Partnership Agreement

UW School of Medicine and Public Health – Dept. of Family Medicine

Primary Care Clerkship (PCC)
Community Project Sites
Arranged in collaboration with the Wisconsin AHEC (Area Health Education Center) System

Wisconsin AHEC placement coordinator:

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<tr>
<th>NAME</th>
<th>PHONE</th>
<th>EMAIL</th>
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2012-13 PCC Clerkship Rotation:
- ROT-1: 7/9-8/29/12
- ROT-2: 9/4-10/24/12
- ROT-3: 10/29-12/19/12
- ROT-4: 1/7-2/27/13
- ROT-5: 3/4-4/24/13
- ROT-6: 4/30-6/19/13

Name of Student: ________________________________________________
Student Email: ________________________________________________
Student Phone: ____________________________

Community Organization: ________________________________________

Name of Agency Supervisor: ______________________________________
Agency Sup. Email: ________________________________
Agency Sup. Phone: __________________________

Address where service will occur: ______________________________________

The purpose of the community project component of this clerkship is to enrich academic course work through student participation in selected community organizations and at the same time provide services to the community organizations so they may meet their mission and goals. This memorandum is intended to clarify the expectations and responsibilities of each party.

Goals and Expectations for Medical Students include:

- Increased familiarity with local/regional social issues and health disparities faced by medically underserved populations.

- Opportunities to identify and explore public health and population health topics being addressed by the community agency.

- Increased understanding of what it means to be an effective citizen in our community and how the skills/insights gained during the project work are important to future patient care.

- Increased awareness of the work performed by community organizations to address public health and population health priorities.
The organization agrees to:

- Provide a minimum of 24 hours of supervised volunteer work experience to the student.
- Orient the student to the agency’s overall mission and the population being served, and to provide specific training or orientation to the student where appropriate.
- Designate a staff person to serve as the primary supervisor for the student.
- Notify the AHEC placement coordinator of any problem with a student or of any relevant changes in the program or agreed upon activities.
- At the end of the project, provide feedback on the quality of the student’s work, and the outcome of the project.

The student agrees to:

- Serve a minimum of 24 hours on-site in direct service to a local community organization.
- Establish a mutually agreed-upon schedule with the agency to fulfill this commitment.
- Act professionally at all times, e.g. adhere to appropriate dress codes and follow other professional guidelines as required by the organization.
- Maintain strict confidentiality regarding all client information.

The Wisconsin AHEC placement coordinator agrees to:

- Consult with agencies in identifying appropriate service-learning activities for the student.
- Facilitate mutually-satisfactory matching of students with organizations.
- Provide initial orientation to the purpose and intent of participating in community projects.
- Provide on-going follow-up support to students and/or agency supervisors, when necessary.
- Check in with both the student and the agency supervisor at the mid-point of the rotation to assess the progress of the project.

In the following space, the student should:

1) Summarize his/her understanding of the service activities he/she will be engaging in:

2) Identify the relevant public health or population health topics and underserved population(s):

Agreed-upon schedule for completing service commitment: __________________________________________
____________________________________________________________________________________

Student Signature ___________________________________________ Date ____________

Agency Supervisor Signature ___________________________________________ Date ____________

AHEC Placement Coordinator Signature ______________________________ Date ____________

NOTE: This form should be returned to the Wisconsin AHEC placement coordinator (scan attached to email preferred) no later than the end of the second week of the rotation.