



KENTUCKY
Heart Disease &
Stroke Prevention
Task Force

**Strategic Map
and Plan
2017-2019**



Heart Disease & Stroke Prevention
TASK FORCE

K E N T U C K Y

Kentucky Heart Disease and Stroke Prevention Task Force Strategic Map and Plan 2017-2019

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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.

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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, and lifestyle changes. • 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.

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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.

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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.

A1 Promote and reinforce healthy behaviors and practice messaging.

A2 Promote effective community-clinical linkages.

B Implement statewide cerebrovascular and cardiovascular systems of care.

C1 Support implementation of the state requirement to provide CPR training to high school students.

C2 Build support for the enactment of comprehensive state and local smoke-free policies.

C3 Enhance the knowledge of heart disease and stroke prevention.

B1 Improve statewide cerebrovascular systems of care.

B2 Update and continue to improve statewide cardiovascular systems of care.

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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 Strategic Map and Plan 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.

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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.

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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 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.

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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 Kentucky 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 the 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 Kentucky Heart Disease and Stroke Prevention (KHDSPP) Task Force.
	Meet with legislators to discuss heart disease and stroke prevention and the priorities and initiatives of the KHDSPP Task Force.
	Provide expert testimony in key legislative committees when possible.

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Kentucky Public Health