

Minnesota Stroke Partnership Steering Committee Meeting Minutes – June 19, 2007

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

In attendance: Donna Brauer, Donna Lindsay, Kathleen Miller, Sueling Schardin, Marnee Shepard, Tess Sierzant, Lyn Steffen, Al Tsai, Melissa Winans (by telephone)

Guests: Kari Olson

Regrets: Diane Chappuis, Ed Crisostomo, Sandy Hanson, Melissa Larson, Darcy Olson, Beth Rabeneck, Alejandro Rabinstein, Kevin Weber, Pam White, Gary Wingrove

AGENDA TOPIC	KEY DISCUSSION POINTS	DECISIONS	ACTION ITEMS
Welcome and Announcements	<ul style="list-style-type: none"> Welcome MDH awarded Coverdell grant. Al briefed the group on the highlights. 	None	Coverdell: Stay tuned for official announcements and informational conference call
Project Updates: EMS Stroke Task Force	<ul style="list-style-type: none"> Train-the-Trainer program is being planned for MnSCU EMS Instructors Conference September 21-22. To be taught by Craig Rees (North Memorial EMS Education) and a stroke neurologist to be determined 	None	None
ED Stroke Task Force	<ul style="list-style-type: none"> Writing group met Next step: Development of state consensus protocol for acute stroke care in ED 	None	None
Discussion	<ol style="list-style-type: none"> New leadership for the group. Operations and Infrastructure. <ol style="list-style-type: none"> Group discussed the idea of 'formalizing' <ul style="list-style-type: none"> - Discussion of pros, cons, and options – relating to the direction the MN Heart Disease and Stroke Prevention Steering Committee is heading, i.e., towards formation of a formal Alliance. - Don't want to lose sight of the 'treatment' side of the issue of stroke, even though we are all interested in stroke prevention (primary). - Discussion from last MinStroke meeting was encouraging in that MDs appear interested in working w/one another (across medical groups); getting their respective <i>organizations</i> to 'buy in' may be easier to promote, should there be a formal alliance/coalition that backs this type of collaborative work 	Tess Sierzant agreed to be the chair for 2007-2008; Gary Wingrove to be vice-chair.	None

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	<ul style="list-style-type: none"> - Some other advantages – organizational support and official recognition of this group, if we are ‘formalized’; funding opportunities may be greater; the public education (health promotion/primary prevention) piece may be more appropriately handled by the larger HDSP SC, leaving the MSP SC to focus more on EMS and treatment issues - Group wanted some more information about the MN Cancer Alliance - Everyone agreed with Marnee’s suggestion that the formal name should be “Minnesota Heart Disease and Stroke Alliance”, dropping ‘prevention’ from the title. Although one could apply “secondary” prevention to this term, the group agreed that prevention had connotations towards primary prevention, which should not (and is not) be the only focus, even though it is very important. - Seems wasteful to go in ‘parallel’ tracks towards formalization (i.e., creating both a HDS Alliance AND a Stroke Alliance) - Visibility for stroke issues at the HDSP SC level will be increased and improved through making MSP a formal subgroup of an alliance - Consensus that is it would be fine to have the (currently named) Minnesota Stroke Partnership Steering Committee transition into a work group/task force of the HDS Alliance, under certain conditions – mainly that the group would be able to maintain autonomy in directing what priorities, objectives, and projects should be pursued <p>b. Revisiting “Operations”</p> <ul style="list-style-type: none"> - Reviewed current operations and structure document <p>c. Work Plan, 2007-2008</p> <ul style="list-style-type: none"> - Short discussion of what the priorities for the year should be. 	<p>None</p> <p>None</p> <p>Group is fine with being (somehow) incorporated as a task group/task force (formal name to be determined) of a newly formed “Minnesota Heart Disease and Stroke Alliance.”</p> <p>Membership and requirement for attendance will be enforced; change year to start in July; MDH will continue to staff group, but specific persons to do so are yet to be determined.</p>	<p>AI will send list of pros/cons from HDSP Alliance work group meeting & requirements for participation of Cancer Alliance</p> <p>AI will communicate the main discussion points to Stan and the HDSP SC leadership.</p> <p>AI will send operations document to members for comment. Also, will email members for commitment for next year.</p>

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	c. Work Plan, 2007-2008 - Short discussion of what the priorities for the year should be.	Work Plan Priorities 2007-2008 1. ED Task Force (continuing) 2. EMS – ‘next steps’ (in addition to training – e.g., documentation standardization) 3. Stroke Registry 4. Planning: stroke transport and treatment system	

Next Meeting: September 18, 2007