International Journal of Applied Research 2022; 8(8): 266-268



International Journal of Applied Research

ISSN Print: 2394-7500 ISSN Online: 2394-5869 Impact Factor: 8.4 IJAR 2022; 8(8): 266-268 www.allresearchjournal.com Received: 21-05-2022 Accepted: 26-07-2022

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Conceptual frame work on bundle care therapy on hypertension

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DOI: https://doi.org/10.22271/allresearch.2022.v8.i8d.10079

Abstract

Present health studies show that the world is heading for heart diseases of worldwide segment. The number of people at high risk from cardiovascular disease is increasing recent studies suggest that only 2 to 7 percent of the common population have no risk factors at all, and less than 70 percent individuals have multiple risk factors. Non-communicable diseases (NCDs) are a cluster of diseases with long duration, and are generally slow in progression that affect individuals over an extended period of time causing socio economic burden to the nation. The good result of a bundle comes from the body of science behind it and the way of execution. A bundle bounds the changes together into a package of involvement which people know must be followed for every patient, every single time. Bundles may resemble a checklist but it is more than that. Bundles are different from a checklist as the latter contains many elements (more than five usually), all are not necessarily evidence based. The hypertensive safety bundle care therapy (HSBCT) on cardiovascular disease was followed. HSBCT includes Diet - DASH diet with low carbohydrate, salt restricted and high fiber diet, physical activity, spiritual practices by prayer, stress management with Pranayama, reduction of Habits like alcohol and smoking, Obesity management regular intake of Medications and regular Follow up. Thus, a multimodal care so called hypertensive safety bundle care therapy on prevention of risk for CAD (cardiovascular disease) among hypertensive patients may yield a good result by reducing the CAD risk factors.

Keywords: Bundle care therapy, hypertension, coronary artery disease, public health

Introduction

Heart disease is one of the principal causes of death in men and women in the present world. Various alterable risk factors for coronary artery disease (CAD), including hypertension, hyperlipidemia, smoking, being overweight, being inactive, eating an unhealthy diet, are well known. Though treatments for hypertension and hyperlipidemia are significantly effective and relatively affordable, the majority of the people with these conditions are unable to manage them under control. Even though individuals can take steps to reduce their own risks of CVD, bundle care therapy has the potency to minimize risks among the populations. Changes in practices, policies, and health systems prepared to lower uncontrolled high blood pressure and cholesterol levels among populations can remarkably improve access to health care, quality of care, and patient adherence to treatments.

As the resources are limited and the need to prevent CVD is widespread, decision-makers and public health professionals must choose effective and sustainable strategies. The six strategies provide a framework for these efforts, and scientific evidence can help guide decisions about which strategies to adopt.

The root of the term bundle is that the whole is more than the quantity of its parts. A care bundle is a set of three to five or more evidence based practices, interventions supported by research that cause a substantial betterment in patients' outcomes. The interventions or components that make up the bundle must be grounded in solid research. The most important thing is that all the bundle elements must be executed in a series of sequential steps by one healthcare team within the same time frame for ensuring the occurrence of clinical improvement. In the process, even a single step must not be eliminated or else the intended effect will be altered.

The conceptual frame work on bundle care therapy on hypertension Model, an illustrious theoretical model, can be used to regulate the programs related to health promotion and disease prevention. It is used to explain and anticipate individual changes in blood pressure and assessment of CAD Risk Factors, and implementation of Video assisted teaching (VAT) on Hypertensive safety bundle care therapy (HSBCT).

Main concepts

- In this stressful world, sandwiched life one or two interventions are not sufficient to take out the complications from adults with hypertension.
- It is essential to introduce at least six strategies among adults with hypertension to reduce the risk for CAD and thereby prevent complications.

Hypertensive safety bundle care therapy (HSBCT) means assessment of parameters like

- i. Monitoring B.P,
- ii. DASH Diet,
- iii. Physical Activity by Figure of eight walking,
- iv. Obesity by BMI, Waist / Hip monitoring,
- v. Stress by Pranayama,
- vi. Medication adherence scale.
- Even normal adults can also practice the HSBCT for health promotion and disease prevention.
- As health was believed to be multidimensional, disease can be prevented among adults with hypertension through multidimensional precautionary care so called HSBCT.
- Following HSBCT is simple, easy, cost effective, sustainable, affordable, accessible and implementable.
- The implementation of care bundles can aid in enhancing compliance to evidence-based quality process measures to improve patient care.
- Care bundles include a set of evidence-based measures.
 That when implemented together have shown to yield better outcomes and have a greater impact than that of the isolated implementation of individual measures.
- The Bundles also assist to create safe and steady care systems in the hospital settings since they are simple (three to five elements, in the present study 6), clear, and concise.
- The implementation of bundles promotes multidisciplinary collaboration besides providing safe and secure patient care environments since they are developed collaboratively and consensus obtained with strong clinician engagement and endorsement.
- To succeed in the bundle implementation and achieve the most favorable outcomes ("all or none" approach), each element of the bundle must be implemented collectively with complete consistency.
- The effective implementation of a care bundle needs the measures to be adapted to the local setting, aptly followed; entrenched in the patient care culture, and recorded and evaluated to ensure compliance by the healthcare team members involved.
- It is advised that Healthcare providers always have to

- follow each bundle element for every patient. This aims to promote a positive habit-forming behavior among providers and ultimately a reliable care processes.
- The Bundled interventions are an effective way to implement change and improve the "culture" of patient safety by fostering teamwork, measuring compliance, and providing feedback and responsibility to frontline teams and hospital leadership to improve care.

Key elements of the conceptual frame work on bundle care therapy on hypertension Model focus on Category, Pre-Assessment, Intervention, Post Assessment and Outcome.

Category: A class or division of elements or things regarded as having particular shared characteristics among individuals. The present study includes individual socio demographic variables, CAD Risks, knowledge, and practice.

Pre-Assessment: Pre-assessment is an examination carried on research participants before the intervention to determine what the research participants need more instruction on and what they may already know. The present study includes individual socio-demographic variables like age, gender, educational status, occupation, religion, marital status, dietary habits, alcohol consumption, smoking, known case of diabetic, since how many years having HTN, stress, comorbid disease, source of information, Assessment of CAD Risk Factors are categorized like Normal, Mild Risk, Moderate Risk and Severe Risk, Assessment of knowledge which is graded like A+, A, B+,B,C and D and Assessment of practice which is categorized like Good Practice, Fair Practice and Poor Practice.

Intervention: Intervention is the action or process of intervening or implementation of the planned action. The present study includes Hypertensive safety bundle care therapy (HSBCT) assessment of parameters like Monitoring B.P, DASH Diet, Physical Activity by Figure of eight walking, Obesity by BMI, Waist/Hip monitoring, Stress by Pranayama and Medication adherence scale.

It is viewed that hypertension can be controlled with bundle of interventions. Bundle means a group of interventions.

Post Assessment: Post-assessment is an examination carried on research participants after the intervention. The present study includes the Assessment of CAD Risk Factors. They are categorized as Normal, Mild Risk, Moderate Risk and Severe Risk, Assessment of knowledge is graded as A+, A, B+, B, C and D and Assessment of practice which is categorized as Good Practice, Fair Practice and Poor Practice.

Outcome: It is the result that follows as an end result or consequence. It includes Decreased risk for CAD among hypertensive adults, Decreased high blood pressure to Optimal, Normal, High-normal, DASH Adherence Score to High adherence and Medium adherence, Physical Activity to greater smoothness, Decreased high BMI to Normal range, Decreased high Waist/hip ratio to Normal, Improved lipid profile to Normal and Increase in knowledge and practice.

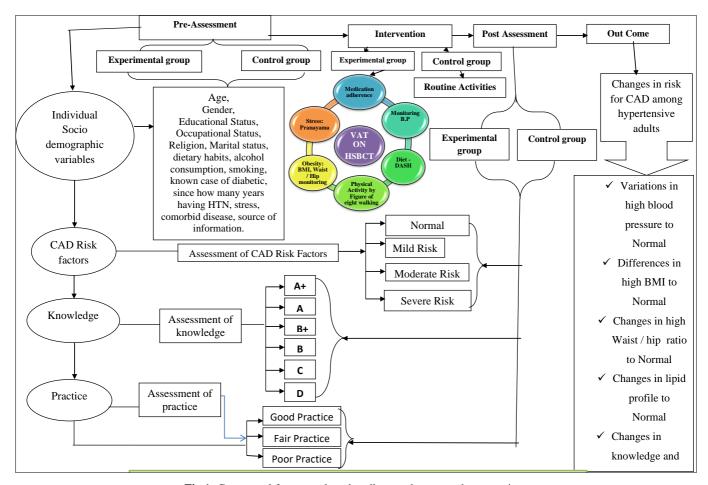


Fig 1: Conceptual frame work on bundle care therapy on hypertension

Conclusion

Using a bundle method can be an effective strategy for improving care has been confirmed by an increasing body of evidence from controlled before-after studies suggests that care bundles may reduce the risk of negative outcomes when compared with usual care and preventing certain serious clinical outcomes has been demonstrated successfully with a growing body of published results.

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