

# EXPANSION OF A SELF MONITORING BLOOD PRESSURE PROGRAM ACROSS MULTIPLE SITES

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## BACKGROUND

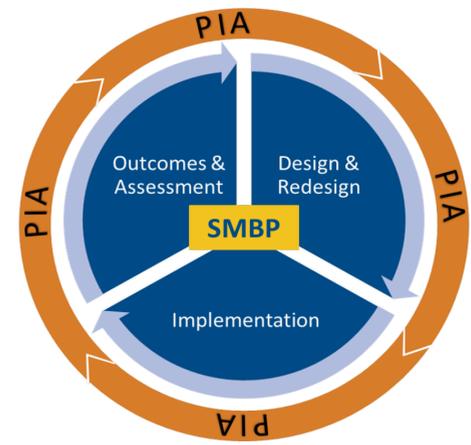
- Self Monitoring Blood Pressure (SMBP) programs reduce morbidity and mortality in patients with hypertension <sup>1,2</sup>
- In 2018, over 5,000 Zufall patients with hypertension ages 18-85 were seen; 26% had BP  $\geq$ 140/90 mmHg
- Funded by NJDOH and CDC Division of Heart and Stroke Prevention, SMBP program began in July 2019 at 2 sites with 7 staff trained
- The COVID-19 pandemic threatened program implementation due to a shift in priorities

## OBJECTIVES

- Expand SMBP services to 7 sites across 6 counties
- Increase staff participation and buy-in
- Increase patient enrollment
- Implement team-based approach
- Improve patient outcomes



## METHODS



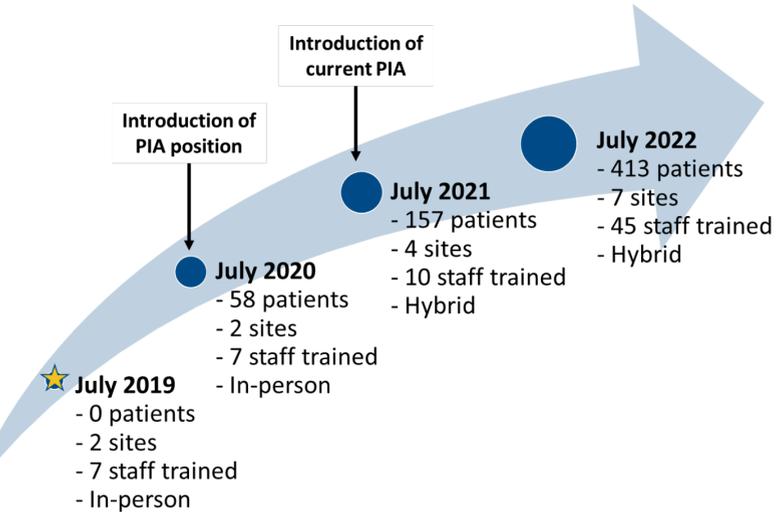
- 1. Creation of Project Implementation Assistant (PIA) Role**
  - Dedicated non-clinical staff who provides program-specific training and resources to the clinical teams
  - Expands and supports the program by:
    - Assisting with processes such as patient selection, in-person and telemedicine visit scheduling, patient education, equipment inventory, documentation, troubleshooting
    - Gathering data, preparing reports and presenting outcomes



- 2. Develop a Flexible Team Design**
  - Create multidisciplinary teams of providers, medical assistants (MAs), nurses, clinical pharmacists, and site managers depending on site resources
  - Improve or modify workflow processes based on team feedback
  - A successful workflow model:
    - Providers and PIA identify potential enrollees
    - Nurse or MA teach patient how to use BP monitor and self-management
    - Clinical pharmacist or nurse provide patient follow up, education, and on-going support
  - Teams can include case managers, CHWs, volunteers depending on site resources

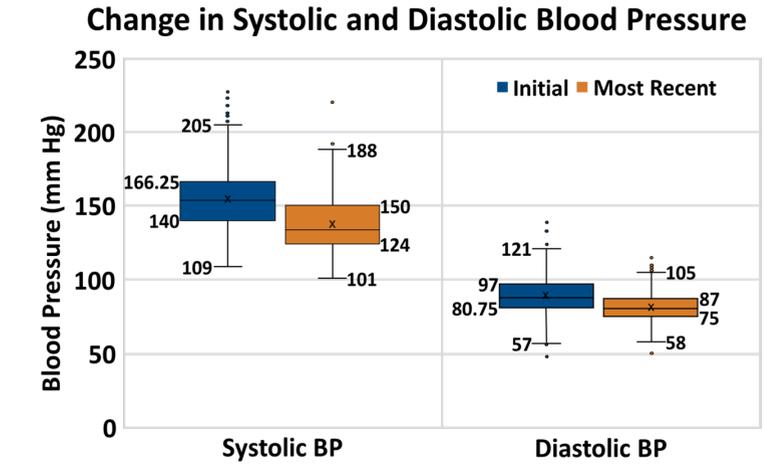
## RESULTS

- The PIA and Flexible teams resulted in provider and staff buy-in, ensured patient-centered treatment, and increased program access to patients with hypertension
- Clinicians and patients reported high satisfaction with the program
- Program exceeded its 2022 goal of enrolling 75 patients (294 enrolled in 1 year)
- Over 400 patients in 7 sites participated in the program



## RESULTS

- 80% of program participants improved their BP



## CONCLUSIONS

- The implementation of the PIA and a flexible team design, adapted to the staff available at each site, resulted in the successful expansion of the SMBP program during a pandemic
- Staff participation increased at all sites
- Patients and staff were highly satisfied with the program
- Patient engagement and clinical outcomes improved

REFERENCES:  
1. Fletcher, B. R., et al. (2016). Self-monitoring blood pressure in hypertension, patient and provider perspectives: A systematic review and thematic synthesis. Patient Education and Counseling, 99(2), 210–219.  
2. Stergiou, G. S., et al. (2011). Home Blood Pressure Monitoring in the Diagnosis and Treatment of Hypertension: A Systematic Review. American Journal of Hypertension, 24(2), 123–134.

