



# COMMUNITY HEALTH CENTER NETWORK

## Preventing Heart Attacks and Strokes

Getting **BP Control** under control as we approach the light at the end of the COVID-19 pandemic tunnel

Community Health Center Network

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# Our Desired Future for PHASE



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- CHCN PHASE populations reach 2019 HEDIS 90<sup>th</sup> percentile blood pressure control (71%) rates by December 31, 2022 while continuing to reduce the racial/ethnic disparities in outcomes.
- How?
  - Bringing patients back into care
  - Strengthen Self Monitored Blood Pressure (SMBP) and telehealth
  - Provide data and support for equity interventions.

# Why It's Not Possible Now



# Why It's Not Possible Now

We were unable to reach this goal in 2020 due to multiple factors brought on by the pandemic:

- Patients not coming in for in-person visits
- Extremely strained staff resources
- Social/psychological factors contributing to poorer outcomes in patient population.
- Lack of resources to roll out a robust SMBP program
- Supply chain issues with home blood pressure cuffs

# What We Learned that will Help Us Moving Forward



*KEEP  
GOING* →

## Bright Spots/Accomplishments

- Clinic resilience and creativity
  - Telehealth
  - Outdoor services
  - Food Farmacy
  - Integrated Tobacco Referrals
  - BP cuffs direct from Plan

## Activities We will Keep Doing Based on Learnings

- Efficient workflow and EHR build support
- QI training and tools
- Provide actionable data and reports
- Equity focus for clinical quality measures

# What Else is Possible?



- Vaccinations as opportunity—entry point back into care
- Find the right balance of telehealth and bringing patients in for visits
- Dramatically expand SMBP and other remote monitoring
- Enhance Care Coordination and partnerships to address social determinants

# Benefits of Achieving Desired Future

- Better patient outcomes—healthier community!
- Health center staff receive needed support
- Patient engagement increases by responding to their identified needs
- We can address disparities with targeted interventions





# Challenges if We Don't Move Forward with Solution

- Uncontrolled hypertension leads to increased morbidity and mortality.
- Telehealth and remote monitoring are here to stay—if we don't embrace these new modalities, our patients will suffer/find care elsewhere
- Without the support CHCN can provide, clinic activities will be less robust and data driven



# What We Need from Our Leaders to Make it Happen

- Support for Population Health and QI Analyst as a continued staff position
- Engagement of Executive and Clinical Leadership in QI activities
- Support and Resources for Innovative Community Partnerships





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## THANK YOU FOR YOUR TIME!

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