

TE WHETU MARAMA

NOVA

THE OFFICIAL STAFF NEWSLETTER FOR THE AUCKLAND DISTRICT HEALTH BOARD

Inside this issue

- Mental Health innovation
- Award winning ADHB staff
- Pacific expedition to make a difference



Comment from the chief executive

Happy New Year

I hope those of you who had a break over the festive season enjoyed time with family and loved ones and feel refreshed and reinvigorated. For our staff members who worked through this period and continued to care for our patients and community I thank you for your dedication and hard work at a time when most people are enjoying a break.

I am refreshed and ready for the year ahead. 2009 was an extremely difficult financial environment. 2010 will continue to be economically challenging for the health sector despite the more optimistic general economic outlook. This will drive creativity and provide us with many chances to keep growing, learning and innovating. All of our past and future successes I attribute to the passion, commitment and professionalism of the ADHB team.

An example of the exciting opportunities ahead of us include our Quality Improvement Programme begun last year. Within the programme are projects like Releasing Time to Care, Acute Patient Flow and Concord. Staff have quickly and competently engaged with these projects which are important to ensure we run an organisation which offers patients the best care possible and also means that ADHB is a constantly improving workplace with opportunities to address some of the inefficiencies and frustrations we all cope with every day.

Also on the agenda is continuing to work on our regional shared services and service planning, reinforcing clinical governance, keeping on track with the Health Targets and delivering our 2009/10 budget and preparing a budget for 2010/11 that meets our breakeven target.

A key focus for me and my Senior Leadership Team (SLT) this year is to be more visible and more responsive to staff. I want to make sure the lines of communication are open between us. It is vital that we have input from the ADHB team as we strive to develop and enhance the services we offer to our patients and community. We also need to understand any frustrating impediments and safety issues in your workplace.

As you will be well aware the flu season is fast approaching. This year indications are that influenza will be mainly the H1N1 pandemic strain. As in past years we will be offering all staff a free influenza vaccination, this year's vaccine will contain the H1N1 strain as well as two others. I strongly encourage you to get this vaccination in order to protect yourselves, your patients and to ensure we keep ADHB running as effectively as possible at our busiest time of year. For more information on the vaccination programme go to **page 3**.

Thanks for all your work in 2009, I look forward to working together in 2010 to achieve even more.



Garry

Garry Smith
Chief Executive

RECOGNISING ADHB STAFF

Taupiri Ashby

Maori Health Worker (Early Childhood Services)

A memorial service was held on 13 November 2009 at Greenlane for Taupiri Ashby who died on 5 November. The memorial was attended by her whanau, representatives of health and community organisations and many ADHB staff who have worked with Taupiri over the years.

Taupiri was a valued staff member having joined the Auckland Area Health Board in 1991 when she was employed as a Maori Community Health Worker with Waterview Community Health Services. When Community Health Services was restructured in 1996, Taupiri joined the Early Childhood Health Team in Community Child Health and Disability Services and continued to utilise her wealth of experience for the benefit of whanau living in the Avondale and Mt Roskill areas. For health professionals she provided advice and support with regard to Tikanga Maori and was a PSA delegate. She was also a Justice of the Peace. She is greatly missed.

Sue Guthrie

Coding and Casemix Manager

Sue Guthrie joined ADHB 15 years ago. Over the past few years, and until she left in October 2009, she was ADHB's Coding and Casemix Manager, responsible for leading the clinical coding team, funding maximisation, as well as coding and data accuracy. Sue sadly passed away shortly after leaving ADHB.

During Sue's time at ADHB she became irreplaceable, not just for her organisational knowledge, or her training and experience in health information management, but for the personal qualities she brought to the job. Sue cared about her work and the people she worked with. She had patience, tenacity and paid great attention to detail. It was always important to Sue that her staff were supported and had the opportunity to be successful.

Sue, you will be sorely missed by your colleagues and friends at ADHB. We will remember you.

Beverly Baston

Clinical Transcriptionist, retired after 22 years service

Bev began her working life with ADHB in March 1988 working at National Women's Hospital as a secretary in the Gynae/Oncology ward. In 2005 she moved to the centralised Clinical Transcription Service.

Bev continued to work with Gynae/Oncology and her in-depth knowledge of the service and her existing relationships with the clinicians have been hugely beneficial to the work done by the clinical transcription women's health team.

Bev's colleagues describe her as someone who is easy going with a great sense of humour and who gets on well with people. We miss her in the department.

Barbara Carter

Nurse specialist, retired after 22 years service

Barbara Carter joined ADHB in 1988. After working in public health she joined the diabetes service in the 1990s where she remained until her retirement.

Barbara's knowledge about diabetes was phenomenal, and her trusting and understanding nature meant that everyone from doctors to clerical staff turned to her for advice. Regarded by many as the lynchpin of the diabetes centre, Barbara kept the unit running smoothly and always helped staff to give their best.

Barbara was a member of the diabetes nurse specialist group and held a number of roles over the years. Her humanity and wealth of knowledge will be sorely missed by all.

continued on page 4

H1N1 to be included in Seasonal Flu Vaccination

Planning is well underway by the ADHB for this year's free flu vaccination for staff. The Ministry of Health has advised that the predominant circulating flu this year is likely to be caused by H1N1 and that it may hit earlier than usual, possibly by late March, peaking in April/May.

To manage this risk the 2010 seasonal flu vaccination will include protection against the H1N1 flu strain as well as two other circulating strains.

"As we do every year, we are strongly encouraging all staff to get the seasonal flu vaccination this year," says Taima Campbell, Executive Director Nursing.

"The vaccination is vital to protecting our patients but it is also important as a way of supporting our colleagues. The more staff vaccinated, the fewer people will get sick, and the less pressure on the team as a whole."

The ADHB intends the vaccination programme will begin mid March. Dates and venues will be confirmed shortly.

Seasonal flu vaccination in brief:

- Only one dose required
- Protects against H1N1, A(H3N2) and B/Brisbane.
- Vaccination will begin in March



Don't forget your Hand Hygiene

Vaccination is a vital tool in controlling the spread of seasonal flu but we shouldn't forget the basic every day hygiene tools.

"Hand hygiene is an essential part of our professional life, particularly during flu season," says Sally Roberts, ADHB microbiologist.

"Remember the five moments of hand hygiene but also remember to cover your mouth when you sneeze or cough, dispose of your tissue in a rubbish bin and stay at home if you are unwell.

"These simple common sense measures can make a real difference," says Sally.

H1N1-only vaccination

Due to the predicted earlier start to the flu season an H1N1-only vaccination will also be available in February. This will be offered to at-risk staff, and any other staff who are concerned about early exposure.

Staff considered "at risk" are those staff with the greatest chance of exposure to the H1N1 virus and those staff with personal risk factors for flu complications. Areas where staff are at greatest risk of flu exposure:

- AED and CED
- DCCM
- CVICU
- PICU
- ARPHS staff with direct patient contact

Staff with the following conditions may be at increased risk of complications from H1N1 flu:

- pregnancy
- diabetes
- respiratory disease including moderately severe asthma
- morbid obesity
- heart disease
- people who are immuno-compromised

This vaccination requires two doses three weeks apart. Staff would still need to have the seasonal vaccination to be

protected against the other two circulating strains of influenza. There is likely to be a small benefit of earlier protection to H1N1, perhaps by a few weeks, depending on when seasonal vaccination occurs.

Staff who want to receive this vaccination should talk about it with their manager or contact Occupational Health and Safety to discuss it further – their helpline number is ext 27800.

For further information about the flu vaccination programme

- Check eNova weekly on Mondays
- Keep an eye on the ADHB's intranet site
- Call Occupational Health and Safety, ext 27800

Nova magazine distribution changes

The current in-house mail-out of Nova will cease next month. We will ask departments within ACH and GCC to collect their Nova magazines from our display boxes at both sites from March. ADHB departments who are not based at either site will still receive their magazines by post.

Staff who would prefer to receive read an electronic copy of the magazine can contact the Editor with your preferred email address. Email: jenny.williams@adhb.govt.nz

Celebrating 2wheel commuting



Adam Bartlett and Pip Anderson utilising their 2wheel transport options.

It's TravelEzy Week again and this year we're celebrating 2wheel commuting – travelling to work on a motorcycle (motorbike, scooter, or moped) or bicycle. Whatever your choice, you are more likely to arrive faster, fitter (cyclists), cheaper and have less impact on the environment than four-wheeled transport.

Riding a retro-scooter to work has been transplant surgeon Adam Bartlett's preferred method of commuting for the last six years. A central city resident, he chose his scooter for lifestyle and environmental reasons.

"It's a lot more convenient in terms of ease of parking, ability to drive across Grafton Bridge and nip out for errands. It's a faster option because I can avoid congestion. My scooter is also cheaper as I don't have to pay for parking and it is a much more fun, environmentally friendly and stylish commuting option," says Adam.

Personal assistant to the clinical partners, Pip Anderson is another 2wheel transport convert and, although she admits to being a fair weather cyclist, has cycled to work on and off for the last four years. While she enjoys all the same travel benefits as Adam, cycling offers the added exercise health-related advantages.

"Cycling to work is a great way to integrate exercise into the work day. But it's important to be well prepared. Having the right equipment - correct clothing and flashing reflective gear - is critical for safety and it is crucial to plan commuting times

and routes. This makes the commute a breeze" she says.

Timed to coincide with Bike Wise month in February, TravelEzy Week offers staff the chance to explore 2wheel commuting options at open days featuring bicycle and scooter displays. Motorcycle and bike professionals will be available to discuss options, maintenance and safety issues, and the Auckland Regional Transport Authority will update everyone on new cycling facilities and cycle lanes. Staff can also be in to win exciting 2wheel prizes.

TravelEzy 2Wheel Open Days

- 11am – 3pm ACH 24 February, Level 5 Reception
- 11am – 3pm GCC 25 February, Building 4, Ground Floor Reception

RECOGNISING ADHB STAFF

Mary (Meleane) Mahakitau

Enrolled nurse (NICU), retired after 32 years of service

Mary Mahakitau trained to be an enrolled nurse when she arrived from the islands. She began working with babies and continued to work in paediatrics through to retirement.

Over the years Mary saw many changes and adapted well. She showed exceptional skill levels and had a very caring approach. Mary worked mostly in the parent infant nursery where the focus is on the transition home. She instilled a sense of confidence in mothers and was well respected by her nursing colleagues and medical team.

Mary was an integral team member and will be missed by all.

Martin Schradt

Staff nurse, retired after 29 years service

Martin Schradt's career with ADHB began in 1981 with the coronary care unit. Since then Martin worked in a number of different units including the Department of Critical Care and Radiology. Most recently, he was a staff nurse on the Admission and Planning Unit.

Martin was extremely passionate about his work and had an amazing wealth of cardiac knowledge. He was extremely patient and was an excellent teacher to the nursing and medical staff on the unit.

A quiet, gentle and very professional man, Martin is loved and respected by all those who worked with him. We wish him well in his retirement.

ODNZ

Janice Langlands, Team Leader and Donor Co-ordinator at Organ Donation New Zealand (ODNZ).

Describe ODNZ

ODNZ is a national service that was established in 1987 when heart transplantation commenced at Greenlane Hospital. Our primary responsibility is to co-ordinate the donation of organs and tissues from deceased donors in New Zealand for transplant units in New Zealand and sometimes Australia and for tissue banks in New Zealand. We also provide education for health professionals and the general public.

The team consists of three donor co-ordinators, the Clinical Director, the Medical Specialist, Communications Advisor and our Team Administrator.

What is a typical day in the life of a donor co-ordinator?

A donor co-ordinator is available 24 hours a day to receive referrals of potential donors. Following a family's agreement to donation, the co-ordinator requests medical information about the donor and liaises with the transplant units and tissue banks. The donor co-ordinator organises all aspects of organ or tissue retrieval.

Following the donation, the co-ordinator provides information and support for the donor family

What makes ODNZ special?

Being able to meet, and have ongoing contact, with the generous families who have donated in the midst of their own personal tragedies makes ODNZ an amazing place to work.

Why do you work here?

There is so much variation in one day – providing support for families, providing education for health professionals and the

public, dealing with media enquiries and building relationships and working with large numbers of health professionals throughout NZ and Australia.

It is still an area with lots of changes and progress so it is always challenging and interesting.

What are the challenges?

Overcoming the misconceptions that surround organ donation.

Why would you recommend working for ODNZ to a colleague?

Working for ODNZ isn't just a job – you have the opportunity to make a difference to a family at one of the worst possible times in their lives. We are also able to assist health professionals with a process which always occurs in extremely sad circumstances.

What would equip a colleague for working for ODNZ?

You need to have empathy with everyone involved in the donation including families, health professionals and your colleagues. And you have to be available 24 hours a day!



Back from left: Janice Langlands (Team Leader and Donor Co-ordinator), Dr Stephen Streat (Clinical Director), Margaret Kent (Team Administrator), Dr James Judson (Medical Specialist), Melanie Selby (Communications Advisor). Front from left: Cecilia Westmacott (Donor Co-ordinator) and Rachel Josephson (Donor Co-ordinator).

From the professional partners

Lessons from Abroad

In 2009 I had the privilege of visiting several overseas health systems. Either they had an international reputation for excellence, such as the Swedish and Scottish systems, or I had chosen them to get comparative views of a particular service, e.g. acute services in primary care at night.

From my various hosts the first response I often got was a highly informed commentary on the New Zealand health system, regarded internationally as being one of the most cost-effective. Also, for developed countries over the last 30 years, the cheapest. While I was proud of our high ranking for health outcomes, I also understood my hosts were working in systems (admittedly more costly) that achieve higher life expectancy and lower prevalence of things troublesome in New Zealand such as obesity, diabetes and injured children. They certainly had things to show me.

Coordination within a health system potentially offers better cost and quality, and I saw some examples of this in well organised primary care services. The Swedish advanced homecare service meshed after-hours acute care from GPs, community nursing including palliative care, and hospital EDs. In (for me) a surprising USA rural primary care setting, I saw highly connected referral pathways. These were anchored to a single electronic health record shared across the system, with a clerical "case coordinator" role in this teaching family practice that resulted in very patient-centred care with comparatively low per capita costs.

A very strong collaboration ethic is evident in the efficient Scottish version of the NHS delivered to 5 million people. Rural issues and urban subgroups with poor health were similar to New Zealand conditions. The size of half a football field, the call centre that coordinated acute primary care regionally did so for the 1.1 million population of greater Glasgow and Clyde. It housed call handlers (nurses, pharmacists etc), GPs and ambulance dispatchers variously employed by different agencies, all in one very large room. Acute services were highly accessible by the public and the "talk to doctor" and "visit doctor" options were offered and frequently accepted. A national collaboration providing affordable e-library services to health workers puts Scotland five years ahead of us. I was impressed by other national collaborations such as new drug approval, and surgery quality.



Chief Medical Officer, David Sage

Translating to New Zealand there were strong messages from my hosts that we should have no tolerance for fragmentation of care and loss of patient-centricity. Diverse funding streams which should not be perceived as barriers, they can be overcome effectively by formal collaboration.

As we begin 2010 thinking how we can do things differently, lessons from abroad can help us. Certainly aiming for coordinated care, collaborative care, and patient-centred care will keep us anchored to reality.



NOVA HEALTHY LIFESTYLE DIRECTORY

February Events

■ Bike Wise Month

1-28 February

■ Waitangi Day Celebrations

Okahu Bay, Orakei

6 February

From 8.30am

A fun, free event for the whole family.

■ Go By Bike Day

17 February

■ 2010 ADHB TravelEzy 2Wheel Open Days

11am – 3pm ACH 24 February, Level 5 Reception

11am – 3pm GCC 25 February, Building 4, Ground Floor Reception

■ Auckland Lantern Festival

Albert Park

26 - 28 February

5pm to 10.30pm daily

This Chinese New Year celebration includes performers from New Zealand and overseas, crafts, fortune-telling, fireworks, martial arts displays and of course the food!



■ Movies in the Parks

Tahaki Reserve, Glover Park, Grey Lynn Park and Owairaka Park

February to March 2010

Free Kiwi film screenings in an outdoor location – grab a rug and a picnic and enjoy.

For more information visit www.aucklandcity.govt.nz or call 09 379 2020.

Bike Wise

Save some petrol and be kind to the environment while enjoying a bit of fresh air and exercise this February. **Bike Wise** is a New Zealand wide event promoting safe biking as a fun, healthy and economical means of transport.

Bike Wise includes three main events:

- 1. The Bike Wise Challenge** runs from 1-28 February 2010 and is open to New Zealand organisations (businesses, schools, churches, scout/guide groups, etc). The challenge is a fun, free, online competition encouraging you to swap your chair for a bike saddle during Bike Wise Month. Organisations compete against similar sized entities to see who can get the highest percentage of members riding their 'bikes'. There are individual and organisational prizes up for grabs.
- 2. Go By Bike Day** on 12 February will see thousands of Kiwis across the country leaving their cars at home and strapping on their helmets when they leave for work or school for the day.
- 3. The Mayoral Challenge** is a national event, challenging Mayors to motivate the greatest number of people to cycle behind them and win the coveted title of most Cycle Mad City. The area with the highest percentage of the population participating is the winner.

For further information, contact: bikewise@nzta.govt.nz

Vietnamese Summer Rolls

Even those of us who don't have green fingers can grow lettuce and herbs successfully. Here is great recipe to make use of this summer produce.

Ingredients

Rice paper/spring roll wrappers (available in the Asian food section of supermarket)

Cooked prawns, shrimps or shredded chicken

100 g vermicelli, place in a bowl and cover with boiling water until soft (10 – 15 minutes), drain

Lettuce

Cucumber sliced into thin matchsticks

Carrots sliced into thin matchsticks

Spring onion sliced into thin matchsticks

Fresh mint or coriander

Method

Soak a wrapper in a wide shallow dish of room temperature water until soft and pliable (about 1 minute)

Lay the wrapper on a damp tea towel and lay a small amount of each of the above ingredients onto one side of the rice paper.

Roll up the rice paper tightly folding in the sides to enclose the filling. Repeat the process with the rest of the wrappers

Simply mix the sauce ingredients together and serve with the rolls

And for a fun but a possibly messy alternative get the family to make assemble the rolls at the table. Being involved in the preparation is a great way to get children to try more food types.

Dipping sauce

Juice of 3 limes or 2 lemons

3 Tbsp fish sauce

1 Tbsp caster sugar

1 fresh chilli, seeded and finely chopped

1 thumb size piece of ginger, grated



Starship team experience the tropics

A team from Starship Children's Hospital have returned from the Solomon Islands after providing medical assistance to the National Referral Hospital in Honiara, the island's capital.

The volunteers used their annual leave to help out in the project run by the Pacific Island project division of the Royal Australasian College of Surgeons. The programme is funded by the Australian government.

The team consisted of Team Leader and Paediatric Surgeon, Dr. Vipul Upadhyay, Paediatric Anaesthetist, Dr. Ian Chapman, Operating Room Charge Nurse, Ms. Ngaire Murray and Anaesthesia Assistant and Recovery Charge Nurse, Ms Shonagh Dunning.

During the one week visit, the team saw approximately 50 patients and operated on 15 children aged from two weeks to 14 years. They mainly performed urological and gastrointestinal operations but the conditions the team consulted on were wide-ranging.

Some patients had travelled two days from other islands and the bush to get to them. Dr Vipul Upadhyay says that the theatres were basic but notes how efficient the staff were considering their limited resources.

"We had suture materials and an anaesthesia monitor sent in as the hospital did not have the fine sutures we would require for use in children. However, equipment like a phototherapy



Left to right: Shonagh Dunning, Ian Chapman, Vipul Upadhyay, Ngaire Murray.

unit were hand made improvised versions," says Vipul.

In addition, the Starship team held interactive training sessions with local hospital staff.

"We were so lucky to be a part of this project and overall the mission was very successful," he says.

The team has been invited back next year and are interested in returning to continue their voluntary work.

ORBIT WELCOME TO THE TRAVEL REMEDY

Nelson

Nelson is blessed with a landscape of golden beaches, native forest, vineyards and is a popular destination offering outdoor activities, with wonderful scenery and plenty of ways to tempt the taste buds. And perfect for a summer break Nelson enjoys New Zealand's highest sunshine hours.

Try something different and experience the ingenious creativity of New Zealanders with a visit to the World of Wearable Art and Collectable Cars Museum.

For the more energetic, hike all or part of the Abel Tasman Coast



Track, or take a guided kayaking tour to experience the National Park from the water.

A must do is the Nelson market which operates on Saturday and Sunday mornings 8am-1pm in the Montgomery Car Park in the city centre. Savour gourmet chutneys, local olive oils and hot smoked salmon. Art and designer wares abound from large wooden platters to scented candles and handcrafted silver.

The arts and crafts, food exploration and leisurely wine tours will leave you wanting to stay for longer.

Monthly Competition

The prize for this month will be one night's accommodation including breakfast for two at any **MCK Hotel** in New Zealand.

MCK Hotels

When it comes to superior destinations, exciting cosmopolitan cities, relaxing getaways, lasting memories with friends or family, sharing romantic retreats or simply enjoying the taste of luxury, Millennium Hotels and Resorts has a hotel to suit ... total luxury at Millennium, superbly appointed corporate and leisure at Copthorne & experience true 'kiwi' hospitality at Kingsgate.

Question:

Name the three strains of flu the 2010 seasonal flu vaccination protects against.

To enter, simply answer this month's question and send your entry to novan@adhb.govt.nz, subject line 'monthly competition', or mail to the Communications department, Level 1, Building 10, Greenlane Clinical Centre. Entries must be received by 28 February 2010. *One entry per person.*

Grand Prize Air New Zealand will provide two economy class tickets to the Pacific Islands – Samoa, Tonga, Fiji or Rarotonga for the Grand Prize for Nova for 2010. There may be peak periods when seats are not available i.e. Christmas. To be in the draw, each month simply collect the letters (supplied at the bottom of this column) and at the end of the year correctly solve the simple anagram. Then send your answer to the address supplied in the November edition.

February Grand Prize letter: A

Conditions of entry: Tickets are not exchangeable for cash; tickets will not attract air points; tickets are not upgradeable; winner must be an employee of ADHB (show employee number) at the time of the prize draw. Valid until 30 June 2011. Travel is not permitted 20 Dec 2010 – 15 January 2011.



Emeritus Associate Professor Bob Boas

Officer of the New Zealand Order of Merit (ONZM)



It is with great pleasure that we acknowledge the award of ONZM to Emeritus Associate Professor Bob Boas for "services to medicine, in particular pain management".

Bob has had a long and distinguished career starting as a house officer in 1962 at Auckland Hospital. His early fascination with the area of medicine later known as

intensive care led to his training in anaesthesia. His subsequent career has been remarkable. As an academic researcher and teacher he pioneered the establishment of New Zealand's first pain clinic. Bob's earliest research resulted in the first description of local anaesthetic pharmacokinetics in humans. Amongst many achievements he developed the method for x-ray controlled sympathetic blockade which became a world-wide standard technique. From 1978 he became Associate Professor of Pharmacology at the University of Auckland.

Bob retired from ADHB in 2001, his infectious enthusiasm for research and teaching leaving a lasting legacy which rubbed off on the next generation of anaesthetists and remains strong today at Auckland City Hospital.

Bob continues to receive international awards and it is fitting that he is now recognised by the Order of Merit.

Associate Professor Vernon Harvey

Officer of the New Zealand Order of Merit



It is with pride and delight that the ADHB acknowledges Professor Vernon Harvey's recent well deserved recognition in the Queen's 2010 New Year Honours list for his services to medicine particularly in oncology research.

A keen advocate for the delivery of medical oncology services in New Zealand, Vernon has contributed significantly to the research and management of breast and testicular cancer and is now continually asked to speak at international meetings. He joined ADHB in 1978 as a tutor specialist for two years before spending time in London undertaking research in etoposide pharmacokinetics which culminated in his doctorate. He returned to ADHB in 1984 as Senior Medical Officer, and continued to share his expertise with us by taking up the role of Clinical Director of Oncology. Vernon is a well respected expert serving on multiple national committees. ADHB is immensely proud that he has chosen to work with us for a significant part of his career.

Vernon is a great ambassador for medical oncology and spends much of his time mentoring and teaching junior staff and undergraduates. He remains forever enthusiastic, cheerful and a role model for all cancer specialists. Congratulations on this great honour.

Healthy Housing Programme Success

The Healthy Housing Programme, Healthy Environment Team, from Auckland Regional Public Health Service (ARPHS) has won the Australasian Housing Institute, New Zealand, Professional Excellence in Housing Awards for Leading Practice. ARPHS is delighted to have recently expanded both the contract and the team.



Left to right: Tania Mulitalo, Dr Simon Baker, Kathleen Badan, Cherry Morgan, Lynne McCarthy.

The Healthy Housing Programme is a collaborative programme with Housing New Zealand and DHBs to improve health outcomes within a housing setting. The programme has delivered real and sustainable improvements to the lives of Housing New Zealand tenants since it began 2001.

Round the Bays 2010

The ADHB will not be entering a team in this year's Round the Bays event. We encourage staff to enter individually or as a team. The website is now open for registration - www.roundthebays.co.nz.

For hints on training and managing the event on the day please visit Health Matters on the intranet.

Event information

- **Date:** 14 March 2010
- **Time:** 9:30 am
- **Distance:** 8.4 kilometres

ADHB Riding the Learning Technology Wave

Around 170 people from the ADHB and 19 other organisations attended the Online Learning Symposium hosted by the ADHB at the end of last year.

The symposium showcased the latest online learning solutions in place at the ADHB.

The keynote speakers presented topics ranging from starting an online MOODLE site, using online technologies to increase collaboration between DHBs and the use of Flash learning aids in new courses.

The symposium was also an opportunity to officially launch and demonstrate the ADHB's online *Treaty of Waitangi* course.

Craig Paterson, Online Learning Consultant, says feedback from attendees has been extremely positive and significant interest has since been raised from other DHBs and national interest groups.

"We have made remarkable progress in the two years and MOODLE is now a strategic asset for workforce development.

"There are also some exciting prospects for greater DHB collaboration at a regional and national level," he says.

The symposium is an annual event and will be repeated in 2010.

Did you know?

MOODLE (Modular Object-Oriented Dynamic Learning Environment) is a software package for managing online learning. It allows Nurse Educators and other tutors to create learning and training activities and deploy these to their audiences. The software also allows ADHB to manage participants and access their learning records. <http://adhb.moodle.co.nz/course/view.php?id=163>

Contacting
NOVA

Editor: Jenny Williams, Communications Manager, ADHB

Design: Diane Stephenson, Medphoto & Graphics, ADHB

NOVA is the official newsletter of the Auckland District Health Board. It is published by the Communications Department, located in Building 10, Level 1, Greenlane Clinical Centre.

ISSN 1178-5373 (print)
ISSN 1178-5381 (online)

If your department has something to share please contact the editor either by phone, extension 3952 or by email jennywi@adhb.govt.nz
Copy needs to be received a month prior to publication. Please send text in MSWord and photos as high-quality jpeg.

