# Hypertension (stable/occasional monitoring) – protocol WM-AHSN-08a (monthly readings)

## **Purpose**

- To improve compliance with anti-hypertensive medication.
- To encourage patient to adhere to the shared management plan agreed with their clinician, to sustain well-controlled blood pressure (e.g. ≤140/90 mmHg clinic; ≤135/85 mmHg home BP reading).
- To provide a convenient alternative to visiting the GP surgery or other face to face clinical consultation for occasional hypertension review while still providing the clinician with regular information about BP control.
- To remind the patient to adopt a healthier lifestyle exercise, eating sensibly.

## Setting:

General practice, but can be any healthcare setting if a clinician takes continuing responsibility

#### **Selection of patients**

- Patients who are on the practice hypertension register and on medication whose blood pressure
  is stable, i.e. ≤140/90 mmHg clinic; ≤135/85 mmHg home BP reading, who do not have diabetes
  or CKD with ACR≥ 70 mg/mmol (as this would require a different protocol with lower BP goal
  and more frequent monitoring see protocol 3.4).
- Patients who will benefit from occasional text messages that encourage compliance with medication.

#### Expected outcomes e.g.:

- 1) Changes in healthcare usage:
  - Fewer unnecessary admissions to hospital or attendances at A&E; less face to face contact at GP surgery
  - Regular pattern of repeat prescriptions for anti-hypertensive drugs
- 2) Improved clinical outcomes:
  - Maintenance of stable blood pressure readings (i.e. consistently ≤140/90 mmHg clinic; ≤135/85 mmHg home BP reading)

#### Success criteria

• 80% of patients maintain stable blood pressure control over any 3 month period (i.e. consistently ≤140/90 mmHg; clinic; ≤135/85 mmHg home BP)

## Protocol summary (26 weeks):

- Patient issued with sphygmomanometer (but patient might purchase this)
- Patient signs contract
- Monthly blood pressure readings; taken twice at different times on same day
- Twice monthly information messages
- Three-monthly text enquiry of patient experience starting at baseline

### **BP** reading

Default: systolic (80-134 mmHg) diastolic (60-84 mmHg)

**Monthly reminder at 8.00am** (but if patient sends in more frequent readings, they will receive the same responses)

8.00am: Please take your blood pressure at two different times today, and send each pair of readings in separate texts. Text BP, then your reading, e.g. BP 140 80. Thanks

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

Hi. I've noticed you haven't sent in your readings today. Could you please text in BP, then the reading, e.g. BP 130 75 Send each pair in separate texts.

#### Within normal range:

Your BP reading is normal. Flo.

#### Above desirable range:

Your blood pressure (systolic) is a little high today. Follow the advice in your management plan, and take the readings again at your usual time. Thanks, Flo.

#### Below desirable range:

Your blood is pressure a little low today. Take it again, and follow the advice in your management p lan. Take care, Flo.

**Breach message** (triggered when the readings reach either 200 mmHg (systolic) or 105 mmHg (diastolic) or if the BP is below 70 mmHg (systolic) or 50 mmHg (diastolic).

Your BP is outside the safe range - so contact a doctor today as agreed in your management plan. Take care, Flo.

Information messages (twice monthly for 26 weeks)

When measuring your BP, support your arm at the level of your heart and avoid talking. Take care, Flo. When you measure your BP, don't forget to remove any tight clothing and ensure your arm is relaxed. Thanks, Flo

Remember - don't have a caffeine containing drink like Coke or coffee, or smoke 30 minutes before taking your BP, if possible. Take care, Flo.

Check the salt content of your food; try for less than 3 grams per day. Kind regards, Flo.

Try to eat at least 3 servings of fruit and vegetables daily - this should boost your health. Thanks, Flo. Exercise will help get your BP down; try to do 30 minutes, 3 to 5 times per week - the more, the better. Take care Flo.

Sit quietly for at least 5 minutes with your arm exposed and supported at the level of your heart when you take your BP. Kind regards, Flo.

Try to get your weight down to a body mass index between 20 -25. If you don't know yours, ask your GP or nurse next time you see them. Flo.

Your home BP readings are just as reliable as those taken in your GP's surgery if you take your BP correctly. Thanks Flo

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If you become over-anxious about your BP measurements, then calm down, and try and relax. Take care. Flo.

Empty your bladder before taking your BP reading. Take care, Flo.

Don't rush when taking your BP – you want to register a low reading. Take care, Flo. Don't talk or move when taking your BP, just sit still and stay quiet. Take care. Flo.

Try to fit in regular exercise – as much as is comfortable every day. Take care, Flo.

### **Patient Experience Questions**

BASELINE: (xEvalQ1 & xEvalQ2)

6.30pm Are you confident about taking your blood pressure at home? If you are, text CC1; if not, text CC2; If you're unsure, text CC3. Thanks, Flo.

Do you prefer to text in your readings via Flo rather than go to the surgery? Please text CC1 if yes, or CC2 if no. Thanks, Flo

Thank you. Home blood pressure readings can help because you feel more relaxed at home than in the surgery.

AFTER MONTHS 3&6: (xEvalQ-03 / xEvalQ-04 & xEvalQ-05 / xEvalQ-06)

6.30pm Are you confident about taking your blood pressure at home? If you are, text CC1; if not, text CC2; If you're unsure, text CC3. Thanks, Flo.

Do you prefer to text in your readings via Flo rather than go to the surgery? Please text CC1 if yes, or CC2 if no. Thanks, Flo

Thank you. This information helps us to know how useful the Flo system is.

## Hypertension (stable/occasional monitoring) - protocol WM-AHSN-08b (weekly readings)

### **Purpose**

- To improve compliance with anti-hypertensive medication.
- To encourage patient to adhere to the shared management plan agreed with their clinician, to sustain well-controlled blood pressure (e.g. ≤140/90 mmHg clinic; ≤135/85 mmHg home BP reading).
- To provide a convenient alternative to visiting the GP surgery or other face to face clinical consultation for occasional hypertension review while still providing the clinician with regular information about BP control.
- To remind the patient to adopt a healthier lifestyle exercise, eating sensibly.

#### Setting:

General practice, but can be any healthcare setting if a clinician takes continuing responsibility

## **Selection of patients**

- Patients who are on the practice hypertension register and on medication whose blood pressure
  is stable, i.e. ≤140/90 mmHg clinic; ≤135/85 mmHg home BP reading, who do not have diabetes
  or CKD with ACR≥ 70 mg/mmol (as this would require a different protocol with lower BP goal
  and more frequent monitoring see protocol 3.4).
- Patients who will benefit from occasional text messages that encourage compliance with medication.

### Expected outcomes e.g.:

- 1) Changes in healthcare usage:
  - Fewer unnecessary admissions to hospital or attendances at A&E; less face to face contact at GP surgery
  - Regular pattern of repeat prescriptions for anti-hypertensive drugs
- 2) Improved clinical outcomes:
  - Maintenance of stable blood pressure readings (i.e. consistently ≤140/90 mmHg clinic; ≤135/85 mmHg home BP reading)

#### Success criteria

• 80% of patients maintain stable blood pressure control over any 3 month period (i.e. consistently ≤140/90 mmHg; clinic; ≤135/85 mmHg home BP)

#### Protocol summary (13 weeks):

- Patient issued with sphygmomanometer (but patient might purchase this)
- Patient signs contract
- Weekly blood pressure readings
- Monthly text enquiry of patient experience starting at baseline

#### **BP** reading

Default: systolic (80-134 mmHg) diastolic (60-84 mmHg)

**Monthly reminder at 8.00am** (but if patient sends in more frequent readings, they will receive the same responses)

8.00am: "Please take your blood pressure, and send me the readings. Please write BP, followed by each reading, e.g.: BP 140 80 Thanks, Flo."

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

"Hi. I've noticed you haven't sent in your readings today. Could you please text in BP, then the readings. Thanks Flo"

## Within normal range:

Your BP reading is normal. Flo.

#### Above desirable range:

Your blood pressure (systolic) is a little high today. Follow the advice in your management plan, and take the readings again at your usual time. Thanks, Flo.

## Below desirable range:

Your blood is pressure a little low today. Take it again, and follow the advice in your management p lan. Take care, Flo.

**Breach message** (triggered when the readings reach either 200 mmHg (systolic) or 105 mmHg (diastolic) or if the BP is below 70 mmHg (systolic) or 50 mmHg (diastolic).

Your BP is outside the safe range - so contact a doctor today as agreed in your management plan. Take care, Flo.

## Information messages (weekly for 13 weeks)

When measuring your BP, support your arm at the level of your heart and avoid talking. Take care, Flo. When you measure your BP, don't forget to remove any tight clothing and ensure your arm is relaxed. Thanks, Flo

Remember - don't have a caffeine containing drink like Coke or coffee, or smoke 30 minutes before taking your BP, if possible. Take care, Flo.

Check the salt content of your food; try for less than 3 grams per day. Kind regards, Flo.

Try to eat at least 3 servings of fruit and vegetables daily - this should boost your health. Thanks, Flo. Exercise will help get your BP down; try to do 30 minutes, 3 to 5 times per week - the more, the better. Take care Flo.

Sit quietly for at least 5 minutes with your arm exposed and supported at the level of your heart when you take your BP. Kind regards, Flo.

Try to get your weight down to a body mass index between 20 -25. If you don't know yours, ask your GP or nurse next time you see them. Flo.

Your home BP readings are just as reliable as those taken in your GP's surgery if you take your BP correctly. Thanks Flo

If you become over-anxious about your BP measurements, then calm down, and try and relax. Take care, Flo.

Empty your bladder before taking your BP reading. Take care, Flo.

Don't rush when taking your BP – you want to register a low reading. Take care, Flo. Don't talk or move when taking your BP, just sit still and stay quiet. Take care, Flo.

Try to fit in regular exercise – as much as is comfortable every day. Take care, Flo.

#### **Patient Experience Questions**

BASELINE: (xEvalQ1 & xEvalQ2)

6.30pm Are you confident about taking your blood pressure at home? If you are, text CC1; if not, text CC2; If you're unsure, text CC3. Thanks, Flo.

Do you prefer to text in your readings via Flo rather than go to the surgery? Please text CC1 if yes, or CC2 if no. Thanks, Flo

Thank you. Home blood pressure readings can help because you feel more relaxed at home than in the surgery.

AFTER MONTHS 3&6: (xEvalQ-03 / xEvalQ-04 & xEvalQ-05 / xEvalQ-06)

6.31pm Are you confident about taking your blood pressure at home? If you are, text CC1; if not, text CC2; If you're unsure, text CC3. Thanks, Flo.

Do you prefer to text in your readings via Flo rather than go to the surgery? Please text CC1 if yes, or CC2 if no. Thanks, Flo

Thank you. This information helps us to know how useful the Flo system is.