

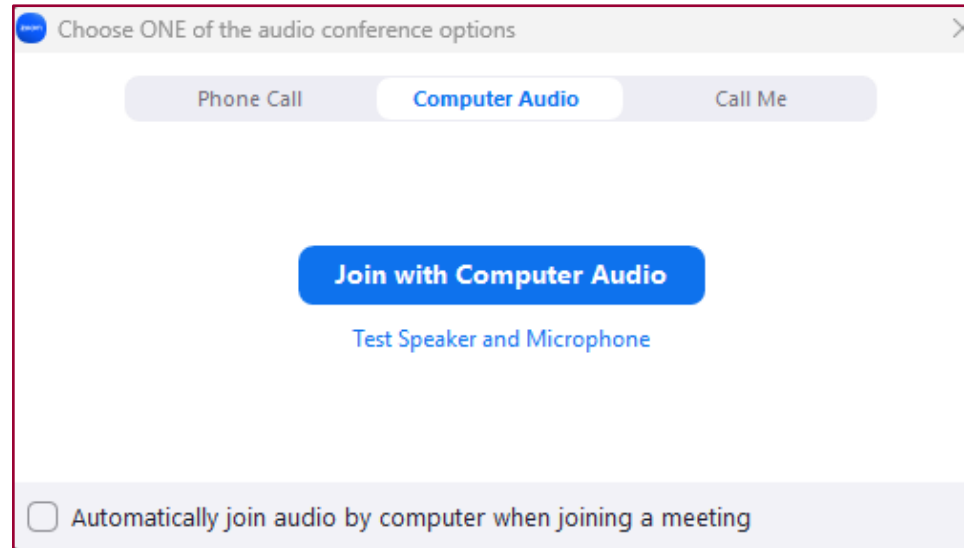
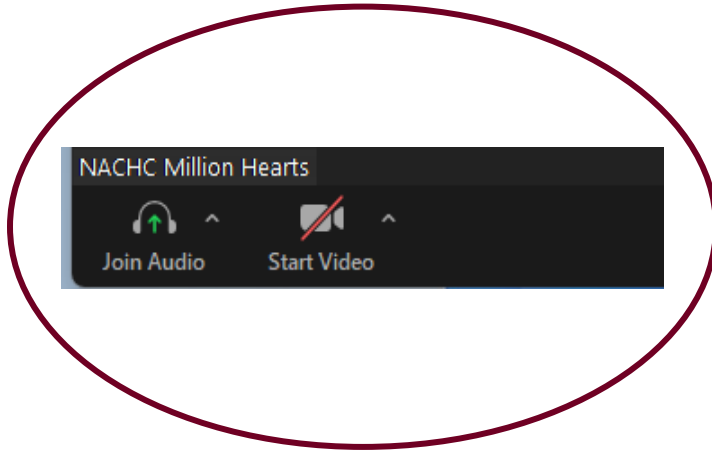
Ensure you've connected to audio!

Option 1: "Call In"

Follow the process for the A) Phone Call or B) Call Me options

Option 2: "Use Computer Audio"

You must have computer speakers and microphone



After connecting, if you don't see a phone/headset icon next to your name in the attendee list, please attempt to connect your audio again!

**Million Hearts®
Self-Measured Blood Pressure
Monitoring (SMBP) Forum**

September 14, 2023
1:00-2:00 PM EST

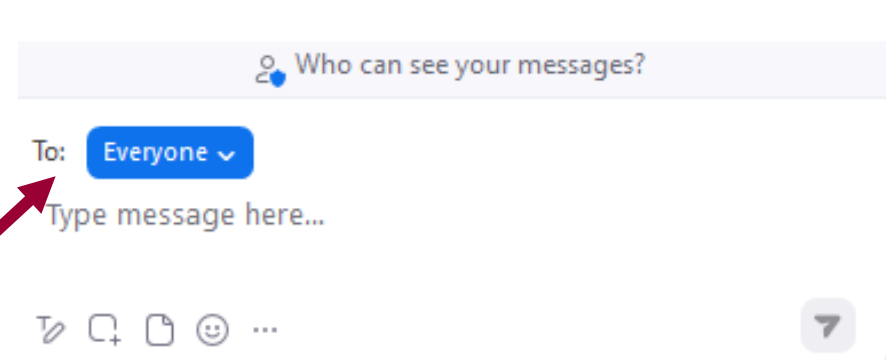
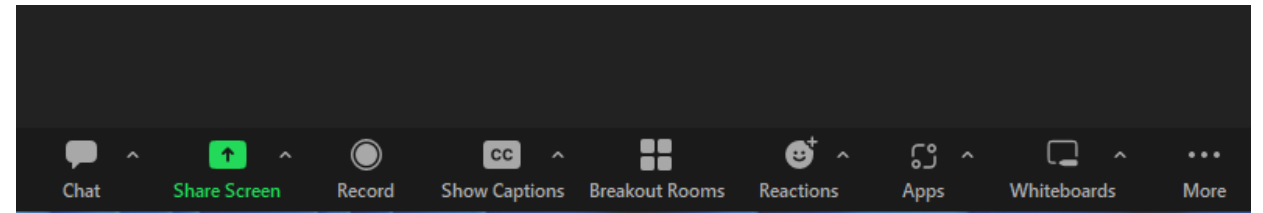


How to Chat

The chat feature is available to pose questions to the group or make comments anytime throughout today's webinar.

Submit to **"Everyone"** and click the send button.

Introduce yourself!
Where are you joining us from?
Share your questions!



Disclaimer

The opinions expressed by authors contributing to this project do not necessarily reflect the opinions of the US Department of Health and Human Services, the Public Health Service, the Centers for Disease Control and Prevention, or the authors' affiliated institutions. Use of trade names is for identification only and does not imply endorsement by any of the groups named below.



Agenda

- Welcome, Introductions, and Agenda Overview
- Featured Presenters
 - Laney Poye, Preeclampsia Foundation
 - Wendy Martinson, MSN, RN - UConn Health SMBP for Pregnant Women
 - Breana Turner, MPH, CHES – Huddle Up Moms
- Open Discussion
- Resources and Updates



Today's Objectives

- Highlight the importance of support to pregnant and postpartum women in managing hypertension.
- Discuss support that can be provided by community organizations.
- Hear from you all about tools, program, connections you may have in this space.



What does it take? SMBP Tasks by Role

Must Be Done by a Licensed Clinician	Can Be Done by a Non-licensed Person (e.g., medical assistant, local public health department, community health organization, community health workers)	Must Be Done by Patient
<ol style="list-style-type: none"> 1. Diagnose hypertension 2. Prescribe medication(s) 3. Provide SMBP measurement protocol 4. Interpret SMBP measurements 5. Medication titration 6. Lifestyle modification recommendations 	<ol style="list-style-type: none"> 1. Provide guidance on home blood pressure (BP) monitor selection 2. If needed, provide home BP monitor (free or loaned) 3. Provide training on using a home BP monitor 4. Validate home BP monitor against a more robust machine 5. Provide training on capturing and relaying home BP values to care team (e.g., via device memory, patient portal, app, etc.) 6. Reinforce clinician-directed SMBP measurement protocol 7. Provide outreach support to patients using SMBP 8. Share medication adherence strategies 9. Provide lifestyle modification education <p>Optional Tasks:</p> <ol style="list-style-type: none"> 1. Reinforce training on using a home BP monitor 2. Reinforce training on capturing and relaying home BP values to care team Reinforce knowledge of behaviors that can trigger high blood pressure 	<ol style="list-style-type: none"> 1. Take SMBP measurements 2. Take medications as prescribed 3. Make recommended lifestyle changes 4. Convey SMBP measurements to care team

The Cuff Kit™ Project



The Cuff Kit



June 2020-ongoing



Cuff Kit Project Goals

- Empower pregnant and postpartum patients to recognize and report symptoms *and* signs
- Educate patients and families on accurate self-measured blood pressure (SMBP)
- Support reduction of noted disparities and COVID-19 effects
- Support outpatient monitoring and management of BP
- Collect data to demonstrate efficacy and cost effectiveness
 - Diagnosis and management processes
 - Prenatal and postpartum care
 - Payor coverage

The Cuff Kit

brought to you by
**PREECLAMPSIA™
FOUNDATION**
www.preeclampsia.org

- BP Monitor & Batteries
- Instructions including link to online video and website
- Tracking Log
- Signs and symptoms education
- Postpartum preeclampsia information
- “Still at Risk” rubber bracelet
- Patient feedback postcard



SCAN ME



www.preeclampsia.org/the-cuff-project







Automated blood pressure monitor/cuff with batteries

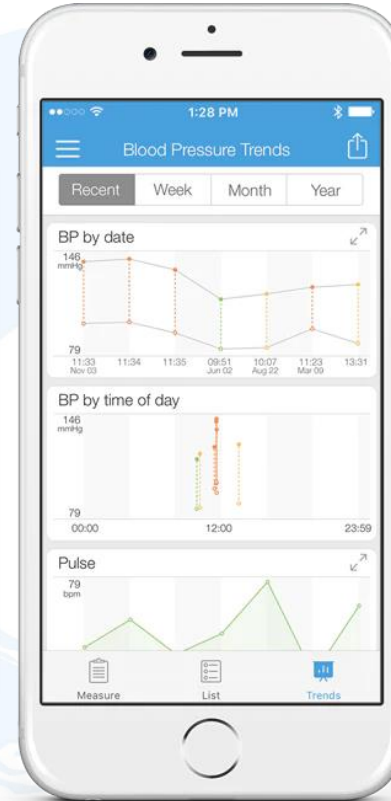


iHealth App






Everything You Need in One App

-  View results instantly and learn more about each measurement.
-  Check if your blood pressure is in the normal BP range based on JNC standards.
-  Take notes and record your mood or activity with each measurement.
-  Store results in a digital logbook.



Stay Up-to-Date on Your Health

-  Real-time results and trends.
-  Set reminders to measure your blood pressure.
-  Export your data as CSV, XLS, or PDF to share with your doctor.

Learn more and contact us



Laney Poye
Director of Communications and Engagement
Laney.poye@preeclampsia.org

cuffkit@preeclampsia.org

www.preeclampsia.org/the-cuff-project

Million Hearts

UConn Health SMBP for Pregnant Women

Wendy Martinson

wemartinson@uchc.edu

UConn Health background



UConn Health's Maternal-Fetal Medicine practice is the only high-risk physician practice in the Hartford area, serving a large portion of low-income women.

Although Medicaid covers SMBP only 53.85% of our pregnant Medicaid population picked up their BP cuff at their pharmacy/DME provider.

Payers have varying coverage (cost cap/no coverage) for SMBP.

In 2021 our maternal population was:

- 44% Maternal population had Medicaid
- 26% High-risk
- 3,772 Pregnancies
- 1,663 Low-income Medicaid
- 745 Women declined to identify race
- 691 Women identified as Black, African American, Indian or Alaskan Native
 - These races are 2-3 times more likely to die from pregnancy related causes than white women, disparity increases with age
- 963 High risk pregnancies

Million Hearts Grant Proposal

- In real-time provide Preeclampsia Foundation Cuff Kit™ to at risk and high-risk maternal women and offer telephonic pharmacist consult for education and counseling for maternal women with questions related to aspirin or cardiac medications

SMBP project description

- Screening in Epic for at-risk/high risk maternal women who should have SMBP (inpatient/outpatient)
- If positive screening provide Cuff Kit™ in real time along with education
- Telephonic pharmacist consult for maternal women hesitant to take prescribed ASA or BP medication to promote adherence
- Community Health Specialist to assist with SDoH

Screening questions:

1. Is the patient at risk for HTN, HTN, preeclampsia, post-partum preeclampsia?
2. Is the patient Black, African American, American Indian/Alaskan Native? (This population will receive a cuff kit regardless of diagnosis).
3. Did the provider identify another high-risk condition in need of a cuff kit?

Preeclampsia Foundation Cuff Kit™

Cuff Kit™ includes:

- 1 Bluetooth enabled monitor
- 1 Arm cuff, standard (8.6 - 16.5 inches) or extra large (16.5 - 18.9 inches)
- Welcome letter with QR code for instructional/informational video
- "Still At Risk" bracelet
- BP log, instructions form
- Preeclampsia Signs & Symptoms brochure
- Postpartum Signs & Symptoms brochure
- Feedback postcard
- *Everything in the kit is bilingual (English/Spanish)



EPIC Documentation & Tip Sheets

How to document in Epic – Cuff Kit was offered/given

1) If patient qualifies for BP Cuff Kit, document in the **Rooming Tab** → **BP Monitoring Flowsheet**

The screenshot displays the Epic EMR interface for a patient named 'Ob, Bpatest'. The top navigation bar includes icons for calendar, chart, and other functions. Below this, a row of tabs is visible: 'Chart R...', 'Episode', 'Rooming', 'Screenings', 'Pl...', 'NST', 'Comm...', 'HDA', 'Pre...', and 'Ultras...'. The 'Rooming' tab is currently selected and highlighted. Underneath the 'Rooming' tab, a grid of sub-tabs is shown, including 'Visit Info', 'Interpreter', 'Decline Interpreter', 'Grievance Form', 'Dating', 'Glucose Monitoring', 'Allergies', and 'Medication Review'. The 'BP Monitoring' sub-tab is highlighted with a red rectangular box. On the left side of the interface, a patient summary card is visible, showing the name 'Bpatest Ob', gender 'Female', age '34 y.o.', date of birth '5/5/1988', MRN 'T50002565', and a red alert banner that reads 'Fall Risk?: Due'.

- 2) **Complete documentation:** (*documentation is required for reporting to grant*)
- a. Document whether BP Cuff Kit was given, if yes document size of cuff
 - b. If patient was offered BP Cuff Kit, but declined because they already have a cuff at home, document *Patient has a BP Cuff at home: Yes.*

Rooming

Visit Info Interpreter Decline Interpreter Grievance Form Dating Glucose Monitoring Allergies Medication Review

Overview & Plan Vitals and Notes **BP Monitoring** Results Console NST Episodes Preg Checklist Screenings MyChart Proxy

Ultrasounds

BP Cuff Kit/Monitoring

Responsible Create Note Show Row Info Show Last Filed Value Show All Choices

Discharge Blood Pressure Monitoring: Complete for Patient being Discharged with a Hypertension diagnosis or at risk for Hypertension.

Preeclampsia Foundation Cuff Kit- Received

Yes, provider recommends SMBP preeclampsia cuff kit and cuff was given and reviewed education material

No, patient received cuff at a previous visit/encounter Does not meet recommendations for SMBP cuff

Cuff size

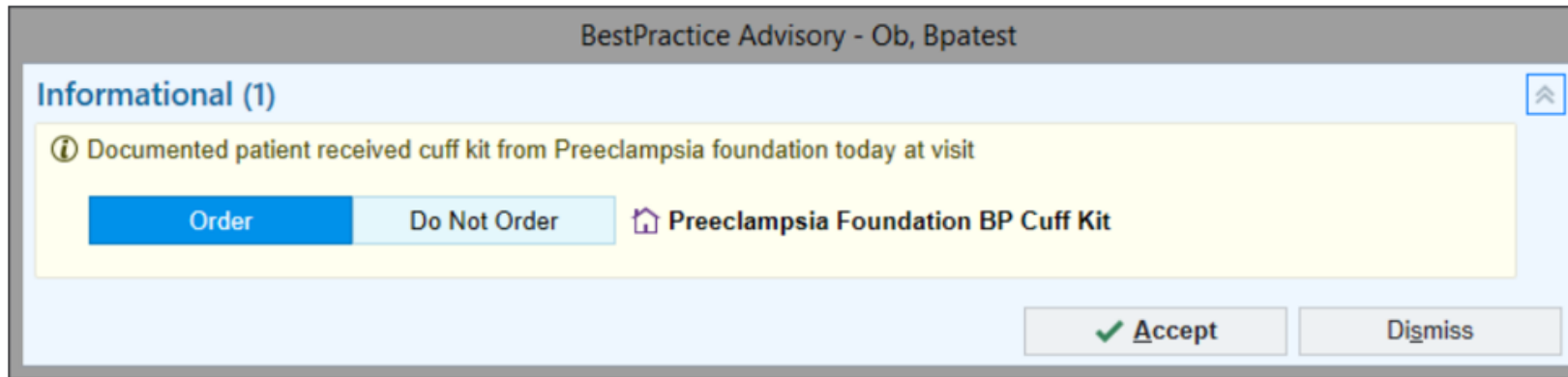
Standard cuff (8.6 - 16.5 inches) Extra large (16.5 - 18.9 inches)

Patient has a BP Cuff at Home

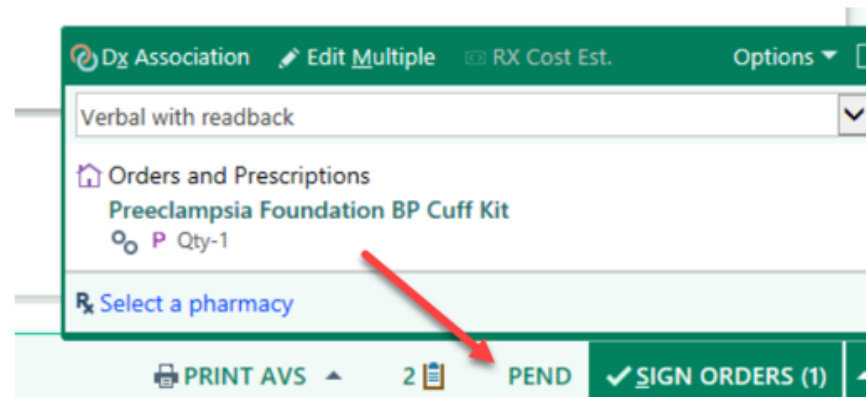
Yes No

Restore Close Cancel Previous Next

- 3) If BP Cuff Kit was given to patient is documented, BPA will fire to place order for BP cuff. This order **will not** route to a pharmacy. This is required for insurance purposes for quality programs.
- Click **accept**; and **Sign order**.



- **if RN clicks the flowsheet row, the BPA will fire with order, and they will PEND order for physician to sign****



- 4) **New referral order** is available for a Pharmacist Telephonic Consult with Population Health Pharmacist Jillian Carey.
- a. If clinician determines patient would benefit from a pharmacist consultation place order for **Ambulatory referral for Pharmacist Telephonic Counseling**
 - b. Select Reason:
 - i. **Low dose aspirin counseling**
 - ii. **Medication counseling blood pressure management**
 - iii. **Medication access issues**
 - c. Document any comments if necessary for pharmacist.
 - d. Sign referral. This order will route specifically to Jillian Carey.

Ambulatory referral for Pharmacist Telephonic Counseling ✓ Accept ✗ Cancel

Class:

Referral: Override restrictions

To dept:

To dept spec:

To provider:

By provider:

Reason:

⚠ Reason For Pharmacist Telephonic Counseling?

Status: Normal Standing Future

Sched Inst.:

Show Additional Order Details ▾

⏪ Next Required ✓ Accept ✗ Cancel

Results

- EPIC Report
 - 212 cuffs provided from April 2023-July 30, 2023
- Huge staff satisfier
- Convenience for patient
- 0 Pharmacist consults

Race/Ethnicity	No.
American Indian or Alaskan Native	2
Asian	7
Black or African American	72
Hispanic or Latino	55
Other	5
Unknown	3
White	68

Total C-Section
38

Readmissions Diagnosis	Number
Post partum preeclampsia	4
Abd Pain resulting in Lap/Chole	1
Dehiscence/wound infection	1
Total Readmissions	6

Twins	Result
Delivered	6 sets of twin live births
Pregnant	3

Results to Date

- 212 total women enrolled
- 49 babies delivered at 37 weeks or earlier
- 97 women remain pregnant
- 117 live births to date

Week	Number	Result
11 weeks	1	Miscarriage
16 weeks	1	Fetal demise
19 weeks (termination)	1	Termination for congenital
22 weeks	1	Fetal demise
30 weeks	1	Live
31 weeks	2	Live (twins)
32 weeks	3	Live (1 set twins)
33 weeks	2	Live (twins)
34 weeks	3	Live
35 weeks	2	Live
36 weeks	8	Live
37 weeks	28	Live (1 set twins)
38 weeks	24	Live (2 sets twins)
39 weeks	29	Live
40 weeks	11	Live
41 weeks	2	Live
HIPAA-could not access record unsure of weeks	1	Live
Transfer to UConn Post Delivery-Baby needed our NICU	1	N/A-delivered at previous hospital
Currently pregnant	97	N/A
Live births	117	
Fetal demise/miscarriage/termination	4	Fetal demise

Challenges and pivots

- Large volume of standard BP cuffs vs. large/xl
- Referrals for Pharmacist consult
 - Order in Epic
 - Epic tipsheet
 - 2 reminder emails sent to providers
- Report development
- Work around with DSS to capture BP Cuff given for quality P4P Program

OB and Womans Health

As part of the Million Hearts grant, if your patient has questions or needs additional education on their low dose aspirin or high-risk pregnancy related medications you can now order a telephonic pharmacist consult.

New referral order is available for a Pharmacist Telephonic Consult with Population Health Pharmacist Jillian Carey.

- If clinician determines patient would benefit from a pharmacist consultation place order for **Ambulatory referral for Pharmacist Telephonic Counseling**
- Select Reason:
 - Low dose aspirin counseling**
 - Medication counseling blood pressure management**
 - Medication access issues**
- Document any comments if necessary for pharmacist.
- Sign referral. This order will route specifically to Jillian Carey.

The screenshot shows the Epic interface for an "Ambulatory referral for Pharmacist Telephonic Counseling" order. The form includes fields for Class (Internal Ref), Referral (Override restrictions), To dept (Pharmacy), To provider, and By provider. The Reason section is highlighted with a red box and contains three options: "Low dose aspirin counseling", "Medication counseling blood pressure management", and "Medication access issues". The Status is set to "Normal". The form also includes a "Sched Inst:" field and a "Show Additional Order Details" link. The bottom of the form has "Accept" and "Cancel" buttons.

Sustainability and spread

- Working with our Pharmacy Department to become a contracted provider to dispense BP cuffs
 - If payer covers will dispense cuff and charge insurance
 - If no coverage will provide free cuff
- Working with UConn Foundation for ongoing financial support

Lessons Learned

- Engaged Physician leader & Epic Analysts
- Leverage EMR
 - EPIC team (inpatient & outpatient)
- Order Cuff Kit™ early
 - Delays from UConn and vendor due to workflows
 - Standard cuff size fits majority of our population
- Providers did not utilize telephonic pharmacist consult
- Frequent marketing follow up
- Happy staff



<https://today.uconn.edu/2023/07/uconn-health-receives-50000-million-hearts-health-equity-grant/>

Final thoughts

- Once Epic build and report was completed program ran efficiently
 - Make workflow simple
 - Strategic placement of documentation in the Epic flowsheet
 - Location should be with all screenings
 - No additional clicks or searching in Epic
- Workflow was easily adapted by the MA and RNs
- Simple process for providers to place Cuff Kit order

Thank you to the Million Heart Team for the grant funding and the ongoing support to make our program successful.

Thank you





HUDDLE UP MOMS

EDUCATE | CONNECT | SUPPORT



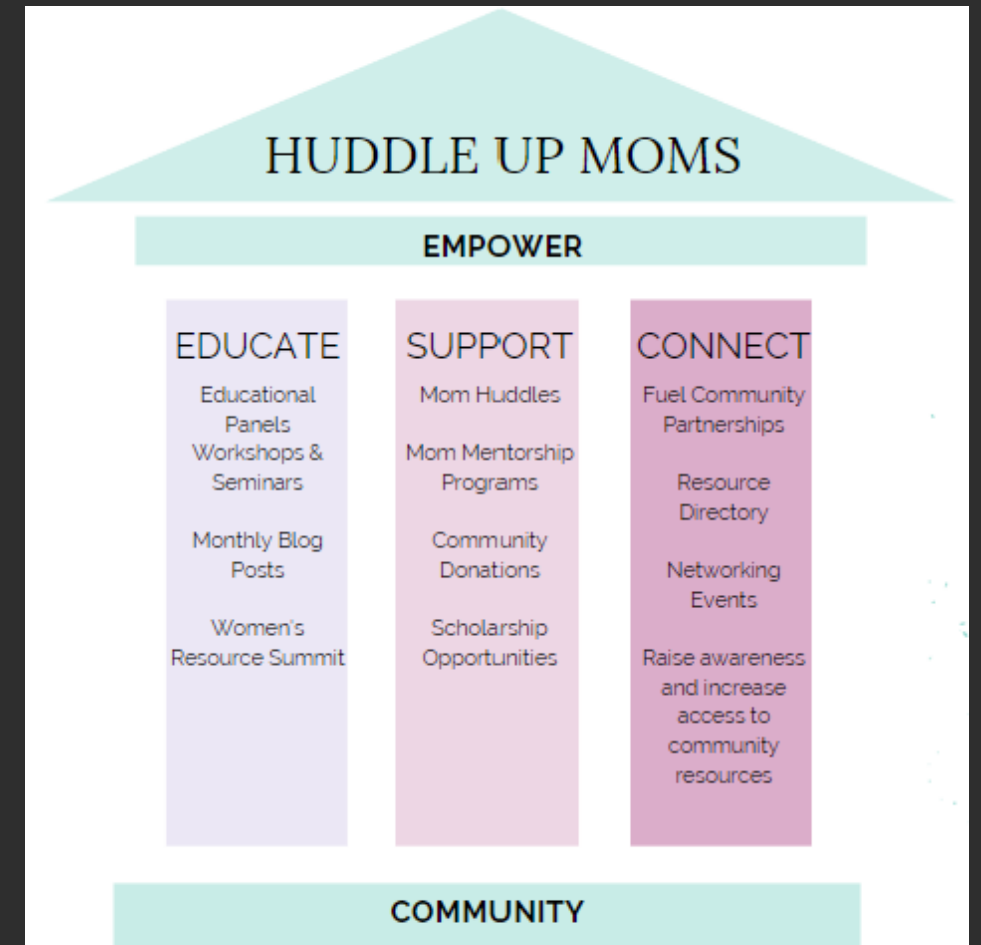
Huddle Up Moms

Mission

To empower all mothers in the Roanoke and New River Valleys through education, meaningful connections, and community support.

Vision

A future in which all mothers have the support they need to be healthy, happy, and confident to flourish in all areas of their lives



Our HER-Story

Huddle Up Moms key events



2019

Huddle Up Moms Established

2020

Received 501c3 status

2021

Began with virtual Huddles, which are support groups

2022

Awarded the VHHA grant to pilot Moms Under Pressure

Huddle Up Moms Impact



Mom Huddles

14

Mom Huddles – In-person support groups that include LGBTQ+, Single Moms, etc. huddles



Formula Distribution

17k

Over \$17k distributed in baby formula for families since 2022



Women Summits

4

Women's Summits aimed at empowering, educating, and supporting women within the Roanoke region



Exchange Programs

4

Quarterly programs to offer a safe space for moms to explore hot topics in motherhood & beyond



Moms Under Pressure

Huddle Up Moms



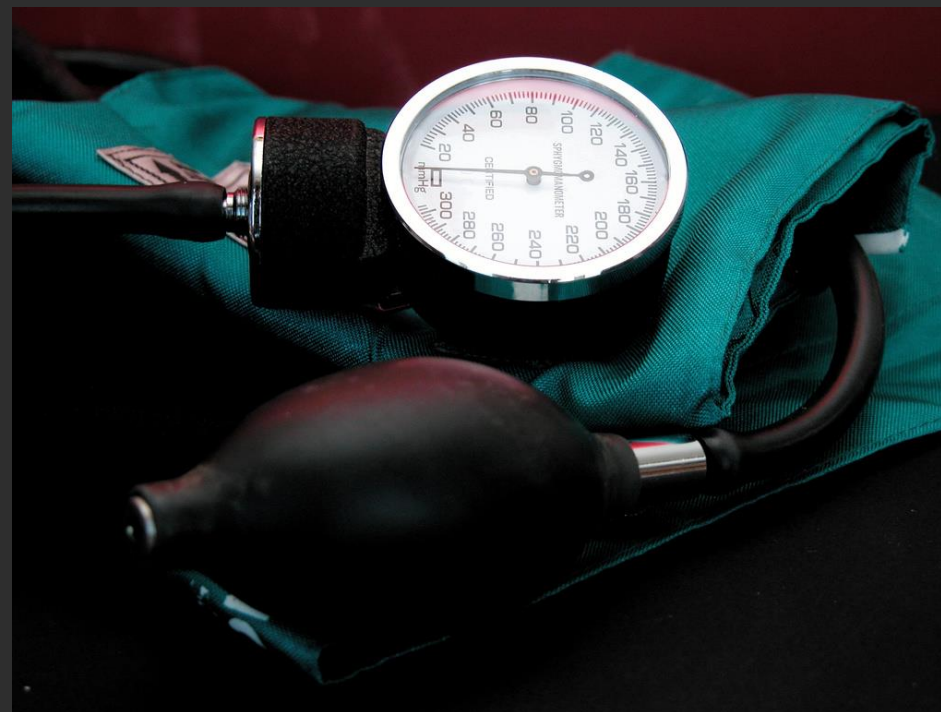
Pregnancy & Hypertensive Disorders

- Hypertension is a common condition in pregnancy 1 in 12 pregnancies
 - Preeclampsia occurs in 1 in 25 pregnancies
 - HELLP Syndrome 1 in 1,000 pregnancies
-

Long Term Impacts

Those who don't have an early interventions are more likely to die of a cardiac-related episode later on in life

Moms Under Pressure helps preserve life for those who bare life



A Community Health Approach

1

Self-Enrollment

MUP program allows for pregnant persons and women to enroll themselves or we accept referrals

2

Education & Empowerment

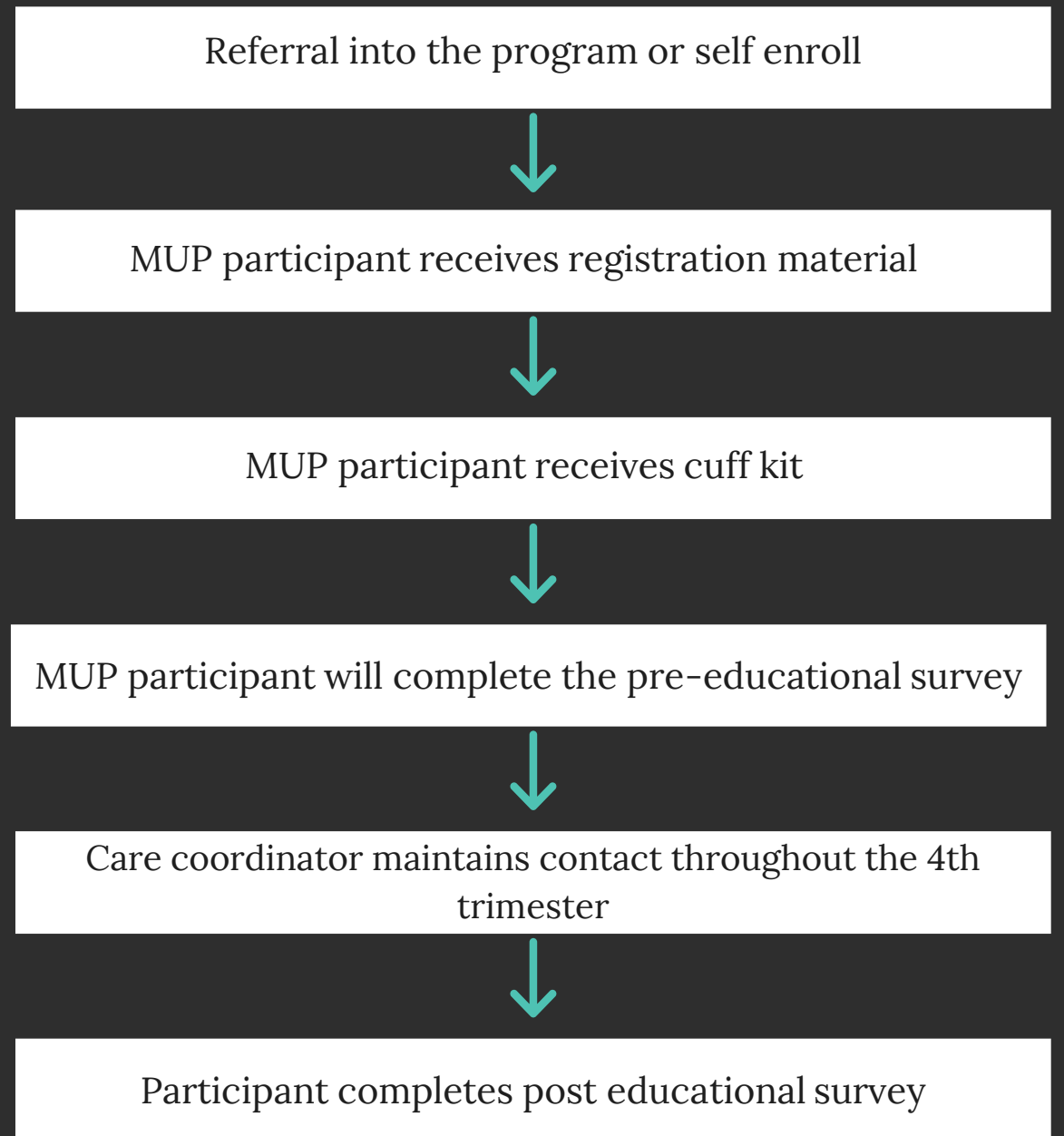
Individuals enrolled will receive a cuff kit and access to educational materials and workshops

3

Community Engagement

Stakeholder involvement is essential to improving maternal health outcomes

MUP Program Flow



MUP Program Flow With Community Partners

Community Partner supplies the cuff kit and completes registration with pregnant person



MUP participant receives cuff kit and warm hand off to MUP program director is initiated



MUP program director makes connection with participant



MUP participant will complete the pre-educational survey



Care coordinator maintains contact throughout the 4th trimester



Participant completes post educational survey



American
Heart
Association®



NATIONAL ASSOCIATION OF
CHRONIC DISEASE DIRECTORS
Promoting Health. Preventing Disease.



PREECLAMPSIATM
FOUNDATION

Clinical Partnerships



Community Partnerships

Moms Under Pressure Community Outreach & Partnerships



The Motherhood Collective Partnership



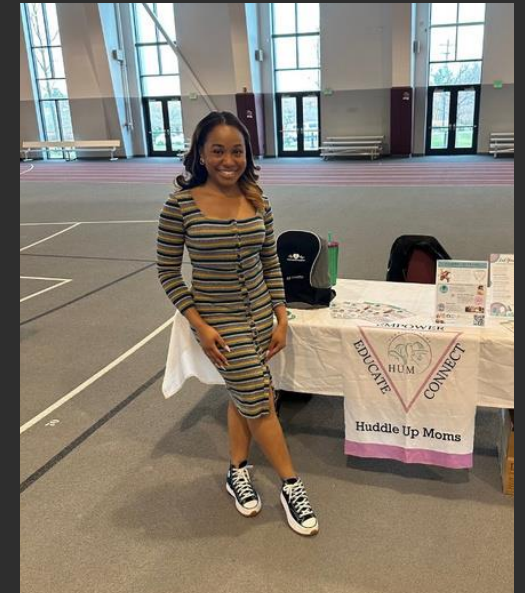
CHIP of Roanoke Valley Partnership



Casa Latina Partnership



Roanoke College Employee Wellness Fair



Empowering Healthy Family's Roanoke Valley Partnership



Huddle Up Moms Women's Resource Summit



Envision Center Outreach



Roanoke Library Parent Resource Fair



Moms Under Pressure

Establishing the Program: Surveys built (equity focus), cuff kits created, media push, educational materials, stakeholders meetings

Phase 1: Launched March 15th
emphasis on self-enrollment

Phase 2: Community partnership emphasis & inclusion criteria pivoted to include anyone who is pregnant and not just diagnosed

Phase 3 Current Phase: Clinical emphasis and expansion



**PREGNANT?
HAVE HIGH
BLOOD PRESSURE?
ENROLL TODAY!**

The goal of Moms Under Pressure* is to reduce health complications for mothers diagnosed with preeclampsia.
**No referral needed! Self-referrals encouraged!*

ENROLL & YOU'LL GET:

- Blood pressure cuff kit for home monitoring
- Care navigator to help guide you through pregnancy
- FREE education materials
- Access to FREE pregnant related classes (including car seat, birth classes, breastfeeding & more!)
- Backpack-style diaper bag
- FREE community swag & resources


Scan to enroll

Huddle Up Moms
education • connection • support

ENROLL TODAY!

Huddle Up Moms
MOMS UNDER PRESSURE
Preeclampsia

What is it?
It is a serious disease related to elevated blood pressure. It can happen any time during the second half of pregnancy or up to 6 weeks after delivery.

Who is affected?
 **5%-8%**
One in every 12 pregnancies are complicated by preeclampsia.

Ask your provider about your postpartum visit blood pressure check!

What are the signs?

- Elevated Blood Pressures
- Upper Abdominal Pain
- Sudden Swelling of Hands & Feet
- Sudden Weight Gain
- Nausea & Vomiting
- Changes in Vision / Seeing Spots
- Severe Headache
- Shortness of Breath

What are the risks?

For You	For Baby
<ul style="list-style-type: none"> Seizures Stroke Organ Damage Death 	<ul style="list-style-type: none"> Premature Birth Death

What should you do next?
Call your provider if you have elevated blood pressures and any of these symptoms OR call 911 if you are concerned.

BLOOD PRESSURE MEASUREMENT INSTRUCTIONS

USE A VALIDATED MONITOR. ASK YOUR HEALTH CARE PROFESSIONAL OR PHARMACIST FOR HELP.

IN THE 30 MINUTES BEFORE YOUR BLOOD PRESSURE IS TAKEN:

- NO SMOKING.
- NO EXERCISE.
- NO CAFFEINATED BEVERAGES.
- NO ALCOHOL.

FOR 5 MINUTES BEFORE YOUR BLOOD PRESSURE IS TAKEN:

- SIT STILL IN A CHAIR.

RIGHT BEFORE:

- MAKE SURE THE CLIFF IS THE RIGHT SIZE.
- WRAP IT JUST ABOVE THE BEND IN THE ELBOW.
- WRAP IT AGAINST SKIN, NOT OVER CLOTHING.

WHILE YOUR BLOOD PRESSURE IS BEING TAKEN:

- RELAX.
- DON'T TALK.
- REST THE CLIPPED ARM COMFORTABLY ON A FLAT SURFACE (LIKE A TABLE) AT HEART LEVEL.
- SIT UPRIGHT, BACK STRAIGHT AND SUPPORTED.
- KEEP LEGS UNCROSSED AND FEET FLAT ON THE FLOOR.

AFTER:

- IF AT HOME, WAIT ONE MINUTE AND TAKE A SECOND READING. AVERAGE THE READINGS.
- CONSIDER A THIRD READING.

RECOMMENDATIONS:

- KEEP A JOURNAL. BRING IT TO EVERY CHECKUP.
- HAVE YOUR HEALTH CARE PROFESSIONAL CHECK YOUR MONITOR ANNUALLY.

GoRedforWomen.org

LEARN MORE AT HEART.ORG/HBP

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Huddle Up Moms
MOMS UNDER PRESSURE
The Straight A's of Pregnancy
Ask About Aspirin

Why take baby Aspirin during pregnancy?

- Reduces risk of pre-eclampsia
- Lowers rate of preterm birth
- Reduces chance of low birth weight

Be AWARE... You should ask your provider about aspirin if...

Any of the following high-risk factors:	Two or more of the following moderate-risk factors:
<ul style="list-style-type: none"> High blood pressure (chronic or in pregnancy) Diabetes Twins/triplets A history of kidney problems An autoimmune disease 	<ul style="list-style-type: none"> First baby (BMI > 30) Mother or sister had preeclampsia African American or Black You receive public health insurance 35 years or older History of low birth weight baby Previous miscarriage or complicated pregnancy

Start taking a 81mg of aspirin between 12-26 weeks of pregnancy!

MUP Program Flow With Community Partners



Importance of MUP

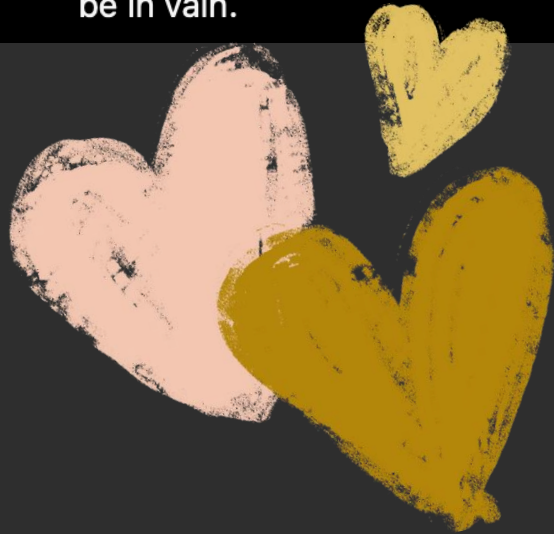
Original Research

Association of a Remote Blood Pressure Monitoring Program With Postpartum Adverse Outcomes

Adi Hirshberg, MD, Yifan Zhu, PhD, Aaron Smith-McLallen, PhD, and Sindhu K. Srinivas, MD, MSCE



allysonfelix These are my teammates. We are Olympic champions. Three of us tried to give birth. Two of us experienced near-death complications. One of us died. We have to, and we will do more. Tori's death cannot and will not be in vain.



U.S. Olympian Tori Bowie May Have Died From Eclampsia. What to Know



An autopsy report shows that track and field star Tori Bowie died during childbirth, citing eclampsia as a possible cause. Marco Mantovani/Getty Images

• An autopsy report shows that track and field star Tori Bowie died during childbirth, listing eclampsia and respiratory distress as possible causes.

Research article | [Open Access](#) | [Published: 31 May 2022](#)

Self-monitoring of blood pressure among women with hypertensive disorders of pregnancy: a systematic review

[Ping Teresa Yeh](#), [Dong Keun Rhee](#), [Caitlin Elizabeth Kennedy](#), [Chloe A. Zera](#), [Briana Lucido](#), [Özge Tunçalp](#), [Rodolfo Gomez Ponce de Leon](#) & [Manjulaa Narasimhan](#) ✉

BMC Pregnancy and Childbirth **22**, Article number: 454 (2022) | [Cite this article](#)

2860 Accesses | 2 Citations | 3 Altmetric | [Metrics](#)

Abstract

Background

The World Health Organization (WHO) recommends self-monitoring of blood pressure (SMBP) for hypertension management. In addition, during the COVID-19 response, WHO guidance also recommends SMBP supported by health workers although more evidence is needed on whether SMBP of pregnant individuals with hypertension (gestational hypertension, chronic hypertension, or pre-eclampsia) may assist in early detection of pre-eclampsia, increase end-user autonomy and empowerment, and reduce health system burden. To expand the evidence base for WHO guideline on self-care interventions, we conducted a systematic review of SMBP during pregnancy on maternal and neonatal outcomes.

One of the CHIP nurses took the blood pressure cuff kit to a home visit with a pregnant mom, which saved the mom's and baby's lives that day. The mother had been concerned about her pregnancy health for weeks, and the doctor had not taken her concerns seriously. Then, during the home visit day, the nurse took her blood pressure and realized a significant problem. The Mom was rushed to the doctor's office, tests were run, they had an emergency delivery, and the baby had to be resuscitated. Both the mother and the baby are recovered now, and she is extremely grateful for the MUP cuff kit.








"The cuff has been immensely helpful! It's really helped me track my BP postpartum since coming off the BP meds they prescribed me during my induction."

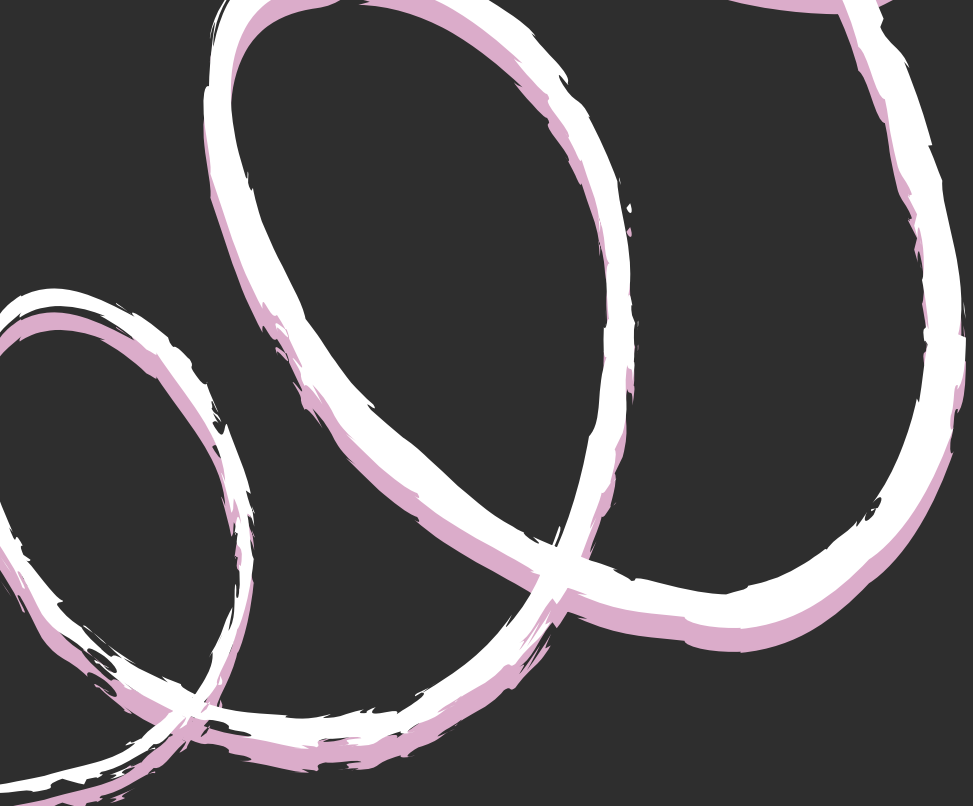
"Hi Breana! It's been very helpful. It's helped confirm that my BP doesn't just go up when I go to see my practitioner, and it helped me determine that I needed to go in and get help after hours last week. It turns out I was just dehydrated, but being able to check my BP at home helped me narrow down the problem and get the help I needed."

"Hi! It's so simple and easy to use and has greatly helped me monitor my blood pressure, which thankfully has gone down! I appreciate you all!"





We were able to hand out a few of those kits during a couple of events at Casa Latina. One of them was on Mother's day where moms got nice haircuts, make-up, and nail polish. We welcomed two pregnant moms who, after being pampered by Casa Latina volunteers, also received blood pressure cuffs and HUM kits as a 'present.' **The moms were really excited and grateful since high blood pressure has been a serious concern during their pregnancies.** Now, they would be able to monitor their blood pressure and stay healthy!

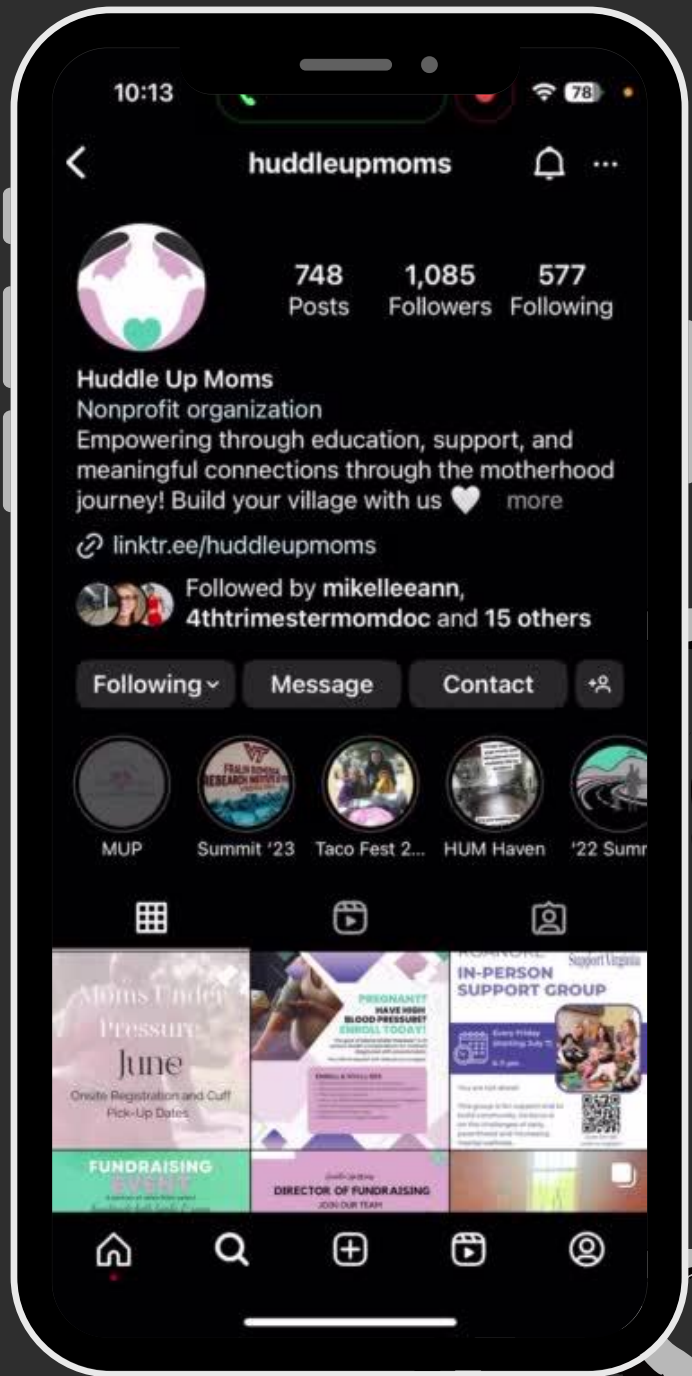


MUP Social Media

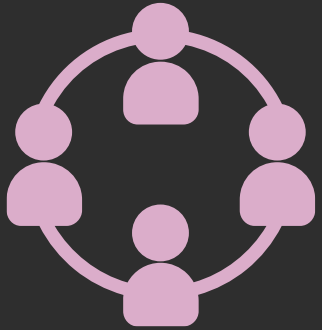
@HuddleUpMoms



Scan to follow us on social media!



IMPACT



4

Community
Partnerships



2

Pending Clinical
Partnerships



6

Community
Outreach Events



75

Cuff Kits
Distributed



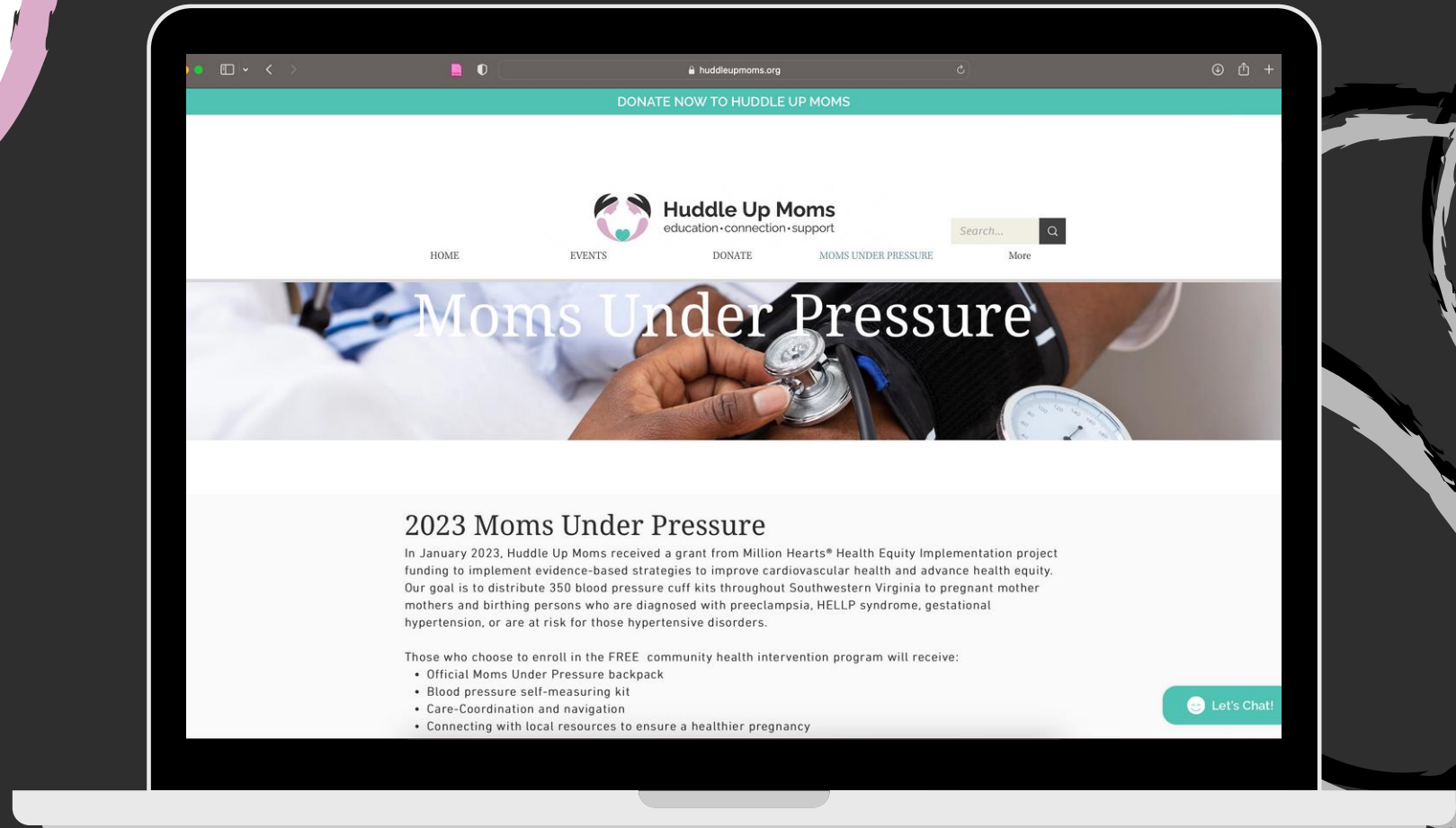
Lives Impacted

Stay Connected!



Scan for the website!

Breana Turner, MUP Director
Hum.Pressure@HuddleUpMoms.org



Huddle Up Moms
education · connection · support

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Moms Under Pressure

2023 Moms Under Pressure

In January 2023, Huddle Up Moms received a grant from Million Hearts® Health Equity Implementation project funding to implement evidence-based strategies to improve cardiovascular health and advance health equity. Our goal is to distribute 350 blood pressure cuff kits throughout Southwestern Virginia to pregnant mother mothers and birthing persons who are diagnosed with preeclampsia, HELLP syndrome, gestational hypertension, or are at risk for those hypertensive disorders.

Those who choose to enroll in the FREE community health intervention program will receive:

- Official Moms Under Pressure backpack
- Blood pressure self-measuring kit
- Care-Coordination and navigation
- Connecting with local resources to ensure a healthier pregnancy

Let's Chat!

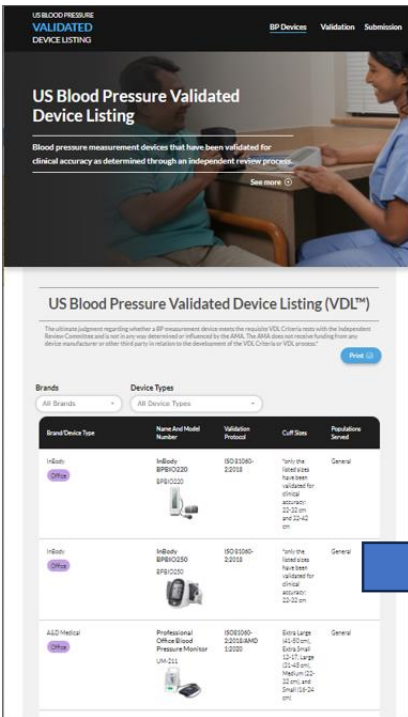
Updates



US Blood Pressure Validated Device Listing Updates

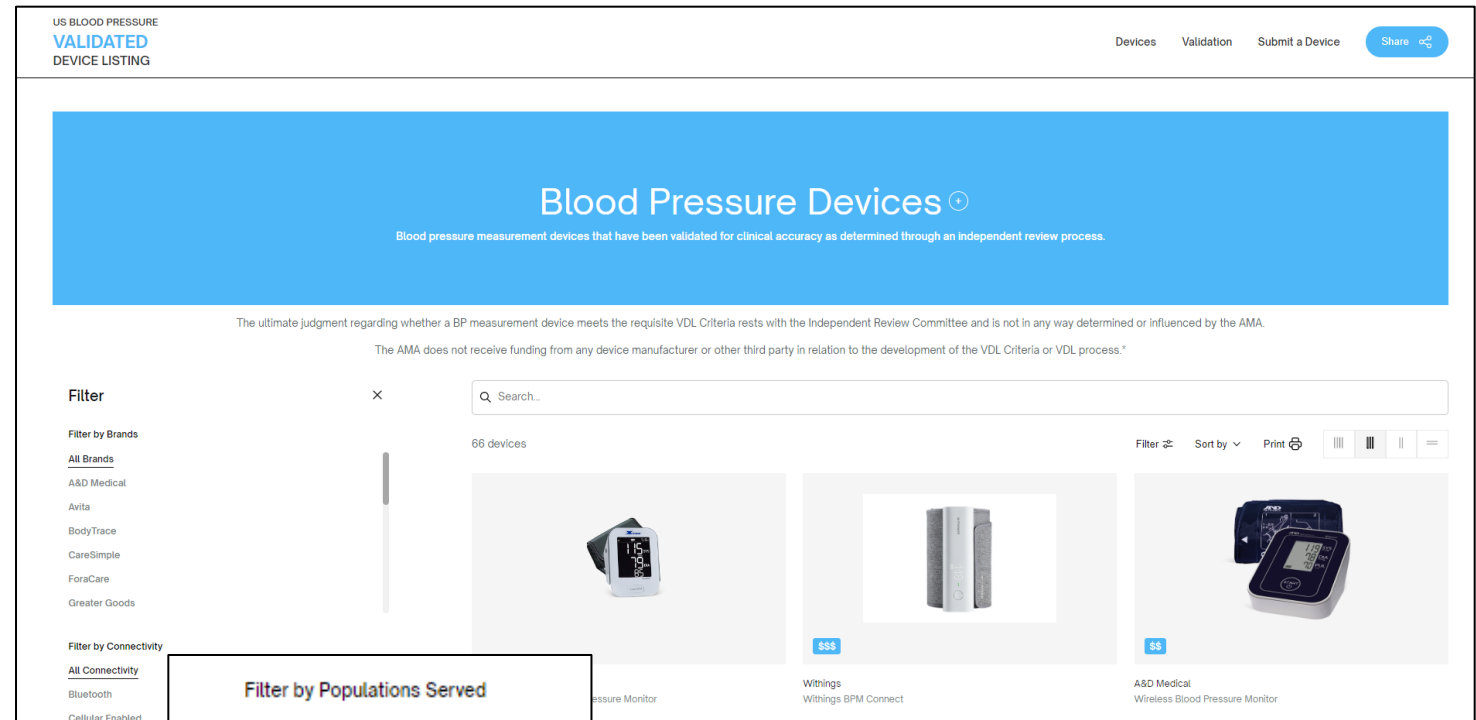
Nar Ramkissoon, MPH
American Medical Association





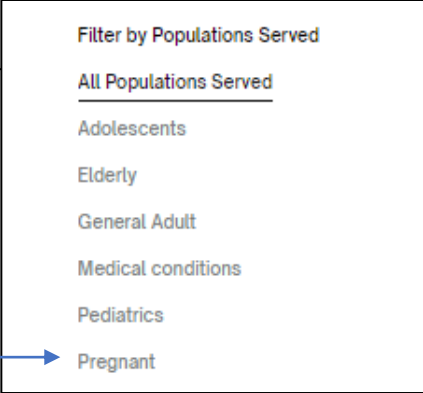
Listing page updated!

- Search and filter
- More device details (price range, XL cuffs, connectivity)
- Improved print and sharing functions



New filter: Devices validated for accuracy in pregnant population

- 2 devices listed, 5 total approved
- Encouraging additional testing and submissions from device manufacturers



Upcoming Million Hearts[®] and Partner Events

Date/Time	Title	Host	Live Audience	Links or Contact Information
September 13-15, 2023	38th American Association of Cardiovascular and Pulmonary Rehabilitation Annual Meeting	AACVPR	Cardiopulmonary Rehabilitation Professionals	Registration Link
September 21, 2023 12:00-1:00pm ET	Target:BP Webinar: Measuring Blood Pressure Accurately – Step 1 in Hypertension Control	AMA/AHA	All partners	Registration Link
October 26, 2023 9:00am ET	2023 Annual Meeting - National Forum for Heart Disease & Stroke Prevention	National Forum	All partners	Registration Link
November 15, 2023 2:00-3:00pm ET	National Hypertension Control Initiative (NHCI) Primary Care Association #10	AHA NHCI	All Partners	Registration Link

We Want to Hear From You!

Do you have resources or updates to share with the Million Hearts[®] SMBP Forum?

Please send information to MillionHeartsSMBP@nachc.org



Thank You!

The next SMBP Forum to be held December 14, 2023.

Register at <https://bit.ly/SMBPForumRegistration2023>



Please complete the post call survey:

https://nachc.co1.qualtrics.com/jfe/form/SV_8v8E6mJxryXOYya

Send questions or comments to MillionHeartsSMBP@nachc.org.

