



HIANZ-Health Information
Association of NZ



Date	Tuesday 29 November 2011
Time:	8.30am to 4.30pm
Venue:	Level 12 Ward Support Block, Wellington Hospital
Chairperson	Liz McLean

AGENDA – CLINICAL CODING

Time	Workshop Title	Presenter
8.30 -9am	Tea and coffee HIANZ welcome	
9am -10.15am	Training and Regional Education Demonstration of e-learning tool for coding education	Andrew Wooding (Auckland DHB)
10.15-10.45am	Morning Tea	
10.45am to 12pm	Internal Auditing – achieving a standard tool and national programme	Shona Trubshaw (Counties/Manukau DHB) with Andrew Wooding (Auckland DHB), and Nicky Williams (Waikato DHB)
12-1pm	Lunch	
1 – 2.30pm	Progression Criteria and career pathway for Clinical coders	Patsy MacAulay (Waikato DHB)
2.30-3pm	Afternoon Tea	
3 -3.30pm	Any questions? Where to next?	
3.30pm	HIANZ AGM	Chris Sorenson (President of HIANZ)



Date	Wednesday 30 November 2011
Time:	8.30am to 4.30pm
Venue:	Level 12 Ward Support Block, Wellington Hospital
Chairperson	Jan Wigmore

AGENDA - MEDICAL RECORDS

Time	Workshop Title	Presenter
8.30 -9am	Tea and coffee HIANZ welcome	
9am -10.15am	Disaster Experience and Disaster Planning	Karen Comber (Canterbury DHB) Jan Wigmore (Capital & Coast DHB)
10.15 -10.45am	Morning Tea	
10.45am to 12pm	Career Pathways for Medical Records - Information and Records Management Skills and Competencies	Kerri Siatiras Director SWIM Ltd
12-1pm	Lunch	
1- 2.15pm	Quality improvement planning. Adapting processes as the electronic record improves.	Penny Sanderson (Bay of Plenty DHB)
2.15 – 2.45pm	Afternoon Tea	
2.45 -3.30pm	Working in an electronic world – Auckland’s experience	Mary Thompson (Auckland DHB)
3.30pm -4pm	Any questions? Where to next? <i>Privacy Commission?</i>	



HEALTH INFORMATION ASSOCIATION OF NEW ZEALAND
Clinical Coding/Medical Records Forum
REGISTRATION
29 and 30 November 2011
Level 12 Ward Support Block, Wellington Hospital

Your Name: _____

Organisation: _____

Your role within your organisation _____

What name would you prefer on your name badge?

Postal Address: _____

Email address: _____

Payment:

One day **\$60** or 2 Days **\$100** \$.....

Please circle: Day one Day two Both days

(Do you require a receipt? **(Please tick)** No Yes

Do you have any special dietary requirements? No Yes

If yes, please specify _____

Please send your registration to: labelled 'HIANZ Registration'.
Penny Sanderson, Regional Clerical & Health Records Manager
Bay of Plenty District Health Board, Private Bag 12024, Tauranga 3143
Cheques to be made out to Health Information Association of New Zealand

Any further queries about the location and programme please contact patsy.macaulay@waikatodhb.health.nz

For Office Use Only:

Date received: Cheque No:

Amount: Receipt No: