**Project aims:**

To improve the diagnosis and management of hypertension in our practice and make the process more standardised and to prevent delays for patient treatment and follow up.

Identified areas that required improvements and proposed a series of changes to the practice. We acknowledged issues with workload implications for GPs and our proposal to create a nurse led hypertension clinic was accepted. The nurse led hypertension clinic would enable us to prioritise and standardise the diagnosis and treatment of new hypertensive patients and those with known hypertension coming for their follow-ups.

**Project title:**

Improving baseline assessment for newly diagnosed hypertensive patients and optimising therapy

**Outcomes:**

* Optimisation of therapy: This project led to treatment being initiated earlier. Median time for patients who needed treatment to be started was 7 days after the project (compared to median wait of 17 days prior to the project). Once treatment was started the titration of treatment was faster. Most patients were treated to target within 8 weeks, whereas prior to the project this process took up to 4 months
* The proportion of newly diagnosed hypertension patients that were offered ABPM increased from 90% to 94% after our project. There were still patients who were diagnosed with hypertension by the hospital or in other clinical settings, which is why there were still some patients not having the ABPM. Also, the remaining hypertension population might have been started on treatment following readings within the severe hypertension criteria.

**Cost:**

Not specified – please see link for further details: <https://www.nice.org.uk/sharedlearning/improving-baseline-assessment-for-newly-diagnosed-hypertensive-patients-and-optimising-therapy>