Long term BP monitoring

National BP Protocol Monthly reading V3 [6M]

This protocol will ask the patient to send BP readings once a month. Practices will be sent Docman reports of the readings once every 6 months.

General information about Home Blood Pressure Monitoring (HBPM) and long term monitoring

- Home is generally lower than clinic BP: approximately -5/5mmg at 140/90 mmHg in clinic and -10/5 mmHg at 160/100 mmHg in clinic
- The British and Irish Hypertension Society has a list of validated monitors for patients who prefer to use their own. (https://bihsoc.org/bp-monitors/for-home-use/).

Purpose

- To provide practices and patients with a more trustworthy estimate of average BP.
- To improve patient knowledge about their own BP and facilitate tailoring of and adherence to mutually agreed treatment and management plans.
- To provide a convenient alternative to visiting the GP surgery for regular hypertension review while still providing the clinician with regular information about BP control.

Summary: Prompts to remind the patients to send in their BP readings. One reminder message.

Selection of patients

- Patients who are on the practice hypertension register
- Patients with CKD (Stages 3-5 i.e. sustained eGFR<60) who also has diabetes and/or ACR≥ 70mg/ mmol. NB these patients may need different BP targets and lower limits protocol can be used.
- Exclude patients with pulse irregularity (for example, due to **atrial fibrillation** as automated devices may not accurately measure the blood pressure and manual blood pressure monitoring should be undertaken).

Target BP levels

- **Standard protocol:** Without CKD or diabetes and / or ACR≥70 mg/mmol – BP **<135/85 mmHg** (home BP reading)
- **Lower level protocol:** With CKD Stages 3-5 or diabetes and/or ACR≥ 70 mg/mmol with need for BP goal **<125/75 mmHg** (home BP reading). *There is some debate about the need for lower blood pressures in diabetes with differing advice from guidelines and you may choose to use higher targets. You may also wish to consider the lower target range for people with a history of stroke/TIA*

Expected outcomes e.g.:

1) Changes in healthcare usage:
   - less face to face contact at GP surgery
   - Some patients will be found to be normotensive or controlled when home readings are used.

2) Improved clinical outcomes:
   - Blood pressure <135/85 mmHg home BP readings or patient's set goal (e.g. to account for home BP readings as opposed to clinic readings or different conditions and/or ages).
   - As a result, better long term clinical outcomes for reduction in stroke and MI

Protocol summary for patient

- Patient is issued with a sphygmomanometer (or can use own).
- Patient signs an Opt In Form, agreeing to respond to messages from Flo, to care for the equipment (including any required changes in batteries), and return it if asked to do so. Patient accepts that they remain responsible for their health, and understand that readings are sent to a computer.
- Patient is given the Privacy Notice.
- Patient is given the Patient Information Leaflet
- Patient is issued with a Shared Management Plan.
- Patient is made aware that blood pressure readings, submitted via 'Flo', are remotely monitored by a clinician, via Docman reports.
- Information messages can be sent to the patient.

Protocol summary for Clinician:

- Issues sphygmomanometer and appropriate cuff size, and trains patient in its use.
- Gives patient the Patient Information Leaflet and goes over its contents which states that the patient remains responsible for their own health and informs them how to opt out or suspend if on holiday.
- Agrees with the patient to take their BP monthly and send the readings in via Flo. Patients can take more frequent readings but should only send in readings when requested to do so by Flo. Extra readings can be blocked but it can give clinicians more flexibility if they want to ask for more readings if desired.
- Obtains patient's signed agreement in the Opt In Form to respond to Flo, to look after the equipment, and return it when asked.
- Give patient the Privacy Notice.
- Explains to the patient that readings are sent to a computer which is not monitored continuously.
- Enrols the patient on Flo by using the patient's CHI and mobile phone number, demonstrating patient consent, then selecting the **National BP Protocol Monthly reading V3 [6M]** and adding it to the patient.
- Issues the patient with a Shared Management Plan ensuring the patient knows what to do if they are concerned about their BP.
- Notes the patient enrolment on the practice system as agreed locally so that other practice members are aware / can optionally access the record if they see the patient.

- Monitors the patient's readings in the Docman reports which will be sent once every 6 months, and if unable to do so, ensures another member of the practice team does so.
- Understands what to do if the readings are outside set parameters (e.g. ask patient to come to surgery).

National BP Protocol Monthly reading [6M]

The Template Florence Text Messages

The time when messages are sent to the patient can be adjusted to suit. Instructions of how to do this are in the step by step guide provided by Florence.

Be aware if target BP levels are changed they will not match the targets in the Docman reports.

Default setting:

Systolic (100-134 mmHg) diastolic (40-84 mmHg)

Message at 8am monthly: *Hi. Don't forget to take your blood pressure this morning and again this evening. Reply with BP then your reading e.g. BP 140 80. Thanks, Flo.*

Change the time to suit the patient.

Change message wording as required in all template messages.

8 hours later if the patient has not replied to the first message:

Hi. I've noticed you haven't sent in your readings today. Please reply to this message with BP then your reading, e.g. BP 140 80, Thanks Flo

Within normal range:

Thanks, your BP reading is normal. Flo.

Above desirable range:

Your blood pressure is a bit high today. Please follow the advice on your shared management plan. Thanks Flo.

Below desirable range:

Your blood pressure is a bit low today. Please follow the advice on your shared management plan. Thanks Flo.

Breach message triggered when the readings reach either 200 mmHg (systolic) or 135 mmHg (diastolic)
Or if the BP is below 90 mmHg (systolic) or 20 mmHg (diastolic).

"'Warning! Contact your GP today if upper reading over 200 or below 90 after a recheck in 1 hour. Contact your GP within next few days if it remains over 180"

This message can be changed locally however it is strongly recommended by our clinical advisors this or similar strong message should remain for the 3 and 6 month reports to minimise risk.

National BP Protocol Lower Limit Monthly reading [6M]

As above but with targets:

Default: systolic (100-124 mmHg) diastolic (40-74 mmHg) if patient with CKD (Stages 3-5 i.e. sustained eGFR<60) who also has diabetes and/or ACR≥ 70mg/ mmol. You may also wish to consider these targets for people who have had stroke or TIA.

Information messages

(These cannot be changed)

Day 0 immediately patient details have been added to Flo

Hi, I'm Florence your NHS self care service. I need to confirm you want to join in. Get started by replying "YES". Don't reply if you didn't ask to join in. My number, 64711 is FREE to text and is registered with the UK regulator at http://psauthority.org.uk/

Patient replies with "**yes**" to opt in

Hi, it's Florence. Thanks for joining. I'm here to help you manage your own health better. At times I'll send advice for you to act on. To help you I may also share information with your healthcare team. You can opt out now or leave anytime by replying with STOP.

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