

Huron Clinic Maintains Impressive Blood Pressure Control Rates Through 1815 Year 3

Summary

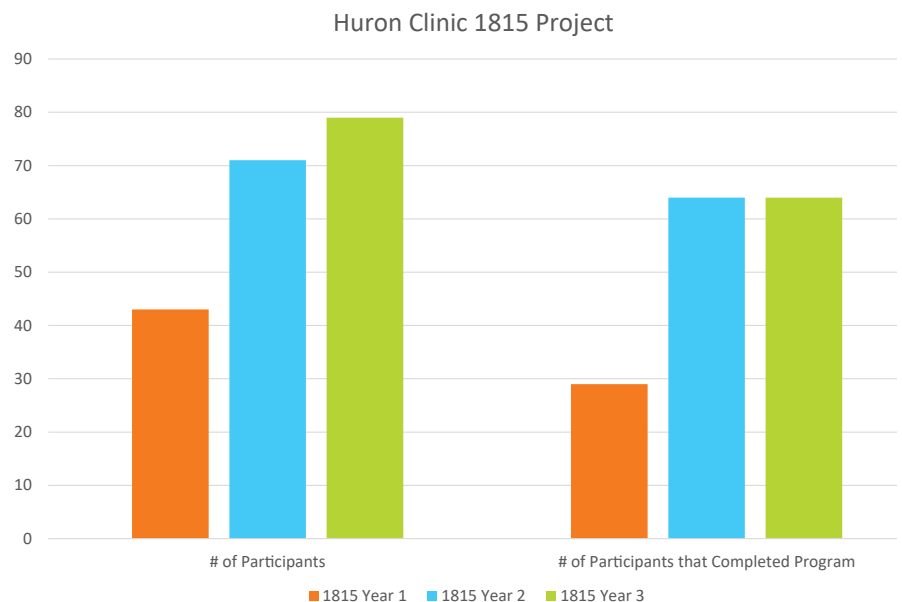
Since February 2019, Huron Clinic has been working with the South Dakota Department of Health (SD DOH) Heart Disease and Stroke Prevention Program (HDSPP) to address increased prevalence of hypertension through a self-measured blood pressure (SMBP) monitoring program. SMBP participants are identified either by having an elevated blood pressure (>140/90 mm Hg) in the clinic or having elevated readings or a hypertension diagnosis noted within their medical record. Once participants enroll, they are sent home with a blood pressure cuff to check their readings twice a day for two weeks. After the two weeks, they work with their healthcare team to determine the next steps. If their blood pressure remains elevated at home, the participant will continue to check their blood pressure while implementing prescribed changes to their medication regimen or additional recommended lifestyle changes. This will continue until the participant reaches blood pressure control. If the readings are within the normal range, however, the participant is considered to have white coat hypertension (when an individual has an elevated blood pressure in the clinic setting but is otherwise within normal range). For these individuals, additional treatment is not necessary. Ruling out white coat hypertension before prescribing medication changes reduces the risk of over-prescribing to individuals not needing treatment, which could be dangerous and detrimental to their health.

Results

During 1815 Year 1 (February 2019 - June 2019), Huron clinic enrolled 43 individuals in SMBP. Of those, 29 completed the program. Twenty-three individuals were considered to have controlled blood pressure, meaning ongoing readings below 140/90 mm Hg, and six required medication changes to get their blood pressure under control.

During 1815 Year 2 (July 2019 - June 2020), 71 individuals enrolled, with 64 completing the SMBP program. Thirty-eight were considered controlled, and 37 required medication adjustments.

During 1815 Year 3 (July 2020 - June 2021), 64 out of 79 participants completed the program. Of those, 40 had controlled blood pressure readings, and 25 needed changes to their prescribed medication regimen.



*discrepancies in SMBP completion due to participant drop-out and cross-over between project periods

Key Components

SMBP provides an excellent opportunity to closely monitor patients with hypertension and adjust medication dosing to find the best and most appropriate treatment plan. This also gives providers a better understanding of their patient's day-to-day blood pressure levels and allows them to closely work together to set realistic blood pressure goals.

Successes

The goal of an SMBP program is to facilitate better blood pressure control for patients with hypertension. One way the clinic is able to measure success is through the performance measure, NQF 18, which measures the number of patients diagnosed with hypertension who have a blood pressure under 140/90 mm Hg. National 2019 data reports an average of 47.6%-62.1%* control across commercial and Medicare HMOs (health maintenance organization) and PPOs (preferred provider organization). When Huron and HDSPP initially partnered on this work, the clinic had an NQF 18 rate of 67%, already above the national average but still below the Million Hearts goal of 80%. Through their work with HDSPP, Huron Clinic has been able to maintain a consistent NQF 18 rate over 80%. As of July 2021, their rate was 85%.

Data found at <https://www.ncqa.org/hedis/measures/controlling-high-blood-pressure/>

Evidence-Based Interventions

Huron Clinic implemented the following evidence-based intervention: Facilitate the use of self-measured blood pressure monitoring with clinical support among adults with hypertension.

System Changes

The first step for SMBP program implementation was to thoroughly review clinic performance measure data to ensure the team was starting with accurate and reliable information. This led to several changes in the workflow and documentation process. Huron Clinic continues to work closely with the SD DOH team and their electronic medical record (EMR) vendor to implement ongoing adaptations to accommodate changes in staffing, additional and enhanced programming, and any barriers that present along the way.

Next Steps

Through CDC's 1815 cooperative agreement, Huron Clinic will receive continued funding from the HDSPP to support SMBP in 2021-2022. The clinic plans to expand programming to additional patients during Year 4.

Get Involved

For additional information on this project or to learn more about HDSPP funding opportunities, contact Rachel Sehr, Heart Disease and Stroke Prevention Coordinator at Rachel.Sehr@state.sd.us or 605-367-5356.

Contact:

Rachel Sehr,

Heart Disease and Stroke Prevention Coordinator

Rachel.Sehr@state.sd.us or 605-367-5356

