128125. The Legislature finds that there is a need to improve the effectiveness of health care delivery systems. One way of accomplishing that objective is to utilize health care personnel in new roles and to reallocate health tasks to better meet the health needs of the citizenry. The Legislature finds that experimentation with new kinds and combinations of health care delivery systems is desirable, and that, for purposes of this experimentation, a select number of publicly evaluated health workforce pilot projects should be exempt from the healing arts practices acts. The Legislature also finds that large sums of public and private funds are being spent to finance health workforce innovation projects, and that the activities of some of these projects exceed the limitations of state law. These projects may jeopardize the public safety and the careers of persons who are trained in them. It is the intent of the Legislature to establish the accountability of health workforce innovation projects to the requirements of the public health, safety, and welfare, and the career viability of persons trained in these programs. Further, it is the intent of this legislation that existing healing arts licensure laws incorporate innovations developed in approved projects that are likely to improve the effectiveness of health care delivery systems.

128130. For the purposes of this article:
(a) "Office" means the Office of Statewide Health Planning and Development.
(b) "Approved project" means an educational or training program approved by the office that does any of the following on a pilot program basis:
(1) Teaches new skills to existing categories of health care personnel.
(2) Develops new categories of health care personnel.
(3) Accelerates the training of existing categories of health care personnel.
(4) Teaches new health care roles to previously untrained persons, and that has been so designated by the office.
(c) "Trainee" means a person to be taught health care skills.
(d) "Supervisor" means a person designated by the project sponsor who already possesses the skills to be taught the trainees and is certified or licensed in California to perform the health care tasks involving the skills.
(e) "Health care services" means the practice of medicine, dentistry, nursing, including, but not limited to, specialty areas of nursing such as midwifery, pharmacy, optometry, podiatry, and psychology.
128135. The office may designate experimental health workforce projects as approved projects where
the projects are sponsored by community hospitals or clinics, nonprofit educational institutions,
or government agencies engaged in health or education activities. Nothing in this section shall preclude
approved projects from utilizing the offices of physicians, dentists, pharmacists, and other
clinical settings as training sites.

128140. Notwithstanding any other provision of law, a trainee in an approved project may perform health
care services under the supervision of a supervisor where the general scope of the services
has been approved by the office.

128145. A trainee and his or her supervisor shall be held to the standard of care of, and shall be afforded
the same immunities as, an individual otherwise legally qualified to perform the health care
service or services performed by the trainee or supervisor.

128150. Any patient being seen or treated by a trainee shall be apprised of that fact and shall be given
the opportunity to refuse treatment. Consent to the treatment shall not constitute assumption
of the risk.

128155. The office, after one or more public hearings thereon, shall establish minimum standards,
guidelines, and instructions for pilot projects. Advance notice of the hearing shall be sent to all
interested parties and shall include a copy of the proposed minimum standards, guidelines, and
instructions.

Organizations requesting designation as approved projects shall complete and submit to the office an
application, that shall include a description of the project indicating the category of person to be
trained, the tasks to be taught, the numbers of trainees and supervisors, a description of the health care
agency to be used for training students, and a description of the types of patients likely to be seen or
treated. Additionally, the application shall contain a description of all of the following:
(a) The evaluation process to be used.
(b) The baseline data and information to be collected.
(c) The nature of program data that will be collected and the methods for collecting and analyzing the
data.
(d) Provision for protecting the safety of patients seen or treated in the project.
(e) A statement of previous experience in providing related health care services.

128160. (a) Pilot projects may be approved in the following fields:
(1) Expanded role medical auxiliaries.
(2) Expanded role nursing.
(3) Expanded role dental auxiliaries.
(4) Maternal child care personnel.
(5) Pharmacy personnel.
(6) Mental health personnel.
(7) Other health care personnel including, but not limited to, veterinary personnel, chiropractic personnel, podiatric personnel, geriatric care personnel, therapy personnel, and health care technicians.

(b) Projects that operate in rural and central city areas shall be given priority.

128165. The office shall carry out periodic onsite visitations of each approved project and shall evaluate each project to determine the following:

(a) The new health skills taught or extent that existing skills have been reallocated.
(b) Implication of the project for existing licensure laws with suggestions for changes in the law where appropriate.
(c) Implications of the project for health services curricula and for the health care delivery systems.
(d) Teaching methods used in the project.
(e) The quality of care and patient acceptance in the project.
(f) The extent that persons with the new skills could find employment in the health care system, assuming laws were changed to incorporate their skill.
(g) The cost of care provided in the project, the likely cost of this care if performed by the trainees subsequent to the project, and the cost for provision of this care by current providers thereof.

All data collected by the office and by projects approved pursuant to this article shall become public information, with due regard for the confidentiality of individual patient information. The raw data on which projects' reports are based and the data on which the office's evaluation is based shall be available on request for review by interested parties. The office shall provide a reasonable opportunity for interested parties to submit dissenting views or challenges to reports to the Legislature and professional licensing boards required by this section. The office shall publish those comments, subject only to nonsubstantive editing, as part of its annual, or any special, reports.

128170. The office shall approve a sufficient number of projects to provide a basis for testing the validity of the experiment.

128175. The office shall seek the advice of appropriate professional societies and appropriate healing arts licensing boards prior to designating approved projects. In the case of projects sponsored by a state agency, the following additional procedures shall apply:
(a) A hearing shall be conducted by a disinterested state government official selected by the director of the office from a state agency other than the office or the proponent of the project. The cost of the services of the disinterested state governmental official shall be paid by the office pursuant to an interagency agreement with the state agency represented by the state governmental official.

(b) A notice of hearing shall be sent by the office to interested parties, as designated by the director of the office, by registered mail no less than 30 days preceding the date of the hearing. The notice shall include, but not be limited to, the date, time, location, and subject matter of the hearing, and shall include a copy of the application for a pilot project that is the subject of the hearing.

(c) A verbatim transcript of the hearing shall be prepared and distributed to interested parties upon request.

(d) Within 60 days of the release of the transcript, the office shall submit a recommendation on the proposal to the director of the office and shall send copies to the interested parties.

(e) The director of the office shall accept comments on the recommendations, and, on or after 30 days after transmittal of the recommendations, the director of the office shall approve or disapprove the proposed project.

128180. The office shall not approve a project for a period lasting more than two training cycles plus a preceptorship of more than 24 months, unless the office determines that the project is likely to contribute substantially to the availability of high-quality health services in the state or a region thereof.

128185. The Legislature finds and declares all of the following:

(a) The Health Workforce Pilot Project No. 152 was approved in 1988 to respond to a shortage of adequately trained personnel to meet the needs of residents in long-term health care facilities.

(b) Long-term health care facilities continue to report difficulties recruiting and retaining adequate nursing staff to meet current needs.

(c) The population most in need of long-term care is growing rapidly. It is estimated by the year 2000, one-third of the entire population in the United States will be composed of persons over 65 years of age. Three-fourths of all residents of long-term health care facilities will be generated by this age group.

(d) A 30-percent decrease in the labor pool of health workers has been projected for the same time period. This decline in resources will exacerbate the problem of acquiring adequate nursing resources.

(e) The establishment of the geriatric technician as a new category of health worker may have the potential to increase the retention of experienced workers in long-term health care by creating health career opportunities and upward mobility for certified nurse assistants.

(f) The use of geriatric technicians is not intended to displace licensed nurses, but rather to augment the level of available trained staff to optimize the quality of long-term health care.
The office may extend the geriatric technician pilot project, known as the Health Workforce Pilot Project No. 152, for a minimum of four additional years, pursuant to reapplication by the sponsoring agency. The project shall continue to meet the applicable requirements established by the office. The number of sponsors authorized to participate in the pilot project may be expanded to a maximum of five.

(a) The office shall issue a report on the existing Health Workforce Pilot Project No. 152 that evaluates Sonoma County's experience with the project, by December 1, 1996. The report shall contain all of the following information:

1. A description of the persons trained, including, but not limited to, the following:
   - The total number of persons who entered training.
   - The total number of persons who completed training.
   - The selection method, including descriptions of any nonquantitative criteria used by employers to refer persons to training.
   - The education and experience of the trainees prior to training.
   - Demographic characteristics of the trainees, as available.

2. An analysis of the training completed, including, but not limited to, the following:
   - Curriculum and core competencies.
   - Qualifications of instructors.
   - Changes in the curriculum during the pilot project or recommended for the future.
   - Nature of clinical and didactic training, including ratio of students to instructors.

3. A summary of the specific services and the standards of care for tasks performed by geriatric technicians.

4. The new health skills taught or the extent to which existing skills have been reallocated.

5. Implication of the project for existing licensure laws with suggestions for changes in the law where appropriate.

6. Implications of the project for health services curricula and for health care delivery systems.

7. Teaching methods used in the project.

8. The quality of care, including pertinent medication errors, incident reports, and patient acceptance in the project.

9. The extent to which persons with new skills could find employment in the health care system, assuming laws were changed to incorporate their skills.

10. The cost of care provided in the project, the likely cost of this care if performed by the trainees subsequent to the project, and the cost for provision of this care by current providers.

(b) The office shall issue followup reports on additional geriatric technician pilot projects approved by the office following 24 months of implementation of the employment utilization phase of each project. The reports shall contain all of the following information:

1. A description of the persons trained, including, but not limited to, the following:
(A) The total number of persons who entered training.
(B) The total number of persons who completed training.
(C) The selection method, including descriptions of any nonquantitative criteria used by employers to refer persons to training.
(D) The education and experience of the trainees prior to training.
(E) Demographic characteristics of the trainees, as available.
(2) An analysis of the training completed, including, but not limited to, the following:
(A) Curriculum and core competencies.
(B) Qualifications of the instructor.
(C) Changes in the curriculum during the pilot project or recommended for the future.
(D) The nature of clinical and didactic training, including the ratio of students to instructors.
(3) A summary of the specific services provided by geriatric technicians.
(4) The new health skills taught or the extent to which existing skills have been reallocated.
(5) Implications of the project for existing licensure laws with suggestions for changes in the law where appropriate.
(6) Implications of the project for health services curricula and for health care delivery systems.
(7) Teaching methods used in the project.
(8) The quality of care, including pertinent medication errors, incident reports, and patient acceptance in the project.
(9) The extent to which persons with new skills could find employment in the health care system, assuming laws were changed to incorporate their skills.
(10) The cost of care provided in the project, the likely cost of this care if performed by the trainees subsequent to the project, and the cost for provision of this care by current providers thereof.
(c) Notwithstanding any other provision of law, issuance of the reports described in subdivisions (a) and (b) shall not require that the office terminate the Health Workforce Pilot Project No. 152 or subsequent geriatric technician pilot projects authorized by the office.