Association of Public Health Nurses November 6, 2017

## A Wisconsin Community-Clinical Linkage Hypertension Prevention Strategy

Parish and Public Health Nurses Address Hypertension From a Population and Community Perspective





## **Presentation Panelists**



2017 APHN National Conference | San Diego, California

**Rebecca R. Thompson,** CPA, CFRE, MPH Executive Director Wisconsin Community Health Fund, Inc. Jen Cooper, DNP, RN, PHNA-BC Association of Public Health Nurses **Rebecca Cohen,** MS, MT-BC Health Systems Coordinator Chronic Disease Prevention Program Wisconsin Department of Health Services

**RoAnn Warden,** RN, BSN Director Green County Health Department Kris Wisnefske, MSN, RN Parish Nurse Coordinator Monroe Clinic Our Speakers Have No Relevant Financial Interest. Thank You!



As a result of attending this learning activity/webinar, the learner will have increased

- 1. Knowledge of how community-clinical linkages were built between the public health department, a health system, a community clinic and through a community coalition in Green County Wisconsin (a rural learning site)
- 2. Knowledge about health extenders (parish and public health nurses, community health workers) in community-clinical settings using bidirectional approaches to improve hypertension outcomes
- 3. Knowledge of how electronic medical records (EMR) / Health Information Technology (HIT) may be used as important tools for communication and the identification of undiagnosed/uncontrolled hypertension within a community health improvement system
- 4. An introduction to how a public health department and other community partners may serve as a Chief Health Strategist in helping to coordinate and lead health improvement through the engagement of multi-sector partners
- 5. Knowledge of community-clinical linkage activities helping to advance Community Health Improvement Plan goals

## **Key Components of Million Hearts**<sup>®</sup>

Health

**Keeping Us Healthy** Changing the environment

**Excelling in the ABCS** Disparities **Optimizing care** 







Focus on the **ABCS** 



Health information technology

Innovations in care delivery







### **Million** Hearts<sup>®</sup> Million Hearts<sup>®</sup> 2022 Goals

#### **Keeping People Healthy**

**Reduce Sodium Intake** 

Decrease Tobacco Use

Mitigate Particulate Exposure

**Increase Physical Activity** 

**Optimizing Care** 

Aspirin When Appropriate

Blood Pressure Control

**Cholesterol Management** 

**Smoking Cessation** 

Improving Outcomes for Priority Populations

Blacks/African-Americans

45-64 year olds

People who have had a

heart attack or stroke

People with behavioral

health issues

Others

### WISCONSIN HEART HEALTH FACTS



Approximately 1.3 million adults in WI have hypertension and less than half of them are in control.



Coronary heart disease is the no. 1 killer of women age 25 and over in WI.



Of those who are uncontrolled, 40% are unaware that they even have hypertension.



CVD is the leading cause of death and disability in Wisconsin.

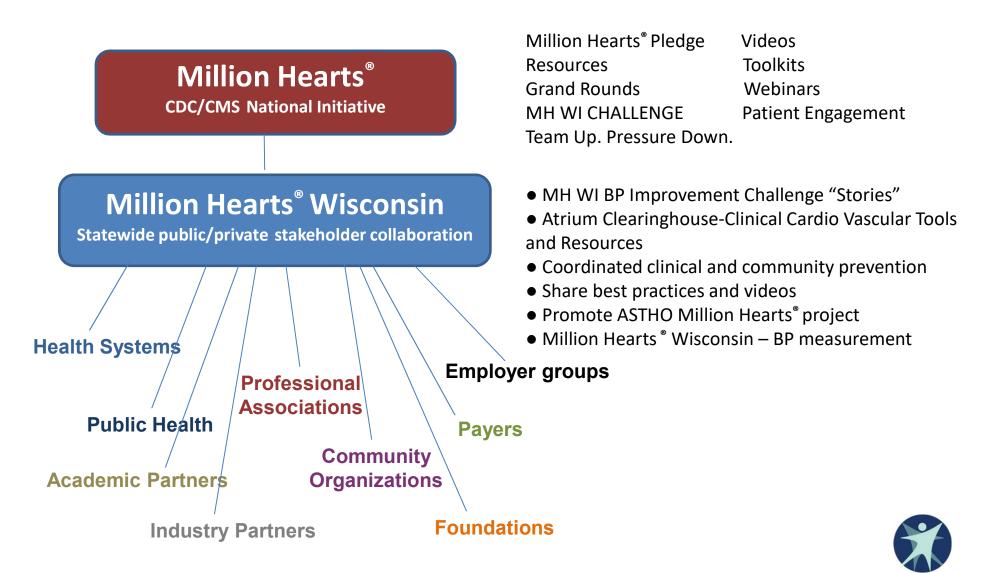


1 out of every 3 adults in WI dies from a heart attack or a stroke.



If over 45 years of age, 36% of men and 47% of women will die within 5 years after their first heart attack.

## What is Million Hearts<sup>®</sup> Wisconsin?



## ASTHO Million Hearts® Learning Collaborative

State Project Objectives

Map of 22 Learning Collaborative States, Territories, and Freely Associated States



- Creating and standardizing protocols
- Leveraging data systems
  - Using team based care models
- Decreasing hypertension



### Wisconsin State ASTHO Team Million Hearts<sup>®</sup> Learning Collaborative







there's an art to it.



Green County – 1 of 3 Wisconsin Teams – Rural Example – Test Rapid Heart Health Improvement Strategies

## Green County – Bridges to Health

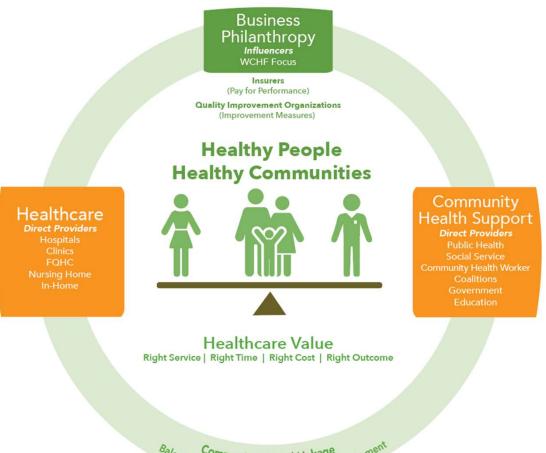
Public Health, Community Clinic, Monroe Clinic Parish Nurse, Monroe Clinic







## WCHF Community Health Value Exchange

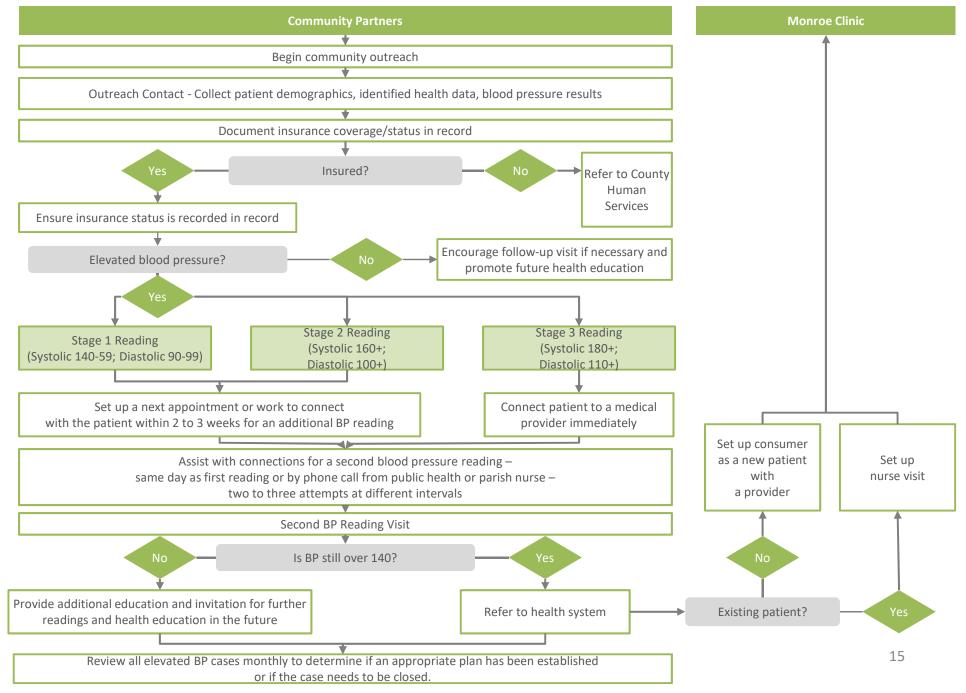




### WCHF Resource Bridge – Project Coordinator



#### Green County Hypertension Community Care Protocol Flow Chart [Updated 6.3.16]





Our Mission Statement: To be a reliable resource that educates, serves, and leads the people of Green County to optimal health and well-being.

### STAFF



### SERVICES

- Communicable Disease
- Immunizations
- Chronic Disease Screenings
- Maternal Child Health
- WIC/PNCC/SafeKids/HV
- Emergency Preparedness
- CHIP / CHA
- Personal Care Services



### **Community Blood Pressure Screenings**



- Personal Care Agencies (Staff)
- Dementia Summit (Family Caregivers)
- Health & Human Service Employees
- Senior Fun Fest (Seniors)
- YMCA (Younger Adults)
- Walk In's
- Churches
- Schools
- Community Clinic
- Wal-Mart Parking Lot Event



## SWCAP Neighborhood Health Partners





From Public Health and Community Clinic

- Renewed value and importance of BP screening in public health
- Public health involvement critical in the development of community care protocols
- Clear need for annual BP measurement training and equipment calibration
- BP screenings = opportunity for enhanced healthy lifestyle education and connection to other community health supports
- Income and insurance status did not impact screening results or level of interest
- Resources are needed to address the barriers to obtaining health care
- Motivational interviewing training and practice = very helpful
- Communication between community and hospital partners = challenging when not coordinated





### **Public Health Leading Community Health Protocols**

Transition to Chief Health Strategist

Community Chief Health Strategist (NACCHO)

- Address the growing gap between the expansion of healthcare services and the achievement of health among individuals and communities
- Underscore the need for new and sustained leadership at the community level
- Bring community stakeholders together to prioritize the needs of the community
- Share their experience in providing essential services and leadership, engage communities to identify and support policy solutions, and collect, analyze, and share data
- Leverage resources to build integrated systems to achieve health equity

Public Health Accreditation / Readiness



Public Health

## Domain 3: Inform and educate about public health issues and functions

Provide information to coalition, community partners, clinics about proper BP measurement-staff training, LHD role Embedded into more of our programs and increasing community outreach

## Domain 4: Engage with the community to identify and address health problems

Staff re-prioritization on BP screening Community Partnerships-Coalition Blood pressure screenings and education at the community level finding the "hidden in plain sight"

#### **Domain 7: Promote strategies to improve access**

#### to care

Partner with Monroe Clinic for bi-directional referrals and other medical providers-

Establishing additional formal/informal partnership-Pharmacies and Dental Offices.







## Parish Nursing/Faith Community Nursing

- Professional Practice of Nursing with Scope and Standards defined by the American Nurses Association and Health Ministries Association
- Must be a Registered Nurse with a current active license in the state(s) of practice.
- Focus of practice is whole person health: mind, body and spirit.
- 30 year Anniversary 2017: Westberg Institute
- Certification is now available through ANA







### **Education Curriculum Development**

- Development of education program for practice was essential — Basic Education for Parish Nursing
- Rosemarie Matheus: Marquette University
- Ann Solari Twadell: IPNRC Loyola

### **Current Curriculum**

• The Foundations of Faith Community Nursing curriculum is an intensive course built to equip those wishing to either become a faith community nurse in their faith community or to strengthen the ministry in which they are already involved

https://westberginstitute.org/foundations-of-faith-community-nursing/

OUNDATIONS





## Parish Nursing Monroe Clinic

- Began in 1997 Celebrating 20 years
- Unpaid Model vs. Paid Model
- Parish Nurses/FCN's have worked in own congregation as well as whole community
- Multiple roles including Health Advocate and Health Educator
- Currently 16 FCN's or RN's interested in Health Ministry – partnering with Monroe Clinic Parish Nurse Coordinator

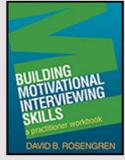




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### **Project Connection with Parish Nurses**

- Blood Pressure Competency Training with MC Cardiology Staff and Green County Public Health
- Motivational Interviewing Education
- Webinars and Phone conferences



- Conducted 5 BP screenings at congregations in Monroe, 1 in Dec
   2015 and 4 in Jan & Feb, 2016 total screenings = 67; 4 Clients referred, 2 refused
- BP screening done in Brodhead in April 2016 with Wellness Expo,
  7 screened, 0 referred
- Also conducted screenings in Albany in beginning of June total number 6 with a total number screened at 81





## Challenges

- Number of available Faith Community Nurses to do the screenings – Sunday is often the day they are at their own congregations
- Congregational & Community Environment Lack of privacy
- Health Literacy Limited time & space for education
- "BP Shopper"







## **Moving Forward**

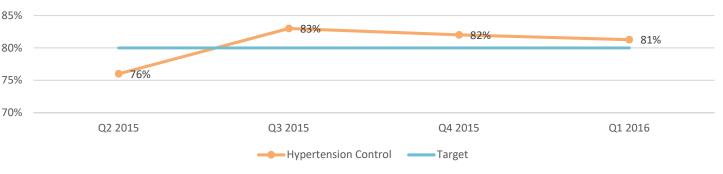
- Continue to identify screening opportunities throughout the county
- Continued follow up as needed using EPIC reporting EPIC accessibility by PNC
- Further identification of community and state partners for example Wisconsin Women's Health Foundation Grapevine Program
- Annual BP education training and competency



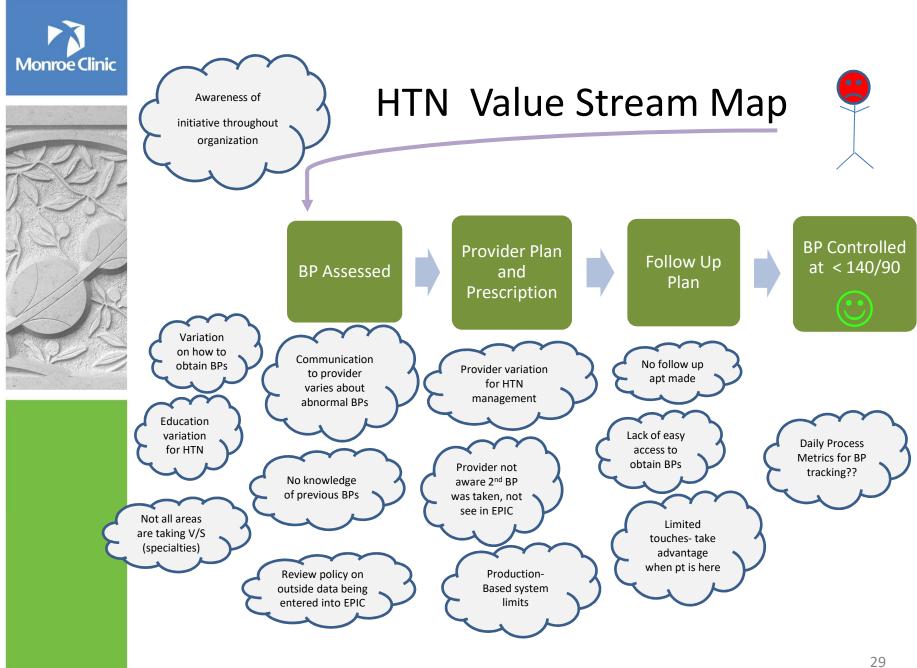
Annual equipment recalibration for accuracy through Monroe
 Clinic



## Hypertension Control – Why Important for a Health System



- Based on this project, the local health system selected hypertension control as one of its top 10 quality priorities for measurement
- Current results in top 75<sup>th</sup> percentile of State organizations and in the top tier of national goals, but always strives for improvement!
- Prevalence Indicator Tool Identified hospital system was on track for detecting hypertension







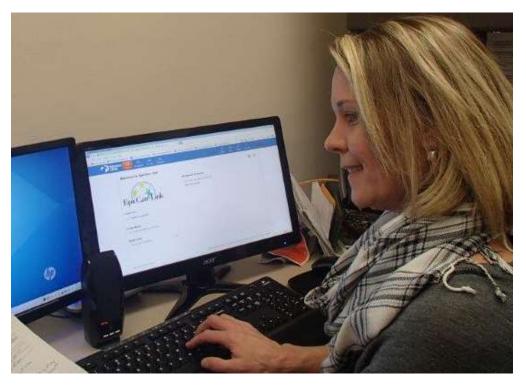
## Execution Strategy – Thundercloud Prioritization

- Data analysis revealed there was a lot of rounding in measurement (i.e. BPs at exactly 140/80...)
- Initial focus on basics making sure equipment is calibrated and staff are competent in measuring BP – RN developed Hypertension Education Competency Program– led by a physician champion
- Central Triage RN identified as contact point for community-clinical linkage provided follow up and personal connection to medical care and necessary financial support
- All Vitals Program implementation of BP measurement throughout all specialty care (was not consistent in the past)
- Hiding in Plain Sight exploring utilization of electronic health record system for undiagnosed hypertension
- Continued promotion of heart health education throughout the hospital system



### First Public Health Department with access to EPIC

(Electronic Community-Clinical Linkage System – opportunities for expanded electronic data systems within pharmacies)

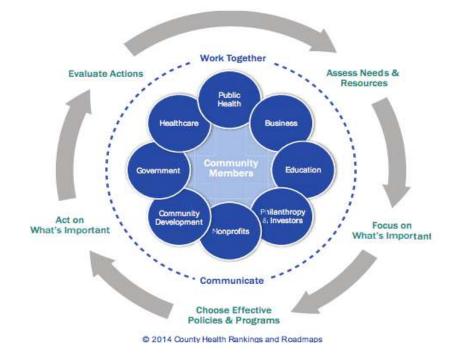




## Green County Healthy Community Coalition

Population Health Improvement Opportunities

- Creation of a website for community health care protocols
- Green County Hypertension Community Care Agreement drawing a variety of multi-sector partners
- Coalition = link to the area's Community Health Improvement Plan





## Hypertension Community Care Partners

Prospective Partner	Blood Pressure Measurement Capacity Or Community Health Promotion	Prospective Partner Action: What can they do?
Public Health		
Health System		
Community Health Center – Free Clinic		
Community Health Care Coordinators – Health Care Extenders – Health Care Workers		
Parish Nurse – Faith Community		
School or University Nurses		
Pharmacy		
Dentists		
Chiropractors		
Coalitions		
Emergency Medical Services		
Chamber of Commerce/Business Coalitions		
Community Action Programs		
Community Foundations		
United Way		



## Hypertension Community Care Agreement

#### Hypertension Community Care Agreement (Green County, Wi, Example)

The Green County Wisconsin Hypertension Improvement Team welcomes your involvement to strengthen our opportunity for healthy hearts. This Hypertension Community Care Agreement acknowledges your organization's commitment to assist with the development of community-clinical linkage systems and strengthened community health education. We are grateful for your participation and support as we strive to improve health outcomes for all.

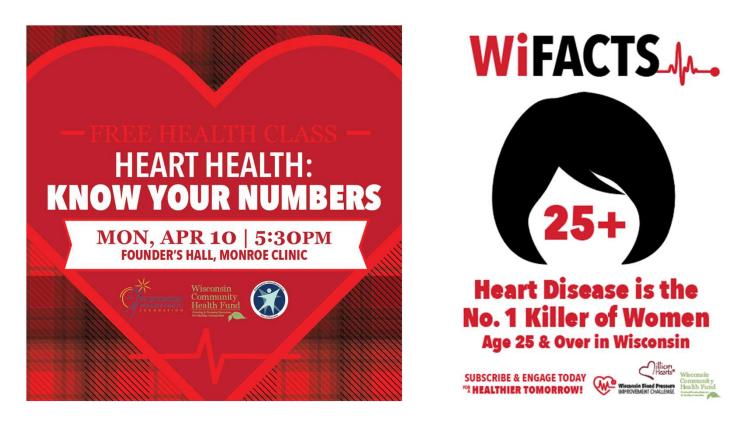
As a partner of the Green County Wisconsin Hypertension Improvement Team, we agree to the following:

- The promotion of available healthy living programs and activities to the people we serve
- To receive and review future community health education notices from the Green County Wisconsin Hypertension Improvement Team
- If blood pressure measurement is an activity performed by our organization, we agree to review annual blood pressure measurement protocols and updates and share relevant elevated blood pressure readings with the Green County Wisconsin Hypertension Improvement Team as noted in the Hypertension Community Care Protocol

SIGNATURE	DATE
NAME (PLEASE PRINT)	ORGANIZATION
EMAIL	PHONE

# Digital Announcements

Community Health Announcements & Social Media Ads





AUR

Youth-Centered Information



- The heart is about the size of your fist, and you won't believe all of the cool things this important organ can do!
- The heart has four chambers and is found not on your left side but actually in the middle of your chest between your lungs.
- The heart weighs between 7 and 15 ounces, which is about the same as a bottle of Heinz Ketchup!
- The average adult heart beats 72 times a minute, 100,000 times a day and 3,600,000 times a year
- You have felt your own heart beating and it actually works like electricity. As your heart contracts, or tightens up, it makes all of the chambers smaller and pushes blood back into the blood vessels. When your heart relaxes again, the chambers get bigger and the blood comes back to your heart.
- All of your blood vessels, arteries, veins and capillaries, things that carry blood, if stretched out would go around the world twice!
- To keep your heart healthy you need to exercise at least 30 minutes most days of the week
- Why the heart is associated with love? Greeks believed the heart was the seat of the spirit; the Chinese associated it with the center of happiness and the Egyptians thought the emotions an intellect arose from the heart. Plato confirmed that reasoning comes from the brain but that love comes from the heart.

Disease of the heart is one of our state's and country's top reasons for death. Take care of your body and heart — eat healthy food and exercise — and help to share more love with others!

For more information about healthy hearts visit:

www.heart.org https://millionhearts.hhs.gov/





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#### Green County Healthy Hearts

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Photo courtesy of Rehecca Thomoson New Glarus School Nurse Kavla Zimmerman, New Glarus High School Principal Jeff Eichelkraut and Rebecca Thompson, Director of the Wisconsin Community Health Fund. Zimmerman coordinated the event for the district.

In the month of February and beyond, residents of Green County can take advantage of exploring opportunities for healthy hearts. Chances are high that you, or someone in your family, will be affected by Cardiovascular Diseases (CVD). Cardiovascular diseases, including heart disease and stroke, unfortunately kill nearly 1 in 3 people in Wisconsin and represent the leading cause of death in women age 25 or older.

So, what can we do to prevent death and heart disease? The good news is that 80% of cardiovascular diseases are preventable with education and action. Education means understanding the numbers that effect heart health, which are: Total Cholesterol, HDL (good) Cholesterol, Blood Pressure, Blood Sugar, and Body Mass Index (BMI). Clinics, hospitals, pharmacies and self-monitoring tools are available to help you understand your numbers and risks for heart health challenges.

Listed below are some guiding principles and tools for support from the American Heart Association and Centers for Disease Control:

Eat smart - know what is on your plate - eating healthy does not have to mean dieting or giving up all of the foods you love. Learn how to ditch the junk, give your body the nutrient-dense fuel it needs, and love every minute of it!

Add color - to your diet - all the colors of the rainbow - all the time - life is why - color is how!

Move more - a good goal is 150 minutes a week, but if you don't want to sweat the numbers, simply move more! Find forms of exercise you like and stick with, and build more opportunities to be active into your routine.

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**Broad Mix of Community and Hospital Partners** – important for community health protocol development and sustainability

Keep It Simple – start with a small change – "Bigger is not Better"

**Public Health as a Chief Health Strategist** – demonstrates role of public health in improving systems for community care – leading alignment

**Expanded Community Health Capacity** – the addition of new partners to community health improvement expanded the community's capacity for further Community Health Improvement Plan work – relationships brought to a new level – strengthened respect and trust

**Protocol Integration into Daily Activities** – following many of the pilot project efforts, the BP screenings were implemented into more routine work thus creating a strategy and environment for sustained improvement change

**National Million Hearts Campaign** – assisted with setting a community goal and tying the community goal to a larger purpose – campaign slogans and materials helped to add clarity and clout to the project

**Further Expansion of Electronic Community-Clinical Linkage Systems** – Highly Recommended – many opportunities for improved care, partnerships and communication with the implementation of electronic community – clinical linkage systems



### Hypertension Control Resources and Toolkits Wisconsin Resources

#### **BP Connect Health**

A specialty staff protocol to improve follow-up after high blood pressureswww.hipxchange.org/BPConnectHealth

#### MyHEART: Information and Resources for Young Adults With Hypertension

University of Wisconsin School of Medicine and Public Health www.hipxchange.org/MyHEART

#### **Toolkit for Improving Hypertension Care & Outcomes**

Wisconsin Collaborative for Healthcare Quality (WCHQ) www.hipxchange.org/HypertensionCare



### Hypertension Control Resources and Toolkits National Resources

#### **American Heart Association (AHA)**

www.heart.org/HEARTORG/Conditions/HighBloodPressure/High-Blood-Pressure-or-Hypertension\_UCM\_002020\_SubHomePage.jsp

American Medical Association (AMA)

www.stepsforward.org/modules/hypertension-blood-pressure-control

#### Association of State and Territorial Health Officials (ASTHO)

www.astho.org

Improving the Screening, Prevention, and Management of Hypertension: An Implementation Tool for Clinic Practice Teams Washington State Department of Health www.healthit.gov/sites/default/files/13\_bptoolkit\_e13l.pdf

**Measure Up, Pressure Down Provider Toolkit to Improve Hypertension Control** American Medical Group Foundationwww.measureuppressuredown.com/hcprof/find/provtoolkit\_find.asp

Million Hearts<sup>®</sup> Action Guides https://millionhearts.hhs.gov/tools-protocols/action-guides.html



## **Discussion and Questions**



WISCONSIN COMMUNITY HEALTH FUND

## Leading a New Legacy & Promise For Healthy Communities

## Thank You

**Rebecca R. Thompson,** CPA, CFRE, MPH Executive Director Wisconsin Community Health Fund, Inc.

wicomhealthfund.org rebeccat.wchf@gmail.com

**Rebecca Cohen**, MS, MT-BC Health Systems Coordinator Chronic Disease Prevention Program Wisconsin Department of Health Services

Rebecca.Cohen@dhs.wisconsin.gov

RoAnn Warden, RN, BSN Director Green County Health Department rwarden@greencountywi.org

Kris Wisnefske, MSN, RN Parish Nurse Coordinator Monroe Clinic

kris.wisnefske@monroeclinic.org