



Self Measured Blood Pressure (SMBP) Pilot Program Experience and Learnings

AGENDA

1. Staging Process – Planning & Pilot
2. Project Goal
3. Target Population & Selection Criteria
4. Implementation Details
5. Results
6. Tools / Key Learnings
7. Next Steps

Planning Stage

- **Multidisciplinary Collaboration**
- **Leadership Buy-in**
- **Project Team Meetings**
- **Project Monitoring Check-Ins**
- **Utilized Funder Resources**
- **Data Analysis to Identify Target Population, Pilot Site & Providers**
- **Prepared Program Materials**
- **Trained Staff**
- **Educated Providers**
- **Purchased Cuffs**
- **Created Scheduling Template**
- **Wrote Telephone Call Script**

Pilot Stage

- **Called & Scheduled Patients**
- **Implement 5-Visit Schedule**
 - Initial Visit
 - One Week Follow Up
 - One Month Follow Up
 - Two Month Follow Up
 - Six Month Follow Up
- **Managing BP Cuffs**
- **Downloaded BP Readings**
- **Scanned BP Readings to EHR**
- **Briefed Providers**
- **Engaged Patients in Ongoing Self Management**

Program Goal

- **To improve Blood Pressure Control for High Risk Patients**
 - 40-64y with Hypertension and last BP reading of ≥ 160 systolic AND ≥ 90 diastolic within last 12 months
- **To reduce Harm and High Risk for Heart Attack and/or Stroke**
 - Lowering BP, not necessarily to a normal range
- **To improve Patient Activation**
 - Engaging them with their health and self care for the long run
- **To utilize Team Based Care Approach**
 - Involving the Patient, Provider, Medical Assistant, Nurse and trained Health Coaches along with support staff from Operations & QI

Data Findings

Item	#	%
Number of Patients Eligible at Target Site	35	100%
Number of Patients Called	35	100%
Number of Patients Successfully Scheduled	9	26%
Number of Patients Kept Appointments	9/9	100%
Number of Patients with Improved Medication List after Reconciliation	4/9	45%
Number of Patients with BP Readings Improved after SMBP	8/9	89%
Number of Patients with BP Readings at or below control (140/90mmHg)	2/9	22%

Key Learnings

- Multi-disciplinary approaches require frequent communication
- Significant risk reduction can be achieved in a concerted population by actively pursuing individual cases
- SMBP is a useful tool for Patient Engagement and Patient Activation
- A half hour is not enough time.
- SMBP encounters bring value and quality to patient care by adding supplemental services like Health Coaching and Medication Reconciliation
- Once patients are enrolled, they are engaged and actively involved (e.g. keeping scheduled appointments with RN)

Next Steps

- Design a patient feedback item (e.g. satisfaction survey, pre/post survey, etc.)
- See through the 5 Visit Schedule (i.e. the first 6 month visits will occur in May) and gauge their overall progress
- Expansion of SMBP Project to an additional site by April 2019
- Share out data with Providers by Summer 2019 to gradually expand services to all sites over the course of the year
- Train more Nurses to carry out SMBP encounters and to complete Medication Reconciliation Process

Questions?

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