

Healthy North Carolina 2020  
**EVIDENCE BASED STRATEGIES**

<b>FOCUS AREA</b>	Chronic Disease
<b>OBJECTIVE</b>	1. Reduce the cardiovascular disease mortality rate

<b>EBS PROGRAM DESCRIPTION</b>	Use a team-based approach (health care providers, allied health providers, and non-traditional providers such as community health workers) to control blood pressure, cholesterol, and relevant risk factors.
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<b>EBS LEVEL</b> <i>CDC Ranking</i>	B = Best/Proven
<b>REFERENCE/CITATION</b> <i>Data Supporting Level/Ranking</i>	Guide to Community Preventive Services

<b>PROGRAM ATTRIBUTES</b>	
Influence Level <i>Population/Individual</i>	Multi-level
Intervention Setting	Clinical
Target Population	Adults with high blood pressure and/or cholesterol.
Key Measures	Increased blood pressure and cholesterol control among target populations. Increased medication adherence among target populations.
Cost	Varies by current organizational structure.
Time to Implement	<u>Organization:</u> Varies by current organizational structure. <u>Patient/Client:</u> Varies by current organizational structure.
Difficulty to Implement <i>Resource Intensity</i>	Varies by current organizational structure.
ROI <i>if known</i>	

<b>PROGRAM CONTACT INFORMATION</b>	
Organization	N.C. Division of Public Health, Chronic Disease and Injury Section, Community & Clinical Connections for Prevention & Health Branch
Contact Person	April Reese
Email / Telephone	April.Reese@dhhs.nc.gov/919-707-5344
Web Site	Million Hearts, <a href="http://millionhearts.hhs.gov/index.html">http://millionhearts.hhs.gov/index.html</a> . Start With Your Heart, <a href="http://www.startwithyourheart.com/">http://www.startwithyourheart.com/</a>

<b>CURRENT NC-DPH SUPPORT</b>	
T.A. – Yes/No Specific group? Other limitations?	Yes
T.A. Contact	April.Reese@dhhs.nc.gov/919-707-5344
Funding – Yes/No Specific group? Other limitations?	No
Funding Contact	

<b>EBS PROGRAM IMPLEMENTED BY / NC EXAMPLES</b>	
#1 – Organization Name / Contact Information	
#2 – Organization Name / Contact Information	
#3 – Organization Name / Contact Information	

**OTHER COMMENTS / NOTES**

The strategies above will be implemented under the new grant, *State Public Health Actions to Prevent and Control Diabetes, Heart Disease, Obesity and Associated Risk Factors and Promote School Health CDC-RFA-DP13-1305*. This grant consolidates the efforts and funding of the Diabetes Prevention and Control, Heart Disease and Stroke Prevention, School Health, and Physical Activity and Nutrition Branches. The capacity of this new branch, Community & Clinical Connections for Prevention & Health, to implement the strategies above will be determined by the award amount announced in June 2013.

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<b>FOCUS AREA</b>	Chronic Disease
<b>OBJECTIVE</b>	1. Reduce the cardiovascular disease mortality rate

<b>EBS PROGRAM DESCRIPTION</b>	Reduce sodium consumption by: promoting the adoption of procurement policies and practices that limit sodium intake; promoting the availability of lower-sodium food options (e.g., increased accessibility and competitive pricing); and promoting the expansion of consumer information labeling initiatives that include sodium.
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<b>EBS LEVEL</b> <i>CDC Ranking</i>	B = Best/Proven
<b>REFERENCE/CITATION</b> <i>Data Supporting Level/Ranking</i>	The Cochrane Library; Guide to Community Preventive Services; Strategies for States to Address the ABCs of Heart Disease and Stroke Prevention

<b>PROGRAM ATTRIBUTES</b>	
Influence Level	Organization
Target Population	Adult population
Intervention Setting	Worksite, faith-based, institution (such as prisons and nursing homes)
Key Measures	Increased access to lower-sodium foods. Increased sales of lower-sodium foods.
Cost	Low
Time to Implement	<u>Organization:</u> 1-6 months depending on intervention intensity <u>Patient/Client:</u>
Difficulty to Implement <i>Resource Intensity</i>	Low to moderate
ROI <i>if known</i>	

<b>PROGRAM CONTACT INFORMATION</b>	
Organization	N.C. Division of Public Health, Chronic Disease and Injury Section, Community & Clinical Connections for Prevention & Health Branch
Contact Person	Lori Rhew
Email / Telephone	Lori.Rhew@dhhs.nc.gov/919-707-5224
Web Site	

<b>CURRENT NC-DPH SUPPORT</b>	
T.A. – Yes/No Specific group? Other limitations?	Yes
T.A. Contact	Lori Rhew - Lori.Rhew@dhhs.nc.gov/919-707-5224
Funding – Yes/No Specific group? Other limitations?	No
Funding Contact	

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<b>EBS PROGRAM DESCRIPTION</b>	Increase adherence of medical providers to clinical guidelines by providing training on the accurate methods to take BP measurement (e.g., NC BP Measurement mini course).
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<b>EBS LEVEL</b> <i>CDC Ranking</i>	B = Best/Proven
<b>REFERENCE/CITATION</b> <i>Data Supporting Level/Ranking</i>	US DHHS National Institute of Health JNC 7

<b>PROGRAM ATTRIBUTES</b>	
Influence Level	Organization
Target Population	Health care providers
Intervention Setting	Health care facility and/or community-based facility
Key Measures	Increase the proportion of providers who measure blood pressure according to evidence-based guidelines.
Cost	Low Cost
Time to Implement	<u>Organization</u> : Time varies depending on organization. <u>Client</u> : 1-2 hour training
Difficulty to Implement <i>Resource Intensity</i>	Low
ROI <i>if known</i>	

<b>PROGRAM CONTACT INFORMATION</b>	
Organization	N.C. Division of Public Health, Chronic Disease and Injury Section, Community & Clinical Connections for Prevention & Health Branch
Contact Person	April Reese
Email / Telephone	April.Reese@dhhs.nc.gov/919-707-5344
Web Site	

<b>CURRENT NC-DPH SUPPORT</b>	
T.A. – Yes/No Specific group? Other limitations?	Yes
T.A. Contact	April.Reese@dhhs.nc.gov/919-707-5344
Funding – Yes/No Specific group? Other limitations?	No
Funding Contact	

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<b>OTHER COMMENTS / NOTES</b>
Approximately 450 health providers have been trained.

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<b>EBS PROGRAM DESCRIPTION</b>	Improve blood pressure control through promotion of Self-Measured Blood Pressure Monitoring (SMBPM), combined with additional support (i.e., beyond usual care).
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<b>EBS LEVEL</b> <i>CDC Ranking</i>	L = Leading
<b>REFERENCE/CITATION</b> <i>Data Supporting Level/Ranking</i>	Agency for Healthcare Research and Quality

<b>PROGRAM ATTRIBUTES</b>	
Influence Level	Organization
Intervention Setting	Clinical
Target Population	Adults with high blood pressure.
Key Measures	Increased blood pressure control among target populations. Increased medication adherence among target populations.
Cost	Low to moderate, depending on scale of intervention.
Time to Implement	<u>Organization</u> : Variable <u>Patient/Client</u> : Variable
Difficulty to Implement <i>Resource Intensity</i>	Low to moderate, depending on scale of intervention.
ROI <i>if known</i>	

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