

Oakland County Medical Control Authority
System Protocols
PROFESSIONAL STANDARDS REVIEW ORGANIZATION
CONFIDENTIALITY STATEMENT

June, 2018

Section 8.27.8

Confidentiality Statement

Responsibilities:

The responsibilities of the PSRO Committee shall be to:

1. Assess, investigate and when necessary, make recommendations to OCMCA Board pertaining to issues of concern regarding non-compliance with OCMCA policies, procedures or protocols posed by any person(s) regarding Oakland County EMS activities. Investigations will be processed in accordance with OCMCA Protocols.
2. Regularly assess quality assurance processes performed by Oakland County Life Support Agencies and their professional personnel through an audit process using data provided by the agencies and other system participants.
3. Develop an annual plan and perform study evaluations for the purpose of EMS system assessment and improvement of processes, protocols, EMS personnel, equipment, medications, etc. that may affect patient outcomes. Additional studies can be conducted on an ad hoc basis as issues arise or system deficiencies are recognized.
4. Assess agency and facility applications, reapplications, and compliance with OCMCA protocols, policies, and PSRO recommendations.
5. Provide additional planning, coordination, monitoring and evaluation of the EMS system within Oakland County as it relates to the quality of care provided by individuals and Life Support Agencies within the system, or as designed by the OCMCA Board.

Expectations:

1. All data, discussions, deliberations, documents, correspondence, materials and any other information either written or verbal shared either within the PSRO meeting setting or provided or generated in connection with carrying out the responsibilities of the PSRO are confidential, are not public records, may not be used for other purposes, and are protected by federal and state laws. Furthermore, these items and information as outlined are not to be discussed or disseminated to any person not currently serving as a PSRO member or staff.
2. As an active member of the PSRO Committee I am committed to maintaining the confidentiality practices of this Committee as stated in the OCMCA Protocols and state law. I understand that if I breach the aforementioned confidentiality I may be dismissed from this Committee.

Date: _____

Signature: _____

Printed Name: _____