



MEMORANDUM  
OF  
UNDERSTANDING

among

The Department of Health and Children of Ireland, The  
Department of Health and Social Services for Northern Ireland,  
and The National Cancer Institute of the United  
States Department of Health and Human Services

The Department of Health and Children of Ireland, the Department of Health and Social Services for Northern Ireland, and the National Cancer Institute (NCI) of the United States Department of Health and Human Services (hereinafter referred to as the Participants):

- Recognising that cancer is a major public health/health care problem causing premature morbidity and mortality;
- Recognising the necessity to apply the most effective preventive and therapeutic strategies to the management of this disease;
- Further recognising that these strategies can be most effectively implemented on an international and collaborative basis;

have decided to establish a multilateral partnership to continue and intensify co-operation in relation to cancer, that will lead to improved scientific programs in their jurisdictions, including the areas of:

- |                          |   |
|--------------------------|---|
| • epidemiology           | • education and training                        |
| • prevention             | • information collection and dissemination; and |
| • surveillance           | • interactions aimed at                         |
| • early detection        | enhanced public health and                      |
| • treatment and research | patient care.                                   |
| • quality control        |   |

and hereby establish an Ireland-Northern Ireland-NCI Cancer Consortium.

## I. Scope of Understanding

The Participants intend to:

- Identify infrastructure improvements necessary for the island of Ireland to further cancer research and clinical cancer investigations;
- Formalize and facilitate interactions among the U.S., Irish, and Northern Ireland cancer research communities;
- Develop joint programmes that will enhance the environment for clinical cancer research with the anticipated outcome of improved patient care;
- Develop educational exchange programmes for cancer personnel.

## II. Programmes

A. Initial Programmes: While the scope of activities will evolve, several initial programme areas will be highlighted.

### 1. *The enhancement and co-ordination of tumour registries in Northern Ireland and in Ireland.*

A requirement for successful epidemiological and health services research in cancer is the presence of an active tumour registry that can monitor population trends in cancer incidence and mortality. The programmes will accelerate the advances made by the Northern Ireland and Irish tumour registries through the sharing of expertise and technology and will also expand efforts to co-ordinate data collection, analysis, and reporting between the two tumour registries.

2. *The enhancement of the informatics infrastructure to support co-ordinated clinical trials throughout the island of Ireland.*

For the informatics initiative, attention will be focused on two areas:

- (a) Telecommunications: The identification of the requirements necessary to establish capacity for advanced telecommunications to permit remote co-ordination of clinical trials, especially in the field of radiation oncology.
- (b) Clinical Trials Information System: Information technology is a fundamental requirement for the advanced management of clinical studies. It is proposed, therefore, to establish a unified informatics approach for cancer clinical trials. Cancer centres in Northern Ireland and Ireland will participate in the development of the Clinical Trials Information System (CTIS) ongoing at the NCI. When completed, the CTIS will provide the information framework for collaborative clinical investigations among the signatories.

3. *Development of education/training and scholar exchange programmes.*

Programmes will be established for joint training and scholar exchange in cancer research. Exchanges will be arranged among NCI and Irish and Northern Ireland institutions that involve basic, clinical, and epidemiological investigations and that include the training of personnel, such as research nurses and clinical investigators, critical to the clinical trials process.

- B. New Programmes:** New programmes will be developed as appropriate, including the establishment of appropriate partnerships with advocacy groups, non-governmental organisations, and industry.

### **III. Governance**

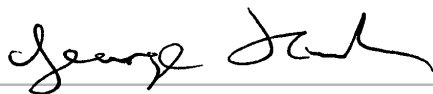
The collaborative programmes developed under this Memorandum will be overseen by a Board comprising representatives of the Department of Health and Children of Ireland, the Northern Ireland Department of Health and Social Services, and the National Cancer Institute of the U.S. Department of Health and Human Services.

- A. Membership:** The Irish Chief Medical Officer, the Northern Ireland Chief Medical Officer, and the Director of the National Cancer Institute, who may designate an alternate member to represent them. The Chair will alternate yearly between the Chief Medical Officers of Ireland and Northern Ireland, and management of the Board will be the responsibility of the Chair.
- B. Responsibilities:** The Board will determine the scope and priority of actions provided for in this Memorandum, including the development of strategic plans for cancer research. In conducting its work, the Board will consult with appropriate organisations and individuals, engage consultants, and establish working groups as required. The Board will implement and provide oversight of the programmes developed under this Memorandum. The Board will make arrangements for the transfer and distribution of funds, when appropriate, and Board members, representing the Participants, will determine the funding contributions necessary to support its activities, subject to resource allocation processes outlined in the resources section of this Memorandum (III C).

- C. Resources: Subject to the laws and regulations of the Participants, the availability of resources under the annual fiscal arrangements of the Participants, and the fiscal and operating procedures of each Participant, the Participants expect to provide funding to support the priority activities identified by the Board. Once funds are identified and approved for a project, the respective rights and responsibilities of each participant will be clearly specified in separate project arrangements.
- D. Meetings: The Board will meet within three months of the signing of this Memorandum and biennially thereafter. At the first meetings, the Board will develop procedures to support the conduct of its business.
- E. Reporting: The Board will submit an annual report to their respective departments.

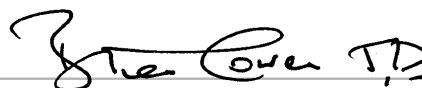
**IV. Duration**

Activities under this Memorandum will commence upon signature and continue for five years. It may be amended or extended by written consent of the Participants.



MR. GEORGE HOWARTH, M.P.  
Parliamentary Under Secretary of State, Northern  
Ireland Office of the Government of the United  
Kingdom of Great Britain and Northern Ireland,  
on behalf of the Department of Health and Social  
Services

Date 3 October 1999 location Belfast



MR. BRIAN COWEN, T.D.  
Minister for Health and Children, Government of  
Ireland, on behalf of the Department of Health  
and Children of Ireland

Date 3 October 1999 location Belfast



DONNA E. SHALALA, Secretary of Health and  
Human Services, United States of America

Date 29 September 1999 location Washington, D.C.