

**Implementing NICE guidance CG127 in
primary care to support the high blood
pressure strategy: key findings of a
Ketso workshop**

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Background

To inform the implementation of NICE guideline CG127 in supporting the Champs Public Health Collaborative in Cheshire and Merseyside high blood pressure strategy in primary care, a workshop was held to further explore the challenges, priorities and potential solutions of putting the NICE guideline on hypertension in adults: diagnosis and management (CG127) into practice. The workshop was a follow up to an online survey conducted in September 2016.

A total of 10 primary care staff from beacon practices participated in an hour and a half session. Participants developed and discussed 127 ideas in relation to resources, education or training, patient aspects and targets.

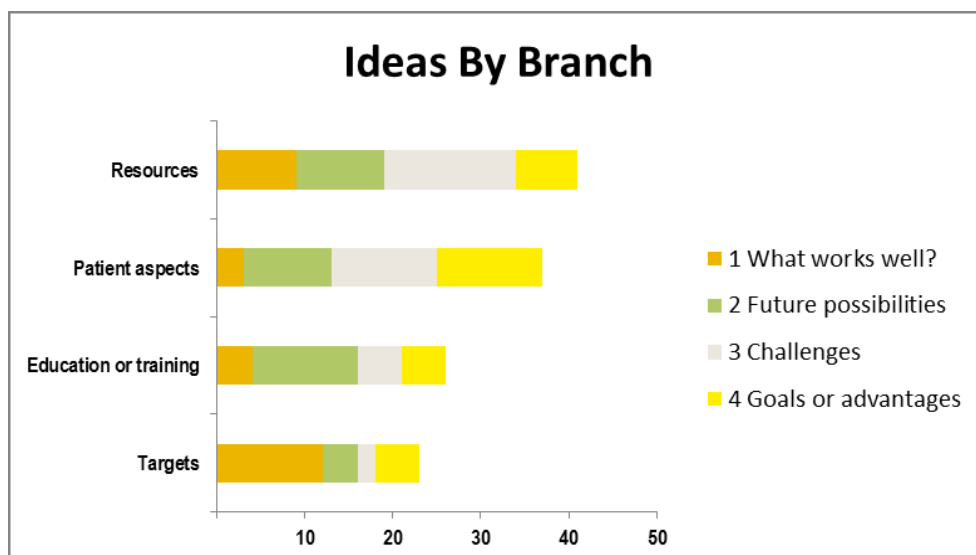
This report describes the key findings of the workshop held on the 8 December 2016 in Birkenhead, using the 'Ketso' technique. 'Ketso' is a hands-on kit for creative engagement, and it aims to ensure each participant is able to contribute. Using coloured leaves to capture everyone's ideas, participants can then built up a visual representation of their discussion on the implementation of CG127.

Results

From beacon practices, 10 primary care staff, consisting of 5 general practitioners, 4 nurses and 1 public health consultant, participated in the Ketso workshop.

A total of 127 ideas were generated and entered into and analysed using the Ketso analysis tool. These ideas were grouped into 4 themes, namely: resources, patient aspects, education or training, and targets (Figure 1). They are not exclusively distinguished but related.

Figure 1 ideas by themes



Resources

Participants developed 41 ideas around the theme 'resources', identifying the key advantages of implementing CG127 in supporting the strategy, such as the potential cost effectiveness in the long-term and the benefits of adhering to evidence-based practice. Despite that, participants specifically emphasised the lack of resources with regards to staffing levels, clinical time and 24 hour blood pressure monitoring equipment as a challenge. To overcome such challenges, participants focused on the need for better use of the existing staff in more innovative ways and effective use of technology. Participants also stressed the importance of collaborative work across partners, such as with pharmacy, and providing variable opening times for people to access services.

Education or training

There were 26 ideas generated relating to 'education or training'. Participants highlighted the significance of engagement with and education of health care professionals to increase their clinical knowledge of the prevention, early detection and management of high blood pressure. This was cited as being particularly relevant for healthcare assistants, nursing staff and other non-medical professionals. Participants also discussed that professional education and motivation, such as incentives, could potentially change their attitude of being apathy in terms of targeting patients and diagnosis. To do this, participants felt that it was crucial to have protected time for attending training.

Patient aspects

Within the 'patient aspects' theme, 37 ideas were developed and discussed amongst participants. They felt that putting CG127 into practice would enable people to receive consistent care, reduce risk of stroke and target organ damage, and ultimately influence a person's long-term gain in health. However, participants mentioned the lack of patient engagement and denial attitude towards taking medication as well as side effects of certain drugs. To overcome such challenges, participants emphasised the importance of patient education, engagement and empowerment via various channels and campaigns, such as 'know your numbers campaign', healthy hub within GP surgeries, and evidence-based education.

Targets

Participants generated 23 ideas around the 'target' theme. They discussed the aspects of CG127 that worked well in primary care, and these aspects were in relation to medication review, annual review of care to monitor blood pressure, and risk assessment, such as assessment of the lifetime cardiovascular risk of younger people (aged under 40 years) with hypertension, and assessment of potential target organ damage. Participants then further focused on the

importance of CG127 in providing clear and consistent standards and the need for primary care providers working towards the same goal in order to achieve the targets. To measure the performance, participants drew attention to the requirement of linking with QOF and sharing audit template.

Priorities

Once participants had developed and discussed their ideas in terms of the above four themes, they then identified priorities. Participants agreed that the important goals of putting CG127 into practice in supporting the strategy were:

- Best use of the existing resources and focusing on cost effectiveness;
- Patient empowerment for de-medicalising and reducing target organ disease; and
- Clear guidance and standards with a unified and consistent approach to improve services and to enable auditing the performance of implementing CG127.

To achieve the goals, the key challenges were highlighted by participants as follows:

- Lack of resources in relation to staffing levels, clinical time and 24 hour blood pressure monitoring equipment;
- Patients' denial attitude and apathy due to the lack of effective engagement; and
- Clinician's apathy as to targeting patients and diagnosis.

Based on the identified challenges, participants also underscored what they thought were effective solutions to potentially overcome the challenges of implementation:

- More investment and education in healthcare assistants and nursing staff so that the existing resources could be better used in an innovative way;
- Better use of resources from third sectors;
- Patient education and empowerment using a variety of methods, such as insight-based educational messages, educational website for patients, reaching working population via a number of channels, such as television and apps; and
- Feedback to staff in terms of the progress of implementing CG127 and the strategy to educate and motivate them.

Conclusion

The findings from the workshop supplement the outcomes of the online survey, but more importantly, the outcomes specifically highlight the priorities as to the goals, challenges and potential solutions of implementing CG127 in supporting the blood pressure strategy in primary care. The findings of the workshop particularly indicate the significance of 'collaborative working' across services to deliver the strategy and 'patient engagement' for beacon practices to take into consideration. These points are supported by top 3 priorities underlined by participants as:

- More education for healthcare assistants and nursing staff so that the existing resources could be better used in an innovative way;
- Patient education and empowerment for healthy lifestyles and self-care, such as home blood pressure monitoring; and
- Clear guidance to standardise the process and to unify the approach in order to improve services and enable auditing the performance of implementing CG127.

The findings offer important practical implications for putting CG127 into practice to support the implementation of the strategy so that the communities can be enabled to have the best possible blood pressure management.