

Title: Best Practices for Cardiovascular Disease Prevention Programs: A Guide to Effective Health Care System Interventions and Community Programs Linked to Clinical Services.
(Formerly titled: Best practices for Heart Disease & Stroke Prevention: A Resource for State Health Departments and Community Stakeholders)

Subject of Report: This guide summarizes the evidence supporting best practices for heart disease and stroke prevention. Addressing chronic disease requires the use of an array of strategies at the individual (e.g. behavioral interventions) and population level (e.g., system change). Quality health care systems, policies, and environmental approaches that promote healthy communities are essential to the prevention and control of chronic diseases and their related risk factors. Such approaches are vital to producing environments where individuals are able to make healthier choices and take better control of their health. The Centers for Disease Control and Prevention (CDC) uses a coordinated approach to addressing chronic diseases through four domains: epidemiology and surveillance, environmental approaches, health care system interventions, and community-clinical linkages. The strategies in this guide fit within health care system interventions (domain 3), and community-clinical linkages (domain 4). In addition to the evidence of effectiveness, we review cross-cutting considerations related to implementation, such as whether the strategies have been found effective in more than one setting, with diverse populations, and if there is evidence related to reducing health disparities. Other cross-cutting themes center on whether the strategies are cost-effective or show return on investment, have policy or legal implications, and are supported by current guidelines or initiatives. Success stories are included to highlight how and where the strategy has been implemented by various groups successfully.

Purpose of Report: The aim of the report is to provide guidance on best practices to address public health activities for heart disease and stroke prevention at the state and local levels. The guide aims to serve as a best practices resource guide that includes intervention recommendation for heart disease and stroke prevention programs focused on health systems interventions (Domain 3) and community/ clinical linkages (Domain 4).

Type of Dissemination: Influential Scientific Information (ISI)

Timing of Review (including deferrals): April-June 2017; online publication December 2017

Type of Review (panel, individual or alternative procedure): Individual

Opportunities for the Public to Comment (how and when): No

Peer Reviewers Provided with Public Comments before the Review: Not applicable

Actual Number of Reviewers: 6 external reviewers

Primary Disciplines or Expertise: Public health, cardiovascular disease, implementation science, pharmacy, community health.

Reviewers Selected by (agency or designated outside organization): Centers for Disease Control and Prevention/Agency

Public Nominations Requested for Reviewers: No

Peer Reviewers:

Name: Jill Ceitlin, MPH

Organization: American Heart Association (AHA)

Position/Title: State and Community Advocacy Consultant

Areas of Expertise/Discipline/ Relevant Experiences: Works closely with states and communities to implement cardiovascular prevention strategies.

Recommended by: Scientific/Professional Society

Name: Laurie P. Whitsel, PhD

Organization: American Heart Association (AHA)

Position/Title: Director of Policy Research

Areas of Expertise/Discipline/ Relevant Experiences: Works to translate science into policy at a national level in the areas of cardiovascular disease, stroke prevention and health promotion.

Recommended by: Scientific/Professional Society

Name: Darwin Labarthe, MD, MPH, PhD

Organization: Feinberg School of Medicine, Northwestern University

Position/Title: Professor of Preventive Medicine

Areas of Expertise/Discipline/ Relevant Experiences: Previously Director of the Division for Heart Disease and Stroke Prevention, Dr. Labarthe led the development and implementation of the long-range public health strategic plan, A Public Health Action Plan to Prevent Heart Disease and Stroke. Current research and teaching activities in the area of cardiovascular diseases and their prevention.

Recommended by: Scientific/Professional Society

Name: Kathleen Foell, MS

Organization: National Association of Chronic Disease Directors (NACDD)

Position/Title: Consultant (present); Massachusetts Department of Public Health (previous)

Areas of Expertise/Discipline/ Relevant Experiences: Heart disease and stroke prevention from consultant and state health department perspectives

Recommended by: Scientific/Professional Society

Name: Miriam Patanian, MPH

Organization: National Association of Chronic Disease Directors (NACDD)

Position/Title: Lead Health Consultant

Areas of Expertise/Discipline/ Relevant Experiences: Leads NACDD's Cardiovascular Health (CVH) Council, which supports health departments in implementing population health improvement strategies for cardiovascular disease prevention. The CVH Council is a resource for state-based cardiovascular health and heart disease and stroke prevention (HDSP) program managers and staff and provides technical assistance, resources, and networking opportunities to HDSP staff.

Recommended by: Scientific/Professional Society

Name: Joyce Lopez, RN, MS, BSN

Organization: Oklahoma State Department of Health, Chronic Disease Service

Position/Title: Administrative Program Manager

Areas of Expertise/Discipline/ Relevant Experiences: Joyce Lopez is one of the Administrative Program Managers in the Chronic Disease Service at the Oklahoma State Department of Health (OSDH); she has been with OSDH since 2014. She and her staff currently work on activities related to CDC grants 1305 and 1422. She has over 20 years of nursing experience.

Recommended by: Scientific/Professional Society

Charge to Peer Reviewers:

The goal of this project is to produce a resource primarily for state and local health departments and their stakeholders that will summarize best practice strategies for cardiovascular disease prevention that can be implemented in health systems and in community programs linked to clinical services.

Participation in the review entails reviewing a complete draft of the guide titled, *Best Practices for Cardiovascular Disease Prevention Programs: A Guide to Effective Health Care System Interventions and Community Programs Linked to Clinical Services*, and providing feedback via email.

Peer Reviewers' Comments:

Peer reviewer comments were focused on increasing the clarity of the language and descriptions throughout the guide, including adding definitions, providing a “key” to understanding the evidence summaries, including additional background material, and expanding upon the methods. Several recommendations centered on considering additional strategies that were not highlighted in this version of the best practices guide. Reviewers’ comments are summarized below.

- a. Suggestions to add brief definitions, clarifying information, make specific changes in wording, and fix typos.
- b. Several reviewers asked for a key or example template that would explain the format used in the strategy summaries, including definitions of rating categories.
- c. Some reviewers requested more detailed information about topics that are related to the content in the BPG draft.
- d. Some requested more information on implementation of strategies.
- e. Suggestions were made to consider additional strategies that are not currently included.
- f. There were several questions about the methods, limitations, and interpretations of the ratings.

CDC/ATSDR's Response to Reviewers' Comments:

- a. Suggestions to add brief definitions, clarifying information, make specific changes in wording, and fix typos were addressed in our revision of the document and will be further addressed through the clearance and copy editing process before the BPG is released.
- b. In response to requests for a key or example, we added a template that orients readers to what is presented in the strategy summaries.
- c. For each of the suggestions centered on adding more detailed information about tangential but related content, we considered the additional content that would be necessary to adequately discuss these topics. In some instances, we found that addressing additional topics was beyond the scope of our focus on the selected strategies within “Health Systems Interventions” (Domain

3) and “Clinical-Community Linkages” (Domain 4). In other cases, we added supporting information or references.

- d. Despite the necessity of information on implementation in translation efforts, we maintained that the current version of the BPG focuses on: (1) identifying strategies that can be considered best practices (within Domains 3 and 4); (2) providing summaries of the evidence supporting them; (3) providing top-level information on considerations for implementation; and (4) providing links to available resources to assist with the implementation process. We will continue to consider supplemental products to support implementation and replication of strategies.
- e. Suggestions made to consider additional strategies that are not currently included have been noted for future efforts or updates of the guide.
- f. To address questions about the methods, limitations, and interpretations of the ratings, we have added more information about the methods used, better defined the strategy summaries, and clarified the limitations of the methodology.

The ISI/HISA Dissemination Itself: Centers for Disease Control and Prevention. *Best Practices for Cardiovascular Disease Prevention Programs: A Guide to Effective Health Care System Interventions and Community Programs Linked to Clinical Services*. Atlanta, GA: Centers for Disease Control and Prevention, US Dept of Health and Human Services; 2017. Available at <https://www.cdc.gov/dhdsp/pubs/docs/Best-Practices-Guide-508.pdf>