

POLICY & PLANNING COMMITTEE

Meeting Summary – March 8, 2023

COMMISSIONERS REPRESENT: Tony Bell, Bruce Boardman, Deena Duncan, Dean Nakanishi

GUEST REGISTER: William Gould

MATERIAL DISTRIBUTED: Policy and Planning Committee March 2023 Agenda; Policy and Planning Committee February 2023 Minutes – Draft; Policy and Planning Committee January 2023 Minutes – Draft; P&P Handout - Updates March 2023

Topic	Discussion/Finding
1. Call to Order & Introduction of Commissioners and Guests	<p>Chair Deena Duncan, County of Los Angeles, the Commission on Alcohol and Other Drugs (CAOD) Policy and Planning Committee convened the meeting at 12:04 p.m.</p> <p>Roll taken and quorum not present.</p>
2. Public Comments	No public comments.
3. Action on Approval of Meeting Minutes from January 2023 Meeting	Quorum not present, item tabled.
4. Legislative Report/Update	<p>William Gould, Health Program Analyst II, Policy and Strategic Initiatives Unit Strategic and Network Development Branch for Substance Abuse Prevention and Control (SAPC), discussed the following legislation:</p> <p>AB 19 (Patterson) Introduced: 12/05/22 <i>Pupil health: opioid antagonists</i> Existing law authorizes school districts, county offices of education, and charter schools to provide emergency naloxone hydrochloride or another opioid antagonist to school nurses or voluntary trained personnel, and authorizes those nurses and voluntary trained personnel to use naloxone hydrochloride or another opioid antagonist to provide emergency medical aid to persons suffering, or reasonably believed to be suffering, from an opioid overdose, as provided. This bill would require each individual public school operated by a school district, county office of education, or charter school to maintain at least two doses of naloxone hydrochloride or another opioid antagonist for purposes of those authorizations. By imposing additional duties on public schools, the bill would impose a state-mandated local program. The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement. This bill would provide that, if the Commission on State Mandates determines that the bill contains costs mandated by the state, reimbursement for those costs shall be made pursuant to the statutory provisions noted above. Latest Update: 03/01/23 Measure version as amended on February 27 corrected.</p> <p>AB 67 (Muratsuchi)</p>

Topic	Discussion/Finding
	<p>Introduced: 12/05/22 <i>Homeless Court Pilot Program</i> This bill, upon an appropriation by the Legislature, would create the Homeless Courts Pilot Program, which would remain in effect until January 1, 2028, to be administered by the Judicial Council for the purpose of providing comprehensive community-based services to achieve stabilization for, and address the specific legal needs of, chronically homeless individuals who are involved with the criminal justice system. The bill would require programs seeking grant funds to provide a number of specified services or program components, including, but not limited to, a diversion program enabling participating defendants to have infraction or misdemeanor charges dismissed upon completion of a program, provision of supportive housing, as defined, during the duration of the program, and a dedicated county representative to assist defendants with housing needs. The bill would require an applicant for grant funding under the program to submit a plan for a new homeless court program or expansion of an existing homeless court program, and would require any funding awarded to an applicant to be used in accordance with that plan. Latest Update: 02/14/23 From committee: Do pass and re-refer to Com. on Judiciary (JUD). with recommendation: To Consent Calendar. (Ayes 8. Noes 0.) (February 14). Re-referred to Com. on JUD.</p> <p>AB 374 (Haney) Introduced: 2/01/23 <i>Cannabis: local control: cannabis consumption</i> This bill would remove some restrictions on cannabis consumption lounges, allowing operators to serve prepared foods and coffee as well as to host live music events. More specifically it would make possible for a local jurisdiction to allow retailers or microbusiness to conduct business activities on the premises other than the smoking, vaporizing, and ingesting of cannabis or cannabis products, including, but not limited to, selling non-cannabis-infused food, selling nonalcoholic beverages, and allowing, and selling tickets for, live musical or other performances. Latest Update: 02/17/23 Referred to Assembly Coms. on Business and Professions & Governmental Organization</p> <p>AB 767 (Gipson) Introduced: 2/13/23 <i>Community Paramedicine or Triage to Alternate Destination Act.</i> This bill would extend the Community Paramedicine or Triage to Alternate Destination Act of 2020 (established by AB1544,Gipson) until January 1, 2031. The bill would expand the allowable community paramedicine services program specialties to include providing short-term, postdischarge followup for persons recently discharged from a hospital due to a serious health condition, including collaboration with, and by providing referral to, home health services when eligible. The bill would require, on or before January 1, 2025, the authority to amend regulations to include that program specialty. Because a violation of the act is punishable as a misdemeanor, and this bill would create new requirements within the act and extend the operation of the act, this bill would expand an existing crime, thereby imposing a state-mandated local program. This bill would repeal certain provisions within the act authorizing community paramedicine short-term, postdischarge followup pilot programs. The bill would extend a requirement within the act for the authority to contract with an independent third party to prepare a final report on the results of the community paramedicine or triage to alternate destination programs from April 1, 2023, to April 1, 2028. Latest Update: 02/23/23 Referred to Assembly Committee on HEALTH.</p> <p>AB 268 (Weber)</p>

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	<p>Introduced: 1/23/23 <i>Board of State and Community Corrections</i> This bill would, commencing July 1, 2024, add 2 additional members to the Board of State and Community Corrections, a licensed health care provider and a licensed mental health care provider, each appointed by the Governor, subject to confirmation by the Senate. The bill would also, commencing July 1, 2024, require the board to develop and adopt regulations pertaining to standards of care for incarcerated persons with mental health issues by local correctional facilities, including requirements for training of correctional staff, requirements for mental health screening, and requirements for safety checks of incarcerated persons.</p> <p>SB 10 (Cortese) Introduced: 12/05/22 <i>Pupil health: opioid overdose prevention and treatment,</i> Existing law sets forth various provisions regarding opioid overdose prevention and treatment, including, among others, provisions relating to a naloxone grant program and standing orders for the distribution of an opioid antagonist, as defined. Existing law, subject to an appropriation, requires the State Department of Education, on or before January 1, 2023, to recommend best practices and identify training programs for use by local educational agencies, as defined, to address youth behavioral health, including staff and pupil training. Existing law requires the department to ensure that each identified training program, among other requirements, provides instruction on recognizing the signs and symptoms of youth behavioral health disorders, including common psychiatric conditions and substance use disorders, such as opioid and alcohol abuse. This bill would, on or before July 1, 2024, add as a new requirement for the training programs the provision of instruction only to school staff on the use of emergency opioid antagonists for purposes of treating an opioid overdose, with the recommended training following specified standards and criteria.</p> <p>SB 19 (Seyarto) Introduced: 12/05/22 <i>Anti-Fentanyl Abuse Task Force</i> This bill would, upon appropriation by the Legislature, establish the Anti-Fentanyl Abuse Task Force to undertake various duties relating to fentanyl abuse including, among others, collecting and organizing data on the nature and extent of fentanyl abuse in California and evaluating approaches to increase public awareness of fentanyl abuse. The bill would require the task force to be chaired by the Attorney General, or their designee, and would specify the membership of the task force. The bill would require the first meeting of the task force to take place no later than March 1, 2024, and would require the task force to meet at least once every 2 months. The bill would require the task force to report its findings and recommendations to the Attorney General, the Governor, and the Legislature by July 1, 2025. The bill would repeal these provisions on January 1, 2026.</p> <p>SB 44 (Umberg) Introduced: 12/05/22 <i>Controlled substances</i> Existing law makes it a crime to possess for sale or purchase for purpose of sale, transport, sell, furnish, administer, give away, manufacture, compound, convert, produce, derive, process, or prepare various controlled substances, including, among others, fentanyl, peyote, and various other opiates and narcotics. This bill would require a person who is convicted of, or who pleads guilty or no contest to, the above crimes to receive a written advisory of the danger of manufacturing or distribution of controlled substances and that, if a person dies as a result of that action, the manufacturer or distributor can be charged with voluntary manslaughter or murder. The bill would require that the fact the advisory was given be on the record and recorded on the abstract of conviction.</p>

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	<p>SB 43 (Eggman) Introduced: 12/5/22 <i>Behavioral Health.</i> Existing law, the Lanterman-Petris-Short Act, provides for the involuntary commitment and treatment of a person who is a danger to themselves or others or who is gravely disabled. Existing law, for purposes of involuntary commitment, defines “gravely disabled” as either a condition in which a person, as a result of a mental health disorder, is unable to provide for their basic personal needs for food, clothing, or shelter or has been found mentally incompetent, as specified. This bill expands the definition of “gravely disabled” to also include a condition that will result in substantial risk (vs evidence) of serious harm to the physical or mental health of a person due to a mental health disorder or a substance use disorder. The bill defines “serious harm” for purposes of these provisions to mean significant deterioration, debilitation, or illness due to a person’s inability to carry out specified tasks, including, among other things, attend to needed personal or medical care and attend to self-protection or personal safety. The bill specifies circumstances under which substantial risk (vs evidence) of serious harm may be evidenced, as specified. The bill would make conforming changes. To the extent that this change increases the level of service required of county departments, the bill would impose a state-mandated local program. Existing law also authorizes the appointment of a conservator, in the County of Los Angeles, the County of San Diego, or the City and County of San Francisco, for a person who is incapable of caring for the person’s own health and well-being due to a serious mental illness and substance use disorder. Existing law establishes the hearsay rule, under which evidence of a statement is generally inadmissible if it was made other than by a witness while testifying at a hearing and is offered to prove the truth of the matter stated. Existing law sets forth exceptions to the hearsay rule to permit the admission of specified kinds of evidence. Under this bill, for purposes of an expert witness in any proceeding relating to the appointment or reappointment of a conservator pursuant to the above-described provisions, the statements of specified health practitioners or a licensed clinical social worker included in the medical record would not be hearsay. The bill would authorize the court to grant a reasonable continuance if an expert witness in a proceeding relied on the medical record and the medical record has not been provided to the parties or their counsel. The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement. This bill would provide that, if the Commission on State Mandates determines that the bill contains costs mandated by the state, reimbursement for those costs shall be made pursuant to the statutory provisions noted above. Latest Update: 02/28/23 From committee with author’s amendments. Read second time and amended. Re-referred to Senate Rules Committee (RLS).</p> <p>SB 58 (Wiener) Introduced: 12/16/22 <i>Controlled substances: decriminalization of certain hallucinogenic substances.</i> This bill would decriminalize “psilocybin, psilocyn, dimethyltryptamine (DMT), ibogaine, and mescaline.” The bill has Assembly Member Kalra as Principal coauthor as well as Coauthors: Senators Newman and Smallwood-Cuevas and Assembly Members Haney, Lee, Low, and Wicks. This legislative proposal is similar to a bill in the last legislative session, unsuccessful SB 519. According to the text, this bill will lay the groundwork for California to develop a regulated therapeutic access program for psychedelic plants and fungi. The new bill contains at least two key changes from the measure that advanced last session. First, it excludes synthetic psychedelics like LSD and MDMA from the list of substances that would be legalized and focused only on those that are derived from plants or fungi. That aligns the legislation more closely with the bulk of local psychedelic decriminalization measures that have been enacted in cities across the U.S. in recent years. Second, the bill no longer includes a provision mandating a</p>

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	<p>study to explore future reforms. The senator had said that the study language was unnecessary given the high volume of research that's already been done and continues to be conducted. Latest Update: 03/01/23 Set for hearing March 21.</p> <p>SB 65 (Ochoa Bogh) Introduced: 1/04/23 <i>Behavioral Health Continuum Infrastructure Program.</i> Existing law authorizes the State Department of Health Care Services to, subject to an appropriation, establish a Behavioral Health Continuum Infrastructure Program. Existing law authorizes the department, pursuant to this program, to award competitive grants to qualified entities to construct, acquire, and rehabilitate real estate assets or to invest in needed mobile crisis infrastructure to expand the community continuum of behavioral health treatment resources to build or expand the capacity of various treatment and rehabilitation options for persons with behavioral health disorders, as specified</p> <p>This bill would authorize the department, in awarding the above-described grants, to give preference to qualified entities that are intending to place their projects in specified facilities or properties. The bill would appropriate \$1,000,000,000 from the General Fund to the department for the purpose of implementing the Behavioral Health Continuum Infrastructure Program, for encumbrance during the 2023–24 to 2025–26, inclusive, fiscal years. Latest Update: 01/18/23 Referred to Senate Committee on HEALTH.</p> <p>SB 76 (Wiener) Introduced: 1/11/23 <i>Alcoholic beverages: music venue license: entertainment zones: consumption.</i> The Alcoholic Beverage Control Act contains various provisions regulating the application for, the issuance of, the suspension of, and the conditions imposed upon alcoholic beverage licenses by the Department of Alcoholic Beverage Control. Existing law provides for various annual fees for the issuance of alcoholic beverage licenses, depending upon the type of license issued. Existing law authorizes the department to issue a music venue license, as defined, that would allow the licensee to sell beer, wine, and distilled spirits at retail for consumption on the premises in a music entertainment facility, as defined.</p> <p>This bill would authorize a licensee under a music venue license to apply to the department for a caterer's permit that would authorize the sale of beer, wine, and distilled spirits for consumption at events only upon the licensed music entertainment facility premises. The bill would also authorize a music venue license to apply to the department for an event permit, as specified. The bill would impose a fee for a caterer's permit for a licensee under a music venue license and for an event permit for a licensee under a music venue license, which would be deposited in the Alcohol Beverage Control Fund, and would make other conforming changes.</p> <p>This bill, additionally, would authorize a licensed beer manufacturer, a licensed winegrower, and any on-sale licensee to permit consumers to leave the premises with open containers of alcoholic beverages for consumption off the premises within an entertainment zone, subject to certain conditions. The bill would define "entertainment zone" for purposes of the Alcoholic Beverage Control Act as a zone created by a city, county, or city and county ordinance on or after January 1, 2024, that authorizes consumption of one or more types of alcoholic beverages on public</p>

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	<p>streets, sidewalks, or public rights-of-way in that zone. The bill would require a city, county, or city and county that establishes an entertainment zone to provide specified information relating to the entertainment zone to the department and establish a process or procedure by which persons in possession of alcoholic beverages in the entertainment zone may be readily identifiable as being 21 years of age or older.</p> <p>Latest Update: 01/18/23 Referred to Com. on G.O.</p> <p>SB 234 (Portantino, Umberg) Introduced: 1/24/23 <i>Opioid antagonists: schools, college campuses, stadiums, concert venues, and amusement parks.</i> This bill would require each public and elementary and secondary school in the state, including charter schools, to maintain unexpired doses of naloxone hydrochloride or any other opioid antagonist on its schoolsite at all times, and to ensure that at least 2 employees are aware of the location of the naloxone hydrochloride or other opioid antagonist. The bill would make other conforming changes. By imposing new duties on public schools, the bill would impose a state-mandated local program.</p> <p>This bill would require every campus of the California Community Colleges, the California State University, the University of California, an independent institution of higher education, and a private postsecondary educational institution to maintain unexpired doses of naloxone hydrochloride or any other opioid antagonist on its campus at all times, and to ensure that at least 2 employees are aware of the location of the naloxone hydrochloride or other opioid antagonist. By imposing new duties on community college districts, the bill would impose a state-mandated local program. The bill would exempt from civil or criminal liability any person who, in good faith and not for compensation, administers naloxone hydrochloride or another opioid antagonist on a college campus, other than an act or omission constituting gross negligence or willful or wanton misconduct.</p> <p>This bill would require each stadium, concert venue, and amusement park to maintain unexpired doses of naloxone hydrochloride or any other opioid antagonist on its premises at all times, and to ensure that at least 2 employees are aware of the location of the naloxone hydrochloride or other opioid antagonist. The bill would exempt from civil or criminal liability any person who, in good faith and not for compensation, administers naloxone hydrochloride or another opioid antagonist on the premises of a stadium, concert venue, or amusement park, other than an act or omission constituting gross negligence or willful or wanton misconduct.</p> <p>Latest Update: 03/02/23 Set for hearing March 22.</p> <p>SB 525 (Durazo) Introduced: 2/14/23 <i>Minimum wage: health care workers.</i> This bill would require a health care worker minimum wage of \$25 per hour for hours worked in covered health care employment, as defined, subject to adjustment, as prescribed on or before January 1, 2024. The bill would provide that the health care worker minimum wage constitutes the state minimum wage for covered health care employment for all purposes under the Labor Code and the Wage Orders of the Industrial Welfare Commission. The health care worker minimum wage would be enforceable by the Labor Commissioner or by a covered worker through a civil action, through the same means and with the same relief available for violation of any other state minimum wage</p>

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	<p>requirement. By establishing a new minimum wage, the violation of which would be a crime, the bill would impose a state-mandated local program.</p> <p>This bill would require, for covered health care employment where the employee is paid on a salary basis, that the employee earn a monthly salary equivalent to no less than 2 times the health care worker minimum wage for full-time employment in order to qualify as exempt from the payment of minimum wage and overtime.</p> <p>This bill would make legislative findings and declarations as to the necessity of a special statute for health care workers.</p> <p>Latest Update: 02/22/23 Referred to Senate Committee on Labor, Public Employment and Retirement</p> <p>Commissioner Bell asked William Gould to track and update the commission on Ab1532 in subsequent meetings.</p> <p>William Gould also provided the following link to commissioners: https://sd11.senate.ca.gov/news/20220112-senator-wiener%E2%80%99s-legislation-support-live-entertainment-venues-and-local-bars-and</p>
5. Comments from Commissioners on items of interest	No comments from Commissioners.
6. Adjournment	Meeting was adjourned at 12:39 p.m. Next meeting: April 12, 2023