KNOWLEDGE PARTNERSHIP AGREEMENT

Part 1: Parties to the Partnership Agreement

This Knowledge Partnership Agreement is between the following Parties:

The International Foundation for Integrated Care (IFIC) represented by Dr Nick Goodwin, CEO and Dr Viktoria Stein, Senior Fellow and Head of the Integrated Care Academy ©

and

The Centre for the Advancement of Interprofessional Education represented by Richard Pitt, Chair and Dr Maggie Hutchings and Dr Sundari Joseph, Vice Chairs

Part 2: Background

2.1 The International Foundation for Integrated Care

IFIC is a network that crosses organisational and professional boundaries to bring people together to advance the science, knowledge and adoption of integrated care policy and practice.

As a 'movement for change', IFIC seeks to achieve this through the development and exchange of ideas among academics, researchers, managers, clinicians, policy makers and users and carers of services throughout the World.

IFIC has a history that goes back to 2000 when it launched the International Journal of Integrated Care (IJIC) as an initiative of three Dutch Universities (Utrecht, Maastricht and Groningen) and was hosted and sponsored by the University Library Utrecht. By 2004, the International Network for Integrated Care (INIC) was formed to develop educational events and organise an annual conference programme.

In October 2011, IFIC was instituted as an independent Dutch Foundation with an international Board of directors drawn from 16 countries worldwide. The work of the Foundation today has expanded to include a growing research faculty and an Integrated Care Academy © to support education and training as well as knowledge translation.

IFIC focuses on influencing professionals, managers and policy-makers in their efforts to adopt integrated care in policy and practice. Key audiences for IFIC therefore include: policy-makers and regulators; system architects; service funders/commissioners; leaders and managers of integrated care projects; professionals delivering care; service users and representative groups in the third sector.

IFIC also retains a core focus on the scientific endeavours of researchers and academics (e.g. journal activities, research and development, conferences, educational activities) but has recognised the need for applied research to support knowledge translation that supports policy, managerial and professional stakeholders. IFIC has a ‘community’ of over 17,000 individuals and organisations, including some 800 members.
2.2 The Centre for the Advancement of Interprofessional

CAIPE is a UK based organisation with international outreach committed to promote health and wellbeing and to improve the health and social care of the public by advancing interprofessional education (IPE). To achieve this, it is committed to collaborative working across health and social care and related services. CAIPE aims to promote and develop interprofessional education, research, learning and practice across professions and organisations with educators, practitioners, students, service users and carers.

CAIPE draws its membership from individuals, corporate organisations (both national and international), students and service users and carers.

CAIPE has a thirty-year history being established in 1987 as a membership organisation and UK-based charity and in 1997 registered as a charitable Company limited by Guarantee with a Board of Directors. The vision that health and social care required a greater degree of collaboration from professionals than had been evident hitherto and that effective collaboration would be enhanced by interprofessional education. Over the years CAIPE has supported and guided the development of other IPE Networks across the world and is a member of Interprofessional.Global -Global Confederation for Interprofessional Education & Collaborative Practice (formerly known as All Together Better Health World Coordinating Committee) representing eleven other world IPE networks. Interprofessional.Global facilitates support and exchange between the interprofessional education and collaborative practice (IPECP) networks, establishes relationships with other like-minded organisations and welcomes and supports new networks sharing the same aims and values (www.interprofessional.global).

CAIPE aims to influence policy makers, professional bodies and regulators at a national level in the promotion of interprofessional education and collaborative practice. Various CAIPE publications over the years support this commitment and influence as does the Journal of Interprofessional Care which has been published in association with CAIPE since 1992.

Part 3: Purpose
3.1 The purpose of this agreement is to bring together the expertise of both Parties to promote the knowledge, science and adoption of integrated care underpinned by the principles of interprofessional education and collaborative practice.

3.2 The Parties commit to work together to develop projects, educational activities or material of mutual benefit that meet the aims and objectives of the Agreement;

Part 4: Principles
3.3 Both Parties have knowledge in the field of integrated care and a mutual commitment to standards of excellence in advancing the science, knowledge and the support to adoption of integrated care underpinned by the principles of interprofessional education and collaborative practice in policy and practice
4.1 This agreement is based on goodwill by the mutual consent of both Parties;
4.2 Through this Agreement, the Parties agree to promote one another as knowledge partners to their members, customers and other relevant parties;
4.3 The Parties shall seek to identify and progress a range of joint activities;
4.4 The Parties have no obligation to, but where appropriate, consider revenue raising to fund joint activities or consider fee-for-service work;
4.5 This agreement does not preclude either partner from sub-contracting the other or with a 3rd party for specific fee-for-service work;
4.6 Each of the Parties recognizes that the knowledge partnership does not confer preferential treatment upon the other;
4.7 The Parties to this agreement agree to declare any conflicts of interest.

Part 5: Aims and Objectives
3.4 The key objective of the Knowledge Partnership is to help advance the science, knowledge and adoption of integrated care underpinned by the principles of interprofessional education and collaborative practice in policy and practice internationally
5.1 The Parties will seek to achieve this objective through the development and exchange of ideas among academics, researchers, managers, clinicians, policy makers and users and carers of services
5.2 As knowledge partners, the Parties will establish and promote their work to their members, customers and other relevant parties through, where agreed in advance, co-branded communication and marketing material at conferences and workshops, on their public and members' websites, through social media, and word of mouth;
5.3 The Parties will facilitate international and regional collaboration as a means of achieving its purpose
5.4 The Parties will seek to generate membership for IFIC and CAIPE
5.5 The Parties and may seek to work together to generate income as a means to sustain and grow its joint activities
5.6 The Parties will specifically seek to develop and run activities as set out in Schedule 1 to this Agreement

Part 6: Management
6.1 Each Party is independently responsible to their individual Boards and work in accordance with the mandatory procedures and standards of good practice in line with requirements of their own organization;
6.2 The Parties to this Agreement will meet at least quarterly to share and discuss mutual areas of work;
6.3 Joint activities undertaken between the Parties will be subject to an additional letter of agreement and may be subject to a formal contract;
6.4 A review of the partnership will happen at 12 and 24 months

Part 7: Intellectual Property
7.1 Each organization will retain the intellectual property rights to the products and services developed independently.
7.2 Joint development of products and services will be subject to an intellectual property agreement.

Part 8: Duration
8.1 This Agreement is for 24 months and subject to termination by mutual agreement or by formal written notice of three months by either party
8.2 This Agreement remains valid from 14th January 2019 to 14th January 2021 unless superseded by a revised agreement mutually endorsed and signed by the stakeholders.

Part 9: Signatures

Signed by the representatives of the Parties as follows

Dr Nick Goodwin  
Chief Executive Officer  
International Foundation for Integrated Care

Date, Stamp and Signature

Richard Pitt  
Chair  
Centre for the Advancement of Interprofessional Education
SCHEDULE 1

KNOWLEDGE PARTNERSHIP AGREEMENT BETWEEN IFIC
AND XXXX

SPECIFIC ACTIVITIES

To be developed