DEPARTMENT OF PUBLIC HEALTH

NOTICE OF PROPOSED AMENDMENTS

1) **Heading of the Part:** Skilled Nursing and Intermediate Care Facilities Code

2) **Code Citation:** 77 Ill. Adm. Code 300

3) **Section Number:** Proposed Action:

<table>
<thead>
<tr>
<th>Section Number</th>
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<tbody>
<tr>
<td>300.670</td>
<td>Amend</td>
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<tr>
<td>300.690</td>
<td>Amend</td>
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4) **Statutory Authority:** Nursing Home Care Act [210 ILCS 45]

5) **A Complete Description of the Subjects and Issues Involved:**

   The Skilled Nursing and Intermediate Care Facilities Code regulates skilled nursing and intermediate care facilities, including the records they are required to keep on incidents and accidents, and the procedures for reporting incidents and accidents to the Department. This rulemaking adds a requirement for reporting the death of a resident when that death is the result of an incident or accident. The facility will be required to notify the Department “by phone only,” which is described as speaking with a Department representative who confirms that the requirement to notify the Regional Office by phone has been met. This rulemaking should ensure that the Department is properly informed when an incident or accident results in the death of a resident.

   Section 300.670 is being amended to correct a cross-reference.

   The economic effect of this proposed rulemaking is unknown. Therefore, the Department requests any information that would assist in calculating this effect.

   The Department anticipates adoption of this rulemaking approximately six to nine months after publication of the Notice in the Illinois Register.

6) **Published studies or reports, and sources of underlying data, used to compose this rulemaking:** None

7) **Will this rulemaking replace any emergency rulemaking currently in effect?** No

8) **Does this rulemaking contain an automatic repeal date?** No

9) **Does this rulemaking contain incorporations by reference?** No
DEPARTMENT OF PUBLIC HEALTH

NOTICE OF PROPOSED AMENDMENTS

10) Are there any other proposed rulemakings pending on this Part? Yes

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<tr>
<td>300.1230</td>
<td>Amend</td>
<td>35 Ill. Reg. 9927; 6/24/11</td>
</tr>
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</table>

11) Statement of Statewide Policy Objectives: This rulemaking does not create a state mandate.

12) Time, Place and Manner in which interested persons may comment on this proposed rulemaking:

Interested persons may present their comments concerning this rulemaking within 45 days after this issue of the Illinois Register to:

Susan Meister
Division of Legal Services
Illinois Department of Public Health
535 W. Jefferson St., 5th floor
Springfield, Illinois 62761
217/782-2043
e-mail dph.rules@illinois.gov

13) Initial Regulatory Flexibility Analysis:

A) Types of small businesses, small municipalities and not for profit corporations affected: Skilled Nursing Facilities

B) Reporting, bookkeeping or other procedures required for compliance: Yes

C) Types of professional skills necessary for compliance: Nursing; medical

14) Regulatory Agenda on which this rulemaking was summarized:

This rule was not included on either of the two most recent Regulatory Agendas because the need for the rulemaking was not known when the most recent Regulatory Agendas were drafted.

The full text of the Proposed Amendments begins on the next page:
ILLINOIS REGISTER

DEPARTMENT OF PUBLIC HEALTH

NOTICE OF PROPOSED AMENDMENTS

TITLE 77: PUBLIC HEALTH
CHAPTER 1: DEPARTMENT OF PUBLIC HEALTH
SUBCHAPTER c: LONG-TERM CARE FACILITIES

PART 300
SKILLED NURSING AND INTERMEDIATE CARE FACILITIES CODE

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300.110 General Requirements
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300.140 Issuance of an Initial License for a New Facility
300.150 Issuance of an Initial License Due to a Change of Ownership
300.160 Issuance of a Renewal License
300.163 Alzheimer's Special Care Disclosure
300.165 Criteria for Adverse Licensure Actions
300.170 Denial of Initial License
300.175 Denial of Renewal of License
300.180 Revocation of License
300.190 Experimental Program Conflicting With Requirements
300.200 Inspections, Surveys, Evaluations and Consultation
300.210 Filing an Annual Attested Financial Statement
300.220 Information to Be Made Available to the Public By the Department
300.230 Information to Be Made Available to the Public By the Licensee
300.240 Municipal Licensing
300.250 Ownership Disclosure
300.260 Issuance of Conditional Licenses
300.270 Monitor and Receivership
300.271 Presentation of Findings
300.272 Determination to Issue a Notice of Violation or Administrative Warning
300.274 Determination of the Level of a Violation
300.276 Notice of Violation
300.277 Administrative Warning
300.278 Plans of Correction
300.280 Reports of Correction
300.282 Conditions for Assessment of Penalties
300.284 Calculation of Penalties (Repealed)
300.286 Notice of Penalty Assessment; Response by Facility
300.287 Consideration of Factors for Assessing Penalties
DEPARTMENT OF PUBLIC HEALTH

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300.288 Reduction or Waiver of Penalties
300.290 Quarterly List of Violators (Repealed)
300.300 Alcoholism Treatment Programs In Long-Term Care Facilities
300.310 Department May Survey Facilities Formerly Licensed
300.315 Supported Congregate Living Arrangement Demonstration
300.320 Waivers
300.330 Definitions
300.340 Incorporated and Referenced Materials

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SUBPART C: POLICIES

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300.615 Determination of Need Screening and Request for Resident Criminal History Record Information
300.620 Admission, Retention and Discharge Policies
300.624 Criminal History Background Checks for Persons Who Were Residents on May 10, 2006 (Repealed)
300.625 Identified Offenders
300.626 Discharge Planning for Identified Offenders
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300.630 Contract Between Resident and Facility
300.640 Residents' Advisory Council
300.650 Personnel Policies
300.651 Whistleblower Protection
300.655 Initial Health Evaluation for Employees
300.660 Nursing Assistants
300.661 Health Care Worker Background Check
300.662 Resident Attendants
300.663 Registry of Certified Nursing Assistants
300.665 Student Interns
300.670 Disaster Preparedness
300.680 Restraints
300.682 Nonemergency Use of Physical Restraints
300.684 Emergency Use of Physical Restraints
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300.686 Unnecessary, Psychotropic, and Antipsychotic Drugs
300.690 Incidents and Accidents
300.695 Contacting Local Law Enforcement
300.696 Infection Control

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300.810 General
300.820 Categories of Personnel
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300.840 Personnel Policies

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300.1020 Communicable Disease Policies
300.1025 Tuberculin Skin Test Procedures
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300.1035 Life-Sustaining Treatments
300.1040 Care and Treatment of Sexual Assault Survivors
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300.2860 Nursing Unit
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DEPARTMENT OF PUBLIC HEALTH

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300.3450 Resident Living Services Medical and Dental Care (Repealed)
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300.3630 Design and Construction Standards (New and Existing Facilities) (Repealed)

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300.3710 Day Care in Long-Term Care Facilities

SUBPART S: PROVIDING SERVICES TO PERSONS WITH SERIOUS MENTAL ILLNESS

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300.4010 Comprehensive Assessments for Residents with Serious Mental Illness Residing in Facilities Subject to Subpart S
300.4020 Reassessments for Residents with Serious Mental Illness Residing in Facilities Subject to Subpart S
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## DEPARTMENT OF PUBLIC HEALTH

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<td>Personnel for Providing Services to Persons with Serious Mental Illness for Facilities Subject to Subpart S</td>
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### SUBPART U: ALZHEIMER'S SPECIAL CARE UNIT OR CENTER PROVIDING CARE TO PERSONS WITH ALZHEIMER'S DISEASE OR OTHER DEMENTIA
DEPARTMENT OF PUBLIC HEALTH

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300.7010 Admission Criteria
300.7020 Assessment and Care Planning
300.7030 Ability-Centered Care
300.7040 Activities
300.7050 Staffing
300.7060 Environment
300.7070 Quality Assessment and Improvement
300.7080 Variances to Enhance Residents' Quality of Life

300.APPENDIX A Interpretation, Components, and Illustrative Services for Intermediate Care Facilities and Skilled Nursing Facilities (Repealed)
300.APPENDIX B Classification of Distinct Part of a Facility for Different Levels of Service (Repealed)
300.APPENDIX C Federal Requirements Regarding Patients'/Residents' Rights (Repealed)
300.APPENDIX D Forms for Day Care in Long-Term Care Facilities
300.APPENDIX E Criteria for Activity Directors Who Need Only Minimal Consultation (Repealed)
300.APPENDIX F Guidelines for the Use of Various Drugs
300.APPENDIX G Facility Report
300.TABLE A Sound Transmission Limitations in New Skilled Nursing and Intermediate Care Facilities
300.TABLE B Pressure Relationships and Ventilation Rates of Certain Areas for New Intermediate Care Facilities and Skilled Nursing Facilities
300.TABLE C Construction Types and Sprinkler Requirements for Existing Skilled Nursing Facilities/Intermediate Care Facilities
300.TABLE D Heat Index Table/Apparent Temperature

AUTHORITY: Implementing and authorized by the Nursing Home Care Act [210 ILCS 45].

NOTICE OF PROPOSED AMENDMENTS


SUBPART C: POLICIES

Section 300.670  Disaster Preparedness

a)  For the purpose of this Section only, "disaster" means an occurrence, as a result of a natural force or mechanical failure such as water, wind or fire, or a lack of essential resources such as electrical power, that poses a threat to the safety and welfare of residents, personnel, and others present in the facility.

b)  Each facility shall have policies covering disaster preparedness, including a written plan for staff, residents and others to follow. The plan shall include, but not be limited to, the following:

1)  Proper instruction in the use of fire extinguishers for all personnel employed on the premises;

2)  A diagram of the evacuation route, which shall be posted and made familiar to all personnel employed on the premises;
3) A written plan for moving residents to safe locations within the facility in the event of a tornado warning or severe thunderstorm warning; and

4) An established means of facility notification when the National Weather Service issues a tornado or severe thunderstorm warning that covers the area in which the facility is located. The notification mechanism shall be other than commercial radio or television. Approved notification measures include being within range of local tornado warning sirens, an operable National Oceanic and Atmospheric Administration weather radio in the facility, or arrangements with local public safety agencies (police, fire, emergency management agency) to be notified if a warning is issued.

c) Fire drills shall be held at least quarterly for each shift of facility personnel. Disaster drills for other than fire shall be held twice annually for each shift of facility personnel. Drills shall be held under varied conditions to:

1) Ensure that all personnel on all shifts are trained to perform assigned tasks;

2) Ensure that all personnel on all shifts are familiar with the use of the fire-fighting equipment in the facility; and

3) Evaluate the effectiveness of disaster plans and procedures.

d) Fire drills shall include simulation of the evacuation of residents to safe areas during at least one drill each year on each shift.

e) The facility shall provide for the evacuation of physically handicapped persons, including those who are hearing or sight impaired.

f) If the welfare of the residents precludes an actual evacuation of an entire building, the facility shall conduct drills involving the evacuation of successive portions of the building under conditions that assure the capability of evacuating the entire building with the personnel usually available, should the need arise.
g) A written evaluation of each drill shall be submitted to the facility administrator and shall be maintained for one year.

h) A written plan shall be developed for temporarily relocating the residents for any disaster requiring relocation and at any time that the temperature in residents’ bedrooms falls below 55°F. for 12 hours or more.

i) Reporting of Disasters

1) Upon the occurrence of any disaster requiring hospital service, police, fire department or coroner, the facility administrator or designee shall provide a preliminary report to the Department either by using the nursing home hotline or by directly contacting the appropriate Department Regional Office during business hours. This preliminary report shall include, at a minimum:

A) The name and location of the facility;

B) The type of disaster;

C) The number of injuries or deaths to residents;

D) The number of beds not usable due to the occurrence;

E) An estimate of the extent of damages to the facility;

F) The type of assistance needed, if any; and

G) A list of other State or local agencies notified about the problem.

2) If the disaster will not require direct Departmental assistance, the facility shall provide a preliminary report within 24 hours after the occurrence. Additionally, the facility shall submit a full written account to the Department within seven days after the occurrence, which includes the information specified in subsection (i)(1) of this Section and a statement of actions taken by the facility after the preliminary report.

j) Each facility shall establish and implement policies and procedures in a
written plan to provide for the health, safety, welfare and comfort of all residents when the heat index/apparent temperature (see Section 300. Table D), as established by the National Oceanic and Atmospheric Administration, inside the facility exceeds 80°F.

k) Coordination with Local Authorities

1) Annually, each facility shall forward copies of all disaster policies and plans required under this Section to the local health authority and local emergency management agency having jurisdiction.

2) Annually, each facility shall forward copies of its emergency water supply agreements, required under Section 300.2620(d)300.2610(b), to the local health authority and local emergency management agency having jurisdiction.

3) Each facility shall provide a description of its emergency source of electrical power, including the services connected to the source, to the local health authority and local emergency management agency having jurisdiction. The facility shall inform the local health authority and local emergency management agency at any time that the emergency source of power or services connected to the source are changed.

4) When requested by the local health authority and the local emergency management agency, the facility shall participate in emergency planning activities.

(Source: Amended at 36 Ill. Reg. ______, effective __________)

Section 300.690 Incidents and Accidents

a) The facility shall maintain a file of all written reports of each incident and accident affecting a resident that is not the expected outcome of a resident's condition or disease process. A descriptive summary of each incident or accident affecting a resident shall also be recorded in the progress notes or nurse's notes of that resident.

b) The facility shall notify the Department of any serious incident or accident. For purposes of this Section, "serious" means any incident or
c) The facility shall, by fax or phone, notify the Regional Office within 24 hours after each reportable incident or accident. If a reportable incident or accident results in the death of a resident, the facility shall, after contacting local law enforcement pursuant to Section 300.695, notify the Regional Office by phone only. For the purposes of this Section, “notify the Regional Office by phone only” means speaking with a Department representative who confirms over the phone that the requirement to notify the Regional Office by phone has been met. If the facility is unable to contact the Regional Office, it shall notify the Department's toll-free complaint registry hotline. The facility shall send a narrative summary of each reportable accident or incident to the Department within seven days after the occurrence.

(Source: Amended at 36 Ill. Reg.______, effective ___________)