



101ST GENERAL ASSEMBLY

State of Illinois

2019 and 2020

SB1908

Introduced 2/15/2019, by Sen. Cristina Castro

SYNOPSIS AS INTRODUCED:

New Act

Creates the Safe Patient Limits Act. Provides the maximum number of patients that may be assigned to a registered nurse in specified situations. Provides that nothing shall preclude a facility from assigning fewer patients to a registered nurse than the limits provided in Act. Provides that nothing in the Act precludes the use of patient acuity systems consistent with the Nurse Staffing by Patient Acuity Act; however, the maximum patient assignments in the Act may not be exceeded, regardless of the use and application of any patient acuity system. Provides that the Department of Public Health shall adopt rules governing the implementation and operation of the Act. Provides that all facilities shall adopt written policies and procedures for training and orientation of nursing staff and that no registered nurse shall be assigned to a nursing unit or clinical area unless that nurse has, among other things, demonstrated competence in providing care in that area. Provides that the written policies and procedures for the training and orientation of nursing staff shall require that all temporary personnel receive the same amount and type of training and orientation that is required for permanent staff. Provides that the Act's provisions are severable.

LRB101 08484 CPF 53561 b

FISCAL NOTE ACT
MAY APPLY

A BILL FOR

1 AN ACT concerning health.

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 Safe
5 Patient Limits Act.

6 Section 5. Definitions. In this Act:

7 "Couplet" means one mother and one baby.

8 "Critical trauma patient" means a patient who has an injury
9 to an anatomic area that (i) requires life-saving
10 interventions, or (ii) in conjunction with unstable vital
11 signs, poses an immediate threat to life or limb.

12 "Department" means the Department of Public Health.

13 "Facility" means a hospital licensed under the Hospital
14 Licensing Act or organized under the University of Illinois
15 Hospital Act, a private or State-owned and State-operated
16 general acute care hospital, an acute psychiatric hospital, an
17 acute care specialty hospital, or an acute care unit within a
18 health care facility.

19 "Health care workforce" means personnel employed by or
20 contracted to work at a facility that have an effect upon the
21 delivery of quality care to patients, including, but not
22 limited to, registered nurses, licensed practical nurses,
23 unlicensed assistive personnel, service, maintenance,

1 clerical, professional, and technical workers, and other
2 health care workers.

3 "Immediate postpartum patients" means those patients who
4 have given birth within the previous 2 hours.

5 "Nursing care" means care that falls within the scope of
6 practice as defined in the Illinois Nurse Practice Act or is
7 otherwise encompassed within recognized standards of nursing
8 practice, including assessment, nursing diagnosis, planning,
9 intervention, evaluation, and patient advocacy.

10 "Specialty care unit" means a unit which is organized,
11 operated, and maintained to provide care for a specific medical
12 condition or a specific patient population.

13 For the purposes of this Act, a patient is considered
14 assigned to a registered nurse if the registered nurse accepts
15 responsibility for the patient's nursing care.

16 Section 10. Maximum patient assignments for registered
17 nurses.

18 (a) The maximum number of patients assigned to a registered
19 nurse in a facility shall not exceed the limits provided in
20 this Section. However, nothing shall preclude a facility from
21 assigning fewer patients to a registered nurse than the limits
22 provided in this Section.

23 (b) In all units with critical care patients, the maximum
24 patient assignment of critical care patients to a registered
25 nurse is 2.

1 (c) In all units with step-down or intermediate care
2 patients, the maximum patient assignment of step-down or
3 intermediate care patients to a registered nurse is 3.

4 (d) In all units with postanesthesia care patients, the
5 maximum patient assignment of postanesthesia care patients
6 under the age of 18 to a registered nurse is one. The maximum
7 patient assignment of postanesthesia care patients 18 years of
8 age or older to a registered nurse is 2.

9 (e) In all units with operating room patients, the maximum
10 patient assignment of operating room patients to a registered
11 nurse is one, provided that a minimum of one additional person
12 serves as a scrub assistant for each patient.

13 (f) In the emergency department:

14 (1) In a unit providing basic emergency medical
15 services or comprehensive emergency medical services, the
16 maximum patient assignment at any time to a registered
17 nurse is 3.

18 (2) The maximum assignment of critical care emergency
19 patients to a registered nurse is 2. A patient in the
20 emergency department shall be considered a critical care
21 patient when the patient meets the criteria for admission
22 to a critical care service area within the hospital.

23 (3) The maximum assignment of critical trauma patients
24 in an emergency unit to a registered nurse is one.

25 (g) In all units with maternal child care patients:

26 (1) The maximum patient assignment to a registered

1 nurse of antepartum patients requiring continuous fetal
2 monitoring is 2.

3 (2) The maximum patient assignment of other antepartum
4 patients to a registered nurse is 3.

5 (3) The maximum patient assignment of active labor
6 patients to a registered nurse is one.

7 (4) The maximum patient assignment during birth is one
8 registered nurse responsible for the mother and, for each
9 baby born, one registered nurse whose sole responsibility
10 is that baby.

11 (5) The maximum patient assignment of immediate
12 postpartum patients is one couplet, and in the case of
13 multiple births, one nurse for each additional baby.

14 (6) The maximum patient assignment of postpartum
15 patients to a registered nurse is 6 patients or 3 couplets.

16 (h) In all units with pediatric patients, the maximum
17 patient assignment of pediatric patients to a registered nurse
18 is 4.

19 (i) In all units with psychiatric patients, the maximum
20 patient assignment of psychiatric patients to a registered
21 nurse is 4.

22 (j) In all units with medical and surgical patients, the
23 maximum patient assignment of medical or surgical patients to a
24 registered nurse is 4.

25 (k) In all units with telemetry patients, the maximum
26 patient assignment of telemetry patients to a registered nurse

1 is 3.

2 (l) In all units with observational patients, the maximum
3 patient assignment of observational patients to a registered
4 nurse is 4.

5 (m) In all units with acute rehabilitation patients, the
6 maximum patient assignment of acute rehabilitation patients to
7 a registered nurse is 3.

8 (n) In all specialty care units, the maximum patient
9 assignment to a registered nurse is 4.

10 (o) In any unit not otherwise listed in this Section, the
11 maximum patient assignment to a registered nurse is 4.

12 Section 15. Implementation by a facility. A facility shall
13 implement the patient limits established by Section 10 without
14 diminishing the staffing levels of the facility's health care
15 workforce.

16 Section 20. Implementation by the Department. The
17 Department shall adopt rules governing the implementation and
18 operation of this Act.

19 Section 25. Patient acuity systems. Nothing in this Act
20 precludes the use of patient acuity systems consistent with
21 Section 10.10 of the Hospital Licensing Act. However, the
22 maximum patient assignments in Section 10 shall not be exceeded
23 regardless of the use and application of any patient acuity

1 system.

2 Section 30. Training. All facilities shall adopt written
3 policies and procedures for the training and orientation of
4 nursing staff. No registered nurse shall be assigned to a
5 nursing unit or clinical area unless that nurse has first
6 received training and orientation in that clinical area that is
7 sufficient to provide competent care to patients in that area
8 and has demonstrated competence in providing care in that area.
9 The written policies and procedures for that training and
10 orientation of nursing staff shall require that all temporary
11 personnel receive the same amount and type of training and
12 orientation that is required for permanent staff.

13 Section 35. Enforcement. A facility's failure to adhere to
14 the limits set by Section 10 shall be reported by the
15 Department to the Attorney General for enforcement, for which
16 the Attorney General may bring action in a court of competent
17 jurisdiction seeking injunctive relief and civil penalties. A
18 separate and distinct violation, for which the facility shall
19 be subject to a civil penalty of up to \$25,000, shall be deemed
20 to have been committed on each day during which any violation
21 continues after receipt of written notice of the violation from
22 the Department by the facility. The requirements of this Act,
23 and its enforcement, shall be suspended during a public health
24 emergency declared by the State or federal government.

1 Section 40. Severability. The provisions of this Act are
2 severable, and if any clause, sentence, paragraph, subsection,
3 or Section of this law or any application thereof shall be
4 adjudged by any court of competent jurisdiction to be invalid,
5 such judgment shall not affect, impair, or invalidate the
6 remainder thereof but shall be confined in its operation to the
7 clause, sentence, paragraph, subsection, Section, or
8 application adjudged invalid and such clause, sentence,
9 paragraph, subsection, Section, or application shall be
10 reformed and construed so that it would be valid to the maximum
11 extent permitted.