

AN ACT concerning regulation.

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

Section 5. The Mental Health and Developmental Disabilities Administrative Act is amended by changing Section 4 as follows:

(20 ILCS 1705/4) (from Ch. 91 1/2, par. 100-4)

Sec. 4. Supervision of facilities and services; quarterly reports.

(a) To exercise executive and administrative supervision over all facilities, divisions, programs and services now existing or hereafter acquired or created under the jurisdiction of the Department, including, but not limited to, the following:

The Alton Mental Health Center, at Alton

The Clyde L. Choate Mental Health and Developmental Center, at Anna

The Chester Mental Health Center, at Chester

The Chicago-Read Mental Health Center, at Chicago

The Elgin Mental Health Center, at Elgin

The Metropolitan Children and Adolescents Center, at Chicago

The Jacksonville Developmental Center, at Jacksonville

The Governor Samuel H. Shapiro Developmental Center,  
at Kankakee

The Tinley Park Mental Health Center, at Tinley Park

The Warren G. Murray Developmental Center, at  
Centralia

The Jack Mabley Developmental Center, at Dixon

The Lincoln Developmental Center, at Lincoln

The H. Douglas Singer Mental Health and Developmental  
Center, at Rockford

The John J. Madden Mental Health Center, at Chicago

The George A. Zeller Mental Health Center, at Peoria

The Andrew McFarland Mental Health Center, at  
Springfield

The Adolf Meyer Mental Health Center, at Decatur

The William W. Fox Developmental Center, at Dwight

The Elisabeth Ludeman Developmental Center, at Park  
Forest

The William A. Howe Developmental Center, at Tinley  
Park

The Ann M. Kiley Developmental Center, at Waukegan.

(b) Beginning not later than July 1, 1977, the Department shall cause each of the facilities under its jurisdiction which provide in-patient care to comply with standards, rules and regulations of the Department of Public Health prescribed under Section 6.05 of the Hospital Licensing Act.

(b-5) The Department shall cause each of the facilities

under its jurisdiction that provide in-patient care to comply with Section 6.25 of the Hospital Licensing Act.

(c) The Department shall issue quarterly reports on admissions, deflections, discharges, bed closures, staff-resident ratios, census, average length of stay, and any adverse federal certification or accreditation findings, if any, for each State-operated facility for the mentally ill and developmentally disabled.

(Source: P.A. 93-636, eff. 6-1-04.)

Section 10. The University of Illinois Hospital Act is amended by adding Section 8 as follows:

(110 ILCS 330/8 new)

Sec. 8. Safe patient handling policy. The University of Illinois Hospital shall cause each of the facilities under its jurisdiction that provide in-patient care to comply with Section 6.25 of the Hospital Licensing Act.

Section 15. The Nursing Home Care Act is amended by adding Section 3-206.05 as follows:

(210 ILCS 45/3-206.05 new)

Sec. 3-206.05. Safe resident handling policy.

(a) In this Section:

"Health care worker" means an individual providing direct

resident care services who may be required to lift, transfer, reposition, or move a resident.

"Nurse" means an advanced practice nurse, a registered nurse, or a licensed practical nurse licensed under the Nurse Practice Act.

(b) A facility must adopt and ensure implementation of a policy to identify, assess, and develop strategies to control risk of injury to residents and nurses and other health care workers associated with the lifting, transferring, repositioning, or movement of a resident. The policy shall establish a process that, at a minimum, includes all of the following:

(1) Analysis of the risk of injury to residents and nurses and other health care workers taking into account the resident handling needs of the resident populations served by the facility and the physical environment in which the resident handling and movement occurs.

(2) Education of nurses in the identification, assessment, and control of risks of injury to residents and nurses and other health care workers during resident handling.

(3) Evaluation of alternative ways to reduce risks associated with resident handling, including evaluation of equipment and the environment.

(4) Restriction, to the extent feasible with existing equipment and aids, of manual resident handling or movement

of all or most of a resident's weight except for emergency, life-threatening, or otherwise exceptional circumstances.

(5) Procedures for a nurse to refuse to perform or be involved in resident handling or movement that the nurse in good faith believes will expose a resident or nurse or other health care worker to an unacceptable risk of injury.

(6) Development of strategies to control risk of injury to residents and nurses and other health care workers associated with the lifting, transferring, repositioning, or movement of a resident.

(7) In developing architectural plans for construction or remodeling of a facility or unit of a facility in which resident handling and movement occurs, consideration of the feasibility of incorporating resident handling equipment or the physical space and construction design needed to incorporate that equipment.

Section 20. The Hospital Licensing Act is amended by adding Section 6.25 as follows:

(210 ILCS 85/6.25 new)

Sec. 6.25. Safe patient handling policy.

(a) In this Section:

"Health care worker" means an individual providing direct patient care services who may be required to lift, transfer, reposition, or move a patient.

"Nurse" means an advanced practice nurse, a registered nurse, or a licensed practical nurse licensed under the Nurse Practice Act.

(b) A hospital must adopt and ensure implementation of a policy to identify, assess, and develop strategies to control risk of injury to patients and nurses and other health care workers associated with the lifting, transferring, repositioning, or movement of a patient. The policy shall establish a process that, at a minimum, includes all of the following:

(1) Analysis of the risk of injury to patients and nurses and other health care workers posed by the patient handling needs of the patient populations served by the hospital and the physical environment in which the patient handling and movement occurs.

(2) Education of nurses in the identification, assessment, and control of risks of injury to patients and nurses and other health care workers during patient handling.

(3) Evaluation of alternative ways to reduce risks associated with patient handling, including evaluation of equipment and the environment.

(4) Restriction, to the extent feasible with existing equipment and aids, of manual patient handling or movement of all or most of a patient's weight except for emergency, life-threatening, or otherwise exceptional circumstances.

(5) Collaboration with and an annual report to the nurse staffing committee.

(6) Procedures for a nurse to refuse to perform or be involved in patient handling or movement that the nurse in good faith believes will expose a patient or nurse or other health care worker to an unacceptable risk of injury.

(7) Submission of an annual report to the hospital's governing body or quality assurance committee on activities related to the identification, assessment, and development of strategies to control risk of injury to patients and nurses and other health care workers associated with the lifting, transferring, repositioning, or movement of a patient.

(8) In developing architectural plans for construction or remodeling of a hospital or unit of a hospital in which patient handling and movement occurs, consideration of the feasibility of incorporating patient handling equipment or the physical space and construction design needed to incorporate that equipment.

Section 99. Effective date. This Act takes effect January 1, 2010.