



## ISSUE MEMORANDUM

<b>DATE</b>	April 11, 2023
<b>TO</b>	Committee Members, California State Board of Optometry (CSBO)
<b>FROM</b>	Gregory Pruden, Executive Officer
<b>SUBJECT</b>	Agenda Item #5A – Discussion and Possible Action on Legislation: AB 1028

**BILL NUMBER:** AB 1028

**AUTHOR:** McKinnor

**BILL DATE:** February 15, 2023

**SUBJECT:** Reporting of crimes: mandated reporters

**SPONSOR:** Unknown

### DESCRIPTION OF CURRENT LEGISLATION:

This bill would, on and after January 1, 2025, eliminate the requirement that a health practitioner report to law enforcement when they suspect a patient has suffered physical injury caused by assault or abuse. In its place, the bill would require health practitioners who suspect that a patient is experiencing any form of domestic or sexual violence to provide brief counseling, education, or other support, and a warm handoff or referral to a local or national domestic or sexual violence advocacy services. The bill would exempt health practitioners from civil or criminal liability for any report made in good faith and in compliance with applicable state and federal laws.

### BACKGROUND:

This bill is a reintroduction of AB 2790 (Wicks), which was held in the Senate Appropriations Suspense File. Last year, this bill was supported by organizations such as the Alliance for Boys and Men of Color, Futures Without Violence, the UC Irvine Domestic Violence Law Clinic, and ACLU California Action who argued existing mandating reporting law dissuades many victims from seeking medical care or sharing information with health practitioners to avoid law enforcement involvement. The bill was opposed by the Academy of Forensic Nursing, California District Attorneys Association, California Police Chiefs Association, and the Board of Registered Nursing who argued the bill would lead to more domestic violence and have more serious consequences.

### ANALYSIS:

Under existing law, health practitioners employed by health facilities and other settings are required to report certain information to law enforcement officers. These reports are

mandatory if the practitioner suspects that a patient has suffered a physical injury that is either self-inflicted, caused by a firearm, or caused by assaultive or abusive conduct. This bill would maintain mandatory reporting requirements for self-inflicted or firearm injuries, but beginning January 1, 2025, it would eliminate the reporting requirements for suspected assaultive or abusive conduct.

In its place, health practitioners who know or reasonably suspect that a patient is the victim of domestic or sexual violence would instead be required to provide brief counseling, education, or other support to the degree that is medically possible for the patient. They must also offer a warm handoff or referral to domestic or sexual violence advocacy services. Practitioners could satisfy this requirement by connecting the patient with a survivor advocate, either in-person or via a call, or sharing information with the patient about how to get in touch with such organizations and letting patients know how they can help. Practitioners would not need to personally provide a handoff or referral, as the requirements would be met if such services are offered by a member of the health care team at the facility.

Although this bill would eliminate mandatory reporting in many instances, it would still allow health practitioners to make a report to law enforcement if they believe it is necessary to prevent or lessen a serious and imminent threat to the health or safety of the patient or the public. They could also make a report if they have the patient's consent.

FISCAL: None

SUPPORT: Likely to be previous supporters of AB 2790.

OPPOSITION: Likely to be previous opponents of AB 2790.

POSITION: Recommendation: Support

ATTACHMENT: [AB 1028 \(McKinnor\) Reporting of crimes: mandated reporters](#)  
[AB 2790 \(Wicks\) Reporting of crimes: mandated reporters](#)

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