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FREE PROFESSIONAL RESOURCE

Hypertension (High Blood Pressure) Awareness in Care Settings

A Practical Guide for Care Staff

Knowledge Hub Resource 068

Version 1.0 - **First Published**: August 2026

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Introduction

Hypertension, commonly known as **high blood pressure**, occurs when the pressure of blood within the arteries remains consistently higher than recommended levels.

One of the important things to understand about hypertension is that it often causes **no noticeable symptoms**. A person can therefore have high blood pressure without feeling unwell or knowing that their blood pressure is raised.

Over time, uncontrolled high blood pressure can place additional strain on the heart, blood vessels and other organs. It is associated with an increased risk of conditions including **stroke, heart disease, heart failure and chronic kidney disease**.

Care staff are not responsible for diagnosing hypertension. Their role is to follow the individual's care plan, support prescribed treatment, undertake blood pressure monitoring only when trained and authorised, and report concerns according to organisational procedures.

Why This Resource Matters

Understanding hypertension awareness helps care staff to:

- Understand what blood pressure and hypertension mean.
- Recognise that high blood pressure often causes no obvious symptoms.
- Understand why long-term blood pressure management is important.
- Recognise some of the health conditions associated with hypertension.
- Support prescribed medication safely when trained, competent and authorised.
- Follow blood pressure monitoring arrangements where these form part of the individual's care plan.
- Record blood pressure readings accurately.
- Recognise significant changes in an individual's health or wellbeing.
- Report abnormal readings according to the person's care plan and organisational procedures.
- Recognise symptoms that may indicate a medical emergency.
- Promote safe, person-centred care.

Understanding Blood Pressure

Blood pressure is recorded using two numbers and measured in **millimetres of mercury (mmHg)**.

For example:

135/85 mmHg

The **first number (systolic pressure)** measures the pressure when the heart contracts and pumps blood around the body.

The **second number (diastolic pressure)** measures the pressure when the heart relaxes between beats.

Blood pressure can vary throughout the day and may be affected by factors such as activity, stress, illness, medication and the circumstances in which the measurement is taken.

A single raised reading does **not necessarily mean that an individual has hypertension**.

Diagnosis and decisions about treatment should be made by appropriately qualified healthcare professionals.

Blood Pressure Monitoring

Where blood pressure monitoring forms part of an individual's care plan, staff should:

- Undertake measurements only when trained and competent to do so.
- Use appropriate equipment and follow the manufacturer's instructions.
- Follow the individual's monitoring instructions.
- Help the person to be appropriately positioned and settled before measurement.
- Record the reading accurately.
- Note relevant symptoms or changes in wellbeing.
- Report readings outside the individual's agreed parameters according to the care plan.
- Escalate concerns promptly when required.

Care staff should **never independently change prescribed medication because of a blood pressure reading**.

Key Message

High blood pressure often has no symptoms.

Someone who feels perfectly well may still have hypertension, which is why prescribed treatment and monitoring are important.

Care staff should follow the individual's care plan, record observations accurately and **never diagnose hypertension or alter treatment independently**.

Understanding Hypertension

Hypertension usually develops over time and may be influenced by a combination of factors including age, family history, lifestyle and other health conditions.

Because high blood pressure frequently causes **no obvious symptoms**, regular monitoring may be important for individuals who have been diagnosed with hypertension or who are considered at increased risk.

Care staff do not need to diagnose hypertension or decide what an individual's blood pressure should be. Their responsibility is to understand the person's care plan, support prescribed treatment and recognise readings or changes that require reporting.

Factors Associated with High Blood Pressure

Factors that can increase the likelihood of developing high blood pressure may include:

- Increasing age.
- A family history of hypertension.
- Being overweight or obese.
- A diet containing too much salt.
- Physical inactivity.
- Drinking excessive amounts of alcohol.
- Smoking.
- Certain long-term health conditions.
- Some medications and medical conditions.

Some risk factors cannot be changed, while others may be addressed through appropriate healthcare advice and lifestyle support.

Care staff should support individuals according to their **personal choices, care plan and professional healthcare advice**, rather than imposing lifestyle changes themselves.

Supporting an Individual with Hypertension

Care staff can support individuals living with hypertension by:

- Following the person's individual care plan.
- Supporting prescribed medication when trained, competent and authorised.
- Following agreed blood pressure monitoring arrangements.
- Recording readings accurately.
- Reporting readings outside agreed individual parameters.
- Supporting appropriate nutrition and hydration arrangements.
- Encouraging safe activity and mobility where appropriate to the person's abilities and care plan.
- Supporting smoking cessation or healthy lifestyle programmes where these have been chosen or recommended.
- Encouraging attendance at healthcare appointments where appropriate.
- Observing for changes in the individual's general health and wellbeing.

Medication and High Blood Pressure

Many people with hypertension are prescribed medication to help control their blood pressure.

Care staff should:

- Follow the prescription and Medication Administration Record (**MAR**) accurately.
- Administer or support medication only when trained, competent and authorised.
- Never independently increase, decrease, stop or withhold prescribed medication because of a blood pressure reading unless specifically instructed within an authorised clinical protocol.
- Observe for possible side effects or changes in the individual's condition.
- Report medication concerns according to organisational procedures.

Some blood pressure medicines can contribute to symptoms such as **dizziness or light-headedness**, particularly when standing. Such symptoms should be recorded and reported appropriately because they may increase the risk of falls.

Blood Pressure and Falls

An individual may sometimes experience a fall in blood pressure when moving from lying or sitting to standing. This is known as **postural or orthostatic hypotension**.

Possible symptoms include:

- Dizziness.
- Light-headedness.
- Feeling faint.
- Weakness.
- Blurred vision.
- Unsteadiness.

Where an individual is known to experience these symptoms, staff should follow their care plan and falls-prevention arrangements.

New or worsening dizziness, fainting or repeated falls should be **reported promptly** rather than assumed to be a normal consequence of age or medication.

Remember

Hypertension is often symptomless.

The absence of headaches, dizziness or other symptoms does **not** mean that an individual's blood pressure is necessarily within their recommended range.

Good care involves following prescribed treatment and monitoring arrangements, supporting the individual appropriately and **recording and reporting concerns rather than independently interpreting or changing treatment.**

Professional Responsibilities

Care staff have an important role in supporting individuals living with hypertension (**high blood pressure**). Because hypertension often causes no noticeable symptoms, prescribed medication, monitoring and appropriate reporting can be particularly important.

As a care professional, you should always:

- Treat the individual with dignity, respect and involve them in their care.
- Follow the person's individual care plan and prescribed treatment arrangements.
- Support prescribed medication only when trained, competent and authorised.
- Never independently start, stop, withhold or alter blood pressure medication unless following an authorised clinical instruction or protocol.
- Undertake blood pressure monitoring only when this forms part of your role and you have been appropriately trained.
- Use the correct equipment and measurement procedure.
- Record readings accurately and promptly.
- Follow individual parameters and escalation instructions within the care plan.
- Observe for dizziness, faintness, weakness or changes in mobility.
- Take particular care when an individual experiences symptoms when standing.
- Record and report significant changes in the person's condition.
- Follow organisational escalation and emergency procedures.

When to Raise Concerns

Report concerns according to the individual's care plan and organisational procedures if:

- A blood pressure reading falls outside the person's agreed parameters.
- Repeated readings are significantly different from the individual's usual readings.
- The person develops new or worsening dizziness or light-headedness.
- They experience fainting or near-fainting episodes.
- There is a noticeable increase in weakness or unsteadiness.
- They experience repeated or unexplained falls.
- They develop possible side effects associated with prescribed medication.
- They are repeatedly refusing or unable to take prescribed medication.
- There is any other significant change from their usual condition.

Do not independently diagnose the cause or alter treatment. **Record what you observe and escalate appropriately.**

When to Call 999

High blood pressure itself does not automatically mean that someone requires emergency treatment. However, **serious symptoms can indicate a medical emergency regardless of the blood pressure reading**.

Call **999** if the individual:

- Shows **FAST signs of a possible stroke** — facial weakness, arm weakness or speech problems.
- Develops sudden severe chest pain or symptoms suggesting a heart attack.
- Has severe or sudden difficulty breathing.
- Collapses, loses consciousness or is difficult to wake.
- Develops a seizure when emergency assistance is required.
- Develops sudden severe neurological symptoms, such as significant weakness, loss of vision or difficulty speaking.
- Appears critically unwell or is deteriorating rapidly.
- Has symptoms that make you believe their life is at immediate risk.

Follow organisational emergency procedures while awaiting assistance.

Supporting Accurate Blood Pressure Measurement

Where measuring blood pressure is part of the care worker's authorised role, accurate technique is important.

Staff should:

- Follow their training and the equipment manufacturer's instructions.
- Use an appropriately sized cuff.
- Ensure clothing does not interfere with correct cuff placement.
- Help the individual sit or position themselves as required by the monitoring procedure.
- Allow the individual to settle before taking the reading where appropriate.
- Avoid talking unnecessarily during the measurement.
- Repeat measurements only where required by the person's monitoring plan or procedure.
- Record the result accurately rather than relying on memory.
- Report readings according to the individual's agreed parameters.

If a reading appears unexpected, follow the person's care plan and organisational procedure rather than making an independent clinical judgement.

Blood Pressure Readings – An Important Principle

Care staff may encounter general blood pressure ranges in training materials or public health information. However, **individual clinical targets and escalation thresholds can vary** depending on factors such as age, health conditions, medication and professional assessment.

For this reason, care staff should not rely on a generic number to decide whether an individual requires treatment.

Follow the **individual's documented monitoring and escalation plan** and seek appropriate clinical advice when required.

Good Practice Reminder

Treat the person, not simply the blood pressure reading.

A reading should always be considered alongside the individual's care plan, usual readings and overall condition.

Care staff should **measure accurately, record accurately, observe the individual and escalate according to agreed procedures** — never independently diagnose hypertension or change prescribed treatment.

Hypertension (**high blood pressure**) is a common condition in which the pressure of blood within the arteries remains consistently higher than recommended levels.

High blood pressure often causes **no noticeable symptoms**, but if it remains uncontrolled over time it can increase the risk of serious health problems including **stroke, heart disease, heart failure and chronic kidney disease**.

Care staff play an important role by following the individual's care plan, supporting prescribed medication, carrying out blood pressure monitoring where trained and authorised, recording readings accurately and recognising changes that require reporting or escalation.

Hypertension Awareness Checklist

✓ Understand that high blood pressure often causes **no obvious symptoms**.

✓ Know the individual's care plan and prescribed treatment arrangements.

✓ Support prescribed medication only when trained, competent and authorised.

✓ **Never independently start, stop, withhold or alter prescribed blood pressure medication.**

✓ Undertake blood pressure monitoring only when trained and authorised.

✓ Use the correct equipment and measurement technique.

✓ Record blood pressure readings accurately.

✓ Follow the individual's documented parameters and escalation instructions.

✓ Observe for dizziness, light-headedness, weakness or fainting.

✓ Be alert to increased unsteadiness or falls.

✓ Report significant changes from the individual's usual condition promptly.

✓ Remember that one abnormal reading should be considered alongside the person's overall condition and care plan.

✓ Recognise **FAST signs of stroke** and other symptoms of a medical emergency.

✓ **Call 999 if a life-threatening medical emergency is suspected.**

Further Information

For further guidance on high blood pressure, visit:

NHS – High Blood Pressure (Hypertension)
https://www.nhs.uk/conditions/high-blood-pressure-hypertension/

British Heart Foundation – High Blood Pressure
https://www.bhf.org.uk/informationsupport/risk-factors/high-blood-pressure

NICE – Hypertension in Adults: Diagnosis and Management
https://www.nice.org.uk/guidance/ng136

Blood Pressure UK
https://www.bloodpressureuk.org/

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Related Knowledge Hub Resources

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- Resource 021 – Medication Administration Safety Checklist
- Resource 028 – Medication Safety Awareness
- Resource 034 – Recognising Deterioration in Care Settings
- Resource 058 – Stroke Awareness in Care Settings
- Resource 063 – Heart Failure Awareness in Care Settings
- Resource 064 – Atrial Fibrillation (AF) Awareness in Care Settings
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