Annual Activity Report

July 2003-March 2004



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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. Revenue received by the Trust is used for the prevention of diabetes and its complications through:

- 1. Establishing/evaluating methods for supporting & educating patients with diabetes/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.



From the Chairperson

On behalf of the Diabetes Project Trust (DPT) board of trustees it gives me pleasure to once again present the annual activity report for the past financial year. Karen Pickering and her staff have built on the successes of the previous year and once again have achieved remarkable results.

A key highlight of the year is the appointment of the new medical director. Dr Tom Robinson was appointed to the role and commenced in March 2004. Tom brings a wealth of general practice experience and a recent Masters in Public Health degree to the role. He has already started actively supporting DPT staff professional development, has attended conferences where he has presented papers under the auspices of the DPT and is currently preparing a research project. Tom and Karen will together make an impressive team representing the DPT in the community!

The launch of the new adolescent video 'Stay in Touch' was as exciting as watching the Oscar win by Peter Jackson! Karen and her team organised a preview screening complete with 'bubbles', furs, tiaras and the much coveted OSKA statuette. This was won by Kate Smallman and her team in an overwhelming unanimous vote. The new video has been well accepted by the schools in which it has premiered. Plans are underway to extend the programme to other schools once funding has been secured.

The DPT continues in its advisory and support role with several diabetes planning groups. Diabetes has now been recognised by Counties Manukau District Health Board (CM DHB) as a major health issue that threatens to swamp existing diabetes services and facilities. A review of the local services and an action plan for the community are currently being developed. It is heartening to know that the DPT is recognised as a major contributor to local community based diabetes services and as such is invited to participate in future planning by the District Health Board (DHB).

The hospital based diabetes services under the umbrella of the DHB continue to share their work place at Alexander Avenue in Otara with the DPT. We are very grateful to the DHB and the diabetes staff for this most generous support. The sharing of the workplace has some disadvantages as the facility is quite small but this is outweighed by the significant benefit to the DPT staff of working in partnership with the diabetes staff for the benefit of people with diabetes and the community as a whole.

The various other projects under the guidance of Karen continue to prosper. The lifestyle programme, continues to achieve and surpass requirements in terms of number of sessions and positive feedback from attendees. The DCSS audit continues to meet contract requirements and has evolved slowly over time. Changes to local Primary Health Organisations (PHO's) and General Practitioner reporting and auditing requirements under the DHB may require further modifications to the current format. However, negotiations are underway with CM DHB planners to ensure the DPT can continue to provide the service in the near future.

My sincere thanks also to the rest of the DPT board for their ongoing support and collective wisdom. Their commitment and support help to ensure the ongoing success of the various DPT initiatives.



On behalf of the board I would like to pay special tribute to Dr David Scott. David undertook the role of medical director for a number of years, resigning only when we had finally secured Tom in the role. David's commitment and very obvious passion for the prevention of diabetes in the community as well as the improvement in care of people with diabetes is an inspiration to us all. David will continue his involvement with the DPT trust as a very valued board member. His wisdom and guidance are much appreciated by all those who sit on the trust board.

Finally, it is with great pleasure that I extend my sincere thanks and that of the board to Karen and her team for an excellent years work. I am sure I speak for the entire board when I say that working with such a dedicated and committed team as the DPT staff makes the role of the board a pleasurable task. Their cheerful



and enthusiastic presentations to the board are a delight. I can well understand the very positive feedback they receive from their various community engagements.

Our sincere thanks and best wishes to all the DPT team for the coming year!

Pam Tregonning

Medical directors report

It has been an interesting and busy time since I joined the Diabetes Projects Trust in the beginning of March. Having been a trustee for a number of years I understood the projects and the philosophy of the Trust, but learning what goes on behind those activities has given me an increased appreciation of the excellent work the staff do and the wide range of skills they possess. It has been great to join a friendly and supportive group of people who all believe passionately in the work they are doing.

The Trust has always been active in three main areas and I am keen to support the trust activities in all of these areas.

- Supporting primary care management of diabetes
- · Health promotion and community development
- Research

The Diabetes Care Support Service audit is a large and important part of our activities. Our audit nurses and database managers have developed a great reputation for expertise in doing audits and a huge amount of energy is put into ensuring their quality. We need to ensure that we provide information back to primary care in a way that maximises the return on this investment and also ensures that this work is integrated with other activities occurring in each DHB. I am therefore investigating what information General Practitioners need and what is the best way of delivering it.



The epidemic of diabetes we are witnessing can only be halted by a broad range of effective initiatives. The Trust has established itself as leader in the development and implementation of health promotion projects. The adolescent projects are recent examples of this. Finding sufficient funding to meet the need is always a major issue for the Trust. We will continue to advocate for funding and develop innovate approaches to preventing diabetes.

Although the Trust has been less active in research in recent years it is in a good position to re-establish itself. The DCSS database is an invaluable resource for investigating a range of important issues and has already been the basis of three presentations to a recent New Zealand diabetes conference. Our close relationship with our community, primary care and other researchers also puts us

in a strong position for the development of new action oriented research projects.

In summary, I think the Trust is an exciting organisation to work for and I look forward to a productive new year.

Dr Tom Robinson

Community Issues Advisor



The past year has gone by quickly, and we've learned a lot more and reached a lot more people, especially through the last Health and Diabetes event in Otara. Judy and Miria did good work on this. I feel the message is getting to a lot more of our people out there.

The support groups are wonderful. The fantastic people we have coming in to talk bring the knowledge back to our people, and the people build up their confidence to speak for themselves and ask questions.
I often get calls at night asking more

questions. We've had feedback from other organisations asking about how we develop the relationships, for example with Work & Income and even Inland Revenue.

It was great to go to the university (Maori Health Promotion Gateway Hui) with Miria Cleaver to seek knowledge. We both found it an eye opener and a great opportunity to go amongst all the providers. It was a valuable two days and we got to meet a lot of people and share our knowledge, we found some people were quite excited by what we do including some from the South Island.

Working with our team in the DPT has been great, we all get out there and do things for our people and it is a pleasure working with them and on behalf of the Trust. Most importantly... e tangata, e tangata, e tangata its people, its people, its people.

Bill Wiki

Diabetes Projects Trust Board Members

Executive Director SAHF

Diabetologist, Biochemist

Diabetes Nurse

Director, Patient representative

Public Health Physician, MOH

Chairperson Vice-Chair person Trustees

Pamela Tregonning

Regina Berghan

Faye Clark Judy Hattie

Olivia James Ingrid Minett **David Scott**

Henry van der Heijden John Baker

Madhumati Chaterji

General Practitioner District Nurse Tin Htay Research

Otara Health Incorporated Health Promotion - Management

Endocrinologist (retired) & Diabetes Researcher

DCSS Executive Group

Clinical leadership for the DCSS Audit Process as below:

Dr John Baker Diabetologist - Counties Manukau Dr Rick Cutfield Diabetologist - Clinical Head Waitemata Dr Ashwin Patel General practitioner. Representative RNZCGP

Dr John Wellingham Medical Director Integrated Care CMDHB, Project Manager for

Chronic Care Programme Development Counties Manukau.

Dr David Scott Endocrinologist (retired) & Diabetes Researcher

Judy Rowden Audit Nurse - Manukau Eileen Howard Audit Nurse - Waitemata



Advisors

Bill Wiki Professor David Simmons

Diabetes Projects Trust - Team

Darilyn Bennett – Audit Nurse
Miria Cleaver – Lifestyle Nurse/Audit
Helen Gibbs – Dietetic Advisor
Patricia Harry – Data Manager/Exercise Instructor
Eileen Howard – Audit Nurse
Jennifer Leatham – Administration
Janette Medforth – FIELD study co-ordinator
Sara Morton – Audit Nurse
Rebecca Parkinson – Contract Exercise Instructor
Karen Pickering – Manager
Tom Robinson – Medical Director
Judy Rowden – Audit Nurse /Lifestyle Adolescent Project Coordinator
Kate Smallman – Nurse Co-ordinator – Lifestyle
Malaki Vitale - Project Worker
Isileli Vunileva– Project Worker



From Left – Tom Robinson, Jennie Leatham, Kate Smallman, Helen Gibbs, Malaki Vitale, Cadie Rotherham, Miria Cleaver, Isileli Vunileva, Karen Pickering, Judy Rowden, Patricia Harry, Eileen Howard, Anna Manson, Henry van der Heijden, David Scott, Patricia van der Heijden

Diabetes Projects Trust - Main Activities

1) Lifestyle Programme

The MOH funded DPT Lifestyle Programme is made up of 5 main parts - Health Promotion, Train the Trainers, Exercise, Support Groups and community activities.

Health Promotion Programmes - Primary prevention

Free, individually designed teaching sessions delivered to the community to a wide variety of venues, including church, Marae, schools, meetings, hospitals, residences, workplaces, GP practices and others. These have been very popular and contracted numbers were exceeded during the year period.

Train the Trainers - Primary prevention

It has been identified in a number of forums that there has been a proliferation of health professionals and non health professionals providing health promotion in the community in response to changes in the primary care environment. DPT has designed and is to run 7 hour tailored programmes to help those delivering health promotion messages to ensure they are doing it in a safe and effective manner. A pilot programme is currently underway and to be evaluated prior to being delivered in the community. There has been substantial interest in participating from some PHO's and other organisations.

Exercise Groups - Primary and Secondary Prevention

The DPT has been providing free exercise sessions to the community since 1996. They remain popular and well attended by both people with diabetes, and those who are at risk. Referrals continue to come from health workers, PHO, and Middlemore diabetes service as well as 'word of mouth' self referrals.

Trish and Rebecca deliver their enthusiastic and fun activity sessions 6 x week between them, to their committed and often long term participants. Safety in these sessions is paramount, particularly in view of the



fact that many participants have multiple health problems. Sessions always have more than one staff member trained in Basic Life Support, a comprehensive first aid kit and cellphone available and use recommended activities.

Ethnicity of those attending is mixed, and there are a wide variety of abilities and skill levels. Classes continue to vary in age, mobility and health status with some attendees chairbound or aided by sticks.

Support Groups - Primary and Secondary Prevention



Trish's Home made teaching tools, every bit as good as the bought ones.

Attending DPT support groups is an enjoyable and informative experience, whether as speaker, guest or participant. A warm welcome is extended, the topics while having a health or diabetes focus are by popular choice. Healthy food is shared while support is offered and accepted between people with diabetes, their families and health professionals.

Feedback has been excellent, with high levels of satisfaction expressed. The majority also either expressed that their behaviours had changed or they wanted to change (see table below). Tangible support for this comes from the alteration made over time to the style of food being brought by members to share with a new predominance of healthy options including salads, sandwiches and fruit dishes.

Support Group	I've changed	I want to change	I don't need to change
Eat less fat	18	14	1
Eat 5 portions of vegetables and fruit a day	12	19	3
Eat smaller meals 3 x day	16	14	3
30 minutes exercise each day	16	13	3
Test Blood Sugar levels regularly	19	6	5
Regular checks with health care professional	19	8	3
Look at your feet each day	20	8	5

Facilitation and Support of Community Activities & events

Diabetes Awareness week in 2003 saw multiple organisations working together in a variety of events and venues. The DPT team were also involved in other activities including a smoke free event, a health promotion day in Mangere Town Centre, Childhood obesity symposium, International day of the Older Person, and Push Play day.



The 4th Health & Diabetes Awareness week was run in the Otara Town Centre in March 2004 with spectacular weather fitting for a spectacular event, with Bill Wiki, DPT (Judy Rowden, Miria Cleaver), and Otara Health Inc (Nita Ropata-Riki) being primarily responsible for helping the community to co-ordinate this important local event. As in previous years, it was very well attended, and terrific feedback was received from participants and community members.

Over 30 different health and community providers came together to share their

expertise with an overall air of fun and celebration while being exposed to a wholistic approach to health promotion. Diabetes screening was offered over the full 3 days with 127 people having their risk assessed and personal advice being given on lifestyle improvement in that time.



DPT continues to take an active role in co-ordinating and supporting the CODA (Community Organisations for Diabetes Action) group.



2) School Programme - Living 4 Life

This initiative is a separate activity, complementary to the DPT Adolescent project, being supported by the lifestyle team. It started when the NEW (Nutrition, Exercise & Weight) working party met and expressed serious concerns about the health of students in AIM HI schools in the Counties Manukau Area. With the strong support of principals and school nurses it was resolved to take some positive action. The DPT designed and has been running a programme, 'Living 4 Life' in Southern Cross high school starting in 2004. The programme has been targeted at all year 9 (3rd form) students, and involves monthly teaching sessions, 3 x week voluntary facilitated activity (sponsored by Leisure Services Manukau City Council), and support of the school for other initiatives aimed at improving health. The teaching sessions are interactive and have had some excellent evaluation done in the form of 'digital storytelling' by students who obviously retained the information they had been given. Activity sessions have proved popular, with up to 75 attending at a time.

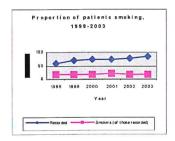
This programme is in its infancy, and will be evaluated as more sessions are delivered. Funding is being sought for a further 4 schools who have expressed interest in participating.

3) DCSS Audit

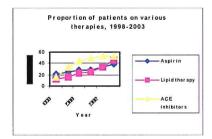
The DCSS Audit team have had a busy year. New staff Sara Morton and Darilyn Bennett commenced at the beginning of 2004 to replace Melanie Jones (now a Diabetes nurse with Auckland DHB) and Anna Manson (pursuing nutrition studies).

Information from the DCSS Audit Database is being better utilised with Gillian Kerr designing a poster on rates of type 2 diabetes in the younger age group and taking it to the ADEA/ADS/NZSSD conference in September 2003. Another poster was successfully put together by Dr Rick Cutfield using Waitemata information and this won a prize for the presentation.

The graphs below are a sample comparing items year by year compiled by Dr Tom Robinson as a paper for presentation at the upcoming NZSSD conference in May 2004.







4) Self Funded Research Studies - see staff report - Page11

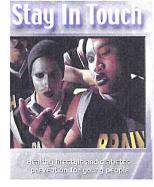
5) Adolescent Project

Since 2001 when the DPT identified as a key target area the prevention of type 2 diabetes in young people, the topic has become widely discussed and much more on the public agenda.

The DPT Adolescent project under the guidance of Judy Rowden has worked with a wide range of people and organisations to develop materials suitable for this age group and has considerable expertise in this area.

Leaflets – currently in English, Tongan, Samoan and Niuean. For translation into Hindi, Mandarin, Korean, Vietnamese and Arabic.

Adolescent Comic 'Tamas big day ' – multiple reprints of this resource have occurred since its original release in 2002.



Video – "Stay in Touch". This video (funded by DPT and Sky City Community Trust) approaches health promotion in youth in a fun and technologically current way. Sam is a 13 year old whose body gets tired of his lifestyle and animated body parts communicate to him using text messaging. This video (also DVD & CD) has received excellent feedback when shown and is being distributed and promoted widely.

School Diary health promotion message – 70,000 high school diaries had a health promotion message prominently displayed in colour on the cover for the 2004 version. These diaries are used for homework and weekly planning and in many cases have to be reviewed by parents as well as students. Plans are to take up this excellent opportunity to get a health promotion message across in 100,000 diaries in 2005.

6) Other Activities

Research Information Database – Students, health professionals, interested community members and others access this resource. Jennie obtains copies of whatever is requested and dispatches it without charge.

<u>DPT Staff Conference Presentation</u>s – ADEA/ADS/NZSSD conference in Melbourne in September 2003. ANA 2003.

Ongoing Staff development – has included Privacy Commission, Basic Life Support, nurse specialist updates, computer skills. Courses have included Pacific Island Nutrition Certificate, Counties Manukau Practice Nurse course for Diabetes, Diabetes Auckland modules.

<u>Participation</u> – including Counties Manukau Diabetes Advisory Group, NEW (Nutrition, Exercise & Weight) working group.

Support of Students from dietetics, nursing (as well as nurses from overseas seeking experience).

Managers Conclusion

It has been another terrific year. Our team goes from strength to strength, with recognised excellence in all of the wide range of areas we work in.

It was a significant event in the history of the DPT when Dr David Scott stood down after over 4 years as Acting Medical Director. He was presented with a sculpture to express the appreciation of the DPT team for his support over that time. We are very fortunate that he continues as a Trust Board Member.

Dr Tom Robinson was welcomed as the new Medical Director and has become part of the team with some exciting ideas for future development.

A change in Board function with the creation of an 'executive' who meet on a monthly basis has been trialled and has been found to be a great help in the day to day decision making, and should also help streamline the main Board Meetings. Thanks to all of the DPT Board for being so supportive of the activities of the team and participating in making it the success it is.



The release of the DPT video 'Stay in Touch' (funded by DPT and Sky City Community Trust) was a high point, and it received a great launch with the DPT staff wearing their 'premier' clothes, and an OSKA for Kate Smallman who did much of the work putting it together with the support of the team.

As usual we have been well represented at many public forums, with articles in newspapers, quotes in magazines, presentations and posters

at conferences, and acknowledgement of input in a variety of projects run by other organisations.



Our new van is terrific, and while it was sad to retire the old van, having the new more reliable version does make a difference. Thanks to East Tamaki Charitable Trust who provided \$3000 towards the cost of it.

Special thanks to Bill Wiki for his ongoing leadership in support groups and gold plated advice. His passion for helping people with diabetes is amazing and his guidance, particularly in areas of culture and protocol, has helped us be more effective than we would have been without him.

Finally, how about the people who make up the face of the DPT, the staff who do the job, are out there helping achieve the mission statement in a real and practical way. As Manager I feel privileged and proud to be part of the team. I salute you all for your tireless enthusiasm and 110% effort, again, you've done an exceptional job.

Karen Pickering

From the DPT Team

Miria Cleaver - Audit Nurse/Lifestyle Nurse - I began working for the DPT in February 2003. I work with both



the lifestyle and audit teams. This combination works well as the audit allows an insight into the areas of education that need addressing. Social factors which are not always economic or through ignorance can and sometimes do impede patients conditions. The lifestyle is fantastic as it allows us to inform through our support groups, or when giving a presentation to a group or when we are out screening. Often the message can be subtle but nevertheless effective.

Since working for the DPT I have found a supportive and encouraging environment to flourish. This is a rare quality today.

<u>Helen Gibbs – Dietetics Advisor</u> - I visited Diabetes Trust late in October to talk about an idea – a Train the Trainer's concept in obesity related illness prevention. By happy coincidence (or was it fate?), this was an issue that the lifestyle team of DPT had been reviewing. My first talk with Karen and Kate has to be the easiest job interview I have ever had!

Since starting work in November I have been kept busily and happily entertained—the perfect antidote to "new city syndrome" after returning from 5 years in the UK working as an obesity specialist dietitian and an educator for GPs and practice nurses around the area of obesity management.

The wonderful team at DPT has found other uses for my varied skills – giving me the opportunity to have input

into several key areas such as the adolescent project, the support groups and public education. Meanwhile Kate and I undertook a process of consultation with key stakeholders to assess the need for Train the Trainers in Diabetes Prevention. The Ministry of Health accepted our proposal for this program in late February, and since then we have been developing a program and evaluating it with the help of the DPT staff. We have several groups of health workers keen to take part in the initial education program which will involve seven hours of education and at least 5 hours of support post-education to help the trainees' develop their skills of health promotion within their own work places. There will be accessible support in terms of phone and email contact with the trainers and a regular newsletter with updates for the trainees on evidence based practice in the areas of diet and lifestyle.



For me coming from a strong and supportive team in the UK, it has been nothing short of a miracle to find a special and dynamic team I can be part of on my return home.



<u>Eileen Howard – Audit Nurse Waitemata</u> - I have now been auditing in the West for two years. Doing the audits for the second time, it is pleasing to see that practices are using our feedback reports to improve their diabetes care, especially in patient education. Many doctors also tell me that they find our reports very useful. I have been attending diabetes tutorials for practice nurses, run by Healthwest, which not only improves my knowledge, but enables me to network with many practice nurses. I have attended two conferences in the past year, both of which have been great

learning experiences. I thoroughly enjoy being part of such a dedicated team of professionals.

Patricia Harry, Isileli Vunileva, Malaki Vitale - Data Entry and Lifestyle - we would like to report that the DCSS



Audit is going well. The database continues to grow every year. Reports are looking great as they are upgraded and our Audit Nurses are working really hard gathering information from participating Doctors.

Exercise groups also continue to go very well. Referrals are coming in quite nicely from local Doctors, hospitals, diabetes clinic and word of mouth. They are great classes and people enjoy them.

The support groups are well attended and every month different organisations are invited to share what they provide in the community.

This has been a great year with different things always happening, which always make each day a great day.





Jennie Leatham - Administration Officer - My work in administration for the Trust is going along nicely. Using



the MYOB system has been a great help. I am able to keep up to date with our accounts and also have time to provide support to other team members as required. I am fortunate that my job (and members of staff) give me such a variety of work each day.

It has been very exciting to see the finished product of our "Stay in Touch" video, and, of course, to attend the premier which was a glitzy event.

On a personal note, it is great to work alongside a team who all pull in the same direction, who are all so focused in getting our message out there, and who all seem to have been very carefully handpicked to form a wonderful bunch!

<u>Janette Medforth – Research Co-ordinator</u> - The FIELD study is an international multi-centre study assessing the effect of a medication on coronary mortality. The patient is followed up 6 monthly for the next 5 years with questionnaire, physical examination and bloods.

The FIELD Study commenced 1997 and the last patient will be seen mid May 2005. Middlemore has 112 participants currently involved in the study and we are now coordinating the final close out visits for all participants to start early next year. The sponsor has requested additional data and therefore work load has increased due to more questionaires. The site was monitored last month by CTC and a verbal approval given regarding the quality of documentation which was satisfactory. A full written report will be available in June.







<u>Judy Rowden</u> – Lifestyle Adolescent Co-ordinator/Audit Nurse - During the past year we've had some challenging times with attempting to keep up to date with the audit as we have had significant staff changes. Some of our audit nurses have moved on to more specialised areas with others moving into full time study programmes. Our new nurses Sara Morton and Darilyn Bennett are proving to be a real asset, but with on the job training and more and more people being diagnosed with diabetes, the job of auditing takes longer in each practice. Our audit nurses are also finding they are often asked to field questions on diabetes care, get checked and the specific computer programme they are working on. In

this light we're not just "auditing" but helping by passing on valuable information we have learned.

I am also co-ordinating the Adolescent project and involved with "Living 4 Life" which is a programme begun this year with a South Auckland High School working with Year 9 students. Monthly interactive teaching sessions take place as we seek to help the students understand the





concept of healthy eating and becoming active and how this relates towards helping prevent type 2 diabetes.

<u>Kate Smallman – Lifestyle Co-ordinator DNE</u> - What an exciting year! Miria, Judy and Trish have gone from strength to strength. More education at more places with more people. Helen Gibbs as a dietetic advisor joined us in November. It has been a pleasure having support in the nutrition area. The exercise classes are all doing well, with good attendance in all 6 sessions. The support groups have had a wide range of speakers attending and a great deal of interest. The groups were very keen to participate in a health check at the beginning of the year. There has been good support from Isi and Malaki with their driving and translation.

A new area that we have been working on is a "Train The Trainers" course. Helen and myself have worked to produce a workbook and teaching notes on how to try and prevent diabetes and obesity. The course has been tried out, with great support from the staff and is now ready to be used in health settings.

This year saw the finishing of the video "Stay in Touch". This is a health promotion video for young people. It's about prevention of diabetes and obesity. There has been very good feed back from people on this resource.

In 2003 I was invited to present our new resources for type 2 diabetes and young people at the ANA conference in Auckland, Whangarei and Wellington, and in September I presented a poster on "screening for diabetes" at the ADEA (Diabetes) conference in Melbourne. It has been a very busy and successful year. Thankyou to all who have contributed.



Acknowledgements



Special Thanks to: Counties Manukau Diabetes Service (the roof over our heads), Roche Diagnostics (meters, test strips), Sky City Community Trust (funding for video – 'stay in touch'), Ministry of Health Public Health Directorate - Auckland (additional funding for leaflets & translations), Telecom (reduced phone rates), South Auckland Community Health Trust Inc (funding for staff education), East Tamaki Charitable Trust

(support with funding for new van), Ford Motors in Manukau (discount for new van), Manukau City Council (activity sessions in schools)

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