

Texas Cardiovascular Disease and Stroke Partnership Partner Profile

Thank you for your interest in the Texas Cardiovascular Disease and Stroke Partnership. We hope you decide to join and look forward to working with you!

The Texas Cardiovascular Disease and Stroke Partnership is a group of individuals and organizations working together to achieve a common goal:

To reduce premature death from CVD and stroke, as well as, to improve the quality of life for Texans by implementing the Texas Plan to Reduce Cardiovascular Disease and Stroke (Plan), and to continue to assess the burden of these diseases in Texas and to revise the Plan using a system wide approach.

Your participation in the Partnership offers you many benefits including:

- Increased awareness of the burden of CVD and stroke in Texas and what national, state, and local organizations are doing to address the problem.
- Access to an organized networking forum of Texas organizations working to address the state's CVD burden.
- Ability to serve on state-level committees to help implement the *Texas Plan to Reduce Cardiovascular Disease and Stroke*.

Please help us get to know you and understand your level of interest by providing the following information. Your information will only be used for Partnership purposes.

Name, Title, & Credentials:

Organization, Department or Program, Address, City, Zip and County:

Phone, Email & Organization Website:

Type of Organization

- Public State Local Regional Non-Profit For-Profit Entity
- Private
- I am not affiliated with an organization. I am interested in joining as an individual/citizen

Background

- Nurse Physician Health Care Professional Academic Sector
- Pharmacist Pharmaceutical Medical- Other Health Educator
- Dietician Physical Activity/Physical Rehab School Health/Youth
- Elderly/Disabled Worksite Wellness Public Health Professional
- Communication/Information Specialist Media Business Community
- Volunteer /Advocacy Cardiovascular Disease Survivor Stroke Survivor
- Other:

List the counties your organization serves

If you belong to an organization/program, please list the services your program provides related to CVD and stroke. (Click all that apply)

List of Services

- Diabetes Physical Activity Nutrition Stroke Cardiovascular Disease
- Worksite Wellness Tobacco Medication Assistance Rehabilitation
- Transportation Other:

Description of Service:

How did you hear about the Partnership?

- Website Colleague List Serve
 Other (please explain):

Choose at least one Goal Committee you would like to join.

- Goal I: Strategies that Support/Reinforce Healthy Behavior**
To establish and promote environments that support the prevention of heart disease and stroke through healthy eating, daily physical activity and tobacco-free lifestyles for all Texans, with an emphasis on access to resources and priority populations.
- Goal II: Million Hearts: Community-Clinical Linkage Enhancement**
To promote partnerships between clinical and community groups in Texas to provide enhanced and coordinated patient care.
- Goal III: Million Hearts: Health Systems Interventions**
To promote capacity and infrastructure changes within the health delivery system to effectively prevent, treat, and manage CVD and stroke for all Texans.
- Goal IV: Surveillance and Epidemiology**
To collect comprehensive CVD and stroke data that are readily available to assess, monitor and describe the burden of CVD and stroke in Texas.
*Note: Surveillance and epidemiology is embedded in all of the State Plan objectives in order to inform priority areas and targets.

Acknowledgement/ Agreement

I agree to have my contact and organization information included in the Texas Cardiovascular Disease and Stroke Partnership Resource Directory. I understand the Texas Cardiovascular Disease and Stroke Partnership Resource Directory will be disseminated to individuals and organizations across the state of Texas.

The meetings and activities of the Partnership will promote improvements of quality in the prevention and treatment of cardiovascular disease and stroke and not a specific proprietary business or commercial interest of any entity. Members participating in any Partnership meeting or activity that may present a personal or business related conflict of interest will disclose the conflict of interest on a Conflict of Interest Disclosure form. Members will recuse themselves from decision making when a conflict of interest exists.

Submission of this form indicates that you understand and agree with the above statements and that you subscribe to the common goal of the Partnership.

