

November 6, 2019

**ILLINOIS HEALTH AND HOSPITAL ASSOCIATION
M E M O R A N D U M**

TO: Chief Executive Officers, Member Hospitals and Health Systems
Chief Medical Officers
Chief Operating Officers
In-House Counsel
Government Relations Personnel
Behavioral Health Constituency Section
Compliance Officers

FROM: A.J. Wilhelmi, President & CEO
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SUBJECT: Hospital & Staff Requirements under Abused and Neglected Child Reporting Act (ANCRA); new laws amending ANCRA

Three new state laws amend the Abused and Neglected Child Reporting Act (ANCRA) impacting hospitals and their staff beginning Jan. 1, 2020. This Memo provides: 1) an in-depth summary of the requirements of hospitals and healthcare professionals under ANCRA, with links to training resources, and 2) a review of the three new laws and their requirements on hospitals and their staff.

ANCRA Required Reporting for Hospitals & Staff

Mandated Healthcare Reporters

As previously required, the individuals listed below are required to immediately [report to DCFS](#) when they have reasonable cause to believe that “a child known to them in their professional or official capacities” may be abused or neglected (800-25-ABUSE, 800-252-2873 or TTY 1-800-358-5117). A comprehensive list of healthcare-related personnel required to report under ANCRA are listed in Section 4 of the statute (325 ILCS 5/4(a)), **including medical personnel, listed in paragraph 1; social services and mental health professionals, listed in paragraph 2; and healthcare professionals at facilities that provide abortions, abortion referrals, or contraceptives, listed in paragraph 10.**

Mandated reporters may also notify the person in charge of their institution or facility, or their designated agent. Under no circumstances can any person in charge of a mandated reporter to whom a report has been made exercise any control, restraint, modification or other change in the report or the forwarding of such a report to DCFS. A child is not required to come

before a mandated reporter in order for a report of suspected child abuse or neglect to be made. In referring to professional or official capacities, the law further defines that this refers to mandated reporters who:

- Came into contact with a child in the course of their employment or practice of a profession, or through a regularly scheduled program, activity, or service;
- Affiliated with an agency, institution, organization, school, school district, regularly established church or religious organization, or other entity that is directly responsible for the care, supervision, guidance, or training of the child;
- Had a person make a specific disclosure that an identifiable child is the victim of abuse or neglect, and the disclosure happens while the mandated reporter is engaged in their employment or practice of a profession, or in a regularly scheduled program, activity, or service.

Consolidation of Group Reporting

Newly permitted for mandated reporter flexibility and to reduce duplicative requirements, when two or more healthcare professionals who work within the same workplace are required to report share a reasonable cause to believe that a child may be abused or neglected, one of the reporters may be designated to make a single report. The report should include the names and contact information for the other mandated reporters sharing the belief. The designated reporter must provide written confirmation of the report to those mandated reporters within 48 hours. If confirmation is not provided, those mandated reporters are individually responsible for immediately ensuring a report is made.

Privileged Communications

As previously clarified in the statute, the privileged quality of communication between a mandated reporter and his patient or client does not apply to situations involving abused or neglected children and will not constitute grounds for failure to report or constitute grounds for failure to share information or documents with DCFS during the course of a child abuse or neglect investigation. If requested by the mandated reporter, DCFS must confirm in writing that the information or documents disclosed by the reporter were gathered in the course of a child abuse or neglect investigation. Further details on privileged communication under ANCRA are provided in Section 4 of the statute (325 ILCS 5/4(g)).

Administrative & Training Requirements

As previously required, **any employed mandated reporter must sign a statement prior to beginning employment on a [form prescribed by DCFS](#) to the effect that the employee has knowledge and understanding of the reporting requirements.** The statement must include information about available mandated reporter training provided by DCFS. Employers must

retain signed statements for an undefined period of time, the cost of which must be borne by the employer.

Newly required, mandated reporters must complete an initial training within three months of the first time they engage in their professional or official capacity (i.e., following licensure, but not every time they begin a new position), followed by a refresher training every three years. The “medical personnel” listed under *Mandated Healthcare Reporters* within this memo have different training standards:

- Medical personnel who work with children in their professional or official capacity must complete mandated reporter training at least every 6 years, with attestation on their licensure renewal form (if applicable) that they understand they are a mandated reporter, along with other requirements in that role.
- In lieu of repeated training, medical personnel who do not work with children in their professional or official capacity may instead attest each time on their licensure renewal form that they understand they are a mandated reporter, along with other requirements in that role.

When applicable, mandated reporters must report to their employer and to their licensing or certification board, that they have completed the training. The reporter, not the employer, must retain records of completion. **The DCFS-administered free, online training course that meets mandated reporter requirements, [Recognizing and Reporting Child Abuse: Training for Mandated Reporters](#), is available 24 hours a day, seven days a week.** Organizations approved by DCFS to provide mandated reporter training may also develop separate training, but DCFS is required to maintain the free, web-based training. This training will count toward meeting a licensee’s required continuing education hours beginning in 2021, if a reporter receives licensure from the Illinois Department of Financial and Professional Regulation.

Penalties

As previously outlined in existing provisions, background on transmitting false reports and penalties for “knowingly and willfully” violating provisions within Section 4 of the statute (325 ILCS 5/4) can be found in subsection M. Any person who knowingly transmits a false report to DCFS commits the offense of disorderly conduct under subsection (a)(7) of Section 26-1 of the Criminal Code of 2012, which is a Class 4 felony.

Resources

- ✓ Mandated Reporter Manual - [English](#) or [Spanish](#)
- ✓ DCFS-administered online training course, [Recognizing and Reporting Child Abuse: Training for Mandated Reporters](#), available 24 hours a day, seven days a week
- ✓ [DCFS Acknowledgement of Mandated Reporter Status](#) – required form

- ✓ For emergencies, call the 24-hour Child Abuse Hotline at 800-25-ABUSE (800-252-2873 or TTY 1-800-358-5117) if you suspect that a child has been harmed or is at risk of being harmed by abuse or neglect. If you believe a child is in immediate danger of harm, call 911 first.
- ✓ In non-emergency situations, [mandated reporters](#) may report suspected child abuse or neglect using the [Online Reporting System](#).
- ✓ [User Manual](#) for Online Reporting System for Mandated Reporters
- ✓ [Mandated Reporter Poster – Medical](#)
- ✓ Care Enough to Call brochure - [English](#), [Spanish](#) or [Chinese](#)
- ✓ DCFS Child Protection - [resource webpage](#)
- ✓ DCFS Forms – [resource webpage](#)

New Laws Related to ANCRA

The following laws amending ANCRA related to mandated reporting and workforce training are all effective January 1, 2020:

[SB1778/PA101-0564](#) (Sen. Julie Morrison/Rep. Sara Feigenholtz)

ANCRA – Reporting & Training

This legislation is a broad reform of ANCRA, reorganizing and expanding who is mandated to report across broad professions and requiring various levels of training for mandated reporters. IHA worked with the sponsor to remove hospitals, as the only facility listed, from the list of medical personnel required to report. Instead, the legislation requires mandated reporting for all “medical administrators or personnel engaged in the examination, care, and treatment of persons”, among an extensive group of specific medical and mental healthcare personnel that previously existed. Training provided by the Department of Children and Family Services (DCFS) or an authorized entity must be completed within three months of a medical personnel’s date of engagement in a professional or official capacity, if they work with children. This training must be completed every six years by medical personnel who work with children. If medical personnel do not work with children, they must attest that they understand they are a mandated reporter with specific responsibilities required of reporters at each licensure renewal. When two or more persons who work within the same workplace and are required to report, one reporter may now be designated to make a single report, for which the process is described. DCFS must provide a free, web-based training for reporters.

[SB1239/PA101-0583](#) (Sen. Julie Morrison/Rep. Robyn Gabel)

ANCRA – Criminal Investigations

This legislation requires any report of alleged abuse and neglect of a child by anyone other than a parent, immediate family member, person responsible for the child’s welfare, individual living with the child, or paramour of the child’s parent that is received by DCFS to be immediately referred to the appropriate law enforcement agency for consideration for a criminal investigation. This requirement would include allegations made in a hospital setting.

[HB831/PA101-0043](#) (Rep. Stephanie Kifowit/Sen. Linda Holmes)

ANCRA – Reports for DPH & DHFS

This legislation requires DCFS to notify the Directors of the Departments of Healthcare and Family Services (DHFS) and Public Health (DPH) when any report of suspected child abuse or neglect in a hospital has been called in to the statewide DCFS hotline. Whenever a report alleges that a child was abused or neglected while receiving care in a hospital, DCFS must send final findings to the Directors of DHFS and DPH. DPH will receive information from reports of unfounded abuse or neglect in a hospital in order to conduct its licensing investigation. The legislation removes the necessity of seeking access or release of these records by the Director of DCFS or their designee.

If you have questions or comments, please contact Lia Daniels at 630-276-5461 or ldaniels@team-iha.org.