STATE OF ILLINOIS
DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION
DIVISION OF PROFESSIONAL REGULATION

PROCLAMATION TO INVOKE EMERGENCY POWERS TO MODIFY PROFESSIONAL LICENSE AND CERTIFICATION STATUTES AND REGULATIONS FOR ILLINOIS LICENSED RESPIRATORY CARE PRACTITIONERS TO ADMINISTER COVID-19 VACCINES

WHEREAS, pursuant to Section 7 of the Illinois Emergency Management Agency Act (20 ILCS 3305/7), the Governor of the State of Illinois has issued a proclamation declaring that a public health emergency exists related to the COVID-19 outbreak in the State of Illinois; and

WHEREAS, as the Governor of the State of Illinois, pursuant to Sections 7(1), 7(2), 7(8), and 7(12) of the Illinois Emergency Management Agency Act, 20 ILCS 3305, ordered during the duration of the Gubernatorial Disaster Proclamations, the requirement in the Section 2105-400 of the Civil Administrative Code, 20 ILCS 2105-400, and its accompanying regulations, authorizing the Secretary of the Department of Financial and Professional Regulation (“IDFPR” or “Department”) to take certain actions to increase the number of licensed professionals responding to the disaster is suspended to the extent it limits the Secretary’s authority to those persons working under the direction of the Illinois Emergency Management Agency (“IEMA”) and the Illinois Department of Public Health (“IDPH”) pursuant to a declared disaster by the Governor; and

WHEREAS, the Governor further ordered that the requirement that the Secretary shall only exercise this authority “in coordination with the Illinois Emergency Management Agency and the Department of Public Health” remains in effect and that in exercising this authority, the Secretary shall work closely with the Directors of IEMA and IDPH to ensure any impacted licensed professionals are aiding in the response to the disaster; and

WHEREAS, on March 16, 2021, the U.S. Department of Health and Human Services, Office of the Secretary issued a guidance entitled, Seventh Amendment to Declaration Under the Public Readiness and Emergency Preparedness Act for Medical Countermeasures Against COVID–19 (“HHS Seventh Amendment”), available at: https://www.federalregister.gov/documents/2021/03/16/2021-05401/seventh-amendment-to-declaration-under-the-public-readiness-and-emergency-preparedness-act-for, which recommends authorizing Respiratory Care Practitioners to administer FDA-authorized or licensed COVID-19 vaccines, under certain conditions; and

WHEREAS, Section 2105-400(a)(1) of the Civil Administrative Code (20 ILCS 2105) authorizes the Secretary of the IDFPR to suspend the requirements for permanent licensure of persons who
are licensed in another state, and modify the scope of practice restrictions under any licensing act administered by the Department; and

**WHEREAS**, the Secretary of IDFPR has coordinated a response to the declared public health emergency with IEMA and IDPH, including by expanding the scope of practice of respiratory care practitioners in order to respond to the COVID-19 pandemic; and

**WHEREAS**, under the Respiratory Care Practice Act, 225 ILCS 106/10, “respiratory care” and “cardiorespiratory care” mean “preventative services, evaluation and assessment services, therapeutic services, cardiopulmonary disease management, and rehabilitative services under the order of a licensed health care professional for an individual with a disorder, disease, or abnormality of the cardiopulmonary system. These terms include, but are not limited to, measuring, observing, assessing, and monitoring signs and symptoms, reactions, general behavior, and general physical response of individuals to respiratory care services, including the determination of whether those signs, symptoms, reactions, behaviors, or general physical responses exhibit abnormal characteristics; the administration of pharmacological and therapeutic agents and procedures related to respiratory care services; the collection of blood specimens and other bodily fluids and tissues for, and the performance of, cardiopulmonary diagnostic testing procedures, including, but not limited to, blood gas analysis; development, implementation, and modification of respiratory care treatment plans based on assessed abnormalities of the cardiopulmonary system, respiratory care guidelines, referrals, and orders of a licensed health care professional; application, operation, and management of mechanical ventilatory support and other means of life support, including, but not limited to, hemodynamic cardiovascular support; and the initiation of emergency procedures under the rules promulgated by the Department. A respiratory care practitioner shall refer to a physician licensed to practice medicine in all its branches any patient whose condition, at the time of evaluation or treatment, is determined to be beyond the scope of practice of the respiratory care practitioner”; and

**THEREFORE**, the Secretary of the Illinois Department of Financial and Professional Regulation, Deborah Hagan, hereby orders the following, pursuant to her authority under 20 ILCS 2105-400(a)(1):

1. An Illinois Respiratory Care Practitioner’s scope of practice under the Respiratory Care Practice Act, 225 ILCS 106/10 is expanded to administer the COVID-19 vaccine to persons 16 years of age and older pursuant to a standing order and pursuant to the following requirements:
   a. The vaccine must be authorized, approved, or licensed by the FDA;
   b. The vaccination must be administered according to ACIP’s COVID–19 vaccine recommendation(s);
   c. The licensed respiratory care practitioner must have documentation of completion of the Centers for Disease Control and Prevention COVID–19 Vaccine Training Modules; and the respiratory care practitioner must complete a practical training program of at least 4 hours that is offered by a continuing education (“CE”) provider or sponsor that is authorized to provide CE for any profession regulated by IDFPR. This training program must include hands-on injection technique, clinical evaluation of indications and contraindications of vaccines, the recognition and treatment of adverse reactions to vaccines; the appropriate method of storage,
handling and disposal of vaccines and all used supplies or contaminated equipment, and the proper administration and maintenance of written policies and procedures;

d. The licensed respiratory care practitioner must have documentation of an observation period by a currently practicing healthcare professional experienced in administering intramuscular injections, and for whom administering intramuscular injections is in their ordinary scope of practice, who confirms competency of the respiratory care practitioner in preparation and administration of the COVID–19 vaccine(s) to be administered;

e. The licensed respiratory care practitioner must have a current certificate in basic cardiopulmonary resuscitation;

f. The licensed respiratory care practitioner must complete an orientation at the medical facility or public health facility on workstation requirements and protocol;

g. The licensed respiratory care practitioner must comply with any applicable requirements (or conditions of use) as set forth in the Centers for Disease Control and Prevention (CDC) COVID–19 vaccination provider agreement and any other federal requirements that apply to the administration of COVID–19 vaccine(s);

h. The licensed respiratory care practitioner must comply with recordkeeping and reporting requirements of the jurisdiction in which he or she administers vaccines, including informing the patient’s primary-care provider within 30 days after administration of a vaccine, submitting the required immunization information to the State or local immunization information system (vaccine registry), complying with requirements with respect to reporting adverse events, and complying with requirements whereby the person administering a vaccine must review the vaccine registry or other vaccination records prior to administering a vaccine.

2. Licensees covered by this Proclamation must be appropriately trained and are subject to all provisions of the Respiratory Care Practice Act and its Rules, as applicable, relating to the standards of care.

3. Licensees covered by this Proclamation are limited to working (a) under the direction of IEMA or IDPH; or (b) in a state-licensed long-term care facility, state regulated hospital, or federally qualified health center (FQHC).

4. This Order does not apply to any licensee who holds or has held an Illinois license as a respiratory care practitioner that has been revoked, suspended, or otherwise encumbered.

5. This Order is effective upon signature and shall continue in effect until throughout the duration of the Gubernatorial Disaster Proclamations.

DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION of the State of Illinois; DEBORAH HAGAN, SECRETARY,

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Date  Date
March 24, 2021  March 24, 2021  March 24, 2021