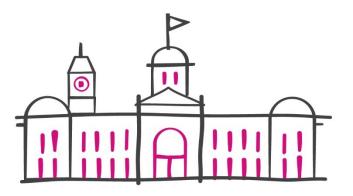


Blood Pressure

Birmingham Measurement Tools Webinar Series









Introduction



Impact and outcome measurement should be a key part of any intervention.

Measuring the impact of what we do helps us to demonstrate that what we are doing is making a difference. They help us demonstrate that an intervention is having an impact in a measurable way rather than using just stories.

Using standard tools allows us to compare different interventions' impacts. Combining these standard measures with standard questions on people's identity helps understand if different interventions are more effective for different groups. We can also combine them with information on the cost of an intervention and the numbers of users to look at cost effectiveness.

Without clear impact and outcome measurements it is difficult to support funding for interventions or to justify that the approach used should be continued or scaled up.











Birmingham Public Health Measurement Toolbox

The Birmingham Public Health Measurement Toolbox has been developed to standardise impact and outcome measures for interventions that are trying to improve health and wellbeing across Birmingham.

The toolbox supports organisations when they are developing projects to build the appropriate measures into their service design.

It provides clarity and transparency on how to clearly assess and measure interventions based on their focus, which can then be demonstrated clearly when applying for funding.

It allows for accurate and meaningful comparisons between different programmes and interventions to help inform decision-making.













Contents



The Toolbox is a developing set of resources to support measurement related to different areas of health and wellbeing. These include:

- Physical activity
- Smoking
- Mental Wellbeing
- High Blood Pressure/Hypertensions
- Long-acting Reversible Contraception
- HIV and Hepatitis Risk Reduction

For each section there is:

- ➤ A description of the issue/topic
- Links for local or national information on the issue/topic
- A description of the tool
- Information on any registration requirements to use the tool
- Useful links to support behaviour change and evidence-based interventions related to the issue/topic
- A case study example of using the tool in practice











BLOOD PRESSURE TOOLKIT



BE BOLD BE BIRMINGHAM



What is blood pressure?

- Blood pressure is a measure of the force that your heart uses to pump blood around your body.
- High blood pressure is often related to unhealthy lifestyle habits, such as smoking, drinking too much alcohol, being overweight and not exercising enough.
- Left untreated, high blood pressure can increase your risk of developing serious long-term health conditions, including coronary heart disease. You also risk damaging the blood vessels in your kidneys or eyes.

What is blood pressure? - NHS (www.nhs.uk)











National and Local Context

- Around one in three adults in the UK has high blood pressure. In England, 31% of men and 26% of women have high blood pressure.¹
- Estimates suggest that more than 41,000 people in Birmingham and Solihull have undiagnosed high blood pressure²
- If you are from an African, Caribbean or South Asian background you a higher risk of developing high blood pressure than the rest of the population. Blood pressure tends to rise with age. Up to five out of every hundred (5%) 16-24 year olds in England have high blood pressure, but by the age of 65-74, more than half (58%) have it.











¹Health Survey for England 2015

²Birmingham and Solihull Healthy Hearts | Blood Pressure (bsolhealthyhearts.nhs.uk)

^{3,4} Blood Pressure UK

Measuring blood pressure

- High blood pressure (hypertension) can increase your risk of developing serious problems, such as heart attacks and strokes, if it's not treated.¹
- High blood pressure rarely has any symptoms which is why it is called the 'silent killer'. The only way to know you have the condition is to get your blood pressure measured.² High blood pressure can be treated through lifestyle changes or medication or a combination of both.
- Taking blood pressure readings needs to be delivered by trained staff











¹Blood pressure test - NHS (www.nhs.uk)

²Blood Pressure UK

What are we aiming to measure in the tool?

- The outcome we are aiming to measure with this tool is an increase in the number of adults who know their blood pressure and understand their cardiovascular risks.
- If we see improvements through this tool and the data collected, we will have evidence that we are tackling health inequalities.









Measurement tool: Blood pressure Questionnaire

Tool	Birmingham Blood Pressure Questionnaire
Weblink	The following questions: When did you last measure your blood pressure? Free Text Have you recorded your blood pressure measurement and registered it with a GP or Pharmacist? – Yes/No/Not sure What is a healthy blood pressure for an adult? Free Text Why is high blood pressure dangerous? Free Text How can you help reduce your blood pressure? Free Text
Cost	N/A
Use	Self-completed questionnaire.
Frequency	Pre-intervention Post- intervention 6-8wks post-intervention
Ambition	Individuals should have a measurement in last three months and it should be logged with their GP or pharmacists. Individuals should be able to describe a healthy blood pressure range and high blood pressure and explain the risks of having high blood pressure.
Benchmark Data	OHID Fingertips Cardiovascular Health











Using the tool

- The questions should not be modified in anyway during implementation but there are different ways of asking the question and this needs to be tailored to the intervention/setting.
- Face to Face with someone asking the citizen out loud the question
 - This might work well with clients or service users who need additional help with answering
 questions or where this is part of an initial assessment conversation and can inform tailoring
 of the intervention.
 - The downside of this approach is it can be overheard and therefore you need to think about confidentiality of the setting and environment. It also needs to be inputted by the person asking the question into the data collection system.
- Self-completed questionnaire on paper or digitally
 - This is a quick way of collecting information and makes it easier to standardise and report
 - The downside is that the individual may have questions about the question, and if digital requires digital access.









Specific risk and issues to consider

- To increase rates of questionnaire completion providers should explain to users how their data will be used and why it is important (from both an individual and Public Health perspective if possible)
- To promote digital inclusion providers should if needed support users with accessing the questionnaire (not all users will have smartphones/internet access etc.)
- If there are language issues support should be given where possible (See <u>Blood Pressure UK</u> for essential blood pressure information translated into 32 languages)











How to report the findings

- Providers should ensure that questions are the same as the toolkit
- Providers should collate the results for each value to give a clear understanding of intervention demographics.
- Providers should state the values given for any participants who answered "other"
- In cases of small sample size, small number suppression should be used to keep results confidential – this means if less than 5 people gave the same answer you don't report this in the public report and just report <5 as the answer.</p>











Case study

■ An example of a hypothetical intervention that would use the toolkit – A walking group for older adults in Birmingham to increase physical activity levels and social capital delivered over a defined period (12 weeks for example)











Additional resources

- NHS: What is Blood Pressure
- NHS: Blood Pressure Test
- Birmingham and Solihull Healthy Hearts | Blood Pressure (bsolhealthyhearts.nhs.uk)
- Blood Pressure UK
- PHE Health Matters: High Blood Pressure









