Persons who are required to report abuse [Welfare and Institutions Code § 15630]

Mandated reporters include:
- Any employee working in any facility that provides elder or dependent care services
- Any employee providing direct health care or social services to an elder or dependent adult
- Health care providers
- Clergy

When reporting abuse is required [Welfare and Institutions Code § 15630]

A mandated reporter who has knowledge of or reasonably suspects abuse or neglect of an elder (person age 65 or older) or dependent adult must report the suspected incident.

The reporter must contact a designated agency immediately or as soon as practically possible by telephone, and shall prepare and send a written report within two business days of receiving the information concerning the incident.

Abuse that must be reported [Welfare and Institutions Code § 15630(b)]

- Physical abuse
- Abandonment
- Abduction
- Isolation
- Financial abuse
- Neglect

Where to call in and send the written abuse report

Reports of suspected elder/dependent adult abuse or neglect must be made:
- Immediately via telephone report to Adult Protective Services at (213) 351-5401 or (877) 477-3647.
- Within two business days via written report on Form SOC341 (Report of Suspected Dependent Adult/Elder Abuse)

Immunity and confidentiality of reporter and of abuse reports [Welfare and Institutions Code § 15633.5]

Persons legally mandated to report suspected elder/dependent adult abuse have immunity from criminal or civil liability for reporting as required or authorized by law. The identity of a mandated reporter is confidential and disclosed only among agencies receiving or investigating reports and other designated agencies.

Penalty for failure to report abuse [Welfare and Institutions Code §15630(h)]

A mandated reporter who fails to make a required report is guilty of a misdemeanor punishable by up to six months in jail, a fine of $1000, or both.

Copy of law

I have received a copy of Welfare and Institutions Code §15630.

Acknowledgment of responsibility

I understand and acknowledge my responsibility to report known or suspected dependent adult/elder abuse in compliance with state law requirements.

Employee name

Job title

School/department

Employee ID

Employee signature

Date

Note: retain in employee file