



CALIFORNIA ADVOCATES FOR NURSING HOME REFORM

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FREQUENTLY ASKED QUESTIONS ABOUT AB 2075 - PROTECTING ACCESS TO LONG TERM CARE FACILITY RESIDENTS

QUESTION 1: DOES AB 2075 “LIMIT HEALTH OFFICER AUTHORITY TO PROTECT CALIFORNIANS IN TIMES OF SERIOUS THREAT?”

No! AB 2075 leaves public health officers with complete authority to establish any safety protocols they deem fit to protect long term care facility residents, staff members, and visitors. Here’s a short list of the safety protocols public health officers can require of anyone during a public health emergency:

- quarantine or isolation;
- shelter-in-place;
- cohorting by risk factors;
- masking or other personal protective equipment;
- vaccination;
- training & testing;
- symptom screening; and
- surveillance

AB 2075 does not limit what public health officers can do. It acknowledges that outside caregivers and other health and social services providers perform services that are as critical to residents as those performed by facility staff. Thus, safety protocols imposed on visitors should be no greater than those imposed on facility staff. AB 2075 establishes that there is never a time when access to visitors in a long term care facility is less essential or less safe than access to staff members.

QUESTION 2: AREN'T VISITORS LESS LIKELY TO FOLLOW SAFETY PROTOCOLS THAN TRAINED STAFF?

No! Visitors are equally proficient at following safety protocols as staff. Family members and other essential caregivers are highly motivated to adhere to protocols since it is their loved ones whose lives are at stake.

Long term care facility staff receive very little training in infection control or other skills related to adhering to safety protocols. In nursing homes, the vast majority of care is not provided by

nurses but by aides. These aides may have as few as two hours of training in infection control. Aides in assisted living facilities, meanwhile, have *no* minimum requirements for training in infection control.

The little training long term care facility aides receive is certainly not enough: infection prevention and control violations remain the most cited federal deficiency in California nursing homes, with 5,308 issued since 2019 alone. During COVID, these violations cost thousands of lives.

Most notably, AB 2075 was amended to expressly permit public health officers to impose *whatever conditions they want* on visitors to demonstrate their proficiency at complying with the relevant safety protocols. If public health officers want to require visitors to attend a training, take a test, or otherwise display their infection control skills, they can do that.

QUESTION 3: WILL STAFF BE LESS LIKELY TO COME TO WORK IF THEY FACE ADDITIONAL SAFETY RISKS DUE TO VISITATION?

No! During COVID, it wasn't safety risks that drove facility staff away, it was their increased workload, isolation, and psychological stress combined with low wages. Visitors alleviate staff members' workload, isolation, and stress.

QUESTION 4: WILL AB 2075 ADD MORE COSTS TO CALIFORNIA'S ALREADY OVERSTRETCHED BUDGET?

No! AB 2075 only applies in the case of a public health emergency, which is hopefully very infrequent, and is not expected to incur any state costs. On the other hand, locking out visitors in long term care facilities creates enormous costs because it deprives residents of one of their best safeguards they have against isolation, neglect, and abuse.

QUESTION 5: SHOULDN'T WE LEAVE ACCESS POLICIES TO THE EXPERTS?

We have! AB 2075 implements the recommendations of a statewide workgroup that was convened by the Legislature to review and produce expert consensus for long term care facility access during public health emergencies. The workgroup was made up of nearly 40 organizations, including public health officers and people with expertise or lived experience in long term care or public health. Every group whose specific mission is to promote the well-being of long term care facility residents supports AB 2075.

AB 2075 gives public health officers all the tools they need to protect residents while ensuring visitors are never deemed as less important to resident welfare than facility staff.

Please vote yes on AB 2075!