

1 AN ACT concerning nursing homes.

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

4 Section 5. The Nursing Home Care Act is amended by  
5 adding Section 3-202.3 as follows:

6 (210 ILCS 45/3-202.3 new)

7 Sec. 3-202.3. Authorization for nursing delegation to  
8 permit direct care staff to administer medications.

9 (a) The Department of Public Health shall develop a  
10 training program for authorized direct care staff to  
11 administer oral and topical medications under the supervision  
12 and monitoring of a registered professional nurse in  
13 facilities licensed under this Act. This training program  
14 shall be developed in consultation with professional  
15 associations representing (i) physicians licensed to practice  
16 medicine in all its branches, (ii) registered professional  
17 nurses, and (iii) pharmacists.

18 (b) For the purposes of this Section:

19 "Authorized direct care staff" means non-licensed  
20 persons who have successfully completed a medication  
21 administration training program approved by the Department  
22 and conducted by a nurse-trainer.

23 "Nurse-trainer training program" means a standardized,  
24 competency-based medication administration train-the-trainer  
25 program provided by the Department and conducted by a master  
26 nurse-trainer for the purpose of training nurse-trainers to  
27 train persons employed or under contract to provide direct  
28 care or treatment to individuals receiving services to  
29 administer medications and provide self-administration of  
30 medication training to individuals under the supervision and  
31 monitoring of the nurse-trainer. The program incorporates

1 adult learning styles, teaching strategies, classroom  
2 management, and a curriculum overview, including the ethical  
3 and legal aspects of supervising those administering  
4 medications.

5 "Training program" means a standardized medication  
6 administration training program approved by the Department  
7 and conducted by a registered professional nurse for the  
8 purpose of training persons employed or under contract to  
9 provide direct care or treatment to individuals receiving  
10 services to administer medications under the delegation and  
11 supervision of a nurse-trainer.

12 (c) Training and authorization of non-licensed direct  
13 care staff by nurse-trainers must meet the requirements of  
14 this subsection.

15 (1) Prior to training non-licensed direct care  
16 staff to administer medication, the nurse-trainer shall  
17 perform the following for each individual to whom  
18 medication will be administered by non-licensed direct  
19 care staff:

20 (A) An assessment of the individual's health  
21 history and physical and mental status.

22 (B) An evaluation of the medications  
23 prescribed.

24 (2) Non-licensed authorized direct care staff shall  
25 meet the following criteria:

26 (A) Be 18 years of age or older.

27 (B) Have completed high school or its  
28 equivalent (GED).

29 (C) Have demonstrated functional literacy.

30 (D) Have satisfactorily completed the Health  
31 and Safety component of a Department authorized  
32 direct care staff training program.

33 (E) Have successfully completed the training  
34 program, passed the written portion of the

1 comprehensive exam, and scored 100% on the  
2 competency-based assessment specific to the  
3 individual and his or her medications.

4 (F) Have received additional competency-based  
5 assessment by the nurse-trainer as deemed necessary  
6 by the nurse-trainer whenever a change of medication  
7 occurs or a new individual that requires medication  
8 administration enters the program.

9 (3) Authorized direct care staff shall be  
10 re-evaluated by a nurse-trainer at least annually or more  
11 frequently at the discretion of the registered  
12 professional nurse. Any necessary retraining shall be to  
13 the extent that is necessary to ensure competency of the  
14 authorized direct care staff to administer medication.

15 (4) Authorization of direct care staff to  
16 administer medication shall be revoked if, in the opinion  
17 of the registered professional nurse, the authorized  
18 direct care staff is no longer competent to administer  
19 medication.

20 (5) The registered professional nurse shall assess  
21 an individual's health status at least annually or more  
22 frequently at the discretion of the registered  
23 professional nurse.

24 (d) Quality Assurance.

25 (1) A registered professional nurse, advanced  
26 practice nurse, licensed practical nurse, physician  
27 licensed to practice medicine in all its branches,  
28 physician assistant, or pharmacist shall review the  
29 following for all individuals:

30 (A) Medication orders.

31 (B) Medication labels to ensure the labels  
32 match the orders issued by the physician licensed to  
33 practice medicine in all its branches, advanced  
34 practice nurse, or physician assistant.

1           (C) Medication administration records to  
2           ensure that the records are completed appropriately  
3           for:

4                   (i) medication administered as  
5           prescribed;

6                   (ii) refusal by the individual; and

7                   (iii) full signatures provided for all  
8           initials used.

9           (2) Reviews shall occur at least quarterly, but may  
10          be done more frequently at the discretion of the  
11          registered professional nurse or advanced practice nurse.

12          (3) A quality assurance review of medication errors  
13          and data collection for the purpose of monitoring and  
14          recommending corrective action shall be conducted within  
15          7 days and included in the required annual review.

16          (e) Facilities using authorized direct care staff to  
17          administer medications are responsible for documenting and  
18          maintaining records on the training that is completed.

19          (f) The absence of this training program constitutes a  
20          threat to the public interest, safety, and welfare and  
21          necessitates emergency rulemaking by the Department of Public  
22          Health under Section 5-45 of the Illinois Administrative  
23          Procedure Act.

24          (g) Direct care staff who fail to qualify for delegated  
25          authority to administer medications pursuant to the  
26          provisions of this Section shall be given additional  
27          education and testing to meet criteria for delegation  
28          authority to administer medications. Any direct care staff  
29          person who fails to qualify as an authorized direct care  
30          staff after initial training and testing must within 3 months  
31          be given another opportunity for retraining and retesting. A  
32          direct care staff person who fails to meet criteria for  
33          delegated authority to administer medication, including, but  
34          not limited to, failure of the written test on 2 occasions

1 shall be given consideration for shift transfer or  
2 reassignment, if possible. No employee shall be terminated  
3 for failure to qualify during the 3-month time period  
4 following initial testing. Refusal to complete training and  
5 testing required by this Section may be grounds for immediate  
6 dismissal.

7 (h) No authorized direct care staff person delegated to  
8 administer medication shall be subject to suspension or  
9 discharge for errors resulting from the staff person's acts  
10 or omissions when performing the functions unless the staff  
11 person's actions or omissions constitute willful and wanton  
12 conduct. Nothing in this subsection is intended to supersede  
13 paragraph (4) of subsection (c).

14 (i) A registered professional nurse, advanced practice  
15 nurse, physician licensed to practice medicine in all its  
16 branches, or physician assistant shall be on duty or on call  
17 at all times in any facility covered by this Section.

18 (j) The facility shall be responsible for maintaining  
19 liability insurance for any program covered by this Section.