PACB Guidance Document

Guidance on Mandatory Reporting for Patient and Health Care Advocates

Adopted: TBD
Issued by: Patient Advocate Certification Board (PACB)
For questions, contact: www.pacboard.org

Executive Summary

While independent patient and health care advocates are generally not classified as mandatory reporters under most state laws, some jurisdictions require all individuals, regardless of profession, to report suspected abuse, neglect, or exploitation of vulnerable persons. Advocates who hold other professional licenses may also have mandatory reporting obligations tied to those licenses, even when functioning solely as advocates.

This guideline clarifies definitions, legal frameworks, and ethical considerations for reporting suspected abuse, highlights situations in which reporting may be required, and offers best practices for compliance.

Key points include:

- State laws vary significantly; some require universal reporting.
- Co-licensed advocates may have separate legal obligations tied to their professional licenses.
- Ethical responsibility to act exists even in permissive (non-mandatory) states.
- Virtual work does not exempt an advocate from applicable reporting laws.
- Advocates should be transparent with clients about reporting obligations

1. Introduction

Since the first mandatory child abuse reporting laws were enacted in 1962, reporting requirements have expanded to cover abuse and neglect of elders, adults with disabilities, and other vulnerable populations. According to the U.S. Centers for Disease Control, approximately 1 in 7 children experience abuse annually, and elder abuse remains substantially underreported.

Patient and health care advocates may encounter situations that raise serious concerns for client safety. Even if not legally required to report, PACB encourages advocates to take appropriate action consistent with legal obligations, ethical standards, and professional integrity.

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2. Definitions and Distinctions

Vulnerable Persons – Children, older adults, minorities, incarcerated individuals, people who are unhoused or have intellectual or developmental disabilities, and others lacking capacity due to illness, injury, or other circumstances.

Types of Abuse – Physical, sexual, or psychological abuse; neglect; abandonment; financial exploitation.

Mandatory Reporting – A legal requirement to report suspected abuse to designated authorities within a specified timeframe.

Permissive Reporting – Reporting is allowed but not legally required.

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3. Legal and Ethical Framework

State Laws Vary – Each U.S. state, territory, and the District of Columbia defines who is a mandatory reporter, what must be reported, and to whom. Some states require all persons to report suspected abuse of vulnerable individuals.

Role of Co-Licensed Professionals – Advocates holding valid professional licenses (e.g., RN, MD, LCSW) may have mandatory reporting responsibilities tied to those credentials, even when functioning solely as an advocate.

Ethical Responsibility – In permissive reporting jurisdictions, PACB encourages advocates to take appropriate action when they observe or suspect abuse. Client safety should always be the priority.

Cultural Sensitivity – Consider cultural norms and context when evaluating suspected abuse, but do not allow cultural differences to override legal or ethical duties to protect vulnerable persons.

Virtual and Cross-State Practice – Reporting responsibilities are tied to the laws of either the advocate's or the client's location. Advocates working across state lines must be familiar with the relevant laws in both jurisdictions.

Respecting Client Preferences – While clients may prefer to avoid advocates with reporting obligations, advocates should not agree to disregard their legal or ethical duties. Transparency about these obligations is imperative.

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4. Guidelines for Patient and Health Care Advocates

Advocates should:

a. **Know the Law** – Understand reporting requirements in your jurisdiction and seek guidance when questions arise about obligations elsewhere.
b. **Disclose Obligations** – Inform clients of reporting duties when relevant to their situation.
c. **Report When Required** – Comply promptly with applicable laws when suspicion meets the statutory threshold.
d. **Document Observations** – Keep factual, objective records of what was seen, heard, or disclosed.
e. **Avoid Overstepping** – Unless trained, do not attempt to investigate; limit involvement to making the report.
f. **Seek Training** – Learn to recognize signs of abuse and understand local procedures.

g. **Consult When Unsure** – Seek advice from legal counsel or protective services when in doubt.

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5. Best Practices

- Be aware of your client's location and seek guidance if reporting obligations may apply.
- Keep contact information for reporting agencies in your own jurisdiction and seek additional resources if a client situation requires it.
- Balance client confidentiality with safety obligations.
- In emergencies, contact law enforcement immediately.
- Stay current with changes in the law through continuing education.

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6. Conclusion

While most independent advocates are not legally required to report abuse, there are situations in which reporting becomes mandatory by law, license, or ethics. Advocates should know the laws in all relevant jurisdictions, disclose obligations to clients, and take appropriate action to protect vulnerable individuals while maintaining the integrity of the advocacy profession.

Helpful Resources – Quick Reference

1. PACB Code of Ethical Standards – https://www.pacboard.org/ethical-standards/
2. Child Welfare Information Gateway – https://www.childwelfare.gov
3. RAINN State Law Database – https://apps.rainn.org/policy/
4. U.S. DOJ Elder Justice Initiative – https://www.justice.gov/elderjustice
5. National Center on Elder Abuse – https://ncea.acl.gov