



Hypertension Management SASH (Support and Services at Home) - Serving Vermont

In recognition of success with chronic disease management.



Focused Intervention to Improve Hypertension Among Older Adults

BACKGROUND

Support and Services at Home (SASH) is a state-funded comprehensive program of care coordination for older adults and people with disabilities in Vermont. SASH participants are supported by a statewide network of social-service agencies and health care partners, including nonprofit housing organizations, area agencies on aging, community mental health centers, home health agencies, primary and community care teams, and regional hospitals. Participants receive individualized support at home from a SASH care coordinator and a wellness nurse, who together with these partners help 5,000 SASH participants avoid unnecessary hospitalizations and remain living at home.

According to the National Health and Nutrition Examination Survey, 70% of US adults over the age of 65 have hypertension and rates of US adults 65 and older with controlled hypertension have decreased by 4.6% between 2009 and 2020. In 2023, SASH implemented a Hypertension Management Intervention, with the goal to improve hypertension control for SASH participants.

PROJECT STAFF



Casey Doerner, BSN, RN is the Assistant Director of the SASH program. She was a SASH Wellness Nurse for 6 years in the Northeast Kingdom of Vermont prior to joining the SASH Administrative Team.



Marci Simpson, BSN, RN, is the Health Systems Educator and Wellness Nurse Lead for SASH. Marci manages grants with the Vermont Department of Health and leads the work on hypertension and diabetes management. Prior to joining the SASH administrative team in 2022, Marci was a wellness nurse in northern Vermont.

Jennifer Schollmeyer MSW - SASH data manager, no longer working for SASH

Kaileen Cruden - SASH Fellow from UVM Medical Center, fellowship ended 12/2023

APPROACH

Interventions included patient 1:1 and group education to address health literacy needs, referral to self-management workgroups, blood pressure monitoring, medication reconciliation and collaboration with primary care provider offices. Continuous improvement was targeted towards individuals with uncontrolled hypertension. Consumers were referred to chronic condition management classes through <https://www.myhealthvvt.org/>

Hypertension management protocols included:

- Regular blood pressure checks via blood pressure clinics and cuff loaners
- Sharing blood pressure results with primary care providers
- Food support, housing support, and stress management
- Medication management
- Individual health education and goal setting
- Assessed and addressed health literacy needs around hypertension

The IPRO QIN-QIO supported this project with data sources, to help identify populations and regions to focus on, as well as with examples of patient education materials, such as the IPRO QIN-QIO LINKS Hypertension Portfolio. SASH project leaders also participated in the IPRO QIN-QIO Health Related Social Needs educational webinar series.

RESULTS

Blood pressure (BP) changes of targeted SASH participants were compared to their non-targeted counterparts after 18 months of intervention. Controlled BP was defined as systolic BP (SBP)<140 and diastolic BP (DBP)<90 mmHg.

718 individuals participated in the program, resulting in an average decrease of 7.5 mm Hg SBP.

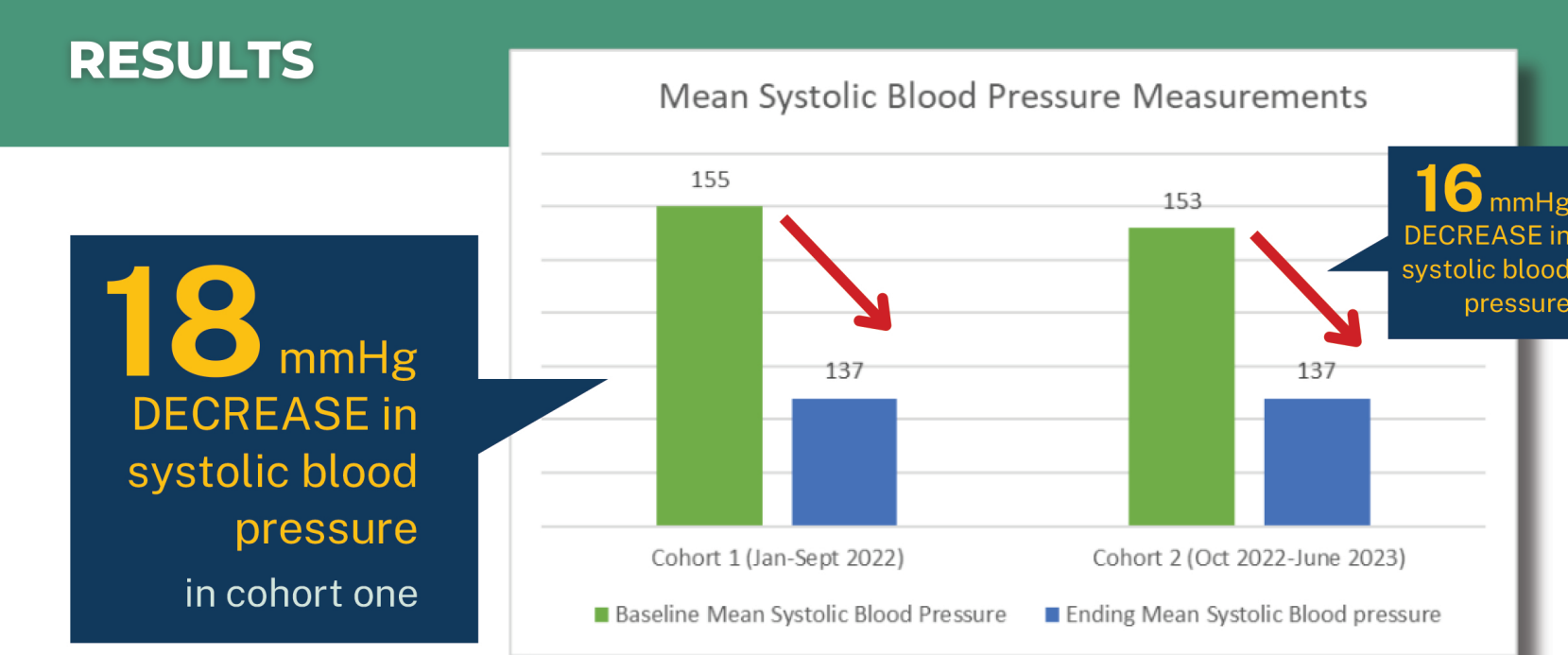


Success with Hypertension Management Among Older Adults with support from SASH®

Following a highly successful initiative promoting hypertension self-management among SASH participants funded by the Vermont Department of Health, SASH received additional 1B15 funds to continue this work in year five of the grant.

Two separate nine-month cohorts of participants with Stage 2* Hypertension were supported by SASH, from January 1, 2022, to September 30, 2022, and October 1, 2022, to June 30, 2023. In cohorts one and two respectively, Participants received one-on-one education and support in self-managing their condition. Final data obtained on those who completed the intervention groups show a consistent reduction in systolic blood pressure of 18 mmHg and 16 mmHg for cohorts one and two respectively.

*Stage 2 hypertension as defined by the American Heart Association as systolic blood pressure of 140 or higher or blood pressure diastolic of 90 or higher.



How much of an impact have the targeted blood pressure management groups made compared to their non-targeted peers?

While SASH supports participants to manage their hypertension and other chronic conditions as a standard part of the SASH program, the individuals that have been selected to be a part of the CDC/VHD intervention groups had more focused attention, more frequent visits and more follow-ups with their SASH team as a part of the project. This concentrated work with selected participants benefits all SASH participants as the nurses learn and practice the SASH hypertension management protocol.

www.SASHVT.org

CONCLUSION

By effectively lowering SBP, SASH protocols have contributed to a decreased prevalence of hypertension among its participants. This lowers the risk of developing hypertension-related complications, such as heart disease, stroke, and kidney disease.

The SASH protocols played a pivotal role in increasing health literacy among participants. By providing education, support, and resources to manage their health, SASH empowers individuals to take control of their well-being. This increased health literacy not only enhances individual health outcomes but also contributes to the overall health and resilience of communities. SASH's approach recognizes that health disparities often stem from social and economic factors. By offering support services that target these determinants, SASH contributes to a more holistic approach to health promotion and disease prevention. This comprehensive approach has the potential to reduce health inequalities and create a more equitable and healthier society.

WHY? High blood pressure harms your health and quality of life. High blood pressure (or hypertension) can cause heart disease and stroke, which are both leading causes of death.

HOW? SASH® coordinators and wellness nurses can help you find ways to take care of your blood pressure. This includes discussing lifestyle changes and working with your health care provider.

SASH coordinators and wellness nurses can help you with:

- Regular blood pressure checks via blood pressure clinics or cuff loaners
- Sharing blood pressure results with your primary care physician
- Referrals to blood pressure management classes, smoking cessation workshops, or local doctors
- Food support, housing support, and stress management
- Review of medications to make sure they're taken correctly
- Individual health education and goal setting

OLDER ADULTS WITH CONTROLLED BLOOD PRESSURE: 69%

HERE'S WHAT SASH PARTICIPANTS SAY: "I've lost 30 pounds since last year, and that's due a lot to the exercise programs they've offered here. I'm in a walking program, and we also have Tai Chi." "They have programs about stress, and it has helped. The main thing is you just learn everything to manage your stress."

HOW'S YOUR BLOOD PRESSURE?

SBP	DBP	Category
<120	<80	NORMAL
120-129	80-89	ELEVATED
130-139	80-89	STAGE 1 HYPERTENSION
>140	>90	STAGE 2 HYPERTENSION

To learn more about SASH and enroll, visit: www.SASHVT.org
SASH can help you sign up for a high blood pressure self-management class at: www.MyHealthyVT.org