

# Burnley East PCN

## Inclusion Health Approach

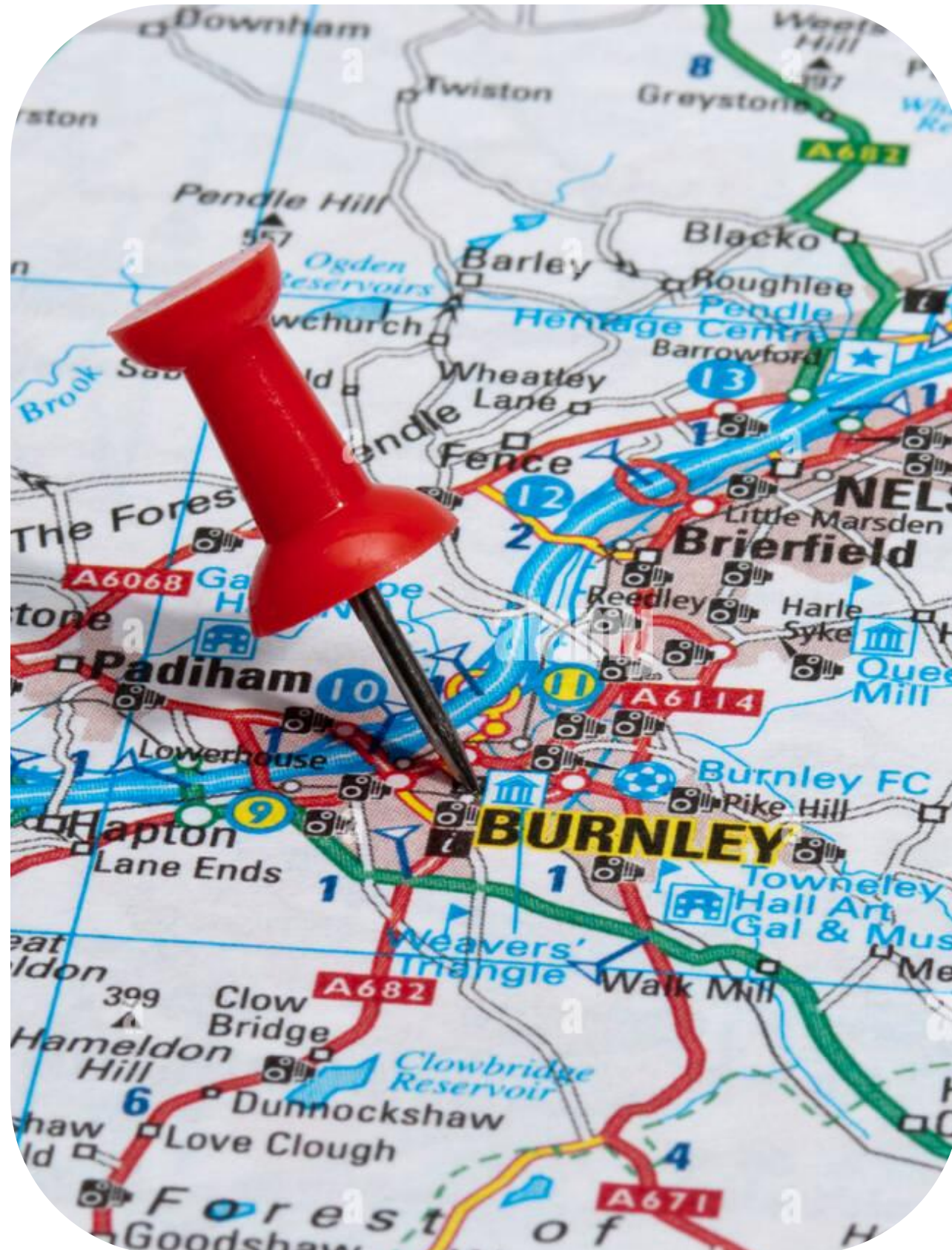
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# Summary



28%

*There are 28% of people currently unemployed.*



19.6%

*In 2021 19.6% of residents reported fuel poverty*



53.8%

*53.8% of residents live in areas of highest risk of food insecurity*

Burnley is a town in Lancashire with a population of around 100,000 with Burnley East PCN covering 54,000 patient population.

Burnley faces significant challenges related to deprivation, health disparities and a diverse demographic population including low literacy levels.

Burnley is among the most deprived towns in England with Daneshouse and Stoneyholme ward; where 83.7% ethnicity is recorded as 'not White' ranked within the top 5% most deprived wards nationally.



# Our Approach



Workshops

Health Events

Outreach

Courses

## Workshops

As a PCN we hold several interactive workshops for patients, community leaders and stakeholders. Using a MECC approach to educate on important topics such as end of life, dementia, women's health and diabetes subjects are chosen based on patient feedback

## Health Events

The PCN holds a winter and summer Health and Wellbeing Mela annually this is an opportunity to bring the community together, give health advice, offer vaccinations, liver screening and health checks to attendees. These events are used to facilitate discussions and gather feedback on health issues that are important to the community.

## Outreach

We provide regular outreach clinics at our local homeless shelter, refugee centre and other community venues offering health checks, vaccinations and health coaching.

## Courses

The PCN support the community by hosting health related courses that are suggested by stakeholders; including basic life support, Ketamine awareness, Vaping and Diabetes



# Ladies Diabetes 6 week programme

Burnley East PCN was approached by our local ICB to help address high prevalence of type 2 diabetes, patient management of the illness and increase referrals to EMPOWER for women specially from South Asian heritage.

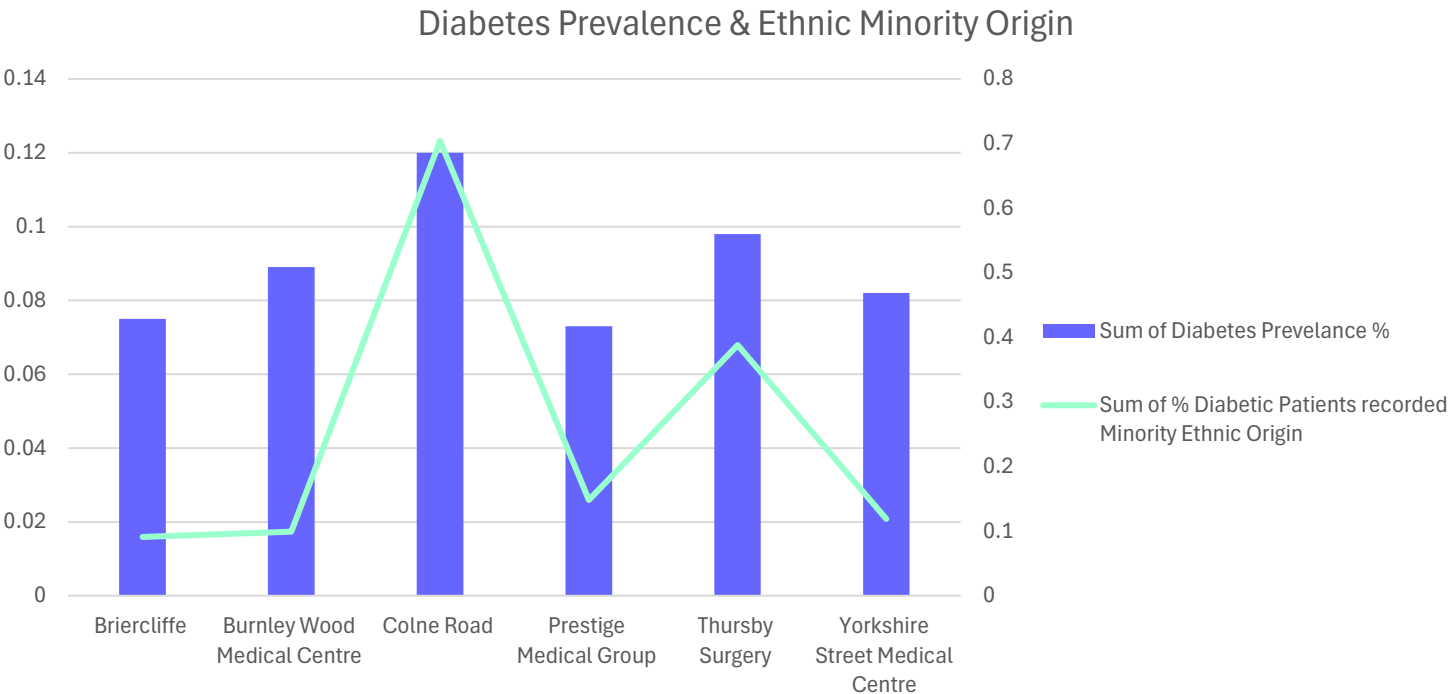
Data from Aristotle shows Daneshouse and Stoneyholme ward within Burnley having significantly high rates of type 2 diabetes diagnosis with 94.7 per 1000 patients diagnosed.

We planned three 6-week courses over the financial year, inviting patients who had been diagnosed with type 2 diabetes within the last 12 months from this target cohort of the community.

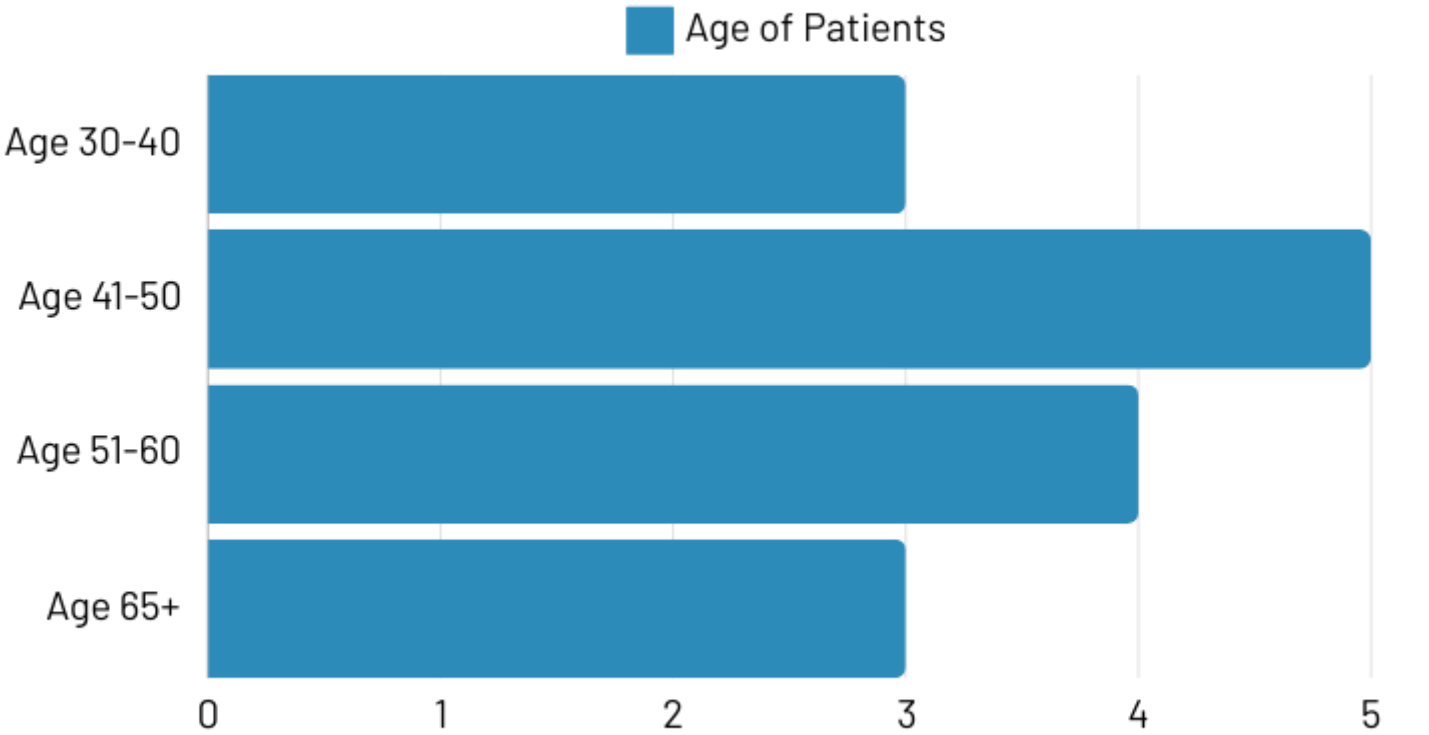
The courses were run from community locations including a community centre and Islamic High School which helped ensure increased uptake as these were trusted sites that these patients felt comfortable attending.

We linked in with local groups to support the delivery of the courses to ensure sustainability of the project outcomes beyond the project lifecycle.

## Diabetes Prevalence



## Age Range of Participants





# 6 Week Programme

1

## Introduction

This week is to give an overall introduction to the course, each participant will be provided their own workbook & stationery to utilise through the course

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## Diet, Lifestyle & Exercise

We have been supported by Burnley Leisure who supported this session delivering lifestyle advice in addition to a seated exercise class.

3

## Cooking Demonstration

We have been supported with this session by recycling lives and local chef's who have provided cooking demonstrations of healthy culturally appropriate menus.

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## Diabetes in Detail

This session looks more at diabetes, what to expect from your health check and possible complications. Also included are liver surveillance scans delivered on same site as the course.

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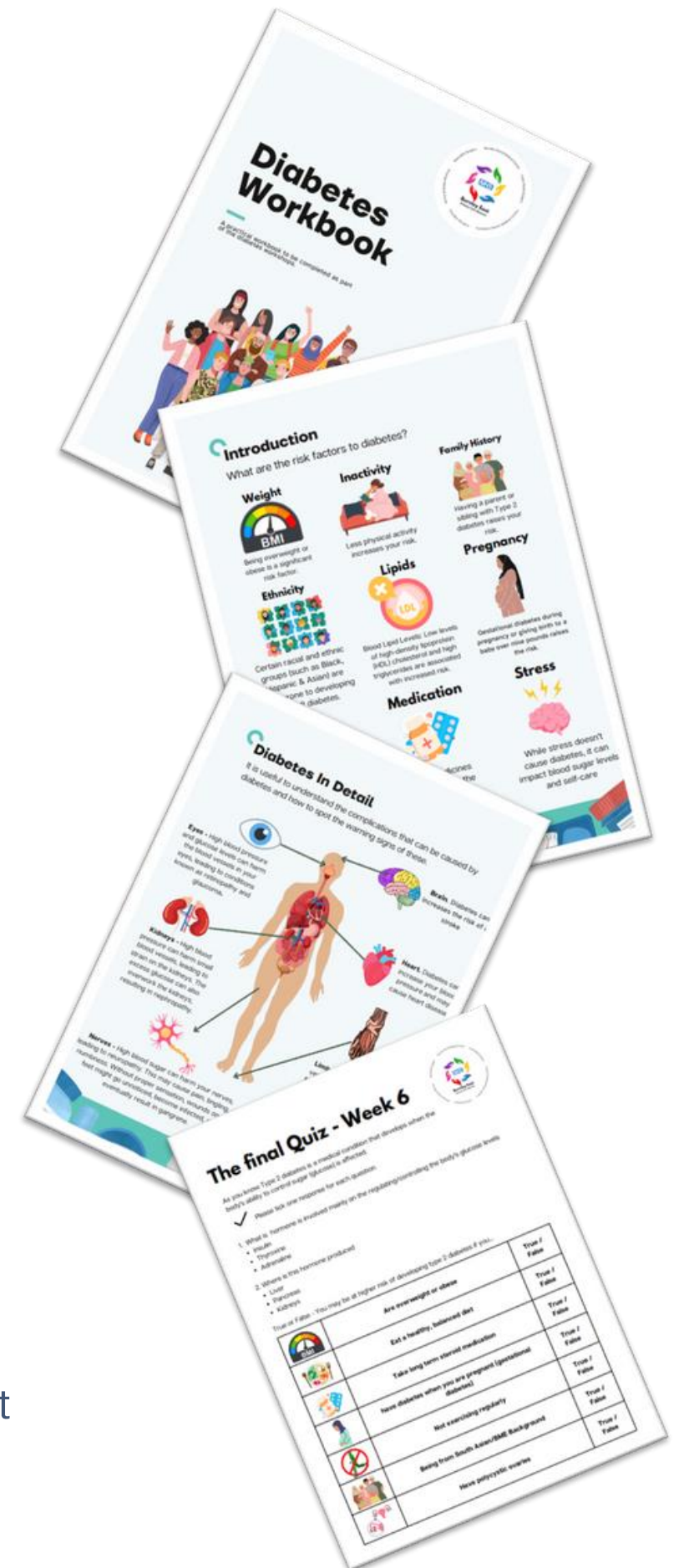
## Taking Care of Yourself

This session was supported by a local grass roots organisation called Alpha Balance who provided a practical session on how to reduce stress and holistically approach to personal care.

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## Celebration

All ladies who completed the 6 weeks programme were presented with a certificate, a final quiz was held, and consent gained for referrals to EMPOWER for those that met the criteria.



# Challenges

Literacy & Language

Cultural Barriers

Sustainability

Mistrust & Engagement

# Solutions

- We made a redesign to the booklet utilising infographics and spaces to draw as an alternative to written answers to overcome literacy barriers.
- Sessions were delivered in community languages and English to overcome language barriers.
- Sessions were run by a trusted female with lived experience of Type 2 diabetes
- We allowed family members/carers to attend to support attendees
- Course content was faith & culturally appropriate in terms of dietary requirements
- Our model is set up with the booklet and layout and could be run by other grassroots organisations to scale
- Shared knowledge through peer learning, healthier community outlook and spreading of awareness and positive messages learnt through the course
- Patients were invited with a personal invite via telephone call utilising a script and community languages where required to ensure maximum uptake
- Patients were introduced to the organisation running the courses by those individuals who are established and trusted within the local community
- Patients were encouraged to form self support networks to facilitate future engagement with other health programmes.



# Findings & Feedback



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*“The course was all helpful.”*

*“No improvement required. The course was prepared & delivered to a high standard. Well done!”*

*“I attended with my mother, and I feel more confident to keep everyone in our household healthy”*

*“A great 6 weeks, learned a lot”*

”



## Retention

**94.1%**

Completed all 6 weeks of the course. With only 1 participant not completing due to ill health

## Feedback

**93.0%**

Rated the course as very helpful in helping them manage their diabetes. With a further 73% rating the course as excellent.

## Referrals

**100%**

Of **eligible** participants accepted referrals to EMPOWER structured diabetes programme. 59 ladies were also scanned for liver surveillance with 5 needing onward referrals

## Understanding

**45.6%**

There was an increase of 45.6% in participants rating their own understanding of diabetes with a further 37.9% increase in the rating of their own ability to manage their diabetes.