

## Expansion of Evidence Code §1157 Effective January 1, 2025

Insights

12.19.24

On September 20, 2024, California's Governor, Gavin Newsom, signed into law <u>AB2225</u> which takes effect January 1, 2025, and expands the confidential peer review discovery bar to prehospital emergency medical care persons and personnel review committees. Evidence Code § 1157 provides protection for peer review materials sought in civil discovery regarding specific types of medical professionals involved in the evaluation and improvement of quality of care. Those professionals currently include medical, medical-dental, podiatric, registered dietitians, psychological, marriage and family therapist, licensed clinical social worker, professional clinical counselor, pharmacist, and veterinary staffs in addition to peer review bodies as defined in Section 805 of the Business and Professions Code. The purpose behind the confidentiality protection of peer review records is to foster frank and open discussions about quality of care without those discussions then being utilized against providers in civil lawsuits.

Emergency Medical Services ("EMS") professionals were not explicitly included in Evidence Code § 1157 as originally drafted, meaning any peer review discussions regarding care provided prior to the patient arrival at the hospital could potentially be discoverable in civil cases. AB2225 now adds "prehospital emergency medical care person or personnel" to the covered professionals under Evidence Code § 1157. Health & Safety Code § 1797.188 defines "prehospital emergency medical care person or personnel" as "an authorized registered nurse or mobile intensive care nurse, emergency medical technician-I, emergency medical technician-II, emergency medical technician-paramedic, lifeguard, firefighter, or peace officer, . . ., or a physician and surgeon who provides prehospital emergency medical care or rescue services."

For those of you that provide EMS, the expanded confidentiality protections under Section 1157 allow for the peer review of this care provided by those professionals who participate in organized committees having the responsibility of evaluation and improvement of quality of care. This helps to ensure the highest and best possible patient care by encouraging more candor and robust open communications in the evaluation of quality of care.

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