

# NEW ZEALAND -VIET NAM HEALTH TRUST NEWSLETTER

Patron: Dr Brian McMahon

November 2015

PO Box 2872  
Christchurch 8140

## NZVNHT Chairman's Report November 2015

Greetings from the Board of the New Zealand Vietnam Health Trust (NZVNHT). Trust activities continue to go well and we have over the last 12 months maintained our active presence in Binh Dinh province. At the request of our Vietnamese colleagues there is significant opportunity for us to increase further the breadth and scope of our activities. Increasing numbers of the departments of Province Hospital in particular, are keen to have our support and receive education and 'upskilling'. I know if we indicated our availability, more requests from the district hospitals would follow. Our very capable Vietnamese colleagues recognize that while access to equipment is improving, there remains a high level of need for workforce as well as 'system' development.

It was of particular importance in 2015 that we achieved ongoing PACCOM registration. This is essential to allow international NGO's (non government organizations) to operate in Vietnam. We are also in conversation with other NGO's interested in working more closely with us and we are pursuing the possibility of local Vietnamese contributions to funding our work.

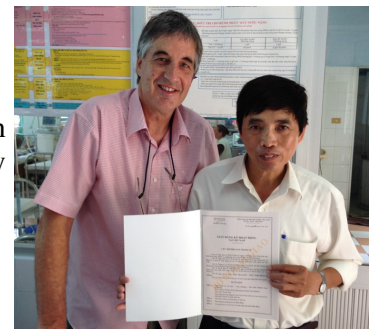
We have had a few false starts to rejuvenation of our website, but with the invaluable assistance of Vietnam – New Zealand Historian and Journalist Claire Hall and husband Craig, we are almost ready to go live. This will then enable us to discuss more comfortably means of financial support with business and other potential funders to sustain our current programmes. We are also very hopeful that website users will enjoy the assembled detail including the photographs and encourage their families, friends and school children to access and use the information.

The website is organized such that if anyone has stories and photos of historical interest and importance, particularly where they identify the past contributions of individuals or the extent of our collective relationships with our Vietnamese friends, they be sent to us. Electronic versions make this easy, but we'd also be very happy to receive hardcopy.

All of our ongoing programmes have sustained their activity and work over the last 12 months. I refer you to each of the activities described in their segment of the newsletter, but want to emphasize particularly, evolution of the neonatal program to include teaching to reduce child mortality in the highlands as well as the growth of expectation and potential re the nurse educator programme. Evolution of the orthopaedic programme to include anaesthetic and potentially pain management components is also an important next step. It is also fantastic that in a Vietnamese context mental health education is so well received.

It is important that again I give you all a sense of 'where the Trust is at'. In our work we continue to be committed to honouring the historical relationships forged by New Zealand volunteers with Vietnam and its people. Those of us engaged now are there because of what has gone before. Having said that, we also have the essential relationships needed to help grow the Binh Dinh health system as an example to the rest of Vietnam. Our Vietnamese colleagues are proud of their achievements and continue to request and be appreciative of support received, but recognize there remains a long way to go.

For these and historical reasons we feel that it is really important that we maintain our support. It is my view that the NZVNHT relationship with Vietnam, and Binh Dinh in particular, is of equivalent significance to the Himalayan Trust relationship with Nepal. From what I've read and heard, contributions from people like Margaret Neave (see photo), a paediatrician who worked in Binh Dinh during the war years, are equivalent to those attributed to such people as Rewi Alley in China and Himalayan Trust volunteers in Nepal. I'm very hopeful that should this be recognized, we can, over time, generate equivalent levels of support for this Trust as the Himalayan Trust and continue to grow the health education support needed.



Johan and Phuoc (Vietnam Administrator NZVNHT) with PACCOM certificate



A young looking Margaret Neave on the medical ward

## Chairman's Report continued

If you have access to people with the time and skills to facilitate access into any part of the political or business world where potential assistance might be gained, we would be grateful to hear from you.

I'm really grateful to our Board, John Dunbar (Vice chairman), David Morris, Judi Smitheram, Helen Hamer and Anne de Bres for their consistent support and engagement for what has been an enjoyable year. Thanks too to Claire Hall for her focus and support -you will enjoy her newsletter and website contributions.

Next year will continue to be a challenge – at this stage we are not confident of being able to sustain our whole programme financially, but will continue to “push”. Please share our newsletter as well as the more detailed reports on our soon to be launched website. I think you'll find these of interest. <http://www.nzvnh.org.nz/>. Please also encourage our old friends with a connection to Vietnam to reacquaint and rejoin our membership.

Thanks a lot for your time in reading this.

Kind Regards

Johan Morreau

Board Chairman 0274 803874



Benh Vien Tam Than  
Regional Psychiatric  
Hospital, Quy Nhon



Quy Nhon, Binh Dinh

## Psychiatric Training at the Benh Vien Tam Than Regional Psychiatric Hospital, Quy Nhon

The psychiatric team is, Professors Helen Hamer, Simon Hatcher and Julie Campbell, community psychologist. The programme for the week was a great success and highly regarded by both the nurses and the doctors, who were together in the classroom for the duration of the teaching. Each day consisted of an interview with a patient and their family. Case presentations included 8 patients covering a range of diagnoses, and I delivered a specific workshop on clozapine prescribing protocols and monitoring of fatal adverse effects.

Prior to my arrival in QN I attended the Vietnamese Nurses Association conference on 22 October in Hanoi, convened to celebrate their 25<sup>th</sup> anniversary. This enabled me to make links with key nurses from Binh Dinh including the head nurse Ms Tu. I will also assist the nurses to develop their competences for practice using the professional development framework from the Vietnamese Nurses Association. I also connected with two mental health nurses from Queensland who teach at a psychiatric hospital in the south of Viet Nam for the Australian Viet Nam Volunteers Resource Group.

The exit interview was attended by Clinical Director Dr Hien, and Deputy Clinical Director, Dr Tuan and the Head Nurse and a small group of senior nurses. Verbal feedback about the week's programme and training needs for the future visits are summarised below:

- Dr Tuan expressed his gratitude for our visit and that his clinical team were moved by our continuing enthusiasm and commitment to the clinical development of the staff at the hospital

Dr Tuan described the programme as practical and useful as it had effectively covered the types of psychiatric problems in such a short time frame

Dr Tuan has requested that we continue to assist the hospital staff with their clinical and theoretical development in mental health. I also plan to have further discussions with Head Nurse, Mr Tai via Skype to plan the programme for the next visit. The psychiatric hospital is also building a new unit on the current site which will be a psychotherapy-based inpatient unit. Dr Tuan would like input from our team to help develop the psychological strategies of the staff in that unit.

In conclusion, I would like to acknowledge Phuoc for his consistent support in the pre-planning of the trip.

In my previous visits, I was able to complete pre-post evaluation of the training programmes with support from the VSA interpreters, but I have not done so for the last 2 visits.

Yours sincerely

Helen P. Hamer RN, PhD, FNZCMHN

## The NZVNHT Nurse Educator project: A model for nurse education and leadership

In 2009 Volunteer Service Abroad (VSA) nurse Anne de Bres was instrumental in supporting the neonatal department at the provincial hospital in Binh Dinh to establish the first neonatal nurse educator. It was as an important first step to increase the knowledge and skills of the ward nurses to provide safe and appropriate care for seriously ill and preterm infants.

Following on from the success of the neonatal nurse educator programme, the NZVNHT received a request in 2014 from Dr Ho Viet My, Medical Director at Binh Dinh Provincial Hospital and senior nursing leaders for assistance to develop a comprehensive nurse educator programme in all 25 clinical departments at the hospital.

The nurse educator project will assist head nurses by:

- Providing ongoing education and training to graduate nurses;
- Applying evidence based practice to enable healthy futures for patients;
- Promoting health and safety knowledge and practice;

Providing clear and accurate communication by nurses to families.

Multiple benefits accrue for everyone involved

- The patient, family, staff and hospital all benefit from training.
- Patient outcomes improve when staff are trained to deliver quality care
- Training stimulates staff to discuss ways to improve performance and implement new ideas into their practice

By investing in training, management demonstrates respect for employee's ability, thereby increasing staff confidence, self-esteem, and morale and job satisfaction. Dr My and Ms Huong (Head nurse Province hospital) have identified five clinical areas to pilot the programme and other departments will be included over the next four years. It is envisioned the project will take five years to complete at which time the nursing office will have an established training programme for nurse educators and every department in province hospital will have an experienced nurse educator(s) who are responsible for providing mentoring and training for new and existing staff.

First phase (*under way*)

July 2014 Anne de Bres held two training workshops on the 'role of the nurse educator' for department head nurses, senior nurses and newly appointed nurse educators. Dr My and Ms Huong head nurse identified 15 nurse educators from five clinical departments to initially pilot the programme: paediatrics, surgical urology, medical ICU, neuro-surgical and neonatal departments.

July 2015 while Anne was on two week assignment with the NZ neonatal team she was also able to provide support and mentoring to the nurse educators and get feedback from them. All five departments had developed their own orientation package for new staff, which included training on layout of the ward and routine activities, documentation and administration, receiving and assessing patients on admission, infection control, health education, nursing procedures for injection and infusion administration, dressing change, urinary catheterization, assessment of vital signs, pressure sore prevention, cardiovascular resuscitation and management of anaphylaxis. In addition nursing care for intubated patients and following spinal surgery.



Visit to the NNU, Madam Ha (People's Committee Chairwoman), Miss Huong head nurse of province hospital, Dr Ngon, Dr Hung, Dr Cuon and Tiffany Babington NZAID.



Kangaroo care - nursing colleagues with Anne



Pressured resources—Neonatal Phototherapy

## The NZVNHT Nurse Educator project: A model for nurse education and leadership continued

Evaluation of first phase has demonstrated that of the 147 nurses working in the five departments, 58 new staff have been supported and trained by nurse educators since start of the project. Positive feedback has been received from head nurses and nurse educators from each of the departments with new staff commenting, “The nurse educator model is really useful because it helps new nurses quickly catch up with the work in the ward, meeting the patients’ need of care and nurses update knowledge effectively”.

Second phase will commence in November 2015 when another five departments will be included.

Third phase – March 2016 a further 5 departments and October 2016 five more.

The medical and nursing leaders at provincial hospital are deeply committed to establishing an effective and sustainable nurse training programme to enable them to improve the quality and delivery of care to patients and families.

Potential health gains to the people of Binh Dinh will be significant if we can progress this. To do so will inevitably require significant additional \$ support from NZVNHT for a team of Nurse Educators led by Anne de Bres to visit Quy Nhon we estimate 4 monthly for the duration of 3 weeks over the next 5 years.

More detail re financial support for the nurse educator project will be available on the Trust website. Clearly it will not be possible to progress as is needed without financial consideration. It is an option for donors to target specific projects

Anne de Bres Nurse Educator

and

Dr Johan Morreau Chairman NZVNHT



Educational poster developed by Anne

**Make a difference to the lives of these women, children and babies:**



Province Hospital Head nurse Huong and Anne



If your group or organisation would like a guest speaker from the Trust to present an informative, inspiring and entertaining message about our work.

Please contact Jo Scott, Membership Secretary. We have volunteers throughout the country who can be available.

Email Jo [office@nzvnht.org.nz](mailto:office@nzvnht.org.nz)



## Paediatric and Neonatal Team Visit to Quy Nhon, 8-22 June 2015

The NZVNHT paediatric – neonatal project was established in 2001 in response to a request from the Binh Dinh Department of Health when they identified the need for support and training to improve the healthcare outcomes for infants and children, to reduce infant and neonatal mortality and long-term disability. A small team of specialist paediatricians (Johan Morreau from Rotorua, Lakes and John Doran from Taranaki) neonatal nurse (Jane Bocoock from Taranaki) and nurse educator Anne de Bres (from Palmerston North) have for many years been visiting annually for two weeks to progress developments. This year Jane Bocoock elected to complete her term and we asked Jim Fowler Neonatal Nurse Specialist from Waikato to join the team to provide the neonatal nursing component needed.

This newsletter report describes the progress of local service delivery and the activities of this New Zealand paediatric team who delivered both a two-week training course to Vietnamese child health professionals from Binh Dinh Province as well as advising senior administration re the necessary next steps, key success factors in evolving this neonatal and other child health services. Dr Hung, Department of Health and senior Hospital administration, justifiably proud of developments so far have also indicated their increasing needs and aspirations and have develop an additional initiative focused on reducing infant mortality in the Highlands. We developed workshops for staff from the An Lao and Van Canh Districts and focused primarily on issues identified as contributing to the high child mortality there.

Neonatal resuscitation to prevent birth asphyxia

Neonatal and childhood sepsis

Routine care of the newborn after birth including care of the umbilicus

Kangaroo Mother Care/Skin to skin care

The 25-30 attendees were very responsive and engaged fully with the training we provided. It was a pleasure to hear the quality of questions asked, discussions held. More formal talks were followed by case review discussion used to bring the subjects together. Neonatal resuscitation and Kangaroo mother care also included a “hands on “ approach.

There was clear consensus that they wanted us to repeat the workshops to the same audience in twelve months time.

We also ran well attended (up to 30 attendees from all over Binh Dinh) workshops, spent significant time at Provincial Hospital neonatal department and also visited the Paediatric Departments at Province and City hospitals. At the Paediatric Department at Province Hospital we reviewed a range of complex patients and were reassured at the significant improvements in support the medical staff are now experiencing with regard to the automated laboratory blood testing and results (including blood cultures) and where reduced sizing of blood required for testing makes the care of infants simpler. This is of particular interest in that some years ago the NZVNHT did previously put a lot of effort into supporting laboratory developments.

Training is delivered both formally and informally using a range of different teaching methods:- in workshops where both theory and practical skills are taught, at the bedside, working alongside staff or sitting round a table with a white board discussing individual cases and clinically related subjects.

These two weeks were primarily based at Provincial Hospital. At the end of each workshop decisions are made re the subject matter for the next years visit.

Of huge satisfaction to us has been the increasing active engagement of the midwives, nursing staff, paediatricians and obstetricians who come to the workshops and a strong sense that they are evolving their practise as a result of what is learnt. The family inclusive and infant centred care approaches basic to the Provincial neonatal unit care is with the increased nursing numbers that we helped advocate for translating into a sustained reduction in neonatal mortality that is likely to translate into reduced morbidity also- re attached table.



Jim Fowler, Anne de Bres, John Doran , Johan Morreau  
with City Hospital colleagues



**Dong van Huyn 2015**—former VSA driver and Vietnam navy driving instructor . Dong remains well and active enjoying grandchildren, continuing to drive professionally and always keeping an eye out for us all. Many of you -former VSA colleagues will remember Dong fondly and it's always a pleasure to see him, be welcomed by him again. Here he is looking well.

## Paediatric and Neonatal Team Visit to Quy Nhon 2015 continued

**Mortality rates re admissions to Province Hospital Newborn ICU – servicing Province hospitals 12,000 deliveries per year (similar number as compared with Auckland, NZ)**

Provincial Hospital Neonatal Mortality Rates		
Year	% Mortality	No of Deaths / Admission
2005	13.42	100 / 745
2006	10.08	82 / 813
2007	9.98	92 / 921
2008	9.78	87 / 889
2009	7.89	83 / 1052
2010	6.63	64 / 965
2011	8.14	102 / 1253
2012	8.35	124 / 1485
2013	6.55	84/1282
2014	6.12	78/1275



Jane Boccock teaching Neonatal care early 2000's

It is important to note the mortality rate prior to 2008 did not include babies that were “sent home to die”. Since 2008 an additional 30% of these deaths have been recorded and are reflected in the above statistics. We have emphasized to Dr Ngon (Head Neonatal Paediatrician) and colleagues that it will become increasingly difficult to reduce mortality, that figures will start to plateau and that a comprehensive approach to maintaining quality and maternity services taking similar leadership steps are likely to be needed for these figures to continue to progress.

When we returned this visit, we were very pleased to observe the Province neonatal department is functioning very well and importantly that developments noted previously (particularly re family centred, infant focussed rather than system focussed care) are being sustained. On this visit it was good to see an increased number of neonatal doctors supporting Dr Ngon though it was also observed that he will be critical to mentoring and growing these and additional young neonatal doctor workforce and that this is likely to take the next 5 years. His presence and support of senior nursing and planned new senior nursing and nursing educator roles will be particularly important.

Contrary to concerns expressed by some colleagues from other Vietnamese hospitals, close family involvement with the newborn baby has not caused an increase in infection rates in the unit. Family inclusion may in fact be one of the factors contributing to the decrease in the mortality rate at Provincial Hospital neonatal unit, as family provide oversight at a time when there is insufficient nursing staff to provide one-on-one nursing and when access to individual monitoring equipment is not always available.

It is also heartening to continue to hear from members of the community that they feel confident in the care and treatment that is provided in the neonatal department. Feedback suggests that this is also now happening for the Province Hospital maternity service. The two departments continue to have their regular quality case focussed meetings to resolve any issues that arise.

Of particular interest to us was that City hospital have built a new hospital and have maternity and neonatal facilities adjacent (re lift photograph attached) which is critical in facilitating cohesive and well functioning obstetric and neonatal departments. This decision follows discussions over several years between NZ paediatricians and City Hospital doctors with regard to optimal planning for the siting of neonatal and obstetric services. We have given similar advice to the Department of Health and Province Hospital re potential developments there. Their size and function as a major referral centre would at this stage now justify the design of a Maternity Neonatal - Paediatric - Paediatric Surgical Hospital Facility with relevant operating theatres attached.

All in all a very satisfying programme and visit, it was great to have Jim with us on this visit – his background and skills were really well received, he is and will be a significant asset to our team. The sessions with our highland colleagues went well. There remains a lot to do and we plan to repeat the visit in 2016.

Johan Morreau  
Paediatrician



John Doran radiology teaching



John Doran and Jim Fowler teaching ward round 2015

## NZVNHT Orthopaedic Programme

The orthopaedic programme in Quy Nhon, Binh Dinh Province has now been active for twenty years. Many surgeons from New Zealand have visited Quy Nhon over this period, mainly to work alongside the local surgeons to provide advice and support. Activities have included courses on fracture management encompassing lectures and practical workshop sessions, teaching and instruction on surgery for children with disability, and more recently, arthroscopic knee surgery and hip and knee replacement surgery.

Advances over the past twenty years have been staggering. The main hospitals in Quy Nhon have been rebuilt or in the case of Quy Hoa Hospital, a completely new hospital has been built. Modern equipment has become available, although still limited, staff training has progressed and surgery has moved from fairly basic procedures to very advanced procedures.

Much of the focus in recent years has been on the Rehabilitation Hospital and the Quy Hoa National Leprosy Dermatology Hospital. The Rehabilitation Hospital provides purely orthopaedic surgery, including performing the majority of paediatric orthopaedic surgery for much of Viet Nam outside the two main cities of Ha Noi and Ho Chi Minh City. Patients come from many provinces surrounding Binh Dinh. Similarly, Quy Hoa Hospital is a regional hub drawing patients from a large part of Viet Nam. The new hospital addition to Quy Hoa now offers wide ranging care in many specialties other than leprosy and has a vibrant orthopaedic department providing orthopaedic care to the general population.

Strong links have been established between the Health Trust staff and the staff of these hospitals. Many of the Vietnamese surgeons have made educational visits to New Zealand as a means for providing a vision for the future in their own hospital and a stimulus for ongoing development. Input from physiotherapists and anaesthetists has been incorporated with the most recent exchanges.

Future plans include continued help with and advancement of perioperative care and anaesthesia, post-operative rehabilitation, surgery for disabled children, arthroscopic and joint replacement surgery and trauma care in the smaller provincial hospitals outside Quy Nhon.

John Dunbar  
Orthopaedic Surgeon  
Dunedin, New Zealand  
23 July 2015



Another ward round



Viewing xrays



Dr Tan



Dr Simon McMahon operating



Meeting at Department of Health, with Dr Hung



Ward round



Patients Waiting

## History Project Update

Over the past two years, Claire Hall & Craig Ashworth have gathered 30 interviews for the NZVHT History Project. Recorded in both Binh Dinh and New Zealand, these interviews offer perspectives on relationships forged over the past half-century. “We’ve created a rich memory bank of stories and reminiscences of the last 50 years, reflecting the Trust’s long-term and recent history. By gathering both New Zealand and Vietnamese perspectives we’ve achieved a well-rounded collection representing the range of people who have all - in some way - contributed to a significant history,” Claire says.

Year one focused on interviews with clinical and medical staff in Binh Dinh, as well as those working behind these scenes: driving, interpreting and coordinating Trust activities. “Year two focused on recording oral histories with past and present Trust members, and fleshing out some of the narratives I noticed emerging through the Vietnam War Oral History Project,” says Claire.

Stories range back to the civilian surgical team years of the 1960s and 70s, through the revival of NZ-Vietnam relationships in the early 1990s and VSA’s two decades in Binh Dinh. “The early years of the Trust’s formation is a point of departure for narratives about recent and current projects, and future aspirations. These come together as evidence of the New Zealand contingent’s notable influence on health and development outcomes in Binh Dinh.”

Claire and Craig are now indexing and transcribing interviews, and working with Dr David Morris on a plan for preserving and presenting archival material, both in written and digital form. “We’re confident there’s another purpose for this collection - convincing the wider community of the value of investing in the Trust’s future,” Claire says.

**Family ties:** Former VSA volunteer Noel Bloxham (left) with wife Ho Than (right) and her parents in Quy Nhon. Accompanied by her son Felix, Claire interviewed the family in June this year as part of the Trust’s history project. Than’s mother Ho Thi Dau recalls taking her then infant daughter to Province Hospital for treatment by New Zealand medics during the American War. Than met Noel while her future husband was in Quy Nhon with VSA working on an agricultural development project.



### Well worth Visiting:

The Ministry of Culture and Heritage (MCH) has a array of resources that you may be interested in viewing. The MCH’s work is as diverse as the sector supported. Researching New Zealand and provide rich online resources like *Te Ara — the Encyclopedia of New Zealand*. MCH produce books, advise government and look after New Zealand's national treasures.

Treasures that you can view include: the Vietnam War Oral History; Home Fires Burning on Youtube, Veterans gather for book launch, the 50 year ANZAC Day anniversary for Medics in Vietnam, plus many many more. <http://www.mch.govt.nz/> use the search option to find listing Vietnam or New Zealand Vietnam Health Trust will start you exploring the resources there.



**Trainee Intern Elective Report – March 2015 –  
Chris Kenny, Otago University**

I was fortunate enough to spend one month in Quy Nhon as part of my medical elective. I was primarily at Binh Dinh Province Hospital and spent a little time at the two smaller hospitals on the south side of the city. I first found out about the NZ connection to Quy Nhon through Dennis Montgomery who put me in touch with David Morris and Phuoc Nguyen. With the help of the Judi Smitheram and the NZVHT, Phuoc kindly organised the paperwork to allow me to spend time there.

I stayed near the beach at a nice family owned place called Hotel Au Co. This is right next to Barbara's backpackers, which was handy. It was a great spot as it only took ten minutes to bicycle to the hospital.

Whilst there I rotated through five departments: Paediatrics, Neonatology, Infectious Diseases, Neurosurgery and Orthopaedics. Primarily I was there as an observer due to language barriers however at times the staff would translate for me so I could ask questions to patients. I was also able to do some physical examinations and whilst on the surgical runs could scrub in and assist. I found out quite a lot about the local demographics, diseases and difficulties that they face as well as how the healthcare system works. We also had some *ad hoc* English teaching sessions which were quite fun.

It was interesting to compare and contrast NZ hospitals with those in Quy Nhon. For example it was very clear in the Neonatal department that whilst there was a difference in the amount of resources available, the ethos and model of care seemed to be similar. The most striking differences I noticed were the numbers of patients per bed and how multiple surgical operations could occur concurrently in the same room.

Conveniently my final week coincided with the Dunedin based Orthopaedics team who were there for two weeks. This was fortunate as it allowed me to discuss what I had noticed already and get their perspective on what they see as different and how we can both learn from each other.

I felt extremely welcomed by the staff at the hospital. I wasn't prepared for the hospitality and support given. I've lost track of the number of coffees, lunches, dinner and tours that were given out of their own kindness. I feel that I had started some great friendships. I found Quy Nhon to be a very enchanting place, a lot more developed than I was expecting yet it seems to not have been too heavily influenced by tourism (yet) and so comes across as a modern authentic small Vietnamese city.

I was able to do some traveling as well visiting Hoi An, Da Lat, Mui Ne and Ho Chi Minh. Vietnam is such a stunning country with warm friendly people, delicious food and so much to explore. I hope to return one day in the not too distant future to reunite with the friends I made and to see how the hospital is getting on.

I would like to thank Dennis, David and Phuoc for taking the time to help me organise the elective and for answering all my many questions prior to leaving NZ. Also additional thanks to Phuoc for helping me get settled, lending me a bicycle and just overall just being there if I needed support.

Outside of the hospital I would like to thank Phuoc Tong and Loan from Barbara's café who were always great to have around and helped me organise a number of non hospital things. Also to My Anh and her family for kind of adopting me, showing me around and introducing me to some of what Quy Nhon has to offer. My experience has been really wonderful and Quy Nhon now feels like a home away from home.

Chris Kenny



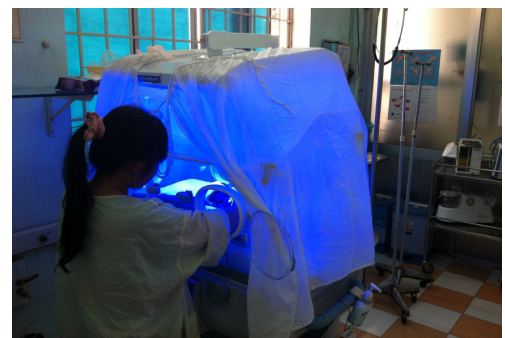
Dr Ngon beside teaching with Dr Phuong



Dr Phuong



General Surgical Team



Neonatal Unit



Paediatrics Morning Handover



My Quy Nhon family

## New-Look Website Set to Launch

Claire Hall and Craig Ashworth are also revamping the Trust's online presence.

The new-look NZVNHT website will soon be launched, providing an updated view of the Trust's work - past, present and future. The new website draws on the pair's work on the history project, presenting information on the Trust's historic relationships, collaboration with VSA, and cornerstone projects of the past two decades. It also contains easy access to membership information, and sets out how individuals, group or corporate donations can be tagged to current projects.

Trust chairman Johan Morreau says the new website was designed to be dynamic and interactive, with a dedicated space for member and volunteer stories to be added, and room for growth. "We hope our new portal can continue to grow, and will become a hub for showcasing our continuing efforts in Quy Nhon. Thanks to the history project, we have a rich multimedia archive of voices and reminiscences.

As well as providing project and member information, we see the new website evolving into a hub for the presentation and ongoing collection of stories." Claire says the new website is also critical to Trust sustainability. "Members, backers and potential funders expect volunteer and charitable organisations to present a professional face to the world. We've designed a site that serves multiple purposes: it informs and entertains, as well as linking the Trust's ongoing work to the very real health and development goals we're striving to achieve." The new website will go live before the end of this year.

## A Sneak Preview of our New Look Website



Home Page



Project Profile Page



News Archive



Donor Information

## Planned activities for 2016

We need you now! Our volunteers and donors have brought these projects to reality, but we need your help to keep them sustainable. Join us in supporting these projects for 2016:

**Neonatal and Paediatric  
Nurse Trainer and Educator**

**Psychiatric and Mental Health Education  
Women's Pre Cancer Screening**

**Orthopaedic, combined with physiotherapy and anaesthesia**

Your potential donation assists staff to participate in these projects, as well as the provision of a broad range of activities which ensures we are able to teach and support.

We ask you to let others know about the work of the Trust and our newsletter is great way to let others know about the fantastic opportunities that the Trust is providing to change the well-being of those in Binh Dinh. If you need further copies please send us an email. [office@nznvht.org.nz](mailto:office@nznvht.org.nz)

**Tuesday 15th December**

**8.00pm**

This will be a Skype meeting utilising centres in Dunedin, Rotorua, Auckland and Christchurch.

If you would like to join from one of these hubs, or from your home address if outside these areas, please make contact with the Trust to register your interest and Skype contact address with the Judi by Friday 11th December to: office@nzvnht.org.nz

If you would like a role in the Trust and/or make a contribution on the Board (specific skills of IT, administration, financial and fundraising welcome), please contact office@nzvnht.org.nz



**THE TRUST BOARD 2014-2015**

**Chairman: Johan Morreau**

**Board Members: David Morris, Anne de Bres, Helen Hamer, John Dunbar, Jo Scott (co-opt) and Judi Smitheram (co-opt)**

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We need your commitment to make it happen**

**Make a  
Donation**



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Subscriptions for membership are payable now.

Annual subscription (July 15 —June 16) \$10.00

Donation to NZVNHT (all *donations* of \$5 and over are eligible for a *tax credit*) \$ \_\_\_\_\_

**Total:** \$ \_\_\_\_\_

Receipt required Yes / No (Delete one)

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**Any questions email Jo at office@nzvnht.org.nz**

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Donations and subscriptions can be made by internet banking to the account of NZ Viet Nam Health Trust

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