibiotics known as~~
37 ~~beta-lactams, including, but not limited to, methicillin, amoxicillin,~~
38 ~~and penicillin.~~

39 (b) ~~Each residential care facility for the elderly shall develop,~~
40 ~~implement, and periodically evaluate procedures for identifying~~

1 patients who are colonized by, or infected with, a residential care
2 facility for the elderly acquired toxin or pathogen.

3 (e) (1) Each residential care facility for the elderly shall, in
4 accordance with paragraph (2), implement a procedure to test each
5 resident of the facility for MRSA prior to admission.

6 (2) A patient tested for MRSA pursuant to paragraph (1) may
7 be tested during a period of up to two weeks prior to the patient's
8 admission to the facility.

9 (d) Each residential care facility for the elderly shall take all
10 reasonable measures to maintain a clean, sanitary, and
11 pathogen-free environment, that, at a minimum, shall include all
12 of the following:

13 (1) Regular disinfection of all restrooms, countertops, furniture,
14 televisions, telephones, bedding, office equipment, and surfaces
15 in patient rooms, nursing stations, and storage units.

16 (2) Regular removal of accumulations of bodily fluids and
17 intravenous substances, and cleaning and disinfection of all
18 movable medical equipment, including point-of-care testing devices
19 such as glucometers, and transportable medical devices such as
20 cardiac monitors, gurneys, feeding pumps, storage containers, and
21 medication dispensing devices.

22 (3) Regular cleaning and disinfection of all surfaces in common
23 areas in the facility such as elevators, meeting rooms, and lounges.

24 (e) Each residential care facility for the elderly shall be required
25 to employ one infection control staff person for every 100 occupied
26 beds at the facility. The infection control staff person shall be a
27 properly licensed registered nurse or other appropriately qualified
28 and licensed medical professional.

29 (f) Each residential care facility for the elderly shall regularly
30 report to the department on the number of cases of a residential
31 care facility for the elderly acquired infection, including MRSA,
32 that exceeds a baseline level of two or more cases at the facility
33 in a seven-day period. The report shall be in both written and
34 electronic form, and the department shall make those statistics
35 pertaining to a residential care facility for the elderly acquired
36 infection rates at specified residential care facilities for the elderly
37 available on its Internet Web site.

38 (g) Each laboratory licensed by the state to perform
39 microbiological testing, including, but not limited to, routine
40 culture and antibiotic resistance testing, or biochemical, biological,

1 ~~genetic or other assays to determine bacterial species identification~~
 2 ~~and the antibiotic resistance patterns of those species shall also~~
 3 ~~report any information obtained by that laboratory pertaining to~~
 4 ~~the discovery or the incidence of any a residential care facility for~~
 5 ~~the elderly acquired infections, including MRSA, within five~~
 6 ~~working days after obtaining the information.~~

7 *SEC. 4. Section 120141 is added to the Health and Safety Code,*
 8 *to read:*

9 *120141. The department shall take all of the following measures*
 10 *to prevent, control, and monitor the spread of infectious diseases:*

11 *(a) Sponsor local and regional training on basic data analysis*
 12 *to better prepare local health departments to control and track*
 13 *disease outbreaks.*

14 *(b) Provide local health departments and local health officers*
 15 *with an inventory of basic electronic disease investigation data*
 16 *analysis software.*

17 *(c) Develop statewide exercises that emphasize the complete*
 18 *cycle involving communicable disease investigation, including*
 19 *surveillance, response investigation, disease control and recovery,*
 20 *and that assist local health officers to enhance, improve, and*
 21 *evaluate the responses of local health departments to disease*
 22 *outbreaks.*

23 *SEC. 5. No reimbursement is required by this act pursuant to*
 24 *Section 6 of Article XIII B of the California Constitution because*
 25 *the only costs that may be incurred by a local agency or school*
 26 *district will be incurred because this act creates a new crime or*
 27 *infraction, eliminates a crime or infraction, or changes the penalty*
 28 *for a crime or infraction, within the meaning of Section 17556 of*
 29 *the Government Code, or changes the definition of a crime within*
 30 *the meaning of Section 6 of Article XIII B of the California*
 31 *Constitution.*