

1 AN ACT concerning State government.

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

4 Section 5. The Illinois State Police Law of the Civil
5 Administrative Code of Illinois is amended by changing Section
6 2605-53 as follows:

7 (20 ILCS 2605/2605-53)

8 Sec. 2605-53. 9-1-1 system; sexual assault and sexual
9 abuse.

10 (a) The Office of the Statewide 9-1-1 Administrator, in
11 consultation with the Office of the Attorney General and the
12 Illinois Law Enforcement Training Standards Board, shall:

13 (1) develop comprehensive guidelines for
14 evidence-based, trauma-informed, victim-centered handling
15 of sexual assault or sexual abuse calls by Public Safety
16 Answering Point telecommunicators; and

17 (2) adopt rules and minimum standards for an
18 evidence-based, trauma-informed, victim-centered training
19 curriculum for handling of sexual assault or sexual abuse
20 calls for Public Safety Answering Point telecommunicators
21 ("PSAP").

22 (a-5) Within one year after June 3, 2021 (the effective
23 date of Public Act 102-9), the Office of the Statewide 9-1-1

1 Administrator, in consultation with the Statewide 9-1-1
2 Advisory Board, shall:

3 (1) develop comprehensive guidelines for training on
4 emergency dispatch procedures, including, but not limited
5 to, ~~emergency medical dispatch,~~ and the delivery of 9-1-1
6 services and professionalism for public safety
7 telecommunicators and public safety telecommunicator
8 supervisors; and

9 (2) adopt rules and minimum standards for continuing
10 education on emergency dispatch procedures, including, but
11 not limited to, ~~emergency medical dispatch,~~ and the
12 delivery of 9-1-1 services and professionalism for public
13 safety telecommunicators and public safety
14 telecommunicator Supervisors.

15 (a-10) The Office of the Statewide 9-1-1 Administrator may
16 as necessary establish by rule appropriate testing and
17 certification processes consistent with the training required
18 by this Section.

19 (a-15) Beginning January 1, 2026, all 9-1-1
20 telecommunicators who provide dispatch for emergency medical
21 conditions shall be required to be trained, utilizing the most
22 current nationally recognized emergency cardiovascular care
23 guidelines, in high-quality telecommunicator cardiopulmonary
24 resuscitation (T-CPR). The instruction shall incorporate
25 recognition protocols for out-of-hospital cardiac arrests
26 (OHCA), compression-only cardiopulmonary resuscitation (CPR)

1 instructions for callers or bystanders, and continuing
2 education.

3 (b) Training requirements:

4 (1) Newly hired PSAP telecommunicators must complete
5 the sexual assault and sexual abuse training curriculum
6 established in subsection (a) of this Section prior to
7 handling emergency calls.

8 (2) All existing PSAP telecommunicators shall complete
9 the sexual assault and sexual abuse training curriculum
10 established in subsection (a) of this Section within 2
11 years of January 1, 2017 (the effective date of Public Act
12 99-801).

13 (3) Newly hired public safety telecommunicators shall
14 complete the emergency dispatch procedures training
15 curriculum established in subsection (a-5) of this Section
16 prior to independently handling emergency calls within one
17 year of the Statewide 9-1-1 Administrator establishing the
18 required guidelines, rules, and standards.

19 (4) All public safety telecommunicators and public
20 safety telecommunicator supervisors who were not required
21 to complete new hire training prior to handling emergency
22 calls, must either demonstrate proficiency or complete the
23 training established in subsection (a-5) of this Section
24 within one year of the Statewide 9-1-1 Administrator
25 establishing the required guidelines, rules, and
26 standards.

1 (5) Upon completion of the training required in either
2 paragraph (3) or (4) of this subsection (b), whichever is
3 applicable, all public safety telecommunicators and public
4 safety telecommunicator supervisors shall complete the
5 continuing education training regarding the delivery of
6 9-1-1 services and professionalism biennially.

7 (c) The Illinois State Police may adopt rules for the
8 administration of this Section.

9 (d) As used in this Section, "telecommunicator
10 cardiopulmonary resuscitation" or "T-CPR" means
11 dispatcher-assisted delivery of cardiopulmonary resuscitation
12 (CPR) instruction by trained emergency call takers or public
13 safety dispatchers to callers or bystanders for events
14 requiring CPR, such as out-of-hospital cardiac arrest (OHCA).
15 (Source: P.A. 102-9, eff. 6-3-21; 102-687, eff. 12-17-21.)

16 Section 10. The Emergency Medical Services (EMS) Systems
17 Act is amended by changing Section 3.70 as follows:

18 (210 ILCS 50/3.70)

19 Sec. 3.70. Emergency Medical Dispatcher.

20 (a) "Emergency Medical Dispatcher" means a person who has
21 successfully completed a training course in emergency medical
22 dispatching and telecommunicator cardiopulmonary
23 resuscitation (T-CPR) in accordance with rules adopted by the
24 Department pursuant to this Act, who accepts calls from the

1 public for emergency medical services and dispatches
2 designated emergency medical services personnel and vehicles.
3 The Emergency Medical Dispatcher must use the
4 Department-approved emergency medical dispatch priority
5 reference system (EMDPRS) protocol selected for use by its
6 agency and approved by its EMS medical director. This protocol
7 must be used by an emergency medical dispatcher in an
8 emergency medical dispatch agency to dispatch aid to medical
9 emergencies which includes systematized caller interrogation
10 questions; systematized prearrival support instructions; and
11 systematized coding protocols that match the dispatcher's
12 evaluation of the injury or illness severity with the vehicle
13 response mode and vehicle response configuration and includes
14 an appropriate training curriculum and testing process
15 consistent with the specific EMDPRS protocol used by the
16 emergency medical dispatch agency. Prearrival support
17 instructions shall be provided in a non-discriminatory manner
18 and shall be provided in accordance with the EMDPRS
19 established by the EMS medical director of the EMS system in
20 which the EMD operates. If the dispatcher operates under the
21 authority of an Emergency Telephone System Board established
22 under the Emergency Telephone System Act, the protocols shall
23 be established by such Board in consultation with the EMS
24 Medical Director.

25 (b) The Department shall have the authority and
26 responsibility to:

1 (1) Require licensure and relicensure of a person who
2 meets the training and other requirements as an emergency
3 medical dispatcher pursuant to this Act.

4 (2) Require licensure and relicensure of a person,
5 organization, or government agency that operates an
6 emergency medical dispatch agency that meets the minimum
7 standards prescribed by the Department for an emergency
8 medical dispatch agency pursuant to this Act.

9 (3) Prescribe minimum education and continuing
10 education requirements for the Emergency Medical
11 Dispatcher, which meet standards specified by rules
12 adopted pursuant to this Act.

13 (4) Require each EMS Medical Director to report to the
14 Department whenever an action has taken place that may
15 require the revocation or suspension of a license issued
16 by the Department.

17 (5) Require each EMD to provide prearrival
18 instructions and telecommunicator cardiopulmonary
19 resuscitation (T-CPR) in compliance with protocols
20 selected and approved by the system's EMS medical director
21 and approved by the Department.

22 (6) Require the Emergency Medical Dispatcher to keep
23 the Department currently informed as to the entity or
24 agency that employs or supervises his activities as an
25 Emergency Medical Dispatcher.

26 (7) Establish an annual relicensure requirement that

1 requires medical dispatch-specific continuing education as
2 prescribed by the Department through rules adopted
3 pursuant to this Act.

4 (8) Approve all EMDPRS protocols used by emergency
5 medical dispatch agencies to assure compliance with
6 national standards.

7 (9) Require that Department-approved emergency medical
8 dispatch training programs are conducted in accordance
9 with national standards.

10 (10) Require that the emergency medical dispatch
11 agency be operated in accordance with national standards,
12 including, but not limited to, (i) the use on every
13 request for medical assistance of an emergency medical
14 dispatch priority reference system (EMDPRS) in accordance
15 with Department-approved policies and procedures and (ii)
16 under the approval and supervision of the EMS medical
17 director, the establishment of a continuous quality
18 improvement program.

19 (11) Require that a person may not represent himself
20 or herself, nor may an agency or business represent an
21 agent or employee of that agency or business, as an
22 emergency medical dispatcher unless licensed by the
23 Department as an emergency medical dispatcher.

24 (12) Require that a person, organization, or
25 government agency not represent itself as an emergency
26 medical dispatch agency unless the person, organization,

1 or government agency is certified by the Department as an
2 emergency medical dispatch agency.

3 (13) Require that a person, organization, or
4 government agency may not offer or conduct a training
5 course that is represented as a course for an emergency
6 medical dispatcher unless the person, organization, or
7 agency is approved by the Department to offer or conduct
8 that course.

9 (14) Require that Department-approved emergency
10 medical dispatcher training programs are conducted by
11 instructors licensed by the Department who:

12 (i) are, at a minimum, licensed as emergency
13 medical dispatchers;

14 (ii) have completed a Department-approved course
15 on methods of instruction;

16 (iii) have previous experience in a medical
17 dispatch agency; and

18 (iv) have demonstrated experience as an EMS
19 instructor.

20 (15) Establish criteria for modifying or waiving
21 Emergency Medical Dispatcher requirements based on (i) the
22 scope and frequency of dispatch activities and the
23 dispatcher's access to training or (ii) whether the
24 previously-attended dispatcher training program merits
25 automatic relicensure for the dispatcher.

26 (16) Charge each Emergency Medical Dispatcher

1 applicant a fee for licensure and license renewal.

2 (c) The Department shall have the authority to suspend,
3 revoke, or refuse to issue or renew the license of an EMD when,
4 after notice and the opportunity for an impartial hearing, the
5 Department demonstrates that the licensee has violated this
6 Act, violated the rules adopted by the Department, or failed
7 to comply with the applicable standard of care.

8 (Source: P.A. 98-973, eff. 8-15-14.)