

COVERDELL STROKE CARE PARTNER AGREEMENT

This agreement represents our hospital’s interest in partnering with the Wisconsin Coverdell Stroke Program (“Coverdell”) to improve stroke systems of care. As a **Coverdell Stroke Care Partner**, we commit to building our stroke capacity and to work towards entering data into the state wide stroke registry (Get With The Guidelines®). We commit to completing one or more stroke-related education or quality improvement activities listed below by June 29, 2024, with an expectation of annual efforts related to stroke care and education, as described below.

The benefits of participating as a Stroke Care Partner include:

- Access to the “Building Blocks of a Stroke Program Toolkit”
- Access to Hemispheres free online stroke education as resources are available
- Free BE FAST community education materials
- Networking opportunities with other Coverdell hospitals
- Member of the Stroke Coordinators of WI
- Member of the Coverdell Learning Collaborative Committee
- Technical assistance to answer questions regarding stroke care and related activities
- Collaboration with the American Heart Association/American Stroke Association for technical assistance on data collection
- Invitations to stroke education opportunities
- Recognition on the state stroke program website
- A press release template on being a Stroke Care Partner to use for local publicity

Our hospital agrees to complete an annual inventory about basic stroke program information (data from the inventory is blinded and analyzed in aggregate for annual review), and one or more of the following Stroke-related Activities (check all that apply):

- Deliver stroke community education
- Participate in annual clinical stroke education for the designated stroke team
- Review or establish stroke protocols (e.g. inter-facility transfer, ground and air transport)
- Provide regular feedback to EMS on stroke runs
- Engage in collaboration with Community Health Workers and/or Patient Navigators in the prevention (primary, secondary, tertiary) of stroke occurrence and mitigation of stroke effects
- Implement other stroke QI activities (please specify)

By checking this box, I acknowledge that I have the authority to commit our hospital to partner with the Wisconsin Coverdell Stroke Program and that our organization agrees to complete the above activity(ies) as voluntary partners with the Wisconsin Coverdell Stroke Program.

Hospital Name (as it should appear on the Coverdell website)

Address	City	State	Zip Code
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Stroke Coordinator or Stroke Performance Improvement Lead

Phone	Email
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SIGNATURE – Authorized	Title	Date Signed
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To participate please complete, sign, and return this memorandum of understanding to:

Dot Bluma, BSN, RN, CPHQ
Stroke Project Specialist
MetaStar, Inc.
2909 Landmark Place
Madison, WI 53713
FAX: 608-274-5008

You should retain a copy for your records. For more information, please contact Dot Bluma at dbluma@metastar.com or call 1-800-362-2320 Ext. 8203.