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

July 11, 2017
9:00 AM to 3:00 PM CT
Holiday Inn, Sioux Falls City Centre
100 W. 8th St.
Sioux Falls, South Dakota

Welcome & Overview of the Day

Julie Harvill, Operations Manager
Million Hearts® Collaboration

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

Expectations—Approach for the Day

John Bartkus, 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 Breakouts

1 IMPROVE DATA COLLECTION
   Ashley Miller
   Stan Kogan
   Whitney Garney
   Robin Rinker
   Mallory Stasko

2 PRIORITY POPULATIONS
   Kiley Hum
   Julia Schneider
   April Wallace
   Linda Stopp

3 CONTINUUM OF CARE
   Megan Myers
   Julie Harvill
   Mary Jo Garofoli

4 PREVENTION & MANAGEMENT
   Katie Hill
   Miriam Patanian
   John Clymer
   Holly Arends

ACTION: Before lunch is over, please add your name to the Flip-chart for the Session you plan to attend.

A key focus for the day...

ALIGNMENT
**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)*

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**Alignment**

Coordination of Purpose, Focus and Energy

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**Alignment**

Coordination of Purpose, Focus and Energy

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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?

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Preventing 1 Million Heart Attacks and Strokes by 2022

Robin Rinker, MPH
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 year

• More than **800,000** deaths per year from cardiovascular disease (CVD)

• CVD costs the U.S. **hundreds of billions** of dollars per year

• CVD is the greatest contributor to racial disparities in life expectancy

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**

- Reduce Sodium Intake
- Decrease Tobacco Use
- Increase Physical Activity

**Optimizing Care**

- Improve ABCS*
- Increase Use of Cardiac Rehab
- Engage Patients in Heart-healthy Behaviors

Million Hearts® 2022

**Priorities**

Keeping People Healthy

Optimizing Care

<table>
<thead>
<tr>
<th>Goals</th>
<th>Effective Public Health Strategies</th>
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</table>
| 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 |

**Keeping People Healthy**

- Enhance patients’ access to health care services
- Improve coordination of care
- Increase access to mental health and substance use disorders services

**Improving Outcomes for Priority Populations**

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

*Depends on age-appropriate blood pressure control, cholesterol management, smoking cessation
Optimizing Care

<table>
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<th>Goals</th>
<th>Effective Health Care Strategies</th>
</tr>
</thead>
<tbody>
<tr>
<td>Improve ABCS*</td>
<td>Teams—including pharmacists, nurses, community health workers, and cardiac rehab professionals.</td>
</tr>
<tr>
<td>Increase Use of Cardiac Rehab</td>
<td>Target: 70%</td>
</tr>
<tr>
<td>Engage Patients in Heart-healthy Behaviors</td>
<td>Target: 100%</td>
</tr>
</tbody>
</table>

**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: Employers**

- **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 worksites to encourage use of tobacco cessation services.
  - **Resource:** The Community Guide: Tobacco Use and Secondhand Smoke Exposure: Guide interventions
  - **Success Story:** North Carolina Division of Public Health, Tobacco Prevention and Control Branch: Expanding Comprehensive Coverage for Tobacco Cessation
- **Action:** Provide environmental supports for recreation or physical activity (e.g., onsite exercise facility; walking trails; bicycle racks)
  - **Resource:** CDC Workplace Health ScoreCard
  - **Success Story:** Bikeshare Program Offers California State Employees Another Way to Be Active

**Partner Opportunities: Hospitals**

- **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: Similar Free Policies
  - **Success Story:** Communities Putting Prevention to Work: Tobacco Use Prevention and Control
- **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 Cardiac Rehabilitation Collaborative

**Partner Opportunities: Clinical Care Teams**

- **Action:** Use standardized treatment protocols for hypertension treatment, tobacco cessation, and cholesterol management
  - **Resource:** Million Hearts EHR Optimization Guides
  - **Success Story:** 2014 Hypertension Control Champions: Large Health Systems
- **Action:** Implement self-measured blood pressure monitoring (SMBP) interventions with clinical support
  - **Resource:** Million Hearts Self-Measured Blood Pressure Monitoring: Action Steps for Clinicians
- **Action:** Improve performance on Million Hearts® clinical quality measures on aspirin, BP control, cholesterol, smoking cessation, and cardiac rehab
  - **Resource:** Million Hearts ABCS Measures
  - **Success Story:** Association of State and Territorial Health Officials (ASTHO) Million Hearts Network
- **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

DOH STRATEGIC PLAN 2015-2020

VISION
Healthy People
Healthy Communities
Healthy South Dakota

MISSION
To promote, protect and improve the health of every South Dakotan

GUIDING PRINCIPALS
Serve with integrity
Eliminate health disparities
Demonstrate leadership and accountability
Focus on prevention and outcomes
Leverage partnerships
Promote innovation

KILEY HUMP, ADMINISTRATOR
OFFICE OF CHRONIC DISEASE PREVENTION AND HEALTH PROMOTION
Good & Healthy South Dakota
Office of Chronic Disease Prevention and Health Promotion

The Cardiovascular Collaborative
A group of medical and public health representatives who want to improve the quality of life for all South Dakotans through prevention and control of heart disease and stroke.

Leadership Team
- Holly Arends
- Kevin Atkins
- Mandi Atkins
- Stacie Davis
- Mark East
- Colette Hesla
- Katie Hill
- Kiley Hump
- Amanda Keefe
- Marty Link
- Mary Michaels
- Ashley Miller
- Megan Myers

*Have a conference call quarterly

Collaborative Planning Process

Year 1 Implementation
- In-person Action Planning meeting March 2017
- Selected Year 1 Priority Strategy in each goal area
- Workgroup calls
- Advancing Million Hearts Conference
Great Plains Quality Innovation Network (GPQIN)

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

Q & A
Group Interaction

Improving Cardiac Care - the Great Plains States

Holly Arends, Program Manager
South Dakota Foundation for Medical Care

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
- We will target disparate populations, including gender, racial and ethnic disparities and rural, to improve cardiac health

Triple AIM Approach to Clinical Quality

- Better Health
- Better Care
- Lower Cost

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

Our Approach

- Focus on the ABCS
  - Measure monitoring
    - HHQI
    - MIPS Calculator
    - Practice Pattern Variance
  - Data driven QI
  - Optimizing utilization of HIT
  - Support innovations in care delivery
Cardiovascular Health and Million Hearts®

Our planned improvement efforts align with the national Million Hearts® initiative that seeks to prevent one million heart attacks and strokes by 2022.

- Heart disease and stroke are the first- and fourth-leading causes of death\(^1\)
- Heart disease and stroke cost more than $312.6 billion in healthcare expenditures and lost productivity annually\(^2\)

1. Centers for Disease Control and Prevention
2. Million Hearts®

Our Approach

- Offering technical assistance on the Physician Quality Reporting System (PQRS) 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

South Dakota Performance

- SD ABCS Avg. Measure Performance - Across Multiple Monitoring Systems (PQRS, UDS, HEDIS)

Contact Information

- Holly Arends, CMQP
  Program Manager
  Great Plains QIN/ SDFMC
  P: 605.660.5436
  Holly.Arends@area-a.hqis.org

Overview of the American Heart Association and Programs and Resources that align with Million Hearts®

Megan Myers
SD Government Relations Director
Mission
Building healthier lives, free of cardiovascular diseases and stroke.

Our 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%.

Building a Culture of Health
A culture in which people live, work, learn, play and pray in environments that support healthy behaviors, timely quality care and overall well-being.

AHA and Million Hearts® Spotlight on South Dakota
Quality & Systems Improvement Priorities
Get With The Guidelines & Mission: Lifeline Quality Awards
- Avera Heart Hospital of South Dakota
- Sanford USD Medical Center
- Rapid City Regional Hospital

AHA and Million Hearts® Spotlight on South Dakota
Advocacy
- Policy Goals
  Organized by category, based on scientific research and modified each year based on latest data and how many people impacted
- You’re the Cure Network, SD Advocacy Committee
  Grassroots advocacy network and statewide grasstops advocates
AHA and Million Hearts®
Spotlight on South Dakota

Advocacy Priorities
• Health Insurance Coverage – Medicaid Expansion/Reform
• Systems of Care – Stroke and STEMI Designations and Registries, Cardiac-Ready Communities
• Healthy Living – Complete Streets, Healthy SD
• Tobacco-Free – Smoke Free SD, Tobacco Prevention/Control

Cardiac-Ready Communities
• Program designed to prepare communities to respond and assist to increase survival from a cardiac event occurring outside of the hospital setting
• North Dakota, Montana, Minnesota have similar programs, SD gathering best practices

Healthy Living
• Support efforts to increase active living and healthy eating through policy
• Complete Streets, Safe Routes to School, bike safety laws
• Increasing quality and quantity of physical activity in schools
• Supporting school lunch standards

Tobacco-Free
• Reduce tobacco use in South Dakota
• Increasing price of tobacco products – 2006
• Defending our smoke-free law – passed 2010
• Working to ensure the US Food and Drug Administration has the authority to regulate tobacco, including e-cigarettes
• Work annually in Pierre on enforcement and program funding

CPR in Schools
• South Dakota was 36th state to require hands-only CPR in required curriculum before graduation
• Became law July 1, 2017
• Could train up to 10,000 students a year in bystander CPR and greatly enhance our emergency services capacity in South Dakota

1) Blood Pressure Strategies

Current Prevalence:
33 Million
Number of Adults 20+ with blood pressure >140/90 and/or BP medication use
(NHANES 13-14)

10/25/2017
**Blood Pressure Ecosystem**

**Policy Agenda**

- Million Hearts
- Ad Council Stroke
- AMA/AHA HCP Campaign
- Ad Council Hypertension

**Blood Pressure Health System**

- [Image]

**Self Monitoring Blood Pressure**

- [Image]

**National Cholesterol Initiative Goals**

- 10% improvement in clinical management
- 10% improvement in perceptions of self-management

- **Subgoal 1**: Achieve a 10% increase in percentage of adult patients with existing atherosclerotic cardiovascular disease (ASCVD) or at high risk for the development of ASCVD who are prescribed statin therapy. (PQRS #438 + additional reporting for groups with ASCVD risk > 7.5%)  
  - **Subgoal 2**: Achieve a 10% improvement in provider-reported utilization of lifestyle-based treatment practices for cholesterol management.  
  - **Subgoal 3**: Achieve a 10% improvement in self-reported patient outcomes focused on self-management of health conditions, including cholesterol.

**2020 Goal & Plan Alignment**

- Based on the pilot settings, the Center for Health Metrics & Evaluation is advising on scenarios to extrapolate the potential for impact of this clinical management measure nationally. This will guide our national scale strategy in alignment with the 2020 goal measure (total cholesterol) and the 2017-2020 plan.

**Public Awareness, Patient Engagement & Empowerment**

**Strategy**: Increase public awareness, education and engagement of patients and family caregivers to improve understanding of cholesterol treatment and management.

**Actions Taken**:
- Conducted market research with patients to understand gaps in perceived understanding and knowledge to inform educational efforts, as well as to identify new tools for media launch, ongoing media outreach and new content.
- Planning is underway for consumer education campaign launch.
- Conducted content audits of Heart.org/Cholesterol and began refresh of content and tools.

**Next Steps**:
- Release refreshed content on Heart.org/Cholesterol in April 2017.
- Conduct consumer media campaign launch and begin continuous outreach via owned, earned and paid media channels in April 2017.
- Conduct Public Health Summit on April 11th, 2017.
- Develop post-summit action plan, distribute to summit participants and conduct ongoing follow-up with participants to inform future efforts and further reach and impact of the initiative.

**Strategic Approach**

- Public Health Summit: Convene thought-leaders to discuss gaps in care to drive better cholesterol management.
- **Increase adoption and utilization of treatment guidelines through quality improvement programs and professional education**
  - eQMS & PRISM development
  - Pilot measures and quality improvement program in an integrated delivery network
  - National rollout of measures and quality improvement program
  - Continuing education
- **Increase understanding of and adherence to evidence-based treatment guidelines through public and patient awareness and education**
  - Informed by patient and provider market research
  - Awareness and educational messages deployed via a robust campaign
Tools and Resources

Online Tools
- My Life Check
- Heart Attack Risk Calculator
- AHA’s Smoking Cessation Tools and Resources
- AHA Healthy Workplace Food and Beverage Toolkit July 2016

Resources
- EmPowered to Serve
- Get With The Guidelines
- Check.Change.Control
- Target: BP

Discussion
1. Is there a program you were unaware of that you would like to explore further for implementation or application in the state?
2. On which topics would you like additional information?
3. Other questions

Contact Information
- Megan Myers, SD Government Relations Director
  - Sioux Falls
  - 605-261-7717
  - megan.myers@heart.org
  - @MeganAtHeart
- Pam Miller, Regional Grassroots Advocacy Director
  - Brookings
  - 605-310-3170
  - pamela.miller@heart.org
  - Facebook.com/southdakotaheart
  - @sdakotaheart

CATERED LUNCH
Resume at 12:10pm

Group 1: Improve data collection
Group 2: Priority populations
Group 3: Continuum of care
Group 4: Prevention/Management
Use this Conversation about an Action Plan as a Vehicle to Identify & Cultivate Alignment.

**Workgroup Approach**

- **Priority Strategy**
  - Defining
  - Executing

**Workgroup Template...**

**Final Logistics – for Afternoon Breakouts**

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2:00pm – Groups provide “Report Outs” to the full team
REPORTS FROM BREAKOUTS
PLANS FOR FOLLOW-UP/NEXT INTERACTIONS

John Bartkus

EVALUATION AND FEEDBACK PROCESS

Whitney R. Garney, WRG Consulting

WRAP UP
April Wallace, Program Initiatives Manager, Million Hearts® Collaboration

ADJOURN