

Million Hearts[®] in Municipalities Tool Kit



Module 1: Overview



Acknowledgments

This Million Hearts® in Municipalities Tool Kit was completed by the Centers for Disease Control and Prevention (CDC) in collaboration with the National Association of County and City Health Officials (NACCHO) with the goal of helping health departments and municipal organizations implement Million Hearts® strategies at a local level. NACCHO is an association that provides advocacy, leadership, subject matter expertise, and resources to 3,000 local public health departments across the United States.

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Module Overview

Scope and User Outcomes

The Million Hearts® in Municipalities* Tool Kit is intended to assist local and state departments of health to be active partners in the Million Hearts® initiative, which will henceforth be referred to as MH.

What's included?

- Overview of the MH in Municipalities Tool Kit
- Introduction to key concepts and principles of MH
- Readiness Assessment and Action Plan to initiate or enhance MH efforts
- Resources to provide additional information about MH

What's not included?

- This module does not include a step-by-step template to create your own MH initiative. Based upon your municipality's cardiovascular health needs and interests, you and your team will explore evidence-based approaches that are most appropriate for your population.

Expected outcomes for module users:

- Understand the basics of MH.
- Identify current strengths, opportunities, and gaps related to cardiovascular disease (CVD) prevention in your municipality.
- Increase awareness of resources and tools that provide additional information about MH and help identify strategies best suited for the needs of your state or municipality.

* The term "municipality" is used loosely throughout all modules of this Tool Kit. You may be able to implement these strategies in your city, town, county, state, or other jurisdiction.

Section 1: Million Hearts® in Municipalities

Tool Kit Overview

In response to growing interest at the local level, the Centers for Disease Control and Prevention's (CDC) Division for Heart Disease and Stroke Prevention and the National Association of County and City Health Officials (NACCHO) created the MH in Municipalities Tool Kit.

The Tool Kit is a resource with five modules, which can be used to support planning, developing, implementing, and monitoring cardiovascular disease (CVD) prevention activities at the municipal, county, or state levels. [Table 1](#) provides an overview of the modules included in the MH in Municipalities Tool Kit.

Table 1. Million Hearts® in Municipalities Tool Kit Modules

Module	Description
1. Overview	An introduction to key principles and concepts of MH.
2. Setting Goals	Key concepts, principles, and resources to support setting municipal MH goals.
3. Partnerships	Information on building and maintaining partnerships to support MH efforts.
4. Communication	Resources and tools to effectively communicate about municipal MH efforts.
5. Evaluation and Monitoring	Resources and information to support evaluating and monitoring municipal MH efforts.

How to Use This Tool Kit

The modules can be used individually or as a package to identify or expand evidence-based strategies that are appropriate for the specific needs of your community. The target audiences are public health officials, epidemiologists, health system analysts, and clinical care teams working in municipal public health offices, as well as people working in nongovernmental organizations and other local public health organizations.

The five modules will help you answer the following questions:

- What priorities can be addressed to improve prevention and control efforts of CVD in your municipality?
- What municipal assets and expertise can be built upon to implement MH goals and strategies?
- Who are the key partners to engage in municipal CVD prevention efforts?
- How will your team communicate your MH efforts to drive interest and action?
- How effective are the identified priorities, goals, and strategies in preventing CVD in your municipality?

Section 2: Million Hearts® Overview

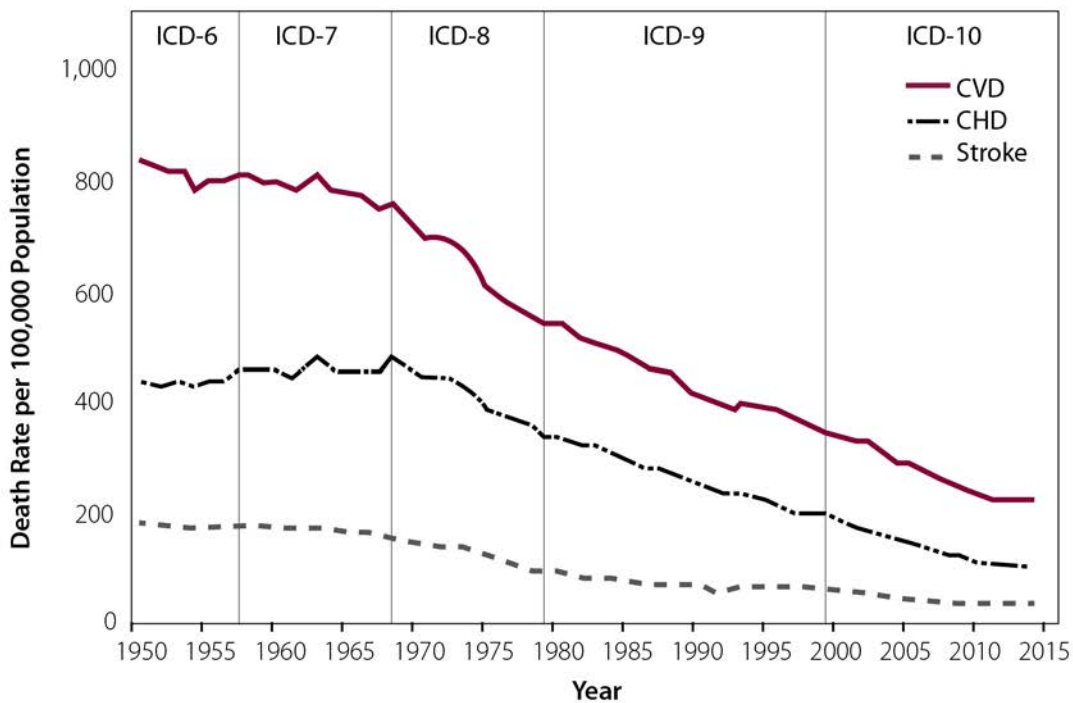
Heart Disease and Stroke in the United States

- More than **1.5 million people** in the United States suffer from heart attacks and strokes each year.¹
- More than **800,000 deaths** per year are from CVD.¹
- CVD costs the United States **hundreds of billions of dollars** per year.¹
- CVD is the greatest contributor to racial disparities in life expectancy.²

Deaths due to heart attacks and strokes have been declining steadily for the last 50 years (Figure 1). The declining rate of CVD deaths has been attributed to changes in the environment, such as fewer people smoking, and to improvements in clinical care, such as improved care for those having a stroke and medication use for those with hypertension and high cholesterol.³ Since 2000, however, the rate of the CVD death decline

has started to slow (see Figure 1).⁴ A recent analysis examining age and county-specific data between 2010 and 2015 also found that 50% of counties have experienced increased heart disease mortality among 35- to 64-year-olds.⁵ This identifies the need to prioritize and focus action on CVD prevention efforts, set goals, and implement strategies at the municipal level.

Figure 1. Heart Disease and Stroke Trends, 1950–2015⁴



Credit: George A. Mensah. Decline in cardiovascular mortality. *Circulation Research*. 2017;120(2): 366–80. doi: 10.1161/CIRCRESAHA.116.309115.

The Million Hearts® Initiative

MH is an initiative co-led by CDC and the Centers for Medicare & Medicaid Services (CMS) with the aim to prevent one million heart attacks and strokes in five years. Launched in 2012 and renewed in 2017, the MH initiative—with more than 120 official partners and 20 federal agencies—successfully aligned national CVD prevention efforts around a select set of evidence-based public health and clinical goals and strategies. The initiative focuses on a small set of priorities selected for their prevention of heart attacks, strokes, and other cardiovascular events.

MH provides a framework to reduce the burden of CVD in the United States and creates a platform to highlight a selection of evidence-based strategies for

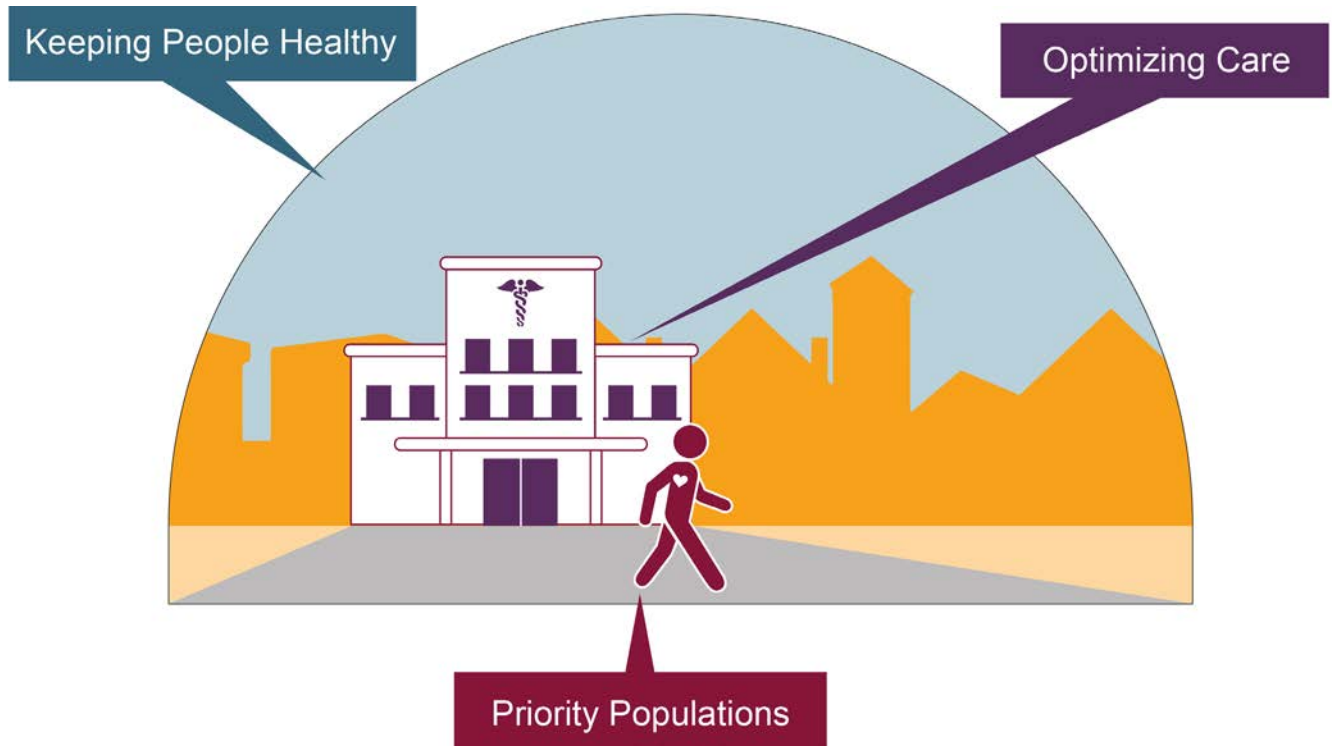
CVD prevention ([Figure 2](#)). This framework gives public- and private-sector partners a way to work together to improve health and prevent disease, motivate patients and physicians, improve and coordinate systems of care, and leverage the strengths of public and private entities.

The only way the nation will meet the goal of preventing one million cardiovascular events is through the collective and focused action of a variety of partners. These modules were developed with that in mind.

Million Hearts® Priorities

With the aim to prevent one million heart attacks and strokes by 2022, MH focuses on three priorities: Keeping People Healthy, Optimizing Care, and Improving Outcomes for Priority Populations.

Figure 2. Million Hearts® 2022 Framework



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

Improving Outcomes for Priority Populations
Blacks/African Americans with hypertension
35- to 64-year-olds due to rising event rates
People who have had a heart attack or stroke
People with mental and/or substance use disorders who smoke

*Aspirin use when appropriate, Blood pressure control, Cholesterol management, Smoking cessation

Million Hearts® 2022 Goals and Strategies

Keeping People Healthy by making changes to the environments in which people live, learn, work, and play

to make it easier for people to make healthy choices. Key goals and effective public health strategies to address this priority include the following:

Goals	Effective Public Health Strategies
Reduce Sodium Intake Target: 20%	<ul style="list-style-type: none"> • Enhance consumers' options for lower sodium foods. • Institute healthy food procurement and nutrition policies.
Decrease Tobacco Use Target: 20%	<ul style="list-style-type: none"> • Enact smoke-free space policies that include e-cigarettes. • Use pricing approaches. • Conduct mass media campaigns.
Increase Physical Activity Target: 20% (Reduction of Inactivity)	<ul style="list-style-type: none"> • Create or enhance access to places for physical activity. • Design communities and streets that support physical activity. • Develop and promote peer support programs.

Optimizing Care so that people with and at risk for CVD receive the services and acquire the skills needed to reduce the likelihood of having a heart attack or stroke.

Key goals and effective health care strategies to address this priority include the following:

Goals	Effective Public Health Strategies
Improve ABCS* Target: 80%	High Performers Excel in the Use of ... <ul style="list-style-type: none"> • Technology—decision support, patient portals, e- and default referrals, registries, and algorithms to find gaps in care • Teams—including pharmacists, nurses, community health workers, and cardiac rehabilitation professionals • Processes—treatment protocols; daily huddles; ABCS scorecards; proactive outreach; and finding patients with undiagnosed high blood pressure, high blood cholesterol, or tobacco use • Patient and Family Supports—training in home blood pressure monitoring; problem-solving in medication adherence; counseling on nutrition, physical activity, tobacco use, and risks of particulate matter; and referral to community-based physical activity programs and cardiac rehabilitation
Increase Use of Cardiac Rehabilitation Target: 70%	
Engage Patients in Heart-healthy Behaviors Target: TBD	

*Aspirin when appropriate, Blood pressure control, Cholesterol management, Smoking cessation

Improving Outcomes for Priority Populations.

Although the initiative aims to improve outcomes for all, the MH goal will not be met unless there is focused action on people who suffer worse outcomes of CVD and

where there is evidence and the opportunity to make a significant impact. Key priority populations, interventions needed, and strategies to address this priority include:

Priority Populations	Interventions Needed	Strategies
Blacks/African Americans with hypertension	<ul style="list-style-type: none"> Improving hypertension 	<ul style="list-style-type: none"> Tailored protocols Medication adherence strategies
35- to 64-year-olds, due to rising event rates	<ul style="list-style-type: none"> Improving hypertension control and statin use Increasing physical activity 	<ul style="list-style-type: none"> Tailored protocols Community-based programs
People who have had a heart attack or stroke	<ul style="list-style-type: none"> Increasing cardiac rehabilitation referral and participation Avoiding exposure to particulate matter 	<ul style="list-style-type: none"> Automated referrals, hospital cardiac rehabilitation liaisons, referrals to convenient locations Air quality index tools
People with mental and/or substance use disorders who use tobacco	<ul style="list-style-type: none"> Reducing tobacco use 	<ul style="list-style-type: none"> Integrating tobacco cessation into behavioral health treatment Tobacco-free mental health and substance use treatment campuses Tailored quitline protocols

Key Principles of Million Hearts®

- Prioritize.** Prioritize cardiovascular health and care. Prioritize what is most fitting for your community and what you and your team can do to make the greatest impact now.
- Data- and science-driven.** Use available local and/or state data and evidence-based strategies to identify and select the appropriate approaches to prevent heart disease and stroke.
- Focus.** Focus MH efforts on specific goals and identify key strategies and outcomes based on relevant targets.
- Partnerships.** Partner with traditional and nontraditional public health, community-based, faith-based, and health care organizations.
- Leverage.** Build upon existing public health and health care CVD prevention resources, programs, partnerships, and successes.
- Champions.** Identify champions and organizational leaders to act as ambassadors and support MH efforts at all levels.
- Team-based approach.** If possible, build a small team to perform core functions and lead the MH efforts.

- **Communication.** Ensure strong communication to help leaders and partners understand the vision and drive action.
- **Flexibility.** Be flexible in selecting and implementing the best strategies to prevent CVD. Each municipality will have a different approach, but the strategy selection and implementation process should be guided by data, science, and lessons learned from public health program experiences.
- **Evaluate.** Evaluate and monitor MH efforts to identify facilitators and barriers to reaching identified goals.
- **Celebrate.** Identify and celebrate high performers and key partners. Engaging partners in the successes of MH efforts cultivates shared ownership and supports identification of lessons learned.

Recommendations for Local and State Public Health Departments

- **Don't reinvent the wheel.** Identify and use existing resources and partners within the municipality. When resources are scarce, build on the work of both public health and health care partners to maximize impact. Leverage initiatives that are already funded and identify ways to incorporate MH efforts into those activities.
- **Involve affected populations and partners early and often.** Engage community partners, health care professionals, and affected populations to help develop and/or enhance the most effective strategies.
- **Emphasize cultural sensitivity.** Be wary of unintentionally playing into stereotypes and cultural sensitivities. Make the time and effort to ensure materials are culturally sensitive to the specific population being served.
- **Set a big table.** Bring together stakeholders from across sectors, including inside and outside of public health. Be sure to engage leaders at the “grasstops,” such as elected officials and payers who have a role in preventive care and counseling for CVD.
- **Focus on shared goals.** Public health and health care partners have shared interests and goals. Take the time to identify and develop common goals up front.

Section 3: Readiness Assessment

Readiness for Initiating or Enhancing Million Hearts® Efforts

The statements below in [Table 2](#) are intended to identify municipal strengths, opportunities, and gaps related to CVD prevention. If possible, complete the following assessment with key internal staff and a couple external partners who are already working and/or have an interest in CVD prevention.

Read each statement in the assessment and indicate which number best describes your current situation on a scale of 0 to 5, where 0 indicates “This is not happening at the municipal level” and 5 indicates “This is happening in a robust way at the municipal level.”

After completing, discuss why you rated each statement as you did. Then go to the next section to identify ways to improve or enhance your efforts.

Table 2. Readiness Assessment for Initiating or Enhancing Million Hearts® Efforts

Municipal Activities	0	1	2	3	4	5
We have identified baseline data that can be used to understand the current CVD burden at the municipal level.						
We have identified key leaders (in public health and health care) to support municipal efforts to address CVD prevention.						
We have designated key staff as the MH planning team to initiate, lead, or expand municipal MH efforts.						
We have identified key partners to help plan, implement, or expand our MH strategies.						
Our MH strategies already build upon or will build upon an existing noncommunicable disease plan to address CVD.						
Municipal expertise exists to address the following areas:						
Physical Activity						
Sodium Reduction						
Smoking Cessation						
ABCS* Clinical Quality Measures Monitoring						
Cardiac Rehabilitation						
Health Information Technology						

*Aspirin when appropriate, Blood pressure control, Cholesterol management, Smoking cessation

Municipal Activities	0	1	2	3	4	5
Million Hearts® Priority Population:						
Blacks/African Americans with hypertension						
35- to 64-year-olds						
People who have had a heart attack or stroke						
People with mental and/or substance use disorders who use tobacco						

Section 4: Action Planning

After assessing current strengths, opportunities, and gaps, you/your planning team should begin to develop next steps or actions to move your MH efforts forward. Action plans should focus on a few priority areas that would most benefit municipal CVD prevention efforts.

- Use the Action Plan template below ([Table 3](#)) to identify the next steps, who is responsible for each step, and your due dates.

Getting Started

- Review the results of the Readiness Assessment to identify a few immediate priorities on which you can begin to work. To choose these priorities:
 - Look at the statements you ranked 4 and 5 and ask, “What is the best way to leverage or expand on this strength as the MH efforts are developed or expanded?”
 - Look at the statements you ranked 1, 2, and 3 and ask, “Will this gap delay or prevent progress on the MH efforts? If so, how can this gap or asset be strengthened?”

Developing an Action Plan

Use the template below or one you develop to outline the next steps for you/your planning team. Actions should be specific, measurable, achievable, relevant, and time-bound. If applicable, identify which members of the team will be responsible and the expected date of completion. Any resources that will be needed to complete the action should also be identified at this time. Plan to meet regularly to revisit the action items and provide updates on progress and/or barriers.

Table 3. Action Plan Template

Actions to Take	Who is Responsible	Due Date	Resources Needed	Notes

Section 5: Resources

Table 4. Million Hearts® Resources

Resource	Description
Million Hearts® Website https://millionhearts.hhs.gov/	This website provides a variety of online resources, including tools, action guides, protocols, and progress reports on MH.
Million Hearts® 2022 Framework https://millionhearts.hhs.gov/files/MH-Framework.pdf	This graphic provides an overview of the MH priorities, goals, and strategies.
Million Hearts® 2022 Fact Sheet https://millionhearts.hhs.gov/files/MH-2022-Fact-Sheet.pdf	This fact sheet provides an overview and brief background on MH.
Million Hearts® 2022 Partners https://millionhearts.hhs.gov/partners-progress/partners/index.html	This webpage provides information on how to get involved with the initiative, tools for discussing and spreading the word about MH, and a short list of partner opportunities.
Million Hearts®: Meaningful Progress 2012–2016—A Final Report https://millionhearts.hhs.gov/files/MH-meaningful-progress.pdf	This final report discusses progress made during the first five years of the initiative and provides insight into the past efforts that informed the initiative’s current priorities.
Mobilizing for Action Through Planning and Partnerships (MAPP) and Non-Profit Hospitals: Leveraging Community Benefit for Community Health Improvement https://www.naccho.org/uploads/downloadable-resources/Programs/Public-Health-Infrastructure/factsheet_mapp-communitybenefit_161122_165359.pdf	This fact sheet describes what resources are available to public health departments and their nonprofit hospital partners in identifying opportunities to leverage community benefit resources for health improvement.

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