

The furthest corner.
The finest care.

In 2017/18, the Royal Flying Doctor Service assisted more people living in outback South Australia and the Northern Territory.

23% more primary health consultations by GP or Nurse

9% more primary evacuations of the critically-ill or injured

3% more patients consulted by a mental health clinician

3% more patients consulted by a Doctor over the telephone



9,777

Patients transported
by aeromedical
aircraft



5,587

Remote
telehealth
consultations



7,928

Mental health
consultations



143

Patients
transported by
road ambulance

OUR COVER: Alice Springs Base perform the aeromedical retrieval of a young patient in Central Australia.



11,554

Face-to-face
primary health
consultations



716

Immunisations
at remote clinics



154

RFDS Medical
Chest holders
in outback SA



297

Residents trained
in First Aid

OUR STORY >

The Royal Flying Doctor Service has been saving lives in rural and remote Australia for 90 years.

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, its vital services are delivered via a fleet of 69 aircraft, through the operation of 24 aeromedical bases and six remote primary health facilities across the country.

Today the RFDS delivers more than 300,000 patient contacts across Australia every year – that's 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 delivers 24/7 emergency aeromedical and essential primary health care services throughout South Australia and the Northern Territory.

It operates four aeromedical bases in Adelaide, Alice Springs, Darwin and Port Augusta, as well as three remote primary health care facilities in Andamooka, Marla and Marree 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 the replacement of 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

HIGHLIGHTS 2017/18 >

**Australia's most
reputable charity**
for seventh
year in a row

Avionics upgrade
to PC-12 Legacy
fleet aircraft

52,533 patient
contacts

Record-breaking
'Wings for Life'
Gala Ball

\$14 million
generated from
fundraising &
bequests

OZ Minerals
renews major
sponsorship

Elders Limited
launches major
sponsorship

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Case Study:
Another Big
Day Out

**Introduction
of AEDs to
Medical Chests**

**Mental Health
Nurse** joins Primary
Health Care Service

Construction of
new Darwin Base

Darwin Tourist
Facility **wins Brolga
Award** for excellence
in tourism

Primary Health
Care Service
gains **GPEX
accreditation**

S. Kidman & Co
announced as our
first jet sponsor

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CHAIRMAN'S REPORT >



It gives me great pleasure to report that in 2017/18, RFDS Central Operations served more people living, working and travelling in outback South Australia and the Northern Territory.

Over the past year, our operational teams supported by our equally dedicated administration staff have delivered:

- › 23% more primary health consultations at remote clinics;
- › 9% more primary evacuations of the critically-ill or injured;
- › 3% more mental health consultations in isolated communities; and
- › **3% more tele-health consultations to those living in the outback.**

I commend to you the case studies published later in this report (pages 16-35) depicting this growth and advancement in our service delivery as we take you on a journey with us through 'a day in the life' of the Flying Doctor.

Consolidation of our best practice primary health care service-delivery model operated from our Port Augusta Base, the benchmark aeromedical performance at our Alice Springs Base, and the commencement of operations from our new Darwin Base have been key drivers in this year's growth in our patient activity.

Last year I reported on our focus on the re-structure and resourcing of our new fully-integrated service model for contemporary primary health care delivered from our Port Augusta Base.

I can advise that this has been implemented and delivered with great success. We are in alignment with the objectives of our Commonwealth and State Government stakeholders, new service-delivery partner, Country SA Primary Health Network, and, most of all, meeting the health needs of remote communities.

Chronic disease management has been one area of focus. With data captured on electronic medical records, our diabetes patients receive a quarterly GP review in concert with tailored health care plans and weekly support from a specialist diabetes educator in key areas of blood sugar monitoring, diet, exercise and lifestyle. It has resulted in tangible and sustained decreases in blood sugar levels of patients to safer ranges which will potentially save lives.

We are proud of our integrated model which now fully connects GPs and our Community Health Nurses with our Remote Area Nurse clinics at Andamooka, Marla and Marree, ensuring that people living in the bush have access to primary health care which is equal, if not better, than their city counterparts.

On this success, we were excited to showcase our Port Augusta Primary Health Care Service to a delegation from the Central Australian Health Service to explore the potential introduction of RFDS primary health care services in the NT.

This would further strengthen our partnership with the Commonwealth, NT Government and NT Primary Health Network for whom we currently deliver mental health support services throughout Central Australia.

The construction and commencement of operations from our new Darwin Base, which was officially opened in September, has fulfilled our strategic goal of providing the finest care throughout the entire north-south corridor of SA and NT.

We now have our very own purpose-built aeromedical facility that will improve comfort and care of our patients inbound from Central Australia and the Kimberley, as well as provide a modern and safe workplace for our Darwin staff, guests and our NT Health service-delivery partners.

We now offer the NT Government trusted and cost-effective options for partnered delivery of aeromedical, clinic charter and primary health care services in the Top End.

"John Flynn's enduring vision and unquenchable drive to improve access to essential health care services for people in the bush is ever-present in our organisational DNA."



The preparation of our Strategic Plan for the next three years (2019-2021) has been a key focus for our Board and Executive Management team, with input from an extended number of frontline staff.

Martin Lavery, RFDS Federation CEO, facilitated our strategic planning workshop, which resulted in the confirmation that the five strategic pillars of our existing plan remain relevant and will continue to underpin our next Strategic Plan:

- › Service Delivery – optimising patient outcomes;
- › Our People – connecting people with our purpose;
- › Reputation – be recognised as a best practice organisation;
- › Financial Security – operating efficiently with accountability; and
- › Future Development – advancing our organisation to meet tomorrow's demands.

This of course comes at a time as we transition from our CEO of the past 18 years, John Lynch, who retires at the end of the year, to Tony Vaughan, who commenced with us as Chief Operating Officer in 2014.

John's passion and commitment to meeting the needs of our patients has been second to none, balanced with his outstanding business acumen which directed unprecedented growth and financial security of the organisation.

On behalf of the Board, past and present, we offer our sincere appreciation to John for his unwavering guidance and support throughout his three decades of service to the RFDS and, ultimately, the communities we serve.

The year also marks the first trigger by governance reform adopted in 2006 that prescribes a maximum 12 consecutive years as a Board Member, so we acknowledge the significant contributions made by our three retiring Directors, Janet Chisholm, Glenise Coulthard and David Hills.

In May we celebrated John Flynn's vision and our *90 YEARS of saving lives* in the Australian outback and, more recently, delivering the finest care to injured and critically-ill patients living in regional and urban centres.

Celebrations were held at each of our Bases where staff commemorated our journey, a series of regional events with supporters, and a fitting finale with the sell-out Wings for Life 'Birthday' Ball at the Adelaide Entertainment Centre.

It has been another successful year of fundraising and public advocacy. We thank and acknowledge the expertise and dedication of our staff, along with the selfless contribution of our volunteer Auxiliaries and Support Groups, community fundraisers and our growing gallery of corporate partners.

We all share the privilege as today's custodians of John Flynn's vision.

I continue to be so proud to be part of RFDS Central Operations, as we celebrate another year of delivering universal access to the finest emergency and primary health care to those who live, work and travel in rural and remote Australia.



Loretta Reynolds
Chairman

As I put pen to paper for this Annual Report, it is with both great pride and some sadness that the 2017/18 financial year will be my final as CEO of this wonderful organisation.

I am indebted to the Board who appointed me and to its members who have followed. They have all provided great commitment, encouragement, guidance, support and endorsement of ideas to grow the direction and capability of our organisation.

I acknowledge and express my gratitude to our Staff. I believe that special people work for organisations like the RFDS and, to that end, I have met many special people who give so freely, generously and unconditionally to ensure the best possible outcome for those we serve. That same sentiment applies to the vast number of Volunteers we are so fortunate to recognise as part of this great family.

As Tony Vaughan comes into the CEO role, I wish him every congratulations and success for his time ahead. I hope he finds his tenure every bit as enjoyable and rewarding as my own.

Further recognition and a vote of thanks must go to our government partners; Commonwealth, State and Territory, also our corporate partners and the many donors and patients I have been privileged to meet and work so closely with.

When measuring wealth, I am a staunch believer that your ability to make a difference, or assist those who can, and develop lasting relationships is far more valuable and rewarding than money in the bank.

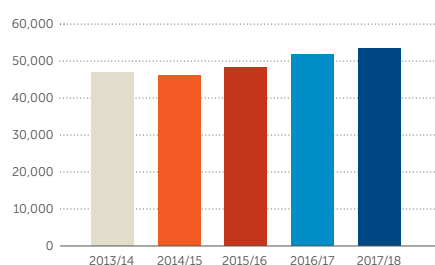
I leave with the reflection that I have enjoyed every day of my journey and acknowledge that I will significantly miss the interface, involvement and interaction, but know that the RFDS is in good hands at both Management and Board levels with a strong plan and vision for the future.

Access to equality of health care no matter where you live, work or play will remain at the forefront of our plans, and I am delighted to report that our team in this past year have delivered over 52,000 episodes of health care over 2017/18, including:

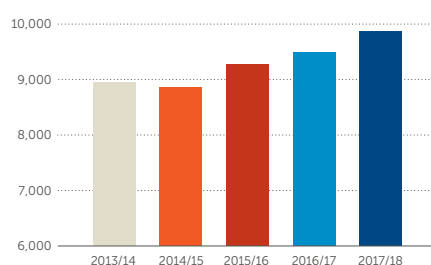
- › 9,777 aeromedical evacuations
- › 5,587 telehealth consultations
- › 7,928 mental health consultations
- › 11,554 primary health consultations
- › 143 road ambulance transports
- › 716 remote immunisations
- › 52 oral health consultations

We continue to deliver this quantum of care in the most cost-efficient manner whilst meeting safety and quality standards, as part of our responsibility to government funders and donors, staff and service-delivery partners and, ultimately, the patients and families we serve.

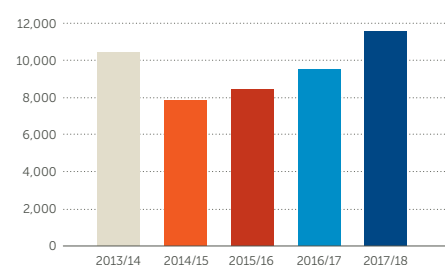
Patient Contacts >



Patient Evacuations >



Primary Health Consultations >



"We continue to deliver our quantum of care in the most cost-efficient manner whilst meeting safety and quality standards."

In addition to the direct delivery of patient care, we maintained our investment in training and development of our present and future workforce through our GP Registrar, Medical and Nurse Student placement programs, as well as building the capacity of first-responders in remote communities.

This year we trained almost 300 outback residents in Senior First Aid, and commenced our ambitious roll-out to complement remote RFDS Medical Chests in SA with an Automatic External Defibrillator. This initiative will save lives – before the RFDS arrives.

Investment in our fleet has continued, including the completion of the year-long avionics upgrade to our eight 'LEGACY' model PC-12 aircraft. The upgrade unifies all navigational and communications systems with our later 'NG' model of PC-12 aircraft, improving safety and maintenance, with the added bonus of reducing aircraft weight leading to improved operational flexibility and fuel efficiency.

Our latest acquisition VH-FXZ ('Zulu') whose introduction maintains our aeromedical fleet at 13 aircraft commenced service in early October and was soon unveiled with its S. Kidman & Co. badging by Mrs Gina Rinehart as our latest Major Sponsor to join our corporate family.

It was also a privilege to welcome Elders Limited as a new Major Sponsor, with its famous agribusiness brand now proudly badged on VH-FXN ('November'), while long-standing corporate partner OZ Minerals renewed its sponsorship for another three-year term to take its tenure as a Major Sponsor to nine years.

My final words of reflection and appreciation go to my own family – my wife Anita and our sons Daniel and Jake, daughters-in-law Jessica and Bridgette, along with our grandchildren Eliza, Ruby, Ted, Scarlett, Jaxon and Benji.

I would like to publically recognise Anita's unwavering commitment to the organisation. Anita has been a wonderful ambassador for the RFDS. She has embraced the journey and its many challenges, with significant prioritisation of RFDS events over and above other personal and social opportunities.

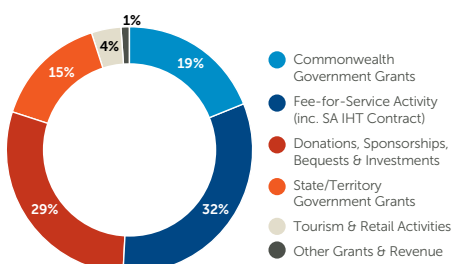
For 32 years Anita and I have had two families – our own and the RFDS. We are so very proud of both and thank everyone for the privilege of being part of the RFDS journey.



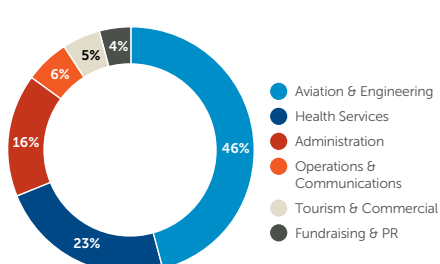
John Lynch

John Lynch
Chief Executive Officer

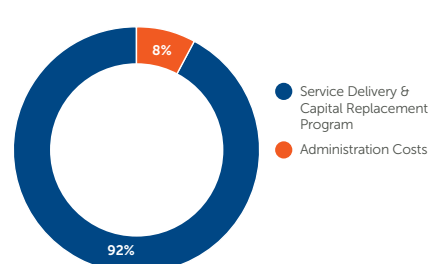
Source of Funds >



Application of Funds >



Where Fundraising is Applied >



WHAT WE DO >

A Snapshot of Our Services >

- › Emergency flights for victims of accident or illness.
- › Inter-hospital transfer of patients both within SA, NT and interstate for specialist treatment or life-saving surgery.
- › Clinic flights to remote communities with doctors, nurses and mental health professionals.
- › Radio and telephone medical consultations with isolated patients.
- › The provision of medical chests to isolated people and communities.
- › Operation of Remote Area Nurse clinics at Marree, Andamooka and Marla.
- › Mental Health Outreach Program which provides specialist mental health care and support to remote communities in Central Australia.
- › 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 communities without a permanent dentist.
- › NT Clinic Charter service which reliably and safely delivers health professionals to remote locations throughout the Northern Territory.
- › 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.



Primary evacuation from Pipalyatjara (Mt Davies), APY Lands, SA.



WHERE WE WORK >

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. Crews also provide regular charter services to NT Health for the transport of health professionals working throughout Central Australia. The Mental Health Services Rural & Remote Areas Program delivered by RFDS 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' state-of-the-art Operations Communications Centre is located at Port Augusta Base, from which our Operations Coordinators receive emergency calls, plan and assign all 24-hour emergency retrieval and inter-hospital transfer flights from Adelaide, Alice Springs, Port Augusta and Darwin, whilst also providing after-hours back up for the Broken Hill Base (operated by South Eastern Section).

The Port Augusta Base is headquarters of the RFDS Primary Health Care Service which serves an area of 840,000 square kilometres, providing comprehensive primary health care services to residents in the far west and northern regions of SA. Services include 24-hour tele-health consultations, remote fly-in primary health care clinics offering specialist chronic disease, mental health, oral health, maternal health, breast cancer and community health nurses/clinicians. In addition to our core of Doctors, Pilots, Flight Nurses, Engineers and Operations Coordinators, our Aboriginal Health Coordinator, Community Health Nurses, Lifestyle Advisor, Dentist and Dental Hygienist are based in Port Augusta enabling them to focus on serving people in isolated communities.

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 Administration, Corporate Services, Marketing & PR (fundraising), People & Culture and Health Services teams of the organisation.

Darwin

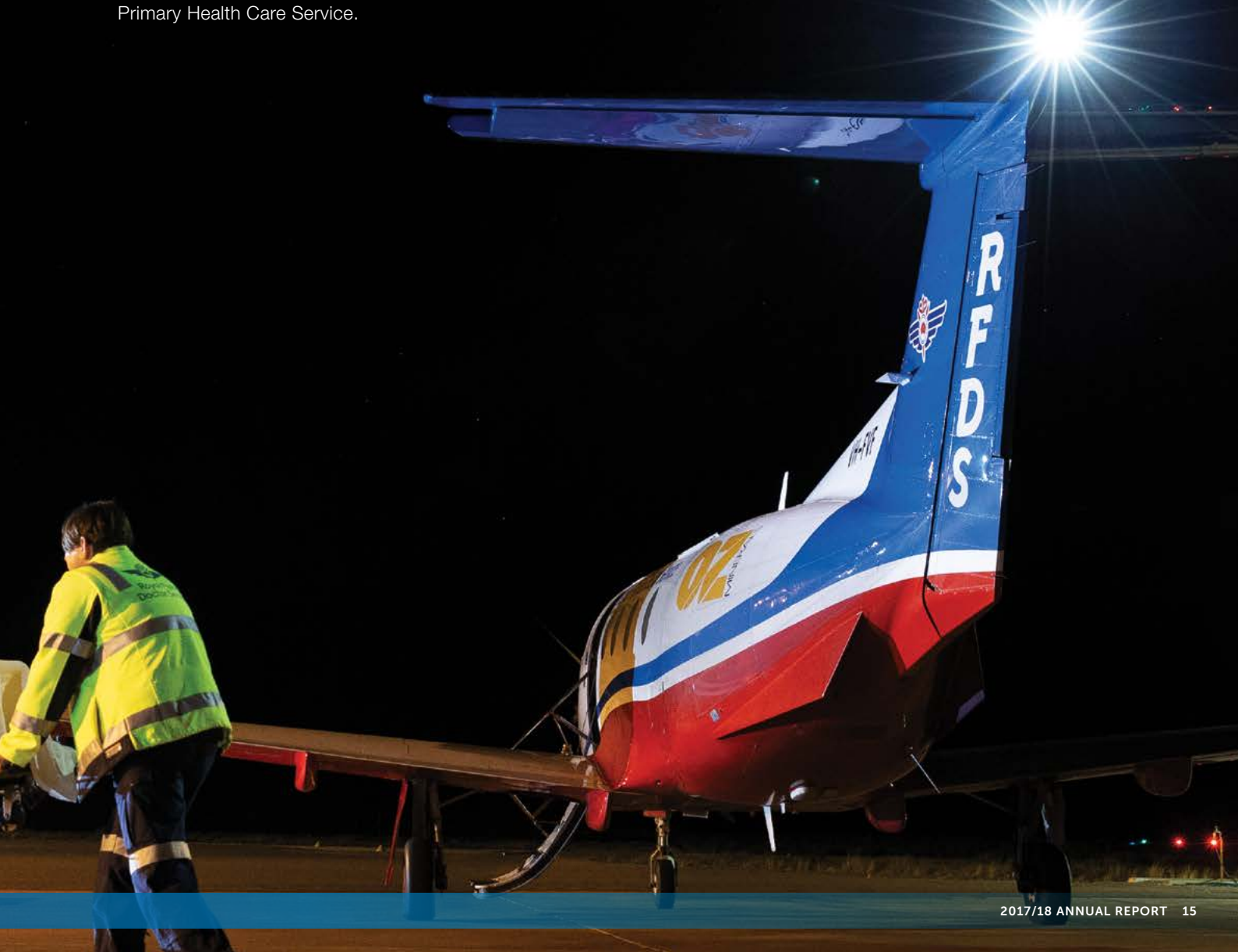
Darwin Base commenced operations in December 2017. The new purpose-built facility enables the RFDS to fulfil its strategic goal of providing the finest care through the entire north-south corridor of the Northern Territory and South Australia. The Base provides 24-hour emergency evacuations and inter-hospital transfers in addition to regular charter services to NT Health for the transport of health professionals delivering remote fly-in clinics throughout the Top End.



Remote Clinics >

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 management and mental health care as an extension to the RFDS Primary Health Care Service.



CASE STUDY: ANOTHER BIG DAY OUT >

On any given day the team at RFDS Central Operations will attend to more than 140 patients throughout South Australia and the Northern Territory.



24:00

From delivering remote mental health clinics in outback communities to performing emergency retrievals of the critically-ill, aeromedical crews and primary health care teams work around the clock to carry out John Flynn's vision for a 'mantle of safety' and the finest medical care for all living, working and travelling in our outback.

On this day, just like any other, our RFDS teams flew more than 19,700 kilometres to deliver the finest care to the furthest corners of our vast 'waiting room'.

This day commenced at 1:10am, when the Alice Springs night crew returned from Kintore – more than 500 kilometres away in the desert – urgently airlifting an expectant mother with labour complications to Alice Springs Hospital.

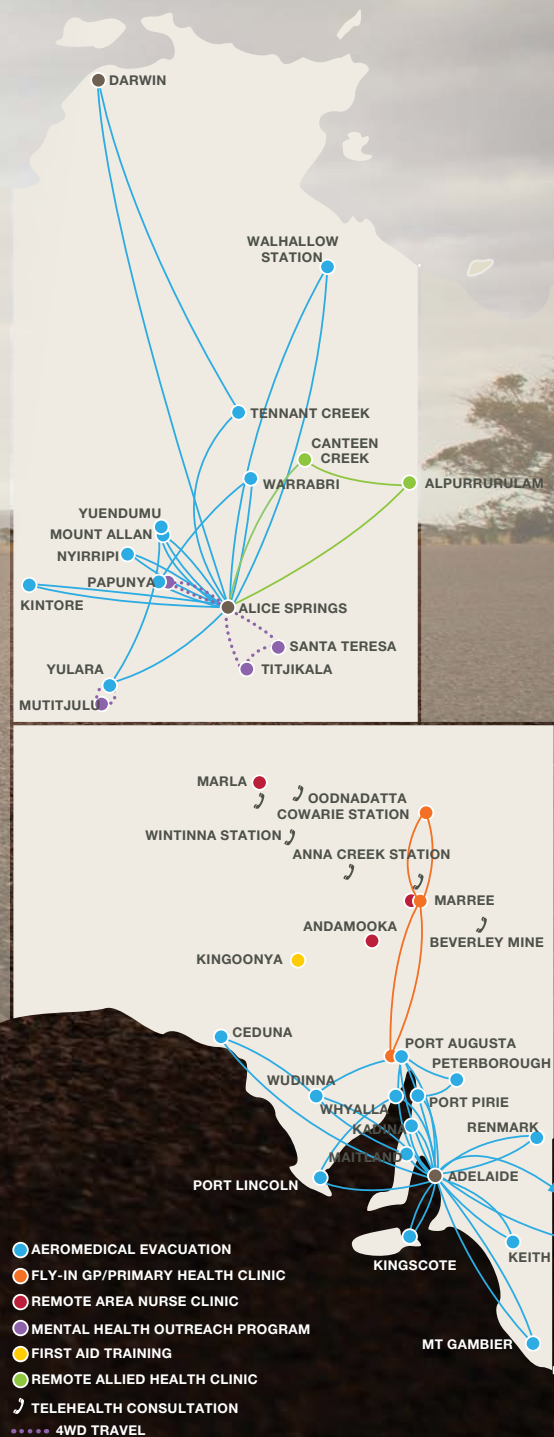
Our crews worked around the clock to:

- › airlift 26 patients to major hospitals for life-saving surgery or urgent medical treatment;
- › conduct one NT Health clinic charter flight to facilitate 26 allied health consultations in remote Central Australia;
- › complete First Aid training to eight residents of an isolated community;

- › deliver mental health consultations to 22 patients living in remote communities of Central Australia;
- › provide 21 Remote Area Nurse consultations across three remote clinics in outback SA;
- › perform 19 face-to-face GP and Community Health Nurse consultation during 'fly-in' primary health clinics along the Birdsville Track;
- › respond to 1800 RFDS SA calls and deliver six telehealth consultations by the on-call RFDS Doctor.

The day concluded at 11:05pm when a night crew departed Port Augusta Base for Whyalla to evacuate a patient with multi-organ failure to the Royal Adelaide Hospital.

Port Augusta Primary Health Care team departs to deliver a 'fly-in' clinic to outback SA.



PRIMARY EVACUATIONS >



01:10

The day starts when an aeromedical crew from Alice Springs Base returns on a 450-kilometre flight from Kintore with a 32-year-old female experiencing labour complications.

When time is of the essence a medically-equipped Pilatus PC12 aircraft is the quickest way to access acute medical care, in this case an 80-minute flight over an eight-hour trip on sealed and unsealed roads.

It was the first of six primary evacuations performed by the team at Alice Springs Base that day, which was just like any other as the busiest 'traditional' RFDS base in the country.

More than 1,900 primary evacuations were performed around the clock from Alice Springs Base in 2017/18 – representing 42 per cent of all non-hospital RFDS airlifts across the country.

This ever-increasing workload from Alice Springs was complemented by a further 1,045 inter-hospital transfers of patients between Tennant Creek and Alice Springs Hospitals, or further afield to Darwin and Adelaide for higher levels of care.

On this day a young male with a severe neck trauma was transferred in the early hours of that morning from Tennant Creek Hospital to Royal Darwin Hospital.

The case mix for primary evacuations is varied, equally the patient population.

Today crews airlifted a trauma patient from a station airstrip following a motorcycle accident, an adult female from Yuendumu Community suffering respiratory distress, and a 60-year-old tourist with severe abdominal pain from Yulara Resort – all to the Alice Springs Hospital for specialist medical treatment.

HIGHLIGHT

Completion of a year-long avionics upgrade to eight LEGACY model PC-12 aircraft.



Alice Springs Base
performed 42 per cent
of all primary evacuations
carried out by RFDS crews
across the country.

08:00

A RFDS mental health clinician arrives at Mutitjulu Community Clinic for the day where she performs 10 patient consultations and a mental health education session with community NT Police officers.

The Alice Springs-based Mental Health team cares for residents of 20 remote communities in Central Australia, providing culturally appropriate in-field treatment of mild to moderate diagnosable mental illness to residents where there is little or no other mental health service.

Travelling by road – and staying overnight in many locations – the multi-disciplinary team of clinicians visit communities on a weekly and/or fortnightly basis to conduct over 7,500 face-to-face consultations every year.

Outcomes of the program have been significant. There has been a reduction of admissions of ‘acute’ patients from these communities to the Mental Health Inpatient Unit at the Alice Springs Hospital.

In September 2017 the RFDS Port Augusta Primary Health Care Service expanded its clinical offering to include a specialist Mental Health Nurse to serve isolated residents living in outback South Australia.

RFDS Mental Health Nurse, Carol-Ann Stanborough, provides evidence-based interventions with regular follow-up and reviews, as well as works side-by-side with the team of RFDS Doctors and Community Health Nurses to identify patients who require mental health treatment, and to activate appropriate referral pathways within a stepped model of care.

The inclusion of mental health services within the primary care team is a very deliberate choice – and one that Carol-Ann believes is key to enabling patients to ‘comfortably’ access the service.

“It’s a sad reality that people are still reluctant to start the conversation around mental health, especially in remote areas. It’s that sentiment of ‘she’ll be right’ – it’s embedded in our culture,” Carol-Ann says.

“We see patients who are happy to have their blood pressure monitored or share concerns about physical symptoms, but there’s still some reluctance around mental health.

“Our service model was developed to help overcome this reluctance. So when we arrive together as a team, we begin to break down those barriers. We’re all known as ‘community nurses’. We fly in on the same plane, we wear the same uniform. And that’s all very deliberate.

“That structure means when our chronic disease nurse finishes checking a patient’s blood sugar or talking about a healthy diet, I can gently introduce the topic of mental health.

“That’s far less threatening for someone who typically might not ask for help, but is actually suffering from anxiety or depression and is in real need of support.”

HIGHLIGHT

Specialist Mental Health Nurse joins the primary health care team at Port Augusta Base.

A photograph of Carol-Ann Stanborough, a mental health nurse, in a red and black polo shirt with 'NURSE' and 'Royal Flying Doctor Service' on it. She is holding a clipboard and talking to a patient whose back is to the camera. The background is a sunlit forest.

"Remote Australians
access mental health
services at a fifth of the
rate of city people"

Carol-Ann Stanborough,
RFDS Mental Health Nurse

CLINIC CHARTER SERVICE >



Heather Ford, Line Pilot, prepares to depart Alice Springs Base on a NT Health clinic charter in Central Australia.



The new Darwin Base represents a major investment – and long-term commitment – by the RFDS in the well-being of all Territorians.

08:00

RFDS charter aircraft departs Alice Springs Base with NT Health clinicians to deliver 'fly-in' primary health clinics to the remote communities of Canteen Creek and Alpurrurulam.

The RFDS has been a preferred provider of clinic charter services in Central Australia for many years, safely transporting NT Health primary and allied health professionals between isolated communities from Alice Springs Base.

Following the successful extension on the NT Government's supplier panel for the *Short-Haul Passenger Air Charter Service*, the RFDS has commenced clinic charter services to NT Health in the Top End region operating from its new Darwin Base.

Construction of the new base was completed in December 2017, and represents a major investment – and long-term commitment – by the RFDS in the well-being of all Territorians.

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 with general aviation providers at Darwin International Airport.

"Patient outcome is the driver of everything we do," says Michael Toomey, RFDS General Manager, Northern Territory.

"The decision to invest in our own permanent presence in Darwin was to provide us with the opportunity to improve patient outcome and, ultimately, the efficiency and flexibility with which we can deliver our services in the Northern Territory – and beyond," Mr Toomey says.

"The modern facility was designed to create a streamlined patient transfer process, as well as provide a modern and safe workplace for Darwin staff, guests and our NT Health service-delivery partners.

"We can now offer the NT Government a trusted and cost-effective option for the repatriation of low-acuity patients from Royal Darwin Hospital back to outreach hospitals such as Katherine and Gove."

The purpose-built aeromedical and general aviation facility has hangar capacity for four aircraft – with apron access and parking for up to six aircraft – an engineering workshop and storeroom, separate crew offices and rest areas, and a private lounge for charter guests.

The Darwin Base follows \$18 million of investment by the RFDS in enhanced health services and tourism attractions in the NT over the past five years.

HIGHLIGHT

Commencement of clinic charter services in the Top End region operating from the RFDS Darwin Base.

PRIMARY HEALTH CLINICS >



Mandy Smallacombe, Port Augusta Community Health Nurse, is working with patients to prevent the onset of chronic disease.

The Port Augusta
primary health care team
prides itself on delivering
best practice primary health
care equal to or better than
that received by those
living in the city.

08:50

Port Augusta primary health care team lands at Marree to deliver its fortnightly 'fly-in' GP health clinic at the outback town – and beyond.

The local RFDS Remote Area Nurse from the Marree Health Service greets Dr Dustin Mattie and Community Health Nurses at the airstrip, while other members of the team remain on board, close doors and depart to fly further north and land at numerous stations along the Birdsville Track.

Despite what is arguably the largest waiting room in the world – with patients scattered across more than 600,000 square kilometres of the outback – the Port Augusta primary health care team prides itself on delivering best practice primary health care equal to or better than that received by anyone living in the city.

In addition to the fully-integrated team of Doctors and Community Health Nurses, each a specialist in their respective fields of midwifery, mental health, chronic disease management and breast cancer care, all clinicians consult and record patient information in real-time on the electronic medical record software system *Best Practice*.

Mandy Smallacombe, RFDS Community Health Nurse and specialist diabetes educator, describes how one small piece of equipment is making big changes to the way she and her patients are managing diabetes – with tangible results.

"Tight management of blood glucose levels is absolutely vital in preventing onset of serious complications such as eye disease, kidney problems, nerve damage, and high cholesterol, which in turn is a major risk factor for heart disease," Mandy says.

"We have started using the Libre Flash Glucose Monitoring (FGM) device, and it's truly a game changer in diabetes care."

People with diabetes typically test their blood glucose level (BGL) a minimum of four times a day by pricking their finger and testing a small drop of blood on a test strip; the test result is displayed on a small screen.

The Libre FGM is an interactive blood glucose sensor, around the size of a 20 cent piece, which the patient applies to their upper arm. The sensor lasts up to two weeks, allowing the patient to check their BGL up to 200 times a day simply by scanning their smartphone over the area – even through clothing.

"Knowledge is a very powerful thing," says Mandy. "Patients can see almost immediately how the food they eat affects their blood glucose."

"It's an incredible tool for promoting engagement in a patient's own glycaemic control. It makes it easy to understand the relationship between what we eat and our blood sugar."

The most valuable features of the FGM are the 'trend arrows' that illustrate patterns in a patient's blood glucose over time – potentially identifying dangerous rises or falls.

"It's especially useful for people at risk of dangerous hypoglycaemic episodes overnight. By keeping a close eye on the trend information, you can make smart choices, such as having a snack just before you go to bed."

Data from the smartphone App is uploaded into the 'cloud', allowing clinicians such as Mandy to review patients' levels anytime, anywhere.

"If I notice a pattern that concerns me, I can get in touch with the patient very quickly and make suggestions over the telephone to help them better manage their blood glucose, or adjust their insulin doses," says Mandy.

"It's incredible really how something so small can make such a profound difference."

HIGHLIGHT

Trial of Libre Flash Glucose Monitoring (FGM) sensors for the management of diabetes.

INTER-HOSPITAL TRANSFERS >



10:30

A RFDS crew and MedSTAR retrieval team depart Adelaide Base with a two-day-old baby requiring urgent heart surgery at Melbourne's Royal Children's Hospital.

The RFDS is known internationally for its emergency retrievals of the critically-ill and injured from the harsh Australian outback, but the 'Flying Doctor' also delivers critical support to those who live in urban centres.

At least once a week RFDS crews from Adelaide Base will transfer a patient interstate for specialist treatment or life-saving surgery such as organ transplant and heart surgery on newborn babies.

Morgan Wallis knows all too well the importance of this service when faced with a race against time and distance to access life-saving care.

"It was terrifying," remembers Morgan. "In less than 24 hours we'd gone from 'your little girl might have pneumonia' to 'she needs open-heart surgery 700 kilometres away.'"

"That night Scarlett was diagnosed with coarctation of the aorta, which was causing heart failure. Open heart surgery was immediately scheduled at Melbourne's Royal Children's Hospital."

"The RFDS and MedSTAR were there for us – ready to transfer us interstate to save Scarlett's life. Scarlett was given just a 15 per cent chance that she would survive the flight."

Surviving the hour-long flight and her heart surgery, Scarlett spent the next three weeks in Melbourne, before another aeromedical flight by the RFDS back to Adelaide's Women's & Children's Hospital to complete her recovery.

"Scarlett's progress has been incredible," says Morgan.

RFDS Chief Medical Officer, Dr John Woodall, says the bespoke medical fit-out of the Pilatus PC-12 transforms the aircraft into a 'flying intensive care unit', designed to maintain the level of intensive care in-flight with that received by a patient at a major hospital.

"Ultimately it is the clinical expertise and competency of the medical crews that deliver the 'intensive care in the air', but an ICU setting cannot be created without significant investment by an organisation in its assets, systems and innovation," Dr Woodall says.

Every week RFDS crews will transport a patient from Adelaide interstate for life-saving surgery or specialist medical treatment.



"In the case of baby Scarlett, equipped with a Mansell Neocot and MedSTAR Kids retrieval team on board, we were able to maintain the intensive care required by Scarlett in hospital in Adelaide during her flight to Melbourne for life-saving surgery."

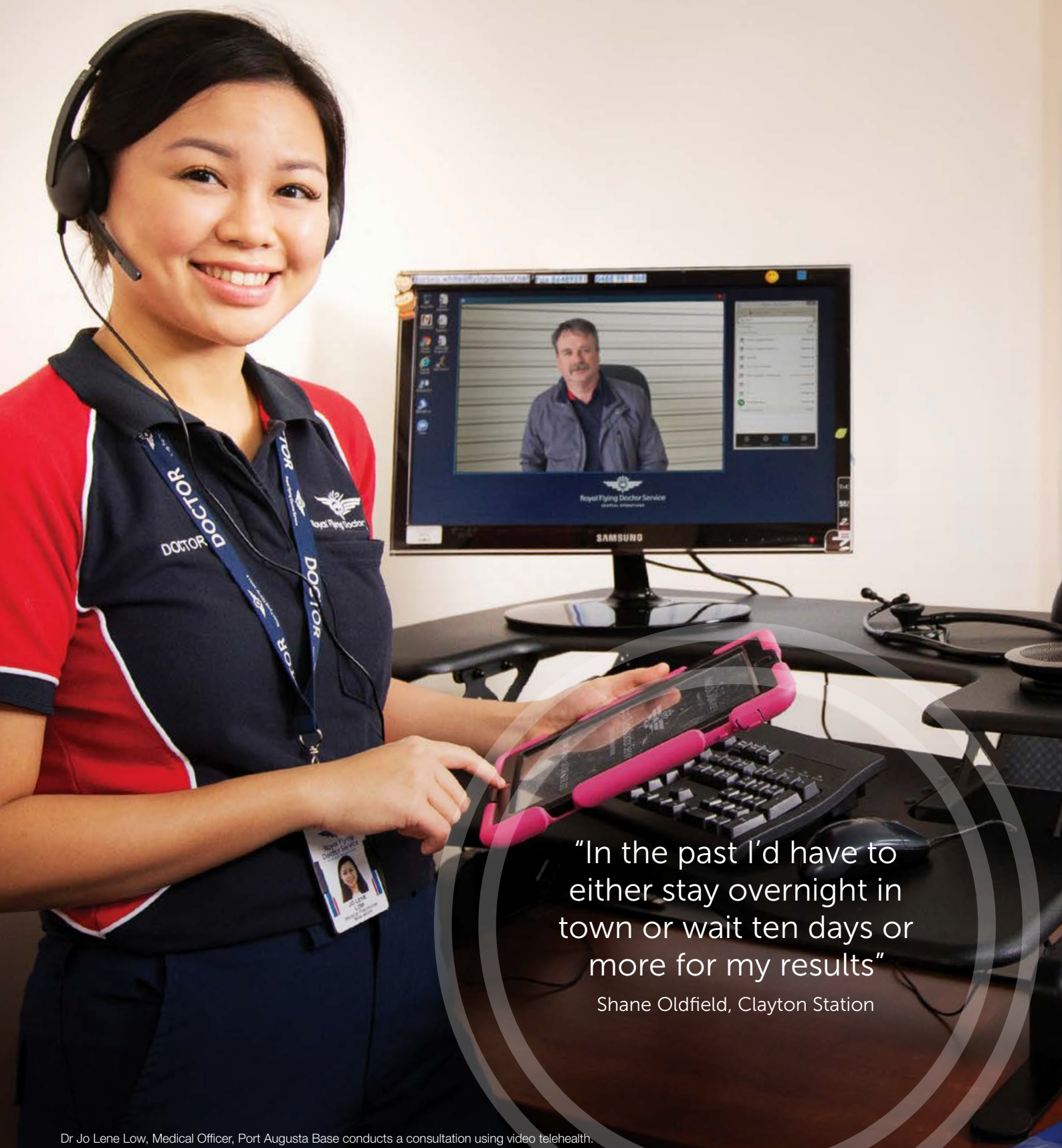
HIGHLIGHT

RFDS assisted MedSTAR to perform the first successful aeromedical transfer of a heart failure patient requiring combined use of Intra-aortic Balloon Pump and Venoarterial Extracorporeal Membrane Oxygenation.

"In less than 24 hours we'd gone from 'your little girl might have pneumonia' to 'she needs open-heart surgery' 700 kilometres away."

Morgan Wallis, Laura, SA

TELEHEALTH CONSULTATIONS >



"In the past I'd have to
either stay overnight in
town or wait ten days or
more for my results"

Shane Oldfield, Clayton Station

Dr Jo Lene Low, Medical Officer, Port Augusta Base conducts a consultation using video telehealth.



12:52

Dr Jo Lene Low conducts a telehealth consultation with a patient on Wintinna Station via Coober Pedy.

Dr Low is the on-call RFDS Doctor for the day, at the ready to receive and triage emergency incoming calls from the outback, prescribe medication from a RFDS medical chest or escalate the response to an aeromedical evacuation.

Between emergencies, Dr Low and her clinician colleagues in the Port Augusta Primary Health Care Service conduct scheduled telehealth consultations with remote patients in between regular 'fly-in' primary health clinics.

This year the Port Augusta Base was selected as one of three RFDS bases across the country to take part in a national RFDS video-conference trial connecting 14 remote communities throughout South Australia, New South Wales and Queensland.

Residents of these communities are being offered an additional video-conference consultation with their RFDS Doctor in between their regular fortnightly or monthly RFDS 'fly-in' primary health clinic.

"There's a lot to be said for country life – but you do feel the distance when you need to see a doctor urgently, or find time to attend follow-up medical appointments," says Shane Oldfield, Clayton Station.

"We live 54 kilometres from Marree on the Birdsville Track, and 465 kilometres from Port Augusta. The Flying Doctor comes in for a clinic every fortnight, but it can feel like a long time when you're anxiously waiting for test results," Shane says.

"This week I had tests done on Monday and the results were back on Tuesday. I was able to go into the Marree Health Service and have a video appointment with my RFDS Doctor in Port Augusta on the same day. Isn't that wonderful?"

"In the past I'd have to either stay overnight in town or wait ten days or more for my results. Being able to see a Doctor over video is wonderful. It's a really great service and certainly eases some of those worries you can have waiting for a follow-up," Shane adds.

HIGHLIGHT

A national trial offering outback communities video-conference consultations in between regular RFDS 'fly-in' primary health clinics.

REMOTE AREA NURSES >



"Now we're able to work together in real-time. I turn on Zoom and it's like the Doctor is right here in the clinic with us"

Kristy Lavery, Remote Area Nurse

Nursing Director Vikki Denny talks to Remote Area Nurses Kristy Lavery and Sam Cosgrove at the RFDS Marla Health Service.



17:00

The Remote Area Nurse (RAN) at the RFDS Marla Health Service completes the final appointment for the day, but remains on-call with a second RAN for 24/7 emergency response in the area.

The RFDS operates three remote nurse clinics in outback SA – the Andamooka, Marla and Marree Health Services – which provide in-clinic primary health care, home visiting, referral, 24-hour medical consultation and 4WD emergency ambulance services to residents and tourists alike.

The Registered Nurse outposts also provide a platform to promote and deliver other RFDS primary and preventative health programs such as oral health, chronic disease management and mental health care as an extension to the Port Augusta Primary Health Care Service.

In between the regular ‘fly-in’ clinic visits from the Port Augusta team, the integrated RFDS primary health care model has been overcoming the challenges of distance and isolation with the use of advanced video-conferencing technology in conjunction with NBN SkyMuster satellite broadband connections.

Used across the organisation, the three remote nurse clinics utilise Zoom meetings software which provides a combination of secure videoconference, online meetings, chat and mobile collaboration used for staff training, meetings, general consultations and emergency situations. This solution is used over the NBN Sky Muster satellite service installed at RFDS clinic locations.

“Zoom is a fantastic tool that allows us to deliver training efficiently and effectively to our outback bases and remote clinics,” says Chris Wilson, RFDS Clinical Nurse Educator.

“It’s an 11-hour drive between our Marla clinic and my office in Adelaide, which presents some major logistical challenges to ensure our team are given opportunities to stay up to date with the latest training,” Chris says.

“We’re using Zoom to deliver staff training in paediatric emergency, sepsis and a range of case studies.

“We also had Dr Philip Tideman (Clinical Director of the Integrated Cardiovascular Clinical Network SA) present as a ‘virtual’ guest speaker on cardiac health.”

RAN Kristy Lavery, RFDS Marla Health Service, says the ability to connect in real-time with RFDS Doctors is life-changing.

“Previously if we needed support or a second opinion we’d rely on the telephone and make calls back and forth to the on-call RFDS Doctor in Port Augusta,” she says.

“Now we’re able to work together in real time. I turn on Zoom and it’s like the Doctor is right here in the clinic with us. They can choose the best angle, or zoom in to get a closer look. The video is really clear.”

Connecting with isolated team members using video technology also makes staff feel better supported.

“It’s a win for everybody – our team feel connected, we provide increased training opportunities and work together to draw on each other’s expertise. That all adds up to better patient outcomes,” adds Chris Wilson.

HIGHLIGHT

Installation of Zoom video software to connect staff across all RFDS aeromedical bases and remote nurse clinics.

FIRST RESPONDER TRAINING >

18:00

An evening First Aid training workshop commences at Kingoonya with residents and local pastoralists.

The basic knowledge and skills of all first-responders to a medical emergency can potentially save someone's life, particularly in a remote location where specialist treatment is hundreds of kilometres away.

Coupled with First Aid and training in cardio-pulmonary resuscitation (CPR), possession of a RFDS Medical Chest provides enormous peace of mind to those living in some of the most remote regions.

In an exciting development, RFDS Medical Chests located in South Australia will be complemented by the addition of an Automated External Defibrillator (AED) and trained in their use.

Sudden cardiac arrest can affect anyone at any time. An AED is a portable defibrillator that delivers an electrical current through a collapsed patient's chest, with the aim of shocking the heart back into its normal rhythm.

Combined with routine emergency response of CPR and emergency services calls, using an AED can significantly improve the chances of survival from cardiac arrest. Currently, less than 10 per cent of Australians who suffer a cardiac arrest outside of a hospital survive – less in remote areas.

"AEDs are a potentially life-saving device that most people in metropolitan areas take for granted – they are typically available in airports, hotels and large shopping centres," says Dr John Woodall, Chief Medical Officer, RFDS Central Operations.

"In a cardiovascular crisis, the detection of an abnormal and 'shockable' cardiac rhythm followed by prompt, appropriate, defibrillation can absolutely be life-saving," Dr Woodall says.

"Informed by your First Aid training, you call for help, and take turns providing CPR, applying forceful chest compressions at a rate of 30 compressions to two breaths," he says.

"Energetic CPR, now combined with the AED, will give the patient the best chance of survival whilst the Flying Doctor is on its way."

The purchase of the AEDs for over 100 RFDS Medical Chests throughout outback SA has been funded by public donations and the community fundraising efforts by employees of TAL, Australia's leading life insurer and National Partner of the RFDS.

Located on stations, roadhouses and tourist locations, RFDS Medical Chests allow patients to be treated for a range of medical conditions as guided by the on-call RFDS Medical Officer via video call, telephone or HF Radio.

"RFDS Medical Chests contain a range of items for the treatment of emergency and non-emergency medical conditions," says Dr Andy Killcross, RFDS Senior Medical Practitioner, Port Augusta Base.

"They enable patients to overcome excessive travel to see a Doctor for conditions that can be managed remotely with expert medical advice," he says.

HIGHLIGHT

Automated External Defibrillators (AEDs) are being added to RFDS Medical Chests in outback South Australia.



"AEDs are a potentially life-saving device that most people in metropolitan areas take for granted"

Dr John Woodall

"The new electronic system has revolutionised how we share information and communicate with our service-delivery partners"

Damien Myles, Manager, Operations Communications Centre

21:45

The Operations Communications Centre receives a call from Kingscote Hospital to airlift an adult male with life-threatening injuries.

The state-of-the-art Operations Communications Centre (OCC) is home to a dedicated team of Operations Coordinators who provide the first point of contact for every request to RFDS for medical assistance in South and Central Australia.

Located at the Port Augusta Base, the 24/7 roster team will manage almost 55,000 inbound and outbound calls every year – that's around 150 each day.

Calls include a request for an outback retrieval, an emergency transfer of a patient from a country hospital to a major hospital, a request for a telehealth consultation with the on-call Doctor or a call for clinical support from a RFDS Nurse in a remote clinic.

In addition to a crew activation, each aeromedical task triggers subsequent calls relating to aircraft refuellers, airstrip condition reports and lighting, confirmation of ambulance crews and landing times to name but a few.

"The focus of the job hasn't changed over the years – we're here to provide a prompt and appropriate operational response – but the way in which we deliver our services has changed dramatically," says Damien Myles, Manager of the Operations Communications Centre.

OCC staff have experienced significant increases in the efficiency and accuracy of their work following the implementation of a new electronic system that integrates patient and operational data 'live' with RFDS service-delivery partners.

"The new electronic system has revolutionised how we share information and communicate about tasks with the SA Ambulance Service (SAAS) and our retrieval partner, MedSTAR," says Damien.

Until recently, each request for an inter-hospital transfer required numerous telephone calls and faxes to confirm information and share updates.

"We used to rely on information from multiple people and systems, meaning our team members were constantly inputting information manually," says Damien.

"Today, the system we use to log patient details and coordinate tasks 'talks' to the systems used by SAAS and MedSTAR. The system is live at all times, meaning every point of the chain is automatically notified when an update takes place," he says.

As Damien is well aware, the seemingly simplest of jobs can turn into complicated logistical challenges.

"An aircraft's estimated time of arrival might change due to weather conditions, or we might re-prioritise and re-task multiple crews because an emergency situation occurs.

"Any change used to mean contacting and updating everybody involved – often at different agencies and geographical locations."

HIGHLIGHT

Integration of the electronic RFDS patient management system with SA Ambulance.



OUR FOOTPRINT 2017/18 >

Top 20 Landing Locations*

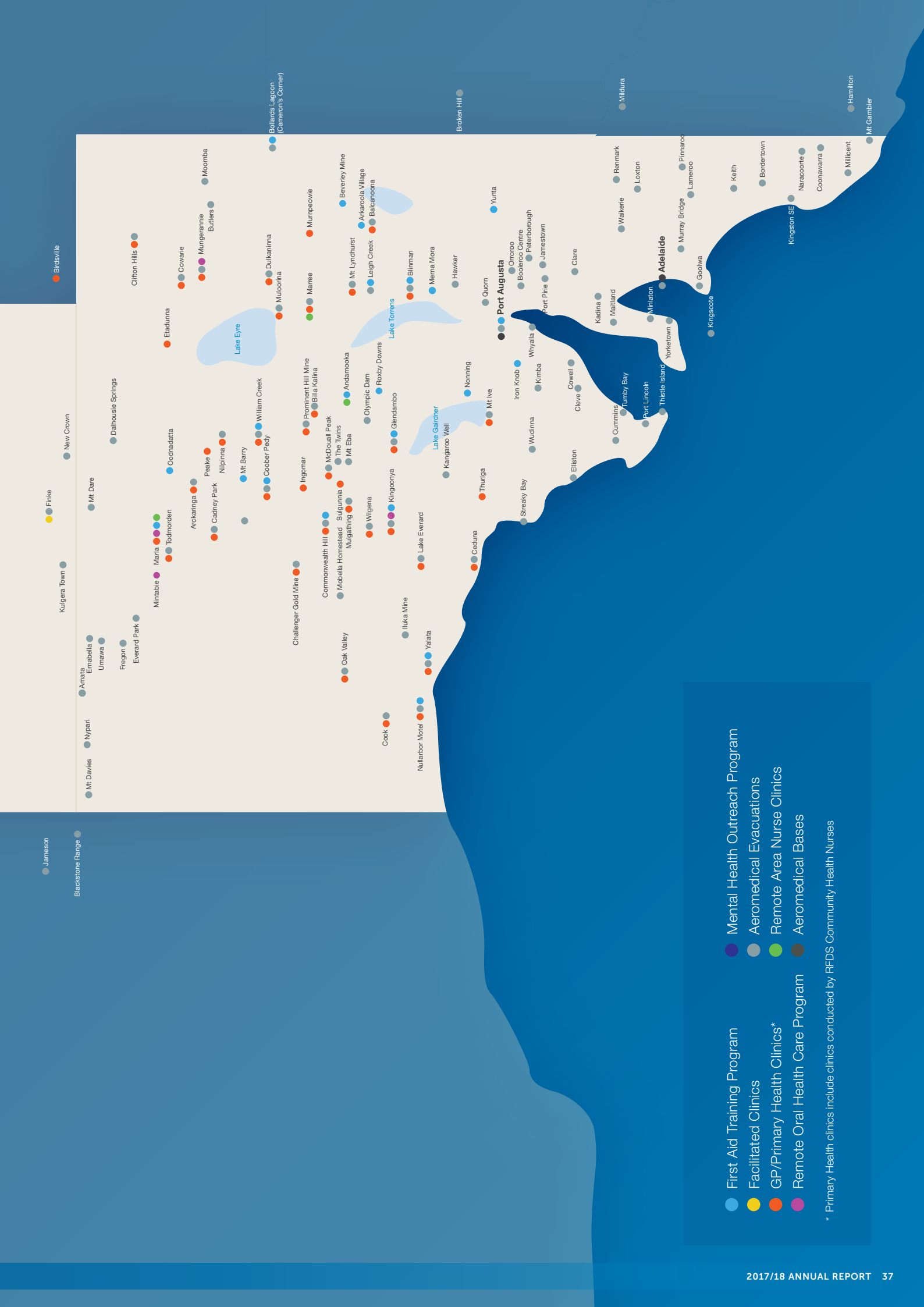
Mount Gambier	598
Whyalla	533
Tennant Creek	527
Port Pirie	462
Fenmark	461
Port Lincoln	424
Kadina	405
Ceduna	235
Kingscote	191
Yundumu	186
Maitland	183
Cooper Pedy	149
Yulara	148
Naracoorte	142
Yorketown	141
Olympic Dam	129
Papunya	125
Marla	125
Warrabri	114
Waikerie	103

Top Interstate Landing Locations

Essendon, VIC	47
Mildura, VIC	16
Sydney, NSW	7
Broken Hill, NSW	5
Ballarat, VIC	3
Brisbane, QLD	3
Latrobe Valley, VIC	2
Moorooduc, VIC	2
Williamstown, NSW	2
Cairns, QLD	1
Charleville, QLD	2
Dubbo, NSW	1
Mount Isa, QLD	1
Portland, VIC	1
Wagga Wagga, NSW	1
Warrnambool, VIC	1

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





- First Aid Training Program
- Facilitated Clinics
- GP/Primary Health Clinics*
- Remote Oral Health Care Program
- Mental Health Outreach Program
- Aeromedical Evacuations
- Remote Area Nurse Clinics
- Aeromedical Bases

* Primary Health Clinics include clinics conducted by RFDs Community Health Nurses

OUR ACTIVITY 2017/18 >

Health >

	Northern Territory		South Australia					SA/NT
	Alice Springs	Darwin	Adelaide	Port Augusta	Andamooka Health Service	Marla Health Service	Marree Health Service	Total
Telehealth Consultations								
Total Telehealth Consultations	-	-	-	4,452	291	324	520	5,587
Patients Attended								
RFDS General Practice (GP) Clinics	-	-	-	2,315	-	-	-	2,315
RFDS Primary Health Clinics*	-	-	-	1,779	2,454	2,354	2,652	9,239
RFDS Facilitated Clinics**	^14,902	^2,590	-	-	-	-	-	17,492
Remote Mental Health Outreach Program	7,928	-	-	-	-	-	-	7,928
Remote Oral Health Care Program	-	-	-	52	-	-	-	52
Total Patients Attended	22,830	2,590	-	4,146	2,454	2,354	2,652	37,026
Patients Transported								
Primary Evacuations	1,941	-	40	145	-	-	-	2,126
Interhospital Transfers	1,045	-	4,562	1,962	-	-	-	7,569
Repatriations	31	-	39	12	-	-	-	82
Road Ambulance	-	-	-	-	15	67	61	143
Total Patients Transported	3,017		4,641	2,119	15	67	61	9,920
Total Patient Contacts	25,847	2,590	4,641	10,717	2,760	2,745	3,233	52,533
Immunisations								
Total Immunisations	-	-	-	598	29	58	31	716
Clinics Conducted								
RFDS General Practice (GP) Clinics	-	-	-	235	-	-	-	235
RFDS Primary Health Clinics*	-	-	-	235	492	492	492	1,711
RFDS Facilitated Clinics**	^1032	-	-	-	-	-	-	1,032
Total Clinics Conducted	1,032	-	-	470	492	492	492	2,978
Health Program Participants								
Medical Chest Program	-	-	-	154	-	-	-	154
First Aid Training Program	-	-	297	-	-	-	-	297
Central Australian Retrieval Training	36	-	-	-	-	-	-	36
Total Health Program Participants	36	-	297	154	-	-	-	487

* RFDS Primary Health 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.

^ Data collected for RFDS by NT Department of Health.

^^ Health program commenced in April 2018.

Aircraft Register >

Registration	Description	Year of Manufacture	Date of Acquisition	Dedication	Major Sponsor
VH-FMW*	Pilatus PC-12	1995	September 1995		
VH-FMZ*	Pilatus PC-12	1996	March 1996	Roy & Marjory Edwards^	
VH-FDE	Pilatus PC-12	2000	September 2000		
VH-FGR	Pilatus PC-12	2001	December 2001		
VH-FGS*	Pilatus PC-12	2001	December 2001		
VH-FGT*	Pilatus PC-12	2001	December 2001		
VH-FDK	Pilatus PC-12	2002	December 2003		
VH-FDJ	Pilatus PC-12	2007	January 2008	Beth Stewart Klugh^	
VH-FVA	Pilatus PC-12	2009	March 2010	Our Auxiliaries & Support Groups#	
VH-FVB	Pilatus PC-12	2010	April 2010		
VH-FVD	Pilatus PC-12	2010	July 2010	Our Inaugural Doctors#	
VH-FVE	Pilatus PC-12	2010	September 2010	Our Pioneering Women#	
VH-FVF	Pilatus PC-12	2010	October 2010	Barry Lodge OAM^	OZ Minerals
VH-FXJ	Pilatus PC-12	2015	August 2015		Hackett Foundation
VH-FXN	Pilatus PC-12	2016	June 2016		Senex Energy
VH-FXW	Pilatus PC-12	2016	October 2016		Elders Limited
VH-FXZ	Pilatus PC-12	2017	June 2017		S Kidman & Co

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

Aviation >

	Northern Territory		South Australia		SA/NT
	Alice Springs Base	Darwin Base	Adelaide Base	Port Augusta Base	Total
No. of Aircraft	7	2	5	3	17
No. of Landings	5,360	189	7,008	4,264	16,821
Kilometres	2,605,320	69,397	2,138,917	1,306,360	6,119,994
Block Time (hrs)	7,686	209	6,808	4,090	18,793

OUR BOARD AND MANAGEMENT >



Loretta Reynolds

(BEC LLB SFFin FAICD)

Chairman

- › Commenced on Board – 2011
- › Attended 8/8 meetings
- › Chairman Executive Committee
- › Member Finance Committee

Corporate Partner and Chairman of national law firm, Thomson Geer. Non-Executive Director, Australian Submarine Corporation. Member RFDS Federation Board.

David Hills

(FAICD)

Deputy Chairman

(19 October 2017 to 31 May 2018)

- › Commenced on Board – 2005
- › Attended 6/8 meetings
- › Member Executive Committee

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

* Retired 31 May 2018

** Leave of absence October to December 2017 inclusive

Paul Prestwich OAM

(BEC MBA FCPA FAICS FGIA FAICD RegTA Dip Fin Planning)

Treasurer

- › Commenced on Board – 1995
- › Attended 8/8 meetings
- › Member Executive Committee
- › Chairman Board SQR Sub-Committee
- › Chairman Finance Committee.

Principal of an accounting firm, company Director and management consultant in the areas of financial and management accounting, risk management, organisation review, investment and asset management, 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

(BCom MAICD)

- › Commenced on Board – 1996
- › Attended 7/8 meetings
- › Member Executive Committee
- › Chairman Marketing Advisory Committee

Pastoralist, via Alice Springs with broad Board experience including 21 years' service to the RFDS, and a marketing career in Sydney specialising in advertising and strategic planning.

Dr Tim Cooper AM

(MSc MD MBA FAICD)

- › Commenced on Board – 2005
- › Attended 6/8 meetings
- › Member Finance Committee

Managing Director of Coopers Brewery Ltd; Chairman, Premium Beverages Pty Ltd; Chairman, Morgan's Brewing Pty Ltd; Chairman, Coopers DIY, LLC (USA); Deputy President, Institute of Brewing & Distilling (UK); Director, Brewers Association of Australia Inc; Governor, Coopers Brewery Foundation Inc.

Glenise Coulthard

- › Commenced on Board – 1995
- › Attended 7/8 meetings
- › Member Health Advisory Committee
- › Member Marketing Advisory Committee

Churchill Fellow 1997. Manager, Aboriginal Health, Flinders & Upper North Region; Executive Member/Deputy Chair Ninti One CRC-REP; Executive Member/Deputy Chair Ikara-Flinders Ranges National Park Co-Management Board; Member, SA Arid Lands Natural Resource Management Board; Member, Parks & Wilderness Council. Broad Board experience with 23 years' service to the RFDS.



Peter de Cure

(BEc Adel FAICD FCA)

- › Commenced on Board – June 2018
- › Attended nil meetings 2017/2018 financial year

An experienced non-executive director and Chairman, with strong technical skills in governance, finance, accounting, taxation, mergers, acquisitions and practical business knowledge across many industries. Chairman, Australian-American Fulbright Commission; Board Member, Tax Practitioner's Board; Chairman, Gifford Hill Joint Venture & Gifford Hill Pty Ltd; Director, Accord Property Development Fund Pty Ltd; Director, Accord Property SIA Storage Fund Pty Ltd; Advisory Board Member, Peter Cochrane Transport; Advisory Board Chairman, Tim Adams Wines; Member, Finance Committee, University of South Australia; Director and Past Chairman, Variety "the Children's Charity" in SA (appointed 2007). Fellow, Australian Institute of Company Directors; Fellow, Institute of Chartered Accountants Australia & New Zealand. Previously a Partner with KPMG.

**Appointed casual vacancy 1 June 2018*

Brendan Eblen

(MAICD)

- › Commenced on Board – 1995
- › Attended 5/8 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.

Hon Graham Gunn AM

(JP)

- › Commenced on Board – 2010
- › Attended 8/8 meetings
- › Member Marketing Advisory Committee

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

Dr Ian Gould AM

(PhD DUniv FTSE FAusIMM)

- › Commenced on Board – 1998
- › Attended 7/8 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; Former Member, Economic Development Board; Former Managing Director, Normandy Mining Ltd, Former Managing Director, Rio Tinto – Australia. Past President, Australasian Institute of Mining and Metallurgy. Twenty-six years' service to the RFDS, including terms as an Independent Councillor and President RFDS Australian Council and Deputy Chairman RFDS Central Operations.

Senior Management >

- › **John Lynch** Chief Executive Officer
- › **Tony Vaughan** Deputy Chief Executive Officer
- › **Stephen Batt** Chief Financial Officer
- › **Peter Docking** General Manager, Aviation Regulation & Safety
- › **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

OUR PEOPLE >

Staff Employed >

	Full Time	Part Time*
Management and Administration	34	4
Engineers / Engineering Support	20	1
Health Promotion	1	-
Community Health Workers	1	2
Oral Health Workers	-	2
Mental Health / Drug and Alcohol Workers	3	-
Medical Practitioners	4	2
Pilots	33	1
Fundraising	5	1
Marketing and Communications	1	1
Operations Coordinators	13	1
Registered Nurses	33	29
Tourist Facilities / Merchandising / Other	3	16
General Hands	-	1
Total Staff	151	61

*Part Time Staff includes Casual Staff

Milestones >

Board Member, 20 years >	Dr Ian Gould
Staff, 20 years >	Phil Moran , Port Augusta Manager, Port Augusta Leanne Napier , Operations Coordinator, Port Augusta
Staff, 15 years >	Andy Killcross , Senior Medical Practitioner, Port Augusta Jodie Powell , Executive Assistant, Adelaide Craig Van Cooten , Technical Services Engineer, Adelaide
Staff, 10 years >	Katie Boon , Flight Nurse, Adelaide Damien Heath , Head of Flight Operations, Adelaide Charlie Paterson , General Manager, Marketing & PR, Adelaide Michael Penno , Senior Flight Nurse, Adelaide Phil Remilton , Senior Base Pilot, Port Augusta Vanessa Spaans , Senior Business Analyst, Adelaide Barb White , Senior Flight Nurse, Port Augusta



Port Augusta Community Health Nurses Therese McCourt and Caitlyn Keller with Dr Dustin Mattie on the tarmac at Marree, Birdsville Track, SA.

OUR CORPORATE PARTNERS >

Major Partners



Health Partners



National Partners



Airport Partner



Aircraft Partner



Community Partners



Supporting Partners



Media Partners





OUR COMMUNITY PARTNERS >

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
 Simulator Volunteers

'90 Years' Regional Tour >

Russell Duncan
 District Council of Lower Eyre Peninsula
 Copper Coast Council
 Naracoorte Lucindale Council
 Northern Areas Council
 Renmark Paringa Council
 Whyalla City Council

Community Fundraisers >

Agribusiness Australia
 Anna Villa Ram Sale
 Australian Red Cross Blood Service
 Barkly Rodeo Association Inc
 Beach Energy Corporate Team
 Bill Heycox Christmas Lights
 Border Village Roadhouse – Border Dash
 Bublacowie Military Museum
 Burra Picnic Races
 Campbelltown Rotary Outback Experience
 Challenger Gold Mine Social Club
 Combined Sheep Breeders Auction
 David Meyer (Car 150) Outback Car Trek
 Fletcher Kammerman (Lop the Mop)
 flydoc-australia e.v.
 Gawler Ranges Progress Association
 Geoff Richmond Fundraising Dinner
 Gloria Bristow-Miell (Miells on Wheels)
 Graham Abbott BBQs
 Hangar Op Shop
 Henley & Grange Community Woodworkers
 Jia McGurgan & family
 June Cambridge
 Keith RFDS Op Shop
 Kingoonya Racing Club
 KTM Outback Adventure Rallye 2018
 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
 Millicent Bowling Club
 Motorcycle Riders Association Inc of SA
 Oodnadatta Racing & Horse Sports Inc
 Petroleum Exploration Society of Australia (PESA) Golf Day
 Rebecca Heah & Gary Lewis
 Rotary E-Club of Australia Nomads Inc
 Royal Adelaide Show Wool Exhibitors
 Seymour College Boarders
 Simpson Desert Bike Challenge
 Southern Grassfed Carcass Classic
 Stealth Tools
 Strathalbyn Campdraft
 SYP Community Shop Incorporated
 Tatiara Support Group Op Shop
 Torbreck Vintners Fish's Shiraz
 West Bound Wanderers Car Run
 William Creek Gymkhana
 Winery Engineers of Australia
 William Creek Hotel



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SUMMARY FINANCIAL REPORT >

For the year ended 30 June 2018

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 2018 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 2018 of \$6.3 million (\$3.2 million in 2017)

The result excluding Donations and Sponsorship of \$5.8 million (\$4.7 million in 2017), Legacies and Bequests of \$8.2 million (\$2.4 million in 2017), Net Financial Income of \$2.5 million (\$1.9 million in 2017) and Capital Grants of \$nil (\$2.0 million in 2017) is a deficit of \$10.2 million (\$7.8 million in 2017). This deficit represents the funding shortfall from operational activities.

The surplus generated from non-operational activity (Donations and Sponsorship of \$5.8 million, Legacies and Bequests of \$8.2 million, Net Financial Income of \$2.5 million) has contributed to Total Investments of \$66.7 million (\$55.4 million in 2017). 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 \$63.9 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), three medically-equipped PC-12 aircraft, together with medical, aviation and general equipment upgrades in excess of \$1.0 million per annum.

Date at Adelaide this 20th day of September 2018.

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 2018

	2018	2017
	\$	\$
Revenue	37,112,431	38,066,899
Other income	16,226,579	11,314,743
	53,339,010	49,381,642
Employee expenditure	23,524,256	23,377,586
Aviation fuel	5,137,392	4,509,940
Aviation maintenance	2,391,574	2,729,116
Insurance	563,008	615,458
Depreciation and amortisation	7,096,391	6,425,081
Amortisation of engine and propeller overhaul	2,070,575	1,871,095
Other expenses	8,748,306	8,467,001
	49,531,502	47,995,277
Surplus before financial income and expense	3,807,508	1,386,365
Financial income	2,509,668	1,875,754
Financial expense	-	(33,874)
	2,509,668	1,841,880
Surplus for the period	6,317,176	3,228,245
Other comprehensive income		
Net change in fair value of financial assets	833,020	518,926
	833,020	518,926
TOTAL COMPREHENSIVE INCOME FOR THE PERIOD	7,150,196	3,747,171

SUMMARY FINANCIAL REPORT >

Statement of Changes in Equity >

For the year ended 30 June 2018

	Asset Revaluation Reserve	Asset Realisation Reserve	Capital Grant Reserve	Fair Value Reserve	Retained Earnings	Total Equity
	\$	\$	\$	\$	\$	\$
Balance at 1 July 2016	8,910,806	6,580,285	37,707,004	749,397	98,448,951	152,396,443
Total comprehensive income for the period						
Surplus for the period	-	-	-	-	3,228,245	3,228,245
Changes in fair value of financial assets	-	-	-	518,926	-	518,926
Total comprehensive income for the period	-	-	-	518,926	3,228,245	3,747,171
Transfer (to)/from reserve	-	-	-	-	(2,000,000)	(2,000,000)
Transfer (to)/from retained earnings	-	-	2,000,000	-	-	2,000,000
Total recognised income and expense	-	-	2,000,000	518,926	1,228,245	3,747,171
BALANCE AT 30 JUNE 2017	8,910,806	6,580,285	39,707,004	1,268,323	99,677,196	156,143,614
Balance at 1 July 2017	8,910,806	6,580,285	39,707,004	1,268,323	99,677,196	156,143,614
Total comprehensive income for the period						
Surplus for the period	-	-	-	-	6,317,176	6,317,176
Changes in fair value of financial assets	-	-	-	833,020	-	833,020
Total comprehensive income for the period	-	-	-	833,020	6,317,176	7,150,196
Total recognised income and expense	-	-	-	833,020	6,317,176	7,150,196
BALANCE AT 30 JUNE 2018	8,910,806	6,580,285	39,707,004	2,101,343	105,994,372	163,293,810

Balance Sheet >

For the year ended 30 June 2018

	2018	2017
	\$	\$
Current Assets		
Cash and cash equivalents	3,773,824	4,387,030
Trade and other receivables	3,434,415	3,098,858
Inventories	425,765	359,139
Investments	66,723,619	55,362,717
Total current assets	74,357,623	63,207,744
Non Current Assets		
Property, plant and equipment	96,869,077	100,084,637
Intangibles	265,538	818,648
Total non-current assets	97,134,615	100,903,285
Total assets	171,492,238	164,111,029
Current Liabilities		
Trade and other payables	3,583,002	3,639,451
Employee benefits	3,394,954	3,051,454
Total current liabilities	6,977,956	6,690,905
Non Current Liabilities		
Employee benefits	1,220,472	1,276,510
Total non-current liabilities	1,220,472	1,276,510
Total liabilities	8,198,428	7,967,415
NET ASSETS	163,293,810	156,143,614
Equity		
Reserves	57,299,438	56,466,418
Retained earnings	105,994,372	99,677,196
TOTAL EQUITY ATTRIBUTABLE TO EQUITY HOLDER	163,293,810	156,143,614

SUMMARY FINANCIAL REPORT >

Statement of Cash Flows >

For the year ended 30 June 2018

	2018	2017
	\$	\$
Cash flows from operating activities		
Cash receipts from grants	20,374,640	21,221,814
Cash receipts from customers	17,335,017	16,060,992
Cash paid in the ordinary course of operations	(37,633,300)	(37,890,372)
Cash receipts from tourist activities	2,228,770	2,208,349
Cash receipts from donations, legacies and bequests	8,978,313	6,924,277
Cash paid for tourist activities	(1,759,066)	(2,212,989)
Cash paid for fundraising activities	(1,064,538)	(891,441)
Net cash from operating activities	8,459,836	5,420,630
Cash flows from investing activities		
Acquisition of property, plant and equipment and intangible assets	(4,023,723)	(20,378,695)
Acquisition of engine and propeller overhaul	(1,419,977)	(950,433)
Proceeds from sale of fixed assets	-	2,882,688
Acquisition of investments	(3,787,592)	-
Proceeds from capital grants	-	2,000,000
Proceeds from investments	-	9,793,941
Interest received	46,763	254,394
Dividends received	84,419	113,483
Net cash (used) in investing activities	(9,100,110)	(6,284,622)
Net decrease in cash and cash equivalents	(640,274)	(863,992)
Cash and cash equivalents at 1 July	4,387,030	5,616,883
Effect of movements in exchange rates on cash held	27,068	(365,861)
CASH AND CASH EQUIVALENTS AT 30 JUNE 2018	3,773,824	4,387,030

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.



Independent Auditor's Report

To the members of Royal Flying Doctor Service of Australia Central Operations

Report on the Summary Financial Statements

Opinion

We report on the Summary Financial Statements of Royal Flying Doctor Service of Australia Central Operations (the Service) as at and for the year ended 30 June 2018. The Summary Financial Statements are derived from the audited financial report of Royal Flying Doctor Service of Australia Central Operations (the Audited Financial Report).

In our opinion, the accompanying Summary Financial Statements are consistent, in all material respects, with the Audited Financial Report, in accordance with the basis of preparation described in Note 1 to the Summary Financial Statements.

The Summary Financial Statements comprise:

- Balance Sheet as at 30 June 2018;
- Statement of profit and loss and comprehensive income, Statement of changes in equity, and Statement of cash flows for the year then ended; and
- Related notes.

Scope of the Summary Financial Statements

The Summary Financial Statements do not contain all the disclosures required by Australian Accounting Standards applied in the preparation of the Audited Financial Report. Reading the Summary Financial Statements and the Auditor's Report thereon, therefore, is not a substitute for reading the Audited Financial Report and the auditor's report thereon.

The Audited Financial Report and our auditor's report thereon

We expressed an unmodified audit opinion on the Audited Financial Report in our auditor's report dated 20 September 2018.

Other Information

Other Information is financial and non-financial information in Royal Flying Doctor Service of Australia Central Operations annual reporting, including discussion and analyses, which is provided in addition to the Summary Financial Statements and the Auditor's Report. The Directors are responsible for the Other Information.

Our opinion on the Summary Financial Statements does not cover the Other Information and, accordingly, we do not express an audit opinion or any form of assurance conclusion thereon.

In connection with our audit of the Summary Financial Statements, our responsibility is to read the Other Information.

In doing so, we consider whether the Other Information is materially inconsistent with the Summary Financial Statements or our knowledge obtained in the audit, or otherwise appears to be materially misstated.

We are required to report if we conclude that there is a material misstatement of this Other Information, and based on the work we have performed on the Other Information that we obtained prior to the date of this Auditor's Report we have nothing to report.

Responsibility of the Directors for the Summary Financial Statements

The Directors are responsible for the preparation of the Summary Financial Statements in accordance with the basis of preparation described in Note 1 to the Summary Financial Statements, including their derivation from the Audited Financial Report of the Service as at and for the year ended 30 June 2018.

Auditor's responsibility for the Summary Financial Statements

Our responsibility is to express an opinion on whether the Summary Financial Statements are consistent, in all material respects, with the Audited Financial Report based on our procedures, which were conducted in accordance with *Australian Auditing Standard ASA 810 Engagements to Report on Summary Financial Statements*.

KPMG

Paul Cenko

Partner

Adelaide, 20 September 2018


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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 90 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
- › Email us at enquiries@flyingdoctor.net
- › Visit flyingdoctor.org.au/sant to make an online donation

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 instagram.com/royalflyingdoc
 linkedin.com/company/royal-flying-doctor-service-of-australia/

Where to find us >

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e enquiries@flyingdoctor.net

Alice Springs Base

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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,
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Andamooka Health Service

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Marla Health Service

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Marree Health Service

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Alice Springs Tourist Facility

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Darwin Tourist Facility

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