

1 AN ACT concerning regulation.

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

4 Section 5. The Hospital Licensing Act is amended by  
5 changing Section 10.10 as follows:

6 (210 ILCS 85/10.10)

7 Sec. 10.10. Nurse Staffing by Patient Acuity.

8 (a) Findings. The Legislature finds and declares all of  
9 the following:

10 (1) The State of Illinois has a substantial interest  
11 in promoting quality care and improving the delivery of  
12 health care services.

13 (2) Evidence-based studies have shown that the basic  
14 principles of staffing in the acute care setting should be  
15 based on the complexity of patients' care needs aligned  
16 with available nursing skills to promote quality patient  
17 care consistent with professional nursing standards.

18 (3) Compliance with this Section promotes an  
19 organizational climate that values registered nurses'  
20 input in meeting the health care needs of hospital  
21 patients.

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

23 "Acuity model" means an assessment tool selected and

1 implemented by a hospital, as recommended by a nursing care  
2 committee, that assesses the complexity of patient care needs  
3 requiring professional nursing care and skills and aligns  
4 patient care needs and nursing skills consistent with  
5 professional nursing standards.

6 "Department" means the Department of Public Health.

7 "Direct patient care" means care provided by a registered  
8 professional nurse with direct responsibility to oversee or  
9 carry out medical regimens or nursing care for one or more  
10 patients.

11 "Nursing care committee" means a hospital-wide committee  
12 or committees of nurses whose functions, in part or in whole,  
13 contribute to the development, recommendation, and review of  
14 the hospital's nurse staffing plan established pursuant to  
15 subsection (d).

16 "Registered professional nurse" means a person licensed as  
17 a Registered Nurse under the Nurse Practice Act.

18 "Written staffing plan for nursing care services" means a  
19 written plan for the assignment of patient care nursing staff  
20 based on multiple nurse and patient considerations that yield  
21 minimum staffing levels for inpatient care units and the  
22 adopted acuity model aligning patient care needs with nursing  
23 skills required for quality patient care consistent with  
24 professional nursing standards.

25 (c) Written staffing plan.

26 (1) Every hospital shall implement a written

1 hospital-wide staffing plan, prepared by a nursing care  
2 committee or committees, that provides for minimum direct  
3 care professional registered nurse-to-patient staffing  
4 needs for each inpatient care unit, including inpatient  
5 emergency departments. If the staffing plan prepared by  
6 the nursing care committee is not adopted by the hospital,  
7 or if substantial changes are proposed to it, the chief  
8 nursing officer shall either: (i) provide a written  
9 explanation to the committee of the reasons the plan was  
10 not adopted; or (ii) provide a written explanation of any  
11 substantial changes made to the proposed plan prior to it  
12 being adopted by the hospital. The written hospital-wide  
13 staffing plan shall include, but need not be limited to,  
14 the following considerations:

15 (A) The complexity of complete care, assessment on  
16 patient admission, volume of patient admissions,  
17 discharges and transfers, evaluation of the progress  
18 of a patient's problems, ongoing physical assessments,  
19 planning for a patient's discharge, assessment after a  
20 change in patient condition, and assessment of the  
21 need for patient referrals.

22 (B) The complexity of clinical professional  
23 nursing judgment needed to design and implement a  
24 patient's nursing care plan, the need for specialized  
25 equipment and technology, the skill mix of other  
26 personnel providing or supporting direct patient care,

1           and involvement in quality improvement activities,  
2           professional preparation, and experience.

3           (C) Patient acuity and the number of patients for  
4           whom care is being provided.

5           (D) The ongoing assessments of a unit's patient  
6           acuity levels and nursing staff needed shall be  
7           routinely made by the unit nurse manager or his or her  
8           designee.

9           (E) The identification of additional registered  
10          nurses available for direct patient care when  
11          patients' unexpected needs exceed the planned workload  
12          for direct care staff.

13          (2) In order to provide staffing flexibility to meet  
14          patient needs, every hospital shall identify an acuity  
15          model for adjusting the staffing plan for each inpatient  
16          care unit.

17          (2.5) Each hospital shall implement the staffing plan  
18          and assign nursing personnel to each inpatient care unit,  
19          including inpatient emergency departments, in accordance  
20          with the staffing plan.

21          (A) A registered nurse may report to the nursing  
22          care committee any variations where the nurse  
23          personnel assignment in an inpatient care unit is not  
24          in accordance with the adopted staffing plan and may  
25          make a written report to the nursing care committee  
26          based on the variations.

1           (B) Shift-to-shift adjustments in staffing levels  
2           required by the staffing plan may be made by the  
3           appropriate hospital personnel overseeing inpatient  
4           care operations. If a registered nurse in an inpatient  
5           care unit objects to a shift-to-shift adjustment, the  
6           registered nurse may submit a written report to the  
7           nursing care committee.

8           (C) The nursing care committee shall develop a  
9           process to examine and respond to written reports  
10          submitted under subparagraphs (A) and (B) of this  
11          paragraph (2.5), including the ability to determine if  
12          a specific written report is resolved or should be  
13          dismissed.

14          (3) The written staffing plan shall be posted, either  
15          by physical or electronic means, in a conspicuous and  
16          accessible location for both patients and direct care  
17          staff, as required under the Hospital Report Card Act. A  
18          copy of the written staffing plan shall be provided to any  
19          member of the general public upon request.

20          (d) Nursing care committee.

21          (1) Every hospital shall have a nursing care committee  
22          that meets at least 6 times per year. A hospital shall  
23          appoint members of a committee whereby at least 55% of the  
24          members are registered professional nurses providing  
25          direct inpatient care, one of whom shall be selected  
26          annually by the direct inpatient care nurses to serve as

1 co-chair of the committee.

2 (2) (Blank).

3 (2.5) A nursing care committee shall prepare and  
4 recommend to hospital administration the hospital's  
5 written hospital-wide staffing plan. If the staffing plan  
6 is not adopted by the hospital, the chief nursing officer  
7 shall provide a written statement to the committee prior  
8 to a staffing plan being adopted by the hospital that: (A)  
9 explains the reasons the committee's proposed staffing  
10 plan was not adopted; and (B) describes the changes to the  
11 committee's proposed staffing or any alternative to the  
12 committee's proposed staffing plan.

13 (3) A nursing care committee's or committees' written  
14 staffing plan for the hospital shall be based on the  
15 principles from the staffing components set forth in  
16 subsection (c). In particular, a committee or committees  
17 shall provide input and feedback on the following:

18 (A) Selection, implementation, and evaluation of  
19 minimum staffing levels for inpatient care units.

20 (B) Selection, implementation, and evaluation of  
21 an acuity model to provide staffing flexibility that  
22 aligns changing patient acuity with nursing skills  
23 required.

24 (C) Selection, implementation, and evaluation of a  
25 written staffing plan incorporating the items  
26 described in subdivisions (c)(1) and (c)(2) of this

1 Section.

2 (D) Review the nurse staffing plans for all  
3 inpatient areas and current acuity tools and measures  
4 in use. The nursing care committee's review shall  
5 consider:

6 (i) patient outcomes;

7 (ii) complaints regarding staffing, including  
8 complaints about a delay in direct care nursing or  
9 an absence of direct care nursing;

10 (iii) the number of hours of nursing care  
11 provided through an inpatient hospital unit  
12 compared with the number of inpatients served by  
13 the hospital unit during a 24-hour period;

14 (iv) the aggregate hours of overtime worked by  
15 the nursing staff;

16 (v) the extent to which actual nurse staffing  
17 for each hospital inpatient unit differs from the  
18 staffing specified by the staffing plan; and

19 (vi) any other matter or change to the  
20 staffing plan determined by the committee to  
21 ensure that the hospital is staffed to meet the  
22 health care needs of patients.

23 (4) A nursing care committee must issue a written  
24 report addressing the items described in subparagraphs (A)  
25 through (D) of paragraph (3) semi-annually. A written copy  
26 of this report shall be made available to direct inpatient

1 care nurses by making available a paper copy of the  
2 report, distributing it electronically, or posting it on  
3 the hospital's website.

4 (5) A nursing care committee must issue a written  
5 report at least annually to the hospital governing board  
6 that addresses items including, but not limited to: the  
7 items described in paragraph (3); changes made based on  
8 committee recommendations and the impact of such changes;  
9 and recommendations for future changes related to nurse  
10 staffing.

11 (6) A nursing care committee must annually notify the  
12 hospital nursing staff of the staff's rights under this  
13 Section. The annual notice must provide a phone number and  
14 an email address for staff to report noncompliance with  
15 the nursing staff's rights as described in this Section.  
16 The notice must be provided by email or by regular mail in  
17 a manner that effectively facilitates receipt of the  
18 notice. The Department shall monitor and enforce the  
19 requirements of this paragraph (6).

20 (e) Nothing in this Section 10.10 shall be construed to  
21 limit, alter, or modify any of the terms, conditions, or  
22 provisions of a collective bargaining agreement entered into  
23 by the hospital.

24 (f) No hospital may discipline, discharge, or take any  
25 other adverse employment action against an employee solely  
26 because the employee expresses a concern or complaint



1 regarding an alleged violation of this Section or concerns  
2 related to nurse staffing.

3 (g) Any employee of a hospital may file a complaint with  
4 the Department regarding an alleged violation of this Section.  
5 The Department must forward notification of the alleged  
6 violation to the hospital in question within 10 business days  
7 after the complaint is filed. Upon receiving a complaint of a  
8 violation of this Section, the Department may take any action  
9 authorized under Sections 7 or 9 of this Act.

10 (Source: P.A. 102-4, eff. 4-27-21; 102-641, eff. 8-27-21;  
11 102-813, eff. 5-13-22.)