

Improving Cardiovascular Health in Minority Women with the Cardiovascular Support Protocol

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PROBLEM STATEMENT

- 2020 call to action by AHA that focuses on CV disease in rural communities⁶
- Needs assessment identified 76% of women identified to be minority with 35% having uncontrolled HTN
- Research indicates poor perception and understanding of stroke and CV disease risk¹⁰
- LS7 tool has been used since 2010 by the AHA to identify ways to maintain CV health⁷

PROJECT PURPOSE

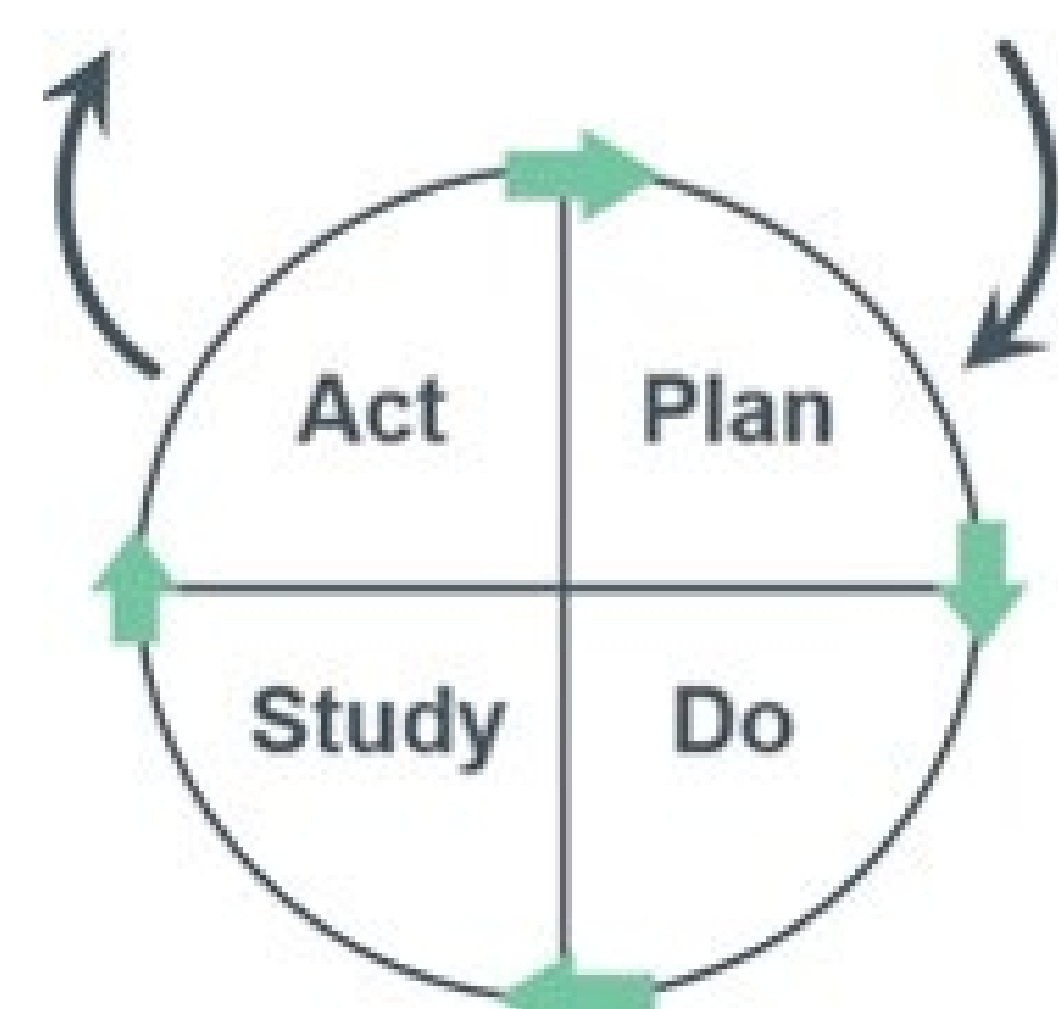
- Development of a protocol to introduce into current practice to improve cardiovascular outcomes
- Improve medication adherence
- Decrease systolic blood pressure
- Focus on lifestyle modifications to improve CV health

MODEL/NURSING THEORY

Nola Pender Theory

- Focused on explaining and predicting the health promotion component of lifestyle modifications

PDSA Model



METHODS

Subjects (Participants)

- Minority adult women with a diagnosis of hypertension
- Prescribed at least one antihypertensive medication

Exclusion

- Women under the care of Nephrology
- Pregnant women

Setting

- Free Faith Based Clinic
- Rural Community

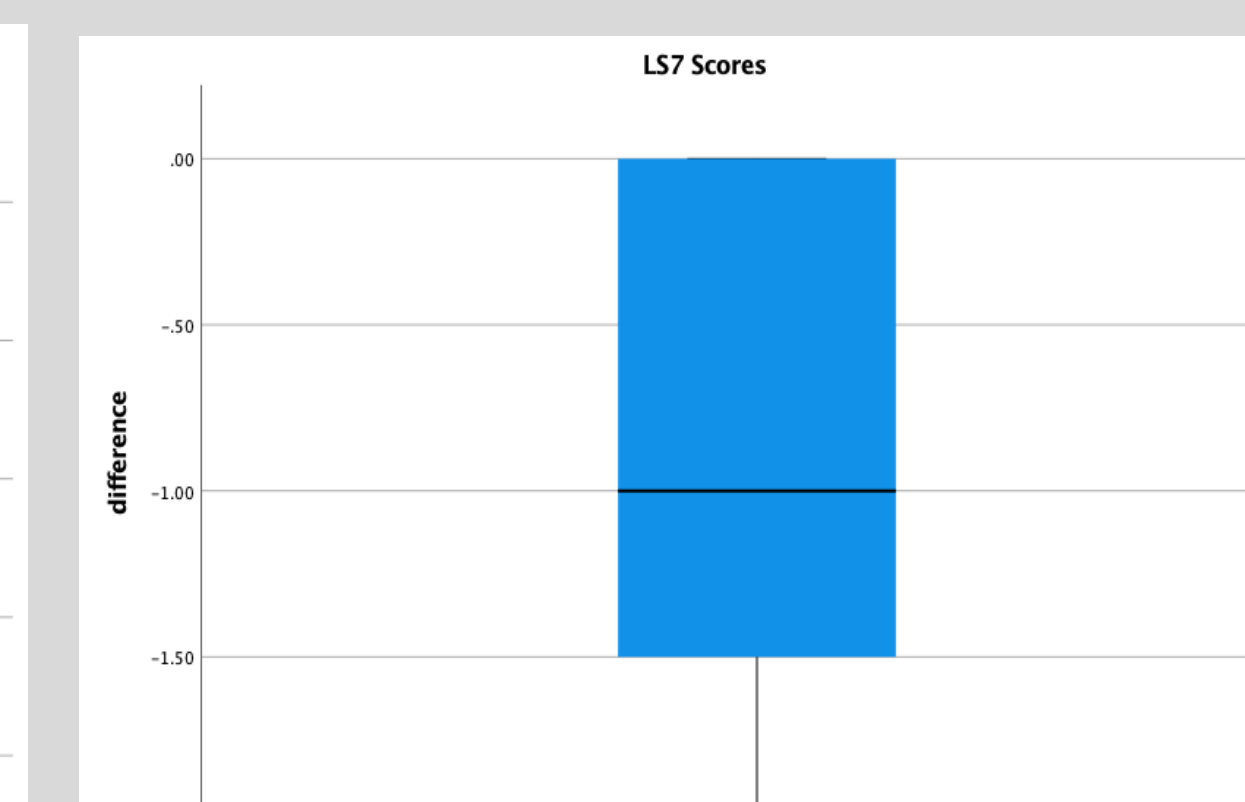
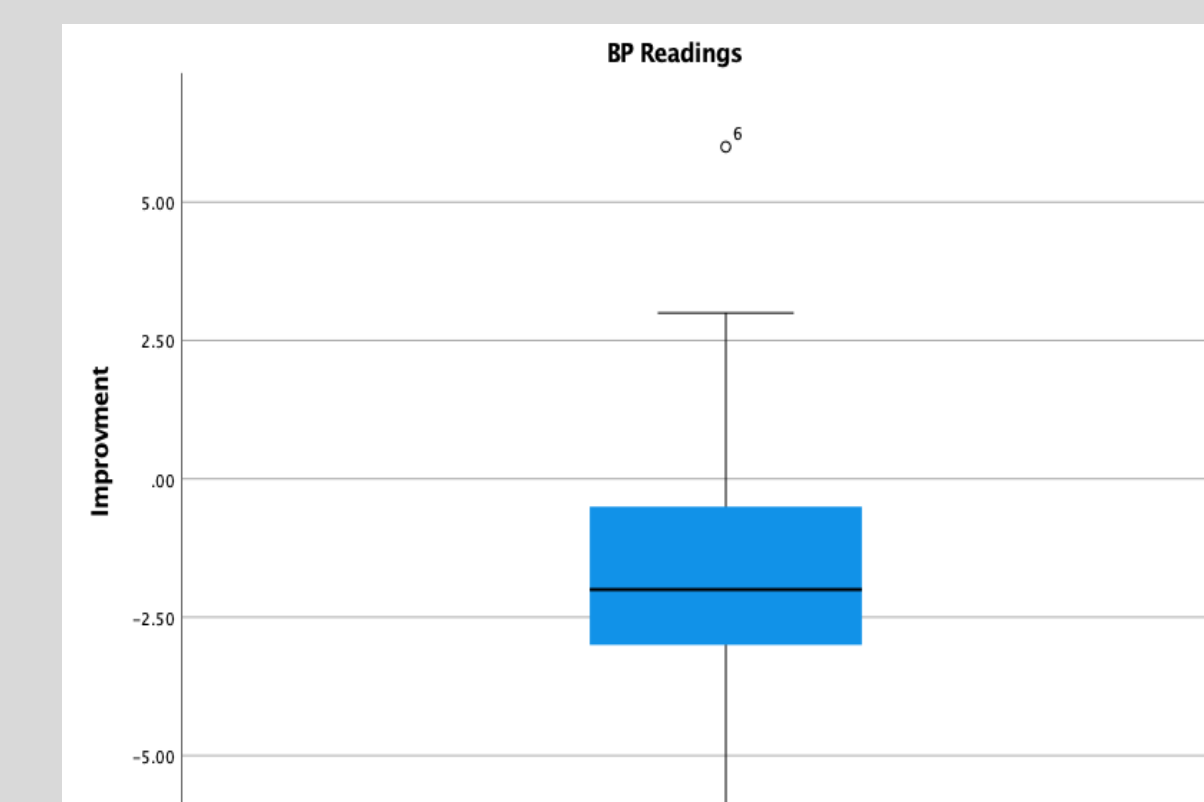
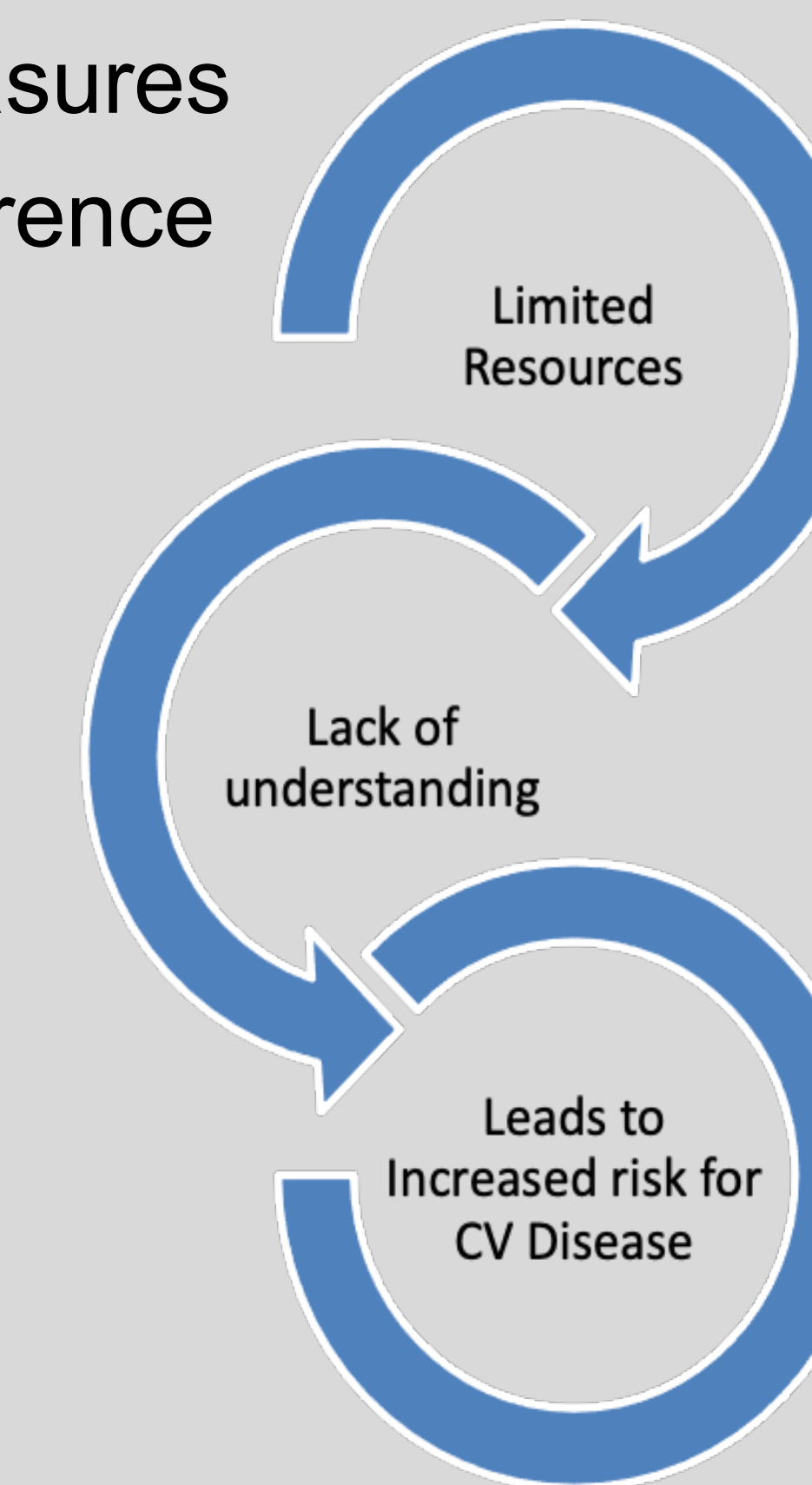
Instruments/Tools

- LFS7 Tool Score
- Blood Pressure Infographic
- CVSP includes LS7 tool, blood pressure infographic, pill card all from the AHA.



RESULTS

- LS7 Tool Scores Improved by at least 1 point on average
- BP readings improved in 30% of participants
- P value <.001 for both measures
- Improved Medication adherence with pill card



Incidental Findings

- Decrease in smoking
- Increase in physical activity
- Dissemination of information to community and sharing of information with family/friend



DISCUSSION

- BP infographic well received
- Food alternatives well received
- Participants encouraged by lifestyle modification suggestions

IMPLICATIONS FOR ADVANCE PRACTICE NURSING

- Focus on chronic disease
- Reduce the burden of PCP
- Increased patient responsibility and patient buy in
- Supports current clinical guidelines
- Focuses on nonpharmacologic remedies

SUSTAINABILITY

- Very low cost
- Easily replicated
- Implementing into other practices

REFERENCES



Implementation of CVSP along with current practice improves cardiovascular health in minority women over a 90-day period