An Advocacy Plan for FAST in Australia

This plan outlines work the National Stroke Foundation undertook with a successful outcome in 2013

• What do we want? (goals and objectives)

Funding of \$2million AUD for the delivery of the FAST campaign across Australia for one year

- Who can give it to us? (key decision makers)
 - Federal Minister of Health
 - Department of Health (Head of Chronic Disease Branch)
- What do they need to hear? (messages)
 - The burden of stroke in Australia (how many, how much it costs, level of disability)
 - The importance of rapid assessment and treatment and impacts of acute therapies on outcomes, cost and length of stay
 - Levels of ignorance of the signs of stroke (from our survey of the community) and the impact of this on early presentation to hospital (from our National Stroke Audit)
 - The effectiveness of a FAST Campaign in getting people to understand the signs of stroke and dial 000 (from published studies and from our pilot of the FAST Campaign in regional NSW)
 - The cost of a campaign and how we will deliver it
 - Our plans for engaging partners to help us spread the message in a cost effective way and make health dollars go further
 - Successes in other countries where a FAST Campaign has been run (UK)
- Who do they need to hear it from? (influencers, coalitions, alliances)
 - The National Stroke Foundation (us)
 - Key clinical leaders (Stroke Society of Australasia)
 - Survivors who have and have not received acute therapies
 - The Australian Stroke Coalition
 - People within the Department of Health
- How do we get them to hear it? (delivery)
 - Write to Minister outlining the proposal and requesting a meeting
 - Meet with Department of Health staff to improve their understanding of the proposal
 - Meet with Minister and Ministerial staff to outline proposal. Take stroke survivors to this meeting so they can talk to the importance of the FAST Campaign
 - Talk to other MPs who can also reinforce the importance of the Campaign to the Minister (Parliamentary Friends of Heart and Stroke group)
- What have we got? (resources; strengths)

We had good data for the effectiveness of FAST in Australia. This included survey data measuring signs of stroke amongst the general public, Audit data demonstrating how many people did not arrive in time for acute treatments, stroke relationships with key people who could join us to make a strong united voice, results from a small pilot we ran in a regional part of NSW demonstrating that when we advertised, we saw a shift in knowledge of signs of stroke

• What do we need to develop? (challenges; gaps)

When we began this work we did not have good data on the cost effectiveness of a FAST

Campaign so we developed this over the time it took to implement the Advocacy Plan

• How do we begin? (first steps)

Our first steps was to develop a business case for the FAST funding – using all our arguments outlined in Step 2 of this plan

• How will we know it's working, or not working? (evaluation)

We measured success by the level of interest the Minister showed for the program, the number of conversations we were able to have about the proposal, the number of MPs we had joining us in our advocacy efforts and talking the Minister.

Key challenges and risks

The advocacy work we undertook to achieve FAST funding took some time, during which we had a change of Minister. We were also concerned we would have an election in the middle and have another Minister, or a new Government altogether.

We managed this by making sure we were talking to both sides of Government, and when there was a new Minister, we met quickly with the Ministerial staff to provide briefings. Including the health department staff in our early conversations helped as they stayed stable while changes happened at the Ministerial level