# STATE OF WISCONSIN DEPARTMENT OF HEALTH SERVICES

Division of Public Health F-03091 (09/2024)



### WISCONSIN COVERDELL STROKE COMMUNITY PARTNER AGREEMENT

This agreement represents our organization's interest in partnering with the Wisconsin Coverdell Stroke Program (Coverdell) to increase education and awareness on risk factors of stroke, the signs and symptoms of stroke, and the need to call 9-1-1 when symptoms appear. In addition, this represents a desire to work with Coverdell and its community-based colleagues to understand and address the social determinants of health that contribute to stroke and stroke disparities and inequities. **As a Coverdell Community Partner**, we agree to achieve the following and receive technical assistance from Coverdell staff **through June 29**, **2029** with an expectation of annual efforts related stroke care and education, as described below.

#### The benefits of participating as a Coverdell Community Partner include:

- Free stroke community education materials
- Networking and community of practice opportunities with other Coverdell Partners
- Technical assistance to answer questions regarding stroke and stroke prevention
- Invitations to stroke education opportunities
- Recognition on the state stroke program website

## Our organization agrees to take part in the following stroke-related activities:

- Assist in the creation of, distribute, and make available stroke community education materials
- Aim to participate in at least two community of practice opportunities annually to better inform the knowledge base of addressing social determinants of health and health inequities. Activities include:
  - Virtual meetings with fellow Coverdell Community Partners (bi-annual meeting)
  - o Bi-Annual Wisconsin Stroke Coalition meetings

## Please identify the sector(s) which you represent (check all that apply):

☐ Health	☐ Education	Law Enforcement	
Government	Business	☐ Youth	
☐ Parent/Family/Caregiver	☐ Media	☐ Human Services	
Religious Org	Service/Fraternal Org	☐ Community Activist/Volunteer	
Culture	☐ Housing and Development	☐ Sports and Recreation	
☐ Environment	☐ Agriculture	☐ Stroke Survivor	
Other:			
Please refer to <a href="https://ctb.ku.edu/en/table-of-contents/analyze/where-to-start/community-sectors/main">https://ctb.ku.edu/en/table-of-contents/analyze/where-to-start/community-sectors/main</a> for sector descriptions			
Organization Name (as should appear on Coverdell website)			
Street Address	City	State	ZIP Code
Primary Contact			
Phone	Email Address		
SIGNATURE – Primary Contact		Date Signed	

To participate return the complete, signed memorandum of understanding via email to <a href="mailto:dhscoverdellstroke@dhs.wisconsin.gov">dhscoverdellstroke@dhs.wisconsin.gov</a>

You should retain a copy for your records. For more information, please contact Chandler Hansen at <a href="mailto:chandler.hansen@dhs.wisconsin.gov">chandler.hansen@dhs.wisconsin.gov</a> or call 608-266-7311.