

Rep. Greg Harris

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1	AMENDMENT TO HOUSE BILL 4327
2	AMENDMENT NO Amend House Bill 4327 by replacing
3	everything after the enacting clause with the following:
4	"Section 5. The Open Meetings Act is amended by changing
5	Section 2 as follows:
6	(5 ILCS 120/2) (from Ch. 102, par. 42)
7	Sec. 2. Open meetings.
8	(a) Openness required. All meetings of public bodies shall
9	be open to the public unless excepted in subsection (c) and
10	closed in accordance with Section 2a.
11	(b) Construction of exceptions. The exceptions contained
12	in subsection (c) are in derogation of the requirement that
13	public bodies meet in the open, and therefore, the exceptions
14	are to be strictly construed, extending only to subjects
15	clearly within their scope. The exceptions authorize but do not
16	require the holding of a closed meeting to discuss a subject

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1 included within an enumerated exception.

2 (c) Exceptions. A public body may hold closed meetings to3 consider the following subjects:

4 (1)The appointment, employment, compensation, 5 performance, or dismissal of discipline, specific employees of the public body or legal counsel for the 6 public body, including hearing testimony on a complaint 7 8 lodged against an employee of the public body or against legal counsel for the public body to determine its 9 10 validity.

11 (2) Collective negotiating matters between the public 12 body and its employees or their representatives, or 13 deliberations concerning salary schedules for one or more 14 classes of employees.

(3) The selection of a person to fill a public office, as defined in this Act, including a vacancy in a public office, when the public body is given power to appoint under law or ordinance, or the discipline, performance or removal of the occupant of a public office, when the public body is given power to remove the occupant under law or ordinance.

(4) Evidence or testimony presented in open hearing, or
in closed hearing where specifically authorized by law, to
a quasi-adjudicative body, as defined in this Act, provided
that the body prepares and makes available for public
inspection a written decision setting forth its

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determinative reasoning.

2 (5) The purchase or lease of real property for the use 3 of the public body, including meetings held for the purpose 4 of discussing whether a particular parcel should be 5 acquired.

6 (6) The setting of a price for sale or lease of 7 property owned by the public body.

8 (7) The sale or purchase of securities, investments, or 9 investment contracts. This exception shall not apply to the 10 investment of assets or income of funds deposited into the 11 Illinois Prepaid Tuition Trust Fund.

12 (8) Security procedures and the use of personnel and 13 equipment to respond to an actual, a threatened, or a 14 reasonably potential danger to the safety of employees, 15 students, staff, the public, or public property.

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(9) Student disciplinary cases.

17 (10) The placement of individual students in special
18 education programs and other matters relating to
19 individual students.

20 (11) Litigation, when an action against, affecting or 21 on behalf of the particular public body has been filed and 22 is pending before a court or administrative tribunal, or 23 when the public body finds that an action is probable or 24 imminent, in which case the basis for the finding shall be 25 recorded and entered into the minutes of the closed 26 meeting.

1 (12) The establishment of reserves or settlement of 2 claims as provided in the Local Governmental and 3 Governmental Employees Tort Immunity Act, if otherwise the disposition of a claim or potential claim might be 4 5 prejudiced, or the review or discussion of claims, loss or risk management information, records, data, advice or 6 7 communications from or with respect to any insurer of the 8 public body or any intergovernmental risk management 9 association or self insurance pool of which the public body 10 is a member.

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(13) Conciliation of complaints of discrimination in the sale or rental of housing, when closed meetings are authorized by the law or ordinance prescribing fair housing practices and creating a commission or administrative agency for their enforcement.

(14) Informant sources, the hiring or assignment of
 undercover personnel or equipment, or ongoing, prior or
 future criminal investigations, when discussed by a public
 body with criminal investigatory responsibilities.

(15) Professional ethics or performance when
considered by an advisory body appointed to advise a
licensing or regulatory agency on matters germane to the
advisory body's field of competence.

(16) Self evaluation, practices and procedures or
 professional ethics, when meeting with a representative of
 a statewide association of which the public body is a

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member. (17) The recruitment, credentialing, discipline or formal peer review of physicians or other health care professionals for a hospital, or other institution providing medical care, that is operated by the public body.

7 (18) Deliberations for decisions of the Prisoner
8 Review Board.

9 (19) Review or discussion of applications received 10 under the Experimental Organ Transplantation Procedures 11 Act.

12 (20) The classification and discussion of matters
 13 classified as confidential or continued confidential by
 14 the State Government Suggestion Award Board.

15 (21) Discussion of minutes of meetings lawfully closed
16 under this Act, whether for purposes of approval by the
17 body of the minutes or semi-annual review of the minutes as
18 mandated by Section 2.06.

19 (22) Deliberations for decisions of the State
 20 Emergency Medical Services Disciplinary Review Board.

(23) The operation by a municipality of a municipal utility or the operation of a municipal power agency or municipal natural gas agency when the discussion involves (i) contracts relating to the purchase, sale, or delivery of electricity or natural gas or (ii) the results or conclusions of load forecast studies. 1 (24) Meetings of a residential health care facility 2 resident sexual assault and death review team or the 3 Executive Council under the Abuse Prevention Review Team 4 Act.

5 (25) Meetings of an independent team of experts under
6 Brian's Law.

7 (26) Meetings of a mortality review team appointed
8 under the Department of Juvenile Justice Mortality Review
9 Team Act.

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(27) (Blank).

11 (28) Correspondence and records (i) that may not be 12 disclosed under Section 11-9 of the Public Aid Code or (ii) 13 that pertain to appeals under Section 11-8 of the Public 14 Aid Code.

15 (29) Meetings between internal or external auditors 16 and governmental audit committees, finance committees, and 17 their equivalents, when the discussion involves internal 18 control weaknesses, identification of potential fraud risk 19 areas, known or suspected frauds, and fraud interviews 20 conducted in accordance with generally accepted auditing 21 standards of the United States of America.

(30) Those meetings or portions of meetings of <u>a</u> an
 at-risk adult fatality review team or the Illinois At-Risk
 Adult Fatality Review Team Advisory Council during which a
 review of the death of an eligible adult in which abuse or
 neglect is suspected, alleged, or substantiated is

conducted pursuant to Section 15 of the Adult Protective
 Services Act.

3 <u>(31)</u> (30) Meetings and deliberations for decisions of 4 the Concealed Carry Licensing Review Board under the 5 Firearm Concealed Carry Act.

6 (d) Definitions. For purposes of this Section:

7 "Employee" means a person employed by a public body whose 8 relationship with the public body constitutes an 9 employer-employee relationship under the usual common law 10 rules, and who is not an independent contractor.

11 "Public office" means a position created by or under the Constitution or laws of this State, the occupant of which is 12 13 charged with the exercise of some portion of the sovereign power of this State. The term "public office" shall include 14 15 members of the public body, but it shall not include 16 organizational positions filled by members thereof, whether established by law or by a public body itself, that exist to 17 18 assist the body in the conduct of its business.

19 "Ouasi-adjudicative body" means an administrative body 20 charged by law or ordinance with the responsibility to conduct 21 hearings, receive evidence or testimony and make 22 determinations based thereon, but does not include local 23 electoral boards when such bodies are considering petition 24 challenges.

(e) Final action. No final action may be taken at a closedmeeting. Final action shall be preceded by a public recital of

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the nature of the matter being considered and other information that will inform the public of the business being conducted. (Source: P.A. 97-318, eff. 1-1-12; 97-333, eff. 8-12-11; 97-452, eff. 8-19-11; 97-813, eff. 7-13-12; 97-876, eff. 8-1-12; 98-49, eff. 7-1-13; 98-63, eff. 7-9-13; revised 7-23-13.)

7 Section 10. The Freedom of Information Act is amended by8 changing Section 7.5 as follows:

9 (5 ILCS 140/7.5)

10 Sec. 7.5. Statutory Exemptions. To the extent provided for 11 by the statutes referenced below, the following shall be exempt 12 from inspection and copying:

(a) All information determined to be confidential underSection 4002 of the Technology Advancement and Development Act.

(b) Library circulation and order records identifying library users with specific materials under the Library Records Confidentiality Act.

(c) Applications, related documents, and medical records received by the Experimental Organ Transplantation Procedures Board and any and all documents or other records prepared by the Experimental Organ Transplantation Procedures Board or its staff relating to applications it has received.

(d) Information and records held by the Department ofPublic Health and its authorized representatives relating to

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1 known or suspected cases of sexually transmissible disease or 2 any information the disclosure of which is restricted under the 3 Illinois Sexually Transmissible Disease Control Act.

4 (e) Information the disclosure of which is exempted under
5 Section 30 of the Radon Industry Licensing Act.

6 (f) Firm performance evaluations under Section 55 of the
7 Architectural, Engineering, and Land Surveying Qualifications
8 Based Selection Act.

9 (g) Information the disclosure of which is restricted and 10 exempted under Section 50 of the Illinois Prepaid Tuition Act.

(h) Information the disclosure of which is exempted under the State Officials and Employees Ethics Act, and records of any lawfully created State or local inspector general's office that would be exempt if created or obtained by an Executive Inspector General's office under that Act.

(i) Information contained in a local emergency energy plan submitted to a municipality in accordance with a local emergency energy plan ordinance that is adopted under Section 19 11-21.5-5 of the Illinois Municipal Code.

(j) Information and data concerning the distribution of
 surcharge moneys collected and remitted by wireless carriers
 under the Wireless Emergency Telephone Safety Act.

(k) Law enforcement officer identification information or driver identification information compiled by a law enforcement agency or the Department of Transportation under Section 11-212 of the Illinois Vehicle Code. 09800HB4327ham001 -10- LRB098 18752 KTG 57139 a

1 (1) Records and information provided to a residential 2 health care facility resident sexual assault and death review 3 team or the Executive Council under the Abuse Prevention Review 4 Team Act.

5 (m) Information provided to the predatory lending database 6 created pursuant to Article 3 of the Residential Real Property 7 Disclosure Act, except to the extent authorized under that 8 Article.

9 (n) Defense budgets and petitions for certification of 10 compensation and expenses for court appointed trial counsel as 11 provided under Sections 10 and 15 of the Capital Crimes 12 Litigation Act. This subsection (n) shall apply until the 13 conclusion of the trial of the case, even if the prosecution 14 chooses not to pursue the death penalty prior to trial or 15 sentencing.

(o) Information that is prohibited from being disclosed
 under Section 4 of the Illinois Health and Hazardous Substances
 Registry Act.

(p) Security portions of system safety program plans, investigation reports, surveys, schedules, lists, data, or information compiled, collected, or prepared by or for the Regional Transportation Authority under Section 2.11 of the Regional Transportation Authority Act or the St. Clair County Transit District under the Bi-State Transit Safety Act.

25 (q) Information prohibited from being disclosed by the 26 Personnel Records Review Act. 1 (r) Information prohibited from being disclosed by the Illinois School Student Records Act. 2

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(s) Information the disclosure of which is restricted under 4 Section 5-108 of the Public Utilities Act.

5 (t) All identified or deidentified health information in the form of health data or medical records contained in, stored 6 in, submitted to, transferred by, or released from the Illinois 7 Health Information Exchange, and identified or deidentified 8 9 health information in the form of health data and medical 10 records of the Illinois Health Information Exchange in the 11 possession of the Illinois Health Information Exchange Authority due to its administration of the Illinois Health 12 13 Information Exchange. The terms "identified" and 14 "deidentified" shall be given the same meaning as in the Health 15 Insurance Accountability and Portability Act of 1996, Public 16 Law 104-191, or any subsequent amendments thereto, and any 17 regulations promulgated thereunder.

18 (u) Records and information provided to an independent team 19 of experts under Brian's Law.

20 (v) Names and information of people who have applied for or received Firearm Owner's Identification Cards under the 21 22 Firearm Owners Identification Card Act or applied for or 23 received a concealed carry license under the Firearm Concealed 24 Carry Act, unless otherwise authorized by the Firearm Concealed 25 Carry Act; and databases under the Firearm Concealed Carry Act, 26 records of the Concealed Carry Licensing Review Board under the

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Firearm Concealed Carry Act, and law enforcement agency
 objections under the Firearm Concealed Carry Act.

3 (w) Personally identifiable information which is exempted 4 from disclosure under subsection (g) of Section 19.1 of the 5 Toll Highway Act.

6 (x) Information which is exempted from disclosure under
7 Section 5-1014.3 of the Counties Code or Section 8-11-21 of the
8 Illinois Municipal Code.

9 (y) Confidential information under the Adult Protective 10 Services Act and its predecessor enabling statute, the Elder 11 Abuse and Neglect Act, including information about the identity 12 and administrative finding against any caregiver of a verified 13 and substantiated decision of significant abuse, neglect, or 14 financial exploitation of an eligible adult maintained in the 15 Department of Public Health's Health Care Worker Registry.

16 (z) Records and information provided to <u>a</u> an at risk adult 17 fatality review team or the Illinois At Risk Adult Fatality 18 Review Team Advisory Council under Section 15 of the Adult 19 Protective Services Act.

20 (Source: P.A. 97-80, eff. 7-5-11; 97-333, eff. 8-12-11; 97-342,
21 eff. 8-12-11; 97-813, eff. 7-13-12; 97-976, eff. 1-1-13; 98-49,
22 eff. 7-1-13; 98-63, eff. 7-9-13; revised 7-23-13.)

23 Section 15. The Adult Protective Services Act is amended by 24 changing Sections 2, 3.5, 4, 5, 7.5, 8, 9, 13, and 15 as 25 follows:

(320 ILCS 20/2) (from Ch. 23, par. 6602) 1 2 Sec. 2. Definitions. As used in this Act, unless the 3 context requires otherwise: 4 (a) "Abuse" means causing any physical, mental or sexual 5 injury to an eligible adult, including exploitation of such adult's financial resources. 6 7 Nothing in this Act shall be construed to mean that an eligible adult is a victim of abuse, neglect, or self-neglect 8

8 eligible adult is a victim of abuse, neglect, or self-neglect 9 for the sole reason that he or she is being furnished with or 10 relies upon treatment by spiritual means through prayer alone, 11 in accordance with the tenets and practices of a recognized 12 church or religious denomination.

Nothing in this Act shall be construed to mean that an eligible adult is a victim of abuse because of health care services provided or not provided by licensed health care professionals.

17 (a-5) "Abuser" means a person who abuses, neglects, or 18 financially exploits an eligible adult.

19 (a-6) "Adult with disabilities" means a person aged 18 20 through 59 who resides in a domestic living situation and whose 21 disability <u>as defined in subsection (c-5)</u> impairs his or her 22 ability to seek or obtain protection from abuse, neglect, or 23 exploitation.

24 (a-7) "Caregiver" means a person who either as a result of
25 a family relationship, voluntarily, or in exchange for

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1 compensation has assumed responsibility for all or a portion of 2 the care of an eligible adult who needs assistance with 3 activities of daily living.

4 (b) "Department" means the Department on Aging of the State5 of Illinois.

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(c) "Director" means the Director of the Department.

7 (c-5) "Disability" means a physical or mental disability,
8 including, but not limited to, a developmental disability, an
9 intellectual disability, a mental illness as defined under the
10 Mental Health and Developmental Disabilities Code, or dementia
11 as defined under the Alzheimer's Disease Assistance Act.

12 (d) "Domestic living situation" means a residence where the 13 eligible adult at the time of the report lives alone or with 14 his or her family or a caregiver, or others, or other 15 community-based unlicensed facility, but is not:

16 (1) A licensed facility as defined in Section 1-113 of
17 the Nursing Home Care Act;

18 (1.5) A facility licensed under the ID/DD Community19 Care Act;

20 (1.7) A facility licensed under the Specialized Mental
21 Health Rehabilitation Act of 2013;

(2) A "life care facility" as defined in the Life Care
Facilities Act;

(3) A home, institution, or other place operated by the
federal government or agency thereof or by the State of
Illinois;

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1 (4) A hospital, sanitarium, or other institution, the principal activity or business of which is the diagnosis, 2 care, and treatment of human illness through the 3 4 maintenance and operation of organized facilities 5 therefor, which is required to be licensed under the Hospital Licensing Act; 6

7 (5) A "community living facility" as defined in the
8 Community Living Facilities Licensing Act;

(6) (Blank);

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10 (7) A "community-integrated living arrangement" as 11 defined in the Community-Integrated Living Arrangements 12 Licensure and Certification Act or a "community 13 residential alternative" as licensed under that Act;

14 (8) An assisted living or shared housing establishment
15 as defined in the Assisted Living and Shared Housing Act;
16 or

17 (9) A supportive living facility as described in
18 Section 5-5.01a of the Illinois Public Aid Code.

(e) "Eligible adult" means either an adult with disabilities aged 18 through 59 or a person aged 60 or older who resides in a domestic living situation and is, or is alleged to be, abused, neglected, or financially exploited by another individual or who neglects himself or herself.

(f) "Emergency" means a situation in which an eligible adult is living in conditions presenting a risk of death or physical, mental or sexual injury and the provider agency has 1 reason to believe the eligible adult is unable to consent to 2 services which would alleviate that risk.

3 (f-1) "Financial exploitation" means the use of an eligible
4 adult's resources by another to the disadvantage of that adult
5 or the profit or advantage of a person other than that adult.

6 (f-5) "Mandated reporter" means any of the following 7 persons while engaged in carrying out their professional 8 duties:

9 (1) a professional or professional's delegate while 10 engaged in: (i) social services, (ii) law enforcement, (iii) education, (iv) the care of an eligible adult or 11 eligible adults, or (v) any of the occupations required to 12 13 be licensed under the Clinical Psychologist Licensing Act, the Clinical Social Work and Social Work Practice Act, the 14 15 Illinois Dental Practice Act, the Dietitian Nutritionist Practice Act, the Marriage and Family Therapy Licensing 16 Act, the Medical Practice Act of 1987, the Naprapathic 17 Practice Act, the Nurse Practice Act, the Nursing Home 18 19 Administrators Licensing and Disciplinary Act, the 20 Illinois Occupational Therapy Practice Act, the Illinois 21 Optometric Practice Act of 1987, the Pharmacy Practice Act, 22 the Illinois Physical Therapy Act, the Physician Assistant 23 Practice Act of 1987, the Podiatric Medical Practice Act of 24 1987, the Respiratory Care Practice Act, the Professional 25 Counselor and Clinical Professional Counselor Licensing 26 and Practice Act, the Illinois Speech-Language Pathology 09800HB4327ham001

and Audiology Practice Act, the Veterinary Medicine and
 Surgery Practice Act of 2004, and the Illinois Public
 Accounting Act;

4 (1.5) an employee of an entity providing developmental
5 disabilities services or service coordination funded by
6 the Department of Human Services;

7 (2) an employee of a vocational rehabilitation 8 facility prescribed or supervised by the Department of 9 Human Services;

10 (3) an administrator, employee, or person providing 11 services in or through an unlicensed community based 12 facility;

(4) any religious practitioner who provides treatment by prayer or spiritual means alone in accordance with the tenets and practices of a recognized church or religious denomination, except as to information received in any confession or sacred communication enjoined by the discipline of the religious denomination to be held confidential;

(5) field personnel of the Department of Healthcare and
Family Services, Department of Public Health, and
Department of Human Services, and any county or municipal
health department;

(6) personnel of the Department of Human Services, the
 Guardianship and Advocacy Commission, the State Fire
 Marshal, local fire departments, the Department on Aging

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and its subsidiary Area Agencies on Aging and provider agencies, and the Office of State Long Term Care Ombudsman;

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(7) any employee of the State of Illinois not otherwise 4 specified herein who is involved in providing services to 5 eligible adults, including professionals providing medical or rehabilitation services and all other persons having 6 direct contact with eligible adults; 7

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(8) a person who performs the duties of a coroner or medical examiner; or

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(9) a person who performs the duties of a paramedic or an emergency medical technician.

"Neglect" means another individual's failure to 12 (q) 13 provide an eligible adult with or willful withholding from an eligible adult the necessities of life including, but not 14 15 limited to, food, clothing, shelter or health care. This 16 subsection does not create any new affirmative duty to provide support to eligible adults. Nothing in this Act shall be 17 18 construed to mean that an eligible adult is a victim of neglect because of health care services provided or not provided by 19 20 licensed health care professionals.

21 (h) "Provider agency" means any public or nonprofit agency 22 in a planning and service area that is selected by the 23 Department or appointed by the regional administrative agency 24 with prior approval by the Department on Aging to receive and 25 assess reports of alleged or suspected abuse, neglect, or 26 financial exploitation. A provider agency is also referenced as

1 a "designated agency" in this Act.

2 (i) "Regional administrative agency" means any public or 3 nonprofit agency in a planning and service area that provides 4 regional oversight and performs functions as set forth in 5 subsection (b) of Section 3 of this Act. The Department may 6 serve as the regional administrative agency or it may designate an Area Agency on Aging or another qualified entity to serve as 7 the regional administrative agency; such designation shall be 8 9 subject to terms set forth by the Department. so designated by 10 the Department, provided that the designated Area Agency on 11 Aging shall be designated the regional administrative agency if it so requests. The Department shall assume the functions of 12 13 the regional administrative agency for any planning and service 14 area where another agency is not so designated.

15 (i-5) "Self-neglect" means a condition that is the result 16 of an eligible adult's inability, due to physical or mental impairments, or both, or a diminished capacity, to perform 17 essential self-care tasks that substantially threaten his or 18 her own health, including: providing essential food, clothing, 19 20 shelter, and health care; and obtaining goods and services 21 necessary to maintain physical health, mental health, emotional well-being, and general safety. The term includes 22 23 compulsive hoarding, which is characterized by the acquisition 24 and retention of large quantities of items and materials that 25 produce an extensively cluttered living space, which 26 significantly impairs the performance of essential self-care

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1 tasks or otherwise substantially threatens life or safety.

(j) "Substantiated case" means a reported case of alleged
or suspected abuse, neglect, financial exploitation, or
self-neglect in which a provider agency, after assessment,
determines that there is reason to believe abuse, neglect, or
financial exploitation has occurred.

7 (Source: P.A. 97-38, eff. 6-28-11; 97-227, eff. 1-1-12; 97-300, 8 eff. 8-11-11; 97-706, eff. 6-25-12; 97-813, eff. 7-13-12; 9 97-1141, eff. 12-28-12; 98-49, eff. 7-1-13; 98-104, eff. 10 7-22-13; revised 9-19-13.)

11 (320 ILCS 20/3.5)

Sec. 3.5. Other Responsibilities. The Department shall also be responsible for the following activities, contingent upon adequate funding; implementation shall be expanded to adults with disabilities upon the effective date of this amendatory Act of the 98th General Assembly, except those responsibilities under subsection (a), which shall be undertaken as soon as practicable:

19 (a) promotion of a wide range of endeavors for the of 20 preventing abuse, neglect, financial purpose 21 exploitation, and self-neglect, including, but not limited 22 to, promotion of public and professional education to 23 awareness of abuse, neglect, increase financial 24 exploitation, and self-neglect; to increase reports; to 25 establish access to and use of the Health Care Worker 1 Registry <u>established under Section 7.5</u>; and to improve 2 response by various legal, financial, social, and health 3 systems;

4 (b) coordination of efforts with other agencies, 5 councils, and like entities, to include but not be limited to, the Administrative Office of the Illinois Courts, the 6 Office of the Attorney General, the State Police, the 7 8 Illinois Law Enforcement Training Standards Board, the 9 State Triad, the Illinois Criminal Justice Information 10 Authority, the Departments of Public Health, Healthcare and Family Services, and Human Services, the Illinois 11 Guardianship and Advocacy Commission, the Family Violence 12 Coordinating Council, the Illinois Violence Prevention 13 14 Authority, and other entities which may impact awareness 15 response to, abuse, neglect, financial of, and 16 exploitation, and self-neglect;

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(c) collection and analysis of data;

18 (d) monitoring of the performance of regional 19 administrative agencies and adult protective services 20 agencies;

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(e) promotion of prevention activities;

(f) establishing and coordinating an aggressive training program on the unique nature of adult abuse cases with other agencies, councils, and like entities, to include but not be limited to the Office of the Attorney General, the State Police, the Illinois Law Enforcement 09800HB4327ham001 -22- LRB098 18752 KTG 57139 a

1 Training Standards Board, the State Triad, the Illinois 2 Criminal Justice Information Authority, the State of Public Health, Healthcare and 3 Departments Familv Services, and Human Services, the Family Violence 4 5 Coordinating Council, the Illinois Violence Prevention Authority, the agency designated by the Governor under 6 of 7 Section 1 the Protection and Advocacv for Developmentally Disabled Persons Act, and other entities 8 9 that may impact awareness of and response to abuse, 10 neglect, financial exploitation, and self-neglect;

11 (g) solicitation of financial institutions for the purpose of making information available to the general 12 13 public warning of financial exploitation of adults and 14 related financial fraud or abuse, including such 15 information and warnings available through signage or 16 other written materials provided by the Department on the premises of such financial institutions, provided that the 17 manner of displaying or distributing such information is 18 subject to the sole discretion of each financial 19 20 institution;

21 (g-1) developing by joint rulemaking with the 22 Department of Financial and Professional Regulation 23 minimum training standards which shall be used by financial 24 institutions for their current and new employees with direct customer contact; the Department of Financial and 25 26 Professional Regulation shall retain sole visitation and 09800HB4327ham001 -23- LRB098 18752 KTG 57139 a

enforcement authority under this subsection (g-1); the Department of Financial and Professional Regulation shall provide bi-annual reports to the Department setting forth aggregate statistics on the training programs required under this subsection (g-1); and

6 (h) coordinating efforts with utility and electric 7 companies to send notices in utility bills to explain to 8 persons 60 years of age or older their rights regarding 9 telemarketing and home repair fraud.

10 (Source: P.A. 98-49, eff. 7-1-13.)

11 (320 ILCS 20/4) (from Ch. 23, par. 6604)

12 Sec. 4. Reports of abuse or neglect.

(a) Any person who suspects the abuse, neglect, financial exploitation, or self-neglect of an eligible adult may report this suspicion to an agency designated to receive such reports under this Act or to the Department.

17 (a-5) If any mandated reporter has reason to believe that 18 an eligible adult, who because of a disability or other 19 condition or impairment is unable to seek assistance for himself or herself, has, within the previous 12 months, been 20 21 subjected to abuse, neglect, or financial exploitation, the 22 mandated reporter shall, within 24 hours after developing such 23 belief, report this suspicion to an agency designated to 24 receive such reports under this Act or to the Department. The 25 agency designated to receive such reports under this Act or the 09800HB4327ham001 -24- LRB098 18752 KTG 57139 a

1 Department may establish a manner in which a mandated reporter 2 can make the required report through an Internet reporting 3 tool. Information sent and received through the Internet 4 reporting tool is subject to the same rules in this Act as 5 other types of confidential reporting established by the 6 designated agency or the Department. Whenever a mandated reporter is required to report under this Act in his or her 7 capacity as a member of the staff of a medical or other public 8 or private institution, facility, or agency, he or she shall 9 10 make a report to an agency designated to receive such reports 11 under this Act or to the Department in accordance with the provisions of this Act and may also notify the person in charge 12 13 of the institution, facility, board and care home, or agency or 14 his or her designated agent that the report has been made. 15 Under no circumstances shall any person in charge of such 16 institution, facility, board and care home, or agency, or his or her designated agent to whom the notification has been made, 17 exercise any control, restraint, modification, or other change 18 in the report or the forwarding of the report to an agency 19 20 designated to receive such reports under this Act or to the 21 Department. The privileged quality of communication between 22 any professional person required to report and his or her 23 patient or client shall not apply to situations involving 24 abused, neglected, or financially exploited eligible adults 25 and shall not constitute grounds for failure to report as 26 required by this Act.

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1 (a-7) A person making a report under this Act in the belief 2 that it is in the alleged victim's best interest shall be immune from criminal or civil liability or professional 3 4 disciplinary action on account of making the report, 5 notwithstanding requirements concerning any the 6 confidentiality of information with respect to such eligible adult which might otherwise be applicable. 7

8 (a-9) Law enforcement officers shall continue to report 9 incidents of alleged abuse pursuant to the Illinois Domestic 10 Violence Act of 1986, notwithstanding any requirements under 11 this Act.

(b) Any person, institution or agency participating in the 12 13 making of a report, providing information or records related to 14 a report, assessment, or services, or participating in the 15 investigation of a report under this Act in good faith, or 16 taking photographs or x-rays as a result of an authorized assessment, shall have immunity from any civil, criminal or 17 other liability in any civil, criminal or other proceeding 18 19 brought in consequence of making such report or assessment or 20 account of submitting or otherwise disclosing such on 21 photographs or x-rays to any agency designated to receive 22 reports of alleged or suspected abuse or neglect. Any person, 23 institution or agency authorized by the Department to provide 24 assessment, intervention, or administrative services under 25 this Act shall, in the good faith performance of those services, have immunity from any civil, criminal or other 26

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1 liability in any civil, criminal, or other proceeding brought 2 as a consequence of the performance of those services. For the purposes of any civil, criminal, or other proceeding, the good 3 4 faith of any person required to report, permitted to report, or 5 participating in an investigation of a report of alleged or exploitation, 6 abuse, neglect, financial suspected or 7 self-neglect shall be presumed.

(c) The identity of a person making a report of alleged or 8 9 suspected abuse, neglect, financial exploitation, or 10 self-neglect under this Act may be disclosed by the Department 11 or other agency provided for in this Act only with such person's written consent or by court order, but is otherwise 12 13 confidential.

14 (d) The Department shall by rule establish a system for15 filing and compiling reports made under this Act.

16 (e) Any physician who willfully fails to report as required by this Act shall be referred to the Illinois State Medical 17 Disciplinary Board for action in accordance with subdivision 18 19 (A) (22) of Section 22 of the Medical Practice Act of 1987. Any 20 dentist or dental hygienist who willfully fails to report as required by this Act shall be referred to the Department of 21 22 Professional Regulation for action in accordance with paragraph 19 of Section 23 of the Illinois Dental Practice Act. 23 24 Any optometrist who willfully fails to report as required by 25 this Act shall be referred to the Department of Financial and 26 Professional Regulation for action in accordance with

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paragraph (15) of subsection (a) of Section 24 of the Illinois Optometric Practice Act of 1987. Any other mandated reporter required by this Act to report suspected abuse, neglect, or financial exploitation who willfully fails to report the same is guilty of a Class A misdemeanor.

6 (Source: P.A. 97-860, eff. 7-30-12; 98-49, eff. 7-1-13.)

7 (320 ILCS 20/5) (from Ch. 23, par. 6605)

8 Sec. 5. Procedure.

9 (a) A provider agency designated to receive reports of 10 alleged or suspected abuse, neglect, financial exploitation, or self-neglect under this Act shall, upon receiving such a 11 12 report, conduct a face-to-face assessment with respect to such 13 report, in accord with established law and Department 14 protocols, procedures, and policies. Face-to-face assessments, 15 casework, and follow-up of reports of self-neglect by the designated 16 provider agencies to receive reports of self-neglect shall be subject to sufficient appropriation for 17 18 statewide implementation of assessments, casework, and 19 follow-up of reports of self-neglect. In the absence of 20 sufficient appropriation for statewide implementation of assessments, 21 casework, and follow-up of reports of 22 the designated adult protective self-neglect, services 23 provider agency shall refer all reports of self-neglect to the 24 appropriate agency or agencies as designated by the Department 25 for any follow-up. The assessment shall include, but not be 09800HB4327ham001 -28- LRB098 18752 KTG 57139 a

1 limited to, a visit to the residence of the eligible adult who 2 is the subject of the report and may include interviews or 3 consultations with service agencies or individuals who may have 4 knowledge of the eligible adult's circumstances. If, after the 5 assessment, the provider agency determines that the case is 6 substantiated it shall develop a service care plan for the eligible adult and may report its findings at any time during 7 8 the case to the appropriate law enforcement agency in accord with established law and Department protocols, procedures, and 9 10 policies. In developing a case plan, the provider agency may 11 consult with any other appropriate provider of services, and such providers shall be immune from civil or criminal liability 12 13 on account of such acts. The plan shall include alternative 14 suggested or recommended services which are appropriate to the 15 needs of the eligible adult and which involve the least 16 restriction of the eligible adult's activities commensurate with his or her needs. Only those services to which consent is 17 provided in accordance with Section 9 of this Act shall be 18 provided, contingent upon the availability of such services. 19

(b) A provider agency shall refer evidence of crimes against an eligible adult to the appropriate law enforcement agency according to Department policies. A referral to law enforcement may be made at intake or any time during the case. Where a provider agency has reason to believe the death of an eligible adult may be the result of abuse or neglect, the agency shall immediately report the matter to the coroner or 1 medical examiner and shall cooperate fully with any subsequent 2 investigation.

3 (c) If any person other than the alleged victim refuses to 4 allow the provider agency to begin an investigation, interferes 5 with the provider agency's ability to conduct an investigation, 6 or refuses to give access to an eligible adult, the appropriate 7 law enforcement agency must be consulted regarding the 8 investigation.

9 (Source: P.A. 98-49, eff. 7-1-13.)

10 (320 ILCS 20/7.5)

11 Sec. 7.5. Health Care Worker Registry.

12 (a) To protect individuals receiving in-home and
 13 community-based services, the Department on Aging shall
 14 establish a Registry effective January 1, 2015.

15 (a-5) The Registry shall identify individuals against whom a verified and substantiated finding was made under this Act of 16 significant abuse, neglect, or financial exploitation while 17 working for or compensated with public funds from certain 18 19 agencies of the State or while working for a provider that is licensed, certified, or regulated by, or paid with public funds 20 from these agencies as set forth in subsection (a-10) of this 21 22 Section.

23 <u>The information in the Registry shall be confidential</u> 24 <u>except as specifically authorized in this Act and shall not be</u> 25 <u>deemed a public record.</u> 09800HB4327ham001 -30- LRB098 18752 KTG 57139 a

1 (a-10) (a) Reporting to the Registry. The Department on 2 Aging shall report to the to the Department of Public Health's Health Care Worker Registry the identity of the caregiver when 3 4 a and administrative finding of a verified and substantiated 5 decision of significant abuse, neglect, or financial 6 exploitation of an eligible adult under this Act that is made 7 against a caregiver who works for, is regulated by, or compensated with public funds from the Department on Aging, the 8 9 Department of Healthcare and Family Services, the Department of 10 Human Services, or the Department of Public Health or who works 11 for any caregiver , including consultants and volunteers, employed by a provider licensed, certified, or regulated by, or 12 13 paid with public funds from any of these State agencies, the Department of Public Health, Healthcare and Family Services, 14 15 Human Services, or the Department on Aging. For uncompensated or privately paid caregivers, the Department on Aging shall 16 report only a verified and substantiated decision of 17 significant abuse, neglect, or financial exploitation of 18 an 19 eligible adult under this Act.

A An administrative finding against a caregiver that is placed in the Registry shall preclude <u>that</u> any caregiver from providing direct <u>care</u>, as defined in this Section access or other services, including consulting and volunteering, in a position with <u>the Department on Aging</u>, the Department of <u>Healthcare and Family Services</u>, the Department of Human Services, or the Department of Public Health or providers thereof as described in this subsection a provider that is
licensed, certified, or regulated by, or paid with public funds
from or on behalf of, the State of Illinois or any Department
thereof, that permits the caregiver direct access to an adult
aged 60 or older or an adult, over 18, with a disability or to
that individual's living quarters or personal, financial, or
medical records.

8

(b) Definitions. As used in this Section:

9 "Direct care" includes, but is not limited to, direct 10 access to a person aged 60 or older or to an adult with disabilities aged 18 through 59 to an individual, his or her 11 living quarters, or his or her personal, financial, or medical 12 13 records for the purpose of providing nursing care or assistance with feeding, dressing, movement, bathing, toileting, other 14 15 personal needs and activities of daily living, or assistance 16 with financial transactions.

17 "Privately paid caregiver" means any caregiver who has been 18 paid with resources other than public funds, regardless of 19 licensure, certification, or regulation by the State of 20 Illinois and any Department thereof. A privately paid caregiver 21 does not include any caregiver that has been licensed, 22 certified, or regulated by a State agency, or paid with public 23 funds.

24 "Significant" means a finding of abuse, neglect, or 25 financial exploitation as determined by the Department that (i) 26 represents a <u>substantial</u> meaningful failure to adequately 09800HB4327ham001 -32- LRB098 18752 KTG 57139 a

provide for, or a material indifference to, the financial, health, safety, or medical needs of an eligible adult or (ii) results in an eligible adult's death or other serious deterioration of an eligible adult's financial resources, physical condition, or mental condition.

6 "Uncompensated caregiver" means a caregiver who, in an 7 informal capacity, assists an eligible adult with activities of 8 daily living, financial transactions, or chore housekeeping 9 type duties. "Uncompensated caregiver" does not refer to an 10 individual serving in a formal capacity as a volunteer with a 11 provider licensed, certified, or regulated by a State agency.

(c) Access to and use of the Registry. Access to the 12 13 Registry shall be limited to the Department on Aging, the Department of Healthcare and Family Services, the Department of 14 15 Human Services, and the Department of Public Health and providers of direct care as described in subsection (a-10) of 16 this Section. These State agencies and providers licensed, 17 certified, or regulated providers by the Department of Public 18 Health, Healthcare and Family Service, or Human Services, or 19 20 the Department on Aging. The State of Illinois, any Department thereof, or a provider licensed, certified, or regulated, or 21 paid with public funds by, from, or on behalf of the Department 22 of Public Health, Healthcare and Family Services, or Human 23 24 Services, or the Department on Aging, shall not hire, or compensate, or utilize the services of any person seeking 25 26 employment, retain any contractors, or accept any volunteers to

1 provide direct care without first conducting an online check of 2 whether the person has been placed on the Registry the person through the Department of Public Health's Health Care Worker 3 4 Registry. These State agencies and providers The provider shall 5 maintain a copy of the results of the online check to 6 demonstrate compliance with this requirement. These State agencies and providers are The provider is prohibited from 7 retaining, hiring, compensating, or utilizing the services of 8 9 accepting a person to provide direct care if, including as a 10 consultant or volunteer, for whom the online check of the person reveals a verified 11 and substantiated claim of significant abuse, neglect, or financial exploitation or when 12 13 they otherwise gain knowledge of such a finding , to provide direct access to any adult aged 60 or older or any adult, 14 15 18, with a disability. Additionally, a provider is prohibited 16 from retaining a person for whom they gain knowledge of a verified and substantiated claim of abuse, neglect, 17 financial exploitation in a position that permits the caregiver 18 19 direct access to provide direct care to any adult aged 60 or 20 older or any adult, over 18, with a disability or direct access 21 to that individual's living quarters or personal, financial, or 22 medical records. Failure to comply with this requirement may 23 subject such a provider to corrective action by the appropriate 24 regulatory agency or other lawful remedies provided under the 25 applicable licensure, certification, or regulatory laws and 26 rules.

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(d) Notice to caregiver. The Department on Aging shall
 establish rules concerning notice to the caregiver in cases of
 <u>a verified and substantiated finding of significant</u> abuse,
 neglect, or financial exploitation <u>against him or her</u>.

5 (e) Notification to eligible adults, guardians, or agents. 6 As part of its investigation, the Department on Aging shall 7 notify an eligible adult, or an eligible adult's guardian or 8 agent, that <u>his or her</u> a caregiver's name may be placed on the 9 Registry based on a finding as described in subsection <u>(a-10)</u> 10 (a-1) of this Section.

11 (f) Notification to employer. The Department on Aging shall notify the appropriate State agency or provider of direct care, 12 13 when A provider licensed, certified, or regulated by the Department of Public Health, Healthcare and Family Services, or 14 15 Human Services, or the Department on Aging shall be notified of 16 an administrative finding against any caregiver who is an employee, consultant, or volunteer of a verified 17 and 18 substantiated finding decision of significant abuse, neglect, or financial exploitation of an eligible adult under this Act 19 20 is made against a caregiver. If there is an imminent risk of danger to the eligible adult or an imminent risk of misuse of 21 22 personal, medical, or financial information, the caregiver shall immediately be barred from providing direct care or 23 24 having direct access to the eligible adult, his or her living 25 his or her personal, financial, or medical guarters, 26 records, pending the outcome of any challenge, criminal

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prosecution, or other type of collateral action.

2 (g) Caregiver challenges. The Department on Aging shall
3 establish, by rule, procedures concerning caregiver challenges
4 <u>to placement on the Registry</u>.

5 Caregiver's rights to collateral action. The (h) 6 Department on Aging shall not make any report to the Registry if a caregiver notifies the Department in writing, including 7 any supporting documentation, that he or she is formally 8 9 challenging an adverse employment action resulting from a 10 verified and substantiated finding of significant abuse, 11 neglect, or financial exploitation by complaint filed with the Illinois Civil Service Commission, or by another means which 12 13 seeks to enforce the caregiver's rights pursuant to any 14 applicable collective bargaining agreement. If an action taken 15 by an employer against a caregiver as a result of a finding of 16 significant abuse, neglect, or financial exploitation is overturned through an action filed with the Illinois Civil 17 Service Commission or under 18 any applicable collective bargaining agreement after that caregiver's name has already 19 20 been sent to the Registry, the caregiver's name shall be 21 removed from the Registry.

(i) Removal from Registry. At any time after a report to the Registry, but no more than once in each successive 3-year period thereafter, for a maximum of 3 such requests, a caregiver may write to the Director of the Department on Aging to request removal of his or her name from the Registry in 09800HB4327ham001 -36- LRB098 18752 KTG 57139 a

1 relationship to a single incident. The caregiver shall bear the 2 burden of establishing showing cause that establishes, by a preponderance of the evidence, that removal of his or her name 3 4 from the Registry is in the public interest. Upon receiving 5 such a request, the Department on Aging shall conduct an 6 investigation and consider any evidentiary material provided. 7 The Department shall issue a decision either granting or 8 denying removal within 60 calendar days, and shall issue such 9 decision to the caregiver and report it to the Registry. The 10 waiver process at the Department of Public Health does not 11 apply to Registry reports from the Department on Aging. The Department on Aging shall establish standards for requesting 12 13 the removal of a name from the Registry by rule.

(j) Referral of Registry reports to health care facilities. 14 15 In the event an eligible adult receiving services from a 16 provider agency changes his or her residence from a domestic living situation to that of a health care or long term care 17 facility, the provider agency shall use reasonable efforts to 18 promptly inform the health care facility and the appropriate 19 20 Regional Long Term Care Ombudsman about any Registry reports relating to the eligible adult. For purposes of this Section, a 21 health care and long term care facility includes, but is not 22 limited to, any residential facility licensed, certified, or 23 24 regulated by the Department of Public Health, Healthcare and 25 Family Services, or Human Services.

26

(k) The Department on Aging shall have immunity from any

<u>liability, civil or criminal, for reporting information to the</u>
 <u>Registry.</u>

3 (Source: P.A. 98-49, eff. 1-1-14; revised 11-12-13.)

4 (320 ILCS 20/8) (from Ch. 23, par. 6608)

5 Sec. 8. Access to records. All records concerning reports of abuse, neglect, financial exploitation, or self-neglect and 6 all records generated as a result of such reports shall be 7 8 confidential and shall not be disclosed except as specifically 9 authorized by this Act or other applicable law. In accord with 10 established law and Department protocols, procedures, and policies, access to such records, but not access to the 11 12 identity of the person or persons making a report of alleged 13 abuse, neglect, financial exploitation, or self-neglect as 14 contained in such records, shall be provided, upon request, to 15 the following persons and for the following persons:

(1) Department staff, provider agency staff, other 16 17 aging network staff, and regional administrative agency staff, including staff of the Chicago Department on Aging 18 19 while that agency is designated as а regional 20 administrative agency, in the furtherance of their 21 responsibilities under this Act;

(2) A law enforcement agency investigating known or
suspected abuse, neglect, financial exploitation, or
self-neglect. Where a provider agency has reason to believe
that the death of an eligible adult may be the result of

1 abuse or neglect, including any reports made after death, 2 the agency shall immediately provide the appropriate law 3 enforcement agency with all records pertaining to the 4 eligible adult;

5 (2.5) A law enforcement agency, fire department fire protection district having 6 agency, or proper jurisdiction pursuant to a written agreement between a 7 8 provider agency and the law enforcement agency, fire 9 department agency, or fire protection district under which 10 the provider agency may furnish to the law enforcement 11 agency, fire department agency, or fire protection district a list of all eligible adults who may be at 12 13 imminent risk of abuse, neglect, financial exploitation, 14 or self-neglect;

(3) A physician who has before him or her or who is
involved in the treatment of an eligible adult whom he or
she reasonably suspects may be abused, neglected,
financially exploited, or self-neglected or who has been
referred to the Adult Protective Services Program;

(4) An eligible adult reported to be abused, neglected,
financially exploited, or self-neglected, or such adult's
authorized guardian or agent, unless such guardian or agent
is the abuser or the alleged abuser;

24 (4.5) An executor or administrator of the estate of an
25 eligible adult who is deceased;

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(5) In cases regarding abuse, neglect, or financial

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exploitation, a court or a quardian ad litem, upon its or 1 his or her finding that access to such records may be 2 3 necessary for the determination of an issue before the court. However, such access shall be limited to an in 4 5 camera inspection of the records, unless the court determines that disclosure of the information contained 6 therein is necessary for the resolution of an issue then 7 8 pending before it;

9 (5.5) In cases regarding self-neglect, a guardian ad 10 litem;

11 (6) A grand jury, upon its determination that access to 12 such records is necessary in the conduct of its official 13 business;

14 (7) Any person authorized by the Director, in writing,
15 for audit or bona fide research purposes;

16 (8) A coroner or medical examiner who has reason to
17 believe that an eligible adult has died as the result of
18 abuse, neglect, financial exploitation, or self-neglect.
19 The provider agency shall immediately provide the coroner
20 or medical examiner with all records pertaining to the
21 eligible adult;

(8.5) A coroner or medical examiner having proper jurisdiction, pursuant to a written agreement between a provider agency and the coroner or medical examiner, under which the provider agency may furnish to the office of the coroner or medical examiner a list of all eligible adults who may be at imminent risk of death as a result of abuse,
 neglect, financial exploitation, or self-neglect;

Financial 3 (9) Department of and Professional 4 Regulation staff and members of the Illinois Medical 5 Disciplinary Board or the Social Work Examining and Disciplinary Board in the course of investigating alleged 6 violations of the Clinical Social Work and Social Work 7 8 Practice Act by provider agency staff or other licensing 9 bodies at the discretion of the Director of the Department 10 on Aging;

11 (9-a) Department of Healthcare and Family Services 12 staff when that Department is funding services to the 13 eligible adult, including access to the identity of the 14 eligible adult;

15 (9-b) Department of Human Services staff when that 16 Department is funding services to the eligible adult or is 17 providing reimbursement for services provided by the 18 abuser or alleged abuser, including access to the identity 19 of the eligible adult;

(10) Hearing officers in the course of conducting an administrative hearing <u>under this Act; parties to such</u> <u>hearing shall be entitled to discovery as established by</u> <u>rule; to determine whether a verified and substantiated</u> <u>finding of significant abuse, neglect, or financial</u> <u>exploitation of an eligible adult by a caregiver warrants</u> <u>reporting to the Health Care Worker Registry; and</u> 1(11) A caregiver who challenges placement on the2Registry shall be given the statement of allegations in the3abuse report and the substantiation decision in the final4investigative report; and

5 (12) (11) The Illinois Guardianship and Advocacy Commission and the agency designated by the Governor under 6 of Protection and 7 Section 1 the Advocacv for 8 Developmentally Disabled Persons Act shall have access, 9 through the Department, to records, including the 10 findings, pertaining to a completed or closed 11 investigation of a report of suspected abuse, neglect, financial exploitation, or self-neglect of an eligible 12 adult. 13

14 (Source: P.A. 97-864, eff. 1-1-13; 98-49, eff. 7-1-13.)

15 (320 ILCS 20/9) (from Ch. 23, par. 6609)

16 Sec. 9. Authority to consent to services.

17 (a) If an eligible adult consents to an assessment of a 18 reported incident of suspected abuse, neglect, financial 19 exploitation, or self-neglect and, following the assessment of 20 such report, consents to services being provided according to 21 the case plan, such services shall be arranged to meet the 22 adult's needs, based upon the availability of resources to 23 provide such services. If an adult withdraws his or her consent 24 for an assessment of the reported incident or withdraws his or 25 her consent for services and refuses to accept such services,

1 the services shall not be provided.

2 (b) If it reasonably appears to the Department or other 3 agency designated under this Act that a person is an eligible 4 adult and lacks the capacity to consent to an assessment of a 5 reported incident of suspected abuse, neglect, financial 6 exploitation, or self-neglect or to necessary services, the Department or other agency shall take appropriate action 7 necessary to ameliorate risk to the eligible adult if there is 8 9 a threat of ongoing harm or another emergency exists. The 10 Department or other agency shall be authorized to seek the 11 notify the Illinois Guardianship and Advocacy Commission, the Office of State Guardian, or any other appropriate agency, of 12 the potential need for appointment of a temporary guardian as 13 provided in Article XIa of the Probate Act of 1975 for the 14 15 purpose of consenting to an assessment of the reported incident 16 and such services, together with an order for an evaluation of the eligible adult's physical, psychological, and medical 17 18 condition and decisional capacity.

19 (c) A quardian of the person of an eligible adult may 20 consent to an assessment of the reported incident and to services being provided according to the case plan. If an 21 eligible adult lacks capacity to consent, an agent having 22 23 authority under a power of attorney may consent to an 24 assessment of the reported incident and to services. If the 25 quardian or agent is the suspected abuser and he or she 26 withdraws consent for the assessment of the reported incident,

or refuses to allow services to be provided to the eligible adult, the Department, an agency designated under this Act, or the office of the Attorney General may request a court order seeking appropriate remedies, and may in addition request removal of the guardian and appointment of a successor guardian or request removal of the agent and appointment of a guardian.

(d) If an emergency exists and the Department or other 7 8 agency designated under this Act reasonably believes that a 9 person is an eligible adult and lacks the capacity to consent 10 to necessary services, the Department or other agency may 11 request an ex parte order from the circuit court of the county in which the petitioner or respondent resides or in which the 12 13 alleged abuse, neglect, financial exploitation, or 14 self-neglect occurred, authorizing an assessment of a report of 15 alleged or suspected abuse, neglect, financial exploitation, 16 or self-neglect or the provision of necessary services, or both, including relief available under the Illinois Domestic 17 Violence Act of 1986 in accord with established law and 18 19 Department protocols, procedures, and policies. Petitions 20 filed under this subsection shall be treated as expedited proceedings. When an eligible adult is at risk of serious 21 22 injury or death and it reasonably appears that the eligible 23 adult lacks capacity to consent to necessary services, the 24 Department or other agency designated under this Act may take 25 action necessary to ameliorate the risk in accordance with 26 administrative rules promulgated by the Department.

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1 (d-5) For purposes of this Section, an eligible adult 2 "lacks the capacity to consent" if qualified staff of an agency 3 designated under this Act reasonably determine, in accordance 4 with administrative rules promulgated by the Department, that 5 he or she appears either (i) unable to receive and evaluate 6 information related to the assessment or services or (ii) unable to communicate in any manner decisions related to the 7 8 assessment of the reported incident or services.

9 (e) Within 15 days after the entry of the ex parte 10 emergency order, the order shall expire, or, if the need for 11 assessment of the reported incident or services continues, the 12 provider agency shall petition for the appointment of a 13 guardian as provided in Article XIa of the Probate Act of 1975 14 for the purpose of consenting to such assessment or services or 15 to protect the eligible adult from further harm.

16 (f) If the court enters an ex parte order under subsection (d) for an assessment of a reported incident of alleged or 17 neglect, financial 18 suspected abuse, exploitation, or 19 self-neglect, or for the provision of necessary services in 20 connection with alleged or suspected self-neglect, or for both, 21 the court, as soon as is practicable thereafter, shall appoint 22 a guardian ad litem for the eligible adult who is the subject 23 of the order, for the purpose of reviewing the reasonableness 24 of the order. The quardian ad litem shall review the order and, 25 if the guardian ad litem reasonably believes that the order is 26 unreasonable, the guardian ad litem shall file a petition with

1 the court stating the guardian ad litem's belief and requesting 2 that the order be vacated.

3 (g) In all cases in which there is a substantiated finding 4 of abuse, neglect, or financial exploitation by a guardian, the 5 Department shall, within 30 days after the finding, notify the 6 Probate Court with jurisdiction over the guardianship.

7 (Source: P.A. 98-49, eff. 7-1-13.)

8 (320 ILCS 20/13)

9 Sec. 13. Access.

10 accord with established law (a) Ιn and Department protocols, procedures, and policies, the designated provider 11 agencies shall have access to eligible adults who have been 12 reported or found to be victims of abuse, neglect, financial 13 14 exploitation, or self-neglect in order to assess the validity 15 of the report, assess other needs of the eligible adult, and provide services in accordance with this Act. 16

(a-5) A representative of the Department or a designated 17 18 provider agency that is actively involved in an abuse, neglect, 19 financial exploitation, or self-neglect investigation under this Act shall be allowed access to the financial records, 20 21 mental and physical health records, and other relevant evaluative records of the eligible adult which are in the 22 23 possession of any individual, financial institution, health 24 care provider, mental health provider, educational facility, or other facility if necessary to complete the investigation 25

1 mandated by this Act. The provider or facility shall provide
2 such records to the representative upon receipt of a written
3 request and certification from the Department or designated
4 provider agency that an investigation is being conducted under
5 this Act and that records are pertinent to the investigation.
6 Any records received by such representative, the

7 <u>confidentiality of which is protected by another law or rule,</u>
8 <u>shall be maintained as confidential, except for such use as may</u>
9 <u>be necessary for any administrative or other legal proceeding.</u>

10 (b) Where access to an eligible adult is denied, <u>including</u> 11 <u>the refusal to provide requested records</u>, the Office of the 12 Attorney General, the Department, or the provider agency may 13 petition the court for an order to require appropriate access 14 where:

(1) a caregiver or third party has interfered with theassessment or service plan, or

17 (2) the agency has reason to believe that the eligible 18 adult is denying access because of coercion, extortion, or 19 justifiable fear of future abuse, neglect, or financial 20 exploitation.

(c) The petition for an order requiring appropriate accessshall be afforded an expedited hearing in the circuit court.

(d) If the provider agency has substantiated financial exploitation against an eligible adult, and has documented a reasonable belief that the eligible adult will be irreparably harmed as a result of the financial exploitation, the Office of 09800HB4327ham001 -47- LRB098 18752 KTG 57139 a

1 the Attorney General, the Department, or the provider agency may petition for an order freezing the assets of the eligible 2 3 adult. The petition shall be filed in the county or counties in 4 which the assets are located. The court's order shall prohibit 5 the sale, gifting, transfer, or wasting of the assets of the eligible adult, both real and personal, owned by, or vested in, 6 the eligible adult, without the express permission of the 7 8 court. The petition to freeze the assets of the eligible adult 9 shall be afforded an expedited hearing in the circuit court.

10 (Source: P.A. 96-526, eff. 1-1-10.)

11 (320 ILCS 20/15)

12 Sec. 15. Abuse Fatality Review Teams.

13 (a) State policy.

14 (1) Both the State and the community maintain a
15 commitment to preventing the abuse, neglect, and financial
16 exploitation of at-risk adults. This includes a charge to
17 bring perpetrators of crimes against at-risk adults to
18 justice and prevent untimely deaths in the community.

19 (2) When an at-risk adult dies, the response to the 20 death by the community, law enforcement, and the State must 21 include an accurate and complete determination of the cause 22 of death, and the development and implementation of 23 measures to prevent future deaths from similar causes.

24 (3) Multidisciplinary and multi-agency reviews of
 25 deaths can assist the State and counties in developing a

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1 greater understanding of the incidence and causes of 2 premature deaths and the methods for preventing those 3 deaths, improving methods for investigating deaths, and 4 identifying gaps in services to at-risk adults.

5 (4) Access to information regarding the deceased 6 person and his or her family by multidisciplinary and 7 multi-agency at risk adult fatality review teams is 8 necessary in order to fulfill their purposes and duties.

(a-5) Definitions. As used in this Section:

9

10 "Advisory Council" means the Illinois At-Risk Adult
 11 Fatality Review Team Advisory Council.

12 "Review Team" means a regional interagency at-risk
 13 adult fatality review team.

14 (b) The Director, in consultation with the Advisory 15 Council, law enforcement, and other professionals who work in 16 the fields of investigating, treating, or preventing abuse or neglect of at-risk adults, shall appoint members to a minimum 17 18 of one review team in each of the Department's planning and service areas. Each member of a review team shall be appointed 19 20 for a 2-year term and shall be eligible for reappointment upon 21 the expiration of the term. A review team's purpose in conducting review of at-risk adult deaths is: (i) to assist 22 23 local agencies in identifying and reviewing suspicious deaths 24 of adult victims of alleged, suspected, or substantiated abuse 25 or neglect in domestic living situations; (ii) to facilitate 26 communications between officials responsible for autopsies and

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1 inquests and persons involved in reporting or investigating alleged or suspected cases of abuse, neglect, or financial 2 3 exploitation of at-risk adults and persons involved in 4 providing services to at-risk adults; (iii) to evaluate means 5 by which the death might have been prevented; and (iv) to report its findings to the appropriate agencies and the 6 Advisory Council and make recommendations that may help to 7 8 reduce the number of at-risk adult deaths caused by abuse and 9 neglect and that may help to improve the investigations of 10 deaths of at-risk adults and increase prosecutions, if 11 appropriate.

12 (b-5) Each such team shall be composed of representatives13 of entities and individuals including, but not limited to:

14 (1) the Department on Aging;

15 (2) coroners or medical examiners (or both);

- 16 (3) State's Attorneys;
- 17 (4) local police departments;
- 18 (5) forensic units;

19 (6) local health departments;

20 (7) a social service or health care agency that 21 provides services to persons with mental illness, in a 22 program whose accreditation to provide such services is 23 recognized by the Division of Mental Health within the 24 Department of Human Services;

(8) a social service or health care agency that
 provides services to persons with developmental

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disabilities, in a program whose accreditation to provide such services is recognized by the Division of Developmental Disabilities within the Department of Human Services;

5 (9) a local hospital, trauma center, or provider of
6 emergency medicine;

7 (10) providers of services for eligible adults in
8 domestic living situations; and

9 (11) a physician, psychiatrist, or other health care 10 provider knowledgeable about abuse and neglect of at-risk 11 adults.

(c) A review team shall review cases of deaths of at-risk 12 13 adults occurring in its planning and service area (i) involving 14 blunt force trauma or an undetermined manner or suspicious 15 cause of death, (ii) if requested by the deceased's attending 16 physician or an emergency room physician, (iii) upon referral by a health care provider, (iv) upon referral by a coroner or 17 18 medical examiner, (v) constituting an open or closed case from an adult protective services agency, law enforcement agency, 19 20 State's Attorney's office, or the Department of Human Services' Office of the Inspector General that involves alleged or 21 22 suspected abuse, neglect, or financial exploitation; or (vi) 23 upon referral by a law enforcement agency or State's Attorney's 24 office. If such a death occurs in a planning and service area 25 where a review team has not yet been established, the Director 26 shall request that the Advisory Council or another review team 09800HB4327ham001 -51- LRB098 18752 KTG 57139 a

1 review that death. A team may also review deaths of at-risk 2 adults if the alleged abuse or neglect occurred while the 3 person was residing in a domestic living situation.

A review team shall meet not less than 6 times a year to discuss cases for its possible review. Each review team, with the advice and consent of the Department, shall establish criteria to be used in discussing cases of alleged, suspected, or substantiated abuse or neglect for review and shall conduct its activities in accordance with any applicable policies and procedures established by the Department.

11 (c-5) The Illinois At-Risk Adult Fatality Review Team Teams Advisory Council, consisting of one member from each review 12 13 team in Illinois, shall be the coordinating and oversight body for review teams and activities in Illinois. The Director may 14 15 appoint to the Advisory Council any ex-officio members deemed 16 necessary. Persons with expertise needed by the Advisory Council may be invited to meetings. The Advisory Council must 17 select from its members a chairperson and a vice-chairperson, 18 19 each to serve а 2-vear term. The chairperson or 20 vice-chairperson may be selected to serve additional. 21 subsequent terms. The Advisory Council must meet at least 4 22 times during each calendar year.

The Department may provide or arrange for the staff support necessary for the Advisory Council to carry out its duties. The Director, in cooperation and consultation with the Advisory Council, shall appoint, reappoint, and remove review team 1 members.

2 The Advisory Council has, but is not limited to, the 3 following duties:

4

(1) To serve as the voice of review teams in Illinois.

5 (2) To oversee the review teams in order to ensure that 6 the review teams' work is coordinated and in compliance 7 with State statutes and the operating protocol.

8 (3) To ensure that the data, results, findings, and 9 recommendations of the review teams are adequately used in 10 a timely manner to make any necessary changes to the 11 policies, procedures, and State statutes in order to 12 protect at-risk adults.

13 (4) To collaborate with the Department in order to
14 develop any legislation needed to prevent unnecessary
15 deaths of at-risk adults.

16 (5) To ensure that the review teams' review processes 17 are standardized in order to convey data, findings, and 18 recommendations in a usable format.

19 (6) To serve as a link with review teams throughout the
 20 country and to participate in national review team
 21 activities.

(7) To provide the review teams with the most current
 information and practices concerning at-risk adult death
 review and related topics.

(8) To perform any other functions necessary to enhance
the capability of the review teams to reduce and prevent

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at-risk adult fatalities.

The Advisory Council may prepare an annual report, in 2 3 consultation with the Department, using aggregate data 4 gathered by review teams and using the review teams' 5 recommendations to develop education, prevention, prosecution, or other strategies designed to improve the coordination of 6 services for at-risk adults and their families. 7

8 In any instance where a review team does not operate in 9 accordance with established protocol, the Director, in 10 consultation and cooperation with the Advisory Council, must 11 take any necessary actions to bring the review team into 12 compliance with the protocol.

13 (d) Any document or oral or written communication shared 14 within or produced by the review team relating to a case 15 discussed or reviewed by the review team is confidential and is 16 not admissible as evidence in any civil or criminal proceeding, except for use by a State's Attorney's office in prosecuting a 17 18 criminal case against a caregiver. Those records and 19 information are, however, subject to discovery or subpoena, and 20 are admissible as evidence, to the extent they are otherwise 21 available to the public.

Any document or oral or written communication provided to a review team by an individual or entity, and created by that individual or entity solely for the use of the review team, is confidential, is not subject to disclosure to or discoverable by another party, and is not admissible as evidence in any 09800HB4327ham001 -54- LRB098 18752 KTG 57139 a

1 civil or criminal proceeding, except for use by a State's 2 Attorney's office in prosecuting a criminal case against a 3 caregiver. Those records and information are, however, subject 4 to discovery or subpoena, and are admissible as evidence, to 5 the extent they are otherwise available to the public.

Each entity or individual represented on the abuse fatality 6 review team may share with other members of the team 7 8 information in the entity's or individual's possession 9 concerning the decedent who is the subject of the review or 10 concerning any person who was in contact with the decedent, as 11 well as any other information deemed by the entity or individual to be pertinent to the review. Any such information 12 13 shared by an entity or individual with other members of the review team is confidential. The intent of this paragraph is to 14 15 permit the disclosure to members of the review team of any 16 information deemed confidential or privileged or prohibited from disclosure by any other provision of law. Release of 17 confidential communication between domestic violence advocates 18 and a domestic violence victim shall follow subsection (d) of 19 20 Section 227 of the Illinois Domestic Violence Act of 1986 which allows for the waiver of privilege afforded to guardians, 21 executors, or administrators of the estate of the domestic 22 23 violence victim. This provision relating to the release of 24 confidential communication between domestic violence advocates 25 and a domestic violence victim shall exclude adult protective 26 service providers.

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A coroner's or medical examiner's office may share with the review team medical records that have been made available to the coroner's or medical examiner's office in connection with that office's investigation of a death.

5 Members of a review team and the Advisory Council are not 6 subject to examination, in any civil or criminal proceeding, 7 concerning information presented to members of the review team 8 or the Advisory Council or opinions formed by members of the 9 review team or the Advisory Council based on that information. 10 A person may, however, be examined concerning information 11 provided to a review team or the Advisory Council.

12 (d-5) Meetings of the review teams and the Advisory Council 13 may be closed to the public under the Open Meetings Act. 14 Records and information provided to a review team and the 15 Advisory Council, and records maintained by a team or the 16 Advisory Council, are exempt from release under the Freedom of 17 Information Act.

(e) A review team's recommendation in relation to a case discussed or reviewed by the review team, including, but not limited to, a recommendation concerning an investigation or prosecution, may be disclosed by the review team upon the completion of its review and at the discretion of a majority of its members who reviewed the case.

(e-5) The State shall indemnify and hold harmless members
of a review team and the Advisory Council for all their acts,
omissions, decisions, or other conduct arising out of the scope

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of their service on the review team or Advisory Council, except those involving willful or wanton misconduct. The method of providing indemnification shall be as provided in the State Employee Indemnification Act.

5 (f) The Department, in consultation with coroners, medical 6 examiners, and law enforcement agencies, shall use aggregate data gathered by and recommendations from the Advisory Council 7 8 and the review teams to create an annual report and may use recommendations to 9 those data and develop education, 10 prevention, prosecution, or other strategies designed to 11 improve the coordination of services for at-risk adults and their families. The Department or other State or county agency, 12 13 in consultation with coroners, medical examiners, and law 14 enforcement agencies, also may use aggregate data gathered by 15 the review teams to create a database of at-risk individuals.

16 (g) The Department shall adopt such rules and regulations17 as it deems necessary to implement this Section.

18 (Source: P.A. 98-49, eff. 7-1-13.)

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