



Empowering Care Teams: Pathways to Heart Health with Community Partners

The National Cardiovascular Health Program

Brittany McCauley, RD, LDN - Practice Transformation Specialist

Housekeeping Notes

- All attendee lines are muted.
- Please submit your questions to our panelists via the Q&A feature.
- Questions will be addressed at the end of the session as time permits.





Quality Insights Overview

- A non-profit organization focused on data-driven community solutions to improve health care quality in pursuit of better care, smarter spending, and healthier people.
- Change agent, trusted partner and integrator of organizations collaborating to improve care.



Learning Objectives

- Explore patient-centered approaches to enhancing engagement and education.
- Recognize the invaluable role of CHWs in team-based care.
- Acquire practical insights on seamlessly integrating support services for managing CVD within the care team.
- Learn the referral process for the HHA-BPSM program.



Purpose

- Overview of evidence-based information
 - Cardiovascular health prevention and management
 - Awareness
 - Assessment
 - Action



Cardiovascular Disease Management

Awareness: The Impact of Cardiovascular Disease



Cardiovascular Disease (CVD)

Heart Disease

- Leading cause of death in the U.S.¹
- Leading cause of death in Delaware²



Stroke

- Fifth leading cause of death in the U.S.¹
- Fifth leading cause of death in Delaware²

Sources: ¹[Xu et al.](#), 2022; ²[CDC](#), 2023.



Hypertension Prevalence

Delaware: 36.2%

**% of all DE adults reported
being told they had high
blood pressure**

Sources: [DHSS](#), 2022.



Cardiovascular Disease Management

Assessment: Using the Tools for Hypertension



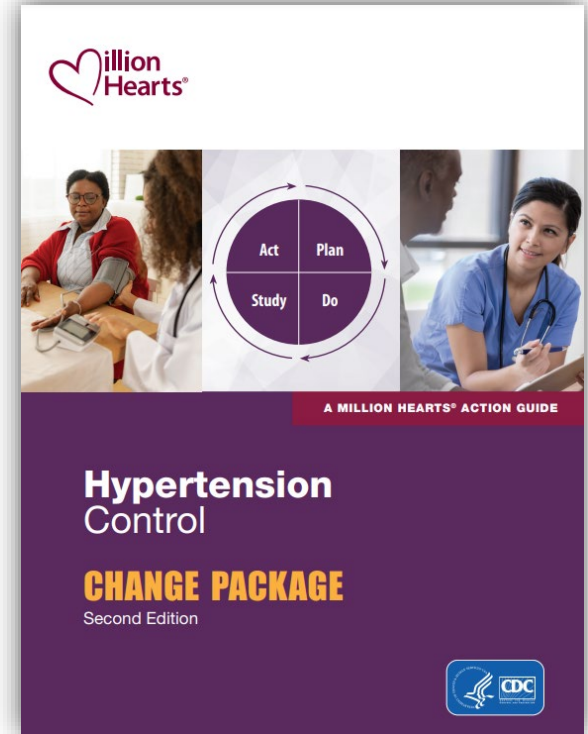
Self-Measured Blood Pressure (SMBP)



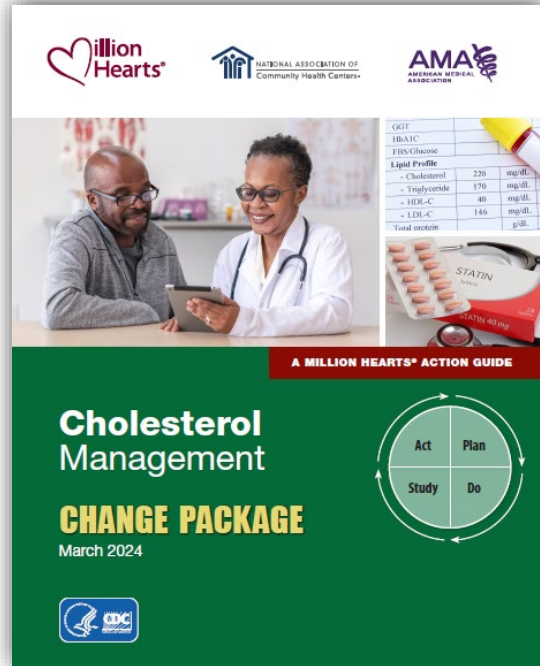
Million Hearts®

- Hypertension Control Change Package (HCCP), Second Edition

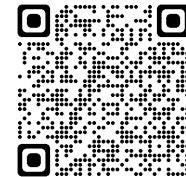
The HCCP is broken down into four main focus areas:



Cholesterol Management Change Package



- Cholesterol screening – non-fasting
- Statin and non-statin therapies
- “Hiding in plain sight”
- Familial hypercholesterolemia
- Shared decision making
- Social drivers of health



Download the [Cholesterol Management Change Package](#).



Clinical Support: Key to Sustained Success

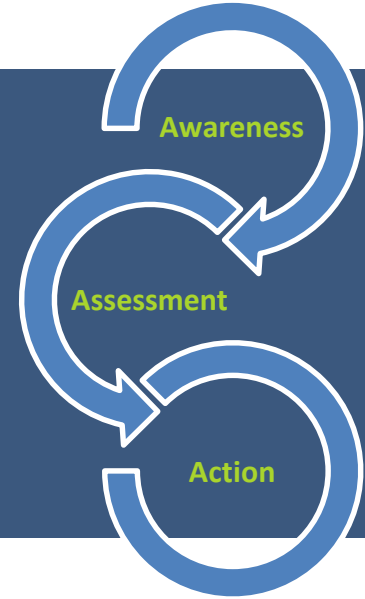
- Strong evidence for SMBP when combined with clinical support.
- Significant improvements in BP compared to usual care.
- Sustained up to 12 months.

Source: [Community Preventive Task Force](#), 2017.



Cardiovascular Disease Management

Action: Team Based Care to Improve Outcomes



Delaware Cardiovascular Health Learning Collaborative

For more information contact:

- Diabetes and Heart Disease Prevention and Control
- 302-744-1035
- DHSS_CVD_LC@delaware.gov

Download the flyer:

- Link: <https://qualityinsights.info/3xfc1v0>
- QR code:



Delaware Cardiovascular Health Learning Collaborative
Join Us in Promoting Cardiovascular Health and Health Equity

What is the Delaware Cardiovascular Health Learning Collaborative?
The Cardiovascular Health Learning Collaborative is a unique initiative that brings together community and faith-based organizations with health systems to address heart health challenges. It aims to foster partnerships, share knowledge, and apply evidence-based strategies to improve cardiovascular health outcomes, with a specific focus on health equity.

CALLING ALL:

- Community-Based Organizations, Leaders, and Influencers
- Faith-Based Organizations
- Advocacy Groups
- Health Systems and Providers

Why Join the Collaborative?

- **Collaborative Learning, Community Impact:** Gain an understanding of strategies and best practices for promoting heart health through shared learning. Work together on projects to address heart health disparities and promote health equity.
- **Resource Sharing:** Access valuable resources, toolkits, and materials to improve your organization's heart health initiatives.
- **Networking Opportunities:** Connect with like-minded organizations, health professionals, and community leaders.

How the Collaborative Focuses on Health Equity

- **Community Engagement:** Involve community members in the planning and execution of initiatives.
- **Cultural Competence:** Promote culturally relevant strategies to reach all populations.
- **Data-Driven Decision-Making:** Utilize data to identify disparities and direct interventions.
- **Direct Interventions:** Address the needs of diverse communities, ensuring equitable access to resources and services.

JOIN US IN MAKING A DIFFERENCE!
The Division of Public Health is committed to promoting cardiovascular health and advancing health equity in our community.
For more information and to join the Delaware Cardiovascular Health Learning Collaborative, contact:

FOR MORE INFORMATION CONTACT:
Diabetes and Heart Disease
Prevention and Control
Phone: 302-744-1035
DHSS_CVD_LC@delaware.gov

 **DELAWARE HEALTH AND SOCIAL SERVICES**
Division of Public Health

Delaware Division of Public Health - <https://dhs.delaware.gov/dhs/deb/index.html>



Team-Based Care Approach



Team responsibilities include:


- Medication management
- Adherence
- Patient follow-up
- Self-management support

Source: [CPSTE](#), 2023.





Cindy Biederman, MSN, RN
Project Lead, Community Initiatives
Quality Insights

A photograph of two women sitting on a couch and talking. The woman on the left has long brown hair and wears glasses and a teal shirt. The woman on the right has dark hair and wears a yellow cardigan over a dark floral top. She is holding a clipboard and a pen. The background is a blurred indoor setting. The entire image has a blue tint.

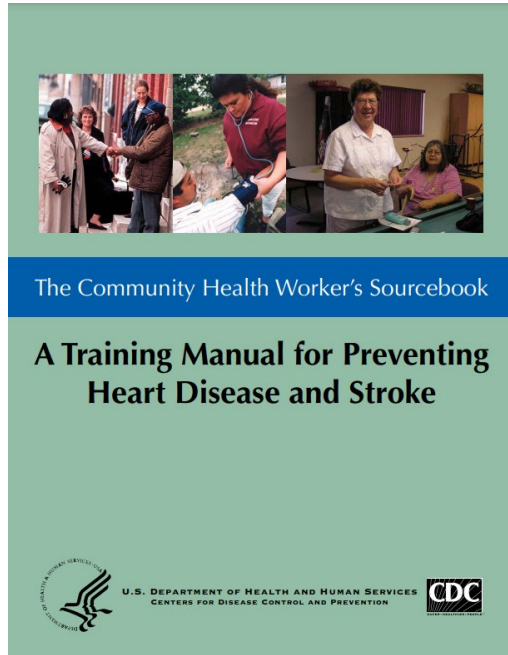
Community Health Workers: Empowering Care Teams - Supporting Patients

Quality Insights Community Team

- Community connections
- Diverse backgrounds and experiences
- Work throughout Delaware
- Assess and address unmet health-related social needs
- Dedicated to improving individual and community health



CHW Training and Credentials



[Download the Training Manual.](#)



"The Community Health Workers of Delaware will collectively advocate, empower, educate, connect, and support our communities to ensure health equity, social justice, and optimal wellbeing."

The CHW Association of Delaware operates within the state to serve the needs of our CHWs to improve our overall mission.

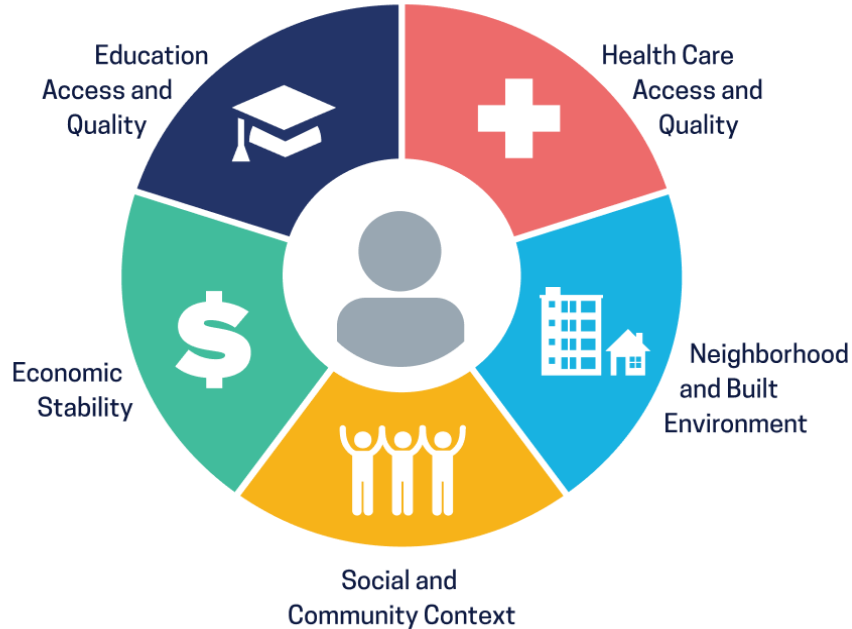
NACHW
NATIONAL ASSOCIATION OF
COMMUNITY HEALTH WORKERS



Reaching the Community



Social Determinants of Health (SDOH)



Source: [Healthy People](#), 2022.



Quality Insights is
a Healthy People
2030 Champion



SDOH in Delaware

Strengths	Challenges
Low prevalence of uninsured individuals	High prevalence of residential black/white segregation
Low instances of drinking water violations	Low public health funding
Above average high school completion rates	High prevalence of housing with lead risk

In 2023, AHR ranked Delaware **18th** among U.S. states for overall health.

Source: [America's Health Rankings \(AHR\)](#), 2023.



Value of Addressing SDOH

“Research has shown that improvements in health equity can provide tremendous value to patients, hospitals and the health care delivery system.”

Source: [AHA](#), 2018



Potentially avoidable
30-day readmissions

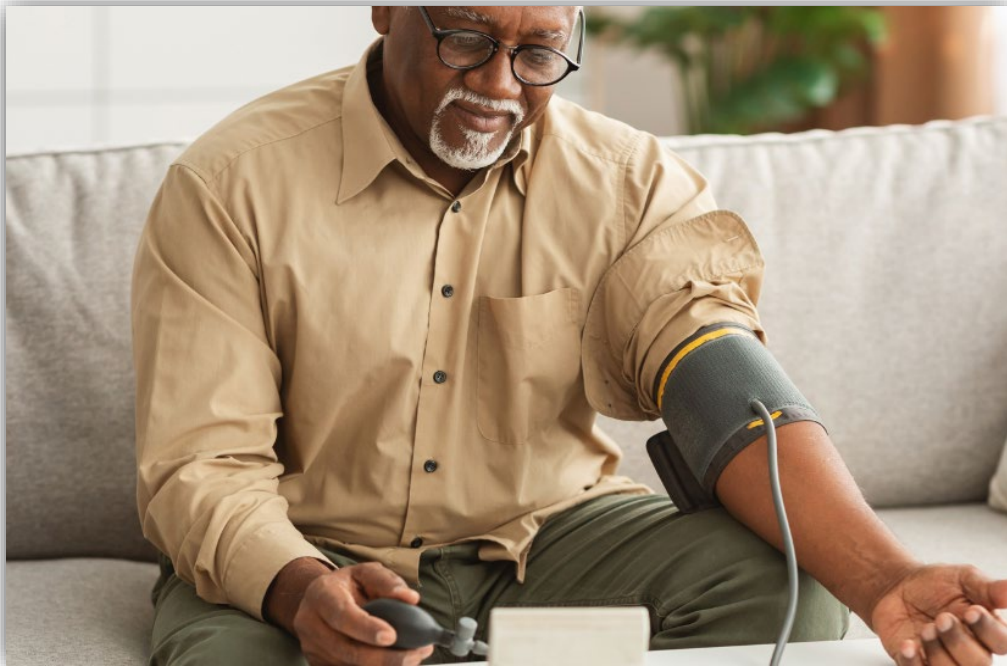


Health disparities



Health outcomes

Pathways to Heart Health



Healthy Heart Ambassador Blood Pressure Self-Monitoring Program



- Do you have high blood pressure (BP) or take medication to control your BP?
- Do you struggle to keep your BP controlled?
- Do you worry about the health risks of having high BP?

If you answered **YES** to any of these questions, take advantage of a **NO COST** program that will teach simple yet effective skills to:

- Manage and understand blood pressure
- Set and achieve health goals
- Adopt healthier eating habits
- Increase physical activity



During the four-month program, participants will receive:

- A **FREE** blood pressure monitor
- Training on how to track your blood pressure at home
- Two personalized virtual support sessions per month with a trained Healthy Heart Ambassador
- Monthly virtual Nutrition Education Seminars and "Simple Cooking with Heart" cooking demonstrations

Eligibility Requirements

- ✓ Delaware resident
- ✓ Over 18 years old
- ✓ High blood pressure diagnosis
- ✓ No cardiac events in the previous one year
- ✓ Do not have an irregular heart beat (atrial fibrillation or other arrhythmias)
- ✓ Do not have or at risk for lymphedema (swelling in the limbs)

Get More Information and Enroll Today

- Call: 302-208-9097
- Email: DHSS_DPH_HHA@delaware.gov
- Scan this QR Code:

ACT NOW! The sooner you get your BP under control, the better your chances of avoiding heart disease and other health problems!



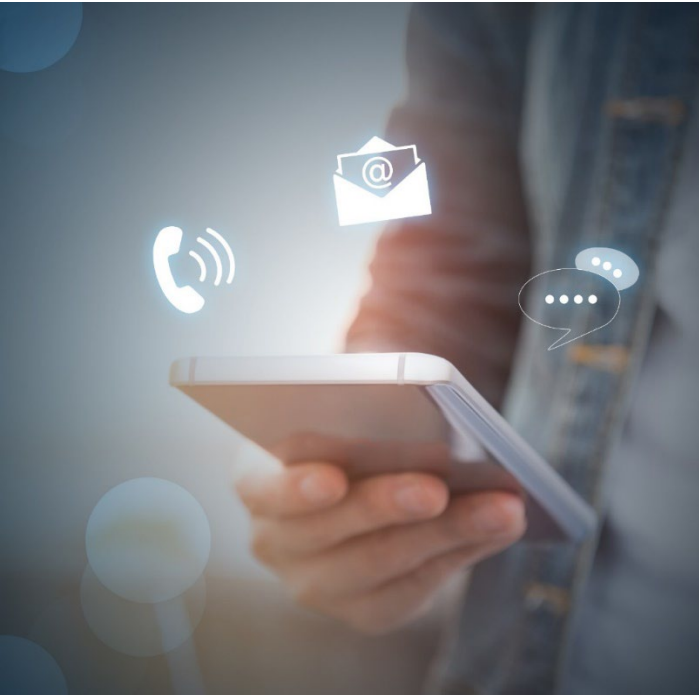
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DELAWARE HEALTH AND SOCIAL SERVICES
Division of Public Health

Quality Insights



Connect to a CHW



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Quality Insights website:

www.qualityinsights.org/stateservices

Social Media:





Natalie Andrews, Trainer/Educator
Diabetes and Heart Disease Prevention and Control
Delaware Department of Health and Social Services

HHA-BPSM Program

- No cost
- Evidence-based
- Empowers adults with high blood pressure to take control of their blood pressure
- Focuses on management of high blood pressure through regular self-monitoring and heart-healthy lifestyles



Program Eligibility

- 18 years or older
- Diagnosis of hypertension or prescribed medication for high BP
- No cardiac event in the previous one year
- Not have atrial fibrillation or other arrhythmias
- Not diagnosed or at-risk for lymphedema



Participant Benefits



- Four months of personalized support
- Blood pressure monitor (if needed)
- Bi-weekly virtual coaching sessions
- Monthly virtual nutrition sessions
- Monthly virtual cooking classes

Home Blood Pressure Monitor

- Validated Bluetooth blood pressure cuff
- No cost
- Training on how to measure and track blood pressure at home



Session Information



- Held virtually via ZOOM
- Personalized consultations with program facilitators
- Weekly check-ins by phone, email, or text
- Goal setting, action planning, and BP tracking

Key Takeaways from the HHA-BPSM Program



- Simple and proven ways to:
 - Manage and understand blood pressure
 - Measure and track blood pressure
 - Set and achieve health goals
 - Identify and control triggers that can raise blood pressure
 - Adopt healthier eating and lifestyle habits
 - Increase physical activity

Program Effectiveness

- Self-monitoring blood pressure has been proven to successfully decrease systolic and diastolic numbers
- Educational interventions cause a significant decrease in blood pressure numbers



Nutrition Educational Sessions

1. Dietary Approaches to Stop Hypertension (DASH) Meal Plan
 - Add-on: Introduction and Overview of Walk with Ease Program (*Walk with Ease* book provided).
2. Reducing Sodium Intake
 - Add-on: Introduce Know Your Numbers (BP, Chol, TG, and BMI)
3. Shopping, Preparing, and Cooking for Heart Healthy Meals
 - Add-on: Medication Therapy Management
4. Heart-Healthy Eating for Life
 - Add-on: Evidence-Based Community Programs and Resources



Cooking Demonstrations

- Based on the American Heart Association's *Simple Cooking with Heart*
 - In collaboration with the University of Delaware Cooperative Extension
- Heart Healthy Lessons:
 - Meat: Cuts, Braising, Slow Cookery
 - Salads: Buying, Storing, Preparing Fruits and Vegetables
 - Fish and Shellfish: Varieties, Cooking Methods



Participant Materials and “Graduation Box”

Upon completion of the program, participants will receive a **Healthy Heart Graduation Kit** containing:

- Measuring cups
- Measuring spoons
- Apron
- Tape measure keychain
- Food scale
- *The New American Heart Association Cookbook*
- Certification of completion



Referral Pathways

- To enroll or for more details, contact the Delaware Division of Public Health by phone at **302-208-9097** or via email at DHSS_DPH_HHA@Delaware.gov
- To register online, scan the QR code or visit: <https://www.healthydelaware.org/Individuals/Heart/Healthy-Heart-Ambassador-Program#enroll>



Provider Referral Pathways

- [HHA-BPSM Fax Referral Form](#)
- Referral letter
- Unite Us (Unite DE)
- Find Help

Healthy Heart Ambassador Blood Pressure Self-Monitoring (HHA-BPSM)
Program Provider Referral Form

Today's Date:	Provider Name:	Fax #:
First Name:	Last Name:	
Phone:	Email:	
Sex: Male Female	Date of Birth:	

Exclusions for the program: (DO NOT REFER if any of the below = Yes)


Patient has Atrial Fibrillation (A fib) or other Arrhythmias?	Yes	No
Have you experienced a recent cardiac event within the last 12 months?	Yes	No
Do you have or are at risk for Lymphedema?	Yes	No


If your patient has hypertension and no exclusions from above, fax referral to the HHA-BPSM Program to 302-739-2544 or call 302-208-9097.

Program Information:

The Healthy Heart Ambassador Blood Pressure Self-Monitoring (HHA-BPSM) program is a four-month program that includes eight 15-minute consultations with a program facilitator during virtual office hours and check-ins from the program facilitator by phone, email, or text.

Program participants are asked to attend two personalized consultations per month (office hours), as well as the monthly nutrition education seminars and cooking demonstrations. Eligible participants will receive a **FREE blood pressure monitor**, and upon completion, will receive a graduation gift.

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Provider Referral Pathways (cont.)

- Quality Insights can assist with:
 - Referral campaigns:
 - Patient portal messages
 - Text messages
 - EHR chart reminders
 - Add HHA-BPSM as a structured field for referrals/closed-loop referral

- Provider Feedback Form

**Healthy Heart Ambassador - Blood Pressure Self-Monitoring
Provider Feedback Form**

The Healthy Heart Ambassador - Blood Pressure Self-Monitoring (HHA-BPSM) program is a four-month program that includes eight (8) 15-minute consultations with a program facilitator during virtual office hours and check-ins from the program facilitator by phone, email, or text. Program participants are asked to attend two personalized consultations per month (office hours) as well as the monthly nutrition education seminars and cooking demonstrations. Eligible participants will receive a FREE blood pressure monitor and upon completion, will receive a graduation gift.

Below is a summary of your patient's participation.

Date:	Physician/Practice:	Fax #:
Patient First Name:	Patient Last Name:	
Date of Birth:		

Patient's Participation in the Program:


Name	Completed	Total Sessions	Total Completed	Comments
Coaching	Choose an item	8	Choose an item	
Cooking Demos	Choose an item	3	Choose an item	
Nutrition	Choose an item	4	Choose an item	


BP Sessions	S1	S2	S3	S4	S5	S6	S7	S8
BP Reading								

Additional Feedback:

Name: _____ Phone #: 302-744-1035

Signature: _____

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HHA-BPSM Program

- Who is eligible?
- How does the program work?
- How can people get connected?
- [Download the program flyer.](#)

Healthy Heart Ambassador Blood Pressure Self-Monitoring Program




 Do you have **high blood pressure (BP)** or take medication to control your BP?

Do you struggle to keep your **BP controlled**?

Do you worry about the **health risks** of having high BP?

If you answered **YES** to any of these questions, take advantage of a **NO COST** program that will teach simple yet effective skills to:

- Manage and understand blood pressure
- Set and achieve health goals
- Adopt healthier eating habits
- Increase physical activity

 During the four-month program, participants will receive:

- A **FREE** blood pressure monitor
- Training on how to track your blood pressure at home
- Two personalized virtual support sessions per month with a trained Healthy Heart Ambassador
- Monthly virtual Nutrition Education Seminars and "Simple Cooking with Heart" cooking demonstrations


Eligibility Requirements

- ✓ Delaware resident
- ✓ Over 18 years old
- ✓ High blood pressure diagnosis
- ✓ No cardiac events in the previous one year
- ✓ Do not have an irregular heart beat (atrial fibrillation or other arrhythmias)
- ✓ Do not have or at risk for lymphedema (swelling in the limbs)



Get More Information and Enroll Today

- **Call:** 302-208-9097
- **Email:** DHSS_DPH_HHA@delaware.gov
- **Scan this QR Code:**

ACT NOW: The sooner you get your BP under control, the better your chances of avoiding heart disease and other health problems!




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HHA-BPSM Facilitator Opportunities



Volunteer Program Facilitators Needed
Healthy Heart Ambassador - Blood Pressure Self-Monitoring Program

In this exciting evidence-based program supported by the Delaware Division of Public Health, serve as a specially trained facilitator helping clients:

- Manage and understand blood pressure (BP)
- Measure and track their BP
- Set and achieve health goals
- Identify and control triggers that can raise BP
- Adopt healthier eating habits
- Increase physical activity


Qualifications:


- The desire to help people living with high blood pressure achieve better control through a supportive, evidence-based, holistic approach
- 18 years or older
- Flexible schedule - evenings and weekends are permitted but not required
- Must be available a minimum of 30 minutes every other week
- College students encouraged to apply
- Clinical background not required

Volunteer Facilitator Benefits:

- Eight hours of free training - will be provided based on your schedule
- Hands on patient engagement experiences - perfect for CNAs, retirees, and students
- Program support materials
- Contributing to improved health in your community

Apply Now to be a Volunteer Program Facilitator:
To learn more about the program, visit:
<https://www.healthylouisiana.org/individuals/Heart/HealthyHeart-Ambassador-Program#why-now>
If you are interested in applying, call 302-208-9097 or email DHSS.DPH.HHA@delaware.gov.

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Volunteer Facilitator Benefits:

- Eight hours of free training – will be provided based on your schedule
- Hands-on patient engagement experiences - perfect for CNAs, retirees, and clinical quality team
- Program support materials
- Contributing to improved health in your membership
- Download the [Volunteer Program Facilitator flyer](#)





Questions?

Leveraging Care Teams for Optimal Outcomes



- Create a clear clinical workflow that incorporates the entire care team.
- Contact your Quality Insights Practice Transformation Specialist for assistance.

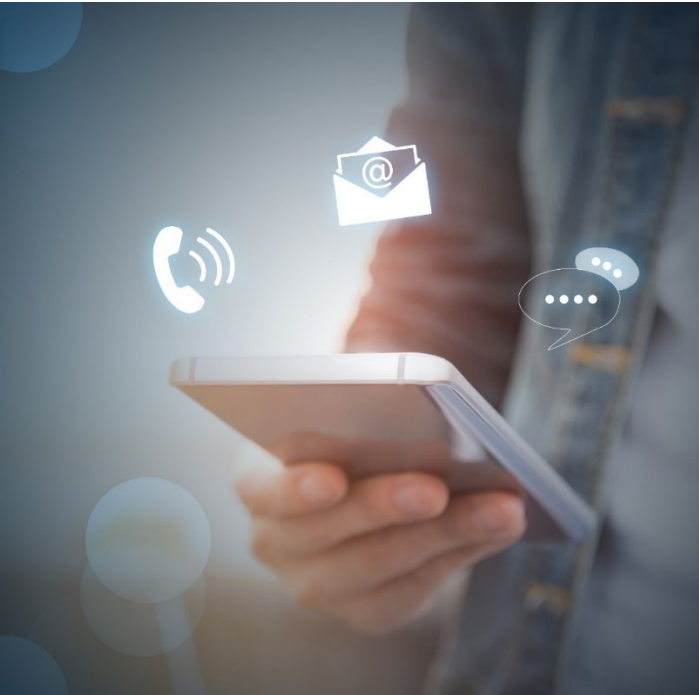


Workflow Modifications: EHR Actions

- Tips for Improved CVD Management
 1. Mind your measures.
 - CMS 165: Controlling High Blood Pressure
 - CMS 347: Statin Therapy for the Prevention and Treatment of Cardiovascular Disease
 2. Document provider recommendations in structured data fields within the patient chart.
 - Referring patients to the HHA-BPSM program
 3. Utilize EHR alerts.
 - Clinical decision support (CDS) reminders



Contact Quality Insights



Brittany McCauley, RD, LDN

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Phone: 1.800.642.8686, Ext. 131

Quality Insights website:

www.qualityinsights.org/stateservices



Social Media:



Evaluation

- Please complete this brief evaluation to provide Quality Insights with feedback about this session.
- You will be automatically directed to the evaluation when you close out of today's webinar.
 - Link: <https://www.surveymonkey.com/r/N3Z9MFK>
 - QR code:



THANK YOU!



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