

**CONFIDENTIALITY PLEDGE
FOR PARTICIPATION ON THE
QUALITY ASSURANCE COMMITTEE
FOR EMPLOYEES/CONTRACTORS**

As a member of the Quality Assurance Committee, I recognize that confidentiality is vital to effective performance of quality assurance activities. Accordingly, I pledge to respect and preserve the confidentiality of those activities of the Quality Assurance Committee in which I participate. I also pledge to invoke the protection against compelled disclosure provided by California Evidence Code Section 1157, as applicable in legal proceedings, in order to preserve the confidentiality of this information.

Furthermore, my participation on the Quality Assurance Committee, including all North Coast EMS data collection activities, is in reliance upon the preservation of confidentiality. I understand that the confidentiality of these activities is to be maintained and that these communications and information will be disclosed only in furtherance of quality assurance. I, therefore, agree not to disclose any information obtained in the course of my participation in Quality Assurance Committee activities.

I understand that if I violate this pledge, I may be removed from further participation on this committee and may be discharged as an employee or contractor of North Coast Emergency Medical Services.

Quality Assurance Committee Member Signature

Date

Print Name