

CSNO: Support, Watch bills 10/1/2022 Compiled by Lydia Bourne, Leg Advocate

[AB 58](#)

(Salas D) Pupil health: suicide prevention policies and training.

Current Analysis: 08/23/2022 [Assembly Floor Analysis \(text 8/11/2022\)](#)

Chapter Number: 428

Introduced: 12/7/2020

Last Amend: 8/11/2022

Status: 9/19/2022-Approved by the Governor. Chaptered by Secretary of State - Chapter 428, Statutes of 2022.

Location: 9/19/2022-A. CHAPTERED

Summary: Current law requires the governing board or body of a county office of education, school district, state special school, or charter school that serves pupils in kindergarten and grades 1 to 12, inclusive, to adopt a policy on pupil suicide prevention that specifically addresses, among other things, procedures relating to suicide prevention, intervention, and postvention, and any training on suicide awareness and prevention to be provided to teachers of pupils in all of the grades served by the local educational agency. Current law requires the State Department of Education to develop and maintain a model policy in accordance with these provisions to serve as a guide for local educational agencies in developing policies for pupil suicide prevention. This bill would require a local educational agency, on or before January 1, 2025, to review and update its policy on pupil suicide prevention, and revise its training materials, to incorporate best practices identified by the department in the department's model policy.

Attachments:

[support ltr](#)

[fact sheet](#)

| Organization | Position | Assigned |
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| CSNO | Watch | Sylvia Carlson |

[AB 452](#)

(Friedman D) Pupil safety: parental notification: firearm safety laws.

Current Analysis: 08/10/2022 [Assembly Floor Analysis \(text 6/27/2022\)](#)

Chapter Number: 199

Introduced: 2/8/2021

Last Amend: 6/27/2022

Status: 8/29/2022-Approved by the Governor. Chaptered by Secretary of State - Chapter 199, Statutes of 2022.

Location: 8/29/2022-A. CHAPTERED

Summary: Would require a school district, county office of education, and charter school to annually inform parents and guardians of pupils at the beginning of the first semester or quarter of the regular school term of California's child access prevention laws and laws relating to the safe storage of firearms, as specified. By imposing additional duties on school districts, county offices of education, and charter schools, the bill would impose a state-mandated local program. The bill would require the State Department of Education, on or before July 1, 2023, to develop, and subsequently update as provided, in consultation with the Department of Justice, and provide to school districts, county offices of education, and charter schools, and, upon request, to provide to private schools, model language for the notice regarding those child access prevention and safe storage of firearms laws. The bill would make a school district, county office of education, charter school, private school, and the department immune from civil liability for any damages relating to the notice, as specified.

Attachments:

[support ltr](#)

[fact sheet](#)

| Organization | Position | Assigned |
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| CSNO | Watch | |

[AB 552](#)

(Quirk-Silva D) Integrated School-Based Behavioral Health Partnership Program.

Current Analysis: 09/21/2022 [Assembly Floor Analysis \(text 8/26/2022\)](#)

Introduced: 2/10/2021

Last Amend: 6/20/2022

Status: 9/19/2022-Vetoed by Governor.

Location: 9/19/2022-A. VETOED

Summary: Would authorize the Integrated School-Based Behavioral Health Partnership Program, which the bill would establish, to provide prevention and early intervention for, and access to, behavioral health services for pupils. The bill would authorize a county behavioral health agency and the governing board or body of a local educational agency to agree to collaborate on conducting a needs assessment on the need for school-based mental health and substance use disorder services, to implement an integrated school-based behavioral health partnership program, and to develop a

memorandum of understanding outlining the requirements for the partnership program. The bill would encourage the county behavioral health agency and the local educational agency, when appropriate, to enter into a contract for mental health or substance use disorder services.

Governor's Message: To the Members of the California State Assembly: I am returning Assembly Bill 552 without my signature. This bill would permit local educational agencies and county behavioral health agencies to enter into partnerships to provide prevention and early intervention, and access to behavioral health and substance use disorder services for pupils at appropriate school-based locations. While I share the author's goal of addressing the mental health needs of children and youth, the partnership programs proposed under this bill would duplicate requirements for school-based behavioral health services being developed pursuant to the Children and Youth's Behavioral Health Initiative (CYBHI), which take effect in 2024. Implementation of the CYBHI's statewide all-payer fee schedule will provide a solution to the issue that this bill attempts to address. Additionally, I am concerned that this bill could create significant one-time and ongoing costs in the millions of dollars for the departments that would play a role in implementing these programs. With our state facing lower-than-expected revenues over the first few months of this fiscal year, it is important to remain disciplined when it comes to spending, particularly spending that is ongoing. We must prioritize existing obligations and priorities, including education, health care, public safety and safety-net programs. The Legislature sent measures with potential costs of well over \$20 billion in one-time spending commitments and more than \$10 billion in ongoing commitments not accounted for in the state budget. Bills with significant fiscal impact, such as this measure, should be considered and accounted for as part of the annual budget process. For these reasons, I am unable to sign this bill. Sincerely, Gavin Newsom

Attachments:

[support ltr](#)
[fact sheet](#)

| Organization | Position | Assigned |
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| CSNO | Watch | |

[AB 558](#) ([Nazarian D](#)) School meals: Child Nutrition Act of 2022.

Current Analysis: 08/30/2022 [Assembly Floor Analysis](#) (text 8/24/2022)

Introduced: 2/11/2021

Last Amend: 8/24/2022

Status: 9/30/2022-Signed by the Governor

Location: 9/30/2022-A. CHAPTERED

Summary: Current law, commencing with the 2022–23 school year, requires a school district or county superintendent of schools maintaining kindergarten or any of grades 1 to 12, inclusive, or charter school to provide 2 nutritiously adequate school meals free of charge during each schoolday to any pupil who requests a meal without consideration of the pupil's eligibility for a federally funded free or reduced-priced meal, with a maximum of one free meal for each meal service period, as provided. This bill would require the State Department of Education, in consultation with the State Department of Social Services, to develop, and to post on its internet website by July 1, 2023, guidance for local educational agencies participating in the federal School Breakfast Program that maintain kindergarten or any of grades 1 to 6, inclusive, on how to serve eligible nonschoolaged children breakfast or a morning snack at a local educational agency schoolsite. The bill would define "eligible nonschoolaged child" to mean a child who is not enrolled in school and who is a sibling, half sibling, or stepsibling of, or a foster child residing with, a pupil who is eligible for a free or reduced-price breakfast. The bill would require a guardian of an eligible nonschoolaged child to be present in order for the nonschoolaged child to receive breakfast or a morning snack.

Attachments:

[support ltr](#)

| Organization | Position | Assigned |
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| CSNO | Watch | |

[AB 748](#) ([Carrillo D](#)) Pupil mental health: mental health assistance posters.

Current Analysis: 08/23/2022 [Assembly Floor Analysis](#) (text 6/16/2022)

Chapter Number: 431

Introduced: 2/16/2021

Last Amend: 6/16/2022

Status: 9/19/2022-Approved by the Governor. Chaptered by Secretary of State - Chapter 431, Statutes of 2022.

Location: 9/19/2022-A. CHAPTERED

Summary: Would require, on or before the start of the 2023–24 school year, each schoolsite in a school district, county office of education, or charter school, serving pupils in any of grades 6 to 12, inclusive, to create a poster that identifies approaches and shares resources regarding pupil mental health. The bill would require the poster to be prominently and conspicuously displayed in appropriate public areas that are accessible to, and commonly frequented by, pupils at each schoolsite, as provided. The bill would provide that no basis for civil liability is created by the above provisions for

those local educational agencies. By imposing additional duties on school districts, county offices of education, and charter schools, the bill would impose a state-mandated local program.

| Organization | Position | Assigned |
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| CSNO | Support | |

Notes 1: we co-sponsored AB 563 (Gabriel) - OSBH, in 2021 budget; supported AB 309 (Gabriel)

AB 1797 (**Weber, Akilah D**) **Immunization registry.**

Current Analysis: 08/29/2022 [Assembly Floor Analysis \(text 8/17/2022\)](#)

Chapter Number: 582

Introduced: 2/7/2022

Last Amend: 8/17/2022

Status: 9/27/2022-Approved by the Governor. Chaptered by Secretary of State - Chapter 582, Statutes of 2022.

Location: 9/28/2022-A. CHAPTERED

Summary: Current law authorizes local health officers and the State Department of Public health to operate immunization information systems. Current law, except as provided, authorizes health care providers and other agencies, including, among others, schools, childcare facilities, family childcare homes, and county human services agencies, to disclose specified immunization information with local health departments and the State Department of Public Health, and authorizes local health departments and the department to disclose that same information to each other and to health care providers, schools, childcare facilities, family childcare homes, and county human services agencies, among others, as specified. Current law specifies the immunization, patient, or client information that may be disclosed, which includes, among other things, patient or client demographic information, immunization data, adverse reactions to the immunization, or other information needed to identify the patient or client or to comply with other laws. This bill would instead require health care providers and other agencies, including schools, childcare facilities, family childcare homes, and county human services agencies to disclose the specified immunization information, and would add the patient's or client's race and ethnicity to the list of information that shall or may be disclosed.

Attachments:

[support ltr](#)

[fact sheet](#)

| Organization | Position | Assigned |
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| CSNO | Support | |

AB 1810 (**Levine D**) **Pupil health: seizure disorders.**

Current Analysis: 08/03/2022 [Senate Floor Analyses \(text 3/30/2022\)](#)

Introduced: 2/7/2022

Last Amend: 3/30/2022

Status: 9/30/2022-Signed by the Governor

Location: 9/30/2022-A. CHAPTERED

Summary: Would, if a pupil diagnosed with seizures, a seizure disorder, or epilepsy has been prescribed an emergency anti-seizure medication by the pupil's health care provider, authorize the pupil's local educational agency, upon receipt of a request from the pupil's parent or guardian, to designate one or more volunteers at the pupil's school to receive initial and annual refresher training regarding the emergency use of anti-seizure medication. The bill would require the Superintendent of Public Instruction to establish minimum standards of training for the administration of emergency anti-seizure medication, as provided. The bill would authorize a school nurse or, if the school does not have a school nurse or the school nurse is not onsite or available, a volunteer who has been designated and received training regarding the emergency use of anti-seizure medication, to administer emergency anti-seizure medication to a pupil diagnosed with seizures, a seizure disorder, or epilepsy if the pupil is suffering from a seizure. The bill would require any local educational agency or school upon receipt of a parent or guardian's request to distribute a related notice at least once per school year to all staff.

Attachments:

[support ltr](#)

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[sample ltr](#)

[fact sheet](#)

| Organization | Position | Assigned |
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| CSNO | Support | |

AB 1940 (**Salas D**) **School-Based Health Center Support Program.**

Current Analysis: 08/24/2022 [Assembly Floor Analysis \(text 8/11/2022\)](#)

Introduced: 2/10/2022

Last Amend: 8/11/2022

Status: 9/27/2022-Vetoed by the Governor

Location: 9/27/2022-A. VETOED

Summary: Current law requires the State Department of Public Health, in cooperation with the State Department of Education, to establish a Public School Health Center Support Program to assist school health centers, which are defined as centers or programs, located at or near local educational agencies, that provide age-appropriate health care services at the program site or through referrals, as specified. This bill would rename the program as the School-Based Health Center Support Program and would redefine a school-based health center to mean a student-focused health center or clinic that is located at or near a school or schools, is organized through school, community, and health provider relationships, and provides age-appropriate, clinical health care services onsite by qualified health professionals.

Governor's Message: To the Members of the California State Assembly: I am returning Assembly Bill 1940 without my signature. This bill revises and recasts the Public School Health Center Support Program to be renamed as the School-Based Health Center (SBHC) Support Program, to be administered by the California Department of Public Health (CDPH) in cooperation with the California Department of Education (CDE). The bill also defines SBHC to mean a student-focused health center or clinic that meets specified conditions, increases funding levels for SBHC planning, implementation and expansion grants and requires CDPH to collaborate with CDE to develop a request for a proposal process with specified preference priorities. I appreciate the author's effort to modernize the existing Public School Health Center Support Program and their intent to increase access to physical and behavioral health services for students. SBHCs are vital tools to address the significant disparities in both health and educational outcomes for our state's children and youth. However, I have concerns this bill could create significant one-time Proposition 98 General Fund cost pressures in the tens of millions of dollars to fund the SBHC Support Program, and ongoing General Fund costs in the millions of dollars for CDPH to administer the program that were not included in the budget. With our state facing lower-than-expected revenues over the first few months of this fiscal year, it is important to remain disciplined when it comes to spending. We must prioritize existing obligations and priorities, including education, health care, public safety and safety-net programs. The Legislature sent measures with potential costs of well over \$20 billion in one-time spending commitments and more than \$10 billion in ongoing commitments not accounted for in the state budget. Bills with significant fiscal impact, such as this measure, should be considered and accounted for as part of the annual budget process. For these reasons, I cannot sign this bill. Sincerely, Gavin Newsom

Attachments:

[support ltr](#)
[sample ltr](#)
[coalition letter](#)
[fact sheet](#)

| Organization | Position | Assigned |
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| CSNO | Support | |

Notes 1: The spot bill language adds only a small requirement for the OSBH in CDE... but most of the bill language is focused on the CDPH program... amendments coming soon!

[AB 1954](#)

(Quirk D) Physicians and surgeons: treatment and medication of patients using cannabis.

Current Analysis: 06/28/2022 [Senate Floor Analyses \(text 5/19/2022\)](#)

Chapter Number: 232

Introduced: 2/10/2022

Last Amend: 5/19/2022

Status: 9/2/2022-Approved by the Governor. Chaptered by Secretary of State - Chapter 232, Statutes of 2022.

Location: 9/2/2022-A. CHAPTERED

Summary: Would prohibit a physician and surgeon from automatically denying treatment or medication to a qualified patient, as defined, based solely on a positive drug screen for tetrahydrocannabinol (THC) or report of medical cannabis use without first completing a case-by-case evaluation of the patient that includes a determination that the qualified patient's use of medical cannabis is medically significant, as defined, to the treatment or medication. The bill would provide that use of medical cannabis that has been recommended by a licensed physician and surgeon shall not constitute the use of an illicit substance in such an evaluation. The bill would provide that a physician and surgeon shall not be punished, or denied any right or privilege, for having administered treatment or medication to a qualified patient pursuant to the bill and consistent with the standard of care. By expanding the scope of a crime, the bill would impose a state-mandated local program.

Attachments:

[fact sheet](#)

| Organization | Position | Assigned |
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| CSNO | Watch | |

Notes 1: FYI - BRN to publish a precedential statement on RN administering medical cannabis in the schools

[AB 2124](#)

(Garcia, Cristina D) Pupil Support Training Program.

Current Analysis: 09/21/2022 [Assembly Floor Analysis \(text 8/26/2022\)](#)

Introduced: 2/15/2022

Last Amend: 8/11/2022

Status: 9/18/2022-Vetoed by Governor.

Location: 9/18/2022-A. VETOED

Summary: Current law requires the governing board of any school district to give diligent care to the health and physical development of pupils and authorizes the governing board of a school district to employ properly certified persons for the work. This bill, subject to an appropriation by the Legislature for its purposes, would establish the Pupil Peer Support Training Program. The bill would require the Superintendent of Public Instruction to develop an application process and administration plan for the selection of grant recipients under the program before January 31, 2024. The bill would require the Superintendent to award Pupil Peer Support Training Program grants on a competitive basis to local educational agencies serving pupils in any of grades 9 to 12, inclusive, to establish a peer support training program at schools, as specified. The bill would require a grant recipient to ensure that a school staff member holding a pupil personnel services credential supervises the training of, and services provided by, pupils serving as peer supports under the program.

Governor's Message: To the Members of the California State Assembly: I am returning Assembly Bill 2124 without my signature. This bill would establish a high school Pupil Peer Support Training Program, developed and administered by the State Superintendent of Public Instruction, before January 1, 2024, contingent on funding in a future state budget. Peer support programs are valuable, which is why the 2022 Budget Act funded a substantially similar program. AB 178 allocated \$10 million for the School-Based Peer Mental Health Demonstration project. This grant program will provide competitive grants to high schools to develop peer-to-peer support programs. With our state facing lower-than-expected revenues over the first few months of this fiscal year, it is important to remain disciplined when it comes to spending, particularly spending that is ongoing. We must prioritize existing obligations and priorities, including education, health care, public safety and safety-net programs. The Legislature sent measures with potential costs of well over \$20 billion in one-time spending commitments and more than \$10 billion in ongoing commitments not accounted for in the state budget. Bills that create significant General Fund cost pressure, such as this measure, should be considered in the annual budget process. For these reasons, I cannot sign this bill. Sincerely, Gavin Newsom

Attachments:

[Fact sheet](#)

| Organization | Position | Assigned |
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| CSNO | Watch | |

[AB 2260](#) (Rodriguez D) Emergency response: trauma kits.

Current Analysis: 07/27/2022 [Assembly Floor Analysis \(text 6/21/2022\)](#)

Chapter Number: 586

Introduced: 2/16/2022

Last Amend: 6/21/2022

Status: 9/27/2022-Approved by the Governor. Chaptered by Secretary of State - Chapter 586, Statutes of 2022.

Location: 9/28/2022-A. CHAPTERED

Summary: Under current law, everyone is generally responsible, not only for the result of their willful acts, but also for an injury occasioned to another by their want of ordinary care or skill in the management of their property or person. Current law exempts from civil liability any person who, in good faith and not for compensation, renders emergency medical or nonmedical care or assistance at the scene of an emergency other than an act or omission constituting gross negligence or willful or wanton misconduct. Current law exempts public or private organizations that sponsor, authorize, support, finance, or supervise the training of people, or certifies those people in emergency medical services, from liability for civil damages alleged to result from those training programs. This bill would define "trauma kit" to mean a first aid response kit that contains specified items, including, among other things, a tourniquet. The bill would allow medical materials and equipment and any additional items that are approved by the medical director of the local emergency medical services agency to be included as supplements in addition to the specified items that are required to be included in a trauma kit if they adequately treat a traumatic injury and can be stored in a readily available kit.

Attachments:

[fact sheet](#)

| Organization | Position | Assigned |
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| CSNO | Watch | |

Notes 1: Educational groups register under the Group E [Education] category. Register more than 5 students in a kindergarten through 12th class school to qualify. The exception is for homeschool or child care facilities in private residences.

Some religious organizations serve less than 100 total people in the congregation. These may file for an exception. This delegates under Group B [Business] status.

Another exception is available for child care facilities. This applies if they are not subject to the Residential R-3 status designation. They can file under the Group E category instead of Group I-4 [Institutions] status.

[AB 2274](#) (Rubio, Blanca D) Mandated reporters: statute of limitations.

Current Analysis: 08/13/2022 [Senate Floor Analyses](#) (text 3/31/2022)

Chapter Number: 587

Introduced: 2/16/2022

Last Amend: 3/31/2022

Status: 9/27/2022-Approved by the Governor. Chaptered by Secretary of State - Chapter 587, Statutes of 2022.

Location: 9/28/2022-A. CHAPTERED

Summary: Under current law, mandated reporters are required to report whenever the mandated reporter, in their professional capacity or within the scope of their employment, has knowledge of or observes a child whom the mandated reporter knows or reasonably suspects has been the victim of child abuse or neglect. Failure by a mandated reporter to report an incident of known or reasonably suspected child abuse or neglect is a misdemeanor. Current law generally requires prosecution of a misdemeanor to commence within one year after commission of the offense. Under current law, a case involving the failure to report an incident known or reasonably suspected by the mandated reporter to be sexual assault may be filed at any time within 5 years from the date of occurrence of the offense. This bill would allow a case involving the failure to report an incident known or reasonably suspected by the mandated reporter to be child abuse or severe neglect, as defined, to be filed within one year of the discovery of the offense, but in no case later than 4 years after the commission of the offense.

| Organization | Position | Assigned |
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| CSNO | Watch | |

[AB 2329](#) (Carrillo D) Pupil health: eye examinations: schoolsites.

Current Analysis: 08/30/2022 [Assembly Floor Analysis](#) (text 8/25/2022)

Introduced: 2/16/2022

Last Amend: 8/25/2022

Status: 9/30/2022-Signed by the Governor

Location: 9/30/2022-A. CHAPTERED

Summary: This bill would authorize a local educational agency, as defined, to enter into a memorandum of understanding with a nonprofit eye examination provider, including, but not limited to, a nonprofit mobile eye examination provider, as defined, to provide noninvasive eye examinations consisting of providing eyeglasses to pupils at any schoolsite within the local educational agency. The bill would require eye examinations provided pursuant to the bill's provisions to be supplemental to, and to not replace, the above-referenced vision appraisals or screenings provided pursuant to existing law. The bill would require a school to provide parents and guardians with an opportunity to opt out their child from receiving these eye care services, as provided. The bill would require the State Department of Education to develop and post on appropriate department internet websites a model opt-out form for these purposes. This bill contains other related provisions and other existing laws.

Attachments:

[fact sheet](#)

| Organization | Position | Assigned |
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| CSNO | Watch | |

[AB 2640](#) (Valladares R) Pupil health: food allergies: California Food Allergy Resource internet web page.

Current Analysis: 06/28/2022 [Senate Floor Analyses](#) (text 4/19/2022)

Chapter Number: 794

Introduced: 2/18/2022

Last Amend: 4/19/2022

Status: 9/29/2022-Approved by the Governor. Chaptered by Secretary of State - Chapter 794, Statutes of 2022.

Location: 9/29/2022-A. CHAPTERED

Summary: Would require the State Department of Education to create the California Food Allergy Resource internet web page to provide voluntary guidance to school districts, county offices of education, and charter schools to help protect pupils with food allergies. The bill would require the department to ensure that the internet web page provides practical information, planning steps, and strategies for reducing allergic reactions to food within schools and early education centers. The bill would require the internet web page to include specified content, including state and federal resources available to pupils with food allergies, methods for pupils, or their parents and guardians, to initiate individualized food allergy management and prevention plans and to obtain food ingredient lists from school food providers, and strategies to minimize the risk of food anaphylaxis in school. The bill would encourage local educational agencies to consult the internet web page and use it as an equitable resource to ensure the inclusiveness of pupils with food allergies at school and to make it available to

pupils, parents, and guardians annually.

Attachments:

[fact sheet](#)

| Organization | Position | Assigned |
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| CSNO | Watch | |

[AB 2814](#) (Wood D) Local educational agencies: emergency planning grants.

Current Analysis: 09/22/2022 [Assembly Floor Analysis](#) (text 8/25/2022)

Introduced: 2/18/2022

Status: 9/13/2022-Vetoed by Governor.

Location: 9/13/2022-A. VETOED

Summary: This bill would establish the Emergency Planning Grant Program, under the administration of the State Department of Education, and would require the department, upon an appropriation by the Legislature, to award \$1,000,000 in competitive grants to local educational agencies, as defined, to support emergency planning activities, including coordination with local emergency management systems and assessment of climate threats to the geographic area of the local educational agency. The bill would require the department, among other things, to prioritize grant awards for local educational agencies that face the greatest risk of, or have less capacity to prepare and respond to, climate threats without state assistance and to award grants by January 1, 2024. The bill would make these provisions inoperative on January 1, 2027.

Governor's Message: To the Members of the California State Assembly: I am returning Assembly Bill 2814 without my signature. This bill would establish, subject to appropriation, the Emergency Planning Grant Program to provide one-time grants to a limited number of local educational agencies for emergency planning activities. Preparing for emergencies is an essential function of government at all levels, including schools and local governments. Significant state resources, in the form of guidance, planning supports, and funding have been committed to help build and manage effective local disaster response systems. The Office of Emergency Services provides numerous resources related to school emergency planning safety, including forthcoming guidelines to help schools develop an emergency plan that complies with the California Standardized Emergency Management System referenced in the bill. Additionally, the Department of Education's Emergency Services Team provides technical assistance and guidance to schools related to emergency preparedness, mitigation, response, and recovery associated with natural disasters and other emergency situations. Schools can, and should, utilize these resources already available through CalOES and the Department of Education to support emergency planning activities as necessary. While I commend the author for seeking to be responsive to the increase in natural disasters and emergencies schools are facing, AB 2814 establishes a grant program not currently accounted for in the state's fiscal plan. With our state facing lower-than-expected revenues over the first few months of this fiscal year, it is important to remain disciplined when it comes to spending, particularly spending that is ongoing. We must prioritize existing obligations and priorities, including education, health care, public safety and safety-net programs. The Legislature sent measures with potential costs of well over \$20 billion in one-time spending commitments and more than \$10 billion in ongoing commitments not accounted for in the state budget. Bills with cost pressure, such as this measure, should be considered and accounted for in the annual budget process. For these reasons, I cannot sign this bill. Sincerely, Gavin Newsom

| Organization | Position | Assigned |
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| CSNO | Support | |

[SB 1184](#) (Cortese D) Confidentiality of Medical Information Act: school-linked services coordinators.

Current Analysis: 08/22/2022 [Senate Floor Analyses](#) (text 8/18/2022)

Introduced: 2/17/2022

Last Amend: 8/18/2022

Status: 9/30/2022-Approved by the Governor. Chaptered by Secretary of State. Chapter 993, Statutes of 2022.

Location: 9/30/2022-S. CHAPTERED

Summary: The Confidentiality of Medical Information Act prohibits a provider of health care, a health care service plan, or contractor from disclosing medical information, as defined, regarding a patient of the provider of health care or an enrollee or subscriber of the health care service plan without first obtaining an authorization, except as prescribed. The act authorizes a provider of health care or a health care service plan to disclose medical information in certain circumstances, including by authorizing disclosure to providers of health care, health care service plans, contractors, or other health care professionals or facilities for purposes of diagnosis or treatment of the patient. This bill would additionally authorize a provider of health care or a health care service plan to disclose medical information to a school-linked services coordinator, as prescribed.

Attachments:

[support ltr](#)

[fact sheet](#)

| Organization | Position | Assigned |
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| CSNO | Support | |

SB 1479 (Pan D) COVID-19 testing in schools: COVID-19 testing plans.

Current Analysis: 08/19/2022 [Senate Floor Analyses](#) (text 8/15/2022)

Chapter Number: 850

Introduced: 2/18/2022

Last Amend: 8/15/2022

Status: 9/29/2022-Approved by the Governor. Chaptered by Secretary of State. Chapter 850, Statutes of 2022.

Location: 9/29/2022-S. CHAPTERED

Summary: Would require the State Department of Public Health to coordinate specified school district, county office of education, and charter school COVID-19 testing programs that are currently federally funded or organized under the California COVID-19 Testing Task Force, as provided. The bill would authorize the department to provide supportive services, including technical assistance, vendor support, guidance, monitoring, and testing education, related to testing programs for teachers, staff, and pupils to help schools reopen and keep schools operating safely for in-person learning. The bill would also encourage the department to expand its contagious, infectious, or communicable disease testing guidance and other public health mitigation efforts to include prekindergarten and childcare centers, as provided.

Attachments:

[fact sheet](#)

| Organization | Position | Assigned |
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| CSNO | Watch | |

Total Measures: 17

Total Tracking Forms: 17