



A responsive
unified
service

Overcoming
barriers to
healthcare

The Royal Flying Doctor Service has been providing medical services to country Australia since 1928.

As we are soon to celebrate our 90th birthday we've come a long way since our first flight in 1928!

Since the late 1930s the RFDS has been operating in Victoria, Western Australia, South Australia, New South Wales, Northern Territory and Queensland.

By the 1950s the RFDS was acknowledged by former Prime Minister Sir Robert Menzies as "perhaps the single greatest contribution to the effective settlement of the far distant country that we have witnessed in our time".

Today the Service dedicatedly works to maintain and surpass its reputation as Australia's most reputable charity, and to build on expansive medical emergency and primary health services to rural and remote Australia.



Mission

To provide excellence in aeromedical and primary healthcare across Australia

Values

Dedication
Integrity
Innovation

People who live, work and travel in country Australia must have access to emergency medical and primary health services. A universal health system must serve not just those in cities, but also every man, woman and child in rural and remote Australia, and that requires...

A responsive unified service

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Today, more than ever, our services extend well beyond our traditional role of emergency retrieval. The deteriorating health outcomes of rural and remote Australians means our delivery of primary health care is an essential service – a service that is...

Overcoming barriers to healthcare

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2015/16 highlights



26,157,502

kilometres flown by
our fleet of 67 aircraft



283,188

total patient contacts



The Royal Flying Doctor Service is the

most reputable

Australian charity for the 5th year running
(2015 AMR Charity Reputation Index)



8,975

episodes of dental care
provided

90,471
patients transported



62,712
telehealth consultations

14,432
clinics conducted



67 Aircraft and 93 Vehicles

Beechcraft King Air
B200/B200SE/B200C/B350C



Cessna C208



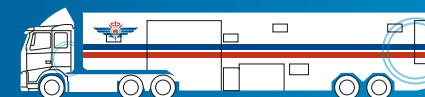
Hawker 800XP



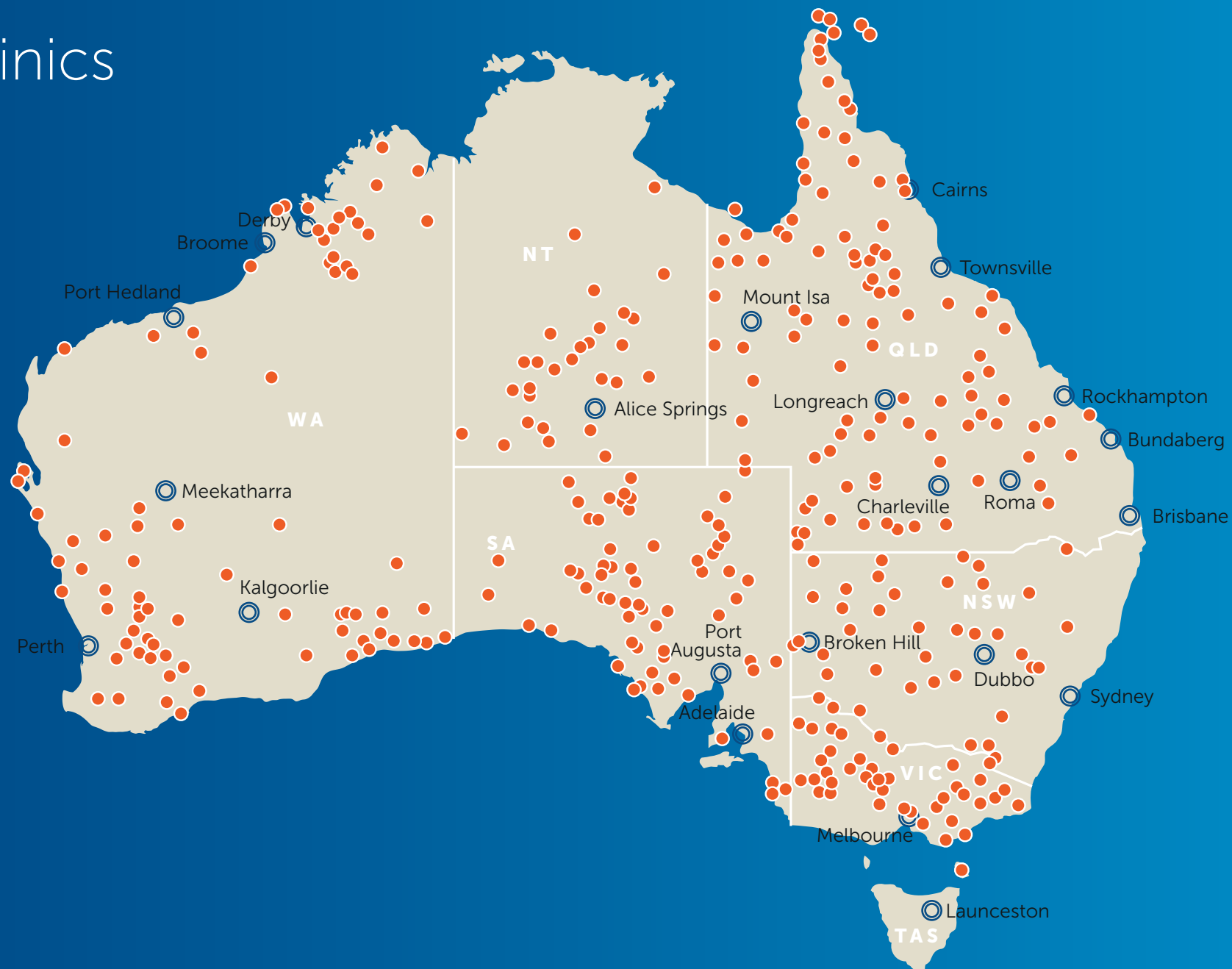
Pilatus PC-12



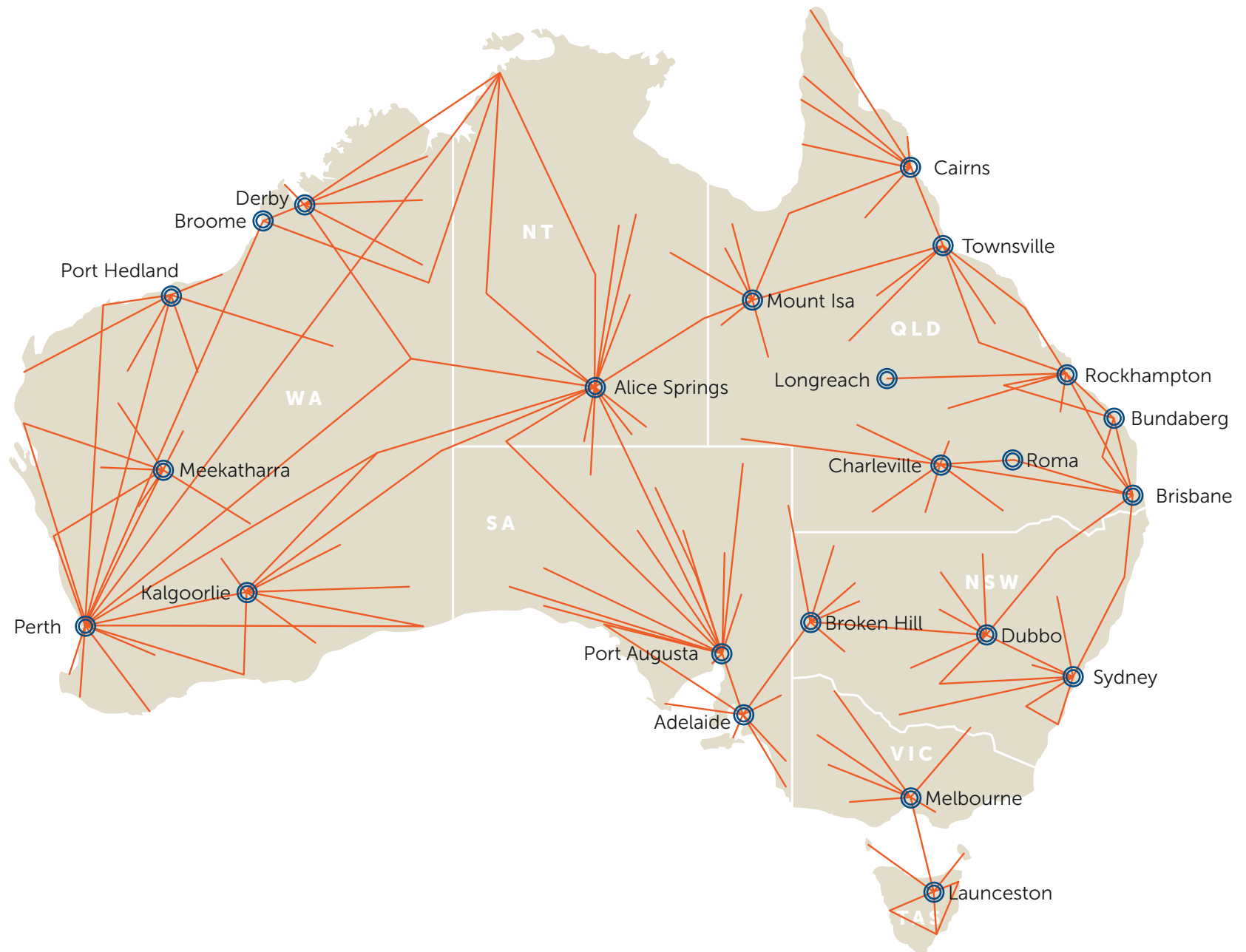
Road Transport
Dental/Oral Health
Eye Care



Bases and clinics



Flight paths



Our teams





Those we serve





Governance

The seven companies of the RFDS Federation ratified an RFDS Federation Agreement in mid-December, which established an unincorporated Joint Venture and brings the companies more closely together in how they will operate in the future. This came into operation from 1 January 2016. An RFDS Board Director and Chief Executive conference was held in February with the purpose of applying that Joint Venture and identifying the key strategic priorities for the RFDS. It also offered opportunity for the RFDS Board Directors from across the country to meet and collaborate.



Chair and CEO report

Australia is big. So big, it's almost impossible for health professionals to be everywhere.

Despite our nation being so big, the Royal Flying Doctor Service has the country covered. It doesn't matter where in our country you are. If you're sick or injured and far from care, the Flying Doctor will bring care to you.

In our 88th year, around 300,000 Australians were cared for by the Flying Doctor. Our professional team of doctors, nurses, dentists, mental health workers, dieticians, pilots, engineers, drivers, fundraisers, and administrators made it possible for country people to get the care they need.

This care was made possible because people like you supported us. Donors made small and large contributions. Governments supported us with service contracts. Groups held events. Families made generous bequests. This combined support meant the Flying Doctor could keep flying.

Left: Hon Amanda Vanstone, Federation Board Chair
Right: Martin Lavery, Federation Chief Executive



Behind the scenes, we made a significant change this year. As a Federation of separate service companies, the Federation of the Royal Flying Doctor Service of Australia came together in a formal joint venture that commenced on 1 January. The Boards of the seven separate Flying Doctor companies signed a Federation Agreement to improve our workings. Indeed, this annual report that details the collective work of these companies over the last year arises from that agreement.

The Boards of the seven companies also committed to further work to unify our companies. A key meeting of all of our Board Directors in February committed to a structural review of our Federation. That review is nearing completion, and it proposes a year of change in 2017. The review says we have to look at how we work to ensure the Flying Doctor is as efficient and effective as it can be in the months and years ahead.

Thanks is owed to the Australian Government. It has confirmed funding for our aeromedical services covering remote Australia until mid-2020. It has also committed new funding to expand Flying Doctor dental services across remote Australia. Thanks is also owed to every State Government and the Northern Territory. The Flying Doctor works on behalf of them all.

Thanks is owed to our dedicated staff, at both bedside and in support roles. The Flying Doctor depends on the almost thirteen hundred people around the country who go to work each day in service of others. Our seven Board of Directors guide and direct the Flying Doctor, and these Directors do so because they want to ensure country people get the best possible service available.

Most importantly, thanks is owed to the generous donors who reach into their pocket to fund our country health services. To volunteers who work and fundraise for us, in our auxiliaries or in communities across Australia, we also say thanks. And we say stick with us, because we need your ongoing help.

With the structural review of the Flying Doctors ready to report, the next year is shaping up as one of our most important yet. We look forward to reporting how we intend to build an even stronger Royal Flying Doctor Service so that it might be here for the next 88 years or more.



Hon Amanda Vanstone
Federation
Board Chair



Martin Lavery
Federation
Chief Executive Officer

Strategic snapshot

We are operating in times of disruption. The world is changing quickly and issues of yesteryear have been replaced with new technologies, challenging economic times, emerging competitors and pressing contestability. This presents a challenge for the RFDS – but in this we see great opportunity.

The RFDS purpose is to provide the best health care across Australia. We have a burning desire to see that the RFDS continues Flynn's legacy of innovation to provide even better medical and health services across Australia.

In December 2015 a joint venture agreement was signed by all RFDS companies, allowing them to work together to tackle the challenges these times present. A meeting of all officers and directors of the RFDS companies was held in February and there was unanimous agreement that over the next 12 months the RFDS will achieve the following:



Review and assess current RFDS structure to expand services and improve health outcomes for rural and remote Australians.



Create an enabling environment for positive change across the RFDS organisations.



Enhance the RFDS voice, reach and support by developing a single unified brand and its management.













Encourage innovation and harness technology to better deliver emergency and primary health services across the country.



Leverage resources and capacity by sharing services where there is an economic and output benefit.



Strategic progress

KEY FOCUS	PERFORMANCE TARGETS	ACHIEVEMENTS	STATUS	2016/17 OBJECTIVES
 RFDS structure	<ul style="list-style-type: none"> > Review existing structure > Options for change 	<ul style="list-style-type: none"> > Structure reviewed > Options presented 		Expand services and improve health outcomes for rural and remote Australians.
 Environment for change	<ul style="list-style-type: none"> > Voice a powerful and transparent call for change > Plan for contingencies 	<ul style="list-style-type: none"> > Boards engaged in case for change 		Enabling environment created for positive change across the RFDS organisations.
 Single unified brand	<ul style="list-style-type: none"> > Update mission statement > Update RFDS values 	<ul style="list-style-type: none"> > Proposal made to boards to refresh purpose statement 		RFDS voice, reach and support enhanced with development of a single purpose and its management.
 Innovation and technology	<ul style="list-style-type: none"> > Research into opportunities > Assess viability and service enhancement > Implementation 	<ul style="list-style-type: none"> > Research underway 		Innovation encouraged and technology harnessed, to better deliver emergency and primary health services across the country.
 Shared services	<ul style="list-style-type: none"> > Research into opportunities 	<ul style="list-style-type: none"> > Research underway 		RFDS resources and capacity leveraged by sharing services where there is an economic and output benefit.

Clinical snapshot

Remote and rural Australians have up to three times the prevalence of avoidable chronic illness than people in cities. They see doctors at half the rate of people in cities and they face an average two years shorter life expectancy than people in cities.

More than one-third of remote area residents are living with untreated tooth decay, compared with 23% in major cities. Similarly, more than one-third of people in remote areas have gum disease, compared with 22% in metropolitan areas.

These statistics present challenges for the Royal Flying Doctor Service but are fundamentally the mission of the organisation.

By steadily building service capability, efficiency and reach across all Australian states and territories, the Flying Doctors is working to reduce the disparity in health outcomes for country Australians.



Aeromedical retrieval

24/7 emergency medical retrievals in rural and remote areas



GP and nurse clinics

Primary health clinics made available to communities in country Australia



Telehealth

24/7 remote consultations with a qualified doctor and serviced by more than 3,000 medical chests around Australia



Dental

Regular dental services for basic oral health as well as emergency and restorative dental care



Other

Patient transport, health education, mental health and specialist services made available to remote communities



Increased services progress

	2015/16	PER DAY	2014/15	2013/14	2012/13	2011/12
Total patient contacts	283,188	795	292,523	282,000	295,156	273,731
Aeromedical retrievals	37,252	102	64,673	54,705	51,651	40,705
Patient road transportations	53,159	145	26,952	-	-	-
Primary health care clinics	14,432	40	15,248	16,096	15,819	14,412
Episodes of dental care	8,975	24	9,845	9,861	6,913	-
Telehealth consultations	62,712	176	92,776	82,305	89,516	88,530
Staff numbers (headcount)	1,358	n/a	1,224	1,144	1,163	1,150
Staff FTE (fulltime equivalent)	1,072	n/a	1,059	978	957	916
Medical chests	2,245		2,359	2,532	2,568	2,431



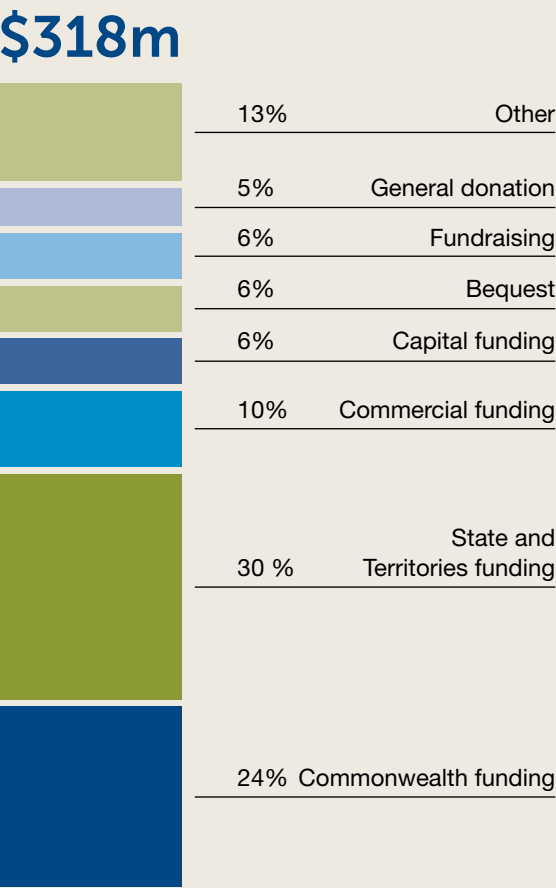
The deteriorating health outcomes of rural and remote Australians means our delivery of primary health care is an essential service.



Revenue

Where it comes from

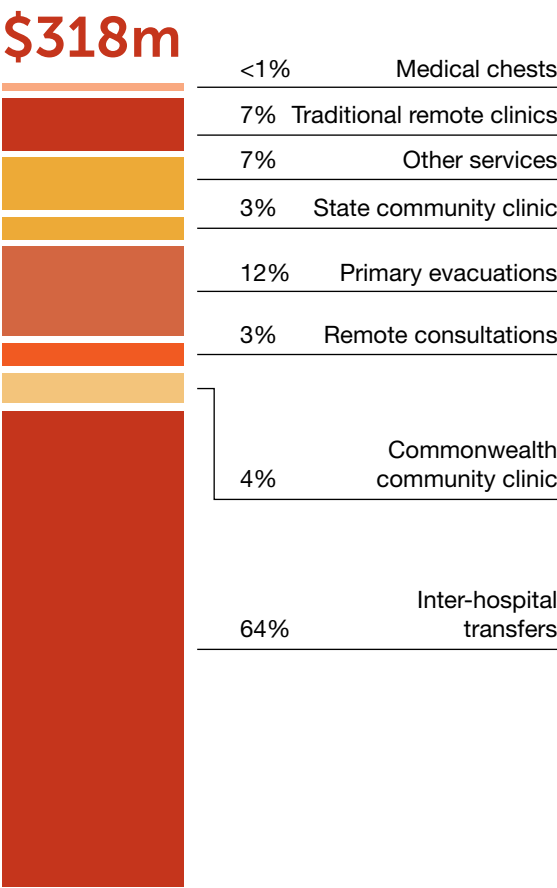
The RFDS is a not-for-profit organisation. While supported by the Commonwealth, State and Territory Governments, the RFDS companies rely heavily on fundraising, bequests and donations from the community to purchase and aeromedically fit-out our aircraft, purchase vital medical equipment and enhance our operational facilities.



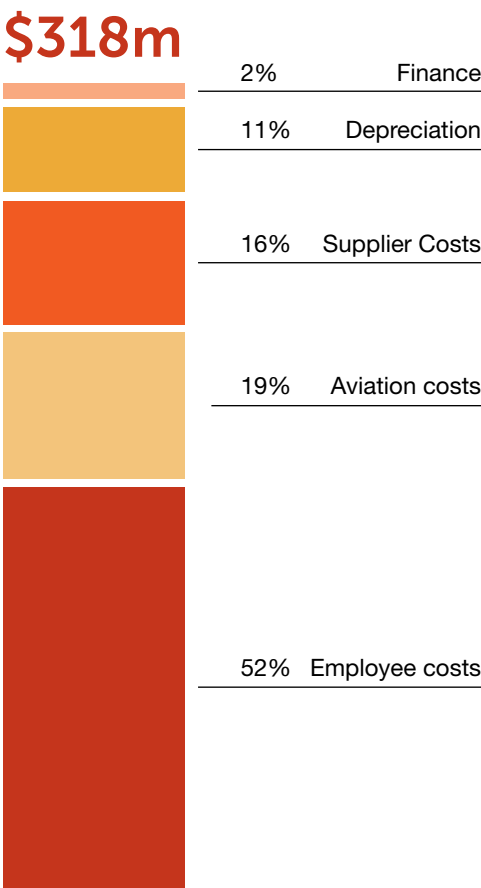
Where it is applied

Providing vital emergency and primary health services to rural and remote Australia comes at a cost. The Flying Doctor invests in medical & health facilities, aircraft and road service vehicles, vital medical equipment and infrastructure to build on service capability. The express purpose is to reduce the disparity in health outcomes between the city and the bush.

EXPENDITURE BY SERVICE



EXPENDITURE BY CATEGORY



Investing in country Australia's health

New locations

RFDS Western Operations opened a new aerobase in Broome, with two aircraft hangars and a state-of-the-art patient treatment centre.

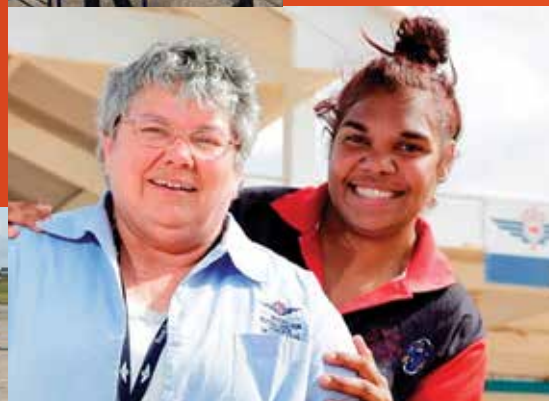


New aircraft and health service vehicles

RFDS VIC extended their fleet of patient road transport vehicles to a total of 87, RFDS Qld has a new King Air aircraft, RFDS Central has a new Pilatus PC-12 aircraft and both RFDS Western Operations and Central have Pilatus PC-24 jets ordered for delivery in 2018.



New medical and health services



RFDS South Eastern Section launched a fleet of Patient Transfer vehicles as an extension of their traditional aeromedical operations. A Post-Hospital Care program was launched from Broken Hill and an additional mental health professional was added to the Broken Hill team. Thanks to a State Government \$4.7 million upgrade of the Silver City Highway, a new, sealed airstrip now serves isolated communities near Shannons Creek in far-western New South Wales.

Victoria commenced provision of patient (road) transport both high acuity transports and extended contracts with Ambulance Victoria. Two new metropolitan branches have been established and recent work has seen the co-location with South Eastern Section at Essendon. RFDS Victoria's new eye care services in West Wimmera and East Gippsland have expanded the number of patients receiving optometry services by over 300% and treatment using the new Flying Doctor Dental Clinic commenced in January, with excellent results. Further, 'Look over the Farm Gate', a collaborative initiative funded by the Victorian Government as part of drought relief funding, commenced.

New offices for Central Operations at the Adelaide Airport are on track to be completed on time and under budget, with the move to new offices to commence in August.

Primary health clinics

RFDS Central Operations now provides primary health care services to Andamooka, Marla and Marree communities in partnership with SA Health.



Statement of profit or loss and other comprehensive income

Compilation of Financial Statements for 2015/16

FOR THE FINANCIAL YEAR ENDED 30 JUNE 2016

	Central \$'000	Victoria \$'000	Queensland \$'000	South East \$'000	Western \$'000	Tasmania \$'000	Federation Company \$'000	TOTAL
Operating Revenue	34,629	24,460	79,866	49,260	71,180	174	2,091	261,660
Other income	11,236	419	13,473	21,783	26,601	1,584	459	75,555
Total Revenue	45,865	24,879	93,339	71,043	97,781	1,758	2,550	337,215
Employee expenditure	21,699	16,533	44,011	30,032	45,028	320	1,472	159,095
Aviation expenses	8,468	-	20,108	16,163	18,388	-	-	63,127
Depreciation and amortisation	4,996	1,029	9,544	9,005	8,337	55	81	33,047
Other expenses	8,142	7,011	24,076	9,596	11,416	548	1,567	62,356
Total Expenses	43,305	24,573	97,739	64,796	83,169	923	3,120	317,625
								-
Surplus / (Deficit) before financial income and expense	2,560	306	(4,400)	6,247	14,612	835	(570)	19,590
Financial income	2,347	-	996	1,530	-	-	-	4,873
Financial expense	(646)	(115)	-	-	-	-	-	(761)
	1,701	(115)	996	1,530	-	-	-	4,112
								-
Surplus / (Deficit) for the period	4,261	191	(3,404)	7,777	14,612	835	(570)	23,702

Note: This report is not a Consolidation Statement rather a summary of separate RFDS Company Statements as published in Annual Reports.

Federation Company figures are net of funding distributions which are included in other RFDS Company Statements.

Statement of financial position

Compilation of Financial Statements for 2015/16

AS AT 30 JUNE 2016

	Central \$'000	Victoria \$'000	Queensland \$'000	South East \$'000	Western \$'000	Tasmania \$'000	Federation Company \$'000	TOTAL \$'000
Current Assets								
Cash and cash equivalents	5,617	3,375	28,551	18,987	38,633	1,478	4,092	100,733
Receivables, Inventories, Other	2,089	2,342	6,329	8,560	13,928	25	1,395	34,668
Investments / Financial Assets	62,931	5,412	8,669	35,611	2,096	-	437	115,156
Total current assets	70,637	11,129	43,549	63,158	54,657	1,503	5,924	250,557
Non Current Assets								
Property, plant and equipment	90,196	12,713	95,624	108,537	82,433	375	131	390,009
Other Non Current Assets	719	200	-	6,834	266	6,485	34	14,538
Total non-current assets	90,915	12,913	95,624	115,371	82,699	6,860	165	404,547
Total assets	161,552	24,042	139,173	178,529	137,356	8,363	6,089	655,104
Current Liabilities								
Trade Payables / Other	4,746	3,922	7,548	4,898	19,110	54	3,030	43,308
Employee benefits	3,313	951	6,100	5,165	2,306	18	112	17,965
Total current liabilities	8,059	4,873	13,648	10,063	21,416	72	3,142	61,273
Non Current Liabilities								
Financial Liabilities	-	1,874	-	-	3,799	-	34	5,707
Employee benefits	1,097	244	1,311	581	1,875	-	9	5,117
Total non-current liabilities	1,097	2,118	1,311	581	5,674	-	43	10,824
Total liabilities	9,156	6,991	14,959	10,644	27,090	72	3,185	72,097
Net assets	152,396	17,051	124,214	167,885	110,266	8,291	2,904	583,007
Equity								
Reserves	53,947	877	1,642	6,125	20,118	6,274	-	88,983
Retained earnings	98,449	16,173	122,572	161,761	90,147	2,016	2,905	494,023
Total equity	152,396	17,050	124,214	167,886	110,265	8,290	2,905	583,006

Note: This report is not a Consolidation Statement rather a summary of separate RFDS Company Statements as published in Annual Reports.






The Federation

The Federation Company office of the RFDS was opened in Canberra in January 2015, and from this permanent home, works against four express purposes:

- > Manage the RFDS Federation's funding and regulatory relationship with the Commonwealth Government;
- > Build a public policy voice for better health outcomes for country Australians;
- > Distil a strategic vision for the betterment of the shared mission of the Federation parties;
- > Facilitate communication and information sharing from and between the Federation parties.



KEY OUTCOMES

-  RFDS structure
-  Environment for change
-  Single unified brand
-  Innovation and technology
-  Shared services

We are grateful for an extension on the **RFDS Federal Government contract** until 2019/20, as well as an \$11 million grant to extend Flying Doctor dental outreach programs across rural and remote Australia.

The seven companies of the RFDS ratified an RFDS Federation Agreement in mid-December 2015, which established a **unincorporated Joint Venture** and brings the companies more closely together in how they operate. This came into operation from 1 January 2016.



An RFDS **Board Director and Chief Executive conference** titled 'Focus on the Future', was held in February 2016. As a result the key strategic priorities for the RFDS were identified, and RFDS Board Directors and CEOs from across the country were able to meet and collaborate.



A sub-committee of the RFDS Federation Board, comprising of the Board Chairs of each Section, undertook a project to **review the RFDS structure** project, with recommendations and decisions to be made by year-end 2016, and implementation over the next several years.



The RFDS Federation Office Research and Policy Unit, established a year ago, has now produced **three peer-reviewed research publications** with these broadly communicated to industry and government, to the result of policy adoption and increased funding for RFDS health service provision.



To enhance the RFDS voice, reach and support by developing a **single unified brand** and its management, the CEO Working Group have commissioned Porter Novelli/Clemenger Group, for project launch in 2017.



As part of 2016 Federal Election, the first RFDS **public policy statement** was published, calling for a public enquiry into the rural health crisis, funding to extend the Flying Doctor dental outreach program, and a national plan to reduce accidents and injuries in rural and remote Australia. This policy statement obtained extensive media, including ABC *Lateline*, ABC TV and radio coverage, as well as publications and commercial radio.





RECONCILIATION ACTION PLAN

The RFDS respects and acknowledges Aboriginal and Torres Strait Islander people as the first Australians, and is committed to improved health outcomes and access to health services for this population group.

The RFDS formalised this commitment in 2016 and released its first Reconciliation Action Plan (RAP). The RAP was developed as a means of committing the RFDS to the 'Close the Gap' campaign in order to improve both health outcomes and access to health services for Aboriginal and Torres Strait Islander Australians.



Our first RAP will see the Flying Doctor across its seven-million-square-kilometre service network undertake:

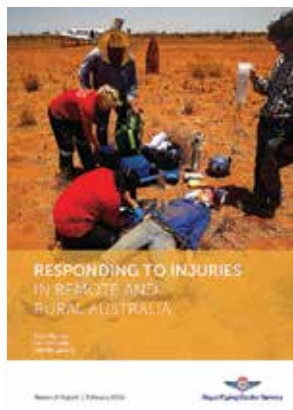
- > Detailed collection and publication of Aboriginal and Torres Strait Islander patient health data to inform RFDS health service planning;
- > Collection and publication of service satisfaction data from Aboriginal and Torres Strait Islander patients to inform the cultural responsiveness of RFDS services;
- > Identification of promising Aboriginal and Torres Strait Islander health and aviation students for participation in a scholarship and mentoring scheme;
- > A RAP Implementation and Monitoring Group with representatives from all Sections and Operations has been established to champion and oversee the implementation of the RAP throughout the RFDS Federation.

The RFDS RAP will also see the Flying Doctor's Research and Policy Unit focus on developing solutions to disparities in health outcomes between Indigenous and non-Indigenous Australians, with the first RFDS research paper focused solely on the Aboriginal and Torres Strait Islander people to whom the RFDS provides services, being completed and published in late 2016.

Research papers

ACCIDENTS AND INJURIES IN REMOTE AND RURAL AUSTRALIA

A research report released in March 2016 found up to \$1 billion in hospital savings are possible if a new strategy to prevent accidents and injury in rural and remote Australia is adopted. Across every measure, rates of injury and associated death are higher in country Australia than in major cities.



Responding to Injuries in Remote and Rural Australia defines remote and rural, considers the general health status of remote and rural Australians and describes the role of the RFDS in providing primary health care and other services in remote and rural regions. It introduces the injury literature, defines injuries, describes how injuries are classified and reported. It also presents international and national data on the impact of injuries by considering emergency department presentations, hospitalisations and deaths due to injuries.

The paper reviews the types, causes and impacts of injuries in remote and rural Australia, and describes the role of the RFDS in responding to those injuries. It also includes a data review around Indigenous Australians, children and agricultural workers, who experience injuries at even higher rates than other people in remote and rural communities. There is also consideration of the social determinants of health and injury risk factors, with a description on how these influence the incidence and prevalence of injuries in remote and rural Australia.

The paper concludes with eight-evidence-based recommendations and solutions that could be implemented to prevent injuries or reduce the impact of injuries in remote and rural Australia.

Responding to Injuries in Remote and Rural Australia, or a summary of its findings and recommendations, were sent to industry and government, as well as published broadly across media channels including TV, radio, national newspapers, social platforms and industry periodicals. A copy of this publication can be downloaded from www.flyingdoctor.org.au/research.

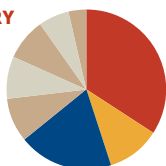


CHILD DEATH BY INJURY

36%

More children in Australia die from

- injuries (36%), than from
- cancer (19%) and diseases of the
- nervous system (11%) combined.



3.5x

MORE LIKELY TO DIE FROM ACCIDENTAL POISONING

Death rates from poisoning are 3.5 times higher in remote and 2.5 times higher in very remote areas, than in major cities.

271



TWO-THIRDS OF DROWNINGS OCCURRED IN COUNTRY AUSTRALIA

Last year 271 people drowned in Australia – with a disproportionate two-thirds of drownings occurring in rural and remote areas.

INDIGENOUS HEALTH

The first RFDS research paper into Indigenous Health was completed and released in October 2016. Around half the 300,000 people that the RFDS cared for in 2016 were Aboriginal and Torres Strait Islander people, mostly located in remote parts of Australia.



Providing Aeromedical Care to Remote Indigenous Communities highlights the significant impact of illnesses and injuries on Indigenous Australians, and the role of the RFDS in providing aeromedical retrievals to ensure equity of access to care for sick or injured Indigenous Australians in remote and rural areas. The paper presents both quantitative data around the illnesses and injuries experienced by Indigenous Australians who are transported by the RFDS to receive medical care in a tertiary hospital, and descriptive data around the other services the RFDS provides to Indigenous Australians.

The research paper presents national data on the causes of Indigenous deaths and hospitalisations, and specific information around remote and rural Indigenous health. It considers options to address key illnesses and injuries amongst Indigenous Australians in remote and rural areas of Australia served by the RFDS. It also considers appropriate, cost-effective and policy-relevant solutions.

Furthermore, it provides the platform for discussions between Indigenous and non-Indigenous service delivery organisations, researchers, policymakers, corporate and private sectors, and philanthropic organisations, to identify collaborative and innovative approaches to improving the health status of remote and rural Indigenous Australians and to reducing the incidence, prevalence and impacts of illnesses and injuries that require emergency treatment in a tertiary hospital, for Indigenous Australians served by the RFDS.



Common reasons for Indigenous aeromedical retrieval by the RFDS:

- > Injury, poisoning and certain other consequences of external causes (17.9%)
- > Diseases of the circulatory system (14.4%)
- > Diseases of the respiratory system (12.8%)
- > Diseases of the digestive system (7.8%)
- > Pregnancy/childbirth (7.2%)

17,606

**INDIGENOUS AUSTRALIANS
UNDERWENT AN RFDS
AEROMEDICAL RETRIEVAL**



Between 1 July 2013 and 31 December 2015.

19.3



**INDIGENOUS PATIENTS ARE
TRANSPORTED BY THE RFDS EVERY DAY**

Transportation is to a tertiary hospital for definitive care for an illness or injury.

CLINICAL RESEARCH COMMITTEE

The RFDS has recently established a Clinical Research Committee to provide oversight and guidance on clinical research activities to be undertaken within the RFDS. The Committee is comprised of highly experienced and accomplished clinical and research experts from throughout the health sector: Professor David Lyle; Professor John Gleeson; Professor Leigh Kinsman; Dr Phil Tideman; Dr Stephen Langford; Dr John Woodall; and Dr Oscar Whitehead, with support provided by Federation Office's Research and Policy Unit. The Committee had its first meeting in May, and will shortly finalise a strategic plan for RFDS clinical research before pursuing possible projects. A consumer and Indigenous representative have also been invited to join the committee.

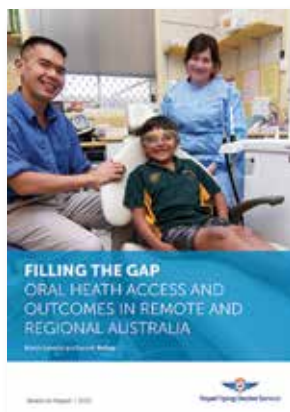
DENTAL HEALTH FUNDING

In September 2015 the RFDS released the research paper *Filling the Gap: Disparities in Oral Health Access and Outcomes for Remote and Rural Australia*, which demonstrated the lack of dental services in rural and particularly remote areas of Australia. Over recent years, the RFDS has established dental health services in Queensland, New South Wales, Victoria, Tasmania, South Australia and Western Australia. Through an outreach service model, more than 20,000 Australians received dental care from the RFDS between 2013 and 2015, in remote and rural areas where dental services are not otherwise readily or sustainably available. However, in a large majority of locations where RFDS services are offered, demand consistently exceeds supply and high levels of need have been demonstrated.

After presenting this case to government, during the 2016 election campaign, the Commonwealth committed \$11 million over two years for the RFDS to continue providing its current suite of dental services, and to expand service provision to enable access for more remote and rural Australians in underserved areas. These services will commence in January 2017.



RFDS SE Section dentist with patient Bridget in Collarenebbri.



Through an outreach service model, more than 20,000 Australians received dental care from the RFDS...

CHILDREN IN REMOTE AREAS HAVE 2X MORE TEETH FILLED

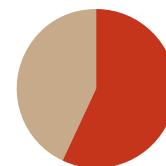
The number of filled teeth in remote area children is double than for children in major cities.



57%

OF INDIGENOUS AUSTRALIANS HAVE TEETH AFFECTED BY DECAY

More than half (57%) of Indigenous Australians have one or more teeth affected by decay.



CHILDHOOD CAVITY RATES



55%

HIGHER FOR REMOTE AREA CHILDREN

Childhood cavities are 55% higher for remote area children than children in major cities.

Community social channels

The RFDS operates across five separate social media channels to remain engaged with supporters and the general community. All RFDS Sections have access to and use the joint social media accounts, following agreed Federation office guidelines.



In the last year, engagement on the RFDS Facebook platform has continued to build. The milestone of 100,000 followers was reached and as the financial year closed we reached 118,000, which is an increase of 20,000 and equates to 54 new followers each day. With a story, article or photo posted every day on the channel, there is an average of 40,000 engagements (likes, shares or comments) and a reach of at least 264,000 per post. The RFDS Facebook account is in the top 10 of Australian national not-for-profit charities, and routinely in the top 3 for engagement and participation by our supporters.

Flying Doctor Facebook content is story-based and not focused on fundraising. It encourages conversation and engagement around stories about patients, staff, fundraising and volunteers. It helps supporters to be involved with and contribute to the Flying Doctors, in whatever way they wish.



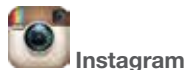
The RFDS uses Twitter daily to communicate news, events and general public interest stories of the Flying Doctor. We have 8,200 followers, which is an increase of 17% from last year. The majority of Twitter followers are between the age of 22 and 44, with an average of three to four new followers every day. In any given week the hashtags #FlyingDoc and #RFDS have a reach of 16,000 to 47,000 accounts weekly, with between 18,000 and 80,000 impressions.



With a reach to those working in the health and medical industry, the RFDS LinkedIn account has steadily grown to 4,200 followers (an increase of 30% in 12 months). This social media channel is being used to promote positions vacant within the RFDS, provide career information about the Flying Doctor, as well as publish industry-focused information.



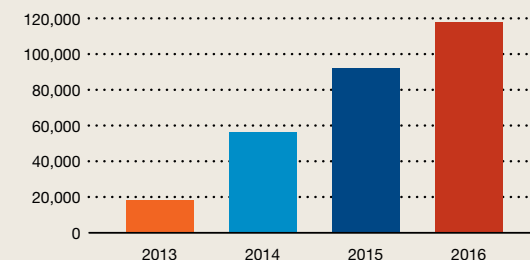
The RFDS website, Twitter and Facebook all rely on YouTube to communicate compelling stories of the Flying Doctor. The RFDS YouTube channel continues to grow in popularity, with 672 subscribers and 118,549 total views of our video library in the last year, for some 800 hours of viewing (an increase of 20,000 views, and more than 50 viewings of our videos daily). Patient stories, news stories, Flying Doctor events and even Running Man videos have all played a role on this social media channel in the last 12 months.



The youngest of our social media channels, Instagram, is all about imagery seen through the eyes of the Flying Doctor. In the last year our followers increased from 1,411 to 3,689, with some 150 photos that communicate the vital work that the Flying Doctor does in rural and remote Australia.



Number of Facebook 'Likes'



Queensland Section

Left William Mellor, Chairman
Right: Nino Di Marco, Chief Executive Officer



QUEENSLAND CHAIRMAN'S REPORT

This past year has been a challenging one for the Queensland Section. It has been a year where change, capital investment and continuous improvement across our aviation and health platforms has become the new normal.

Our operational teams have worked tirelessly throughout, successfully achieving full health service accreditation credentialing against each of the 10 National Quality and Health Safety Standards. This is an important independent and objective measure of the high standards of our patient care across our aeromedical and primary health care programs, and we are proud to be amongst the first aeromedical providers in Australia to have achieved this.

At a Commonwealth level, Queensland Section remains committed to its role in providing 24/7 aeromedical services in rural and remote Queensland, telehealth services, primary health care clinics and mental health services.

We are buoyed by the news that our Traditional Services Contract with the Commonwealth will be extended until mid-2020, enabling us to confidently explore ways to improve the way we deliver the finest care to the furthest corners of Queensland.

At a state level we are proud to have continued our influential role in the state's inter-hospital network having transported 9, 937 patients across the state this financial year.

We have also been busily preparing for the introduction of the larger B350C Super King Air into our fleet, with the capability to carry up to three stretcher patients and travel non-stop to Brisbane from places such as Cairns and Mount Isa – currently beyond the normal range of our B200 fleet. Thanks to community support, we have purchased three new B350s, costing in excess of \$10 million each, and are excited that the first two of these will be operating from the second half of 2016.

We are also in the process of implementing positive changes to our pilot training and checking practices, with the announcement of a dedicated B350/B200 flight simulation centre on the Sunshine Coast, later this year. This new centre is a joint venture between Ansett Aviation and Maroochydore-based Universal Training Systems, with RFDS (Queensland Section) proud to be its launch customer.

Through individual donations, generous bequests, corporate sponsors, community fundraisers and our loyal volunteer

auxiliaries we were able to raise just under \$10 million to allow us to invest in our people, services, aircraft and medical equipment as needed.

Our sincere thanks must go to our Principal Sponsors who have achieved some impressive milestones this year. Ergon Energy Retail, through the ongoing success of its voluntary donation scheme, surpassed \$10 million in accumulated funds donated. This achievement was celebrated with Open Days at our Townsville and Rockhampton Bases in November and December.

We were also pleased to see Brisbane Airport Corporation extend its generous in-kind sponsorship of the RFDS for a further two years. In 2015/2016 there were 3,835 RFDS aircraft landings at Brisbane Airport underlining the strategic importance of the proximity of our Brisbane Base to many of our state's leading tertiary hospitals.

QCoal Group, through its QCoal Foundation, continued its significant contribution by substantially funding the QCoal Community Dental Service, which has surpassed the impressive 7,000 patient milestone, achieved since its inception three years ago. We look forward to QCoal Group's continued support of this innovative program.

14,800
telehealth consultations

4,000
immunisations

\$2.5m
in oral health
service provided



Above: Ride West cyclists rode from Brisbane to Longreach to raise money for the RFDS mental health programs.
Below: Local Hero Awards were held across the state recognising volunteers who support the work of the Flying Doctor.



7.75m
kilometres
flown

10,900
aeromedical
patient transfers

We are thrilled to be partnering with all Woolworths stores in Queensland later in 2016, for an instore Flying Doctor campaign. This follows a successful pilot program in Mount Isa and Cloncurry last September, where shoppers purchased tokens in support of their local RFDS service.

We were also generously supported by a number of philanthropic trusts and foundations, which enabled the purchase of numerous items of medical equipment, including: pressure relieving devices; blood warmers; neo-natal cots and several patient monitoring devices. Our thanks to:

- > Julian Burton Burns Trust
- > Gambling Community Benefit Fund
- > Peta Seymour Foundation
- > John Villiers Trust
- > Collier Charitable Foundation
- > Aurizon Community Giving Fund, and
- > Humpty Dumpty Foundation.

In particular we are most thankful to our 11 Volunteer Auxiliary Groups, often considered the 'faces of the RFDS' in their far-flung communities, who collectively raised in excess of \$230,000 contributing to the purchase of further medical equipment across our nine Bases.

In recognition of our community supporters, we were delighted this year to have launched a new program – the RFDS Local Hero Awards, proudly supported by Ergon Energy, to acknowledge the 'unsung heroes' across Queensland that assist us to provide the finest care to the furthest corner. Among the many worthy award recipients included aircraft refuellers, emergency service volunteers, medical chest holders, fundraisers and auxiliary members.

Other highlights of the year included:

- > Our inaugural RFDS 'Wings for Life' Gala Ball, held in August at the Brisbane Convention and Exhibition Centre, which raised around \$120,000 thanks to the generosity of 670 guests and key sponsors, in particular Diamond Event Partners, Hawker Pacific and Textron Aviation.
- > The Ride West cycling challenge, which raised \$200,000 towards our mental health programs centred across drought affected western Queensland.
- > The continued support of the Birdsville Racing Carnival with the RFDS as the official charity partner.
- > The launch of the RFDS Kokoda Challenge, involving a group of over 20 individuals who will walk this iconic trek in support of the Flying Doctor in November.
- > Community support from events including the CondonTreasure Ball, Reedybrook Ashes, Santa Gertrudis Breeders Competition, Nindigully Pig Races, Mates on Mountain Bikes and many more.

We continue to be grateful to our Patron, His Excellency the Honourable Paul de Jersey AC Governor of Queensland, who takes every opportunity to express his support for the RFDS including recently visiting the RFDS Wellbeing Centre at Aurukun, which focuses on addressing issues such as drug and alcohol misuse, gambling, family violence, mental health and wellbeing, in collaboration with Local Advisory Groups, local staff members, Elders and other community stakeholders.

I remain immensely proud of our operational staff for continuing to deliver the finest care to the 95,000 people for whom we provided vital health services this past year, during this period of significant change. It is thanks to their passion and dedication that our reputation as a trusted health service provider is upheld.

To our CEO, Nino Di Marco, his management team, Queensland Section staff and all the wider RFDS family, we are grateful for your persistent and unwavering efforts this past year, and look forward to our much anticipated service aspirations being realised in the year ahead.

William Mellor
Chairman, RFDS Queensland Section

QUEENSLAND CHIEF EXECUTIVE OFFICER'S REPORT

This financial year has proven to be another successful one, with sustained demand for our 24/7 aeromedical services and primary health care programs and continued success of our mental and oral health programs.

Considerable efforts have been made over the past 12 months to bolster aircraft and equipment capacity, ensuring the highest possible standards of quality and safety are achieved.

Congratulations to our Clinical Governance team, and all those involved, for taking us on the journey, over the past two years, to achieve full health service accreditation under the National Quality and Health Safety Standards in June.

There have also been considerable developments in the aviation side of our business as we rise to the challenges of regulatory reform, which will see the RFDS comply with the same stringent standards as passenger airlines by the end of 2017.

We are currently preparing to introduce three new B350 Super King Airls to our fleet in the second half of 2016, which will significantly enhance our patient transport services and response capability. This has resulted in considerable policy and procedural changes including pilot training, cabin safety training and mastering new patient loading systems, as we conduct business as usual.

Demand for our mental health services remains strong. Our Drought Wellbeing Program has been successfully rolled out across central and western Queensland, with our newly appointed team of clinical psychologists responding to a

growing number of referrals. Pleasingly, funding for this valued program has been extended until 2017/2018.

The QCoal Community Dental Service continues to provide vital oral health care, this year passing the 7000th patient milestone. We were delighted to host the Minister for Rural Health, Senator Fiona Nash, and Senator Barrie O'Sullivan on a visit to the service in Winton. This visit ultimately led to a commitment by the Turnbull Government for a new RFDS national dental outreach program fund, based largely on this mobile service model.

Regrettably our involvement in the Commonwealth-funded Rural Women's GP program has come to an end, after a period of 20 years of continuous RFDS involvement. Efforts are underway to transition these services to alternate providers.

In other transitional arrangements, we have successfully transferred management of the RFDS Charleville Health Clinic across to the South West Hospital and Health Service, to ensure continuity of services for the Charleville community and closer linkages with the local hospital's outpatient services.

With ever increasing pressure on state and federal governments' budgets, the RFDS continues to rely on the generosity of our loyal donors, bequestors, corporate sponsors and community fundraisers and volunteers. We gratefully appreciate their unwavering support.

Nino Di Marco
Chief Executive Officer
RFDS Queensland Section



This year RFDS provided 4,810 primary health clinics in Queensland.



The QCoal Community Dental Service this year reached the 7000th patient milestone.

INTRODUCING OUR NEW B350C SUPER KING AIRS

In March last year, RFDS (Queensland Section) collected the first of three new B350C Super King Airs from Beechcraft in Wichita, United States.

Pilots, Captain Warren Schmitt and Captain Ross Neil travelled to the USA to undergo special training on the new aircraft, before flying the new aircraft back to Cairns. The journey was an incredible experience for our Pilots, seeing them touch down in 13 different countries, over a staggering 14,666 nautical miles.

The Pilots took off from Wichita on 12 March 2015 and 'land hopped' their way home, through Canada, Europe, Africa and Asia, even flying over the night lights of Reykjavik in Iceland, the Swiss Alps and the Nile River in Egypt. The new aircraft was then delivered to Hawker Pacific in Cairns, for its aeromedical fit-out.

The new aeromedical fit-out is highly streamlined, with all medical 'plumbing' (such as oxygen, suction, etc.) being fitted internally, to maximise space and safety. The aircraft has the potential to carry three stretcher patients, as well as two medical staff, to enable the transport of more patients non-stop to Brisbane, from regional centres such as Cairns and Mount Isa.

Another highlight of the new B350 is the new Medic-Air SLD320 Loader, patient loading system. This technology was designed by GVH Aerospace and provides zero-lift, roll-on/roll-off, automatic ground-to-cabin patient loading. This means RFDS staff no longer have to perform any lifting when loading patients, which will revolutionise the way aeromedical retrievals are performed.

In May 2016, the handover of the first of our B350s to Cairns Base staff commenced. It is expected to be operational in the coming months. The second B350 is currently with Hawker Pacific, undergoing its aeromedical fit-out.

In early August 2016, the third and final B350C will be collected from Beechcraft in the USA. This aircraft will be the first of its type in Australia, with a state-of-the-art avionics suite, including touch screens to improve situational awareness. The aircraft is expected to arrive in Australia in the last week of September.

B350C Super King Air Facts

- > Maximum take-off weight of 7,484kg; approximately 1,800kg heavier than B200
- > A cabin length of 24 feet, 10 inches (7.6m); approximately 2 feet longer (0.6m) than B200
- > A vessel volume of 443 cubic feet (12.5 cubic metres); approximately 50 cubic feet (1.4 cubic metres) bigger than B200
- > A wing span of 57 feet, 11 inches (17.4m); 2.5 feet (0.7m) longer than B200
- > 2x PT6A-60A engines, equating to 2,100 SHP; approximately 400 SHP greater than B200
- > The potential to carry stretcher patients with a Nurse and Doctor
- > The potential to carry stretcher patients, sitting patients, a Nurse and Doctor
- > A flat internal floor, increasing safety for all crew and patients
- > Completely internal 'plumbing' for medical resources, for example oxygen, suction etc.
- > Fully-automated patient loading system, capable of lifting patients weighing up to 252kg
- > Proline 21 Avionics (regarded as a 'glass cockpit')
- > 'Winglets' on the end of the wings to reduce induced drag and improve fuel efficiency, lowering operating costs



A highlight of the B350 is the new patient loading system.



The first of three King Air B350C is currently located at our Cairns Base.

CASE STUDY

Flying Doctor saves lives in Ravenshoe

One of the worst disasters in Queensland's history occurred in July last year in Ravenshoe, a small farming community in the Atherton Tablelands, south-west of Cairns, when the popular 'Serves You Right Café' was torn apart in a gas explosion.

Caren Harrison, an RFDS Flight Nurse in Cairns, was halfway into a flight bound for Coen, a small community in the Cape, with her colleagues Captain Mick Jess and Doctor Rob Russell, to collect a non-urgent patient needing to be transferred to Cairns, when they received a call requesting them to divert to Ravenshoe with priority.

"Mick did an amazing job, replotting our course, contacting people on the ground and making a swift U-turn and descent," said Caren.

As the crew pulled up in front of the café, the true extent of the disaster was evident.

"Tragically a ute crashed into the rear of the café causing a gas bottle to explode, blowing out the front of the shop. There were injured people everywhere. The local emergency services and Ravenshoe clinic staff were doing their best to treat patients, but they really needed more help," Caren said.

"As Rob and I assessed the injured, it didn't take long to decide who needed our help. A local teenage girl and Michael Beck were both badly burnt and in need of advanced pain relief and the care of a tertiary hospital."

When Michael noticed Caren was a flight nurse for the Flying Doctor he knew he was going to be okay.

Michael was in Ravenshoe in his role as an Acting Inspector, managing the Queensland Fire and Emergency Services Commercial Training Unit, Northern Branch.

Michael recounted that he spent that morning working with the local Ravenshoe Respite Centre.

"We had practiced a fire evacuation and were sitting in the café having a lunch break, when the accident happened.

"I was facing the front of the shop with my back to the kitchen and remember hearing some banging. Not unusual noises for a kitchen, much like pots and pans dropping, but then I remember thinking it seemed to be going on for a long time," Michael said.

"When I saw the people in front of me jump up and move away from the kitchen, I instinctively followed, and turned around to see what was going on. That's when the explosion happened.

"I must have covered my face, because I've only got burns to my chin, forehead and ears. My hands and back are also burnt from when I turned to run out the front door.

"All my fire training kicked in and I knew I needed to find water quickly. After searching for a hose but not finding one, I ran to the nearby toilet blocks to look for showers, but there weren't any.

"I then made my way to the health clinic where staff directed me to their shower. I spent what felt like an eternity, sharing the shower with this other patron who was also badly burnt.

"The clinic staff did their best to treat my burns, but I was still in so much pain. It wasn't until Caren from the RFDS gave us really strong pain medication that I felt some relief.

"She made us more comfortable and ready to be transported back to the RFDS aircraft."

On the flight, Doctor Rob Russell and Nurse Caren Harrison focussed on pain relief and hydration, until arriving late in the afternoon to hand the two patients into the care of the Townsville Base Hospital.

Regular physiotherapy and occupational therapy have enabled Michael to return to work earlier this year.



There are so many people I am grateful to for helping me on the day, and with my recovery.

Above: Michael's back, hands and face were damaged in the explosion. Below: Pilot Mick Jess with patient Michel Beck and Flight Nurse Caren Harrison.



Left: The QCoal Community Dental Service provides free dental treatment across a number of communities in Central Queensland.
Right: There are around 1,300 RFDS medical chests located across Queensland.



WHAT WE DO... DELIVERING THE FINEST CARE TO THE FURTHEST CORNER

RFDS Charleville Health Clinic

From late 2013 until April 2016, the RFDS operated the RFDS Charleville Health Clinic as a private, independent practice, with health professionals employed by the RFDS to ensure continued delivery of general practice services following the retirement of long-time local GP of more than 30 years Dr Chester Wilson. The operations of the Charleville Health Clinic transferred to the South West Hospital and Health Service from April to improve the continuity, sustainability and viability of GP services in Charleville, enabling the RFDS to focus instead on its core services. Over this period, the RFDS Charleville Health Clinic conducted 5,783 patient consultations.

QCoal Community Dental Service

Most remote towns have limited, if any, access to dental services and are required to travel extensively for any sort of dental treatment. Thanks to a unique partnership with the QCoal Group, the RFDS delivers a mobile dental clinic to towns throughout regional Queensland.

The QCoal Community Dental Service is a fully equipped mobile dental surgery featuring state-of-the-art equipment, including an orthopantomogram machine. It is staffed by qualified dentists and dental assistants who provide a wide range of services direct from the mobile unit, including oral health maintenance; X-rays and extractions; treatment for acute or pre-existing conditions; treatment for gum disease and referral to specialist dental services.

The RFDS' partnership with the QCoal Group and the QCoal Foundation continued to grow this year:

- > Total number of individual patients seen since inception: 7,274
- > Number of Indigenous patients: 24% of patients identified as Indigenous
- > Communities visited: Blackall, Bowen, Camooweal, Clermont, Collinsville, Dajarra, Dingo, Glenden, Greenvale, Hughenden, Jundah, Monto, Normanton, Richmond, Rolleston, Sapphire, Springsure, Stonehenge, Theodore and Winton
- > Total value of services provided since inception: approx. \$2.5 million

Rural Women's General Practice Services (RWGPS)

The RFDS has proudly delivered women's health clinics to more than 50 locations across rural and remote Queensland for over a decade by providing female general practitioner services. The program undertook a significant change this year with it being integrated into and funded through the Government's Rural Health Outreach Fund.

From 1 July 2016, the RWGPS will no longer be provided by the Royal Flying Doctor Service; however the RFDS is committed to putting in place procedures to ensure a seamless transition for patients to the new providers.

Medical chests

In Queensland, the RFDS is responsible for nearly 1,300 medical chests located throughout the state. The contents from RFDS medical chests are prescribed remotely and onsite by RFDS Medical Officers. Patients can be treated for a range of conditions including antibiotics for infections or pain relief to prepare for an emergency evacuation. Our partnership with St John Ambulance to supply medicines and other items for the medical chest also continues to develop with more opportunities to improve the program coming in 2016.

7,200

patients helped by QCoal Community Dental Service since inception

1,300

Rural Women GP service consultations

A CULTURE OF CONSTANT IMPROVEMENT

Queensland Section's journey to clinical accreditation

In December 2013, the RFDS (Queensland Section) began its journey towards accreditation against 10 National Quality and Health Safety Standards. In May 2016, we achieved full health service accreditation, an important independent and objective measure on the high standards of our patient care across both our aeromedical and primary health care programs.

Clinical accreditation involves a culture of constant improvement and we will now be working towards meeting the next stage of the National Safety and Quality Standards by 2019.

Patient experience survey: Respondents

52% of respondents commented on aeromedical services.

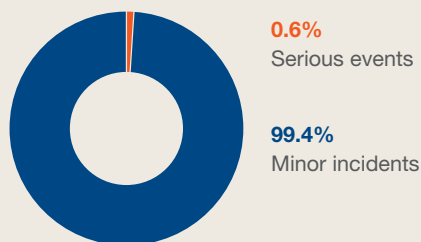
48% of respondents commented on primary health care services, including GP, oral health and mental health.



Clinical incidents

Serious incidents have decreased from 2% last year to 0.6% this year.

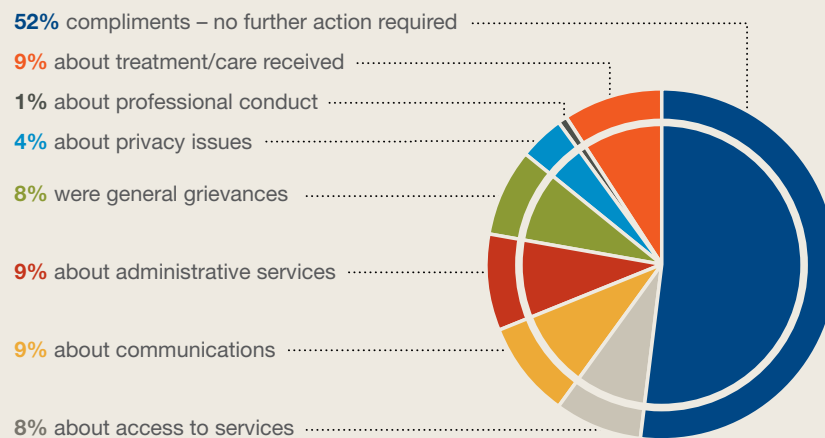
These improved statistics are the result of an improved safety and reporting culture as well as a demonstrated willingness to learn from past mistakes to improve our patient safety.



The RFDS Queensland Section General Management Team with Kerry Ellevsen (front left) Clinical Governance Manager, holding the accreditation certificate.

Consumer feedback

RFDS responded to 62 instances of consumer feedback; 52% of consumers were happy with our processes for managing and resolving their concerns. A summary of our responses to customer enquiries is outlined below.



Drought Wellbeing Service

The Drought Wellbeing Service (DWS) commenced in early 2015 through a partnership with Queensland Health Mental Health Alcohol and Other Drugs Branch. Through the DWS, the RFDS employs five clinical counsellors and three support workers across the state to provide targeted mental health services to those affected by the drought. Across the initial 12 months, the DWS team provided over 44 clinical occasions to 161 patients at 30 different locations across Queensland.

Santos

The RFDS was engaged by Santos to provide onsite Registered Nurse support for their Roma GLNG Project on a short term contract. The key activity of this service is the management of the onsite primary health care clinic. The contract has now been transitioned to RFDS South East Section for better integration with existing South East Section operations.

Australian Defence Force

The RFDS provided aeromedical evacuation support for the Australian Defence Force through the provision of medical staffing (Critical Care Specialist and Intensive Care Paramedic) through a unique partnership with Australian Helicopters. Support was provided for eight training activities (total of 119 days) in partnership with Australian Helicopters.

headspace Cairns

headspace Cairns is now four years old, and headspace nationally turns 10 in August. The Cairns centre has had another busy year and once again has broken its record for the number of young people attending for mental health care, social recovery, AOD and vocational services.

In the 2015/16 year, the centre delivered 4,323 mental health assessments and counselling sessions, 1,219 GP sessions, and 36 tele-psychiatry sessions to young people aged between 12 and 25 years. Groups are provided throughout the school terms, and include activities such as music, yoga, and drama, with the latter group starring in a television advert for suicide prevention. headspace clinicians also facilitate clinical groups for younger girls in the 12–14 age group.

The Community Awareness and Engagement arm of the team were out and about throughout the year, running 27 mental health literacy sessions in high schools, and promoting headspace services at 26 community events.

headspace have also been very fortunate to have recruited an Aboriginal and Torres Strait Island Youth Engagement Officer to increase services to the young Indigenous community and their families.

Telehealth consultations

RFDS Medical Officers provide a 24-hour medical consultation service (using telephones and other means) to people living, working or travelling in remote and rural Queensland. RFDS Medical Officers also give advice to rural doctors, remote area nurses, allied health staff, Aboriginal and Torres Strait Islander health workers, patients and carers.

Many health facilities in rural and remote Queensland have video conferencing which continues to be integrated, along with other telehealth technologies, into rural and remote health service delivery.

14,800

telehealth calls



Right: Telehealth consultations connect those in need of medical advice directly with a RFDS Medical Officer.

Below: Counselling and wellbeing programs focus on community capacity building.



160

patients were seen by the Drought Wellbeing Service at 44 clinics over 12 months



Left: Aeromedical Retrieval teams respond to calls 24 hours a day, seven days a week, across the state.
Right: The RFDS provides primary health care services at a range of locations across the state.



Aeromedical and emergency services

All RFDS bases in Queensland, except Longreach and Roma, provide an aeromedical and emergency service. This service includes the provision of primary responses and the transport of patients between hospitals (inter-hospital transfers). This financial year, the RFDS conducted in excess of 10,987 patient transports including 960 primary response transports and 9,937 inter-hospital transfers to definitive hospital and/or specialist care. Aircraft are available to respond to calls 24 hours a day, seven days a week at all bases except Longreach. Aircraft are staffed with a Pilot and Flight Nurse and a Medical Officer if required.

Beechcraft Super King Air B200s and Pilatus PC-12 aircraft were used for retrieval work within Queensland. All aircraft are pressurised and configured to resemble mini intensive care units. Aircraft are fitted with either Lifeport or TAS systems, which incorporate oxygen, suction and power outlets and are fitted in each retrieval aircraft, to act as a stretcher loading system that is fully compatible with road ambulance systems.

9,900
inter-hospital
transfers

960
primary
response
evacuations

In 2016 we will see the exciting introduction of the new B350C King Air aircraft that can fly further and faster. This is a welcome addition to the fleet and will improve response time considerably.

Inter-hospital transfers

Inter-hospital transfers involve the transport of patients between hospital facilities. This frequently occurs when further treatment or investigations are required for the patient, which are not available at the transferring facility. Transfer is therefore necessary to enable the patient to access the definitive care.

These transfers are coordinated through the Queensland Coordination Centre (QCC), a Queensland Government organisation.

Primary response

A primary response involves the RFDS responding to a call from the scene. Usually this call comes direct to the RFDS on its medical emergency lines. When calls go to the ambulance for these areas, the calls are referred to the RFDS. Primary responses occur when immediate first line treatment may not be available at the location of the patient. The RFDS provides telehealth support and management advice while flying to the scene, and then provides appropriate treatment upon arrival at the location, before retrieving the patient to the appropriate hospital. Isolated properties, remote health clinics or the scene of an accident are examples of possible retrieval locations.

Primary health care services

Primary health care has a broad focus and provides a comprehensive range of health services delivered by multidisciplinary teams.

The teams include General Practitioners, Nurses, Allied Health Professionals and other health personnel including Aboriginal and Torres Strait Islander Health Workers and Health Promotion and Community Development Officers.

The RFDS provides primary health care services at a range of locations such as rural towns, remote stations, mines and oil fields, national parks throughout regional and remote Queensland.

RFDS aircraft, charter aircraft and road vehicles facilitate the transportation of RFDS employees to deliver primary health care services to 130 Queensland communities.

RFDS primary health care services include:

- > General practice
- > Child and family health
- > Women's health
- > Aboriginal and Torres Strait Islander health including chronic disease management
- > Mental health/social and emotional wellbeing
- > Health promotion/community capacity building
- > Allied health
- > Oral health
- > Dietetics



General practice

RFDS Medical Officers provide a comprehensive general practice service and are able to offer or facilitate all aspects of primary medical care. Medical Officers are experienced in providing health services in a rural and remote setting and many have special interests and skills.

General practice clinics are held on a regular basis in remote locations; the frequency of visits depends on local needs. Outside the regular clinic service, primary medical care/general practice is also provided as part of telephone consultations and RFDS medical chests are used to administer medication. Medical Officers work closely with other health professionals, both within and outside the RFDS, in order to provide the best quality care.

Child and family health

RFDS Nurses provide valuable support to families living in rural and remote Queensland. Through regular community visits nurses provide a comprehensive child health service incorporating:

- > Routine physical assessments of children
- > Childhood vaccinations
- > Health education and advice to parents and carers
- > Referral to other health professionals
- > Counselling and acting as a confidante to parents and carers
- > School health screening programs
- > Liaison and collaboration with other child health initiatives
- > Facilitating projects which enhance child health services

Aboriginal and Torres Strait Islander people make up approximately 40% of RFDS patients in Queensland.



Vaccination rates of children living in areas where RFDS child health services are provided continue to be some of the highest in the nation.

Counselling and wellbeing programs

These programs provide social and emotional counselling services and community capacity building to rural and remote communities served. Many of the services are provided to Aboriginal and Torres Strait Islander families and their communities, as well as supporting rural areas. Activities under the program form part of the RFDS primary health care service, with multiple professional disciplines bringing complementary skills to the range of activities.

The RFDS also helps build capacity in Indigenous communities by employing and training local people in providing services. The RFDS Mental Health Service aims to be a leader in the field of Community-based Social and Emotional Wellbeing service delivery, and is currently exploring partnerships with local service providers and tertiary institutions to undertake research projects to generate the evidence base for their interventions.

Health promotion

Health promotion is an essential aspect of the RFDS's work, which underpins all of its primary health care services. Health promotion covers two broad areas: health promotion/illness prevention and community capacity building.

The RFDS Health Promotion program seeks to increase the integration of health promotion and illness prevention activities into the RFDS's primary health care services.

A major ongoing commitment of the RFDS has been the holding of health promotion field days at smaller locations, such as isolated stations/properties, mining communities and tourist resorts. The field days involve community consultation, health education, skill development sessions and strengthening the relationship between the community and the RFDS. The field days have a focus on building skills to help people better manage health issues encountered in the remote context. The incorporation of health promotion activities into RFDS service delivery not only broadens the role of all health employees but also provides a more comprehensive health service to rural communities.

Aboriginal and Torres Strait Islander health

In the primary health care context, Aboriginal and Torres Strait Islander people make up approximately 40% of RFDS patients, hence, the RFDS has an important role to play in improving the health of Aboriginal and Torres Strait Islander people. The RFDS has a long-term and sustained commitment to providing services into Aboriginal and Torres Strait Islander communities in response to the issues facing each community. Services provided include mental health, social emotional and wellbeing, primary health care, GP services, oral health, health promotion and child health.

17,400

general practice consultations

13,500

child and family health consultations

South Eastern Section

Left: Lyell Strambi, President
Right: Greg Sam, Chief Executive Officer



SOUTH EASTERN SECTION PRESIDENT AND CHIEF EXECUTIVE OFFICER REPORT

The communities we serve do not share the same access to services and levels of health outcomes as those living in urban areas. Our mission to redress this inequality is a long-term vision. While we ensure our services meet the needs of the community today, we also work to ensure we are in a position to meet their needs in the future.

We aim to do this in two ways. Firstly, we need to continue to deliver our core emergency and primary health services in an increasingly regulated environment. We do this by focusing on the safety of our patients and the quality of our services. For example, we have continuously maintained accreditation for the National Safety and Quality Health Service Standards (NSQHSS). These high standards make sure health service organisations like the RFDS deliver consistently safe and high quality care. In addition, we have maintained our ISO 9001:2008 Quality Management System (QMS) certification, which demonstrates we are meeting and improving our standards of quality for services.

Dubbo Base will be expanded to include a new multi-purpose building with specialised equipment to enable us to increase our team's skills. The equipment will include a state-of-the-art flight simulator for our pilots so they no longer need to travel overseas for training. The new aeromedical simulator will also allow our doctors, flight nurses and pilots to train together, rehearsing procedures simultaneously. This will improve training procedures as well as staff and patient safety.

Another example of our commitment to safety is our Flight Data Analysis Program. Now run in-house, this program means we can review every flight on our aircraft using real-time data to ensure all flights are run within our safety limits. This program is being expanded to all our aircraft. We also recently renewed our Air Operators Certificate (AOC), demonstrating we are managing safety effectively and continually improving operations.

Meeting these high standards takes a significant investment, but is important if we are to continue to be the provider of the highest quality services.

Secondly, we continue to build financial sustainability for the RFDS SE Section. Each year, our traditional services are funded through contributions from federal and state government, our generous donors and proceeds from commercial contracts. Through the 2015/16 financial year we have experienced significant reforms to our government funding which has increased the importance of our donor contributions in meeting funding shortfalls for our traditional bases and services. In response to these changes we have significantly enhanced our management and accounting systems to build efficiencies and provide opportunity for expansion and innovation into the future. We will continue to deliver returns on donor and funder contributions through assuring essential service levels, expanding our range of health services to remote and rural communities and supporting our major capital replacement program through the long-term. Improving the health of the community is a long-term effort.

Real-time
Aircraft installed with
safety data
analysis

80th
birthday celebrated with
Broken Hill Base open day



Building for the future also means being able to adapt to the changing needs of the community. Mental health and dental health services continue to be an area of disparity between urban and rural settings. To address this, we have introduced a new mental healthcare service out of Dubbo and a new mental health nurse to the Broken Hill team.

Our dental and oral healthcare services operated out of Dubbo – established thanks to philanthropic grants provided through the Gonski and Investec foundations – have significantly benefited the communities they serve. This three-year grant ended in early 2015, but because of the demonstrated success and positive impact on dental health of those accessing the service, we have continued to fund the program through government and donor contributions.

In January we introduced a fleet of six Patient Transfer vehicles to support locally co-ordinated patient transfers for non-emergency patients. Based at Dubbo, Orange, Bourke, Cobar, Lightning Ridge and Sydney (Bankstown Airport), these vehicles are medically equipped and crewed by health professionals to provide a smoother transfer for patients to and from hospital bed to aircraft. This enables better care.

Bringing people closer to our services, we gained a new, sealed airstrip to serve the isolated far-western communities near Shannons Creek. This was possible through the State Government's \$4.7 million upgrade of the Silver City Highway. The airstrip is operational 24 hours a day and saves more than two and a half hours travel for the community.

Both Broken Hill and Dubbo bases will see significant redevelopment to improve our services next year. Broken Hill Base will gain a new air-conditioned hangar capable of housing four aircraft and providing improved safety for staff and patients. The existing, heritage-listed Bellman hangar will be redeveloped to provide an expansion of the award-winning Bruce Langford Visitor Centre.

The new multi-purpose building in Dubbo will also include a new visitor centre. Here, community members and tourists can build their knowledge of the RFDS in an interactive and fun environment for all the family.

This year we celebrated the 80th anniversary of the founding of the South Eastern Section with an open day at Broken Hill Base and the announcement of our Heritage Project, which will feature in our new visitors' centre developments. We were also pleased to be recognised during the Prince of Wales and Duchess of Cornwall's Australian visit earlier in the year.

Order of Australia honours were awarded to three very deserving recipients; longstanding volunteer of 60 years, Jenny Treloar AM, of Wiawera Station; board member Joan Treweeke OAM and Dubbo Support Group member Judith Jakins AM. The recognition rightly afforded to these outstanding supporters of the Flying Doctor typifies the commitment and service of the many people within remote and rural communities.

Finally, we would like to thank everyone in the RFDS SE Section team as well as our patrons, His Excellency General The Honourable David Hurley AC DSC (Ret'd), Governor of New South Wales, and Mrs Linda Hurley. In particular we would like to thank our Board and the many volunteers, supporters, associated organisations and groups which have worked hard to ensure we continue as a vital healthcare service to remote and rural areas. We could not be there without you.

Lyell Strambi
President
RFDS SE Section

Greg Sam
Chief Executive Officer
RFDS SE Section

Top: Young children enjoy pretending to fly in the mobile education unit at our Open Day at Broken Hill Base.
Left: Long-time volunteer Jenny Treloar AM with RFDS SE Section Board member Sanchia Treloar in the hangar at the Open Day at Broken Hill Base.

OUR HEALTHCARE SERVICES

Emergency evacuations are just one of the many ways we provide essential healthcare, transport and other services to people who live, work and travel in remote, rural and regional areas.

Rescuing people

The RFDS SE Section operates emergency evacuation services from our Broken Hill, Dubbo, Mascot and Launceston bases. These services cover most of regional and remote NSW plus south west Queensland, north eastern South Australia and Tasmania, (services from Mascot and some services from Dubbo and Broken Hill are provided on behalf of the Ambulance Service of New South Wales. Services from Launceston are provided on behalf of Ambulance Tasmania).

Many of our aircraft are flying critical-care units ready to respond to callouts. These include motor vehicle and motorbike accidents, heart attacks and strokes, farm and industrial accidents, snake and spider bites and other emergencies. Our aeromedical crews are on standby 24/7, 365 days a year.

Our flight nurses are all qualified midwives with a critical-care background. Our doctors have a mix of primary healthcare and critical-care skills. Our pilots also assist the medical crew with loading and unloading patients from the aircraft and patient transfer vehicles.



Transferring patients to and from hospital

Patients living far from major hospitals require transfers by air if the journey between medical facilities would take too long by road. Road transport is needed to complete the patient's journey from aircraft to (or from) hospital.

The RFDS SE Section now provides patient transfers both by aircraft and vehicle, ensuring continuity of care for the patient. The flight nurse travels with the patient, whether in the vehicle or on the aircraft.

RFDS Patient Transfer vehicles were introduced in December 2015, to ensure a smoother transfer and continuity of care. Our vehicles can be medically equipped like an RFDS aircraft.

We also support the Non-Emergency Patient Transfer Service (NEPTS), based in Essendon for the RFDS Victoria Section. This service enables a fast, comfortable transfer of low, medium and high-acuity patients using RFDS SE Section aircraft crewed by our doctors and/or flight nurses, depending on patient needs.

Transferring babies

Babies' and children's needs during medical transport can be more complex than adults, due to their variety of body sizes. While adults are transferred from ambulance to aircraft using a standard stretcher, adult-size stretchers are unsuitable for tiny children.

A recent collaboration between the RFDS SE Section and NSW Neonatal Emergency Transport Service (NETS) has greatly simplified and improved how critically ill babies can be transported from regional and remote New South Wales.



Above left: A Patient Transfer vehicle being inspected by the Governor of New South Wales, at left, with driver Bob Browne.
Above: A NETS neonatal unit onboard our aircraft.

They are transferred in a special neonatal unit which the baby can stay in from hospital to hospital without being removed from the unit.

This specialised neonatal transport unit is fully self-contained and heated. It has a ventilator, syringe drivers, medical air and oxygen and all essential monitors. The baby is transferred to the unit at the hospital by the NETS team and taken by ambulance with the team to the waiting Flying Doctor aircraft.

Once in the aircraft (or vehicle) the unit uses supplemental power and oxygen during the flight. The baby remains monitored throughout the journey, and at the destination baby is transferred back onto the receiving hospital's equipment.

CASE STUDY

Saved as the sun was setting

Deane Wehrmann was on a motorbike trip with a group of friends in the Mutawintji National Park, north east of Broken Hill, when he hit an emu. Fortunately Deane was wearing protective clothing and a neckbrace, which saved his life. However he ended up in a deep gutter in considerable pain.

One of his mates saw the accident and turned back to assist Deane and call for help. Luckily, Deane was carrying a special medical information card which noted his allergy to morphine. When the ambulance was phoned they called in the Flying Doctor. Deane's injuries were potentially serious and the ambulance services were concerned about the time it would take to get him back to Broken Hill by road without a serious painkiller, as morphine was not an option.

The Flying Doctor managed a very tight turnaround to collect Deane as the sun was going down and they could not take off on a strip without lighting.

Deane was evacuated to Broken Hill Base Hospital and then later transferred to Adelaide, due to the severity of his injuries. He had fractures in his face, a broken vertebrae and torn nerves from shoulder to thumb, which greatly restricted his movement.

"I can't praise those guys enough," says Deane of the Flying Doctor teams who rescued and transferred him. "For someone who's afraid of flying, they did a fantastic job of getting me there."

I can't praise those guys enough... they did a fantastic job of getting me there.



Deane was airlifted out to hospital just as the sun was setting.



Deane at home, recovering from his accident.

PRIMARY HEALTHCARE

Providing primary healthcare services is a major part of the work of the RFDS SE Section. Primary healthcare is a vital part of our efforts to close the gap between urban and rural health outcomes. Clinics are also used by people travelling through remote areas who find themselves in need of non-urgent medical assistance.

Our clinic services

We deliver a wide range of clinics. They include general practice clinics, mental health (including alcohol and other drug counselling services), practice nurse and chronic disease management programs, oral healthcare and women's, child and family health services.

Primary healthcare clinics are operated from our Broken Hill Base and are rostered weekly, fortnightly or monthly in 18 locations, including Menindee, Pooncarie, Ivanhoe, Yunta, Tilpa, Wiawera and Wilcannia.

We also provide 24/7 nursing services at Wanaaring health clinic, through two remote clinic nurses.

Medical chests

The Medical chests program enables immediate access to necessary pharmaceuticals and other items for remote patients once a doctor has authorised the use of the medication.

Fly-around clinics

Fly-around clinics travel to remote locations, bringing scarce specialist health services such as dermatology and allied health professionals to reach some of the state's most isolated communities.

Last year one week-long clinic visited Menindee, Wilcannia, Tibbooburra, White Cliffs and Wanaaring in far western New South Wales. The focus of the clinic was on healthy, active lifestyles and behaviours. Events included a community morning walk with the Flying Doctor to encourage people to start the day in a healthy way. A range of medical practitioners on this clinic enabled the communities to get to know the services available and have informal contact as well as private appointments.



A morning walk with the Flying Doctor was a popular community event at White Cliffs during the fly-around clinic.



Advice day or night

Patients can phone for medical advice at any time, day or night, 365 days a year. Medical treatments can be prescribed and accessed immediately from one of the many medical chest locations so the patient does not have to wait for a prescription to be filled and posted, which can take over a week. The doctor answering the call also identifies any further steps for care and patients are able to receive medical and first aid advice in an emergency.

Post hospital care

This program provides support and access to further monitoring as required (such as blood pressure monitors for a period of time) for patients who have been discharged from hospital.

'Pit stop' community health checks

Country shows and other community events can also be an opportunity to offer busy country people important health checks, and referrals to doctors where necessary.

The Flying Doctor originally developed the 'pit stop' health check program along the lines of a mechanical check to encourage men to maintain their health the same way they care for their vehicles. However it has been equally popular with women.

Travelling to see a doctor for preventative healthcare isn't usually a priority for country people who may work seven days a week in isolated locations. At Walgett Show we gave 90 people health checks in two days.

At Broken Hill's Agfair, an eight-section pit stop also saw 129 check-ups completed. Past pit stops have saved lives as many chronic diseases in the early stages have few obvious symptoms and people do not feel unwell. Early diagnosis, medications and lifestyle changes can minimise or prevent complications with diabetes, high blood pressure, high cholesterol and other diseases.

129

check-ups completed
at Broken Hill's Agfair

90

health checks in two
days at Walgett Show

FAMILY HEALTHCARE

The Hotchin family

Fiona Hotchin, who lives on a station near Tibooburra in far western New South Wales, depends on the Flying Doctor for her young family's healthcare as well as for emergency services. Her first experience with the RFDS was as a young woman visiting a friend on a property in Queensland when she was suddenly taken ill. Since moving to the country and getting married, her husband and son have both needed the emergency evacuation service as well.

However it is the weekly primary healthcare clinic at Tibooburra medical centre which she and her family use most regularly for general medical and dental services.

With three children, Fiona has also used the clinics for all her pre-and postnatal care. "It means I only had to go into Broken Hill for scans and things like that," says Fiona. "It's a great service."

TRAVELLERS' HEALTHCARE

The Greshams

Ian and Lesley Gresham, from Forster on the mid north coast of New South Wales, are keen Outback travellers who enjoy panning for gold.

On their fourth visit to the Tibooburra area in far north western New South Wales, Lesley hurt her knee when they were panning for gold. Familiar with the services in Tibooburra, they headed straight for the clinic where Lesley was treated by Flying Doctor medical staff.

"We feel safer knowing the RFDS is there," they say.



Above: Dubbo Base senior flight nurse Karen Barlow and Brendan Mackenzie of Old Booroona, Walgett, at the Walgett Show.
Middle: Fiona in the Tibooburra clinic before her last child was born.
Right: Ian and Lesley outside the clinic.



MENTAL HEALTHCARE

Our mental health team is based at Broken Hill. In addition, a mental health professional will operate out of Dubbo Base in the coming year. The Broken Hill team currently consists of a psychologist, an alcohol and other drugs counsellor, two mental health nurses and a mental health project officer.

To raise community awareness of mental health issues and treatment available, the team have been involved in special initiatives such as fly-around clinics as well as our regular clinics.

This year the team again held a two-day workshop entitled Performance is Personal for station-based families. The workshop was designed to give participants a short break from their work responsibilities while providing a range of informative sessions. Participants travelled from across the entire far west of New South Wales and south western Queensland. They attended sessions on effective communication, strategies to ease cross-generational family/business tensions and many other self-care activities. It was also a great opportunity for networking and socialising together for families normally living in remote locations.



Mental health project officer Glynis Thorp

People out here have a tough, strong outlook; meaning it may take that bit longer to recognise that something is not quite right anymore. Stoicism can be a hindrance in getting help. Sadly, suicide rates in remote areas are almost twice as high as for urban areas.

We also do a lot of grief counselling as we might be dealing with people who have suddenly lost a family member. Grief and loss can be even more intense when drought and financial circumstances mean people have to leave a way of life they thought would be handed on to their children.

We have fly-around clinics to isolated areas such as Innamincka, Tibooburra and Ivanhoe to connect with communities and let them know we're available to talk to. Just making contact with people normally working seven days a week is a start – if they come to workshops on things like men's mental health and family business relationship issues they get to know we can help.

We also do regular clinics each week. We try to talk to everyone when we arrive, so that there is nothing unusual about someone being seen talking with us. Consultations might be on a park bench, on a walk around town or in a car if people are more comfortable away from the clinic building. We also counsel people by phone, email and Skype.



Glynis, fourth from the left, with the rest of the fly-around clinic team.
Left: A presentation at the Performance is Personal workshop.



Above: Medical student Alexandra Sheather, second from left, with the RFDS SE team from Broken Hill.

Left: Children being examined by oral therapist Prashiela Shandil at a TOOTH clinic at Lightning Ridge. Photo: Sam Rutty/The Sunday Telegraph

ORAL HEALTHCARE

Access to oral healthcare is challenging for people in rural and remote areas, with far fewer dentists available. Oral health problems can adversely affect general health, including issues with diabetes, stroke, heart problems and low birth weight in babies.

The RFDS SE Section operates a full-time dental service out of Broken Hill Base. Since 2012 The Outback Oral Health and Treatment (TOOTH) program has operated from Dubbo Base. Dentists also travel on fly-around clinics, visiting remote cattle stations and communities.

Providing dental and oral healthcare to isolated communities has been proven to halve the rate of dental decay in children and establish a consistently declining pattern of decay in adults.

TRAINING STUDENTS

The RFDS SE Section offers medical, dental and other health students the opportunity to see the challenges and rewards of rural and remote health practice. Students attend our primary health clinics and undertake observer flights with our on-call emergency crews. This is organised through our partnerships with the University of Sydney, Department of Rural Health, Broken Hill and the School of Rural Health in Dubbo.

We also have placements for GP registrars in their final years of training, on both primary healthcare and emergency services.

These partnership opportunities aim to encourage health professionals to return to rural and remote areas to practice once they have completed their education and gained the experience required.

CASE STUDY

Student, Alexandra Sheather

Medical student Alexandra Sheather gained the John Flynn Placement, designed to encourage medical students to join the RFDS after their training is complete. Alexandra, whose grandmother lives in Broken Hill, says her clinic flight to Wiawera was a highlight and she hopes to work for the Flying Doctor in the future.

"I was amazed by the catchment area of the small clinic, serviced by only three practitioners, and the significance of the clinic for the patients who attended," says Alexandra. "It was truly eye-opening, highlighting the skill and versatility involved in rural medicine. One patient's broken thumb had to be splinted using just a tongue depressor and tape. I can't thank the RFDS enough for the opportunity and I look forward to many more similarly enriching experiences in the future."

OPERATIONS

RFDS SE Section operations depend on the team work of everyone:

- > frontline doctors, nurses and specialists providing vital healthcare services in remote, rural and regional areas
- > pilots and drivers transporting our patients safely
- > engineers who keep the aircraft and vehicles safely maintained
- > administrative and corporate teams who ensure the entire operation functions efficiently and sustainably

Our people are devoted to our mission, in whichever capacity they work.

We thank our generous donors, supporters and volunteers who assist the Flying Doctor to be there; we couldn't do it without you.



RFDS SE Section Senior Base Pilot Shane Brook.
Below left: Flying to Wiawera clinic. Photo: Wolter Peeters/Fairfax Media.

Senior Base Pilot, Shane Brook

Broken Hill Senior Base Pilot Shane Brook was working in the Outback as a station pilot when he first saw the Flying Doctor in action.

"I've seen both sides of the fence," says Shane. "I worked as a flight instructor before I headed bush. My wife and I lived on Naryilko Station just over the border in Queensland until my daughter, Georgia, was three.

"She was flown out three times for different reasons. Over the eight years I worked there I also saw good mates who were critically injured and they're still mates now, thanks to the RFDS."

After talking with a Flying Doctor pilot one day, Shane began thinking about a change of employment and in late 2007 began working from the RFDS Broken Hill base.

Shane often doesn't know the outcome of a rescue, but sometimes the team receives cards from thankful patients or their families.

"One particularly comes to mind," says Shane. "A man had been accidentally shot. We got there and worked on him throughout the afternoon then flew him out. Later we got feedback that he'd survived, along with a thank-you from him and his family.

"The RFDS is where I want to be."

CASE STUDY

Mustering injury leads to marathon rescue effort

Disaster struck grazier Greg Taylor when he was severely injured mustering cattle on Borrana Downs, his property 300 kilometres west of Bourke in far western New South Wales.

“Mostly cows are quiet, but this one just went crazy,” says Greg. “She hit me and sent me six metres in the air. I don’t remember what happened but my son Tom thought I was dead, I was bleeding from the head so much.”

Tom had to destroy the cow to save his father. Others went to the house, a further 50 kilometres away, to call for help over the radio.

An ambulance, driven by an RFDS SE nurse, drove from Wanaaring while the Flying Doctor aircraft landed on the nearest airstrip. Both the doctor and flight nurse were driven to where Greg lay. His injuries were extensive, including broken ribs, collar bone, shoulder blade and skull and facial fractures. But the team effort saved his life.

“It was a real marathon from the moment it happened,” says Greg. “I was inches from losing my life. But everyone did a marvellous job; the nurse, the doctor, the pilot who skilfully landed and got me out before dark. The Flying Doctor was really put to the test. It couldn’t have been any better.”



Above: Greg Taylor on horseback, prior to his accident.

Left: Cattle in the mustering yards.

Far left: Borrana Downs from the air.

Below: Greg’s son Tom, who organised his father’s rescue.



Victorian Section

Left: Denis Henry, Chair
Right: Scott Chapman, Chief Executive



VICTORIAN CHAIR AND CHIEF EXECUTIVE REPORT

It is with the dedication of our 299 staff, over 70 volunteers and 30,000 supporters that RFDS Victoria has continued its expansion to “overcome barriers to accessing health care” across the state.

The RFDS Victoria delivers quality health care throughout the state. With services including Mobile Patient Care, Mobile Dental Care, Mobile Eye Care, Diabetes Telehealth and Rural Women’s GP Service, RFDS Victoria reached 89% of rural Victoria in 2015/16. This is evidence of our commitment to ensuring that those living in the country can enjoy the same health outcomes as those living in city areas.

Through the collaboration of a dedicated team of 319 staff, 65 volunteers and more than 30,000 supporters, the RFDS Victoria continued with its ongoing expansion of services throughout 2015/16.

It’s in partnerships with communities, health providers and the Victorian Government that the RFDS Victoria is able to efficiently deliver its services. In 2015/16 we had 57,005 patient contacts, including non-emergency patient transports.

We are proud to have saved patients 8,208 hours of travel time. This is a significant achievement, as we work toward supporting a healthier population across all of Victoria.

In January we implemented a successful pilot program to reach remote and rural communities through the Flying Doctor Dental Clinic. Remote and rural Australians have poorer oral health than those in major cities, with the disparity in oral health outcomes directly related to disparities in the accessibility of dental care in these areas. Poor oral health is linked to infections and chronic disease and can have a significant impact on both health and quality of life. This is largely due to difficulty accessing dental care, including the need to travel a significant distance to reach public dental clinics, due to the small and sparsely distributed populations and a lack of private dentists. The RFDS is committed to overcoming such disparity.

Former Board member Murray Rogers stepped down as Chair, moving to the Emeritus Council. The RFDS Victoria thanks Murray for his excellent leadership. The RFDS also thanks Peter Berry who moved on from serving on the Board.

It is with thanks to the dedicated Board, staff, volunteers and our generous donors that we can continue to provide quality health care throughout Victoria. To combat barriers, RFDS Victoria continues to expand services and we will go the distance because we care, we are passionate and we are proud of our work.

Thank you,

Denis Henry
Chair
Royal Flying Doctor
Service Victoria

Scott Chapman
Chief Executive
Royal Flying Doctor
Service Victoria

Our Mission

All Victorians will have access to affordable, quality health care services and healthy lifestyle information to enable wider choice and greater responsibility for their own wellbeing.

Our Purpose

To strengthen the health of Victorian communities and provide greater access to health care throughout Australia.

89%
of rural Victoria reached
with RFDS services

57,005
patient contacts

CLINICAL GOVERNANCE

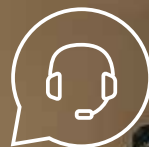
RFDS Victoria has a robust Clinical Governance Framework that ensures safe and high quality care across all RFDS Victoria services. The clinical governance team is headed by Medical Director Associate Professor Morton Rawlin, with support from the Clinical Governance Advisory Committee, whose members include health industry experts and senior RFDS Victoria health managers.

Over the last twelve months the work of the committee and the clinical governance team has included the implementation of the new Non-Emergency Patient Transport Clinical Practice Protocols and high acuity services, implementation of a new dental treatment program, development of a more clinically based outcome data set for primary health and the development of an adverse event review process.

RFDS Victoria is dedicated to the maintenance and management of a quality management system and is currently certified against the ISO 9001, 4801 and 18001 standards. RFDS Victoria is committed to quality monitoring and improvements, consistent with best practice in the industry.

Services provided in regional and rural communities saved patients

8,208
hours of travel time.



Mildura telehealth video consultation via Melbourne.

DIABETES TELEHEALTH SERVICE

RFDS Victoria delivers a Diabetes Telehealth service, in partnership with Baker IDI Heart and Diabetes Institute and local health services, which provides access to endocrinologists via video-conferencing facilities, for patients in the Sunraysia, Northern Districts, West Wimmera and Rural Northwest regions of Victoria.

The service allows for patients to have an appointment with their endocrinologist, without needing to travel to Melbourne or pay for transport and accommodation.

- > The Diabetes Telehealth Service provided 325 consultations in 2015/16.
- > There were 14 diabetes educators involved in the Diabetes Telehealth Service.



The Diabetes services provided in Mildura is exceptional. The Diabetes Educator is very informative, friendly and very encouraging. Having access to this service and being able to communicate with Daniel (Endocrinologist) is of great benefit, as it would be costly and inconvenient to travel to Melbourne.

Mildura patient



1,000

dental treatments
provided



Flying Doctor Dental Clinic in Birchip.

MOBILE DENTAL CARE

RFDS Victoria provides a service in partnership with Dental Health Services Victoria (DHSV) and Australian Dental Association Victorian Branch (ADAVB), called the Flying Doctor Dental Clinic. This service offers screening, oral health promotion and treatment services to rural locations throughout Victoria. These locations are determined in consultation with DHSV and local public dental providers.

A team of volunteer dentists and dental students travel to and conduct screening and oral health promotion for approximately one week per month into schools, kindergartens and residential aged care facilities in rural towns. This is then followed with a visit from the Flying Doctor Dental Clinic. Dental assistants and contracted dentists or oral health therapists undertake the treatment component four days per week.



Right: RFDS Dental Assistant Steffi Cowell and Dentist Dr John Carroll work inside the Flying Doctor Dental Clinic.

CASE STUDY

Maggie meets the Flying Doctor Dental Clinic

Six-year-old Maggie* lives far from a dentist and is challenged by multiple disabilities. Her condition means she has to take many medications in the form of syrup. Unfortunately the syrup is high in sugar and has caused serious dental decay. In the past, Maggie had to have several procedures which caused her much distress, requiring her to go under general anaesthetic.

When the Flying Doctor Dental Clinic came to Maggie's town, it meant she didn't have to travel far for treatment. For someone with multiple disabilities, leaving home can be a challenge, particularly as panic sets in when contemplating dental treatment during the journey. Maggie and her parents were relieved to have the reliability and expertise of the Flying Doctor Dental Clinic in their own town.

RFDS Dentist Dr Sarijani knew it was important to guard against further decay which could require invasive procedures down the track. She advised Maggie and her parents that it was best to apply preventative seals to Maggie's teeth. Frightened by the thought, Maggie was put at ease by the RFDS Dental Team.

Dental Assistant Meg gently invited Maggie into the Flying Doctor Dental Clinic and used Maggie's fingernail to show how the seal would be applied to her tooth. When Maggie understood the procedure wouldn't hurt, she calmly laid back in the chair to complete the procedure on her teeth.

It wasn't long before Maggie was smiling, especially when she received a new toothbrush, a bonus for completing treatment.

*The patient name has been changed to protect privacy.

GIVE THEM WINGS SCHOLARSHIP PROGRAM

Four students from country Victoria were recipients of the Give Them Wings scholarship, awarded by the Royal Flying Doctor Service Victoria in partnership with Rural Health Workforce Australia. The scholarships, valued at \$2,500 each, are designed to encourage the next generation of nursing and allied health professionals from rural communities to return to the country to work once they graduate.

The scholarships are generously supported by fundraising activities of the RFDS Bayside Auxiliary.

The 2016 Give Them Wings scholars are Charlotte Lakey, from Kyneton, a nursing student at Australian Catholic University; Sammy-Jo Sly, from Cullulleraine, a nursing student at La Trobe University – Mildura; Claire Hammond, from Woodglen, a dentistry student at La Trobe University – Bendigo; and Elizabeth Kemper, from Boorool, an audiology student at La Trobe University – Bundoora.

MOBILE EYE CARE

RFDS Victoria provides Mobile Eye Care, a monthly two-day optometry service in the Mallee, East Gippsland and West Wimmera. RFDS Victoria partners with Australian College of Optometry (ACO), Mallee Track Health & Community Service (MTH&CS) and OneSight to provide clinical optometry, and utilises local facilities in each of the target communities to provide this service.

Optometrists conduct screenings each month over two days, 10 times per year. This provides an invaluable opportunity for the community to access this service, saving time, inconvenience and cost, as the service is provided free of charge.

Through 52 Mobile Eye Care clinics,

591 patients reached

CASE STUDY

Fred thinks RFDS Eye Care Clinic is great for the community

Fred, from Cann River, Victoria, found out about the RFDS Mobile Eye Care service and booked an eye examination. At 84 years old, this was the first time Fred had seen an optometrist. Until the RFDS Mobile Eye Care reached Fred's community, he was buying glasses from his local chemist. As time went by he required higher magnification which wasn't available at the chemist.



Initially Fred thought that an eye examination consisted of an optometrist asking him a few questions. He was delighted to receive a full consultation with state-of-the-art tools to test his sight and eye health.

"The examination lasted for about half an hour and it was very comprehensive," said Fred.

While the generic glasses Fred used from the chemist were suitable to a point, the optometrist prescribed some glasses that were perfect for him and delivered directly to him. Fred was relieved to receive his personalised glasses and said they were perfect.

"I was very pleased to get them," said Fred.

Fred also said that he thinks the RFDS Mobile Eye Care is important for his community and should continue because there are a lot of retired and older people in the community that might never get eye care otherwise.



Anthony Waters tests Paul Sykes' eyes at the launch of Mobile Eye Care in Gelantipy.



Courtney and Marley of Hopetoun.



RURAL WOMEN'S GP SERVICE

RFDS Victoria delivers a Rural Women's GP Service in small communities in the North West and North East of Victoria, with the aim of providing a gender choice for patients in rural communities.

The Rural Women's GP Service has been delivered by RFDS across rural and remote Australia since 1999. Prior to the 2015/16 financial year the funding was provided to RFDS by the Commonwealth, and is now being provided by Rural Workforce Agency Victoria (RWAV). The service is 100% bulk billed and is highly valued by local women and men in rural communities. During 2015 each Rural Women's GP Service ran on a six to eight week rotation across five centres throughout Victoria (Charlton, Corryong, Hopetoun, Robinvale and Rainbow), providing eight clinics each financial year and seeing, on average, over 800 patients each year.

In May, Rainbow secured a permanent female GP at the medical centre, thus allowing RFDS Victoria to move the service to another location, extending the provision of service to another community in need.

In 2016–2017 the RWGPS is expanding to include additional communities with clinics expected to be completed in each of these in the financial year.



Rural Women's GP, Dr Susan Lewis, in Hopetoun and winner of RFDS Victoria's Outstanding Achievement Award 2015.

Rural Women's GP Service
reached 856 patients with

77 clinics

CASE STUDY

Giving patients a GP gender choice

Courtney Jones, a mother from Hopetoun, uses the RFDS Rural Women's GP Service.

"Without the RFDS Rural Women's GP Service I would have to travel for hours to see a female doctor," said Courtney.

If not for the RFDS Rural Women's GP Service many patients would not access medical treatment or would have to travel long distances, or would do so only once a situation has become acute.

In Hopetoun, Dr Susan Lewis provides services every six to eight weeks. She says "there are many reasons that may be quite obvious as to why a woman would like to see a female GP, but there are also times when a man may feel more comfortable talking to a woman, especially regarding mental health and social issues.

"There are also issues of privacy and confidentiality in a small town, as you can imagine, most people would know the local GP socially as well as going to the clinic. It helps to have a choice to have another person that goes into the town and goes back to the city and they don't run into them in the supermarket. I listen to the private concerns of the people and I take them with me," says Susan.

53,230

road transports

MOBILE PATIENT TRANSPORT

Patient Transport by Road

RFDS Victoria's non-emergency patient transport service, Mobile Patient Care (MPC), operates in Victoria throughout seven regional and four metropolitan branches.

Our branches include Alphington, Ballarat, Horsham, Keilor East, Keysborough, Richmond, Sale, Traralgon, Wangaratta, Wonthaggi and Mildura.

Each of the 11 locations accommodates MPC non-emergency patient transport vehicles and staff, providing state wide service coverage, including specialised High Acuity and Bariatric services.

Patient Transport by Air

As well as our fleet of 74 non-emergency patient transport road vehicles, RFDS Victoria operates a Beechcraft King Air out of Essendon Airport, offering patient transport needs throughout Australia.

In 2015/16 we averaged almost one patient transport by air per day with 355 non-emergency patient flights.

Customer Focus

RFDS Victoria worked with Ambulance Victoria and Epworth Hospital during 2015/16 and with continual growth we attracted new contracts with hospitals across the state.

RFDS is committed to providing excellence in patient care and gives patients the opportunity to provide feedback on our care. All feedback is responded to by our Manager Clinical and Quality within seven days of receipt.

In 2015/16 we received 243 feedback forms from patients. In total 90% of these responses were complimentary and provided positive comments about the service.

In keeping with a focus on quality patient care, RFDS Victoria continues to improve its provision of services based on patient feedback.

Mobile Event Care

During 2016, the Mobile Event Care team provided first aid and event care services to more than 60 events including the Caulfield Cup and Sandown 500. RFDS Victoria provides medical support for patrons attending events and event organisers throughout Victoria.

Horsham Aeromedical Transfer Station

Supported by RFDS Victoria, the Horsham Aeromedical Transfer Station was opened in March by The Honourable Linda Dessau AM, Governor of Victoria.

The temperature controlled building with two bays provides an undercover and safe area for patients, paramedics and other medical personnel including members of the RFDS to stabilise & prepare patients for transfer whilst waiting for emergency & non-emergency aircraft to arrive.

🗣️ All my worries dissolved when you picked me up. The staff were wonderful. They were thoughtful, professional and very friendly. Thank you so much. 🗣️

Feedback from road transport patient



Above: Providing patient transport from Essendon with Beechcraft King Air.
Below: Staff prepare to transport a patient.



*Name withheld to protect patient confidentiality.

Look! Up In the Sky Education Program

RFDS Victoria's Look! Up in the Sky education program has been running since 2011. This year the program reached 56 schools. A total of 4,975 students were reached through 199 presentations.

The RFDS Victoria visits schools with an aeromedical simulator, which is a life-sized replica of a Flying Doctors Pilatus fuselage, fitted with communications and medical equipment. The simulator allows students and teachers to understand the work of the RFDS. The students can press buttons, try the breathing apparatus, and talk to each other with a headset. It encourages children to think about how people live, work and access health care throughout the nation. 88% schools rate the session as excellent, 12% schools rate session as above average.

The RFDS education program aims to motivate the next generation of nurses, doctors, pilots and dentists and encourage future supporters by sharing knowledge on the vastness of Australia, inspiring empathy and mateship.

4,975

students reached through the program

FLYING DOCTOR KIDS CLUB

RFDS Victoria launched a Kids Club on Australia Day at Government House, attended by our patron, the Governor of Victoria the Honourable Linda Dessau AM.

The Kids Club is a significant step in helping children to develop an appreciation and understanding of the legacy of the RFDS and its place in Australian history. To date more than 900 children have joined the club.

The Kids Club is free to join, and focusses on children aged five to 12 years old. They receive a joining certificate, newsletters twice a year and a birthday card. Through sharing stories, the Kids Club connects young Australians across the country, building awareness of how people live in metro, regional and remote communities.

COMMUNITY ENGAGEMENT

The RFDS Victoria community is made up with a range of kind supporters who are at the heart of everything we do. Without them, we couldn't help the millions of people we care for all across Australia. We extend our most sincere thanks to our supporters.

Bayside Auxiliary

The RFDS Bayside Auxiliary is a committed group of fundraisers that raise funds in support of the Flying Doctor. In 2015/2016 the group raised over \$20,000 for the RFDS Victoria, supporting the Flying Doctor Dental Clinic and Give Them Wings Scholarship program.

Outback Tour

The RFDS Outback Tour throughout Central West Queensland saw a group of 22 enthusiastic supporters of the Flying Doctor meet the men and woman of our service in some of Australia's most remote areas. This annual tour to various parts of Australia gives donors the opportunity to

Keira Jones at Mildura Christian College. Reproduced Courtesy of *Sunraysia Daily*





see first hand the work of the RFDS and to enjoy some of Australia's most iconic and beautiful areas along the way. The tour highlights the need for the service and how essential it is to those who live, work and travel across Australia.

Rowathon

The Flying Doctor Rowathon is an annual one day rowing marathon held on the Darling River near Mildura. The course is 82 km, the longest one day fundraising row in Australia. The event raised \$41,159 for the Flying Doctor Dental Clinic.

Flying Doctor BBQ

This year we invited sporting and recreational groups from across Victoria to hold a Flying Doctor BBQ as a fundraising activity. The inaugural campaign raised \$6,813 from groups across regional Victoria committed to supporting health care services in their areas.

Going the Distance Dinner

More than 400 supporters attended the 2015 Going the Distance Dinner. Held in August at the Myer Mural Hall in Melbourne, the gala event featured keynote speaker Sam Bailey who was rescued by the RFDS. The gala event raised more than \$50,000 to support the Flying Doctor.

John Flynn Luncheon

More than 250 of our loyal Flying Doctor supporters celebrated the birthday of our founder the Reverend John Flynn at the annual John Flynn Luncheon at the RACV City Club in November. Guests were entertained by stories from the host of ABC Landline, Pip Courtney.

At the event, the Bernice Jenkins Volunteer Award was proudly presented to Wendy Stone in recognition of longstanding service to the Flying Doctor.

Give them Wings 2016 recipients Elizabeth Kemper of Boorool, Sammy-Jo Sly of Cullulleraine, Claire Hammond of Woodglenn, and Charlotte Lakey of Kyneton with Bayside Auxiliary executive members Wendy Stone and Karen Russell.

RFDS Victoria Annual General Meeting Forum

Held on the same day, prior to our John Flynn Luncheon, 100 supporters attend the RFDS Victoria Annual General Meeting Forum. The event featured reports from the Board, Chief Executive, community fundraisers, corporate supporters and scholarship winners.

The 2015 RFDS Victoria Award for Outstanding Contribution was awarded to Dr Susan Lewis, at this event.

Morning Melodies

In March RFDS Victoria held the third Morning Melodies fundraising event at the Arts Centre and Hamer Hall with over 200 friends of the Flying Doctors attending. The event began with a light lunch at the ANZ Pavilion, before guests enjoyed a performance by the Australian Ballet School at Hamer Hall.

Royal Melbourne Show

RFDS featured at the Royal Melbourne Show on 24 and 25 November and more than 3,200 people visited the RFDS Victoria exhibit. Our aeromedical simulator proved popular once again, with attendees particularly interested in the services we provide and the fit-out of the plane.

Tasmanian Section

TASMANIAN PRESIDENT'S REPORT

Over the last three years, we have been working to increase our capability to serve Tasmanians with the finest care to the furthest corner of our state.

In 2015 we took the significant step of employing a highly experienced health sector CEO in John Kirwan. This has enabled us to build our support for vital aeromedical services, provided in partnership with Ambulance Tasmania, and to reach out with other services where we believe the Flying Doctor can make a difference to the health of Tasmanians.

Late last year the members of the Board and our CEO met with the Tasmanian Minister for Health and the Treasurer so that we could explain the benefits of the Government working with the RFDS as a not-for-profit organisation. We discussed the services we could provide, such as non-emergency road ambulance transport and dental services in rural areas, and how these services have the potential to complement and extend government services in a highly cost effective way. We believe such partnerships are vital to a government that has ever increasing demands on its health budget.

477,783 km

flown around Tasmania
and interstate

In accordance with the direction outlined to the Minister and Treasurer, I am pleased to report that during the early part of 2016 we applied to the government to operate an RFDS non-emergency road transport service. We also finalised plans to expand a dental outreach program for children living in country Tasmania that was successfully piloted in the last reporting period.

The Flying Doctor in Tasmania continues to be supported by donors and volunteers. In my role as President, I have the privilege of meeting people who give generously of their time or money to help us to do our important work. I also meet many people who have been helped by the Flying Doctor here or in other parts of Australia.

At the Annual General Meeting in October 2015, Lindsay Millar OAM retired from the Board after 50 years of service. Lindsay will continue his involvement with the RFDS in many other ways, building on an outstanding contribution through decades of growth of the service both in Tasmania and nationally.

Replacing Lindsay on the Board is Dr Tim Mooney, a medical practitioner at George Town. Tim's insights into rural health and his values tied to service to the community make him an ideal Board member and he will assist us in governing our expanding primary health services.

To conclude, I thank Board members, all of whom give generously of their time in an honorary capacity and our committed staff members for a successful year. They all join with me in acknowledging and thanking our many supporters throughout Tasmania.



Capt. Peter Baker flying high en route to Burnie Airport.



Capt. Peter Baker preparing to board the aircraft on Flinders Island.



Left: Malcolm White, President
Right: John Kirwan, Chief Executive Officer

TASMANIAN CHIEF EXECUTIVE OFFICER'S REPORT

The 2015/16 year has seen a number of achievements and progress towards the establishment of several direct service areas for RFDS Tasmania. We are fortunate to have the opportunity to draw on the resources, advice and assistance from across the RFDS nationally and greatly appreciate the support received from the Federation staff, Victoria and South Eastern Sections.

There have been several highlights, made possible by the investment income from the Stan Merrett Foundation and the fundraising and in-kind support we receive from all over Tasmania.

This support has enabled the launch of the new Burnie Airport patient transfer facility. The innovative local design was built by Tasmanians and funded by our donors. Feedback indicates that it is well utilised and appreciated. Our attention now turns to addressing the needs of other areas of the state; specifically, a patient transfer facility at Hobart Airport.



The new patient transfer facility in use at Burnie Airport.

Our scholarship program continues to develop where the focus is placed on the investment of clinical staff, by encouraging students to consider careers in remote and rural areas of Tasmania and Australia. Support from our donors and the former members of the Commercial Travellers Association of Tasmania have allowed us to increase the number of scholarships offered from three to six. We are grateful for the support from the University of Tasmania, TasTAFE and our mainland sections for their assistance with the recipient placements.



The aeromedical simulator ready to board the boat to King Island.

The RFDS attended the King Island Show with several key partners and the emerging Right as Rain health program. We also took the aeromedical simulator; yes, a plane on a boat made the voyage to King Island! With support from RFDS South Eastern Section, we presented the successful Look! Up in the Sky education program to the students from the King Island District High School.

We have made several submissions, presentations and commissioned independent reports to advocate for health equity in rural and remote Tasmania. We successfully argued for the preservation of the primary care funding from the Commonwealth that is allocated for the Bass Strait Islands, because it was removed from the original agreement. This has resulted in the retention of \$250,000 in services funding each year for the three Bass Strait Islands.

Looking forward, we have lodged applications for a road Non-Emergency Patient Transport (NEPT) licence and submitted tenders to join the NEPT panel contract. In addition, we are progressing the delivery of increased RFDS dental services.

2016/17 is shaping up to be an exciting and stimulating time as we strive to provide the finest care to the furthest corner of our island state.

371
landings at Burnie Airport

1,105
inter-hospital
transfers

325
dental patients
treated on
Flinders Island



Wiawera station, SA.



Emily Ingram en route to a clinic.



Elise How boarding the aircraft at Port Augusta.



Emily Becker receiving her certificate from RFDS Tasmania President, Malcolm White.

SCHOLARSHIPS

RFDS Tasmania offers six annual scholarships for medical and nursing students and dental assistants to encourage future involvement in rural and remote medicine and dentistry, especially here in Tasmania.

Commercial Travellers Association Scholarship

The Commercial Travellers Association (CTA) of Tasmania Student Scholarship program was established in 2016 to provide scholarships for University of Tasmania medical students who are from a rural and remote area or who have expressed an interest in working in rural and remote areas. Three scholarships are offered annually to assist with the costs associated with their elective placement in a rural or remote setting of Australia.

The funding is provided to the RFDS by the former members of the CTA of Tasmania. The scholarship recognises the past work and service of their members to remote and rural areas of Tasmania and the support they received from rural and remote GPs and the RFDS.

Congratulations to the 2016 recipients, Beth Trainer, Nicholas Cretan and Rachel Stafford, who will take their placements later this year.

Fred McKay Medical Student Scholarship

The Fred McKay Medical Student Scholarship was established in 1997 in honour of Rev. Fred McKay, the successor to Rev. John Flynn and the spiritual leader of the RFDS. The scholarship is delivered in partnership with the University of Tasmania and the RFDS South Eastern Section to better acquaint Tasmanian final year medical students with the work of the RFDS in rural and remote communities. The scholarship has two components; two weeks based at Launceston as an observer with Ambulance Tasmania flight paramedics and retrieval doctors and two weeks operating from the Broken Hill RFDS Base in NSW.

Emily Ingram was nominated as the 2015 recipient. "I am so grateful for the opportunity to have undertaken a placement with the RFDS in my final year of medicine. The scholarship has broadened my understanding of rural medicine and showed me how the RFDS supports rural doctors and improves access to healthcare around Australia. I think this experience has made me more certain of my goal to become a rural GP in the future."

Robin Miller RFDS Nursing Scholarship

The Robin Miller RFDS Nursing Scholarship was established in 2013 by RFDS Tasmania in partnership with the University of Tasmania and RFDS Central Operations. The scholarship provides a senior nursing undergraduate with the experience of living in remote Australia and working there with the RFDS. It gives insight into the advantages and difficulties of nursing practice in the Outback. The scholarship is dedicated to the memory of the late Mrs Robin Miller-Dicks (1940–1975). A nurse, aviatrix and RFDS pilot who single-handedly immunised thousands of Australians with an oral polio vaccine and became widely known by Aboriginal Australians as the 'Sugar-Bird Lady'.

The scholarship recipient was Elise How. "As a nursing student, I both witnessed and participated in a variety of situations which provided me with an eye-opening and incredible experience. My role was one of assistance to the flight nurse and included shifts with the emergency team and fly-in-fly-out clinics. It has been a truly fantastic experience which I have enjoyed immensely and am very thankful to have been offered this wonderful opportunity."

John Flynn Dental Assistant Scholarship

The John Flynn Dental Assistant Scholarship was established in 2006 for dental assistants who are studying Certificate III at TasTAFE to further their workplace skills in remote parts of Australia. The scholarship is delivered by RFDS Tasmania and supported by RFDS Southern Eastern Section and TasTAFE. It is dedicated to the memory of John Flynn who recognised the desperate need to provide skilled medical care to remote areas of Australia. The scholarship comprises two weeks of flying and clinical experience as an assistant to the RFDS South Eastern Dentist operating from the RFDS Dubbo Base in NSW.

Emily Becker was selected as the recipient. "I would like to thank the RFDS for providing the scholarship and everyone who supported me. I gained an understanding of the organisation that goes into running a rural oral health program and the importance of having rural dental services available for communities. The RFDS have such a dedicated and hardworking team and I am so grateful to have been able to be a part of their journey".

BURNIE AIRPORT PATIENT TRANSFER FACILITY LAUNCH

A new, much improved patient transfer facility has been launched at Burnie Airport.

The new facility meets the requirements for increased usage and better protection from the prevailing westerly winds for patients, paramedics and pilots when transferring to and from road ambulances in inclement weather.

Constructed by local North West Coast firms, the new facility now has a full height wall on the western side to provide much-improved protection from the elements. In addition, the aircraft is able to taxi completely beneath the shelter.

The patient transfer facility, together with smaller scale transfer facilities at St Helens, Flinders Island and King Island Airports, were funded through the generous support of individuals and community service organisations.

Our very special guest at the launch was Anne Lewis, a former RFDS pilot in the late 1940s, who has clocked up over 8,000 hours of flying time throughout her career. Her extraordinary achievements extend to the rank of Pilot Officer, Royal Air Force (RAF); the highest aircrew rank available to women at the time. Anne was also selected to be presented to the Queen and Duke of Edinburgh in 1953 after the Coronation as the representative of the RAF.

The new patient transfer facility at Burnie Airport.



LOOK! UP IN THE SKY

The educational program was developed by RFDS Victoria to provide primary school students in years 3 to 6 with a greater understanding of the significant contribution that the RFDS has made to Australia's history and its relevance to all Australians today.

The resource uses the iconic status of the RFDS and its real-life stories to teach students about the unique nature of the Australian landscape and our relationship with it in every-day settings.

The interactive educational website has been redesigned and provides direct links to subjects, themed topics, interviews, videos and a tour of the Broken Hill Base. The Victorian educational simulator has also been transformed and now includes a cockpit complete with avionics, a propeller and a flight simulator. The simulator will tour Tasmanian schools later this year.

The program continues to expand into Tasmanian primary schools and their parent communities thanks to the support from RFDS Victoria.

HOBART AIRPORT STAFF AMENITIES

Thanks to the wonderful support of Royal Wolf Trading Australia Pty Ltd (Royal Wolf), *Better Homes and Gardens*, Bunnings Glenorchy Warehouse and Hobart International Airport our pilots and Ambulance Tasmania paramedics now have new amenities at Hobart Airport.

Better Homes and Gardens and Royal Wolf chose the RFDS as the recipient of an impressive renovation makeover of two 20-foot shipping containers completed on site at Bunnings Glenorchy Warehouse. Royal Wolf kindly donated the shipping containers and their transfer to Hobart Airport.

Better Homes and Gardens donated the impressive makeover filmed for an episode of Channel 7's lifestyle program and Hobart International Airport provided support to have the containers installed at the airport.

The renovated containers now provide a physical presence for the RFDS at Hobart Airport and are situated in very close proximity to where the aircraft lands. The well-appointed amenities are fitted with plumbing and electricity and comprise a comfortable bedroom, bathroom, kitchen and lounge/dining rooms.

It's smiles all around from our pilots and Ambulance Tasmania paramedics who will enjoy the improved comfort level of our new amenities while waiting for patients to be transferred to the airport.

AEROMEDICAL SIMULATOR ON THE ROAD

The simulator has been on the road with the RFDS team attending local events around the state. The aeromedical simulator is a life-sized exact replica of the fuselage of a flying doctor aircraft and designed to duplicate the confined space conditions and environment of the King Air aircraft for training purposes.

In November, the RFDS team with the simulator in tow visited Strahan to attend the Beach to Bay Fun Run, and in February it featured at the George Town Rotary Club's Wings & Things Family Fun Day.

In March, the simulator touched down at King Island to attend the annual show and visit the school to conduct an educational presentation for the students. During May the simulator landed at Agfest, Tasmania's premier rural event, followed by a public appearance at the launch of the new RFDS patient transfer facility at Burnie Airport.

Thanks to our volunteer drivers, David Annear and Greg Foot, who towed the simulator to the events.

3

Right as Rain events

RIGHT AS RAIN

Developed by RFDS Tasmania in partnership with the University of Tasmania's Active Tasmania project, Right as Rain is an innovative health promotion developed to improve health equity in rural and remote Tasmania.

The initiative focuses on early detection, disease prevention and management through the delivery of health promotion activities at community events in rural areas of the state.

During 2016, the Right as Rain team touched down at George Town Rotary Club's Wings & Things Family Fun Day and the King Island Show to help meet the specific health needs identified by each local community. The events were supported by Active Tasmania who provided health promotion activities and conducted a survey about the health of the communities.

At Wings and Things, the RFDS supplied head lice treatment kits and received support from a University of Tasmania PhD Pharmacy student who discussed the appropriate treatment of the parasite with local families.

Subsequently, the RFDS partnered with Anglicare and the University of Tasmania to conduct free education sessions in George Town to inform families about head lice prevention and treatment. Free packs were distributed to those who attended the sessions.

The Right as Rain team travelled to King Island to attend the annual show and was supported by a nurse from Family Planning Tasmania to address family planning with community members.

The Right as Rain team on arrival at the King Island Show.



Right as Rain is an innovative health promotion developed to improve health equity in rural and remote Tasmania.



Lindsay Millar OAM accepting the Rev. John Flynn Fellowship.

LINDSAY MILLAR OAM

Mr Lindsay Millar OAM joined the Tasmanian Section of the Royal Flying Doctor Service as a Foundation Member in 1960 when the Section was formed in Tasmania.

He was invited to join the Council in 1965 and has served continuously on the Board for 50 years including periods as President and is an Honorary Life Member.

He served on the Federal Council and Executive and was a member of the National Aviation Committee for ten years, all in an honorary capacity.

50

years of dedicated service

For service to the RFDS, Lindsay is one of only seven recipients who has been awarded the prestigious Rev. John Flynn Fellowship in recognition of extraordinary achievement and merit of the highest degree.

During his 50 years with the RFDS Lindsay has seen extraordinary developments: from single-engine aircraft carrying minimal medical equipment to twin-turbo-prop aircraft that are flying intensive care units, able to carry two stretchered patients and highly-trained medical personnel in pressurised comfort, with satellite phone and sophisticated GPS systems that are accurate within metres.

Lindsay was awarded Board Member Emeritus on his retirement; however he will remain extremely active in the service. His unwavering enthusiasm and commitment have been a constant thread underpinning the growth and success of the RFDS in Tasmania and we pay tribute to his 50 years of Board service.



RFDS Tasmania volunteer, David Annear.

OUR SUPPORTERS AND PARTNERS

RFDS Tasmania supports the aeromedical service and reaches out to communities to deliver a broad range of primary health care services and community projects to benefit all Tasmanians.

We wish to acknowledge and thank our donors. Your generosity and commitment are invaluable by allowing us to achieve the mission and vision of the Royal Flying Doctor Service. Special thanks to Brian and Wendy Faulkner for supporting RFDS Tasmania.

We are deeply grateful to our supporters who choose to pledge a bequest to the RFDS in their will. In doing so, we are able to continue to provide our services into the future. RFDS Tasmania recognises the bequests made by the late Myrtle Kathleen Duke, the late Leonie Bowen Ransom, the late Roy Michael Jensen and the late Ardyn Carington Lawrence.

RFDS Tasmania thanks all the individuals and organisations who kindly raise funds to help keep the Flying Doctor flying. We are truly grateful for your support.

Thanks to Nick Duigan, our honorary Ambassador, for his tireless enthusiasm in representing the interests of the RFDS.

We acknowledge and thank Scott Gelston who has volunteered his time to provide the RFDS with a suite of exceptional photos for our use.

We are grateful to our dedicated, hardworking and loyal volunteers who give so generously of their time and skills.

RFDS Tasmania thanks the former members of the Commercial Travellers Association (CTA) of Tasmania for providing the annual scholarship to assist three Tasmanian medical students to undertake their 4th year electives in a rural Australian setting.

We sincerely thank Colin and Betty Hite OAM and Alexandra Anderson for supporting the John Flynn Dental Assistant Scholarship and the Fred McKay Medical Student scholarship.

We acknowledge the support from the University of Tasmania, Ambulance Tasmania, Active Tasmania, TasTAFE, Oral Health Services Tasmania, Broken Hill University Department of Rural Health, Western NSW Local Health District, RFDS South Eastern Section, RFDS Victoria and RFDS Central Operations for partnering with RFDS Tasmania to deliver our scholarships and health care programs.

Malcolm White
President
Royal Flying Doctor
Service Tasmania

John Kirwan
Chief Executive
Royal Flying Doctor
Service Tasmania

Central Operations

CENTRAL OPERATIONS CHAIRMAN AND CHIEF EXECUTIVE REPORT

During 2015/16 Central Operations adopted a new Strategic Plan to take our organisation through to 2018.

As we consider the future, we realise we are not alone in the challenges faced by all within the RFDS nationally.

Support from the corporate sector has been contracting due to economic circumstances while funding at all levels of government has been tightening, bringing with it a greater necessity to find efficiencies in our service delivery models.

Amid these challenges we have not wavered from our commitment to both enhance and maintain our quality of service to the highest level of safety and security for our patients and staff.

Our Strategic Plan has five key goals:

- > Service Delivery
- > Our People
- > Reputation
- > Financial Security
- > Future Development

We expanded our service delivery of Primary Health Care services in outback South Australia in January 2016 when, in partnership with Country Health SA, we accepted responsibility for the Andamooka and Marla health services, which are staffed by Remote Area Nurses in addition to the existing RFDS Marree Health Service.

As part of this expansion of Primary Health Care, we are introducing *Best Practice*, a new digital health information system which will assist in gathering both quantitative and qualitative data about our patients and better inform us of the health needs of the communities we serve.

In another improved service for outback SA communities, we have introduced a new 24/7 emergency services number – 1800 RFDS SA – and in late 2016 plan to introduce 1800 RFDS NT.

Some highlights of our activity over the past year include:

- > 9,002 patient evacuations
- > 6,661 mental health consultations
- > 48,021 patient contacts in SA and NT
- > 15,468 landings

It has also been an exciting year with the completion of the construction of our new Adelaide Base in the newly-established aeromedical precinct of Adelaide Airport, adjacent to Harbour Town on Tapleys Hill Road.

Transition to the new premises which will bring together all operational and administration staff at the airport from early September 2016 with an official opening in October.



RFDS Port Augusta crew on emergency retrieval at North Well Station, SA.



Adelaide Base Flight Nurse Michael Penno with a patient on a transfer flight.

48,021

patient contacts in
Central Operations

Left: David Hills, Chairman
Right: John Lynch, Chief Executive



In September 2015, our new Pilatus PC-12-VH-FXJ was commissioned in a ceremony by Federal Treasurer the Hon. Scott Morrison. The ceremony also unveiled the generous donation of the \$600,000 aeromedical fitout of the aircraft by Simon Hackett of the Hackett Foundation. VH-FXJ, which went into service immediately, will be followed by three more new PC-12s which will be delivered in the coming year in July and October 2016 and in July 2017. They will replace PC-12 aircraft VH-FGR, FGS and FGT.

We acknowledge the capital contribution made by the Commonwealth Government for all four aircraft.

VH-FMP was also retired during 2016 and has been installed as a highlight exhibit in the new RFDS Tourist Facility in Darwin announced earlier this year. The new \$4 million investment is in partnership with Tourism NT and the NT Government and involves a high-tech tourism facility in Darwin featuring the story of the RFDS and of the World War II bombing of Darwin.

With construction on the historic Stokes Hills Wharf in Darwin due for completion in early July, the facility will be officially opened on 26 July. In combination with the award-winning RFDS Alice Springs Tourist Facility, the new Darwin attraction represents an important investment in Darwin and one which will generate tourism activity and contribute new jobs to the local economy.

During the year we've had great success with our fundraising particularly our premiere event, the Wings for Life Gala Ball which this year featured a Rio theme *Tropico Carnaval*. Todd McKenney headlined the entertainment as 800 guests swayed to Brazilian rhythms at the Adelaide Entertainment Centre, helping to raise an incredible \$242,000.

RFDS Central Operations fundraising efforts for 2015/16 has been outstanding with \$7.8 million raised at a cost of 9.8 cents in the dollar.

Our loyal and hardworking volunteers who run our 24 auxiliaries and support groups have made a tremendous contribution during the year.

Thanks to all of our staff, corporate supporters and volunteers for their support.

HIGHLIGHTS

- > 658 took part in the RFDS Healthy Living Program
- > 329 involved in RFDS training programs
- > 143 patients seen under Remote Oral Health Care Program
- > 48,000 people visited our Alice Springs Tourist Facility
- > 48,021 patient contacts in Central Operations
- > Work begins on Darwin Tourist Facility
- > Primary Health Care services expand in outback SA

Fergus Gunn at Brunette Downs Station in the Northern Territory.



CASE STUDY

World turns upside down for young stockman

For Fergus Gunn the sound of the Pilatus PC-12 engine of a Royal Flying Doctor Service aircraft through the darkness would have been a godsend.

Needing help to breathe and having lost a large amount of blood, the teenage jackaroo was in urgent need of emergency care after his 4WD flipped over and over following a tyre burst.

Fergus had been driving late one afternoon in October 2015 on the remote Brunette Downs cattle station more than 800 kilometres north-east of Alice Springs in the Northern Territory when his world was literally turned upside down.

RFDS Central Operations Flight Nurse Fred Hawkins recalls the scene as the aeromedical crew, including a Doctor from the Central Australian Retrieval services, responded to the emergency call.

“As we were being driven out to the scene, it was pitch black, and what started out as a few dim headlights in the distance turned into a wrecked 4WD on the side of the road and a very badly injured young man lying beside it,” Fred says.

The crew quickly went to work on the young man.

“At the scene of the accident Fergus needed our help to breathe, and a blood transfusion. His blood pressure was very low, and we were mindful all the time that he could go into cardiac arrest,” Fred says.

“Before we took him to the plane, we also needed to secure his body in a special vacuum mat which immobilises his neck and back to reduce the risk of making worse any possible spinal cord damage.”

It took them 40 minutes to drive to the airstrip with Fergus lying in the tray of a station ute where he was airlifted to Alice Springs in the early hours of the morning.

Every day the RFDS Central Operations provides more than 20 emergency aeromedical transfers throughout South and Central Australia alone – and more than 100 across Australia.

Fergus had suffered two punctured lungs and fractures to several vertebrae. He was flown to Adelaide by RFDS for further checks but luckily, Fergus had not sustained any serious injury.

Fergus returned to work at Brunette Downs and while he made a full recovery he does still sport a few facial scars as a reminder of his “lucky escape”.

“I know I’ve been given a second chance to live the rest of my life, thanks to the RFDS, and I can’t thank them enough,” says Fergus.

HEALTH EDUCATION

Outback dental care a must

A group of excited school kids wait in line as they each have a finger dipped in a plaque disclosing gel they are instructed to rub onto their teeth.

A few seconds later, as they turn and grin at one another they see that their teeth have gone a deep shade of royal blue and it’s giggles all round.

University of Adelaide oral hygiene student Mia Bratovic and dental students Laurence Doan, Kerin Jacob and Michael Kim give the children a lesson in tooth brushing techniques and why it’s important to remove plaque before it causes tooth decay.

Seven of the school students and six others including teachers, ancillary staff and locals all see the dentist that afternoon in a makeshift clinic in the home economics classroom of the Mintabie Area School.

They are seeing the dentist as part of the RFDS Remote Oral Health Care Program (ROHCP) two-day clinic at Mintabie and nearby Marla, more than 1,100 kilometres north-west of Adelaide and more than 800 kilometres from the nearest fully equipped dental surgery in Port Augusta.

It is the third RFDS ROHCP clinic for the year (Mungerannie on the Birdsville Track and Kingoonya in SA’s remote north-west were in April) and there will be one more clinic in each location in the second half of the year.

20

emergency aeromedical
transfers conducted by RFDS
Central Operations every day

This particular clinic in May 2016 is special because for the first time, the remote clinics can do permanent fillings and teeth polishing thanks to new portable equipment purchased by ROHCP funder Adelaide Airport Limited (AAL).

On the clinic's second day at the RFDS Marla Health Service, 15 patients including locals and station people see the dentists who do a range of treatments including fillings and teeth polishing and smoothing for several patients.

AAL has purchased two compressors - one which will remain in Marla and the other in Mungerannie - and a Portable Drill Unit (PDU) which students can take with them for each clinic. The units enable students to drill, do permanent fillings, polish and smooth teeth, and provide suction during treatment.

Until the Marla-Mintabie clinic in May, students were only able to treat patients with the instruments they carried with them and conduct basic treatment including temporary fillings.

AAL Managing Director, Mark Young, said he was amazed by the level of treatment carried out by dental students with limited equipment.

"Adelaide Airport felt there was a great opportunity to fund the purchase of equipment through our Community Investment Program, that would make life easier for both dentists and patients in remote areas," Mr Young said.

The ROHCP visits remote communities with no local or practical access to dental care. In 2015/16 the program treated 143 patients, 26 more than the previous year and double the number for 2013/14.

RFDS Central Operations Health Services Manager, Alison Day, said the ROHCP is contributing significantly to the short and long-term health outcomes of people living in three remote – and surrounding – communities of outback SA.

"It's well documented that people living in rural and remote communities have poorer rates of oral health than those living in cities and that this is related to a lack of oral health services in remote areas," Ms Day says.



Dental student Michael Kim examines Xavier Montgomery at Mintabie Area School, SA.

An RFDS research paper released in early 2016, *Filling the Gap: Disparities in oral health access and outcomes between major cities and remote and rural Australia* made the following findings:

- > childhood cavities are 55% higher for children in remote areas
- > one third (33%) of people in remote areas are living with untreated tooth decay compared with 23% in the cities
- > one third of people in remote areas have gum disease compared to 22% in the cities, and
- > only four in 10 adults living in remote areas visited a dentist in the previous 12 months compared with six in every 10 adults in major cities.

"By maintaining a dental and oral health service in these remote SA communities served by ROHCP, quality of life is improved, access to basic treatment and early intervention is increased and health disadvantages are reduced," Ms Day says.



143

patients seen under
Remote Oral Health
Care Program

MENTAL HEALTH

When there is no spoken or written word for 'anxiety' in a language, it can take some careful thinking to find a way to talk through a problem with anxiety in the community.

But the RFDS mental health team in Central Australia has found a way to get people talking – and it's the *Worry Boss* story.

An idea pitched by RFDS Mental Health Clinician Anne Bromhead from the team based in Alice Springs has resulted in a short video animation about anxiety called the *Worry Boss* story.

The use of a video is a first for the RFDS Mental Health Services in Rural and Remote Areas (MHSRRA) Program which will use it as one of many tools it has when it consults in a range of communities in Central Australia.

6,661

consultations under the Mental Health Services in Rural and Remote Areas program in Central Australia



The story uses animation to enact a conversation between an Aboriginal man and an Elder woman, who asks what's troubling him. The chat leads to her helping him realise the difference between his every day worries and worries that make him feel angry and unfocused.

"Don't let the Worry Boss get you!" she tells him as they discuss ways to handle the 'worry boss'.

Anne Bromhead said the video, which is produced in English, Arrente and Alyawarr, gives those in the communities where English is not their first language an opportunity to understand an issue where there is no word for word translation in their own language.

"The RFDS mental health team has used a variety of resources to build mental health capacity in remote communities however, the process of developing a specific video animation such as this one is a first for the RFDS," Anne Bromhead says.

"The video will assist health staff working in remote communities to establish an understanding and dialogue with their Aboriginal clients who may not have the English vocabulary to describe their mental health experience."

The video is a collaborative project of the RFDS, the Federal Department of Health, iTalk Studios in Alice Springs, Akeyulerre Healing Centre, and Arrente and Alyawarr people from Ampilatwatja, Atitjere and Santa Teresa.

Fellow RFDS Mental Health Clinician, Jessy Waine, said they had received positive feedback from community members involved in the development of the *Worry Boss* story, many of whom strongly identified with the main character's story.

"The video helps Aboriginal and non-Aboriginal people to understand anxiety and the impact it has on their lives; it also provides strategies for people and their families to manage anxiety."

Another tool used by RFDS mental health teams is 'narrative therapy' which uses traditional group story telling through art as a way of raising and discussing issues that may be troubling people.



Still from *Worry Boss* story video about discussing anxiety problems.

The MHSRRA Program services communities to the east of Alice Springs of Titjikala, Santa Teresa, Engawala, Harts Range, Utopia, Ampilatwatja, Lake Nash and Bonya and to the west, Mutitjulu, Imanpa, Docker River, Hermannsburg, Areyonga, Wallace Rock Hole, Haasts Bluff, Papunya, Mt Liebig and Kintore.

The program provides culturally appropriate in-field treatment of mild to moderate diagnosable mental illness to outback communities where there is limited access to clinical mental health services.

Visiting communities on a weekly/fortnightly basis, the multi-disciplinary team of RFDS clinicians delivers clinical services including cognitive behavioural therapy, narrative therapy, brief interventions, counselling and motivational interviewing. The MHSRRA team also provides mental health capacity building activities and community development.

Under the MHSRRA program RFDS mental health teams have conducted 6,661 consultations during 2015/16.

PRIMARY HEALTH CARE

RFDS expands primary health care delivery across SA outback

People living, working and travelling in outback South Australia now have greater access to essential primary health care services after RFDS Central Operations moved to expand its service delivery at the beginning of 2016.

The RFDS took over provision of primary health care services in the remote communities of Andamooka and Marla in addition to its existing Marree Health Service, in partnership with SA Health.

RFDS Doctor Betsy Williams and community health Nurse Cheryl Boles examine baby Hector Koko at Yalata, SA.



The changes coincided with the introduction of a new emergency contact number for the SA outback: 1800 RFDS SA (1800 733 772) which is aimed at giving those in remote areas the added security of an easy to use universal contact number for medical services.

The new number puts callers in remote locations with no nearby local health service or hospital in direct contact with the RFDS Port Augusta Base and on-call medical advice from an RFDS Doctor 24 hours a day.

The health service clinics at Marree, Andamooka and Marla are each staffed by two Remote Area Nurses who provide primary health care, home visits, referrals, a 24-hour medical consultation service and an ambulance service.

Marree and Marla host regular RFDS fly-in GP and Nurse clinics and all three host the RFDS Primary Care Outreach Program which transports SA Health allied health professionals to rural and remote communities for day-long clinics.

“We acknowledge the trust the SA Government places in the ability of the RFDS to deliver essential primary health care services to the highest standards to these rural and remote communities,” says John Lynch, CEO of RFDS Central Operations.

“We have been a long-term provider of primary health care services through our Marree Health Service to the Marree and Birdsville Track communities, and are delighted to have been invited to expand our services to Andamooka and Marla.”

The RFDS has been the lead provider of emergency aeromedical and essential primary health care services in rural and remote South Australia since 1939. Last year, the RFDS assisted more than 22,000 patients – equivalent to someone every 23 minutes.

Mr Lynch said the communities of Andamooka and Marla would benefit from integration with RFDS Practice Management services based in Port Augusta which include 24 hours a day access to telehealth services, GP fly-in clinics and emergency aeromedical services.

RFDS Central Operations assisted

22,000

patients across rural and remote SA



The changes to practice management services also mean patient records for those in remote communities will be computerised for the first time under the RFDS GP and Nurses clinic services adoption of the *Best Practice* digital patient record management system.

Across the three locations, the RFDS provides:

- > a Registered Nurse primary health care service
- > after-hours emergency nursing service
- > community-based primary health education and chronic disease management
- > emergency and non-emergency ambulance services, and
- > support to SA Ambulance and local volunteer ambulance crews.

“We are pleased to continue to provide primary health care services to the communities of Marree and the Birdsville Track through its Marree Health Service as it has done for more than a decade,” Mr Lynch says.

“We are looking forward to building on these essential services and providing them to the highest RFDS standard to the Marla and Andamooka communities for many years to come.”

TRAINING

Emergency skills training helps GPs keep in touch

Within ten minutes of arriving at Port Lincoln Hospital for a stint as on-call doctor, Adelaide GP Michelle Cresp found herself in the Emergency Department dealing with two cyclists injured in a road accident, one with a serious chest injury.

“In the intensity of that initial five minutes, it almost seemed like a joke when they said to me, ‘you’ve got a shark attack coming in’,” Dr Cresp recalls of Anzac Day morning last year.

“We were already preoccupied with a major trauma and a little behind the eight ball; we didn’t have very long to get things ready and to call other staff in.”

Staff quickly moved to clear the ED while Dr Cresp assembled a team including three extra nursing staff from the wards, and the on-call surgeon and anaesthetist.

By the time an SA Ambulance (SAAS) crew arrived with 26-year-old Chris Blowes, he was in cardiac arrest and missing his left leg above the knee, bitten off in an attack by a White Pointer during a surfing session with a couple of mates at Fishery Bay, 30 kilometres south of Port Lincoln.

Dr Cresp, three SAAS paramedics and the ED team spent the next 90 minutes working to keep Chris alive and in the process used just about every available suitable blood supply in the hospital.

“We were astonished at about the hour mark that not only did we get a strong output (heartbeat) but he put his hand up to the tube in his mouth,” Dr Cresp says.

Dr Cresp says she owes the confidence she had mustered that day to lead the team in resuscitating Chris Blowes to her regular participation in the RFDS Rural Emergency Skills Program (RESP) training courses, now in their 10th year of delivery.

She had completed her most recent RESP course only months earlier, allowing her to maintain the skills needed in handling major trauma incidents.

RESP and the Central Australian Retrieval Training (CART) course are among a number of training and familiarisation courses run by RFDS which helps medical and health professionals sharpen their emergency trauma skills.

RFDS also offers First Aid training to people living, working or travelling in remote areas of Australia including station staff and remote miners.

Nursing and medical students can get a taste of what it’s like working for the RFDS under the Ride Along Program where they can observe staff at work over a weekend at the Adelaide or Port Augusta bases. Students can also apply for an attachment to the RFDS as an elective in their nursing or medicine course.

...it almost seemed like a joke when they said to me, ‘you’ve got a shark attack coming in’.



Adelaide GP Dr Michelle Cresp begins work on a shark attack victim in Port Lincoln in April 2015. Courtesy of Channel Seven Today Tonight.



329

participants in Rural
Emergency Skills
Program, Central
Australian Retrieval
Training and First
Aid Training



Retired RFDS CO aircraft VH-FMP installed as an exhibit in the new RFDS Darwin Tourist Facility.

A 12-month placement in Port Augusta is available to medical graduates through the RACGP's GP registrar program while Registered Nurses can apply for the RFDS Midwifery Scholarship.

Originally a country GP, Dr Cresp finds the RESP course focus on simulation and supportive team dynamics most useful.

"There's always something to learn, new equipment and better resus outcomes, there's always new learning and RESP is always respectful of the fact that GPs are not normally doing this kind of medicine," she says.

"I don't think I would go out there if there wasn't something like RESP available."

The RFDS runs the RESP for rural and remote GPs to ensure they are equipped with and can maintain the skills required to manage acutely unwell or critically injured patients presenting to country hospitals in SA.

TOP END PUSH INTO TOURISM BOUND TO PAY DIVIDENDS FOR RFDS

The success of the RFDS Alice Springs Tourist Facility is being taken to the Top End with an innovative new facility that combines two of Australia's most iconic stories.

The \$4 million investment places RFDS Central Operations in the driver's seat as project manager of the new RFDS Darwin Tourist Facility in partnership with the Tourism NT and the NT Government to present the history of the Flying Doctor and the Bombing of Darwin during World War II.

Nearing completion in June 2016 for opening to the public in July, the RFDS transported a decommissioned Pilatus PC-12 aircraft VH-FMP or 'Papa' by road from Alice Springs to Darwin to be installed as part of the RFDS exhibit at historic Stokes Hill Wharf.

The exhibit will feature a replica of a Japanese Mitsubishi Zero aircraft which will hang from the ceiling and form part of a sound and light show to recreate the 1942 bombing of Darwin Harbour in addition to a theatre where holographic technology will be used to tell the story.

RFDS Northern Territory General Manager Michael Toomey said the Royal Flying Doctor Service Darwin Tourist Facility was all about experience and education.

The RFDS Alice Springs Tourist Facility attracted nearly

48,000

visitors

"We've got some of the most experienced technical people in the world who have worked on this exhibit; the technology is impressive," Mr Toomey said.

Mr Toomey said he expected the RFDS Darwin Tourist Facility would attract 80,000 visitors a year.

The development is the latest innovation in tourism and builds on the RFDS work in Alice Springs with the introduction of a full-sized hologram of Flying Doctor founder Reverend John Flynn as part of a high-tech retelling of the story of the Flying Doctor.

Following a refurbishment of the Alice Springs Tourist Facility four years ago there has been a 12% increase in visitor numbers, meaning it has continued to retain its place as one of the Red Centre's premier tourist attractions with nearly 48,000 visitors from all over the world every year.

The value of the tourist facilities to RFDS Central Operations cannot be underestimated with a 30% increase in its net contribution to fundraising after the refurbishment in Alice Springs.

Western Operations

Left: Neville Bassett, Chairman
Right: Grahame Marshall, Chief Executive Officer



WESTERN OPERATIONS CHIEF EXECUTIVE OFFICER'S REPORT

The past year for the RFDS in Western Australia has seen significant growth as we evolve to meet patient demand and to remain at the forefront of innovation in providing the very best aeromedical care to all West Australians.

During the past 12 months, we have flown over 9,000 sick and injured patients to hospitals across our vast state, and we've received nearly 40,000 telephone calls for medical assistance and advice.

Pilots and medical teams made over 16,500 landings and flew 7,764,000 kilometres to the furthest reaches of Western Australia.

As we proudly service our 2.5-million-square-kilometre state, it's important to acknowledge the professionalism, commitment and tireless dedication of our staff across many roles. For the RFDS to assist all who require our help, it takes an exceptional team to facilitate every response to ensure the best patient outcomes.

To ensure that we will always be there whenever and wherever someone needs us, securing our long-term future is paramount. In the past year, we have celebrated several key milestones in our drive to bolster the RFDS' capacity to ensure we can grow sustainably. As demand for our services remains at record levels, we must ensure we continue to be relevant to all in WA who rely on us, whether they're living, working or travelling anywhere across our state.

This year, the opening of our new Broome facility is a significant milestone. As the first new RFDS facility in the state in 50 years, it meets the ever-expanding need for our services in WA's far north, and increases our physical footprint and capability. The new, state-of-the-art facility located at Broome International Airport means we have additional aircraft and highly skilled staff on the ground, ready to respond faster to emergencies throughout the Kimberley and Pilbara regions.

At our Jandakot facility, the first phase of construction development is underway to accommodate the arrival of our new, technologically advanced Pilatus PC-24 jet aircraft, which features speed, landing and fit-out advantages that will revolutionise our patient response and retrieval capability. A new hangar is being built along with new engineering and maintenance facilities, which will boost engineering maintenance capacity for our growing fleet.

Our Derby facility has been modernised in a major refurbishment and redevelopment project that sees our hangar, patient treatment centre and offices brought together in one location at the Derby Airport. After more than 60 years of delivering services from the Derby facilities, this redevelopment enhances our ability to deliver the best outcomes for our patients.

The generous support of our existing and new supporters and community organisations, as well as the valued, ongoing relationships with our corporate partners, enables us to build and strengthen our services into the future, and to reach and treat people from all corners of WA. Our gratitude for this continued commitment is immense, as is that for our many selfless volunteers in metropolitan and remote communities.

With many significant achievements in the past year, and exciting developments on the horizon, we look forward to moving into the future confident in the progressive and innovative path we're on. In this, we are focused on delivering the best aeromedical services to all in WA who rely on us, no matter where or when.

Grahame Marshall
Chief Executive Officer
Royal Flying Doctor Service, Western Australia

2.5m

square-kilometres proudly serviced
by our committed staff

81

years of dedicated
service

GAME-CHANGING PILATUS PC-24 JET AIRCRAFT

People across Western Australia who depend on the life-saving services of the Royal Flying Doctor Service will soon experience even better health outcomes.

This is due to the exceptional capabilities of the super-versatile Pilatus PC-24 jet aircraft expected to land in WA from early 2018. Their arrival will revolutionise aeromedicine, and consolidate the RFDS' leading position as the dedicated provider of life-saving services for people who live, work and travel across WA.

The PC-24 can reach twice the cruising speed of the current fleet of Pilatus PC-12 aircraft, and it has the ability to take off and land on very short runways, and on dirt airstrips. It can accommodate three stretchered patients in a bespoke, intensive care fit-out.

With all this, the RFDS will be in a position to provide even more widespread and vital life-saving aeromedical services to more people across our vast State.

Faster trips, a reach into more remote places, a greater number of patient retrievals and transfers all mean RFDS will be placed to deliver even better outcomes for more patients. The new jet aircraft capability will also create greater operational efficiencies.

Aeromedical services in WA are set to be transformed as the RFDS prepares to welcome these next generation jet aircraft.

The technologically advanced long-range jet is designed and constructed by Pilatus in Switzerland.

Development at the RFDS' Jandakot facility is currently underway in preparation for the arrival of the Pilatus PC-24 jet aircraft. An additional hangar and engineering maintenance area is being constructed to cater for the jet aircraft, while the new Broome facility was specifically designed and built to also cater for this impressive jet.

The aircraft's innovative design and custom medical fit-out for aeromedical retrievals by the RFDS, will take place in Switzerland, prior to its delivery to Western Australia. The impressive three stretcher capability enables the transfer of more patients in a highly controlled medical treatment environment.

The Royal Flying Doctor Service Western Australia will be the first organisation in the world to provide the capability of the PC-24 jet in life-saving services, highlighting our leading position in the aeromedical industry when it comes to technology and innovation.

OUR SERVICES

Over the past 12 months, the RFDS has touched the lives of over 27,000 people through aeromedical retrievals and Patient clinics, and provided advice and assistance to a further 37,684 through our telehealth service.

In Western Australia alone, the RFDS services over 2.5-million-square-kilometres, with 15 aircraft and six aeromedical operating facilities. Beyond aeromedical retrievals, the RFDS delivers a range of primary health care services across the state.

Emergency aeromedical retrievals

The RFDS' life-saving services are delivered through aeromedical retrievals in aircraft fitted out with technologically advanced ICU equipment. Each year, RFDS provides these services to thousands of sick and injured people across Western Australia when help is far from reach.

Inter hospital patient transport

The RFDS provides aeromedical care and transport for sick and injured patients to and between hospital facilities within WA, as well as interstate, when the patient requires further or tertiary medical care.

Telehealth

Over 37,000 calls were received in the past year for medical advice and assistance, as well as radio and video linked medical consultations with an RFDS doctor. These calls came from people living, working and travelling across WA, where access to medical assistance is limited or non-existent.

GP clinics and dental services

Dental health and general practice clinics are conducted around the state, bringing routine check-ups and treatment to remote and rural areas where medical services are limited or non-existent.

Medical chests

Currently over 500 medical chests are located around the state, supported by the RFDS. They contain a range of pharmaceutical and non-pharmaceutical items for emergency treatment, pain relief and preparation for evacuation from remote locations.



BROOME FACILITIES LAUNCHED

On Wednesday 11th May 2016, the RFDS in Western Australia celebrated a major milestone. The first new facility in 50 years was launched in Broome, in the north of the state.

The Broome facility not only increases the physical footprint of the organisation, but most importantly builds capability in delivering the most effective aeromedical care to all West Australians, 365 days per year.

Demand for RFDS services has increased substantially in the Kimberley region over the past five years, and the new facilities will ensure the RFDS can continue to meet the increasing and changing demand for aeromedical services in the north of WA faster and more efficiently.

Last year alone, the RFDS flew over 1,100 patients to and from Broome, making it the busiest transport hub in the north of WA.

The facility consists of two aircraft hangars and a state-of-the-art patient treatment centre, and the introduction of additional capacity to Broome will mean the RFDS is better placed to more quickly respond to emergencies throughout the Kimberley and the Pilbara, enabling reduced flight times, and ultimately providing better outcomes for patients in the region.

The development and delivery of the new RFDS Broome facilities, including the construction and fit-out of the two new hangars and patient treatment centre has received strong financial support from the Australian Government and the WA State Government, while a Lotterywest grant enabled the acquisition of operational equipment and information technology systems for the new facilities.

FIRST SIX MONTHS IN BROOME

The new Broome facility has bolstered our capability in the north of Western Australia, enabling additional aircraft and crews to assist with the increasing and changing demand in the region.

- > 898 hours flown by our pilots
- > 297 patients aeromedically retrieved
- > 215 flights undertaken
- > 569 landings made



Left: Broome-based RFDS staff at the official launch event of the Broome Facility.

Top: Staff and guests at the official launch event of the Broome Facility.

297

patients aeromedically
retrieved in Broome



A Pilot and Nurse leave an aircraft at the end of busy day saving lives across Western Australia.

A Flight Nurse treats a patient in flight during an aeromedical retrieval in Western Australia.



2016/17 OBJECTIVE

Jandakot development phase one

As the Australian global launch partner of Pilatus, the RFDS in Western Australia will be the first recipient of the new PC-24 jet aircraft, progressively receiving a fleet of three from the first half of 2018. The PC-24 jet is revolutionising aeromedicine for the RFDS, ensuring better outcomes for people in WA.

In preparation for the imminent arrival of the Pilatus PC-24 jet aircraft and as the demand for the services of the RFDS continue to change the facilities at Jandakot are evolving to suit.

Due to the size of the PC-24 aircraft, engineering and maintenance facilities at the Jandakot base are being developed to accommodate these additional aircraft. Demolition of existing buildings was completed in May this year, and construction of the new facilities is in progress.

The new facilities will consist of an additional hangar, and engineering facilities and workrooms. Phase one of the development has been made possible through a grant from Lotterywest and funding from the RFDS Aero Medical Fund toward the project.

Works have begun on the building phase, with completion expected in January 2017. The completion of phase one will mark a major milestone for the RFDS in Western Australia and ensure our Aviation and Engineering departments have access to the best and most innovative technology and equipment, creating better outcomes for our patients across Western Australia.

18,013
patients attended
remote health clinics

15
aircraft in
the fleet

9,017
patients retrieved
across WA



Patient Tarryn Vallance visits the RFDS Jandakot Facility a year after her retrieval.

CASE STUDY

Patient Story

Returning to Perth with three friends after a Karijini holiday, Tarryn Vallance was thinking about the nursing graduate program she hoped to enter soon. Instead, she had the Royal Flying Doctor Service help save her life.

“We were about 25 kms south of Cue,” recalls Tarryn. “It’s still unclear what happened but I overcorrected when the vehicle left the road, and we rolled three or four times.”

Tarryn was trapped in the vehicle and was the most severely injured of the vehicle occupants. “I recall talking and screaming, but not much else.” It’s not surprising considering her injuries included a de-scalped head, broken back in 14 places, both shoulder blades broken, all three bones in her left arm broken, and a punctured lung.

A short way behind Tarryn that day was a pilot vehicle driver who came upon the accident soon afterwards. He used his satellite phone to call Cue and Meekatharra for emergency services.

“I believe the firies arrived first and gave me oxygen,” says Tarryn. The three passengers did not sustain life-threatening injuries, and one was taken to Meekatharra Hospital.

Tarryn describes the accident scene: “The car was crumpled and my legs were trapped but uninjured. It took two hours to cut me out. The guy who’d stopped for us stood next to my window all the time, holding my head.”

With the Royal Flying Doctor Service alerted, a now unconscious Tarryn was taken to Cue Nursing Station. She’d also suffered strokes as a result of her injuries. Before putting her on the flight, the RFDS flight crew gave her a blood transfusion, re-attached her scalp where possible, and intubated her for the life-saving flight.

Tarryn was flown to Royal Perth Hospital, where she regained consciousness five days later. “It was a traumatic and agonising time for my family who were by my bedside,” explains Tarryn. “At the time, no-one thought I’d live. And if I did, the possible permanent effects of my injuries were unclear.”

On her long and painful road to recovery, Tarryn has never given up. She completed her final nursing degree exam and shared her story from Narrogin Hospital, where she’s recently taken up a new role.

Tarryn is keen to stress how critical the RFDS is to people who are travelling in WA, like she was. “Because they could get to me, my family was not shattered.”

She’s visited Cue to thank everyone who helped her. “I’ve also seen the RFDS plane I was flown in, and can appreciate even more now that it’s a fully fitted out, flying ICU. I benefitted from an amazing level of professional emergency aeromedical care.”

Tarryn looks to the future positively. “I accept my back and shoulders will never be perfect again, but it’s still better than the alternative! An experience like this made me decide that if I’m going to live, I have to do it well!”

37,684

telehealth consults conducted



Top: An RFDS aircraft on the tarmac at the new Broome facility.
Bottom: Western Operations Pilot Damien Whitham prepares for take-off.





Western Australia Jandakot staff in their new uniforms.

STATE-WIDE COORDINATION CENTRE

The Jandakot State-Wide Coordination Centre is the communication and tasking hub for aeromedical transfers across Western Australia.

Over the past year, the State-Wide Coordination Centre has tasked the aeromedical retrieval of over 9,000 patients right across Western Australia, and handled nearly 40,000 calls for medical advice and assistance.

A dedicated team of professionals work around the clock to keep the RFDS in WA operating, and ensure that every patient receives the best possible outcome.

In a standard day, the Coordination Centre receives emergency calls, prioritises patients, tasks aircraft and staff, and liaises with St John Ambulance and hospitals all around the state.



The State-Wide Coordination Centre operates 24 hours a day, 365 days a year.

KEY RFDS WA OUTCOMES

- > Aeromedically transferred and treated over 9,000 patients across Western Australia
- > Flew a total of 7,764,000 kilometres and made 16,553 landings, often on dirt and unfinished runways
- > Provided primary health care and consults to over 18,000 patients in remote and rural communities across the state through community clinics
- > Opened our first operating facility in 50 years in Broome
- > Provided medical assistance and advice to nearly 38,000 people right around Western Australia through our Telehealth service
- > Provided aeromedical and primary health care to Australians right across the vast 2.5-million-square-kilometre state

7,764,000

kilometres flown

16,553

landings made

National consolidated statistics

Aviation statistics FOR THE FINANCIAL YEAR ENDED 30 JUNE 2016

Section aviation statistics

			NUMBER OF LANDINGS			KILOMETRES FLOWN			BLOCK HOURS		
Number of aircraft			RFDS	Charter	Total	RFDS	Charter	Total	RFDS	Charter	Total
Central Operations	Alice Springs	7	4,751	-	4,751	2,320,705	-	2,320,705	6,807	-	6,807
	Adelaide	5	6,296	-	6,296	1,905,986	-	1,905,986	6,145	-	6,145
	Port Augusta	3	4,421	-	4,421	1,331,516	-	1,331,516	4,147	-	4,147
	TOTAL	15	15,468	-	15,468	5,558,207	-	5,558,207	17,099	-	17,099
Queensland Section	Brisbane	2	3,791	44	3,835	1,247,559	10,032	1,257,591	3,750	40	3,790
	Bundaberg	1	2,984	-	2,984	759,896	-	759,896	2,491	-	2,491
	Cairns	6	4,156	179	4,335	1,416,345	45,157	1,461,502	4,547	177	4,724
	Charleville	2	1,420	-	1,420	541,021	-	541,021	1,621	-	1,621
	Longreach	-	-	-	-	-	-	-	-	-	-
	Mt Isa	4	2,122	29	2,151	706,716	5,597	712,313	2,099	25	2,124
	Rockhampton	3	3,858	-	3,858	1,422,518	-	1,422,518	4,137	-	4,137
	Roma	1	738	-	738	184,644	-	184,644	601	-	601
	Townsville	2	3,160	-	3,160	1,410,618	-	1,410,618	3,891	-	3,891
	TOTAL	21	22,229	252	22,481	7,689,317	60,786	7,750,103	23,138	241	23,379
South Eastern Section*	Broken Hill	4	1,861	81	1,942	546,994	18,396	565,390	1,868	59	1,927
	Dubbo	3	1,793	-	1,793	523,773	-	523,773	1,760	-	1,760
	Gonski Dental	1	377	74	451	84,323	18,309	102,632	295	68	363
	Bankstown	1	261	624	885	74,926	148,953	223,879	259	548	807
	Launceston	2	2,289	-	2,289	477,783	-	477,783	1,912	-	1,912
	Essendon	2	504	-	504	187,900	-	187,900	640	-	640
	Mascot	5	8,484	-	8,484	2,633,381	-	2,633,381	9,121	-	9,121
	HQ	-	31	-	31	13,153	-	13,153	53	-	53
	TOTAL	18	15,600	779	16,379	4,542,233	185,658	4,727,891	15,908	675	16,583
Western Operations	Broome	1	569	-	569	306,869	-	306,869	898	-	898
	Derby	2	2,566	1,397	3,963	1,175,685	206,248	1,381,933	3,588	794	4,382
	Jandakot	5	6,219	238	6,457	2,227,013	28,925	2,255,938	7,103	119	7,222
	Kalgoorlie	2	2,097	58	2,155	989,685	16,472	1,006,157	2,924	67	2,991
	Meekatharra	2	2,425	55	2,480	1,322,647	11,705	1,334,352	3,820	50	3,870
	Port Hedland	2	2,432	337	2,769	1,393,724	71,928	1,465,652	3,951	273	4,224
	Perth Airport	1	245	9	254	348,885	21,515	370,400	542	35	577
	TOTAL	15	16,553	2,094	18,647	7,764,508	356,793	8,121,301	22,826	1,338	24,164
GRAND TOTAL		69	69,850	3,125	72,975	25,554,265	603,237	26,157,502	78,972	2,254	81,226

* Number of aircraft includes two to be sold.

Aviation statistics FOR THE FINANCIAL YEAR ENDED 30 JUNE 2016

Total all sections

Year	Number of aircraft	NUMBER OF LANDINGS			KILOMETRES FLOWN			BLOCK HOURS		
		RFDS	Charter	Total	RFDS	Charter	Total	RFDS	Charter	Total
2015/2016*	69*	69,850	3,125	72,975	25,554,265	603,237	26,157,502	78,972	2,254	81,226
2014/2015	68	73,256	3,708	76,964	26,118,507	728,818	26,847,325	80,174	2,780	82,954
2013/2014	67	71,274	4,040	75,314	25,617,353	793,258	26,410,611	78,788	2,989	81,777
2012/2013	66	70,994	4,717	75,711	25,592,900	1,022,586	26,615,486	76,210	3,697	79,906
2011/2012	65	69,477	4,671	74,148	25,490,128	1,107,568	26,597,696	77,185	3,801	80,986
2010/2011	64	71,017	4,701	75,718	25,598,693	1,270,997	26,869,690	77,114	3,845	80,959
2009/2010	60	68,696	5,518	74,214	24,383,443	1,209,012	25,592,455	72,895	4,470	77,365
2008/2009	53	65,141	6,629	71,770	22,414,964	1,508,476	23,923,440	67,786	5,425	73,211
2007/2008	51	62,566	6,458	69,024	21,738,198	1,442,240	23,180,438	65,256	5,320	70,576
2006/2007	47	60,013	5,061	65,074	20,656,438	1,058,157	21,714,595	61,685	4,113	65,798
2005/2006	50	58,416	4,595	63,011	19,535,099	907,975	20,443,074	57,597	3,784	61,381
2004/2005	47	55,542	2,315	57,857	18,515,809	1,008,550	19,524,359	54,607	4,225	58,832
2003/2004	45	56,008	2,004	58,012	18,428,169	1,092,198	19,520,367	56,050	4,213	60,263
2002/2003	36	37,024	1,347	38,371	13,732,239	338,564	14,070,803	40,269	1,402	41,672
2001/2002	40	45,313	3,897	49,210	15,544,830	1,037,661	16,602,491	45,681	4,012	49,693
2000/2001	42	36,307	3,930	40,237	14,811,922	1,175,306	15,987,228	43,141	4,319	47,459
1999/2000	40	39,600	3,882	43,482	13,538,175	1,018,235	14,556,410	40,319	3,884	44,203
1998/1999	41	39,513	2,919	42,432	12,681,197	1,006,715	13,687,912	39,405	3,760	43,165
1997/1998	40	36,415	3,624	40,039	12,544,579	803,889	13,348,468	35,957	2,999	38,956
1996/1997	38	31,613	3,118	34,731	11,202,447	724,765	11,927,212	32,230	2,737	34,967
1995/1996	38	31,289	2,730	34,019	10,732,934	583,434	11,316,368	31,645	2,199	33,844
1994/1995	36	27,548	2,303	29,851	8,940,914	542,519	9,483,433	26,786	1,958	28,744
1993/1994	37	25,589	1,647	27,236	8,401,110	290,430	8,691,540	25,377	1,124	26,501
1992/1993	37	24,963	2,509	27,472	8,301,017	473,512	8,774,529	25,711	1,738	27,449
1991/1992	37	23,420	2,982	26,402	7,638,207	615,210	8,253,417	24,301	2,305	26,606

* Number of aircraft includes two to be sold.

Aviation statistics FOR THE FINANCIAL YEAR ENDED 30 JUNE 2016

Central Operations aircraft register

Registration letters	Description	Year of manufacture	Date of acquisition	Name	Location (where applicable)	Sponsor (where applicable)
VH-FMP	Pilatus PC-12	1995	Sep-95		ASP	
VH-FMW	Pilatus PC-12	1995	Sep-95		ASP	
VH-FMZ	Pilatus PC-12	1996	Mar-96	Roy and Marjory Edwards	ASP	
VH-FDE	Pilatus PC-12	2000	Sep-00			Senex Energy
VH-FGR	Pilatus PC-12	2001	Dec-01			
VH-FGS	Pilatus PC-12	2001	Dec-01			
VH-FGT	Pilatus PC-12	2001	Dec-01			
VH-FDK	Pilatus PC-12	2002	Dec-03			
VH-FDJ	Pilatus PC-12	2007	Jan-08	Beth Steward Klugh		
VH-FVA	Pilatus PC-12	2009	Mar-10	Our Auxiliaries & Support Groups		Variety – The Childrens's Charity
VH-FVB	Pilatus PC-12	2010	Apr-10			BHP Billiton
VH-FVD	Pilatus PC-12	2010	Jul-10	Our Inaugural Doctors		Li-Ka Shing Foundation
VH-FVE	Pilatus PC-12	2010	Sep-10	Our Pioneering Women		
VH-FVF	Pilatus PC-12	2010	Oct-10	Barry Lodge OAM		Oz Minerals
VH-FXJ	Pilatus PC-12	2015	Nov-15			
TOTAL AIRCRAFT 15						

Queensland Section aircraft register

Registration letters	Description	Year of manufacture	Date of acquisition	Name	Location (where applicable)	Sponsor (where applicable)
VH-FDD	Beechcraft Super King Air B200SE	2000	Apr-00		Cairns	
VH-NQF	Beechcraft Super King Air B200SE	1999	Apr-00		Cairns	
VH-NQH	Pilatus PC-12	2001	Nov-01		Charleville	
VH-NQB	Pilatus PC-12	2001	Nov-01		Mount Isa	
VH-FDP	Pilatus PC-12	2001	Nov-01		Charleville	
VH-FDR	Beechcraft King Air B200	2004	Dec-04		Rockhampton	
VH-FDW	Beechcraft King Air B200	2004	Dec-04		Rockhampton	
VH-FDZ	Beechcraft King Air B200	2004	Dec-04		Roma	
VH-FDB	Beechcraft King Air B200	2007	May-07		Townsville	
VH-FDA	Beechcraft King Air B200	2007	Aug-07		Bundaberg	
VH-FDT	Beechcraft King Air B200	2007	Oct-07		Brisbane	
VH-FDG	Beechcraft King Air B200	2009	Jul-09		Mount Isa	
VH-NQC	Cessna C208	2009	Oct-09		Cairns	
VH-NQD	Cessna C208	2009	Oct-09		Cairns	
VH-FDS	Beechcraft King Air B200C	2010	Sep-10		Townsville	
VH-FDI	Beechcraft King Air B200C	2010	Nov-10		Rockhampton	
VH-FDM	Beechcraft King Air B200C	2010	Nov-10		Brisbane	
VH-FDL	Beechcraft King Air B200C	2014	Jan-14		Cairns	
VH-FDO	Beechcraft King Air B200C	2014	Jan-14		Mount Isa	
VH-FDF	Beechcraft King Air B350	2015	Oct-16		new, to be assigned	
VH-FDN	Beechcraft King Air B350	2015	Aug-16		new, to be assigned	
TOTAL AIRCRAFT 21						

Aviation statistics FOR THE FINANCIAL YEAR ENDED 30 JUNE 2016

South Eastern Section aircraft register

Registration letters	Description	Year of manufacture	Date of acquisition	Name	Location (where applicable)	Sponsor (where applicable)
VH-MVY*	Beechcraft King Air B200	1989	Sep-98	Flying Doctor Society	Bankstown	
VH-MVL*	Beechcraft King Air B200	1989	Oct-97	Outback Car Trek	Dubbo	
VH-MVS	Beechcraft King Air B200	2002	Jun-03		Essendon	
VH-MVP	Beechcraft King Air B200	2002	Sep-03		Essendon	
VH-MSH	Beechcraft King Air B200	2001	Sep-03	Broken Hill Women's Auxiliary	Launceston	
VH-MWV	Beechcraft King Air B200	2003	Dec-03	Kaye Melmeth	Dubbo	
VH-MVJ	Beechcraft King Air B200	2003	Jul-04	Lady Nancy	Broken Hill	
VH-MVW	Beechcraft King Air B200	2007	May-07	RFDS Friends	Broken Hill	
VH-MWK	Beechcraft King Air B200C	2008	Dec-08		Dubbo	
VH-MVX	Beechcraft King Air B200C	2008	Dec-08	Friends of the RFDS UK	Dubbo	
VH-MWH	Beechcraft King Air B200	2008	Dec-08	Shanny	Broken Hill	
VH-NAJ	Beechcraft King Air B300C	2011	Mar-12		Mascot	
VH-NAO	Beechcraft King Air B300C	2011	Apr-12		Mascot	
VH-AMQ	Beechcraft King Air B200C	2011	Sep-12		Mascot	
VH-AMR	Beechcraft King Air B200C	2011	Jun-12		Mascot	
VH-AMS	Beechcraft King Air B200C	2011	Aug-12		Mascot	
VH-LTQ	Beechcraft King Air B200C	2013	May-13		Launceston	
VH-MSZ	Beechcraft King Air B200C	2014	Jan-00		Dubbo	
* Two aircraft sold/disposed			TOTAL AIRCRAFT 18			

Western Operations aircraft register

Registration letters	Description	Year of manufacture	Date of acquisition	Name	Location (where applicable)	Sponsor (where applicable)
VH-VWO*	Pilatus PC-12	2002	Dec-01			BHP Billiton
VH-ZWO*	Pilatus PC-12	2004	Feb-04			
VH-YWO	Pilatus PC-12	2006	Sep-06			
VH-OWA	Pilatus PC-12	2009	Jun-09			
VH-OWP	Pilatus PC-12	2008	Aug-08			
VH-OWQ	Pilatus PC-12	2008	Nov-08			
VH-OWR	Pilatus PC-12	2008	Jan-09			
VH-OWB	Pilatus PC-12	2009	Dec-09			
VH-OWD	Pilatus PC-12	2009	Jan-10			
VH-OWG	Pilatus PC-12	2009	Mar-10			
VH-OWI	Pilatus PC-12	2010	Dec-10			
VH-RIO	Hawker 800XP	2002	Oct-09		Perth Airport	Rio Tinto
VH-OWS	Pilatus PC-12	2013	Dec-13			BHP Billiton
VH-OWJ	Pilatus PC-12	2013	Nov-13			BHP Billiton
VH-OWX	Pilatus PC-12	2013	Mar-14			BHP Billiton
VH-OWU	Pilatus PC-12	2013	Mar-14			BHP Billiton
VH-OWV	Pilatus PC-12	2015	Jun-15			
* Two aircraft sold/disposed			TOTAL AIRCRAFT 17			

TOTAL AIRCRAFT – ALL SECTIONS 71

TOTAL AIRCRAFT ADJUSTED FOR DISPOSALS 67

Health statistics FOR THE FINANCIAL YEAR ENDED 30 JUNE 2016

Telehealth and patients attended

		TELEHEALTH				PATIENTS ATTENDED							
Base and location		Radio	Telephone	Other	TOTAL	General practice clinics	Nursing clinics	RFDS other clinics	RFDS facilitated clinics	RFDS medical services	Inpatients	Dental clinics	TOTAL
Central Operations	Port Augusta	-	3,499	-	3,499	2,331	1,529	3,048	-	-	-	-	6,908
	Marree	-	692	-	692	-	-	3,102	-	-	-	-	3,102
	Adelaide	-	-	-	-	-	-	-	-	-	-	143	143
	Alice Springs	-	-	-	-	-	-	6,661	15,905	-	-	-	22,566
	Marla	-	121	-	121	-	-	-	-	-	-	-	-
	Andamooka	-	219	-	219	-	-	-	-	-	-	-	-
TOTAL		-	4,531	-	4,531	2,331	1,529	12,811	15,905	-	-	143	34,488
Queensland Section	Brisbane	-	22	-	22	-	-	-	-	-	-	-	-
	Bundaberg	-	27	-	27	-	-	-	-	-	-	-	-
	Cairns	-	8,532	1	8,533	10,864	9,989	6,321	-	-	-	-	27,174
	Charleville	-	1,092	19	1,111	2,763	1,892	-	196	5,783	-	-	10,634
	Longreach	-	67	-	67	-	-	2,042	-	-	-	-	2,042
	Mount Isa	-	4,754	24	4,778	3,868	1,644	-	-	-	-	-	5,512
	Rockhampton	-	33	-	33	-	-	-	-	-	-	-	-
	Townsville	-	260	1	261	-	-	-	-	-	-	2,157	2,157
TOTAL		-	14,787	45	14,832	17,495	13,525	8,363	196	5,783	-	2,157	47,519
South Eastern Section	Broken Hill	-	5,665	-	5,665	7,135	666	2,603	-	105	-	2,828	13,337
	Dubbo	-	-	-	-	-	-	-	-	-	-	1,497	1,497
	Cooper Basin	-	-	-	-	-	-	3,788	-	-	-	-	3,788
	Bankstown	-	-	-	-	-	-	-	11,962	-	-	-	11,962
	NSW	-	-	-	-	-	-	-	-	-	-	-	-
	Tasmania (refer below)	-	-	-	-	-	-	-	-	-	-	-	-
TOTAL		-	5,665	-	5,665	7,135	666	6,391	11,962	105	-	4,325	30,584
Western Operations	Broome	-	1,602	-	1,602	-	-	-	-	-	-	-	-
	Derby	-	9,153	-	9,153	598	1,568	-	6,924	-	-	-	9,090
	Jandakot	-	13,071	-	13,071	2,701	-	-	1,414	-	-	1,180	5,295
	Kalgoorlie	-	5,848	-	5,848	509	-	-	-	-	-	-	509
	Meekatharra	-	4,667	-	4,667	1,005	-	-	7	-	-	-	1,012
	Port Hedland	-	3,343	-	3,343	1,271	-	-	836	-	-	-	2,107
TOTAL		-	37,684	-	37,684	6,084	1,568	-	9,181	-	-	1,180	18,013

Continued next page

Telehealth and patients attended continued

		TELEHEALTH				PATIENTS ATTENDED							
Base and location		Radio	Telephone	Other	TOTAL	General practice clinics	Nursing clinics	RFDS other clinics	RFDS facilitated clinics	RFDS medical services	Inpatients	Dental clinics	TOTAL
Victoria Section	Corryong	-	-	-	-	-	-	303	-	-	-	-	303
	Robinvale	-	-	81	81	-	-	149	-	-	-	-	149
	Rainbow	-	-	-	-	-	-	161	-	-	-	-	161
	Goroke	-	-	-	-	-	-	54	-	-	-	-	54
	Hopetoun	-	-	-	-	-	-	166	-	-	-	-	166
	Charlton	-	-	-	-	-	-	135	-	-	-	-	135
	Ouyen	-	-	-	-	-	-	108	-	-	-	-	108
	Murrayville	-	-	-	-	-	-	32	-	-	-	-	32
	Underbool	-	-	-	-	-	-	23	-	-	-	-	23
	Sea Lake	-	-	-	-	-	-	24	-	-	-	-	24
	Natimuk	-	-	-	-	-	-	15	-	-	-	-	15
	Kaniva	-	-	-	-	-	-	39	-	-	-	-	39
	Jeparit	-	-	-	-	-	-	68	-	-	-	-	68
	Ensay	-	-	-	-	-	-	22	-	-	-	-	22
	Cann Valley	-	-	-	-	-	-	63	-	-	-	-	63
	Dargo	-	-	-	-	-	-	60	-	-	-	-	60
	Gelantipy	-	-	-	-	-	-	58	-	-	-	-	58
	Kerang	-	-	20	20	-	-	-	-	-	-	-	-
	Balranald	-	-	7	7	-	-	-	-	-	-	-	-
	Nhill	-	-	10	10	-	-	-	-	-	-	-	-
	Mildura	-	-	201	201	-	-	-	-	-	-	-	-
	East Wimmera	-	-	-	-	-	-	-	-	-	-	478	478
	West Wimmera	-	-	-	-	-	-	-	-	-	-	158	158
	Northern District	-	-	-	-	-	-	-	-	-	-	73	73
	Alpine	-	-	-	-	-	-	-	-	-	-	462	462
	Mallee	-	-	-	-	-	-	-	-	-	-	348	348
	Avoca	-	-	-	-	-	-	-	-	-	-	64	64
	Dunolly	-	-	-	-	-	-	-	-	-	-	65	65
	TOTAL	-	-	-	-	-	-	-	-	-	-	1,170	1,170
TOTAL ALL SECTIONS		-	62,667	45	62,712	33,045	17,288	27,565	37,244	5,888	-	8,975	130,005
Previous years	2014/2015	4	92,238	534	92,776	32,668	14,965	53,642	22,802	634	518	9,496	134,725
	2013/2014	8	82,051	297	82,305	35,931	16,002	36,510	42,035	3,229	1,302	9,861	145,304
	2012/2013	16	89,204	296	89,516	38,587	24,946	30,420	44,787	5,761	2,575	6,913	153,989
	2011/2012	77	88,117	336	88,530	37,436	-	56,885	40,925	7,102	2,148	-	107,060
	2010/2011	14	92,608	460	93,082	37,765	-	49,075	49,293	6,592	1,978	-	106,938

Health statistics FOR THE FINANCIAL YEAR ENDED 30 JUNE 2016

Clinics conducted and patients transported

		NUMBER OF CLINICS CONDUCTED						NUMBER OF PATIENTS TRANSPORTED					
Base and location		General practice clinics	Nursing clinics	RFDS other clinics	RFDS facilitated clinics	Dental clinics	TOTAL	Primary evacuations	Inter-hospital transfers	Patients transported from a clinic	Repatriations	TOTAL	TOTAL immunisations
Central Operations	Port Augusta	261	242	539	-	-	1,042	69	1,837	44	16	1,966	614
	Marree	-	490	53	-	-	543	-	-	-	-	-	28
	Adelaide	-	-	-	-	-	-	24	4,144	-	46	4,214	-
	Alice Springs	-	-	-	1,315	-	1,315	1,625	1,009	-	22	2,656	-
	Marla	130	-	-	-	-	130	-	-	44	-	44	-
	Andamooka	130	-	-	-	-	130	-	-	16	-	16	-
TOTAL		521	732	592	1,315	-	3,160	1,718	6,990	104	84	8,896	642
Queensland Section	Brisbane	-	-	-	-	-	-	2	2,196	-	12	2,210	-
	Bundaberg	-	-	-	-	-	-	-	1,927	-	12	1,939	-
	Cairns	1,105	1,459	734	-	-	3,298	480	552	1	4	1,037	2,220
	Charleville	239	272	-	27	-	538	58	362	14	2	436	1,285
	Longreach	-	-	472	-	-	472	-	-	-	-	-	-
	Mount Isa	302	200	-	-	-	502	375	448	16	-	839	544
	Rockhampton	-	-	-	-	-	-	9	2,517	-	20	2,546	-
	Townsville	-	-	-	-	143	143	36	1,935	2	7	1,980	-
TOTAL		1,646	1,931	1,206	27	143	4,953	960	9,937	33	57	10,987	4,049
South Eastern Section	Broken Hill	629	138	634	-	355	1,756	115	593	-	-	708	180
	Dubbo	-	-	-	-	280	280	10	871	-	-	881	-
	Cooper Basin	-	-	1,279	-	-	1,279	-	-	-	-	-	-
	Bankstown	-	-	-	867	-	867	-	-	-	-	-	-
	Launceston (refer Tas.)	-	-	-	-	-	-	-	1,105	-	-	1,105	-
	Essendon (refer Vic.)	-	-	-	-	-	-	-	346	-	-	346	-
	Mascot	-	-	-	-	-	-	-	5,017	-	-	5,017	-
TOTAL		629	138	1,913	867	635	4,182	125	7,932	-	-	8,057	180
Western Operations	Broome	-	-	-	-	-	-	91	197	-	2	290	-
	Derby	40	73	-	849	-	962	362	716	283	148	1,509	-
	Jandakot	184	-	-	158	186	528	249	3,397	-	49	3,695	-
	Kalgoorlie	77	-	-	-	-	77	291	909	1	26	1,227	-
	Meekatharra	86	-	-	3	-	89	236	630	-	2	868	-
	Port Hedland	146	-	-	95	-	241	234	992	9	12	1,247	-
	Perth Airport	-	-	-	-	-	-	2	153	-	26	181	-
TOTAL		533	73	-	1,105	186	1,897	1,465	6,994	293	265	9,017	-
Victoria Section	Victoria Road Transport	-	-	-	-	-	-	-	53,159	-	-	53,159	-
	Essendon – Air Transport	-	-	-	-	-	-	-	355	-	-	355	-
	Victorian Clinics	-	66	81	-	93	240	-	-	-	-	-	-
TOTAL		-	66	81	-	93	240	-	53,514	-	-	53,514	-
TOTAL ALL SECTIONS		3,329	2,940	3,792	3,314	1,057	14,432	4,268	85,367	430	406	90,471	4,871
Previous years	2014/2015	3,087	2,771	5,351	2,116	1,086	15,232	4,336	59,596	332	409	64,673	5,147
	2013/2014	3,357	2,640	4,896	4,095	1,108	16,096	4,986	48,977	299	443	54,705	6,218
	2012/2013	3,540	3,138	4,235	4,076	830	15,819	4,920	46,005	342	384	51,651	7,128
	2011/2012	3,565	-	6,943	3,904	-	14,412	4,964	31,872	368	424	40,705	6,312
	2010/2011	3,609	-	6,680	3,647	-	13,936	4,620	34,815	418	469	40,322	5,908

Employment statistics FOR THE FINANCIAL YEAR ENDED 30 JUNE 2016

Staff employed (headcount) as at 30 June 2016

* Includes casual staff

	Central Operations		Queensland Section		South Eastern Section		Western Operations		Victorian Section		Tasmanian Section		Federation Office		Total	
	F/T	*P/T	F/T	*P/T	F/T	*P/T	F/T	*P/T	F/T	*P/T			F/T	*P/T	F/T	*P/T
Administration	26	8	80	16	35	7	33	15	16	6	1	1	7	2	198	55
Allied health	-	-	1	-	-	-	-	-	-	-			-	-	1	-
Ambulance transport attendants	-	-	-	-	-	-	-	-	-	-			-	-	-	-
Dental	-	-	-	-	4	3	-	7	-	3			-	-	4	13
Engineers/Engineering support	19	1	7	-	38	5	19	-	-	-			-	-	83	6
General hands	-	1	-	-	-	-	-	-	-	-			-	-	-	1
Health promotion	-	2	1	1	-	-	-	-	5	4			-	-	6	7
Indigenous health workers/Liaison staff	1	1	15	4	-	-	-	-	-	-			-	-	16	5
Medical practitioners	5	1	17	22	8	2	21	26	-	1			-	-	51	52
Medical specialist	-	-	1	-	-	-	1	12	-	-			-	-	2	12
Mental health/Drug and alcohol	2	2	21	4	5		-	-	-	-			-	-	28	6
Operational coordinators	2	-	-	-	-	-	14	2	-	-			-	-	16	2
Patient transport officers	-	-	-	-	-	17	-	-	20	87			-	-	20	104
Pilots	33	-	62	1	54	1	47	2	24	107			-	-	220	111
Public relations/Fundraising	6	1	9	4	13	7	6	5	-	-		2	-	-	34	19
Radio staff/Tasking coordinators	9	4	3	-	2	1	-	-	8	3			-	-	22	8
Registered nurses	37	17	57	14	29	18	26	31	-	6			-	-	149	86
Tourist facilities/Merchandising/Other	4	10	-	-	1	5	1	-	-	-			-	-	6	15
Total staff headcount*	144	48	274	66	189	66	168	100	73	217	1	3	7	2	856	502
Grand Total 1,358																

FTE – staff employed as at 30 June 2016

These figures include full-time, fixed-term contract and casual employees

	Central Operations	Queensland Section	South Eastern Section	Western Operations	Victorian Section	Tasmanian Section	Federation Office	Total
Administration	30.40	91.69	36.67	42.20	20.67	1.75	8.60	231.98
Allied health	-	1.00	-	-	-		-	1.00
Ambulance transport attendants	-	-	-	-	-		-	-
Dental	-	-	5.71	2.60	2.00		-	10.31
Engineers/Engineering support	19.80	7.00	43.08	19.00	-		-	88.88
General hands	0.60	-	-	-	-		-	0.60
Health promotion	1.30	1.60	-	-	8.60		-	11.50
Indigenous health workers/Liaison staff	1.70	17.25	-	-	-		-	18.95
Medical practitioners	5.50	28.97	9.06	31.30	0.20		-	75.03
Medical specialist	-	1.00	-	6.40	-		-	7.40
Mental health/Drug and alcohol	2.40	23.50	5.00	-	-		-	30.90
Operational coordinators	2.00	-	-	15.00	-		-	17.00
Patient transport officers	-	-	-	-	55.50		-	55.50
Pilots	33.00	62.50	54.00	47.90	61.50		-	258.90
Public relations/Fundraising	6.80	11.90	13.00	8.80	-	0.88	-	41.38
Radio staff/Tasking coordinators	12.00	3.00	2.00	-	10.40		-	27.40
Registered nurses	45.10	64.81	29.00	44.90	-		-	183.81
Tourist facilities/Merchandising/Other	10.10	-	1.00	1.00	-		-	12.10
Total staff FTE #	170.70	314.22	198.52	219.10	158.87	2.63	8.60	1,072.64

Our supporters

Every year the Flying Doctor relies heavily on the support of the communities in which it works – from those who volunteer to drive ambulances, to the everyday Australians who donate to keep the Doctor flying.

We have a deep respect for these incredible people and thank them sincerely for their ongoing support. Here's a small sample from the last year:

OUTBACK CAR TREK

In June 2016 almost one hundred pre-1978 cars left Narrabri in northern New South Wales and drove to Port Douglas in Far North Queensland as part of the now infamous Outback Car Trek. This annual event for older model 2WD cars, travels a different route each year and donates the funds it raises to the Flying Doctor.

The 2016 event raised in excess of \$1.3 million and we wholly thank organiser Bill Patrick and his team for their ongoing support and efforts that keep the Flying Doctor flying.

HACKETT FOUNDATION

The Hackett Foundation, founded by South Australian entrepreneur Mr Simon Hackett, recently made a donation of \$600,000 to medically equip a new Pilatus PC-12 aircraft for the RFDS Central Operations fleet. Simon Hackett said the donation combines his love for aviation and his recent efforts to 'give back' to the South Australian community. The plane will travel throughout outback and regional South Australia providing vital emergency and primary health services.

PENGUIN RANDOM HOUSE

The RFDS is proud to be associated with a series of Flying Doctor adventure novels for children 8+ and written by well-known children's author George Ivanoff. Published by Penguin Random House, the series celebrates the work of the RFDS and the adventure stories include ghost towns, brutal landscapes, treacherous weather, and poisonous snakes.

A percentage of all book sales is donated to the Flying Doctor and the books are available through all regular book outlets as well as through the RFDS Doc Shop.



Left: Central Operations Chief Executive John Lynch and entrepreneur Simon Hackett.
Above: The Honourable Susan Close, South Australia's Education and Child Development Minister reading Royal Flying Doctor Service books.
Top: Outback Trek.

KEITH BALLANTYNE

Keith is a dedicated member of the RFDS Wide Bay and Burnett Auxiliary in Queensland. Keith's devotion and efforts to the RFDS donation tin program sees him coordinate coin collection tins in over 45 locations in and around the Bundaberg area. Keith drives 288km around the region picking up and dropping off tins so locals have a familiar spot to go to, to give whatever they can. He was awarded the Local Hero Award (Bundaberg Region) in 2016 for his ongoing work.

BOHDI WOCHNIK

Bohdi is a 14-year-old Queensland boy who has been raising funds for the Flying Doctor for five years by running raft races in his backyard dam. He has been inspired to do this as a result of the assistance the RFDS has provided to his family, including when: his sister was bitten by a snake; his granddad's finger was cut off; his uncle had a helicopter crash and more recently when his cousin fell off his horse and was unconscious.

So far Bohdi has raised \$1,991.55 for the RFDS and he recently received the Traeger Youth Award (Bundaberg Region) from RFDS Qld for his ongoing support of the Flying Doctor.

ROWE SCIENTIFIC

Since October 2005, Rowe Scientific have been sending a percentage of selected Rowe product annual sales to the Flying Doctor. This year it was \$28,232.

"Our team, as always, are proud to support the RFDS who are helping remote communities and many of our mining clients in Outback Australia," said CEO Peter Sommers.



Australian Government

FEDERAL GOVERNMENT

The Australian Government announced in June 2016 an increase of \$11 million in funding for the Royal Flying Doctor Service to continue providing its current suite of dental services, and to expand service provision to enable access for more remote and rural Australians in underserved areas over the next two years.

We say thank you for the support provided by our Commonwealth funder for our existing programs and this new dental service.

The Royal Flying Doctor Service is an Australian Government initiative.

Top: Parliament House, Canberra.
Top Right: Royal Flying Doctor Service staff with Prime Minister Malcolm Turnbull.
Middle Right: Federal Opposition Leader Bill Shorten.
Bottom Right: Fiona Nash at Stockmans Hall March 2016.



Corporate partners

Queensland Section

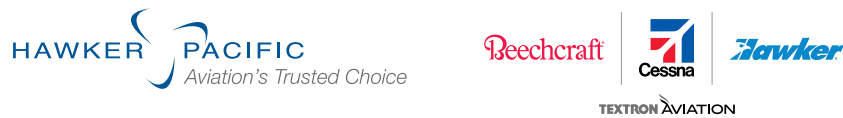
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South Eastern Section

Government Supporters



Corporate Supporters



Victorian Section

Corporate Partners



Health Partners



Tasmanian Section



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Central Operations

Major Partners



Community Partners



Supporting Partners



Program Partners



Media Partners



Western Operations

Altitude Partners



Major Partners



Community Partners



Altitude Ball Sponsors



Cooperate Supporters



Government Supporters





Left to right: Amanda Vanstone, Michael Reid, William Mellor DSC AM, Lyell Strambi, Denis Henry, Malcolm White, Loretta Reynolds and Richard Alder.

Federation Board of Directors

Amanda Vanstone – National Chair

Former Senator for South Australia (1984 – 2004); Ambassador to Italy (2007 – 2010). Director Port Adelaide Football Club; Director DrinkWise; Director Institute for International Trade; Director Vision 20/20

Michael Reid – Deputy Chair

Consultant, Michael Reid and Associates; Former Director General, Queensland Health (2008 – 2011); Former Director General, NSW Health (1997 – 2002)

William Mellor DSC AM – Chair of RFDS Queensland Section

BA (Qld), Grad Dip Strat Studies, Dip App Sc, GAICD

Finance and Audit Committee and Chair of the Remuneration and Appointments Committee. A 35-year career in Army Aviation; Principal of Due Vigilance Pty Ltd; Director of IPS Securex Pty Ltd; President of the Australian Army Aviation Association Inc.

Lyell Strambi – President RFDS South Eastern BBus

Member, Board Aviation Committee; Audit & Risk Committee. CEO Australia Pacific Airports Corporation, Director, Visit Victoria Board, Director Australian Pacific Airports Corporation (Melbourne) & (Launceston) Boards. Former Chief Executive Officer Qantas Domestic; Former Chief Operating Officer, Virgin Atlantic Airways; Former Executive General Manager, Ground Services, Ansett Australia Ltd; Fellow of the Australian Institute of Company Directors; Fellow of the Royal Aeronautical Society.

Denis Henry – Chair of RFDS Victoria Section

Grad. Dip. Acct, B Tech (Biotech), MCIPS, MAICD

Former Managing Director and Chairman of Grosvenor Management Consulting. Director of Dousta Galla Aged Services Ltd; Advisor to the Board of Leemark Fire Protection Group; non-executive director Contracts Online Pty Ltd and Contracts Online Ltd (NZ).

Malcolm White – President of RFDS Tasmanian Section Master of Business Administration, Air Transport Pilot License

Chair Governance and Nominations Committee, Member Risk and Finance Committee. Former Chief Executive Officer TAFE Tasmania; Non-Executive Director, TDA National Scholarships Foundation;

Loretta Reynolds – Deputy Chairman of RFDS Central Operations

BEc, LLB, SFFin, FAICD

Member 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.

Richard Alder – Director of RFDS Western Operations

Retired Financial Advisor, Member of the Risk and Audit Committee.

Queensland Section Board of Directors



Left to right: William Mellor DSC AM, Michael Burnett, Richard Conder APM, Peter Gartshore, Julia Leeds, Dr Desley Marshall OAM, Russell Postle, Emeritus Professor Robert Stable AM, Sally-Anne Witherspoon, Mark Gray and the Hon. Bruce Scott.

William Mellor DSC AM – Chairman
BA (Qld), Grad Dip Strat Studies, Dip App Sc, GAICD

Bill Mellor joined the Board in 2005 and is Chairman. Bill is also a member of the Finance and Audit Committee and Chair of the Remuneration and Appointments Committee. Bill retired from the military following a 35-year career in Army Aviation. He is the Principal of Due Vigilance Pty Ltd and a Director of IPS Securex Pty Ltd. He is also President of the Australian Army Aviation Association Inc.

Michael Burnett
BEcon, LLB, LLM, MBA, GAICD

Michael Burnett joined the Board in September 2010 and is a member of the Finance and Audit Committee and the Remuneration and Appointments Committee. Michael is a judicial officer with the Federal Circuit Court of Australia. He was admitted as a solicitor in 1982 before commencing practice as a barrister in 1984. He holds the office of Deputy Judge Advocate General – Air Force for the Australian Defence Force.

Richard (Dick) Conder APM
Grad Cert. Legal and Justice, FAIM, GAICD

Dick Conder joined the Board in 2008 and is Chairman of the Risk and Compliance Committee. Dick was formerly Deputy Commissioner and Deputy Chief Executive (Operations) of Queensland Police Service. He retired in 2007 after 40 years service.

Peter Gartshore
BCom (Qld)

Peter Gartshore joined the Board in October 2008 and is a member of the Finance and Audit and the Remuneration and Appointments Committees. Peter is a company director with 37 years of experience in private enterprise, including co-founding IDEC (Ideas, Design, Engineering and Construction).

Julia Leeds (Dr Julia Fielding)
MBBS (Qld) GAICD

Julia Leeds joined the Board in 2003 and was Chair from 2009 to 2011. She is a member of the Health and Advisory and the Risk and Compliance Committees. Julia worked for many years as a medical practitioner at the Charleville Hospital, the RFDS Charleville Base, in general practice and at the Aboriginal Health Service. She is a director of the Darling Downs South West Queensland Medicare Local and Chair of the South West Hospital and Health Services.

Dr Desley Marshall OAM
MBBS, FRACGP, FACRRM, GAICD

Desley Marshall joined the Board in July 2009 and is Chair of the Health Advisory Committee and a member of the Risk and Compliance Committee. In June 2011 she retired from general practice in St George where she practiced continually since 1979. She has been working in rural medical education and as a locum GP since. Desley is a member of the Rural Doctors Association of Queensland and the Care and Clinical Governance subcommittee of the Darling Downs and South West Medicare local.

Russell Postle
CA, FTIA, MAICD

Russell Postle served on the Board from 1987 to 1990. He was re-appointed in 1994 and is Chairman of the Finance and Audit Committee. Russell has over 30 years' experience in the accounting profession. Russell is part of the specialist group within BDO focused on the challenges and opportunities facing the not-for-profit sector.

Emeritus Professor Robert Stable AM
MBBS (Qld), MHP (NSW), DUniv (QUT), FRACGP, FAICD

Professor Stable joined the Board in November 2012 and is a member of the Health and Advisory Committee. Professor Stable's former roles include Vice-Chancellor and President of Bond University, Director-General of Queensland Health, Chair of the

Australian Health Ministers' Advisory Council, Hospital Chief Executive and Medical Superintendent, General Practitioner and Flying Doctor. He is a Fellow of the Royal Australian College of General Practitioners and the Australian Institute of Company Directors. He was made a Member of the Order of Australia in 2013.

Sally-Anne Witherspoon

Sally-Anne Witherspoon joined the Board in March 2010 and is a member of the Risk and Compliance and Remuneration and Appointments Committees. Sally-Anne and her husband are self-employed graziers operating properties in the Weipa, Richmond and Charters Towers districts. Sally-Anne has 30 years experience living and working in Cape York.

Mark Gray
BEcon (Hons), SF Fin, FAIM, GAICD

Mark Gray joined the Board in 2000 and was Chairman from 2011 to 2013. He left in March 2014 and re-joined in August 2015. Mark has held Chief Executive Officer roles with Queensland Treasury, the Queensland Competition Authority and the Queensland Independent Commission of Audit. He also held senior positions with Macquarie Group and BDO. Mark is an Adjunct Professor of Economics at the University of Queensland and was awarded a Prime Minister's Centenary Medal in 2003.

The Hon. Bruce Scott

The Hon. Bruce Scott joined the Board as a Casual Director in June 2016 and has had an extensive parliamentary career. Bruce was elected to the House of Representatives as the Federal Member for Maranoa in 1990, 1993, 1996, 1998, 2001, 2004, 2007, 2010 and 2013. During this time Bruce was the Shadow Minister for Local Government, Assistant Shadow Minister for Rural Matters, Assistant Shadow Minister for Primary Industry, Shadow Minister for Rural and Regional Development, Minister for Veteran's Affairs and Minister for Defence Personnel. Bruce was the Deputy Speaker of the House of Representatives from 2012 to 2016 and served on several Parliamentary Committees.

South Eastern Section Board of Directors



Left to right: Lyell Strambi, Ruth Sandow, Anthony MacRae, Terry Clark, Elizabeth Johnstone, Professor David Lyle, John Milhinch OAM, Professor Bruce Robinson, Sanchia Treloar and Joan Trewееke OAM.

Lyell Strambi – President BBus

Member, Board Aviation Committee; Audit & Risk Committee and RFDS Federation Board. CEO Australia Pacific Airports Corporation; Director, Visit Victoria Board, Director Australian Pacific Airports Corporation (Melbourne) & (Launceston) Boards. Former Chief Executive Officer Qantas Domestic; Former Chief Operating Officer, Virgin Atlantic Airways; Former Executive General Manager, Ground Services, Ansett Australia Ltd; Fellow of the Australian Institute of Company Directors; Fellow of the Royal Aeronautical Society.

Elaine (Ruth) Sandow – Vice President

Member, Regional Advisory Committee. Former registered nurse; resident grazier in the SE Section Network area; Founding Member and Chairperson of the Milparinka Heritage and Tourism Association Inc.

Anthony MacRae – Treasurer

Member, Audit & Risk Committee and Board Aviation Committee. General Manager Third Party Distribution at Westpac Banking Corporation. Former State General Manager, Commercial Banking NSW at Westpac Banking Corporation; Former Acting CEO, General Manager 3rd Party Distribution; Head of Broker Business and Head of Operations and IT at RAMS Financial Group Pty Ltd; Former Head of Sales at PMI Mortgage Insurance Ltd; Former Operations & Direct Sales Director at Virgin Money; Former Business Consultant/Project Director at AXA/Ipac.

Terry Clark

Chairman, Regional Advisory Committee. Resident of the SE Section Network area; President, RFDS Dubbo Support Group since 2003; Past Director Dubbo Tourism Association; Former member Dubbo Tourism Advisory Committee.

Elizabeth Johnstone LLB MA (Hons) BA (Hons) FAICD

Chairman, Audit & Risk Management Committee. Former Partner and Practice Head (Company Law and Governance) Blake Dawson now Ashurst; Current Senior Consultant DLA Piper; Current directorships: Chairman KinCare; Director, ASX Compliance Board, Macquarie University Hospital; Fellow, Australian Institute of Company Directors; Prior BPW/Qantas Business Woman of the Year. Former directorships: Auditing and Assurance Standards Board, Australian Press Council, Institute of Compliance and Sydney Writers' Festival.

Professor David Lyle MB BS PhD FAFPHM

Member, Medical & Health Services Advisory Committee. Professor and Head of the Broken Hill University Department of Rural Health (BH UDRH), University of Sydney. David is a public health physician who worked as a medical epidemiologist with the NSW Health Department before moving to Broken Hill in 1995 to set up the BH UDRH. He has a strong research and health service development background.

John Milhinch OAM Director (casual vacancy 5/11/15)

Member, Audit & Risk Management Committee; Trustee of the Royal Flying Doctor Service Friends in the United Kingdom. Chairman, RFDS National Superannuation Fund; Former Director, Europcar Asia Pacific. Formerly General Manager Strategic Investments and Investor Relations, Accor Asia Pacific.

Professor Bruce Robinson MD MSc FRACP (resigned 29/10/2015)

Chairman, Medical & Health Services Advisory Committee. Dean, Sydney Medical School; Head, Cancer Genetics Laboratory, Kolling Institute; Chairman, Hoc Mai, the Australian Vietnam Medical Foundation; Fellow of the Australian Institute of Company Director.

Sanchia Treloar (appointed 27/10/15)

Member, RFDS Regional Advisory Committee, RFDS Broken Hill Woman's Auxiliary, Broken Hill School of the Air P&C, Cockburn Progress Association and ICPA North East SA & Broken Hill Branches. Resident grazier in the SE Section Network area.

Joan Trewееke OAM LLB

Member, Medical & Health Services Advisory Committee and Regional Advisory Committee. Former President RFDS SE Section, resident SE Section Network area; Board Member Western NSW Local Health District, Former Board Member Far West Medicare Local, Director Royal Far West, Member National Parks and Wildlife Service Northern Plains Regional Advisory Committee; President The Ridge Community Resource Centre Inc. Director, Contact Inc.

Victorian Section Board of Directors



Left to right: Denis Henry, Rasa Betrand, Murray Rogers, Robyn Lardner, Bernie Delaney, Damien Bruce, Peter Berry.

Denis Henry – Chairman

Grad. Dip. Acct, B Tech (Biotech), MCIPS, MAICD

Former Managing Director and Chairman of Grosvenor Management Consulting. Director of Doutta Galla Aged Services Ltd; Advisor to the Board of Leemark Fire Protection Group; non-executive director Contracts Online Pty Ltd and Contracts Online Ltd (NZ). Denis is currently serving his first term as Chair.

Rasa Betrand – Deputy Chair

Dip. Of Nursing, Grad Dip. Midwife, Dip. Writing and Editing

Trained Nurse, current student at Monash University, published author, former broadcaster and cofounder of a support group for businesswomen in fire ravaged Marysville. Rasa is serving her sixth term as Deputy Chair of RFDS Victoria.

Murray Rogers

FAICD, FAIM

Resigned 25 November 2015.

Murray held positions of Executive Chairman, Kellogg (Aust) Pty Ltd; Chairman, Australian Food Council; Chief Executive Officer, AWB Ltd; Chairman, Single Vision Grains Australia and Chairman, Australian Grain Technologies. Fellow of the AICD, the AIM, Murray is currently Chairman, McLachlan Consolidated Fishermen Ltd.

Robyn Lardner

BHSc (mgt) (NSW), MHA (NSW), GAICD

Robyn has a nursing background including midwifery, neonatal intensive care and a Masters of Health Administration. She worked as the Administrator/Director of Nursing for an acute, aged care and community health facility as well as Manager Corporate Support for GWM Water. Business involvements include pharmacy and a natural health practice.

Bernie Delaney

BA, Grad Dip Mgt, FAICD

With a background in the manufacturing, mining and oil and gas exploration and production sectors, Bernie is a specialist in business development, public policy, mergers and acquisitions, and trade and foreign investment facilitation. Bernie is a Fellow of the Australian Institute of Company Directors, and a Director of DF Strategy & Advisory Pty Ltd. Bernie is currently Chair of RSPCA Victoria, a Director of RSPCA Australia and Chair of the RSPCA Australia's Governance Committee. He is currently Chair of RFDS Victoria's Finance Audit and Risk Committee.

Damien Bruce

MBA, BComm/LLB (Hons)

Damien is a Partner in McKinsey & Company's Australian office, and is a Leader of McKinsey's Australian Healthcare Practice. He has served healthcare entities, both public and private, in the UK, USA and Australia. In Australia, his public sector experience includes advising the Federal Government on the topics of eHealth and integrated care, and State Governments on hospital productivity and health IT. He has also advised private sector clients in the health insurance and pharmaceutical sectors.

Peter Berry

Dip. Law

Resigned 25 November 2015.

Peter was principal of Berry Family Law. President of RFDS Victoria in 2001–2002 (re-elected to the Board in 2013); former Board member of RFDS Western Operations; Guest lecturer Leo Cussen Institute; Member of Steering Committee of the Victorian Family Law Pathways Network.

Tasmanian Section Board of Directors



Left to right: Malcolm White, Dr George Merridew, Sarah Merridew, Robert Grey, Caroline Wells, Tim Maddock, Jan Davis, Elizabeth Daly OAM and Dr Tim Mooney.

Malcolm White – President

Elected 2005. Chair Governance and Nominations Committee. Member Risk and Finance Committee. Director, Royal Flying Doctor Service Australia. Former CEO TAFE Tasmania. Master of Business Administration. Air Transport Pilot Licence.

Dr George Merridew – Vice President

Elected 1995. Member Governance and Nominations Committee. Fellow, ANZ College of Anaesthetists. RAAF Reserve (Ret).

Sarah Merridew – Treasurer

Elected 2006. Chair Risk and Finance Committee. Member Investment Committee. Non Executive Director of MyState Limited and TasRail. Chartered Accountant, Fellow of the Australian Institute of Company Directors. Former Partner of Deloitte Touche Tohmatsu.

Robert Grey

Elected 1999. Retired RAAF Officer. Master of Defence Studies. Company Director. Justice of the Peace. Commercial Pilot Licence.

Caroline Wells

Elected 2009. Member Governance and Nominations Committee. Chief Executive Officer, Diabetes Tasmania. Master of Business Administration. Graduate of the Australian Institute of Company Directors. Former Director of Nursing Hobart Private Hospital.

Tim Maddock

Elected 2012. Chair Investment Committee. Member Risk and Finance Committee. Partner Deloitte Touche Tohmatsu. Fellow, Chartered Accountants Australia and New Zealand. Chartered Tax Advisor, The Tax Institute. Former President and Treasurer of Relationships Australia Tasmania. Member of The Royal Yacht Club of Tasmania's Finance Committee.

Jan Davis

Elected 2013. Member Governance and Nominations Committee. Executive Officer, Launceston Chamber of Commerce. Agribusiness consultant. Non Executive Director Landcare Australia Ltd and FermenTasmania Ltd. Masters in Agribusiness and Environmental Planning. Bachelors Degree in Economics. Graduate Diplomas in Education and Environmental Studies. Graduate of the Australian Institute of Company Directors.

Elizabeth Daly OAM

Elected 2015. B.Ed. University of Tasmania. M.Ed. University of Tasmania. Fellow University of Tasmania. Manager, Colony 47, Northern Tasmania. Chair, Tasmanian Early Years Foundation. Retired Principal, Superintendent, Director of Education. Former Member University Tasmanian Council. Former Commissioner for Children.

Dr Tim Mooney

Elected 2015. Rural General Medical Practitioner. Member, Royal Australian College of General Practitioners (RACGP). Tas representative, RACGP National Rural Faculty. Board Member, RACGP Rural Education Committee, Board of Censors and Board of Assessment. Active within Rural Doctors Association of Tasmania and Australian Medical Association, Tas Branch. RACGP 2013 General Practice Supervisor of the Year.

Central Operations Section Board of Directors



Left to right: David Hills, Loretta Reynolds, Paul Prestwich, Janet Chisholm, Dr Tim Cooper AM, Glenise Coulthard, Brendan Eblen, Dr Ian Gould AM and Hon Graham Gunn AM.

David Hills – Chairman FAICD

Commenced on Board – 2005. Attended 9/10 meetings. Chairman 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.

Loretta Reynolds – Deputy Chairman BEc, LLB, SFFin, FAICD

Commenced on Board – 2011. Attended 8/10 meetings. Member 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 National Board.

Paul Prestwich – Treasurer BEc, MBA, FCPA, FAICS, FGIA, FAICD, RegTA

Commenced on Board – 1995. Attended 9/10 meetings. Member Executive Committee; Chairman Board SQR Management Committee; Chairman Finance Committee, Member Board Aviation Resource 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 BCom, MAICD

Commenced on Board – 1996. Attended 9/10 meetings. Member Executive Committee; Chairman Marketing Advisory Committee. Pastoralist at Napperby Station, via Alice Springs with broad Board

experience including 19 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 9/10 meetings. Member Finance Committee. Managing Director of Coopers Brewery Ltd. Chairman Premium Beverages Pty Ltd; Morgan's Brewing Pty Ltd; University of Adelaide Alumni Council; Brewers Association of Australia and New Zealand. Governor Coopers Brewery Foundation Inc.

Glenise Coulthard Commenced on Board – 1995

Attended 6/10 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 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 including 20 years' service to the RFDS.

Brendan Eblen MAICD

Commenced on Board – 1995. Attended 7/10 meetings*. Member Board SQR Management Committee; Member Marketing Advisory Committee. Owner and operator of outback tour company Wedgetails Tours and Charter. Expedition leader, guide and caterer during the 2014 and 2015 winters travelling the challenging and remote 'Canning Stock Route' (CSR) which traverses 3 deserts in WA for 1800 kilometres. 16 circuits of the CSR were completed successfully for Outback Spirit. The CSR 2016 season is in progress. Managing proprietor of B.M Eblen & Co, multi-award winning painting and decorating business. Over 35 years' service to the

RFDS and outback communities. Past Chairman RFDS Port Augusta Regional Committee (1979–1985); Past Chairman (1981–1985) and Life Member William Creek Gymkhana Club.

*Leave of absence from July to September 2015 inclusive

Dr Ian Gould AM PhD FTSE FAusIMM

Commenced on Board – 1998. Attended 9/10 meetings. Member Board SQR Management Committee. 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. Over 20 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

Member Marketing Advisory Committee. Farmer and grazier at Mount Cooper on Eyre Peninsula. 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. Current Member Commonwealth Parliamentary Association and the South Australian Cricket Association.

Western Operations Board of Directors



Left to right: Neville Bassett AM, Richard Alder, Michael Hutson, Erica Smyth, John Hancock, Robyn Sermon, Dr Ann Ward, Colin Heath.

Neville Bassett AM

Director since 6 January 1997, Corporate Consultant, B Bus, FCA Special Responsibilities: Chairman, Member of the Remuneration Committee, Member of the Nominations Committee.

Richard Alder

Appointed by the Board on 20 December 2007 as an independent director. Qualifications and experience: Retired Financial Advisor, Member of the Risk and Audit Committee, Representative on Australian Council and National Board.

Michael Hutson

Director since 23 October 2004, Accountant, B Com, FCPA, Member of the Remuneration Committee.

Erica Smyth

Appointed by the Board on 26 February 2010 as an independent director, Geologist BSc (Hons), Hon DLitt W Aust, MSc (App) McG, and Company Director, FAICD, Chair of the Risk and Audit Committee.

John Hancock

Appointed to the Board to fill a casual vacancy on 14 June 2014, Mining Consultant and Company Director.

Robyn Sermon

Elected to the Board on 25 October 2013, Bachelor of Arts in Industrial Relations & English and post-graduate degrees in Journalism and Cross Sector Partnerships. General Manager Communities Rio Tinto Iron Ore.

Dr Ann Ward

Director since 24 October 2010, Medical Practitioner MBBS FRACGP DipRANZCOG (adv) DipTropMed DACCO; DACSCM, Member of the Remuneration Committee.

Colin Heath

Elected to the Board on 26 October 2012, Licensed Real Estate Agent, Property Developer and Company Director, Member of the Risk and Audit Committee.










How you can help >

Whilst the Royal Flying Doctor Service receives some support from Commonwealth, State and Territory governments, we rely heavily on fundraising and donations from the community to purchase and medically equip our aircraft and to support other health initiatives.

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