



MILLION HEARTS

PEORIA CITY/COUNTY HEALTH DEPARTMENT

Million Hearts in Action

[Strategies for Achieving Million Hearts Goals]



In lower income communities, deep disparities exist in access to healthcare. At the same time, about 78 million U.S. adults have high blood pressure – and many of them don't know it or don't experience typical symptoms, making hypertension a silent killer. In addition, in the United States about 2 in 5 African Americans have high blood pressure, but only 50 percent have it under control. To help focus on this issue, the Peoria City/County Health Department brought together a coalition of partners to frame the issues and write protocols, and then create a faith-based community screening project.

[Fast Facts]

- Health department workers used patient discharge data provided by the state to map out where those with high blood pressure lived and related that map to income information.
- They targeted areas with both high levels of hospitalization due to hypertension and low income, including one of the poorest zip codes in the country, 61605.

[What We Did]

- We brought people together, including competing hospitals, a medical school, the agency on aging in our county, a nationally recognized doctor with a renal practice, the Illinois Department of Public Health and the local federally qualified health center.
- This coalition wrote protocols and procedures to create a faith-based approach to serving this area of need. We outlined: training for volunteers in churches; what blood pressure levels to use; how to screen; and an array of scenarios covering when and how to refer patients for immediate care or for a health care provider and insurance.
- We reached out to churches in our area and trained nurses and laypeople to take blood pressure and use the protocols we had established, as well as how to report out results.
- Begun in early 2014, the process of coalition-building, creating protocols and building relationships in the community took just under a year.



[What We Accomplished]

- We created relationships with five churches, which are holding screenings once a month.
- We trained 23 people.
- Through the end of January 2015, with about six months of screenings, we have processed 138 people.
- Just 13 percent of those screened were within normal blood pressure limits, with everyone else in pre-hypertension or some stage of hypertension.
- Through this process, we are connecting people to care who might not otherwise have a physician or a connection to healthcare.
- We have created a system and the groundwork for replicating this project to other areas and counties.

“ We convened a multidisciplinary team that has created a replicable program for blood pressure screening and an appropriate referral protocol in an effort to positively impact the health of our community.”

- Kelly Stewart, Community Health Programs Manager

[What We Learned]

- Education is important. We had to go into the community and help them understand why the data is important. It's not that we just want to come into your neighborhood and collect information, but that we use this to drive programs, plan and implement interventions and improve the health of all in the community.
- The more we worked with the faith-based groups, the more we learned about the community. We are continuing to build relationships. The feedback we get provides insight on where else we should be and what else we should be doing.
- The volunteers know their community. They are the experts on the community and we have found great value in the knowledge they hold.

[What We Are Doing Now]

With help from the Illinois Department of Public Health, the program is spreading. Already, it is being used in three neighboring counties, two of which are doing the same faith-based approach and a third that is using a firehouse as its community base. One of the counties also is using a community nursing home for access to monitoring and referral services in addition to working with a church.



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