



March 10, 2023

The Honorable Ash Kalra
Chair, Assembly Labor and Employment Committee
1020 N St., Room 155
Sacramento, CA 95814

SUBJECT: AB 1007 (Ortega) — Oppose Unless Amended

Dear Assembly Member Kalra:

For California's hospitals, the health and safety of patients and employees are paramount. Hospitals unequivocally support protecting their employees, and they simply could not fulfill their mission of care without healthy workers, a principle made abundantly clear during the pandemic. In fact, California's hospitals have seen a significantly lower rate of occupationally contracted COVID-19 claims, demonstrating the commitment to the existing and effective health and safety practices that protect hospital workers every day.

It is against this backdrop that the California Hospital Association (CHA), on behalf of more than 400 hospitals and health systems, adopts an "Oppose Unless Amended" position for Assembly Bill (AB) 1007. AB 1007 would require the use of specified plume scavenging systems in all general acute care hospitals. While the goal of the legislation is sound, as currently drafted, the bill poses significant challenges.

First, the definition of a "plume scavenging system" does not reflect current technological capabilities. Specifically, the bill would require that the system either neutralizes or captures all plume, yet there does not appear to exist any plume system that captures or neutralizes all plume. Rather, existing plume systems are capable only of reducing the amount of plume by capturing particles. Also, the legislation is unclear if the requirement that the plume scavenging system neutralize all plume "before plume can make ocular contact or contact with the respiratory tract of employees" refers to the plume system in isolation or working in concert with other engineering controls or equipment.

Second, the regulatory process set out by AB 1007 is a sharp departure from existing practice and law. Specifically, AB 1007 would require that the Division of Occupational Safety and Health (Cal/OSHA) develop a regulatory framework to address plume and then requires that the Occupational Safety and Health Standards Board (OSHSB) adopt the regulations from the division. Under Labor Code Section 142.3, the OSHSB has the authority to develop occupational safety standards, and failure to follow existing law could diminish hospitals' ability to work through the regulatory process to address patient

care and operational concerns.

Third, it is important to recognize that plume scavenging systems directly influence patient care decisions. Hospital leaders, alongside their clinician partners, select devices that may generate plume (including those that minimize exposure to plume) because of the patient care considerations. In situations where a plume scavenging system creates patient safety or care concerns, physicians and hospitals should not be asked to choose between best care practices and patient safety and compliance with the law. **This special concern about patient safety must be accounted for.**

Fourth, as currently drafted, AB 1007 would limit the use of respirators as a tool to comply with the plume regulatory standard. While existing plume standards discourage the use of surgical masks as a plume remediation tool, there is no evidence to support the prohibition of respirators as a compliance method. Respirators provide high levels of protection against numerous airborne contaminants. **The language restricting the use of respirators should be removed.**

To reiterate, hospitals are committed to employee and patient safety, and CHA stands ready to work with you to further mitigate the risk posed by plume in hospitals.

Sincerely,



Rony Berdugo
Vice President, State Relations

cc: The Honorable Liz Ortega
The Honorable Members of the Assembly Labor and Employment Committee
Martin Vindiola, Consultant, Assembly Emergency Management Committee
Lauren Prichard, Consultant, Assembly Republican Caucus