



Implementing team-based care to reduce CVD risk

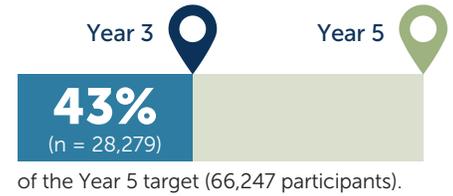
WISEWOMAN recipients provide training and support to healthcare providers on using a multidisciplinary team-based approach to delivering WISEWOMAN services, with a focus on helping participants control and manage hypertension. The members of the WISEWOMAN care teams vary by recipient and healthcare site, but teams commonly include primary care providers, nurses, medical assistants, lab staff, social workers, community health workers, pharmacists, and, occasionally, mental health providers, diabetes educators, dieticians, recreation therapists, and case managers. By promoting widespread use of team-based care, the WISEWOMAN program seeks to **provide patient-centered comprehensive care and help participants self-manage their health conditions and CVD risk.**

As of the end of Year 3:



of WISEWOMAN participants were screened by providers that use a multidisciplinary team-based care approach (28,279 out of 32,088 participants)

The Year 3 counts represent:



of the Year 5 target (66,247 participants).



Linking community resources and clinical services

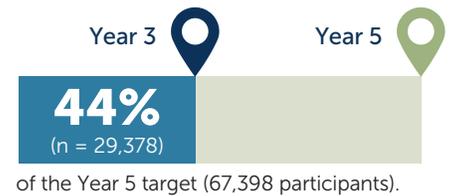
WISEWOMAN recipients leverage their partnerships with community-based organization and healthcare providers to create linkages between community and clinical resources. These linkages are intended to engage participants in HBSS, such as health coaching and lifestyle programs, and address the wide range of CVD risk factors affecting participants. With this strategy, the WISEWOMAN program aims to **promote bi-directional referrals, self-management, and lifestyle change** for participants who are at elevated risk for CVD.

As of the end of Year 3:



of WISEWOMAN at-risk participants were referred to HBSS (29,378 out of 32,088 participants)

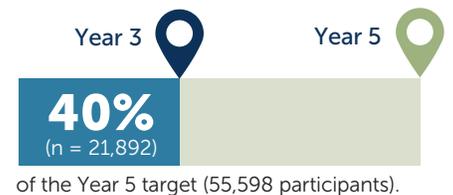
The Year 3 counts represent:



of the Year 5 target (67,398 participants).



of WISEWOMAN participants who were referred to HBSS attended at least one session (21,892 out of 25,965)



of the Year 5 target (55,598 participants).

These three strategies contribute to improved hypertension control among the WISEWOMAN population.



38%

of participants with known hypertension achieved or were maintaining blood pressure control by the end of Year 3 (2,761 out of 7,197), with the goal of 57% (9,807 out of 17,362) by the end of Year 5.²

² The CDC defines hypertension control as having systolic blood pressure below 140 mmHg and diastolic blood pressure below 90 mmHg among those with hypertension. If multiple readings are taken in one visit, the average of all readings should be used to obtain the final blood pressure value.