

**AFFILIATION AGREEMENT
FOR THE CLINICAL STUDENT EXTERNSHIP PROGRAM**

BETWEEN

<PARTNER INSTITUTION>

<Location>

AND

THE OHIO STATE UNIVERSITY <INITIATING UNIT>

Columbus, Ohio, USA

It is mutually agreed by and between The Ohio State University <initiating unit>, (hereinafter, “_____”) and <partner institution> (hereinafter, “_____”) that clinical educational experiences will be provided at <partner institution> for _____ students in the clinical externship program described on the attached approved curriculum and course documents (Appendix A).

- I. Pursuant to this Agreement, <initiating unit> will:
- a. Provide the goals, objectives, and expected outcomes to be achieved during the student clinical externship rotation at <partner institution>.
 - b. Coordinate with <partner institution> in the assignment of students to rotate through the site, including dates and times of clinical externship placement. The number of students assigned, if any, shall be subject to the availability of patients, opportunities available and student interest at <initiating unit>.
 - c. Coordinate planning with <partner institution> and the faculty members of that site regarding the management of clinical externship activities and performance as outlined in the mentor and student responsibilities portion of the course syllabus and handbook.
 - d. Inform students that while at <partner institution>, they will be subject to applicable rules, policies, procedures and regulations of both <partner institution> and <initiating unit>.
 - e. Inform students of their obligation to keep confidential any medical information entrusted to them by patients in accordance with the provisions of the Federal Privacy Act.
- II. Pursuant to this Agreement and pertaining to risk management, <initiating unit> will furthermore:
- a. Require that students assigned to <partner institution> be covered by professional liability insurance. For clinical experiences, the university’s professional liability insurance is only applicable to students completing a required component of the curriculum for their degree program. <partner institution> may require participating students to provide verification of their coverage.
 - b. Verify all student travel is registered in the Ohio State Travel Registration system
 - i. For Ohio State students traveling as a cohort or for recurring travel not administered by the Office of International Affairs, the sponsoring Ohio State unit

will establish an Ohio State Group Travel enrollment portal a minimum of 60-days prior to the initial enrollment (Contact: IRM@osu.edu)

- ii. For Ohio State students traveling individually, the sponsoring unit will direct student to self-register at: <http://go.osu.edu/registersupportedtravel>.
- iii. For all student travelers, registration includes enrollment in the supplemental insurance program for medical, medical evacuation, repatriation and security evacuation: <https://oia.osu.edu/health-and-safety/traveler-insurance.html>. A charge for the supplemental insurance premium will be assessed to the student statement of account unless the sponsoring unit has submitted an eRequest using “OIA - Study Abroad” as the internal vendor. Registration also completes the standard release of claims and waivers for The Ohio State University
- c. Confirm students travel registration at least two-weeks prior to travel. Confirmation requests can be sent to IRM@osu.edu
- d. For group or cohort programs, schedule a pre-departure orientation concerning travel logistics, health, safety and emergency response. The orientation may be conducted by an individual in the sponsoring department using an international risk management provided template or one may be scheduled with international risk management (45-days in advance) Contact: IRM@osu.edu.
- e. Identify an individual to serve as a unit emergency contact.
- f. Assume fiscal responsibility for Ohio State emergency response for students.

III. Pursuant to this Agreement, **<partner institution>** will:

- a. Retain sole responsibility for the care of all patients.
- b. Provide patients, physical facilities, equipment, and supplies necessary for the management of the clinical internship experience.
- c. Verify that student participation in the externship is occurring under the proper legal and immigration status of the host country.
- d. Be responsible for the appropriate supervision of students while at **<partner institution>**, including but not limited to:
 - i. Providing students with site-specific orientation materials for each clinical externship. Maintaining administrative and professional supervision of students insofar as their presence affects the operation of **<partner institution>** and/or the direct and indirect care of patients. Direct care to patients should be overseen by a licensed professional.
 - ii. Inform student of reporting protocol and medical treatment in the event of injury or exposure to infection.
 - iii. Providing evaluations of students’ performance in accordance with the guidelines and timelines outlined in the approved curriculum.
- e. Use information received from **<initiating unit>** regarding any student solely for purposes of performing its obligations hereunder and only in accordance with applicable provisions of the Family Educational Rights and Privacy Act (“FERPA”) (20 U.S.C. 1232g). **<partner institution>** shall not disclose or make such information available to any third party except as specifically permitted by FERPA.

- f. Request the removal of any student who <partner institution> determines to pose a risk to patient care or who fails to abide by applicable <partner institution> rules, policies, procedures or regulations.
- g. Provide all documentation, which <initiating unit> deems necessary to ensure compliance with the requirements of the <initiating unit>.
- h. Agree to periodic reviews of programs, policies, facilities, and overall clinical educational experience of <partner institution> as conducted by <initiating unit> or its designees.

III. General Provisions:

- a. Neither party shall unlawfully discriminate against any student in the performance of its obligations hereunder.
- b. In the event that any term or provision of this Agreement is to any extent held invalid or unenforceable by a court of competent jurisdiction, the remaining terms and provisions shall remain in full force and effect.
- c. This Agreement shall be interpreted according to the laws of the State of Ohio. Any legal actions, claims, or demands arising hereunder shall be handled in a court of competent jurisdiction in the State of Ohio.
- d. The terms of this Agreement contain the entire agreement of the parties and supersede any prior agreements, promises, negotiations or representations relating to the subject matter hereof.
- e. Students shall be responsible for providing their own transportation to and from <partner institution> and shall be responsible for all other personal expenses related to the clinical externship experience.
- f. The undersigned individuals represent that they are fully authorized to execute this Agreement on behalf of the respective parties.
- g. Neither party may assign any rights or obligations hereunder without the prior written consent of the other party.
- h. Ohio State student travel under the agreement is subject to the protocols of the International Travel Policy Committee (ITPC). Prior to Ohio State student travel, the sponsoring Ohio State unit will complete an IRM Initial Assessment regarding student health and safety conditions in the host country and host institution support. Travel to countries assigned a Tier 2-5 Ohio State Risk Designation (go.osu.edu/risktravel) will require additional assessment and approval by the ITPC.
- i. Liaison offices responsible for implementing provisions of the agreement:

The Ohio State University

<partner institution>

- j. This Agreement may be terminated by either party with or without cause upon written notice to the other party 45 days in advance of the next clinical externship experience.
- k. The term of this Agreement shall be ~~<X>~~ years from the latest date appearing below. This Agreement may be renewed for additional periods of ~~<X>~~ years if both institutions, acting independently, agree in writing to renew it at least six (6) months before it expires.

Signatures

For: The Ohio State University

For: <partner institution>

<Name> <Title> The Ohio State University	Date	<Name> <Title> <partner institution>	Date
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<Name> <Title> The Ohio State University	Date
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Michael Papadakis Senior Vice President for Business and Finance & Chief Financial Officer The Ohio State University	Date
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