

## **MEMORANDUM OF UNDERSTANDING**

between

The Department of Health and Children of Ireland;  
Department of Health, Social Services, and Public Safety for Northern Ireland; and  
United States Department of Health and Human Services

The Department of Health and Children of Ireland; the Department of Health, Social Services, and Public Safety for Northern Ireland; and the National Cancer Institute (NCI), a part of the National Institutes of Health (NIH) within the United States Department of Health and Human Services (HHS), (hereinafter, referred to as the Participants) intend to continue their collaboration begun in 1999 called the Ireland-Northern Ireland-HHS/NIH/NCI Cancer Consortium:

Recognizing that cancer is a major public-health/health-care problem that causes premature morbidity and mortality;

Recognizing the necessity to apply the most effective preventive and therapeutic strategies to the control of this disease;

Further recognizing that these strategies can be most effectively implemented on an international and collaborative basis;

The Consortium is to intensify its endeavours in a manner that encompasses all aspects of cancer control. This enhanced cooperation should enable improved scientific programmes in each jurisdiction, including in the following areas:

- Prevention and early detection;
- Diagnosis and treatment;
- Palliative care and survivorship;
- Interactions aimed at enhanced public-health and patient-care;
- Research (including biobanking);
- Education and training for physicians, nurses, and scientists;
- Epidemiology (including registration, and surveillance);
- Quality assurance; and
- Cancer policy analysis and health economics.

### **SECTION I**

#### **Scope of Understanding**

The participants intend to continue their collaboration to cover the areas outlined above to do the following:

- Identify infrastructure improvements necessary for the island of Ireland;
- Formalize and facilitate interactions among the United States, Ireland, and Northern Ireland cancer-control communities;
- Develop joint programs that could enhance the environment for cancer control with the anticipated outcomes of improved prevention and cancer care; and
- Develop educational exchange programmes for cancer- control personnel.

### **SECTION II**

#### **Governance of Consortium**

A Board composed of representatives of the Department of Health and Children of Ireland; the Department of Health, Social Services and Public Safety for Northern Ireland; and the National Cancer Institute within the National Institutes of Health (NIH) of the U.S. Department of Health and Human Services (HHS/NIH/NCI) will oversee The Consortium and its collaborative programmes developed under this Memorandum of Understanding (MOU).

- A. **Membership:** The Chief Medical Officer of Ireland, the Chief Medical Officer of Northern Ireland and the Director of the HHS/NIH/National Cancer Institute, each of whom may designate an alternate. The Chair is to 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. **Activities:** The Board should determine the scope and priority of actions provided for in this MOU, including the development of strategic plans. In conducting its work, the Board should consult with appropriate organisations and individuals, work with consultants, and establish working groups as required. The Board should provide oversight of the programmes developed under this MOU. Board Members, representing their own Participant organisations, are to advise on the funding necessary to support its activities, subject to resource-allocation processes outlined in the Resources section of this MOU (Section II 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 respective fiscal and operating procedures of each Participant, the Participants expect to support the activities identified by the Board. Once funds are identified and approved for a project, the respective responsibilities of each Participant should be clearly specified in separate project arrangements.
- D. **Meetings:** At a minimum, the Board should meet biennially.
- E. **Reporting:** The Board should submit an annual report to its respective Participants.

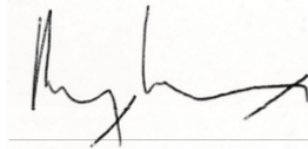
### Section III

#### Effective Date, Termination, and Amendment

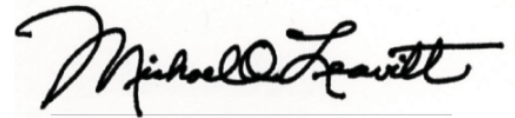
Upon signature by all Participants, this MOU is to remain effective for five years. Activities under this MOU should continue upon extension of this MOU by the designated representatives of the Participants. The Participants may modify or amend this MOU by mutual written statement. Each participant may terminate participation in this MOU upon providing 60 days' advance written notice to the other Participants.



**Paul Goggins, 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, Social Services and Public Safety for Northern Ireland  
Date: 11/13/06  
Location: Belfast



**Ms. Mary Harney, T.D.**  
Minister for Health and Children, Government of Ireland, on behalf of the Department of Health and Children of Ireland  
Date: 11/13/06  
Location: Belfast



**Michael O. Leavitt**  
Secretary of Health and Human Services, United States of America  
Date: 11/08/06  
Location: Washington, DC