

Introduced by Senator EmmersonFebruary 22, 2013

An act to amend Sections 1248, 1248.15, 1248.35, 1248.4, and 1248.5 of the Health and Safety Code, relating to outpatient facilities.

LEGISLATIVE COUNSEL'S DIGEST

SB 701, as introduced, Emmerson. Hospital-affiliated outpatient settings.

Existing law requires the Medical Board of California to adopt standards for accreditation of outpatient settings, as defined, and, in approving accreditation agencies to perform this accreditation, to ensure that the certification program shall, at a minimum, include standards for specified aspects of the settings' operations. Existing law makes a willful violation of these and other provisions relating to outpatient settings a crime.

This bill would create entities known as hospital-affiliated outpatient settings, as defined, and would align the accreditation and reporting processes with those of the general acute care hospital with which the hospital-affiliated outpatient settings is affiliated. By expanding the definition of a crime, this bill 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 1248 of the Health and Safety Code is
2 amended to read:

3 1248. For purposes of this chapter, the following definitions
4 shall apply:

5 (a) *“Accreditation agency” means a public or private*
6 *organization that is approved to issue certificates of accreditation*
7 *to outpatient settings by the Medical Board of California pursuant*
8 *to Sections 1248.15 and 1248.4.*

9 (b) *“Deemed accreditation agency” means a national*
10 *accreditation program meeting the requirements of, and approved*
11 *for, deeming authority for Medicare requirements by the United*
12 *States Department of Health and Human Services, the Centers for*
13 *Medicare and Medicaid Services, or any successor agency.*

14 ~~(a)~~

15 (c) *“Division” means the Medical Board of California. All*
16 *references in this chapter to the division, the Division of Licensing*
17 *of the Medical Board of California, or the Division of Medical*
18 *Quality shall be deemed to refer to the Medical Board of California*
19 *pursuant to Section 2002 of the Business and Professions Code.*

20 (d) *“Hospital-affiliated outpatient setting” means a facility,*
21 *clinic, unlicensed clinic, center, office, or other setting that is an*
22 *outpatient setting, does not operate exclusively for the purpose of*
23 *providing surgical services to patients not requiring hospitalization*
24 *and in which the expected duration of services would not exceed*
25 *24 hours following admission, and is accredited by a deemed*
26 *accreditation agency as part of a general acute care hospitals’s*
27 *accreditation process.*

28 ~~(b)~~

29 (e) (1) *“Outpatient setting” means any facility, clinic, unlicensed*
30 *clinic, center, office, or other setting that is not part of a general*
31 *acute care facility, as defined in Section 1250, and where*
32 *anesthesia, except local anesthesia or peripheral nerve blocks, or*
33 *both, is used in compliance with the community standard of*
34 *practice, in doses that, when administered have the probability of*
35 *placing a patient at risk for loss of the patient’s life-preserving*
36 *protective reflexes.*

37 (2) *“Outpatient setting” also means facilities that offer in vitro*
38 *fertilization, as defined in subdivision (b) of Section 1374.55.*

1 (3) “Outpatient setting” does not include, among other settings,
2 any setting where anxiolytics and analgesics are administered,
3 when done so in compliance with the community standard of
4 practice, in doses that do not have the probability of placing the
5 patient at risk for loss of the patient’s life-preserving protective
6 reflexes.

7 ~~(e) “Accreditation agency” means a public or private~~
8 ~~organization that is approved to issue certificates of accreditation~~
9 ~~to outpatient settings by the board pursuant to Sections 1248.15~~
10 ~~and 1248.4.~~

11 (4) “*Outpatient setting*” also means a hospital-affiliated setting,
12 except as otherwise indicated.

13 SEC. 2. Section 1248.15 of the Health and Safety Code is
14 amended to read:

15 1248.15. (a) The board shall adopt standards for accreditation
16 and, in approving accreditation agencies to perform accreditation
17 of outpatient settings, shall ensure that the certification program
18 shall, at a minimum, include standards for the following aspects
19 of the settings’ operations:

20 (1) Outpatient setting allied health staff shall be licensed or
21 certified to the extent required by state or federal law.

22 (2) (A) Outpatient settings shall have a system for facility safety
23 and emergency training requirements.

24 (B) There shall be onsite equipment, medication, and trained
25 personnel to facilitate handling of services sought or provided and
26 to facilitate handling of any medical emergency that may arise in
27 connection with services sought or provided.

28 (C) In order for procedures to be performed in an outpatient
29 setting *that is not a hospital-affiliated outpatient setting* as defined
30 in Section 1248, the outpatient setting shall do one of the following:

31 (i) Have a written transfer agreement with a local accredited or
32 licensed acute care hospital, approved by the facility’s medical
33 staff.

34 (ii) Permit surgery only by a licensee who has admitting
35 privileges at a local accredited or licensed acute care hospital, with
36 the exception that licensees who may be precluded from having
37 admitting privileges by their professional classification or other
38 administrative limitations, shall have a written transfer agreement
39 with licensees who have admitting privileges at local accredited
40 or licensed acute care hospitals.

1 (iii) Submit for approval by an accrediting agency a detailed
2 procedural plan for handling medical emergencies that shall be
3 reviewed at the time of accreditation. No reasonable plan shall be
4 disapproved by the accrediting agency.

5 (D) In addition to the requirements imposed in subparagraph
6 (C), the outpatient setting shall submit for approval by an
7 accreditation agency at the time of accreditation a detailed plan,
8 standardized procedures, and protocols to be followed in the event
9 of serious complications or side effects from surgery that would
10 place a patient at high risk for injury or harm or to govern
11 emergency and urgent care situations. The plan shall include, at a
12 minimum, that if a patient is being transferred to a local accredited
13 or licensed acute care hospital, the outpatient setting shall do all
14 of the following:

15 (i) Notify the individual designated by the patient to be notified
16 in case of an emergency.

17 (ii) Ensure that the mode of transfer is consistent with the
18 patient's medical condition.

19 (iii) Ensure that all relevant clinical information is documented
20 and accompanies the patient at the time of transfer.

21 (iv) Continue to provide appropriate care to the patient until the
22 transfer is effectuated.

23 (E) (i) All physicians and surgeons transferring patients from
24 an outpatient setting *that is not a hospital-affiliated outpatient*
25 *setting* shall agree to cooperate with the medical staff peer review
26 process on the transferred case, the results of which shall be
27 referred back to the outpatient setting, if deemed appropriate by
28 the medical staff peer review committee. If the medical staff of
29 the acute care facility determines that inappropriate care was
30 delivered at the outpatient setting, the acute care facility's peer
31 review outcome shall be reported, as appropriate, to the accrediting
32 body or in accordance with existing law.

33 (ii) *All physicians and surgeons transferring patients from a*
34 *hospital-affiliated outpatient setting shall agree to cooperate with*
35 *the medical staff peer review process on the transferred case, the*
36 *results of which shall be referred back to the general acute care*
37 *facility, if deemed appropriate by the medical staff peer review*
38 *committee. If the medical staff of the acute care facility determines*
39 *that inappropriate care was delivered at the outpatient setting,*
40 *the acute care facility's peer review outcome shall be reported,*

1 *as appropriate, to the accrediting body or in accordance with*
2 *existing law.*

3 (3) The outpatient setting shall permit surgery by a dentist acting
4 within his or her scope of practice under Chapter 4 (commencing
5 with Section 1600) of Division 2 of the Business and Professions
6 Code or physician and surgeon, osteopathic physician and surgeon,
7 or podiatrist acting within his or her scope of practice under
8 Chapter 5 (commencing with Section 2000) of Division 2 of the
9 Business and Professions Code or the Osteopathic Initiative Act.
10 The outpatient setting may, in its discretion, permit anesthesia
11 service by a certified registered nurse anesthetist acting within his
12 or her scope of practice under Article 7 (commencing with Section
13 2825) of Chapter 6 of Division 2 of the Business and Professions
14 Code.

15 (4) Outpatient settings shall have a system for maintaining
16 clinical records.

17 (5) Outpatient settings shall have a system for patient care and
18 monitoring procedures.

19 (6) (A) Outpatient settings shall have a system for quality
20 assessment and improvement.

21 (B) Members of the medical staff and other practitioners who
22 are granted clinical privileges shall be professionally qualified and
23 appropriately credentialed for the performance of privileges
24 granted. The outpatient setting shall grant privileges in accordance
25 with recommendations from qualified health professionals, and
26 credentialing standards established by the outpatient setting.

27 (C) Clinical privileges shall be periodically reappraised by the
28 outpatient setting. The scope of procedures performed in the
29 outpatient setting shall be periodically reviewed and amended as
30 appropriate.

31 (7) Outpatient settings regulated by this chapter that have
32 multiple service locations shall have all of the sites inspected.

33 (8) Outpatient settings shall post the certificate of accreditation
34 in a location readily visible to patients and staff.

35 (9) Outpatient settings shall post the name and telephone number
36 of the accrediting agency with instructions on the submission of
37 complaints in a location readily visible to patients and staff.

38 (10) Outpatient settings shall have a written discharge criteria.

39 (b) Outpatient settings shall have a minimum of two staff
40 persons on the premises, one of whom shall either be a licensed

1 physician and surgeon or a licensed health care professional with
2 current certification in advanced cardiac life support (ACLS), as
3 long as a patient is present who has not been discharged from
4 supervised care. Transfer to an unlicensed setting of a patient who
5 does not meet the discharge criteria adopted pursuant to paragraph
6 (10) of subdivision (a) shall constitute unprofessional conduct.

7 (c) An accreditation agency may include additional standards
8 in its determination to accredit outpatient settings if these are
9 approved by the board to protect the public health and safety.

10 (d) No accreditation standard adopted or approved by the board,
11 and no standard included in any certification program of any
12 accreditation agency approved by the board, shall serve to limit
13 the ability of any allied health care practitioner to provide services
14 within his or her full scope of practice. Notwithstanding this or
15 any other provision of law, each outpatient setting may limit the
16 privileges, or determine the privileges, within the appropriate scope
17 of practice, that will be afforded to physicians and allied health
18 care practitioners who practice at the facility, in accordance with
19 credentialing standards established by the outpatient setting in
20 compliance with this chapter. Privileges may not be arbitrarily
21 restricted based on category of licensure.

22 (e) The board shall adopt standards that it deems necessary for
23 outpatient settings that offer in vitro fertilization.

24 (f) The board may adopt regulations it deems necessary to
25 specify procedures that should be performed in an accredited
26 outpatient setting for facilities or clinics that are outside the
27 definition of outpatient setting as specified in Section 1248.

28 (g) As part of the accreditation process, the accrediting agency
29 shall conduct a reasonable investigation of the prior history of the
30 outpatient setting, including all licensed physicians and surgeons
31 who have an ownership interest therein, to determine whether there
32 have been any adverse accreditation decisions rendered against
33 them. For the purposes of this section, “conducting a reasonable
34 investigation” means querying the Medical Board of California
35 and the Osteopathic Medical Board of California to ascertain if
36 either the outpatient setting has, or, if its owners are licensed
37 physicians and surgeons, if those physicians and surgeons have,
38 been subject to an adverse accreditation decision. *This subdivision*
39 *shall not apply to hospital-affiliated outpatient settings.*

1 (h) (1) An outpatient setting shall be subject to the reporting
2 requirements in Section 1279.1 and the penalties for failure to
3 report specified in Section 1280.4. *This paragraph shall not apply*
4 *to adverse events described in subparagraph (E) of paragraph (1)*
5 *of subdivision (b) of Section 1279.1 that occur in a*
6 *hospital-affiliated outpatient setting.*

7 (2) *The general acute care hospital affiliated with the*
8 *hospital-affiliated outpatient setting shall report any adverse event*
9 *described in subparagraph (E) of paragraph (1) of subdivision (b)*
10 *of Section 1279.1 that occurs in a hospital-affiliated outpatient*
11 *setting, subject to reporting requirements in Section 1279.1 and*
12 *penalties for failure to report in Section 1280.4.*

13 SEC. 3. Section 1248.35 of the Health and Safety Code is
14 amended to read:

15 1248.35. (a) Every outpatient setting which is accredited shall
16 be inspected by the accreditation agency and may also be inspected
17 by the Medical Board of California. The Medical Board of
18 California shall ensure that accreditation agencies inspect outpatient
19 settings.

20 (b) Unless otherwise specified, the following requirements apply
21 to inspections described in subdivision (a).

22 (1) The frequency of inspection shall depend upon the type and
23 complexity of the outpatient setting to be inspected.

24 (2) Inspections shall be conducted no less often than once every
25 three years by the accreditation agency and as often as necessary
26 by the Medical Board of California to ensure the quality of care
27 provided.

28 (3) The Medical Board of California or the accreditation agency
29 may enter and inspect any outpatient setting that is accredited by
30 an accreditation agency at any reasonable time to ensure
31 compliance with, or investigate an alleged violation of, any
32 standard of the accreditation agency or any provision of this
33 chapter.

34 (c) If an accreditation agency determines, as a result of its
35 inspection, that an outpatient setting is not in compliance with the
36 standards under which it was approved, the accreditation agency
37 may do any of the following:

38 (1) Require correction of any identified deficiencies within a
39 set timeframe. Failure to comply shall result in the accrediting

1 agency issuing a reprimand or suspending or revoking the
2 outpatient setting's accreditation.

3 (2) Issue a reprimand.

4 (3) Place the outpatient setting on probation, during which time
5 the setting shall successfully institute and complete a plan of
6 correction, approved by the board or the accreditation agency, to
7 correct the deficiencies.

8 (4) Suspend or revoke the outpatient setting's certification of
9 accreditation.

10 (d) (1) (A) Except as is otherwise provided in this subdivision,
11 before suspending or revoking a certificate of accreditation under
12 this chapter, the accreditation agency shall provide the outpatient
13 setting *that is not a hospital-affiliated outpatient setting* with notice
14 of any deficiencies and the outpatient setting shall agree with the
15 accreditation agency on a plan of correction that shall give the
16 outpatient setting reasonable time to supply information
17 demonstrating compliance with the standards of the accreditation
18 agency in compliance with this chapter, as well as the opportunity
19 for a hearing on the matter upon the request of the outpatient
20 setting. ~~During~~

21 *(B) Except as otherwise provided in this subdivision, before*
22 *suspending or revoking a certificate of accreditation under this*
23 *chapter, the deemed accreditation agency shall provide the hospital*
24 *that is affiliated with the hospital-affiliated outpatient setting with*
25 *notice of any deficiencies, which may be combined with notice of*
26 *other deficiencies for the hospital's general acute care*
27 *accreditation. The hospital shall agree with the accreditation*
28 *agency on a plan of correction that shall give the hospital*
29 *reasonable time to supply information demonstrating compliance*
30 *with the standards of the accreditation agency, in compliance with*
31 *this chapter, as well as the opportunity for a hearing on the matter*
32 *if the hospital requests one.*

33 (C) *During* the allotted time to correct the deficiencies, the plan
34 of correction, which includes the deficiencies, shall be
35 conspicuously posted by the outpatient setting in a location
36 accessible to public view. ~~Within~~

37 (D) *Within* 10 days after the adoption of the plan of correction,
38 the accrediting agency shall send a list of deficiencies and the
39 corrective action to be taken to the board and to the California
40 State Board of Pharmacy if an outpatient setting is licensed

1 pursuant to Article 14 (commencing with Section 4190) of Chapter
2 9 of Division 2 of the Business and Professions Code. ~~The~~ *If the*
3 *outpatient setting is a hospital-affiliated outpatient setting, the list*
4 *of deficiencies and the corrective action to be taken may be*
5 *combined with the list of deficiencies and the corrective action to*
6 *be taken for the hospital's general acute care accreditation that*
7 *directly affect the hospital-affiliated outpatient setting.*

8 (E) The accreditation agency may immediately suspend the
9 certificate of accreditation before providing notice and an
10 opportunity to be heard, but only when failure to take the action
11 may result in imminent danger to the health of an individual. In
12 such cases, the accreditation agency shall provide subsequent
13 notice and an opportunity to be heard.

14 (2) If an outpatient setting does not comply with a corrective
15 action within a timeframe specified by the accrediting agency, the
16 accrediting agency shall issue a reprimand, and may either place
17 the outpatient setting on probation or suspend or revoke the
18 accreditation of the outpatient setting, and shall notify the board
19 of its action. This section shall not be deemed to prohibit an
20 outpatient setting that is unable to correct the deficiencies, as
21 specified in the plan of correction, for reasons beyond its control,
22 from voluntarily surrendering its accreditation prior to initiation
23 of any suspension or revocation proceeding.

24 (e) The accreditation agency shall, within 24 hours, report to
25 the board if the outpatient setting has been issued a reprimand or
26 if the outpatient setting's certification of accreditation has been
27 suspended or revoked or if the outpatient setting has been placed
28 on probation. If an outpatient setting has been issued a license by
29 the California State Board of Pharmacy pursuant to Article 14
30 (commencing with Section 4190) of Chapter 9 of Division 2 of
31 the Business and Professions Code, the accreditation agency shall
32 also send this report to the California State Board of Pharmacy
33 within 24 hours.

34 (f) The accreditation agency, upon receipt of a complaint from
35 the board that an outpatient setting poses an immediate risk to
36 public safety, shall inspect the outpatient setting and report its
37 findings of inspection to the board within five business days. If an
38 accreditation agency receives any other complaint from the board,
39 it shall investigate the outpatient setting and report its findings of
40 investigation to the board within 30 days.

1 (g) Reports on the results of any inspection shall be kept on file
2 with the board and the accreditation agency along with the plan
3 of correction and the comments of the outpatient setting. *The*
4 *inspection report for an outpatient setting that is not a*
5 *hospital-affiliated outpatient setting shall include the lists of*
6 *deficiencies, plans of correction or requirements for improvements*
7 *and correction, and corrective action completed. The inspection*
8 *report for a hospital-affiliated outpatient setting shall include a*
9 *letter from the deemed accreditation agency stating the*
10 *accreditation status of the hospital-affiliated outpatient setting.*
11 The inspection report may include a recommendation for
12 reinspection. All final inspection reports *for outpatient settings as*
13 *defined in subdivision (e) of Section 1248*, which include the lists
14 of deficiencies, plans of correction or requirements for
15 improvements and correction, and corrective action completed,
16 shall be public records open to public inspection.

17 (h) If one accrediting agency denies accreditation, or revokes
18 or suspends the accreditation of an outpatient setting, this action
19 shall apply to all other accrediting agencies. An outpatient setting
20 that is denied accreditation is permitted to reapply for accreditation
21 with the same accrediting agency. The outpatient setting also may
22 apply for accreditation from another accrediting agency, but only
23 if it discloses the full accreditation report of the accrediting agency
24 that denied accreditation. *If a deemed accreditation agency denies*
25 *accreditation and the outpatient setting seeks to apply for*
26 *accreditation from another accrediting agency, the outpatient*
27 *setting shall also disclose the lists of deficiencies, plans of*
28 *correction or requirements for improvements and correction, and*
29 *corrective action completed from the deemed accreditation agency*
30 *that denied accreditation.* Any outpatient setting that has been
31 denied accreditation shall disclose the accreditation report to any
32 other accrediting agency to which it submits an application. The
33 new accrediting agency shall ensure that all deficiencies have been
34 corrected and conduct a new onsite inspection consistent with the
35 standards specified in this chapter.

36 (i) If an outpatient setting's certification of accreditation has
37 been suspended or revoked, or if the accreditation has been denied,
38 the accreditation agency shall do all of the following:

39 (1) Notify the board of the action.

1 (2) Send a notification letter to the outpatient setting of the
2 action. The notification letter shall state that the setting is no longer
3 allowed to perform procedures that require outpatient setting
4 accreditation.

5 (3) Require the outpatient setting to remove its accreditation
6 certification and to post the notification letter in a conspicuous
7 location, accessible to public view.

8 (j) The board may take any appropriate action it deems necessary
9 pursuant to Section 1248.7 if an outpatient setting's certification
10 of accreditation has been suspended or revoked, or if accreditation
11 has been denied.

12 SEC. 4. Section 1248.4 of the Health and Safety Code is
13 amended to read:

14 1248.4. (a) It is the intent of the Legislature that an
15 accreditation agency operating on or before January 1, 1995, or a
16 successor thereof, or an accreditation agency thereafter operating
17 as part of a joint program granted temporary certification as an
18 accreditation agency by the division, whether operating as part of
19 a joint program or independently, and meeting the standards set
20 forth in this chapter, as determined by the division, not be required
21 to go through the entire application process with the division.
22 Therefore, the division may grant a temporary certificate of
23 approval to such an accreditation agency. The temporary approval
24 issued to an accreditation agency under this subdivision shall expire
25 on January 1, 1998. In order to continue its status as an
26 accreditation agency, an accreditation agency approved by the
27 division under this subdivision shall apply for renewal of approval
28 by the division on or before January 1, 1998, and shall establish
29 that it is in compliance with the standards set forth in this chapter
30 and any regulations adopted pursuant thereto.

31 (b) Each accreditation agency approved by the division shall,
32 on and after January 1, 1995, promptly forward to the division a
33 list of each outpatient setting to which it has granted a certificate
34 of accreditation, as well as settings that have lost accreditation or
35 were denied accreditation.

36 (c) The division shall approve an accreditation agency that
37 applies for approval on a form prescribed by the division,
38 accompanied by payment of the fee prescribed by this chapter and
39 evidence that the accreditation agency meets the following criteria,

1 *except that paragraph (6) shall not apply to an accreditation*
2 *agency for hospital-affiliated outpatient settings:*

3 (1) Includes within its accreditation program, at a minimum,
4 the standards for accreditation of outpatient settings approved by
5 the division as well as standards for patient care and safety at the
6 setting.

7 (2) Submits its current accreditation standards to the division
8 every three years, or upon request for continuing approval by the
9 division.

10 (3) Maintains internal quality management programs to ensure
11 quality of the accreditation process.

12 (4) Has a process by which accreditation standards can be
13 reviewed and revised no less than every three years.

14 (5) Maintains an available pool of allied health care practitioners
15 to serve on accreditation review teams as appropriate.

16 (6) Has accreditation review teams that shall do all of the
17 following:

18 (A) Consist of at least one physician and surgeon who practices
19 in an outpatient setting; any other members shall be practicing
20 actively in these settings.

21 (B) Participate in formal educational training programs provided
22 by the accreditation agency in evaluation of the certification
23 standards at least every three years.

24 *(7) In lieu of the requirements of paragraph (6),*
25 *hospital-affiliated outpatient settings shall be reviewed by*
26 *physicians and surgeons or clinicians educated through formal*
27 *training programs provided by a deemed accreditation*
28 *organization. Members of the team shall participate in the training*
29 *programs at least every three years.*

30 ~~(7)~~

31 (8) The accreditation agency shall demonstrate that professional
32 members of its review team have experience in conducting review
33 activities of freestanding outpatient settings.

34 ~~(8)~~

35 (9) Standards for accreditation shall be developed with the input
36 of the medical community and the ambulatory surgery industry.

37 ~~(9)~~

38 (10) Accreditation reviewers shall be credentialed and screened
39 by the accreditation agency.

40 ~~(10)~~

1 (II) The accreditation agency shall not have an ownership
2 interest in nor be involved in the operation of a freestanding
3 outpatient setting, nor in the delivery of health care services to
4 patients.

5 (d) *Notwithstanding subdivision (c) and Section 1248.15, this*
6 *division shall approve any deemed accreditation agency to perform*
7 *certification of any hospital-affiliated outpatient setting that applies*
8 *for approval, accompanied by both of the following:*

9 (1) *A letter by the deemed accreditation agency that it shall*
10 *comply with this chapter with respect to the certification of a*
11 *hospital-affiliated outpatient setting.*

12 (2) *Evidence that the certification program includes standards*
13 *for policies and procedures addressing the indication and*
14 *management of sedation.*

15 ~~(e)~~

16 (e) Accreditation agencies approved by the division shall
17 forward to the division copies of all certificates of accreditation
18 and shall notify the division promptly whenever the agency denies
19 or revokes a certificate of accreditation.

20 ~~(e)~~

21 (f) A certification of an accreditation agency by the division
22 shall expire at midnight on the last day of a three-year term if not
23 renewed. The division shall establish by regulation the procedure
24 for renewal. To renew an unexpired approval, the accreditation
25 agency shall, on or before the date upon which the certification
26 would otherwise expire, apply for renewal on a form, and pay the
27 renewal fee, as prescribed by the division.

28 SEC. 5. Section 1248.5 of the Health and Safety Code is
29 amended to read:

30 1248.5. The board shall evaluate the performance of an
31 approved accreditation agency no less than every three years, or
32 in response to complaints against an agency, or complaints against
33 one or more outpatient settings accreditation by an agency that
34 indicates noncompliance by the agency with the standards approved
35 by the board. *This section shall not apply to a deemed accreditation*
36 *agency that is approved solely pursuant to subdivision (d) of*
37 *Section 1248.4.*

38 SEC. 6. No reimbursement is required by this act pursuant to
39 Section 6 of Article XIII B of the California Constitution because
40 the only costs that may be incurred by a local agency or school

1 district will be incurred because this act creates a new crime or
2 infraction, eliminates a crime or infraction, or changes the penalty
3 for a crime or infraction, within the meaning of Section 17556 of
4 the Government Code, or changes the definition of a crime within
5 the meaning of Section 6 of Article XIII B of the California
6 Constitution.

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