SCHOOL OF
Allied Health
CENTER FOR HEALTH SCIENCES

Athletic Training
1111 West 17th Street
Tulsa, Oklahoma 74107
918-561-1457
https://health.okstate.edu/athletic-training

UNIFORM CLINICAL AFFILIATION AGREEMENT

WHEREAS, **Oklahoma State University Center for Health Sciences - Department of Athletic Training**, hereinafter referred to as "College," and **INDEPENDENT SCHOOL DISTRICT NO. 16 OF PAYNE COUNTY, OKLAHOMA d/b/a STILLWATER PUBLIC SCHOOLS** hereinafter referred to as "Clinical Facility", hereby form an affiliation for the Development of teaching programs in health care.

WITNESSETH:

WHEREAS, the parties named above are desirous of entering into this Agreement in order to set out their respective rights and duties hereunder; and,

WHEREAS, the goal of this Affiliation Agreement is to provide a learning experience for Athletic Training students in said Clinical Facility which the parties feel is essential to the education of the students; and,

WHEREAS, College, by association with Clinical Facility, will gain additional clinical facilities for teaching purposes and such affiliation will provide didactic resources to its Athletic Training students; and,

WHEREAS, it is the desire of said Clinical Facility and College to have teaching programs that are mutually coordinated and mutually beneficial; and,

WHEREAS, Clinical Facility and College wish to operate in a close affiliation and maintain high standards in health care and education as outlined by the various accrediting bodies of all parties; and,

WHEREAS, it is the desire of all parties to use Clinical Facility; and,

WHEREAS, Clinical Facility and College desire continuity of programs;

NOW, THEREFORE, the parties agree as follows:

1) College agrees to certify Athletic Training students of said College for clinical training at such reasonable times and in reasonable numbers as shall be mutually approved, providing professional and academic information (which shall be confidential in nature) about the assigned Athletic Training students as may be reasonably required by the Clinical Facility

2) All Athletic Training students who receive a portion of their education at the Clinical Facility will be directly supervised by the designated Clinical Faculty, or his/her designee, who shall be affiliated with the College and approved by the Clinical Facility Administrator.

3) Athletic Training students are not to be deemed employees of the Clinical Facility, nor should the facility pay them any compensation. Further, it is understood that the Athletic Training student will not be entitled to any employee benefits. The complete responsibility and control over the academic-related actions or non-actions of the Athletic Training students, performing hereunder, shall be with the College, the College's Clinical Faculty, and the attending supervisor(s).

4) Clinical Faculty or Clinical Facility may request College to withdraw any Athletic Training student whose conduct or practice is not in accordance with the requisite standard of care and College agrees to review and honor all such legitimate requests. The College, furthermore, may withdraw any Athletic Training student whose progress, conduct, or performance in practice does not meet its standards for continuation of the program.

5) College faculty members without staff appointment may observe and evaluate said Athletic Training students, but shall not supervise them.

6) College may assist Clinical Facility in rendering a service to the community; or in enlarging its scientific activities, if desired and approved by the Clinical Facility Administrator.

7) College retains exclusive power of appointment of its faculty.

8) Nothing in this Agreement shall be construed to limit the authority of the College over the education of its Athletic Training students, establishment of its curricula, or other operations and functions of the College, which remain the sole responsibility of the College.

9) All patients participating in the teaching program will be determined by the medical staff of said Clinical Facility. It is the responsibility of the Clinical Faculty, designated by the

College and/or the attending supervisor(s), to ensure that informed patient consent has been given by each individual patient participating in the teaching program.

10) Athletic Training students serving clerkships in the Clinical Facility shall be responsibly involved in patient management and allowed to participate in patient care from admission to discharge and aftercare, subject to limitations provided by law and restrictions imposed by the attending physician(s). The Clinical Facility shall provide adequate facilities for Athletic Training students to make this program effective.

11) Athletic Training students from the College assigned to Clinical Facility shall be covered by professional liability insurance in accordance with the college or University's prevailing policies. College shall provide evidence of this coverage at the request of Clinical Facility

12) The Clinical Facility will maintain continual evaluation of the quality of patient care to ensure that it meets professional standards.

13) The Clinical Facility and said College recognize the legal requirements involved in the area of civil rights and will not discriminate because of race, creed, color, sex, age, or national origin.

14) Other terms and conditions:

- Athletic Training students will be required to complete all state-required OSHA trainings.
- Athletic Training students will be required to have a cleared background checks on file with the Clinical Facility.

15) This Agreement shall be in effect the day and year hereinafter written and shall continue in full force until June 30, 2025 and thereafter from year to year. Either party may terminate this Agreement, without further cost or liability of any kind or nature, by submitting written notice to the other, 90 days prior to the date that termination is required.

IN WITNESS WHEREOF, the parties hereto have caused this Agreement to be executed by their duly authorized officers, effective the 30th day of September, 2024.

INDEPENDENT SCHOOL DISTRICT NO. 16 OF PAYNE COUNTY, OKLAHOMA d/b/a STILLWATER PUBLIC SCHOOLS

By: _____

Title: School Board President of Stillwater Public Schools

Date: _____

OKLAHOMA STATE UNIVERSITY CENTER FOR HEALTH SCIENCES COLLEGE OF OSTEOPATHIC MEDICINE

By: _____

Title: Jeffrey S. Stroup, Pharm.D., BCPS, FCCP
Provost of OSU CHS

Date: _____

PROFESSIONAL LIABILITY INSURANCE INFORMATION SHEET

Name (please print) _____

Address _____

Phone _____

Professional Liability Insurance Co. (Complete name and address)

_____

_____

Financial Limits _____

Type of Coverage: _____ Claims Made _____

Occurrence _____

Date of Expiration _____
(Month) (Day) (Year)

I hereby agree that the information I have provided is correct and complete to the best of my knowledge, and further, that any changes in this information will be forwarded to the Oklahoma State University College of Osteopathic Medicine.

_____ _____

Date Signature