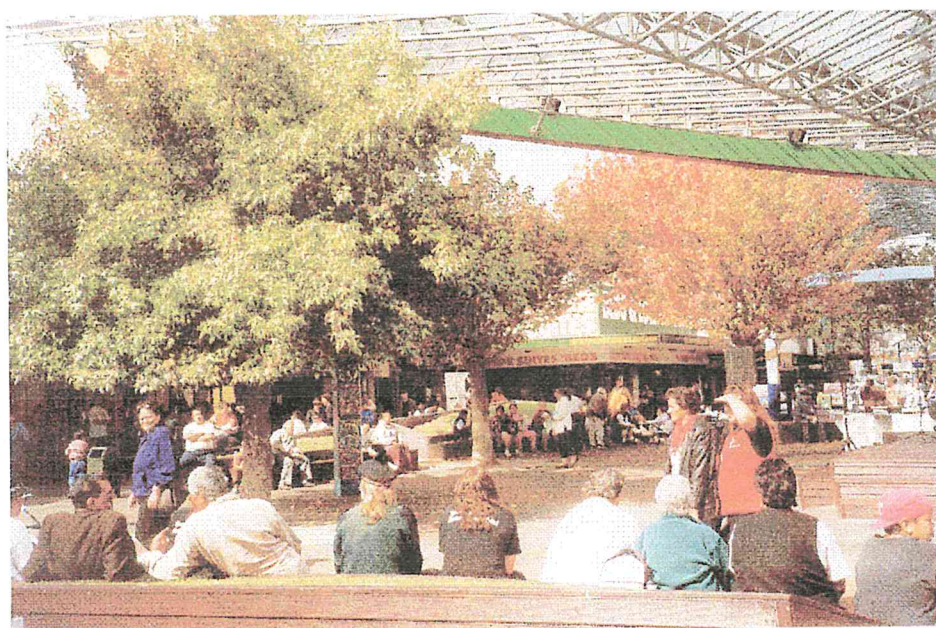




**DIABETES PROJECTS TRUST**

# Annual Report 2001



*Otara Town Center during Otara Diabetes Awareness Week 2001*

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**Note:** *Financial Reports Separate document*

**Key**  
DPT - Diabetes Projects Trust  
GP - General Practitioner  
DCSS - Diabetes Care Support Service  
RNZCGP - Royal NZ College of General Practitioners  
CMDHB - Counties Manukau District Health Board  
CODA - Community Organisations for Diabetes Action



## Diabetes Projects Trust – Mission Statement

*To reduce the incidence of diabetes and its tissue damage within New Zealand with the emphasis on South Auckland. This requires the ability to reliably demonstrate the number with diabetes and its complications, effective intervention methods and a clear understanding of the pathogenesis and natural history of diabetes in the high risk populations.*

*Success is dependent on a partnership between local Maori, Pacific Islands people, Europeans, other ethnic groups, GP's and the local health and education services. The knowledge and skills gained will be offered to assist other areas of New Zealand control diabetes.*

## Background

The Diabetes Projects Trust is an independent Charitable Trust established in 1992 to develop and drive the implementation of methods for the prevention of diabetes and its complications by means outside of the traditional health services. All revenue received by the Trust is used for the prevention of diabetes and its complications.

- (1) Establishing/evaluating methods for supporting and educating patients with diabetes and their families.
- (2) New methods for supporting community based initiatives for diabetes awareness and prevention through lifestyle change (particularly in socio-economically deprived communities).
- (3) Developing new methods for monitoring diabetes and its damage (thereby identifying areas requiring intervention and demonstrating change associated with intervention).
- (4) Supporting research into the causes and treatment of diabetes and its complications.
- (5) Developing new methods for the co-ordination of those involved with diabetes care, prevention or support.

Information on the previous development of the trust and its activities can be found in earlier annual reports.

## June 2000-July 2001



Much has changed for the Diabetes Projects Trust over this last year as detailed in the following pages.

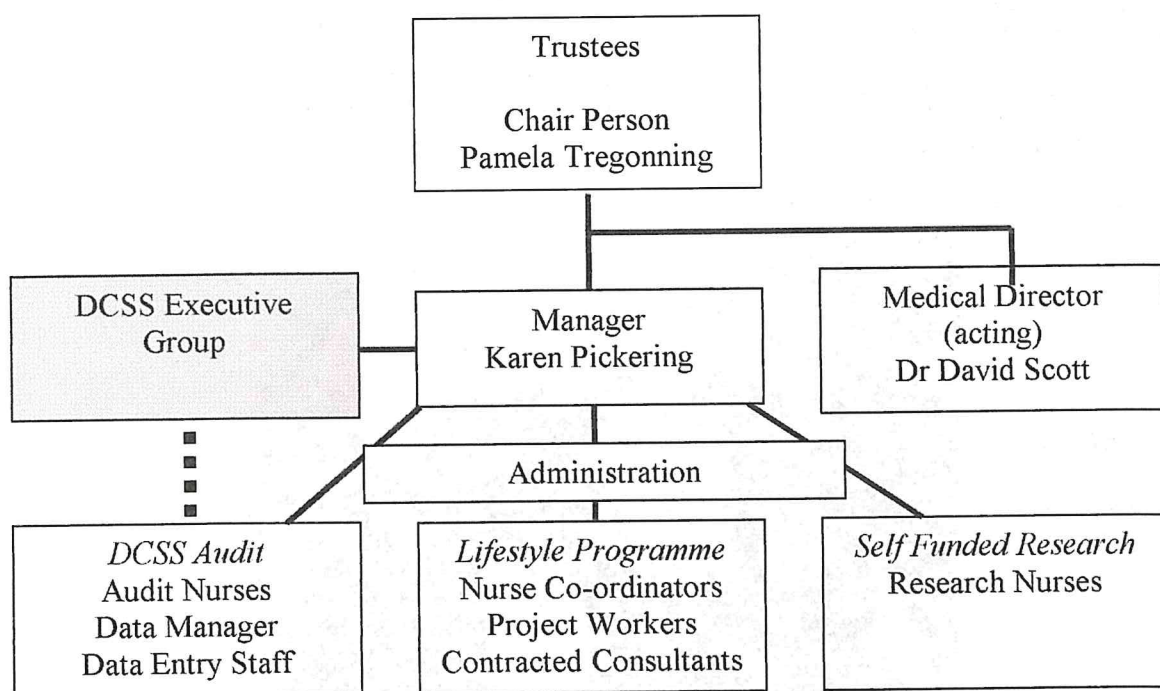
Employment of new staff has seen the "Lifestyle" programme develop tremendously and receive very positive feedback from customers and changes and improvements to the Audit process as well the obvious skills of our staff have also led to excellent acceptance of our service.

We have noted and responded to a marked increase in enquiries for information and assistance from members of the public, students, media and health professionals recently. This appears to have come from our being located in, and easily accessible to the community we work with as well as implementation of basic marketing, including a web page and listing in the local telephone directory. We have also seen increased bookings for education sessions and exercise demonstrations.

It has been a great year, with tremendous efforts being made by the staff and certainly sets high standards for the next.

## Diabetes Projects Trust Board Members

Chairperson	Pamela Tregonning	Executive Director SAHF
Vice-Chair person	Henry van der Heijden	Director, Patient representative
Trustees	John Baker	Diabetologist, Biochemist
	Susana Hukui	Patient representative
	Maria Roberts	Patient representative
	Faye Clark	General Practitioner in Otara
	Tom Robinson	Public Health Student/retired GP
	David Scott	Endocrinologist & Diabetes Researcher
	Christina Tapu	Pacific Island Health Advisor
	Eva Singsam	Pacific Island Resource unit
	Gill Plume	Service Design Manager TARS
	Garth Cooper	Professor School of Biological Science
	Olivia James	Otara Health Incorporated
	Ingrid Minett	Manager Diabetes Auckland



## DCSS Executive Group

Clinical leadership for the DCSS Audit Process as below:

Dr John Baker	Diabetologist, Clinical Head South Auckland Health
Dr Rick Cutfield	Diabetologist Clinical Head Waitemata
Dr Ashwin Patel	General practitioner. Representative Royal College GPs
Dr John Wellingham	Member Practice Standards Committee RNZCGP, Medical Director Integrated Care CMDHB, Project Manager for Chronic Care Programme Development Counties Manukau.
Dr David Scott	Endocrinologist & Diabetes Researcher
Margaret Rodgers	Senior Audit Nurse - Diabetes Projects Trust

## Diabetes Projects Trust – Current Staff

Karen Pickering – Manager  
 Jennifer Leatham – Administration  
 Isileli Vunileva – Project Worker  
 Patricia Harry – Data Manager/Exercise Instructor  
 Kate Smallman – Nurse Co-ordinator - Lifestyle

Malaki Vitale - Project Worker  
 Margaret Rodgers – Senior Audit Nurse  
 Barbara Groenewegen – Audit Nurse  
 Nellie Allen – Audit Nurse  
 Olivia Hala – Nurse Co-ordinator - Lifestyle



## 1) Lifestyle Programme

The Diabetes Projects Trust Lifestyle Programme is made up of 3 main components, Education, Exercise, and Support Groups.

### **Education Programmes – Primary Prevention**

The past year has seen the employment of 2 part time nurses to work specifically in the areas of diabetes prevention, complication prevention at a community level. Since their commencement in January of 2001 they have established themselves in their new position, built a contact list and accessed a wide variety of different groups in the community, always with a focus on those with most need, particularly Maori and Pacific Island and young people, as well as providing support to other organisations

Sessions July 2000-December2000 - total of 20 sessions held at such venues as High schools, Training institutions, Salvation Army, community halls, GP Practices, church congregation

Sessions in January 2001 to June 2001 - Total of 20 sessions at venues including GP practices, Churches, Marae, Residential facilities (elderly, young adult, drug/alcohol rehab), Learning institutions, local community networks.

**See Also: 2) Community Activities**



*Lifestyle Team,  
from left, Malaki,  
Trish, Kate,  
Olivia and Isi*

### **Exercise Groups – Primary and Secondary Prevention**

6 free exercise groups are held each week for individuals with diabetes and their families. Attendance continues to improve,

Early in 2001 a Catholic Church Group in Otara expressed interest in developing their own exercise group and with help from the DPT in the form of an instructor, a new class was piloted for 2 months. Excellent attendance, high group enthusiasm and commitment has led to the decision to continue with the group on Wednesday evenings in Otara. Training is being sourced for the group to provide their own instructors.

Prolonged problems with attendance and frequent cancellations (18 sessions cancelled in 6 months) of the venue have led to reduction of service at a Church venue in Otara after lengthy negotiations from 2 classes per week to 1.

*Attendance June 2000-July 2001*

Month	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June
Total	403	525	405	424	440	191	274	622	787	441	603	502



### ***Support Groups – Primary and Secondary Prevention***

In the 2000 period 2 very successful support groups have been running with assistance and guidance from the DPT. Attendance at these groups has averaged at 29 per session which shows the excellent support they are receiving from the community. The possibility of dividing these groups is being considered as the number of participants grows, however this requires careful consultation to avoid potentially damaging the dynamics of the groups. Existing groups are of mixed ethnicity, primarily Maori and Pacific Island and ages tend to be in the older age group (above 50). Groups are headed by volunteer members of the community who are absolutely committed to diabetes.

The aim of the groups is to provide support and education to individuals with diabetes and their families in a comfortable environment. More family members are now attending which allows the groups to have a stronger primary prevention role and increases support for the diabetic patient in their own home.

One of the reasons behind the success of the current support groups is the promotion of self determination. Group members are encouraged to choose topics which interest them related to health, ie, determinants of health, as well as a minimum component of diabetes related information/input.

Examples of content provided in support groups include:

healthy cooking demonstrations (using common foods in a sensible way), diabetes specific issues (eg, foot care, medication, prevention, exercise), Asthma, Fire Safety, Work & Income, Inland revenue, Pharmacists, other local community groups).



## **2) Facilitation and Support of Community Initiatives/Groups/organisations**

The Diabetes Projects Trust has had a strong role in encouraging co-operation and communication between organisations and groups in the community. CODA (Community Organisations for Diabetes Action) was set up in 2000 and a structure was formalised when supporting members decided to have an identifiable name to use in correspondence, promotion and on policies.

Policies have been developed for community screening, safety, privacy & confidentiality, who to screen, equipment, characteristics of screener and laminated prompt sheets. These were based on current recommendations and are used at CODA events. The CODA concept was presented at the 2000 NZSSD Conference.

CODA has organised or participated in 2 significant health promotion events over the past year

*November 2000  
Walk for Health*



*March 2001 - Otara Diabetes Awareness Week (report available)*

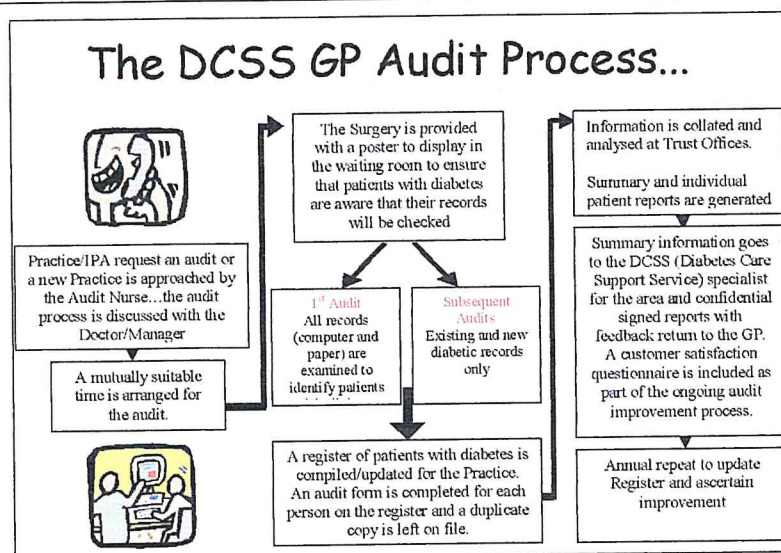




The Diabetes Projects Trust has also participated in a variety of community health promotion activities including Healthy Hearts, Youth Expo, Town & Country Day, School Family days (screening and Health Displays), Kidney Awareness Week (conjunction with Middlemore Renal service), Pacific Island Positive Aging forum, and Royal Oak Diabetes Screening (in support of Diabetes Auckland)

### 3) DCSS Audit

#### Routine Audit



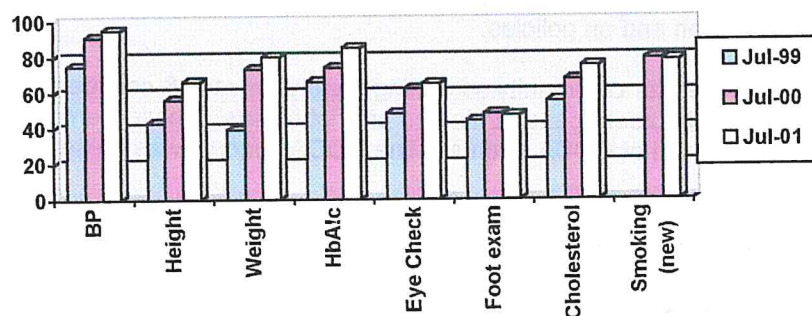
The majority of General Practitioners in the South and West areas of Auckland participate in an annual audit of their practice in providing care for individuals with diabetes. Some are up to their 7<sup>th</sup> audit year showing real commitment to quality improvement.

Analysis of information is also continuing to be provided for a Practice in Tonga, now in its 5<sup>th</sup> audit year.

*Audits undertaken for the 2000-2001 1 year period - All Diabetic Patient Files examined (regular & non regular)*

Number of Patients South Auckland	4185	Number of Patients West Auckland	2900
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We are starting to analyse information from year to year, below is an example of a 3 year comparison of information on GP recording of information. A noticeable improvement in recording is obvious, with the exception of smoking which is just starting to be fed back so is not expected to demonstrate change.



#### Audit Quality Improvement

Many improvements have been implemented in the DCSS Audit over the last year. The employment of 2 enthusiastic new nurses to run the South Auckland service has resulted in changes to streamline the process, new policies and a close working relationship with Margaret Rodgers, Senior Audit Nurse in West Auckland has led to greater consistency. The results are very pleasing with many new practices being started (requiring considerable effort including full file searches) and some existing practices being up to their 7<sup>th</sup> Audit.

A new structure for feedback has been in place for just over a year, and the return rate from participants has been high with plenty of positive comments and some suggestions for improvement, many of which have been implemented. A summary report of this is available.

Quality Policies have been designed and implemented, including aspects of privacy/confidentiality, handling communications technology, and quality checks at all levels of data handling, from collection, to data entry, to

data analysis. Staff training in Privacy has been undertaken as well as better computer/data management practices being put in place.

The DCSS executive which provides oversight and direction to the Audit met 4 times over the year period, discussing quality issues, direction, and ways of improving the service provided.

#### 4) Self Funded Research Studies

See Staff Reports – Jacqui Moffat – page 8

#### 5) Other Activities

Research Information Database - this was set up in response to requests for information from health professionals, organisations, schools and members of the public (more prevalent now that we are listed in the phone book). Information is held on an access database, and articles, papers, publications can be accessed through key words, author and title.

Conference Presentation - presentations have been made at 2 conferences over the last 12 months, Indigenous Peoples Conference in Christchurch, and New Zealand Society for the Study of Diabetes (NZSSD) conference in Whangarei.

Education sessions have been presented to Health Professionals (from Health care workers, to practice nurses and post graduate students on a range of topics from Diabetes to Networking skills in the community.

#### Managers Conclusion

The 2000 to 2001 year has been a busy and exciting time for the Trust. New staff have taken on important roles and brought their own skills to the development of those roles, and existing staff have proven their flexibility and value through constantly improving the service they deliver.

Most staff can say they have participated in activities they previously haven't experienced, whether in the form of extra education, media appearances or with the development of new skills.

Feedback from General Practitioners for the DCSS Audit has been overwhelmingly positive, and evaluation of sessions delivered by lifestyle staff has also been excellent with invitations issued for return visits. Ongoing development of this quality service is expected to continue to yield demonstrated improvements to the care delivered to patients.

Continued growth is predicted for the 2001-2002 year, an absolute necessity in the face of the growing diabetes problem.

#### Staff Reports

##### Report – Jennifer Leatham – Administration

A very busy year for Administration – made busier by the fact that due to office space being at a premium, I had to move my desk – yes, it is on wheels – along with mobile drawers, PC, printer, etc, each Thursday morning before beginning work. I now have my own office space and it is GREAT! ☺

The annual accounts and audit report have just been returned by our Accountant. While they were very pleased with the processes we have in place, they felt an accounting package could be very useful, so have left us with a "trial programme" of Quick Books. They have acknowledged that the spreadsheets we supply them with are totally adequate, but thought a "package" could save us time.

The Research Database set up last year continues to grow, and we are receiving ongoing requests for information from this source. MS Access training I received earlier this year, through MIT, has helped me understand and use this programme confidently.

I would like to thank our Manager, Karen, and the Trust board for their support in providing ongoing education and also training in Diabetes, First Aid knowledge, etc.  
July 2001





Kate Smallman - Nurse Co-Ordinator Lifestyle

There are two new Co- Ordinators looking at lifestyle that started in January 2001: Kate Smallman and Olivia Hala. It has been a very successful 6 months, with an increase in education, support for the exercise classes and support groups.

EDUCATION - There have been 30 sessions delivered to different community groups (education and health promotion events). There was a successful session held at Papakura Marae. The talk and discussion was on Diabetes and how to prevent it. There has been several talks done at churches, the Mormon Church, Tokaimanga church and St'Anns Catholic Church. The sessions have also been done at schools, Positive aging groups, collages, well baby groups, Otara Network and General Practitioner's surgeries. People have learnt how to prevent diabetes and those with diabetes have gained more knowledge. At some of these sessions and also separately there have been screening for diabetes. Altogether there has been 10 sessions. People with raised blood glucose levels have been advised to see their GP. The number of people found to have raised levels varies from 10%-49%. These figures are above the results we expect to find. The screening is a very important part of helping prevention of diabetes and its complications.

EXERCISE CLASSES - The exercise classes are very successful. There have been seven classes a week for most of the six months. One class has been stopped but the participants have been going to another class on Mondays. One new class was started at Sulufaigu Tapulaga Katoliko Otara. This has been well attended and a successful group.

SUPPORT GROUPS - There are two very good, successful groups running. There are good community leaders that actively support and organise the groups. There are speakers organised to give interesting and valuable information to the groups. These included the Fire brigade, Positive aging, Asthma, and financial support. Each session now has a diabetes session included. There is discussion at a local Marae to set up a new support group, expanding the number of groups that are been run.



Report – Patricia Harry – Data Manager

Over the past couple of months the team have been quite busy with the flow of the DCSS Audit, from the South and the West areas.

Alterations and improvement on the database have taken place. Staff have been trained in these changes. Reports are being upgraded due to feedback suggestions, from the GPs outlining certain areas that maybe should be covered. GPs are provided with an evaluation form, which is sent with their reports and returned with positive or negative feedback which will be looked into.

The team have had training to update their skills and are always positive in their work. Confidentiality is always maintained as well as backing up procedures. The Data entry team are happy with the upgrade of computer programs and also with database changes. The Team would like to thank the Trust Board and Manager for implementing changes and training for better skills which has really helped.

Report - Margaret Rodgers - Senior Audit Nurse

There appears to be an increase in new diagnoses in most practices. Improvements to reports and the personal approach in reporting back continues to receive very favourable comments in West Auckland & almost all are very appreciative of our efforts.

There is a trend towards amalgamations of practices into larger entities and upgrading software systems and this is delaying some audits and bringing others forward as I work around the changes these practices are going through.

Report – Jacqui Moffat – Research Nurse - Field Study

This study examines the effects of a cholesterol lowering medication in people with diabetes and is organised through the Clinical Trials Unit at Sydney University for a French Drug company called Fornier. The FIELD study is now entering its 3<sup>rd</sup> year and after completion of recruitment has managed to recruit 225 participants. We are involved in 2 substudies within the trial - QoL substudy and Compliance substudy. Our next international meeting will be next year sometime in Melbourne and we await an interim analysis.







