



Case Review Team Confidentiality Agreement Case Review Team Meeting, DATE

Purpose:

The purpose of the Overdose Fatality Review (OFR) process is to identify missed opportunities for prevention and intervention in fatal overdose cases. These reviews are conducted to improve systems, strengthen partnerships, and inform public health responses. All participants must commit to maintaining strict confidentiality in accordance with federal, state, and local laws and in alignment with the terms of the overarching OFR participation agreement signed by their respective organizations.

To ensure a coordinated response that fully addresses all systemic concerns surrounding overdose deaths, available data should be shared and reviewed by the team, as permitted by law, including historical information concerning the decedent, his or her family, and the circumstances surrounding the death. Much of this information is protected from public disclosure by law.

Agreement: By signing below, I agree to the following:

1. **Confidentiality:** I understand that all information discussed during the review, including case details, identifying information, and shared documents, is strictly confidential. I will not disclose any information outside of the review setting, including to colleagues or other members of my organization who are not part of the OFR process.
2. **Use of Information:** I will use information obtained through the review solely for the purposes of system improvement and prevention, not for investigative, punitive, or legal action.
3. **Data Security:** I will not copy, photograph, record, or otherwise reproduce or transmit any materials or information from the case review. I will return or securely destroy any printed or written materials provided during the meeting.
4. **Respect for the Process:** I understand that case review discussions are intended to be candid and constructive. I will participate respectfully and support a blame-free environment focused on improving services and systems.
5. **Acknowledgment of Organizational Agreement:** I acknowledge that my organization has signed the formal agreement to participate in the OFR process and that my participation is in alignment with that agreement.

Name

Organization

Signature

Date