# American Heart Association: Tools for American Heart Month & Beyond

Wisconsin DHS Chronic Disease Prevention Partner Call January 23, 2024

Tim Nikolai, Senior Rural Health Director, Midwest Region Zach Wilks-Metrou, Community Impact Director, WI Susan Hjelsand, Senior Community Impact Director, WI



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

**Our Vision:** Advancing health and hope for everyone, everywhere.

**Our Guiding Values:** 





American Heart Association.

## ARE YOU READY? AMERICAN HEART MONTH IS HERE!



More than 23,000 children experience cardiac arrest every year.

Are **YOU** ready to save your child's life?





in in

## **AMERICAN HEART MONTH 2024**



#### Will **YOU** be ready to **SAVE** the life of SOMEONE you love?





## NATIONAL WEAR RED DAY<sup>®</sup>

February 2, 2024

Rock your Red today for women's heart health.



**Click HERE for 2024 American Heart Month Toolkit** 



#### Did you know **KIDS AS YOUNG AS 9** can learn CPR?

heart.org/nation



#### **TWO STEPS TO SAVE A LIFE**





3. (1%)

**Ø**=

Live Flores

111

Call 911

Fact Sheet

When a person has a cardiac arrest, survival depends on i

Be the Difference for Someone You Love

Nearly 3 out of 4 of out-of-hospital

iac arrests happen in homes

ll 911 if uou see a teen

r adult suddenly collapse.

Why Learn Hands-Only CPR?

a child, a spouse, a parent or a friend.

emergency help you need on the way. Music Can Save Lives

Learn How to Save a Life

CPR class near you at heart.org/CPR. NOTE: The AHA still recommends CPR with comp due to breathing problems.

An automated external defibrillator (AED) is a lightweight, portable device. It delivers an electric shock through the chest to the heart when it detects an abnormal rhythm and changes the rhythm back to normal. AEDs help people who have a sudden cardiac arrest, which occurs when the heart suddenly stops beating regularly

This happens when the heart's natural electrical system doesn't work correctly. If not treated within minutes, cardiac arrest quicklu leads to death

#### Why are AEDs important?



#### Early Defibrillation

More than 15% of out-of-hospital cardiac arrests occur in a public location; therefore, public-access automated external defibrillators (AED) and community training have a large role to play in early defibrillation. However, the number of patients who have an AED applied by abstander remains low, occurring after only 10.25% of public arrest In 2021, 28.7% of patients in the Cardiac Arrest Registry to Enhance Survival (CARES) were defibrillated in the field. The proportion of patients first defibrillated by a bystander was 4.6%, whereas 19.1% and 76.3% were first defibrillated bu a first responder or emergency medical services personnel, respectively.

#### Functionality

- · Inside the AED box are pads and a diagram that shows where to place the pads on bare skin. Once the device is turned on, a voice tells the person using it exactly what to do. Some devices offer this instruction in Spanish, but most are English-speaking
- The first thing the AED will do is determine whether an electric shock is needed by analyzing the p and then to resume CPR

#### More Stats 0 <u>∎®®®®®®</u>®®

Your chance of survival while uring a cardiac emergency decrea by **10% every minute** without CPR

AEDs at Work

the you one of the 50% who can locate an AED at your work? With 10,000 cardiac arrests happening in the workplac annually, you have the potential to save thousands of lives. Immediate CPR and use of an AED can double, or even

who receive a shock from an AEC in the first minute. **9 out of 10 live** 

The American Heart As ion does not recommend one device over another. The AED you choose should be simple and easy to use

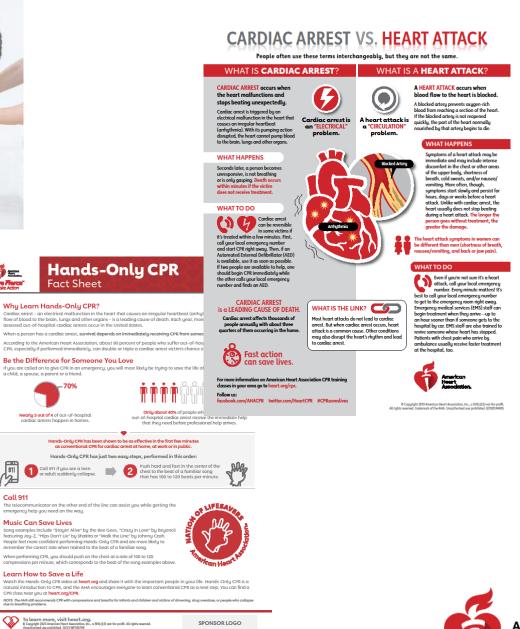
#### Children and AEDs

Children older than 8 years can be treated with a standard AED. For children 1 to 8 years old, the American Hear nds the pediatric-attenuated pads that are purchased separately. In infants younger than I year, a manual defibrillator is preferred. If a manual defibrillator is not available, an AED with a dose attenuate

CARES 2021 Annual Report, Conduct Arrest R. so CW, Aday AW, Almarzooq ZI, et al; for the American Heart Association ( bcommittee. Heart disease and stroke statistics—2022 update: a report f

> Visit heart.org/AED to learn ma KJ-1729 11/23 © 2023 American Heart Associati

#CPRwithHeart #NationOfLifesover





1

.

1

-

-

-

-

-

-

\_

\_

-

-

-

~

\_

-

\*

-

-

- -

. -



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

**Our Vision:** Advancing health and hope for everyone, everywhere.

**Our Guiding Values:** 





American Heart Association.

## **BARRIERS TO HEALTH EQUITY**









11111



## **Examples of Rural Barriers to Health**



Individual Health Factors Tobacco & Nicotine Use Physically Inactive Diabetes, Obesity & Cholesterol Depression, suicide & substance abuse



Social Determinants of Health Lower income & poverty Education Unemployment Housing inequities Transportation Food insecurity



Barriers to Medical Care Rural hospitals struggle Hospital distance Lack of outpatient & post-acute care Health care hiring Uninsurance

### Four primary areas of focus



## Chronic Disease



Tobacco & Vaping



### **Nutrition Security**



**Cardiac Readiness** 







# Chronic Diseases

Prevention and Management Resources and Tools



## **Clinical SMBP and Community Hypertension Hubs**

- Can be hosted in libraries, senior centers, churches, or other community gathering places.
- Access to validated, "home" blood pressure monitors.
  - For use onsite, and optionally, for checkout depending on the organization.
- Educational materials for:

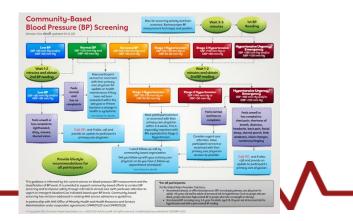
TARGET: **BP** 

- Staff to ensure a general level of comfort with the process (Blood Pressure 101).
- Patrons to ensure their comfort in using the device and understanding what those numbers mean / how to keep blood pressure low.
- Resources to support referrals to healthcare for those who have additional questions or (may) have concerning blood pressure levels.

American Heart Association.



Menomonee Falls Public Library, Staff Training Menomonee Falls Wisconsin



11

## **Preparing for Success**

#### Self-measured blood pressure Patient training checklist

Instructions: To ensure all necessary steps and components are covered, use this checklist when training your patient's on how to perform self-measured blood pressure (SMBP).

#### Gather supplies

Tape measure
What is SMBP? (PDF)
SMBP infographic (PDF in English or Spanish)
SMBP recording log (PDF)
SMBP device accuracy test (PDF)

#### Provide background information on SMBP to the patient (if not explained by provider)

Explain how SMBP allows the provider to get a more accurate and complete picture of the patient's blood pressure outside of the office (more readings, over a longer period of time, in the patient's normal environment)

Locate mid-upper arm

(acromion process) and measure

the length of the arm to the bony

for determining cuff size.

edures Manual.odf

protuberance at the elbow (olecranon process). Divide this distance in half and

that is the mid-upper arm where you

should measure the arm circumference

wn.ede.gow/nchs/data/ Amanuals/2017\_Anthropometry\_

Using a measuring tape, place one end on the bony prominence at the shoulder

Tip: Hand out the "What is SMBP?" document.

#### Determine SMBP cuff size

Use tape measure to measure the circumference of the patient's mid-upper arm in centimeters (see image for more detail)

Tip: Ideally, this is done before the patient purchases a device so you can ensure the device and cuff purchased are appropriate for the patient.

Check patient's SMBP device for accuracy Tip: Use the SMBP device accuracy test.

#### Determine the patient's blood pressure arm (if not currently identified)

☐ Measure the patient's blood pressure in each arm and use the arm with the higher reading for all future readings

#### Teach patient how to properly prepare for self-measurement

 $\hfill\square$  Avoid caffeine, to bacco and exercise for at least 30 minutes before measurement

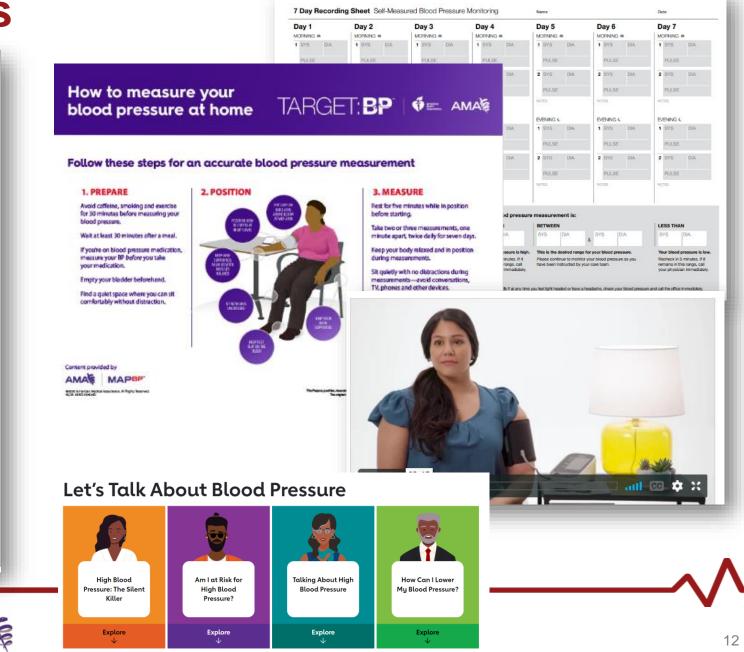
Empty bladder if full

Take BP measurements before blood pressure medications

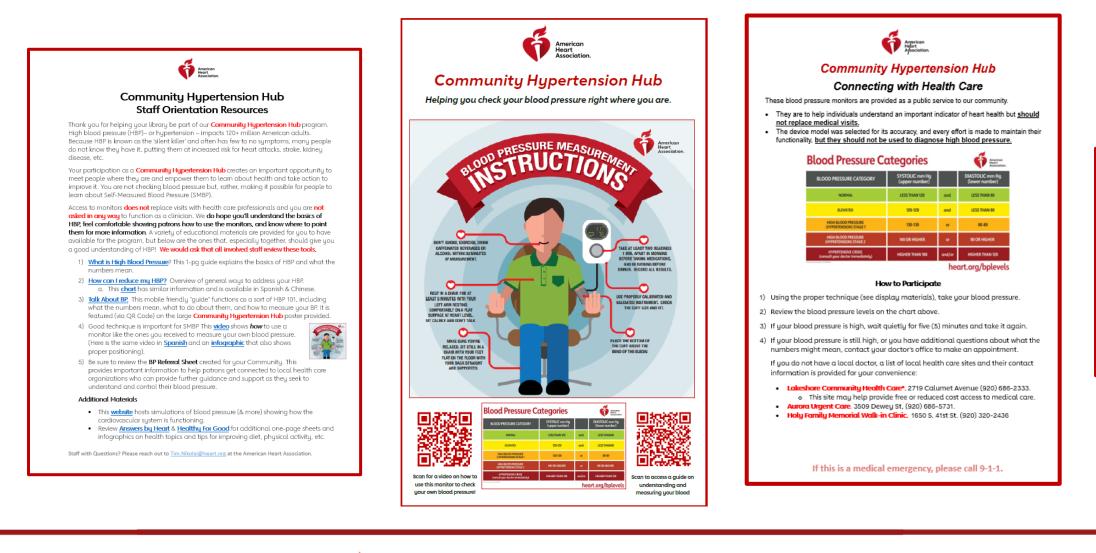
Tip: Show SMBP training video and hand out the SMBP infographic.

#### Teach patient the proper positioning for self-measurement





## **Community Hypertension Hub Sample Materials**



TARGET: BP

#### Tru to check your blood pressure twice a week For best results, sit comfortably with both feet on the floor for at Por best results, sit combridadig with both record in the or the least two minutes before taking a measurement. Review the proper technique for checking your blood pressurei including resting your arm on a table so the blood pressure cuff is at about the same height as your heart. Record your blood pressure on this sheet and show it to your doctor at every visit Day 5: AM Day 5: PM Day 1: PM Day 2: AM Day 6: AM Day 2: PM Day 6: PM Day 3: AM Day 7: AM Doy 3: PM Day 7: PM Day 8: AM Day 4: AM Doy 4: PM Dou 8: PM Always losing papers? Going green? A variety of blood pressure monitoring apps Scan for tips on are also available for finding the right health app. Apple & Android.

💮 🚞 My blood pressure log



# Type 2 Diabetes





## **Educational Resources**



#### DOWNLOADABLE PATIENT RESOURCES

- What is Diabetes?\*
- Types of Diabetes\*
- Take Care of Your Heart When You Have Type 2 Diabetes\*
- 4 Questions to Ask Your Doctor About Diabetes and Your Heart\*
- 7 Tips to Care for Your Heart When You Have Type 2 Diabetes\*
- Where to Begin on Your Heart Care Journey
- ADA's Ask the Experts Overview Sheet
- Medication Chart

# EXAMPLE STATES OF THE ART OF THE



#### \*Available in Spanish









# Target: BP, CCC and Target: Type 2 Diabetes Submission is Open! Deadline May 17, 2024

## 





- Provide clinical guidelines and protocols.
- Offer free resources directed towards both providers and patients.
- Connect clinical partners to others around the country engaged in the same work.
- Offer recognition opportunities for any health care organization that demonstrates a commitment to, and/or achieves, clinical excellence.

Registration for program(s) can be completed at <u>heart.org/registermyoutpatientorg</u>



...........





For HCOs with ≥70% BP Control.

# Target: BP Gold+

- Aspirus Cardiology
- Community Connections Free Clinic
- Froedtert Hospital
- Gundersen Health System
- NorthLakes Community Clinic- Lakewood
- NorthLakes Community Clinic White Lake
- Primary Care Associates of Appleton
- ProHealth Medical Group
- Scenic Bluffs Community Health Centers
- Southwest Health

Target: BP awarded Gold+ and Silver designations for those organizations who attested to implementing at least 4 of the 6 Evidence Based Activities that support accurate Blood Pressure measurement. The American Heart Association & American Medical Association encourage all HCOs to pursue these effective strategies and offer support – and recognition – for doing so.





- Ascension Airport Medical Clinic
- Ascension Columbia St. Mary's Milwaukee at Columbia West
- Ascension Columbia St. Mary's Milwaukee at Gateway
- Ascension Columbia St. Mary's Milwaukee at Glendale
- Ascension Columbia St. Mary's Milwaukee West Allis
- Ascension Columbia St. Mary's Ozaukee at Cedar Mills
- Ascension Columbia St. Mary's Ozaukee at Cedarburg
- Ascension Columbia St. Mary's Ozaukee at Germantown
- Ascension Columbia St. Mary's Ozaukee at Grafton
- Ascension Medical Group Greenfield
- Ascension Medical Group All Saints Spring St Campus -Cardiology
- Ascension Medical Group at All Saints at Four Mile Road

# Target: BP Gold

For HCOs with ≥70% BP Control AND who attest to at least 4 of 6 Accurate Measurement Practices

- Ascension Medical Group at All Saints at Union Grove
- Ascension Medical Group at All Saints Hospital Spring Street Campus - Internal Medicine
- Ascension Medical Group at Angel of Hope Clinic
- Ascension Medical Group at Brown Deer
- Ascension Medical Group at Capital and Lilly
- Ascension Medical Group at Cudahy
- Ascension Medical Group at Franklin Cardiology
- Ascension Medical Group at Franklin Internal Medicine
- Ascension Medical Group at Greenlane
- Ascension Medical Group at Greenville
- Ascension Medical Group at Jackson Street
- Ascension Medical Group at Kaukauna
- Ascension Medical Group at Keil



- Ascension Medical Group at Koeller Street
- Ascension Medical Group at Little Chute
- Ascension Medical Group at Main Street
- Ascension Medical Group at Mayfair Road Internal Medicine
- Ascension Medical Group at Mequon
- Ascension Medical Group at Oak Creek
- Ascension Medical Group at Oneida St

# Target: BP Gold

- Ascension Medical Group at Pewaukee
- Ascension Medical Group at Richmond Street
- Ascension Medical Group at South 16<sup>th</sup> Street
- Ascension Medical Group at St. Francis Euclid Building
- Ascension Medical Group at St. Francis Ohio Building Ascension Medical Group at West Oaklahoma -Cardiology
- Ascension Medical Group at West Oaklahoma Internal Medicine
- Ascension Medical Cardiac Rhythm Specialists
- Ascension Medical Group at WI Card Milwaukee
- Reedsburg Area Medical Center





For HCOs committed to further improving BP Control AND who attest to at least 4 of 6 Accurate Measurement Practices

## **Target: BP Silver**

- Access Community Health Center
- Aspirus Divine Savior Hospital & Clinics
- Froedtert Menomonee Falls Hospital Community Outreach Health Clinic
- Health Care Network, Inc.
- Hope Clinic and Care Center, Inc.
- Muslim Community and Health Center of Wisconsin
- NorthLakes Community Clinic Ashland
- NorthLakes Community Clinic Hayward
- NorthLakes Community Clinic Hurley
- NorthLakes Community Clinic Iron River
- NorthLakes Community Clinic Minong
- Open Arms Free Clinic
- Prairie Clinic
- Progressive Community Health Centers



# **Target: BP Participant**



For first time participants, committed to improving BP Control.

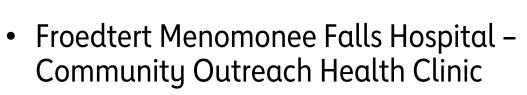
- Ascension Medical Group Waukesha
- Ascension Medical Group at Menomonee Falls
- Lakeshore Community Health Care, Inc.



# 

For HCOs with ≥70% rate for guideline-based statin prescriptions.

Os with ≥70% rate uideline-based



• Southwest Health

## Check. Change. Control. Cholesterol



For HCOs committed to improving cholesterol control.

- Muslim Community and Health Center of Wisconsin
- Primary Care Associates of Appleton





For HCOs with success in both CVD and Diabetes Control.

# **Target: Type 2 Diabetes**

- Gundersen Health System
- NorthLakes Community Clinic Lakewood
- Primary Care Associates of Appleton



## HEART ASSOCIATION TARGET: TYPE 2 DIABETES DARTICIPANT

For HCOs committed to improving both CVD and Diabetes Control.

- NorthLakes Community Clinic- Hurley
- Muslim Community and Health Center of Wisconsin
- Froedtert Menomonee Falls Hospital Community Outreach Health Clinic
- Health Care Network and Care Center, Inc.
- Hope Clinic and Care Center, Inc.

# **Target: Type 2 Diabetes**

- NorthLakes Community Clinic Ashland
- NorthLakes Community Clinic Hayward
- NorthLakes Community Clinic Iron River
- NorthLakes Community Clinic Minong
- NorthLakes Community Clinic White Lake
- Progressive Community Health Centers
- Lakeshore Community Health Care, Inc.
- Southwest Health



## **TARGET:BP** Resource Links

Target: BP Submission for recognition opened on January 1st

 Registration for program(s) can be completed at heart.org/registermyoutpatientorg

Target: BP Newsletter

Target: BP Webinar Register Here!

- <u>Data Submission 101 for 2024 Award Achievement (Target: BP,</u> <u>CCC-Cholesterol, Target: Type 2 Diabetes)</u>
- January 24<sup>th</sup> from 12:00pm-1:00pm

**Deadline for Submission is May 17th** 



# Nutrition Security Tobacco & Vaping Cardiac Readiness

## **Nutrition Security**



#### **Changing Policies & Practices**

- Screening for nutrition insecurity and referral to resources in libraries, clinics, YMCAs, and more.
- Helping increase access to healthy produce by working with farmer's markets, food pantries and more.

"Now I can finally shop here since you have EBT." - Rural Farmers Market Customer



OOD INSECURITY SCREENIN

AND REFERRAL PROCESS

#### **Educational Resources**



American Heart Association

## **Tobacco & Vaping**



4

#### **Changing Policies & Practices**

- Helping clinical and community sites screen for tobacco use and refer to cessation resources
- Helping schools update their tobacco policy to be more comprehensive and equitable

Educational Curriculum
<ol> <li>Age-appropriate, evidence-based, cross-curricular, school-based tobacco product education shall be included in the education provided for all students in K-12 at least once per year.</li> <li>Y = N =</li> </ol>
Policy Comprehensiveness:
<ol> <li>The policy applies to ALL tobacco products as indicated in the suggested language. (Note: suggested language/definitions can help prevent the need to update again as tobacco products evolve). Y □ N □</li> </ol>
2. The policy prohibits use of any tobacco product by students, staff, and visitors. Note: An exception can be made for the use of tobacco as part of an indigenous cultural practice or educational activity that is approved by administrators/ district, however, it should not be inhaled or ingested. $Y \square N \square$
3. The policy prohibits the possession of tobacco products/accessories by students. Y $\square$ N $\square$
4. The policy applies at all times, on all property (including vehicles) and all school sponsored events, whether on or off campus $Y\square$ N $\square$
5. The policy prohibits the promotion or display of tobacco products, the acceptance of gifts or contributions from the tobacco industry, or curriculum that was paid for or developed by tobacco industry. Y □
6. There is a plan/strategy for communicating (incl. signage) and enforcing the tobacco policy to visitors . Y $\square$ N $\square$
Policy Equity:
<ol> <li>The policy reflects a progressive approach to discipline students that includes the use of supportive practices (such as collaborative conversations, webal agreements, allematives to suspension, etc) unless three are extenuating circumstances: Y CI N O</li> </ol>
<ol> <li>The policy states that punitive approaches (suspension, expulsion) are used only after supportive approaches have been used or there are extenuating circumstances<sup>*</sup>. Y I N I</li> </ol>

ent or school resource officers are not involved in the disciplinary process fr offenses. This does not preclude contacting law enforcement rce officers when needed to protect student, staff or visitor safety. Y  $\square$  N  $\square$ 

the code of conduct or policy states that students interested in ssation programs, Y 🗆 N 🗆

#### Educational **Resources**









yourethecure.org



## **Cardiac Readiness**



#### Changing Policies & Practices

- Systematically integrating CPR training to reach populations in need. (moms, opioid response)
- CPR Training requirement for staff/volunteers.
- Developing <u>Cardiac</u> <u>Emergency Response</u> <u>Plans</u> for schools and other entities.





The American Heart Association (AHA) wants all people to learn First Aid, CPR and AED to create a generation of people that are prepared to act in an emergency, putting more qualified lifesavers in our communities and creating a Nation of Heartsavers<sup>w</sup>.

About 9 in 10 cardiac arrest victims who receive a shock from an AED in the first minute liv During cardiac arrest, CPR can double or triple a person's chance of survival.

- Plan (CERP). The following checklist contains the minimum steps to include in your plan
- Share the CERP at your site. Ensure the plan is integrated with local emergency medical services, fire and police (if applicable). Post the CERP in key locations throughout the site.
- Implement Automated External Defibrillator (AED) placement and a routine maintenance schedule within the school, workplace, or athletic facility (similar to fire-extinguisher protocols)
- Schedule and maintain ongoing staff training in First Aid, CPR and AED
- Educate as many people as possible in Hands-Only CPR (which can be used for teens and adults). If feasible, include information on rescue breathing and/or

# 2 STEPS



#### Educational Resources



CPR Training Center Locator



CPR Anytime Kits (Adult or Infant)





# Training Resources

## Community Facing Professional Education

#### **Collections of Presentations**

- Healthy For Life Nutrition Lessons
- Empowered To Serve Modules.

#### **Ongoing Opportunities**

- KDBH: Ask The Experts Podcasts.
- House Calls: Real Docs, Real Talk™



- Health Equity
- Hypertension
- <u>Resuscitation</u>

A mix of free / \$\$ options.

- Stroke & Brain Health
- Telehealth Professional Cert.
- Tobacco Treatment Certification.

TARGET: BP | •

Future & Past webinars.



## **Rural Opportunities for Support**

American Heart Association.

#### Writing a New Book on Heart Health

A Grant/Assistance Opportunity for Rural Libraries to Improve Community Health

#### Receive <u>up to</u> \$1500 for your efforts to improve health in your community.

The American Heart Association's mission is to be a *relentless force for a world of longer healthier lives*. That mission is underscored by our Guiding Values which include "meeting people where they are" and "building powerful partnerships." Libraries – especially in rural communities – offer a tremendous opportunity to do both of those things and we want to collaborate with you to tackle health disparities in a comprehensive, sustainable way.

Among other health challenges, rural Americans face higher of <u>high blood pressure</u>, <u>nutrition insecurity</u>, <u>cardiac arrest death rates</u>, <u>tobacco use</u>, and more. At the same time, rural communities have strong assets – organizations and individuals who are dedicated to making a difference and thinking creatively to overcome challenges.

To that end, the American Heart Association has worked with rural libraries in various contexts to leverage our science, resources, and experience with their position of trust in and access to communities in need. And now we are hoping to do more of the same – in your community. (See Page 2 for more details on the work we've done). Opportunities include, but are not limited to:

- Empowering patrons to check their own blood pressure in or through the library, including a referral to a local clinic partner for more assistance.
- Systematically identifying/referring to resources, patrons facing nutrition insecurity or

#### Deadline – March 1st





Looking for host sites & candidates for our Summer & Fall 2024 Terms



## Next Steps...

- 1) Share these tools and resources to educate your friends, family, and community.
- 2) Consider if your organization or another in your community might be interested in:
  - Being a host for a Community Hypertension Hub
  - Systematically screening for Nutrition Insecurity
  - Adopting a Cardiac Emergency Response Plan

3) Consider sharing the rural library and HeartCorps opportunities for support.





## **QUESTIONS OR ASSISTANCE?**

Subscribe to the (Rural) Health Update



#### Tim Nikolai

Sr. Rural Health Director, Midwest <u>Tim.Nikolai@heart.org</u> M 414.502.8780





#### Susan Hjelsand

Sr. Community Impact Director, Wisconsin Susan.Hjelsand@heart.org

M 414.227.1406



#### Zach Wilks-Metrou

Community Impact Director, Wisconsin Zachary.Wilks-Metrou@heart.org M 414.227.1408





# **UPCOMING EVENTS:**

- Tuesday, January 30<sup>th</sup>:
- American Heart Month Kickoff @ the State Capitol

February 2: National Wear Red DayFebruary 10: MKE Heart & Stroke BallFebruary 23: Go Red For Women - Madison



## **THANK YOU**