Advancing Million Hearts®: AHA and Heart Disease and Stroke Prevention

Partners Working Together in Wyoming
Wolcott Galleria
136 S. Wolcott Street
Suite 203
Casper, WY 82601

June 20, 2018
Meeting Summary

The purpose of the meeting is to connect staff from the American Heart Association affiliate, 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.

Meeting objectives:

- Identify Million Hearts® 2022 focused activities for 2018
- Recognize Million Hearts® 2022 evidence-based and practice-based CVD prevention strategies and approaches
- List partner programs and resources that align with Million Hearts®
- Identify programs efforts that align and ways to work together
- Create a plan for follow-up to increase engagement
- Recognize key contacts within heart disease and stroke prevention

Million Hearts® 2022:

- Keeping people healthy
- Optimizing care
- Improving outcomes for priority populations
**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®.

**Key Themes:**
- Provide resources to help providers and empowering patients to address cardiovascular health and hypertension especially given the challenges of a rural state.
- Support non-physician team members such as pharmacists and community health workers.
- Increase utilization of cardiac rehab and addressing challenges such as cost/access issues.
- Establish best practices and streamline systems of care throughout the state.
- Support tobacco prevention and cessation policies and programs amongst adults and youth.

**Participants were asked to introduce themselves and state what they are excited about:**
- “Excited about the community focus and how to do prevention”
- “Seeing the work we are doing on a daily basis impacting the lives of people”
- “Working with rural communities and getting patients access to care”
- “Improving collaboration on the prevention side so that we have the same outcomes as collaboration on the treatment side”
- “The opportunities that collaboration offers us to impact people’s lives; the good news is that prevention is effective and there is so much we can do together”
- “Empowering the patients to take care of themselves”
- “Working on health policy in WY; there are many opportunities moving forward”
- “Putting a face to the name of the people we have been working with”
- “Exciting to see the work that is happening in the states and all the great work you do”
- “Hoping to get some knowledge and some tools to advance my work”
# Logistics – Preparing for Afternoon Workgroups

<table>
<thead>
<tr>
<th>1</th>
<th>LINKING COMMUNITIES TO CLINICAL SERVICES</th>
<th>2</th>
<th>HYPERTENSION CONTROL</th>
<th>3</th>
<th>TOBACCO CESSATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amanda Hubbard</td>
<td>Stevi Sy</td>
<td>Hannah Herold</td>
<td>Melody Bowar</td>
<td>Kristen Waters</td>
<td>Nickola Bratton</td>
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</tbody>
</table>

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

## GROUP 1: LINKING COMMUNITIES TO CLINICAL SERVICES

**Participants:**
- Rachael Settles
- David Wheeler
- Stacey Zeidler
- Debbie Hornor
- Maribel Frank
- Dian True
- Alison Yoenngberg
- Julieann Tanachion

**Discussion Leads:**
- Amanda Hubbard
- Stevi Sy

**Flip Chart Notes:**
- John Clymer
- Jill Ceitlin

**Notetaker:**
- Julia Schneider

## TOPIC AREAS
- Community health workers- certification/training and billing
- Pharmacists
- Financial survival but also good care- how to better serve their patients but also contain costs
- Access to care for rural patients
- Working with EMS
- Stroke systems of care
- Educating the community and how to better help with education
- Telehealth
- Supporting tribal communities and sharing lessons learned/success stories
- Parish nurses
- EMR interoperability

## DISCUSSION

**The WHAT**
What are the issues your organization is seeking to address?
What has been successful (strategies and practices)?
What are the key challenges?
Community health workers
Pharmacists
AHA—Working with hospitals on Get with the Guidelines; QI initiatives; corporate partners—better understand what is happening in the community and how to provide resources; “end to end solutions”—how to better connect and develop a continuum; Financial survival but also good care—how to better serve their patients but also contain costs WY Med Center—access to care for rural patients; working with EMS; stroke systems of care; educating the community and how to better help with education.

Community Health Workers—one of the largest programs is at Tribal Health—started with staff education and expanded that; collaboration with pharmacists through U of WY School of Pharmacy

U of WY Telehealth Network is a huge resource for the state. DPH has invested for licenses for providers across the state for Zoom—it’s encrypted and meets HIPAA. 250 providers have registered. Dr. Wheeler LOVES this program and gives a lot of credit to the state. Dr. Wheeler and Dr. Bush sit on the NW Regional Telehealth Regional Network. Has made life in WY much more manageable. Medicaid pays for all telehealth visits. Other than Medicaid, no one will pay for services in the home. Used Zoom in the clinic—the quality is amazing. A lot of rules around docs using this so there are some challenges. But this has been a great resource for such a rural state.

Working with pharmacy students to work with patients; working with director of pharmacy @medical center

Mountain Pacific is getting folks together to talk about resources in the community and how to get patients enrolled with insurance

Stress on caretakers and increased CVD in this population Lots of disconnected people in the communities of WY. Sense that most folks go to nursing homes—less family support

Challenge of travel to doctor appointments—lack of knowledge, money

Wyoming 211—question on whether this is being used anymore? Is there funding for this?

Grant that supports CHW/lifestyle coach to go out to tribal communities—has made a huge difference for the communities. These 2 women are also certified diabetes educators. Outcomes data is amazing—data should be coming out soon.

NASHP notes WY as not having any CHWs but this might not be the case. Are they certified?

AHA has done a lot of work with tribes. Inter-tribal event that has been native led held in OK but draws in several states. Debbie spoke to Admiral Meeks—which resources are tribes accessing; what are the best practices and successes that can be shared.

Circulate info on funds available via Seeds of Change

Faith community—parish nurses. Several trained in the state. Volunteer-based.

Medicaid expansion—private insurance in WY is very expensive compared to other states for several reasons Overwhelmed with EMRs; need to work with vendors; interoperability is a challenge—many years away from registry reporting being streamlined

Who else should be at the table:

Hospital in Douglas—bringing in people on community paramedicine

Primary Care Association—Jan Cartright. There are 6 FQHCs in the state

U of WY Family Practice Residence Clinics

What do we choose to focus on?
What would success look like for this work?
What objectives do we seek to accomplish?
Ability for CHWs and others to get paid depends on your license and status. If you work with a physician group and are under the supervision of a physician, you can bill under their name. Not sure if Medicaid pays for CHWs. Job descriptions; working with employers to make the case. Patient literacy would be covered if it’s part of the patients’ care plan. Could be Meals on Wheels – has to be 2 conditions like diabetes and hypertension. Finally seeing a small ROI. CMS launched new codes for people with mental health disorders. Requirements are difficult to meet- highly organized team and a lot of administrative burden. Mental health, primary care and FQHC partnered in one rural area to get this done.

Formal training for CHWs- program does exist; who provides certification? No one has wanted to take it on. What about a community college; or a hospital. Tribal health has their own training program. Someone has to employ the CHWs- people need to get paid: volunteerism does not work anymore. Parish nurses who have no budget do not succeed. We need the workers first; and then a defined structure. Critical access hospitals- offer professional development. PCNA can serve as role models for the quality care they are delivering.

Lindsay is Director of Public health nurses and is a good resource. Explore foundation funding: Myra Fox Skelton Foundation – Eric Munoz sits on the board- cardio thoracic surgeon.

The HOW

How do we accomplish this? What specific actions or tasks need to be carried out in order to complete each step?

Who can we increase awareness of existing or new resources?

How do we want to stay accountable to these plans?

Plan to meet again in the next month- follow up with Nicola

Training and support of CHWs

Support Telehealth throughout the state

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<tr>
<th>Action</th>
<th>Who</th>
<th>By When</th>
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<tbody>
<tr>
<td>Sharing Zoom license info through University of Wyoming</td>
<td>Dr. Wheeler to reach out to Corey Jenkins-Project coordinator for Wyoming Telehealth Network</td>
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<tr>
<td>Curriculum for CHW training</td>
<td>Dian True to follow up with Hannah Herold</td>
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<tr>
<td>Follow up with Mountain Pacific (QIO) on CHWs</td>
<td>Amanda Hubbard</td>
<td></td>
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<tr>
<td>Explore private foundation support for rural areas and identify a good grant writing</td>
<td>Debbie/AHA</td>
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<tr>
<td>Reach out to PCA (Jan) about CHWs</td>
<td>Amanda Hubbard</td>
<td></td>
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GROUP 2: HYPERTENSION CONTROL

Participants:
Brandi Wahlen                                          Matthew Guerttman
Trisha Thompson
## DISCUSSION

### The WHAT

**What are the issues your organization is seeking to address?**

**What has been successful (strategies and practices)?**

**What are the key challenges?**

**QIN/QIO:**
- Share resources with our contracted organizations
- Implemented chronic care management in 15 primary care clinics – focused on Medicare age, but will reach everyone. Clinics have hired care coordinators
  - Classes are offered for patients
  - Must have 2+ chronic conditions, be a Medicare beneficiary, work with care coordinator to establish a care plan, must meet for at least 20 minutes/month for the care coordinator to be able to bill for it
  - Involve community organizations
  - Use a HIPAA compliant platform to track the community resources patients use

**Wyoming Medical Center – Pulmonary and Cardiac Rehab:**
- Pulmonary rehab – take blood pressures before rehab to make sure they are in optimal range before exercise
- Teach them to take their blood pressure at home; verify

**Johnson County:**
- Walk-in blood pressures; compare manual BP to their home blood pressure machine
- Provide education around BP

**WY Department of Health:**
- Hypertension rates have been increasing over the last 10 years (23.3% from BRFSS 2005; 29.9% from BRFSS 2015)
- Increase in number of patients who have their hypertension under control during this same time period
- Quality care coordination – (Medicaid incentive-based payment program) – similar trends
- PCMHs: 57% with hypertension have it under control in 2005; now closer to 70%
- Plan to implement SMBP monitor loaner programs similar to NY
- Promote the Million Hearts SMBP toolkits

### THE WHAT

**What do we choose to focus on?**

**What would success look like for this work?**

**What objectives do we seek to accomplish?**

Cultivating collaboration – what opportunities are there?
- How can we get valuable resources and information to our patients?
How can we better support clinic staff?
- Training?
- Reduce time constraints?
- How can we gather information, collate it, present it?
- Can we focus on training on accurate blood pressure measurement?
  - Care managers/coordinators can educate on proper blood pressure measurement
  - Need to identify gaps in providing patient education
  - How do we address the gaps that exist currently in procuring blood pressure cuffs
    - Which blood pressure cuffs are recommended?
      [http://www.dableducational.org/sphygmomanometers/devices_2 sbpm.html](http://www.dableducational.org/sphygmomanometers/devices_2_sbpm.html)
  - There is also an AHA patient care / heart channel – has movies related to cardiac and diabetes education

The HOW
How do we accomplish this? What specific actions or tasks need to be carried out in order to complete each step?
How can we increase awareness of existing or new resources?
How do we want to stay accountable to these plans?
- BP cuff loaner program – would likely begin around January 2019
- Make resources available – cuffs and education
- Get the ear of payers to pay for cuffs
- Let providers (and the public) know that local health department can measure blood pressure
- QIO works with providers to work with their data
- Target BP – incentivizing providers for hypertension control rate (QUESTION FOR AHA: How many clinics are there in Target BP?)
- Million Hearts Hypertension Control Challenge – recognizes providers that have at least an 80% hypertension control rate
- Need to increase availability of resources – education for patient and provider, equipment, and medication
- Empower patients to continue monitoring blood pressure and encourage them to seek ongoing support
- Support physicians’ access to data to monitor blood pressure control in patient populations – improve controlled hypertension

SUSTAINABILITY
- Training manual / materials
- Data to benchmark and measure improved outcomes
- Show providers ROI
- Implement ongoing group communication
  - Chronic disease conference
- Development of chronic disease coalition (DOH can support this)

DELIVERABLE -
Increase availability of resources – education for patients and providers, equipment, and medication
Develop a train-the-trainer approach to improve consistent messaging about hypertension control

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<th>Action</th>
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<tr>
<td>Identify the content of the training that will coincide with the beginning of a blood pressure cuff loaner program</td>
<td>Hannah QIO Clinical setting partners</td>
<td>Mid-August</td>
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### GROUP 3: TOBACCO CESSATION

**Participants:**
Joe D’Eufemia  
Vitaliy Kroychik  

**Discussion Leads:**  
**Flip Chart Notes:**  
**Notetaker:** Robin Rinker

#### TOPIC AREAS

**AHA**
- Tobacco Tax $1
- Information – WQTP
- E-cigarettes  
  - Youth  
  - Messaging  
  - Harm reduction language – get rid of it
- Tax  
  - $1 minimum would lead to $43 million in the first year  
  - Coalition started – expanding to more tobacco prevention  
  - Key concepts  
    - Consistent messaging  
    - Grassroots groups  
    - Community engagement  
    - Champions

**Smoke-Free Laws**
- We have a coalition – statewide, not state-funded  
- Education – TPCP and MPHC  
- Grassroots – community engagement  
- Advocacy – ACS CAN, AHA, Citizenry
DISCUSSION

The WHAT
What are the issues your organization is seeking to address?
What has been successful (strategies and practices)?
What are the key challenges?

- AHA-focused on tobacco tax
- ACSCAN—cessation materials and line to call, in WY pushing people to state quitline
- Health Dept—chantix cessation rate much better than rest of the country
- Local prevention (PMO)—
- Tribal work—currently being discussed in state legislature. Lawmakers have used reservations as an excuse because they’re sovereign (no tax). Non-natives are supposed to be charged tax, but not happening. Discussion of state tax on reservations (happens in NM) with agreement between tribe and state-reservation gets portion of that money. Discussions continue—bill dropping in 2018 leg session to work with the tribes
  - Wyoming’s reservation houses two tribes, additional challenge of policies that work for both tribes
  - There are some opportunities, but must be led by tribes, and must be priority/need for them
- How do we raise a generation less inclines to smoke? How do we limit exposure to second hand smoke? Limit exposure for young people?
  - Young people do not think smoking is cool, but do not consider ecigs tobacco products. Juul—ecig that looks like memory stick from computer—equivalent to entire pack of cigarettes
- Wyoming has great data around tobacco between DOH and Wyoming Statistics and Analysis Center
  - PNA (also surveys student attitudes). Elective. Several districts have opted out, but more are re-electing because YRBS is no longer funded. Even years, 6-12 grades.
- Behavioral health—40%of quitline participants have behave health conditions. Want to quit at same rates, but outcomes are 8-10% points lower—trying to figure out why.
  - There are centers using harm reduction—encouraging people to pick up smoking.
  - One of side effects with Chantix is suicidal thoughts. But removed warning because there isn’t correlation, but patient and provider stigma
- E-cigarettes—RJ Reynolds is trying to strengthen harm reduction language in quitline through legislation—some is in place.
  - Wyoming has one of the most generous and comprehensive cessation treatment programs in the country. 3 months of free cessation
- Smoke free policies are better than taxes
  - No state general funds for cessation program. Now have just under $300,000 from state investments
  - After next biennium funding will look different. Spending a lot of money on quitline and media, but putting as much money in communities
  - With loss of PMO, will see changes in capacity at community level. Sustainability is challenging due to budget
- Tobacco 21: DOH, don’t see point in putting effort into this w/o tax or smokfree law
  - Difficult given WY politics, need impact data
- Media opportunities
Did have settlement and CDC funds for this, slowly reduced, must now use all CDC funds for media, sometimes some settlement funds. This year considering media for secondhand—targeting parents who smoke in front of children.

- Tobacco taskforce?
  - DoH cannot lead, but can play a role. Casper is political bell weather—other communities looking to Casper.
  - 28% of state covered by comprehensive smokefree laws—6 communities have comprehensive, 13 total have smokefree laws
  - How do we start conversation about smokefree again? A lot of restaurants and bars are independently smokefree even w/o law. Can we link to Tourism office? Tourism can connect small population across large state—common goal, connects all of WY—major economic driver.
  - How do we all get on same page? Rowing in same direction.
  - Did have coalition in 2003 to work on general tobacco issues, after RWJF funding ended, that group has ended. Have had several specific coalitions on tobacco related topics led by ACSCAN and AHA.
    - Exploring whether WY wants to do this again.

THE WHAT
What do we choose to focus on?
What would success look like for this work?
What objectives do we seek to accomplish?
  - Need a Champion in the state—lots of new young people running for local office
  - Tobacco taskforce statewide but not state-funded—one objective is going smokefree---AHA & ACSCAN
    - Currently have coalition focused on tobacco tax, but coming to terms with fact that that might never happen. What else do we do? ACSCAN optimistic
    - Action: consistent messaging about outcomes of tobacco tax
    - Create subworkgroups?
    - NB: Cessation is only paid for for the next 2 years—budget uncertain after next 2 years due to expiration of budget amendment

The HOW
How do we accomplish this? What specific actions or tasks need to be carried out in order to complete each step?
Who can we increase awareness of existing or new resources?
How do we want to stay accountable to these plans?

SUSTAINABILITY
  - Maintain statewide coalition
  - Enhance communications
  - Get on the same page
Pre-Meeting Survey Questions:

This survey was used to finalize the meeting agenda and presentations, and to provide you with the most valuable information for your work in heart disease and stroke prevention.

1. Organization Name:
2. Name:
3. What is your primary role/function within your organization?
4. Has your organization previously been involved in any Million Hearts® activities?
5. Does your organization currently use community health workers to do prevention and/or treatment for heart disease and stroke in Wyoming?
6. Does your organization currently work with community peri-medicine for prevention and/or treatment for heart disease and stroke in Wyoming?
7. Does your organization currently work on community pharmacy in Wyoming?
8. Does your organization currently work on tobacco cessation in Wyoming?
9. Does your organization currently work on self-management of blood pressure in Wyoming?
10. What does success look like at the end of the meeting?

Q2: Does your organization currently work on any Million Hearts® Initiatives?

Answer: 10 | Skipped: 1

[Graph showing the percentage of responses]

Powered by SurveyMonkey
Million Hearts® 2022
Robin Rinker, MPH, CHES
Health Communications Specialist
Division for Heart Disease and Stroke Prevention, CDC

The goal of Million Hearts is to prevent 1 million heart attacks, strokes, and other cardiovascular events. During the first 5-year phase of Million Hearts®, we made significant progress in many areas. And while final numbers will not be available until 2019, we estimate that up to half a million events may have been prevented from 2012-2016. With new strategies in place, we are hoping to build on our momentum over the next five years.

Million Hearts® 2022 is co-led by the Centers for Disease Control & Prevention and the Centers for Medicare and Medicaid Services. But it is carried out by a variety of partners across federal and state agencies, and private organizations. Million Hearts® provides a platform to shine light on a selection of evidence-based strategies for cardiovascular disease prevention, and it serves as a learning lab and repository of tools, protocols, and resources for partners to use to implement these strategies. The important thing to note, however, is that while Million Hearts® provides the platform, the strategies, the tools, protocols and resources, it’s the partners who are the ones really driving this initiative.
100% Federally Funded through CDC’s “State Public Health Actions to Prevent and Control Diabetes, Heart Disease, Obesity and Associated Risk Factors and Promote School Health” (known as 1305)

October 2018 through June 2023: Funded through “Improving the Health of Americans Through Prevention and Management of Diabetes and Heart Disease and Stroke” (known as 1815)

Priorities:

- Improve environments in worksites, schools, early childhood education services, state and local government agencies, and community settings to promote healthy behaviors.
- Improve the delivery and use of quality clinical and other health services aimed at preventing and managing high blood pressure and diabetes.
- Increase implementation of quality improvement processes in health systems.
- Increase use of team-based care in health systems.
- Increase links between community and clinical organizations to support prevention, self-management and control of diabetes, high blood pressure, and obesity.
- Improve ABCS, Engage Patients in Heart Healthy Behavior
- Integrated Pharmacy Project: Partnership with University of Wyoming School of Pharmacy; Enrolling pharmacists through the Practice-Based Research Network; Training on motivational interviewing, CDSME, and appropriate referrals to community resources; Use of Pharmacists’ Patient Care Process and Collaborative Practice Agreements
- Tobacco Prevention and Control- Increase Cessation; Decrease Youth Initiation
Engage providers: To improve patient care with evidence-based best practices

Encourage collaboration: Among providers and other community stakeholders

Empower patients: To take an active role in managing their health

Align with the Million Hearts® Initiative to improve preventive care measures, including aspirin use, blood pressure control, cholesterol management and smoking/tobacco education

Target disparate populations, including gender, racial and ethnic disparities and rural populations, to improve cardiac health

- Offer technical assistance on the cardiovascular measures submission for participating clinics
- Assist home health agencies with measures reporting through the Home Health Cardiovascular Data Registry
- Help clinics utilize EHRs for data analysis and performance improvement activities focused on clinical quality measures
American Heart Association/American Stroke Association Programs and Resources that Align with Million Hearts

Policy Priorities:

✓ Support efforts to increase active living and healthy eating through policy: SNAP; Every Student Succeeds Act

✓ Support policy that establishes best practices and streamlined protocols of care throughout the state: 911 Dispatch Training

✓ Support efforts to decrease tobacco use in Wyoming: Tobacco tax at a $1 minimum; smokefree laws; Tobacco 21; tobacco cessation funding

Resources:

- Heart Attack Risk Calculator www.cvriskcalculator.com
- AHA’s Smoking Cessation Tools and Resources
- Get with the Guidelines www.heart.org/quality
- My Life Check Health Assessment http://www.heart.org/HEARTORG/Conditions/My-Life-Check---Lifes-Simple-7_UCM_471453_Article.jsp#.WYynd4WcE2w
- Check, Change, Control: Blood Pressure http://www.heart.org/HEARTORG/Conditions/HighBloodPressure/HighBloodPressureTools/Resources/Find-a-Check-Change-Control-Program-Near-You_UCM_449325_Article.jsp#.WYynnoWcE2w
- Food and Beverage Tool Kit for a healthy food environment and policies http://www.heart.org/HEARTORG/HealthyLiving/WorkplaceHealth/EmployerResources/Healthy-Workplace-Food-and-Beverage-Toolkit_UCM_465195_Article.jsp#.WYynwlWcE2w
- Target BP: http://targetbp.org/
- EmPowered to Serve https://www.empoweredtoserve.org/
February is ‘Heart Month’ in Wyoming!

<table>
<thead>
<tr>
<th>Time</th>
<th>Agenda Item/Topic</th>
<th>Speaker/Facilitator</th>
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<tbody>
<tr>
<td>8:30 – 9:00 am</td>
<td>Partner Networking</td>
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<tr>
<td>9:00</td>
<td>Welcome</td>
<td>John Clymer&lt;br&gt;Executive Director&lt;br&gt;National Forum for Heart Disease and Stroke Prevention</td>
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<td></td>
<td>Overview of the Day</td>
<td>Julie Harvill&lt;br&gt;Executive Director&lt;br&gt;National Forum for Heart Disease and Stroke Prevention</td>
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<tr>
<td>9:05 – 9:40 am</td>
<td>Introductions&lt;br&gt;In one sentence, what excites you about your role in heart disease and stroke prevention?</td>
<td>John Bartkus&lt;br&gt;Pensivia</td>
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<tr>
<td>9:40 – 10:30am</td>
<td>Million Hearts® 2022&lt;br&gt;• Million Hearts® Accomplishments&lt;br&gt;• What must happen to prevent?&lt;br&gt;• 2018 Focus&lt;br&gt;Q and A/Group Interaction</td>
<td>Robin Rinker, MPH, CHES&lt;br&gt;Health Communications Specialist&lt;br&gt;Division for Heart Disease and Stroke Prevention</td>
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<td>10:30 – 10:45am</td>
<td>Break</td>
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<td>10:45 – 11:05am</td>
<td>Wyoming Department of Health address priorities that align with Million Hearts®.</td>
<td>Hannah Herold, MPH, MA, CHES&lt;br&gt;Chronic Disease Prevention Program Manager</td>
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<td>11:05 – 11:20am</td>
<td>Mountain-Pacific Quality Health address their work and alignment with Million Hearts®.</td>
<td>Nickola Bratton&lt;br&gt;AIM Lead</td>
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<td>11:20 – 11:35am</td>
<td>American Heart Association/American Stroke Association programs and resources that align with Million Hearts</td>
<td>Kristen Waters, Advocacy&lt;br&gt;Ben Leonard, QSI&lt;br&gt;Debbie Horner, Health Strategies</td>
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<tr>
<td>Time</td>
<td>Activity</td>
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<td>11:35 am – 12:15pm</td>
<td>Catered Lunch</td>
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<td>12:15 – 2:00pm</td>
<td>Afternoon Breakouts/Facilitated Discussions</td>
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<td></td>
<td>• Linking Communities to Clinical Services</td>
<td>John Bartkus</td>
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<td>(Community Health Worker, Community Paramedicine)</td>
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<td>• Engagement of Pharmacists</td>
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<td>• Hypertension Control</td>
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<td>• Tobacco Cessation</td>
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<td>2:00 – 2:30pm</td>
<td>Reports from Breakouts</td>
<td>John Bartkus</td>
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<td></td>
<td>• What are you planning to do?</td>
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<td>• How will you get it done?</td>
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<td>• What are the next steps?</td>
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<tr>
<td>2:00 – 2:30pm</td>
<td>Reports from Breakouts</td>
<td>John Bartkus</td>
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<tr>
<td>2:00 – 2:30pm</td>
<td>Plans for Follow-up/Next Interactions</td>
<td>John Bartkus</td>
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<tr>
<td>2:30 – 2:50 pm</td>
<td>Evaluation and Feedback Process</td>
<td>April Wallace, MHA</td>
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<td>Program Initiatives Manager</td>
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<td>2:50 – 2:55 pm</td>
<td>Evaluation and Feedback Process</td>
<td>April Wallace</td>
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<tr>
<td>2:55p.m.</td>
<td>Wrap Up</td>
<td>April Wallace</td>
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<tr>
<td>3:00p.m.</td>
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## Advancing Million Hearts®: AHA and Heart Disease and Stroke Prevention Partners Working Together in Wyoming

**June 20, 2018**

**Contact List**

<table>
<thead>
<tr>
<th>First Name</th>
<th>Last Name</th>
<th>Organization/Company</th>
<th>Job Title</th>
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<tbody>
<tr>
<td>Naomi</td>
<td>Amaha Gollnick</td>
<td>American Heart Association</td>
<td>Regional Vice President, Advocacy</td>
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<tr>
<td>John</td>
<td>Bartkus</td>
<td>Pensivia</td>
<td>Advocacy Program/Project Management Consultant</td>
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<tr>
<td>Melody</td>
<td>Bowar</td>
<td>Wyoming Medical Center</td>
<td>Stroke Coordinator</td>
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<tr>
<td>Nickola</td>
<td>Bratton</td>
<td>Mountain-Pacific Quality Health</td>
<td>Account Manager</td>
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<td>Jill</td>
<td>Ceitlin</td>
<td>American Heart Association</td>
<td>State and Community Advocacy Manager</td>
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<tr>
<td>John</td>
<td>Clymer</td>
<td>National Forum for Heart Disease &amp; Stroke Prevention</td>
<td>Executive Director</td>
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<td>Joe</td>
<td>D’Eufemia</td>
<td>Wyoming Dept of Health</td>
<td>Tobacco Prevention Program Manager</td>
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<td>Mica</td>
<td>Elmore</td>
<td>Wyoming Medical Center</td>
<td>Cardiovascular Service Line Coordinator</td>
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<td>Maribel</td>
<td>Frank</td>
<td>Wyoming Medical Center</td>
<td>AVP of Population Health &amp; Outreach</td>
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<td>Andy</td>
<td>Gienapp</td>
<td>Department of Health</td>
<td>EMS Manager</td>
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<td>Matthew</td>
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<td>Wyoming Physician Services</td>
<td>Director</td>
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<td>Julie</td>
<td>Harvill</td>
<td>American Heart Association</td>
<td>Operations Manager, Million Hearts Collaboration</td>
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<td>Hannah</td>
<td>Herold</td>
<td>Wyoming Department of Health</td>
<td>Chronic Disease Prevention Program Manager</td>
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<tr>
<td>Debbie</td>
<td>Hornor</td>
<td>American Heart Association</td>
<td>Senior Vice President, Health Strategies SouthWest Affiliate</td>
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<td>Keith</td>
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<td>CEO</td>
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<td>Kimberly</td>
<td>Hoyt</td>
<td>Cheyenne Cardiology</td>
<td>RN Clinical Supervisor</td>
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<td>Amanda</td>
<td>Hubbard</td>
<td>CRMC</td>
<td>Training Center Coordinator</td>
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<td>Lindsay</td>
<td>Huse</td>
<td>Wyoming Department of Health</td>
<td>State Supervisor, Public Health Nursing</td>
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<td>Diane Kavanagh</td>
<td>RN</td>
<td>Wyoming Medical Center</td>
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<td>Vitaliy Kroychik</td>
<td>Tobacco Prevention Specialist</td>
<td>Wyoming Department of Health</td>
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<td>Ben Leonard</td>
<td>QSI Director</td>
<td>American Heart Association</td>
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<td>Jason Mincer</td>
<td>Captain Awesome</td>
<td>ACS CAN</td>
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<tr>
<td>Miriam Patanian</td>
<td>Lead Consultant for CVH and Health Systems</td>
<td>National Association of Chronic Disease Directors</td>
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<tr>
<td>Carol Rieser</td>
<td>Administrator of Specialty Services</td>
<td>Cheyenne Regional Medical Center</td>
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<tr>
<td>Robin Rinker</td>
<td>Project Officer</td>
<td>Centers for Disease Control</td>
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<tr>
<td>Julia Schneider</td>
<td>Consultant, CVH Team</td>
<td>National Association of Chronic Disease Directors</td>
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<tr>
<td>Rachael Settles</td>
<td>RN</td>
<td>Cheyenne Regional Medical Center</td>
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<tr>
<td>Mary Lynne Shickich</td>
<td>President</td>
<td>Shickich Strategies</td>
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<tr>
<td>Linda Stopp</td>
<td>Public Health Advisor</td>
<td>US Dept of Health and Human Services Office of the Assistant Secretary for Health Region 8</td>
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<tr>
<td>Stevi Sy</td>
<td>Regional Medication Safety Lead</td>
<td>Mountain-Pacific Quality Health</td>
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<tr>
<td>Julieann Tanachion</td>
<td>RN</td>
<td>Johnson County Public Health</td>
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<td>Trisha Thompson</td>
<td>Nurse Manager</td>
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<tr>
<td>Dian true</td>
<td>CEO</td>
<td>Wyoming Association of Diabetes Educators (WADE)</td>
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<tr>
<td>Brandi Wahlen</td>
<td>Account Manager</td>
<td>Mountain-Pacific Quality Health</td>
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<tr>
<td>April Wallace</td>
<td>Program Initiatives Manager</td>
<td>American Heart Association</td>
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<tr>
<td>Kristen Waters</td>
<td>Government Relations &amp; Community Integration</td>
<td>American Heart Association / American Stroke Association</td>
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<tr>
<td>David Wheeler</td>
<td>Neurologist</td>
<td>Wyoming Neurologic Associates</td>
<td></td>
</tr>
<tr>
<td>Alison Youngberg</td>
<td>RN, CNOR, RNFA</td>
<td>Wyoming Medical Center</td>
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<tr>
<td>Stacey Zeidler</td>
<td>Physician Liaison</td>
<td>Wyoming Medical Center</td>
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</tbody>
</table>
Advancing Million Hearts®: AHA and State Heart Disease and Stroke Partners Working Together in Wyoming

June 20, 2018 – 9:00 AM to 3:00 PM MDT

Wolcott Galleria
136 S Wolcott Street, Suite 204
Casper, WY 82601

Welcome & Overview of the Day

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

Julie Harvill, Operations Manager
Million Hearts® Collaboration

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.

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®.

<table>
<thead>
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<th>9:00 AM</th>
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<tbody>
<tr>
<td>Welcome and Overview John Clymer &amp; Julie Harvill</td>
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<tbody>
<tr>
<td>Introductions John Bartkus</td>
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<thead>
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<tr>
<td>Million Hearts® 2022 Robin Finzer</td>
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<tr>
<td>Programs and Resources that Align with Million Hearts®</td>
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<td>WY Dept of Health Hannah Herold &amp; Vitaliy Kroychik</td>
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<tr>
<td>Mountain-Pacific Quality Health Nicholas Bratton</td>
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<td>AHA/ASA Debbie Hornor &amp; Kristen Waters</td>
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<th>11:35 AM</th>
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<tr>
<td>Lunch</td>
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<th>12:15 PM</th>
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<tr>
<td>Afternoon Breakout Workgroups John Bartkus</td>
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<tr>
<td>Workgroup Report-outs John Bartkus</td>
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<tr>
<td>Plans for Follow-up John Bartkus</td>
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<tr>
<td>Evaluation &amp; Feedback / Wrap Up April Wallace</td>
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Agenda

Expectations - Approach for the Day

John Bartkus, PMP, CPF
Principal Program Manager, Pensivia
Introductions:
1. Name
2. Organization
3. What excites you about your role in heart disease and stroke prevention? (one sentence)

Logistics – Preparing for Afternoon Workgroups

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<tbody>
<tr>
<td><strong>LINKING COMMUNITIES TO CLINICAL SERVICES</strong></td>
<td><strong>HYPERTENSION CONTROL</strong></td>
<td><strong>TOBACCO CESSATION</strong></td>
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<tr>
<td>Amanda Hubbard</td>
<td>Hannah Herold</td>
<td>Kristen Waters</td>
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<td>Julia Schneider</td>
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**ACTION**: Before lunch is over, please add your name to the Sign-up sheet for the Workgroup you plan to attend/engage.

Activity

- “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)*

Alignment

Coordination of Purpose, Focus and Energy

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

Opportunities I found to:
* Align with My work
* Align with Others work

If “Alignment” is a key goal of this meeting, then what would evidence of cultivating alignment be?

Alignment
Coordination of Purpose, Focus and Energy

Higher Impact on the target

Preventing 1 Million Heart Attacks and Strokes by 2022

Robin Rinker, MPH, CHES
Health Communications Specialist
Division for Heart Disease and Stroke Prevention
Centers for Disease Control and Prevention

Million Hearts® 2022

• Aim: Prevent 1 million—or more—heart attacks and strokes in the next 5 years
• 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

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 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

Heart Disease and Stroke Trends 1950-2015

While CV deaths have been declining for the past 40 years, the reduction in these deaths has slowed.
Million Hearts® 2022
Aim: Prevent 1 Million Heart Attacks and Strokes in 5 Years

Keeping People Healthy

Goals

- Reduce Sodium Intake
  - Target: 20%
  - Enhance consumers’ options for lower sodium foods
  - Institute healthy food procurement and nutrition policies

- Decrease Tobacco Use
  - Target: 20%
  - Enact smoke-free space policies that include e-cigarettes
  - Use pricing approaches
  - Conduct mass media campaigns

- Increase Physical Activity
  - Target: 20%
  - Create or enhance access to places for physical activity
  - Design communities and streets that support physical activity
  - Develop and promote peer support programs

Optimizing Care

Goals

- Improve ABCS* – High Performers Excel in the Use of…
  - 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
- Increase Use of Cardiac Rehab
  - Target: 70%
- Engage Patients in Heart-Healthy Behaviors
  - Target: TBD

Improving Outcomes for Priority Populations

<table>
<thead>
<tr>
<th>Priority Populations</th>
<th>Intervention Needs</th>
<th>Strategies</th>
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<tbody>
<tr>
<td>Blacks/African Americans</td>
<td>Improving hypertension control</td>
<td>Targeted protocols</td>
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<tr>
<td>35-64 year olds</td>
<td>Improving HTN control and statin use</td>
<td>Targeted protocols</td>
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<td>Decreasing physical inactivity</td>
<td>Community-based program enrollment</td>
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<tr>
<td>People who have had a heart attack or stroke</td>
<td>Increasing cardiac rehab referral and participation</td>
<td>Automated referrals, hospital CR liaisons, referrals to convenient locations</td>
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<tr>
<td>People with mental and/or substance abuse disorders</td>
<td>Avoiding exposure to particulate matter</td>
<td>Air Quality Index tools</td>
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<td>Reducing tobacco use</td>
<td>Integrating tobacco cessation into behavioral health treatment</td>
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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
- Health IT
- Clinical Quality Measures
- Consumer Resources and Tools
Partner Opportunities: Hospitals
Sample Actions to Consider

- **Action**: Make healthy food and beverage choices available to patients, visitors, and staff
  - **Resource**: HHS/GSA Health and Sustainability Guidelines for Federal Concessions and Vending Operations
  - **Success Story**: Sodium Reduction Community Program Los Angeles County Department of Public Health

- **Action**: Implement comprehensive smoke-free policies
  - **Resource**: The Community Guide: Tobacco Use and Secondhand Smoke Exposure: Preventive Services
  - **Success Story**: Communities Putting Prevention to Work: Tobacco Use Prevention and Control Branch

- **Action**: Institute automatic referral of eligible patients to cardiac rehab
  - **Resource**: Increasing Cardiac Rehabilitation Participation from 20% to 70%: A Road Map from the Million Hearts Campaign: Millennium Cardiovascular Initiative

Partner Opportunities: Employers
Sample Actions to Consider

- **Action**: Make healthy food and beverage choices available to all employees
  - **Resource**: HHS/GSA Health and Sustainability Guidelines for Federal Concessions and Vending Operations
  - **Success Story**: Sodium Reduction Community Program Los Angeles County Department of Public Health

- **Action**: Develop and support policies at workplaces to encourage use of tobacco cessation services
  - **Success Story**: North Carolina Division of Public Health, Tobacco Prevention and Control Branch

- **Action**: Provide environmental supports for recreation or physical activity (e.g., onsite exercise facility, walking trails, bicycle racks)
  - **Resource**: CDC Worksite Health ScoreCard
  - **Success Story**: Bike Share Program Offers California State Employees Another Way to Be Active

Partner Opportunities: Clinical Care Teams
Sample Actions to Consider

- **Action**: Use standardized treatment protocols for hypertension treatment, tobacco cessation, and cholesterol management
  - **Resource**: Million Hearts® Protocols
  - **Success Story**: 2014 Hypertension Control Champion: Large Health Systems

- **Action**: Implement self-measured blood pressure monitoring (SMBP) interventions with clinical support
  - **Success Story**: 2013 Hypertension Control Champion: Nestlé Health Science

- **Action**: Improve performance on Million Hearts® clinical quality measures on aspirin, BP control, cholesterol, smoking cessation, and cardiac rehab
  - **Resource**: Michigan Center for Effective IT Adoption
  - **Success Story**: Association of State and Territorial Health Officials (ASTHO) Million Hearts Minnesota

- **Action**: Leverage electronic health record (EHR) systems to excel in the ABCS
  - **Resource**: Million Hearts® EHR Optimization Guides
  - **Success Story**: Michigan Center for Effective IT Adoption

Stay Connected

- **Million Hearts® eUpdate Newsletter**
- **Million Hearts® on Facebook and Twitter**
- **Million Hearts® Website**
- **Million Hearts® for Clinicians Microsite**

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

Q & A

Group Interaction
Wyoming Department of Health
Million Hearts Activities

Hannah Herold, MPH, MA, CHES
Chronic Disease Prevention Program Manager
Vitaliy Kroychik, CHES, CTTS, NCTTP
Tobacco Prevention Specialist

Current Priorities

Improve environments in worksites, schools, early childhood education services, state and local government agencies, and community settings to promote healthy behaviors.

- Nutrition
- Physical Activity

Current Priorities

Improve the delivery and use of quality clinical and other health services aimed at preventing and managing high blood pressure and diabetes.

- Increase implementation of quality improvement processes in health systems.
- Increase use of team-based care in health systems.

Chronic Disease Prevention Program Funding Overview

- 100% Federally Funded through CDC
  - “State Public Health Actions to Prevent and Control Diabetes, Heart Disease, Obesity and Associated Risk Factors and Promote School Health”
  - AKA “1305”

October 2018 through June 2023...
- Funded through “Improving the Health of Americans Through Prevention and Management of Diabetes and Heart Disease and Stroke”
  - “1815”
Increase links between community and clinical organizations to support prevention, self-management and control of diabetes, high blood pressure, and obesity.

- Increase access to, use of, and reimbursement for Diabetes Prevention Programs and Diabetes Self-Management Programs
- Increase use of health-care extenders in the community in support of self-management of high blood pressure and diabetes.

Current Priorities

MH Priority: Reduce Sodium Intake

- Nutritional consulting in school districts
  - Partnership with Wyoming Department of Education
  - Consulting and follow-up TA provided to 58 school districts
- Chop Chop Magazine in schools
- Nutrition professional development to Early Care and Education (ECE) providers
  - 1005 ECE Providers received PD

MH Priority: Reduce Sodium Intake/Increase Physical Activity

- Worksite wellness initiatives
  - Worksite Wellness Grants
  - 5 recipients
  - Required: Increase physical activity and nutrition standards and guidelines.
  - Optional: Tobacco cessation, preventative cancer screenings, breastfeeding-friendly environments, suicide prevention

MH Priority: Increase Physical Activity

- Professional development and training to ECE providers
  - Train-the-trainer
  - Stencil Project
  - Stakeholder meeting
  - Partnering with DFS to revise licensing requirements

MH Priority: Improve ABCS, Engage Patients in Heart Healthy Behavior

- Increasing use of lifestyle change programs for chronic disease management and prevention
  - Technical assistance contractors to provide targeted TA and professional development to providers
  - Mini-grants for Diabetes Prevention Programs

MH Priority: Improve ABCS, Engage Patients in Heart Healthy Behavior

- Integrated Pharmacy Project
  - Partnership with University of Wyoming School of Pharmacy
  - Enrolling pharmacists through the Practice-Based Research Network
  - Training on motivational interviewing, CDSME, and appropriate referrals to community resources
  - Use of Pharmacists’ Patient Care Process and Collaborative Practice Agreements
MH Priority: Improve ABCS, Engage Patients in Heart Healthy Behavior

- Using HIE for Chronic Care Management
  - Select group of high-needs practices
  - Receiving support on use of Electronic Health Records, reporting of clinical quality measures, and improving patient care for patients with chronic diseases
  - Technical assistance and support provided through Mountain Pacific Quality Health Foundation

Tobacco Prevention and Control Updates

- Goal 1: Increase Cessation
  - Provide Chantix at no cost to participants
  - 31% NRT+Coaching Quit rate
  - 44% Chantix+Coaching Quit rate

- Goal 2: Decrease Youth Initiation
  - Stay Fresh campaign launched in March
  - Peer to peer messaging
  - Empowering and educating youth to make their own decision
  - Oh Vape No
  - Not as bad is still no good

- Goal 3: Reduce secondhand smoke
  - Beginning work on secondhand smoke campaign
    - ETA Sept/Oct 2018
  - Educate parents on the danger of smoking around their kids
  - Reduce indoor exposure to secondhand smoke
Goal 4: Decrease disparities
- Cessation focus on AI, Pregnant women, and those with behavioral health issues (anxiety, depression)
- E-Coaching pilot to increase reach to younger population
- LGBT cultural competency training for cessation coaches.

MOUNTAIN-PACIFIC QUALITY HEALTH AND ALIGNMENT WITH MILLION HEARTS®

Nickola Bratton
AIM Lead

POLL: How much do you already know about Mountain-Pacific?
A. Nothing – I’m here to learn!
B. I’ve heard the name.
C. Some, but I don’t have a clear understanding of what all Mountain-Pacific does.
D. I have a good understanding of who they are and what they do.

About Mountain-Pacific
- Engage providers
  To improve patient care with evidence-based best practices
- Encourage collaboration
  Among providers and other community stakeholders
- Empower patients
  To take an active role in managing their health

Mountain-Pacific Quality Health
Quality Innovation Network – Quality Improvement Organization (QIN-QIO)
Working Together to Improve Health Care

CMS-designated quality improvement organization for Wyoming, Montana, Hawaii and Alaska
The QIO Program

- One of the largest federal programs dedicated to improving health quality at the local level.
- Each state has a Quality Innovation Network-Quality Improvement Organization (QIN-QIO) that collaborates with other QIO’s across the nation.
- Mountain-Pacific Quality Health is the QIN-QIO for Montana, Wyoming, Alaska, Hawaii, Guam, American Samoa and the Commonwealth of the Northern Mariana Islands.

“Boots on the Ground”

Quality improvement organizations are CMS’ “boots on the ground”

Better Health | Better Care | Lower Costs

Ultimate quality improvement goals

Quality Improvement Initiatives from CMS

1. Delivering beneficiary- & family-centered care
   – BFCC-QIOs
2. Healthy People, Healthy Communities
   – Improving Cardiac Health
   – Improving Health of People with Diabetes
   – Improve Adult Immunizations

Quality Improvement Initiatives from CMS

3. Better Health Care for Communities
   – Reduce Healthcare-Acquired Conditions in Nursing Homes
   – Improve Coordination of Care
4. Better Health Care at Lower Costs
   – Promoting improvement through assistance with quality reporting and federal reimbursement programs
   – Meaningful Use of HIT

Foundation Principles

Better Health - Better Care - Lower Cost

- Enable innovation
- Foster learning organizations
- Eliminate disparities
- Strengthen infrastructure and data systems

Areas of Focus

- Antibiotic Stewardship
- Cancer Prevention
- Cardiac Health
- Care Coordination
- Colorectal Cancer Screening
- Diabetes Care
- Health Care Infections
- Immunizations
- Medication Safety
- Nursing Home Quality
- Quality Payment Program
- Transforming Clinical Practice
Our Approach

- Align with the Million Hearts® Initiative (www.millionhearts.hhs.gov) to improve preventive care measures, including aspirin use, blood pressure control, cholesterol management and smoking/tobacco education
- Target disparate populations, including gender, racial and ethnic disparities and rural populations, to improve cardiac health

Focus on the ABCS
- Measure monitoring
- HHQI
- Merit-based Incentive Payment System (MIPS) Calculator

Practice Pattern Variance
- Data driven quality improvement
- Optimizing utilization of health information technology (HIT)
- Support innovations in care delivery

Our Partners
- Home Health Agencies
- Physician Offices
- Hospitals
- Nursing Homes
- Pharmacies
- Care Transition Teams
- DEEP™ Facilitators
- Community Health Workers

Contact Information

Nickola Bratton
303-726-5013
nbratton@mpqhf.org

Brandi Wahlen
307-472-0507
bwahlen@mpqhf.org
**AHA/ASA Programs and Resources That Align With Million Hearts®**

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Kristen Waters
Director of Government Relations & Community Integration - Wyoming
American Heart Association, Southwest Affiliate

**Mission**
Build healthier lives, free of cardiovascular diseases and stroke.

**2020 Impact Goal**
By 2020, to improve the cardiovascular health of all Americans by 20% while reducing deaths from cardiovascular diseases and stroke by 20%.

**Partners/Channels**

- **Impact Areas**
  - Social Norms (Demand)
  - Community Policies, Systems, and Environments
  - Social Determinants of Health
- **Individual Knowledge & Skills**
- **Supportive Environment**
- **Health Care System**
- **Worksite Health**
- **Schools/Early Childhood**
- **Faith-based Education|Economic Stability|Housing|Healthcare|Social Context**
- **Active Design**
- **Healthy Food Access**
- **Access to Quality Systems of Care**
- **Tobacco-Free**
- **Reduce Soda**
- **BP & Cholesterol Control**

**2020 Strategic Impact Goal**

- **Health Equity**
- **Health Literacy**
- **Health Data**
- **Health Workforce**
- **Health Innovation**
- **Health Policy & Leadership**
- **Health Communications**
- **Health Technology**
- **Health Economic**
- **Health Community**
- **Health Environment**
- **Health Education**
- **Health Research**
- **Health Policy**
- **Health System**
- **Health Technology**
- **Health Workforce**

**2020 Impact Areas**

- **Social Context**
- **Economic Stability**
- **Housing**
- **Healthcare**
- **Education**
- **Schools/Early Childhood**
- **Faith-based Education**
- **Tobacco-Free**
- **Reduce Soda**
- **BP & Cholesterol Control**
- **Active Design**
- **Healthy Food Access**
- **Access to Quality Systems of Care**
- **Health Literacy**
- **Health Equity**
- **Health Workforce**
- **Health Economic**
- **Health Community**
- **Health Environment**
- **Health Education**
- **Health Research**
- **Health Policy**
- **Health System**
- **Health Technology**
- **Health Workforce**

**AHA Affiliates**

- **American Heart Association**
- **American Stroke Association**
- **Million Hearts®**
- **Spotlight on Wyoming**
**AHA and Million Hearts®: Spotlight on Wyoming**

**Get With The Guidelines & Mission: Lifeline Quality Awards**

- **CHEYENNE REGIONAL MEDICAL CENTER**
  - GWTG - Heart Failure
  - GWTG - Stroke

- **WYOMING MEDICAL CENTER**
  - GWTG - Heart Failure
  - GWTG - Stroke

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**Policy Priorities in Wyoming**

- **Healthy Eating/Active Living**
  - Support efforts to increase active living and healthy eating through policy

- **Systems of Care**
  - Support policy that establishes best practices and streamlined protocols of care throughout the state

- **Tobacco Free**
  - Support efforts to decrease tobacco use in Wyoming

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**AHA and Million Hearts®: Spotlight on Wyoming: Advocacy**

- Grassroots advocacy network and statewide grassroots advocates

- Organized by category, based on scientific research and modified each year based on latest data and how many people impacted

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**Advocacy Success: Pulse Oximetry**

- Wyoming recently adopted a policy ensuring all newborns are screened for Critical Congenital Heart Defects using pulse oximetry testing.

- The policy went into effect on January 1, 2018

- A Heart Heroes from across Wyoming met with Governor Mead to thank him for signing the amended rules in a swift manner
SYSTEMS OF CARE

TELEPHONE CPR (T-CPR)

Dispatchers are seen as lifelines.

T-CPR would add high-quality CPR training to state required 911 dispatch training (an additional 4 hours).

T-CPR has been shown to dramatically increase bystander CPR rates and is associated with improved patient survival.

TOBACCO FREE

A minimum $1 tax increase on tobacco products

- Last tobacco tax increase was in 2004
- Revenue Committee sponsored bill in 2018

State-wide/Local Smoke-Free

- Cheyenne, Casper, Laramie, Evanston, Cowley
- Afton, Green River, Rock Springs

Tobacco 21

- Increase legal age to purchase tobacco

Tobacco Cessation Funding

- Protecting and securing funding

ADVOCATING FOR HEART

You’re the Cure advocates gathered at the State Capitol Building to meet their lawmakers and advocate for AHA policies.

Gov. Mead signed a proclamation declaring February ‘Heart Month’ in Wyoming.

ADVOCATE TODAY!

- Text ‘HEART’ to 46839 to receive campaign updates via text
- Sign a petition card

Tools and Resources

- AHA Wyoming Facebook Page
- Sign up For You’re the Cure
- My Life Check
- Heart Attack Risk Calculator
- AHA Smoking Cessation Tools and Resources
- AHA Workplace Health Solutions
- EmPowered to Serve
- Get With The Guidelines
- Check.Change.Control
- Target: BP

Is there a program you were unaware of that you would like to explore further for implementation or application in the state?

On which topics would you like additional information?

Other questions or areas to discuss?
Suggested Workgroup Approach

**WHAT**
- Current state / context
- Cultivating collaboration / alignment
- Objectives

**HOW**
- Deliverables
- Actions

**Sustainability**

Use this Conversation as a Vehicle to Identify & Cultivate Alignment.
Capture Your Plan as a Group

1. Linking Communities to Clinical Services
2. Hypertension Control
3. Tobacco Cessation

Amanda Hubbard
Stevi Sy
John Clymer
Jill Ceitlin
Julia Schneider
Hannah Herold
Melody Bowar
April Wallace
Miriam Patanian
Kristen Waters
Nickola Bratton
Joe D'Eufemia
Julie Harvill
Robin Rinker

MPOMSH
Meeting
Place
Of
Movers & Shakers

CTBYSO
Conversations
To
Blow
Your
Socks
Off

RORASH
Room
Of
Really
Amazing
Stuff
Happening

Group Report Outs start in main meeting room at 2:15pm

REPORTS FROM WORKGROUPS AND PLANS FOR FOLLOW-UP

Start at 2:15!

1. Linking Communities to Clinical Services
2. Hypertension Control
3. Tobacco Cessation

Amanda Hubbard
Stevi Sy
John Clymer
Jill Ceitlin
Julia Schneider
Hannah Herold
Melody Bowar
April Wallace
Miriam Patanian
Kristen Waters
Nickola Bratton
Joe D'Eufemia
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MPOMSH
Meeting
Place
Of
Movers & Shakers

CTBYSO
Conversations
To
Blow
Your
Socks
Off

RORASH
Room
Of
Really
Amazing
Stuff
Happening

Group Report Outs start in main meeting room at 2:10pm

EVALUATION AND FEEDBACK PROCESS

April Wallace
Program Initiatives Manager, Million Hearts® Collaboration

WRAP UP

April Wallace
Program Initiatives Manager, Million Hearts® Collaboration
Did you attend the Advancing Million Hearts®: AHA and Heart Disease and Stroke Prevention Partners Working Together in Wyoming held on June 20, 2018? Yes

How useful do you think the information provided in this meeting was related to the following objectives:

- Identify Million Hearts focused activities for 2018: Very useful
- Recognize Million Hearts® evidence-based and practice-based CVD prevention strategies and approaches: Very useful
- List partner programs and resources that align with Million Hearts®: Very useful
- Identify programs efforts that align and ways to work together: Very useful
- Create plan for follow-up to increase engagement: Very useful
- Recognize key contacts within heart disease and stroke prevention: Very useful

Please rate the following statements regarding your experience at the meeting.

- During the meeting, I identified opportunities to align my work with Million Hearts priorities: Strongly Agree
- During the meeting, I identified opportunities to align my work with other partner organizations: Strongly Agree
- During the meeting, I identified actionable next steps: Strongly Agree

Which breakout session did you attend? Tobacco cessation
Q5 Please rate the following statements regarding your experience in the breakout session.

- I found value in the breakout session. [Agree]
- I identified new partners to work with. [Agree]
- My breakout group made progress towards our topic area. [Agree]

Q6 In your opinion, what was the most valuable part of this meeting?

Quality of Information/Networking Opportunity

Q7 In your opinion, what was the least valuable part of this meeting?

--

Q8 Do you have suggestions on how to improve meetings like this in the future?

Appreciate the opportunity to participate.

#2

Collector: Web Link 1 (Web Link)
Started: Wednesday, June 27, 2018 1:58:36 PM
Last Modified: Wednesday, June 27, 2018 2:03:28 PM
Time Spent: 00:04:52
IP Address: 184.166.168.156

Page 1: Meeting Attendance

Q1 Did you attend the Advancing Million Hearts®: AHA and Heart Disease and Stroke Prevention Partners Working Together in Wyoming held on June 20, 2018? [Yes]

Page 2: Learning Objectives
Q2 How useful do you think the information provided in this meeting was related to the following objectives:

<table>
<thead>
<tr>
<th>Objective</th>
<th>Usefulity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Identify Million Hearts focused activities for 2018</td>
<td>Very useful</td>
</tr>
<tr>
<td>Recognize Million Hearts® evidence-based and practice-based CVD prevention strategies and approaches</td>
<td>Very useful</td>
</tr>
<tr>
<td>List partner programs and resources that align with Million Hearts®</td>
<td>Very useful</td>
</tr>
<tr>
<td>Identify programs efforts that align and ways to work together</td>
<td>Very useful</td>
</tr>
<tr>
<td>Create plan for follow-up to increase engagement</td>
<td>Very useful</td>
</tr>
<tr>
<td>Recognize key contacts within heart disease and stroke prevention</td>
<td>Very useful</td>
</tr>
</tbody>
</table>

Q3 Please rate the following statements regarding your experience at the meeting.

<table>
<thead>
<tr>
<th>Statement</th>
<th>Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>During the meeting, I identified opportunities to align my work with Million Hearts® priorities.</td>
<td>Strongly Agree</td>
</tr>
<tr>
<td>During the meeting, I identified opportunities to align my work with other partner organizations.</td>
<td>Strongly Agree</td>
</tr>
<tr>
<td>During the meeting, I identified actionable next steps.</td>
<td>Strongly Agree</td>
</tr>
</tbody>
</table>

Q4 Which breakout session did you attend? Tobacco cessation

Q5 Please rate the following statements regarding your experience in the breakout session.

<table>
<thead>
<tr>
<th>Statement</th>
<th>Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>I found value in the breakout session.</td>
<td>Strongly Agree</td>
</tr>
<tr>
<td>I identified new partners to work with.</td>
<td>Strongly Agree</td>
</tr>
<tr>
<td>My breakout group make progress towards our topic area.</td>
<td>Strongly Agree</td>
</tr>
</tbody>
</table>

Q6 In your opinion, what was the most valuable part of this meeting?

The most valuable take-away I had was connecting with other stakeholders to make Million Hearts in Wyoming strong!

Q7 In your opinion, what was the least valuable part of this meeting?

Respondent skipped this question

Q8 Do you have suggestions on how to improve meetings like this in the future?

We had invited several organizations that were not able to attend including beneficiaries, faith-based organizations and tribal health. They would have brought valuable perspectives to the meeting.
Q1 Did you attend the Advancing Million Hearts®: AHA and Heart Disease and Stroke Prevention Partners Working Together in Wyoming held on June 20, 2018?  Yes

Q2 How useful do you think the information provided in this meeting was related to the following objectives:

- Identify Million Hearts focused activities for 2018: Very useful
- Recognize Million Hearts® evidence-based and practice-based CVD prevention strategies and approaches: Very useful
- List partner programs and resources that align with Million Hearts®: Very useful
- Identify programs efforts that align and ways to work together: Very useful
- Create plan for follow-up to increase engagement: Very useful
- Recognize key contacts within heart disease and stroke prevention: Very useful

Q3 Please rate the following statements regarding your experience at the meeting.

- During the meeting, I identified opportunities to align my work with Million Hearts priorities: Strongly Agree
- During the meeting, I identified opportunities to align my work with other partner organizations: Strongly Agree
- During the meeting, I identified actionable next steps: Strongly Agree

Q4 Which breakout session did you attend? Linking communities to clinical services
Q5 Please rate the following statements regarding your experience in the breakout session.

<table>
<thead>
<tr>
<th>Statement</th>
<th>Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>I found value in the breakout session.</td>
<td>Strongly Agree</td>
</tr>
<tr>
<td>I identified new partners to work with.</td>
<td>Strongly Agree</td>
</tr>
<tr>
<td>My breakout group make progress towards our topic area.</td>
<td>Strongly Agree</td>
</tr>
</tbody>
</table>

Q6 In your opinion, what was the most valuable part of this meeting?

Making connection

Q7 In your opinion, what was the least valuable part of this meeting?

Respondent skipped this question

Q8 Do you have suggestions on how to improve meetings like this in the future?

Respondent skipped this question
Q2 How useful do you think the information provided in this meeting was related to the following objectives:

- Identify Million Hearts focused activities for 2018: Very useful
- Recognize Million Hearts® evidence-based and practice-based CVD prevention strategies and approaches: Very useful
- List partner programs and resources that align with Million Hearts®: Very useful
- Identify programs efforts that align and ways to work together: Very useful
- Create plan for follow-up to increase engagement: Very useful
- Recognize key contacts within heart disease and stroke prevention: Very useful

Q3 Please rate the following statements regarding your experience at the meeting.

- During the meeting, I identified opportunities to align my work with Million Hearts priorities. Agree
- During the meeting, I identified opportunities to align my work with other partner organizations. Agree
- During the meeting, I identified actionable next steps. Strongly Agree

Q4 Which breakout session did you attend? Tobacco cessation

Q5 Please rate the following statements regarding your experience in the breakout session.

- I found value in the breakout session. Strongly Agree
- I identified new partners to work with. Strongly Agree
- My breakout group make progress towards our topic area. Strongly Agree

Q6 In your opinion, what was the most valuable part of this meeting?

- meeting AHA contacts and the breakout session

Q7 In your opinion, what was the least valuable part of this meeting?

- na

Q8 Do you have suggestions on how to improve meetings like this in the future?

- na
Q1 Did you attend the Advancing Million Hearts®: AHA and Heart Disease and Stroke Prevention Partners Working Together in Wyoming held on June 20, 2018? Yes

Q2 How useful do you think the information provided in this meeting was related to the following objectives: Respondent skipped this question

Q3 Please rate the following statements regarding your experience at the meeting. Respondent skipped this question

Q4 Which breakout session did you attend? Respondent skipped this question

Q5 Please rate the following statements regarding your experience in the breakout session. Respondent skipped this question

Q6 In your opinion, what was the most valuable part of this meeting? Respondent skipped this question

Q7 In your opinion, what was the least valuable part of this meeting? Respondent skipped this question

Q8 Do you have suggestions on how to improve meetings like this in the future? Respondent skipped this question
Page 1: Meeting Attendance

Q1 Did you attend the Advancing Million Hearts®: AHA and Heart Disease and Stroke Prevention Partners Working Together in Wyoming held on June 20, 2018? Yes

Page 2: Learning Objectives

Q2 How useful do you think the information provided in this meeting was related to the following objectives:

- Identify Million Hearts focused activities for 2018: Somewhat useful
- Recognize Million Hearts® evidence-based and practice-based CVD prevention strategies and approaches: Somewhat useful
- List partner programs and resources that align with Million Hearts®: Somewhat useful
- Identify programs efforts that align and ways to work together: Somewhat useful
- Create plan for follow-up to increase engagement: Somewhat useful
- Recognize key contacts within heart disease and stroke prevention: Somewhat useful

Q3 Please rate the following statements regarding your experience at the meeting.

- During the meeting, I identified opportunities to align my work with Million Hearts priorities. Agree
- During the meeting, I identified opportunities to align my work with other partner organizations. Agree
- During the meeting, I identified actionable next steps. Agree

Q4 Which breakout session did you attend? Linking communities to clinical services

Q5 Please rate the following statements regarding your experience in the breakout session.

- I found value in the breakout session. Disagree
- I identified new partners to work with. Agree
- My breakout group make progress towards our topic area. Agree

Q6 In your opinion, what was the most valuable part of this meeting? n/a
Q7 In your opinion, what was the least valuable part of this meeting?

n/a

Q8 Do you have suggestions on how to improve meetings like this in the future?

no

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**#7**

**Collector:** Web Link 1 (Web Link)

**Started:** Friday, July 06, 2018 9:40:53 PM

**Last Modified:** Friday, July 06, 2018 9:46:52 PM

**Time Spent:** 00:05:58

**IP Address:** 158.71.150.199

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**Page 1: Meeting Attendance**

**Q1** Did you attend the Advancing Million Hearts®: AHA and Heart Disease and Stroke Prevention Partners Working Together in Wyoming held on June 20, 2018?

Yes

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**Page 2: Learning Objectives**

**Q2** How useful do you think the information provided in this meeting was related to the following objectives:

- Identify Million Hearts focused activities for 2018: **Very useful**
- Recognize Million Hearts® evidence-based and practice-based CVD prevention strategies and approaches: **Somewhat useful**
- List partner programs and resources that align with Million Hearts®: **Somewhat useful**
- Identify programs efforts that align and ways to work together: **Very useful**
- Create plan for follow-up to increase engagement: **Somewhat useful**
- Recognize key contacts within heart disease and stroke prevention: **Very useful**
Q3 Please rate the following statements regarding your experience at the meeting.

During the meeting, I identified opportunities to align my work with Million Hearts priorities.  
Agree

During the meeting, I identified opportunities to align my work with other partner organizations.  
Strongly Agree

During the meeting, I identified actionable next steps.  
Agree

Q4 Which breakout session did you attend?  
Tobacco cessation

Q5 Please rate the following statements regarding your experience in the breakout session.

I found value in the breakout session.  
Strongly Agree

I identified new partners to work with.  
Strongly Agree

My breakout group made progress towards our topic area.  
Agree

Q6 In your opinion, what was the most valuable part of this meeting?  
The understanding I gained about the challenges and opportunities for work towards Million Hearts goals and for collaboration. I identified new partners and seek to extend and strengthen the connections I made.

Q7 In your opinion, what was the least valuable part of this meeting?  
The limited time and the absence of several key partners: Native Americans and emergency responders, pharmacists, educators and community health workers.

Q8 Do you have suggestions on how to improve meetings like this in the future?  
Take more time and concentrated effort in generating the invite list and in personally inviting key stakeholders.

Collector:  
Web Link 1 (Web Link)

Started:  
Monday, July 09, 2018 11:50:58 AM

Last Modified:  
Monday, July 09, 2018 11:54:40 AM

Time Spent:  
00:03:41

IP Address:  
205.167.90.193
Q1 Did you attend the Advancing Million Hearts®: AHA and Heart Disease and Stroke Prevention Partners Working Together in Wyoming held on June 20, 2018?  
Yes

Page 2: Learning Objectives

Q2 How useful do you think the information provided in this meeting was related to the following objectives:

- Identify Million Hearts focused activities for 2018: Very useful
- Recognize Million Hearts® evidence-based and practice-based CVD prevention strategies and approaches: Very useful
- List partner programs and resources that align with Million Hearts®: Very useful
- Identify programs efforts that align and ways to work together: Very useful
- Create plan for follow-up to increase engagement: Very useful
- Recognize key contacts within heart disease and stroke prevention: Very useful

Q3 Please rate the following statements regarding your experience at the meeting.

- During the meeting, I identified opportunities to align my work with Million Hearts priorities: Strongly Agree
- During the meeting, I identified opportunities to align my work with other partner organizations: Strongly Agree
- During the meeting, I identified actionable next steps: Strongly Agree

Q4 Which breakout session did you attend?

Engagement of pharmacists

Q5 Please rate the following statements regarding your experience in the breakout session.

- I found value in the breakout session: Strongly Agree
- I identified new partners to work with: Strongly Agree
- My breakout group make progress towards our topic area: Strongly Agree

Q6 In your opinion, what was the most valuable part of this meeting?

I was very encouraged to see the support from the different government agencies

Q7 In your opinion, what was the least valuable part of this meeting?

I got something from every part of the meeting.
Q8 Do you have suggestions on how to improve meetings like this in the future?  
Respondent skipped this question

Q1 Did you attend the Advancing Million Hearts®: AHA and Heart Disease and Stroke Prevention Partners Working Together in Wyoming held on June 20, 2018?  
Yes

Q2 How useful do you think the information provided in this meeting was related to the following objectives:

- Identify Million Hearts focused activities for 2018: Somewhat useful
- Recognize Million Hearts® evidence-based and practice-based CVD prevention strategies and approaches: Not very useful
- List partner programs and resources that align with Million Hearts®: Very useful
- Identify programs efforts that align and ways to work together: Very useful
- Create plan for follow-up to increase engagement: Very useful
- Recognize key contacts within heart disease and stroke prevention: Somewhat useful

Q3 Please rate the following statements regarding your experience at the meeting.

- During the meeting, I identified opportunities to align my work with Million Hearts priorities: Agree
- During the meeting, I identified opportunities to align my work with other partner organizations: Agree
- During the meeting, I identified actionable next steps: Agree

Q4 Which breakout session did you attend?  
Tobacco cessation
Q5 Please rate the following statements regarding your experience in the breakout session.

<table>
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<tbody>
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<td>Strongly Agree</td>
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<tr>
<td>My breakout group make progress towards our topic area.</td>
<td>Strongly Agree</td>
</tr>
</tbody>
</table>

Q6 In your opinion, what was the most valuable part of this meeting?

Respondent skipped this question

Q7 In your opinion, what was the least valuable part of this meeting?

Respondent skipped this question

Q8 Do you have suggestions on how to improve meetings like this in the future?

Respondent skipped this question

#10

Collector: Web Link 1 (Web Link)
Started: Thursday, July 19, 2018 11:14:22 AM
Last Modified: Thursday, July 19, 2018 11:20:04 AM
Time Spent: 00:05:42
IP Address: 69.145.193.197

Page 1: Meeting Attendance

Q1 Did you attend the Advancing Million Hearts®: AHA and Heart Disease and Stroke Prevention Partners Working Together in Wyoming held on June 20, 2018?

Yes
Q2 How useful do you think the information provided in this meeting was related to the following objectives:

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<tr>
<td>Recognize key contacts within heart disease and stroke prevention</td>
<td>Very useful</td>
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</table>

Q3 Please rate the following statements regarding your experience at the meeting.

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<tbody>
<tr>
<td>During the meeting, I identified opportunities to align my work with Million Hearts priorities.</td>
<td>Agree</td>
</tr>
<tr>
<td>During the meeting, I identified opportunities to align my work with other partner organizations.</td>
<td>Agree</td>
</tr>
<tr>
<td>During the meeting, I identified actionable next steps.</td>
<td>Agree</td>
</tr>
</tbody>
</table>

Q4 Which breakout session did you attend? Hypertension control

Q5 Please rate the following statements regarding your experience in the breakout session.

<table>
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</thead>
<tbody>
<tr>
<td>I found value in the breakout session.</td>
<td>Strongly Agree</td>
</tr>
<tr>
<td>I identified new partners to work with.</td>
<td>Agree</td>
</tr>
<tr>
<td>My breakout group make progress towards our topic area.</td>
<td>Agree</td>
</tr>
</tbody>
</table>

Q6 In your opinion, what was the most valuable part of this meeting? Respondent skipped this question

Q7 In your opinion, what was the least valuable part of this meeting? Respondent skipped this question

Q8 Do you have suggestions on how to improve meetings like this in the future? Respondent skipped this question
Q1 Did you attend the Advancing Million Hearts®: AHA and Heart Disease and Stroke Prevention Partners Working Together in Wyoming held on June 20, 2018? Yes

Q2 How useful do you think the information provided in this meeting was related to the following objectives: Respondent skipped this question

Q3 Please rate the following statements regarding your experience at the meeting. Respondent skipped this question

Q4 Which breakout session did you attend? Respondent skipped this question

Q5 Please rate the following statements regarding your experience in the breakout session. Respondent skipped this question

Q6 In your opinion, what was the most valuable part of this meeting? Respondent skipped this question

Q7 In your opinion, what was the least valuable part of this meeting? Respondent skipped this question

Q8 Do you have suggestions on how to improve meetings like this in the future? Respondent skipped this question
Meeting Evaluation: Partners Working Together in Wyoming

Page 1: Meeting Attendance

Q1 Did you attend the Advancing Million Hearts®: AHA and Heart Disease and Stroke Prevention Partners Working Together in Wyoming held on June 20, 2018? Yes

Page 2: Learning Objectives

Q2 How useful do you think the information provided in this meeting was related to the following objectives:

- Identify Million Hearts focused activities for 2018 Very useful
- Recognize Million Hearts® evidence-based and practice-based CVD prevention strategies and approaches Very useful
- List partner programs and resources that align with Million Hearts® Very useful
- Identify programs efforts that align and ways to work together Very useful
- Create plan for follow-up to increase engagement Somewhat useful
- Recognize key contacts within heart disease and stroke prevention Very useful

Q3 Please rate the following statements regarding your experience at the meeting.

- During the meeting, I identified opportunities to align my work with Million Hearts priorities. Strongly Agree
- During the meeting, I identified opportunities to align my work with other partner organizations. Agree
- During the meeting, I identified actionable next steps. Strongly Agree

Q4 Which breakout session did you attend? Hypertension control

Q5 Please rate the following statements regarding your experience in the breakout session.

- I found value in the breakout session. Agree
- I identified new partners to work with. Agree
- My breakout group make progress towards our topic area. Strongly Agree

Q6 In your opinion, what was the most valuable part of this meeting?

Meeting people that are driven to improve the lives of Wyoming residents

Q7 In your opinion, what was the least valuable part of this meeting? Respondent skipped this question
Meeting Evaluation: Partners Working Together in Wyoming

Q8 Do you have suggestions on how to improve meetings like this in the future?  
Respondent skipped this question

#13
Collector: Web Link 1 (Web Link)
Started: Friday, July 20, 2018 4:32:28 PM
Last Modified: Friday, July 20, 2018 4:39:17 PM
Time Spent: 00:06:48
IP Address: 161.69.112.10

Page 1: Meeting Attendance

Q1 Did you attend the Advancing Million Hearts®: AHA and Heart Disease and Stroke Prevention Partners Working Together in Wyoming held on June 20, 2018?  
Yes

Page 2: Learning Objectives

Q2 How useful do you think the information provided in this meeting was related to the following objectives:

- Identify Million Hearts focused activities for 2018  
  Very useful
- Recognize Million Hearts® evidence-based and practice-based CVD prevention strategies and approaches  
  Very useful
- List partner programs and resources that align with Million Hearts®  
  Very useful
- Identify programs efforts that align and ways to work together  
  Very useful
- Create plan for follow-up to increase engagement  
  Very useful
- Recognize key contacts within heart disease and stroke prevention  
  Very useful

Q3 Please rate the following statements regarding your experience at the meeting.

- During the meeting, I identified opportunities to align my work with Million Hearts priorities.  
  Strongly Agree
- During the meeting, I identified opportunities to align my work with other partner organizations.  
  Agree
- During the meeting, I identified actionable next steps.  
  Agree

Q4 Which breakout session did you attend?  
Tobacco cessation
Q5 Please rate the following statements regarding your experience in the breakout session.

- I found value in the breakout session.  
  Agree
- I identified new partners to work with.  
  Strongly Agree
- My breakout group make progress towards our topic area.  
  Agree

Q6 In your opinion, what was the most valuable part of this meeting?

Meeting new stakeholders in Wyoming

Q7 In your opinion, what was the least valuable part of this meeting?

Clinical discussion as that is not work I am engaged in personally.

Q8 Do you have suggestions on how to improve meetings like this in the future?

More time to network with those in attendance

#14

Collector: Web Link 1 (Web Link)
Started: Saturday, July 21, 2018 12:31:54 AM
Last Modified: Saturday, July 21, 2018 12:33:28 AM
Time Spent: 00:01:33
IP Address: 35.134.247.36

Page 1: Meeting Attendance

Q1 Did you attend the Advancing Million Hearts®: AHA and Heart Disease and Stroke Prevention Partners Working Together in Wyoming held on June 20, 2018?  
Yes

Page 2: Learning Objectives
Q2 How useful do you think the information provided in this meeting was related to the following objectives:

- Identify Million Hearts focused activities for 2018: Very useful
- Recognize Million Hearts® evidence-based and practice-based CVD prevention strategies and approaches: Very useful
- List partner programs and resources that align with Million Hearts®: Very useful
- Identify programs efforts that align and ways to work together: Very useful
- Create plan for follow-up to increase engagement: Very useful
- Recognize key contacts within heart disease and stroke prevention: Very useful

Q3 Please rate the following statements regarding your experience at the meeting.

- During the meeting, I identified opportunities to align my work with Million Hearts priorities: Strongly Agree
- During the meeting, I identified opportunities to align my work with other partner organizations: Strongly Agree
- During the meeting, I identified actionable next steps: Strongly Agree

Q4 Which breakout session did you attend?

- Tobacco cessation

Q5 Please rate the following statements regarding your experience in the breakout session.

- I found value in the breakout session: Strongly Agree
- I identified new partners to work with: Strongly Agree
- My breakout group make progress towards our topic area: Agree

Q6 In your opinion, what was the most valuable part of this meeting?

- Resources

Q7 In your opinion, what was the least valuable part of this meeting?

- Respondent skipped this question

Q8 Do you have suggestions on how to improve meetings like this in the future?

- Respondent skipped this question