

Minnesota Stroke Partnership Steering Committee Meeting Minutes – March 20, 2007

Snelling Office Park, Minnesota Room, 3:00 pm – 5:00 pm

In attendance: Donna Brauer, Diane Chappuis, Ed Crisostomo, Eric Hauth, Donna Lindsay, Kathleen Miller, Darcy Olson, Sheri Orcutt, Beth Rabeneck, Stan Shanedling, Tess Sierzant, Al Tsai

*Guests:*Angela Bray Hedworth (Great Lakes Regional Stroke Network), Sueling Scharding (AHA), Sarah Tonn (American Academy of Neurology)

Regrets: Sandy Hanson, Alejandro Rabinstein, Marnee Shepard, Pam White, Melissa Winans, Gary Wingrove

AGENDA TOPIC	KEY DISCUSSION POINTS	DECISIONS	ACTION ITEMS
Welcome and Announcements	<ul style="list-style-type: none"> • Welcome to new steering committee members • Various announcements for stroke awareness month 	None	None
Project Updates: EMS Stroke Task Force	<ul style="list-style-type: none"> • Train-the-Trainer program is being planned for June 2006. • Elizabeth Gardner is now staffing this group. 	None	None
ED Stroke Task Force	<ul style="list-style-type: none"> • Task force met in January • Moderately successful in recruiting members representative of entire state • Next step: Development of state consensus protocol for acute stroke care in ED 	None	
Discussion	<ul style="list-style-type: none"> • Members shared various education efforts • FAST message seems to be catching on more now • AHA does not officially endorse FAST, but would not oppose its use should the group decide to go with it • People seem to be more interested in finding out about reducing risk for heart disease than stroke, so why not take advantage of heart disease education opportunities to 'add on' and link these messages to stroke • Looking long term for knowledge will require getting this in school health curricula. Need to get people involved in curriculum development. • Education efforts on warning signs awareness is good, but there is not much emphasis on prevention of stroke 	None	

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	<ul style="list-style-type: none"> • Opportunities are there to go to companies and corporations to give messages and presentations on stroke signs, symptoms, prevention • We should partner with health plans • Consider taking advantage of 'captured audience' situations like flu-shot clinics • Issues to contend with: a) the nature of stroke is that it is generally painless b) cognitive impairment as one of the symptoms is a barrier for people to realize they are having a stroke and/or to call 9-1-1. • Telemedicine needs to be part of the discussion (editorial note: though not in the context of public education.) • Other partners to consider: AARP; schools (colleges, junior high schools, high schools), corporations, 4H clubs 		

Next Meeting: June 19, 2007