AT MEDICS
IMPROVING HEALTHCARE. IMPROVING LIVES.

Operose Health
with great care

CASE STUDY: April 2023

Eradicating health inequalities for BAME patients with high blood pressure in Lambeth

Overview of project

Our two GP practices in Lambeth, Streatham High Practice and Edith Cavell Surgery, initiated a 12 month health inequalities project to improve overall control of hypertension (high blood pressure) for all patients – with a particular focus among patients of black African and black Caribbean descent. It is well documented nationally that blood pressure control amongst this community is significantly lower than for white patients. This project aimed to directly challenge the factors which contribute to this inequality, including access to healthcare and proactive engagement by the NHS, and to test the impact of a multidisciplinary data-driven approach. Hypertension was chosen due to its wide prevalence, the serious health impact of the condition, the inequalities in treatment nationally, and the negative impact on its management following the COVID-19 pandemic.

Key outcomes

During the 12-month project, we achieved some of the best outcomes ever seen in South East London for overall hypertension control with a 12% inequality gap for blood pressure control between black and white patients completely eradicated. In addition, over 300 patients from the local community were newly diagnosed.

Why hypertension?

Hypertension, or high blood pressure, is often referred to as a "silent killer", with the British Heart Foundation and Stroke Association attributing around 50% of heart attacks and strokes to hypertension.

Hypertension is a key priority within the NHS Long Term Plan given its significance as a risk factor for hospitalisation or death from heart attack or stroke. With its much higher prevalence in BAME and deprived communities, the NHS's National Healthcare Inequalities Improvement Programme has included hypertension as one of five clinical areas of focus which require accelerated improvement.

Hypertension in Lambeth

The London borough of Lambeth is an area of deprivation with a highly diverse population. Hypertension prevalence in black ethnic groups is more than double that of white ethnic groups. Lambeth has around 322,000 residents, with a quarter of the population of Lambeth living in poverty. Latest figures show 43% of the population are from a Black, Asian or Multi-ethnic background – known to suffer more with hypertension problems. Black or black British backgrounds account for 22% of the population in the Lambeth borough.

Since COVID-19 pandemic, hypertension outcomes have declined, healthcare inequalities have increased and the large variation in managing hypertension continues.

In the AT Medics Streatham Primary Care Network (PCN) in Lambeth, two of our practices, Edith Cavell Surgery and Streatham High Practice have a combined patient list of 45,000, of which 3,100 were identified as suffering with hypertension.

At the start of the project, 61% of all patients aged under 80 were controlled and 77% of all patients aged over 80 were controlled.

The project

From the outset, the ambition was to deliver the best hypertension outcomes in South East London for all members of the communities we care for, and without any additional investment, to prove that inequalities can be tackled sustainably and at scale. The team were committed to significantly reducing the inequality gap between black African and black Caribbean and white patients with hypertension.

At the start of the project, across the Lambeth primary care network, 67% of white and only 55% of black patients aged < 80 with hypertension were being treated to target. This represented a 12% inequality gap. The benchmark data, progress and success were measured through **EZ Analytics**, our in-house population health management data platform.

When looking at ways that we could help patients gain better control of their hypertension, it became clear we would have to directly challenge some of the organisational and social factors that contribute to healthcare inequality amongst members of the BAME communities.

The 12 month programme was led by a senior GP and PCN manager who organised an approach involving centralised recall and pharmacist teams working alongside practice based pharmacists and health care assistants (HCAs). Each member of the team had specific tasks, using a range of methods to contact eligible patients, providing guidance and education around self care and providing information about lifestyle approaches and medication. The emphasis on contacting and connecting with black patients was supported by the diversity of our project team, many of whom also had lived experience of issues relating to hypertension and cardiovascular disease.

The programme team was encouraged to maximise their delegated autonomy to shape the programme on the ground. This allowed the admin staff-based recall team and HCAs in particular to play a leading role in driving the success of the programme by encouraging a flexible approach as the programme progressed.

The team used our data analytics platform, **EZ Analytics**, which incorporates thousands of key performance datasets from all our clinical systems, to identify those patients most at risk, and to monitor progress on a real time basis.

The programme had several key elements:

- All staff fully trained and confident in their roles
- Text, email and phone calls were used to reach identified patients
- Staff with language skills or interpreters helped reach patients unable to converse in English
- Letters sent by post If the team were unable to make contact by phone on different days and times of the week
- Once contacted, the team would arrange for the patient to provide a home blood pressure reading or attend the practice or local pharmacy for their blood pressure assessment with our health care assistants
- Proactive health promotion and opportunistic blood testing were offered for lipid levels, Hba1c and renal function
- If repeated BP measures were out of range, patients were booked for a face to face or telephone appointment in our dedicated pharmacist clinic
- Maximised recall of patients, especially those with serious mental illness, due for NHS health checks to increase case detection of hypertension, risk of cardiovascular disease, diabetes and chronic kidney disease.

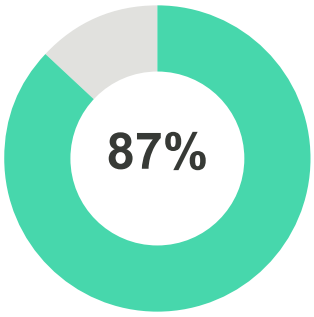
Outcomes

98%

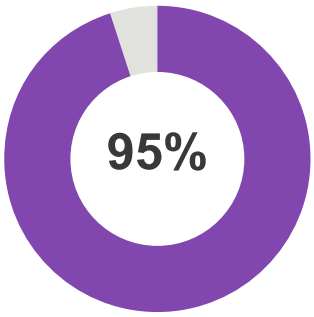
Our recall and admin teams ensured that an amazing 98% of hypertensive patients were recalled and had a recorded blood pressure reading in the last 12 months.

Overall hypertension outcomes

Our results show that all our patients have benefited from the focus on better hypertension control:



of all patients **aged under 80** are now controlled, **compared to 61% a year earlier.**



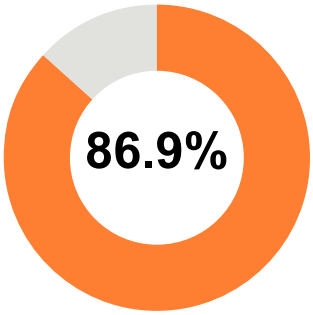
of all patients **aged 80 or more** are now controlled, **compared to 77% a year earlier.**

This means that our PCN has 20% better control than the next best PCN in Lambeth for hypertensive patients under 80 years old. Despite the high levels of deprivation in the communities we serve, our patients now have the best blood pressure outcomes of any PCN in South East London.

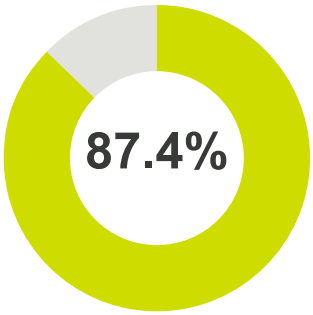
Hypertension and ethnicity

The project has eradicated the inequality between black and white patients in under 12 months. **In 2021/22**, blood pressure control in patients of **white ethnicity was 67%** and in patients of **black ethnicity it was only 55%**. This represented an unacceptable inequality gap of 12%.

The latest figures show:



Blood pressure control in **white ethnicity** patients aged under 80.



Blood pressure control in **black ethnicity** patients aged under 80.

This means the inequality gap had been completely eliminated, with all hypertensive patients now enjoying the same level of control irrespective of their ethnicity.

Blood pressure control for black patients in our PCN is now 21% higher than the Lambeth average and 19% higher than the next best Lambeth PCN. In addition, over 2000 NHS health checks were carried out by our HCA and nursing team in the last 12 months. This has contributed to over 300 patients being newly diagnosed and treated for hypertension.

Views from our team

Dr Tarek Radwan
GP Director

"This project has delivered incredible results and this is all down to the dedication of our amazing team, especially our administrators, healthcare assistants and pharmacists. The last 12 months have proved that we can not just reduce but actually eradicate health inequalities, and raise the quality of care for everyone at the same time. I know the difference this will make to our local communities and it really shows what is possible with a highly motivated multidisciplinary team."

Michelle Dalmacio
Associate Director for London, Stroke Association

"It's brilliant to see such fantastic results from this 12-month programme which shows that using tailored approaches to access healthcare can improve overall diagnosis of high blood pressure and help close the inequality gap in its treatment."

Katie Rack
Regional Manager, Lambeth

"The outcomes of this project are a true reflection of the work and effort that has gone into it by our team. Being easily able to share performance data through the year, and staff working together as part of a multidisciplinary team, has meant a unified sense of pride and achievement. Seeing blood pressure outcomes of our patients improve so dramatically and the equality gap eliminated has made all of the effort in to the project worthwhile."

Patient engagement

The success of the programme has relied very much on all the staff involved, ranging from the recall staff to the pharmacy team and HCAs, who have engaged with patients in a meaningful and structured way to provide dramatic benefits to their health.

Some patients proved difficult to contact and others were, in the beginning, hesitant to engage or make the effort to respond. With the completion of the project, we will collect feedback from patients and staff involved in the programme to help shape our approach for future initiatives and this will be shared across our organisation.

Next steps

During the project, regular updates have been provided to the Operose Health executive and senior team. Nationally, progress has been shared with the NHSE Board following early discussions with Dr Bola Owolabi, Director for Health Inequalities and of the National Healthcare Inequalities Improvement Programme (NHIP) at NHS England.

The Lambeth hypertension programme demonstrates the opportunities available in primary care to identify, focus on and address health inequalities in local communities, benefiting patients' health and wellbeing, and the wider health and social care system by reducing the likelihood or acuity of additional treatment.

Sitting behind the programme is a proven methodology based on the effective use of data and analytics and dedicated existing resources. We believe this model is transferable to deliver significant health improvements in other chronic conditions like obesity, heart failure and diabetes, and also for immunisations in both young children and adults.

We are planning to replicate the success across our London and national practices and are currently in discussion with NHIIP on further work to promote the approach and outcomes nationally.

Charlotte Payne
Recall Leader

"I love my role and it's good to know that we're making a difference. When you see the numbers going up it gets you more excited and want to achieve more. Ultimately it is about the patients and taking the time to listen to them and making sure they feel supported."

Yvette Agyako
Lead Pharmacist

"As pharmacists we thoroughly enjoyed being part of this project. We often see patients with hypertension but do not usually have the opportunity to see outcomes as good as we have seen this year. Being part of this project has meant not only were we able to apply our skills and knowledge, but we were also able to feel we were making a real difference to patients. The support that we have as a team is very important and we can go to anyone for help. The way in which we have been able to support patients is why we do our jobs. It is important that our patients know that we are here for them.''

Dr Lucy Goodeve-Docker
Co-Regional Medical Director for Lambeth

"We wanted to focus on those patients on the hypertension register who hadn't had a blood pressure reading and get them in, so it was a big piece of work. It was also important to bring the human element back post-Covid as having that personal dialogue with our patients is fundamental."

For more information contact:
hello@operosehealth.co.uk

AT Medics is part of the Operose Health Group.