



The furthest corner.  
**The finest care.**



**RFDS Central Operations has advanced its primary and preventative health care services to equal services offered by any metropolitan GP practice, and has gained industry accreditation to prove it.**



General Practice



E-Health



Chronic Disease  
Management



Mental Health



Oral Health



Maternal and Child  
Health



Remote Area Nurses



Aeromedical



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## OUR STORY >

The Royal Flying Doctor Service of Australia (RFDS) takes the finest care to the furthest corners of our land.

Using the latest in aviation, medical and communications technology, the RFDS delivers 24-hour emergency aeromedical and essential primary health care services to people who live, work and travel throughout Australia.

Established in 1928 by the Reverend John Flynn, the RFDS has grown into the largest and most comprehensive aeromedical organisation in the world.

Nationally, our services are delivered via a fleet of 67 aircraft, through the operation of 24 aeromedical bases and six remote primary health facilities.

Today, the RFDS attends to more than 280,000 patients across Australia every year – equivalent to one person every two minutes.

Services are delivered on a day-to-day basis by six RFDS operating sections – Central Operations, Western Operations, Queensland Section, South Eastern Section, Tasmania Section and Victoria Section.

RFDS Central Operations began in 1939 and is responsible for delivering 24/7 emergency aeromedical and essential primary health care services throughout South Australia and the southern half of the Northern Territory.

It operates three aeromedical bases located in Adelaide, Port Augusta and Alice Springs, as well as three primary health care facilities in Marree, Andamooka and Marla in outback South Australia.

The RFDS is a not-for-profit organisation. While supported by Commonwealth, State and Territory governments, the RFDS depends on bequests, fundraising and donations to bridge the gap in operational funding and to finance its capital-raising program for replacement aircraft, medical equipment and other major capital initiatives.





### **Our Vision >**

A mantle of health care services for improving and saving lives in rural, remote and regional Australia.

### **Our Mission >**


Providing excellence in aeromedical and primary health care across Australia.

### **Our Values >**

- > Care & Respect
- > Reliable & Dependable
- > Safety & Quality
- > Socially & Ethically Responsible
- > Collaboration
- > Innovation



## CHAIRMAN'S REPORT >



It has been another year of major fundraising and planning allowing for the investment and development of RFDS Central Operations as we strive to provide the finest care from one coast to another – for all who live, work and travel in between.

Our new, world-class Adelaide Base was officially opened on 20 October 2016 and then, just three months later, we announced the expansion of our footprint into the Top End with the pending construction of our own aeromedical base at Darwin Airport.

It was fitting that our long-serving and immediate past Chairman, David Hills, performed the official duties at the opening of the new Adelaide Base on behalf of the community, our family of loyal donors and supporters who enable us to achieve our goals and invest for the future.

A decade as Chairman, David's contribution has been one of selfless commitment of time, of spirit and philanthropy which on many occasions has been carried out with anonymity. On behalf of all of us, thank you David for your leadership of our Board, and for your continued support and encouragement.

The RFDS has been evacuating patients from Central Australia and the Kimberley region to Royal Darwin Hospital for almost 80 years, utilising a combination of hangar sub-lease

and shared access arrangements, but until now have not had a permanent presence in Darwin.

Due for completion in September 2017, the new Darwin Base will enable us to fulfil our strategic goal of providing the finest care throughout the entire north-south corridor of South Australia and the Northern Territory.

Amid challenges, we have not wavered from our commitment to enhance the quality of health services – primary care and aeromedical – to the highest level of safety and security for our patients, staff and, equally, our service-delivery partners.

We continue to focus on our experience, leadership and innovation to achieve our quality and safety targets, whilst maintaining a determined focus on operational efficiency and financial responsibility for all of our stakeholders, government funders and donors alike.

These principles extend to the investment of funds in important capital initiatives such as the purchase of three new 4WD emergency ambulances for our Remote Area Nurse (RAN) outposts at Andamooka, Marla and Marree in

outback SA. Equipped and combined with personal security technologies, these new ambulances align with our additional investment in staff resourcing and operational procedures which support a dual-nurse model of care in isolated communities.

Our focus includes the external review – and acceptance of key recommendations – to evolve the structure and resourcing of our primary health care service model delivered from our Port Augusta Base, again at significant investment by the organisation to remain relevant and provide the quality and standards of primary health care equal to any metropolitan GP service.

We look ahead to further advancements in our mental health and other primary health care initiatives and programs through funded partnerships with Country SA Primary Health Network over the coming year.

I commend to you the case studies published later in this report (pages 16-27) outlining some of these significant advancements of our service delivery, and congratulate the actions

>The Port Augusta primary health care team arrive at Bulgunnia Station, via Tarcoola, SA, for a regular fly-in GP health clinic.





## The new Darwin Base will enable us to fulfil our strategic goal of providing the finest care throughout the entire north-south corridor of South Australia and the Northern Territory.

of our management and staff who have embraced these and the many more priorities set out in our Strategic Plan across five over-arching key goals:

- > Service Delivery – optimising patient outcomes;
- > Our People – growing and developing our staff;
- > Reputation – expanding our reach and relevance;
- > Financial Security – ensuring our long-term sustainability; and
- > Future Development – expanding with relevance in areas of need.

We will continue to negotiate through our Federation Office with the Federal Government on the renewal of the next four-year Commonwealth Funding Agreement (effective 1 July 2018).

Our position will focus not only on a sustainable funding model reflecting the true cost of 24/7 availability of emergency aeromedical and primary health care services to remote Australians, but also a commitment to the provision of capable and reliable public infrastructure such as the NBN to enable adoption of new and emerging

technologies that will help deliver more cost-efficient and enhanced health care.

On 30 June 2016 we proudly took delivery of VH-FXZ ('Zulu') – the 1500th Pilatus PC-12 manufactured – and followed the delivery of VH-FXN ('November') and VH-FXW ('Whiskey') in July and October, respectively, to complete our latest round of aircraft replacement until the Pilatus PC-24 Jet arrives in late 2018.

It was indeed a great honour to assist with the commissioning of 'November' alongside the Federal Assistant Minister for Health, Dr David Gillespie, and later unveiling the badging of the aircraft with Senex Energy Managing Director, Ian Davies, to mark the renewal of Senex's Major Sponsorship of RFDs Central Operations.

We experienced another successful year of fundraising, thanks to our hard working team and the unwavering support of our corporate and community partners, bequestors, donors and volunteers who share our vision for equality of health care no matter where you live, work and play in our vast land.

We still have so much more to do, and I look forward to continue working with my fellow Board Members, our CEO, John Lynch, and all management and staff, to ensure we can continue to deliver the finest care to the furthest corners.

**Loretta Reynolds**  
Chairman



## CHIEF EXECUTIVE OFFICER'S REPORT >

Access to equality of health care services remains at the forefront of everything we do, and I am delighted to report that RFDS Central Operations has delivered more over the past year for the people of South Australia and the Northern Territory.

Compared to the previous year, in 2016-17 our operational and administration teams have, collectively, provided:

- > 3 per cent more aeromedical evacuations;
- > 20pc more primary health consultations;
- > 41pc more immunisations in remote areas;
- > 15pc more mental health consultations; and
- > 20pc more telehealth consultations.

Not only have we touched and improved the lives of more patients through our emergency aeromedical and integrated primary health care services in rural and remote communities, but we have done so in a cost-efficient manner whilst maintaining our safety and quality standards:

- > efficiently – our responsibility to our government funders and donors;
- > safely – our responsibility to our staff and service-delivery partners; and
- > quality – our responsibility to our patients, the people we ultimately serve, and their families.

This has been achieved by strategic review of our service delivery models, our on-going investment in equipment and technology and, above all, the leadership and dedication of staff to embrace change and drive the evolution of our service.

The advancements in remote primary and preventative health care achieved by the team at our Port Augusta Base – and now fully integrated with our remote nurse clinics at Andamooka, Marla and Marree – is just one example.

We applaud their efforts for delivery of best practice primary health care – equal to that offered by any GP clinic in the city – which have been duly recognised by our service-delivery partners and funders.

I am also very pleased to confirm new funding commitments from the Country SA Primary Health Network (PHN) for us to employ additional community health nurses to advance our Port Augusta Primary Health Care Service, including:

- > a community nurse to 'sweep' our *Best Practice* electronic medical records database to identify patients who have missing data, remain outstanding on medical reviews and identify those at risk of chronic disease such as cardiovascular disease.
- > a mental health nurse to immerse full-time with the primary care team and address this service gap – treatment, referral and prevention – amongst our most remote stakeholders.

We are also fortunate to have a similar partnership with the Northern Territory PHN to continue delivering our Mental Health Services in Rural and Regional Australia (MHSRRA) Program in remote communities of Central Australia, again

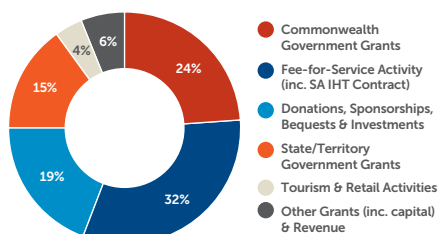
where the need is apparent and our activity continues to grow.

We entered the second trimester of our nine-year contract for fixed-wing inter-hospital transfer (IHT) services with the SA Government, managed by and delivered in partnership with the SA Ambulance Service. We continue to exceed all performance metrics set out in this contract, and maintain the most cost-efficient model for the intra- and interstate transport of patients within our vast hospital network.

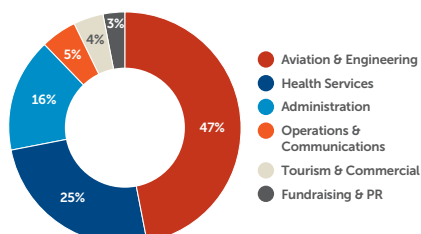
This promise of patient-focused services has only been strengthened by the construction and transition to our new Adelaide Base on 8 September 2016. It was indeed a major milestone in our long history when a patient, taken into our care at a country airstrip, was flown to Adelaide Airport in the early hours of that morning and transferred through this world-class aeromedical facility for the first time.

That flight had a lasting impact on that young child's life, as it did for all 18 patients we evacuated and our crews cared for at the base that day, and have done so each day since.

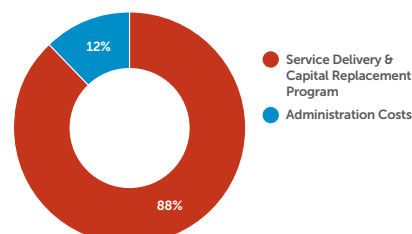
SOURCE OF FUNDS



APPLICATION OF FUNDS



WHERE FUNDRAISING IS APPLIED





The single biggest investment in the history of RFDS Central Operations in the well-being of all South Australians, and beyond, the purpose-built medical and aviation facility is delivering on its goals:

- > enhanced patient care and comfort in a patient transfer facility designed and equipped to complement any new hospital;
- > providing a modern and safe workplace for our staff and health service-delivery partners working around the clock;
- > generating operational efficiencies and capacity by replacing outdated premises and co-locating all RFDS staff previously spread across two Adelaide locations; and
- > preparing us for growth, including the expansion and diversification of our fleet to incorporate the introduction of SA's first permanently-configured aeromedical jet, the PC-24.

As governments, service-delivery partners and our patients continue to place their trust in us, so do all sectors of the community who continue to so loyally support our advocacy and recognition programs, along with fundraising and corporate initiatives, which generated \$7.1 million at a cost of 12.3 cents for every dollar raised.

These funds continue to be vital – to firstly invest in our operational deficit and secondly the direct source of our overall surplus, which underpins our

capital asset program for the on-going replacement and upgrade of our aircraft, medical equipment and core infrastructure initiatives.

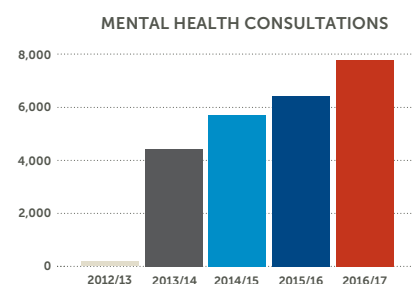
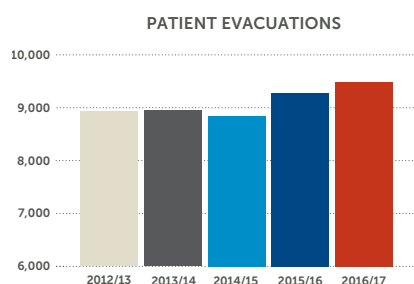
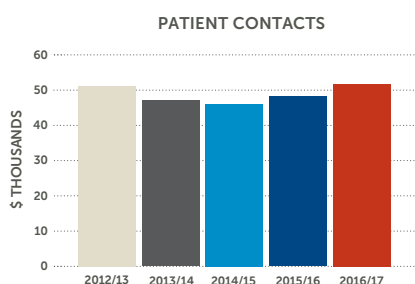
It is important we reflect on the delivery of our three new aircraft over the past year, 'November', 'Whiskey' and 'Zulu', as they represent the community contributions of past and lives of those changed in the future, for a minimum of a decade.

Finally, I want to thank all of our dedicated staff, our Board, hard working volunteers and fundraisers, and corporate supporters and government funders for their unwavering support of our work for equality of health care no matter where you live, work and play in this great land.

Remember that together we make a difference to someone, somewhere, every day.



**John Lynch**  
Chief Executive Officer





Australia's most  
reputable charity for  
the sixth year in a row

Official opening of the **Adelaide  
Base** and the **Darwin Tourist Facility**

Official dedication  
of **VH-FXN** at the  
Adelaide Base

Construction  
begins on **new  
Darwin Base**

**Senex Energy**  
renews major  
sponsorship

**Breast cancer care  
nurse** joins primary  
health care team





Primary Health Care  
Service gains **AGPAL**  
accreditation

**15,672** primary health  
consultations

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**\$146k**

raised by the OZ  
Outback Odyssey

**7,660**

mental health  
consultations

**1,700**

'active' electronic  
patient records

**\$7.1m**

generated from  
fundraising

**9,162**

aeromedical  
evacuations



## OUR SERVICES >

### Snapshot of Our Services >

- > Emergency flights for victims of accident or illness.
- > Clinic flights to remote communities with doctors, nurses and mental health professionals.
- > The provision of medical chests to isolated people and communities.
- > Radio and telephone medical consultations with isolated patients.
- > The operation of the Marree, Andamooka and Marla Health Services.
- > Aboriginal Health Coordinator with a focus on service to Aboriginal communities.
- > Remote Oral Health Care Program which delivers regular dental services and oral health education in remote communities.
- > Inter-hospital transfer of patients both within SA and the NT and interstate for specialist treatment or life-saving surgery.
- > Mental Health Outreach Program where clinicians make regular visits to remote communities in Central Australia to provide mental health care.
- > NT Clinic Charter service which reliably and safely delivers health professionals to remote locations throughout Central Australia.
- > A Central Australian Retrieval Training Program which provides emergency medical skills training for use in remote locations.
- > A First Aid Training Program for people living in rural and remote communities.



> RFDS Adelaide crew conducting a patient inter-hospital transfer from Mt Gambier aerodrome.





## OUR FACILITIES >

### Remote Clinics >

#### Andamooka > Marree > Marla >

The Marree Health Service, Andamooka Health Service and Marla Health Service are each staffed by two Remote Area Nurses who provide primary health care, home visiting, referrals, 24-hour medical consultation and 4WD emergency ambulance services. The Marree Health Service also provides a short-stay facility. The remote clinics also provide a platform to promote and deliver other RFDS primary and preventative health programs such as oral health, chronic disease and mental health.

### Aeromedical Bases >

#### Alice Springs >

The Alice Springs Base provides 24-hour emergency evacuations and inter-hospital transfers by our team of Pilots, Flight Nurses and Engineers. It serves an area of approximately 1.25 million square kilometres from Marla in northern South Australia to Elliot and Barkly Tableland in the Northern Territory, and beyond the border regions of Western Australia and Queensland. We also provide regular charter services to NT Health for the transport of health professionals working throughout Central Australia. The Mental Health Outreach Program delivered by mental health clinicians is also based in Alice Springs.

Alice Springs is also home to our award-winning RFDS Alice Springs Tourist Facility, which in recent years has undergone a major redevelopment to enhance its presence and improve the tourist experience for locals and visitors from all over the world. The RFDS Alice Springs Base also benefits from the Bill and Dawn Prior Village of 13 townhouses used as accommodation for staff and visiting clinicians.

#### Port Augusta >

RFDS Central Operations Communications Centre (OCC) is located at our Port Augusta Base, from which our Operations Coordinators receive emergency calls, plan and assign all emergency evacuation and inter-hospital transfer flights from Adelaide, Alice Springs and Port Augusta, whilst providing after-hours back up for the Broken Hill Base (operated by RFDS South Eastern Section).

The Port Augusta Base serves an area of 840,000 square kilometres, providing comprehensive primary health services to people in the far west and northern regions of SA. Services include 24-hour emergency retrievals and tele-health consultations, inter-hospital transfers and remote fly-in primary health care clinics. In addition to our core of Doctors, Pilots, Flight Nurses, Engineers and Operations Coordinators, our Aboriginal Health Coordinator and Community Health Nurses are based in Port Augusta enabling them to focus on serving people in isolated communities.



> Birds-eye view of RFDS Adelaide Base, Adelaide Airport.

## Adelaide >

The Adelaide Base and its team of Pilots and Flight Nurses provide 24-hour emergency retrievals and inter-hospital transfers, serving all regions of South Australia, as well as the Sunraysia region of Victoria. The Adelaide Base is also home to our Engineering team which conducts heavy maintenance for the aircraft fleet situated across SA. A foundation tenant of the aeromedical precinct at the western end of Adelaide Airport, the Adelaide Base also houses the Executive, Corporate Services, Marketing & PR (fundraising), People & Culture and Health Services teams of the organisation.

## Darwin >

In February 2016 construction commenced on the new Darwin Base, a purpose-built aeromedical and general aviation facility that will enable the RFDS to deliver enhanced patient care and comfort while also providing a modern and safe workplace for staff, guests and NT Government health service-delivery partners. This significant investment in the health and well-being of all Territorians follows the official opening of the new RFDS Darwin Tourist Facility in July 2016, a joint venture with the NT Government and Tourism NT which features the 'Bombing of Darwin' experience and the history of the RFDS at Stokes Hill Wharf.







## COVER STORY: THE FURTHEST CORNER. THE FINEST CARE. >

Whether conducted in an outback homestead, inside an aircraft or at a major community event, the RFDS Primary Health Care Service strives to equal – in fact, dares to exceed – the quality of primary care afforded to those living in our cities.

The united team has evolved its primary and preventative health care services delivered from the Port Augusta Base to match services offered by any metropolitan GP surgery, and recently gained industry accreditation to prove it.

RFDS Practice Manager, Cheryl Boles, assuming the role just one year ago and bringing to it a wealth of knowledge from over 20 years of outback community nursing, has been instrumental in implementing changes that have brought

the Port Augusta Primary Care Service in line with Royal Australian College of General Practitioners (RACGP) standards.

“Previously, there was a traditional service delivered by five clinicians – myself included – who worked for decades in our model of care,” Cheryl says.

“Some communities had the same doctor visit for 25 years who looked after generations of families – from the dying father to the newborn child and all family members in between.

“That was OK, and it served the immediate needs, but we were isolated from the wider health care industry.”

In 2014 the RFDS commissioned a report titled *Consumer Health Needs Analysis* to identify ways to improve the quality – and relevance – of its primary health care services provided from the Port Augusta Base.



> Port Augusta Community Health Nurse, Therese McCourt, talking with Glyn Shackelford, Orroroo, at the William Creek Gymkhana.

## Whether conducting a 24/7 tele-health consultation or out on a 'fly-in' health clinic, the team now access – and update – live patient records from their portable laptops.

A key recommendation was to establish a Practice Manager role to instil leadership, drive change and make the service more 'needs based' and contemporary, cementing its future in outback South Australia.

Another major step was rolling out an electronic patient record software system named *Best Practice*, which Cheryl attributes as the "big ticket" item that has underpinned improvement in the efficiency and quality of primary health care being delivered by the team.

Whether conducting a 24/7 tele-health consultation or out on a 'fly-in' health clinic, the team now access – and update – live patient records from their portable laptops.

"Previously, we used lever-arch files," Cheryl says. "Now, blood test results come in and are updated automatically."

"When going to an area without internet service we load the entire system on to laptops. The clinicians work offline and

then upon their return to Port Augusta we upload (the files) to the main server and the notes are live again," Cheryl says.

"Importantly, the *Best Practice* software system is linked across our three Remote Area Nurse (RAN) outposts to complete the patient recording and continuity of care by our nurses between the fly-in consults."

Point-of-care testing has also been introduced allowing clinicians to conduct in-clinic testing with immediate results for chronic disease conditions such as diabetes and cardiovascular disease, checking cholesterol levels, assess renal function, as well as providing real-time information about a patient's health.

Doctors can then work with patients to prescribe medication, develop an appropriate diet and exercise plan, and improve their overall well-being through chronic disease management. "Prevention is the key," Cheryl says.

Specialist nursing expertise also features in the new service model. One full-time community health nurse has been replaced by two part-time community nurses – a midwife and chronic disease nurse – with a third, specialist cardiovascular disease clinician on the horizon.

A McGrath Foundation-funded breast cancer care nurse has also been engaged to educate and inform remote residents about breast cancer and raise awareness, while also providing advice to RFDS clinicians about breast cancer issues and management.

RFDS has also partnered with headspace as part of a trial to integrate a local community engagement officer with the team and provide outback teenagers suffering from mental health issues with relevant and specialist support and clinical referral where required.

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# 23,332

primary and mental  
health consultations





It wasn't that long ago that a lever-arch file containing paper-based patient records accompanied the primary health care teams on their flights to remote communities to conduct GP clinics.

Fast forward a little more than a year, RFDS Doctors now transport patient files using an electronic database on their laptops that allows them to 'pull up' comprehensive logs of diagnosis and treatment – even live test results – in the outback.

*Best Practice*, the electronic medical records keeping system, was rolled out across RFDS Central Operations last year as a strategy to enhance patient care and improve operational efficiency.

RFDS clinicians use the electronic system to type notes into individual patient files, access historical information from one location and even download blood test results.

Used in concert with clinical audit tools such as PEN CAT, the qualitative and quantitative health data captured by the RFDS will be used to inform and influence health policy makers to identify existing and emerging health patterns among individual or collective remote communities based on actual data.

RFDS Senior Medical Practitioner, Dr Andy Killcross, has been working at the Port Augusta Base for 14 years, and says the new electronic system means patient records are organised and easily accessible, yet still remained confidential within the organisation.

"*Best Practice* provides a consistent medical record across multiple clinical sites, meaning our Remote Area Nurses who have seen patients at our outback clinics – for example, at Andamooka, Marla and Marree – have access to the same clinical information that we have here at the Port Augusta Base," Dr Andy says.

"It also allows us to audit our records to see which areas are performing well and which areas we need to improve, and we use the national RACGP standards to compare those against," he says.

Dr Killcross says the system also has a notification feature which will alert staff to required follow-up appointments, including future blood tests and periodical health checks to monitor a condition or chronic disease.

Over 2,500 individual patient records have been uploaded to *Best Practice*, which has now been condensed down to 1,700 'active' patients (patients who have at least three records over the past 12 months).

In addition to this, the Port Augusta Primary Health Care Service has signed up to a national tele-health trial by the University of Queensland.

The new trial will make a video-conferencing tool available to residents in Kingoonya, Marree, William Creek and Marla to connect with their RFDS doctors and nurses between regular monthly or fortnightly face-to-face visits, providing them with a chance to ask their clinicians questions and raise concerns.

"Speaking to someone on the phone is good, but if you have a visual component in the consultation then you can gain a lot more information," Dr Killcross says.

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**1,700**  
'active' electronic  
patient records

RFDS Remote Area Nurses who have seen patients at our outback clinics have access to the same clinical information that we have here at the Port Augusta Base. 📍

Dr Andy Killcross, Senior Medical Practitioner







## CHRONIC DISEASE MANAGEMENT >

In just six months Mandy Smallacombe has managed to significantly drive down her patients' blood sugar levels – which has potentially saved their lives.

The Community Health Nurse is a member of the RFDS Port Augusta Primary Health Care Service and has been treating 60 clients who have Type 2 Diabetes across Marla, Mintabie, Marree, Oodnadatta and the North West Pastoral region of South Australia.

Most of her clients first presented to fly-in RFDS clinics with an HbA1c – which is a percentage of how much glucose is in the bloodstream over a three-month period – well above the target of 7 per cent.

“Most of them had a result between 8 and 12 per cent,” Mandy says.

Mandy, a specialist diabetes educator, has been using counselling and diet, exercise and lifestyle plans to help dramatically lower these targets among her patients.

One patient went from 9.5pc down to 7.8pc, another went from 10.2pc to 8.1pc, and another went from 6.3pc down to 5.9pc.

“They all have a quarterly GP review and a quarterly diabetes review, as well as weekly support from a diabetes educator and support in diet, exercise and lifestyle changes,” Mandy says.



> Betty Williams, Williams Cattle Co., discusses her diabetes management with Community Health Nurse Mandy Smallacombe.





There are a lot of people out here, like me, who don't have access to see a specialist for diabetes.

Betty Williams, Williams Cattle Co.

In addition to diabetes management, Mandy has also been working with RFDS Doctors and Remote Area Nurses (RANs) to help combat chronic kidney, respiratory and cardiovascular diseases in the remote communities.

She has done this by creating a healthcare plan that all medical staff follow, and assess and screen patients accordingly every three, six and 12 months.

The medical teams create individual healthcare plans for patients that are tailored to specific needs and work to achieve set goals – whether that be to lose weight, improve physical endurance, improve their diet or quit smoking – and reduce their risk of a medical emergency.

“This is all about creating awareness and constant support so clients can change their lifestyle,” Mandy says. “It’s not an overnight fix or a tablet, it’s a lifestyle change.”

In between fortnightly/monthly ‘fly-in’ clinics from the Port Augusta Base, Mandy will telephone her clients to maintain support, or refer them on to a ‘local’ RFDS RAN at Marla or Marree who can travel to the stations and can check in with them instead.

Pastoralist Betty Williams, Williams Cattle Co., has been working with Mandy to reduce the severity of her diabetes. This has included education surrounding her lifestyle, medication and the importance of tight glycaemic control – maintaining healthy blood glucose levels.

“It’s great that Mandy can come to William Creek because there are a lot of people out here, like me, who don’t have access to see a specialist for diabetes,” Betty says.

“Mandy is very informative and has helped explain things to me that I didn’t know about the medication I am taking, which can actually make your blood sugar go really low, which I didn’t realise.

“She explained more about this and told me it was important to carry something like jelly beans in your bag when you are out and about just in case something happens.”

Commencing 2017/18, Central Operations has also secured a new funding agreement with the Country SA Primary Health Network to employ a full-time Community Health Nurse to join the Port Augusta primary health care team. The nurse will proactively ‘sweep’ the RFDS’ *Best Practice* electronic medical records database to identify patients who have missing data, were outstanding on medical reviews and screen for patients at risk of cardiovascular disease.

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**6,975**  
community nurse  
consultations





## MENTAL HEALTH >

A 700-kilometre drive on outback roads – to Port Augusta or Alice Springs – is how far some teenagers have to travel when they need to access professional support to deal with emotional issues, drug or alcohol addiction, sexual health and trauma.

But that will change under a plan to create a shared-care program through a new partnership between the RFDS and the national youth mental health initiative, headspace.

Since June 2017 the two organisations have been trialling a partnered ‘wrap-around’ service targeting 12 to 25-years-olds living in the Flinders and Gawler Ranges, Birdsville Track and Far North regions of South Australia.

Dave McRae, Community Engagement Officer with headspace, has been travelling on RFDS clinic flights to remote areas – Marree and Oodnadatta, and later Yalata – with the Port Augusta primary health care team to liaise with young people about their mental health needs and concerns.

The information – and feedback – being gathered by Dave will be used to determine what services are required in each region and will, ultimately, lead to the development of a suitable service-delivery model for dedicated support to youth living in outback SA.

“The general feedback is that they want to have a service up there that people can access as regularly as possible,” Dave says.

“But that is always the hard thing, working out the balance. If you’re travelling north, the next headspace centre is in Alice Springs. Other than that, there is an outreach site in Whyalla.”

The RFDS-headspace trial has also included a telephone link-up service where young patients can call into headspace sites and speak with a mental health clinician.

Early in the trial, three RFDS patients were referred to headspace’s services, including two road trauma patients and one battling a drug addiction.

“There is no dedicated youth mental health service along the Birdsville Track, or its surrounds, so the new connection with headspace means the RFDS can now refer its younger clients, boosting their mental health outcomes and overall wellbeing,” RFDS Practice Manager, Cheryl Boles, says.

“Now, people know that if they need to access a service like headspace, they can. And it also helps us because we know we can call and organise a consultation,” she says.

Commencing 2017/18, RFDS Central Operations has also secured a funding agreement with the Country SA Primary Health Network to employ a full-time mental health nurse to join the Port Augusta primary care team and provide further opportunities for outback residents to access support services and improve their wellbeing.

It follows the long-term success of the NT Primary Health Network-funded RFDS Mental Health Outreach Program delivered to 18 communities in Central Australia, which provides culturally appropriate in-field treatment of mild to moderate diagnosable mental illness to outback communities where there is little or no other clinical mental health service.

---

**7,660**  
mental health consultations

> headspace Community Engagement Officer, Dave McRae, and RFDS Medical Officer, Dr Bas Kirmani, are involved in a trial ‘wrap-around’ mental health service in outback SA.

There is no dedicated youth mental health service along the Birdsville Track, or its surrounds, so the new connection with headspace means the RFDS can now refer its younger clients.📍

Cheryl Boles, Practice Manager







## GENERAL PRACTICE >

RFDS Central Operations has become a permanent tenant at major outback events such as the annual William Creek Gymkhana – a win-win for both the organisation and event organisers.

The RFDS has been setting up camp at these major community events following an approach by organisers for on-site medical services – something they needed to qualify for public liability insurance in order to keep the events running.

But it has also proved to be a win for the RFDS by enabling it to target a patient demographic that often doesn't present at usual fortnightly or monthly fly-in health clinics: men aged 18 to 50 years of age.

"Gymkhanas and race meetings in the outback – the typical target group are people who wouldn't normally come to a health clinic unless they are really sick," RFDS Port Augusta Practice Manager, Cheryl Boles, says.

"We see men with broken arms from motorbike accidents or workplace accidents that need suturing, but otherwise they wouldn't normally come to the clinic," she says.

"So there was an opportunity to reach them around preventative care – checking their blood pressure and weight, talking about diet – and point-of-care testing for diabetes and cholesterol levels.

"On the spot, we can provide people with real-time information about their health; it is all about delivering primary health care opportunities and messages."

> Dr Andy Killcross, Senior Medical Practitioner, Port Augusta Base, and Andrew Clarke, Allandale Station, via Oodnadatta, at the William Creek Gymkhana.





**Those identified as having above-normal targets are followed up by our community health nurses who instate a healthcare plan to lower their risks, and are then monitored on a quarterly basis.●**

**Dr Andy Killcross, Senior Medical Practitioner**

Over the past year the RFDS has hosted these makeshift clinics at outback events, including the William Creek Gymkhana, the Oodnadatta Races and an agricultural field day on Mount Barry Station.

Port Augusta Community Health Nurse, Mandy Smallacombe, described the clinics as a “pit stop screening for chronic disease”.

“Pit-Stop is a fun way of engaging people in the outback to come and have a chat with us about their health, test for signs of cardiovascular disease by checking blood pressure and check for diabetes through a blood sugar check,” Mandy says.

“We always have a male doctor on board who has two sets of prosthetic testicles – one with lumps (to represent cancer) and one without. Our breast

cancer care nurse uses two sets of model breasts, one with lumps and one without,” she says.

“The first hour is always funny. People walk past and have a bit of a giggle and then come over to have a look and play, and it all starts from there.

“Those who are identified as having above-normal targets in each of the categories are then followed up by the respective nurses who instate a healthcare plan to lower their risks, and then monitored on a quarterly basis.”

Port Augusta Senior Medical Practitioner, Dr Andy Killcross, says hosting a stand at community events also helped to raise awareness relating to mental health services and support.

“Mental health is another key part of what we do so it’s important to engage

with the community around looking out for yourself from a mental health perspective,” Dr Andy says.

“Especially when we go to communities where people have to deal with some extreme factors such as geographical isolation and, at times, very difficult climate change.

“These farming communities have, over the years, been through great drought and that has been really tough and has impacted on people’s mental health so these events allow us to engage with them.”

---

**3,153**  
**face-to-face GP consultations**





## REMOTE AREA NURSES >

THE safety of Remote Area Nurses (RANs) has been significantly improved following the investment in security technology and changes to staff resourcing and procedures which support a dual-nurse model in isolated communities.

RFDS RANs are now equipped with personal EPIRBs (Emergency Position Indicating Radio Beacons), and they are required to log all call-outs with the Operations Communications Centre at RFDS Port Augusta Base, which receives all emergency calls and dispatches resources.

The devices are in addition to GPS tracking within new 4WD ambulances and satellite phones, which the nurses also carry, as well as a requirement to take a fellow staffer or community member on late night and remote call-outs as part of the RFDS' own 'Mantle of Safety' Program.

The changes – and financial investment – coincides with a national advisory committee's recommendations to the Commonwealth Government on how to improve safety for remote health

workers following the tragic death of outback nurse Gayle Woodford in 2016.

RFDS Central Operations Chief Operating Officer, Tony Vaughan, the RFDS delegate appointed to the Remote Area Workforce Safety & Security Workforce Project, said the committee's recommendations revolved around one key message: "never alone".

"The key principal is no health worker should ever be dispatched into an uncontrolled environment by themselves," Tony says.

"It is fine to be working in a controlled environment – like a clinic – by themselves, but if they have to go remote, that is an uncontrolled environment and they should never be alone.

"Our RFDS RANs now carry personal EPIRBs that they can press if in distress, which sends out a signal that we can track via a satellite. It is the most reliable technology in the outback."

RFDS Central Operations operates three permanent health services in outback South Australia – commonly referred to 'RAN clinics' – at Marla, Andamooka and Marree.

Each clinic is staffed by two RANs, and provides primary healthcare, a 24/7 emergency ambulance service and home-visits for patients, as well as hosts fly-in GP health clinic visits from the RFDS Port Augusta Base.

An extension of the Port Augusta Primary Health Care Service team, the RAN clinics provide remote patients with a face-to-face consultation at the sites between regular fly-in clinics,



> The primary evacuation of a patient injured in a motor vehicle accident from Marree aerodrome on the Birdsville Track.

**The key principal is no health worker should ever be dispatched into an uncontrolled environment by themselves.**

**Tony Vaughan, Chief Operating Officer**

local support and reach for health education and screening, as well as an on-the-spot 24/7 emergency response for residents and tourists.

In 2016/17, Central Operations invested \$420,000 to purchase three new 4WD emergency ambulances to enhance on-ground emergency care and capability of its three RAN clinics.

The Toyota Troop Carriers were converted into purpose-built road ambulances, including improved safety features for remote operations and an equipment fit-out interchangeable with SA Ambulance Service road ambulances and RFDS aircraft.

GPS tracking locators and enhanced communications equipment (HF Radio and GRN Radio) were also fitted to the vehicles to boost safety by enabling the organisation to stay in contact with its RANs and the vehicle at all times.

---

**134** road ambulance transfers





## OUR ACTIVITY 2016/17 >



In 2016/17 our teams assisted 51,231 patients – that's one person every 10 minutes.

#### Top 20 Landing Locations\*

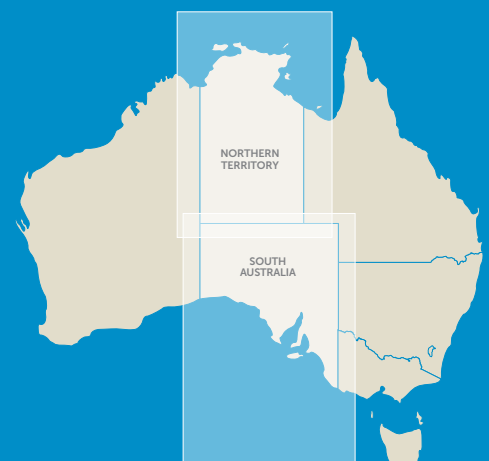
Mt Gambier	549
Tennant Creek	510
Whyalla	457
Port Pirie	450
Renmark	425
Port Lincoln	414
Kadina	340
Ceduna	231
Yuendumu	198
Uluru	171
Kingscote	165
Yorktown	156
Coober Pedy	155
Maitland	154
Naracoorte	131
Papunya	123
Olympic Dam	120
Waikerie	109
Ampilatwatja	104
Utopia	94

#### Top Interstate Landing Locations

Essendon, VIC	55
Broken Hill, NSW	15
Sydney, NSW	7
Warburton Range, WA	4
Brisbane, QLD	3
Mt Isa, QLD	3
Jandakot, WA	2
Avalon, VIC	2
Portland, VIC	2
Warrnambool, VIC	2
Townsville, QLD	2
Echuca, VIC	2
Hobart, TAS	2

\* Landings in Adelaide, Port Augusta and Alice Springs are not included as these locations are where our aircraft are based.

- Rural Emergency Skills Program
- First Aid Training Program
- Primary Care Outreach Program
- RFDS Facilitated Clinics
- RFDS General Practice Clinics
- Remote Oral Health Care Program
- Mental Health Outreach Program
- Aeromedical Evacuations





## OUR ACTIVITY 2016/17 >

### Health >

	NORTHERN TERRITORY	SOUTH AUSTRALIA					SA/NT
	Alice Springs	Adelaide	Port Augusta	Andamooka Health Service	Marla Health Service	Marree Health Service	Central Operations Total
<b>TELEHEALTH CONSULTATIONS</b>							
Total number of Telehealth Consultations			3,487	706	424	819	5,436
<b>PATIENTS ATTENDED</b>							
RFDS General Practice (GP) clinics			2,442		389	322	3,153
RFDS other clinics***			1,689	2,131	1,294	1,861	6,975
RFDS facilitated clinics ****	16,544**		1,713*^		94	252	18,603
Mental Health Outreach Program	7,660						7,660
Remote Oral Health Care Program		108					108
Total number of Patients Attended	24,204	108	5,844	2,131	1,777	2,435	36,499
<b>PATIENTS TRANSPORTED</b>							
Primary evacuations	1,761	40	150				1,951
Inter-hospital transfers	1,070	4,179	1,905				7,154
Repatriations	19	33	5				57
Road ambulance				21	62	51	134
Total number of Patients Transported	2,850	4,252	2,060	21	62	51	9,296
Total number of Patient Contacts	27,054	4,360	11,391	2,858	2,263	3,305	51,231
<b>IMMUNISATIONS</b>							
Total number of Immunisations provided			862	33	54	21	970
<b>CLINICS CONDUCTED</b>							
RFDS General Practice (GP) clinics			246				246
RFDS other clinics ***			246	492	492	492	1,722
RFDS facilitated clinics ****	1,376**		303*^		17	42	1,738
Total number of Clinics Conducted	1,376		795	492	509	534	3,706
<b>HEALTH PROGRAM PARTICIPANTS</b>							
Medical Chest Program			157				157
Rural Emergency Skills Program^		82^					82
First Aid Training Program		162					162
Central Australian Retrieval Training	36						36
Total Health Program Participants	36	244	157			-	437

\* Data for Port Augusta facilitated clinics is collected for RFDS by Port Augusta Hospital & Country Health SA Local Health Network.

\*\* Data for Alice Springs facilitated clinics is collected for RFDS by NT Department of Health, Primary Health Care Central Australia Health Service.

\*\*\* RFDS other clinics include clinics conducted by RFDS Community Health Nurses & Remote Area Nurses.

\*\*\*\* RFDS facilitated clinics utilises RFDS aircraft to transport non-RFDS Allied Health clinicians.

^ Health program concluded 31 December 2017.

## Aviation >

	NORTHERN TERRITORY	SOUTH AUSTRALIA		SA/NT
	Alice Springs Base	Adelaide Base	Port Augusta Base	Central Operations Total
<b>NO. OF AIRCRAFT</b>	7	5	4	16
<b>NO. OF LANDINGS</b>	5,107	6,544	4,359	16,010
<b>KILOMETRES</b>	2,467,690	2,041,204	1,357,421	5,866,315
<b>BLOCK TIME (HRS)</b>	7,256	6,495	4,221	17,971

## Aircraft Register >

REGISTRATION	DESCRIPTION	YEAR OF MANUFACTURE	DATE OF ACQUISITION	DEDICATION	MAJOR SPONSOR
<b>VH-FMW*</b>	Pilatus PC-12	1995	September 1995		
<b>VH-FMZ*</b>	Pilatus PC-12	1996	March 1996	Roy & Marjory Edwards (^)	
<b>VH-FDE</b>	Pilatus PC-12	2000	September 2000		
<b>VH-FGR</b>	Pilatus PC-12	2001	December 2001		
<b>VH-FGS</b>	Pilatus PC-12	2001	December 2001		
<b>VH-FGT</b>	Pilatus PC-12	2001	December 2001		
<b>VH-FDK</b>	Pilatus PC-12	2002	December 2003		
<b>VH-FDJ</b>	Pilatus PC-12	2007	January 2008	Beth Stewart Klugh (^)	
<b>VH-FVA</b>	Pilatus PC-12	2009	March 2010	Our Auxiliaries & Support Groups (#)	
<b>VH-FVB</b>	Pilatus PC-12	2010	April 2010		
<b>VH-FVD</b>	Pilatus PC-12	2010	July 2010	Our Inaugural Doctors (#)	
<b>VH-FVE</b>	Pilatus PC-12	2010	September 2010	Our Pioneering Women (#)	
<b>VH-FVF</b>	Pilatus PC-12	2010	October 2010	Barry Lodge OAM (^)	OZ Minerals
<b>VH-FXJ</b>	Pilatus PC-12	2015	August 2015		Hackett Foundation
<b>VH-FXN</b>	Pilatus PC-12	2016	June 2016		Senex Energy
<b>VH-FXW</b>	Pilatus PC-12	2016	October 2016		

Registration (\*): Aircraft re-fitted to commuter configuration for delivery of remote health clinic services

Dedication (^): Badging remains in line with life of aircraft only

Dedication (#): Badging remains forever

Major Sponsor: Badging remains for term of sponsorship



## OUR PEOPLE >

### Staff Employed >

	Full Time	Part Time*
Management & Administration	37	3
Engineers / Engineering Support	19	1
Health Promotion	-	-
Community Health Workers	1	3
Mental Health / Drug & Alcohol Workers	2	2
Medical Practitioners	5	-
Pilots	33	-
Fundraising	5	1
Marketing & Communications	1	-
Operations Coordinators	10	4
Registered Nurses	32	26
Tourist Facilities / Merchandising / Other	3	16
General Hands	-	1
<b>Total Staff</b>	<b>148</b>	<b>57</b>

\* Part-Time Staff includes Casual Staff

### Staff Milestones >

#### Staff, 35 years >

##### **June Andrew**

Remote Area Nurse, Marree Health Service

#### Staff, 20 years >

##### **Karen McBain**

Flight Nurse, Adelaide Base

#### Staff, 15 years >

##### **Ben Satterley**

Finance Manager, Adelaide Base

#### Staff, 10 years >

##### **Belinda Coutts**

Flight Nurse, Adelaide Base

##### **Chris Davenport-Klunder**

Flight Nurse, Adelaide Base

##### **Mark Dickson**

Pilot, Alice Springs Base

##### **Steve Gore**

Pilot, Adelaide Base

##### **Jodie Hunter**

Flight Nurse, Adelaide Base

##### **Brett Mayger**

Pilot, Adelaide Base

##### **Rodney Moyle**

Engineer, Alice Springs Base





> Adelaide Base crew members Zoe Yates and Michael Penno.



## OUR CORPORATE PARTNERS >

### Major Partners



### Program Partners



### National Partners



### Aircraft Partner



### Community Partners



### Supporting Partners



### Media Partners







## OUR COMMUNITY PARTNERS >

Through the outstanding generosity of our Corporate and Community Partners, Donors, Bequestors, Volunteers and Staff we raised \$7.1 million – which has been used to meet the shortfall in operational funding and applied to our capital-raising for replacement of aircraft, medical equipment and enhanced operational facilities.

### Auxiliaries & Support Groups >

- > Adelaide Auxiliary
- > Alice Springs Auxiliary
- > Ceduna Support Group
- > Clare Support Group
- > Copper Coast & District Support Group
- > Cowell & District Support Group
- > Fleurieu Support Group
- > Gawler & District Support Group
- > Jamestown & District Support Group
- > Kangaroo Island Support Group
- > Kingston & District Support Group
- > Marree Support Group
- > Millicent & District Support Group
- > Mount Gambier Support Group
- > Naracoorte & District Support Group
- > Port Augusta Auxiliary
- > Port Lincoln Auxiliary
- > Port Pirie & District Support Group
- > Riverland Support Group
- > Roxby Downs Auxiliary
- > Southern Yorke Peninsula Support Group
- > Sunraysia Support Group
- > Tatiara Support Group
- > Whyalla Support Group

### Photography >

- > SA – Shane Reid, Fotonaut

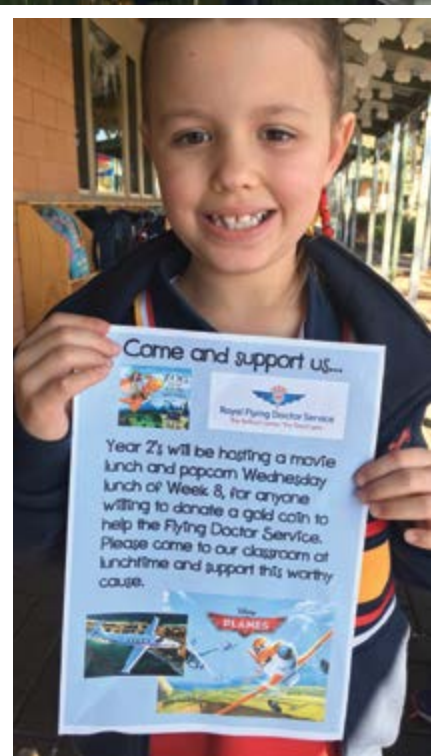
### Volunteers >

- > Badge Day Volunteers
- > Speaker Program Volunteers
- > Adelaide Office Volunteers
- > Wings for Life Gala Ball Volunteers

### Community Fundraisers >

- > Anna Villa Ram Sale
- > Barkly Rodeo Association Inc
- > Beach Energy Corporate Triathlon Team
- > Beltana: Where It All Began
- > Bill Heycox Christmas Lights
- > Blinman Progress Association
- > Border Village Roadhouse
- > Bunyip Ute Muster
- > Burra Picnic Races
- > Campbelltown Rotary Outback Experience
- > Coast to Coast Fisherman's Ball
- > Combined Sheep Breeders Cocktail Function
- > David Meyer (Car 150) Outback Car Trek
- > flydoc-australia e.v.
- > Gawler Ranges Progress Association
- > Geoff Richmond Fundraising Dinner
- > Graham Abbott BBQs
- > Jia McGurgan & Family
- > John Girke's 'Off-tober'
- > Keith RFDS Op Shop
- > Kingoonya Racing Club
- > Leigh Creek Tavern
- > Lewis Bruhn Memorial
- > Lincoln College Club Inc
- > Lions Club of Rostrevor Black Hill Challenge
- > Lower Lakes Stockmans Challenge & Bush Festival
- > Mick O'Brien Groovy Memorial Weekend
- > Minlaton Music Muster
- > Motorcycle Riders Association Inc of SA
- > Old Timers Mine Coober Pedy
- > Oodnadatta Racing & Horse Sports Inc
- > Pastoralists Ball Committee (Outback Ball)
- > Petroleum Exploration Society of Australia (PESA) Golf Day
- > Rotary E-Club of Australia Nomads Inc
- > Royal Adelaide Show Wool Exhibitors
- > Seymour College Boarders
- > Southern Grassfed Carcass Classic
- > SYP Community Shop Incorporated
- > Thiess Prominent Hill Social Club
- > Torbreck Vintners Fish's Shiraz
- > Tricia Agar Bush Kids Calendar
- > Waikerie Pigeon Club
- > Walter & Kay Duncan's Heritage Rose Garden
- > William Creek Gymkhana
- > Winery Engineers of Australia
- > William Creek Hotel







## OUR BOARD & MANAGEMENT >



### Board >

#### Loretta Reynolds

*B.Ec LLB SFFin FAICD*

##### Chairman

Commenced on Board – 2011

*Attended 11/11 meetings*

Chairman Executive Committee

Member Finance Committee

Corporate Partner and Chairman of national law firm, Thomson Geer. Non-Executive Director Australian Submarine Corporation; South Australian Health & Medical Research Institute. Member RFDS Federation Board.

#### David Hills

*FAICD*

##### Deputy Chairman

Commenced on Board – 2005

*Attended 11/11 meetings*

Member Executive Committee

Executive Chairman of Pacific Marine Defence Pty Ltd. Former Chairman Rural Solutions SA; Australian Agricultural Co. Ltd. Former Managing Director Elders Australia Ltd.

#### Paul Prestwich OAM

*B.Ec MBA FCPA FAICS FGIA FAICD RegTA*

*Dip Fin Planning*

##### Treasurer

Commenced on Board – 1995

*Attended 9/11 meetings*

Member Executive Committee

Chairman Board SQR Sub-Committee

Chairman Finance Committee

Company Director and management consultant in the areas of financial and management accounting, risk management, organisation review, strategic planning and development. Former General Manager of a large pharmacy group and Chief Financial Officer with a significant South Australian member service organisation.

#### Janet Chisholm

*B.Com MAICD*

Commenced on Board – 1996

*Attended 10/11 meetings*

Member Executive Committee

Chairman Marketing Advisory Committee

Pastoralist at Napperby Station via Alice Springs, with broad Board experience including 20 years' service to the RFDS, and a marketing career in Sydney specialising in advertising and strategic planning.

#### Dr Tim Cooper AM

*MSc MD MBA*

Commenced on Board – 2005

*Attended 6/11 meetings*

Member Finance Committee

Managing Director of Coopers Brewery Ltd. Chairman Premium Beverages Pty Ltd; Morgan's Brewing Pty Ltd. Deputy President Institute of Brewing & Distilling (UK). Governor Coopers Brewery Foundation Inc.



### Glenise Coulthard

Commenced on Board – 1995

*Attended 7/11 meetings*

Member Health Advisory Committee

Member Marketing Advisory Committee

Churchill Fellow 1997. Regional Manager Aboriginal Health, Flinders & Upper North Region. Executive Member/Deputy Chair Ninti One CRC-REP; Executive Member/Deputy Chair Director Ikara-Flinders Ranges National Park Co-Management Board. Director Australian Hearing Services Board. Member SA Arid Lands Natural Resource Management Board. Broad Board experience with over 20 years' service to the RFDS.

### Brendan Eblen

*MAICD*

Commenced on Board – 1995

*Attended 9/11 meetings*

Member Board SQR Sub-Committee

Member Marketing Advisory Committee

Over 35 years' service to the RFDS and outback communities. Past Chairman RFDS Port Augusta Regional Committee. Past Chairman and Life Member William Creek Gymkhana Club. Consultant Wedgetails Tours providing travel planning, logistics and location services to the tourism industry in remote and isolated regions of Australia. Managing Proprietor B.M Eblen & Co a multi-award winning painting and decorating business, specialising in the restoration of older buildings.

### Dr Ian Gould AM

*PhD FTSE FAusIMM DUniv*

Commenced on Board – 1998

*Attended 11/11 meetings*

Member Board SQR Sub-Committee

Member & Past Chairman South Australian Minerals and Petroleum Expert Group. Member Resources Industry Development Board. Former Chancellor of the University of South Australia. Former Member South Australian Premier's Science and Industry Council; Economic Development Board. Former Managing Director Normandy Mining Ltd; Rio Tinto – Australia. Past President Australasian Institute of Mining and Metallurgy. Twenty-five years' service to the RFDS, including terms as an Independent Councillor and President RFDS Australian Council and Deputy Chairman RFDS Central Operations.

### Hon Graham Gunn AM

*JP*

Commenced on Board – 2010

*Attended 10/11 meetings*

Member Marketing Advisory Committee

Farmer and grazier at Mount Cooper on Eyre Peninsula. Councillor District Council of Streaky Bay. Current Member Commonwealth Parliamentary Association and the South Australian Cricket Association. Former Member South Australian House of Assembly (1970-2010); Parliamentary Natural Resources Committee. Former Speaker House of Assembly and Deputy Speaker. Former Chairman Economic & Finance Committee.

## Senior Management >

**John Lynch** Chief Executive Officer

**Tony Vaughan** Chief Operating Officer

**Stephen Batt** Chief Financial Officer

**Peter Docking** General Manager, Aviation Regulation & Safety

**Ollie Kratounis** General Manager, Business Development

**Charlie Paterson** General Manager, Marketing & Public Relations

**Richard Tanner** General Manager, People & Culture

**Michael Toomey** General Manager, Northern Territory

**Dr John Woodall** Chief Medical Officer



# FINANCIAL REPORTS >

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> Alice Springs Base Senior Engineer Adam Andrews.



# SUMMARY FINANCIAL REPORT >

FOR THE YEAR ENDED 30 JUNE 2017

## Royal Flying Doctor Service of Australia Central Operations >

### Statement by the Board

The financial statements and other specific disclosures are a summary of and have been derived from the Royal Flying Doctor Service of Australia Central Operations full financial report for the financial year. Other information included in the summary financial report is consistent with the Service's full financial report.

The summary financial report does not, and cannot be expected to, provide as full an understanding of the financial performance, financial position and financing and investing activities of the Service as the full financial report.

A copy of the Service's 2017 Annual Financial Report, including the independent audit report, is available to all members, and will be sent to members without charge upon request.

### Review of Operations and Results

The Directors report that the Service recorded a surplus for the period ended 30 June 2017 of \$3.2 million (\$4.3 million in 2016).

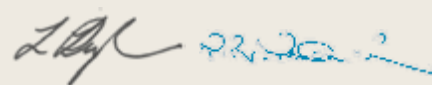
The result excluding Donations and Sponsorship of \$4.7 million (\$5.7 million in 2016), Legacies and Bequests of \$2.4 million (\$2.1 million in 2016), Net Financial Income of \$1.9 million (\$1.7 million in 2016), and a Commonwealth Capital Grant of \$2.0 million (\$2.0 million in 2016) is a deficit of \$ 7.8 million (\$7.2 million in 2016). This deficit represents the funding shortfall from operational activities.

The surplus generated from non-operational activity (Donations and Sponsorship of \$4.7 million, Legacies and Bequests of \$2.4 million, Net Financial Income of \$1.8 million, Commonwealth Capital Grant of \$2.0 million) has contributed to Total Investments of \$55.4 million (\$62.9 million in 2016), down on 2016 as a result of utilisation for the capital replacement program. The Service requires this level of investment holdings to support its capital replacement program. In the next five years it is

anticipated the capital replacement program will require \$50.1 million at current values including the purchase of a medically-equipped twin engine Jet (PC-24) and the option on a second twin engine Jet (PC-24), two medically-equipped PC-12s, together with medical, aviation and general equipment upgrades in excess of \$1.0 million per annum.

Dated at Adelaide this 14<sup>th</sup> day of September 2017.

Signed in accordance with a resolution of the Board of Directors



**L A Reynolds**  
Chairman

**P R Prestwich**  
Treasurer

## Statement of Profit and Loss and Comprehensive Income >

For the year ended 30 June 2017

	2017 \$	2016 \$
Revenue	38,066,899	34,629,305
Other income	11,314,743	11,236,084
	49,381,642	45,865,389
Employee expenditure	23,377,586	21,699,052
Aviation fuel	4,509,940	4,108,770
Aviation maintenance	2,729,116	2,751,275
Insurance	615,458	546,560
Depreciation and amortisation	6,425,081	4,996,279
Amortisation of engine & propeller overhaul	1,871,095	1,608,078
Other expenses	8,467,001	7,595,883
	47,995,277	43,305,897
<b>Surplus before financial income and expense</b>	1,386,365	2,559,492
Financial income	1,875,754	2,347,476
Financial expense	(33,874)	(646,118)
	1,841,880	1,701,358
<b>Surplus for the period</b>	3,228,245	4,260,850
<b>Other comprehensive income</b>		
<b>Items that will not be reclassified to profit and or loss</b>		
Revaluation of land and buildings	-	(607,416)
Net change in fair value of financial assets	518,926	(31,567)
	518,926	(638,983)
<b>TOTAL COMPREHENSIVE INCOME FOR THE PERIOD</b>	<b>3,747,171</b>	<b>3,621,867</b>



# SUMMARY FINANCIAL REPORT >

FOR THE YEAR ENDED 30 JUNE 2017

## Statement of Changes in Equity >

For the year ended 30 June 2017

	Asset Revaluation Reserve \$	Asset Realisation Reserve \$	Capital Grant Reserve \$	Fair Value Reserve \$	Retained Earnings \$	Total Equity \$
<b>Balance at 1 July 2015</b>	<b>9,518,222</b>	<b>6,580,285</b>	<b>35,707,004</b>	<b>780,964</b>	<b>96,188,101</b>	<b>148,774,576</b>
<b>Total comprehensive income for the period</b>						
Surplus for the period	-	-	-	-	4,260,850	4,260,850
Changes in fair value of financial assets	-	-	-	(31,567)	-	(31,567)
Change in fair value of land and buildings	(607,416)	-	-	-	-	(607,416)
<b>Total comprehensive income for the period</b>	<b>(607,416)</b>	<b>-</b>	<b>-</b>	<b>(31,567)</b>	<b>4,260,850</b>	<b>3,621,867</b>
Transfer (to)/from reserve	-	-	-	-	(2,000,000)	(2,000,000)
Transfer (to)/from retained earnings	-	-	2,000,000	-	-	2,000,000
<b>Total recognised income and expense</b>	<b>(607,416)</b>	<b>-</b>	<b>2,000,000</b>	<b>(31,567)</b>	<b>2,260,850</b>	<b>3,621,867</b>
<b>BALANCE AT 30 JUNE 2016</b>	<b>8,910,806</b>	<b>6,580,285</b>	<b>37,707,004</b>	<b>749,397</b>	<b>98,448,951</b>	<b>152,396,443</b>
<b>Balance at 1 July 2016</b>	<b>8,910,806</b>	<b>6,580,285</b>	<b>37,707,004</b>	<b>749,397</b>	<b>98,448,951</b>	<b>152,396,443</b>
<b>Total comprehensive income for the period</b>						
Surplus for the period	-	-	-	-	3,228,245	3,228,245
Changes in fair value of financial assets	-	-	-	518,926	-	518,926
Change in fair value of land and buildings	-	-	-	-	-	-
<b>Total comprehensive income for the period</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>518,926</b>	<b>3,228,245</b>	<b>3,747,171</b>
Transfer (to)/from reserve	-	-	-	-	(2,000,000)	(2,000,000)
Transfer (to)/from retained earnings	-	-	2,000,000	-	-	2,000,000
<b>Total recognised income and expense</b>	<b>-</b>	<b>-</b>	<b>2,000,000</b>	<b>518,926</b>	<b>1,228,245</b>	<b>3,747,171</b>
<b>BALANCE AT 30 JUNE 2017</b>	<b>8,910,806</b>	<b>6,580,285</b>	<b>39,707,004</b>	<b>1,268,323</b>	<b>99,677,196</b>	<b>156,143,614</b>

## Balance Sheet >

As at 30 June 2017

	2017 \$	2016 \$
<b>Current Assets</b>		
Cash and cash equivalents	4,387,030	5,616,883
Trade and other receivables	3,098,858	1,797,757
Inventories	359,139	291,540
Investments	55,362,717	62,930,608
<b>Total current assets</b>	<b>63,207,744</b>	<b>70,636,788</b>
<b>Non-Current Assets</b>		
Property, plant and equipment	100,084,637	90,195,578
Intangibles	818,648	719,037
<b>Total non-current assets</b>	<b>100,903,285</b>	<b>90,914,615</b>
<b>Total assets</b>	<b>164,111,029</b>	<b>161,551,403</b>
<b>Current Liabilities</b>		
Trade and other payables	3,639,451	4,745,560
Employee benefits	3,051,454	3,312,568
<b>Total current liabilities</b>	<b>6,690,905</b>	<b>8,058,128</b>
<b>Non-Current Liabilities</b>		
Employee benefits	1,276,510	1,096,832
<b>Total non-current liabilities</b>	<b>1,276,510</b>	<b>1,096,832</b>
<b>Total liabilities</b>	<b>7,967,415</b>	<b>9,154,960</b>
<b>NET ASSETS</b>	<b>156,143,614</b>	<b>152,396,443</b>
<b>Equity</b>		
Reserves	56,466,418	53,947,492
Retained earnings	99,677,196	98,448,951
<b>TOTAL EQUITY ATTRIBUTABLE TO EQUITY HOLDER</b>	<b>156,143,614</b>	<b>152,396,443</b>



# SUMMARY FINANCIAL REPORT >

FOR THE YEAR ENDED 30 JUNE 2017

## Statement of Cash Flows >

For the year ended 30 June 2017

	2017 \$	2016 \$
<b>Cash flows from operating activities</b>		
Cash receipts from grants	21,221,814	19,428,701
Cash receipts from customers	16,060,992	14,759,550
Cash paid in the ordinary course of operations	(37,890,372)	(34,980,543)
Cash receipts from tourist activities	2,208,349	1,410,136
Cash receipts from donations, legacies and bequests	6,924,277	7,825,948
Cash paid for tourist activities	(2,212,989)	(1,119,631)
Cash paid for fundraising activities	(891,441)	(781,339)
<b>Net cash from operating activities</b>	<b>5,420,630</b>	<b>6,542,822</b>
<b>Cash flows from investing activities</b>		
Acquisition of property, plant and equipment and intangible assets	(20,378,695)	(22,798,694)
Acquisition of engine & propeller overhaul	(950,433)	(992,124)
Proceeds from sale of fixed assets	2,882,688	213,637
Acquisition of investments	-	-
Proceeds from capital grants	2,000,000	4,744,434
Proceeds from investments	9,793,941	14,157,103
Interest received	254,394	115,148
Dividends received	113,483	199,834
<b>Net cash (used) in investing activities</b>	<b>(6,284,622)</b>	<b>(4,360,662)</b>
Net decrease in cash and cash equivalents	(863,992)	2,182,160
Cash and cash equivalents at 1 July 2016	5,616,883	3,732,087
Effect of movements in exchange rates on cash held	(365,861)	(297,364)
<b>CASH AND CASH EQUIVALENTS AT 30 JUNE 2017</b>	<b>4,387,030</b>	<b>5,616,883</b>

## Note 1: Basis of preparation of the summary financial report >

The summary financial report has been prepared based on the Service's full financial report. Other information included in the summary financial report is consistent with the Service's full financial report. The summary financial report does not, and cannot be expected to, provide as full an understanding of the financial performance, financial position and financing and investing activities of the Service as the full financial report.

The financial report is prepared on an historical costs basis except for the following:

- > land and buildings are stated at fair value;
- > investments are stated at fair value; and
- > liabilities for defined benefit obligation.

A full description of the accounting policies adopted by the Service may be found in the Service's full financial report. The accounting policies have been applied consistently to all periods presented in the financial report.

The financial report is presented in Australian dollars, which is the Service's functional currency.



**Report of the independent auditor on the summary financial statements to the members of Royal Flying Doctor Service of Australia Central Operations**

The accompanying summary financial statements, which comprises the summary statement of financial position as at 30 June 2017, the summary statement of comprehensive income, summary statement of changes in equity and summary statement of cash flow for the year ended, note 1 and the statement by the Board, are derived from the audited financial report of the Royal Flying Doctor Service of Australia Central Operations (“the Service”) for the year ended 30 June 2017. We expressed an unmodified audit opinion on that financial report in our report dated 14 September 2017.

The summary financial statements do not contain all the disclosures required by Australian Accounting Standards. Reading the summary financial statements, therefore, is not a substitute for reading the audited financial report of the Royal Flying Doctor Service of Australia Central Operations.

*Directors’ responsibility for the summary financial statements*

The directors are responsible for the preparation of a summary of the audited financial report on the basis described in Note 1.

*Auditor’s responsibility*

Our responsibility is to express an opinion on the summary financial statements derived from the audited financial report of the Royal Flying Doctor Service of Australia Central Operations based on our procedures, which were conducted in accordance with Auditing Standard ASA 810 *Engagements to Report on Summary Financial Statements*.

*Auditor’s opinion*

In our opinion, the summary financial statements derived from the audited financial report of the Royal Flying Doctor Service of Australia Central Operations for the year ended 30 June 2017 are consistent, in all material respects, with the audited financial report, in accordance with the basis described in Note 1.

KPMG

KPMG

Paul Cenko  
*Partner*




Adelaide  
14 September 2017



# How you can help >

Thanks to the kind support of individuals, corporations, governments and the community, the Royal Flying Doctor Service has proudly served Australia for 89 years. Help us continue to deliver the finest care to the furthest corners of Australia.

- > Mail your donation to:  
Royal Flying Doctor Service  
PO Box 381  
Marleston SA 5033
- > Call us on 1800 813 318
- > Visit [flyingdoctor.org.au/sant](http://flyingdoctor.org.au/sant) to make an online donation

 [flyingdoctor.org.au/sant](http://flyingdoctor.org.au/sant)  
 [facebook.com/royalflyingdoctorservice](https://facebook.com/royalflyingdoctorservice)  
 @RoyalFlyingDoc  
 [instagram.com/royalflyingdoc](https://instagram.com/royalflyingdoc)

## Adelaide Base

1 Tower Road  
Adelaide Airport SA 5950  
**T** 08 8238 3333  
**F** 08 8238 3395  
**E** [enquiries@flyingdoctor.net](mailto:enquiries@flyingdoctor.net)

## Alice Springs Base

Alice Springs Airport  
28 Davis Drive  
Alice Springs NT 0870  
**T** 08 8958 8400  
**F** 08 8958 8680

## Darwin Base

Darwin Airport  
10a Lancaster Road  
Eaton NT 0820  
**T** 08 8998 9940  
**F** 08 8998 9942

## Port Augusta Base

Port Augusta Airport  
Airport Road  
Port Augusta SA 5700  
**T** 08 8648 9500  
**F** 08 8648 9591

## Andamooka Health Service

Hospital Road  
Andamooka SA 5722  
**T** 08 8672 7087  
**F** 08 8672 7222

## Marla Health Service

8 Cockatoo Crescent  
Marla SA 5274  
**T** 08 8670 7007  
**F** 08 8672 7007

## Marree Health Service

First Street  
Marree SA 5733  
**T** 08 8675 8345  
**F** 08 8675 8385

## Alice Springs Tourist Facility

8-10 Stuart Terrace  
Alice Springs NT 0870  
**T** 08 8958 8411  
[rfdsalicesprings.com.au](http://rfdsalicesprings.com.au)

## Darwin Tourist Facility

39 Stokes Hill Road  
Darwin NT 0800  
**T** 08 8983 5700  
[rfdsdarwin.com.au](http://rfdsdarwin.com.au)



**Royal Flying Doctor Service**

CENTRAL OPERATIONS

ABN 81 108 409 735