



Sen. Ira I. Silverstein

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09600SB1927sam004

LRB096 11262 DRJ 24222 a

1 AMENDMENT TO SENATE BILL 1927

2 AMENDMENT NO. _____. Amend Senate Bill 1927 by replacing
3 everything after the enacting clause with the following:

4 "Section 5. The Emergency Medical Services (EMS) Systems
5 Act is amended by adding Section 32.6 as follows:

6 (210 ILCS 50/32.6 new)

7 Sec. 32.6. Freestanding Emergency Center; patient
8 protection from abuse.

9 (a) No administrator, agent, or employee of an FEC or a
10 member of its medical staff may abuse a patient in the FEC.

11 (b) Any FEC administrator, agent, employee, or medical
12 staff member who has reasonable cause to believe that any
13 patient with whom he or she has direct contact has been
14 subjected to abuse in the FEC shall promptly report or cause a
15 report to be made to a designated FEC administrator responsible
16 for providing such reports to the Department as required by

1 this Section.

2 (c) Retaliation against a person who lawfully and in good
3 faith makes a report under this Section is prohibited.

4 (d) Upon receiving a report under subsection (b) of this
5 Section, the FEC shall submit the report to the Department
6 within 24 hours of obtaining such report. In the event that the
7 FEC receives multiple reports involving a single alleged
8 instance of abuse, the FEC shall submit one report to the
9 Department.

10 (e) Upon receiving a report under this Section, the FEC
11 shall promptly conduct an internal review to ensure the alleged
12 victim's safety. Measures to protect the alleged victim shall
13 be taken as deemed necessary by the FEC's administrator and may
14 include, but are not limited to, removing suspected violators
15 from further patient contact during the FEC's internal review.
16 If the alleged victim lacks decision-making capacity under the
17 Health Care Surrogate Act and no health care surrogate is
18 available, the FEC may contact the Illinois Guardianship and
19 Advocacy Commission with respect to appointment of a temporary
20 guardian of that person.

21 (f) All internal FEC reviews shall be conducted by a
22 designated FEC employee or agent who is qualified to detect
23 abuse and is not involved in the alleged victim's treatment.
24 All internal review findings must be documented and filed
25 according to FEC procedures and shall be made available to the
26 Department upon request.

1 (g) Any other person may make a report of patient abuse to
2 the Department if that person has reasonable cause to suspect
3 that a patient has been abused in the FEC.

4 (h) The report required under this Section shall include:
5 the name of the patient; the name and address of the FEC
6 treating the patient; the age of the patient; the nature of the
7 patient's condition, including any evidence of previous
8 injuries or disabilities; and any other information that the
9 reporter believes might be helpful in establishing the cause of
10 the reported abuse and the identity of the person believed to
11 have caused the abuse.

12 (i) Except for willful and wanton misconduct, any
13 individual, person, institution, or agency participating in
14 good faith in the making of a report under this Section, or in
15 the investigation of such a report or in making a disclosure of
16 information concerning reports of abuse under this Section,
17 shall have immunity from any liability, whether civil,
18 professional, or criminal or that otherwise might result by
19 reason of such actions. For the purpose of any proceedings,
20 whether civil, professional, or criminal, the good faith of any
21 persons required to report cases of suspected abuse under this
22 Section or who disclose information concerning reports of abuse
23 in compliance with this Section shall be presumed.

24 (j) No administrator, agent, or employee of an FEC shall
25 adopt or employ practices or procedures designed to discourage
26 good faith reporting of patient abuse under this Section.

1 (k) Every FEC shall ensure that all new and existing
2 employees are trained in the detection and reporting of abuse
3 of patients and retrained at least every 2 years thereafter.

4 (l) The Department shall investigate each report of patient
5 abuse made under this Section according to the procedures of
6 the Department, except that a report of abuse which indicates
7 that a patient's life or safety is in imminent danger shall be
8 investigated within 24 hours of such report. Under no
9 circumstances may an FEC's internal review of an allegation of
10 abuse replace an investigation of the allegation by the
11 Department.

12 (m) The Department shall keep a continuing record of all
13 reports made pursuant to this Section, including indications of
14 the final determination of any investigation and the final
15 disposition of all reports. The Department shall inform the
16 investigated FEC and any other person making a report under
17 subsection (g) of its final determination or disposition in
18 writing.

19 (n) The Department shall not disclose to the public any
20 information regarding any reports and investigations under
21 this Section unless and until the report of abuse is
22 substantiated following a full and proper investigation.

23 (o) All patient identifiable information in any report or
24 investigation under this Section shall be confidential and
25 shall not be disclosed except as authorized by this Act or
26 other applicable law.

1 (p) Nothing in this Section relieves an FEC administrator,
2 employee, agent, or medical staff member from contacting
3 appropriate law enforcement authorities as required by law.

4 (q) Nothing in this Section shall be construed to mean that
5 a patient is a victim of abuse because of health care services
6 provided or not provided by health care professionals.

7 (r) Nothing in this Section shall require an FEC, including
8 its employees, agents, and medical staff members, to provide
9 any services to a patient in contravention of his or her stated
10 or implied objection thereto upon grounds that such services
11 conflict with his or her religious beliefs or practices, nor
12 shall such a patient be considered abused under this Section
13 for the exercise of such beliefs or practices.

14 (s) As used in this Section, the following terms have the
15 following meanings:

16 "Abuse" means any physical or mental injury or sexual abuse
17 intentionally inflicted by an FEC employee, agent, or medical
18 staff member on a patient of the FEC and does not include any
19 FEC, medical, health care, or other personal care services done
20 in good faith in the interest of the patient according to
21 established medical and clinical standards of care.

22 "FEC" means a Freestanding Emergency Center licensed under
23 Section 32.5.

24 "Mental injury" means intentionally caused emotional
25 distress in a patient from words or gestures that would be
26 considered by a reasonable person to be humiliating, harassing,

1 or threatening and which causes observable and substantial
2 impairment.

3 "Sexual abuse" means any intentional act of sexual contact
4 or sexual penetration of a patient in the FEC.

5 "Substantiated", with respect to a report of abuse, means
6 that a preponderance of the evidence indicates that abuse
7 occurred.

8 Section 10. The Hospital Licensing Act is amended by
9 changing Section 9 and by adding Section 9.6 as follows:

10 (210 ILCS 85/9) (from Ch. 111 1/2, par. 150)

11 Sec. 9. Inspections and investigations. The Department
12 shall make or cause to be made such inspections and
13 investigations as it deems necessary, except that the
14 Department shall investigate every allegation of abuse of a
15 patient received by the Department. Information received by the
16 Department through filed reports, inspection, or as otherwise
17 authorized under this Act shall not be disclosed publicly in
18 such manner as to identify individuals or hospitals, except (i)
19 in a proceeding involving the denial, suspension, or revocation
20 of a permit to establish a hospital or a proceeding involving
21 the denial, suspension, or revocation of a license to open,
22 conduct, operate, and maintain a hospital, (ii) to the
23 Department of Children and Family Services in the course of a
24 child abuse or neglect investigation conducted by that

1 Department or by the Department of Public Health, (iii) in
2 accordance with Section 6.14a of this Act, or (iv) in other
3 circumstances as may be approved by the Hospital Licensing
4 Board.

5 (Source: P.A. 90-608, eff. 6-30-98; 91-242, eff. 1-1-00.)

6 (210 ILCS 85/9.6 new)

7 Sec. 9.6. Patient protection from abuse.

8 (a) No administrator, agent, or employee of a hospital or a
9 member of its medical staff may abuse a patient in the
10 hospital.

11 (b) Any hospital administrator, agent, employee, or
12 medical staff member who has reasonable cause to believe that
13 any patient with whom he or she has direct contact has been
14 subjected to abuse in the hospital shall promptly report or
15 cause a report to be made to a designated hospital
16 administrator responsible for providing such reports to the
17 Department as required by this Section.

18 (c) Retaliation against a person who lawfully and in good
19 faith makes a report under this Section is prohibited.

20 (d) Upon receiving a report under subsection (b) of this
21 Section, the hospital shall submit the report to the Department
22 within 24 hours of obtaining such report. In the event that the
23 hospital receives multiple reports involving a single alleged
24 instance of abuse, the hospital shall submit one report to the
25 Department.

1 (e) Upon receiving a report under this Section, the
2 hospital shall promptly conduct an internal review to ensure
3 the alleged victim's safety. Measures to protect the alleged
4 victim shall be taken as deemed necessary by the hospital's
5 administrator and may include, but are not limited to, removing
6 suspected violators from further patient contact during the
7 hospital's internal review. If the alleged victim lacks
8 decision-making capacity under the Health Care Surrogate Act
9 and no health care surrogate is available, the hospital may
10 contact the Illinois Guardianship and Advocacy Commission with
11 respect to appointment of a temporary guardian of that person.

12 (f) All internal hospital reviews shall be conducted by a
13 designated hospital employee or agent who is qualified to
14 detect abuse and is not involved in the alleged victim's
15 treatment. All internal review findings must be documented and
16 filed according to hospital procedures and shall be made
17 available to the Department upon request.

18 (g) Any other person may make a report of patient abuse to
19 the Department if that person has reasonable cause to suspect
20 that a patient has been abused in the hospital.

21 (h) The report required under this Section shall include:
22 the name of the patient; the name and address of the hospital
23 treating the patient; the age of the patient; the nature of the
24 patient's condition, including any evidence of previous
25 injuries or disabilities; and any other information that the
26 reporter believes might be helpful in establishing the cause of

1 the reported abuse and the identity of the person believed to
2 have caused the abuse.

3 (i) Except for willful and wanton misconduct, any
4 individual, person, institution, or agency participating in
5 good faith in the making of a report under this Section, or in
6 the investigation of such a report or in making a disclosure of
7 information concerning reports of abuse under this Section,
8 shall have immunity from any liability, whether civil,
9 professional, or criminal or that otherwise might result by
10 reason of such actions. For the purpose of any proceedings,
11 whether civil, professional, or criminal, the good faith of any
12 persons required to report cases of suspected abuse under this
13 Section or who disclose information concerning reports of abuse
14 in compliance with this Section shall be presumed.

15 (j) No administrator, agent, or employee of a hospital
16 shall adopt or employ practices or procedures designed to
17 discourage good faith reporting of patient abuse under this
18 Section.

19 (k) Every hospital shall ensure that all new and existing
20 employees are trained in the detection and reporting of abuse
21 of patients and retrained at least every 2 years thereafter.

22 (l) The Department shall investigate each report of patient
23 abuse made under this Section according to the procedures of
24 the Department, except that a report of abuse which indicates
25 that a patient's life or safety is in imminent danger shall be
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1 circumstances may a hospital's internal review of an allegation
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8 investigated hospital and any other person making a report
9 under subsection (g) of its final determination or disposition
10 in writing.

11 (n) The Department shall not disclose to the public any
12 information regarding any reports and investigations under
13 this Section unless and until the report of abuse is
14 substantiated following a full and proper investigation.

15 (o) All patient identifiable information in any report or
16 investigation under this Section shall be confidential and
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18 other applicable law.

19 (p) Nothing in this Section relieves a hospital
20 administrator, employee, agent, or medical staff member from
21 contacting appropriate law enforcement authorities as required
22 by law.

23 (q) Nothing in this Section shall be construed to mean that
24 a patient is a victim of abuse because of health care services
25 provided or not provided by health care professionals.

26 (r) Nothing in this Section shall require a hospital,

1 including its employees, agents, and medical staff members, to
2 provide any services to a patient in contravention of his or
3 her stated or implied objection thereto upon grounds that such
4 services conflict with his or her religious beliefs or
5 practices, nor shall such a patient be considered abused under
6 this Section for the exercise of such beliefs or practices.

7 (s) As used in this Section, the following terms have the
8 following meanings:

9 "Abuse" means any physical or mental injury or sexual abuse
10 intentionally inflicted by a hospital employee, agent, or
11 medical staff member on a patient of the hospital and does not
12 include any hospital, medical, health care, or other personal
13 care services done in good faith in the interest of the patient
14 according to established medical and clinical standards of
15 care.

16 "Mental injury" means intentionally caused emotional
17 distress in a patient from words or gestures that would be
18 considered by a reasonable person to be humiliating, harassing,
19 or threatening and which causes observable and substantial
20 impairment.

21 "Sexual abuse" means any intentional act of sexual contact
22 or sexual penetration of a patient in the hospital.

23 "Substantiated", with respect to a report of abuse, means
24 that a preponderance of the evidence indicates that abuse
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