



Utilizing a Team-based Approach to Improve Hypertension Management in A Medical Home Practice

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ABSTRACT

Background: Hypertension is one of the leading causes of heart disease in the United States. Currently, there are about 80 million Americans who have a diagnosis of hypertension. As the rates of patients diagnosed with hypertension continues to raise, across the U.S, mortality rates have increased.

Problem: Heart Disease is the leading cause of death in the State of Michigan. Since 2015, thirty-three percent of the states total population has a diagnosis of hypertension. Healthcare providers in a medical home model practice in Michigan do not use a standardized approach to educating patients about hypertension and heart disease. The objective of this project was to standardize evidence-based hypertension management using evidence-based education tools and a team-based care approach in a medical home practice.

Methods: The quality improvement project was guided by the Logic Model. The population studied included a convenience sample of voluntary participants, specifically the healthcare providers in a medical home practice in Detroit, Michigan. Pre and post evaluation of quality improvement.

Intervention: A team-based approach was utilized to standardize management and education of patients with hypertension. Each provider received a pre-survey and attended a two-hour hypertension education training based on evidence-based practice. Practice patients diagnosed with hypertension received standardized hypertension education from the providers. Each healthcare provider received a post intervention survey.

Results: The intervention was DNP student led and completed with 100% healthcare provider participation ($n=5$). Pre and post intervention surveys were used to assess impact of standardizing health care provider management of hypertension. Responses from the survey were used to determine effectiveness of the intervention.

Conclusion: This project resulted in a recommendation for team-based approaches to improve hypertension management in medical home practices and for future standardized practice implementation initiatives.

INTRODUCTION

- Heart disease is one of the leading causes of mortality in the United States
- Uncontrolled Hypertension is a major risk factor for development of Heart Disease.
- Hypertension affects 80 million Americans.
- Hypertension contributed to more than 2000 deaths daily (CDC, 2016).
- Increasing prevalence of hypertension and associated complications has become a growing health concern across the nation.

PURPOSE

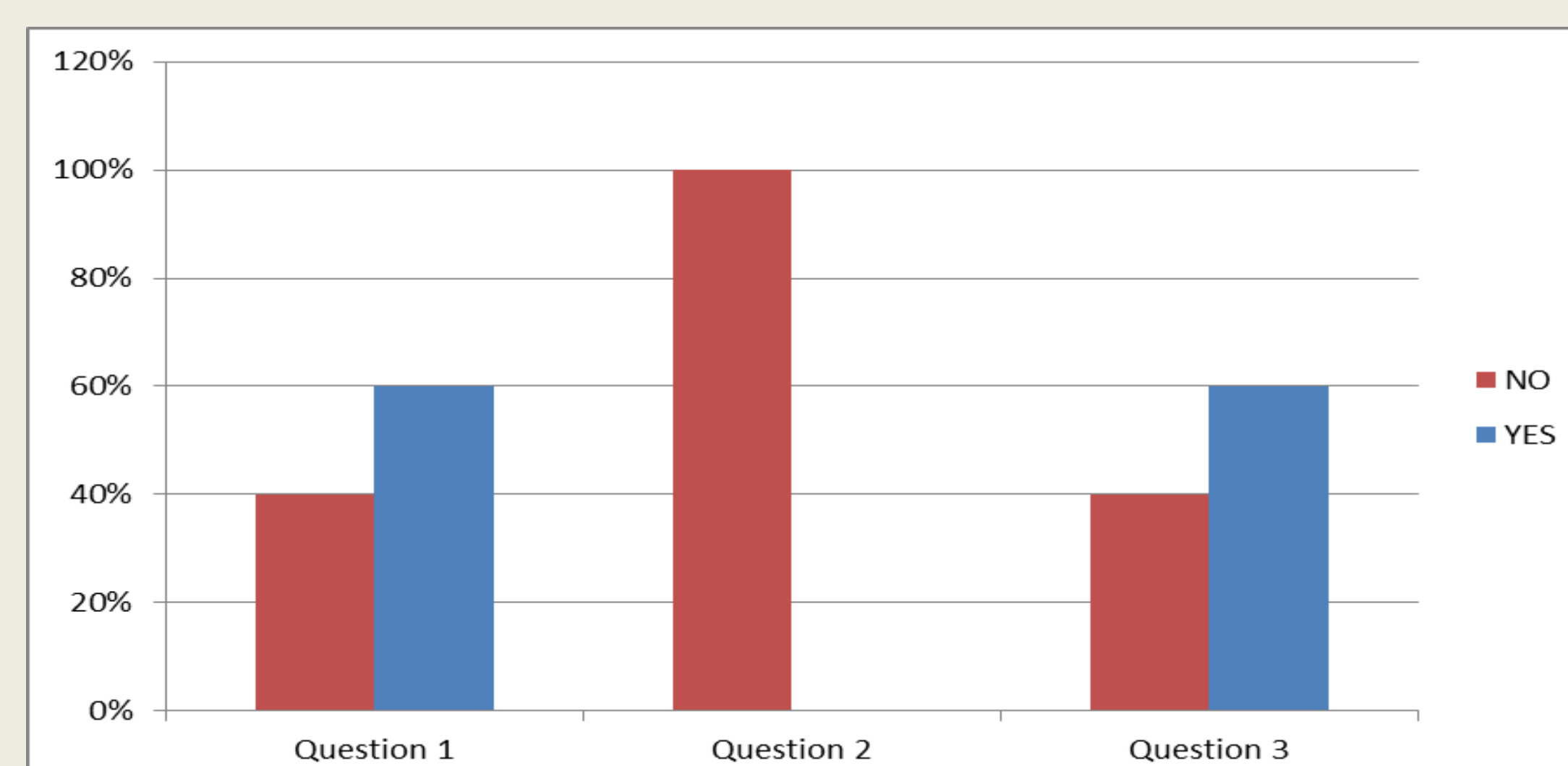
The purpose of this DNP project was to standardize and implement evidence-based hypertension management using a team-based approach in a medical home practice.

METHODS AND MATERIALS

Methods:

- Quality Improvement Project design
- Guided by the Logic Model.
- Convenience Sample ($n=5$) healthcare providers in a medical home practice in Detroit, Michigan.
- Implementation of Team-based Approach
- Pre-survey and post-surveys were used to assess impact of standardizing health care provider management of hypertension.

Figure 1. Pre-Survey Results .



RESULTS

- 100% healthcare provider participation ($n=5$).
- Pre-Survey Results
- 60 % of the participants reported that their patients demonstrated knowledge of their hypertension.
- 100 % participants reported medication non-compliance.
- 60% of participants reported that their current standard of care prevents hospitalization while 40 % disagreed.
- 8week survey- improvement, 80% patient knowledge, 0% improvement medication compliance, 80 % of participants felt that their standard of care prevented hospitalization or hospital readmissions.
- Post survey- participants report 100% knowledge, 100 % medication compliance, 100% of the participants agreed that patient education helped avoid hospital readmissions pre-intervention. Post intervention.

Figure 2. 8-Week Survey Results .

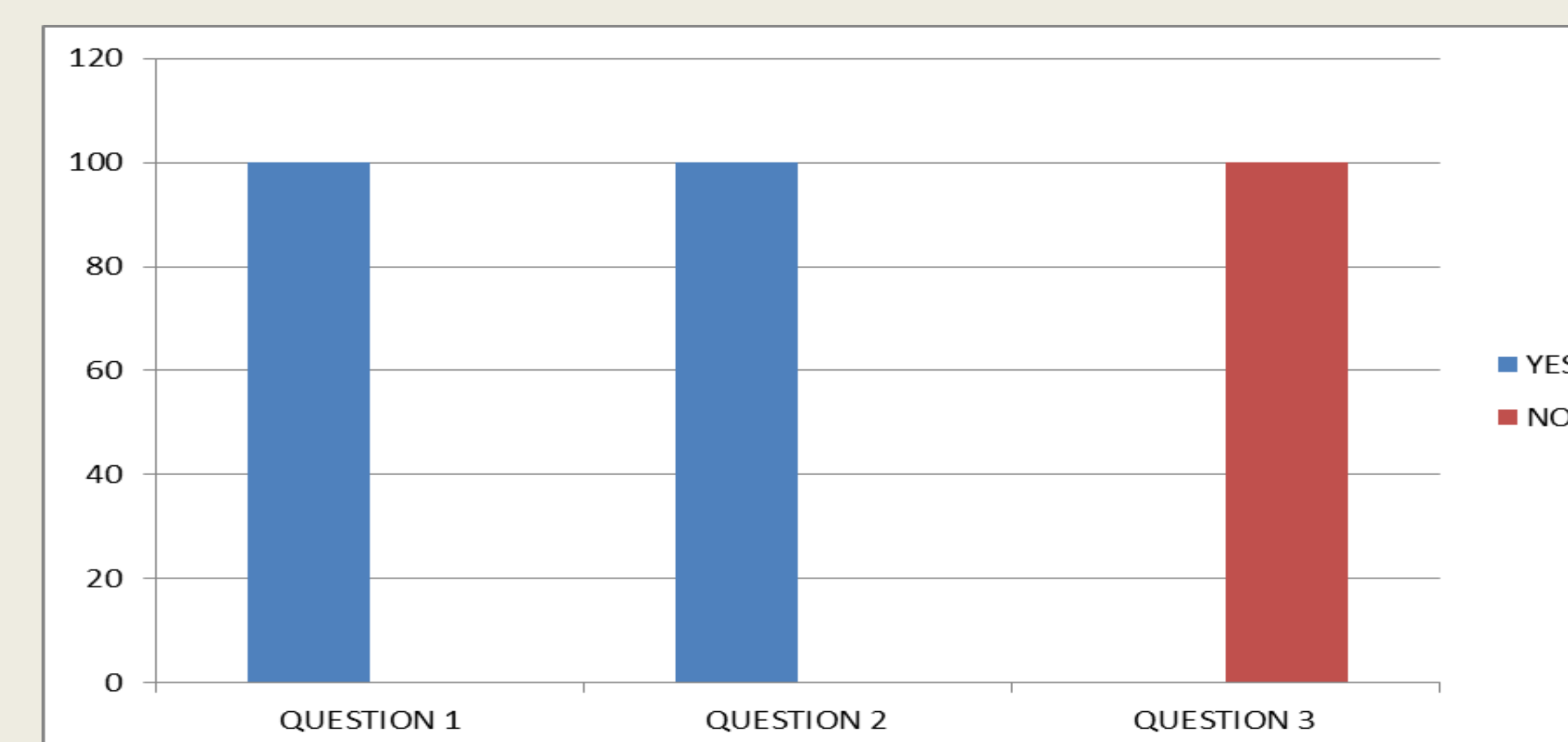
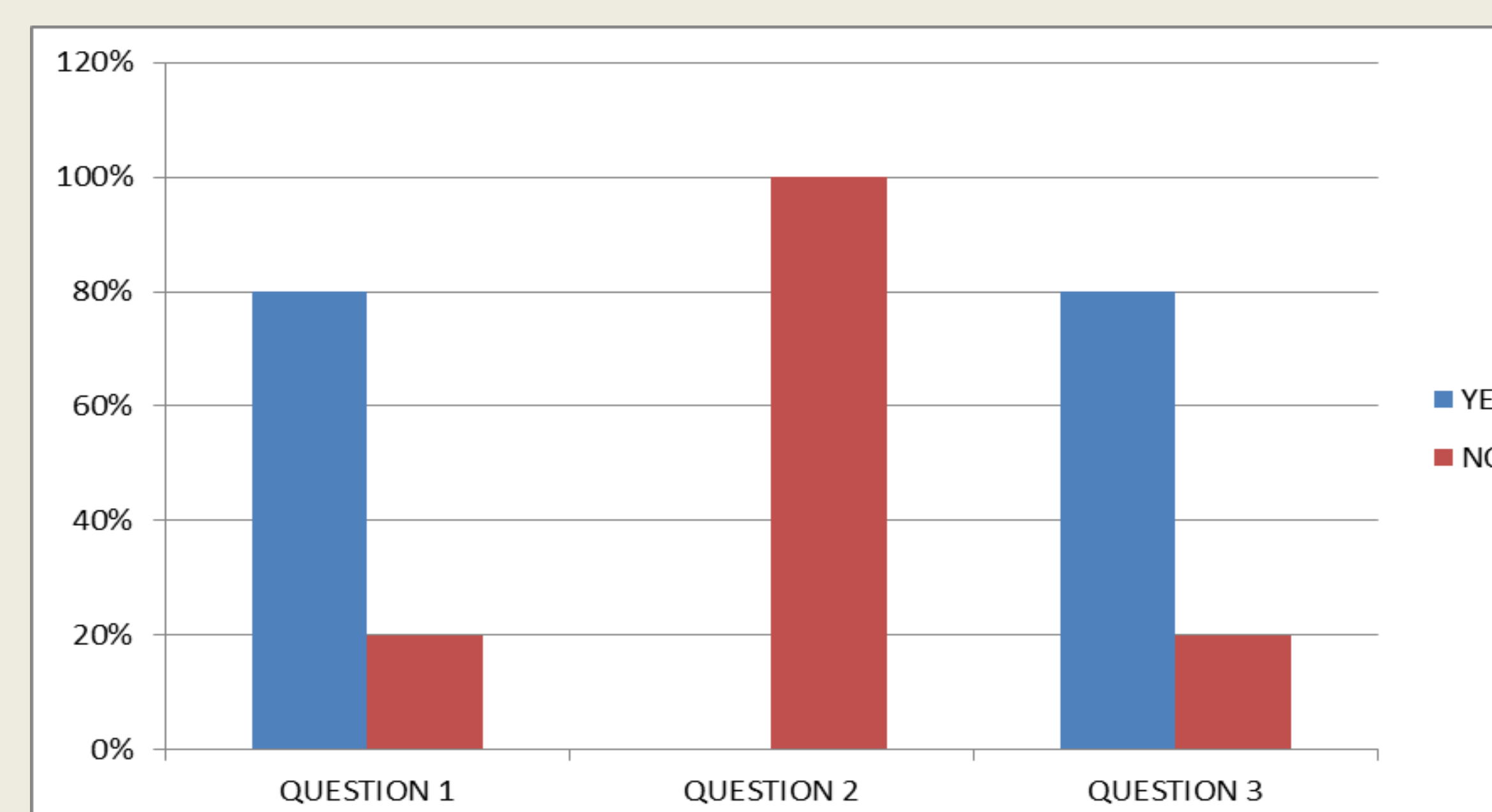


Figure 3. Post-Survey Results



IMPLICATIONS FOR PRACTICE

TEAM-BASED CARE

- Actively engages patients and clinicians,
- Enhances patient knowledge regarding their diagnosis and improves self-management.
- Promotes meaningful patient -provider relationships
- Promotes healthcare team bonding.
- Clinicians who employed team-based care within their practice, were found to have patients who had significant reductions in blood pressure, improved medication compliance and overall reductions in risk for hospitalizations.

CONCLUSIONS

- Adaptation of the team-based approach has the capacity to increase practice revenue, improved patient care and help patients avoid hospitalizations.
- TBC improves outcomes of patients with hypertension.
- Engaging patients in their own care can significantly improve health outcomes.
- Team-based approaches recommended to improve hypertension management in medical home practices and for future standardized practice implementation initiatives.

REFERENCES

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