**HỌC MÃI FOUNDATION PHILOSOPHY**

**Who we are**

Hoc Mãi, the Australia Việt Nam Medical Foundation, is a non-profit organisation which was established in 2001 to improve health outcomes through education and research in Việt Nam. It is a foundation of the University of Sydney that brings together the collective health care knowledge and experience of Australia and Việt Nam in an educational partnership. The Hoc Mãi Foundation has a distinguished Patron, Her Excellency, Professor Marie Bashir, AC, CVO, Governor of New South Wales.

**Our mission**

The Hoc Mãi Foundation will improve health in Việt Nam through the ongoing education and leadership development of health professionals through exchange and in-country support. We do this by:

- Supporting a bilateral exchange of students and health professionals between Australia and Việt Nam
- Assisting to develop an understanding of the methods of teaching doctors and nurses in Việt Nam by ‘Train the Trainer’ programs and the SCORPIO technique
- Facilitating the development of knowledge of the Việtnamese doctors, nurses and other healthcare workers to improve health care delivery to their people
- Developing a strong network of Australian medical, nursing, technical and allied health staff who will provide ongoing assistance and training of Vietnamese colleagues
- Providing practical assistance with preventive, diagnostic and management problems in hospitals in Việt Nam
- Increasing research skills in Việt Nam with the aim of using research to improve care

**What we do**

We facilitate:

- Education and ‘Train-the-Trainer’ programs in Việt Namese hospitals and universities
- Delegations travelling to Việt Nam to teach clinical skills and knowledge within various specialities in a number of hospitals in Việt Nam
- Young health professionals from Việt Nam to come to Australia for advanced training
- Medical, nursing, and health science students from University of Sydney to undertake clinical placements in Việt Nam
- Vietnamese medical students to broaden their hospital experience in Australia
- Students in the Masters of International Public Health from the University of Sydney to undertake their praxis in Việt Nam
- Support for medical research and training

**How we work**

Hoc Mãi, relies on the goodwill of Australian health care professionals to host and train their Việt Namese colleagues. We act as facilitators for Vietnamese and Australian medical personnel to gain experience and understanding of issues in the developing world. We rely on grants and donations to support our program.
EXECUTIVE OFFICER’S REPORT

RHONDDA GLASSON

Học Mãi – the Australia Viêt Nam Medical Foundation’s purpose is to facilitate opportunities to improve the health outcomes for the people of Viêt Nam through education. Without the generosity and commitment to this goal by ALL of the people who work with Học Mãi from both Viêt Nam and Australia, we would not exist. So thank you!!

The University of Sydney’s support is vital to the continuation of the Học Mãi Foundation. I thank all of the people in the operational departments and the clinical schools we work with; working together with these groups of people ensures that the foundation meets our responsibilities to the University.

I also thank Mr Jason Dibbs (Administration Assistant and Project Officer) and Esmond Esguerra (Project Officer); it has been a great year working with them. With close collaboration, we have ensured that the productivity of the office never lets the foundation down.

Every year, we do continue to improve our current projects/program and develop more; most of the projects and programs will be outlined in this annual report. This work could not be done without the generosity of our donors, our volunteers and the support of AusAID.

The Australian student scholarship program remains popular. In 2012, Học Mãi funded and facilitated the opportunity for 32 students so they could experience health care delivery in Viêt Nam. The Viêtnamese medical students’ clinical placements in Australia were increased again this year with the participation of students from University of Medicine and Pharmacy and Pham Ngoc Thach Medical University, HCMC and HaNoi Medical University. We would like to thank the Northern Clinical School and the Dental School at Westmead for continuing to support this scholarship program.

The role of Executive Officer continues to be a very satisfying one, made so, by the people I work with. I would like to sincerely thank my Australian and Viêtnamese colleagues/ Học Mãi Volunteers who make the Foundation what it is.
The Hoc Mai Foundation accomplished a great deal over 2012 in Viet Nam. As the coordinator of Hoc Mai activities in Viet Nam, I would like to highlight the following achievements:

Exchange training programs:
Student Scholarships
There were more than 30 Australian students, including 1st year, 2nd year, 3rd year medical students, Nursing, Health Sciences and International Public Health students who came to Viet Nam in 2012 to undertake clinical placements and conduct research. One of the Australian students had opportunities to conduct a small research project in Ba Vi District which is a mountainous area in North Viet Nam. Notably this year, Hoc Mai has expanded the clinical placements to Central Military 108 Hospital.

Nine students from University of Medicine and Pharmacy (UMP, HCMC), Pham Ngoc Thach University of Medicine and HaNoi Medical University (HMU) were award scholarships to undertake a 4 week clinical placement at the University of Sydney.

Australia Leadership Fellowships
There were 27 Viêtnamese young health professionals funded through AUSAID to conduct 3 months study in Australia.

Both Viêtnamese and Australian participants acquire a better understanding of the health needs of a different population and of the education of its health professionals. In particular, they are very much interested in learning about what the needs are, as well as the challenges of diagnoses and treatment in different cultural contexts.

Building Research Capacity Project: Hoc Mai provided funds for 4 research projects to be conducted by young Viêtnamese medical doctors in Ho Chi Minh City and Hanoi, Viet Nam. With the guidance and support provided by Australian researchers, these projects are in progress and will be reported on and published shortly.

A one day workshop in November, (Practical Clinical Research Program) was organized at both HMU and UMP. It was a great opportunity for young clinicians, educators and scientists to meet and discuss research priorities in the Viet Nam health care sector, and to learn from Sydney Medical School (SMS) academics by identifying prioritized research topics and develop an understanding of relevant methods of research to improve capacity in scientific research.

Advanced Medical Teaching to enhance the clinical teaching methods of HMU Faculty and Medical English course at Bach Mai and Thanh Nhan Hospitals:
Teams of Clinical Academics from SMS visit Hanoi every three months to teach clinical skills and Medical English to Viêtnamese clinicians and academics.

One report was presented by Prof. Kerry Goulston and Prof. Kim Oates at an international Mekong Sante conference held in HMU, Hanoi which was highly appreciated by Viêtnamese and international colleagues. Our Viêtnamese colleagues realize that it is essential that Viêtnamese medical doctors should be comfortable with Medical English as a way of expanding their clinical horizons and improving the health of the Viêtnamese people.

Improving Hospital Death Data Collection Project:
An AusAID Public Service Linkage Program (PSLP)/University of Sydney funded project, is being developed in collaboration with Bach Mai and Viet-Duc hospitals and Professor Merrilyn Walton.

Dien Bien Phu Project: This has been successfully implemented with the direct involvement of SMS trainers to provide technical training in maternal and child health care for health care providers at a grass-root level in one of the remotest mountainous areas in North Viet Nam.

Hoc Mai House and Water purification plant at Viet-Duc Hospital is functioning very well and has got continued financial support from Hoc Mai to refurbish the facilities.

A delegation from Hoc Mai Foundation led by Prof. Bruce Robinson, Chair Hoc Mai Foundation and Dean of SMS came to visit HMU to attend the 110th Anniversary of HMU. On this special occasion, HMU expressed its sincere thanks and high appreciations to SMS in improving the medical education for health professionals as well as the promotion of collaborative research in medicine by building a bi-national education program in the framework of an educational partnership.

These activities are evidence of achievements which have been recognized by the Minister of Health in Viet Nam when he met with Prof. Bruce Robinson at the 110th Anniversary of HMU.
Hoc Mái - Australia Việt Nam Medical Foundation continues, through the funding from AusAID and the generosity of loyal supporters/donors, to meet one of the main goals: to train potential health leaders from Việt Nam in order to improve the health outcomes for the people of Việt Nam. As such, since 2001, the Hoc Mái Foundation with this funding has sponsored over 220 young Vietnamese health professionals for short term training in Australia.

The Foundation would like to acknowledge and thank AusAID for its generous support which allowed us to expand and continue to develop this education experience.

This initiative places young health care workers (doctors, nurses, midwives, scientists and pharmacists) in three month training programs to observe aspects of the hospital system in Australia as well as learn new concepts and techniques with appropriate health care professionals in Australia.

The Fellows were selected from an outstanding pool of candidates who were interviewed in November 2011 by a committed group of Hoc Mái volunteers. Each candidate was chosen because of their leadership potential and all are expected to impart their newfound knowledge to colleagues and students back in Việt Nam.

The successful candidates were received from our partner organizations in Việt Nam:
- DaNang
  - DaNang University
- HCMC
  - An Binh Hospital
  - Hospital for Orthopedics and Rehabilitation
  - Hospital Tropical Diseases
  - Hospital for Trauma and Orthopedics
  - Hung Vuong Hospital
  - Children's Hospital 2
  - University of Medicine and Pharmacy
  - Pham Ngoc Thach University of Medicine
  - Thu Duc Hospital
- HaNoi
  - National Hospital of Obstetrics and Gynecology
  - Military Central Hospital 103
  - Hanoi Medical University
  - Bach Mai Hospital
  - National Institute of Ophthalmology
  - Viet Duc Hospital
  - National Hospital for Pediatrics
  - National Cancer Hospital
- Hue
  - Hue University

This program would not be possible without the support of the hospitals and university departments who welcome our colleagues from Việt Nam. Initially, the program commenced at Royal North Shore Hospital but rapidly expanded to include other major teaching hospitals and organizations including:
- Royal Prince Alfred Hospital
- Westmead Hospital – Adults
- IVF Australia
- Royal Ryde Rehabilitation
- Concord Hospital
- The Children’s Hospital at Westmead
- University of Sydney
- Sydney Dental Hospital
- Sydney Eye Hospital
- Royal Hobart Hospital

The Fellows participated in a two day per week education program at the Northern Clinical School and we would like to sincerely thank all the Northern Clinical School Staff for the assistance given to the Fellows and the Hoc Mái Foundation. The aim of the education program is to focus on topic areas that would be of interest to all of the Fellows despite their varying backgrounds and to expose them to different and modern learning techniques. The Education program committee who were responsible for reviewing and updating the curriculum were: Professor Jonathan Morris, Professor Stuart Dunn, Dr Kirsty Foster, Dr Paul Hiensch, Ms Gillian Nisbet and Rhondda Glasson.

This education program was a great success and made so by the coordination skills of Ms Gillian Nesbit and the assistance and expertise of the many tutors: Mr Ray Araullo, Professor Jonathan Morris, Dr Dindy Benn, Professor Stuart Dunn, Dr Kirsty Foster, Dr Paul Hiensch, Ms Gillian Nisbet, Dr Mark Ruff, Ms Colette Visser, Ms Sandie Bredermeyer, Professor David Osborn, Dr Jann Foster, Dr Adrienne Gordon, Dr Catherine Hawke, Dr Natasha Nassar, A/Professor Christine Roberts, Ms Elisabeth Pigott, Mr Jeremy Cullis, Ms Jacqueline Hass, Ms Isabelle Raisin, Ms Rebecca Goldsworthy,
Emphasis was placed on teaching techniques and approaches to patient care which they are able to use on their return home. Each Fellow also designed a project that would be implemented where possible in their clinical workplace on their return.

Overall, the Fellowship Program was enjoyed by everyone involved and the evaluation process has been valuable in assessing what worked well and what can be improved in the future.

*Rhondda Glasson*
NGUYEN THANH NAM

Although I’ve been called “the last lucky man” by Ms Rhondda from the first time I met her, but I think I was luckier when I had a chance to visit Sydney. Living in Sydney for three months was the most wonderful experience I’ve ever had.

The day I arrived Sydney, Rhondda and her companion’s warm smiles, the pure cool air together with beautiful sunlight then seemed to be proving that this trip would be very fantastic. And it was, indeed.

Under careful and enthusiastic instructions of Rhondda, everything seemed to be simple and comfortable even in new environment. Our group was settled in an exclusive apartment on Hay market, where it’s easy to find out something familiar to our motherland’s daily life.

Fortunately, my clinical placement was the Westmead Hospital’s Department of Radiology, one of the biggest hospitals in Sydney. The first day when I met the staff I understood that I was lucky because they were trying to help me learn as much as possible. Clinical job has given me a chance to learn about organisation and management of department of Radiology, to improve knowledge and skills in musculoskeletal imaging and interventional radiology. I will remember for my whole life the names of kind, enthusiastic and hardworking people such as Prof. Shih-chang Wang (Minh), Ass. Prof. Tony Peduto, Dr. Robert De Costa, Dr. Philip Vladicca, Ass. Prof. Noel Young. They set an example for me as a successful radiologist, researcher and lecturer in both conventional and interventional fields of Radiology.

Besides hard working time in Westmead Hospital, we have two interesting days per week for learning about communication, Australian Health care system and teaching methodology, leadership and management, evidence based medicine, team work and library skills. I appreciate the lectures of Dr Paul Heinrich, Dr Kirsty Foster, Prof. Jonathan Morris and other teachers. They’ve created a friendly and active environment with laughs and relax all the time.

I’ve spent my time to discover Sydney. Sydney – one of the most suitable to live cities of the world, but in my mind it is the most beautiful, peaceful, multicultural and stable city I’ve ever lived. I was completely sunk in various admirably marvellous landscapes.

Time flies. The day we leave Sydney is coming though we are still not ready. Every street, every corner of Sydney seems to be familiar in my heart. I just like to slow down my steps to feel the new kind, fantastic friend in my soul. And I promise myself to try my best to return to Sydney for long term in near future.

Lastly, I want to express my deep gratitude to Board of Hoc Mái Foundation and AusAID in general, to Prof. Bruce Robinson, Ms. Rhondda Glasson in specific. Thank to Gillian Nisbet for her enthusiasm in teaching. I promise that everything I have learned in Sydney will be benefit of my students and patients at least in order to deserve Hoc Mái Foundation Mission.

NGUYEN THAI GIANG

When my friend (Dr Chuong) recommend me to apply for Hoc Mái, he said “you won’t regret” with his twinkled eyes. I trusted him and began my preparation to apply for Hoc Mái scholarship. Through a careful selection, review the application form, the final interview and luckily I received the scholarship to Australia, my dream land, for 3 months. After a 13 hours fly, we arrived at Sydney airport in the early morning and started the most wonderful experience of our lives. Ms Rhondda and Mr Jason had been waiting for us since 2 hours. Quickly, they warm up us and made us forget the chill of the winter by their happy smile and sincere encourage. Then after one week of preparation, we were all ready to go to hospital. My supervisor, Dr Sean Seeho, a young and brilliant specialist, took us (Dr Tu and I) for a tour round the Obstetrics department of Royal North Shore hospital.

In the first six week, I had time to work with Prof Jonathan Norris, Dr Sean Seeho, Dr Jane Hirst, Dr Tanya and other doctors in hospital. I observed and participated in their daily work such as morning meeting, noon lectures, ward rounds, grand rounds, consult, do clinic and so on. By the time in RNS hospital, we were very happy and gained a lot of up to date knowledge in my interested field, the maternal fetal medicine.

Then our supervisor referred us to Royal Prince Alfred hospital where we met Prof Jonathan Hyett, a wise specialist in maternal fetal medicine, who has a strong collaboration with many hospitals in Viêt Nam. Then we met Rajit, Minke and Rahmah, fellows in maternal fetal medicine and High risk pregnancies department. With Rajit “the source of knowledge”, Minke “specialist of wallabies” and Ramah “fasting person” we have an international group and together we have a fruitful and enjoyable time.

Apart from the clinical experiences, I also took part in the course of Evidence-Based Medicine. It was the first time I have learnt this subject. I think that EBM was very useful for my work as well as my scientific researches in the future.

We are very grateful to the Hoc Mái Foundation for helping us gain the invaluable experience of learning about medicine in a developed country. We will never forget the time we live together in The house of Hocmai Foundation.

Thank you!
NGUYEN QUANG ANH
It is nearly the end of 3 months I have spent in Australia, what a wonderful for first time overseas that I will never forget.

Thanks to my supervisor, Professor Bruno Giuffre, that I have a chance to study and practice at radiology department of Royal North Shore hospital, one of the best hospital in New South Wales. Even though very busy, he always spends time to explain and help me a lot to improve both my clinical and working skills. Only in 3 days, I can easily live in harmony with professional working environmental at here. Like everyone studying in Australia hospital, I was first impressed by the relationship between doctors, nurses, and radiographers with patients. They are not only skilled with lots of experiences but also friendly, funny, and always smiled even in most difficult scenario. Working with them, I felt the love really passing around between everybody, reduce the pain and warm up patients’ heart. In addition, it is very helpful that I have a lot of time learning about neuro-intervention and stroke during 3 months. I realized a lot of differences between Royal North shore radiology and my department including both system and technicians. Besides the many protocols, knowledge and skills I have learnt in here, I hope that my project can be considered in the future to develop even a little quality in diagnosis and treatment for our patients. I really appreciate all staff in radiology department, especially the intervention team that always welcome and let me take part in many activities.

Thanks to all doctors take part in ALAF program that help us improve our knowledge and skills in many majority. You are always enthusiastic and patient in teaching us and introduced many clinical systems there and learnt skills, improve my organizing capacity a lot.

For two days each week I took part in a structured education program. This program was based mainly at Royal North Shore Hospital and Faculty of Nursing-The University of Sydney. Session topics covered educational, research and practice relevant interests. I have learnt about learning and teaching strategies; designing a small project; and presentation of the project plan.

At the weekend, we spent time discovering Sydney - one of the most spectacular cities in the world. We visited many beautiful places such as Sydney Harbour Bridge, Opera House, Darling Harbour, Sydney Tower, Aquarium, Wild Life Park, Madame Tussauds, Bondi and Manly beach… I didn’t miss the opportunity to enjoy a variety of traditional food and wine, fashion, art, culture…

In my case, I understand that this is also the best preparation for me to study Master of Nursing in Australia next year.

I just wanted to say a heartfelt thanks to all members of Hoc Mai Foundation for giving me this excellent opportunity!

DAO HUU HUNG
I work in the Surgical Intensive Care Unit of Viet Nam National Hospital of Pediatrics as a nursing team leader and clinical nurse educator. I was extremely happy to have the opportunity to study in Sydney.

For three days each week I was with my Clinical Supervisor observing and participating in clinical activities. I have observed that in Australia, nursing systems have developed over a long time. In The Children’s Hospital at Westmead, nurses work effectively in a wide range of clinical and non-clinical settings. There are many differences compared with nursing systems in Viet Nam. I was very interested in the nursing structure in Australia, so I developed a project about nursing structure.

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NGUYEN THANH HANG
I am the Executive officer of International Cooperation Department, Hanoi Medical University. I was extremely happy to have the opportunity to study in Sydney.

I had the desire to study administration in education, training in health care context and realize University of Sydney’s medical schools as the ideal address for me to improve my knowledge, administrative capacities and medical English communication. I was luckier to have the supervision offered by very experienced Faculty Manager: Ms Ria Deamer and her colleagues Executive Officer Hoc Mai Foundation, Rhondda Glasson to arrange my study. I had the chance to visit and work in the schools and Institutes of University of Sydney: Medical school, Public Health Institute, Woolcock Institute for Medical Research, Central Clinical School, Northern Clinical School.

I had the chance to meet many admin and executive officers, doctors & health care staff whom I was impressed of working dedication, high qualification, expertise. They work hard, voluntarily and collaboratively. I took the chance to practice some administrative works there and learnt skills, improve my organising capacity a lot.

Besides what I mentioned, the education program on 02 days/week which was another interesting aspect of the course. We were trained, provided medical information in many health topics, including how the Australian medical system works basically, approaches to teach and study with EBM (evidence – based medicine), Medical communicating skills in real context (with patients, health care staff…). By that way, my medical English communication is much improved.

Now I am back to my work, I am very eager to apply what I have observed to improve my routine works. I am very ready to facilitate my ideas.

Lastly, let me convey my deep thank to Prof. Bruce Robinson – The Hoc Măi Foundation Chair, who created opportunity for me to go to Sydney to learn useful knowledge for my job but also to improve my Medical English language. I would like to thank Ms Ria Deamer, my main supervisor who I admired since at my first meet in Hanoi Medical University, Rhondda Glasson, who organized and facilitated my trip to Sydney.

Last but not least, I would love to thank many colleagues in clinical schools of University of Sydney for offering me energetic guidance during the time I stayed and followed them.

I would really love Sydney and wish to come to Sydney for another chance because I never forget such a beautiful city and hospitable, friendly people.
BUILDING RESEARCH CAPACITY PROGRAM

OVERVIEW

Since 2008, Hoc Mài has been developing a project “Building Research Capacity” in Việt Nam lead by Professor Bruce Robinson and Professor Jonathan Morris.

Time Line:
2009 - Drs Dindy Benn and Christine Smyth conducted the needs analysis in Việt Nam
2010 - Conference in Hanoi, Hoc Mài awarded research grants to three health professionals from Hanoi:
  • Dr Le Thi Thu Trang
  • Dr Nguyen Van Anh
  • Dr Ho Thi Kim Thanh
2011 - Conference in HCMC - ‘Hoc Mài: Improving Health Care through Research’, four research grants were awarded to (see following reports):
  • Dr Phan Thi Hang
  • Dr Nguyen Thi Thanh Huyen
  • Dr Ho Nguyen Yen Phi
  • Dr Nguyen Van Dinh
2012 – Workshop 1 at University of Medicine and Pharmacy HCMC and Hanoi Medical University - ‘Practical Clinical Research’
2013 – 2nd workshop in series of three will occur in April 2013
Research title: 
*Pain following spinal cord injury in Việt Nam: Prevalence and characteristics*

Investigators: 
1. Nguyễn Thị Thanh Huyền, Rehabilitation Department, Hanoi Medical University, Bachmai Hospital, Việt Nam 
2. Philip J. Siddall, Department of Pain Management, Greenwich Hospital, Hammond Care, Sydney. Northern Clinical School, Sydney Medical School, University of Sydney 

Chronic pain is one of the most challenging medical problems after spinal cord injury (SCI). Treatment approaches should be a combination of psychological, medical and contextual interventions. Việt Nam also faces the same problem with a greatly increasing number of SCI cases due to extremely poor work safety and traffic conditions.

Setting up an appropriate pain management program for Việt Nam SCI patients is our urgent goal for the near future. To achieve this goal, we need the necessary and very detailed information about pain among SCI patients, which has not been available yet in Việt Nam.

With the financial support of Học Mãi Foundation and under the supervision of Prof. Siddall, I have implemented cross-sectional study "*Pain following spinal cord injury in Việt Nam: prevalence and characteristics*" to:
1. Investigate the prevalence of pain among 1 year-post SCI patients. 
2. Describe their pain characteristics. 
3. Examine the association between pain and measures of emotional status.

330 SCI patients who have been treated in the Rehabilitation Centre, Bachmai Hospital from June 2009 to June 2011 will be re-examined and re-evaluated.

From Jan to May 2012, we had collected the data of 194 patients who suffered SCI during the period of June 2009 to June 2010. Their pain status was considered and the initial results are as follow:
- 118/194 patients have pain and the prevalence of pain is 61%. 
- Among 118 patients with pain, 78% patients presented for a first time within the first 3 months and 95% within the first 6 months following injury. 
- 33/118 patients have musculoskeletal pain; 3/118 have visceral pain and 116/118 have neuropathic pain, especially there are 34 patients having both neuropathic and nociceptive pain 
- Only 10% have correct treatment on pain, 38% incorrect treatment and 52% have no treatment. 

The initial result of research was reported at International Mekong Sante Conference held at Hanoi Medical University on May 2012. We have been continuing to collect the data of the rest of the patient and final result will be accomplished on March 2013.

I sincerely thank the Học Mãi Foundation for its continued support to the project and hope to get further cooperation with you in the future.
Catheter associated urinary tract infection (CAUTI) is one of the most common hospital acquired infections, accounting for almost 40% of infections. In the International Nosocomial Infection Control Consortium (INICC) report, developing countries had CAUTI rates that were twice as high as that of developed countries (6.3, 95% CI: 5.9–6.6) versus 3.3, (95% CI: 3.1–3.5 per 1000 catheter-days) (Rosenthal 2010 Mar). Hung Vuong Hospital (HVH) is an Obstetric and Gynaecology hospital. Every year, about 42,000 women give birth in HVH, and more than 25,000 women are catheterized.

With the support of the Hoc Mai Foundation, we implemented a research study entitled “Prevention of catheter associated urinary tract infection program in Hung Vuong Hospital”. The Principal Investigator of this study is Dr. Phan Thi Hang, Head of the Infection Control Department of Hung Vuong Hospital. Co-investigators from the University of Sydney include Dr. Andie Lee, a Microbiologist at Royal Prince Alfred Hospital in Sydney, and Professor Peter McMinn, Bosch Professor of Infectious Diseases at Sydney Medical School, who have been involved in the development of the study protocol and supervision of the implementation of the project.

The study is a before-and-after intervention study and commenced in April 2012. The aims of this study are to evaluate the effectiveness of a multifaceted infection control program to prevent urinary tract CAUTI in HVH. The interventions being evaluated are: 1) development of an aseptic technique and urinary catheter care policy; 2) education of all nurses and midwives in aseptic technique for insertion of urinary catheters; 3) development and education of staff in a simple method to prevent urinary retention, especially in postpartum and post-operative care by asking the right question to void at the right time; 4) distribution of posters and stickers to remind staff to remove catheters as soon as possible; 5) audit and feedback to staff of compliance with aseptic technique (including hand hygiene compliance) and CAUTI rates.

Before commencement of data collection and part of the preparation for the study, Dr. Andie Lee visited HVH and liaised with the Microbiology Laboratory to review the urine culture processes. The pharmacist Mr. Phu, the Head of the laboratory services at HVH, confirmed that he had applied for ISO15189 certification in 2013. This study has also received executive support from the Director of HVH.

In September 2012, we collected data for 2070 patients in whom there was an indication for insertion of a urinary catheter. Of these patients, 82% were post-operative. There were 60 cases (1.7%) with severe postpartum or post-operative urinary retention with bladder urine residuals of more than 700mL, which could potentially cause damage to the bladder. There were 61 symptomatic cases, of which 4 cases had positive urine cultures. The training courses for nurses and midwives about aseptic technique for insertion of indwelling urinary catheters occurred in December 2012. There were 8 courses in total which included all 240 midwives and nurses who work in the high-risk pregnancy department, delivery suite, postpartum department and post-operative department.

Prior to conducting this study, staff at HVH had paid little attention to indwelling urinary catheters and their complications. The training of nurses and midwives was well-received and there was much interest in obtaining information concerning prevention of catheter associated urinary tract infection as well as recognition of the early symptoms of CAUTI. The Chief Nurse of HVH stated, “We now have a better understanding of the complications and the risks of indwelling urinary catheters and we now know how to prevent it. We hope that we will be successful in decreasing the rate of CAUTI as well as reducing the use of indwelling urinary catheters in our patients.”

The CAUTI study has improved awareness and knowledge of staff at HVH of the burden of catheter associated urinary tract infection and interventions that can prevent this healthcare associated infection. We wish to thank the Hoc Mai Foundation at the University of Sydney for financial support for this project which aims to improve the safety and quality of care of patients in HVH hospital.
Assessment of Risk Factors Associated With Carbamazepine and Other Drugs-Induced Stevens-Johnson Syndrome (SJS), Toxic Epidermal Necrolysis (TENS) and Drug-induced Hypersensitivity Syndrome with Rash, Eosinophilia and Systemic Symptoms (DRESS).

2012 Hoc Mai Foundation grant: Improving health care through research program.

Principal Investigator: Nguyen Van Dinh MD, Hoc Mai Fellow 2010, Lecturer, Allergy Department, Hanoi Medical University and Physician, Center of Allergology and Clinical Immunology, Bach Mai Hospital, Hanoi, Viet Nam.

Supervision: Clinical Associate Professor Sheryl van Nunen MB BS MM(Sleep Medicine) FRACP, Royal North Shore Hospital and Sydney Medical School- Northern, Sydney, Australia.

Co-Investigators: A/Professor Nguyen Van Doan, MD, PhD, Allergy Department, Hanoi Medical University; Chu Chi Hieu, MD, Allergist, Center of Allergology and Clinical Immunology, Bach Mai Hospital; Phan Hong Minh, MD, Neurologist, Bach Mai Hospital; Professor Timothy Craig, DO, Section of Allergy, Asthma and Immunology, Pennsylvania State University, Hershey, PA, USA; Dr Karl Baumgart BSc (Med), MB, BS, PhD, FRACP, FRCPA, Sonic Clinical Institute, North Ryde, Australia.

Background: In Viet Nam, there appears to be a very high incidence of drug-induced SJS/TENS/DRESS and the risk factors for these syndromes have not yet been explored. In other Asian countries, the presence of HLA-B*1502 is an established risk factor (Figure 1) for these reactions. While there is known to be a high prevalence of B*1502 positivity in the Vietnamese population at large, individuals who develop drug-induced SJS/TENS/DRESS have not been surveyed for the presence of this allele.

Our project has characterised cases of SJS/TENS/DRESS in Vietnamese patients presenting to Bach Mai Hospital, using internationally accepted clinical criteria, and is currently determining whether the presence of HLA B*1502 constitutes a risk factor for the development of SJS/TENS/DRESS in these subjects. The usual culprit drug in patients in our Center is carbamazepine.

Methods: Following Hoc Mai Foundation approval of our grant proposal, known cases of SJS/TENS/DRESS who had sought treatment at the Center of Allergology and Clinical Immunology, Bach mai Hospital in Hanoi were reviewed retrospectively.

Subjects were asked to donate blood for HLA typing (genotyping). The clinical history, ethnic origin, family history, physical examination findings and routine blood biochemistry and haematological test results were recorded and blood was taken for HLA testing.

Dr Karl Baumgart, Medical Director, Sonic Clinical Institute, kindly donated blood spot cards, which allowed for easy collection, storage and transfer of the blood samples for HLA testing.

Progress to date: Thirty-eight samples from patients with SJS/TENS/DRESS are currently being analysed in Dr Baumgart’s laboratory at the Sonic Clinical Institute for the presence of HLA B*1502, along with those from a control group comprising 25 patients who have taken carbamazepine for over four months without any adverse reaction.

Remaining objectives: Once the genetic testing is complete, statistical analysis of the clinical characteristics of both the subject and control groups and calculation of the odds ratio (OR) for the presence of HLA allele will be undertaken, using SPSS software, and overseen by Professor Timothy Craig, University of Pennsylvania.

Our final report will be compiled in May 2013 and our findings will be submitted for publication to an international peer-reviewed journal (Journal of Allergy and Clinical Immunology) following preparation and presentation of our preliminary findings at the Australasian Society of Clinical Immunology and Allergy (ASCIA) Annual Scientific Meeting in Perth, Australia in September 2013.

Benefit to the people of Viet Nam: If our results confirm that the presence of the HLA B*1502 allele is responsible for the high incidence of carbamazepine induced severe cutaneous reactions (SJS/TEN) and DRESS, we will refer these findings to The Ministry of Health in Viet Nam, and request that HLA B*1502 testing be undertaken in patients before carbamazepine therapy is commenced, so reducing significantly the incidence of SJS/TEN and DRESS in our patients in Viet Nam.

Acknowledgment: We wish to thank the Hoc Mai Foundation for both material support and advice and for their practical assistance in transporting the blood spot cards to and from Viet Nam.
The Dien Bien Phu (DBP) Maternal and Child Health project developed in an innovative and exciting way during 2012, thanks to an AusAid Public Sector Linkage Grant of $242,000 over two years. The funding has meant that Hoa Mâi has been able to run three workshops over the year. Dr Kirsty Foster, a medical educator with extensive primary care and international teaching experience, knows the rural remote Province well and is the overall leader responsible for the initiative as a whole and for the innovative health literacy component of the program. Kirsty has travelled with three teams in 2012, each of which has run a six-day workshop. The format is of an intensive three days of teaching, run using the SCORPIO practical small-group methods favoured by Hoa Mâi and participants alike. The new innovation is that, on completion of the first three days, some or all of the Australian tutors have stayed on for a further three workshop days, working collaboratively with twelve to fifteen selected members of the group to facilitate the development of local professional networks, where the health professionals on the ground reflect on the new knowledge and skills they have gained and are involved in decision-making about the priorities for implementation in DBP. A key part of this component of the workshop is to learn skills of effective dissemination of health related information to the communities of DBP, where the people most in need are extremely poor and often illiterate. Hoa Mâi’s in-country partners in the project are Dien Bien Department of Health, Hanoi Medical University and the Vietnamese Women’s Union (VWU).

The first workshop of this series, “Healthy Mothers” took place in May 2012 with a 5 person team. Professor Jonathan Morris, obstetrician, was the clinical lead for the workshop, and was accompanied by Kirsty and two other DBP regulars: Dr Jane Hirst, obstetrician and Ms Cathy Adams, clinical midwifery consultant. A new member of the team was midwife Ms Margie Bell. Margie has worked on several Medicins sans Frontieres’ missions in sub-Saharan Africa and is also a professional actor. Her skills were used to the full in DBP. 12 of the initial 24 participants were selected for the second three days. Having learned about optimal management of normal pregnancy, of normal labour, of anaemia and pregnancy and post-partum haemorrhage, the priorities identified by the participants as important in reducing maternal and infant mortality were simple: to ensure that every pregnant woman has at least four antenatal check-ups, ensure that every woman delivering a baby has a skilled birth attendant present and that there should be no anaemic pregnant woman in DBP.

The second workshop “Healthy Babies” in October tackled the issues of essential newborn care, breastfeeding and resuscitation of the newborn infant who fails to breathe at birth. Professor Heather Jeffery was the clinical lead and her team comprised Clinical Associate Professor David Osborn, Neonatologist, Dr Tracey Lutz, Neonatologist, Dr Monica Lahra, Pathologist and Ms Rachel Jones, Lactation Consultant. Dr Kirsty Foster led the second three days of the workshop assisted by Rachel, David and Margie Bell. Dr Foster ran a half-day session on successfully working with community groups for 12 village leaders, all members of the VWU.

The “Healthy Children” workshop was held in November with Professor Elizabeth Elliott as the Paediatric lead. Professor Heather Jeffery and Dr Adrienne Gordon both neonatologists and Professor Cheryl Jones, Paediatrician along with Ms Julie Rogers, Nurse Unit Manager (Community Paediatrics Division of Women’s, Children’s and Family Health) were the tutors for days 1-3 of the workshop, for 25 participants and Prof Elliott, Dr Kirsty Foster and Ms Julie Rogers ran days 4- for 15 participants. The workshop topic was prevention, recognition and treatment of infection in infants and young children with particular focus on diarrhea and pneumonia which are known to be associated with major morbidity and mortality. Again, the feedback from participants was excellent. A particular highlight was when the workshop participants ran three different educational sessions for 23 village leaders on the last day. The sessions were interactive and informative and extremely well received by the village leaders.

In 2013, the project’s second year, the aim is to build on the topics which have already been introduced in more depth. The health literacy component of the program will focus on achieving widespread understanding of key concepts between health professionals and continuing to forge health professional networks across Dien Bien Province to build capacity in dissemination of health information to the lay population. Kirsty Foster
Project Outline: This project has developed the capacity of the Dien Bien Phu Provincial Hospital Microbiology Laboratory by providing equipment, consumables, education and training, and educational resources to enable it to begin operate safely and effectively as a diagnostic service. In the longer term this will provide epidemiological data to inform the Maternal Child Health clinical education program and the opportunity for collaborative research about infectious diseases involving Vietnamese and Australian research teams.

In 2012 our team visited DBP Hospital Microbiology Laboratory to oversee the delivery of equipment and consumables to enable the commencement of diagnostic testing for gastrointestinal pathogens.

The equipment and consumables required for the commencement of diagnostic were identified by Mrs Hang at the National Hospital of Paediatrics (NHP) Department of Microbiology in consultation with the staff at DBP Hospital Microbiology Laboratory. Mrs Hang and her staff provided the training in diagnostic testing and standard operating procedures (SOPs) for diagnosis of enteric pathogens which was part of this project. In addition to the Class II Biological Safety Cabinet delivered previously, a fridge/freezer, binocular microscope, autoclave, and incubator were ordered. The consumables supplied included Urea agar plates, Motility agar plates, Salmonella Serogroup kits, Shigella Serogroup kits, E.coli Serogroup kits, Oxidase tests, Kovax tests, disks for Antibiotic sensitivity testing specimen containers, swabs, bamboo sticks, and Rotavirus LATEX particle agglutination testing kits.

During our visit the IPDF Project team met with Dr Son (Director of DBP Hospital) and the staff of the microbiology laboratory in DBP to discuss the equipment and consumables ordered and to check that the equipment previously ordered had been delivered and appropriately installed. We were shown the laptop computer and camera purchased in August 2010, however the staff were not routinely entering their paper specimen records into the computer. Training was provided for microbiology staff to set up an electronic database and to enter their results from the previous year. The class II BSC delivered in 2011 had been installed and was in good condition. Instructions for appropriate use were displayed on the unit and it was clearly being used by staff. Hand washing facilities were in place.

We met the two DBP Hospital Microbiology scientists that completed training at the NHP Department of Microbiology in December 2010 and April 2011. We discussed the commencement of testing for gastrointestinal pathogens in DBP and the staff confirmed that they have received sufficient training to perform the testing, SOPs and that they are able to contact Mrs Hang in the Department of Microbiology if they have any problems.

The DBP Hospital Planning Department has committed to support the ongoing provision of diagnostic testing services, and to encourage hospital clinicians to use the service. The Director of Laboratory Services at the hospital, Dr Thao, explained plans to run training for the hospital clinicians to cover how to collect specimens, how to use results from the lab, and how to use antibiotics appropriately. Laboratory diagnosis will also be incorporated into planned clinical teaching for 2012/2013.

The Sydney University IPDF team sincerely thank our Vietnamese colleagues Dr Son, Dr Tan and the staff at DBP, and to Mrs Hang at NHP and Dr Le Kien Ngai, Director of Infectious Diseases at NHP, for his excellent advice, help and translation over the duration of this project, and without whom this project would have been very difficult.

This IPDF concluded in 2012 however the Hoc Mài Foundation continues its work in DBP in large projects such as the Healthy Mother, Healthy Baby and the Healthy Child Workshops. Prevention and treatment of infection is a major focus of these projects and development of the capacity of the microbiology laboratory in DBP is critical for informing treatment and rational use of antibiotics and ongoing support for this will be important.

Monica M Lahra, Elizabeth J Elliott, Peter C McMinn, Heather E Jeffery, Emily J Bek, Dr Le Kien Ngai
THE CLINICAL PHARMACY PROGRAM
MARGARET DUGUID & MEREDITH VERGE

The main objective of the Hoc Mأ©i Pharmacy Program is to assist in the development of clinical pharmacy services and improve quality and safety of medicines use in Vietnamese hospitals. In 2012 the major activities were:

- a symposium on medication safety in Hanoi and visit to Bach Mai Hospital;
- hosting an academic pharmacist Hoc Mأ©i fellow in Sydney.

Margaret Duguid (Pharmaceutical Advisor at The Australian Commission for Quality & Safety in Healthcare) & Meredith Verge (Education & Training Pharmacist, Royal North Shore Hospital (RNSH)) conducted a one day medication safety symposium at Bach Mai Hospital in March. The Symposium was organised by the Director of Pharmacy at Bach Mai Hospital, Mrs Nguyen Hong Thu and pharmacists Ms Nguyen Thu Minh and Ms Duong Thanh Hai.

It was opened by Dr Nguyen Quoc Tuan, Head of the Planning Department at Bach Mai hospital and chaired by Dr Nguyen Huong Giang, Deputy Head of the Planning Department. Dr Nguyen Hoang Anh, Vice Deputy of the National Drug Information and Adverse Drug Reaction Centre at Hanoi University of Pharmacy acted as interpreter. Up to 150 doctors, senior, junior staff as well as undergraduate and post graduate medical students, chief nurses of wards and pharmacists attended the symposium. The morning session was based on the WHO Multi-professional Patient Safety Curriculum Guide - Improving medication safety and provided a general introduction to medication safety, covering the types and frequency of medication errors, common causes of errors and ways to prevent errors and adverse medicines events. The afternoon commenced with a session on medicines use in renal impairment including dose adjustment and examples of drugs requiring close monitoring. This followed with a session on Improving systems: Australian approaches and included a discussion on the benefits of a standard medication chart. The symposium finished with a short discussion about the no blame approach to reporting medication errors. A pleasing outcome of the day was the commitment by the hospital to trial the use of a standard medication chart.

The symposium was followed by a number of ward visits with clinical pharmacists and presentations to different groups including a repeat of the drug dosing in renal impairment talk to the Respiratory Department with specific emphasis on the dosing of tuberculosis medication.

Fostering continuing education activities in the pharmacy department was another objective of the visit and a talk entitled "How to present a case history" was delivered in the Medicines Information room to an interested group of pharmacists. There are plans to further engage with the clinical pharmacists at Bach Mai Hospital in 2013 via Skype sessions to share learning through case presentations.

In the second half of 2012 RNSH Pharmacy department hosted Hoc Mأ©i Fellow Dinh Thi Thuy Ha, an academic pharmacist from Da Nang University. Ha was the first clinical pharmacy academic to come to Sydney. She was keen to study the way clinical pharmacy is practised in hospitals in Australia and taught to undergraduates. To further those aims a varied program of visits was arranged with many pharmacists freely giving their time and expertise to guide Ha’s learning. She attended many ward visits and meetings with different clinical pharmacists, observing the daily activities in patient care that make up a large proportion of a busy clinical pharmacists day including:

- Medication reconciliation on admission, at transitions of care (between wards and intensive care for example) and on discharge;
- Pharmaceutical review of medication charts;
- Patient education: and
- Answering medicines information queries from staff.

Ha also observed the RNSH Pharmacy weekly tutorials conducted as part of the pharmacy intern education program, and the pharmacy department’s continuing education program.

As with previous Hoc Mأ©i pharmacy fellows Ha visited the NSW Medicines Information Centre and attended their 2 day medicines information training course. She also visited Sydney & Sydney Eye Hospital and Westmead Hospital Pharmacy Departments. The benefits of the training in medicines information received by Hoc Mأ©i Fellows on their placements in Sydney was observed whilst Meredith and Margaret were in the Medicines Information room in Bach Mai Hospital there the pharmacists were busy answering medicines information questions about a patient who had recently undergone a kidney transplant.

Staff from the Pharmacy Departments at University of Sydney and UTS introduced Ha to the clinical pharmacy curriculum taught at the universities and she observed the techniques used to educate pharmacy students on clinical pharmacy at the university and on hospital placements.

2012 marked the 10th year that the Pharmacy Department at RNSH has been involved with Hoc Mأ©i. Since that time five pharmacists have been Hoc Mأ©i fellows at RNSH – four from Bach Mai Hospital. The clinical pharmacy service at Bach Mai Hospital has evolved from no service to five pharmacists providing clinical pharmacy services to five wards. Hoc Mأ©i pharmacy fellows have gone on to train pharmacists in other hospitals within Hanoi and in regional hospitals and to help establish clinical pharmacy services and develop strategies for clinical pharmacy in at least one other province.

Acknowledgements

For their assistance with this year’s Hoc Mأ©i Fellow’s program a special thank you to Pharmacy staff at RNSH: Assoc Prof Beata Bajorek (UTS), Jonathan Penn (University of Sydney and Sydney and Sydney Eye Hospital), Judith Hampson (Sydney and Sydney Eye Hospital), Leone Snowden (NSW Medicines Information Centre), Kingsley Ng and Elizabeth Anderson (Westmead Hospital).
RADIATION ONCOLOGY

Graeme Morgan

Activities for 2012 for supporting radiation oncology in Vietnam were:

Volunteer Radiation Therapists (RTs):
RTs are responsible for setting up the patient on the treatment couch before turning on the radiation beam. This needs to be carried out before each treatment to ensure that the same (correct) area is treated on each occasion over a course of treatment that may take 4 to 5 weeks. Hence they are vital to the successful outcome of treatment.

A number of RTs spent time as a volunteer funded by AusAID and HCMC at Radiation Oncology units throughout Vietnam. In March, Mr Ian Lynch (formerly Head RT at Hobart) completed 12 months as a volunteer at K Hospital, Hanoi. In February, Mr Vu Huynh - Australian born of Vietnamese parents - from Perth WA began 12 months shared between Cho Ray Hospital HCMC and the HCMC Oncology Hospital. In August, Ms Amie Thompson from RNSH spent 4 months at Hue Hospital and Ms Sonia Phelps, from ACT started 6 months at 115 Hospital, HCMC in November. In 2013, Ms Grace Donahoo from Peter MacCallum in Melbourne, will be attached to Bach Mai Hospital in Ha Noi.

Second RT Workshop:
In November, the Second RT Workshop by a group of RTs, and this time including a Radiation Oncology Medical Physicist (ROMP), visited 8 hospitals over a two-week period including HCMC, DaNang and Ha Noi. Again this raised awareness of the importance of safe, accurate, effective radiation treatment and we were warmly welcomed at all hospitals we attended.

University-based Training Course for RTs:
At the same time as the Workshops, both Vu and I accompanied Prof Patrick Brennan (Assoc Dean of International Research Development, Faculty of Health Sciences [FHS], Lidcombe campus) at meetings with the Hanoi Medical University [HMU] and the University of Medicine and Pharmacy [UMP] at HCMC, aimed at establishing university-based training courses for RTs. This was eagerly accepted. Further discussion is now underway. This is likely to develop into a National Training course for RTs in Vietnam.

Donation of a Simulator from Nepean Hospital to Can Tho Hospital:
A simulator is used to take x-rays of patients before treatment to accurately localise the area to be treated whilst avoiding surrounding normal tissues.

The donation of a simulator to Can Tho Hospital from Nepean Hospital Sydney has finally been completed and the machine is in full use. It began with the donation a simulator that had been hardly used by Prof Phillip Yule [Director at Westmead - Nepean]. Dismantling and packing the unit by two Nucletron biomedical engineers from India, plus the purchase of additional pieces of equipment was paid for by Mr Peter Douglas [Nucletron, Australia].

With support from Danny Low and Ron Marcus from Rotary International, the simulator was shipped to HCMC and then to Can Tho Hospital. Re-installation was undertaken by Mr Nico De Jong, a biomedical engineer from USA. During this time he trained the hospital engineers and ROMPs at Can Tho on QA/QC procedures plus servicing and maintenance requirements for the simulator and the Cobalt treatment unit.

Projects for 2013:
The major project is establishing RT training courses at HMU and UMP-HCMC to be supported by AusAID funding.
The Học Mãi Advanced Course in Medical Education and Research is designed to provide a select group of outstanding recent Hanoi Medical University (HMU) graduates with the tools to introduce and lead change in medical education and research, thereby contributing to the development of Vietnamese health care for the future.

Initially developed in consultation with senior academics at HMU, the first course was in 2009. The outcome was that HMU asked us to repeat this course in 2010, 2011 and 2012. Due to the growing success and reputation of these courses, another is planned for 2013.

The course emphasises skills not normally taught to Vietnamese graduates, but which are essential for future leadership: change management, modern assessment methods of medical skills, teaching skills, statistics, evidence based medicine, research methods, leading and sustaining change, preparing projects for publication, communication skills and patient safety. Teaching is interactive using small group discussions and one-on-one interactions, and in English.

The program:
- Identifies the most highly talented graduates from HMU,
- Equips them to teach at HMU in their clinical departments in English, publish in English language journals and communicate in English with international colleagues as teachers and researchers,
- Gives them an advanced educational experience, that equips them for leadership, management and innovative change in medical education and research, and
- Provides support for them when they return to their usual professional responsibilities so that they can apply what they have learned and lead change in medical education, research and health care.

A key component of the 2012 program was an intensive two week course run at Royal North Shore Hospital between August 6th and August 17th, 2012. This involved small group tutorials and discussion groups led by senior clinical academics from the Sydney Medical School followed by a one week attachment to an Australian Clinical Academic in their own area of interest. This second week becomes the basis of ongoing professional relationship between Vietnamese and Australian doctors leading to further opportunities to exchange data, visit each other’s institutions and develop joint research projects.

Pre and post tests after each component of the course showed a statistically significant increase in knowledge. In final evaluations, most considered the course to be either highly relevant or fairly relevant to their clinical work and teaching, and all thought their clinical work and teaching would change as a result of the course. Furthermore, feedback showed that the overwhelming majority considered the course very well worth the time they had devoted to it.

We wish to thank the following teachers who donated their time and skills in 2012: Professor Owen Dent, Professor Wendy Hu, Dr. Clare Skinner, Dr. Ian McPhee, Professor Bob Cumming, Professor David Isaacs, Dr. Jonathan Page, Professor Michael Field, Professor Geoff Gallop, Associate Professor Margaret Schnitzler, Professor Geoff Tolfer, Professor Michael Nicholas, Professor Heather Jeffery, Ms Karen Garland, Ms Kate Needham RN, Associate Professor Chris Dennis, Associate Professor Tom Hugh, Professor Di Campbell, Evan Kaustron PhD, Professor Paul Seale, Associate Professor Bruno Giuffre, and Associate Professor Anthony Gill, as well as a special thanks to Ms Maggie Drummond and Rebecca Mann.

This course is supported entirely by donors. Without the generous financial support from Mr. Daniel Petre, Dr. Thomas Diep, Dr. Thomas Wenkart, Mr. Geoff Grimish, Ms. Katrina Leslie, Associate Professor Meng Ngou, Dr Tessa Ho, Allier Capital, Việt Nam Airlines Australia, and The Sunway Hotel Hanoi, Việt Nam, we would not have the means to be able to run this course.
2012 MEDICAL ENGLISH COURSE
KERRY GOULSTON, KIM OATES & OWEN DENT

In February and September 2012, a group of Australian academics travelled to Hanoi at their own expense to teach Medical English to between 40 or 50 health-care professionals. As in 2011, the four-day course in February was conducted at Bach Mai Hospital. In September, the program was expanded to include teaching at Thanh Nhan Hospital, which is operated by the Hanoi Department of Health. Much of the teaching entailed role playing, clinical scenarios and group discussions with emphasis on vocabulary, pronunciation, sentence structure and grammar.

The students comprised mostly doctors and also some nurses, medical students, allied health professionals, administrative officers, laboratory technicians and medical engineers. Ages and professional levels among the doctors varied considerably from recent medical graduates to those who graduated some years ago and are now in senior positions. The range of specialties varied widely and included the usual clinical specialties along with radiology, haematology, biochemistry, pathology, dentistry and even traditional medicine. All were hospital-based.

Anonymous evaluation of the program by participants and feedback to the teachers were carried out at the end of each course. Overall, participants agreed that the medical cases and topics covered were most interesting and helped them to improve their understanding of many English words in the medical context. A large majority of participants also agreed that the lecturers and sessions were easy to understand, with one hundred percent in agreement that they would happily recommend the course to their colleagues in the future.

We thank the following teachers for donating their time: Dr Charlie McDonald, Dr Chris Needs, Dr Phillip Yuile, Professor Richard Holloway, Dr Phil Readman, Professor David Isaacs, Professor Trevor Parmenter, A/Professor Chris Pokorny, Professor Allan Cooke, A/Professor Meng Ngu, Ms Natalie Ngu, Mrs Marie Parmentor, Professor Chris Tennant, Mr Geoff Grinwis, and Mr Robin Parkinson.

In February 2013, 20 volunteer teachers will spend a week in Hanoi, again paying their own expenses. This time, classes will also be held for nurses specifically at the request of Professor Hinh, President of Hanoi Medical University.

Aside from scarcity of health resources, infrastructure and staff training are deficient in developing countries such as Viet Nam, resulting in gaps to health program prioritisation and planning. Information regarding deaths in hospitals is vital in identifying key areas that demand medical attention and thereby in improving patient services of hospitals and medical education.

This death data reporting research is aimed at developing and implementing a death reporting system consistent with the World Health Organisation’s International Classification of Diseases (ICD-10) in two of the largest hospitals in Hanoi - Bach Mai Hospital and Viet Duc University Hospital. The research is established to strengthen death reporting mechanisms in both hospitals to allow analysis of the population’s health demographics, identify priority programs for health planning, as well as improving related public health research. On a larger scale, the project has the potential to benefit the Vietnamese government in coming up with a reliable source of information for research and health program planning.

In the first year of the Australian Agency for International Development (AusAID) funded study, the hospital death report (certificate), education manuals, and case studies for training were designed and finalised. This involved extensive consultation with our Vietnamese colleagues and hospital managers.

We have allowed for an intensive training period for the 400 doctors. Training will involve ICD-10 coding and practising how to complete a death certificate. We will also train the key staff who will be doing the data entry in the two Departments of Planning.

AusAID approved Public Service Linkage Program funding for this project. Professor Merrilyn Walton is the chief investigator.

The project team includes Dr Dang Van Duong, a longstanding partner of Hoc Mai Foundation, Dr Jennifer Smith-Merry (Health Sciences, University of Sydney) and Mr Esmond Esguerra as project officer. Dr Huong Giang of Bach Mai Hospital and Dr Haphan Hai An and Dr. Duch Chinh of Viet Duc University Hospital have also joined the research teams and are coordinating activities in their respective hospitals.
The Hoc Mai scholarship came and found me in a beautiful day when I read the announcement about this exchange program, from the principle of Hanoi Medical University. As responding to Prof. Bruce Robinson – the interviewer for scholarship, I considered this program as a chance, not only to study a modern healthcare system like Australia but also to explore its beauty and opening up my friend network over world. The real dream comes true when it is my very first time to go overseas.

Initially, in my thought, the responsibility during program was to observe the way dentists and dental assistants treat their patients, so that it could be useful for my nearly future study. Yet, it was more than expected at least for me. I had chance to work in two famous hospitals: Sydney Dental Hospital and Westmead Centre for Oral Health with very nice staffs and professors. Although they were busy with their patients, however they were still willing to tell me about their work and schedule.

During my stay in Sydney, I was fond of the weather and people living here. Mrs Rhondda Glasson is really appreciate. She made me feel warm and safe when I stayed away from my family. The program does not only bring me a deep view about a modern medical system, but it also builds up my friendship among the other Vietnamese elective students. It would be meaningful and unforgettable in my life.

Four-week time seems to be so short and it is hard to say goodbye to Sydney, to all of my new and nice people in my life. Sincerely, I would like to give my special thanks to Hoc Mai Foundation and all staff members for giving me this opportunity to study and explore Sydney. I also want to extend my appreciation to Dr. Amit Arora for your enthusiasm. You have inspired me so much. Thank you for everything. I hope the friendly relationship between Hoc Mai foundation and Viet Nam may be long lasting forever.

The month that I spent observing and learning at the Royal North Shore hospital was a once-in-a-lifetime experience for me, and one for which I will always be grateful. From the time that I was informed that I had been chosen as a scholarship recipient, I had already formulated in my mind a concrete plan about what I would like to do in Australia and how I sought to achieve it. With the help of all of the friendly Hoc Mai Foundation staff and all the clinical staff at the hospital, I successfully reached the goals that I had set.

Becoming an expert in clinical nutrition has been my life-long dream since I was a child. After getting the scholarship information from my university, I singularly looked forward to this opportunity to broaden my knowledge in this medical field as it is not focussed on in Viet Nam. Recognising this as a very precious opportunity, I did my best to learn as much as possible when I got to Sydney and to ask Ms Rhondda Glasson to place me in the Endocrinology Department as I really wanted to attend a consultation between a dietician and his patients. Thanks to her, I spent an amazing 4 weeks learning about what I am most interested in. Moreover, the warm welcome that I received from the friendly and helpful clinical staff was exceedingly appreciated. I experienced many unforgettable moments in the RNSH thanks to Prof. Greg Fulcher who taught me how the staff organised all the patient’s information as well as how to communicate effectively with them. I would also like to thank Dr Samantha Hocking for teaching me about new treatments for diabetes, and Dr Lucy Ding who taught me a systematic method to physical diagnoses. Of course I would also like to thank the other nice specialists, registrars, and interns with whom I spent time.

After a fantastic month in Sydney, I have obtained so many benefits: from medical knowledge to great friendships to the time I spent travelling around the city. None of this will be forgotten. I was very fortunate to be a scholarship recipient and I am eager to share about these good moments and what I have learnt with my friends who did not have such an opportunity to broaden their hospital experience.

I would like to extend my gratitude to Prof. Bruce Robinson, Ms Rhondda Glasson, Mr Jason Dibbs, Ms Kelly Bird, Mr Martin Crawford, and all the staff members who organised everything for us from the interviews, clinical placements, bank cards, insurance, transportation, accommodation, and so much else. I would also like to thank A/Prof Tuan Vo, Dr Trong, and Dr Phong who interviewed us at our university and who chose us as candidates for this scholarship.

I would also like to take this opportunity to recognise the effectiveness of the Douglas Piper Library. I found many good books there which were invaluable in supporting my clinical studies. The Librarians were always ready to help and they never stopped smiling. Their friendliness encouraged me to stay longer in the library even after the hospital time. I appreciate Ms Hau Nguyen and Ms Agnes who helped me find interesting books and made it easy for me to take them home with me. The library will provide much assistance to all of the medical students studying at the Northern Clinical School.

Finally, with its marvellous landscapes and friendly people I find myself considering Sydney to be my second home.
As human’s life has developed through time, people not only want to communicate and to work with others in their own country, but also to live and to have jobs overseas. Therefore, having a chance to become elective student in Australia is a dream of me and a lot students studying in Hanoi Medical University and also other universities in Viet Nam. From studying and also taking care of my relatives in some hospitals in Viet Nam, I always wonder if there is any difference in other countries. And Australia is one of most ideal destinations I has dreamt to go in order to find the answer for my question.

The day we came to Australia was such a cold and rainy day, and it reminded me about the winter in Hanoi, the capital of Viet Nam. That was the first time I came to foreign country, therefore everything seemed to be new and like many people I thought I would be like a fish out of water before going there. However, the thought about racial discrimination disappeared right away because the life in Australia was very peaceful, people respected each other and there were a lot of cultures in that lovely country. It became more obvious when I came to ward 12D, renal medicine ward, and worked with the team of Dr. Cooper and other consultants from many places in the world. And, thanks to their dedication, I understood and solved my question, although the answer made me very surprised the first time I knew it: Different from Viet Nam, Australian hospitals were much larger and the number of patients were not as much as in Vietnamese hospitals. Not only that, patients who came to public hospitals in Australia did not have to pay any money, but they still got the best treatment from doctors. Moreover, I like the way a team worked in Australia, since it was very effective and modern. Another question: How? And everything had to be solved from its origin and the origin of that was government. Because I am not an expert about medical economy, I couldn’t go through and solve every single detail of my questions. However, I believe that working in Australia in the future may be a great idea for me and a lot of doctors in Viet Nam.

The most important purpose of this course was learning experience, thus I tried to learn as much as possible. Lucky me, I got a wonderful team and I learnt a lot from my team; Dr. Cooper, my supervisor and Dr. Waugh, a consultant of renal department. During four weeks studying with them, they showed me how to communicate with patients, how to respect a patient, how to understand them and how to study medicine with enthusiasm. Of course, spending whole life in hospital is one of the most exhausted careers, however after working and talking with them, I knew that what I really wanted and could do everything to gain it, was medicine, the art and science in life.

Beside the interest in medicine and hospital system, I like to discover Australia with my friends. Sydney is so beautiful with many famous places. Via visiting these places, I understood more about Australia: about history of Australia especially about NSW, about the architecture, the people and so many things that I learnt. During the time in Australia, I enjoyed my trip and had a lot of friends from many nations in the world: Korea, China, India, Germany, Ireland and also Australia, those friends I couldn’t imagine to have if I did not have chance to go there.

I love every minute in Sydney and hope the course could be longer so I could study more and visit more places in Australia. Moreover, I am pretty sure that the time living in Sydney was one of the most wonderful times in my life and the memory will not fly away unless I have Alzheimer’s disease in the future.
I came to Sydney in a freezing rainy day, bringing not only some warm clothes in my suitcase, but also a huge excitement in my mind, starving for experience and medical knowledge. Fortunately, for the rest of the trip, Sydney was so nice to me that it offered me numerous opportunities to achieve both cultural approach and academic goals.

At the moment, snatching a break and looking up for some pieces of information to set up an overview of my memorable elective term, I remember a ninety-eight year-old lady, presented to Emergency Department (ED) due to hypothermia and unusual behaviour: she refused to have breakfast.

My Aged Care team, including a consultant, a registrar, an intern and a medical student, was “paged” and immediately travelled from Ward 11D, our main workplace, to ED for a specialized examination. The first lesson was about communication. Each doctor in Royal North Shore Hospital had his own “page” number which is a considerably effective replacement for cell phones. Therefore, in this working environment, I hardly saw doctors using his smart phone for a personal reason, except for a MIMS consultancy.

In brief, behind this scene is an admirably serious professional attitude.

The patient was then transferred to Ward 12D of Renal Medicine Department. Our team visited her every morning. Moreover, by proficiently collaborating with the other specialized teams, such as Cardiovascular specialists, Renal Medicine, and General Medicine, as well as other staff members, including physiotherapists, occupational therapists, nurses, social workers, and dieticians, we gave our patients our best care. In short, the efficient cooperation among doctors of various levels with different specialties, accompanied by nurses and rehabilitation unit significantly builds up a strong health care delivery. Hence, the key to success was revealed: well-organized team work.

Our old lady recovered slowly. However, her ninety-seven year-old husband insisted the doctors on allowing her to come back home. He was completely sure that he could take care of her, as he had perfectly assumed that responsibility for nearly a decade. This delicate situation demanded a solution of high level rehabilitation and outpatient services, especially, for physically and cognitively impaired elderly people. They consequently received a wide range of assistance at home as well. Thus, the balance between doctors’ charge and patients and their relatives’ desire demonstrates the art of medicine. In addition, the significant roles of rehabilitation, home medical supplies and geriatric aids are unforgettable lessons to me.

Day by day, I joined ward round, examined patients and discussed each case in details with the team. Despite language barrier, I believed that my volume of knowledge extended notably everyday. Furthermore, by careful observation, I understood that no patient was similar to the others; each one had his own history, background and clinical manifestations that called for a particular management.

My Australian favourite scene was an elderly couple whose hair was entirely white, hand in hand walking down the street. That is evidently a noticeable triumph of a strong health care system.

Before leaving Sydney, I would like to thank Hoc Mai Foundation, Northern Clinical School, Royal North Shore Hospital, Aged Care Unit, especially Dr. Sue Ogle, and to all who may concern, for introducing me to a totally different world where I have never lived in.

I have just had an amazing trip to Sydney. Now is the time to go, to continue my medical study in Hanoi with precious Sydney experience in my pocket. The huge enthusiasm still stays alive in my mind, looking forward to a new chapter of my life to begin.
When I won this scholarship, I was so blissful and excited because I knew I would have a chance to study medicine in such a modern country with a high-developed medical system. And I went to Australia with the main goal of learning the most effective clinical medicine teaching methods as I intend to become a lecturer in the future. In fact, I gained more than I had expected.

Once I first arrived at the airport in Sydney, what impressed me was the incredibly cold weather. It froze me to the flesh. Luckily, I was welcome by Ms Rhondda Glasson, which made me very warm from the inside.

My placement was the Pain Management Department. Although there is not such a department as this one in my country, I still found it very interesting. Dr Brooker, my supervisor, was very willing to facilitate everything for me. Thanks to him, I had an opportunity to work with the whole pain team, including pain specialists, fellows, registrars, clinical psychologist, physiotherapist, etc. Each day, some last-year medical students and I followed an alternate team led by a pain specialist doing the ward round in the morning. He was very ready and nice to answer any questions raised by his students. I think this is a very effective teaching method of clinical medicine.

In the afternoon, I usually came to the clinic to observe the patients consult their specialist. On some first days, I was very surprised at the way the specialist handled the patients. One thing which has not been paid much attention in my country. This changes my viewpoint of pain management for my future patients.

Apart from these precious experiences above, particularly my main goal, I also obtained many extra benefits. First of all, I had a chance attending the grand round held every Tuesday which I think very useful for the doctors from this faculty to seek clinical experience from the other ones. Second, I also participated in many active stage 3 lectures held every Friday at the auditorium where the students are taught theoretical medicine. Third, I could see how effectively the Australian medical system runs when studying at the clinic. Whenever the patients have a health problem, they usually come to see a GP. In my experience, the communication of the medical staff is a major problem which is criticized frequently by our public. We all know the great effect of a good contact in treatment. However, since the amount of patients is always overloaded, the only thing we concentrate is how to treat the patient’s disease. And the warm care is something only existing in the theory at school. For this reason, one of my targets was studying how to communicate with the patients effectively. In Australia, whenever the patients asked, they always received a careful explanation with smile. Responsibility, kindness, politeness and sense of humour made a comfortable and friendly environment in the hospital.

I had a chance to attend a handover meeting in my department, Renal Medicine. In the meeting there were many kinds of medical staff taking care of one patient. They are doctors, nurses, physiotherapists and social workers. At first it was quite strange to me. Why are there so many people attending in treatment a patient’s disease? Doctors and nurses are responsible for the treatment. Physiotherapists help the patient with the right exercise to rehabilitate early. Social workers take care of the psychological condition, such as whether the patient suffers from depression because of long hospital stay or who supports them when they are sick… In that way, I was excited when I found that the patient are not only cared about their diseases but also their psychology which plays a very important role in their recovery.

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NGO THI HAI LINH
A PRICELESS EXPERIENCE

Time really flies. It seems like everything just happened yesterday: applying, being interviewed, receiving the scholarship, staying in Sydney for one month and coming back home. But no matter how many times will pass or how many places I will go to, this one month in Sydney is still one of the most unforgettable memories that I’ve ever had.

I still remember how happy I was when I received the scholarship. This was the first time I’ve been abroad so I was really excited, obviously. However approximately a half day sitting on the airplane and another 3 hours to check out the airport made me extremely tired. But when I saw Jason smiling with the Hoc Mài foundation’s greeting board, my tiredness just went away. I was extremely grateful to Rhondda and Colin for their indulgent smiles after I dropped a small gift. In addition, having the chance to talk and share some amazing stories with us. Being able to have this precious opportunity, I am really thankful to Hoc Mài foundation.

The first Monday in Sydney, I met Martin and began my elective course at Royal North Shore Hospital. The hospital is so big and its structure is so complicated that I still get lost after 3 weeks studying there. Fortunately, every time I struggled with finding the way, there would be someone asked if I need help and subsequently showed me where to go. The Hand surgery department-where I practice- was absolutely wonderful. All the staff helped me a lot during my placement. Hand surgery is a brand new and specific subject to me since we don’t have this department in Viêt Nam but Dr. Lawson and Prof. Tonkin did patiently give me easily understanding explanations.

What I learned from this term is not only the new knowledge but also about the good bedside manners which are mandatory to become a good doctor. I saw it through the communications between doctors and patients, the satisfied smiles of each patient when they left the clinic. I realized that it is important to know detailed about the diseases but being able to explain them to patients using lay language is also an essential skill. These interpersonal skills, hopefully, I can practice and achieve them in the last 2 years of my course before becoming a doctor.

Learning is, of course, the main purpose of our term in Sydney but equally important is the discovery of Australia. We have been to the Sydney Opera house - one of the most unique architectures all over the world - and to the central of the city and were surprised by the modern and tall buildings that we’ve never seen. We walked along the coast from Coogee to Bondi Beach, and have been to the Government house, Taronga Zoo, Cockatoo Island and many other places…These are all breath-taking scenes but what impressed me the most was the harmonious relationship between human and nature.

One place that I will never forget is the Greenwich Village accommodation where I lived during my stay in Sydney. Susan and the other receptionists were very friendly; they made us feel like we’re at home. The lovely cooks made real good meals so that we often ordered the second times. We also met many people came from different countries all around the world and many of them became our friends, even though we just met each other for a short time. And I strongly believe that these friendships still exist regardless of geographical distances.

One month is not a long period of time but what I achieved from this duration is priceless. It’s not only the knowledge about Australian health care system, medical education or culture but also about the good behaviour between human and human, especially between doctors and patients. I really appreciate this experience and hope that my achievement will help me to become a good doctor in the future.
so many amazing landscapes and tourist attractions such as Sydney Opera House, the Royal Botanic Garden with many strange big trees, the Taronga Zoo with famous animals like kangaroo, koala bear, platypus …, the Bondi Beach, the Chinese Gardens of friendship… All of them have become a big part of my precious moments here.

In conclusion, I would like to say thank to Học Mại foundation in general, to Professor Bruce Robinson, Mrs Rhondda Glasson, Mr Jason Dibbs in specific. I really appreciate them for giving me and other medical students this wonderful opportunity. I am now more confident not only in clinical skills but also in my English ability. Hopefully, I can use this new knowledge in practicing in Việt Nam hospital and become a good doctor.

Thank you so much for this wonderful experience!

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Thanks Học Mại The Australia Việt Nam Medical Foundation because delighted to extend an invitation to enable me to participate in a 4 week observership in Sydney. I am mentored by Professor Charlie Teo at Prince of Wales Private Hospital. I learned many useful things.

During one month in Prince of Wales Private Hospital, I study in the Operating Room (OR), five days a week with physicians. I also learn how to take the patient into the surgery room, help put them to sleep, position them according to the surgery performed and prep the patient. Once surgery is done, the patient is taken to the Post Anesthesia Care Unit (PACU) Nurse where they will begin their post operative recovery.

Since I had some of nursing experience, I knew what happens to a patient before and after surgery. This helped me learn better and easier then I became comfortable after only several days. I know working in the OR is an ongoing learning experience, and I love the challenge of it.

Coming back to Việt Nam, I will contribute greatly to the retraining other nursing colleagues at our facility, as well as the training for our nursing students on these topic.

I hope to have another opportunity to Sydney and come back soon.

I love Học Mại Foundation!
I love Sydney!
Thank you so much!

Do Thi Thanh Huyen
In the Rehabilitation building in the spinal cord injuries unit, my work, as a physiotherapist, primarily involved devising exercises for patients which they could use to progress their rehabilitation. The medical students rotated through infectious diseases and rehabilitation in the first week, followed by respiratory and emergency medicine then obstetrics and intensive care and finally cardiology. The physiotherapy student and the radiographer were placed in Rehabilitation and Radiology respectively. A week in infectious diseases was really valuable as we saw patients with diseases that are uncommon in Australia such as tetanus. In the Infectious Diseases Intensive Care Unit we saw a patient with rabies which he had contracted from his dog who had bitten him; rabies is pretty rare even in Việt Nam and non-existent in Australia, so it was an invaluable opportunity to observe a patient with a disease that we would otherwise only read about in textbooks.

During our week in the respiratory department we were initially, struck by the sheer number of patients but also of family members on the ward. With only 80 beds for 180 patients, it was not uncommon to see 2-3 patients sharing a single bed and to have patients lying on beds or mats outside rooms. Here, the role of the family was integral to patient care, and we witnessed how they were involved in cleaning, feeding and even carrying patients to and from procedures. Despite the tough conditions and the sheer volume of work, the medical staff were extremely accommodating towards us and involved us in various facets of patient management. Junior doctors and medical students were always willing to show us interesting cases and assist us in taking histories and performing physical examinations. The spectrum of diseases seen allowed us to appreciate the different respiratory disease profiles between our countries.

During our week in Obstetrics and Gynaecology (O&G) there was much to see! The doctors here were very welcoming and enthusiastic to show us around and teach us about O&G. Up on the O&G ward are high risk pregnant patients and women recovering from recent C-sections and deliveries. We also spent a morning in the O&G outpatient clinic at Bach Mai where women had their antenatal check up and ultrasound. We also observed the midwives efficiently bathe and dress the newborn babies before they were returned to their parents. Our time in O&G was very interesting and engaging with lots of different areas of patient care to observe.

We spent an incredibly helpful one week rotation in the ICU department of Bach Mai Hospital under the supervision of Dr. Cuong Mai, a very knowledgeable ICU specialist and a fantastic teacher. Here we learnt the A to Ns of care for ICU patients, a way of ensuring all factors of patient medical care had been attended to, and was also able to assist in performing arterial blood gases and watched several procedures including CPR, tracheostomies, and femoral intravenous catheter insertions. We learnt a lot in this rotation and were grateful for the opportunity.

We were incredibly fortunate to spend two weeks in the large, very busy and renowned Viêt Nam National Heart Institute at Bach Mai Hospital. With generous help from the Vietnamese doctors and medical students, we were able to speak with and examine patients on the wards with a broad range of cardiovascular pathologies, often presenting at more advanced stages than what would be encountered in Australia. We listened to high-grade murmurs in adults with severe valvular heart disease, and saw patients with infective endocarditis, cardiac failure and atherosclerotic disease. We were able to examine infants with Tetralogy of Fallot, children with atrial and ventricular septal defects, and even an elderly patient with a puzzling case of supraventricular tachycardia.

In the Rehabilitation building in the spinal cord injuries unit, my work, as a physiotherapist, primarily involved devising exercises for patients which they could continue to do outside of hospital. I also discussed with the physiotherapists the method and approach of assessment and treatment performed in Australia. Conversely, they informed me of how these respective processes were performed in a typical Viêtnamese hospital with limited equipment and resources. During my placement I was able to learn new skills, which I am sure will be beneficial for my practice in Australia.

Bach Mai Hospital’s Radiology Department caters for approximately 2000 patients per day including X-ray, CT, MRI, Angiovascular Intervention and Ultrasound services. Chief Radiologist, Professor Thieung, encourages all of his staff to learn English, and so each morning the Radiology body improve their skills by presenting a case study in English. Whilst the diseases which came through were similar to the population of Australia (pneumonia, cancer, pleural effusion), the degree of progression was often quite dramatic. The radiologists and technicians (radiographers) were so welcoming and generous with their time, it was an honour to learn from them.
During my stay in Hanoi, Viêt Nam over the past month I have had the opportunity to visit a number of dental clinics and hospitals within Hanoi. My first placement was at the Hanoi Medical University Dental Clinic which is a private clinic run by the clinical tutors of the University. This is where students are allowed to watch and assist their tutors perform dentistry and learn from them how to manage different clinical presentations. It was also where small group teaching sessions were run by the different clinical tutors. I met a number of clinical tutors who guided me during my stay at this clinic including Dr. Tuan, Hieu Hai, Hai and Ngoc. I was also fortunate enough to integrate with the dental students and experience their methods of learning which I found quite different to my experience in Sydney.

After a week or so I was granted access to the Hanoi Medical Hospital, located next door to the University Clinic, where I joined the dental clinic and maxillofacial surgical teams. In the clinic, I studied under the tutelage of Dr Hai and Dr. Ngoc who were keen to show me their different treatment techniques and happily answered all of my questions. In the surgical suites I was guided by Dr Hung and his team who allowed me the opportunity to observe and assist in a number of surgical cases.

One advantage of this scholarship is its ability to partner each student with a mentor who guides them through their visit. My appointed mentor was Dr. Tuan and through him I met many more practitioners who were keen to teach me. It was the formation of these relationships that greatly enhanced my experience of Viêt Nam. For instance, I was invited by a number of my mentors to lunches and dinners and was also invited to visit their private dental clinics to witness the practice of dentistry from a different point of view.

During my studies I was able to observe the different techniques and practices of dentistry in Viêt Nam and compare that to what we are taught in Sydney. It brought to light the financial aspects of dentistry which I had not yet begun to understand as a dental student and it also showed me how resources could be used to their maximum efficiency. I also saw some of the differences in dental specialisation — apart from oral and maxillofacial surgery there is no official specialty program and each dentist is expected to perform and master all fields of dentistry (endodontic, periodontic, prosthodontic, orthodontic etc). However, many dentists choose to focus their time and hone their skills in a particular field, in essence becoming a specialist.

I can't thank Hoc Mãi enough for giving me this opportunity. I am grateful for all the experiences I have been allowed and I encourage all in the years following to take any opportunity they are given to visit Viêt Nam as a student.

Arabella Lindsay-Walker (Dentistry)
As a physiotherapist studying the Master of International Public Health, I continually pondered over what physical rehabilitation is like in low- and middle-income countries. The Học Mãi Foundation Scholarship provided me with the amazing opportunity to have my questions answered about the rehabilitation system in Viêt Nam. I proposed a descriptive study of physical rehabilitation in Northern Viêt Nam. The study was qualitative, involving semi-structured interviews with a sample of rehabilitation physiotherapists, doctors, nurses and patients receiving physical rehabilitation. This study explored how the rehabilitation system functions in Viêt Nam, including a broad range of issues in rehabilitation such as fees, barriers in providing rehabilitation, patient-centred care, the difficulties persons with disabilities face in Viêt Nam and professional development for healthcare professionals.

It seemed like a good time to conduct this study as recently, in 2010, the first comprehensive national law guaranteeing the rights of persons with disabilities was established. It mandates equal participation in society for the disabled through accommodation, access to healthcare, rehabilitation, education, employment, vocational training, cultural services, sports and entertainment, transportation and more. It was estimated that in 2009, the unemployment rate for persons with disabilities was 30%, and almost one third of families with a disabled member live below the poverty line compared to those with no disabled member.

I interviewed people in four health facilities: two public hospitals, Bach Mai and Hanoi Medical University Hospitals, one private international hospital, Vinmec Hospital and one rural rehabilitation centre called Thuy An Rehabilitation Centre. I learnt unique information from each health facility and everywhere I went people were so helpful. The study revealed that there is some frustration with the teaching structure of physiotherapy, as there are only two universities in the country which provide bachelor degrees and the main teachers are doctors, not physiotherapists. Most staff must who work in the public sector work privately after hours to make ends meet and the main determinant of a patient being discharged is if they can afford to continue paying for rehabilitation. Almost all staff stated that they liked working in rehabilitation as they can spend more time with the patients, improve their quality of life and become “more like a friend”.

Hanoi is a beautiful city, full of colour, great and interesting food and above all beautiful people. I enjoyed snails with the staff from Thuy An rehabilitation centre, wonderful pho with the physiotherapists from Bach Mai and even learnt some Viêtnamese with my interpreter! As a lower-middle income country with continual development I can only picture upward movement in the rehabilitation world in Viêt Nam. All staff are eager for more chances to learn and are motivated to do the best job they could for their patients. With the change coming from the government, such as the law for the rights of persons with disabilities and the recent law to enforce helmet wearing on motorbikes, rehabilitation can only improve from here. I am so grateful to The Học Mãi Foundation for giving me such an exceptional opportunity, where I learnt not only about rehabilitation in Viêt Nam but also how to conduct qualitative research, cám ơn!

Emily O’Kearney (MIPH)
AUSTRALIAN STUDENTS IN VIỆT NAM
MILITARY 108 HOSPITAL GROUP REPORT

As the first students from the Học Mãi Foundation to work in the Military 108 Hospital, we were unsure of what to expect. We commenced with mild trepidation, only to be met with overwhelming kindness and generosity. Not only were we welcomed into the team, the tailored uniforms we were given helped us to look the part as well. We feel privileged to have been able to undertake this experience and came away with much more than these few words can express.

Plastics/Trauma Surgery: The team of plastic surgeons had a staff base of roughly 10 surgeons who managed both day and theatre patients and who all presented with a range of conditions from facial trauma—most common, sustained from motorbike accidents, cleft palate and burn scar corrective surgery to that of elective cosmetic surgery. We were surprised at the market for cosmetic surgery, which ranged from blepharoplasty to buttock augmentation.

All care and surgical skill was of great expertise and standard.

Intensive Care Unit: The unit was a general unit, which covered both surgical and medical patients and consisted of 21 beds. Patients presented with conditions ranging from trauma, sepsis, infectious diseases, cardiac and neurological pathology. We remain in awe and deep respect for the resilience, diligence and resourcefulness of the hospital staff.

Melissa Chin and Martin Seneviratne (3rd Year Medical Students)

Cap Cù’s (Emergency Department) was a paced environment, a trait that seems to transcend international borders. Each morning began with a ward meeting, as a large mounted figure of Hồ Chí Minh observed from a corner in the room. On the ward, seemingly endless cases of motor vehicle and workplace injury flooded into the department. The department was, contextually, well resourced and, equipped to meet the critical needs of the patients. The volume and nature of trauma, however, quickly engendered an appreciation for Australian helmet and workplace safety standards. With the barrier of language, it soon became apparent that we would need to rely on alternative means of communication. For the most part, a mutual understanding of healthcare delivery (as well as a warm smile) enabled this. The genuine relationship between members of staff was heartening—a camaraderie that was truly a privilege to be welcomed into.

Suu-Kyi Naidoo (Final Year Nursing Student)

Vien Tim Mach (Heart Institute) was an amazing introduction to Việt Nam’s health care. It was quite a daunting but exciting task heading to a country where my profession is not yet established. The staff became my family across the month and their warmth and generosity was humbling. I was able to see a variety of patients, conditions and treatments. The health care staff were impressive in performing their roles with passion, extreme efficiency and limited resources. I relished all my mutual learning opportunities achieved through supervision, hands-on experience and academic discussion.

David Turner (Final Year Exercise Physiologist Student)

Words cannot express our gratitude toward all involved, especially the Học Mãi Foundation and Military 108 Hospital, for making this invaluable experience possible.
Our time in the National Hospital of Paediatrics (NHP) in Việt Nam was an eye opening experience, providing us with an opportunity, like no other, to learn about healthcare delivery in a foreign setting. Our group consisted of two physiotherapy students, a medical student and a nursing student. This gave us a great chance to learn about the different roles of each profession and how they interact to care for the patient.

From the aspect of physiotherapy, it has become such a critical component of primary health care in Australia that it is difficult to imagine a setting where it doesn’t have the same prominence. At the NHP in Hanoi Việt Nam however, physiotherapy practised by technicians, exists only in the rehabilitation department, predominantly for children with neurological impairments. Unlike in Australia where assessment forms such a critical component of the physiotherapy session, assessment is conducted by the doctors who then prescribed treatment for the technicians to perform. In an environment where resources can be few and far between, you learn to be inventive with what you do have and even more so with what you don’t!

During our time in Việt Nam, we were able to experience the dynamic environment of the emergency department. I remember being amazed by the medical staff’s ability to perform their duties with the high influx of patients. Day one consisted of seeing patients with severe hypoxia, bradycardia, tachycardia, meningitis, and sepsicaemia. Throughout two weeks, patient presentations varied in severity and we were able to observe how the staff performed the required tasks in the midst of ‘organised chaos’. The nurses and doctors never faltered in their effective treatment; they smiled with each other and they took time to explain to us their specific role within their emergency department.

One of the most interesting events that we witnessed at the hospital was the morning presentation. Every Tuesday, Wednesday and Thursday, the doctors from each department would stand up in front of over a hundred other doctors and summarise the events of the department for the following night. It was certainly very different, with multiple departments weighing in their opinions on the case study.

The experience we had was one that we were grateful to be given. The four of us were able to discuss and share our experiences on the way home from what was for everyone a busy day, each day. We were able to debrief and discuss our experience together. We all, as a multidisciplinary team, were able to learn from each other, furthering our clinical and cultural understanding. We hope to be able to apply what we learnt over the four weeks in Hanoi, here in Australia and in turn we hope that we shared our knowledge and experience, with our newfound friends in Việt Nam.

Leigh Hobday (Physiotherapy)
Stephen Do (Stage 2 Medicine)
Travis Brown (Nursing)
Kirandeep Sahota (Physiotherapy)
AUSTRALIAN STUDENTS IN VIỆT NAM
VIET DUC MULTIDISCIPLINARY GROUP REPORT

Paediatric Surgery
We found the paediatric surgery department to be incredibly warm and welcoming to us, going well out of their way to explain complex cases and procedures. Professor Bích (Head of Department) standard daily greeting of “Good morning students, we have many interesting cases today” showed an enthusiasm for medicine which was contagious. We observed a large number of congenital malformations including rare abdominal wall defects, childhood tumours, cleft lips and palates, and a range of urological, renal and gastrointestinal defects, in patients ranging from adolescents to neonates. The willingness of the department to teach, combined with the friendly nature of Vietnamese people, ensured it was a wonderful experience for us, and one for which we are very grateful to have had.

Emergency Department
During our placement in Viet Duc’s ED, we witnessed many patients suffering from traumatic brain injury and multiple fractures. The Vietnamese nursing and medical staff were calm and skilled in their management of critically ill trauma patients, assessing and treating them rapidly on arrival.

Despite the language barriers the nursing and medical staff often overcame these to communicate with and involve us and we were very grateful to be included in this dedicated and welcoming team.

Critical Care
Being involved in the care of trauma patients within the Intensive Care department was an excellent experience. The anaesthesiologists were very willing to discuss aspects of physiology and demonstrate assessment modalities such as the transcranial Doppler, LICOX monitoring, echocardiographs and ultrasound.

The staff enjoyed practising their English and took us out to lunch almost every day! The placement was...
Upon first arriving in Ha Noi, I was immediately fascinated by the city’s throbbing vitality and frantic pace. After slowly but surely becoming accustomed to the city’s way of life, I was able to gain an excellent insight into the lifestyle and cultural identity of the Viêtnamese people.

It was with a heavy heart that I left Ha Noi, however I was filled with excitement and anticipation for my elective placement at Hue University Hospital. Dr Nguyen Thanh Minh greeted me at the airport with a welcoming smile and firm handshake that made all my fears about being alone in Hue disappear. He proceeded to spoil me rotten and make me feel as welcome as one can feel so far away from home. On the drive in to Hue I was struck by the stark contrast between it and Ha Noi – the roads had actual lanes, for one thing! Hue is a much slower-paced, quieter and less congested city than Ha Noi; I can’t help but liken the comparison to that of the difference between Sydney and Wollongong, my hometown.

My time in Hue presented numerous excellent learning opportunities to me. I accompanied Dr Minh on his daily tasks around the hospital, such as: performing neurosurgical procedures, visiting patients post-operatively, having consultations with various teams in ICU and emergency and working in Hue University Hospital’s ‘Gamma Knife Centre’.

Despite the fact that I only spent a few weeks in Hue, I feel that I have gained a significant amount of knowledge in the field of neurosurgery. For example, I was able to observe many clinical signs and practice interpreting imaging studies, as well as learning about the clinical management of traumatic brain injury.

Edward Chan (Stage 1 Medical)  
Harry Crane (Stage 2 Medical)  
Tim Duong (Stage 2 Medical)  
Charlie Meares (Stage 2 Medical)  
Tessa Morgan (Stage 2 Medical)  
Myfanwy Pennels (Nursing)  
Najlah Rahme (Nursing)

HUE UNIVERSITY HOSPITAL

The hospitality of the Viêtnamese doctors and nurses was something we consistently saw throughout our experience, with many staff inviting us to their homes. We all appreciated being welcomed into the teams during our placement and are grateful to the medical and nursing staff that took the time to teach us & make the experience so memorable!

Oh, and we got filmed for a news story, too.

Dr Minh spends most of his time working in the Gamma Knife Centre; a centre for planning and delivering a special form of radiotherapy used mostly for brain pathologies such as brain tumours. It is employed where surgical intervention is difficult due to either the nature or location of the pathology – for example, brain tumours of structures around the brainstem that are generally too deep to treat surgically. Hue University Hospital does not have the facilities to perform the same level of neurosurgery as is seen in Australian hospitals, which makes the Gamma Knife Centre all the more pertinent.

I am so thankful to have been under the kind and eager supervision of Dr Minh! This is an excellent opportunity that I am so grateful to the Hoc Mai Foundation for granting me.

Patrick Kroek (Stage 3 Medical)
The Hoc Mài - The Australia Viêt Nam Medical Foundation recognises the importance and benefit of reviewing its adoption and alignment with governance principles and provides the following report.

**FOUNDATION GOVERNANCE STATEMENT FOR THE YEAR 2012**

**PRINCIPLE 1 – LAY SOLID FOUNDATIONS FOR MANAGEMENT AND OVERSIGHT**

**NATURE OF THE ENTITY**
The Hoc Mài - The Australia Viêt Nam Medical Foundation is a part of the University of Sydney ABN 15211513464 and not separately incorporated under a State or Commonwealth Act. The Foundation is required to gain prior approval for its fundraising activities from the appropriate University delegate. The Foundation’s activities are not-for-profit and covered by the DGR status of the University of Sydney. The University is exempted from the requirement to hold an Authority to Fundraise and obligations upon holders of such an authority but is still required to comply with the balance of provisions of the Charitable Fundraising Act.

**ROLES OF BOARD/COUNCIL AND MANAGEMENT**
The Foundation operates under the authority of the Senate of the University of Sydney, as approved in 2000 and has no powers of delegation. The Foundation conducts its affairs pursuant to the Foundation Rules and the relevant policies of the University. The Foundation had its annual fundraising plan approved and was able to meet its objectives.

**PRINCIPLE 2 – STRUCTURE OF THE COUNCIL TO ADD VALUE**

**PATRON:**
Her Excellency, Professor Marie Bashir AC, CVO

**THE COUNCIL OF THE FOUNDATION IN 2012 CONSISTED OF THE FOLLOWING MEMBERS:**

- **Mr Alfred Attard**
  Qualifications and experience: Director, Jetz Homes & Developments Pty Ltd
  Current Term of Appointment ongoing from 2006
  Special responsibilities: Council Member
  Number of meetings attended 5; eligible to attend 5

- **Ms Audrey Blunden**
  Qualifications and experience: Lecturer and International Advisor, Faculty of Law, UNSW
  Current Term of Appointment ongoing from 2009
  Special responsibilities: Council Member
  Number of meetings attended 4; eligible to attend 5

- **Rear Admiral Ken Doolan AO RAN (Rtd)**
  Qualifications and experience: National President, The Returned and Services League of Australia
  Current Term of Appointment: ongoing from 2010
  Special responsibilities: Council Member
  Number of meetings attended 4; eligible to attend 5

- **Professor Elizabeth Elliott AM**
  Qualifications and experience: Professor of Paediatrics and Child Health, University of Sydney and Consultant Paediatrician, The Children’s Hospital at Westmead
  Current Term of Appointment: Since 2009
  Special responsibilities: Council Member
  Number of meetings attended 5; eligible to attend 5

- **Mr Ross Gavin**
  Qualifications and experience: Partner, PricewaterhouseCoopers, Sydney (Rtd)
  Current Term of Appointment: ongoing from 2005
  Special responsibilities: Treasurer
  Number of meetings attended 4; eligible to attend 5

- **Emeritus Professor Kerry Goulston AO**
  Qualifications and experience: Gastroenterologist; Former Associate Dean, Northern Clinical School, University of Sydney
  Current Term of Appointment: since 2001
  Special responsibilities: Deputy Chair
  Number of meetings attended 3; eligible to attend 5

- **Mr Ken Hopkins**
  Qualifications and experience: Fellow of the Institute of Chartered Accountants, practicing chartered accountant for over 30 years
  Current Term of Appointment: since 2006
  Special responsibilities: Council Member
  Number of meetings attended 3; eligible to attend 5

- **The Hon Mr Craig Knowles**
  Qualifications and experience: Former Senior Minister of NSW Parliament
  Current Term of Appointment: since 2004
  Special responsibilities: Council Member
  Number of meetings attended 2; eligible to attend 5

- **Mr Michael Mann AM**
  Qualifications and experience: Managing Director (Asia-Pacific) - Laureate Education Asia Inc; The Former Australian Ambassador to Viet Nam; The Founding President of Royal Melbourne Institute of Technology’s University in Viet Nam
  Current Term of Appointment: since 2001
  Special responsibilities: Council Member
  Number of meetings attended 1; eligible to attend 5 (resides in Thailand since 2010)

- **Dr Thuy Mai - Viêt**
  Qualifications and experience: President and CEO - University Preparation College
  Current Term of Appointment: since 2001
  Special responsibilities: Council Member
  Number of meetings attended 1; eligible to attend 5

- **The Hon Mrs Jeannette McHugh**
  Qualifications and experience: Former Member - Federal Parliament
  Current Term of Appointment: since 2003
  Special responsibilities: Council Member
  Number of meetings attended 3; eligible to attend 5

- **Dr Ian McPhee**
  Qualifications and experience: Dr Ian McPhee MB BS FANZCA, Anaesthetist
  The Tweed and Murwillumbah Hospitals, Clinical Senior Lecturer, Sydney Medical School
  Current Term of Appointment: since 2012
  Special responsibilities: Council Member
  Number of meetings attended 3; eligible to attend 4

- **Professor Jonathan Morris**
  Qualifications and experience: Associate Dean and Head, Northern Clinical School, University of Sydney; Professor of Obstetrics and Gynaecology, University of Sydney
  Current Term of Appointment: since 2005
  Special responsibilities: Council Member; University Officer (Foundations)
  Number of meetings attended 3; eligible to attend 5

- **Mr Tom Moul**
  Qualifications and experience: Has worked in advertising and marketing for 35 years; Director, Walker Moul Pty Ltd. Outside of work; has been involved with various industry organisations; a board director of Foodbank Australia and The Bell Shakespeare Company; currently a
Council members were elected and co-opted at the Foundation’s AGM on 6 March 2012. There is not a separate nomination committee of Council. The full Council resolves on nominations for co-opting of members to fill vacancies outside of the process of election at the AGM. There was not a performance evaluation of the Council undertaken in the reporting period.

**PRINCIPLE 3 – PROMOTE ETHICAL AND RESPONSIBLE DECISION-MAKING**

Council members have been provided with the University of Sydney Foundation Governance Guide, Foundation Rules, Code of Conduct, External Interests Policy and the Occupational Health & Safety Policy. The Code of Conduct, External Interests Policy and the Occupational Health & Safety Policy are also available on the University’s public website as are other relevant University policies regarding gift acceptance, harassment, grievance procedures and other related policies.

**PRINCIPLE 4 – SAFEGUARD INTEGRITY IN FINANCIAL REPORTING**

The annual accounts of the Foundation are prepared by the financial staff of the University, signed off by Finance Director, Faculties of Health, University of Sydney and included in this Annual Report to the Senate. The Foundation is part of the University and therefore does not have its own audit sub-committee, The University is audited by the Audit Office of NSW.

The Foundation undertook the following fundraising appeals1 during 2012:

And in conducting those appeals the Foundation took all reasonable steps to ensure that commissions paid or payable to any person as part of a fundraising appeal did not exceed one-third of the gross money obtained by that person in the appeal2 and appropriate particulars of all items of gross income received or receivable, all items of expenditure incurred, including the application or disposition of any income obtained from the appeal and particulars of those transactions to which they related were recorded in the minutes of the Foundation.3

**PRINCIPLE 5 – MAKE TIMELY AND BALANCED DISCLOSURE**

The Foundation complied with the reporting and disclosure requirements of the Senate. These include an annual budget and this Annual Report.

Members and Council have been made aware of the processes for disclosure pursuant to the Code of Conduct, External Interests policy, which include protected disclosure to the ICAC, the Ombudsman or the Auditor General.

**PRINCIPLE 6 – RESPECT THE RIGHTS OF SHAREHOLDERS, MEMBERS, STAFF, VOLUNTEERS, CLIENTS, & OTHER STAKEHOLDERS**

The Foundation Council and/or membership consists of members of the community, industry bodies and the University whose input is invited via the Annual General Meeting and Council meetings of the Foundation. Numerous forums/mechanisms have been held during the year to involve stakeholders in election of the Council, activities of the foundation or other stakeholder participation.

Under the Charitable Fundraising Act, the University may be questioned about any appeal on details of the purpose of the appeal such as the appeal target, objectives, distribution of proceeds, etc and the process to provide answers. During the year the Foundation published information on its website and outlines those activities in this annual report. Other enquiries may have been made to other parts of the University.

**PRINCIPLE 7 – RECOGNISE AND MANAGE RISK**

The Foundation recognises its activities within University premises or other premises require risks such as health and safety, environmental protection, privacy, trade practices, and compliance with the Charitable Fundraising Act to be considered and managed. The Foundation has managed these risks during the year by ensuring that all members were informed of the appropriate policies.

**PRINCIPLE 8 – REMUNERATE FAIRLY AND RESPONSIBLY**

No member of a Council is entitled to receive any remuneration for acting in that capacity except reasonable remuneration on a basis which has first been approved in writing by the University Officer (Foundations).

Members of the Foundation Council may be reimbursed for reasonable expenses after written approval of the University Officer (Foundations). Any such instances are recorded in the minutes of the Council.

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1 SEE S5 CHARITABLE FUNDRAISING ACT 1991 (NSW)
2 REG 9(6) CHARITABLE FUNDRAISING REGULATION 2008
3 SEE S22(2)(B) CHARITABLE FUNDRAISING ACT 1991 (NSW)
I am pleased to report on the financial affairs of the Foundation for the year ended 31 December 2012. The accounting records of the Foundation are maintained by the University of Sydney, and its accounts are drawn up annually in accordance with the University’s accounting policies. The results of the Foundation for the year are set out in the Income Statement while the financial position at 31 December is summarised in the Balance Sheet, both of which are included in this Annual Report.

The accounts disclose a deficit of $150,000, based on revenues of $794,000. The principal sources of revenue were grants and donations, of which the most significant items were from AusAid, which once again allowed the Foundation to increase the number of Vietnamese scholars that could be hosted in Australia. Other grants and donations, together with funds brought forward from prior years, financed tours by Australian medical students to Vietnam on scholarship programs and funded a variety of other programs which met the objectives of the Foundation. We are grateful for the generous support of our donors who have continued to provide financial assistance over a number of years.

At year-end, the Foundation had accumulated funds of $473,000, which together with the revenue to be derived during 2013, will provide the resources to allow the Foundation to finance its activities for the forthcoming year.

Ross Gavin
TREASURER

<table>
<thead>
<tr>
<th></th>
<th>31 December 2012</th>
<th>31 December 2011</th>
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</thead>
<tbody>
<tr>
<td><strong>INCOME</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Grants</td>
<td>680,419</td>
<td>650,155</td>
</tr>
<tr>
<td>Scholarships, Donations &amp; Requests</td>
<td>82,457</td>
<td>188,190</td>
</tr>
<tr>
<td>Business &amp; Investment Income</td>
<td>6,828</td>
<td>20,062</td>
</tr>
<tr>
<td>Internal &amp; Other Income</td>
<td>24,699</td>
<td>18,608</td>
</tr>
<tr>
<td><strong>Total Income</strong></td>
<td><strong>794,340</strong></td>
<td><strong>877,015</strong></td>
</tr>
<tr>
<td><strong>EXPENDITURE</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Salaries</td>
<td>127,523</td>
<td>92,313</td>
</tr>
<tr>
<td>Consumables</td>
<td>23,492</td>
<td>27,192</td>
</tr>
<tr>
<td>Equipment Repairs / Maintenance</td>
<td>6,623</td>
<td>1,098</td>
</tr>
<tr>
<td>Services and Utilities</td>
<td>43,607</td>
<td>36,008</td>
</tr>
<tr>
<td>Travel and Conferences</td>
<td>77,500</td>
<td>102,557</td>
</tr>
<tr>
<td>Contribution to External Organisations &amp; Student Scholarships</td>
<td>487,786</td>
<td>507,014</td>
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<tr>
<td>Other Expenses</td>
<td>42,659</td>
<td>40,430</td>
</tr>
<tr>
<td><strong>Total Expenditure</strong></td>
<td><strong>809,190</strong></td>
<td><strong>806,612</strong></td>
</tr>
<tr>
<td>Surplus</td>
<td>(14,850)</td>
<td>70,403</td>
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</tbody>
</table>

**Accumulated Funds as at 1 January**

<p>| | |</p>
<table>
<thead>
<tr>
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<tbody>
<tr>
<td>487,466</td>
<td>417,062</td>
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</table>

**TOTAL ACCUMULATED FUNDS**

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<thead>
<tr>
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<tbody>
<tr>
<td>472,616</td>
<td>487,466</td>
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</tbody>
</table>
### Balance Sheet as at 31 December 2012

<table>
<thead>
<tr>
<th></th>
<th>31 December 2012</th>
<th>31 December 2011</th>
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<tbody>
<tr>
<td></td>
<td>$</td>
<td>$</td>
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<tr>
<td><strong>ASSETS</strong></td>
<td></td>
<td></td>
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<tr>
<td><strong>Current Assets</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Imprest Account</td>
<td>2,000</td>
<td>2,000</td>
</tr>
<tr>
<td>Funds Participating in University Pool Interest</td>
<td>470,616</td>
<td>480,466</td>
</tr>
<tr>
<td><strong>Total Current Assets</strong></td>
<td>472,616</td>
<td>482,466</td>
</tr>
<tr>
<td><strong>Total Assets</strong></td>
<td>472,616</td>
<td>482,466</td>
</tr>
<tr>
<td><strong>NET ASSETS</strong></td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>472,616</td>
<td>482,466</td>
</tr>
<tr>
<td><strong>EQUITY</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Accumulated Funds</td>
<td>472,616</td>
<td>482,466</td>
</tr>
<tr>
<td><strong>TOTAL EQUITY</strong></td>
<td>472,616</td>
<td>482,466</td>
</tr>
</tbody>
</table>

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**Statement of Significant Accounting Policies**

(a) These financial statements are general purpose financial statements that have been prepared on an accrual basis.

(b) Income tax is not applicable to activities of the Foundation.

(c) All fixed assets are expensed in the year of purchase.

(d) Some comparative items have been reclassified to conform to the current year's presentation. In the 2011 Income Statement, an amount of $342,540 has been reclassified from "Travel and Conferences" to "Contribution to External Organisations & Student Scholarships" to properly reflect travel costs incurred by students and volunteers. Administration travel expenses of the Foundation are shown in "Travel and Conferences".

I certify that the Income Statement and Balance Sheet of the Foundation have been prepared in accordance with the University's accounting practices and procedures. These Foundation accounts form part of The University of Sydney's accounts which are audited by the Auditor-General, New South Wales.

Sukumar Narayanan
Acting Finance Director
Facilities of Health
12 February 2013
HỌC MÃI BOARD OF COUNCIL MEMBERS

Patron
Her Excellency, Professor Marie Bashir AC, CVO
Governor of New South Wales

Chair
Professor Bruce Robinson
Dean
Sydney Medical School
University of Sydney

Council Members
Mr Alfred Attard
Director
Jetz Homes and Developments Pty Ltd

Ms Audrey Blunden
Lecturer and International Advisor
Faculty of Law
UNSW

Rear Admiral Ken Doolan AO RAN (Rtd)
National President
The Returned and Services League of Australia

Professor Elizabeth Elliott AM
Professor of Paediatrics and Child Health
University of Sydney and Consultant Paediatrician
The Children’s Hospital at Westmead

Mr Ross Gavin
Partner
PricewaterhouseCoopers, Sydney (Rtd)

Emeritus Professor Kerry Goulston AO
Gastroenterologist
Former Associate Dean
Northern Clinical School
University of Sydney

Mr Ken Hopkins
Fellow of the Institute of Chartered Accountants

The Hon Mr Craig Knowles
Former Senior Minister of NSW Parliament

Mr Michael Mann AM
Managing Director (Asia-Pacific)
Laureate Education Asia Inc
The Former Australian Ambassador to Việt Nam

Dr Thuy Mai - Viet
President and CEO
University Preparation College

The Hon Mrs Jeannette McHugh
Former Member
Federal Parliament

Dr Ian McPhee
Anaesthetist
Northern Clinical School
The Tweed and Murwillumbah Hospitals

Professor Jonathan Morris
Associate Dean and Head
Northern Clinical School
University of Sydney
Professor of Obstetrics and Gynaecology
University of Sydney

Mr Tom Moulth
CEO
Walker Moulth

Ms Nancy Dolan BA LL B (Hons)
Honorary Fellow of Sydney Medical School
University of Sydney
Member of St James Ethics Centre & Australian Institute of Company Directors

The Hon Mr Tom Uren AO
Former Member
Federal Parliament

Honorary
Ambassador Mr Hoang Vinh Thanh
Ambassador
Socialist Republic of Việt Nam

Consul General Mr Mai Phuoc Dung
Consul General
Socialist Republic of Việt Nam, Sydney

Học Mãi Foundation Staff

Rhondda Glasson
Executive Officer

A/Professor Dr Dang Van Duong
Coordinator – Việt Nam

Mr Jason Dibbs
(P’T 3 days per week)
Project and Administration Officer

Mr Esmond Esguerra
(P’T 2 days per week)
Project Officer

Ms Rebecca Mann
(P’T 2 days per week)
Project Officer