

THE METROPOLITAN GOVERNMENT OF NASHVILLE AND DAVIDSON COUNTY  
SIGNATURE PAGE

RECOMMENDED AND APPROVED BY:



\_\_\_\_\_  
William Swann, Chief Director

3/7/2022

\_\_\_\_\_  
Date

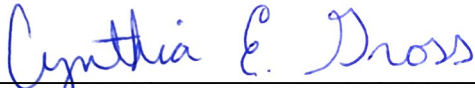
APPROVED AS TO AVAILABILITY OF FUNDS:



\_\_\_\_\_  
Kelly Flannery  
Director of Finance

\_\_\_\_\_  
Date

APPROVED AS TO FORM AND LEGALITY:



\_\_\_\_\_  
Assistant Metropolitan Attorney

March 8, 2022

\_\_\_\_\_  
Date

APPROVED AS TO INSURANCE  
REQUIREMENTS:



\_\_\_\_\_  
Director of Insurance  
Metropolitan Government

March 8, 2022

\_\_\_\_\_  
Date

FILED IN THE OFFICE OF THE  
METROPOLITAN CLERK:

\_\_\_\_\_  
Metropolitan Clerk

\_\_\_\_\_  
Date



## TCAT Clinical Affiliation Standard Template Contract Routing Confirmation Review and Approval

**TENNESSEE BOARD OF REGENTS**      **OBF-PURCH-TCAT-CLINICALAFF STANDARD-Revision: 6/15/2018**

Date Logged	01/11/2022
TBR Contract Number	110164

Rush?    yes <input checked="" type="checkbox"/> no <input type="checkbox"/>	If yes:
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Institution	TCAT Murfreesboro
Contractor	Nashville Fire Department, EMS.
Purpose	Establish clinical agreement for new EMS program

The signatures below indicate the attached contract has been reviewed and is recommended for approval

<b>STEP 1: INSTITUTION APPROVALS</b>	
Originator	DocuSigned by: <i>Michael Cole</i> 2022-01-11   9:58 AM CST
President Approval	DocuSigned by: <i>Carol G. Puryear</i> 2022-01-11   3:30 PM PST
<b>STEP 2: TBR APPROVAL</b>	
Contracts and Reporting	DocuSigned by: <i>Marta Veronica Ferreira</i> 2022-01-12   10:41 PM CST
<b>STEP 3: THE AGREEMENT WILL BE FORWARDED TO APPROPRIATE VICE CHANCELLOR FOR REVIEW AND APPROVAL.</b>	

Comments:

Robert McAlister, Deputy Director Nashville Fire Department, EMS. robert.mcalister@nashville.gov

CLINICAL AFFILIATION AGREEMENT BETWEEN TENNESSEE COLLEGE OF APPLIED TECHNOLOGY AND NASHVILLE FIRE DEPARTMENT, EMS.

This Agreement is made this 10th day of January 2022, by and between Tennessee College of Applied Technology Murfreesboro, hereinafter referred to as "Institution" and NASHVILLE FIRE DEPARTMENT, EMS, hereinafter referred to as "Affiliate".

Whereas, it is to the mutual benefit of the parties to provide clinical experience for students enrolled in certain programs of the Institution, the parties have agreed to the terms and provisions set forth below:

I. Purpose - the purpose of this Agreement shall be to provide clinical experience to students enrolled in the Emergency Medical Technician program of the Institution.

A. Consideration for this Agreement shall consist of the mutual promises contained herein, the parties agreeing that monetary compensation shall neither be expected nor received by either party.

B. The clinical experience shall be provided at the Affiliate's Facility located at 63 Hermitage Ave. Nashville, TN 37210, hereinafter referred to as "Facility".

C. The specific experience to be provided students is described as follows:

Provide clinical/practicum experiences for students enrolled in the Emergency Medical Technician program.

II. Terms and Conditions - pursuant to the above-stated purpose, the parties agree as follows:

A. Term - the term of this Agreement shall be (from one to five years) commencing May 1, 2022 and ending April 30, 2023.

Either party may terminate this Agreement upon giving 30 days written notice to the other party. Such termination shall have no effect on students receiving clinical experience during the current academic term.

This Agreement may be renewed with written approval of all parties for a total term of up to five years.

B. Placement of Students – As mutually agreed between the parties, the Institution will place an appropriate number of students at the Facility each academic term.

C. Discipline - While enrolled in clinical experience at the Facility, students (and faculty, if applicable), will be subject to applicable policies of the Institution and the Affiliate.

Students shall be dismissed from participation in the Institution's program only after the appropriate disciplinary or academic policies and procedures of the Institution have been followed. Notwithstanding the foregoing and pursuant to its policies, Affiliate retains the right to safeguard the health, safety, and welfare of its patients and the orderly operation of the Facility and in such capacity shall have the right to exclude or remove a student from the Facility at any time based on a student's failure to comply with reasonable policies of the Facility, including, without limitation, those related to vaccination and disease testing.

D. Specific Responsibilities - The following duties shall be the specific responsibility of the designated party (Institution and/or Affiliate/Facility):

1. Institution shall be responsible for the selection of students to be placed at the Facility.
2. Facility shall provide orientation to the Facility for students beginning clinical experience.
3. Institution shall be responsible for scheduling training activities for students.
4. The Institution shall be responsible for supervising students at all times while present at the Facility for clinical experience.
5. Institution shall evaluate the performance of individual students as appropriate.
6. The Affiliate shall retain complete responsibility for patient care providing adequate supervision of students (and faculty, if applicable) at all times.
7. The Affiliate shall maintain a sufficient level of staff employees to carry out regular duties. Students will not be expected nor allowed to perform services in lieu of staff employees.
8. The Affiliate shall provide emergency medical treatment to students (and faculty, if applicable) if needed for illness or injuries suffered during clinical experience. Such treatment shall be at the expense of the individual treated.
9. The Affiliate shall maintain all applicable accreditation requirements and certify such compliance to the Institution or other entity as requested by the Institution. The Affiliate shall also permit authorities responsible for accreditation of the Institution's curriculum to inspect the Affiliate's clinical facilities and services as necessary.
10. The Institution shall provide health records of students (and faculty, if applicable) upon request by the Affiliate. In order to maintain a healthy and safe environment, Affiliate retains the right to require students and faculty participating at its Facility to have, or to obtain, any immunizations or testing reasonably required by Affiliate.
11. The Institution shall establish a procedure for notifying the Affiliate if a student (or faculty, if applicable) is/are unable for any reason to report for clinical training.
12. The Affiliate requires written evidence of professional liability insurance coverage from individual students and faculty and staff (if applicable) participating in the experience. The minimum amount of coverage per individual shall be \$1,000,000 per incident or occurrence. The coverage shall extend through the term of the student and faculty or staff's (if applicable) participation.
13. The State of Tennessee is self-insured and does not carry or maintain commercial general liability insurance or medical, professional or hospital liability insurance. Any and all claims against the State of Tennessee, including the Institution or its employees, shall be heard and determined by the Tennessee Claims Commission in the manner prescribed by law. Damages recoverable against the Institution shall be expressly limited to claims paid by the Claims Commission pursuant to T.C.A. § 9-8-301 et seq.

E. Mutual responsibilities - the parties shall cooperate to fulfill the following mutual responsibilities:

1. Each party shall comply with all federal, state and municipal laws, advice, rules and regulations which are applicable to the performance of this Agreement, which shall include but not be limited to:

To the extent required by federal law, the Health Insurance Portability and Accountability Act of 1996, as codified at 42 U.S.C. Section 1320d ("HIPAA") and any current and future regulations promulgated thereunder, including without limitation, the federal privacy regulations, the federal security standards, and the federal standards for electronic transactions, all collectively referred to herein as

“HIPAA Requirements.” The parties agree not to use or further disclose any Protected Health Information or Individually Identifiable Health Information, other than as permitted by HIPAA Requirements and the terms of this Agreement. Each party will make its internal practices, books, and records relating to the use and disclosure of Protected Health Information available to the Secretary of Health and Human Services to the extent required for determining compliance with the Federal Privacy Regulations.

Titles VI and VII of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, and Section 504 of the Rehabilitation Act of 1973, Executive Order 11246, the Americans with Disabilities Act of 1990 and the related regulations to each. Each party assures that it will not discriminate against any individual including, but not limited to, employees or applicants for employment and/or students because of race, religion, creed, color, sex, age, disability, veteran status or national origin.

The Family Educational Rights and Privacy Act (FERPA). The Affiliate shall protect the confidentiality of the student’s records and shall not release any information without written consent from the student unless required to do so by law.

2. Background Checks: If criminal background checks of students are required by the Affiliate, the Institution shall notify students of this requirement prior to enrollment in the program or as soon as the requirement is known. Students will be informed by the Institution that the check must be completed within the 90day period immediately prior to the student’s initial clinical placement. It shall be the student’s responsibility to make timely arrangements for the background check and to pay all costs associated with such checks.

If criminal background checks are required for Institutional faculty or staff, it shall be the Institution’s responsibility to arrange for the background check, to pay all costs associated with such checks and to provide the results to the Affiliate.

It shall be the responsibility of Affiliate to set the eligibility standards for participation and to evaluate the results of the background checks. If Affiliate determines that a student or faculty/staff member shall not participate at its facility, Affiliate shall so notify that individual and the Institution. Institution shall take steps to ensure that this individual does not participate in the clinical program at the Affiliate.

If an Institutional faculty/staff member is also an employee of Affiliate or is an employee at another hospital, health care facility or health care organization, Affiliate will allow the faculty/staff member to provide on-site supervision and instruction for its clinical program without the necessity of undergoing an additional background check.

Recognizing that students enrolled in the Emergency Medical Technician program at Institution will potentially participate in multiple clinical placements at multiple facilities, Affiliate agrees to accept the results of the background check done prior to the student’s initial clinical placement if the student maintains continuous enrollment in the Institution’s health care program and if the results of the background check are archived by the background check agency.

Institution shall inform students or faculty/staff members excluded from clinical placement on the basis of a criminal background check of any review or appeal process available pursuant to the Fair Credit Reporting Act or any other law or policy, if any.

3. Students shall be treated as trainees who have no expectation of receiving compensation or future employment from the Affiliate or the Institution.

- 4. Any courtesy appointments to faculty or staff by either the Institution or the Affiliate shall be without entitlement of the individual to compensation or benefits from the appointing party.
- 5. The confidentiality of patient records and student records shall be maintained at all times in accordance with applicable law.

F. Miscellaneous Terms - The following terms shall apply in the interpretation and performance of this Agreement:

- 1. Neither party shall be responsible for personal injury or property damage or loss except that resulting from its own negligence or the negligence of its employees or others for whom the party is legally responsible.
- 2. The delay or failure of performance by either party shall not constitute default under the terms of this Agreement, nor shall it give rise to any claims against either party for damages. The sole remedy for breach of this Agreement shall be immediate termination.
- 3. This Agreement shall in no way be interpreted as creating an agency or employment relationship between the parties.

In witness whereof, the parties, through their authorized representatives, have affixed their signatures below.

TENNESSEE COLLEGE OF APPLIED TECHNOLOGY MURFREESBORO

NASHVILLE FIRE DEPARTMENT, EMS.

BY DocuSigned by:  
Carol Puryear  
A0A564853D8147F...

BY DocuSigned by:  
Robert McAllister  
71B4E32AC9B249A...

TITLE Carol Puryear, President

TITLE Robert McAllister, Deputy Director

DATE 2022-02-24 | 8:01 AM PST

DATE 2022-02-24 | 6:36 AM CST

Approved by TBR: (If required; contracts which materially differ from this form require approval of the Chancellor.)

Chancellor DocuSigned by:  
Flora W. Tydings  
DA09BC19C440408... <sup>DS</sup> DLG

Flora W. Tydings

Date 2022-02-25 | 8:53 AM CST

**TBR CONTRACT SUMMARY SHEET****Institution Contact Data**

Name: Shelly DeBerry	Email: shelly.deberry@tcatmurfreesboro.edu	Phone No. 615-898-8010 ext. 126
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**Vendor Contact Data**

Vendor Address: 63 Hermitage Ave. Nashville, TN 37210	Contact Name: Robert McAlister
Contact Phone: 615-862-5359	Contact Email: robert.mcalister@nashville.gov
Vendor/Parent Company outside USA? yes or x no	If yes, list country:

**Purpose of Contract:**

Establish clinical agreement for new EMS program

**Contract Type:** Clinical Affiliation**Contract Format (Check all that apply)**

<input checked="" type="checkbox"/> TBR Standard Format	<input type="checkbox"/> Vendor Generated Contract reviewed by TBR Contracts
<input type="checkbox"/> Drafted by TBR/Not Standard Format	<input type="checkbox"/> Renewal or Modification of Existing Agreement

**Contract Term**

Start Date: 05/01/2022	End Date: 04/30/2023	Total Number of Renewals (if a renewal or change to an existing contract, please indicate renewals remaining): 0
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**Contract Financial Information**

Type: <input type="checkbox"/> Revenue <input type="checkbox"/> Expenditure <input checked="" type="checkbox"/> No Cost	Payment Frequency: Not Applicable
Amount per Year: 0	Amount w/all renewals: 0
Funding Source: Not Applicable	If not solely funded by Institution or Department, provide detail: No funding is required.
If State funds, list FOAP to be charged (i.e. 110001-200230-74490-470): 11001 200054 61200 210	

**Other Pertinent Information**

Lease: <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	Non-debarment Verification ( <a href="http://www.sam.gov">www.sam.gov</a> ): <input checked="" type="checkbox"/> Yes <input type="checkbox"/> no
Grant: <input type="checkbox"/> yes <input type="checkbox"/> no	Non-debarment Verification Date: 01/11/2022
Procurement Method: Not Applicable	Available for System- Wide Use: Not Applicable If Other, list eligible entities: 01/11/2022
Ethnicity: Government	

**Contract Monitoring**

Contract requires monitoring? x yes or no	If yes, designated contract monitor (individual responsible for ensuring receipt of goods/services and liaison with the vendor): Shelly DeBerry
If yes, monitoring frequency: annually	Monitor's email address: shelly.deberry@tcatmurfreesboro.edu



Search

All Words ▼ e.g. 1606N020Q02



Search Results

Saved Searches

Actions

Select Domain  
All Domains +

Filter By -

### Keyword Search

For more information on how to use our keyword search, visit our [help guide](#)

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All Words i

Exact Phrase i

e.g. 1606N020Q02

"Nashville Fire Department, EMS" x



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