ASTHO Heart Disease and Stroke Prevention Learning Collaborative

Spotlight on National Partners

The Role of Nurses in Preventing and Managing Hypertension
Written by the Association of Public Health Nurses

Public health nurses (PHNs) have been integral partners with ASTHO's Heart Disease and Stroke Prevention State Learning Collaborative. While they are part of the three-million strong, trusted nursing professionals, they are not the nurses you see at the bedside caring for the sick—though many have had this experience before they became public health nurses. The role of PHNs is often unclear to the public and to healthcare providers who may view nurses as ubiquitous providers, most often found in acute care, medical, or diagnostic settings. PHNs, who may work in health departments, community agencies, or health systems, are positively influencing the places where people live, learn, work, play, and pray, at least since the days of first PHN, Lillian Wald. Wald lived and worked among poor immigrants in New York’s Lower East Side in the 19th century. She gained her community’s trust by making home visits to the sick, while also tackling community-wide problems that were impacting health, such as overcrowding, sanitation, unsafe streets, school absenteeism, and unsafe working conditions. Wald was a master at assessing the community’s needs and advocating for changes to address these needs. True to this legacy, PHNs view communities (versus individuals) as their clients and work to assess, diagnose, plan, implement, and evaluate changes aimed at improving the health of entire communities.

The U.S. health system has begun to transform from caring for the sick to promoting and protecting health. As in the days of Lillian Wald, we cannot neglect the environments people are born into—or that patients return to—following hospitalization. Central to the success of health system transformation is the PHN. As health professionals, PHNs are uniquely prepared with clinical skills and public health knowledge to assess the social and environmental causes of health problems and to plan, implement, and evaluate interventions aimed at making health better for entire communities. With their knowledge and experience, PHNs can broker partnerships across all components of the healthcare system and within various community sectors. In fact, partnering with communities, populations, and organizations is a core principle of PHN practice.

The Association of Public Health Nurses (APHN) is a membership organization that represents practicing PHNs across the United States with a mission to shape the role of public health nursing within the specialty of population health and to educate and advocate for policies and practices that advance the practice of public health nursing to promote the public's health. ASTHO has supported 20 states, the
District of Columbia, and Palau in the Million Hearts State Learning Collaborative. As a national partner within the collaborative, APHN works to assist state teams in creating systems aimed at identifying and controlling hypertension.

Within the state teams, APHN has seen ways in which PHNs are leading and coordinating practices to identify populations at risk for undetected hypertension and refer them to providers for follow-up. PHNs have found creative ways to communicate with partners across sectors and reach those who are often hard to reach.

In Wisconsin, PHNs and health extenders (i.e., parish nurses, community health workers, and promotoras) are working together in the ASTHO Million Hearts initiative with three public health departments in Milwaukee, West Allis, and Green County. In Green County, PHNs and parish nurses (also referred to as faith community nurses) are creating a population-based approach to hypertension improvement that may be replicated in other communities. Local public health officer and PHN, RoAnn Warden, and parish nurses connected with parish nurse coordinator, Kris Wisnefske at Monroe Clinic in rural Green County, to offer blood pressure screenings and bidirectional referrals to healthcare and resources. The local health department developed protocols for hypertension along with strategies to emphasize bidirectional referrals and connections with the Monroe Clinic.

An electronic health system has bridged both agencies through EPIC Care Link, Monroe Clinic’s health information technology (HIT)/electronic medical record. Both parish and public health nurses can enter data into the HIT and alert Monroe Clinic providers of health information that was shared. In Green County, a 50-member healthy community coalition completed its community health improvement plan and agreed to focus on hypertension identification and control, monitor bidirectional referral processes, and develop a resource website. The coalition assembled a learning package from project materials, tools, and resources. In Wisconsin, the community-clinical sharing model found in the learning community helps promote spread and sustainability. It positions health departments to execute new roles as chief health strategists for their communities by transforming traditional, individual public health screening services into a comprehensive, population-based promotion and prevention strategy to address hypertension, a leading cause of preventable mortality.

Similarly, Monica Jensen, a PHN with the Connecticut Department of Public Health (DPH), has worked as a project coordinator on the Million Hearts State Learning Collaborative. In collaboration within DPH, and with established partners and community-based organizations, she has worked to identify and engage partners in testing a model for community-clinical linkages in high-need neighborhoods in Bridgeport. Monica maintains communication among implementing and supporting partners, including faith community nurses, who help identify community members with undetected hypertension. By collecting and sharing data and lessons learned, Monica’s PHN activities inform and advance effective initiatives to improve a community’s approach to addressing hypertension.

Even as the healthcare landscape shifts, APHN will continue to promote the value of the PHN role and support PHNs, who are change agents in communities. PHNs are well-aware of the pulse of their
communities and they are integral partners in addressing the root causes of disease outside of the walls where healthcare is delivered.

Acknowledgements
Jennifer Cooper, DNP, RN, APHN-BC, Project Manager, Association of Public Health Nurses
Monica Jensen, MSN, RN, Nurse Consultant for the Community, Family Health and Prevention Section, Connecticut Department of Public Health
Rebecca W. Cohen, MS, Health Systems Coordinator, Department of Health Services, Division of Public Health, Chronic Disease Prevention Unit, Madison, WI
RoAnn Warden, BSN, RN, Health Officer and Director of Green County Health Department, WI
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*The Wisconsin team (Cohen, Warden, and Wisnfske) presented at the APHN 2017 Annual Conference, April 23-26 in San Diego, CA.

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