Evaluation of Hypertension Knowledge to Improve Hypertension Self-Management Education in Primary Care Advanced Nursing Practice
Marietta P. Olivar-Lomboy, MSN, ANP-C, DNP, Georgia Baptist College of Nursing of Mercer University

Introduction
Facility HTN Controlled (BP <140/90mmhg) = 49% (6/2014), HTN Goal = 75% or higher
Lack of knowledge on hypertension was noted to be a major barrier to long-term blood pressure control. Assessment of the patient’s basic knowledge on hypertension and lifestyle management aids tailoring hypertension education according to the needs of the patients and the practice.

Challenges to HTN education:
• Busy practice, time constraints
• Lack of HTN protocol
• Limited resources
• Electronic Health Record/IT support
• CMS Quality Initiatives/ (BP Control) with financial incentives /sanctions
• Patient case mix

Purpose
To integrate and evaluate the Hypertension Evaluation and Lifestyle Management (HELM) questionnaire in primary care practice as a tool to tailor hypertension education.

The HELM Questionnaire
14 items across three domains: general hypertension knowledge, lifestyle, and medication management, and measurement and treatment goals. HELM provides a valid measure of the knowledge required for patients to take an active role in the chronic disease management of hypertension (Schapira et al, 2013).

Methods
Setting: A rural primary care clinic in the Southeastern U.S.
Participants: Thirty patients were recruited throughout the project, 5 in the initial phase and 25 in the second phase.
Procedure:
Preliminary processes - EMR integration of the HELM questionnaire, and staff education.
Intervention - participants completed the HELM, received targeted hypertension education, and evaluated satisfaction with the HELM and the education process.

Results
<table>
<thead>
<tr>
<th>CRITERIA</th>
<th>CLINICAL QUESTIONS</th>
<th>RESULTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADAPTABILITY</td>
<td>1. Was the HELM questionnaire easy to understand?</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>2. How long did it take to incorporate the HELM questionnaire in the current EHR?</td>
<td>90% in 15 min or less</td>
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<td></td>
<td>3. Can patients and staff complete the HELM in a routine visit?</td>
<td>Yes</td>
</tr>
<tr>
<td>UTILITY</td>
<td>1. Did the HELM questionnaire evaluate HTN knowledge?</td>
<td>Yes</td>
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<tr>
<td></td>
<td>2. Did it provide a substantial result for providers to target patient education on hypertension?</td>
<td>Yes</td>
</tr>
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<td></td>
<td>3. Did the staff and patients find it useful and practical?</td>
<td>Yes</td>
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<tr>
<td>FEASIBILITY</td>
<td>1. What is the overall cost of the project?</td>
<td>&lt;$500.00</td>
</tr>
<tr>
<td></td>
<td>2. Can the HELM questionnaire and patient education be incorporated in current workflow?</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>3. Did the HELM questionnaire reflect organizational goals of improved education in Hypertension management?</td>
<td>Yes</td>
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Discussion
Findings supported that it was feasible to integrate an innovative strategy like the hypertension knowledge questionnaire to facilitate targeted education in primary care based on the needs of the patients and the organization.

Conclusion
Implementation of the HELM Questionnaire as a tool to assess HTN knowledge and structure HTN education can be done in other settings with an in-depth analysis of:
• Organizational structure
• Resources
• Patient flow
• Stakeholder readiness
• Clinical quality goals

References

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Implementation Framework
The Replicating Effective Programs (REP) framework for healthcare interventions process (Kilbourne, 2007). This provides a critical link in bridging research and practice, namely packaging interventions (HELM) so that they can be adapted to primary care practices to community and other care settings.

CLINICAL QUESTIONS
1. Was the HELM questionnaire easy to understand?
2. How long did it take to incorporate the HELM questionnaire in the current EHR?
3. Can patients and staff complete the HELM in a routine visit?

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