

## **Iowa Press Conference**

June 23, 2022 Iowa State Capitol Des Moines, IA

# AGENDA:

10:30 a.m. Press Conference

# Speakers:

- Kevin Harker, Executive Vice President, Midwest Region, American Heart Association/American Stroke Association
- Walter Panzirer, Trustee,
  Leona M. and Harry B. Helmsley Charitable Trust
- Kelly Garcia, Director, Iowa Department of Health and Human Services
- **Dr. Enrique Leira**, Professor of Neurology and Head of the Comprehensive Stroke Center, University of Iowa; Co-Chair of the Iowa Stroke Task Force
- Scott Davis, Stroke Survivor

11:00 a.m. Interview opportunities with speakers, stroke survivors

Also available for interview:

• Gary Myers, MS, National Sr. Program Manager, Quality, Outcomes, Research and Analytics (QORA), American Heart Association/American Stroke Association

# Official News Release

# American Heart Association, Helmsley Charitable Trust announce \$9.3 million in Helmsley grants to expand and enhance rural health and stroke care

\$6.3 million will support Mission: Lifeline Stroke in Iowa and \$3 million will support improved health in rural communities through HeartCorps

DES MOINES, Iowa, June 23, 2022 – The American Heart Association/American Stroke Association announced a statewide commitment of \$7.5 million for its <u>Mission: Lifeline Stroke initiative</u> to strengthen the full spectrum of stroke care across Iowa. The foundation of this new initiative is a \$6.3 million grant from The Leona M. and Harry B. Helmsley Charitable Trust.

Mission: Lifeline Stroke focuses on connecting all components of acute stroke care into a smoothly integrated system that reinforces the use of evidence-based guidelines to timely and effectively treat stroke patients. It brings together hospitals, emergency medical services and first responders, rehabilitation facilities, communications and regulatory agencies, state and local government, and payers to forge a proactive system of stroke care that saves and improves lives.

"The work of the Iowa Stroke Task Force ensures that Iowans swiftly receive excellent care from highly skilled providers, so that stroke patients have the greatest odds of survival and full recovery," said Kelly Garcia, Director of the Iowa Department of Health and Human Services. "This significant investment by the American Heart Association and the Helmsley Charitable Trust builds on the work of the Stroke Task Force to enhance and expand those lifesaving efforts and to improve stroke recovery and rehab in large and small communities across Iowa."

Cardiovascular disease, including heart and stroke conditions, is the leading cause of death in the United States. The acute nature of heart attacks and strokes is particularly deadly and requires time-sensitive treatment to save lives and reduce lasting disability. Stroke is a leading cause of death in Iowa, accounting for more than 1,400 deaths in 2020. Many more Iowans are living with stroke-related disabilities.

This is the latest in a series of Helmsley investments in Mission: Lifeline's system of care model for acute cardiac and stroke care. "We believe that a comprehensive approach is the best way to make the most substantial impact, especially for rural populations that face longer transit times and limited access to specialists," said Walter Panzirer, a Trustee for the Helmsley Charitable Trust.

The stroke program in Iowa builds upon prior success with this approach. In 2015, the Helmsley Charitable Trust provided a \$4.6 million grant to support the launch of Mission: Lifeline STEMI in Iowa to reduce treatment times for acute cardiac care in the cases of ST Segment Elevation Myocardial Infarction (STEMI). STEMI is the most serious type of heart attack and occurs when blood flow is completely blocked to a portion of the heart.

Every minute saved in heart attack and stroke treatment can directly improve survival and recovery rates. Strengthening care requires a system-wide, data-driven quality improvement

approach to address many similar triaging, transfer, and treatment challenges in time-sensitive stroke care.

"This ongoing commitment from the Helmsley Charitable Trust will directly touch the lives of all lowans and for this I am very grateful," said Dr. Enrique Leira, Professor of Neurology and Head of the Comprehensive Stroke Center at the University of Iowa and co-Chair of the Iowa Stroke Task Force. "The Mission: Lifeline Stroke initiative will help us better coordinate stroke care, from the time of onset to treatment. Stroke treatment is time-sensitive, so getting patients the proper treatment faster, is crucial. This investment is going to be particularly impactful in decreasing the unacceptable disparity in stroke care we are currently experiencing in rural states like Iowa."

Mission: Lifeline Stroke will build upon the gains achieved by the existing Iowa Stroke Task Force by further strengthening the collaboration with stakeholders across the state representing hospitals, individual ambulance services, the Iowa Department of Human Services and others. The project will enhance many critical elements of an optimal stroke system of care, including:

- Improved public awareness on the symptoms of a stroke and the need to call 9-1-1;
- A coordinated EMS network, well-trained to identify suspected stroke patients quicky and transport them to the most appropriate facility;
- Well-trained hospital staff who are prepared to properly treat stroke patients and transfer, when appropriate, to higher levels of care and high-quality rehabilitation services;
- Coordination and collaboration among all statewide stroke centers;
- Seamless discharge to high-quality, post-acute stroke rehabilitation and recovery care;
- Guideline-directed care in post-acute care facilities to improve recovery and quality of life:
- A sustainable statewide quality improvement data system to monitor patient care, identify successes and areas in need of further improvement and investment; and
- Robust, collaborative infrastructure for long-term attention to stroke outcomes across the state.

## HeartCorps to Launch in Iowa and across the country

The Helmsley Charitable Trust is also granting \$3 million to the American Heart Association to launch HeartCorps in Iowa, Minnesota, and Wyoming. HeartCorps is the Association's new initiative serving rural communities across the U.S. As an inaugural grantee of the Public Health AmeriCorps Program, the AHA will launch HeartCorps this fall to address health inequities and develop a new generation of public health leaders in rural America.

The goal of the initial three-year HeartCorps program is to grow a sustainable pipeline of public health workers, reduce cardiovascular risks among rural residents and accelerate the adoption and implementation of systems changes to improve cardiovascular health. The Public Health AmeriCorps Program is a joint partnership between AmeriCorps and the Centers for Disease Control and Prevention (CDC).

"HeartCorps is an excellent opportunity to bolster the public health workforce in communities across the country," Panzirer said. "Developing local expertise and resources to improve health outcomes will provide long-term benefits to these communities."

With funding from the Helmsley Charitable Trust, the AHA will place HeartCorps members in counties that rank among the least healthy in Iowa according to County Health Rankings. These members will focus on improving cardiovascular health, including blood pressure awareness and control. Funding will also support HeartCorps members in several counties throughout Minnesota and Wyoming.

HeartCorps will support 100 Public Health AmeriCorps members each year in rural areas across the country. AmeriCorps will provide \$8.6 million, or 63% of the project with the remaining \$5.1 million, or 37% of the project funded by the Helmsley Charitable Trust, the American Heart Association, and other funders.

Since 2010, the Helmsley Charitable Trust has committed over \$64 million to the American Heart Association's mission. Helmsley's support has been foundational to improving statewide systems of care in the Upper Midwest, including Mission: Lifeline STEMI projects in seven states from 2010 to 2016 and the launch of Mission: Lifeline Stroke in North Dakota, Nebraska, Montana and Iowa.

###

#### About the American Heart Association

The American Heart Association is a relentless force for a world of longer, healthier lives. We are dedicated to ensuring equitable health in all communities. Through collaboration with numerous organizations, and powered by millions of volunteers, we fund innovative research, advocate for the public's health and share lifesaving resources. The Dallas-based organization has been a leading source of health information for nearly a century. Connect with us on heart.org, Facebook, Twitter or by calling 1-800-AHA-USA1.

#### About the Helmsley Charitable Trust

The Leona M. and Harry B. Helmsley Charitable Trust aspires to improve lives by supporting exceptional efforts in the U.S. and around the world in health and select place-based initiatives. Since beginning active grantmaking in 2008, Helmsley has committed more than \$3 billion for a wide range of charitable purposes. Helmsley's Rural Healthcare Program funds innovative projects that use information technologies to connect rural patients to emergency medical care, bring the latest medical therapies to patients in remote areas, and provide state-of-the-art training for rural hospitals and EMS personnel. To date, this program has awarded more than \$500 million to organizations and initiatives in the states of North Dakota, South Dakota, Nebraska, Wyoming, Minnesota, Iowa, Nevada, and Montana. For more information on Helmsley and its programs, visit helmsleytrust.org.

#### About AmeriCorps

AmeriCorps, the federal agency for volunteerism and national service, provides opportunities for Americans to serve their country domestically, address the nation's most pressing challenges, improve lives and communities, and strengthen civic engagement. Each year, the agency invests more than \$800 million in grants for local nonprofit, community, tribal, and state organizations; places more than 250,000 AmeriCorps members and AmeriCorps Seniors volunteers in intensive service roles; and empowers millions more to serve as long-term, short-term, or one-time volunteers. Learn more at AmeriCorps.gov.

For Media Inquiries:

Bryan Geelan: 712-260-1219; bryan.geelan@heart.org

heart.org and stroke.org



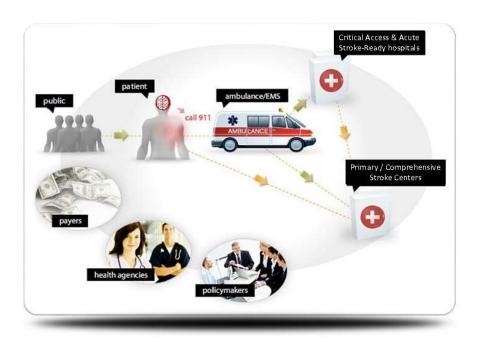
#### Frequently Asked Questions

#### What is a Stroke?

Stroke is a disease that affects the arteries leading to and within the brain. It is the No. 5 cause of death and a leading cause of disability in the United States. A stroke occurs when a blood vessel that carries oxygen and nutrients to the brain is either blocked by a clot or bursts (or ruptures). When that happens, part of the brain cannot get the blood (and oxygen) it needs, so it and brain cells die. Stroke can be caused either by a clot obstructing the flow of blood to the brain (called an ischemic stroke) or by a blood vessel rupturing and preventing blood flow to the brain (called a hemorrhagic stroke). A TIA (transient ischemic attack), or "mini stroke", is caused by a temporary clot.

#### What is Mission: Lifeline Stroke?

Mission: Lifeline Stroke is a program for transforming stroke care by focusing efforts on connecting all of the components of acute stroke care into a smoothly integrated system that reinforces use of evidence-based guidelines, measures performance, identifies gaps, and engages in improvement projects at a systems level. The stroke system of care begins with community recognition and preparedness to identify stroke and continues all the way through hospital discharge, into rehabilitation and the initiation of secondary prevention. It brings together hospitals, ambulance services, non-transport medical first response agencies, emergency communications centers, emergency medical service regulatory and medical direction agencies, local government, local media, and payers to forge a proactive system of stroke care that saves and improves lives.



#### Frequently Asked Questions, Continued

How does this project support the efforts of the existing Stroke System of Care in Iowa? Mission: Lifeline Stroke will build upon the gains achieved in the past 17 years of successful work by the existing Iowa Stroke Task Force by further strengthening the collaboration with stakeholders across the state representing hospitals, individual ambulance services, the Iowa Department of Health and others. The project will enhance many critical elements of an optimal stroke system of care, including:

- Improved public awareness on the symptoms of a stroke and the need to call 9-1-1;
- A coordinated EMS network, well-trained to identify suspected stroke patients quicky and transport them to the most appropriate facility;
- Well-trained hospital staff who are prepared to properly treat stroke patients and transfer, when appropriate, to higher levels of care and high-quality rehabilitation services;
- Coordination and collaboration among all statewide stroke centers;
- Seamless discharge to high-quality, post-acute stroke rehabilitation and recovery care;
- Guideline-directed care in post-acute care facilities to improve recovery and quality of life:
- A sustainable statewide quality improvement data system to monitor patient care, identify successes and areas in need of further improvement and investment; and
- Robust, collaborative infrastructure for long-term attention to stroke outcomes across the state.

## What are the warning signs of a stroke?

Learn to spot a stroke FAST:

- Face Drooping Does one side of the face droop or is it numb? Ask the person to smile. Is the person's smile uneven?
- Arm Weakness Is one arm weak or numb? Ask the person to raise both arms. Does one arm drift downward?
- Speech Difficulty Is speech slurred? Is the person unable to speak or hard to understand? Ask the person to repeat a simple sentence, like "The sky is blue."
- Time to Call 9-1-1 If someone shows any of these symptoms, even if the symptoms go away, call 9-1-1 and get to a hospital immediately. Check the time so you'll know when the first symptoms appeared.

#### What is the history of Mission: Lifeline in Iowa?

The stroke program in Iowa builds upon prior success with this approach. In 2015, the Helmsley Charitable Trust provided a \$4.6 million grant to support the launch of Mission: Lifeline STEMI in Iowa to reduce treatment times for acute cardiac care in the cases of ST Segment Elevation Myocardial Infarction (STEMI). STEMI is the most serious type of heart attack and occurs when blood flow is completely blocked to a portion of the heart.

## What was the impact of Mission: Lifeline STEMI in Iowa?

The overarching long-term goal of Mission: Lifeline STEMI was to increase lives saved by creating an effective system of care for STEMI heart attack patients in rural Iowa. Mission: Lifeline STEMI had a positive impact on patient outcomes in Iowa. These impacts included:

#### A stronger workforce

- Members of the workforce who attended educational events reported they understood their role in the system of care for time critical conditions, understood data metrics and the value of data collection, and believed their practice would be impacted or changed as a result of what they learned at education events.
- Dramatic Increases in Pre-Hospital Transmissions
  - From 2014 to 2015, transmissions increased by 21.4% (from 6,658 to 8,080).
  - o From 2015 to 2016, transmissions increased by 35.5% (10,950 in 2016).
  - From 2016 to 2017, transmission increased by 68% (18,448 in 2017).
  - Over the course of the project (2014-17), pre-hospital transmissions increased 177% (from 6,658 in 2014 to 18,448 in 2017).
- Significant Improvement for Transfer in Arrival at 1st Facility to Primary PCI
  - There was significant improvement in 2017 for Transfer in Arrival at 1st Facility to Primary PCI less than/equal to 120 minutes. (2017 Iowa = 62.4%. 2016 Iowa = 57.8%). This improvement demonstrates the impact of the regional STEMI work groups and EMS transport guideline implementation.

#### What is HeartCorps?

In Spring 2022, the American Heart Association received a three-year, \$8.6M Public Health AmericCorps grant to expand its presence in rural America. The Public Health AmeriCorps Program is a partnership between AmeriCorps and the Centers for Disease Control and Prevention (CDC). The grant provides funding for 100 HeartCorps members to work in 50 rural communities across 28 states during each of the three years. They'll be working with health centers, other organizations and community members with the aim of ensuring blood pressure control, improving nutrition security and tobacco control, and driving equitable health for all people.

### Why is there a need to focus on care in rural communities?

For a number of reasons, including reduced access to quality care, higher rates of tobacco use, nutrition insecurity, and access to transportation and job security, people in rural areas live an average of 3 fewer years than people in urban areas. And rural communities face higher death rates from heart disease and stroke.

Rural Americans have a 40% higher prevalence of heart disease (14.2%) compared with their counterparts in small metropolitan (11.2%) and urban (9.9%) areas, a gap that has grown over the past decade. And many rural communities face a critical shortage of health care professionals, including public health workers, which negatively impacts the care rural populations receive. This leaves many people vulnerable to increased chronic disease that could be prevented with appropriate identification and treatment.

#### What will HeartCorps look like in Iowa?

With funding from the Helmsley Charitable Trust, the AHA will place HeartCorps members in counties that rank among the least healthy in Iowa according to County Health Rankings. These members will focus on improving cardiovascular health, including blood pressure awareness and control, tobacco cessation, and nutrition security. Funding will also support HeartCorps members in several counties throughout Minnesota and Wyoming. This effort will help build a pipeline of public health workers within rural communities.