

AHA NHCI Quarterly Evaluation Survey Instrument

Purpose: The **Data Reporting, Evaluation, and Monitoring (DREaM) Dashboard** is a metrics reporting tool. The purpose of the tool is to track efforts across the NHCI initiative regarding efforts to raise public awareness, strengthen health center care, and build health center-community linkages to improve blood pressure control. HRSA-Funded Health Centers (CHCs) participating in the American Heart Association's National Hypertension Control Initiative (NHCI) will provide qualitative and aggregated quantitative data to the DREaM on a quarterly basis throughout the duration of the grant. Access to the DREaM will be offered electronically and the AHA and its contracted evaluator (Summit) will provide technical assistance to all participating CHCs on how to navigate and respond to the data requested in the DREaM.

Key Definitions: In this questionnaire, the term “*health center*” refers to your HRSA-funded health center organization, which may be composed of multiple locations within a geographic area. The terms “*health center sites*” or “*sites*” refers to the individual locations of your health center.

Hypertension refers to a blood pressure reading of greater than 140/90. *Controlled hypertension* refers to a blood pressure reading of less than 140/90, consistent with UDS Measure of SMS165 V10.

Content: The content of this survey includes quantitative data on the patients served in your health center in the last quarter as well as qualitative questions about the care processes in your health center with regard to BP measurement, treatment, and lifestyle modification.

Time Commitment of Key Personnel: This questionnaire will take approximately 10 minutes to complete. Please answer all questions as clearly and accurately as possible. **Please have the same person at your health center respond to the survey each quarter.** You may need to consult with multiple people at your health center, including people who can access population-level visit and demographic data (such as Information Technology (IT) or Quality Improvement (QI) team members), and people familiar with blood pressure devices, staff training, and clinical practice within your health center (such as a clinical leader or QI team member). **Actual data is highly preferred over estimated data if your EMR has the reporting capability.**

Once you have completed all questions, please press ‘Submit’ to save and submit your responses. All responses will be sent to AHA for the purposes of evaluating the National Hypertension Control Initiative (NHCI) and helping you reach your target audiences with blood pressure information and support. Aggregated responses from all health centers will be shared to inform quality improvement activities. Individual health center responses will not be shared publicly and will be reviewed confidentially by AHA’s team to inform individualized health center support.

The same person at your health center should answer this survey each quarter.

Background

1. Choose your state. [dropdown list]
2. Choose your health center. [dropdown list]

Patient Demographics and Outcomes

SECTION HEADER: Instructions and Directions: For this section please utilize UDS exclusion criteria, which can be found at <https://ecqi.healthit.gov/ecqm/ep/2022/cms165v10>

3. How many adult patients did your health center see (via in-person or telehealth visits) for any reason **between January and March 2022** across all NHCI HRSA-funded sites? (i.e., total number of adult patients seen, according to UDS exclusion criteria) [input number]
4. How many adult patients (ages 18-85) had a visit and diagnosis of essential hypertension starting before and continuing into, the measurement period of January to March 2022? [input number]
5. How many of your adult patients (ages 18-85) had their most recent blood pressure **adequately controlled** (systolic blood pressure < 140 mmHg and diastolic blood pressure < 90 mmHg) between January and March 2022?
 - a. [Input number] (Skip to Q7)
 - b. I don't know [Proceed to Q6]
6. Between January and March 2022, what populations have you reached with materials on the importance of blood pressure screenings, self-measured blood pressure, and blood pressure management? (Select all that apply.)
 - a. Hispanic, Latino, or Spanish-speaking populations
 - b. Asian
 - c. Native Hawaiian Other Pacific Islander
 - d. Black/African American
 - e. Indian or Alaska Native
 - f. White
 - g. More than one race
 - h. Unreported or Unknown
 - i. None of these
7. What is the number of patients that you are trying to reach with SMBP support based upon the HRSA-funding expectations to "Ensure access to and support use of Bluetooth or wireless-enabled Self-Measured Blood Pressure (SMBP) devices for a majority of your patients with hypertension"? (insert #)
8. Please indicate the percentage of patients who received the following types of care at your health center between January and March 2022. [Response choices: Don't Know; None; Open Ended]
 - a. Offered an SMBP device?
 - b. Accepted an SMBP device or participation in an SMBP program?
 - c. Trained in how to use an SMBP device?
 - d. Transmitted readings from the SMBP device (via an App, portal, or platform)
 - e. Had SMBP data reviewed by the care team
 - f. Had a treatment change based upon the SMBP data (such as adding a medication)
 - g. Experienced a change in their BP as a result of a medication change
 - h. Achieved BP control
 - i. Were discharged from an SMBP program?

Measure accurately

9. Does your health center have a documented protocol or process for **blood pressure measurement** for adults aged 18 or older with hypertension?
 - a. Yes
 - b. No (skip next question)
 - c. I don't know (skip next question)

10. Does your health center monitor staff compliance with this protocol or process for blood pressure measurement as part of quality improvement activities?
 - a. Yes
 - b. No
 - c. I don't know

11. How often do clinical staff at your health center perform a repeat or confirmatory measurement if the patient's initial blood pressure is higher than 140/90 during a health center encounter?
 - a. Always
 - b. Often
 - c. Sometimes
 - d. Rarely
 - e. Never

12. What percentage of exam rooms or locations where blood pressure is measured in your health center have an infographic displayed that describes proper procedure for blood pressure measurement?
 - a. None
 - b. 1% to 25%
 - c. 26% to 50%
 - d. 51% to 75%
 - e. 76% to 100%

13. How often are staff trained on proper blood pressure techniques? (Select all that apply)
 - a. At beginning of employment, upon hire
 - b. Every 6-12 months
 - c. Every 1-2 years
 - d. Every 2 or more years
 - e. Staff are not trained on proper blood pressure techniques
 - f. I don't know

Act rapidly

14. Does your health center use a **blood pressure treatment protocol**?
 - a. Yes
 - b. No (Skip next two questions)
 - c. I don't know (Skip next two questions)

15. Does your blood pressure treatment protocol include any of the following? (Select all that apply.)
- a. Modifying treatment thresholds when using SMBP data to assess control
 - b. Adding a new medication class if not at goal
 - c. Including thiazide-type diuretic or calcium channel blockers with initial antihypertensive treatment for African American adults with hypertension (but without Heart Failure or Chronic Kidney Disease, including those with Diabetes Mellitus)
 - d. Using single-pill combination therapy
 - e. Scheduling a follow-up visit within 4 weeks if not at goal
 - f. None of the above
 - g. I don't know
16. Which of the following blood pressure-related office protocols were in place at your health center between January and March 2022? (Select all that apply.)
- a. Provider is notified if patient has high blood pressure
 - b. High blood pressures are flagged in electronic health record
 - c. None of the above
 - d. Other [entry box]
17. Do health center staff have a standard approach to identify patients with uncontrolled blood pressure (such as using an electronic health record report or population health registry)?
- a. Yes
 - b. No
 - c. I don't know
18. Do health center staff review the previous quarter's patient blood pressure control data to identify opportunities to improve processes?
- a. Yes
 - b. No
 - c. I don't know

Partner with patients

19. Which of the following does your health center consistently use when educating patients on the importance of blood pressure screenings, self-measured blood pressure, and blood pressure management? (Select all that apply.)
- a. Verbal instruction by any care team member in the patient's primary language
 - b. Printed materials in the patient's primary language
 - c. Printed materials designed for patients with low literacy levels
 - d. Printed materials with images that reflect the racial or ethnic diversity of the patient receiving the materials
 - e. Video instructions in the patient's primary language
 - f. I don't know
 - g. Other [entry box]

20. When providing patients with materials on the importance of blood pressure screenings, self-measured blood pressure, and blood pressure management, does your health center provide population-specific materials (such as culturally competent materials for recent immigrants or refugees)?
- Yes
 - No
 - I don't know
21. Between January and March 2022, which of the following actions did your health center care team members take to improve adherence to hypertension medication? (Select all that apply.)
- Provide education on use, importance, and effectiveness of medication
 - Prescribe once-daily medication when possible
 - Prescribe generic medication when possible
 - Use single-pill combination therapy when possible
 - Provide 90-day prescriptions when possible
 - Coordinate prescription refills for the same date
 - Identify and address financial barriers for patients
 - Address issues of medication complexity
 - Provide patient guidance on what to do if medication side effects occur
 - Work with pharmacy to coordinate blister packs for patients who may benefit from them
 - Educate patients with 340B pharmacy benefits on pharmacies that have lower cost medications or discounts
 - None of these methods are in place
 - Other [entry box]
22. Between January and March 2022, which of the following lifestyle changes did any care team member in your clinic recommend to patients? (Select all that apply.)
- Avoid tobacco use
 - Drink alcohol in moderation
 - Follow the DASH eating plan
 - Lose weight (if overweight)
 - Decrease sodium intake
 - Consume recommended amount of dietary potassium
 - Participate in physical activity regularly
 - Create stress strategies
 - None of these lifestyle changes
 - Other [entry box]
23. Between January and March 2022, did your health center refer patients to access community resources using a social determinants of health social navigation platform, such as Aunt Bertha/Find Help or Unite Us?
- Yes
 - No
 - No, but my health center plans on using one in the future
 - I don't know

24. Does your health center assess the following social determinants of health? [Check all that apply]
- a. Participant's housing situation
 - b. Whether participants are facing challenges meeting household utility bills
 - c. Participant's refugee status
 - d. Whether lack of transportation kept a participant from medical appointments, meetings, work, or from getting things needed for daily living
 - e. Whether a participant was experiencing symptoms of depression or other mental health issues
 - f. Whether a participant is facing challenges with access to food to every day
 - g. Whether a participant is facing challenges obtaining healthy/nutritious foods such as fruits and vegetables
 - h. Other social determinants of health

Self-measured blood pressure (SMBP)

25. Does your health center have a self-measured blood pressure (SMBP) program?
- a. Yes
 - b. No
 - c. I don't know
26. Which of the following best describes the current stage of your health center's SMBP program?
- a. Planning: defining goals, clinical processes, roles, and technology options
 - b. Preparing: adopting new policies and procedures, training staff, acquiring equipment, and integrating technology
 - c. Piloting: testing processes with a small group of 50 or fewer patients
 - d. Scaling: expanding recruitment a large group of more than 50 patients and/or expanding recruitment to additional sites
 - e. Evaluating: measuring care processes, patient engagement, and the impact of SMBP program on BP control rates
 - f. Other [entry box]
27. What percent of patients with hypertension at your health center are currently participating in an SMBP program?
- a. 0% (None)
 - b. 1% to 25%
 - c. 26% to 50%
 - d. 51% to 75%
 - e. 76% to 100%
 - f. I don't know
28. Does your health center use a systematic approach (such as a **patient onboarding protocol**) to train patients in SMBP?
- a. Yes
 - b. No
 - c. I don't know

29. Does your office workflow for SMBP train staff on correct use of SMBP techniques?
- Yes
 - No
 - I don't know
30. Which competencies are included in the training on SMBP techniques? (Select all that apply.)
- Correct positioning
 - Correct cuff size for arm size
 - Use of clinically validated devices for upper arm
 - How to record SMBP measurements
 - How to track and relay blood pressure readings to the health center (via manual or electronic means)
 - When to record SMBP measurement (2x in the am + 2x in the pm x 307 days)
 - Return demonstration or 'teach back' approach
 - None of these
 - Other [entry box]
31. For which reasons did your health center recommend SMBP monitoring to patients between January and March 2022? (Select all that apply)
- Confirm a hypertension diagnosis
 - Rule out white coat or masked hypertension
 - Assist in adding or adjusting medications until BP goal is reached
 - Improve patient adherence to treatment
 - Monitor impact of lifestyle changes on BP
 - None of the above
 - Other [entry box]
32. In which of the following ways is SMBP data integrated into your health center?
- Complete: SMBP data transferred all the way from the BP device to the EMR
 - Partial: SMBP data transferred from the BP device to an app, portal, or Remote Patient Monitoring (RPM) platform, but not all the way to the EMR
 - Minimal: SMBP data captured on the device and downloaded or reviewed during an encounter (and is not transferred to an App, portal, RPM platform, or EMR)
 - None: No data captured on the device
 - I don't know

Closing

33. How many people did you consult in order to complete the questions in this survey? (insert #)
34. Please indicate all the types of health center personnel consulted to answer these survey questions. "If a single individual holds more than one of the following titles, please select their *primary* role. Do not select more than one option for a single individual."
- Leadership
 - Administrative personnel
 - IT or EHR personnel
 - Quality Improvement personnel
 - Clinical staff (MD, DO, NP, PA, PharmD, RN)
 - Other

Thank you for participating in this survey.