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SERVICE AGREEMENT

This Service Agreement (“Agreement”) is dated April 11, 2023 and is between Touro University (“TUC”), a California nonprofit public corporation, whose address is 1310 Club Drive, Vallejo, CA 94592 (“Contractor”), and the County of Fresno, a political subdivision of the State of California, whose address is 1221 Fulton Street, Fresno, CA 93721 (“County”).

Recitals

A. The County has an agreement with TUC to provide public health internship placement and preceptorship opportunities to TUC’s students, effective as of February 25, 2020 The current three (3) year Agreement with the Contractor, A-20-080 expired on February 24, 2023. The County, through its Department of Public Health, operates public health programs at various locations, primarily at the Brix-Mercer building: located at 1221 Fulton Street, Fresno, CA, 93721, hereinafter referred to as “Facility or Facilities”.

B. TUC operates the College of Education and Health Science (CEHS), the College of Osteopathic Medicine (COM), and the College of Pharmacy (COP) in Vallejo, California and operates a branch campus in Henderson, Nevada with Colleges of Osteopathic Medicine and Health and Human Services. CEHS is comprised of three programs: The Graduate School of Education (accredited by the California Commission on Teacher Credentialing and the Western Association of Schools and Colleges), the Joint Master of Science in Physician Assistant Studies Program (accredited by the Accreditation Review Commission on Education for the Physician Assistant, Inc.), and the Public Health Program (accredited by the Council on Education for Public Health). Contractor desires that its students (Master of Public Health students, Master of Science in Physician Assistant Studies/Master of Public Health students, Doctor of Osteopathic Medicine/Master of Public Health students, and Doctor of Pharmacy/Master of Public Health students, obtain practical public health experience at the County’s Public Health Facilities through participation in the Contractor’s public health field preceptorship program (“Program”).

1 C. County deems it beneficial to participate in the Contractor's Program for the purpose of
2 providing practical public health experience at its Public Health Facilities for TUC students
3 pursuant to the terms and conditions of this Agreement.
4

5 **Article 1**

6 **Contractor's Services**

7 1.1 **Scope of Services.** The Contractor shall perform all of the services provided in
8 Exhibit A to this Agreement, titled "Preceptor Handbook 2022-23"

9 1.2 **Representation.** The Contractor represents that it is qualified, ready, willing, and
10 able to perform all of the services provided in this Agreement.

11 1.3 **Compliance with Laws.** The Contractor shall, at its own cost, comply with all
12 applicable federal, state, and local laws and regulations in the performance of its obligations
13 under this Agreement, including but not limited to workers compensation, labor, and
14 confidentiality laws and regulations.

15 1.4 **Student Contact Information.** TUC shall complete and send to County contact
16 information for each student enrolled in the Program which shall include the student's name,
17 address and telephone number prior to the beginning date of the planned educational and
18 training experience and observational opportunity. County shall only use the student contact
19 information to fulfil its obligations under this Agreement and agrees not to release any
20 information in the student profile to any third party.

21 1.5 **Schedule of Assignments.** TUC shall notify the "County Designee" (as defined in
22 Section 2.2), designated by the County from time to time, of TUC's planned schedule of student
23 assignment, including the name of each student, and the student's level of academic
24 preparation and length and dates of the educational and training experience and observational
25 opportunity.

26 1.6 **TUC Program Coordinator.** TUC shall designate a faculty member as TUC
27 Program Coordinator who shall coordinate with County Designee in planning the Program.
28

1 1.7 **Records.** TUC shall maintain all personnel and academic records of TUC students
2 participating in the Program.

3 1.8 **Rules and Regulations.** TUC shall enforce rules and regulations governing the
4 students that are mutually agreed upon by TUC and County. TUC shall instruct its students on
5 the general requirements of The Joint Commission on Accreditation of Healthcare Organizations
6 (“JCAHO”), Centers for Medicare and Medicaid Services (“CMS”) and the Health Insurance
7 Portability and Accountability Act (HIPAA”). TUC shall require that its students comply with all
8 applicable Health Care and Office Facility policies and Federal and State regulatory
9 requirements including, but not limited to JCAHO, CMS, and HIPAA.

10 1.9 **Students Responsibilities.** TUC shall notify the students who participate in the
11 Program at the County Facilities that they are responsible for the following:

- 12 a) Following the clinical and administrative policies, procedures, rules and
13 regulations of County.
- 14 b) Arranging for their transportation and living arrangements when not
15 provided by TUC.
- 16 c) Arranging for and assuming the cost of their health insurance.
- 17 d) Meeting all applicable health standards established by TUC and any
18 applicable governmental authority and implemented by County for each
19 County’s Public Health Facility. County shall have the right to terminate
20 from the Program any student when the health status of such student is
21 detrimental to the health and/or safety of County patients or staff as
22 determined by County.
- 23 e) Assuming responsibility for treatment of any illness or injury the student
24 may have while participating in the Program, obtaining necessary
25 immunizations and a tuberculin test, and having an annual health
26 examination.
- 27 f) As required by a specific Program, maintaining current certification of
28 proof of immunization or immunity against rubella and measles, and PPD

1 test or chest x-ray showing no active tuberculosis. Maintain proof of
2 immunization or immunity against Hepatitis B, or proof of declination of
3 the Hepatitis B vaccination in conformity with Occupational Safety and
4 Health Administration (OSHA) standards. As per CDC guidelines,
5 maintain proof of immunity or immunization against tetanus and pertussis.

6 g) Keeping all patient information confidential. No student shall have access
7 to or have the right to receive any medical record, except, when
8 necessary, in the regular course of the practical experience. The
9 discussion, transmission or narration in any form by students of any
10 patient information of a personal nature, medical or otherwise, obtained in
11 the regular course of the Program is forbidden except as a necessary part
12 of the practical experience.

13 h) Following the dress code of the County's Facilities and wearing name
14 badges identifying themselves as students.

15 i) Attending an orientation of the County's Facilities.

16 j) Complying with the rules and regulations that have been developed by
17 TUC to govern student activities during assignment to a training at County
18 Facilities, which are included in Exhibit A – Preceptor Handbook 2021-22.

19 **1.10 Payroll Taxes and Withholdings.** TUC shall be solely responsible for any payroll
20 taxes, withholdings, workers' compensation and any other insurance or benefits of any kind for
21 employees and agents of TUC providing services under this Agreement. TUC shall defend,
22 indemnify and hold County harmless against all claims against County by employees or agents
23 of TUC with respect to payroll taxes, withholdings, workers' compensation and other insurance
24 benefits.

25 **1.11 Students Insurance.** TUC shall provide County with a certificate of insurance or
26 other written confirmation that each student participating in the Program carries health
27 insurance.

1 **Article 2**

2 **County's Responsibilities**

3 2.1 **Educational and training experience and observational opportunity.** The County
4 shall accept from TUC the mutually agreed upon number of students enrolled in the Program
5 and shall provide said students with supervised practical experience.

6 2.2 **Access to Facilities.** County shall permit students enrolled in the Program access to
7 County Facilities as appropriate and necessary for the Program, provided that the presence of
8 the students shall not interfere with the activities of County.

9 2.3 **County Rules & Regulations.** County shall instruct the students on County rules
10 and regulations, as well as the application of JCAHO, CMS and HIPAA requirements specific to
11 the County. County hereby accepts Exhibit A, which incorporates by reference the applicable
12 rules and regulations of the County, as the rules and regulations that shall govern TUC students
13 during their training assignment at the County.

14 2.4 **Withdrawal of Students.** County may request TUC to withdraw from the Program
15 any student determines is not performing satisfactorily, or who refuses to follow County's
16 administrative policies, procedures, rules, and regulations. Such request must be in writing and
17 must include a statement as to the reason or reasons why County desires to have the student
18 withdrawn TUC shall comply with such request within five (5) days of receipt of the written
19 request by TUC.

20 2.5 **Emergency Health Care First Aid.** County shall, on any day when students are
21 receiving training at the Facilities, provide the students necessary emergency health care or first
22 aid for accidents occurring in the Facilities. Except for such emergency assistance, County shall
23 have no obligation to furnish medical or surgical care to any student.

24 2.6 **Maintenance of Patient Services.** County shall be responsible for developing,
25 maintaining and providing services to all its patients and County will at all times provide an
26 adequate, competent staff to be responsible for the development, maintenance and provision of
27 these services to County patients.

1 **Article 5**

2 **Notices**

3 5.1 **Contact Information.** The persons and their addresses having authority to give and
4 receive notices provided for or permitted under this Agreement include the following:

5 **For the County:**

6 Director, County of Fresno
7 Department of Public Health
8 P. O. Box 11867
9 Fresno, CA 93775

10 **For the Contractor:**

11 Touro University California
12 Public Health Program
13 College of Education and Health Sciences
14 1310 Club Drive
15 Vallejo, California 94952
16 Attention: Dr. Lisa Norton, Dean

17 5.2 **Change of Contact Information.** Either party may change the information in section
18 5.1 by giving notice as provided in section 5.3.

19 5.3 **Method of Delivery.** Each notice between the County and the Contractor provided
20 for or permitted under this Agreement must be in writing, state that it is a notice provided under
21 this Agreement, and be delivered either by personal service, by first-class United States mail, by
22 an overnight commercial courier service, by telephonic facsimile transmission, or by Portable
23 Document Format (PDF) document attached to an email.

24 (A) A notice delivered by personal service is effective upon service to the recipient.

25 (B) A notice delivered by first-class United States mail is effective three County
26 business days after deposit in the United States mail, postage prepaid, addressed to the
27 recipient.

28 (C) A notice delivered by an overnight commercial courier service is effective one
County business day after deposit with the overnight commercial courier service,
delivery fees prepaid, with delivery instructions given for next day delivery, addressed to
the recipient.

5.4 **Claims Presentation.** For all claims arising from or related to this Agreement,
nothing in this Agreement establishes, waives, or modifies any claims presentation

1 requirements or procedures provided by law, including the Government Claims Act (Division 3.6
2 of Title 1 of the Government Code, beginning with section 810).

3 **Article 6**

4 **Termination and Suspension**

5 6.1 **Termination for Non-Allocation of Funds.** The terms of this Agreement are
6 contingent on the approval of funds by the appropriating government agency. If sufficient funds
7 are not allocated, then the County, upon at least 30 days' advance written notice to the
8 Contractor, may:

9 (A) Modify the services provided by the Contractor under this Agreement; or

10 (B) Terminate this Agreement.

11 6.2 **Termination for Breach.**

12 (A) Upon determining that a breach (as defined in paragraph (C) below) has
13 occurred, the County may give written notice of the breach to the Contractor. The written
14 notice may suspend performance under this Agreement and must provide at least 30
15 days for the Contractor to cure the breach.

16 (B) If the Contractor fails to cure the breach to the County's satisfaction within the
17 time stated in the written notice, the County may terminate this Agreement immediately.

18 (C) For purposes of this section, a breach occurs when, in the determination of the
19 County, the Contractor has:

20 (1) Obtained or used funds illegally or improperly;

21 (2) Failed to comply with any part of this Agreement;

22 (3) Submitted a substantially incorrect or incomplete report to the County; or

23 (4) Improperly performed any of its obligations under this Agreement.

24 6.3 **Termination without Cause.** In circumstances other than those set forth above, the
25 County may terminate this Agreement by giving at least 30 days advance written notice to the
26 Contractor.

27 6.4 **No Penalty or Further Obligation.** Any termination of this Agreement by the County
28 under this Article 6 is without penalty to or further obligation of the County.

1 7.3 **Conflict of Interest.** No officer, employee or agent of the County who exercises any
2 function or responsibility for planning and carrying out of the services provided under this
3 Agreement shall have any direct or indirect personal financial interest in this Agreement. In
4 addition, no employee of the County shall be employed by the Contractor under this Agreement
5 to fulfill any contractual obligations with the County. Contractor shall comply with all Federal,
6 State of California and local conflict of interest laws, statutes and regulations, which shall be
7 applicable to all parties and beneficiaries under this Agreement and any officer, employee or
8 agent of the County.

9 7.4 **Change of Leadership/Management.** In the event of any change in the status of
10 Contractor's leadership or management, Contractor shall provide written notice to County within
11 thirty (30) days from the date of change. Such notification shall include any new leader or
12 manager's name, address and qualifications. "Leadership or management" shall include any
13 employee, member, or owner of Contractor who either a) directs individuals providing services
14 pursuant to this Agreement, b) exercises control over the manner in which services are
15 provided, or c) has authority over Contractor's finances.

16 7.5 **Lobbying Activity.** None of the funds provided under this Agreement shall be used
17 for publicity, lobbying or propaganda purposes designed to support or defeat legislation pending
18 in the Congress of the United States of America or the Legislature of the State of California.

19 7.6 **State Energy Conservation.** Contractor must comply with the mandatory standards
20 and policies relating to energy efficiency, which are contained in the State Energy Conservation
21 Plan issued in compliance with 42 United States (US) Code sections 6321, et. seq.

22 7.7 **Clean Air and Water.** In the event the funding under this Agreement exceeds One
23 Hundred Fifty Thousand and No/100 Dollars (\$150,000), Contractor shall comply with all
24 applicable standards, orders or requirements issued under the Clean Air Act contained in 42
25 U.S. Code 7601 et seq; the Clean Water Act contained in U.S. Code 1368 et seq.; and any
26 standards, laws and regulations, promulgated thereunder. Under these laws and regulations,
27 CONTRACTOR shall assure:
28

1 (A) No facility shall be utilized in the performance of the Agreement that has been
2 listed on the Environmental Protection Agency (EPA) list of Violating Facilities;

3 (B) County shall be notified prior to execution of this Agreement of the receipt of any
4 communication from the Director, Office of Federal Activities, U.S. EPA indicating that a
5 facility to be utilized in the performance of this Agreement is under consideration to be
6 listed on the EPA list of Violating Facilities;

7 (C) County and U.S. EPA shall be notified about any known violation of the above
8 laws and regulations; and,

9 (D) This assurance shall be included in every nonexempt subgrant, contract, or
10 subcontract.

11 **7.8 Audits and Inspections.** The Contractor shall at any time during business hours,
12 and as often as the County may deem necessary, make available to the County for examination
13 all of its records and data with respect to the matters covered by this Agreement. The
14 Contractor shall, upon request by the County, permit the County to audit and inspect all of such
15 records and data necessary to ensure Contractor's compliance with the terms of this
16 Agreement.

17 If this Agreement exceeds ten thousand dollars (\$10,000.00), Contractor shall be subject to
18 the examination and audit of the California State Auditor for a period of three (3) years after final
19 payment under contract (Government Code Section 8546.7).

20 In addition, Contractor shall cooperate and participate with County's fiscal review process
21 and comply with all final determinations rendered by the County's fiscal review process. If
22 County reaches an adverse decision regarding Contractor's services to consumers, it may result
23 in the disallowance of payment for services rendered; or in additional controls to the delivery of
24 services, or in the termination of this Agreement, at the discretion of County's DPH Director or
25 designee. If as a result of County's fiscal review process a disallowance is discovered due to
26 Contractor's deficiency, Contractor shall be financially liable for the amount previously paid by
27 County to Contractor and this disallowance will be adjusted from Contractor's future payments,
28

1 at the discretion of County's DPH Director or designee. In addition, County shall have the sole
2 discretion in the determination of fiscal review outcomes, decisions and actions.

3 **7.9 Single Audit Clause.**

4 (A) If Contractor expends Seven Hundred Fifty Thousand Dollars (\$750,000) or more
5 Federal and Federal flow-through monies, Contractor agrees to conduct an annual audit
6 in accordance with the requirements of the Single Audit Standards as set forth in Office
7 of Management and Budget (OMB) Title 2 of the Code of Federal Regulations, Chapter
8 II, Part 200. Contractor shall submit said audit and management letter to County. The
9 audit must include a statement of findings or a statement that there were no findings. If
10 there were negative findings, Contractor must include a corrective action plan signed by
11 an authorized individual. Contractor agrees to take action to correct any material non-
12 compliance or weakness found as a result of such audit. Such audit shall be delivered
13 to County's DPH Administration for review within nine (9) months of the end of any fiscal
14 year in which funds were expended and/or received for the program. Failure to perform
15 the requisite audit functions as required by this Agreement may result in County
16 performing the necessary audit tasks, or at the County's option, contracting with a public
17 accountant to perform said audit, or may result in the inability of County to enter into
18 future agreements with the Contractor.

19 (B) A single audit report is not applicable if all Contractor's Federal contracts do not
20 exceed the Seven Hundred Fifty Thousand Dollars (\$750,000) requirement or
21 Contractor's federal funding is through Drug Medi-Cal.

22 **Article 8**

23 **Confidentiality**

24 **8.1 Confidentiality.** All services performed by the Contractor under this Agreement
25 shall be in strict conformance with all applicable Federal, State of California and/or local laws
26 and regulations relating to confidentiality.

27 **8.2 Health Insurance Portability and Accountability Act**

28 A. The parties to this Agreement shall be in strict conformance with all

1 applicable Federal and State of California laws and regulations, including but not limited to
2 Sections 5328, 10850, and 14100.2 *et seq.* of the Welfare and Institutions Code, Sections 2.1 and
3 431.300 *et seq.* of Title 42, Code of Federal Regulations (CFR), Section 56 *et seq.* of the California
4 Civil Code and the Health Insurance Portability and Accountability Act (HIPAA), including but not
5 limited to Section 1320 D *et seq.* of Title 42, United States Code (USC) and its implementing
6 regulations, including, but not limited to Title 45, CFR, Sections 142, 160, 162, and 164, The Health
7 Information Technology for Economic and Clinical Health Act (HITECH) regarding the
8 confidentiality and security of patient information, and the Genetic Information Nondiscrimination
9 Act (GINA) of 2008 regarding the confidentiality of genetic information.

10 Except as otherwise provided in this Agreement, Contractor, as a Business
11 Associate of County, may use or disclose Protected Health Information (PHI) to perform functions,
12 activities or services for or on behalf of County, as specified in this Agreement, provided that such
13 use or disclosure shall not violate the Health Insurance Portability and Accountability Act (HIPAA),
14 USC 1320d *et seq.* The uses and disclosures of PHI may not be more expansive than those
15 applicable to COUNTY, as the “Covered Entity” under the HIPAA Privacy Rule (45 CFR 164.500
16 *et seq.*), except as authorized for management, administrative or legal responsibilities of the
17 Business Associate.

18 B. Contractor, including its subcontractors and employees, shall protect, from
19 unauthorized access, use, or disclosure of names and other identifying information, including
20 genetic information, concerning persons receiving services pursuant to this Agreement, except
21 where permitted in order to carry out data aggregation purposes for health care operations [45
22 CFR Sections 164.504 (e)(2)(i), 164.504 (3)(2)(ii)(A), and 164.504 (e)(4)(i)] This pertains to any
23 and all persons receiving services pursuant to a COUNTY funded program. This requirement
24 applies to electronic PHI. Contractor shall not use such identifying information or genetic
25 information for any purpose other than carrying out CONTRACTOR’S obligations under this
26 Agreement.

27 C. Contractor, including its subcontractors and employees, shall not disclose
28 any such identifying information or genetic information to any person or entity, except as otherwise

1 specifically permitted by this Agreement, authorized by Subpart E of 45 CFR Part 164 or other law,
2 required by the Secretary, or authorized by the client/patient in writing. In using or disclosing PHI
3 that is permitted by this Agreement or authorized by law, Contractor shall make reasonable efforts
4 to limit PHI to the minimum necessary to accomplish intended purpose of use, disclosure or
5 request.

6 D. For purposes of the above sections, identifying information shall include, but
7 not be limited to name, identifying number, symbol, or other identifying particular assigned to the
8 individual, such as finger or voice print, or photograph.

9 E. For purposes of the above sections, genetic information shall include
10 genetic tests of family members of an individual or individual, manifestation of disease or disorder
11 of family members of an individual, or any request for or receipt of, genetic services by individual or
12 family members. Family member means a dependent or any person who is first, second, third, or
13 fourth degree relative.

14 F. Contractor shall provide access, at the request of County, and in the time
15 and manner designated by County, to PHI in a designated record set (as defined in 45 CFR
16 Section 164.501), to an individual or to County in order to meet the requirements of 45 CFR
17 Section 164.524 regarding access by individuals to their PHI. With respect to individual
18 requests, access shall be provided within thirty (30) days from request. Access may be
19 extended if Contractor cannot provide access and provides individual with the reasons for the
20 delay and the date when access may be granted. PHI shall be provided in the form and format
21 requested by the individual or County.

22 Contractor shall make any amendment(s) to PHI in a designated record
23 set at the request of County or individual, and in the time and manner designated by County in
24 accordance with 45 CFR Section 164.526.

25 Contractor shall provide to County or to an individual, in a time and
26 manner designated by County, information collected in accordance with 45 CFR Section
27 164.528, to permit County to respond to a request by the individual for an accounting of
28 disclosures of PHI in accordance with 45 CFR Section 164.528.

1 G. Contractor shall report to County, in writing, any knowledge or reasonable
2 belief that there has been unauthorized access, viewing, use, disclosure, security incident, or
3 breach of unsecured PHI not permitted by this Agreement of which it becomes aware, immediately
4 and without reasonable delay and in no case later than two (2) business days of discovery.
5 Immediate notification shall be made to COUNTY's Information Security Officer and Privacy Officer
6 and County's DPH HIPAA Representative, within two (2) business days of discovery. The
7 notification shall include, to the extent possible, the identification of each individual whose
8 unsecured PHI has been, or is reasonably believed to have been, accessed, acquired, used,
9 disclosed, or breached. Contractor shall take prompt corrective action to cure any deficiencies and
10 any action pertaining to such unauthorized disclosure required by applicable Federal and State
11 Laws and regulations. Contractor shall investigate such breach and is responsible for all
12 notifications required by law and regulation or deemed necessary by County and shall provide a
13 written report of the investigation and reporting required to County's Information Security Officer
14 and Privacy Officer and County's DPH HIPAA Representative. This written investigation and
15 description of any reporting necessary shall be postmarked within the thirty (30) working days of
16 the discovery of the breach to the addresses below:
17

18 County of Fresno
19 Dept. of Public Health
20 HIPAA Representative
(559) 600-6439
21 P.O. Box 11867
Fresno, CA 93775

County of Fresno
Dept. of Public Health
Privacy Officer
559) 600-6405
P.O. Box 11867
Fresno, CA 93775

County of Fresno
Information Technology Services
Information Security Officer
(559) 600-5800
333 W. Pontiac Way
Clovis, CA 93612

22 H. Contractor shall make its internal practices, books, and records relating to
23 the use and disclosure of PHI received from County or created or received by the Contractor on
24 behalf of County, in compliance with HIPAA's Privacy Rule, including, but not limited to the
25 requirements set forth in Title 45, CFR, Sections 160 and 164. Contractor shall make its internal
26 practices, books, and records relating to the use and disclosure of PHI received from County or
27 created or received by the Contractor on behalf of County, available to the United States
28 Department of Health and Human Services (Secretary) upon demand.

1 Contractor shall cooperate with the compliance and investigation reviews
2 conducted by the Secretary. PHI access to the Secretary must be provided during the
3 Contractor's normal business hours, however, upon exigent circumstances access at any time
4 must be granted. Upon the Secretary's compliance or investigation review, if PHI is unavailable to
5 Contractor and in possession of a Subcontractor, it must certify efforts to obtain the information to
6 the Secretary.

7 I. Safeguards

8 Contractor shall implement administrative, physical, and technical
9 safeguards as required by the HIPAA Security Rule, Subpart C of 45 CFR 164, that reasonably
10 and appropriately protect the confidentiality, integrity, and availability of PHI, including electronic
11 PHI, that it creates, receives, maintains or transmits on behalf of County and to prevent
12 unauthorized access, viewing, use, disclosure, or breach of PHI other than as provided for by this
13 Agreement. Contractor shall conduct an accurate and thorough assessment of the potential risks
14 and vulnerabilities to the confidentiality, integrity and availability of electronic PHI. Contractor shall
15 develop and maintain a written information privacy and security program that includes
16 administrative, technical and physical safeguards appropriate to the size and complexity of
17 Contractor's operations and the nature and scope of its activities. Upon County's request,
18 Contractor shall provide County with information concerning such safeguards.

19 Contractor shall implement strong access controls and other security
20 safeguards and precautions in order to restrict logical and physical access to confidential,
21 personal (e.g., PHI) or sensitive data to authorized users only. Said safeguards and precautions
22 shall include the following administrative and technical password controls for all systems used to
23 process or store confidential, personal, or sensitive data:

24 1. Passwords must not be:

25 a. Shared or written down where they are accessible or
26 recognizable by anyone else; such as taped to computer screens, stored under keyboards, or
27 visible in a work area;

28 b. A dictionary word; or

1 c. Stored in clear text

2 2. Passwords must be:

3 a. Eight (8) characters or more in length;

4 b. Changed every ninety (90) days;

5 c. Changed immediately if revealed or compromised; and

6 d. Composed of characters from at least three (3) of the

7 following four (4) groups from the standard keyboard:

8 1) Upper case letters (A-Z);

9 2) Lowercase letters (a-z);

10 3) Arabic numerals (0 through 9); and

11 4) Non-alphanumeric characters (punctuation

12 symbols).

13 Contractor shall implement the following security controls on each
14 workstation or portable computing device (e.g., laptop computer) containing confidential,
15 personal, or sensitive data:

16 1. Network-based firewall and/or personal firewall;

17 2. Continuously updated anti-virus software; and

18 3. Patch management process including installation of all operating

19 system/software vendor security patches.

20 Contractor shall utilize a commercial encryption solution that has received
21 FIPS 140-2 validation to encrypt all confidential, personal, or sensitive data stored on portable
22 electronic media (including, but not limited to, compact disks and thumb drives) and on
23 portable computing devices (including, but not limited to, laptop and notebook computers).

24 Contractor shall not transmit confidential, personal, or sensitive data via
25 e-mail or other internet transport protocol unless the data is encrypted by a solution that has
26 been validated by the National Institute of Standards and Technology (NIST) as conforming to
27 the Advanced Encryption Standard (AES) Algorithm. Contractor must apply appropriate
28 sanctions against its employees who fail to comply with these safeguards. Contractor must

1 adopt procedures for terminating access to PHI when employment of employee ends.

2 J. Mitigation of Harmful Effects

3 Contractor shall mitigate, to the extent practicable, any harmful effect that
4 is suspected or known to Contractor of an unauthorized access, viewing, use, disclosure, or
5 breach of PHI by Contractor or its subcontractors in violation of the requirements of these
6 provisions. Contractor must document suspected or known harmful effects and the outcome.

7 K. Contractor's Subcontractors

8 Contractor shall ensure that any of its contractors, including
9 subcontractors, if applicable, to whom Contractor provides PHI received from or created or
10 received by Contractor on behalf of County, agree to the same restrictions, safeguards, and
11 conditions that apply to Contractor with respect to such PHI and to incorporate, when
12 applicable, the relevant provisions of these provisions into each subcontract or sub-award to
13 such agents or subcontractors.

14 L. Employee Training and Discipline

15 Contractor shall train and use reasonable measures to ensure
16 compliance with the requirements of these provisions by employees who assist in the
17 performance of functions or activities on behalf of County under this Agreement and use or
18 disclose PHI and discipline such employees who intentionally violate any provisions of these
19 provisions, including termination of employment.

20 M. Termination for Cause

21 Upon County's knowledge of a material breach of these provisions by
22 Contractor, County shall either:

- 23 1. Provide an opportunity for Contractor to cure the breach or end
24 the violation and terminate this Agreement if Contractor does not cure the breach or end the
25 violation within the time specified by County; or
26 2. Immediately terminate this Agreement if Contractor has breached
27 a material term of these provisions and cure is not possible.
28 3. If neither cure nor termination is feasible, the County's Privacy

1 Officer shall report the violation to the Secretary of the U.S. Department of Health and Human
2 Services.

3 N. Judicial or Administrative Proceedings

4 County may terminate this Agreement in accordance with the terms and
5 conditions of this Agreement as written hereinabove, if: (1) Contractor is found guilty in a
6 criminal proceeding for a violation of the HIPAA Privacy or Security Laws or the HITECH Act;
7 or (2) a finding or stipulation that the Contractor has violated a privacy or security standard or
8 requirement of the HITECH Act, HIPAA or other security or privacy laws in an administrative or
9 civil proceeding in which the Contractor is a party.

10 O. Effect of Termination

11 Upon termination or expiration of this Agreement for any reason,
12 Contractor shall return or destroy all PHI received from County (or created or received by
13 Contractor on behalf of County) that Contractor still maintains in any form and shall retain no
14 copies of such PHI. If return or destruction of PHI is not feasible, it shall continue to extend the
15 protections of these provisions to such information, and limit further use of such PHI to those
16 purposes that make the return or destruction of such PHI infeasible. This provision shall apply
17 to PHI that is in the possession of subcontractors or agents, if applicable, of Contractor. If
18 Contractor destroys the PHI data, a certification of date and time of destruction shall be
19 provided to the County by Contractor.

20 P. Disclaimer

21 County makes no warranty or representation that compliance by
22 Contractor with these provisions, the HITECH Act, HIPAA or the HIPAA regulations will be
23 adequate or satisfactory for Contractor's own purposes or that any information in Contractor's
24 possession or control, or transmitted or received by Contractor, is or will be secure from
25 unauthorized access, viewing, use, disclosure, or breach. Contractor is solely responsible for
26 all decisions made by Contractor regarding the safeguarding of PHI.

27 Q. Amendment

28 The parties acknowledge that Federal and State laws relating to

1 electronic data security and privacy are rapidly evolving and that amendment of these
2 provisions may be required to provide for procedures to ensure compliance with such
3 developments. The parties specifically agree to take such action as is necessary to amend this
4 agreement in order to implement the standards and requirements of HIPAA, the HIPAA
5 regulations, the HITECH Act and other applicable laws relating to the security or privacy of
6 PHI. County may terminate this Agreement upon thirty (30) days written notice in the event
7 that Contractor does not enter into an amendment providing assurances regarding the
8 safeguarding of PHI that County in its sole discretion, deems sufficient to satisfy the standards
9 and requirements of HIPAA, the HIPAA regulations and the HITECH Act.

10 R. No Third-Party Beneficiaries

11 Nothing express or implied in the terms and conditions of these provisions
12 is intended to confer, nor shall anything herein confer, upon any person other than County or
13 Contractor and their respective successors or assignees, any rights, remedies, obligations or
14 liabilities whatsoever.

15 S. Interpretation

16 The terms and conditions in these provisions shall be interpreted as
17 broadly as necessary to implement and comply with HIPAA, the HIPAA regulations and
18 applicable State laws. The parties agree that any ambiguity in the terms and conditions of
19 these provisions shall be resolved in favor of a meaning that complies and is consistent with
20 HIPAA and the HIPAA regulations.

21 T. Regulatory References

22 A reference in the terms and conditions of these provisions to a section in
23 the HIPAA regulations means the section as in effect or as amended.

24 U. Survival

25 The respective rights and obligations of Contractor as stated in this
26 Section shall survive the termination or expiration of this Agreement.

27 V. No Waiver of Obligations

28 No change, waiver or discharge of any liability or obligation hereunder on

1 any one or more occasions shall be deemed a waiver of performance of any continuing or
2 other obligation or shall prohibit enforcement of any obligation on any other occasion.

3 **Article 9**

4 **Data Security.** For the purpose of preventing the potential loss, misappropriation or
5 inadvertent access, viewing, use or disclosure of County data including sensitive or personal
6 client information; abuse of County resources; and/or disruption to County operations,
7 individuals and/or agencies that enter into a contractual relationship with the County for the
8 purpose of providing services under this Agreement must employ adequate data security
9 measures to protect the confidential information provided to TUC by the County, including but
10 not limited to the following:

11 9.1 **TUC-Owned Mobile, Wireless, or Handheld Devices.** TUC may not connect to
12 County networks via personally owned mobile, wireless or handheld devices, unless the
13 following conditions are met:

- 14 a) TUC has received authorization by County for telecommuting purposes;
- 15 b) Current virus protection software is in place;
- 16 c) Mobile device has the remote wipe feature enabled; and
- 17 d) A secure connection is used.

18 9.2 **TUC-Owned Computers or Computer Peripherals.** TUC may not bring TUC-
19 owned computers or computer peripherals into the County for use without prior authorization
20 from the County's Chief Information Officer, and/or designee(s), including but not limited to
21 mobile storage devices. If data is approved to be transferred, data must be stored on a secure
22 server approved by the County and transferred by means of a Virtual Private Network (VPN)
23 connection, or another type of secure connection. Said data must be encrypted.

24 9.3 **County-Owned Computer Equipment.** TUC or anyone having an employment
25 relationship with the County, may not use County computers or computer peripherals on non-
26 County premises without prior authorization from the County's Chief Information Officer, and/or
27 designee(s).

1 9.4 TUC may not store County's private, confidential or sensitive data on any hard-disk
2 drive, portable storage device, or remote storage installation unless encrypted.

3 9.5 TUC shall be responsible to employ strict controls to ensure the integrity and security
4 of County's confidential information and to prevent unauthorized access, viewing, use or
5 disclosure of data maintained in computer files, program documentation, data processing
6 systems, data files and data processing equipment which stores or processes County data
7 internally and externally.

8 9.6 Confidential client information transmitted to one party by the other by means of
9 electronic transmissions must be encrypted according to Advanced Encryption Standards (AES)
10 of 128 BIT or higher. Additionally, a password or pass phrase must be utilized.

11 9.7 TUC is responsible to immediately notify County of any violations, breaches or
12 potential breaches of security related to County's confidential information, data maintained in
13 computer files, program documentation, data processing systems, data files and data
14 processing equipment which stores or processes County data internally or externally.

15 9.8 County shall provide oversight to TUC's response to all incidents arising from a
16 possible breach of security related to County's confidential client information provided to TUC.
17 TUC will be responsible to issue any notification to affected individuals as required by law or as
18 deemed necessary by County in its sole discretion. TUC will be responsible for all costs incurred
19 as a result of providing the required notification.

20 **Article 10**

21 **Independent Contractor**

22 10.1 **Status.** In performing under this Agreement, the Contractor, including its officers,
23 agents, employees, and volunteers, is at all times acting and performing as an independent
24 contractor, in an independent capacity, and not as an officer, agent, servant, employee, joint
25 venturer, partner, or associate of the County.

26 10.2 **Verifying Performance.** The County has no right to control, supervise, or direct the
27 manner or method of the Contractor's performance under this Agreement, but the County may
28 verify that the Contractor is performing according to the terms of this Agreement.

1 Agreement, excluding attorney-client privileged communications. The Contractor shall, upon
2 request by the County, permit the County to audit and inspect all of such records and data to
3 ensure the Contractor's compliance with the terms of this Agreement.

4 **13.2 Public Records.** The County is not limited in any manner with respect to its public
5 disclosure of this Agreement or any record or data that the Contractor may provide to the
6 County. The County's public disclosure of this Agreement or any record or data that the
7 Contractor may provide to the County may include but is not limited to the following:

8 (A) The County may voluntarily, or upon request by any member of the public or
9 governmental agency, disclose this Agreement to the public or such governmental
10 agency.

11 (B) The County may voluntarily, or upon request by any member of the public or
12 governmental agency, disclose to the public or such governmental agency any record or
13 data that the Contractor may provide to the County, unless such disclosure is prohibited
14 by court order.

15 (C) This Agreement, and any record or data that the Contractor may provide to the
16 County, is subject to public disclosure under the Ralph M. Brown Act (California
17 Government Code, Title 5, Division 2, Part 1, Chapter 9, beginning with section 54950).

18 (D) This Agreement, and any record or data that the Contractor may provide to the
19 County, is subject to public disclosure as a public record under the California Public
20 Records Act (California Government Code, Title 1, Division 7, Chapter 3.5, beginning
21 with section 6250) ("CPRA").

22 (E) This Agreement, and any record or data that the Contractor may provide to the
23 County, is subject to public disclosure as information concerning the conduct of the
24 people's business of the State of California under California Constitution, Article 1,
25 section 3, subdivision (b).

26 (F) Any marking of confidentiality or restricted access upon or otherwise made with
27 respect to any record or data that the Contractor may provide to the County shall be
28

1 disregarded and have no effect on the County's right or duty to disclose to the public or
2 governmental agency any such record or data.

3 **13.3 Public Records Act Requests.** If the County receives a written or oral request
4 under the CPRA to publicly disclose any record that is in the Contractor's possession or control,
5 and which the County has a right, under any provision of this Agreement or applicable law, to
6 possess or control, then the County may demand, in writing, that the Contractor deliver to the
7 County, for purposes of public disclosure, the requested records that may be in the possession
8 or control of the Contractor. Within five business days after the County's demand, the
9 Contractor shall (a) deliver to the County all of the requested records that are in the Contractor's
10 possession or control, together with a written statement that the Contractor, after conducting a
11 diligent search, has produced all requested records that are in the Contractor's possession or
12 control, or (b) provide to the County a written statement that the Contractor, after conducting a
13 diligent search, does not possess or control any of the requested records. The Contractor shall
14 cooperate with the County with respect to any County demand for such records. If the
15 Contractor wishes to assert that any specific record or data is exempt from disclosure under the
16 CPRA or other applicable law, it must deliver the record or data to the County and assert the
17 exemption by citation to specific legal authority within the written statement that it provides to
18 the County under this section. The Contractor's assertion of any exemption from disclosure is
19 not binding on the County, but the County will give at least 10 days' advance written notice to
20 the Contractor before disclosing any record subject to the Contractor's assertion of exemption
21 from disclosure. The Contractor shall indemnify the County for any court-ordered award of costs
22 or attorney's fees under the CPRA that results from the Contractor's delay, claim of exemption,
23 failure to produce any such records, or failure to cooperate with the County with respect to any
24 County demand for any such records.

25 **Article 14**

26 **Disclosure of Self-Dealing Transactions**

27 **14.1 Applicability.** This Article 14 applies if the Contractor is operating as a corporation
28 or changes its status to operate as a corporation.

1 15.8 **Severability.** If anything in this Agreement is found by a court of competent
2 jurisdiction to be unlawful or otherwise unenforceable, the balance of this Agreement remains in
3 effect, and the parties shall make best efforts to replace the unlawful or unenforceable part of
4 this Agreement with lawful and enforceable terms intended to accomplish the parties' original
5 intent.

6 15.9 **Nondiscrimination.** During the performance of this Agreement, the Contractor shall
7 not unlawfully discriminate against any employee or applicant for employment, or recipient of
8 services, because of race, religious creed, color, national origin, ancestry, physical disability,
9 mental disability, medical condition, genetic information, marital status, sex, gender, gender
10 identity, gender expression, age, sexual orientation, military status or veteran status pursuant to
11 all applicable State of California and federal statutes and regulation.

12 15.10 **No Waiver.** Payment, waiver, or discharge by the County of any liability or obligation
13 of the Contractor under this Agreement on any one or more occasions is not a waiver of
14 performance of any continuing or other obligation of the Contractor and does not prohibit
15 enforcement by the County of any obligation on any other occasion.

16 15.11 **Entire Agreement.** This Agreement, including its exhibits, is the entire agreement
17 between the Contractor and the County with respect to the subject matter of this Agreement,
18 and it supersedes all previous negotiations, proposals, commitments, writings, advertisements,
19 publications, and understandings of any nature unless those things are expressly included in
20 this Agreement. If there is any inconsistency between the terms of this Agreement without its
21 exhibits and the terms of the exhibits, then the inconsistency will be resolved by giving
22 precedence first to the terms of this Agreement without its exhibits, and then to the terms of the
23 exhibits.

24 15.12 **No Third-Party Beneficiaries.** This Agreement does not and is not intended to
25 create any rights or obligations for any person or entity except for the parties.

26 15.13 **Authorized Signature.** The Contractor represents and warrants to the County that:

27 (A) The Contractor is duly authorized and empowered to sign and perform its
28 obligations under this Agreement.

1 (B) The individual signing this Agreement on behalf of the Contractor is duly
2 authorized to do so and his or her signature on this Agreement legally binds the
3 Contractor to the terms of this Agreement.

4 15.14 **Electronic Signatures.** The parties agree that this Agreement may be executed by
5 electronic signature as provided in this section.

6 (A) An “electronic signature” means any symbol or process intended by an individual
7 signing this Agreement to represent their signature, including but not limited to (1) a
8 digital signature; (2) a faxed version of an original handwritten signature; or (3) an
9 electronically scanned and transmitted (for example by PDF document) version of an
10 original handwritten signature.

11 (B) Each electronic signature affixed or attached to this Agreement (1) is deemed
12 equivalent to a valid original handwritten signature of the person signing this Agreement
13 for all purposes, including but not limited to evidentiary proof in any administrative or
14 judicial proceeding, and (2) has the same force and effect as the valid original
15 handwritten signature of that person.

16 (C) The provisions of this section satisfy the requirements of Civil Code section
17 1633.5, subdivision (b), in the Uniform Electronic Transaction Act (Civil Code, Division 3,
18 Part 2, Title 2.5, beginning with section 1633.1).

19 (D) Each party using a digital signature represents that it has undertaken and
20 satisfied the requirements of Government Code section 16.5, subdivision (a),
21 paragraphs (1) through (5), and agrees that each other party may rely upon that
22 representation.

23 (E) This Agreement is not conditioned upon the parties conducting the transactions
24 under it by electronic means and either party may sign this Agreement with an original
25 handwritten signature.

26 15.15 **Counterparts.** This Agreement may be signed in counterparts, each of which is an
27 original, and all of which together constitute this Agreement.


28 [SIGNATURE PAGE FOLLOWS]

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The parties are signing this Agreement on the date stated in the introductory clause.

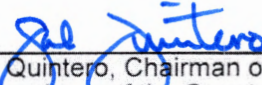
TOURO UNIVERSITY, a California nonprofit
public benefit corporation

COUNTY OF FRESNO



Lisa Norton, Ed.D.

1310 Club Drive
Vallejo, California 94592



Sal Quintero, Chairman of the Board of
Supervisors of the County of Fresno

Attest:
Bernice E. Seidel
Clerk of the Board of Supervisors
County of Fresno, State of California

By: 

Deputy

Exhibit A
Preceptor Handbook 2022-23

TOURO UNIVERSITY
CALIFORNIA



PUBLIC HEALTH PROGRAM



**TUC MPH
PRECEPTORS**



**CDPH SAFE
COSMETICS PROGRAM**



**KAISER
PERMANENTE
VALLEJO TEAM**



**ALAMEDA COUNTY
PUBLIC HEALTH**

**COMMUNITY HEALTH &
HEALTH EQUITY AND
CRIMINAL JUSTICE
FIELD STUDY
PRECEPTOR HANDBOOK**



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APPENDIX

32

Course Title: Public Health Field Study (PHFS)
Course Number: PBHC 600-4 (4 Units)
PBHC 600-6 (6 Units)
PBHC 600A: (Continuation – 0 Units)
Faculty: Nemesia Kelly, MPH
Associate Professor & Field Study Coordinator
Chair, Health Equity & Criminal Justice
Concentration
Office Phone: 707-638-5827
Cell Phone: 707-731-7436
Fax: 707-638-5871
Office: Wilderman Hall 403
Email: nkelly@touro.edu
Zoom: <https://zoom.us/j/4593745278?pwd=ZmJKM1c5ZWZsNGR4c3dzRFgxZkpJZz09>

COURSE OVERVIEW

The Public health Field Study (PHFS) is the Applied Practice Experience (APE) required for all Master of Public Health (MPH) students enrolled in the Touro University California (TUC) Public Health Program. As part of the MPH Culminating Experience, the PHFS is a structured practice experience in a professional public health setting which allows students to apply and integrate the knowledge and skills acquired during the didactic period into public health practice. The PHFS is a course in which students apply and integrate the knowledge acquired during the didactic period into public health practice. In this course, students gain exposure to a wide range of public health skills and functions, such as needs assessment, data collection/analysis, program planning, program evaluation, policy development, educational campaigns, and any aspects of applied research. The PHFS allows students the opportunity to exhibit proficiency in at least one of these public health areas, including program implementation or policy analysis. Literature reviews, research and review of best practices, participation in grant writing, and presentations of findings are some examples of standard field study activities and tasks for our students. This can also include surveys, needs assessments, presentations, reports, papers, or posters for peer-review, grant writing, website development, social media health campaigns focused on public health messaging. Clinical experience involving individual patient care or health facility administration is not considered to be relevant public health experience.

Like internships, field study placements provide students opportunities to apply and integrate academically acquired skills and knowledge to practice in a professional setting designed to develop skills and competencies and to increase the level of proficiency. Thus, students who conduct field studies at affiliated placement sites are often referred to as interns.

The students' work in the field study projects should be valued by the organization and contribute to meeting the organization's goals or mission. Field study projects must also address a public health issue and student participation should contribute to strategic solutions.

The practical skills and the knowledge gained through the Field Study are essential to students' academic and professional growth, preparing them for careers in population and public health. In this course,

students are provided opportunities to cultivate core public health skills, explore career options, and develop professional goals and networking skills by building and maintaining valuable connections with professionals in the public health field. Students are encouraged to maximize and take full advantage of the field study experience as it can help place them on the path to obtaining jobs and building careers in the field of public health.

As our program trains many students from diverse backgrounds and academic abilities, we expect them to make significant contributions to the organizations of our community partners. Our students have professional, interpersonal, leadership, and teamwork skills that enable them to take initiative and provide valuable support to your public health goals and objectives.

THE ROLE OF COMMUNITY PARTNERSHIPS

The TUC Public Health Program is committed to the ongoing development and continuation of successful partnerships with local and international public health organizations to provide high quality applied practice experiences for our students. It is through this vital collaboration, that our partners play an essential role as preceptors and mentors in Public Health Field Study (PHFS) course to support the culminating public health education and training of our students. For nearly two decades, our students have continued to acquire and develop core public health skills in the field to satisfy PHFS course requirements under the guidance of experienced public health and interdisciplinary professionals.

Under the direct supervision of preceptors, our students have engaged in public health practice through various opportunities to apply and integrate their academic knowledge and transfer their skills to “real world” situations addressing public health issues while making meaningful contributions to our partners on the ground. In the PHFS, students are encouraged to develop interpersonal skills, team-working skills, professionalism, and project management experience. In addition, they improve their communication, gain confidence, and develop access to professional networks.

The TUC Public Health Program is proud to work with partnering organizations at the local, state, and international level. We are indebted to our dedicated partners and preceptors for the work they do to meet today's and tomorrow's public health challenges. To guarantee a return on their investment in our students, we endeavor to continue building and expanding upon these important and long-standing relationships. This investment remains vital to the growth of field study opportunities and to the expansion of the public health workforce.

COURSE LEARNING OBJECTIVES

Through the PHFS, students MPH students will be able to:

1. Integrate public health theory, knowledge, and skills in a practice setting.
2. Complete a defined project(s) in an area of public health practice including core public health functions such as a needs assessment, program plan, program evaluation, policy development, educational campaign, applied research project.
3. Exhibit proficiency in at least one of the following areas: program planning, needs assessment and data gathering, program implementation, applied research, program evaluation, policy analysis, or

data analysis under the guidance of an experienced preceptor.

4. Demonstrate understanding of the role of the social determinants of health and social justice as it relates to their individual field study experience.
5. Demonstrate competence in a public health practice setting.
6. Demonstrate leadership, teamwork, communication skills, and creativity in the development of a public health practice activity.

The PHFS will involve:

- a) Participation in “project-oriented” work in a public health setting. Examples of appropriate tasks may include the following, but are not limited to involvement in:
 - Developing, implementing and or evaluating health promotion programs for specific population(s).
 - Conducting research on a public health issue of interest (e.g., study and assessment instrument design, data collection, data entry, analysis, and assessment of findings).
 - Conducting policy analysis or advocacy related to a public health issue.
 - Conducting a community needs assessment.
 - Coalition building and coordination of resources.
 - Developing, pre-testing and evaluation of curriculum and or health education materials.
 - Contributing to the development of grant proposals.
 - Communicating health education needs and information to policy makers and the public.
- b) Development of a Scope of Work to implement the selected project.
- c) Presentation of project findings in a **field study report** that addresses a health issue of the community and contributes to resolving practical health problems.

PUBLIC HEALTH COMPETENCIES

Through a collaborative process with the Preceptor, the Student is required to identify the following Public Health Program Competencies for their field study project, which must be addressed by the Scope of Work. Competencies are presented in an Inventory format as a required course deliverable.

- (One (1) competency from at least two out of the five following Council on Education for Public Health (CEPH) 2016 competency categories:
 - **Evidence-based Approaches to Public Health**
 - **Public Health & Health Care Systems**
 - **Planning & Management to Promote Health**
 - **Policy in Public Health**
 - **Leadership**
- One (1) competency from each of the following CEPH 2016 competency categories:

- **Communication**
 - **Interprofessional Practice**
 - **Systems Thinking**
- One (1) cross-cutting competency
 - Three (3) concentration competencies (Community Action for Health, Global Health, Health Equity and Criminal Justice).

MPH CONCENTRATIONS

As a working partnership between the Program and the public health practice organization, this course provides a public health fieldwork experience for all MPH students, which can be conducted either locally or abroad. The TUC MPH Program prepares students to master the basic core competencies by covering the core areas of public health that are integrated with competencies specific to globally relevant public health practice, focused on underserved communities locally or on issues at the intersection of criminal justice and public health. Students have the option of enrolling in one of three concentrations: Community Health, Global Health, and Health Equity and Criminal Justice. Depending upon the concentration area of study, students will engage in period of public health practice under the direct supervision of a preceptor. The combination of the knowledge acquired in classroom and the skill mastered in the field study provides competencies that enable the graduate to address public health challenges in local or global settings.

The **Community Action for Health (CAH) Concentration** provides students with a broad-based foundation in the fundamentals of public health and prepares students to work with communities to achieve health equity through the promotion of social justice policies and practices. The CAH Concentration is designed for those who are most interested in working for state and local health departments and other public health focused organizations.

Touro University California's MPH Program is the first graduate program, accredited by the Council on Education for Public Health (CEPH) to offer an **MPH concentration in Health Equity and Criminal Justice (HECJ)**. Framed within core public health concepts, the HECJ Concentration encompasses Community Health and focuses on the intersection of health and the U.S. justice system and addresses the public health impacts of criminal justice involvement and mass incarceration on individuals, families, and communities. Students are provided with a specialized curriculum centered on the criminal justice system, strategies for prevention and reduction of justice involvement, correctional health systems, reentry and recidivism, and social and community impacts of incarceration.

PHFS PLACEMENT SITES

TUC has developed a network of placement sites with partnering organizations that provide our students a variety of placement sites from which to gain valuable field experience. Students are matched and placed in sites that provide a quality learning experience based on their public health interests, skills, experience, and expectations. Students conduct their field studies under the guidance of site preceptors and course coordinators at affiliated public health organizations, including but not limited to local health departments, state and federal health agencies, non-profit community-based public health organizations, hospitals,

clinics, managed care organizations, academic institutions, California correctional facilities, philanthropic and voluntary health agencies, and non-governmental organizations. To view the TUC Network of Community Health & HECJ Field Study Placement Sites, please refer to the Appendix.

COURSE PREREQUISITES

To be eligible to begin the PHFS, students must have completed all MPH core and concentration-required courses. In addition, all new students are required to complete the following online course prerequisites:

- [Online Training Course on Professionalism for MPH Students provided by TRAIN.org](#)
- [Cultural Diversity, Health Disparities, and PH Online Training provided by TRAIN.org](#)

STUDENT COHORTS

The TUC Public Health Program is well-represented by a diverse student population consisting of:

- Independent MPH (IMPH) students enrolled in the MPH Degree Program.
- MPH Dual Degree students (Doctor of Osteopathic Medicine (DO)/MPH and Doctor of Pharmacy (PharmD)/MPH Dual Degree) who are concurrently enrolled in the colleges of Osteopathic Medicine (COM) and Pharmacy (COP).
- Joint Master of Science in Physician Assistants Studies (MSPAS)/MPH Students.

Fact sheets for each degree program are available in the Appendix.

STUDENT PLACEMENT BLOCKS

IMPH Students:

IMPH students who seek full-time PHFS placements are expected to complete 30-40 field study hours per week over a **12-week block (equivalent to 400+ hours)** from mid-May to the last week of July during the summer academic session of Year 2. IMPH students may also complete the PHFS during the fall semesters from August to December or the spring semesters from January to April.

Part-time Field Study Option: This option is available to IMPH students enrolled who need to maintain employment while enrolled in the Field Study course, and who are unable to complete a more than 20 field study hours per week. Part-time field study student interns may extend a field study to be completed over the course of two (2) consecutive field study terms (semesters or academic sessions) (20-24 weeks - equivalent to 400+ hours), in which they are expected to complete a minimum of 20 field study hours per week. After initial enrollment in the PHFS and partially their completing field study hours, part-time MPH student interns will receive a grade of INC (Incomplete) and will be required to register for the 0-Unit *PBHC 600A* Field Study Continuation course in the following semester to indicate "active MPH student status" and continue the PHFS. Once the student's field study has been successfully completed, the student's grade of INC will be changed to P (Pass).

Joint MSPAS/MPH Students:

Joint MSPAS/MPH students are required to complete 30-40 field study hours per week over a **6-week block** during the spring semester of Year 3 in the PA Program, which occurs between fixed dates (e.g., February 13 - March 24, 2023). Occasionally, these students may be allowed to complete the PHFS earlier beginning in the summer or fall terms of their final year. *Note: Due to COVID-19, the Public Health Program facilitated early PHFS placements for the Joint MSPAS/MPH Class of 2023 beginning in Spring 2022. All CAH and HECJ students enrolled in this cohort have been matched with PHFS placement sites for the 2022-2023 academic year. The regular PHFS placement schedule for Joint MSPAs/MPH occurring in the spring of Year 3 will resume for the next cohort (the Class of 2024).*

MPH Dual Degree Students:

MPH Dual Degree (DO/MPH & PharmD/MPH) students are expected to complete 30-40 field study hours per week over a **6-week block during the summer, fall, or spring terms of Years 3 or 4**. Placement start/end dates for these students are not fixed and will vary.

DO/MPH Dual Degree students: These students have a unique opportunity to utilize the field experience to satisfy two different courses in the two colleges in which they are concurrently enrolled: TUC CEHS PHFS and the College of Osteopathic Medicine (COM) DO Program Non-Clinical Clerkship or Research Elective Rotation. Students who pursue this opportunity are required to submit an Elective Rotation Application/Proposal, including the resume of their assigned PHFS preceptor, as supporting documentation to the COM Clinical Education Department. Upon obtaining acceptance for field study placements, DO/MPH students routinely request resumes from their assigned field study preceptors. **Note:** If you agree to mentor a dual degree student as a field study intern, please provide them your CV and/or resume as supporting documentation for their Elective Rotation Application/Proposal.

Part-time Field Study Option: MPH Dual degree students may extend a field study to be completed over the course of two (2) consecutive field study terms (semesters or academic sessions – 12 weeks), in which they are expected to complete a minimum of 20 hours per week. After initial enrollment in the PHFS and partially their completing field study hours, students will receive a grade of INC (Incomplete) and are required to register for the PBHC 600A Field Study Continuation 0-Unit course in the following semester to continue the PHFS.

COURSE FORMATS

Depending upon the needs of the placement site, students may complete fully in-person, blended/hybrid, or fully virtual placements.

In-person (on-site) Format: All field study work must be conducted on-site under the supervision of the field study preceptor. All affiliated field study placement sites typically operate during normal business hours between Monday through Friday (8 a.m. to 5 p.m.); however, on occasion, students are requested by their preceptors to participate in special weekend (Saturdays and Sundays) events (e.g., meetings, or trainings sponsored by/affiliated with the placement site) as part of their field study projects. Students

must receive approval from their preceptors to complete field work hours on weekends at such events. Moreover, students are not permitted to complete field study hours on weekends by telecommuting or conducting field work from home. Specific work schedules are negotiated between the Preceptor and the Student.

Virtual Format: All field study work must be conducted under remote supervision by the field study preceptor(s) and/or site supervisory team members. Students will be permitted to telecommute or work from home remotely during the Field Study while social distancing measures are in place. Specific work schedules are negotiated between the Preceptor and the Student.

Blended/Hybrid Format: Students will need to arrange their schedules with their preceptors/sites to determine when they will be required to be on-site and working virtually.

Student Daily Field Work Schedule: Typically, students are allowed to work up to a maximum of 8 hours per day in their PHFS placements. With lunch breaks additional break times, daily PHFS hours usually total to 7 to 7.5 hours. However, if a PHFS placement site utilizes a 10/40 work schedule, students may work up to a maximum of three 10-hour days per week during their PHFS placements.

2022-2023 PHFS PLACEMENT PLANNING TIMELINE

IMPH Students (12 Weeks)

	Summer 2022	Fall 2022	Spring 2023
Placement Terms/Start & End Dates	May 9 – July 26	August 1 - December 16	January 2 – April 28
Students Submit Online PHFS Planning Forms, Cover Letters, and Resumes to Field Study Coordinator	February 15	May 1	October 1
New PHFS Site Registration Due (Requests for Placement @Unaffiliated Sites)	February 15	May 1	October 1
Field Study Coordinator Reminds Preceptors/Sites to Post Available PHFS Opportunities	February	May	October
Matching Process Begins	February - March	May	October
Field Study Coordinator Confirms PHFS Placement Opportunities	Depending on site availability as early as 6 weeks prior to general field study start dates or a minimum of 3 weeks prior to general field study start dates	Depending on site availability as early as 6 weeks prior to general field study start dates or a minimum of 3 weeks prior to general field study start dates	Depending on site availability as early as 6 weeks prior to general field study start dates or a minimum of 3 weeks prior to general field study start dates

Joint MSPAS/MPH, DO/MPH & PharmD/MPH Dual Degree Students (a minimum of 6 Weeks)

Placement Terms/Start & End Dates	May 9 – August 6 (Variable start/end dates)	August 1 - December 16 (Variable start/end dates)	January 2 – April 28 (Variable start/end dates)
Students Submit Online PHFS Planning Forms, Cover Letters, and Resumes to Field Study Coordinator	February 15	May 1	October 1

New PHFS Site Registration Due (Requests for Placement @Unaffiliated Sites)	February 15	May 1	October 1
Field Study Coordinator Reminds Preceptors/Sites to Post Available PHFS Opportunities	February	May	October
Field Study Coordinator Confirms PHFS Placement Opportunities	Depending on site availability as early as 6 weeks prior to general field study start dates or a minimum of 3 weeks prior to general field study start dates	Depending on site availability as early as 6 weeks prior to general field study start dates or a minimum of 3 weeks prior to general field study start dates	Depending on site availability as early as 6 weeks prior to general field study start dates or a minimum of 3 weeks prior to general field study start dates

PHFS STANDARDS AND LEARNING EXPECTATIONS

Standards for PHFS Sites:

To qualify as a placement site, organizations must be registered with the Public Health Program using our online registration at https://tuc.co1.qualtrics.com/jfe/form/SV_di0pZ2MWSSpZZz. In addition, all placement organizations must provide public health related planning, research and/or services and agree to:

- Provide access to staff and services necessary for educational training.
- Have one or more staff on-site with a graduate credential in public health or equivalent professional experience and education who will serve as a designated preceptor for student interns to direct and regular supervision throughout the placement (see Appendix for preceptor criteria).
- Offer opportunities for students to be exposed to a variety of organizational departments and individuals, functions and or tasks.
- Offer responsibilities to students that are relevant and appropriate to their individual field study learning goals and professional development.
- Provide students with a variety of experiences that are appropriate for full-time fieldwork that can be completed over 30-40 hours per week spanning 12 weeks for IMPH students and 6 weeks for MPH dual and joint degree students.
- Provide necessary access to data and program materials for students to complete their projects.
- Provide adequate organizational support and workspace for the students to the extent feasible and appropriate to the student's responsibilities allowing them to successfully complete field study activities during the period of placement.

PHFS Preceptor Responsibilities:

Our preceptors play a vital role in helping our students apply and integrate their academic knowledge to “real world” situations, projects or tasks while making meaningful contributions to a public health organization. Preceptors help to enrich the education of future practitioners in the public health field. Overall, preceptors are expected to provide supervision for the student and to ensure that assigned tasks meet not only the agency's needs, but to provide opportunities for the student's personal and professional growth. Preceptors should also serve as a liaison between field study site supervisors, project team members or staff, and the Field Study Coordinator. Preceptors are strongly encouraged to contact the Field Study Coordinator at any time if they have questions, and especially if any issues or problems should arise concerning the student's field study placement. Specific duties related to the student fieldwork learning objectives include:

- a) A mutual agreement on a public health project and field study objectives for the student to pursue.
- b) Assisting the student in developing the scope of work and identification of competencies.
- c) Development of a work schedule based on mutually agreed upon objectives for the field experience.
- d) Ensuring that a project in which the student can carve out ownership of the process and outcome is provided.
 - i. Review of policies and procedures with which the student is expected to comply.
 - ii. Completion/signing of the Field Study Contract
 - iii. Maintain accessibility to the student through a commitment to meeting with the student on a regular basis to discuss and critique the student’s work and progress (at least once per week).
 - iv. Encourage student to work independently while providing opportunities for data gathering and sharing information.
 - v. Become involved with and foster the student’s learning experience.
 - vi. Evaluate the student’s performance during and after the field experience via a scheduled site visit with the Field Study Coordinator or another Public Health Program faculty member and by completing the performance evaluation.

Once a student has been matched for a field study placement, the preceptor will be requested provide information regarding the agency’s clearance/onboarding requirements to the Public Health Program’s Field Study Coordinator and student.

PHFS Preceptor Checklists

Below are checklists of responsibilities for preceptors:

TUC PHFS Preceptor Checklist (In-Person Onsite Format)	
<i>Before the Field Study Placement</i>	<ul style="list-style-type: none"> <input type="checkbox"/> If possible, provide the Field Study Coordinator a description of the PHFS opportunity and the site’s expectations and requirements for the intern position. <input type="checkbox"/> Provide the Field Study Coordinator information regarding the organization’s student intern onboarding requirements. <input type="checkbox"/> Correspond or coordinate correspondence with the student to arrange a field study/internship interview. <input type="checkbox"/> Meet with/interview the student. <input type="checkbox"/> If possible, provide additional information that can help prepare the intern between the field study/internship acceptance date and Day 1 of their field study placement.

	<ul style="list-style-type: none"> ❑ If possible, provide any guidance to facilitate the process of developing an affiliation agreement/MOU contract to support the partnership between agency and TUC. ❑ Sign/date and TUC Public Health Program Field Study Letter of Agreement (Short-Term Affiliation Agreement) in support of the student’s placement (<i>if applicable</i>).
<p><i>During the Field Study Placement</i></p>	<ul style="list-style-type: none"> ❑ Assist in the orientation of the student to the agency’s policies and procedures to help students obtain a sense of organizational culture. ❑ Assist in the development of the student’s learning objectives. During the first week of the field study placement, the student is required to work with the preceptor(s) collaboratively to complete: <ul style="list-style-type: none"> ◇ A Scope of Work: Provides a work plan for field study projects focusing on core public health functions (e.g., disease surveillance, needs assessment, program planning, program evaluation, policy development, educational campaign, applied research) allowing them the opportunity to exhibit proficiency in areas such as program implementation, policy analysis, data collection, or data analysis ◇ Competency Inventory: A set of competencies that will be addressed in the Scope of work ◇ Field Study Contract between Student and Preceptor ◇ Selected Dates for the Field Study Site Visit: This is a mid-point assessment conducted remotely or in-person. ❑ Meet with the student at least once a week to discuss their progress and provide feedback, updates, and directions for tasks or activities. ❑ Contact the Field Study Coordinator with any questions, issues, or concerns. ❑ Participate in a mid-point assessment via a Field Study Site Visit remotely or in-person. <p><i>(Examples, templates, and guidelines for all the above can be made available upon request.)</i></p>

At the End of the Field Study Placement	<input type="checkbox"/> Assist in the evaluation of students' learning and performance by completing the Online Preceptor Evaluation of the Student.
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TUC PHFS Preceptor Checklist (Distance-Based Virtual/Remote Format)	
Overview: <ul style="list-style-type: none"> • Provides a virtual public health internship that provides flexible and distance-based real world public health field experience. • Students can intern from wherever they are with a broadband or Internet connection and a phone. • Requires remote communication with preceptors, supervisors, and teams via video conferencing, email, phone calls, text messaging, and synchronized collaborative files (e.g., Google docs.) • Allows students to serve a community while contributing to important projects that call for additional resources, time, and support 	
Before the Field Study Placement	<input type="checkbox"/> If possible, provide the Field Study Coordinator a description of the field study opportunity and the site's expectations and requirements for the intern position. <input type="checkbox"/> Provide the Field Study Coordinator information regarding the organization's student intern onboarding requirements. <input type="checkbox"/> Correspond or coordinate correspondence with the student to arrange a field study/internship interview. <input type="checkbox"/> Conduct a field study/internship interview with the student. <input type="checkbox"/> If possible, provide additional information that can help prepare the intern between the field study/internship acceptance date and Day 1 of their field study placement. <input type="checkbox"/> If possible, provide any guidance to facilitate the process of developing an affiliation agreement/MOU contract to support the partnership between agency and TUC. <input type="checkbox"/> Sign/date and TUC Public Health Program Field Study Letter of Agreement (Short-Term Affiliation Agreement) in support of the student's placement (<i>if applicable</i>).
During the Field Study Placement	<input type="checkbox"/> Orientate student to host site remotely.

▣ Assist in the orientation of the student to the agency's policies and procedures to help students obtain a sense of organizational culture. During the first week of the field study placement, the student is required to work with the preceptor(s) collaboratively to complete (please see attached zip file for examples):

◇ **A Scope of Work:** Provides a work plan for field study projects focusing on core public health functions (e.g., disease surveillance, needs assessment, program planning, program evaluation, policy development, educational campaign, applied research) allowing them the opportunity to exhibit proficiency in areas such as program implementation, policy analysis, data collection, or data analysis

◇ **Competency Inventory:** A set of competencies that will be addressed in the Scope of work (please refer to the competencies contained in the attached zip file)

◇ **Field Study Contract between Student and Preceptor** (see attached zip file)

◇ **Selected Dates for the Field Study Site Visit:** This is a mid-point assessment conducted remotely via phone or videoconference (see attached zip file).

▣ Communicate with the student via video conferencing, email, phone calls, text messaging, and synchronized collaborative files (e.g., Google docs).

▣ Meet remotely with the student at least once a week to discuss their progress and provide feedback, updates, and directions for tasks or activities.

▣ Contact the Field Study Coordinator with any questions, issues, or concerns.

▣ Participate in a mid-point assessment via a Field Study Site Visit via phone or video conference.

<i>At the End of the Field Study Placement</i>	<input type="checkbox"/> Assist in the evaluation of students' learning and performance by completing the Online Preceptor Evaluation of the Student.
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Student Responsibilities:

It is the student's responsibility to complete all deliverables and meet all deadlines outlined in the syllabus and course calendar. Students are responsible for the course competencies presented. Students are also responsible for checking Canvas regularly for changes to the schedule and syllabus and other announcements. Students are responsible for understanding and following class policies. In return for the commitment of the organization, the student has a responsibility to the organization. The PH Program expects students to behave professionally and develop a commitment to the organization and to their life-long professional development. Students must agree to:

- Adhere to TUC's Student Code of Conduct Policy and maintain an acceptable standard of professionalism at all times during the Field Study (see Appendix for Professional Code of Conduct for MPH Students).
- Communicate directly with the Field Study Coordinator immediately should any changes, issues, or problems arise that may delay or interrupt their field study placement.
- Participate setting goals for their own learning.
- Develop the scope of work and completes a competency inventory with assistance from the preceptor and feedback from the Field Study Coordinator.
- Return completed forms (Scope of Work, Competency Inventory and Field Study Contract, Selected Site Visit Dates Form).
- Perform assignments and activities identified in scope of work, seeking assistance from the preceptor, other agency staff or the faculty advisor when needed.
- Maintain contact with the advisor during placement.
- Assess the extent to which the field experience has met their needs by preparing a written *Field Study Report* and completing other assignments required by the field experience.
- Complete an evaluation of Field Study via an online survey within one week of the final field study end date.
- Depend on the student's degree program, fulfilling the requirement of 6 or 10 to 12-week field study placement (30-40 field study hours per week).
- Complete academic work and assigned papers relating to their internship.
- Behave in an ethically and morally professional manner.
- Perform professional quality work; and
- Conduct themselves consistent with the values of the organization.

Public Health Program Responsibilities

1. **Preparation and Professionalism:** The Program will adequately prepare the student for the public health field experience both academically and administratively. In addition, the Program will ensure that all students sign a professional code of conduct. Professional attributes are considered to be part of the academic performance of MPH students, which include honesty and integrity,

leadership, excellence and continuous improvement, ethical practice and public accountability, life-long learning and competency, respect for diverse individuals and organizations, the ability to work effectively with others in a team environment, follow through on commitments, take and give constructive feedback, follow directions, accept responsibility for own actions. Students are expected to demonstrate the legal, moral, and ethical standards required of a public health professional and display behavior that is consistent with these qualities. Among the characteristics included in this context are the knowledge, competence, demeanor, attitude, appearance, mannerisms, integrity, and morals displayed by the students to faculty, staff, preceptors, peers, members of the public, colleagues in public health and other settings. The Program expects nothing short of respect and professional demeanor at all times.

The Program will also provide all students guidelines on resume/curriculum vitae and interviewing with field study preceptors.

2. **Course Prerequisites:** The Program will require all new students to complete an [Online Training Course on Professionalism for MPH Students provided by TRAIN.org](#), the premier learning resource for professionals who protect the public's health. A free service of the [Public Health Foundation](#), www.train.org is part of the newly expanded TrainingFinder Real-time Affiliate Integrated Network (TRAIN). More information on the course is available through the [Public Health Training Centers/US Department of Health and Human Services, Health Resources and Services Administration](#). The course is sponsored by the Wisconsin Center for Public Health Education and Training (WiCPHET).
3. **Assignment:** The Program will be responsible for assigning students to sites that will provide a quality learning experience.
4. **Objectives:** The Program will provide field study learning objectives. Students and preceptors will be required to evaluate compliance with these learning objectives.
5. **Affiliation Agreements:** The Program will develop affiliation agreements with public health practice sites (see Appendix for templates of these agreements).
6. **Insurance:** The Program will assure that all students have current liability Insurance as defined below:

TUC shall procure and maintain in force during the term of this Agreement, at its sole cost and expense, insurance in amounts that are reasonably necessary to protect TUC and Institution from and against liability arising from or incident to the use of the Facilities by TUC students participating in the Program. Coverage under such insurance shall not be less than One Million Dollars (\$1,000,000) for each occurrence and Three Million Dollars (\$3,000,000) in the aggregate each for professional liability insurance and comprehensive general liability insurance. TUC shall provide Institution with a certificate of insurance evidencing the insurance coverage required under this Article VII. TUC shall further ensure that not less than thirty (30) days notice shall be provided to Institution of the cancellation of such insurance. TUC shall promptly notify Institution of any

cancellation, reduction, or other material change in the amount or scope of any coverage required hereunder.

The Program will also assure that all students have current health insurance.

7. **Student/Intern Onboarding Requirements:** The Program will ensure that students take the necessary steps to satisfy all required onboarding requirements (e.g., completion of forms/paperwork, health and immunization documentation, security scans/background checks, and drug testing/toxicology screenings) well before their field study start dates.
8. **Grading:** The Program will be responsible for assigning a final grade to each student.
9. **Issues or problems:** The Program will interact with preceptors and be available to address any issues, problems, or concerns of the student or the preceptor. Should any problems arise at the placement site and there are indications of breaches of professionalism by the student, the Field Study Coordinator will immediately intervene to facilitate a resolution. If the student has demonstrated unprofessionalism in their field study and a resolution is not possible allowing the student to continue their placement, they may be placed on academic probation and sent to the Academic Probation Committee. The Program retains the right to remove a student from a rotation.

THE PHFS MATCHING PROCESS

Step 1. The Field Study Coordinator will work to facilitate the placement process by matching the student's skills, qualifications, public health interests, and geographic location preference (within the TUC Network) with the requirements of existing affiliated placement sites. The Coordinator will provide preceptors student cover letters and resumes for review and consideration for an interview.

Step 2. A match is made and confirmed once a preceptor has confirmed that they would like to proceed with interviewing the student who has been informally recommended. At that point, an official PHFS placement match recommendation letter is emailed to the student and preceptor. The official placement recommendation letter and email communication to the student will clearly state that it is the **responsibility of the student** to contact the site preceptor or coordinator to confirm, secure, and finalize their placement.

It is important to note that a match recommendation from the Field Study Coordinator *does not necessarily guarantee a placement*. In most cases, students **are required to interview** with the site preceptor or coordinator to secure their field study placements and preceptors make final decisions to accept a student for a placement post interview.

In addition, the email correspondence will emphasize that the placement site may require agency clearance or student onboarding requirements, such as security scans or drug testing and direct students to ensure that all preliminary requirements are satisfied one to two months prior to the field study start date.

Placement match recommendation letters provide details on the course and fieldwork format and includes information and instructions for completing the field study deliverables, as well as a placement confirmation form to be completed and submitted by the student.

Step 3. Once the student field study placement has been confirmed by the preceptor/site, a contractual agreement or memorandum of understanding (MOU) or a short-term affiliation Letter of Agreement (LOA) with TUC will be prepared by the Field Study Coordinator to be signed by the two parties: The program/university and the placement site agency/organization. In some cases, a third-party signature is required of the student as part of the PHFS agreement. To develop field study placement partnerships with public health practice agencies and organizations, the Public Health Program utilizes both informal and formal institutional agreements. Informal institutional agreements are completed through short affiliation LOAs allowing placements for one student at a time during specific time periods throughout a semester (summer/fall/spring). An LOA must be generated for each student individually. Formal affiliation agreements or MOUs allow placements for multiple student placements during the length of the agreement, renewable after 5 years, affirming that parties will both benefit by making an experiential learning experience available to TUC students at the Agency or Organization. (Templates for both types of agreements are available upon request.)

Step 4. The Community Health Field Study Emergency Protocol has been designed to prepare for and facilitate rapid response to emergencies which may arise during the Field Study. Although no single plan or protocol can address all contingencies, Touro University California (TUC) recognizes the importance of establishing, in advance, policies and procedures to safeguard the welfare of students during their field study placements at affiliated community health field study sites. Preceptors will be required to **sign the Emergency Protocol Statement of Understanding prior to the start of a student's placement.** These forms will only need to be signed once by a preceptor and will be maintained in our office records. Please see Appendix for the Emergency Protocol and Incident Report Form.

PLACEMENT POLICIES

1) Students are required to notify the Field Study Coordinator immediately if they become aware of any changes, issues, or problems that may delay or interrupt their field study placement. If for some reason a student is not accepted for a recommended field study placement or is unable to begin a recommended placement or continue a confirmed placement due to events or circumstances beyond their control, the Field Study Coordinator will assist the student in finding an alternative placement based on site availability, the student's experience/qualifications, and location preference.

2) If a student declines to accept a recommended field study placement well before the placement start date due to changes in their public health interests or preference in placement site or geographical location, the Field Study Coordinator will assist the student in securing up to a maximum of one (1) additional field study placement.

3) If a student fails to follow up on a second recommended placement, they **will be responsible for independently securing their own field study placement at another site by completing the application process detailed in the EXCEPTIONS section of this handbook.** Further, if there is any indication that the student has committed a breach of professionalism resulting in a failed placement, the student may be placed on academic probation and sent to the Academic Probation Committee.

4) Cancellation requests for any confirmed field study placement initiated either by the Field Study Coordinator or the Student must be submitted to the Field Study Coordinator no later than 5 weeks prior to the student's intended field study start date. There is no guarantee that requests to cancel confirmed placements received after the 5-week cutoff will be approved. Students must be aware that cancellations can be extremely disruptive to the field study placement process and to the existing partnerships between the Public Health Program and field study placement sites and preceptors. Failure to comply with designated deadlines may result in a delay in a student's graduation. Again, if there is any indication that the student has committed a breach of professionalism resulting in a failed placement, the student may be placed on academic probation and sent to the Academic Probation Committee.

5) If a student chooses not to begin their confirmed field study placement that has been initiated either by the Field Study Coordinator or the Student, or ceases conducting their field study after beginning a placement that has been initiated either by the Field Study Coordinator or the Student, and their actions constitute a breach of professionalism, the student may not be eligible for a second placement recommendation from the Field Study Coordinator during that same semester or in subsequent semesters. Further, in such cases, students will be sent to the Academic Probation Committee. This policy applies to placements that have been initiated and confirmed either by the Field Study Coordinator or the Student.

6) With the exception of faculty with dual appointments with at Solano County (e.g., **Drug Safe Solano (DSS)** and **TUC Diabetes Research, Education, and Management Team - includes MOBEC, Vallejo/Solano County, CA (DREAM Team)**), and special boards, TUC faculty cannot serve as field study preceptors.

STUDENT INTERN ONBOARDING REQUIREMENTS

The Program ensures that all student interns fulfill certain agency clearance or onboarding requirements prior to beginning their field study placements, which may include completion of forms/paperwork, health and immunization documentation/screening, security scans/background checks, and drug testing/toxicology screenings.

TUC processes background checks for its students. In addition, all dual and joint students are required to satisfy requirements (health and immunization documentation/screening, security scans/background checks, and drug testing/toxicology screenings) routinely prior to beginning rotations for their clinical programs.

PHFS EXCEPTIONS & WAIVERS

Application for Placements at Unaffiliated Community Health & HECJ Field Study Sites: This application is required for students who wish to independently develop their own field study placements at unaffiliated sites (alternative public health agencies or organizations outside the existing TUC Network). Requests for such exceptions must undergo a vetting process requiring the Student's application to be evaluated by the Program Director and Field Study Coordinator.

Approval Criteria: The prospective site must meet the Program’s criteria to be approved as a PHFS placement site. Further, TUC and the Public Health Program must also meet the criteria of the proposed site required for affiliation, partnership, and/or collaboration per the PHFS Site Eligibility provided on page 14.

Student Requirements:

1. Students who identify potential public health practice entities as prospective Community Health & HECJ field study sites are advised to review the following sections in course syllabus at https://docs.google.com/document/d/1eLVt9N_5bdZPK-S2crRhZ1WugpZcfuUZHtRhLhC0xM/edit?usp=sharing
 - a. *Course Overview*
 - b. *Course Learning Objectives*
 - c. *PHFS Competencies*
2. Students are required to provide the *PHFS Preceptor Handbook* to their prospective preceptor/sites to share the following information which includes:
 - a. **Public Health Program Info Sheets** and the **Invitation to Prospective Sites to Develop PHFS Preceptorship Partnerships with TUC**
 - b. **Course Overview, Learning Objectives, PHFS Competencies, the Role of Community Partnerships**
 - c. **Guidelines for PHFS Sites & Preceptors, PHFS Standards and Learning Expectations for sites, students, and the Public Health Program, Preceptor Responsibilities, and Preceptor Checklists**
 - d. **PHFS Placement Timelines, Policies and Matching Process**
 - e. The web link for **Online Registration for New PHFS Placement Sites** for proposed sites and preceptors so that they may post their site/preceptor information, proposed PHFS projects, available learning objectives, research opportunities, onboarding requirements, etc.
3. Students are required to review the **Approval Criteria for Placement at Unaffiliated Community Health & HECJ Field Study Sites** and submit an **Application for Placement at Unaffiliated Community Health & HECJ Field Study Sites** by specified deadlines.
4. Students who plan to independently seek and establish their own field study placements at sites outside the TUC Network of Community Health Field Study Placement Sites must also complete the Online PHFS Planning Form, submit a resume to the Field Study Coordinator, and complete the course prerequisites.

Formal Requests to Apply Current Professional Public Health Employment to the Community Health/HECJ

Field Study: Independent MPH students who are currently employed at local public health practice agencies and organizations (for less than three continuous years) while enrolled in the Public Health Program may be permitted to apply their current professional public health employment towards the PHFS. **The agency/organization must be approved by the Public Health Program as an appropriate field study site and the projects to which the student employee is assigned must provide a Scope of Work that meets the criteria of the Public Health Program.** Students are required to submit a formal request to the Field Study Coordinator for approval to apply their current professional public health employment towards the PHFS. All requests are subject to review by committee and must be approved by the Program Director and Field Study Coordinator.

Unaffiliated Paid Internships: The Public Health Program does not manage paid internships. The majority of our affiliated placements sites currently offer non-paid internships. Occasionally, a small number of affiliated sites may have available funding to provide stipends for student interns. Students who are interested in paid internships are strongly encouraged to seek out paid internships at public health practice agencies/organizations independently. Seeking paid internships is a process similar to job search for positions at public health organizations.

Students who wish to apply a paid internship to the PHFS for academic credit, must have completed all core and Concentration-required courses prior to beginning their paid internship. Requests for paid internships to satisfy the Field Study must be approved by the Program. In addition, paid internships selected for the field study course must permit MPH students to complete 30-40 field study hours per week over a minimum of 10-12 weeks and MPH dual or joint students to complete 30-40 field study hours per week over a 6-week period.

Students are motivated to apply a paid internship at unaffiliated sites to the PHFS for academic credit must submit a formal request to the Field Study Coordinator at least one month prior to the planned field study/internship start date.

The Field Study Waiver (Criterion I): MPH students who can verify previous public health employment of three years of continuous, paid, public health employment prior to enrollment in the MPH program may be eligible for a waiver that would allow them to complete 30-40 field study hours per week over the course of 6 weeks reduced from 12 weeks. *(Clinical experience involving individual patient care or health facility administration is not considered relevant public health experience.)*

Relevant public health experience must include involvement in at least one of the following activities:

- Assessing, monitoring, or conducting surveillance of health conditions or delivery of services in a population.
- Establishing public health objectives and priorities.
- Conducting basic or applied research on population-based health problems including the behavioral, biological, or environmental risk factors; or
- Designing, implementing and/or evaluating policies and/or intervention strategies/programs.

To apply for this waiver, students are required to submit a separate a 2 to 3-page (single-spaced) narrative describing relevant public health work experience, including:

- Description of specific duties performed.
- Discussion of the impact or relevance of the experience to public health, highlighting knowledge, theories and concepts covered in MPH coursework
- List of skills/competencies gained in the experience (see MPH general and Concentration specific competencies specified in the MPH Learning Outcome Inventory; and
- Reference/contact person (preferably someone who supervised you) so that employment/involvement with the agency can be verified.

In addition, students are required to submit the **Application for the Field Study Waiver (Criterion I)** to Field Study Coordinator, Nemesia Kelly, via email to nkelly@touro.edu.

Applications are due at least 4 weeks prior to registration in the PHFS. Applications are subject to review by committee and all waivers must be approved by the Program Director and Field Study Coordinator. Students will be contacted by the Field Study Coordinator within two to three weeks with a decision. Decisions of the Committee are final.

Upon approval of this waiver, students will register for the Field Study for 4 or 6 units. If students who receive this waiver elect to complete a longer field study placement between 7-12 weeks, they are expected to dedicate a **minimum of 20 hours per week over the course of one semester or academic session.**

The Field Study Waiver (Criterion II): Independent MPH students who have completed all MPH core and Concentration-required courses and who can verify enrollment or intent to enroll in any non-TUC (outside of TUC) accredited four-year medical or pharmacy school, or Master of Science in Physician Assistant Studies program, may be eligible for a field study waiver that would allow them to complete 30-40 field study hours per week over a minimum of 6 consecutive weeks.

To apply for this waiver, students shall provide transcripts, verification of admission and intent to enroll, or any other supporting documentation transcripts confirming enrollment or matriculation in a non-TUC accredited four-year medical or pharmacy school, or Master of Science in Physician Assistant Studies

program to the Public Health Program. Student who are eligible for this waiver will be required to transfer two units from their clinical program. In addition, students are required to submit the **Application for the Field Study Waiver (Criterion II)**. Applications are due at least 4 weeks prior to registration in the PHFS. All applications are subject to review by committee. All waivers must be approved by the Program Director and Field Study Coordinator. Students will be contacted by the Field Study Coordinator within two to three weeks with a decision. Decisions of the review committee are final.

Upon approval of this waiver, students will register for the PBHC 600-4 (4 units). If students who receive this waiver elect to complete a longer field study placement between 7-12 weeks, they are expected to dedicate **a minimum of 20 hours per week over the course of one semester or academic session.**

MEANS FOR EVALUATING STUDENT PERFORMANCE

PHFS Course Deliverables:

All documents, forms, and instructions required for completing all field study deliverables listed below, including the MPH Student Field Study Handbook, are available in the Appendix or on the Canvas course site. Students are expected to complete the following required course deliverables. **IMPORTANT: Group work will not be accepted.** *Although, two or more students can be placed simultaneously at the same site and with the same preceptor; each student is ultimately responsible for completing and submitting their own work.*

- 1. Scope of Work:** The scope of work provides the framework for the field study, by ensuring that the student and preceptor have a clear understanding of this planned experience. Students must work with their preceptors to generate a Scope of Work that describes a set of measurable objectives, activities, a timeline, outcome indicators for each objective, and work products:
 - a. For the template and instructions for completing the Scope of Work, see Appendix.
 - b. Although, this is a collaborative process between student and preceptor, it is the ultimately the responsibility of the student to compose the Scope of Work.
 - c. The Scope of Work is due one week after the placement start date via Canvas.

- 2. Competency Inventory Form:** This form ensures the integration of didactic coursework with public health practice.
 - a. For the form and instructions, see Appendix.
 - b. Although, this is a collaborative process between student and preceptor, it is the ultimately the responsibility of the student to compose the Competency Inventory.
 - b. Students will be evaluated to determine their level of mastery of the selected competencies upon the completion of the PHFS.
 - c. The Competency Inventory Form is due one week after the placement start date via Canvas.

- 3. PHFS Contract:** This contract must be signed by **the preceptor and the student** acknowledging an agreement for the student to work and complete agreed upon objectives as negotiated between the student and preceptor.

- a. See Appendix for this form.
- b. The PHFS Contract is due one week after the placement start date via Canvas.

4. PHFS Site Visit: The site visit is a mid-point assessment which provides the faculty advisor, the preceptor, and the student an opportunity approximately halfway through the PHFS placement to discuss and evaluate the student's progress and to gather instructive feedback to the faculty advisor.

- a. See Appendix for this form.
- b. During the first week of the field study placement once the preceptor has signed the Field Study Contract, the student is responsible for working with their preceptor to select 3-4 possible dates/times that occur midway through their field study placement on which to schedule the site visit.
- c. A minimum of 30 minutes should be allocated for each site visit (15-minute separate meetings are required with the student and the preceptor).
- d. Site visits may be held in-person, by phone, or video conference.
- e. Students are required to provide possible site visit dates/times using the **Selected Dates for Field Study Site Visit form** which must be signed by **both student and preceptor**.
- d. This form is due one week after the placement start date via Canvas.

5. PHFS Reflections. Students will be required to summarize what they learn each week, what went well, any challenges or highlights, and any areas in which they plan to improve. This assignment is also designed to help students begin gradually writing the final report required for the course over several stages.

- a. Students must submit weekly reflections via Canvas every two (2) weeks.

6. PHFS Report: The purpose of this assignment is for the student to:

- a. demonstrate application and integration of the skills and knowledge acquired through the didactic and practical components of the MPH Program to public health practice.
- b. demonstrate proficiency in and ability to integrate the core public health principles and material learned in MPH program.
- c. demonstrate proficiency core and concentrations competencies and in areas relating to the Program's MPH concentrations.
- d. determine aptitude for applying this knowledge to issues the student may confront as a future public health professional

- **PHFS Report - Part I:** Part I is comprised of the Field Study ePortfolio, which is a summary of the student's field experience utilizing digitized collections (e.g., text-based, graphics, archived multimedia elements, such as photos, PPT slides, audio or voice recordings, websites, web links, and other electronic media to provide a virtual representation of the student's public health field work). To see examples of past PHFS ePortfolios, click the links below:

- [PHFS ePortfolio Example #1](#)
 - [PHFS ePortfolio Example #2](#)
 - [PHFS ePortfolio Example #3](#)
 - [PHFS ePortfolio Example #4](#)
 - [PHFS ePortfolio Example #5](#)
 - [PHFS ePortfolio Example #6](#)
 - [PHFS ePortfolio Example #7](#)
- a. The Program requires students to whenever possible obtain permission from their site, preceptors, and supervisors using the TUC media release forms (see Appendix) to document their field work experiences. This documentation can include digital photographs of **public health in action** at placement sites such as, daily project activities, agency-sponsored events or meetings, administrative supervisory team members, agency staff, or the general appearance of the site location (e.g., landscape, scenery, surroundings). We encourage students whenever possible to provide photos of themselves in the professional practice setting, their preceptors, team members, or agency staff.
- b. Part I is due at the end of the placement (exact due dates will vary).

PHFS Report - Part II: This deliverable is required for all students who:

- d. HAVE NOT elected to conduct, write, and present an MPH capstone project that has been approved.
- e. HAVE passed or plan to take the Certified in Public Health (CPH) Exam to satisfy the MPH Culminating Experience in lieu of the MPH Capstone Project.

PHFS Report - Part II Description

- **This deliverable is required for all students who:**
 - ❖ **HAVE NOT elected to conduct, write, and present an approved MPH capstone project; and**
 - ❖ **HAVE passed or plan to take the Certified in Public Health (CPH) Exam to satisfy the MPH Culminating Experience in lieu of the MPH Capstone Project.**

As a practice-based project, Part II of the PHFS Report is designed to provide students the opportunity to demonstrate a sophisticated and thorough grasp of public health concepts, appropriate public health interventions, program evaluation techniques that are relevant to their field study placement site's strategies to promote and protect the health of their communities. To satisfy Part II, students must produce a high-quality written product that is appropriate for their educational and professional objectives. Ideally, the written product is developed and delivered in a manner that is useful to external stakeholders. Part II ensures that the experience addresses the

selected foundational and concentration-specific competencies. Examples of this high-quality written products completed as an activity of the field study experience are listed below:

Traditional High-Quality Written Product: A Proposed Program Evaluation Plan (Actual or Mock/Model)

Historically, this course has required students to complete a proposed program evaluation plan (actual or mock/model) to satisfy Part II. The program evaluation plan proposal is most frequently selected as the top choice by most students to satisfy Part II. The program evaluation plan addresses the main public health problem or issue identified and addressed in one discrete component or project of focus in the field study experience. Students may be requested to produce a program evaluation plan as part of their field study activities or tasks, which can satisfy Part II. Moreover, a variety of public health programs, projects, or interventions are provided by many of the PHFS sites which offer students many options from which to pick and choose to write a proposed program evaluation plan. Thus, this option is often the most readily available and convenient way for students to fulfill this course requirement. ***IMPORTANT: The proposed program evaluation plan is the exact same assignment that all students complete during the didactic phase in the Program Evaluation and Needs Assessment course (PBHC 647).***

Actual and Mock/Model Proposed Program Evaluation Plans Defined:

- 1. An Actual Program Evaluation Plan Proposal:** If the student's field study project requires them to complete an evaluation plan as part of the student's field experience, they may utilize that actual plan to satisfy requirements for Part II of the Field Study Report. ***IMPORTANT: The evaluation must include Sections 1-14 (see below).***
- 2. A Mock or Model Program Evaluation Plan Proposal:** If the field study project does not require the student to complete an evaluation plan, identify a project in process to offer a program or intervention currently in operation at the placement site for a mock proposed evaluation plan.

IMPORTANT: These are plans that students are proposing. It is not a requirement that they be engaged in actual data collection or analysis for the site's programs or interventions to write a proposed program evaluation plan. If the site does not run any programs or interventions focused on the main public health issue addressed in the PHFS placement, they must propose a program or intervention that is designed to address that issue and develop a mock or model evaluation plan.

See the following example:

- ***Public Health Issue Addressed in the Field Study:*** Injuries among older adults in assisted living facilities due to falls
- ***Potential Program or Intervention Proposal:*** Classes or workshops providing a curriculum with the goal of improving and/or maintaining mobility and independence, learning, and using health information focused on falls reduction and other health-related behaviors among older adults
- ***Model Evaluation Plan:*** Evaluation Plan for Falls Prevention Education Curriculum Delivered by the (Name of Site/Organization).
- ***Note:*** This is the same process all students follow to complete the evaluation plan assignment in the Program Evaluation and Needs Assessment course (PBHC 647).

2. Alternative High-Quality Written Products

The alternative high-quality written products featured below may be approved to satisfy Part II of the PHFS Report in lieu of a proposed program evaluation plan. These products are considered to be useful to external stakeholders as well as to the PHFS sites where students have completed their field experiences. Students who choose this option are required to notify Prof. Kelly no later than midway through their PHFS placements (see Canvas course site) using the Qualtrics survey at:

https://tuc.co1.qualtrics.com/jfe/form/SV_bjgTH4nPrp6HZNs

Please note: Rubrics are not available for the following types of alternative high-quality written products. Approval will be determined by the course instructor and the MPH Concentration Chairs.

- Draft article for journal publication, which includes a systematic or scoping literature review, research analysis, and analytic essays (please visit <https://aph.aphapublications.org/authorinstructions/formats> to review manuscript formats)
- Policy statement (see American Public Health Association (APHA) guidelines at https://apha.org/-/media/files/pdf/policy/author_guidelines.ashx?la=en&hash=630F325DF031F1309D4E4AA79D9F970069AFBD88 and a policy statement example at <https://www.astho.org/About/Policy-and-Position-Statements/Adverse-Childhood-Experiences-Policy-Statement/>)
- Legislative testimony with accompanying supporting research, etc.

Part II is due at the end of the placement via Canvas (exact due dates will vary).

7. **Preceptor Evaluation:** Student performance during the field study will be evaluated by the site preceptors to document students' demonstration of public health competence in a public health setting.
 - a. This information is collected via an online survey.
 - b. Students are responsible for meeting with their preceptors to ensure that this evaluation is completed.
 - c. Students are required to email nkelly@touro.edu one week prior to their placement end date to request this survey.
 - d. Preceptors will receive this survey link via email directly from the Field Study Coordinator.
 - e. This survey must be completed by the end of the student's placement (exact due dates will vary).
8. **Student PHFS Site Evaluation:** Students are required to evaluate their PHFS placement preceptor/site and the PHFS course/instructor.
 - a. The link to this survey is available on Canvas.
 - b. This survey must be completed by the end of the student's placement (exact due dates will vary).
9. **MPH Student Exit Survey:** Students are required to complete an online exit survey:
 - a. Students are required to email nkelly@touro.edu one week prior to their placement end date to request this survey.

- b. This survey must be completed by the end of the student’s placement (exact due dates will vary).

PHFS GRADING

The PHFS is a Pass/Fail course. Grades are based on the following measures:

PHFS GRADING SCALE	
Deliverable	Percentage of Grade
Scope of Work & Competency Inventory/ PHFS Contract/Selected Dates for Site Visit/PHFS Student Surveys	10%
PHFS Reflections	10%
Preceptor Evaluation	30%
PHFS Report	50%

Generally, final grades are submitted via TouroOne within 10 business days after the last day of classes of each semester or academic session.

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2022-2023 PHFS PLACEMENT PLANNING TIMELINE

IMPH Students (12 Weeks)

	Summer 2022	Fall 2022	Spring 2023
Placement Terms/Start & End Dates	May 9 – July 26	August 1 - December 16	January 2 – April 28
Students Submit Online PHFS Planning Forms, Cover Letters, and Resumes to Field Study Coordinator	February 15	May 1	October 1
New PHFS Site Registration Due (Requests for Placement @Unaffiliated Sites)	February 15	May 1	October 1
Field Study Coordinator Reminds Preceptors/Sites to Post Available PHFS Opportunities	February	May	October
Matching Process Begins	February - March	May	October
Field Study Coordinator Confirms PHFS Placement Opportunities	Depending on site availability as early as 6 weeks prior to general field study start dates or a minimum of 3 weeks prior to general field study start dates	Depending on site availability as early as 6 weeks prior to general field study start dates or a minimum of 3 weeks prior to general field study start dates	Depending on site availability as early as 6 weeks prior to general field study start dates or a minimum of 3 weeks prior to general field study start dates
Joint MSPAS/MPH, DO/MPH & PharmD/MPH Dual Degree Students (a minimum of 6 Weeks)			
Placement Terms/Start & End Dates	May 9 – August 6 (Variable start/end dates)	August 1 - December 16 (Variable start/end dates)	January 2 – April 28 (Variable start/end dates)

Students Submit Online PHFS Planning Forms, Cover Letters, and Resumes to Field Study Coordinator	February 15	May 1	October 1
New PHFS Site Registration Due (Requests for Placement @Unaffiliated Sites)	February 15	May 1	October 1
Field Study Coordinator Reminds Preceptors/Sites to Post Available PHFS Opportunities	February	May	October
Field Study Coordinator Confirms PHFS Placement Opportunities	Depending on site availability as early as 6 weeks prior to general field study start dates or a minimum of 3 weeks prior to general field study start dates	Depending on site availability as early as 6 weeks prior to general field study start dates or a minimum of 3 weeks prior to general field study start dates	Depending on site availability as early as 6 weeks prior to general field study start dates or a minimum of 3 weeks prior to general field study start dates



Students jump for joy on the TUC campus located on Mare Island in Vallejo, California!

These students were part of ongoing community-based collaborations addressing nutrition, physical activity, environmental health, and oral health among children and families in the Vallejo Unified School District.

We are dedicated to reducing health disparities in local and global communities with an unwavering focus on social justice.

The mission of the Public Health Program at Touro University California (TUC) is to promote the health and well-being of local and global communities through education, service, and research with a focus on underserved populations. This mission is achieved by employing a multidimensional program of study that combines a broad public health base with training in three specialty concentrations:

- Community Action for Health
- Global Health
- Health Equity & Criminal Justice

The Master of Public Health (MPH) Degree at TUC trains students to become leaders in addressing the current and emerging public health challenges of populations locally and globally.

We are accredited by the Council on Education for Public Health (CEPH), which indicates program quality. Certain professional positions and fellowships are only open to those with degrees from CEPH-accredited programs.

The MPH Degree program requires 42 units of study:

Core Public Health Courses (19 units)

- Environmental Health Sciences
- Social and Behavioral Sciences
- Health Policy and Management
- Biostatistics
- Epidemiology
- Program Evaluation
- Research Methods

Concentration Courses (6 units)

Culminating Experience Courses (7 units)

- Field Study
- Capstone Project or Certified in Public Health Exam Preparation

(Exam administered by National Board of Public Health Examiners.)

Breadth Courses (10 units)

There are variations in requirements for students in the TUC Joint Degree MPH/MS Physician Assistant Studies program and students in the Dual Degree MPH/Doctor of Osteopathic Medicine or Doctor of Pharmacy programs.

TUC PUBLIC HEALTH PROGRAM IS ACTIVE!

Center for Global Health Research: Interdisciplinary global health research to inform evidence-based global health practice.

Center for Community-based Research: Collaborations with local organizations to promote community health and well-being.

Center for Workforce Development: Support the professional development of the public health workforce.

Wilderman Hall | 1310 Club Drive | Vallejo, CA 94592
707.638.5838 | publichealth@tu.edu | <http://cehs.tu.edu/publichealth/>

Master of Public Health

Public Health Program 707.638.5838 | publichealth@tu.edu | <http://cehs.tu.edu/publichealth/>



TOURO UNIVERSITY
CALIFORNIA



Our Student Body is diverse:

54% of MPH students belong to racial/ethnic minority groups and 30% are the first in their families to graduate from college.

Field Study Sites:

Over 60 domestic sites including:

- ♦ Public Health Departments of Solano and Contra Costa Counties
- ♦ Planned Parenthood
- ♦ San Quentin State Prison
- ♦ Kaiser Permanente

Sites in Bolivia, Cambodia, Ethiopia,

Nepal & Uganda include:

- ♦ African Community Center for Social Sustainability
- ♦ Center for Molecular Dynamics
- ♦ Khana HIV Prevention
- ♦ University Mayor de San Andres

Breadth Course Options Include:

- ♦ Public Health Law
- ♦ Public Health in Times of Conflict
- ♦ Maternal & Child Health
- ♦ Geographical Information Systems
- ♦ Qualitative Research Methods

Admissions Requirements

For more detail see TUC Admissions page:

<http://admissions.tu.edu/mpH/AdmitIMPH.html>

- ✓ 2.50 minimum GPA
- ✓ 3 letters of recommendation
- ✓ No GRE required
- ✓ 2018-19 Tuition: \$880/unit

The COMMUNITY ACTION FOR HEALTH concentration prepares students to respond to the health needs of communities, especially those communities that face unique vulnerabilities. Through course work and field study students are prepared to address factors that negatively influence health and promote those that are health-enhancing. Specialized courses for students in this concentration include Social Inequities in Public Health and Community Health Promotion.

The GLOBAL HEALTH concentration prepares students to be global health professionals and agents of change. The curriculum reflects the realities of health around the world and the links between countries at different stages of economic development. Students gain an understanding of the challenges and the complexity of solutions through field study and specialized courses Essentials of Global Health and Emerging Health Threats.

HEALTH EQUITY & CRIMINAL JUSTICE is a new emphasis in the Public Health Program designed to address the impact of criminal justice involvement and incarceration on the health of individuals, families and communities. Students gain an understanding of the needs of these populations through field study and specialized courses including Criminal Justice and Public Health.

Apply to the TUC Public Health Program through
Schools of Public Health Application Service
(SOPHAS): www.sophas.org

◆ ◆ ◆ Change your community....change your world! ◆ ◆ ◆

PREPARE FOR YOUR PA CAREER AT TOURO!

The Physician Assistant Profession

Physician Assistants (PAs) are health care professionals licensed to practice medicine with physician supervision. PAs work in primary care, specialty and sub-specialty practice and in both outpatient and inpatient settings. As part of their comprehensive responsibilities, PAs conduct physical exams, diagnose and treat illnesses, order and interpret tests, counsel on preventive health care, assist in surgery, and write prescriptions.

Within the physician-PA relationship, PAs exercise autonomy in medical decision making and provide a broad range of diagnostic and therapeutic services. A PA's practice may also include education and teaching, research, and administrative services.



The Public Health Profession

The public health system is a complex network of organizations that coordinates efforts to protect, promote, and improve the health of the population as a whole. While governmental public health agencies (i.e., Federal, State and local) play a pivotal role in the planning and delivery of public health services, many other organizations comprise the public health system, including health care providers and associations, faith-based organizations, businesses, and schools.

The core functions of public health professionals have been defined as assessment (community diagnosis); policy development and leadership and assurance of access to environmental, educational, and personal health services.

Core public health services provided to communities include communicable disease control, community assessment, community outreach and education, environmental health services, epidemiology and surveillance, food safety, health education, restaurant inspections, tuberculosis testing and most recently emergency preparedness and bio-terrorism response.

**Physician Assistant and Public Health –
Complementary Professions**

The Joint Program provides training in clinical, preventative, and health promotion foundations and is committed to fostering the students' critical thinking and clinical reasoning necessary to be a competent clinician. These elements will prepare a future health workforce to understand that the wellness of one individual is linked to the wellness of their communities.

Mission

Through the integration of the Physician Assistant and Public Health disciplines, the mission of the Joint MSPAS/MPH Program is to:

- 1) train quality PAs to work with underserved populations,
- 2) recruit applicants from these communities or individuals with a demonstrated interest in serving these communities, and
- 3) increase access to care for underserved populations

Curriculum

The Joint MSPAS/MPH Curriculum is an integrated, graduate-level curriculum that consists of instruction and clinical experiences in both the medical and public health disciplines. The program is 33 months in length (8 academic semesters) in which the first four semesters are didactic (pre-clinical and public health). The clinical phase spans 60 weeks, including the six-week public health field study. Students return to campus for the last eight weeks to complete their MPH Capstone and MSPAS Summative courses.

Graduates of the program receive a Master of Science in Physician Assistant Studies and a Master of Public Health. Graduates are eligible for licensure to practice in all 50 states and Washington, DC upon passing the PANCE. The Master of Public Health degree prepares the graduate by developing public health knowledge and principles including disease prevention, health promotion, epidemiology, biostatistics, health care administration, and research study and design. The combined curriculum prepares graduates to better understand the link between an individual's health and their environment.





JOINT MASTER OF SCIENCE IN PHYSICIAN ASSISTANT STUDIES / MASTER OF PUBLIC HEALTH

PA Didactic Courses

Principles of Basic Science
Anatomy w/Lab
Laboratory Medicine
Clinical Medicine I, II, III (*series of three courses*)
Pharmacology I, II, III (*series of three courses*)
Ethics for Health Professionals
Clinical Applications I, II, III, IV (*series of four courses*)
Geriatrics
Pediatrics I, II, and III
Orientation to the Clinical Year
Behavioral Medicine
Emergency Medicine
Surgical & Clinical Skills w/Lab
MSPAS Summative Course

PA Clinical Rotations

Primary Care I, II, III, IV (*series of four rotations*)
Emergency Medicine
Surgery
Elective I, II (*two rotations; may vary by student*)

Public Health Courses

Biostatistics
Behavioral and Social Aspects of Public Health
Environmental Health
Epidemiology
Health Policy & Management
Research Methods
Public Health Field Experience
MPH Capstone Course or Comprehensive Exam
Students can choose between the Community Track and the Global Health Track, each of which requires three additional courses

Program Accreditation

The ARC-PA has granted **Continued Accreditation** to the PA Program sponsored by Touro University California. Continued accreditation is an accreditation status granted when a currently accredited program is in compliance with the ARC-PA *Standards*. Continued Accreditation remains in effect until the program closes or withdraws from the accreditation process or until accreditation is withdrawn for failure to comply with the *Standards*. The approximate date for the next comprehensive review of the program by the ARC-PA will be September, 2018.

Contact Information

Email: tucpa@tu.edu

<http://paprogram.tu.edu> • 707.638.5809

Required Minimum Prerequisites for the 2015-2016

Admission Cycle (Class of 2019)

Prerequisites: Application is through CASPA. All prerequisites must be completed prior to submission of the CASPA application. A baccalaureate degree from a regionally accredited institution received with minimum Cumulative and Science GPAs of 2.75 is required to apply to this program.

Competitive candidates, however, will typically have GPAs of 3.0 or better. Applicants from all academic disciplines are welcome. Prerequisite courses must be completed with a C or better; C- will not be accepted. 500 hours of direct patient care experience are required, paid or volunteer; preference will be given to candidates with over 1000 hours.

8 semester/12 quarter units (including labs) in each the following:

- Biological Sciences (general biology, genetics, immunology, etc.)
- Chemistry (inorganic, organic, biochemistry)

4 semester/5 quarter units (including labs) of each of the following:

- Microbiology
- Human Anatomy
- Human Physiology

Human Anatomy and Physiology must be completed within 5 years of the expected year of matriculation, and may be taken as a combined course.

Other

- Statistics (3 semester/5 quarter units; no lab)

Meeting the prerequisites does not guarantee an interview. *Prerequisites are subject to change.* For detailed, current information on admissions requirements for the Joint Program, please visit our website at <http://paprogram.tu.edu>.

Success in Achieving Program Goals

The Program is pleased to report a first-time Physician Assistant National Certifying Exam (PANCE) pass rate of 100% by the Class of 2014. Representing all previous graduating classes (2005-2014), 343 out of 345 (99.4%) graduates have passed the PANCE and are certified Physician Assistants.

Fifty percent of all graduates of the first nine classes (2005-2013) are working in sites that serve medically underserved populations and/or clinics located in medically underserved areas. These include Federally Qualified Health Centers (FQHCs), Primary Care Health Professional Shortage Areas (PC-HPSAs) and Medically Underserved Areas/Populations (MUA/Ps). FQHCs are community-based organizations that provide comprehensive primary care and preventive care to persons of all ages, regardless of their ability to pay. PC-HPSAs and MUA/Ps are either geographic areas in which residents have a shortage of personal health services, or groups of persons who face economic, cultural or linguistic barriers to health care.



TOURO UNIVERSITY
CALIFORNIA

Public Health Program

MASTER OF PUBLIC HEALTH/ DOCTOR OF OSTEOPATHIC MEDICINE

The MPH degree requires 42 units of study. Dual degree students earn 30 units from the Public Health Program curriculum (generally over the course of 2 summers and during rotations) and 12 units from courses relevant to public health from the College of Medicine curriculum.

Core Public Health Courses (19 units)

- Environmental Health Sciences
- Social and Behavioral Sciences
- Health Policy and Management
- Biostatistics
- Epidemiology
- Program Evaluation
- Research Methods

Concentration Courses (6 units)

Culminating Experience Courses (5 units)

- Field Study
- Capstone Project or Certified Public Health Exam Preparation
(Exam administered by National Board of Public Health Examiners)

Field Study Sites

Over 60 domestic options including:

- Public Health Departments - Solano, Alameda & Contra Costa Counties
- Planned Parenthood
- San Quentin Prison
- Kaiser Permanente

International sites in:

- Bolivia
- Cambodia
- Ethiopia
- Nepal
- Uganda

Tuition: Current tuition for the 30 units of MPH coursework is \$26,400.



Change your community....change your world!

The mission of the Public Health Program at Touro University California is to promote the health and well-being of local and global communities through education, service, and research with a focus on underserved populations. This mission is achieved by employing a multidimensional program of study that combines a broad public health base with didactic training and field study in three specialty concentrations:

- ◆ **COMMUNITY ACTION FOR HEALTH** concentration prepares students to respond to the health needs of communities, especially those communities that face unique vulnerabilities. Specialized courses for students in this concentration include Social Inequities in Public Health and Community Health Promotion.
- ◆ **GLOBAL HEALTH** concentration's curriculum reflects the realities of health around the world and the links between countries at different stages of economic development. Students gain an understanding of the challenges and the complexity of solutions through specialized courses Essentials of Global Health and Emerging Health Threats.
- ◆ **HEALTH EQUITY & CRIMINAL JUSTICE** is a new emphasis in the Public Health Program designed to address the impact of criminal justice involvement and incarceration on the health of individuals, families, and communities. Students gain an understanding of the needs of these populations through specialized courses including Criminal Justice and Public Health.

707.638.5838 | publichealth@tu.edu | <http://cehs.tu.edu/publichealth/>

College of Education and Health Sciences
Public Health Program



**MASTER OF PUBLIC HEALTH/
DOCTOR OF OSTEOPATHIC MEDICINE**

Why a Dual Degree?

- ❖ In the rapidly changing field of healthcare, be prepared for leadership positions with national and international agencies, health departments, medical care providers and in academia;
- ❖ Develop and implement policy to promote health and disease prevention;
- ❖ Participate in health outcomes research;
- ❖ Assess the effects of emerging health issues and policies on current health care, and provide care and services to promote health and well-being.



"Completing my Public Health field study has been one of the most enriching experiences of my Graduate school career. As a DO/MPH student, it was important to me to continue my public health education as a means to becoming a better physician. The goal of the American healthcare system should be primarily prevention, and there is no better way to achieve this than through understanding health policy, epidemiology, and being able to perform a needs assessment. I applied what I learned in the classroom to actual issues of the populations of Yolo County."

Susan Lee, DO/MPH, Class of 2016

Why a Dual Degree at TUC?

- ❖ The Master of Public Health (MPH) at TUC trains students to become leaders and advocates in addressing the current and emerging public health challenges of populations locally and globally with an unwavering focus on social justice.
- ❖ While the full MPH degree is 42 units, as a dual degree student you complete 30 units within the Public Health Program. The remaining 12 units are transferred from the DO curriculum and cover related cross-over content.
- ❖ The TUC MPH Program is accredited by the Council on Education for Public Health (CEPH) which indicates program quality. Certain professional positions and fellowships are only open to those with degrees from CEPH-accredited programs.

"My experience as a DO/MPH student has broadened my perspective on the field of medicine, such that when it becomes time for me to practice I will be able to treat, not only the person sitting before me, but the larger community of which we are all a part."

Kyle Stephens,
DO/MPH, Class of 2014

Earn an MPH degree in 2 summers while concurrently obtaining your DO degree. Complete your Public Health field study during rotations.

MPH Didactic Courses
Summer 1

COM
Clinical Year 1

MPH Didactic Courses
Summer 2

COM
Clinical Year 2

COM
Rotations

MPH Field Study/
COM Rotations

Wilderman Hall ♦ 1310 Club Drive ♦ Vallejo, CA 94592
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Public Health Program

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TOURO UNIVERSITY
CALIFORNIA

DOCTOR OF PHARMACY / MASTER OF PUBLIC HEALTH

The MPH degree requires 42 units of study. Dual degree students earn 30 units from the Public Health Program curriculum (generally over the course of 2 summers and a P3/P4 Open Block) and 12 units from courses relevant to public health from the College of Pharmacy curriculum.

Core Public Health Courses (19 units)

- Environmental Health Sciences
- Social and Behavioral Sciences
- Health Policy and Management
- Biostatistics
- Epidemiology
- Program Evaluation
- Research Methods

Concentration Courses (6 units)

Culminating Experience Courses (5 units)

- Field Study
- Capstone Project or Certified Public Health Exam Preparation (Exam administered by National Board of Public Health Examiners)

Field Study Sites

Over 60 domestic options including:

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- Planned Parenthood
- San Quentin Prison
- Kaiser Permanente

International sites in:

- Bolivia
- Cambodia
- Ethiopia
- Nepal
- Uganda

Tuition: Current tuition for the 30 units of MPH coursework is \$26,400.



The mission of the Public Health Program at Touro University California is to promote the health and well-being of local and global communities through education, service, and research with a focus on underserved populations. This mission is achieved by employing a multidimensional program of study that combines a broad public health base with didactic training and field study in three specialty concentrations:

◆ **THE COMMUNITY ACTION FOR HEALTH** concentration prepares students to respond to the health needs of communities, especially those communities that face unique vulnerabilities. Specialized courses for students in this concentration include Social Inequities in Public Health and Community Health Promotion.

◆ **THE GLOBAL HEALTH** concentration's curriculum reflects the realities of health around the world and the links between countries at different stages of economic development. Students gain an understanding of the challenges and the complexity of solutions through specialized courses Essentials of Global Health and Emerging Health Threats.

◆ **HEALTH EQUITY & CRIMINAL JUSTICE** is a new emphasis in the Public Health Program designed to address the impact of criminal justice involvement and incarceration on the health of individuals, families, and communities. Students gain an understanding of the needs of these populations through specialized courses including Criminal Justice and Public Health.

Change your community....change your world!

College of Education and Health Sciences
Public Health Program



DOCTOR OF PHARMACY / MASTER OF PUBLIC HEALTH



"The MPH is the perfect complement to any health professional degree. Mine has given me a n opportunity to work with disadvantaged populations, compelled me to analyze and dissect research in a more meaningful way, and broadened my understanding of the forces that impact human health and behavior.

My PharmD provides me with the knowledge to optimize patient drug therapy but my MPH reminds me that I need to treat the patient as a whole, not just a set of signs and symptoms."

Hugh Ngo, PharmD, MPH Class of 2013

Why a Dual Degree?

- ❖ Participate in health promotion, disease prevention, and pharmacotherapy;
- ❖ Participate in disease surveillance of adverse drug events, patterns of use, and disaster preparedness;
- ❖ Design and provide disease management and pharmacy based immunization programs;
- ❖ Contribute to the development and implementation of policy to provide safer medications to patients;
- ❖ Design benefit programs, reimbursement systems, and prescription drug plans;
- ❖ Participate in health outcomes research;
- ❖ Shape policy regarding inclusions/exclusions from drug formularies;
- ❖ Assess the effects of emerging health issues and policies on current health care, and provide care and services to promote the health and well-being.

Why a Dual Degree at TUC?

- ❖ The Master of Public Health (MPH) at TUC trains students to become leaders and advocates in addressing the current and emerging public health challenges of populations locally and globally with an unwavering focus on social justice.
- ❖ While the full MPH degree is 42 units of study, as a dual degree student you complete 30 units within the Public Health Program. The remaining 12 units are transferred from the PharmD curriculum and cover related cross-over content.
- ❖ The TUC MPH Program is accredited by the Council on Education for Public Health (CEPH), which indicates program quality. Certain professional positions and fellowships are only open to those with degrees from CEPH-accredited programs.

Earn an MPH degree in 2 summers while concurrently obtaining your PharmD degree. Complete your Public Health field study during a P3/P4 open block.

MPH Didactic Courses Summer 1
COP Didactic Courses Year 1
MPH Didactic Courses Summer 2
COP Didactic Courses Year 2
COP Clinical Rotations Year 3
MPH Field Study Open Block in COP Year 3 or 4
COP Clinical Rotations Year 4

Wilderman Hall ♦ 1310 Club Drive ♦ Vallejo, CA 94592
707.638.5838 | publichealth@tu.edu | <http://cehs.tu.edu/publichealth/>



**HELP SHAPE AND MENTOR THE NEXT GENERATION OF
PUBLIC HEALTH PROFESSIONALS !**

The Touro University California (TUC) Public Health Program is committed to the ongoing development of successful partnerships with local government and community health agencies and organizations to support the education and public health training of our Master of Public Health (MPH) students through its Public Health Field Study course. Organizations like yours are vital in providing invaluable field experience, real-world, practical exposure, and mentorship to our students. Through a field study placement partnership with TUC, students have the opportunity to gain knowledge, skills, confidence, and access to relationships that enhance their academic training, professional development, and effectiveness. In turn, organizations benefit from investing in the training and mentorship of student interns,

Yvette Alcala
Master of Public Health

Do nothing without intention.




which results in valuable assistance and support to their programs. For the field of public health, the return on this investment is ultimately its expansion of its workforce. Our program trains many students from diverse backgrounds with interpersonal, leadership, and teamwork skills that enable them to take initiative and operate as motivated self-starters. We expect our students to make significant contributions to the goals and missions of our community partners.



Our students are ready to engage in various core public health areas, such as:



Our students are ready to engage in various core public health areas, such as:

- Needs Assessment
- Data Collection/Analysis
- Program Planning
- Program Implementation
- Program Evaluation
- Policy Development
- Educational Campaigns
- Policy analysis

Please consider how our students can make meaningful contributions to YOUR organization's public health

Questions? Contact:
Nemesia Kelly, MPH
Associate Professor
Touro University California
Public Health Program
nkelly@touro.edu
(707) 731-7436



TO SERVE, TO LEAD, TO TEACH



TOURO UNIVERSITY PUBLIC HEALTH PROGRAM CALIFORNIA

GUIDELINES FOR PUBLIC HEALTH FIELD STUDY PRECEPTORS & PLACEMENT SITES

Overview

The Public Health Program at Touro University California (TUC) is committed to the ongoing development of successful partnerships with public health practice agencies and organizations in order to support the education and public health training of its MPH students. The Public Health Field Study (PHFS) is required of all TUC MPH students and provides them with practical experience in a public health setting. The PHFS provides invaluable real-world, practical exposure, experience, and mentorship to our students. Students gain knowledge, skills, confidence, and relationships that enhance their academic training, professional development, and effectiveness. **Read more at <https://tu.edu/programs/public-health/>.**

The TUC Public Health Program is well-represented by a student population with a diversity of experience currently enrolled in the Independent MPH Degree Program and concurrently enrolled in the Joint Master of Science in Physician Assistants Studies/MPH, Doctor of Osteopathic Medicine (DO)/MPH Dual Degree and Doctor of Pharmacy (PharmD)/MPH Dual Degree programs.

Course Description

The PHFS course is required of all MPH students and is a structured and practical supervised professional experience in an approved public health setting allowing for the application and integration of the skills and knowledge acquired during their graduate didactic coursework.

As a working partnership between students and the public health practice organization, this course provides a public health fieldwork experience for MPH students which can be conducted either locally or abroad.

The practical skills and the knowledge gained in field work at public health practice agencies/organization are essential to students' academic and professional growth, preparing them for a professional career in the field of public health.

Field study projects must address a community health issue and student participation should contribute to strategic solutions.



The students' work in the field study projects should be valued by the organization and contribute to meeting the organization's goals or mission.

Learning Objectives

- Integrate public health theory, knowledge and skills in a practice setting.
- Complete a defined project(s) in an area of public health practice including core public health functions such as a needs assessment, program planning, program evaluation, policy development, educational campaign, applied research project.
- Exhibit proficiency in at least one of the following areas: program planning, needs assessment and data gathering, program implementation, applied research, program evaluation, policy analysis, or data analysis under the guidance of an experienced preceptor.
- Demonstrate understanding of the role of the social determinants of health and social justice as it relates to their individual field study experience.
- Demonstrate competence in a public health practice setting.
- Demonstrate leadership, teamwork, communication skills, and creativity in the development of a public health practice activity.

TO SERVE, TO LEAD, TO TEACH



TOURO UNIVERSITY PUBLIC HEALTH PROGRAM CALIFORNIA

GUIDELINES FOR PUBLIC HEALTH FIELD STUDY PRECEPTORS & PLACEMENT SITES

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- Exhibit proficiency in at least one of the following areas: program planning, needs assessment and data gathering, program implementation, applied research, program evaluation, policy analysis, or data analysis under the guidance of an experienced preceptor.
- Demonstrate understanding of the role of the social determinants of health and social justice as it relates to their individual field study experience.
- Demonstrate competence in a public health practice setting.
- Demonstrate leadership, teamwork, communication skills, and creativity in the development of a public health practice activity.



PUBLIC HEALTH PROGRAM

TUC PHFS Preceptor Checklist (In-Person Onsite Format)

<p><i>Before the Field Study Placement</i></p>	<ul style="list-style-type: none"> <input type="checkbox"/> If possible, provide the Field Study Coordinator a description of the PHFS opportunity and the site’s expectations and requirements for the intern position. <input type="checkbox"/> Provide the Field Study Coordinator information regarding the organization’s student intern onboarding requirements. <input type="checkbox"/> Correspond or coordinate correspondence with the student to arrange a field study/internship interview. <input type="checkbox"/> Meet with/interview the student. <input type="checkbox"/> If possible, provide additional information that can help prepare the intern between the field study/internship acceptance date and Day 1 of their field study placement. <input type="checkbox"/> If possible, provide any guidance to facilitate the process of developing an affiliation agreement/MOU contract to support the partnership between agency and TUC. <input type="checkbox"/> Sign/date and TUC Public Health Program Field Study Letter of Agreement (Short-Term Affiliation Agreement) in support of the student’s placement (<i>if applicable</i>).
<p><i>During the Field Study Placement</i></p>	<ul style="list-style-type: none"> <input type="checkbox"/> Assist in the orientation of the student to the agency’s policies and procedures to help students obtain a sense of organizational culture. <input type="checkbox"/> Assist in the development of the student’s learning objectives. During the first week of the field study placement, the student is required to work with the preceptor(s) collaboratively to complete: <ul style="list-style-type: none"> ◇ A Scope of Work: Provides a work plan for field study projects focusing on core public health functions (e.g.,

	<p>disease surveillance, needs assessment, program planning, program evaluation, policy development, educational campaign, applied research) allowing them the opportunity to exhibit proficiency in areas such as program implementation, policy analysis, data collection, or data analysis.</p> <p>◇ Competency Inventory: A set of competencies that will be addressed in the Scope of work.</p> <p>◇ Field Study Contract between Student and Preceptor</p> <p>◇ Selected Dates for the Field Study Site Visit: This is a mid-point assessment conducted remotely or in-person.</p> <p>❑ Meet with the student at least once a week to discuss their progress and provide feedback, updates, and directions for tasks or activities.</p> <p>❑ Contact the Field Study Coordinator with any questions, issues, or concerns.</p> <p>❑ Participate in a mid-point assessment via a Field Study Site Visit remotely or in-person.</p> <p><i>(Examples, templates, and guidelines for all of the above can be made available upon request.)</i></p>
<p><i>At the End of the Field Study Placement</i></p>	<p>❑ Assist in the evaluation of students' learning and performance by completing the Online Preceptor Evaluation of the Student.</p>



PUBLIC HEALTH PROGRAM

TUC PHFS Preceptor Checklist (Distance-Based Virtual/Remote Format)

Overview:

- Provides a virtual public health internship that provides flexible and distance-based real world public health field experience.
- Students can intern from wherever they are with a broadband or Internet connection and a phone.
- Requires remote communication with preceptors, supervisors, and teams via video conferencing, email, phone calls, text messaging, and synchronized collaborative files (e.g., Google docs.)
- Allows students to serve a community while contributing to important projects that call for additional resources, time, and support

Before the Field Study Placement

- If possible, provide the Field Study Coordinator a description of the field study opportunity and the site's expectations and requirements for the intern position.
- Provide the Field Study Coordinator information regarding the organization's student intern onboarding requirements.
- Correspond or coordinate correspondence with the student to arrange a field study/internship interview.
- Conduct a field study/internship interview with the student.
- If possible, provide additional information that can help prepare the intern between the field study/internship acceptance date and Day 1 of their field study placement.
- If possible, provide any guidance to facilitate the process of developing an affiliation agreement/MOU contract to support the partnership between agency and TUC.
- Sign/date and TUC Public Health Program Field Study Letter of Agreement (Short-Term Affiliation Agreement) in support of the student's placement (*if applicable*).

During the Field Study Placement

- Orientate student to host site remotely.

❑ Assist in the orientation of the student to the agency's policies and procedures to help students obtain a sense of organizational culture. During the first week of the field study placement, the student is required to work with the preceptor(s) collaboratively to complete (please see attached zip file for examples):

◇ **A Scope of Work:** Provides a work plan for field study projects focusing on core public health functions (e.g., disease surveillance, needs assessment, program planning, program evaluation, policy development, educational campaign, applied research) allowing them the opportunity to exhibit proficiency in areas such as program implementation, policy analysis, data collection, or data analysis.

◇ **Competency Inventory:** A set of competencies that will be addressed in the Scope of work (please refer to the competencies contained in the attached zip file)

◇ **Field Study Contract between Student and Preceptor** (see attached zip file)

◇ **Selected Dates for the Field Study Site Visit:** This is a mid-point assessment conducted remotely via phone or videoconference (see attached zip file).

❑ Communicate with the student via video conferencing, email, phone calls, text messaging, and synchronized collaborative files (e.g., Google docs).

❑ Meet remotely with the student at least once a week to discuss their progress and provide feedback, updates, and directions for tasks or activities.

❑ Contact the Field Study Coordinator with any questions, issues, or concerns.

❑ Participate in a mid-point assessment via a Field Study Site Visit via phone or video conference.

At the End of the Field Study Placement

Assist in the evaluation of students' learning and performance by completing the Online Preceptor Evaluation of the Student.



PUBLIC HEALTH PROGRAM

PHFS PRECEPTOR CREDENTIAL CRITERIA

Public health field study placement sites must have one or more staff on site with a graduate credential in public health or equivalent professional experience and education who will serve as a designated preceptor. Preceptors with B.A. or B.S. degrees must have equivalent professional experience working in public health organizations. Preceptors with B.A. or B.S. degrees may serve as a student intern’s main supervising preceptor; however, the student’s Scope of Work and Competency Inventory must also be approved by a co-preceptor who possesses graduate credentials in public health, thus ensuring that the student’s field work meets specific public health competencies during the placement.

<p>Examples of graduate credentials in public health are MA, MPH, MSPH, DrPH, PhD, or DrPH in various related concentrations that include, but are not limited to:</p>	<p>Interdisciplinary professionals working at organizations who possess the following academic or professional degrees also meet our criteria for preceptor credentials:</p>
<ul style="list-style-type: none"> • Biostatistics • Community Health • Community Health and Preventive Medicine • Community Health Sciences • Environmental Health Sciences • Epidemiology • Global Health • Health Disparities • Health Education • Health Policy and Management • Health Promotion and Communication • Health Sciences • Maternal and Child Health Minority • Occupational Health and Industrial Hygiene • Population Health • Public Health 	<ul style="list-style-type: none"> • DO • JD (legal experts advocating for health justice and policies that support and affirm the lived experiences of the formerly and currently incarcerated and those at risk of incarceration. at the intersection of criminal justice, criminal justice policy reform and health, health equity, public health) • MBA • MD • MPP • MPA • MS (in related health or health sciences disciplines) • MSN • MSW • PharmD • PhD • PHN



PUBLIC HEALTH PROGRAM

APPLICATION FOR PLACEMENT AT UNAFFILIATED COMMUNITY HEALTH & HECJ FIELD STUDY SITES

Student Requirements:

1. Students who identify potential public health practice entities as prospective Community Health & HECJ field study sites are advised to review the following sections in course syllabus at https://docs.google.com/document/d/1eLVt9N_5bdZPK-S2crRhZ1WuqpZcfuUZHtRhlc0xM/edit?usp=sharing:
 - *Course Overview*
 - *Course Learning Objectives*
 - *PHFS Competencies*
2. Students are required to provide the *PHFS Preceptor Handbook* to their prospective preceptors/sites to share the following information which includes:
 - a. **Public Health Program Info Sheets** and the **Invitation to Prospective Sites to Develop PHFS Preceptorship Partnerships with TUC**
 - b. **Course Overview, Learning Objectives, PHFS Competencies, the Role of Community Partnerships**
 - c. **Guidelines for PHFS Sites & Preceptors** and **PHFS Standards and Learning Expectations for sites, students, and the Public Health Program, Preceptor Responsibilities, and Preceptor Checklists**
 - d. **PHFS Placement Timelines, Policies and Matching Process**
 - e. The web link for **Online Registration for New PHFS Placement Sites** for proposed sites and preceptors so that they may post their site/preceptor information, proposed PHFS projects, available learning objectives, research opportunities, onboarding requirements, etc.

Application:

Step 1. Please complete the following. *(This application must be typed as handwritten material is not acceptable.)*

Student Name:

**Proposed Agency or
Organization/Community Health
Field Study Site:**

**Address of Proposed Agency or
Organization/Community Health
Field Study Site:**

Name of Proposed Preceptor:

Proposed Preceptor Qualifications
*(e.g., their graduate credential in
public health or equivalent
professional
experience and education):*

Preceptor Phone:

Preceptor Fax

Preceptor Email Address:

**Name of Director/Administrator of
Proposed Agency or
Organization/Community Health
Field Study Site:**

**Director/Administrator's degree
information and qualifications:**

Director/Administrator's Phone:

Director/Administrator's Fax:

Director/Administrator's

Email Address: _____

Step 2. The student shall include a separate a 250-word essay providing a rationale for selecting a community health field study site outside the current TUC Network of Placement Sites (singled-spaced, Times New Roman, size 12 font). This rationale must describe what the student’s specific role will be on the proposed field study project, what public health skills they will use, and what they expect to achieve by the end of the field study. The essay must also include specific details about the proposed project(s) and activities that the student is expected complete during the field study and how the project(s) and activities satisfy requirements for the course learning objectives and how they address the Program’s public health competencies.

Step 3. The students shall submit this application by specified deadlines. Please remit to:

Nemesia Kelly, MPH
Associate Professor & Field Study Coordinator
Chair, Health Equity and Criminal Justice Concentration
Public Health Program
College of Education and Health Sciences
Touro University California
E-mail: nkelly@touro.edu
Wilderman 403

Decisions: All applications are subject to review by committee. Students will be contacted by the Field Study Coordinator within two to three weeks with a decision. Decisions of the Committee are final.



PUBLIC HEALTH PROGRAM

FORMAL REQUEST TO APPLY CURRENT PROFESSIONAL PUBLIC HEALTH EMPLOYMENT TO THE PUBLIC HEALTH FIELD STUDY

Description: IMPH students who are employed at public health practice agencies and organizations while enrolled in the Public Health Program may be permitted to apply professional paid public health employment to the Public Health Field Study (PHFS).

Eligibility Criteria:

- The student must provide verification of current public health employment at an agency or organization while enrolled in the TUC Public Health Program (*Clinical work involving individual patient care or health facility does not qualify.*)

Current public health employment must include active involvement in at least one of the following activities:

- Assessing, monitoring, or conducting surveillance of health conditions or delivery of services in a population.
 - Establishing public health objectives and priorities.
 - Conducting basic or applied research on population-based health problems including the behavioral, biological, or environmental risk factors.
 - Designing, implementing and/or evaluating policies and/or intervention strategies/programs.
- The agency/organization must be approved by the Public Health Program as a placement site. The student's proposed preceptor must meet the Program's preceptor requirements. In addition, the Program will review and determine whether the student's current job duties and responsibilities, projects, tasks, and activities meet the Program's criteria for the PHFS. (*Refer to the PHFS Preceptor Handbook for our criteria.*)

Application:

Step 1. Please provide the following information.

Student Name:

Name of Current Employer:

Current Position/Title:

Name of Supervisor:

Supervisor's Address:

Supervisor's Phone:

Supervisor's Email Address:

Step 2. Please submit a separate 2-3 page (single-spaced) narrative describing current public health work experience, including:

- Description of specific duties performed.
- Discussion of the impact or relevance of the experience to public health, highlighting knowledge, theories and concepts covered in MPH coursework.
- List of skills/competencies met in the work experience (see MPH competencies in the course syllabus).
- Contact information of your supervisor who can verify your employment with the agency or organization.

Step 3. Students must submit the formal request via email by specified deadlines to:

Nemesia Kelly, MPH
Associate Professor & Field Study Coordinator
Chair, Health Equity and Criminal Justice Concentration
Public Health Program
College of Education and Health Sciences
Touro University California
E-mail: nkelly@touro.edu

Decisions: All requests are subject to review by committee. Students will be contacted by the Field Study Coordinator within two to three weeks regarding a decision. Decisions of the Committee are final.



PUBLIC HEALTH PROGRAM

FORMAL REQUEST TO APPLY PAID INTERNSHIPS TO THE PUBLIC HEALTH FIELD STUDY

Students who wish to apply a paid internship to the Public Health Field Study for academic credit, must have completed all core and track-required courses prior to beginning their paid internship. Requests for paid internships to satisfy the field study must be approved by the Program. In addition, paid internships selected for the field study course must permit MPH students to complete 30-40 field study hours per week over a minimum of 10-12 weeks for IMPH students and 6 weeks for MPH dual or joint degree students.

Student Requirements:

3. Students are advised to review the following sections in course syllabus at https://docs.google.com/document/d/1eLVt9N_5bdZPK-S2crRhz1WuqpZcfuUZHtRhLhC0xM/edit?usp=sharing:
 - *Course Overview*
 - *Course Learning Objectives*
 - *PHFS Competencies*
4. Students are required to provide the *PHFS Preceptor Handbook* to their prospective preceptors/sites to share the following information which includes:
 - a. **Public Health Program Info Sheets and the Invitation to Prospective Sites to Develop PHFS Preceptorship Partnerships with TUC**
 - b. **Course Overview, Learning Objectives, PHFS Competencies, the Role of Community Partnerships**
 - c. **Guidelines for PHFS Sites & Preceptors and PHFS Standards and Learning Expectations for sites, students, and the Public Health Program, Preceptor Responsibilities, and Preceptor Checklists**
 - d. **PHFS Placement Timelines, Policies and Matching Process**
 - e. The web link for **Online Registration for New PHFS Placement Sites** for proposed sites and preceptors so that they may post their site/preceptor

information, proposed PHFS projects, available learning objectives, research opportunities, onboarding requirements, etc.

Application:

Step 1. Please complete the following.

Student Name:

**Proposed Agency or
Organization/Community Health
Field Study Site:**

**Address of Proposed Agency or
Organization/Community Health
Field Study Site:**

Name of Proposed Preceptor:

Proposed Preceptor Qualifications
*(e.g., their graduate credential in
public health or equivalent
professional
experience and education):*

Preceptor Phone:

Preceptor Fax

Preceptor Email Address:

**Name of Director/Administrator of
Proposed Agency or
Organization/Community Health
Field Study Site:**

**Director/Administrator's degree
information and qualifications:**

Director/Administrator's Phone:

Director/Administrator's Fax:

**Director/Administrator's
Email Address:** _____

Step 2. Students shall include a separate a 250-word essay providing a rationale for applying a paid internship to a field study placement (singled-spaced, Times New Roman, size 12 font). This rationale should also include specific details about the proposed project(s) and activities that the student is expected complete during the field study and how the project(s) and activities satisfy requirements for the course learning objectives and how they address the Program's public health competencies.

Step 3. Students shall submit this application via email by specified field study planning deadline for the Field Study Term. Please remit to:

Nemesia Kelly, MPH
Assistant Professor & Field Study Coordinator
Chair, Health Equity and Criminal Justice
Public Health Program
College of Education and Health Sciences
Touro University California
E-mail: nkelly@touro.edu

Decisions: All applications are subject to review by the Program. Students will be contacted by the Field Study Coordinator within two to three weeks regarding a decision.



PUBLIC HEALTH PROGRAM

**APPLICATION FOR THE FIELD STUDY WAIVER
(CRITERION I)**

Student Name:

Name of Previous Public Health Agency/Organization:

Title at Previous Public Health Agency/Organization:

Name of Previous Supervisor:

Previous Supervisor's Address:

Previous Supervisor's Phone:

Previous Supervisor's Email Address:

Step 2. Please submit a separate 2-3 page (single-spaced) narrative describing current public health work experience, including:

- Description of specific duties performed.
- Discussion of the impact or relevance of the experience to public health, highlighting knowledge, theories and concepts covered in MPH coursework.
- List of skills/competencies met in the work experience (see MPH competencies in the course syllabus).
- Contact information of your supervisor who can verify your employment with the agency or organization.

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Nemesia Kelly, MPH
Associate Professor & Field Study Coordinator
Chair, Health Equity and Criminal Justice Concentration

Public Health Program
College of Education and Health Sciences
Touro University California
E-mail: nkelly@touro.edu

Decisions: All requests are subject to review by committee. Students will be contacted by the Field Study Coordinator within two to three weeks regarding a decision. Decisions of the Committee are final.



PUBLIC HEALTH PROGRAM

APPROVAL CRITERIA FOR THE FIELD STUDY WAIVER (CRITERION I)

The Field Study Waiver (Criterion I): IMPH students who can verify previous public health employment of three years of continuous, paid, public health employment prior to enrollment in the MPH program may be eligible for a waiver that would allow them to complete 30-40 field study hours per week over a minimum of 6 consecutive weeks. *(Clinical work involving individual patient care or health facility does not qualify.)*

Relevant public health experience must include involvement in at least one of the following activities:

- Assessing, monitoring, or conducting surveillance of health conditions or delivery of services in a population.
- Establishing public health objectives and priorities.
- Conducting basic or applied research on population-based health problems including the behavioral, biological, or environmental risk factors.
- Designing, implementing and/or evaluating policies and/or intervention strategies/programs.



PUBLIC HEALTH PROGRAM

**APPROVAL CRITERIA & APPLICATION
FOR THE FIELD STUDY WAIVER (CRITERION II)**

The Field Study Waiver (Criterion II): The Field Study Waiver allows for 200 field study hours to be waived for MPH students who can verify enrollment in any non-TUC (outside of TUC) accredited four-year medical school, Doctor of Pharmacy program, or Master of Science in Physician Assistant Studies program, after completing all core and track courses and all or the majority of course electives in the Public Health Program.

Waiver Application for Criterion II. Please complete the following.

Student Name: _____

Name of TUC Faculty Advisor _____

Track (circle one): **Community Health** **Global Health**

Name of Medical/PA/Pharmacy School/University: _____

Name of Medical/PA/Pharmacy Degree Program: _____

Name of Medical/PA/Pharmacy Faculty Advisor: _____

Medical/PA/Pharmacy Faculty Advisor's Address: _____

Medical/PA/Pharmacy Faculty Advisor's Phone: _____

Medical/PA/Pharmacy Faculty Advisor's Email Address: _____

Students shall and submit an official copy of their transcripts along with this form verifying enrollment in a non-TUC accredited four-year medical school, Doctor of Pharmacy program, or Master of Science in Physician Assistant Studies program.

Submit your application at least 4 weeks prior to registration in PH 600. Please remit to:

Nemesia Kelly, MPH
Field Study Coordinator
E-mail: nkelly@touro.edu

Waiver Decisions: Once received, a review committee will assess the waiver. Students will be contacted by the Program Director within two to three weeks with a decision. Decisions of the panel are final.

MEMORANDUM OF UNDERSTANDING

AND TOURO UNIVERSITY CALIFORNIA

PUBLIC HEALTH PROGRAM PRECEPTORSHIP AGREEMENT

This Public Health Preceptorship Agreement (“Agreement”) is made on _____ between the _____, an organization that _____, whose address is _____ and Touro University, a California nonprofit public corporation (“TUC”), whose address is 1310 Club Drive, Vallejo, CA 94592, who agree as follows:

I. Recitals

- A. Agency/Organization owns and operates the following health care clinics and public health offices (Facility or Facilities): located at _____.
- B. TUC operates the College of Education and Health Sciences (CEHS), the College of Osteopathic Medicine (COM), and the College of Pharmacy (COP) in Vallejo, California and operates a branch campus in Henderson, Nevada with Colleges of Osteopathic Medicine and Health and Human Services. TUC desires that its students obtain practical educational and training experiences and observational opportunities at the Facilities through participation in an affiliation program (“Program”).
- C. Agency/Organization deems it beneficial to participate in the Program by providing educational and training experiences and observational opportunities at its Facilities for TUC students pursuant to the terms and conditions of this Agreement.

In consideration of the foregoing objectives and in further consideration of the covenants and promises hereinafter set forth, the Parties agree as follows:

I. PROGRAM PARAMETERS

- 1.01 The period of time for each student’s educational and training experience and observational opportunity shall be agreed upon by the Parties before the student begins his or her Program training.
- 1.02 The maximum number of students to receive training shall be agreed upon by the Parties at least sixty (60) days prior to the beginning of Program training based on the availability of space and personnel at the school district and other considerations.
- 1.03 The TUC Program Coordinator and the Institution’s Designee shall be responsible for arriving at an agreement on behalf of their respective Parties regarding the duration of the Program training and the number of TUC students to receive Program training at the Facilities.
- 1.04 The Program and the maintenance of the standards of instruction shall be the sole responsibility of TUC. TUC shall only refer for participation in the Program students who are in good academic standing and TUC shall at the request of Institution provide the Institution with verification of such good standing.

1.05 All students participating in the Program shall meet all applicable health standards established by TUC and any applicable governmental authority and implemented by Institution for each Health Care and Office Facility. Institution shall have the right to terminate from the Program any student when the health status of such student is detrimental to the health and/or safety of Institution patients or staff as determined by Institution.

II. TUC'S RESPONSIBILITIES

2.01 Student Contact Information. TUC shall complete and send to Institution contact information for each student enrolled in the Program which shall include the student's name, address and telephone number prior to the beginning date of the planned educational and training experience and observational opportunity. Institution shall only use the student contact information to fulfill its obligations under this Agreement and agrees not to release any information in the student profile to any third party.

2.02 Schedule of Assignments. TUC shall notify the "Institution Designee" (as defined in Section 3.02), designated by the Institution from time to time, of TUC's planned schedule of student assignments, including the name of each student, and the student's level of academic preparation and length and dates of the educational and training experience and observational opportunity.

2.03 TUC Program Coordinator. TUC shall designate a faculty member as TUC Program Coordinator, who shall coordinate with Institution Designee in planning the Program.

2.04 Records. TUC shall maintain all personnel and academic records of TUC students participating in the Program.

2.05 Rules and Regulations. TUC shall enforce rules and regulations governing the students that are mutually agreed upon by TUC and Institution. TUC shall instruct its students on the general requirements of the Joint Commission on Accreditation of Healthcare Organizations ("JCAHO"), Centers for Medicare and Medicaid Services ("CMS") and the Health Insurance Portability and Accountability Act ("HIPAA"). TUC shall require that its students comply with all applicable Health Care and Office Facility policies and Federal and State regulatory requirements including, but not limited to JCAHO, CMS and HIPAA.

2.06 Student Responsibilities. TUC shall notify the students who are to participate in the Program at the Institution that they are responsible for:

- (a) Following the clinical and administrative policies, procedures, rules and regulations of Institution.
- (b) Arranging for their transportation and living arrangements when not provided by TUC.
- (c) Arranging for and assuming the cost of their health insurance.
- (d) Assuming responsibility for treatment of any illness or injury the student may have while participating in the Program, obtaining necessary immunizations and a tuberculin test, and having an annual health examination.

(e) Keeping all patient information confidential. No student shall have access to or have the right to receive any medical record, except when necessary, in the regular course of the public health experience. The discussion, transmission or narration in any form by students of any patient information of a personal nature, medical or otherwise, obtained in the regular course of the Program is forbidden except as a necessary part of the practical experience.

(f) Following the dress code of the Health Care and Office Facility and wearing name badges identifying themselves as students.

(g) Attending an orientation of the Health Care and Office Facilities.

(h) Complying with the rules and regulations that have been developed by TUC to govern student activities during assignment to a training institution, a copy of which is attached to this Agreement as Exhibit A.

2.07 Payroll Taxes and Withholdings. TUC shall be solely responsible for any payroll taxes, withholdings, workers' compensation and any other insurance or benefits of any kind for employees and agents of TUC providing services under this Agreement. TUC shall defend, indemnify and hold Institution harmless against all claims against Institution by employees or agents of TUC with respect to payroll taxes, withholdings, workers' compensation and other insurance benefits.

2.08 Student Insurance. TUC shall provide Institution with a certificate of insurance or other written confirmation that each student participating in the Program carries health insurance.

III. INSTITUTION'S RESPONSIBILITIES

3.01 Educational and training experience and observational opportunity. Institution shall accept from TUC the mutually agreed upon number of students enrolled in the Program and shall provide said students with supervised public health experience.

3.02 Institution Designee. Institution shall designate a member of Institution's Program Coordinator to participate with the TUC Program Coordinator in planning, implementing and coordinating the Program.

3.03 Access to Facilities. Institution shall permit students enrolled in the Program access to the Health Care and/or Office Facilities as appropriate and necessary for the Program, provided that the presence of the students shall not interfere with the activities of Institution.

3.04 Institution Rules & Regulations. Institution shall instruct the students on Institution rules and regulations, as well as the application of JCAHO, CMS and HIPAA requirements specific to the Institution. Institution hereby accepts Exhibit A, which incorporates by reference the applicable rules and regulations of the Institution, as the rules and regulations that shall govern TUC students during their training assignment at the Institution.

3.05 Withdrawal of Students. Institution may request TUC to withdraw from the Program any student who Institution determines is not performing satisfactorily, or who refuses to follow Institution's administrative policies, procedures, rules and regulations. Such request must be in writing and must include a statement as to the reason or reasons why Institution desires to have

the student withdrawn TUC shall comply with such request within five (5) days of receipt of the written request by TUC.

3.06 Emergency Health Care First Aid. Institution shall, on any day when students are receiving training at the Facilities, provide the students necessary emergency health care or first aid for accidents occurring in the Facilities. Except for such emergency assistance, Institution shall have no obligation to furnish medical or surgical care to any student.

3.07 Maintenance of Patient Services. Institution shall be responsible for developing, maintaining and providing services to all its patients and Institution will at all times provide an adequate, competent staff to be responsible for the development, maintenance and provision of these services to Institution patients.

3.08 Evaluation. Company shall evaluate the performance of the student on a regular basis using the evaluation form supplied by TUC. The completed final evaluation shall be forwarded to TUC within ten (10) business days following the conclusion of the student's public health field experience.

IV. NON-DISCRIMINATION

The Parties agree that all students receiving an educational and training experience and observational opportunity pursuant to this Agreement shall be selected without discrimination on account of race, color, religion, national origin, ancestry, disability, marital status, gender, sexual orientation, age, or veteran status.

V. STATUS OF TUC AND INSTITUTION

5.01 It is expressly agreed and understood by TUC and Institution that students participating in the Program are in attendance for educational purposes, and such students are not considered employees of Institution or TUC for any purpose, including but not limited to compensation for services, provision of employee welfare and pension benefits, or provision of workers' compensation insurance.

5.02 Institution assumes and maintains primary responsibility for services rendered to all of its patients and assumes and maintains complete control and supervision over all its employees and no Institution employees shall be deemed to be the employees or agents of TUC. TUC shall not be liable for any salaries, and employees of Institution shall not have the right or claim to any benefit or privilege as an employee or agent of TUC. Institution will assume sole and complete liability for all acts and omissions of its employees and shall indemnify and hold TUC harmless from any and all liability arising out of or connected with the acts or omissions of its employees.

VI. INDEMNIFICATION

6.01 TUC agrees to indemnify, defend and hold harmless, Institution and its affiliates, its directors, trustees, officers, agents, and employees against all claims, demands, damages, costs, expenses of whatever nature, including court costs and attorney fees, arising out of or resulting from the negligence or willful misconduct of TUC or its students in the performance of this Agreement.

6.02 Institution agrees to indemnify, defend and hold harmless, TUC and its affiliates, its directors, trustees, officers, agents, and employees against any and all claims, demands, damages, costs, expenses of whatever nature, including court costs and attorney fees, arising out of or resulting from the negligence or willful misconduct of Institution in the performance of this Agreement.

VII. INSURANCE

TUC shall procure and maintain in force during the term of this Agreement, at its sole cost and expense, insurance in amounts that are reasonably necessary to protect TUC and Institution from and against liability arising from or incident to the use of the Facilities by TUC students participating in the Program. Coverage under such insurance shall not be less than One Million Dollars (\$1,000,000) for each occurrence and Three Million Dollars (\$3,000,000) in the aggregate each for professional liability insurance and comprehensive general liability insurance. TUC shall provide Institution with a certificate of insurance evidencing the insurance coverage required under this Article VII. TUC shall further ensure that not less than thirty (30) days notice shall be provided to Institution of the cancellation of such insurance. TUC shall promptly notify Institution of any cancellation, reduction, or other material change in the amount or scope of any coverage required hereunder.

VIII. TERM AND TERMINATION

8.01 Term. This Agreement shall be effective as of the date specified above and shall remain in effect for an initial term of one year and will be automatically renewed thereafter for consecutive one-year terms (each a "Renewal Term") unless either Party elects not to renew this Agreement by giving the other written notice at least six (6) months prior to the expiration of the initial term or any renewal term of its intention not to renew this Agreement.

8.02 Termination.

(a) Mutual Agreement. This Agreement may be terminated at any time upon the mutual written agreement of the Parties.

(b) Without Cause. This Agreement may be terminated without cause upon 180 days prior written notice by either Party. Such termination shall not take effect, however, with regard to students already enrolled in the Program until such time as those students have completed their training for the TUC semester during which such termination notice is given.

X. GENERAL PROVISIONS

9.01 Amendments. This Agreement may be amended at any time by mutual agreement of the Parties without additional consideration, provided that before any amendment shall become effective, it shall be reduced to writing and signed by the Parties. Notwithstanding the foregoing, should any provision of this Agreement be in conflict with the law of the State in which the Facilities are located or Federal law, it shall be deemed amended to eliminate the conflict.

9.02 Assignment. Neither Party shall assign or otherwise transfer this Agreement without the other Party's prior written consent. Any purported assignment in violation of this Section shall be null and void.

9.13 Non-Exclusive Agreement. This Agreement is not exclusive. Accordingly, either Party shall have the right to enter into one or more agreements relating to the same or similar matters as are covered by this Agreement.

X. EXECUTION

IN WITNESS WHEREOF, the Parties hereto have caused this Agreement to be executed by their duly authorized representatives.

AGENCY/ORGANIZATION_____

By: _____
Name & Title
Agency/Organization

Date: _____

Title: _____

TOURO UNIVERSITY, a California nonprofit public benefit corporation

By: _____
Lisa May Norton, EdD, Dean
College of Education and Health Sciences

Date: _____

APPROVED AS TO FORM:

By: _____
Agency/Organization Counsel

Date: _____



LETTER OF AGREEMENT

Between

Touro University California
College of Education and Health Sciences (CEHS)
Public Health Program

And

Placement Site

This Letter of Agreement (“Agreement”) is made between the Touro University California, Public Health Program, located at 1310 Club Drive, Vallejo, CA 94592 (“Touro” or “MPH”), and **Placement Site**, located at 123 S. Street, State, City, Zip for a 6 week/12 week field study experience for **Student Name**. Touro University California and **Placement Site** shall jointly be referred to as the “Parties.”

This Letter of Agreement is effective beginning **[Student’s Field Study Start Date]**.

This Agreement sets forth important points, relating to public health education, concerning the training programs at Touro and the **Placement Site**.

1. Responsible Persons

Touro University California **Gayle Cummings, PsyD, MPH**
College of Education and Health Sciences
Public Health Program Director

Entity

Placement Site

As Public Health Program Director and Assistant Dean of the CEHS, Professor Cummings is ultimately responsible for the content and conduct of the educational activities as they pertain to the MPH students, **(Title, if available), Preceptor Name** (“Preceptor”) will be directly responsible for the supervision, training, assessment and evaluation of the MPH student, and **Placement Site** shall retain ultimate responsibility for ensuring that health care services provided or activities performed pursuant to this Agreement comply with all applicable provisions of federal, state and local laws, rules and regulations.

2. Educational Goals and Objectives

Please see attached MPH Field Study handbook that details the specific rotational educational goals and objectives.

3. Assignment

This Touro student is required to complete a minimum of 6/12 weeks of fieldwork experience. The purpose of the fieldwork experience is to apply the knowledge and skills acquired in the classroom, in a public health setting congruent to the MPH program's mission statement. Requirements for the fieldwork experience include: program director approval of the fieldwork site as well as completion of the core courses prior to the field study placement. Students are required to:

- a) Conduct one of the following: a needs assessment, program plan, program evaluation, policy plan/analysis, educational campaign, or applied research based upon the organization's needs, work, mission, and or data access/availability;
- b) Develop a plan to implement one of the above;
- c) Gather and analyze applicable data via:
 - primary data collection (questionnaire administration or interviews); or
 - secondary data/existing data set(s)
- d) Present project findings in field study summary that addresses a health issue of the community and contributes in resolving practical health problems.

In addition to data collection and analysis, the students' work should be valued by the organization and make a contribution to meeting the organization's goals or mission.

4. Financial Arrangements

Placement Site is under no obligation for the MPH student's salary, housing, food, or other benefits.

5. Professional Liability Coverage

The MPH Student's professional liability insurance documentation will be provided at no cost to **Placement Site**. The professional liability coverage is provided by Touro for the MPH student while performing his/her responsibilities as further defined below and in the Touro University California Public Health Field Study Preceptor Handbook.

"TUC shall procure and maintain in force during the term of this Agreement, at its sole cost and expense, insurance in amounts that are reasonably necessary to protect TUC and Institution from and against liability arising from or incident to the use of the Facilities by TUC students participating in the Program. Coverage under such insurance shall not be less than One Million Dollars (\$1,000,000) for each occurrence and Three Million Dollars



(\$3,000,000) in the aggregate each for professional liability insurance and comprehensive general liability insurance. TUC shall provide Institution with a certificate of insurance evidencing the insurance coverage required under this Article VII. TUC shall further ensure that not less than thirty (30) days notice shall be provided to Institution of the cancellation of such insurance. TUC shall promptly notify Institution of any cancellation, reduction, or other material change in the amount or scope of any coverage required hereunder."

6. Responsibility for Teaching, Supervision and Evaluation of the MPH Student

While at **Placement Site**, the MPH student will receive supervision and instruction from active members of the **Placement Site**. The MPH student will be supervised in all of his/her activities commensurate with the complexity of the project and the MPH student's own abilities. The MPH student's evaluation will be both formal and informal. At the conclusion of the rotations, a formal student evaluation will be completed by the preceptor and submitted to Touro. The MPH student will in turn, complete a site evaluation form at the conclusion of the field study and submit this to Touro.

7. Policies and Procedures for Education

While at **Placement Site**, the MPH student will take an active role in educational opportunities provided and directed by **Placement Site**. The responsibilities for teaching, supervision, and formal evaluation of the student's performance while at **Placement Site** are the duties of the assigned or designated Preceptor.

8. Miscellaneous Provisions

- b) Each party will indemnify, defend and hold the other party, its employees, officers, directors, associates, agents, and representatives harmless from and against any and all loss, damage, liability or claims (including, without limitation, reasonable costs and expense of litigation and reasonable attorneys' fees) arising from its negligent acts or omissions, or the negligent acts or omissions of its students, employees, agents, and representatives in connection with this Agreement. Any and all disputes arising out of or relating to this Agreement shall be settled through expedited binding arbitration before a single arbitrator (who shall be an attorney knowledgeable about matters relating to health care) and shall be conducted at and by the American Arbitration Association ("AAA") or its successor in accordance with its rules and procedures in the offices of **Placement Site**. The arbitrator shall be vested with determining all matters surrounding this Agreement. The costs of such arbitration shall be borne equally by the parties with each party bearing its own attorneys' fees and any costs associated with presenting its proof. Judgment upon the award shall be final and binding on the parties and may be entered in any court of competent jurisdiction.



- c) This Agreement constitutes the entire understanding between the parties with regard to all matters referred to herein and supersedes all previous agreements, whether written or oral. If any provision of this Agreement is, for any reason, held to be invalid or unenforceable, the other provisions of this Agreement will remain enforceable and the invalid or unenforceable provision will be deemed modified so that it is valid and enforceable to the maximum extent permitted by law.

The Parties acknowledge they have read this Agreement, understand the terms and conditions, and agree to be bound by them.

*Touro University California
College of Education and Health Sciences
Public Health Program*

Gayle Cummings PsyD, MPH
Program Director & Assistant Dean

Date

Placement Site

Site Preceptor

Date



PUBLIC HEALTH PROGRAM

PROFESSIONAL CODE OF CONDUCT FOR MASTER OF PUBLIC HEALTH (MPH) STUDENTS

Touro University California (TUC) is obliged to offer all faculty, staff, and students a safe working and study environment. Part of this obligation requires that every enrolled in the Public Health Program maintain an acceptable professional standard of conduct as outlined and as required by the TUC College of Education and Health Sciences Public Health Program. This extends to an obligation to comply with all lawful directives of TUC. Any failure to do so, or any willful breach of Public Health Program policies or this Code of Conduct will be deemed non-academic misconduct in accordance with TUC policies. Penalties, including dismissal may also apply.

Success in the public health field requires certain professional attributes in addition to content knowledge. Professionalism is a Cross-Cutting Competency developed by the [Associated Schools and Programs of Public Health \(ASPPH\)](#) as part of its [MPH Core Competency Model](#). The ASPPH definition of Professionalism is “The ability to demonstrate ethical choices, values and professional practices implicit in public health decisions; to consider the effect of choices on community stewardship, equity, social justice and accountability; and to commit to personal and institutional development.” Along with this definition, the ASPPH includes 11 different modules of knowledge, skills, and abilities that comprise the Professionalism Competency. Professional attributes are considered to be part of the academic performance of MPH students, which include honesty and integrity, leadership, excellence and continuous improvement, ethical practice and public accountability, life-long learning and competency, respect for diverse individuals and organizations, the ability to work effectively with others in a team environment, follow through on commitments, take and give constructive feedback, follow directions, accept responsibility for own actions.

Professionalism is as important as and holds equal importance to academic progress. Students are expected to demonstrate the legal, moral, and ethical standards required of a public health professional and display behavior that is consistent with these qualities. Professionalism and professional ethics are terms that signify certain scholastic, interpersonal and behavioral expectations. Among the characteristics included in this context are the knowledge, competence, demeanor, attitude, appearance, mannerisms, integrity, and morals displayed by the students to faculty, staff, preceptors, peers, members of the public, colleagues in public health and other settings. The Program expects nothing short of respect

and professional demeanor at all times.

GENERAL CONDUCT

TUC expects every student to:

- Respect the rights of other students, faculty and staff, and members or the public, and not engage in any conduct which may be perceived as harassment or interference with those rights.
- To conduct themselves in a professional and productive manner being both diligent and proactive.
- Apply basic principles of ethical analysis (e.g., the Public Health Code of Ethics, human rights framework, other moral theories) to issues of public health practice and policy.
- Not behave in an unruly or disreputable manner to the discomfort of any other students, faculty and staff, or members or the public.
- To exhibit the highest ethical and professional performance inside and outside of the classroom.
- Not knowingly engage in academic dishonesty defined as intentional cheating, fabrication or plagiarism or facilitate another student's academic dishonesty, nor obstruct another student's academic progress.
- Treat fellow students in an ethical manner, respecting the integrity of others and the right to pursue educational goals without interference.
- Not exhibit misconduct, ethics violations, or violation of professional codes of behavior.
- Treat others with respect and consideration regardless of their status or position.
- Not physically or verbally abuse other students, faculty and staff, or members or the public.
- Be courteous when dealing with the public while in the field.
- Not tamper with, vandalize nor destroy private and public property.
- Behave in a way which protects the reputation and good name of the University; and
- Comply with all relevant laws nationally and internationally.

By signing this Code of Conduct, I, _____ (print name and Student ID Number), _____ verify that I have read and understand my obligations to uphold and preserve the Professionalism Code of Conduct for MPH Students. I agree to be bound by and acknowledge my obligations under the Code of Conduct. I further understand that penalties may be imposed upon me should I willfully breach this Code of Conduct and that I may appeal against these penalties using the University's appeal mechanisms.

Student Signature _____

Date _____



TOURO UNIVERSITY
CALIFORNIA
COLLEGE OF EDUCATION
AND HEALTH SCIENCES
PUBLIC HEALTH PROGRAM

Community Health Field Study Emergency Protocol

The Community Health Field Study Emergency Protocol has been designed to prepare for and facilitate rapid response to emergencies which may arise during the Field Study. Although no single plan or protocol can address all contingencies, Touro University California (TUC) recognizes the importance of establishing, in advance, policies and procedures to safeguard the welfare of students during their field study placements at affiliated community health field study sites.

The procedures set forth are to be followed by all students in community health field study placements sponsored by TUC. It is the responsibility of the Field Study Coordinator to follow these procedures and provide information on the protocol to all field study students, preceptors, and site coordinators or administrators.

I. What should the TUC Field Study Coordinator do to prepare for emergencies?

1. The Field Study Coordinator will obtain from each student, prior to the start date
 - a. emergency contact information for the Student;
 - b. the [Student Code of Conduct agreement](#);

2. At a minimum, the following information should be provided to all community health field study students during the placement preparation by the Field Study Coordinator.
 - a. Emergency contact numbers for the Field Study Coordinator, Program Director, and Assistant Program Director, and Program Office Staff. This information will be included in the Field Study Handbook and will be given to the students at scheduled field study overviews. This emergency contact information will contain the following names, numbers, and email addresses:
 - i. Field Study Coordinator
 - ii. Program Director
 - iii. Assistant Program Director
 - iv. Program Office Staff

 - b. Procedures for a medical emergency:
 - i. Students should be informed that they are required to notify the Preceptor about any medical emergency, and that the Preceptor in turn is required to contact the Field Study Coordinator.

- ii. This information will be treated with the strictest confidentiality, and will be shared by the Preceptor and the Field Study Coordinator on a "need to know" basis only.
 - iii. If the crisis involving the Student is grave enough to seriously jeopardize his or her safety or well-being, the emergency contact he/she has provided at the time of registration will be informed.
3. Preceptors will be required to read the Field Study Preceptor Handbook, which will provide an incident reporting form. Preceptors and Students will be asked to sign a Statement of Understanding after the training session acknowledging that they
 - a. have received, reviewed, and understand this protocol,
 - b. have received and understand how and when to use the provided forms,
 - c. fully understand their duties and responsibilities as preceptors.

II. What is an emergency?

An emergency is any circumstance that poses a serious risk to, or that has already disturbed the safety and/or wellbeing of field study students. Emergencies will include, though not be confined to, the following types of events and incidents:

- Serious illness, physical or emotional trauma, injury or death
- Hospitalization for any reason
- Disappearance or kidnapping of a student
- Criminal assaults against program students
- Sexual assault or rape
- Arrest, incarceration, or deportation
- Automobile accidents involving program students
- Terrorist threat or attack
- Local political crisis disruptive of civil obedience
- Natural disaster

What to do in the case of an emergency: Preceptor

1. In an emergency, the Preceptor's first responsibility is to safeguard the immediate wellbeing of field study students. The Preceptor should take appropriate steps to assure the immediate safety and wellbeing of the students, including, as appropriate, obtaining prompt and appropriate medical attention or protection by local law enforcement.
2. The Preceptor and, when possible, the student, should contact the Field Study Coordinator immediately when an emergency event occurs or is imminent and brief them in detail about the situation.
3. As necessary, the Field Study Coordinator should notify the Program and College administration and the Office of Student Services about the emergency, and follow whatever procedures they may suggest or require. If there is a continuing risk to the immediate safety or welfare of the Student, the Field Study Coordinator should ask the appropriate authorities to

advise him/her on a regular basis about the evolution of the crisis, and about how the field study program should respond.

4. When all has been done to assure the Student's immediate well-being, preceptors, with the aid of the Student when possible, should gather all critical information, using the incident reporting form as a guide. The incident report should be sent to the Field Study Coordinator who will share copies with the:

- a. Public Health Program Director and Assistant Director
- b. Director of the PA Program regarding PA students and the deans of the colleges of Osteopathic Medicine and Pharmacy regarding MPH dual degree students
- c. Associate Dean of Student Services
- d. Dean of the College an Education and Health Sciences

5. The Field Study Coordinator should be contacted first by phone, with communication by e-mail and fax used as a last resort. Emergency contact information for the Field Study Coordinator is available and should be obtained from the Public Health Program. If the Field Study Coordinator is not available, the Preceptor and the Student will send the incident report directly to the Program Director who will then contact the other concerned TUC parties. Should the Field Study Coordinator and PH Program Director not be available, the Preceptor and the Student are encouraged to follow the PH Program emergency contact chain of (see page 6.)

6. During an on-going crisis, the Preceptor should keep the Field Study Coordinator updated on a regular basis. While there may not be time to complete the incident reporting form initially, the Preceptor should use it as a guide and understand that it will need to be completed and submitted to the Field Study Coordinator when possible to facilitate management of the situation.

7. All field study students will be evacuated in the emergency scenarios outlined at the beginning of section II. Evacuation for other incidents that might warrant concern and reporting but that do not pose an immediate threat to student safety and/or wellbeing (such as robbery or minor assault) will be decided jointly by the Field Study Coordinator and the Program Director. In the case of widespread conflict or natural disaster, Field Study Coordinator will reach out to local organizations to assist with ensuring the safety of the Student.

a. In an emergency, preceptors should urge students to contact family members or other concerned parties as soon as possible to advise them of their personal situation. Wherever necessary, the Preceptor should attempt to facilitate such contact. Methods of communication may include email, phone calls, faxes, and posts to social networking websites.

b. In a medical emergency, the Preceptor or appropriate designee should accompany the Student to an appropriate health care provider for medical attention. The Field Study Coordinator should be contacted and made aware of the situation. No details of a student's medical condition should be shared unless the Student grants permission. If a medical emergency is critical and a student's family or other emergency contact should be informed, the Preceptor should consult with the Field Study Coordinator to coordinate the contact with the Student's emergency contact.

Upon receiving a call from the Preceptor or Student involving a serious injury, death, or emergency, the manager will:

1. Start a log of all calls and activities.
2. Complete an Incident Report form, making sure to gather the following important information:
 - a. Name of caller and of victim(s), if any
 - b. Brief description of accident, injuries, and/or emergency, the steps that have been taken and the status.
 - c. Location of caller- street, city
 - d. Location of event, accident or emergency, proximity to student group
 - e. Phone, cell phone, fax, or beeper number where caller is
 - f. If any calls have been made to local law enforcement
 - g. If any information has been released to the media
 - h. If any specific plan of action is in place or anticipated

If a national/regional emergency – real or perceived – occurred, ask for answers to these questions:

1. What impact, if any, did any emergency have on availability of food, water, and medical supplies?
2. What was the nature of the emergency?
3. What is the intensity of the emergency?
4. Is there local law enforcement, military or emergency personnel at the site of the emergency?
5. Is continuation of field study feasible?
6. What is the advice of the local law enforcement, military or emergency personnel?

For personal emergencies:

1. Has injured party been in contact with his/her family?
2. Do we have his/her permission to contact family or other concerned parties?
3. Has the injured party been hospitalized or received medical attention?
4. What is the contact information of the facility where the injured party is being kept?
5. Communicate with the necessary location personnel to develop a tailored response plan. Communication will be ongoing until the situation is resolved
6. Do not make any statement directly to the media. Refer inquiries to the Program Director or Associate Dean of Student Services and follow recommendations regarding a consistent communication plan.

PH Program Emergency Contact Information

Field Study Coordinator	Address	Phone	Email	Fax
Nemesia Kelly, MPH Assistant Professor Public Health Program College of Education and Health Sciences Touro University California	Touro University California Public Health Program 1310 Club Drive, Room 403 Vallejo, CA 94592	Ofc: 707/638-5827 Cell: 707/731-7436	nkelly@touro.edu	707/638-5871
Program Director	Address	Phone	Email	Fax
Gayle Cummings, MPH, PsyD Associate Professor Public Health Program College of Education and Health Sciences Touro University California	Touro University California Public Health Program 1310 Club Drive, Room 404 Vallejo, CA 94592	Ofc: 707/638-5831 Cell: 510/390-4870	gcumming@touro.edu	707/638-5871
Assistant Program Director	Address	Phone	Email	Fax
Carinne Brody, DrPH, MPH Associate Professor & Assistant Director Public Health Program College of Education and Health Sciences Touro University California	Touro University California Public Health Program 1310 Club Drive, Room 307 Vallejo, CA 94592	707/638-5830	cbrody@touro.edu	707/638-5871
PH Program Office Staff	Address	Phone	Email	Fax
Sharon Chesney Program Analyst Public Health Program College of Education and Health Sciences Touro University California	Touro University California Public Health Program 1310 Club Drive, Room 402 Vallejo, CA 94592	707/638-5823	schesney@touro.edu	707/638-5871
Charleane Williams Administrative Coordinator Public Health Program College of Education and Health Sciences Touro University California	Touro University California Public Health Program 1310 Club Drive, Room 402 Vallejo, CA 94592	707/638-5838	cwilliam27@touro.edu	707/638-5871



PUBLIC HEALTH PROGRAM

Community Health Field Study Emergency Protocol
Statement of Understanding

Please sign below to indicate that you agree with the following statement:

“I certify that I have read and understood the above Community Health Field Study Emergency Protocol. I understand that the Protocol is designed to improve the management of emergency situations that arise during the Field Study and agree follow procedures as outlined within to the best of my ability.”

Signature: _____

Date: _____

Print Name: _____



PUBLIC HEALTH PROGRAM

Field Study Course Incident Report Form

Preceptors and students should complete this report immediately after an incident either using this form or online at https://tuc.co1.qualtrics.com/jfe/form/SV_eal6Qo9OydReidT. All witnesses should submit separate reports.

Today's Date: _____

Name(s) of Student(s) Involved: _____

Student ID #: _____

Date and Time of Incident: _____

Location of Incident: _____

Name of Student Completing Report and Contact Information:

Name of Preceptor Completing Report and Contact Information: .

Name of Field Study Placement Site: _____

Names of Others Involved: _____

COMPLETE THIS SECTION IF THERE WAS AN INJURY:

Please check the appropriate box to indicate the nature of the incident:

Alcohol/Drugs

Theft

Assault of Student

Name of officer and police department: _____

COMPLETE THIS SECTION IF THERE WAS DAMAGE Property Damage (including damage to another's vehicle):

Type of property: _____

Location of property: _____

Name of Property Owner: _____

Street Address: _____

City: _____ County: _____

Provence/State: _____ Country: _____

Postal/Zip Code: _____ Phone Number: _____

Email: _____

Nature and circumstances of damage:

Cost to repair: _____

Witnesses' names and addresses:

Signature of Reporting Preceptor/Student

Date

Fax or email a copy of this report within 72 hours of incident to the Field Study Coordinator and Program Director.

Fax: (707) 638-5871

Program Director Email: gcumming@touro.edu

**DOCUMENTS, FORMS, AND TEMPLATES
FOR
PHFS DELIVERABLES**



PUBLIC HEALTH PROGRAM

PHFS Calendar

Deliverable	Delivery Method	Due Date
PHFS Letter of Agreement & Emergency Protocol Statement of Understanding (<i>if applicable</i>)	Signed and Submitted by Preceptor via email/mail	One week after the placement start date
Scope of Work & Competency Inventory; Signed PHFS Contract, and Selected Dates for Field Study Site Visit	In collaboration with Student; Submitted by Student via Canvas	One week after the placement start date
PHFS Site Visit	Attended by Preceptor, Student, and Site Visitor in person/phone/video conference	Midway through placement
PHFS Preceptor Evaluation	Submitted by Preceptor - <i>The Field Study Coordinator will email the link to this survey directly to the Preceptor.</i>	At the end of the placement
TUC College of Osteopathic (COM) Medicine Clinical Education Department Preceptor Evaluation (<i>for DO/MPH candidates who satisfy the COM Research Rotation Elective through the PHFS ONLY</i>)	Submitted by Preceptor – <i>The Student will email the link to this survey directly to the Preceptor.</i>	TBD by the Student



PUBLIC HEALTH PROGRAM

Instructions for Completing the Field Study Scope of Work

Each student is required to complete a scope of work during the first week of their field study placement. The Scope of Work is essentially, a work plan and provides the framework for the field experience, by ensuring that:

- The student and preceptor have a clear understanding of the field experience, specifically the role and responsibilities of the student regarding the objectives, activities, timeline, and outcomes for the field study project.
- The experience is appropriate to satisfy academic credit towards the MPH degree.

The Scope of Work consists of the following main parts:

- **A brief paragraph consisting of 4-5 sentences describing:**
 - The placement site, its mission, and goals
 - Where the project fits in the organization (e.g., division, department, program, etc.) and its purpose
 - Details about the field study project and the student's role
 - A chart listing the objectives, activities, timeline, and indicators of outcomes for each objective for the student's work plan.
 - A list of all work products to be completed during the placement and corresponding competency areas.

How to create the scope of work:

1. Students will meet with preceptor and or site coordinator to discuss and plan the field experience, project, and draft the Scope of Work during the first week of the field study placement.
2. Download the Scope of Work Template provided below and draft of scope of work based on the framework described above. Feel free to refer the Scope of Work Examples also provided below.
3. Students are required to submit **a typed scope of work** as handwritten material is not acceptable for this deliverable.
4. Clearly outline the proposed field work.
5. Create specific objectives.

6. Students must carefully consider which competency areas that will be addressed by their objectives.
7. Be very specific in activities associated with objectives.
8. Estimate time for each activity.
9. Remember that, should it become necessary, it is possible (and sometimes expected) to change the scope of work.
10. The Scope of Work should be as long as needed to adequately describe planned experience.
11. Students are required to determine how they will evaluate themselves. To do so, they may want to consider the following:
 - PHFS Reflections
 - Weekly meetings/student progress reports
 - Preceptor feedback
 - Preceptor's evaluation
 - Student's final report
 - How will the student and the preceptor know that they have completed an activity or objective?
 - How will the student and the preceptor know how well they completed the activity or objective?

12. List all work products and corresponding competency areas. Students are required to complete a minimum of two (2) work products during their PHFS placement. Examples of work products are deliverables assigned by the preceptor such as literature reviews, research and review of best practices, grant writing projects, reports or presentations of data or findings, poster presentations, health education/promotion curriculum design, program evaluations, surveys, policy analysis, data charts and analysis, pamphlets, brochures, websites, social media pages, research study recruitment materials, etc. In the table below, please list of all work products to be completed during the PHFS placement and corresponding competency areas.

Scope of Work Template: Use the template provided in Canvas

Due Date: The Scope of Work is due one (1) week after the field study placement start date.

Submission: Please upload the scope of work as a Word doc/docx or PDF file.

IMPORTANT: This course deliverable is assessed routinely to determine that course criteria are met successfully. While feedback on the Scope of Work may be provided, it will not be graded individually but will count cumulatively towards the final grade.



TOURO UNIVERSITY

CALIFORNIA

COLLEGE OF EDUCATION
AND HEALTH SCIENCES

PUBLIC HEALTH PROGRAM

PUBLIC HEALTH FIELD STUDY

SCOPE OF WORK FOR: _____

Please complete Sections 1-3 below:

SECTION 1

In the box below, please write a paragraph consisting of 4-5 sentences describing:

- *The placement site, its mission, and goals.*
- *Where the project fits in the organization (e.g., division, department, program, etc.) and its purpose.*
- *Details about the field study project and your role.*

Example: *The Los Angeles County Department of Public Health focuses on protecting and improving the health of over 10 million residents each year, which accounts for being the largest county in the United States. The Department's mission is to prevent diseases, protect the peoples' health, and promote a healthy lifestyle for the residents of Los Angeles County by utilizing 14 public health centers located throughout the LA County. The Acute and Communicable Disease Center (ACDC) is one of the epidemiological centers in the LA County Public Health Department, which is dedicated to preventing and controlling infectious diseases (excluding TB, STD, and HIV) in Los Angeles County by implementing tools for surveillance, outbreak response, education, and preparedness activities. My field study project will be focusing on foodborne illnesses, mainly Salmonella infections. I will be assisting my preceptor in conducting surveillance, investigating disease outbreaks and recommend control measures, conduct special studies and projects through examining local clusters. A portion of my work here for ACDC will focus on interviewing infected individuals, data collection, and data entry which will allow for data analysis and outbreak investigations.*

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SECTION 2:

Scope of Work:

In the chart below, list the scope of work objectives, activities, and timeline developed in collaboration with your preceptor(s) identifying each corresponding competency (in the first column) that demonstrates competency attainment in a practical and applied setting.

COMPETENCY AREA: CATEGORY/COMPETENCY	OBJECTIVE	ACTIVITIES	TIMELINE	EVALUATION OF OUTCOME
<i>Identify One (1) competency from at least two (2) of the 2016 Council on Education for Public Health (CEPH) Core Competency Categories 1-5 and one (1) from each of the CEPH Core Competency Categories 6-8. Example: Planning & Management to Promote Health: Assess population needs, assets and capacities that affect communities' health. (Refer to CEPH competencies and guidance on competency interpretation below or in Canvas.)</i>	<i>Example: Conduct research on substance use in teens, local resources, and effective treatment programs.</i>	<i>Example: Conduct web searches and use Touro research databases to review the literature and discuss findings with the preceptor. Create a reference guide or resource drive of information on each substance and local resources for addiction and recovery. Compile findings in shared google drive.</i>	<i>Example: By Week 3</i>	<i>Indicate how you and your preceptor will know that you completed an activity or objective and how well you completed it.</i> <i>Examples: PHFS Reflections, weekly meetings/Student progress reports, Preceptor feedback, Preceptor's final evaluation, PHFS Report</i>

SECTION 3: PHFS Work Products

Students are required to complete a minimum of two (2) work products during their PHFS placement. Examples of work products are deliverables assigned by the preceptor/site (e.g., **literature reviews, research and review of best practices, grant writing projects, (see below)**, reports or presentations of data or findings, poster presentations, health education/promotion curriculum design, program evaluations, surveys, policy analysis, data charts and analysis, pamphlets, brochures, websites, social media pages, research study recruitment materials, etc.)

In the table below, please list of all work products to be completed during your field study that demonstrate and allow assessment of competency attainment.

PHFS WORK PRODUCTS	COMPETENCY AREA: CATEGORY AND COMPETENCY
<i>Example: Literature review</i>	<i>Example: Planning & Management to Promote Health:</i> Assess population needs, assets and capacities that affect communities' health
<i>Example: Survey</i>	<i>Example: Evidence-based Approaches to Public Health:</i> Select quantitative and qualitative data collection methods appropriate for a given public health context
<i>Example: Develop phone script for telephone survey in English and Vietnamese</i>	<i>Example: Communication:</i> <ul style="list-style-type: none"> • Communicate audience-appropriate public health content, both in writing and through oral presentation • Describe the importance of cultural competence in communicating public health content

TUC PUBLIC HEALTH PROGRAM MPH COMPETENCIES	
Adopted from the Council on Education for Public Health (CEPH) MPH Foundational Competencies (2016)	
Category	Competencies
1. Evidence-based Approaches to Public Health	1. Apply epidemiological methods to the breadth of settings and situations in public health practice
	2. Select quantitative and qualitative data collection methods appropriate for a given public health context
	3. Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming and software, as appropriate
	4. Interpret results of data analysis for public health research, policy or practice
2. Public Health & Health Care Systems	5. Compare the organization, structure and function of health care, public health and regulatory systems across national and international settings
	6. Discuss the means by which structural bias, social inequities and racism undermine health and create challenges to achieving health equity at organizational, community and societal levels
3. Planning & Management to Promote Health	7. Assess population needs, assets and capacities that affect communities' health
	8. Apply awareness of cultural values and practices to the design or implementation of public health policies or programs
	9. Design a population-based policy, program, project or intervention
	10. Explain basic principles and tools of budget and resource management
	11. Select methods to evaluate public health programs
4. Policy in Public Health	12. Discuss multiple dimensions of the policy-making process, including the roles of ethics and evidence
	13. Propose strategies to identify stakeholders and build coalitions and partnerships for influencing public health outcomes
	14. Advocate for political, social or economic policies and programs that will improve health in diverse populations

TUC PUBLIC HEALTH PROGRAM MPH COMPETENCIES	
Adopted from the Council on Education for Public Health (CEPH) MPH Foundational Competencies (2016)	
	15. Evaluate policies for their impact on public health and health equity
5. Leadership	16. Apply principles of leadership, governance and management, which include creating a vision, empowering others, fostering collaboration and guiding decision making
	17. Apply negotiation and mediation skills to address organizational or community challenges
6. Communication	18. Select communication strategies for different audiences and sectors
	19. Communicate audience-appropriate public health content, both in writing and through oral presentation
	20. Describe the importance of cultural competence in communicating public health content
7. Interprofessional Practice	21. Perform effectively on interprofessional teams
8. Systems Thinking	22. Apply systems thinking tools to a public health issue

**CEPH GUIDANCE ON INTERPRETATION OF
MPH FOUNDATIONAL COMPETENCIES**
(https://media.ceph.org/documents/D2_guidance.pdf)

MPH FOUNDATIONAL COMPETENCIES	COMPETENCY INTERPRETATION
Evidence-based Approaches to Public Health	
1. Apply epidemiological methods to settings and situations in public health practice	Assessment must include the application of various epidemiological study designs (e.g., cohort study) and principles (e.g., sample size, incidence, prevalence, morbidity, etc.). A single setting/situation is insufficient.
2. Select quantitative and qualitative data collection methods appropriate for a given public health context	"Select" = choose among methods. Students must be exposed to various methods so that they can distinguish between them. Must see that students can select among <u>both</u> quantitative and qualitative (e.g., focus groups, key informant interviews) data collection methods.
3. Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming and software, as appropriate	Assessment must address both parts of the competency statement: 1) qualitative (i.e., non-numerical) and 2) quantitative. Must see that students can analyze <u>both</u> types of data using the appropriate software. Appropriate software may be general (e.g., Excel or Word) or specific (e.g., NVivo or SPSS).
4. Interpret results of data analysis for public health research, policy or practice	Students should understand and apply findings from data analysis for public health research, policy or practice. Students should have an understanding of the data findings and be able to draw linkages to how the results may influence decisions.
Public Health & Health Care Systems	
5. Compare the organization, structure and function of health care, public health, and regulatory systems across national and international settings	International health systems must be apparent for comparison to be possible.
6. Discuss the means by which structural bias, social inequities and racism undermine health and create challenges to achieving health equity at organizational, community, and systemic levels	Students should be able to discuss factors (including racism, specifically) that impact health equity at multiple levels for a particular health problem. Students should be able to discuss health disparities and differences among groups, as well as the ways in which organizations, systems, and structures operate that may have inequitable influences on certain groups.
Planning & Management to Promote Health	
7. Assess population needs, assets and capacities that affect communities' health	Very concrete skill. Assess a specific community's strengths, challenges, and the desired outcomes that are necessary for community well-being.

<p>8. Apply awareness of cultural values and practices to the design, implementation, or critique of public health policies or programs</p>	<p>Must see preparation of students in connecting concepts of culture to the assignment (e.g., cultural adaptation/tailoring, stakeholder involvement in planning, cultural humility).</p> <p>A standard program planning assignment in the traditional social & behavioral class is not sufficient without specific attention to cultural considerations.</p> <p>Assessment could be the critique of an existing policy/program rather than the actual design/implementation of something new.</p> <p>*Lack of evidence of instruction is a common reason for non-compliant finding</p>
<p>9. Design a population-based policy, program, project or intervention</p>	<p>Very concrete skill. Product could be a research project, plan for a program, policy statement, etc.</p>
<p>10. Explain basic principles and tools of budget and resource management</p>	<p>“Resource management” refers to stewardship (planning, monitoring, etc.) of resources throughout a project, not simply preparing a budget statement that projects what resources will be required.</p> <p>Writing a supplemental description to individual line items in a projected budget is often insufficient unless there are other parameters around the task or assignment related to managing budgets and resources (e.g., staffing, space, multiple programs).</p> <p>The didactic preparation and assessment should address steps involved in managing budgets or other resources AFTER a project begins.</p> <p>*Lack of evidence of instruction is a common reason for non-compliant finding</p>
<p>11. Select methods to evaluate public health programs</p>	<p>“Select” = choose among methods. Students should be able to consider a public health program and choose the appropriate evaluation method for the program. Types of evaluations may include formative evaluation (feasibility, appropriateness, acceptability), process/implementation evaluation (have activities been implemented as intended), outcome/effectiveness evaluation (effect in the target population), and impact evaluation (success in achieving ultimate program goals). Students do not have to actually evaluate, but must be able to identify the correct approach.</p>
<p>Policy in Public Health</p>	
<p>12. Discuss the policy-making process, including the roles of ethics and evidence</p>	<p>Broader than analyzing a specific policy. Students must be able to explain the technical aspects of how policies (on a local, state, or national level) are created and adopted, including legislative and/or regulatory roles and processes.</p> <p>Didactic preparation and assessment should focus on how the policy may move from one legislative committee to another, the iterations a policy goes through, and incorporating feedback to garner enough legislative support for the final version. Students should also consider how research or evaluation evidence and ethics influence the policy making process.</p>
<p>13. Propose strategies to identify stakeholders and build coalitions and partnerships for influencing public health outcomes</p>	<p>Students should recognize the importance of community involvement and buy-in as instrumental to promoting community change and improvement and should think about how to bring relevant stakeholders together.</p> <p>*Lack of evidence of instruction is a common reason for non-compliant finding</p>

<p>14. Advocate for political, social or economic policies and programs that will improve health in diverse populations</p>	<p>Students must understand how to advocate for a particular issue and have the ability to influence policy and/or decision making, such as through stakeholder mobilization, educating policy makers, etc. Students must produce a product that would be part of an advocacy campaign or effort (e.g., legislative briefing paper or fact sheet, advocacy strategy outline, etc.).</p> <p>*Lack of evidence of instruction is a common reason for non-compliant finding</p>
<p>15. Evaluate policies for their impact on public health and health equity</p>	<p>Assessment should focus on the evaluation of policies rather than the development of policies. Students should consider how groups are affected by policies, including both intended and unintended consequences with a focus on the impacts on equity.</p>
<p>Leadership</p>	
<p>16. Apply leadership and/or management principles to address a relevant issue</p>	<p>Principles of leadership and management may include creating a vision, empowering others, fostering collaboration, and guiding decision making. Students must apply these principles by developing their own strategies or approaches to a given scenario, such as responding to a case study or scenario. It is insufficient to simply describe principles in an essay or exam, observe these skills in others, or have students self-reflect on their leadership style.</p> <p>*Lack of evidence of instruction is a common reason for non-compliant finding</p>
<p>17. Apply negotiation and mediation skills to address organizational or community challenges</p>	<p>Students need to know some ways to negotiate/mediate when another party has conflicting interests and/or different desired outcomes from their own and there is a need to come to a common conclusion. Such skills extend beyond the level of negotiating required in a successful intra-group process and assessment must involve more than persuasive communication.</p> <p>*Lack of evidence of instruction is a common reason for non-compliant finding</p>
<p>Communication</p>	
<p>18. Select communication strategies for different audiences and sectors</p>	<p>"Select" = determine how to communicate with different groups by considering the needs and usual practices of the target audience. Students should be able to discern between different media, consider levels of health literacy, etc. This competency is often conflated with #19, but it is different.</p>
<p>19. Communicate audience-appropriate (i.e., non-academic, non-peer audience) public health content, both in writing and through oral presentation</p>	<p>Students should communicate using words and images that are effective, accessible, and understandable for each audience. Students should consider the venues or methods of delivery (e.g., social media, press release, oral presentation, journal article) that best fit the circumstances.</p> <p>An audience of peers/fellow students or an academic audience is not sufficient.</p> <p>One assessment may be sufficient if it has written and oral components, or multiple assessments are needed.</p>
<p>20. Describe the importance of cultural competence in communicating public health content</p>	<p>Different from #8 – the focus is on <u>communicating</u> public health content and why cultural competence is an important consideration when crafting public health communications. Students should consider the importance of ensuring that different groups can easily relate to and apply public health information.</p>

Interprofessional and/or Intersectoral Practice	
21. Integrate perspectives from other sectors and/or professions to promote and advance population health	<p>Other sectors and/or professions may include physicians, nurses, pharmacists, and physical therapists, and can extend past the health sciences into education, urban planning, public administration, engineering, housing authorities, the legal system, police departments, and beyond.</p> <p>Students must combine the external sector/profession's perspective and/or knowledge with their own public health training to complete a task, solve a problem, etc. Must actually interact with individuals in a profession or sector other than public health (in-person or online).</p> <p>Role-playing in which public health students assume the identity of an individual from another profession or sector to which they do not already belong is not an acceptable substitute.</p> <p>Not acceptable to solely assess in internship.</p> <p>*Lack of evidence of instruction is common reason for non-compliant finding</p>
Systems Thinking	
22. Apply a systems thinking tool to visually represent a public health issue in a format other than a standard narrative	<p>Evidence of competency demonstration must be non-narrative. Describing how systems thinking might apply is not sufficient; students must show that they can actually apply systems thinking tools by constructing something like a causal loop diagram, systems archetypes, network analyses, and concept maps. Logic models and evidence tables are not sufficient to address this competency.</p>



PUBLIC HEALTH PROGRAM

Public Health Field Study (PHFS) Competency Inventory

Name: _____

MPH Concentration: _____

Through a collaborative process with the Preceptor, the Student is required to identify the following Public Health Program Competencies for their field study project, which must be addressed by the PHFS Scope of Work. Competencies are presented in an Inventory format as a required course deliverable. Students must identify at least 5 core competencies (adopted from the 2016 Council on Education for Public Health (CEPH) MPH Foundational Competency Categories), one (1) cross-cutting competency, and three (3) MPH Concentration competencies. Please follow the steps below:

Step 1: To complete your inventory, please refer to the full list of MPH Competencies and Guidance on Competency Interpretation provided in Canvas.

Step 2: Working with your preceptor, select the competencies that will be addressed by your scope of work.

Step 3: Copy and paste the corresponding competencies into the designated spaces below.

Step 4: Next, apply the selected competencies to the objectives and activities listed in your scope of work.

Step 5: Write a brief description (one to two sentences) interpreting the competency as it applies to your PHFS project demonstrating that your objectives and activities appropriately address the competencies you have chosen. (Refer to Competency Inventory Example in Canvas for competency application and interpretation examples.)

Step 6: Type your competency inventory (handwritten material is not acceptable).

COURSE COMPETENCIES

Core Competencies: Identify one (1) competency from at least two (2) of the CEPH MPH Foundational Competency Categories 1-5.

- 1. Evidence-based Approaches to Public Health**
- 2. Public Health & Health Care Systems**
- 3. Planning & Management to Promote Health**
- 4. Policy in Public Health**
- 5. Leadership**

2016 CEPH MPH FOUNDATIONAL COMPETENCY CATEGORIES	COMPETENCY	APPLICATION/INTERPRETATION

- Select one (1) competency from each of the following 2016 CEPH MPH Foundational Competency Categories 6-8.

- 6. Communication
- 7. Interprofessional Practice
- 8. Systems Thinking

2016 CEPH MPH FOUNDATIONAL COMPETENCY CATEGORIES	COMPETENCY	APPLICATION/INTERPRETATION

- **Cross-Cutting MPH Competency:** Identify One (1) Cross-Cutting MPH Competency.

CROSS-CUTTING COMPETENCY	APPLICATION/INTERPRETATION

- **MPH Concentration Competencies:** Select Three (3) Competencies from your Concentration (Community Action for Health, Global Health, Health Equity and Criminal Justice).

MPH CONCENTRATION COMPETENCY	APPLICATION/INTERPRETATION



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PUBLIC HEALTH PROGRAM
PHFS Competency Inventory (EXAMPLE)

Name: Jane Smith

MPH Concentration: Community Action for Health

Through a collaborative process with the Preceptor, the Student is required to identify the following Public Health Program Competencies for their field study project, which must be addressed by the PHFS Scope of Work. Competencies are presented in an Inventory format as a required course deliverable. Students must identify at least 5 core competencies (adopted from the 2016 Council on Education for Public Health (CEPH) MPH Foundational Competency Categories), one (1) cross-cutting competency, and three (3) MPH Concentration competencies. Please follow the steps below:

Step 1: To complete your inventory, please refer to the full list of MPH Competencies and Guidance on Competency Interpretation provided in Canvas.

Step 2: Working with your preceptor, select the competencies that will be addressed by your scope of work.

Step 3: Copy and paste the corresponding competencies into the designated spaces below.

Step 4: Next, apply the selected competencies to the objectives and activities listed in your scope of work.

Step 5: Write a brief description (one to two sentences) interpreting the competency as it applies to your PHFS project demonstrating that your objectives and activities appropriately address the competencies you have chosen. (Refer to Competency Inventory Example in Canvas for competency application and interpretation examples.)

Step 6: Type your competency inventory (handwritten material is not acceptable).

COURSE COMPETENCIES

Core Competencies: Identify one (1) competency from at least two (2) of the CEPH MPH Foundational Competency Categories 1-5.

1. Evidence-based Approaches to Public Health
2. Public Health & Health Care Systems
3. Planning & Management to Promote Health
4. Policy in Public Health
5. Leadership

2016 CEPH COMPETENCY CATEGORIES	COMPETENCY	APPLICATION/INTERPRETATION
Planning and management to promote health	Discuss the basic principles of budgeting and resource allocation for a project.	Working on a grant proposal for Pharm2home initiative that aims to provide medication consults for chronic diseases beyond the walls of the clinic. The grant proposal will require drafting budget and resource allocation needs for the initiative.
Leadership	Applying leadership and management principles to organize and implement community event.	Organizing and leading an event called stay flossy which aims to prevent cavities and or reduce cavities from the further progressing through the application of fluoride varnish.
Policy in Public Health	Building coalition and partnership with relevant community organization to promote health in the community.	Partnered with MOBEC (Mobile Diabetes Education Center) to provide education on diabetes and hypertension.
Evidence-based Approaches to Public Health	Interpreting results of data analysis for public health research	Analyzing data to generate accurate interpretation for pharm2home grant proposal.

- Select one (1) competency from each of the following 2016 CEPH MPH Foundational Competency Categories 6-8.

6. Communication
7. Interprofessional Practice
8. Systems Thinking

16 CEPH COMPETENCY CATEGORIES	COMPETENCY	APPLICATION/INTERPRETATION
Communication	Describe the importance of cultural competence in communicating public health content	Demonstrating cultural sensitivity while communicating vital information related to health in both community outreach events such as MOBEC and stay flossy.
Interprofessional Practice	Integrating perspectives from other sectors and /or professions to promote and advance population health	Working alongside MOBEC and Pharm2home to implement quality community health outreach. The team includes public health practitioners,

		medical doctors, Physician assistants, and dieticians.
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Systems Thinking	Applying a system thinking tool to visually represent a public health issue in a format other than a standard narrative.	Understand how poor oral health a result of lack of recourses and dental services is.
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- **Cross-Cutting MPH Competency:** Identify One (1) Cross-Cutting MPH Competency.

CROSS-CUTTING COMPETENCY	APPLICATION/INTERPRETATION
Identify valid sources of public health information including peer-reviewed literature, government records, and publicly available datasets	Case report for JAAPA: Gathered key literature for identifying evaluation and management of Juvenile polyposis syndrome. Stay flossy: Collected important data on oral health which includes demographics, condition of oral health, and effects of COVID-19 in accessing dental care.

- **MPH Concentration Competencies:** Select Three (3) Competencies from your Concentration (Community Action for Health, Global Health, Health Equity and Criminal Justice).

MPH CONCENTRATION COMPETENCY	APPLICATION/INTERPRETATION
Identify and analyze strategies aimed at reducing social inequities in health	MOBEC unit delivers high quality screening for diabetes and hypertension as well as resources on how to manage these chronic conditions. MOBEC is a service intended to reduce social inequities in health by breaking barriers and meeting the community where they're at.
Identify and adapt evidence-based programs and strategies that are most appropriate for community- based needs and priorities	Low-income community in solano county have reduced access to quality dental care due to lack of dental insurance, transportation, and COVID-19. For this reason, there's high need of basic dental care that will reduce poor oral health. The Stay flossy program aims to reduce cavities from forming through the application of fluoride varnish.

<p>Demonstrate competence using specific community health planning data sources to assist community collaborative groups in program/action prioritization.</p>	<p>Program planning and execution requires understanding the needs of the community to improve quality of care and reduce health inequity. Effective program planning includes not only understanding the needs of the community through data collection and analysis but also partnering with relevant stakeholders to foster community engagement in the execution phase of the program planning.</p>
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PUBLIC HEALTH PROGRAM
PHFS Competency Inventory (EXAMPLE)

Name: Jane Smith

MPH Concentration: Health Equity and Criminal Justice

Through a collaborative process with the Preceptor, the Student is required to identify the following Public Health Program Competencies for their field study project, which must be addressed by the PHFS Scope of Work. Competencies are presented in an Inventory format as a required course deliverable. Students must identify at least 5 core competencies (adopted from the 2016 Council on Education for Public Health (CEPH) MPH Foundational Competency Categories), one (1) cross-cutting competency, and three (3) MPH Concentration competencies. Please follow the steps below:

Step 1: To complete your inventory, please refer to the full list of MPH Competencies and Guidance on Competency Interpretation provided in Canvas.

Step 2: Working with your preceptor, select the competencies that will be addressed by your scope of work.

Step 3: Copy and paste the corresponding competencies into the designated spaces below.

Step 4: Next, apply the selected competencies to the objectives and activities listed in your scope of work.

Step 5: Write a brief description (one to two sentences) interpreting the competency as it applies to your

PHFS project demonstrating that your objectives and activities appropriately address the competencies you have chosen. (Refer to the highlighted examples below.)

Step 6: Type your competency inventory (handwritten material is not acceptable).

COURSE COMPETENCIES

Core Competencies: Identify one (1) competency from at least two (2) of the CEPH MPH Foundational Competency Categories 1-5.

- 1. Evidence-based Approaches to Public Health**
- 2. Public Health & Health Care Systems**

3. Planning & Management to Promote Health
4. Policy in Public Health
5. Leadership

2016 CEPH MPH FOUNDATIONAL COMPETENCY CATEGORIES	COMPETENCY	APPLICATION/INTERPRETATION
Evidence-based Approaches to Public Health	Interpret results of data analysis for public health research, policy, or practice	Reviewing results of peer-reviewed data to determine the link between self-harm and incarceration.
Public Health & Health Care Systems	Discuss the means by which structural bias, social inequities and racism undermine health and create challenges to achieving health equity at community and societal levels.	How does racism and social inequities reduce mental health resources and increase the self-harm rate among incarcerated and carceral citizens and their families?
Planning & Management to Promote Health	Assess population needs, assets and capacities that affect communities' health	Assess the mental health needs of carceral citizens and their families and how the organization can assist with meeting these needs
Policy in Public Health	Propose strategies to identify stakeholders and build coalitions and partnerships for influencing public health outcomes	Propose initiatives and program options to BYA stakeholders to assist with the mental health needs of the community and prevent self-harm among incarcerated and carceral citizens and their families.

- Select one (1) competency from each of the 2016 CEPH MPH Foundational Competency Categories 6-8.

6. Communication
7. Interprofessional Practice
8. Systems Thinking

2016 CEPH MPH FOUNDATIONAL COMPETENCY CATEGORIES	COMPETENCY	APPLICATION/INTERPRETATION
Communication	Describe the importance of cultural competence in communicating public health content)	Cultural competence is required for the success of the Suicide Prevention Program among the population of incarcerated, carceral citizens, and their families.

Interprofessional Practice	Perform effectively on interprofessional teams	The current team consist of the Associate Director, Policy Team Member, a formerly incarcerated stakeholder, and the Student Intern. Using our different areas of expertise, we can form an effective program that will greatly benefit the population.
Systems Thinking	Apply systems thinking tools to a public health issue	Learn how incarceration mentally effects all stakeholders, Discover programs/strategies/tools to prevent self-harm among this population, Discuss how this prevention effects the individual, family, and community

- **Cross-Cutting MPH Competency:** Identify One (1) Cross-Cutting MPH Competency.

CROSS-CUTTING COMPETENCY	APPLICATION/INTERPRETATION
Identify valid sources of public health information including peer-reviewed literature, government records, and publicly available datasets	Collect and analyze data via HHS Public Access, PrisonPolicy.org, and other peer-reviewed papers and studies

- **MPH Concentration Competencies:** Select Three (3) Competencies from your Concentration (Community Action for Health, Global Health, Health Equity and Criminal Justice).

MPH CONCENTRATION COMPETENCY	APPLICATION/INTERPRETATION
Investigate how systemic oppression, racism, and discrimination fuels justice-involvement and its impacts on public health.	Systemic oppression, racism, and discrimination has led to mental health inequities within underserved communities for decades, but this field study will focus on how these issues effect the incarcerated, carceral citizens, and their families at a substantially higher percentage and which resources are needed to help alleviate this crisis in the Berkeley area.
Evaluate the collateral consequences of criminal justice policy at local, state, and federal levels and their impact on community health and well-being.	Constant policing, violence, and allostatic load burdens people who live in lower SES communities and this causes mental anxiety and physical stress. Policies that criminalize people in this economic category leads to increased incarceration, depression, and other chronic mental health issues.
Examine historical origins of the criminal justice system and analyze the development of legal systems and the impacts of mass incarceration in the U.S.	The criminal justice system was created to maintain law and order among minorities and other disenfranchised populations. Police were created to oversee communities of color and ensure a constant flow of free workers for manual labor. Today, this practice continues and has become a billion-dollar business. However, the systemic effects it has had on disenfranchised communities

	includes the inability to build wealth, reduced access to educational opportunities, and the lack of resources to support their mental and physical wellbeing.
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PUBLIC HEALTH PROGRAM

1310 Club Drive • Vallejo • California • 94592 • 707-638-5838 (main ofc)

Public Health Field Study Contract

The purpose of this agreement is to structure the field experience through results-oriented objectives and a well-defined scope of work. This contract and related scope of work serves as the basis for the field study. Once the student and preceptor have signed the contract, any subsequent changes will require the approval of the preceptor and field study coordinator. The contract and scope of work must be submitted via Canvas one week after the start of the field study.

Student Name: _____

Student Phone Number: _____

Student Email address: _____

Preceptor Name/Title _____

Preceptor Credentials (MPH, PhD, MD) _____

Preceptor Prefix (Mr., Ms. (if not "Dr.")) _____

Supervisor Name: _____

Site Name: _____

Preceptor Phone Number: _____

Preceptor Email address: _____

Site Address, City, _____

Site State/Province, Postal Code/Zip _____

Site Country _____

Preceptor Fax Number: _____

Field Study Placement Start Date: _____

Placement Length: 10-12 Weeks _____
6 Weeks+ _____ 12-24 Weeks (Part-time) _____

I have read the scope of work attached to this document and by my signature approve the field study as outlined.

Student

Date

Preceptor

Date

Nemesia Kelly, MPH
Assistant Professor & Field Study Coordinator/Chair, Health Equity and Criminal Justice Concentration
Touro University California Public Health Program
nemesia.kelly@tu.edu • 707.638.5827 (Office) • 707.731.7436 (Cell)



PUBLIC HEALTH PROGRAM

Selected Dates for the Field Study Site Visit

The Field Study Site Visit is an assessment that **occurs midway through the field study** placement. Community Health Field Study site visits are conducted by either the Field Study Coordinator or designated Public Health Program faculty/staff. Global Health Field Study Coordinators/Site Country Coordinators conduct all Global Health Field Study site visits. **During the first week of the field study placement and after the preceptor has signed the Field Study Contract, the student is responsible for working with their preceptor to select 3-4 possible dates/times on dates that occur midway through their field study placement on which to schedule the site visit.** At least 30 minutes should be allocated for each site visit (15-minute separate meetings are required with the student and the preceptor). **Students are required to submit this form via Canvas indicating selected dates/times for potential site visits.** The site visitor will contact the student and preceptor to schedule a site visit based on those selected dates/times. Depending on the site location and availability of the site visitor, site visits may be held in person, by phone, or video conference. This form requires signatures of both the student and preceptor.

Student Name:

Name of Field Study Site:

Name of Preceptor:

Proposed Dates:

Preceptor Signature

Date

Student Signature

Date



TOURO UNIVERSITY
CALIFORNIA

TOURO COLLEGE

GENERAL RELEASE FORM (INDIVIDUAL)

I hereby grant the right and permission, without reservation, to Touro College, and those authorized by Touro College, to photograph and/or videotape me and further to display, use and/or otherwise utilize, in original or modified form, my face, likeness, name, information, voice, and appearance forever and throughout the world, in all media, whether now known or hereafter devised, throughout the universe in perpetuity (including, without limitation, in online webcasts, television, motion pictures, films, newspapers, publications or use by third parties) and in all forms including, without limitation, digitized images, whether for advertising, publicity, or promotional purposes, including, without limitation, for the promotion, public education, and/or fundraising activities of Touro College, without compensation, reservation or limitation. Touro College is, however, under no obligation to exercise any rights granted herein.

I release Touro College, its officers, directors, agents, employees, independent contractors, licensees and assignees from all claims that I now have or in the future may have, relating to the above.

I agree that Touro College, or its grantees or assignees, will be the sole owner of all tangible and intangible rights in the abovementioned photographs and recordings, with full power of disposition.

Any controversy or claim arising out of or relating to this release or the breach, termination, or validity (including enforceability and scope of this arbitration clause) thereof, shall be exclusively settled by expedited binding arbitration in Touro College's offices administered by the American Arbitration Association ("AAA") and conducted by a sole arbitrator (who shall be an attorney) in accordance with the AAA's Rules ("Rules"). The costs of such arbitration shall be borne equally by the parties, with each party also bearing its own attorneys' fees and any costs associated with presenting its proof. Judgment upon the award rendered may be entered in any Court of competent jurisdiction. The undersigned hereby waives trial by jury which waiver is independent of the agreement to arbitrate disputes.

I am over 18 years of age*

Date _____ Name (print) _____

Date of Shoot/Session _____ Signature _____

Location _____ Address _____

Phone _____ Program _____

*(If a minor, the following should also be signed by the parent or guardian)

I am the parent or guardian of the minor named above, and I have consent to the foregoing on behalf of the minor and myself.

Date _____ Address _____

Name (print) _____ Relationship _____



TOURO UNIVERSITY
C A L I F O R N I A

GENERAL PHOTO RELEASE

I hereby grant the right and permission, without reservation, to Touro College, and those authorized by Touro College, to photograph and/or videotape me and further to display, use and/or otherwise utilize, in original or modified form, my face, likeness, name, information, voice, and appearance forever and throughout the world, in all media, whether now known or hereafter devised, throughout the universe in perpetuity (including, without limitation, in online webcasts, television, motion pictures, films, newspapers, publications or use by third parties) and in all forms including, without limitation, digitized images, whether for advertising, publicity, or promotional purposes, including, without limitation, for the promotion, public education, and/or fundraising activities of Touro College, without compensation, reservation or limitation. Touro College is, however, under no obligation to exercise any rights granted herein.

I release Touro College, its officers, directors, agents, employees, independent contractors, licensees and assignees from all claims that I now have or in the future may have, relating to the above.

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NAME (PRINT)	SIGNATURE	PROGRAM	NOTES (if not a TU Student/Employee include Phone)

Signature _____ Phone _____

Exhibit B

Self-Dealing Transaction Disclosure Form

In order to conduct business with the County of Fresno ("County"), members of a contractor's board of directors ("County Contractor"), must disclose any self-dealing transactions that they are a party to while providing goods, performing services, or both for the County. A self-dealing transaction is defined below:

"A self-dealing transaction means a transaction to which the corporation is a party and in which one or more of its directors has a material financial interest."

The definition above will be used for purposes of completing this disclosure form.

Instructions

- (1) Enter board member's name, job title (if applicable), and date this disclosure is being made.
- (2) Enter the board member's company/agency name and address.
- (3) Describe in detail the nature of the self-dealing transaction that is being disclosed to the County. At a minimum, include a description of the following:
 - a. The name of the agency/company with which the corporation has the transaction; and
 - b. The nature of the material financial interest in the Corporation's transaction that the board member has.
- (4) Describe in detail why the self-dealing transaction is appropriate based on applicable provisions of the Corporations Code.

The form must be signed by the board member that is involved in the self-dealing transaction described in Sections (3) and (4).

Exhibit B

(1) Company Board Member Information:			
Name:		Date:	
Job Title:			
(2) Company/Agency Name and Address:			
(3) Disclosure (Please describe the nature of the self-dealing transaction you are a party to)			
(4) Explain why this self-dealing transaction is consistent with the requirements of Corporations Code § 5233 (a)			
(5) Authorized Signature			
Signature:		Date:	

Exhibit C

Insurance Requirements

1. Required Policies

TUC shall procure and maintain in force during the term of this agreement, at its sole cost and expense, insurance in amounts that are reasonably necessary to protect TUC and County from and against liability arising from or incident to the use of the Facilities by TUC students participating in the Program. TUC, at its sole expense, shall maintain in full force and effect, the following insurance policies or a program of self-insurance, including but not limited to, an insurance pooling arrangement or Joint Powers Agreement (JPA) though the term of the Agreement.

Without limiting the County's right to obtain indemnification from the Contractor or any third parties, Contractor, at its sole expense, shall maintain in full force and effect the following insurance policies throughout the term of this Agreement.

- (A) **Commercial General Liability.** Commercial general liability insurance with limits of not less than Two Million Dollars (\$2,000,000) per occurrence and an annual aggregate of Four Million Dollars (\$4,000,000). This policy must be issued on a per occurrence basis. Coverage must include products, completed operations, property damage, bodily injury, personal injury, and advertising injury. The Contractor shall obtain an endorsement to this policy naming the County of Fresno, its officers, agents, employees, and volunteers, individually and collectively, as additional insureds, but only insofar as the operations under this Agreement are concerned. Such coverage for additional insureds will apply as primary insurance and any other insurance, or self-insurance, maintained by the County is excess only and not contributing with insurance provided under the Contractor's policy.
- (B) **Automobile Liability.** Automobile liability insurance with limits of not less than One Million Dollars (\$1,000,000) per occurrence for bodily injury and for property damages. Coverage must include any auto used in connection with this Agreement.
- (C) **Workers Compensation.** Workers compensation insurance as required by the laws of the State of California with statutory limits.
- (D) **Employer's Liability.** Employer's liability insurance with limits of not less than One Million Dollars (\$1,000,000) per occurrence for bodily injury and for disease.
- (E) **Professional Liability.** Professional liability insurance with limits of not less than One Million Dollars (\$1,000,000) per occurrence and an annual aggregate of Three Million Dollars (\$3,000,000). If this is a claims-made policy, then (1) the retroactive date must be prior to the date on which services began under this Agreement; (2) the Contractor shall maintain the policy and provide to the County annual evidence of insurance for not less than five years after completion of services under this Agreement; and (3) if the policy is canceled or not renewed, and not replaced with another claims-made policy with a retroactive date prior to the date on which services begin under this Agreement, then the Contractor shall purchase extended reporting coverage on its claims-made policy for a minimum of five years after completion of services under this Agreement.

Exhibit C

- (F) **Molestation Liability.** Sexual abuse / molestation liability insurance with limits of not less than Two Million Dollars (\$2,000,000) per occurrence, with an annual aggregate of Four Million Dollars (\$4,000,000). This policy must be issued on a per occurrence basis.
- (G) **Technology Professional Liability (Errors and Omissions).** Technology professional liability (errors and omissions) insurance with limits of not less than Two Million Dollars (\$2,000,000) per occurrence and in the aggregate. Coverage must encompass all of the Contractor's obligations under this Agreement, including but not limited to claims involving Cyber Risks.
- (H) **Cyber Liability.** Cyber liability insurance with limits of not less than Two Million Dollars (\$2,000,000) per occurrence. Coverage must include claims involving Cyber Risks. The cyber liability policy must be endorsed to cover the full replacement value of damage to, alteration of, loss of, or destruction of intangible property (including but not limited to information or data) that is in the care, custody, or control of the Contractor.

Definition of Cyber Risks. "Cyber Risks" include but are not limited to (i) Security Breach, which may include Disclosure of Personal Information to an Unauthorized Third Party; (ii) data breach; (iii) breach of any of the Contractor's obligations under [identify the Article, section, or exhibit containing data security obligations] of this Agreement; (iv) system failure; (v) data recovery; (vi) failure to timely disclose data breach or Security Breach; (vii) failure to comply with privacy policy; (viii) payment card liabilities and costs; (ix) infringement of intellectual property, including but not limited to infringement of copyright, trademark, and trade dress; (x) invasion of privacy, including release of private information; (xi) information theft; (xii) damage to or destruction or alteration of electronic information; (xiii) cyber extortion; (xiv) extortion related to the Contractor's obligations under this Agreement regarding electronic information, including Personal Information; (xv) fraudulent instruction; (xvi) funds transfer fraud; (xvii) telephone fraud; (xviii) network security; (xix) data breach response costs, including Security Breach response costs; (xx) regulatory fines and penalties related to the Contractor's obligations under this Agreement regarding electronic information, including Personal Information; and (xxi) credit monitoring expenses.

2. Additional Requirements

- (A) **Verification of Coverage.** Within 30 days after the Contractor signs this Agreement, and at any time during the term of this Agreement as requested by the County's Risk Manager or the County Administrative Office, the Contractor shall deliver, or cause its broker or producer to deliver, to the County of Fresno, Department of Public Health, P.O. Box 11867, Fresno, CA 93775, Attention: Contracts Section – 6th Floor, or email, DPHContracts@fresnocountyca.gov, certificates of insurance and endorsements for all of the coverages required under this Agreement.
- (i) Each insurance certificate must state that: (1) the insurance coverage has been obtained and is in full force; (2) the County, its officers, agents, employees, and volunteers are not responsible for any premiums on the policy; and (3) the Contractor has waived its right to recover from the County, its officers, agents, employees, and volunteers any amounts paid under any insurance policy

Exhibit C

required by this Agreement and that waiver does not invalidate the insurance policy.

- (ii) The commercial general liability insurance certificate must also state, and include an endorsement, that the County of Fresno, its officers, agents, employees, and volunteers, individually and collectively, are additional insureds insofar as the operations under this Agreement are concerned. The commercial general liability insurance certificate must also state that the coverage shall apply as primary insurance and any other insurance, or self-insurance, maintained by the County shall be excess only and not contributing with insurance provided under the Contractor's policy.
 - (iii) The automobile liability insurance certificate must state that the policy covers any auto used in connection with this Agreement.
 - (iv) The professional liability insurance certificate, if it is a claims-made policy, must also state the retroactive date of the policy, which must be prior to the date on which services began under this Agreement.
 - (v) The technology professional liability insurance certificate must also state that coverage encompasses all of the Contractor's obligations under this Agreement, including but not limited to claims involving Cyber Risks, as that term is defined in this Agreement.
 - (vi) The cyber liability insurance certificate must also state that it is endorsed, and include an endorsement, to cover the full replacement value of damage to, alteration of, loss of, or destruction of intangible property (including but not limited to information or data) that is in the care, custody, or control of the Contractor.
- (B) **Acceptability of Insurers.** All insurance policies required under this Agreement must be issued by admitted insurers licensed to do business in the State of California and possessing at all times during the term of this Agreement an A.M. Best, Inc. rating of no less than A: VII.
- (C) **Notice of Cancellation or Change.** For each insurance policy required under this Agreement, the Contractor shall provide to the County, or ensure that the policy requires the insurer to provide to the County, written notice of any cancellation or change in the policy as required in this paragraph. For cancellation of the policy for nonpayment of premium, the Contractor shall, or shall cause the insurer to, provide written notice to the County not less than 10 days in advance of cancellation. For cancellation of the policy for any other reason, and for any other change to the policy, the Contractor shall, or shall cause the insurer to, provide written notice to the County not less than 30 days in advance of cancellation or change. The County in its sole discretion may determine that the failure of the Contractor or its insurer to timely provide a written notice required by this paragraph is a breach of this Agreement.
- (D) **County's Entitlement to Greater Coverage.** If the Contractor has or obtains insurance with broader coverage, higher limits, or both, than what is required under this Agreement, then the County requires and is entitled to the broader coverage, higher limits, or both. To that end, the Contractor shall deliver, or cause its broker or producer

Exhibit C

to deliver, to the County's Risk Manager certificates of insurance and endorsements for all of the coverages that have such broader coverage, higher limits, or both, as required under this Agreement.

- (E) **Waiver of Subrogation.** The Contractor waives any right to recover from the County, its officers, agents, employees, and volunteers any amounts paid under the policy of worker's compensation insurance required by this Agreement. The Contractor is solely responsible to obtain any policy endorsement that may be necessary to accomplish that waiver, but the Contractor's waiver of subrogation under this paragraph is effective whether or not the Contractor obtains such an endorsement.
- (F) **County's Remedy for Contractor's Failure to Maintain.** If the Contractor fails to keep in effect at all times any insurance coverage required under this Agreement, the County may, in addition to any other remedies it may have, suspend or terminate this Agreement upon the occurrence of that failure, or purchase such insurance coverage, and charge the cost of that coverage to the Contractor. The County may offset such charges against any amounts owed by the County to the Contractor under this Agreement.
- (G) **Subcontractors.** The Contractor shall require and verify that all subcontractors used by the Contractor to provide services under this Agreement maintain insurance meeting all insurance requirements provided in this Agreement. This paragraph does not authorize the Contractor to provide services under this Agreement using subcontractors.