

STATEMENT OF COMPLIANCE WITH CONFIDENTIALITY REQUIREMENTS FOR THE [COLLABORATIVE NAME] PI/TQIP SUBCOMMITTEE

PURPOSE

The purpose of this document is to ensure that the members of the [Collaborative Name] Performance Improvement/TQIP Subcommittee understand and acknowledge their responsibility to maintain the confidentiality of the [Collaborative Name] performance improvement proceedings.

The [Collaborative Name] PI/TQIP Subcommittee is considered a review organization as defined in [State Code] and is covered by immunity and confidentiality provision of [State Code]. Data that is received or compiled by the [Collaborative Name] PI/TQIP subcommittee to ensure quality of trauma patient care shall be confidential and privileged, non-discoverable, and inadmissible in any proceedings. No person serving on or communicating information to the [Collaborative Name] PI/TQIP Subcommittee shall be examined as to any such communications or to the findings or recommendations of the subcommittee. A person serving on or communicating information to the [Collaborative Name] PI/TQIP Subcommittee shall not be subject to an action for civil damages for actions taken or statements made in good faith. The confidentiality provisions of [State Code] and [State Code] shall also apply to the monitoring and performance improvement activities of the [Collaborative Name] PI Subcommittee.

Disclosure by a subcommittee member of any investigative information or any discussion of such information with unauthorized persons is a violation of [State] law and may expose that member to potential liability for unauthorized release of information.

PROCEDURES

The [State] has provided the Performance Improvement Subcommittee with guidance concerning procedures for conducting PI activities. Members of the subcommittee must abide by the following:

No information may leave the room except as assigned by the chair. All written confidential material related to review must be returned to the chair to store or destroy. Members may discuss matters brought to the attention of the committee only as official business; they may not discuss with others or disseminate in any way confidential information obtained in the course of these meetings or meeting preparation.

STATEMENT OF COMPLIANCE

I, the undersigned, have read and understand the above and agree to comply with requirements regarding confidentiality. Should I not comply with the requirements regarding confidentiality, I agree to resign immediately from the [Collaborative Name] PI Subcommittee. Additionally, I understand that the failure to comply with the confidentiality requirements incumbent upon me may result in my being held personally liable for unauthorized release of information provided to me in my capacity as a member of the [Collaborative Name] PI Subcommittee.

Printed Name

Signature

This _____ day of _____, 20____