

COMMUNIQUE

This communique highlights key discussion points and outcomes from the National Hypertension Taskforce Steering Committee meeting and face-to-face Workshop held on 27 April 2023 at The George Institute for Global Health, Sydney.

The National Hypertension Taskforce of Australia

The National Hypertension Taskforce is a joint initiative of Hypertension Australia (HA) and the Australian Cardiovascular Alliance (ACvA) and is a priority identified as part of the [ACvA's Clinical Themes Initiative](#).

The first face-to-face meeting of the National Hypertension Taskforce was held with representation from all major stakeholders. The main purpose of this meeting was to identify and prioritise aspects considered to be critical to achieve better blood pressure (BP) control for all Australians. Making use of the [James Lind Priority Setting Process](#) the members identified the following **Key Priority Areas**:

- 1. Developing up-to-date, simple BP management tools for healthcare providers.** This would include brief, user-friendly, easy to access guidance on relevant aspects critical for adequate BP management such as accurate clinic BP measurement, use of out-of-office BP measurement, up-titration of antihypertensive medication, preferred use of single pill combination therapy, and others with reference to existing Health Pathways where feasible.
- 2. Increasing patient activation and engagement.** Within this broad space, elements such as improving health literacy, activities to improve how people already diagnosed with hypertension can be 'activated' to improve their own health, and others should be addressed.
- 3. Raising and maintaining awareness at all levels.** This includes raising awareness on the importance of BP for cardiovascular health in general, its accurate measurement and management, among the community (consumers: "Know your numbers"), healthcare providers, government, and any other stakeholders.
- 4. Establishing a systems and data-based approach to BP management.** It is important to setup processes to ensure integration of BP data across the health sector, with all healthcare providers having access to electronic health records, identifying high risk patients, and to optimally use data for population monitoring and evaluation, to inform practice and team-based care.
- 5. Improving detection (screening) of people to identify those at risk.** This could include community-based screening, but also access through healthcare providers such as nurses and pharmacists, as well as opportunistic screening initiatives such as those of the Stroke Foundation and [May Measure Month](#) potentially joining forces.

All priorities will have specific emphasis on First Nations peoples, culturally and linguistically diverse (CALD) populations as well as Australians from rural, regional and remote communities.

Health economic analyses and continuous engagement with government will be foundational elements required to address the Key Priority Areas.

Next Steps:

- Establishing Working Groups aligned with the five abovementioned themes. The Steering Committee to invite expressions of interest for Working Group members.
- Development of a roadmap plan (**Roadmap towards improved blood pressure control**), governed by the Steering Committee.
- Initiate engagement of an external entity to produce a representative report on the **Economic impact of hypertension in Australia**.

Attendees:

Alta Schutte	Co-Chair, National Hypertension Taskforce, UNSW; The George Institute
Markus Schlaich	Co-Chair, National Hypertension Taskforce, UWA
Andrea Sanders	Stroke Foundation
Andrew Goodman	University of Queensland; CSIRO
Anthony Rodgers	The George Institute
Audrey Lee	Consumer Advisor, SPHERE
Belinda Bennett	Consumer Advisor, SPHERE
Charlotte Hesper	University of Notre Dame
Amanda Fairjones (proxy)	Pharmaceutical Society of Australia
Garry Jennings	National Heart Foundation of Australia
James Sharman	Menzies Institute for Health and Medical Research
Linda Govan (proxy)	Australian Primary Health Care Nurses Association
Lisa Murphy	Stroke Foundation
Mark Nelson	University of Tasmania
Natalie Raffoul	National Heart Foundation of Australia
Ruth Webster	Department of Health (MRFF)
Tim Usherwood	University of Sydney
Zoe Girdis	Pharmacy Guild of Australia
Kerry Doyle	Australian Cardiovascular Alliance
Catherine Shang	Australian Cardiovascular Alliance
Meng Hsu	Australian Cardiovascular Alliance
Bridie Carr	Agency for Clinical Innovation, NSW (observer)

Apologies: Clara Chow, Taskeen Khan (ex officio), Jonathan Golledge, Stephen Nicholls, Jun Yang, Karen Dwyer, Geoff Cloud, Nigel Stocks