



## 104TH GENERAL ASSEMBLY

### State of Illinois

2025 and 2026

SB0021

Introduced 1/13/2025, by Sen. Christopher Belt

#### SYNOPSIS AS INTRODUCED:

210 ILCS 85/10.9  
210 ILCS 85/10.15 new  
210 ILCS 85/10.20 new

Amends the Hospital Licensing Act. Defines "hospital worker" as any person who receives an hourly wage, directly or indirectly via a subcontractor, from a hospital licensed under the Act. In provisions concerning limitations on mandated overtime and requiring rest periods for nurses, replaces "nurse" with "hospital worker". Requires additional hospital staffing information to be reported to the Department of Public Health, including any and all staffing matrices, staffing metrics, and underlying materials used to determine the metrics. Provides that the Department shall produce an annual report based on staffing disclosures and make recommendations for minimum staffing standards for hospital workers in each hospital unit. Requires hospitals to conduct a competency validation for each hospital worker hired, as a condition of employment, within the first month of employment and at no cost to the new hire. Provides that each hospital worker's competency validation must be submitted to the Department within 2 weeks after the hospital worker's start date. Establishes ongoing verification requirements for each hospital worker, and requires hospitals to submit a list of all competent employees currently employed at the end of each calendar year. Requires the Department to maintain, and make available to the public, a registry of all competent employees, including the hospital worker's name, address, contact information, and current employer. Provides that hospital employers that fail to comply with the competency validations requirements shall receive a fine equal to 0.1% of annual revenue reported during the most recently completed fiscal year each day until the hospital complies. Sets forth provisions concerning a hospital's requirements regarding assignment despite objection forms, a resolution process under the Department for assignment despite objection for certain hospital workers, and a fine for hospitals that fail to honor the assignment despite objection process. Makes other changes.

LRB104 06121 BAB 16154 b

1 AN ACT concerning regulation.

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

4 Section 5. The Hospital Licensing Act is amended by  
5 changing Section 10.9 and by adding Sections 10.15 and 10.20  
6 as follows:

7 (210 ILCS 85/10.9)

8 Sec. 10.9. Hospital worker ~~Nurse~~ mandated overtime  
9 prohibited.

10 (a) Definitions. As used in this Section:

11 "Hospital worker" means any person who receives an hourly  
12 wage, directly or indirectly via a subcontractor, from a  
13 hospital licensed under this Act.

14 "Mandated overtime" means work that is required by the  
15 hospital in excess of an agreed-to, predetermined work shift.  
16 Time spent by nurses required to be available as a condition of  
17 employment in specialized units, such as surgical nursing  
18 services, shall not be counted or considered in calculating  
19 the amount of time worked for the purpose of applying the  
20 prohibition against mandated overtime under subsection (b).

21 ~~"Nurse" means any advanced practice registered nurse,~~  
22 ~~registered professional nurse, or licensed practical nurse, as~~  
23 ~~defined in the Nurse Practice Act, who receives an hourly wage~~

1 ~~and has direct responsibility to oversee or carry out nursing~~  
2 ~~care. For the purposes of this Section, "advanced practice~~  
3 ~~registered nurse" does not include a certified registered~~  
4 ~~nurse anesthetist who is primarily engaged in performing the~~  
5 ~~duties of a nurse anesthetist.~~

6 "Related to the subcontractor" means that the  
7 subcontractor is, to a significant extent, associated or  
8 affiliated with, owns or is owned by, or has control of or is  
9 controlled by, the organization furnishing services to a  
10 hospital licensed under this Act.

11 "Subcontractor" means any entity, including an individual  
12 or individuals, that contracts with a hospital licensed under  
13 this Act to supply a service. "Subcontractor" includes an  
14 organization that is related to the subcontractor that has a  
15 contract with the subcontractor.

16 "Unforeseen emergent circumstance" means (i) any declared  
17 national, State, or municipal disaster or other catastrophic  
18 event, or any implementation of a hospital's disaster plan,  
19 that will substantially affect or increase the need for health  
20 care services or (ii) any circumstance in which patient care  
21 needs require specialized nursing skills through the  
22 completion of a procedure. An "unforeseen emergent  
23 circumstance" does not include situations in which the  
24 hospital fails to have enough ~~nursing~~ staff to meet the usual  
25 and reasonably predictable patient care ~~nursing~~ needs of its  
26 patients.

1 (b) Mandated overtime prohibited. No hospital worker ~~nurse~~  
2 may be required to work mandated overtime except in the case of  
3 an unforeseen emergent circumstance when such overtime is  
4 required only as a last resort. Such mandated overtime shall  
5 not exceed 4 hours beyond an agreed-to, predetermined work  
6 shift.

7 (c) Rest period required ~~Off-duty period~~. When a hospital  
8 worker ~~nurse~~ is mandated to work up to 12 consecutive hours,  
9 the hospital worker ~~nurse~~ must be allowed at least 8  
10 consecutive hours of time off ~~off duty time~~ immediately  
11 following the completion of a shift.

12 (d) Retaliation prohibited. No hospital may discipline,  
13 discharge, or take any other adverse employment action against  
14 a hospital worker ~~nurse~~ solely because the hospital worker  
15 ~~nurse~~ refused to work mandated overtime as prohibited under  
16 subsection (b).

17 (e) Violations. Any employee of a hospital that is subject  
18 to this Act may file a complaint with the Department of Public  
19 Health regarding an alleged violation of this Section. The  
20 complaint must be filed within 45 days following the  
21 occurrence of the incident giving rise to the alleged  
22 violation. The Department must forward notification of the  
23 alleged violation to the hospital in question within 3  
24 business days after the complaint is filed. Upon receiving a  
25 complaint of a violation of this Section, the Department may  
26 take any action authorized under Section 7 or 9 of this Act.

1 (f) Proof of violation. Any violation of this Section must  
2 be proved by clear and convincing evidence that a hospital  
3 worker ~~nurse~~ was required to work overtime against the  
4 hospital worker's ~~his or her~~ will. The hospital may defeat the  
5 claim of a violation by presenting clear and convincing  
6 evidence that an unforeseen emergent circumstance, which  
7 required overtime work, existed at the time the employee was  
8 required or compelled to work.

9 (Source: P.A. 100-513, eff. 1-1-18.)

10 (210 ILCS 85/10.15 new)

11 Sec. 10.15. Additional staffing transparency and reporting  
12 requirements.

13 (a) Definitions. As used in this Section:

14 "Hospital worker" means any person who receives an hourly  
15 wage, directly or indirectly via a subcontractor, from a  
16 hospital licensed under this Act.

17 "Related to the subcontractor" means that the  
18 subcontractor is, to a significant extent, associated or  
19 affiliated with, owns or is owned by, or has control of or is  
20 controlled by, the organization furnishing services to a  
21 hospital licensed under this Act.

22 "Staffing metric" means any tool used by hospital  
23 management to determine safe staffing levels in a patient care  
24 or support services unit.

25 "Subcontractor" means any entity, including an individual

1 or individuals, that contracts with a hospital licensed under  
2 this Act to supply a service. "Subcontractor" includes an  
3 organization that is related to the subcontractor that has a  
4 contract with the subcontractor.

5 "Unit" means a functional division of a hospital that  
6 provides patient care or support services.

7 (b) Hospitals licensed under this Act must employ and  
8 schedule enough hospital workers to provide quality patient  
9 care and ensure patient safety.

10 (c) In order to ensure compliance with safe staffing  
11 practices, hospitals licensed under this Act must make  
12 available upon request all the staffing matrices or other  
13 staffing metrics used to assess and maintain safe staffing  
14 levels for hospital workers in each unit.

15 (d) A hospital must also share with the Department at the  
16 beginning of each calendar year any and all staffing matrices,  
17 staffing metrics, and underlying materials used to determine  
18 the metrics.

19 (e) The Department shall produce an annual report based on  
20 staffing disclosures required under this Section, beginning  
21 the first year after implementation.

22 (f) The Department shall make recommendations for minimum  
23 staffing standards for hospital workers in each hospital unit  
24 based on the information collected under this Section.

1       Sec. 10.20. Hospital worker competency validation and  
2 assignment despite objection.

3       (a) Findings. The General Assembly finds that:

4           (1) The State of Illinois has an obligation to ensure  
5 hospitals provide quality patient care.

6           (2) Numerous studies have linked patient outcomes,  
7 including in-hospital mortality rates, to hospital worker  
8 staffing.

9           (3) Despite the preponderance of evidence that  
10 adequate staffing improves patient outcomes, hospitals in  
11 Illinois and elsewhere too often systemically and  
12 intentionally understaff to maximize profit, even at the  
13 expense of quality patient care.

14           (4) The COVID-19 pandemic both exposed and exacerbated  
15 these unsafe staffing practices.

16           (5) The State asserts that, based on their  
17 demonstrated competencies and training, hospital workers  
18 are best positioned to identify unsafe conditions that  
19 jeopardize quality patient care, especially short  
20 staffing.

21           (6) Hospitals perform competency validations and  
22 ongoing verifications to ensure hospital workers know how  
23 to perform their jobs safely and to identify unsafe  
24 practices, including short staffing.

25           (7) The State should require hospitals to affirm that  
26 hospital workers have received the necessary training to

1 safely perform their work via competency validations and  
2 ongoing verification and empower these hospital workers to  
3 identify and formally object to unsafe working conditions,  
4 including short staffing.

5 (8) To facilitate this, the State should create a  
6 dispute resolution process for hospital workers to  
7 formally object to unsafe working conditions.

8 (b) Definitions. As used in this Section:

9 "Assignment despite objection" means a formal process by  
10 which hospital workers notify management when they receive an  
11 assignment that, based on their training, is potentially  
12 unsafe.

13 "Competency validation" means a determination based on a  
14 hospital worker's satisfactory performance of each specific  
15 element of the hospital worker's job description and of  
16 specific requirements of the unit in which the hospital worker  
17 is employed in a safe and ethical manner.

18 "Competent employee" means a hospital worker whose  
19 employer has received a competency validation or ongoing  
20 verification during a given calendar year.

21 "Hospital worker" means any person who receives an hourly  
22 wage, directly or indirectly via a subcontractor, from a  
23 hospital licensed under this Act.

24 "Ongoing verification" means an annual redetermination  
25 based on a hospital worker's satisfactory performance of each  
26 specific element of the hospital worker's job description and

1 the specific requirements of the unit in which the hospital  
2 worker is employed in a safe and ethical manner.

3 "Subcontractor" means any entity, including an individual  
4 or individuals, that contracts with a hospital licensed under  
5 this Act to supply a service. "Subcontractor" includes an  
6 organization that, to a significant extent, is associated or  
7 affiliated with, owns or is owned by, or has control of or is  
8 controlled by, the entity furnishing services to a hospital  
9 licensed under this Act.

10 (c) Competency validation credential.

11 (1) Hospitals licensed under this Act shall conduct a  
12 competency validation for each hospital worker hired, as a  
13 condition of employment, within the first month of  
14 employment and at no cost to the new hire.

15 (2) The competency validation formally affirms the  
16 hospital has adequately trained a hospital worker to  
17 perform all aspects of the hospital worker's job safely  
18 and to identify unsafe conditions, including inadequate  
19 staffing.

20 (3) Hospitals must submit documentation of each  
21 hospital worker's competency validation to the Department  
22 within 2 weeks after the hospital worker's start date.

23 (4) Hospitals licensed under this Act shall also  
24 conduct an ongoing verification for each hospital worker  
25 employed during the calendar year to determine each  
26 hospital worker's continued competency to perform the

1 hospital worker's job. The hospitals shall submit  
2 documentation of each hospital worker's ongoing  
3 verification to the Department within 2 weeks after  
4 completion.

5 (5) Hospitals licensed under this Act shall submit a  
6 list of all competent employees currently employed at the  
7 end of each calendar year.

8 (6) The Department shall maintain, and make available  
9 to the public, a registry of all competent employees,  
10 including the hospital worker's name, address, contact  
11 information, and current employer.

12 (7) Hospital employers that fail to comply with the  
13 requirements of this Section shall receive a fine equal to  
14 0.1% of annual revenue reported during the most recently  
15 completed fiscal year each day until the hospital complies  
16 with the law.

17 (d) Assignment despite objection.

18 (1) A hospital licensed under this Act must create an  
19 assignment despite objection form that is applicable and  
20 accessible to all hospital workers that enables the  
21 hospital workers to formally object to unsafe working  
22 conditions (including unsafe staffing levels) and shifts  
23 liability for the unsafe working conditions to the  
24 hospital.

25 (2) The assignment despite objection form must include  
26 the following language: "This is to confirm that I

1 notified you that, in my professional judgment derived  
2 from my competency validation, today's assignment is  
3 unsafe and places patients at risk. As a result, the  
4 facility is responsible for any adverse effects on patient  
5 care."

6 (3) A hospital must retain a copy of each assignment  
7 despite objection form and provide copies to the hospital  
8 worker's union (where relevant) and the Department.  
9 Hospitals must provide a report of all assignment despite  
10 objection forms filed annually at the end of each calendar  
11 year and maintain these records for a minimum of 5 years.

12 (4) A hospital must not retaliate against hospital  
13 workers for filing an assignment despite objection form or  
14 for reporting or objecting to unsafe conditions.

15 (e) Resolution process.

16 (1) A hospital must develop a transparent, fair, and  
17 expedient assignment despite objection resolution process  
18 for all hospital workers either via collective bargaining  
19 or in accordance with the Department process described in  
20 paragraph (3).

21 (2) Hospital workers currently covered by a collective  
22 bargaining agreement that includes an assignment despite  
23 objection resolution process shall abide by the process  
24 included in the collective bargaining agreement.

25 (3) Hospital workers not covered by a collective  
26 bargaining agreement that includes an assignment despite

1 objection resolution process may use the Department's  
2 resolution process. The Department's resolution process  
3 for an assignment despite objection shall be as follows:

4 (A) Step 1: The objecting hospital worker shall  
5 make a good faith effort to inform the manager or  
6 supervisor at the time of the objection to assignment.

7 (B) Step 2: If the manager or supervisor fails to  
8 resolve the unsafe situation to the reporting hospital  
9 worker's satisfaction, the hospital worker shall then  
10 complete an assignment despite objection form and  
11 submit a copy to the manager or supervisor, submit a  
12 copy to the representative organization if covered by  
13 a collective bargaining agreement, and keep a copy for  
14 the hospital worker's records.

15 (C) Hospital management must respond in writing to  
16 the assignment despite objection within one week of  
17 its receipt and shall provide a copy of the response to  
18 the hospital worker's representative organization if  
19 the hospital worker is covered by a collective  
20 bargaining agreement.

21 (D) If the affected hospital worker is unsatisfied  
22 with the management's response, the hospital must  
23 convene a Safety Review Panel composed of 3  
24 representatives selected by the hospital and 3  
25 representatives selected by hospital workers via a  
26 transparent democratic process (the hospital workers'

1 representatives need not be hospital employees). The  
2 panel shall attempt to resolve the dispute within 15  
3 days of referral, unless extended by mutual consent.

4 (E) If the Safety Review Panel cannot resolve the  
5 dispute within 15 days of referral, the Department  
6 shall appoint a mutually agreed upon third-party  
7 neutral to assist in resolving the dispute. The  
8 third-party neutral shall make a binding decision to  
9 resolve the dispute.

10 (4) Hospital employers that refuse to honor the  
11 Department's assignment despite objection resolution  
12 process shall receive a fine equal to 0.1% of annual  
13 revenue reported each day during the most recently  
14 completed fiscal year until the hospital complies with the  
15 resolution process.

16 (5) The Department shall create a Hospital Safety  
17 Advocate position responsible for enforcing the new  
18 competency credentialing and assignment despite objection  
19 requirements and developing additional rules, as needed.