

HEALTHY WOMEN, HEALTHY COMMUNITIES PROJECT

PROYECTO, MUJER SANA COMUNIDAD SANA

LETTER OF AGREEMENT BETWEEN LAZO, CENTRETOWN COMMUNITY HEALTH CENTRE (CCHC), GENTIUM CONSULTING AND THE COMMUNITY HEALTH RESEARCH UNIT OF THE UNIVERSITY OF OTTAWA (CHRU)

CCHC, GENTIUM, CHRU and LAZO have received a grant of \$675,000.00 from the Ontario Women's Health Council to implement a **Building Community Capacity And Equitable Access To Cancer Screening For Ethno-Racial Minority Women – A Demonstration Project** for Latin American women, and to explore the possibilities to transfer such project to other ethno-racial community women. This project will demonstrate a model to address gaps and barriers limiting equitable access to effective breast and cervical cancer screening information and services, focusing on one hard-to-reach ethnic minority population (Hispanic) living Ottawa-Carleton. The project will improve access to cancer screening for ethno-racial minority women in the Ottawa-Carleton region, increase the capacity of organizations to provide such screening, and empower women leaders in the community.

This demonstration project is sponsored by CCHC (project administrator), and will be executed by the four partners involved: CCHC, GENTIUM, CHRU and LAZO between January 2001 and March 2003.

The four partners (Project Team), CCHC, GENTIUM, CHRU and LAZO, define the roles and responsibilities as follows:

All partners will be responsible for:

- Ensuring the demonstration research project is completed, tasks are accomplished, goals met
- Developing a joint work plan
- Bringing up suggestions to improve the project
- Staying within the allocated budget
- Ensuring that ethical guidelines are followed.
- Communicating with the project team about any changes to the work-plan
- Forwarding all correspondence and information to the project coordinator and/or other project team members
- Attending and participating fully in regular project team meetings, and other meetings as required
- Chairing a sub-committee and/or acting as liaison for a sub-committee (as per each sub-committee's terms of reference?)
- Delivering assigned tasks within the time-frame agreed upon by all partners

- Bringing up issues or conflicts that impact on project implementation, and attempting to resolve these promptly
- Contributing to the documentation of the process and the project
- Contributing to the dissemination of the project
- Ensuring the public image of the project is coherent, consistent, accessible, and appropriately enhances the outreach, dissemination, and capacity building components
- Providing regular communication about the progress of the project, within the Project Team, for the duration of the project.
- Providing the necessary information and materials to the Project Coordinator for each interim report.
- Providing the necessary information and materials, to the Project Coordinator, for a final report in March 2003, describing the development, implementation and outcomes of the project.

Decision-making:

Decisions about the following items need to be agreed upon by all partners

- The decision-making process itself!
- Decisions will be taken by a consensus building approach. If consensus is not reached, a majority vote will be taken.
- Quorum will be reached with three partners present. Input from all partners is required for important decisions. Upon agreement on a case-by-case basis, each partner can invite as many 'representatives' from each to the project team meetings.
- Important issues requiring major decisions are:
 - Budget and all administrative decisions (changes, revisions, expenses above amount of dollars approved by the Project Team)
 - Work-plan (reallocation of tasks; changes in time-lines by more than a week to - Changes to the research Framework, Training/Programming, Dissemination/Outreach and Transfer and sustainability:

Media

- The main contact for media will be the project coordinator. The project coordinator (on a case-by-case basis) will in turn contact the appropriate spokespersons from the project team who could represent the project on the particular issue selected.

Intellectual Property:

- The consortium (four partners) is the owner of the intellectual property arising from this project. The Ministry of Health may require CCHC as the (project administrator) to report what Intellectual Property, if any has been produced under this agreement.

- All 'Intellectual Property' means designs, reports, photographs, drawings, plans, specifications, computer software, surveys, calculations, and other data, information and material collected, computed, drawn, or produced, including computer print-outs and assessment tools that are produced by the consortium (four partners) by the period covered by the agreement.

Copyright

- All partners have the right to publish findings from this project as long as previous consent has been obtained from the other partners.
- If various publications are produced, and each of the publications have multiple authors, authors will take turns in having their names listed first. Authors who do not desire to be listed first can do so.

Roles and Responsibilities for each of the four partners:

I. LAZO, as one of the executing partner, will be responsible for:

Key role:

Participating in the development, implementation and evaluation of the Healthy Women, Healthy Communities project, from inception to completion, within the allotted budget. These include:

- Developing outreach strategies to Hispanic community through Hispanic and mainstream media community
- Developing and implementing a dissemination and outreach strategy to isolated Hispanic women
- Assisting with baseline data collection
- Assisting with research design, data collection & analysis;
- Participating in training design, development and delivery for LHP ;
- Assisting in report writing
- Providing input into Literature review findings
- Assisting in design base line data collection mechanisms (breast & cervical cancer screening at CCHC & other clinics)
- Participating in design and implementation and evaluation of project (research, training, dissemination, outreach)
- Providing input into ongoing development of research tools
- Participating in design, development and implementation of focus groups for service providers to identify barriers
- Assisting in compilation of base-line data at CCHC and OBSP
- Participating in data collection on access barriers with lay health promoters;
- Develop program evaluation (Outreach, dissemination and community forum)
- Assisting with interview schedule for AC members (re: service gaps, project to date)
- Participating in the comparison of baseline data with follow-up data analysis
- Participating in writing on the community capacity building process and research findings.

- Doing participatory research with Hispanic women (interviews, surveys)
- Ensuring that Conceptual framework is implemented and that all models (CCB, LHP, TTM) and appropriately applied.
- Providing support (through an appropriate referral system to Hispanic women.

Staff Management:

- Participating in Hiring of project staff and of Lay Health promoters.
- Ensuring that LHP meet with the Project Coordinator every month. If necessary, these meetings will include the HPC Manager, every two months.

II. Centretown Community Health Centre (CCHC), as one of the executing partners, will be responsible for:

Key Role:

Each fiscal year in which administrative services are funded, 12 % of the program budget will be allocated for administrative support to cover the following services:

- Financial management, legal supports and payroll duties
- Office space and furniture
- Telephone answering and message service
- Access to available meeting rooms
- Use of photocopier and fax machines
- Liability insurance coverage for staff and volunteers
- Supervision and support for the Coordinator of the program, including annual performance reviews.
- Access to CCHC information systems and computer support

In addition to administrative support, program support will be provided in the following manner:

- The Manager of Community Health will be a member of the Project Team as the representative for CCHC.
- The Manager of Community Health, a Health Promoter, a Nurse Practitioner and a Board member will be members of the Advisory Committee.
- The Coordinator of Primary Care Services and the Information Systems Coordinator will work in collaboration with the staff of Mujer Sana Comunidad Sana to obtain necessary client data from CCHC client files and data collection systems. (*do we need to spell this out?*)
- A Health Promoter will contribute approximately one day per week to provide support to the Lay Health Promoters and to assist in the development of the training program.
- A Nurse Practitioner will be available on an ad hoc basis to provide consultation re cancer screening practices and resources.

- A Project Coordinator will be available for this project on a 2 _ days per week to provide support to all the components of the project (see attached job description)
- Writing reports to funder. The final report will also include a description of the methodology used, the resources required, the outcomes of each of this project's components: Research, Training/programming, Dissemination/Outreach, Transfer and Sustainability and recommendations for future demonstration projects.

III. Gentium Consulting, as one of the executing partners will be responsible for:

Key role

Provide expertise and assistance in research design; analysis, scholarly & project writing and dissemination, using participatory research methods. These include the following:

- Research design, data collection & analysis;
- Training design, development and delivery for LHP ; report writing
- Literature review
- Design base line data collection mechanisms (breast & cervical cancer screening at CCHC & other clinics)
- Finalize evaluation plan
- Ongoing research tool development
- Design, develop and implement focus groups for service providers to identify barriers
- Direct compilation of base-line data
- Coordinate data collection on access barriers with lay health promoters;
- Develop training evaluation
- Develop program evaluation (Outreach, dissemination and community forum)
- Design interview schedule for AC members (re: service gaps, project to date)
- Review recent newcomer population to Ottawa-Carleton
- Comparison of baseline data with follow-up data analysis
- Assisting in writing of final report
- Writing of community capacity building process and research findings.

Staff Management:

- Participating in Hiring of Staff and LHP
- Assisting with supervision of research assistants.

IV. The Ottawa University Health Research Unit (CHRU), as one of the executing partners will be responsible for:

Key role:

1. Providing expertise primarily through input, rather than through primary responsibility for:
 - Development of research tools and plans
 - Supervision of data collection, or other aspects of research project management.

- Assisting in baseline data collection where appropriate
- Providing input into focus group design, and analysis, including supervision of Summer Research Intern
- Assisting in evaluation of training program
- Providing input into development of interview schedule
- Participating in analysis of access barriers from interviews and surveys
- Disseminating findings through scholarly channels such as conference papers, journal publication, CHRU monograph

2. Staff management:

a. Research Assistant Summer, 2001: Hire through U of O (to be reimbursed through the grant), and supervise a research assistant to conduct a literature review of theoretical models, and LHP training and evaluation approaches;

b. Research Assistant, 2002-2003: Hire and supervise as above, research assistant duties to be determined as project progresses, but may include data collection and analysis, and/or report writing.

c. Summer Research Intern, 2001: Supervise research intern involvement in project, including focus group analysis and writing.

Evaluation of the Agreement

This agreement will be evaluated annually by the members of the Project Team and the Executive Director of CCHC.

Termination of the Agreement

With 60 days notice, any partner may propose termination of this agreement. In the event that one or more of the partners should withdraw from this agreement, the remaining members of the Project Team will negotiate re-allocation of resources. If the re-allocation of financial resources are significant, the final decisions will rest with the funder, after consultation with the Manager of Finance and the Executive Director of CCHC.