

November MCH Huddle

Recording link:

<https://www.youtube.com/watch?v=EMv4yAa1Mo8&list=PLh5mk8BxSPgi3zcGTCTm1L9KMhyeElyHQ&index=3>

Featured Presenters & Topics:

Shawn Billings

Vice President of Substance Use Programming, Missouri Hospital Association – Quality, Safety, Research

Email: sbillings@mohospitals.org

Shawn shared insights on:

- Engaging Patients in Care Coordination (EPICC)
 - Overdose Data to Action – States (OD2A-S)
 - Bio-surveillance and prevention programming
 - The Naloxone Project
- He also highlighted opportunities for partnering in prevention efforts.

Resources from Shawn (below):

- EPICC One-Pager
- Naloxone One-Pager
- Partnering for Prevention One-Pager
- Show Me OD2A One-Pager

Rachel (Shoemaker) Badgett

Assistant Administrator/Health Educator, Dallas County Health Department

Email: Rachel.Badgett@dallascountyhealth.com

Rachel presented her Local Public Health Agency (LPHA) Success Story, and her slides are below.

Shelby Cox, Executive Director, Missouri EMS Association (MEMSA)

Email: shelby@cabllc.com

Maura Patel, Government Relations, American Heart Association

Email: maura.gray@heart.org

Rachelle Bartnick, Sr. Director, Community Impact, American Heart Association

Email: rachelle.bartnick@heart.org

Grace Presley, BSN, RN, Program Coordinator, Project ADAM, BJC Healthcare

Email: grace.presley2@bjc.org



ENGAGING PATIENTS IN CARE COORDINATION

MISSION

EPICC provides 24/7/365 referral and linkage services for patients residing in targeted regions who present to a hospital due to an overdose or other substance use crisis due to opioid, stimulant, or alcohol use to establish immediate connections to recovery support services, substance use treatment and and medication-assisted treatment services.

EPICC RECOVERY COACH SERVICES

Address Barriers

Recovery Coaches are equipped to assist with obtaining temporary housing, job necessities like an identification card, transportation to appointments, and basic life needs such as clothing and food.

Connection to Treatment

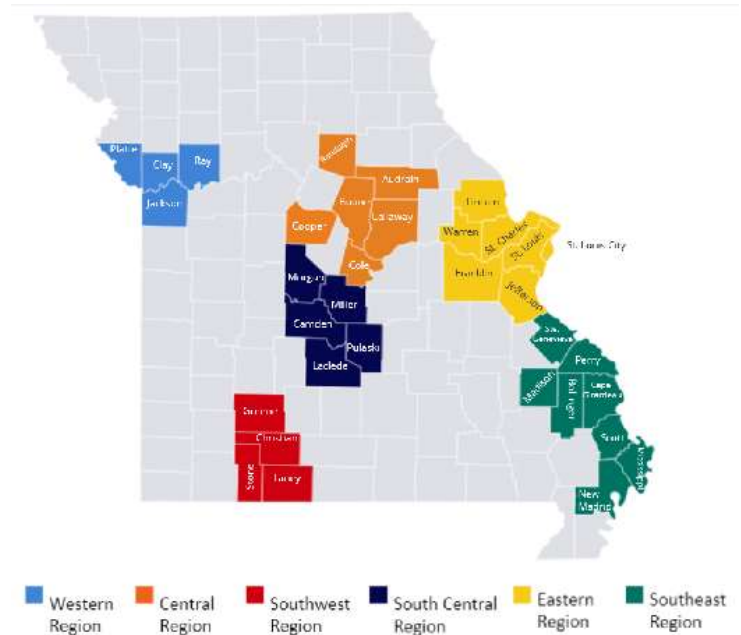
Recovery Coaches help locate resources for harm reduction, withdrawal management, local or online support groups, and assist individuals in creating a recovery plan.

Journey Through Recovery

Recovery Coaches assist peers through their recovery journey by providing direct support and advocacy. They support any positive change by helping peers build community support for ongoing recovery and work on life goals unrelated to use, such as relationships, work, housing, education and self-care.

Overdose Education & Naloxone, or Other FDA-approved Overdose Reversal Medication

Recovery Coaches provide overdose education and naloxone or other FDA-approved opioid antagonists.



EPICC was launched in 2016 by the Behavioral Health Network of Greater St. Louis and then expanded via the Missouri Hospital Association in 2019.



Statewide EPICC Recovery Coaches have responded to over 29,000 referrals since inception.

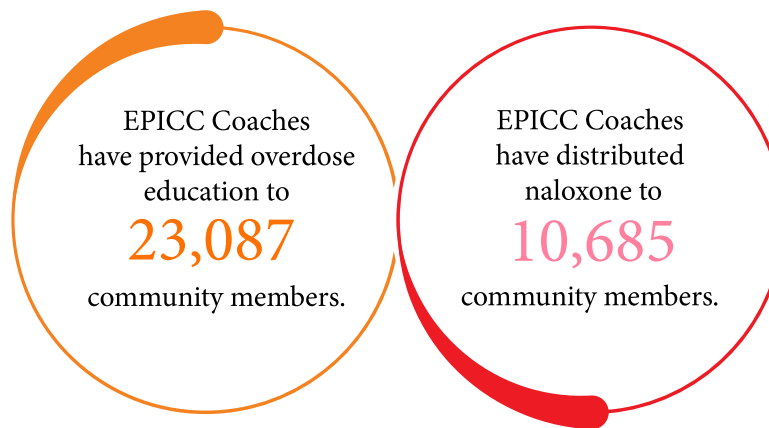


In 2021 MHA-led EPICC expanded eligibility to include stimulant and alcohol use disorder.

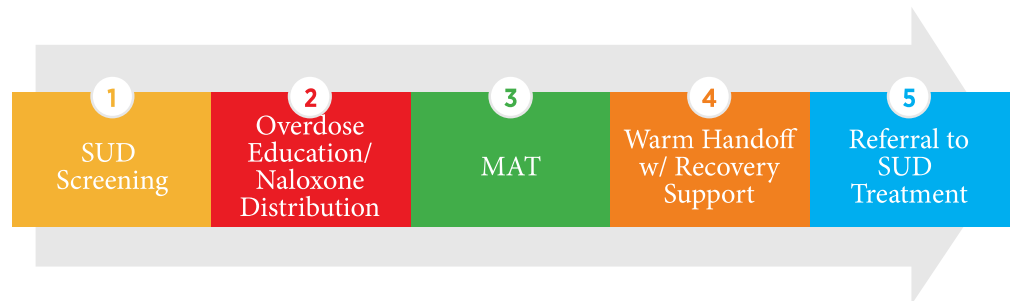


Community Members Referred Since MHA Project Launch to September 30, 2025

Year/Regions	2019	2020	2021	2022	2023	2024	2025
Eastern	2,366	2,821	3,393	2,791	2,526	2,021	1,706
Western	249	453	593	710	836	1,019	809
Southwest	4	235	229	546	690	1,086	1,062
Central	31	152	118	283	564	754	766
South Central	0	0	0	0	17	39	73
Southeast	0	0	0	0	0	127	73
TOTAL STATEWIDE PER YEAR	2,650	3,661	4,333	4,330	4,633	5,046	4,489



EPICC programming is implemented using screening, brief intervention and referral to treatment (SBIRT) model of care coordination.



CRISIS HOTLINES

(MO RESIDENT/16+)
CENTRAL REGION
1-800-395-2132

(MO RESIDENT/14+)
EASTERN REGION*
314-819-4275

(MO RESIDENT/18+)
SOUTHWEST REGION
1-800-494-7355

(MO RESIDENT/18+)
WESTERN REGION
816-412-9417

(MO RESIDENT/18+)
SOUTHEAST REGION*
1-888-651-3665

(MO RESIDENT/18+)

SOUTH CENTRAL REGION*

Send encrypted electronic referrals to epiccreferral@centralozarks.org

For more information on MHA-led EPICC programming (Central, Southwest, Western, South Central and Southeast Regions) contact Yoshelin Medina at ymedina@mohospitals.org or via phone at 573-893-3700, ext. 1399.

**The Eastern region only accepts referrals for opioid-related overdoses or use, the Southeast region only accepts opioid or stimulant-related overdoses or use referrals, and the South Central region is not funded through DMH or the State Opioid Response Grant.*



SHOW ME OVERDOSE DATA TO ACTION

BIO-SURVEILLANCE INITIATIVE



What is Overdose Data to Action in States (OD2A-S)?

The CDC's OD2A-S program is dedicated to supporting states as they tackle the overdose epidemic through prevention activities and accurate, comprehensive data collection.

What is Missouri doing?

Plasma samples are collected from patients presenting with any suspected nonfatal drug overdose. The de-identified sample is analyzed by the Missouri State Public Health Laboratory for a wide range of substances.

Why is this important?

A deeper understanding of the statewide trends will allow state and local agencies to better understand and prevent overdoses by providing targeted education, funding and resource building.

How will data be shared?

Data will be transmitted directly to DHSS from MSPHL to inform nationwide dashboards. MHA will share key findings with community and hospital partners.

How do I get involved?

Contact the Missouri Hospital Association for more information at OD2A@mhanet.com.



The Naloxone Project

The Missouri Chapter of the Naloxone Project

MISSION: To provide technical assistance from a multidisciplinary team of expert physicians, pharmacists, certified peer specialists, social workers, nurses, and project managers to support hospitals with take-home naloxone program development, supply chain, and sustainability.



LEARN MORE: [Missouri — The Naloxone Project](#)



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Partnering for Prevention

FREE TRAINING AND EDUCATION SUPPORT



Screening, Brief Intervention, and Referral to Treatment (SBIRT)

- Equip staff with practical strategies to identify and respond to substance use concerns early and effectively



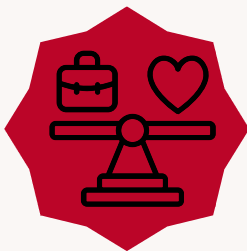
Motivational Interviewing

- Enhance patient engagement and support behavioral change through empathetic, goal-oriented communication



Stigma Reduction

- Build inclusive care environments by addressing biases and promoting understanding of mental health and substance misuse



Trauma-Informed Care

- Promote a healing environment for patients and providers that recognizes and responds to the impacts of trauma



Additional Topics Available Upon Request

- Our blend of social work, nursing, and lived experience allows us to speak on a wide range of topics. If our team isn't the right subject matter expert, let us find the right speaker to meet your needs!



CARDIAC EMERGENCY RESPONSE PLANS **IN COMMUNITIES**

Empowering a Nation of Lifesavers™



What is Sudden Cardiac Arrest?

- ▶ Sudden cardiac arrest occurs when the heart malfunctions and stops beating unexpectedly.
- ▶ An electrical malfunction in the heart causes an arrhythmia, or irregular heartbeat.
- ▶ In seconds, a person becomes unresponsive and cannot breathe.
- ▶ Death occurs within minutes if the person does not receive treatment.



Cardiac arrest is an
"electrical" problem

Cardiac Arrest Is a Leading Cause of Death

Cardiac arrest can happen anywhere, to anyone, at any age.



350,000+

CARDIAC ARRESTS

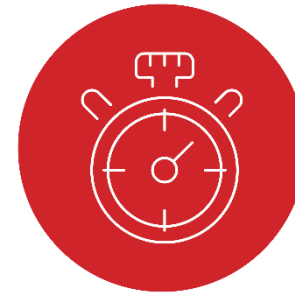
occur outside of a hospital
annually in the U.S.



AMONG CHILDREN

23,000

experience cardiac arrest
outside of a hospital



40%

OF PEOPLE

get the immediate help
that they need

Cardiac Arrest is a Health Equity Issue

Lack of CPR training and resources is a health equity issue.



WOMEN

are less likely than a man to receive CPR from a bystander.



MEDIAN INCOME

neighborhoods are less likely to survive cardiac arrest outside of the hospital.



BLACK & HISPANIC

adults are substantially less likely to receive bystander CPR.

Did You Know?

Cardiac arrest can be reversed if lifesaving care is administered within a few minutes.

- ▶ CPR, if performed immediately, can **DOUBLE OR TRIPLE** a person's chance of survival.





70%

of Americans feel
helpless to act during a
cardiac emergency.

We are currently a nation of bystanders that lack the
knowledge to act and save a life.

That's Where CERPs Come In

- ▶ What is a CERP?

It's a written document that establishes specific steps to reduce death from cardiac arrest in community settings and ensures that school responders are trained on how to execute them.

- ▶ A CERP can be stand-alone guidelines or merged with existing response plans.



Missouri Law: SB 68 - Language

2. For the 2026-27 school year and all subsequent school years, each public school shall develop and implement a cardiac emergency response plan that addresses the appropriate use of school personnel to respond to incidents involving an individual experiencing sudden cardiac arrest or a similar life-threatening emergency while on a school campus.
3. Members of each public school's administration shall coordinate directly with local emergency services providers to integrate the public school's cardiac emergency response plan into the local emergency services providers' protocols. A cardiac emergency response plan shall integrate evidence-based core elements, such as those recommended by the American Heart Association guidelines, Project ADAM, or another set of nationally recognized, evidence-based standards or core elements.
4. The cardiac emergency response plan shall integrate, at a minimum, the following core elements:
 - (1) Establishment of a cardiac emergency response team;
 - (2) Activation of the team in response to a sudden cardiac arrest;
 - (3) Implementation of AED placement and routine maintenance throughout the school campus;
 - (4) Dissemination of the plan throughout the school campus;
 - (5) Maintenance of ongoing staff training in CPR and AED use;
 - (6) Practice of the cardiac emergency response plan using drills annually;
 - (7) Integration of the plan into the local emergency services providers' protocols;
 - (8) Both annual and continuous reviews and evaluations of the plan; and
 - (9) Registration of AEDs to a registry maintained by the Missouri 911 service board.
5. Appropriate AED placement shall be dictated by the cardiac emergency response plan and in accordance with guidelines set by the American Heart Association or nationally recognized guidelines focused on emergency cardiovascular care. An AED should be identified with appropriate signage and is onsite or placed and made available in an unlocked location on school property.
6. For schools with an athletic department or organized school athletic program, an AED shall be clearly marked and easily accessible in an unlocked location at each school athletic venue and event. The AED shall be accessible during the school day and any school-sponsored athletic event or team practice in which pupils of the school are participating. To the extent possible, the governing body of a public school shall make the best effort to ensure that the AED placement as described in this subsection is accessible within three minutes of cardiac arrest.
7. Appropriate school personnel shall be certified in first aid, CPR, and AED use that follow evidence-based guidelines set forth by the American Heart Association or nationally recognized guidelines focused on emergency cardiovascular care. The school personnel required to be certified shall be determined by the cardiac emergency response plan and shall include, but not be limited to, athletics coaches, school nurses, and athletic trainers.
8. The provisions of this section shall not be construed to require public schools to purchase AEDs unless the general assembly appropriates funds. Nothing in this section shall prohibit schools from seeking alternative funding sources.

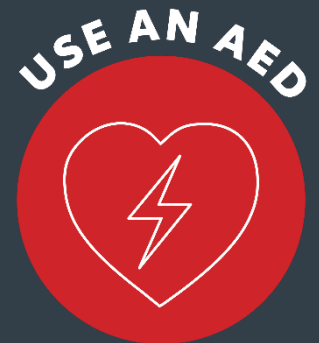
Link to SB 68 language:

Full bill: https://www.senate.mo.gov/25info/BTS_Web/BillText.aspx?SessionType=R&BillID=422

OR <https://revisor.mo.gov/main/OneSection.aspx?section=160.482&bid=57271&hl=Cardiac+emergency+response+plan%u2044>

CERPs Save Lives!

- ▶ CERPs more than **DOUBLE survival rates from cardiac arrest** by empowering people to take action and dial 911, start CPR, and use an AED.
- ▶ We need CERPs in **every community organization, school and athletic facility**.
- ▶ CERPs should also be integrated into a community's local EMS responder protocols.



Core Elements of a CERP



Following the evidence-based core elements will ensure proper preparation, response, and evaluation.





Cardiac Emergency Response Team (CERT)

- ▶ A group of staff members who have current CPR/AED training and are designated to respond to and provide basic life support during a cardiac emergency
- ▶ Should be established/renewed annually and is responsible for building, implementing, and evaluating the organization's CERP.



Who should be on our CERT?



Staff members with current CPR/AED training.



At least one staff member in each section of the building or location.



On site medical professional, if applicable.



Organization administrators or management.



Representatives of organizations using shared space.



CERT Responsibilities

- ▶ Communicate with organization administrators annually to ensure CERP compliance with law and policies.
- ▶ Read the CERP to implement action steps in each of the core elements.
- ▶ Meet regularly (e.g. monthly) to plan, implement and evaluate CERP.
- ▶ Monitor implementation of CERP using CERP timeline.
- ▶ Evaluate CERP annually and provide feedback and data.
- ▶ Update CERP annually.



CERT Best Practices

- ▶ Identify a CERT Coordinator
- ▶ Have CERT comprised of at least 5 people or 10% of staff
- ▶ CERT members should be able to step away from tasks to assist when CERP is activated
- ▶ A list of CERT members and their CPR certifications should be maintained on-site in an accessible area
- ▶ Include individuals that are most often at the facility



What is CPR?

CPR stands for cardiopulmonary resuscitation.

By pushing hard and fast on someone's chest, you are:

- Performing chest compressions which act like an external heart
- Helping to pump blood to the vital organs such as the brain



What type of CPR training do you need?



HANDS-ONLY CPR



CALL 911



PUSH HARD AND FAST IN
THE CENTER OF THE CHEST

Public awareness campaign to get more people to act when they encounter a cardiac arrest. Starting point to get more people to learn CPR.

**Will not meet requirements if you
need CPR for your job.**

CPR TRAINING



COMPRESSIONS + BREATHS

Offered through online or in-person classes. Provides more in-depth training with an instructor, including CPR with breaths and choking relief.

**Often necessary for people who
need CPR training for work.**





CPR – Best Practices

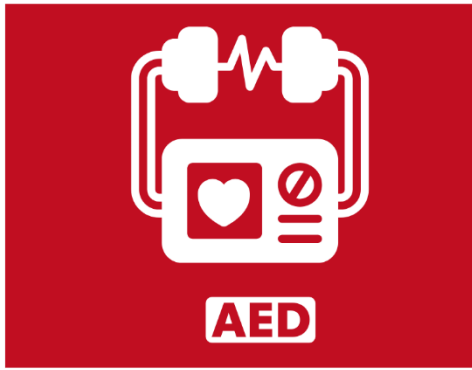
- ▶ CERT and sufficient number of staff should be trained in CPR/AED, including renewal every two years
- ▶ Designate a person responsible for coordinating staff training
- ▶ All staff should receive annual training on SCA and understand how to recognize it, how to initiate the response team, and where the AEDs are located
- ▶ As many staff members as possible should be trained in hands-only CPR/AED
- ▶ Provide CPR/AED training for organizational leadership and those who are most often at the facility



Certification

CPR – Hands Only Video

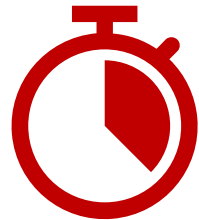




AED Facts



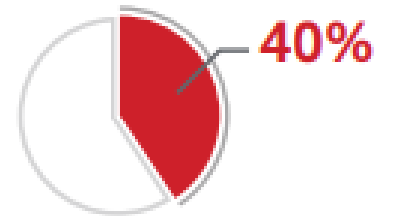
51% of employees don't know where their workplace AED is located



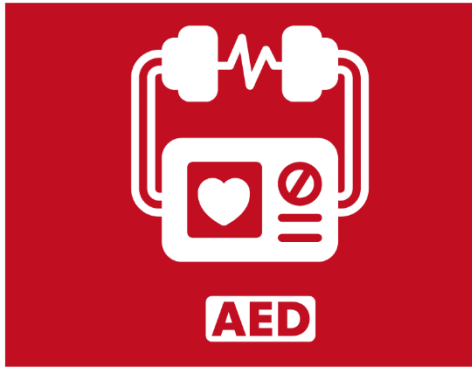
9 in 10 cardiac arrest victims who receive a shock from an AED in the first minute live



Chance of survival while waiting for EMS during a cardiac emergency decreases by **10% every minute** without CPR



Bystanders administer CPR about **40%** of the time and AEDs even less so



AED Placement, Installation & Maintenance

- ▶ # of AEDs shall be sufficient to enable retrieval and delivery within 3 minutes
- ▶ Regularly check and log AED maintenance
- ▶ CERT should establish process for verifying and tracking AED readiness
- ▶ A resuscitation kit should be connected to the AED carry case, containing:
 - ▶ Gloves, razor, scissors, towel, antiseptic wipes, CPR barrier mask, extra AED pads
 - ▶ Also consider storing naloxone and epinephrine autoinjector
- ▶ AED should be quickly accessible, not locked in an office



AED Placement, Installation & Maintenance

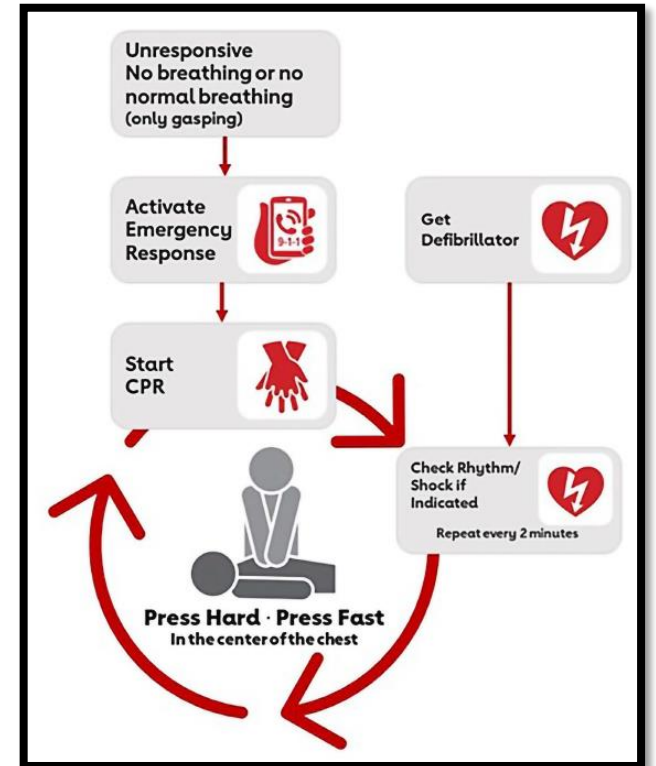
- ▶ AEDs shall be accessible during day, night, and after-hour activities
- ▶ Each AED should have one set of AED pads with the device
- ▶ All AEDs should have clear AED signage to be easily identified
- ▶ Recommend removing warning “for professional use only” on AED cabinets
- ▶ Locations of AED are to be listed in CERP Protocol with maps





AED Best Practices

- ▶ AEDs should be installed using an approved cabinet or bracket/wall rack
- ▶ Keep copies of event documentation with AED and first responder kits
- ▶ CERT Coordinator should register AED with manufacturer to be aware of potential recalls or alerts
- ▶ If you work with children, consider pediatric pads and/or educate yourself on using adult pads on children
- ▶ Consider posting the AHA *Act Now. Save a Life.* Diagram near AED cabinet





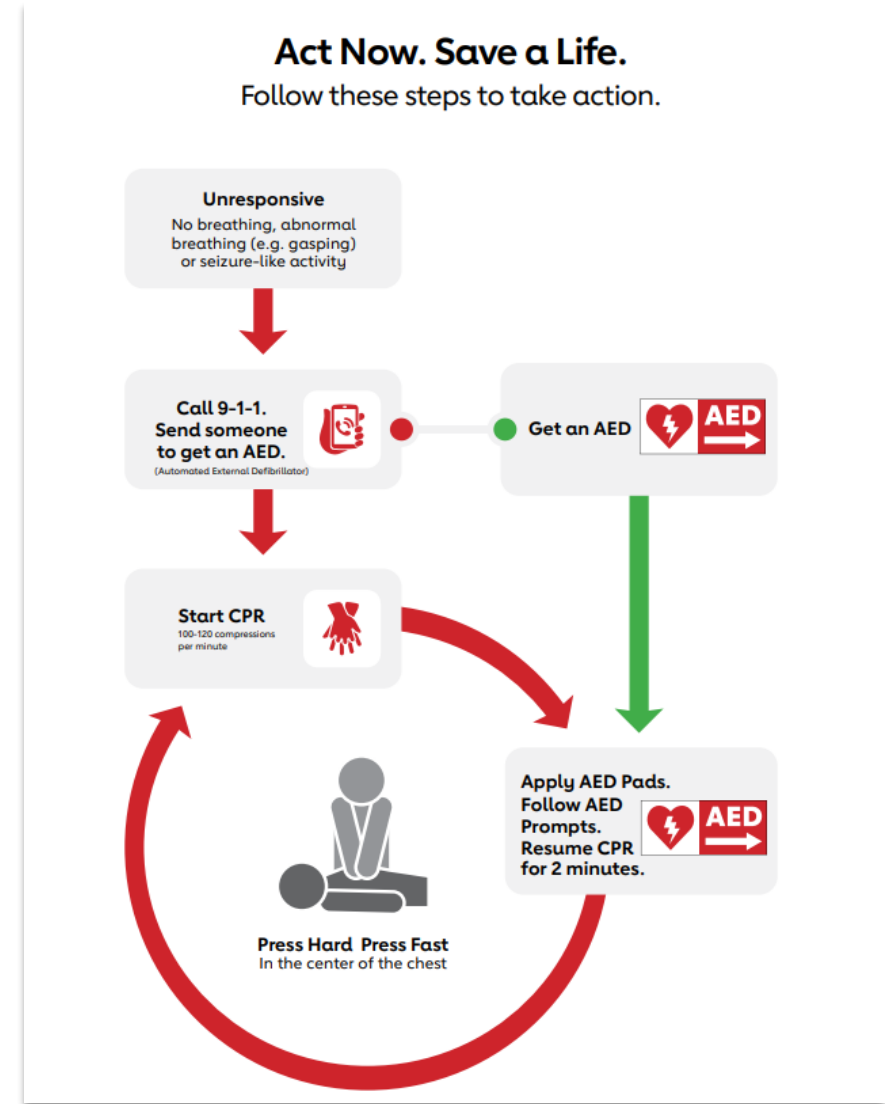
AED Use Video





Communicate CERP

- Post the CERP protocol infographic (pictured right) throughout the facility including adjacent to each AED, in occupied spaces, and outdoor areas.
- Coordinate the CERP with local EMS and dispatch agencies or provide a copy of the plan.
- Inform local emergency response system of the number and location of on-site AEDs.





Communication of CERP

Where to POST?

- Adjacent to each AED
- Attached to portable AEDs
- Restrooms
- Breakroom
- Central offices
- Common spaces

DISTRIBUTE to Who?

- CERP should be made available to **ALL STAFF** on an annual basis
- All staff and volunteers should be educated on CERP on annual basis
- New staff and volunteers should receive CERP as part of orientation

Best Practices:

- Provide a copy of the CERP to any organization using the building or location.
- A building/location user or renter should have their own plan, as well, that incorporates the Sites CERP.
- Educate as many people as possible in Hands-Only CPR.



Local EMS Integration

1. Provide a copy of the CERP to local emergency response and dispatch agencies (e.g. the 911 response system).
 - This may include local police and fire departments as well as local EMS agencies (public and private)
2. When possible, integrate local EMS, organization safety officials, on-site first responders, organization leadership, onsite medical staff, and/or community medical teams in development and implementation of CERP.

Best Practices:

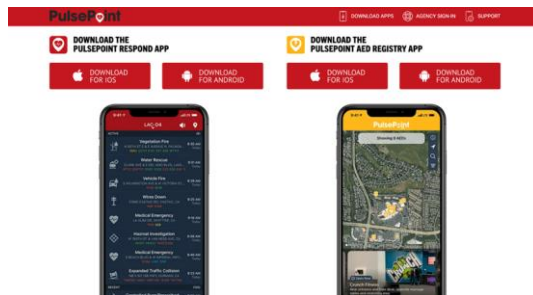
- Invite local EMS and first responders to CERP drills for feedback and insight about realistic situations.
- Speak with local EMS (or AHA) about access to training supplies for CERP drills.



AED Registration

1. Info Local EMS/First Responders of the placement of an on-site AED
2. REGISTER YOUR AED HERE:

<https://www.missouri911.org/aed-registry>





Practice



Evaluate



Activate



Practice the cardiac emergency response plan by conducting two (2) drills a year.



Activate the Cardiac Emergency Response Team immediately when cardiac arrest is suspected.



Conduct post-incident evaluations of responses. Conduct an annual review of the plan and make updates as needed.



FAQs


▶ Can I make things worse?

- ▶ No. A person whose heart has stopped must have CPR to survive.

▶ What if I do CPR wrong?

- ▶ Without CPR, its is very unlikely that the person will survive. **Your actions can only help.**

Resources and Templates: Cardiac Emergency Response Plan (CERP)



Cardiac Emergency Response Plan Planning Checklist

The American Heart Association wants all people to learn First Aid, cardiopulmonary resuscitation (CPR) and how to use an Automated External Defibrillator (AED) to create a generation of people that are prepared to act in an emergency—a Nation of Lifesavers.

About 9 out of 10 cardiac arrest victims who receive a shock from an AED in the first minute live. During cardiac arrest, the use of CPR can double or triple a person's chance of survival.

All schools, workplaces, community organizations, and sports facilities should establish a Cardiac Emergency Response Plan (CERP). The following checklist contains the steps to include in your plan:

Establish a Cardiac Emergency Response Team (CERT)

- ☐ Designate one person as the Cardiac Emergency Response Team Coordinator who oversees CPR and AED program activities, training, education, and evaluation.
- ☐ All members of the Cardiac Emergency Response Team have current CPR and AED training from a nationally recognized organization.
- ☐ Designate individuals to promptly call 9-1-1 and direct EMS to the location of the sudden cardiac arrest.

Cardiac Emergency Response Plan

[Organization, building, or location name]

Purpose

This document provides direction and detailed guidance for responding to a sudden cardiac arrest (SCA) through a Cardiac Emergency Response Plan (CERP). This plan outlines Cardiac Emergency Response Teams (CERTs), AED maintenance and locations, CERP protocol and related staff training/certification. This document does not replace any district policies or local, state, or national regulations.

In the United States, it is estimated that annually 350,000 adults experience out-of-hospital cardiac arrest as well as 23,000 pediatric cardiac arrests ([Mozaffarian, D, 2015; Okubo, M et al, 2020](#)). Although approximately 90% of those people will not survive the event, the likelihood of survival increases with prompt intervention. According to the American Heart Association (AHA), early intervention that includes CPR and restoration of normal heart rhythm with the use of an AED increases the chance of survival.



Cardiac Emergency Response Plan and Protocol



Cardiac Emergency Response Plan Implementation Guide

A Cardiac Emergency Response Plan (CERP) is a written document that establishes the specific steps to reduce death from cardiac arrest in any setting – be it a school, community organization, workplace, or sports facility. The following guidance will help organizations create, share, practice, activate, and evaluate a cardiac emergency response plan.

1 Create a Cardiac Emergency Response Plan

All schools, community organizations or workplaces, and sports facilities should establish a Cardiac Emergency Response Plan (CERP). Learn about sudden cardiac arrest, CERPs, and other resources available to guide you. Then, you identify the members of the Cardiac Emergency Response Team and start drafting the CERP based on your organization's resources and needs.

Learn about sudden cardiac arrest and CERPs.

- Learn about sudden cardiac arrest and CPR at [Heart.org/NationofLifesavers](https://www.heart.org/NationofLifesavers)
- Learn about CERPs at [Heart.org/CERP](https://www.heart.org/CERP)

Review the CERP Guidance

- [For schools](#)
- [For community and workplaces](#)
- [For sports facilities](#)

Understand your local resources and organizations that can support your organizational efforts to prepare for and respond to an out-of-hospital cardiac arrest. Local resources can include the following:

- Community organizations, such as local offices of the [American Heart Association](#) or [Project Adam](#).
- Emergency Medical Responders such as your local fire department.
- Local government, such as local health department or elected officials.

Identify the members of the Cardiac Emergency Response Team (CERT). The CERT is a group of staff members who have current CPR and AED training and are designated to respond to and provide basic life support during a cardiac emergency. The following resources can help you organize your team.

- [Developing Cardiac Emergency Response Team](#)
- [CERP Team Roster](#)
- [Sample Timeline for CERP Action Steps](#)

Draft your Cardiac Emergency Response Plan based on the following evidence-based guidance and be familiar with resources to help you draft your plan.

- [For schools](#)
- [For community and workplaces](#)
- [For sports facilities](#)
- [CERP Resources by Evidence-based Core Element](#)



Steps to Become Heart Safe



Open All

Step 1: Project ADAM Heart Safe School Program Checklist



Step 2: Project ADAM Heart Safe School Toolkit



Step 3: Program Templates & Videos



<https://projectadam.com/Heart-safe-schools>



Project ADAM Heart Safe School Program Checklist

A comprehensive program of sudden cardiac arrest preparedness in schools.

This document will serve as your guide through the Heart Safe School program implementation process.

Instructions:

1. Complete and return your initial assessment to your local Project ADAM affiliate site and they will serve as your partner to guide you through the program. If there is not an affiliate site in your area, we encourage you to utilize our [Project ADAM Resources](#) and contact the National Office for support at projectadam@childrenswi.org.
2. Once all criteria are met, contact your local Project ADAM affiliate site (if available) to submit necessary documentation to achieve local recognition. Retain a copy in your school files.

Today's Date: _____

CPR-AED Site Coordinator or Contact Person: _____

Email: _____ Phone: _____

Name of School: _____ Name of District: _____

☐ Pre-school ☐ Elementary ☐ Middle ☐ High School ☐ Private ☐ Other

AUTOMATED EXTERNAL DEFIBRILLATORS (AEDs)	Initial Assessment	Working Checklist	Progress Notes
AED equipment location(s) on a school campus are clearly marked and make it possible to retrieve an AED, apply pads and deliver a shock (if needed) to an unresponsive victim in under three minutes.	<input type="checkbox"/>	<input type="checkbox"/>	
The AED(s) is checked for performance readiness at least monthly, or per manufacturer's directions and documented each time.	<input type="checkbox"/>	<input type="checkbox"/>	
We keep a first responder kit near or attached to the AED which includes: CPR barrier device, scissors, gloves, razor and towel.	<input type="checkbox"/>	<input type="checkbox"/>	

Elements of a CERP



Following the evidence-based core elements will ensure proper preparation, response, and evaluation.





memsa

MISSOURI EMERGENCY MEDICAL SERVICES ASSOCIATION

TITLE I SCHOOLS CERP/AED PROJECT



Shelby Cox, BS NR-Paramedic

Executive Director, Missouri EMS Association

Senior EMS Consultant, Community Asset Builders

THE MISSOURI EMS ASSOCIATION (MEMSA) IS MISSOURI'S STATEWIDE NONPROFIT EMS ASSOCIATION SUPPORTING THE EMS INDUSTRY, AS WELL AS INDIVIDUAL EMS PROFESSIONALS AND AGENCIES.

MEMSA IS THE RECIPIENT OF A ONE-YEAR CONTRACT FROM THE MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES TO COLLABORATE WITH EMERGENCY MEDICAL SERVICES PROFESSIONALS ON ACTIVITIES AND EQUIPMENT THAT FURTHER PROMOTE PREPAREDNESS FOR THE CARDIAC EMERGENCY RESPONSE PLAN IN TITLE I SCHOOLS.

BUT WHY MEMSA?

PROJECT COLLABORATION

American Heart Association (AHA)

Project ADAM (St. Louis Children's & Children's Mercy KC)

University of Missouri's Cardiac Arrest Registry to Enhance Survival (CARES)

Title I Schools

EMS/Fire Agencies



TITLE 1
SCHOOLS

Project ADAM[®]
SAVES LIVES





MEET THEM WHERE THEY ARE.

TITLE I SCHOOL SURVEY

STARTING POINT IS DEPENDENT ON THE SURVEY RESULTS

- CERP
- Have or Need AED/Equipment
- CPR/AED Certification & First Aid Training
- Live CERP Drill
- Maintenance/Compliance of AEDs
- AEDs Registered – MO911
- Project Completion Recognition



A pair of hands is shown holding a red string, which is looped and crossed to form a complex geometric pattern, possibly a magic square or a similar mathematical structure. The hands are positioned with fingers spread, and the string is taut between them. The background is a blurred, light-colored surface.

BASED ON SURVEY RESULTS


WE WILL DO A WARM HANDOFF TO THE MOST APPROPRIATE CONTACT AND WORK WITH YOU THROUGH EACH PIECE OF THE PROJECT UNTIL IT IS COMPLETE.

ABOUT THE PROJECT

- The funding will support the arrangement and provision of CPR/AED Certification and first aid education and training, as well as drills, for school personnel on an annual or biannual basis, as appropriate.
- It will also fund the provision of technical assistance for planning, development, and implementation of a Cardiac Emergency Response Plan, including assisting schools in obtaining necessary AED equipment and supplies.
- EMS agencies will be engaged to support schools and work alongside them on purchasing AEDs (if needed), training on CPR/AED & first aid, planning and practicing a live drill, and ensuring the school has a routine check and maintenance schedule for their AED equipment and supplies.
- Project partners will also implement a process for formally recognizing schools that complete the project.



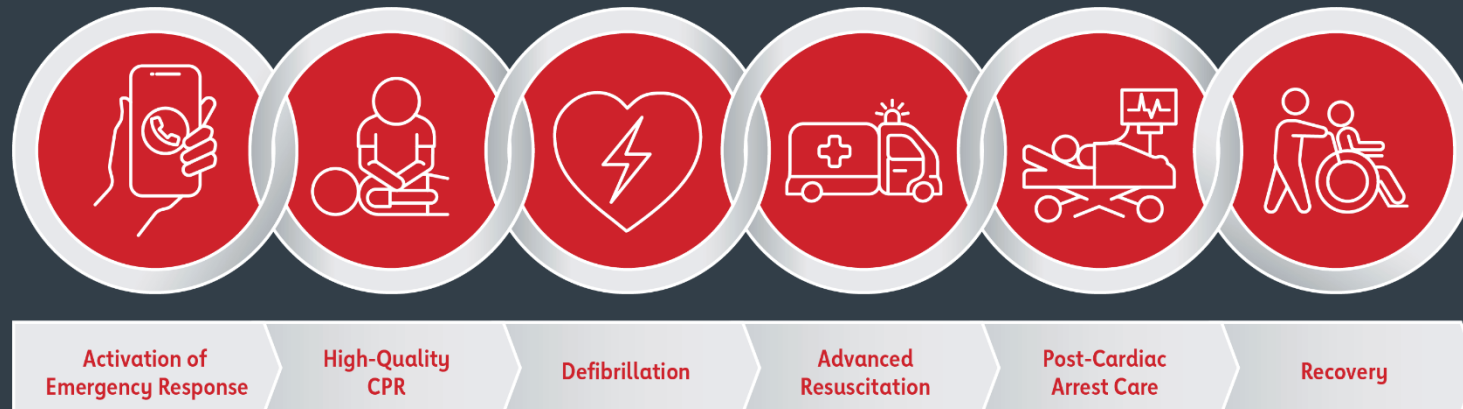
THANK YOU!
CONTACT ME WITH
QUESTIONS OR TO
GET THE SURVEY:
SHELBY@CABLLC.COM



Help Us Build a Nation of Lifesavers™



The American Heart Association is committed to turning a nation of bystanders into a Nation of Lifesavers™, so that in the face of a cardiac emergency, anyone, anywhere is prepared and empowered to perform CPR and become a vital link in the Chain of Survival.



Join the Nation of Lifesavers™

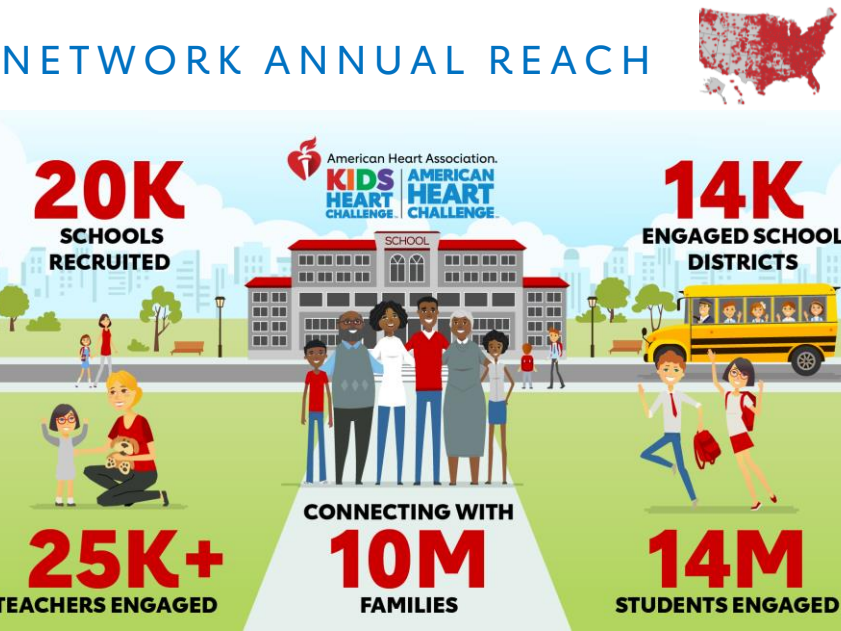


Be a part of the movement to double survival rates from sudden cardiac arrest by 2030.

► Visit heart.org/nation





With nearly 50 years of momentum, Kids Heart Challenge engages 14 million students and their families each year, providing schools with resources and curriculum aimed at developing happy and healthy children prepared to physically and emotionally achieve in the world. The program also extends to support families and educators nationwide with their physical and mental well-being to show up as their best selves.



IMPACTING STUDENTS' WHOLE HEALTH

K-12 KIDS HEART CHALLENGE PILLARS

 <h3>PHYSICAL ACTIVITY</h3> <p>Many kids don't get enough physical activity. Only 24% of children aged 6-17 getting the recommended 60 minutes of physical activity each day.</p>	 <h3>SAVE LIVES, LEARN CPR</h3> <p>90% of people who suffer out-of-hospital cardiac arrest do not survive. When performed immediately, CPR can double or triple a cardiac arrest victim's chance of survival.</p>	 <h3>NUTRITION & HYDRATION</h3> <p>Nearly two-thirds of youth living in the United States have a sugary drink every day. On average, youth consume approximately 133 calories from sugary drinks daily.</p>	 <h3>QUALITY SLEEP</h3> <p>Many children are not getting enough sleep. The amount and quality of sleep can influence your eating habits, mood, memory, and more. AHA has added sleep to its list of key measures to help improve and maintain cardiovascular health.</p>	 <h3>SKILLS BUILDING + CAREERS</h3> <p>Today's economy and tomorrow's well-being depend on innovations in Science, Technology, Engineering, and Mathematics. AHA recognizes the importance of inspiring a new generation of diverse scientists, doctors, inventors and changemakers</p>
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Project ADAM[®]
SAVES LIVES



Supporting Schools in CERP development & Funding

American Heart Association

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Empowering a Nation of Lifesavers™





Thank you!

.....

Contact us today: American Heart Association

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- Rachelle Bartnick: rachelle.bartnick@heart.org
- Kids Heart Challenge – Kary Bachert: kary.bachert@heart.org



The background features a large white circle in the center, partially overlapping a light blue area on the left and a light pink area on the right. A large, solid dark blue shape is positioned at the bottom, with its top edge following the curve of the white circle.

SCHOOL HEALTH PARTNERSHIPS

AGENDA

Campaigns

Classroom Presentations

After-school Presentations

Health Classes/Presentations

Alternative Options/Lunch Options

Keys to Success



CAMPAIGNS

***PHYSICAL EDUCATION CLASSES**

***ELEMENTARY**

***MIDDLE SCHOOL**

***CLASSROOMS**

***INCENTIVES**

***TIME FRAME (6-8 WEEKS)**

CLASSROOM PRESENTATIONS

- *Monthly

- *Any

- *Grades K-4

- *Grades K-2

- *Exceptions

- *Alternative School, SPED, ECSE, School Daycare

- *Bright Minds, Healthy Futures

- *Sugar

- *Food Groups/Portions

- *Hygiene

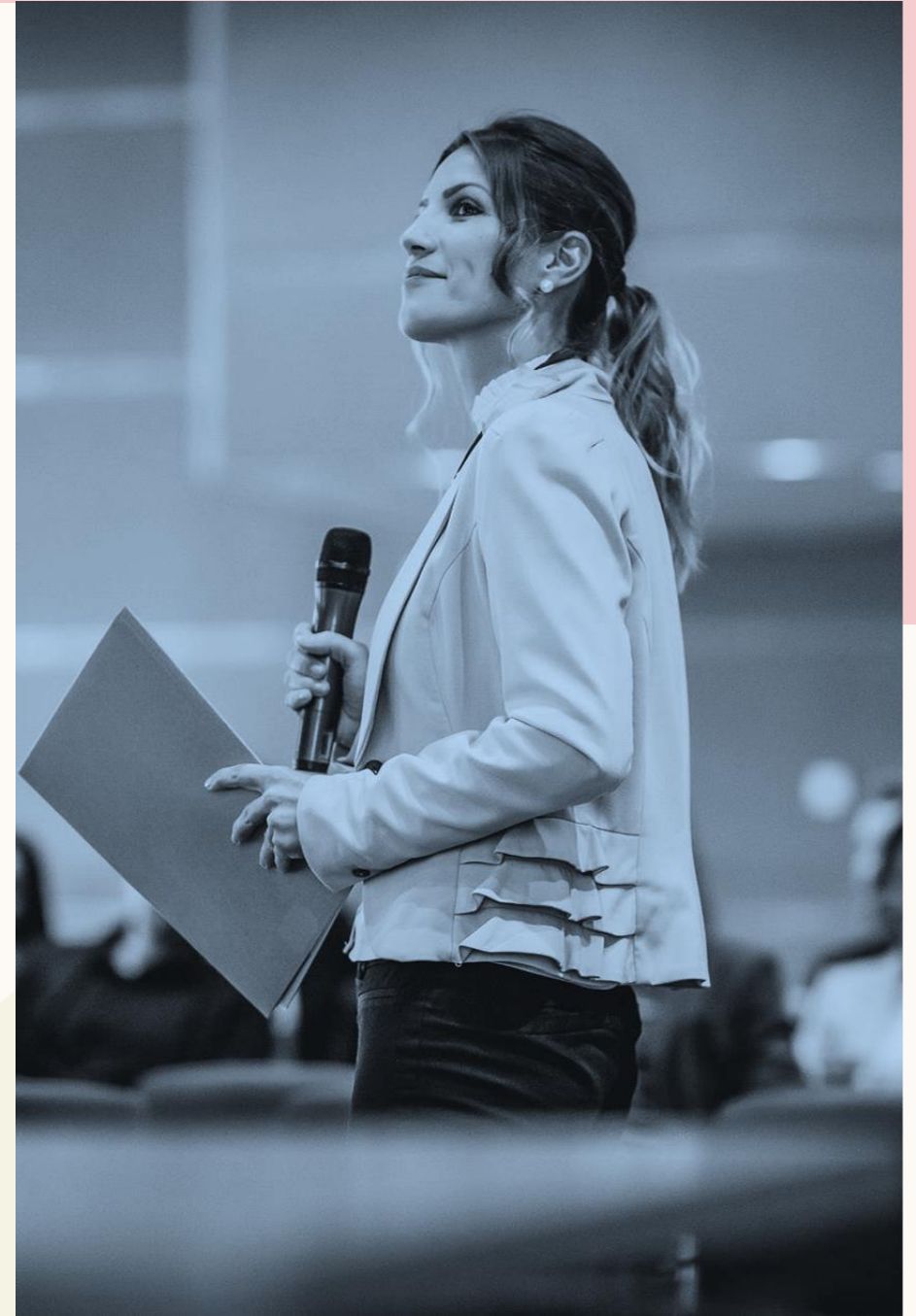
- *STI/Sexual Health

- *Physical Activity

- *Self-Esteem (Mental Health)

- *Preparedness

- *Tobacco/Vaping



AFTER-SCHOOL

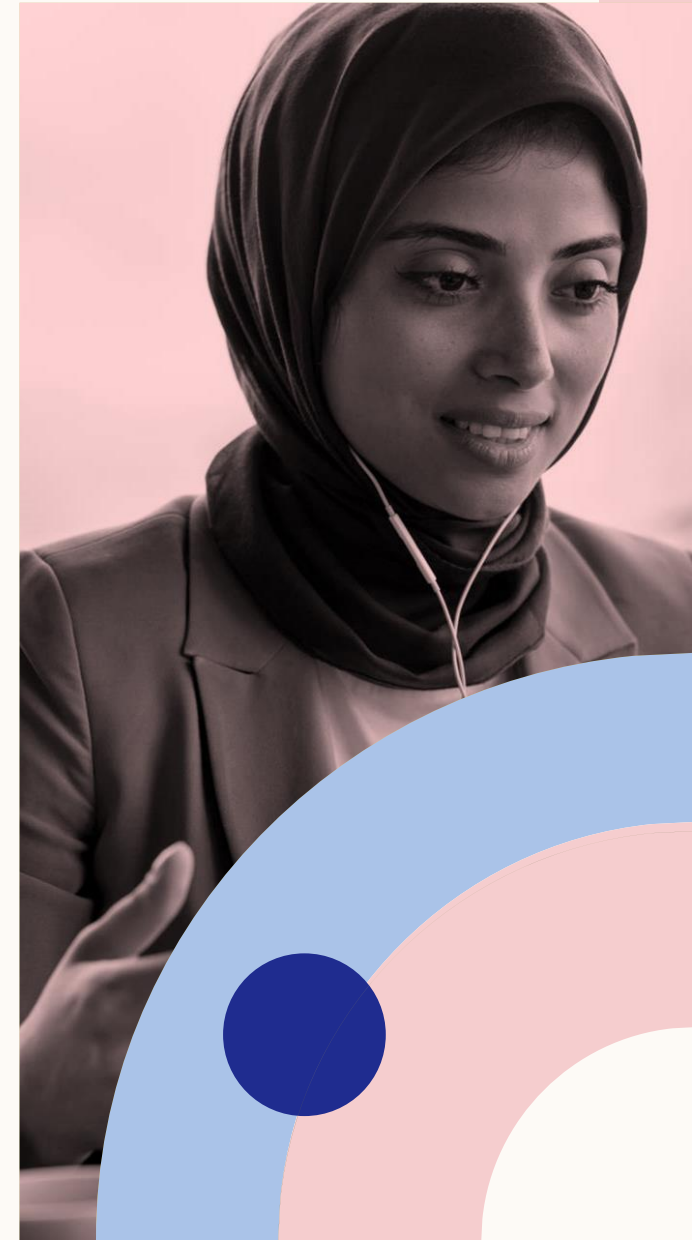
- Our schools have the 21st Century Learning Centers Grant
 - Kids in the Kitchen
 - 10 years, twice a week, snack and a lesson for 120 students weekly
 - About 5 of those years at two separate elementary schools
 - Occasional Presentations to middle school
 - Current Healthy and Active
 - Quarterly
 - Bison Academy Jr (Elementary)
 - Bison Academy (Middle)
 - Bi-Annual
 - Bison Academy Jr (Elementary)
 - Bison Academy (Middle)

HEALTH CLASSES/PRESENTATIONS'

- High School Health Classes
 - * Monthly
- Middle School Health Classes
 - * Periodically
- After-School Parent Events
- Parents As Teachers Events
- School Nurses
 - * Health Screenings

ALTERNATIVE OPTIONS/LUNCH OPTIONS

- Poster Contests
 - Grant
 - Art Classes
- Radio/Video PSA
 - FBLA
 - Smokebusters
 - Tobacco Initiatives
 - Media Classes
- The Walking Classroom
 - Read Across America
- Serve on an Advisory Committee
 - Wellness
 - DCTC
 - School Counselors
- PCHC
 - Lunch Program
- Connect to other Health Depts
 - Health Ed Meetings



KEYS TO SUCCESS

- Contact Building Administrators Annually
- Be open to working with any staff
- Be flexible
- Be consistent
- Look for partnerships
- Tailor to your school, community, availability





**THANK
YOU**

Rachel Badgett

Dallas County Health Department

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