

1 AN ACT concerning regulation.

2 **Be it enacted by the People of the State of Illinois,**
3 **represented in the General Assembly:**

4 Section 1. Short title. This Act may be cited as the Health
5 Care Violence Prevention Act.

6 Section 5. Definitions. As used in this Act:

7 "Committed person" means a person who is in the custody of
8 or under the control of a custodial agency, including, but not
9 limited to, a person who is incarcerated, under arrest,
10 detained, or otherwise under the physical control of a
11 custodial agency.

12 "Custodial agency" means the Illinois Department of
13 Corrections, the Illinois State Police, the sheriff of a
14 county, a county jail, a correctional institution, or any other
15 State agency, municipality, or unit of local government that
16 employs personnel designated as police, peace officers,
17 wardens, corrections officers, or guards or that employs
18 personnel vested by law with the power to place or maintain a
19 person in custody.

20 "Health care provider" means a retail health care facility,
21 a hospital subject to the Hospital Licensing Act or the
22 University of Illinois Hospital Act, or a veterans home as
23 defined in the Department of Veterans' Affairs Act.

1 "Health care worker" means nursing assistants and other
2 support personnel, any individual licensed under the laws of
3 this State to provide health services, including but not
4 limited to: dentists licensed under the Illinois Dental
5 Practice Act; dental hygienists licensed under the Illinois
6 Dental Practice Act; nurses and advanced practice registered
7 nurses licensed under the Nurse Practice Act; occupational
8 therapists licensed under the Illinois Occupational Therapy
9 Practice Act; optometrists licensed under the Illinois
10 Optometric Practice Act of 1987; pharmacists licensed under the
11 Pharmacy Practice Act; physical therapists licensed under the
12 Illinois Physical Therapy Act; physicians licensed under the
13 Medical Practice Act of 1987; physician assistants licensed
14 under the Physician Assistant Practice Act of 1987; podiatric
15 physicians licensed under the Podiatric Medical Practice Act of
16 1987; clinical psychologists licensed under the Clinical
17 Psychologist Licensing Act; clinical social workers licensed
18 under the Clinical Social Work and Social Work Practice Act;
19 speech-language pathologists and audiologists licensed under
20 the Illinois Speech-Language Pathology and Audiology Practice
21 Act; or hearing instrument dispensers licensed under the
22 Hearing Instrument Consumer Protection Act, or any of their
23 successor Acts.

24 "Nurse" means a person who is licensed to practice nursing
25 under the Nurse Practice Act.

26 "Retail health care facility" means an institution, place,

1 or building, or any portion thereof, that:

2 (1) is devoted to the maintenance and operation of a
3 facility for the performance of health care services and is
4 located within a retail store at a specific location;

5 (2) does not provide surgical services or any form of
6 general anesthesia;

7 (3) does not provide beds or other accommodations for
8 either the long-term or overnight stay of patients; and

9 (4) discharges individual patients in an ambulatory
10 condition without danger to the continued well-being of the
11 patients and transfers non-ambulatory patients to
12 hospitals.

13 "Retail health care facility" does not include hospitals,
14 long-term care facilities, ambulatory treatment centers, blood
15 banks, clinical laboratories, offices of physicians, advanced
16 practice registered nurses, podiatrists, and physician
17 assistants, and pharmacies that provide limited health care
18 services.

19 Section 10. Application. This Act applies to health care
20 providers and custodial agencies as defined in Section 5.

21 This Act does not apply to an owner of an institution,
22 place, building, or any portion of the institution, place, or
23 building, who directly or indirectly leases space that is used
24 by the lessee to operate a retail health care facility.

1 Section 15. Workplace safety.

2 (a) A health care worker who contacts law enforcement or
3 files a report with law enforcement against a patient or
4 individual because of workplace violence shall provide notice
5 to management of the health care provider by which he or she is
6 employed within 3 days after contacting law enforcement or
7 filing the report.

8 (b) No management of a health care provider may discourage
9 a health care worker from exercising his or her right to
10 contact law enforcement or file a report with law enforcement
11 because of workplace violence.

12 (c) A health care provider that employs a health care
13 worker shall display a notice stating that verbal aggression
14 will not be tolerated and physical assault will be reported to
15 law enforcement.

16 (d) The health care provider shall offer immediate
17 post-incident services for a health care worker directly
18 involved in a workplace violence incident caused by patients or
19 their visitors, including acute treatment and access to
20 psychological evaluation.

21 Section 20. Workplace violence prevention program.

22 (a) A health care provider shall create a workplace
23 violence prevention program that complies with the
24 Occupational Safety and Health Administration guidelines for
25 preventing workplace violence for health care and social

1 service workers as amended or updated by the Occupational
2 Safety and Health Administration.

3 (a-5) In addition, the workplace violence prevention
4 program shall include:

5 (1) the following classifications of workplace
6 violence as one of 4 possible types:

7 (A) "Type 1 violence" means workplace violence
8 committed by a person who has no legitimate business at
9 the work site and includes violent acts by anyone who
10 enters the workplace with the intent to commit a crime.

11 (B) "Type 2 violence" means workplace violence
12 directed at employees by customers, clients, patients,
13 students, inmates, visitors, or other individuals
14 accompanying a patient.

15 (C) "Type 3 violence" means workplace violence
16 against an employee by a present or former employee,
17 supervisor, or manager.

18 (D) "Type 4 violence" means workplace violence
19 committed in the workplace by someone who does not work
20 there, but has or is known to have had a personal
21 relationship with an employee.

22 (2) management commitment and worker participation,
23 including, but not limited to, nurses;

24 (3) worksite analysis and identification of potential
25 hazards;

26 (4) hazard prevention and control;

1 (5) safety and health training with required hours
2 determined by rule; and

3 (6) recordkeeping and evaluation of the violence
4 prevention program.

5 (b) The Department of Public Health may by rule adopt
6 additional criteria for workplace violence prevention
7 programs.

8 Section 25. Whistleblower protection. The Whistleblower
9 Act applies to health care providers and their employees with
10 respect to actions taken to implement or enforce compliance
11 with this Act.

12 Section 30. Medical care for committed persons.

13 (a) If a committed person receives medical care and
14 treatment at a place other than an institution or facility of
15 the Department of Corrections, a county, or a municipality,
16 then the institution or facility shall:

17 (1) to the greatest extent practicable, notify the
18 hospital or medical facility that is treating the committed
19 person prior to the committed person's visit and notify the
20 hospital or medical facility of any significant medical,
21 mental health, recent violent actions, or other safety
22 concerns regarding the patient;

23 (2) to the greatest extent practicable, ensure the
24 transferred committed person is accompanied by the most

1 comprehensive medical records possible;

2 (3) provide at least one guard trained in custodial
3 escort and custody of high-risk committed persons to
4 accompany any committed person. The custodial agency shall
5 attest to such training for custodial escort and custody of
6 high-risk committed persons through: (A) the training of
7 the Department of Corrections or Department of Juvenile
8 Justice; (B) law enforcement training that is
9 substantially equivalent to the training of the Department
10 of Corrections or Department of Juvenile Justice; or (C)
11 the training described in Section 35. Under no
12 circumstances may leg irons or shackles or waist shackles
13 be used on any pregnant female prisoner who is in labor. In
14 addition, restraint of a pregnant female prisoner in the
15 custody of the Cook County shall comply with Section
16 3-15003.6 of the Counties Code. Additionally, restraints
17 shall not be used on a committed person if medical
18 personnel determine that the restraints would impede
19 medical treatment; and

20 (4) ensure that only medical personnel, Department of
21 Corrections, county, or municipality personnel, and
22 visitors on the committed person's approved institutional
23 visitors list may visit the committed person. Visitation by
24 a person on the committed person's approved institutional
25 visitors list shall be subject to the rules and procedures
26 of the hospital or medical facility and the Department of

1 Corrections, county, or municipality. In any situation in
2 which a committed person is being visited:

3 (A) the name of the visitor must be listed per the
4 facility's or institution's documentation;

5 (B) the visitor shall submit to the search of his
6 or her person or any personal property under his or her
7 control at any time; and

8 (C) the custodial agency may deny the committed
9 person access to a telephone or limit the number of
10 visitors the committed person may receive for purposes
11 of safety.

12 If a committed person receives medical care and treatment
13 at a place other than an institution or facility of the
14 Department of Corrections, county, or municipality, then the
15 custodial agency shall ensure that the committed person is
16 wearing security restraints in accordance with the custodial
17 agency's rules and procedures if the custodial agency
18 determines that restraints are necessary for the following
19 reasons: (i) to prevent physical harm to the committed person
20 or another person; (ii) because the committed person has a
21 history of disruptive behavior that has placed others in
22 potentially harmful situations or presents a substantial risk
23 of inflicting physical harm on himself or herself or others as
24 evidenced by recent behavior; or (iii) there is a well-founded
25 belief that the committed person presents a substantial risk of
26 flight. Under no circumstances may leg irons or shackles or

1 waist shackles be used on any pregnant female prisoner who is
2 in labor. In addition, restraint of a pregnant female prisoner
3 in the custody of the Cook County shall comply with Section
4 3-15003.6 of the Counties Code.

5 The hospital or medical facility may establish protocols
6 for the receipt of committed persons in collaboration with the
7 Department of Corrections, county, or municipality,
8 specifically with regard to potentially violent persons.

9 (b) If a committed person receives medical care and
10 treatment at a place other than an institution or facility of
11 the Department of Juvenile Justice, then the institution or
12 facility shall:

13 (1) to the greatest extent practicable, notify the
14 hospital or medical facility that is treating the committed
15 person prior to the committed person's visit, and notify
16 the hospital or medical facility of any significant
17 medical, mental health, recent violent actions, or other
18 safety concerns regarding the patient;

19 (2) to the greatest extent practicable, ensure the
20 transferred committed person is accompanied by the most
21 comprehensive medical records possible;

22 (3) provide: (A) at least one guard trained in
23 custodial escort and custody of high-risk committed
24 persons to accompany any committed person. The custodial
25 agency shall attest to such training for custodial escort
26 and custody of high-risk committed persons through: (i) the

1 training of the Department of Corrections or Department of
2 Juvenile Justice, (ii) law enforcement training that is
3 substantially equivalent to the training of the Department
4 of Corrections or Department of Juvenile Justice, or (iii)
5 the training described in Section 35; or (B) 2 guards to
6 accompany the committed person at all times during the
7 visit to the hospital or medical facility; and

8 (4) ensure that only medical personnel, Department of
9 Juvenile Justice personnel, and visitors on the committed
10 person's approved institutional visitors list may visit
11 the committed person. Visitation by a person on the
12 committed person's approved institutional visitors list
13 shall be subject to the rules and procedures of the
14 hospital or medical facility and the Department of Juvenile
15 Justice. In any situation in which a committed person is
16 being visited:

17 (A) the name of the visitor must be listed per the
18 facility's or institution's documentation;

19 (B) the visitor shall submit to the search of his
20 or her person or any personal property under his or her
21 control at any time; and

22 (C) the custodial agency may deny the committed
23 person access to a telephone or limit the number of
24 visitors the committed person may receive for purposes
25 of safety.

26 If a committed person receives medical care and treatment

1 at a place other than an institution or facility of the
2 Department of Juvenile Justice, then the Department of Juvenile
3 Justice shall ensure that the committed person is wearing
4 security restraints on either his or her wrists or ankles in
5 accordance with the rules and procedures of the Department of
6 Juvenile Justice if the Department of Juvenile Justice
7 determines that restraints are necessary for the following
8 reasons: (i) to prevent physical harm to the committed person
9 or another person; (ii) because the committed person has a
10 history of disruptive behavior that has placed others in
11 potentially harmful situations or presents a substantial risk
12 of inflicting physical harm on himself or herself or others as
13 evidenced by recent behavior; or (iii) there is a well-founded
14 belief that the committed person presents a substantial risk of
15 flight. Any restraints used on a committed person under this
16 paragraph shall be the least restrictive restraints necessary
17 to prevent flight or physical harm to the committed person or
18 another person. Restraints shall not be used on the committed
19 person as provided in this paragraph if medical personnel
20 determine that the restraints would impede medical treatment.
21 Under no circumstances may leg irons or shackles or waist
22 shackles be used on any pregnant female prisoner who is in
23 labor. In addition, restraint of a pregnant female prisoner in
24 the custody of the Cook County shall comply with Section
25 3-15003.6 of the Counties Code.

26 The hospital or medical facility may establish protocols

1 for the receipt of committed persons in collaboration with the
2 Department of Juvenile Justice, specifically with regard to
3 persons recently exhibiting violence.

4 Section 35. Custodial agency training. The Illinois Law
5 Enforcement Training Standards Board shall establish a
6 curriculum for custodial escort and custody of high-risk
7 committed persons certification, which shall include, but not
8 be limited to, the following:

- 9 (1) handcuffing or shackling of a high-risk committed
10 person;
- 11 (2) mobile transportation of a committed person with
12 defense from the committed person's attack;
- 13 (3) outside facility threat assessment;
- 14 (4) hands-on weapons retention training; and
- 15 (5) custodial considerations for a high-risk committed
16 person in outside facilities.

17 Section 90. The State Police Act is amended by adding
18 Section 45 as follows:

19 (20 ILCS 2610/45 new)

20 Sec. 45. Compliance with the Health Care Violence
21 Prevention Act. The Department shall comply with the Health
22 Care Violence Prevention Act.

1 Section 95. The Department of Veterans' Affairs Act is
2 amended by changing Section 2.07 as follows:

3 (20 ILCS 2805/2.07) (from Ch. 126 1/2, par. 67.07)

4 Sec. 2.07. The Department shall employ and maintain
5 sufficient and qualified staff at the veterans' homes (i) to
6 fill all beds, subject to appropriation, and (ii) to fulfill
7 the requirements of this Act. The Department shall report to
8 the General Assembly, by January 1 and July 1 of each year, the
9 number of staff employed in providing direct patient care at
10 their veterans' homes, the compliance or noncompliance with
11 staffing standards established by the United States Department
12 of Veterans Affairs for such care, and in the event of
13 noncompliance with such standards, the number of staff required
14 for compliance. For purposes of this Section, a nurse who has a
15 license application pending with the State shall not be deemed
16 unqualified by the Department if the nurse is in compliance
17 with Section 50-15 of the Nurse Practice Act.

18 A veterans home is subject to the Health Care Violence
19 Prevention Act.

20 (Source: P.A. 96-699, eff. 8-25-09; 97-297, eff. 1-1-12.)

21 Section 100. The University of Illinois Hospital Act is
22 amended by adding Section 10 as follows:

23 (110 ILCS 330/10 new)

1 Sec. 10. Compliance with the Health Care Violence
2 Prevention Act. The University of Illinois Hospital shall
3 comply with the Health Care Violence Prevention Act.

4 Section 105. The Hospital Licensing Act is amended by
5 adding Section 9.8 as follows:

6 (210 ILCS 85/9.8 new)

7 Sec. 9.8. Compliance with the Health Care Violence
8 Prevention Act. A hospital licensed under this Act shall comply
9 with the Health Care Violence Prevention Act.

10 Section 110. The Unified Code of Corrections is amended by
11 changing Section 3-6-2 as follows:

12 (730 ILCS 5/3-6-2) (from Ch. 38, par. 1003-6-2)

13 Sec. 3-6-2. Institutions and Facility Administration.

14 (a) Each institution and facility of the Department shall
15 be administered by a chief administrative officer appointed by
16 the Director. A chief administrative officer shall be
17 responsible for all persons assigned to the institution or
18 facility. The chief administrative officer shall administer
19 the programs of the Department for the custody and treatment of
20 such persons.

21 (b) The chief administrative officer shall have such
22 assistants as the Department may assign.

1 (c) The Director or Assistant Director shall have the
2 emergency powers to temporarily transfer individuals without
3 formal procedures to any State, county, municipal or regional
4 correctional or detention institution or facility in the State,
5 subject to the acceptance of such receiving institution or
6 facility, or to designate any reasonably secure place in the
7 State as such an institution or facility and to make transfers
8 thereto. However, transfers made under emergency powers shall
9 be reviewed as soon as practicable under Article 8, and shall
10 be subject to Section 5-905 of the Juvenile Court Act of 1987.
11 This Section shall not apply to transfers to the Department of
12 Human Services which are provided for under Section 3-8-5 or
13 Section 3-10-5.

14 (d) The Department shall provide educational programs for
15 all committed persons so that all persons have an opportunity
16 to attain the achievement level equivalent to the completion of
17 the twelfth grade in the public school system in this State.
18 Other higher levels of attainment shall be encouraged and
19 professional instruction shall be maintained wherever
20 possible. The Department may establish programs of mandatory
21 education and may establish rules and regulations for the
22 administration of such programs. A person committed to the
23 Department who, during the period of his or her incarceration,
24 participates in an educational program provided by or through
25 the Department and through that program is awarded or earns the
26 number of hours of credit required for the award of an

1 associate, baccalaureate, or higher degree from a community
2 college, college, or university located in Illinois shall
3 reimburse the State, through the Department, for the costs
4 incurred by the State in providing that person during his or
5 her incarceration with the education that qualifies him or her
6 for the award of that degree. The costs for which reimbursement
7 is required under this subsection shall be determined and
8 computed by the Department under rules and regulations that it
9 shall establish for that purpose. However, interest at the rate
10 of 6% per annum shall be charged on the balance of those costs
11 from time to time remaining unpaid, from the date of the
12 person's parole, mandatory supervised release, or release
13 constituting a final termination of his or her commitment to
14 the Department until paid.

15 (d-5) A person committed to the Department is entitled to
16 confidential testing for infection with human immunodeficiency
17 virus (HIV) and to counseling in connection with such testing,
18 with no copay to the committed person. A person committed to
19 the Department who has tested positive for infection with HIV
20 is entitled to medical care while incarcerated, counseling, and
21 referrals to support services, in connection with that positive
22 test result. Implementation of this subsection (d-5) is subject
23 to appropriation.

24 (e) A person committed to the Department who becomes in
25 need of medical or surgical treatment but is incapable of
26 giving consent thereto shall receive such medical or surgical

1 treatment by the chief administrative officer consenting on the
2 person's behalf. Before the chief administrative officer
3 consents, he or she shall obtain the advice of one or more
4 physicians licensed to practice medicine in all its branches in
5 this State. If such physician or physicians advise:

6 (1) that immediate medical or surgical treatment is
7 required relative to a condition threatening to cause
8 death, damage or impairment to bodily functions, or
9 disfigurement; and

10 (2) that the person is not capable of giving consent to
11 such treatment; the chief administrative officer may give
12 consent for such medical or surgical treatment, and such
13 consent shall be deemed to be the consent of the person for
14 all purposes, including, but not limited to, the authority
15 of a physician to give such treatment.

16 (e-5) If a physician providing medical care to a committed
17 person on behalf of the Department advises the chief
18 administrative officer that the committed person's mental or
19 physical health has deteriorated as a result of the cessation
20 of ingestion of food or liquid to the point where medical or
21 surgical treatment is required to prevent death, damage, or
22 impairment to bodily functions, the chief administrative
23 officer may authorize such medical or surgical treatment.

24 (f) In the event that the person requires medical care and
25 treatment at a place other than the institution or facility,
26 the person may be removed therefrom under conditions prescribed

1 by the Department. The Department shall require the committed
2 person receiving medical or dental services on a non-emergency
3 basis to pay a \$5 co-payment to the Department for each visit
4 for medical or dental services. The amount of each co-payment
5 shall be deducted from the committed person's individual
6 account. A committed person who has a chronic illness, as
7 defined by Department rules and regulations, shall be exempt
8 from the \$5 co-payment for treatment of the chronic illness. A
9 committed person shall not be subject to a \$5 co-payment for
10 follow-up visits ordered by a physician, who is employed by, or
11 contracts with, the Department. A committed person who is
12 indigent is exempt from the \$5 co-payment and is entitled to
13 receive medical or dental services on the same basis as a
14 committed person who is financially able to afford the
15 co-payment. For purposes of this Section only, "indigent" means
16 a committed person who has \$20 or less in his or her Inmate
17 Trust Fund at the time of such services and for the 30 days
18 prior to such services. Notwithstanding any other provision in
19 this subsection (f) to the contrary, any person committed to
20 any facility operated by the Department of Juvenile Justice, as
21 set forth in Section 3-2.5-15 of this Code, is exempt from the
22 co-payment requirement for the duration of confinement in those
23 facilities.

24 (f-5) The Department shall comply with the Health Care
25 Violence Prevention Act.

26 (g) Any person having sole custody of a child at the time

1 of commitment or any woman giving birth to a child after her
2 commitment, may arrange through the Department of Children and
3 Family Services for suitable placement of the child outside of
4 the Department of Corrections. The Director of the Department
5 of Corrections may determine that there are special reasons why
6 the child should continue in the custody of the mother until
7 the child is 6 years old.

8 (h) The Department may provide Family Responsibility
9 Services which may consist of, but not be limited to the
10 following:

11 (1) family advocacy counseling;

12 (2) parent self-help group;

13 (3) parenting skills training;

14 (4) parent and child overnight program;

15 (5) parent and child reunification counseling, either
16 separately or together, preceding the inmate's release;
17 and

18 (6) a prerelease reunification staffing involving the
19 family advocate, the inmate and the child's counselor, or
20 both and the inmate.

21 (i) (Blank).

22 (j) Any person convicted of a sex offense as defined in the
23 Sex Offender Management Board Act shall be required to receive
24 a sex offender evaluation prior to release into the community
25 from the Department of Corrections. The sex offender evaluation
26 shall be conducted in conformance with the standards and

1 guidelines developed under the Sex Offender Management Board
2 Act and by an evaluator approved by the Board.

3 (k) Any minor committed to the Department of Juvenile
4 Justice for a sex offense as defined by the Sex Offender
5 Management Board Act shall be required to undergo sex offender
6 treatment by a treatment provider approved by the Board and
7 conducted in conformance with the Sex Offender Management Board
8 Act.

9 (l) Prior to the release of any inmate committed to a
10 facility of the Department or the Department of Juvenile
11 Justice, the Department must provide the inmate with
12 appropriate information verbally, in writing, by video, or
13 other electronic means, concerning HIV and AIDS. The Department
14 shall develop the informational materials in consultation with
15 the Department of Public Health. At the same time, the
16 Department must also offer the committed person the option of
17 testing for infection with human immunodeficiency virus (HIV),
18 with no copayment for the test. Pre-test information shall be
19 provided to the committed person and informed consent obtained
20 as required in subsection (d) of Section 3 and Section 5 of the
21 AIDS Confidentiality Act. The Department may conduct opt-out
22 HIV testing as defined in Section 4 of the AIDS Confidentiality
23 Act. If the Department conducts opt-out HIV testing, the
24 Department shall place signs in English, Spanish and other
25 languages as needed in multiple, highly visible locations in
26 the area where HIV testing is conducted informing inmates that

1 they will be tested for HIV unless they refuse, and refusal or
2 acceptance of testing shall be documented in the inmate's
3 medical record. The Department shall follow procedures
4 established by the Department of Public Health to conduct HIV
5 testing and testing to confirm positive HIV test results. All
6 testing must be conducted by medical personnel, but pre-test
7 and other information may be provided by committed persons who
8 have received appropriate training. The Department, in
9 conjunction with the Department of Public Health, shall develop
10 a plan that complies with the AIDS Confidentiality Act to
11 deliver confidentially all positive or negative HIV test
12 results to inmates or former inmates. Nothing in this Section
13 shall require the Department to offer HIV testing to an inmate
14 who is known to be infected with HIV, or who has been tested
15 for HIV within the previous 180 days and whose documented HIV
16 test result is available to the Department electronically. The
17 testing provided under this subsection (1) shall consist of a
18 test approved by the Illinois Department of Public Health to
19 determine the presence of HIV infection, based upon
20 recommendations of the United States Centers for Disease
21 Control and Prevention. If the test result is positive, a
22 reliable supplemental test based upon recommendations of the
23 United States Centers for Disease Control and Prevention shall
24 be administered.

25 Prior to the release of an inmate who the Department knows
26 has tested positive for infection with HIV, the Department in a

1 timely manner shall offer the inmate transitional case
2 management, including referrals to other support services.

3 (m) The chief administrative officer of each institution or
4 facility of the Department shall make a room in the institution
5 or facility available for addiction recovery services to be
6 provided to committed persons on a voluntary basis. The
7 services shall be provided for one hour once a week at a time
8 specified by the chief administrative officer of the
9 institution or facility if the following conditions are met:

10 (1) the addiction recovery service contacts the chief
11 administrative officer to arrange the meeting;

12 (2) the committed person may attend the meeting for
13 addiction recovery services only if the committed person
14 uses pre-existing free time already available to the
15 committed person;

16 (3) all disciplinary and other rules of the institution
17 or facility remain in effect;

18 (4) the committed person is not given any additional
19 privileges to attend addiction recovery services;

20 (5) if the addiction recovery service does not arrange
21 for scheduling a meeting for that week, no addiction
22 recovery services shall be provided to the committed person
23 in the institution or facility for that week;

24 (6) the number of committed persons who may attend an
25 addiction recovery meeting shall not exceed 40 during any
26 session held at the correctional institution or facility;

1 (7) a volunteer seeking to provide addiction recovery
2 services under this subsection (m) must submit an
3 application to the Department of Corrections under
4 existing Department rules and the Department must review
5 the application within 60 days after submission of the
6 application to the Department; and

7 (8) each institution and facility of the Department
8 shall manage the addiction recovery services program
9 according to its own processes and procedures.

10 For the purposes of this subsection (m), "addiction
11 recovery services" means recovery services for alcoholics and
12 addicts provided by volunteers of recovery support services
13 recognized by the Department of Human Services.

14 (Source: P.A. 96-284, eff. 1-1-10; 97-244, eff. 8-4-11; 97-323,
15 eff. 8-12-11; 97-562, eff. 1-1-12; 97-802, eff. 7-13-12;
16 97-813, eff. 7-13-12.)

17 Section 115. The County Jail Act is amended by changing
18 Section 17.5 and by adding Section 17.15 as follows:

19 (730 ILCS 125/17.5)

20 Sec. 17.5. Pregnant female prisoners. Notwithstanding any
21 other statute, directive, or administrative regulation, when a
22 pregnant female prisoner is brought to a hospital from a county
23 jail for the purpose of delivering her baby, no handcuffs,
24 shackles, or restraints of any kind may be used during her

1 transport to a medical facility for the purpose of delivering
2 her baby. Under no circumstances may leg irons or shackles or
3 waist shackles be used on any pregnant female prisoner who is
4 in labor. In addition, restraint of a pregnant female prisoner
5 in the custody of the Cook County shall comply with Section
6 3-15003.6 of the Counties Code. Upon the pregnant female
7 prisoner's entry to the hospital delivery room, 2 ~~a~~ county
8 correctional officers ~~officer~~ must be posted immediately
9 outside the delivery room. The Sheriff must provide for
10 adequate personnel to monitor the pregnant female prisoner
11 during her transport to and from the hospital and during her
12 stay at the hospital.

13 (Source: P.A. 91-253, eff. 1-1-00.)

14 (730 ILCS 125/17.15 new)

15 Sec. 17.15. Compliance with the Health Care Violence
16 Prevention Act. The sheriff or warden of the jail shall comply
17 with the Health Care Violence Prevention Act.