

Why Are We Here Today?

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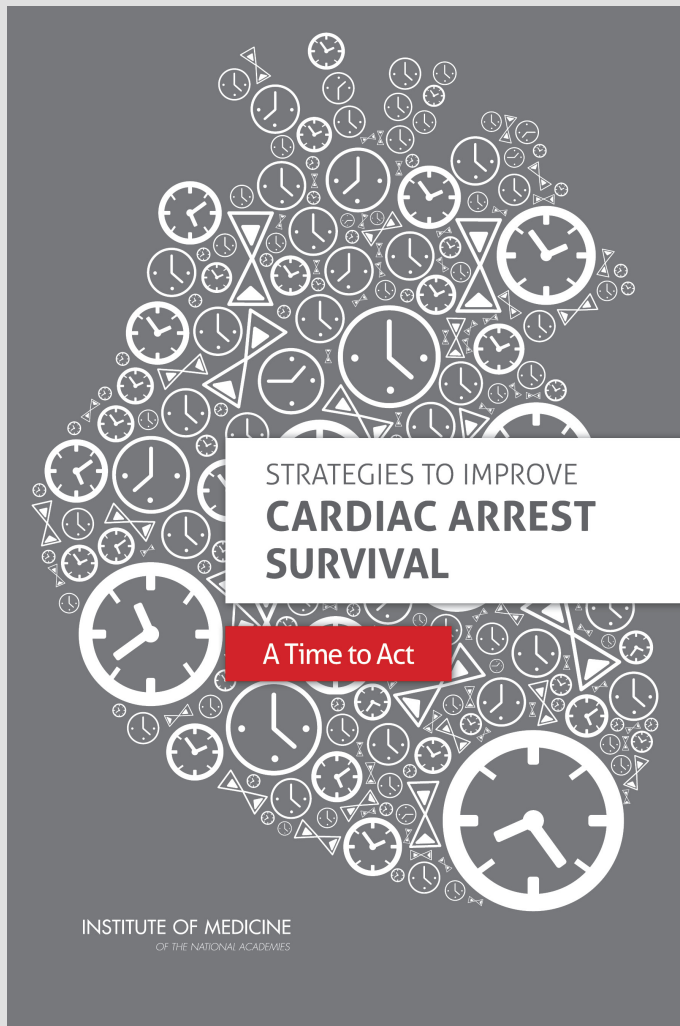
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NATIONAL ACADEMY OF MEDICINE

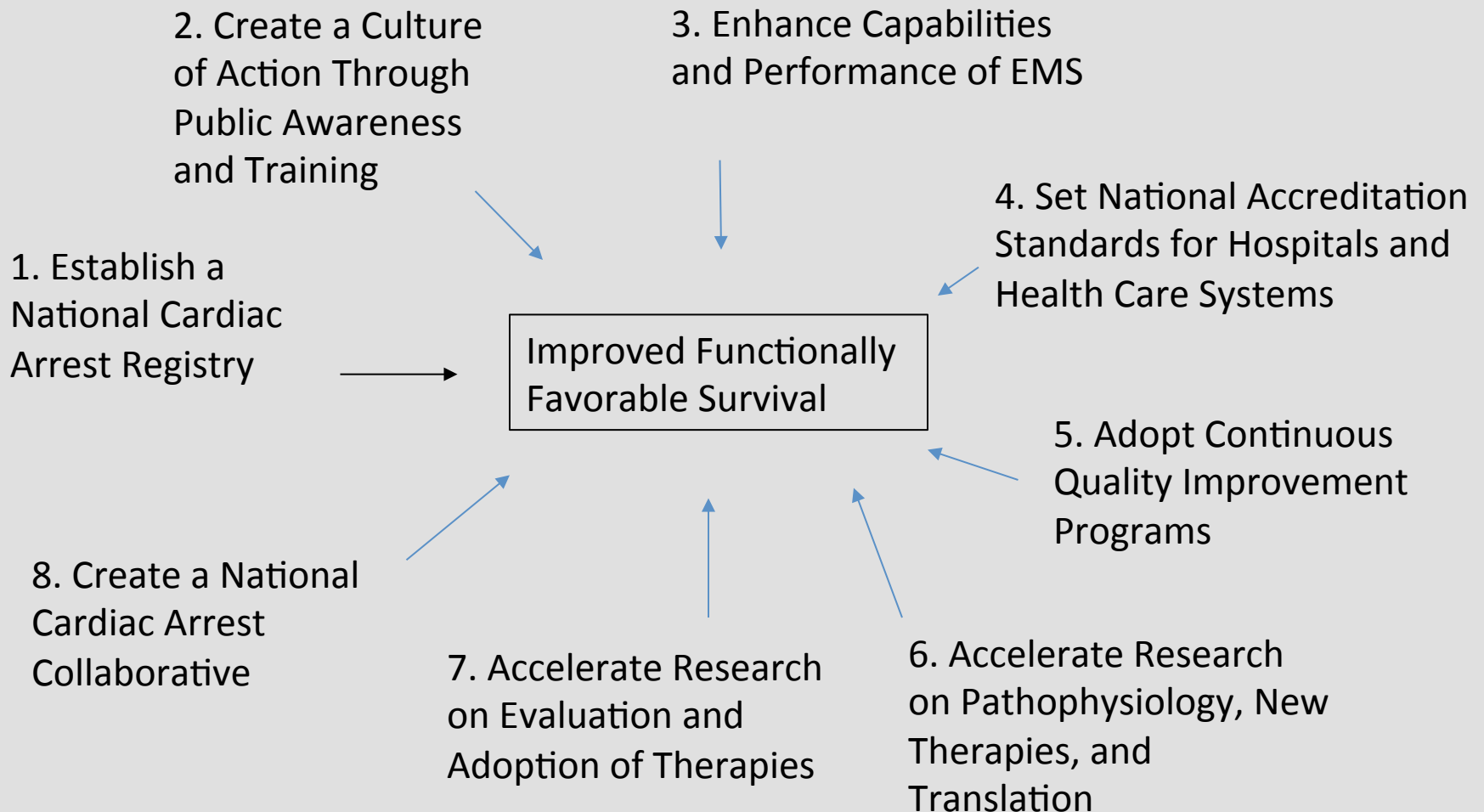
Leadership • Innovation • Impact | *for a healthier future*



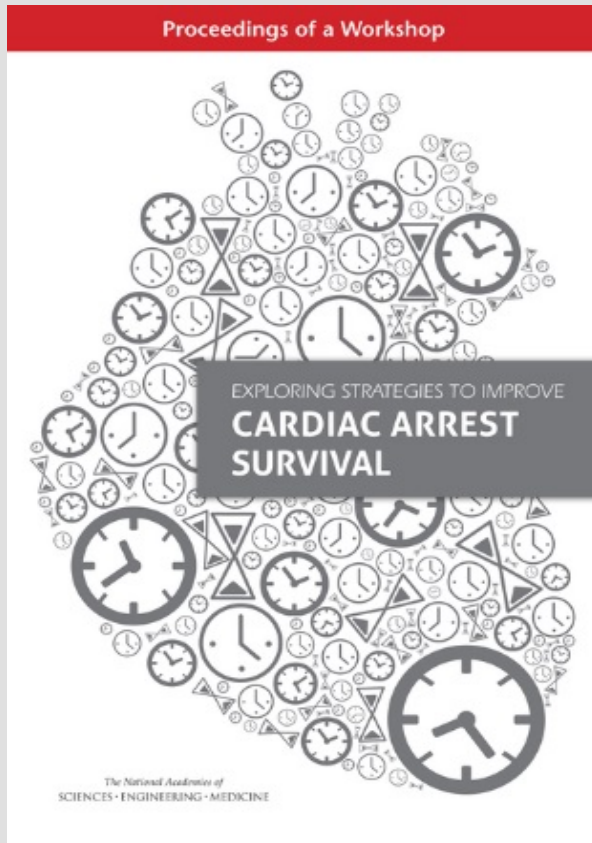
1. Published in June, 2015
2. First comprehensive assessment of cardiac arrest from a national, public health perspective
3. Best evaluation of national cardiac arrest statistics to date



Strategies to Improve Cardiac Arrest Survival: A Time to Act



Workshop Consensus



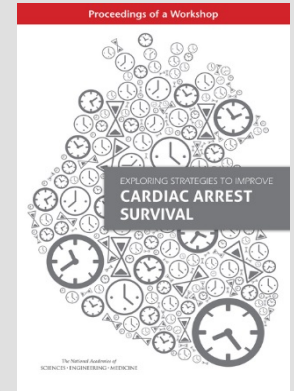
1. Published in October, 2016
2. Identified consensus opinion from cardiac arrest stakeholders
3. Identified barriers to progress, potential strengths, and priorities
4. Recommended formation of a NCAC to make progress on national implementation of the IOM recommendations

Next Steps?



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National Cardiac Arrest Collaborative Concepts



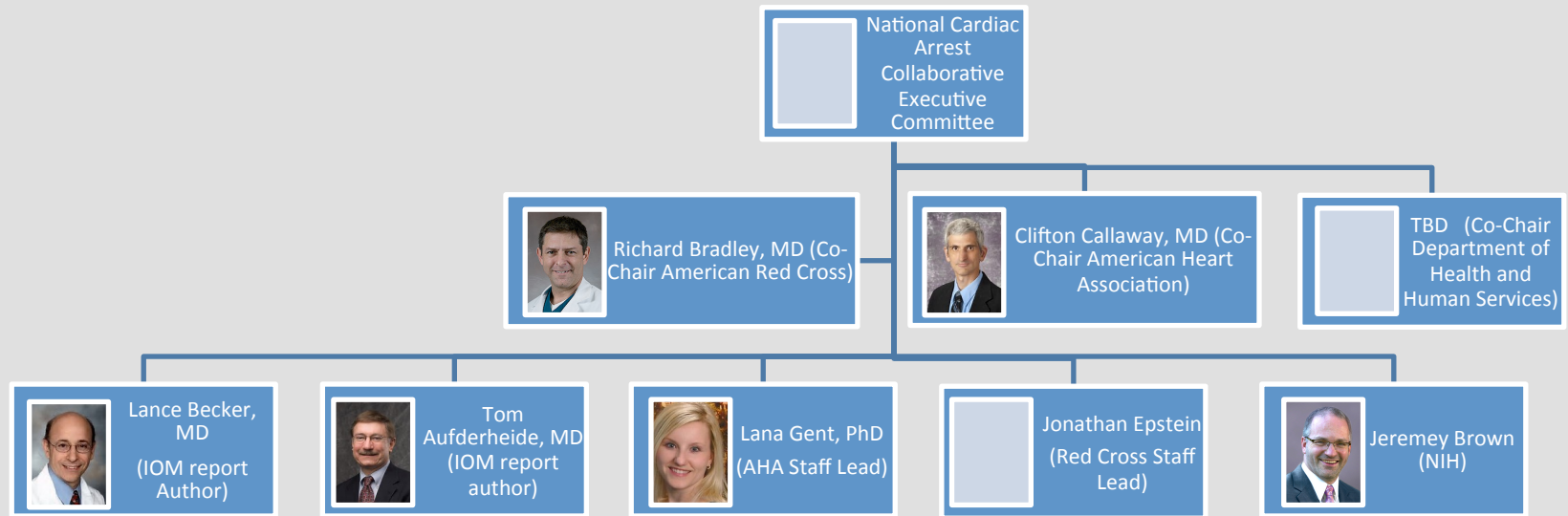
- In the beginning, keep membership small. The membership will grow and evolve over time.
- Have a clear, discrete purpose and stay focused on that purpose.
- Do not try to achieve too many objectives at once. By choosing initial activities carefully, strategic investments can ensure success.
- Do not replicate efforts of member organizations or build new infrastructure where infrastructure already exists.
- Leverage the available expertise and resources of the member organizations whenever possible.

Recommendation 8. Create a National Cardiac Arrest Collaborative

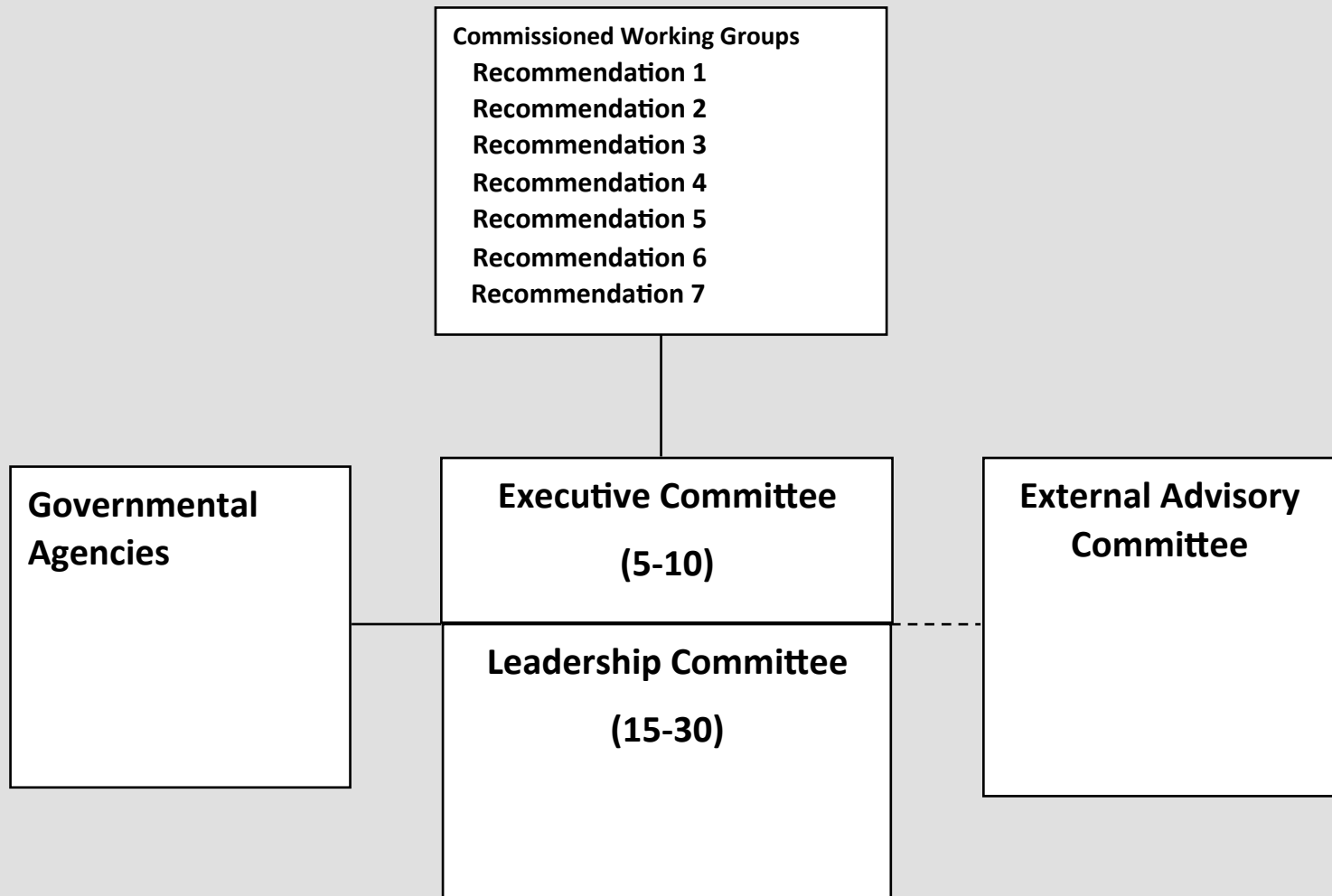
The American Heart Association and the American Red Cross—with the U.S. Department of Health and Human Services and other federal agencies, national and international resuscitation councils, professional organizations, private industry, and patient advocates—should establish a National Cardiac Arrest Collaborative to unify the cardiac arrest field, identify common goals, and build momentum within the field to ultimately improve survival from cardiac arrest with good neurologic and functional outcomes.



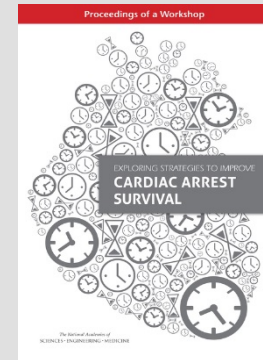
NCAC Executive Committee



Prototype Organizational Chart

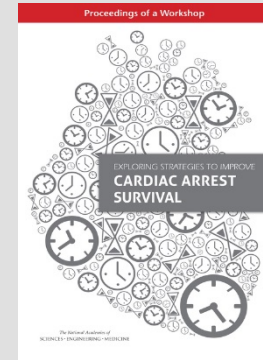


National Cardiac Arrest Collaborative Concepts



- Establishes working groups to address additional IOM recommendations/issues and monitors progress
- Manages and assures no conflict of interest
- Does not impede independent stakeholder initiatives
- Focus on goals not achieved separately that have potential for success approached as a coalition
- Stay centered and always guide final decisions on what is best for the patient
- Draw strategies from successful prior national initiatives (Brain Attack Coalition)

National Cardiac Arrest Collaborative Concepts



- Commitment and responsibility for achieving all of the IOM recommendations nationally
- Relatively small core: collaborative, facile, and capable of efficient decision-making
- Includes cardiac arrest stakeholder organizations across the spectrum of the chain of survival and key governmental agencies
- Actively pursue expertise outside the field of cardiac arrest to shape its initiatives and action plans
- Inclusive input generating a unified voice and action plans (short and long-term)

First Meeting of the NCAC

- Took place May 11, 2017
 - Office of Emergency Care Research in Bethesda, MD
- Topic: Universal Cardiac Arrest Messaging
- Stakeholders
 - AHA, ARC, DHHS, CDC, NIH, NHTSA, NAEMSP, JEMS, CCPRF, HeartRescue, Global Resuscitation Academy, Take Heart America, SCAF, cardiac arrest survivors, USA Today, Parent Heart Watch, National Association of EMS Officials, Brain Attack Coalition, media experts from around the nation, and others
- Purpose of the meeting
 - Formation of the initial framework for the National Cardiac Arrest Collaborative
 - Address unified national messaging for cardiac arrest



Changing a Culture of Inaction to a Culture of Action

**TAKE
ACTION**




JUST DO IT.

NCAC Progress

- The National Cardiac Arrest Collaborative (NCAC) has been established!
- The first NCAC meeting took place May 11, 2017 in Bethesda, MD
- The NCAC commissioned it's first working group: Universal National Messaging
 - Changing a culture of inaction to a culture of action
 - The public, providers, and policy makers
 - Working group meeting regularly and developing prototype messaging
 - Will be presented later by Lana Gent, PhD

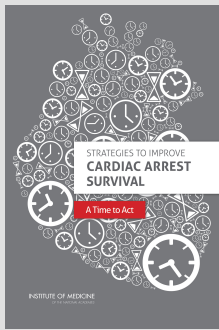
Second NCAC Meeting

- Second NCAC Meeting: Emergency Cardiovascular Care Update Conference (ECCU) 2017, December 5-8, New Orleans. LA
- December 5, 2017 9am-2pm
 - National Cardiac Arrest Database
 - Invitation only
- December 5, 2017 2:30pm-4:30pm
 - Open Town Hall Meeting

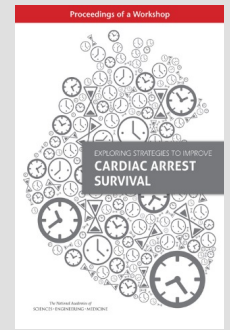


National Registry: Beginning of a long journey...



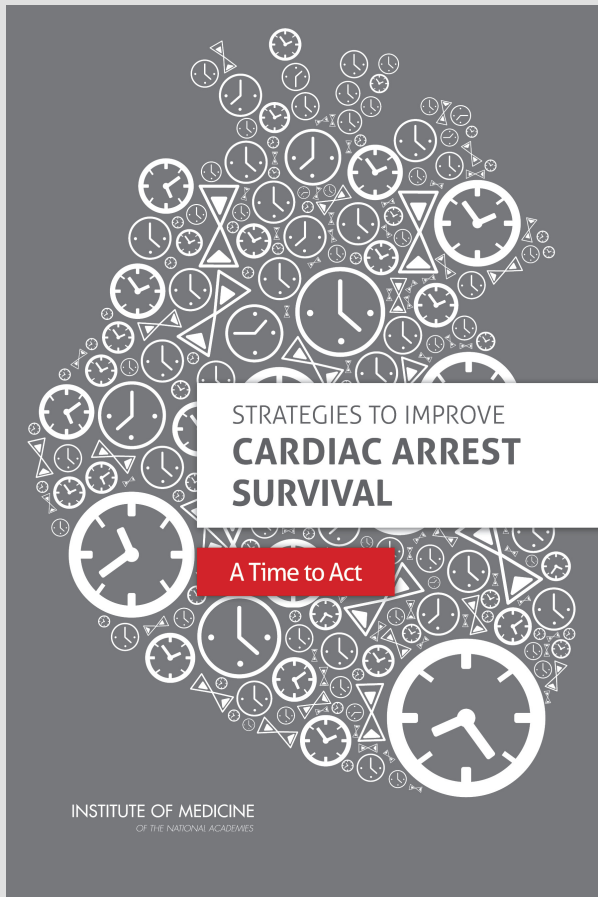


So...Why Are We Here?



- Update on progress
- Provide a forum for discussion
- Derive feedback from stakeholders

Thank you!



- To download the report and view additional resources, visit:
www.iom.edu/cardiacarrest
- To purchase a paperback copy of the report, visit:
<http://www.nap.edu/>

Suggested citation: IOM (Institute of Medicine). 2015. *Strategies to improve cardiac arrest survival: A time to act*. Washington, DC: The National Academies Press.



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