



KERN COUNTY FIRE DEPARTMENT

Ride-Along Program

Confidentiality and Privacy Agreement

READ THIS DOCUMENT COMPLETELY BEFORE SIGNING

KNOW ALL MEN BY THESE PRESENTS:

That I, the undersigned _____, a private person, for and in consideration of the privilege of riding as a guest in a fire rescue department vehicle of the County of Kern, acknowledge that routine fire rescue department activities involve information received from patients and/or others with information relative to their care. This information is private and confidential and is protected from unauthorized use and disclosure by both Federal and State law. It is the policy of the Kern County Fire Department to ensure that all patient health information will be treated as private and confidential at all times and will be known as Protected Health Information (PHI).

I further agree that the execution of this Agreement shall require that PHI is not used or disclosed in any way that is not permitted by law. Failure to comply with this Agreement concerning PHI will result in the termination of the ride-along session and may constitute a violation of State and Federal laws. Disclosure of PHI subsequent to the ride-along session may also result in criminal and civil penalties. All requests for PHI shall be forwarded to the EMS Division Privacy Officer.

Print Name: _____

Signature: _____

Witness: _____

