

Rep. JoAnn D. Osmond

Filed: 2/27/2014

	09800HB3645ham001 LRB098 12715 RPS 56061 a
1	AMENDMENT TO HOUSE BILL 3645
2	AMENDMENT NO Amend House Bill 3645 as follows:
3 4	on page 8, immediately below line 26, by inserting the following:
5 6	"Section 12. The Nursing Home Care Act is amended by changing Section 2-104 as follows:
7	"(210 ILCS 45/2-104) (from Ch. 111 1/2, par. 4152-104)
8	Sec. 2-104. (a) A resident shall be permitted to retain the
9	services of his own personal physician at his own expense of
10	under an individual or group plan of health insurance, or under
11	any public or private assistance program providing such
12	coverage. However, the facility is not liable for the
13	negligence of any such personal physician. <u>If a resident</u>
14	retains the services of a naturopathic physician as his
15	personal physician, the resident's care must be overseen by a

1 physician licensed to practice medicine in all of its branches in accordance with a written agreement between the physicians. 2 The Department shall adopt rules setting forth the minimum 3 4 requirements for such an agreement. Every resident shall be 5 permitted to obtain from his own physician or the physician 6 attached to the facility complete and current information concerning his medical diagnosis, treatment and prognosis in 7 8 terms and language the resident can reasonably be expected to 9 understand. Every resident shall be permitted to participate in 10 the planning of his total care and medical treatment to the 11 extent that his condition permits. No resident shall be subjected to experimental research or treatment without first 12 13 obtaining his informed, written consent. The conduct of any 14 experimental research or treatment shall be authorized and 15 monitored by an institutional review board appointed by the 16 Director. The membership, operating procedures and review criteria for the institutional review board shall be prescribed 17 under rules and regulations of the Department and shall comply 18 19 institutional with the requirements for review boards 20 established by the federal Food and Drug Administration. No 21 person who has received compensation in the prior 3 years from 22 an entity that manufactures, distributes, or sells 23 pharmaceuticals, biologics, or medical devices may serve on the 24 institutional review board.

The institutional review board may approve only research or treatment that meets the standards of the federal Food and Drug 09800HB3645ham001 -3- LRB098 12715 RPS 56061 a

1 Administration with respect to (i) the protection of human disclosure financial 2 subjects and (ii) bv clinical 3 investigators. The Office of State Long Term Care Ombudsman and 4 the State Protection and Advocacy organization shall be given 5 an opportunity to comment on any request for approval before 6 the board makes a decision. Those entities shall not be provided information that would allow a potential human subject 7 to be individually identified, unless the board asks the 8 9 Ombudsman for help in securing information from or about the 10 resident. The board shall require frequent reporting of the 11 progress of the approved research or treatment and its impact on residents, including immediate reporting of any adverse 12 13 impact to the resident, the resident's representative, the 14 Office of the State Long Term Care Ombudsman, and the State 15 Protection and Advocacy organization. The board may not approve 16 any retrospective study of the records of any resident about the safety or efficacy of any care or treatment if the resident 17 18 was under the care of the proposed researcher or a business 19 associate when the care or treatment was given, unless the 20 study is under the control of a researcher without any business 21 relationship to any person or entity who could benefit from the findings of the study. 22

No facility shall permit experimental research or treatment to be conducted on a resident, or give access to any person or person's records for a retrospective study about the safety or efficacy of any care or treatment, without the prior 09800HB3645ham001 -4- LRB098 12715 RPS 56061 a

1 written approval of the institutional review board. No nursing home administrator, or person licensed by the State to provide 2 3 medical care or treatment to any person, may assist or 4 participate in any experimental research on or treatment of a 5 resident, including a retrospective study, that does not have the prior written approval of the board. Such conduct shall be 6 grounds for professional discipline by the Department of 7 8 Financial and Professional Regulation.

9 The institutional review board may exempt from ongoing 10 review research or treatment initiated on a resident before the individual's admission to a facility and for which the board 11 determines there is adequate ongoing oversight by another 12 13 institutional review board. Nothing in this Section shall 14 prevent a facility, any facility employee, or any other person 15 from assisting or participating in any experimental research on 16 or treatment of a resident, if the research or treatment began before the person's admission to a facility, until the board 17 18 has reviewed the research or treatment and decided to grant or 19 deny approval or to exempt the research or treatment from 20 ongoing review.

(b) All medical treatment and procedures shall be administered as ordered by a physician. All new physician orders shall be reviewed by the facility's director of nursing or charge nurse designee within 24 hours after such orders have been issued to assure facility compliance with such orders.

26 All physician's orders and plans of treatment shall have

the authentication of the physician. For the purposes of this subsection (b), "authentication" means an original written signature or an electronic signature system that allows for the verification of a signer's credentials. A stamp signature, with or without initials, is not sufficient.

According to rules adopted by the Department, every woman resident of child-bearing age shall receive routine obstetrical and gynecological evaluations as well as necessary prenatal care.

10 (c) Every resident shall be permitted to refuse medical 11 treatment and to know the consequences of such action, unless 12 such refusal would be harmful to the health and safety of 13 others and such harm is documented by a physician in the 14 resident's clinical record. The resident's refusal shall free 15 the facility from the obligation to provide the treatment.

(d) Every resident, resident's guardian, or parent if the resident is a minor shall be permitted to inspect and copy all his clinical and other records concerning his care and maintenance kept by the facility or by his physician. The facility may charge a reasonable fee for duplication of a record.

22 (Source: P.A. 96-1372, eff. 7-29-10; 97-179, eff. 1-1-12.)".