

The background of the slide is a dark gray with a faint, light gray ECG (heart rate) line. The line is centered horizontally and spans most of the width of the slide. It features several distinct peaks and troughs, with a particularly dense and high-frequency section in the middle, suggesting a cardiac arrest or a very rapid heart rate. The text is overlaid on this background.

# National Cardiac Arrest Collaborative

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Cardiac Arrest Database

December 5, 2017

# Institute of Medicine Report

**INSTITUTE OF MEDICINE** **Advising the nation • Improving health**  
OF THE NATIONAL ACADEMIES

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# INSTITUTE OF MEDICINE

- **Treatment of Cardiac Arrest: Current Status & Future Directions**
  - CPR and use of AEDs
  - EMS and hospital resuscitation systems of care
  - National cardiac arrest statistics
  - The state of resuscitation research in the US
  - Next steps to significantly enhance survival rates from cardiac arrest
- Public meetings held March, June and August 2014
- Final report published **June 30, 2015**
- Study sponsors: AHA, Red Cross, NHLBI, CDC, ACC, Other foundations



# Call to Action

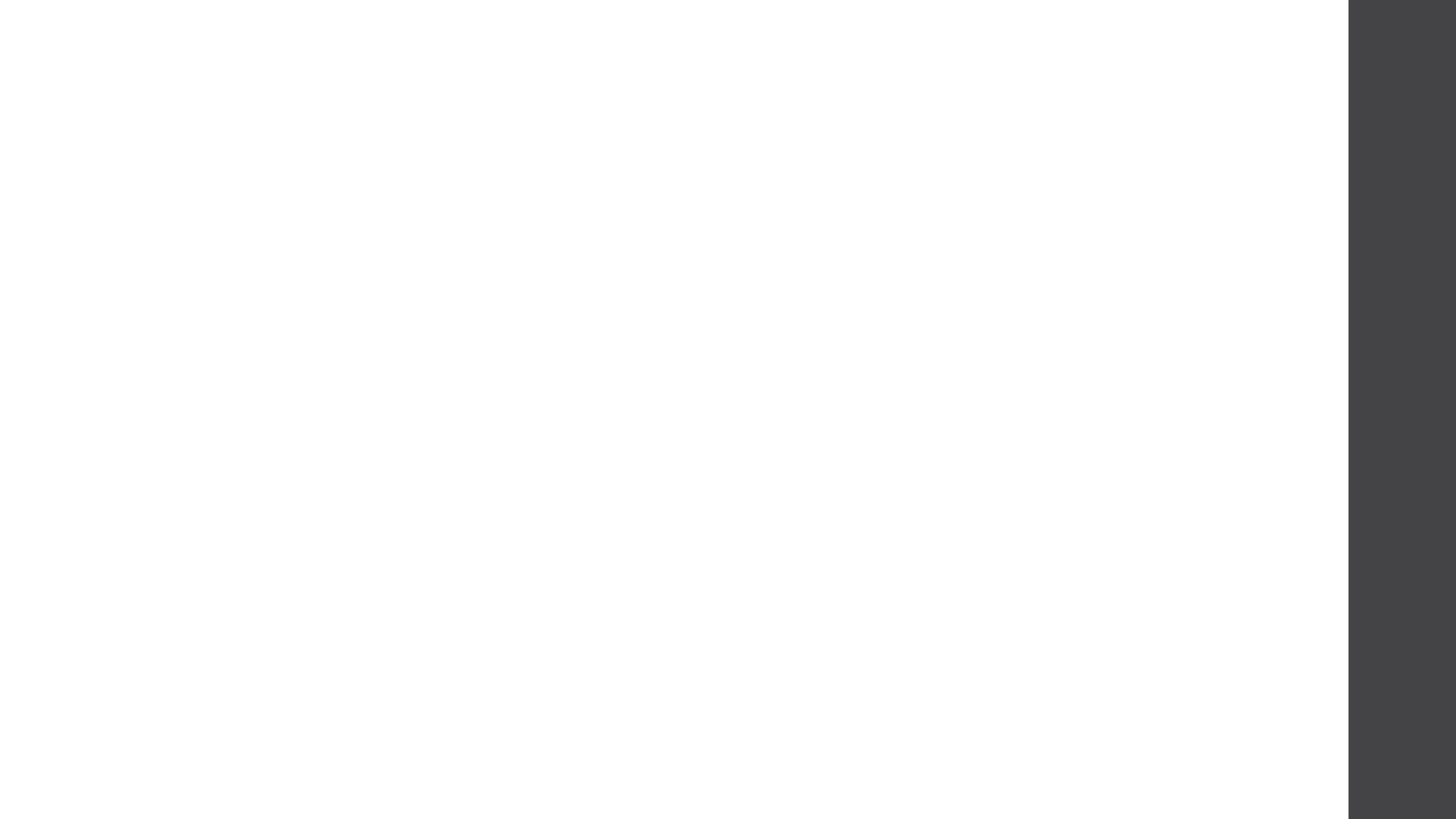


## INSTITUTE OF MEDICINE

- To truly save as many lives as possible it will take **additional novel and innovative approaches** to improve outcomes
- Intense commitment, dedication and **collaboration of countless stakeholders** and partners at a national, state and local level.
  - The successful development and implementation of solutions requires action by collaborators, partners and stakeholders.
- Implementation and **measuring outcomes** have historically been difficult
  - Needs and gaps, such as politics, resources, leadership engagement, differ between communities and location.

# IOM Strategies for Improving Cardiac Arrest Survival

<b>Recommendation 1</b>	Establish a National Cardiac Arrest Registry
<b>Recommendation 2</b>	Foster a Culture of Action Through Public Awareness and Training
<b>Recommendation 3</b>	Enhance the Capabilities and Performance of Emergency Medical Services (EMS) Systems
<b>Recommendation 4</b>	Set National Accreditation Standards Related to Cardiac Arrest for Hospitals & Health Care Systems
<b>Recommendation 5</b>	Adopt Continuous Quality Improvement Programs
<b>Recommendation 6</b>	Accelerate Research on Pathophysiology, New Therapies, and Translation of Science for Cardiac Arrest
<b>Recommendation 7</b>	Accelerate Research on the Evaluation and Adoption of Cardiac Arrest Therapies
<b>Recommendation 8</b>	Create a National Cardiac Arrest Collaborative



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Federation of Organizations (Federation) is a multi-service, community-based social wellness agency and is a major provider of health and wellness, senior & children's services, housing, and support services in Suffolk, Nassau, Queens Brooklyn, Bronx and Manhattan. Originally comprised of an alliance of family advocacy groups, Federation of Organizations was incorporated as a not-for-profit in 1972. For fifty years, Federation has developed innovative,



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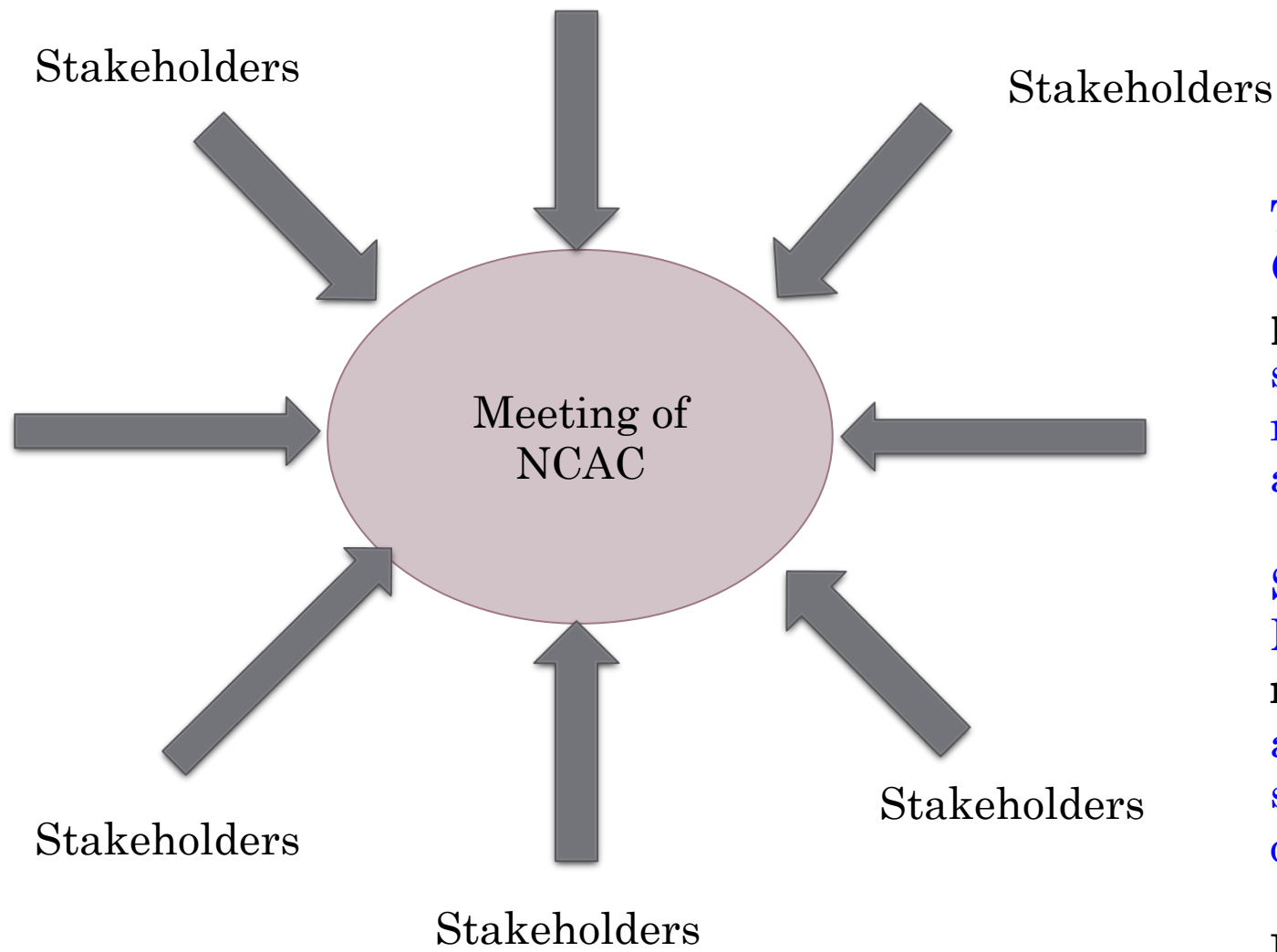
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The National Cardiac Arrest Collaborative (NCAC) is a collaboration of **peer organizations** who are stakeholders or actors in the effort to reduce the societal burden of cardiac arrest.

Stakeholders come together and meet as NCAC to **share actions, ideas, materials, or initiatives**. NCAC is not a separate corporate entity: all stakeholders are independent attendees of the collaborative.

**Meetings will focus on reaching consensus** about whether actions, ideas, materials, or initiatives address common goals of the stakeholders. Meetings will also allow NCAC members to hear about the work of their peers in this field.

NCAC members will take away from the collaborative **shared messages, ideas, actions, materials or information** that they can use in their own organizational efforts.

Ideally, NCAC members will identify **opportunities to collaborate** with their peers on joint ventures. At a minimum, NCAC members should identify how their own efforts may be useful for or amplified by other NCAC members.

Peer-peer collaborations might result in **stakeholder-specific projects**. We hope that these efforts also result in new actions, ideas, materials, or initiatives to share with the entire NCAC group.



# What can we do?

- Advocacy and Lobbying
- Educational Projects
- Collaborate on Standards
- Marketing
- Grant Making
- Fund Raising
- Programming / Data Management
- Other Innovations

# First Meeting May 11, 2016

- National Institutes of Health hosted the meeting in Washington, DC
- 36 attendees
- 13 organizations represented
- Focus: Unified Messaging





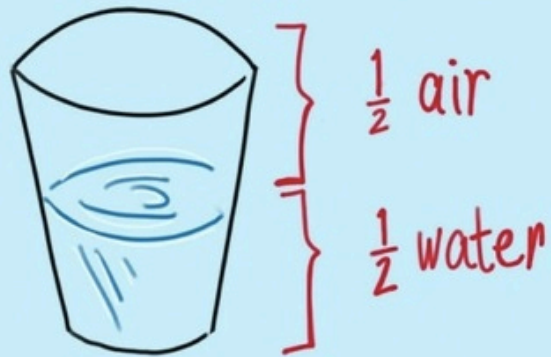
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# Current Registries

- CARES
- Get With The Guidelines
- NCDR Action Registry (Mission Lifeline)
- NEMESIS
- NHAMCS / NIS

# Today's Mission



**technically,  
the glass is always  
full.**

- Discuss lessons from prior registries
  - Trauma / American College of Surgeons
  - Get With The Guidelines
  - CARES
  - NEMSIS
- Discuss role and views of CDC
- Identify our shared next steps on
  - Detection of Cardiac Arrest
  - Mandatory Reporting
  - Data to Include
  - Data Sharing
  - Sustainability