

1 AN ACT concerning aging.

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

4 Section 5. The Adult Protective Services Act is amended by
5 changing Sections 2, 3, 3.5, 4, 4.1, 4.2, 5, 7.1, 7.5, 8, 9,
6 13, and 15 and by adding Sections 3.3 and 3.6 as follows:

7 (320 ILCS 20/2) (from Ch. 23, par. 6602)

8 Sec. 2. Definitions. As used in this Act, unless the
9 context requires otherwise:

10 (a) "Abandonment" means the desertion or willful forsaking
11 of an eligible adult by an individual responsible for the care
12 and custody of that eligible adult under circumstances in
13 which a reasonable person would continue to provide care and
14 custody. Nothing in this Act shall be construed to mean that an
15 eligible adult is a victim of abandonment because of health
16 care services provided or not provided by licensed health care
17 professionals.

18 (a-1) ~~(a)~~ "Abuse" means causing any physical, mental or
19 sexual injury to an eligible adult, including exploitation of
20 such adult's financial resources, and abandonment.

21 Nothing in this Act shall be construed to mean that an
22 eligible adult is a victim of abuse, abandonment, neglect, or
23 self-neglect for the sole reason that he or she is being

1 furnished with or relies upon treatment by spiritual means
2 through prayer alone, in accordance with the tenets and
3 practices of a recognized church or religious denomination.

4 Nothing in this Act shall be construed to mean that an
5 eligible adult is a victim of abuse because of health care
6 services provided or not provided by licensed health care
7 professionals.

8 (a-5) "Abuser" means a person who abuses, abandons,
9 neglects, or financially exploits an eligible adult.

10 (a-6) "Adult with disabilities" means a person aged 18
11 through 59 who resides in a domestic living situation and
12 whose disability as defined in subsection (c-5) impairs his or
13 her ability to seek or obtain protection from abuse,
14 abandonment, neglect, or exploitation.

15 (a-7) "Caregiver" means a person who either as a result of
16 a family relationship, voluntarily, or in exchange for
17 compensation has assumed responsibility for all or a portion
18 of the care of an eligible adult who needs assistance with
19 activities of daily living or instrumental activities of daily
20 living.

21 (b) "Department" means the Department on Aging of the
22 State of Illinois.

23 (c) "Director" means the Director of the Department.

24 (c-5) "Disability" means a physical or mental disability,
25 including, but not limited to, a developmental disability, an
26 intellectual disability, a mental illness as defined under the

1 Mental Health and Developmental Disabilities Code, or dementia
2 as defined under the Alzheimer's Disease Assistance Act.

3 (d) "Domestic living situation" means a residence where
4 the eligible adult at the time of the report lives alone or
5 with his or her family or a caregiver, or others, or other
6 community-based unlicensed facility, but is not:

7 (1) A licensed facility as defined in Section 1-113 of
8 the Nursing Home Care Act;

9 (1.5) A facility licensed under the ID/DD Community
10 Care Act;

11 (1.6) A facility licensed under the MC/DD Act;

12 (1.7) A facility licensed under the Specialized Mental
13 Health Rehabilitation Act of 2013;

14 (2) A "life care facility" as defined in the Life Care
15 Facilities Act;

16 (3) A home, institution, or other place operated by
17 the federal government or agency thereof or by the State
18 of Illinois;

19 (4) A hospital, sanitarium, or other institution, the
20 principal activity or business of which is the diagnosis,
21 care, and treatment of human illness through the
22 maintenance and operation of organized facilities
23 therefor, which is required to be licensed under the
24 Hospital Licensing Act;

25 (5) A "community living facility" as defined in the
26 Community Living Facilities Licensing Act;

1 (6) (Blank);

2 (7) A "community-integrated living arrangement" as
3 defined in the Community-Integrated Living Arrangements
4 Licensure and Certification Act or a "community
5 residential alternative" as licensed under that Act;

6 (8) An assisted living or shared housing establishment
7 as defined in the Assisted Living and Shared Housing Act;
8 or

9 (9) A supportive living facility as described in
10 Section 5-5.01a of the Illinois Public Aid Code.

11 (e) "Eligible adult" means either an adult with
12 disabilities aged 18 through 59 or a person aged 60 or older
13 who resides in a domestic living situation and is, or is
14 alleged to be, abused, abandoned, neglected, or financially
15 exploited by another individual or who neglects himself or
16 herself. "Eligible adult" also includes an adult who resides
17 in any of the facilities that are excluded from the definition
18 of "domestic living situation" under paragraphs (1) through
19 (9) of subsection (d), if either: (i) the alleged abuse, abandonment, or neglect occurs outside of the facility and not
20 under facility supervision and the alleged abuser is a family
21 member, caregiver, or another person who has a continuing
22 relationship with the adult; or (ii) the alleged financial
23 exploitation is perpetrated by a family member, caregiver, or
24 another person who has a continuing relationship with the
25 adult, but who is not an employee of the facility where the
26

1 adult resides.

2 (f) "Emergency" means a situation in which an eligible
3 adult is living in conditions presenting a risk of death or
4 physical, mental or sexual injury and the provider agency has
5 reason to believe the eligible adult is unable to consent to
6 services which would alleviate that risk.

7 (f-1) "Financial exploitation" means the use of an
8 eligible adult's resources by another to the disadvantage of
9 that adult or the profit or advantage of a person other than
10 that adult.

11 (f-5) "Mandated reporter" means any of the following
12 persons while engaged in carrying out their professional
13 duties:

14 (1) a professional or professional's delegate while
15 engaged in: (i) social services, (ii) law enforcement,
16 (iii) education, (iv) the care of an eligible adult or
17 eligible adults, or (v) any of the occupations required to
18 be licensed under the Clinical Psychologist Licensing Act,
19 the Clinical Social Work and Social Work Practice Act, the
20 Illinois Dental Practice Act, the Dietitian Nutritionist
21 Practice Act, the Marriage and Family Therapy Licensing
22 Act, the Medical Practice Act of 1987, the Naprapathic
23 Practice Act, the Nurse Practice Act, the Nursing Home
24 Administrators Licensing and Disciplinary Act, the
25 Illinois Occupational Therapy Practice Act, the Illinois
26 Optometric Practice Act of 1987, the Pharmacy Practice

1 Act, the Illinois Physical Therapy Act, the Physician
2 Assistant Practice Act of 1987, the Podiatric Medical
3 Practice Act of 1987, the Respiratory Care Practice Act,
4 the Professional Counselor and Clinical Professional
5 Counselor Licensing and Practice Act, the Illinois
6 Speech-Language Pathology and Audiology Practice Act, the
7 Veterinary Medicine and Surgery Practice Act of 2004, and
8 the Illinois Public Accounting Act;

9 (1.5) an employee of an entity providing developmental
10 disabilities services or service coordination funded by
11 the Department of Human Services;

12 (2) an employee of a vocational rehabilitation
13 facility prescribed or supervised by the Department of
14 Human Services;

15 (3) an administrator, employee, or person providing
16 services in or through an unlicensed community based
17 facility;

18 (4) any religious practitioner who provides treatment
19 by prayer or spiritual means alone in accordance with the
20 tenets and practices of a recognized church or religious
21 denomination, except as to information received in any
22 confession or sacred communication enjoined by the
23 discipline of the religious denomination to be held
24 confidential;

25 (5) field personnel of the Department of Healthcare
26 and Family Services, Department of Public Health, and

1 Department of Human Services, and any county or municipal
2 health department;

3 (6) personnel of the Department of Human Services, the
4 Guardianship and Advocacy Commission, the State Fire
5 Marshal, local fire departments, the Department on Aging
6 and its subsidiary Area Agencies on Aging and provider
7 agencies, and the Office of State Long Term Care
8 Ombudsman;

9 (7) any employee of the State of Illinois not
10 otherwise specified herein who is involved in providing
11 services to eligible adults, including professionals
12 providing medical or rehabilitation services and all other
13 persons having direct contact with eligible adults;

14 (8) a person who performs the duties of a coroner or
15 medical examiner; or

16 (9) a person who performs the duties of a paramedic or
17 an emergency medical technician.

18 (g) "Neglect" means another individual's failure to
19 provide an eligible adult with or willful withholding from an
20 eligible adult the necessities of life including, but not
21 limited to, food, clothing, shelter or health care. This
22 subsection does not create any new affirmative duty to provide
23 support to eligible adults. Nothing in this Act shall be
24 construed to mean that an eligible adult is a victim of neglect
25 because of health care services provided or not provided by
26 licensed health care professionals.

1 (h) "Provider agency" means any public or nonprofit agency
2 in a planning and service area that is selected by the
3 Department or appointed by the regional administrative agency
4 with prior approval by the Department on Aging to receive and
5 assess reports of alleged or suspected abuse, abandonment,
6 neglect, or financial exploitation. A provider agency is also
7 referenced as a "designated agency" in this Act.

8 (i) "Regional administrative agency" means any public or
9 nonprofit agency in a planning and service area that provides
10 regional oversight and performs functions as set forth in
11 subsection (b) of Section 3 of this Act. The Department shall
12 designate an Area Agency on Aging as the regional
13 administrative agency or, in the event the Area Agency on
14 Aging in that planning and service area is deemed by the
15 Department to be unwilling or unable to provide those
16 functions, the Department may serve as the regional
17 administrative agency or designate another qualified entity to
18 serve as the regional administrative agency; any such
19 designation shall be subject to terms set forth by the
20 Department.

21 (i-5) "Self-neglect" means a condition that is the result
22 of an eligible adult's inability, due to physical or mental
23 impairments, or both, or a diminished capacity, to perform
24 essential self-care tasks that substantially threaten his or
25 her own health, including: providing essential food, clothing,
26 shelter, and health care; and obtaining goods and services

1 necessary to maintain physical health, mental health,
2 emotional well-being, and general safety. The term includes
3 compulsive hoarding, which is characterized by the acquisition
4 and retention of large quantities of items and materials that
5 produce an extensively cluttered living space, which
6 significantly impairs the performance of essential self-care
7 tasks or otherwise substantially threatens life or safety.

8 (j) "Substantiated case" means a reported case of alleged
9 or suspected abuse, abandonment, neglect, financial
10 exploitation, or self-neglect in which a provider agency,
11 after assessment, determines that there is reason to believe
12 abuse, abandonment, neglect, or financial exploitation has
13 occurred.

14 (k) "Verified" means a determination that there is "clear
15 and convincing evidence" that the specific injury or harm
16 alleged was the result of abuse, abandonment, neglect, or
17 financial exploitation.

18 (Source: P.A. 99-180, eff. 7-29-15; 100-641, eff. 1-1-19.)

19 (320 ILCS 20/3) (from Ch. 23, par. 6603)

20 Sec. 3. Responsibilities.

21 (a) The Department shall establish, design, and manage a
22 protective services program for eligible adults who have been,
23 or are alleged to be, victims of abuse, abandonment, neglect,
24 financial exploitation, or self-neglect. The Department shall
25 contract with or fund, or contract with and fund, regional

1 administrative agencies, provider agencies, or both, for the
2 provision of those functions, and, contingent on adequate
3 funding, with attorneys or legal services provider agencies
4 for the provision of legal assistance pursuant to this Act.
5 For self-neglect, the program shall include the following
6 services for eligible adults who have been removed from their
7 residences for the purpose of cleanup or repairs: temporary
8 housing; counseling; and caseworker services to try to ensure
9 that the conditions necessitating the removal do not reoccur.

10 (a-1) The Department shall by rule develop standards for
11 minimum staffing levels and staff qualifications. The
12 Department shall by rule establish mandatory standards for the
13 investigation of abuse, abandonment, neglect, financial
14 exploitation, or self-neglect of eligible adults and mandatory
15 procedures for linking eligible adults to appropriate services
16 and supports.

17 (a-5) A provider agency shall, in accordance with rules
18 promulgated by the Department, establish a multi-disciplinary
19 team to act in an advisory role for the purpose of providing
20 professional knowledge and expertise in the handling of
21 complex abuse cases involving eligible adults. Each
22 multi-disciplinary team shall consist of one volunteer
23 representative from the following professions: banking or
24 finance; disability care; health care; law; law enforcement;
25 mental health care; and clergy. A provider agency may also
26 choose to add representatives from the fields of substance

1 abuse, domestic violence, sexual assault, or other related
2 fields. To support multi-disciplinary teams in this role, law
3 enforcement agencies and coroners or medical examiners shall
4 supply records as may be requested in particular cases.

5 (b) Each regional administrative agency shall designate
6 provider agencies within its planning and service area with
7 prior approval by the Department on Aging, monitor the use of
8 services, provide technical assistance to the provider
9 agencies and be involved in program development activities.

10 (c) Provider agencies shall assist, to the extent
11 possible, eligible adults who need agency services to allow
12 them to continue to function independently. Such assistance
13 shall include, but not be limited to, receiving reports of
14 alleged or suspected abuse, abandonment, neglect, financial
15 exploitation, or self-neglect, conducting face-to-face
16 assessments of such reported cases, determination of
17 substantiated cases, referral of substantiated cases for
18 necessary support services, referral of criminal conduct to
19 law enforcement in accordance with Department guidelines, and
20 provision of case work and follow-up services on substantiated
21 cases. In the case of a report of alleged or suspected abuse,
22 abandonment, or neglect that places an eligible adult at risk
23 of injury or death, a provider agency shall respond to the
24 report on an emergency basis in accordance with guidelines
25 established by the Department by administrative rule and shall
26 ensure that it is capable of responding to such a report 24

1 hours per day, 7 days per week. A provider agency may use an
2 on-call system to respond to reports of alleged or suspected
3 abuse, abandonment, or neglect after hours and on weekends.

4 (c-5) Where a provider agency has reason to believe that
5 the death of an eligible adult may be the result of abuse, abandonment,
6 or neglect, including any reports made after
7 death, the agency shall immediately report the matter to both
8 the appropriate law enforcement agency and the coroner or
9 medical examiner. Between 30 and 45 days after making such a
10 report, the provider agency again shall contact the law
11 enforcement agency and coroner or medical examiner to
12 determine whether any further action was taken. Upon request
13 by a provider agency, a law enforcement agency and coroner or
14 medical examiner shall supply a summary of its action in
15 response to a reported death of an eligible adult. A copy of
16 the report shall be maintained and all subsequent follow-up
17 with the law enforcement agency and coroner or medical
18 examiner shall be documented in the case record of the
19 eligible adult. If the law enforcement agency, coroner, or
20 medical examiner determines the reported death was caused by
21 abuse, abandonment, or neglect by a caregiver, the law
22 enforcement agency, coroner, or medical examiner shall inform
23 the Department, and the Department shall report the
24 caregiver's identity on the Registry as described in Section
25 7.5 of this Act.

26 (d) Upon sufficient appropriations to implement a

1 statewide program, the Department shall implement a program,
2 based on the recommendations of the Self-Neglect Steering
3 Committee, for (i) responding to reports of possible
4 self-neglect, (ii) protecting the autonomy, rights, privacy,
5 and privileges of adults during investigations of possible
6 self-neglect and consequential judicial proceedings regarding
7 competency, (iii) collecting and sharing relevant information
8 and data among the Department, provider agencies, regional
9 administrative agencies, and relevant seniors, (iv) developing
10 working agreements between provider agencies and law
11 enforcement, where practicable, and (v) developing procedures
12 for collecting data regarding incidents of self-neglect.

13 (Source: P.A. 98-49, eff. 7-1-13; 98-1039, eff. 8-25-14.)

14 (320 ILCS 20/3.3 new)

15 Sec. 3.3. Adult protective services trauma-informed
16 training.

17 (a) This Section applies to any person who is employed by
18 the Department in the Adult Protective Services division, or
19 is contracted with the Department, and works on the
20 development and implementation of social services to respond
21 to and prevent adult abuse, neglect, or exploitation.

22 (b) Subject to appropriation, the Department shall offer
23 an annual trauma-informed training program that includes (i)
24 instruction on how trauma impacts caseworkers and other
25 employees who respond to and prevent adult abuse, neglect,

1 exploitation, or abandonment, (ii) a review of the meaning and
2 impact of secondary trauma, and (iii) information about
3 strategies to identify and address secondary trauma in
4 caseworkers and other employees who work with adults who may
5 have experienced abuse, neglect, exploitation, or abandonment.

6 (c) Any trauma-informed training offered by the Department
7 shall cover the following:

8 (1) The widespread impact of secondary trauma on
9 caseworkers and other employees who work with adults who
10 may have experienced abuse, neglect, exploitation, or
11 abandonment.

12 (2) An understanding of who is at risk for developing
13 secondary trauma.

14 (3) Relevant and realistic case studies involving
15 traumatic situations that other caseworkers and employees
16 who work with adults who may have experienced abuse,
17 neglect, exploitation, or abandonment have encountered in
18 their work.

19 (4) Symptoms and causes of secondary trauma in
20 caseworkers and other employees who work with adults who
21 may have experienced abuse, neglect, exploitation, or
22 abandonment.

23 (5) Strategies for prevention and intervention in
24 cases of secondary trauma involving caseworkers or other
25 employees who work with adults who may have experienced
26 abuse, neglect, exploitation, or abandonment, including

1 the development of a self-care plan.

2 (6) How to incorporate monitoring and support
3 techniques for employees experiencing secondary trauma
4 into departmental policies, guidelines, and protocols.

5 (d) This Section is designed to address gaps in current
6 trauma-informed training requirements for employees of the
7 Office of Adult Protective Services and to improve the quality
8 of training. If any law or rule existing on the effective date
9 of this amendatory Act of the 102nd General Assembly contains
10 more rigorous training requirements for employees of the
11 Office of Adult Protective Services, then that law or rule
12 applies. If there is overlap between this Section and other
13 laws and rules, the Department shall interpret this Section to
14 avoid duplication of requirements while ensuring that the
15 minimum requirements set in this Section are met.

16 (e) The Department may adopt rules to implement this
17 Section.

18 (320 ILCS 20/3.5)

19 Sec. 3.5. Other responsibilities. The Department shall
20 also be responsible for the following activities, contingent
21 upon adequate funding; implementation shall be expanded to
22 adults with disabilities upon the effective date of this
23 amendatory Act of the 98th General Assembly, except those
24 responsibilities under subsection (a), which shall be
25 undertaken as soon as practicable:

1 (a) promotion of a wide range of endeavors for the
2 purpose of preventing abuse, abandonment, neglect,
3 financial exploitation, and self-neglect, including, but
4 not limited to, promotion of public and professional
5 education to increase awareness of abuse, abandonment,
6 neglect, financial exploitation, and self-neglect; to
7 increase reports; to establish access to and use of the
8 Registry established under Section 7.5; and to improve
9 response by various legal, financial, social, and health
10 systems;

11 (b) coordination of efforts with other agencies,
12 councils, and like entities, to include but not be limited
13 to, the Administrative Office of the Illinois Courts, the
14 Office of the Attorney General, the State Police, the
15 Illinois Law Enforcement Training Standards Board, the
16 State Triad, the Illinois Criminal Justice Information
17 Authority, the Departments of Public Health, Healthcare
18 and Family Services, and Human Services, the Illinois
19 Guardianship and Advocacy Commission, the Family Violence
20 Coordinating Council, the Illinois Violence Prevention
21 Authority, and other entities which may impact awareness
22 of, and response to, abuse, abandonment, neglect,
23 financial exploitation, and self-neglect;

24 (c) collection and analysis of data;

25 (d) monitoring of the performance of regional
26 administrative agencies and adult protective services

1 agencies;

2 (e) promotion of prevention activities;

3 (f) establishing and coordinating an aggressive
4 training program on the unique nature of adult abuse cases
5 with other agencies, councils, and like entities, to
6 include but not be limited to the Office of the Attorney
7 General, the State Police, the Illinois Law Enforcement
8 Training Standards Board, the State Triad, the Illinois
9 Criminal Justice Information Authority, the State
10 Departments of Public Health, Healthcare and Family
11 Services, and Human Services, the Family Violence
12 Coordinating Council, the Illinois Violence Prevention
13 Authority, the agency designated by the Governor under
14 Section 1 of the Protection and Advocacy for Persons with
15 Developmental Disabilities Act, and other entities that
16 may impact awareness of and response to abuse,
17 abandonment, neglect, financial exploitation, and
18 self-neglect;

19 (g) solicitation of financial institutions for the
20 purpose of making information available to the general
21 public warning of financial exploitation of adults and
22 related financial fraud or abuse, including such
23 information and warnings available through signage or
24 other written materials provided by the Department on the
25 premises of such financial institutions, provided that the
26 manner of displaying or distributing such information is

1 subject to the sole discretion of each financial
2 institution;

3 (g-1) developing by joint rulemaking with the
4 Department of Financial and Professional Regulation
5 minimum training standards which shall be used by
6 financial institutions for their current and new employees
7 with direct customer contact; the Department of Financial
8 and Professional Regulation shall retain sole visitation
9 and enforcement authority under this subsection (g-1); the
10 Department of Financial and Professional Regulation shall
11 provide bi-annual reports to the Department setting forth
12 aggregate statistics on the training programs required
13 under this subsection (g-1); and

14 (h) coordinating efforts with utility and electric
15 companies to send notices in utility bills to explain to
16 persons 60 years of age or older their rights regarding
17 telemarketing and home repair fraud.

18 (Source: P.A. 98-49, eff. 7-1-13; 98-1039, eff. 8-25-14;
19 99-143, eff. 7-27-15.)

20 (320 ILCS 20/3.6 new)

21 Sec. 3.6. Elder abuse risk assessment tool.

22 (a) The Department shall develop and implement a
23 demonstration project to allow for the use of a risk
24 assessment tool to assist in identifying elderly persons,
25 including homebound persons, who may be experiencing elder

1 abuse, abandonment, neglect, or exploitation and providing the
2 necessary support to address elder abuse, abandonment,
3 neglect, or exploitation. The Department shall finalize
4 planning on the demonstration project no later than December
5 1, 2023 with implementation beginning no later than January 1,
6 2024. The risk assessment tool shall identify (i) the level of
7 risk for elder abuse, abandonment, neglect, or exploitation;
8 (ii) risk factors causing the abuse, abandonment, neglect, or
9 exploitation; and (iii) appropriate follow-up and action in
10 response to any suspected abuse, abandonment, neglect, or
11 exploitation. In identifying a risk assessment tool, the
12 Department shall coordinate with all of the following:

13 (1) The Department of Healthcare and Family Services.

14 (2) A hospital, hospital system, or a statewide
15 association representing hospitals.

16 (3) A managed care organization or a statewide
17 association representing managed care organizations.

18 (4) A Care Coordination Unit.

19 (5) An Area Agency on Aging or a statewide association
20 representing Area Agencies on Aging.

21 (6) Legal aid providers.

22 (7) A financial institution or a statewide association
23 representing financial institutions.

24 (8) Adult Protective Services providers.

25 (b) The risk assessment tool shall be comprehensive and
26 include all of the following components:

1 (1) Client demographics.

2 (2) Indicators of elder abuse, abandonment, neglect,
3 or exploitation.

4 (3) Contributing risk factors for abuse, abandonment,
5 neglect, or exploitation.

6 (4) Overall level of risk on a scale of low, medium,
7 and high-risk level.

8 (5) Appropriate follow-up and action.

9 (6) Client outcomes.

10 (c) If any hospital employee, social worker, or other
11 employee utilizing the risk assessment tool identifies that an
12 elderly person is at risk for elder abuse, abandonment,
13 neglect, or exploitation, the employee shall utilize the risk
14 assessment tool to refer the elderly person to a managed care
15 organization, legal aid service, Adult Protective Services
16 provider, or other needed services and supports.

17 (d) The Department may adopt rules to implement this
18 Section.

19 (320 ILCS 20/4) (from Ch. 23, par. 6604)

20 Sec. 4. Reports of abuse, abandonment, or neglect.

21 (a) Any person who suspects the abuse, abandonment,
22 neglect, financial exploitation, or self-neglect of an
23 eligible adult may report this suspicion to an agency
24 designated to receive such reports under this Act or to the
25 Department.

1 (a-5) If any mandated reporter has reason to believe that
2 an eligible adult, who because of a disability or other
3 condition or impairment is unable to seek assistance for
4 himself or herself, has, within the previous 12 months, been
5 subjected to abuse, abandonment, neglect, or financial
6 exploitation, the mandated reporter shall, within 24 hours
7 after developing such belief, report this suspicion to an
8 agency designated to receive such reports under this Act or to
9 the Department. The agency designated to receive such reports
10 under this Act or the Department may establish a manner in
11 which a mandated reporter can make the required report through
12 an Internet reporting tool. Information sent and received
13 through the Internet reporting tool is subject to the same
14 rules in this Act as other types of confidential reporting
15 established by the designated agency or the Department.
16 Whenever a mandated reporter is required to report under this
17 Act in his or her capacity as a member of the staff of a
18 medical or other public or private institution, facility, or
19 agency, he or she shall make a report to an agency designated
20 to receive such reports under this Act or to the Department in
21 accordance with the provisions of this Act and may also notify
22 the person in charge of the institution, facility, or agency
23 or his or her designated agent that the report has been made.
24 Under no circumstances shall any person in charge of such
25 institution, facility, or agency, or his or her designated
26 agent to whom the notification has been made, exercise any

1 control, restraint, modification, or other change in the
2 report or the forwarding of the report to an agency designated
3 to receive such reports under this Act or to the Department.
4 The privileged quality of communication between any
5 professional person required to report and his or her patient
6 or client shall not apply to situations involving abused,
7 abandoned, neglected, or financially exploited eligible adults
8 and shall not constitute grounds for failure to report as
9 required by this Act.

10 (a-7) A person making a report under this Act in the belief
11 that it is in the alleged victim's best interest shall be
12 immune from criminal or civil liability or professional
13 disciplinary action on account of making the report,
14 notwithstanding any requirements concerning the
15 confidentiality of information with respect to such eligible
16 adult which might otherwise be applicable.

17 (a-9) Law enforcement officers shall continue to report
18 incidents of alleged abuse pursuant to the Illinois Domestic
19 Violence Act of 1986, notwithstanding any requirements under
20 this Act.

21 (b) Any person, institution or agency participating in the
22 making of a report, providing information or records related
23 to a report, assessment, or services, or participating in the
24 investigation of a report under this Act in good faith, or
25 taking photographs or x-rays as a result of an authorized
26 assessment, shall have immunity from any civil, criminal or

1 other liability in any civil, criminal or other proceeding
2 brought in consequence of making such report or assessment or
3 on account of submitting or otherwise disclosing such
4 photographs or x-rays to any agency designated to receive
5 reports of alleged or suspected abuse, abandonment, or
6 neglect. Any person, institution or agency authorized by the
7 Department to provide assessment, intervention, or
8 administrative services under this Act shall, in the good
9 faith performance of those services, have immunity from any
10 civil, criminal or other liability in any civil, criminal, or
11 other proceeding brought as a consequence of the performance
12 of those services. For the purposes of any civil, criminal, or
13 other proceeding, the good faith of any person required to
14 report, permitted to report, or participating in an
15 investigation of a report of alleged or suspected abuse,
16 abandonment, neglect, financial exploitation, or self-neglect
17 shall be presumed.

18 (c) The identity of a person making a report of alleged or
19 suspected abuse, abandonment, neglect, financial exploitation,
20 or self-neglect under this Act may be disclosed by the
21 Department or other agency provided for in this Act only with
22 such person's written consent or by court order, but is
23 otherwise confidential.

24 (d) The Department shall by rule establish a system for
25 filing and compiling reports made under this Act.

26 (e) Any physician who willfully fails to report as

1 required by this Act shall be referred to the Illinois State
2 Medical Disciplinary Board for action in accordance with
3 subdivision (A) (22) of Section 22 of the Medical Practice Act
4 of 1987. Any dentist or dental hygienist who willfully fails
5 to report as required by this Act shall be referred to the
6 Department of Professional Regulation for action in accordance
7 with paragraph 19 of Section 23 of the Illinois Dental
8 Practice Act. Any optometrist who willfully fails to report as
9 required by this Act shall be referred to the Department of
10 Financial and Professional Regulation for action in accordance
11 with paragraph (15) of subsection (a) of Section 24 of the
12 Illinois Optometric Practice Act of 1987. Any other mandated
13 reporter required by this Act to report suspected abuse,
14 abandonment, neglect, or financial exploitation who willfully
15 fails to report the same is guilty of a Class A misdemeanor.

16 (Source: P.A. 97-860, eff. 7-30-12; 98-49, eff. 7-1-13;
17 98-1039, eff. 8-25-14.)

18 (320 ILCS 20/4.1)

19 Sec. 4.1. Employer discrimination. No employer shall
20 discharge, demote or suspend, or threaten to discharge, demote
21 or suspend, or in any manner discriminate against any employee
22 who makes any good faith oral or written report of suspected
23 abuse, abandonment, neglect, or financial exploitation or who
24 is or will be a witness or testify in any investigation or
25 proceeding concerning a report of suspected abuse,

1 abandonment, neglect, or financial exploitation.

2 (Source: P.A. 98-49, eff. 7-1-13.)

3 (320 ILCS 20/4.2)

4 Sec. 4.2. Testimony by mandated reporter and investigator.

5 Any mandated reporter who makes a report or any person who
6 investigates a report under this Act shall testify fully in
7 any judicial proceeding resulting from such report, as to any
8 evidence of abuse, abandonment, neglect, or financial
9 exploitation or the cause thereof. Any mandated reporter who
10 is required to report a suspected case of abuse, abandonment,
11 neglect, or financial exploitation under Section 4 of this Act
12 shall testify fully in any administrative hearing resulting
13 from such report, as to any evidence of abuse, abandonment,
14 neglect, or financial exploitation or the cause thereof. No
15 evidence shall be excluded by reason of any common law or
16 statutory privilege relating to communications between the
17 alleged abuser or the eligible adult subject of the report
18 under this Act and the person making or investigating the
19 report.

20 (Source: P.A. 90-628, eff. 1-1-99.)

21 (320 ILCS 20/5) (from Ch. 23, par. 6605)

22 Sec. 5. Procedure.

23 (a) A provider agency designated to receive reports of
24 alleged or suspected abuse, abandonment, neglect, financial

1 exploitation, or self-neglect under this Act shall, upon
2 receiving such a report, conduct a face-to-face assessment
3 with respect to such report, in accord with established law
4 and Department protocols, procedures, and policies.
5 Face-to-face assessments, casework, and follow-up of reports
6 of self-neglect by the provider agencies designated to receive
7 reports of self-neglect shall be subject to sufficient
8 appropriation for statewide implementation of assessments,
9 casework, and follow-up of reports of self-neglect. In the
10 absence of sufficient appropriation for statewide
11 implementation of assessments, casework, and follow-up of
12 reports of self-neglect, the designated adult protective
13 services provider agency shall refer all reports of
14 self-neglect to the appropriate agency or agencies as
15 designated by the Department for any follow-up. The assessment
16 shall include, but not be limited to, a visit to the residence
17 of the eligible adult who is the subject of the report and
18 shall include interviews or consultations regarding the
19 allegations with service agencies, immediate family members,
20 and individuals who may have knowledge of the eligible adult's
21 circumstances based on the consent of the eligible adult in
22 all instances, except where the provider agency is acting in
23 the best interest of an eligible adult who is unable to seek
24 assistance for himself or herself and where there are
25 allegations against a caregiver who has assumed
26 responsibilities in exchange for compensation. If, after the

1 assessment, the provider agency determines that the case is
2 substantiated it shall develop a service care plan for the
3 eligible adult and may report its findings at any time during
4 the case to the appropriate law enforcement agency in accord
5 with established law and Department protocols, procedures, and
6 policies. In developing a case plan, the provider agency may
7 consult with any other appropriate provider of services, and
8 such providers shall be immune from civil or criminal
9 liability on account of such acts. The plan shall include
10 alternative suggested or recommended services which are
11 appropriate to the needs of the eligible adult and which
12 involve the least restriction of the eligible adult's
13 activities commensurate with his or her needs. Only those
14 services to which consent is provided in accordance with
15 Section 9 of this Act shall be provided, contingent upon the
16 availability of such services.

17 (b) A provider agency shall refer evidence of crimes
18 against an eligible adult to the appropriate law enforcement
19 agency according to Department policies. A referral to law
20 enforcement may be made at intake or any time during the case.
21 Where a provider agency has reason to believe the death of an
22 eligible adult may be the result of abuse, abandonment, or
23 neglect, the agency shall immediately report the matter to the
24 coroner or medical examiner and shall cooperate fully with any
25 subsequent investigation.

26 (c) If any person other than the alleged victim refuses to

1 allow the provider agency to begin an investigation,
2 interferes with the provider agency's ability to conduct an
3 investigation, or refuses to give access to an eligible adult,
4 the appropriate law enforcement agency must be consulted
5 regarding the investigation.

6 (Source: P.A. 101-496, eff. 1-1-20.)

7 (320 ILCS 20/7.1)

8 Sec. 7.1. Final investigative report. A provider agency
9 shall prepare a final investigative report, upon the
10 completion or closure of an investigation, in all cases of
11 reported abuse, abandonment, neglect, financial exploitation,
12 or self-neglect of an eligible adult, whether or not there is a
13 substantiated finding.

14 (Source: P.A. 98-49, eff. 7-1-13.)

15 (320 ILCS 20/7.5)

16 Sec. 7.5. Registry.

17 (a) To protect individuals receiving in-home and
18 community-based services, the Department on Aging shall
19 establish an Adult Protective Service Registry that will be
20 hosted by the Department of Public Health on its website
21 effective January 1, 2015, and, if practicable, shall propose
22 rules for the Registry by January 1, 2015.

23 (a-5) The Registry shall identify caregivers against whom
24 a verified and substantiated finding was made under this Act

1 of abuse, abandonment, neglect, or financial exploitation.

2 The information in the Registry shall be confidential
3 except as specifically authorized in this Act and shall not be
4 deemed a public record.

5 (a-10) Reporting to the Registry. The Department on Aging
6 shall report to the Registry the identity of the caregiver
7 when a verified and substantiated finding of abuse,
8 abandonment, neglect, or financial exploitation of an eligible
9 adult under this Act is made against a caregiver, and all
10 appeals, challenges, and reviews, if any, have been completed
11 and a finding for placement on the Registry has been sustained
12 or upheld.

13 A finding against a caregiver that is placed in the
14 Registry shall preclude that caregiver from providing direct
15 care, as defined in this Section, in a position with or that is
16 regulated by or paid with public funds from the Department on
17 Aging, the Department of Healthcare and Family Services, the
18 Department of Human Services, or the Department of Public
19 Health or with an entity or provider licensed, certified, or
20 regulated by or paid with public funds from any of these State
21 agencies.

22 (b) Definitions. As used in this Section:

23 "Direct care" includes, but is not limited to, direct
24 access to a person aged 60 or older or to an adult with
25 disabilities aged 18 through 59, his or her living quarters,
26 or his or her personal, financial, or medical records for the

1 purpose of providing nursing care or assistance with feeding,
2 dressing, movement, bathing, toileting, other personal needs
3 and activities of daily living or instrumental activities of
4 daily living, or assistance with financial transactions.

5 "Participant" means an individual who uses the services of
6 an in-home care program funded through the Department on
7 Aging, the Department of Healthcare and Family Services, the
8 Department of Human Services, or the Department of Public
9 Health.

10 (c) Access to and use of the Registry. Access to the
11 Registry shall be limited to the Department on Aging, the
12 Department of Healthcare and Family Services, the Department
13 of Human Services, and the Department of Public Health and
14 providers of direct care as described in subsection (a-10) of
15 this Section. These State agencies and providers shall not
16 hire, compensate either directly or on behalf of a
17 participant, or utilize the services of any person seeking to
18 provide direct care without first conducting an online check
19 of whether the person has been placed on the Registry. These
20 State agencies and providers shall maintain a copy of the
21 results of the online check to demonstrate compliance with
22 this requirement. These State agencies and providers are
23 prohibited from retaining, hiring, compensating either
24 directly or on behalf of a participant, or utilizing the
25 services of a person to provide direct care if the online check
26 of the person reveals a verified and substantiated finding of

1 abuse, abandonment, neglect, or financial exploitation that
2 has been placed on the Registry or when the State agencies or
3 providers otherwise gain knowledge of such placement on the
4 Registry. Failure to comply with this requirement may subject
5 such a provider to corrective action by the appropriate
6 regulatory agency or other lawful remedies provided under the
7 applicable licensure, certification, or regulatory laws and
8 rules.

9 (d) Notice to caregiver. The Department on Aging shall
10 establish rules concerning notice to the caregiver in cases of
11 a verified and substantiated finding of abuse, abandonment,
12 neglect, or financial exploitation against him or her that may
13 make him or her eligible for placement on the Registry.

14 (e) Notification to eligible adults, guardians, or agents.
15 As part of its investigation, the Department on Aging shall
16 notify an eligible adult, or an eligible adult's guardian or
17 agent, that his or her caregiver's name may be placed on the
18 Registry based on a finding as described in subsection (a-10)
19 of this Section.

20 (f) Notification to employer. The Department on Aging
21 shall notify the appropriate State agency or provider of
22 direct care, as described in subsection (a-10), when there is
23 a verified and substantiated finding of abuse, abandonment,
24 neglect, or financial exploitation in a case under this Act
25 that is reported on the Registry and that involves one of its
26 caregivers. That State agency or provider is prohibited from

1 retaining or compensating that individual in a position that
2 involves direct care, and if there is an imminent risk of
3 danger to the victim or an imminent risk of misuse of personal,
4 medical, or financial information, that caregiver shall
5 immediately be barred from providing direct care to the victim
6 pending the outcome of any challenge, appeal, criminal
7 prosecution, or other type of collateral action.

8 (g) Challenges and appeals. The Department on Aging shall
9 establish, by rule, procedures concerning challenges and
10 appeals to placement on the Registry pursuant to legislative
11 intent. The Department shall not make any report to the
12 Registry pending challenges or appeals.

13 (h) Caregiver's rights to collateral action. The
14 Department on Aging shall not make any report to the Registry
15 if a caregiver notifies the Department in writing that he or
16 she is formally challenging an adverse employment action
17 resulting from a verified and substantiated finding of abuse,
18 abandonment, neglect, or financial exploitation by complaint
19 filed with the Illinois Civil Service Commission, or by
20 another means which seeks to enforce the caregiver's rights
21 pursuant to any applicable collective bargaining agreement. If
22 an action taken by an employer against a caregiver as a result
23 of such a finding is overturned through an action filed with
24 the Illinois Civil Service Commission or under any applicable
25 collective bargaining agreement after that caregiver's name
26 has already been sent to the Registry, the caregiver's name

1 shall be removed from the Registry.

2 (i) Removal from Registry. At any time after a report to
3 the Registry, but no more than once in each successive 3-year
4 period thereafter, for a maximum of 3 such requests, a
5 caregiver may request removal of his or her name from the
6 Registry in relationship to a single incident. The caregiver
7 shall bear the burden of establishing, by a preponderance of
8 the evidence, that removal of his or her name from the Registry
9 is in the public interest. Upon receiving such a request, the
10 Department on Aging shall conduct an investigation and
11 consider any evidentiary material provided. The Department
12 shall issue a decision either granting or denying removal to
13 the caregiver and report it to the Registry. The Department
14 shall, by rule, establish standards and a process for
15 requesting the removal of a name from the Registry.

16 (j) Referral of Registry reports to health care
17 facilities. In the event an eligible adult receiving services
18 from a provider agency changes his or her residence from a
19 domestic living situation to that of a health care or long term
20 care facility, the provider agency shall use reasonable
21 efforts to promptly inform the facility and the appropriate
22 Regional Long Term Care Ombudsman about any Registry reports
23 relating to the eligible adult. For purposes of this Section,
24 a health care or long term care facility includes, but is not
25 limited to, any residential facility licensed, certified, or
26 regulated by the Department of Public Health, Healthcare and

1 Family Services, or Human Services.

2 (k) The Department on Aging and its employees and agents
3 shall have immunity, except for intentional willful and wanton
4 misconduct, from any liability, civil, criminal, or otherwise,
5 for reporting information to and maintaining the Registry.

6 (Source: P.A. 98-49, eff. 1-1-14; 98-756, eff. 7-16-14;
7 98-1039, eff. 8-25-14; 99-78, eff. 7-20-15.)

8 (320 ILCS 20/8) (from Ch. 23, par. 6608)

9 Sec. 8. Access to records. All records concerning reports
10 of abuse, abandonment, neglect, financial exploitation, or
11 self-neglect and all records generated as a result of such
12 reports shall be confidential and shall not be disclosed
13 except as specifically authorized by this Act or other
14 applicable law. In accord with established law and Department
15 protocols, procedures, and policies, access to such records,
16 but not access to the identity of the person or persons making
17 a report of alleged abuse, abandonment, neglect, financial
18 exploitation, or self-neglect as contained in such records,
19 shall be provided, upon request, to the following persons and
20 for the following persons:

21 (1) Department staff, provider agency staff, other
22 aging network staff, and regional administrative agency
23 staff, including staff of the Chicago Department on Aging
24 while that agency is designated as a regional
25 administrative agency, in the furtherance of their

1 responsibilities under this Act;

2 (1.5) A representative of the public guardian acting
3 in the course of investigating the appropriateness of
4 guardianship for the eligible adult or while pursuing a
5 petition for guardianship of the eligible adult pursuant
6 to the Probate Act of 1975;

7 (2) A law enforcement agency or State's Attorney's
8 office investigating known or suspected abuse,
9 abandonment, neglect, financial exploitation, or
10 self-neglect. Where a provider agency has reason to
11 believe that the death of an eligible adult may be the
12 result of abuse, abandonment, or neglect, including any
13 reports made after death, the agency shall immediately
14 provide the appropriate law enforcement agency with all
15 records pertaining to the eligible adult;

16 (2.5) A law enforcement agency, fire department
17 agency, or fire protection district having proper
18 jurisdiction pursuant to a written agreement between a
19 provider agency and the law enforcement agency, fire
20 department agency, or fire protection district under which
21 the provider agency may furnish to the law enforcement
22 agency, fire department agency, or fire protection
23 district a list of all eligible adults who may be at
24 imminent risk of abuse, abandonment, neglect, financial
25 exploitation, or self-neglect;

26 (3) A physician who has before him or her or who is

1 involved in the treatment of an eligible adult whom he or
2 she reasonably suspects may be abused, abandoned,
3 neglected, financially exploited, or self-neglected or who
4 has been referred to the Adult Protective Services
5 Program;

6 (4) An eligible adult reported to be abused,
7 abandoned, neglected, financially exploited, or
8 self-neglected, or such adult's authorized guardian or
9 agent, unless such guardian or agent is the abuser or the
10 alleged abuser;

11 (4.5) An executor or administrator of the estate of an
12 eligible adult who is deceased;

13 (5) In cases regarding abuse, abandonment, neglect, or
14 financial exploitation, a court or a guardian ad litem,
15 upon its or his or her finding that access to such records
16 may be necessary for the determination of an issue before
17 the court. However, such access shall be limited to an in
18 camera inspection of the records, unless the court
19 determines that disclosure of the information contained
20 therein is necessary for the resolution of an issue then
21 pending before it;

22 (5.5) In cases regarding self-neglect, a guardian ad
23 litem;

24 (6) A grand jury, upon its determination that access
25 to such records is necessary in the conduct of its
26 official business;

1 (7) Any person authorized by the Director, in writing,
2 for audit or bona fide research purposes;

3 (8) A coroner or medical examiner who has reason to
4 believe that an eligible adult has died as the result of
5 abuse, abandonment, neglect, financial exploitation, or
6 self-neglect. The provider agency shall immediately
7 provide the coroner or medical examiner with all records
8 pertaining to the eligible adult;

9 (8.5) A coroner or medical examiner having proper
10 jurisdiction, pursuant to a written agreement between a
11 provider agency and the coroner or medical examiner, under
12 which the provider agency may furnish to the office of the
13 coroner or medical examiner a list of all eligible adults
14 who may be at imminent risk of death as a result of abuse,
15 abandonment, neglect, financial exploitation, or
16 self-neglect;

17 (9) Department of Financial and Professional
18 Regulation staff and members of the Illinois Medical
19 Disciplinary Board or the Social Work Examining and
20 Disciplinary Board in the course of investigating alleged
21 violations of the Clinical Social Work and Social Work
22 Practice Act by provider agency staff or other licensing
23 bodies at the discretion of the Director of the Department
24 on Aging;

25 (9-a) Department of Healthcare and Family Services
26 staff and provider agency staff when that Department is

1 funding services to the eligible adult, including access
2 to the identity of the eligible adult;

3 (9-b) Department of Human Services staff and provider
4 agency staff when that Department is funding services to
5 the eligible adult or is providing reimbursement for
6 services provided by the abuser or alleged abuser,
7 including access to the identity of the eligible adult;

8 (10) Hearing officers in the course of conducting an
9 administrative hearing under this Act; parties to such
10 hearing shall be entitled to discovery as established by
11 rule;

12 (11) A caregiver who challenges placement on the
13 Registry shall be given the statement of allegations in
14 the abuse report and the substantiation decision in the
15 final investigative report; and

16 (12) The Illinois Guardianship and Advocacy Commission
17 and the agency designated by the Governor under Section 1
18 of the Protection and Advocacy for Persons with
19 Developmental Disabilities Act shall have access, through
20 the Department, to records, including the findings,
21 pertaining to a completed or closed investigation of a
22 report of suspected abuse, abandonment, neglect, financial
23 exploitation, or self-neglect of an eligible adult.

24 (Source: P.A. 98-49, eff. 7-1-13; 98-1039, eff. 8-25-14;
25 99-143, eff. 7-27-15; 99-287, eff. 1-1-16; 99-547, eff.
26 7-15-16; 99-642, eff. 7-28-16.)

1 (320 ILCS 20/9) (from Ch. 23, par. 6609)

2 Sec. 9. Authority to consent to services.

3 (a) If an eligible adult consents to an assessment of a
4 reported incident of suspected abuse, abandonment, neglect,
5 financial exploitation, or self-neglect and, following the
6 assessment of such report, consents to services being provided
7 according to the case plan, such services shall be arranged to
8 meet the adult's needs, based upon the availability of
9 resources to provide such services. If an adult withdraws his
10 or her consent for an assessment of the reported incident or
11 withdraws his or her consent for services and refuses to
12 accept such services, the services shall not be provided.

13 (b) If it reasonably appears to the Department or other
14 agency designated under this Act that a person is an eligible
15 adult and lacks the capacity to consent to an assessment of a
16 reported incident of suspected abuse, abandonment, neglect,
17 financial exploitation, or self-neglect or to necessary
18 services, the Department or other agency shall take
19 appropriate action necessary to ameliorate risk to the
20 eligible adult if there is a threat of ongoing harm or another
21 emergency exists. The Department or other agency shall be
22 authorized to seek the appointment of a temporary guardian as
23 provided in Article XIa of the Probate Act of 1975 for the
24 purpose of consenting to an assessment of the reported
25 incident and such services, together with an order for an

1 evaluation of the eligible adult's physical, psychological,
2 and medical condition and decisional capacity.

3 (c) A guardian of the person of an eligible adult may
4 consent to an assessment of the reported incident and to
5 services being provided according to the case plan. If an
6 eligible adult lacks capacity to consent, an agent having
7 authority under a power of attorney may consent to an
8 assessment of the reported incident and to services. If the
9 guardian or agent is the suspected abuser and he or she
10 withdraws consent for the assessment of the reported incident,
11 or refuses to allow services to be provided to the eligible
12 adult, the Department, an agency designated under this Act, or
13 the office of the Attorney General may request a court order
14 seeking appropriate remedies, and may in addition request
15 removal of the guardian and appointment of a successor
16 guardian or request removal of the agent and appointment of a
17 guardian.

18 (d) If an emergency exists and the Department or other
19 agency designated under this Act reasonably believes that a
20 person is an eligible adult and lacks the capacity to consent
21 to necessary services, the Department or other agency may
22 request an ex parte order from the circuit court of the county
23 in which the petitioner or respondent resides or in which the
24 alleged abuse, abandonment, neglect, financial exploitation,
25 or self-neglect occurred, authorizing an assessment of a
26 report of alleged or suspected abuse, abandonment, neglect,

1 financial exploitation, or self-neglect or the provision of
2 necessary services, or both, including relief available under
3 the Illinois Domestic Violence Act of 1986 in accord with
4 established law and Department protocols, procedures, and
5 policies. Petitions filed under this subsection shall be
6 treated as expedited proceedings. When an eligible adult is at
7 risk of serious injury or death and it reasonably appears that
8 the eligible adult lacks capacity to consent to necessary
9 services, the Department or other agency designated under this
10 Act may take action necessary to ameliorate the risk in
11 accordance with administrative rules promulgated by the
12 Department.

13 (d-5) For purposes of this Section, an eligible adult
14 "lacks the capacity to consent" if qualified staff of an
15 agency designated under this Act reasonably determine, in
16 accordance with administrative rules promulgated by the
17 Department, that he or she appears either (i) unable to
18 receive and evaluate information related to the assessment or
19 services or (ii) unable to communicate in any manner decisions
20 related to the assessment of the reported incident or
21 services.

22 (e) Within 15 days after the entry of the ex parte
23 emergency order, the order shall expire, or, if the need for
24 assessment of the reported incident or services continues, the
25 provider agency shall petition for the appointment of a
26 guardian as provided in Article XIa of the Probate Act of 1975

1 for the purpose of consenting to such assessment or services
2 or to protect the eligible adult from further harm.

3 (f) If the court enters an ex parte order under subsection
4 (d) for an assessment of a reported incident of alleged or
5 suspected abuse, abandonment, neglect, financial exploitation,
6 or self-neglect, or for the provision of necessary services in
7 connection with alleged or suspected self-neglect, or for
8 both, the court, as soon as is practicable thereafter, shall
9 appoint a guardian ad litem for the eligible adult who is the
10 subject of the order, for the purpose of reviewing the
11 reasonableness of the order. The guardian ad litem shall
12 review the order and, if the guardian ad litem reasonably
13 believes that the order is unreasonable, the guardian ad litem
14 shall file a petition with the court stating the guardian ad
15 litem's belief and requesting that the order be vacated.

16 (g) In all cases in which there is a substantiated finding
17 of abuse, abandonment, neglect, or financial exploitation by a
18 guardian, the Department shall, within 30 days after the
19 finding, notify the Probate Court with jurisdiction over the
20 guardianship.

21 (Source: P.A. 98-49, eff. 7-1-13; 98-1039, eff. 8-25-14.)

22 (320 ILCS 20/13)

23 Sec. 13. Access.

24 (a) In accord with established law and Department
25 protocols, procedures, and policies, the designated provider

1 agencies shall have access to eligible adults who have been
2 reported or found to be victims of abuse, abandonment,
3 neglect, financial exploitation, or self-neglect in order to
4 assess the validity of the report, assess other needs of the
5 eligible adult, and provide services in accordance with this
6 Act.

7 (a-5) A representative of the Department or a designated
8 provider agency that is actively involved in an abuse,
9 abandonment, neglect, financial exploitation, or self-neglect
10 investigation under this Act shall be allowed access to the
11 financial records, mental and physical health records, and
12 other relevant evaluative records of the eligible adult which
13 are in the possession of any individual, financial
14 institution, health care provider, mental health provider,
15 educational facility, or other facility if necessary to
16 complete the investigation mandated by this Act. The provider
17 or facility shall provide such records to the representative
18 upon receipt of a written request and certification from the
19 Department or designated provider agency that an investigation
20 is being conducted under this Act and the records are
21 pertinent to the investigation.

22 Any records received by such representative, the
23 confidentiality of which is protected by another law or rule,
24 shall be maintained as confidential, except for such use as
25 may be necessary for any administrative or other legal
26 proceeding.

1 (b) Where access to an eligible adult is denied, including
2 the refusal to provide requested records, the Office of the
3 Attorney General, the Department, or the provider agency may
4 petition the court for an order to require appropriate access
5 where:

6 (1) a caregiver or third party has interfered with the
7 assessment or service plan, or

8 (2) the agency has reason to believe that the eligible
9 adult is denying access because of coercion, extortion, or
10 justifiable fear of future abuse, abandonment, neglect, or
11 financial exploitation.

12 (c) The petition for an order requiring appropriate access
13 shall be afforded an expedited hearing in the circuit court.

14 (d) If the provider agency has substantiated financial
15 exploitation against an eligible adult, and has documented a
16 reasonable belief that the eligible adult will be irreparably
17 harmed as a result of the financial exploitation, the Office
18 of the Attorney General, the Department, or the provider
19 agency may petition for an order freezing the assets of the
20 eligible adult. The petition shall be filed in the county or
21 counties in which the assets are located. The court's order
22 shall prohibit the sale, gifting, transfer, or wasting of the
23 assets of the eligible adult, both real and personal, owned
24 by, or vested in, the eligible adult, without the express
25 permission of the court. The petition to freeze the assets of
26 the eligible adult shall be afforded an expedited hearing in

1 the circuit court.

2 (Source: P.A. 98-1039, eff. 8-25-14.)

3 (320 ILCS 20/15)

4 Sec. 15. Fatality review teams.

5 (a) State policy.

6 (1) Both the State and the community maintain a
7 commitment to preventing the abuse, abandonment, neglect,
8 and financial exploitation of at-risk adults. This
9 includes a charge to bring perpetrators of crimes against
10 at-risk adults to justice and prevent untimely deaths in
11 the community.

12 (2) When an at-risk adult dies, the response to the
13 death by the community, law enforcement, and the State
14 must include an accurate and complete determination of the
15 cause of death, and the development and implementation of
16 measures to prevent future deaths from similar causes.

17 (3) Multidisciplinary and multi-agency reviews of
18 deaths can assist the State and counties in developing a
19 greater understanding of the incidence and causes of
20 premature deaths and the methods for preventing those
21 deaths, improving methods for investigating deaths, and
22 identifying gaps in services to at-risk adults.

23 (4) Access to information regarding the deceased
24 person and his or her family by multidisciplinary and
25 multi-agency fatality review teams is necessary in order

1 to fulfill their purposes and duties.

2 (a-5) Definitions. As used in this Section:

3 "Advisory Council" means the Illinois Fatality Review
4 Team Advisory Council.

5 "Review Team" means a regional interagency fatality
6 review team.

7 (b) The Director, in consultation with the Advisory
8 Council, law enforcement, and other professionals who work in
9 the fields of investigating, treating, or preventing abuse,
10 abandonment, or neglect of at-risk adults, shall appoint
11 members to a minimum of one review team in each of the
12 Department's planning and service areas. Each member of a
13 review team shall be appointed for a 2-year term and shall be
14 eligible for reappointment upon the expiration of the term. A
15 review team's purpose in conducting review of at-risk adult
16 deaths is: (i) to assist local agencies in identifying and
17 reviewing suspicious deaths of adult victims of alleged,
18 suspected, or substantiated abuse, abandonment, or neglect in
19 domestic living situations; (ii) to facilitate communications
20 between officials responsible for autopsies and inquests and
21 persons involved in reporting or investigating alleged or
22 suspected cases of abuse, abandonment, neglect, or financial
23 exploitation of at-risk adults and persons involved in
24 providing services to at-risk adults; (iii) to evaluate means
25 by which the death might have been prevented; and (iv) to
26 report its findings to the appropriate agencies and the

1 Advisory Council and make recommendations that may help to
2 reduce the number of at-risk adult deaths caused by abuse,
3 abandonment, and neglect and that may help to improve the
4 investigations of deaths of at-risk adults and increase
5 prosecutions, if appropriate.

6 (b-5) Each such team shall be composed of representatives
7 of entities and individuals including, but not limited to:

8 (1) the Department on Aging;

9 (2) coroners or medical examiners (or both);

10 (3) State's Attorneys;

11 (4) local police departments;

12 (5) forensic units;

13 (6) local health departments;

14 (7) a social service or health care agency that
15 provides services to persons with mental illness, in a
16 program whose accreditation to provide such services is
17 recognized by the Division of Mental Health within the
18 Department of Human Services;

19 (8) a social service or health care agency that
20 provides services to persons with developmental
21 disabilities, in a program whose accreditation to provide
22 such services is recognized by the Division of
23 Developmental Disabilities within the Department of Human
24 Services;

25 (9) a local hospital, trauma center, or provider of
26 emergency medicine;

1 (10) providers of services for eligible adults in
2 domestic living situations; and

3 (11) a physician, psychiatrist, or other health care
4 provider knowledgeable about abuse, abandonment, and
5 neglect of at-risk adults.

6 (c) A review team shall review cases of deaths of at-risk
7 adults occurring in its planning and service area (i)
8 involving blunt force trauma or an undetermined manner or
9 suspicious cause of death; (ii) if requested by the deceased's
10 attending physician or an emergency room physician; (iii) upon
11 referral by a health care provider; (iv) upon referral by a
12 coroner or medical examiner; (v) constituting an open or
13 closed case from an adult protective services agency, law
14 enforcement agency, State's Attorney's office, or the
15 Department of Human Services' Office of the Inspector General
16 that involves alleged or suspected abuse, abandonment,
17 neglect, or financial exploitation; or (vi) upon referral by a
18 law enforcement agency or State's Attorney's office. If such a
19 death occurs in a planning and service area where a review team
20 has not yet been established, the Director shall request that
21 the Advisory Council or another review team review that death.
22 A team may also review deaths of at-risk adults if the alleged
23 abuse, abandonment, or neglect occurred while the person was
24 residing in a domestic living situation.

25 A review team shall meet not less than 4 times a year to
26 discuss cases for its possible review. Each review team, with

1 the advice and consent of the Department, shall establish
2 criteria to be used in discussing cases of alleged, suspected,
3 or substantiated abuse, abandonment, or neglect for review and
4 shall conduct its activities in accordance with any applicable
5 policies and procedures established by the Department.

6 (c-5) The Illinois Fatality Review Team Advisory Council,
7 consisting of one member from each review team in Illinois,
8 shall be the coordinating and oversight body for review teams
9 and activities in Illinois. The Director may appoint to the
10 Advisory Council any ex-officio members deemed necessary.
11 Persons with expertise needed by the Advisory Council may be
12 invited to meetings. The Advisory Council must select from its
13 members a chairperson and a vice-chairperson, each to serve a
14 2-year term. The chairperson or vice-chairperson may be
15 selected to serve additional, subsequent terms. The Advisory
16 Council must meet at least 4 times during each calendar year.

17 The Department may provide or arrange for the staff
18 support necessary for the Advisory Council to carry out its
19 duties. The Director, in cooperation and consultation with the
20 Advisory Council, shall appoint, reappoint, and remove review
21 team members.

22 The Advisory Council has, but is not limited to, the
23 following duties:

24 (1) To serve as the voice of review teams in Illinois.

25 (2) To oversee the review teams in order to ensure
26 that the review teams' work is coordinated and in

1 compliance with State statutes and the operating protocol.

2 (3) To ensure that the data, results, findings, and
3 recommendations of the review teams are adequately used in
4 a timely manner to make any necessary changes to the
5 policies, procedures, and State statutes in order to
6 protect at-risk adults.

7 (4) To collaborate with the Department in order to
8 develop any legislation needed to prevent unnecessary
9 deaths of at-risk adults.

10 (5) To ensure that the review teams' review processes
11 are standardized in order to convey data, findings, and
12 recommendations in a usable format.

13 (6) To serve as a link with review teams throughout
14 the country and to participate in national review team
15 activities.

16 (7) To provide the review teams with the most current
17 information and practices concerning at-risk adult death
18 review and related topics.

19 (8) To perform any other functions necessary to
20 enhance the capability of the review teams to reduce and
21 prevent at-risk adult fatalities.

22 The Advisory Council may prepare an annual report, in
23 consultation with the Department, using aggregate data
24 gathered by review teams and using the review teams'
25 recommendations to develop education, prevention, prosecution,
26 or other strategies designed to improve the coordination of

1 services for at-risk adults and their families.

2 In any instance where a review team does not operate in
3 accordance with established protocol, the Director, in
4 consultation and cooperation with the Advisory Council, must
5 take any necessary actions to bring the review team into
6 compliance with the protocol.

7 (d) Any document or oral or written communication shared
8 within or produced by the review team relating to a case
9 discussed or reviewed by the review team is confidential and
10 is not admissible as evidence in any civil or criminal
11 proceeding, except for use by a State's Attorney's office in
12 prosecuting a criminal case against a caregiver. Those records
13 and information are, however, subject to discovery or
14 subpoena, and are admissible as evidence, to the extent they
15 are otherwise available to the public.

16 Any document or oral or written communication provided to
17 a review team by an individual or entity, and created by that
18 individual or entity solely for the use of the review team, is
19 confidential, is not subject to disclosure to or discoverable
20 by another party, and is not admissible as evidence in any
21 civil or criminal proceeding, except for use by a State's
22 Attorney's office in prosecuting a criminal case against a
23 caregiver. Those records and information are, however, subject
24 to discovery or subpoena, and are admissible as evidence, to
25 the extent they are otherwise available to the public.

26 Each entity or individual represented on the fatality

1 review team may share with other members of the team
2 information in the entity's or individual's possession
3 concerning the decedent who is the subject of the review or
4 concerning any person who was in contact with the decedent, as
5 well as any other information deemed by the entity or
6 individual to be pertinent to the review. Any such information
7 shared by an entity or individual with other members of the
8 review team is confidential. The intent of this paragraph is
9 to permit the disclosure to members of the review team of any
10 information deemed confidential or privileged or prohibited
11 from disclosure by any other provision of law. Release of
12 confidential communication between domestic violence advocates
13 and a domestic violence victim shall follow subsection (d) of
14 Section 227 of the Illinois Domestic Violence Act of 1986
15 which allows for the waiver of privilege afforded to
16 guardians, executors, or administrators of the estate of the
17 domestic violence victim. This provision relating to the
18 release of confidential communication between domestic
19 violence advocates and a domestic violence victim shall
20 exclude adult protective service providers.

21 A coroner's or medical examiner's office may share with
22 the review team medical records that have been made available
23 to the coroner's or medical examiner's office in connection
24 with that office's investigation of a death.

25 Members of a review team and the Advisory Council are not
26 subject to examination, in any civil or criminal proceeding,

1 concerning information presented to members of the review team
2 or the Advisory Council or opinions formed by members of the
3 review team or the Advisory Council based on that information.
4 A person may, however, be examined concerning information
5 provided to a review team or the Advisory Council.

6 (d-5) Meetings of the review teams and the Advisory
7 Council may be closed to the public under the Open Meetings
8 Act. Records and information provided to a review team and the
9 Advisory Council, and records maintained by a team or the
10 Advisory Council, are exempt from release under the Freedom of
11 Information Act.

12 (e) A review team's recommendation in relation to a case
13 discussed or reviewed by the review team, including, but not
14 limited to, a recommendation concerning an investigation or
15 prosecution, may be disclosed by the review team upon the
16 completion of its review and at the discretion of a majority of
17 its members who reviewed the case.

18 (e-5) The State shall indemnify and hold harmless members
19 of a review team and the Advisory Council for all their acts,
20 omissions, decisions, or other conduct arising out of the
21 scope of their service on the review team or Advisory Council,
22 except those involving willful or wanton misconduct. The
23 method of providing indemnification shall be as provided in
24 the State Employee Indemnification Act.

25 (f) The Department, in consultation with coroners, medical
26 examiners, and law enforcement agencies, shall use aggregate

1 data gathered by and recommendations from the Advisory Council
2 and the review teams to create an annual report and may use
3 those data and recommendations to develop education,
4 prevention, prosecution, or other strategies designed to
5 improve the coordination of services for at-risk adults and
6 their families. The Department or other State or county
7 agency, in consultation with coroners, medical examiners, and
8 law enforcement agencies, also may use aggregate data gathered
9 by the review teams to create a database of at-risk
10 individuals.

11 (g) The Department shall adopt such rules and regulations
12 as it deems necessary to implement this Section.

13 (Source: P.A. 98-49, eff. 7-1-13; 98-1039, eff. 8-25-14;
14 99-78, eff. 7-20-15; 99-530, eff. 1-1-17.)

15 Section 10. The Criminal Code of 2012 is amended by
16 changing Sections 3-5 and 17-56 as follows:

17 (720 ILCS 5/3-5) (from Ch. 38, par. 3-5)

18 Sec. 3-5. General limitations.

19 (a) A prosecution for: (1) first degree murder, attempt to
20 commit first degree murder, second degree murder, involuntary
21 manslaughter, reckless homicide, a violation of subparagraph
22 (F) of paragraph (1) of subsection (d) of Section 11-501 of the
23 Illinois Vehicle Code for the offense of aggravated driving
24 under the influence of alcohol, other drug or drugs, or

1 intoxicating compound or compounds, or any combination thereof
2 when the violation was a proximate cause of a death, leaving
3 the scene of a motor vehicle accident involving death or
4 personal injuries under Section 11-401 of the Illinois Vehicle
5 Code, failing to give information and render aid under Section
6 11-403 of the Illinois Vehicle Code, concealment of homicidal
7 death, treason, arson, residential arson, aggravated arson,
8 forgery, child pornography under paragraph (1) of subsection
9 (a) of Section 11-20.1, or aggravated child pornography under
10 paragraph (1) of subsection (a) of Section 11-20.1B, or (2)
11 any offense involving sexual conduct or sexual penetration, as
12 defined by Section 11-0.1 of this Code may be commenced at any
13 time.

14 (a-5) A prosecution for theft of property exceeding
15 \$100,000 in value under Section 16-1, identity theft under
16 subsection (a) of Section 16-30, aggravated identity theft
17 under subsection (b) of Section 16-30, financial exploitation
18 of an elderly person or a person with a disability under
19 Section 17-56; theft by deception of a victim 60 years of age
20 or older or a person with a disability under Section 16-1; or
21 any offense set forth in Article 16H or Section 17-10.6 may be
22 commenced within 7 years of the last act committed in
23 furtherance of the crime.

24 (b) Unless the statute describing the offense provides
25 otherwise, or the period of limitation is extended by Section
26 3-6, a prosecution for any offense not designated in

1 subsection (a) or (a-5) must be commenced within 3 years after
2 the commission of the offense if it is a felony, or within one
3 year and 6 months after its commission if it is a misdemeanor.
4 (Source: P.A. 100-149, eff. 1-1-18; 100-863, eff. 8-14-18;
5 101-130, eff. 1-1-20.)

6 (720 ILCS 5/17-56) (was 720 ILCS 5/16-1.3)

7 Sec. 17-56. Financial exploitation of an elderly person or
8 a person with a disability.

9 (a) A person commits financial exploitation of an elderly
10 person or a person with a disability when he or she stands in a
11 position of trust or confidence with the elderly person or a
12 person with a disability and he or she knowingly:

13 (1) by deception or intimidation obtains control over
14 the property of an elderly person or a person with a
15 disability; or

16 (2) illegally uses the assets or resources of an
17 elderly person or a person with a disability.

18 (b) Sentence. Financial exploitation of an elderly person
19 or a person with a disability is: (1) a Class 4 felony if the
20 value of the property is \$300 or less, (2) a Class 3 felony if
21 the value of the property is more than \$300 but less than
22 \$5,000, (3) a Class 2 felony if the value of the property is
23 \$5,000 or more but less than \$50,000, and (4) a Class 1 felony
24 if the value of the property is \$50,000 or more or if the
25 elderly person is over 70 years of age and the value of the

1 property is \$15,000 or more or if the elderly person is 80
2 years of age or older and the value of the property is \$5,000
3 or more.

4 (c) For purposes of this Section:

5 (1) "Elderly person" means a person 60 years of age or
6 older.

7 (2) "Person with a disability" means a person who
8 suffers from a physical or mental impairment resulting
9 from disease, injury, functional disorder or congenital
10 condition that impairs the individual's mental or physical
11 ability to independently manage his or her property or
12 financial resources, or both.

13 (3) "Intimidation" means the communication to an
14 elderly person or a person with a disability that he or she
15 shall be deprived of food and nutrition, shelter,
16 prescribed medication or medical care and treatment or
17 conduct as provided in Section 12-6 of this Code.

18 (4) "Deception" means, in addition to its meaning as
19 defined in Section 15-4 of this Code, a misrepresentation
20 or concealment of material fact relating to the terms of a
21 contract or agreement entered into with the elderly person
22 or person with a disability or to the existing or
23 pre-existing condition of any of the property involved in
24 such contract or agreement; or the use or employment of
25 any misrepresentation, false pretense or false promise in
26 order to induce, encourage or solicit the elderly person

1 or person with a disability to enter into a contract or
2 agreement.

3 The illegal use of the assets or resources of an elderly
4 person or a person with a disability includes, but is not
5 limited to, the misappropriation of those assets or resources
6 by undue influence, breach of a fiduciary relationship, fraud,
7 deception, extortion, or use of the assets or resources
8 contrary to law.

9 A person stands in a position of trust and confidence with
10 an elderly person or person with a disability when he (i) is a
11 parent, spouse, adult child or other relative by blood or
12 marriage of the elderly person or person with a disability,
13 (ii) is a joint tenant or tenant in common with the elderly
14 person or person with a disability, (iii) has a legal or
15 fiduciary relationship with the elderly person or person with
16 a disability, (iv) is a financial planning or investment
17 professional, ~~or~~ (v) is a paid or unpaid caregiver for the
18 elderly person or person with a disability, or (vi) is a friend
19 or acquaintance in a position of trust.

20 (d) Limitations. Nothing in this Section shall be
21 construed to limit the remedies available to the victim under
22 the Illinois Domestic Violence Act of 1986.

23 (e) Good faith efforts. Nothing in this Section shall be
24 construed to impose criminal liability on a person who has
25 made a good faith effort to assist the elderly person or person
26 with a disability in the management of his or her property, but

1 through no fault of his or her own has been unable to provide
2 such assistance.

3 (f) Not a defense. It shall not be a defense to financial
4 exploitation of an elderly person or person with a disability
5 that the accused reasonably believed that the victim was not
6 an elderly person or person with a disability. Consent is not a
7 defense to financial exploitation of an elderly person or a
8 person with a disability if the accused knew or had reason to
9 know that the elderly person or a person with a disability
10 lacked capacity to consent.

11 (g) Civil Liability. A civil cause of action exists for
12 financial exploitation of an elderly person or a person with a
13 disability as described in subsection (a) of this Section. A
14 person against whom a civil judgment has been entered for
15 financial exploitation of an elderly person or person with a
16 disability shall be liable to the victim or to the estate of
17 the victim in damages of treble the amount of the value of the
18 property obtained, plus reasonable attorney fees and court
19 costs. In a civil action under this subsection, the burden of
20 proof that the defendant committed financial exploitation of
21 an elderly person or a person with a disability as described in
22 subsection (a) of this Section shall be by a preponderance of
23 the evidence. This subsection shall be operative whether or
24 not the defendant has been charged or convicted of the
25 criminal offense as described in subsection (a) of this
26 Section. This subsection (g) shall not limit or affect the

1 right of any person to bring any cause of action or seek any
2 remedy available under the common law, or other applicable
3 law, arising out of the financial exploitation of an elderly
4 person or a person with a disability.

5 (h) If a person is charged with financial exploitation of
6 an elderly person or a person with a disability that involves
7 the taking or loss of property valued at more than \$5,000, a
8 prosecuting attorney may file a petition with the circuit
9 court of the county in which the defendant has been charged to
10 freeze the assets of the defendant in an amount equal to but
11 not greater than the alleged value of lost or stolen property
12 in the defendant's pending criminal proceeding for purposes of
13 restitution to the victim. The burden of proof required to
14 freeze the defendant's assets shall be by a preponderance of
15 the evidence.

16 (Source: P.A. 101-394, eff. 1-1-20.)