



Alexander Valley Healthcare Hypertension Blood Pressure Control

Redwood Community Health Coalition
Promising Practice

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PROMISING PRACTICE OVERVIEW

Alexander Valley Healthcare (AVH) increased their hypertension blood pressure control rate from 70.4% in 2016 to 80.8% in 2017. In 2017, AVH engaged their care teams in trainings and competency checks for manual blood pressure measurements. They secured provider buy-in by reviewing, discussing and adopting the RCHC's clinical guidelines. AVH implemented a policy where they do not refill anti-hypertensive medications unless a patient has been seen within six months. AVH's care teams work to establish relationships with patients with elevated BPs by providing education about home BP monitoring, recommending home BP cuffs and reviewing results with their patients.

AIM

To improve blood pressure control among patients with hypertension.

MEASURES

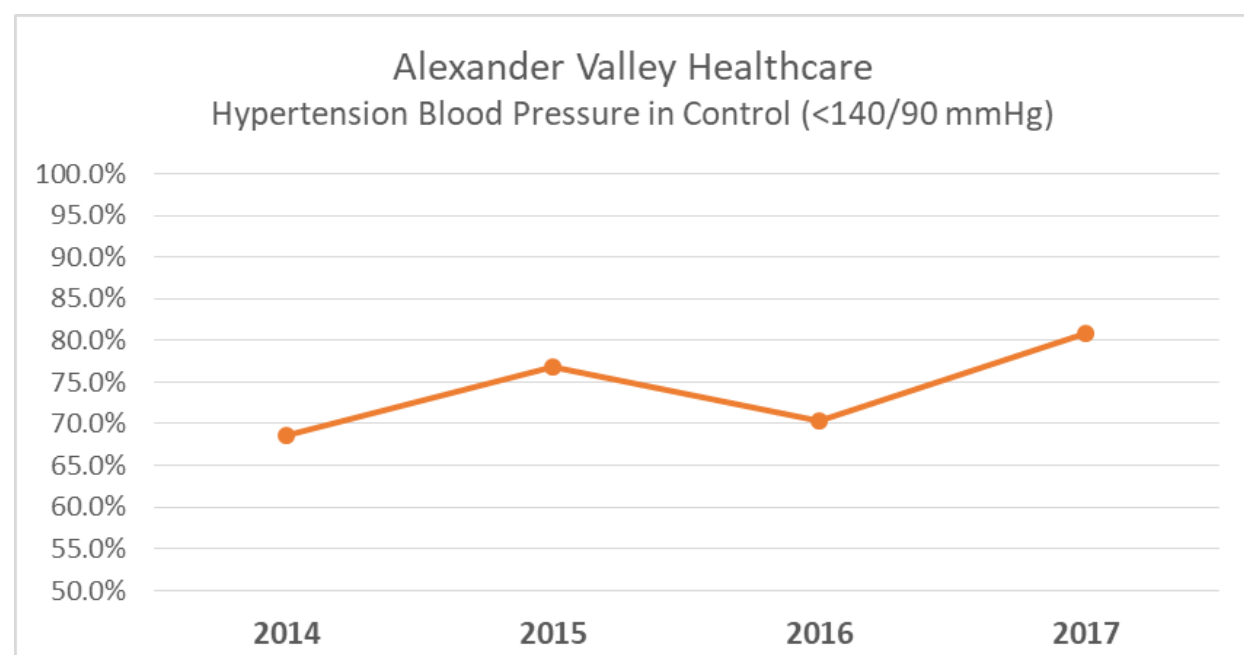
UDS Hypertension Blood Pressure Control

Denominator:

- ✓ Between 18 and 85 years at the end of the reporting period.
- ✓ Was diagnosed with essential hypertension any time before June 30 (if reporting period is calendar year, or if not, 6 months prior to end of reporting period).
- ✓ Had at least one medical visit during reporting period.
- ✓ Exclusions: pregnant during reporting period or with end state renal disease (ESRD), dialysis, or renal transplant before the end of the reporting period.

Numerator:

- ✓ Patients with at least one blood pressure performed within the past year and the latest result had a value less than 140/90 mmHg.



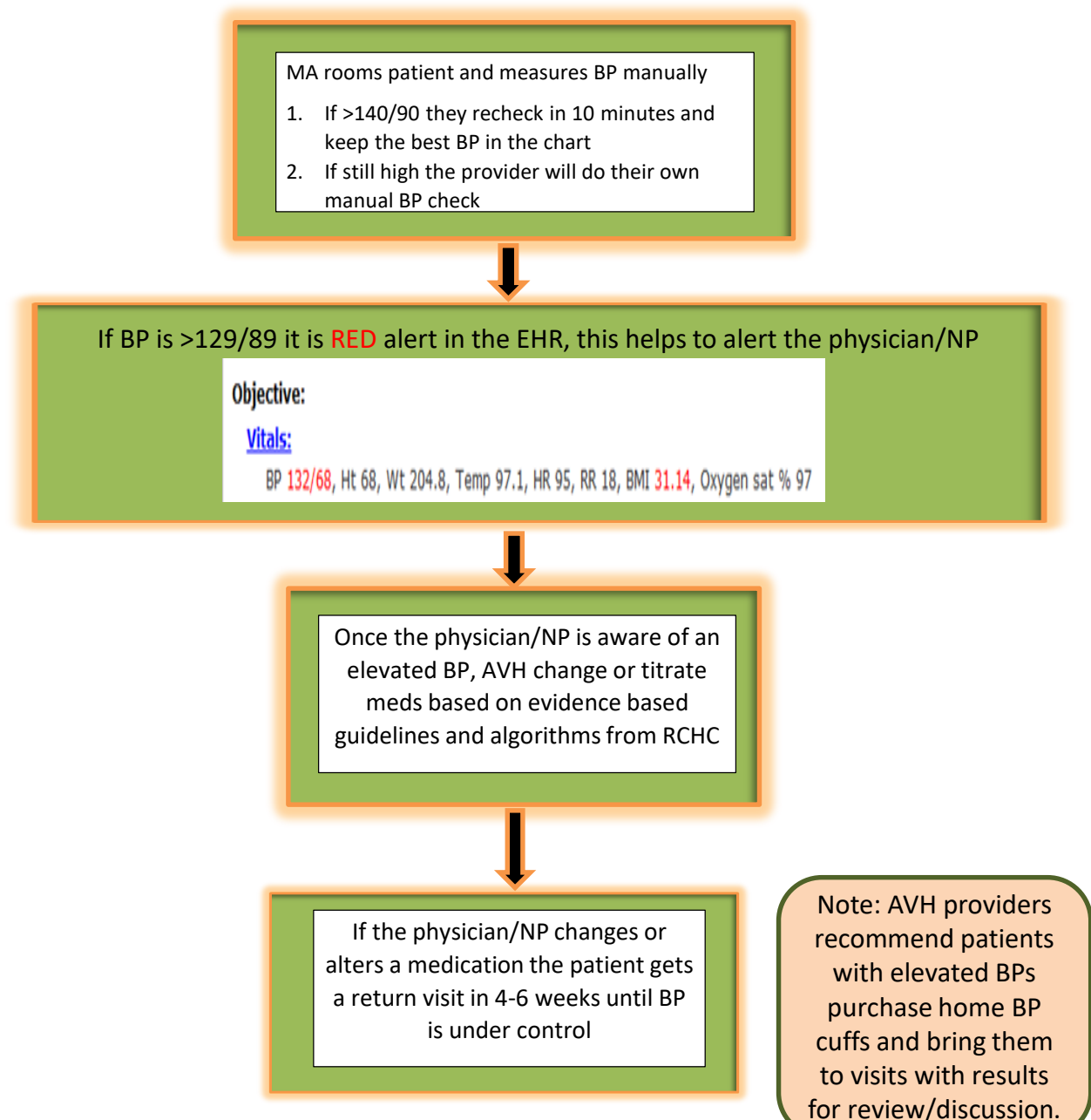
RESULTS TO DATE

AVH continues to increase their BP control rates and are currently at 87% for HTN BP control (7/2018).

ACTIONS TAKEN

- AVH only conducts manual BP checks – more accurate than machines (AVH does not own any automated BP machines).
- Conduct trainings and competency tests on how to properly measure a patient's BP.
- Turned on BP elevated RED alert in the EHR for providers.
- AVH full time staff includes three physicians and one NP. AVH providers agree to follow RCHC's evidence-based guideline for HTN management and all providers are on the same page about meds, dosing, follow up and protocols. Being a smaller site helps because AVH providers can communicate easily with each other.
- AVH care teams will not refill BP medication if has not been seen in the health center within six months.
- Patients are educated on how to measure their BP at home and record it for review during their office visit.
- AVH's patient education resource is available through EHR (Healthwise).

WORKFLOW



LESSONS LEARNED

1. Manual BP checks are more accurate.
2. Being a small health center with four providers all ~5 years out of medical school makes it easier to provide consistent, standardized care.
3. Red alert in the EHR for elevated BPs makes it visible and hard to miss.
4. Requiring patients to come into the health center for BP check if their last BP was elevated in order to refill medications has been a successful strategy.