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REGISTER RULES OF GOVERNMENTAL AGENCIES



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INTRODUCTION

The Illinois Register is the official state document for publishing public notice of rulemaking activity initiated by State governmental agencies. The table of contents is arranged categorically by rulemaking activity and alphabetically by agency within each category.

Rulemaking activity consists of proposed or adopted new rules; amendments to or repealers of existing rules; and rules promulgated by emergency or preemptory action. Executive Orders and Proclamations issued by the Governor; notices of public information required by State Statute; and activities (meeting agendas; Statements of Objection or Recommendation, etc.) of the Joint Committee on Administrative Rules (JCAR), a legislative oversight committee which monitors the rulemaking activities of State Agencies; is also published in the Register.

The Register is a weekly update of the Illinois Administrative Code (a compilation of the rules adopted by State agencies). The most recent edition of the Code, along with the Register, comprise the most current accounting of State agencies' rulemakings.

The Illinois Register is the property of the State of Illinois, granted by the authority of the Illinois Administrative Procedure Act [5 ILCS 100/1-1, et seq.].

ILLINOIS REGISTER PUBLICATION SCHEDULE FOR 2009

<u>Issue #</u>	<u>Rules Due Date</u>	<u>Date of Issue</u>
1	December 22, 2008	January 2, 2009
2	December 29, 2008	January 9, 2009
3	January 5, 2009	January 16, 2009
4	January 12, 2009	January 23, 2009
5	January 20, 2009	January 30, 2009
6	January 26, 2009	February 6, 2009
7	February 2, 2009	February 13, 2009
8	February 9, 2009	February 20, 2009
9	February 17, 2009	February 27, 2009
10	February 23, 2009	March 6, 2009
11	March 2, 2009	March 13, 2009
12	March 9, 2009	March 20, 2009
13	March 16, 2009	March 27, 2009
14	March 23, 2009	April 3, 2009
15	March 30, 2009	April 10, 2009
16	April 6, 2009	April 17, 2009
17	April 13, 2009	April 24, 2009
18	April 20, 2009	May 1, 2009
19	April 27, 2009	May 8, 2009
20	May 4, 2009	May 15, 2009
21	May 11, 2009	May 22, 2009
22	May 18, 2009	May 29, 2009

<u>Issue #</u>	<u>Rules Due Date</u>	<u>Date of Issue</u>
23	May 26, 2009	June 5, 2009
24	June 1, 2009	June 12, 2009
25	June 8, 2009	June 19, 2009
26	June 15, 2009	June 26, 2009
27	June 22, 2009	July 6, 2009
28	June 29, 2009	July 10, 2009
29	July 6, 2009	July 17, 2009
30	July 13, 2009	July 24, 2009
31	July 20, 2009	July 31, 2009
32	July 27, 2009	August 7, 2009
33	August 3, 2009	August 14, 2009
34	August 10, 2009	August 21, 2009
35	August 17, 2009	August 28, 2009
36	August 24, 2009	September 4, 2009
37	August 31, 2009	September 11, 2009
38	September 8, 2009	September 18, 2009
39	September 14, 2009	September 25, 2009
40	September 21, 2009	October 2, 2009
41	September 28, 2009	October 9, 2009
42	October 5, 2009	October 16, 2009
43	October 13, 2009	October 23, 2009
44	October 19, 2009	October 30, 2009
45	October 26, 2009	November 6, 2009
46	November 2, 2009	November 13, 2009
47	November 9, 2009	November 20, 2009
48	November 16, 2009	November 30, 2009
49	November 23, 2009	December 4, 2009
50	November 30, 2009	December 11, 2009
51	December 7, 2009	December 18, 2009
52	December 14, 2009	December 28, 2009

DEBT COLLECTION BOARD

NOTICE OF PROPOSED REPEALER

- 1) Heading of the Part: State Agency Accounts Receivable
- 2) Code Citation: 74 Ill. Adm. Code 910
- 3)

<u>Section Numbers:</u>	<u>Proposed Action:</u>
910.10	Repeal
910.20	Repeal
910.30	Repeal
910.40	Repeal
910.50	Repeal
910.60	Repeal
910.70	Repeal
- 4) Statutory Authority: Authorized by the Illinois State Collection Act of 1986 [30 ILCS 210/8]
- 5) A Complete Description of the Subjects and Issues Involved: Public Act 96-493 eliminates the Debt Collection Board by repealing 30 ILCS 210/8 and, subsequently, eliminates the Board's functions as outlined in rules, effective 1/1/2010.
- 6) Will this rulemaking replace any emergency rulemaking currently in effect? No
- 7) Does this rulemaking contain an automatic repeal date? No
- 8) Does this rulemaking contain incorporations by reference? No
- 9) Are there any other proposed rulemakings pending on this Part? No
- 10) Statement of Statewide Policy Objectives: This repealer will not require local governments, school districts or municipalities to establish, expand or modify activities in such a way as to necessitate additional expenditures from revenues.
- 11) Time, Place and Manner in which interested persons may comment on this proposed repealer:

Gina Wilson
Department of Central Management Services
720 Stratton Office Building
Springfield, Illinois 62706

DEBT COLLECTION BOARD

NOTICE OF PROPOSED REPEALER

217/785-1793

- 12) Initial Regulatory Flexibility Analysis:
- A) Types of small businesses, small municipalities and not for profit corporations affected: None
 - B) Reporting, bookkeeping or other procedures required for compliance: None
 - C) Types of professional skills necessary for compliance: None
- 13) Regulatory Agenda on which this rulemaking was summarized: This rulemaking was not included on either of the 2 most recent regulatory agendas because: it was not timely anticipated.

The full text of the Proposed Repealer begins on the next page:

DEBT COLLECTION BOARD

NOTICE OF PROPOSED REPEALER

TITLE 74: PUBLIC FINANCE
CHAPTER VIII: DEBT COLLECTION BOARD

PART 910

STATE AGENCY ACCOUNTS RECEIVABLE (REPEALED)

Section

910.10	Scope
910.20	Definitions
910.30	Assumption of Jurisdiction by Board
910.40	Agency Referrals
910.50	Actions by Board
910.60	Format; Board Procedures
910.70	Voiding a Contract

AUTHORITY: Implementing and authorized by Section 8 of the Illinois State Collection Act of 1986 [30 ILCS 210/8].

SOURCE: Adopted at 21 Ill. Reg. 11921, effective August 15, 1997; amended at 26 Ill. Reg. 9302, effective July 1, 2002; amended at 27 Ill. Reg. 1542, effective January 17, 2003; amended at 31 Ill. Reg. 1951, effective January 10, 2007; repealed at 34 Ill. Reg. _____, effective _____.

Section 910.10 Scope

This Part describes when and how the Debt Collection Board assumes jurisdiction over those State agency accounts receivable that are not required to be referred to the Department of Revenue's Debt Collection Bureau. This Part also sets forth guidelines for terminating or denying a State contract with a person or vendor if that person or vendor knows or should know that he or she is delinquent in the payment of any debt to the State.

Section 910.20 Definitions

- a) For purposes of this Part, "State agency" shall have the meaning found in the Illinois State Auditing Act.
- b) For purposes of this Part, "State agency account receivable", "accounts receivable", or "receivables" shall mean amounts due a State agency from non-governmental entities that are legally enforceable, that have not been lawfully

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certified as uncollectable, for which there is no legal barrier to referral to the Board for recovery, and that are not otherwise required to be referred to the Department of Revenue's Debt Collection Bureau. Amounts due the General Assembly, the Supreme Court and the several courts of this State and the constitutionally elected State Officers are included only if those entities elect to have their receivables subject to the Board's jurisdiction. The definition shall not include:

- 1) amounts less than \$100;
AGENCY NOTE: Nothing in this Part prohibits agencies from referring receivables to the Board in amounts less than \$100.
 - 2) amounts due the Illinois Student Assistance Commission under the student loan program.
- c) For purposes of Section 50-11 of the Illinois Procurement Code [30 ILCS 500/50-11] a person shall be considered to be "delinquent in the payment of any debt" if that person owes a debt to the State or any of its agencies that totals \$1000 or more, exclusive of interest, and that is more than 90 days past due. A debt due the State shall refer to any receivable owed the State, as defined in procedure 26.20.10 of the Comptroller's Statewide Accounting Management System (SAMS) manual, subject to the exceptions listed in subsections (c)(1) and (c)(2). Procedure 26.20.10 of the SAMS manual, as in effect January 1, 2001, is hereby incorporated by reference. No later editions or amendments are included. A copy of procedure 26.20.10 may be obtained upon request from the Office of the Comptroller, 325 West Adams Street, Springfield, Illinois 62704. To the extent the formal due date of any receivable is not established by law, the due date of that receivable for purposes of this Section shall be computed using the method set forth in procedure 26.20.10 of the SAMS manual. The following debts shall not be considered delinquent for purposes of this Section:
- 1) debts that are the subject of a pending administrative or judicial review;
 - 2) debts that are covered by a written payment agreement, so long as the debtor is current in his payments under the terms of the payment agreement.
- d) For purposes of this Part, "uncollectable" shall have the meaning found in Section 2 of the Uncollected State Claims Act [30 ILCS 205/2].

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Section 910.30 Assumption of Jurisdiction by Board

- a) Accounts receivable that are more than 180 days old, as defined in Section 910.20, will automatically be subject to the Board's jurisdiction unless the applicable State agency attests that the accounts fall into one of the categories set forth in subsection (c) of this Section. During the initial 180 day period, the agency should pursue its own internal collection procedures. Standards for initiating collection are set forth in Section 26.40.10 of the Comptroller's Statewide Accounting Management System (SAMS). Collection procedures should include steps such as a reasonable written billing cycle, telephone contacts, personal contacts through agency collectors, and wherever possible, referral to private collection vendors.
- b) For purposes of this Part, the 180 day period begins to run on the day the receivable becomes enforceable. The beginning date used to calculate the 180 day period for debtors having multiple debts will be established by the agency based on procedures approved by the Board.
- c) The Board will not assume jurisdiction over receivables more than 180 days old if:
 - 1) The receivables are subject to an acceptable installment payment plan.
 - A) Such a plan should provide for repayment of the entire remaining balance due, together with applicable interest over a period not to exceed 3 years. If no interest rate is specified by law, the agency should require the use of simple interest at the judgment rate of 9% per year.
 - B) If an agency believes that it is in the best interests of the State to accept, as part of its collection efforts, payment plans for terms in excess of 3 years, and the agency collection procedures have not been approved by the Board pursuant to subsection (c)(2)(A)(i), it must seek the Board's specific authorization for the payment plans.
 - C) Receivables subject to an acceptable installment payment plan that are delinquent under that plan for more than 90 days automatically become subject to the Board's jurisdiction unless the receivables

DEBT COLLECTION BOARD

NOTICE OF PROPOSED REPEALER

are subject to subsection (c)(2), (3), (4) or (5).

- 2) The Board determines, based on information provided by the agency:
 - A) That:
 - i) the receivables are currently the subject of ongoing collection efforts by the agency pursuant to collection procedures approved by the Board; and
 - ii) in light of those collection efforts, it would not be in the State's best interest for the Board to assume jurisdiction over the receivables.
 - B) Factors to be considered by the Board in determining whether an agency's collection procedures should be approved include:
 - i) the statutory and regulatory methods available to the agency for use in collecting its receivables;
 - ii) whether the agency has been using such methods, as well as applicable methods described in subsection (a), to collect its receivables as expeditiously as possible;
 - iii) the number of agency staff dedicated to collection of accounts receivable;
 - iv) the volume of agency receivables;
 - v) the agency's historical percentage rate of collections;
 - vi) the level of automation of the agency's collection system.
 - C) If the Board approves an agency's collection procedures pursuant to subsection (c)(2)(A)(i), future receivables (or categories of receivables) subject to ongoing collection efforts pursuant to those procedures need not be submitted to the Board for exemption.
 - D) The Board may periodically request an agency to submit

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information concerning its collection procedures. If, based on that information, the Board determines that an agency's collection procedures are no longer acceptable, approval of the procedures may be withdrawn and the Board may assume jurisdiction over the agency's receivables more than 180 days old.

- 3) The receivables are currently the subject of an ongoing wage levy, whether that levy is the result of a judgment entered in circuit court or an administrative levy issued without judgment.
 - 4) The receivables are currently the subject of litigation being pursued in the State of Illinois through the Office of the Attorney General, State's Attorneys' Offices or, where authorized by the Attorney General, by private counsel retained on behalf of the agency.
 - 5) The receivables have been referred to a private collection vendor by the agency and the receivables have been with that vendor for 90 days or less. Agency contracts with private collection vendors should provide that receivables referred to the vendor for which there have been no payments or other activity should be returned to the agency after 90 days.
 - 6) Receivables subject to one of the exceptions listed in subsection (c)(2), (3), (4) or (5) shall automatically be subject to the Board's jurisdiction 60 days after the agency has ceased ongoing collection efforts (other than those referenced in subsection (d)) pursuant to such exceptions.
- d) Referral of a receivable to the Comptroller's offset program, or institution of a license revocation proceeding either before or after the expiration of the 180 day period preceding Board jurisdiction, does not automatically prevent the receivable from becoming subject to the Board's jurisdiction.

Section 910.40 Agency Referrals

The 180 day period set out in Section 910.30(a) does not prohibit an agency from seeking to have receivables placed with the Board at an earlier point. If an agency has exhausted its internal procedures and if it has no private collection vendor under contract, it may refer receivables to the Board prior to the end of the 180 day period.

Section 910.50 Actions by Board

DEBT COLLECTION BOARD

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If receivables become subject to its jurisdiction, the Debt Collection Board will take one of the following actions:

- a) Return the receivables to the applicable State agency with:
 - 1) directions for additional collection efforts by the agency; and
 - 2) instructions on how the agency should report the status of its efforts to the Board;
- b) Refer the receivables to one of the Board's outside collection vendors;
- c) Refer the receivables to the Attorney General for collection (this action may be taken only if the amount is greater than \$1,000);
- d) Certify the receivables as uncollectable. Unpaid receivables should not automatically be removed from the Comptroller's Offset System when certified as uncollectable by either the Attorney General or the Debt Collection Board. Debts should only be removed from the Offset System if covered by the automatic stay or a discharge in bankruptcy, or if the debtor is an individual who is deceased or the debtor is a corporation that has been dissolved by the state of incorporation. If system coding enhancements or adjustments are necessary to track these receivables, the agency will be required to be in compliance by July 1, 2003.

Section 910.60 Format; Board Procedures

The Board will specify:

- a) the format for State agencies to report their receivables. The format shall include, but not be limited to, name of agency and revenue source; nature of receivable, age, and dollar amount of receivables.
- b) the format for State agencies to demonstrate that receivables should not be subject to the Board's jurisdiction pursuant to Section 910.30(c). The format shall include, but not be limited to, a general description of the agency's collection procedures, the extent to which installment payment plans are used, and citations to any statutes or regulations which apply to the agency's collection efforts.

DEBT COLLECTION BOARD

NOTICE OF PROPOSED REPEALER

Section 910.70 Voiding a Contract

- a) Pursuant to Section 50-60 of the Illinois Procurement Code a State agency may declare a contract void if, during the term of the contract, the contracting agency determines that the contractor is delinquent in the payment of debt as set forth in Section 50-11 of the Illinois Procurement Code, and it is determined that voiding the contract is in the best interests of the State. The decision to void a contract pursuant to this authority shall be made only by the Director or Secretary of the contracting agency (and not a designee), or by the State Purchasing Officer of the contracting agency, if the Director or Secretary has delegated in writing this authority to the State Purchasing Officer (and not a designee).
- b) In making the determination as to whether the voiding of a contract is in the best interests of the State, the Director/Secretary or State Purchasing Officer shall consider, among other factors:
 - 1) the cost and difficulty of obtaining the contractual services or goods from an alternative vendor;
 - 2) the extent to which the contractor has already performed its obligations under the contract;
 - 3) whether the contractor has made arrangements to pay the delinquency; and
 - 4) the amount of the delinquency.
- c) If a decision is made not to void the contract, the Director/Secretary or State Purchasing Officer of the contracting agency shall inform the head of the agency to which the delinquency is owed of the existence of the contract so that the delinquent receivable can be placed with the Comptroller's offset system, if this step has not already been taken.

DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

NOTICE OF PROPOSED REPEALER

- 1) Heading of the Part: Nursing and Advanced Practice Nursing Act – Registered Professional Nurse and Licensed Practical Nurse
- 2) Code Citation: 68 Ill. Adm. Code 1300
- 3)

<u>Section Numbers</u> :	<u>Proposed Action</u> :
1300.10	Repealed
1300.15	Repealed
1300.20	Repealed
1300.25	Repealed
1300.27	Repealed
1300.30	Repealed
1300.35	Repealed
1300.37	Repealed
1300.40	Repealed
1300.41	Repealed
1300.42	Repealed
1300.43	Repealed
1300.44	Repealed
1300.45	Repealed
1300.48	Repealed
1300.50	Repealed
1300.60	Repealed
1300.65	Repealed
1300.70	Repealed
1300.75	Repealed
1300.APPENDIX A	Repealed
1300.APPENDIX B	Repealed
1300.APPENDIX C	Repealed
1300.APPENDIX D	Repealed
- 4) Statutory Authority: Nurse Practice Act [225 ILCS 65]
- 5) A Complete Description of the Subjects and Issues Involved: As a result of the sunset review process, PA 95-639 completely rewrote the Act regulating the licensure of nurses in Illinois, including changing the name to the Nurse Practice Act. As a result of the extensive changes this entails, the current Parts 1300 (RN and LPN) and 1305 (APN) are being repealed, to be replaced with a new Part 1300 encompassing all nurse licensure.

DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

NOTICE OF PROPOSED REPEALER

- 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
- 10) Are there any other proposed rulemakings pending on this Part? No
- 11) Statement of Statewide Policy Objectives: This rulemaking has no impact on local governments.
- 12) Time, Place and Manner in which interested persons may comment on this proposed rulemaking:

Interested persons may submit written comments to:

Department of Financial and Professional Regulation
Attention: Craig Cellini
320 West Washington, 3rd Floor
Springfield, IL 62786

217/785-0813 FAX: 217/557-4451

All written comments received within 45 days after this issue of the *Illinois Register* will be considered.

- 13) Initial Regulatory Flexibility Analysis:
 - A) Types of small businesses, small municipalities and not for profit corporations affected: Those providing nursing services.
 - B) Reporting, bookkeeping or other procedures required for compliance: None
 - C) Types of professional skills necessary for compliance: Nursing skills are required for licensure.

DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

NOTICE OF PROPOSED REPEALER

- 14) Regulatory Agenda on which this rulemaking was summarized: July 2009

The full text of the Proposed Repealer begins on the next page:

DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

NOTICE OF PROPOSED REPEALER

TITLE 68: PROFESSIONS AND OCCUPATIONS

CHAPTER VII: DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

SUBCHAPTER b: PROFESSIONS AND OCCUPATIONS

PART 1300

NURSING AND ADVANCED PRACTICE NURSING ACT –
REGISTERED PROFESSIONAL NURSE AND LICENSED PRACTICAL NURSE(REPEALED)

Section

1300.10	Definitions
1300.15	Fees
1300.20	Application for Examination or Licensure
1300.25	The Licensure Examination
1300.27	Application for Licensure on the Basis of Examination (Repealed)
1300.30	Licensure by Endorsement
1300.35	Remedial Education
1300.37	Nurse Externship
1300.40	Approval of Programs
1300.41	Approval of Current Nursing Practice Update Course
1300.42	Standards of Professional Conduct for Registered Professional Nurses
1300.43	Standards of Professional Conduct for Licensed Practical Nurses
1300.44	Standards for Pharmacology/Administration of Medication Course for Practical Nurses
1300.45	Renewals
1300.48	Restoration
1300.50	Granting Variances
1300.60	Practice of Nursing
1300.65	Unethical or Unprofessional Conduct in Nursing Practice
1300.70	Fines
1300.75	Refusal to Issue a Nurse License Based on Criminal History Record
1300.APPENDIX A	Minimal Skills List for Registered Professional Nurses
1300.APPENDIX B	Minimal Assignment List for Registered Professional Nurses
1300.APPENDIX C	Minimal Skills List for Licensed Practical Nurses
1300.APPENDIX D	Minimal Assignment List for Licensed Practical Nurses

AUTHORITY: Implementing the Nursing and Advanced Practice Nursing Act [225 ILCS 65] and authorized by Section 2105-15(7) of the Civil Administrative Code of Illinois [20 ILCS 2105/2105-15(7)].

DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

NOTICE OF PROPOSED REPEALER

SOURCE: Adopted at 4 Ill. Reg. 4, p. 290, effective January 14, 1980; amended at 5 Ill. Reg. 801, effective January 7, 1981; codified at 5 Ill. Reg. 11044; amended at 5 Ill. Reg. 14171, effective December 3, 1981; emergency amendment at 6 Ill. Reg. 916, effective January 6, 1982, for a maximum of 150 days; amended at 6 Ill. Reg. 7448, effective June 15, 1982; amended at 6 Ill. Reg. 10023, effective August 1, 1982; amended at 9 Ill. Reg. 6297, effective April 24, 1985; amended at 9 Ill. Reg. 13355, effective August 21, 1985; amended at 11 Ill. Reg. 18251, effective October 27, 1987; transferred from Chapter I, 68 Ill. Adm. Code 300 (Department of Registration and Education) to Chapter VII, 68 Ill. Adm. Code 1300 (Department of Professional Regulation) pursuant to P.A. 85-225, effective January 1, 1988, at 12 Ill. Reg. 2938; amended at 12 Ill. Reg. 12088, effective July 12, 1988; amended at 14 Ill. Reg. 10035, effective June 12, 1990; emergency amendment at 15 Ill. Reg. 2855, effective February 5, 1991, for a maximum of 150 days; amended at 15 Ill. Reg. 8573, effective May 28, 1991; amended at 17 Ill. Reg. 1572, effective January 25, 1993; amended at 19 Ill. Reg. 13552, effective September 19, 1995; amended at 22 Ill. Reg. 3895, effective February 5, 1998; amended at 22 Ill. Reg. 19273, effective October 13, 1998; amended at 24 Ill. Reg. 1191, effective January 4, 2000; amended at 25 Ill. Reg. 3850, effective March 1, 2001; amended at 26 Ill. Reg. 17225, effective November 18, 2002; emergency amendment at 28 Ill. Reg. 3928, effective February 11, 2004, for a maximum of 150 days; amended at 28 Ill. Reg. 7648, effective May 24, 2004; amended at 30 Ill. Reg. 8582, effective April 21, 2006; repealed at 34 Ill. Reg. _____, effective _____.

Section 1300.10 Definitions

The following definitions shall apply to this Part:

"Act" means the Nursing and Advanced Practice Nursing Act [225 ILCS 65].

"Bilingual Nurse Consortium course or other comparable course approved by the Division" means a course specifically designed to prepare a nurse trained in another jurisdiction, and for whom English is a second language, to take the Illinois required licensure examination.

"Board" means the Board of Nursing.

"Delegation" means the transfer of responsibility for the performance of an activity or task from a registered professional nurse to an unlicensed or licensed person with the former retaining the accountability for the outcome. Responsibility and accountability may be delegated to another licensee under the Act within the scope of practice set forth in the Act and this Part.

DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

NOTICE OF PROPOSED REPEALER

"Department" means the Department of Financial and Professional Regulation.

"Direct Supervision" means being within the facility to provide initial and ongoing direction, procedural guidance, and evaluation of tasks and professional responsibilities delegated to a license pending nurse.

"Direction" means to give authoritative instruction to another regarding tasks and/or professional responsibilities.

"Director" means the Director of the Division of Professional Regulation with the authority delegated by the Secretary.

"Division" means the Department of Financial and Professional Regulation-Division of Professional Regulation.

"Externship" means a two-year program allowing a registered nurse who is licensed under the laws of another state or territory of the United States to practice as a nurse extern under the direct supervision of a registered professional nurse while preparing for the NCLEX-RN examination.

"Professional Responsibility" includes making decisions and judgments requiring use of knowledge acquired by completion of an approved program for licensure as a practical or professional nurse.

"Secretary" means the Secretary of the Department of Financial and Professional Regulation.

"Supervision" means monitoring and providing guidance in which the supervisor maintains accountability for tasks and/or professional responsibilities delegated to another.

"Task" means work not requiring professional knowledge, judgment and/or decision making.

Section 1300.15 Fees

The following fees shall be paid to the Department and are not refundable:

DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

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- a) Application Fees
- 1) The fee for application for a license as a registered professional nurse and a licensed practical nurse is \$50. In addition, applicants for an examination shall be required to pay, either to the Department or to the designated testing service, a fee covering the cost of determining an applicant's eligibility and providing the examination. Failure to appear for the examination on the scheduled date, at the time and place specified, after the applicant's application for examination has been received and acknowledged by the Division or the designated testing service, shall result in the forfeiture of the examination fee.
 - 2) The fee for a temporary restoration or endorsement permit for a license as a registered professional nurse and licensed practical nurse is \$25.
 - 3) The fee for a nurse externship permit is \$50.
- b) Renewal Fees
- The fee for the renewal of a license shall be calculated at the rate of \$30 per year.
- c) General Fees
- 1) The fee for the restoration of a license other than from inactive status is \$20 plus payment of all lapsed renewal fees, but not to exceed \$125.
 - 2) The fee for the issuance of a duplicate license, for the issuance of a replacement license, for a license which has been lost or destroyed or for the issuance of a license with a change of name or address other than during the renewal period is \$20. No fee is required for name and address changes on Division records when no duplicate license is issued.
 - 3) The fee for a certification of a licensee's record for any purpose is \$20.
 - 4) The fee to have the scoring of an examination authorized by the Division reviewed and verified is \$20 plus any fees charged by the applicable testing service.
 - 5) The fee for a wall certificate showing licensure shall be the actual cost of producing such certificate.

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- 6) The fee for a roster of persons licensed as registered professional nurses or licensed practical nurses in this State shall be the actual cost of producing such a roster.
- 7) The fee for processing a fingerprint card by the Department of State Police is the cost of processing which shall be made payable to the State Police Services Fund and shall be remitted to the State Police for deposit into the Fund.

Section 1300.20 Application for Examination or Licensure

- a) Each applicant shall file, with the Division or the testing service designated by the Division, a completed, signed application, on forms supplied by the Division, that includes:
 - 1) proof of graduation from a nursing education program that meets the requirements of Section 1300.40 of this Part;
 - 2) a complete work history within the last 5 years from a practical nurse education program or a professional nurse education program, whichever came first;
 - 3) verification of fingerprint processing from the Illinois Department of State Police, or its designated agent. (Practical nurses licensed in Illinois are not required to be fingerprinted when applying for a license as a registered professional nurse.) Applicants shall contact the Illinois Department of State Police, or its designated agent, for fingerprint processing. Out-of-state residents unable to utilize the State Police fingerprint process may submit to the Division one set of fingerprint cards issued by the Illinois Department of State Police and one set of fingerprint cards issued by the Federal Bureau of Investigation, accompanied by the specified processing fee pursuant to Section 1300.15. Fingerprints shall be taken within the 60 days prior to application;
 - 4) the required fees set forth in Section 1300.15 of this Part;
 - 5) for applicants educated outside the United States or its territories, the following:

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- A) a credentials evaluation report of the applicant's foreign nursing education from one of the following Division-approved credentialing services:
 - i) Commission on Graduates of Foreign Nursing Schools (CGFNS) Credentials Evaluation Service (CES);
 - ii) Educational Records Evaluation Service; or
 - iii) International Education Research Foundation;
 - B) if the applicant's first language is not English, certification of passage of the Test of English as a Foreign Language (TOEFL). The minimum passing score on the paper-based test is 560, computer-based test is 220, and internet-based test is 83. The Division may, upon recommendation from an approved credentials evaluation service, waive the requirement that the applicant pass the TOEFL examination if the applicant submits verification of the successful completion of a nursing education program conducted in English or the passage of an approved licensing examination given in English;
- 6) official transcripts of theory and clinical education prepared by an official of the military for a practical nurse applicant who has received practical nursing education in the military service. This education must meet the standards set forth in Section 1300.40; and
- 7) verification from the jurisdictions in which the applicant was originally licensed, current state of licensure and any other jurisdiction in which the applicant has been actively practicing within the last 5 years, if applicable, stating:
- A) the time during which the applicant was licensed in that jurisdiction, including the date of original issuance of the license; and
 - B) whether the file on the applicant contains any record of disciplinary actions taken or pending.

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- b) Any applicant who fails to demonstrate fulfillment of the education requirements shall be notified in writing and must satisfy the deficiency before being granted temporary authority to practice nursing, as permitted under Section 5-15(g) or (i) of the Act, or being admitted to the examination. Deficiencies in nursing theory and/or clinical practice may be removed by taking the required courses in an approved nursing education program.
- c) When the applicant has completed the nursing education program in less than the usual length of time through advanced standing or transfer of credits from one institution to another, the Director of nursing education shall include an explanation in the certification.
- d) Pursuant to Section 10-35 of the Act, when an applicant has completed a nonapproved program that is a correspondence course or a program of nursing that does not require coordinated or concurrent theory and clinical practice, the Division may grant a license to an applicant who has applied in accordance with subsection (a) and who has received an advanced graduate degree in nursing from an approved program with concurrent theory and clinical practice or who is currently licensed in another state and has been actively practicing in clinical nursing for a minimum of 2 years. Clinical practice for purposes of this Section means nursing practice that involves direct physical (psychomotor and psychosocial) patient (client) care with an acute care facility.
 - 1) Clinical practice areas that would meet the requirements for clinical practice include the following:
 - A) Adult Medical Surgical Nursing
 - B) Pediatric Nursing
 - C) Maternity Nursing
 - D) Emergency Nursing
 - E) Critical Care Nursing
 - F) Post-Anesthesia Care Nursing

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- 2) Clinical practice shall not include:
 - A) Telephone or Triage Nursing
 - B) Patient Education (i.e., diabetic education)
 - C) Patient Counseling
- 3) A year of clinical practice consists of not less than 1500 hours of direct patient care.
- 4) The Board of Nursing will review clinical practice documentation that does not meet the requirements of this subsection (d).
- e) Credentials of education and licensure, if not in English, shall be accompanied by a certified translation.
- f) After filing the original application, any change of name must be supported by an affidavit satisfactory to the Division.
- g) If an applicant has taken and passed the National Council Licensure Examination (NCLEX) in accordance with Section 1300.25 of this Part, the applicant shall file an application in accordance with subsection (a) and shall have the examination scores submitted to the Division directly from the testing entity or from the state of original licensure.

Section 1300.25 The Licensure Examination

- a) The Board shall make recommendations to the Division regarding content, design, and contractor for a licensure examination. A licensure examination contract shall be negotiated and approved by the Division.
- b) Registered Professional Nurse Examination
 - 1) The passing grade on the National Council Licensure Examination (NCLEX) for registered professional nurses shall be based on an ability scale designed to measure minimum professional nurse competency. A pass/fail grade will be assigned.

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- 2) A registered professional nurse applicant who fails the examination is not eligible for licensure. If the applicant has been practicing professional nursing under Section 5-15(i) of the Act, the applicant shall discontinue practice until a passing grade is achieved on the examination and a license has been received from the Division.
 - 3) If the examination is not passed within 3 years from the date of application, regardless of jurisdiction in which the examination was written, the applicant shall not be permitted to retake the examination until such time as the applicant has successfully recompleted the entire approved nursing education program as set forth in Section 1300.40(f)(9) or completion of an approved remedial nursing education program or course as set forth in Section 1300.35. Upon successful completion of the approved nursing education program or remedial program or course, the applicant shall submit proof to the Division. This subsection (b)(3) does not apply to applicants who are licensed in another jurisdiction that utilizes the examination set forth in 68 Ill. Adm. Code 1320.25.
 - 4) If 3 years from the date of original application has lapsed, the applicant shall be required to submit a new application to the Division pursuant to Section 10-30 of the Act and provide evidence of meeting the requirements in force at the time of the new application.
- c) Licensed Practical Nurse Examination
- 1) The passing grade on the National Council Licensure Examination (NCLEX) for licensed practical nurses shall be based on an ability scale designed to measure minimum licensed practical nurse competency. A pass/fail grade will be assigned.
 - 2) A licensed practical nurse applicant who fails the examination is not eligible for licensure. If the applicant has been practicing as a licensed practical nurse under Section 5-15(g) of the Act, the applicant shall discontinue practice until a passing grade has been achieved on the examination and a license has been received from the Division.
 - 3) If the examination is not passed within 3 years from the date of the first examination taken, regardless of the jurisdiction in which the examination was written, the applicant shall not be permitted to retake the examination

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until such time as the applicant has successfully recompleted the entire approved nursing education program as set forth in Section 1300.40(f)(10) or completed an approved remedial licensed practical nurse education program or course as set forth in Section 1300.35. Upon successful completion of the approved nursing education program or remedial program or course, the applicant shall submit proof to the Division. This subsection (c)(3) does not apply to applicants licensed in another jurisdiction that utilizes the examination set forth in 68 Ill. Adm. Code 1320.25.

- 4) If 3 years from the date of original application has lapsed, the applicant shall be required to submit a new application to the Division pursuant to Section 10-30 of the Act.

d) Eligibility for Licensed Practical Nurse Examination

Any candidate who is unable to pass the registered professional nurse examination will not be permitted to write the practical nurse examination until or unless that applicant has graduated from an approved practical nursing education program.

Section 1300.27 Application for Licensure on the Basis of Examination (Repealed)

Section 1300.30 Licensure by Endorsement

- a) Each applicant who is licensed in another jurisdiction shall file a completed, signed application for licensure on the basis of endorsement, on forms supplied by the Division. The application shall include:
 - 1) the required fee in Section 1300.15 of this Part;
 - 2) proof of graduation from a nursing education program that meets the requirements of Section 1300.40;
 - 3) proof of passage of an examination recognized by the Division, upon recommendation of the Board (i.e., National Council Licensure Examination for professional nurses or practical nurses, or State Board Test Pool Examination for professional nurses or practical nurses);
 - 4) a complete work history within the last 5 years from a practical nurse

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education program or a professional nurse education program, whichever came first;

- 5) verification of fingerprint processing from the Illinois Department of State Police, or its designated agent. (Practical nurses licensed in Illinois are not required to be fingerprinted when applying for a license as a registered professional nurse.) Applicants shall contact the Illinois Department of State Police, or its designated agent, for fingerprint processing. Out-of-state residents unable to utilize the State Police fingerprint process may submit to the Division one set of fingerprint cards issued by the Illinois Department of State Police and one set of fingerprint cards issued by the Federal Bureau of Investigation, accompanied by the specified processing fee pursuant to Section 1300.15. Fingerprints shall be taken within the 60 days prior to application;
- 6) for registered nurse applicants who received education outside of the United States:
 - A) a credentials evaluation report of the applicant's foreign nursing education from one of the following Division-approved credentialing services:
 - i) Commission on Graduates of Foreign Nursing Schools (CGFNS) Credentials Evaluation Service (CES);
 - ii) Educational Records Evaluation Service; or
 - iii) International Education Research Foundation;
 - B) if the applicant's first language is not English, certification of passage of the Test of English as a Foreign Language (TOEFL). The minimum passing score on the paper-based test is 560, computer-based test is 220, and internet-based test is 83. The Division may, upon recommendation from an approved credentials evaluation service, waive the requirement that the applicant pass the TOEFL examination if the applicant submits verification of the successful completion of a nursing education program conducted in English or the passage of an approved licensing examination given in English;

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- 7) official transcripts of theory and clinical education prepared by an official of the military for a practical nurse applicant who has received his/her education in the military service. Education must meet the standards for education as set forth in Section 1300.40;
 - 8) verification of licensure status from the jurisdiction in which the applicant was originally licensed, current licensure and any other jurisdiction in which the applicant has been actively practicing within the last 5 years; and
 - 9) a certified translation for all credentials of education and licensure, if not in English.
- b) After filing the original application, any change of name must be supported by an affidavit satisfactory to the Division.
 - c) Deficiencies in nursing theory and/or clinical practice may be removed by taking the required courses in an approved nursing education program.
 - d) Compliance with the provisions of Section 1300.25(b)(3) and (c)(3) for each registered professional nurse applicant and each practical nurse applicant, respectively, shall be a requirement for Illinois nurse licensure by endorsement.
 - e) Eligibility for Practical Nurse Endorsement
A candidate who is unable to pass the registered professional nurse examination in another jurisdiction and is allowed to write the practical nurse examination in that jurisdiction and is subsequently licensed as a practical nurse in that jurisdiction is not eligible for endorsement in Illinois unless and until the candidate has graduated from an approved practical nursing education program.
 - f) Individuals applying for licensure by endorsement may apply to the Division, on forms provided by the Division, to receive a Temporary Endorsement Permit pursuant to Section 10-40 of the Act. The permit shall allow the applicant to work pending the issuance of a license by endorsement.
 - 1) The temporary endorsement permit application shall include:
 - A) a completed, signed endorsement application, along with the

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required endorsement licensure fee as set forth in Section 1300.15 of this Part. All supporting documents shall be submitted to the Division before a permanent license by endorsement shall be issued;

- B) photostatic copies of all current active nursing licenses and/or temporary permits/licenses from other jurisdictions. Current active licensure in at least one United States jurisdiction is required. Each applicant's license will be checked on the National Council Network (NCNET) disciplinary data bank to determine if any disciplinary action is pending on the applicant's file;
 - C) verification that fingerprints have been submitted to the Division or the Illinois Department of State Police or its designated agent; and
 - D) the fee for a temporary permit as required in Section 1300.15 of this Part.
- 2) The Division shall issue a temporary endorsement permit no later than 14 days after receipt of a completed application as set forth in subsection (f)(1).
- 3) Temporary permits shall be terminated upon:
- A) the issuance of a permanent license by endorsement;
 - B) failure to complete the application process within 6 months from the date of issuance of the permit;
 - C) a finding by the Division that the applicant has been convicted of any crime under the laws of any jurisdiction of the United States which is a:
 - i) felony; or
 - ii) misdemeanor directly related to the practice of nursing within the last 5 years;

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- D) a finding by the Division that the applicant has had a license or permit related to the practice of nursing revoked, suspended or placed on probation by another jurisdiction, if at least one of the grounds is substantially equivalent to grounds in Illinois, within the last 5 years; or
 - E) a finding by the Division that the applicant does not meet the licensure requirements for endorsement as set forth in this Section. The Division shall notify the applicant in writing of such termination.
- 4) The Division shall notify the applicant by certified or registered mail of the intent to deny licensure pursuant to subsections (f)(3)(D) and (E) and/or Section 10-30 of the Act.
 - 5) A temporary permit shall be renewed beyond the 6-month period, upon recommendation of the Board and approval of the Director, due to hardship, defined as:
 - A) serving full-time in the Armed Forces;
 - B) an incapacitating illness as documented by a currently licensed physician;
 - C) death of an immediate family member; or
 - D) extenuating circumstances beyond the applicant's control as approved by the Director.

Section 1300.35 Remedial Education

Pursuant to Section 10-30 of the Act, no applicant (unless licensed in another jurisdiction) shall be issued a license as a registered nurse or practical nurse unless he/she has passed the examination set forth in Section 1300.25 within 3 years after filing an application, unless the applicant submits proof of successful completion of the entire nursing education program or one of the following remedial nursing education requirements:

- a) Registered nurse and practical nurse applicants licensed in another U.S. jurisdiction on the basis of successful completion of the national licensure

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examination may complete the current nursing practice update course set forth in Section 1300.41.

- b) Registered nurse applicants, not licensed in another jurisdiction, may enroll in an approved professional nursing education program's medical/surgical theory and clinical course that includes the content and clinical experiences as set forth in Appendix A (Minimal Skills List for Registered Nurses) and Appendix B (Minimal Assignment List for Registered Nurses) of this Part.
- c) Practical nurse applicants, not licensed in another jurisdiction, may enroll in an approved practical nursing education program's medical/surgical theory and clinical course that includes the content and clinical experiences as set forth in Appendix C (Minimal Skills List for Licensed Practical Nurses) and Appendix D (Minimal Assignment List for Licensed Practical Nurses) of this Part.
- d) Registered nurse applicants and practical nurse applicants may participate in an individual self-study plan developed by an approved nursing education program in Illinois that includes theory and coordinated clinical practice components.
 - 1) The theory component shall have the following minimum components:
 - A) Assessment of theory learning needs through use of published tests measuring knowledge in medical/surgical nursing, growth and development across the life span and pharmacology;
 - B) Specification by a nursing education program of units of content, objectives and unit plans for study;
 - C) Documented hours equivalent to at least 48 contact hours of theory for registered nurse applicants and 32 contact hours of theory for licensed practical nurse applicants;
 - D) Use of a medical/surgical nursing text currently used in basic nursing education programs;
 - E) A means for demonstrating achievement of objectives.
 - 2) The clinical practice component shall be sponsored by a nursing education program. The clinical practice experience shall include the following

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minimum components:

- A) Assessment of skill learning needs, arranged by the applicant with the nursing education program prior to assignment to a unit of the institution;
 - B) Mastery of the registered nurse or practical nurse minimal skills set forth in Appendix A and C of this Part;
 - C) Clinical practice component of at least 96 contact hours for registered nurse applicants and 64 contact hours for licensed practical nurse applicants that includes the clinical practice experience set forth in Appendix B and D of this Part; and
 - D) Identification of a faculty member or registered nurse preceptor.
- e) Registered nurse or licensed practical nurse applicants, taking a self-study course approved by another state board, shall have the course approved by the Division in order for the course to be accepted. The clinical practice component of the course must be provided by an Illinois health care delivery institution and must incorporate the Division's minimal requirements for the clinical practice component. The nurse taking the course must make arrangements with the health care delivery institution for the clinical practice component and identification of a registered nurse preceptor.
- f) Individuals may request a review by the Board of any other pertinent documents or training that are not set forth in this Section for approval as meeting these requirements.

Section 1300.37 Nurse Externship

- a) Each applicant for a nurse externship permit shall file a completed, signed application on forms supplied by the Division. The application shall include:
 - 1) proof of graduation from a professional nursing educational program approved by the Division;

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- 2) verification of licensure as a professional nurse in another state or territory of the United States and proof of an active and unencumbered license in all of the states or territories in which the applicant is licensed;
 - 3) verification of an offer for employment in Illinois as a nurse extern and a copy of the written employment offer;
 - 4) a letter of acceptance from the Bilingual Nurse Consortium course or other comparable course approved by the Division;
 - 5) verification from the applicant's prospective employer stating that the prospective employer agrees to pay the full tuition for the Bilingual Nurse Consortium course or other comparable course approved by the Division;
 - 6) proof of taking the Test of English as a Foreign Language (TOEFL) with a minimum passing score on the paper-based test of 560, computer-based test of 220, or internet-based test of 83;
 - 7) proof that the applicant has not violated the provisions of Section 10-45 of the Act; and
 - 8) the required externship permit fee as set forth in Section 1300.15.
- b) The nurse extern must submit to the Division a mid-year exam as determined by the Bilingual Nurse Consortium that demonstrates proficiency towards passing the NCLEX.
 - c) A nurse extern shall be issued only one permit which shall expire one calendar year after it is issued.

Section 1300.40 Approval of Programs

- a) **Program Approval**
Institutions desiring to establish a new nursing program that would lead to meeting requirements for licensure, change the level of educational preparation of the program, or establish an extension of an existing program shall:
 - 1) Submit a letter of intent to the Division.

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- 2) Provide a feasibility study to the Division, on forms provided by the Division, that includes, at least, documentation of:
 - A) Need for the program in the community;
 - B) Need for graduates of the proposed program;
 - C) Availability of students;
 - D) Impact on existing nursing programs in a 50 mile radius of the proposed program;
 - E) Potential for qualified faculty;
 - F) Adequacy of clinical practicum and academic resources;
 - G) Financial commitment to support the initial and continuing program;
 - H) Community support of the scope and philosophy of the program;
 - I) Authorization by the appropriate education agency of the State of Illinois; and
 - J) A timetable for development of the program and the intended date of the first class beginning.
- 3) Identify a qualified nurse administrator with a minimum of a master's degree in nursing and with experience as a nurse educator.
- 4) Submit 15 copies of curriculum proposal including:
 - A) Program philosophy and objectives;
 - B) A plan of organization that is logical and internally consistent;
 - C) Proposed plans of study including requisite and elective courses with rationale;

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- D) Course outlines or syllabi for all nursing courses;
 - E) Student handbook;
 - F) Faculty qualifications;
 - G) Instructional approaches to be employed;
 - H) Evaluation plans for faculty and students; and
 - I) Facilities and utilization plan. (A site visit will be conducted by the Division prior to the program being approved.)
- b) Continued Program Approval
- 1) Nursing education programs shall submit annual evaluation reports to the Division on forms provided by the Division. These reports shall contain information regarding curriculum, faculty and students and other information as deemed appropriate by the Division.
 - 2) Full routine site visits shall be conducted by the Division for periodic evaluation. The visits will be utilized to determine compliance with the Act. Full routine site visits shall be announced. Unannounced site visits may be conducted when the Division obtains evidence that would indicate the program is not in compliance with the Act or this Part.
 - 3) A pass rate of graduates on the National Council Licensing Examination (NCLEX) shall be included in the annual evaluation of nursing education programs.
 - A) A pass rate of 75% of first time writers will be required for a school to remain in good standing.
 - B) A nursing education program having an annual pass rate of less than 75% of first time writers for one year will receive a written warning of noncompliance from the Division.
 - C) A nursing education program having an annual pass rate of less than 75% of first time writers for 2 consecutive years will receive a

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site visit for evaluation and recommendation by the Division and will be placed on probation for program revision in accordance with 68 Ill. Adm. Code 1110.

- D) The nursing education program shall have 2 years to demonstrate evidence of implementing strategies to correct deficiencies and bring the pass rate in line with the 75% criteria.
 - E) If 2 years after implementing the strategies to correct deficiencies in the program the annual pass rate is less than 75%, the program will be reevaluated. The program will be allowed to continue to operate on a probationary status or will be disapproved and removed from the list of Illinois approved nursing programs in accordance with 68 Ill. Adm. Code 1110.
- c) Major Curricular Revision
Nursing education programs desiring to make a major curricular revision, i.e., addition or deletion of content, a substantive change in philosophy or conceptual framework, or length of program, shall:
- 1) Submit a letter of intent to the Division; and
 - 2) Submit 15 copies of the proposed changes and new material to the Division, at least one term prior to implementation, for Board recommendation and Division approval in accordance with the standards set forth in subsection (f).
- d) Minor Curricular Revisions
Nursing education programs desiring to make curricular revisions involving reorganization of current course content but not constituting a major curriculum revision shall submit the proposed changes to the Division in their annual report.
- e) Organization and Administration
- 1) An institution responsible for conducting a nursing education program shall be authorized by the appropriate agency of the State of Illinois (e.g., Illinois Board of Higher Education, State Board of Education, Illinois Community College Board);

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- 2) The relationship of the nursing education program to other units within the sponsoring institution shall be clearly delineated with organizational charts on file with the Division;
 - 3) Nursing education programs shall have clearly defined lines of authority, responsibility and communication;
 - 4) Student input into determination of academic policies and procedures, curriculum planning and evaluation of faculty effectiveness shall be assured as evidenced by information such as student membership on policy and evaluation committees, policy statements and evaluation procedures;
 - 5) Nursing education program policies and procedures shall be in written form, congruent with those of the sponsoring institution, and shall be reviewed by members of the program on a regular schedule;
 - 6) The philosophy, purpose, and objectives of the nursing education program shall be stated in writing and shall be consistent with the sponsoring institution and current social, nursing and educational trends and the Act.
- f) Curriculum and Instruction
- 1) The curriculum shall be based upon the stated program purpose, philosophy and objectives;
 - 2) Levels of progression in relation to the stated program objectives shall be established;
 - 3) Coordinated clinical and theoretical learning experiences shall be consistent with the program objectives;
 - 4) Curricular content shall reflect contemporary nursing practice encompassing major health needs of all age groups;
 - 5) The entire curriculum shall be based on sound nursing, education and instructional principles;
 - 6) The curriculum may include a Nursing Student Internship/Cooperative

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Education Course that meets the following minimum requirements:

- A) The course must be available with the nursing major and identified on the transcript.
 - B) Faculty must meet approved nursing education program qualifications and hold faculty status with educational unit.
 - C) Clinical content must be coordinated with theoretical content.
 - D) Clinical experience must be under direct supervision of qualified faculty as set forth in subsection (g) or with a registered nurse preceptor. The nurse preceptor shall be approved by the program and shall work under the direction of a nurse faculty member.
 - E) Students shall not be permitted to practice beyond educational preparation or without faculty supervision.
 - F) Course shall be based on program purpose philosophy, objectives and framework.
 - G) Course evaluation shall be consistent with plan for program evaluation.
 - H) Articles of affiliation shall clearly delineate student, educational institution and health care agency roles and responsibilities;
- 7) The curriculum shall be evaluated by faculty with student input according to a stated plan;
 - 8) The program shall be approved by the appropriate educational agency;
 - 9) Curriculum for professional nursing programs shall:
 - A) Include, at a minimum, concepts in anatomy, physiology, chemistry, physics, microbiology, sociology, psychology, communications, growth and development, interpersonal relationships, group dynamics, cultural diversity, pharmacology and the administration of medication, nutrition and diet therapy,

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patho-physiology, ethics, nursing history, trends and theories, professional and legal aspects of nursing, leadership and management in nursing, and teaching-learning theory;

- B) Not preclude a flexible curriculum that would provide appropriate integration of the nursing subject matters;
 - C) Provide theoretical and clinical instruction in all areas of nursing practice in the promotion, prevention, restoration, and maintenance of health in individuals and groups across the life span and in a variety of clinical settings;
 - D) Incorporate the nursing process as an integral part of the curriculum;
 - E) Prepare the student to assume beginning level professional nursing positions;
 - F) Be at least 2 academic years in length;
 - G) Prepare the professional nurse to start intravenous therapy;
- 10) Curriculum for the practical nursing programs shall:
- A) Include, at a minimum, basic concepts of anatomy, physiology, chemistry, microbiology, physics, communications, growth and development, interpersonal relationships, psychology, sociology, cultural diversity, pharmacology (pharmacology course standards are set forth in Section 1300.44), nutrition and diet therapy, vocational, legal and ethical aspects of nursing;
 - B) Not preclude a flexible curriculum that would provide appropriate integration of the nursing subject areas;
 - C) Provide basic theoretical and clinical instruction in all areas of nursing practice in the promotion, prevention, restoration, and maintenance of health in individuals and groups across the life span and in a variety of clinical settings;

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- D) Incorporate the nursing process as an integral part of the curriculum;
 - E) Prepare the student to assume entry level practical nursing positions to assist clients with normal and common health problems through use of basic nursing skills;
 - F) Be at least one academic year in length; and
 - G) If a military program, consist of a minimum of 36 to 40 weeks of theory and clinical instruction incorporating the curriculum as outlined in subsection (f)(10)(A).
- g) Faculty
- 1) The institution responsible for conducting the nursing program and the Nurse Administrator of the nursing education program shall be responsible for ensuring that the individual faculty members are academically and professionally qualified.
 - 2) Nursing education programs shall be administered by the Nurse Administrator of the nursing education program.
 - 3) The Nurse Administrator and faculty of a nursing education program shall be currently licensed as registered professional nurses in Illinois.
 - 4) The Nurse Administrator of a nursing education program shall have at least:
 - A) 2 years experience in clinical nursing practice;
 - B) 2 years of experience as an instructor in a nursing education program; and
 - C) a master's degree or higher with a major in nursing.
 - 5) Nurse faculty of a professional nursing program shall have:
 - A) At least 2 years experience in clinical nursing practice;

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- B) A master's degree or higher with a major in nursing.
- 6) Nurse faculty of a practical nursing program shall have:
- A) At least 2 years experience in clinical nursing practice; and
 - B) A baccalaureate degree or higher with a major in nursing.
- 7) The requirements of subsections (g)(4), (5) and (6) shall not affect incumbents as of the original date these requirements were adopted, January 14, 1980.
- 8) Nurse Administrators of nursing education programs shall be responsible for:
- A) Administration of the nursing education program;
 - B) Liaison with other units of the sponsoring institution;
 - C) Preparation and administration of the budget;
 - D) Facilitation of faculty development and performance review;
 - E) Facilitation and coordination of activities related to academic policies, personnel policies, curriculum, resource facilities and services, and program evaluation;
 - F) Notification to the Division of program changes.
- 9) Faculty shall be responsible for:
- A) Development, implementation and evaluation of the purpose, philosophy and objectives of the nursing education program;
 - B) Design, implementation and evaluation of curriculum for the nursing education program;
 - C) Participation in academic advising of students;

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- D) Development and evaluation of student policies; and
 - E) Evaluation of student performance in meeting the objectives of the program.
- 10) Faculty shall participate in:
- A) Selection, promotion and tenure activities;
 - B) Academic activities of the institution;
 - C) Professional and health related community activities;
 - D) Self-development activities for professional and personal growth;
 - E) Research and other scholarly activities for which qualified; and
 - F) Activities that maintain educational and clinical expertise in areas of teaching.
- 11) Clinical experience must be under direct supervision of qualified faculty as set forth in this subsection (g) or with a registered nurse preceptor. The nurse preceptor shall be approved by the parent institution and shall work under the direction of a nurse faculty member.
- 12) The ratio of students to faculty in the clinical area shall be appropriate to the clinical learning experience:
- A) When under direct supervision of the faculty, the ratio shall not exceed 10 to 1.
 - B) When a registered nurse preceptor is used, the ratio of students to faculty member shall not exceed 12 to 1.
- h) Financial Support, Facilities, Records
- 1) Adequate financial support for the nursing education program, faculty and other necessary personnel, equipment, supplies and services shall be in

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evidence in the program budget.

- 2) The faculty of the nursing education program and the staff of cooperating agencies used as sites for additional theory and clinical experience shall work together for quality of patient care.
- 3) Articles of Affiliation
 - A) The nursing education program shall have Articles of Affiliation between the nursing education program and each clinical facility that define the rights and responsibilities of each party, including agreements on the role and authority of the governing bodies of both the clinical site and the nursing education program.
 - B) If portions of the required clinical or theoretical curriculum are offered at different geographical sites or by distance learning, the curriculum must be planned, supervised, administered and evaluated in concert with appropriate faculty committees, department chairmen and administrative officers of the parent school.
- 4) There shall be adequate facilities for the nursing program for both academic and clinical experiences for students.
- 5) There shall be access to learning resource facilities, including library and multi-media technology, that are reasonably sufficient for the curriculum and the number of students enrolled in the nursing education programs.
- 6) Cooperating agencies shall be identified to the Division and shall be suitable to meet the objectives of the program.
- 7) Addition or deletion of cooperating agencies shall be reported in writing to the Division on the program annual report.
- 8) The nursing program's policies and procedures shall not violate constitutional rights and shall be written and available to faculty and students.
- 9) Permanent student records that summarize admissions, credentials, grades

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and other records of performance shall be maintained by the program.

- i) Faculty Variance
 - 1) Variances for faculty with a graduate degree in a field other than nursing will be granted based on the following:
 - A) the individual has a bachelor's degree in nursing;
 - B) the individual has at least two years of experience in clinical nursing practice;
 - C) the individual has a degree in a field that directly relates to the course he or she will be teaching;
 - D) at least 80% of the school's undergraduate nursing faculty holds a master's degree in nursing.
 - 2) Variances for faculty without a graduate degree will be granted based on the following:
 - A) the faculty member is within one year of completion of the master's in nursing;
 - B) the faculty member is continuously enrolled in the master's in nursing program;
 - C) a plan exists for the timely completion of the master's program; and
 - D) at least 80% of the school's undergraduate nursing faculty holds a master's degree in nursing.
 - 3) A school that has received a variance must notify the Board of any changes related to that faculty member, including notification that the faculty member has received the graduate degree.
- j) Discontinuance of a Nursing Program

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- 1) A nursing education program shall:
 - A) Notify the Division, in writing, of its intent to discontinue its program;
 - B) Continue to meet the requirements of the Act and this Part until the official date of termination of the program;
 - C) Notify the Division of the date on which the last student will graduate and the program terminate; and
 - D) Assume responsibility for assisting students to continue their education in the event of closing of the school prior to the final student graduating.
 - 2) Upon closure of the nursing education program, the institution shall notify the Division, in writing, of the location of student and graduate records storage.
- k) Disapproval of a Program
- 1) The following are grounds for disapproval of a nursing education program:
 - A) A violation of any provision of the Act;
 - B) Fraud or dishonesty in applying for approval of a nursing education program;
 - C) Failure to continue to meet criteria of an approved nursing education program as set forth in this Section; or
 - D) Failure to comply with recommendations made by the Division as a result of a site visit.
 - 2) Upon written notification of the Division's proposed action, the nursing education program may:
 - A) Submit a written response;

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- B) Request a hearing before the Board.
- 1) Out-of-state Education Programs Seeking Student Nurse Clinical Placement in Illinois
- 1) Out-of-state nursing education programs offering clinical experiences in Illinois are expected to maintain the standards for approved nursing education programs set forth in this Section.
 - 2) Programs desiring to seek approval for student nurse clinical placement in Illinois shall submit the following documents:
 - A) Evidence of approval/accreditation by the Board of Nursing or other appropriate approval bodies in the state in which the institution is located.
 - B) A letter requesting approval to provide the clinical offering that indicates the time-frame during which the clinical experience will be conducted, the clinical agencies and the clinical units to be utilized.
 - C) A course syllabus for the clinical experiences to be offered that specifies the related objectives of the offering.
 - D) A copy of the executed contractual agreement between the academic institution and the clinical facility.
 - E) A faculty qualification and/or preceptor form for individuals providing instruction in Illinois.
 - 3) Faculty
 - A) The institution responsible for conducting the nursing program and the administrator of the nursing education program shall be responsible for ensuring that the individual faculty members are academically and professionally qualified.
 - B) Nurse faculty of a professional nursing program shall have:

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- i) at least 2 years experience in clinical nursing practice; and
 - ii) a master's degree or higher with a major in nursing.
- C) Nurse faculty of a practical nursing program shall have:
 - i) at least 2 years experience in clinical nursing practice; and
 - ii) a baccalaureate degree or higher with a major in nursing.
- D) The faculty shall be currently licensed as registered professional nurses in Illinois.
- E) Clinical experience must be under direct supervision of qualified faculty as set forth in subsection (g) or with a registered nurse preceptor. The nurse preceptor shall be approved by the parent institution and shall work under the direction of a nurse faculty member.
- F) The ratio of students to faculty in the clinical area shall be appropriate to the clinical learning experience.
 - i) When under direct supervision of the faculty, the ratio shall not exceed 10 to 1.
 - ii) When a registered nurse preceptor is used, the ratio of students to faculty member shall not exceed 12 to 1.
- 4) Approval for clinical offerings by out-of-state nursing programs shall be approved for a period of 2 years. A program representative may request renewal of the approval every 2 years. In order to renew, the program shall submit a written report that provides updated and current data as required by this subsection (1).
- 5) A written report of current clinical offerings and current data shall be submitted to the Division annually. Faculty qualification and preceptor forms shall be submitted when instructors are added or changed.

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- 6) Failure to comply with the requirements set forth in this Part shall result in the immediate withdrawal of approval of the clinical experience offering.
- m) If the name of the program is changed or the institution in which the program is located or with which it is affiliated changes its name, the program shall notify the Division within 30 days after the name change. If the Division is not notified within the 30 days, the program's approval may be withdrawn.
- n) The Division has determined that nurse programs approved through the National League of Nursing or the Commission on Collegiate Accreditation meet the requirements set forth in this Section, except for those programs whose curriculums do not include a concurrent theory and clinical practice education component as required by Section 10-35 of the Act.

Section 1300.41 Approval of Current Nursing Practice Update Course

- a) A current nursing practice update course (the "course") is a planned educational offering which provides an updating of content specifically designed for registered and/or practical nurses preparing to re-enter nursing practice.
- b) To be approved by the Division, a course shall meet the following minimum requirements:
 - 1) The sponsoring institution must have access to adequate facilities and resources to implement both the required theoretical and clinical components of the course.
 - 2) The course shall be conducted by:
 - A) a coordinator with a baccalaureate major in nursing and two years of current clinical experience in nursing practice;
 - B) faculty with 2 years of current clinical experience in nursing who have demonstrated competency in teaching/learning. This experience may be either from academics or work experience (i.e., coursework, staff development, nursing faculty of an approved nursing program).
 - 3) The course must be based on clearly stated objectives which are realistic

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for the time allotted in the course, appropriate for the course content, and includes both theoretical and clinical practice expectations as set forth in Appendices A, B, C and D.

- 4) The nursing content shall provide information on the Act and this Part, the American Nurses' Association (ANA) Standards of Practice, the ANA Code of Ethics, current opportunities for nursing practice, and current climate for practice, and nursing process.
 - 5) Course content must be based on current nursing care concepts and skills relevant to the audience for which it is intended, registered nurse or licensed practical nurse.
 - 6) The course shall include both planned and supervised clinical experiences and theoretical content consistent with the stated course objectives.
 - 7) The theory component for registered nurses shall be at least 48 contact hours and for licensed practical nurses at least 32 contact hours.
 - 8) The clinical component for registered nurses shall be at least 96 contact hours and for licensed practical nurses at least 64 contact hours.
- c) Any institution desiring to have its courses approved by the Division shall file with the Division at least 12 weeks prior to anticipated implementation 15 copies of all relevant information bearing on its compliance with the above criteria plus the following:
- 1) The name of the sponsoring institution;
 - 2) The name of the designated course coordinator responsible for the course and a brief summary of the individual's qualifications;
 - 3) A list of the members of the educational staff, their qualifications for teaching the courses and their responsibilities.
- d) The Board shall evaluate the submitted materials at its next regularly scheduled meeting, at which time the course coordinator from the applying sponsoring institution may make an oral presentation. The Board shall make a recommendation to the Director for approval or disapproval and the Division will

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notify the sponsoring institution of its decision.

- e) The course shall be reevaluated every five years.

Section 1300.42 Standards of Professional Conduct for Registered Professional Nurses

- a) The Registered Professional Nurse shall:
- 1) Practice in accordance with the Act and this Part;
 - 2) Uphold federal and State regulations regarding controlled substances and alcohol;
 - 3) Practice nursing only when in functional physical and mental health;
 - 4) Be accountable for his or her own nursing actions and competencies;
 - 5) Practice or offer to practice only within the scope permitted by law and within the licensee's own educational preparation and competencies.
 - 6) Seek instruction and supervision from qualified individuals when implementing new or unfamiliar nursing activities;
 - 7) Delegate tasks only to individuals whom the licensee knows or has reason to know are competent by education or experience to perform those tasks;
 - 8) Delegate professional responsibilities only to individuals whom the licensee knows or has reason to know are licensed to perform;
 - 9) Be accountable for the quality of nursing care delegated to others;
 - 10) Report unsafe, unethical, or illegal health care practice or conditions to appropriate authorities;
 - 11) Assume responsibility for continued professional growth and education to reflect knowledge and understanding of current nursing care practice.
- b) Violations of this Section may result in discipline as specified in Section 10-45 of the Act. All disciplinary hearings shall be conducted in accordance with 68 Ill.

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Adm. Code 1110.

Section 1300.43 Standards of Professional Conduct for Licensed Practical Nurses

- a) The Licensed Practical Nurse shall:
- 1) Practice in accordance with the Nursing and Advanced Practice Nursing Act and this Part;
 - 2) Uphold federal and State regulations regarding controlled substances and alcohol;
 - 3) Practice nursing only when in functional physical and mental health;
 - 4) Be accountable for his or her own nursing actions and competencies;
 - 5) Practice or offer to practice only within the scope permitted by law and within the licensee's own educational preparation and competencies;
 - 6) Perform nursing actions only under direction except as stated in the Act in the event of an emergency in which an individual's life or health are in imminent danger;
 - 7) Seek instruction and supervision from qualified individuals when implementing new or unfamiliar nursing activities;
 - 8) Report unsafe, unethical and illegal health care practice or conditions to appropriate authorities;
 - 9) Assume responsibility for continued professional growth and education to reflect knowledge and understanding of current nursing care practice;
- b) Violations of this Section may result in discipline as specified in Section 10-45 of the Act. All disciplinary hearings shall be conducted in accordance with 68 Ill. Adm. Code 1110.

Section 1300.44 Standards for Pharmacology/Administration of Medication Course for Practical Nurses

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- a) Approved licensed practical nursing programs shall include a course designed to educate practical nursing students and/or licensed practical nurses to administer medications via oral, topical, subcutaneous, intradermal and intramuscular routes under the direction of a registered professional nurse, licensed physician, or licensed dentist that contains the following minimum components:
 - 1) Prerequisites
 - A) Basic computational math and high school algebra with proficiency in the following concepts, including, but not limited to, ratios and proportions and metric, apothecary and household measurements as documented via examination and/or coursework completed.
 - B) Basic scientific knowledge, including, but not limited to, microbiology/asepsis and anatomy and physiology with a basic understanding of fluid and electrolytes, the inflammatory response, the immune response, and body systems as documented via examination or coursework.
 - 2) Pharmacology
 - A) An introduction to pharmacology including the areas of:
 - i) Terminology and abbreviations
 - ii) Federal and State laws related to pharmacology (e.g., Illinois Controlled Substances Act [720 ILCS 570]; federal Food, Drug and Cosmetic Act (21 USC 360))
 - iii) Drug standards and references (i.e., United States Pharmacopoeia/National Formulary)
 - iv) Generic versus brand name drugs
 - v) Misuse/abuse of drugs
 - B) Classifications of drugs (with commonly used examples) including:

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- i) Action/Physiological effect
 - ii) Interactions
 - iii) Side effects and contraindications
 - iv) Dosages and routes
 - v) Nursing implications (including legal implications)
- 3) Administration of Medication
- A) Following procedures of safety as described in subsections (a)(3)(C), (D), (E), and (F) in administering medications.
 - B) Developmental adaptations for administering medications to patients of all ages.
 - C) Assessment of patient condition.
 - D) Planning for administration of medication including:
 - i) Checking for doctor's order
 - ii) Securing proper equipment
 - iii) Verifying proper packaging of medication
 - E) Implementation of administration of medication including:
 - i) Site selection
 - ii) Verifying route of administration
 - iii) Administering the medication
 - iv) Recording medication administration

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- v) Patient education for compliance
- F) Evaluation of patient response including:
 - i) Effects/side effects/allergic responses
 - ii) Recording/reporting of effects
- b) These requirements shall not preclude a flexible curriculum that would provide appropriate integration into other practical nursing courses.
- c) The course/instruction shall include at least 32 hours of theory and 64 hours of lab and clinical with administration of medication to patients performed under direct supervision of qualified faculty as set forth in subsection (d) of this Section.
- d) Nurse faculty of pharmacology and administration of medication courses shall have:
 - 1) At least two years experience in clinical nursing practice;
 - 2) A baccalaureate degree with a major in nursing;
 - 3) A current Illinois Registered Professional Nurse license.
- e) Approved licensed practical nursing programs shall include a curriculum designed to educate practical nursing students and/or licensed practical nurses to perform the following activities related to intravenous therapy under the supervision of a registered professional nurse, licensed physician, or licensed dentist:
 - 1) Monitoring the flow rate of existing intravenous lines.
 - 2) Regulating peripheral fluid infusion rates.
 - 3) Observing sites for local reaction and reporting results to the registered nurse.
 - 4) Discontinuing intravenous therapy with an order from a physician.
 - 5) Adding non-medicated solutions to existing patent lines.

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- 6) Changing peripheral intravenous tubings and dressings.
- 7) Monitoring existing transfusions of blood and blood components.
- 8) Documenting intravenous procedures performed and observations made.

Practical nursing programs have until August 2000 to add the intravenous therapy content set forth in this subsection (e) to the nursing program's curriculum.

- f) This curriculum may prepare the licensed practical nurse to start intravenous therapy.
- g) The curriculum shall not include the following procedures:
 - 1) Administering chemotherapeutic agents via intravenous routes.
 - 2) Starting or adding blood or blood components.
 - 3) Administering medications via intravenous push.
 - 4) Adding medication to existing intravenous infusions, including heparin in heparin locks.

Section 1300.45 Renewals

- a) Every license issued under the Act shall expire on May 31 of each even numbered year for Registered Professional Nurse and on January 31 of each odd numbered year for Licensed Practical Nurse. The holder of a license may renew such license during the month preceding the expiration date thereof by paying the required fee.
- b) It is the responsibility of each licensee to notify the Division of any change of address. Failure to receive a renewal form from the Division shall not constitute an excuse for failure to pay the renewal fee.
- c) Practice on a license which has expired is the unlicensed practice of nursing and shall be grounds for discipline pursuant to Section 25 of the Act.

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Section 1300.48 Restoration

- a) A licensee seeking restoration of a license that has expired for 5 years or less shall have the license restored upon payment of the fees required by Section 1300.15 of this Part.
- b) A licensee seeking restoration of a license that has been placed on inactive status for 5 years or less shall have the license restored upon payment of the current renewal fee set forth in Section 1300.15(b) of this Part.
- c) A licensee seeking restoration of a license after it has expired or been placed on inactive status for more than 5 years shall file an application, on forms supplied by the Division, together with the restoration fee specified in Section 1300.15(c)(1) of this Part, when restoring an expired license, or the current renewal fee set forth in Section 1300.15(b), when restoring an inactive license. The licensee shall also submit proof of fitness to practice, which includes one of the following:
 - 1) Certification of active practice in another jurisdiction. Such certification shall include a statement from the appropriate board or licensing authority in the other jurisdiction that the licensee was authorized to practice during the term of said active practice; or
 - 2) An affidavit attesting to military service as provided in Section 20-10 of the Act. If application is made within 2 years after discharge, and if all other provisions of Section 20-10 of the Act are satisfied, the applicant will be required to pay the current renewal fee; or
 - 3) Proof of successful completion of a current nursing practice update course within the last year, which shall include evaluated clinical experience, approved by the Division, as specified in Section 1300.41 of this Part; or
 - 4) Proof of satisfactory completion of a medical-surgical nursing theory and clinical course in a nursing education program within the last year as defined in Section 1300.40 of this Part for practical or registered nurse licensure, consistent with the license which the individual is seeking to restore; or
 - 5) Proof of satisfactory completion of a course within the last year that

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includes:

- A) A self-study nursing theoretical component that is:
 - i) Approved by another state nursing licensing authority and includes medical-surgical nursing across the life span and consists of a minimum of 36 hours for practical nurses or 48 hours for registered nurses; or
 - ii) Approved by the Division and contains assessment of theoretical and skill learning needs, a plan for content with objectives and a plan for documentation of successful completion; and
- B) A clinical practice component that includes:
 - i) Sponsorship by a health care delivery institution or nursing education program that meets the requirements set forth in Section 1300.41 of this Part;
 - ii) A minimum 96 hours for registered nurses and 64 hours for practical nurses of supervised patient care with progressive activities;
 - iii) Completion of the minimal skills list provided by the Division; and
 - iv) Identification of a registered nurse preceptor.
- d) A licensee seeking restoration shall also submit verification of fingerprint processing from the Illinois Department of State Police, or its designated agent. Licensees shall contact the Illinois Department of State Police, or its designated agent, for fingerprint processing. Out-of-state residents unable to utilize the State Police fingerprint process may submit to the Division one set of fingerprint cards issued by the Illinois Department of State Police and one set of fingerprint cards issued by the Federal Bureau of Investigation, accompanied by the specified processing fee pursuant to Section 1240.205. Fingerprints shall be taken within 60 days after application.

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- e) Individuals applying for licensure by restoration may apply to the Division, on forms provided by the Division, to receive a Temporary Restoration Permit that allows the applicant to work pending the issuance of a license by restoration.
- 1) The temporary restoration permit application shall include:
 - A) A completed signed restoration application, along with the required restoration licensure fee as set forth in Section 1300.15 of this Part. All supporting documents shall be submitted to the Division before a permanent license by restoration shall be issued;
 - B) Either:
 - i) Photostatic copies of all current active nursing licenses and/or temporary permits/licenses from other jurisdictions (current active licensure in at least one United States jurisdiction is required); or
 - ii) Verification of employment in nursing practice within the last 5 years in a United States jurisdiction;
 - C) Verification that fingerprints have been submitted to the Division or the Illinois Department of State Police or its designated agent; and
 - D) The temporary restoration permit fee as required in Section 1300.15 of this Part.
 - 2) The Division shall issue a temporary restoration permit no later than 14 days after receipt of a completed application as set forth in subsection (d)(1).
 - 3) Temporary permits shall be terminated upon:
 - A) The issuance of a permanent license by restoration;
 - B) Failure to complete the application process within 6 months from the date of issuance of the permit;

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- C) A finding by the Division that the applicant has been convicted of any crime under the laws of any jurisdiction of the United States which is a:
 - i) Felony; or
 - ii) Misdemeanor directly related to the practice of nursing within the last 5 years;
 - D) A finding by the Division that the applicant has had a license or permit related to the practice of nursing revoked, suspended or placed on probation by another jurisdiction, if at least one of the grounds is substantially equivalent to grounds in Illinois, within the last 5 years; or
 - E) The Division shall notify the applicant by certified or registered mail of the intent to deny licensure pursuant to subsections (e)(3)(C) and (D) and/or Section 10-45 of the Act.
- 4) A temporary permit shall be extended beyond the 6-month period, upon recommendation of the Board and approval of the Director, due to hardship as defined below:
- A) Serving full-time in the Armed Forces;
 - B) An incapacitating illness as documented by a currently licensed physician;
 - C) Death of an immediate family member; or
 - D) Extenuating circumstances beyond the applicant's control as approved by the Director.
- f) When the accuracy of any submitted documentation, or the relevance or sufficiency of the course work or experience is questioned by the Division because of lack of information, discrepancies or conflicts in information given, or a need for clarification, the licensee will be requested to:
- 1) Provide such information as may be necessary; and/or

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- 2) Appear for an oral interview before the Board to explain such relevance or sufficiency, clarify information, or clean up any discrepancies or conflicts in information. Upon recommendation of the Board and approval by the Division, an applicant shall have the license restored.

Section 1300.50 Granting Variances

- a) The Director may grant variances from this Part in individual cases when he or she finds that:
 - 1) the provision from which the variance is granted is not statutorily mandated;
 - 2) no party will be injured by the granting of the variance; and
 - 3) the rule from which the variance is granted would, in the particular case, be unreasonable or unnecessarily burdensome.
- b) The Director shall notify the Board of the granting of the variance, and the reasons for granting the variance, at the next meeting of the Board.

Section 1300.60 Practice of Nursing

- a) Purpose of Standards
 - 1) To establish minimal acceptable levels of safe practice by the Registered Nurses and Licensed Practical Nurses.
 - 2) To serve as a guide for the Board to evaluate nursing care to determine if it is safe and effective and within the appropriate scope of practice.
- b) Standards Related to the Registered Nurse's Responsibility to Implement the Nursing Process
It is not always possible to document complete information in all areas listed in this subsection (b) on each patient. However, nurses should be held accountable for the thorough data collection within the constraints of available information. The Registered Nurse shall:

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- 1) Conduct and document nursing assessments of the health status of individuals and groups.
 - 2) Establish and document nursing problems that serve as the basis for the nursing plan.
 - 3) Develop the nursing plan based on assessment and nursing problem identification. This includes:
 - A) Identifying priorities in the nursing plan.
 - B) Setting realistic and measurable goals.
 - C) Prescribing nursing interventions.
 - 4) Implement the nursing plan through giving and delegating direct care.
 - 5) Evaluate the responses of individuals or groups to nursing interventions and redirect the care plan on the evaluation findings.
 - 6) Communicate evaluation data to appropriate members of the health care team.
- c) Standards Related to the Licensed Practical Nurse's Contribution to the Responsibility for the Nursing Process
The licensed practical nurse, under the direction or supervision of a registered nurse, licensed physician, dentist, or podiatrist, shall:
- 1) Participate in assessment by observing, collection, recording and reporting:
 - A) Objective and subjective data in an accurate and timely manner;
 - B) The condition and/or change in condition of the patient; and
 - C) Signs and symptoms of deviation from normal health status.
 - 2) Assist in developing the nursing care plan.

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- 3) Assist in the implementation of nursing care:
 - A) Within the concepts included in the practical nursing curriculum as set forth in Section 1300.40(f) of this Part;
 - B) With consideration for safety in practice;
 - C) According to established priorities of needs; and
 - D) Documenting and communicating nursing interventions and responses to care.
- 4) Assist in evaluating patient responses:
 - A) Document and communicate evaluation data to appropriate members of the health care team.
 - B) Contribute to the modification of the nursing plan on the basis of the evaluation.

Section 1300.65 Unethical or Unprofessional Conduct in Nursing Practice

- a) The Division may suspend or revoke a license, refuse to issue or renew a license or take other disciplinary action based upon its findings of "unethical or unprofessional conduct" within the meaning of Section 10-45 of the Act, which is interpreted to include, but is not limited to, the following acts or practices:
 - 1) Engaging in conduct likely to deceive, defraud, or harm the public, or demonstrating a willful or careless disregard for the health, welfare, or safety of a patient. Actual injury need not be established.
 - 2) A departure from or failure to conform to the standards of professional or practical nursing as set forth in the Act or this Part, or any nursing practice that may create unnecessary danger to a patient's life, health or safety. Actual injury to a patient need not be established.
 - 3) Engaging in behavior that crosses professional boundaries (such as signing wills or other documents not related to client health care).

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- 4) Engaging in sexual conduct with a patient, or conduct that may reasonably be interpreted by a patient as sexual, or in any verbal behavior that is seductive or sexually demeaning to a patient.
 - 5) Demonstrating actual or potential inability to practice nursing with reasonable skill and safety to patients by reason of illness, use of alcohol, drugs, chemicals, or any other material, or as a result of any mental or physical condition.
 - 6) Failing to report incompetent, unethical, or illegal practice of another health care provider.
- b) The Division hereby incorporates by reference the "Code for Nurses with Interpretive Statements", 1985, American Nurses Association, 600 Maryland Avenue, Suite 100 West, Washington, D.C. 20024-2561, with no later amendments or editions.
 - c) The Division hereby incorporates by reference the "Code of Ethics", National Association for Practical Nurse Education and Service, Inc., 1991, 1400 Spring Street, Suite 330, Silver Spring, Maryland 20910, with no later amendments or editions.

Section 1300.70 Fines

- a) In accordance with Section 25 of the Act, fines shall be imposed in conjunction with other forms of disciplinary action only in instances where the nurse has received monetary gain. In determining the amount of the fine, the Division shall consider, but not be limited to, the following factors:
 - 1) the amount of financial gain, including fees not paid for unlicensed practice;
 - 2) facts of the individual case;
 - 3) any disciplinary history of the individual relating to monetary gain.
- b) The Division shall maintain a record to document the use of fines, type of case and the amount of fine.

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Section 1300.75 Refusal to Issue a Nurse License Based on Criminal History Record

- a) For purposes of this Part, criminal history record information is defined as information collected by criminal justice agencies (defined in 20 ILCS 2630) on individuals consisting of identifiable descriptions and notation of arrests, detention, indictments, information, or other formal criminal charges, and any disposition arising therefrom, sentencing, correctional supervision and release. The individual records must contain both information sufficient to identify the subject of the record and notations regarding any formal criminal justice transaction involving the identified individual.
- b) In determining whether an applicant for a nurse license is unfit for licensure because of criminal history record information, the Division shall consider the following standards:
 - 1) Whether the crime was one of armed violence [720 ILCS 5/Art. 33A] or moral turpitude. Moral turpitude consists of:
 - A) Crime involving dishonesty, false statement or some other element of deceit, untruthfulness or falsification (including but not limited to perjury, inducement of perjury, false statement, criminal fraud, embezzlement, false pretense, forgery, counterfeiting and theft).
 - B) Drug offenses including but not limited to violations of the Illinois Controlled Substances Act [720 ILCS 570/Art. I] and Federal Drug Enforcement Laws (21 USC 801 et seq.).
 - C) Sex offenses including but not limited to all crimes listed in Article 11 of the Criminal Code of 1961 [720 ILCS 5/Art. 11].
 - 2) Whether the crime is related to the nursing profession.
 - 3) Whether more than 10 years have elapsed since the date of completion of imposed sentence.
 - 4) Whether the conviction was from a city ordinance violation or a conviction for which a jail sentence was not imposed.
 - 5) Whether the applicant has been sufficiently rehabilitated to warrant the

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public trust. The Division shall consider, but not be bound by, the following in considering whether an applicant has been presumed to be rehabilitated:

- A) Completion of probation;
 - B) Completion of parole supervision; or
 - C) If no parole was granted, a period of 10 years has elapsed after final discharge or release from any term of imprisonment without any subsequent conviction.
- c) If any one of the following factors exists, this outweighs the presumption of rehabilitation as defined in subsection (b):
- 1) Lack of compliance with terms of punishment (i.e., failure to pay fines or make restitution, violation of the terms of probation or parole);
 - 2) Unwillingness to undergo, or lack of cooperation in, medical or psychiatric treatment/counseling;
 - 3) Falsification of an application for licensure with the Division;
 - 4) Failure to furnish to the Division additional information or failure to appear for an interview or meeting with the Division in relation to the applicant's application for licensure.
- d) The following criminal history records shall not be considered in connection with an application for licensure:
- 1) Juvenile adjudications;
 - 2) Records of arrest not followed by a conviction;
 - 3) Convictions overturned by a higher court;
 - 4) Convictions that have been the subject of a pardon or expungement.
- e) Notification of denial, revocation, suspension, or intent to refuse to renew; request

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for hearing

- 1) If the determination is made that the applicant is unfit for licensure, the Division shall send notice of denial, revocation, suspension, or intent to refuse to renew by certified mail, return receipt requested, to the applicant at the applicant's last known address or by personal delivery to the applicant. All such notices will include a statement of the reason for the Division's action.
- 2) An applicant may request a hearing to contest the Division's action pursuant to 68 Ill. Adm. Code 1110. The request shall be in writing, and must be received by the Division not later than 20 days after the date the Division mailed or personally delivered the notice of its action to the applicant.
- 3) After receipt of a request for a hearing and prior to any such hearing, the Division shall schedule an informal conference with the applicant in an attempt to resolve issues in controversy consensually. The Division shall notify the applicant of the informal conference at least 20 days prior to the hearing. Failure by the applicant to attend the informal conference shall act as a withdrawal of the applicant's request for a hearing.

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Section 1300.APPENDIX A Minimal Skills List for Registered Professional Nurses

The minimal skills for registered professional nurses taking remedial education in accordance with Sections 1300.35 and 1300.41 are as follows:

- a) **Nursing Care Plan**
Take a complete history and do a complete physical assessment, including all body systems, to develop a nursing care plan.
- b) **Standard Precautions and Infection Control**
Demonstrate aseptic technique, isolation technique, reverse isolation technique and central line site care.
- c) **Medications**
Demonstrate ability to calculate dosages. Prepare and administer oral, ear, eye, subcutaneous, intramuscular, Z-track (method of injection), and intradermal medications. Identify and utilize different types of needles, syringes, vials, ampules and tubex.
- d) **Intravenous (IV) Therapy**
Set up equipment for starting an IV and demonstrate ability to start an IV. Demonstrate ability to start, stop and adjust intravenous pump. Demonstrate understanding of blood administration procedures and, if available, start a blood administration.
- e) **Fluids**
Calculate intake and output for complex conditions: intravenous, hyperalimentation, bladder irrigations and nasogastric tube.
- f) **Cardiovascular System**
Locate all pulses and demonstrate use of Doppler. Set up the equipment for central line insertion.
- g) **Pulmonary System**
Perform chest percussion, postural drainage and coughing. Demonstrate tracheostomy care and suctioning. Collect a sputum specimen. Monitor chest drainage and closed chest drainage systems. Transport patients with oxygen. Describe different types of oxygen administration equipment. Do preoperative teaching, including deep breathing, coughing and pursed lip breathing.

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- h) **Gastrointestinal System**
Insert nasogastric tube. Administer tube feeding and medications by nasogastric tube. Identify ileostomy and colostomy appliances.
- i) **Genitourinary System**
Identify types and general sizes of catheters. Describe procedure for male and female catheterization and do catheterization (if available). Set up post TUR irrigation and do post transurethral resection (TUR) irrigation. Collect urine specimens.
- j) **Neurological and Musculoskeletal Systems**
Demonstrate range of motion exercises and crutch walking. Demonstrate proper turning of patients, e.g., a hip replacement patient.
- k) **Endocrine System**
Do self-monitoring of blood glucose.
- l) **Reproductive Systems**
Perform episiotomy care.

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Section 1300.APPENDIX B Minimal Assignment List for Registered Professional Nurses

The minimal assignments for registered professional nurses taking remedial education in accordance with Sections 1300.35 and 1300.41 are as follows:

- a) For all clients
Review chart, interview patient, and develop nursing care plan utilizing acuity assessment and nursing diagnosis. Document the administration of medication (explaining intended effects, side effects, and potential interactions). Give total patient care within educational competencies under the supervision of a registered nurse preceptor.
- b) Day 1
Orientation to hospital and unit, interview patient, review documentation, observe and discuss administration of medication methods and crash cart procedures. Analyze roles and identify nursing diagnoses.
- c) Day 2
Provide care for two medical/surgical or orthopedic patients, focusing the care plan on developmental stage, stress and coping, and documentation. Identify and analyze strategies for own coping.
- d) Day 3
Apply nursing process and develop nursing care plans for two patients with neurological or rehabilitative problems.
- e) Day 4
Develop nursing care plans utilizing the nursing process for two patients needing care of catheters and measurement of output with corresponding documentation. Analyze fluid and electrolyte problems, explain significance of laboratory data, analyze status, apply nursing diagnosis, and document appropriately.
- f) Day 5
Develop nursing care plans and provide care for three patients with diabetes mellitus or endocrine problems. Analyze nursing process and apply nursing diagnoses for these clients.
- g) Day 6
Provide nursing care for two or three adults or children with cardiac and/or

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respiratory problems.

- h) Day 7
Provide care to preoperative and postoperative patients, admissions and discharges.
- i) Day 8
Provide care for three clients with mobility and diversionary needs.
- j) Day 9-12
Perform delegation of procedures and/or tasks with a registered nurse preceptor present on unit (day or evening) shift. Prepare a self-evaluation and preceptor evaluation to determine successful completion of the clinical component.
- k) Day 13
 - 1) Conference with preceptor for discussion of self-evaluation and determining successful completion of the clinical component. The nurse taking the remedial education course shall take or be scheduled to take a test on the Act and this Part.
 - 2) The preceptor will notify the Division of the nurse's successful completion of the remedial education.

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Section 1300.APPENDIX C Minimal Skills List for Licensed Practical Nurses

The minimal skills for licensed practical nurses taking remedial education in accordance with Sections 1300.35 and 1300.41 are as follows:

- a) **Nursing Care Plan**
Participate in the collection of data with the registered nurse to assist in developing a nursing care plan.
- b) **Standard Precautions and Infection Control**
Demonstrate aseptic technique, isolation technique and reverse isolation technique.
- c) **Medications (administration under supervision of registered nurse)**
Demonstrate ability to calculate dosages. Prepare and administer oral, ear, eye, subcutaneous, intramuscular, z-track (method of injection), and intradermal medications. Identify and utilize different types of needles, syringes, vials, ampules and tubex.
- d) **Intravenous (IV) Therapy (performed under supervision of registered nurse)**
Set up equipment for starting an IV and demonstrate ability to adjust and stop intravenous pump. Hang intravenous fluids and calculate rate. Discontinue fluids.
- e) **Fluids**
Calculate intake and output for complex conditions: monitor intravenous, hyperalimentation, bladder irrigations and nasogastric tube.
- f) **Cardiovascular System**
Locate all pulses and demonstrate use of Doppler.
- g) **Pulmonary System**
Perform chest percussion, postural drainage and coughing. Demonstrate tracheostomy care and suctioning. Collect a sputum specimen. Monitor chest drainage. Transport patients with oxygen. Describe different types of oxygen administration equipment. Do preoperative teaching, including deep breathing, coughing and pursed lip breathing.
- h) **Gastrointestinal System**
Insert nasogastric tube. Administer tube feeding and medications by nasogastric

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tube. Identify ileostomy and colostomy appliances.

- i) Genitourinary System
Identify types and general sizes of catheters. Describe procedure for male and female catheterization and do catheterization (if available). Set up post TUR irrigation and do post transurethral resection (TUR) irrigation. Collect urine specimens.
- j) Neurological and Musculoskeletal Systems
Demonstrate range of motion exercises and crutch walking. Demonstrate proper turning of orthopedic patients, e.g., a hip replacement patient.
- k) Endocrine System
Do self-monitoring of blood glucose.
- l) Reproductive Systems
Perform episiotomy care.

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Section 1300.APPENDIX D Minimal Assignment List for Licensed Practical Nurses

The minimal assignment for licensed practical nurses taking a remedial education course set forth in Section 1300.45 are as follows:

- a) For All Clients
Review chart, collect patient data and assist the registered nurse in development of the nursing care plan. Document the administration of medication (explaining intended effects, side effects, and potential interactions). Give total patient care within educational competencies under the supervision of a registered nurse preceptor.
- b) Day 1
Orientation to hospital and unit, collect patient data, review documentation, observe and discuss administration of medication methods and crash cart procedures.
- c) Day 2
Provide care for two medical/surgical or orthopedic patients, focusing the care plan on developmental stage, stress and coping, and documentation. Identify strategies for own coping.
- d) Day 3
Apply nursing process and assist in the development of nursing care plans for two patients with neurological or rehabilitative problems.
- e) Day 4
Assist in the development of nursing care plans for two patients needing care of catheters and measurement of output with corresponding documentation. Identify fluid and electrolyte imbalances. Relate laboratory data to symptoms and discuss urinary status.
- f) Day 5
Assist in the development of nursing care plans and provide care for three patients with diabetes mellitus or endocrine problems.
- g) Day 6
Provide nursing care for two or three adults or children with cardiac and/or respiratory problems.

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- h) Day 7
Provide care to preoperative and postoperative patients, admissions and discharges. Prepare a self-evaluation and preceptor evaluation for discussion of successful completion of the clinical component.
- i) Day 8
 - 1) Provide care for three clients with mobility and diversionary needs.
 - 2) Conference with preceptor for discussion of self-evaluation and determining successful completion of the clinical component. The nurse taking the remedial education course shall take or be scheduled to take a test on the Act and this Part.
 - 3) The preceptor will assure that the Division is notified of the licensed practical nurse's successful completion of the alternative current nursing practice update course.

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- 1) Heading of the Part: Nurse Practice Act
- 2) Code Citation: 68 Ill. Adm. Code 1300
- 3)

<u>Section Numbers:</u>	<u>Proposed Action:</u>
1300.10	New Section
1300.20	New Section
1300.30	New Section
1300.40	New Section
1300.50	New Section
1300.60	New Section
1300.70	New Section
1300.80	New Section
1300.90	New Section
1300.100	New Section
1300.110	New Section
1300.120	New Section
1300.130	New Section
1300.200	New Section
1300.210	New Section
1300.220	New Section
1300.230	New Section
1300.240	New Section
1300.250	New Section
1300.260	New Section
1300.300	New Section
1300.310	New Section
1300.320	New Section
1300.330	New Section
1300.340	New Section
1300.350	New Section
1300.360	New Section
1300.370	New Section
1300.400	New Section
1300.410	New Section
1300.420	New Section
1300.430	New Section
1300.440	New Section
1300.450	New Section

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1300.460	New Section
1300.470	New Section
1300.480	New Section
1300.APPENDIX A	New Section
1300.EXHIBIT A	New Section

- 4) Statutory Authority: Nurse Practice Act [225 ILCS 65]
- 5) A Complete Description of the Subjects and Issues Involved: Public Act 95-639, effective October 5, 2007, made significant changes to what had been titled the "Nursing and Advanced Practice Nursing Act", including significant reorganization of most of the Act. As a result of these changes and changes requested by the industry, Part 1300 has been updated and reorganized to mirror the framework of the revised Nurse Practice Act. In addition, Part 1305 is being repealed as the rules regarding Advanced Practice Nurses (APNs) have been incorporated into the proposed rewrite of Part 1300.
- Subpart A sets forth updated definitions and includes Sections regarding nursing delegation and mandatory reporting of impaired nurses and creates a treatment program for impaired nurses. Section 1300.130 details the new continuing education requirements for all nurses. Subpart B addresses Licensed Practical Nurses (LPNs) and includes clarification regarding medication administration and LPN Scope of Practice and Standards for Professional Conduct. Outdated Sections regarding remedial education and minimal LPN skills were not included. Subpart C addresses registered nurses (RNs). Outdated language regarding remedial courses was not included, but the RN scope of practice language that mirrors statutory revisions is included. The provision of sedation by registered nurses in ambulatory surgical treatment centers is also addressed. Subpart D sets forth rules specific to APNs. Language addressing APNs practicing in hospitals or surgical treatment centers reflects statutory changes and expired grandfathering language was not included. Sections detailing the agreements between APNs and their collaborating physicians (including prescriptive authority) reflect changes in the Nurse Practice Act and the Medical Practice Act. The appendices have been updated from the current rules. Makes numerous non-substantive changes to reflect the consolidation of agencies into the Department of Financial and Professional Regulation and the creation of the Division of Professional Regulation. Obsolete language was not included and other technical changes are being made.
- 6) Published studies or reports, and sources of underlying data, used to compose this rulemaking: None

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- 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
- 10) Are there any other proposed rulemakings pending on this Part? No
- 11) Statement of Statewide Policy Objectives: This rulemaking has no impact on local governments.
- 12) Time, Place and Manner in which interested persons may comment on this proposed rulemaking: Interested persons may submit written comments to:

Department of Financial and Professional Regulation
Attention: Craig Cellini
320 West Washington, 3rd Floor
Springfield, IL 62786

217/785-0813 FAX: 217/557-4451

All written comments received within 45 days after this issue of the Illinois Register will be considered.

- 13) Initial Regulatory Flexibility Analysis:
 - A) Types of small businesses, small municipalities and not for profit corporations affected: Those providing nursing services.
 - B) Reporting, bookkeeping or other procedures required for compliance: None
 - C) Types of professional skills necessary for compliance: Nursing skills are required for licensure.
- 14) Regulatory Agenda on which this rulemaking was summarized: July 2009

The full text of the Proposed Rules begins on the next page:

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TITLE 68: PROFESSIONS AND OCCUPATIONS

CHAPTER VII: DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

PART 1300

NURSE PRACTICE ACT

SUBPART A: GENERAL PROVISIONS

Section

- 1300.10 Definitions
- 1300.20 Nursing Delegation
- 1300.30 Fees
- 1300.40 Renewals
- 1300.50 Restoration
- 1300.60 Granting Variances
- 1300.70 Fines
- 1300.80 Public Access to Records and Meetings
- 1300.90 Unethical or Unprofessional Conduct
- 1300.100 Refusal to Issue a Nurse License Based on Criminal History Record
- 1300.110 Mandatory Reporting of Impaired Nurses
- 1300.120 Impaired Nurse – Disciplinary and Non-Disciplinary
- 1300.130 Continuing Education

SUBPART B: LICENSED PRACTICAL NURSE

Section

- 1300.200 Application for Examination or Licensure
- 1300.210 LPN Licensure Examination
- 1300.220 LPN Licensure by Endorsement
- 1300.230 Approval of Programs
- 1300.240 Standards for Pharmacology/Administration of Medication Course for Practical Nurses
- 1300.250 LPN Scope of Practice
- 1300.260 Standards for Professional Conduct for LPNs

SUBPART C: REGISTERED NURSE

Section

- 1300.300 Application for Examination or Licensure

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- 1300.310 RN Licensure Examination
- 1300.320 RN Licensure by Endorsement
- 1300.330 Nurse Externship
- 1300.340 Approval of Programs
- 1300.350 Standards of Professional Conduct for Registered Professional Nurses
- 1300.360 RN Scope of Practice
- 1300.370 Provision of Conscious Sedation by Registered Nurses in Ambulatory Surgical Treatment Centers

SUBPART D: ADVANCED PRACTICE NURSE

Section

- 1300.400 Application for Licensure
 - 1300.410 Written Collaborative Agreements
 - 1300.420 Collaboration and Consultation
 - 1300.430 Prescriptive Authority
 - 1300.440 APN Scope of Practice
 - 1300.450 Delivery of Anesthesia Services by a Certified Registered Nurse Anesthetist Outside a Hospital or Ambulatory Surgical Treatment Center
 - 1300.460 Advanced Practice Nursing in Hospitals or Ambulatory Surgical Treatment Centers
 - 1300.470 Advertising
 - 1300.480 Reports Relating to APN Professional Conduct and Capacity
-
- 1300.APPENDIX A Additional Certifications Accepted for Licensure as an Advanced Practice Nurse
 - 1300.EXHIBIT A Sample Written Collaborative Agreement

AUTHORITY: Implementing the Nurse Practice Act [225 ILCS 65] and authorized by Section 50-55 of that Act.

SOURCE: Adopted at 34 Ill. Reg. _____, effective _____.

SUBPART A: GENERAL PROVISIONS

Section 1300.10 Definitions

The following definitions shall apply to this Part:

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"Act" means the Nurse Practice Act [225 ILCS 65].

"Address of Record" means the address recorded by the Division in the applicant's or licensee's application file or license file, as maintained by the Division's licensure maintenance unit.

"Advanced Practice Nurse" or "APN" means a person who has met the qualifications for a:

certified nurse midwife (CNM);

certified nurse practitioner (CNP);

certified registered nurse anesthetist (CRNA); or

clinical nurse specialist (CNS) and has been licensed by the Division.

All advanced practice nurses licensed and practicing in the State of Illinois shall use the title APN and may use specialty credentials after their name.

"APN Practice Pending Licensure" means practice by an APN, under a temporary permit, who is scheduled to take the National Certification Examination. This period of practice cannot exceed 6 months from date of application for the license. APN Practice Pending Licensure does not include prescriptive authority.

"Bilingual Nurse Consortium Course or Other Comparable Course Approved by the Division" means a course specifically designed to prepare a nurse trained in another jurisdiction, and for whom English is a second language, to take the Illinois required licensure examination.

"Board" means the Board of Nursing.

"Collaboration" means a process involving 2 or more health care professionals working together, each contributing one's respective area of expertise to provide more comprehensive patient care. (Section 50-10 of the Act)

"Consultation" means the process by which an advanced practice nurse seeks the advice or opinion of another health care professional. (Section 50-10 of the Act)

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"Dentist" means a person licensed to practice dentistry under the Illinois Dental Practice Act [225 ILCS 25]. (Section 50-10 of the Act)

"Department" means the Department of Financial and Professional Regulation.

"Direction" means to give authoritative instruction to another regarding tasks and/or professional responsibilities.

"Director" means the Director of the Division of Professional Regulation, with the authority delegated by the Secretary.

"Division" means the Department of Financial and Professional Regulation-Division of Professional Regulation.

"Externship" means a two-year program allowing a registered nurse who is licensed under the laws of another state or territory of the United States to practice as a nurse extern under the direct supervision of a registered professional nurse while preparing for the NCLEX-RN examination.

"Impaired Nurse" means a nurse licensed under this Act who is unable to practice with reasonable judgment, skill or safety because of a physical or mental disability, as evidenced by a written determination or written consent based on clinical evidence, including loss of motor skills, abuse of drugs or alcohol, or a psychiatric disorder, of sufficient degree to diminish his or her ability to deliver competent patient care. (Section 50-10 of the Act)

"Physician" means a person licensed to practice medicine in all its branches under the Medical Practice Act of 1987 [225 ILCS 60]. (Section 50-10 of the Act)

"Physician Assistant" means a person licensed under the Physician Assistant Practice Act of 1987 [225 ILCS 95]. (Section 50-10 of the Act)

"Podiatrist" means a person licensed to practice podiatry under the Podiatric Medical Practice Act of 1987 [225 ILCS 100]. (Section 50-10 of the Act)

"Professional Responsibility" includes making decisions and judgments requiring use of knowledge acquired by completion of an approved program for licensure as a practical, professional or advanced practice nurse.

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"Secretary" means the Secretary of the Department of Financial and Professional Regulation.

"Task" means work not requiring professional knowledge, judgment and/or decision making. (Section 50-75 of the Act)

Section 1300.20 Nursing Delegation

- a) *For the purposes of this Section:*

"Delegation" means transferring to an individual the authority to perform a selected nursing activity or task, in a selected situation.

"Nursing Activity" means any work requiring the use of knowledge acquired by completion of an approved program for licensure, including advanced education, continuing education, and experience as a licensed practical nurse or professional nurse, as defined by this Part.

- b) *Nursing shall be practiced by licensed practical nurses, registered professional nurses, and advanced practice nurses. In the delivery of nursing care, nurses work with many other licensed professionals and other persons. An advanced practice nurse may delegate to registered professional nurses, licensed practical nurses, and others persons.*
- c) *A registered professional nurse shall not delegate any nursing activity requiring the specialized knowledge, judgment, and skill of a licensed nurse to an unlicensed person, including medication administration. A registered professional nurse may delegate nursing activities to other registered professional nurses or licensed practical nurses.*
- d) *A registered nurse may delegate tasks to other licensed and unlicensed persons. A licensed practical nurse who has been delegated a nursing activity shall not re-delegate the nursing activity. A registered professional nurse or advanced practice nurse retains the right to refuse to delegate or to stop or rescind a previously authorized delegation. (Section 50-75 of the Act)*

Section 1300.30 Fees

The following fees shall be paid to the Department and are not refundable:

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a) Application Fees

- 1) The fee for application for a license as a registered professional nurse and a licensed practical nurse is \$50. In addition, applicants for an examination shall be required to pay, either to the Division or to the designated testing service, a fee covering the cost of determining an applicant's eligibility and providing the examination. Failure to appear for the examination on the scheduled date, at the time and place specified, after the applicant's application for examination has been received and acknowledged by the Division or the designated testing service, shall result in the forfeiture of the examination fee.
- 2) The fee for a temporary restoration or endorsement permit for a license as an APN, a registered professional nurse and licensed practical nurse is \$25.
- 3) The fee for a nurse externship permit is \$50.
- 4) The fee for application for a license as an advanced practice nurse is \$125.
- 5) The fee for application as an approved continuing education sponsor is \$500.

b) Renewal Fees

- 1) The fee for the renewal of a practical nurse license shall be calculated at the rate of \$30 per year.
- 2) The fee for the renewal of a professional nurse license shall be calculated at the rate of \$30 per year.
- 3) The fee for the renewal of a license as an advanced practice nurse shall be calculated at the rate of \$40 per year.
- 4) The fee for renewal of an APN, LPN or RN continuing education sponsor approval is \$250 for 2 years.

c) General Fees

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- 1) The fee for the restoration of a license other than from inactive status is \$20 plus payment of all lapsed renewal fees, but not to exceed \$125.
- 2) The fee for the issuance of a duplicate license, for the issuance of a replacement license, for a license that has been lost or destroyed or for the issuance of a license with a change of name or address other than during the renewal period is \$20. No fee is required for name and address changes on Division records when no duplicate license is issued.
- 3) The fee for a certification of a licensee's record for any purpose is \$20.
- 4) The fee to have the scoring of an examination authorized by the Division reviewed and verified is \$20 plus any fees charged by the applicable testing service.
- 5) The fee for a wall certificate showing licensure shall be the actual cost of producing the certificate.
- 6) The fee for a roster of persons licensed as registered professional nurses or licensed practical nurses in this State shall be the actual cost of producing such a roster.
- 7) The fee for processing a fingerprint card by the Department of State Police is the cost of processing, which shall be made payable to the State Police Services Fund and shall be remitted to the State Police for deposit into the Fund.

Section 1300.40 Renewals

- a) Every APN license issued under the Act shall expire on May 31 of each even-numbered year. The holder of a license may renew the license during the month preceding the expiration date by paying the fee required by Section 1300.30. During every renewal, a renewal applicant will be required to complete 50 hours of continuing education as set forth in Section 1300.30. A licensee's registered nurse license shall be renewed in order to renew the advanced practice nurse license. At the time of renewal, APNs licensed after October 5, 2007 shall show proof of continued, current national certification in their specialty.

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- b) Every registered professional nurse license issued under the Act shall expire on May 31 of each even-numbered year. The holder of a license may renew the license during the month preceding the expiration date by paying the fee required by Section 1300.30. Beginning with the May 31, 2012 renewal and every renewal thereafter, a renewal applicant will be required to complete 20 hours of continuing education as set forth in Section 1300.130.
- c) Every licensed practical nurse license issued under the Act shall expire on January 31 of each odd-numbered year. The holder of a license may renew the license during the month preceding the expiration date by paying the fee required by Section 1300.30. Beginning with the January 31, 2013 renewal and every renewal thereafter, a renewal applicant will be required to complete 20 hours of continuing education as set forth in Section 1300.130.
- d) It is the responsibility of each licensee to notify the Division of any change of address. Failure to receive a renewal form from the Division shall not constitute an excuse for failure to pay the renewal fee.
- e) Practice on a license that has expired is the unlicensed practice of nursing and shall be grounds for discipline pursuant to Section 70-5 of the Act.

Section 1300.50 Restoration

- a) A licensee seeking restoration of a license that has expired for 5 years or less shall have the license restored upon payment of the fees required by Section 1300.30.
- b) A licensee seeking restoration of a license that has been placed on inactive status for 5 years or less shall have the license restored upon payment of the current renewal fee set forth in Section 1300.30(b).
- c) A licensee seeking restoration of a licensed practical nurse license after it has expired or been placed on inactive status for more than 5 years shall file an application, on forms supplied by the Division, together with the restoration fee specified in Section 1300.30(c)(1), when restoring an expired license, or the current renewal fee set forth in Section 1300.30(b), when restoring an inactive license. The licensee shall also submit proof of fitness to practice, which includes one of the following:

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- 1) Certification of active practice in another jurisdiction. This certification shall include a statement from the appropriate board or licensing authority in the other jurisdiction that the licensee was authorized to practice during the term of the active practice; or
 - 2) An affidavit attesting to military service as provided in Section 55-20(c) of the Act. If application is made within 2 years after discharge, and if all other provisions of Section 55-10 of the Act are satisfied, the applicant will be required to pay the current renewal fee, but not the restoration fee; or
 - 3) Proof of successful completion of a Division-approved LPN licensure examination.
- d) A licensee seeking restoration of an RN license after it has expired or been placed on inactive status for more than 5 years shall file an application, on forms supplied by the Division, together with the restoration fee specified in Section 1300.30(c)(1), when restoring an expired license, or the current renewal fee set forth in Section 1300.30(b), when restoring an inactive license. The licensee shall also submit proof of fitness to practice, which includes one of the following:
- 1) Certification of active practice in another jurisdiction. This certification shall include a statement from the appropriate board or licensing authority in the other jurisdiction that the licensee was authorized to practice during the term of the active practice; or
 - 2) An affidavit attesting to military service as provided in Section 60-25(c) of the Act. If application is made within 2 years after discharge, and if all other provisions of Section 60-10 of the Act are satisfied, the applicant will be required to pay the current renewal fee; or
 - 3) Proof of the successful completion of a Division-approved RN licensure examination.
- e) A licensee seeking restoration of an APN license after it has expired or been placed on inactive status for more than 5 years shall file an application, on forms supplied by the Division, together with the restoration fee specified in Section 1300.30(c)(1), when restoring an expired license, or the current renewal fee set

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forth in Section 1300.30(b), when restoring an inactive license. The licensee shall also submit proof of fitness to practice, which includes one of the following:

- 1) Certification of active practice in another jurisdiction. This certification shall include a statement from the appropriate board or licensing authority in the other jurisdiction that the licensee was authorized to practice during the term of the active practice; or
 - 2) An affidavit attesting to military service as provided in Section 65-20(c) of the Act. If application is made within 2 years after discharge, and if all other provisions of Section 65-5 of the Act are satisfied, the applicant will be required to pay the current renewal fee; or
 - 3) Verification of fingerprint processing from the Illinois Department of State Police, or its designated agent. (Practical nurses licensed in Illinois are not required to be fingerprinted when applying for a license as a registered professional nurse.) Applicants shall contact a Division recommended fingerprint vendor for fingerprint processing. Out-of-state residents unable to utilize an electronic fingerprint process may submit to a Division recommended fingerprint vendor one set of fingerprint cards issued by the Illinois Department of State Police or one set of fingerprint cards issued by the Federal Bureau of Investigation (FBI), accompanied by the processing fee specified in Section 1300.30(c)(7). Fingerprints shall be taken within the 60 days prior to application;
 - 4) For any APN licensed after October 5, 2007 or any APN who holds a license that has been placed in non-renewed, inactive, suspended or revoked status since October 5, 2007, proof of continued, current national certification in the APN's specialty prior to restoration.
- f) Individuals applying for restoration of an inactive or non-renewed license may apply to the Division, on forms provided by the Division, to receive a temporary restoration permit that allows the applicant to work pending the issuance of a license by restoration.
- 1) The temporary restoration permit application shall include:
 - A) A completed signed restoration application, along with the restoration fee required by Section 1300.30(c)(1). All supporting

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documents shall be submitted to the Division before a permanent license by restoration shall be issued;

- B) Either:
 - i) Photocopies of all current active nursing licenses and/or temporary permits/licenses from other jurisdictions (current active licensure in at least one United States jurisdiction is required); or
 - ii) Verification of employment in nursing practice within the last 5 years in a United States jurisdiction;
 - C) Verification that fingerprints have been submitted to the Division or the Illinois Department of State Police or its designated agent; and
 - D) The temporary restoration permit fee required by Section 1300.30(a)(2).
- 2) The Division will issue a temporary restoration permit no later than 14 days after receipt of a completed application as set forth in this Section.
- 3) Temporary permits shall be terminated upon:
- A) The issuance of a permanent license by restoration;
 - B) Failure to complete the application process within 6 months from the date of issuance of the permit;
 - C) A finding by the Division that the applicant has been convicted within the last 5 years of any crime under the laws of any jurisdiction of the United States that is:
 - i) a felony; or
 - ii) a misdemeanor directly related to the practice of nursing;

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- D) A finding by the Division that, within the last 5 years, the applicant has had a license or permit related to the practice of nursing revoked, suspended or placed on probation by another jurisdiction, if at least one of the grounds is substantially equivalent to grounds in Illinois; or
 - E) Upon notification that the Division intends to deny restoration of licensure for any reason.
- 4) The Division will notify the applicant by certified or registered mail of the intent to deny licensure pursuant to subsections (f)(3)(C) and (D) of this Section and/or Section 70-5 of the Act.
- 5) A temporary permit shall be extended beyond the 6-month period, upon recommendation of the Board and approval of the Secretary, due to hardship, defined as:
- A) Serving full-time in the Armed Forces;
 - B) An incapacitating illness as documented by a currently licensed physician;
 - C) Death of an immediate family member; or
 - D) Extenuating circumstances beyond the applicant's control, as approved by the Secretary.
- g) When the accuracy of any submitted documentation, or the relevance or sufficiency of the course work or experience is questioned by the Division because of lack of information, discrepancies or conflicts in information given, or a need for clarification, the licensee will be requested to:
- 1) Provide information as may be necessary; and/or
 - 2) Appear for an oral interview before the Board to explain the relevance or sufficiency, clarify information, or clean up any discrepancies or conflicts in information. Upon recommendation of the Board and approval by the Division, an applicant shall have the license restored.

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Section 1300.60 Granting Variances

- a) The Secretary may grant variances from this Part in individual cases when he or she finds that:
 - 1) the provision from which the variance is granted is not statutorily mandated;
 - 2) no party will be injured by the granting of the variance; and
 - 3) the rule from which the variance is granted would, in the particular case, be unreasonable or unnecessarily burdensome.
- b) The Secretary shall notify the Board of the granting of the variance, and the reasons for granting the variance, at the next meeting of the Board.

Section 1300.70 Fines

Fines may be imposed in conjunction with other forms of disciplinary actions, but fines shall not be the exclusive disposition of any disciplinary action arising out of conduct resulting in death or injury of a patient.

Section 1300.80 Public Access to Records and Meetings

- a) All investigative procedures, information arising out of the investigation of complaints, and informal conferences shall be confidential. All other proceedings and documents, beginning with the filing of a formal complaint, shall be open to the public.
- b) All meetings of the Board shall also be open to the public in accordance with the Open Meetings Act [5 ILCS 120].

Section 1300.90 Unethical or Unprofessional Conduct

- a) The Division may suspend or revoke a license, refuse to issue or renew a license or take other disciplinary action based upon its findings of unethical or unprofessional conduct (see Section 70-5(b)(7) of the Act), which is interpreted to include, but is not limited to, the following acts or practices:

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- 1) Engaging in conduct likely to deceive, defraud or harm the public, or demonstrating a willful disregard for the health, welfare or safety of a patient. Actual injury need not be established.
 - 2) A departure from or failure to conform to the standards of professional or practical nursing as set forth in the Act or this Part. Actual injury to a patient need not be established.
 - 3) Engaging in behavior that crosses professional boundaries (such as signing wills or other documents not related to client health care).
 - 4) Engaging in sexual conduct with a patient, or conduct that may reasonably be interpreted by a patient as sexual, or in any verbal behavior that is sexually harassing to a patient.
 - 5) Demonstrating actual or potential inability to practice nursing with reasonable skill, safety or judgment by reason of illness, use of alcohol, drugs, chemicals or any other material, or as a result of any mental or physical condition.
- b) The Division hereby incorporates by reference the "Code for Nurses with Interpretive Statements", July 2001, American Nurses Association, 8515 Georgia Avenue, Suite 400, Silver Spring MD 20910, with no later amendments or editions.
 - c) The Division hereby incorporates by reference the "Standards of Practice and Educational Competencies of Graduates of Practical/Vocational Nursing Programs", National Association for Practical Nurse Education and Service, Inc., May 6, 2007, 1940 Duke Street, Suite 200, Alexandria VA 22314, with no later amendments or editions.

Section 1300.100 Refusal to Issue a Nurse License Based on Criminal History Record

- a) For purposes of this Part, criminal history record information is defined as information collected by criminal justice agencies (see 20 ILCS 2630) on individuals consisting of identifiable descriptions and notation of arrests, detention, indictments, information or other formal criminal charges, and any disposition arising from those actions, sentencing, correctional supervision and release. The individual records must contain both information sufficient to

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identify the subject of the record and notations regarding any formal criminal justice transaction involving the identified individual.

- b) In determining whether an applicant for a nurse license is unfit for licensure because of criminal history record information, the Division shall consider the following standards:
- 1) Whether the crime was one of armed violence (see 720 ILCS 5/Art. 33A) or moral turpitude. Moral turpitude consists of:
 - A) Crime involving dishonesty, false statement or some other element of deceit, untruthfulness or falsification (including but not limited to perjury, inducement of perjury, false statement, criminal fraud, embezzlement, false pretense, forgery, counterfeiting and theft).
 - B) Drug offenses including but not limited to violations of the Illinois Controlled Substances Act [720 ILCS 570] and Federal Drug Enforcement Laws (21 USC 801 et seq.).
 - C) Sex offenses including but not limited to all crimes listed in Article 11 of the Criminal Code of 1961 [720 ILCS 5/Art. 11].
 - 2) Whether the crime is related to the nursing profession.
 - 3) Whether more than 10 years have elapsed since the date of completion of imposed sentence.
 - 4) Whether the conviction was from a city ordinance violation or a conviction for which a jail sentence was not imposed.
 - 5) Whether the applicant has been sufficiently rehabilitated to warrant the public trust. The Division shall consider, but not be bound by, the following in considering whether an applicant has been presumed to be rehabilitated:
 - A) Completion of probation;
 - B) Completion of parole supervision; or

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- C) If no parole was granted, a period of 10 years has elapsed after final discharge or release from any term of imprisonment without any subsequent conviction.
- c) If any one of the following factors exists, this outweighs the presumption of rehabilitation as defined in subsection (b)(5):
- 1) Lack of compliance with terms of punishment (i.e., failure to pay fines or make restitution, violation of the terms of probation or parole);
 - 2) Unwillingness to undergo, or lack of cooperation in, medical or psychiatric treatment/counseling;
 - 3) Falsification of an application for licensure with the Division;
 - 4) Failure to furnish to the Division additional information or failure to appear for an interview or meeting with the Division in relation to the applicant's application for licensure.
- d) The following criminal history records shall not be considered in connection with an application for licensure:
- 1) Juvenile adjudications;
 - 2) Records of arrest not followed by a conviction;
 - 3) Convictions overturned by a higher court;
 - 4) Convictions that have been the subject of a pardon or expungement.
- e) Notification of Denial, Revocation, Suspension, or Intent to Refuse to Renew; Request for Hearing
- 1) If the determination is made that the applicant is unfit for licensure, the Division shall send notice of denial, revocation, suspension or intent to refuse to renew by certified mail, return receipt requested, to the applicant at the applicant's address of record or by personal delivery to the applicant. All such notices will include a statement of the reason for the Division's action.

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- 2) An applicant may request a hearing to contest the Division's action under 68 Ill. Adm. Code 1110. The request shall be in writing and must be received by the Division not later than 20 days after the date the Division mailed or personally delivered the notice of its action to the applicant.
- 3) After receipt of a request for a hearing and prior to any such hearing, the Division shall schedule an informal conference with the applicant in an attempt to resolve issues in controversy consensually. The Division shall notify the applicant of the informal conference at least 20 days prior to the hearing. Failure by the applicant to attend the informal conference shall act as a withdrawal of the applicant's request for a hearing. The provisions of this subsection (e)(3) shall not apply if an informal conference was held prior to the Division serving notice upon the applicant as described in subsection (e)(1).

Section 1300.110 Mandatory Reporting of Impaired Nurses

- a) *Any nurse who is an administrator or officer in any hospital, nursing home, other health care agency or facility, or nurse agency and has knowledge of any action or condition which reasonably indicates that a licensed practical nurse, registered professional nurse or advanced practice nurse is:*
 - 1) *impaired due to the use of alcohol or mood altering drugs to the extent that the impairment adversely affects the nurse's professional performance; or*
 - 2) *unlawfully possesses, uses, distributes or converts mood altering drugs (Section 70-10(a) of the Act) shall report the individual to the Division or designee of the Division unless the nurse participates in a course of remedial professional counseling or medical treatment for substance abuse.*
- b) The administrator need not report the nurse in question so long as the nurse actively pursues treatment under monitoring by the administrator or officer or by the hospital, nursing home, health care agency or facility, or nurse agency and the nurse continues to be employed by that hospital, nursing home, health care agency or facility, or nurse agency.

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- c) However, if the nurse fails to comply with treatment or leaves employment of the institution for any reason, the administrator shall report the nurse to the Division.
- d) Notwithstanding any other Section or provisions of the Nurse Practice Act, if the Division verifies habitual intoxication or drug addiction that adversely affects professional performance or the unlawful possession, use, distribution or conversion of habit forming drugs by the reported nurse, the Division may seek to discipline the nurse pursuant to Section 70-5 of the Act.

Section 1300.120 Impaired Nurse – Disciplinary and Non-Disciplinary

- a) Disciplinary and Non-Disciplinary Options for the Impaired Nurse. The Division shall establish by rule a program of care, counseling and treatment for the impaired nurse. This program shall allow an impaired nurse to self-refer to the program.
- b) Eligibility for consideration for a care, counseling and treatment agreement shall include but not be limited to the following:
 - 1) licensee must self report to the Division before a complaint has been filed;
 - 2) licensee must have no prior disciplinary action in any jurisdiction concerning practice issues related to substance abuse;
 - 3) licensee has not been convicted criminally of any felony or drug-related misdemeanor, nor is any such criminal action pending;
 - 4) licensee acknowledges addiction and/or chemical dependence; and
 - 5) licensee has appeared for and submitted to an assessment by a physician who is a certified addictionist or an advanced practice nurse with specialty certification in addiction and has followed the recommendations of the assessment.
- c) Individual licensee health care records shall be privileged and confidential, unavailable for use in any proceeding, and not subject to disclosure. Nothing in this Section shall impair or prohibit the Division from taking disciplinary action based upon the grounds set forth in Section 70-5 of the Act.

Section 1300.130 Continuing Education

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- a) Continuing Education (CE) Requirements
- 1) As required by the Act, all nurses shall complete continuing education as follows:
 - A) Beginning July 1, 2013, all licensed practical nurses shall complete 20 hours of approved continuing education per 2 year license renewal cycle.
 - B) Beginning May 31, 2012, all registered nurses shall complete 20 hours of approved continuing education per 2 year license renewal cycle.
 - C) All advanced practice nurses shall complete 50 hours of approved continuing education per 2 year license renewal cycle. Completion of the 50 hours under this subsection (a)(1)(C) shall satisfy the continuing education requirements for renewal of a registered professional nurse license. An APN holding more than one APN license is required to complete 50 hours of continuing education total per license renewal period.
 - 2) The following time equivalencies shall apply:

1 contact hour	=	60 minutes
1 academic semester hour	=	15 contact hours
1 academic quarter hour	=	12.5 contact hours
1 CME	=	1 contact hour
1 CNE	=	1 contact hour
1 AMA	=	1 contact hour
 - 3) All CE must be completed in the 24 months preceding expiration of the license.
 - 4) A renewal applicant shall not be required to comply with CE requirements for the first renewal of an Illinois license.
 - 5) Nurses licensed in Illinois but residing and practicing in other states shall comply with the CE requirements set forth in this Section.

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- 6) Continuing education hours used to satisfy the CE requirements of another jurisdiction may be applied to fulfill the CE requirements of the State of Illinois pursuant to the provisions set forth in subsection (e).
- b) Approved Continuing Education
- 1) CE hours shall be earned by verified attendance at (e.g., certificate of attendance or certificate of completion) or participation in a program or course (program) that is offered or sponsored by an approved CE sponsor who meets the requirements set forth in subsection (c), except for those activities provided in subsections (b)(2), (3) and (4).
 - 2) Independent study that is approved for CE credits as set forth in subsection (c) may be used, i.e., home study programs, articles from journals, and other health discipline independent study modules.
 - 3) Academic credits may be used to fulfill CE requirements if the course content is applicable to the certification area. CE hours are awarded as outlined in subsection (a)(4).
 - A) College/university courses that are audited may not be used for CE credit.
 - B) Degree "core" or general education credits such as English, literature, history, math, music and physical education may not be used.
 - 4) Presenter/lecturer presentations made to other health professionals on topics related to the certification area may be used for CE credit. Each different individual, non-repetitive 60-minute lecture may be used for 5 CE hours. Full-time educators may not use presentations/lectures that are part of their job expectations, but may use guest lectures and other presentations made outside the duties of their job.
 - 5) CE hours may be earned for authoring papers, publications, articles, dissertations, book chapters or research projects. These must be applicable to the practice area. The research project must be completed during the prerenewal period. Authoring a paper or publishing articles

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may be used for 10 CE hours. Authoring a book chapter, dissertation or research project may be used for 20 CE hours.

- 6) CE Options for APNs
 - A) CE hours may be earned through preceptorship of an APN student. Preceptors must provide clinical supervision and education to the APN student. Documentation must be provided from the school of nursing in which the student is enrolled. Precepting one student for an academic semester or quarter may be used for 10 CE hours. Not more than 20 CE hours in each renewal period may come from precepting.
 - B) Successful completion, during the prerenewal period, of a recertification exam in the APN's area of specialty as recognized in Section 1300.10 may be used for 50 CE hours.
- c) Approved CE Sponsors and Programs
 - 1) Sponsor, as used in this Section, shall mean:
 - A) Approved providers of recognized certification bodies as outlined in Section 1300.400(a).
 - B) Any conference that provides approved Continuing Medical Education (CME) as authorized by the Illinois Medical Practice Act.
 - C) American Nurses Credentialing Center (ANCC) accredited or approved providers.
 - D) Illinois Society for Advanced Practice Nursing (ISAPN).
 - E) American College of Nurse Practitioners.
 - F) American Academy of Nurse Practitioners.
 - G) Nurse Practitioner Association for Continuing Education (NPACE).

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- H) American Association of Nurse Anesthetists.
 - I) National Association of Clinical Nurse Specialists (NACNS).
 - J) Any other accredited school, college or university, State agency, or any other person, firm or association that has been approved and authorized by the Division pursuant to subsection (c)(2) of this Section to coordinate and present CE courses and programs.
- 2) An entity seeking approval as a CE sponsor, not specifically listed in subsection (c)(1), shall submit an application, on forms supplied by the Division, along with the application fee specified in Section 1300.30(a)(5). (State agencies, State colleges and State universities in Illinois shall be exempt from paying this fee.) The application shall include:
- A) Certification:
 - i) That all programs offered by the sponsor for CE credit will comply with the criteria in subsection (c)(3) and all other criteria in this Section;
 - ii) That the sponsor will be responsible for verifying full-time continuous attendance at each program and provide a certificate of attendance as set forth in subsection (c)(7);
 - iii) That, upon request by the Division, the sponsor will submit evidence (e.g., certificate of attendance or course material) necessary to establish compliance with this Section. Evidence shall be required when the Division has reason to believe that there is not full compliance with the statute.
 - B) A copy of a sample program with faculty, course materials and syllabi.
- 3) All programs shall:

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- A) Contribute to the advancement, extension and enhancement of the professional skills and scientific knowledge of the licensee in the practice of nursing;
 - B) Foster the enhancement of general or specialized nursing practice and values;
 - C) Be developed and presented by persons with education and/or experience in the subject matter of the program;
 - D) Specify the course objectives, course content and teaching methods to be used; and
 - E) Specify the number of CE hours that may be applied to fulfilling the Illinois CE requirements for license renewal.
- 4) Each CE program shall provide a mechanism for evaluation of the program and instructor by the participants. The evaluation may be completed on-site immediately following the program/presentation, or an evaluation questionnaire may be distributed to participants to be completed and returned by mail. The sponsor and instructor, together, shall review the evaluation outcome and revise subsequent programs accordingly.
 - 5) An approved sponsor may subcontract with individuals or organizations to provide approved programs. All advertising, promotional materials and certificates of attendance must identify the approved sponsor and the sponsor's State approval number. The presenter of the program may also be identified, but should be identified as a presenter. When an approved sponsor subcontracts with a presenter, the sponsor retains all responsibility for monitoring attendance, providing certificates of attendance and ensuring the program meets all of the criteria established by the Act and this Part, including the maintenance of records.
 - 6) To maintain approval as a sponsor, each sponsor shall submit to the Division by May 31 of each even-numbered year a renewal application, the renewal fee specified in Section 1300.30(b) and a list of courses and programs offered within the last 24 months. The list shall include a brief

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description, location, date and time of each course given by the sponsor and by any subcontractor.

- 7) Certification of Attendance. It shall be the responsibility of a sponsor to provide each participant in a program with a certificate of attendance or participation. The sponsor's certificate of attendance shall contain:
 - A) The sponsor's name and, if applicable, sponsor approval number;
 - B) The name of the participant;
 - C) A brief statement of the subject matter;
 - D) The number of hours attended in each program;
 - E) The date and place of the program; and
 - F) The signature of the sponsor.
 - 8) The sponsor shall maintain attendance records for not less than 5 years.
 - 9) The sponsor shall be responsible for assuring that no renewal applicant will receive CE credit for time not actually spent attending the program.
 - 10) Upon the failure of a sponsor to comply with any of the requirements of this subsection (c), the Division, after notice to the sponsor and hearing before and recommendation by the Board (see 68 Ill. Adm. Code 1110), shall thereafter refuse to accept for CE attendance at or participation in any of that sponsor's CE programs until such time as the Division receives assurances of compliance with this Section.
 - 11) Notwithstanding any other provision of this Section, the Division or Board may evaluate any sponsor of any approved CE program at any time to ensure compliance with requirements of this Section.
- d) Certification of Compliance with CE Requirements
- 1) Each renewal applicant shall certify, on the renewal application, full compliance with the CE requirements set forth in subsections (a) and (b).

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- 2) The Division may require additional evidence demonstrating compliance with the CE requirements (e.g., certificates of attendance). This additional evidence shall be required in the context of the Division's random audit. It is the responsibility of each renewal applicant to retain or otherwise produce evidence of compliance.
 - 3) When there appears to be a lack of compliance with CE requirements, an applicant shall be notified in writing and may request an interview with the Board. At that time the Board may recommend that steps be taken to begin formal disciplinary proceedings as required by Section 10-65 of the Illinois Administrative Procedure Act [5 ILCS 100/10-65].
- e) Continuing Education Earned in Other Jurisdictions
- 1) If a licensee has earned CE hours offered in another jurisdiction not given by an approved sponsor for which the licensee will be claiming credit toward full compliance in Illinois, the applicant shall submit an individual program approval request form, along with a \$25 processing fee, prior to participation in the program or within 90 days prior to expiration of the license. The Board shall review and recommend approval or disapproval of the program using the criteria set forth in subsection (c)(3).
 - 2) If a licensee fails to submit an out-of-state CE approval form within the required time frame, late approval may be obtained by submitting the approval request with the \$25 processing fee plus \$50 per CE hour late fee, not to exceed \$300. The Board shall review and recommend approval or disapproval of the program using the criteria set forth in subsection (c)(3) of this Section.
- f) Restoration of Nonrenewed License
Upon satisfactory evidence of compliance with CE requirements, the Division shall restore the license upon payment of the fee required by Section 1300.30(c)(1).
- g) Waiver of CE Requirements
- 1) Any renewal applicant seeking renewal of a license without having fully complied with these CE requirements shall file with the Division a

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renewal application, along with the required fee set forth in Section 1300.30(b), a statement setting forth the facts concerning noncompliance and a request for waiver of the CE requirements on the basis of these facts. A request for waiver shall be made prior to the renewal date. If the Division, upon the written recommendation of the Board, finds from the affidavit or any other evidence submitted that extreme hardship has been shown for granting a waiver, the Division will waive enforcement of CE requirements for the renewal period for which the applicant has applied.

- 2) Extreme hardship shall be determined on an individual basis by the Board and be defined as an inability to devote sufficient hours to fulfilling the CE requirements during the applicable prerenewal period because of:
 - A) Full-time service in the Armed Forces of the United States during a substantial part of the prerenewal period;
 - B) An incapacitating illness documented by a statement from a currently licensed health care provider;
 - C) A physical inability to access the sites of approved programs documented by a currently licensed health care provider; or
 - D) Any other similar extenuating circumstances.
- 3) When the licensee is requesting a waiver due to physical or mental illness or incapacity, the licensee shall provide a current fitness to practice statement from a currently licensed health care provider familiar with the licensee's medical history.
- 4) Any renewal applicant who, prior to the expiration date of the license, submits a request for a waiver, in whole or in part, pursuant to the provisions of this Section shall be deemed to be in good standing until the final decision on the application is made by the Division.
- 5) Any renewal applicant seeking renewal of the license or certificate without having fully complied with these CE requirements shall file with the Division a renewal application, a statement setting forth the facts concerning the noncompliance, a request for waiver or extension of the CE requirements on the basis of those facts and, if desired, a request for an

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interview before the Board. If the Division finds, based on the statement or any other evidence submitted, that good cause has been shown for granting a waiver or extension of the CE requirements, or any part of those requirements, the Division will waive enforcement of the requirements for the renewal period for which the applicant has applied.

- 6) Good cause shall be defined as an inability to devote sufficient hours to fulfilling the CE requirements during the applicable prerenewal period because of:
 - A) Full-time service in the Armed Forces of the United States during a substantial part of the renewal period;
 - B) A temporary, incapacitating illness documented by a licensed health care provider. A second consecutive request for a CE waiver pursuant to this subsection (g)(6)(B) shall be prima facie proof that the renewal applicant has a physical illness, mental illness or other impairment, including without limitation deterioration through the aging process, mental illness or disability that results in the inability to practice the profession with reasonable judgment, skill and safety, in violation of the Act, and shall be grounds for denial of the renewal or other discipline;
 - C) Temporary undue hardship (e.g., hospitalization, being disabled and unable to practice on a temporary basis).
- 7) If an interview is requested at the time the request for waiver or extension is filed with the Division, the renewal applicant shall be given at least 20 days written notice of the date, time and place of the interview by certified mail, return receipt requested.
- 8) Any renewal applicant who submits a request for waiver or extension pursuant to this Section shall be deemed to be in good standing until the Division's final decision on the application has been made.

SUBPART B: LICENSED PRACTICAL NURSE

Section 1300.200 Application for Examination or Licensure

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- a) Each applicant shall file with the Division or the testing service designated by the Division a completed, signed application, on forms supplied by the Division, that includes:
- 1) proof of graduation from a licensed practical nursing education program that meets the requirements of Section 1300.230;
 - 2) verification of fingerprint processing from the Illinois Department of State Police, or its designated agent. (Practical nurses licensed in Illinois are not required to be fingerprinted when applying for a license as a registered professional nurse.) Applicants shall contact a Division recommended fingerprint vendor for fingerprint processing. Out-of-state residents unable to utilize an electronic fingerprint process may submit to a Division recommended fingerprint vendor one set of fingerprint cards issued by the Illinois Department of State Police or one set of fingerprint cards issued by the FBI, accompanied by the processing fee specified in Section 1300.30(c)(7). Fingerprints shall be taken within the 60 days prior to application;
 - 3) the required fees set forth in Section 1300.30(a)(1);
 - 4) for applicants educated outside the United States or its territories, the following:
 - A) a credentials evaluation report of the applicant's foreign nursing education from either the Commission on Graduates of Foreign Nursing Schools (CGFNS) Credentials Evaluation Service (CES) or the Educational Records Evaluation Service (ERES). However, the Division shall not accept a credential report that does not indicate that the applicant is licensed in his/her country of education or in which the report does not evaluate the educational program of the applicant based upon receipt and review of official transcripts from the nursing education program bearing the school seal. These credential reports shall not be accepted as valid credential reports. In order to be accepted by the Division, credential reports shall be in a form and manner acceptable to the Division.

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- B) if the applicant's first language is not English, certification of passage of either the Test of English as a Foreign Language (TOEFL) or the International English Language Testing System (IELTS) General Training Module. For TOEFL, the minimum passing score on the paper-based test is 560, computer-based test is 220, and internet-based test is 83. For the IELTS General Training Module, the minimum passing score shall be 6.0 (overall score) and 7.0 (spoken band). The Division may, upon recommendation from an approved credentials evaluation service, waive the requirement that the applicant pass the TOEFL or IELTS examination if the applicant submits verification of the successful completion of a nursing education program conducted in English or the passage of an approved licensing examination given in English;
- 5) official transcripts of theory and clinical education prepared by an official of the military for a practical nurse applicant who has received practical nursing education in the military service. This education must meet the standards set forth in Section 1300.230; and
- 6) verification from the jurisdictions in which the applicant was originally licensed, current state of licensure and any other jurisdiction in which the applicant has been actively practicing within the last 5 years, if applicable, stating:
 - A) the time during which the applicant was licensed in that jurisdiction, including the date of original issuance of the license; and
 - B) whether the file on the applicant contains any record of disciplinary actions taken or pending.
- b) Any applicant who fails to demonstrate fulfillment of the education requirements shall be notified in writing and must satisfy the deficiency before being granted temporary authority to practice nursing, as permitted by Section 60-10 of the Act, or being admitted to the examination. Deficiencies in nursing theory and/or clinical practice may be removed by taking the required courses in an approved nursing education program.

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Section 1300.210 LPN Licensure Examination

- a) The Board shall make recommendations to the Division regarding content, design and contractor for a licensure examination. A licensure examination contract shall be negotiated and approved by the Division.
- b) Licensed Practical Nurse Examination
 - 1) The passing grade on the National Council Licensure Examination (NCLEX) for LPNs shall be based on an ability scale designed to measure minimum LPN competency. A pass/fail grade will be assigned.
 - 2) An LPN applicant who fails the examination is not eligible for licensure.
 - 3) If the examination is not passed within 3 years from the date of the first examination taken, regardless of the jurisdiction in which the examination was written, the applicant shall not be permitted to retake the examination until the applicant has successfully recompleted an approved LPN program prior to re-application. Upon successful completion of the approved practical nursing education program, the applicant shall submit proof to the Division. This subsection (b)(3) does not apply to applicants licensed in another jurisdiction.
 - 4) If 3 years from the date of original application has lapsed, the applicant shall be required to submit a new application to the Division pursuant to Section 55-10 of the Act.
- c) Eligibility for Licensed Practical Nurse Examination
Any candidate who is unable to pass the registered professional nurse examination will not be permitted to write the practical nurse examination until or unless that applicant has graduated from an approved practical nursing education program.

Section 1300.220 LPN Licensure by Endorsement

- a) Each applicant who is licensed in another jurisdiction shall file a completed, signed application for licensure on the basis of endorsement, on forms supplied by the Division. The application shall include:

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- 1) the fee required by Section 1300.30(a)(1);
 - 2) proof of graduation from an LPN nursing education program that meets the requirements of Section 1300.230;
 - 3) proof of passage of an examination recognized by the Division, upon recommendation of the Board (i.e., National Council Licensure Examination for practical nurses, or State Board Test Pool Examination for practical nurses);
 - 4) verification of fingerprint processing from the Illinois Department of State Police, or its designated agent. (Practical nurses licensed in Illinois are not required to be fingerprinted when applying for a license as a registered professional nurse.) Applicants shall contact a Division recommended fingerprint vendor for fingerprint processing. Out-of-state residents unable to utilize an electronic fingerprint process may submit to a Division recommended fingerprint vendor one set of fingerprint cards issued by the Illinois Department of State Police or one set of fingerprint cards issued by the FBI, accompanied by the processing fee specified in Section 1300.30(c)(7). Fingerprints shall be taken within the 60 days prior to application;
 - 5) official transcripts of theory and clinical education prepared by an official of the military for a practical nurse applicant who has received his/her education in the military service. Education must meet the standards for education set forth in Section 1300.230;
 - 6) verification of licensure status from the jurisdiction in which the applicant was originally licensed, current licensure and any other jurisdiction in which the applicant has been actively practicing within the last 5 years; and
 - 7) a certified translation for all credentials of education and licensure, if not in English.
- b) After filing the original application, any change of name must be supported by an affidavit satisfactory to the Division.

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- c) Compliance with the provisions of Section 1300.210(b)(3) for each practical nurse applicant shall be a requirement for Illinois practical nurse licensure by endorsement.
- d) **Eligibility for Practical Nurse Endorsement**
A candidate who is unable to pass the LPN examination in another jurisdiction and is allowed to write the practical nurse examination in that jurisdiction and is subsequently licensed as a practical nurse in that jurisdiction is not eligible for endorsement in Illinois unless and until the candidate has graduated from an approved practical nursing education program.
- e) Individuals applying for licensure by endorsement may apply to the Division, on forms provided by the Division, to receive a Temporary Endorsement Permit pursuant to Section 55-10 of the Act. The permit shall allow the applicant to work pending the issuance of a license by endorsement.
 - 1) The temporary endorsement permit application shall include:
 - A) a completed, signed endorsement application, along with the required endorsement licensure fee set forth in Section 1300.30(a)(2). All supporting documents shall be submitted to the Division before a permanent license by endorsement is issued;
 - B) photocopies of all current active nursing licenses and/or temporary permits/licenses from other jurisdictions. Current active licensure in at least one United States jurisdiction is required. Each applicant's license will be checked on the Nurse System (NURSYS) disciplinary data bank to determine if any disciplinary action is pending on the applicant's file;
 - C) verification that fingerprints have been submitted to the Division or the Illinois Department of State Police or its designated agent; and
 - D) the fee for a temporary permit as required in Section 1300.30(a)(2).
 - 2) The Division shall issue a temporary endorsement permit no later than 14 days after receipt of a completed application as set forth in subsection (e)(1).

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- 3) Temporary permits shall be terminated upon:
 - A) the issuance of a permanent license by endorsement;
 - B) failure to complete the application process within 6 months from the date of issuance of the permit;
 - C) a finding by the Division that, within the last 5 years, the applicant has been convicted of any crime under the laws of any jurisdiction of the United States that is:
 - i) a felony; or
 - ii) a misdemeanor directly related to the practice of nursing;
 - D) a finding by the Division that, within the last 5 years, the applicant has had a license or permit related to the practice of nursing revoked, suspended or placed on probation by another jurisdiction, if at least one of the grounds is substantially equivalent to grounds in Illinois; or
 - E) a finding by the Division that the applicant does not meet the licensure requirements for endorsement set forth in this Section. The Division shall notify the applicant in writing of the termination.
- 4) The Division shall notify the applicant by certified or registered mail of the intent to deny licensure pursuant to subsections (e)(3)(D) and (E) of this Section and/or Section 70-5 of the Act.
- 5) A temporary permit shall be renewed beyond the 6-month period, upon recommendation of the Board and approval of the Director, due to hardship, defined as:
 - A) serving full-time in the Armed Forces;
 - B) an incapacitating illness as documented by a currently licensed health care provider;

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- C) death of an immediate family member; or
- D) extenuating circumstances beyond the applicant's control, as approved by the Director.

Section 1300.230 Approval of Programs

- a) Program Approval
Institutions desiring to establish a new nursing program that would lead to meeting requirements for licensure, change the level of educational preparation of the program, or establish an extension of an existing program shall:
 - 1) Submit a letter of intent to the Division.
 - 2) Provide a feasibility study to the Division, on forms provided by the Division, that includes, at least, documentation of:
 - A) Need for the program in the community;
 - B) Need for graduates of the proposed program;
 - C) Availability of students;
 - D) Impact on existing nursing programs in a 50 mile radius of the proposed program;
 - E) Potential for qualified faculty, including the curriculum vitae of any potential faculty members;
 - F) Adequacy of clinical practicum and academic resources;
 - G) Financial commitment to support the initial and continuing program;
 - H) Community support of the scope and philosophy of the program;
 - I) Authorization by the appropriate education agency of the State of Illinois; and

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- J) A timetable for development of the program and the intended date of the first class beginning.
- 3) Identify a qualified nurse administrator with a minimum of a master's degree in nursing and with experience as a nurse educator, and provide a curriculum vitae of the proposed nurse administrator.
 - 4) Submit a curriculum proposal including:
 - A) Program philosophy and objectives;
 - B) A plan of organization that is logical and internally consistent;
 - C) Proposed plans of study, including requisite and elective courses with rationale;
 - D) Course outlines or syllabi for all nursing courses;
 - E) Student handbook;
 - F) Faculty qualifications;
 - G) Instructional approaches to be employed;
 - H) Evaluation plans for progress, faculty and students;
 - I) Facilities and utilization plan; and
 - J) Budget plan.
 - 5) Coordinate with the Division and/or Nursing Coordinator for a site visit to be conducted prior to program approval.
- b) Continued Program Approval
 - 1) Nursing education programs shall submit annual evaluation reports to the Division on forms provided by the Division. These reports shall contain

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information regarding curriculum, faculty and students and other information deemed appropriate by the Division.

- 2) Full routine site visits may be conducted by the Division for periodic evaluation. The visits will be utilized to determine compliance with the Act. Unannounced site visits may be conducted when the Division obtains evidence that would indicate the program is not in compliance with the Act or this Part.
 - 3) A pass rate of graduates on the National Council Licensing Examination (NCLEX) shall be included in the annual evaluation of nursing education programs.
 - A) A pass rate of 75% of first time examinees will be required for a school to remain in good standing.
 - B) A nursing education program having an annual pass rate of less than 75% of first time examinees for one year will receive a written warning of noncompliance from the Division.
 - C) A nursing education program having an annual pass rate of less than 75% of first time examinees for 2 consecutive years will receive a site visit for evaluation and recommendation by the Division and will be placed on probation for program revision in accordance with 68 Ill. Adm. Code 1110.
 - D) The nursing education program will have 2 years to demonstrate evidence of implementing strategies to correct deficiencies and bring the pass rate in line with the 75% criteria.
 - E) If, 2 years after implementing the strategies to correct deficiencies in the program, the annual pass rate is less than 75%, the program will be reevaluated. The program will be allowed to continue to operate on a probationary status or will be disapproved and removed from the list of Illinois approved nursing programs in accordance with 68 Ill. Adm. Code 1110.
- c) Major Curricular Revision

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Nursing education programs desiring to make a major curricular revision, i.e., addition or deletion of content, a substantive change in philosophy or conceptual framework, or length of program, shall:

- 1) Submit a letter of intent to the Division; and
 - 2) Submit a copy of the proposed changes and new material to the Division, at least one term prior to implementation, for Board recommendation and Division approval in accordance with the standards set forth in subsection (f).
- d) **Minor Curricular Revisions**
Nursing education programs desiring to make curricular revisions involving reorganization of current course content but not constituting a major curriculum revision shall submit the proposed changes to the Division in their annual report.
- e) **Organization and Administration**
- 1) An institution responsible for conducting a nursing education program shall be authorized by the appropriate agency of the State of Illinois (e.g., Illinois Board of Higher Education, State Board of Education, Illinois Community College Board);
 - 2) The relationship of the nursing education program to other units within the sponsoring institution shall be clearly delineated with organizational charts on file with the Division;
 - 3) Nursing education programs shall have clearly defined lines of authority, responsibility and communication;
 - 4) Student input into determination of academic policies and procedures, curriculum planning and evaluation of faculty effectiveness shall be assured as evidenced by information such as student membership on policy and evaluation committees, policy statements and evaluation procedures;
 - 5) Nursing education program policies and procedures shall be in written form, congruent with those of the sponsoring institution, and reviewed by members of the program on a regular schedule;

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- 6) The philosophy, purpose and objectives of the nursing education program shall be stated in writing and shall be consistent with the sponsoring institution and current social, nursing and educational trends and the Act.
- f) Curriculum and Instruction
- 1) The curriculum shall be based upon the stated program purpose, philosophy and outcomes;
 - 2) Levels of progression in relation to the stated program outcomes shall be established;
 - 3) Coordinated clinical and theoretical learning experiences shall be consistent with the program outcomes;
 - 4) Curricular content shall reflect contemporary nursing practice encompassing major health needs of all age groups;
 - 5) The entire curriculum shall be based on sound nursing, education and instructional principles;
 - 6) The curriculum shall be evaluated by faculty with student input, according to a stated plan;
 - 7) The program shall be approved by the appropriate educational agency;
 - 8) Curriculum for the practical nursing programs shall:
 - A) Include, at a minimum, basic concepts of anatomy, physiology, chemistry, microbiology, physics, communications, growth and development, interpersonal relationships, psychology, sociology, cultural diversity, pharmacology (pharmacology course standards are set forth in Section 1300.240), nutrition and diet therapy, and vocational, legal and ethical aspects of nursing;
 - B) Not preclude a flexible curriculum that would provide appropriate integration of the nursing subject areas;

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- C) Provide basic theoretical and clinical instruction in all areas of nursing practice in the promotion, prevention, restoration and maintenance of health in individuals and groups across the life span and in a variety of clinical settings;
 - D) Incorporate the nursing process as an integral part of the curriculum;
 - E) Prepare the student to assume entry level practical nursing positions to assist clients with normal and common health problems through use of basic nursing skills;
 - F) Be at least one academic year in length; and
 - G) If a military program, consist of a minimum of 36 to 40 weeks of theory and clinical instruction incorporating the curriculum outlined in subsection (f)(8)(A).
- g) Nursing Administrator and Faculty
- 1) The institution responsible for conducting the nursing program and the nurse administrator of the nursing education program shall be responsible for ensuring that the individual faculty members are academically and professionally qualified.
 - 2) Nursing education programs shall be administered by the nurse administrator of the nursing education program.
 - 3) The nurse administrator and faculty of a nursing education program shall be currently licensed as registered professional nurses in Illinois.
 - 4) The nurse administrator of a nursing education program shall have at least:
 - A) 2 years experience in clinical nursing practice;
 - B) 2 years experience as an instructor in a nursing education program; and
 - C) a master's degree or higher with a major in nursing.

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- 5) Nurse faculty of a practical nursing program shall have:
 - A) At least 2 years experience in clinical nursing practice; and
 - B) A baccalaureate degree or higher with a major in nursing.
- 6) The requirements of subsections (g)(4) and (5) shall not affect incumbents as of the original date these requirements were adopted, January 14, 1980.
- 7) Nurse administrators of nursing education programs shall be responsible for:
 - A) Administration of the nursing education program;
 - B) Liaison with other units of the sponsoring institution;
 - C) Preparation and administration of the budget;
 - D) Facilitation of faculty development and performance review;
 - E) Facilitation and coordination of activities related to academic policies, personnel policies, curriculum, resource facilities and services, and program evaluation; and
 - F) Notification to the Division of program changes.
- 8) Faculty shall be responsible for:
 - A) Development, implementation and evaluation of the purpose, philosophy and objectives of the nursing education program;
 - B) Design, implementation and evaluation of curriculum for the nursing education program;
 - C) Participation in academic advising of students;
 - D) Development and evaluation of student policies; and

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- E) Evaluation of student performance in meeting the objectives of the program.
- 9) Faculty shall participate in:
- A) Selection, promotion and tenure activities;
 - B) Academic activities of the institution;
 - C) Professional and health related community activities;
 - D) Self-development activities for professional and personal growth;
 - E) Research and other scholarly activities for which qualified; and
 - F) Activities that maintain educational and clinical expertise in areas of teaching.
- 10) Clinical experience must be under direct supervision of qualified faculty as set forth in this subsection (g) or with a registered nurse preceptor. The nurse preceptor shall be approved by the parent institution and shall work under the direction of a nurse faculty member.
- 11) The ratio of students to faculty in the clinical area shall be appropriate to the clinical learning experience:
- A) When under direct supervision of the faculty, the ratio shall not exceed 10 to 1.
 - B) When a registered nurse preceptor is used, the ratio of students to faculty member shall not exceed 12 to 1.
- h) Financial Support, Facilities, Records
- 1) Adequate financial support for the nursing education program, faculty and other necessary personnel, equipment, supplies and services shall be in evidence in the program budget.

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- 2) The faculty of the nursing education program and the staff of cooperating agencies used as sites for additional theory and clinical experience shall work together for quality of patient care.
- 3) Articles of Affiliation
 - A) The nursing education program shall have Articles of Affiliation between the nursing education program and each clinical facility that define the rights and responsibilities of each party, including agreements on the role and authority of the governing bodies of both the clinical site and the nursing education program.
 - B) If portions of the required clinical or theoretical curriculum are offered at different geographical sites or by distance learning, the curriculum must be planned, supervised, administered and evaluated in concert with appropriate faculty committees, department chairmen and administrative officers of the parent school.
- 4) There shall be adequate facilities for the nursing program for both academic and clinical experiences for students.
- 5) There shall be access to learning resource facilities, including library and multi-media technology, that are reasonably sufficient for the curriculum and the number of students enrolled in the nursing education programs.
- 6) Cooperating agencies shall be identified to the Division and shall be suitable to meet the objectives of the program.
- 7) Addition or deletion of cooperating agencies shall be reported in writing to the Division on the program annual report.
- 8) The nursing program's policies and procedures shall not violate constitutional rights and shall be written and available to faculty and students.
- 9) Permanent student records that summarize admissions, credentials, grades and other records of performance shall be maintained by the program.

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- i) Denial of Approval of Nursing Program
If the Division, in the course of reviewing an application for approval of a nursing program, determines that an applicant program has failed to comply with the application criteria or procedures outlined in this Part, or receives information that indicates that the applicant program will not be able to comply with the conditions set forth in subsection (b), the Division may deny the application for approval.
- j) Discontinuance of a Nursing Program
 - 1) Prior to terminating a nursing education program, the program shall:
 - A) Notify the Division, in writing, of its intent to discontinue its program;
 - B) Continue to meet the requirements of the Act and this Part until the official date of termination of the program;
 - C) Notify the Division of the date on which the last student will graduate and the program terminate; and
 - D) Assume responsibility for assisting students to continue their education in the event of closing of the school prior to the final student graduating.
 - 2) Upon closure of the nursing education program, the institution shall notify the Division, in writing, of the location of student and graduate records storage.
- k) Revocation of Program Approval
 - 1) The following are grounds for disapproval of a nursing education program:
 - A) A violation of any provision of the Act;
 - B) Fraud or dishonesty in applying for approval of a nursing education program;

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- C) Failure to continue to meet criteria of an approved nursing education program set forth in this Section; or
 - D) Failure to comply with recommendations made by the Division as a result of a site visit.
- 2) Upon written notification of the Division's proposed action, the nursing education program may:
- A) Submit a written response;
 - B) Request a hearing before the Board.
- 1) Out-of-State Education Programs Seeking Student Nurse Clinical Placement in Illinois
- 1) Out-of-state nursing education programs offering clinical experiences in Illinois are expected to maintain the standards for approved nursing education programs set forth in this Section.
 - 2) Programs desiring to seek approval for student nurse clinical placement in Illinois shall submit the following documents:
 - A) Evidence of approval/accreditation by the Board of Nursing or other appropriate approval bodies in the state in which the institution is located.
 - B) A letter requesting approval to provide the clinical offering that indicates the time-frame during which the clinical experience will be conducted, the clinical agencies and the clinical units to be utilized.
 - C) A course syllabus for the clinical experiences to be offered that specifies the related objectives of the offering.
 - D) A copy of the executed contractual agreement between the academic institution and the clinical facility.

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- E) A faculty qualification and/or preceptor form for individuals providing instruction in Illinois.
- 3) Faculty
- A) The institution responsible for conducting the nursing program and the administrator of the nursing education program shall be responsible for ensuring that the individual faculty members are academically and professionally qualified.
 - B) Nurse faculty of a practical nursing program shall have:
 - i) at least 2 years experience in clinical nursing practice; and
 - ii) a baccalaureate degree or higher with a major in nursing.
 - C) The faculty shall be currently licensed as registered professional nurses in Illinois.
 - D) Clinical experience must be under direct supervision of qualified faculty as set forth in subsection (g) or with a registered nurse preceptor. The nurse preceptor shall be approved by the parent institution and shall work under the direction of a nurse faculty member.
 - E) The ratio of students to faculty in the clinical area shall be appropriate to the clinical learning experience.
 - i) When under direct supervision of the faculty, the ratio shall not exceed 10 to 1.
 - ii) When a registered nurse preceptor is used, the ratio of students to faculty member shall not exceed 12 to 1.
- 4) Approval for clinical offerings by out-of-state nursing programs shall be approved for a period of 2 years. A program representative may request renewal of the approval every 2 years. In order to renew, the program shall submit a written report that provides updated and current data as required by this subsection (l).

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- 5) A written report of current clinical offerings and current data shall be submitted to the Division annually. Faculty qualification and preceptor forms shall be submitted when instructors are added or changed.
- 6) Failure to comply with the requirements set forth in this Part shall result in the immediate withdrawal of approval of the clinical experience offering.
- m) If the name of the program is changed or the institution in which the program is located or with which it is affiliated changes its name, the program shall notify the Division within 30 days after the name change. If the Division is not notified within the 30 days, the program's approval may be withdrawn.
- n) The Division has determined that nurse programs approved through the National League for Nursing Accrediting Commission or the Commission on Collegiate Accreditation meet the requirements set forth in this Section, except for those programs whose curriculums do not include a concurrent theory and clinical practice education component as required by Section 50-70 of the Act.

Section 1300.240 Standards for Pharmacology/Administration of Medication Course for Practical Nurses

- a) Approved licensed practical nursing programs shall include a course designed to educate practical nursing students and/or licensed practical nurses to administer medications via oral, topical, subcutaneous, intradermal and intramuscular routes under the direction of a registered professional nurse, advanced practice nurse, physician assistant, physician, dentist or podiatrist that contains the following minimum components:
 - 1) Prerequisites
 - A) Basic computational math and high school algebra with proficiency in the following concepts, including, but not limited to, ratios and proportions and metric, apothecary and household measurements as documented via examination and/or coursework completed.
 - B) Basic scientific knowledge, including, but not limited to, microbiology/asepsis and anatomy and physiology with a basic

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understanding of fluid and electrolytes, the inflammatory response, the immune response, and body systems as documented via examination or coursework.

- 2) Pharmacology
 - A) An introduction to pharmacology, including the areas of:
 - i) Terminology and abbreviations
 - ii) Federal and State laws related to pharmacology (e.g., Illinois Controlled Substances Act [720 ILCS 570]; federal Food, Drug and Cosmetic Act (21 USC 360))
 - iii) Drug standards and references (i.e., United States Pharmacopoeia/National Formulary)
 - iv) Generic versus brand name drugs
 - v) Misuse/abuse of drugs
 - B) Classifications of drugs (with commonly used examples), including:
 - i) Action/Physiological effect
 - ii) Interactions
 - iii) Side effects and contraindications
 - iv) Dosages and routes
 - v) Nursing implications (including legal implications)
- 3) Administration of Medication
 - A) Following procedures of safety as described in subsections (a)(3)(C), (D), (E) and (F) in administering medications.

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- B) Developmental adaptations for administering medications to patients of all ages.
 - C) Assessment of patient condition.
 - D) Planning for administration of medication, including:
 - i) Checking for an order from an advanced practice nurse, physician assistant, physician, dentist or podiatrist
 - ii) Securing proper equipment
 - iii) Verifying proper packaging of medication
 - E) Implementation of administration of medication, including:
 - i) Site selection
 - ii) Verifying route of administration
 - iii) Administering the medication
 - iv) Recording medication administration
 - v) Patient education for compliance
 - F) Evaluation of patient response, including:
 - i) Effects/side effects/allergic responses
 - ii) Recording/reporting of effects
- b) This Section does not preclude a flexible curriculum that would provide appropriate integration into other practical nursing courses.
- c) The course/instruction shall include at least 32 hours of theory and 64 hours of lab and clinical with administration of medication to patients performed under direct supervision of qualified faculty as set forth in subsection (d).

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- d) Nurse faculty of pharmacology and administration of medication courses shall have:
 - 1) At least 2 years experience in clinical nursing practice;
 - 2) A baccalaureate degree with a major in nursing;
 - 3) A current Illinois Registered Professional Nurse license.
- e) Approved licensed practical nursing programs shall include a curriculum designed to educate practical nursing students and/or licensed practical nurses to perform the following activities related to intravenous therapy under the supervision of a registered professional nurse, advanced practice nurse, physician assistant, physician, dentist or podiatrist:
 - 1) Monitoring the flow rate of existing intravenous lines.
 - 2) Regulating peripheral fluid infusion rates for a continuous infusion of fluids or for intermittent infusions, through an IV access device. A peripheral IV line is defined as a short catheter inserted through the skin terminating in a peripheral vein.
 - 3) Observing sites for local reaction and reporting results to the registered nurse.
 - 4) Discontinuing intravenous therapy with an order from an advanced practice nurse, physician assistant, physician, dentist or podiatrist.
 - 5) Adding pharmacy pre-mixed antibiotic solutions to existing patent lines.
 - 6) Changing peripheral intravenous tubings and dressings.
 - 7) Monitoring existing transfusions of blood and blood components.
 - 8) Documenting intravenous procedures performed and observations made.
- f) This curriculum may prepare the LPN to start peripheral intravenous therapy that consists of a short catheter inserted through the skin into a peripheral vein.

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- g) The curriculum shall not include the following procedures:
- 1) Administering chemotherapeutic agents via intravenous routes.
 - 2) Starting or adding blood or blood components.
 - 3) Administering medications via intravenous push or administering heparin in heparin locks.

Section 1300.250 LPN Scope of Practice

Practice as a licensed practical nurse means a scope of basic nursing practice, with or without compensation, as delegated by a registered professional nurse or an advanced practice nurse or as directed by a physician assistant, physician, dentist or podiatrist, and includes all of the following and other activities requiring a like skill level for which the LPN is properly trained:

- a) *Collecting data and collaborating in the assessment of the health status of a patient.*
- b) *Collaborating in the development and modification of the registered professional nurse's or advanced practice nurse's comprehensive nursing plan of care for all types of patients.*
- c) *Implementing aspects of the plan of care as delegated.*
- d) *Participating in health teaching and counseling to promote, attain, and maintain the optimum health level of patients, as delegated.*
- e) *Serving as an advocate for the patient by communicating and collaborating with other health service personnel, as delegated.*
- f) *Participating in the evaluation of patient responses to interventions.*
- g) *Communicating and collaborating with other health care professionals, as delegated.*
- h) *Providing input into the development of policies and procedures to support patient safety. (Section 55-30 of the Act)*

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Section 1300.260 Standards for Professional Conduct for LPNs

- a) The licensed practical nurse shall, but is not limited to, upholding the following professional standards:
 - 1) Practice in accordance with the Act and this Part;
 - 2) Practice nursing only when in functional physical and mental health;
 - 3) Be accountable for his or her own nursing actions and competencies;
 - 4) Practice or offer to practice, including delegated nursing activities, only within the scope permitted by law and within the licensee's own educational preparation and competencies;
 - 5) Perform nursing activities as delegated;
 - 6) Seek instruction from a registered professional nurse or advanced practice nurse when implementing new or unfamiliar nursing activities;
 - 7) Report unsafe, unethical or illegal health care practice or conditions to appropriate authorities and to the Division;
 - 8) Assume responsibility for continued growth and education to reflect knowledge and understanding of current nursing care practice.
- b) Violations of this Section may result in discipline as specified in Section 70-5 of the Act. All disciplinary hearings shall be conducted in accordance with 68 Ill. Adm. Code 1110.

SUBPART C: REGISTERED NURSE

Section 1300.300 Application for Examination or Licensure

- a) Each applicant shall file, with the Division or the testing service designated by the Division, a completed, signed application, on forms supplied by the Division, that includes:

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- 1) proof of graduation from a nursing education program that meets the requirements of Section 1300.40;
- 2) verification of fingerprint processing from the Illinois Department of State Police, or its designated agent. (Practical nurses licensed in Illinois are not required to be fingerprinted when applying for a license as a registered professional nurse.) Applicants shall contact a Division recommended fingerprint vendor for fingerprint processing. Out-of-state residents unable to utilize an electronic fingerprint process may submit to a Division recommended fingerprint vendor one set of fingerprint cards issued by the Illinois Department of State Police or one set of fingerprint cards issued by the FBI, accompanied by the processing fee specified in Section 1300.30(c)(7). Fingerprints shall be taken within the 60 days prior to application;
- 3) the fees required by Section 1300.30(a)(1);
- 4) for applicants educated outside the United States or its territories, the following:
 - A) a credentials evaluation report of the applicant's foreign nursing education from either the Commission on Graduates of Foreign Nursing Schools (CGFNS) Credentials Evaluation Service (CES) or the Educational Records Evaluation Service (ERES). However, the Division shall not accept a credential report that does not indicate that the applicant is licensed in his/her country of education or in which the report does not evaluate the educational program of the applicant based upon receipt and review of official transcripts from the nursing education program bearing the school seal; these credential reports shall not be accepted as valid credential reports. In order to be accepted by the Division, credential reports shall be in a form and manner acceptable to the Division.
 - B) if the applicant's first language is not English, certification of passage of either the Test of English as a Foreign Language (TOEFL) or the International English Language Testing System (IELTS) Academic Module. For TOEFL the minimum passing score on the paper-based test is 560, computer-based test is 220,

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and internet-based test is 83. For the IELTS Academic Module, the minimum passing score shall be 6.5 (overall score) and 7.0 (spoken band). The Division may, upon recommendation from an approved credentials evaluation service, waive the requirement that the applicant pass the TOEFL or IELTS examination if the applicant submits verification of the successful completion of a nursing education program conducted in English or the passage of an approved licensing examination given in English;

- 5) verification from the jurisdictions in which the applicant was originally licensed, current state of licensure and any other jurisdiction in which the applicant has been actively practicing within the last 5 years, if applicable, stating:
 - A) the time during which the applicant was licensed in that jurisdiction, including the date of original issuance of the license; and
 - B) whether the file on the applicant contains any record of disciplinary actions taken or pending.
- b) Any applicant who fails to demonstrate fulfillment of the education requirements shall be notified in writing and must satisfy the deficiency before being granted temporary authority to practice nursing, as permitted by Section 60-10 of the Act, or being admitted to the examination. Deficiencies in nursing theory and/or clinical practice may be removed by taking the required courses in an approved nursing education program.
- c) When the applicant has completed the nursing education program in less than the usual length of time through advanced standing or transfer of credits from one institution to another, the director of nursing education shall include an explanation in the certification.
- d) Pursuant to Section 50-70 of the Act, when an applicant has completed a nonapproved program that is a correspondence course or a program of nursing that does not require coordinated or concurrent theory and clinical practice, the Division may grant a license to an applicant who has applied in accordance with subsection (a) and who has received an advanced graduate degree in nursing from an approved program with concurrent theory and clinical practice or who is

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currently licensed in another state and has been actively practicing in clinical nursing for a minimum of 2 years. Clinical practice for purposes of this Section means nursing practice that involves direct physical (psychomotor and psychosocial) patient (client) care within an acute care facility.

- 1) Clinical practice areas that would meet the requirements for clinical practice include the following:
 - A) Adult Medical Surgical Nursing
 - B) Pediatric Nursing
 - C) Maternity Nursing
 - D) Emergency Nursing
 - E) Critical Care Nursing
 - F) Post-Anesthesia Care Nursing
 - G) Psychiatric Nursing
 - 2) Clinical practice shall not include:
 - A) Telephone or Triage Nursing
 - B) Case Management
 - 3) A year of clinical practice consists of not less than 1500 hours of direct patient care.
 - 4) The Board of Nursing will review clinical practice documentation that does not meet the requirements of this subsection (d).
- e) Credentials of education and licensure, if not in English, shall be accompanied by a certified translation.
- f) After filing the original application, any change of name must be supported by an affidavit satisfactory to the Division.

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- g) If an applicant has taken and passed the National Council Licensure Examination (NCLEX) in accordance with Section 1300.310, the applicant shall file an application in accordance with subsection (a) and shall have the examination scores submitted to the Division directly from the testing entity or from the state of original licensure.

Section 1300.310 RN Licensure Examination

- a) The Board shall make recommendations to the Division regarding content, design and contractor for a licensure examination. A licensure examination contract shall be negotiated and approved by the Division.
- b) Registered Professional Nurse Examination
- 1) The passing grade on the National Council Licensure Examination (NCLEX) for registered professional nurses shall be based on an ability scale designed to measure minimum RN competency. A pass/fail grade will be assigned.
 - 2) An RN applicant who fails the examination is not eligible for licensure
 - 3) If the examination is not passed within 3 years from the date of application, regardless of jurisdiction in which the examination was written, the applicant shall not be permitted to retake the examination until the applicant has successfully completed at least 2 additional years of professional nursing education. Upon successful completion of the approved nursing education program, the applicant shall submit proof to the Division. This subsection (b)(3) does not apply to applicants who are licensed in another jurisdiction.
 - 4) If 3 years from the date of original application has lapsed, the applicant shall be required to submit a new application to the Division pursuant to Section 60-10 of the Act and provide evidence of meeting the requirements in force at the time of the new application.

Section 1300.320 RN Licensure by Endorsement

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- a) Each applicant who is licensed in another jurisdiction shall file a completed, signed application for licensure on the basis of endorsement, on forms supplied by the Division. The application shall include:
- 1) the fee required by Section 1300.30(a)(1);
 - 2) proof of graduation from a nursing education program that meets the requirements of Section 1300.340;
 - 3) proof of passage of an examination recognized by the Division, upon recommendation of the Board (i.e., National Council Licensure Examination for professional nurses, or State Board Test Pool Examination for professional nurses or practical nurses);
 - 4) verification of fingerprint processing from the Illinois Department of State Police, or its designated agent. (Practical nurses licensed in Illinois are not required to be fingerprinted when applying for a license as a registered professional nurse.) Applicants shall contact a Division recommended fingerprint vendor for fingerprint processing. Out-of-state residents unable to utilize an electronic fingerprint process may submit to a Division recommended fingerprint vendor one set of fingerprint cards issued by the Illinois Department of State Police or one set of fingerprint cards issued by the FBI, accompanied by the processing fee specified in Section 1300.30(c)(7). Fingerprints shall be taken within the 60 days prior to application;
 - 5) for RN applicants who received education outside of the United States:
 - A) A credentials evaluation report of the applicant's foreign nursing education from either the Commission on Graduates of Foreign Nursing Schools (CGFNS) Credentials Evaluation Service (CES) or the Educational Records Evaluation Service (ERES). However, the Division shall not accept a credential report that does not indicate that the applicant is licensed in his/her country of education or in which the report does not evaluate the educational program of the applicant based upon receipt and review of official transcripts from the nursing education program bearing the school seal. These credential reports shall not be accepted as valid credential reports. In order to be accepted by the Division,

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credential reports shall be in a form and manner acceptable to the Division.

- B) The requirements of subsection (a)(5)(A) may be satisfied by the submission of proof of a certificate from the Certificate Program or the VisaScreen Program of the Commission on Graduates of Foreign Nursing Schools.
 - C) If the applicant's first language is not English, certification of passage of either the Test of English as a Foreign Language (TOEFL) or the International English Language Testing System (IELTS) Academic Module. For TOEFL, the minimum passing score on the paper-based test is 560, computer-based test is 220, and internet-based test is 83. For the IELTS Academic Module, the minimum passing score shall be 6.5 (overall score) and 7.0 (spoken band). The Division may, upon recommendation from an approved credentials evaluation service, waive the requirement that the applicant pass the TOEFL or IELTS examination if the applicant submits verification of the successful completion of a nursing education program conducted in English or the passage of an approved licensing examination given in English;
 - 6) official transcripts of theory and clinical education prepared by an official of the military for a nurse applicant who has received his/her education in the military service. Education must meet the standards for education set forth in Section 1300.340;
 - 7) verification of licensure status from the jurisdiction in which the applicant was originally licensed, current licensure and any other jurisdiction in which the applicant has been actively practicing within the last 5 years; and
 - 8) a certified translation for all credentials of education and licensure, if not in English.
- b) After filing the original application, any change of name must be supported by an affidavit satisfactory to the Division.

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- c) Deficiencies in nursing theory and/or clinical practice may be removed by taking the required courses in an approved nursing education program.
- d) Compliance with the provisions of Section 1300.310(b)(3) for each RN applicant and shall be a requirement for Illinois nurse licensure by endorsement.
- e) Individuals applying for licensure by endorsement may apply to the Division, on forms provided by the Division, to receive a Temporary Endorsement Permit pursuant to Section 60-10 of the Act. The permit shall allow the applicant to work pending the issuance of a license by endorsement.
 - 1) The temporary endorsement permit application shall include:
 - A) a completed, signed endorsement application, along with the required endorsement licensure fee set forth in Section 1300.30(a)(2). All supporting documents shall be submitted to the Division before a permanent license by endorsement is issued;
 - B) photocopies of all current active nursing licenses and/or temporary permits/licenses from other jurisdictions. Current active licensure in at least one United States jurisdiction is required. Each applicant's license will be checked on the Nurse System (NURSYS) disciplinary data bank to determine if any disciplinary action is pending on the applicant's file;
 - C) verification that fingerprints have been submitted to the Division or the Illinois Department of State Police or its designated agent; and
 - D) the fee for a temporary permit as required in Section 1300.30(a)(2) of this Part.
 - 2) The Division shall issue a temporary endorsement permit no later than 14 days after receipt of a completed application as set forth in subsection (e)(1).
 - 3) Temporary permits shall be terminated upon:
 - A) the issuance of a permanent license by endorsement;

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- B) failure to complete the application process within 6 months from the date of issuance of the permit;
 - C) a finding by the Division that, within the last 5 years, the applicant has been convicted of any crime under the laws of any jurisdiction of the United States that is:
 - i) a felony; or
 - ii) a misdemeanor directly related to the practice of nursing;
 - D) a finding by the Division that, within the last 5 years, the applicant has had a license or permit related to the practice of nursing revoked, suspended or placed on probation by another jurisdiction, if at least one of the grounds is substantially equivalent to grounds in Illinois; or
 - E) a finding by the Division that the applicant does not meet the licensure requirements for endorsement set forth in this Section. The Division shall notify the applicant in writing of the termination.
- 4) The Division shall notify the applicant by certified or registered mail of the intent to deny licensure pursuant to subsections (e)(3)(D) and (E) and/or Section 70-5 of the Act.
- 5) A temporary permit shall be renewed beyond the 6-month period, upon recommendation of the Board and approval of the Director, due to hardship, defined as:
- A) serving full-time in the Armed Forces;
 - B) an incapacitating illness as documented by a currently licensed physician;
 - C) death of an immediate family member; or

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- D) extenuating circumstances beyond the applicant's control, as approved by the Director.

Section 1300.330 Nurse Externship

- a) Each applicant for a nurse externship permit shall file a completed, signed application on forms supplied by the Division. The application shall include:
- 1) proof of graduation from an RN educational program approved by the Division;
 - 2) verification of licensure as an RN in another state or territory of the United States and proof of an active and unencumbered license in all of the states or territories in which the applicant is licensed;
 - 3) verification of an offer for employment in Illinois as a nurse extern and a copy of the written employment offer;
 - 4) a letter of acceptance from the Bilingual Nurse Consortium course or other comparable course approved by the Division;
 - 5) verification from the applicant's prospective employer stating that the prospective employer agrees to pay the full tuition for the Bilingual Nurse Consortium course or other comparable course approved by the Division;
 - 6) proof of taking the Test of English as a Foreign Language (TOEFL) or the International English Language Testing System (IELTS) Academic Module. For TOEFL a minimum passing score on the paper-based test of 560, computer-based test of 220, or internet-based test of 83. For the IELTS Academic Module, the minimum passing score shall be 6.5 (overall score) and 7.0 (spoken band);
 - 7) proof that the applicant has not violated the provisions of Section 10-45 of the Act; and
 - 8) the required externship permit fee set forth in Section 1300.30(a)(3).

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- b) The nurse extern must submit to the Division a mid-year exam as determined by the Bilingual Nurse Consortium that demonstrates proficiency towards passing the NCLEX.
- c) A nurse extern shall be issued only one permit that shall expire one calendar year after it is issued.

Section 1300.340 Approval of Programs

- a) Program Approval
Institutions desiring to establish a new nursing program that would lead to meeting requirements for licensure, change the level of educational preparation of the program, or establish an extension of an existing program shall:
 - 1) Submit a letter of intent to the Division.
 - 2) Provide a feasibility study to the Division, on forms provided by the Division, that includes, at least, documentation of:
 - A) Need for the program in the community;
 - B) Need for graduates of the proposed program;
 - C) Availability of students;
 - D) Impact on existing nursing programs in a 50 mile radius of the proposed program;
 - E) The curriculum vitae of identifiable faculty, including the curriculum vitae of any potential faculty members that will teach in the program;
 - F) Adequacy of clinical practicum and academic resources;
 - G) Financial commitment to support the initial and continuing program;
 - H) Community support of the scope and philosophy of the program;

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- D) Authorization by the appropriate education agency of the State of Illinois; and
 - J) A timetable for development of the program and the intended date of the first class beginning.
- 3) Identify and provide a curriculum vitae of a qualified nurse administrator with a minimum of a master's degree in nursing and with experience as a nurse educator.
- 4) Submit a curriculum proposal including:
- A) Program philosophy and objectives;
 - B) A plan of organization that is logical and internally consistent;
 - C) Proposed plans of study, including requisite and elective courses with rationale;
 - D) Course outlines or syllabi for all nursing courses;
 - E) Student handbook;
 - F) Faculty qualifications;
 - G) Instructional approaches to be employed;
 - H) Evaluation plans for faculty and students;
 - I) Facilities and utilization plan; and
 - J) Budget plan.
- 5) Coordinate with the Division and/or Nursing Coordinator for a site visit to be conducted prior to program approval.
- b) Continued Program Approval

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- 1) Nursing education programs shall submit annual evaluation reports to the Division on forms provided by the Division. These reports shall contain information regarding curriculum, faculty and students and other information deemed appropriate by the Division.
- 2) Full routine site visits may be conducted by the Division for periodic evaluation. The visits will be utilized to determine compliance with the Act. Unannounced site visits may be conducted when the Division obtains evidence that would indicate the program is not in compliance with the Act or this Part.
- 3) A pass rate of graduates on the National Council Licensing Examination (NCLEX) shall be included in the annual evaluation of nursing education programs.
 - A) A pass rate of 75% of first time examinees will be required for a school to remain in good standing.
 - B) A nursing education program having an annual pass rate of less than 75% of first time examinees for one year will receive a written warning of noncompliance from the Division.
 - C) A nursing education program having an annual pass rate of less than 75% of first time examinees for 2 consecutive years will receive a site visit for evaluation and recommendation by the Division and will be placed on probation for program revision in accordance with 68 Ill. Adm. Code 1110.
 - D) The nursing education program will have 2 years to demonstrate evidence of implementing strategies to correct deficiencies and bring the pass rate in line with the 75% criteria.
 - E) If, 2 years after implementing the strategies to correct deficiencies in the program, the annual pass rate is less than 75%, the program will be reevaluated. The program will be allowed to continue to operate on a probationary status or will be disapproved and removed from the list of Illinois approved nursing programs in accordance with 68 Ill. Adm. Code 1110.

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- c) **Major Curricular Revision**
Nursing education programs desiring to make a major curricular revision, i.e., addition or deletion of content, a substantive change in philosophy or conceptual framework, or length of program, shall:
 - 1) Submit a letter of intent to the Division; and
 - 2) Submit a copy of the proposed changes and new material to the Division, at least one term prior to implementation, for Board recommendation and Division approval in accordance with the standards set forth in subsection (f).
- d) **Minor Curricular Revisions**
Nursing education programs desiring to make curricular revisions involving reorganization of current course content but not constituting a major curriculum revision shall submit the proposed changes to the Division in their annual report.
- e) **Organization and Administration**
 - 1) An institution responsible for conducting a nursing education program shall be authorized by the appropriate agency of the State of Illinois (e.g., Illinois Board of Higher Education, State Board of Education, Illinois Community College Board);
 - 2) The relationship of the nursing education program to other units within the sponsoring institution shall be clearly delineated with organizational charts on file with the Division;
 - 3) Nursing education programs shall have clearly defined lines of authority, responsibility and communication;
 - 4) Student input into determination of academic policies and procedures, curriculum planning and evaluation of faculty effectiveness shall be assured as evidenced by information such as student membership on policy and evaluation committees, policy statements and evaluation procedures;

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- 5) Nursing education program policies and procedures shall be in written form, congruent with those of the sponsoring institution, and reviewed by members of the program on a regular schedule;
 - 6) The philosophy, purpose and objectives of the nursing education program shall be stated in writing and shall be consistent with the sponsoring institution and current social, nursing and educational trends and the Act.
- f) Curriculum and Instruction
- 1) The curriculum shall be based upon the stated program purpose, philosophy and objectives;
 - 2) Levels of progression in relation to the stated program outcomes shall be established;
 - 3) Coordinated clinical and theoretical learning experiences shall be consistent with the program outcomes;
 - 4) Curricular content shall reflect contemporary nursing practice encompassing major health needs of all age groups;
 - 5) The entire curriculum shall be based on sound nursing, education and instructional principles;
 - 6) The curriculum may include a Nursing Student Internship/Cooperative Education Course that meets the following minimum requirements:
 - A) The course must be available with the nursing major and identified on the transcript.
 - B) Faculty must meet approved nursing education program qualifications and hold faculty status with the educational unit.
 - C) Clinical content must be coordinated with theoretical content.
 - D) Clinical experience must be under direct supervision of qualified faculty as set forth in subsection (g) or with a registered nurse

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preceptor. The nurse preceptor shall be approved by the program and shall work under the direction of a nurse faculty member.

- E) Students shall not be permitted to practice beyond educational preparation or without faculty supervision.
 - F) The course shall be based on program purpose, philosophy, objectives and framework.
 - G) Course evaluation shall be consistent with the plan for program evaluation.
 - H) Articles of affiliation shall clearly delineate student, educational institution and health care agency roles and responsibilities;
- 7) The curriculum shall be evaluated by faculty with student input, according to a stated plan;
 - 8) The program shall be approved by the appropriate educational agency;
 - 9) Curriculum for professional nursing programs shall:
 - A) Include, at a minimum, concepts in anatomy, physiology, chemistry, physics, microbiology, sociology, psychology, communications, growth and development, interpersonal relationships, group dynamics, cultural diversity, pharmacology and the administration of medication, nutrition and diet therapy, patho-physiology, ethics, nursing history, trends and theories, professional and legal aspects of nursing, leadership and management in nursing, and teaching-learning theory;
 - B) Not preclude a flexible curriculum that would provide appropriate integration of the nursing subject matters;
 - C) Provide theoretical and clinical instruction in all areas of nursing practice in the promotion, prevention, restoration and maintenance of health in individuals and groups across the life span and in a variety of clinical settings;

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- D) Incorporate the nursing process as an integral part of the curriculum;
 - E) Prepare the student to assume beginning level professional nursing positions;
 - F) Be at least 2 academic years in length.
- g) Nursing Administrator and Faculty
- 1) The institution responsible for conducting the nursing program and the nurse administrator of the nursing education program shall be responsible for ensuring that the individual faculty members are academically and professionally qualified.
 - 2) Nursing education programs shall be administered by the nurse administrator of the nursing education program.
 - 3) The nurse administrator and faculty of a nursing education program shall be currently licensed as registered professional nurses in Illinois.
 - 4) The nurse administrator of a nursing education program shall have at least:
 - A) 2 years experience in clinical nursing practice;
 - B) 2 years experience as an instructor in an RN or higher nursing education program; and
 - C) a master's degree or higher with a major in nursing.
 - 5) Nurse faculty of a professional nursing program shall have:
 - A) At least 2 years experience in clinical nursing practice;
 - B) A master's degree or higher with a major in nursing.
 - 6) The requirements of subsections (g)(4) and (5) shall not affect incumbents as of the original date these requirements were adopted, January 14, 1980.

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- 7) Nurse administrators of nursing education programs shall be responsible for:
 - A) Administration of the nursing education program;
 - B) Liaison with other units of the sponsoring institution;
 - C) Preparation and administration of the budget;
 - D) Facilitation of faculty development and performance review;
 - E) Facilitation and coordination of activities related to academic policies, personnel policies, curriculum, resource facilities and services, and program evaluation; and
 - F) Notification to the Division of program changes.
- 8) Faculty shall be responsible for:
 - A) Development, implementation and evaluation of the purpose, philosophy and objectives of the nursing education program;
 - B) Design, implementation and evaluation of curriculum for the nursing education program;
 - C) Participation in academic advising of students;
 - D) Development and evaluation of student policies; and
 - E) Evaluation of student performance in meeting the objectives of the program.
- 9) Faculty shall participate in:
 - A) Selection, promotion and tenure activities;
 - B) Academic activities of the institution;
 - C) Professional and health related community activities;

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- D) Self-development activities for professional and personal growth;
 - E) Research and other scholarly activities for which qualified; and
 - F) Activities that maintain educational and clinical expertise in areas of teaching.
- 10) Clinical experience must be under direct supervision of qualified faculty as set forth in this subsection (g) or with a registered nurse preceptor. The nurse preceptor shall be approved by the parent institution and shall work under the direction of a nurse faculty member.
- 11) The ratio of students to faculty in the clinical area shall be appropriate to the clinical learning experience:
- A) When under direct supervision of the faculty, the ratio shall not exceed 10 to 1.
 - B) When a registered nurse preceptor is used, the ratio of students to faculty member shall not exceed 12 to 1.
- h) Financial Support, Facilities, Records
- 1) Adequate financial support for the nursing education program, faculty and other necessary personnel, equipment, supplies and services shall be in evidence in the program budget.
 - 2) The faculty of the nursing education program and the staff of cooperating agencies used as sites for additional theory and clinical experience shall work together for quality of patient care.
 - 3) Articles of Affiliation
 - A) The nursing education program shall have Articles of Affiliation between the nursing education program and each clinical facility that define the rights and responsibilities of each party, including agreements on the role and authority of the governing bodies of both the clinical site and the nursing education program.

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- B) If portions of the required clinical or theoretical curriculum are offered at different geographical sites or by distance learning, the curriculum must be planned, supervised, administered and evaluated in concert with appropriate faculty committees, department chairmen and administrative officers of the parent school.
 - 4) There shall be adequate facilities for the nursing program for both academic and clinical experiences for students.
 - 5) There shall be access to learning resource facilities, including library and multi-media technology, that are reasonably sufficient for the curriculum and the number of students enrolled in the nursing education programs.
 - 6) Cooperating agencies shall be identified to the Division and shall be suitable to meet the objectives of the program.
 - 7) Addition or deletion of cooperating agencies shall be reported in writing to the Division on the program annual report.
 - 8) The nursing program's policies and procedures shall not violate constitutional rights and shall be written and available to faculty and students.
 - 9) Permanent student records that summarize admissions, credentials, grades and other records of performance shall be maintained by the program.
- i) Faculty Variance
- 1) Variances for faculty with a graduate degree in a field other than nursing may be granted by the Division based on the following:
 - A) the individual has a bachelor's degree in nursing;
 - B) the individual has at least 2 years of experience in clinical nursing practice;

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- C) the individual has a degree in a field that directly relates to the course he or she will be teaching;
 - D) at least 80% of the school's undergraduate nursing faculty holds a master's degree in nursing.
- 2) Variances for faculty without a graduate degree will be granted based on the following:
- A) the faculty member is within one year of completion of the master's in nursing or the faculty member has completed a master's in another area or is enrolled in a doctoral degree in nursing program and has completed all coursework, except for a dissertation/final project;
 - B) the faculty member is continuously enrolled in the graduate degree in nursing program;
 - C) a plan exists for the timely completion of the graduate degree in nursing program; and
 - D) at least 80% of the school's undergraduate nursing faculty holds a master's degree in nursing.
- 3) A school that has received a variance must notify the Board of any changes related to that faculty member, including notification that the faculty member has received the graduate degree.
- j) Preceptors
A program of registered professional nursing that uses the personnel of a clinical facility as preceptors to instruct the clinical experience must:
- 1) Require each preceptor to have demonstrated competencies with patient populations that the student is assigned to;
 - 2) Require each preceptor to be approved by the faculty of the program of nursing;

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- 3) Require the faculty of the program to provide to each preceptor an orientation concerning the roles and responsibilities of students, faculty and preceptors;
 - 4) Require the faculty of the program to develop written competencies/outcomes and provide a copy of these to each preceptor before the preceptor begins instruction of the students;
 - 5) Designate a member of the faculty to serve as a liaison between the preceptor and each student who participates in the clinical experience;
 - 6) Require that each preceptor is present in the clinical facility or at the location of point of care and available to the students at all times when the student provides nursing care or services to patients/clients;
 - 7) Require that each preceptor have a current registered professional nurse license in the state where the student is practicing.
- k) Denial of Approval of Nursing Program
If the Division, in the course of reviewing an application for approval of a nursing program, determines that an applicant program has failed to comply with the application criteria or procedures outlined in this Part, or receives information that indicates that the applicant program will not be able to comply with the conditions set forth in subsection (b), the Division may deny the application for approval.
- l) Discontinuance of a Nursing Program
- 1) Prior to termination of a nursing education program, the program shall:
 - A) Notify the Division, in writing, of its intent to discontinue its program;
 - B) Continue to meet the requirements of the Act and this Part until the official date of termination of the program;
 - C) Notify the Division of the date on which the last student will graduate and the program terminate; and

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- D) Assume responsibility for assisting students to continue their education in the event of closing of the school prior to the final student graduating.
- 2) Upon closure of the nursing education program, the institution shall notify the Division, in writing, of the location of student and graduate records storage.
- m) Revocation of Program Approval
 - 1) The following are grounds for disapproval of a nursing education program:
 - A) A violation of any provision of the Act;
 - B) Fraud or dishonesty in applying for approval of a nursing education program;
 - C) Failure to continue to meet criteria of an approved nursing education program set forth in this Section; or
 - D) Failure to comply with recommendations made by the Division as a result of a site visit.
 - 2) Upon written notification of the Division's proposed action, the nursing education program may:
 - A) Submit a written response;
 - B) Request a hearing before the Board.
- n) Out-of-State Education Programs Seeking Student Nurse Clinical Placement in Illinois
 - 1) Out-of-state nursing education programs offering clinical experiences in Illinois are expected to maintain the standards for approved nursing education programs set forth in this Section.

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- 2) Programs desiring to seek approval for student nurse clinical placement in Illinois shall submit the following documents:
 - A) Evidence of approval/accreditation by the Board of Nursing or other appropriate approval bodies in the state in which the institution is located.
 - B) A letter requesting approval to provide the clinical offering that indicates the time-frame during which the clinical experience will be conducted, the clinical agencies and the clinical units to be utilized.
 - C) A course syllabus for the clinical experiences to be offered that specifies the related objectives of the offering.
 - D) A copy of the executed contractual agreement between the academic institution and the clinical facility.
 - E) A faculty qualification and/or preceptor form for individuals providing instruction in Illinois.
- 3) Faculty
 - A) The institution responsible for conducting the nursing program and the administrator of the nursing education program shall be responsible for ensuring that the individual faculty members are academically and professionally qualified.
 - B) Nurse faculty of a professional nursing program shall have:
 - i) at least 2 years experience in clinical nursing practice; and
 - ii) a master's degree or higher with a major in nursing.
 - C) The faculty shall be currently licensed as registered professional nurses in Illinois.
 - D) Clinical experience must be under direct supervision of qualified faculty as set forth in subsection (g) or with a registered nurse

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preceptor. The nurse preceptor shall be approved by the parent institution and shall work under the direction of a nurse faculty member.

- E) The ratio of students to faculty in the clinical area shall be appropriate to the clinical learning experience.
 - i) When under direct supervision of the faculty, the ratio shall not exceed 10 to 1.
 - ii) When a registered nurse preceptor is used, the ratio of students to faculty member shall not exceed 12 to 1.
- 4) Approval for clinical offerings by out-of-state nursing programs shall be approved for a period of 2 years. A program representative may request renewal of the approval every 2 years. In order to renew, the program shall submit a written report that provides updated and current data as required by this subsection (n).
- 5) A written report of current clinical offerings and current data shall be submitted to the Division annually. Faculty qualification and preceptor forms shall be submitted when instructors are added or changed.
- 6) Failure to comply with the requirements set forth in this Part shall result in the immediate withdrawal of approval of the clinical experience offering.
- o) If the name of the program is changed or the institution in which the program is located or with which it is affiliated changes its name, the program shall notify the Division within 30 days after the name change. If the Division is not notified within the 30 days, the program's approval may be withdrawn.
- p) The Division has determined that nurse programs approved through the National League of Nursing for Nursing Accrediting Commission or the Commission on Collegiate Accreditation meet the requirements set forth in this Section, except for those programs whose curriculums do not include a concurrent theory and clinical practice education component as required by Section 50-70 of the Act.

Section 1300.350 Standards of Professional Conduct for Registered Professional Nurses

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- a) The RN shall:
- 1) Practice in accordance with the Act and this Part;
 - 2) Uphold federal and State regulations regarding controlled substances and alcohol;
 - 3) Practice nursing only when in functional physical and mental health;
 - 4) Be accountable for his or her own nursing actions and competencies;
 - 5) Practice or offer to practice only within the scope permitted by law and within the licensee's own educational preparation and competencies;
 - 6) Seek instruction and supervision from qualified individuals when implementing new or unfamiliar nursing activities;
 - 7) Delegate tasks only to individuals whom the licensee knows or has reason to know are competent by education or experience to perform those tasks;
 - 8) Delegate professional responsibilities only to individuals whom the licensee knows or has reason to know are licensed to perform;
 - 9) Be accountable for the quality of nursing care delegated to others;
 - 10) Report unsafe, unethical or illegal health care practice or conditions to appropriate authorities; and
 - 11) Assume responsibility for continued professional growth and education to reflect knowledge and understanding of current nursing care practice.
- b) Violations of this Section may result in discipline as specified in Section 70-5 of the Act. All disciplinary hearings shall be conducted in accordance with 68 Ill. Adm. Code 1110.

Section 1300.360 RN Scope of Practice

Practice as a registered professional nurse means the full scope of nursing, with or without compensation, that incorporates caring for all patients in all settings, through nursing standards

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recognized by the Division, and includes all of the following and other activities requiring a like skill level for which the registered professional nurse is properly trained:

- a) *The comprehensive nursing assessment of the health status of patients that addresses changes to patient conditions.*
- b) *The development of a plan of nursing care to be integrated within the patient-centered health care plan that establishes nursing diagnoses, and setting goals to meet identified health care needs, determining nursing interventions, and implementation of nursing care through the execution of nursing strategies and regimens ordered or prescribed by authorized healthcare professionals.*
- c) *The administration of medication or delegation of medication administration to licensed practical nurses.*
- d) *Delegation of nursing interventions to implement the plan of care.*
- e) *The provision for the maintenance of safe and effective nursing care rendered directly or through delegation.*
- f) *Advocating for patients.*
- g) *The evaluation of responses to interventions and the effectiveness of the plan of care.*
- h) *Communicating and collaborating with other health care professionals.*
- i) *The procurement and application of new knowledge and technologies.*
- j) *The provision of health education and counseling.*
- k) *Participating in development of policies, procedures and systems to support patient safety. (Section 60-35 of the Act)*

Section 1300.370 Provision of Conscious Sedation by Registered Nurses in Ambulatory Surgical Treatment Centers

- a) In accordance with Section 6.7 of the Ambulatory Surgical Treatment Center Act [210 ILCS 5], nothing in that Act precludes a registered nurse from administering

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medications for the delivery of local or minimal sedation ordered by a physician licensed to practice medicine in all of its branches, podiatrist or dentist.

- b) *If the ASTC policy allows the registered nurse to deliver moderate sedation ordered by a physician licensed to practice medicine in all its branches, podiatrist or dentist, the following are required:*
- 1) *The registered nurse must be under the supervision of a physician licensed to practice medicine in all its branches, podiatrist or dentist during the delivery or monitoring of moderate sedation and have no other responsibilities during the procedure.*
 - 2) *The registered nurse must maintain current Advanced Cardiac Life Support certification or Pediatric Advanced Life Support certification as appropriate to the age of the patient.*
 - 3) *The supervising physician licensed to practice medicine in all its branches, podiatrist or dentist must have training and experience in delivering and monitoring moderate sedation and possess clinical privileges at the ASTC to administer moderate sedation or analgesia.*
 - 4) *The supervising physician licensed to practice medicine in all its branches, podiatrist or dentist must remain physically present and available on the premises during the delivery of moderate sedation for diagnosis, consultation and treatment of emergency medical conditions.*
 - 5) *The supervising physician licensed to practice medicine in all its branches, podiatrist or dentist must maintain current Advanced Cardiac Life Support certification or Pediatric Advanced Life Support certification as appropriate to the age of the patient.*
- c) Local, minimal and moderate sedation are defined as follows:
- 1) "Local Anesthesia" is numbing medication injected into the skin or other surface at the site of the procedure. The injection is usually near the surface, but may be deeper in some cases. The total dose of local anesthesia does not exceed 50% of the commonly accepted toxic dose on a weight adjusted lean body mass basis.

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- 2) "Minimal Sedation" (anxiolysis) is a drug-induced state during which patients respond normally to verbal commands. Although cognitive function and coordination may be impaired, respiratory and cardiovascular functions are unaffected.
 - 3) "Moderate Sedation Analgesia" (conscious sedation) is a drug-induced depression of consciousness during which patients respond purposefully to verbal commands, either alone or accompanied by light tactile stimulation. No interventions are required to maintain a patient airway and spontaneous ventilation is adequate. Cardiovascular function is usually maintained.
- d) *Registered nurses shall be limited to administering medication for moderate sedation at doses rapidly reversible pharmacologically. [210 ILCS 5/6.7(c)]* Acceptable medications are opioids, benzodiazepines and reversal agents: Meperidine, Fentanyl, Diazepam, Midazolam, naloxone and flumazenil. Nothing prohibits RN from monitoring or adjusting an FDA approved delivery device under the supervision of a physician.

SUBPART D: ADVANCED PRACTICE NURSE

Section 1300.400 Application for Licensure

- a) An applicant for licensure as an advanced practice nurse shall file an application on forms provided by the Division. The application shall include:
 - 1) Current Illinois registered professional nurse license number.
 - 2) Proof of current national certification, which includes completion of an examination, from one of the following:
 - A) Nurse Midwife certification from:
 - i) the American College of Nurse Midwives (ACNM); or
 - ii) the American Midwifery Certification Board.
 - B) Nurse Practitioner certification from:

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- i) American Academy of Nurse Practitioners Certification Program as a Nurse Practitioner;
 - ii) American Nurses Credentialing Center as a Nurse Practitioner;
 - iii) The National Certification Board of Pediatric Nurse Practitioners & Nurses as a Nurse Practitioner;
 - iv) The National Certification Corporation for the Obstetric, Gynecologic and Neonatal Nursing Specialties as a Nurse Practitioner; or
 - v) The Certification Board for Urologic Nurses and Associates as a Urologic Nurse Practitioner.
- C) Registered Nurse Anesthetist certification from:
- i) Council on Certification of the American Association of Nurse Anesthetists; or
 - ii) Council on Recertification of the American Association of Nurse Anesthetists.
- D) Clinical Nurse Specialist certification from:
- i) American Nurses Credentialing Center (ANCC) as a Clinical Nurse Specialist (acceptable certifications are listed in Appendix A);
 - ii) American Association of Critical Care Nurses as a Clinical Nurse Specialist;
 - iii) Rehabilitation Nursing Certification Board as a Certified Rehabilitation Registered Nurse-Advanced;
 - iv) Oncology Nursing Certification Corporation as an Advanced Oncology Nurse (AOCN);

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- v) Certification Board for Urologic Nurses and Associates as Urologic Clinical Nurse Specialist; or
 - vi) Other certifications listed in Appendix A.
- 3) The Board, in addition to the certifications listed in subsection (a)(2), may review and make a recommendation to the Division to accept a certification if the certifying body meets the following requirements (certifications are listed in Appendix A):
- A) is national in the scope of credentialing;
 - B) has no requirement for an applicant to be a member of any organization;
 - C) has an examination that represents a specialty practice category;
 - D) has an examination that evaluates knowledge, skills and abilities essential for the delivery of safe and effective specialty nursing care;
 - E) has an examination whose content and distribution are specified in a test plan;
 - F) has examination items reviewed for content validity, cultural sensitivity and correct scoring, using an established mechanism, both before use and periodically;
 - G) has an examination evaluated for psychometric performance;
 - H) has a passing standard established using acceptable psychometric methods and is re-evaluated periodically;
 - I) has examination security maintained through established procedures;
 - J) issues a certification based upon passing the examination;

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- K) has mechanisms in place for communication to boards of nursing for timely verification of an individual's certification status, changes in certification status and changes in the certification program, including qualifications, test plan and scope of practice; and
 - L) has an evaluation process to provide quality assurance in its certification program.
- 4) Proof of successful completion of a graduate degree appropriate for national certification in the clinical advanced practice nursing specialty or a graduate degree or post-master's certificate from a graduate level program in a clinical advanced practice nursing specialty.
- 5) An applicant seeking licensure in more than one advanced practice nursing category shall have met the requirements for at least one advanced practice nursing specialty; and
- A) Submit proof of possession of an additional graduate education that results in a certificate for another clinical APN category and that meets the requirements for the national certification from the appropriate nursing specialty; and
 - B) Submit proof of a current, national certification from the appropriate certifying body for that additional advanced practice nursing category.
- 6) Verification of licensure as an APN from the state in which an applicant was originally licensed, current state of licensure and any other state in which the applicant has been actively practicing as an APN within the last 5 years, if applicable, stating:
- A) The time during which the applicant was licensed in that state, including the date of the original issuance of the license; and
 - B) Whether the file on the applicant contains any record of disciplinary actions taken or pending.
- 7) The fee required in Section 1300.30(a)(4).

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- b) An applicant for licensure as an APN may apply to the Division for a temporary permit, on forms provided by the Division, to practice as an APN prior to the issuance of the APN license.
- 1) Application Requirements
- A) The application shall include a completed, signed application for licensure, as set forth in subsection (a).
- B) The application shall include documentation from an approved certifying body set forth in subsection (a)(2) indicating the date the applicant is scheduled to sit for the examination. Upon successful completion of the examination, proof of certification shall be submitted to the Division from the certifying body.
- C) An APN who will be practicing in a hospital or ambulatory surgical treatment center in accordance with 210 ILCS 5/6.5 shall not be required to have prescriptive authority or a written collaborative agreement pursuant to the Act and this Part.
- D) An APN applicant who will be practicing outside of a hospital or ambulatory surgical treatment center shall provide a certifying statement indicating that the APN applicant has entered into a collaborative agreement as required by Section 65-35 of the Act.
- E) The applicant shall include the processing fee set forth in Section 1300.30(a)(4).
- 2) Practice Pending Licensure
- A) The Division will provide a letter to each applicant indicating the ability to practice pending licensure.
- B) Practice pending licensure shall be terminated upon:
- i) the issuance of a permanent license;

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- ii) failure to complete the application process within 6 months from the date of application;
 - iii) a finding by the Division that the applicant has violated one or more of the grounds for discipline set forth in Section 70-5 of the Act;
 - iv) a finding by the Division that, within the last 5 years, the applicant has had a license or permit related to the practice of advanced practice nursing revoked, suspended or placed on probation by another jurisdiction, if at least one of the grounds is substantially equivalent to grounds in Illinois; or
 - v) a finding by the Division that the applicant does not meet the licensure requirements set forth in this Section.
- C) The Division shall notify the applicant in writing of the termination and shall notify the applicant by certified or registered mail of the intent to deny licensure.
- c) When the accuracy of any submitted documentation or the relevance or sufficiency of the course work or experience is questioned by the Division or the Board because of lack of information, discrepancies or conflicts in information given, or a need for clarification, the applicant seeking licensure shall be requested to:
- 1) Provide information as may be necessary; and/or
 - 2) Appear for an interview before the Board to explain the relevance or sufficiency, clarify information, or clear up any discrepancies or conflicts in information.
- d) An APN license may be issued when the applicant meets the requirements set forth in this Section.

Section 1300.410 Written Collaborative Agreements

- a) *A written collaborative agreement shall describe the working relationship of the advanced practice nurse with the collaborating physician or podiatrist and shall*

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authorize the categories of care, treatment or procedures to be performed by the advanced practice nurse. (Section 65-35(b) of the Act)

- b) *The agreement shall be defined to promote the exercise of professional judgment by the advanced practice nurse commensurate with his or her education and experience. The services to be provided by the advanced practice nurse shall be services that the collaborating physician or podiatrist generally provides to his or her patients in the normal course of his or her clinical medical practice except as set forth in Section 1300.450 (Delivery of Anesthesia Services by a Certified Registered Nurse Anesthetist Outside a Hospital or Ambulatory Surgical Treatment Center). The agreement need not describe the exact steps that an advanced practice nurse must take with respect to each specific condition, disease or symptom, but must specify which authorized procedures require a physician's or podiatrist's presence as the procedures are being performed. The collaborative relationship under an agreement shall not be construed to require the personal presence of a physician or podiatrist at all times at the place where services are rendered. Methods of communication shall be available for consultation with the collaborating physician or podiatrist in person or by telecommunications in accordance with established written guidelines as set forth in the written agreement. (Section 65-35(b) of the Act)*
- c) *A copy of the signed, written collaborative agreement must be available to the Division upon request from both the advanced practice nurse and the collaborating physician or podiatrist. An advanced practice nurse shall inform each collaborating physician or podiatrist of all collaborative agreements he or she has signed and provide a copy of these to any collaborating physician or podiatrist, upon request. (Section 65-35(d) and (f) of the Act)*

Section 1300.420 Collaboration and Consultation

- a) *A physician licensed to practice medicine in all its branches in active clinical practice may collaborate with an advanced practice nurse in accordance with the requirements of the Nurse Practice Act. Collaboration is for the purpose of providing medical consultation, and no employment relationship is required. A written collaborative agreement shall conform to the requirements of Section 65-35 of the Nurse Practice Act. The written collaborative agreement shall be for services the collaborating physician or podiatrist generally provides to his or her patients in the normal course of clinical medical practice, except as set forth in Section 1300.450 (Delivery of Anesthesia Services by a Certified Registered*

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Nurse Anesthetist Outside a Hospital or Ambulatory Surgical Treatment Center).
A written collaborative agreement shall be adequate with respect to collaboration with advanced practice nurses if all of the following apply:

- 1) *The agreement is written to promote the exercise of professional judgment by the advanced practice nurse commensurate with his or her education and experience. The agreement need not describe the exact steps that an advanced practice nurse must take with respect to each specific condition, disease or symptom, but must specify those procedures that require a physician's presence as the procedures are being performed.*
 - 2) *Practice guidelines and orders are developed and approved jointly by the advanced practice nurse and collaborating physician or podiatrist, based on the practice of the practitioners. Such guidelines and orders and the patient services provided thereunder are periodically reviewed by the collaborating physician or podiatrist.*
 - 3) *The advanced practice nurse provides services the collaborating physician or podiatrist generally provides to his or her patients in the normal course of clinical practice, except as set forth in Section 1300.450. With respect to labor and delivery, the collaborating physician must provide delivery services in order to participate with a certified nurse midwife.*
 - 4) *The collaborating physician or podiatrist and advanced practice nurse meet in person at least once a month to provide collaboration and consultation.*
 - 5) *Methods of communication are available with the collaborating physician or podiatrist in person or through telecommunications for consultation, as needed to address patient care needs.*
 - 6) *The agreement contains provisions detailing notice for termination or change of status involving a written collaborative agreement, except when such notice is given for just cause. [225 ILCS 60/54.5(b)]*
- b) Licensed dentists may only enter into a written collaborative agreement with a CRNA and the agreement shall comply with Section 65-35 of the Act and Sections 1300.410 and 1300.420.

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Section 1300.430 Prescriptive Authority

- a) A collaborating physician or podiatrist who delegates prescriptive authority to an advanced practice nurse shall include that delegation in the written collaborative agreement. This authority may include prescription of, selection of, orders for, administration of, storage of, acceptance of samples of, and dispensing over the counter medications, legend drugs, medical gases, and controlled substances categorized as Schedule III, III-N, IV or V controlled substances, as defined in Article II of the Illinois Controlled Substances Act, and other preparations, including, but not limited to, botanical and herbal remedies. The collaborating physician or podiatrist must have a valid current Illinois controlled substance license and federal registration to delegate authority to prescribe delegated controlled substances.
- b) Pursuant to Section 65-40(d) of the Act, a collaborating physician may, but is not required to, delegate authority to an advanced practice nurse to prescribe Schedule II or II-N controlled substances under the following conditions:
- 1) *No more than 5 Schedule II or II-N controlled substances by oral dosage may be delegated. For the purposes of this Section generic substitution pursuant to Section 25 of the Pharmacy Practice Act shall be allowed under this Section when not prohibited by a prescriber's indication on the prescription that the pharmacist "may not substitute".*
 - 2) *The collaborating physician can only delegate controlled substances that the collaborating physician prescribes.*
 - 3) *Any prescription must be limited to no more than a 30-day oral dosage, with any continuation authorized only after prior approval of the collaborating physician.*
 - 4) *The advanced practice nurse must discuss the condition of any patients for whom a controlled substance is prescribed monthly with the delegating physician.*
- c) An APN who has been given controlled substances prescriptive authority shall be required to obtain an Illinois mid-level practitioner controlled substances license in accordance with 77 Ill. Adm. Code 3100. The physician or podiatrist shall file a notice of delegation of prescriptive authority with the Division. The delegation

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of authority form shall be submitted to the Division prior to the issuance of a controlled substance license.

- d) The APN may only prescribe and dispense controlled substances that the collaborating physician or podiatrist prescribes. Licensed dentists may not delegate prescriptive authority.
- e) All prescriptions written and signed by an advanced practice nurse shall indicate the name of the collaborating physician or podiatrist. The collaborating physician's or podiatrist's signature is not required. The APN nurse shall sign his/her own name.
- f) An APN may receive and dispense samples per the collaborative agreement.
- g) Medication orders shall be reviewed periodically by the collaborating physician or podiatrist.

Section 1300.440 APN Scope of Practice

- a) *Advanced practice nursing by certified nurse practitioners, certified nurse anesthetists, certified nurse midwives, or clinical nurse specialists is based on knowledge and skills acquired throughout an advanced practice nurse's nursing education, training and experience.*
- b) *Practice as an advanced practice nurse means a scope of nursing practice, with or without compensation, and includes the registered nurse scope of practice.*
- c) *The scope of practice of an advanced practice nurse includes, but is not limited to, each of the following:*
 - 1) *Advanced nursing patient assessment and diagnosis.*
 - 2) *Ordering diagnostic and therapeutic tests and procedures, performing those tests and procedures when using health care equipment, and interpreting and using the results of diagnostic and therapeutic tests and procedures ordered by the advanced practice nurse or another health care professional.*

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- 3) *Ordering treatments, ordering or applying appropriate medical devices, and using nursing, medical, therapeutic, and corrective measures to treat illness and improve health status.*
- 4) *Providing palliative and end-of-life care.*
- 5) *Providing advanced counseling, patient education, health education, and patient advocacy.*
- 6) *Prescriptive authority as defined in Section 65-40 of the Act.*
- 7) *Delegating selected nursing activities or tasks to a licensed practical nurse, a registered professional nurse, or other personnel. (Section 65-30 of the Act)*

Section 1300.450 Delivery of Anesthesia Services by a Certified Registered Nurse Anesthetist Outside a Hospital or Ambulatory Surgical Treatment Center

- a) A certified registered nurse anesthetist (CRNA) who provides anesthesia services outside of a hospital or ambulatory surgical treatment center shall enter into a written collaborative agreement with an anesthesiologist or the physician licensed to practice medicine in all its branches or the podiatrist performing the procedure. Outside of a hospital or ambulatory surgical treatment center, the CRNA may provide only those services that the collaborating podiatrist is authorized to provide pursuant to the Podiatric Medical Practice Act of 1987 and rules adopted under that Act. A certified registered nurse anesthetist may select, order, and administer medication, including controlled substances, and apply appropriate medical devices for delivery of anesthesia services under the anesthesia plan agreed with by the anesthesiologist or the operating physician or operating podiatrist.
- b) *A certified registered nurse anesthetist may be delegated prescriptive authority under Section 65-40 of the Act in a written collaborative agreement meeting the requirements of Section 65-35 of the Act. (Section 15-25(e) of the Act)*
- c) In a physician's office, the CRNA may only provide anesthesia services if the physician has training and experience in the delivery of anesthesia services to patients. The physician's training and experience shall be documented in the

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written collaborative agreement and the training and experience shall meet the requirements set forth in 68 Ill. Adm. Code 1285.340.

- d) In addition, in a physician's office, any CRNA and physician who enter into a collaborative agreement shall obtain and maintain current Advanced Cardiac Life Support (ACLS) certification.
- e) A CRNA who provides anesthesia services in a dental office shall enter into a written collaborative agreement with an anesthesiologist or the physician licensed to practice medicine in all its branches or the operating dentist performing the procedure. The agreement shall describe the working relationship of the CRNA and dentist and shall authorize the categories of care, treatment or procedures to be performed by the CRNA. In a collaborating dentist's office, the CRNA may only provide those services that the operating dentist with the appropriate permit is authorized to provide pursuant to the Illinois Dental Practice Act and rules adopted under that Act. For anesthesia services, an anesthesiologist, physician or operating dentist shall participate through discussion of and agreement with the anesthesia plan and shall remain physically present and be available on the premises during the delivery of anesthesia services for diagnosis, consultation and treatment of emergency medical conditions. A CRNA may select, order and administer medication, including controlled substances, and apply appropriate medical devices for delivery of anesthesia services under the anesthesia plan agreed with by the operating dentist.
- f) In a podiatrist's office, the CRNA may only provide those services the podiatrist is authorized to provide pursuant to the Podiatric Medical Practice Act of 1987 and 68 Ill. Adm. Code 1360. Podiatrists may not administer general anesthetics.
- g) A CRNA providing anesthesia services in a physician, dental or podiatrist office shall do so with the active participation, approval, presence and availability of the physician, dentist or podiatrist as well as in accordance with Standards 1 through 11 of the "Standards for Office Based Anesthesia Practice", American Association of Nurse Anesthetists, 222 South Prospect Avenue, Park Ridge, Illinois 60068 (2005), which are hereby incorporated by reference, with no later editions or amendments. If there is a conflict between the Nurse Practice Act or this Part and those standards, the Act and this Part shall prevail.

Section 1300.460 Advanced Practice Nursing in Hospitals or Ambulatory Surgical Treatment Centers

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- a) An advanced practice nurse may provide services in a licensed hospital or a licensed ambulatory surgical treatment center without prescriptive authority or a written collaborative agreement pursuant to Section 65-35 of the Act. An APN must possess clinical privileges recommended by the hospital medical staff and granted by the hospital or the consulting medical staff committee and ambulatory surgical treatment center in order to provide services. The medical staff or consulting medical staff committee shall periodically review the services of advanced practice nurses granted clinical privileges. Authority may also be granted to individual APNs to select, order and administer medications, including controlled substances as permitted under the Act and this Part, to provide delineated care. The attending physician shall determine an APN's role in providing care for his or her patients, except as otherwise provided in the medical staff bylaws or consulting committee policies.
- b) For anesthesia services provided by a certified registered nurse anesthetist, an anesthesiologist, physician, dentist, or podiatrist shall participate through discussion of and agreement with the anesthesia plan and shall remain physically present and be available on the premises during the delivery of anesthesia services for diagnosis, consultation and treatment of emergency medical conditions, unless hospital policy adopted pursuant to Section 10.7(4)(B) of the Hospital Licensing Act or ambulatory surgical treatment center policy adopted pursuant to Section 6.5(4)(B) of the Ambulatory Surgical Treatment Center Act provides otherwise. A CRNA may select, order and administer medication for anesthesia services under the anesthesia plan agreed to by the anesthesiologist or the physician, in accordance with hospital alternative policy or the medical staff consulting committee policies of a licensed ambulatory surgical treatment center.
- c) An advanced practice nurse who provides services in a hospital shall do so in accordance with Section 10.7 of the Hospital Licensing Act and, in an ambulatory surgical treatment center, in accordance with Section 6.5 of the Ambulatory Surgical Treatment Center Act.

Section 1300.470 Advertising

- a) Advertising shall contain all information necessary to make the communication informative and not misleading. Advertising shall identify the type of license held by the licensee whose services are being promoted. The form of advertising

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shall be designed to communicate information to the public in a direct, dignified and readily comprehensible manner.

- b) If an advertisement is communicated to the public over television or radio, it shall be prerecorded and approved for broadcast by the advanced practice nurse and a recording of the actual transmission, including videotape, shall be retained, for at least 5 years, by the advanced practice nurse.
- c) Advertising shall otherwise comply with Section 65-55 of the Act.

Section 1300.480 Reports Relating to APN Professional Conduct and Capacity

- a) All reports filed under Section 65-65 of the Act must contain sufficient current information to enable the Division to evaluate the impairment and determine the appropriateness of the supervision or the program of rehabilitation. If the Board finds the supervision or treatment plan submitted by the institution is not sufficient to meet the needs of the individual, the Board may direct the facility to work with the Division to revise the plan or treatment to meet the specific objections.
- b) Contents of Reports. Reports under this Section shall be submitted in writing on forms provided by the Division that shall include but not be limited to the following information:
 - 1) The name, address, telephone number and title of the person making the report;
 - 2) The name, address, telephone number and type of health care institution where the maker of the report is employed;
 - 3) The name, address, telephone number and professional license number of the person who is the subject of the report;
 - 4) A brief description of the facts that gave rise to the issuance of the report, including but not limited to the dates of any occurrences deemed to necessitate the filing of the report;
 - 5) If court action is involved, the identity of the court in which the action is filed, the docket number, and the date of filing of the action;

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- 6) Any further pertinent information that the reporting party deems to be an aid in the evaluation of the report.

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Section 1300.APPENDIX A Additional Certifications Accepted for Licensure as an Advanced Practice Nurse

Pursuant to Section 1300.400(a)(3), the Division, upon recommendation of the Board, has approved the following certifications. Acceptance of these certifications is based on the absence of an advanced practice nurse examination in the area of the nursing specialty. If the certifying body develops and offers an advanced practice nurse examination in the area of the nursing specialty, then an applicant as an APN would be required to pass the advanced practice nurse examination rather than the generalist examination in order for the Division to accept the certification for licensure.

Clinical Nurse Specialists

American College of Cardiovascular Nursing

American Association of Critical Care Nurses

American Association of Neuroscience Nurses

American Board of Occupational Health Nurses, Inc.

American Holistic Nurses Association

American Nurses Credentialing Center

Clinical Specialists in Community Health Nursing

Clinical Specialists in Gerontology Nursing

Clinical Specialists in Home Health Nursing

Clinical Specialists in Medical/Surgical Adult Health

Clinical Specialists in Pediatric Nursing

Clinical Specialists in Psychiatric and Mental Health Nursing – Adults

Clinical Specialists in Psychiatric and Mental Health Nursing – Adolescent

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Psychiatric and Mental Health Nursing

Cardiac and Vascular Nurse

College Health Nurse

Perinatal Nurse

Ambulatory Care Nursing

Diabetes

American Society of Perianesthesia Nurses

American Society of Plastic Reconstructive Surgical Nurses

Association of Nurses in AIDS Care

Board of Certification of Emergency Nurses

Certification Board of Perioperative Nurses, Inc.

Certification of Pediatric Oncology Nurses

Certification Board of Gastroenterology Nurses

Dermatology Nurse Certification Board

International Board of Lactation Consultants

International Nurses Society of Addictions

Infusion Nurses Certification Corporation

Infusion Nurses Society

National Association of School Nurses, Inc.

National Board of Certification of Hospice and Palliative Nurses

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National Certification Board for Diabetes Educators

National Certification Board of Pediatric Nurse Practitioners/Nurses

National Certification Corporation for the Obstetric, Gynecological and Neonatal Nursing Specialties

National Certifying Board for Ophthalmic Registered Nurses

Nephrology Nursing Certification Board

Oncology Nursing Certification Corporation

Orthopedic Nurses Certification Board

Rehabilitation Nursing Certification Board

Vascular Nursing Certification Board

Wound, Ostomy, and Continence Society

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Section 1300.EXHIBIT A Sample Written Collaborative Agreement

ADVANCED PRACTICE NURSING
WRITTEN COLLABORATIVE AGREEMENT

A. ADVANCED PRACTICE NURSE INFORMATION

1. NAME: _____
2. ILLINOIS RN LICENSE NUMBER: _____
ILLINOIS APN LICENSE NUMBER: _____
ILLINOIS MID-LEVEL PRACTITIONER LICENSE NUMBER: _____
FEDERAL MID-LEVEL PRACTITIONER DEA NUMBER: _____
3. AREAS OF CERTIFICATION: _____
4. CERTIFYING ORGANIZATION: _____
5. CERTIFICATION EXPIRATION DATE: _____
6. CERTIFICATION NUMBER: _____
7. PRACTICE SITES: (Attach List of Sites)
8. CONTACT NUMBER: _____
FACSIMILE NUMBER: _____
EMERGENCY CONTACT NUMBERS: _____
(e.g., pager, answering service)
9. ATTACHMENTS:
Copy of Certification/Recertification
Copies of RN & APN License
Copy of Certificate of Insurance
Copy of Mid-Level Practitioner License

B. COLLABORATING PHYSICIAN/PODIATRIST INFORMATION

1. NAME: _____

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2. ILLINOIS LICENSE NUMBER: _____
3. PRACTICE AREA OR CONCENTRATION: _____
4. BOARD CERTIFICATION (if any): _____
5. CERTIFYING ORGANIZATION: _____
6. PRACTICE SITES: (Attach List of Sites)
7. CONTACT NUMBER: _____
FACSIMILE NUMBER: _____
EMERGENCY CONTACT NUMBERS: _____
(e.g., pager, answering service)

C. ADVANCED PRACTICE NURSE COLLABORATING PHYSICIAN/PODIATRIST WORKING RELATIONSHIP

1. WRITTEN COLLABORATIVE AGREEMENT REQUIREMENT

A written collaborative agreement is required for all Advanced Practice Nurses (APNs) engaged in clinical practice outside of a hospital or ambulatory surgical treatment center (ASTC). An APN may provide services in a licensed hospital or ASTC without a written collaborative agreement or delegated prescriptive authority.

2. SCOPE OF PRACTICE

Under this agreement, the advanced practice nurse will work with the collaborating physician or podiatrist in an active practice to deliver health care services to_____. This includes, but is not limited to, advanced nursing patient assessment and diagnosis, ordering diagnostic and therapeutic tests and procedures, performing those tests and procedures when using health care equipment, interpreting and using the results of diagnostic and therapeutic tests and procedures ordered by the APN or another health care professional, ordering treatments, ordering or applying appropriate medical devices, using nursing, medical, therapeutic and corrective measures to treat illness and improve health status, providing palliative and end-of-life care, providing advanced counseling, patient education, health education and patient advocacy, prescriptive authority, and delegating nursing activities or tasks to a LPN, RN or other personnel.

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If applicable, the advanced practice nurse shall maintain allied health personnel privileges at the following hospitals for the designated services:

Hospitals: _____

This written collaborative agreement shall be reviewed and updated annually. A copy of this written collaborative agreement shall remain on file at all sites where the advanced practice nurse renders service and shall be provided to the Illinois Department of Financial and Professional Regulation upon request. Any joint orders or guidelines are set forth or referenced in an attached document.

3. COLLABORATION AND CONSULTATION

Collaboration and consultation shall be adequate if the collaborating physician/podiatrist:

- (A) participates in the joint formulation and joint approval of orders or guidelines with the advanced practice nurse, as needed based on the practice of the practitioners, and periodically reviews those orders and the services provided patients under those orders in accordance with accepted standards of medical practice and advanced practice nursing practice;
- (B) meets in person with the APN at least once a month to provide collaboration and consultation; and
- (C) is available in person, or through telecommunications, for consultation and collaboration on medical problems, complications or emergencies or for patient referral. (See 225 ILCS 60/54.5(b)(5).)

The written collaborative agreement shall be for services the collaborating physician or podiatrist generally provides to his or her patients in the normal course of clinical practice.

Information specific to collaboration and consultation with a CRNA is as follows:

- (A) A licensed CRNA may provide anesthesia services pursuant to the order of a licensed physician, podiatrist or dentist.
- (B) For anesthesia services, an anesthesiologist, physician, podiatrist or dentist participates through discussion of and agreement with the anesthesia plan and is physically present and available on the premises during the delivery

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of anesthesia services for diagnosis, consultation and treatment of emergency medical conditions.

- (C) A CRNA may select, order and administer medications, including controlled substances, and apply appropriate medical devices for delivery of anesthesia services under the anesthesia plan agreed to by an anesthesiologist, or the operating physician, operating podiatrist or operating dentist. (See 225 ILCS 65/65-35(c-5) and (c-10).)
- (D) In a physician's office, the CRNA may only provide anesthesia services if the physician has training and experience in the delivery of anesthesia services to patients.
- (E) In a podiatrist's office, the CRNA may only provide those services the podiatrist is authorized to provide pursuant to the Podiatric Medical Practice Act.
- (F) A collaborative agreement between a CRNA and a dentist must be in accordance with 225 ILCS 65/65-35(c-10). In a dentist's office, the CRNA may only provide those services the dentist is authorized to provide pursuant to the Illinois Dental Practice Act.

4. COMMUNICATION, CONSULTATION AND REFERRAL

The advanced practice nurse shall consult with the collaborating physician/podiatrist by telecommunication or in person as needed. In the absence of the designated collaborating physician/podiatrist, another physician/podiatrist shall be available for consultation.

The advanced practice nurse shall inform each collaborating physician/podiatrist of all written collaborative agreements he or she has signed with other physicians/podiatrists, and provide a copy of these to any collaborating physician/podiatrist upon request.

5. DELEGATION OF PRESCRIPTIVE AUTHORITY

As the collaborating physician/podiatrist, any prescriptive authority delegated to the advanced practice nurse is set forth in an attached document.

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NOTE: ADVANCED PRACTICE NURSE MAY ONLY PRESCRIBE CONTROLLED SUBSTANCES UPON RECEIPT OF AN ILLINOIS MID-LEVEL PRACTITIONER CONTROLLED SUBSTANCES LICENSE.

WE THE UNDERSIGNED AGREE TO THE TERMS AND CONDITIONS OF THIS WRITTEN COLLABORATIVE AGREEMENT.

Collaborating Physician/Podiatrist
Signature/Date

Advanced Practice Nurse
Signature/Date

(Physician's/Podiatrist's Typed Name)

(Advanced Practice Nurse's Typed Name)

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- 1) Heading of the Part: Nursing and Advanced Practice Nursing Act – Advanced Practice Nurse
- 2) Code Citation: 68 Ill. Adm. Code 1305
- 3)

<u>Section Numbers:</u>	<u>Proposed Action:</u>
1305.10	Repealed
1305.15	Repealed
1305.20	Repealed
1305.25	Repealed
1305.30	Repealed
1305.35	Repealed
1305.40	Repealed
1305.45	Repealed
1305.50	Repealed
1305.60	Repealed
1305.70	Repealed
1305.75	Repealed
1305.80	Repealed
1305.85	Repealed
1305.90	Repealed
1305.95	Repealed
1305.100	Repealed
1305.APPENDIX A	Repealed
1305.EXHIBIT A	Repealed
1305. EXHIBIT B	Repealed
- 4) Statutory Authority: Nurse Practice Act [225 ILCS 65]
- 5) A Complete Description of the Subjects and Issues Involved: As a result of the sunset review process, PA 95-639 completely rewrote the Act regulating the licensure of nurses in Illinois, including changing the name to the Nurse Practice Act. As a result of the extensive changes this entails, the current Parts 1300 (RN and LPN) and 1305 (APN) are being repealed, to be replaced with a new Part 1300 encompassing all nurse licensure.
- 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

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- 8) Does this rulemaking contain an automatic repeal date? No
- 9) Does this rulemaking contain incorporations by reference? No
- 10) Are there any other proposed rulemakings pending on this Part? No
- 11) Statement of Statewide Policy Objectives: This rulemaking has no impact on local governments.
- 12) Time, Place and Manner in which interested persons may comment on this proposed rulemaking:

Interested persons may submit written comments to:

Department of Financial and Professional Regulation
Attention: Craig Cellini
320 West Washington, 3rd Floor
Springfield, IL 62786

217/785-0813 FAX: 217/557-4451

All written comments received within 45 days after this issue of the *Illinois Register* will be considered.

- 13) Initial Regulatory Flexibility Analysis:
- A) Types of small businesses, small municipalities and not for profit corporations affected: Those providing nursing services.
- B) Reporting, bookkeeping or other procedures required for compliance: None
- C) Types of professional skills necessary for compliance: Nursing skills are required for licensure.
- 14) Regulatory Agenda on which this rulemaking was summarized: July 2009

The full text of the Proposed Repealer begins on the next page:

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TITLE 68: PROFESSIONS AND OCCUPATIONS
CHAPTER VII: DEPARTMENT OF FINANCIAL AND
PROFESSIONAL REGULATION
SUBCHAPTER b: PROFESSIONS AND OCCUPATIONSPART 1305
NURSING AND ADVANCED PRACTICE NURSING ACT –
ADVANCED PRACTICE NURSE (REPEALED)

Section

1305.10	Definitions
1305.15	Application for Licensure Prior to July 1, 2001 (Repealed)
1305.20	Application for Licensure Beginning July 1, 2001
1305.25	Fees
1305.30	Written Collaborative Agreements
1305.35	Medical Direction
1305.40	Prescriptive Authority
1305.45	Delivery of Anesthesia Services by a Certified Registered Nurse Anesthetist
1305.50	Practice Agreement for Certified Registered Nurse Anesthetist
1305.60	Renewals
1305.70	Advertising
1305.75	Mandatory Reporting of Impaired Advanced Practice Nurses by Health Care Institutions
1305.80	Fines
1305.85	Public Access to Records and Meetings
1305.90	Refusal to Issue a Nurse License based on Criminal History Record
1305.95	Granting Variances
1305.100	Continuing Education
1305.APPENDIX A	Additional Certifications Accepted for Licensure as an Advanced Practice Nurse
1305.EXHIBIT A	Sample Written Collaborative Agreement
1305.EXHIBIT B	Sample Practice Agreement for Office Based Anesthesia Services

AUTHORITY: Implementing the Nursing and Advanced Practice Nursing Act [225 ILCS 65] and authorized by Section 2105-15(7) of the Civil Administrative Code of Illinois [20 ILCS 2105/2105-15(7)].

SOURCE: Adopted at 25 Ill. Reg. 4609, effective March 15, 2001; amended at 26 Ill. Reg. 7279, effective April 26, 2002; amended at 26 Ill. Reg. 11944, effective July 18, 2002;

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emergency amendment at 26 Ill. Reg. 16845, effective November 4, 2002, for a maximum of 150 days; amended at 27 Ill. Reg. 5829, effective March 24, 2003; amended at 27 Ill. Reg. 19365, effective December 11, 2003; amended at 28 Ill. Reg. 4933, effective March 3, 2004; amended at 30 Ill. Reg. 4657, effective March 1, 2006; repealed at 34 Ill. Reg. _____, effective _____.

Section 1305.10 Definitions

"Act" means the Nursing and Advanced Practice Nursing Act [225 ILCS 65].

"APN Board" or "Board" means the Advanced Practice Nursing Board.

"Advanced practice nurse" or "APN" means a person who:

is licensed as a registered professional nurse under the Act;

meets the requirements for licensure as an advanced practice nurse under Section 15-10 of the Act;

except as provided in Section 15-25 of the Act, has a written collaborative agreement with a collaborating physician in the diagnosis of illness and management of wellness and other conditions as appropriate to the level and area of his or her practice in accordance with Section 15-15 of the Act; and

cares for patients:

by using advanced diagnostic skills, the results of diagnostic tests and procedures ordered by the advanced practice nurse, a physician assistant, a dentist, a podiatrist, or a physician, and professional judgment to initiate and coordinate the care of patients;

by ordering diagnostic tests, prescribing medications and drugs in accordance with Section 15-20 of the Act, and administering medications and drugs; and

by using medical, therapeutic, and corrective measures to treat illness and improve health status.

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Categories include Certified Nurse Midwife (CNM), Certified Nurse Practitioner (CNP), Certified Registered Nurse Anesthetist (CRNA), or Certified Clinical Nurse Specialist (CNS). (Section 15-5 of the Act)

"Collaborating physician" means a physician who works with an advanced practice nurse and provides medical direction as documented in a written collaborative agreement required under Section 15-15 of the Act. (Section 15-5 of the Act)

"Department" means Department of Financial and Professional Regulation.

"Director" means the Director of the Division of Professional Regulation with the authority delegated by the Secretary.

"Division" means the Department of Financial and Professional Regulation – Division of Professional Regulation.

"Physician" means a person licensed to practice medicine in all its branches under the Medical Practice Act of 1987. (Section 15-5 of the Act)

"Secretary" means the Secretary of the Department of Financial and Professional Regulation.

"Temporary practice" means, pursuant to Section 15-13 of the Act, the practice by a graduate of an advanced practice nursing program as a certified clinical nurse specialist, certified nurse midwife, certified nurse practitioner or certified registered nurse anesthetist who has applied to the Division in accordance with Section 1305.20.

Temporary practice shall not exceed 6 months from date of application to the Division.

Temporary practice does not include prescriptive authority.

Section 1305.15 Application for Licensure Prior to July 1, 2001 (Repealed)

Section 1305.20 Application for Licensure Beginning July 1, 2001

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- a) An applicant for licensure as an advanced practice nurse shall file an application on forms provided by the Division. The application shall include:
- 1) Current Illinois registered nurse license number.
 - 2) Proof of current national certification, which includes completion of an examination, from one of the following:
 - A) Nurse Midwife certification from:
 - i) the American College of Nurse Midwives (ACNM); or
 - ii) the American Midwifery Certification Board.
 - B) Nurse Practitioner certification from:
 - i) American Academy of Nurse Practitioners Certification Program as a Nurse Practitioner;
 - ii) American Nurses Credentialing Center as a Nurse Practitioner;
 - iii) The National Certification Board of Pediatric Nurse Practitioners & Nurses as a Nurse Practitioner;
 - iv) The National Certification Corporation for the Obstetric, Gynecologic and Neonatal Nursing Specialties as a Nurse Practitioner; or
 - v) The Certification Board for Urologic Nurses and Associates as a Urologic Nurse Practitioner.
 - C) Registered Nurse Anesthetist certification from:
 - i) Council on Certification of the American Association of Nurse Anesthetists; or
 - ii) Council on Recertification of the American Association of Nurse Anesthetists.

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- D) Clinical Nurse Specialist certification from:
- i) American Nurses Credentialing Center (ANCC) as a Clinical Nurse Specialist (acceptable certifications are listed in Appendix A);
 - ii) American Association of Critical Care Nurses as a Clinical Nurse Specialist;
 - iii) Rehabilitation Nursing Certification Board as a Certified Rehabilitation Registered Nurse-Advanced;
 - iv) Oncology Nursing Certification Corporation as an Advanced Oncology Nurse (AOCN);
 - v) Certification Board for Urologic Nurses and Associates as Urologic Clinical Nurse Specialist; or
 - vi) Other certifications listed in Appendix A.
- 3) The Board, in addition to the certification listed in subsection (a)(2), may review and make a recommendation to the Division to accept a certification if the certifying body meets the following requirements (certifications are listed in Appendix A):
- A) is national in the scope of credentialing;
 - B) has no requirement for an applicant to be a member of any organization;
 - C) has an examination that represents a specialty practice category;
 - D) has an examination that evaluates knowledge, skills and abilities essential for the delivery of safe and effective specialty nursing care;
 - E) has an examination whose content and distribution are specified in a test plan;

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- F) has examination items reviewed for content validity, cultural sensitivity and correct scoring, using an established mechanism, both before use and periodically;
 - G) has an examination evaluated for psychometric performance;
 - H) has a passing standard established using acceptable psychometric methods and is reevaluated periodically;
 - I) has examination security maintained through established procedures;
 - J) issues a certification based upon passing the examination;
 - K) has mechanisms in place for communication to boards of nursing for timely verification of an individual's certification status, changes in certification status and changes in the certification program, including qualifications, test plan and scope of practice; and
 - L) has an evaluation process to provide quality assurance in its certification program.
- 4) Proof of successful completion of a graduate degree appropriate for national certification in the clinical advanced practice nursing specialty or a graduate degree or post-master's certificate from a graduate level program in a clinical advanced practice nursing specialty.
- 5) An applicant seeking licensure in more than one advanced practice nursing category shall have met the requirements for at least one advanced practice nursing specialty; and
- A) Submit proof of possession of an additional graduate education that results in a certificate for another clinical advanced practice nurse category and that meets the requirements for the national certification from the appropriate nursing specialty; and
 - B) Submit proof of a current, national certification from the

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appropriate certifying body for that additional advanced practice nursing category.

- 6) A complete work history for the last 5 years.
 - 7) Verification of licensure as an advanced practice nurse from the state in which an applicant was originally licensed, current state of licensure and any other state in which the applicant has been actively practicing as an advanced practice nurse within the last 5 years, if applicable, stating:
 - A) The time during which the applicant was licensed in that state, including the date of the original issuance of the license; and
 - B) Whether the file on the applicant contains any record of disciplinary actions taken or pending.
 - 8) The fee required in Section 1305.25 of this Part.
- b) An applicant for licensure as an advanced practice nurse may apply to the Division, on forms provided by the Division, to practice as an advanced practice nurse pending the issuance of the license.
- 1) The application shall include:
 - A) A completed, signed application for licensure, as set forth in subsection (a);
 - B) Documentation from an approved certifying body set forth in subsection (a)(2) and Appendix A indicating the date the applicant is scheduled to sit for the examination. Upon successful completion of the examination, proof of certification shall be submitted to the Division from the certifying body;
 - C) A certifying statement from a collaborating physician indicating that the individual has completed a proposed collaborative agreement as required by Section 15-15 of the Act or a certifying statement from a physician, dentist or podiatrist indicating that a CRNA has a practice agreement as required by 15-25 of the Act. A CRNA who will be practicing in a hospital setting or ambulatory

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surgical treatment center is not required to have a collaborative or practice agreement pursuant to Section 15-25 of the Act;

- D) The processing fee set forth in Section 1305.20.
- 2) The Division will provide a letter to each applicant indicating the ability to practice license pending.
- 3) Practice pending licensure shall be terminated upon:
 - A) the issuance of a permanent license;
 - B) failure to complete the application process within 6 months from the date of application;
 - C) a finding by the Division that the applicant has violated one or more of the grounds for discipline set forth in Section 10-45 or 15-50 of the Act;
 - D) a finding by the Division that the applicant has had a license or permit related to the practice of advanced practice nursing revoked, suspended or placed on probation by another jurisdiction, if at least one of the grounds is substantially equivalent to grounds in Illinois, within the last 5 years; or
 - E) a finding by the Division that the applicant does not meet the licensure requirements as set forth in this Section.

The Division shall notify the applicant in writing of such termination and shall notify the applicant by certified or registered mail of the intent to deny licensure.

- c) Notwithstanding any other provisions of this Section, an applicant for licensure as a CRNA who does not have a graduate degree may, prior to December 31, 2006, file an application as provided in Section 15-10(b-5) of the Act, on forms provided by the Division, to include:
 - 1) Current Illinois registered nurse license number.

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- 2) Proof of current national certification, which includes completion of an examination, from the following:
 - A) Council on Certification of the American Association of Nurse Anesthetists; and
 - B) Council on Recertification of the American Association of Nurse Anesthetists.
 - 3) Proof of successful completion of a post-basic advanced practice formal education program in the area of nurse anesthesia prior to January 1, 1999.
 - 4) A complete work history for the last 5 years.
 - 5) Verification of licensure as an advanced practice nurse from the state in which an applicant was originally licensed, current state of licensure and any other state in which the applicant has been actively practicing as an advanced practice nurse within the last 5 years, if applicable, stating:
 - A) The time during which the applicant was licensed in that state, including the date of the original issuance of the license; and
 - B) Whether the file on the applicant contains any record of disciplinary actions taken or pending.
 - 6) The fee required in Section 1305.25 of this Part.
- d) When the accuracy of any submitted documentation or the relevance or sufficiency of the course work or experience is questioned by the Division or the Board because of lack of information, discrepancies or conflicts in information given, or a need for clarification, the applicant seeking licensure shall be requested to:
- 1) Provide information as may be necessary; and/or
 - 2) Appear for an interview before the Board to explain the relevance or sufficiency, clarify information or clear up any discrepancies or conflicts in information.

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- e) An advanced practice nurse license may be issued when the applicant meets the requirements set forth in this Section.

Section 1305.25 Fees

The following fees shall be paid to the Division and are not refundable:

- a) Application Fees.
 - 1) The fee for application for a license as an advanced practice nurse is \$125.
 - 2) The fee for processing an application for practice license pending as an advanced practice nurse is \$25.
 - 3) The fee for application as a continuing education sponsor is \$500.
- b) Renewal Fees.
 - 1) The fee for the renewal of a license as an advanced practice nurse shall be calculated at the rate of \$40 per year.
 - 2) The fee for renewal of continuing education sponsor approval is \$250 for a 2 year license.
- c) General Fees.
 - 1) The fee for the restoration of a license other than from inactive status is \$20 plus payment of all lapsed renewal fees.
 - 2) The fee for the issuance of a duplicate license, for the issuance of a replacement license for a license that has been lost or destroyed, or for the issuance of a license with a change of name or address other than during the renewal period, is \$20. No fee is required for name and address changes on Division records when no duplicate license is issued.
 - 3) The fee for a certification of a licensee's record for any purpose is \$20.
 - 4) The fee for a wall certificate showing licensure shall be the actual cost of producing the certificate.

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- 5) The fee for a roster of persons licensed as advanced practice nurses in this State shall be the actual cost of producing the roster.

Section 1305.30 Written Collaborative Agreements

- a) *A written collaborative agreement shall describe the working relationship of the advanced practice nurse with the collaborating physician and shall authorize the categories of care, treatment, or procedures to be performed by the advanced practice nurse. (Section 15-15(b) of the Act)*
- b) *The agreement shall be defined to promote the exercise of professional judgment by the advanced practice nurse commensurate with his or her education and experience. The services to be provided by the advanced practice nurse shall be services that the collaborating physician generally provides to his or her patients in the normal course of his or her clinical medical practice. The agreement need not describe the exact steps that an advanced practice nurse must take with respect to each specific condition, disease, or symptom, but must specify which authorized procedures require a physician's presence as the procedures are being performed. The collaborative relationship under an agreement shall not be construed to require the personal presence of a physician at all times at the place where services are rendered. Methods of communication shall be available for consultation with the collaborating physician in person or by telecommunications in accordance with established written guidelines as set forth in the written agreement. (Section 15-15(b) of the Act)*
- c) *A copy of the signed, written collaborative agreement must be available to the Division upon request from both the advanced practice nurse and the collaborating physician and shall be annually updated. An advanced practice nurse shall inform each collaborating physician of all collaborative agreements he or she has signed and provide a copy of these to any collaborating physician, upon request. (Section 15-15(d) of the Act)*
- d) Pursuant to Section 15-25 of the Act, a certified registered nurse anesthetist is not required to possess prescriptive authority or a written collaborative agreement to provide anesthesia services ordered by a licensed physician, dentist or podiatrist. However, a certified registered nurse anesthetist may be delegated limited prescriptive authority under Section 15-20 of the Act in a written collaborative agreement.

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Section 1305.35 Medical Direction

- a) *Physician medical direction shall be adequate with respect to collaboration with Certified Nurse Practitioners, Certified Nurse Midwives, and Clinical Nurse Specialists if a collaborating physician:*
 - 1) *participates in the joint formulation and joint approval of orders or guidelines with the advanced practice nurse and periodically reviews those orders and the services provided patients under those orders in accordance with accepted standards of medical practice and advanced practice nursing practice;*
 - 2) *is on site at least once a month to provide medical direction and consultation. On site is defined in the collaborative agreement; and*
 - 3) *is available through telecommunications for consultation on medical problems, complications, or emergencies or patient referral. [225 ILCS 60/54.5(b)]*
- b) Medical direction for a certified registered nurse anesthetist shall be in accordance with Section 54.5(b-5) of the Medical Practice Act of 1987 [225 ILCS 60/54.5(b-5)].
- c) In the absence of the collaborating physician, another physician shall be available for consultation.

Section 1305.40 Prescriptive Authority

- a) A collaborating physician who delegates limited prescriptive authority to an advanced practice nurse shall include that delegation in the written collaborative agreement. The prescriptive authority may include prescription and dispensing of legend drugs and legend controlled substances categorized as Schedule III, IV, or V controlled substances, as defined in the Illinois Controlled Substances Act [720 ILCS 570]. The authority to prescribe Schedule II controlled substances may not be delegated by the collaborating physician.
- b) An APN who has been given controlled substances prescriptive authority shall be required to obtain an Illinois mid-level practitioner controlled substance license in

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accordance with 77 Ill. Adm. Code 3100. The physician shall file a notice of delegation of prescriptive authority with the Division. The delegation of authority form shall be submitted to the Division prior to the issuance of a controlled substance license.

- c) The APN may only prescribe and dispense within the scope of practice of the collaborating physician.
- d) All prescriptions written and signed by an advanced practice nurse shall indicate the name of the collaborating physician. The collaborating physician's signature is not required. The advanced practice nurse shall sign his/her own name.
- e) An APN may receive and dispense samples per the collaborative agreement.
- f) Medication orders shall be reviewed periodically by the collaborating physician.

Section 1305.45 Delivery of Anesthesia Services by a Certified Registered Nurse Anesthetist

- a) *A licensed certified registered nurse anesthetist may provide anesthesia services pursuant to the order of a licensed physician, licensed dentist, or licensed podiatrist in a licensed hospital, a licensed ambulatory surgical treatment center, or the office of a licensed physician, the office of a licensed dentist, or the office of a licensed podiatrist. For anesthesia services, an anesthesiologist, physician, dentist, or podiatrist shall participate through discussion of and agreement with the anesthesia plan and shall remain physically present and be available on the premises during the delivery of anesthesia services for diagnosis, consultation, and treatment of emergency medical conditions, unless hospital policy adopted pursuant to Section 10.7(3)(B) of the Hospital Licensing Act [210 ILCS 85/10.7(3)(B)] or ambulatory surgical treatment center policy adopted pursuant to Section 6.5(3)(B) of the Ambulatory Surgical Treatment Center Act [210 ILCS 5/6.5(3)(B)] provides otherwise. (Section 15-25(a) of the Act)*
- b) *A certified registered nurse anesthetist who provides anesthesia services in a hospital shall do so in accordance with Section 10.7 of the Hospital Licensing Act and, in an ambulatory surgical treatment center, in accordance with Section 6.5 of the Ambulatory Surgical Treatment Center Act. (Section 15-25(b) of the Act)*
- c) *A certified registered nurse anesthetist is not required to possess prescriptive*

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authority or a written collaborative agreement meeting the requirements of Section 15-15 of the Act to provide anesthesia services ordered by a licensed physician, dentist, or podiatrist. Certified registered nurse anesthetists are authorized to select, order, and administer drugs and apply the appropriate medical devices in the provision of anesthesia services under the anesthesia plan agreed with by the anesthesiologist or the physician in accordance with hospital alternative policy or the medical staff consulting committee policies of a licensed ambulatory surgical treatment center. In a physician's office, dentist's office, or podiatrist's office, the anesthesiologist, operating physician, operating dentist, or operating podiatrist shall agree with the anesthesia plan, in accordance with the written practice agreement. (Section 15-25(d) of the Act)

- d) *A certified registered nurse anesthetist may be delegated limited prescriptive authority under Section 15-20 of the Act in a written collaborative agreement meeting the requirements of Section 15-15 of the Act. (Section 15-25(e) of the Act)*
- e) In a physician's office, the certified registered nurse anesthetist may only provide anesthesia services if the physician has training and experience in the delivery of anesthesia services to patients. The physician's training and experience shall be documented in the written practice agreement and the training and experience shall meet the requirements set forth in 68 Ill. Adm. Code 1285.340.
- f) In addition, in a physician's office, any certified registered nurse anesthetist and physician who enter into a practice agreement shall obtain ACLS certification by December 31, 2002, and shall thereafter maintain current Advanced Cardiac Life Support (ACLS) certification.
- g) In a dentist's office, the certified registered nurse anesthetist may only provide those services the dentist is authorized to provide pursuant to the Illinois Dental Practice Act [225 ILCS 25] and 68 Ill. Adm. Code 1220. Licensed dentists are required to hold permits to administer anesthesia pursuant to 68 Ill. Adm. Code 1220: Subpart D.
- h) In a podiatrist's office, the certified registered nurse anesthetist may only provide those services the podiatrist is authorized to provide pursuant to the Podiatric Medical Practice Act of 1987 [225 ILCS 100] and 68 Ill. Adm. Code 1360. Podiatrists may not administer general anesthetics.

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- i) A CRNA providing anesthesia services in a physician, dental or podiatrist office shall do so with the active participation, approval, presence and availability of the physician, dentist or podiatrist as well as in accordance with Standards 1-11 of the "Standards for Office Based Anesthesia Practice", American Association of Nurse Anesthetists, 222 South Prospect Avenue, Park Ridge, Illinois 60068 (1999), which are hereby incorporated by reference, with no later editions or amendments. If there is a conflict between the Nursing and Advanced Practice Nursing Act or this Part and the Standards for Office Based Anesthesia Practice of the American Association of Nurse Anesthetists, the Act and this Part shall prevail.

Section 1305.50 Practice Agreement for Certified Registered Nurse Anesthetist

A certified registered nurse anesthetist who provides anesthesia services in a physician office, dental office, or podiatric office shall enter into a written practice agreement with an anesthesiologist or the physician licensed to practice medicine in all its branches, the dentist, or the podiatrist performing the procedure. The agreement shall describe the working relationship of the certified registered nurse anesthetist and anesthesiologist, physician, dentist, or podiatrist and shall authorize the categories of care, treatment, or procedures to be performed by the certified registered nurse anesthetist. In a dentist's office, the certified registered nurse anesthetist may only provide those services the dentist is authorized to provide pursuant to the Illinois Dental Practice Act and 68 Ill. Adm. Code 1220. In a podiatrist's office, the certified registered nurse anesthetist may only provide those services the podiatrist is authorized to provide pursuant to the Podiatric Medical Practice Act of 1987 and 68 Ill. Adm. Code 1360. For anesthesia services, an anesthesiologist, physician, dentist, or podiatrist shall participate through discussion of and agreement with the anesthesia plan and shall remain physically present and be available on the premises for diagnosis, consultation and treatment of emergency medical conditions. (Section 15-25(c) of the Act)

Section 1305.60 Renewals

- a) Every license issued under the Act shall expire on May 31 of each even numbered year. The first renewal of an advanced practice nurse license is 2004. The holder of a license may renew such license during the month preceding the expiration date by paying the required fee. Beginning with the May 31, 2006 renewal and every renewal thereafter, a renewal applicant will be required to complete 50 hours of continuing education as set forth in Section 1305.100 of this Part. A licensee's registered nurse license shall be renewed in order to renew the advanced practice nurse license.

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- b) It is the responsibility of each licensee to notify the Division of any change of address. Failure to receive a renewal form from the Division shall not constitute an excuse for failure to pay the renewal fee.
- c) Practice on a license that has expired is the unlicensed practice of advanced practice nursing and shall be grounds for discipline pursuant to Section 15-50 of the Act.

Section 1305.70 Advertising

- a) Advertising shall contain all information necessary to make the communication informative and not misleading. Advertising shall identify the type of license held by the licensee whose services are being promoted. The form of advertising shall be designed to communicate information to the public in a direct, dignified and readily comprehensible manner.
- b) If an advertisement is communicated to the public over television or radio, it shall be prerecorded and approved for broadcast by the advanced practice nurse and a recording of the actual transmission, including videotape, shall be retained, for at least 3 years, by the advanced practice nurse.
- c) Advertising shall otherwise comply with Section 15-40 of the Act.

Section 1305.75 Mandatory Reporting of Impaired Advanced Practice Nurses by Health Care Institutions

- a) Section 15-55 of the Act requires that the chief administrator or executive officer of any health care institution licensed by the Department of Public Health report to the APN Board concerning impaired advanced practice nurses. All instances in which a person licensed under the Act is impaired by reason of age, drug or alcohol abuse, or physical or mental impairment, is under supervision, and where appropriate, is in a program of rehabilitation, must be reported to the APN Board. The reports must contain sufficient current information to enable the APN Board to evaluate the impairment and determine the appropriateness of the supervision or the program of rehabilitation. If the Board finds the supervision or treatment plan submitted by the institution is not sufficient to meet the needs of the individual, the Board may direct the facility to work with the Division to revise the plan or treatment to meet the specific objections.

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- b) Contents of Reports. Reports of impaired persons shall be submitted in writing on forms provided by the Division that shall include but not be limited to the following information:
- 1) The name, address, telephone number and title of the person making the report;
 - 2) The name, address, telephone number and type of health care institution where the maker of the report is employed;
 - 3) The name, address, telephone number and professional license number of the person who is the subject of the report;
 - 4) A means of identification used by the institution of any patient or patients whose treatment is a subject of the report, provided, however, no medical records may be revealed without the written consent of the patient or patients; and further provide that the APN Board may require disclosure of the name, address, and telephone number of any patient if it deems the information necessary to an evaluation of the impairment or a determination of the appropriateness of the supervision or program of rehabilitation;
 - 5) The nature of the impairment and brief description of the facts that gave rise to the issuance of the report, including the dates of any occurrences deemed to necessitate the filing of the report;
 - 6) The terms and conditions of the supervision under which the subject of the report is conducting his activities or practice, including the date supervision commenced; the term of the supervision; the name, address and telephone number of the person in charge of the subject's supervision; and a written consent executed by the subject of the report authorizing the APN Board, or designated representative of the APN Board, to contact the person in charge of the subject's supervision for information, including written documentation, in order to evaluate the progress of the subject's supervision pursuant to subsection (g)(2);
 - 7) If the subject of the report is in a program of rehabilitation, the name, address, and telephone number of the program and the name and position

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of any individual in charge of the program; and

- 8) Any other information deemed by the reporting person to be of assistance to the APN Board in evaluating the report, including, but not limited to, the following items: drug screens being used and their status; relapses and actions taken; attendance at work; observations of recovery status and level of cooperation in recovery; other psychopathology or known related physical and mental illnesses; involvement of the family and others in treatment or supervision; and a copy of the aftercare agreement.
- c) Reports of impaired persons shall be submitted to the APN Board in a timely manner. The initial report shall be submitted on forms provided by the Division within 60 days after it is determined that a report is necessary under the Act and this Section. Periodic reports (which evidence written documentation of the progress of supervision or rehabilitation) shall be submitted to the APN Board every 6 months, commencing with the time of the filing of the initial report. A copy of each report shall be sent by the person making the report to the impaired person.
- d) Confidentiality
 - 1) The contents of any report shall be strictly confidential, except as otherwise provided in this subsection (d), and exempt from public disclosure, but may be reviewed by:
 - A) Members of the APN Board or their designees;
 - B) The APN Board's designated attorneys;
 - C) Administrative personnel assigned to open mail containing reports, to process and distribute the reports to authorized persons, and to communicate with senders of reports; and
 - D) The person who is the subject of the report, his attorney or his authorized representative (as evidenced by a written authorization signed by the person who is the subject of the report).
 - 2) The reports may also be handled or processed by other designated persons in a limited manner necessary to implement reports required under this

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Act by computer, word processing equipment or other mechanical means. The data record shall be limited to the name and address of the originator of the report, the date the initial report was received, the date of the most recent report and the professional license number of the subject of the report.

- 3) The contents of the confidential reports relating to impaired persons shall not be used or made available in any other administrative proceedings before the Division or any other department; however, violations of the treatment or supervision plan will result in a review of the person's status by the Board or its designees for possible discipline or revision in the treatment or supervision plan. Reports shall not be disclosed, made available or subject to subpoena or discovery proceedings in any civil or criminal court proceedings.
- e) Upon a determination by the Board that a report or reports on an impaired person no longer require review and consideration, the Board shall notify the maker of the reports to cease sending the reports and the Board and Division records shall be purged of information contained in the reports. Such determinations shall be based on, but not limited to: the type of rehabilitation program, length of supervision, occurrence of any relapses and present status of license.
- f) Whenever any chief administrative or chief executive officer of any health care institution who *makes a report or provides other information to the Board*, or assists the Board concerning an impaired person, *acts in good faith and not in a willful and wanton manner*, that chief administrative or chief executive officer, and the health care institution employing him, *shall not, as a result of such actions, be subject to criminal prosecution or civil damages* (Section 15-55(c) of the Act).
- g) Definitions
 - 1) "Impaired" means the inability to practice advanced practice nursing with reasonable skill and safety due to physical or mental disabilities, as evidenced by a written evaluation or clinical evidence that reveals a deterioration of the advanced practice nurse's ability to deliver competent care, due to problems related to aging, loss of motor skill, abuse of drugs or alcohol, or mental illness.

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- 2) "Under supervision" means that the performance of the impaired person's clinical privileges and status of the person's impairment is being observed and monitored under the authority of a written directive issued in accordance with a health care institution's or medical staff's bylaws or rules and regulations.

Section 1305.80 Fines

Fines, not to exceed \$5000 for each violation, shall be primarily used in cases not involving patient care. In addition, fines may be imposed in conjunction with other forms of disciplinary actions, but fines shall not be the exclusive disposition of any disciplinary action arising out of conduct resulting in death or injury of a patient.

Section 1305.85 Public Access to Records and Meetings

- a) All investigative procedures, information arising out of the investigation of complaints, and informal conferences shall be confidential. All other proceedings and documents, beginning with the filing of a formal complaint, shall be open to the public.
- b) All meetings of the APN Board shall also be open to the public in accordance with the Open Meetings Act.

Section 1305.90 Refusal to Issue a Nurse License based on Criminal History Record

- a) For purposes of this Part, criminal history record information is defined as information collected by criminal justice agencies (defined in 20 ILCS 2630) on individuals consisting of identifiable descriptions and notations of arrests, detention, indictments, information, or other formal criminal charges, and any disposition arising therefrom, sentencing, correctional supervision and release. The individual records must contain both information sufficient to identify the subject of the record and notations regarding any formal criminal justice transaction involving the identified individual.
- b) In determining whether an applicant for a nurse license is unfit for licensure because of criminal history record information, the Division shall consider the following standards:
 - 1) Whether the crime was one of armed violence [720 ILCS 5/Art. 33A] or

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moral turpitude. Moral turpitude consists of:

- A) Crimes involving dishonesty, false statement or some other element of deceit, untruthfulness or falsification (including, but not limited to, perjury, inducement of perjury, false statement, criminal fraud, embezzlement, false pretense, forgery, counterfeiting and theft).
 - B) Drug offenses, including, but not limited to, violations of the Illinois Controlled Substances Act [720 ILCS 570] and Federal Drug Enforcement Laws, 21 USC 801 et seq.
 - C) Sex offenses, including, but not limited to, all crimes listed in Article 11 of the Criminal Code of 1961 [720 ILCS 5/Art. XI].
- 2) Whether the crime is related to the nursing profession.
 - 3) Whether more than 10 years have elapsed since the date of completion of imposed sentence.
 - 4) Whether the conviction was from a city ordinance violation or a conviction for which a jail sentence was not imposed.
 - 5) Whether the applicant has been sufficiently rehabilitated to warrant the public trust. The Division shall consider, but not be bound by, the following in considering whether an applicant has been presumed to be rehabilitated:
 - A) Completion of probation;
 - B) Completion of parole supervision; or
 - C) If no parole was granted, a period of 10 years has elapsed after final discharge or release from any term of imprisonment without any subsequent conviction.
- c) If any one of the following factors exists, this outweighs the presumption of rehabilitation as defined in subsection (c):

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- 1) Lack of compliance with terms of punishment (i.e., failure to pay fines or make restitution, violation of the terms of probation or parole);
 - 2) Unwillingness to undergo, or lack of cooperation in, medical or psychiatric treatment/counseling;
 - 3) Falsification of an application for licensure with the Division;
 - 4) Failure to furnish to the Division additional information or failure to appear for an interview or meeting with the Division in relation to the applicant's application for licensure.
- d) The following criminal history records shall not be considered in connection with an application for licensure:
- 1) Juvenile adjudications;
 - 2) Records of arrest not followed by a conviction;
 - 3) Convictions overturned by a higher court;
 - 4) Convictions that have been the subject of a pardon or expungement.
- e) Notification of denial, revocation, suspension, or intent to refuse to renew; request for hearing.
- 1) If the determination is made that the applicant or licensee is unfit for licensure, the Division shall send notice of denial, revocation, suspension, or intent to refuse to renew by certified mail, return receipt requested, to the applicant or licensee at the address stated on the applicant's or licensee's last known address or by personal delivery to the applicant or licensee. All such notices will include a statement of the reason for the Division's action.
 - 2) An applicant or licensee may request a hearing to contest the Division's action pursuant to 68 Ill. Adm. Code 1110. The request shall be in writing, and must be received by the Division not later than 20 days after the date the Division mailed or personally delivered the notice of its action to the applicant or licensee.

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- 3) After receipt of a request for hearing and prior to any such hearing, the Division shall schedule an informal conference with the applicant or licensee in an attempt to resolve issues in controversy consensually. The Division shall notify the applicant or licensee of the informal conference at least 20 days prior to the hearing. Failure by the applicant or licensee to attend the informal conference shall act as a withdrawal of the applicant's or licensee's request for a hearing.

Section 1305.95 Granting Variances

- a) The Director may grant variances from this Part in individual cases where he or she finds that:
 - 1) the provision from which the variance is granted is not statutorily mandated;
 - 2) no party will be injured by the granting of the variance; and
 - 3) the rule from which the variance is granted would, in the particular case, be unreasonable or unnecessarily burdensome.
- b) The Director shall notify the APN Board of the granting of a variance, and the reasons for the variance, at the next meeting of the APN Board.

Section 1305.100 Continuing Education

The Division shall adopt rules of continuing education for persons licensed under this Part that require 50 hours of continuing education per 2-year license renewal cycle. The rules shall not be inconsistent with requirements of relevant national certifying bodies or State or national professional associations. The rules shall also address variances for illness or hardship. The continuing education rules shall assure that licensees are given the opportunity to participate in programs sponsored by or through their State or national professional association, hospitals, or other providers of continuing education. Each licensee is responsible for maintaining records of completion of continuing education and shall be prepared to produce the records when requested by the Division. (Section 15-45 of the Act)

- a) Continuing Education Hours Requirements

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- 1) Beginning with the May 31, 2006 renewal and every renewal thereafter, in order to renew a license, a licensee shall be required to complete 50 contact hours of continuing education.
 - 2) The following time equivalencies shall apply:

1 CEU	=	10 contact hours
1 contact hour	=	1 CEU
1 contact hour	=	50 minutes
1 academic semester hour	=	15 contact hours
1 academic quarter hour	=	12.5 contact hours
1CME	=	60 minutes or 1.2 contact hours
1 AMA	=	60 minutes or 1.2 contact hours
 - 3) A prerenewal period is the 24 months preceding May 31 of each even-numbered year.
 - 4) A renewal applicant shall not be required to comply with CE requirements for the first renewal of an Illinois license.
 - 5) APNs licensed in Illinois but residing and practicing in other states shall comply with the CE requirements set forth in this Section.
 - 6) Continuing education credit hours used to satisfy the CE requirements of another jurisdiction may be applied to fulfill the CE requirements of the State of Illinois.
 - 7) An APN holding more than one APN license is required to complete 50 contact hours total per license renewal period.
- b) Approved Continuing Education (CE)
- 1) CE hours shall be earned by verified attendance (e.g., certificate of attendance or certificate of completion) at or participation in a program or course (program) that is offered or sponsored by an approved continuing education sponsor who meets the requirements set forth in subsection (c), except for those activities provided in subsections (b)(2), (3), and (4).

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- 2) Independent study that is approved for continuing education credits as set forth in subsection (c) may be used, i.e., home study programs, articles from journals, and other health discipline independent study modules.
- 3) Academic credits may be used to fulfill CE requirements if the course content is applicable to the certification area. CE hours are awarded as outlined in subsection (a)(4).
 - A) College/university courses that are audited may not be used for CE credit.
 - B) Degree "core" or general education credits such as English, Literature, History, Math, Music and Physical Education may not be used.
- 4) Presenter/lecturer presentations made to other health professionals on topics related to the certification area may be used for CE credit. Each different individual, non-repetitive 60-minute lecture may be used for 5 CE hours. Full-time educators may not use presentations/lectures that are part of their job expectations, but may use guest lectures and other presentations made outside the duties of their job.
- 5) CE hours may be earned for authoring papers, publications, dissertations, book chapters or research projects. These must be applicable to the certification area. The research project must be completed during the prerenewal period. Authoring a paper or publication article may be used for 10 CE hours. Authoring a book chapter, dissertation or research project may be used for 20 CE hours.
- 6) CE hours may be earned through preceptorship of an APN student. Preceptors must provide clinical supervision and education to the APN student. Documentation must be provided from the school of nursing in which the student is enrolled. Precepting one student for an academic semester or quarter may be used for 10 CE hours. Not more than 20 CE hours in each renewal period may come from precepting.
- 7) Successful completion, during the prerenewal period, of a recertification exam in the APNS area of specialty as recognized in Section 1305.20 may be used for 50 CE hours.

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- c) Approved CE Sponsors and Programs
- 1) Sponsor, as used in this Section, shall mean:
- A) Approved providers of recognized certification bodies as outlined in Section 1305.20.
 - B) Any conference that provides approved Continuing Medical Education (CME) as authorized by the Illinois Medical Practice Act.
 - C) ANCC accredited or approved providers.
 - D) Illinois Society for Advanced Practice Nursing (ISAPN).
 - E) American College of Nurse Practitioners.
 - F) American Academy of Nurse Practitioners.
 - G) Nurse Practitioner Association for Continuing Education (NPACE).
 - H) American Association of Nurse Anesthetists.
 - I) National Association of Clinical Nurse Specialists (NACNS).
 - J) Any other accredited school, college or university, State agency, or any other person, firm or association that has been approved and authorized by the Division pursuant to subsection (c)(2) of this Section to coordinate and present continuing education courses and programs.
- 2) An entity seeking approval as a CE sponsor, not specifically listed in subsection (c)(1), shall submit an application, on forms supplied by the Division, along with the application fee specified in Section 1305.25. (State agencies, State colleges and State universities in Illinois shall be exempt from paying this fee.) The application shall include:

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- A) Certification
 - i) That all programs offered by the sponsor for CE credit shall comply with the criteria in subsection (c)(3) and all other criteria in this Section;
 - ii) That the sponsor shall be responsible for verifying full-time continuous attendance at each program and provide a certificate of attendance as set forth in subsection (c)(9);
 - iii) That upon request by the Division, the sponsor shall submit evidence (e.g., certificate of attendance or course material) as is necessary to establish compliance with this Section. Evidence shall be required when the Division has reason to believe that there is not full compliance with the statute.
 - B) A copy of a sample program with faculty, course materials and syllabi.
- 3) All programs shall:
- A) Contribute to the advancement, extension and enhancement of the professional skills and scientific knowledge of the licensee in the practice of advanced practice nursing;
 - B) Foster the enhancement of general or specialized advanced practice nursing practice and values;
 - C) Be developed and presented by persons with education and/or experience in the subject matter of the program;
 - D) Specify the course objectives, course content and teaching methods to be used; and
 - E) Specify the number of CE hours that may be applied to fulfilling the Illinois CE requirements for license renewal.
- 4) Each CE program shall provide a mechanism for evaluation of the program and instructor by the participants. The evaluation may be

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completed on-site immediately following the program/presentation, or an evaluation questionnaire may be distributed to participants to be completed and returned by mail. The sponsor and instructor, together, shall review the evaluation outcome and revise subsequent programs accordingly.

- 5) An approved sponsor may subcontract with individuals or organizations to provide approved programs. All advertising, promotional materials and certificates of attendance must identify the approved sponsor and the sponsor's state approval number. The presenter of the program may also be identified, but should be identified as a presenter. When an approved sponsor subcontracts with a presenter, the sponsor retains all responsibility for monitoring attendance, providing certificates of attendance and ensuring the program meets all of the criteria established by the Act and this Part, including the maintenance of records.
- 6) To maintain approval as a sponsor, each sponsor shall submit to the Division by May 31 of each even-numbered year a renewal application, the renewal fee specified in Section 1305.25 and a list of courses and programs offered within the last 24 months. The list shall include a brief description, location, date and time of each course given by the sponsor and by any subcontract.
- 7) Certification of Attendance. It shall be the responsibility of a sponsor to provide each participant in a program with a certificate of attendance or participation. The sponsor's certificate of attendance shall contain:
 - A) The sponsor's name and, if applicable, sponsor approval number;
 - B) The name of the participant;
 - C) A brief statement of the subject matter;
 - D) The number of hours attended in each program;
 - E) The date and place of the program; and
 - F) The signature of the sponsor.

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- 8) The sponsor shall maintain attendance records for not less than 5 years.
 - 9) The sponsor shall be responsible for assuring that no renewal applicant shall receive CE credit for time not actually spent attending the program.
 - 10) Upon the failure of a sponsor to comply with any of the foregoing requirements, the Division, after notice to the sponsor and hearing before and recommendation by the Board (see 68 Ill. Adm. Code 1110), shall thereafter refuse to accept for CE attendance at or participation in any of that sponsor's CE programs until such time as the Division receives assurances of compliance with this Section.
 - 11) Notwithstanding any other provision of this Section, the Division or Board may evaluate any sponsor of any approved CE program at any time to ensure compliance with requirements of this Section.
- d) Certification of Compliance with CE Requirements
- 1) Each renewal applicant shall certify, on the renewal application, full compliance with the CE requirements set forth in subsections (a) and (b).
 - 2) The Division may require additional evidence demonstrating compliance with the CE requirements (e.g., certificates of attendance). This additional evidence shall be required in the context of the Division's random audit. It is the responsibility of each renewal applicant to retain or otherwise produce evidence of compliance.
 - 3) When there appears to be a lack of compliance with CE requirements, an applicant shall be notified in writing and may request an interview with the Board. At that time the Board may recommend that steps be taken to begin formal disciplinary proceedings as required by Section 10-65 of the Illinois Administrative Procedure Act [5 ILCS 100/10-65].
- e) Continuing Education Earned in Other Jurisdictions
- 1) If a licensee has earned CE hours offered in another jurisdiction not given by an approved sponsor for which the licensee will be claiming credit toward full compliance in Illinois, the applicant shall submit an individual program approval request form, along with a \$25 processing fee, prior to

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participation in the program or with 90 days prior to expiration of the license. The Board shall review and recommend approval or disapproval of the program using the criteria set forth in subsection (c)(3) of this Section.

- 2) If a licensee fails to submit an out-of-state CE approval form within the required time frame, late approval may be obtained by submitting the approval request for with the \$25 processing fee plus \$50 per hour late fee not to exceed \$300. The Board shall review and recommend approval or disapproval of the program using the criteria set forth in subsection (c)(3) of this Section.
- f) **Restoration of Nonrenewed License**
Upon satisfactory evidence of compliance with CE requirements, the Division shall restore the license upon payment of the required fee as provided in Section 1305.25.
- g) **Waiver of CE Requirements**
- 1) Any renewal applicant seeking renewal of a license without having fully complied with these CE requirements shall file with the Division a renewal application, along with the required fee set forth in Section 1305.25, a statement setting forth the facts concerning noncompliance and request for waiver of the CE requirements on the basis of these facts. A request for waiver shall be made prior to the renewal date. If the Division, upon the written recommendation of the Board, finds from such affidavit or any other evidence submitted that extreme hardship has been shown for granting a waiver, the Division shall waive enforcement of CE requirements for the renewal period for which the applicant has applied.
 - 2) Extreme hardship shall be determined on an individual basis by the Board and be defined as an inability to devote sufficient hours to fulfilling the CE requirements during the applicable prerenewal period because of:
 - A) Full-time service in the armed forces of the United State of American during a substantial part of the prerenewal period;
 - B) An incapacitating illness documented by a statement from a currently licensed health care provider;

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- C) A physical inability to travel to the sites of approved programs documented by a currently licensed health care provider; or
 - D) Any other similar extenuating circumstances.
- 3) Any renewal applicant who, prior to the expiration date of the license, submits a request for a waiver, in whole or in part, pursuant to the provisions of this Section shall be deemed to be in good standing until the final decision on the application is made by the Division.

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Section 1305.APPENDIX A Additional Certifications Accepted for Licensure as an Advanced Practice Nurse

Pursuant to Section 1305.20(a)(3), the Division, upon recommendation of the Board, has approved the following certifications. Acceptance of these certifications is based on the absence of an advanced practice nurse examination in the area of the nursing specialty. If the certifying body develops and offers an advanced practice nurse examination in the area of the nursing specialty, then an applicant as an APN would be required to pass the advanced practice nurse examination rather than the generalist examination in order for the Division to accept the certification for licensure.

Clinical Nurse Specialists

American College of Cardiovascular Nursing

American Association of Critical Care Nurses

American Association of Neuroscience Nurses

American Board of Occupational Health Nurses, Inc.

American Holistic Nurses Association

American Nurses Credentialing Center

Clinical Specialists in Community Health Nursing

Clinical Specialists in Gerontology Nursing

Clinical Specialists in Home Health Nursing

Clinical Specialists in Pediatric Nursing

Clinical Specialists in Psychiatric and Mental Health Nursing - Adults

Clinical Specialists in Psychiatric and Mental Health Nursing - Adolescent

Psychiatric and Mental Health Nursing

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Cardiac and Vascular Nurse

College Health Nurse

Perinatal Nurse

Ambulatory Care Nursing

Diabetes

American Society of Perianesthesia Nurses

American Society of Plastic Reconstructive Surgical Nurses

Association of Nurses in AIDS Care

Board of Certification of Emergency Nurses

Certification Board of Perioperative Nurses, Inc.

Certification of Pediatric Oncology Nurses

Certification Board of Gastroenterology Nurses

Dermatology Nurse Certification Board

International Board of Lactation Consultants

International Nurses Society of Addictions

IV Nurses Certification Corporation

National Association of School Nurses, Inc.

National Board of Certification of Hospice and Palliative Nurses

National Certification Board for Diabetes Educators

National Certification Board of Pediatric Nurse Practitioners/Nurses

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National Certification Corporation for the Obstetric, Gynecological and Neonatal
Nursing Specialties

National Certifying Board for Ophthalmic Registered Nurses

Nephrology Nursing Certification Board

Oncology Nursing Certification Corporation

Orthopedic Nurses Certification Board

Rehabilitation Nursing Certification Board

Vascular Nursing Certification Board

Wound, Ostomy, and Continence Society

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Section 1305.EXHIBIT A Sample Written Collaborative Agreement

ADVANCED PRACTICE NURSING
WRITTEN COLLABORATIVE AGREEMENT

A. ADVANCED PRACTICE NURSE INFORMATION

1. NAME: _____
2. ILLINOIS RN LICENSE NUMBER: _____
ILLINOIS APN LICENSE NUMBER: _____
ILLINOIS MID-LEVEL PRACTITIONER LICENSE NUMBER: _____
FEDERAL MID-LEVEL PRACTITIONER DEA NUMBER: _____
3. AREAS OF CERTIFICATION: _____
4. CERTIFYING ORGANIZATION: _____
5. CERTIFICATION EXPIRATION DATE: _____
6. CERTIFICATION NUMBER: _____
7. PRACTICE SITES: See Attachment A.
8. CONTACT NUMBER: _____
FACSIMILE NUMBER: _____
EMERGENCY CONTACT NUMBERS: _____
(e.g., pager, answering service)
9. ATTACHMENTS:
Copy of Certification/Recertification
Copies of RN & APN License
Copy of Certificate of Insurance
Copy of Mid-Level Practitioner License

B. COLLABORATING PHYSICIAN INFORMATION

1. NAME: _____
2. ILLINOIS LICENSE NUMBER: _____
3. PRACTICE AREA OR CONCENTRATION: _____

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- 4. BOARD CERTIFICATION (if any): _____
- 5. CERTIFYING ORGANIZATION: _____
- 6. PRACTICE SITES: See Attachment:
- 7. CONTACT NUMBER: _____
 FACSIMILE NUMBER: _____
 EMERGENCY CONTACT NUMBERS: _____
 (e.g., pager, answering service)

C. ADVANCED PRACTICE NURSE COLLABORATING PHYSICIAN WORKING RELATIONSHIP

1. SCOPE OF PRACTICE

Under this agreement, the advanced practice nurse will work with the collaborating physician in an active practice to deliver health care services to_____. This includes, but is not limited to, the diagnosis, treatment and management of acute and chronic health problems; ordering, interpreting and performing laboratory and radiology tests; prescribing medications, including controlled substances, to the extent delegated; receiving and dispensing stock and sample medications; performing other therapeutic or corrective measures as indicated.

If applicable, the advanced practice nurse shall maintain allied health personnel privileges at the following hospitals for the designated services:

Hospitals: _____

This written collaborative agreement shall be reviewed and updated annually. A copy of this written collaborative agreement shall remain on file at all sites where the advanced practice nurse renders service and shall be provided to the Illinois Department of Financial and Professional Regulation upon request. Any joint orders or guidelines are set forth or referenced in Attachment B.

2. MEDICAL DIRECTION

Physician medical direction shall be adequate with respect to collaboration with Certified Nurse Practitioners, Certified Nurse Midwives, and Certified Clinical Nurse Specialists if a collaborating physician:

- (A) participates in the joint formulation and joint approval of orders or guidelines

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with the advanced practice nurse and periodically reviews those orders and the services provided patients under those orders in accordance with accepted standards of medical practice and advanced practice nursing practice;

- (B) is on site at least once a month to provide medical direction and consultation; and
- (C) is available through telecommunications for consultation on medical problems, complications, or emergencies or patient referral. (See 225 ILCS 60/54.5(6).)

The written collaborative agreement shall be for services the collaborating physician generally provided to his or her patients in the normal course of clinical practice.

Medical direction for a Certified Registered Nurse Anesthetist shall be adequate if:

- (A) an anesthesiologist or a physician participates in the joint formulation and joint approval of orders or guidelines and periodically reviews those orders and the services provided patients under those orders; and
- (B) for anesthesia services, the anesthesiologist or physician participates through discussion of and agreement with the anesthesia plan and is physically present and available on the premises during the delivery of anesthesia services for diagnosis, consultation, and treatment of emergency medical conditions. Anesthesia services in a hospital shall be conducted in accordance with Section 10.7 of the Hospital Licensing Act and in an ambulatory surgical treatment center in accordance with Section 6.5 of the Ambulatory Surgical Treatment Center Act. (See 225 ILCS 60/54.5(b-5).)

3. COMMUNICATION, CONSULTATION AND REFERRAL

The advanced practice nurse shall consult with the collaborating physician by telecommunication or in person as needed. In the absence of the designated collaborating physician, another physician shall be available for consultation.

The advanced practice nurse shall inform each collaborating physician of all written collaborative agreements he or she has signed with other physicians, and provide a copy of these to any collaborating physician upon request.

4. DELEGATION OF PRESCRIPTIVE AUTHORITY

As the collaborating physician, any prescriptive authority delegated to the advanced practice nurse is set forth in Attachment C.

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NOTE: ADVANCED PRACTICE NURSE MAY ONLY PRESCRIBE CONTROLLED SUBSTANCES UPON RECEIPT OF AN ILLINOIS MID-LEVEL PRACTITIONER CONTROLLED SUBSTANCE LICENSE.

WE THE UNDERSIGNED AGREE TO THE TERMS AND CONDITIONS OF THIS WRITTEN COLLABORATIVE AGREEMENT.

Collaborating Physician
Signature/Date

Advanced Practice Nurse
Signature/Date

(Physician's Typed Name)

(Advanced Practice Nurse's Typed Name)

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ATTACHMENT A
PRACTICE SITES

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ATTACHMENT B
JOINT ORDERS OR GUIDELINES

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ATTACHMENT C
DELEGATION OF PRESCRIPTIVE AUTHORITY

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Section 1305.EXHIBIT B Sample Written Practice Agreement for Office Based Anesthesia Services

WRITTEN PRACTICE AGREEMENT FOR OFFICE-BASED ANESTHESIA SERVICES

[A WRITTEN PRACTICE AGREEMENT IS REQUIRED AT A MINIMUM FOR A CERTIFIED REGISTERED NURSE ANESTHETIST TO PRACTICE IN AN OFFICE OF A LICENSED PHYSICIAN, LICENSED DENTIST OR LICENSED PODIATRIST. A WRITTEN COLLABORATIVE AGREEMENT MAY ALSO BE USED IN THESE SETTINGS. HOWEVER, A CERTIFIED REGISTERED NURSE ANESTHETIST IS NOT REQUIRED TO POSSESS PRESCRIPTIVE AUTHORITY OR A WRITTEN COLLABORATIVE AGREEMENT TO PROVIDE ANESTHESIA SERVICES ORDERED BY A LICENSED PHYSICIAN, DENTIST OR PODIATRIST.]

A. CERTIFIED REGISTERED NURSE ANESTHETIST (CRNA) INFORMATION

- 1. Name: _____
- 2. Certification/Recertification #: _____
- 3. Illinois RN License #: _____
- 4. Illinois APN License #: _____
- 5. Contact Number: _____
 Facsimile Number: _____
 Emergency Contact Numbers: _____
 (e.g., pager, answering service)
- 6. Attachments:
 Copy of CRNA Certification/Recertification
 Copies of RN & APN License
 Copy of Certificate of Insurance
- 7. ACLS Certification: _____

B. ANESTHESIOLOGIST, PHYSICIAN, DENTIST OR PODIATRIST INFORMATION

- 1. Name: _____
- 2. Illinois License #: _____
- 3. Practice Area or Concentration: _____

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4. Board Certification (if any): _____

5. Certifying Organization: _____

6. ACLS Certification: _____

7. Continuing Medical Education (CME):

8 hours of CME for conscious sedation:

34 hours of CME for general anesthesia, deep conscious sedation and regional anesthesia, including conscious sedation: _____

OR

Clinical privileges to provide anesthesia services:

Hospital: _____

Ambulatory Surgical Treatment Center: _____

8. Practice Site: _____

9. Contact Number _____

Facsimile Number: _____

Emergency Contact Numbers: _____

(e.g., pager, answering service)

C. WORKING RELATIONSHIP OF THE PARTIES

Under this agreement, the CRNA will deliver anesthesia services to designated patients in an active practice working with the anesthesiologist, physician, dentist or podiatrist pursuant to a mutually agreed upon anesthesia plan.

1. A licensed certified registered nurse anesthetist may provide anesthesia services pursuant to the order of a licensed physician, licensed dentist, or licensed podiatrist in the office of a licensed physician, the office of a licensed dentist, or the office of a licensed podiatrist. For anesthesia services, an anesthesiologist, physician, dentist, or podiatrist shall participate through discussion of and agreement with the anesthesia plan and shall remain physically present and be available on the premises during the delivery of anesthesia services for diagnosis, consultation, and treatment of emergency medical conditions. (See 225 ILCS 65/15-25(a).)

2. A certified registered nurse anesthetist is not required to possess prescriptive

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authority or a written collaborative agreement meeting the requirements of Section 15-15 of the Act to provide anesthesia services ordered by a licensed physician, dentist, or podiatrist. (See 225 ILCS 65/15-25(d).) Certified registered nurse anesthetists are authorized to select, order, and administer drugs and apply the appropriate medical devices in the provision of anesthesia services under the anesthesia plan agreed with by the anesthesiologist, physician, dentist or podiatrist. In a physician's office, dentist's office, or podiatrist's office, the anesthesiologist, operating physician, operating dentist, or operating podiatrist shall agree with the anesthesia plan, in accordance with the written practice agreement. (See 225 ILCS 65/15-25(d).)

3. In a physician's office, the certified registered nurse anesthetist may only provide anesthesia services if the physician has training and experience in the delivery of anesthesia services to patients. (See 68 Ill. Adm. Code 1305.50(e)).
4. In a dentist's office, the Certified Registered Nurse Anesthetist may only provide those services the dentist is authorized to provide pursuant to the Illinois Dental Practice Act and 68 Ill. Adm. Code 1220. Licensed dentists are required to hold permits to administer anesthesia pursuant 68 Ill. Adm. Code 1220: Subpart D.
5. In a podiatrist's office, the certified registered nurse anesthetist may only provide those services the podiatrist is authorized to provide pursuant to the Podiatric Medical Practice Act of 1987 and 68 Ill. Adm. Code 1360. Podiatrists may not administer general anesthetics. (See 68 Ill. Adm. Code 1305.45(f).)
6. A CRNA providing anesthesia services in a physician, dental or podiatrist office shall do so with the active participation, approval, presence and availability of the physician, dentist or podiatrist as well as in accordance with Standards 1-11 of the "Standards for Office Based Anesthesia Practice", American Association of Nurse Anesthetists, 222 South Prospect Avenue, Park Ridge, Illinois 60068 (1999), which are hereby incorporated by reference, with no later editions or amendments. If there is a conflict between the Nursing and Advanced Practice Nursing Act or this Part and the Standards for Office Based Anesthesia Practice of the American Association of Nurse Anesthetists, the Act and this Part shall prevail.

D. CATEGORIES OF CARE, TREATMENT OR PROCEDURES TO BE PERFORMED

A licensed Certified Registered Nurse Anesthetist may provide anesthesia services

DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

NOTICE OF PROPOSED REPEALER

pursuant to the order of a licensed physician, licensed dentist, or licensed podiatrist in the office of a licensed physician, the office of a licensed dentist, or the office of a licensed podiatrist. For anesthesia services, an anesthesiologist, physician, dentist, or podiatrist shall participate through discussion of and agreement with the anesthesia plan and shall remain physically present and be available on the premises during the delivery of anesthesia services for diagnosis, consultation, and treatment of emergency medical conditions. (See 225 ILCS 65/15-25(a).)

A Certified Registered Nurse Anesthetist is not required to possess prescriptive authority or a written collaborative agreement meeting the requirements of Section 15-15 of the Act to provide anesthesia services ordered by a licensed physician, dentist, or podiatrist. (See 225 ILCS 65/15-25(d).) Certified registered nurse anesthetists are authorized to select, order, and administer drugs and apply the appropriate medical devices in the provision of anesthesia services under the anesthesia plan agreed with by the anesthesiologist, physician, dentist or podiatrist. In a physician's office, dentist's office, or podiatrist's office, the anesthesiologist, operating physician, operating dentist, or operating podiatrist shall agree with the anesthesia plan, in accordance with the written practice agreement. (See 225 ILCS 65/15-25(d).)

In a physician's office, the certified registered nurse anesthetist may only provide anesthesia services if the physician has training and experience in the delivery of anesthesia services to patients. (See 68 Ill. Adm. Code 1305.45(e).)

In a dentist's office, the Certified Registered Nurse Anesthetist may only provide those services the dentist is authorized to provide pursuant to the Illinois Dental Practice Act and 69 Ill. Adm. Code 1220. Licensed dentists are required to hold permits to administer anesthesia pursuant 68 Ill. Adm. Code 1220: Subpart D. In a podiatrist's office, the Certified Registered Nurse Anesthetist may only provide those services the podiatrist is authorized to provide pursuant to the Podiatric Medical Practice Act of 1987 and 68 Ill. Adm. Code 1360. Podiatrists may not administer general anesthetics. (See 68 Ill. Adm. Code 1305.45(e).)

The anesthesia service that the CRNA may provide in the anesthesiologist's, physician's, dentist's or podiatrist's office setting shall be set forth in the attached pages.

Signature of CRNA/Date

DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

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CRNA's Typed Name

Signature of Anesthesiologist, Physician, Dentist or Podiatrist/Date

Anesthesiologist's, Physician's, Dentist's or Podiatrist's Typed Name

STATE BOARD OF ELECTIONS

NOTICE OF PROPOSED RULES

- 1) Heading of the Part: Procedures for Ranked Balloting
- 2) Code Citation: 26 Ill. Adm. Code 217
- 3)

<u>Section Numbers:</u>	<u>Proposed Action:</u>
217.10	New Section
217.20	New Section
217.30	New Section
217.40	New Section
217.50	New Section
- 4) Statutory Authority: Implementing Section 16-5 of the Election Code [10 ILCS 5/16-5] and authorized by Section 16-5.01 of the Election Code [10 ILCS 5/16-5.01]
- 5) A Complete Description of the Subjects and Issues Involved: These proposed rules implement 10 ILCS 5/16-5.01, which was amended by Public Act 95-889. This Part is applicable to those municipalities that have chosen to adopt a system of ranked balloting to be used in the consolidated election by qualified members of the United States Military or United States citizens who will be outside the United States on the date of both the consolidated primary and consolidated election in any given year. Municipalities utilizing this ranked ballot provision shall pass an ordinance to that effect prior to the first of the year in which any election occurs at which ranked ballots are intended to be used. The municipality is responsible for transmitting the ordinance to any election authority whose jurisdiction includes the municipality or any portion of the municipality. Such transmittal must be completed no later than 5 business days following passage of the ordinance.
- 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
- 10) Are there any other proposed rulemakings pending on this Part? No

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NOTICE OF PROPOSED RULES

- 11) Statement of Statewide Policy Objectives: The proposed rules do not affect units of local government.
- 12) Time, Place and Manner in which interested persons may comment on this proposed rulemaking: Interested parties may submit comments in writing within 45 days after publication to:

Steven Sandvoss
General Counsel
State Board of Elections
1020 S. Spring Street
Springfield, Illinois 62708

217/782-4141
- 13) Initial Regulatory Flexibility Analysis:
 - A) Types of small businesses, small municipalities and not for profit corporations affected: None
 - B) Reporting, bookkeeping or other procedures required for compliance: None
 - C) Types of professional skills necessary for compliance: None
- 14) Regulatory Agenda on which this rulemaking was summarized: This rulemaking was not included on either of the 2 most recent agendas because: it was not anticipated.

The full text of the Proposed Rules begins on the next page:

STATE BOARD OF ELECTIONS

NOTICE OF PROPOSED RULES

TITLE 26: ELECTIONS

CHAPTER I: STATE BOARD OF ELECTIONS

PART 217

PROCEDURES FOR RANKED BALLOTING

Section

217.10	Applicability
217.20	Definitions
217.30	Issuance of Ballots
217.40	Ballots
217.50	Tabulation of Ranking Ballots

AUTHORITY: Implementing Section 16-5 of the Election Code [10 ILCS 5/16-5] and authorized by Section 16-5.01 of the Election Code [10 ILCS 5/16-5.01].

SOURCE: Adopted at 33 Ill. Reg. _____, effective _____.

Section 217.10 Applicability

- a) This Part implements that portion of Section 16-5.01 of the Election Code.
- b) This Part is applicable to those municipalities that have chosen to adopt a system of ranked balloting to be used in the consolidated election by qualified members of the United States armed forces or United State citizens who will be outside the United States on the dates of both the consolidated primary and consolidated election in any given year. Municipalities utilizing this ranked ballot system shall pass an ordinance to that effect prior to the first of the year in which any election occurs at which ranked ballots are intended to be used. The municipality is responsible for transmitting the ordinance to any election authority whose jurisdiction includes the municipality or any portion of the municipality. The transmittal must be completed no later than 5 business days following passage of the ordinance.
- c) No municipality may offer or accept ranked ballots without first obtaining a written statement of administrative approval from every election authority whose jurisdiction contains a portion of that municipality.

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- d) Any statement of administrative approval shall only be effective for the next succeeding consolidated election at which ranked ballots will be used.

Section 217.20 Definitions

"Contested Primary" shall have the meaning ascribed by Section 7-12(10)(a) of the Code for established political party primaries or Sections 3.1-20-45, 3.1-25-20, 5-2-18.5, 5-2-18.7 and 5-2-19 of the Municipal Code, as applicable to non-partisan primaries for the municipality in question, as well as that ascribed by any other provisions of the Municipal Code or the Election Code.

"Election Authority" means a county clerk or a Board of Election Commissioners. [10 ILCS 5/1-3]

"Election Code" or "Code" means 10 ILCS 5.

"Municipal" or "Municipality" means a city, village, or incorporated town in the State of Illinois, but, unless the context otherwise provides, "municipal" or "municipality" does not include a township, town when used as the equivalent of a township, incorporated town that has superseded a civil township, county, school district, park district, sanitary district, or any other similar governmental district. If "municipal" or "municipality" is given a different definition in any particular Division or Section of the Municipal Code, that definition shall control in that Division or Section only. [65 ILCS 5/1-1-2]

"Municipal Code" means 65 ILCS 5.

"Qualified Person" means an individual qualified to cast an absentee ballot under the Election Code who is a member of the U.S. armed forces or a U.S. citizen who will be outside the United States on the dates of both the consolidated primary and consolidated election in any given year.

"Ranked Balloting" means a system in which a voter, in addition to voting a consolidated primary ballot, votes a "ranked ballot" in lieu of a consolidated election ballot. The voter indicates a numerical preference for each candidate listed on the ranked ballot. For each office, the winning candidate or candidates at the consolidated primary election who received the voter's highest numerical designation shall receive that voter's vote at the consolidated election. This

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system eliminates the need to send the voter a separate consolidated election ballot after the results of the consolidated primary election have been certified.

"Ranking Ballot" means a ballot issued, pursuant to Section 217.30, under a ranked balloting system.

Section 217.30 Issuance of Ballots

- a) A ranking ballot shall be issued to any qualified person requesting a ballot. The qualified persons must maintain or have maintained a residence within the municipality immediately prior to the person being located outside of the United States.
- b) Ranking ballots shall be issued and mailed with the consolidated primary ballot. An additional ballot containing races for which the voter is entitled to cast a vote but that do not appear on the consolidated primary ballot shall be sent to the voter as soon as they become available from the election authority in charge of printing the ballots.
- c) All ranking ballots shall include a set of instructions directing the voter to rank his or her choices for each of the candidates listed on the ballot. The directions shall include a notice that the voter must make a numerical notation (1, 2, 3, and so on) designating a ranked preference for any candidate for which he or she intends to cast a vote. The directions shall also inform the voter that he or she is not required to indicate a numerical preference for more than one candidate on the ranked ballot.

Section 217.40 Ballots

- a) All ranking ballots used under this Part shall include only those municipal and township offices scheduled to be voted on by the individual voter of the issuing municipality at the election in question.
- b) The ballot form shall contain a blank line horizontally adjacent and left of the name of every candidate appearing on the ballot for the municipality and township in which the voter resides or previously resided, including those who appear on the ballot because of their potential to be nominated following a write-in candidacy.

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- c) The ballot shall not contain any blank line that may be used for writing in additional candidate choices.
- d) Any municipality that chooses to use ranked balloting and whose officers are elected on a partisan basis shall conduct its lottery for political party position on the ballot after the certification of the primary ballot. All candidates, including write-in candidates, shall be listed in order of filing within each political party grouping. New party and independent candidates shall be listed as otherwise specified in the Election Code. For those municipalities that elect their officers on a non-partisan basis, the order of candidates appearing on the ballot shall be determined by the order of candidate filing, including the results of any lottery held to determine ballot position of those candidates who filed their nominating petitions simultaneously at the opening hour of the filing office.
- e) The names of each candidate for each office shall be grouped together vertically. However, there shall be a distinct separation between candidate groupings for each office in order to clearly indicate to the voter where the grouping of candidates for each office begins and ends.
- f) The ballot shall include a notation to each voter at the top of each column of candidates indicating to the voter that all candidates may be ranked for each race appearing on the ballot.
- g) The election authority may use multiple columns of candidates on the same ballot form and may print candidate names on both sides of a single ballot, but must ensure that all of the candidate names for a given contest appear on the same side, and that writing on one side of the ballot will not obscure candidate names on the reverse side.
- h) The ballot shall include an instruction directing the voter to write a numeral on the ballot, in ink, next to the name of each candidate that the voter wishes to rank, and that no two candidates should be assigned the same ranking number.

Section 217.50 Tabulation of Ranking Ballots

- a) All ranking ballots shall be remade on a ballot of the same type that is used by in-precinct voters in the election authority's jurisdiction. Except as provided in this Section, the ballots shall be processed in the same manner as those processed at the central counting center (absentee, early and grace period). The provisions in

STATE BOARD OF ELECTIONS

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the Election Code allowing for poll watchers during the counting of provisional ballots shall be applicable to the counting of ranking ballots.

- b) A single remade ballot shall be used to record the voters' choices on the ranking ballot and the voters' choices on the consolidated ballot that contains non-municipal and township races. The remade ballot shall be marked so that the highest ranked (closest to "one") candidates among those candidates who appear on the consolidated election ballot shall receive the voter's votes. The remade ballot shall carry an identifying mark that indicates it was remade based on the corresponding ranking ballot and non-municipal and non-township ballot. The election authority shall maintain the voter's absentee ballot application, or a copy of the application, with its records for both the consolidated primary and consolidated election. The remade ballot shall be stored with the ranking and non-municipal and non-township ballots that were returned by the voter.
- c) All ranking ballots must be received and accepted according to Article 19 or 21 of the Election Code. A ranking ballot shall be deemed to have been timely received if it arrives in the office of the election authority within 14 days after the consolidated election.
- d) The election judges shall be responsible for any determination of voter intent, including but not limited to interpretation of illegible or obscured numerical indications. A majority vote of the judges shall be the final determination of the voter's intent.
- e) If the voter's intent to cast a vote cannot be ascertained due to a lack of a numerical notation on the blank line opposite any of the candidate's names on the ballot at the consolidated election, no vote shall be cast for that candidate.
- f) Ranking ballots shall be safeguarded and secured, as required by Section 17-20 of the Code, by the election authority during the period between the municipal primary and municipal election and will not be available for any public inspection. The ranking ballots shall be destroyed in accordance with Section 17-20 of the Code.
- g) If the voter has the opportunity to vote for multiple positions within the same race, the highest ranked candidates appearing on the consolidated election ballot, up to the number of candidates to be elected to that office, shall receive the votes. The highest ranking shall be the ranking that is closest to the number one.

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- h) Ballots that are remade and cast pursuant to this Part shall be attributed to the precinct in which the voter resides.
- i) Voter history shall be recorded for the consolidated election for each individual who casts a ranked ballot.
- j) If the voter only returns a ranking ballot, it shall be remade and counted regardless of the fact that the voter did not return a consolidated primary or non-municipal or non-township ballot.

ILLINOIS COMMERCE COMMISSION

NOTICE OF ADOPTED AMENDMENTS

- 1) Heading of the Part: The Provision, Construction and Maintenance of Sanitation and Shelter Facilities for Rail Carrier Employees
- 2) Code Citation: 92 Ill. Adm. Code 1545
- 3)

<u>Section Numbers</u> :	<u>Adopted Action</u> :
1545.20	Amendment
1545.30	Amendment
1545.100	Amendment
1545.110	Amendment
1545.120	Amendment
1545.130	Amendment
1545.140	Amendment
1545.150	Amendment
1545.160	Amendment
1545.170	Amendment
1545.180	Amendment
1545.190	Amendment
1545.200	Amendment
1545.210	Amendment
1545.230	Amendment
1545.310	New Section
- 4) Statutory Authority: Implementing Section 18c-7401 and authorized by Section 18c-1202 of the Illinois Commercial Transportation Law [625 ILCS 5/18c-7401 and 18c-1202]
- 5) Effective Date of Amendments: October 1, 2009
- 6) Does this rulemaking contain an automatic repeal date? No
- 7) Does this rulemaking contain incorporations by reference? Yes
- 8) A copy of the adopted amendments, including any material incorporated by reference, is on file and is available for public inspection at:

Conrad Rubinkowski
Illinois Commerce Commission
Transportation Division

ILLINOIS COMMERCE COMMISSION

NOTICE OF ADOPTED AMENDMENTS

527 East Capitol Avenue
Springfield, Illinois 62701

217/785-2449

- 9) Notice of Proposal Published in Illinois Register: March 6, 2009; 33 Ill. Reg. 3793
- 10) Has JCAR issued a Statement of Objection to this rulemaking? No
- 11) Differences between proposal and final version:

In the table of contents, Section 1545.301 has been renumbered to "Section 1545.310".

In Section 1545.30, the date of the relevant federal regulations has been added after the citation to the CFR. The revised language reads: "21 CFR 165.110 (May 29, 2009)".

In Section 1545.100(a)(1), the date of the relevant federal regulations has been added after the citation to the CFR. The revised language reads: "21 CFR 165.110 (May 29, 2009)".

In Section 1545.110(c)(5), the terms "sanitary napkins" and "such napkins" have been stricken and replaced with "feminine hygiene products".

In Section 1545.130(d)(1) and (3) the phrase "between a rail carrier and organized labor" has been added.

In Section 1545.160(c), the word "workers" has been stricken and replaced with "employees".

In Section 1545.170(l), the phrase "16-mesh material" has been replaced with "material that is equivalent to or finer than 16-mesh".

In Section 1545.170(m), the word "workers" has been replaced with "employees".

Section 1545.301 has been renumbered to "1545.310".

In Section 1545.310, the word "Section" has been replaced with "provision".

ILLINOIS COMMERCE COMMISSION

NOTICE OF ADOPTED AMENDMENTS

In addition, minor grammatical and nonsubstantive wording changes have been made to the rules at the suggestion of JCAR staff.

- 12) Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreement letter issued by JCAR? Yes
- 13) Will this rulemaking replace any emergency rulemaking currently in effect? No
- 14) Are there any amendments pending on this Part? No
- 15) Summary and Purpose of Amendments: The amendments will improve the working conditions for employees of rail carriers by requiring notification by the rail carriers prior to making any significant changes to employee facilities; requiring separate facilities such as restrooms and locker rooms for female employees; providing proper locker room and lunch room facilities for employees; and providing shelter facilities when requested by employees.
- 16) Information and questions regarding these adopted amendments shall be directed to:

Steven L. Matrisch
Office of Transportation Counsel
Illinois Commerce Commission
527 East Capitol Avenue
Springfield, IL 62701

217/782-6447
smatrisc@icc.illinois.gov

The full text of the Adopted Amendments begins on the next page:

ILLINOIS COMMERCE COMMISSION

NOTICE OF ADOPTED AMENDMENTS

TITLE 92: TRANSPORTATION
CHAPTER III: ILLINOIS COMMERCE COMMISSION
SUBCHAPTER c: RAIL CARRIERS

PART 1545
THE PROVISION, CONSTRUCTION AND MAINTENANCE OF
SANITATION AND SHELTER FACILITIES FOR
RAIL CARRIER EMPLOYEES

SUBPART A: INTRODUCTORY MATERIAL

Section	
1545.10	Application
1545.20	Responsibility
1545.30	Definitions

SUBPART B: FACILITIES

Section	
1545.100	Drinking Water
1545.110	Toilets
1545.120	Washing Facilities
1545.130	Showers
1545.140	Locker Rooms
1545.150	Lockers
1545.160	Dressing Rooms
1545.170	Bunk Rooms, Camp Cars and Dormitories
1545.180	Bunk Rooms or Dormitories
1545.190	Camp Facilities
1545.200	Shelter
1545.210	Lunch Rooms
1545.220	Cabooses
1545.230	Cleanliness and Maintenance

SUBPART C: GENERAL RULES

Section	
1545.300	General Rules
<u>1545.310</u>	<u>Waiver</u>

ILLINOIS COMMERCE COMMISSION

NOTICE OF ADOPTED AMENDMENTS

AUTHORITY: Implementing Section 18c-7401 and authorized by Section 18c-1202 of the Illinois Commercial Transportation Law [625 ILCS 5/18c-7401 and 18c-1202].

SOURCE: Effective October 1, 1967; codified at 8 Ill. Reg. 13678; Part recodified at 10 Ill. Reg. 5571; Part recodified at 10 Ill. Reg. 18005; amended at 11 Ill. Reg. 15053, effective October 1, 1987; amended at 33 Ill. Reg. 13802, effective October 1, 2009.

SUBPART A: INTRODUCTORY MATERIAL

Section 1545.20 Responsibility

- a) Each rail carrier shall provide and maintain for its employees the sanitation and shelter specified and required by this Part.
- b) Notice of not less than 45 days shall be provided to the Commission of any intention to construct, modify or eliminate a sanitation or shelter facility. This shall include any intention to change the location, size or layout of a facility, or any intention to eliminate, remove or materially change any appurtenance such as lockers, showers, washing facilities, and toilets, but shall not include routine maintenance or the replacement of an appurtenance in kind. The notification shall include a statement of how the change will impact compliance with this Part and shall also include a copy of design drawings. Notice shall be in writing and may be provided by letter or electronic mail to the attention of the Rail Safety Program Administrator of the Illinois Commerce Commission's Transportation Bureau, Rail Safety Section. Compliance with the 45 day notice standards in this Part is hereby excused during periods of an emergency that makes the facility uninhabitable, if notice is provided as soon as practicable.

(Source: Amended at 33 Ill. Reg. 13802, effective October 1, 2009)

Section 1545.30 Definitions

"Bunk or Section House" means any building or portion thereof, excepting a family dwelling, in which persons employed by rail carriers are furnished sleeping and/or living accommodations. A room furnished for sleeping may be referred to as a bunk room or dormitory.

"Camp Car" means trailers and on-track vehicles, including outfit, camp, or bunk

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cars or modular homes mounted on flat cars, used to house or accommodate railroad employees. Wreck trains are not included. any sleeping, dining, kitchen, recreation car or cars or house trailer or camp trailers, on or off rail, furnished for the use of employees.

"CFR" means the Code of Federal Regulations.

"Commission" means the Illinois Commerce Commission.

"Company" means a rail carrier as defined in Section 18c-1104 of the Illinois Commercial Transportation Law [625 ILCS 5/18c-1104]. ~~(Ill. Rev. Stat. 1985, ch. 95½, par. 18c-1104.)~~

"Dressing Room" means a room used by employees either as a dressing room or as a restroom, or for both purposes.

"Drinking Water" means potable water from a supply under the jurisdiction of a health authority or commercially available bottled drinking water. Potable water or commercially available bottled drinking water shall comply with U.S. Food and Drug Administration regulations contained in 21 CFR 165.110 (May 29, 2009).

"Employee" means any person employed by a company to which this Part applies.

"Health Authority" means a public health authority having jurisdiction.

"Lavatory" means a basin or similar vessel used primarily for washing of the hands, arms, face and head.

"Leq (8)" means the equivalent steady sound level that in 8 hours would contain the acoustic energy as the time-varying sound level during the same time period.

"Lunch Room" means a sanitary location inside a building or structure where employees are permitted to eat.

"Nonwater Carriage Toilet Facility" means a toilet facility not connected to a sewer, including a toilet facility connected to self-contained sewage tanks.

"Number of Employees" means, unless otherwise specified, the average number

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of employees employed on any one shift.

"Railroad" means the same as "companyCompany" as defined in this Section.

"Sanitary" means lacking any condition in which any significant amount of filth, trash or human waste is present in such a manner that a reasonable person would believe that the condition might constitute a health hazard; or of strong, persistent, chemical or human waste odors sufficient to deter use of the facility, or give rise to a reasonable concern with respect to exposure to hazardous fumes.

"Shelter" means a building or structure designed to protect employees from the environment.

"Signal Headquarters" means a place where signal employees are regularly required to be and remain on duty during their shift.

"Station" means a facility where freight and/or passenger traffic is ordinarily received and delivered and at which a station agent is regularly assigned for duty.

"Terminal" means a facility where engine and train crews in yard and train service and switchmen, switch tenders, maintenance of way employees, signal employees, and car clerks, are required to report for or be relieved from duty.

"Toilets" means fixtures such as flush, chemical or; dry hopper toilets, or privies.

"Toilet Facility" means a fixture maintained within a toilet room for the purpose of defecation or urination, or both.

"Toilet Room" means a room maintained within or on the premises containing toilet facilities for use by employees.

"Toxic Material" means a material in concentration or amount of such toxicity as to constitute a recognized hazard that is causing or is likely to cause death or serious physical harm.

"Urinal" means a toilet facility maintained within a toilet room for the sole purpose of urination.

"Usual place of employment" means the place where an employee works with a

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reasonable measure of continuity throughout the major part of his/her company service.

"Water Closet" means a toilet facility maintained within a toilet room for the purposes of both defecation and urination and that is flushed with water.

"Yards" means a group of tracks used for the making or breaking up of trains or classification of cars.

(Source: Amended at 33 Ill. Reg. 13802, effective October 1, 2009)

SUBPART B: FACILITIES

Section 1545.100 Drinking Water

a) General Requirements:

- 1) Where water is supplied by the rail carrier for cooking, washing of foods, washing of cooking or eating utensils, washing of food preparation or processing premises, bathing, or drinking purposes, it shall, where available, be from a public supply under the jurisdiction of the Illinois Department of Public Health. Water from a private supply shall meet the standards of the Illinois Department of Public Health, 77 Ill. Adm. Code 900, as well as the U.S. Food and Drug Administration regulations contained in 21 CFR 165.110 (May 29, 2009). The distribution lines shall be capable of supplying operating pressures to all water taps for normal simultaneous operation. Commercially available bottled drinking water may be used to satisfy this requirement.
- 2) An adequate supply of drinking water shall be made available to all employees. Commercially available bottled drinking water may be used to satisfy this requirement.
- 3) When necessary, suitable, sanitary drinking water containers shall be available, conveniently placed for the use of employees, but not in toilet rooms. Each container shall be equipped with a sanitary fountain, faucet or other dispenser. Open containers such as barrels, pails or tanks for drinking water from which the water must be dipped or poured, whether or not they are fitted with a cover, shall not be used. Drinking water

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dispensers shall be designed, constructed and serviced so that sanitary conditions are maintained, capable of being closed, and equipped with a tap.

- 4) All containers used to furnish drinking water shall be thoroughly cleansed as often as is necessary to assure a sanitary and palatable drinking water supply.
 - 5) The common drinking cup is prohibited. Either single service containers or drinking fountains with sanitary angle head shall be used.
- b) Required Locations:
- 1) Running Facilities: Drinking water containers shall be provided, and drinking water shall be available for use, on the following equipment when in use:
 - A) All locomotives.
 - B) Baggage and express cars (when employees are required to work en route), unless another facility is reasonably available (e.g., a passenger car in which water is available being attached to a baggage or express car).
 - C) Cabooses.
 - 2) Stationary Facilities: Drinking water shall be available to employees who are on duty regularly for periods of time long enough to make ~~thesueh~~ drinking water facility reasonably necessary, at the following locations:
 - A) All terminals.
 - B) All yard offices.
 - C) All stations where a public water supply is locally available (except where water is otherwise reasonably accessible).
 - D) All shops and engine houses.

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- E) All signal or section headquarters in terminals and all bunk or section houses.
- F) All lunch rooms operated by a railroad on railroad property.
- G) Camp cars.

3) Other Locations and Job Sites:

Drinking water shall be made available to employees at other locations and job sites where employees are on duty with sufficient regularity for periods of time long enough to make drinking water reasonably necessary, when determined by the following procedures:

- A) An employee requesting water to be provided at other locations and job sites shall contact his/her authorized immediate supervisor, and the parties shall make a reasonable good faith effort to resolve the matter.
- B) If the matter is not resolved, the employee may contact his/her authorized employee representative and identify the specific location and reasons for the request.
- C) If appropriate, the employee representative may initiate an Informal Complaint with the Commission staff under 83 Ill. Adm. Code 200.160. Commission staff shall conduct a joint informal investigation with parties to determine whether drinking water should be provided at the location.
- D) If, following Commission staff's investigation, the matter remains unresolved, a Formal Complaint under 83 Ill. Adm. Code 200.170 may be initiated.

(Source: Amended at 33 Ill. Reg. 13802, effective October 1, 2009)

Section 1545.110 Toilets

- a) General Requirements:
 - 1) Where running water and sewer or septic tank connections are reasonably

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available, flush-type toilets and urinals shall be maintained as ~~hereinafter~~ set forth in this Section.

- 2) Chemical toilets or privies ~~shall~~ may only be used when it is impractical to install inside toilet and urinal facilities.
- 3) All permanent privies shall be constructed and maintained so that there will be no cracks or open spaces in that portion of the superstructure between the seat and floor or between the floor and the pit, vault or space where the cans are kept. Every privy shall be provided with a door and ~~thesuch~~ door shall be self-closing. The lids over the seats shall be so constructed as to fall into closed position when the seat is not occupied. The pit, vault or space where the cans are kept shall be ventilated to the outside end by screens. Individual seats shall be provided in accordance with the ratio ~~hereinafter~~ set forth in subsection (c)(2).
- 4) Every flush toilet shall have a rim flush bowl or be so constructed as to prevent the accumulation of fecal matter on the bowl. The bowl shall be constructed of vitrified glazed earthenware, enameled metal or other smooth finished material impervious to moisture. No pan, plunger or washout water closets are permitted except that pan or double-pan types are permitted for running facilities. Every flush toilet shall have a separate hinged seat made of a material, other than metal, ~~thatwhich~~ does not absorb moisture or ~~that iswhich shall be~~ finished with varnish or other substances resistant to moisture.
- 5) Every urinal shall be made of vitrified glazed earthenware, enameled metal or other smooth finished material impervious to moisture. Every urinal shall be flushed from a water supplied tank or through a flush valve. Water may be allowed to run continuously over trough urinals. Slab urinals are not permitted.
- 6) Separate toilet facilities for employees of each gender housed in the camp car shall be provided in each sleeping car, in accordance with the table shown in subsection (c)(2). The number of facilities to be provided for each sex shall be based on the number of employees of that gender for whom the facilities are furnished. Where toilet rooms will be occupied by no more than one person at a time, can be locked from the inside, and contain at least one water closet or nonwater carriage toilet facility,

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separate toilet rooms for each gender need not be provided. Where the single-occupancy rooms have more than one toilet facility, only one such facility in each toilet room shall be counted for the purpose of the table shown in subsection (c)(2).

7) The method of sewage disposal for toilet facilities in camp cars shall not endanger the health of the employees.

8) All toilet facilities shall be kept in a clean and sanitary condition. They shall be cleaned regularly.

b) Specifications:

1) Separation: No toilet room shall have direct communication with any room in which meals are taken, unless separated from ~~that said~~ room by a self-closing door maintained in operating condition. Separate toilet facilities shall be provided for each ~~gendersex~~, whenever practicable, and each toilet room shall then be plainly marked ~~as such~~.

2) Compartments: Each water closet in toilet rooms containing more than one water closet, or water closets, together with the one or more urinals, shall be in an individual compartment with a door and walls or partition between fixtures sufficiently high to assure privacy.

3) Ventilation: Every toilet room shall be adequately ventilated.

4) Lighting: Each toilet facility shall be lighted naturally or artificially by a safe type of lighting available at all hours of the day and night. Where privies, chemical and dry hopper toilets, or nonwater carriage toilet facilities not connected to self-contained sewage tanks are provided, they shall be located and maintained with a safe type of lighting available at all hours of the day and night. During an emergency, temporary privies, chemical and dry hopper toilets, or nonwater carriage toilet facilities not connected to self-contained sewage tanks are excused from this provision when it is not practicable to provide lighting. ~~All toilet facilities, except privies, chemical and dry hopper toilets, shall be provided with adequate lighting.~~

5) Heating: ~~Every~~ Except privies, chemical and dry hopper toilets, ~~every~~

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toilet room shall be kept adequately heated. During an emergency, temporary privies, chemical and dry hopper toilets, or nonwater carriage toilet facilities not connected to self-contained sewage tanks are excused from this provision when it is not practicable to provide heating.

- 6) Screens: All windows, ventilators and other openings shall be screened. Toilet rooms shall be kept free of insects and vermin insofar as possible.

- 7) During an emergency, temporary privies, chemical and dry hopper toilets, or nonwater carriage toilet facilities not connected to self-contained sewage tanks, shall be located within 50 feet of the camp cars and, as far as practicable, on the same side of the track on which the camp cars are sited.

c) Number Required:

- 1) Adequate toilet facilities, conveniently located, shall be provided for all employees and for each ~~gendersex~~ whenever practicable. ~~TheSuch~~ facilities shall be maintained in a usable and sanitary condition at all times.
- 2) The following table shall be used as a guide in determining the adequacy of toilet facilities:

Number of Employees	Minimum Number of Facilities
1 to 10 persons	1 toilet
11 to 25 persons	2 toilets
26 to 49 persons	3 toilets
50 to 100 persons	5 toilets
100 persons or over	1 toilet for each additional 25 persons

- 3) Whenever urinals are provided, one urinal may substitute for one toilet, provided the number of toilets shall not be reduced to less than $\frac{2}{3}$ of the number shown in the foregoing table.
- 4) Supplies: An adequate supply of toilet paper with holder shall be supplied by the employer for each toilet.

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- 5) ~~Feminine Hygiene Products~~~~Sanitary Napkins~~: In all toilet rooms used by women, the company shall permit the installation of dispensing machines for ~~feminine hygiene products~~~~sanitary napkins~~. Covered receptacles shall be provided for the disposal of ~~feminine hygiene products~~~~such napkins~~.
- d) Location of:
- 1) Running Facilities:
- A) All locomotives (except those used primarily in transfer, switching or yard service and those locomotives in service on October 1, 1967 (the effective date of this Part) on which no space is available).
- B) Baggage and express cars (when employees are required to work en route and no other facility is available).
- C) Cabooses (except those used primarily in transfer, switching or yard service).
- D) Camp cars, ~~when no other toilet is available~~. When toilet facilities are provided in separate cars, toilet rooms shall have a window space of not less than 6 square feet in area opening directly to the outside area or otherwise be satisfactorily ventilated. All outside openings shall be screened with material that is equivalent to or finer than 16-mesh. No fixture, water closet, nonwater carriage toilet facility or urinal shall be located in a compartment used for other than toilet purposes.
- 2) Stationary Facilities:
Toilets, according to the foregoing specifications, shall be available if employees are on duty regularly for periods of time long enough to make ~~thesuch~~ facility reasonably necessary at the following locations:
- A) All terminals.
- B) All yard offices.
- C) All stations (except where other facilities are otherwise reasonably

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accessible).

- D) All engine houses and shops.
- E) All signal or section headquarters in terminals and all bunk or section houses.
- F) Camp cars, ~~when no other toilet is available.~~
- G) Crossing watchman locations, where practicable, and where ~~those such~~ facilities are not otherwise readily and conveniently located.

3) Other Locations and Job Sites:

Toilets shall be provided to employees at other locations and job sites where employees are on duty with sufficient regularity for periods of time long enough to make a toilet reasonably necessary, when determined by the following procedures:

- A) An employee requesting toilets to be provided at other locations and job sites shall contact his/her immediate supervisor, and the parties shall make a reasonably good faith effort to resolve the matter.
- B) If the matter is not resolved, the employee may contact his/her authorized employee representative and identify the specific location and reasons for the request.
- C) If appropriate, the employee representative may initiate an Informal Complaint with the Commission staff under 83 Ill. Adm. Code 200.160. Commission staff shall conduct a joint informal investigation with parties to determine whether drinking water should be provided at the location.
- D) If, following Commission staff's investigation, the matter remains unresolved, a Formal Complaint under 83 Ill. Adm. Code 200.170 may be initiated.

(Source: Amended at 33 Ill. Reg. 13802, effective October 1, 2009)

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Section 1545.120 Washing Facilities

a) General Requirements:

1) Adequate facilities for maintaining personal cleanliness shall be provided for all employees ~~as hereinafter~~ specified in this Section. The ~~facilities same~~ shall be convenient for employees for whom they are provided and shall be maintained in a sanitary condition.

2) Two wash basins within each sleeping car shall be provided for employees housed in camp cars.

b) Specifications:

1) Wash basins or lavatories shall be made of vitrified glazed earthenware, vitreous enameled metal or other smooth finished material, impervious to moisture.

2) Twenty-four inches of trough or circular wash basin shall be considered the equivalent of one wash basin. The trough or circular wash basin shall not be equipped with a plug or stopper.

3) Spring-closing hand-operated faucets are prohibited in trough basins or circular basins.

c) Number Required:

1) The following table shall be used as a guide in determining the adequacy of washing facilities:

Number of Employees	Minimum Number of Facilities
1 to 10 persons	1 basins
11 to 25 persons	2 basins
26 to 49 persons	3 basins
50 to 100 persons	5 basins
100 persons or over	1 basin for each additional 25 employees

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- 2) At least one wash basin shall be located convenient to each toilet room.
- d) Location of:
- 1) Running Facilities:
 - A) Baggage and express cars (where employees are assigned for work en route) and no other facilities are available.
 - B) Cabooses (except cabooses used primarily in transfer, yard or switching service).
 - C) Camp cars, ~~when no other washing facility is available.~~
 - 2) Stationary Facilities:

~~The washing~~ Washing facilities required by this Section, according to the foregoing specifications, shall be available if employees are on duty regularly for periods of time long enough to make ~~thesuch~~ such facility reasonably necessary at the following locations:

 - A) All terminals.
 - B) All yard offices.
 - C) All engine houses and shops.
 - D) All signal or section headquarters in terminals and all bunk or section houses.
 - E) Places convenient to designated lunch rooms ~~designated as such.~~
 - F) Camp cars, ~~when no other washing facility is available.~~
 - G) One lavatory basin per 6 employees in a shared facility.
 - 3) Supplies:
 - A) Water shall be available and hot water shall be supplied at all terminals, yard offices, engine houses, ~~and~~ shops and camp cars.

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Hot and cold running water shall be available for all camp cars.

- B) Mechanical drying facilities, including mechanical roller towels, or individual towels, either paper or cloth, shall be provided. (The use of common towels is prohibited.)
- C) Waste receptacles shall be provided for used paper towels.
- D) Soap or other suitable cleansing agent shall be supplied.
- E) All supplies shall be adequate to meet the needs for which they are intended, and shall be maintained by the employer.

(Source: Amended at 33 Ill. Reg. 13802, effective October 1, 2009)

Section 1545.130 Showers

a) General Requirements:

- 1) Showers shall be required when ~~such facilities are~~ necessary at specified locations to protect employees whose work involves exposure to poisonous, infectious or irritating material or to excessive dirt, heat fumes or vapors or other materials or substances injurious to health.
- 2) ~~Shower~~~~Such shower~~ facilities shall be provided in conjunction with lockers or dressing room facilities, as required by this Part.
- 3) Whenever a shower is required under subsection (a)(1), where 6 or more women are employed at any one time, a separate shower room shall be provided for their use. Where at least one, but fewer than 6 women are employed and a separate shower room is not provided, accommodation must be made to ensure privacy, including a latch or lock on the door leading to the shower room.

b) Specifications:

- 1) Showers shall be provided with a spray fixture connected to an ample supply and pressure of hot and cold water, preferably mixed by a mixing valve.

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- 2) Each shower room or compartment shall be constructed of material impervious to moisture.
- 3) Each shower compartment shall be not less than 32 inches in width and 32 inches in depth.
- 4) Shower floors shall be constructed of non-slippery materials. Floor drains shall be provided in all shower baths and shower rooms to remove waste water and facilitate cleaning. All junctions of the curbing and the floor shall be sealed. The walls and partitions of shower rooms shall be smooth and impervious to the height of splash.
- 5) An adequate supply of hot and cold running water shall be provided for showering purposes. Facilities for heating water shall be provided.

c) Camp Car Showering Facilities:

- 1) Camp cars used to house employees shall include 2 showers within each sleeping car.
- 2) Shower floors shall be constructed of non-slippery materials. Floor drains shall be provided in all shower baths and shower rooms to remove waste water and facilitate cleaning. All junctions of the curbing and the floor shall be sealed. The walls and partitions of shower rooms shall be smooth and impervious to the height of splash.
- 3) An adequate supply of hot and cold running water shall be provided for showering purposes. Facilities for heating water shall be provided.

d) Camp Car Showers:

- 1) Unless otherwise provided by agreement between a rail carrier and organized labor, body soap or other appropriate cleansing agent convenient to the showers shall be provided.
- 2) Showers shall be provided with hot and cold water feeding a common discharge line.

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- 3) Unless otherwise provided by agreement between a rail carrier and organized labor, employees who use showers shall be provided with individual clean towels.

(Source: Amended at 33 Ill. Reg. 13802, effective October 1, 2009)

Section 1545.140 Locker Rooms

- a) Locker rooms, except those in camp cars, shall have not less than ~~80~~^{eighty} square feet of usable clear floor space for the first ~~10~~^{ten} employees, or fraction thereof, and for each additional employee not less than ~~4~~^{four} additional square feet shall be added ~~thereto~~. Employees, in this Section as used herein, refers to employees to whom lockers have been assigned.
- b) Necessary furniture, such as benches and tables, shall be provided.
- c) ~~Locker~~^{Such locker} rooms shall be properly lighted, heated and ventilated at all times.
- d) Space shall be configured with lockers and furniture, such as benches and tables, to ensure it functions for its intended purpose as a locker room. This subsection may not be used to increase the floor space requirements of subsection (a).

(Source: Amended at 33 Ill. Reg. 13802, effective October 1, 2009)

Section 1545.150 Lockers

- a) Individual lockers for employees shall be provided when requested by ~~such~~ employees and deemed necessary by the Commission.
- b) Lockers shall be metal, not less than ~~15~~^{fifteen} inches wide, ~~18~~^{eighteen} inches deep and ~~72~~^{seventy-two} inches high, exclusive of legs or other base. The lockers shall be equipped with a shelf and with not less than one clothes hook for each side or equivalent hanger bar, ~~with and also~~ sufficient openings in the door for purposes of ventilation. ~~Wooden, or other type lockers in use prior to~~ October 1, 1967 (the effective date of this Part); shall be deemed adequate, but shall not be replaced in kind.

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- c) Camp cars used for housing employees shall provide individual lockers within each car for each occupant of a camp car. Each locker within a camp car used for housing employees shall be of sufficient size to adequately afford storage of 5 working days worth of personal belongings and provisions.

(Source: Amended at 33 Ill. Reg. 13802, effective October 1, 2009)

Section 1545.160 Dressing Rooms

- a) Where ~~six~~ or more women who are required to change clothing are employed at any one time, a dressing room shall be provided for their use.
- b) Where ~~at least more than~~ one but ~~fewer less~~ than ~~six~~ women who are required to change clothing are employed and a dressing room is not provided, room space shall be provided, properly screened for privacy and made suitable for the use of women employees in lieu of a dressing room.
- c) Dressing rooms shall be conveniently located for the ~~employees workers~~ for whose use they are intended.

(Source: Amended at 33 Ill. Reg. 13802, effective October 1, 2009)

Section 1545.170 Bunk Rooms, Camp Cars and Dormitories

- a) The walls, floor and ceilings of bunk rooms, camp cars and dormitories shall be so constructed as to provide protection from outside weather elements and to permit their being readily cleaned, and they shall be kept cleaned and in good repair. Wood floors shall be raised above the ground sufficiently to allow air space beneath them.
- b) Ventilation shall be provided by ~~windows window~~ opening directly to the outside air.
- c) During the period between May 1 and November 1, all outer doors and windows shall be equipped with screens.
- d) Adequate heating, ~~cooling and ventilation facilities and fuel~~ shall be provided to maintain a temperature of at least 68°F and no greater than 78°F, or 20° below ambient, whichever is warmer, during normal hot weather. with which employees

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~~may maintain a comfortable temperature as weather conditions may require.~~

- e) Lighting by windows and/or acceptable artificial illumination shall be provided.
- f) At least a 7-foot ceiling measured at the entrance to the camp car shall be provided.
- g) Each habitable room in a camp car shall be provided with adequate lighting.
- h) Every camp car shall be constructed in a manner that provides protection against the weather.
- i) All steps, entry ways, passageways and corridors providing normal entry to or between camp cars shall be constructed of durable weather resistant material and properly maintained. Any broken or unsafe fixtures or components in need of repairs shall be repaired or replaced promptly.
- j) Floors shall be of smooth and tight construction and shall be kept in good repair.
- k) All living quarters shall be provided with windows, the total of which shall not be less than 10 percent of the floor area. At least one-half of each window designed to be opened shall be so constructed that it can be opened for purposes of ventilation. Durable opaque window coverings shall be provided to reduce the entrance of light during sleeping hours.
- l) All exterior openings shall be effectively screened with material that is equivalent to or finer than 16-mesh. All screen doors shall be equipped with self-closing devices.
- m) In a facility where employees cook, live and sleep, a minimum of 90 square feet per person shall be provided. Sanitary facilities shall be provided for storing and preparing food.
- n) In camp cars where meals are provided, adequate facilities to feed employees within a 60-minute period shall be provided.
- o) All heating, cooking, ventilation, air conditioning and water heating equipment shall be installed in accordance with applicable local regulations governing such installations.

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- p) Every camp car shall be provided with equipment capable of maintaining a temperature of at least 68°F and no greater than 78°F, or 20° below ambient, whichever is warmer, during normal hot weather.

(Source: Amended at 33 Ill. Reg. 13802, effective October 1, 2009)

Section 1545.180 Bunk Rooms or Dormitories

- a) Bunk rooms or dormitories shall be of such area to provide at least ~~50~~50 fifty square feet of floor space for each occupant. At least a 7-foot ceiling shall be provided. Except person with a ceiling height of not less than seven feet, except where double bunks are used, at least ~~30~~30 thirty square feet of floor space shall be provided for each person accommodated.
- b) Beds, cots or bunks and suitable storage facilities such as wall lockers or space for foot lockers for clothing and personal articles shall be provided in every room used for sleeping purposes. Except where partitions are provided, beds or similar facilities shall be spaced not closer than 36 inches laterally (except in modular units that cannot be spaced closer than 30 inches) and 30 inches end to end, and shall be elevated at least 12 inches from the floor. If double-deck bunks are used, they shall be spaced not less than 48 inches both laterally and end to end. The minimum clear space between the lower and upper bunk shall be not less than 27 inches. Triple-deck bunks shall not be used. Where beds, bunks or cots are provided, they shall be equipped with proper mattresses. ~~Such beds, bunks or cots shall be raised twelve inches above the floor and be located two feet or more from the side of any other bed, bunk or cot located in the same room and have at least twenty seven inches of clear space above it.~~

(Source: Amended at 33 Ill. Reg. 13802, effective October 1, 2009)

Section 1545.190 Camp Facilities

- a) Where camp cars, house trailers, outfit or bunk cars, modular units mounted on flat cars, or Pullman and/or passenger cars are furnished for housing or sleeping purposes, a maximum of 4 occupants shall be designated for each car, the Commission may designate the number of men to be housed in each car. A minimum of 80 square feet per occupant shall be afforded in each car.

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- b) Adequate first aid kits shall be provided and maintained for employees housed in camp cars for emergency treatment of injured persons. Each camp car shall contain a permanently wired smoke detector and carbon monoxide detector and a battery backup weather alert radio. Each camp car shall also include emergency evacuation instructions pertinent to the camp location, along with directions to the closet medical treatment facility.
- c) Camp cars occupied exclusively by individuals employed for the purpose of maintaining the right-of-way of a railroad shall be located as far as practical from where "switching or humping operations" of "placarded cars" occur, as described in 49 CFR 228.101(c)(3) and (c)(4), respectively. Every reasonable effort shall be made to locate these camp cars at least one-half mile (2,640 feet) from where the switching or humping occurs. In the event employees housed in camp cars located closer than one-half mile from where switching or humping of cars takes place are exposed to an unusual hazard at that location, the employees involved should be housed in other suitable accommodations. An unusual hazard means an unsafe condition created by an occurrence other than normal switching or humping.
- d) Sleeping quarters are not considered to be free of interruptions caused by noise under the control of the railroad if noise levels attributable to noise sources under the control of the railroad exceed an Leq (8) value of 55 dB(A), with windows closed and exclusive of cooling, heating and ventilating equipment.
- e) A railroad shall, within 48 hours after notice of noncompliance with these requirements, fix the deficient conditions. Where holidays or weekends intervene, the railroad shall fix the condition within 8 hours after the employees return to work. In the event the conditions affect the safety or health of the employees, such as problems with water, cooling, heating, washing, bathing, toilet or eating facilities, the railroad shall provide alternative arrangements for housing and eating until the noncompliant condition is fixed.
- f) A railroad shall, within 2 business days after establishing a labor camp in a community or county, notify the local health department with jurisdiction where the labor camp is located and request and permit a health inspection. Upon approval of the facilities, the inspecting health department shall issue a permit and collect a fee from the railroad that is sufficient to cover all costs associated with the inspection and processing of the permit.

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- g) The employee representatives of each labor craft affected by the establishment of a railroad labor camp shall be notified by the railroad at the same time as the local health department. The employee representatives shall be permitted to take part in the health inspection and shall be provided with a copy of the inspection report prepared by the local health department.

(Source: Amended at 33 Ill. Reg. 13802, effective October 1, 2009)

Section 1545.200 Shelter

- a) When an employee works regularly at a location (other than a repair track) where shelter is not otherwise available, an employee requesting that shelter be provided shall contact his/her immediate supervisor, and the parties shall make a reasonably good faith effort to resolve the matter. it shall be provided if requested by such employee and if deemed necessary by the Commission.
- b) If the matter is not resolved, the employee may contact his/her authorized employee representative and identify the specific location and reasons for the request.
- c) If appropriate, the employee representative may initiate an Informal Complaint with the Commission staff under 83 Ill. Adm. Code 200.160. Commission staff shall conduct a joint informal investigation with parties to determine whether shelter should be provided at the location.
- d) If, following Commission staff's investigation, the matter remains unresolved, a Formal Complaint under 83 Ill. Adm. Code 200.170 may be initiated.

(Source: Amended at 33 Ill. Reg. 13802, effective October 1, 2009)

Section 1545.210 Lunch Rooms

- a) General Requirements:
- 1) When a lunch room is provided by the company, it shall have adequate space and be adequately ventilated, reasonably heated, properly screened, provided with the necessary covered receptacles for the disposal of waste matter and be adequately furnished, provide a means to store and heat

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food in a sanitary manner, and shall be kept clean and in good care.

- 2) When an employee seeks to have a lunch room provided at a stationary location or a stationary job site where one is otherwise not provided, and the employee is on duty with sufficient regularity for periods of time long enough to make a lunch room reasonably necessary, the employee shall contact his/her authorized employee representative and identify the specific location and reasons for the request. If appropriate, the employee representative shall contact the railroad's representative and, within 5 days, the employees' representative and the railroad's representative shall jointly inspect the location. After inspection, if the employee representative and the railroad representative do not agree on whether a lunch room should be provided, the employee representative may initiate an Informal Complaint with the Commission staff under 83 Ill. Adm. Code 200.160. Commission staff shall conduct a joint informal investigation with the parties to determine whether a lunch room should be provided at that location. If, following Commission staff's investigation, the matter remains unresolved a Formal Complaint under 83 Ill. Adm. Code 200.170 may be initiated.

b) Camp Cars – Provision of Meals:

- 1) When kitchen cars or other camp facilities for heated meals are furnished by the company, they shall be provided with adequate equipment for cooking and refrigeration.
- 2) In lunch rooms where food is served by the company for employees, the food, equipment and facilities shall be subject to the same inspection and regulation as is required in public eating places, generally consistent with the rules and regulations of the Illinois Department of Public Health pertaining to public food establishments.
- 3) Employees and workers handling and serving food in the lunch rooms described in subsection subparagraph (b)(2) of this Section shall be subject generally to IDPH those rules and regulations of the Illinois Department of Public Health which are necessary to the sanitary handling of food.
- 4) Concessionaire facilities provided by the company in lieu of direct company operations shall comply with the regulations of this Part with respect to adequate space, adequate food handling facilities and

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cleanliness.

- 5) In all camp cars, the food handling facilities shall be clean and sanitary.
 - 6) When separate kitchen and dining hall cars are provided, there shall be a closable door between the living or sleeping quarters into a kitchen or dining hall car.
- c) Camp Cars – Consumption of Food and Beverages on the Premises:
- 1) This Section shall apply only where employees are permitted to consume food or beverages.
 - 2) No employee shall be allowed to consume food or beverages in a toilet room or in any area exposed to toxic material.
 - 3) All sewer lines and floor drains from camp cars shall be connected to public sewers where available and practicable, unless the cars are equipped with holding tanks that are emptied in a sanitary manner.
 - 4) An adequate number of receptacles constructed of smooth, corrosion resistant, easily cleanable or disposable materials shall be provided and used for the disposal of waste food. Receptacles shall be provided with a solid tight fitting cover unless sanitary conditions can be maintained without the use of a cover. The number, size and location of receptacles shall encourage their use and not result in overfilling. They shall be emptied regularly and maintained in a clean and sanitary condition.
 - 5) No food or beverages shall be stored in toilet rooms or in an area exposed to a toxic material.
 - 6) In all places of employment where all or part of the food service is provided, the food dispensed shall be free from spoilage and shall be processed, prepared, handled and stored in such a manner as to be protected against contamination.

(Source: Amended at 33 Ill. Reg. 13802, effective October 1, 2009)

Section 1545.230 Cleanliness and Maintenance

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- a) Frequency of regular and thorough cleaning will be determined in each case by the amount of traffic; ~~and~~, in all instances, the frequency of cleaning shall be adequate.
- b) Toilets, showers and washrooms shall not be used for storage. Fixtures are to be maintained in proper working order at all times.
- c) Floors shall be maintained in a clean and, so far as practicable, dry condition at all times. Where wet processes are used, drainage shall be maintained and false floors, platforms, mats or other dry standing places shall be provided whenever practicable.
- d) All camp cars shall be kept clean to the extent that the nature of the work allows.
- e) To facilitate cleaning, every floor, working place and passageway shall be kept free from protruding nails, splinters, loose boards, and unnecessary holes and openings.
- f) All sweepings, solid or liquid waste, refuse and garbage shall be removed in such a manner as to avoid creating a menace to health and as often as necessary to maintain a sanitary condition.
- g) Any exterior receptacle used for putrescible solid or liquid waste shall be constructed so as to not leak and shall be thoroughly cleaned and maintained in a sanitary condition. Any exterior receptacle used for putrescible solid or liquid waste shall be equipped with a tight fitting cover, unless it can be maintained in a sanitary condition without a cover.
- h) Camp cars shall be constructed, equipped and maintained as reasonably practicable to prevent the entrance or harborage of rodents, insects or other vermin. An extermination program shall be instituted, if rodents, insects or vermin are detected.
- i) Floors shall be of smooth and tight construction and shall be kept in good repair.
- j) Rail carriers and ~~their~~ employees share the obligation to keep the facilities clean and in good care. This shall be construed to mean that rail carriers are responsible

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for the regular and thorough cleaning of all employee facilities, while employees shall use good housekeeping practices.

(Source: Amended at 33 Ill. Reg. 13802, effective October 1, 2009)

SUBPART C: GENERAL RULES

Section 1545.310 Waiver

A rail carrier may petition the Commission for a waiver of any provision of this Part pursuant to Section 18c-7403 of the Illinois Commercial Transportation Law by providing written notice stating the specific burdens of complying with a particular provision.

(Source: Added at 33 Ill. Reg. 13802, effective October 1, 2009)

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- 1) Heading of the Part: Temporary Assistance for Needy Families
- 2) Code Citation: 89 Ill. Adm. Code 112
- 3)

<u>Section Numbers:</u>	<u>Adopted Action:</u>
112.252	Amendment
112.253	Amendment
112.254	Amendment
- 4) Statutory Authority: Implementing Article IV and authorized by Section 12-13 of the Illinois Public Aid Code [305 ILCS 5/Art. IV and 12-13]
- 5) Effective Date of Amendments: September 17, 2009
- 6) Does this rulemaking contain an automatic repeal date? No
- 7) Does this rulemaking contain incorporations by reference? No
- 8) A copy of the adopted amendments, including any material incorporated by reference, is on file in the agency's principal office and is available for public inspection.
- 9) Notice of Proposal Published in the Illinois Register: April 3, 2009; 33 Ill. Reg. 4803
- 10) Has JCAR issued a Statement of Objection to this rulemaking? No
- 11) Differences between proposal and final version: No substantive changes were made to the text of the proposed rulemaking.
- 12) Have all changes agreed upon by the agency and JCAR been made as indicated in the agreements issued by JCAR? Yes
- 13) Will this rulemaking replace any emergency rulemaking currently in effect? No
- 14) Are there any amendments pending on this Part? Yes

<u>Section Numbers:</u>	<u>Proposed Action:</u>	<u>Illinois Register Citation:</u>
112.140	Amendment	33 Ill. Reg. 4566; March 27, 2009
112.9	Amendment	33 Ill. Reg. 5201; April 10, 2009
112.65	Amendment	33 Ill. Reg. 5201; April 10, 2009

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112.69	Amendment	33 Ill. Reg. 5201; April 10, 2009
112.127	Amendment	33 Ill. Reg. 5201; April 10, 2009
112.150	Amendment	33 Ill. Reg. 5201; April 10, 2009
112.151	Amendment	33 Ill. Reg. 5201; April 10, 2009
112.152	Amendment	33 Ill. Reg. 5201; April 10, 2009
112.153	Amendment	33 Ill. Reg. 5201; April 10, 2009
112.305	Amendment	33 Ill. Reg. 5201; April 10, 2009
112.307	Amendment	33 Ill. Reg. 5201; April 10, 2009
112.110	Amendment	33 Ill. Reg. 7274; June 5, 2009

- 15) Summary and Purpose of Rulemaking: Pursuant to provisions of P.A. 95-744, this rulemaking increases the TANF grant amounts in effect on June 30, 2008 by 9%. The budget implementation bill (S.B. 773) passed the General Assembly and was signed by the Governor effective July 18, 2008, mandating the 9% increase in TANF payment levels. This rulemaking aligns the TANF payment levels in the administrative rules with the 9% increase in state law.

- 16) Information and questions regarding these adopted amendments shall be directed to:

Tracie Drew, Chief
Bureau of Administrative Rules and Procedures
Department of Human Services
100 South Grand Avenue East
Harris Building, 3rd Floor
Springfield, Illinois 62762

217/785-9772

- 17) Do these amendments require the preview of the Procurement Policy Board as specified in Section 5-25 of the Illinois Procurement Code? No

The full text of the Adopted Amendments begins on the next page:

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TITLE 89: SOCIAL SERVICES
CHAPTER IV: DEPARTMENT OF HUMAN SERVICES
SUBCHAPTER b: ASSISTANCE PROGRAMSPART 112
TEMPORARY ASSISTANCE FOR NEEDY FAMILIES

SUBPART A: GENERAL PROVISIONS

Section

- 112.1 Description of the Assistance Program and Time Limit
- 112.2 Time Limit on Receipt of Benefits for Clients Enrolled in Post-Secondary Education
- 112.3 Receipt of Cash Benefits Beyond the 60 Month Lifetime Limit
- 112.5 Incorporation by Reference
- 112.6 The Family Violence Option

SUBPART B: NON-FINANCIAL FACTORS OF ELIGIBILITY

Section

- 112.8 Caretaker Relative
- 112.9 Client Cooperation
- 112.10 Citizenship
- 112.20 Residence
- 112.30 Age
- 112.40 Relationship
- 112.50 Living Arrangement
- 112.52 Social Security Numbers
- 112.54 Assignment of Medical Support Rights
- 112.60 Basis of Eligibility
- 112.61 Death of a Parent (Repealed)
- 112.62 Incapacity of a Parent (Repealed)
- 112.63 Continued Absence of a Parent (Repealed)
- 112.64 Unemployment of the Parent (Repealed)
- 112.65 Responsibility and Services Plan
- 112.66 Alcohol and Substance Abuse Treatment
- 112.67 Restriction in Payment to Households Headed by a Minor Parent
- 112.68 School Attendance Initiative
- 112.69 Felons and Violators of Parole or Probation

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SUBPART C: TANF EMPLOYMENT AND WORK ACTIVITY REQUIREMENTS

Section	
112.70	Employment and Work Activity Requirements
112.71	Individuals Exempt from TANF Employment and Work Activity Requirements
112.72	Participation/Cooperation Requirements
112.73	Adolescent Parent Program (Repealed)
112.74	Responsibility and Services Plan
112.75	Teen Parent Personal Responsibility Plan (Repealed)
112.76	TANF Orientation
112.77	Reconciliation and Fair Hearings
112.78	TANF Employment and Work Activities
112.79	Sanctions
112.80	Good Cause for Failure to Comply with TANF Participation Requirements
112.81	Responsible Relative Eligibility for JOBS (Repealed)
112.82	Supportive Services
112.83	Teen Parent Services
112.84	Employment Retention and Advancement Project
112.85	Four Year College/Vocational Training Demonstration Project (Repealed)

SUBPART E: PROJECT ADVANCE

Section	
112.86	Project Advance (Repealed)
112.87	Project Advance Experimental and Control Groups (Repealed)
112.88	Project Advance Participation Requirements of Experimental Group Members and Adjudicated Fathers (Repealed)
112.89	Project Advance Cooperation Requirements of Experimental Group Members and Adjudicated Fathers (Repealed)
112.90	Project Advance Sanctions (Repealed)
112.91	Good Cause for Failure to Comply with Project Advance (Repealed)
112.93	Individuals Exempt From Project Advance (Repealed)
112.95	Project Advance Supportive Services (Repealed)

SUBPART F: EXCHANGE PROGRAM

Section	
112.98	Exchange Program (Repealed)

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SUBPART G: FINANCIAL FACTORS OF ELIGIBILITY

Section	
112.100	Unearned Income
112.101	Unearned Income of Parent
112.105	Budgeting Unearned Income
112.106	Budgeting Unearned Income of Applicants
112.107	Initial Receipt of Unearned Income
112.108	Termination of Unearned Income
112.110	Exempt Unearned Income
112.115	Education Benefits
112.120	Incentive Allowances
112.125	Unearned Income In-Kind
112.126	Earmarked Income
112.127	Lump-Sum Payments
112.128	Protected Income (Repealed)
112.130	Earned Income
112.131	Earned Income Tax Credit
112.132	Budgeting Earned Income
112.133	Budgeting Earned Income of Employed Applicants
112.134	Initial Employment
112.135	Budgeting Earned Income For Contractual Employees
112.136	Budgeting Earned Income For Non-contractual School Employees
112.137	Termination of Employment
112.138	Transitional Payments (Repealed)
112.140	Exempt Earned Income
112.141	Earned Income Exemption
112.142	Exclusion from Earned Income Exemption
112.143	Recognized Employment Expenses
112.144	Income from Work-Study and Training Programs
112.145	Earned Income From Self-Employment
112.146	Earned Income From Roomer and Boarder
112.147	Income From Rental Property
112.148	Payments from the Illinois Department of Children and Family Services
112.149	Earned Income In-Kind
112.150	Assets
112.151	Exempt Assets
112.152	Asset Disregards

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- 112.153 Deferral of Consideration of Assets
- 112.154 Property Transfers (Repealed)
- 112.155 Income Limit
- 112.156 Assets for Independence Program

SUBPART H: PAYMENT AMOUNTS

Section

- 112.250 Grant Levels
- 112.251 Payment Levels
- 112.252 Payment Levels in Group I Counties
- 112.253 Payment Levels in Group II Counties
- 112.254 Payment Levels in Group III Counties
- 112.255 Limitation on Amount of TANF Assistance to Recipients from Other States (Repealed)

SUBPART I: OTHER PROVISIONS

Section

- 112.300 Persons Who May Be Included in the Assistance Unit
- 112.301 Presumptive Eligibility
- 112.302 Reporting Requirements for Clients with Earnings
- 112.303 Budgeting
- 112.304 Budgeting Schedule
- 112.305 Strikers
- 112.306 Foster Care Program
- 112.307 Responsibility of Sponsors of Non-Citizens Entering the Country Prior to 8/22/96
- 112.308 Responsibility of Sponsors of Non-Citizens Entering the Country On or After 8/22/96
- 112.309 Institutional Status
- 112.310 Child Care for Representative Payees
- 112.315 Young Parents Program (Renumbered)
- 112.320 Redetermination of Eligibility
- 112.330 Extension of Medical Assistance Due to Increased Income from Employment
- 112.331 Four Month Extension of Medical Assistance Due to Child Support Collections
- 112.332 Extension of Medical Assistance Due to Loss of Earned Income Disregard (Repealed)
- 112.340 New Start Payments to Individuals Released from Department of Corrections Facilities (Repealed)

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SUBPART J: CHILD CARE

Section

112.350	Child Care (Repealed)
112.352	Child Care Eligibility (Repealed)
112.354	Qualified Provider (Repealed)
112.356	Notification of Available Services (Repealed)
112.358	Participant Rights and Responsibilities (Repealed)
112.362	Additional Service to Secure or Maintain Child Care Arrangements (Repealed)
112.364	Rates of Payment for Child Care (Repealed)
112.366	Method of Providing Child Care (Repealed)
112.370	Non-JOBS Education and Training Program (Repealed)

SUBPART K: TRANSITIONAL CHILD CARE

Section

112.400	Transitional Child Care Eligibility (Repealed)
112.404	Duration of Eligibility for Transitional Child Care (Repealed)
112.406	Loss of Eligibility for Transitional Child Care (Repealed)
112.408	Qualified Child Care Providers (Repealed)
112.410	Notification of Available Services (Repealed)
112.412	Participant Rights and Responsibilities (Repealed)
112.414	Child Care Overpayments and Recoveries (Repealed)
112.416	Fees for Service for Transitional Child Care (Repealed)
112.418	Rates of Payment for Transitional Child Care (Repealed)

AUTHORITY: Implementing Article IV and authorized by Section 12-13 of the Illinois Public Aid Code [305 ILCS 5/Art. IV and 12-13].

SOURCE: Filed effective December 30, 1977; peremptory amendment at 2 Ill. Reg. 17, p. 117, effective February 1, 1978; amended at 2 Ill. Reg. 31, p. 134, effective August 5, 1978; emergency amendment at 2 Ill. Reg. 37, p. 4, effective August 30, 1978, for a maximum of 150 days; peremptory amendment at 2 Ill. Reg. 46, p. 44, effective November 1, 1978; peremptory amendment at 2 Ill. Reg. 46, p. 56, effective November 1, 1978; emergency amendment at 3 Ill. Reg. 16, p. 41, effective April 9, 1979, for a maximum of 150 days; emergency amendment at 3 Ill. Reg. 28, p. 182, effective July 1, 1979, for a maximum of 150 days; amended at 3 Ill. Reg. 33, p. 399, effective August 18, 1979; amendment at 3 Ill. Reg. 33, p. 415, effective August 18, 1979; amended at 3 Ill. Reg. 38, p. 243, effective September 21, 1979; peremptory amendment at

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3 Ill. Reg. 38, p. 321, effective September 7, 1979; amended at 3 Ill. Reg. 40, p. 140, effective October 6, 1979; amended at 3 Ill. Reg. 46, p. 36, effective November 2, 1979; amended at 3 Ill. Reg. 47, p. 96, effective November 13, 1979; amended at 3 Ill. Reg. 48, p. 1, effective November 15, 1979; preemptory amendment at 4 Ill. Reg. 9, p. 259, effective February 22, 1980; amended at 4 Ill. Reg. 10, p. 258, effective February 25, 1980; amended at 4 Ill. Reg. 12, p. 551, effective March 10, 1980; amended at 4 Ill. Reg. 27, p. 387, effective June 24, 1980; emergency amendment at 4 Ill. Reg. 29, p. 294, effective July 8, 1980, for a maximum of 150 days; amended at 4 Ill. Reg. 37, p. 797, effective September 2, 1980; amended at 4 Ill. Reg. 37, p. 800, effective September 2, 1980; amended at 4 Ill. Reg. 45, p. 134, effective October 27, 1980; amended at 5 Ill. Reg. 766, effective January 2, 1981; amended at 5 Ill. Reg. 1134, effective January 26, 1981; preemptory amendment at 5 Ill. Reg. 5722, effective June 1, 1981; amended at 5 Ill. Reg. 7071, effective June 23, 1981; amended at 5 Ill. Reg. 7104, effective June 23, 1981; amended at 5 Ill. Reg. 8041, effective July 27, 1981; amended at 5 Ill. Reg. 8052, effective July 24, 1981; preemptory amendment at 5 Ill. Reg. 8106, effective August 1, 1981; preemptory amendment at 5 Ill. Reg. 10062, effective October 1, 1981; preemptory amendment at 5 Ill. Reg. 10079, effective October 1, 1981; preemptory amendment at 5 Ill. Reg. 10095, effective October 1, 1981; preemptory amendment at 5 Ill. Reg. 10113, effective October 1, 1981; preemptory amendment at 5 Ill. Reg. 10124, effective October 1, 1981; preemptory amendment at 5 Ill. Reg. 10131, effective October 1, 1981; amended at 5 Ill. Reg. 10730, effective October 1, 1981; amended at 5 Ill. Reg. 10733, effective October 1, 1981; amended at 5 Ill. Reg. 10760, effective October 1, 1981; amended at 5 Ill. Reg. 10767, effective October 1, 1981; preemptory amendment at 5 Ill. Reg. 11647, effective October 16, 1981; preemptory amendment at 6 Ill. Reg. 611, effective January 1, 1982; amended at 6 Ill. Reg. 1216, effective January 14, 1982; emergency amendment at 6 Ill. Reg. 2447, effective March 1, 1982, for a maximum of 150 days; preemptory amendment at 6 Ill. Reg. 2452, effective February 11, 1982; preemptory amendment at 6 Ill. Reg. 6475, effective May 18, 1982; preemptory amendment at 6 Ill. Reg. 6912, effective May 20, 1982; emergency amendment at 6 Ill. Reg. 7299, effective June 2, 1982, for a maximum of 150 days; amended at 6 Ill. Reg. 8115, effective July 1, 1982; amended at 6 Ill. Reg. 8142, effective July 1, 1982; amended at 6 Ill. Reg. 8159, effective July 1, 1982; amended at 6 Ill. Reg. 10970, effective August 26, 1982; amended at 6 Ill. Reg. 11921, effective September 21, 1982; amended at 6 Ill. Reg. 12293, effective October 1, 1982; amended at 6 Ill. Reg. 12318, effective October 1, 1982; amended at 6 Ill. Reg. 13754, effective November 1, 1982; rules repealed, new rules adopted and codified at 7 Ill. Reg. 907, effective January 11, 1983; rules repealed and new rules adopted and codified at 7 Ill. Reg. 2720, effective February 28, 1983; amended (by adding Sections being codified with no substantive change) at 7 Ill. Reg. 5195; amended at 7 Ill. Reg. 11284, effective August 26, 1983; amended at 7 Ill. Reg. 13920, effective October 7, 1983; amended at 7 Ill. Reg. 15690, effective November 9, 1983; amended (by adding Sections being codified with no substantive change) at 7 Ill. Reg. 16105; amended at 7 Ill. Reg. 17344, effective December 21, 1983; amended at 8 Ill. Reg. 213, effective December 27, 1983; emergency

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amendment at 8 Ill. Reg. 569, effective January 1, 1984, for a maximum of 150 days; amended at 8 Ill. Reg. 4176, effective March 19, 1984; amended at 8 Ill. Reg. 5207, effective April 9, 1984; amended at 8 Ill. Reg. 7226, effective May 16, 1984; amended at 8 Ill. Reg. 11391, effective June 27, 1984; amended at 8 Ill. Reg. 12333, effective June 29, 1984; amended (by adding Sections being codified with no substantive change) at 8 Ill. Reg. 17894; peremptory amendment at 8 Ill. Reg. 18127, effective October 1, 1984; peremptory amendment at 8 Ill. Reg. 19889, effective October 1, 1984; amended at 8 Ill. Reg. 19983, effective October 3, 1984; emergency amendment at 8 Ill. Reg. 21666, effective October 19, 1984, for a maximum of 150 days; amended at 8 Ill. Reg. 21621, effective October 23, 1984; amended at 8 Ill. Reg. 25023, effective December 19, 1984; amended at 9 Ill. Reg. 282, effective January 1, 1985; amended at 9 Ill. Reg. 4062, effective March 15, 1985; amended at 9 Ill. Reg. 8155, effective May 17, 1985; emergency amendment at 9 Ill. Reg. 10094, effective June 19, 1985, for a maximum of 150 days; amended at 9 Ill. Reg. 11317, effective July 5, 1985; amended at 9 Ill. Reg. 12795, effective August 9, 1985; amended at 9 Ill. Reg. 15887, effective October 4, 1985; amended at 9 Ill. Reg. 16277, effective October 11, 1985; amended at 9 Ill. Reg. 17827, effective November 18, 1985; emergency amendment at 10 Ill. Reg. 354, effective January 1, 1986, for a maximum of 150 days; amended at 10 Ill. Reg. 1172, effective January 10, 1986; amended at 10 Ill. Reg. 3641, effective January 30, 1986; amended at 10 Ill. Reg. 4885, effective March 7, 1986; amended at 10 Ill. Reg. 8118, effective May 1, 1986; amended at 10 Ill. Reg. 10628, effective June 1, 1986; amended at 10 Ill. Reg. 11017, effective June 6, 1986; Sections 112.78 through 112.86 and 112.88 recodified to 89 Ill. Adm. Code 160 at 10 Ill. Reg. 11928; emergency amendment at 10 Ill. Reg. 12107, effective July 1, 1986, for a maximum of 150 days; amended at 10 Ill. Reg. 12650, effective July 14, 1986; amended at 10 Ill. Reg. 14681, effective August 29, 1986; amended at 10 Ill. Reg. 15101, effective September 5, 1986; amended at 10 Ill. Reg. 15621, effective September 19, 1986; amended at 10 Ill. Reg. 21860, effective December 12, 1986; amended at 11 Ill. Reg. 2280, effective January 16, 1987; amended at 11 Ill. Reg. 3140, effective January 30, 1987; amended at 11 Ill. Reg. 4682, effective March 6, 1987; amended at 11 Ill. Reg. 5223, effective March 11, 1987; amended at 11 Ill. Reg. 6228, effective March 20, 1987; amended at 11 Ill. Reg. 9927, effective May 15, 1987; amended at 11 Ill. Reg. 12003, effective November 1, 1987; emergency amendment at 11 Ill. Reg. 12432, effective July 10, 1987, for a maximum of 150 days; amended at 11 Ill. Reg. 12908, effective July 30, 1987; emergency amendment at 11 Ill. Reg. 12935, effective August 1, 1987, for a maximum of 150 days; amended at 11 Ill. Reg. 13625, effective August 1, 1987; amended at 11 Ill. Reg. 14755, effective August 26, 1987; amended at 11 Ill. Reg. 18679, effective November 1, 1987; emergency amendment at 11 Ill. Reg. 18781, effective November 1, 1987, for a maximum of 150 days; amended at 11 Ill. Reg. 20114, effective December 4, 1987; Sections 112.90 and 112.95 recodified to Sections 112.52 and 112.54 at 11 Ill. Reg. 20610; amended at 11 Ill. Reg. 20889, effective December 14, 1987; amended at 12 Ill. Reg. 844, effective January 1, 1988; emergency amendment at 12 Ill. Reg. 1929, effective January 1, 1988, for a maximum of 150 days; amended

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at 12 Ill. Reg. 2126, effective January 12, 1988; SUBPARTS C, D and E recodified to SUBPARTS G, H and I at 12 Ill. Reg. 2136; amended at 12 Ill. Reg. 3487, effective January 22, 1988; amended at 12 Ill. Reg. 6159, effective March 18, 1988; amended at 12 Ill. Reg. 6694, effective March 22, 1988; amended at 12 Ill. Reg. 7336, effective May 1, 1988; amended at 12 Ill. Reg. 7673, effective April 20, 1988; amended at 12 Ill. Reg. 9032, effective May 20, 1988; amended at 12 Ill. Reg. 10481, effective June 13, 1988; amended at 12 Ill. Reg. 14172, effective August 30, 1988; amended at 12 Ill. Reg. 14669, effective September 16, 1988; amended at 13 Ill. Reg. 70, effective January 1, 1989; amended at 13 Ill. Reg. 6017, effective April 14, 1989; amended at 13 Ill. Reg. 8567, effective May 22, 1989; amended at 13 Ill. Reg. 16006, effective October 6, 1989; emergency amendment at 13 Ill. Reg. 16142, effective October 2, 1989, for a maximum of 150 days; emergency expired March 1, 1990; amended at 14 Ill. Reg. 705, effective January 1, 1990; amended at 14 Ill. Reg. 3170, effective February 13, 1990; amended at 14 Ill. Reg. 3575, effective February 23, 1990; amended at 14 Ill. Reg. 6306, effective April 16, 1990; amended at 14 Ill. Reg. 10379, effective June 20, 1990; amended at 14 Ill. Reg. 13652, effective August 10, 1990; amended at 14 Ill. Reg. 14140, effective August 17, 1990; amended at 14 Ill. Reg. 16937, effective September 30, 1990; emergency amendment at 15 Ill. Reg. 338, effective January 1, 1991, for a maximum of 150 days; emergency amendment at 15 Ill. Reg. 2862, effective February 4, 1991, for a maximum of 150 days; emergency expired July 4, 1991; amended at 15 Ill. Reg. 5275, effective April 1, 1991; amended at 15 Ill. Reg. 5684, effective April 10, 1991; amended at 15 Ill. Reg. 11127, effective July 19, 1991; amended at 15 Ill. Reg. 11447, effective July 25, 1991; amended at 15 Ill. Reg. 14227, effective September 30, 1991; amended at 15 Ill. Reg. 17308, effective November 18, 1991; amended at 16 Ill. Reg. 9972, effective June 15, 1992; amended at 16 Ill. Reg. 11550, effective July 15, 1992; emergency amendment at 16 Ill. Reg. 11652, effective July 1, 1992, for a maximum of 150 days; emergency amendment at 16 Ill. Reg. 13629, effective September 1, 1992, for a maximum of 150 days; amended at 16 Ill. Reg. 17724, effective November 9, 1992; amended at 16 Ill. Reg. 20147, effective December 14, 1992; amended at 17 Ill. Reg. 357, effective December 24, 1992; amended at 17 Ill. Reg. 813, effective January 15, 1993; amended at 17 Ill. Reg. 2253, effective February 15, 1993; amended at 17 Ill. Reg. 4312, effective March 25, 1993; emergency amendment at 17 Ill. Reg. 6325, effective April 9, 1993, for a maximum of 150 days; amended at 17 Ill. Reg. 6792, effective April 21, 1993; amended at 17 Ill. Reg. 15017, effective September 3, 1993; amended at 17 Ill. Reg. 19156, effective October 25, 1993; emergency amendment at 17 Ill. Reg. 19696, effective November 1, 1993, for a maximum of 150 days; amended at 18 Ill. Reg. 5909, effective March 31, 1994; amended at 18 Ill. Reg. 6994, effective April 27, 1994; amended at 18 Ill. Reg. 8703, effective June 1, 1994; amended at 18 Ill. Reg. 10774, effective June 27, 1994; amended at 18 Ill. Reg. 12805, effective August 5, 1994; amended at 18 Ill. Reg. 15774, effective October 17, 1994; expedited correction at 19 Ill. Reg. 998, effective October 17, 1994; amended at 19 Ill. Reg. 2845, effective February 24, 1995; amended at 19 Ill. Reg. 5609, effective March 31, 1995; amended at 19 Ill. Reg. 7883, effective June 5, 1995; emergency

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amendment at 19 Ill. Reg. 10206, effective July 1, 1995, for a maximum of 150 days; emergency amendment at 19 Ill. Reg. 12011, effective August 7, 1995, for a maximum of 150 days; amended at 19 Ill. Reg. 12664, effective September 1, 1995; emergency amendment at 19 Ill. Reg. 15244, effective November 1, 1995, for a maximum of 150 days; amended at 19 Ill. Reg. 15661, effective November 3, 1995; emergency amendment at 19 Ill. Reg. 15839, effective November 15, 1995, for a maximum of 150 days; emergency amendment at 19 Ill. Reg. 16295, effective December 1, 1995, for a maximum of 150 days; amended at 20 Ill. Reg. 845, effective January 1, 1996; amended at 20 Ill. Reg. 3538, effective February 15, 1996; amended at 20 Ill. Reg. 5648, effective March 30, 1996; amended at 20 Ill. Reg. 6018, effective April 12, 1996; amended at 20 Ill. Reg. 6498, effective April 29, 1996; amended at 20 Ill. Reg. 7892, effective June 1, 1996; emergency amendment at 20 Ill. Reg. 12499, effective September 1, 1996, for a maximum of 150 days; amended at 20 Ill. Reg. 14820, effective November 1, 1996; amendment at 20 Ill. Reg. 15983, effective December 9, 1996; emergency amendment at 21 Ill. Reg. 662, effective January 1, 1997, for a maximum of 150 days; amended at 21 Ill. Reg. 940, effective January 7, 1997; amended at 21 Ill. Reg. 1366, effective January 15, 1997; amended at 21 Ill. Reg. 2655, effective February 7, 1997; amended at 21 Ill. Reg. 7391, effective May 31, 1997; emergency amendment at 21 Ill. Reg. 8426, effective July 1, 1997, for a maximum of 150 days; recodified from the Department of Public Aid to the Department of Human Services at 21 Ill. Reg. 9322; amended at 21 Ill. Reg. 15597, effective November 26, 1997; emergency amendment at 22 Ill. Reg. 4466, effective February 24, 1998, for a maximum of 150 days; emergency amendment at 22 Ill. Reg. 12197, effective July 1, 1998, for a maximum of 150 days; amended at 22 Ill. Reg. 14420, effective July 24, 1998; amended at 22 Ill. Reg. 14744, effective August 1, 1998; amended at 22 Ill. Reg. 16256, effective September 1, 1998; emergency amendment at 22 Ill. Reg. 16365, effective September 1, 1998, for a maximum of 150 days; emergency amendment at 22 Ill. Reg. 18082, effective October 1, 1998, for a maximum of 150 days; amended at 22 Ill. Reg. 19840, effective November 1, 1998; emergency amendment at 23 Ill. Reg. 598, effective January 1, 1999, for a maximum of 150 days; amended at 23 Ill. Reg. 942, effective January 6, 1999; emergency amendment at 23 Ill. Reg. 1133, effective January 7, 1999, for a maximum of 150 days; amended at 23 Ill. Reg. 1682, effective January 20, 1999; emergency amendment at 23 Ill. Reg. 5881, effective May 1, 1999, for a maximum of 150 days; amended at 23 Ill. Reg. 6958, effective May 30, 1999; amended at 23 Ill. Reg. 7091, effective June 4, 1999; amended at 23 Ill. Reg. 7896, effective July 1, 1999; emergency amendment at 23 Ill. Reg. 8672, effective July 13, 1999, for a maximum of 150 days; emergency amendment at 23 Ill. Reg. 10530, effective August 1, 1999, for a maximum of 150 days; amended at 23 Ill. Reg. 12648, effective September 27, 1999; amended at 23 Ill. Reg. 13898, effective November 19, 1999; amended at 24 Ill. Reg. 289, effective December 28, 1999; amended at 24 Ill. Reg. 2348, effective February 1, 2000; amended at 25 Ill. Reg. 10336, effective August 3, 2001; emergency amendment at 25 Ill. Reg. 11584, effective September 1, 2001, for a maximum of 150 days; amended at 25 Ill. Reg. 14865, effective November 1, 2001; amended at 26 Ill. Reg. 138,

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effective January 1, 2002; amended at 26 Ill. Reg. 924, effective January 15, 2002; emergency amendment at 26 Ill. Reg. 3329, effective February 19, 2002, for a maximum of 150 days; amended at 26 Ill. Reg. 9803, effective June 24, 2002; amended at 26 Ill. Reg. 10492, effective July 1, 2002; emergency amendment at 26 Ill. Reg. 10994, effective July 1, 2002, for a maximum of 150 days; amended at 26 Ill. Reg. 17182, effective November 15, 2002; amended at 27 Ill. Reg. 4545, effective February 28, 2003; amended at 27 Ill. Reg. 7240, effective April 7, 2003; amended at 27 Ill. Reg. 18417, effective November 20, 2003; amended at 28 Ill. Reg. 1090, effective December 31, 2003; amended at 28 Ill. Reg. 5655, effective March 22, 2004; amended at 29 Ill. Reg. 5473, effective April 1, 2005; amended at 29 Ill. Reg. 8161, effective May 18, 2005; emergency amendment at 29 Ill. Reg. 16008, effective October 4, 2005, for a maximum of 150 days; emergency expired March 2, 2006; amended at 30 Ill. Reg. 9331, effective May 8, 2006; amended at 30 Ill. Reg. 11202, effective June 12, 2006; amended at 31 Ill. Reg. 6968, effective April 30, 2007; amended at 31 Ill. Reg. 10462, effective July 6, 2007; amended at 31 Ill. Reg. 15080, effective October 24, 2007; amended at 32 Ill. Reg. 2767, effective February 7, 2008; emergency amendment at 32 Ill. Reg. 10607, effective July 1, 2008, for a maximum of 150 days; emergency expired November 27, 2008; amended at 32 Ill. Reg. 17167, effective October 20, 2008; preemptory amendment at 32 Ill. Reg. 18051, effective November 15, 2008; emergency amendment at 33 Ill. Reg. 4977, effective March 19, 2009, for a maximum of 150 days; emergency amendment at 33 Ill. Reg. 7320, effective May 21, 2009, for a maximum of 150 days; amended at 33 Ill. Reg. 12763, effective September 8, 2009; amended at 33 Ill. Reg. 13831, effective September 17, 2009.

SUBPART H: PAYMENT AMOUNTS

Section 112.252 Payment Levels in Group I Counties

a) The following Payment Levels are established for Group I Counties.

b) The counties included in Group I are:

Boone	Kane	Ogle
Champaign	Kankakee	Whiteside
Cook	Kendall	Winnebago
DeKalb	Lake	Woodford
Dupage	McHenry	

	CARETAKER RELATIVE	
SIZE OF	OR RELATIVES AND	CHILD OR
ASSISTANCE UNIT	CHILD OR CHILDREN	CHILDREN ONLY

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1	<u>243223</u>	<u>117407</u>
2	<u>318292</u>	<u>230211</u>
3	<u>432396</u>	<u>284261</u>
4	<u>474435</u>	<u>365335</u>
5	<u>555509</u>	<u>434398</u>
6	<u>623572</u>	<u>465427</u>
7	<u>657603</u>	<u>501460</u>
8	<u>691634</u>	<u>536492</u>
9	<u>727667</u>	<u>576528</u>
10	<u>765702</u>	<u>616565</u>
11	<u>807740</u>	<u>659605</u>
12	<u>848778</u>	<u>703645</u>
13	<u>894820</u>	<u>751689</u>
14	<u>941863</u>	<u>800734</u>
15	<u>991909</u>	<u>851781</u>
16	<u>1,043957</u>	<u>908833</u>
17	<u>1,0981,007</u>	<u>965885</u>
18	<u>1,1561,061</u>	

(Source: Amended at 33 Ill. Reg. 13831, effective September 17, 2009)

Section 112.253 Payment Levels in Group II Counties

- a) The following Payment Levels are established for Group II Counties.
- b) The counties included in Group II are:

Adams	Lee	Stephenson
Bureau	Livingston	Tazewell
Carroll	Logan	Vermilion
Clinton	Macon	Wabash
Coles	Macoupin	Warren
DeWitt	Madison	Will
Douglas	McDonough	
Effingham	McLean	
Ford	Mercer	
Fulton	Monroe	
Grundy	Morgan	
Henry	Moultrie	

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Iroquois	Peoria
Jackson	Piatt
Jo Daviess	Putnam
Knox	Rock Island
LaSalle	Sangamon
	St. Clair

SIZE OF ASSISTANCE UNIT	CARETAKER RELATIVE OR RELATIVES AND CHILD OR CHILDREN	CHILD OR CHILDREN ONLY
1	<u>233214</u>	<u>111402</u>
2	<u>307282</u>	<u>222204</u>
3	<u>417383</u>	<u>277254</u>
4	<u>461423</u>	<u>356327</u>
5	<u>540495</u>	<u>422387</u>
6	<u>605555</u>	<u>455417</u>
7	<u>638585</u>	<u>488448</u>
8	<u>673617</u>	<u>525482</u>
9	<u>709650</u>	<u>562516</u>
10	<u>746684</u>	<u>601551</u>
11	<u>784719</u>	<u>642589</u>
12	<u>825757</u>	<u>686629</u>
13	<u>870798</u>	<u>725665</u>
14	<u>915839</u>	<u>774710</u>
15	<u>962883</u>	<u>824756</u>
16	<u>1,014930</u>	<u>877805</u>
17	<u>1,069981</u>	<u>933856</u>
18	<u>1,1241,031</u>	

(Source: Amended at 33 Ill. Reg. 13831, effective September 17, 2009)

Section 112.254 Payment Levels in Group III Counties

- The following Payment Levels are established for Group III Counties.
- The counties included in Group III are:

Alexander Edgar Jasper Montgomery Shelby

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Bond	Edwards	Jefferson	Perry	Stark
Brown	Fayette	Jersey	Pike	Union
Calhoun	Franklin	Johnson	Pope	Washington
Cass	Gallatin	Lawrence	Pulaski	Wayne
Christian	Greene	Marion	Randolph	White
Clark	Hamilton	Marshall	Richland	Williamson
Clay	Hancock	Mason	Saline	
Crawford	Hardin	Massac	Schuyler	
Cumberland	Henderson	Menard	Scott	

SIZE OF ASSISTANCE UNIT	CARETAKER RELATIVE OR RELATIVES AND CHILD OR CHILDREN	CHILD OR CHILDREN ONLY
1	<u>198182</u>	<u>10899</u>
2	<u>294270</u>	<u>215197</u>
3	<u>399366</u>	<u>271249</u>
4	<u>445408</u>	<u>346317</u>
5	<u>519476</u>	<u>411377</u>
6	<u>585537</u>	<u>443406</u>
7	<u>616565</u>	<u>474435</u>
8	<u>647594</u>	<u>509467</u>
9	<u>683627</u>	<u>546501</u>
10	<u>718659</u>	<u>584536</u>
11	<u>758695</u>	<u>623572</u>
12	<u>797731</u>	<u>665610</u>
13	<u>839770</u>	<u>692635</u>
14	<u>883810</u>	<u>739678</u>
15	<u>930853</u>	<u>788723</u>
16	<u>979898</u>	<u>840771</u>
17	<u>1,030945</u>	<u>895821</u>
18	<u>1,085995</u>	

(Source: Amended at 33 Ill. Reg. 13831, effective September 17, 2009)

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- 1) Heading of the Part: Aid to the Aged, Blind or Disabled
- 2) Code Citation: 89 Ill. Adm. Code 113
- 3) Section Number: 113.260 Adopted Action:
Amendment
- 4) Statutory Authority: Implementing Article III and authorized by Section 12-13 of the Illinois Public Aid Code [305 ILCS 5/Art. III and 12-13]
- 5) Effective Date of Amendment: September 17, 2009
- 6) Does this rulemaking contain an automatic repeal date? No
- 7) Does this rulemaking contain incorporations by reference? No
- 8) A copy of the adopted amendment, including any material incorporated by reference, is on file in the agency's principal office and is available for public inspection.
- 9) Notice of Proposal Published in the Illinois Register: April 3, 2009; 33 Ill. Reg. 4805
- 10) Has JCAR issued a Statement of Objection to this rulemaking? No
- 11) Differences between proposal and final version: No substantive changes were made to the text of the proposed rulemaking.
- 12) Have all changes agreed upon by the agency and JCAR been made as indicated in the agreements issued by JCAR? Yes
- 13) Will this rulemaking replace any emergency rulemaking currently in effect? No
- 14) Are there any amendments pending on this Part? Yes

<u>Section Numbers:</u>	<u>Proposed Action:</u>	<u>Illinois Register Citation:</u>
113.253	Amendment	April 17, 2009; 33 Ill. Reg. 5699
113.260	Amendment	April 17, 2009; 33 Ill. Reg. 5699
113.113	Amendment	June 5, 2009; 33 Ill. Reg. 7277
113.141	Amendment	June 5, 2009; 33 Ill. Reg. 7277

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- 15) Summary and Purpose of Rulemaking: Pursuant to provisions of P.A. 95-780 that was signed into law on August 5, 2008, this rule change increases the sheltered care rates paid to residents of sheltered care homes by 10%.
- 16) Information and questions regarding this adopted amendment shall be directed to:
- Tracie Drew, Chief
Bureau of Administrative Rules and Procedures
Department of Human Services
100 South Grand Avenue East
Harris Building, 3rd Floor
Springfield, Illinois 62762
- 217/785-9772
- 17) Does this amendment require the preview of the Procurement Policy Board as specified in Section 5-25 of the Illinois Procurement Code? No

The full text of the Adopted Amendment begins on the next page:

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NOTICE OF ADOPTED AMENDMENT

TITLE 89: SOCIAL SERVICES
CHAPTER IV: DEPARTMENT OF HUMAN SERVICES
SUBCHAPTER b: ASSISTANCE PROGRAMSPART 113
AID TO THE AGED, BLIND OR DISABLED

SUBPART A: GENERAL PROVISIONS

Section

- 113.1 Description of the Assistance Program
- 113.5 Incorporation By Reference

SUBPART B: NON-FINANCIAL FACTORS OF ELIGIBILITY

Section

- 113.9 Client Cooperation
- 113.10 Citizenship
- 113.20 Residence
- 113.30 Age
- 113.40 Blind
- 113.50 Disabled
- 113.60 Living Arrangement
- 113.70 Institutional Status
- 113.80 Social Security Number

SUBPART C: FINANCIAL FACTORS OF ELIGIBILITY

Section

- 113.100 Unearned Income
- 113.101 Budgeting Unearned Income
- 113.102 Budgeting Unearned Income of Applicants Receiving Income on Date of Application And/Or Date of Decision
- 113.103 Initial Receipt of Unearned Income
- 113.104 Termination of Unearned Income
- 113.105 Unearned Income In-Kind
- 113.106 Earmarked Income
- 113.107 Lump Sum Payments and Income Tax Refunds
- 113.108 Protected Income (Repealed)

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- 113.109 Earned Income (Repealed)
- 113.110 Budgeting Earned Income (Repealed)
- 113.111 Protected Income
- 113.112 Earned Income
- 113.113 Exempt Unearned Income
- 113.114 Budgeting Earned Income of Applicants Receiving Income On Date of Application And/Or Date of Decision
- 113.115 Initial Employment
- 113.116 Budgeting Earned Income For Contractual Employees
- 113.117 Budgeting Earned Income For Non-contractual School Employees
- 113.118 Termination of Employment
- 113.120 Exempt Earned Income
- 113.125 Recognized Employment Expenses
- 113.130 Income From Work/Study/Training Programs
- 113.131 Earned Income From Self-Employment
- 113.132 Earned Income From Roomer and Boarder
- 113.133 Earned Income From Rental Property
- 113.134 Earned Income In-Kind
- 113.139 Payments from the Illinois Department of Children and Family Services
- 113.140 Assets
- 113.141 Exempt Assets
- 113.142 Asset Disregard
- 113.143 Deferral of Consideration of Assets
- 113.154 Property Transfers For Applications Filed Prior To October 1, 1989 (Repealed)
- 113.155 Property Transfers For Applications Filed On Or After October 1, 1989 (Repealed)
- 113.156 Court Ordered Child Support Payments of Parent/Step-Parent
- 113.157 Responsibility of Sponsors of Non-citizens Entering the Country Prior to 8/22/96
- 113.158 Responsibility of Sponsors of Non-citizens Entering the Country On or After 08/22/96
- 113.160 Assignment of Medical Support Rights

SUBPART D: PAYMENT AMOUNTS

- Section
- 113.245 Payment Levels for AABD
- 113.246 Personal Allowance
- 113.247 Personal Allowance Amounts
- 113.248 Shelter

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113.249	Utilities and Heating Fuel
113.250	Laundry
113.251	Telephone
113.252	Transportation, Lunches, Special Fees
113.253	Allowances for Increase in SSI Benefits
113.254	Nursing Care or Personal Care in Home Not Subject to Licensing
113.255	Sheltered Care/Personal or Nursing Care in a Licensed Group Care Facility
113.256	Shopping Allowance
113.257	Special Allowances for Blind and Partially Sighted (Blind Only)
113.258	Home Delivered Meals
113.259	AABD Fuel and Utility Allowances By Area
113.260	Sheltered Care, Personal Care or Nursing Care Rates
113.261	Cases in Licensed Intermediate Care Facilities, Licensed Skilled Nursing Facilities, DMHDD Facilities and All Other Licensed Medical Facilities
113.262	Meeting the Needs of an Ineligible Dependent with Client's Income
113.263	Service Animals
113.264	Refugees Ineligible for SSI

SUBPART E: OTHER PROVISIONS

Section	
113.300	Persons Who May Be Included In the Assistance Unit
113.301	Grandfathered Cases
113.302	Interim Assistance (Repealed)
113.303	Special Needs Authorizations
113.304	Retrospective Budgeting
113.305	Budgeting Schedule
113.306	Purchase and Repair of Household Furniture (Repealed)
113.307	Property Repairs and Maintenance
113.308	Excess Shelter Allowance
113.309	Limitation on Amount of AABD Assistance to Recipients from Other States (Repealed)
113.320	Redetermination of Eligibility
113.330	Attorney's Fees for VA Appellants (Repealed)

SUBPART F: INTERIM ASSISTANCE

Section	
113.400	Description of the Interim Assistance Program

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- 113.405 Pending SSI Application (Repealed)
- 113.410 More Likely Than Not Eligible for SSI (Repealed)
- 113.415 Non-Financial Factors of Eligibility (Repealed)
- 113.420 Financial Factors of Eligibility (Repealed)
- 113.425 Payment Levels for Chicago Interim Assistance Cases (Repealed)
- 113.430 Payment Levels for all Interim Assistance Cases Outside Chicago (Repealed)
- 113.435 Medical Eligibility (Repealed)
- 113.440 Attorney's Fees for SSI Applicants (Repealed)
- 113.445 Advocacy Program for Persons Receiving Interim Assistance (Repealed)
- 113.450 Limitation on Amount of Interim Assistance to Recipients from Other States (Repealed)
- 113.500 Attorney's Fees for SSI Appellants (Renumbered)

AUTHORITY: Implementing Article III and authorized by Section 12-13 of the Illinois Public Aid Code [305 ILCS 5/Art. III and 12-13].

SOURCE: Filed effective December 30, 1977; peremptory amendment at 2 Ill. Reg. 17, p. 117, effective February 1, 1978; amended at 2 Ill. Reg. 31, p. 134, effective August 5, 1978; emergency amendment at 2 Ill. Reg. 37, p. 4, effective August 30, 1978, for a maximum of 150 days; emergency expired January 28, 1979; peremptory amendment at 2 Ill. Reg. 46, p. 44, effective November 1, 1978; emergency amendment at 3 Ill. Reg. 16, p. 41, effective April 9, 1979, for a maximum of 150 days; emergency amendment at 3 Ill. Reg. 28, p. 182, effective July 1, 1979, for a maximum of 150 days; amended at 3 Ill. Reg. 33, p. 399, effective August 18, 1979; amendment at 3 Ill. Reg. 33, p. 415, effective August 18, 1979; amended at 3 Ill. Reg. 38, p. 243, effective September 21, 1979; peremptory amendment at 3 Ill. Reg. 38, p. 321, effective September 7, 1979; amended at 3 Ill. Reg. 40, p. 140, effective October 6, 1979; amended at 3 Ill. Reg. 46, p. 36, effective November 2, 1979; amended at 3 Ill. Reg. 47, p. 96, effective November 13, 1979; amended at 3 Ill. Reg. 48, p. 1, effective November 15, 1979; peremptory amendment at 4 Ill. Reg. 9, p. 259, effective February 22, 1980; amended at 4 Ill. Reg. 10, p. 258, effective February 25, 1980; at 4 Ill. Reg. 12, p. 551, effective March 10, 1980; amended at 4 Ill. Reg. 27, p. 387, effective June 24, 1980; emergency amendment at 4 Ill. Reg. 29, p. 294, effective July 8, 1980, for a maximum of 150 days; amended at 4 Ill. Reg. 37, p. 797, effective September 2, 1980; amended at 4 Ill. Reg. 37, p. 800, effective September 2, 1980; amended at 4 Ill. Reg. 45, p. 134, effective October 27, 1980; amended at 5 Ill. Reg. 766, effective January 2, 1981; amended at 5 Ill. Reg. 1134, effective January 26, 1981; peremptory amendment at 5 Ill. Reg. 5722, effective June 1, 1981; amended at 5 Ill. Reg. 7071, effective June 23, 1981; amended at 5 Ill. Reg. 7104, effective June 23, 1981; amended at 5 Ill. Reg. 8041, effective July 27, 1981; amended at 5 Ill. Reg. 8052, effective July 24, 1981; peremptory amendment at 5 Ill. Reg. 8106, effective August 1, 1981; peremptory amendment at 5 Ill. Reg. 10062, effective

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October 1, 1981; preemptory amendment at 5 Ill. Reg. 10079, effective October 1, 1981; preemptory amendment at 5 Ill. Reg. 10095, effective October 1, 1981; preemptory amendment at 5 Ill. Reg. 10113, effective October 1, 1981; preemptory amendment at 5 Ill. Reg. 10124, effective October 1, 1981; preemptory amendment at 5 Ill. Reg. 10131, effective October 1, 1981; amended at 5 Ill. Reg. 10730, effective October 1, 1981; amended at 5 Ill. Reg. 10733, effective October 1, 1981; amended at 5 Ill. Reg. 10760, effective October 1, 1981; amended at 5 Ill. Reg. 10767, effective October 1, 1981; preemptory amendment at 5 Ill. Reg. 11647, effective October 16, 1981; preemptory amendment at 6 Ill. Reg. 611, effective January 1, 1982; amended at 6 Ill. Reg. 1216, effective January 14, 1982; emergency amendment at 6 Ill. Reg. 2447, effective March 1, 1982, for a maximum of 150 days; preemptory amendment at 6 Ill. Reg. 2452, effective February 11, 1982; preemptory amendment at 6 Ill. Reg. 6475, effective May 18, 1982; preemptory amendment at 6 Ill. Reg. 6912, effective May 20, 1982; emergency amendment at 6 Ill. Reg. 7299, effective June 2, 1982, for a maximum of 150 days; amended at 6 Ill. Reg. 8115, effective July 1, 1982; amended at 6 Ill. Reg. 8142, effective July 1, 1982; amended at 6 Ill. Reg. 8159, effective July 1, 1982; amended at 6 Ill. Reg. 10970, effective August 26, 1982; amended at 6 Ill. Reg. 11921, effective September 21, 1982; amended at 6 Ill. Reg. 12293, effective October 1, 1982; amended at 6 Ill. Reg. 12318, effective October 1, 1982; amended at 6 Ill. Reg. 13754, effective November 1, 1982; rules repealed, new rules adopted and codified at 7 Ill. Reg. 907, effective January 10, 1983; amended (by adding Sections being codified with no substantive change) at 7 Ill. Reg. 5195; amended at 7 Ill. Reg. 9367, effective August 1, 1983; amended at 7 Ill. Reg. 17351, effective December 21, 1983; amended at 8 Ill. Reg. 537, effective December 30, 1983; amended at 8 Ill. Reg. 5225, effective April 9, 1984; amended at 8 Ill. Reg. 6746, effective April 27, 1984; amended at 8 Ill. Reg. 11414, effective June 27, 1984; amended at 8 Ill. Reg. 13273, effective July 16, 1984; amended (by Sections being codified with no substantive change) at 8 Ill. Reg. 17895; amended at 8 Ill. Reg. 18896, effective September 26, 1984; amended at 9 Ill. Reg. 5335, effective April 5, 1985; amended at 9 Ill. Reg. 8166, effective May 17, 1985; amended at 9 Ill. Reg. 8657, effective May 25, 1985; amended at 9 Ill. Reg. 11302, effective July 5, 1985; amended at 9 Ill. Reg. 11636, effective July 8, 1985; amended at 9 Ill. Reg. 11991, effective July 12, 1985; amended at 9 Ill. Reg. 12806, effective August 9, 1985; amended at 9 Ill. Reg. 15896, effective October 4, 1985; amended at 9 Ill. Reg. 16291, effective October 10, 1985; emergency amendment at 10 Ill. Reg. 364, effective January 1, 1986; amended at 10 Ill. Reg. 1183, effective January 10, 1986; amended at 10 Ill. Reg. 6956, effective April 16, 1986; amended at 10 Ill. Reg. 8794, effective May 12, 1986; amended at 10 Ill. Reg. 10628, effective June 3, 1986; amended at 10 Ill. Reg. 11920, effective July 3, 1986; amended at 10 Ill. Reg. 15110, effective September 5, 1986; amended at 10 Ill. Reg. 15631, effective September 19, 1986; amended at 11 Ill. Reg. 3150, effective February 6, 1987; amended at 11 Ill. Reg. 8712, effective April 20, 1987; amended at 11 Ill. Reg. 9919, effective May 15, 1987; emergency amendment at 11 Ill. Reg. 12441, effective July 10, 1987, for a maximum of 150 days; amended at 11 Ill. Reg. 20880, effective December 14, 1987; amended at 12 Ill. Reg. 867,

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effective January 1, 1988; amended at 12 Ill. Reg. 2137, effective January 11, 1988; amended at 12 Ill. Reg. 3497, effective January 22, 1988; amended at 12 Ill. Reg. 5642, effective March 15, 1988; amended at 12 Ill. Reg. 6151, effective March 22, 1988; amended at 12 Ill. Reg. 7687, effective April 22, 1988; amended at 12 Ill. Reg. 8662, effective May 13, 1988; amended at 12 Ill. Reg. 9023, effective May 20, 1988; amended at 12 Ill. Reg. 9669, effective May 24, 1988; emergency amendment at 12 Ill. Reg. 11828, effective July 1, 1988, for a maximum of 150 days; amended at 12 Ill. Reg. 14162, effective August 30, 1988; amended at 12 Ill. Reg. 17849, effective October 25, 1988; amended at 13 Ill. Reg. 63, effective January 1, 1989; emergency amendment at 13 Ill. Reg. 3402, effective March 3, 1989, for a maximum of 150 days; amended at 13 Ill. Reg. 6007, effective April 14, 1989; amended at 13 Ill. Reg. 12553, effective July 12, 1989; amended at 13 Ill. Reg. 13609, effective August 11, 1989; emergency amendment at 13 Ill. Reg. 14467, effective September 1, 1989, for a maximum of 150 days; emergency amendment at 13 Ill. Reg. 16154, effective October 2, 1989, for a maximum of 150 days; emergency expired March 1, 1990; amended at 14 Ill. Reg. 720, effective January 1, 1990; amended at 14 Ill. Reg. 6321, effective April 16, 1990; amended at 14 Ill. Reg. 13187, effective August 6, 1990; amended at 14 Ill. Reg. 14806, effective September 3, 1990; amended at 14 Ill. Reg. 16957, effective September 30, 1990; amended at 15 Ill. Reg. 277, effective January 1, 1991; emergency amendment at 15 Ill. Reg. 1111, effective January 10, 1991, for a maximum of 150 days; amended at 15 Ill. Reg. 5291, effective April 1, 1991; amended at 15 Ill. Reg. 5698, effective April 10, 1991; amended at 15 Ill. Reg. 7104, effective April 30, 1991; amended at 15 Ill. Reg. 11142, effective July 22, 1991; amended at 15 Ill. Reg. 11948, effective August 12, 1991; amended at 15 Ill. Reg. 14073, effective September 11, 1991; emergency amendment at 15 Ill. Reg. 15119, effective October 7, 1991, for a maximum of 150 days; amended at 15 Ill. Reg. 16709, effective November 1, 1991; amended at 16 Ill. Reg. 3468, effective February 20, 1992; amended at 16 Ill. Reg. 9986, effective June 15, 1992; amended at 16 Ill. Reg. 11565, effective July 15, 1992; emergency amendment at 16 Ill. Reg. 13641, effective September 1, 1992, for a maximum of 150 days; emergency amendment at 16 Ill. Reg. 14722, effective September 15, 1992, for a maximum of 150 days; emergency amendment at 16 Ill. Reg. 17154, effective November 1, 1992, for a maximum of 150 days; emergency amendment at 16 Ill. Reg. 17764, effective November 13, 1992, for a maximum of 150 days; amended at 17 Ill. Reg. 827, effective January 15, 1993; amended at 17 Ill. Reg. 2263, effective February 15, 1993; amended at 17 Ill. Reg. 3202, effective February 26, 1993; amended at 17 Ill. Reg. 4322, effective March 22, 1993; amended at 17 Ill. Reg. 6804, effective April 21, 1993; amended at 17 Ill. Reg. 14612, effective August 26, 1993; amended at 18 Ill. Reg. 2018, effective January 21, 1994; amended at 18 Ill. Reg. 7759, effective May 5, 1994; amended at 18 Ill. Reg. 12818, effective August 5, 1994; amended at 19 Ill. Reg. 1052, effective January 26, 1995; amended at 19 Ill. Reg. 2875, effective February 24, 1995; amended at 19 Ill. Reg. 6639, effective May 5, 1995; emergency amendment at 19 Ill. Reg. 8409, effective June 9, 1995, for a maximum of 150 days; amended at 19 Ill. Reg. 15034, effective October 17, 1995; amended at 20 Ill. Reg. 858, effective December 29, 1995;

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emergency amendment at 21 Ill. Reg. 673, effective January 1, 1997, for a maximum of a 150 days; amended at 21 Ill. Reg. 7404, effective May 31, 1997; recodified from the Department of Public Aid to the Department of Human Services at 21 Ill. Reg. 9322; amended at 22 Ill. Reg. 13642, effective July 15, 1998; emergency amendment at 22 Ill. Reg. 16348, effective September 1, 1998, for a maximum of 150 days; amended at 22 Ill. Reg. 18931, effective October 1, 1998; emergency amendment at 22 Ill. Reg. 21750, effective November 24, 1998, for a maximum of 150 days; emergency amendment at 23 Ill. Reg. 579, effective January 1, 1999, for a maximum of 150 days; amended at 23 Ill. Reg. 1607, effective January 20, 1999; amended at 23 Ill. Reg. 5548, effective April 23, 1999; amended at 23 Ill. Reg. 6052, effective May 4, 1999; amended at 23 Ill. Reg. 6425, effective May 15, 1999; amended at 23 Ill. Reg. 6935, effective May 30, 1999; amended at 23 Ill. Reg. 7887, effective June 30, 1999; emergency amendment at 23 Ill. Reg. 8650, effective July 13, 1999, for a maximum of 150 days; amended at 23 Ill. Reg. 10161, effective August 3, 1999; amended at 23 Ill. Reg. 13852, effective November 19, 1999; amended at 24 Ill. Reg. 2328, effective February 1, 2000; amended at 24 Ill. Reg. 11622, effective July 18, 2000; amended at 24 Ill. Reg. 13394, effective August 18, 2000; amended at 25 Ill. Reg. 5326, effective March 30, 2001; amended at 26 Ill. Reg. 179, effective January 1, 2002; amended at 26 Ill. Reg. 8532, effective May 31, 2002; amended at 26 Ill. Reg. 13521, effective September 3, 2002; amended at 27 Ill. Reg. 7252, effective April 7, 2003; amended at 28 Ill. Reg. 11139, effective July 21, 2004; emergency amendment at 28 Ill. Reg. 11366, effective July 21, 2004, for a maximum of 150 days; emergency amendment at 28 Ill. Reg. 12469, effective August 20, 2004, for a maximum of 150 days; emergency expired January 16, 2005; amended at 29 Ill. Reg. 648, effective December 16, 2004; amended at 29 Ill. Reg. 5703, effective April 11, 2005; amended at 29 Ill. Reg. 10176, effective July 5, 2005; amended at 30 Ill. Reg. 16065, effective September 21, 2006; amended at 31 Ill. Reg. 6981, effective April 30, 2007; amended at 31 Ill. Reg. 11306, effective July 19, 2007; amended at 32 Ill. Reg. 17187, effective October 16, 2008; peremptory amendment at 32 Ill. Reg. 18065, effective November 15, 2008; emergency amendment at 33 Ill. Reg. 4993, effective March 19, 2009, for a maximum of 150 days; emergency amendment at 33 Ill. Reg. 7337, effective May 21, 2009, for a maximum of 150 days; amended at 33 Ill. Reg. 12775, effective September 8, 2009; emergency amendment at 33 Ill. Reg. 12850, effective September 4, 2009, for a maximum of 150 days; amended at 33 Ill. Reg. 13846, effective September 17, 2009.

SUBPART D: PAYMENT AMOUNTS

Section 113.260 Sheltered Care, Personal Care or Nursing Care Rates

Group A	Needs	Group B
Counties	Assessment	Counties

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	<u>11371034</u>	0-7	<u>11521047</u>
	<u>11431039</u>	8	<u>11591054</u>
	<u>11501045</u>	9	<u>11661060</u>
	<u>11551050</u>	10	<u>11741067</u>
	<u>11621056</u>	11	<u>11811074</u>
	<u>11671061</u>	12	<u>11881080</u>
	<u>11741067</u>	13	<u>11961087</u>
	<u>11791072</u>	14	<u>12021093</u>
	<u>11861078</u>	15	<u>12101100</u>
	<u>11911083</u>	16	<u>12181107</u>
	<u>11981089</u>	17	<u>12241113</u>
	<u>12031094</u>	18	<u>12321120</u>
	<u>12101100</u>	19	<u>12391126</u>
	<u>12161105</u>	20	<u>12461133</u>
	<u>12221111</u>	21	<u>12541140</u>
	<u>12281116</u>	22	<u>12611146</u>
	<u>12341122</u>	23	<u>12681153</u>
	<u>12401127</u>	24	<u>12751159</u>

a) Group A Counties are counties other than Cook, DuPage, Kane, Lake and Will.

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- b) Group B Counties are Cook, DuPage, Kane, Lake and Will.
- c) Rate includes shelter factor and approved activity and social rehabilitation programs.

(Source: Amended at 33 Ill. Reg. 13846, effective September 17, 2009)

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- 1) Heading of the Part: General Assistance
- 2) Code Citation: 89 Ill. Adm. Code 114
- 3)

<u>Section Numbers:</u>	<u>Adopted Action:</u>
114.351	Amendment
114.352	Amendment
114.353	Amendment
- 4) Statutory Authority: Implementing Article VI and authorized by Section 12-13 of the Illinois Public Aid Code [305 ILCS 5/Art. VI and 12-13]
- 5) Effective Date of Amendments: September 17, 2009
- 6) Does this rulemaking contain an automatic repeal date? No
- 7) Does this rulemaking contain incorporations by reference? No
- 8) A copy of the adopted amendments, including any material incorporated by reference, is on file in the agency's principal office and is available for public inspection.
- 9) Notice of Proposal Published in the Illinois Register: April 3, 2009; 33 Ill. Reg. 4807
- 10) Has JCAR issued a Statement of Objection to this rulemaking? No
- 11) Differences between proposal and final version: No substantive changes were made to the text of the proposed rulemaking.
- 12) Have all changes agreed upon by the agency and JCAR been made as indicated in the agreements issued by JCAR? Yes
- 13) Will this rulemaking replace any emergency rulemaking currently in effect? No
- 14) Are there any amendments pending on this Part? Yes

<u>Section Numbers:</u>	<u>Proposed Action:</u>	<u>Illinois Register Citation:</u>
114.9	Amendment	April 10, 2009; 33 Ill. Reg. 5228
114.223	Amendment	April 10, 2009; 33 Ill. Reg. 5228
114.250	Amendment	April 10, 2009; 33 Ill. Reg. 5228

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114.251	Amendment	April 10, 2009; 33 Ill. Reg. 5228
114.252	Amendment	April 10, 2009; 33 Ill. Reg. 5228
114.408	Amendment	April 10, 2009; 33 Ill. Reg. 5228
114.210	Amendment	June 5, 2009; 33 Ill. Reg. 7280

- 15) Summary and Purpose of Rulemaking: Pursuant to provisions of P.A. 95-0744, the TANF grant amounts in effect on June 30, 2008 were increased by 9%. The budget implementation bill (S.B. 773) passed the General Assembly and was signed by the Governor effective July 18, 2008, mandating the 9% increase in TANF payment levels. This rulemaking increases the GA Family and Children Assistance payment levels by 9% so that the GA Family and Children Assistance payment levels can mirror the 9% increase in TANF grant amounts.
- 16) Information and questions regarding these adopted rulemakings shall be directed to:
- Tracie Drew, Chief
Bureau of Administrative Rules and Procedures
Department of Human Services
100 South Grand Avenue East
Harris Building, 3rd Floor
Springfield, Illinois 62762
- 217/785-9772
- 17) Do these amendments require the preview of the Procurement Policy Board as specified in Section 5-25 of the Illinois Procurement Code? No

The full text of the Adopted Amendments begins on the next page:

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NOTICE OF ADOPTED AMENDMENTS

TITLE 89: SOCIAL SERVICES
CHAPTER IV: DEPARTMENT OF HUMAN SERVICES
SUBCHAPTER b: ASSISTANCE PROGRAMSPART 114
GENERAL ASSISTANCE

SUBPART A: GENERAL PROVISIONS

Section

- 114.1 Description of the Assistance Program
- 114.2 Determination of Not Employable
- 114.3 Advocacy Program for Persons Receiving State Transitional Assistance
- 114.5 Incorporation By Reference

SUBPART B: NON-FINANCIAL FACTORS OF ELIGIBILITY

Section

- 114.9 Client Cooperation
- 114.10 Citizenship
- 114.20 Residence
- 114.30 Age
- 114.40 Relationship
- 114.50 Living Arrangement
- 114.52 Social Security Numbers
- 114.60 Work Registration Requirements (Outside City of Chicago only)
- 114.61 Individuals Exempt From Work Registration Requirements (Outside City of Chicago only)
- 114.62 Job Service Registration (Outside City of Chicago only)
- 114.63 Failure to Maintain Current Job Service Registration (Outside City of Chicago only)
- 114.64 Responsibility to Seek Employment (Outside City of Chicago only)
- 114.70 Initial Employment Expenses (Outside City of Chicago only)
- 114.80 Downstate General Assistance Work and Training Programs
- 114.85 Downstate General Assistance – Food Stamps Employment and Training Pilot Project
- 114.90 Work and Training Programs
- 114.100 General Assistance Jobs Program (Repealed)
- 114.101 Persons Ineligible for TANF Due to Time Limits

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NOTICE OF ADOPTED AMENDMENTS

SUBPART C: PROJECT ADVANCE

Section

- 114.108 Project Advance (Repealed)
- 114.109 Project Advance Participation Requirements of Adjudicated Fathers (Repealed)
- 114.110 Project Advance Cooperation Requirements of Adjudicated Fathers (Repealed)
- 114.111 Project Advance Sanctions (Repealed)
- 114.113 Project Advance Good Cause for Failure to Comply (Repealed)
- 114.115 Individuals Exempt From Project Advance (Repealed)
- 114.117 Project Advance Supportive Services (Repealed)

SUBPART D: EMPLOYMENT AND TRAINING REQUIREMENTS

Section

- 114.120 Employment and Training Requirements
- 114.121 Persons Required to Participate in Project Chance (Repealed)
- 114.122 Advocacy Program for Persons Who Have Applied for Supplemental Security Income (SSI) Under Title XVI of the Social Security Act (Repealed)
- 114.123 Persons in Need of Work Rehabilitative Services (WRS) to Become Employable (Repealed)
- 114.124 Employment and Training Participation/Cooperation Requirements (Repealed)
- 114.125 Employment and Training Program Orientation (Repealed)
- 114.126 Employment and Training Program Full Assessment Process/Development of an Employment Plan (Repealed)
- 114.127 Employment and Training Program Components (Repealed)
- 114.128 Employment and Training Sanctions (Repealed)
- 114.129 Good Cause For Failure to Cooperate With Work and Training Participation Requirements (Repealed)
- 114.130 Employment and Training Supportive Services (Repealed)
- 114.135 Conciliation and Fair Hearings (Repealed)
- 114.140 Employment Child Care (Repealed)

SUBPART E: FINANCIAL FACTORS OF ELIGIBILITY

Section

- 114.200 Unearned Income
- 114.201 Budgeting Unearned Income
- 114.202 Budgeting Unearned Income of Applicants

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114.203	Initial Receipt of Unearned Income
114.204	Termination of Unearned Income
114.210	Exempt Unearned Income
114.220	Education Benefits (Repealed)
114.221	Unearned Income In-Kind
114.222	Earmarked Income
114.223	Lump-Sum Payments
114.224	Protected Income
114.225	Earned Income
114.226	Budgeting Earned Income
114.227	Budgeting Earned Income of Applicants
114.228	Initial Employment
114.229	Termination of Employment
114.230	Exempt Earned Income
114.235	Recognized Employment Expenses
114.240	Income From Work/Study/Training Program (Repealed)
114.241	Earned Income From Self-Employment
114.242	Earned Income From Roomer and Boarder
114.243	Earned Income From Rental Property
114.244	Earned Income In-Kind
114.245	Payments from the Illinois Department of Children and Family Services
114.246	Budgeting Earned Income for Contractual Employees
114.247	Budgeting Earned Income for Non-contractual School Employees
114.250	Assets
114.251	Exempt Assets
114.252	Asset Disregards
114.260	Deferral of Consideration of Assets (Repealed)
114.270	Property Transfers (Repealed)
114.280	Supplemental Payments

SUBPART F: PAYMENT AMOUNTS

Section	
114.350	Payment Levels
114.351	Payment Levels in Group I Counties
114.352	Payment Levels in Group II Counties
114.353	Payment Levels in Group III Counties

SUBPART G: OTHER PROVISIONS

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Section

- 114.400 Persons Who May Be Included In the Assistance Unit
- 114.401 Eligibility of Strikers
- 114.402 Special Needs Authorizations (Repealed)
- 114.403 Institutional Status
- 114.404 Budgeting
- 114.405 Budgeting Schedule
- 114.406 Limitation on Amount of General Assistance to Recipients from Other States (Repealed)
- 114.408 Responsibility of Sponsors of Non-citizens Entering the Country On or After 8/22/96
- 114.420 Redetermination of Eligibility
- 114.430 Extension of Medical Assistance Due to Increased Income from Employment
- 114.440 Attorney's Fees for VA Appellants
- 114.442 Attorney's Fees for SSI Applicants

SUBPART H: CHILD CARE

Section

- 114.450 Child Care (Repealed)
- 114.452 Child Care Eligibility (Repealed)
- 114.454 Qualified Provider (Repealed)
- 114.456 Notification of Available Services (Repealed)
- 114.458 Participant Rights and Responsibilities (Repealed)
- 114.462 Additional Service to Secure or Maintain Child Care Arrangements (Repealed)
- 114.464 Rates of Payment for Child Care (Repealed)
- 114.466 Method of Providing Child Care (Repealed)

SUBPART I: TRANSITIONAL CHILD CARE

Section

- 114.500 Transitional Child Care Eligibility (Repealed)
- 114.504 Duration of Eligibility for Transitional Child Care (Repealed)
- 114.506 Loss of Eligibility for Transitional Child Care (Repealed)
- 114.508 Qualified Provider (Repealed)
- 114.510 Notification of Available Services (Repealed)
- 114.512 Participant Rights and Responsibilities (Repealed)
- 114.514 Child Care Overpayments and Recoveries (Repealed)

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- 114.516 Fees for Service for Transitional Child Care (Repealed)
114.518 Rates of Payment for Transitional Child Care (Repealed)

AUTHORITY: Implementing Article VI and authorized by Section 12-13 of the Illinois Public Aid Code [305 ILCS 5/Art. VI and 12-13].

SOURCE: Filed effective December 30, 1977; peremptory amendment at 2 Ill. Reg. 17, p. 117, effective February 1, 1978; amended at 2 Ill. Reg. 31, p. 134, effective August 5, 1978; emergency amendment at 2 Ill. Reg. 37, p. 4, effective August 30, 1978, for a maximum of 150 days; peremptory amendment at 2 Ill. Reg. 46, p. 44, effective November 1, 1978; peremptory amendment at 2 Ill. Reg. 46, p. 56, effective November 1, 1978; emergency amendment at 3 Ill. Reg. 16, p. 41, effective April 9, 1979, for a maximum of 150 days; emergency amendment at 3 Ill. Reg. 28, p. 182, effective July 1, 1979, for a maximum of 150 days; amended at 3 Ill. Reg. 33, p. 399, effective August 18, 1979; amendment at 3 Ill. Reg. 33, p. 415, effective August 18, 1979; amended at 3 Ill. Reg. 38, p. 243, effective September 21, 1979; peremptory amendment at 3 Ill. Reg. 38, p. 321, effective September 7, 1979; amended at 3 Ill. Reg. 40, p. 140, effective October 6, 1979; amended at 3 Ill. Reg. 46, p. 36, effective November 2, 1979; amended at 3 Ill. Reg. 47, p. 96, effective November 13, 1979; amended at 3 Ill. Reg. 48, p. 1, effective November 15, 1979; peremptory amendment at 4 Ill. Reg. 9, p. 259, effective February 22, 1980; amended at 4 Ill. Reg. 10, p. 258, effective February 25, 1980; amended at 4 Ill. Reg. 12, p. 551, effective March 10, 1980; amended at 4 Ill. Reg. 27, p. 387, effective June 24, 1980; emergency amendment at 4 Ill. Reg. 29, p. 294, effective July 8, 1980, for a maximum of 150 days; amended at 4 Ill. Reg. 37, p. 797, effective September 2, 1980; amended at 4 Ill. Reg. 37, p. 800, effective September 2, 1980; amended at 4 Ill. Reg. 45, p. 134, effective October 27, 1980; amended at 5 Ill. Reg. 766, effective January 2, 1981; amended at 5 Ill. Reg. 1134, effective January 26, 1981; peremptory amendment at 5 Ill. Reg. 5722, effective June 1, 1981; amended at 5 Ill. Reg. 7071, effective June 23, 1981; amended at 5 Ill. Reg. 7104, effective June 23, 1981; amended at 5 Ill. Reg. 8041, effective July 27, 1981; amended at 5 Ill. Reg. 8052, effective July 24, 1981; peremptory amendment at 5 Ill. Reg. 8106, effective August 1, 1981; peremptory amendment at 5 Ill. Reg. 10062, effective October 1, 1981; peremptory amendment at 5 Ill. Reg. 10079, effective October 1, 1981; peremptory amendment at 5 Ill. Reg. 10095, effective October 1, 1981; peremptory amendment at 5 Ill. Reg. 10113, effective October 1, 1981; peremptory amendment at 5 Ill. Reg. 10124, effective October 1, 1981; peremptory amendment at 5 Ill. Reg. 10131, effective October 1, 1981; amended at 5 Ill. Reg. 10730, effective October 1, 1981; amended at 5 Ill. Reg. 10733, effective October 1, 1981; amended at 5 Ill. Reg. 10760, effective October 1, 1981; amended at 5 Ill. Reg. 10767, effective October 1, 1981; peremptory amendment at 5 Ill. Reg. 11647, effective October 16, 1981; peremptory amendment at 6 Ill. Reg. 611, effective January 1, 1982; amended at 6 Ill. Reg. 1216, effective January 14, 1982; emergency amendment at 6 Ill. Reg. 2447, effective March 1, 1982, for a maximum of 150 days;

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peremptory amendment at 6 Ill. Reg. 2452, effective February 11, 1982; peremptory amendment at 6 Ill. Reg. 6475, effective May 18, 1982; peremptory amendment at 6 Ill. Reg. 6912, effective May 20, 1982; emergency amendment at 6 Ill. Reg. 7299, effective June 2, 1982, for a maximum of 150 days; amended at 6 Ill. Reg. 8115, effective July 1, 1982; amended at 6 Ill. Reg. 8142, effective July 1, 1982; amended at 6 Ill. Reg. 8159, effective July 1, 1982; amended at 6 Ill. Reg. 10970, effective August 26, 1982; amended at 6 Ill. Reg. 11921, effective September 21, 1982; amended at 6 Ill. Reg. 12293, effective October 1, 1982; amended at 6 Ill. Reg. 12318, effective October 1, 1982; amended at 6 Ill. Reg. 13754, effective November 1, 1982; rules repealed, new rules adopted and codified at 7 Ill. Reg. 907, effective January 7, 1983; amended (by adding Sections being codified with no substantive change) at 7 Ill. Reg. 5195; amended at 7 Ill. Reg. 9909, effective August 5, 1983; amended (by adding Section being codified with no substantive change) at 7 Ill. Reg. 14747; amended (by adding Section being codified with no substantive change) at 7 Ill. Reg. 16107; amended at 7 Ill. Reg. 16408, effective November 30, 1983; amended at 7 Ill. Reg. 16652, effective December 1, 1983; amended at 8 Ill. Reg. 243, effective December 27, 1983; amended at 8 Ill. Reg. 5233, effective April 9, 1984; amended at 8 Ill. Reg. 6764, effective April 27, 1984; amended at 8 Ill. Reg. 11435, effective June 27, 1984; amended at 8 Ill. Reg. 13319, effective July 16, 1984; amended at 8 Ill. Reg. 16237, effective August 24, 1984; amended (by adding Sections being codified with no substantive change) at 8 Ill. Reg. 17896; amended at 9 Ill. Reg. 314, effective January 1, 1985; emergency amendment at 9 Ill. Reg. 823, effective January 3, 1985, for a maximum of 150 days; amended at 9 Ill. Reg. 9557, effective June 5, 1985; amended at 9 Ill. Reg. 10764, effective July 5, 1985; amended at 9 Ill. Reg. 15800, effective October 16, 1985; amended at 10 Ill. Reg. 1924, effective January 17, 1986; amended at 10 Ill. Reg. 3660, effective January 30, 1986; emergency amendment at 10 Ill. Reg. 4646, effective February 3, 1986, for a maximum of 150 days; amended at 10 Ill. Reg. 4896, effective March 7, 1986; amended at 10 Ill. Reg. 10681, effective June 3, 1986; amended at 10 Ill. Reg. 11041, effective June 5, 1986; amended at 10 Ill. Reg. 12662, effective July 14, 1986; amended at 10 Ill. Reg. 15118, effective September 5, 1986; amended at 10 Ill. Reg. 15640, effective September 19, 1986; amended at 10 Ill. Reg. 19079, effective October 24, 1986; amended at 11 Ill. Reg. 2307, effective January 16, 1987; amended at 11 Ill. Reg. 5297, effective March 11, 1987; amended at 11 Ill. Reg. 6238, effective March 20, 1987; emergency amendment at 11 Ill. Reg. 12449, effective July 10, 1987, for a maximum of 150 days; emergency amendment at 11 Ill. Reg. 12948, effective August 1, 1987, for a maximum of 150 days; emergency amendment at 11 Ill. Reg. 18311, effective November 1, 1987, for a maximum of 150 days; amended at 11 Ill. Reg. 18689, effective November 1, 1987; emergency amendment at 11 Ill. Reg. 18791, effective November 1, 1987, for a maximum of 150 days; amended at 11 Ill. Reg. 20129, effective December 4, 1987; amended at 11 Ill. Reg. 20889, effective December 14, 1987; amended at 12 Ill. Reg. 889, effective January 1, 1988; SUBPARTS C, D and E recodified to SUBPARTS E, F and G at 12 Ill. Reg. 2147; Section 114.110 recodified to Section 114.52 at 12 Ill. Reg. 2984; amended at 12 Ill. Reg. 3505, effective January 22, 1988; amended at 12 Ill.

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Reg. 6170, effective March 18, 1988; amended at 12 Ill. Reg. 6719, effective March 22, 1988; amended at 12 Ill. Reg. 9108, effective May 20, 1988; amended at 12 Ill. Reg. 9699, effective May 24, 1988; amended at 12 Ill. Reg. 9940, effective May 31, 1988; amended at 12 Ill. Reg. 11474, effective June 30, 1988; amended at 12 Ill. Reg. 14255, effective August 30, 1988; emergency amendment at 12 Ill. Reg. 14364, effective September 1, 1988, for a maximum of 150 days; amendment at 12 Ill. Reg. 16729, effective September 30, 1988; amended at 12 Ill. Reg. 20171, effective November 28, 1988; amended at 13 Ill. Reg. 89, effective January 1, 1989; amended at 13 Ill. Reg. 1546, effective January 20, 1989; amended at 13 Ill. Reg. 3900, effective March 10, 1989; amended at 13 Ill. Reg. 8580, effective May 20, 1989; emergency amendment at 13 Ill. Reg. 16169, effective October 2, 1989, for a maximum of 150 days; emergency expired March 1, 1990; amended at 13 Ill. Reg. 16015, effective October 6, 1989; amended at 14 Ill. Reg. 746, effective January 1, 1990; amended at 14 Ill. Reg. 3640, effective February 23, 1990; amended at 14 Ill. Reg. 6360, effective April 16, 1990; amended at 14 Ill. Reg. 10929, effective June 20, 1990; amended at 14 Ill. Reg. 13215, effective August 6, 1990; amended at 14 Ill. Reg. 13777, effective August 10, 1990; amended at 14 Ill. Reg. 14162, effective August 17, 1990; amended at 14 Ill. Reg. 17111, effective September 30, 1990; amended at 15 Ill. Reg. 288, effective January 1, 1991; amended at 15 Ill. Reg. 5710, effective April 10, 1991; amended at 15 Ill. Reg. 11164, effective August 1, 1991; emergency amendment at 15 Ill. Reg. 15144, effective October 7, 1991, for a maximum of 150 days; amended at 16 Ill. Reg. 3512, effective February 20, 1992; emergency amendment at 16 Ill. Reg. 4540, effective March 10, 1992, for a maximum of 150 days; emergency amendment at 16 Ill. Reg. 11662, effective July 1, 1992, for a maximum of 150 days; amended at 16 Ill. Reg. 13297, effective August 15, 1992; emergency amendment at 16 Ill. Reg. 13651, effective September 1, 1992, for a maximum 150 days; emergency amendment at 16 Ill. Reg. 14769, effective September 15, 1992, for a maximum of 150 days; emergency amendment at 16 Ill. Reg. 16276, effective October 1, 1992, for a maximum of 150 days; emergency amendment at 16 Ill. Reg. 17772, effective November 13, 1992, for a maximum of 150 days; amended at 16 Ill. Reg. 18815, effective November 24, 1992; amended at 17 Ill. Reg. 1091, effective January 15, 1993; amended at 17 Ill. Reg. 2277, effective February 15, 1993; amended at 17 Ill. Reg. 3255, effective March 1, 1993; amended at 17 Ill. Reg. 3639, effective February 26, 1993; amended at 17 Ill. Reg. 3255, effective March 1, 1993; amended at 17 Ill. Reg. 6814, effective April 21, 1993; emergency amendment at 17 Ill. Reg. 19728, effective November 1, 1993, for a maximum of 150 days; amended at 18 Ill. Reg. 3436, effective February 28, 1994; amended at 18 Ill. Reg. 7390, effective April 29, 1994; amended at 18 Ill. Reg. 12839, effective August 5, 1994; emergency amendment at 19 Ill. Reg. 8434, effective June 9, 1995, for a maximum of 150 days; amended at 19 Ill. Reg. 15058, effective October 17, 1995; emergency amendment at 20 Ill. Reg. 4445, effective February 28, 1996, for a maximum of 150 days; amended at 20 Ill. Reg. 9970, effective July 10, 1996; emergency amendment at 21 Ill. Reg. 682, effective January 1, 1997, for a maximum of 150 days; amended at 21 Ill. Reg. 7413, effective May 31, 1997; emergency amendment at 21 Ill. Reg. 8652, effective July 1, 1997, for a

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maximum of 150 days; recodified from the Department of Public Aid to the Department of Human Services at 21 Ill. Reg. 9322; amended at 21 Ill. Reg. 15545, effective November 26, 1997; emergency amendment at 22 Ill. Reg. 16356, effective September 1, 1998, for a maximum of 150 days; amended at 22 Ill. Reg. 19820, effective November 1, 1998; emergency amendment at 23 Ill. Reg. 588, effective January 1, 1999, for a maximum of 150 days; amended at 23 Ill. Reg. 1619, effective January 20, 1999; amended at 23 Ill. Reg. 6067, effective May 4, 1999; amended at 23 Ill. Reg. 6434, effective May 15, 1999; amended at 23 Ill. Reg. 6948, effective May 30, 1999; emergency amendment at 23 Ill. Reg. 8661, effective July 13, 1999, for a maximum of 150 days; amended at 23 Ill. Reg. 13863, effective November 19, 1999; amended at 24 Ill. Reg. 2338, effective February 1, 2000; amended at 24 Ill. Reg. 5688, effective March 20, 2000; amended at 25 Ill. Reg. 10325, effective August 3, 2001; amended at 26 Ill. Reg. 164, effective January 1, 2002; amended at 26 Ill. Reg. 9821, effective June 24, 2002; emergency amendment at 26 Ill. Reg. 11009, effective July 1, 2002, for a maximum of 150 days; amended at 26 Ill. Reg. 17198, effective November 15, 2002; amended at 27 Ill. Reg. 7263, effective April 7, 2003; amended at 27 Ill. Reg. 18433, effective November 20, 2003; amended at 28 Ill. Reg. 5682, effective March 22, 2004; amended at 29 Ill. Reg. 5487, effective April 1, 2005; emergency amendment at 32 Ill. Reg. 10622, effective July 1, 2008, for a maximum of 150 days; emergency expired November 27, 2008; peremptory amendment at 32 Ill. Reg. 18076, effective November 15, 2008; emergency amendment at 33 Ill. Reg. 5004, effective March 19, 2009, for a maximum of 150 days; emergency amendment at 33 Ill. Reg. 7355, effective May 21, 2009, for a maximum of 150 days; amended at 33 Ill. Reg. 12785, effective September 8, 2009; amended at 33 Ill. Reg. 13857, effective September 17, 2009.

SUBPART F: PAYMENT AMOUNTS

Section 114.351 Payment Levels in Group I Counties

- a) The following payment levels are established for the GA Program.
- b) The counties included in Group I are:

Boone	Kane	Ogle
Champaign	Kankakee	Whiteside
Cook	Kendall	Winnebago
DeKalb	Lake	Woodford
Dupage	McHenry	

- 1) Family and Children Assistance Case Payment Levels

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SIZE OF ASSISTANCE UNIT	CARETAKER RELATIVE OR RELATIVE AND CHILD OR CHILDREN CURRENT	CHILD ONLY CURRENT
1	<u>243223</u>	<u>117407</u>
2	<u>318292</u>	<u>230244</u>
3	<u>432396</u>	<u>284264</u>
4	<u>474435</u>	<u>365335</u>
5	<u>555509</u>	<u>434398</u>
6	<u>623572</u>	<u>465427</u>
7	<u>657603</u>	<u>501460</u>
8	<u>691634</u>	<u>536492</u>
9	<u>727667</u>	<u>576528</u>
10	<u>765702</u>	<u>616565</u>
11	<u>807740</u>	<u>659605</u>
12	<u>848778</u>	<u>703645</u>
13	<u>894820</u>	<u>751689</u>
14	<u>941863</u>	<u>800734</u>
15	<u>991909</u>	<u>851784</u>
16	<u>1,043957</u>	<u>908833</u>
17	<u>1,0984,007</u>	<u>965885</u>
18	<u>1,1564,064</u>	

- 2) The Transitional Assistance case payment level in Group I Counties is \$100.

(Source: Amended at 33 Ill. Reg. 13857, effective September 17, 2009)

Section 114.352 Payment Levels in Group II Counties

- a) The following payment levels are established for the GA Program in Group II Counties.
- b) The counties included in Group II are:

Adams	Lee	St. Clair
Bureau	Livingston	Stephenson
Carroll	Logan	Tazewell
Clinton	Macon	Vermilion

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Coles	Macoupin	Wabash
DeWitt	Madison	Warren
Douglas	McDonough	Will
Effingham	McLean	
Ford	Mercer	
Fulton	Monroe	
Grundy	Morgan	
Henry	Moultrie	
Iroquois	Peoria	
Jackson	Piatt	
Jo Daviess	Putnam	
Knox	Rock Island	
LaSalle	Sangamon	

1) Family and Children Assistance Case Payment Levels

SIZE OF ASSISTANCE UNIT	CARETAKER RELATIVE OR RELATIVE AND CHILD OR CHILDREN CURRENT	CHILD OR CHILDREN ONLY CURRENT
1	<u>233214</u>	<u>111402</u>
2	<u>307282</u>	<u>222204</u>
3	<u>417383</u>	<u>277254</u>
4	<u>461423</u>	<u>356327</u>
5	<u>540495</u>	<u>422387</u>
6	<u>605555</u>	<u>455417</u>
7	<u>638585</u>	<u>488448</u>
8	<u>673617</u>	<u>525482</u>
9	<u>709650</u>	<u>562516</u>
10	<u>746684</u>	<u>601551</u>
11	<u>784719</u>	<u>642589</u>
12	<u>825757</u>	<u>686629</u>
13	<u>870798</u>	<u>725665</u>
14	<u>915839</u>	<u>774710</u>
15	<u>962883</u>	<u>824756</u>
16	<u>1,014930</u>	<u>877805</u>
17	<u>1,069981</u>	<u>933856</u>
18	<u>1,124,031</u>	

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- 2) The Transitional Assistance case payment level in Group II Counties is \$100.

(Source: Amended at 33 Ill. Reg. 13857, effective September 17, 2009)

Section 114.353 Payment Levels in Group III Counties

- a) The following payment levels are established for the GA Program in Group III Counties.
- b) The counties included in Group III are:

Alexander	Edgar	Jasper	Montgomery	Shelby
Bond	Edwards	Jefferson	Perry	Stark
Brown	Fayette	Jersey	Pike	Union
Calhoun	Franklin	Johnson	Pope	Washington
Cass	Gallatin	Lawrence	Pulaski	Wayne
Christian	Greene	Marion	Randolph	White
Clark	Hamilton	Marshall	Richland	Williamson
Clay	Hancock	Mason	Saline	
Crawford	Hardin	Massac	Schuyler	
Cumberland	Henderson	Menard	Scott	

- 1) Family and Children Assistance Case Payment Levels

SIZE OF ASSISTANCE UNIT	CARETAKER RELATIVE OR RELATIVE AND CHILD OR CHILDREN CURRENT	CHILD OR CHILDREN ONLY CURRENT
1	<u>198182</u>	<u>10899</u>
2	<u>294270</u>	<u>215197</u>
3	<u>399366</u>	<u>271249</u>
4	<u>445408</u>	<u>346317</u>
5	<u>519476</u>	<u>411377</u>
6	<u>585537</u>	<u>443406</u>
7	<u>616565</u>	<u>474435</u>
8	<u>647594</u>	<u>509467</u>

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9	<u>683627</u>	<u>546501</u>
10	<u>718659</u>	<u>584536</u>
11	<u>758695</u>	<u>623572</u>
12	<u>797731</u>	<u>665610</u>
13	<u>839770</u>	<u>692635</u>
14	<u>883810</u>	<u>739678</u>
15	<u>930853</u>	<u>788723</u>
16	<u>979898</u>	<u>840771</u>
17	<u>1,030945</u>	<u>895821</u>
18	<u>1,085995</u>	

- 2) The Transitional Assistance case payment level in Group III Counties is \$100.

(Source: Amended at 33 Ill. Reg. 13857, effective September 17, 2009)

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- 1) Heading of the Part: Cock Pheasant, Hungarian Partridge, Bobwhite Quail, and Rabbit Hunting
- 2) Code Citation: 17 Ill. Adm. Code 530
- 3)

<u>Section Numbers</u> :	<u>Adopted Action</u> :
530.70	Amendment
530.80	Amendment
530.85	Amendment
530.95	Amendment
530.110	Amendment
- 4) Statutory Authority: Implementing and authorized by Sections 1.3, 1.4, 1.13, 2.1, 2.2, 2.6, 2.7, 2.13, 2.27, 2.30, 2.33, 3.5, 3.27, 3.28 and 3.29 of the Wildlife Code [520 ILCS 5/1.3, 1.4, 1.13, 2.1, 2.2, 2.6, 2.7, 2.13, 2.27, 2.30, 2.33, 3.5, 3.27, 3.28 and 3.29]
- 5) Effective Date of Amendments: September 21, 2009
- 6) Does this rulemaking contain an automatic repeal date? No
- 7) Does this rulemaking contain incorporations by reference? No
- 8) A copy of the adopted rulemaking, including any material incorporated by reference, is on file in the Department of Natural Resources' principal office and is available for public inspection.
- 9) Notice of Proposal Published in Illinois Register: June 12, 2009; 33 Ill. Reg. 7373
- 10) Has JCAR issued a Statement of Objection to this rulemaking? No
- 11) Differences between proposal and final version:

References to site designations were changed to be consistent throughout this Part (State Conservation Area, State Wildlife Management Area, State Historic Site, State Goose Management Area, State Fish and Wildlife Area, State Forest Natural Area, State Natural Area and State Habitat Area).

In Section 530.80(d)(4), before "authorized" added "requested by the concessionaire and".

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In Section 530.85(a), after "date", added "established in Section 530.95".

- 12) Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreements issued by JCAR? Yes
- 13) Will this rulemaking replace any emergency rulemaking currently in effect? No
- 14) Are there any amendments pending on this Part? No
- 15) Summary and Purpose of Rulemaking: Amendments were made to: change the Department's website address for making reservations; update information pertaining to conveyance for disabled hunters; clarify reservation deadlines and site-specific regulations at controlled permit hunting sites; update site-specific regulations for youth pheasant hunting; and update sites and site-specific information for non-fee hunting sites.
- 16) Information and questions regarding these adopted amendments shall be directed to:

Stanley Yonkauski, Legal Counsel
Department of Natural Resources
One Natural Resources Way
Springfield IL 62702-1271

217/782-1809

The full text of the Adopted Amendments begins on the next page:

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TITLE 17: CONSERVATION
CHAPTER I: DEPARTMENT OF NATURAL RESOURCES
SUBCHAPTER b: FISH AND WILDLIFEPART 530
COCK PHEASANT, HUNGARIAN PARTRIDGE,
BOBWHITE QUAIL, AND RABBIT HUNTING

Section	
530.10	Statewide General Regulations
530.20	Statewide Cock Pheasant, Hungarian Partridge, Bobwhite Quail, and Cottontail and Swamp Rabbit Regulations
530.30	Statewide Hungarian Partridge Regulations (Repealed)
530.40	Statewide Bobwhite Quail Regulations (Repealed)
530.50	Statewide Rabbit Regulations (Repealed)
530.60	Statewide Crow Regulations (Repealed)
530.70	Permit Requirements for Fee Hunting of Pheasant, Quail and Rabbit at Controlled Permit Hunting Sites
530.80	Regulations for Fee Hunting of Pheasant, Quail and Rabbit at Controlled Permit Hunting Sites
530.85	Youth Pheasant Hunting Permit Requirements
530.90	Illinois Youth Pheasant Hunting Sites Permit Requirements (Repealed)
530.95	Youth Pheasant Hunting Regulations
530.100	Illinois Youth Pheasant Hunting Regulations (Repealed)
530.105	Regulations for Fee Hunting of Pheasant, Hungarian Partridge, Quail and Rabbit at Controlled Daily Drawing Pheasant Hunting Sites (Repealed)
530.110	Regulations for Non-Fee Hunting of Cock Pheasant, Hungarian Partridge, Quail, and Rabbit at Various Department-Owned or -Managed Sites
530.115	Regulations for Hunting by Falconry Methods at Various Department-Owned or -Managed Sites
530.120	Regulations for Hunting Crow at Various Department-Owned or -Managed Sites (Repealed)

AUTHORITY: Implementing and authorized by Sections 1.3, 1.4, 1.13, 2.1, 2.2, 2.6, 2.7, 2.13, 2.27, 2.30, 2.33, 3.5, 3.27, 3.28 and 3.29 of the Wildlife Code [520 ILCS 5/1.3, 1.4, 1.13, 2.1, 2.2, 2.6, 2.7, 2.13, 2.27, 2.30, 2.33, 3.5, 3.27, 3.28 and 3.29].

SOURCE: Adopted at 5 Ill. Reg. 8777, effective August 25, 1981; codified at 5 Ill. Reg. 10634; amended at 6 Ill. Reg. 10667, effective August 20, 1982; amended at 7 Ill. Reg. 10755, effective

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August 24, 1983; amended at 8 Ill. Reg. 21574, effective October 23, 1984; amended at 9 Ill. Reg. 15846, effective October 8, 1985; amended at 10 Ill. Reg. 15579, effective September 16, 1986; emergency amendment at 10 Ill. Reg. 18822, effective October 16, 1986, for a maximum of 150 days; emergency expired March 15, 1987; amended at 11 Ill. Reg. 10546, effective May 21, 1987; amended at 12 Ill. Reg. 12016, effective July 7, 1988; amended at 13 Ill. Reg. 12796, effective July 21, 1989; emergency amendment at 13 Ill. Reg. 12985, effective July 31, 1989, for a maximum of 150 days; emergency expired December 28, 1989; amended at 13 Ill. Reg. 17348, effective October 27, 1989; amended at 14 Ill. Reg. 10775, effective June 20, 1990; emergency amendment at 14 Ill. Reg. 18324, effective October 29, 1990, for a maximum of 150 days; emergency expired March 28, 1991; amended at 15 Ill. Reg. 9924, effective June 24, 1991; emergency amendment at 15 Ill. Reg. 16124, effective October 25, 1991, for a maximum of 150 days; emergency expired March 23, 1992; amended at 15 Ill. Reg. 18138, effective December 6, 1991; amended at 16 Ill. Reg. 12470, effective July 28, 1992; amended at 16 Ill. Reg. 18951, effective December 1, 1992; amended at 17 Ill. Reg. 15534, effective September 10, 1993; amended at 18 Ill. Reg. 12628, effective August 9, 1994; amended at 19 Ill. Reg. 12615, effective August 29, 1995; recodified by changing the agency name from Department of Conservation to Department of Natural Resources at 20 Ill. Reg. 9389; amended at 20 Ill. Reg. 12397, effective August 30, 1996; amended at 21 Ill. Reg. 9042, effective June 26, 1997; amended at 22 Ill. Reg. 14762, effective August 3, 1998; amended at 23 Ill. Reg. 9012, effective July 28, 1999; amended at 24 Ill. Reg. 12496, effective August 7, 2000; amended at 25 Ill. Reg. 11119, effective August 21, 2001; amended at 26 Ill. Reg. 16210, effective October 18, 2002; amended at 27 Ill. Reg. 15381, effective September 18, 2003; amended at 28 Ill. Reg. 12835, effective September 1, 2004; amended at 29 Ill. Reg. 13813, effective August 26, 2005; amended at 30 Ill. Reg. 14478, effective August 24, 2006; amended at 31 Ill. Reg. 9175, effective June 18, 2007; amended at 32 Ill. Reg. 17455, effective October 24, 2008; amended at 33 Ill. Reg. 13871, effective September 21, 2009.

Section 530.70 Permit Requirements for Fee Hunting of Pheasant, Quail and Rabbit at Controlled Permit Hunting Sites

- a) Applicants must contact the Department of Natural Resources (Department or DNR) to obtain a permit reservation. For Silver Springs State Park, Ramsey Lake State Park, Horseshoe Lake State Park (Madison County) and Chain O'Lakes State Park, applicants must contact the public/private partnership area concessionaire. Should the concessionaire, for any reason, fail to operate the concession, applicants must contact the DNR. Applications for reservations will be accepted on the first Monday of August until 24 hours before the last hunt date. Methods for making reservations are available on the Department's Website at: <http://dnr.state.il.us>, by email at: dnr.pheasant@illinois.gov

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dnr.pheasant@illinois.gov or by writing to the Department's Division of Parks and Recreation-Pheasant at the address cited in subsection (c). Only applications for reservations submitted by Illinois residents will be accepted during the first two weeks of the application period. Reservations will be confirmed. Providing false information on the application is a Class A misdemeanor (see 520 ILCS 5/2.38).

- b) Permits will be issued until the daily quota is filled. The daily quota is determined by the formula one hunter per 10 to 80 huntable acres. Huntable acres are determined by, but not limited to, the biological studies on the number of the species available, the condition, topography, and configuration of the land at the site, the condition of the roads at the site, and the number of employees available to work at the site.
- c) For all DNR operated sites the permit is valid for the permit holder and up to three hunting partners. The hunting partners cannot hunt without the permit holder being present to hunt. Methods for changing hunting reservations and transferring permits will be provided on the Department's Website at: <http://dnr.state.il.us>, by email at: dnr.pheasant@illinois.gov or by writing to:

Illinois Department of Natural Resources
Division of Parks and Recreation – Pheasant
One Natural Resources Way
Springfield IL 62702-1271

- d) Reservations for pheasant hunting will be issued by the Department for the Des Plaines Conservation Area, Eldon Hazlet State Park (Carlyle Lake), Iroquois County Conservation Area, Jim Edgar Panther Creek State Fish and Wildlife Area – Controlled Unit, Johnson-Sauk Trail State Park, Kankakee River State Park, Lee County Conservation Area (Green River), Moraine View State Park, Sand Ridge State Forest and Wayne Fitzgerald State Park.
- e) The Department will operate a conveyance or authorize a conveyance to be used for disabled hunters possessing a current Standing Vehicle Permit at some controlled pheasant hunting sites. Reservations for Disabled Controlled Pheasant Hunting Permits ~~this conveyance~~ must be made at least 48 hours ~~2 days~~ in advance of the hunt, and shall be on a first come first served basis. Sites where the conveyance will be available, as well as dates of operation, shall be provided on the Department's Controlled Pheasant Hunting Website and/or publicly

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announced.

(Source: Amended at 33 Ill. Reg. 13871, effective September 21, 2009)

Section 530.80 Regulations for Fee Hunting of Pheasant, Quail and Rabbit at Controlled Permit Hunting Sites

a) Hunting Seasons:

- 1) The following controlled pheasant hunting areas shall be closed to pheasant permit hunting on every Monday and Tuesday during the controlled hunting season (except as provided in subsection (a)(4)) and on December 25.

Chain O'Lakes State Park

Des Plaines State Conservation Area

Eldon Hazlet State Park (Carlyle Lake)

Horseshoe Lake State Park – Madison County

Iroquois County State Conservation Area

Jim Edgar Panther Creek State Fish and Wildlife Area – Controlled Unit

Johnson-Sauk Trail State Park

Kankakee River State Park

Moraine View State Park

Ramsey Lake State Park

Sand Ridge State Forest

Silver Springs State Park

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Wayne Fitzgerald State Park (Rend Lake)

- 2) The following controlled pheasant hunting areas are open to the Illinois Youth Pheasant Hunting Program only on the first Sunday of the site's controlled pheasant hunting season.

Chain O'Lakes State Park

Des Plaines State Conservation Area

Eldon Hazlet State Park (Carlyle Lake)

Iroquois County State Conservation Area

Jim Edgar Panther Creek State Fish and Wildlife Area – Controlled Unit

Johnson-Sauk Trail State Park

Lee County State Conservation Area (Green River State Wildlife Area)

Moraine View State Park

Sand Ridge State Forest

Wayne Fitzgerald State Park (Rend Lake)

- 3) The controlled hunting season on the Lee County State Conservation Area (Green River) is each Sunday and Monday following the first Saturday in November through the eighth Sunday following (closed on Sunday during the November and December firearm deer season) November 2, 3, 9, 10, 16, 17, 24, 30 and December 1, 8, 14, 15, 16.
- 4) Controlled pheasant hunting seasons are listed below; exceptions are in parentheses; with written authorization from the Director, captive-reared game bird hunting may be scheduled during the season authorized by statute (see 520 ILCS 5/2.6) on the following DNR operated areas:

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Des Plaines State Conservation Area (closed during the November 3-day firearm deer season) and Moraine View State Park – the Wednesday before the first Saturday of November through the ninth Sunday following

Eldon Hazlet State Park and Wayne Fitzgerald State Park – the Wednesday following the first Saturday of November through the ninth Sunday following

Horseshoe Lake State Park – Madison County (closed New Year's Day) – the second Wednesday of December or the first hunting day after the close of the central zone duck season, whichever occurs first, through the next following January 31

Iroquois County State Conservation Area and Chain O'Lakes State Park (closed during the November 3-day firearm deer season) – the Wednesday before the first Saturday in November through the seventh Sunday following

Jim Edgar Panther Creek State Fish and Wildlife Area – Controlled Unit (closed during the November and December firearm deer seasons), Johnson-Sauk Trail State Park (closed New Year's Day), Kankakee River State Park (closed New Year's Day), Ramsey Lake State Park (closed New Year's Day), Sand Ridge State Forest – season dates are those specified in Section 530.20

Silver Springs State Park (closed New Year's Day) – the third Saturday of October through the next following January 8

- b) Hunting hours are listed below. On Thanksgiving Day, hunting hours are 9:00 a.m.-1:00 p.m. Hunters with reservations are required to check in at the check station on the following sites at the listed times. Hunters with reservations that check in after the required check-in time may not be allowed to hunt if the site hunter quota has been filled.

Site Name	Check-In Times	Hunting Hours
Chain O'Lakes State Park	7:00-8:00 a.m.	9:00 a.m.-4:00 p.m.

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Des Plaines <u>State</u> Conservation Area	7:00-8:00 a.m.	9:00 a.m.-4:00 p.m.
Eldon Hazlet State Park (Carlyle Lake)	7:00-8:00 a.m.	9:00 a.m.-4:00 p.m.
Horseshoe Lake State Park (Madison County)	8:00-8:30 a.m.	9:00 a.m.-4:00 p.m.
Iroquois County <u>State</u> Conservation Area	7:00-8:00 a.m.	9:00 a.m.-4:00 p.m.
Jim Edgar Panther Creek State Fish and Wildlife Area (Controlled Unit)	8:00-8:30 a.m.	9:00 a.m.-4:00 p.m.
Johnson-Sauk Trail State Park	8:00-8:30 a.m.	9:00 a.m.-4:00 p.m.
Kankakee River State Park	8:00-8:30 a.m.	9:00 a.m.-4:00 p.m.
Lee County <u>State</u> Conservation Area (Green River State Wildlife Area)	8:00-8:30 a.m.	9:00 a.m.-4:00 p.m.
Moraine View State Park	7:00-8:00 a.m.	9:00 a.m.-4:00 p.m.
Ramsey Lake State Park	8:00-8:30 a.m.	9:00 a.m.-4:00 p.m.
Sand Ridge State Forest	8:00-8:30 a.m.	9:00 a.m.-4:00 p.m.
Silver Springs State Park	8:00-8:30 a.m.	9:00 a.m.-4:00 p.m.
Wayne Fitzgerald State Park (Rend Lake)	7:00-8:00 a.m.	9:00 a.m.-4:00 p.m.

- c) Except for Standing Vehicle Permittees with a Disabled Controlled Pheasant Hunting Permit ~~hunting from the Department's disabled conveyance~~, during the controlled pheasant hunting season when daily quotas are not filled, permits shall

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be issued by drawing held at the conclusion of check-in time and if daily quotas remain unfilled at the conclusion of the drawing, on a first come-first served basis until 12:00 noon at the following sites:

Des Plaines State Conservation Area

Eldon Hazlet State Park

Iroquois County State Conservation Area

Jim Edgar Panther Creek State Fish and Wildlife Area

Johnson-Sauk Trail State Park

Lee County State Conservation Area (Green River)

Kankakee River State Park

Moraine View State Park

Sand Ridge State Forest

Wayne Fitzgerald State Park

- d) Hunting licenses, daily "Public Hunting Grounds for Pheasants" fees and hunting permit fees collected by public/private partnership area concessionaire usage stamps and fees:
- 1) Depending on the availability of staff during ~~During~~ the controlled pheasant hunting season, hunters may be ~~are~~ required to deposit their hunting license in the check station while hunting. Persons exempt by law from having a hunting license must deposit their Firearm Owner's Identification Card. If they are under 21 years old and do not have a card, they must be accompanied by a parent, legal guardian or a person in loco parentis who has a valid card in possession.
 - 2) Pursuant to 520 ILCS 5/1.13, at ~~At~~ the Lee County State Conservation Area (Green River) and the Iroquois County State Conservation Area, hunters must pay the following daily Public Hunting Grounds for

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~~Pheasants fee to obtain a daily usage stamp from~~ the Department prior to hunting: \$25 residents; \$35 non-residents. ~~On, except on~~ the Sunday following Thanksgiving Day, hunters under 16 are not required to pay the daily Public Hunting Grounds for Pheasants fee~~obtain a stamp~~.

- 3) ~~Pursuant to 520 ILCS 5/1.13, at~~ the Des Plaines ~~State~~ Conservation Area, Jim Edgar Panther Creek State Fish and Wildlife Area – Controlled Unit, Johnson-Sauk Trail State Park, Kankakee River State Park, Moraine View State Park, Eldon Hazlet State Park (Carlyle Lake), Wayne Fitzgerald State Park and Sand Ridge State Forest, hunters must pay the following daily Public Hunting Grounds for Pheasants fee to obtain a daily usage stamp from the Department prior to hunting: \$25 residents; \$35 non-residents. ~~On, except on~~ the Sunday following Thanksgiving Day and the ~~Saturday~~Friday between Christmas Day and New Year's Day, hunters under 16 are not required to pay the daily Public Hunting Grounds for Pheasants fee~~obtain a stamp~~.
- 4) At Chain O'Lakes State Park, Horseshoe Lake State Park (Madison County), Ramsey Lake State Park and Silver Springs State Park, hunters must pay the following hunting permit fees to be collected by the public/private partnership area concessionaire under the terms of a Controlled Pheasant Hunting Agreement with the Department prior to hunting: 2 pheasant permit – \$25 residents and \$35 non-residents; 3 pheasant permit – \$36; 4 pheasant permit – \$45. On days requested by the concessionaire and authorized by the Department, hunters under 16 are not required to pay a hunting permit fee~~Fees of not more than \$23 for a 2 pheasant hunting permit, \$32 for a 3 pheasant hunting permit or \$39 for a 4 pheasant hunting permit must be paid to the public/private partnership area concessionaire at the following sites. In the event of a weather anomaly, such as drought, the listed fees may be increased.~~

~~Chain O'Lakes State Park~~

~~Horseshoe Lake State Park (Madison County)~~

~~Ramsey Lake State Park~~

~~Silver Springs State Park~~

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- e) During the controlled pheasant hunting season, hunters must wear a back patch issued by the check station.
- f) Anyone who has killed game previously and has it in possession or in their vehicle must declare it with the person in charge of the area during check-in. All game found in a hunter's possession after hunting has started on the area shall be considered illegally taken if the hunter has not declared it prior to going afield.
- g) All hunting must be done with shotguns or bow and arrow. Only shot shells with a shot size of No. 5 lead or a non-toxic shot size ballistically equivalent to No. 5 lead or smaller may be used, except at Chain O' Lakes State Park, Johnson-Sauk Trail State Park, Lee County Conservation Area (Green River), Wayne Fitzgerald State Park and Eldon Hazlet State Park where only nontoxic shot approved by the U.S. Fish and Wildlife Service may be possessed and only shot shells with a shot size ballistically equivalent to No. 5 lead or smaller may be used or in possession. Flu flu arrows only may be used or in possession by bow and arrow hunters.
- h) Non-hunters are not allowed in the field, except at special hunts publicly announced by the Department where non-hunters authorized by the Department shall be allowed in the field, and except for operators of Department conveyances and Standing Vehicle Permittees and a single dog handler for the Permittee.
- i) Hunters under 16 years of age must be accompanied by an adult hunter.
- j) Daily limits – On the following areas, ~~hunters may obtain one permit each day;~~ a permit authorizes the harvest of 2 pheasants of either sex per hunter; exceptions are in parentheses. ~~With;~~ ~~with~~ written authorization from the Director, ~~the Department may issue more than one permit to a hunter and~~ the limits provided for in 520 ILCS 5/3.28 shall apply ~~for Illinois Conservation Foundation sponsored hunts:~~

Chain O'Lakes State Park (two 2 pheasant permits or one 3 or 4 pheasant permit per hunter each day)

Des Plaines State Conservation Area

Eldon Hazlet State Park

Lee County State Conservation Area (2 cock pheasants per permit hunter)

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Horseshoe Lake State Park-Madison County (two 2 pheasant permits or one 3 or 4 pheasant permit per hunter each day; additionally, first day only, 4 quail and 2 rabbits per hunter)

Iroquois County [State](#) Conservation Area

Jim Edgar Panther Creek State Fish and Wildlife Area (additionally, 8 bobwhite quail opening day through the Sunday following Thanksgiving and 4 rabbits per hunter)

Johnson-Sauk Trail State Park (additionally, 8 bobwhite quail, 2 Hungarian partridge and 4 rabbits per hunter)

Kankakee River State Park (additionally, 8 bobwhite quail and 4 rabbits per hunter)

Moraine View State Park

Ramsey Lake State Park (two 2 pheasant permits or one 3 or 4 pheasant permit per hunter each day; additionally, 8 bobwhite quail and 4 rabbits per hunter)

Sand Ridge State Forest (additionally, 8 bobwhite quail and 4 rabbits per hunter)

Silver Springs State Park (two 2 pheasant permits or one 3 or 4 pheasant permit per hunter each day)

Wayne Fitzgerald State Park

- k) Tagging of birds.
During the controlled pheasant hunting season, all pheasants must be affixed with a Department tag before they are removed from the area during the controlled pheasant hunting season. The tag must remain on the leg of the pheasants until the pheasants are finally prepared for consumption.
- l) During the controlled pheasant hunting season, hunters may not leave the confines of any permit area and return to hunt on the permit area during the same day.

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- m) Any person who violates any provision of this Part or 17 Ill. Adm. Code 510.10(c)(1), (4) and (6) or 510.10(d)(7) or Section 2.33(n), (x) or (z) of the Wildlife Code [520 ILCS 5/2.33(n), (x) or (z)] shall be subject to arrest and/or removal from the premises for the remainder of the controlled pheasant hunting season under applicable statutes including 720 ILCS 5/21-5, Criminal Trespass to State Supported Land. Hunters may request a hearing within ten days after the citation by written request addressed to: Legal Division, Department of Natural Resources, One Natural Resources Way, Springfield IL 62702-1271. Such hearing shall be governed by the provisions of 17 Ill. Adm. Code 2530.
- n) Violation of a site regulation is a petty offense (see 520 ILCS 5/2.6, 2.7, 2.13 or 2.27).

(Source: Amended at 33 Ill. Reg. 13871, effective September 21, 2009)

Section 530.85 Youth Pheasant Hunting Permit Requirements

- a) Applicants must contact the Department of Natural Resources (Department or DNR) to obtain a permit reservation. Applications for reservations will be accepted on the first Monday of August until 24 hours before the hunt date **established in Section 530.95**. Methods for making reservations are available on the Department's Website at: <http://dnr.state.il.us>, by email at: dnr.pheasant@illinois.gov ~~dnr.pheasant@illinois.gov~~ or by writing to the Department's Division of Parks and Recreation. Only applications for reservations submitted by Illinois residents will be accepted during the first two weeks of the application period. Reservations will be confirmed. Providing false information on the application is a Class A misdemeanor (see 520 ILCS 5/2.38).
- b) Only one permit per person will be issued until the daily quota is filled. The daily quota is determined by the formula: one hunter per 10 to 40 huntable acres. Huntable acres are determined by, but not limited to, the biological studies on the number of the species available, the condition, topography, and configuration of the land at the site, the condition of the roads at the site, and the number of employees available to work at the site.
- c) Methods for transferring permits will be provided on the Department's Website at: <http://dnr.state.il.us>, by email at: dnr.pheasant@illinois.gov ~~dnr.pheasant@illinois.gov~~ or by writing to:

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Illinois Department of Natural Resources
Division of Parks and Recreation – Youth Pheasant Hunt
One Natural Resources Way
Springfield IL 62702-1271

- d) Reservations for the Illinois Youth Pheasant Hunt permits will be issued for Chain O'Lakes State Park, Clinton Lake State Recreation Area, Des Plaines Conservation Area, Edward R. Madigan State Park, Eldon Hazlet State Park (Carlyle Lake), Iroquois County Conservation Area, Johnson-Sauk Trail State Park, Lee County Conservation Area (Green River), Moraine View State Park, Wayne Fitzgerald (Rend Lake) State Park, Mackinaw River State Fish and Wildlife Area, Horseshoe Lake State Park (Madison County), Sand Ridge State Forest, Sangchris Lake State Park and Jim Edgar Panther Creek State Fish and Wildlife Area-Controlled Unit.

(Source: Amended at 33 Ill. Reg. 13871, effective September 21, 2009)

Section 530.95 Youth Pheasant Hunting Regulations

- a) At the following sites, the Illinois Youth Pheasant Hunt will be held on:
- 1) the Saturday preceding the opening of the statewide upland game season:
 - Clinton Lake State Recreation Area
 - Mackinaw River State Fish and Wildlife Area
 - 2) the Sunday following the opening of the statewide upland game season:
 - Chain O'Lakes State Park
 - Des Plaines State Conservation Area
 - Edward R. Madigan State Park
 - Lee County State Conservation Area (Green River)
 - Iroquois County State Conservation Area

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Jim Edgar Panther Creek State Fish and Wildlife Area – Controlled Unit

Johnson-Sauk Trail State Park

Moraine View State Park

Sand Ridge State Forest

Sangchris Lake State Park

- 3) the second Sunday following the opening of the statewide upland game season:

Eldon Hazlet State Park (Carlyle Lake)

Horseshoe Lake State Park (Madison County)

Wayne Fitzgerald State Park (Rend Lake)

- b) Hunting hours are from 9:00 a.m. to 4:00 p.m., except at Sangchris Lake hunting hours are from 11:00 a.m. to 4:00 p.m. Hunters with reservations or permits are required to check in at the check station between 7:00 and 8:00 a.m. (between 10:00 and 10:30 a.m. at Sangchris Lake State Park).
- c) All hunters must be between the ages of 10-15 inclusive and have a youth hunting permit. Stand-by permits will not be available except at Sangchris Lake and Edward R. Madigan State Park. Hunters under age 16 are not required to pay a daily fee.
- d) All hunters are required to deposit their hunting licenses in the check station while hunting. Each permit holder must be accompanied by a non-hunting supervisory adult. If the hunter does not have a valid Firearm Owner's Identification (FOID) card, the supervisory adult is required to have a valid FOID card. Only one supervisory adult in a hunting party is required to have a valid FOID card if the hunters in the hunting party stay under the immediate control (accompany youth hunter at all times) of the supervisory adult possessing the valid FOID card. The

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supervising adult shall be criminally liable for the actions of the youth in the hunting party and shall be subject to the criminal penalties provided by law.

- e) Supervising adults are required to wear a cap and upper outer garment of solid and vivid blaze orange of a least 400 square inches. Hunters must wear a back patch issued by the check station.
- f) Persons who have killed game previously and have it in their possession or in their vehicle must declare it with the person in charge of the area prior to hunting on the area. All previously killed game found in a hunter's possession after hunting has started on the area will be considered illegally taken if the hunter has not declared it prior to going afield.
- g) All hunting must be done with shotguns. Only shot shells with a shot size of #5 lead or a nontoxic shot size ballistically equivalent to No. 5 lead or smaller may be used, except at Chain O'Lakes State Park, Eldon Hazlet State Park, Johnson-Sauk Trail State Park, Lee County Conservation Area (Green River) and Wayne Fitzgerald State Park where only shot shells approved as nontoxic by the U.S. Fish and Wildlife Service with a shot size ballistically equivalent to No. 5 lead or smaller may be used.
- h) Daily limit.
 - 1) Two pheasants of either sex at Chain O'Lakes State Park, Des Plaines State Conservation Area, Eldon Hazlet State Park, Iroquois County State Conservation Area, Horseshoe Lake State Park (Madison County), Johnson-Sauk Trail State Park, Moraine View State Park, Sand Ridge State Forest, and Wayne Fitzgerald State Park.
 - 2) Two cock pheasants only at Clinton Lake State Recreation Area, Lee County State Conservation Area (Green River) and Mackinaw River State Fish and Wildlife Area.
 - 3) Statewide upland game limits at Sangchris Lake State Park and Edward R. Madigan State Park.
 - 4) Two pheasants of either sex, eight quail and four rabbits at Jim Edgar Panther Creek State Fish and Wildlife Area – Controlled Unit.

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- i) All pheasants must be affixed with a Department tag before they are removed from the area. The tag must remain on the leg of the pheasants until the pheasants are finally prepared for consumption.
- j) Violation of this Section is a petty offense (see 520 ILCS 5/2.6).

(Source: Amended at 33 Ill. Reg. 13871, effective September 21, 2009)

Section 530.110 Regulations for Non-Fee Hunting of Cock Pheasant, Hungarian Partridge, Quail, and Rabbit at Various Department-Owned or -Managed Sites

- a) General Site Regulations
 - 1) All regulations in 17 Ill. Adm. Code 510 – General Hunting and Trapping – apply in this Section, unless this Section is more restrictive.
 - 2) Only flu flu arrows may be used by bow and arrow hunters; broadheads are not allowed.
 - 3) On sites ~~that~~which are indicated by (1), hunters must check in and/or sign out as provided for in 17 Ill. Adm. Code 510.
 - 4) On sites ~~that~~which are indicated by (2), only nontoxic shot approved by the U.S. Fish and Wildlife Service of size #3 steel or #5 bismuth shot or smaller may be used or possessed with a shot size of #3 steel or tin, #4 bismuth, #5 tungsten-iron, tungsten-polymer, tungsten-matrix or smaller may be used.
 - 5) Site specific rules or exceptions are noted in parentheses after each site.

- b) Site Specific Regulations

- 1) Statewide regulations apply at the following sites:

Anderson Lake ~~State~~ Conservation Area (1)

Apple River Canyon State Park – Salem and Thompson Units
(rabbits only; closed during firearm deer season) (1)

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Argyle Lake State Park (closed during firearm deer season) (1)

Banner Marsh State Fish and Wildlife Area (opens the day after the close of the central zone duck season) (1)

Big Bend State Fish and Wildlife Area (hunting for bobwhite quail will terminate at the close of legal shooting hours on December 14) (1)

Big River State Forest (closed during firearm deer season) (1)

Cache River State Natural Area (1)

Campbell Pond [State](#) Wildlife Management Area

Cape Bend State Fish and Wildlife Area (1)

Carlyle Lake [State](#) Lands and Waters (Corps of Engineers Managed Lands)

Carlyle Lake Wildlife Management Area (subimpoundment area closed 7 days prior to and during the southern zone waterfowl season)

Crawford County [State](#) Conservation Area (1)

Cypress Pond State Natural Area (1)

Deer Pond State Natural Area (1)

Devil's Island State Fish and Wildlife Area

Dog Island [State](#) Wildlife Management Area (1)

Eagle Creek State Park (open only January 16-22)

Eldon Hazlet State Park (north of Allen Branch and west of Peppenhorst Branch only) (1)

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~~Falling Down Prairie (1)~~

Ferne Clyffe State Park (1)

Fort de Chartres State Historic Site (hunting with muzzleloading shotgun or bow and arrow only) (1)

Ft. Massac State Park (1)

Fulton County State Goose Management Area (opens the day after the close of the Central Illinois Quota Zone goose season) (1)

Giant City State Park (1)

Hamilton County State Conservation Area (1)

Hanover Bluff State Natural Area (1)

Horseshoe Lake State Conservation Area (Alexander County) (Public Hunting Area) (1)

Horseshoe Lake State Conservation Area (Controlled Hunting Area; closed prior to and during the Canada goose season) (1)

Jubilee College State Park (hunting for pheasant and quail will terminate at sunset on the Sunday after Thanksgiving; closed during all site firearm deer seasons) (1)

Kaskaskia River State Fish and Wildlife Area (Doza Creek Waterfowl Management Area closed 7 days prior to and during duck season; the defined Baldwin Lake Waterfowl Rest Area is closed) (1)

Kinkaid Lake State Fish and Wildlife Area (1)

Marseilles State Fish and Wildlife Area (closed during all site firearm deer seasons; unauthorized personnel may not be on the site outside of the posted check station operating hours; hunters may only enter the site from designated parking lots) (1)

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Marshall State Fish and Wildlife Area (closed during firearm deer season) (1)

Mazonia State Fish and Wildlife Area (upland season does not open until the day after the close of the site's waterfowl season; the site is closed Mondays, Tuesdays, Christmas Day and New Year's Day) (1)

Mermet Lake State Fish and Wildlife Area (1)

Mississippi River Pools 16, 17, 18

Mississippi River State Fish and Waterfowl Management Area (Pools 25 and 26)

Mississippi River Pools 21, 22, 24

Mt. Vernon Game Propagation Center (hunting from January 1 to the end of season; rabbits only) (1)

Nauvoo State Park (Max Rowe Unit only)

Oakford State Conservation Area

Peabody River King State Fish and Wildlife Area (West and North Subunits only) (1)

Pyramid State Park (1)

Rall Woods State Natural Area (1)

Ramsey Lake State Park (8:00 a.m. to 4:00 p.m.; rabbits and quail only may be hunted on Mondays and Tuesdays during the fee pheasant season) (1)

Randolph County State Conservation Area (1)

Ray Norbut State Fish and Wildlife Area (1)

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Red Hills State Park (1)

Rend Lake Project Lands and Waters

Sahara Woods State Fish and Wildlife Area (1)

Saline County State Conservation Area (1)

Sam Dale Lake State Conservation Area (8:00 a.m. to 4:00 p.m.)
(1)

Sam Parr State Park (8:00 a.m. to 4:00 p.m.) (1)

Sangamon County State Conservation Area

Shawnee National Forest, Oakwood Bottoms (2)

Sielbeck Forest State Natural Area (1)

Skinner Farm State Habitat Area (1)

Snakeden Hollow State Fish and Wildlife Area (opens the day after
the close of the Central Illinois Quota zone goose season) (1) (2)

Spoon River State Forest (1)

Stephen A. Forbes State Park (8:00 a.m. to 4:00 p.m.) (1)

Tapley Woods State Natural Area (closed during firearm and
muzzleloading rifle deer seasons) (1)

Trail of Tears State Forest (1)

Turkey Bluffs State Fish and Wildlife Area (1)

Union County State Conservation Area (Firing Line Management
Area only) (1) (2)

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Washington County [State](#) Conservation Area (1)

Weinberg-King State Park (1)

Weinberg-King State Park (Cecil White Unit)

Weinberg-King State Park (Scripps Unit) (1)

Weinberg-King State Park (Spunky Bottoms Unit) (1)

Wildcat Hollow State Forest

Witkowsky State Wildlife Area (rabbit only; opens after second firearm deer season) (1)

Wolf Creek State Park (open only January 16-22)

- 2) Statewide regulations apply at the following sites except that hunters must obtain a free site permit from site office; this permit must be in possession while hunting at the site. The permit must be returned, and harvest reported, by February 15 or the hunter will forfeit hunting privileges at the site for the following year:

Chauncey Marsh [State Natural Area](#) (obtain permit at Red Hills State Park headquarters)

Clinton Lake State Recreation Area (4:00 p.m. daily closing)

Fox Ridge State Park (4:00 p.m. daily closing; closed during firearm deer season)

Hidden Springs State Forest (no hunting during firearm deer season; 4:00 p.m. daily closing)

Horseshoe Lake State Park (Madison County) – Gabaret, Mosenthein, Chouteau Island Unit

Jim Edgar Panther Creek State Fish and Wildlife Area (Open Unit)

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Jim Edgar Panther Creek State Fish and Wildlife Area –
Controlled Unit (rabbit hunting only open Monday following the
close of the controlled pheasant hunting season through the next
following January 22)

Kickapoo State Park (4:00 p.m. daily closing; closed during
firearm deer season)

Lake Shelbyville – Kaskaskia and West Okaw Wildlife
Management Area (4:00 p.m. daily closing)

Meeker State Habitat Area (obtain permit at Sam Parr State Park
headquarters)

Middle Fork State Fish and Wildlife Area (4:00 p.m. daily closing;
closed during firearm deer season)

Moraine View State Park (rabbit hunting permitted Mondays and
Tuesdays during the site controlled hunting season; hunting hours
are 8 a.m. to 4 p.m. only)

Newton Lake State Fish and Wildlife Area (closed during firearm
deer season)

Pyramid State Park – Galum Unit

Sanganois State Fish and Wildlife Area

Ten Mile Creek State Fish and Wildlife Area (nontoxic shot only
on posted waterfowl rest areas)

- 3) Hunting is permitted on the following areas only on the dates listed in parentheses; or on sites indicated by (3), hunting will be permitted on the first and second day of the statewide upland game season and on each subsequent Wednesday and Saturday in November, and on each Thursday and Sunday in December, through December 24. On sites indicated by (4), hunting will be permitted on the first and second day of the statewide upland game season and on each subsequent Wednesday and Saturday in November and on each Thursday and Sunday in December, through

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December 24, except closed during the firearm deer seasons and open December 27 and 29. Daily hunting permits filled by drawing through DNR Permit Office. Procedures for application and drawings will be publicly announced. Illinois residents will have preference. Only one permit per person will be issued. Each permit authorizes the holder to bring the number of additional hunting partners listed in parentheses for the day's hunt. The permit must be returned and harvest reported by February 15 or permit holders will forfeit hunting privileges at the sites covered in this Section for the following year:

Birkbeck Pheasant Habitat Area (each permit authorizes the holder to bring 3 hunting partners) (3)

Bradford Pheasant Habitat Area (each permit authorizes the holder to bring 3 hunting partners) (3)

Clifton Pheasant Habitat Area (each permit authorizes the holder to bring 3 hunting partners) (3)

Coffeen Lake State Fish and Wildlife Area – Upland Management Area (open every Wednesday during the upland season; daily limit of bobwhite quail is 4; each permit authorizes the holder to bring 2 hunting partners)

Dublin Highlands Pheasant Habitat Area (each permit authorizes the holder to bring 3 hunting partners) (3)

Eagle Creek State Park (each permit authorizes the holder to bring 3 hunting partners) (3)

Edward R. Madigan State Park (open on Mondays from the opening of upland game season until Christmas Day; each permit authorizes the holder to bring 3 hunting partners; check in required before hunting)

Freeman Mine [Habitat Area](#) (open every Wednesday in November and December starting with opening day of upland game season except during firearm deer season and December 24 and 25; each permit authorizes holder to bring 3 hunting partners; hunting hours

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8 a.m. to 4 p.m.; daily bag limit is 2 cock pheasants, 4 quail, and 2 rabbits)

Franklin Creek State Natural Area – Nachusa Prairie Sand Farm (each permit authorizes the holder to bring 3 hunting partners) (3)

Gifford Pheasant Habitat Area (each permit authorizes the holder to bring 3 hunting partners) (3)

Green River State Wildlife Area (open only November [7, 11, 12, 14, 18, 25, 28](#), ~~5, 6, 8, 12, 19, 22~~ and December [2, 9, 10, 12, 16, 17, 19](#), ~~4, 6, 10, 11, 13, 17, 18, 20~~; each permit authorizes the holder to bring 5 hunting partners) (1) (2)

Hallsville Pheasant Habitat Area (each permit authorizes the holder to bring 3 hunting partners) (3)

Harry "Babe" Woodyard State Natural Area (each permit authorizes the holder to bring 3 hunting partners; 8 a.m. to 4 p.m. hunting hours) (4)

Herschel Workman Pheasant Habitat Area (each permit authorizes the holder to bring 3 hunting partners) (3)

Hindsboro Pheasant Habitat Area (each permit authorizes the holder to bring 3 hunting partners) (3)

Hurricane Creek [State](#) Habitat Area (each permit authorizes the holder to bring 3 hunting partners) (4)

[Ilo Dillin State Habitat Area \(each permit authorizes the holder to bring 3 hunting partners\)](#) (3)

Jim Edgar Panther Creek State Fish and Wildlife Area (Upland Game Management Area) (open every Tuesday and Saturday in November, December and January starting with opening day of upland game season except during firearm deer season and December 24 and 25; rabbit hunting only after the close of pheasant and quail season; each permit authorizes holder to bring 3

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hunting partners)

Little Rock Creek Habitat Area (each permit authorizes the holder to bring 3 hunting partners) (3)

Loda Pheasant Habitat Area (each permit authorizes the holder to bring 3 hunting partners) (3)

Mackinaw State Fish and Wildlife Area (each permit authorizes the holder to bring 3 hunting partners) (4)

Manito Pheasant Habitat Area (each permit authorizes the holder to bring 3 hunting partners) (3)

Maytown Pheasant Habitat Area (each permit authorizes the holder to bring 3 hunting partners) (3)

Milks Grove Pheasant Habitat Area (each permit authorizes the holder to bring 3 hunting partners) (3)

Perdueville Pheasant Habitat Area (each permit authorizes the holder to bring 3 hunting partners) (3)

Pyramid State Park – Captain Unit (open only November [7, 11, 14, 18, 25, 28](#)~~1, 5, 8, 12, 15, 26~~; December [16, 19, 23, 26, 30](#)~~3, 10, 13, 20, 27~~; and January [2, 6, 9, 13](#)~~3, 7, 9, 15~~; each permit authorizes the holder to bring 2 hunting partners)

Pyramid State Park – Denmark Unit (open only November [8, 10, 14, 18, 25, 29](#)~~2, 5, 8, 12, 15, 26~~; December [16, 19, 23, 27, 30](#)~~3, 10, 13, 20, 27~~; and January [3, 6, 9, 13](#)~~4, 7, 10, 14~~; each permit authorizes the holder to bring 2 hunting partners)

Pyramid State Park – East Conant Unit (open only November [7, 11, 14, 25, 28](#)~~1, 5, 8, 12, 15, 26~~; December [9, 16, 19, 23, 26, 30](#)~~3, 10, 13, 20, 27~~; and January [2, 6, 9, 13](#)~~3, 7, 10, 14~~; each permit authorizes the holder to bring 2 hunting partners)

Sand Prairie Pheasant Habitat Area (each permit authorizes the

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holder to bring 5 hunting partners) (3)

Sand Ridge State Forest (Sparks Pond Land and Water Reserve Area) (open on Saturdays and Tuesdays from the opening of the upland game season through the end of December except during firearm deer season; each permit authorizes holder to bring 3 hunting partners)

Sangchris Lake State Park (open every Wednesday and Saturday in November and December after the opening day of upland game season except the Saturday of the second firearm deer season and December 24 and 25; each permit authorizes holder to bring 3 hunting partners; hunting hours 11:00 a.m. to sunset; check in required before hunting)

Saybrook Pheasant Habitat Area (each permit authorizes the holder to bring 5 hunting partners) (3)

Sibley Pheasant Habitat Area (each permit authorizes the holder to bring 5 hunting partners) (3)

Siloam Springs State Park – Buckhorn Unit (open only the first and third days of firearm deer season and every Tuesday and Saturday thereafter until close of the statewide quail season; each permit authorizes the holder to bring 3 hunting partners)

Steward Pheasant Habitat Area (each permit authorizes the holder to bring 3 hunting partners) (3)

Victoria Pheasant Habitat Area (each permit authorizes the holder to bring 5 hunting partners) (3)

[Whitefield Pheasant Habitat Area \(each permit authorizes the holder to bring 3 hunting partners\) \(3\)](#)

Willow Creek [State](#) Habitat Area (each permit authorizes the holder to bring 3 hunting partners) (3)

Wolf Creek State Park (each permit authorizes the holder to bring

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3 hunting partners) (4)

- 4) The following sites will be open for pheasant, quail, rabbit and partridge hunting following the site's controlled pheasant hunting season; pheasants of either sex may be taken; all hen pheasants must be tagged by DNR before leaving sites; hunting hours are 8:00 a.m.-4:00 p.m.; hunting dates are noted in parentheses:

Chain O'Lakes State Park (open Wednesday through Friday following permit pheasant season) (1)

Des Plaines [State](#) Conservation Area (dates are 5 days following the close of the site's permit pheasant season excluding Mondays, Tuesdays and Christmas) (1)

Eldon Hazlet State Park (no quail or rabbit hunting; controlled pheasant hunting area and for 5 consecutive days only) (1)

Iroquois County [State](#) Wildlife Management Area (open Wednesday through Sunday following permit pheasant season, [excluding Christmas](#)) (1)

Kankakee River State Park (no quail hunting)

Moraine View State Park (open Monday following the close of the controlled pheasant hunting season through the close of the northern zone season) (1)

Silver Springs State Park (dates are 5 days following the close of the site's permit pheasant season, excluding Mondays and Tuesdays) (1)

- c) Violation of a site regulation is a petty offense (see 520 ILCS 5/2.6, 2.7, 2.13 or 2.27).

(Source: Amended at 33 Ill. Reg. 13871, effective September 21, 2009)

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- 1) Heading of the Part: Squirrel Hunting
- 2) Code Citation: 17 Ill. Adm. Code 690
- 3) Section Number: 690.30 Adopted Action:
Amendment
- 4) Statutory Authority: Implementing and authorized by Sections 1.2, 1.3, 1.4, 2.1, 2.2, 2.28 and 3.5 of the Wildlife Code [520 ILCS 5/1.2, 1.3, 1.4, 2.1, 2.2, 2.28 and 3.5]
- 5) Effective Date of Amendment: September 21, 2009
- 6) Does this rulemaking contain an automatic repeal date? No
- 7) Does this rulemaking contain incorporations by reference? No
- 8) A copy of the adopted rulemaking, including any material incorporated by reference, is on file in the Department of Natural Resources' principal office and is available for public inspection.
- 9) Notice of Proposal Published in Illinois Register: June 12, 2009; 33 Ill. Reg. 7468
- 10) Has JCAR issued a Statement of Objection to this rulemaking? No
- 11) Differences between proposal and final version: References to site designations were changed to be consistent throughout this Part (State Conservation Area, State Wildlife Management Area, State Historic Site, State Fish and Wildlife Area, State Natural Area, State Habitat Area).
- 12) Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreements issued by JCAR? Yes
- 13) Will this rulemaking replace any emergency rulemaking currently in effect? No
- 14) Are there any amendments pending on this Part? No
- 15) Summary and Purpose of Rulemaking: This Part was amended to: change the name of Falling Down Prairie to Rall Woods State Natural Area, move Momence Wetlands from subsection (g) to subsection (f) and require check-in, check-out and reporting of harvest

DEPARTMENT OF NATURAL RESOURCES

NOTICE OF ADOPTED AMENDMENT

and allow the use of rifles and air rifles at Mackinaw River State Fish and Wildlife Area.

- 16) Information and questions regarding this adopted amendment shall be directed to:

Stanley Yonkauski, Legal Counsel
Department of Natural Resources
One Natural Resources Way
Springfield IL 62702-1271

217/782-1809

The full text of the Adopted Amendment begins on the next page:

DEPARTMENT OF NATURAL RESOURCES

NOTICE OF ADOPTED AMENDMENT

TITLE 17: CONSERVATION
CHAPTER I: DEPARTMENT OF NATURAL RESOURCES
SUBCHAPTER b: FISH AND WILDLIFEPART 690
SQUIRREL HUNTING

Section

690.10	Hunting Seasons
690.20	Statewide Regulations
690.30	Regulations at Various Department-Owned or -Managed Sites

AUTHORITY: Implementing and authorized by Sections 1.2, 1.3, 1.4, 2.1, 2.2, 2.28 and 3.5 of the Wildlife Code [520 ILCS 5/1.2, 1.3, 1.4, 2.1, 2.2, 2.28 and 3.5].

SOURCE: Adopted at 5 Ill. Reg. 8017, effective July 24, 1981; codified at 5 Ill. Reg. 10642; emergency amendment at 5 Ill. Reg. 11382, effective October 14, 1981, for a maximum of 150 days; emergency expired March 12, 1982; amended at 6 Ill. Reg. 9642, effective July 21, 1982; amended at 7 Ill. Reg. 8809, effective July 15, 1983; emergency amendment at 7 Ill. Reg. 9690, effective August 1, 1983, for a maximum of 150 days; emergency expired December 29, 1983; amended at 8 Ill. Reg. 16789, effective August 30, 1984; amended at 9 Ill. Reg. 11614, effective July 16, 1985; amended at 10 Ill. Reg. 15601, effective September 16, 1986; amended at 11 Ill. Reg. 9549, effective May 5, 1987; amended at 12 Ill. Reg. 12246, effective July 15, 1988; amended at 13 Ill. Reg. 10606, effective June 15, 1989; amended at 14 Ill. Reg. 10816, effective June 20, 1990; amended at 15 Ill. Reg. 10012, effective June 24, 1991; amended at 16 Ill. Reg. 11087, effective June 30, 1992; amended at 17 Ill. Reg. 10842, effective July 1, 1993; amended at 18 Ill. Reg. 8624, effective May 31, 1994; amended at 19 Ill. Reg. 10664, effective July 1, 1995; amended at 20 Ill. Reg. 10882, effective August 5, 1996; amended at 21 Ill. Reg. 9095, effective June 26, 1997; amended at 22 Ill. Reg. 14844, effective August 3, 1998; amended at 23 Ill. Reg. 9074, effective July 28, 1999; amended at 24 Ill. Reg. 8947, effective June 19, 2000; amended at 25 Ill. Reg. 9903, effective July 17, 2001; amended at 26 Ill. Reg. 13845, effective September 5, 2002; amended at 27 Ill. Reg. 12640, effective July 21, 2003; amended at 28 Ill. Reg. 11893, effective July 27, 2004; amended at 29 Ill. Reg. 9786, effective June 27, 2005; amended at 30 Ill. Reg. 12229, effective June 28, 2006; amended at 31 Ill. Reg. 11700, effective July 27, 2007; amended at 32 Ill. Reg. 14819, effective August 27, 2008; amended at 33 Ill. Reg. 13900, effective September 21, 2009.

Section 690.30 Regulations at Various Department-Owned or -Managed Sites

DEPARTMENT OF NATURAL RESOURCES

NOTICE OF ADOPTED AMENDMENT

- a) All the regulations in 17 Ill. Adm. Code 510, General Hunting and Trapping on Department-Owned or Managed Sites, apply in this Part, unless this Part is more restrictive. Violation of a site specific regulation is a petty offense (see 520 ILCS 5/2.28).
- b) Hunting with .22 caliber or smaller rimfire firearms or muzzleloading black powder rifles is allowed at those sites listed in the following subsections that are followed by a (1). Hunting with air rifles is allowed at those sites listed in the following subsections that are followed by a (3).
- c) Check-in, check-out and reporting of harvest is required at those sites listed in the following subsections that are followed by a (2).
- d) Statewide regulations apply at the following sites:

Anderson Lake [State](#) Conservation Area (2)

Apple River Canyon State Park – Salem and Thompson Units (2)

Argyle Lake State Park (2)

Big Bend State Fish and Wildlife Area (2)

Big River State Forest (2)

Cache River State Natural Area (1) (2)

Campbell Pond [State](#) Wildlife Management Area

Cape Bend State Fish and Wildlife Area (1) (2)

Carlyle Lake Lands and Waters – Corps of Engineers managed lands (1)

Carlyle Lake [State](#) Wildlife Management Area (subimpoundment area closed 7 days prior to and during the southern zone waterfowl season) (1)

Chain O'Lakes State Park (opens Wednesday after permit pheasant season for 5 consecutive days, except closed on Christmas Day; 8:00 a.m. to 4:00 p.m.; daily quota filled on first come-first served basis; DNR issued back

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patch must be worn while hunting; only shot size of No. 3 steel, No. 4 bismuth, No. 5 tungsten-iron, tungsten-matrix, tungsten-polymer or smaller may be used) (2)

Crawford County [State](#) Conservation Area (1) (2)

Cypress Pond State Natural Area (1) (2)

Deer Pond State Natural Area (1) (2)

Devil's Island State Fish and Wildlife Area

Dog Island [State](#) Wildlife Management Area (1) (2)

Eldon Hazlet State Park (north of Allen Branch (2); and west of Peppenhorst Branch only)

~~Falling Down Prairie (2)~~

Ferne Clyffe State Park – Cedar Draper Bluffs Hunting Area (1) (2)

Fort de Chartres [State](#) Historic Site (muzzleloading firearms or bow and arrow only) (1) (2)

Fort Massac State Park (2)

Hanover Bluff State Natural Area (2)

Kaskaskia River State Fish and Wildlife Area (Doza Creek Waterfowl Management Area closed 7 days prior to and during duck season; the defined Baldwin Lake Waterfowl Rest Area is closed) (1) (2) (3)

Kinkaid Lake [State](#) Fish and Wildlife Area (1)

Lowden-Miller State Forest (hunting allowed from September 1 through September 30 only; hunting allowed only on the southern one-half of the site) (1) (2)

Marseilles State Fish and Wildlife Area (Monday through Thursday only)

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through October 31; during August, hunting allowed west of E. 2450 Road only; open daily November 1 through the end of the site archery deer season; closed during the site firearm and muzzleloading deer seasons; unauthorized personnel may not be on the site outside of the posted check station operating hours; hunters may only enter the site from designated parking lots) (2)

Marshall State ~~Conservation Fish and Wildlife~~ Area (1) (2)

Mermet Lake ~~State~~ Conservation Area (non-toxic shot only in waterfowl areas; squirrel hunting closes after September 30, except in upland game area) (1) (2)

Mississippi River Fish and Waterfowl Management Area (Pools 25 and 26) (1)

Mississippi River Pools 16, 17, 18 (1)

Mississippi River Pools 21, 22, 24 (1)

Morrison Rockwood State Park (opens November 1 and closes the Thursday before the first statewide firearm deer season) (1) (2)

Nauvoo State Park (Max Rowe Unit only)

Oakford ~~State~~ Conservation Area (1)

Peabody River King State Fish and Wildlife Area (east subunit closes November 1) (2)

[Rall Woods State Natural Area \(2\)](#)

Randolph County ~~State~~ Conservation Area (2)

Ray Norbut State Fish and Wildlife Area (1) (2)

Red Hills State Park (2)

Rend Lake Project Lands and Waters (1)

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Sahara Woods State Fish and Wildlife Area (1) (2)

Saline County [State](#) Fish and Wildlife Area (1) (2)

Sam Dale Lake [State](#) Conservation Area (2)

Sam Parr State Park (2)

Sangamon County [State](#) Conservation Area

Shawnee National Forest – Oakwood Bottoms (non-toxic shot only) (1)

Sielbeck Forest [State](#) Natural Area (1) (2)

Skinner Farm State Habitat Area (2)

Spoon River State Forest (1) (2) (3)

Stephen A. Forbes State Park (2)

Tapley Woods State Natural Area (2)

Trail of Tears State Forest (1) (2)

Turkey Bluffs State Fish and Wildlife Area (1) (2) (3)

Walnut Point [State](#) Fish and Wildlife Area (1) (2)

Washington County [State](#) Conservation Area (2)

Weinberg-King State Park (1) (2)

Weinberg-King State Park – Cecil White Unit

Weinberg-King State Park – Scripps Unit (1) (2)

Weinberg-King State Park – Spunky Bottoms Unit (1) (2)

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Wildcat Hollow State Forest (1)

Witkowsky State Wildlife Area (opens after second firearm deer season)
(2)

- e) Season dates shall be the day following Labor Day through the end of the statewide season at the following sites:

Ferne Clyffe State Park – Ferne Clyffe Hunting Area (2)

Giant City State Park (rimfire cartridges allowed in Union County portion;
no rimfire cartridges allowed in Jackson County portion only) (1) (2)

Hamilton County [State](#) Conservation Area (2)

Pyramid State Park (2)

Siloam Springs State Park (2)

- f) Season dates shall be the day after Labor Day through September 30 at the following sites:

Johnson-Sauk Trail State Park (season reopens the day after the archery deer season closes and remains open until the end of the statewide season)
(2)

Jubilee College State Park (2)

Kankakee River State Park (2)

[Momence Wetlands State Natural Area \(2\)](#)

Sangchris Lake State Park (2)

Silver Springs State Park (2)

Spring Lake [State](#) Fish and Wildlife Area (2)

- g) Statewide regulations apply at the following sites, except that hunters must obtain

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a free permit from the Department and variations in season dates are in parentheses. Permits must be in possession while hunting. The permit must be returned and harvest reported by March 15 or the hunter will forfeit privileges at that site for the following year:

Beaver Dam State Park (statewide opening through September 30)

Chauncey Marsh [State Natural Area](#) (permit may be obtained at Red Hills State Park Headquarters) (1)

Clinton Lake State Recreation Area – North Fork Management Area, North of the County Road at the North Fork Boat Ramp and handicapped upland game area (1)

Coffeen Lake State Fish and Wildlife Area (statewide opening through September 30)

Copperhead Hollow State Fish and Wildlife Area (1)

Fox Ridge State Park (1)

Harry "Babe" Woodyard State Natural Area

Hidden Springs State Forest (1)

Horseshoe Lake State Park – Gabaret, Mosenthein and Chouteau Island Units (Madison County)

Hurricane Creek [State](#) Habitat Area (season closes October 31)

Jim Edgar Panther Creek State Fish and Wildlife Area (the Quality Unit and Controlled Unit close October 31) (1)

Kickapoo State Park (season opens day after Labor Day)

Lake Shelbyville – Eagle Creek State Park (closes opening day of site's pheasant season)

Lake Shelbyville – Kaskaskia and West Okaw Wildlife Management

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Areas (1)

Matthiessen State Park (season opens on statewide opening day and closes the day before the archery deer season opens; permits available at the Starved Rock State Park office; hunting in designated areas only)

Meeker State Habitat Area (obtain permit at Sam Parr State Park headquarters) (1)

Middle Fork [State](#) Fish and Wildlife Area (season opens day after Labor Day)

~~Momence Wetlands (season opens day after Labor Day; closes September 30; shotgun only, non-toxic shot only)~~

Moraine View State Park (closed during the controlled pheasant season)

Newton Lake [State](#) Fish and Wildlife Area (closed during site deer seasons)

Pere Marquette State Park (season opens day after Labor Day)

Pyramid State Park – Captain Unit (1)

Pyramid State Park – Denmark Unit (1)

Pyramid State Park – East Conant Unit (1)

Pyramid State Park – Galum Unit (1)

Ramsey Lake State Park

Sand Ridge State Forest (closes October 31) (1)

Sanganois State Fish and Wildlife Area (1)

Siloam Springs State Park – Buckhorn Unit (1) (2)

Ten Mile Creek [State](#) Fish and Wildlife Area (1)

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- h) Season dates shall be statewide opening through September 30 at the following sites:

Castle Rock State Park (2)

French Bluff State Natural Area (1) (2)

Iroquois County [State](#) Wildlife Management Area (1) (2)

Mackinaw State Fish and Wildlife Area [\(1\)](#) (2) [\(3\)](#)

Mt. Vernon Game Propagation Center (2)

Sandy Ford State Natural Area (2)

Weldon Springs – Piatt County Unit (2)

Woodford County [State](#) Fish and Wildlife Area (2)

- i) Season dates shall be statewide opening through October 31 at the following sites:

Green River State Wildlife Area (2)

Horseshoe Lake [State](#) Conservation Area (season on the controlled goose hunting area shall close October 31, remainder of the public hunting area statewide season; non-toxic shot only) (1)

Union County [State](#) Conservation Area (season on the controlled goose hunting area closes October 31; firing line unit – statewide closing; non-toxic shot only) (1)

(Source: Amended at 33 Ill. Reg. 13900, effective September 21, 2009)

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NOTICE OF ADOPTED AMENDMENT

- 1) Heading of the Part: The Taking of Wild Turkeys – Fall Gun Season
- 2) Code Citation: 17 Ill. Adm. Code 715
- 3) Section Number: 715.40 Adopted Action: Amendment
- 4) Statutory Authority: Implementing and authorized by Sections 1.3, 1.4, 1.20, 2.9, 2.10, and 2.11 of the Wildlife Code [520 ILCS 5/1.3, 1.4, 1.20, 2.9, 2.10 and 2.11]
- 5) Effective Date of Amendment: September 21, 2009
- 6) Does this rulemaking contain an automatic repeal date? No
- 7) Does this rulemaking contain incorporations by reference? No
- 8) A copy of the adopted rulemaking, including any material incorporated by reference, is on file in the Department of Natural Resources' principal office and is available for public inspection.
- 9) Notice of Proposal Published in Illinois Register: June 12, 2009; 33 Ill. Reg. 7479
- 10) Has JCAR issued a Statement of Objection to this rulemaking? No
- 11) Differences between proposal and final version: References to site designations were changed to be consistent throughout this Part (State Fish and Waterfowl Management Area, State Wildlife Management Area, State Historic Site, State Conservation Area, State Fish and Wildlife Area).
- 12) Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreements issued by JCAR? Yes
- 13) Will this rulemaking replace any emergency rulemaking currently in effect? No
- 14) Are there any amendments pending on this Part? No
- 15) Summary and Purpose of Rulemaking: This Part was amended to change the site name of Falling Down Prairie to Rall Woods State Natural Area.

DEPARTMENT OF NATURAL RESOURCES

NOTICE OF ADOPTED AMENDMENT

- 16) Information and questions regarding this adopted amendment shall be directed to:

Stanley Yonkausk, Legal Counsel
Department of Natural Resources
One Natural Resources Way
Springfield IL 62702-1271

217/782-1809

The full text of the Adopted Amendment begins on the next page:

DEPARTMENT OF NATURAL RESOURCES

NOTICE OF ADOPTED AMENDMENT

TITLE 17: CONSERVATION
CHAPTER I: DEPARTMENT OF NATURAL RESOURCES
SUBCHAPTER b: FISH AND WILDLIFEPART 715
THE TAKING OF WILD TURKEYS – FALL GUN SEASON

Section

715.10	Hunting Season, Open Counties and Permit Quotas
715.20	Statewide Turkey Permit Requirements
715.21	Turkey Permit Requirements – Special Hunts
715.25	Turkey Permit Requirements – Landowner/Tenant Permits
715.30	Turkey Hunting Regulations
715.40	Regulations at Various Department-Owned or -Managed Sites

AUTHORITY: Implementing and authorized by Sections 1.3, 1.4, 1.20, 2.9, 2.10 and 2.11 of the Wildlife Code [520 ILCS 5/1.3, 1.4, 1.20, 2.9, 2.10 and 2.11].

SOURCE: Adopted at 13 Ill. Reg. 14950, effective September 6, 1989; amended at 14 Ill. Reg. 12421, effective July 20, 1990; amended at 15 Ill. Reg. 11618, effective August 2, 1991; amended at 16 Ill. Reg. 11101, effective June 30, 1992; amended at 17 Ill. Reg. 10858, effective July 1, 1993; amended at 18 Ill. Reg. 10013, effective June 21, 1994; amended at 19 Ill. Reg. 11806, effective August 3, 1995; amended at 20 Ill. Reg. 10898, effective August 5, 1996; amended at 21 Ill. Reg. 9110, effective June 26, 1997; amended at 22 Ill. Reg. 14866, effective August 3, 1998; amended at 23 Ill. Reg. 9091, effective July 28, 1999; amended at 24 Ill. Reg. 8965, effective June 19, 2000; amended at 25 Ill. Reg. 11460, effective August 14, 2001; amended at 26 Ill. Reg. 13855, effective September 5, 2002; amended at 27 Ill. Reg. 12650, effective July 21, 2003; amended at 28 Ill. Reg. 11904, effective July 27, 2004; amended at 29 Ill. Reg. 15542, effective September 27, 2005; amended at 29 Ill. Reg. 18938, effective November 4, 2005; amended at 30 Ill. Reg. 14518, effective August 24, 2006; amended at 31 Ill. Reg. 11711, effective July 27, 2007; amended at 32 Ill. Reg. 14830, effective August 27, 2008; amended at 33 Ill. Reg. 13911, effective September 21, 2009.

Section 715.40 Regulations at Various Department-Owned or -Managed Sites

- a) Statewide regulations shall apply for the following sites:

Copperhead Hollow State Fish and Wildlife Area

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Horseshoe Lake State Park (Madison County) – Gabaret, Mosenthein and Chouteau Island Unit

Kaskaskia River State Fish and Wildlife Area (except that area north of Hwy. 154, east of the Kaskaskia River and south of Risdon School Road and Beck's Landing access road)

Mississippi River State Fish and Waterfowl Management Area (Pools 25 and 26)

Mississippi River Pools 16, 17, 18

Mississippi River Pools 21, 22, 24

Nauvoo State Park (Max Rowe Unit only)

Pere Marquette State Park (south of Graham Hollow Road)

Rend Lake Project Lands (portion in Jefferson County only)

Weinberg-King State Park – Cecil White Unit

- b) Statewide regulations shall apply except that all hunters must check in, check out, and report harvest at those sites listed below. Quotas, where listed, shall be on a first come-first served basis. Hunters shall not be allowed to sign in prior to 4 a.m. each day of the season.

Argyle Lake State Park

Big River State Forest

Cache River State Natural Area (Johnson County portion only)

Cape Bend State Fish and Wildlife Area

Cypress Pond State Natural Area

Deer Pond State Natural Area

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NOTICE OF ADOPTED AMENDMENT

Devil's Island State Fish and Wildlife Area

Dog Island [State](#) Wildlife Management Area

~~Falling Down Prairie~~

Ferne Clyffe State Park

Fort de Chartres [State](#) Historic Site (muzzleloading shotguns only)

Giant City State Park

Hanover Bluff State Natural Area

Horseshoe Lake [State](#) Conservation Area (public hunting area except for controlled goose hunting area)

Kinkaid Lake [State](#) Fish and Wildlife Area

[Rall Woods State Natural Area](#)

Ray Norbut State Fish and Wildlife Area

Sahara Woods State Fish and Wildlife Area

Saline County [State](#) Conservation Area

Siloam Springs State Park

Siloam Springs State Park – Buckhorn Unit (resident hunters only)

Skinner Farm State Habitat Area

Spoon River State Forest

Tapley Woods State Natural Area

Trail of Tears State Forest

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NOTICE OF ADOPTED AMENDMENT

Turkey Bluffs State Fish and Wildlife Area

Union County [State](#) Conservation Area – Firing Line Management Unit Only

Weinberg-King State Park

Weinberg-King State Park – Scripps Unit

Weinberg-King State Park – Spunky Bottoms Unit

- c) Statewide regulations shall apply except that all hunting is allowed by site-specific permit only. The Department of Natural Resources allocates permits for these areas through the lottery process set forth in Section 715.20. This permit is only valid for the specific site indicated on the permit.

Apple River Canyon State Park – Salem and Thompson Units

Crawford County [State](#) Conservation Area

Jim Edgar Panther Creek State Fish and Wildlife Area

Meeker State Habitat Area

Newton Lake [State](#) Fish and Wildlife Area

Sam Parr State Park

Sand Ridge State Forest

Witkowsky State Wildlife Area

- d) Special program for hunters with disabilities. Statewide regulations shall apply unless designated otherwise by site regulations. Only disabled persons participating in the site's firearm deer hunt are eligible to participate. This hunt will run concurrent with the site's firearm deer hunt (refer to 17 Ill. Adm. Code 650.67 for hunt dates). Permits will be \$15 each; site specific for Rock Cut; issued at the site during check in for firearm deer hunting. Any additional availability will be publicly announced.

DEPARTMENT OF NATURAL RESOURCES

NOTICE OF ADOPTED AMENDMENT

Rock Cut State Park

- e) Violation of a site specific regulation is a Class B misdemeanor (see 520 ILCS 5/2.9).

(Source: Amended at 33 Ill. Reg. 13911, effective September 21, 2009)

DEPARTMENT OF NATURAL RESOURCES

NOTICE OF ADOPTED AMENDMENTS

- 1) Heading of the Part: The Taking of Wild Turkeys – Fall Archery Season
- 2) Code Citation: 17 Ill. Adm. Code 720
- 3)

<u>Section Numbers:</u>	<u>Adopted Action:</u>
720.10	Amendment
720.40	Amendment
- 4) Statutory Authority: Implementing and authorized by Sections 1.3, 1.4, 2.9, 2.10 and 2.11 of the Wildlife Code [520 ILCS 5/1.3, 1.4, 2.9, 2.10 and 2.11]
- 5) Effective Date of Amendments: September 21, 2009
- 6) Does this rulemaking contain an automatic repeal date? No
- 7) Does this rulemaking contain incorporations by reference? No
- 8) A copy of the adopted rulemaking, including any material incorporated by reference, is on file in the Department of Natural Resources' principal office and is available for public inspection.
- 9) Notice of Proposal Published in Illinois Register: June 12, 2009; 33 Ill. Reg. 7486
- 10) Has JCAR issued a Statement of Objection to this rulemaking? No
- 11) Differences between proposal and final version: References to site designations were changed to be consistent throughout this Part (State Conservation Area, State Fish and Wildlife Area, State Wildlife Management Area, State Historic Site, State Fish and Waterfowl Management Area, State Natural Area).
- 12) Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreements issued by JCAR? Yes
- 13) Will this rulemaking replace any emergency rulemaking currently in effect? No
- 14) Are there any amendments pending on this Part? No
- 15) Summary and Purpose of Rulemaking: This Part was amended to: change the season ending date from "the first Thursday after January 10" to "the first Sunday after January

DEPARTMENT OF NATURAL RESOURCES

NOTICE OF ADOPTED AMENDMENTS

13"; open Frank Holten State Park to hunting and change the name of "Falling Down Prairie" to "Rall Woods State Natural Area".

- 16) Information and questions regarding these adopted amendments shall be directed to:

Stanley Yonkausk, Legal Counsel
Department of Natural Resources
One Natural Resources Way
Springfield IL 62702-1271

217/782-1809

The full text of the Adopted Amendments begins on the next page:

DEPARTMENT OF NATURAL RESOURCES

NOTICE OF ADOPTED AMENDMENTS

TITLE 17: CONSERVATION
CHAPTER I: DEPARTMENT OF NATURAL RESOURCES
SUBCHAPTER b: FISH AND WILDLIFEPART 720
THE TAKING OF WILD TURKEYS – FALL ARCHERY SEASON

Section

720.10	Hunting Seasons and Counties Open to Hunting
720.20	Statewide Turkey Permit Requirements
720.25	Turkey Permit Requirements – Landowner/Tenant Permits
720.30	Turkey Hunting Regulations
720.40	Regulations at Various Department-Owned or -Managed Sites
720.50	Releasing or Stocking of Turkeys (Repealed)

AUTHORITY: Implementing and authorized by Sections 1.3, 1.4, 2.9, 2.10 and 2.11 of the Wildlife Code [520 ILCS 5/1.3, 1.4, 2.9, 2.10 and 2.11].

SOURCE: Adopted and codified at 8 Ill. Reg. 7825, effective May 22, 1984; emergency amendments at 8 Ill. Reg. 20086, effective October 12, 1985, for a maximum of 150 days; emergency expired March 2, 1985; amended at 9 Ill. Reg. 14311, effective September 5, 1985; amended at 11 Ill. Reg. 9556, effective May 5, 1987; amended at 12 Ill. Reg. 12254, effective July 15, 1988; amended at 13 Ill. Reg. 12831, effective July 21, 1989; amended at 14 Ill. Reg. 12413, effective July 20, 1990; amended at 15 Ill. Reg. 11611, effective August 2, 1991; amended at 16 Ill. Reg. 11093, effective June 30, 1992; amended at 16 Ill. Reg. 15442, effective September 28, 1992; amended at 17 Ill. Reg. 281, effective December 28, 1992; amended at 17 Ill. Reg. 10850, effective July 1, 1993; amended at 18 Ill. Reg. 10104, effective June 21, 1994; amended at 19 Ill. Reg. 11799, effective August 3, 1995; amended at 20 Ill. Reg. 10890, effective August 5, 1996; amended at 21 Ill. Reg. 9102, effective June 26, 1997; amended at 22 Ill. Reg. 14856, effective August 3, 1998; amended at 23 Ill. Reg. 9082, effective July 28, 1999; amended at 24 Ill. Reg. 8956, effective June 19, 2000; amended at 25 Ill. Reg. 11448, effective August 14, 2001; amended at 26 Ill. Reg. 13867, effective September 5, 2002; amended at 27 Ill. Reg. 12658, effective July 21, 2003; amended at 28 Ill. Reg. 13612, effective September 24, 2004; amended at 29 Ill. Reg. 18345, effective August 26, 2005; amended at 29 Ill. Reg. 18944, effective November 4, 2005; amended at 30 Ill. Reg. 12240, effective June 28, 2006; amended at 31 Ill. Reg. 11723, effective July 27, 2007; amended at 32 Ill. Reg. 14843, effective August 27, 2008; amended at 33 Ill. Reg. 13918, effective September 21, 2009.

Section 720.10 Hunting Seasons and Counties Open to Hunting

DEPARTMENT OF NATURAL RESOURCES

NOTICE OF ADOPTED AMENDMENTS

a) Season: Statewide season October 1 through the first Sunday after January 13~~Thursday after January 10~~, closed during firearm deer season, as set out in 17 Ill. Adm. Code 650. Hunting outside the set season dates is a Class B misdemeanor (see 520 ILCS 5/2.9).

b) Open Counties:

Adams
Alexander
Bond
Boone
Brown
Bureau
Calhoun
Carroll
Cass
Champaign
Christian
Clark
Clay
Clinton
Coles
Crawford
Cumberland
DeKalb
DeWitt
Edgar
Edwards
Effingham
Fayette
Franklin
Fulton
Gallatin
Greene
Grundy
Hamilton
Hancock
Hardin

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NOTICE OF ADOPTED AMENDMENTS

Henderson
Henry
Iroquois
Jackson
Jasper
Jefferson
Jersey
Jo Daviess
Johnson
Kankakee
Kendall
Knox
LaSalle
Lawrence
Lee
Livingston
Logan
Macon
Macoupin
Madison
Marion
Marshall
Mason
Massac
McDonough
McHenry
McLean
Menard
Mercer
Monroe
Montgomery
Morgan
Moultrie
Ogle
Peoria
Perry
Piatt
Pike
Pope

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NOTICE OF ADOPTED AMENDMENTS

Pulaski
Putnam
Randolph
Richland
Rock Island
Saline
Sangamon
Schuyler
Scott
Shelby
St. Clair
Stark
Stephenson
Tazewell
Union
Vermilion
Wabash
Warren
Washington
Wayne
White
Whiteside
Will
Williamson
Winnebago
Woodford

(Source: Amended at 33 Ill. Reg. 13918, effective September 21, 2009)

Section 720.40 Regulations at Various Department-Owned or -Managed Sites

Statewide regulations shall apply for the following sites, except those sites designated below by asterisk (*) shall be open to archery turkey hunting without regard to firearm deer season. Those sites followed by (1) require hunters to check in and check out. Violation of a site specific regulation is a Class B misdemeanor (see 520 ILCS 5/2.9). Those sites followed by a (2) require hunters to obtain a permit from the site before hunting:

* Anderson Lake Conservation Area (1)

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Apple River Canyon State Park – Salem and Thompson Units (1)

Argyle Lake State Park (1)

Beaver Dam State Park (2)

Big Bend State Fish and Wildlife Area (1)

Big River State Forest (1)

Cache River State Natural Area (1)

Campbell Pond [State](#) Wildlife Management Area

Cape Bend State Fish and Wildlife Area (1)

Carlyle Lake Lands and Waters – Corps of Engineers Managed Lands

Carlyle Lake [State](#) Wildlife Management Area (subimpoundment area closed 7 days prior to and during the southern zone waterfowl season)

Castle Rock State Park (1)

Chain O'Lakes State Park (closed Wednesday through Sunday of pheasant season; opens Monday prior to pheasant season and closes Tuesday following close of pheasant season; reopens December 26 through the close of regular season) (1)

Chauncey Marsh [State Natural Area](#) (permit available at Red Hills State Park) (2)

Clinton Lake State Recreation Area (2)

Coffeen Lake State Fish and Wildlife Area (2)

Copperhead Hollow State Fish and Wildlife Area (2)

Crawford County [State](#) Conservation Area (1)

Cypress Pond State Natural Area (1)

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Deer Pond State Natural Area (1)

Devil's Island State Fish and Wildlife Area

Dixon Springs State Park (1)

Dog Island [State](#) Wildlife Management Area (1)

Eagle Creek State Park (2)

~~Falling Down Prairie (1)~~

Ferne Clyffe State Park (1)

Fort de Chartres [State](#) Historic Site

* Fort Kaskaskia [State](#) Historic Site (opens November 1) (1)

Fort Massac State Park (1)

Frank Holten State Park (opens November 1; crossing of Harding Ditch within confines of site allowed, no hunting from Harding Ditch right-of-way) (1)

Franklin Creek State Park (hunting in designated area only) (1)

Giant City State Park (1)

Green River State Wildlife Area (1)

Hamilton County [State](#) Conservation Area (must possess valid site archery permit) (2)

Hanover Bluff State Natural Area (1)

Harry "Babe" Woodyard State Natural Area (2)

Horseshoe Lake [State](#) Conservation Area (Alexander County) (controlled goose hunting area closed 7 days prior to Quota Zone goose season through the close of the Quota Zone goose season; remainder of the public hunting area open during the statewide season) (1)
(2)

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- * Horseshoe Lake State Park – Gabaret, Mosenthein and Chouteau Island Units (Madison County) (2)
- Iroquois County State Wildlife Area
- Jim Edgar Panther Creek State Fish and Wildlife Area (2)
- Johnson-Sauk Trail State Park (closed Wednesday through Sunday during site's pheasant permit season) (1)
- Jubilee College State Park (1)
- Kaskaskia River State Fish and Wildlife Area (no hunting within 50 yards of the Baldwin Lake Waterfowl Rest Area's main north-south road; this defined waterfowl rest area is closed until the Columbus Day holiday) (1 – except south of Highway 154 and north of Highway 13)
- Kickapoo State Park (2)
- | Kinkaid Lake [State](#) Fish and Wildlife Area
- Kishwaukee River State Fish and Wildlife Area (1)
- Lowden-Miller State Forest (1)
- Mackinaw River State Fish and Wildlife Area (1)
- Marseilles State Fish and Wildlife Area (closed each Friday, Saturday, and Sunday in October; unauthorized personnel may not be on the site outside of the posted check station operating hours; hunters may only enter the site from designated parking lots) (1)
- Marshall State Fish and Wildlife Area (Duck Ranch Unit closed 7 days prior to the duck season through the close of duck season) (1)
- Mautino State Fish and Wildlife Area (2)
- Meeker State Habitat Area (obtain permit at Sam Parr State Park) (2)

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Mermet Lake State Fish and Wildlife Area (1)

Middle Fork State Fish and Wildlife Area (2)

Mississippi Palisades State Park (November 1 through December 31) (2)

Mississippi River [State](#) Fish and Waterfowl Management Area (Pools 25 and 26)

Mississippi River Pools 16, 17 and 18

Mississippi River Pools 21, 22 and 24

Moraine View State Park (closed Wednesday through Sunday during site's controlled pheasant season) (2)

Nauvoo State Park (Max Rowe Unit only)

Newton Lake [State](#) Fish and Wildlife Area (must possess valid site archery permit) (2)

Oakford [State](#) Conservation Area

Peabody River King State Fish and Wildlife Area (east subunit closed November 1) (1)

Pere Marquette State Park (2)

Pyramid State Park

Pyramid State Park – East Conant Unit (2)

[Rall Woods State Natural Area \(1\)](#)

* Ramsey Lake State Park (2)

* Randolph County [State](#) Conservation Area

Rauchfuss Hill State Recreation Area (1)

Ray Norbut State Fish and Wildlife Area (1)

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- * Red Hills State Park (1)
- * Rend Lake Project Lands and Waters
- Sahara Woods State Fish and Wildlife Area (1)
- | Saline County [State](#) Conservation Area (1)
- * Sam Dale Lake Conservation Area (2)
- * Sam Parr State Park (1)
- Sand Ridge State Forest (2)
- Sandy Ford State Natural Area (1)
- Sanganois State Fish and Wildlife Area (2)
- * Sangchris Lake State Park (site will be closed to archery deer and turkey hunting during the second firearm deer season) (1) (2)
- * Shabbona Lake State Park (1)
- Shelbyville Lake – Corps of Engineers Managed Lands
- | Shelbyville [State](#) Wildlife Management Area (2)
- | Sielbeck Forest [State](#) Natural Area (1)
- Siloam Springs State Park (1) (2)
- * Siloam Springs State Park – Buckhorn Unit (resident hunters only) (1) (2)
- Skinner Farm State Habitat Area (1)
- * South Shore State Park (1)
- Spoon River State Forest (1)

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* Spring Lake State Fish and Wildlife Area (2)

Starved Rock State Park/Matthiessen State Park (no turkey hunting in the nature preserves; open only in areas where archery deer hunting is allowed other than nature preserves; must have valid archery deer permit in possession to hunt turkeys; open concurrent with site archery deer season) (1)

* Stephen A. Forbes State Park (2)

Tapley Woods State Natural Area (1)

Ten Mile Creek [State](#) Fish and Wildlife Area (2)

Trail of Tears State Forest (1)

Turkey Bluffs State Fish and Wildlife Area

Union County [State](#) Conservation Area (firing line unit – Statewide season, Public Hunting Area October 1 through October 31, reopens with the close of the Quota Zone goose season) (1)

* Washington County [State](#) Conservation Area (1)

Wayne Fitzgerald State Park (no hunting during controlled hunts as posted at the site) (1)

Weinberg-King State Park (1)

Weinberg-King State Park – Cecil White Unit

Weinberg-King State Park – Scripps Unit (resident hunters only) (1)

Weinberg-King State Park – Spunky Bottoms Unit (resident hunters only) (1)

Wildcat Hollow State Forest

Witkowsky State Wildlife Area (1)

(Source: Amended at 33 Ill. Reg. 13918, effective September 21, 2009)

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- 1) Heading of the Part: Illinois Estate and Generation-Skipping Transfer Tax Return
- 2) Code Citation: 86 Ill. Adm. Code 2000
- 3)

<u>Section Numbers:</u>	<u>Adopted Action:</u>
2000.100	Amendment
2000.110	New Section
- 4) Statutory Authority: Implementing Section 6(f) and authorized by Section 16 of the Illinois Estate and Generation-Skipping Transfer Tax Act [35 ILCS 405/6(f) and 16]
- 5) Effective Date of Amendments: September 17, 2009
- 6) Does this rulemaking contain an automatic repeal date? No
- 7) Does this rulemaking contain incorporations by reference? No
- 8) A copy of the adopted amendments, including any material incorporated by reference, is on file and is available for public inspection in the Attorney General's principal offices in Chicago (12th Floor, James R. Thompson Center) and Springfield (500 S. Second St.).
- 9) Notice of Proposal Published in Illinois Register: April 10, 2009; 33 Ill. Reg. 5263
- 10) Has JCAR issued a Statement of Objection to this rulemaking? No
- 11) Differences between proposal and final version: None
- 12) Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreements issued by JCAR? No agreements were made.
- 13) Will this rulemaking replace any emergency rulemaking currently in effect? No
- 14) Are there any amendments pending on this Part? No
- 15) Summary and Purpose of Amendments: Section 6 of Illinois Estate and Generation-Skipping Transfer Tax Act [35 ILCS 405/6] directs the Attorney General to prescribe by rule a return to be used in administration of the tax. For persons dying between 2006 and 2008, the Illinois exemption mirrored the federal exemption of \$2 million. In 2009, however, the federal exemption increases to \$3.5 million and the Illinois exemption

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remains fixed at \$2 million. Thus, a taxable estate of less than \$3.5 million and more than \$2 million will generate an Illinois estate tax with no corresponding federal estate tax and no duty to file a federal return. The amendment resolves the issue of attaching a copy of the federal estate tax return to the Illinois estate tax return in the situation in which no federal return is required to be filed and describes the schedules that must be filed in conjunction with the Illinois estate tax return.

- 16) Information and questions regarding these adopted amendments shall be directed to:

John Flores, Chief
Revenue Litigation Bureau North
Office of the Attorney General
100 West Randolph Street, 13th floor
Chicago, Illinois 60601

312/814-6153

The full text of the Adopted Amendments begins on the next page.

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TITLE 86: REVENUE
CHAPTER III: ATTORNEY GENERAL

PART 2000

ILLINOIS ESTATE AND GENERATION-SKIPPING TRANSFER TAX RETURN

Section

2000.100 Prescribed Return

2000.101 Form of Return (Repealed)

[2000.110](#) [Schedule of Assets](#)

2000.APPENDIX A Estate and Generation Skipping Transfer Tax Return (Repealed)

AUTHORITY: Implementing Section 6(f) and authorized by Section 16 of the Illinois Estate and Generation-Skipping Transfer Tax Act [35 ILCS 405/6(f) and 16].

SOURCE: Adopted at 14 Ill. Reg. 17183, effective November 1, 1990; amended at 31 Ill. Reg. 117, effective December 20, 2006; amended at 33 Ill. Reg. 13930, effective September 17, 2009.

Section 2000.100 Prescribed Return

All persons required by Section 6(c) of the Illinois Estate and Generation-Skipping Transfer Tax Act [35 ILCS 405/6(c)] to file a return pursuant to the Illinois Estate and Generation-Skipping Transfer Tax shall file a return. The Attorney General shall provide a form for the return, but other forms that contain the information prescribed in this Section will also be accepted. An acceptable form must contain the following information:

- a) Decedent's name;
- b) Date of death;
- c) Decedent's complete address;
- d) Decedent's Social Security Number;
- e) Name of Illinois county in which decedent resided or, if non-resident, Illinois county in which the greatest value of property is located;
- f) Name of personal representative or person filing return;

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- g) Complete address and telephone number of personal representative or person filing return;
- h) Name of preparer of return;
- i) Complete address and telephone number of preparer of return;
- j) Statement of whether a federal estate tax return is required to be filed and, if so, a copy of the federal return shall be attached to the Illinois return; if not, an itemized schedule of all assets, wherever located, in the form described in Section 2000.110, shall be attached;
- k) Statement of whether the decedent was an Illinois resident, a non-resident or an alien, and the year domicile was established;
- l) Statement of the due date of the return, any extension of the due date of the federal estate tax return, and, if extended, a copy of the federal return extension request;
- m) A certification that the return, and all accompanying schedules and attachments, are true and correct and that any copies of the federal return and its attachments are true and correct copies of the originals;
- n) Signature, title and date of signature of the personal representative;
- o) Signature and date of signature of the preparer;
- p) A statement of the total amount of Illinois estate tax due, which is an amount equal to the maximum tax credit calculable from the federal state death tax credit table in effect on December 31, 2001 (26 USCA 2011(b)(1) (West 2002));
- q) A statement of taxes that were paid to other states and that would have qualified for the federal state death tax credit as of December 31, 2001 in accordance with subsection (p) of this Section;
- r) A statement of the net tax remaining after deduction of qualifying taxes paid to other states;

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- s) A statement of the gross estate value for estate tax purposes of assets having taxable situs in Illinois;
- t) A statement of the gross estate assets' value for federal estate tax purposes wherever located;
- u) A statement of the percentage of Illinois situs assets to gross estate assets;
- v) A statement as to the amount of tax attributable to Illinois as determined by multiplying the total amount of Illinois estate tax due by the percentage of the Illinois situs assets to gross estate assets;
- w) A statement of the maximum allowable credit for state taxes pursuant to section 2604 of the Internal Revenue Code (26 USC 2604, Generation-Skipping Transfer Tax provisions). If any such credit is allowable, the federal Generation-Skipping Transfer Tax return with computations shall be attached;
- x) A statement of any allowable Generation-Skipping Transfer Tax credit for tax paid to other states;
- y) A statement of the difference between the total Generation-Skipping Transfer Tax state credit and the amount paid to other states;
- z) A statement of the total tax payable to Illinois;
- aa) A statement of any late filing penalty;
- bb) A statement of any late payment penalty;
- cc) A statement of any interest;
- dd) A statement of the total tax, penalties, and interest due;
- ee) A statement of all payments made and copies of receipts for payments;
- ff) A statement of any balance due;
- gg) A statement of any amount payable in installments under 35 ILCS 405/6;

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- hh) If any amounts are payable in installments, a statement of the gross value of the closely held business in Illinois, the gross value of all Illinois assets, the percentage of Illinois closely held business assets to all Illinois assets, and the result of applying the percentage to tax due Illinois.

(Source: Amended at 33 Ill. Reg. 13930, effective September 17, 2009)

Section 2000.110 Schedule of Assets

- a) Any itemized schedule of all assets must contain:
- 1) A schedule showing real estate owned individually by the decedent, with identification of any real estate valued under Section 2032A of the Internal Revenue Code (26 USC 2032A);
 - 2) A schedule showing stocks and bonds owned individually by the decedent with description, face amount of bonds, or number of shares;
 - 3) A schedule showing mortgages, notes and cash owned individually;
 - 4) A schedule showing insurance on the decedent's life;
 - 5) A schedule showing all jointly owned property of the decedent separated by interests held with a spouse as the only joint tenant and all other joint interests;
 - 6) A schedule showing all other miscellaneous property not reportable under any other schedule of the decedent;
 - 7) A schedule showing all transfers within three years before the decedent's death;
 - 8) A schedule showing powers of appointment held by the decedent;
 - 9) A schedule showing all annuities owned by the decedent;
 - 10) A schedule showing funeral expenses and expenses incurred in administering property subject to claims of the decedent's estate;

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- 11) A schedule showing debts of the decedent, and mortgages and liens;
 - 12) A schedule showing net losses during administration and expenses incurred in administering property not subject to claims;
 - 13) A schedule showing bequests and transfers to a surviving spouse;
 - 14) A schedule showing charitable, public, and similar gifts and bequests;
 - 15) A recapitulation of all schedules;
 - 16) A schedule of all adjusted taxable gifts as determined under the Gift and Estate Taxes [provisions of the Internal Revenue Code](#);
 - 17) A schedule showing the calculation of the tentative taxable estate by subtracting allowable deductions from the gross estate total of all schedules without adjusted taxable gifts;
 - 18) An explanation and documentation of the distribution of the estate, including, but not limited to, wills, trusts, and beneficiary designations, including the social security numbers of such transferees.
- b) All schedules provided as part of the itemized schedule of assets shall include documentation of values and amounts.
- c) The requirements of this [Section](#) may be satisfied by the filing of the most recent United States Estate (and Generation-Skipping Transfer) Tax Return published by the Internal Revenue Service or by [the filing of](#) any other form that contains the same information.

(Source: Added at 33 Ill. Reg. 13930, effective September 17, 2009)

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- 1) Heading of the Part: Approval of Voting Systems
- 2) Code Citation: 26 Ill. Adm. Code 204
- 3)

<u>Section Numbers:</u>	<u>Adopted Action:</u>
204.20	Amended
204.50	Amended
204.60	Amended
204.130	Amended
- 4) Statutory Authority: Implementing Section 23-15.1 and Articles 24A, 24B and 24C, and authorized by Section 1A-8(9) of the Election Code [10 ILCS 5/23-15.1, Art. 24A, Art. 24B, Art. 24C, 1A-8(9)]
- 5) Effective Date of Rulemaking: September 16, 2009
- 6) Does this rulemaking contain an automatic repeal date? No
- 7) Does this rulemaking contain incorporations by reference? No
- 8) A copy of the adopted amendments, including any material incorporated by reference, is on file in the agency's principal office and is available for public inspection.
- 9) Notice of Proposal Published in Illinois Register: 33 Ill. Reg. 3169; February 6, 2009
- 10) Has JCAR issued a Statement of Objection to this rulemaking? No
- 11) Differences between proposal and final version: No substantive changes were made to the proposed rulemaking.
- 12) Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreements issued by JCAR? Yes
- 13) Will this rulemaking replace any emergency rulemaking currently in effect? No
- 14) Are there any amendments pending on this Part? No
- 15) Summary and Purpose of Rulemaking: This adopted rulemaking is a consequence of Public Act 95-699 (Senate Bill 662). It relates to Sections 5/24A-16, 24B-16 and 24C-

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16. The Sections require the State Board of Elections to provide, by rule, a fee structure for equipment approvals. These fees will be for staff's review of the application, manuals and federal reports.

16) Information and questions regarding this adopted rulemaking shall be directed to:

Steven S. Sandvoss
General Counsel
State Board of Elections
1020 S. Spring St.
Springfield IL 62708

217/557-9939

The full text of the Adopted Amendments begins on the next page:

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TITLE 26: ELECTIONS

CHAPTER I: STATE BOARD OF ELECTIONS

PART 204

APPROVAL OF VOTING SYSTEMS

Section	
204.10	General Provisions
204.20	Definitions
204.30	Jurisdiction Profile
204.40	Criteria for Approval of Voting Systems
204.50	Application for Approval of Voting Systems
204.55	Provision of the Voting System Computer Code
204.60	Preliminary Determination and Review of the Proposed Voting Systems
204.70	Full Review Procedures
204.75	Review and Verification of Computer Code
204.80	Hearing to Consider Staff Review Report
204.90	Interim Approval of Voting Systems
204.100	Final Approval of Voting Systems
204.110	Refusal to Grant Approval of Voting Systems
204.120	Withdrawal of Approval of Voting Systems
204.130	Subsequent Modification of Voting Systems
204.140	Monitoring of Voting Systems
204.150	Voting Systems in Use on the Effective Date of this Part (Repealed)
204.160	Emergency Approval of a Voting System
204.170	Jurisdiction of Election Authority over Voting System's Personnel
204.180	Number of Voting Booths

AUTHORITY: Implementing Section 23-15.1 and Articles 24A, 24B and 24C, and authorized by Section 1A-8(9) of the Election Code [10 ILCS 5/23-15.1, Art. 24A, Art. 24B, Art. 24C, 1A-8(9)].

SOURCE: Adopted at 2 Ill. Reg. 25, p. 70, effective July 3, 1978; codified at 6 Ill. Reg. 7216; amended at 9 Ill. Reg. 10733, effective July 1, 1985; amended at 11 Ill. Reg. 18655, effective October 30, 1987; amended at 15 Ill. Reg. 18144, effective December 9, 1991; amended at 23 Ill. Reg. 3943, effective March 19, 1999; amended at 29 Ill. Reg. 13734, effective August 25, 2005; emergency amendment at 29 Ill. Reg. 14070, effective September 10, 2005, for a maximum of 150 days; emergency expired February 6, 2006; emergency amendment at 29 Ill. Reg. 15057,

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effective September 27, 2005, for a maximum of 150 days; emergency expired February 23, 2006; amended at 33 Ill. Reg. 13937, effective September 16, 2009.

Section 204.20 Definitions

"Applicant" is any individual, public official, public body, trust, partnership, committee, association, corporation, vendor, user or any other organization or group of persons seeking to use or market any voting system or voting system component.

"Commercial Off the Shelf" or "COTS" is any commercial, readily available hardware devices (such as printers or personal computers) or software products (such as operating systems, programming language compilers, or database management systems).

"Computer Code" consists of, but is not limited to, ballot counting source code, table structures, modules (compiled source code), program narratives, installation instructions, operations instructions, data flows, deployment platforms, compatibility considerations for hardware, software and firmware, and any other documentation relevant to the structure and operation of the ballot counting system.

"Preliminary Review" shall consist of a full technical and procedural review of the proposed voting system component and of no more than three different and separate preaudited ballot counting tests created by the Board's staff. The purpose of the review and testing is to determine the proposed system's ability to adhere to ballot management procedures required by statute and rule and to tabulate ballots and report results as prescribed by the Election Code [10 ILCS 5].

"User" is any individual, public official, public body, trust, partnership, committee, association, corporation or any other organization or group of persons owning, using, or contracting for the purchase or use of any voting system or voting system component involved in the election process.

"Vendor" is any individual, trust, partnership, committee, association, corporation or any other organization or group of persons contracting to supply any voting system or voting system component involved in the election process.

"Voting System" or "Electronic Voting System" means that combination of

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equipment and programs used in the casting, examination and tabulation of ballots and the cumulation and reporting of results by electronic means.

(Source: Amended at 33 Ill. Reg. 13937, effective September 16, 2009)

Section 204.50 Application for Approval of Voting Systems

- a) In order to obtain Board approval of a voting system, a written application must be made to the Board. The application shall, at a minimum, contain the following:
 - 1) A general description of the proposed system.
 - 2) The description, nomenclature, specifications and intended use or uses of all voting system components comprising the proposed voting system.
 - 3) A description of all contemplated and possible uses of the voting system software components.
 - 4) A description of support services provided for the proposed voting system.
 - 5) Applicant's primary address, telephone number and e-mail address and the names, addresses, e-mail addresses and telephone numbers of individuals and/or corporations who will be responsible for marketing the proposed voting system.
 - 6) The time period in which the applicant has actively engaged in marketing the proposed voting system.
 - 7) A complete list of election jurisdictions currently using the proposed voting system, including the size of the jurisdiction and the names and addresses of the election authorities.
 - 8) A complete list of jurisdictions currently contracting with the applicant for voting system components.
 - 9) A complete list of election jurisdictions in Illinois in which the applicant is seeking to market the proposed voting system.

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- 10) If known, a complete list of election jurisdictions in Illinois in which the applicant proposes to experimentally use the proposed voting system.

b) Application Fee

- 1) The non-refundable application fee shall be allocated pursuant to the following:

<u>A)</u>	<u>New system approval</u>	<u>\$750</u>
<u>B)</u>	<u>Software modification of a previously approved system</u>	<u>\$500</u>
<u>C)</u>	<u>Hardware modification of a previously approved system</u>	<u>\$250</u>
<u>D)</u>	<u>Hardware modification limited to "Commercial Off the Shelf" hardware for a previously approved system such as printers and personal computers</u>	<u>\$100</u>

- 2) Failure to submit the application fee will cause the application to be incomplete and prevent the approval of the voting system or system modification. No State testing may begin prior to the Board's receipt of the fee and a complete application. Staff will notify the applicant in writing of the receipt of the application and the fee. Any incomplete application or incorrect fee will be returned to the applicant with a request for correction.

- cb) The Computer Code as defined in Section 204.20 shall be submitted as part of the completed application for approval.

- de) No vendor or user shall offer to sell, lease, loan, give or otherwise supply to any user or potential user any voting system or voting system component, and no user shall place in operation any voting system or voting system component, without first submitting to the Illinois State Board of Elections the application for approval identified in subsection (a). A completed application for approval shall be submitted not less than six months prior to any election in which a voting system or support component is proposed for use.

- ed) Failure to provide the application in accordance with subsection (cb) shall result in the denial of any application or request for emergency approval of an electronic

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voting system that might otherwise be appropriate under Section 204.160 of this Part.

- f) The reasonable expenses incurred, except those expenses related to escrow of submitted Computer Code, by the State Board of Elections in conducting the approval process of the voting system shall be borne by the applicant for approval of the voting system or system component. Expenses for which the applicant shall be liable shall be limited to goods and materials necessary for the review process, necessary travel in accord with State travel regulations (80 Ill. Adm. Code 2800), use of contract consultants, and the actual cost of any computer support. Expenses shall be documented and submitted to the applicant at the end of full review prior to interim approval as defined in Section 204.90, and within 10 days after the completion of any testing conducted between interim and final approval as defined in Section 204.100. Payment of the costs shall be made by the applicant within 10 days after receipt. The Board shall not grant interim approval or full approval of a voting system or system component until the applicant has fully satisfied the monetary obligation incurred by the Board during the review process. Reasonable expenses are those customary and usual charges for goods and services of value and quality acceptable in the computer science industry. Board staff shall determine in the first instance what expenses are reasonable, and an applicant who believes that the staff determination is incorrect may ask for review of the determination by the State Board of Elections.

(Source: Amended at 33 Ill. Reg. 13937, effective September 16, 2009)

Section 204.60 Preliminary Determination and Review of the Proposed Voting Systems

- a) Upon the Board's receipt of a completed application requesting approval of a voting system and the appropriate application fee, a preliminary determination shall be made as to whether the proposed voting system has the capability of fulfilling the criteria prescribed in Section 204.40 ~~of this Part~~.
- b) If the preliminary determination indicates that the proposed voting system appears to fulfill the criteria prescribed in Section 204.40 ~~of this Part~~, then the staff of the Board will conduct a preliminary review of the proposed voting system.
- c) Insofar as practical, the preliminary review of the proposed voting system will consist of the creation of a pre-audited ballot counting test by the Board's staff that will be delivered to the applicant. The applicant shall tabulate the ballots

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contained within the pre-audited ballot counting test and generate, at a minimum, individual precinct result total reports and cumulative result total reports ~~that~~^{which}, along with the pre-audited ballot counting test, will be delivered to the Board. The Board's staff shall review the reports submitted by the applicant and submit a preliminary review findings and conclusions report to the Board and the applicant.

- d) If the preliminary review report indicates that the proposed voting system appears to demonstrate the capability to fulfill the criteria prescribed in Section 204.40, the staff of the Board shall continue with the full review process to demonstrate satisfactory performance of the proposed voting system as prescribed in Section 204.70. A system fails preliminary review when it fails to fulfill the criteria of Section 204.40 by the conclusion of the third ballot counting test.
- e) If the preliminary review report indicates that the proposed system fails to demonstrate the capability to fulfill the criteria prescribed in Section 204.40, the staff of the Board shall cease any further review of the system. Any application for system approval offered by an applicant who has previously failed during the preliminary review or full review process shall not be considered by staff for a period of one year from the date of determination by the Board.

(Source: Amended at 33 Ill. Reg. 13937, effective September 16, 2009)

Section 204.130 Subsequent Modification of Voting Systems

Any modification or change in the description, nomenclature, specifications, characteristics or use of any voting system components that relates to the election process shall constitute a change in the approved voting system and shall require submission and approval of an application and the appropriate application fee, as prescribed in Section 204.50, and submission of the Computer Code for the modification or change. However, modifications or changes that normally occur as a result of the election process, which shall include but not be limited to object code programming, instruction manual revisions, and ballot printing, shall not constitute a modification or change in the approved system.

(Source: Amended at 33 Ill. Reg. 13937, effective September 16, 2009)

JOINT COMMITTEE ON ADMINISTRATIVE RULES
ILLINOIS GENERAL ASSEMBLY

STATEMENT OF OBJECTION TO AND
FILING PROHIBITION OF PROPOSED RULEMAKING

DEPARTMENT OF HUMAN SERVICES

Heading of the Part: Autism Research Fund Scientific Review Committee

Code Citation: 59 Ill. Adm. Code 270

Section Numbers: 270.10
270.20
270.30
270.40

Date Originally Published in the Illinois Register: 5/29/09
33 Ill. Reg. 7054

At its meeting on September 15, 2009, the Joint Committee on Administrative Rules voted to object to the above-proposed rulemaking and prohibit its filing with the Secretary of State. The Committee found that the adoption of this rulemaking would constitute a serious threat to the public interest and welfare. The reason for the Objection and Prohibition is as follows:

The rulemaking lacks grant application procedures, grant issuance guidelines and standards for DHS' determination not to act on a Committee recommendation. DHS and the Committee will be exercising agency discretion in disbursing these funds. Section 5-20 of the IAPA requires agencies to establish by rule standards by which the agency exercises its discretionary powers. The adoption of this rulemaking without proper grant procedures would constitute a threat to the public interest and welfare in that it could lead to inequitable awarding of grant funds.

The proposed rulemaking may not be filed with the Secretary of State or enforced by the Department of Human Services for any reason following receipt of this certification and statement by the Secretary of State for as long as the Filing Prohibition remains in effect.

JOINT COMMITTEE ON ADMINISTRATIVE RULES
ILLINOIS GENERAL ASSEMBLY

STATEMENT OF OBJECTION TO AND
FILING PROHIBITION OF PROPOSED RULEMAKING

DEPARTMENT OF HUMAN SERVICES

Heading of the Part: Temporary Assistance for Needy Families

Code Citation: 89 Ill. Adm. Code 112

Section Numbers:

112.9	112.151
112.65	112.152
112.69	112.153
112.127	112.305
112.150	112.307

Date Originally Published in the Illinois Register: 4/10/09
33 Ill. Reg. 5201

At its meeting on September 15, 2009, the Joint Committee on Administrative Rules voted to object to the above-proposed rulemaking and prohibit its filing with the Secretary of State. The Committee found that the adoption of this rulemaking would constitute a serious threat to the public interest and welfare. The reason for the Objection and Prohibition is as follows:

The Department lacks specific statutory authority to expand TANF in a way that will subject the State to unknown additional costs. The Department's inability to provide an estimated cost, coupled with an FY10 reduction in available TANF funds, adds to a concern that DHS may not be able to absorb the costs resulting from this rulemaking without jeopardizing services to other DHS clients. The adoption of this rulemaking would constitute a threat to the public interest and welfare because the lack of funds to cover the costs of a major program expansion may result in funds being rerouted from other public assistance recipients.

The proposed rulemaking may not be filed with the Secretary of State or enforced by the Department of Human Services for any reason following receipt of this certification and statement by the Secretary of State for as long as the Filing Prohibition remains in effect.

JOINT COMMITTEE ON ADMINISTRATIVE RULES
ILLINOIS GENERAL ASSEMBLY

STATEMENT OF OBJECTION TO AND
FILING PROHIBITION OF PROPOSED RULEMAKING

DEPARTMENT OF HUMAN SERVICES

Heading of the Part: General Assistance

Code Citation: 89 Ill. Adm. Code 114

Section Numbers: 114.9 114.251
114.223 114.252
114.250 114.408

Date Originally Published in the Illinois Register: 4/10/09
33 Ill. Reg. 5228

At its meeting on September 15, 2009, the Joint Committee on Administrative Rules voted to object to the above-proposed rulemaking and prohibit its filing with the Secretary of State. The Committee found that the adoption of this rulemaking would constitute a serious threat to the public interest and welfare. The reason for the Objection and Prohibition is as follows:

The Department lacks specific statutory to expand GA in a way that will subject the State to unknown additional costs. The Department's inability to provide an estimated cost, coupled with an overall reduction in FY10 funding, adds to a concern that DHS may not be able to absorb the costs resulting from this rulemaking without jeopardizing services to other DHS clients. The adoption of this rulemaking would constitute a threat to the public interest and welfare because lack of funds to cover the costs of a major program expansion may result in funds being rerouted from other public assistance recipients.

The proposed rulemaking may not be filed with the Secretary of State or enforced by the Department of Human Services for any reason following receipt of this certification and statement by the Secretary of State for as long as the Filing Prohibition remains in effect.

JOINT COMMITTEE ON ADMINISTRATIVE RULES
ILLINOIS GENERAL ASSEMBLY

SECOND NOTICES RECEIVED

The following second notices were received by the Joint Committee on Administrative Rules during the period of September 15, 2009 through September 21, 2009 and have been scheduled for review by the Committee at its October 14, 2009 meeting. Other items not contained in this published list may also be considered. Members of the public wishing to express their views with respect to a rulemaking should submit written comments to the Committee at the following address: Joint Committee on Administrative Rules, 700 Stratton Bldg., Springfield IL 62706.

<u>Second Notice Expires</u>	<u>Agency and Rule</u>	<u>Start Of First Notice</u>	<u>JCAR Meeting</u>
10/30/09	<u>Teachers' Retirement System</u> , The Administration and Operation of the Teachers' Retirement System (80 Ill. Adm. Code 1650)	6/19/09 33 Ill. Reg. 8160	10/14/09
10/30/09	<u>Illinois Racing Board</u> , Jockeys, Apprentices, Jockey Agents, and Valets (11 Ill. Adm. Code 1411)	6/19/09 33 Ill. Reg. 8153	10/14/09
10/30/09	<u>Department of Revenue</u> , Retailers' Occupation Tax (86 Ill. Adm. Code 130)	7/6/09 33 Ill. Reg. 9252	10/14/09
10/31/09	<u>Department on Aging</u> , Community Care Program (89 Ill. Adm. Code 240)	4/24/09 33 Ill. Reg. 5948	10/14/09
11/4/09	<u>State Board of Education</u> , Public Schools Evaluation, Recognition and Supervision (23 Ill. Adm. Code 1)	6/12/09 33 Ill. Reg. 7587	10/14/09
11/4/09	<u>State Board of Education</u> , New Teacher Induction and Mentoring (23 Ill. Adm. Code 65)	5/1/09 33 Ill. Reg. 6250	10/14/09
11/4/09	<u>State Board of Education</u> , Health/Life Safety Code for Public Schools (23 Ill. Adm. Code 180)	7/6/09 33 Ill. Reg. 9279	10/14/09

JOINT COMMITTEE ON ADMINISTRATIVE RULES
ILLINOIS GENERAL ASSEMBLY

SECOND NOTICES RECEIVED

11/4/09	<u>State Board of Education</u> , Driver Education (23 Ill. Adm. Code 252)	7/6/09 33 Ill. Reg. 9287	10/14/09
11/4/09	<u>State Board of Education</u> , Special Education Facilities Under Section 14-7.02 of the School Code (23 Ill. Adm. Code 401)	7/6/09 33 Ill. Reg. 9299	10/14/09
11/4/09	<u>State Board of Education</u> , Providers of Supplemental Educational Services (23 Ill. Adm. Code 675)	7/6/09 33 Ill. Reg. 9305	10/14/09
11/4/09	<u>State Board of Education</u> , Pupil Transportation Reimbursement (23 Ill. Adm. Code 120)	7/6/09 33 Ill. Reg. 9265	10/14/09
11/4/09	<u>Department of Revenue</u> , Retailers' Occupation Tax (86 Ill. Adm. Code 130)	7/31/09 33 Ill. Reg. 11230	10/14/09
11/4/09	<u>Department of Revenue</u> , Income Tax (86 Ill. Adm. Code 100)	7/31/09 33 Ill. Reg. 11201	10/14/09
11/4/09	<u>Carnival Amusement Safety Board</u> , Carnival and Amusement Ride Safety Act (56 Ill. Adm. Code 6000)	2/6/09 33 Ill. Reg. 1836	10/14/09

JOINT COMMITTEE ON ADMINISTRATIVE RULES
ILLINOIS GENERAL ASSEMBLYSTATEMENT OF OBJECTION
TO PROPOSED RULEMAKING

DEPARTMENT OF INSURANCE

Heading of the Part: Preferred Provider Programs

Code Citation: 50 Ill. Adm. Code 2051

Section Numbers:

2051.200	2051.280	2051.340
2051.210	2051.280	2051.350
2051.220	2051.290	2051.360
2051.230	2051.300	2051.370
2051.240	2051.300	2051.APPENDIX A
2051.250	2051.310	2051.APPENDIX B
2051.260	2051.320	2051.APPENDIX C
2051.270	2051.330	2051.APPENDIX D
		2051.APPENDIX E

Date Originally Published in the Illinois Register: 2/6/09
33 Ill. Reg. 1927

At its meeting on 9/15/09, the Joint Committee on Administrative Rules objected to the Department of Insurance's rulemaking titled Preferred Provider Programs (50 Ill. Adm. Code 2051; 33 Ill. Reg. 1927) because the rulemaking may have a significant negative economic impact on the affected industry.

Failure of the agency to respond within 90 days after receipt of the Statement of Objection shall constitute withdrawal of this proposed rulemaking. The agency's response will be placed on the JCAR agenda for further consideration.

JOINT COMMITTEE ON ADMINISTRATIVE RULES
ILLINOIS GENERAL ASSEMBLY

STATEMENT OF OBJECTION TO
PEREMPTORY RULEMAKING

DEPARTMENT OF HUMAN SERVICES

Heading of the Part: Collections and Recoveries

Code Citation: 89 Ill. Adm. Code 165

Section Numbers: 165.44
165.82

Date Originally Published in the Illinois Register: 7/31/09
33 Ill. Reg. 11336

At its meeting on September 15, 2009, the Joint Committee on Administrative Rules objected to the Department of Human Services' use of peremptory rulemaking to amend its rules titled Collections and Recoveries (89 Ill. Adm. Code 165; 33 Ill. Reg. 11336). The underlying federal law was enacted 6/18/08, which gave DHS more than adequate time to adopt this change through regular rulemaking. Preclusion of the use of regular rulemaking is one of the requirements for use of peremptory rulemaking under Section 5-50 of the Illinois Administrative Procedure Act.

Failure of the agency to respond within 90 days after receipt of the Statement of Objection shall be deemed a refusal. The agency's response will be placed on the JCAR agenda for further consideration.

PROCLAMATIONS

2009-280**Cyber Security Awareness Month**

- WHEREAS, citizens, schools, libraries, businesses and other organizations use the Internet for a variety of tasks, including keeping in contact with family and friends, managing personal finances, performing research, enhancing education and conducting business; and
- WHEREAS, critical sectors are increasingly reliant on information systems to support financial services, energy, telecommunications, transportation, utilities, health care, and emergency response systems; and
- WHEREAS, Internet users and our information infrastructure face an increasing threat of malicious cyber attack, loss of privacy from spyware and adware and significant financial and personal privacy losses due to identity theft and fraud; and
- WHEREAS, the Multi-State Information Sharing and Analysis Center was established in January 2003 to provide a collaborative mechanism to help states and local governments enhance cyber security and provide a comprehensive approach to help enhance their security; and
- WHEREAS, maintaining the security of cyberspace is a shared responsibility in which each of us has a critical role, and awareness of computer security essentials will improve the security of Illinois' information infrastructure and economy; and
- WHEREAS, the United States Department of Homeland Security, the Multi-State Information Sharing and Analysis Center, the National Cyber Security Alliance, and the National Association of State Chief Information Officers have declared October as National Cyber Security Awareness Month:

THEREFORE, I, Pat Quinn, Governor of the State of Illinois, do hereby proclaim October 2009 as **CYBER SECURITY AWARENESS MONTH** in Illinois, and encourage all citizens to learn about cyber security and put that knowledge into practice in their homes, schools, workplaces, and businesses.

Issued by the Governor September 11, 2009

Filed by the Secretary of State September 18, 2009

2009-281**Earth Science Week**

PROCLAMATIONS

WHEREAS, the earth sciences, especially geology, are integral to finding, developing, and conserving the water, mineral, and energy resources needed for modern society; and

WHEREAS, the earth sciences provide the basis for preparing for and mitigating the effects of natural hazards such as floods, landslides, earthquakes, volcanic eruptions, sinkholes, and coastal erosion; and

WHEREAS, the earth sciences are crucial to our understanding of environmental and ecological issues ranging from air and water quality to waste disposal; and

WHEREAS, knowledge about geological factors regarding earth resources, hazards, and the environment are vital to land management and land use decisions at local, state, regional, national, international, and global levels; and

WHEREAS, study of the earth sciences contributes critically important information to our understanding of the natural world; and

WHEREAS, Earth Science Week, observed annually during the second full week of October, is an opportunity to seek a greater understanding and appreciation of the value of earth science research and its application and relevance to our daily lives, as well as for science teachers at all levels throughout the Land of Lincoln to undertake lessons and activities with their students directed toward the study of earth science:

THEREFORE, I, Pat Quinn, Governor of the State of Illinois, do hereby proclaim October 11-17, 2009 as **EARTH SCIENCE WEEK** in Illinois.

Issued by the Governor September 11, 2009

Filed by the Secretary of State September 18, 2009

2009-282**Infection Prevention Week**

WHEREAS, protecting the health of Americans includes providing every citizen with access to safe and effective healthcare; and

WHEREAS, Infection Preventionists are devoted to patient and healthcare worker safety and are committed to reducing the risk and occurrence of healthcare-associated infections; and

PROCLAMATIONS

WHEREAS, the prevention of healthcare-associated infections is instrumental in achieving this goal; and

WHEREAS, every year Americans make more than 1 billion visits to their doctors' offices, emergency rooms, and hospital outpatient departments and more than 37 million are admitted to hospitals, with many undergoing medical procedures that have a risk of infectious complications; and

WHEREAS, healthcare-associated infections increase morbidity and mortality and add a significant financial burden to the cost of healthcare; and

WHEREAS, the Association for Professionals in Infection Control and Epidemiology (APIC), representing more than 12,000 Infection Prevention and Control Professionals, sponsors International Infection Prevention and Control Week with this year's theme being, "Infection Prevention is Everyone's Business":

THEREFORE, I, Pat Quinn, Governor of the State of Illinois, do hereby proclaim October 18 - 24, 2009 as **INFECTION PREVENTION WEEK** in Illinois, and encourage all citizens to join in this worthy effort to prevent healthcare-associated infections.

Issued by the Governor September 11, 2009

Filed by the Secretary of State September 18, 2009

2009-283**Lights on Afterschool Day**

WHEREAS, the education of our children is critically important to their future success. The skills they learn and develop today will prepare them for their careers tomorrow; and

WHEREAS, that is why it is critically important that children have access to all the resources they need to succeed. Head Start and afterschool programs are just two terrific opportunities available for improving the academic achievement of students; and

WHEREAS, in addition to supporting their education, afterschool programs also keep our children off the streets and out of trouble. More than 28 million children in the U.S. have parents who work outside the home, and more than 14 million children have no place to go after school; and

WHEREAS, of the school-age children in Illinois, approximately 26 percent are unsupervised after school; and

PROCLAMATIONS

WHEREAS, thanks to afterschool programs, many parents do not have to worry about where their children are, who they are associating with, and what they are doing; and

WHEREAS, by providing students a safe and healthy environment for them to learn and helping working parents, afterschool programs strengthen our communities; and

WHEREAS, the State of Illinois has provided significant leadership in the area of community involvement in the education and well-being of our youth, grounded in the principle that quality afterschool programs are key to helping our children become successful adults; and

WHEREAS, on October 22, communities all across Illinois will celebrate Lights on Afterschool, a nationwide event organized each year to recognize afterschool programs and promote their benefits:

THEREFORE, I, Pat Quinn, Governor of the State of Illinois, do hereby proclaim October 22, 2009 as **LIGHTS ON AFTERSCHOOL DAY** in Illinois, in recognition of the importance of quality afterschool programs in the lives of children, families and communities.

Issued by the Governor September 11, 2009

Filed by the Secretary of State September 18, 2009

2009-284**Operation Snowball Month**

WHEREAS, Operation Snowball is a program that encourages youth to stay drug-free by providing them with experiential learning; and

WHEREAS, each year, over 50,000 youth from more than 130 chapters participate in Operation Snowball, which is partnered with the Illinois Alcoholism and Drug Dependence Association; and

WHEREAS, the program focuses on prevention messages that aim primarily at the high school age, because many students of this age understand the idea behind prevention; and

WHEREAS, group learning sessions present facts about drug and alcohol use and help students develop their own ideas about substances before they are faced with situations in their future lives; and

PROCLAMATIONS

WHEREAS, Operation Snowball is continually expanding to include people of all ages into their program by creating Snowflake for junior high students and Snowflurry for elementary students, teaching youth the importance of living a drug-free healthy lifestyle at an early age; and

WHEREAS, there is also a program for families – Blizzards – Snocap for senior citizens, and Segue for college students, helping to serve as role models for the younger youth; and

WHEREAS, Operation Snowball gives young adults the opportunity to enhance their leadership skills as well as maintain their drug-free lifestyle by mentoring younger youth and motivating them to live by the same standards:

THEREFORE, I, Pat Quinn, Governor of the State of Illinois, do hereby proclaim October 2009 as **OPERATION SNOWBALL MONTH** in Illinois, and encourage all youth and young adults to maintain a healthy, substance-free lifestyle.

Issued by the Governor September 11, 2009

Filed by the Secretary of State September 18, 2009

2009-285**Put the Brakes on Fatalities Day**

WHEREAS, more than 42,000 Americans are killed in automobile accidents every year; and

WHEREAS, although some of the accidents are caused by mechanical failures, many are tragically caused by human error. Some of the contributing factors of accidents include drinking, speeding, and general reckless driving; and

WHEREAS, driving is not a game. It is a dangerous activity that has taken the lives of countless brothers, sisters, moms, dads, relatives, and friends; and

WHEREAS, for that reason, it is the obligation of each and every one of us to drive responsibly. Furthermore, we ought to drive with vigilance for our own protection; and

WHEREAS, it is important for drivers to focus on the road and observe speed limits. Just following these two safety precautions will significantly lower the risks of an automobile accident; and

PROCLAMATIONS

WHEREAS, some additional tips for safe driving include performing routine car maintenance, watching for blind spots and wearing a seatbelt. It is also imperative that drivers never operate an automobile while under the influence of alcohol or other mind-altering drugs; and

WHEREAS, not only is it wrong to drive in such a state, it is also against the law. The State of Illinois fully prosecutes anyone caught driving under the influence; and

WHEREAS, on October 10, as part of the Eighth Annual Put the Brakes on Fatalities Day, events will be held throughout Illinois to address how critically important it is to always drive safely and alertly and the consequences of not doing so:

THEREFORE, I, Pat Quinn, Governor of the State of Illinois, do hereby proclaim October 10, 2009 as **PUT THE BRAKES ON FATALITIES DAY** in Illinois, and urge all citizens to adopt safe driving habits in an effort to reduce automobile accidents that kill thousands every year in our state and throughout the country.

Issued by the Governor September 11, 2009

Filed by the Secretary of State September 18, 2009

2009-286**Rett Syndrome Awareness Month**

WHEREAS, Rett syndrome is a debilitating neurological disorder, caused by mutations in the gene MECP2, located on the X chromosome, that is diagnosed almost exclusively in females; and

WHEREAS, Rett syndrome, which affects approximately 1 in every 10,000 to 23,000 female births, was originally described by Dr. Andreas Rett of Austria in 1966; and

WHEREAS, infants with Rett syndrome often avoid detection until 6–18 months due to a relatively normal appearance and some developmental progress, but then this brief period of developmental progress is followed by stagnation and regression of previously acquired skills; and

WHEREAS, Rett syndrome causes problems in brain function that are responsible for cognitive, sensory, emotional, motor and autonomic function. These can include learning, speech, sensory sensations, mood, movement, breathing, cardiac function, and even chewing, swallowing, and digestion; and

PROCLAMATIONS

WHEREAS, currently no cure for exists for Rett syndrome, but many symptoms of the disorder can be managed with medications and occupational, speech, and physical therapy; and

WHEREAS, Rett syndrome remains little known in the general public, and even within the medical community; and

WHEREAS, Rett syndrome presents many challenges, but with support, therapy and assistance, those with the syndrome can benefit from school and community activities well into middle age and beyond; and

WHEREAS, the International Rett Syndrome Foundation (IRSF) is non-profit corporation dedicated to funding research for treatments and a cure for Rett syndrome while enhancing the overall quality of life for those living with Rett syndrome by providing information, programs, and services; and

WHEREAS, October has been designated by the IRSF as Rett Syndrome Awareness Month. Throughout the month, the organization and its state and local affiliates will hold events designed to raise public awareness of Rett syndrome and provide support for individuals and families coping with the daily challenges of living with the disorder:

THEREFORE, I, Pat Quinn, Governor of the State of Illinois, do hereby proclaim October 2009 as **RETT SYNDROME AWARENESS MONTH** in Illinois, to raise awareness of this disorder, to recognize the families affected by Rett syndrome, and in support of the important work of the International Rett Syndrome Foundation.

Issued by the Governor September 11, 2009

Filed by the Secretary of State September 18, 2009

2009-287

Polish American Heritage Month

WHEREAS, since 1608, when the first Polish settlers arrived at Jamestown, Virginia, Polish people have been an important part of America's history and culture; and

WHEREAS, in October 2009, Polish Americans will mark the 28th Anniversary of the founding of Polish American Heritage Month, a national celebration of Polish history, culture and pride; and

PROCLAMATIONS

- WHEREAS, during 2009, the Polish American community will also mark the 230th Anniversary of the death of General Casimir Pulaski, Father of the American Cavalry, and the 70th Anniversary of the Invasion of Poland, which sparked the outbreak World War II; and
- WHEREAS, during Polish American Heritage Month, Illinois residents of Polish descent celebrate their heritage of love of democracy, humanitarianism, and appreciation of the arts and education; and
- WHEREAS, there are about 10 million Americans of Polish descent, with more than 1 million living in Illinois; and
- WHEREAS, the City of Chicago boasts the largest Polish population of any city outside of Poland, with approximately 185,000 Polish language speakers; and
- WHEREAS, the influence of Chicago's Polish community is demonstrated by the numerous Polish American organizations, and it is fitting that we take the time to recognize the contributions that Polish Americans have made to our culture, economy and civic life; and
- WHEREAS, it is essential that we, as Illinoisans and Americans, learn about the history and culture of the many ethnic groups that make up our nation's diverse population:

THEREFORE, I, Pat Quinn, Governor of the State of Illinois, do hereby proclaim October 2009 as **POLISH AMERICAN HERITAGE MONTH** in Illinois, and encourage all citizens to educate themselves about the many contributions of this important and diverse component of our state.

Issued by the Governor September 11, 2009

Filed by the Secretary of State September 18, 2009

2009-288**Deaf Awareness Day**

- WHEREAS, according to the U.S. Census Bureau, there are more than 500,000 persons in Illinois who suffer from hearing loss; and
- WHEREAS, in today's society, people who are deaf or have a significant hearing loss should be able to have options to choose from when making important life-changing decisions; and

PROCLAMATIONS

- WHEREAS, it is in the interest of the State of Illinois to encourage the full participation of American citizens with sensory disabilities in our economy by fostering the employment of, and promoting housing and recreational options for, people who are deaf, thus maximizing their opportunities for a productive life in the community of their choice; and
- WHEREAS, the Illinois Department of Human Services' Division of Rehabilitation Services (DRS) is the state's lead agency serving individuals with disabilities and provides a variety of services for persons who are deaf or hard of hearing; and
- WHEREAS, DRS works in partnership with people with disabilities and their families to assist them in making informed choices to achieve full community participation through employment, education, and independent living opportunities; and
- WHEREAS, this year, the Division of Rehabilitation Services' Services for the Deaf and Hard of Hearing, in cooperation with the Illinois Deaf and Hard of Hearing Commission, will celebrate the 15th Annual Deaf Awareness Day with an event at the James R. Thompson Center in Chicago; and
- WHEREAS, as part of this celebration, more than 40 exhibitors will distribute information about the services and programs they represent that serve and can be of benefit to deaf, hard of hearing, late deafened, and deaf-blind individuals; and
- WHEREAS, among the exhibitors will be colleges, community rehabilitation programs, government agencies, social and recreational groups, advocacy groups, and business that serve the community; and
- WHEREAS, it is also highly appropriate and necessary to publicize the abilities and potential of our fellow citizens who are deaf, or severely hearing impaired, and to recognize these people as examples of courage, hope, determination, and achievement for other individuals who are deaf; and
- WHEREAS, the celebration of the 15th Annual Deaf Awareness Day provides an opportunity to draw attention and acclaim to people who are deaf and hard of hearing and to recognize and honor the contributions of deaf and hard of hearing people:
- THEREFORE, I, Pat Quinn, Governor of the State of Illinois, do hereby proclaim September 16, 2009 as **DEAF AWARENESS DAY** in Illinois, and encourage all citizens to recognize the contributions of the deaf and hard of hearing community to our state.

Issued by the Governor September 15, 2009

PROCLAMATIONS

Filed by the Secretary of State September 18, 2009

2009-289

National POW/MIA Recognition Day

WHEREAS, many loyal and brave Americans who have served in the wars of this nation were captured by the enemy or listed as missing in action while performing their duties; and

WHEREAS, despite strict rules and regulations set forth by international codes, American Prisoners of War have often suffered unconscionable treatment and many have died as a result of cruel and inhumane acts by their enemy captors; and

WHEREAS, it is important that we recognize the sacrifices of American Prisoners of War and those missing in action; and

WHEREAS, every year on National POW/MIA Recognition Day, the third Friday in September, we honor the brave and patriotic Americans who were held as prisoners of war, and we remember those who are still missing in action. For their valor and selfless devotion to protect the country they love, our Nation owes them a debt we can never fully repay; and

WHEREAS, on this day we underscore our commitment and pledge to those who are still missing in action and to their families that we will not rest until we have achieved the fullest possible accounting for every member of our Armed Forces missing in the line of duty; and

WHEREAS, to observe this important day, the National League of Families POW/MIA flag is flown across our country as a solemn reminder of our Nation's enduring obligation and promise to our courageous service members who remain missing and a tribute to those who have been imprisoned while serving their country in conflicts around the world:

THEREFORE, I, Pat Quinn, Governor of the State of Illinois, do hereby proclaim September 18, 2009 as in Illinois, and call upon all citizens to join me in honoring and remembering all former American prisoners of war and those missing in action for their valiant service to our Nation.

Issued by the Governor September 17, 2009

Filed by the Secretary of State September 18, 2009

ILLINOIS ADMINISTRATIVE CODE
Issue Index - With Effective Dates

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