

# Responding to Severe Hypertension

*Moving Towards Implementation*



AC<sup>3</sup>HIEVE

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# Objectives

- By the end of this session the implementation team will
  - Finalize adapted severe HTN algorithm for antepartum/postpartum patients
  - Plan next steps to implement the adapted severe HTN algorithms
  - Preview suggested conversation guides to assist in communicating urgency during hypertensive emergencies

# Agenda

- Last meeting, we:
  - *Reviewed the Severe HTN Algorithms*
  - *Considered adaptations to fit the clinic*
- This meeting, we will:
  - *Ground our purpose*
  - *Check-in on ongoing policies/procedures*
  - *Review baseline chart audit results for severe hypertension*
  - *Review conversation guide resource*
  - *Complete surveys on acceptability and feasibility*

# Roles for today's session



FACILITATOR- ACHIEVE  
NURSE COORDINATOR



TIMEKEEPER-



RECORDER-

# Group Norms

# What is a Conversation Guide?

- **WHAT:** pamphlets with **suggested phrases** that could be used during a conversation about a potential **hypertension emergency** during **pregnancy or postpartum**
- **WHERE:** Outpatient clinics
- **TWO GUIDES:** one for patients, one for providers

# Overview of content

## Provider Guide:

- Stress the situation's **urgency**
- Maintain an **empathetic and respectful approach**.
- Provide patient with **options** to give them agency over their care

## Patient Guide:

- Tell your care team about **your needs or concerns**
- Ask **questions** to learn about your **options**
- **Advocate** for yourself

# Provider Guide Sections

- **Set Up**
  - Open the conversation
- **Assess**
  - Learn about patient's concerns & understanding of the situation
- **Share**
  - Share your concerns
- **Plan**
  - Discuss next steps and escalation
- **Explore**
  - Address remaining concerns/questions
- **Close**
  - closing out the conversation



Let's look at the guide!

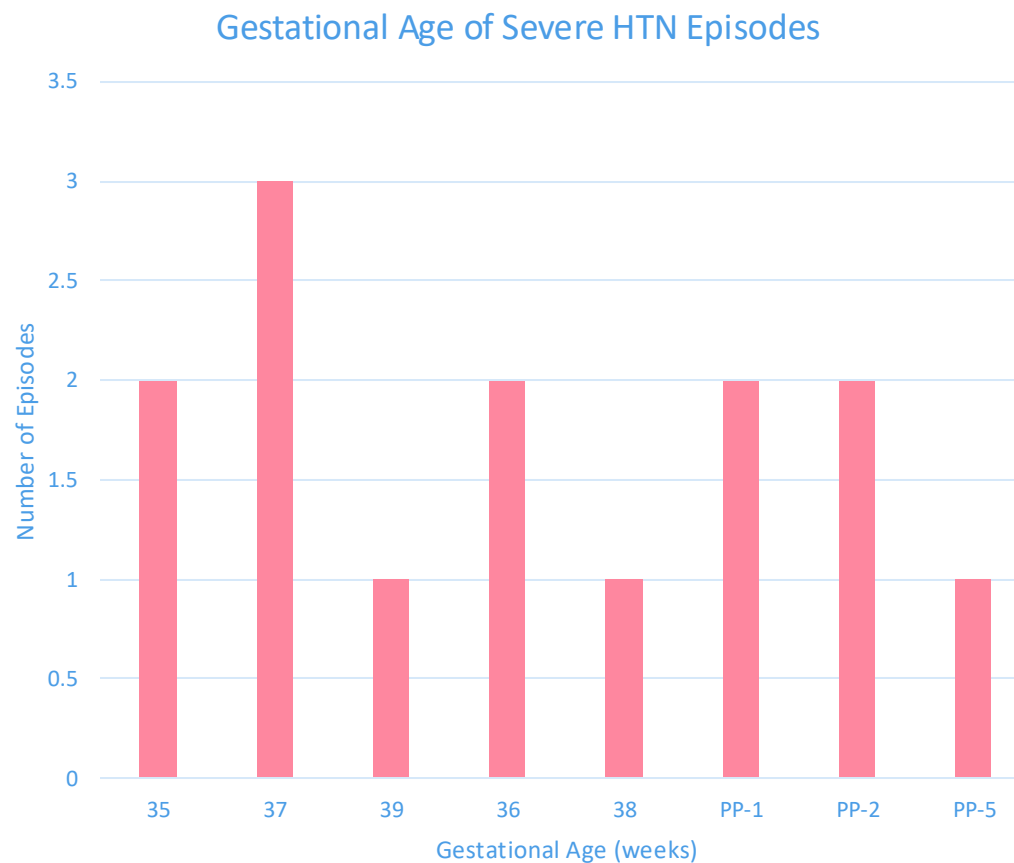


# Check-in on BP Measurement Procedures

- Any progress or drafts to report back on?
- How did the pilot with new OB patients go?
- Any major challenges preventing implementation of the policy?
  - *Ideas for overcoming those challenges?*
- Next steps – goal deadline for completion

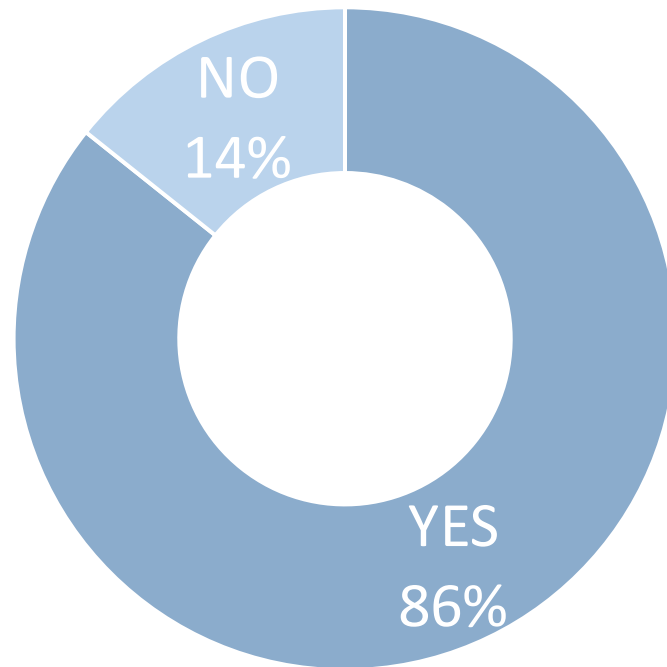
# Chart Audit Feedback - Baseline

- Time Period:
  - *April 1, 2023-March 31, 2024*
- Clinics Audited:
  - *4 out of 7 Cohort 1 ACHIEVE clinics*
- Number of Severe Hypertensive Episodes Observed: 14



# Chart Audit Feedback - Baseline

Was a repeat blood pressure taken?



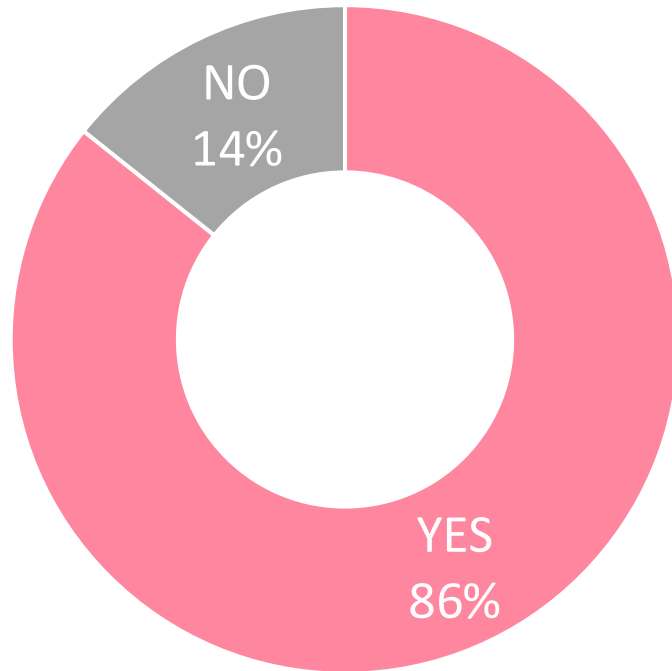
**Average Time Between 1<sup>st</sup> and 2<sup>nd</sup> BP Reading: 18 minutes**

**Longest Time: 1 hour**

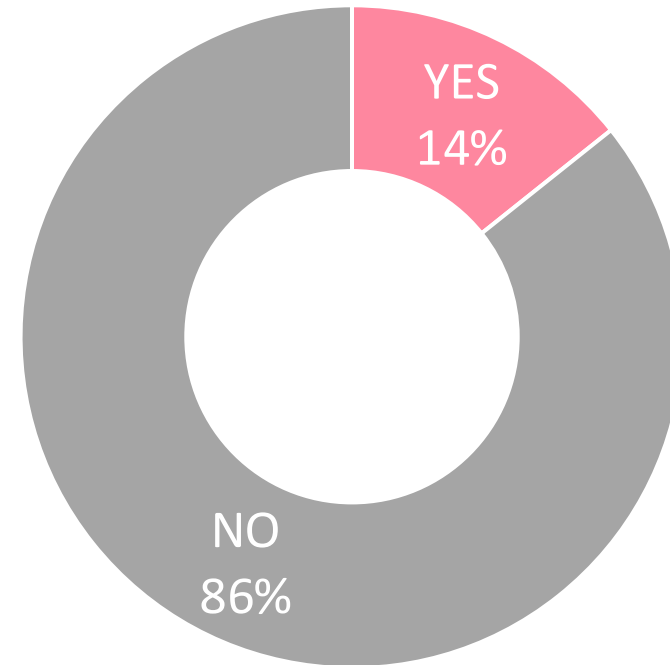
**Shortest Time: 1 minute**

# Chart Audit Feedback - Baseline

Was a symptom assessment documented?

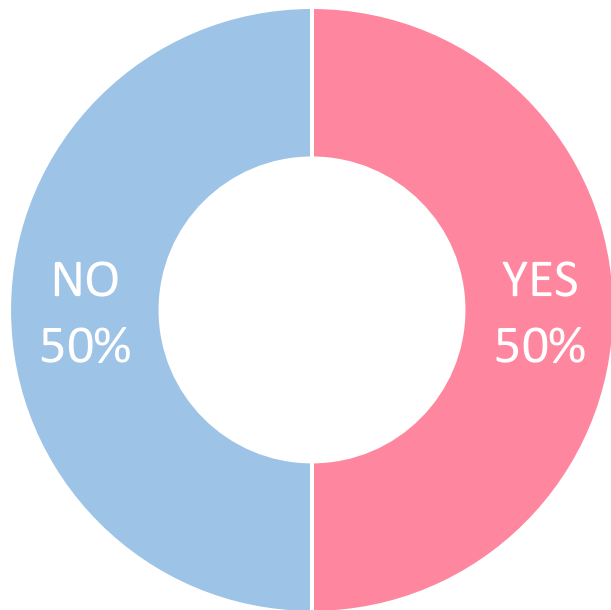


Was Nifedpine 10 mg IR given in clinic?

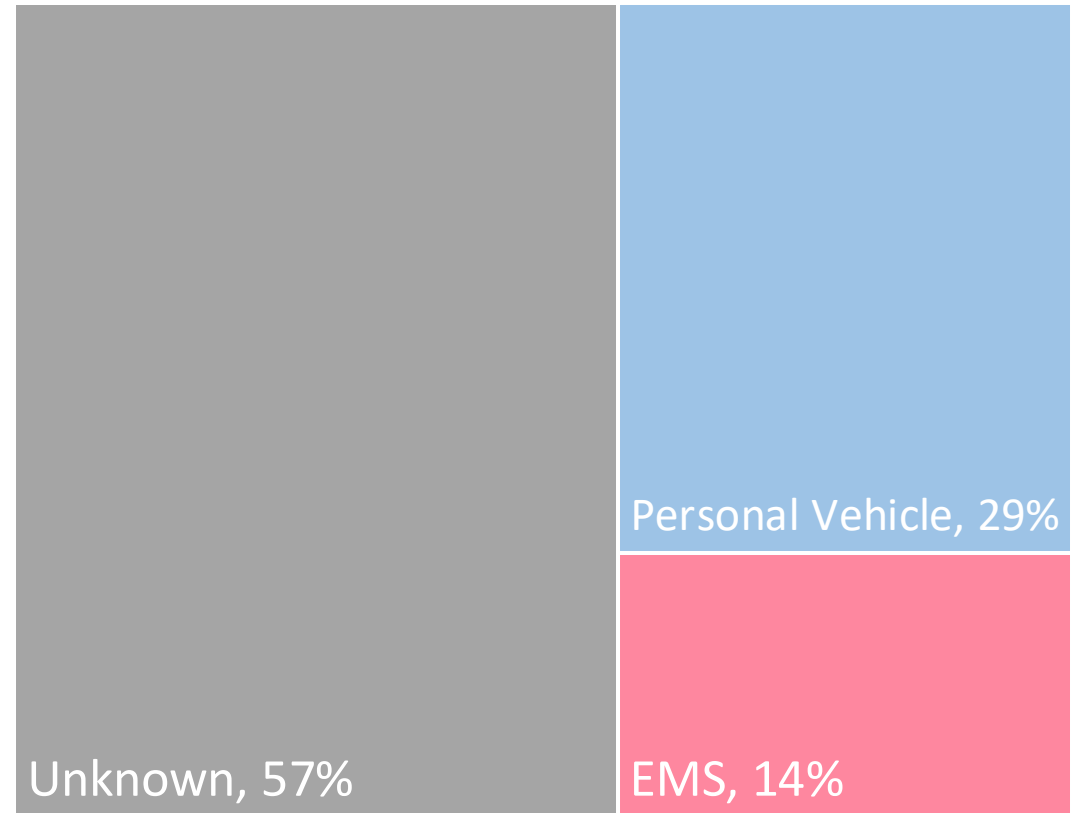


# Chart Audit Feedback - Baseline

Did the provider recommend that the patient go to the hospital?



How was the patient transported to the hospital?



# Considering the Chart Audit Feedback

- Are there any additional changes that need to be made to your algorithm?

# Next Steps for Implementation

- Who else needs to approve these drafts?
- What needs to happen to spread information to staff and other providers?
- What are some of the missing pieces that need to occur to get this into practice?
- Who will work on these steps?



# Survey – Adaptability, Feasibility, Organizational Readiness

AIM/FIM/ORIC Survey



Torpunuri, Rohit Simha

To: Smith-Janey, Shelby

Reply Reply all Forward

Tue 9/17/2024 10:28 AM

Please take this survey.

You may open the survey in your web browser by clicking the link below:

[Sample Survey Title](#)

If the link above does not work, try copying the link below into your web browser:

[https://rc1.redcap.unc.edu/surveys/?s=SAMPLE\\_LINK](https://rc1.redcap.unc.edu/surveys/?s=SAMPLE_LINK)

This link is unique to you and should not be forwarded to others.

Reply

Forward



# Working Time

Please use this extra time to work on any existing action items, protocols in draft form or ask questions as needed!

# THANK YOU!

