



Sen. Rachelle Crowe

Filed: 4/21/2021

10200SB0701sam002

LRB102 04507 KTG 25725 a

1 AMENDMENT TO SENATE BILL 701

2 AMENDMENT NO. \_\_\_\_\_. Amend Senate Bill 701 by replacing  
3 everything after the enacting clause with the following:

4 "Section 5. The Adult Protective Services Act is amended  
5 by changing Sections 2, 3, 3.5, 4, 4.1, 4.2, 5, 7.1, 7.5, 8, 9,  
6 13, and 15 and by adding Sections 3.3 and 3.6 as follows:

7 (320 ILCS 20/2) (from Ch. 23, par. 6602)

8 Sec. 2. Definitions. As used in this Act, unless the  
9 context requires otherwise:

10 (a) "Abandonment" means the desertion or willful forsaking  
11 of an eligible adult by an individual responsible for the care  
12 and custody of that eligible adult under circumstances in  
13 which a reasonable person would continue to provide care and  
14 custody. Nothing in this Act shall be construed to mean that an  
15 eligible adult is a victim of abandonment because of health  
16 care services provided or not provided by licensed health care

1 professionals.

2 (a-1) ~~(a)~~ "Abuse" means causing any physical, mental or  
3 sexual injury to an eligible adult, including exploitation of  
4 such adult's financial resources, and abandonment.

5 Nothing in this Act shall be construed to mean that an  
6 eligible adult is a victim of abuse, abandonment, neglect, or  
7 self-neglect for the sole reason that he or she is being  
8 furnished with or relies upon treatment by spiritual means  
9 through prayer alone, in accordance with the tenets and  
10 practices of a recognized church or religious denomination.

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

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

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

22 (a-7) "Caregiver" means a person who either as a result of  
23 a family relationship, voluntarily, or in exchange for  
24 compensation has assumed responsibility for all or a portion  
25 of the care of an eligible adult who needs assistance with  
26 activities of daily living or instrumental activities of daily

1 living.

2 (b) "Department" means the Department on Aging of the  
3 State of Illinois.

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

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

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

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

16 (1.5) A facility licensed under the ID/DD Community  
17 Care Act;

18 (1.6) A facility licensed under the MC/DD Act;

19 (1.7) A facility licensed under the Specialized Mental  
20 Health Rehabilitation Act of 2013;

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

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

26 (4) A hospital, sanitarium, or other institution, the

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

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

8 (6) (Blank);

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

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

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

18 (e) "Eligible adult" means either an adult with  
19 disabilities aged 18 through 59 or a person aged 60 or older  
20 who resides in a domestic living situation and is, or is  
21 alleged to be, abused, abandoned, neglected, or financially  
22 exploited by another individual or who neglects himself or  
23 herself. "Eligible adult" also includes an adult who resides  
24 in any of the facilities that are excluded from the definition  
25 of "domestic living situation" under paragraphs (1) through  
26 (9) of subsection (d), if either: (i) the alleged abuse,

1 abandonment, or neglect occurs outside of the facility and not  
2 under facility supervision and the alleged abuser is a family  
3 member, caregiver, or another person who has a continuing  
4 relationship with the adult; or (ii) the alleged financial  
5 exploitation is perpetrated by a family member, caregiver, or  
6 another person who has a continuing relationship with the  
7 adult, but who is not an employee of the facility where the  
8 adult resides.

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

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

18 (f-5) "Mandated reporter" means any of the following  
19 persons while engaged in carrying out their professional  
20 duties:

21 (1) a professional or professional's delegate while  
22 engaged in: (i) social services, (ii) law enforcement,  
23 (iii) education, (iv) the care of an eligible adult or  
24 eligible adults, or (v) any of the occupations required to  
25 be licensed under the Clinical Psychologist Licensing Act,  
26 the Clinical Social Work and Social Work Practice Act, the

1 Illinois Dental Practice Act, the Dietitian Nutritionist  
2 Practice Act, the Marriage and Family Therapy Licensing  
3 Act, the Medical Practice Act of 1987, the Naprapathic  
4 Practice Act, the Nurse Practice Act, the Nursing Home  
5 Administrators Licensing and Disciplinary Act, the  
6 Illinois Occupational Therapy Practice Act, the Illinois  
7 Optometric Practice Act of 1987, the Pharmacy Practice  
8 Act, the Illinois Physical Therapy Act, the Physician  
9 Assistant Practice Act of 1987, the Podiatric Medical  
10 Practice Act of 1987, the Respiratory Care Practice Act,  
11 the Professional Counselor and Clinical Professional  
12 Counselor Licensing and Practice Act, the Illinois  
13 Speech-Language Pathology and Audiology Practice Act, the  
14 Veterinary Medicine and Surgery Practice Act of 2004, and  
15 the Illinois Public Accounting Act;

16 (1.5) an employee of an entity providing developmental  
17 disabilities services or service coordination funded by  
18 the Department of Human Services;

19 (2) an employee of a vocational rehabilitation  
20 facility prescribed or supervised by the Department of  
21 Human Services;

22 (3) an administrator, employee, or person providing  
23 services in or through an unlicensed community based  
24 facility;

25 (4) any religious practitioner who provides treatment  
26 by prayer or spiritual means alone in accordance with the

1 tenets and practices of a recognized church or religious  
2 denomination, except as to information received in any  
3 confession or sacred communication enjoined by the  
4 discipline of the religious denomination to be held  
5 confidential;

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

10 (6) personnel of the Department of Human Services, the  
11 Guardianship and Advocacy Commission, the State Fire  
12 Marshal, local fire departments, the Department on Aging  
13 and its subsidiary Area Agencies on Aging and provider  
14 agencies, and the Office of State Long Term Care  
15 Ombudsman;

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

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

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

25 (g) "Neglect" means another individual's failure to  
26 provide an eligible adult with or willful withholding from an

1 eligible adult the necessities of life including, but not  
2 limited to, food, clothing, shelter or health care. This  
3 subsection does not create any new affirmative duty to provide  
4 support to eligible adults. Nothing in this Act shall be  
5 construed to mean that an eligible adult is a victim of neglect  
6 because of health care services provided or not provided by  
7 licensed health care professionals.

8 (h) "Provider agency" means any public or nonprofit agency  
9 in a planning and service area that is selected by the  
10 Department or appointed by the regional administrative agency  
11 with prior approval by the Department on Aging to receive and  
12 assess reports of alleged or suspected abuse, abandonment,  
13 neglect, or financial exploitation. A provider agency is also  
14 referenced as a "designated agency" in this Act.

15 (i) "Regional administrative agency" means any public or  
16 nonprofit agency in a planning and service area that provides  
17 regional oversight and performs functions as set forth in  
18 subsection (b) of Section 3 of this Act. The Department shall  
19 designate an Area Agency on Aging as the regional  
20 administrative agency or, in the event the Area Agency on  
21 Aging in that planning and service area is deemed by the  
22 Department to be unwilling or unable to provide those  
23 functions, the Department may serve as the regional  
24 administrative agency or designate another qualified entity to  
25 serve as the regional administrative agency; any such  
26 designation shall be subject to terms set forth by the



1 Department.

2 (i-5) "Self-neglect" means a condition that is the result  
3 of an eligible adult's inability, due to physical or mental  
4 impairments, or both, or a diminished capacity, to perform  
5 essential self-care tasks that substantially threaten his or  
6 her own health, including: providing essential food, clothing,  
7 shelter, and health care; and obtaining goods and services  
8 necessary to maintain physical health, mental health,  
9 emotional well-being, and general safety. The term includes  
10 compulsive hoarding, which is characterized by the acquisition  
11 and retention of large quantities of items and materials that  
12 produce an extensively cluttered living space, which  
13 significantly impairs the performance of essential self-care  
14 tasks or otherwise substantially threatens life or safety.

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

21 (k) "Verified" means a determination that there is "clear  
22 and convincing evidence" that the specific injury or harm  
23 alleged was the result of abuse, abandonment, neglect, or  
24 financial exploitation.

25 (Source: P.A. 99-180, eff. 7-29-15; 100-641, eff. 1-1-19.)

1 (320 ILCS 20/3) (from Ch. 23, par. 6603)

2 Sec. 3. Responsibilities.

3 (a) The Department shall establish, design, and manage a  
4 protective services program for eligible adults who have been,  
5 or are alleged to be, victims of abuse, abandonment, neglect,  
6 financial exploitation, or self-neglect. The Department shall  
7 contract with or fund, or contract with and fund, regional  
8 administrative agencies, provider agencies, or both, for the  
9 provision of those functions, and, contingent on adequate  
10 funding, with attorneys or legal services provider agencies  
11 for the provision of legal assistance pursuant to this Act.  
12 For self-neglect, the program shall include the following  
13 services for eligible adults who have been removed from their  
14 residences for the purpose of cleanup or repairs: temporary  
15 housing; counseling; and caseworker services to try to ensure  
16 that the conditions necessitating the removal do not reoccur.

17 (a-1) The Department shall by rule develop standards for  
18 minimum staffing levels and staff qualifications. The  
19 Department shall by rule establish mandatory standards for the  
20 investigation of abuse, abandonment, neglect, financial  
21 exploitation, or self-neglect of eligible adults and mandatory  
22 procedures for linking eligible adults to appropriate services  
23 and supports.

24 (a-5) A provider agency shall, in accordance with rules  
25 promulgated by the Department, establish a multi-disciplinary  
26 team to act in an advisory role for the purpose of providing

1 professional knowledge and expertise in the handling of  
2 complex abuse cases involving eligible adults. Each  
3 multi-disciplinary team shall consist of one volunteer  
4 representative from the following professions: banking or  
5 finance; disability care; health care; law; law enforcement;  
6 mental health care; and clergy. A provider agency may also  
7 choose to add representatives from the fields of substance  
8 abuse, domestic violence, sexual assault, or other related  
9 fields. To support multi-disciplinary teams in this role, law  
10 enforcement agencies and coroners or medical examiners shall  
11 supply records as may be requested in particular cases.

12 (b) Each regional administrative agency shall designate  
13 provider agencies within its planning and service area with  
14 prior approval by the Department on Aging, monitor the use of  
15 services, provide technical assistance to the provider  
16 agencies and be involved in program development activities.

17 (c) Provider agencies shall assist, to the extent  
18 possible, eligible adults who need agency services to allow  
19 them to continue to function independently. Such assistance  
20 shall include, but not be limited to, receiving reports of  
21 alleged or suspected abuse, abandonment, neglect, financial  
22 exploitation, or self-neglect, conducting face-to-face  
23 assessments of such reported cases, determination of  
24 substantiated cases, referral of substantiated cases for  
25 necessary support services, referral of criminal conduct to  
26 law enforcement in accordance with Department guidelines, and

1 provision of case work and follow-up services on substantiated  
2 cases. In the case of a report of alleged or suspected abuse,  
3 abandonment, or neglect that places an eligible adult at risk  
4 of injury or death, a provider agency shall respond to the  
5 report on an emergency basis in accordance with guidelines  
6 established by the Department by administrative rule and shall  
7 ensure that it is capable of responding to such a report 24  
8 hours per day, 7 days per week. A provider agency may use an  
9 on-call system to respond to reports of alleged or suspected  
10 abuse, abandonment, or neglect after hours and on weekends.

11 (c-5) Where a provider agency has reason to believe that  
12 the death of an eligible adult may be the result of abuse,  
13 abandonment, or neglect, including any reports made after  
14 death, the agency shall immediately report the matter to both  
15 the appropriate law enforcement agency and the coroner or  
16 medical examiner. Between 30 and 45 days after making such a  
17 report, the provider agency again shall contact the law  
18 enforcement agency and coroner or medical examiner to  
19 determine whether any further action was taken. Upon request  
20 by a provider agency, a law enforcement agency and coroner or  
21 medical examiner shall supply a summary of its action in  
22 response to a reported death of an eligible adult. A copy of  
23 the report shall be maintained and all subsequent follow-up  
24 with the law enforcement agency and coroner or medical  
25 examiner shall be documented in the case record of the  
26 eligible adult. If the law enforcement agency, coroner, or

1 medical examiner determines the reported death was caused by  
2 abuse, abandonment, or neglect by a caregiver, the law  
3 enforcement agency, coroner, or medical examiner shall inform  
4 the Department, and the Department shall report the  
5 caregiver's identity on the Registry as described in Section  
6 7.5 of this Act.

7 (d) Upon sufficient appropriations to implement a  
8 statewide program, the Department shall implement a program,  
9 based on the recommendations of the Self-Neglect Steering  
10 Committee, for (i) responding to reports of possible  
11 self-neglect, (ii) protecting the autonomy, rights, privacy,  
12 and privileges of adults during investigations of possible  
13 self-neglect and consequential judicial proceedings regarding  
14 competency, (iii) collecting and sharing relevant information  
15 and data among the Department, provider agencies, regional  
16 administrative agencies, and relevant seniors, (iv) developing  
17 working agreements between provider agencies and law  
18 enforcement, where practicable, and (v) developing procedures  
19 for collecting data regarding incidents of self-neglect.

20 (Source: P.A. 98-49, eff. 7-1-13; 98-1039, eff. 8-25-14.)

21 (320 ILCS 20/3.3 new)

22 Sec. 3.3. Adult protective services trauma-informed  
23 training.

24 (a) This Section applies to any person who is employed by  
25 the Department in the Adult Protective Services division, or

1 is contracted with the Department, and works on the  
2 development and implementation of social services to respond  
3 to and prevent adult abuse, neglect, or exploitation.

4 (b) Subject to appropriation, the Department shall offer  
5 an annual trauma-informed training program that includes (i)  
6 instruction on how trauma impacts caseworkers and other  
7 employees who respond to and prevent adult abuse, neglect,  
8 exploitation, or abandonment, (ii) a review of the meaning and  
9 impact of secondary trauma, and (iii) information about  
10 strategies to identify and address secondary trauma in  
11 caseworkers and other employees who work with adults who may  
12 have experienced abuse, neglect, exploitation, or abandonment.

13 (c) Any trauma-informed training offered by the Department  
14 shall cover the following:

15 (1) The widespread impact of secondary trauma on  
16 caseworkers and other employees who work with adults who  
17 may have experienced abuse, neglect, exploitation, or  
18 abandonment.

19 (2) An understanding of who is at risk for developing  
20 secondary trauma.

21 (3) Relevant and realistic case studies involving  
22 traumatic situations that other caseworkers and employees  
23 who work with adults who may have experienced abuse,  
24 neglect, exploitation, or abandonment have encountered in  
25 their work.

26 (4) Symptoms and causes of secondary trauma in

1 caseworkers and other employees who work with adults who  
2 may have experienced abuse, neglect, exploitation, or  
3 abandonment.

4 (5) Strategies for prevention and intervention in  
5 cases of secondary trauma involving caseworkers or other  
6 employees who work with adults who may have experienced  
7 abuse, neglect, exploitation, or abandonment, including  
8 the development of a self-care plan.

9 (6) How to incorporate monitoring and support  
10 techniques for employees experiencing secondary trauma  
11 into departmental policies, guidelines, and protocols.

12 (d) This Section is designed to address gaps in current  
13 trauma-informed training requirements for employees of the  
14 Office of Adult Protective Services and to improve the quality  
15 of training. If any law or rule existing on the effective date  
16 of this amendatory Act of the 102nd General Assembly contains  
17 more rigorous training requirements for employees of the  
18 Office of Adult Protective Services, then that law or rule  
19 applies. If there is overlap between this Section and other  
20 laws and rules, the Department shall interpret this Section to  
21 avoid duplication of requirements while ensuring that the  
22 minimum requirements set in this Section are met.

23 (e) The Department may adopt rules to implement this  
24 Section.

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

8           (a) promotion of a wide range of endeavors for the  
9 purpose of preventing abuse, abandonment, neglect,  
10 financial exploitation, and self-neglect, including, but  
11 not limited to, promotion of public and professional  
12 education to increase awareness of abuse, abandonment,  
13 neglect, financial exploitation, and self-neglect; to  
14 increase reports; to establish access to and use of the  
15 Registry established under Section 7.5; and to improve  
16 response by various legal, financial, social, and health  
17 systems;

18           (b) coordination of efforts with other agencies,  
19 councils, and like entities, to include but not be limited  
20 to, the Administrative Office of the Illinois Courts, the  
21 Office of the Attorney General, the State Police, the  
22 Illinois Law Enforcement Training Standards Board, the  
23 State Triad, the Illinois Criminal Justice Information  
24 Authority, the Departments of Public Health, Healthcare  
25 and Family Services, and Human Services, the Illinois  
26 Guardianship and Advocacy Commission, the Family Violence



1 Coordinating Council, the Illinois Violence Prevention  
2 Authority, and other entities which may impact awareness  
3 of, and response to, abuse, abandonment, neglect,  
4 financial exploitation, and self-neglect;

5 (c) collection and analysis of data;

6 (d) monitoring of the performance of regional  
7 administrative agencies and adult protective services  
8 agencies;

9 (e) promotion of prevention activities;

10 (f) establishing and coordinating an aggressive  
11 training program on the unique nature of adult abuse cases  
12 with other agencies, councils, and like entities, to  
13 include but not be limited to the Office of the Attorney  
14 General, the State Police, the Illinois Law Enforcement  
15 Training Standards Board, the State Triad, the Illinois  
16 Criminal Justice Information Authority, the State  
17 Departments of Public Health, Healthcare and Family  
18 Services, and Human Services, the Family Violence  
19 Coordinating Council, the Illinois Violence Prevention  
20 Authority, the agency designated by the Governor under  
21 Section 1 of the Protection and Advocacy for Persons with  
22 Developmental Disabilities Act, and other entities that  
23 may impact awareness of and response to abuse,  
24 abandonment, neglect, financial exploitation, and  
25 self-neglect;

26 (g) solicitation of financial institutions for the

1 purpose of making information available to the general  
2 public warning of financial exploitation of adults and  
3 related financial fraud or abuse, including such  
4 information and warnings available through signage or  
5 other written materials provided by the Department on the  
6 premises of such financial institutions, provided that the  
7 manner of displaying or distributing such information is  
8 subject to the sole discretion of each financial  
9 institution;

10 (g-1) developing by joint rulemaking with the  
11 Department of Financial and Professional Regulation  
12 minimum training standards which shall be used by  
13 financial institutions for their current and new employees  
14 with direct customer contact; the Department of Financial  
15 and Professional Regulation shall retain sole visitation  
16 and enforcement authority under this subsection (g-1); the  
17 Department of Financial and Professional Regulation shall  
18 provide bi-annual reports to the Department setting forth  
19 aggregate statistics on the training programs required  
20 under this subsection (g-1); and

21 (h) coordinating efforts with utility and electric  
22 companies to send notices in utility bills to explain to  
23 persons 60 years of age or older their rights regarding  
24 telemarketing and home repair fraud.

25 (Source: P.A. 98-49, eff. 7-1-13; 98-1039, eff. 8-25-14;  
26 99-143, eff. 7-27-15.)

1 (320 ILCS 20/3.6 new)

2 Sec. 3.6. Elder abuse risk assessment tool.

3 (a) The Department shall develop and implement a  
4 demonstration project to allow for the use of a risk  
5 assessment tool to assist in identifying elderly persons,  
6 including homebound persons, who may be experiencing elder  
7 abuse, abandonment, neglect, or exploitation and providing the  
8 necessary support to address elder abuse, abandonment,  
9 neglect, or exploitation. The Department shall finalize  
10 planning on the demonstration project no later than December  
11 1, 2023 with implementation beginning no later than January 1,  
12 2024. The risk assessment tool shall identify (i) the level of  
13 risk for elder abuse, abandonment, neglect, or exploitation;  
14 (ii) risk factors causing the abuse, abandonment, neglect, or  
15 exploitation; and (iii) appropriate follow-up and action in  
16 response to any suspected abuse, abandonment, neglect, or  
17 exploitation. In identifying a risk assessment tool, the  
18 Department shall coordinate with all of the following:

19 (1) The Department of Healthcare and Family Services.

20 (2) A hospital, hospital system, or a statewide  
21 association representing hospitals.

22 (3) A managed care organization or a statewide  
23 association representing managed care organizations.

24 (4) A Care Coordination Unit.

25 (5) An Area Agency on Aging or a statewide association

1 representing Area Agencies on Aging.

2 (6) Legal aid providers.

3 (7) A financial institution or a statewide association  
4 representing financial institutions.

5 (8) Adult Protective Services providers.

6 (b) The risk assessment tool shall be comprehensive and  
7 include all of the following components:

8 (1) Client demographics.

9 (2) Indicators of elder abuse, abandonment, neglect,  
10 or exploitation.

11 (3) Contributing risk factors for abuse, abandonment,  
12 neglect, or exploitation.

13 (4) Overall level of risk on a scale of low, medium,  
14 and high-risk level.

15 (5) Appropriate follow-up and action.

16 (6) Client outcomes.

17 (c) If any hospital employee, social worker, or other  
18 employee utilizing the risk assessment tool identifies that an  
19 elderly person is at risk for elder abuse, abandonment,  
20 neglect, or exploitation, the employee shall utilize the risk  
21 assessment tool to refer the elderly person to a managed care  
22 organization, legal aid service, Adult Protective Services  
23 provider, or other needed services and supports.

24 (d) The Department may adopt rules to implement this  
25 Section.

1 (320 ILCS 20/4) (from Ch. 23, par. 6604)

2 Sec. 4. Reports of abuse, abandonment, or neglect.

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

8 (a-5) If any mandated reporter has reason to believe that  
9 an eligible adult, who because of a disability or other  
10 condition or impairment is unable to seek assistance for  
11 himself or herself, has, within the previous 12 months, been  
12 subjected to abuse, abandonment, neglect, or financial  
13 exploitation, the mandated reporter shall, within 24 hours  
14 after developing such belief, report this suspicion to an  
15 agency designated to receive such reports under this Act or to  
16 the Department. The agency designated to receive such reports  
17 under this Act or the Department may establish a manner in  
18 which a mandated reporter can make the required report through  
19 an Internet reporting tool. Information sent and received  
20 through the Internet reporting tool is subject to the same  
21 rules in this Act as other types of confidential reporting  
22 established by the designated agency or the Department.  
23 Whenever a mandated reporter is required to report under this  
24 Act in his or her capacity as a member of the staff of a  
25 medical or other public or private institution, facility, or  
26 agency, he or she shall make a report to an agency designated

1 to receive such reports under this Act or to the Department in  
2 accordance with the provisions of this Act and may also notify  
3 the person in charge of the institution, facility, or agency  
4 or his or her designated agent that the report has been made.  
5 Under no circumstances shall any person in charge of such  
6 institution, facility, or agency, or his or her designated  
7 agent to whom the notification has been made, exercise any  
8 control, restraint, modification, or other change in the  
9 report or the forwarding of the report to an agency designated  
10 to receive such reports under this Act or to the Department.  
11 The privileged quality of communication between any  
12 professional person required to report and his or her patient  
13 or client shall not apply to situations involving abused,  
14 abandoned, neglected, or financially exploited eligible adults  
15 and shall not constitute grounds for failure to report as  
16 required by this Act.

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

24 (a-9) Law enforcement officers shall continue to report  
25 incidents of alleged abuse pursuant to the Illinois Domestic  
26 Violence Act of 1986, notwithstanding any requirements under

1 this Act.

2 (b) Any person, institution or agency participating in the  
3 making of a report, providing information or records related  
4 to a report, assessment, or services, or participating in the  
5 investigation of a report under this Act in good faith, or  
6 taking photographs or x-rays as a result of an authorized  
7 assessment, shall have immunity from any civil, criminal or  
8 other liability in any civil, criminal or other proceeding  
9 brought in consequence of making such report or assessment or  
10 on account of submitting or otherwise disclosing such  
11 photographs or x-rays to any agency designated to receive  
12 reports of alleged or suspected abuse, abandonment, or  
13 neglect. Any person, institution or agency authorized by the  
14 Department to provide assessment, intervention, or  
15 administrative services under this Act shall, in the good  
16 faith performance of those services, have immunity from any  
17 civil, criminal or other liability in any civil, criminal, or  
18 other proceeding brought as a consequence of the performance  
19 of those services. For the purposes of any civil, criminal, or  
20 other proceeding, the good faith of any person required to  
21 report, permitted to report, or participating in an  
22 investigation of a report of alleged or suspected abuse,  
23 abandonment, neglect, financial exploitation, or self-neglect  
24 shall be presumed.

25 (c) The identity of a person making a report of alleged or  
26 suspected abuse, abandonment, neglect, financial exploitation,

1 or self-neglect under this Act may be disclosed by the  
2 Department or other agency provided for in this Act only with  
3 such person's written consent or by court order, but is  
4 otherwise confidential.

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

7 (e) Any physician who willfully fails to report as  
8 required by this Act shall be referred to the Illinois State  
9 Medical Disciplinary Board for action in accordance with  
10 subdivision (A) (22) of Section 22 of the Medical Practice Act  
11 of 1987. Any dentist or dental hygienist who willfully fails  
12 to report as required by this Act shall be referred to the  
13 Department of Professional Regulation for action in accordance  
14 with paragraph 19 of Section 23 of the Illinois Dental  
15 Practice Act. Any optometrist who willfully fails to report as  
16 required by this Act shall be referred to the Department of  
17 Financial and Professional Regulation for action in accordance  
18 with paragraph (15) of subsection (a) of Section 24 of the  
19 Illinois Optometric Practice Act of 1987. Any other mandated  
20 reporter required by this Act to report suspected abuse,  
21 abandonment, neglect, or financial exploitation who willfully  
22 fails to report the same is guilty of a Class A misdemeanor.

23 (Source: P.A. 97-860, eff. 7-30-12; 98-49, eff. 7-1-13;  
24 98-1039, eff. 8-25-14.)



1           Sec. 4.1. Employer discrimination. No employer shall  
2 discharge, demote or suspend, or threaten to discharge, demote  
3 or suspend, or in any manner discriminate against any employee  
4 who makes any good faith oral or written report of suspected  
5 abuse, abandonment, neglect, or financial exploitation or who  
6 is or will be a witness or testify in any investigation or  
7 proceeding concerning a report of suspected abuse,  
8 abandonment, neglect, or financial exploitation.

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

10           (320 ILCS 20/4.2)

11           Sec. 4.2. Testimony by mandated reporter and investigator.  
12 Any mandated reporter who makes a report or any person who  
13 investigates a report under this Act shall testify fully in  
14 any judicial proceeding resulting from such report, as to any  
15 evidence of abuse, abandonment, neglect, or financial  
16 exploitation or the cause thereof. Any mandated reporter who  
17 is required to report a suspected case of abuse, abandonment,  
18 neglect, or financial exploitation under Section 4 of this Act  
19 shall testify fully in any administrative hearing resulting  
20 from such report, as to any evidence of abuse, abandonment,  
21 neglect, or financial exploitation or the cause thereof. No  
22 evidence shall be excluded by reason of any common law or  
23 statutory privilege relating to communications between the  
24 alleged abuser or the eligible adult subject of the report  
25 under this Act and the person making or investigating the

1 report.

2 (Source: P.A. 90-628, eff. 1-1-99.)

3 (320 ILCS 20/5) (from Ch. 23, par. 6605)

4 Sec. 5. Procedure.

5 (a) A provider agency designated to receive reports of  
6 alleged or suspected abuse, abandonment, neglect, financial  
7 exploitation, or self-neglect under this Act shall, upon  
8 receiving such a report, conduct a face-to-face assessment  
9 with respect to such report, in accord with established law  
10 and Department protocols, procedures, and policies.  
11 Face-to-face assessments, casework, and follow-up of reports  
12 of self-neglect by the provider agencies designated to receive  
13 reports of self-neglect shall be subject to sufficient  
14 appropriation for statewide implementation of assessments,  
15 casework, and follow-up of reports of self-neglect. In the  
16 absence of sufficient appropriation for statewide  
17 implementation of assessments, casework, and follow-up of  
18 reports of self-neglect, the designated adult protective  
19 services provider agency shall refer all reports of  
20 self-neglect to the appropriate agency or agencies as  
21 designated by the Department for any follow-up. The assessment  
22 shall include, but not be limited to, a visit to the residence  
23 of the eligible adult who is the subject of the report and  
24 shall include interviews or consultations regarding the  
25 allegations with service agencies, immediate family members,

1 and individuals who may have knowledge of the eligible adult's  
2 circumstances based on the consent of the eligible adult in  
3 all instances, except where the provider agency is acting in  
4 the best interest of an eligible adult who is unable to seek  
5 assistance for himself or herself and where there are  
6 allegations against a caregiver who has assumed  
7 responsibilities in exchange for compensation. If, after the  
8 assessment, the provider agency determines that the case is  
9 substantiated it shall develop a service care plan for the  
10 eligible adult and may report its findings at any time during  
11 the case to the appropriate law enforcement agency in accord  
12 with established law and Department protocols, procedures, and  
13 policies. In developing a case plan, the provider agency may  
14 consult with any other appropriate provider of services, and  
15 such providers shall be immune from civil or criminal  
16 liability on account of such acts. The plan shall include  
17 alternative suggested or recommended services which are  
18 appropriate to the needs of the eligible adult and which  
19 involve the least restriction of the eligible adult's  
20 activities commensurate with his or her needs. Only those  
21 services to which consent is provided in accordance with  
22 Section 9 of this Act shall be provided, contingent upon the  
23 availability of such services.

24 (b) A provider agency shall refer evidence of crimes  
25 against an eligible adult to the appropriate law enforcement  
26 agency according to Department policies. A referral to law

1 enforcement may be made at intake or any time during the case.  
2 Where a provider agency has reason to believe the death of an  
3 eligible adult may be the result of abuse, abandonment, or  
4 neglect, the agency shall immediately report the matter to the  
5 coroner or medical examiner and shall cooperate fully with any  
6 subsequent investigation.

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

13 (Source: P.A. 101-496, eff. 1-1-20.)

14 (320 ILCS 20/7.1)

15 Sec. 7.1. Final investigative report. A provider agency  
16 shall prepare a final investigative report, upon the  
17 completion or closure of an investigation, in all cases of  
18 reported abuse, abandonment, neglect, financial exploitation,  
19 or self-neglect of an eligible adult, whether or not there is a  
20 substantiated finding.

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

22 (320 ILCS 20/7.5)

23 Sec. 7.5. Registry.

24 (a) To protect individuals receiving in-home and

1 community-based services, the Department on Aging shall  
2 establish an Adult Protective Service Registry that will be  
3 hosted by the Department of Public Health on its website  
4 effective January 1, 2015, and, if practicable, shall propose  
5 rules for the Registry by January 1, 2015.

6 (a-5) The Registry shall identify caregivers against whom  
7 a verified and substantiated finding was made under this Act  
8 of abuse, abandonment, neglect, or financial exploitation.

9 The information in the Registry shall be confidential  
10 except as specifically authorized in this Act and shall not be  
11 deemed a public record.

12 (a-10) Reporting to the Registry. The Department on Aging  
13 shall report to the Registry the identity of the caregiver  
14 when a verified and substantiated finding of abuse,  
15 abandonment, neglect, or financial exploitation of an eligible  
16 adult under this Act is made against a caregiver, and all  
17 appeals, challenges, and reviews, if any, have been completed  
18 and a finding for placement on the Registry has been sustained  
19 or upheld.

20 A finding against a caregiver that is placed in the  
21 Registry shall preclude that caregiver from providing direct  
22 care, as defined in this Section, in a position with or that is  
23 regulated by or paid with public funds from the Department on  
24 Aging, the Department of Healthcare and Family Services, the  
25 Department of Human Services, or the Department of Public  
26 Health or with an entity or provider licensed, certified, or

1 regulated by or paid with public funds from any of these State  
2 agencies.

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

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

12 "Participant" means an individual who uses the services of  
13 an in-home care program funded through the Department on  
14 Aging, the Department of Healthcare and Family Services, the  
15 Department of Human Services, or the Department of Public  
16 Health.

17 (c) Access to and use of the Registry. Access to the  
18 Registry shall be limited to the Department on Aging, the  
19 Department of Healthcare and Family Services, the Department  
20 of Human Services, and the Department of Public Health and  
21 providers of direct care as described in subsection (a-10) of  
22 this Section. These State agencies and providers shall not  
23 hire, compensate either directly or on behalf of a  
24 participant, or utilize the services of any person seeking to  
25 provide direct care without first conducting an online check  
26 of whether the person has been placed on the Registry. These

1 State agencies and providers shall maintain a copy of the  
2 results of the online check to demonstrate compliance with  
3 this requirement. These State agencies and providers are  
4 prohibited from retaining, hiring, compensating either  
5 directly or on behalf of a participant, or utilizing the  
6 services of a person to provide direct care if the online check  
7 of the person reveals a verified and substantiated finding of  
8 abuse, abandonment, neglect, or financial exploitation that  
9 has been placed on the Registry or when the State agencies or  
10 providers otherwise gain knowledge of such placement on the  
11 Registry. Failure to comply with this requirement may subject  
12 such a provider to corrective action by the appropriate  
13 regulatory agency or other lawful remedies provided under the  
14 applicable licensure, certification, or regulatory laws and  
15 rules.

16 (d) Notice to caregiver. The Department on Aging shall  
17 establish rules concerning notice to the caregiver in cases of  
18 a verified and substantiated finding of abuse, abandonment,  
19 neglect, or financial exploitation against him or her that may  
20 make him or her eligible for placement on the Registry.

21 (e) Notification to eligible adults, guardians, or agents.  
22 As part of its investigation, the Department on Aging shall  
23 notify an eligible adult, or an eligible adult's guardian or  
24 agent, that his or her caregiver's name may be placed on the  
25 Registry based on a finding as described in subsection (a-10)  
26 of this Section.

1 (f) Notification to employer. The Department on Aging  
2 shall notify the appropriate State agency or provider of  
3 direct care, as described in subsection (a-10), when there is  
4 a verified and substantiated finding of abuse, abandonment,  
5 neglect, or financial exploitation in a case under this Act  
6 that is reported on the Registry and that involves one of its  
7 caregivers. That State agency or provider is prohibited from  
8 retaining or compensating that individual in a position that  
9 involves direct care, and if there is an imminent risk of  
10 danger to the victim or an imminent risk of misuse of personal,  
11 medical, or financial information, that caregiver shall  
12 immediately be barred from providing direct care to the victim  
13 pending the outcome of any challenge, appeal, criminal  
14 prosecution, or other type of collateral action.

15 (g) Challenges and appeals. The Department on Aging shall  
16 establish, by rule, procedures concerning challenges and  
17 appeals to placement on the Registry pursuant to legislative  
18 intent. The Department shall not make any report to the  
19 Registry pending challenges or appeals.

20 (h) Caregiver's rights to collateral action. The  
21 Department on Aging shall not make any report to the Registry  
22 if a caregiver notifies the Department in writing that he or  
23 she is formally challenging an adverse employment action  
24 resulting from a verified and substantiated finding of abuse,  
25 abandonment, neglect, or financial exploitation by complaint  
26 filed with the Illinois Civil Service Commission, or by



1 another means which seeks to enforce the caregiver's rights  
2 pursuant to any applicable collective bargaining agreement. If  
3 an action taken by an employer against a caregiver as a result  
4 of such a finding is overturned through an action filed with  
5 the Illinois Civil Service Commission or under any applicable  
6 collective bargaining agreement after that caregiver's name  
7 has already been sent to the Registry, the caregiver's name  
8 shall be removed from the Registry.

9 (i) Removal from Registry. At any time after a report to  
10 the Registry, but no more than once in each successive 3-year  
11 period thereafter, for a maximum of 3 such requests, a  
12 caregiver may request removal of his or her name from the  
13 Registry in relationship to a single incident. The caregiver  
14 shall bear the burden of establishing, by a preponderance of  
15 the evidence, that removal of his or her name from the Registry  
16 is in the public interest. Upon receiving such a request, the  
17 Department on Aging shall conduct an investigation and  
18 consider any evidentiary material provided. The Department  
19 shall issue a decision either granting or denying removal to  
20 the caregiver and report it to the Registry. The Department  
21 shall, by rule, establish standards and a process for  
22 requesting the removal of a name from the Registry.

23 (j) Referral of Registry reports to health care  
24 facilities. In the event an eligible adult receiving services  
25 from a provider agency changes his or her residence from a  
26 domestic living situation to that of a health care or long term

1 care facility, the provider agency shall use reasonable  
2 efforts to promptly inform the facility and the appropriate  
3 Regional Long Term Care Ombudsman about any Registry reports  
4 relating to the eligible adult. For purposes of this Section,  
5 a health care or long term care facility includes, but is not  
6 limited to, any residential facility licensed, certified, or  
7 regulated by the Department of Public Health, Healthcare and  
8 Family Services, or Human Services.

9 (k) The Department on Aging and its employees and agents  
10 shall have immunity, except for intentional willful and wanton  
11 misconduct, from any liability, civil, criminal, or otherwise,  
12 for reporting information to and maintaining the Registry.

13 (Source: P.A. 98-49, eff. 1-1-14; 98-756, eff. 7-16-14;  
14 98-1039, eff. 8-25-14; 99-78, eff. 7-20-15.)

15 (320 ILCS 20/8) (from Ch. 23, par. 6608)

16 Sec. 8. Access to records. All records concerning reports  
17 of abuse, abandonment, neglect, financial exploitation, or  
18 self-neglect and all records generated as a result of such  
19 reports shall be confidential and shall not be disclosed  
20 except as specifically authorized by this Act or other  
21 applicable law. In accord with established law and Department  
22 protocols, procedures, and policies, access to such records,  
23 but not access to the identity of the person or persons making  
24 a report of alleged abuse, abandonment, neglect, financial  
25 exploitation, or self-neglect as contained in such records,

1 shall be provided, upon request, to the following persons and  
2 for the following persons:

3 (1) Department staff, provider agency staff, other  
4 aging network staff, and regional administrative agency  
5 staff, including staff of the Chicago Department on Aging  
6 while that agency is designated as a regional  
7 administrative agency, in the furtherance of their  
8 responsibilities under this Act;

9 (1.5) A representative of the public guardian acting  
10 in the course of investigating the appropriateness of  
11 guardianship for the eligible adult or while pursuing a  
12 petition for guardianship of the eligible adult pursuant  
13 to the Probate Act of 1975;

14 (2) A law enforcement agency or State's Attorney's  
15 office investigating known or suspected abuse,  
16 abandonment, neglect, financial exploitation, or  
17 self-neglect. Where a provider agency has reason to  
18 believe that the death of an eligible adult may be the  
19 result of abuse, abandonment, or neglect, including any  
20 reports made after death, the agency shall immediately  
21 provide the appropriate law enforcement agency with all  
22 records pertaining to the eligible adult;

23 (2.5) A law enforcement agency, fire department  
24 agency, or fire protection district having proper  
25 jurisdiction pursuant to a written agreement between a  
26 provider agency and the law enforcement agency, fire

1 department agency, or fire protection district under which  
2 the provider agency may furnish to the law enforcement  
3 agency, fire department agency, or fire protection  
4 district a list of all eligible adults who may be at  
5 imminent risk of abuse, abandonment, neglect, financial  
6 exploitation, or self-neglect;

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

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

18 (4.5) An executor or administrator of the estate of an  
19 eligible adult who is deceased;

20 (5) In cases regarding abuse, abandonment, neglect, or  
21 financial exploitation, a court or a guardian ad litem,  
22 upon its or his or her finding that access to such records  
23 may be necessary for the determination of an issue before  
24 the court. However, such access shall be limited to an in  
25 camera inspection of the records, unless the court  
26 determines that disclosure of the information contained

1           therein is necessary for the resolution of an issue then  
2           pending before it;

3           (5.5) In cases regarding self-neglect, a guardian ad  
4           litem;

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

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

10          (8) A coroner or medical examiner who has reason to  
11          believe that an eligible adult has died as the result of  
12          abuse, abandonment, neglect, financial exploitation, or  
13          self-neglect. The provider agency shall immediately  
14          provide the coroner or medical examiner with all records  
15          pertaining to the eligible adult;

16          (8.5) A coroner or medical examiner having proper  
17          jurisdiction, pursuant to a written agreement between a  
18          provider agency and the coroner or medical examiner, under  
19          which the provider agency may furnish to the office of the  
20          coroner or medical examiner a list of all eligible adults  
21          who may be at imminent risk of death as a result of abuse,  
22          abandonment, neglect, financial exploitation, or  
23          self-neglect;

24          (9) Department of Financial and Professional  
25          Regulation staff and members of the Illinois Medical  
26          Disciplinary Board or the Social Work Examining and

1           Disciplinary Board in the course of investigating alleged  
2           violations of the Clinical Social Work and Social Work  
3           Practice Act by provider agency staff or other licensing  
4           bodies at the discretion of the Director of the Department  
5           on Aging;

6           (9-a) Department of Healthcare and Family Services  
7           staff and provider agency staff when that Department is  
8           funding services to the eligible adult, including access  
9           to the identity of the eligible adult;

10          (9-b) Department of Human Services staff and provider  
11          agency staff when that Department is funding services to  
12          the eligible adult or is providing reimbursement for  
13          services provided by the abuser or alleged abuser,  
14          including access to the identity of the eligible adult;

15          (10) Hearing officers in the course of conducting an  
16          administrative hearing under this Act; parties to such  
17          hearing shall be entitled to discovery as established by  
18          rule;

19          (11) A caregiver who challenges placement on the  
20          Registry shall be given the statement of allegations in  
21          the abuse report and the substantiation decision in the  
22          final investigative report; and

23          (12) The Illinois Guardianship and Advocacy Commission  
24          and the agency designated by the Governor under Section 1  
25          of the Protection and Advocacy for Persons with  
26          Developmental Disabilities Act shall have access, through

1 the Department, to records, including the findings,  
2 pertaining to a completed or closed investigation of a  
3 report of suspected abuse, abandonment, neglect, financial  
4 exploitation, or self-neglect of an eligible adult.

5 (Source: P.A. 98-49, eff. 7-1-13; 98-1039, eff. 8-25-14;  
6 99-143, eff. 7-27-15; 99-287, eff. 1-1-16; 99-547, eff.  
7 7-15-16; 99-642, eff. 7-28-16.)

8 (320 ILCS 20/9) (from Ch. 23, par. 6609)

9 Sec. 9. Authority to consent to services.

10 (a) If an eligible adult consents to an assessment of a  
11 reported incident of suspected abuse, abandonment, neglect,  
12 financial exploitation, or self-neglect and, following the  
13 assessment of such report, consents to services being provided  
14 according to the case plan, such services shall be arranged to  
15 meet the adult's needs, based upon the availability of  
16 resources to provide such services. If an adult withdraws his  
17 or her consent for an assessment of the reported incident or  
18 withdraws his or her consent for services and refuses to  
19 accept such services, the services shall not be provided.

20 (b) If it reasonably appears to the Department or other  
21 agency designated under this Act that a person is an eligible  
22 adult and lacks the capacity to consent to an assessment of a  
23 reported incident of suspected abuse, abandonment, neglect,  
24 financial exploitation, or self-neglect or to necessary  
25 services, the Department or other agency shall take

1 appropriate action necessary to ameliorate risk to the  
2 eligible adult if there is a threat of ongoing harm or another  
3 emergency exists. The Department or other agency shall be  
4 authorized to seek the appointment of a temporary guardian as  
5 provided in Article XIa of the Probate Act of 1975 for the  
6 purpose of consenting to an assessment of the reported  
7 incident and such services, together with an order for an  
8 evaluation of the eligible adult's physical, psychological,  
9 and medical condition and decisional capacity.

10 (c) A guardian of the person of an eligible adult may  
11 consent to an assessment of the reported incident and to  
12 services being provided according to the case plan. If an  
13 eligible adult lacks capacity to consent, an agent having  
14 authority under a power of attorney may consent to an  
15 assessment of the reported incident and to services. If the  
16 guardian or agent is the suspected abuser and he or she  
17 withdraws consent for the assessment of the reported incident,  
18 or refuses to allow services to be provided to the eligible  
19 adult, the Department, an agency designated under this Act, or  
20 the office of the Attorney General may request a court order  
21 seeking appropriate remedies, and may in addition request  
22 removal of the guardian and appointment of a successor  
23 guardian or request removal of the agent and appointment of a  
24 guardian.

25 (d) If an emergency exists and the Department or other  
26 agency designated under this Act reasonably believes that a



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

20 (d-5) For purposes of this Section, an eligible adult  
21 "lacks the capacity to consent" if qualified staff of an  
22 agency designated under this Act reasonably determine, in  
23 accordance with administrative rules promulgated by the  
24 Department, that he or she appears either (i) unable to  
25 receive and evaluate information related to the assessment or  
26 services or (ii) unable to communicate in any manner decisions

1 related to the assessment of the reported incident or  
2 services.

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

10 (f) If the court enters an ex parte order under subsection  
11 (d) for an assessment of a reported incident of alleged or  
12 suspected abuse, abandonment, neglect, financial exploitation,  
13 or self-neglect, or for the provision of necessary services in  
14 connection with alleged or suspected self-neglect, or for  
15 both, the court, as soon as is practicable thereafter, shall  
16 appoint a guardian ad litem for the eligible adult who is the  
17 subject of the order, for the purpose of reviewing the  
18 reasonableness of the order. The guardian ad litem shall  
19 review the order and, if the guardian ad litem reasonably  
20 believes that the order is unreasonable, the guardian ad litem  
21 shall file a petition with the court stating the guardian ad  
22 litem's belief and requesting that the order be vacated.

23 (g) In all cases in which there is a substantiated finding  
24 of abuse, abandonment, neglect, or financial exploitation by a  
25 guardian, the Department shall, within 30 days after the  
26 finding, notify the Probate Court with jurisdiction over the

1 guardianship.

2 (Source: P.A. 98-49, eff. 7-1-13; 98-1039, eff. 8-25-14.)

3 (320 ILCS 20/13)

4 Sec. 13. Access.

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

13 (a-5) A representative of the Department or a designated  
14 provider agency that is actively involved in an abuse,  
15 abandonment, neglect, financial exploitation, or self-neglect  
16 investigation under this Act shall be allowed access to the  
17 financial records, mental and physical health records, and  
18 other relevant evaluative records of the eligible adult which  
19 are in the possession of any individual, financial  
20 institution, health care provider, mental health provider,  
21 educational facility, or other facility if necessary to  
22 complete the investigation mandated by this Act. The provider  
23 or facility shall provide such records to the representative  
24 upon receipt of a written request and certification from the  
25 Department or designated provider agency that an investigation

1 is being conducted under this Act and the records are  
2 pertinent to the investigation.

3 Any records received by such representative, the  
4 confidentiality of which is protected by another law or rule,  
5 shall be maintained as confidential, except for such use as  
6 may be necessary for any administrative or other legal  
7 proceeding.

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

13 (1) a caregiver or third party has interfered with the  
14 assessment or service plan, or

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

19 (c) The petition for an order requiring appropriate access  
20 shall be afforded an expedited hearing in the circuit court.

21 (d) If the provider agency has substantiated financial  
22 exploitation against an eligible adult, and has documented a  
23 reasonable belief that the eligible adult will be irreparably  
24 harmed as a result of the financial exploitation, the Office  
25 of the Attorney General, the Department, or the provider  
26 agency may petition for an order freezing the assets of the

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

9 (Source: P.A. 98-1039, eff. 8-25-14.)

10 (320 ILCS 20/15)

11 Sec. 15. Fatality review teams.

12 (a) State policy.

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

19 (2) When an at-risk adult dies, the response to the  
20 death by the community, law enforcement, and the State  
21 must include an accurate and complete determination of the  
22 cause 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

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 fatality review teams is necessary in order  
8 to fulfill their purposes and duties.

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

10 "Advisory Council" means the Illinois Fatality Review  
11 Team Advisory Council.

12 "Review Team" means a regional interagency fatality  
13 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,  
17 abandonment, or neglect of at-risk adults, shall appoint  
18 members to a minimum of one review team in each of the  
19 Department's planning and service areas. Each member of a  
20 review team shall be appointed for a 2-year term and shall be  
21 eligible for reappointment upon the expiration of the term. A  
22 review team's purpose in conducting review of at-risk adult  
23 deaths is: (i) to assist local agencies in identifying and  
24 reviewing suspicious deaths of adult victims of alleged,  
25 suspected, or substantiated abuse, abandonment, or neglect in  
26 domestic living situations; (ii) to facilitate communications

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

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

15 (1) the Department on Aging;

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

17 (3) State's Attorneys;

18 (4) local police departments;

19 (5) forensic units;

20 (6) local health departments;

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

26 (8) a social service or health care agency that

1 provides services to persons with developmental  
2 disabilities, in a program whose accreditation to provide  
3 such services is recognized by the Division of  
4 Developmental Disabilities within the Department of Human  
5 Services;

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

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

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

13 (c) A review team shall review cases of deaths of at-risk  
14 adults occurring in its planning and service area (i)  
15 involving blunt force trauma or an undetermined manner or  
16 suspicious cause of death; (ii) if requested by the deceased's  
17 attending physician or an emergency room physician; (iii) upon  
18 referral by a health care provider; (iv) upon referral by a  
19 coroner or medical examiner; (v) constituting an open or  
20 closed case from an adult protective services agency, law  
21 enforcement agency, State's Attorney's office, or the  
22 Department of Human Services' Office of the Inspector General  
23 that involves alleged or suspected abuse, abandonment,  
24 neglect, or financial exploitation; or (vi) upon referral by a  
25 law enforcement agency or State's Attorney's office. If such a  
26 death occurs in a planning and service area where a review team



1 has not yet been established, the Director shall request that  
2 the Advisory Council or another review team review that death.  
3 A team may also review deaths of at-risk adults if the alleged  
4 abuse, abandonment, or neglect occurred while the person was  
5 residing in a domestic living situation.

6 A review team shall meet not less than 4 times a year to  
7 discuss cases for its possible review. Each review team, with  
8 the advice and consent of the Department, shall establish  
9 criteria to be used in discussing cases of alleged, suspected,  
10 or substantiated abuse, abandonment, or neglect for review and  
11 shall conduct its activities in accordance with any applicable  
12 policies and procedures established by the Department.

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

24 The Department may provide or arrange for the staff  
25 support necessary for the Advisory Council to carry out its  
26 duties. The Director, in cooperation and consultation with the

1 Advisory Council, shall appoint, reappoint, and remove review  
2 team members.

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

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

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

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

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

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

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

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

26 (8) To perform any other functions necessary to

1           enhance the capability of the review teams to reduce and  
2           prevent at-risk adult fatalities.

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

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

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

23          Any document or oral or written communication provided to  
24          a review team by an individual or entity, and created by that  
25          individual or entity solely for the use of the review team, is  
26          confidential, is not subject to disclosure to or discoverable

1 by another party, and is not admissible as evidence in any  
2 civil or criminal proceeding, except for use by a State's  
3 Attorney's office in prosecuting a criminal case against a  
4 caregiver. Those records and information are, however, subject  
5 to discovery or subpoena, and are admissible as evidence, to  
6 the extent they are otherwise available to the public.

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

1 exclude adult protective service providers.

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

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

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

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

25 (e-5) The State shall indemnify and hold harmless members  
26 of a review team and the Advisory Council for all their acts,

1 omissions, decisions, or other conduct arising out of the  
2 scope of their service on the review team or Advisory Council,  
3 except those involving willful or wanton misconduct. The  
4 method of providing indemnification shall be as provided in  
5 the State Employee Indemnification Act.

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

18 (g) The Department shall adopt such rules and regulations  
19 as it deems necessary to implement this Section.

20 (Source: P.A. 98-49, eff. 7-1-13; 98-1039, eff. 8-25-14;  
21 99-78, eff. 7-20-15; 99-530, eff. 1-1-17.)

22 Section 10. The Criminal Code of 2012 is amended by  
23 changing Sections 3-5 and 17-56 as follows:

24 (720 ILCS 5/3-5) (from Ch. 38, par. 3-5)

1           Sec. 3-5. General limitations.

2           (a) A prosecution for: (1) first degree murder, attempt to  
3           commit first degree murder, second degree murder, involuntary  
4           manslaughter, reckless homicide, a violation of subparagraph  
5           (F) of paragraph (1) of subsection (d) of Section 11-501 of the  
6           Illinois Vehicle Code for the offense of aggravated driving  
7           under the influence of alcohol, other drug or drugs, or  
8           intoxicating compound or compounds, or any combination thereof  
9           when the violation was a proximate cause of a death, leaving  
10          the scene of a motor vehicle accident involving death or  
11          personal injuries under Section 11-401 of the Illinois Vehicle  
12          Code, failing to give information and render aid under Section  
13          11-403 of the Illinois Vehicle Code, concealment of homicidal  
14          death, treason, arson, residential arson, aggravated arson,  
15          forgery, child pornography under paragraph (1) of subsection  
16          (a) of Section 11-20.1, or aggravated child pornography under  
17          paragraph (1) of subsection (a) of Section 11-20.1B, or (2)  
18          any offense involving sexual conduct or sexual penetration, as  
19          defined by Section 11-0.1 of this Code may be commenced at any  
20          time.

21          (a-5) A prosecution for theft of property exceeding  
22          \$100,000 in value under Section 16-1, identity theft under  
23          subsection (a) of Section 16-30, aggravated identity theft  
24          under subsection (b) of Section 16-30, financial exploitation  
25          of an elderly person or a person with a disability under  
26          Section 17-56; theft by deception of a victim 60 years of age

1 or older or a person with a disability under Section 16-1; or  
2 any offense set forth in Article 16H or Section 17-10.6 may be  
3 commenced within 7 years of the last act committed in  
4 furtherance of the crime.

5 (b) Unless the statute describing the offense provides  
6 otherwise, or the period of limitation is extended by Section  
7 3-6, a prosecution for any offense not designated in  
8 subsection (a) or (a-5) must be commenced within 3 years after  
9 the commission of the offense if it is a felony, or within one  
10 year and 6 months after its commission if it is a misdemeanor.

11 (Source: P.A. 100-149, eff. 1-1-18; 100-863, eff. 8-14-18;  
12 101-130, eff. 1-1-20.)

13 (720 ILCS 5/17-56) (was 720 ILCS 5/16-1.3)

14 Sec. 17-56. Financial exploitation of an elderly person or  
15 a person with a disability.

16 (a) A person commits financial exploitation of an elderly  
17 person or a person with a disability when he or she stands in a  
18 position of trust or confidence with the elderly person or a  
19 person with a disability and he or she knowingly:

20 (1) by deception or intimidation obtains control over  
21 the property of an elderly person or a person with a  
22 disability; or

23 (2) illegally uses the assets or resources of an  
24 elderly person or a person with a disability.

25 (b) Sentence. Financial exploitation of an elderly person



1 or a person with a disability is: (1) a Class 4 felony if the  
2 value of the property is \$300 or less, (2) a Class 3 felony if  
3 the value of the property is more than \$300 but less than  
4 \$5,000, (3) a Class 2 felony if the value of the property is  
5 \$5,000 or more but less than \$50,000, and (4) a Class 1 felony  
6 if the value of the property is \$50,000 or more or if the  
7 elderly person is over 70 years of age and the value of the  
8 property is \$15,000 or more or if the elderly person is 80  
9 years of age or older and the value of the property is \$5,000  
10 or more.

11 (c) For purposes of this Section:

12 (1) "Elderly person" means a person 60 years of age or  
13 older.

14 (2) "Person with a disability" means a person who  
15 suffers from a physical or mental impairment resulting  
16 from disease, injury, functional disorder or congenital  
17 condition that impairs the individual's mental or physical  
18 ability to independently manage his or her property or  
19 financial resources, or both.

20 (3) "Intimidation" means the communication to an  
21 elderly person or a person with a disability that he or she  
22 shall be deprived of food and nutrition, shelter,  
23 prescribed medication or medical care and treatment or  
24 conduct as provided in Section 12-6 of this Code.

25 (4) "Deception" means, in addition to its meaning as  
26 defined in Section 15-4 of this Code, a misrepresentation

1 or concealment of material fact relating to the terms of a  
2 contract or agreement entered into with the elderly person  
3 or person with a disability or to the existing or  
4 pre-existing condition of any of the property involved in  
5 such contract or agreement; or the use or employment of  
6 any misrepresentation, false pretense or false promise in  
7 order to induce, encourage or solicit the elderly person  
8 or person with a disability to enter into a contract or  
9 agreement.

10 The illegal use of the assets or resources of an elderly  
11 person or a person with a disability includes, but is not  
12 limited to, the misappropriation of those assets or resources  
13 by undue influence, breach of a fiduciary relationship, fraud,  
14 deception, extortion, or use of the assets or resources  
15 contrary to law.

16 A person stands in a position of trust and confidence with  
17 an elderly person or person with a disability when he (i) is a  
18 parent, spouse, adult child or other relative by blood or  
19 marriage of the elderly person or person with a disability,  
20 (ii) is a joint tenant or tenant in common with the elderly  
21 person or person with a disability, (iii) has a legal or  
22 fiduciary relationship with the elderly person or person with  
23 a disability, (iv) is a financial planning or investment  
24 professional, ~~or~~ (v) is a paid or unpaid caregiver for the  
25 elderly person or person with a disability, or (vi) is a friend  
26 or acquaintance in a position of trust.

1 (d) Limitations. Nothing in this Section shall be  
2 construed to limit the remedies available to the victim under  
3 the Illinois Domestic Violence Act of 1986.

4 (e) Good faith efforts. Nothing in this Section shall be  
5 construed to impose criminal liability on a person who has  
6 made a good faith effort to assist the elderly person or person  
7 with a disability in the management of his or her property, but  
8 through no fault of his or her own has been unable to provide  
9 such assistance.

10 (f) Not a defense. It shall not be a defense to financial  
11 exploitation of an elderly person or person with a disability  
12 that the accused reasonably believed that the victim was not  
13 an elderly person or person with a disability. Consent is not a  
14 defense to financial exploitation of an elderly person or a  
15 person with a disability if the accused knew or had reason to  
16 know that the elderly person or a person with a disability  
17 lacked capacity to consent.

18 (g) Civil Liability. A civil cause of action exists for  
19 financial exploitation of an elderly person or a person with a  
20 disability as described in subsection (a) of this Section. A  
21 person against whom a civil judgment has been entered for  
22 financial exploitation of an elderly person or person with a  
23 disability shall be liable to the victim or to the estate of  
24 the victim in damages of treble the amount of the value of the  
25 property obtained, plus reasonable attorney fees and court  
26 costs. In a civil action under this subsection, the burden of

1 proof that the defendant committed financial exploitation of  
2 an elderly person or a person with a disability as described in  
3 subsection (a) of this Section shall be by a preponderance of  
4 the evidence. This subsection shall be operative whether or  
5 not the defendant has been charged or convicted of the  
6 criminal offense as described in subsection (a) of this  
7 Section. This subsection (g) shall not limit or affect the  
8 right of any person to bring any cause of action or seek any  
9 remedy available under the common law, or other applicable  
10 law, arising out of the financial exploitation of an elderly  
11 person or a person with a disability.

12 (h) If a person is charged with financial exploitation of  
13 an elderly person or a person with a disability that involves  
14 the taking or loss of property valued at more than \$5,000, a  
15 prosecuting attorney may file a petition with the circuit  
16 court of the county in which the defendant has been charged to  
17 freeze the assets of the defendant in an amount equal to but  
18 not greater than the alleged value of lost or stolen property  
19 in the defendant's pending criminal proceeding for purposes of  
20 restitution to the victim. The burden of proof required to  
21 freeze the defendant's assets shall be by a preponderance of  
22 the evidence.

23 (Source: P.A. 101-394, eff. 1-1-20.)"