DATE: July 24, 2017

TO: Honorable Members of the Rules, Elections, and Intergovernmental Relations Committee

FROM: Sharon M. Tso

Council File No.: 17-0002-S98
Assignment No.: 17-07-0707

Chief Legislative Analyst

SUBJECT: Resolution to SUPPORT SB 349 (Lara) Chronic Dialysis Clinics

CLA RECOMMENDATION: Adopt Resolution (Harris-Dawson – Ryu - Buscaino) to include in the City’s 2017-18 State Legislative Program SUPPORT for SB 349 (Lara) which would require chronic dialysis clinics to maintain specified staffing ratios and would authorize the California Department of Public Health to levy civil penalties against such clinics for violating these staffing ratios, among other provisions.

SUMMARY
The Resolution (Harris-Dawson – Ryu - Buscaino) states that kidney failure is a growing national health concern. Patients with this condition must undergo dialysis, which is a procedure that removes excess waste and water from the blood. Recovery from dialysis is slow, and patients are at risk of developing serious medical conditions.

Currently pending in the Legislature, is SB 349 (Lara), which would require minimum dialysis clinics to maintain specified staffing levels at all times. SB 349 would also require the State to inspect clinics annually and to levy civil penalties against clinics for violating the required staffing levels. The bill would also require health workers to be provided adequate time between patients to clean and prepare dialysis machines. According to the Resolution, SB 349 would reduce avoidable medical complications for dialysis patients.

The Resolution recommends that the City support SB 349.

BACKGROUND
According to the National Institute on Health, kidney disease is defined by the inability of an individual’s kidneys to filter blood normally. This condition causes wastes to build up in the body, which leads to serious illnesses or death. Major risk factors for kidney disease include diabetes, high blood pressure, and family history of kidney failure. Complications from kidney disease include anemia, bone disease, muscle pain, decreased mental function, and a greater risk of getting infections.

According to the UCLA Health Library, dialysis is used to treat both acute and chronic kidney disease. Dialysis can be done at home, in a dialysis center, or in a hospital. Patients are able to read, write, sleep, or talk during treatment. Possible complications from treatment include muscle cramps, dizziness, and serious infections.

In Los Angeles, dialysis clinics are regulated by the Los Angeles County Department of Public Health, Health Facilities Inspection Division (LACDPH). LACDPH also inspects health care
facilities, investigates complaints, and conducts follow-up visits to ensure that complaints are resolved.

SB 349 (Lara), introduced on February 14, 2017, would require chronic dialysis clinics to meet minimum staffing ratios at all times for health workers and that the transition time between patients is at least 45 minutes to ensure medical staff properly clean and prepare dialysis machines. The bill would also require the California Department of Public Health to inspect clinics annually and to assess administrative penalties for violations of the staffing ratios. According to the bill’s author, SB 349 would improve dialysis patient safety and reduce avoidable medical complications for patients receiving this treatment at outpatient clinics. The bill is sponsored by SEIU California and the United Nurses Associations of California/Union of Health Care Professionals.

SB 349 is supported by the California Labor Federation, NAACP, Latino Diabetes Association, National Association of Social Workers, and others. The bill is opposed by the California Chamber of Commerce, California Hospital Association, Los Angeles County Business Federation, California Children’s Hospital Association, United Hospital Association, and other organizations. Groups in opposition to SB 349 state that additional regulations on the dialysis industry are unnecessary because current law provides adequate regulation of the industry.

DEPARTMENT NOTIFIED
Fire Personnel

BILL STATUS
05/19/17  Set for hearing May 25.
05/25/17  From committee: Do pass as amended. (Ayes 5, Noes 2).
05/26/17  Read second time and amended. Ordered to third reading.
05/26/17  Published May 26 at 10 a.m.
05/31/17  Read third time. Passed. (Ayes 24, Noes 15.) Ordered to the Assembly.
06/01/17  In Assembly. Read first time. Held at Desk.
06/12/17  Referred to Committee on Health.
06/28/17  From committee: Do pass as amended and re-refer to Committee on Appropriations. (Ayes 10, Noes 4)
06/29/17  Read second time and amended. Re-referred to Committee on Appropriations.

Brian Randol
Analyst

Attachment: 1. Resolution
2. Text of SB 329
WHEREAS, any official position of the City of Los Angeles with respect to legislation, rules, regulations or policies proposed to or pending before a local, state or federal governmental body or agency must first have been adopted in the form of a Resolution by the City Council with the concurrence of the Mayor; and

WHEREAS, kidney failure is a growing national health concern; the number of patients in the United States diagnosed with loss of kidney function is growing by 5 percent per year; and

WHEREAS, loss of kidney function disproportionately affects low-income families, African Americans, and Latinos; and

WHEREAS, many patients with this condition must undergo dialysis, which is a medical procedure that removes excess waste and water from the blood; dialysis patients often need to visit a clinic three times per week for several hours per visit; and

WHEREAS, recovery from dialysis is slow, and patients are at risk of developing serious medical conditions, including: infections, vitamin imbalances, nausea, bleeding, and heart failure; and

WHEREAS, many health workers report being assigned to as many as twelve dialysis patients at a time despite rules that require technicians to be assigned to no more than four patients at a time; these harmful staffing practices do not allow health workers to devote adequate time to their patients, which increases the possibility that patients will develop life-threatening complications; and

WHEREAS, currently pending in the Legislature is SB 349 (Lara), the Dialysis Patient Safety Act, which would require minimum staffing levels in dialysis clinics for registered nurses, patient care technicians, social workers, and dietitians at all times; and

WHEREAS, SB 349 would also require the California Department of Public Health to inspect clinics annually and to levy civil penalties against clinics for violating the required staffing levels; furthermore, the bill would require health workers to be provided adequate time between patients to clean and prepare dialysis machines; and

WHEREAS, SB 349 will improve dialysis patient safety and will reduce avoidable medical complications for those who need this life-saving treatment;

NOW, THEREFORE, BE IT RESOLVED, with the concurrence of the Mayor, that by the adoption of this Resolution, the City of Los Angeles hereby includes in its 2017-18 State Legislative Program SUPPORT for SB 349 (Lara), which would require chronic dialysis clinics to maintain specified minimum staffing ratios; authorize the California Department of Public Health (CDPH) to levy civil penalties for violating these staffing ratios; require CDPH to inspect clinics annually; and require that there be at least 45 minutes of transition time between dialysis patients to enable medical staff to properly clean and prepare dialysis machines.

PRESENTED BY:
MARQUEECE HARRIS-DAWSON
Councilmember, 8th District

DAVID E. RYU
Councilmember, 4th District

SECONDED BY:

JUN 28 2017
BMR