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Center for Healthy Aging Ministries, Programs & Services

DEVELOPING A BLOOD PRESSURE CLINIC



The content of this module is not intended nor recommended as a substitute for medical advice, diagnosis or treatment of a disease or condition. Always consult with your personal physician or qualified health care provider regarding your health questions, individual health needs, and to obtain medical advice.

**These resources have been developed by the CHAMPS program.
They may be used or adapted for use in the context of the local church.
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Why the Church Should Become Involved in Blood Pressure Monitoring.

The Church has Influence

The problem of elevated blood pressure (hypertension) in our society is widespread and not under control! The church is a trusted place that individuals respect and attend regularly and is the ideal environment to heighten awareness of the magnitude of the problem, perform regular screenings, and offer educational programs. Supporting each individual to take responsibility to control their blood pressure is a major key to improving their health through positive change. The church has the opportunity to change the quality of and/or save lives by detecting the problem and preventing the complications associated with hypertension. Additionally there would be a potential financial savings to individuals through the intervention of the church.

The Problem is BIG:

One study done over a 22 year period indicates:

- Americans now 55 or over face a **90 percent chance of developing high blood pressure**
- If applied to the whole population, the risk of developing hypertension represents a huge public health burden, in addition to the costs to the health of those affected. **Hypertension is a primary or contributing cause of more than 10 percent of American deaths** each year.
- Complicating the picture is more bad news: of the **50 million Americans with hypertension, only 27 percent are receiving treatment that restores blood pressure to normal. Fifteen percent are not receiving any treatment, and of those who are being treated, 26 percent are not receiving adequate treatment** and still have blood pressure that is too high. Furthermore, nearly a third of patients with hypertension do not even know they have it. (Framingham , 2002)

Additional data:

- **Together, we can prevent and control a health problem that affects 1 in 3 American adults: high blood pressure.** (Fields, 2004)
- High blood pressure affects 65 million Americans. (Fields, 2004) High blood pressure is a factor in 69 percent of heart attacks in the U.S. (NHLBI, 2005)
- There are 122 million American adults who are overweight or obese and, therefore, more likely to develop high blood pressure than the population at large. (Hedley, 2004)
- **High blood pressure causes more visits to doctors than any other condition, accounting for 48 million visits per year.** (NAMCS, 2004)

- **Even a 20 percent decline (in high blood pressure visits to doctors) would provide savings of \$960 million.** (MEPS, 2001; NAMCS, 2004)
- **Potential cost savings in preventing doctor visits for high blood pressure: if we prevented 10 percent -- \$480 million; if we prevented 20 percent -- \$960 million; if we prevented 30 percent -- \$1.4 billion.** (MEPS, 2001; NAMCS, 2002; NHLBI, 2004)

What is hypertension?

Hypertension is a term for high blood pressure (BP). Current data collected by CHAMPS (Center for Healthy Aging, Ministries, Programs and Services) in church settings indicates that approximately two-thirds of persons seen have blood pressure readings outside the normal range. Of these individuals some are already under treatment, others are not; but most cannot cite a specific blood pressure that indicates they should call their physician.

Hypertension is also known as a “silent killer”. It can cause serious complications such as heart attack, heart failure, stroke, kidney damage and loss of vision. The disease either has no symptoms or only vague symptoms such as headache, ringing in the ears or fatigue—all easily overlooked or attributed to other causes.

There are four categories of blood pressure according to the JNC7 Report:

BP Code	Category	SBP mmHg / DBP mmHg
A	Normal	<120 and <80
B	Prehypertension	120-139 or 80-89
C	Hypertension, Stage 1	140-159 or 90-99
D	Hypertension, Stage 2	>160 or >100

Start-up Materials for Blood Pressure Screening Program

1. [Organizing a Blood Pressure Screening Event](#)

Purpose: This provides the steps for establishing a screening program in the church environment.

2. [General Guidelines for Performing Blood Pressure Screening](#)

Purpose: These guidelines can be used for performing blood pressure screenings on adults 18 years and older. Present copies of this to each qualified individual performing blood pressure screenings in your facility.

3. Promotional /Educational Materials:

Purpose: In order to start something new it is necessary to announce the upcoming services or events. The following bulletin inserts, articles and power point module are designed to encourage participation in the blood pressure screening program and to promote individual responsibility for making choices that can improve one's health and prevent cardiovascular disease and/or minimize its complications.

Instructions: Print bulletin inserts to encourage participation in the upcoming blood pressure screenings.

- Bulletin Inserts:

[Did You Know You Can Make a Difference in Your Health?](#)

Or

[Do You Know Your Numbers?](#)

Instructions: Print articles as a three part educational series used as bulletin inserts to promote an understanding of high blood pressure.

- Article Inserts:

[Part 1: What Do You Know About Blood Pressure](#)

[Part 2: Pre-Hypertension](#)

[Part 3: The First Step Is Up to You!](#)

- Power Point Educational Module:

[Hypertension](#)

Note: The hypertension power point educational module can be done in advance of starting a blood pressure screening program or as follow-up presentation for interested individuals

4. Blood Pressure (BP) Screening Enrollment and Monitoring Form for Adults 18 Years and Older

Purpose: This blood pressure screening form provides a consent form. It clearly states the individual assumes responsibility for follow-up with their physician if the screening indicates the blood pressure is elevated. Additionally, it provides an ongoing record of blood pressures, lifestyle changes recommended, the individual's intent to take or not take action and the follow-up done.

Instructions: Insert the church name, logo etc. on the front page of the BP monitoring form and print back to back.

- The information on the front page is completed by the participant and provides the screener with health status information and the current treatment plan. (It is suggested this information be updated periodically.)

- The back page provides a place for the screeners to maintain an on-going record of the blood pressure information.
- Individual blood pressure records should be considered confidential information and therefore, should be stored safely in a locked area for access by the professionally qualified persons doing the screenings.

5. [My Personal Health Information Form](#) (Blood Pressure Wallet Cards)

Purpose: *My personal health information* form provides the individual participants with a record of their blood pressures taken over a period of time. This should be shown to their health care provider at every visit. This record will help to establish the effectiveness of the medications, diet and exercise program being used. Additionally spaces are provided on the form for participants to maintain and update a listing of all their current medications and dosages.

Instructions: Print these two pages back to back.

Instruct participant to fold and carry this record with them to each of their health care provider visits. (It will fit nicely in their wallet.)

6. Participant Follow-Up Letters

Purpose: Follow-up letters have been designed for each of the four categories of blood pressure: normal, pre-hypertension; hypertension, stage 1 and hypertension, stage 2. The letters provide the individual with the action steps needed to promote a healthier lifestyle and/or advises follow-up with their personal health care provider.

Instructions: Print sufficient copies of each of the four letters for use at each scheduled blood pressure screening.

The appropriate letter is filled out by the screener and given to each participant when their blood pressure is taken and determined to be normal or elevated on **two or more visits after the initial screening**. (See *General Guidelines for Blood Pressure Screening*.)

Follow-Up Letters:

[Normal](#)

[Pre-Hypertension](#)

[Hypertension, Stage 1](#)

[Hypertension, Stage 2](#)

Reference:

JNC7 Report: Joint National Committee on Prevention, Detection and Evaluation of High Blood Pressure www.nhlbi.nih.gov/guidelines/hypertension/ - 26 k