MEMORANDUM OF UNDERSTANDING
BY AND BETWEEN
THE NATIONAL FRIENDLY ACCESS\textsuperscript{SM} PROGRAM OFFICE
AND
THE FOUNDING PARTNERS & THE COALITION STEERING COMMITTEE
OF THE
COMMUNITY FRIENDLY ACCESS\textsuperscript{SM} COALITION

PREAMBLE:

The purpose of this Memorandum of Understanding (MOU) is to clearly delineate the roles and responsibilities of the Founding Partners, the Coalition Steering Committee, the Coalition and the National Program Office in the achievement of Community Friendly Access\textsuperscript{SM} Project activities and as a requisite for receipt of project funds, resources or other benefits associated with participation in the National Friendly Access\textsuperscript{SM} Program. This is not a legally binding agreement. In order for the Community Friendly Access\textsuperscript{SM} Project to succeed, multiple organizations must fulfill their individual project responsibilities as well as those that require collaboration with other member organizations.

The Founding Partners and the Coalition Steering Committee members are the organizing body of the Coalition. They shall consist of executive level representatives of the community institutions responsible for assuring and providing inpatient and ambulatory maternal and pediatric (for ages 0-5) health care for the Medicaid eligible population in the community. The Founding Partners and Steering Committee shall be the signatories of the agreement and shall be responsible for collaborating to achieve the project objectives explained in the body of this document. The membership of the Steering Committee may be revised subsequent to the signing of this Agreement according to the by-laws of the Coalition.

\textit{The National Friendly Access\textsuperscript{SM} Program Office enters into this agreement with the Community Friendly Access\textsuperscript{SM} Founding Partners and the Coalition Steering Committee to jointly continue to further develop, implement and evaluate a Community Friendly Access\textsuperscript{SM} Project Model in \_\_\_, building on the accomplishments of the first year of the Project.}

Background:

The Lawton and Rhea Chiles Center for Healthy Mothers and Babies received a cooperative agreement from the Centers for Disease Control and Prevention to work in partnership with communities throughout the United States to implement the National Friendly Access\textsuperscript{SM} Program. The mission of the National Friendly Access\textsuperscript{SM} Program is to change the culture of maternal and child health care delivery systems in ways that improve consumer access, utilization, satisfaction and outcomes.

Access to, utilization of and satisfaction with maternal and child health care are critical ingredients in improving maternal and child health outcomes. A preliminary review of the literature indicates three factors that may preclude a woman from seeking or continuing to use prenatal services: the physical distance that she has to travel; the psychological distance that she
may feel from her health care providers, and the confusing and frustrating system itself. Impersonal and sometimes offensive treatment of consumers also contributes to consumer dissatisfaction and under-utilization of important preventive services.

The National Friendly Access℠ Program will partner with Community Coalitions to develop and implement Community Friendly Access℠ Projects in accordance with National Friendly Access℠ Maternal and Child Service Guidelines, mission, values, operating principles and expectations.

The National Friendly Access℠ Program has the following objectives:

1. To create model systems for the delivery of maternal and child health services at the community level in accordance with “Friendly Access℠ Service Guidelines.” Copies of these guidelines are provided in “Building a Friendly Access℠ Program at the Community Level.”

2. To build a maternal and child health leadership development and quality service improvement training program for community-based, interdisciplinary teams of service providers addressing the health of mothers, infants, and young children.

3. To implement a technical assistance program for community coalitions developing Friendly Access℠ demonstration programs.

4. To implement a Friendly Access℠ research program that defines problems based on experience and data, investigates solutions, designs interventions to address the problems, evaluates results in community settings, and disseminates “best practices” nationally. The National Program will attempt to answer two core questions in addition to specific questions that may arise from the community projects:
   - Does improving customer service to children and pregnant women increase access to and utilization of health services, both preventive and curative?
   - Does increasing access and utilization improve certain health indicators?

5. To develop a holistic approach to the delivery of maternal and child health services by linking health care providers with social, educational, and economic service providers who work with underserved families.

6. To build a national dialogue on quality service through national and regional conferences and information exchange on the Friendly Access℠ Website.

ROLES AND RESPONSIBILITIES

The following roles and responsibilities pertain to the signatory partners of this document.

The National Friendly Access℠ Program agrees to:
1. Provide technical assistance to the Community Friendly Access℠ Coalition to develop, implement, and evaluate the project.

2. Assist the Community Friendly Access℠ Coalition in developing and training interdisciplinary teams who will lead the change process within and across their respective agencies and organizations.

3. Assist the Community Friendly Access℠ Coalition in assessing its maternal and child health service delivery systems to determine their effectiveness with regard to outcomes, availability, access, utilization, quality service, health benefits, and customer satisfaction.

4. Facilitate strategic planning focused on determining root causes of problems and implementing strategies based on successful experiences in similar communities.

5. Assist the Community Friendly Access℠ Coalition in designing and implementing maternal and child health service delivery systems and interventions that improve access, utilization, quality service, health benefits, and customer satisfaction.

6. Develop and implement competency-based practice curricula to strengthen the skills of practitioners involved in providing the ten essential public health services in support of healthy mothers, infants and young children.

7. Establish research programs that will assist public and private maternal and child health care programs and providers in the effective delivery of preventive health care services.

8. Create and implement a system for the dissemination of policy and practices emanating from Friendly Access℠ Program research and evaluation.

9. Identify key variables related to quality maternal and child health service delivery and develop tools to evaluate the process as well as intermediate and long term outcomes of the Project.

10. Provide protocols for guiding the Project’s research and evaluation studies including a copy of the Data Security Manual of the Lawton and Rhea Chiles Center for Healthy Mothers and Babies, University of South Florida

11. Assign a Project Officer to facilitate project implementation and provide technical assistance.

12. Provide National Friendly Access℠ Communications guidance to assure the appropriate use of the Friendly Access℠ name, logo and service mark. The Friendly Access℠ Service mark must be included on all documents made available to the public. The National Program Office will provide communication procedure guidelines regarding press releases and other materials distributed to the public about the program.

13. Provide orientation and training for Coalition chair, and other Coalition members as needed.
14. Provide training for community internal team members as needed.

15. Provide training for a Community Leadership Team of up to seven individuals selected by the Coalition Steering Community. The Team will include the Project Director, the Project Evaluation Coordinator, and five other individuals who will lead and facilitate the community’s strategic planning process.

16. Build upon, enhance and establish program partners that will assure ongoing support for the Community Projects as well as the National Program.

17. Collaborate with the Community Coalition to seek and secure resources needed for the continuation of their Community Project and the National Program, as well as expand the program into additional Communities that demonstrate the capacity and desire to do so.

The National Program Office has created arbitrary labels to distinguish separate structures and processes for assuring critical functions are carried out. It will be the Coalition Steering Committee and the Founding Partners’ responsibility to decide if new groups/committee, etc. need to be formed or if existing groups can assume the functions. This document describes the critical functions and responsibilities and the deliverables required.

Each Founding Partner, whose organization provides direct maternal and child health care and eligibility services, agrees to:

- Maintain and support an Internal Friendly AccessSM Team dedicated to the achievement of the project objectives and activities within their respective organizations. (Examples of support include release time for Friendly AccessSM activities, meeting space, direct communication with management and executive leaders, etc.)

The internal teams have the following responsibilities:

1. To facilitate the established process for developing, implementing, and evaluating strategies for improving consumer access, use, and satisfaction by building quality service within their organizations.

2. To facilitate the established process for linking and integrating internal planning and intervention with the strategic plan developed by the Community Friendly AccessSM Coalition.

Internal Friendly AccessSM Teams’ Structure
Ideally, Internal teams are comprised of individuals in leadership roles in the following functions within their organizations:
- Human Resources
• Facilities
• Systems/Operations
• Professional Practice
• Communications

Internal Friendly Access℠ Teams’ Responsibilities
• Participate in project training provided by the National Friendly Access℠ Program.
• Facilitate the collection of data required for their organization for Friendly Access℠ project evaluation.
• To the extent possible, analyze and interpret primary and secondary data specific to their own institutions to identify opportunities for improving consumer access, use and satisfaction.
• Participate in “thinking like a marketer” training of Community Friendly Access℠ provided by the National Friendly Access℠ Program at the community level.
• Design and implement a quality improvement plan for their organization to address service issues identified in the internal organizational baseline assessment.
• Implement and evaluate the strategies developed in the internal planning process.
• Instill quality service principles and practices in their respective organizations.
• Share with the Community Coalition and the National Friendly Access℠ Program strategies developed for improving consumers’ access, use, and satisfaction within their organization.
• Share with the Community Coalition and the National Friendly Access℠ Program activities performed internally within the team and with the Coalition.
• Develop and implement a protocol for linking and integrating internal planning and intervention development efforts with the efforts of the Community Friendly Access℠ Coalition.

The Coalition Steering Committee agrees to:

1. Submit required status reports/products to facilitate funds being released to the Administrative Coordinator. All reports and products are to be sent electronically directly to the assigned Project Officer with copies sent to the National Program Office and the Administrative Coordinator.

2. Comply with policies and procedures established regarding the use of the Friendly Access℠ name and logo.

3. Adhere to previously established procedures for hiring, orienting, and supervising Coalition staff.

4. Utilize an Administrative Coordinator for the Coalition with whom the University of South Florida, on behalf of the National Friendly Access℠ Program can contract to receive funding on behalf of the Coalition.
5. Maintain a senior project director, evaluation coordinator, and support staff for data collection and evaluation. The Project Director will report to the Coalition Steering Committee, as distinct from any one of the partners and will have the following functions, at a minimum:

- Serve as a liaison between the Project and the national technical assistance team.
- Coordinate the activities of the Coalition partners in support of this agreement.
- Facilitate the ongoing community maternal and child health data collection for project evaluation and outcome measurement.
- Document the Project’s progress in meeting its expectations and the expectations of the National Program.
- Supervise the Community Friendly Access℠ Coalition staff.
- Comply with communication protocols and guidelines.
- Participate in staff orientation and training.

6. Assist the National Program Evaluation Team in ongoing community maternal and child health data collection for project evaluation as detailed in the “Preliminary Master Plan for the Evaluation of the Friendly Access℠ Program.”

7. Maintain and support the Community Leadership Team to assure the Team’s participation in the seminars conducted by the National Program Office. The Community Leadership Team is an interdisciplinary group selected by the Coalition to participate in the Leadership Seminars. The team will consist of the Project Director, the Project Evaluation Coordinator and five other individuals who will lead and facilitate the community’s strategic planning process.

8. Facilitate the establishment of a data collection process and database to facilitate project research, evaluation and outcome measurement.

9. Collect and report project evaluation data according to established protocols and timelines.

10. Develop and expand the Coalition as needed for project implementation.

11. Continue to implement an action plan developed for the project period that includes:

- Vision, mission and value statements that are consistent with those of the National Program.
- Structure and processes for interagency strategic planning to design and implement interventions that will improve access to, utilization of and satisfaction with maternal and child health services in the Project’s community.

12. Engage Community Quality Service Team members who attended the Disney Program in the development of the Friendly Access℠ strategic plan.

13. Implement a process to conduct root cause analysis and how it might influence the design of interventions and submit a report on the result of that process.
14. Report on analysis and interpretation of baseline primary data from consumers and providers.

15. Submission of a “community analysis profile” that incorporates analyses of baseline primary data that identifies priority populations and links institutional issues related to service delivery, and detail specific successes and challenges in the access, use, and satisfaction of maternal and child healthcare consumers.

16. Draft research plan to learn more about the community priority populations and the issues they confront in accessing care.

17. Provide regular reports on work-to-date within Community Friendly Access℠ Coalitions to plan additional research and interventions.

18. Draft strategic plan for addressing changes to the MCH care delivery system at the community and institutional levels.

19. Collaborate with the National Program Office to seek and secure resources needed for the continuation of their Community Project and the National Program, as well as expand the program into additional Communities that demonstrate the capacity and desire to do so.

Data Management:
Signatories shall agree that all data will be managed in compliance with the Health Insurance Portability and Accountability Act of 1996 (HIPAA). Founding Partners, the Coalition Steering Committee, and Coalition members and staff will comply with policies and procedures as outlined in the Data Security Manual of the Lawton and Rhea Chiles Center for Healthy Mothers and Babies, University of South Florida and in accordance with federal and state regulations. Unauthorized disclosure shall be deemed a breach of this Agreement and Agreement will be subject to termination as detailed below.

Intellectual Property Rights:
Publishing of results that relate strictly to a Community Friendly Access℠ Project shall not be subject to approval or restriction by The University of South Florida (USF). However, the Community Friendly Access℠ Coalition agrees to deliver to USF any analyses or reports prepared on the results of the Project for scholarly publication at least thirty (30) days in advance of the submission of such proposed publication or presentation to a journal, editor, or other third party for review and comment. Such publications or presentations shall not contain any project-identified proprietary information. In addition, when the results of the research are published, the Community Friendly Access℠ Coalition agrees to provide USF with advance copies of the publication and acknowledge the support received from USF. The parties further agree that upon mutual agreement, employees of USF may co-author publications that relate strictly to the Community Friendly Access℠ Project. Should there be a conflict concerning authorship, final determination shall be made by the Principal Investigator and the National Program Director. Publishing of results that relate to multiple Community Friendly Access℠ Projects shall not be subject to approval or restriction by individual projects. However, USF agrees to deliver to
Community Friendly Access℠ Coalition any analyses or reports prepared on the results of the Project for scholarly publication at least thirty (30) days in advance of the submission of such proposed publication or presentation to a journal, editor, or other third party for review and comment. Such publications or presentations shall not contain any project-identified proprietary information. In addition, when the results of the research are published, USF agrees to provide the projects with advance copies of the publication. The parties further agree that upon mutual agreement, persons involved in Community Friendly Access℠ Projects locally may co-author publications that address multiple community Friendly Access℠ projects. Final authority to determine authorship shall be held by the Principal Investigator National Program Director.

Modifications to this MOU:
This Memorandum may be modified with supplemental written agreements signed by the parties and can be terminated in writing in whole or in part, by consensus of the parties.

In the event of termination, the Community Partner and any subsidiary partner to the Project may not use the Friendly Access℠ name, logo or affiliation in any of its publications or communications for internal or external consumption.

Required Deliverable Due Dates for the Second Year (August 2003 through July 2004):

October 31, 2003
A summary of project activity for August, September, and October with attachments to include:
• Statement of Project Vision, Mission, and Values developed by the Jacksonville Friendly Access℠ Initiative
• Submit community access and use data statements based on initial examinations of secondary data
• List of individuals who participated in the September Leadership Seminar in Atlanta
• Report on status of ongoing primary data collection, entry, and if applicable local analysis.
• Report on training and technical assistance requested and received from the National Friendly Access℠ Program Team

January 31, 2004
A summary of project activity for November, December, and January with attachments to include:
• Draft list of critical issues, preliminary root cause analysis, and priority issues
• Draft of interventions and investment strategies – including the logic model
• Draft Strategic Plan
• Report on status of ongoing primary data collection, entry, and if applicable local analysis.
• Report on training and technical assistance requested and received from the National Friendly Access℠ Program Team
April 30, 2004

A summary of project activity for February, March and April with attachments to include:

• Status of Implementation of Community Strategic Plan
• Status report on Internal Teams Progress – focus on interventions designed to improve consumers’ access and use that are not necessarily included in the Jacksonville Friendly Access™ Initiative Strategic Plan
• Report as to the structure (new or existing) and processes (new and existing) that will achieve the objectives of the “internal teams”
• Report on status of ongoing primary data collection, entry, and if applicable local analysis.
• Report on training and technical assistance requested and received from the National Friendly Access™ Program Team

August 31, 2004

A summary of project activity for May, June, July and August with attachments to include:

• Progress and analysis report on Implementation of Community Strategic Plan
• The teams, their membership and roles in their institutions, their activities to date, how they relate to the Steering Board and Leadership Committee, how they have begun to integrate the Disney training into their site, and technical assistance needs they may have for the coming year.
• The Leadership Committee’s role in strategic planning, their activities to date, how they relate to the Steering Board and Leadership Committee, how they have begun to integrate the Disney training into the community strategic planning process, and technical assistance needs they may have for the coming year.
• Efforts and accomplishments in engaging and involving pediatric and child care providers and related representatives in the activities of the project.
• New or changed insights about goals and outcomes from the project – a discussion of what the Jacksonville Friendly Access™ participants and staff learned as well as what they did.
• List of individuals who participated in the Spring Leadership Seminar
• Report on training and technical assistance requested and received from the National Friendly Access™ Program Team
• Proposed Budget and Work Plan for Year 03
• Recommendations for the National Office for the upcoming year

This Memorandum of Understanding is entered into within the limits of the statutory authority of the parties to the Memorandum

Understood and Agreed:

________________________________________  ____________________________________
Delores F. Jeffers, RN, MPH    Peter A. Gorski, MD, MPA
University Project Director    Professor and Center Director
The following Founding Partners and members of the Steering Committee jointly agree to the roles and responsibilities delineated in this Memorandum of Understanding:

**Founding Partners:**

Print Name and Title: ______________________________________________________
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