



Hypertension Quality Improvement Project

Why	1 in 3 Americans have high blood pressure. Uncontrolled blood pressure leads to stroke, heart attacks, and death. Minorities and those with low income have a 2-3 times increased risk of complications and death.
What	<p>The Hypertension Quality Improvement Project (QIP) is using a modified version of the Institute for Healthcare Improvement (IHI) Breakthrough Series Model for Improvement to address Hypertension management. The project will involve approximately three months of planning, beginning in July or August, 12 months of intervention testing beginning in September or October 2017 and approximately six months of sustainability support.</p> <p>The project incorporates evidence-based strategies that have been successfully implemented within safety net systems with strong improvements in BP control (up to 20 percentage points). Your clinic may also choose other strategies to test and implement in addition to the ones listed below. The five strategies include:</p> <ul style="list-style-type: none"> • Accurate measurement of blood pressure, using evidence-based techniques including obtaining more than one blood pressure reading • Simplified treatment algorithm using effective, low-cost medication taken once daily, making it easier for patients to adhere to treatment • Monthly nurse or medical assistant-led visits until patient's blood pressure is controlled • Training for clinicians and staff to improve communication and build trust • Outreach to patients with elevated blood pressure
How	<p>Sites participating in the Hypertension QIP will assist in developing and testing a QI change package for diagnosing and managing Hypertension among their patient population. Sites will be asked to complete the following activities:</p> <ul style="list-style-type: none"> • Complete pre-work activities to prepare for the Hypertension QIP activities • Work in partnership with the Managed Care Plans, including a minimum of bi-monthly huddles, to identify and provide feedback on improvement opportunities • Identify and support team members, including a practice champion and a physician lead, to attend one to two face-to-face learning session(s) • Using a standardized data collection protocol, participate in the transmission of Electronic Health Record data and review of QI data at least once per month, but preferred every two weeks • Have a core QI group attend monthly action period calls to share best practices and learn from your peers • Engage in site-specific quarterly coaching opportunities with QI Coaches • Commit to testing and adapting best practices, interventions and QI tools related to hypertension control
Benefits to the Practice	<ul style="list-style-type: none"> • Improved blood pressure control across diverse patient populations • Guidance/tools on implementing proven hypertension control strategies • Improved ability by your health system or clinic to conduct value-based contracting or receive financial incentives via current value-based care systems such as ACOs • Improved responsiveness of MCPs to removal of barriers to hypertension control identified by your practice

For more details about the Hypertension QIP, including a list of Frequently Asked Questions, please visit <http://grc.osu.edu/Projects/MEDTAPP/HypertensionQIP>