



Sen. Jacqueline Y. Collins

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10200SB2137sam001

LRB102 16414 CPF 24871 a

1 AMENDMENT TO SENATE BILL 2137

2 AMENDMENT NO. _____. Amend Senate Bill 2137 by replacing
3 everything after the enacting clause with the following:

4 "Section 5. The Nursing Home Care Act is amended by adding
5 Section 3-102.3 as follows:

6 (210 ILCS 45/3-102.3 new)

7 Sec. 3-102.3. Religious and recreational activities;
8 social isolation.

9 (a) In this Section:

10 "Religious and recreational activities" includes any
11 religious, social, or recreational activity that is consistent
12 with a resident's preferences and choosing, regardless of
13 whether the activity is coordinated, offered, provided, or
14 sponsored by facility staff or by an outside activities
15 provider.

16 "Social isolation" means a state of isolation wherein a

1 resident of a long-term care facility is unable to engage in
2 social interactions and religious and recreational activities
3 with other facility residents or with family members, friends,
4 loved ones, caregivers and external support systems.

5 (b) The Department shall require each long-term care
6 facility in the State to adopt and implement written policies,
7 provide for the availability of technology to facility
8 residents, and ensure that appropriate staff and other
9 capabilities are in place to prevent the social isolation of
10 facility residents. The policies shall not be interpreted as a
11 substitute for in person visitation, but shall be wholly in
12 addition to existing in person visitation policies.

13 (c) The social isolation prevention policies adopted by
14 each long-term care facility pursuant to subsection (b) shall:

15 (1) authorize, and include specific protocols and
16 procedures to encourage and enable, residents of the
17 facility to engage in in-person contact, communication,
18 religious activity, and recreational activity with other
19 facility residents and with family members, friends, loved
20 ones, caregivers, and other external support systems,
21 except when the in-person contact, communication,
22 religious activity, or recreational activity is
23 prohibited, restricted, or limited by federal or State
24 statute, rule, regulation, or guidance;

25 (2) authorize, and include specific protocols and
26 procedures to encourage and enable, residents to engage in

1 face-to-face, verbal-based, or auditory-based contact,
2 communication, religious activity, and recreational
3 activity with other facility residents and with family
4 members, friends, loved ones, caregivers, and other
5 external support systems, through the use of electronic or
6 virtual means and methods, including, but not limited to,
7 computer technology, the Internet, social media,
8 videoconferencing, videophone, and other innovative
9 technological means or methods, whenever the resident is
10 subject to restrictions that limit his or her ability to
11 engage in in-person contact, communication, religious
12 activity, or recreational activity as authorized by
13 paragraph (1);

14 (3) provide for residents of the facility to be given
15 access to assistive and supportive technology as may be
16 necessary to facilitate the residents' engagement in
17 face-to-face, verbal-based, or auditory-based contact,
18 communication, religious activity, and recreational
19 activity with other residents, family members, friends,
20 and other external support systems, through electronic
21 means, as provided by paragraph (2);

22 (4) include specific administrative policies,
23 procedures, and protocols governing:

24 (A) the acquisition, maintenance, and replacement
25 of computers, videoconferencing equipment,
26 distance-based communications technology, assistive

1 and supportive technology and devices, and other
2 technological equipment, accessories, and electronic
3 licenses as may be necessary to ensure that residents
4 are able to engage in face-to-face, verbal-based, or
5 auditory-based contact, communication, religious
6 activity, and recreational activity with other
7 facility residents and with family members, friends,
8 loved ones, caregivers, and other external support
9 systems, through electronic means, in accordance with
10 the provisions of paragraphs (2) and (3) of this
11 subsection;

12 (B) the use of environmental barriers and other
13 controls when the equipment and devices acquired
14 pursuant to subparagraph (A) are in use, especially in
15 cases where the equipment or devices are likely to
16 become contaminated with bodily substances, are
17 touched frequently with gloved or ungloved hands, or
18 are difficult to clean; and

19 (C) the regular cleaning and sanitizing of the
20 equipment and devices acquired pursuant to
21 subparagraph (A) and any environmental barriers or
22 other physical controls used in association therewith;

23 (5) require appropriate staff to assess and regularly
24 reassess the individual needs and preferences of facility
25 residents with respect to the residents' participation in
26 social interactions and religious and recreational

1 activities, including specific protocols and procedures to
2 ensure that the quantity of devices and equipment
3 maintained on-site at the facility remains sufficient, at
4 all times, to meet the assessed social and activity needs
5 and preferences of each facility resident; family members
6 or caregivers should be considered, as appropriate, in the
7 assessment and reassessment;

8 (6) require appropriate staff, upon the request of a
9 resident or the resident's family members, guardian, or
10 representative to develop an individualized visitation
11 plan for the resident, which shall:

12 (A) identify the assessed needs and preferences of
13 the resident and any preferences specified by the
14 resident's representative, unless a preference
15 specified by the resident conflicts with a preference
16 specified by the resident's representative, in which
17 case the resident's preference shall take priority;

18 (B) address the need for a visitation schedule and
19 establish a visitation schedule if deemed to be
20 appropriate;

21 (C) document the long-term care facility's defined
22 virtual hours of visitation and inform the resident
23 and the resident's representative that visitation
24 pursuant to paragraph (2) of subsection (c) will
25 adhere to the defined visitation hours;

26 (D) describe the location and modalities to be

1 used in visitation; and

2 (E) describe the respective responsibilities of
3 staff, visitors, and the resident when engaging in
4 visitation pursuant to the individualized visitation
5 plan;

6 (7) notify the resident and the resident's
7 representative that they have the right to request of
8 facility staff the creation and review of a resident's
9 individualized visitation plan;

10 (8) include specific policies, protocols, and
11 procedures governing a resident's requisition, use, and
12 return of devices and equipment maintained pursuant to
13 subparagraph (A) of paragraph (4), and require appropriate
14 staff to communicate those policies, protocols, and
15 procedures to residents; and

16 (9) designate at least one member of the therapeutic
17 recreation or activities department, or, if the facility
18 does not have such a department, designate at least one
19 senior staff member, as determined by facility management,
20 to train other appropriate facility employees, including,
21 but not limited to, activities professionals and
22 volunteers, social workers, occupational therapists, and
23 therapy assistants, to provide direct assistance to
24 residents upon request and on an as-needed basis, as
25 necessary to ensure that each resident is able to
26 successfully access and use, for the purposes specified in

1 paragraphs (2) and (3) of this subsection, the technology,
2 devices, and equipment acquired pursuant to subparagraph
3 (A) of paragraph (4).

4 (d) A long-term care facility may apply for civil monetary
5 penalty fund grants and may request other available federal
6 and State funds to obtain assistive and supportive
7 technologies and related accessories that would facilitate
8 communication between residents and other family members,
9 friends, and external support systems.

10 (e) The Department shall determine whether a long-term
11 care facility is in compliance with the provisions of this
12 Section and the policies, protocols, and procedures adopted
13 pursuant to this Section when conducting an annual licensure
14 and certification survey, when a complaint is received, or as
15 frequently as may be necessary to ensure compliance with the
16 provisions of this Section.

17 In addition to any other applicable penalties provided by
18 law, a long-term care facility that fails to comply with the
19 provisions of this Section or properly implement the policies,
20 protocols, and procedures adopted pursuant to subsection (b)
21 shall be liable to pay an administrative penalty as a Type "C"
22 violation, the amount of which shall be determined in
23 accordance with a schedule established by the Department by
24 rule. The schedule shall provide for an enhanced
25 administrative penalty in the case of a repeat or ongoing
26 violation. Implementation of an administrative penalty as a

1 Type "C" violation under this subsection shall not be imposed
2 prior to January 1, 2023.

3 (f) Whenever a complaint received by the Office of State
4 Long Term Care Ombudsman discloses evidence that a long-term
5 care facility has failed to comply with the provisions of this
6 Section or to properly implement the policies, protocols, and
7 procedures adopted pursuant to subsection (b), the Office of
8 State Long Term Care Ombudsman shall refer the matter to the
9 Department.

10 (g) This Section does not impact, limit, or constrict a
11 resident's right to or usage of his or her personal property or
12 electronic monitoring under Section 2-115.

13 (h) Within 60 days after the effective date of this
14 amendatory Act of the 102nd General Assembly, the Department
15 shall adopt any rules necessary to implement the provisions of
16 this Section. The rules shall include, but need not be limited
17 to, minimum standards for the social isolation prevention
18 policies to be adopted pursuant to subsection (b), a penalty
19 schedule to be used pursuant to subsection (e), and policies
20 regarding a long-term care facility's Internet access and
21 subsequent Internet barriers in relation to a resident's
22 visitation plan pursuant to paragraph (2) of subsection (c).
23 The Department's rules shall take into account Internet
24 bandwidth limitations outside of the control of a long-term
25 care facility.

1 Section 10. The Illinois Administrative Procedure Act is
2 amended by adding Section 5-45.8 as follows:

3 (5 ILCS 100/5-45.8 new)

4 Sec. 5-45.8. Emergency rulemaking; Nursing Home Care Act.
5 To provide for the expeditious and timely implementation of
6 this amendatory Act of the 102nd General Assembly, emergency
7 rules implementing Section 3-102.3 of the Nursing Home Care
8 Act may be adopted in accordance with Section 5-45 by the
9 Department of Public Health. The adoption of emergency rules
10 authorized by Section 5-45 and this Section is deemed to be
11 necessary for the public interest, safety, and welfare.
12 This Section is repealed on January 1, 2027.

13 Section 99. Effective date. This Act takes effect upon
14 becoming law.".