



KENTUCKY Heart Disease & Stroke Prevention Task Force

Strategic Map
and Plan
2017-2019



Heart Disease & Stroke Prevention

TASK FORCE

KENTUCKY

KHDSP Task Force Strategic Map and Plan 2017-2019

Contents

Mission Statement	3
Overarching Strategies	3
Goal A: Utilization of Evidence-Based Prevention Strategies	4
Objective A1: Promote and reinforce healthy behaviors and practice messaging.	4
Strategy 1	4
Strategy 2	4
Objective A2: Promote effective community-clinical linkages.....	4
Strategy 1	4
Goal B: Utilization of Evidence-Based Integrated Cardiovascular Health (CVH) Delivery Systems	5
Objective B: Implement statewide cerebrovascular and cardiovascular systems of care.	5
Objective B1: Improve statewide cerebrovascular systems of care.	5
Strategy 1	5
Strategic Map 2017-2019.....	6
Strategy 2	8
Strategy 3	8
Strategy 4	8
Objective B2: Update and continue to improve statewide cardiovascular systems of care.	9
Strategy 1	9
Strategy 2	9
Strategy 3	10
Strategy 4	10
Goal C: Secure Policy and Environmental Changes to Improve the Cardiovascular and Cerebrovascular Health of Kentuckians.	11
Objective C1: Build support for cardiopulmonary resuscitation (CPR) training in schools.	11
Strategy 1	11
Objective C2: Build support for enactment of comprehensive state and local smoke-free policies....	11
Strategy 1	11
Strategy 2	11
Objective C3: Enhance the knowledge of heart disease and stroke prevention.....	11
Strategy 1	11

KHDSP Task Force Strategic Map and Plan 2017-2019

Mission Statement

Improve cardiovascular and cerebrovascular health for all Kentuckians.

Overarching Strategies

Target health care systems and providers, worksites, schools, communities, and disparate populations.

Conduct process and outcome evaluation.

Cultivate and expand collaboration and partnerships to enhance community and clinical linkages.

Explore the possibility of data information exchange and quality improvement.

KHDSP Task Force Strategic Map and Plan 2017-2019

Goal A: Utilization of Evidence-Based Prevention Strategies	
Objective A1: Promote and reinforce healthy behaviors and practice messaging.	
Strategy 1	Action Items
Identify and emphasize key messages.	Utilize the key messages as outlined in the Cardiovascular, Assessment, Risk Reduction and Education (CARE) Collaborative. <ul style="list-style-type: none"> Develop a smart phone app which can be used in conjunction with the CARE Collaborative as a means of tracking blood pressure as well as accessing key messaging.
	Focus on the ABCs (A1C, blood pressure with an emphasis on sodium reduction, cholesterol, and smoking/tobacco). <ul style="list-style-type: none"> Interlace the CARE Collaborative with other programs focused on diabetes, smoking cessation, healthy eating, such as the Million Hearts Initiative. Utilize evidence-based methodology in emphasizing and conveying key messaging.
	Incorporate content related to obesity, physical activity, and healthy foods and beverages.
Strategy 2	Action Items
Standardize key heart disease and stroke prevention messaging.	Develop a communication plan based upon the American Heart Association/American Stroke Association messaging.
	Implement the CARE Collaborative toolkit at local health department (LHD) funded sites.
	Make messaging and toolkit available to LHD non-funded sites.
Objective A2: Promote effective community-clinical linkages.	
Strategy 1	Action Items
Evaluate and expand community clinical linkages to support prevention.	Evaluate pilot data and determine how to expand and move forward. <ul style="list-style-type: none"> Kentucky Regional Extension Centers (REC) Signature Partnership Project Barren River District Environmental Scan Appalachian Partnership for Positive Living and Eating (APPLE Seeds) with Ashland-Boyd County Health Department Community Health Worker Programs
	Develop an expansion plan in response to evaluation.

KHDSP Task Force Strategic Map and Plan 2017-2019

Goal B: Utilization of Evidence-Based Integrated Cardiovascular Health (CVH) Delivery Systems	
Objective B: Implement statewide cerebrovascular and cardiovascular systems of care.	
Objective B1: Improve statewide cerebrovascular systems of care.	
Strategy 1	Action Items
Identify and improve current cerebrovascular systems of care.	Continue to identify and map certified stroke centers by certification levels as defined by KRS 216B.0425, and disseminate to Kentucky Board of Emergency Medical Services (KBEMS). <ul style="list-style-type: none"> - Acute stroke ready hospitals - Primary stroke centers - Comprehensive stroke centers
	Continue collaboration with Kentucky Hospital Association's (KHA) Rural Hospital Flexibility Program.
	Partner with Kentucky hospitals to increase intravenous therapy (IV) tissue plasminogen activator (t-PA) utilization.
	Disseminate KBEMS statewide inter-facility stroke transfer during or after IV t-PA protocol.
	Identify Emergency Medical Service (EMS) agencies which have a field transport protocol for stroke.
	Partner with KBEMS to determine stroke specific data points available for capture.
	Explore pilot project for EMS feedback utilizing proposed data elements.
	Continue collaboration with the KBEMS subcommittee, Cardiac and Stroke Care.
	Enhance EMS interaction and support of dispatch centers.
	Partner with KBEMS for continued development of inter-facility transport protocols for all stroke subtypes.



Kentucky Heart Disease and Stroke Prevention Strategic Map: 2017-2019

Improve Cardiovascular and Cerebrovascular Health for All Kentuckians.



Utilization of Evidence-Based Prevention Strategies

Utilization of Evidence-Based Integrated CVH Delivery Systems

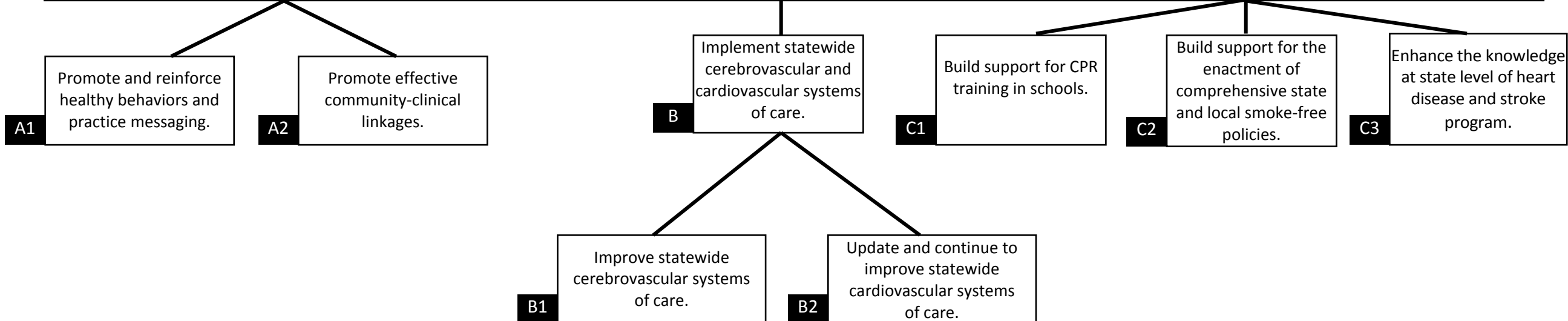
Secure Policy and Environmental Changes to Improve the Cardiovascular and Cerebrovascular Health of Kentuckians

Target health care systems and providers, worksites, schools, communities, and disparate populations.

Conduct process and outcome evaluation.

Cultivate and expand collaboration and partnerships to enhance community and clinical linkages.

Explore the possibility of data information exchange and quality improvement with the Kentucky Health Information Exchange.



KHDSP Task Force Strategic Map and Plan 2017-2019

Goal B: Utilization of Evidence-Based Integrated CVH Delivery Systems	
Objective B: Implement statewide cerebrovascular and cardiovascular systems of care.	
Objective B1: Improve statewide cerebrovascular systems of care.	
Strategy 2	Action Items
Continue SEQIP through FY 2019.	Assess current Stroke Encounter Quality Improvement Project (SEQIP) members for continued participation by March 2016.
	Recruit at least one hospital pursuing acute stroke-ready certification by March 2017.
	Utilize registry to develop and implement an action plan around quality metrics and education.
	Develop and disseminate Stroke Registry Data Summary in accordance with KRS 211.575, which goes to the governor and legislature and includes recommendations for improving stroke systems of care.
Strategy 3	Action Items
Continue to engage hospitals to become stroke certified.	Disseminate the Kentucky state plan for Stroke Systems of Care and statewide map to target hospitals by December 2016.
	Monitor and provide support for stroke program development to target hospitals through December 2019.
	Update and disseminate KHA stroke resources.
Strategy 4	Action Items
Develop collaboration among healthcare systems and public health in the state to standardize messaging.	Provide patient and family education regarding signs and symptoms of stroke.
	Provide patient and family education regarding the importance of calling 911.
	Provide patient and family education regarding primary and secondary prevention of stroke.

KHDSP Task Force Strategic Map and Plan 2017-2019

Goal B: Utilization of Evidence-Based Integrated CVH Delivery Systems	
Objective B: Implement statewide cerebrovascular and cardiovascular systems of care.	
Objective B2: Update and continue to improve statewide cardiovascular systems of care.	
Strategy 1	Action Items
Identify and improve current heart systems of care.	Develop a dynamic statewide map detailing the capabilities of facilities.
	Develop guideline based statewide ST-segment elevation myocardial infarction (STEMI) protocols for transport.
	Develop guideline based statewide STEMI protocols for care.
	Expand the use and adoption of national quality assurance initiatives/registries which address systems of care for acute cardiovascular care.
Strategy 2	Action Items
Engage receiving hospitals to work with its referral base to improve patient outcomes.	Utilize evidence-based practices for education and development of transfer protocols.
	Develop a rapid plan of care for patient transfers.
	Assess referral barriers in referral hospitals.
	Provide continuous EMS education, training, and feedback.
	Provide a feedback plan for all receiving and referral hospitals to improve outcomes.
	Discuss the need for referral staff compliance with using feedback to improve outcomes.

KHDSP Task Force Strategic Map and Plan 2017-2019

Goal B: Utilization of Evidence-Based Integrated CVH Delivery Systems	
Objective B: Implement statewide cerebrovascular and cardiovascular systems of care.	
Objective B2: Update and continue to improve statewide cardiovascular systems of care.	
Strategy 3	Action Items
Develop collaboration among healthcare systems and public health in the state to standardize messaging.	Provide patient and family education regarding signs and symptoms of acute myocardial infarction (AMI).
	Provide patient and family education regarding the importance of calling 911.
	Provide patient and family education regarding primary and secondary prevention of heart attack.
	Provide patient and family education regarding hands only cardiopulmonary resuscitation (CPR).
	Provide patient and family education regarding use of automatic external defibrillators (AEDs).
Strategy 4	Action Items
Engage KBEMS in heart systems of care.	Continue collaboration with the KBEMS subcommittee, Cardiac and Stroke Care.
	Increase the adoption of 12-lead electrocardiograms (EKGs); work with EMS agencies to obtain grants for 12-lead capabilities.
	Continue to engage and communicate with EMS as a main component of the regional systems of care.
	Enhance EMS interaction and support of dispatch centers for appropriate screening of AMI patients.

KHDSP Task Force Strategic Map and Plan 2017-2019

Goal C: Secure Policy and Environmental Changes to Improve the Cardiovascular and Cerebrovascular Health of Kentuckians.	
Objective C1: Support implementation of the state requirement to provide CPR training to high school students.	
Strategy 1	Action Items
Support implementation of the state law requiring CPR training for high school students.	Encourage task force members such as hospitals, EMS providers to partner with local high schools in their communities to provide training.
	Work with the Department of Education to ensure the CPR training resource guide is distributed to all high schools in Kentucky.
	Promote CPR Awareness Month.
Objective C2: Build support for enactment of comprehensive state and local smoke-free policies.	
Strategy 1	Action Items
Work with local community coalitions to educate local elected officials about the health effects of secondhand smoke.	Encourage task force members to join coalitions in their communities.
	Secure support from stakeholder organizations in local communities.
	Provide educational materials on the risks of cardiovascular disease resulting from exposure to secondhand smoke.
Strategy 2	Action Items
Work with the Smoke-Free Kentucky coalition to educate decision and policy makers about the health effects of secondhand smoke and the need for policies that protect workers and the public from secondhand smoke.	Encourage task force members to join Smoke-Free Kentucky.
	Identify and train on policies that reduce heart disease and stroke.
	Provide educational materials on the risk of cardiovascular disease resulting from exposure to secondhand smoke.
Objective C3: Enhance the knowledge of heart disease and stroke prevention.	
Strategy 1	Action Items
Educate state and local leadership and state policy makers on the impact of heart disease and stroke prevention in Kentucky.	Meet with state and local health department leaders to discuss heart disease and stroke prevention and the priorities and initiatives of the KHDSP Task Force.
	Meet with legislators to discuss heart disease and stroke prevention and the priorities and initiatives of the KHDSP Task Force.
	Provide expert testimony in key legislative committees when possible.

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Kentucky Public Health