

Advancing Million Hearts® : AHA and State Heart Disease and Stroke Partners Working Together in Utah

June 06, 2019 – 8:30 AM to 3:00 PM MDT
Library Viridian Event Center
8030 South 1825 West
West Jordan, Utah 84088

8:30 am – Networking
9:00 am – Meeting Starts



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Welcome and Opening Remarks

JOHN CLYMER
Executive Director
National Forum for Heart Disease and Stroke Prevention
Co-chair, Million Hearts® Collaboration



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Spending on healthcare vs. Investing in health



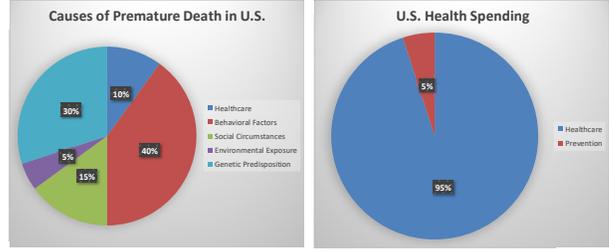
In OECD, for every \$1 spent on health care, about \$2 is spent on social services
In the US, for \$1 spent on health care, about 55 cents is spent on social services

NATIONAL FORUM
FOR HEART DISEASE & STROKE PREVENTION

3 **We Convene. We spark conversation. We accelerate collaboration.**

3

Causes of Premature Death in U.S. & U.S. Health Spending



NATIONAL FORUM
FOR HEART DISEASE & STROKE PREVENTION

4 **We Convene. We spark conversation. We accelerate collaboration.**

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Overview of the Day

JULIE HARVILL
Operations Manager, Million Hearts® Collaboration
American Heart Association



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Million Hearts® in Action (2013-2019)

Million Hearts® Participating States



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Purpose and Outcomes

Meeting Purpose:
Connecting staff from AHA Affiliates, state health departments and other state and local heart disease and stroke prevention partners to establish and engage in meaningful relationships around Million Hearts® efforts and identify strategies for Million Hearts® priorities.

Meeting Outcomes:
Attendees will have expanded their knowledge of evidence-based programs, collaboration strategies, tools, resources and connections to align programs and new initiatives that support Million Hearts®.

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Agenda

- Welcome
- Overview of the Day
- Utah Million Hearts® Coalition Overview
- Introductions
- Million Hearts® 2022 Overview and Update
- Utah DOH Health Priorities that Align with MH

- Comagine Health Priorities that Align with MH
- AHA Programs and Resources that Align with MH
- Finding Connections and Alignments

- Lunch
- Afternoon Breakouts / Facilitated Discussions (x3)

- Group Report Outs and Next Steps
- Evaluation and Feedback Process
- Wrap up / Adjourn

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Utah Million Hearts® Coalition Overview

<p>JOHN STULIGROSS Cardiovascular and Health Systems Coordinator Utah Department of Health</p>	<p>EDWIN ESPINEL Healthy Living Through Environment, Policy & Improved Clinical Care Utah Department of Health</p>
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OVERVIEW

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The mission of the coalition is to prevent heart attacks and strokes in Utah through improved clinical care and accurate blood pressure measurement and control in health care settings and at home.

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Million Hearts Coalition



Work groups:

1. The Million Hearts Award Workgroup
2. Education/Resources Workgroup

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**Utah Million Hearts
Excellence in Blood Pressure
Measurement and Control Award**



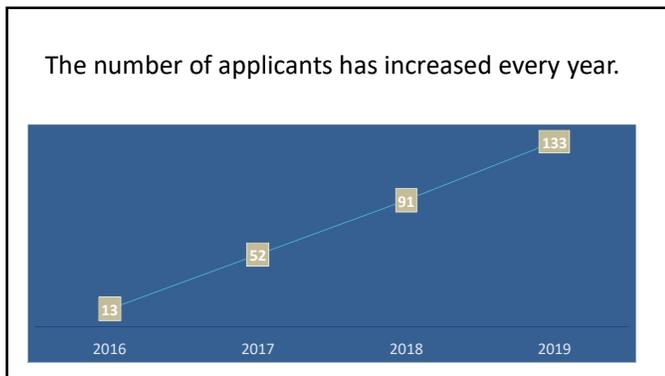
Goal: recognize outstanding Champion Clinics in Blood Pressure Management and Hypertension Control

Launched in 2016

All applicants receive \$500 stipend

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Preliminary Analysis

- Proportion of awards that were Silver/Gold/Platinum increased substantially in 2019
- The average clinic blood pressure control rate has increased each year.
- A large percentage of clinics that reapplied improved their control rate.

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Million Hearts Coalition – Education & Resources
<http://www.healthinsight.org/bloodpressure>

Resources for Clinic Staff

- Accounts/Hypertension Measurement and Diagnosis
- Training Staff
- Hypertension Treatment, Protocols and Algorithms
- Clinic Policies

Hypertension Diagnosis and Treatment

Utah Million Hearts Coalition

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UDOH Role with Million Hearts

Convene work groups

1. The Million Hearts Award Workgroup
2. Education/Resources Workgroup

Fund Million Hearts award stipend

Coordinate with partners statewide

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THANK YOU!

Edwin Espinel
eespinel@Utah.gov
 801-538-6605

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Introductions

JOHN BARTKUS
 Principal Program Manager
 Pensivia

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Introductions

Name & Organization

“What excites me about my role in heart disease and stroke prevention is ...”
(One Sentence)

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Million Hearts® 2022 Overview and Update

TOM KEANE
 Division of Heart Disease and Stroke Prevention
 National Center for Chronic Disease Prevention and Health Promotion
 Centers for Disease Control and Prevention (CDC)

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Preventing 1 Million Heart Attacks and Strokes by 2022

Tom Keane, JD, MPA
Acting Policy & Partnerships Lead
Division for Heart Disease and Stroke Prevention
Centers for Disease Control and Prevention



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Million Hearts® 2022

- **Aim:** Prevent 1 million—or more—heart attacks and strokes by 2022
- National initiative co-led by:
 - Centers for Disease Control and Prevention (CDC)
 - Centers for Medicare & Medicaid Services (CMS)
- Partners across federal and state agencies and private organizations



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Heart Disease and Stroke in the U.S.

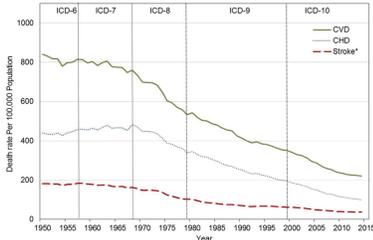
- More than **1.5 million** people in the U.S. suffer from heart attacks and strokes per year¹
- More than **800,000** deaths per year in the U.S. from cardiovascular disease (CVD)¹
- CVD costs the U.S. **hundreds of billions** of dollars per year¹
- CVD is the greatest contributor to racial disparities in life expectancy²

References
1. Benjamin EJ, Blaha MJ, Chiuve SE, Cushman M, Das SR, Deo R, et al. Heart Disease and Stroke Statistics—2017 Update: A Report From the American Heart Association. *Circulation*. 2017;135(10):e146–603.
2. Kochanek KD, Arias E, Anderson RN. How did cause of death contribute to racial differences in life expectancy in the United States in 2010? *NCHS data brief*, no. 125. Hyattsville, MD: National Center for Health Statistics; 2013.



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Heart Disease and Stroke Trends 1950–2015

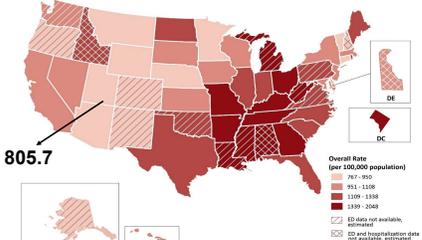


Mensah GA, Wei GS, Sorlie PD, Fine LJ, Rosenberg Y, Kaufmann PG, et al. Decline in cardiovascular mortality: possible causes and implications. *Circ Res*. 2011;125:366–80.



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Million Hearts-preventable event rates among adults aged ≥18 years by state, 2016



805.7

Overall Rate (per 100,000 population)
747 - 950
951 - 1100
1101 - 1300
1301 - 2048

Data Sources: Healthcare Cost and Utilization Project data (2016), National Vital Statistics mortality data (2016), Ritchey MD, Wat HK, Owens PL, Wright JS. State-level Variation in Non-fatal and Fatal Heart Disease and Stroke Events Targeted for Prevention by Million Hearts 2022. *MMWR*. 2018;67(35):974-982.



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Million Hearts® State Profile: Utah

2016 Values*

Treat-and-Release ED Visit Rate	Acute Hospitalizations			Mortality Rate
	Rate	Cost, in US\$ (2016) billions	Mean cost (US\$) per event	
116.6	537.8	0.17	19,859	90

Estimated 2017–2021 Values Without Intervention

Treat-and-Release ED Visits (thousands)	Acute Hospitalizations (thousands)	Deaths (thousands)	Total Mutually Exclusive Events (thousands)	Expected Hospitalization Costs, in US\$ (2016) billions
11.6	53.5	14.6	79.8	0.9

*Rates are per 100,000 population, standardized, by age, to the 2012 US Census population. ED: emergency department.
Ritchey MD, Wat HK, Owens PL, Wright JS. State-level Variation in Non-fatal and Fatal Heart Disease and Stroke Events Targeted for Prevention by Million Hearts 2022. *MMWR*. 2018;67(35):974-982.



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What this means for Utah

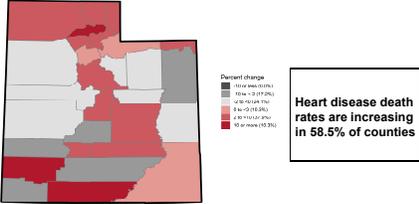
- We project **79,800** “Million Hearts preventable events” that will occur in UT if we do nothing
- 6% reduction of those events = **4,788 events** we hope UT will prevent



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County-level death rates

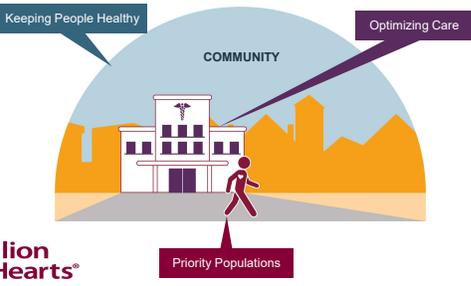
County-level percent change in heart disease death rates, Utah, Ages 35-64, 2010-2015




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Million Hearts® 2022

Aim: Prevent 1 Million Heart Attacks and Strokes in 5 Years



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Million Hearts® 2022

Priorities

Keeping People Healthy	Optimizing Care
Reduce Sodium Intake	Improve ABCS*
Decrease Tobacco Use	Increase Use of Cardiac Rehab
Increase Physical Activity	Engage Patients in Heart-Healthy Behaviors

Improving Outcomes for Priority Populations

Blacks/African Americans with hypertension
35- to 64-year-olds
People who have had a heart attack or stroke
People with mental and/or substance use disorders

*Aqilin use when appropriate, Blood pressure control, Cholesterol management, Smoking cessation



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Keeping People Healthy

Goals	Effective Public Health Strategies
Reduce Sodium Intake Target: 20%	<ul style="list-style-type: none"> • Enhance consumers’ options for lower sodium foods • Institute healthy food procurement and nutrition policies
Decrease Tobacco Use Target: 20%	<ul style="list-style-type: none"> • Enact smoke-free space policies that include e-cigarettes • Use pricing approaches • Conduct mass media campaigns
Increase Physical Activity Target: 20% (Reduction of inactivity)	<ul style="list-style-type: none"> • Create or enhance access to places for physical activity • Design communities and streets that support physical activity • Develop and promote peer support programs



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Optimizing Care

Goals	Effective Health Care Strategies
Improve ABCS* Targets: 90%	<p style="color: red; font-weight: bold; font-size: small;">High Performers Excel in the Use of...</p> <ul style="list-style-type: none"> • Teams—including pharmacists, nurses, community health workers, and cardiac rehab professionals • Technology—decision support, patient portals, e- and default referrals, registries, and algorithms to find gaps in care • Processes—treatment protocols; daily huddles; ABCS scorecards; proactive outreach; finding patients with undiagnosed high BP, high cholesterol, or tobacco use • Patient and Family Supports—training in home blood pressure monitoring; problem-solving in medication adherence; counseling on nutrition, physical activity, tobacco use, risks of particulate matter; referral to community-based physical activity programs and cardiac rehab
Increase Use of Cardiac Rehab Target: 70%	
Engage Patients in Heart-Healthy Behaviors Targets: TBD	

*Aqilin use when appropriate, Blood pressure control, Cholesterol management, Smoking cessation



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Improving Outcomes for Priority Populations

Population	Intervention Needs	Strategies
Blacks/African Americans with hypertension	<ul style="list-style-type: none"> Improving hypertension control 	<ul style="list-style-type: none"> Targeted protocols Medication adherence strategies
35- to 64-year-olds	<ul style="list-style-type: none"> Improving HTN control and statin use Decreasing physical inactivity 	<ul style="list-style-type: none"> Targeted protocols Community-based program enrollment
People who have had a heart attack or stroke	<ul style="list-style-type: none"> Increasing cardiac rehab referral and participation Avoiding exposure to particulate matter 	<ul style="list-style-type: none"> Automated referrals, hospital CR liaisons, referrals to convenient locations Air Quality Index tools
People with mental and/or substance use disorders	<ul style="list-style-type: none"> Reducing tobacco use 	<ul style="list-style-type: none"> Integrating tobacco cessation into behavioral health treatment Tobacco-free mental health and substance use treatment campuses Tailored quitline protocols



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Million Hearts® Resources and Tools

- Action Guides**—Hypertension control; Self-measured blood pressure monitoring (SMBP); Tobacco cessation; Medication adherence
- Protocols**—Hypertension treatment; Tobacco cessation; Cholesterol management
- Tools**—Hypertension prevalence estimator; ASCVD risk estimator
- Messages and Resources**—Undiagnosed Hypertension, Medication Adherence, Health IT, SMBP, Particle Pollution, Physical Activity, Tobacco Use
- Clinical Quality Measures**
- Consumer Resources and Tools**



Million Hearts® 2022 Website: <https://millionhearts.hhs.gov/>

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Stay Connected

- Million Hearts® e-Update Newsletter
- Million Hearts® on Facebook and Twitter
- Million Hearts® Website
- Million Hearts® for Clinicians Microsite



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Million Hearts® for Clinicians Microsite

- Features Million Hearts® protocols, action guides, and other QI tools
- Syndicates **LIVE** Million Hearts® on your website for your clinical audience
- Requires a small amount of HTML code—customizable by color and responsive to layouts and screen sizes
- Content is free, cleared, and continuously maintained by CDC



Available at <https://tools.cdc.gov/medialibrary/index.aspx#mkcsh6427917>



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Million Hearts® Hospital/ Health System Recognition Program

Launching Summer 2019



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Overview

This program will recognize clinical institutions working systematically to improve the cardiovascular health of the population & communities they serve by:

- Keeping People Healthy
- Optimizing Care
- Improving Outcomes for Priority Populations
- Innovating for Health

Applicants must address a *minimum of one* strategy in at least *three of the four* priority areas



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Application Process

Applicants can be recognized for— *committing, implementing, or achieving*— for each strategy they intend to address

- *Committing* – no data required other than your commitment to implement
- *Implementing* – must submit the data per strategy listed as “Required attestation for those implementing”
- *Achieving* – must submit the data per strategy listed as “Recommended outcomes for those achieving results”



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Application Process

- Applications will be reviewed on a quarterly basis
- Launching late summer 2019!
- Achieving a *Million Hearts® Hospital / Health System* designation signals a commitment to not only clinical quality, but population health overall
- For more information, please email Erica Hamilton at nwq2@cdc.gov



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Utah Department of Health Priorities that Align with Million Hearts®

JOHN STULIGROSS
Cardiovascular and Health Systems Coordinator
Utah Department of Health



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UTAH DEPARTMENT OF
HEALTH

Environment, Policy, and Improved Clinical Care
(EPICC)

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UTAH DEPARTMENT OF
HEALTH

Environment, Policy, and **Improved Clinical
Care** (EPICC)

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MISSION & VISION

The Utah Department of Health’s mission is to protect the public’s health through preventing avoidable illness, injury, disability, and premature death; assuring access to affordable, quality health care; and promoting healthy lifestyles.



Our vision is for Utah to be a place where *all* people can enjoy the best health possible, where *all* can live and thrive in healthy and safe communities.

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STRATEGIC PRIORITIES

Healthiest People – The people of Utah will be among the healthiest in the country.

Optimize Medicaid – Utah Medicaid will be a respected innovator in employing health care delivery and payment reforms that improve the health of Medicaid members and keep expenditure growth at a sustainable level.

A Great Organization – The UDOH will be recognized as a leader in government and public health for its excellent performance. The organization will continue to grow its ability to attract, retain, and value the best professionals and public servants.

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Focus Areas

Conditions

- Diabetes, Hypertension, Obesity

Interventions

- “Community-Clinical Linkages”
- Clinical Interventions
- Physical activity, nutrition, schools

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Funding



CDC
CENTERS FOR DISEASE
CONTROL AND PREVENTION

Goal: Increase Public Health and Health System Partnerships to Solve Hypertension & Diabetes

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Hypertension (HTN) & Diabetes

- 68.3% of diabetic adults also had HTN
- 20.1% with HTN also had diabetes

About 105,000 Utah adults had both diabetes and hypertension

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Clinical Interventions



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Clinical Interventions

- ▲ EHR capacity
- ▲ Self monitoring BP
- ▲ Team-Based Care: Rx, RD, CHW
- ▲ Telehealth technology
- ▼ Hypertension rates / % out of control

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How we do it

- Local Health Departments
- RD pilots, survey
- Pharmacy work and research
- Health Plan Partnership
- Million Hearts Coalition

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Our Role



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Facilitating Million Hearts Coalition



UDOH Role with Million Hearts
 Convene work groups
 Fund Million Hearts award stipend
 Coordinate partners statewide

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THANK YOU!

Web Address	Social Media Handle	Social Media Handle
		

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Break

Resume at 10:40am



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Comagine Health Priorities that Align with Million Hearts®

KATHERINE LUKE Project Manager / Utah Outpatient Services Comagine Health	REBECCA WILSON Senior Project Manager Comagine Health
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Comagine Health

Reimagining health care, together.

Priorities and Alignment with Million Hearts

Rebecca Wilson
Senior Project Manager

Katherine Luke
Project Manager

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Who is Comagine Health?

Mission Statement:
Together with our partners, we work to improve health and create a better health care system so that people and communities will flourish.

QIN/QIO for Idaho, Nevada, New Mexico, Oregon, Utah and Washington



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Who is Comagine Health?

Formerly Qualis Health and HealthInsight, we are a national, nonprofit, health care consulting firm.

We work with patients, providers, payers and other stakeholders to reimagine, redesign and implement sustainable improvements in the health care system.

Our clients are federal, state and local government agencies, health plans and providers, and foundations and other privately funded groups.

Organizations include the Centers for Medicare & Medicaid Services, the Agency for Healthcare Research and Quality, the Centers for Disease Control and Prevention, the U.S. Bureau of Justice Assistance, the National Institute on Drug Abuse, the Pew Charitable Trusts and Medicaid agencies throughout the U.S.



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Past Cardiac Work

2014-2019 Key Results and Impact

- Member of the Utah Million Hearts Coalition since 2014
- 1,060 people participated in monthly cardiac learning and action network activities through QIO contract
- 73 percent of recruited outpatient practices implemented hypertension protocols, 78 percent of home health agencies
- System level cardiac reporting, benchmarking and QI interventions with over 60 clinics.




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Coalition Contributions

- Host of the Utah Million Hearts Coalition website and resources
- Medicare data, vital patient population
- Quality improvement expertise
- Data
- Relationships with clinics, hospitals and systems




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Comagine Priorities

Coordinate with existing community-based efforts and reach community stakeholders to form community coalitions that focus on improvement

- Improve behavioral health
- Increase patient safety
- Increase chronic disease self-management (cardiac and vascular health, diabetes)
- Increase quality of care transitions
- We will be evaluated and paid on the outcomes we achieve




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Cardiac Priorities

- Contribute to preventing one million cardiovascular events by 2024
- Achieve a 13.8 percent reduction in smoking prevalence among Medicare beneficiaries
- Provide **learning collaboratives and TA, scaled through ECHO and telehealth**, with a focus on team-based care, data-driven, continuous QI, and population health management (e.g., augmenting Million Hearts® collaboratives)
- **Use data-driven identification and reminders to at-risk patients** with chronic diseases and smoking cessation needs. We will pair HIT solutions such as EHR and phone apps (e.g. quitline apps) and plugins with provider workflow toolkits to address chronic diseases, many of which were developed and tested by Comagine Health
- **Continue initiation and support of community coalitions and PFACs** to better address barriers due to social determinants and facilitate patient activation and lifestyle change



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What is your top cardiac priority?




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Going Forward

- Continued partnership on aligned priorities
- Collaboration to identify care gaps and develop resources for providers that fill those gaps
- A joint effort to improve the cardiac health of all Utahns
- Ability to share resources with each other
- Joining forces will move us farther, faster!




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Questions?




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Comagine Health Contacts

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Katherine Luke
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Thank you

We look forward to working on cardiac health, together.

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American Heart Association Programs and Resources that Align with Million Hearts®

<p>MARC WATTERSON Director of Government Relations, Utah American Heart Association</p>	<p>JULIETTE MARTINEZ Affiliate Community Impact Consultant Western States Affiliate American Heart Association</p>
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AHA: OUR STORY

who we are & what we do

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American Heart Association.

Who we are
The American Heart Association/ American Stroke Association is not just a charity. We are crusaders, innovators, scientists and partners.

Our Mission
To be a relentless force for a world of longer, healthier lives.



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Trends in health improvements

- Part of the 2020 impact goal is to improve health by 20% - and we're currently at 3.95%.
- In adults, we are seeing improvements in smoking rates, physical activity, blood pressure, cholesterol and blood glucose.
- In kids, we see improvements in smoking rates, blood pressure and blood glucose.
- Our work in these areas is being offset by issues such as unhealthy diets and obesity rates.

	RECENT TRENDS IN IMPROVEMENT	ADULTS	KIDS
SMOKING	↑	↑	↑
HEALTHY DIET	↓	↓	↓
PHYSICAL ACTIVITY	↑	↓	↓
BMI	↓	↓	↓
BLOOD PRESSURE	↑	↑	↑
CHOLESTEROL	↑	↓	↓
BLOOD GLUCOSE	↑	↑	↑

Compared to NHANES 2007-2008 (Baseline), NHANES (2013-2016)

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Our levels of work



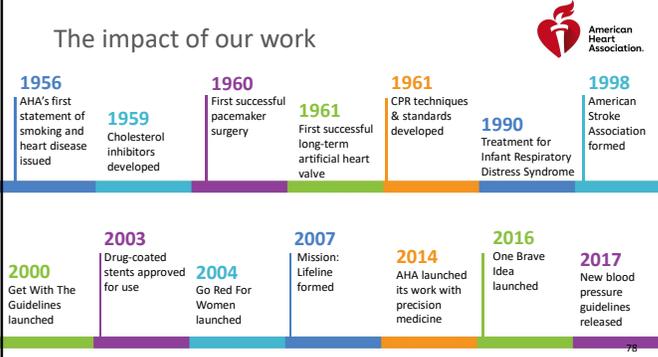
National - Dallas HQ
Education & awareness
Research management
Quality & science
Advocacy agenda
Strategic partnerships & alliances

Affiliate - 7 affiliates
Activate advocacy
State and affiliate education
Quality improvement
Regional projects

Local
Grassroots advocacy
Fundraising & education
Building partnerships
Recruiting volunteers
Community health

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The impact of our work



- 1956** AHA's first statement of smoking and heart disease issued
- 1959** Cholesterol inhibitors developed
- 1960** First successful pacemaker surgery
- 1961** First successful long-term artificial heart valve
- 1961** CPR techniques & standards developed
- 1990** Treatment for Infant Respiratory Distress Syndrome
- 1998** American Stroke Association formed
- 2000** Get With The Guidelines launched
- 2003** Drug-coated stents approved for use
- 2004** Go Red For Women launched
- 2007** Mission: Lifeline formed
- 2014** AHA launched its work with precision medicine
- 2016** One Brave Idea launched
- 2017** New blood pressure guidelines released

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Impact Strategy

BUILD AN EQUITABLE, SUSTAINABLE CULTURE OF HEALTH

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Partnering for healthier schools & early childhoods

Addressing determinants of health

Increasing physical activity

Improving healthy eating

Advancing research

Supporting patient recovery

Providing patient education & support

Improving care and response

Building healthy families

Delivering online learning

Engaging with the cause

ADVOCACY & EVENTS

Cultivating healthier workplaces

Improving HR and other health factors

Strengthening public policy

MARKET

American Heart Association

Building a culture of health in the community

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American Heart Association

Social factors and location influence our health

50 million Americans have to choose between paying rent and purchasing medicine, healthy foods and medical care.

26 million Americans live without access to healthy foods.

7.3 million people who suffer from cardiovascular disease are uninsured.

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WHAT MAKES UP A HEALTHY COMMUNITY?

 OPPORTUNITIES TO LIVE HEALTHY	 STRONG EDUCATION AND TECHNOLOGY	 A HEALTHY ENVIRONMENT
 A STRONG ECONOMY	 A SOLID CITY INFRASTRUCTURE	 AFFORDABLE AND SAFE HOUSING

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Advocacy

- Building relationships with decision-makers
- Standing up for things you believe in
- Making a difference through action
- Pleading a case and being persuasive
- Educating legislators, elected officials, and decision-makers about issues that promote health equity for all



American Heart Association

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2019 Legislative Agenda

- Safe Routes to Schools (Harrison)
- Tobacco Prevention and Cessation Funding (Ray)
- Healthy Food Incentive Program Funding (Handy and Davis)
- Tobacco to 21 (Eliason)

American Heart Association

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Improving Health




Check. Change. Control. & Target: BP

Nearly **86 million** Americans have high blood pressure.

500,000 + People have participated in Check. Change. Control. program to lower their blood pressure

Check. Change. Control. Cholesterol

40% of Americans have high cholesterol.

Our goal is to move **9 million** Americans to healthier cholesterol levels by 2020.

Heart-Check Mark

More than **900** products carry the Heart-Check mark



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Diabetes and Cardiovascular Disease



We're working alongside the American Diabetes Association and others to combat the growing threats from diabetes and cardiovascular diseases.

30 million American adults have diabetes, including 7.2 million who are undiagnosed.

On average, adults age 60 with both cardiovascular disease and diabetes are expected to live **12 fewer years.**



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Get With the Guidelines



Our suite of healthcare quality improvement programs helps ensure consistent application of the most recent scientific guidelines for heart disease and stroke treatment at more than 2,000 hospitals nationwide as well as in outpatient settings.



GET WITH THE GUIDELINES
STROKE



GET WITH THE GUIDELINES
RESUSCITATION



GET WITH THE GUIDELINES
CORONARY ARTERY DISEASE



GET WITH THE GUIDELINES
HEART FAILURE



GET WITH THE GUIDELINES
AFIB



GET WITH THE GUIDELINES

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American Heart Association.
Get With The Guidelines.



SAVE THE DATE

2019 WESTERN REGION

CARDIOVASCULAR & STROKE

SUMMIT

September 26 & 27, 2019

Hilton Seattle Airport & Conference Center
17620 International Blvd.
Seattle, WA 98188

13.25 CONTINUING EDUCATION CREDITS AVAILABLE FOR
PHYSICIANS, NURSES, PHARMACISTS & EMS PROFESSIONALS

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Contacts



- Acute/Inpatient Programs: *Jessica Rosing, Regional Quality Initiatives Director* - Jessica.Rosing@heart.org
- Advocacy: *Marc Watterson, State Government Relations Director* - Marc.Watterson@heart.org
- Ambulatory/Outpatient Programs and Community Activations: *Juliette Martinez, Community Impact Consultant* - Juliette.Martinez@heart.org

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THANK YOU
www.heart.org

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Finding Connections and Alignments

JOHN BARTKUS

Principal Program Manager
Pensavia



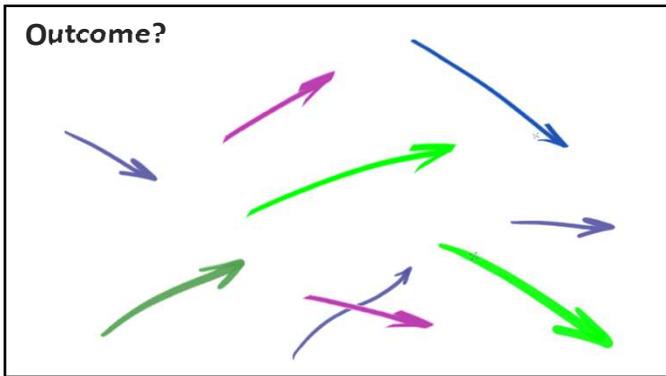
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Alignment

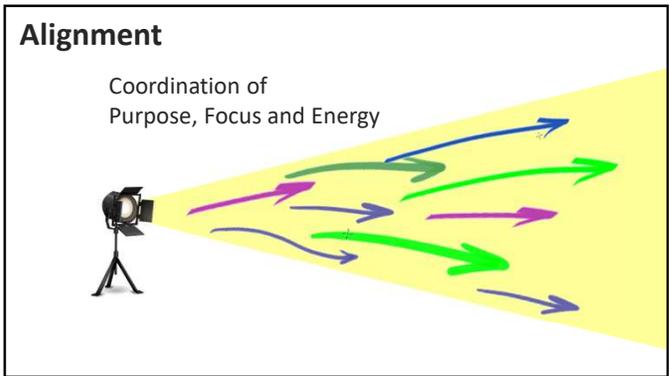
- “We’re all Arrows”
- Look around the room. Identify something to focus on.
- Close your eyes.
- Fully extend your arm to point at it. *(Watch out for your neighbors)*



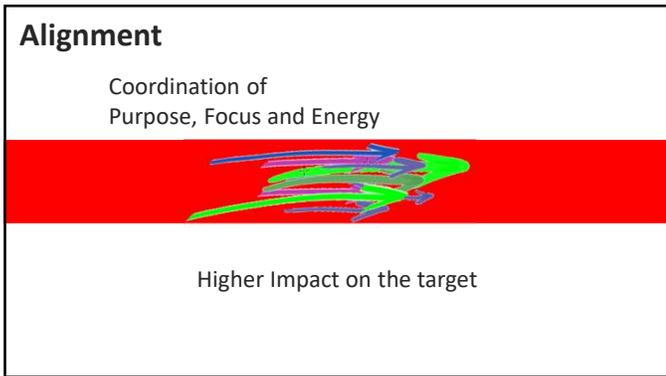
92



93



94



95

Alignment and Connections



One of the sheets in your packet is “My Alignment Notes”

- Opportunities I found to:
- * Align with My Organization’s work
 - * Align with Others’ work



96

Alignment Resources

Leverage your **Partner Profiles** which came from the pre-meeting questionnaire.

97

Alignment and Connections

Stand up and Engagement Time

Get together in Groups of Four
(People from other organizations that you do not know)

Take about 2 mins each to share what you're doing and where you may be looking for opportunities to connect and align efforts

98

Almost Lunch

Logistics – Preparing for Afternoon Workgroups

1	2	3
BP MONITORING (AOP/SMBP)	TEAM-BASED CARE	TREATMENT PROTOCOLS
Katherine Luke Miriam Patanian Linnea Fletcher Sharon Nelson	John Stulgross Juliette Martinez Tom Keane Katies Scholes	Edwin Espinel John Clymer Maralie Nordfelt Julie Harvill

ACTION: Before lunch is over, please add your name to the Sign-up sheet for the Workgroup you plan to attend/engage.

99

Really Really Close to Lunch

For the Low, Low Price of a Group Photo!

100

Lunch

Resume at 12:15 pm

101

Afternoon Breakouts / Facilitated Discussions

JOHN BARTKUS
 Principal Program Manager
 Pensivia

102

Breakout Workgroups

Topics based on your (collective) priorities from the pre-meeting questionnaire...

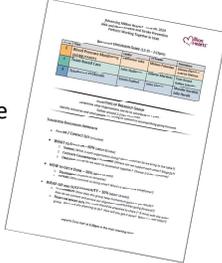
1 BP MONITORING (AOBP/SMBP)	2 TEAM-BASED CARE	3 TREATMENT PROTOCOLS
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103

Workgroup Objectives

- Determine what Organizations can do to contribute to a plan.
- Gather around 2-3 key objectives.
- Identify resources and what people are willing to commit to accomplishing going forward.




104

Suggested Workgroup Approach

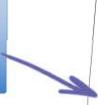
<p style="text-align: center;">WHAT</p> <ul style="list-style-type: none"> • CURRENT STATE / CONTEXT • CULTIVATING COLLABORATION / ALIGNMENT • OBJECTIVES 	<p style="text-align: center;">HOW</p> <ul style="list-style-type: none"> • DELIVERABLES • ACTIONS 	SUSTAINABILITY
---	---	-----------------------



105

Use this Conversation as a Vehicle to Identify & Cultivate Alignment

<p style="text-align: center;">WHAT</p> <ul style="list-style-type: none"> • CURRENT STATE / CONTEXT • CULTIVATING COLLABORATION / ALIGNMENT • OBJECTIVES 	<p style="text-align: center;">HOW</p> <ul style="list-style-type: none"> • DELIVERABLES • ACTIONS 	SUSTAINABILITY
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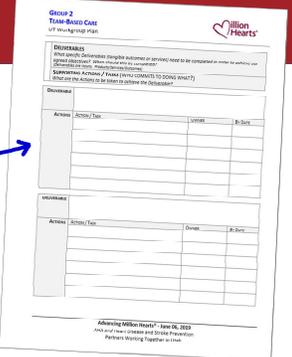




106

Capture Your Plan as a Group

<p style="text-align: center;">WHAT</p> <ul style="list-style-type: none"> • CURRENT STATE / CONTEXT • CULTIVATING COLLABORATION / ALIGNMENT • OBJECTIVES 	<p style="text-align: center;">HOW</p> <ul style="list-style-type: none"> • DELIVERABLES • ACTIONS 	SUSTAINABILITY
---	---	-----------------------




107

Breakout Workgroups

1 BP MONITORING (AOBP/SMBP)	2 TEAM-BASED CARE	3 TREATMENT PROTOCOLS
Katherine Luke Miriam Patanian Linnea Fletcher Sharon Nelson	John Stulgross Juliette Martinez Tom Keane Katies Scholes	Edwin Espinel John Clymer Maralie Nordfelt Julie Harvill
Viridian A (Here)	Viridian B	Viridian C

2:15 Adjourn Workgroup
2:20 Group Report Outs Begin (Main Room)



108

Group Report Outs

1	2	3
BP MONITORING (AOBP/SMBP)	TEAM-BASED CARE	TREATMENT PROTOCOLS
Katherine Luke Miriam Patanian Linnea Fletcher Sharon Nelson	John Stuligross Juliette Martinez Tom Keane Katie Scholes	Edwin Espinel John Clymer Maralie Nordfelt Julie Harvill

* Notetakers – Please send your filled-in template to Miriam Patanian or Julie Harvill ! *



109

Things Get Done in Utah !



110

Evaluation and Feedback Process

SHARON NELSON

Program Initiatives Manager, Million Hearts® Collaboration
American Heart Association



111

Wrap Up / Adjourn

SHARON NELSON

Program Initiatives Manager, Million Hearts® Collaboration
American Heart Association



112