
THIRD READING

Bill No: AB 1407
Author: Burke (D), et al.
Amended: 7/15/21 in Senate
Vote: 21

SENATE BUS., PROF. & ECON. DEV. COMMITTEE: 12-1, 6/30/21
AYES: Roth, Archuleta, Bates, Becker, Dodd, Eggman, Hurtado, Leyva, Min,
Newman, Ochoa Bogh, Pan
NOES: Jones
NO VOTE RECORDED: Melendez

SENATE HEALTH COMMITTEE: 8-0, 7/14/21
AYES: Pan, Eggman, Gonzalez, Hurtado, Leyva, Limón, Rubio, Wiener
NO VOTE RECORDED: Melendez, Grove, Roth

SENATE APPROPRIATIONS COMMITTEE: Senate Rule 28.8

ASSEMBLY FLOOR: 66-0, 5/24/21 - See last page for vote

SUBJECT: Nurses: implicit bias courses

SOURCE: California Nurses Association

DIGEST: This bill requires approved schools of nursing to include one hour of direct participation in an implicit bias training, as defined, as part of a graduation requirement and requires licensees to complete one hour of direct participation in an implicit bias course, as specified.

ANALYSIS:

Existing law:

- 1) Establishes the Board of Registered Nursing (BRN) to license and regulate the practice of nursing. (Business and Professions Code (BPC) §§ 2700 et seq.)

- 2) Requires the BRN to have an analysis completed of the practice of the registered nurse (RN), at least every five years, and results of the analysis must be utilized to assist in the determination of the required subjects of instruction, validation of the licensing examinations, and assessment of the current practice of nursing. (BPC § 2786(d))
- 3) Requires the BRN to adopt regulations requiring that, on and after January 1, 2022, all continuing education (CE) courses for RN licensees contain a curriculum that includes the understanding of implicit bias. (BPC § 2736.5(a)(1))
- 4) Requires that CE courses address at least one of (a) examples of how implicit bias affects perceptions and treatment decisions of licensees, leading to disparities in health outcomes or (b) strategies to address how unintended biases in decision-making may contribute to health care disparities by shaping behavior and producing differences in medical treatment along lines of race, ethnicity, gender identity, sexual orientation, age, socioeconomic status, or other characteristics. (BPC § 2736.5(c))
- 5) Requires each licensee to complete 30 hours of continuing education approved by the BRN (Title 14, California Code of Regulations (CCR) § 1451)
- 6) Exempts licensees from the CE requirements during the first two years immediately following initial licensure. (14, CCR § 1452)
- 7) Requires a general acute care hospital or a special hospital that provides perinatal care, and a licensed alternative birth center or a primary care clinic that provides alternative birth center services, to implement a mandatory implicit bias program for all health care providers involved in the perinatal care of patients within those facilities. (Health and Safety Code (HSC) § 123630.3)
- 8) Requires the healthcare providers in perinatal care settings, upon completion of the initial basic implicit bias training, to complete a refresher course every two years, or on a more frequent basis if deemed necessary by the facility, to keep current with changing racial, identity, and cultural trends and best practices in decreasing interpersonal and institutional implicit bias. (HSC § 123630.3(c)(2))

This bill:

- 1) Adds a graduation requirement for an approved school of nursing to include a one hour of direct participation in an implicit bias training, as specified, and requires the implicit bias training to include the following:

- a) Identification of previous or current unconscious biases and misinformation;
 - b) Identification of personal, interpersonal, institutional, structural, and cultural barriers to inclusion;
 - c) Corrective measures to decrease implicit bias at the interpersonal and institutional levels, including ongoing policies and practices for that purpose;
 - d) Information on the effects, including, but not limited to, ongoing personal effects of historical and contemporary exclusion and oppression of minority communities;
 - e) Information about cultural identity across racial or ethnic groups;
 - f) Information about communicating more effectively across identities, including racial, ethnic, religious, and gender identities;
 - g) Discussion on power dynamics and organizational decision-making;
 - h) Discussion on health inequities within the perinatal care field, including information on how implicit bias impacts maternal and infant health outcomes
 - i) Perspectives of diverse, local constituency groups and experts on particular racial, identity, cultural, and provider-community relations issues in the community; and,
 - j) Information on reproductive justice.
- 2) States that the graduation requirement is not intended to affect the requirements for licensure, require a curriculum revision, or affect licensure by endorsement.
- 3) Requires, beginning January 1, 2023, a licensee to complete one hour of direct participation in an implicit bias course offered by a CE provider approved by the BRN.
- 4) Requires a hospital to implement an evidence-based implicit bias program, as specified, as part of its new graduate training program that hires and trains new nurses, and exempts the implicit bias training requirement for individuals, which have met the implicit bias requirement through a graduation requirement.

Background

Board of Registered Nursing and RNs. To be eligible for licensure in California, an individual must complete an education program approved by the BRN. RN programs are required to be at least two academic years and affiliated with a

hospital. Today, approved RN programs are offered at various academic institutions throughout California including Community Colleges, California State Universities, California Universities, and private for profit institutions regulated by the Bureau of Private Postsecondary Education. All programs are required to meet the BRN's regulatory requirements for approved programs and curriculum and the BRN must determine the areas of course work required for each program through regulations.

16, CCR § 1426 provides the current curriculum requirements for programs which includes the following specified course areas: (1) Art and science of nursing, 36 semester units or 54 quarter units, of which 18 semester or 27 quarter units will be in theory and 18 semester or 27 quarter units will be in clinical practice. (2) Communication skills, 6 semester or 9 quarter units; and, (3) related natural sciences (anatomy, physiology, and microbiology courses with labs), behavioral and social sciences, 16 semester or 24 quarter units.

There is no current requirement in statute or regulations for an individual in an RN program to take coursework in implicit bias, however, there is nothing that would prevent an RN program from incorporating some type of coursework that includes implicit bias either. This bill would mandate that RN academic programs require a one hour of direct participation in an implicit bias training as a requirement for graduation. However, this provision would not apply to graduates from outside of California, as the BRN does not approve review graduations requirements, only ensures that coursework meets California requirements.

RNs must renew their licenses every two years. As part of the renewal process, as specified in 14 CCR § 1451, after the first two years of licensure, RNs must complete 30 hours of CE every two years. However, CE is not required during the licensee's first two-year licensure period. This bill would change that requirement beginning January 1, 2023, and require licensees to complete only one hour of direct participation in an implicit bias course offered by a CE provider. Because of AB 241 (Kamlager-Dove, Chapter 417, Statutes of 2019), the BRN must adopt regulations by January 1, 2022, requiring all RN CE courses to contain a curriculum that includes the understanding of implicit bias in treatment, meaning each course taken to meet the 30-hour CE requirement must contain implicit bias training. By January 1, 2023, all CE providers must comply with the BRN's regulations. This bill would make new licensees obtain only 1 hour of CE during the first initial two-year licensure period and continue to meet the additional CE requirements for implicit bias education.

In addition, all health care providers that provide perinatal care in specified settings, including RNs, must complete an evidence-based implicit bias program. After the completion of the initial implicit bias, the providers must complete a refresher course every two years, unless the perinatal care facility determines a higher level of frequency is necessary. This bill requires hospitals to implement an implicit bias program as part of hiring and training new RN graduates, but exempts from that requirement for new nursing program graduates who completed the implicit bias a graduation requirement.

Implicit Bias. Implicit Bias and Professions. In December 2015, the *American Journal of Public Health* published a systematic review titled “Implicit Racial/Ethnic Bias among Health Care Professionals and its Influence on Health Care Outcomes”. The review concluded, “Most health care providers appear to have implicit bias in terms of positive attitudes toward whites and negative attitudes toward people of color.” Additional studies have been published suggesting that implicit bias in regards to gender, sexual orientation and identity, and other characteristic has resulted in inconsistent diagnoses and courses of treatment being provided to patients based on their demographic. These trends take into account not only the characteristics of the person being treated, but also those of the licensed professional in correlation to that patient. Although licensed RNs must complete CE in implicit bias beginning in January 1, 2022, this bill seeks to ensure that new licensees have some education in implicit bias prior to licensure and continue to take CE every two years on the topic.

FISCAL EFFECT: Appropriation: No Fiscal Com.: Yes Local: No

SUPPORT: (Verified 8/17/21)

California Nurses Association (source)

California Insurance Commissioner

Black Leadership Council

California Hawaii State Conference of the NAACP

California Labor Federation

California Professional Firefighters

California State NAACP

Consumer Attorneys of California

County Health Executives Association of California

SEIU California

United Food and Commercial Workers Union, Western States Council

Worksafe

OPPOSITION: (Verified 8/18/21)

None received

ARGUMENTS IN SUPPORT: The California Nurses Association, Black Leadership Council, California State NAACP, California Hawaii State Conference of the NAACP, California Labor Federation, California Professional Firefighters, SEIU California, United Food and Commercial Workers Union, Western States Council, Consumer Attorneys of California, and Worksafe write in support and note, “The prevalence of implicit bias in the health care setting is reflective of inadequacies within the health care system and structure. Hospitals, health care facilities, and health care educators offer very little, if anything, to bring awareness to or address this phenomenon and problem. Too often, facilities fail to look at the communities they serve, those communities' needs, and the resources facilities need to tap to fill those needs.”

The County Health Executives Association of California writes in support and notes, “Taken together, unsatisfactory care received by racial, ethnic, and cultural minorities can result in continued and costly health inequities, lack of engagement in health care, and worsening health statuses. To ensure positive health outcomes among patients, implicit bias and racial discrimination in health and health care should be better understood, assessed, and corrected.”

The Insurance Commissioner writes in support and notes, “The prevalence of implicit bias in the health care setting must be addressed on all fronts so that its negative impacts are mitigated to the greatest extent possible.”

ASSEMBLY FLOOR: 66-0, 5/24/21

AYES: Aguiar-Curry, Arambula, Bauer-Kahan, Bennett, Berman, Bloom, Boerner Horvath, Burke, Calderon, Carrillo, Cervantes, Chau, Chen, Chiu, Cooley, Cooper, Cunningham, Megan Dahle, Daly, Davies, Frazier, Friedman, Gabriel, Cristina Garcia, Eduardo Garcia, Gipson, Lorena Gonzalez, Gray, Grayson, Holden, Irwin, Jones-Sawyer, Kalra, Lee, Levine, Low, Maienschein, Mayes, McCarty, Medina, Mullin, Muratsuchi, Nazarian, O'Donnell, Petrie-Norris, Quirk, Quirk-Silva, Ramos, Reyes, Luz Rivas, Robert Rivas, Rodriguez, Blanca Rubio, Salas, Santiago, Stone, Ting, Valladares, Villapudua, Voepel, Waldron, Ward, Akilah Weber, Wicks, Wood, Rendon

NO VOTE RECORDED: Bigelow, Choi, Flora, Fong, Gallagher, Kiley, Lackey,
Mathis, Nguyen, Patterson, Seyarto, Smith

Prepared by: Elissa Silva / B., P. & E.D. / 916-651-4104
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