UNFINISHED BUSINESS

Bill No: SB 1057
Author: Becker (D)
Amended: 8/21/26
Vote: 21

SENATE HEALTH COMMITTEE: 9-2, 4/8/26
AYES: Weber Pierson, Caballero, Durazo, Gonzalez, Menjivar, Padilla, Pérez, Rubio, Smallwood-Cuevas
NOES: Valladares, Grove

SENATE APPROPRIATIONS COMMITTEE: 5-2, 5/14/26
AYES: Cervantes, Cabaldon, Grayson, Richardson, Wahab
NOES: Seyarto, Dahle

SENATE FLOOR: 29-8, 5/26/26
AYES: Allen, Archuleta, Arreguín, Ashby, Becker, Blakespear, Cabaldon, Caballero, Cervantes, Cortese, Durazo, Grayson, Hurtado, Laird, Limón, McGuire, McNerney, Menjivar, Padilla, Pérez, Reyes, Richardson, Rubio, Smallwood-Cuevas, Stern, Umberg, Wahab, Weber Pierson, Wiener
NOES: Alvarado-Gil, Choi, Grove, Jones, Ochoa Bogh, Seyarto, Strickland, Valladares
NO VOTE RECORDED: Dahle, Gonzalez, Niello

ASSEMBLY FLOOR: 52-17, 8/25/26 - See last page for vote

SUBJECT: Licensing: certified nurse assistants and home health aides

SOURCE: Californians for Safety and Justice

DIGEST: This bill revises and recasts a portion of existing law governing the training and certification of certified nurse assistants and home health aides, specifically provisions related to the denial of an application for certification or training, or the suspension or revocation of certification, licensure, or renewal. Aligns these provisions of law for both professions with each other.

Assembly Amendments:

1) Clarify that an application may be denied if the applicant is presently incarcerated for, or was released from incarceration within the preceding seven years for, a crime directly or adversely related to the qualifications, functions, or duties of the role.

2) Expand the grounds for denial to include convictions or formal discipline for conduct involving financial abuse.

3) Allow the 48 hours of continuing education or in-service training documentation required for the renewal of a certified nurse assistant (CNA) license to be obtained through in-person instruction, online instruction, or other distance learning formats approved by the California Department of Public Health (CDPH).

ANALYSIS:

Existing law:

1) Provides for the certification of CNAs and home health aides (HHAs) by CDPH and establishes minimum qualifications and training requirements for CNAs and HHAs, including criminal record clearances. [Health and Safety Code (HSC) §1337.2 and §1736.1]

2) Requires a criminal record clearance to be conducted for all CNAs and HHAs by the submission of fingerprint images and related information to CDPH for processing at the Department of Justice (DOJ). Requires CDPH to issue an All Facilities Letter (AFL) when it receives 95% of total responses indicating no evidence of recorded criminal information from the DOJ and has processed 95% total responses requiring disqualification, no later than 45 days after the date that the report is received from the DOJ. [HSC §1338.5(a)(1)(A) and §1736.6(a)(1)]

3) Prohibits facilities, after the AFL is issued, from allowing trainees or newly hired CNA/HHAs to have direct contact with clients or residents prior to completion of the criminal record clearance. Makes a criminal record clearance complete when CDPH has obtained the person's criminal offender record information from the DOJ and has determined that the person is not disqualified from engaging in the activity for which clearance is required. [HSC §1338.5(a)(1)(B) and §1736.6(a)(2)]

4) Permits CDPH to deny an application for, initiate an action to suspend or revoke a certificate for, or deny a training and examination application for, a CNA/HHA for:
   a) Unprofessional conduct, as specified;
   b) Conviction of a crime substantially related to the qualifications, functions, and duties of a CNA/HHA if the state department determines that the applicant or certificate holder has not adequately demonstrated that they have been rehabilitated;
   c) Conviction for, or use of, any controlled substance, dangerous drug, or alcoholic beverages, to an extent or in a manner dangerous or injurious to the CNA/HHA, any other person, or the public, to the extent that this use would impair the ability to conduct, with safety to the public, the practice authorized by a certificate;
   d) Procuring a certificate by fraud or misrepresentation or mistake;
   e) Making or giving any false statement or information in conjunction with the application for issuance of a certificate or training and examination application;
   f) Impersonating any applicant, or acting as proxy for an applicant, in any examination required under this article for the issuance of a certificate;
   g) Impersonating another CNA/HHA, a licensed vocational nurse, or a registered nurse, or permitting or allowing another person to use a certificate for the purpose of providing nursing services; or
   h) Violating or attempting to violate, directly or indirectly, or assisting in or abetting the violating of, or conspiring to violate any provision or term of, existing law related to certification. [HSC §1337.9(b) and §1736.5(c)]

5) Requires CDPH to take specified factors as evidence of good character and rehabilitation in determining whether or not to deny a CNA/HHA application for licensure or renewal. [HSC §1337.9(c) and §1736.5(c)(2)]

6) Allows CDPH to deny, suspend, or revoke any license under the home health agency law due to violating applicable laws or regulations; aiding or permitting illegal acts; making a material misrepresentation in a license application; prior termination from the Medicare or Medi-Cal program due to noncompliance or license suspension or revocation; being on the U.S. Department of Health and Human Services Office of Inspector General's List of Excluded Individuals or Entities; failure by management personnel to cooperate in investigations or inspections; or failure by a home health agency to report a change in owner, management personnel, service area, or location. [HSC §1735]

This bill:

1) Revises and recasts a portion of existing law governing the training and certification of CNAs and HHAs, including provisions related to the denial of an application for certification or training, or the suspension or revocation of certification, licensure, or renewal. Aligns the two training and certification statutes with each other.

2) Deletes the requirement that 24 of the 48 hours of in-service training required for CNA license renewal be completed in-person. Clarifies that the in-service training required for CNA license renewal also includes continuing education. Permits a certificate holder to submit documentation of completion of 48 hours of continuing education or in-service training that may be obtained through in-person instruction, online instruction, or other distance learning formats approved by CDPH.

3) Permits CDPH to deny an application for, or deny a training and examination application for, a CNA/HHA on the grounds that the applicant has been convicted of a crime or has been subject to formal discipline if:
   a) The applicant has been convicted of a crime within the preceding seven years that is directly and adversely related to the qualifications, functions, or duties of a CNA/HHA, regardless of whether the applicant was incarcerated for that crime, or the applicant has been convicted of a crime that is directly or adversely related to the qualifications, functions, or duties of a CAN/HHA and for which the applicant is presently incarcerated or was released from incarceration within the preceding seven years*;*
   b) The applicant was convicted of a serious felony, as specified, a sex crime for which registration is required, or a misdemeanor or felony involving financial abuse, as defined;
   c) The applicant has been subjected to formal discipline by CDPH or a licensing board within the preceding seven years based on professional misconduct, as specified, that is directly and adversely related to the qualifications, functions, or duties of a CNA/HHA, unless the basis for discipline was a conviction that has been dismissed; or
   d) The applicant was subjected to formal discipline by CDPH or a licensing board for conduct involving financial abuse, as defined, or conduct that would have constituted an act of sexual abuse, misconduct, relations with a patient, or sexual exploitation, as specified.

4) Prohibits a person being denied a CNA/HHA certificate or training and examination application on the basis that the person has been convicted of a

crime, or on the basis of acts underlying a conviction for a crime, if that person has obtained a certificate of rehabilitation, has been granted clemency or a pardon by a state or federal executive, or has made a showing of good character and rehabilitation, as determined by CDPH.

5) Prohibits a person being denied a CNA/HHA certificate or training and examination application on the basis of any conviction, or on the basis of the acts underlying the conviction, that have been dismissed or expunged. Requires the applicant who has a conviction that has been dismissed to provide proof of that, if it is not reflected on the report furnished by the DOJ.

6) Prohibits a person from being denied a CNA/HHA certificate or training and examination application on the basis of an arrest that resulted in a disposition other than a conviction, including an arrest that resulted in an infraction, a citation, diversion, deferred entry of judgment, or a juvenile adjudication.

7) Permits CDPH to deny a CNA/HHA certificate or training and examination application on the grounds that the applicant knowingly made a false statement of fact that is required to be revealed in the application. Prohibits CDPH from denying a CNA/HHA certificate or training and examination application based solely on an applicant's failure to disclose a fact that would not have been cause for denial had it been disclosed.

8) Requires CDPH to follow specified procedures in requesting or acting on an applicant's criminal history information, as follows:
   a) Prohibits CDPH from requiring an applicant to disclose any information or documentation regarding the applicant's criminal history prior to obtaining the person's criminal offender record information search response information from the DOJ;
   b) Permits CDPH, after it has received the criminal offender record information, to request mitigating information from an applicant regarding their criminal history that is grounds for denial, for purposes of determining direct and adverse relation or demonstrating evidence of rehabilitation, provided that the applicant is informed that disclosure is voluntary and that the applicant's decision not to disclose any information will not be a factor in any decision to grant or deny a certificate for, or a training and examination application;
   c) Requires CDPH, if it decides to deny a training and examination application, to deny a certificate, or to revoke or suspend a certificate, to notify the

applicant in writing, in addition to the reason for the determination and the right to appeal the determination (required under existing law):
i) The procedure for the applicant to challenge the determination or to request reconsideration; and,
ii) The processes for the applicant to request a copy of their complete conviction history and question the accuracy or completeness of the record.

9) Deletes existing law that:
a) Allows CDPH to deny, suspend, or revoke any license under the home health agency law due to specified violations.
b) Permits the denial of a certification or training application, or the suspension or revocation of a certificate, based on a conviction for, or use of, controlled substances or alcoholic beverages, as specified.
c) Requires a CNA/HHA, whose application was denied or certificate was suspended or revoked on the basis of a criminal conviction, provide the CDPH with a certified copy of the judgment of each conviction.
d) Requires a CNA/HHA applicant, as part of the background clearance process, provide information as to whether they have any prior criminal convictions, any arrests within the past 12-month period, or any active arrests, and certify that, to the best of their knowledge, the information provided is true.

10) Makes other technical, clarifying changes.

Background

According to the author of this bill:

> This bill is a crucial step toward ensuring a fair opportunity for people with past records to pursue meaningful caregiving careers while also addressing California's direct care workforce shortage. People living with past convictions face lasting barriers to sustainable work, safe housing, education and other opportunities to succeed and care for their families. AB 2138 (Chiu, Chapter 995, Statutes of 2018) vastly improved the ability of people with a conviction history to navigate the occupational licensing process for a range of different boards and bureaus regulated by the Department of Consumer Affairs (DCA), which include registered and vocational nursing, physicians and surgeons, clinical social workers, counselors and many more. While these standards ensure a fair opportunity for people with records to obtain a range of DCA-

regulated patient care licenses, people seeking certifications regulated by CDPH for similar roles, such as CNAs and HHAs, are not afforded the same protections. This bill would close this gap and ensure that people with records seeking these certifications, including entry into training programs, are afforded the same opportunity as those seeking similar DCA-regulated patient care professions, and consideration of their past convictions be subject to the same standards already approved by the Legislature.

Direct care workers. HHAs and CNAs are categorized by the U.S. Bureau of Labor Statistics (BLS) as "direct care workers," which include HHAs, CNAs, and personal care aides. In general, personal care aides provide custodial care, while HHAs and CNAs provide both custodial and limited skilled care. According to a January 2023 California Health Care Foundation (CHCF) Issue Brief, direct care workers are paid to provide essential, hands-on, daily, and long-term assistance to older adults and people with disabilities. They work in a range of settings (from private homes to community and congregate settings), assisting their clients to maximize their quality of life and supporting their clients' ability to remain in their own homes or communities when possible. Many of California's direct care workers come from historically marginalized backgrounds: 80% are women, almost half (47%) are immigrants, and over three-quarters are people of color. According to the BLS, California had 978,490 direct care workers in May of 2024, including 875,110 personal care aides and HHAs (counted as a single category), and 102,380 CNAs.

Training requirements and licensure. Applicants for both CNA and HHA certificates must be at least 16 years old and have completed a CDPH-approved training program. CDPH maintains a list of approved HHA and CNA training programs, which are offered through community colleges, private nursing schools and career colleges, public school districts, and health care facilities. Beyond completing the training program and passing the competency evaluation examination, applicants for CNA and HHA certificates must obtain criminal record clearance from CDPH's Criminal Background Section. This process includes an applicant's disclosure of their criminal history and the submission of fingerprints to the DOJ. The DOJ provides the applicant's criminal records to CDPH, which reviews the information and examines supporting documentation from courts and law enforcement as necessary. Decisions are made on a case-by-case basis that consider the nature and severity of the crime, the amount of time since the most recent conviction, and any evidence of rehabilitation. CNA and HHA licenses must be renewed every two years and require disclosure of any criminal conviction or health-related licensing, certification, or disciplinary authority action.

Workforce shortages. According to the CHCF Issue Brief, over the next decade, demand for direct care workers will outpace supply in California. Growing demand is driven by an aging and increasingly diverse population, fewer working-aged adults and family caregivers to support this aging population, a growing desire to remain in home and community-based settings, and an increased need for complex care provided in facility-based long-term care settings. California's Employment Development Department ranks HHAs and personal care aides as the fifth-fastest growing occupation from 2023 to 2033, projecting a 31% growth to 1.8 million positions in 2033. CNAs are also projected to grow by 8.4% to 150,000 positions in 2033. Despite the increased demand, the Public Policy Institute of California reports that projected direct care workforce shortages range from 600,000 to over three million workers over the next decade. Several factors constrain the supply of direct care workers. Direct care work is physically and emotionally demanding, yet wages remain low (around $5 to $10 below the state median of $27.38/hour), with 26% of workers earning under 150% of the federal poverty level and 40% qualifying for CalFresh. A high proportion of part-time positions also contributes to burnout and exhaustion, as some direct care workers take on multiple part-time jobs or take extra shifts at night or on weekends.

SB 164 (Committee on Budget and Fiscal Review, Chapter 27, Statutes of 2026). The 2026 health budget trailer bill imposes a moratorium on the licensure of new home health agencies until 90 days following the effective date of revised regulations, and imposes other requirements on such agencies. Specifically, it allows CDPH to deny an application for, or suspend or revoke, a license under the home health agency law the following grounds: (1) a home health agency is owned, operated, or managed by an applicant or licensee terminated from the Medicare or Medi-Cal program due to noncompliance, or whose license was suspended or revoked; (2) the applicant or licensee is listed on the U.S. Department of Health and Human Services Office of Inspector General's List of Excluded Individuals/Entities; (3) agency management refuses to cooperate with an investigation or inspection; or (4) the agency fails to report a change in ownership, management personnel, service area, or location. This bill repeals this section.

FISCAL EFFECT: Appropriation: No Fiscal Com.: Yes Local: Yes

According to the Assembly Appropriations Committee, CDPH estimates annual costs of $251,000 in fiscal years 2027-28 through 2029-30 for one full-time equivalent position to develop regulations and for Office of Regulations services costs (Licensing and Certification Program Fund). No costs to the Department of Justice.

SUPPORT: (Verified 8/25/26)

Californians for Safety and Justice (source)
All of Us or None
California Association of Health Facilities
California Primary Care Association Advocates
Center for Caregiver Advancement
Center for Employment Opportunities
Community Legal Services in East Palo Alto
Courage California
Felony Murder Elimination Project
GLIDE
Legal Services for Prisoners with Children
Rubicon Program
San Francisco Public Defender
Transitions Clinic Network

OPPOSITION: (Verified 8/25/26)

None received

ARGUMENTS IN SUPPORT: Californians for Safety and Justice, the sponsors of the bill, state that Californians living with past convictions face lasting barriers to sustainable work, safe housing, education and other opportunities to succeed. The passage of AB 2138 improved the ability of those with a conviction history to navigate occupational licensing process for many boards within DCA but did not include CDPH-regulated CNA and HHA certification, professions that can provide a vital pathway to sustainable employment through accessible, short-term training programs. This bill would ensure that people with records seeking CNA or HHA certification are afforded the same opportunity as those in similar patient care professions, aligning the consideration of their past convictions to the same standards already approved by the legislature. These sentiments are echoed by organizing networks, social service providers, and criminal justice advocacy groups. The California Primary Care Association Advocates also share that community health centers often serve communities where individuals are seeking pathways to stable employment. By clarifying standards and due process protections in the CNA and HHA certification system, this bill will help community health centers recruit and retain critical staff to provide timely care, support aging populations, and address growing demand for home- and community-based services.

ASSEMBLY FLOOR: 52-17, 8/25/26
Ayes: Addis, Aguiar-Curry, Ahrens, Alvarez, Arambula, Ávila Farías, Bennett, Berman, Boerner, Bonta, Bryan, Calderon, Caloza, Carrillo, Connolly, Elhawary, Fong, Garcia, Gipson, Mark González, Haney, Harabedian, Hart, Irwin, Jackson, Kalra, Krell, Lee, Lowenthal, Muratsuchi, Nguyen, Ortega, Papan, Patel, Pellerin, Petrie-Norris, Quirk-Silva, Ransom, Celeste Rodriguez, Rogers, Schiavo, Schultz, Sharp-Collins, Solache, Soria, Stefani, Valencia, Ward, Wicks, Wilson, Zbur, Rivas
Noes: Alanis, Castillo, Chen, Davies, DeMaio, Dixon, Ellis, Jeff Gonzalez, Hadwick, Hoover, Johnson, Lackey, Macedo, Patterson, Ta, Tangipa, Wallis
No Vote Recorded: Bains, Bauer-Kahan, Flora, Gabriel, McKinnor, Pacheco, Ramos, Michelle Rodriguez, Blanca Rubio, Sanchez

Prepared by: Natalie Gehred / HEALTH / (916) 651-4111
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