

# VIRGINIA CONGREGATIONS **Blood Pressure**



APRIL 2016

**VDH** VIRGINIA  
DEPARTMENT  
OF HEALTH

## MINISTRY EVENT **Planning Guide**



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Note: The back pocket contains blank, ready-to-copy forms for your convenience.

1. Sample promotional letter/ads
2. Blood Pressure Ministry Event Support Request Form
3. Table Set Up
4. Blood Pressure Screening Tracking Forms (2)
5. Blood Pressure Wallet Card (two-sided)
6. Referral Form
7. Infographic Poster

*heal your heart*



**Thank You**



## **For Hosting a Blood Pressure Ministry Event**

By joining the **Million Hearts®** program, your congregation will work towards reducing the impact of the two leading causes of death in the United States: heart disease and stroke. The program's goal is to prevent one million heart attacks and strokes by 2017. By holding a Blood Pressure Screening Ministry Event, your congregation can help save lives.

This guide will provide guidance and education to members of a congregation participating in the **Million Hearts®** program. It will aid the congregation's efforts in planning a successful blood pressure screening event and improving blood pressure measurement accuracy.





## **I. Blood Pressure Health Ministry Champion: Their Role and Responsibility**

**Prior to planning a blood pressure screening event, identify a blood pressure Health Ministry Champion. They will be responsible for the following:**

1. Establishing and/or strengthening relationships with community resources (e.g., healthcare providers, community pharmacists, community health workers, community programs, such as the YMCA, etc.).
2. Recruiting general volunteers, medical volunteers, and interpreters/translators, if needed.
3. Establishing screening dates and location.
4. Finding a screening area that is quiet, allows for privacy and has sufficient space for the screening activities.
5. Promoting screening dates in church newsletters, bulletins, etc.
6. Reviewing equipment needs and ordering necessary equipment.
7. Reviewing blood pressure guidelines.
8. Providing healthy refreshments and snacks (not appropriate if you are conducting diabetes screenings).
9. Gathering educational materials.
10. Collaborating with the local health department to obtain educational materials and/or arrange workshops on hypertension and other chronic disease prevention information.
11. Offering additional health screenings for prediabetes, diabetes, asthma, body mass index, and breast cancer.
12. Sending monthly updates and pictures of events that will be posted on the Million Hearts website to Augustine Doe at [Augustine.doe@vdh.virginia.gov](mailto:Augustine.doe@vdh.virginia.gov).

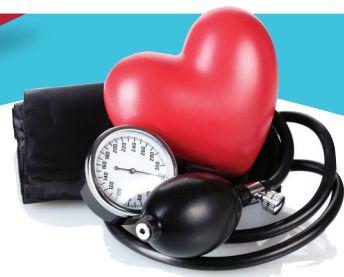


## II. Step-By-Step Guide for the Health Ministry Champion

### Before the Screening

1. Contact Augustine Doe, Virginia Congregations for Million Hearts® Program Manager at 804-864-7436 or by email at Augustine.Doe@vdh.virginia.gov to let him know you are planning on holding a blood pressure screening event.
2. Decide when and how often you will provide blood pressure screenings (e.g., congregations may provide screenings once a month following services). If this is a one-time event, it is recommended that you plan the event on a weekend afternoon.
3. Decide where you will hold the screenings at the congregation. It is recommended that screenings be held in a quiet location (e.g., an office, common room, or a neighboring building, if more space is needed).
4. Recruit three to four medical volunteers. Ask if doctors, registered nurses, emergency medical technicians, nursing assistants or medical students in your church can volunteer to help. If you cannot recruit volunteers within your congregation, check the local hospitals, nursing homes, colleges, pharmacies, fire rescue departments or health care facilities for volunteers. Recruit volunteers at least 30 days before the event. Use the Blood Pressure Ministry Event Support Request Form to recruit volunteers (see Appendix).
5. Check if you will need to purchase or borrow blood pressure cuffs (sphygmomanometers) or stethoscopes.
6. Identify local healthcare practices. Contact identified practices to promote the upcoming blood pressure screening event, and ask if they are willing to accept referrals for individuals with elevated blood pressures. Develop a referral list that includes the contact information (name, address, phone number) of local healthcare providers. You will need this information if you have to complete a Referral Form (see Appendix).
7. Advertise your event. Ask permission to post flyers at local businesses. It may be helpful to have your flyers printed in Spanish as well (see Appendix).

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## Day of the Screening

1. Set up tables and chairs on the screening day (see Appendix).
2. Provide educational material that explains high blood pressure, the complications if left untreated, and steps individuals can take to control their blood pressure.
3. Take and record all blood pressure measures on the Blood Pressure Screening Tracking Form (see Appendix or download from <http://www.vdh.virginia.gov/omhhe/VA100congregations.htm>).
  - a. Write the individual's blood pressure reading on the Million Hearts® Blood Pressure Wallet Card (see Appendix or download from <http://www.vdh.virginia.gov/omhhe/VA100congregations.htm>).
  - b. Provide the card to the individual and instruct them to bring it to their next screening or medical appointment.
4. Refer individuals with an elevated blood pressure reading (Refer to Section V - When to Refer)
  - a. Individuals with high blood pressure should receive the Heart 360 mobile app that helps determine and reduce heart attack and stroke risk – download app at:  
<https://itunes.apple.com/us/app/heart-health-mobile/id581978737?mt=8>

## After the Screening

1. Send the completed Blood Pressure Screening Tracking Form to Augustine Doe at 804-864-7440 (fax). Keep a duplicate of the form for the church file and store in a secure, locked place.
2. Provide follow-up to individuals with an elevated blood pressure reading if necessary.



### **III. Screening and Monitoring Guidelines**

#### **Blood Pressure Monitoring**

All screeners participating in the event must be competent in blood pressure monitoring and trained in the auscultatory-palpatory method of blood pressure assessment. At least one licensed health professional should be present to oversee the screening and provide education as needed. Licensed health professionals include physicians, registered nurses, pharmacists, nurse practitioners, physician assistants, and licensed practical nurses. Others who may assist in screening include emergency medical technicians and paramedics provided they have been trained in the auscultatory-palpatory method of blood pressure assessment.

#### **Blood Pressure Readings Reviews**

After a blood pressure measurement is obtained, direct the individual to a licensed health professional to review the readings. It is the responsibility of a licensed health professional to review all abnormal or elevated blood pressure readings and provide feedback, including necessary referrals.

#### **Recommended Equipment**

1. BP cuffs – standard adult, large adult, latex free cuff
2. Stethoscope
3. Tables/chair
4. Documentation forms – Tracking Form, Blood Pressure Wallet Card, Referral Form
5. Educational materials
6. 5% bleach wipe/solution or 70% isopropyl alcohol
7. Alcohol wipes



## Privacy and Confidentiality

Screenings should be held in an office or other quiet place. All information shared with the health team must remain confidential. Prior to the congregation's event, plans for ensuring privacy and confidentiality should be discussed with the Virginia Congregations for Million Hearts® Program Manager: **Augustine Doe** (804-864-7436; email [Augustine.Doe@vdh.virginia.gov](mailto:Augustine.Doe@vdh.virginia.gov))

## Cleaning of Blood Pressure Equipment

1. All equipment must be cleaned after each screening or more frequently, if needed, using the following guidelines:
2. Stethoscopes – use 70% isopropyl alcohol or alcohol wipes to clean all parts
3. Blood pressure cuffs
  - a. Wipe the aneroid gauge, inflation bulb, and valve with 70% isopropyl alcohol wipe/solution.
  - b. Wipe the blood pressure cuff with either 5% bleach or 70% isopropyl alcohol wipe/solution.

## Calibration

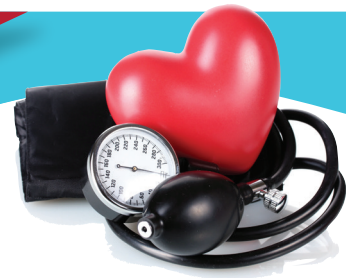
Ensure that the blood pressure screening equipment has been calibrated prior to the event, according to manufacturer's guidelines.

## IV. Blood Pressure Measurement Method

1. Individuals should be seated quietly for at least 5 minutes in a chair (rather than on an exam table), with feet flat on floor and entire arm supported on table with brachial artery at heart level.
2. Caffeine, exercise, and smoking should be avoided for at least 30 minutes prior to measurement.
3. An appropriately sized cuff (cuff bladder encircling at least 80 percent of arm) should be used to ensure accuracy. The width of the bladder should be 20% greater than the diameter of the arm.



## heal your heart



4. Expose the arm for about five inches above the elbow. Remove any restrictive clothing.
  5. Apply cuff snugly to bare upper arm. Place center rubber of cuff directly over brachial artery and wrap cuff firmly and smoothly around arm, one inch above bend of elbow (antecubital space).
  6. Palpate to feel for radial pulse.
  7. Inflate manometer while palpating radial pulse. Note level on the gauge at which radial pulse disappears. Release air from cuff rapidly.
  8. Wait 10 seconds and then palpate brachial pulse. Place ear tips of stethoscope in ears with tips facing forward. Place stethoscope over brachial artery not touching the cuff.
  9. Rapidly inflate the cuff to a level 20 – 30 mmHg above the point where the radial pulse disappeared. While slowly releasing the air in the cuff, listen for the Korotkoff sounds. The cuff deflation rate for auscultatory readings should be 2 mmHg per second.
  10. Systolic BP is the point at which the first of two or more Korotkoff sounds is heard, and the disappearance of Korotkoff sound is used to define diastolic blood pressure (DBP).
  11. At least two BP measurements should be taken and the average recorded.
- Reference: National Heart, Blood, and Lung Institute (NHBLI), 2004, p.18



## V. Blood Pressure Readings:

Several factors can influence the accuracy of a blood pressure measurement, including caffeine intake, exercise, smoking and point of measurement factors. For this reason, caffeine, exercise, and smoking should be avoided for at least 30 minutes prior to measurement.

**Table 1.** Point of Measurement Factors Influencing Accuracy of Blood Pressure.

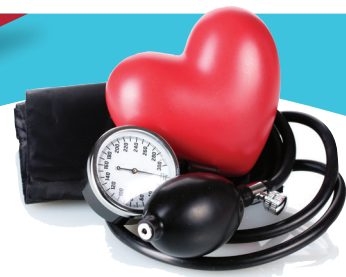
Factor	False High Reading	False Low Reading
Cuff size	Too narrow or small	Too wide or large
Cuff wrapping	Too loosely on arm	
Cuff deflation	Cuff not deflated between readings	Cuff deflated too rapidly to identify Korotkoff sounds
Arm placement	Below heart	Above heart
Positioning	Back unsupported/legs crossed	

Source: WELS Nurses Association - Blood Pressure Ministry Guidelines, 2004.

**Table 2.** Blood Pressure Measurement Classifications.

Hypertension Classifications	Systolic Blood Pressure (SBP) mm Hg	Diastolic Blood Pressure (DBP) mm Hg
Normal	Less than 120	Less than 80
Pre-hypertension	120-139	80-89
Stage 1 hypertension	140-159	90-99
Stage 2 hypertension	160 or Greater	100 or Greater

Source: National Heart, Blood, and Lung Institute (NHLBI), 2004, p.12



## VI. When to REFER (See Table 2 on page 9)

**Prehypertension** - advise client to recheck blood pressure within 1 year. Provide advice and resources about lifestyle modifications. Tools and resources can be downloaded and printed from the Million Hearts® website: (<http://millionhearts.hhs.gov/learn-prevent/index.html>).

**Stage 1 Hypertension, High Blood Pressure** - if an individual's blood pressure reading falls within the Stage 1 Hypertension classification, refer him/her to their healthcare provider for a second blood pressure reading. For those who do not have a healthcare provider, complete and provide the Referral Form to the individual.

- Within one week, the Health Ministry Champion should follow up with the individual to ensure s/he understood the recommendations and has an appointment with a healthcare provider within two months of the initial blood pressure measurement.
- Provide advice and resources about lifestyle modifications. Tools and resources can be downloaded and printed from the Million Hearts® website: (<http://millionhearts.hhs.gov/learn-prevent/index.html>).

**Stage 2 Hypertension, Very High Blood Pressure** - refer the individual to their healthcare provider for a second blood pressure reading. For those who do not have a healthcare provider, complete and provide the Referral Form to the individual.

- Within one week, the Health Ministry Champion should follow up with the person to ensure s/he understood the recommendations and has an appointment with a healthcare provider within one month of the initial blood pressure measurement.
- Provide advice and resources about lifestyle modifications. Tools and resources can be downloaded and printed from the Million Hearts® website: (<http://millionhearts.hhs.gov/learn-prevent/index.html>).

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## Dangerously High ( $\geq 180/100$ )

- Individual has no symptoms - refer the individual to their healthcare provider for a second blood pressure reading. For those who do not have a healthcare provider, complete and provide the Referral Form to the individual.
- Within several days, the Health Ministry Champion should follow up with the individual to ensure s/he understood the recommendations and is connected to a healthcare provider.
- Individual has symptoms, such as shortness of breath, altered mental status, dizziness, blurred vision, or headache – follow these steps:
  - ☒ Ask the individual to sit down and rest for 5 minutes
  - ☒ Repeat the blood pressure reading after 5 minutes of resting
  - ☒ If blood pressure reading is still dangerously high and individual is symptomatic, either the nurse or Health Ministry Champion should call 911 and arrange transport to the emergency room
  - ☒ The nurse should monitor and remain with the individual until transportation to the emergency room has arrived

## VII. Resources

### For volunteer support and other resources, contact:

- **Medical Reserve Corps** (MRC) website:  
<http://www.vdh.virginia.gov/mrc/contact.htm>
- **Local Health District** (some Health Districts may have volunteer Community Health Workers that can assist with your event)





## VII. Resources (continued)

### For other tools and resources:

- **Million Hearts® website** - Tools and Resources:  
<http://millionhearts.hhs.gov/learn-prevent/index.html>
- **Illinois Blood Pressure Ministry Toolkit.** <http://www.astho.org/Illinois-Blood-Pressure-Ministry-Guidelines-for-Screening-and-Measurement/>
- **National Heart, Blood, and Lung Institute** (NHBLI), 2004, p. 12,18.  
<http://www.nhlbi.nih.gov/files/docs/guidelines/jnc7full.pdf>
- **Virginia Congregations for Million Hearts® Initiative**,  
Virginia Department of Health, 2015. <http://www.vdh.virginia.gov/omhhe/VA100congregations.htm>
- **WELS Nurses Association** - Blood Pressure Ministry Guidelines, 2004.  
<http://www.welsnurses.net/home/>

## VIII. Appendix

**Note: The back pocket contains blank, ready-to-copy forms for your convenience.**

1. Sample promotional letter/ads
2. Blood Pressure Ministry Event Support Request Form
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7. Infographic poster for display

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## 1. Sample Promotional Letters to Congregation Members

Dear Member,

You and your family are important partners in your health care. By working together with your health care ministry, you can learn how to best manage your high blood pressure.

Managing your blood pressure includes:

- Eating low-sodium foods
- Balancing physical activity and rest
- Taking your medications as prescribed
- Educating yourself about your health
- Knowing when your blood pressure is too high and who to call

Congratulations on taking this important step toward becoming an advocate for your health!

Sincerely,

(The Name of Your Congregation) Health Care Team

### Sample Ad for Website:

Social Media Post

**Blood Pressure Control**  
TRANSLATES TO **More Lives Saved**  
bp control is why

### Come to Our Virginia Congregation Blood Pressure Ministry Event

Learn how to best manage your high blood pressure.

**Date:**            **Time:**

**Place:**

### Sample Post for Congregation Bulletin:

#### Come to Our Virginia Congregation Blood Pressure Ministry Event

Take a step toward having a healthier life and learn how to best manage your high blood pressure. It could save your life.

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Place: \_\_\_\_\_

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## 2. Blood Pressure Ministry Event Support Request Form

Our congregation, \_\_\_\_\_  
is holding a community Blood Pressure Ministry Event. Please join us to help  
reduce heart disease and stroke and work towards a healthier community.

Event Date: \_\_\_\_\_ Time: \_\_\_\_\_

Location of the Event: \_\_\_\_\_

To support our upcoming event, we are requesting assistance in the  
following areas:

**Please complete and return this form 30 days in advance of the scheduled event.**

\_\_\_\_\_  
Healthcare Professional: (Physician, Nurse, Pharmacist, Emergency Medical Technician, etc.)

Name of Volunteer(s):	Email Address	Phone

**Fax, mail or email to:**

**Virginia Congregations Blood Pressure Ministry Event Contact:**

Name: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

Address: \_\_\_\_\_

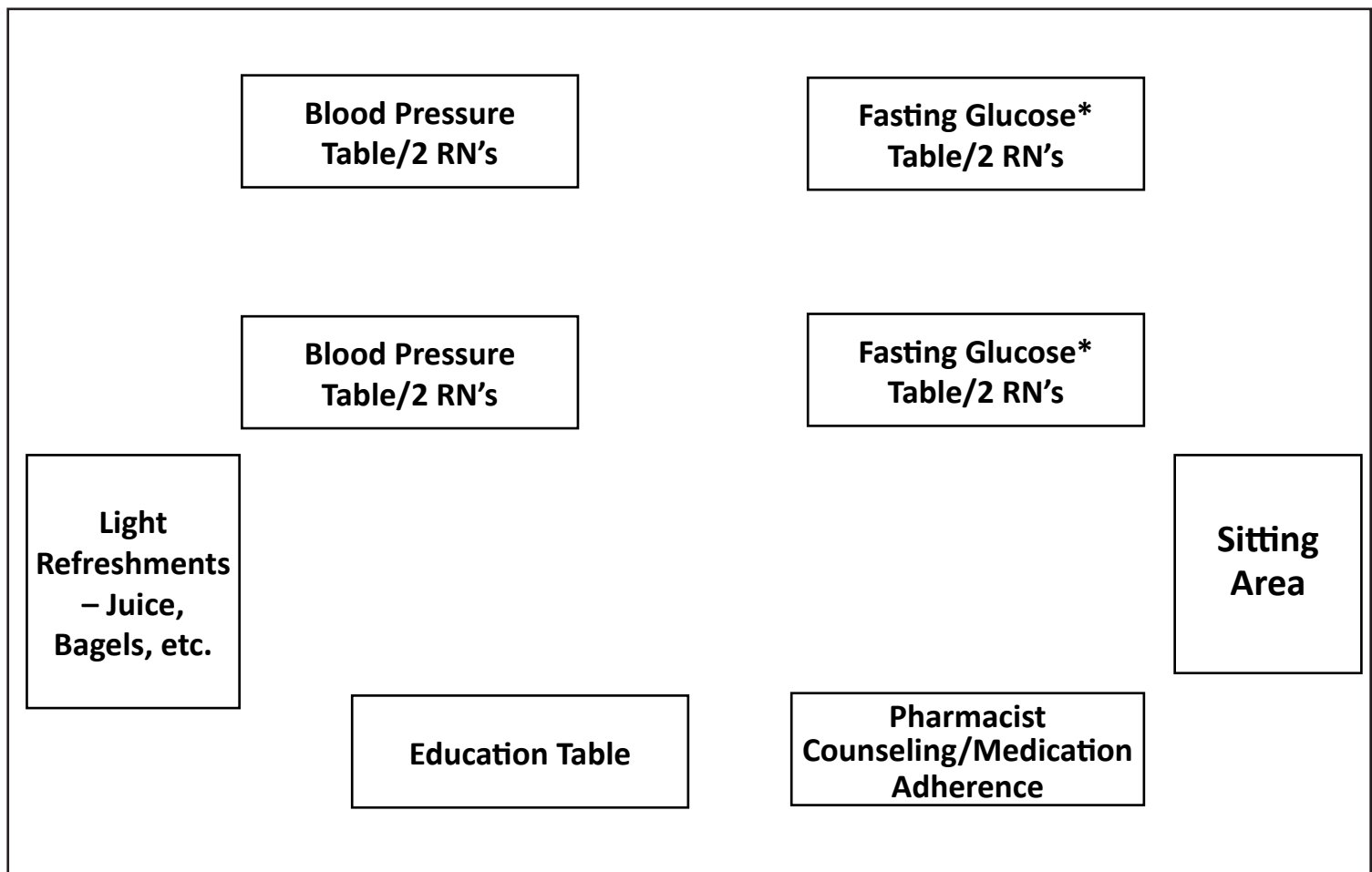
City: \_\_\_\_\_ Zip: \_\_\_\_\_

Fax: \_\_\_\_\_

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### **3.Tables Setup for Screening Day** (example)



\*Additional tables can be added if the screening event also includes diabetes or other screenings.



# 4. Blood Pressure Screening Tracking Form



Virginia's 100 CONGREGATIONS FOR MILLION HEARTS®

Please note: In order to avoid communicating any identifiable information, the numbering on the sheet should not sequentially follow your registration/attendance document.

Organization's Name: \_\_\_\_\_ Date: \_\_\_\_\_ Start/End Time: \_\_\_\_/\_\_\_\_

Address: \_\_\_\_\_ City/County \_\_\_\_\_ Zip \_\_\_\_\_

Event Coordinator Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Participants' Blood Pressure Readings								Comments	
No.	Systolic Readings	Diastolic Readings	Time	Optional Responses				Check only - if referred to Healthcare Provider	
				Age	Gender	Zip code	Has participant ever been diagnosed with hypertension?	If yes, what year was the last diagnosis?	
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									
11									
12									
13									
14									
15									
16									

Recorder's Name: \_\_\_\_\_

Organization: \_\_\_\_\_

# 4. Blood Pressure Screening Tracking Form



Virginia's 100 CONGREGATIONS FOR MILLION HEARTS®



Participants' Blood Pressure Readings									
No.	Systolic Readings	Diastolic Readings	Time	Optional Responses				Comments	
				Age	Gender	Zip code	Has participant ever been diagnosed with hypertension?		If yes, what year was the last diagnosis?
17									
18									
19									
20									
21									
22									
23									
24									
25									
26									
27									
28									
29									
30									
31									
32									
33									
34									
35									
36									

Recorder's Name: \_\_\_\_\_

Organization: \_\_\_\_\_

## 5. Blood Pressure Wallet Card (front of card 2-sided)

Make copies and distribute at the event or download cards online:

<http://www.vdh.virginia.gov/omhhe/documents/2015/pdf/MH%20Blood%20Pressure%20Cards.pdf>

Checkup Date	Blood Pressure		
	Systolic	Diastolic	Pulse

Fill in your results after each visit with your doctor



Office of Minority Health  
& Health Equity  
Advancing Health Equity For All Virginians

The American Heart Association/  
American Stroke Association High  
Blood Pressure Program is supported in  
part by Boston Scientific through their  
Close the Gap initiative.

**Questions?** Contact Augustine Doe at  
804-864-7436 or via email at  
Augustine.Doe@vdh.virginia.gov

or

Dionne Henderson via email  
Dionne.Henderson@heart.org or by  
phone at 804.965.6578



Check.  
Change.  
Control.™

Heart360°  
Cardiovascular Wellness Center



[Heart360.org/Richmond](http://Heart360.org/Richmond)

Checkup Date	Blood Pressure		
	Systolic	Diastolic	Pulse

Fill in your results after each visit with your doctor



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Check.  
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Heart360°  
Cardiovascular Wellness Center



[Heart360.org/Richmond](http://Heart360.org/Richmond)

Checkup Date	Blood Pressure		
	Systolic	Diastolic	Pulse

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Check.  
Change.  
Control.™

Heart360°  
Cardiovascular Wellness Center



[Heart360.org/Richmond](http://Heart360.org/Richmond)

PLEASE KEEP THIS WALLET CARD IN A SECURE PLACE.

Name \_\_\_\_\_  
Email \_\_\_\_\_  
User Name \_\_\_\_\_ Password \_\_\_\_\_

You can get your blood pressure checked at:

You can log your blood pressure numbers 2 ways:

visit the local website at [Heart360.org/Richmond](http://Heart360.org/Richmond) or call  
866.263.1100.

#### Understand What the Numbers Mean

What are the key terms I need to know?

$\frac{117}{76}$  mm Hg

Read as "117 over 76  
millimeters of mercury"

#### Blood Pressure Ranges and Goals

Blood Pressure Category	Systolic mm Hg (upper #)		Diastolic mm Hg (lower #)
Normal	Less than 120	and	Less than 80
Pre-hypertension	120 – 139	or	80 – 89
High Blood Pressure (Hypertension) Stage 1	140 – 159	or	90 – 99
High Blood Pressure (Hypertension) Stage 2	160 or higher	or	100 or higher
Hypertensive Crisis (Emergency Care Needed)	Higher than 180	or	Higher than 110

\* Your doctor should evaluate unusually low blood pressure readings.



18

Log your blood pressure readings on: [Heart360.org/Richmond](http://Heart360.org/Richmond)

Action: Follow-up with your healthcare provider if your BP is over 140/90!

PLEASE KEEP THIS WALLET CARD IN A SECURE PLACE.

Name \_\_\_\_\_  
Email \_\_\_\_\_  
User Name \_\_\_\_\_ Password \_\_\_\_\_

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Action: Follow-up with your healthcare provider if your BP is over 140/90!

## 5. Blood Pressure Wallet Card (back of card)

Make copies and distribute at the event or download cards online:

<http://www.vdh.virginia.gov/omhhe/documents/2015/pdf/MH%20Blood%20Pressure%20Cards.pdf>





## 6. REFERRAL FORM

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Congregation Name: \_\_\_\_\_

Blood Pressure Reading: \_\_\_\_\_ / \_\_\_\_\_

**Referred to Healthcare Provider Name/Address/Phone:**

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

**Additional Community Resources** (i.e. Community Health Workers, Local Health District, YMCA):

**Name/Address/Phone:**

1. \_\_\_\_\_

2. \_\_\_\_\_

Hypertension Classifications	Systolic Blood Pressure (SBP) mm Hg	Diastolic Blood Pressure (DBP) mm Hg
Normal	Less than 120	Less than 80
Pre-hypertension	120-139	80-89
High Blood Pressure Stage 1 hypertension	140-159	90-99
High Blood Pressure Stage 2 hypertension	160 or Greater	100 or Greater

Source: National Heart, Blood, and Lung Institute (NHBLI), 2004, p.12

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## Blood Pressure Control TRANSLATES TO **More Lives Saved** bp control is why

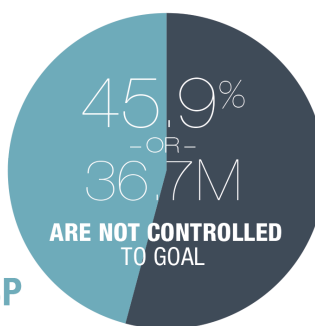
**Uncontrolled blood pressure** is one of our biggest healthcare problems.



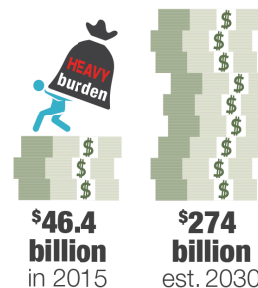
**1 IN 3**  
AMERICANS  
IS LIVING WITH HBP  
TODAY



Of the  
nearly  
**80M**  
Adults  
with **HBP**



### HBP is Costly



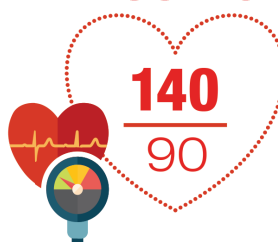
**Better BP Control =** more patients get to goal and reduce risks

#### AHA GOAL

— MOVE —  
**13.6M**  
PEOPLE  
**TO CONTROL**  
— BY 2020 —

#### BP GOAL

— LESS than —



— EVERY —

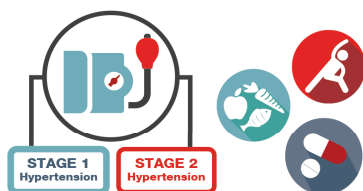
**10 POINT DROP**  
in systolic BP



**30-50%**  
drop in risk  
of cardiovascular  
disease & stroke.

**An Evidence Based Approach =** fewer cardiac events, higher quality of life

**HOW?** By providing an **algorithm** for decision support  
**evidence** is why



**outcomes** are why

**life is why**

**Clinical decision support improves BP control on a system-wide basis.**  
Learn more about our multi-faceted approach for lowering risks.

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