

Academic Health Department Learning Community Profile Multiple Organizational Affiliations

The <u>Academic Health Department (AHD) Learning Community</u> serves as a venue for shared exploration of the <u>AHD concept</u> and collaborative learning around the AHD model. Creation of a Learning Community profile will allow you to introduce yourself to other Learning Community members and to share your AHD-related experiences. An example of a profile can be viewed <u>here</u>.

This form was developed for public health professionals who are affiliated with both an academic health professions institution* and a public health practice organization. If you are affiliated with a single academic or practice organization or are not affiliated with such an organization, please use the Single/No Organizational Affiliation form.

Your answers to the following questions will form the basis for your profile. Please <u>save</u> your answers and <u>email</u> the completed form to Kathleen Amos at kamos@phf.org.

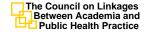
Personal Information

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1. Nam profile)	ne and Affiliations (please provide this information as you would like it to appear in your
	Name:
	Academic Degree(s)/Professional Certification(s):
	Academic Organization:
	Academic Title(s):
	Practice Organization:
	Practice Title(s):
2. Prim	nary Contact Information: Street Address: City: State: Zip:
	Phone:
	Email:

Please attach a photograph of yourself if you would like one to be included in your profile.

^{*} Academic health professions institutions are those housing schools or programs in public health, medicine, nursing, dentistry, environmental health, health education, or any of a variety of other health fields.



Institutional Experience

3. Hov	viarge is the public health practice organization in which you work?
	1-25 people
	25-99 people
	100-499 people
	500-999 people
	1,000-9,999 people
	10,000 or more people
	Unsure

4. What type of geographic area is served by the public health practice organization in which you work (please select all that apply)?

Urban

Rural

Suburban

Frontier

We are interested in learning more about relationships between academic institutions and practice organizations.

5. Does your academic health professions institution* or public health practice organization have relationships, either with each other or with other academic health professions institutions* or public health practice organizations, characterized by (please select all that apply):

Formal written partnership agreements

Shared personnel

Shared resources

Compensation for services provided

Collaborative public health education/training

Joint research projects

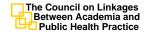
Shared provision of public health services

None of the above

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Other relationships (please specify):

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6. If you indicated in question 5 that your academic or practice organizations have such relationships, what are the main purposes of these relationships (please select all that apply)?		
Public health education/training		
Public health research		
Public health service provision		
Does not apply		
Other (please specify):		
7. Do your academic or practice organizations participate in any academic health department (AHD) partnerships?		
Yes		
No		
Have in the past, but not currently		
Unsure		
8. If you answered YES to question 7, please list the names of the organizations involved and the years the partnership(s) were formed.		
9. Is your academic organization currently working to form an AHD partnership? Yes		
No		
Unsure		
10. Is your practice organization currently working to form an AHD partnership?		
Yes		
No		
Unsure		
11. Have either of your organizations produced written materials (e.g., partnership agreements, memoranda of understanding, reports) or other resources that may help others develop, sustain, or expand AHDs that you are willing and able to share with the Learning Community?		
Yes (please attach these materials)		
No		
Unsure		

12. Is there anything else you would like to share with the Learning Community about your organizations' AHD-related activities?
Personal Experience
13. How many years have you worked in the public health field?
14. What is your current work setting (please select all that apply)? Academic institution Governmental public health Community/migrant health center Healthcare services Hospital Nonprofit organization Private industry Other (please specify):
15. Are you or have you been involved in building relationships between academic health professions institutions* and public health practice organizations? Yes No Unsure
16. Are you or have you been involved in the development of an AHD? Yes No Unsure

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17. Please tell the Learning Community a little bit about yourself and your interest in AHDs. This might include relevant previous professional positions and organizations, professional association involvement, education/training, specialty areas, research interests, job responsibilities, or other pertinent experiences.
18. Is there anything else you would like to share with the Learning Community about your experience with or interest in AHDs?
19. Is there anything else you would like to share with us about your interest in the Learning Community?
Closing
20. Are you willing to have this profile information made publicly available through the Council on Linkages Between Academia and Public Health Practice website?
Yes
No
Please <u>save</u> this profile form and <u>email</u> it along with any additional materials, such as photographs, documents (e.g., partnership agreements, memoranda of understanding,

reports), or other AHD-related resources, to Kathleen Amos at kamos@phf.org.

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