



## **Legislative Priorities for 2007-2008**

### **Justus-Warren Heart Disease and Stroke Prevention Task Force**

#### Priority #1 – Stroke Advisory Council Recommendations

Achieve state funding for the recommendations developed by the Justus-Warren Heart Disease and Stroke Prevention Task Force's Stroke Advisory Council. NC is part of the stroke belt where historically stroke death rates are the highest in the nation. In fact, NC has the 5<sup>th</sup> highest age-adjusted stroke death rate in the country. The NC General Assembly passed legislation (SL2006-197) asking that the Task Force establish and maintain a Stroke Advisory Council to facilitate the formation of a statewide system of stroke care for NC. Towards that goal, preliminary recommendations were developed. They include:

- a. State-funded financial match to augment existing federal funds for the **NC Collaborative Stroke Registry** (a performance improvement tool) to increase NC hospital participation, particularly for hospitals in high stroke/ low resource areas/ regions of the state. The NC Collaborative Stroke Registry is currently competing for continuation of CDC funding. A state-funded financial match will reflect state support of the registry and strengthen the application.
- b. State funding to the Heart Disease and Stroke Prevention Branch of the Division of Public Health to contract with NC Area Health Education Centers (AHEC), in conjunction with the NC Collaborative Stroke Registry, to carry out professional workforce development, training, and communication objectives related to stroke.
- c. State funding to the Heart Disease and Stroke Prevention Branch of the Division of Public Health for the development and implementation of public awareness campaigns and communication strategies on stroke signs and symptoms and the importance of immediately calling 9-1-1.
- d. State funding to the Heart Disease and Stroke Prevention Branch of the Division of Public Health to conduct a follow-up survey and gap analysis. This analysis is designed to provide a current assessment of stroke prevention and treatment services in NC to assist in the development of a comprehensive stroke care system plan.

- e. State funding for continuing the work begun by the Stroke Advisory Council. Primary prevention of stroke, acute stroke care, rehabilitation, and long-term care issues need further attention and will be integrated into a comprehensive stroke care plan for the state.

Priority #2 – Statewide Health Promotion Program

Chronic diseases are among the greatest threats to the health and wellness of residents of this state, and heart disease and stroke are the two biggest killers in this disease classification. The Task Force heard presentations on the Statewide Health Promotion Program initiative and supports funding the program. This program supports placement of one full-time public health professional in each county to work on addressing some of the key risk factors that lead to cardiovascular disease.

Priority #3 – Ban on Smoking in State Government Buildings

Secondhand smoke is a major risk factor for heart disease. The Surgeon General's 2006 report on the health consequences of involuntary exposure to tobacco smoke concludes that exposure to secondhand smoke increases coronary heart disease deaths. Moreover, when people with heart disease are exposed to secondhand smoke, there is an acute risk of heart attack. The Task Force heard presentations on an initiative to ban smoking in all government buildings. As a leader in heart disease and stroke prevention for NC, the Task Force supports this secondhand smoke initiative and the concept that government can also lead its citizens by example.