

2022 Family Care and Partnership

Clinical Performance Improvement Project/Chronic Care Improvement Project

REDUCE THE BLOOD PRESSURE VALUES OF MY CHOICE WISCONSIN FAMILY CARE AND PARTNERSHIP MEMBERS WITH DIAGNOSES OF HYPERTENSION AND DIABETES THROUGH USE OF A SELF-MANAGEMENT TOOL (YEAR I)

Project plan to reduce blood pressure values:

- ✓ *Increase hypertension awareness through targeted education provided by FC and FCP RNs*
- ✓ *Utilize information through education on MCW Hypertension Clinical Practice Guideline*
- ✓ *Utilize a blood pressure self-management tool for monitoring of blood pressure and zones to identify concerns early*
- ✓ *Encourage member empowerment through health monitoring and provider relationship*

Hypertension and diabetes are serious chronic conditions that if left uncontrolled, can lead to further medical complications and health risks, including death.

High blood pressure, or hypertension, can develop gradually over time, with no symptoms or warning signs, causing damage to the body all while undetected to the individual.

Hypertension often occurs alongside diabetes, sharing underlying causes and risks. Together they contribute to worsening each other's symptoms.



Each year we choose a project to improve the lives of our members and the care they receive. These projects are approved by the WI Department of Health Services and reviewed by a third-party external quality organization. Results are reported to the State of Wisconsin. This project will run for two years; 2022-2023