

# PRACTICE RESOURCES DURING COVID-19

A postcard resource guide that can be used by providers

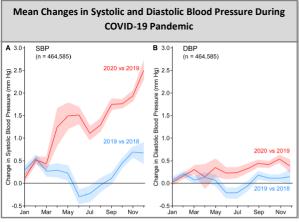


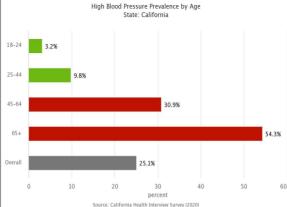
## **CONTROLLING HIGH BLOOD PRESSURE (CBP) PART 1**

Hypertension affects almost half of U.S. adults, and blood pressure (BP) control is a national public health priority. The coronavirus disease 2019 (COVID-19) pandemic has disrupted both daily life and routine medical care, including the treatment of chronic diseases such as hypertension (HTN).

**American Heart Association Journals** 

### HYPERTENSION PREVALENCE IN THE US AND CALIFORNIA





f in systolic BP during COVID-19 could signal an increase in forthcoming cardiovascular mortality.

CA is <u>ranked #3 in the</u> <u>United States</u> for prevalence of HTN.

HTN is responsible for about one in three deaths in CA.

### PROVIDER RESOURCES FOR ADDRESSING HYPERTENSION

High-quality blood pressure management is multifactorial and requires the engagement of patients, healthcare delivery systems and communities.

# ENHANCE WORKFLOW PROCESSES

- <u>Share patient data</u> between specialty clinics and PCPs.
- Enhance EHRs with a patient registry, decision support and reminders.

#### **COLLABORATION**

- Form collaborative practice <u>agreements</u> between Physicians and Pharmacists.
- Collaborate with <u>Community Health Workers</u> to support members.

#### **EDUCATION**

- Utilize the <u>Hypertension</u> <u>Prevalence Estimator Tool</u>.
- Retrain staff on proper BP measurement techniques and utilize the <u>Hypertension Tools and Training</u> materials.



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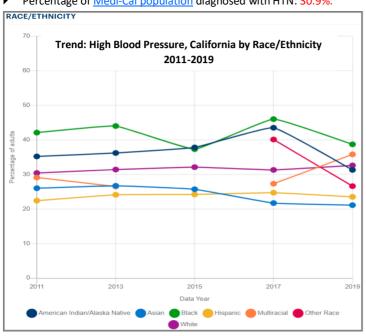
## **CONTROLLING HIGH BLOOD PRESSURE (CBP) PART 2**

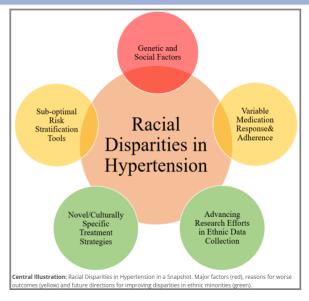
The COVID-19 pandemic magnified health inequities for people with high blood pressure.

**Journal of the American Heart Association Report** 

### HYPERTENSION AND HEALTH EQUITY

- The Medi-Cal population had higher rates of HTN than the CA population.
- Percentage of Medi-Cal population diagnosed with HTN: 30.9%.





- Use <u>culturally tailored communication</u> tools to build trust and improve care.
- Improve <u>care coordination</u> and provide self-management support to patients from different racial and socioeconomic backgrounds.

## PROVIDER RESOURCES FOR IMPROVING HEALTH EQUITY IN HYPERTENSION

- ▶ Utilize a <u>Road Map</u> to help organizations integrate disparities reduction into all health care quality improvement efforts.
- Collaborate with <u>health coaches</u> to help patients understand their data and create actionable steps.
- ▶ Utilize <u>hybrid community approaches</u> and partner with <u>community pharmacists</u> to address health disparities.
- Analyze patient populations holistically with information gathering during patient visits.
- Educate and collaborate with barbers in barbershops to engage patients with health promotion.
- Implement patient-centered counseling and utilize culturally appropriate hypertension education (CAHE) with clinic staff.