Patient Advocate Certification Board

Competencies and Best Practices required for a Board Certified Patient Advocate (BCPA)

Attribution

The Patient Advocate Certification Board (PACB) recognizes the importance of this Competencies and Best Practices document as a guideline for professional practice in the field of patient advocacy and for development of an assessment process for certification.

The initial draft emerged from a diverse task force of advocacy practitioners and educators drawing on numerous sources and their own professional experiences. The draft was reviewed and edited by the PACB, then posted for a one-month period of public comment, during which time the PACB received valuable feedback from many advocates and other professionals. Those comments and suggestions led to extensive revisions and clarifications.

This current version reflects the broad knowledge and insights of our diverse professional community.

Introduction

Understanding that no advocate could ever be able to provide every service clients accessing the healthcare system might need or benefit from, these lists of competencies have been developed in two categories:

1. Core functions and skills which every advocate must be able to perform;
2. More specialized skills that an advocate may not possess but must be able to recognize and understand so that, when needed, they can refer their clients to the appropriate professionals.

The second category requires advocates to realize when clients’ needs are beyond their own competencies. This realization is a skill unto itself; therefore, these competencies and best practices are categorized accordingly.
The Domains of Patient Advocacy

1. Scope of Practice and Transparency
2. Empowerment, Autonomy, Rights, and Equity
3. Communication and Interpersonal Relationships
5. Medical Knowledge and the Healthcare System
6. Professionalism, Professional Development, and Practice

1. Scope of Practice and Transparency

*Patient Advocates will:*

a. Provide to potential clients clear, accurate, and complete information about training, education, experience, credentials, and limitations, as well as any possible fees and areas of potential conflict of interest;

b. Inform clients about the limits of their scope of practice and advise clients strictly within their defined area of proficiency;

c. Develop clear and achievable expectations with the client to encourage a strong working relationship and productive advocacy;

d. Obtain, maintain, and protect the privacy of any and all medical records required to serve the client’s needs, sharing them with the client and anyone designated by the client;

e. Abide by all relevant laws and regulations related to confidentiality of medical and identity information including, but not limited to, HIPAA;

f. Avoid making any decision for, or on behalf of, a client;

g. Avoid diagnosing or prescribing any medical/mental health treatment for clients, even if the advocate has additional licensure or training;

h. Refer clients to qualified alternate professionals if a client’s needs are outside the scope of the advocate’s knowledge or training;

i. Adhere at all times to the Ethical Standards defined by the Patient Advocate Certification Board (PACB);

j. Provide a written service agreement to each guarantor and client, both paid and pro bono, that clearly sets forth the nature and scope of services, fee schedule, terms, projected length of the relationship, and the criteria for appropriate termination of the relationship.
2. Empowerment, Autonomy, Rights, and Equity

*Patient Advocates will:*

a. Treat clients fairly regardless of age, race, religious/spiritual practice, culture, ethnicity, sexual orientation or gender identity, and immigration status;

b. Promote equitable access to appropriate and safe health care and treatment;

c. Offer continuous client-centered services that represent the best interests of the client, as determined by that client (or a legal healthcare proxy);

d. Foster self-determination and client engagement, treating the client with respect and compassion in all interactions;

e. Respect the right of clients to make their own decisions.

f. Provide clients with information and resources to facilitate informed decision-making regarding care and treatment, including palliative and end-of-life care;

g. Assist clients in understanding care and treatment options, including potential risks, benefits, and available alternatives;

h. Convey relevant medical history, statutory patients’ rights, and possible care options to any legally designated surrogate, as authorized by the client, including personal conversations in which the client may have expressed certain wishes that might guide informed decisions;

i. Understand and apply current and appropriate laws, documents, and approaches (e.g., the national standards for Culturally and Linguistically Appropriate Services (CLAS); Beauchamp and Childress’ Four Principles of Biomedical Ethics; or state and/or institutional statements of Patient Rights) to protect client’s rights and choices;

j. Educate clients about important decision-related healthcare documents which may include, but are not limited to: Durable Power of Attorney for Healthcare, Durable Power of Attorney for Financial Affairs, Advance Directives, Living Wills, Do Not Resuscitate orders (both in-hospital and out-of-hospital), and similar documents. Encourage clients to complete and save such documents, as appropriate.
3. Communication and Interpersonal Relationships

*Patient Advocates will:*

a. Provide empathetic, non-judgmental, supportive listening and interactions that promote self-determination, well-being, resilience, and confidence;
b. Collaborate effectively with other members of the healthcare team, both in and out of the hospital, to ensure appropriate and compassionate care for the client;
c. Include the family and caregivers in the client’s planning process according to the client’s wishes;
d. Provide any written communication and documentation requested by the client in a timely, appropriate, and professional manner;
e. Incorporate into communications the complex interplay of biological, psychological, and social factors that enhance the client’s functioning and well-being;
f. Advocate to alleviate suffering, promote health, promote safe care, and encourage well-being whenever and wherever possible;
g. Utilize appropriate style/approach to meet the client’s cognitive, literacy, and personality characteristics;
h. Utilize basic conflict management skills in interactions between the client and family, health professionals, or other relevant stakeholders;
i. Integrate cultural, gender-based, and religious/spiritual perspectives that may influence the client’s experience of illness, pain management, treatment, and health.

*(Specialized) Communication and Interpersonal Relationships Skills:*

The following skills are more specialized and may be referred services. See the Introduction section of this Competencies and Best Practices document.

*Patient Advocates will:*

j. Recognize the need for advanced skills in conflict management or professional mediation and facilitate client access to such resources when the situation warrants;
k. Recognize when cultural, gender-based and/or religious/spiritual perspectives will significantly affect client outcomes and facilitate client access to advanced expertise in this area when needed.

Patient Advocates will:

- a. Understand and be able to communicate generally how the healthcare system functions, and the roles, responsibilities, barriers, and constraints of patients, payers, and providers within the system;
- b. Facilitate the client’s navigation through the complexities of the healthcare system continuum;
- c. Clarify care transitions and assist clients in appropriate aspects of these changes;
- d. Comprehend and apply the fundamentals of prescription drug costs and coverage for all clients;
- e. Recognize barriers to care coordination and work with clients and providers to overcome them, requesting provider-to-provider conversations and other client-focused collaboration as required;
- f. Understand and communicate to the client the basics of health insurance, Medicare, Medicaid, and other programs that affect payments for the client’s medical needs, including appropriate state variations and differences among programs;
- g. Gain fluency in basic medical bill interpretation and apply the general provisions of insurance coverage to each client’s situation;
- h. Offer information and empathy to clients experiencing the financial, emotional, and/or physical impact of medical debt;
- i. Integrate community-based resources to support and sustain the client’s well-being;
- j. Utilize appropriate grievance, appeals, and complaints processes.

(Specialized) Access, Finance, and Management Skills:

The following skills are more specialized and may be referred services. See the Introduction section of this Competencies and Best Practices document.

Patient Advocates will:

- k. Recognize the need for advanced expertise in health insurance coverage regarding such issues as omissions, impediments, shortfalls, subsidies and tax credits, metrics, potential penalties, and alternative insurance providers, and facilitate client access to qualified professionals in this area;
- l. Recognize the need for advanced expertise in medical billing, claims, denials or other payment-related issues and facilitate client access to appropriate expertise when needed.
- m. Recognize limitations in standard grievance, appeals, and complaints processes and facilitate client access to appropriate legal expertise when needed.

5. Medical Knowledge and the Healthcare System
Patient Advocates will:

a. Maintain familiarity with basic medical terminology, major life-threatening illnesses, and chronic diseases;
b. Explain the structure and functionality of healthcare facilities and provider groups to clients and expose resources available through each system;
c. Access the full range of healthcare providers and care delivery models and enable second opinion options;
d. Assist clients to coordinate care among many clinicians, settings, and affiliated providers;
e. Conduct research to uncover detailed and reliable medical information relevant to each client.
f. Promote safe care and the patient’s awareness of patient safety issues at all times, which may include but are not limited to diagnostic accuracy, and prevention of hospital-acquired infections, pharmaceutical and biologic drug or medical device errors, care coordination errors, radiologic (imaging) errors, and other potential health care related hazards and errors.

(Specialized) Medical Knowledge and the Healthcare System
The following skills are more specialized and may be referred services. See the Introduction section of this Competencies and Best Practices document.

g. Recognize the need for advanced expertise in research on medical options and research trials and facilitate client access to qualified professionals when needed.

6. Professionalism, Professional Development, and Practice

Patient Advocates will:

a. Assess the client relationship on a regular basis, continue to recognize, develop, and maintain professional boundaries as defined in the Ethical Standards for a Board Certified Patient Advocate and avoid situations that may jeopardize those boundaries;
b. Maintain, update, and provide proof when required of all credentials, liability and business insurance, legal contracts, and other practice-related requirements;
c. Continue to develop skills and maintain competence in all specific areas of expertise;
d. Work within the scope of the BCPA credential and obtain continuing education credits, as required;
e. Keep abreast of laws, policies, research developments, and trends that affect the practice of patient advocacy;
f. Take initiative to seek out colleagues, mentors, and other experts regarding challenging client situations.