Public Health Collaboration to Identify Sustainable Stroke Awareness Activities

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OBJECTIVES

To pilot a stroke awareness partnership with local Councils on Aging (*COA*) and Aging Service Access Points (*ASAP*) aimed at:

- Increasing awareness of the warning signs of stroke and the need for emergent care.
- Learn about and address myths, misperceptions and barriers to accessing emergent care for warming signs of stroke.
- Identify promising activities to sustain stroke awareness within local elder serving agencies.

BACKGROUND / PURPOSE

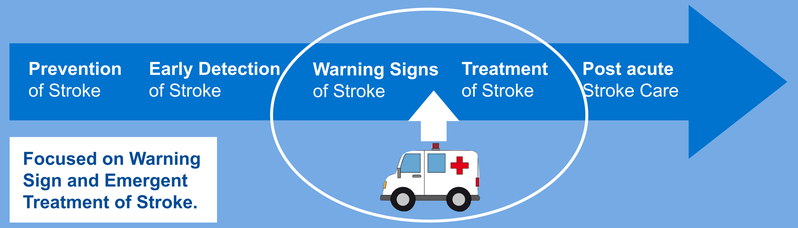
Acute care hospitals often unilaterally design community education programs that are not sustainable without continued hospital resources. As a consequence, the impact often wanes once the program ends.

We hypothesized that ***if we*** partnered with local elder serving agencies to help them pilot stroke education activities that best fit their communities, ***and we*** supported ongoing communication by sharing successes and challenges among the partners, ***then we*** would identify the most promising sustainable stroke education activities.

DESIGN / METHODS

A non-competitive request for proposals (RFP) was offered to all Councils on Aging and Aging Service Access Programs in Mount Auburn Hospital's (MAH) community benefit area. Each organization was asked to identify innovative ways to spread the ACT F.A.S.T. message to the elders they served. The Mount Auburn Hospital Stroke Team supported partner activities by facilitating discussions, providing education and training, and sharing resources and tools. Partners were given $2,000 as compensation for staff time to design and pilot new stroke awareness activities.

Throughout the grant cycle Mount Auburn Hospital served as a liaison between partners, sharing successes and challenges. At the end of the year partners evaluated their activities and provided input into possible next steps.



PARTNERS

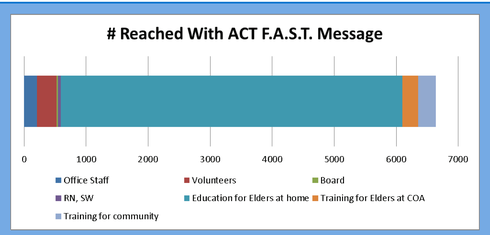
Councils on Aging

- Arlington
- Belmont
- Cambridge
- Somerville
- Waltham
- Watertown

Aging Services Access Points

- Minuteman Senior Services
- Springwell
- Somerville Cambridge Elder Services

RESULTS- # REACHED



RESULTS - INNOVATIVE IDEAS

Partner organizations piloted many innovative stroke education activities including:

Trainings	Communications	Materials
Meals on Wheels Drivers	Client Billing	Magnets
Congregate Meals Staff	Printed and Electronic Newsletters	Lanyard Cards
Ombudsman	Intake Packets	Table Tents
Volunteers	Facebook and Twitter	Posters
Staff	Public Service Announcements	Brochures
Board Members	Local Cable TV Segments	Wallet Cards

ACKNOWLEDGEMENTS

Mount Auburn Stroke Team: Gioacchino Curiale, M.D., Nancy Couts, M.A., S.L.P.

RESULTS - MYTHS

Calling 911 is just a fast ride

What we learned:
All partners reported that elders had significant aversion to calling an ambulance.

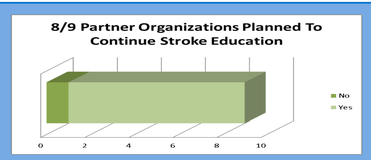
What we did:
Partnered with local fire and ambulance companies to provide ambulance tours. Changed education to highlight that medical care begins in the ambulance where there is contact between the ambulance staff and ED staff.

Stroke symptoms have to be bilateral

What we learned:
Participants thought that stroke symptoms had to affect both arms or both legs in order to call 911.

What we did:
Changed educational presentations to emphasize that unilateral symptoms are a warning sign of stroke.

SUSTAINABILITY



CONCLUSION

This is an observational study. Percentage of patients who arrived at MAH via EMS from home increased from 63.7% in 2016 to 69.3% in 2017. This increase and other conclusions cannot be attributed to the project's impact however the strategy does shows promise.

This model that combined a non-competitive RFP with minimal funds and hospital support resulted in effective partnerships to increase stroke awareness and identify misunderstandings and barriers. *"Micro grants such as this really assists COA's ability to reach out and address specific health issues. Thank you."* COA Director.

Partnering with community members to address community education has been successful in the short term. While the long term effectiveness of this model remains to be seen, this pilot project has identified key elements of a sustainable hospital and community shared approach to ongoing stroke education.