



California
CHAPTER

LEGISLATIVE REPORT #310

Legislative Update & Update on COVID Crisis Activity - Flex Scope of Practice

March 21, 2020: We've been telling you to do this for a long time, and now is the best time to engage in this exercise. Figure out your values, and discover how you can schedule engaging in those values into your day.

With the Legislature in recess until at least April 13th there have been some discussions this week amongst the Assembly Democrats on how to handle the loss of session time that would have normally been spent hearing bills. If the Legislature comes back on April 13th there will only be two weeks to hear all the bills that would have normally been heard over five weeks. Leadership has been asking Assemblymembers to strongly review the bills they are authoring and begin to prioritize them. They should be prepared to only move forward a certain number of bills when they return. I have heard as few as five bills may be allowed for each Assemblymember. There has also been discussion to start a special session for bills related to the COVID-19 crisis. A special session could run concurrently with the regular session so this would be a way to have the COVID related bills not be counted towards the five bill limit for regular session.

The Governor has also been providing updates on a daily basis on how the state is handling the COVID crisis. On Thursday he spoke about the potential surge of cases coming into our hospitals and their ability to handle the surge. Depending on how successful the stay in place directives have been most folks are expecting a surge to occur over the next seven to 10 days. The state is planning for an additional 10,000 hospital beds being possibly needed to meet potential surge. To meet this need they are doing the following:

- Leasing Seton Hospital in Daly City and St. Vincent in Los Angeles. Both are currently vacant.
- Talking with the UC and State University systems to potentially use empty dormitory rooms.
- Lease hotel and motel rooms.
- Mobile medical units from federal government.

The other piece discussed was around healthcare personnel. There is a fear and strong possibility the healthcare work force will be stretched beyond capacity. The state is making efforts to recruit retired physicians to help as well as looking to physicians who may not be as busy due to cancellations to offer help. The Governor also mentioned he is looking at scope as a way to expand healthcare workforce. He did not expand on what this meant but wanted to mention we should not be surprised if the state allows mid-level practitioners to not need to be supervised by physicians.

An example of how fast this is moving, just this morning the state announced it is waiving all the hospital licensing requirements which include maintaining nurse patient staff ratios. You all know how strongly the nurses feel about those ratios which shows how serious the Governor is taking the crisis.

I wanted to mention these discussions, many of which are still just discussions, to give you a sense of where we are going to address the COVID crisis.

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