

The BPQI package

Early findings from the Cheshire and Merseyside Quality Improvement Support Package for High Blood Pressure

A collaborative project presented by:

Dr Mel Roche (Public Health Consultant, Champs Support Team BP Lead)

melanieroche@wirral.gov.uk

Pippa Rose (GPFV Transformation Programme Nursing Lead, NHSE C&M)

Pippa.rose@nhs.net

BPQI: What we'll cover

- Local and national context
- Development journey
- The BPQI package
- Early findings
- Summary and next steps



Local and national context

Cheshire and Merseyside

- Champs Public Health Collaborative
- C&M BP Partnership Board (2015)
- C&M BP Strategy (2016)

'Saving lives: Reducing the pressure'



- C&M Health and Care Partnership (STP)

National

- Size of the Prize
- CVD System Leadership Forum (CVD SLF)
- CVD PREVENT audit
- NHS Long Term Plan
- National Ambitions

Development journey (2016 to 2018)

- Insight work; NICE
- Primary care workshop
- British Heart Foundation Clinical Development Coordinator
- Sefton CCG GP practice, IT Merseyside, Wirral CCG/PH, Liverpool CCG
- Early adopting practices
- Funding: HEE LWAB bid, NHSE (C&M) bid, HCP

NICE
National Institute for
Health and Care Excellence



South Sefton Clinical Commissioning Group
Southport and Formby Clinical Commissioning Group



Health Education England



Workir
wellbe

Cheshire & Merseyside
Health & Care Partnership



BPQI Package

General points:

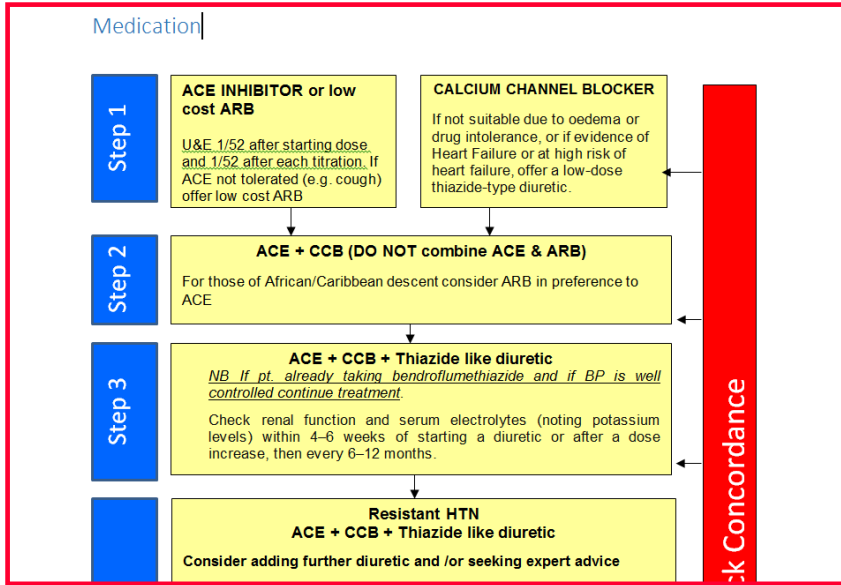
- Nursing focused
- EMIS-Embedded
- Supportive
- Training sessions

4 Key Components:

1. **Dashboard/ audit tool** (aligned to NICE)
2. **Consultation templates** (new & existing patients)
3. **'Gold standard' practice protocol**
4. **Printable patient information prescription**

3. Practice protocol

4. Patient information prescription



Name: _____

HIGH BLOOD PRESSURE INFORMATION PRESCRIPTION

High blood pressure -sometimes called hypertension, is not usually something that you can feel or notice. Having high blood pressure puts extra pressure on the walls of your arteries, over time this can cause damage, - meaning that they are more likely to get clogged up. So, having high blood pressure means you're much more likely to have a heart attack or stroke. High blood pressure can also cause your heart to get bigger (enlarged) which means it can't pump as well as it should, -it can also damage your kidneys too - and so it really is important that we reduce it.

The good news is there are lots of things you can do to help lower your blood pressure.

Your Blood Pressure reading is
 Your target Blood Pressure is

Lifestyle	Medication
<p>There are some simple things you can do to help lower your blood pressure</p> <ul style="list-style-type: none"> • Eat a diet with plenty of fruit and veg and low in saturated fat. If you are overweight losing 5 - 10 % of body weight can help lower blood pressure (example going from 15st to 13.5st). • Reduce your salt intake. Eat less fast food; do not add extra salt, try adding in a variety of herbs and spices instead. • Drink less alcohol. Current guidelines suggest 1-4 units per week for both men and women. • Be active for at least 30 minutes a day. This activity should make you feel warmer, breathe harder and make your heart beat faster than usual. • If you are a smoker you need to stop smoking. For help giving up ask for your local stop smoking service. 	<p>It is important to take your blood pressure as prescribed. Let your doctor or nurse know if you are not taking your medication or if you are thinking about stopping it. They may be able to talk through some of your concerns or prescribe you a different medication that suits you better.</p> <p>When you are taking medicine to lower your blood pressure, you still need to make every effort to maintain a healthy lifestyle to protect your heart. Your medicines are not replacement for healthier lifestyle changes.</p> <p>Most people need to take more than one type of medicine to lower their blood pressure, and research suggests that taking two or more medicines often has a much better effect than taking just one.</p> <p>From time to time it is easy to forget to take a tablet particularly when you have no symptoms. Luckily, making the odd tablet does not usually affect your blood pressure. So, if you forget to take your medicine, there's no need to take an extra one. Just take your normal dose next time.</p>

ACTION PLAN

If you need to make a lot of lifestyle changes it can often be overwhelming to think about tackling everything at once. Often it is best to pick a priority area and do that one change well. Have a chat with your Dr or nurse they may help you decide which one to tackle first.

My personal priority is

For more help and advice please visit the British Heart Foundation website www.bhf.org.uk



Early findings from 3 early adopting practices (2018)

Effective

- Performance against NICE hypertension Quality Statements & Standards measured @ 3m
- Improvements across all headline/ consolidation indicators (**4 to 15%**)
- Spans diagnosis, investigations, management, control

Popular & acceptable

Health Care Assistant: *“The template.. transformed the way we run our consultations... increased our confidence ... prompts and targets [are] really helpful”*

Health Care Practitioner: *“Keeps me on track and reassures me I am doing everything I should ...”*

Practice Nurse: *“the template has assisted patients in taking ownership of the blood pressure, whilst providing structure..”*

GP (re dashboard): *“It really is a fantastic tool, and I fully support its potential rolling out.....”*

Some key learning points

- Development unearthed **areas of uncertainty** and **variable practice**
 - BPQI package helps to address most of these
1. Coding/recording of stage 1 hypertension
 2. QoF V NICE targets
 3. Equipment
 4. Diagnosis
 5. Assessment for target organ damage
 6. Under 40's
 7. Methodology used for recall appointments
 8. Content of annual review of high BP



BPQI: Summary

- Supportive quality improvement tool, nursing focus
- Key elements: dashboard, consultation templates, protocol, patient information
- Aims: Improve BP detection/ management, reduce unwarranted variation
- Meets local/national QI need
- Development: Cross sector collaboration, clinical input central at every stage
- Practice level - effective & popular
- Scope to extend approach to other CVD risk factors/ LTCs
- Next steps in C&M: Scale up adoption (with NHSE C&M), stakeholder engagement, NICE endorsement process, embed into nursing workforce development, CVDPREVENT



Cheshire & Merseyside
Health & Care Partnership



Acknowledgments and further information

Acknowledgements

British Heart Foundation C&M team
Champs PH collaborative
C&M General Practice Nursing Collaborative
C&M Health and Care Partnership
Health Education England (North)
C&M High Blood Pressure Partnership Board
Hitch Marketing Ltd
IT Merseyside
Liverpool CCG
NHSE (C&M)
NHS RightCare
NICE (North) Insight, Quality and Field teams
North West Coast Academic Health Science Network
PRC Consultancy
Public Health England (NW)
Sefton CCGs and Blundell Sands practice
C&M Strategic Clinical Network
Wirral PH, CCG Beacon practice initiative

Cheshire and Merseyside High Blood Pressure Annual Report 2018

<http://www.champspublichealth.com/saving-lives-reducing-pressure-annual-report-2018>

Thank you

