

Rep. Patricia R. Bellock

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09500HB0378ham002

LRB095 06245 DRJ 32255 a

1	AMENDMENT TO HOUSE BILL 378
2	AMENDMENT NO Amend House Bill 378, AS AMENDED, by
3	replacing everything after the enacting clause with the
4	following:
5	"Section 1. Short title. This Act may be cited as the MRSA
6	Screening and Reporting Act.
7	Section 5. MRSA control program. In order to improve the
8	prevention of hospital-associated bloodstream infections due
9	to methicillin-resistant Staphylococcus aureus ("MRSA"), every
10	hospital shall establish an MRSA control program that requires:
11	(1) Identification of all MRSA-colonized patients in
12	all intensive care units, and at-risk patients identified
13	by the hospital, through active surveillance testing.
14	(2) Isolation of identified MRSA-colonized or
15	MRSA-infected patients in an appropriate manner.
16	(3) Strict adherence to hand washing and hygiene

1 guidelines.

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Illinois.

- 2 (4) Maintenance of records and reporting of cases under 3 Section 10 of this Act.
- 4 Section 10. Reports to Department of Public Health.
- 5 (a) For all patients who are identified with nosocomial S. aureus bloodstream infection due to MRSA pursuant to Section 5, 6 7 the Department of Public Health shall require the annual 8 reporting of such cases as a communicable disease or condition. 9 The report shall include the total numbers of all nosocomial S. 10 aureus bloodstream infections due to MRSA, defined as those S. aureus bloodstream infections that are acquired during the 11 12 initial stay in the hospital with onset of symptoms after 72 13 hours in the hospital. The Department shall compile aggregate 14 data from all hospitals for all such patients and shall make

(b) The Department of Public Health shall establish by regulation a list of those communicable diseases and conditions for which annual reporting of specific data shall be required.

such data available on its website and in all reports on health

statistics and reportable communicable disease cases

(c) After October 1, 2007, such reportable diseases and conditions shall include the total number of infections due to methicillin-resistant Staphylococcus aureus (MRSA) that (1) are present on admission to a hospital and (2) occurred during the stay, reported separately, as compiled from diagnostic

- 1 codes contained in hospital discharge data provided to the Department; provided that such reporting requirement shall 2 apply only for patients in all intensive care units and other 3 4 at-risk patients identified by hospitals for 5 surveillance testing for MRSA. The Department is authorized to require hospitals, based on quidelines developed by the 6 National Center for Health Statistics, after October 1, 2007, 7 to submit data to the Department that is coded as "present on
- Section 90. Repeal. This Act is repealed on January 1, 2011.
- Section 95. The Hospital Licensing Act is amended by changing Section 6.08 as follows:
- 14 (210 ILCS 85/6.08) (from Ch. 111 1/2, par. 147.08)

admission" and "occurred during the stay".

15 Sec. 6.08. (a) Every hospital shall provide notification as required in this Section to police officers, firefighters, 16 17 emergency medical technicians, and ambulance personnel who 18 have provided or are about to provide emergency care or life support services to a patient who has been diagnosed as having 19 20 communicable or infectious disease. dangerous 21 notification shall not include the name of the patient, and the 22 emergency services provider agency and any person receiving such notification shall treat the information received as a 23

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- 1 confidential medical record.
- (b) The Department shall establish by regulation a list of 2 those communicable reportable diseases and conditions for 3 4 which notification shall be provided.
 - (b-5) The Department shall establish by regulation a list of those communicable diseases and conditions for which annual reporting of specific data shall be required. This subsection (b-5) is inoperative after December 31, 2010.
 - (b-10) After October 1, 2007, such reportable diseases and conditions shall include the total number of infections due to methicillin-resistant Staphylococcus aureus (MRSA) that (1) are present on admission to a hospital and (2) occurred during the stay, reported separately, as compiled from diagnostic codes contained in hospital discharge data provided to the Department; provided that such reporting requirement shall apply only for patients in all intensive care units and other at-risk patients identified by hospitals for active surveillance testing for MRSA. The Department is authorized to require hospitals, based on guidelines developed by the National Center for Health Statistics, after October 1, 2007, to submit data to the Department that is coded as "present on admission" and "occurred during the stay". This subsection (b-10) is inoperative after December 31, 2010.
 - (c) The hospital shall send the letter of notification within 72 hours after a confirmed diagnosis of any of the communicable diseases listed by the Department pursuant to

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subsection (b), except confirmed diagnoses of Acquired Immunodeficiency Syndrome (AIDS). If there is a confirmed diagnosis of AIDS, the hospital shall send the letter of notification only if the police officers, firefighters, emergency medical technicians, or ambulance personnel have indicated on the ambulance run sheet that a reasonable possibility exists that they have had blood or body fluid contact with the patient, or if hospital personnel providing the notification have reason to know of a possible exposure.

(d) Notification letters shall be sent to the designated contact at the municipal or private provider agencies listed on the ambulance run sheet. Except in municipalities with a population over 1,000,000, a list attached to the ambulance run sheet must contain all municipal and private provider agency personnel who have provided any pre-hospital care immediately prior to transport. In municipalities with a population over 1,000,000, the ambulance run sheet must contain the company number or unit designation number for any fire department personnel who have provided any pre-hospital care immediately prior to transport. The letter shall state the names of crew members listed on the attachment to the ambulance run sheet and the name of the communicable disease diagnosed, but shall not contain the patient's name. Upon receipt of such notification letter, the applicable private provider agency designated infectious disease control officer of a municipal fire department or fire protection district shall contact all

- 1 personnel involved in the pre-hospital or inter-hospital care
- 2 and transport of the patient. Such notification letter may, but
- 3 is not required to, consist of the following form:
- 4 NOTIFICATION LETTER
- 5 (NAME OF HOSPITAL)
- 6 (ADDRESS)
- 7 TO:..... (Name of Organization)
- 8 FROM:....(Infection Control Coordinator)
- 9 DATE:....
- 10 As required by Section 6.08 of the Illinois Hospital
- 11 Licensing Act, (name of hospital) is hereby providing
- 12 notification that the following crew members or agencies
- transported or provided pre-hospital care to a patient on
- 14 (date), and the transported patient was later diagnosed as
- 15 having (name of communicable disease): (list of crew
- 16 members). The Hospital Licensing Act requires you to maintain
- 17 this information as a confidential medical record. Disclosure
- of this information may therefore result in civil liability for
- 19 the individual or company breaching the patient's
- 20 confidentiality, or both.
- 21 If you have any questions regarding this patient, please
- 22 contact me at (telephone number), between (hours).
- 23 Questions regarding exposure or the financial aspects of
- obtaining medical care should be directed to your employer.
- 25 (e) Upon discharge of a patient with a communicable disease
- to emergency personnel, the hospital shall notify the emergency

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- personnel of appropriate precautions against the communicable disease, but shall not identify the name of the disease.
 - (f) The hospital may, in its discretion, take any measures in addition to those required in this Section to notify police officers, firefighters, emergency medical technicians, and ambulance personnel of possible exposure to any communicable disease. However, in all cases this information shall be maintained as a confidential medical record.
 - (g) Any person providing or failing to provide notification under the protocol required by this Section shall have immunity from any liability, either criminal or civil, that might result by reason of such action or inaction, unless such action or inaction is willful.
 - (h) Any person who willfully fails to provide any notification required pursuant to an applicable protocol which has been adopted and approved pursuant to this Section commits a petty offense, and shall be subject to a fine of \$200 for the first offense, and \$500 for a second or subsequent offense.
- 19 (i) Nothing in this Section shall preclude a civil action 20 by a firefighter, emergency medical technician, or ambulance 21 crew member against an emergency services provider agency, 22 municipal fire department, or fire protection district that 23 fails to inform the member in a timely fashion of the receipt 24 of a notification letter.
- 25 (Source: P.A. 92-363, eff. 1-1-02.)

- Section 99. Effective date. This Act takes effect upon 1
- 2 becoming law.".