



Resource Guide 3: Memorandum of Agreement (MOA)

I. INTRODUCTION

The Center for Health Promotion at the University XYZ and the ABC Health Center have developed this Memorandum of Agreement for both organizations to guide the collaborative work on the Community Wellness Project. University XYZ and the ABC Health Center have identified an opportunity to enhance their respective roles and effectiveness through collaboration that brings together the unique strengths of each organization.

Provide an introduction to the partnership, each of the agencies and how the partnership fits into each of the parties' missions.

Background of the Center for Health Promotion

In 1995, the University XYZ established The Center for Health Promotion (the Center) to address pressing health concerns through collaborating with community-based organizations to conduct research, provide training and translate research findings into practice. The Center seeks to reduce health disparities through an emphasis on community-based participatory research. The mission of The Center is to enhance community capacity to prevent disease as well as to conduct, evaluate and disseminate innovative community-based approaches to health promotion.

Background of the ABC Health Center

The ABC Health Center (ABC) is a Title V not-for-profit, multi-service community health center established in 1970 to serve the healthcare needs of American Indians and Alaska Natives (AI/AN) living in the greater County region of State. The mission of the ABC is to assist American Indians and Alaska Natives in achieving the highest possible physical, mental, emotional, social and spiritual well-being through the provision of culturally appropriate services and to advocate for the needs of all Indigenous people.

2. PURPOSE

The purpose of the MOA between the Center and the ABC is to create guidelines for collaboration between each agency as we partner together on the Community Wellness Project.

This section provides the reasoning for the partnership and can include a description of the problem or situation the partnership will address.

Cardiovascular disease (CVD) is currently the leading cause of death for urban AI/ANs. While the age-adjusted death rates related to diseases of the heart have declined by more than 50% between 1950 and 1996 in the general population, the rate of CVD has continued to rise among AI/ANs. The incidence of coronary heart disease is twice as high among AI/ANs than the U.S. general population. The disproportionately high prevalence of the multiple CVD risk factors, such as smoking, overweight/obesity, physical inactivity, diabetes, hypertension and hypercholesterolemia in the AI/AN population may explain what places this population at such high risk for CVD.

The purpose of this collaboration is to develop, pilot and evaluate a culturally tailored heart health curriculum for urban AI/ANs. This will increase the capacity of the ABC to address the health needs of their patient population and ultimately improve the health status of AI/ANs in the County region.

The goals of the partnership are outlined below:

Goal 1: In year one of the partnership we will collaborate on the adaptation of a heart health curriculum that will be based on clinical guidelines and best-practices, theories of behavior changes, and is also rooted in AI/AN cultural values and perceptions of health.

Goal 2: In year two of the partnership we will conduct pilot testing of the developed curriculum with at least 50 AI/ANs.

Goal 3: In year three of the partnership we will evaluate intervention outcomes and impacts and disseminate these findings to other communities that may benefit from them.

Goal 4: Improve the cardiovascular health of urban AI/ANs in County, State

3. GUIDING PRINCIPLES

Participation: Both agencies in the partnership agree to actively participate in and contribute to discussion, decision making and action associated with the Community Wellness Project.

Communication: All points of view and opinions will be heard and honored. It is each partner’s responsibility to step forward to share their voice as well as step back to create the space for others to do the same.

Conflict: Partners reflect diverse backgrounds, experiences, cultures and beliefs and will undoubtedly have differing opinions. Each partner will approach conflict with respect, keeping in mind our common goals and recognizing that conflict can be productive when focused on substantive or procedural issues.

Decision-making practices: A consensus process will be used to determine future decision making processes.

Publication, presentation and materials: All partners will have an equal and reasonable amount of time to review materials. Content and venues of all publications and presentations will be approved by consensus. If consensus can not be reached for materials that will be used in specific audiences, such as patient surveys or recruitment flyers, the organization who is closest to the population and is leveraging their resources and relationships to implement that material will have final decision making power.

4. ROLES AND RESPONSIBILITIES

The Center agrees to:

1. Assign and maintain a staff member with adequate time allocated to collaboration activities.
2. Coordinate and host monthly collaborator calls.
3. Provide adequate resources to support all project activities.
4. Provide technical assistance such as in the development of curriculum.

What do you want the partnership to accomplish? Writing explicit short, medium, and long-term goals will help drive the partnership forward as well as provide indicators that can later be used to evaluate the success of the partnership.

The goals should align with the Scope of Work in a contract and the activities of the partnership.

This section will outline the guiding principles for the partnership. These principles underlie the approach to the collaboration and inform processes of the partnership.

Detailing the values both agencies are committed to can also help you think through key considerations in the collaboration such as appointing primary contact persons for communication or logistics of meetings to ensure equitable participation.

Different types of decision-making processes may be needed to respond to the different types of options and issues that arise.

While consensus is ideal for garnering buy-in from key stakeholders, it can be time consuming and difficult and may not be necessary for less consequential choices.

Other methods of decision-making include majority votes or executive committees. Using a combination of decision-making strategies can be useful.

In any form of decision-making, it is important to keep the community, partnership, or progress towards the shared goal central.

5. Provide training, support and resources to ABC in the conduct of the curriculum.
6. Conduct analysis of evaluation data.

ABC agrees to:

1. Assign and maintain a staff member with adequate time allocated to collaboration activities.
2. Participate in project development, implementation, dissemination and regular project meetings.
3. Provide community expertise in the development of materials and activities such as recruitment flyers and survey methods.
4. Provide updates and feedback to the Center on activities and any adjustments needed to improve implementation.
5. Recruit participants for the pilot testing of the developed curriculum.
6. Manage and conduct curriculum activities, including collection of monitoring and evaluation data.

A separate data sharing agreement has been developed to outline the management, ownership and use of any data collected or used during this project.

Time frame/renewal and amendment process: This agreement is effective immediately upon signature and will continue for 3 years until month, day, year. The agreement can be extended upon mutual review and renewal. This agreement can be amended as mutually agreed upon by both parties or terminated by either party through written notice.

Signatures

The Center for Health Promotion

ABC Health Center

Name, Title

Name, Title

Date

Date

It is essential to specifically state what roles and resources each party will bring to the partnership. This is not only important for accountability but also provides clarification on responsibilities. When responsibilities or Scope of Work are clearly defined it is easier to verify budget requirements or feasibility of the project within resource restrictions.

Please see the UIHI data sharing template at <http://www.uihi.org/wp-content/uploads/2011/08/Data-Use-Agreement-Template.doc>.

Be specific about how long the partnership will last, what the process will be if changes need to be made or the partnership no longer is benefiting one of the agencies and they can no longer participate.

Make sure that the MOA is signed by a person authorized to enter into such agreements for the agency. For example, the Executive Director or President of the Board of Directors.

CONTACT US

We welcome your feedback, questions, thoughts and suggestions.

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