



Clinical-Community Integration for Cardiovascular Disease

Opportunity: GUVIST is implementing a CDC grant to advance health equity for individuals at risk of cardiovascular disease by focused strategies that are mindful of the social drivers of health. This funded opportunity will build capacity and mitigate clinical needs by addressing social needs. The grant offers a total of \$65,000 in year one and \$50,000 in the following three years across two implementation sites which could cover costs of personnel, IT functionality, a referral platform or self-measured blood pressure monitoring in public spaces, among other supports the implementation sites need to deliver this care. System wide transformation across multiple agencies can be achieved by implementing or expanding strategies in your organization.

Goals: Streamline SDOH screening with focused referrals for social needs, to reduce CVD risk for populations with hypertension and/or high cholesterol. Collect data to measure impact of addressing social needs on CVD risk. Share a model that can be scaled or replicated in other populations or settings.

Process: Elements of a project could include

- Identifying population with CVD risk
- Developing, standardizing or expanding tracking and monitoring of social needs
- Building and expanding network of community partners to address social needs
- Monitoring referrals to and utilization of appropriate and consistent social services
- Building or maximizing team based care (i.e. community health workers, care coordinators, community nurses) to mitigate social service barriers

Scope: Patients in primary care panels with hypertension ($\geq 140/90$ mmHg) and/or high cholesterol (LDL >110 mg/dL).

Measures:

- # patients with CVD risk
- # social service supports and referrals
- # CHW or equivalent on care team
- # adults using self monitored BP
- Hypertension control

Partners:

Grant Reporting & Network Development Nicole Hamlet, VDH Rudy Fedrizzi, VDH Cara Baskin, GUVIST	Implementation Sites: Little Rivers Health Care Good Neighbor Health Clinic	Fiscal Sponsor: Public Health Council of the Upper Valley	Community Partners (i.e. housing, food security, childcare, community nurses)
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