

The ethnic minority linkworker: a key member of the primary health care team?

RAJ KHANCHANDANI

STEPHEN GILLAM

SUMMARY

We present an evaluation of the role of a linkworker trained in health promotion and aspects of chronic disease management. A shift in workload occurred from the practice nurse to linkworker, and there were improvements in asthma and diabetes care. A linkworker can be successfully trained to do traditional nursing tasks, which permits a change of role for the practice nurse and can have a beneficial effect on the processes of chronic disease management.

Keywords: linkworker; health promotion; disease management.

Introduction

BISCOT Road Surgery is an inner-city practice with a multi-ethnic population of 2700. Approximately 52% of the population originate from the Indian subcontinent. Our practice employs three part-time nurses, working a total of 25 hours per week. There are two partners and a general practitioner registrar. We employ a part-time manager and a full complement of reception staff. The practice has not succeeded in appointing a nurse who could speak any of the Indian subcontinent's languages.

Peoples of the Indian subcontinent have a higher mortality from ischaemic heart disease and a higher incidence of diabetes than the white population.¹ Ethnic minorities' knowledge and use of services may be relatively poor,² and linkworkers have been recommended for promoting health among ethnic minorities;³ the Asian Mother Baby Campaign⁴ is often cited as pioneering the role.

An immediate challenge for researchers is the diversity of labels attached to the role (33 in one review).⁵ Linkworkers have been used as interpreters, advocates,⁶ and in health education.⁷ We define linkworkers as lay people trained to perform a defined role in promoting health for a selected community. The linkworker should be recruited from the community served, and act as a bridge to local health agencies for that community.

Our aim was to draw up guidelines on the training needs of linkworkers and to assess their likely impact on skill-mix and disease processes. We are not aware of other published evaluations of the linkworking role in United Kingdom general practice.

Method

The linkworker appointed could speak English, Urdu, and Punjabi fluently. She had no prior experience in the National Health Service. A detailed training schedule was drawn up, falling into two parts: first, generic training on such matters as

communication skills and ethics; secondly, training on disease management, specifically on diabetes and asthma.

At various stages of the project, assessment of the linkworker was carried out using random case analyses, video role-plays, and assessment schedules. Informal feedback was received from patients, workload was studied, questionnaires that were administered to nursing and medical staff explored the redistribution of work, and audits of diabetes and asthma care were carried out. These assessments were used to determine further training needs of the linkworker.

Results

Workload of linkworker

The linkworker's workload increased from 90 patients in the first quarter of the year to 231 in the third quarter, during which time there was a corresponding decrease in the nurse's contacts with diabetics and asthmatics. The linkworker saw increasing numbers of English-speaking patients so that, by the last quarter of the year, she saw 78 non-English-speaking patients and 49 English-speaking patients.

Chronic disease management

The linkworker had particular responsibility for helping to manage patients with diabetes and asthma. The coverage of various elements of care of patients with diabetes and asthma improved (Table 1).

Impact on the team

The shift in work from the nurse allowed us to develop her role to include writing protocols, carrying out audits, and organising recalls. Over a 15-month period, many organizational changes have occurred within the practice:

- Regular minuted clinical meetings are now held, involving all clinical staff;
- Projects are planned and have named leads;
- Audit cycles are completed and changes implemented;
- There are agreed strategies for managing chronic diseases;
- Protocols are reviewed and new ones adopted; and
- The nurse has taken on newer clinical responsibilities, including carrying out pelvic examinations and helping to manage vaginal discharges.

Discussion

The limitations of an uncontrolled, single practice-based descriptive study are self-evident. A larger study is required, incorporating economic analysis. Few other studies involving linkworkers in the community have quantified changes in health outcomes,^{8,9} although one study has shown positive outcomes.⁷

The linkworker's achievements (Box 1) should not be underestimated where recruitment of nurses speaking ethnic languages is difficult. It is easier to train a linkworker to carry out nursing duties than to teach a nurse to speak an Asian language fluently. Our confidence in the linkworker allowed us to use her with our English-speaking patients as well.

Linkworkers can be used for well-defined health promotion projects. With changes in primary care, opportunities are opening

R Khanchandani, MD, general practitioner, Luton. S Gillam, MRCP, director of primary care programme, King's Fund, London. Submitted: 30 July 1998; final acceptance: 10 March 1999.

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Table 1. Changes in diabetic and asthma care.

	April 1996	February 1997
Number of diabetics	137	152
Number (%) of diabetics with HbA1C recorded in the last 12 months	93 (68)	122 (80)
Number (%) of diabetics in HbA1C below 7.2	63 (46)	89 (58.7)
Practice diabetics' average Hb1AC	7.5%	7.24%
Number (%) of diabetics with fundoscopy in previous 12 months	53 (39)	92 (61)
Number of asthmatics	242	274
Number (%) of asthmatics with PFR recorded in the last 12 months	95 (39)	145 (53)
Number (%) of asthmatics on inhaled steroids	168 (69)	189 (69)
Number (%) of asthmatics with good inhaler technique	75 (31)	125 (46)

PFR = Peak flow recording.

- Routine clinical checks on patients, particularly for asthma and diabetes;
- Data collection;
- Advice on health promotion;
- Administrative tasks including audits;
- Increasing the practice's awareness of needs of ethnic minorities; and
- Facilitating communication between patients and other practice staff.

Box 1. Current roles of the linkworker in our practice.

for linkworkers to have a wider role in health promotion. If linkworkers are to be widely used, there is a need for recognised training, an umbrella organization, and a national pay structure.

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Address for correspondence

Dr Raj Khanchandani, Biscot Road Surgery, 21 Biscot Road, Luton LU3 1AH.