



WHAT IS THE ROLE OF THE PSO AUTHORIZED OFFICIAL?

Establishing an “Authorized Official”

When an entity seeks listing as a PSO, it must identify an individual with authority to make commitments on behalf of the entity—referred to as “Authorized Official” or AO—to complete certain requirements for listing. The Patient Safety Rule (see 42 CFR §3.102(a)) requires the AO to:

- Attest that the entity is not any of the types of entities excluded from listing as a PSO;
- Certify that the entity meets all 15 general PSO certification requirements;
- Make added certifications if the entity is a component organization of an excluded entity;
- Make attestations related to whether AHRQ has previously delisted or refused to list the entity or another entity involving any of the same officials or senior managers;
- Attest that, if listed, the PSO will promptly notify AHRQ during the PSO’s period of listing if:
 - the PSO cannot comply with any of its attestations or requirements; or
 - there are any changes in the accuracy of the information submitted for listing;and
- Provide any other information AHRQ deems necessary to make its listing determination.

In general, these above requirements are captured in the Certification for Initial Listing form. Notice below that the AO must be legally authorized to complete this form and can be held liable for any false statements contained therein:

I am legally authorized to complete this form on behalf of the entity seeking listing as a PSO. The statements on this form, and any submitted attachments or supplements to it, are made in good faith and are true, complete, and correct to the best of my knowledge and belief. I understand that a knowing and willful false statement on this form, attachments or supplements to it, can be punished by fine or imprisonment or both (United States Code, Title 18, Section 1001). I also understand that, upon listing as a PSO, the Patient Safety Rule (section 3.102(a)(vi)) requires a PSO to promptly notify the Secretary during its period of listing if there have been any changes in the accuracy of the listing information, or if there is a change in the contact information. The entity must notify AHRQ...

The AO must understand the basic concepts of the Patient Safety Rule and the requirements a PSO must meet in order to make accurate attestations, including but not limited to: the fundamental concepts of patient safety work product (PSWP), such as the limited circumstances under which PSWP can be disclosed; the separation of the patient safety evaluation system (PSES) of a PSO and the PSES of its reporting provider; and, for component PSOs, the separation required between the PSO and its parent organization(s).



Role of the AO During the PSO's Period of Listing

AHRQ anticipates that once the PSO is listed, the AO will continue to have both administrative and substantive responsibilities for the PSO. For example, during the course of a PSO's period of listing, there are certain specified forms the PSO must submit to AHRQ, as applicable. A PSO's failure to timely submit these forms could result in the PSO's delisting. These forms, all available at the AHRQ PSO website (<https://pso.ahrq.gov/forms>), include: Two Bona Fide Contracts Requirement Form, Disclosure Statement Form, Certification for Continued Listing Form, and Change of Listing Information Form. All of these forms must be signed by the PSO's AO. Please familiarize yourself with all of these forms, their content, and any required submission dates. (See "View Filing Timeline" at https://pso.ahrq.gov/maintain_PSO.)

Another important issue to consider is whether the AO is - or is not - a member of the PSO workforce as that term is defined in the Patient Safety Rule, and any implications that may have for the AO in performing his or her responsibilities for the PSO. For example, if an AO is not a workforce member and needs access to PSWP to perform these responsibilities, the PSO will need to determine how PSWP can be permissibly disclosed to the AO. Similarly, a component PSO that designates a senior executive of its parent organization as AO should determine how the PSO will meet its attestations to maintain PSWP securely from, and prevent unauthorized disclosures to, its parent organization in light of such an arrangement.

AO Transitions

Some PSOs have prepared a handoff package for the transition of PSO operations to a new AO. This preparation and forethought is a best practice that can ensure that the PSO is always prepared for any situation that would affect its leadership and operations. Below is a suggested list of information to include in a handoff package, in addition to information specific to the business operations of the PSO:

- The PSO's Policies and Procedures (if electronic, where to find them).
- All of the PSO's prior forms submitted to AHRQ and the PSO Privacy Protection Center (PSOPPC), including:
 - Certifications for Initial Listing and subsequent Continued Listings;
 - The most recent Certification for Two Bona Fide Contracts and the two contracts used to meet this attestation;
 - The most recent PSO Profile Form submitted to the PSOPPC;
 - The PSOPPC Data Use Agreement (if executed).
- The Resources available at the AHRQ PSO website (<https://pso.ahrq.gov/legislation>), including the Patient Safety Act, the Patient Safety Rule, the Notice of Proposed Rulemaking (NPRM), the PSO Compliance Self-Assessment Guide, and any other relevant guidance documents or other tools.
- The AHRQ and PSOPPC Technical Contacts List of people and places (available at https://www.psoppc.org/psoppc_web/publicpages/support under "Technical Assistance")

As always, the PSO Team is available to you for any questions or guidance you may need. Please send an email with your questions or concerns to pso@ahrq.hhs.gov. We look forward to working with you.