# **WHY CARES MATTERS**



# THE CARDIAC ARREST REGISTRY TO ENHANCE SURVIVAL (CARES)

Each year, over 250,000 Americans experience sudden cardiac arrest outside the hospital. Survival depends on a rapid, coordinated response—from the first 911 call to EMS arrival and hospital care.

#### A NATIONAL QUALITY IMPROVEMENT PROGRAM



Founded in 2004 by the CDC and Emory University, CARES is the only U.S. registry that links data from 911 dispatch, EMS, and hospitals into a single record for every out-of-hospital cardiac arrest (OHCA).

- Covers 186 million people across 37 states and growing
- Includes data from 2,600+ EMS agencies and 2,200+ hospitals
- Over 1.3 million events tracked to date

CARES enables local, state, and national leaders to identify what's working—and where targeted improvements can save more lives.

## WHAT'S AT STAKE?

Every second counts—and every link in the chain of survival matters.

#### **CARES strengthens each step:**





Advanced EMS Care



Early CPR



Post-Cardiac Arrest Care





Recovery

CARES helps communities measure, improve care, and save lives.

# DRIVING CHANGE AT EVERY LEVEL

What makes CARES different is its direct connection to action. The data isn't just collected—it's used.

- State and local partners identify neighborhoods where CPR rates are low and provide targeted training
- First responder systems use CARES to improve dispatch-assisted CPR and early defibrillation
- Hospitals use CARES data to enhance postresuscitation care and track outcomes
- **Researchers** use CARES to study trends, system performance, and long-term outcomes
- Partners like the American Heart <u>Association</u> and <u>American Red Cross</u> rely on CARES to shape national campaigns and advocacy efforts

# REAL PROGRESS, REAL IMPACT

CARES is driving measurable improvement nationally.

- Chicago, IL launched a collaborative effort in 2011 combining prehospital and 911 dispatcher interventions, community engagement, and data-driven mapping. Bystander CPR rates increased from 15.5% in 2014 to 54.2% by 2024.
- **Detroit, MI** used CARES data to rebuild its EMS system after bankruptcy. Survival tripled, and bystander CPR increased from 13% to 36%.
- **Hawaii** used CARES insights to scale high-performance CPR across the state, training everyone from lifeguards to hospital teams.
- Montana became the first state with automated statewide reporting, using CARES to drive AED access, CPR training, and 911 improvements in rural areas.
- North Carolina launched the RACE-CARS trial, using CARES data to guide one of the largest randomized cardiac arrest system interventions in the U.S.

### LOOKING AHEAD: CARES 2.0

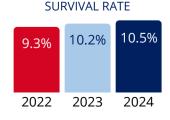
Fueled by a \$24 million CDC grant made possible by the **CAROL Act**, CARES is entering a new era of national impact:

- Expansion to all 50 states
- A modernized, user-friendly software platform
- Interactive maps to guide local intervention
- Deeper integration with **CPR LifeLinks** and other national response efforts

# **CPR RATES** 41.7% 41.2% 40.0% 2024

2023

NATIONAL BYSTANDER



NATIONAL OVERALL



2022