

Empowering communities to address Hypertension in Kent

A report from EK360

**“ You don't know what you have
done - you may have saved my life! ”**

October 2022

Before you read this report, meet Ruth

Ruth met with the Hypertension Heroes in September.

She was advised to monitor her blood pressure for a week and then contact her GP with the results.

She told the Hypertension Heroes that she would follow their advice, but that she wasn't registered with a GP.

The Hypertension Heroes gave Ruth information about how to register with a local surgery. Armed with the right information, and the encouragement to get signed up, Ruth was able to register with the GP.

She took her blood pressure readings to the GP, and they then sent her for further tests.

As a result, Ruth discovered that she may be diabetic and requires medication to manage her blood pressure. Two weeks on and Ruth is extraordinarily grateful for the advice and support from the Hypertension Heroes.

She told us, "You don't know what you have done - you may have saved my life!"

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Background

Kent and Medway Integrated Care Board secured personalised care money in 2021/2022 to support Blood Pressure management within the community. A multiagency working group, including representatives from Kent & Medway ICS, South East Regional Public Health Group, Medway Public Health and Kent and Medway Community Health Trust was established.

Working with community partners, the British Heart Foundation and engagement experts EK360, an innovative project was created that focused on personalisation for patients.

The model also addressed health inequalities around self management of hypertension, using an asset based approach that sought to build a social capital of motivated, skilled volunteers and community organisations with an interest in supporting health promotion activities.

Background

The aims of the project were:

- To reach 2,000 people from identified communities in line with NHS Core20PLUS5
- Raise awareness of the importance of personal management of Hypertension
- Encourage people who have already been issued with BP monitors to use them and report results to their GPs (5,700 machines have already been issued)
- Encourage and empower people to identify risk factors around Hypertension and seek diagnosis where required
- To support primary care to address health inequalities and increase personalised approaches in its levels of BP monitoring and identification
- To build a skilled and motivated community champion resource that can establish linkages and create entry points for other public / patient involvement initiatives across the system

Evaluation context

This six-month pilot started in April 2022, with the first volunteers going live at the end of May. An interim report was undertaken in July to map levels of activity.

This final report evaluates the activities and outcomes of the pilot against the original objectives, as well as a review of the model and the flow of people through the pathways created.

This project evaluation report focuses on process, systems and outcomes of the pilot. It sits alongside a Social Return on Investment report that focuses on the impact of the pilot. You can read that report [here](#).

Evaluation of the model

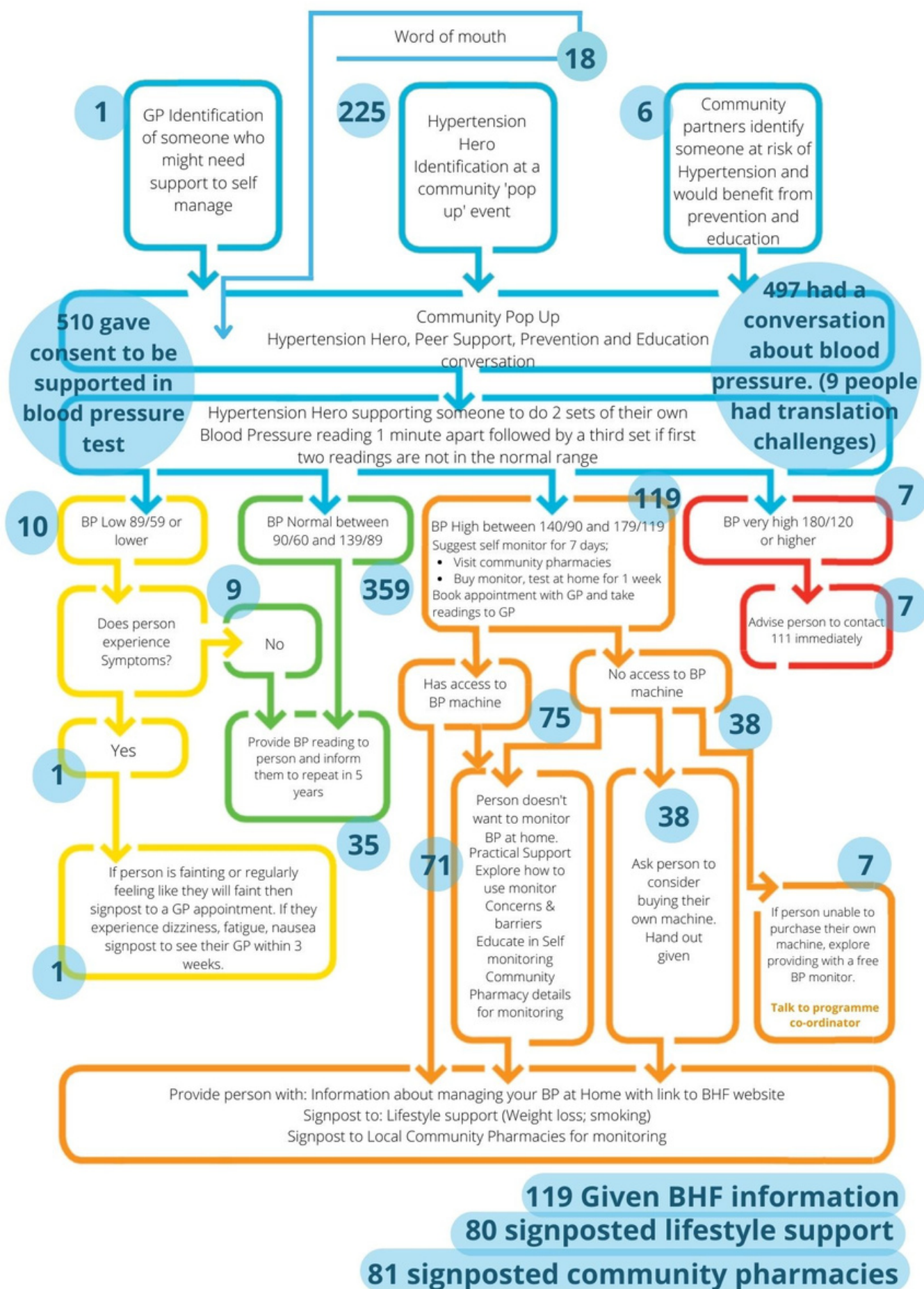


Image 1. Numbers of people 'flowing' through the model

Who used the Hypertension Hero community pop ups?

Over 6 months, the pilot enabled 510 people to take their own blood pressure reading.

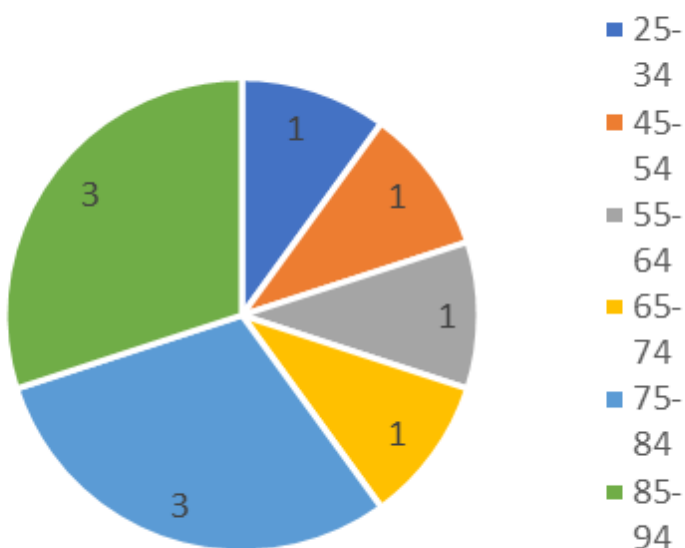
Of this 65% (331) were female, 34% (174) were male, 1% (4) identified themselves as another gender. One person didn't share their gender.

Yellow pathway

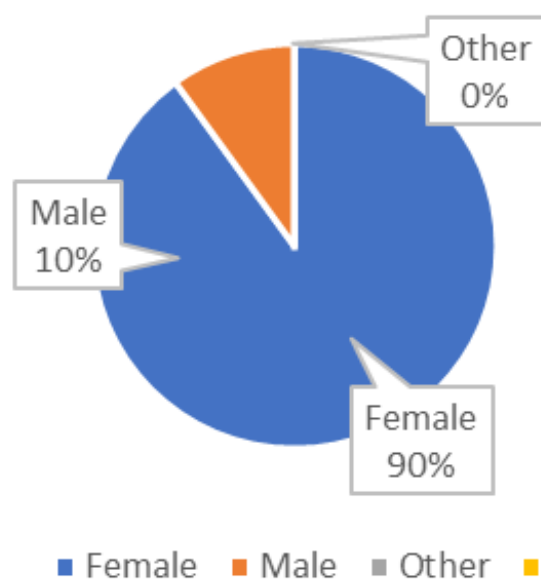
10 people had low blood pressure.

This was called the yellow pathway as illustrated in the flow diagram on the previous page.

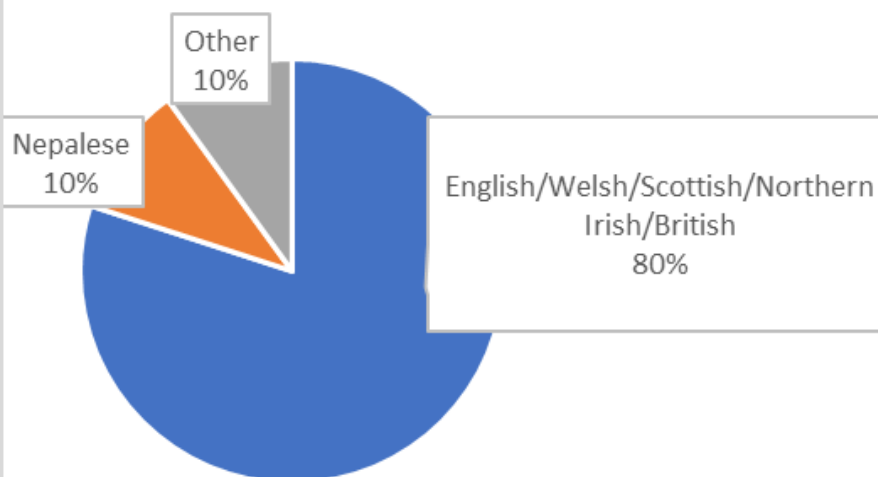
Yellow pathway by age



Yellow pathway by gender



Yellow pathway by ethnicity



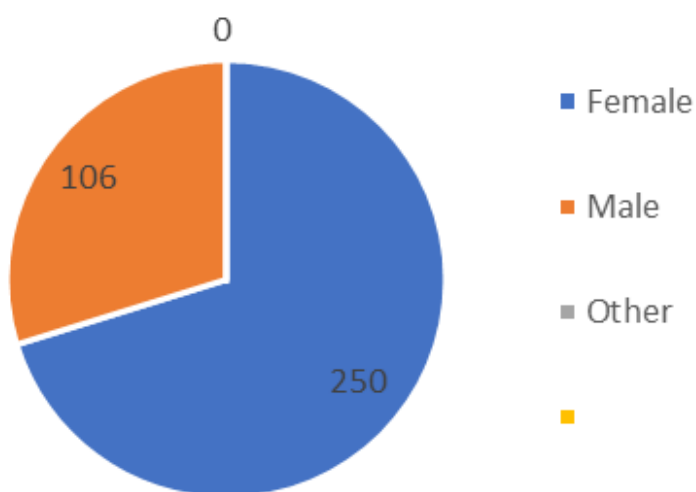
Who used the Hypertension Hero community pop ups?

Green pathway

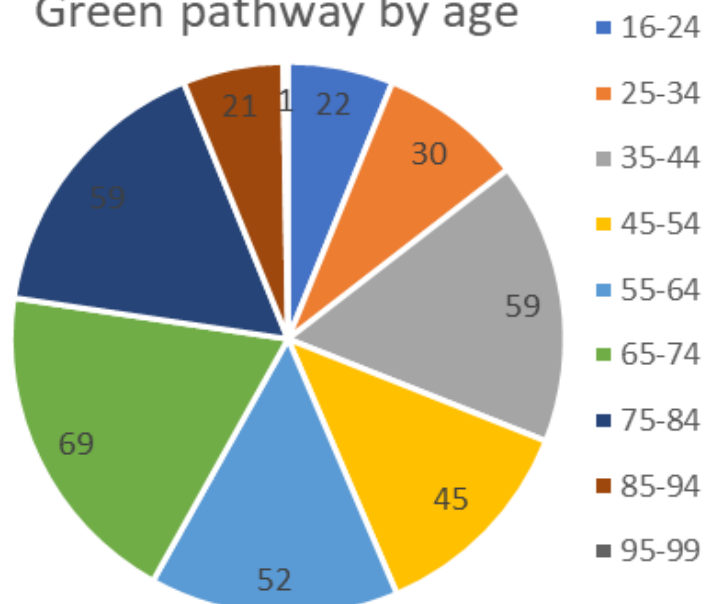
359 people had normal BP reading.

This was the green pathway.

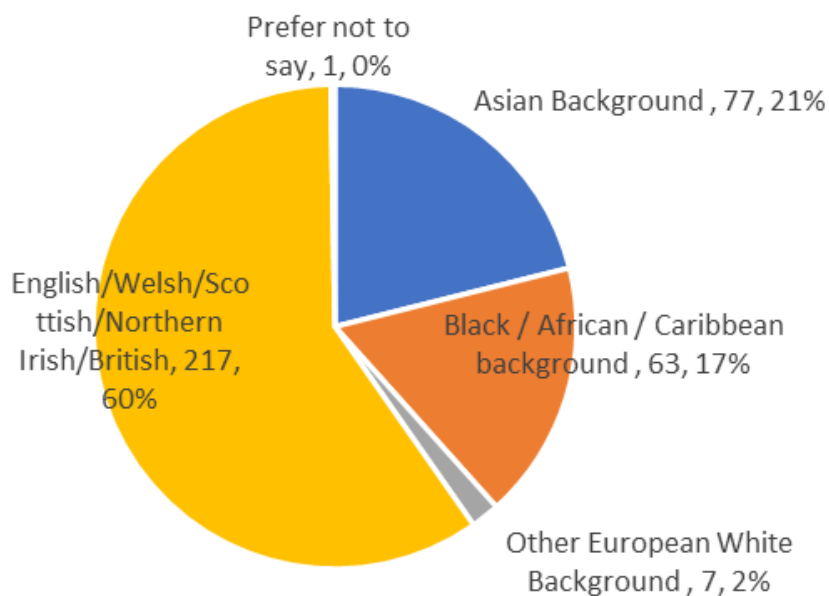
Green pathway by Gender



Green pathway by age



Green pathway by Ethnicity



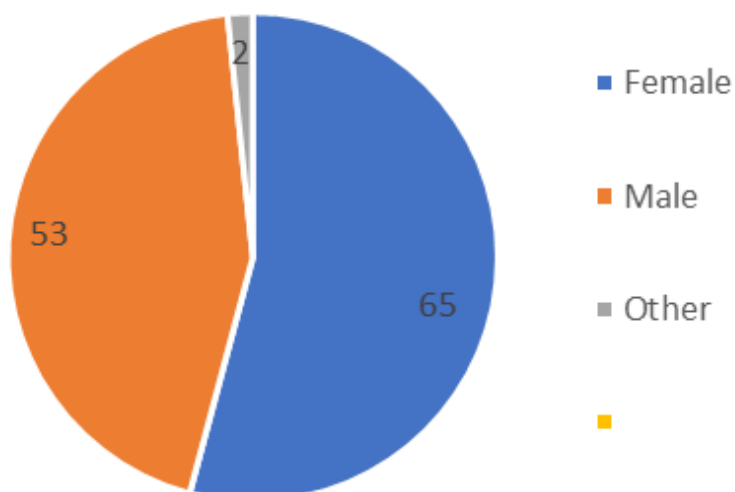
Who used the Hypertension Hero community pop ups?

Orange pathway

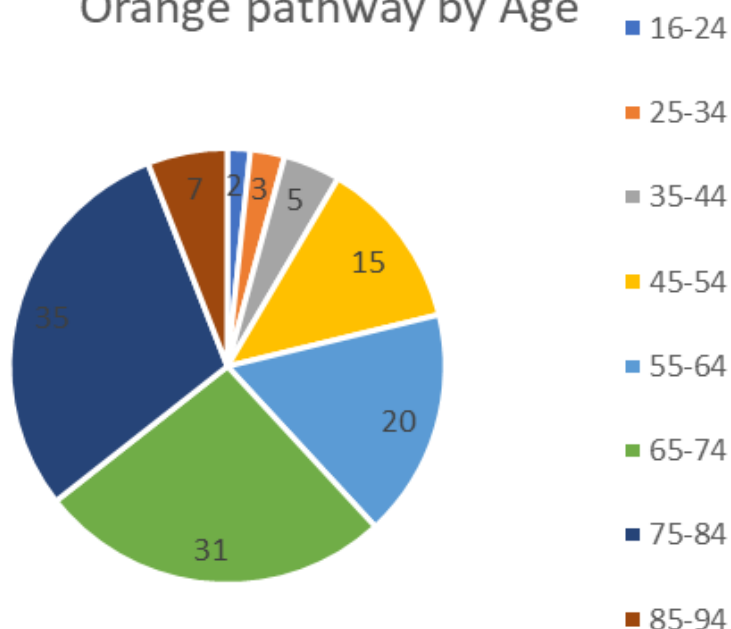
119 people had high blood pressure.

This was the orange pathway.

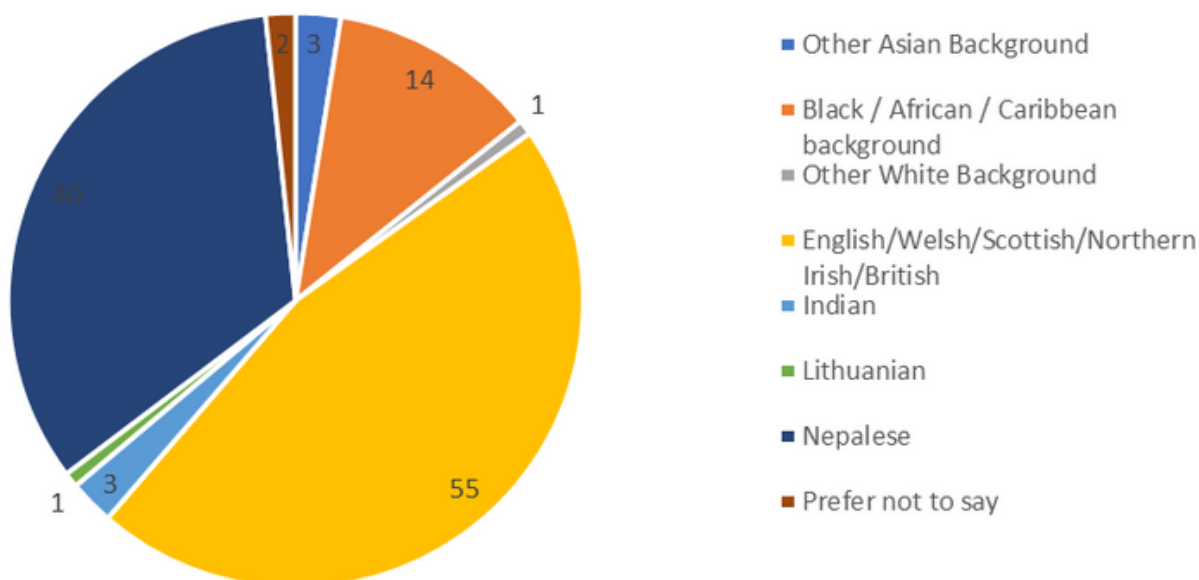
Orange pathway by gender



Orange pathway by Age



Orange pathway by ethnicity



The orange pathway in more detail

119 people were identified as having high blood pressure between 140/90 and 179/119.

Of these, 63% (75 people) reported that they already had access to a blood pressure monitor, or other ways to check their blood pressure.

- 'The paramedics usually do it for me'
- 'I get it checked at the weekend when I volunteer at the hospital'
- 'I get it checked every 2 weeks when I get my schizophrenia injection at the doctors'
- 'I can check it on my Apple watch'

95% (71 people) of this group said that they did not feel confident about monitoring their own blood pressure at home.

When asked why, they told us they were not confident to monitor their blood pressure at home. The most common barriers were that people didn't know what the reading meant, or lacked the confidence to use their home monitor machine.

- 'It's about interpreting the results'
- 'Could someone check my device to confirm if it works properly? I'm not sure about using it otherwise'
- 'I still think I need help with my monitor'
- 'It's hard to put the cuff on myself'

At the end of our intervention, 90% of this group (64 people) said that they felt more confident about monitoring their own blood pressure at home in future.

We talked to 38 people about buying their own monitor to enable ongoing testing at home. After talking about options for home monitors, 12 people still felt that they did not want to test themselves at home.

Comments included:

- 'Can you help teach my son, so that he can do it for me?'
- 'I would prefer to see someone medical'.
- 'My friend has a machine, I can pop round and do it there'
- 'I am alone at home, so have no one to help me with things like this'
- 'Have a lot of things on at the moment with my wife so I don't have time'

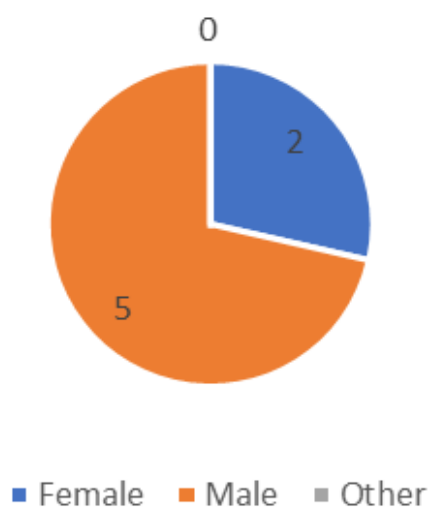
The red pathway

Seven people had very high blood pressure.

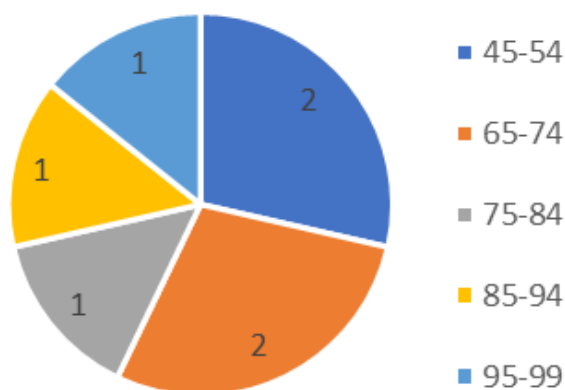
This is the red pathway.

All of them were signposted to further medical attention.

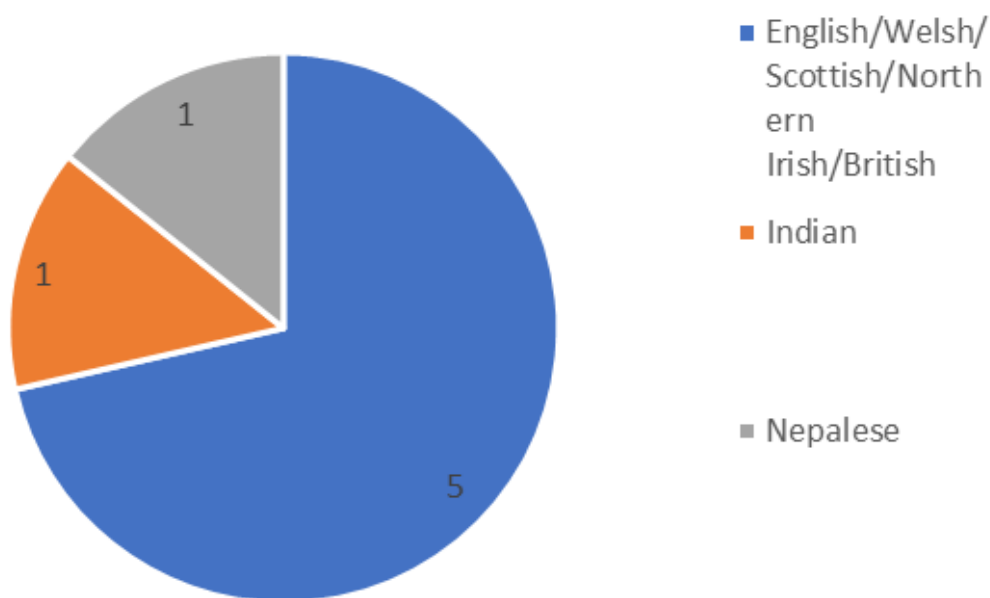
Red pathway by gender



Red pathway by age



Red pathway by ethnicity



Access to the Hypertension Hero community pop ups

The majority of people 89% (455 people) reached via our Community Pop-ups were opportunistic. They happened to be at the community venue, spotted us at an event or were passing by.

During the pilot, we started to see a change in how people accessed the Hypertension Hero pop ups as more people started to hear about the sessions in their communities.

- 'Opportunistic' visits were reduced from 94% (225 people) in July to 89% (455 people) in October
- Levels of community partner signposting increased from 2.5% (6) in July to 6.6% in October
- Levels of GP signposting remained constant at 0.5% (1 person) by July and 0.5% (3 people) by October.
- However, in October 3.5% (18 people) told us they attended because of 'word of mouth' signposting, this was a new category.

How did people feel about doing their blood pressure?

Everyone we saw (100%) reported positive feedback about their time with the Hypertension Heroes.

We identified three sub themes within the feedback which are listed here in order of frequency.

Feeling 'relieved' or 'empowered' after completing the blood pressure test:

- 'It's alright now I know how to do it and that my reading was ok'
- 'I am really happy to know my readings'
- 'I was happy to learn how, and I was pleased with the result'
- 'I feel reassured that you can look after your health by doing things like this'

Feeling anxious before doing the blood pressure test:

- 'I was a bit worried depending on the results that may happen'
- 'I was worried, but I think it's just about getting used to the idea'
- 'Once I was shown a couple of times I felt better about doing it'
- 'I don't feel confident to do my Blood Pressure as I am getting old now'
- 'I was a little bit apprehensive as you don't want to find out you are not healthy!'
- 'Nervous but felt better doing it here as I definitely suffer from white coat syndrome'
- 'I will need to practice 1000 times to make sure I can do it'

Benefits of learning more about blood pressure:

- 'To me it is what everyone should do. It should be as important as learning about nutrition and other bits of living healthy'
- 'I felt good, I have learned how to do it properly and you explained the different thresholds and what it means to be systolic and diastolic'
- 'I have a BP monitor but didn't know how to take the readings before this'.
- 'I do it all time on my own monitor, but didn't know about crossing legs'
- 'I never know what readings count as good so didn't know how to tell what my readings meant before'



Objective 1: To support primary care to address health inequalities in treatment of Hypertension

The pilot had a target of reaching 2,000 people living within two PCN areas of Kent: Folkestone, Hythe and Rural and Gravesend Central. These PCNs were targeted as having low treatment to target measures for Hypertension.

The project reached 510 people, 25% of the envisaged target.

54.4% of people reported being registered with a GP in the Folkestone area

- 45% (231) of people were registered with a GP in the Folkestone, Hythe and rural PCN.
- 9.4% of people were registered with a GP in the Total Health Excellence PCN.

18% of people reported being registered with a GP in the Gillingham area

- 13.5% (69) of people were from a GP in the Gravesend Central PCN
- 4.5% of people registered with a GP in the Gravesend Alliance PCN area.

Spread of beneficiaries across PCN areas

PCN Area	Practice name	Number of Patients seen	Total patients per PCN
Folkestone, Hythe and Rural	Church Road Practice	2	231 people 45%
	Folkestone Surgery	28	
	Hawkinge and Elham Surgery	54	
	New Lyminge Surgery	10	
	Oaklands Health Centre	36	
	Sun Lane Surgery	12	
	White House Surgery	89	
Gravesend Central	Chalk Surgery (Lower Higham Road Surgery)	2	69 people 13.5%
	Gravesend Medical Centre	23	
	Pelham Medical Practice	16	
	Rochester Road Surgery	17	
Total Health Excellence	Manor Clinic	12	48 people 9.4%
	Sandgate Road Surgery	14	
	The New Surgery	10	
	Lydden Surgery	3	
	Guildhall Street Surgery	9	
Gravesend Alliance	The Riverview & Park surgeries	11	23 people 4.5%
	Oakfield Medical centre	10	
	Springhead health Ltd	2	
Garden City	Swanscombe Health centre	1	13 people 2.5%
	Parrock Street Surgery	10	
	Downsway Medical Practice	1	
	Pilgrims Way Surgery	1	
The Marsh	Martello Health Centre	4	7 people
	Church Lane Health Centre	2	
	Oakhall	1	
Mid Kent	Faversham Medical Practice	2	5 people
	Sellindge Surgery	3	
Malling	Wateringbury	1	4 people
	Snodland Medical Practice	3	
Rochester	The Thorndike Surgery	1	4 people
	City Way Medical practice	1	
	Castle Medical Practice	2	
Sevenoaks	St Johns Medical Practice	1	4 people
	Court View Surgery	2	
	Borough Green medical Practice	1	
Dartford	Horsman's Place Surgery	4	4 people
Medway Peninsular	High Parks Medical Practice	4	4 people
Canterbury North	Northgate Medical practice	2	2 people
Canterbury South	New Dover Road Practice	2	2 people
Dartford central	Temple Hill Group	2	2 people
Ashford Rural	Hamstreet Surgery	1	1 person
Gillingham South	Medway Medical Centre	1	1 person
Medway Rainham	Parkwood Family Practice	1	1 person
Medway South	Reach healthcare	1	1 person
The Ridge	Bearsted Medical Practice	1	1 person
Tonbridge	Hildenborough Medical Group	1	1 person
Out of Kent			8 people
Unknown			74 people

Table 1. Breakdown of registered GPs by PCN area

We were unable to identify which GP surgery 14.5% (74) of participants were registered to.

Three people were not registered with GP. Two of them had just moved into the area and one person was homeless. Healthwatch Kent assisted the pilot with information and support to help people register with a GP.

Reaching people not accessing primary care

The model was designed to reach people and communities within the target geographical areas who may not be engaging with health services and GPs. We specifically drew Hypertension Heroes from trusted community groups and organisations to champion the pilot and enable us to reach target communities.

Looking at the demographic data, the pilot engaged:

- People from across all age groups
- 65% (331) female, 34% (174) male, 1% (4) identified as Transgender. 1 person didn't give their gender
- 42% (219) of participants identified as being from a non white English, Scottish or Northern Irish background.
- 25% (127) of people gave a postcode reflecting one of the three most deprived areas in Folkestone; Folkestone East, Folkestone Harbour and Folkestone Central.
- 21% (107) of people gave a postcode reflecting one of the three most deprived areas in Gravesham; Northfleet North, Westcourt, Singlewell, Central and Riverside.
- 23% (92) of the Hypertension Hero sessions with people were delivered in a language other than English. Hypertension Heroes used their first language to engage other people within their communities.

Reaching people not accessing primary care

Qualitative evidence from participants indicate that the project is reaching people who don't usually access their GP.

- 'Great initiative, I feel comfortable taking my own blood pressure now. Much easier to come to own community; actually I never been to the GP'
- 'Good that it was set up so I could check my results instead of trying to call GP as I don't speak English'
- 'I do not like going to the GP as they don't always provide a translator, like they do here, so I can't understand what the GP is saying. Having someone explain it all to me takes away the fear and now I can do it myself and help my friends and family do it too'.
- 'This is my first time having my blood pressure checked in England'
- 'This has been great, especially here where we have people with drug problems, who might not be registered with a GP, or the GP won't have anything to do with them'
- 'We work with people who are homeless, and they don't have a GP, so them being able to pop into these sessions and check their blood pressure has been something they appreciated'
- 'This is fab for people like me who are unable to do this at home or get to their GP'
- 'I don't drive, so if you weren't here, I wouldn't be able to get to the Doctors to get it checked, so this makes it extremely accessible'
- 'Brilliant initiative; you are jumping on people before they even go to the doctors for their MOTs or getting the people who aren't bothering to go. I went to my health check and as I left, I said to the nurse I hope all of your other patients are healthy and well and she said, 'they are, the ones who care about their health and wellbeing are the ones who show up to the MOT's'. So, what you are doing is catching those who are not bothering with the health checks.'
- 'This has been helpful, as I can't get registered with a GP'
- 'I haven't seen my GP in over 2 years'



Objective 2: Raise levels of HT self management

Increased awareness & motivation

Community champions and Hypertension Heroes were trained to convey awareness raising and educational information to people in a conversational style approach.

58% (296) of people gave feedback on what they found most motivating about seeing a Hypertension Hero. The most frequently mentioned themes were:

Monitoring their blood pressure due to an existing medical issue or identified blood pressure issue. (Mentioned by 94 people)

- 'I need to keep any eye on my blood pressure, I am on tablets.'
- 'I used to be a carer for my mum and I would take her blood pressure, and then take mine too. It would be sky high, and then it goes down again. It always changes'
- 'I like to check it to see if the tablets are working'
- 'I wanted to get it checked, haven't checked for years, it takes ages to get an appointment with the GP'
- 'My parents have it and I am also on tablets so wanted to check how it was today'
- 'My dad has high blood pressure, and so do all his siblings, so I was interested to find out if I did too'
- 'My Mother has high BP and diabetes, now I should think about mine more'

Being proactive and aware of their general health. (Mentioned by 49 people)

- 'I am going to turn 40 soon, so I am aware that I need to start thinking about my health. Heart disease runs in my family.'
- 'Now I know it can cause a lot of other problems'
- 'Just knowing about general health is interesting'
- 'I am a widow and live alone, so I want to stay healthy'
- 'I have been feeling a bit anxious and not sure if this affects my blood pressure, not sure if I feel odd because of anxiety or high blood pressure so am glad to get it checked'

Learning how to manage their blood pressure. (Mentioned by 32 people)

- 'Knowing what causes it and that it can be related to other things is really interesting.'
- 'I now know that it's important to maintain a good diet to help control my blood pressure'
- 'It was good to hear about the different things I can do in my diet and exercise to make healthier choices and try to help my blood pressure'
- 'I didn't realise how much drinking could affect your blood pressure'

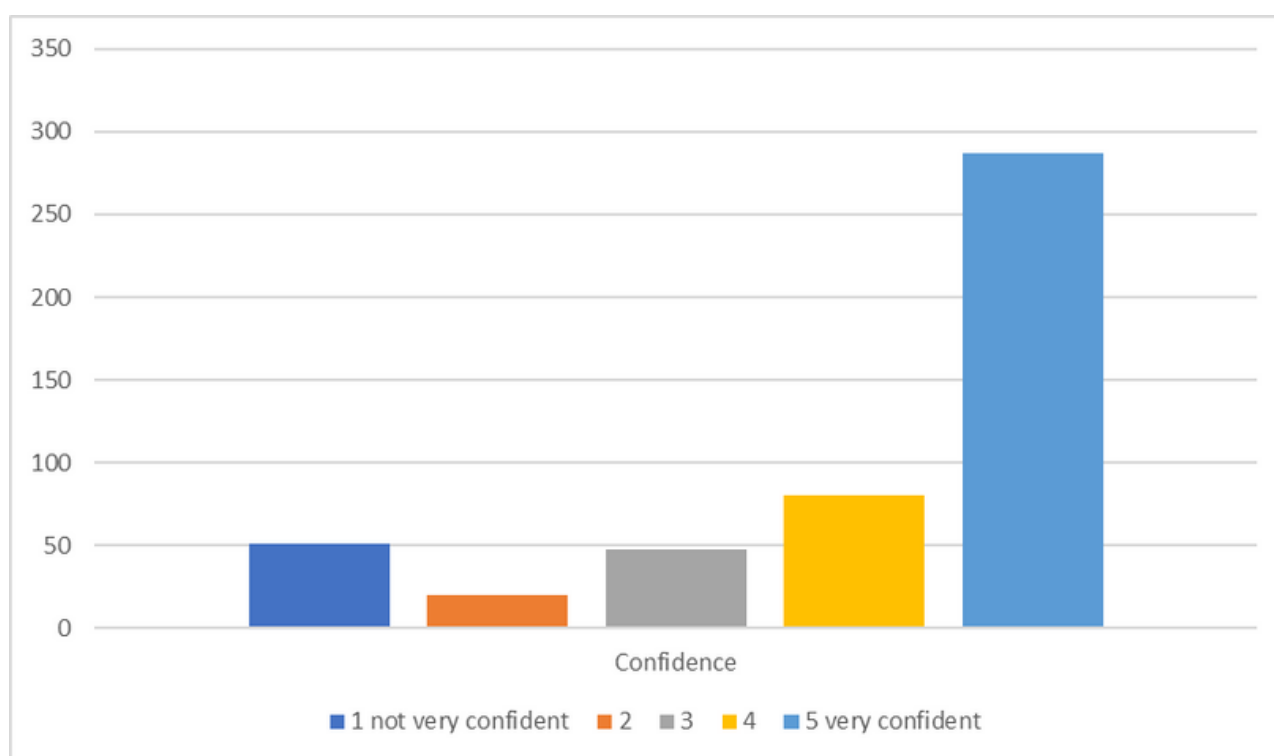
Objective 2: Raise levels of HT self management

Being more informed about hypertension (Mentioned by 32 people)

- 'I didn't know much about BP, so it was good to learn new information'
- 'I was curious to know if the grandchildren could affect my blood pressure!'

Increased confidence

At the end of the session people were asked if they felt more confident to take their own blood pressure as a result of talking with a Hypertension Hero. People were asked to rate this on a scale of 1 to 5.



72% (367) felt confident, or very confident, to do their own blood pressure check.

10% (51) of people still felt that they lacked confidence to check their own blood pressure.

At the end of the intervention 90% (64) of people on the orange pathway, said that they felt more confident about monitoring at home in future and liaising with their GP.

- 'This has been great, thank you. I have a machine at home but I don't like to use it, knowing that I can do it here (at a Hypertension Hub) gives me that bit of support I need. I'll make it part of my regular plan'
- 'It was great to get the chance to do this. I now have a bit more knowledge and confidence, which I can use when I talk to my GP, now I know what it all means!'

Increased self monitoring

510 people have been trained by Hypertension Heroes to take their own blood pressure using a monitor.

We found that 115 out of 119 people (97%) on the orange pathway knew how to report their blood pressure to their GP. But very few people were actually reporting their BP levels to the GP despite knowing how to do it.

One person, who had a reading on the orange pathway, came back to talk to us after seeing her GP. She said:

"I feel really good. Last time I was here I had my blood pressure taken it was high and the GP asked that I come and see a Hypertension Hero after 14 days. The GP has now agreed that I can stay on the same medication and keep monitoring."

Increased self monitoring

- 'If I hadn't sat down I would have been ignorant and I might not have gone and get it checked, now I know I need to seek advice from a professional.'
- 'I came in before and you identified my really high blood pressure. Now I am on tablets and come back here to keep checking it'
- 'I bought a monitor in lockdown. It's great that I can bring it here to use it and check I am doing it properly'
- 'I usually do my shopping on a Friday, so being able to pop in here when I am passing and check my blood pressure is really helpful, I don't have to go out of my way and I get to make sure I do it regularly'

The pilot has signposted 67% (81 of 119) of people on the orange pathway to community pharmacies for ongoing monitoring support.



Objective 3: Increase personalised approaches in BP self management

Looking at the principle of personalised care

Prevention

- 'I had no knowledge about doing it, but now I am here and happy to be better informed'
- 'People don't know about blood pressure problems unless someone tells them about it, and then they get it checked. It's great to be here, in our own language, we can get it checked and keep an eye on it.'
- 'Great to learn about blood pressure and what I can do. Prevention is better than medication'
- 'It's not something you think about in everyday life, so it's good to see it here in church as a reminder and a way we can look after ourselves before we have a problem'
- 'People don't know enough about it and it's important for them to understand their own health. If we educate enough people they can tell others and we can help take the pressure off GPs'

Shared decision making

When meeting a Hypertension Hero, a person is given tailored information specific to them. The aim of this information is to enable them to be able to make decisions about their own ongoing self management of their own blood pressure.

Of the 119 people identified on the orange pathway, 32% (38) spoke to us about how the session had helped them to understand that they could be more in control of their blood pressure and how monitoring at home could be an important part of looking after themselves.

- 'I want to get my BP down now'
- 'I am happy to monitor my BP at home, I'm aware that when someone else does it the readings are often high, so I can check at home and keep an eye on it'
- 'I have come back to have it taken again as I had a high reading last week'
- 'I will go and get a check-up with my GP'
- 'I will ask my GP to review my medication'
- 'I am going to ask my family to help support me to do regular readings at home'

Others identified how they would like to look at making changes to their lifestyle, most notably in relation to diet and exercise.

- 'I'll follow up the information you have given about healthy living'
- 'I am going to try and lose weight'
- 'I am definitely going to try and do more exercise'

The pilot signposted 67% (80 of 119) of people on the orange pathway to One You for lifestyle support.

Social prescribing

One of the aims of the pilot is to create a community support network for GPs to signpost people, who are not monitoring their blood pressure at home. The pilot had 3 people come to them via a GP signposting.

There is some evidence that signposting is taking place between community groups into the Hypertension Heroes project.

Hypertension Heroes are also signposting people into community groups that can offer people ongoing support to help them to be healthier or change their lifestyle.

We've seen a 4% increase in the number of people coming to Hypertension Hubs in the second half of the pilot as more community groups are signposting their beneficiaries for blood pressure testing.

We are unable to quantify the levels of signposting into community groups but do have qualitative evidence from the comments that people have submitted that shows this is happening.

- 'I'm just waiting on my blood pressure medication, however I cannot afford my prescription'. (Signposted to community organisation for financial help)
- 'I come here to get extra support from the staff to help me get to the pharmacy and read things, as I can't read very well'
- 'In our community we have literacy and numeracy issues. Here as a community, we can offer wider support to help people'
- 'We have a lot of problems with rough sleepers and they get moved around, we can encourage them to use this Hypertension Hub and continue to work with them in discussion about it and offer support'

Peer & community based support

There is qualitative evidence of growing peer support around awareness of Hypertension, as well as identification and self management of blood pressure within communities. 3.5% of those attending a Hypertension Hub, told us they had been informed about it by someone they knew.

- 'I was asked at work today when the next session would be and that's not the first time someone has asked the same question; word is obviously spreading'.
- 'I was very pleased with the Hub, and I am going to recommend it to my family'
- 'Once word get out in the community, people will know and come to get theirs checked more regularly'

There is qualitative evidence that increased awareness within communities is encouraging peer motivation for people who were not previously monitoring their blood pressure, to maintain a programme of taking regular readings and submitting them to GPs.

- 'A service available on a regular basis not staffed by people in "white coats" and in a more relaxed setting has to be beneficial to the community.'
- 'It was good doing it here (community group setting), I felt more relaxed'.
- 'This initiative makes it easier for me to get my blood pressure checked'
- 'It's been really good, once word gets out into the community people will know about it and come in to get their blood pressure checked regularly, kind of makes it fun to do it with others'
- 'We can help people who are still worried about using the monitor, or who have literacy and numeracy problems to understand their readings'
- 'Coming here is really helpful as most of the time I don't have the confidence to do it (monitor blood pressure) on my own'



Objective 4: To build a skilled and motivated community champion resource

Hypertension Hero volunteers








The Community Champion Hypertension Hero programme was designed to create friendly, approachable faces who have a 'laymen's' understanding of blood pressure and its associated health risks.

They work in small groups at pre selected community venues with the aim of reaching members of the public and talking to them about blood pressure. They offer people the opportunity to check their own blood pressure. Each Hypertension Hero Hub session was supervised by a paid co-ordinator.

Champions worked in a range of community venues as well as attending community events.

The basic set up was two chairs with a small table. The blood pressure monitor was on the table. The Champion sat with the member of the public and using a designed pathway flow on an iPad, they guided the person through the pre designed pathway options.

Volunteers were trained in how to show someone to take their own blood pressure. The training objectives ensured that each Hypertension Heroes should:

-  Feel confident and competent in talking to a lay person about Hypertension and the importance of self management
-  Feel confident that they could talk to a health professional, ie a GP or a Community Pharmacist about the Hypertension Hero role and the aims of the pilot
-  Feel confident and competent in using a blood pressure monitor and supporting someone to take their own blood pressure
-  Feel confident about following the pathway and signposting people accordingly
-  Feel confident and familiar with all recording and data capture forms required
-  Understand the role they will play at community Hypertension Heroes 'pop ups' and the boundaries to that role
-  Be able to start mapping their local communities and have informed a schedule of community 'pop up' activities and events

Hypertension Hero volunteers

28 volunteers were trained to become Hypertension Heroes.

These volunteers gave 183 hours of their time. 66% of the hours spent at Hypertension Hubs during the pilot were provided by volunteers.

Volunteer Hypertension Heroes supported 346 (68%) people to monitor their blood pressure.

Volunteers who supported over 20 people to undertake their own blood pressure checks were celebrated and presented with a certificate of thanks.



These photos show two volunteers from the Nepalese community who helped people in their community by translating the information into Nepalese and encouraging more people to come forward to get their blood pressure checked.

Community Hubs

The pilot worked with nine community organisations in the Folkestone and Gravesend area.

- **Rethink Sahayak**
- **North Kent Caribbean Network**
- **Youth Ngage**
- **City Praise Centre (Gravesend)**
- **Royal British Legion**
- **Age UK Hythe and Lyminge**
- **Folkestone Nepalese Community Centre**
- **Sunflower House**
- **Kent Coast Volunteering**

These organisations became our Hypertension Hubs, fostering engagement with communities and encouraging people from within those communities to volunteer as Hypertension Heroes.

Each participating organisation received remuneration for their time in supporting the activity and enabling access to the communities they serve, although some organisations wanted their funds to be donated to charity.

Together with our community partners, we established nine Hypertension Hubs in Folkestone. We found community partners in Folkestone came on board much quicker and so we reached more people in Folkestone as a result. 63% (323) of participants were seen through these Hubs as well as by attending community events.

45% (231) of people told us they were registered with a GP in the Folkestone area.

We had seven Hypertension Hubs in Gravesend. 37% (187) of participants were seen at these Gravesend Hubs as well as at local events.

27% (140) of people told us they were registered with a GPs in the Gravesend area.

Community Hubs

Location of Hypertension Hero activities in Folkestone	Number of people engaged	Location of Hypertension Hero activities in Gravesham	Number of people engaged
Folkestone Nepalese Community Centre	97	Youth <u>Ngage</u>	41
Folkestone Sports Centre	60	City Praise Church	36
Hawkinge Community Centre	55	Rethink <u>Sahayak</u>	34
Age UK Hythe and <u>Lyminge</u>	46	North Kent Caribbean Network	30
Marigold Centre	20	Gravesend Methodist Church	18
<u>Hythe Dementia cafe</u>	15	Punjab United Football Club	18
Hawkinge Music Festival	13	Woodville Hall Civic Centre	6
South Kent Mind Folkestone	11	Sunday Funday (City Praise Church)	4
Sunflower House	6		
	323		187

Table 2. Number of people engaged at community venues and events

"We're extraordinarily grateful for the participation grant which will be used very carefully for the benefit of our military veterans - thank you so much."

Royal British Legion

Community pop ups

As well as delivering Hypertension Hubs in community organisations, volunteers also delivered 'pop ups' at community events.

- **Hawkinge volunteers enjoyed some tunes in between supporting people at the Hawkinge Music Festival.**
- **Volunteers from Royal British Legion made a visit to the Hythe Dementia Café where they were able to support both carers and those they care for, to learn how to take their own blood pressure.**
- **Youth Ngage kindly ran a pop up at their annual event in Gravesend which included dancing and a spectacular fashion show.**
- **Volunteers were warmly welcomed with slushies to keep them cool at the City Praise Centre in Gravesend after their Sunday service.**

Public feedback about the Hypertension Hero project

100% of public feedback was positive.

Within this there were three core themes, listed in order of frequency mentioned:

- Accessibility of a community setting
- The environment within a community setting
- Benefits of wider community gaining knowledge and understanding of hypertension

Accessibility of a community setting

- 'I knew it was going on here, but I think it's great you are here. At the moment it's better than trying to get a GP appointment. I don't want to use the GP machines'.
- Doctors don't have the time to explain everything fully or explain what readings mean. I really enjoyed learning about it as well as just having the number'
- 'All health pop ups are a very good idea'
- 'Easy place to get to, all sociable people that work and volunteer here, so they can reassure and support you'
- 'Excellent because people won't go to their GP but are more likely to come here'
- 'Good idea because you can't get GP appointments sometimes, however surgeries are now opening, and they have a BP monitor in the reception'
- 'Good idea to catch people who don't bother with doctors'
- 'Helpful to have it here, I have to book at GP and book a translator, so it is a bother, whereas if I come here, it is easier'.

Public feedback about the Hypertension Hero project

The environment within a community setting

- 'A lot easier and more relaxing. The doctors surgery always makes my Blood pressure high straight away. This is a much better place for me to have my readings taken'.
- 'Great idea especially in the gym where people are health conscious'
- 'I found I relaxed better than going to a pharmacy or Doctors. Can I come back here?'
- 'I one hundred percent am all for this initiative, I don't think the fitness industry uses this enough. If you go into a gym your blood pressure is checked, but if you go play 5 a side football you don't get it checked'.
- 'Great idea. Anything to help people take more ownership in the community and also 'coming somewhere that isn't a medical clinic. The people we see here find GPs very frightening, white coat terror'

Benefits of communities gaining knowledge and understanding of hypertension

- 'Good idea to help raise awareness for people in the community otherwise how will they know about it'
- 'Good idea, I wouldn't have checked if you weren't here. You don't think about how important it is. Can have lots of negative effects'.
- 'Good idea, people don't think about Hypertension until it's too late, so more people should have access to these hubs and know about it.'
- 'I think it is awesome - I think we should do more like this to make people aware and to catch people to come and get checked'.
- 'Really positive and helpful for our community especially adults and the youth to know how important it is'
- 'Absolutely fantastic idea; the best way to achieve maximum results is when you involve the community, as many people won't go to the conventional settings it makes it accessible'.

Lessons from the pilot

EK360 reflections

Enthusiasm of volunteers.

A small core of excited passionate people is vital to generate the necessary local excitement to embed it within communities. Take up rates of volunteers has been slower than anticipated, but those that did get involved delivered more hours than we thought.

Start small and grow.

The pilot has targeted PCN areas to work within, but this is still a significant area to build community sector engagement and volunteer commitment across.

Partnerships with PCNs.

In Kent, we have not been able to foster a 'sponsor' within the PCN areas and this is demonstrated by only 3 people being signposted to the Hypertension Hubs directly by their GP.

Hypertension Hero reflections

Process improvements

- 'I felt some of the questions were not particularly appropriate to ask people.'
- 'Personally I feel that if any improvements were necessary it would be around the IT software and advertising. Could the software be set up to carry over Name, Date, and Venue for the duration of each event. (I do find it rather time consuming putting that in each time – especially the date, with drop down boxes, when a people are waiting).'
- 'Some posters up in the community giving dates and venues would hopefully increase footfall, but I believe this is being looked into.'

Accessibility

- 'Other languages is a must. A couple of times I have had non English speakers come to the Hubs and their friends have kindly translated. Alternatively attend community groups where translation will be on hand.'

Public reflections on what more could be done

More community hubs

- 'Think about younger people, so they can learn about Hypertension earlier. For example schools and colleges. It needs to be educated to the young so it is a culture rather than something you think about when you are poorly'
- 'Go to church coffee mornings'
- 'Having local hubs. Not just BP but healthy eating and blood sugar too would be good. You don't get chance to check that'
- 'More of this pop up in the community. People don't like going to GPs'
- 'This is a great idea especially at the sports centre; maybe a local library too'

Advertising

- Advertising it more, people who are not aware should be aware, different communities and ethnicities and schools'
- 'Creating awareness by posting on social media platforms'
- 'More ideas like this, getting this advertised better so more people and GPs know'

Accessibility

- 'Provide interpretation leaflets to remind us what the readings mean'
- 'Could we have the monitors in our own language?'

Further health needs

- 'Could we have better links with stuff about exercise, diet and things to help us?'
- 'Could we do blood sugar tests here too? More awareness about that would be good'

Proposed next steps

Evidence from this pilot shows that a community asset-based personalisation approach can work in a structured partnership between the VSCE, Public health and the NHS.

It is proposed that a second phase of the pilot builds on four core elements:

Asset Based Community development approach, building on the capacity already created with a focus on:

- Shifting ownership of the Hypertension Hubs and events from EK360 to the VCSE organisations involved thus ensuring a sustainable, affordable and cost effective model of partnership working that aims to:
 - increase the range and volumes of people volunteering to become Hypertension Heroes
 - increase the range and volume of people getting BP checks within their communities as a result of the work of volunteer champions with a focus on targeted communities

Targeting Communities

- We would like to work more proactively with practices and PCNs to identify target cohorts that we can then build relationships with and introduce the model. In this way we wish to develop the model to reach deeper into communities that are not accessing primary care, which will be unique to each PCN/Practice.

Peer leadership

- The Hypertension Heroes have been incredible community champions, giving their time and energy to promote hypertension within their communities. We would like to build on this, and offer those people motivated to volunteer, opportunities to continue championing issue for their communities, this could include exploring links with peer leadership schemes.

Fostered joined up working across VCSE and primary care

- To build further synergy with GP practices and Community Pharmacies, for example to enable volunteer sessions to operate within Community Pharmacies, supporting them to build capacity for HT monitoring.
- Online/ App based reporting of BP. We have not been able to look at linking people up to systems to feedback into GPs. We would like to explore this further in future development of the model exploring online apps and technology to help align reporting from home monitoring better into GP systems.

Proposed next steps

Embedding a personalised care approach

Health checks

- Ensuring target communities, currently underrepresented in health checks, are given information about eligibility for health checks, which are the primary care pathway for ARS roles and further health coaching

Accessibility

- Continue working with Healthwatch to ensure people can access information about their rights and accessibility routes to elements identified within their self care plans.

Signposting and further community support

- We would like to enhance the existing training and pathways to create more opportunities for signposting to community based support and wellbeing services. Volunteers have demonstrated they are able to take on board and apply a systematic, quality assured working process. We would like the training to include a section on helping people think about creating a personalised plan to reflect on and capture their identified self care aspirations. We would like to extend the reach of this project to incorporate signposting to Community Pharmacists and Health and Wellbeing Coaches (HWBCs)

Understanding if people do change their behaviours

- The current model does not enable us to follow up to see if people have in fact changed their behaviours and maintained their motivation to self monitor and manage their blood pressure. We would like to establish systems to follow up with people after they signposted to healthy lifestyle services (OneYou and A Better Medway).

Appendix 1 - Ethnicity

Identified Ethnicity	
Afghan	1
African	35
African Caribbean	1
Other Asian Background	5
Other Black / African / Caribbean background	8
Other White Background	5
Bangladeshi	1
Black African	1
British Asian	3
Caribbean	20
English/Welsh/Scottish/Northern Irish/British	291
Indian	18
Irish	1
Latvian	1
Lithuanian	1
Mixed Caribbean	1
Nepalese	97
Pakistani	2
Filipino	1
Slovakian	1
Sri Lankan	1
Vietnamese	1
White & Asian	2
White & Black African	6
White & Black Caribbean	3
Prefer not to say	3
	510

Appendix 2 - Postcodes of participants

CT1	Canterbury (south and city centre)	2
CT4	Chartham, Bridge	1
CT5	Whitstable, Seasalter, Tankerton, Chestfield, Swalecliffe, Yorkletts	1
CT10	Broadstairs, St Peters	1
CT12	Northwood, Minster-in-Thanel, Cliffsend, Monkton, Manston	1
CT16	Whitfield, Temple Ewell	2
CT17	River	1
CT18	Hawkinge, Lyminge, Etchinghill, Capel-le-Ferne, Densole, Newington	23
CT19	Folkestone (north), Cheriton	60
CT20	Folkestone (south), Sandgate	44
CT21	Hythe, <u>Saltwood</u> , <u>Lympne</u> , <u>Postling</u> , <u>Newingreen</u> , West Hythe, <u>Westenhanger</u>	23
TN14	<u>Cudham</u> , Otford	4
TN28	New Romney, <u>Greatstone-on-Sea</u> , <u>Littlestone-on-Sea</u>	2
TN29	Lydd	4
ME1	Rochester, <u>Burham</u> , Wouldham	4
ME2	Strood, <u>Halling</u> , <u>Cuxton</u> , <u>Frindsbury</u>	14
ME3	Rural, <u>Hoo St Werburgh</u>	5
ME4	Chatham	3
ME5	<u>Walderslade</u> , Blue Bell Hill, <u>Lordswood Luton</u>	3
ME6	<u>Snodland</u> , West <u>Malling</u>	1
ME7	Gillingham, Rainham, Hempstead	7
ME13	Faversham, Boughton under <u>Blean</u> , Selling and rural area	1
ME14	Maidstone, <u>Bearsted</u> , Grove Green	2
ME15	<u>Bearsted (Madginford)</u> , <u>Downswood</u> , Shepway, <u>Senacre</u> , Maidstone Town Centre, Loose, <u>Mangravet</u> , Park Wood, <u>Tovil</u> , East Farleigh, West Farleigh	1
ME16	<u>Barming</u> , Allington and west Maidstone	1
ME17	<u>Hollingbourne</u> , <u>Hucking</u> , <u>Harrietsham</u> , <u>Lenham</u> , Boughton <u>Monchelsea</u> , Linton, <u>Coxheath</u> , Chart Sutton, East Sutton, Langley, Kingswood, Sutton Valence	2
ME18	<u>Wateringbury</u> , <u>Mereworth</u> , Teston, Nettlestead, West Peckham, Yalding, <u>Laddingford</u>	12
ME19	West <u>Malling</u> , Kings Hill, <u>Leybourne</u>	41
ME20	Aylesford, Ditton, Larkfield, Eccles	9
DA1	Dartford, Crayford, Barnes Cray	3
DA3	Longfield, Hartley, New Ash Green, New Barn, <u>Fawkham</u>	2
DA5	Bexley, Bexley Village, <u>Blendon</u> , parts of Albany Park and <u>Joyden's Wood</u>	1
DA9	Dartford, Greenhithe, Ebbsfleet Valley	2
DA11	Gravesend (west), Northfleet	31
DA12	Gravesend (east), Chalk, <u>Shorne</u> , Cobham	76
DA13	<u>Meopham</u> , <u>Istead Rise</u> , Vigo, <u>Southfleet</u>	4
DA15	Sidcup (north), <u>Blackfen</u> , <u>Lamorbey</u> , Longlands, Avery Hill (part)	3
DA16	Welling, <u>Falconwood</u> , East Wickham, Crook Log	1
	Not Recorded	103

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We engage
We reflect
We improve peoples
lives