

## **Agenda**

### **National Hypertension Taskforce Meeting 4**

Date: Thursday 07 December 2023

Time: 2:00 – 4:30pm AEDT

Location: Mawby Theatre, Melbourne Business School, 200 Leicester St, Carlton, Melbourne.

Hybrid Link: Join on your computer, mobile app or room device

Click here to join the meeting

### Attendees:

Alta Schutte Co-Chair, National Hypertension Taskforce, UNSW; The George Institute

Markus Schlaich Co-Chair, National Hypertension Taskforce, UWA

Andrea Sanders (V) Stroke Foundation

Andrew Goodman (V)

Audrey Lee (V)

Belinda Bennett (V)

Consumer Advisor, SPHERE

Consumer Advisor, SPHERE

Kidney Health Australia

Catherine Shang Australian Cardiovascular Alliance

Charlotte Hespe University of Notre Dame

Sam Flood (proxy) Pharmaceutical Society of Australia
Garry Jennings National Heart Foundation of Australia

Geoff Cloud (V) Stroke Society of Australiasis

James Sharman Menzies Institute for Health and Medical Research

Jamie Vandenberg ACvA Board Director
Jason Kovacic ACvA President
Jun Yang (V) Hudson Institute
Kayla Viney Stroke Foundation

Kerry Doyle Australian Cardiovascular Alliance

Lisa Murphy Stroke Foundation
Mark Li (proxy) Pharmacy Guild

Mark Nelson (V) University of Tasmania

Meng Hsu Australian Cardiovascular Alliance

Nigel Stocks (V) University of Adelaide

Sharon James (V) Australian Primary Health Care Nurses Association
Stephen Nicholls Cardiac Society of Australia and New Zealand

### **Invited Working Group Members**

Liz Halcomb (V) University of Wollongong

Quynh Dinh (V) La Trobe University

Martin Schultz (V) University of Tasmania

**Apologies:** Anthony Rodgers, Zoe Girdis, Taskeen Khan (ex officio), Jonathan Golledge, Michael Stowasser, Tim Usherwood, Natalie Raffoul, Ruth Webster, Niamh Chapman, Nelson Wang, Clara Chow



# Agenda

Time	Program	Leader
2:00 – 2:05	Welcome and Acknowledgement of Country	Markus
2.05 – 3.05	National Hypertension Roadmap publication	Alta/Markus
	Discussion of feedback and issues raised	
	Discussion of way forward	
	Timeline to publication	
	o Endorsement	
	Alta presented changes and updates to the Roadmap publication after input/feedback from the group.	
	Comments from the group included:	
	<ul> <li>The Roadmap needs to align and support the implementation of the National Preventive Health Strategy 2021-2030</li> <li>There are a large number of GPs not putting BP data into the right field on practice software to be extracted. GPs need education and incentives e.g. perhaps to include as part of PIPQI program</li> <li>Single pill combinations need to align with what is available on the PBS to ensure equitable access for those at highest risk of high BP</li> <li>Include comments on the MyMedicare scheme - set for release in 2024, and designed to support continuity of care</li> <li>Alta thanked everyone for their feedback and input on the draft Roadmap. The plan is to finalise the paper for submission in early January 2024. The current format may not work for MJA and Alta will make enquiries to the Editor of MJA and the Hypertension Journal to see if they could provide</li> </ul>	
	feedback on suitability.	
	ACTION: Taskforce members to provide comments and confirm affiliations for the Roadmap publication	
	ACTION: Alta to finalise comments from the Taskforce members on the	
	Roadmap paper	
	ACTION: Alta to follow up with journals on suitability of article format for	
3:05 – 3:30	publication Afternoon Tea	
3:30 – 4:20	Working Group Updates (10min discussion per Working Group)	
	See Working Group slides attached for more details.	



WG1: Simplied BP Management Tools

### Goals of the Working Group

- Develop a one-pager treatment protocol that is aligned with PBS and current guidelines
- Gather input and support from all relevant stakeholders to ensure a unified approach
- Address current barriers to achieving optimal BP control

#### Recommendations and actions

- Hold a focus group with primary care for co-design and ensure adherence to one-pager. This could be rolled out with new, validated BP monitors with training provided to accurately measure BP.
- There is overlap between Working Group 1 (focused on tools and management) and Working Group 4 (BP measurement)
- Working Group 1 and 4 to work together.
- WG2: Increasing patient activation and engagement

### Goals of the Working Group

- Engagement with other working groups to advise on consumerfriendly resources and engagement strategies.
- Developing a national consumer network that is interested in Hypertension, ensuring diverse representation (geography, demographics etc). Alta has funding as part of her Synergy grant – this is being led by Dr Carissa Bonner.

### Recommendations and actions

- Working Group 2 could join forces with Working Group 1 to develop a patient-facing version of the one-pager protocol
  - o Empower consumers to self-care
- WG3: Raising and maintaining awareness

### Goals of the Working Group

 The group has been tasked to map already existing Australian and global inititaives for hypertension awareness

### Recommendations and actions

 It was noted that the Working Group lacks marketing and public health campaign expertise. Perhaps for a target call in future? Charlotte

Liz

Lisa/Quynh



- Funding sources for an effective campaign were discussed.
   Suggestions included government, industry and philanthropy.
- It was discussed whether there was an opportunity to raise awareness through the merging of opportunistic screening programs such as May Measurement Month and Stroke Foundation's 'Australia's biggest BP check'.
- WG4: Systems and data-based approach to BP management Goals of the Working Group
  - To embed better BP measurement within general practice in TAS and scale nationally with digital architecture enabling near to real time BP/CVD risk and outcome data
  - To embed an evidence-based prescribing tool to assist GPs

#### Recommendations and actions

- The WG raised that while there is exisiting national data sources, there is a lack of a national database infrastructure for CVD
- WG member and currently scoping exisint gnational level data sources and their appropriateness to leverage.
- WG5: Improving detection and screening of raised BP Goals of the Working Group
  - Scale up opportunistic community-based screening programs, diverse in geography and ethnicity.
    - Settings to consider: remote, regional, culturally diverse, workplaces, allied health etc.
    - Combine MMM and Australia's Biggest BP Check and other initiatives where feasible – take an Australian coordinated approach
      - A coordinated approach could work. SF's Australia's Biggest BP Check traditionally focuses on pharmacies; whereas MMM is general population

### Recommendations and actions

- Each working group member to identify a setting in which they could lead/shape BP screening in 2024
- Identify potential volunteers who can support a scaled-up initiative, in the absence of any funding e.g. celebrity champion?
- There are complementary activities between Opportunistic
   Screening programs and Raising Awareness particularly on working

Jim

Jun/Martin



together to define the target audience in the first instance e.g. targeting those with highest risk.

**ACTION:** WG3 members to attend the next meeting for WG5.

4:20 - 4:25

Engagement activities update

Government

Kerry D updated the Taskforce on the following ACvA Government engagement activities and meetings.

- Kerry outlined the Cardiovascular Health Research Leadership
  Forum (CV HLRF) that serves as the ACvA government engagement
  platform. The CV HLRF has been endorsed, as a strong model by the
  Health Chief Executives Forum, and has representation from senior
  health officials from all jurisdictions and also the Heart and Stroke
  Foundations, AIHW, Safety and Quality Commission, NCR and
  consumers groups.
  - Alta, Markus, and James Sharman were invited to present to the CV HLRF on the Hypertension Taskforce and data linkage initatives at the meeting in July 2023.
- The ACvA has coordinated and arranged a written update on the progress of the National Hypertension Taskfoce since its launch by Minister Mark Butler in December 2022. This has been provided to Minister Butler's Office, following this, ACvA, and the Co-chairs of the Taskforce were invited to brief the Minister's advisor. In this meeting, we were advised that it would be important to align Taskforce activities with Federal Government processes and policy agendas, prioritising the National Health Reform Agenda, Strengthening Medicare Report and Improving Access to Medications. As per the meeting, progress will be updated as appropriate to the Minister's advisor.
- An event under the auspices of the Parliamentary Friends of Heart and Stroke Foundation is being planned for 18 March 2024, where the Roadmap will be officially launched. It will be a combined event with all major stakeholders. This follows on from a meeting in Tasmania, held with and at the request of Senator Wendy Askew, co-chair of this Parliamentary Friends Group. The meeting, held on 1 November 2024 covered data and hypertension work being led from Tasmania.

RACGP & ACRRM

Kerry Alta/Markus/ Nigel Group discussion



- Nigel Stocks and Charlotte Hespe emphasised the need to communicate and work with RACGP to establish common goals. This includes information sharing with the RACGP College groups and Committees.
- The group noted that letters to the RACGP and ACRRM has been sent but the Taskforce has yet to hear a response.
  - Nigel has contacts with the ACRRM that can be approached should a follow up be required
- Others?

4:25 - 4:30

### Other business

- Remaining priorities identified and next steps
- Next meeting

**ACTION:** ACvA to set up Taskforce meetings for 2024. Next meeting June 2024.

Alta/Markus