



**THE HAWKE'S BAY MEDICAL RESEARCH  
FOUNDATION INC.**

**53rd Annual Report 1<sup>st</sup> April 2013 – 31<sup>st</sup> March 2014**

**HBMRF**

**MEDICAL RESEARCH WITH A HAWKES BAY EMPHASIS**

HAWKES BAY MEDICAL RESEARCH FOUNDATION



Welcome to the Annual Report for 2014.

The financial year saw the retirement of Bill Dalton (following his election as mayor of Napier) with Kirsten Wise being appointed by the Napier City Council in his place. Benita Cairns also retired and has not yet been replaced. Since balance date Kevin Atkinson has retired and Diana Kirton and Helen Francis have been appointed by the DHB. I wish to thank Bill and Benita for their service. Kevin Atkinson deserves special mention as a long serving member of the Council. The Foundation has benefitted enormously from Kevin's involvement over the years and his contribution is greatly appreciated.

The financial year saw a continuation of the relatively good financial performance of the investment portfolio and we received the balance of the bequest from the estate of Mr Lock. We also managed to keep our expenses in line with the previous year. All of this resulted in an operating surplus of over \$116,000. This has enabled us to improve our net financial position by almost \$100,000 from the position at the end of 2013. I think there are still challenges ahead financially. Bequest income is infrequent and cannot be relied upon which leaves only donations and subscriptions from our members and the income generated from our investment portfolio as the only stable sources of income. I am grateful to our members and others who make donations to help our work. I fear that we are entering a period of reduced investment returns in which case our income will also be reduced. I repeat my view from previous years that our financial capacity is a major challenge for the on-going funding of medical research.

On the bright side, during the financial year the Foundation approved grants of \$23,000. With the research we fund (as reported in this Annual Report) the Foundation is continuing a proud tradition of making a difference in our community. We are indebted to the members of our scientific committee led by Cath Kingston for their expert and professional work in assessing the applications for funding.

This is my final year as President and I am delighted to advise that Kirsten Westwood has agreed to take over from me. I would like to thank all those involved with the Foundation over the years that I have been President. As always, I am grateful for the assistance and forbearance of all the members of Council and, in particular, Mrs. Judy Baxter (secretary) and Mr Michael Jackson (treasurer) for the assistance they provide.

I am pleased to report that I leave the affairs of the Foundation in good order. I wish the Foundation all the very best for the future.

Andrew Wares - President

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HAWKES BAY MEDICAL RESEARCH FOUNDATION

**Welcome to the Annual Report for 2014**

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**COUNCIL AND OFFICE BEARERS 2014**

**President:** Mr Andrew Wares

**Council:**

Cr Kirsten Wise	Nominee, Mayor of Napier City Council
Mrs Judith Baxter	Nominee, Mayor of Hastings District Council
Mrs Di Petersen	Nominee, Mayor of CHB District Council
Dr D M Barry	Appointed by Members of the Foundation
Ms Cath Kingston	Appointed by Members of the Foundation
Mr Kevin Atkinson	Hawke's Bay District Health Board
Dr P Hendy	NZ Medical Assn – HB Branch
Dr Rob Leikis	Staff, Hawke's Bay Hospital
Prof Bob Marshall	Appointed by Council
Mrs Brenda Fine	Appointed by Council
Mr Andrew Wares	Appointed by Council

**Solicitors:** Carlile Dowling – Napier

**Medical Director:** Dr D M Barry

**Secretary:** Mrs Judith Baxter

**Treasurer:** Mr Michael Jackson

**MEMBERS OF COMMITTEES**

**Scientific and Health Services Committee**

Dr D M Barry  
 Dr Paul Hendy  
 Dr M Arnold  
 Cath Kingston (Chair)  
 Prof B Marshall  
 Dr Rob Leikis  
 Judith Baxter (Secretary)

**Finance and Investment Committee**

Mr Andrew Wares  
 Mr Michael Jackson  
 Cr Kirsten Wise  
 Mr Kevin Atkinson  
 Mrs J Baxter (Secretary)



## DONATIONS AND BEQUESTS

For the Year Ended 31st March 2014

D R Atkinson  
C M August  
P C H Baker  
M E & N G Bayliss  
G Broadhurst  
J D & A P Dine  
M Dine  
P Dunkerley  
R G H Harris  
F A B Hosking  
M S C Jolly  
A Lopdell  
B J & M A McLeod  
A E McIntosh

J McConnochie  
I McQuilliam  
P M O'Brien  
D G Millar  
D & C Patterson  
D Petersen  
R Povey  
B Ritchie  
V Roberts  
B Stark  
C K Tatum  
D Taylor  
W Thompson  
J Young

## HONORARY MEMBERSHIP

Dr I McPherson  
Mr A Train  
Mr H Verry  
Mr M Collett



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HAWKES BAY MEDICAL RESEARCH FOUNDATION

**LIFE MEMBERS**

Mrs M Amyes  
 Dr P Bannister  
 Dr D M & J Barry  
 Dr G Beacham  
 Dr J T L Beaumont  
 Mr G W Bennett  
 Mr S Bentall  
 Mr & Mrs J A Brownlie  
 The Doctors, Hastings  
 Dr R H Chisholm  
 Dr D Davidson  
 Dr D Doig  
 Dr G Duncan  
 Dr C H Dykes  
 Dr J D Eames  
 Dr R M English  
 E I T Hawke's Bay  
 Dr S Foote  
 Mrs W Forster  
 Dr B L Gare

Hastings District Council  
 H.B. Regional Council  
 Dr M J Houliston  
 Dr R Henderson  
 Dr R Janes  
 Dr S Jessop  
 Dr J Kerr  
 Mr L J Knight  
 Dr D A Lawson  
 Dr A J Luft  
 Dr D F C Mason  
 Dr T J Mason  
 Dr R J Meech  
 Dr H Meyer  
 Mrs A S Munroe  
 Napier Lions Club  
 Dr R G Neal  
 Dr N W Nicholson  
 N.Z. Dental Assn  
 N.Z. Nurses Assn

Dr P O'Brien  
 Dr C Proehl  
 Dr J A Rose  
 Dr M J Short  
 Dr L Smales  
 St. Paul's Presb Thrift Shop  
 Dr I Taylor  
 The Doctors, Hastings  
 Mrs M Travis  
 Mr R H Thompson  
 Mr R H Thomson  
 Dr P Twigg  
 The Hastings Health Centre  
 Dr B J Van den Heaver  
 Dr J S Wakeman  
 Dr R Wills  
 Dr M G Wiggins  
 Mrs M Wilson

**MEMBERS**

Dr D R Atkinson  
 Mr C M August  
 Dr P Baker  
 Dr J Bannister  
 Mr & Mrs N G Bayliss  
 Dr R & J Benjamin  
 Mr G Broadhurst  
 Mrs M Brougham  
 Dr O W L Dine  
 Mrs M Dine  
 Mr A H Duncan  
 Mr P Dunkerley  
 Dr C Fan  
 Mrs B Fine

Mrs E D Glenny  
 Mrs S Hansen  
 Dr R G H Harris  
 Dr P Hendy  
 Mrs F Hosking  
 Dr M S C Jolly  
 Mr & Mrs B Lopdell  
 Mrs J McConnochie  
 Mrs A E McIntosh  
 Mr & Mrs B J McLeod  
 Mr & Mrs D Millar  
 Dr W McQuillan  
 Mr A G H Parker

Mr & Mrs D Patterson  
 Mrs D Petersen  
 Mrs R Povey  
 Dr J Pratt  
 Dr B Ritchie  
 Dr V Roberts  
 Mrs A Sheppard  
 Dr B Stark  
 Mrs D Taylor  
 Mrs C K Tatum  
 Taradale Medical Centre  
 Dr W Thompson  
 Dr C K Titchener  
 Mrs J Young

## THE FOUNDATION

In November 1960 a small number of people in Hawke's Bay met and discussed the importance of medical research in New Zealand and the feasibility of carrying out worthwhile research in Hawke's Bay.

In particular it was noted that the doctors in Hawke's Bay who had undertaken specialist training overseas found, on coming home, a partial vacuum because of the lack of research facilities available locally. It was agreed that there was a need for facilities to be made available.

The first meeting to establish the Hawke's Bay Medical Research Foundation was held on 16<sup>th</sup> March 1961 and the Foundation was registered shortly thereafter under the Incorporated Societies Act 1908. The objects of the Foundation are to promote, initiate and support research in all health related fields including medical and health education, knowledge and understanding.

A Governing body was set up comprising representatives of the Hospital Board, the medical profession, local authorities and Members of Parliament.

Anyone could become a life member on payment of 100 pounds or a subscribing member on paying 1 pound annually. These rates converted to \$200 and \$2 by introduction of decimal currency, but from 1 April 1994, became \$150 and \$10, with corporate membership being \$200.

Current rates are as follows: Life Membership \$200. Annual Subscription \$10. Corporate membership equates to: Gold: \$10,000. Silver \$5,000 and Bronze \$2,000. A framed certificate is presented in appreciation of the grant or donation. Donations over \$5, and gifts and bequests are eligible, within limits, for tax exemptions and rebates. The Foundation receives the wholehearted support of the Local Authorities, Service organisations and people of Hawke's Bay, and continues its role in medical research. Over the years the funds not used for research have been built up by donations, bequests, wise investments and recognition as a charitable organisation for taxation purposes.

Funds have been made available for research into many areas and these include asthma, arthritis, cancer, cot deaths, diabetes leukemia, heart disease, mental health and community health.

It is important that the existence of the Foundation should be widely known and that the funds are available to encourage and assist health research and training.

Enquiries as to membership of the Foundation are available by going on-line, click on the Home page (Donate Now) button and information on membership, the paying of subs and donation to the Golden Jubilee Fund is available. The bank account number is included for people wishing to make a direct bank deposit.

Bequests have been significant in the building up of funds and it can be of advantage to make a gift or legacy for research. A bequest may be made in the following form:

*I give and bequeath to the Hawke's Bay Medical Research Foundation the sum of (or description of property or assets given) for the general purpose of the Foundation (or other specified purpose) for which receipt of the Secretary of the Foundation shall be a good discharge to my trustee.*

Remember donations in lieu of floral tributes are acknowledged by the Foundation and next of kin or executors can be asked to specify that donations in lieu of floral tributes be made to the Foundation on death. This can be done by including a suitable request in the obituary notice.

### Information is available on request to:

The Secretary  
Hawke's Bay Medical Research Foundation  
P O Box 596  
NAPIER

Website: [hbmrf.org.nz](http://hbmrf.org.nz)

Phone and Fax: 06 8799199

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## **TRUST FUNDS ADMINISTERED BY THE FOUNDATION**

### **HAWKE'S BAY ELECTRIC POWER BOARD JUBILEE CHILDREN'S FOUNDATION TRUST**

This Charitable Trust was formed in 1974 for the purpose of financing and encouraging research into illnesses and handicaps of children, whether caused by disease or accident and financing the care and treatment of children.

In August 1999 the Hawke's Bay Medical Research Foundation was appointed Sole Trustee of the Hawke's Bay Electric Power Board Jubilee Children's Foundation Trust.

A donation of \$20,000 was made from this Trust to The Hastings Health Centre several years ago, to enable the Family Violence Intervention Programme to continue. More recently a figure of \$9560 was awarded to Cameron Grant for his research 'Preinatal vitamin D status, childhood, respiratory infections and food allergy. (University of Auckland).

### **GEORGE FORSTER MEMORIAL TRUST**

This Charitable Trust was established in 1993 in memory of the late George Forster. The purpose is to further the education of medical and allied staff in Hawke's Bay.

The main aim of the Trust is to sponsor lectures conducted by experts or specialists organized by the Trustees to be held in Hawke's Bay or elsewhere in New Zealand. The lecture or seminar held is known and promoted as the George Forster Memorial Lecture.

A further aim is to support educational programmes and attendance at such programmes by the medical and allied staff (full or part time).

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## RESEARCH FUNDED BY THE FOUNDATION

Clinical and social determinants of outcome for the treatment of severe Substance Use Disorders: who do we help, how can we do better?

**Dr Giles Newton-Howes**

**HBMRF \$6,396**

**Introduction:** Despite the significant impact substance use disorders (SUD's) have on individuals and society, and the wide range of services provided to support them, there is little research in a New Zealand context as to the relative success of these services nor identification as to who benefits most from it. All DHB's are tasked with the responsibility to provide residential treatment for patients with significant SUD's and these facilities are placed around New Zealand. Remarkably the effectiveness of these centres in the New Zealand context has not been studied. This project aims to amalgamate data from Springhill, a residential rehabilitation setting in New Zealand, with other clinical data collected on over 200 patients to identify outcomes from such an intervention and who is likely to benefit most from this intervention. By combining both clinical data from Springhill with data held within the DHB a rich clinical picture will be developed that will allow for a significantly greater understanding of clinical outcomes in a New Zealand setting, benefiting the future development of such services and identifying areas where further work is required.

**Analysis:**

Research into addictions at Springhill proved challenging in terms of recruitment and completion of elements of the questionnaires. After further statistical advice it has not been possible to comprehensively analyse the dataset to answer all the questions answered. Information related to possible retention remains and this has led to an accepted paper in The psychiatric bulletin. The information has been discussed with Springhill in order to enable them to consider how to include this information into their daily practice. This research has also, in part added to the development of the addictions research portfolio of the principal investigator who has been funded to continue research in the addictions area, examining the place of antabuse in alcohol dependence treatment. The ethics application for this research study has now been closed.

The Home First Study

**Rachael Walker –Nurse Practitioner –Renal**

**Hawke's Bay District Health Board**

**HBMRF \$4,000**

**Introduction:** The number of patients on dialysis in New Zealand (NZ) is increasing at a 10-fold higher rate than the general population. Home dialysis is associated with improved survival, better quality of life and reduced cost compared to facility dialysis, yet the number of patients choosing home dialysis is diminishing. In this study, we will identify and explore the factors which influence patient and Whanau choice between home dialysis versus facility dialysis. Based on these findings, we will formulate alternative models of health service delivery by modifying how pre-dialysis and dialysis services are delivered, and test whether they are effective as levers to improve patient choices. Those models that are effective will be further assessed to ensure that they are likely to increase uptake of home dialysis in NZ cost-effectively. The most appropriate health service models will be implemented to provide better outcomes for New Zealanders on dialysis at reduced cost.

**Aims:** The aims of the Home First Study is to characterise and compare home and facility dialysis patients. To perform a national stock take of home dialysis policies/targets and practice patterns. To identify modality attributes that influence patient choice of home versus facility dialysis. To determine the relative importance of identified influential dialysis modality attributes, and develop alternative models of health care delivery to increase the uptake of home dialysis and determine their cost-effectiveness/utility.

**Progress to Date:** Systematic review of Economic Analysis of Home Vs Facility Dialysis manuscript published in Nephrology Journal. Citation of the cost effectiveness of contemporary home haemodialysis modalities compared to facility haemodialysis. A National survey to all Nephrologists and Pre-dialysis Nurses regarding Pre-dialysis Care and Home Dialysis rates in NZ. Results presented at Home Dialysis Conference, Melbourne March 2014. Results being written up for publication. A second systematic review of Patient and carer experiences of Home Dialysis, currently under review by American Journal of Kidney disease. To date 24 Qualitative Interviews with patients and their Whanau have been completed. A number of which are in HB but also Wellington and Auckland. An estimated further 10 -15 interviews will be required to meet data saturation and then analysis of data and results will be written up.



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A Nurse Led Skin Cancer-Screening Programme – Contributing to Primary Health Care Reform

**Clare Harvey Associate Professor EIT**

**HBMRF \$6,800**

### **Introduction**

A scoping project was developed in 2013 to explore ways to extend an existing research study being undertaken in Australia on skin screening by nurses. The idea was to see how the researchers could align a similar project to the New Zealand context, specifically within the Hawke's Bay region. The hypothesis for the extended study was that skin screening reduces mortality and morbidity in skin cancer. By offering free population based skin screening more people can be reached thus contributing to primary health care in New Zealand.

### **Aims**

The overall objectives of the research is principally to provide a community service to the population of Hawke's Bay through opportunistic early detection by professionals. The research has three major principles, training, development and up-skilling of industry partners. Enhanced access to early detection and skin care education. The collection of data that will contribute to the international and national epidemiological data base for skin cancer surveillance.

### **Summary of progress to date**

A team of interested academics and industry partners convened to explore ways in which research could support an increased awareness on the need for early detection of skin lesions in Hawke's Bay whilst collecting essential data to contribute to the data collection of skin cancer in the region. The study will be undertaken on a five year period in Hawke's bay. The project approaches the work using four aspects considered essential to early detection of skin lesions: Training and development, Target Screening, Data collection and Community involvement.

### **Conclusion:**

This ambitious project relies heavily in the goodwill of many. This willingness of so many professionals to support the project has been very encouraging and we are grateful for the backing received from a dedicated group of people.

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**PROJECTS THAT HAVE RECEIVED FUNDING BUT ARE NOT YET COMPLETE**

Talking to Babies in a Neonatal Intensive Care Unit.  
The impact of verbal soothing

Lucie Zwimpfer

Examining the neuropsychological profiles of children  
who have pre-natal alcohol exposure

Andi Crawford

How do patients with multiple long-term conditions  
self manage their health

Helen Francis

Perinatal vitamin D status – Childhood respiratory infections  
and food allergy

Cameron Grant

An analysis of chance in families – Fostering Security Training  
Programme for caregivers.

Bernice Gabriel

Barriers and enabling factors affecting motivation to teach in  
the Clinical environment of Intensive Care in NZ

Emma Merry