



95TH GENERAL ASSEMBLY

State of Illinois

2007 and 2008

SB0233

Introduced 2/7/2007, by Sen. Christine Radogno - John J. Cullerton

SYNOPSIS AS INTRODUCED:

New Act
210 ILCS 85/6.08

from Ch. 111 1/2, par. 147.08

Creates the MRSA Screening and Reporting Act and amends the Hospital Licensing Act. Requires every hospital to establish a methicillin-resistant Staphylococcus aureus (MRSA) control program, and sets forth items that must be included in such a program. Provides that for all hospital patients who are identified with nosocomial S. aureus bloodstream infection or asymptomatic colonization due to MRSA, the Department of Public Health shall require the annual reporting of such cases as a communicable disease or condition. Requires the Department to compile aggregate data from all hospitals for all such patients and to make such data available on its website and in all reports on health statistics and reportable communicable disease cases in Illinois. In provisions of the Hospital Licensing Act concerning the reporting of communicable reportable diseases and conditions, provides that after the effective date of this amendatory Act, such reportable diseases and conditions shall include nosocomial Staphylococcus aureus bloodstream infections and asymptomatic colonization due to MRSA.

LRB095 07649 DRJ 30774 b

FISCAL NOTE ACT
MAY APPLY

STATE MANDATES
ACT MAY REQUIRE
REIMBURSEMENT

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 1. Short title. This Act may be cited as the MRSA
5 Screening and Reporting Act.

6 Section 5. Definitions. In this Act:

7 "MRSA" means methicillin-resistant Staphylococcus aureus.

8 "MSSA" means methicillin-susceptible Staphylococcus
9 aureus.

10 Section 10. MRSA control program. In order to improve the
11 prevention of hospital-associated infections due to
12 methicillin-resistant Staphylococcus aureus ("MRSA"), every
13 hospital shall establish an MRSA control program that requires:

14 (1) Identification of all MRSA-colonized patients in
15 all intensive care units, and other at-risk patients
16 identified by the hospital, through active surveillance
17 testing.

18 (2) Isolation of identified MRSA-colonized or
19 MRSA-infected patients in an appropriate manner.

20 (3) Strict adherence to hand washing and hygiene
21 guidelines.

22 (4) Identification of nosocomial S. aureus bloodstream

1 infection, recording the total number and the subsets due
2 to MRSA or to MSSA.

3 (5) Maintenance of records and reporting of cases under
4 Section 15 of this Act.

5 Section 15. Reports to Department of Public Health. For all
6 patients who are identified with nosocomial S. aureus
7 bloodstream infection or asymptomatic colonization due to MRSA
8 pursuant to Section 10, the Department of Public Health shall
9 require the annual reporting of such cases as a communicable
10 disease or condition. The report shall include the total
11 numbers of all nosocomial S. aureus bloodstream infections as
12 well as subsets due to MRSA or MSSA, defined as those S. aureus
13 bloodstream infections that are acquired during the initial
14 stay in the hospital with onset of symptoms after 72 hours in
15 the hospital or that are present upon readmission to the
16 hospital within 30 days after discharge from the prior stay.
17 The Department shall compile aggregate data from all hospitals
18 for all such patients and shall make such data available on its
19 website and in all reports on health statistics and reportable
20 communicable disease cases in Illinois.

21 Section 90. The Hospital Licensing Act is amended by
22 changing Section 6.08 as follows:

23 (210 ILCS 85/6.08) (from Ch. 111 1/2, par. 147.08)

1 Sec. 6.08. (a) Every hospital shall provide notification as
2 required in this Section to police officers, firefighters,
3 emergency medical technicians, and ambulance personnel who
4 have provided or are about to provide emergency care or life
5 support services to a patient who has been diagnosed as having
6 a dangerous communicable or infectious disease. Such
7 notification shall not include the name of the patient, and the
8 emergency services provider agency and any person receiving
9 such notification shall treat the information received as a
10 confidential medical record.

11 (b) The Department shall establish by regulation a list of
12 those communicable reportable diseases and conditions for
13 which an annual report of numbers ~~notification~~ shall be
14 required ~~provided~~. After the effective date of this amendatory
15 Act of the 95th General Assembly, such reportable diseases and
16 conditions shall include asymptomatic colonization due to
17 methicillin-resistant Staphylococcus aureus (MRSA) and
18 nosocomial Staphylococcus aureus bloodstream infections, both
19 the total number of nosocomial Staphylococcus aureus
20 bloodstream infections and the numbers of nosocomial
21 Staphylococcus aureus bloodstream infections due to MRSA or
22 methicillin-susceptible Staphylococcus aureus (MSSA), listed
23 separately.

24 (c) The hospital shall send the letter of notification
25 within 72 hours after a confirmed diagnosis of any of the
26 communicable diseases listed by the Department pursuant to

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

10 (d) Notification letters shall be sent to the designated
11 contact at the municipal or private provider agencies listed on
12 the ambulance run sheet. Except in municipalities with a
13 population over 1,000,000, a list attached to the ambulance run
14 sheet must contain all municipal and private provider agency
15 personnel who have provided any pre-hospital care immediately
16 prior to transport. In municipalities with a population over
17 1,000,000, the ambulance run sheet must contain the company
18 number or unit designation number for any fire department
19 personnel who have provided any pre-hospital care immediately
20 prior to transport. The letter shall state the names of crew
21 members listed on the attachment to the ambulance run sheet and
22 the name of the communicable disease diagnosed, but shall not
23 contain the patient's name. Upon receipt of such notification
24 letter, the applicable private provider agency or the
25 designated infectious disease control officer of a municipal
26 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
13 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
18 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
24 obtaining medical care should be directed to your employer.

25 (e) Upon discharge of a patient with a communicable disease
26 to emergency personnel, the hospital shall notify the emergency

1 personnel of appropriate precautions against the communicable
2 disease, but shall not identify the name of the disease.

3 (f) The hospital may, in its discretion, take any measures
4 in addition to those required in this Section to notify police
5 officers, firefighters, emergency medical technicians, and
6 ambulance personnel of possible exposure to any communicable
7 disease. However, in all cases this information shall be
8 maintained as a confidential medical record.

9 (g) Any person providing or failing to provide notification
10 under the protocol required by this Section shall have immunity
11 from any liability, either criminal or civil, that might result
12 by reason of such action or inaction, unless such action or
13 inaction is willful.

14 (h) Any person who willfully fails to provide any
15 notification required pursuant to an applicable protocol which
16 has been adopted and approved pursuant to this Section commits
17 a petty offense, and shall be subject to a fine of \$200 for the
18 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.)