

BRV #23/6990



REPUBLIC OF THE MARSHALL ISLANDS OFFICE
OF THE SECRETARY
MINISTRY OF HEALTH & HUMAN SERVICES

P.O. Box 16 Majuro Marshall Islands 96960
Telephone No. (692) 625-5327 Ext: 2392/2388 Email: fiacklick@rmihealth.org



MOF Contract #: _____

AG Contract #: MI-24-1121

JOINT MEMORANDUM OF AGREEMENT
BETWEEN
MINISTRY OF HEALTH & HUMAN SERVICES
AND
COLLEGE OF THE MARSHALL ISLANDS



This Joint Memorandum of Agreement (MOA) is made this 26th day of June 2024 by and between **College of the Marshall Islands, referred to as "CMI"** whose address is **P.O. Box 1258, Majuro, Republic of the Marshall Islands 96960** & the **Ministry of Health & Human Services, referred to as "MOHHS"**, whose address is **P.O. Box 16, Majuro, Republic of the Marshall Islands 96960**.

In this Agreement, the party who will be providing the services shall be referred to as CMI and the party who will be receiving the services shall be referred to as **MOHHS**.

WHEREAS, the CMI and MOHHS agree to commemorate in writing an agreement to hire the 14 newly graduated nurses from CMI who have received their Associate of Nursing Degree to participate in a 3-month residency or bridge program, after which they will be transitioned into MOHHS personnel upon successful completion and passing of the program.

WHEREAS, the Parties agree that this program collaboration is intended to address gaps in service, enhance systems of care, and expand the capacity of the local healthcare system.

WHEREAS, the CMI and MOHHS have the trained personnel and proper facilities required to formalize this partnership to support the MOHHS with bridging/residency program deliverables;

NOW, THEREFORE, be it known that all parties agree, as applicable, to the following:

SECTION 1. BACKGROUND AND DESCRIPTION OF SERVICES

1. **Background** There is a need to enhance the healthcare system in the Republic of the Marshall Islands, particularly in addressing the nursing shortage. This partnership aims to bridge the gap by providing newly graduated nurses with a comprehensive 3-month residency program. The program will equip the nurses with the necessary skills and experience required to meet the healthcare demands and improve the quality of care.
2. **Description of Services**

COLLEGE OF THE MARSHALL ISLANDS (CMI)

1. Provide financial disbursement to the nurses enrolled in the nursing residency program, following the college's payroll schedule.
2. Process contracts for graduates participating in the residency program.
3. Collaborate with MOHHS to facilitate the practical training and clinical rotations.
4. Use the final program assessment report to make improvements to Associate of Science in Nursing program.

MINISTRY OF HEALTH AND HUMAN SERVICES (MOHHS)

1. Develop a curriculum for the 3-month nursing residency program.
2. Collaborate with CMI to develop the curriculum for the residency program.



3. Provide clinical training sites and oversight for the residency program.
4. Engage experienced healthcare professionals as instructors and mentors for the program participants.
5. Offer ongoing support and supervision during the residency program.
6. Transition successful program participants into MOHHS personnel upon completion.
7. Provide documentation of nursing residents' hours following the College of the Marshall Islands schedule for submission of timesheets, in order for payment to be authorized.
8. Provide a report of the assessment of both successful and unsuccessful program participants to the College of the Marshall Islands.

SECTION 11. PAYMENT & FUNDING TERMS

100% of the allocated funding will be disbursed to CMI upon a written payment request. Payment shall be released within 5 business days. All unspent funds must be returned to the Secretary of Finance at the end of the MOA.

Funding Terms

This MOA is contingent upon the approval of funds from the respective authorities; and all parties agree to the following projections for Forty-Five Thousand (\$45,000USD), which includes a provisional sum of funds for contingency programming.

Nursing residents shall be paid at a rate of \$5.00 per hour with total hours not to exceed 80 hours per two week period.

In compliance with MOFBS policies and procedures, the projected budget for this MOA will be obligated on an annual basis in one installment. Following is the breakdown of the one payment installment:

- **First installment within 5 days of signing the contract - 100%**

CMI shall submit to MOHHS financial reports at the conclusion of the 3-month residency program, including supporting documents to verify the expenditure reports.

All expenses will be subject to review for allow ability by the Ministry of Finance. All unspent funds will be returned to the Ministry of Finance.

SECTION 11.1. TERM/TERMINATION OF AGREEMENT

This MOA is at-will and may be modified by the mutual consent of authorized officials from CMI and MOHHS. This MOA shall become effective on 6/26/2024 and shall remain in effect until written notice of not less than 30 working days is communicated by the party intending to terminate. In the absence of mutual agreement by the authorized officials from CMI and MOHHS, this MOA shall end on 9/30/2024.

- **The Nurse Internship Program is consist of 2 Phases; Phase 1 will commence on 8/5/2024 to 9/30/2024 and Phase 2 will continue from 10/1/2024 and concluding on 4/5/2025.**

1. Upon termination of this Agreement, services under this paragraph shall cease.
2. This MOA shall be in force from the date of signing by all parties.

SECTION IV. RELATIONSHIP OF PARTIES

It is understood by the parties that the College of the Marshall Islands is an autonomous agency, and the Ministry of Health and Human Services is part of the Government of the Republic of the Marshall Islands.

SECTION V. NOTICES

All notices required or permitted under this Agreement shall be in writing and shall be deemed delivered when delivered in person or when deposited in the United States mail, postage prepaid, utilizing certified mail, return receipt requested, addressed as follows:

Interim President
Dr. Elizabeth Switaj
College of the Marshall Islands
P.O. Box 1258
Majuro, Marshall Islands 96960

Francyne Wase-Jacklick
Secretary of Health & Human Services
Ministry of Health & Human Services
P.O. Box 16
Majuro, Marshall Islands 96960

Parties may change such addresses from time to time by providing written notice to the other in the manner set forth above.

SECTION VI. AMENDMENT

This Agreement may be modified or amended if the amendment is made in writing and signed by both parties.

SECTION VII. LIABILITY

To hold the CMI harmless from any and all property damage and/or personal injury arising from activities governed under this MOA regardless of the nature or cause of said damage and/or injury.

SECTION VIII. SEVERABILITY


If any provision of this Agreement shall be deemed by a court of competent jurisdiction to be invalid, then such provision shall be deemed stricken from the Agreement and the Agreement shall be enforced according to its valid and subsisting terms and provisions.

SECTION IX. APPLICABLE LAW

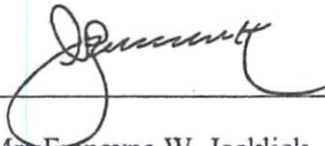
The validity of this Agreement and of any of its terms or provisions, as well as the rights and duties of the parties to this Agreement, shall be governed by the laws of the Republic of the Marshall Islands.

IN WITNESS, THEREFORE, the parties have executed the MOA on the date first written.

Ministry of Health & Human Services:

 8/9/24

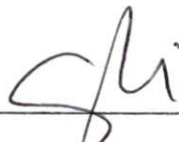
Hon. Ota Kisino Date
Minister of Health & Human Services
College of the Marshall Islands:



Mrs. Francyne W. Jacklick Date
Secretary of Health & Human Services

 9 Aug 24

Dr. Elizabeth Switaj Date
Interim President
Certificate of Funds:

 8-20-24

Mrs. Ayako Y. Eliou Date
Secretary of Finance, Banking & Postal Services

Hon. David Paul Date
Minister of Finance, Banking & Postal Services

Approved Legal Form:


 8/15/24

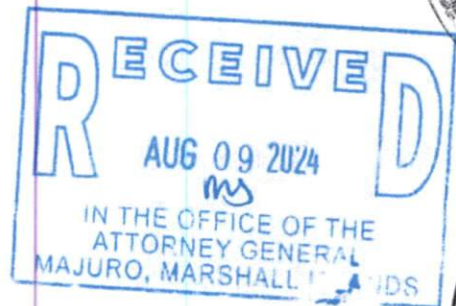
Mr. Bernard Adiniwin Date
Attorney General

Amount not to Exceed: \$45,000.00

Account:

See next page

NTE: 



10403-70511300-100302-801520 ~~\$20,590.52~~ \$20,589.52

~~10403-70511000-100303-801520 \$14,459.72~~ 10403-70511000-100202-801520 = \$14,459.72

~~10403-70511000-100300-801520 \$7,057.54~~ 10403-70511100-100300-801520 = \$7,057.54

~~10403-70510900-100700-801520 \$2,892.22~~ 10403-70510900-100700-801520 = \$2,893.22