ACUTE MYOCARDIAL INFARCTION – COMMUNITY ENGAGEMENT COMMITTEE (ACE)

PROMOTION OF "CALLING 911" FOR AMI

DRAFT FOR DISCUSSION

THE CHALLENGE

- The majority of deaths from heart attacks caused by blockage in major arteries to the heart, known to physicians as STEMI AMI, occur within the first 1to 2 hours after symptom onset. You can survive and even thrive after this kind of heart attack if a medical team works together to "bust" the clot quickly. When you or someone you love has that kind of heart attack, every second counts.
- Trained medical professionals in specialized facilities can save heart muscle if they can "bust" the clot -within 2 to 3 hours after symptom onset. Saving heart muscle means saving lives and quality of life.
- Most delay in treatment is due to patients or their families who may not recognize symptoms, or might hesitate to call 911—Emergency Medical Services (EMS)
- Ambulance transport is essential for success of clot busting.
  - Diagnosis and treatment can begin right away in the ambulance, saving crucial minutes.
  - EMS can alert the hospital so it's ready when you arrive.
  - You get priority attention once you arrive at the Emergency Department.-
- On average only 23% of AMI victims Call 911. An alarming 77% don't. Many of those who don't either die or lose some of their physical capacity they had before the heart attack.
- Multiple community efforts to improve Call 911 for AMI have at best increased usage to 33% of hospital arrivals. The *In a Heartbeat* Project aims to do much better.

THE OPPORTUNITY

- There are many groups and organizations serving populations at risk and the general public that could inform and encourage Mainers to recognize symptoms and call 911 immediately.
- *In a Heartbeat* can help these organizations by working with them to develop an informational "tool kit" and help disseminate the information.
- *In a Heartbeat* has the capacity to compile a community engagement and instructional tool kit melding the prior excellent work of others.
- EMS providers have the ability to connect with their communities to break down the barrier of hesitation based on "not wanting to bother them."
- Potential funders are willing to pool funding to provide a state-wide uniform effort around Call 911 focused on AMI.

DRAFT

THE "*IN A HEARTBEAT*" PLAN

Short Term Strategies (1-2 Years):

- Public outreach: Partner with EMS and existing organizations to deliver information and encouragement to the target audience through meetings and presentations in settings where individuals typically gather or get information.
  - Create a presentation toolkit for Call 911 focused on urgency and action. Incorporate culturally appropriate material.
  - Train willing EMS, nurses and physicians in presentation.
  - Contract for
    - Support of speakers bureau database, and
    - Recruitment and training of presenters.
  - Pay presenters enough to cover their personal expenses and enough to make the pass-through of funds to their organizations meaningful (EMS unit, community organization, provider organization).
  - Evaluate: identify control community and subject community of similar demographics for pre and post survey.
  - Launch a competition for 7th grade students to use their new laptops to develop short video presentations. Winning videos will be posted on the Maine Quality Forum website.
  - Launch an email viral marketing campaign using existing organizations and networks, such as peers, advocacy groups, community groups and health organizations.
- Provider outreach:
  - Primary Care Providers: provide information to Primary Care providers and case managers to distribute and share.
  - Include information in CPR training.
  - Use the American Heart Association Scientific Session to inform/train providers.

Longer Term Strategies

- MQF, the Maine Cardiovascular Health Program and EMS should jointly work together to implement the recommendations of the AMI Community Engagement Workgroup (ACE), with strong representation from EMS.
- The "*In a Heartbeat*" ACE Workgroup (AMI Community Engagement workgroup) should continue to convene, with stronger participation from EMS, hospitals, and other interested parties.
- The partners should explore additional strategies and funding mechanisms, including larger scale electronic media coverage.

DRAFT

Evaluation

With leadership from the Maine Quality Forum and the Maine CDC Cardiovascular Program, the ACE Workgroup should monitor implementation and evaluate short term strategies to assess their effectiveness.

COST

The total cost for the In a Heartbeat Project is $XXXXX. The Maine Quality Forum will provide $XXXXX, leaving $XXXXX to be raised. Maine Health will provide a challenge grant of $XXXX to be matched by other sources to fully fund the campaign.

In a Heartbeat ACE Project Budget (Two-year)

Activity	Total Cost
PUBLIC OUTREACH	
Tool kit	
Training	
Presentation	
Speakers Bureau	
Evaluation	
7th Grade Competition	
Viral Marketing	
PROVIDER OUTREACH	
Distribute Information	
AHA Scientific Session	
TOTAL	

DRAFT